Agenda

Health & Human Services Committee West Olive Administration Building – Board Room 12220 Fillmore Street, West Olive, Michigan 49460 Wednesday, June 13, 2012 8:30 a.m.

Consent Items:

- 1. Approval of the Agenda.
- 2. Approval of the Minutes from the May 9, 2012 Health and Human Services Committee meeting.

Action Items:

1. <u>Senior Resources Annual Implementation Plan FY 2013 (Presentation)</u> Suggested Motion:

To approve and forward to the Board of Commissioners the resolution approving the Senior Resources Annual Implementation Plan FY 2013.

Discussion Items:

- 1. Youth Assessment Survey Condensed Overview by Marcia Knol, Public Health Epidemiologist
- 2. Department Updates

Adjournment

Comments on the day's business are to be limited to three (3) minutes.

HEALTH & HUMAN SERVICES

Proposed Minutes

DATE: May 9, 2012

TIME: 8:30 a.m.

PLACE: Fillmore Street Complex

PRESENT: James Holtrop, James Holtvluwer, Stu Visser, Robert Karsten

ABSENT: Greg DeJong

STAFF & GUESTS: Alan Vanderberg, Administrator; Lynne Doyle, CMH; Lisa Stefanovsky, Health Officer; Dr. Paul Heidel, Medical Director; Donna Cornwell, Human Services Coordinating Council; Sherri Sayles, Deputy Clerk; Michelle Martin, DHS Director; Bill Raymond, MI Works!/CAA Director; Nate Bishop, DHS Program Director; Keith VanBeek, Assistant Administrator; Cara Zerbel, Homeless Youth Coalition; Kori White-Bissot, LCC Executive Director

SUBJECT: CONSENT ITEMS

HHS 12-009 Motion: To approve the agenda of today as presented and to approve the minutes from

the April 11, 2012 meeting as presented.

Moved by: Karsten UNANIMOUS

SUBJECT: DISCUSSION ITEMS

 MiTeam – Nate Bishop explained the implementation of the MiTeam model which serves to improve engagement practices and establish a unified approach that helps families, children, youth and caregivers. The Department of Human Services received training and started on May 1st.

2. Update on the Homeless Youth Coalition – Cara Zerbel reported on June 7th a "Youth Connect Event" has been scheduled. This is a resource fair for youths. The event will be held in Grand Haven and students will be bused in from surrounding areas.

"Pathways to Graduation" is a program being looked at to help monitor household participation in students life's.

3. Meningococcal Meningitis – A power point presented was presented by Dr. Paul Heidel. It was encouraged that all children get vaccinated.

Mr. Vanderberg introduced Kori White-Bissot, LCC Executive Director.

4. Department Updates –

Human Services Coordinating Council – Donna Cornwell gave a brief update on the "Non-Profit Next" dealing with the future of non-profits.

Department of Human Services – Michelle Martin presented updates on foster care up to age 21, the "Michigan Youth Initiative" program, and cash assistance.

Administration – Mr. Vanderberg talked briefly on unfunded mandates.

MI Works!/CAA – Bill Raymond presented updates on posted positions, "Ready Now" a MI Works! Event, the Summer Youth Project for lower income youths, K-12 college readiness, the Lakeshore Adult Learning Center, and CAA funding.

Community Mental Health – Lynne Doyle reported dual eligibility issues are on hold for now. She briefly spoke on block grants and recovery training.

Health Department – Lisa Stefanovsky reported the Youth Assessment Survey results are in. The State will be doing the Health Department's accreditation the week of May 12th.

Dr. Heidel reported Erik Foster, Medical Entomologist, will be presenting a talk on Lyme Disease May 12th at the Nature Center.

SUBJECT: ADJOURNMENT

HHS 12-010 Motion: To adjourn at 9:50 a.m.

Moved by: Visser UNANIMOUS

Action Request



Committee: Health and Human Services Committee
Meeting Date: 6/13/2012
Requesting Department: Administrator's Office
Submitted By: Misty Cunningham
Agenda Item: Senior Resources Annual Implementation Plan FY 2013

SUGGESTED MOTION:

To approve and forward to the Board of Commissioners the resolution approving the Senior Resources Annual Implementation Plan FY 2013.

SUMMARY OF REQUEST:

It is a requirement of the Michigan Office of Services to the Aging that area agencies on aging send a copy of their Area Plan and seek a resolution from County Boards by July 30 of each year. The Ottawa County Human Services Coordinating Council reviewed and recommends approval of this plan.

The request from Senior Resources also includes a \$20,000 local match for 2013 to leverage \$2,032,930 in federal and state funds. Action on this resolution does not commit the County to that amount, but rather reserves that appropriation decision for the budget cycle later in 2012.

FINANCIAL INFORMATION:									
Total Cost: \$0.00 General Fund Cost: \$0.00 Included in Budget: ☐ Yes ☐ No									
If not included in budget, recom-	mended funding source:	<u> </u>							
ACTION IS RELATED TO AN A	стіvіту Wнісн Is:								
Mandated	Non-Mandated Non-Mandated	New Activity							
ACTION IS RELATED TO STRA	ATEGIC PLAN:								
Goal: 3: To Contribute to a Heal	thy Physical, Economic, & Commu	nity Environment.							
Objective: 4: Continue initiative:	s to positively impact the communit	y.							
ADMINISTRATION RECOMMENDATION: Recommended Not Recommended Without Recommendation									
County Administrator:									
Committee/Governing/Advisory Board Approval Date:									

COUNTY OF OTTAWA

STATE OF MICHIGAN

RESOLUTION

At a regular	meeting of the Bo	oard of Co	ommissione	rs of the Co	ounty of Ott	awa, Mic	chigan, l	neld at
the Fillmore	e Street Comple	x in the	Township	of Olive,	Michigan	on the	d	ay of
	, 2011 at		o'clock p.m	. local time	•			
PRESENT:	Commissioners: _							
ABSENT: C	ommissioners:							
It was moved	d by Commission	er			_ and suppo	rted by C	Commiss	sioner
		_ that the	following R	esolution b	e adopted:			
WHE	EREAS, Senior Re	esources, t	he Area Ag	ency for Ag	ging serving	g the resid	dents of	
Ottawa Cour	nty, has filed its A	nnual Imp	olementation	n Plan for F	Y 2012 ("th	ne Plan")	with the	;
Ottawa Cour	nty Board of Com	missioner	s; and,					

WHEREAS, the Ottawa County Board of Commissioners, upon review of the Plan, has determined that it is consistent with the goals and objectives of the County of Ottawa with regard to services for senior citizens, and has further determined that implementation of the Plan will protect and benefit the health, safety, and welfare of the senior citizens of Ottawa County, with County funding therefore, if any, subject to the availability of such resources in the County

budget as may be determined in the sole discretion of the Ottawa County Board of Commissioners;

NOW THEREFORE BE IT RESOLVED, that the Ottawa County Board of Commissioners receives and approves the Senior Resources Annual Implementation Plan for FY 2012, with County funding, if any, subject to the availability of such resources in the County budget, as may be determined in the sole discretion of the Ottawa County Board of Commissioners; and,

BE IT FURTHER RESOLVED, that all resolutions and parts of resolutions insofar as they conflict with this Resolution are hereby repealed.

YEAS: Commissioners:

NAYS: Commissioners: _			

ABSTENTIONS:	Commissioners: _		

RESOLUTION ADOPTED.

Chairperson, Ottawa County
Board of Commissioners

Ottawa County Clerk





Mr. Philip D. Kuyers, Chairperson County of Ottawa, Board of Commissioners 12220 Fillmore West Olive, MI 49460 RECEIVED

MAY 17 2012

OTTAWA COUNTY
ADMINISTRATORS OFFICE

Mr. Kuyers,

Please find enclosed a copy of Senior Resources Annual Implementation Plan for FY'2013 for your review and approval. It is a requirement by our state office that Area Agencies on Aging send a copy of their Area Plan and seek a resolution/adoption from the County Board by July 31, 2012. If the Commissioners do not approve the plan please identify the reason(s) that it was not approved. If we do not receive a resolution or minutes from you prior to July 31st then we will assume you approve the plan. Pam Curtis and I will be reviewing this plan with the Ottawa Human Services Coordinating Council on May 23, 2012.

This plan represents an update to the 2010-2012 Multi-Year Plan. Typically the Fiscal Year 2013 Plan would be part of a Multi-Year Plan however; the Michigan Offices of Services to the Aging has extended the Multi-Year Plan until next year while we await 2012 Census data that may alter funding formularies. Senior Resources will be writing a Multi-Year Plan in 2014.

The budget information included in the plan represents a continuation in state and federal funding. We recognize that new budget figures maybe available after May 31. If Senior Resources receives new budget figures before June 15, 2012 we will send them to you promptly for your review.

The Senior Resources Program and Planning Advisory Board and the Board of Directors, both of which have representatives from all three of our counties, approved the Annual Implementation Plan for FY'2013 at their May meetings. A copy of the plan has also been submitted to the Office of Services to the Aging for their review, comment, and approval at their September Board meeting.

We appreciate your time and effort in reviewing our plan. Please feel free to give me a call at 1-800-442-0054 if you have any questions.

Sincerely,

Amy Florea-

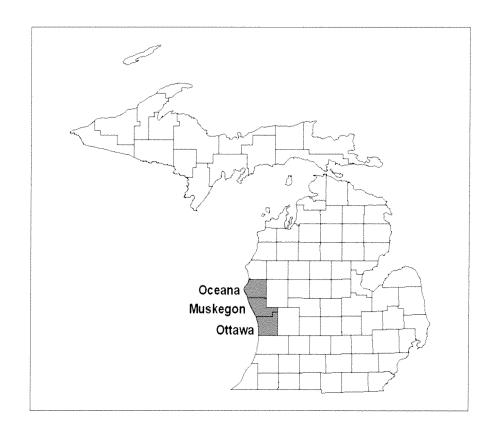
Community Services Director

cc: Al Vanderberg, Administrator

Keith Van Beek, Assistant County Administrator

Enclosures

FY'2013 Annual Implementation Plan



Senior Resources of West Michigan 560 Seminole Rd.

Muskegon, MI 49444

(231) 739-5858 or 800-442-0054

Pam Curtis, Executive Director

Amy Florea, Community Services Director

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MICHIGAN OFFICE OF SERVICES TO THE AGING

ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

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ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

County/Local Unit of Govt. Review

AAA Response:

Senior Resources will send a draft copy of the 2013 Annual Implementation plan via certified mail or email with a delivery receipt and read receipt request to each chairperson of the county commissioner's board and the administrator of the board for each county in our region no later than May 18, 2012. In a cover letter sent to the chairperson of each board of commissioners, Senior Resources will offer to attend the County Board meeting for each county in our region to respond to any questions related to the plan. The letter will indicate that if we do not hear from their local units of government prior to July 31, 2012 with a written or emailed resolution or approval, Senior Resources will assume their board's passive approval of the plan.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Plan Overview

AAA Response:

The mission of Senior Resources is to provide a comprehensive and coordinated system of services designed to promote the independence and dignity of older persons and their families in Muskegon, Oceana, and Ottawa counties — a mission compelling us to focus on older persons in greatest need and to advocate for all. Senior Resources serves as a focal point and acts as an advocate for the elderly by advancing causes or issues that are vital to their welfare. It is the agency's specific goal to effectively implement the Older Americans Act by developing and administering a regional area plan for coordinating and contracting with viable agencies for services for persons 60 years and older. It is also a goal of the agency to inform and educate seniors, families and the public on available services and issues affecting older adults.

Providing an older adult with the services necessary to remain in their own home is the focus of the case management services. Individuals in need of homecare services must become clients of either one of the Case Coordination & Support programs or the Care Management program in order to receive services through our Purchase of Service system. Consumers choose from a pool of personal care, homemaking, in-home respite, and adult day care providers. Supports coordinators assess client's physical, social and financial needs and then, if applicable, make arrangements for in-home services including: home delivered meals, personal care, in-home respite, homemaking, medication management, personal emergency response systems and adult day care. If necessary, transportation services can be arranged, Medicare, Medicaid and other insurance counseling can be provided and assistance is available with the Medicare Prescription Drug Program. Referrals are also made to other community programs. Supports coordinators received and will continue to enhance their training in long term care options counseling. something they have always done but will be offered in a more consistent format. In 2012 we hired three Options Counselors and have incorporated their service into the Intake Process. Consumers identified at the time of the initial contact with an Options Counselor as a candidate for a community living program or at risk for nursing home placement are referred to the community living consultant immediately. Options counseling not only explains someone's long term care options, it also allows for discussion on a person's personal finances and how to best utilize them to make them last for as long as possible and still allow the person to remain in the setting of their choice.

Consumers are deemed appropriate and prioritized for service by the RN Services Coordinator who also monitors level of service. Use of a purchase of service format allows clients and case managers more flexibility in arranging services and clients may choose their providers or change them if they are unhappy. Senior Resources has found this to be a more efficient and effective use of limited dollars.

Demand for services continues to exceed the supply of funds available. As funding gets tighter we continue to look for alternative sources to assist our clients and creative measures to work with what we have. Incremental funding increases in the OAA over the last several years have not kept pace with inflation or the growing population of individuals eligible for services for two decades. As a result, unmet needs and waiting lists for services exist throughout the country.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

In response, Area Agencies on Aging have skillfully managed care for vulnerable aging populations by maximizing private and public resources to ensure that essential services are available to minority, frail and low-income older persons in need of comprehensive long-term services and supports. However, as the aging population grows – with more people living longer but facing chronic illness and frailty – and in the absence of significant funding increases, the Aging Service Network will increasingly be unable to meet the demands for care. These challenges will only grow. The number of Michigan seniors age sixty and older is rising by 135 residents per day! This growing wave of older adults presents challenges and opportunities.

The National Family Caregiver Support Program and Tobacco Settlement Respite funds have allowed us to enhance and develop a variety of supportive programs for caregivers over the past six years. We are able to provide caregivers with much needed respite breaks through one of the four adult day care facilities in our region or in the client's place of residence if they are unable to get out of the home. A monthly newsletter, The Caregiver Link, is specifically designed to address the needs of area caregivers and has a distribution list of 800+. Senior Resources installed caregiver libraries in five different locations throughout the region. We also offer a variety of caregiver trainings and support groups, including assistance and support for grandparents raising their grandchildren. A program specifically designed to meet the needs of the working caregiver has been developed. Caregivers in the "sandwich" generation are in need of caregiving resources that are identified and accessible through the workplace.

Senior Resources has established chronic disease management programs throughout our three county area with 10 agencies and 30 lay leaders involved in facilitating programs to assist seniors in managing their chronic health conditions. Currently we are offering Personal Action Towards Health (PATH), Arthritis Exercise, Healthy Eating, TaiChi and Matter of Balance evidence based programming. In 2013 we plan to expand the evidence based programming by adding two new programs to the classes currently offered. While not a significant amount of money is awarded for Health Promotion/Disease Prevention these funds do have an effect on preventative health matters.

Senior Resources has a Community Loan closet available to residents of all three counties that provides medical equipment and supplies. Requests come from not only Senior Resources' community partners and staff, but from local hospitals and other home care offices, churches, United Way agencies and CALL 2-1-1. The partnership at Tanglewood Park has increased public awareness; more individuals, organizations and agencies are offering donated goods to maintain the inventory – such as adult diapers, liquid dietary supplements, walkers, bath chairs, wheel chairs and commodes.

Staff at Senior Resources have taken part in a variety of program development and program improvement projects over the last year. These projects have varied from building relationships with community partners in an effort to become an emerging ADRC to participating in the Ottawa County Food Council to assure resident's access to food, to a Healthy Muskegon initiative to a community caregiver event and our agency participation in a regional Community Health Survey. We have participated in the creation of a health clinic for the uninsured in northern Ottawa County, a person centered training with another AAA, and the development of the Creating Confident Caregivers training program in our area. In the past year we worked with the Oceana County Council on Aging as they developed a new adult day care and will continue to partner as they explore the possibility of creating a new assisted living. In addition to carrying over some of these projects, we will be working with Ottawa County on a gap analysis study of older adult services and



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

with United Way on their community needs assessment. We will also continue discussions with Muskegon County on a future senior millage.

The 2013 annual plan once again emphasizes security and independence for the elderly. Services are targeted to low-income, frail, minority, and medically underserved. It is the intent of Senior Resources to assure that the basic services, Home-Delivered Meals, Personal Care, Homemaker Services, Adult Day Care/In-Home Respite, Case Coordination & Support and Care Management are available throughout the three county area. In-put sessions, surveys, planning committee meetings, and public hearings were conducted throughout the region in preparation for the multi-year plan and this annual implementation plan. The goals reflect the views of the older citizens, advisory council members, service providers, community leaders, and our policy board who participated in the planning process. There are no substantive changes from the FY'2012 plan.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Public Hearings

AAA Response:

	Date	Location	Time	Is Barrier Free	No of Attendees
	05/10/2012	Tanglewood Park	10:30 AM	Yes	16
- 1					-

Narrative:

A public hearing on the Senior Resources, Area Agency on Aging 2013 Annual Implementation Plan was held on May 10, 2012, at Tanglewood Park, 560 Seminole Rd. Muskegon, MI at 10:30 a.m. This is a barrier-free facility and has been designated a community focal point. Notices of the hearing were disseminated to area newspapers, senior centers, service providers, our website, board and advisory council members and the aging network via Vendor View, Sixty Seconds newsletter and email 30 days prior to the hearing. Copies of the proposed draft plan were available on our website and upon request by April 25, 2012.

All persons attending the hearing on May 10, 2012 had access to copies of the 2013 Draft Area Plan if they did not already have a copy. The purpose of the public hearing was presented as well as highlighted sections including a summary of services, highlights of FY'12 accomplishments, description of goals for FY'13 and strategies for accomplishing them, description of special projects and partnerships and, advocacy efforts and a budget overview.

There were 16 people in attendance at the hearing.

There were no verbal comments or testimony at the time of the hearing. Comments, written and/or verbal were taken until May 25, 2012.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Available Resources & Partnerships

AAA Response:

The Senior Resources Board of Directors and staff have established as a priority providing services to the most in need. To that end, we partner with over 90 In-Home Care Agencies that are located and provide care throughout our three county area. In-home services including personal care, homemaking, respite, and home-delivered meals remain priority services as well as adult day care and caregiver services. We will strive to expand those and other services in the area and to coordinate with agencies to provide services such as chore services, home repair, telephone reassurance, and emergency assistance. Senior Resources will continue to work with area collaborative bodies to insure that services reach the frailest elderly.

The demand for services is expected to continue to grow with the swiftly aging population. The amount of funding Senior Resources receives for services are not able to keep up with that demand. To help alleviate some of the excess demand, we will continue to seek alternative funding to support services in out three county region.

This past year Senior Resources has used interest income to support the unmet needs program. We use these funds to purchase items such as dentures, glasses, furnace repairs, ramps, appliances, and emergency transportation. In the Senior Resources publication, Senior Perspectives, a segment is devoted to assist seniors in locating low cost services with individual workers that have indicated a skill in providing the requested service. We also continue to work with a variety of volunteer programs and youth summer camps to provide an assortment of chore services.

Senior Resources contracts with a 24 hour 7 days a week information and assistance call center with call specialists skilled in helping families clarify their situation and identify the best solutions. Information and Assistance is available region-wide through CALL 2-1-1. A phone call provides access to information and assistance regarding in-home services, case coordination & support, Care Management/Medicaid Waiver programs, insurance, prescriptions, taxes, transportation, support groups, home repair, housing, and a host of knowledge. In addition, the Senior Resources Options Counselors educate consumers, explore options, and make appropriate referrals as needed. Information and Assistance is the first step in our continuum of care. Additional information can be gained from the Call-211 website at www.call-211.org. Several of our contractors, and Senior Resources, are recipients of United Way funds. Senior Resources will continue to work closely with the United Ways in an effort to provide the broadest amount of service coverage possible. The combination of United Way and Senior Resources funds allows many providers to enhance and expand the amount of service they are providing rather than duplicate it.

In the Senior Resources service area two counties receive millage service dollars. Both the Oceana County Council on Aging and the North Ottawa County Council on Aging are recipients of millage funds in their areas. Oceana has a county-wide millage and receives approximately \$801,372, while North Ottawa receives funds from specific townships of approximately \$585,000 for 2013 millage estimate. These funds are used to cover operating expenses for all services and support existing programs within the Councils on Aging. Without these funds both agencies would be forced to cut back or eliminate services to older adults in their areas.

Senior Resources is partnering with all interested and pertinent community partners to establish seamless, "no wrong door" access to community services in the form of an Aging and Disability Resource Collaboration (ADRC). Currently, these partners include 2-1-1, the area Centers for Independent Living, our community focal points, local hospitals, the ombudsman program, the other area MIChoice Waiver agent, DHS office and some CMH officials. This group meets bimonthly to set the direction of the ADRC



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

and prepare for the application process in which we will propose to become a fully functioning ADRC.

A partnership established in 2012 with the Muskegon County Sheriff's Office has given Senior Resources the opportunity to offer Project Lifesaver in Muskegon County. Project Lifesaver is a non-profit organization located in Virginia. They train local law enforcement (in this case the Muskegon County Sheriff's Office) in how to utilize reliable radio technology to track individuals with conditions that may cause them to wander. Project Lifesaver is for people suffering from severe brain injuries or diseases such as Alzheimer's, Dementia, Down's syndrome, or Autism. Individuals that are prone to wander as a result of their disease or injury or become disoriented and confused when in the community are eligible for this program.

Senior Resources has written and received local grants to purchase Project Lifesaver units for scholarship as well as provides units available for caregivers to purchase.

Senior Resources partners with a variety of local health and human service providers to deliver services from a group of highly qualified staff to assure the best level of care and assistance and we will continue to work with a variety of collaborative bodies in the region to create new services when needed and enhance the old ones, as we are able.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Access Services

Care Management

Starting Date

10/01/2012

Ending Date

09/30/2013

Total of Federal Dollars

Total of State Dollars

\$215,913.00

Geographic area to be served:

Muskegon, Oceana and Ottawa Counties

List each goal for the program, including timeline and expected outcome:

Goal: Supports Coordinators will employ Person Centered Thinking and self-determination to assure consumer choice in services and providing agencies or people.

Time Line: Through September 30, 2013.

Outcome: Consumers will have greater autonomy regarding their care resulting in a higher satisfaction rate and continued compliance.

Goal: Supports Coordinators will assist the consumer and their family in identification of natural supports, personal resources and other community/external resources available for long-term care.

Time Line: Through September 30, 2013.

Outcome: Consumers will have awareness of and access to community support services.

Goal: Case Coordination & Support consumers will be moved to Care Managment or MI Choice/Wauver as fraility increases and eligibility becomes evident.

Time Line: Through September 30, 2013.

Outcome: Consumers will have greater ease of access to services.

Number of client pre-screenings:

Current Year:

50

Planned Next Year:

60

Number of initial client assesments:

Current Year: Current Year: 30 30 Planned Next Year Planned Next Year:

40 40

Number of initial client care plans: Total number of clients (carry over

Current Year:

87

Planned Next Year:

95

plus new):

Staff to client ratio (Active and

maintenance per Full time care

Current Year:

38

Planned Next Year:

38

MATCH:

Source of Funds Source of Funds Cash Value: Cash Value:

\$20,000.00

In-kind In-kind

\$4,000.00

Source of Funds

Cash Value:

In-kind

OTHER RESOURCES:

Source of Funds

Cash Value: Cash Value:

\$8,500.00

In-kind

Source of Funds Source of Funds

Cash Value:

In-kind In-kind

Case Coordination and Support

Starting Date

10/01/2012

Ending Date

09/30/2013

Printed On: 5/16/2012



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Total of Federal Dollars

\$119,122.00

Total of State Dollars

\$27,146.00

Geographic area to be served:

Muskegon County - Case Coordination and Support.

Muskegon, Oceana and Ottawa Counties -Options Counseling.

List each goal for the program, including timeline and expected outcome:

Goal: Supports Coordinators and Options Counselors will assist the consumer and their family in identification of natural supports, personal resources and other community/external resources available for long-term care.

Time Line: Through September 30, 2013.

Outcome: Consumers will have awareness of and access to community support services.

Goal: Case Coordination & Support consumers will be moved to Care Managment or MI Choice/Wauver as fraility increases and eligibility becomes evident.

Time Line: Through September 30, 2013.

Outcome: Consumers will have greater ease of access to services.

Goal: Supports Coordinators and Options Counselors will employ Person Centered Thinking and self-determination to assure consumer choice in services and providing agencies or people.

Time Line: Through September 30, 2013.

Outcome: Consumers will have greater autonomy regarding their care resulting in a higher satisfaction rate and continued compliance.

Printed On: 5/16/2012 11



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Program Development Objectives (State)

State Plan Goal: Goal One

Work to Improve the health and Nutrition of Older Adults

AAA Response:

Objective:

Community members will have and utilize regional meal sites that fulfill needs related to nutrition, socialization, health and wellness.

Timeline:

Through September 30, 2013.

Activities:

 Add activities to sites with lower daily attendance as activities often introduce people to the lunch programs.

Resources to be mobilized

AgeWell services will work to identify community partnerships for providing various activities including training lay leader and coaches for a variety of evidence based programs. In addition, they will utilize the many free and low cost marketing tools available to non-profit agencies within our region.

Who will benefit

Seniors.

Programs to be established

Specific activities are unknown but may include such things as fun/social activities, fitness activities including Evidence Based Disease Prevention programing and educational activities to provide information and resources to older adults. Some of these classes will have a fee attached for participation. This program income will assist AgeWell services in the perpetuation of the programming.

Staff positions and time to be allocated to the objective

Time to be allocated for objective success includes Marketing Manager for materials and promotions of activities, Program Manager for Congregate Centers for developing, instituting activities at selected centers and

Center Coordinator for additional time for implementing and reporting activities at centers and recruitment of volunteers.

Changes to the area agency's infrastructure necessary to achieve the objective None.

Expected Outcome:

Providing more activities at the congregate centers increases the number of new seniors coming to a center, increases the frequency seniors attend and maintains/increases annual attendance (normal attrition sometimes only allows for maintenance) and improves satisfaction of our center operation



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

AAA Response:

Objective:

To support older adults in the management of their chronic disease.

Timeline:

Through September 30, 2013

Activities:

Activities

- The regional team of 30 lay leaders and 6 Master Trainers for the Personal Action Towards Health (PATH) program will provide the PATH 6 week program series in various locations throughout the region. These PATH classes will be in the form of PATH, PATH Diabetes and PATH Spanish speaking.
- The regional team of Matter of Balance coaches will conduct the 8 week Matter of Balance program in locations throughout the region.
- The regional team will provide Arthritis Exercise, Healthy Eating and Arthritis Tai Chi in various locations throughout the region.
- Regionally develop and train volunteers to facilitate two additional types of approved Evidence Based programming.

Resources to be mobilized

We will take advantage of various Evidence Based Health Promotion/Disease Prevention trainings offered by the state and throughout the region and neighboring regions.

Who will benefit

Older persons and persons with disabilities.

Programs to be established

Two new Evidence Based programming will be established. The specific programs will be determined with feedback from our focal points and consumers.

Staff positions and time to be allocated to the objective

Community Services Directors time in the form of training, communication with lay leaders and reporting. Changes to the area agency's infrastructure necessary to achieve the objective None.

Expected Outcome:

We believe that when seniors are given support and education related to management of chronic conditions or other targeted health issues they will be better equipped to manage their health concerns over longer periods of time.

AAA Response:

Objective:

Community members will have and utilize regional meal sites that fulfill needs related to nutrition, socialization, health and wellness.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Timeline:

Through September 30, 2013

Activities:

- AgeWell Services, Senior Resources meal provider, will pilot increased hours of service with two congregate meal sites in the PSA. Meals will be offered on selected days for an extended period of time each day.
- AgeWell Services, at the same pilot meal sites, will provide a choice of meal items available on certain days. Meals will be flash frozen at the regional kitchen, delivered to the meal site and reheated as they are ordered, allowing for consumer preference.
- If pilot program is received positively and money is available, additional sites will be added. Resources to be mobilized:

AgeWell Services will use funds to purchase reheating appliance for meals. Training on the reheating tools for site coordination staff.

Who will benefit?

Seniors.

Programs to be established:

No additional programs will be created – longer hours and increased food options will be added to existing programs.

Staff positions and time to be allocated to the objective:

AgeWell site coordinators and kitchen staff time.

Changes to the area agency's infrastructure necessary to achieve the objective None.

Expected Outcome:

Providing expanded hours and additional meal choices will increase the number of new seniors attending congregate meals and add to the satisfaction of existing consumers.

State Plan Goal: Goal Two

Ensure That Older Adults Have a Choice in Where They Live Through Incrased Access to Information and Services

AAA Response:

Objective:

To ensure consumer choice and access to services.

Timeline:

Through September 30, 2013.

Activities:

Printed On: 5/16/2012



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- All Supports Coordinators employed by Senior Resources and focal points will have the required training to provide fitting Community Living Supports and Options Counseling to consumers.
- The 211 Call Center will use state/agency defined triggers to refer consumers to Options Counselors when met with multi-faceted consumer needs.
- All Supports Coordinators and Options Counselors will be trained in the Person Centered Thinking Process

Resources to be mobilized:

Training with the local Call 211 center. Two master level Person Centered Thinking trainers.

Who will benefit:

Seniors and/or disabled population and their caregivers in our PSA.

Programs to be established:

Senior Resources established the Long Term Care Options Counseling positions in 2011. This will be a continuation of that program with the added component of involvement in the Aging and Disability Collaboration project and enhanced cooperation with the Call 211 center.

Staff positions and time to be allocated to the objective:

Three full time Long Term Care Options Counselors and all Supports Coordinators throughout the PSA. Changes to the area agency's infrastructure necessary to achieve the objective:

None.

Expected Outcome:

We expect that consumers and their families or caregivers are better able to use personal resources with higher success and greater longevity when presented with options of care.

State Plan Goal: Goal Three

Protect Older Adults From Abuse and Exploitation

AAA Response:

Objective:

Caregivers of older adults will recognize signs of impending abuse.

Timeline:

Through September 30, 2013

Activities:

Activities:

- Supports Coordinators and Options Counselors will receive training/training updates on potential caregiver abuse signs and triggers and be able to assist caregivers with formal and informal supports to help prevent caregiver burnout.
- Caregivers will be able to identify indicators of stress related abuse and their triggers and seek assistance when appropriate.

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Resources to be mobilized:

Training resources for all staff related to caregiver burnout and stress emphasizing the importance of formal and informal supports and respite for the caregiver.

Who will benefit:

Caregivers and care recipients.

Programs to be established

None.

Staff positions and time to be allocated to the objective:

All Supports Coordinators and Options Counselors will provide this education as part of their contact with caregivers.

Changes to the area agency's infrastructure necessary to achieve the objective: None.

Expected Outcome:

When caregivers are informed regarding what constitutes elder abuse and provided access to respite whether formal or informal, there is greater caregiver longevity and satisfaction.

AAA Response:

Objective:

Decrease elder abuse in Muskegon, Oceana and Ottawa Counties by increasing awareness and knowledge of what is elder abuse and how to report it.

Timeline:

Through September 30, 2013.

Activities:

- The members of the Tri-County Protection Team will compose a six part series on all categories of Elder Abuse and publish it in the Senior Perspectives and Caregiver Links.— 17,000 Senior Perspective magazines are distributed throughout the Muskegon, Oceana and Ottawa County in January, March, May, July, September and November. 700 Caregiver Links are distributed monthly within the PSA. Portions will also be published in the focal points newsletters.
- An attorney who serves on the Tri-County Protection Team will be a guest on the Senior Connections informational TV broadcast which reaches 200,000 potential viewers. Two appearances will be scheduled to cover all subject material.
- The Tri- County Protection Team (TCPT) will direct the community and seniors to the website www.safeseniors.info for information and resources by marketing at various Senior health events throughout the 3 counties.
- The TCPT will develop an email list for communication of scams, resources, events, and advocacy.
- The TCPT will provide 3 group training events in our region and post materials in the education file on the website.
- TCPT will develop a social media site perpetuating the Elder Abuse message to the 50 and under age group.

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Resources to be mobilized

Tri-County Protection Team, Focal Points and local media outlets.

Who will benefit:

Seniors, family members, neighbors and community members.

Programs to be established

None.

Staff positions and time to be allocated to the objective:

Communications & Fund Developer with time related to planning script for television show and taping of the show.

Changes to the area agency's infrastructure necessary to achieve the objective:

None

Expected Outcome:

When educated regarding what constitutes elder abuse and that it is a in fact a crime; Seniors, family members of seniors or concerned neighbors will urge others to report abuse or report suspected abuse themselves.

State Plan Goal: Goal Four

Improve the Effectiveness, Efficiency, and Quality of Services Provided Through the Michigan Aging Network and its Partners

AAA Response:

Objective:

Consumers will have "no wrong door" access to information regarding long term options for care. To ensure consumer choice and access to services

Timeline:

Through September 30, 2013.

Activities:

- Monthly meetings comprised of the convener group to determine direction of the Aging and Disability Resource Collaboration (ADRC).
- Bi-Monthly meetings of all levels of ADRC membership.
- Continual update of long term care options publication. This publication is available to all service providers and outlines the care options in our community.
- Determine what agency will take geo routed phone number and on what days.
- Each convening agency will decide how data information will be relayed to the state office.
- Submit proposal application for formalized ADRC to state office.

Resources to be mobilized:

Knowledge from the Community Service agencies in our PSA.

Who will benefit



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Seniors or disabled population and their caregivers in our PSA.

Programs to be established
Aging and Disability Resource Collaboration

Staff positions and time to be allocated to the objective Executive Director and Community Services Director.
Changes to the area agency's infrastructure necessary to achieve the objective: None.

Expected Outcome:

That many consumers and their families are better able to utilize personal resources with higher success and greater longevity when presented with all levels of options of care. Less consumer frustration will result when all service agencies are able to uniformly refer consumers to provider agencies.

State Plan Goal: Narrative

The narrative should explain what the program development efforts intend to do to improve the quality of life for older adults in the PSA; whether older persons will receive what they want; and identify the effort and expenses involved. The FY 2013 AIP should include this narrative even if there are no new objectives or changes, or updates. It is OSA's expectation that program development efforts be meaningful to older adults within the PSA. Complete the Narrative under the Objective box below. Enter "n/a" in Timeline, Activities, and Expected Outcome boxes.

AAA Response:

Objective:

Taking into consideration input from previous and current feedback sessions of constituents and their caregivers throughout our PSA and staying in keeping with the goals set forth by the Office of Services to the Aging, Senior Resources has set the program development goals seen in this FY'13 Annual Implementation Plan. The goals set in the FY'2010 – 2012 Multi-Year Plan are either completed or still in development and we continue to strive toward accomplishing all of the stated development objections in that plan.

In talking with a small focus group the spring of 2012 it became apparent that some congregate meal consumers are interested in having more choice related to meal service times as well as menu items. During the 2013 fiscal year, AgeWell Services will pilot with two meal sites to offer a menu of meal selections to choose from. This will most likely occur a couple of days a week. These meals will be flash frozen at the regional kitchen, delivered to the meal site and heated as they are ordered allowing for consumer preference. This style of meal preparation will also allow for extended meal service hours permitting meals to be served over a specified period of time – say 11:30 – 1:00. We believe that providing expanded hours and additional meal choices will increase the number of new seniors attending congregate meals and add to the satisfaction of existing consumers. Also, AgeWell Services intends, as funds permit, to add activities to sites with lower daily attendance as activities often introduce people to the lunch programs.

We will continue to expand and enhance our available programming for the Evidence Based Disease



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Prevention (EBDP) opportunities throughout the region. In addition to PATH, PATH Diabetes, PATH Spanish, Matter of Balance, Arthritis Exercise and Tai Chi that are already being offered, we will through input from consumers and focal points, choose two other EBDP programs to offer consumers in our region.

Senior Resources is convinced that enhancing the referral process between all community agencies that serve older adults and persons with disabilities, assisting consumers and their caregivers in finding accessible, cost appropriate resources in their local communities and supplying them with all the options available to them will enable seniors and their caregivers to make informed individual decisions about living preferences and have the support they need to maintain in that environment. To that end we are working diligently with all service providers in the PSA to create an Aging and Disability Resource Collaboration (ADRC).

Goals for the ADRC this year include:

- Regular meetings to determine the direction of the collaboration
- Determining what agencies will be taking geo-routed calls and providing Options Counseling
- Completing the requirements for a Fully Functioning ADRC Documentation Benchmarks which will cumulate in the submission of a proposal application for a formalized ADRC to the state office.
 ADRC development will require program development time for the Community Services Director and Executive Director as all community agencies are convened to gain consensus on how this new structure is planned, designed, made operational and evaluated. Current expenses are mostly in the form of staff time.

Senior Resources believes that having a fully functioning ADRC will better poise involved service agencies to communicate community resources options to the disabled and older adult consumer and as a result many consumers and their families will be better able to utilize personal resources with higher success and greater longevity when presented with options of care. In addition, we expect that having a "no wrong door" access to information will result in less consumer frustration as all involved service agencies will be able to uniformly provide long term care options.

Education and awareness regarding Abuse and Exploitation will be a priority in FY'13. Senior Resources elder abuse prevention provider, The Tri-County Protection Team (TCPT), will deliver multiple marketing efforts to ensure that consumers in the PSA are aware what constitutes elder abuse, that it is a crime and how to report it to the authorities. To this end they will provide a series of six of publishable articles to be distributed throughout the PSA via the Caregiver Link, Senior Perspectives and the focal points newsletters. Public television broadcasts on the subject are planned as well as directing the community and seniors to the www.safeseniors.info website. Social media outlets will also be designed and made available in an attempt to reach a varied population from that which is usually targeted regarding Elder Abuse.

Regional objectives include working with the Sheriff's Offices in Ottawa and Oceana counties to engage them in the Project Lifesaver Program. This program is offered for older adults with dementia, Alzheimer's or traumatic brain injury who are prone to wander and provides their caregivers access to technology that will locate them in the event of wandering. Senior Resources, in conjunction with the Sheriff's Offices will submit a grant proposal to the Project Lifesaver International Program and work to secure monetary resources so that no consumer/caregiver that desires the services and demonstrates a need for it is denied.



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Senior Resources will also work with all hospital systems within the PSA regarding the Care Transitions Program. This program is designed to encourage consumers and their caregivers to take an active role in their care transition/setting with the secondary objective of reducing preventable hospital readmissions. This will be a cooperative effort between consumer, and providers of medical services, social services and support services in the community. During the fiscal year we plan to pilot a care transitions program in several physicians' offices in conjunction with the local hospital system throughout the PSA.

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n/a

Activities:

n/a

Expected Outcome:

n/a



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Program Development Objectives (Regional)

Objective: Decrease the stress of caregivers.

Desired Outcome

Older adults with dementia, Alzheimer's, or traumatic brain injury who are prone to wander and their caregivers will have access to technology that will locate them in the event of wandering.

Activities:

- Educate and engage the Ottawa/Oceana County Sheriff's Offices regarding Project Lifesaver.
- In conjunction with the Ottawa/Oceana County Sheriff's Offices submit a grant proposal to the Project Lifesaver International Program
- Assist with the intake for Project Lifesaver in Ottawa and Oceana County
- Secure monetary resources so that no consumer/caregiver that desires the service and demonstrate a need for it will be denied.

Resources to be mobilized:

Project Lifesaver International, the Ottawa/Oceana County Sheriff's Offices and Senior Resources.

Who will benefit?

Older adults who are prone to wander due to dementia, Alzheimer's or traumatic brain injury and their caregivers.

Programs to be established:

Project Lifesaver International.

Staff positions and time to be allocated to the objective:

Community Services Director in the area of Program Development and the Options Counselors providing in-take services for the consumers who wish to use the program.

What is expected to be learned?

This technology will support expedient, cost efficient and safe returns home for adults and children who are at risk of wandering by using reliable personal tracking equipment with the secondary impact of providing peace of mind to their caregivers.

Changes to the area agency's infrastructure necessary to achieve the objective: None.

Objective

Consumers and their caregivers will take an active role in their care transition/setting with the secondary objective of reducing preventable hospital readmissions.

Desired Outcome

Safe, effective, and efficient care transitions and reduced risk of potentially preventable readmissions requiring cooperation among providers of medical services, social services, and support services in the



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community and in long-term care facilities.

Activities

- Senior Resources will meet with and educate all hospital systems within the PSA regarding Care Transitions.
- Transitions programs will be piloted in physicians' offices throughout the PSA.

Resources to be mobilized:

The aging, disability and hospital/physician network.

Who will benefit:

Seniors experiencing a transitional setting.

Programs to be established

Senior Resources will work with all interested hospital systems to establish Care Transitions Programs.

Staff positions and time to be allocated to the objective

Executive Director and Communications Fund Developer with time related to monthly meetings, planning sessions and application process.

What is expected to be learned?

Older adults that have additional support after a hospital discharge will have greater confidence and a more active role in their care resulting in fewer preventable hospital readmissions.

Changes to the area agency's infrastructure necessary to achieve the objective None.



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Advocacy Strategy

AAA Response:

Advocacy Strategy

The number of Michigan seniors age 60+ is rising by 135 residents per day. By 2030 19.5% of Michigan's population is expected to be 65 or older compared to 12.7% in 2007. Adults 75 and older are expected to make up 9.3% of the population by that time. Our nation, this state and our local communities are ill prepared to deal with this particular surge of the population. It is for those very reasons that advocacy remains one of the most critical activities that an Area Agency on Aging performs. Increasingly we are devoting more and more time advocating on behalf of the frailest and eldest members of our communities. As our population grows older, many living well into their 80s and 90s and even to 100 years old, they struggle to live independently in their homes or with families. West Michigan has one of the highest per capita rates in Michigan of persons with disabilities. Changing public policy and public attitude toward aging and people with disabilities is of prime advocacy concern to the Area Agency on Aging. Due to term limitations, it is important that our state legislators understand the needs of older adults, the effects that a legislative piece can have on an older adult, the programs that are available to them and the cost savings that can be realized by maintaining someone in their residence of choice. In addition, it is important that the legislators and their staff understand that they also have a resource in the aging network when assisting constituents.

All of our advocacy strategies are designed to improve the quality of life for seniors, persons with disabilities, and caregivers whether it is improving safety in the home or community, access to quality care and service, choice in the options that are available to them, or legal rights and expectations.

An advocacy strategy must be flexible so that it can be updated or adapted as issues change over any given year. Advocacy in our region for FY' 2013 will mirror many of the priorities selected by both the National Association on Area Agencies on Aging and the steering committee for Older Michiganian's Day. To be effective we must unite and speak in a consistent manner. Our advocacy priorities for FY'2013 include:

At the National Level:

- Fiscal Year 2013 Appropriations prevent the automatic sequestration of vital human needs programs from undermining the health and wellness of older adults. Increase funding for the Older Americans Act and other supportive services to help older Americans remain living successfully and independently in their homes and communities.
- Reauthorization of the Older Americans Act (OAA) Congress must reauthorize and modernize the
 OAA to meet the needs of today's and tomorrow's seniors. Language needs to be added to the OAA that
 strengthens the Aging Network's role and capacity in the coordination and provision of long-term services
 and supports, expands local evidence-based health promotion and disease prevention activities, improves
 community preparedness for an aging population and sets adequate authorized funding levels. These
 funds help older Americans remain living successfully and independently in their homes and communities.
- Enhancing the Health of Older Adults Recognize the pivotal role that the Aging Network plays in bridging the gap between the health and long-term services and supports systems to help increase patient safety, improve the quality of care and reduce health care costs.



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• Rebalance the Long-term Services and Supports System – Continue to work towards rebalancing our nation's fragmented long-term services and supports system through initiatives such as: Integrated Care, Aging and Disability Resource Centers and Care Transitions and Coordination.

- Senior Mobility Options Reauthorization of senior transportation programs to improve the availability and accessibility of transportation services for older Americans. This includes working with community transportation coalitions to increase public and specialty transportation to evenings and weekends and rural transportation. When conducting focus groups, accessible and available transportation is most often the number one issue identified by older adults in our region.
- Preserve the Medicare and Medicaid Safety Net The fundamental protections of Medicare must be preserved. We will urge Congress to oppose Medicare voucher or premium support proposals that would simply shift costs on to beneficiaries. We will also urge Congress to protect Medicaid from devastating block grant proposals that will put our nation's most vulnerable adults in harm's way and shift costs to consumers and states, reducing access to care. Strategic improvements are needed to the Medicare and Medicaid to address crucial access, cost and quality of care issues as well as encouraging steps to eliminate fraud, abuse, legal loopholes and waste.
- Social Security Continue to advocate for long-term solutions to preserve the viability of Social Security for future generations.

At the State and Local Level:

- Integrated Care Assuring a role for the Aging Network in integrated care for the dual eligible population. Currently there are 10,000 people on Medicare/Medicaid served in the state by the 1915(c) MI Choice Medicaid Waiver and our concerns lie with their treatment in an Integrated Care system. Area Agencies on Aging now serve these clients as waiver agents and provide the conflict-free care management service that assists them, using nurses and licensed social workers. Area Agencies on Aging also create, manage, oversee and reimburse an extensive array of 1200 service providers, our network, that provide the nearly 20 waiver services all across the state. In standing with person-centered planning and self-directed care, MI Choice clients should have the choice of keeping the care managers and service providers that they know and trust as they transition to integrated care.
- Access to Long Term Care Options Access to a full range of high quality long term care options that
 meets the needs of Michigan's growing older adult and adults with disabilities population is critical. We
 must work to prevent, delay, or divert dependence on costly Medicaid and institutional care by funding
 Older Michiganians Act programs: home-delivered meals, in-home care, care management, caregiver
 respite, and senior volunteers—state funding has decreased 25% over the past four years while Michigan's
 senior population has grown more than 7%.

More vulnerable older adults can stay in their own homes by expanding funding for the MI Choice home-based Medicaid nursing home alternative. Additional state funds for access and home and community based services are needed to meet the growing population and demand for services.. Home and community based programs are a proven cost effective alternative to nursing homes and are most often the location of choice for the person in need of assistance. Access to a full range of high quality long term care options meets the needs of Michigan's growing older adult and adults with disabilities population.

• Partnerships with Multi-Purpose Collaborative Bodies- We must continue our partnerships with the multi-collaborative bodies within our region to educate legislators and local media of the impact of state



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and federal cuts on people's lives by trying to put a human face on these decisions.

- Livable and Sustainable Communities for All Ages The Aging Network creates a stronger Michigan economy. Seniors are a \$32 billion economic force in Michigan. Their income and assets are critical for the state's economy. Michigan communities must be livable for seniors and adults with disabilities. Area Agencies on Aging identify gaps and steer economic development to stabilize the social fabric of families and create jobs. We will encourage Legislators and the Governor to pass legislation that promotes: Affordable and accessible housing options, reliable transportation options, and access to affordable health insurance, which promotes better health and contributes to the growth of Michigan's important healthcare industry
- Protection from Abuse and Financial Exploitation for Vulnerable Adults Protection from abuse and financial exploitation is paramount.

The Department of Human Services estimates that over 73,000 older adults are abused annually. Michigan's Adult Protective Services' investigations of complaints by older adults have increased 31% since 2009. We continue to advocate with Legislators and the Governor to enact legislation that protects vulnerable adults, encourages reporting of abuse and stiffens penalties for abusers.

Senior Resources will select additional issues as they are brought to the attention of the agency by seniors and other community partners within the region. Those issues that have a financial impact on older adults and persons with disabilities and have a critical impact on their independence will be given priority for advocacy. Issues will be selected for advocacy depending on their pertinence to the target population in general and how they specifically influence this population's ability to remain independent with their own resources.

This advocacy strategy will involve the advocate's group, Senior Advocates Coalition, which includes representatives from all three counties who meet with Federal and State legislators or their aide representatives each meeting and dialogue the above issues. Also key to our advocacy is the Michigan Senior Advocates Council, facilitated by the Area Agencies of Aging Association of Michigan. We have two representatives who participate on that and bring key information back to local groups. The Program and Planning Advisory Board and Board of Directors will continue to be made aware of the issues and will communicate with legislators and local commissions concerning the needs of the elderly and people with disabilities in their communities. In keeping up with technology, Senior Resources will be updating our website including the area that is dedicated to advocacy. There will be information on current advocacy issues, educational pieces on how to advocate, legislators contact information and the ability to send an email right from our site. In addition, we utilize our Sixty Seconds publication and our provider network to contact legislators on key issues.



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Community Focal Points

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 focal point is a facility or entity designated to encourage the maximum collocation and coordination of service for older individuals in a given area or community. For Senior Resources a community is defined as a county. In the case of Ottawa County it is the northern half and the southern half which are existing natural divisions for that county. In our region the focal points are Evergreen Commons, North Ottawa County Council on Aging and Oceana County Council on Aging and Senior Resources. All of our focal points are also senior centers or reside in the same building as senior centers. To be a focal point in the Senior Resources region an agency must be a funded provider of the case coordination & support program and also be a part of an agency that serves seniors in the entire county or a large geographic area of a county. Organizations interested in becoming a Case Coordination & Support (focal point) site must apply and be approved for funding through our regular Request for Proposal process, which occurs every three years in conjunction with the three-year area plan.

In addition to Case Coordination & Support, all focal points are access points for information & assistance and volunteer opportunities and are seen as the place to seek information about senior issues in their community. Through Case Coordination & Support the client will be assessed and in-home services can be arranged including home delivered meals, personal care, in-home respite, homemaking, and adult day care. If necessary, transportation services can be arranged, Medicare, Medicaid and other insurance counseling can be provided, and assistance is available at each with the Medicare Prescription Drug Program. If client problems indicate, referrals are made to Care Management/Waiver as appropriate and available.

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: Oceana County Council on Aging Address: 621 E. Main, Hart, MI 49420

Website: www.oceanacountycouncilonaging.com

Telephone: 231-873-4461

Contact Person: Kathleen Premer, Executive Director Vickie Collins, Associate Director

Persons: 6.330

Service Area: Oceana County

Services: Case Coordination, Meals, Homemaking, Information, Transportation, Activities

Name: Senior Resources

Address: 560 Seminole Rd. Muskegon, MI 49444

Website: srwmi.org Telephone: 231-733-3585

Contact Person: Long Term Care Options Counselors

Persons: 32,985

Service Area: Muskegon, Oceana, Ottawa Counties

Services: Case Coordination, Care Management, Medicaid Waiver, MMAP



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Name:

Evergreen Commons

Address:

480 State Street, Holland, MI 49423

Website:

www.evergreencommons.org

Telephone:

616-396-7100

Contact Person:

Jo VerBeek, Director of Senior Care Services, Suzanne Visser, Case Coord

Persons:

43,894 County wide

Service Area:

Southern Ottawa County (County Line North to Filmore Rd.)

Services:

Case Coordination, Meals, Homemaking, Information, Adult Day Care & Day Respite

Activities, Health Programs, Support Groups

Name:

North Ottawa County Council on Aging

Address: Website: 422 Fulton, Grand Haven, MI 49417 www.noccoa.org

Telephone:

616-842-9210

Contact Person:

Brigit Lewis, Executive Director, Kim Kroll, Nancy Waters, Kate Laughlin Case Coord.

Persons:

43.894 County wide

Service Area:

Northern Ottawa County (County Line South to Filmore Road)

Services:

Case Coordination, Meals, Homemaking, Information, Transportation, Activities,

Support Group



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Community Living Program

As Area Agencies on Aging contend with uncertain funding, budget cuts, waiting lists for services, tighter local funding, and a burgeoning aging population, Senior Resources and our board of directors view Options Counseling as the service we are able to provide to consumers that can provide an immediate impact. To that end in the past year we have hired 3 Long Term Care Options Counselors and have incorporated portions of the community living assessment into our initial intake process. Due to waiting lists for services all consumers identified at the time of the initial contact as a candidate for the community living program or at risk for nursing home placement are referred to the community living consultant immediately. The Community Living Consultant will provide options counseling to the client and their family, if applicable, in the form of identifying natural supports, personal resources, and other community/external resources available for long-term care. This assistance will take in consideration the consumer/caregiver preferences and will be defined by the consumer for themselves during the person centered planning process.

Senior Resources is committed to ensuring that all persons within the PSA have access to options counseling and have trained all Supports Coordinators and Options Counselors/Intake specialist in Options Counseling. We believe that many consumers and their families will be better able to utilize personal resources with higher success and greater longevity when presented with all options of care.

In addition, one focal point, North Ottawa County Council on Aging has hired an Options Counselor and plans to availed themselves of Options Counseling training through Senior Resources.

Senior Resources believes that client choice is vital to client/caregiver well-being and we entirely support the principles of self-determination. While Senior Resources has employed person centered thinking principles throughout our history, taking into consideration client wishes and needs, we have formalized our policy on person center thinking, incorporating it into all levels of client interaction. We currently have two Master Level Person Centered Thinking (PCT) Trainers on staff and in November 2011 these trainers have taken the PCT refresher training offered by OSA. Through the PCT On-line Training Module offered by OSA all relevant staff of Senior Resources and our focal points have been trained in this critical way of being. We are committed to training staff to be able to assess the balance between what is important to a person with what is important for them (health and safety), and using all available resources to help the client facilitate their own care. We have incorporated PCT into our interviewing process and as the opportunity arises to hire new staff, management will be looking for people who embody the philosophy of Person-Centered Thinking and upon hire; all new staff will be trained/orientated on the Person Centered approach.

Since 2004 Senior Resources has offered consumers the option of a customized private pay program in an effort to address the full spectrum of care. Clients that have available resources to purchase care can do so through this program. Upon request, an assessment of need or a consultation can be performed to assist clients and family members in determining what support services they would like or the client and/or family members advise us as to what services they would like to receive. For convenience, Senior Resources will order services through client choice providers and bundle service costs for one monthly bill. It is our intention to participate in the Veterans Directed Home and Community Based Services Program and to that end we completed and submitted the readiness review for the Veterans Directed Home and Community Based Services. We are poised to begin serving Veterans as soon as we receive the



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authorization to do so.

Senior Resources is part of the convening group for the emerging Aging and Disability Resource Collaboration in our PSA. This collaboration is in the process of defining which agencies will provide options counseling and how the referral process will flow from agency to agency. When benchmark criteria used to identify a fully functioning ADRC as defined by the Administration on Aging has been decided, the Collaboration will submit an application to the state office to become a functioning ADRC.



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ADRC/MMAP

ADRC

Indicate if the AAA will participate in the development of ADRC partnership(s)in the PSA. If yes, please describe the anticipated role the AAA will play in the partnership(s).

AAA Response:

In Michigan, emerging Aging and Disability Resource Collaboration (ADRCs), a partnership of existing community health and care providers, serve as a starting point for consumers and their families into the long-term care service system. ADRC's increase access to information and referral sources, provide advice, assistance, and streamlined coordination of service access using person-centered transitions and quality assurance principles.

Senior Resources is partnering with all interested and pertinent community partners to establish seamless, "no wrong door" access to community services. Currently, these partners include 2-1-1, the area Centers for Independent Living, our community focal points, local hospitals, the ombudsman program, the other area MIChoice Waiver agent, DHS office and some CMH officials.

In the past year we have encouraged community agencies to self-identify their level of involvement in the ADRC process, choosing to become part of a conveners group that will steer all aspects of the desired end product, a collaborative position, in which the agency will commit to accomplishing the goals of local ADRC development or the advisory council, which will be responsible for advising the conveners and the collaborative team on the design and structure of the ADRCs.

During the first ADRC regional meeting the attendees indicated that they would like Senior Resources to serve as convener for the ADRC. Senior Resources, Disability Network Lakeshore and Disability Connection West Michigan meet monthly to move forward with the direction set forth by the participating agencies.

In the fall of 2011 Senior Resources received confirmation that service agencies in the PSA are interested in the benefits of an ADRC when a GAPS analysis identified one of the top five perceived needs in our community as a need to minimize consumer and provider confusion by providing streamline access to long-term services and supports coordination for consumers. A publication available to all ADRC partners outlining the long term care options in our community has been developed and supplies identical information to all members of the ADRC to share with consumers. It will be an ongoing effort by this collaboration to ensure that current, accurate referral information is available to all providers that deliver long term care supports for consumers in the PSA.

Goals for the ADRC this year include regular meetings to determine the direction of the collaboration, determining what agencies will be taking geo-routed calls and providing Options Counseling. Upon completing the requirements for a Fully Functioning ADRC Documentation Benchmarks the ADRC convener group will submit a proposal application for a formalized ADRC to the state office.

MMAP

If your Agency is a MMAP agency, provide an overview of your program, including numbers of persons served, volunteer recruitment and innovative ways of getting the information to residents.

AAA Response:



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Senior Resources is a MMAP providing agency and is very devoted in serving seniors in this capacity. There are four MMAP sites located throughout our three county area. The regional coordinator as well as a site coordinator is housed in Muskegon County at our Tanglewood Park location. Ottawa County has two MMAP sites, one serves southern Ottawa County, Evergreen Commons, and the other serves northern Ottawa County and is located at North Ottawa County Council on Aging. Oceana County Council on Aging is the MMAP site for Oceana County and provides services for that County. Each site has a coordinator that is employed by the agency that houses the program. The site coordinator provides volunteer oversight, assures that the required reporting is submitted to the regional/state office and conducts community outreach programs as opportunities arise and as groups request it.

We currently have 34 active counselors covering our 3 county region. Without these dedicated volunteers the MMAP program would not be able to meet the needs of so many of our community members. Since April 1, 2011 our region has counseled over 4,100 people in one-on-one counseling and during the same time frame another 6000+ have been educated through our out-reach endeavors. In an ongoing effort to increase our volunteer base we run ads in local newspapers, as well as notifications to volunteer agencies throughout the 3 county area, prior to holding a new counselor training. We hope to add at least 3 new volunteers this year.

It is a goal during FY'13 to add a MMAP satellite site at the Georgetown Senior Center. Georgetown Senior Center is officially serviced by the Evergreen Commons MMAP site, however with the growing population of seniors in Ottawa County, Senior Resources felt it would add a level of accessibility for seniors in that area to have a satellite site in their community.

Our region has also been part of several health and wellness fairs, and many smaller presentations in the community. We continue to market through such mediums as posters with MMAP contact information, Television shows, new to Medicare presentations and small group meetings. MMAP is currently in the process of designing a billboard that will be placed on US 31 in Oceana county. Our goal will be to bring recognition to consumers that they can contact us about Medicare as well as other types of fraud. MMAP will be holding presentations in each of our 3 counties to educate and empower seniors about fraud and how to avoid being a victim.

MMAP is excited to be a part of the newly developing ADRC plan. We are confident that we can bring some relevant information to the table.

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ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Other Grants

1. Describe other grants and/or initiatives the area agency is participating in with OSA and other partners.

AAA Response:

Senior Resources of West Michigan is expecting to continue our participation with the Creating Confident Caregiver (CCC) grant in fiscal year 2013. During the course of the year we plan to provide training for 55 caregivers for persons that have Alzheimer's or dementia disease. We have 5 leaders trained in the evidence based CCC model in our region.

In FY 2012 Senior Resources secured the in-kind match for the CCC grant through solicitation of money from community service agencies that provided funding for a the training sessions. We received an overwhelming response and obtained enough in-kind match cash to cover the required match. We will be doing the same thing for FY '13 to cover the 45% match. We will be using that cash as well as the federal grant to purchase training sessions from our grant providers. Amy Florea will be the contact person for Senior Resources.

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

AAA Response:

Programs such as the Creating Confident Caregiver have been proven to assist caregivers in achieving a sense of control and help the caregiver find ways to reduce the effects of caregiving stress and to increase feelings of satisfaction and accomplishment.

3. Describe how these grants and other initiatives reinforce the area agency's planned program development efforts for FY 2013.

AAA Response:

This grant initiative is in keeping with ongoing program development efforts to provide caregivers with access to a variety of types of support programs to decrease the caregivers stress burden and help them secure the tools to continue their caregiving efforts.

4. Describe the area agency's Creating Confident Caregivers initiative for FY 2013.

AAA Response:

See above.



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Appendices

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ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources

FY: 2013

APPENDIX A Board of Directors Membership

	Asian/Pacific Islander	African American	Native American/ Alaskan	Hispanic Origin	Persons with Disabilities	Female	Total Membership
Membership Demographics	0	2	0	1	0	13	18
Aged 60 and Over	0	1	0	0	0	9	11

Name of Board Member	Geographic Area	Affiliation	Elected Official	Appointed	Community Representative
Linda Bailey	Muskegon	Mercy Health Partners			Yes
Tim Erickson	Muskegon				Yes
Kinda Kaare	Muskegon	Parmenter O'Toole			Yes
Kathy Moore	Muskegon	Muskegon Community Health Dept.		Yes	
Dr. Doris Rucks	Muskegon	Retired Physician			Yes
Zachary Russick, Chairperson	Muskegon	Intelligent Machine Soulutions, Inc.			Yes
Sherry White	Muskegon	Hines Corporation			Yes
Jose Barco	Oceana	Department of Human Services		Yes	
Anne Henion	Oceana	AgeWell Services			Yes
Anne Soles	Oceana	Shepherd's Staff			Yes
Theresa Steen	Oceana	Retired Pharmacist			Yes
Beth Baldwin	Ottawa	Retired Health Department R.N			Yes
Barb Bingham	Ottawa	Retired Texas AAA Program Planner			Yes
Barb Boelens	Ottawa	Stoneridge Senior Apartments			Yes



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Nancy Carlyle	Ottawa	Community Representative	Yes
Scott Kling	Ottawa	SE Kling Consulting	Yes
Cheryl Szczytko	Ottawa	The Laurels of Hudsonville	Yes
Bill VanDyke, Vice Chair	Ottawa	Retired Social Secuirty	Yes



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources

FY: 2013

APPENDIX B Advisory Board Membership

	Asian/ Pacific Islander	African American	Native American/ Alaskan	Hispanic Origin	Persons with Disabilities	Female	Total Membership
Membership Demographics	0	1	0	0	0	9	11
Aged 60 and Over	0	1	0	0	0	8	10

Name of Board Member	Geographic Area	Affiliation
Ann Adams	Oceana	Retired DHS employee
Anne Henion	Oceana	AgeWell Services
Anne Soles	Oceana	Shepherds Staff
Barbara Bingham	Ottawa	Retired Texas AAA Program Planner
Beth Baldwin	Ottawa	Retired Health Dept. R.N
Bill VanDyke	Ottawa	Retired Social Security Administration
Barb Boelens	Ottawa	Stonebridge Senior Apartments
Caroline Mitchell	Muskegon	Retired School Administrator
Cheryl Szczytko	Ottawa	The Laurals of Hudsonville
Janet Magennis	Ottawa	Stated Clerk Presbytery of Lake Michigan
Peter Theune	Ottawa	Retired Clergy



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources

FY: 2013

APPENDIX C Current Provider Demographics

	Asian/ Pacific Island	African American	Arab/ Chaldean	Native American/ Alaskan	Hispanic Origin	Persons with Disabilitie	Female	TOTAL (all contractors) (all employees)
Number of Contractors by Demographics	0	1	0	0	0	0	12	41
Number of Contractor Employees by Demographics	10	171	0	7	73	6	1,053	1,265

The above table should reflect contractors/staff that are funded by the AAA only. Number of employees of contractors should reflect a specific point in time. For example, report the numbers as of April 1, 2011. The data collection date should be the same for all contractors.

The information gathered from this report will be used in the cultural competency work that is being conducted by OSA. Please contact your field representative for more information.

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ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources

FY: 2013

APPENDIX G

Agreement for Receipt of Supplemental Cash-In-Lieu of Commodity Payments for the Nutrition Program for the Elderly

The above identified agency, (hereinafter referred to as the GRANTEE), under contract with the Michigan Office of Services to the Aging (OSA), affirms that its contractor(s) have secured local funding for additional meals for senior citizens which is not included in the current fiscal year (see above) application and contract as approved by the GRANTEE.

Estimated number of meals these funds will be used to produce is:

30,000

These meals are administered by the contractor(s) as part of the Nutrition Program for the Elderly, and the meals served are in compliance with all State and Federal requirements applicable to Title III, Part C of the Older Americans Act of 1965, as amended.

Therefore, the GRANTEE agrees to report monthly on a separate OSA Financial Status Report the number of meals served utilizing the local funds, and in consideration of these meals will receive separate reimbursement at the authorized per meal level cash-in-lieu of United States Department of Agriculture commodities, to the extent that these funds are available to OSA.

The GRANTEE also affirms that the cash-in-lieu reimbursement will be used exclusively to purchase domestic agricultural products, and will provide separate accounting for receipt of these funds.

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ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Assurance & Certificates

ASSURANCE OF COMPLIANCE

Assurance of Compliance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, and the Age Discrimination Act of 1975.

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

- 1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
- 2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
- 3. Title IX of the Educational Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
- 4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

ASSURANCES AND CERTIFICATIONS

The undersigned agency, designated by the Michigan Commission on Services to the Aging to act as the Area Agency on Aging within a given planning and service area, agrees to the following:

- 1. That the Annual Implementation Plan shall cover the current Fiscal Year 2011.
- 2. To administer its Annual Implementation Plan in accordance with the Older Americans Act, the Older Michiganians Act, federal and state rules, and policies of the Michigan Commission on Services to the Aging as set forth in publications and policy directives issued by the Michigan Office of Services to the Aging.
- 3. To make revisions necessitated by changes in any of the documents listed in point two in accordance with directives from the Michigan Office of Services to the Aging.
- 4. That any proposed revisions to the Annual Implementation Plan initiated by the Area Agency on Aging will be made in accordance with procedures established by the Michigan Office of Services to the Aging.
- 5. That funds received from the Michigan Office of Services to the Aging will only be used to administer and fund programs outlined in the Annual Implementation Plan approved by the Michigan Commission on Services to the Aging.
- 6. That the Area Agency on Aging will undertake the duties and perform the project responsibilities described in the Annual Implementation Plan in a manner that provides service to older persons in a consistent manner over the entire length of the Annual Implementation Plan and to all parts of the planning and service area.
- 7. That program development funds will be used to expand and enhance services in accordance with the initiatives and activities set forth in the approved Area Implementation Plan.
- 8. That all services provided under the Annual Implementation Plan are in agreement with approved service definitions and are in compliance with applicable minimum standards for program operations as approved by the Michigan Commission on Services to the Aging and issued by the Michigan Office of Services to the Aging, including Care Management.
- 9. That the Area Agency on Aging will comply with all conditions and terms contained in the Statement of Grant Award issued by the Michigan Office of Services to the Aging.
- 10. That the Area Agency on Aging may appeal actions taken by the Commission on Services to the Aging with regard to the Annual Implementation Plan, or related matters, in accordance with procedures issued by



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

the Michigan Office of Services to the Aging in compliance with the requirements of the Older Michiganians Act and Administrative Rules.

- 11. That the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and with agencies that develop or provide services for individuals with disabilities.
- 12. That the Area Agency on Aging has in place a grievance procedure for eligible individuals who are dissatisfied with or denied services.
- 13. That the Area Agency on Aging will send copies of the Annual Implementation Plan to all local units of government seeking approval as instructed in the Annual Plan Instructions.
- 14. That the Area Agency on Aging Governing Board and Advisory Council have reviewed and endorsed the Annual Implementation Plan.
- 15. That the Area Agency on Aging will comply with Federal Regulation 2 CFR part 180 and certifies to the best of its knowledge and belief that its employees and subcontractors are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department. Further, that to the best of its knowledge and belief its employees and subcontractors are not presently on the Department of Community Health (DCH) or State Bureau of Health Professionals excluded parties lists.
- 16. That the Area Agency on Aging will comply with all conditions and terms of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, and the Age Discrimination Act of 1975. The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.
- 17. That the Area Agency on Aging will comply with all conditions and terms of The Elliot Larsen Civil Rights Act, PA 453 of 1976 and the Persons With Disabilities Civil Rights Act, PA 220 of 1976. The Applicant provides this assurance in consideration of and for the purpose of obtaining State of Michigan Federal grants, loans, contracts, property, discounts or other State and Federal financial assistance from the Michigan Office of Services to the Aging.

The signatory on the Signature Page indicates that the Area Agency on Aging is submitting the current Fiscal Year Annual or Multi-Year Implementation Plan that describes the initiatives and activities which will be undertaken on behalf of older persons within the planning and service area. We assure that these



ANNUAL & MULTI YEAR IMPLEMENTATION PLANS (AMPs)

Senior Resources FY: 2013

documents and subsequent Annual Implementation Plans represent a formal commitment to carry out administrative and programmatic responsibilities and to utilize federal and state funds as described.

ASSURANCE OF COMPLIANCE WITH THE ELLIOT LARSEN CIVIL RIGHTS ACT

Assurance of compliance with the Elliot Larsen Civil Rights Act, PA 453 of 1976 and the Persons With Disabilities Civil Rights Act, PA 220 of 1976.

The Applicant provides this assurance in consideration of and for the purpose of obtaining State of Michigan Federal grants, loans, contracts, property, discounts or other State and Federal financial assistance from the Michigan Office of Services to the Aging.

The Applicant hereby agrees that it will comply with:

Non-Discrimination: In the performance of any grant, contract, or purchase order resulting here from, the Contractor agrees not to discriminate against any employee or applicant for employment or service delivery and access, with respect to their hire, tenure, terms, conditions or privileges of employment, programs and services provided or any matter directly or indirectly related to employment, because of race, color, religion, national origin, ancestry, age, sex, height, weight, marital status, physical or mental disability unrelated to the individual's ability to perform the duties of the particular job or position. The Contractor further agrees that every subcontract entered into for the performance of any grant, contract, or purchase order resulting here from will contain a provision requiring non-discrimination in employment, service delivery and access, as herein specified binding upon each subcontractor. This covenant is required pursuant to the Elliot Larsen Civil Rights Act, 1976 PA 453, as amended, MCL 37.2201 et seq, and the Persons with Disabilities Civil Rights Act, 1976 PA 220, as amended MCL 37.1101 et seq, and any breach thereof may be regarded as a material breach of the grant, contract, or purchase order.

286,808 23,841 Rev. 2/2012 Page 1of 3 Amount In-Kind Match Detai 28,533 104,756 286,808 AIP-2013 153,519 09/30/13 Rev. No.: FTES \$ Source ADMINISTRATION 178.873 10/01/12 137,559 23,841 Amount Expenditures FY 2013 AREA PLAN GRANT BUDGET-D R A F I 04/23/12 ota Cash Match Detail Office Operations . Salaries/Wages 2. Fringe Benefits Budget Period: ederal Administration **MATF Administration** State Administration Total: Date: 311,743 26,603 89,445 190,551 6,190 135,261 450,601 161,643 TOTAL Agency: Senior Resources of West Michigan 8,605 227,794 311,743 55,150 92,800 450,601 SERVICES NUTRITION SERVICES SUMMARY 27,146 89,445 105,845 215,913 161,643 8,003 6,190 80,111 97,751 14 26,603 SUPPORTIVE SERVICES PSA: 2. Fed. Title III-C1 (Congregate) 5. State Home Delivered Meals 8. Fed. Title III-D (Prev. Health) 9. Federal Title III-E (NFCSP) State Congregate Nutrition . Federal Title III-B Services 4. Federal Title III-C2 (HDM) State Care Management 6. State N.H. Ombudsman FUND SOURCE 13. State Alternative Care 10. Federal Title VII-EAP 10. Federal Title VII-A State In-Home 11. State Access . Local Match b. In-Kind a. Cash

Total: Volunteers 103,435 4,000 99,435 County of Oceana Total: WP Partners 58,526 140,153 167,722 167,722 321,250 58,526 140,153 1,462,855 52,127 TOTAL: 18. State Respite Care (Escheat)

19. Merit Award Trust Fund

Program Income

20. NSIP

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.

- Acm

Executive Director Title

04/10/12 Date

					FY 2013 AR	EA AGENCY	FY 2013 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL	S - SUPPORT	SERVICES D	ETAIL						
Agency:	Agency: Senior Resources of West Michigan	rces of West	Michigan						Budget Period:		10/01/12			09/30/13	ur.	Rev. 2/2012
PSA:	14									Date: (4/23/12	Solve	Rev. No.:	AIP-2013	Ω.	page 2 of 3
					State	State	St. Alt.	State Care	State	St Resnite	Marit Award	Madicaid	Drogram	Hac'	lo Kind	
SERVICE CATEGORY	Title III-B	Title III-D	Title III - E	Title VII	Access	In-Home	Care	Mgmt		(Escheat)	Trust Fund	CMP Fund	Income	Match	Match	TOTAL
1. Access						Yellow Yellow										
a. Care Management	3		2.		i¥			215,913				8,500		20,000	4,000	248.413
b. Case Coord/supp	119,122				27,146			100						25,000	18,330	189.598
c. Disaster Advocacy	•												Ī.			
d. Information & Assis	59,767		2,600		•									7,500	T.	69,867
e. Outreach			10		*										3,500	3,500
f. Transportation	45,293		1,200							SC MCSMILL			5,300	4,523	1.500	57.816
2. In-Home				KILK							And the world for the			11 (Sec. 1928)		
a. Chore							No contraction in								1	
b. Home Care Assis					Special Control											
c. Home Injury Cntrl				8								Contract of the last			Ī	
d. Homemaking	30,423				A SAME	47.445	105 845					The same of	0000			, 040
e. Home Health Aide											100000	STATE OF THE PERSON NAMED IN	O'ZOO		21,100	213,013
f. Medication Mat	10 189			No.			100				N. HTS.					
d Personal Care	1 080					00000						STORES OF THE PARTY OF THE PART	700		1,900	12,789
h Accietive Dovices Took	006,1	1000				42,000			1000				1,400		6,200	51,560
Assistive Devices ecil	1.73						0.0						200		189	2,660
I. Respite Care	-		61,757			-				58,526	72,235		8,500	,	22,250	223,268
j. Friendly Reassure	,													!		
3. Legal Assistance	24,140		•		10000000000000000000000000000000000000						STERNING			2,710	Ť.	26.850
4. Community Services				1000									STATE STATE OF	TO SECURITY OF THE PERSON NAMED IN		20000
a. Adult Day Care			51,700			0 1 10 10	int.		N. Salarania		67.918	100000000000000000000000000000000000000	8 000		13 400	141.018
b. Dementia ADC	,		1					S. 18E C. 10.	1000			A. (1) 10 10 10 10 10 10 10 10 10 10 10 10 10			2015	200,111
c. Disease Prevent	,	26,603					National Control			11/2/00/05/0	0.0000000000000000000000000000000000000				000 0	. 00
d. Health Screening					(1870 P.)			The Street of the	100%	of the state of the	CONTRACTOR OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE	New Colonial Street			3,200	508,802
e. Assist to Deaf									C PARTIES							
f. Home Repair		3. 3. 7. 7.	2000								CONTRACTOR OF THE PERSON OF TH	O TOTAL STATE				-
g. LTC Ombudsman	4,445			8,003					22 000			TE 01		,		, ,
h. Sr Ctr Operations											THE STREET	licin.		1,331	RØC	4/8/14
i. Sr Ctr Staffing				1000000											Ī	•
j. Vision Services						10 S S S S S S										
k. Elder Abuse Prevnt				6,190	175 0000			10 miles							1 005	7 28¢
I. Counseling									200000000000000000000000000000000000000					T	200	2021.
m. Spec Respite Care						10.00	100 100 100							†		
n. Caregiver Supplmt					100 miles									1		
o. Kinship Support			12,000	- SEC. 1884		100 S 200		1000			1000000			4 799		12 700
q. Caregiver E,S,T			32,386	THE REAL PROPERTY.					William Title					200.0		00/100
5. Program Develop	74,278	1200 3000	Secretary 4	SIMPLEME		N. Carlotte	No. of Contrast of						750	207,0		40,081
6. Region Specific							S. Carlot	Paralle San		E-MAN-S			RC/	a'no#1		83,062
a,		•				A STREET LAND CO.				T						
CLP/ADRC Services		10 mg/8 mg	2	STERLINE.		CALLE PARTY	CONTRACTOR	100		School S.	SIMM OF STREET	3,750	•	•	1	•
MATF administration			STATE OF THE PARTY.					TO PROPERTY OF			The state of the s		,	MINISTER STATE		
SUPPRT SERV TOTAL	371.390	26 803	161 643	14 103	27.14E	00 445	405 045	040		COL CL						
	300,110	40,000	101,040	14,130	71,140	88,445	105,845	215,913	22,009	58,526	140,153	19,077	33,050	80,111	197,751	1,462,855

	FY ;	FY 2013 AREA P	LAN GRANT	BUDGET- N	AREA PLAN GRANT BUDGET- NUTRITION SERVICES DETAIL	RVICES DET	.AIL		
									Rev. 2/2012
Agency:	Agency: Senior Resources	irces of West	of West Budget Period:	41183	to	09/30/13			C
PSA:	14		Date:	04/23/12	Rev. Number	AIP-2013			page 3 of 3
SERVICE CATEGORY	Title III C-1	Title III C-2	State	State HDM	NSIP	Program	Cash	In-Kind	TOTAL
		7	Congregate			Income	Match	Match	
Nutrition Services									
1. Congregate Meals	450,601		8,605		77,116	168,500	22,400	42,400	769,622
2. Home Delivered Meals		227,794		311,743	909'06	152,750	32,750	50,400	866,043
3. Nutrition Counseling	ŧ	1		ı		1	1	ı	1
4. Nutrition Education	ţ	-	l	-		,	1	1	,
5. AAA RD/Nutritionist*									,
Nutrition Services Total	450,601	227,794	8,605	311,743	167,722	321,250	55,150	92,800	1,635,665

^{*}Registered Dietitian, Nutritionist or individual with comparable certification, as approved by OSA.

	FY 2013	13 AREA PLA	AREA PLAN GRANT BUDGET-TITLE VII LTC OMBUDSMAN DETAII	JDGET-TITLE	E VII LTC OM	BUDSMAN D	ETAIL		
SERVICE CATEGORY	Title III-B	Title VII-A	Title VII-EAP	State NHO	CMP Fund	Program	Cash	In-Kind	TOTAL
						Income	Match	Match	
LTC Ombudsman Services		, c.							
1. LTC Ombudsman	4,445	8,003		22,009	10,577	•	2,351	589	47,974
2. Elder Abuse Prevention			6,190		SEA SEES S	ı	,	1,095	7,285
3. Region Specific									-
LTC Ombudsman Ser. Total	4,445	8,003	6,190	22,009	10,577	,	2,351	1,684	55,259

		FY 2013 ARE/	A PLAN GRAN	IT BUDGET.	013 AREA PLAN GRANT BUDGET- RESPITE SERVICE DETAIL	RVICE DETA	=		
SERVICES PROVIDED AS A	Title III-B	Title III-E	Title III-E State Alt Care	State	State In-Home Merit Award	Merit Award	Program	Cash/In-Kind	TOTAL
FORM OF RESPITE CARE				Escheats		Trust Fund	Income	Match	
1. Chore									•
2. Homemaking									•
3. Home Care Assistance									1
4. Home Health Aide									•
5. Meal Preparation/HDM									•
6. Personal Care									-
Respite Service Total	1	ı	-	-	1	-	ı	-	_

FY 2013 Planned S	eı	rvices Su	mmary Pag	ge for P	SA:		
	-	Budgeted	Percent of		d of Pro	visio	on
Service		Funds	the Total	Purchased	Contract	ı Dir	ect
ACCESS SERVICES						1	
Care Management	\$	248,413	8%	<u> </u>		!X	
Case Coordination & Support			6%		X	iX	·····
Disaster Advocacy & Outreach Program	\$	_	0%			T	
Information & Assistance	\$	69,867	2%		X	ıX	
Outreach			0%			<u> </u>	
Transportation			2%		X	<u> </u>	
IN HOME CERVICES				i		<u> </u>	
IN-HOME SERVICES Chore	\$		00/			· 	
		_	0%	!		1	
Home Care Assistance	\$	-	0%	ļi		<u>i </u>	
Home Injury Control			0%	1	***************************************	<u> </u>	······································
Homemaking	\$	213,013	7%			<u>i </u>	
Home Delivered Meals	\$	866,043	28%	i,	X	1	
Home Health Aide	\$		0%	<u> </u>		<u>i </u>	
Medication Management	\$	12,789	0%			! 	
Personal Care	\$	51,560	2%			1	
Personal Emergency Response System	\$	2,660	0%			! 	
Respite Care	\$	223,268	7%	X ı		1	
Friendly Reassurance	\$	-	0%	<u> </u>		! !	
COMMUNITY SERVICES				. Ze 1.32 F.	oli va s	I Isanas	
Adult Day Services	\$	141,018	5%	X		<u> </u>	
Dementia Adult Day Care	\$		0%			 	**********
Congregate Meals	\$	769,622	25%	1)	X	! !	
Nutrition Counseling	\$	700,022	0%		``	 	
Nutrition Education	\$		0%	i		<u> </u>	
Disease Prevention/Health Promotion	\$	29,803	1%	X			
Health Screening	\$	20,000	0%	^ 	·····		
Assistance to the Hearing Impaired & Deaf	\$		0%			L	
Home Repair	\$		0%				
Legal Assistance	\$	26,850	1%	1)	7	l	
Long Term Care Ombudsman/Advocacy	\$	47,974	2%				
Senior Center Operations	\$	47,374	0%		`		
Senior Center Staffing	\$		0%				
Vision Services	\$		0%	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Programs for Prevention of Elder Abuse,	Ψ \$	7,285	0%	1)			
Counseling Services	\$	7,200	0%	'	<u> </u>		
Specialized Respite Care	\$		0%	<u>_</u>			
Caregiver Supplemental Services	\$		0%				
Kinship Support Services	\$	13,788	0%	<u> </u>	<u> </u>		
Caregiver Education, Support, & Training	\$	40,591	1%	× ;	`	X	
AAA RD/Nutritionist	\$	40,091	0%	<u>^ /</u>	1		
PROGRAM DEVELOPMENT	Ψ	83,062	3%	S 250 350 4	· · · · · · · · · · · · · · · · · · ·		
REGION-SPECIFIC	\$		0%				
CLP/ADRC Services	\$	-	0%			X	
MATF administration	\$		0%	i	·		
TOTAL PERCENT			100%	0%1	0%1		0%
	\$	3,098,520	100 /6	\$0;	\$0,		\$0
101AL10HDHO	Ψ	3,000,020		ΨΟ Ι	ΨΟΙ		Ψυ

AREA AGENCY ON AGING-OPERATING BUDGET - D R A F T

04/23/12 AIP-2013 Page 1 of 2

Rev. No.:

Date of Budget: 09/30/13 to: Budget Period: 10/01/12 PSA: 14 Agency: Senior Resources of West Michigan

Program Develop MMAP 74278 69771 8034 44631			Program Services/Activities		
Admin Develop MMAP Is 137559 74278 69771 23841 69771 103435 103435	HIIB	Medicaid State	St-Access		
137559 74278 23841 103435 8034		Waiver Care Mgt	t ccs/oc	TOTAL	TAL
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d 4500 8034		30000 215913	113 27146		296900
4500 8034		20000	000		123435
			5600 10790		81095
Interest Income 15000					15000
Fund Raising/Other 2473 750	750	19336 50	5000		27559
TOTAL 286808 83062 114402		9804859 256013	113 37936 0	0 0 0	10658442

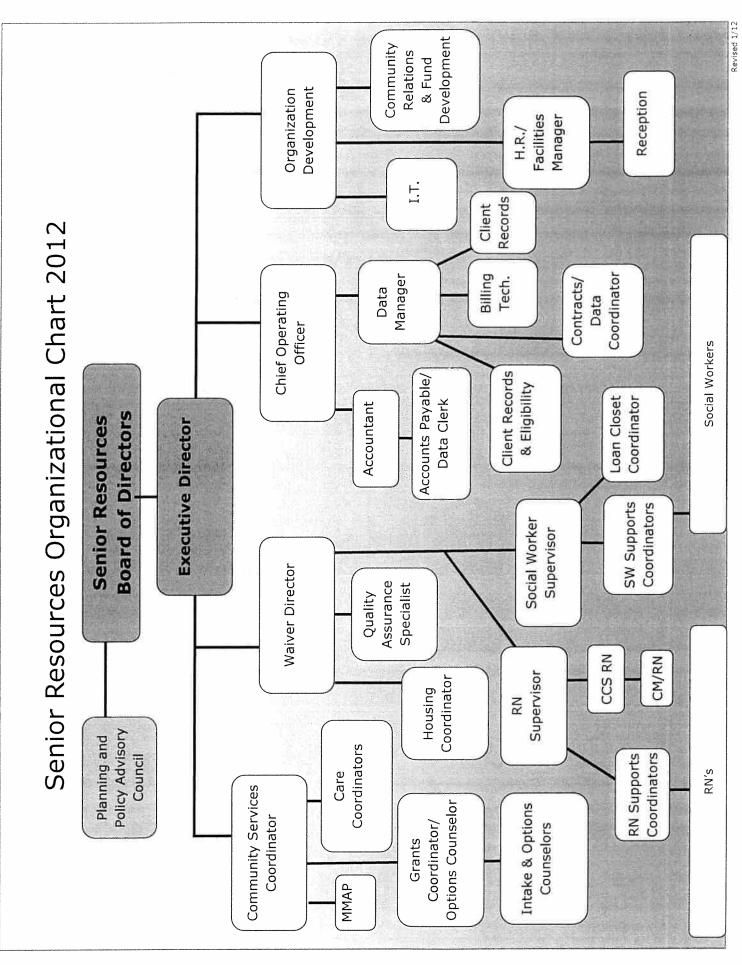
EXPENDITURES												
Contractual Services	950	1150	15000	225	33108	974	136					51543
Purchased Services	17473				7659203	24500						7701176
Wages and Salaries	153519	49417	17312	46002	1549497	160548	17997		0	0	0	1994292
Fringe Benefits	16789	6103	179	2895	175867	17420	2221					224261
Payroll Taxes	11744	3780	1324	3519	118537	12281	1377					152562
Professional Services	750	250	378	400	60550	1110	100					63538
Accounting & Audit Services	1500	825	575	850	17450	3125	100					24425
Legal Fees	2500	0	0	0	10000	750	0					13250
Occupancy	7050	2854	11700	1555	39925	7960	1215					72259
Insurance	006	275	350	250	8509	1000	125					8958
Office Equipment	2250	0	12500	1350	0009	3150	525					25775
Equip Maintenance & Repair	750	150	1500	150	2500	1000	100					6150
Office Supplies	1750	1600	653	289	24464	2300	450					32006
Printing & Publication	20500	500	0	150	200	200	200					22050
Postage	18623	2300	850	200	3000	1200	400					26873
Telephone	1500	002	1000	1200	21000	3200	500					29100
Travel	3460	2849	650	3200	37000	5520	1500					54179
Conferences	3900	1000	350	2000	7500	2925	200					17875
Memberships	13400	275			2200	750						16625
Special Events/Marketing	3000	1000	950		6500	500						11950
Other			4500		24000							28500
In-Kind	4500	8034	44631	7540	0	5600	10790					81095
TOTAL	286808	83062	114402	75362	9804859	256013	37936	0	0	0	0	10658442

AAA MMAF	FY 2013 Op. Budget
PSA:	14
Agency:	Senior Resources of West Michigan
Fiscal Year:	2012/13
Date:	4/2/2012

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REVENUES	
Federal Funds	69771
State Funds	
Local Cash	
Local In-Kind	44631
MMAP Funds	
Fund Raising/Other	
TOTAL	114402

EXPENDITURES	
Wages and Salaries	17312
Fringe Benefits	0
Payroll Taxes	1503
Professional Services	4878
Accounting & Audit Services	575
Legal Fees	0
Occupancy	11700
Insurance	350
Office Equipment	12500
Equip Maintenance & Repair	1500
Office Supplies	653
Printing & Publication	0
Postage	850
Telephone	1000
Travel	650
Conferences/Trainings	350
Memberships	0
Special Events	950
Other: Contracted Providers	15000
In-Kind Expense	44631
TOTAL	114402



t:board/organizationalchart

Senior Resources of West Michigan, an Area Agency on Aging

Annual Implementation Plan Fiscal Year 2013 October 1, 2012 – September 30, 2013



Annual Implementation Plans are to include:

- A summary of services to be provided under the Plan.
- Highlights of FY'12 accomplishments for program development objectives.
- A description of goals for FY'I3 and strategies for accomplishing them
- Advocacy efforts
- A description of special projects and partnerships.
- Budget Information.



Summary:

The mission of Senior Resources is to provide a comprehensive and coordinated system of services designed to promote the independence and dignity of older persons and their families in Muskegon, Oceana, and Ottawa counties – a mission compelling us to focus on older persons in greatest need and to advocate for all.

1	*
	-

Accomplishments from Fiscal Year 2012:

- In 2012 Senior Resources hired three Options Counselors and have incorporated their service into the Intake Process.
- A program specifically designed to meet the needs of the working caregiver has been developed.
- Creating Confident Caregiver specific for caregivers of dementia or Alzheimer's.
- Senior Resources has established chronic disease management programs throughout our three county area with 10 agencies and 30 lay leaders involved in facilitating programs to assist seniors in managing their chronic health conditions.
- Building relationships with community partners in an effort to become an emerging ADRC.
- Collaborated with the Muskegon County Sheriffs Office on Project Lifesaver.

State Plan Objective #1

Work to improve the health and nutrition of Older Adults

Desired Outcome I

Community members will have and utilize regional meal sites that fulfill needs related to nutrition, socialization, health and wellness.

Desired Outcome 2

To increase utilization of congregate meal sites by older persons.

Desired Outcome 3

To support older adults in the management of their chronic disease



State Plan Objective #2

Ensure That Older Adults Have a Choice in Where They Live Through Increased Access to Information and Services

Desired Outcome I

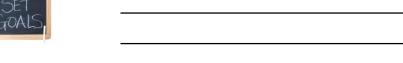
To ensure consumer choice and access to services.

Activities:

- All Supports Coordinators employed by Senior Resources and focal points will have the required training to provide fitting Community Living Supports and Option Councillators required.
- and Options Counseling to consumers.

 The 21 I Call Center/Senior Resources will use state/agency defined triggers to refer consumers to 18A/Options Counselors.
- to refer consumers to I&A/Options Counselors.

 All Supports Coordinators and Options Counselors will be trained in the Person Centered Thinking Process





Objective #3

Protect Older Adults from Abuse and Exploitation

Desired Outcome I

Decrease elder abuse in Muskegon, Oceana and Ottawa Counties by increasing awareness and knowledge of what is elder abuse and how to report it.

Desired Outcome 2

Caregivers of older adults will recognize signs of impending abuse

Objective #4

Improve the Effectiveness, Efficiency, and Quality of Services Provided Through the Michigan Aging Network and its

Desired Outcome

Consumers will have "no wrong door" access to information regarding long term options for care. To ensure consumer choice and access to services.



Program Development Objectives (Regional)

ObjectiveOlder adults with dementia, Alzheimer's, or traumatic brain injury who are prone to wander and their caregivers will have access to technology that will locate them in the event of wandering.

Desired Outcome

This technology will support expedient, cost efficient and safe returns home for adults and children who are at risk of wandering by using reliable personal tracking equipment with the secondary impact of providing peace of mind to

Objective

Encourage patients and their caregivers to take an active role in their care transition/setting with the secondary objective of reducing preventable hospital readmissions.

Desired Outcome

Safe, effective, and efficient care transitions and reduced risk of potentially preventable readmissions requiring cooperation among providers of medical services, social services, and support services in the community and in long-term care facilities.

Advocacy:

- Fiscal Year 2013 Appropriations Reauthorization of the Older Americans Act (OAA).
- Enhancing the Health of Older Adults.
- Rebalance the Long-term Services and Supports Systems rebalancing our nation's fragmented long-term services and supports system Senior Mobility Options

- Social Security
 Preserve the Medicare and Medicaid Safety Net





Special Projects/Partnerships

- Senior Resources partners with over 90 In-Home Care Agencies
 Senior Resources partners with a variety of local health and human service providers to deliver services from a group of highly qualified staff.
 CALL 2-I-I provides information regarding available services & resources
- for seniors
- for seniors

 Senior Resources funds + United Way funds + Millage = more service

 Focal Points throughout region: Evergreen Commons, North Ottawa County Council on Aging, Oceana County Council on Aging

 Oceana County Council on Aging and the North Ottawa County Council on Aging are recipients of millage funds in their areas.

 Aging & Disability Resource Centers(ADRC).

 Muskegon County Sheriffs Office Project Lifesaver



hat I am authorized to sign on behalf of the Area Agency on Ag e documentation and records will be maintained to support requ	ing. This budget represents necessary coals to sinct program rependitures.	or inglementation of the Area Plas.
4am antis	Executive Director	64/10
Southire	764	Date

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SUPPRIT SEES TOTAL					17745		19,66				165,1850			80,711		140.00

	PY:	2013 AREA I	PLAN GRANT	BUDGET- N	IUTRITION SI	ERVICES DET	AIL		Ser. 1900
Agency	Senior Resou	ross of West	Budget Period:	41183	to to	06/30/13			
PSA	- 56		Date:	04629112	Rev. Number	AIP-2013			page 3 of 3
SERVICE CATEGORY	Title III C-1	Title III C-2	State Congregate	State HOM	NSF	Pragrain	Costs	In-Histor March	TOTAL
NAYties Services									
1. Congregate Meals	450,601		3.666		77,118	168,500	22,400	43,400	769,622
2. Home Delivered Meals		227,794		311,743	90,005	152,750	32,750	53,400	886,043
3. Natified Counceling			× .				Ψ.	V-1	
4. Nutries Education	-							-	
5: AAA RONumborier									
Nutrition Sensors Total	490,801	227,794	8.005	311.743	101,722	321.250	90,190	92,800	
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W. C.			-			reare	MARIE	Pedilin	
1. LTC Oretudarum	4 443	8.003		22.000	10,977		2,951	593	47,974
2. Cider Abuse Prevention	-		6,190		Contract Contract	2 2		1,095	7,285
			1000						
3. Plagren Specific						-	2.351	1,084	55.250
3. Region Specific LTC Ontoucharien Ser. Yotal	4,443	8.003	6,190	22,009	10,377				
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TO Ontudenter Ser. Total BERVICES PROVIDED AS A FORM OF RESPITE CARE 1. Oher:	F	7 2013 AREA	PLAN GRAP	IT BUDGET	RESPITE SE	RVICE DETA	L. Program	Cushin-Ried	
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LTG Ornizularian Ber. Total SERVICES PROVIDED AS A FORM OF RESIDETE CARE 1. Chare 2. Homerstäng 3. Home Care Assistance 4. Home Resid Asia	F	7 2013 AREA	PLAN GRAP	IT BUDGET	RESPITE SE	RVICE DETA	L. Program	Cushin-Ried	TOTAL
LTC Ornauturen Ber. Total SERVICES PROVIDED AS A FORM OF RESPITE CARE 1. Chare 3. Home-case Assistance 4. Home-line/bit Asia 5. Most Province Confession 6. Home-line/bit Asia 6. Most Province Confession 6. Home-line/bit Asia 6. Most Province Confession 7. Most Provin	F	7 2013 AREA	PLAN GRAP	IT BUDGET	RESPITE SE	RVICE DETA	L. Program	Cushin-Ried	TOTAL
LTG Ornizularian Ber. Total SERVICES PROVIDED AS A FORM OF RESIDETE CARE 1. Chare 2. Homerstäng 3. Home Care Assistance 4. Home Resid Asia	F	7 2013 AREA	PLAN GRAP	IT BUDGET	RESPITE SE	RVICE DETA	L. Program	Cushin-Ried	TOTAL

	Budgeted	Percent of	Metho	d of Prov	isine
Service	Funds	the Total			
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Care Management	5 248,413	350	-	- 17	-
Case Coordination & Supports	\$ 180,593	8%		X 5	
Disaster Advocacy & Outreach Program	1 .	0%		-	
Information & Assistance	\$ 69.987			× 11	~
Outreach	\$ 3,500	2%			-
Transportation	\$ 57,810	2%	V 1	v 1	
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Home Care Assistance	1 .	2%	-	· i	
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Medication Management		254		_	_
Personal Care	\$ 51,560	100	0 -		
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Respite Care	\$ 221,268	198	Ŷ i		
Friendly Reasourance	2 223,270	7.0	^		
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COMMUNITY SERVICES	_	_	-		_
Adult Day Services	\$ 142,018	554	×	-	-
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Congregate Meals Nutrition Counseling	7	25%	-	· +	
Nutrition Education	-	0%	-	-	
Disease Prevention Neath Promoton		150	0 1		
Health Screening	1	0%			
Assistance to the Hearing Impaired & Deaf	1	100	-	-	
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Senior Center Operations	3 47,974	195	_	× 1	
Senior Center Operational	5 -	9%			_
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Programs for Prevention of Elder Abuse.	\$ 7,286	0%			_
Counseling Services	5 -	0%		- 1	
Specialized Respire Care	\$.	9%			
Caregiver Supplemental Services	5	0%			
Knoby Support Services	\$ 13,768	0%		X	
Caregiver Education, Support, & Training		1%		X 2	χ
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PROGRAM DEVELOPMENT	\$ 83,662	3%	Control of the	THE PARTY NAMED IN	7.00
REGION-SPECIFIC	\$.	0%			
CLP/ADRC Services	\$ -	0%			X.
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TOTAL PERCENT		100%	054	5501	
TOTAL FUNDING	\$ 3,096,520		50	\$0 ;	

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Professional Services	750	250	378	400	80680		.100				6053
Securiting & Audit Denvices	1900	825	575	850			190				2442
agal Fasa	2900		. 0	- 6			- 0				13350
Congency	7950	2854	11700	1955	29925	7960	1215				72290
resource	900		360		ccss		125				8950
Office Equipment	2250		12500	1350	6003		525				2677
Spulp Murrieroince & Regul	750	150	1500	100	2500	1000	100				6150
Office Supplies	1750	1800	663		24454	2300	4)0				22900
hinting 8 Publication	25500	930	- 0			200	200	_	_	_	2295
Pastinger	19523	2300	850	500	3660		400	_	_	_	26872
telephone	1500	700	1000	1200	21000	3200	500				29100
Teref	340	2840	660	3200	37000	8520	1500				54175
Don's recies	3900	1000	350	2000	7900	2921	200	_	_	-	17870
Andenitys	15400	270		_	2203			_	_	-	16826
Ipodal Ewitta Varioting	3000	1000	(60		6893	800		_	_	-	11950
20er			4500	7540	24000	5660	10790				25900
n-Kirel	4900	6034	44031		- 4			_	_	-	
IOTAL.	206906	55052	114452		0834850	2940130	57806		4		\$ 10656442

AAA MMAP FY 2	313 Op. Budget
PEA	- 1
Agency Senar	Resources of West Michigan
Flural Year 2012H	1
Date	4(2)2012
REVENIES	
Footesii Funda	8977
State Punete	
Local Court	
Local tricking	6460
MMAP Funds	
Fund Raising/Other	
TOTAL	1168
Woges and Sylanes	- 1721
EXPENDITURES	
Proge Streets	- 374
Payon Times	197
Explanional Services	427
Accounting & Audit Services	
Legal Free	
Occupancy:	100
PA PAYE	20
Office Gaupment	1091
Cquip Maintenance 6 Pages	130
Diffice Supplies	
Preting & Publication	
Postage	21
Temphone	116
Toyel	44
Conferences/Trainings	38
Mexicaning	
Special Events	56
Other Costmood Providers	1500
n-Kind Expanse	640
70000	

Questions? Comments?
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