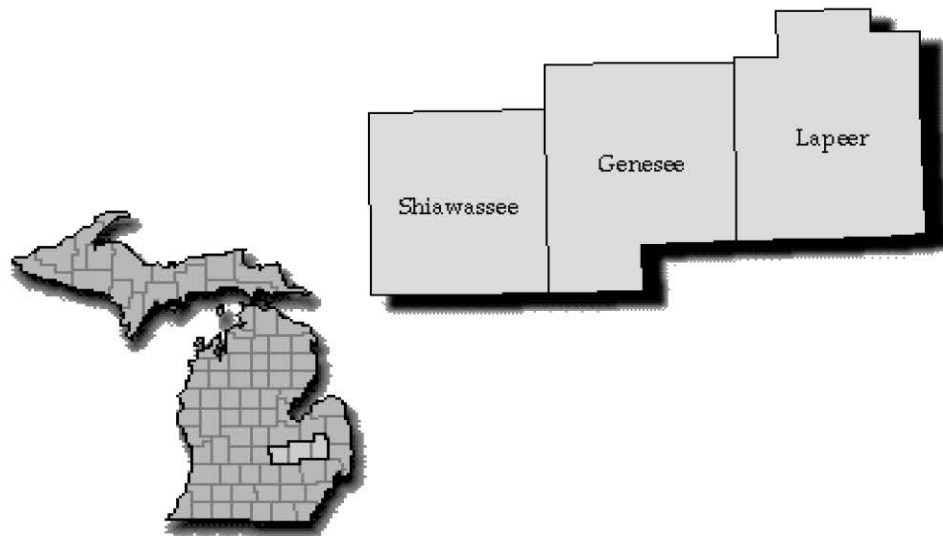


2023—2025 Multi Year Plan
FY 2023 ANNUAL IMPLEMENTATION PLAN
VALLEY AREA AGENCY ON AGING 5



Planning and Service Area

Genesee, Lapeer, Shiawassee

Valley Area Agency on Aging

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County/Local Unit of Government Review

Area Agencies on Aging must send a letter, with delivery and signature confirmation, requesting approval of the final MYP/AIP by no later than June 24, 2022, to the chairperson of each County Board of Commissioners within the Planning and Service Area (PSA), requesting their approval by July 12, 2022. For a PSA comprised of a single county or portion of the county, approval of the MYP/AIP is to be requested from each local unit of government within the PSA. If the area agency does not receive a response from the county or local unit of government by July 14, 2022, the MYP/AIP is deemed passively approved. The area agency must notify their Bureau of Aging and Community Living Supports (ACLS Bureau) field representative by July 18, 2022, whether their counties or local units of government formally approved, passively approved, or disapproved the MYP/AIP. The area agency may use electronic communication, including email and website-based documents, as an option for acquiring local government review and approval of the MYP/AIP. To employ this option, the area agency must:

Send a letter through the US Mail with delivery and signature confirmation or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft MYP/AIP on the area agency's website. Instructions for how to view and print the document must be included. Offer to provide a printed copy of the MYP/AIP via US Mail or an electronic copy via email, if requested. Be available to discuss the MYP/AIP with local government officials, if requested. Request email notification from the local unit of government of their approval of the MYP/AIP, or their related concerns. Please describe the efforts, including the use of electronic communication, made to distribute the MYP/AIP and to gain support from the appropriate county and/or local units of government.

Valley Area Agency on Aging (VAAA) determines priority services by holding multiple focus groups consisting of participants, seniors, supports coordinators, and service providers and stakeholders, reviewing the results of the 2019 Senior Needs Survey. The identified priority services are then presented at the public hearings. Two public hearings were held, one virtually and one in-person for all three counties in PSA 5. The information that is presented at the public hearings helps VAAA ensure that the priority services are updated for each county in relation to the input from each county and their needs. After the final public hearing has been held the final draft of the Multi-Year Plan is presented to the Advisory Council and Board of Directors for their approval. A copy of the approved final version of the FY 2023-2025 Multi-Year Plan (MYP) will then be posted to VAAA's website (www.valleyareaaging.org). A cover letter is sent to the Chairman of the County Board of Commissioner's for Genesee, Lapeer, and Shiawassee Counties, by June 24, 2022. The cover letter will state the FY 2023-2025 Multi-Year Plan is available for viewing by clicking the link on the VAAA website. Copies of the FY 2023-2025 MYP can also be printed from the website as well. VAAA will provide a copy of the FY 2023-2025 Multi-Year Plan through the U.S. Mail if requested. VAAA will request review and approval of the MYP with a deadline date of July 12, 2022, for a response. If no response is received the MYP will be deemed passively approved. VAAA will notify their ACLS Bureau field representative by July 18, 2022, whether the counties or local government formally approved, passively approved, or disapproved the FY 2023-2025 Multi-Year Plan.

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Executive Summary

The executive summary provides a succinct description of the priorities set by the area agency for the use of Older Americans Act (OAA) and state funding during FY 2023-2025. Please include a summary of your agency that touches on each of the items listed below.

1. A brief history of the area agency and respective PSA that provides a context for the MYP/AIP. It is appropriate to include the area agency's vision and/or mission statements and a brief description of the PSA. Include information on the service population, agency strengths, challenges, opportunities, and primary focus for the upcoming three-year period.
2. A description of planned special projects and partnerships.
3. A description of specific management initiatives the area agency plans to undertake to achieve increased efficiency in service delivery, including any relevant certifications or accreditations the area agency has received or is pursuing.
4. Address the agency's response to the COVID-19 pandemic emergency, including a description of the challenges and continuing needs due to this emergency.
5. Any significant new priorities, plans or objectives set by the area agency for the use of OAA and state funding during the MYP. If there are no new activities or changes, note that in your response.
6. A description of the area agency's assessment of the needs of their service population. See *Operating Standard for AAAs C-2, 4.*

Valley Area Agency on Aging (VAAA) is a federally designated point for planning and coordinating services for advocating on behalf of persons 60 years of age or older at the local and regional levels. The passage of legislation known as the Older Americans Act of 1965 authorized the formation of Area Agencies on Aging. Valley Area Agency on Aging (VAAA), currently under the direction of Yaushica Aubert, President & CEO, is one of 16 Area Agencies on Aging in the State of Michigan and was incorporated in 1976 as a private non-profit agency to serve the counties of Genesee, Lapeer, and Shiawassee (also referred to as Planning and Services Area (PSA) or Region 5). VAAA's mission is to provide action, advocacy, and answers for all things senior for the elderly and disabled adults of Genesee, Lapeer, and Shiawassee Counties, by enhancing lives, empowering choice, sustaining independence, and supporting caregivers and families. The organization's vision is focused on serving a diverse clientele with a range of care, planning, and service options by utilizing core values of Leadership, Trust/Integrity, Advocacy, and Commitment to Excellence. Our goal is to provide assistance with "All Things Senior." To fulfill our goal and mission, VAAA must develop a comprehensive three-year plan that will be utilized as the blueprint document to carry out the overall mission of the Area Agency.

Services are available to any senior in need; however, VAAA works to reach those who are the neediest. According to the Bureau of Aging, Community Living, and Supports or ACLS Bureau (2022), there has been significant growth in the number of persons aged 60 and over, the elderly minority population, and seniors who report being frail and/or living with a disability. The 60+ population has increased more than 11.5% in Region 5

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(124,015 to 139,863). The minority elder population has surged from 16,424 to 22,265 (over 35%). Seniors who report being frail and/or living with a disability have increased by over 3,700 to 44,551. The growth is expected to continue through at least 2025. The 2020 data for those 60+ living 150% or below poverty has not been released, although we suspect growth in that area as well. Per the 2019 Data Source for 60+ Greatest Economic Need (150% of Poverty) from the ACLS Bureau, there were 22,265 seniors at or below 150% of poverty residing in Region 5, compared to the FY 2010 number of 16,424. That is an increase of over 31%.

Not only has the senior population continued to grow, but so have their service needs and their level of care. The MI Choice Waiver program serves seniors who meet nursing facility level of care. Without our programs and services, these participants would likely be placed in a long-term care facility. In FY 2021, VAAA served the 2nd highest Significant Support Population (SSP). SSPs are nursing home transitioned participants, extensive service and support participants, or participants with severe cognitive impairment, specific diseases, severely impaired physical functioning, or high service use. Valley Area Agency on Aging was 4th overall statewide in servicing seniors with a high acuity rate. Acuity includes participants who fall into specific categories such as rehabilitation, extensive special care, special care, clinically complex, cognitively impaired, behavior problem, and physical functioning. The highest need categories for FY 2021 were those shown to be clinically complex and those with physical functioning limitations. Clinically complex participants are those who need total assistance with at least one Activity of Daily Living (ADL), their cognition is 100% impaired (no consciousness/coma), they are dependent on a feeding tube, and/or they have certain identified diagnoses (such as COPD). The needs are high, and it is imperative to provide person-centered Home and Community Based (HCBS) Services to keep participants in the setting of their choosing, aging well, and remaining as independent as possible, as long as possible, in the most cost-effective way possible.

Valley Area Agency on Aging (VAAA) endeavors to utilize funding to the maximum service levels while keeping administrative costs under the standard 10%. In FY 2021 administrative expenses were 5.6%. As a result, over 94% of the dollars received are used for services for our participants. The leadership reviews the staffing needs of the organization. Positions have been consolidated and duplications of effort and redundancies have been eliminated. VAAA will continue to review and revise workload levels in order to maximize the productivity of our employees while lessening employee burnout. The VAAA team is strategizing to recruit and retain qualified staffing. This assists with keeping costs minimized as it is an estimated \$10,500 to recruit and train each new employee. Additional grant funding will be sought to assist with service need. The agency will continue to review our overhead expenses, such as benefit packages, in order to identify savings. Due to the pandemic and transitioning to remote working, there have been heavy investments in technology such as Zoom, Microsoft Teams, cellular phones, and computers. Employees were surveyed regarding the remote working experiences and 90% of the team members requested to maintain a hybrid mode. Remote working has shown to increase employee productivity; in 2021 analysis show there was a 92% on time assessments/reassessment rate, and over 96% of on time monthly calls in the Care Management and Waiver Programs. VAAA will continue to identify cost-saving measures and utilize other resources that may be used to provide services to the 60+ in FY 2023 and beyond.

During FY 2021, it was of the utmost importance for Valley Area Agency on Aging (VAAA) to provide quality services while keeping seniors, caregivers, and our team safe and healthy as much as possible. The highs and lows of the pandemic were challenging. Just when it was thought cases were declining, an increase in cases would occur; not just an increase, but spikes similar to that in FY 2020. However, VAAA continued persevering: We updated, educated, provided and served even more participants than in previous years.

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Listed are but a few of the goals accomplished by the VAAA team in FY 2021:

- Continued dissemination of Personal Protection Equipment to the community
- Created and initiated a pandemic hotline
- Expanded the Keeping Independent Seniors Safe (KISS) Program to include Shiawassee County
- Added new programming (such as the tablet distribution program, telehealth, COVID hotline, and Boxes, Bags and Buddies)
- Revamped the VAAA logo and marketing strategy
- Ranked number 3 overall in 2021 statewide quality withhold for the MI Choice Waiver Program
- Scored 95.98 out of 100 on the State's Clinical Quality Administrative Review
- Increased community partnerships and collaborations
- Diversified funding streams
- Implemented a cloud-based fax service that replaces landlines in favor of faster and more reliable Ethernet lines.
- Fraud, Waste and Abuse Program recouped \$13,943.23
- Strengthened cyber security
- Ended FY 2021 with 0 persons on the MI Choice Waiver wait-list
- Implemented DocuSign – Secure electronic documentation signing
- Developed efficiencies resulting in savings in excess of \$164,000 (i.e.: staffing, supplies)

Valley Area Agency on Aging continued its efforts to keep our community safe and provide updated education and information regarding COVID-19 in FY 2021. In response to the growing needs brought on by the pandemic, VAAA implemented its COVID-19 hotline. The number is 810-600-0617. Although our Information and Assistance team continues to provide COVID-19 resources, the concentrated line for the community handled 8,366 calls and allowed for more efficiency to:

- Assist callers with scheduling their vaccine or booster shots
- Schedule vaccines/boosters for any homebound seniors
- Schedule transportation as needed to sites for testing or vaccines
- Provide testing locations/information
- Provide vaccine/booster locations and resources
- Arrange for homebound vaccines for any adult foster care (AFC) homes
- Give focused and updated information for COVID related questions.

Additionally, because many seniors remained in their homes to reduce the risk of exposure, VAAA continued to provide food and nutrition resources to seniors and the community. In 2021 VAAA received 1,664 emergency food boxes. 514 boxes were disseminated in Genesee County, 450 in Lapeer County, and 700 were distributed in Shiawassee County. VAAA also worked with Flint Fresh and the Community Foundation of Greater Flint to fund 1,972 fresh produce boxes delivered directly to the homes of seniors who reside in Flint. Our continued partnership with Moms' Meals resulted in 74,281 meals to seniors in FY 2021.

VAAA continued to be a source of Personal Protection Equipment (PPE) for our region. Our team maintained a stock of hand sanitizer, masks, disinfectant cleaner, shoe covers, face shields, gloves, and more. There were over 30,000 pieces of PPE distributed in FY 2021. Since the onset of the pandemic in 2020 over 126,726 meals and PPE has been disseminated throughout Region 5. VAAA utilized some of the American Rescue Plan (ARP) funds to purchase equipment for our nutrition programs in Genesee and Shiawassee counties.

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These purchases included items such as utility bags, electric food slicer, utility carts, electric pallet truck, microwave, and refrigerator/freezer combo. The purchase of these items will assist the nutrition providers with ensuring their processes are more efficient and that they can continue to meet the needs of the participants we serve through our nutrition programs. Valley Area Agency on Aging will remain a means of community and senior support in Genesee, Lapeer, and Shiawassee Counties in FY 2022 and beyond regarding COVID resources, partnerships, and supplies (as available).

Valley Area Agency on Aging has no significant new priorities as the determined priorities remain the same as in previous years. There have also been no significant changes for the use of OAA and state funding during the MYP.

To gain input from those in Region 5 in FY 2022, VAAA conducted four focus groups to receive feedback regarding priorities and gaps in service. Each focus group was specialized and consisted of: a group of participants, a group of seniors, a group of various Supports Coordinators, and a group of service providers/stakeholders. A total of 34 people participated in the focus groups. VAAA also reviewed the 2019 Senior Needs Survey that included clients, seniors age 60 and over as well as the community at large. 2,500 surveys were sent out to those residing in all three counties and included a random selection of seniors receiving services and a random mailing of registered voters age 60 and over. The questionnaire surveyed seniors on their service needs in the following areas: housing and income, transportation, health, caregiving, socialization, community involvement, and service priorities. As a result of the focus groups and the needs survey, the priorities were identified as:

1. Personal care/homemaking
2. Meals
3. Information and assistance
4. Assistance for caregivers
5. Transportation

As a result of the pandemic and not surprisingly, other service needs identified were:

Continued virtual programming

Assistance with learning technology (such as social media and online shopping)

Companionship

Home modifications

Access to “oops” funding – funding that covers needs of seniors that is not traditionally covered under current programming (ex: assistance with uniforms for Seniors raising children, assistance with essentials such as mattresses, hearing aids, co-pays for medical visits, animal/pest removal, fence repair, and assistance with appliance repair/replacement).

VAAA will work to seek out grant dollars, develop partnerships/collaborations and implement programming to meet the service needs identified.

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Public Hearings

The area agency must employ a strategy for gaining MYP/AIP input directly from the planned service population of older adults, caregivers, and persons with disabilities, along with elected officials, partners, providers and the general public, throughout the PSA. The strategy should involve multiple methods and may include a series of input sessions, use of social media, on-line surveys, etc.

At least two public hearings on the FY 2023-2025 MYP/AIP must be held in the PSA. In-person hearings are preferred, but virtual hearings are acceptable if they follow Michigan's Open Meetings Act and the requirements of the area agency's governing authorities. The hearings must be accessible. When deciding between online and in-person meetings, consider limitations to internet access and other accessibility issues with the relevant populations in your region. In person, e-mail, and written testimony must also be accepted for at least thirty days beginning when the summary of the MYP/AIP is made available.

The area agency must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the public about the hearing(s). Acceptable posting methods include but are not limited to: paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA, as well as news sources geared toward communities of color, people who are lesbian, gay, bisexual, transgender queer or other (LGBTQ+), immigrant communities and/or other underrepresented groups; presentation on the area agency's website, along with communication via email and social media referring to the notice; press releases and public service announcements; and a mailed notice to area agency partners, service provider agencies, Native American organizations, older adult organizations and local units of government. See *Operating Standards for Area Agencies on Aging*, Section B-2 #3. The public hearing notice should be available at least thirty days before the scheduled hearing. This notice must indicate the availability of a summary of the MYP/AIP at least fourteen days prior to the hearing, and information on how to obtain the summary. All components of the MYP/AIP should be available for the public hearings.

Complete the chart below regarding your public hearing(s). Include the date, time, number of attendees and the location and accessibility of each public hearing. Please scan any written testimony (including emails received) as a PDF and upload on this tab.

A narrative description of the hearings and the public input strategy is also required. Please describe the strategy/approach employed to encourage public attendance and testimony on the MYP/AIP. Tell us the strategy used specifically to inform communities of color, LGBTQ+, immigrant communities and/or other underrepresented groups. Describe all methods used to gain public input and the resultant impact on the MYP/AIP. Indicate whether the meeting(s) complied with the Michigan Open Meetings Act.

Date	Location	Time	Barrier Free?	No. of Attendees
05/10/2022	Virtual Zoom Platform	10:00 AM	Yes	10

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05/12/2022	Hasselbring Senior Center	10:00 AM	Yes	11
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Valley Area Agency on Aging (VAAA) held two public hearings for all three counties in Region 5. One meeting was held virtually and the second meeting was held in person at the Hasselbring Senior Center in Genesee County. Information and flyers for the public hearing were posted on the VAAA website and social media page. VAAA shared information regarding the public hearing in the Argus Press that serves Shiawassee County, and requested public hearing information be placed on MLIVE.com in Genesee County and Lapeer County's Silver Threads publication. Information regarding the public hearings was given to all senior centers in Genesee, Lapeer and Shiawassee Counties (19 total). VAAA also provided information regarding the public hearing during both its Advisory and Board of Directors meetings in addition to other community meetings. Information was also sent to over 200 providers and organizations via email some of which include Our Lady of Guadalupe, Hispanic Latino Collaborative, Wellness Services Inc., Arab American Heritage Council and PLAG of Flint, The Disability Network, The Hispanic Service Center, and The Communication Access Center for the Deaf and Hard of Hearing. VAAA presented its plan for the upcoming FY 2023-2025 to the public. The VAAA COVID response, priority services identified from the focus groups, Regional Service Definitions, and Program Development Initiatives, and funding were presented and approved at the public hearings. VAAA staff presented the funding breakdown for Genesee, Lapeer and Shiawassee Counties and was approved during the public hearing. VAAA presented its proposed Direct Service Requests for Friendly Reassurance and Disease Prevention/Health Promotion and approval was requested and given by the public during the public hearing. VAAA also reviewed the Access services that would be provided by VAAA including Care Management, Outreach, Information and Assistance and Case Coordination and Support with approval given during the public hearing. Valley Area Agency on Aging also shared information on the three regional service definitions that were created for Region 5 which include Emergency Gap Filling Service, Independence by Choice, and Community Living Supports and received approval to offer these services as needed. A question was asked regarding the services provided and inquiring if all services are geared towards those that are homebound and VAAA provided response that although some services are provided in-home there are also community programs such as Congregate Meals, Caregiver education and Disease Prevention/Health Promotion services available that target those more active older adults. There were no additional questions received during the public hearing or during the 30-day period following the public hearings. Positive feedback was provided from the public regarding the programming VAAA currently has in place as well as the proposed programming for FY 2023-2025. Based on the feedback provided from the public hearings, the Multi-Year Plan was approved.

Public Hearing information was posted 30 days prior to the public hearings with a copy of the draft MYP available by request 14 days prior to the event. Information was provided on who to contact if special accommodations were needed and a closed caption option was available if needed. The meeting was open to the public by call-in option, mobile device, computer or in person. VAAA received no requests for special accommodations and provided copies of the draft Multi-Year Plan to anyone who requested a copy. VAAA will continue to focus on the priority services identified during the public hearing, which continue to align with our current priority services.

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Scope of Services

The COVID pandemic has highlighted the importance of the aging service network. People over age 65 comprised 75 percent of COVID deaths in the US, or one in 100 people in that age group by the end of 2021. Fear of contracting the virus has caused long-term social isolation, resulting in serious physical and emotional health effects. The growing availability of supports delivered remotely has been of great assistance. Maintaining adequate services for those who are homebound and their caregivers will continue to be essential. Burdens on family caregivers have increased due to the closure of some in-person services because of the pandemic as well as because of the direct care worker shortage.

Most people with dementia live at home, supported by family and friends. Evidence-based interventions are effective methods for supporting both the person living with dementia and their caregivers. Aging service providers can provide services and support to maintain independence with referrals to healthcare professionals as appropriate.

Though we have long known that racial and ethnic minorities, the LGBTQ+ community and other disadvantaged groups have higher rates of disease and early death, the factors that lead to discrimination have not been fully explored. Growing determination to address diversity, equity and inclusion are leading us to look holistically at discrimination concerns with an eye toward eliminating disparities and micro-aggressions.

Constantly changing service demand challenges make it essential that the area agency carefully evaluate the potential, priority, targeted, and unmet needs of its service population(s) to form the basis for an effective PSA Scope of Services and Planned Services Array strategy. Provide a response to the following service population evaluation questions to document service population(s) needs as a basis for the area agency's strategy for its regional Scope of Services.

1. Describe key changes and current demographic trends since the last MYP to provide a picture of the potentially eligible service population using census, elder-economic indexes or other relevant sources of information.

Services are available to any senior in need; however VAAA works to reach those who are the most vulnerable. According to the Bureau of Aging, Community Living, and Supports or ACLS Bureau (2022), there has been significant growth in the number persons aged 60 and over, the elderly minority population and seniors who reports being frail and/or living with a disability. The 60+ population has increased more than 11.5% in Region 5 (124,015 to 139,863). The minority elder population has surged from 16,424 to 22,265 (over 35%). Seniors who report being frail and/or living with a disability has increased by over 3,700 to 44,551. The growth is expected to continue through at least 2025. The 2020 data for those 60+ living 150% or below poverty has not been released, although we suspect growth in that area as well. Per the 2019 Data Source for 60+ Greatest Economic Need (150% of Poverty) from the ACLS Bureau, there were 22,265 seniors at or below 150% of poverty residing in Region 5, compared to FY 2010 numbers of 16,424. That is an increase of over 31%.

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2. Describe identified eligible service population(s) characteristics in terms of identified needs, conditions, health care coverage, preferences, trends, etc. Include older persons as well as caregivers and persons with disabilities in your discussion.

Not only has the senior population continued to grow, but so has their service needs and their level of care. The MI Choice waiver programs serves seniors who meet nursing facility level of care, meaning without our programs and services, these participants would likely be placed in a long-term care facility. In 2021, VAAA served the 2nd highest Significant Support Population (SSP). SSP's are nursing home transitioned participants, extensive service and support participants, or participants with severe cognitive impairment, specific diseases, severe impaired physical functioning, or high service use. Valley Area Agency on Aging was 4th overall statewide in servicing seniors with a high acuity rate. Acuity equals participants who fall into certain categories such as rehabilitation, extensive special care, special care, clinically complex, cognitively impaired, behavior problem, and physical functioning. The highest need categories for FY 2021 were those who are shown to be clinically complex and those who have physical functioning limitations. Clinically complex participants are those who need total assistance with at least one Activity of Daily Living (ADL, their cognition is 100% impaired [no consciousness/coma]), they are dependent on a feeding tube, and/or they have certain identified diagnoses (such as COPD). The needs are high and it is imperative to provide person-centered Home and Community Based (HCBS) Services to keep participants in the setting of their choosing, aging well and remaining as independent as possible as long as possible in the most cost-effective way possible.

3. Describe the area agency's Targeting Strategy (eligible persons with greatest social and/or economic need with particular attention to low-income minority individuals) for the MYP cycle including planned outreach efforts with underserved populations and indicate how specific targeting expectations are developed for service contracts.

Valley Area Agency on Aging serves Genesee, Lapeer, and Shiawassee Counties. Services are targeted to seniors age 60 years of age and older and caregivers who are taking care of older adults. According to the Bureau of Aging, Community Living and Supports or ACLS Bureau (2022), there are 139,863 seniors residing in Region 5. The breakdown of seniors in Region 5 is as follows: 99,123 in Genesee County, 23,018 in Lapeer County, and 17,722 in Shiawassee County.

VAAA also targets those seniors with the greatest economic needs, meaning the person's income is at or below 150% of poverty. Within Region 5, there are 23,270 that fall within the category of greatest economic need with 71% residing in Genesee County. Seniors who are deemed as the greatest economic need are at risk, as they frequently must choose between paying for medications, purchasing food, paying bills, or buying clothing. VAAA works to help those seniors meet all their needs so they don't have to be placed in a position to have to make those decisions.

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Minorities are also another target population that VAAA strives to serve. Region 5 has a minority population of 22,265. Of that 93% of the minority population resides in Genesee County. Of the remaining minority population 875 reside in Lapeer County and 585 reside in Shiawassee County. Minorities statistically have increased rates of chronic illness due to lack of health coverage and have higher poverty levels than the general public, therefore making them more at risk.

VAAA also works to ensure that care is provided to the frailest population. This is done by the Supports Coordinators completing a comprehensive assessment that determines the seniors needs based on the Activities of Daily Living (ADL), such as the ability to complete one's personal care, and Independent Activities of Daily Living (IADL), which include the ability to complete household tasks such as laundry or housekeeping tasks. Support systems, mental health, diagnoses, medications, in addition to other pertinent components of a seniors life are assessed. Services are discussed and a care plan is developed based on the assessment and conversations with the Support Coordinator(s), client and others such as family or caregivers. Clients are reassessed based on the program they are receiving service from, and the health and needs of the senior.

4. Describe the agency's past practices, current activities and plans for addressing the needs of people living with dementia and their caregivers.

Valley Area Agency on Aging staff utilize the Michigan Intake Guideline (MIG) and the Nursing Home Level of Care (LOC) for identifying persons with possible dementia or cognitive impairment. In order to supply the information regarding those persons with possible cognitive impairment to service providers, case managers and eligibility determination staff use telephonic questions during the initial intake concerning the individual's capacity and mental functioning. Once that is completed, VAAA staff provides service providers as well as other staff detailed participant information utilizing a secure file exchange. The actual assessment and cognition evaluations are conducted in person. VAAA does not have in place a standard protocol for referring those identified as having possible dementia or a cognitive impairment to a physician's office or clinic in order to receive a diagnostic evaluation. Identification of caregivers or representatives is a standard protocol that allows VAAA to also determine if the person lives alone or not.

Currently there is no protocol to be followed if a person is deemed to live alone. All staff receive formal training in the format of conferences and in-service meetings. VAAA also uses online webinars when available. All VAAA Information and Assistance staff are certified in AIRS CIRS-A/D (Certified Information and Referral Specialist—Aging/Disabilities), caregiver coping strategies, caregiver burnout, self-determination and person centered planning. Furthermore, all social workers and RNs are licensed by the state. Annual license recertification is also required to maintain employment. Valley Area Agency on Aging utilizes formal criteria to select dementia specific service providers to refer those with dementia or cognitive impairment to. In order to refer those with these conditions to specific service providers a standard protocol must be followed. The protocol is based on the individual assessments completed by trained staff.

VAAA also provides Creating Confident Caregivers (CCC) which is a six-week, two-hour-per-week program for family members caring for a loved one with dementia and/or memory loss. The two-hour sessions held once a week are led by a dementia care specialist. In this program, caregivers learn about dementia and its effects on the brain, caregiver resources in Region 5, managing difficult behaviors, improving caregiving skills, handling everyday activities more easily, and taking care of yourself to better care for your loved one. Classes are provided in person or via Zoom.

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Developing Dementia Dexterity (DDD) is a shortened version of CCC and is provided via Zoom. DDD is a three-week, 90 minutes each week program for family members caring for a loved one with dementia and/or memory loss. The 90-minute sessions each week are led by dementia care specialists. In the program, caregivers will learn what dementia is, how to deal with difficult behaviors, and how to incorporate family and local resources into their daily caregiving.

For these two classes, 42 caregivers were assisted in FY 2021. Surveys were given to each caregiver after the class. Those who completed the survey report: 87% of caregivers felt the program was relevant to their situation, 100% would recommend the class to other caregivers, 87% of the caregivers felt more capable as a caregiver after completing the class, and 91% felt the program provided useful knowledge about dementia and caregiving strategies.

Valley Area Agency on Aging also offers virtual dementia tours to the community and provider network. These tours help the individual participating understand what a person with dementia may experience. VAAA plans to continue offering these programs throughout FY 2023.

5. When a customer desires services not funded under the MYP or available where they live, describe the options the area agency offers.

VAAA's Aging and Disability Resource Center (ADRC) continues to work to assist in meeting the needs of seniors and caregivers in Region 5 as unmet needs, gaps, and service needs are identified. VAAA will continue to provide information, resources, and referrals to various programs such as County Millage services, the MI Choice Waiver program, and to our aging partners throughout Region 5. Referrals can be made over the phone, or in the client's home via social worker/options counselors. If requested, information given can be mailed via postal service or emailed. VAAA will follow up within 2 weeks with the client to ensure the need was addressed and to provide additional assistance if necessary.

VAAA frequently makes referrals to outside programs and agencies such as: The Genesee, Lapeer and Shiawassee County millage programs, Food Banks, Department of Health and Human Services, Catholic Charities, Salvation Army, and a plethora of other service providers and agencies. VAAA works hard to provide a resource to every caller, whether it is internal services (such as the MI Choice Waiver Program, or Keeping Independent Seniors Safe -KISS) or external programs and agencies such as Alzheimer's Association and others as described above.

6. Describe the area agency's priorities for addressing identified unmet needs within the PSA for FY 2023-2025 MYP.

To gain input from those in Region 5 in FY 2022, VAAA conducted four focus groups to receive feedback regarding priorities and gaps in service. Each focus group was specialized and consisted of: A group of participants, a group of seniors, a group of various Supports Coordinators, and a group of service providers/stakeholders. A total of 34 people participated in the focus groups. VAAA also reviewed the 2019 Senior Needs Survey that included clients, seniors age 60 and over, and the community at large. Two thousand five hundred (2,500) surveys were sent out to those residing in all three counties. They included a random selection of seniors receiving services and a random mailing of registered voters age 60 and over. The questionnaire surveyed seniors on their service needs in the following areas: housing and income,

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transportation, health, caregiving, socialization, community involvement, and service priorities. As a result of the focus groups and the needs survey, the priorities were identified as:

1. Personal Care/Homemaking
2. Meals
3. Information and Assistance
4. Assistance for caregivers
5. Transportation

As a result of the pandemic and not surprisingly, other service needs identified were:

Continued virtual programming

Assistance with learning technology (such as social media and online shopping)

Companionship

Home modifications

Access to “oops” funding – funding that covers the needs of seniors that are not traditionally covered under current programming (ex: assistance with uniforms for Seniors raising children, assistance with essentials such as mattresses, hearing aids, co-pays for medical visits, animal/pest removal, fence repair, and assistance with appliance repair/replacement).

The priorities and identified unmet needs were confirmed during the public hearings and the feedback received from the public. VAAA will work to seek out grant dollars, develop partnerships/collaborations and implement programming to meet the service needs identified.

7. Where program resources are insufficient to meet the demand for services, reference how your service system plans to prioritize clients waiting to receive services, based on social, functional and economic needs.

Valley Area Agency on Aging created the regional service definition and began implementation of the “Independence by Choice Program”, which uses a multi-level intervention to assist area seniors 60+ years of age or older living in Genesee County. The program uses multiple funding sources to enhance the agency’s in-home care program outcomes by reducing long waitlists and increasing seniors served. The traditional program models focused on providing assistance once the person’s name came to the top of the waitlist. The Independence by Choice program focuses on using multiple levels of intervention while the person is on the waiting lists for long term care services.

All persons contacting the agency seeking long term care services are screened using the Independence by Choice process. The program is set up into 5 tiers starting with a telephonic Social Work assessment to identify the applicant’s ability to care for him or herself. A person-centered plan is developed with the participant to identify what is important to them. The Social Worker helps the participant to find ways that they can participate in achieving their goals. Tier 2 is based on a face to face meeting with the participant and his/her family to discuss long term care options. Tiers 3, 4, and 5 provide in-home services, with Tier 3 providing minimal care management, to Tier 4 including a telehealth option and Tier 5 including services for applicants that are high acuity requiring substantial service assistance along with a Register Nurse Care Manager. The process has proven very successful in its implementation. The agency was able to reduce the MI Choice Waiver waitlist by 100%. Through this process VAAA provided 123 seniors 698 hours of service in FY 2021. All of these seniors were provided a face-to-face or virtual interview along with information and referrals within the community based on their wants and needs. The implementation of this program has helped VAAA

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to prioritize the needs of the clients who otherwise would have to wait to receive services. Valley Area Agency on Aging intends to continue this program for FY 2023 - 2025.

Valley Area Agency on Aging will continue to screen participants through our Information and Assistance department for eligibility to each program and prioritize them based on their needs in order to receive services where resources are insufficient to meet the need.

8. Summarize the area agency Advisory Council input or recommendations (if any) on service population priorities, unmet needs priorities and strategies to address service needs.

The Valley Area Agency on Aging's Advisory Council meets a minimum of 6 times annually. They review, approve and or recommend several items to the VAAA Board of Directors, including, but not limited to: Contract awards, amendments, and Multi-Year and Annual Plans. Action items are discussed during the Advisory Council, and a vote is taken. The action item as well as the results are noted in the minutes. The results of the action items are taken to the board for final approval. The action items and voting outcomes are noted in the minutes. The VAAA Advisory Council assists with fundraising measures, such as selling raffle tickets for Senior Power Day. They also volunteer at various VAAA events, such as Senior Power Day, focus groups, and public hearings. Unmet needs, gaps in services, and program development initiatives are discussed at these forums. Once initiatives are developed, they are discussed and approved within the Advisory Council and sent on to the Board of Directors for final approval. The Council also plays an important role in Legislative Advocacy events as well, by participating in the Older Michiganians Day, and assisting with petition signing at Senior Power Day and recommending advocacy correspondence regarding legislative issues.

9. Summarize how the area agency utilizes information, education, and prevention to help limit and delay penetration of eligible target populations into the service system and maximize judicious use of available funded resources.

Information & Assistance (I & A) has been identified as a priority service within Genesee, Lapeer and Shiawassee Counties. Seniors and Caregivers are confused as to who to turn to for questions regarding the needs of their loved ones, services, or assistance with Long Term Care. Valley Area Agency on Aging has increased the Information and Assistance's Outreach and Education by becoming much more active in the community. In 2021, there were 124 Outreach events reaching over 3,000 seniors held by the I & A department. In FY 2021 there were 36,089 calls received through the I & A department, which is constantly increasing. VAAA has continued ramping up the I & A department and expects to serve even more seniors and caregivers in 2023 and beyond. The overall goal is to provide linkage to agencies, services and programs to those needing assistance as soon as possible. Doing this assists in reducing nursing home placements for as long as possible.

10. Identify the five service categories receiving the most funds and the five service categories with the greatest number of anticipated participants.

Valley Area Agency on Aging's five service categories that receive the most funding include: Care Management services, In-home services (including Personal care and Homemaking), Nutrition services, Information and Assistance and Respite services which align with the priority services identified by VAAA. These same service categories services the greatest number of participants, confirming the five service

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categories receiving the most funds are necessary services to continue to meet the needs of seniors in Region 5.

VAAA will continue to review administrative efficiencies, service implementation, and supplemental services to ensure effective and efficient provision of core services to seniors and caregivers within Region 5.

11. Describe the area agency's efforts to ensure diversity, equity, and inclusion, including how the agency ensures that staff at their agency and subcontracting agencies is diverse, equitable, inclusive and knowledgeable of the harms of implicit bias?

To educate Valley Area Agency on Aging staff, providers, and the community at large on the challenges Lesbian, Gay, Bisexual, and Transgender (LGBT) Elders face, VAAA implemented a LGBT training program. VAAA purchased the LGBT Elder Cultural Competency Training from Elder Source Institute. The Lesbian, Gay, Bisexual, Transgender Cultural Competency Training learning outcomes include:

Increased understanding of diversity among elders, their families, and caregivers
A better understanding of the concepts of sexual orientation and gender identity
Increased awareness of environments that are characterized by inclusion, respect, and dignity
Tools for learning inclusive communication skills with LGBT elders, their families, and caregivers
Lessons on how to use affirmative language for appropriate interactions with the LGBT community
Creation of action plans to care for LGBT seniors

Since beginning this training program, VAAA has offered several trainings to our provider network and the VAAA staff. In FY 2021, VAAA held two LGBT trainings for all new and current providers. In addition, VAAA offers this training to agencies that would like all staff to participate in the training. This training is beneficial for the following types of organizations: nurses, social workers, nursing home administrators, occupational therapists, physical therapists, law offices, adult protective services, hospitals, etc. Offering this program will help create an additional revenue stream for Valley Area Agency on Aging. VAAA plans to host two provider trainings for the provider network and training for new VAAA staff during FY 2022 and beyond.

VAAA also requires its staff to participate in trainings surrounding Diversity, Equity, and Inclusion (DEI) and implicit bias throughout the year and offers trainings to its provider network as necessary. DEI trainings and implicit bias training are offered to the provider network as available and updates and information on these topics are provided as they are made available. VAAA plans to grow its trainings during FY 2023 - 2025.

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Planned Service Array Complete the FY 2023-2025 MYP/AIP Planned Service Array form for your PSA. Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.
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	Access	In-Home	Community
Contracted by Area Agency	<ul style="list-style-type: none"> • Care Management • Case Coordination and Support • Information and Assistance • Outreach 	<ul style="list-style-type: none"> • Home Injury Control * • Homemaking • Home Delivered Meals • Medication Management • Personal Care • Respite Care 	<ul style="list-style-type: none"> • Adult Day Services * • Congregate Meals • Legal Assistance • Long-term Care Ombudsman/Advocacy • Programs for Prevention of Elder Abuse, Neglect, and Exploitation • Kinship Support Services * • Caregiver Education, Support and Training
Local Millage Funded	<ul style="list-style-type: none"> • Care Management • Case Coordination and Support • Information and Assistance • Transportation 	<ul style="list-style-type: none"> • Chore * • Homemaking • Home Delivered Meals • Medication Management • Personal Care • Respite Care 	<ul style="list-style-type: none"> • Adult Day Services * • Congregate Meals • Legal Assistance • Senior Center Operations • Senior Center Staffing
Funded by Other Sources	<ul style="list-style-type: none"> • Transportation 	<ul style="list-style-type: none"> • Home Health Aide • Respite Care 	

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<p>Provided by Area Agency</p>	<ul style="list-style-type: none"> • Care Management * • Case Coordination and Support * • Information and Assistance • Outreach 	<ul style="list-style-type: none"> • Friendly Reassurance 	<ul style="list-style-type: none"> • Disease Prevention/Health Promotion • Emergency Gap Filling Services Definition of Service The provision of services and assistance provided to seniors 60+ years of age or older residing within Region 5 in the event of an emergency. These services will help to eliminate threats to the independence, health, safety, and well-being of older adults. These services would be provided when the emergency requires immediate action and when other resources are unavailable. • Independence by Choice Program Definition of Service The program will focus on providing multi-levels of interventions to assist area's seniors 60+ years of age or older living in Genesee County. The program will seek to utilize Case Coordination and Support, Care Management, Information and Assistance, and other services to enhance seniors' and caregivers' ability to maintain living independently. The traditional program models focus on providing assistance once the person's name comes up on the waitlist. The Independence by Choice program focuses on using multiple levels of intervention while the person is on the waiting list for long-term care services. • Community Living Supports Definition of Service Community Living Supports facilitates an individual's independence and promotes participation in the community. Community Living Supports can be provided in the participant's residence or community settings. Community Living Supports
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			<p>includes assistance to enable program participants to accomplish tasks that they would normally do for themselves if able. The services may be provided on an episodic or a continuing basis. The participant oversees and supervises individual providers on an ongoing basis when participating in self-determination options. These services are provided only in cases when neither the participant, nor anyone else in the household, is capable of performing or financing them and where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for their provision. When transportation incidental to the provision of community living supports is included, it must not also be authorized as a separate waiver service for the beneficiary.</p>
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* Not PSA-wide

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Planned Service Array Narrative

Describe the area agency's rationale/strategy for selecting the services funded under the MYP/AIP in contrast to services funded by other resources within the PSA, especially for services not available PSA-wide.

Instructions

Use the provided text box to present the Planned Service Array narrative.

Based on the feedback from Public Hearings, focus groups, and Senior Needs surveys, priority services were identified. Since the population is continuing to grow older and funding is not increasing, the focus has been placed on these priority services. In all three counties the services that have been identified are Information & Assistance, In-home services such as personal care, support services for caregivers, such as respite (a service which allows caregivers to receive a break from their caregiving duties), Training and Education, and Nutrition programs such as Home Delivered Meals. A nutritious meal, a bath, information and relief services for caregivers are imperative to keeping seniors living in their own homes for as long as possible.

Transportation continues to be mentioned as an ongoing need as well. Any services that are not funded regionally have been at the request of each county. VAAA has complied with this request since services are tailored to each community's needs and each community has a Senior Millage to assist in any unmet needs.

Valley Area Agency on Aging continues to be a direct provider of Care Management, Case Coordination and Support (CCS), and Information and Assistance for Genesee County under the Aging and Disability Resource Center (ADRC). Under the Direct Service Waiver granted, VAAA will provide all of the Evidence Based Chronic Disease Prevention Programs as well as continue to collaborate with various organizations such as the Arthritis Foundation, Tivity Health, and the Alzheimer's Association to assist in promoting, supporting, and implementing the Chronic Disease Evidence Based Programs and will target those seniors attending wellness centers, senior centers, churches, senior housing facilities, and other places seniors congregate. The KISS program uses a grant provided by the United Way and VAAA provides unrestricted funds for the Lapeer and Shiawassee County KISS Programs. Valley Area Agency on Aging has also requested a direct service request for Outreach services and will continue to collaborate with community organizations to provide this service to Region 5. In addition, VAAA has requested a Regional Direct Service request to provide the Independence by Choice (IBC) Program, Emergency Gap Filling services, and Community Living Support services and will provide the services directly to those who qualify.

In-home services and Community services have been subcontracted to Genesee County community organizations which include: Genesee County Community Action Resource Department (GCCARD), Active Adult Day Health, and Legal Services of Eastern Michigan. In Lapeer County, Care Management, Homemaking, Home Delivered Meals, Congregate meals, Personal Care, and In-home respite are subcontracted to the Lapeer County Health Department (LCHD). The Lapeer County Health Department utilizes millage dollars as well as other funding and provides their county with Information and Assistance. The medication management and chore program for LCHD is funded using millage dollars. Outreach and respite are provided in Lapeer County by the Hispanic Service Center. Shiawassee Council on Aging (SCOA) is subcontracted to provide Shiawassee County with Case Coordination and Support, Information and Assistance, Home Injury Control, Homemaking, Personal Care, In-home respite, congregate meals, and

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Home Delivered Meals. The Shiawassee County senior millage also funds many services in Shiawassee County. The Care Management, Medication Management, and Adult Day Service services are subcontracted to Care N Assist, located in Shiawassee County. SCOA also provides Outreach services, but they are currently not funded with Older Americans Act dollars.

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Strategic Planning

Strategic planning is essential to the success of any area agency on aging to carry out its mission, remain viable and capable of being customer sensitive, demonstrate positive outcomes for persons served, and meet programmatic and financial requirements of the ACLS Bureau. Agencies must be proactive in establishing safeguards in case of internet failure, hacking, or other connectivity issues. The increasing frequency of climate-related disruptions make emergency planning a priority.

All area agencies are engaged in some level of strategic planning, especially given the changing and competitive environment that is emerging in the aging and long-term-care services network. Provide responses below to the following strategic planning considerations for the area agency's MYP.

1. Describe your process to analyze your agency's strengths, weaknesses, opportunities and threats.

As part of Valley Area Agency on Aging's Strategic Planning Process the Strengths, Weakness, Opportunities, and Threats (SWOT) analysis was updated. Some findings include:

Strengths:

Commitment to the mission
Tenure and stable leadership
Contact to community (individual)
Strong professional networking and connection to resources Subject Matter Expertise (SME)
Provider Monitoring
Well-established and capable of achieving goals and objectives
Growth of evidence-based programs
Proactive in merging advocacy efforts
Community ties
External professional resources
Respect in the community especially due to the tenure of the leadership
Access to hospitals
Access to local college partnerships
Advocacy
Service neutrality
A national presence
Strong provider network
Increased use of technology
New marketing and rebranding
National Center for Quality Assurance (NCQA) accredited
Alliance of Information and Referral Systems (AIRS) certified
Aging and Disability Resource Center (ADRC)

Weakness:

Staff suffering from COVID burnout

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Difficult to hire employees
Staffing shortages
Lack of volunteer base due to COVID-19
Lack of funding for some programs
Lack of diversified funding sources
Difficulty to attract and retain work talent

Opportunities:

Outsource non-key functions
Utilize volunteerism more
Continued focus on business acumen
Grow billable services from Medicare

Threats:

Pandemic resurge causing closures, shutdowns, reduction in services and staff
For profit organizations stealing talent
Attraction of qualified employees
Reduction in funding
Increase in need of VAAA services
Increasing wages
Increasing healthcare costs
Increase in vendors'/providers' costs
No training programs
Integrated Care

VAAA will be utilizing our Multi-Year Plan as our strategic plan. Under the direction of the President and CEO, VAAA will continue to review, revise and update the current SWOT analysis for the upcoming Fiscal Years based on the findings.

2. Describe how a potentially greater or lesser future role for the area agency with the Home and Community Based Services (HCBS) Waiver and/or managed health care could impact the organization.

People with chronic diseases may die decades earlier than the average person, mostly from untreated and preventable chronic illnesses like hypertension, diabetes, obesity, and cardiovascular disease that are aggravated by poor health habits such as inadequate physical activity, poor nutrition, smoking, and substance abuse. Barriers to primary care — coupled with challenges in navigating complex healthcare systems — have been a major obstacle to care. Integrated care is the attempt to develop a systematic coordination of general and behavioral healthcare. Integrating mental health, substance abuse, chronic diseases prevention and primary care services is an attempt to address the need in caring for people with multiple healthcare needs under one umbrella of systematic service delivery. Should Integrated Care be implemented, VAAA is positioning itself to be a player in the field by:

Becoming a Medicare certified payee for services
Becoming a player to provide case management service delivery with managed care providers
Becoming a provider via Genesee County millage

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3. Describe what the area agency would plan to do if there was a ten percent reduction in funding from the ACLS Bureau.

If there were to be a ten percent reduction in funding from the ACLS Bureau, Valley Area Agency on Aging would focus its resources on the priority services that have been determined by each county. VAAA would offset the costs by diversifying its funding sources to supplement the funding reduction. In order to achieve this goal the following actions would be taken:

Generating additional revenue from Medicare fee-for-service programs (i.e. Medical Nutrition Therapy (MNT), Targeted Care Management (TCM), Nursing Facility Transition Services (NFT).

Building partnerships with millage services in each county as alternatives for services when there is an internal wait list.

Development of private pay services to provide additional revenue for services institute cost-sharing, which allows for those dollars to be placed back into services.

Fundraising for additional service dollars.

Utilizing some unrestricted funds for services and service delivery.

Referrals will be made to other programs, such as the MI Choice Waiver Program and Program of All-inclusive Care for the Elderly (PACE).

4. Describe what direction the area agency is planning to go in the future with respect to pursuing, achieving or maintaining accreditation(s) such as National Center for Quality Assurance (NCQA), Commission on Accreditation of Rehabilitation Facilities (CARF), Joint Commission on Accreditation of Hospitals (JCAH), or other accrediting body, or pursuing additional accreditations

Valley Area Agency on Aging is working to have all Information and Assistance staff AIRS (Alliance of Information and Referral Systems) certified. VAAA became National Center for Quality Assurance (NCQA) accredited in FY 2022 and will go through reaccreditation in FY 2023. It brings another level of validity and specialization to the organization. VAAA has is also approved as a provider for Medical Nutrition Therapy in home via Medicare and Blue Cross Blue Shield. VAAA is also an Aging and Disability Resource Center (ADRC).

5. Describe in what ways the area agency is planning to use technology to support efficient operations, effective service delivery and performance, and quality improvement.

VAAA has implemented more technology to assist in effective and efficient service delivery. As part of the technology plan, VAAA proposes to continue the following:

Utilization of Relias software to provide onboarding, orientation and training to all staff.

Computerize all in-home assessment tools being used by Nurses and Social Workers.

Utilization of a fax forwarding system that will replace the traditional fax system, by allowing faxes to be sent to single or group email addresses.

Continue to move towards becoming paperless, by utilizing scanning and emailing as much as possible to reduce supply cost.

Save files in a secure computerized setting. This also reduces paper cost, storage fees and is more secure.

Place more information on the VAAA website, such as Request For Proposals.

Usage of an intra system for VAAA employees only, to access policy manuals, orientation manuals and any other agency information.

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Utilization of computerized time sheets.
Continue utilizing a paperless system for the fiscal department.
Utilization of an ACH payment system for provider payments.
Utilization of DocuSign System for signing of documents including subcontractor contracts and other pertinent documents.
Utilize a secure login system and cloud-based storage
Utilize dual verification in order to access systems
Utilize a Virtual Private Network (VPN)
Utilization of DocuWare by our Fiscal and Community Services Departments
Utilization of Field Force Manager by Support Coordinators
Continue utilizing virtual platforms to increase efficiency and access to meetings and programming .

Taking these steps will assist VAAA with utilizing technology to support efficient operations , effective service delivery and performance and quality improvement.

6. Describe your agency's emergency planning system, how planning is updated and whether back-up systems are adequate to maintain services during potential disruptions.

Valley Area Agency on Aging updated our emergency plan in 2021 based on the effects of the pandemic. In doing so we looked at what potential disruptions could take place and created systems and processes to ensure services could continue. VAAA is continually reviewing our plan and making updates as necessary when new information is provided and if current systems in place are determined to need changes based on usage of these systems and feedback we receive. VAAA's emergency planning system includes working with local emergency planners and the provider network for updated information and incorporating necessary and required systems into our current processes to ensure services are maintained in the event of an emergency.

VAAA now utilizes a cloud-based system so that updated information can be recovered quickly. VAAA reviews these systems to ensure they work and do not need to be revised. VAAA will continue to update our emergency planning and back-up systems for ways to strengthen it.

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Access Services

Access services may be provided to older adults directly by the area agency without a Direct Service Provision Request. Approved access services are Care Management, Case Coordination and Support, Options Counseling, Disaster Advocacy and Outreach Programs, Information and Assistance, Outreach, and Merit Award Trust Fund (MATF)/State-Caregiver-Support-Program-funded Transportation with specific attention to outreach with underserved populations. If the area agency is planning to provide any access services directly during FY 2023-2025, complete this section.

Select from the list of all access services the ones the area agency plans to provide directly during FY 2023-2025, and provide the information requested. Specify, in the appropriate text box for each service category, the planned goals and activities that will be undertaken to provide the service.

Direct service budget details for FY 2023 are to be included under the appropriate tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget, Direct Service Budget details.

Care Management

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$102,118.00	Total of State Dollars	\$275,335.00

Geographic area to be served

Genesee County

Specify the planned goals and activities that will be undertaken to provide the service.

The Care Management Program provides comprehensive case management services for seniors 60 years of age or older who are at risk of nursing home placement. Services include a comprehensive assessment by a Registered Nurse and a Licensed Social Worker in the senior's home. A care plan is created to address the identified needs the senior would like to address. The senior is contacted monthly and reassessed as frequently as needed but not less than every 6 months. VAAA uses Older American Act funding as available to address the senior's activity of daily living needs such as homemaking, personal care, medication management, and personal emergency response systems to keep the senior safe and independent in his/her home. This program is available to all seniors who meet medical necessity criteria and reside in Genesee, Lapeer or Shiawassee Counties. Those who choose to participate in the Independence by Choice program will receive interventions in one or multiple tiers. VAAA will submit the Regional Definition for public input at the public hearings, and for approval from the ACLS Bureau.

ValleyAreaAgency on Aging has developed a regional definition, called Independence by Choice. The program will focus on providing multi levels of intervention to assist the area's seniors 60 years of age or older living in Region 5's Genesee County. The program will seek to utilize Case Coordination and Support funding, Care Management, Information and Assistance, and Older Americans Act service funding to enhance seniors' and caregivers' ability to maintain living independently. The traditional program models are focused on providing assistance once the person's name comes up on the waitlist. The Independence by Choice program

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focuses on using multiple levels of intervention while the person is on the waiting lists for long term care services. All persons contacting the agency seeking long term care services that are eligible to be placed on VAAA's Care Management or Waiver Waitlist will be eligible to participate in the Independence by Choice Program.

Number of client pre-screenings:	Current Year:	50	Planned Next Year:	100
Number of initial client assessments:	Current Year:	40	Planned Next Year:	50
Number of initial client care plans:	Current Year:	40	Planned Next Year:	50
Total number of clients (carry over plus new):	Current Year:	150	Planned Next Year:	175
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:50	Planned Next Year:	1:50

Case Coordination and Support

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$6,573.00	Total of State Dollars	\$11,475.00

Geographic area to be served

Genesee County

Specify the planned goals and activities that will be undertaken to provide the service.

Case Coordination and Support Program provides a comprehensive assessment for seniors 60 years of age or older via phone or in person depending upon the seniors need. The program provides two tiers of assistance. Options Counselors, Social Workers, based on the seniors needs first will complete a telephonic assessment or if needed an in person assessment. Following the assessment, the options counselor working with the senior will create a care plan that includes identified issues the senior wishes to address, interventions along with the desired goals of the senior. The Options Counselor will monitor the senior for 30 days to monitor outcomes and update the seniors care plan as required. Seniors who have an ongoing need or assistance that cannot be resolved in 30 days are moved to tier two services where a face to face assessment is completed in the senior's home with a Social Worker who provides intensive case management services to address the senior's needs. Seniors must be 60 years of age or older. Services include working with hospital, nursing home and physicians to coordinate care.

Information and Assistance

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$211,783.00	Total of State Dollars	\$27,435.00

Geographic area to be served

Genesee County

Specify the planned goals and activities that will be undertaken to provide the service.

Region 5, Valley Area Agency on Aging (VAAA), continues to maintain its status of "Fully Functioning" ADRC. We provide Person Centered Planning which is provided by a Bachelor degree Social Worker. VAAA

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maintains person-centered counselors within all three counties who are trained to provide the services needed. VAAA continues to utilize the Service Point data base to link participants with needed services in the community. Person Centered Planning has been localized for each ADRC due to changes at the State level and lack of funding. The Information and Assistance Department seeks and identifies resources in the community and provides information to persons seeking assistance. Valley Area Agency on Aging will continue to screen those calling for available community resources as well as program eligibility for those services provided by VAAA as well as those offered within the community. VAAA intends to continue have a presence in the community by attending presentations, outreach events to ensure those needing assistance are able to receive it.

Outreach

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
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Total of Federal Dollars	\$26,277.00	Total of State Dollars	\$0.00
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Geographic area to be served

Genesee County

Specify the planned goals and activities that will be undertaken to provide the service.

The Outreach program provides events and presentations within Region 5 to help inform and identify older adults within the community who are in the greatest social and economic need. This program assists them with getting access to the services they may need to remain independent and remain in the community as long as possible. Valley Area Agency on Aging plans to attend health fairs, community presentations to have a presence for all things senior in Region 5. As the older adult population continues to increase the need for outreach will continue. The outreach program will host presentations to provide information on services available as well as assistance with gaining access to the services needed.

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Direct Service Request

It is expected that in-home, community, and nutrition services will be provided under contracts with community-based service providers. However, when appropriate, area agencies may ask to provide these services directly. Direct Service Provision Requests must be approved by the Commission on Services to the Aging (CSA). Direct service provision by the area agency may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the area agency's administrative functions; or C) a service can be provided by the area agency more economically than any available contractor and with comparable quality. Area agencies requesting approval to provide an in-home, community, and/or a nutrition service must complete the section below for each service category.

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for any Direct Service Provision Request for FY 2023-2025. Specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service.

Direct service budget details for FY 2023 are to be included under the Services Summary tab and Direct Service Budget tabs in the Area Plan Grant Budget. The funding identified should correspond to the funding (Federal OAA Title III or VII and state funds) identified in the Area Plan Grant Budget.

Skip this section if the area agency is not planning on providing any in-home, community, or nutrition services directly during FY 2023.

Friendly reassurance

Total of Federal Dollars \$3,950.00 Total of State Dollars \$0.00

Geographic Area Served Genesee, Lapeer, and Shiawassee

Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.

For the upcoming FY 2023, VAAA will be providing the Friendly Reassurance program in house and would like to increase the number of participants in each county. VAAA will continue to promote the Keeping Independent Seniors Safe (KISS) program in each county, during outreach events, collaborative meetings, Senior Coalition meetings, on our agency website and social media pages. Valley Area Agency on Aging intends to provide the program to all of Region 5 in order to assist with reaching those most in need of the service. VAAA staff and volunteers will call those enrolled in the program, Monday through Friday to provide them a telephonic wellness call. Providing this program in house will allow the staff to focus on increasing the number of individuals enrolled in this program who could benefit from this service.

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Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Keeping Independent Seniors Safe, VAAA's Friendly Reassurance program utilizes VAAA staff and volunteers to provide telephonic wellness calls to seniors living alone in their own homes Monday through Friday. Having VAAA staff in house allows the organization to provide these services by having staff dedicated to only this program which allows them the ability to reach more individuals who are in need of this service. VAAA has always provided this service in house to Genesee and Lapeer counties, but due to a lack of growth of the program in Shiawassee county it was determined that VAAA would oversee this service for all three counties. Allowing VAAA to have staff provide this Direct Service also allows this program to reach more seniors, as the subcontractors have limited staff. In FY 2021 Valley Area Agency on Aging had 219 seniors served through the program.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

There were two public hearings held, one virtually via Zoom, held on May 10, 2022, and one in Genesee County, held on May 12, 2022. It was explained in order to ensure continuation and growth of the Friendly Reassurance (KISS program), VAAA would be providing the KISS program in house. A Direct Service Request would be made to the ACLS Bureau in order to effectively and efficiently provide the Friendly Reassurance program throughout Region 5

The public had no questions and were glad to know that the Keeping Independent Seniors Safe (KISS) program would continue.

Disease Prevention/Health Promotion

<u>Total of Federal Dollars</u>	\$86,793.00	<u>Total of State Dollars</u>	\$0.00
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<u>Geographic Area Served</u>	Genesee, Lapeer, and Shiawassee
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Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.

For the upcoming FY 2023-2025 VAAA plans to continue providing the EBDP in house and would like to have the following number of graduates for each program.

Matter of Balance (MOB)- 60 graduates

Creating Confident Caregivers (CCC)/ Developing Dementia Dexterity (DDD)- 40 graduates

Arthritis Foundation Exercise Program (AFEP)- 100 graduates

Diabetes PATH (D-PATH)- 40 graduates

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Evidence Based Chronic Disease Prevention Programs are copy written programs and can only be administered by persons who have undergone strict training programs. This training can be very costly. Valley Area Agency on Aging (VAAA) will continue to place a focus on Matter of Balance, Arthritis Foundation Exercise Program, Diabetes Personal Action Towards Health (PATH), Developing Dementia Dexterity (DDD), and Creating Confident Caregivers (also known as Savvy Caregiver). Having VAAA staff in-house and trained allows the organization the ability to provide these programs.

Accomplishments:

Allowing VAAA to have staff to provide this Direct Service also allows these valuable programs to reach more seniors and caregivers, as subcontractors are limited to a certain number of participants and with high turnover they do not always have the staff to provide this service. In FY 2021, Valley Area Agency on Aging served:

Diabetes Personal Action Towards Health - 34 graduates

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Arthritis Foundation Exercise Program – 167 seniors served

Matter of Balance -39 participants

Creating Confident Caregivers (CCC) and Developing Dementia Dexterity (DDD) - 42 graduates

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

There were two public hearings held, one virtually via Zoom held on May 10, 2022, and one in Genesee County held on May 12, 2022. At each hearing it was explained in order to ensure continuation of the Evidence-Based Disease Prevention Programs VAAA will request a direct waiver from the ACLS Bureau in order to effectively and efficiently provide the EBDP throughout Region 5. The public had no questions regarding this.

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Regional Service Definitions

If the area agency is proposing to fund a service category that is not included in the *Operating Standards for Service Programs*, then information about the proposed service category must be included under this section. Enter the service name, identify the service category and fund source, unit of service, minimum standards, and rationale for why activities cannot be funded under an existing service definition.

Service Name/Definition

Emergency Gap Filling Services

Definition of Service

The provision of services and assistance provided to seniors 60+ years of age or older residing within Region 5 in the event of an emergency. These services will help to eliminate threats to the independence, health, safety, and well-being of older adults. These services would be provided when the emergency requires immediate action and when other resources are unavailable.

Rationale (Explain why activities cannot be funded under an existing service definition.)

There are currently no minimum standards that will specifically assist seniors with services and assistance in the state of emergency that requires immediate action.

Service Category	Fund Source			Unit of Service
<input checked="" type="checkbox"/> Access	<input checked="" type="checkbox"/> Title III PartB	<input checked="" type="checkbox"/> Title III PartD	<input type="checkbox"/> Title III PartE	1 occurrence of service
<input type="checkbox"/> In-Home	<input type="checkbox"/> Title VII	<input type="checkbox"/> State Alternative Care	<input type="checkbox"/> State Access	
<input type="checkbox"/> Community	<input type="checkbox"/> State In-home	<input type="checkbox"/> State Respite		
	<input type="checkbox"/> Other _____			

Minimum Standards

- Services shall be provided based on intake and assessment conducted by Information & Assistance (I&A) staff, outreach staff, Health Care Administrators, or Supports Coordinators (degreed health professionals such as RNs or Social Workers).
- Staff will verify the lack of availability under other programs and community resources .
- Consumers will be encouraged to cost-share for emergency gap-filling services.
- Services may include but are not limited to relocation costs due to emergency, extermination costs for an individual residence, supplies or expenses associated with an emergency event, and other services that may be deemed necessary to reduce the risk to the senior.
- Seniors do not need to be enrolled in a care management program to receive the emergency gap filling service.

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6. The President/CEO will have final approval for the use of Emergency Gap Filling Services.

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Service Name/Definition Independence by Choice Program Definition of Service The program will focus on providing multi-levels of interventions to assist area's seniors 60+ years of age or older living in Genesee County. The program will seek to utilize Case Coordination and Support, Care Management, Information and Assistance, and other services to enhance seniors' and caregivers' ability to maintain living independently. The traditional program models focus on providing assistance once the person's name comes up on the waitlist. The Independence by Choice program focuses on using multiple levels of intervention while the person is on the waiting list for long-term care services.			
Rationale (Explain why activities cannot be funded under an existing service definition.) There are currently no minimum standards that support a program that focuses on multiple levels of intervention while the person is on the waiting lists for long term care services.			
Service Category	Fund Source		Unit of Service
<input checked="" type="checkbox"/> Access <input type="checkbox"/> In-Home <input type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input type="checkbox"/> Other _____		1 hour of client contact

Minimum Standards

All persons contacting the agency seeking long-term care services that are eligible to be placed on VAAA's Care Management or Waiver waitlist will be eligible to participate in the Independence by Choice Program. Those who participate in the Independence by Choice Program will receive interventions in one or multiple tiers.

Tier 1: TELEPHONIC: A Social Worker will conduct a telephonic interview working with the senior or the caregiver when necessary to identify specific issues that the senior would like to address. Based on the participant's request, the Social Worker will work with the senior to identify current attempts at resolving various issues. Additional interventions will be identified to enhance the person's current means of addressing the issue. A person-centered care plan will be sent to the participant that includes the identified issues, interventions, and goals. The Social Worker will follow up with the senior to determine the outcomes.

Tier 2: FACE-TO-FACE: A Social Worker will meet face to face with seniors who, following Tier 1, are identified as needing short-term formal assistance with arranging for private pay services and formal services, including (but not limited to): applying for Medicaid to access the Adult Home Health Program, Skilled Care Services, and setting up private pay services in an affordable, economical manner to address needs.

Tier 3: CARE MANAGEMENT 1: Provides one Care Manager to conduct a basic assessment (approved by the Aging and Adult Services Agency) annually and complete a person-centered care plan. The case manager will work with the participant for targeted case management when there is a Medicaid spend-down. A Personal Emergency Response System (PERS) will be installed when determined that the client can

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benefit from the system while on the waitlist.

Tier 4: CARE MANAGEMENT 2: Telehealth Care Management - Telehealth service provides one internet-connected tablet distributed to an individual to allow for VAAA's Registered Nurse or Social Worker to complete a virtual visit with the individual to conduct care coordination and monitoring activities. Telehealth services may include the provision of remote digital monitoring devices to monitor and capture medical and health data that is electronically transmitted to VAAA's Registered Nurse to assess and , when necessary, to educate the individual about behaviors that may be influencing their chronic health conditions, and link the patient to their primary care physician, to prevent adverse health outcomes.

Tier 5: CARE MANAGEMENT 3: Includes traditional Care Management services conducted by an RN and a Licensed Social Worker. A comprehensive assessment (approved by the ACLS Bureau) and a care plan are developed. Services are ongoing when the person is not eligible for MI Choice Waiver Program services. Personal care, Homemaking, and other services are placed and monitored monthly.

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Service Name/Definition Community Living Supports Definition of Service Community Living Supports facilitates an individual's independence and promotes participation in the community. Community Living Supports can be provided in the participant's residence or community settings. Community Living Supports includes assistance to enable program participants to accomplish tasks that they would normally do for themselves if able. The services may be provided on an episodic or a continuing basis. The participant oversees and supervises individual providers on an ongoing basis when participating in self-determination options. These services are provided only in cases when neither the participant, nor anyone else in the household, is capable of performing or financing them and where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for their provision. When transportation incidental to the provision of community living supports is included, it must not also be authorized as a separate waiver service for the beneficiary.				
Rationale (Explain why activities cannot be funded under an existing service definition.) There is currently no minimum standard that allows for the provision of Personal Care and Homemaking services under one category that would allow for either service to be provided.				
Service Category	Fund Source			Unit of Service
<input type="checkbox"/> Access <input checked="" type="checkbox"/> In-Home <input type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input checked="" type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input checked="" type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input type="checkbox"/> Other _____			Fifteen (15) minutes of client contact Per diem

Minimum Standards

1. Community Living Supports (CLS) include:
 - a. Assisting, reminding, cueing, observing, guiding, and training in the following activities:
 - i. Meal preparation
 - ii. Laundry
 - iii. Routine, seasonal, and heavy household care and maintenance
 - iv. Activities of daily living such as bathing, eating, dressing, and personal hygiene
 - v. Shopping for food and other necessities of daily living
 - b. Assistance, support, and guidance with such activities as:
 - i. Money management
 - ii. Non-medical care (not requiring nursing or physician intervention)
 - iii. Social participation, relationship maintenance, and building community connections to reduce personal isolation
 - iv. Transportation from the participant's residence to community activities, among community activities, and from the community activities back to the participant's residence
 - v. Participation in regular community activities incidental to meeting the individual's community living preferences
 - vi. Attendance at medical appointments

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- vii. Acquiring or procuring goods and services necessary for home and community living
- c. Reminding, cueing, observing, and monitoring medication administration.
- d. Staff assistance with preserving the health and safety of the individual so that they may reside and be supported in the most integrated independent community setting.
- e. Training or assistance on activities that promote community participation, such as using public transportation, libraries, or volunteering.
- f. Dementia support includes, but is not limited to, redirection, reminding, modeling, socialization activities, and activities that assist the participant as identified in the individual's person-centered plan.
- g. Observing and reporting to the supports coordinator any changes in the participant's condition and the home environment.

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Regional Direct Service Request

It is expected that regionally defined services will be provided under contracts with community-based service providers, but when appropriate, a provision to provide such regional services directly by the area agency may be approved by the CSA. Regional direct-service provision by the area agency may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the area agency's administrative functions; or C) a service can be provided by the area agency more economically than any available contractor, and with comparable quality.

Area agencies requesting permission to provide a regional service directly must complete this tab for each service category. Enter the regional service name in the box and click "Add." The regional service name will appear in the dialog box on the left after a screen refresh. Select the link for the newly added regional service and enter the requested information pertaining to basis, justification and public hearing discussion for any regional direct service request for FY 2023-2025. Also specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Since regional service definitions expire with the end of each multi-year plan period, please include any previously approved regional services the agency expects to continue providing directly, including COVID-19 policy-waiver-approved services. Address any discussion at the public hearing related to each regional direct service provision request.

Regional Direct Service Budget details for FY 2023-2025 are to be included under the Direct Service Budget tab and the Support Services Detail tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget.

Please skip this section if the area agency is not planning on providing any regional services directly as of now.

Independence By Choice

Total of Federal Dollars \$26,000.00

Total of State Dollars \$0.00

Geographic Area Served Genesee County

Planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.

All persons contacting the agency seeking long term care services will be screened using the Independence by Choice process. The program is set up into 5 tiers starting with a telephonic Social Work assessment (Tier 1) to identify the applicant's ability to care for him or herself. A person-centered plan is developed with the participant to identify what is important to them. The Social Worker helps the participant to find ways that they can participate in achieving their goals. Tier 2 is based on a face-to-face meeting with the participant and his/her family to discuss long term care options. Tiers 3, 4, and 5 provide in-home services, with Tier 3 providing minimal care management, to Tier 4 offering telehealth services,

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and Tier 5 providing services for applicants that are high acuity requiring substantial service assistance along with a Register Nurse Care Manager.

Through this process VAAA hopes to increase the number of seniors screened through this program and provide those who qualify a face-to-face interview along with information and referrals within the community based on their wants and needs.

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

Valley Area Agency on Aging created the regional service definition and began implementation of the "Independence by Choice Program", which uses a multi-level intervention to assist area seniors 60+ years of age or older living in Genesee County. The program uses multiple funding sources to enhance the agency's in-home care program outcomes by reducing long waitlists and increasing seniors served. The traditional program models focused on providing assistance once the person's name came to the top of the waitlist. The Independence by Choice program focuses on using multiple levels of intervention while the person is on the waiting lists for long term care services. The process proved very successful in its implementation. The agency was able to reduce the MI Choice Waiver waitlist by 100%.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

There were two public hearings held, one held virtually via Zoom held on May 10, 2022, and one in Genesee County held on May 12, 2022. At each hearing it was explained that Valley Area Agency on Aging created a Regional Service Definition Independence by Choice to assist with reducing the wait list for Care Management and MI Choice Waiver programs. VAAA will request approval of the Regional Service Definition and a regional direct waiver from the ACLS Bureau in order to effectively and efficiently continue to provide the IBC program throughout Genesee County. The public had no questions regarding this.

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Program Development Objectives

Please provide information for all program development goals and objectives that will be actively addressed for this multi-year period, including the diversity, equity and inclusion goal outlined here.

Diversity, Equity, and Inclusion Goal

Aging and Community Living Services Bureau (ACLS) *Operating Standards for Area Agencies on Aging* have long required that preference be given to serving older persons in greatest social or economic need with particular attention to low-income minority elderly. Please refer to *Operating Standards for Area Agencies on Aging* sections C-2 and C-4.

With increased awareness of the effects of racial and ethnic disparities on the health, well-being, and lifespans of individuals, the State Plan on Aging for FY 2023-2025 has implemented goals that relate to identifying and increasing services to black, indigenous and people of color as well as LGBTQ+ adults over age 60.

Please assess and summarize how well the area agency is currently addressing accessibility of services for the groups listed above and complete the objective(s), strategies and activities that are indicated for quality improvement in this area. Include planned efforts to:

1. Increase services provided to black, indigenous and people of color and the (LGBTQ+) communities.
2. Increase the number of area agency staff, providers and caregivers trained in implicit bias, cultural competencies, and root causes of racism.
3. Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve.

Goal: Improve the Accessibility of Services to Michigan's Communities and People of Color, Immigrants and LGBTQ+ Individuals.

The area agency must enter each program development goal in the appropriate text box. It is acceptable, though not required, that some of the area agency's program development goals correspond to the ACLS Bureau's State Plan Goals (listed in the Documents Library). There is an entry box to identify which, if any, State Plan Goals correlate with the entered goal.

A narrative for each program development goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box. There are also text boxes for the timeline, planned activities and expected outcomes for each objective. Additional instructions on completing the Program Development section can be found in the Documents Library.

Area Agency on Aging Goal

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A. Work to Improve services and outreach to older adults and caregivers.

State Goal Match: 1, 2

Narrative

Services and outreach for older adults and caregivers is very important to the Valley Area Agency on Aging . VAAA will focus on creating community events and Kinship Caregiver programming to increase access to resources, services and cultural events within the community. Also, VAAA will work to increase access to these programs by offering free or discounted transportation and services for older adults and caregivers in Region 5. Collaboration with local organizations will be crucial to providing these services to educate seniors, caregivers, family members as well as agency providers within the community.

Objectives

1. To increase accessibility and programming for older adults , caregivers, and Kinship Caregiver Programs.

Timeline: 10/01/2022 to 09/30/2025

Activities

Hold fundraisers and utilize other funding sources (i.e., grants) to fund the clothing voucher program for kinship caregivers.

Develop an application for kinship caregivers to apply for a \$250 voucher.

Partner with community senior housing or churches to provide resources and assist older adults and caregivers with recycling access (i.e., medications, electronics, etc.).

Kinship caregivers will be able to pick up donated bags and clothes for their children.

Review the ideas via an application.

Send approval letters (must not duplicate current services).

Partner with local low-income senior housing to offer services to their older adult population .

Partner with local organizations to provide access to community events (i.e., transportation to McCree Theatre, Flint Institute of Arts, etc.).

Expected Outcome

Develop a clothing voucher program for Kinship caregivers.

Develop an annual "Community Impact Event" for older adults and kinship caregivers in the community.

To offer a "Give Back to the Community" Program to provide funding to organizations with a focus on older adults.

Provide access/transportation to various events in the community.

B. Ensure that older adults have a choice in where they live through increased access to information and services.

State Goal Match: 4

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Narrative

Maintaining health and independence for seniors within their homes and community is a priority for Valley Area Agency on Aging. In order to assist with this goal, VAAA will research Dementia Friendly communities in order to determine which community within PSA 5 is the best fit to become a Dementia Friendly Community. VAAA also strives to increase multi-generational programming through providing Virtual Dementia Tours to help increase understanding and awareness of dementia and how it affects older adults. Also, providing access to educational programming and virtual programs utilizing tablets and equipment.

Objectives

1. Provide assistance, information, education, outreach, referrals, and follow up to seniors regarding home and service-related issues.

Timeline: 10/01/2022 to 09/30/2025

Activities

Choose one community that will be the focus on becoming Dementia Friendly.

Form a Taskforce with Community members across all sectors.

Create an action plan to educate community members about Dementia.

Apply for Dementia Friendly Community.

Provide the Virtual Dementia Tours (VDT) to local students.

Measure the awareness of Dementia by providing a pre and post-test to the students at the VDT.

Explore other options to provide multigenerational programming.

Donate VAAA used computers to the adult health literacy programs for the use of educational programs.

Develop a program for seniors to utilize tablets to help decrease social isolation and increase access to technology.

Expected Outcome

Research Dementia Friendly Communities and define which county or community within PSA 5 is the best fit to become a Dementia Friendly Community.

Collaborate with multi-generational students to provide awareness about Dementia.

Provide Region 5 with technology to use for adult health literacy.

Increase programming that addresses access to technology and addresses social isolation.

C. Work to improve the accessibility of services to people of color, immigrants, and LGBTQ+ individuals in PSA 5

State Goal Match: 1, 3

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Narrative

To educate the community and providers on the barriers of accessible services to people of color , immigrants, and LGBTQ+ individuals in Region 5. Ensure VAAA staff, subcontractors and providers receive training on diversity, equity, and inclusion. Ensure that VAAA staff, subcontractors and providers receive training on how to recognize and address unconscious bias. Ensure that VAAA programming and outreach is culturally sensitive and welcoming to all. Ensure that VAAA provides culturally and linguistically appropriate outreach directed towards non-English speaking persons and our provider network is trained to adapt to diverse cultural needs.

Objectives

1. To educate the community and providers on the barriers to accessibility services to people of color , immigrants, and LGBTQ+ individuals in PSA 5.

Timeline: 10/01/2022 to 09/30/2025

Activities

Provide LGBTQ Cultural Competency Training for the community.

Provide LGBTQ Cultural Competency Training for Providers and VAAA staff.

VAAA staff to participate in the LGBTQ Training provided by the ACLS Bureau.

Partner with organizations to provide Cultural Competency training for the community.

Partner with organizations to provide Cultural Competency training for providers and VAAA Staff.

Contract with organizations to provide translation services for the languages in PSA other than English .

Expected Outcome

Provide LGBTQ+ trainings to providers, staff, and community.

Provide Cultural Competency Training for providers, staff, and community.

Decrease language barriers to access services.

D. Protect older adults from abuse and exploitation within PSA 5.

State Goal Match: 4

Narrative

Elder abuse is a serious issue. Valley Area Agency on Aging plans to continue working with community organizations in order to educate the community regarding elder abuse, neglect and exploitation. Education is paramount in being able to detect signs of abuse, as it is frequently not reported by the senior. It is also important to know who and where to report abuse once it is suspected. VAAA will continue working as an advocate by way of participation on the Elder Abuse Alliance , Lapeer County Elder Abuse Task Force, writing legislators regarding the passage of elder abuse laws, and by working closely with Legal Service of Eastern Michigan and our local Long Term Care Ombudsman.

Objectives

1. To educate persons in detecting elder abuse and exploitation .

Timeline: 10/01/2022 to 09/30/2025

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Activities

Attend regular meetings as announced by the Elder Abuse Alliance.
Collaborate with the Senior Network within PSA 5 to conduct workshops.
Continue to advocate for the passage of Senior Abuse and Neglect bills.
Continue meetings with Region 5 Advocates Council.
Participate in the annual Elder Abuse Alliance Annual Conference.

Expected Outcome

Collaborate with community agencies and seniors regarding elder abuse and exploitation.

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Advocacy Strategy

Describe the area agency's comprehensive advocacy strategy for FY 2023-2025. Describe how the area agency's advocacy efforts will improve the quality of life of older adults within the PSA. Also give an update on current advocacy efforts. See *Operating Standards for Area Agencies on Aging* section C-6.

Include initiatives, if any, the area agency is pursuing regarding recruitment, training, wages, diversity and inclusion, credentialing, etc. related to the direct care workforce shortage. Also identify area agency best or promising practices, if any, that could possibly be used in other areas of the state. Enter your advocacy strategy in the dialogue box.

In FY 2021, Valley Area Agency on Aging (VAAA) continued dealing with challenges due to the continued spread of COVID-19. However, we did resume some of our advocacy events and meetings, which took place virtually and/or outdoors. VAAA attended virtual meetings held by Legislators and state organizations to discuss and advocate for senior issues. During FY 2021, VAAA attended several virtual focus groups and community meetings. VAAA also attended several virtual town hall meetings, coffee hours, etc., with local mayor's offices, the Governor's Office, and Senator and Congressman's offices.

VAAA's CEO, Yaushica Aubert, worked with the Michigan Area Agency on Aging Association (4AM) and recorded a video "Call to Action" for the state's Virtual Annual Older Michiganiaan's Day. The focus areas included: Permanent Direct Care Worker (DCW) wage increases, Increased funding for the Older Americans Act (OAA), the MI Choice Waiver and Kinship Caregiver Navigator Programs, and affordable internet for all. Ms. Aubert also ensured both the Board of Directors and Advisory Council received 155 Advocacy, Legislative, and other Press Releases from MDHHS, the Governor's Office, and the Lt. Governor's office to keep them updated on various issues.

VAAA continues to have representation on the Michigan Senior Advocates Council (MSAC) and the Michigan State Advisory Committee, which both met regularly (virtually or telephonically) to speak with legislators in Lansing about senior citizens' issues and concerns. Those representatives then report back on the activities from both groups to the VAAA Advisory Council. VAAA is grateful for the advocacy efforts put forth by those who have stepped in to advocate for the seniors of Genesee, Lapeer, and Shiawassee Counties (Region 5).

The Annual Senior Power Day, held at Crossroads Village, is a major advocacy event for VAAA. Unfortunately, the 2021 event was canceled due to COVID-19. In 2019 over 2,400 tickets were sold. The State Platform was shared with the attendees, and several State and local officials were in attendance. We are excited that Senior Power Day is planned to resume on May 25, 2022. The VAAA Board of Directors and Advisory Council also sent correspondence to advocate for the renewal of the Older Americans Act (OAA) and a permanent increase in the Direct Care Worker (DCW) wage and continues to educate and advocate for everyone to register and vote. Twenty-seven (27) Advocacy Alerts were also emailed to everyone on the VAAA email listings – over 250 people and organizations.

VAAA has staff that sit on the Local Advisory Council (LAC) for the transportation agency in each county. On a monthly basis, staff attend the Mass Transportation Authority (MTA) for Genesee County and quarterly attend

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the meetings for Greater Lapeer Transportation Authority (GLTA) and Shiawassee Area Transportation Agency (SATA). VAAA staff provide feedback to each LAC to help improve services and accessibility to transportation. In addition, VAAA has staff that participate in the IMPART Alliance Coalition and Policy Committee. The purpose of this group is to advocate for the Direct Care Workers (DCWs) and policy reform to help improve the lives of the Direct Care Workers. In participating in this coalition, VAAA has been a part of helping to develop the IMPART Alliance's Advocacy Roadmap. VAAA is also a member of the Genesee Elder Abuse Alliance (EAA), which is a group consisting of the Elder Abuse Task Force and other integral agencies that service older adults such as Adult Protective Services (APS), Long-Term Care Ombudsman, Financial Institutions, Senior Centers and living facilities, as well as service providers, and participates in the monthly meetings. In FY 2021, the Elder Abuse Alliance (EAA) hosted its first annual E.D.G.E. (Educating, Defending, and Guarding the Elderly) Conference. VAAA staff was a sponsor at this event and had information about the agency available to those attending. In addition, VAAA had staff attend the event to help further their knowledge on signs of elder abuse and ways we can work together to help combat and educate others about elder abuse. VAAA's President and CEO also presented during the EAA's first virtual webinar that was open to the community to discuss services available and ways VAAA works with EAA and APS to combat the ongoing issue of elder abuse.

VAAA will continue to update seniors in FY 2023-2025 and beyond and is looking forward to resuming in-person events. VAAA will also continue to vigilantly advocate for community support and services and address long-term care needs for our seniors and persons living with disabilities.

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Leveraged Partnerships

Describe the area agency's strategy for FY 2023-2025 to partner with providers of services funded by other resources, as indicated in the PSA Planned Service Array.

1. Include, at a minimum, plans to leverage resources with organizations in the following categories:

- a. Commissions Councils and Departments on Aging.**
- b. Health Care Organizations/Systems (e.g. hospitals, health plans, Federally Qualified Health Centers)**
- c. Public Health.**
- d. Mental Health.**
- e. Community Action Agencies.**
- f. Centers for Independent Living.**
- g. Other**

Genesee, Lapeer, and Shiawassee Counties all have senior millages as additional resources. VAAA continues to partner with and make referrals to all millage services funded throughout Region 5. In addition referrals were made to food pantries, food banks, the Department of Health and Human Services' food stamp program, and Mom's Meals, a private-pay Home Delivered Meal option.

The Retired and Senior Volunteer Program (RSVP) has formed partnerships with organizations such as The Food Bank of Eastern Michigan, Jewish Community Services, Alzheimer's Association, and Kindred Hospice as well as a plethora of other organizations.

2. Describe the area agency's strategy for developing, sustaining, and building capacity for Evidence-Based Disease Prevention (EBDP) programs including the area agency's provider network EBDP capacity.

VAAA will continue to collaborate with organizations such as the Arthritis Foundation, Tivity Health and the Alzheimer's Association to assist in implementing, promoting and support of the Chronic Disease Evidence Based Programs and will target those seniors attending wellness centers, senior centers, churches, senior housing facilities, and other places seniors congregate. VAAA will also request a direct waiver in order to implement the Evidence Based Programs by VAAA staff. This will ensure a continuum of services and effective and efficient program delivery throughout Region 5.

There were two public hearings held- one virtually via Zoom and one in Genesee County. At each hearing it was explained in order to ensure continuation of the Evidence-Based Disease Prevention Programs, VAAA will request a direct waiver from the ACLS Bureau in order to effectively and efficiently provide the EBDP throughout Region 5. The public had no questions during this time. For the upcoming FY 2023-2025 VAAA plans to continue providing the EBDP in house and would like to have the following number of graduates for each program.

Matter of Balance (MOB)- 60 graduates

Creating Confident Caregivers (CCC) and Developing Dementia Dexterity (DDD) - 40 graduates

Arthritis Foundation Exercise Program- 100 graduates

Diabetes PATH (D-PATH)- 40 graduates

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3. Describe the agency's strategy for developing non-formula resources and use of volunteers to support implementation of the MYP and increased service demand.

Retired and Senior Volunteer Program, also known as RSVP, is a program that allows seniors in the community a chance to give back through volunteer work. VAAA's volunteers have worked on a variety of projects including food pantry support, transportation, and companionship/respite. There are approximately 136 volunteers in the program, working with numerous stations to help make an impact where it is needed the most.

During FY 2021 VAAA attended collaborative meetings, Senior Coalition meetings as well as hosted an informational session about the volunteer program to help recruit additional volunteers and stations. With the growth of the volunteers within the RSVP over the last three years it is apparent that there are many seniors who are interested in volunteering. During the recruitment sessions and meetings, it continues to be apparent that not only are seniors interested in volunteering but those adults under the age of 55 are interested as well.

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Community Focal Points

Community Focal Points are visible and accessible points within communities where participants learn about and gain access to available services. Community Focal Points are defined by region. Please review and update the listing of Community Focal Points for your PSA below and edit, make corrections and/or update as necessary. Please specifically note if updates have been made.

Describe the rationale and method used to assess the ability to be a community focal point, including the definition of community. Explain the process by which community focal points are selected.

A Community Focal Point is a facility at which seniors may gain access to information and referrals to programs in the aging network. A minimum of one Community Focal Point must be located in each county that the Area Agency serves. The Community Focal Point must maintain comprehensive resource files in order to provide information and make referrals. Valley Area Agency on Aging defines a community as: a county or metropolitan city within a population which exceeds 50,000. The definition is intended to encompass maximum flexibility for the seniors living in Region 5. Region 5 is composed of both rural and urban counties. The community Focal Points were selected based on their ability to collect data and coordinate comprehensive services for the senior citizens in the communities in which they are located and serve. The current designated Community Focal Points have been proven very effective in providing services for the Region 5 PSA. They have also been instrumental in assisting with the identification of seniors with unmet needs.

Provide the following information for each focal point within the PSA. List all designated community focal points with name, address, telephone number, website, and contact person. This list should also include the services offered, geographic areas served and the approximate number of older persons in those areas. List your Community Focal Points in this format.

Name:	Shiawassee Council on Aging (SCOA)
Address:	300 N. Washington Street Owosso, MI 48867
Website:	www.shiawasseecoa.org
Telephone Number:	(989)723-8875
Contact Person:	Cynthia Mayhew, Executive Director
Service Boundaries:	Shiawassee County
No. of persons within boundary:	15,705
Services Provided:	Case Coordination & Support, Home Injury Control, Information & Assistance, In-Home Services, Respite, Congregate Meals, Home Delivered Meals

Name:	Valley Area Agency on Aging
Address:	225 E. Fifth Street Suite 200 Flint, MI 48502
Website:	www.valleyareaaging.org
Telephone Number:	(810)239-7671
Contact Person:	Yaushica Aubert, President & CEO

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Service Boundaries:	Genesee, Lapeer, and Shiawassee Counties
No. of persons within boundary:	124,015
Services Provided:	All services provided in Region 5, including Care Management, Case Coordination & Support, Evidence Based Chronic Disease programs, In-home Services, Information and Assistance, Medicare/Medicaid Assistance Program (MMAP), Nutrition Program, MI CHOICE Waiver Program, Keeping Independent Seniors Safe (KISS) Program, Diabetes Education, Retired Seniors and Volunteer Program (RSVP)
Name:	Lapeer County Health Department Senior Services Division
Address:	1800 Imlay City Road Lapeer, MI 48446
Website:	www.lapeercountyweb.org
Telephone Number:	(810)245-5866
Contact Person:	Kathy Haskins, Executive Director
Service Boundaries:	Lapeer County
No. of persons within boundary:	19,465
Services Provided:	Congregate Meals, Home Delivered Meals, Care Management, In-Home Services, Respite Care

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Other Grants and Initiatives

Use this section to identify other grants and/or initiatives that your area agency is participating in with the ACLS Bureau and/or other partners. Grants and/or initiatives to be included in this section may include, but are not limited to:

- Tailored Caregiver and Referral® (TCARE)
- Creating Confident Caregivers® (CCC)
- Evidence Based Disease Prevention (EBDP) Programs (see Doc Library for listing)
- Building Training...Building Quality (BTBQ)
- Powerful Tools for Caregivers®
- PREVNT Grant and other programs for prevention of elder abuse
- Programs supporting persons with dementia (such as Developing Dementia Dexterity and Dementia Friends)
- Medicare Medicaid Assistance Program (MMAAP)
- MI Health Link (MHL)
- Respite Education & Support Tools (REST)
- Care Transitions Project

1. Briefly describe other grants and/or initiatives the area agency is participating in with ACLS Bureau or other partners.

VAAA endeavors to supplement its programs with additional funding and continues to receive federal and state funds which are earmarked for senior programs.

A total of \$1,292,282 was received in Region 5 in FY 2021.

Contributor	Amount	Purpose
Michigan Department of Health and Human Services (MDHHS) (NFT)	\$240,421	Nursing Facility Transition
Michigan Department of Health & Human Services (MDHHS) Grant (Flint Water Crisis)	\$200,000	Flint Senior Lives Matter
Aging and Adult Services Agency (AASA) Volunteer Program (RSVP)	\$33,259	Retired and Senior
Aging and Adult Services Agency (AASA) Management	\$92,443	Targeted Care
Genesee County Offices of Senior Services Intake Service	\$170,460	Information & Assistance
Genesee County Offices of Senior Services Provider Assessments	\$10,400	Home Delivered Meal
Corporation for National & Community Services (CNCS) Volunteer Program (RSVP)	\$75,144	Retired and Senior
Medicare/Medicaid Assistance Program (MMAAP) Medicare/Medicaid	\$60,812	Assistance with
The United Way of Genesee County Seniors Safe (KISS)	\$23,750	Keeping Independent

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The United Way of Genesee County Volunteer Program (RSVP)	\$50,000	Retired and Senior
Tivity Health Services, L.L.C. Program	\$3,864	SilverSneakers Exercise
Medicare (MNT)	\$366	Medical Nutrition Therapy
McLaren Community Health Program	\$5,040	Community Health Worker
Veteran's Administration	\$31,423	Veteran Services
American House Grant	\$10,000	Senior Needs Grant
Grace Emmanuel Baptist Church Grant	\$2,250	Senior Medical Assistance
Greater Flint Health Coalition - Flint Registry Capacity Stipend	\$5,000	Information & Assistance
Referral Tool Training and Utilization of the Referral Tool		
Michigan Community Service Commission Grant	\$150	RSVP reimbursement for
refreshments for MLK Day		
MHEF Telehealth	\$250,000	Telehealth Grant
BCBS Foundation Grant - Telehealth	\$22,500	Telehealth Grant
Delta Dental	\$5,000	Dental Cleanings Grant
Total	\$1,292,282	

*Resource Development dollars are included in revenue.

Medicare Fee-For-Service Programs

To create a diverse stream of revenue, VAAA intends to continue to grow our Medicare fee-for-service programs. During FY 2023-2025, VAAA will be focusing on Transitional Care Management, Chronic Care Management, and Medical Nutrition Therapy.

Transitional Care Management (TCM) services are designed to assist individuals to transition from the hospital and nursing home to their home and provide a seamless transition from one setting to another, ensuring the patient can adhere to his discharge plans. A Social Worker, and when appropriate, a Certified Community Health Worker (CHW), meets the patient bedside to discuss the transition process following discharge and establish a rapport prior to the home visit after discharge. During the home visit, the Social Worker works with the patient to gauge their understanding of the discharge plan and their ability to follow the discharge plan as written. The Social Worker electronically transfers a copy of the patient's discharge plan and medication list to the patient's physician or VAAA's nurse practitioner if needed for immediate review. The Social Worker arranges for the patient to see their physician within 7 to 14 days. VAAA's nurse practitioner, when needed, will conduct a home visit within seven days of discharge. When appropriate, the Social Worker will arrange for in-home services and transportation to assist the patient.

Chronic Care Management (CCM) services are non-face-to-face services provided to Medicare patients with two or more significant chronic conditions. CCM services are electronic and telephonic care coordination services between physicians and healthcare professionals. Care Managers monitor the patient monthly via telephone to ensure that the patient plan of care (POC) continues to meet the patient's treatment of chronic

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conditions and monitor services and that supports are in place to meet the patient's needs . The physician is the lead professional responsible for creating the patient POC and the patient's care management support team.

A Registered Dietician provides Medical Nutrition Therapy (MNT) with a qualified NPI number and Medicare number. MNT provides clients with Diabetes or Renal Disease (not on dialysis), a nutrition assessment, and appropriate counseling and education during in-home visits. Clients receiving this service must meet certain criteria, including:

- Referral or a signed order from a physician indicating the correct diagnosis via ICD-10 codes
- Have Medicare Part B (Straight) as their Primary insurance
- May not have a Medicare Managed care (HMO) insurance such as Medicare Advantage, Medicare Blue, Medicare Plus, etc.
- Must have a qualified diagnosis of Diabetes Type 1 or 2
- Renal Disease but not receiving dialysis
- Has not used MNT benefits for Diabetes or Renal education within the last three (3) years

2. Briefly describe how these grants and other initiatives will improve the quality of life of older adults within the PSA.

Please see above information.

3. Briefly describe how these other grants and initiatives reinforce the area agency's planned program development efforts for FY 2023-2025.

Please see above information.

FY 2023 AREA PLAN GRANT BUDGET

Rev. 10/8/21

Agency: Valley Area Agency on Aging

Budget Period: 10/01/22 to 09/30/23

PSA: 5

Date: 03/30/22

Rev. No.: 0 Page 1of 3

SERVICES SUMMARY

FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	583,177		583,177
2. Fed. Title III-C1 (Congregate)		499,473	499,473
3. State Congregate Nutrition		13,317	13,317
4. Federal Title III-C2 (HDM)		682,634	682,634
5. State Home Delivered Meals		664,095	664,095
8. Fed. Title III-D (Prev. Health)	43,893		43,893
9. Federal Title III-E (NFCSP)	277,348		277,348
10. Federal Title VII-A	8,512		8,512
10. Federal Title VII-EAP	9,065		9,065
11. State Access	39,749		39,749
12. State In-Home	708,686		708,686
13. State Alternative Care	156,207		156,207
14. State Care Management	359,908		359,908
15. St. ANS	61,985		61,985
16. St. Nursing Home Ombs (NHO)	22,405		22,405
17. Local Match			
a. Cash	129,294	60,406	189,700
b. In-Kind	52,693	297,801	350,494
18. State Respite Care (Escheat)	96,060		96,060
19. MATF	166,686		166,686
19. St. CG Support	22,540		22,540
20. TCM/Medicaid & MSO	210,707		210,707
21. NSIP		656,595	656,595
22. Program Income	23,944	219,063	243,007
TOTAL:	2,972,859	3,093,384	6,066,243

BGP Allocation Amount 5,599,750

ADMINISTRATION

Revenues		Local Cash	Local In-Kind	Total
Federal Administration	231,836	47,809	-	279,645
State Administration	40,072			40,072
MATF Administration	16,000	-	-	16,000
St. CG Support Administration	-	-	-	-
Other Admin	28,800			28,800
Total AIP Admin:	316,708	47,809	-	364,517

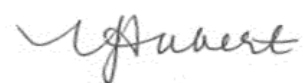
Expenditures


	FTEs	
1. Salaries/Wages	4.00	249,875
2. Fringe Benefits		62,470
3. Office Operations		52,172
Total:		364,517

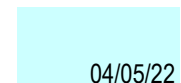
Cash Match Detail

Source	Amount	In-Kind Match Detail	Amount
1. Local Units of Government	22,000	1. Federal Admin	
2. Unrestricted Funds	25,809	2. Federal Admin	-
3. Federal Admin	-	3. Federal Admin	-
MATFF Administration Match	-	MATF Administration Match	-
St CG Support Match	-	St CG Support Match	-
	-		-
	-		-
Total:	47,809	Total:	-

I certify that I am authorized to sign on behalf of the Area Agency on Aging. This budget represents necessary costs for implementation of the Area Plan. Adequate documentation and records will be maintained to support required program expenditures.


Signature


President & CEO
Title


04/05/22
Date

FY 2023 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL																					
		Agency: Valley Area Agency on Aging										Budget Period: 10/01/22				to 09/30/23		Rev. 10/8/21			
		PSA: 5										Date: 03/30/22				Rev. No.:		page 2 of 3			
*Operating Standards For AAA's																					
Op						Title VII A	State	State	St. Alt.	State Care	State	St. ANS	St. Respite	MATF	St. CG Suppl	TCM-Medicaid	Program	Cash	In-Kind		
Std	SERVICE CATEGORY	Title III-B	Title III-D	Title III - E	Title VII/EAP	OMB	Access	In-Home	Care	Mgmt	NHO		(Escheat)			MSO Fund	Income	Match	Match	TOTAL	
A	Access Services																				
A-1	Care Management	115,959		50			5,895			359,858		35,000				200,000	1,044	49,700		767,506	
A-2	Case Coord/supp	9,330		50			11,425			50		7,792						1,916	4,216	34,779	
A-3	Disaster Advocacy & Outreach Program																			-	
A-4	Information & Assis	125,340		112,512			22,429					10,002							3,664	273,947	
A-5	Outreach	29,975		21,721														4,968	2,006	58,670	
A-6	Transportation	1,000		50										50	50					1,150	
A-7	Options Counseling																			-	
A-8	Care Transition																			-	
B	In-Home																				
B-1	Chore	4,050																20		4,070	
B-2	Home Care Assis																			-	
B-3	Home Injury Cntrl	2,314																220	1,056	3,590	
B-4	Homemaking	10,257						284,132	19,493								3,636	4,773	4,758	327,049	
B-6	Home Health Aide																			-	
B-7	Medication Mgt	9,192															1,208	2,944		13,344	
B-8	Personal Care	51,979						424,454	136,614			9,191					5,987	27,872	7,833	663,930	
B-9	Assistive Device&Tech	4,000																		4,000	
B-10	Respite Care	1,037		60,027									83,985	62,418	11,141		8,048	14,905	4,883	246,444	
B-11	Friendly Reassure	3,950																600		4,550	
C-10	Legal Assistance	39,000															21	8,947		47,968	
C	Community Services																				
C-1	Adult Day Services	100		36,127									12,075	104,218	11,349			3,434	22,011	189,314	
C-2	Dementia ADC																			-	
C-6	Disease Prevent/Health Promtion	26,239	43,893	16,661													4,000	4,400		95,193	
C-7	Health Screening																			-	
C-8	Assist to Hearing Impaired & Deaf Cmty	100																		100	
C-9	Home Repair																			-	
C-11	LTC Ombudsman	11,305				8,512					22,405					10,707		3,445		56,374	
C-12	Sr Ctr Operations																			-	
C-13	Sr Ctr Staffing																			-	
C-14	Vision Services																			-	
C-15	Prevnt of Elder Abuse,Neglect,Exploitation					9,065														9,065	
C-16	Counseling Services																			-	
C-17	Creat.Conf.CG@ CCC																			-	
C-18	Caregiver Supplmt Services			100																100	
C-19	Kinship Support Services			20,000															2,266	22,266	
C-20	Caregiver E,S,T			10,000														1,150		11,150	
*C-8	Program Develop	110,000																		110,000	
Sp Co	Region Specific																				
	a. Community Living Supports (CLS)	1,000						100	100											1,200	
	b. Independence by Choice	26,000																		26,000	
	c. Emergency Gap Filling Services	50		50																100	
	d.																			-	
	7. CLP/ADRC Services	1,000		-																1,000	
	8. MATF Adm													16,000						16,000	
	9. St CG Sup Adm																			-	
SUPPRT SERV TOTAL		583,177	43,893	277,348	9,065	8,512	39,749	708,686	156,207	359,908	22,405	61,985	96,060	182,686	22,540	210,707	23,944	129,294	52,693	2,988,859	

FY 2023 NUTRITION / OMBUDSMAN / RESPITE / KINSHIP - PROGRAM BUDGET DETAIL										
<div> <div>Agency: Valley Area Agency on Aging</div> <div>Budget Period: 10/01/22 to 9/30/23</div> <div>PSA: 5</div> <div>Date: 03/30/22</div> <div>Rev. Number 0</div> <div>Rev. 10/8/21</div> <div>page 3 of 3</div> </div>										
FY 2023 AREA PLAN GRANT BUDGET - TITLE III-C NUTRITION SERVICES DETAIL										
Op Std	SERVICE CATEGORY	Title III C-1	Title III C-2	State Congregate	State HDM	NSIP Title III-E	Program Income	Cash Match	In-Kind Match	TOTAL
	Nutrition Services									
C-3	Congregate Meals	485,817		13,317		90,041	110,472	12,815	86,778	799,240
B-5	Home Delivered Meals		636,918		664,095	566,554	108,591	47,591	211,023	2,234,772
C-4	Nutrition Counseling									-
C-5	Nutrition Education									-
	AAA RD/Nutritionist*	13,656	45,716							59,372
	Nutrition Services Total	499,473	682,634	13,317	664,095	656,595	219,063	60,406	297,801	3,093,384

*Registered Dietitian, Nutritionist or individual with comparable certification, as approved by AASA.

FY 2023 AREA PLAN GRANT BUDGET-TITLE VII LTC OMBUDSMAN DETAIL										
Op Std	SERVICE CATEGORY	Title III-B	Title VII-A	Title VII-EAP	State NHO	MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
	LTC Ombudsman Ser									
C-11	LTC Ombudsman	11,305	8,512	-	22,405	10,707	-	3,445	-	56,374
C-15	Elder Abuse Prevention	-		9,065			-	-	-	9,065
	Region Specific	-	-	-	-		-	-	-	-
	LTC Ombudsman Ser Total	11,305	8,512	9,065	22,405	10,707	-	3,445	-	65,439

FY 2023 AREA PLAN GRANT BUDGET- RESPITE SERVICE DETAIL										
Op Std	SERVICES PROVIDED AS A FORM OF RESPITE CARE	Title III-B	Title III-E	State Alt Care	State Escheats	State In-Home	Merit Award Trust Fund	Program Income	Cash/In-Kind Match	TOTAL
B-1	Chore									-
B-4	Homemaking									-
B-2	Home Care Assistance									-
B-6	Home Health Aide									-
B-10	Meal Preparation/HDM									-
B-8	Personal Care									-
	Respite Service Total	-	-	-	-	-	-	-	-	-

FY 2023 AREA PLAN GRANT BUDGET-TITLE E- KINSHIP SERVICES DETAIL										
Op Std	SERVICE CATEGORY	Title III-B	Title III-E				Program Income	Cash Match	In-Kind Match	TOTAL
	Kinship Ser. Amounts Only									
C-18	Caregiver Sup. Services	-					-		-	-
C-19	Kinship Support Services	-	20,000				-	-	2,266	22,266
C-20	Caregiver E,S,T	-	-				-	-	-	-
		-	-				-	-	-	-
	Kinship Services Total	-	20,000				-	-	2,266	22,266

Planned Services Summary Page for FY 2023			PSA: 5		
Service	Budgeted	Percent of the Total	Method of Provision		
	Funds		Purchased	Contract	Direct
ACCESS SERVICES					
Care Management	\$ 767,506	12.62%		X	X
Case Coordination & Support	\$ 34,779	0.57%		X	X
Disaster Advocacy & Outreach Program	\$ -	0.00%			
Information & Assistance	\$ 273,947	4.50%		X	X
Outreach	\$ 58,670	0.96%		X	X
Transportation	\$ 1,150	0.02%	X		
Option Counseling	\$ -	0.00%			
Care Transition	\$ -	0.00%			
IN-HOME SERVICES					
Chore	\$ 4,070	0.07%	X	X	
Home Care Assistance	\$ -	0.00%			
Home Injury Control	\$ 3,590	0.06%	X	X	
Homemaking	\$ 327,049	5.38%	X	X	
Home Delivered Meals	\$ 2,234,772	36.74%	X	X	X
Home Health Aide	\$ -	0.00%			
Medication Management	\$ 13,344	0.22%	X	X	
Personal Care	\$ 663,930	10.92%	X	X	
Personal Emergency Response System	\$ 4,000	0.07%	X		
Respite Care	\$ 246,444	4.05%	X	X	
Friendly Reassurance	\$ 4,550	0.07%			X
COMMUNITY SERVICES					
Adult Day Services	\$ 189,314	3.11%	X	X	
Dementia Adult Day Care	\$ -	0.00%			
Congregate Meals	\$ 799,240	13.14%		X	X
Nutrition Counseling	\$ -	0.00%			
Nutrition Education	\$ -	0.00%			
Disease Prevention/Health Promotion	\$ 95,193	1.57%			X
Health Screening	\$ -	0.00%			
Assistance to the Hearing Impaired & Deaf	\$ 100	0.00%	X		
Home Repair	\$ -	0.00%			
Legal Assistance	\$ 47,968	0.79%		X	
Long Term Care Ombudsman/Advocacy	\$ 56,374	0.93%		X	
Senior Center Operations	\$ -	0.00%			
Senior Center Staffing	\$ -	0.00%			
Vision Services	\$ -	0.00%			
Programs for Prevention of Elder Abuse,	\$ 9,065	0.15%		X	
Counseling Services	\$ -	0.00%			
Creating Confident Caregivers® (CCC)	\$ -	0.00%			
Caregiver Supplemental Services	\$ 100	0.00%	X		
Kinship Support Services	\$ 22,266	0.37%	X		
Caregiver Education, Support, & Training	\$ 11,150	0.18%		X	
AAA RD/Nutritionist	\$ 59,372	0.98%			X
PROGRAM DEVELOPMENT	\$ 110,000	1.81%			X
REGION-SPECIFIC					
a. Community Living Supports (CLS)	\$ 1,200	0.02%	X		
b. Independence by Choice	\$ 26,000	0.43%			X
c. Emergency Gap Filling Services	\$ 100	0.00%	X		
d.	\$ -	0.00%			
CLP/ADRC SERVICES	\$ 1,000	0.02%	X		
SUBTOTAL SERVICES					
MATF & ST CG ADMINISTRATION	\$ 16,000	0.26%			X
TOTAL PERCENT		100.00%	14.00%	61.98%	24.02%
TOTAL FUNDING	\$ 6,082,243		\$851,148	\$3,770,063	\$1,461,032

Note: Rounding variances may occur between the Budgeted Funds column total and the Total Funding under the Method of Provision columns due

