

*Region 9  
Area Agency on Aging*



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**=DRAFT=**

*2010–2012 Multi–Year Plan  
and 2010 Annual  
Implementation Plan*

# Draft 2010-2012 Multi-Year Plan and Annual Implementation Plan for Fiscal Year 2010

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## **COUNTY/LOCAL UNIT OF GOVERNMENT REVIEW:**

As part of its effort to ensure all communities within the service area have an opportunity to comment on the three year implementation plan, Region 9 Area Agency on Aging will be hosting two public hearings. Due to the geographic span of the region, one will be held in the northern area (Alpena County) and one will be held in the southern area (Roscommon County). Doing so will provide opportunity for all community and governmental entities as well as private individuals to learn and comment on the three year plan.

In addition, all county Boards of Commissioners within the region will receive a copy of the multi-year plan and a request for review and action by the board in terms of approval or disapproval. Each county board has representation on the NEMCSA Policy Board and each local Council or Commission on Aging has representation on the Northeast Michigan Regional Council on Aging. This provides a broad range of involvement for each county's development and comment phases of the process.

Over the course of the past year and a half, Region 9 Area Agency on Aging has also increased its communications to the local county Boards of Commissioners by regularly mailing copies of the minutes from the Northeast Michigan Regional Council on Aging meetings. The additional information is intended to increase awareness of the AAA's functions, activities and plans as well as encourage support and involvement in all facets of the AAA planning and advocacy strategies.

## **SECTION I.**

### **EXECUTIVE SUMMARY NARRATIVE**

Established under the Older Americans Act of 1965, each Area Agency on Aging is charged with the responsibility of preparing a multi (3) year plan, which will foster a comprehensive, coordinated system of service for older persons in its planning and service area (PSA). Region 9 Area Agency on Aging is designated by the Michigan Office of Services to the Aging (OSA) to serve the counties of Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle and Roscommon.

The Region 9 Area Agency on Aging's (AAA) role in the process is to plan, fund and monitor programs that provide assistance to individuals 60 years of age and older and to their support systems. In addition, part of Region 9 AAA's overall mission is to help older persons and persons with disabilities live with dignity and choices in their homes and communities for as long as possible.

The AAA is able to carry out its role through regular assessment, contract management, collaboration, advocacy and quality assurance. These functions, along with the use of Older Americans Act funds, enable the AAA to maximize public and private dollars and community resources to promote and ensure an atmosphere of dignity and strength among older individuals to ensure them the maximum level of independence possible.

The AAA continues to support as partners local "points of presence", which include County Councils/Commissions on Aging, multi-purpose senior centers, adult day service centers, health resource centers, and community based care programs. These partnerships have enhanced the AAA's ability to identify gaps in community services, services needing expansion and/or maintenance and recommendations for community service improvement.

Fiscal year 2010 is the beginning of another three year planning cycle for the AAA. The plan will focus on efforts to provide person-centered access to information, evidence-based disease prevention and health promotion, and continuation of community based care options in coordination with the Michigan Office of Services to the Aging goals.

The basis of the plan builds upon the successes of earlier program development activities and core service funding as detailed below (note: not all services have been requested in all counties. Specific numbers of clients and/or services are to be negotiated):

- Congregate Nutrition
- Home Delivered Meals
- Homemaker Services
- Personal Care
- In-Home Respite
- Legal Services
- Disease Prevention Health Promotion
- National Family Caregiver Support Program
- Elder Abuse Prevention and Education
- Adult Day Services

The AAA will continue to directly operate the Long Term Care Ombudsman Program, the Medicare/Medicaid Assistance Program and the outreach for Kinship Care. Medication Management and the Merit Trust Award in-home respite funds will be placed in a purchase of

service pool for use throughout the region primarily for Care Management clients. All services funded with Older Americans Act funds or funds provided by the State of Michigan must meet the objectives of the Older Americans Act and current Minimum Standards of Performance issued by the Michigan Office of Services to the Aging. Additional specifications and/or limitations may be required by the Region 9 Area Agency on Aging.

This is the first plan year that Elder Abuse Prevention and Education funds will be completely contracted out. Because of the small overall allocation and the large geographic area, the AAA has historically contracted a small amount with local programs and utilized existing program staff to fulfill the major components of elder abuse prevention and education. The goal will remain to contract services that provide a broad spectrum of elder abuse prevention programming and the AAA will retain the option to fund internal programs should the proposals not meet regional goals.

Other plans will be to continue the effort of creating safe, secure and receptive communities as well as working to assure independent choices. Region 9 AAA continues to be at the forefront of supporting communities within its PSA to assess existing infrastructure and design to create a more elder-friendly and livable environment for all ages. Two communities within the PSA have been recognized for their efforts under the “Communities for a Lifetime” framework and a multi-member collaborative body hosted a “Senior Summit” in Alpena this past year building on many of the Communities for a Lifetime concepts.

Region 9 AAA will also continue its efforts in evidence-based programming in relation to chronic disease self-management. According to the Dartmouth Atlas of Health Care 2008, “about 9 out of 10 deaths of Medicare beneficiaries are due to common chronic illnesses such as chronic heart failure, lung disease, cancer, renal failure, diabetes, liver disease and peripheral vascular disease”. The report says that approximately “32 percent of Medicare spending goes towards the care of chronically ill patients in their last two years of life”. More care is not seen as better, according to the study. By continuing the implementation of the Personal Action Towards Health Program (PATH), also known as the Stanford Chronic Disease Self-Management Program, and the Matter of Balance Program, the AAA will help educate community members and professionals on how to take control of their health and reduce overall health care costs.

According to the Family Caregiver Alliance, there are 5–7 million people (family, friends and neighbors) providing care to someone aged 65 or older who need assistance with every day activities. It is imperative that caregivers have support and tools to help them sustain their role and not succumb to caregiver burn-out. Region 9 AAA has partnered with OSA to bring the Creating Confident Caregivers Program, also known as Savvy Caregiver, to northeast Michigan. Savvy Caregiver is also an evidence-based program for family members caring for a loved one suffering from dementia and/or memory loss. The AAA will continue to bring this program to communities throughout the region.

The AAA has trained and supported 44 Medicare Medicaid Assistance Program (MMAAP) volunteers to assist Medicare beneficiaries and their families, or caregivers, with free assistance and education. Doing so enables them to make informed health care coverage decisions. The AAA has worked with the MMAAP volunteers to implement the MI Café Program this year, which will assist individuals in need of nutrition assistance to apply for food stamps.

The Long Term Care Ombudsman Program continues to be a priority in assuring access and visibility in the region’s 22 nursing homes. Two staff members and eleven volunteers work closely together to improve the long term care system within the 22 nursing facilities. The active Ombudsman regularly visit the homes to ensure residents and their families have access to trained advocates who represent their interest and needs.

As part of the Ombudsmen's efforts, the Best Practices of Northern Michigan is beginning its 12<sup>th</sup> year. The mission of the Best Practices group is to ensure "long term care residences, as communities, are great places to live because facilities employ resident-centered best practices". The membership is a collaboration of ombudsman staff, nursing home staff and advocates that work to provide innovative assistance and training for 40 nursing homes across northern Michigan.

In collaboration with the local County Councils/Commissions on Aging (COAs), the School Success Program and the Compass Program, the AAA served 33 grandparents with a total of 74 children under the National Family Caregiver Support Program. The program has also resulted in support groups being started in Alpena, Crawford and Otsego counties. The support groups provide a safe environment for support and sharing for elder grandparents raising relative children of all ages. The funding also provides assistance for COAs that are health resource centers, which ensures public access to local services.

The AAA supports capacity building efforts of the COAs. Technical assistance and training in relation to NAPIS electronic reporting, development of a cost-saving task force, funding for internet access costs and identifying grant sources have been provided throughout the current plan year. The task force membership is comprised of COA directors, Northeast Michigan Regional Council on Aging members and AAA staff. The task force has examined a variety of cost saving and revenue generating ideas to help them navigate through these tough economic times. The AAA will continue to support the county COAs in their efforts to enhance the development and maintenance of seamless systems of assistance to seniors.

Once again, current trends point to lower funding levels for the next fiscal year. Many funds received by the AAA are categorically restricted and others are developmental in nature. Funds are awarded through a competitive bid process. Once the proposals are received, AAA staff will submit recommendations to the Northeast Michigan Regional Council on Aging for review and deliberation. In turn, the Council will present their recommendations for funding to the Northeast Michigan Community Service (NEMCSA) Policy Board for action. The NEMCSA Board awards the funds. The AAA will use existing formulae for the distribution of traditional or replacement funds. Exceptions to the formulae exist for some categorical funds, which may not be significant to formulize or are meant to be developmental

## **PROGRAM DEVELOPMENT**

State Goal #1: Work to improve the health and nutrition of older adults.

Local Objectives: The AAA will continue its commitment to providing congregate and home delivered meals. The AAA will also continue implementation of the Stanford Chronic Disease Self-Management Program, the Matter of Balance Program and the MI Café Program. The AAA will also seek to ensure access to fresh fruits and vegetables by working to make Project Fresh available in every county. The AAA will provide supportive services to caregivers through the Savvy Caregiver Program.

State Goal #2: Ensure that older adults have a choice in where they live through increased access to information and services.

Local Objectives: The AAA will continue to provide a person-centered approach to providing information and assistance to individuals seeking services. The AAA will work to enhance the capabilities of its website to provide a comprehensive

range of information and resources. Choices for independent living will be maximized by reaching out to individuals living in licensed settings to ensure individuals are aware of the full range of programs available. The AAA will also participate in the effort to implement the 211 telephone referral system in northeast Michigan.

State Goal #3: Protect older adults from abuse and exploitation.

Local Objectives: The AAA will coordinate with partners to provide educational events that increase awareness of signs of abuse, neglect and financial exploitation. The AAA will also collaborate with law enforcement and Adult Protective Services to identify and report suspected elder abuse. The Long Term Care Ombudsman Program and its volunteers will continue to be supported by the AAA.

State Goal #4: Improve the effectiveness, efficiency and quality of services provided through the Michigan Aging Network and its partners.

Local Objectives: The AAA will ensure in-home service providers have access to affordable continuing education. The AAA will work with local aging network partners to ensure they receive any needed technical support.

Additional Goal: Work to improve the availability of affordable, accessible transportation for older adults.

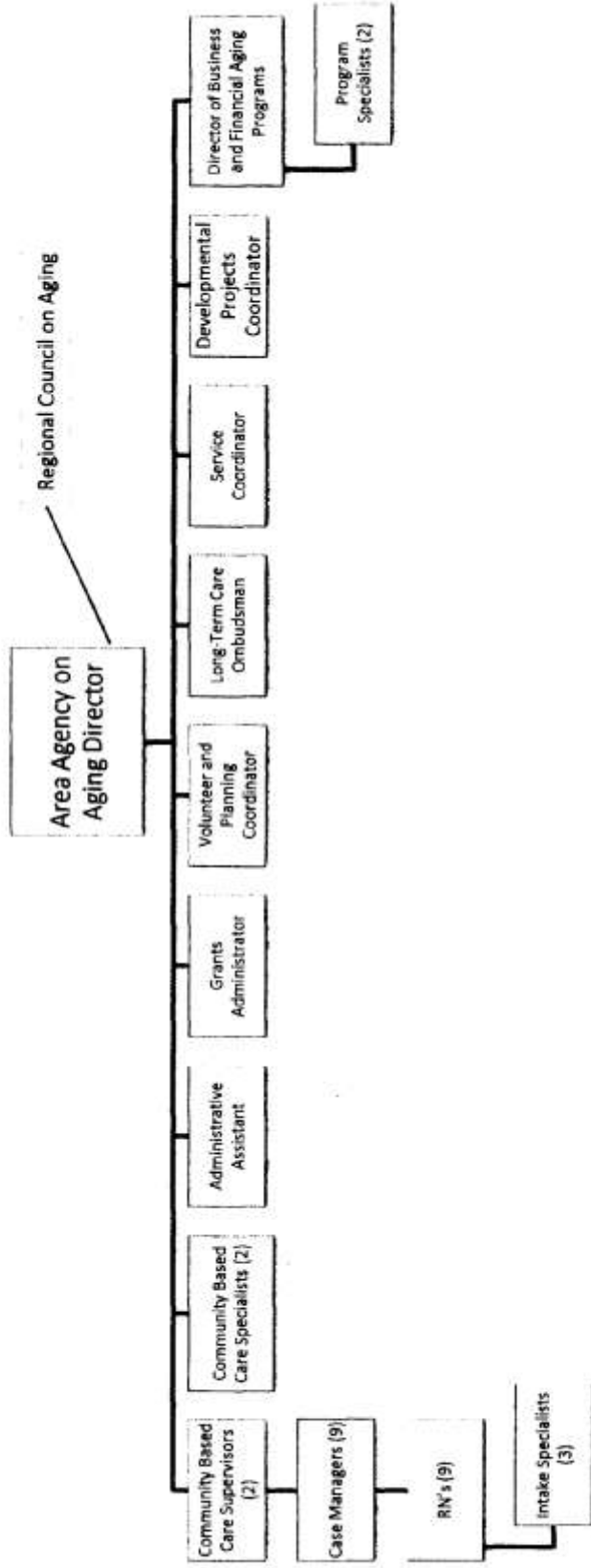
Objective: The AAA will assist communities in developing transportation plans by providing technical assistance for the Communities for a Lifetime initiative, assisting with transportation boards and identifying potential funding sources.

**SECTION II**

**FY 2010 AREA PLAN GRANT BUDGET**



# Area Agency on Aging (AAA)



## EVALUATION OF UNMET NEEDS

Describe the methods the AAA used to identify the needs of older persons in the PSA.

Region 9 Area Agency on Aging is one of many program divisions within the Northeast Michigan Community Service Agency (NEMCSA). As such, it is important for NEMCSA as the umbrella agency to periodically re-examine the needs within its service area. NEMCSA serves a core eleven county region of northeast Michigan; however, many individual programs such as the Region 9 Area Agency on Aging serve additional counties. The statistical information provided here includes data from all twelve counties of the AAAs service area. Both NEMCSA and the AAA have taken several steps to identify the needs of older persons in the service area. A synopsis of recent activities is provided below.

During the summer of 2007 and into the start of fiscal year 2008, NEMCSA conducted a comprehensive Community Needs Assessment. The purpose of the study was to identify the diverse needs of the residents and communities throughout the region as well as for use in planning future programs and services that will address those needs. An extensive survey tool was developed and distributed in multiple ways. Consumers of current services, human service agencies and organizations, current program staff, community members, etc. were all invited to partake in the survey process.

The Region 9 AAA received 2,476 responses from our twelve county service area. It is of interest to note that surveys were distributed to a variety of age groups, but the majority of responses received came from the age 60+ group (915 respondents or 37%). The focus of the survey was to determine what the strengths and needs of a particular community were from the individual respondent's perspective.

In addition to the large scale NEMCSA needs assessment, Region 9 AAA held two public input sessions—January 26, 2009 in Alpena and February 4, 2009 in Grayling. The sessions presented current demographic materials and funded service information. Community comments were gathered regarding the needs of the aging community as a basis for plan development.

The AAA has also been involved in many smaller scale discussions with community organizations, analyzed current NAPIS data and solicited community needs assessments as part of their community plans from the local county focal points (COAs). Local input is critical to determining the true need within a community. The methods utilized by the COAs to assess its community's needs were varied in scope and reach. Some distributed a senior survey tool to the entire senior population of the county as well as service partners and collaborating agencies. Others held public input sessions and board workshop or focus group meetings. There were also a number of COAs that used a number of these methods to ensure a well-rounded sampling of the community was involved in the needs assessment process. The finalized community plans have been submitted to and approved by local county Boards of Commissioners.

Another effort that Region 9 AAA has been involved with is being a partner in Michigan's effort towards the national Elder Economic Security Initiative. This initiative is a broad-based coalition of national, state and regional policy makers, advocates, researchers, direct service providers and public agencies, seniors, non-profits, philanthropists, and senior member organizations. Underpinning the Initiative is the Elder Economic Security Standard Index™ developed by the Gerontology Network at the University of Massachusetts Boston and the Wider Opportunities for Women (WOW).

The Index measures the income that older adults require to maintain their independence and meet their daily expenses, including affordable housing and other life circumstances. The Index promotes a measure of income that respects the autonomy goals of older adults, rather than abject poverty. It is a proactive means that will change the way the needs of older adults are measured and addressed.

Common themes are evident throughout the various modes of needs assessment. As illustrated below, food assistance, transportation, medical services (including prescription drugs), utility assistance, in-home services and home repair/chore services top the list of identified needs.

The data was gleaned from the current NEMCSA needs assessment and the twelve local COA community assessments and plans. Additional input was factored in based on participation in other community forums and venues. During this process, a variety of other issues became apparent such as loneliness and isolation, a need for long term care choices and assisted living, caregiver support, crisis respite and limited income.

<b>NEMCSA Needs Assessment</b>		<b>Community Plan Assessments</b>	
Need	Percent of Respondents	Need	Percent of COAs
Food Assistance	37%	Transportation	75%
Medical Services	36%	Home Repairs/Chore	75%
Prescriptions	33%	Food Assistance	67%
Utility Assistance	32%	Prescriptions	67%
Dental	22%	Utility Assistance	58%
Transportation	22%	In-Home Services	42%

A striking contrast to NEMCSA's previous needs assessment in 2001 is that the need for food assistance was ranked seventh and it is now first. Medical assistance including dental and prescription were ranked in the top ten in 2001 and remain in the top ten now. Transportation is consistently rated at sixth. Utility assistance has ranked lower from 2001 from being second to now being fourth.

According to a report by WOW, one in three elders relying on Social Security for more than 90% of their income, are forced to make sacrifices or go without basic goods and services such as prescription drugs, heating oil, or food. This report information is pertinent to the Region 9 service area in that the elders living in Region 9 are identifying a need for assistance in many of the same categories. Through our work with the Elder Economic Index Initiative, it is hoped that a more realistic measure of poverty will be utilized in determining program eligibility criteria across the human services and aging network.

Overall, 63,128 individuals, or four percent (4%) of Michigan’s elders reside in the twelve county region of Northeast Michigan. A detailed table showing age, ethnicity, and gender broken out by county is attached. The overall minority population living in the region is less than one percent. Fifty-five percent of individuals over the age of 60 are female.

Current program data for in-home services, which includes home-delivered meals, homemaker and personal care, indicates that the majority of the 3,318 service recipients are age 75 or older (2,508 or 76%), female (64%) and live alone (54%). Twenty-eight percent (28%) live below the poverty level, which is currently set at \$10,400 for 2009.

<b>Ranking in State based on # of Elders</b>	<b>County</b>	<b>% of Elders Age 60+</b>
1	Alcona	35.3%
2	Montmorency	31.7%
4	Roscommon	31.2%
5	Presque Isle	29.9%
6	Iosco	29.5%
8	Oscoda	28.7%
11	Ogemaw	26.6%
19	Cheboygan	24.2%
22	Alpena	24.0%
24	Arenac	23.4%
30	Crawford	22.5%
40	Otsego	19.9%
Based on 2006 census data estimates		

Note—half of the region is within the state’s top ten counties for elder population.

According to the Department of Health & Human Services report, “Profile of Older Americans: 2008”, about 3.6 million elderly persons (9.7%) were below the poverty level in 2007. Another 2.4 million (6.4%) were classified as “near-poor” (income between the poverty level and 125% of this level).

As part of the evaluation process, a Public Information Session was held January 26, 2009 in Alpena. The session provided participants with an overview of the AAA’s mission, functions, services and explanation of the multi-year plan process. A survey tool regarding fundable service categories was distributed and discussed. Participants were provided an opportunity to comment and record their preferred services options on the tool.

Of the twenty-one (21) attendees, fourteen completed a survey. The majority of respondents indicated a need to continue funding the current service categories of Care Management, Homemaking, Respite, Personal Care, Legal Services and Long Term Care Ombudsman. Interest in funding additional service categories most frequently included chore, medication management, home repair, senior center operations and adult day care. A small number of

respondents indicated an interest in funding a significant number of additional categories; however, funding levels for the geographic span of the region would result in inadequate funds to make a meaningful impact.

A second Public Information Session was held February 4, 2009 in Grayling. The same format of information was presented as well as the same survey tool. There were twenty-four (24) attendees and sixteen (16) completed surveys. A wider range of responses were received. In addition to currently funded services, transportation, chore services, senior center operations and adult day care were the most frequently marked options.

Significant discussion centered on the need to anticipate significant growth in terms of senior population within the region and its effect on local agencies. It was noted that more pressure is being put on local entities to financially support Older Americans Act services due to increased need and stagnant funding. Given the current state of the economy, this becomes a huge barrier in terms of accessible funding for needed services.

Discussion also centered on the possibility of shifting current funding strategies to enable a more diverse core offering of services to include such options as chore. A review of current utilization of funded service categories showed a wait list of 54 people for in-home services in three counties. Additionally, in counties that have requested a transfer of funds due to under-utilization, the requests have typically been to shift personal care allocations to the homemaking category due to an intense need. Such a trend indicates a need to continue support of the currently funded core service categories.

## **AVAILABLE RESOURCES AND PARTNERSHIPS**

Region 9 Area Agency on Aging has been very fortunate to have committed partners serving the common mission of bringing needed services to the area. Each local focal point has been successful in garnering community support for a senior millage. These millages have been critical to the effort of serving seniors in need and have helped provide funding for some innovative programming for individual communities. Without the additional millage dollars, wait lists would be much larger and seniors needing in-home services particularly would have to wait much longer to be served and may be at higher risk of institutionalization. Local county millage dollars also fund a variety of activities including Access funds to provide information and assistance, transportation and outreach.

The AAA will continue to build upon the network of senior centers as the focal point for services. The scope of the centers has been broadened to include designation as health resource centers. Doing so has enabled the centers to be more visible and useful in the community as a provider of health and wellness activities and not solely an in-home service provider.

Other resources include NEMCSA's role as a community action agency. Services such as Medicaid enrollment, Senior Companion services, weatherization, housing assistance, food programs and emergency service programs are often accessible to senior program participants on a supplemental basis.

The AAA also provides financial support to individual caregivers under the National Family Caregiver Support Program. Other community partnerships have enabled the AAA to broaden its resource base with such entities as other senior service providers, schools, health care providers and court systems. The AAA's active involvement with this resource base has helped eliminate duplication of effort and has accelerated access to available supports and services.

## SENIOR MILLAGE – Effective January 2009

County	Status	Number of Mills	Amount	Length of Time
<b>ALCONA</b>	Passed 2008	1/4	\$243,000	4 years
<b>ALPENA</b>	Passed 2006	.55 to the Older Persons Fund	Approx. \$430,000 *The Alpena Senior Center submits for reimbursement	4 years
<b>ARENAC</b>	Passed 2008	.75	\$350,000	6 years
<b>CHEBOYGAN</b>	Passed 2006	.49	\$500,000 Funds requested annually from County Brd. of Commissioners	4 years
<b>CRAWFORD</b>	Passed 1992	.50	\$270,458	20 years
<b>IOSCO</b>	Passed 2002	.30	\$257,825	8 years
<b>MONTMORENCY</b>	Passed 2006	.06	\$108,000	4 years
<b>OGEMAW</b>	Passed 2006	.50	\$375,000	10 years
<b>OSCODA</b>	On-going 2004-2011	.34 .50	Approx. \$150,000	7 years
<b>OTSEGO</b>	Passed 2005-2010	1.00	\$1,256,227	5 years
<b>PRESQUE ISLE</b>	Passed 2006	.50	\$315,049	4 years
<b>ROSCOMMON</b>	Passed 2008-2014	.50	\$500,000	6 years



**SECTION IV. TARGETING, ACCESS SERVICES, IN-HOME SERVICES,  
COMMUNITY SERVICES AND AAA ADMINISTERED DIRECT SERVICES**

**TARGETING**

**SERVICE DELIVERY PLAN FOR TARGETING**

Fiscal Years: 2010-2012

Baseline Data <i>Source: Year-end report for FY '08 Indicate the number served by group and the percentage of that group's 60+ population that the number represents.</i>		African American	Native American/ Native Alaskan	Asian/ Pacific Islander	Hispanic	Low-income Minority	Low-income
Supportive Services	Number Served	3	2	1	3	4	1681
	Percentage	.18%	.12%	.06%	.18%	.24%	30.4%
Congregate Nutrition	Number Served	1	25	9	16	9	1158
	Percentage	.02%	.38%	.14%	.25%	.12%	17.8%
Home Delivered Meals	Number Served	1	2	1	7	1	713
	Percentage	.04%	.08%	.04%	.27%	.04%	28%

Service Delivery Plan For Targeting

Desired Outcome(s):

Recent demographic information indicates that the Region 9 service area has a very small minority population—less than one percent (1%). Region 9 recognizes the need to expend additional effort in seeking out minority populations and ensuring access to services. Primary emphasis will be on increasing outreach and service to African Americans, Native Americans, Hispanic and Asian/Pacific individuals that are age 60 or older including migrant workers and their families.

Ongoing - Region 9 will continue its efforts to provide services to Native Americans through outreach and program development particularly with the Saganings of the Chippewa Tribe in Arenac County. The AAA will also continue participation as a member of the Aging Network and American Indian Elder Forum sponsored by the Michigan Office of Services to the Aging.

Ongoing - Region 9 will continue to use the Generations Magazine to target outreach to minority populations.

September 30, 2011 - Conduct a written analysis of clients/units/types of service accessed by senior minority populations. Based on the analysis, the AAA will determine if there is a need or opportunity for the development of further programming.

September 30, 2012 - Provide a workshop with local community focal points to examine the extent of need within local counties for minority services. Conduct an analysis of the effectiveness of current outreach methods as well as utilization patterns.

## ACCESS SERVICES

### [X] Care Management

Starting date: 10-1-2009 Ending date: 9-30-2010 Total of federal dollars: \$2,000 Total of state dollars: \$550,022

Geographic area to be served Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle and Roscommon counties.

Goal: Maintain consistent level of care management services by conducting pre-screens, client assessments and developing care plans for individuals in need of supportive in-home services.

Timeline: Ongoing

Outcome: A consistent level of access to intensive care management services will be available to frail elderly individuals.

Goal: Increase education and outreach efforts with local hospitals, nursing homes and community members.

Timeline: September 30, 2010 - Informational visits and resource materials will be provided to six local hospitals.

September 30, 2011 - Informational visits and resource materials will be provided to twenty-two local nursing homes.

September 30, 2012 - Informational sessions will be provided throughout the region at local health fairs and other community events.

Outcome: 1. Increased awareness of program availability.

2. Improved access to services for elders.

Goal: Increase the use of technology to improve efficiency of staff, program operations and service providers.

Timeline: December 31, 2009 - Full implementation of Vendor View software.

Outcome: 1. Streamlined procedures for staff communications and services coordination with in-home service providers.

2. Improve turnaround time and response rates for client updates and authorization for service provision.

3. Reduction in consumption of office supplies by moving forward with Phase 2 towards a completely electronic record.

Care Management - Cont'd

Goal: Provide educational opportunities for program staff to enhance skills and knowledge bases necessary for the provision of effective care management services and community resources.

Timeline: December 31, 2009 - Development and implementation of new hire orientation training program.  
September 30, 2010 - Review and update current program policies and procedures. Conduct refresher training for all staff.  
Ongoing - Provide opportunity for continuing education through staff meetings, community events and professional organizations.

Number of client pre-screenings 2009	550 approx.	Planned 2010	550 approx.
Number of initial client assessments 2009	330 approx.	Planned 2010	350 approx.
Number of initial client care plans 2009	180 approx.	Planned 2010	200 approx.
Total number of clients (carry over plus new)2009	360 approx.	Planned 2010	375 approx.

Staff to client ratio (Active and maintenance per full-time care manager ratio) 2009 - 1:30 Planned 2010 - 1:30

Match and Other Resources

Source of FundsCash Value CSBG	In-kind \$61,113
Source of FundsCash Value HCBW	In-kind \$222

## SECTION V. PROGRAM DEVELOPMENT

**STATE PLAN GOAL #1: Work to improve the health and nutrition of older adults. (At least one objective should address Evidence Based Disease Prevention Programs).**

**Objective 1:** Contract federal and state funds for the provision of congregate and home delivered meals in accordance with OSA minimum standards.

Time Line: May 2009  
September 30, 2009  
October 1, 2009

Activities: Release RFP  
Award Contracts  
New program year begins with a three-year contract cycle

Expected Outcome: 1. Provide nutritious meals to older individuals in congregate settings as well as to the homebound elderly.  
2. Centralized administrative oversight to the nutrition program while enabling the AAA to provide locally operated meal sites. Doing so creates a sense of ownership and responsibility to the community.

**Objective 2:** Provide additional training programs of the Stanford Chronic Disease Self-Management Program(PATH) and the Matter of Balance Program (MOB).

Time Line: December 2009  
March 2010

Activities: Conduct PATH leader training.  
Conduct Matter of Balance leader training.  
Provide materials and support for leaders to expand and implement programs in local communities.  
Continue development of local coalitions to provide organizational support.

Expected Outcome: 1. Each county within the Region 9 service area will have access to a trainer/presenter capable of conducting community education in relation to the Stanford Chronic Disease Self-Management Program and the Matter of Balance Program.  
2. Achieve sustainability in both evidence-based programs; Stanford Chronic Disease Self-Management and Matter of Balance.  
3. Attendees of community programs will be better equipped to improve their health status and health management behaviors resulting in more appropriate utilization of health care resources.

**Objective 3:** The AAA will continue implementation of the MI Café Program.

Time Line: Ongoing  
December 2009 and ongoing  
Ongoing

Activities: Monitor MI Café sites within the service area.  
Create and distribute a customer satisfaction survey to MI Café consumers.  
Continue recruitment and training of volunteers to ensure availability of program in all counties of service area.  
Provide nutritional education to seniors as part of the enrollment process.  
Provide training for seniors on how to redeem benefits.

Expected Outcome: 1. Elders in Region 9 will be informed of the availability of the MI Café Program.  
2. Individuals in need of assistance applying for food stamps will receive help.  
3. Data will demonstrate the benefits of the MI Café Program.  
4. Increased utilization of the food stamp program.  
5. Consumers will receive nutritional education to aid them in making wise food choices.  
6. Program success will be assured with the ongoing support of volunteers.

**Objective 4:** Ensure elders have access to locally grown fresh fruits and vegetables.

Time Line: FY 2010

Activities: Assess availability of Project Fresh in Region 9 service area.  
Identify funding streams to support Project Fresh in areas not currently covered.

Expected Outcome: 1. Better access to a nutritionally balanced diet and nutritional education.  
2. Nutrition support to low-income seniors.

**Objective 5:** The AAA will create confident caregivers of people with dementia/memory loss through implementation of the Savvy Caregiver Program. Savvy Caregiver is an intervention designed to increase caregiver skills and confidence, create reliable and accessible networks of support and increase access to supportive services.

Time Line: FY 2010 – 2012

Activities: Provide certification training for four Master trainers each year.  
Conduct eight community caregiver classes each year. Classes are two hours per week for six weeks.  
Perform program management and fidelity monitoring for partner agencies.

Provide respite care services, including in-home and adult day services, so that caregivers can attend the classes.

- Expected Outcome:
1. In FY 2010, the Savvy Caregiver Program will provide 110 caregivers with the tools and resources necessary to improve their dementia care giving skills and knowledge.
  2. Provide caregivers with a supportive environment in which to learn how to manage the stress of care giving.
  3. Approximately 16,800 hours of in-home and adult day respite services will be provided in order for caregivers to participate in the Savvy Caregiver Program.
  4. Program integrity will be maintained via central administrative and fiduciary oversight provided by AAA staff.

**STATE PLAN GOAL #2: Ensure that older adults have a choice in where they live through increased access to information and services.**

**Objective 1:** Provide a person-centered approach to all persons seeking services and supports.

Time Line: Ongoing

Activities: Continue training Person-Centered Planning (PCP) for Supports Coordination and Intake staff.  
Supervisory review of participant case files to ensure utilization of PCP principles.  
Provide all care management program participants with information regarding the availability of PCP.  
Distribute annual client satisfaction survey to all current program participants.  
Develop and conduct PCP training module for in-home service providers and local community focal points.

Annually  
December 2009

- Expected Outcome:
1. AAA staff will improve their understanding and application of PCP principles.
  2. Supervisory reviews will reveal broad application of PCP technique.
  3. A majority of current program participants will report that they are treated with dignity and respect and involved in making decisions about their care.
  4. In-home service providers will be more confident and better equipped to engage in the practice of person-centered thinking.

**Objective 2:** Provide a comprehensive internet-based website which will encompass a wide range of general aging information and resources as well as locally-based resources available to the community within the PSA.

Time Line: March 2010

Activities: Seek consultative services to improve upon the current AAA website navigational capabilities and informational format.  
Provide additional links within the site to ensure users are able to find all pertinent information to meet their needs such as disease management, caregiver resources, community supports, etc.

Expected Outcome: 1. Increased visibility of AAA and aging-related programs and supports.  
2. Availability of information in a person-centered format so that individuals can obtain the information they need, when they need it in a clear, concise manner.

**Objective 3:** Consumers maximize their ability to live as independently as possible.

Time Line: Ongoing

Ongoing  
Ongoing

March 2010

Activities: Provide outreach to staff and residents of licensed residential settings such as AFCs, Homes for the Aged, and nursing homes.  
Participate in local health fairs and educational events.  
Build community awareness through professional networks such as local coalitions and regional advisory boards.  
Provide outreach to local human service agencies (DHS) within the service area.

Expected Outcome: 1. Increased consumer knowledge of long term care services and supports.  
2. Increased professional knowledge of long term care services and supports.  
3. Improved communication between collaborative bodies and local coalitions.

**Objective 4:** Provide person-centered access to information.

Time Line: December 2009

FY 2010  
February 2011

Activities: Participate as a coalition member in exploratory dialogues to expand the implementation of 211 to Northeast Michigan.  
Gather and submit regional resource information for 211 database.  
Support implementation of 211 community resource call center.

- Expected Outcome:
1. Provide an easy-to-remember, three-digit phone number that can connect clients with up-to-date information.
  2. Enhanced capabilities to provide AAA staff and community partners with current and accurate resource information.
  3. Reduced confusion and frustration for seniors, caregivers and disabled individuals in need of services and supports.
  4. Improved access to community services.

**STATE PLAN GOAL #3: Protect older adults from abuse and exploitation.**

**Objective 1:** Increase awareness of signs of abuse, neglect, and financial exploitation among senior populations and reporting procedures.

Time Line: FY 2010 – 2012

Activities: Conduct educational presentations for COAs, congregate meal sites, health fairs nursing homes and senior living complexes; provide posters, DVDs, and brochures; and conduct training for in-home provider and nursing home staff.

- Expected Outcome:
1. Improve awareness of signs of abuse, neglect and financial exploitation.
  2. Increase awareness and vigilance of reporting procedures.
  3. Reduced criminal victimization of seniors.

**Objective 2:** Improve collaboration with area law enforcement and Adult Protective Service (APS) workers in identifying and reporting suspected elder abuse.

Time Line: FY 2010 2012

Activities: Partner with APS and law enforcement to provide educational presentations among service organizations, congregate meal sites and senior living complexes within the Region 9 service area.  
Strengthen relations via invitation to local law enforcement and APS for increased visibility at senior attended events such as senior centers, health fairs, senior housing, etc.

- Expected Outcome:
1. Enhanced collaborative relationships with APS, law enforcement and the aging network.
  2. Enhanced relationships between APS, law enforcement and the senior population.

**Objective 3:** Assure access and visibility of the Long Term Care Ombudsman.

Time Line: Quarterly  
Ongoing

Activities: Visit nursing facilities on a quarterly basis.  
Recruit and maintain adequate level of trained volunteer ombudsmen.  
Ensure all complaints and informational contacts are resolved as expeditiously as possible.

Expected Outcome: 1. Consistent facility visits will ensure residents and staff have access to ombudsmen.  
2. Advocacy for resident rights.  
3. Training for nursing home staff will improve the quality of care residents receive.

**STATE PLAN GOAL #4: Improve the effectiveness, efficiency and quality of services provided through the Michigan Aging Network and its partners.**

**Objective 1:** Ensure in-home service providers have access to affordable continuing education opportunities, which enable them to develop, improve and maintain a high quality level of service to seniors.

Time Line: FY 2010 – 2012

Activities: Provide skills training sessions for in-home service providers.  
Partner with other human service and health care entities to ensure staff access to appropriate educational opportunities.

Expected Outcome: 1. In-home service providers will have increased access to continuing education events.  
2. Program participants will experience an increased level of quality care.  
3. In-home service contractors will have access to affordable staff training.

**Objective 2:** Local aging network partners will receive technical support.

Time Line: FY 2010 – 2012

Activities: Quarterly meetings will be arranged for COA and aging partners.  
Annual pre-bidders conference will be offered to potential contractors.  
Updates will be provided for the COA/AAA Policies Manual.  
AAA staff will be available to attend COA Board meetings.

- Expected Outcome:
1. Improved communications with COAs and other partners.
  2. COAs and partners will have clear understanding of program requirements and expectations.
  3. Contract review and technical assistance will be provided.

**Other Goals:** Work to improve the availability of affordable, accessible transportation for older adults.

**Objective 1:** Communities will work to develop effective transportation plans.

Time Line: Ongoing

Activities: Identify and recommend individuals to county transportation boards.  
AAA staff will assist communities in becoming "Communities for a Lifetime".  
Assist in identifying potential funding resources for transportation projects.

- Expected Outcome:
1. County transportation boards will have effective members working together to address transportation needs.
  2. Technical assistance will be provided to communities seeking designation as a Community for a Lifetime, which requires addressing a variety of transportation modes within a community including bike paths, sidewalks, and mass transit.
  3. Potential funding sources will be identified.

## **PROGRAM DEVELOPMENT PART II.**

Grants the AAA is currently involved in:

The AAA is currently involved in several evidence-based disease prevention programs, which include the Stanford Chronic Disease Self-Management Program (PATH), Matter of Balance (MOB) and exercise programs through the Arthritis Foundation. It is a proven fact that when individuals take control of their health, improved health outcomes result from their efforts. The AAA intends to continue support of these effective mechanisms of health management and will seek out additional opportunities with proven strategies.

In addition, the AAA is a partner in the OSA effort to provide interventions, education, supports and services for caregivers through the Savvy Caregiver Program in three counties (Alpena, Cheboygan, Otsego) of its service area. The Family Caregiver Alliance has published statistics showing 8.9 million caregivers (20% of adult caregivers) care for someone 50+ years that have dementia. Locally, it is estimated that there are 1,809 caregivers providing assistance to loved ones with dementia in the afore-mentioned three county area alone. The numbers are astounding and demonstrate the need for additional services and supports for caregivers. Unpaid family caregivers will likely continue to be the largest source of long-term care services in the U.S. and are estimated to reach 37 million caregivers by 2050, an increase of 85% from 2000 according to the Family Caregiver Alliance.

Person Centered Thinking/Self Determination:

Region 9 AAA has made the commitment to provide supports and services in a person-centered manner. All supports coordinator staff have received training from the Michigan Department of Community Health and practice within the framework of the "Person-Centered Planning for Community Based Long-Term Care Practice Guidelines for MI Choice Waiver Sites". It is imperative that planning and supports an individual receives is built upon that individual's capacity to engage in activities which promote community life and honor the individual's preferences, choices and abilities.

Person-Centered training has also been provided for Intake staff by the Michigan Office of Services to the Aging. As part of its Nursing Home Diversion grant, OSA provided training to all of its grantees. However, because OSA had additional training capacity available, non-grantees were also invited to participate in the training opportunity. Intake staffs are charged with the important task of providing information and referral for all persons seeking services and supports. They are the front line entry point for pre-eligibility screening and present the first impression of the agency. It is critical that they are provided the tools necessary to make every individual contact feel respected and that they are provided options and information in a manner that is meaningful to them.

Building upon the commitment for person-centered planning, the AAA implemented the self-determination option under the MI Choice Waiver Program at the end of fiscal year 2008. Currently six program participants are engaged in this option under the Waiver and all report significant satisfaction in the arrangement. Each current participant is offered the opportunity for self-determination upon enrollment or reassessment. Overall enrollment has been slow due to limited enrollment in the Waiver Program because of a waiting list for services.

In conjunction with the principles outlined in Project 2020, the AAA will be building capacity for person-centered thinking and self-determination within its provider pool as part of its future planning options particularly for individuals seeking long term care services and supports, but also in a manner that supports person-centered access for information in all aspects of the aging network.

## **SECTION VI: ADVOCACY STRATEGY**

A key component in the mission of Region 9 Area Agency on Aging is advocacy for older persons. This is accomplished through a myriad of avenues at the local, state and federal levels. The AAA also encourages its regional advisory council, policy board, and community partners to engage in advocacy efforts to ensure issues important to seniors are kept in the forefront and that legislative decisions are considered knowing the potential positive and negative effects to seniors. Thus, national and state legislation is monitored by the Michigan Senior Advocates Council as well as AAA staff that maintains communications with legislative offices. The Northeast Michigan Regional Council on Aging acts as a review and advocacy body to the NEMCSA Board of Directors.

The AAA has also established a consumer advisory council, which works not only to advocate on legislative issues, but provides input and guidance for ensuring a person-centered focus to the AAA as it provides supports and services to individuals in need of long term care. Representation of a wide range of partners is evident in the group composition including a nursing home, human service agency, in-home service provider, COA, advocacy agency, AAA staff as well as a majority of caregivers and program participants.

Efforts will continue to promote communities for a lifetime. Within the twelve county region, two communities have been successful in achieving state recognition for their strides in preparing their communities for the life span of its residents. The AAA will seek out additional communities in need of technical assistance in pursuing opportunities that enhance choices for independence.

The AAA will also work with local entities in an effort to coordinate all stakeholders, service networks, local government and older persons for the purpose of achieving a coordinated system of information, referral and access to services. The implementation of a 211 telephone information and assistance system in Northeast Michigan will provide a step in the right direction to achieving a single point of entry for long term care services and supports as well as other community resources and programs.

The Medicare Medicaid Assistance Program and the Long Term Care Ombudsman Program continue to be important pieces of the AAA's advocacy strategy. At the heart of both programs is dedicated staff and strong commitment from community volunteers as well as the local Councils/Commissions on Aging. MMAP volunteers are well-trained in the intricacies of Medicare, Medicaid, prescription drug plans and other public benefits. They assist persons with questions or problems and help provide outreach for other program resources such as the MI Café Program, Veteran's benefits, and low income subsidies. The Long Term Care Ombudsman volunteers are instrumental in helping to maintain a visible presence and access to nursing home residents and staff for the purpose of ensuring residents' rights and resolution of complaints. The AAA will continue to support and recruit volunteers for both of these programs.

The AAA recognizes the importance of being involved in organizations which have an impact on the lives of older persons. Therefore, the AAA will continue its memberships and positions on boards including the following organizations: Michigan Guardianship Association, Best Practices of Northern Michigan, Greater Michigan Chapter Alzheimer's Association, Meals on Wheels Association of Michigan, National Association of Nutrition and Aging Services Programs, Michigan Association of Nutrition and Aging Services Program, American Dietetic Association, Michigan Adult Day Services Association, Michigan Parkinson's Foundation, Michigan Dementia Education Network, National Association of Area Agencies on Aging, Area Agencies on Aging Association of Michigan, Michigan Senior Advocates, American Society on Aging, Northeast Coalition for the Prevention of Homelessness and Hunger, Alcona County Emergency Food and Shelter Grant Board, Northeast Michigan Home Care Coalition, Cheboygan Area Senior Advocates, and the District Health Dept. #4 Home Health Advisory Council.

Advocacy efforts will continue to support community based care programs. Many studies have demonstrated the cost effectiveness and preferred option of person-centered, community based care services and supports; however, public policy and funding has not always followed suit and programs are often operating in underfunded and under-supported modes. The AAA will continue to work with partners to develop creative strategies to assure individuals are provided the most appropriate and desired level of care in the individual's setting of choice. The AAA will support the continued efforts of long-term care rebalancing on a statewide basis.

## **SECTION VII: COMMUNITY FOCAL POINTS**

Region 9 Area Agency on Aging uniformly funds the following services through funding to the focal points: Homemaker, Personal Care, Respite, Congregate Meals, Home Delivered Meals, National Family Caregiver Support, and Disease Prevention Health Promotion. Additionally, Alpena, Arenac, Cheboygan and Otsego Counties receive The Merit Award funding to provide Adult Day Services.

Population figures are based on the 2006 census data estimates.

<b>Name</b>	<b>NEMCSA - Region 9 Area Agency on Aging</b>
<b>Address</b>	<b>2375 Gordon Road, Alpena, MI 49707</b>
<b>Website</b>	<a href="http://www.nemcsa.org">www.nemcsa.org</a>
<b>Telephone Number</b>	<b>989-356-3474</b>
<b>Contact Person</b>	<b>Laurie Sauer, AAA Director</b>
<b>Service Boundaries</b>	<b>12 Counties in the PSA</b>
<b>Number of persons within boundary</b>	<b>60+ population = 62,268</b>
<b>Services Provided</b>	<b>LTC Ombudsman, Elder Abuse Prevention, Medication Management, Health Promotion, Legal Services, Care Management, MI Choice Waiver and those services listed at the bottom of this page.</b>

<b>Name</b>	<b>Care Management Program</b>
<b>Address</b>	<b>2569 US-23 S, Alpena, MI 49707</b>
<b>Website</b>	<a href="http://www.nemcsa.org">www.nemcsa.org</a>
<b>Telephone Number</b>	<b>1-800-219-2273 ext. 231</b>
<b>Contact Person</b>	<b>Rebecca Hawks, Intake Specialist</b>
<b>Service Boundaries</b>	<b>Alcona, Alpena, Montmorency and Presque Isle</b>
<b>Number of persons within boundary</b>	<b>60+ population = 18,929</b>
<b>Services Provided</b>	<b>Person-centered support, services and coordination</b>

<b>Name</b>	<b>Care Management Program</b>
<b>Address</b>	<b>630 Progress Street, Suite 100, West Branch, MI 48661</b>
<b>Website</b>	<a href="http://www.nemcsa.org">www.nemcsa.org</a>
<b>Telephone Number</b>	<b>1-877-345-1975</b>
<b>Contact Person</b>	<b>Bonnie Holstine, Intake Specialist</b>
<b>Service Boundaries</b>	<b>Arenac, Crawford, Iosco, Ogemaw, Oscoda and Roscommon</b>
<b>Number of persons within boundary</b>	<b>60+ population = 31,766</b>
<b>Services Provided</b>	<b>Person-centered support, services and coordination</b>

<b>Name</b>	<b>Care Management Program</b>
<b>Address</b>	<b>520 N. Main Street, Suite 206A, Cheboygan, MI 49721</b>
<b>Website</b>	<a href="http://www.nemcsa.org">www.nemcsa.org</a>
<b>Telephone Number</b>	<b>1-800-211-1002</b>
<b>Contact Person</b>	<b>Kelly Penfield, Intake Specialist</b>
<b>Service Boundaries</b>	<b>Cheboygan and Otsego Counties</b>
<b>Number of persons within boundary</b>	<b>60+ population = 11,573</b>
<b>Services Provided</b>	<b>Person-centered support, services and coordination</b>

<b>Name</b>	<b>Alcona County Commission on Aging</b>
<b>Address</b>	<b>P.O. Box 218, 207 Church Street, Lincoln, MI 48742</b>
<b>Website</b>	<a href="http://www.alconaseniors.org">www.alconaseniors.org</a>
<b>Telephone Number</b>	<b>1-800-818-7898</b>
<b>Contact Person</b>	<b>Lynn Hinojosa, Director</b>
<b>Service Boundaries</b>	<b>Alcona County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 4,156</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Alpena Area Senior Citizens Council</b>
<b>Address</b>	<b>501 River Street, Alpena, MI 49707</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>1-888-251-1082</b>
<b>Contact Person</b>	<b>Grace Marshall, Director</b>
<b>Service Boundaries</b>	<b>Alpena County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 7,212</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support, Disease Prevention Health Promotion and Adult Day Services.</b>

<b>Name</b>	<b>Alpena County Commission on Older Persons</b>
<b>Address</b>	<b>Alpena County Courthouse, 720 W. Chisholm, Alpena, MI 49707</b>
<b>Website</b>	<a href="http://www.alpenacounty.org">www.alpenacounty.org</a>
<b>Telephone Number</b>	<b>989-354-9500</b>
<b>Contact Person</b>	<b>Tammy Bates, Board Secretary</b>
<b>Service Boundaries</b>	<b>Alpena County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 7,212</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support, Disease Prevention Health Promotion and Adult Day Services.</b>

<b>Name</b>	<b>Sunrise Side Senior Services</b>
<b>Address</b>	<b>131 Clyde, Omer, MI 48749</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>1-888-370-7184</b>
<b>Contact Person</b>	<b>Karen Pitylak, Director</b>
<b>Service Boundaries</b>	<b>Arenac County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 3,991</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support, Disease Prevention Health Promotion and Adult Day Services.</b>

<b>Name</b>	<b>Cheboygan County Council on Aging</b>
<b>Address</b>	<b>1531 Sand Road, Cheboygan, MI 49721</b>
<b>Website</b>	<a href="http://www.3coa.com">www.3coa.com</a>
<b>Telephone Number</b>	<b>231-627-7234</b>
<b>Contact Person</b>	<b>Mike Bur, Director</b>
<b>Service Boundaries</b>	<b>Cheboygan County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 6,657</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support, Disease Prevention Health Promotion and Adult Day Services.</b>

<b>Name</b>	<b>Wolverine Senior Center</b>
<b>Address</b>	<b>6270 Wolverine Road, Wolverine, MI 49799</b>
<b>Website</b>	<a href="http://www.3coa.com">www.3coa.com</a>
<b>Telephone Number</b>	<b>231-525-8969</b>
<b>Contact Person</b>	<b>Gail Tinker, Site Manager</b>

<b>Name</b>	<b>Crawford County Commission on Aging</b>
<b>Address</b>	<b>308 Lawndale Street, Grayling, MI 49738</b>
<b>Website</b>	<a href="http://www.crawfordcoa.org">www.crawfordcoa.org</a>
<b>Telephone Number</b>	<b>989-348-7123</b>
<b>Contact Person</b>	<b>Alice Snyder, Director</b>
<b>Service Boundaries</b>	<b>Crawford County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 3,352</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Iosco County Commission on Aging</b>
<b>Address</b>	<b>P.O. Box 160, 413 E. Main Street, Hale, MI 48739</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-728-6484</b>
<b>Contact Person</b>	<b>Julie Ann Jones, Director</b>
<b>Service Boundaries</b>	<b>Iosco County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 7,910</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Hale Senior Center</b>
<b>Address</b>	<b>310 N. Washington, Hale, MI 48739</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-728-4251</b>
<b>Contact Person</b>	<b>Dale Sabino, Center Manager</b>

<b>Name</b>	<b>Oscoda Senior Center</b>
<b>Address</b>	<b>653 State Street, Oscoda, MI 48750</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-739-3668</b>
<b>Contact Person</b>	<b>Helen Kaiser, Center Manager</b>

<b>Name</b>	<b>Tawas Senior Center</b>
<b>Address</b>	<b>312 Newman Street, East Tawas, MI 48730</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-362-6892</b>
<b>Contact Person</b>	<b>Catherine Warnez, Center Manager</b>

<b>Name</b>	<b>Montmorency County Commission on Aging</b>
<b>Address</b>	<b>P.O. Box 788, 11463 McArthur Road, Atlanta, MI 49709</b>
<b>Website</b>	<a href="http://www.mccoa.info">www.mccoa.info</a>
<b>Telephone Number</b>	<b>989-785-2580</b>
<b>Contact Person</b>	<b>Stacy Carroll, Director</b>
<b>Service Boundaries</b>	<b>Montmorency County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 3,326</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Atlanta Senior Center</b>
<b>Address</b>	<b>P.O. Box 565, 11780 M-33 N., Atlanta, MI 49709</b>
<b>Website</b>	<a href="http://www.mccoa.info">www.mccoa.info</a>
<b>Telephone Number</b>	<b>989-785-3932</b>
<b>Contact Person</b>	<b>Stacy Carroll, Director</b>

<b>Name</b>	<b>Hillman Senior Center</b>
<b>Address</b>	<b>431 Pineview Court, Hillman, MI 49746</b>
<b>Website</b>	<a href="http://www.mccoa.info">www.mccoa.info</a>
<b>Telephone Number</b>	<b>989-742-3013</b>
<b>Contact Person</b>	<b>Stacy Carroll, Director</b>

<b>Name</b>	<b>Lewiston Senior Center</b>
<b>Address</b>	<b>P.O. Box 552, 2811 Kneeland Street, Lewiston, MI 49756</b>
<b>Website</b>	<a href="http://www.mccoa.info">www.mccoa.info</a>
<b>Telephone Number</b>	<b>989-786-3124</b>
<b>Contact Person</b>	<b>Stacy Carroll, Director</b>

<b>Name</b>	<b>Ogemaw Commission on Aging</b>
<b>Address</b>	<b>205 S. 8<sup>th</sup> Street, West Branch, MI 48661</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-345-5300</b>
<b>Contact Person</b>	<b>Carol Gillman, Director</b>
<b>Service Boundaries</b>	<b>Ogemaw County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 5,768</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Skidway Lake Senior Center</b>
<b>Address</b>	<b>2777 Greenwood Road, Prescott, MI 48756</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-873-3305</b>
<b>Contact Person</b>	<b>Mary Jones, Center Manager</b>

<b>Name</b>	<b>Page Street Senior Center</b>
<b>Address</b>	<b>130 Page Street, West Branch, MI 48661</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-345-1710</b>
<b>Contact Person</b>	<b>Cindy Hurd, Center Manager</b>

<b>Name</b>	<b>Oscoda County Council on Aging</b>
<b>Address</b>	<b>429 Mt. Tom Road</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-826-3025</b>
<b>Contact Person</b>	<b>Mark Grantner, Director</b>
<b>Service Boundaries</b>	<b>Oscoda County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 2,619</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>

<b>Name</b>	<b>Otsego County Commission on Aging</b>
<b>Address</b>	<b>120 Grandview Boulevard, Gaylord, MI 49735</b>
<b>Website</b>	<b><a href="http://www.otsegocountycoa.org">www.otsegocountycoa.org</a></b>
<b>Telephone Number</b>	<b>989-732-1122</b>
<b>Contact Person</b>	<b>Dona Wishart, Ex. Director Dale Gehman, Director</b>
<b>Service Boundaries</b>	<b>Otsego County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 4,916</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support, Disease Prevention Health Promotion and Adult Day Services.</b>

<b>Name</b>	<b>Presque Isle County Council on Aging</b>
<b>Address</b>	<b>6520 Darga Highway, Posen, MI 49776</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-766-8191</b>
<b>Contact Person</b>	<b>Barbara Nagi, Director</b>
<b>Service Boundaries</b>	<b>Presque Isle County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 4,235</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>
<b>Name</b>	<b>Onaway Senior Center</b>
<b>Address</b>	<b>4203 S. Lynn Street, Onaway, MI 49765</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>989-733-2559</b>
<b>Contact Person</b>	<b>Marilyn LeFave, Site Manager</b>

<b>Name</b>	<b>Roscommon County Commission on Aging</b>
<b>Address</b>	<b>2625 Townline Road, Houghton Lake, MI 48629</b>
<b>Website</b>	<a href="http://www.roscommoncounty.net">www.roscommoncounty.net</a>
<b>Telephone Number</b>	<b>989-366-0205</b>
<b>Contact Person</b>	<b>Carolyn Moore, Director</b>
<b>Service Boundaries</b>	<b>Roscommon County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 8,126</b>
<b>Services Provided</b>	<b>Homemaker, Personal Care, Respite, Congregate and Home Delivered Meals, National Family Caregiver Support and Disease Prevention Health Promotion.</b>
<b>Name</b>	<b>Houghton Lake Senior Center</b>
<b>Address</b>	<b>Same as COA above</b>
<b>Website</b>	<a href="http://www.roscommoncounty.net">www.roscommoncounty.net</a>
<b>Telephone Number</b>	<b>989-366-0205</b>
<b>Contact Person</b>	<b>Sharon Symons, Center Manager</b>
<b>Name</b>	<b>Roscommon Senior Center</b>
<b>Address</b>	<b>510 South Street, Roscommon, MI 48653</b>
<b>Website</b>	<a href="http://www.roscommoncounty.net">www.roscommoncounty.net</a>
<b>Telephone Number</b>	<b>989-275-8421</b>
<b>Contact Person</b>	<b>Hugh Haeffner, Center Manager</b>
<b>Name</b>	<b>St. Helen Senior Center</b>
<b>Address</b>	<b>10493 East Airport Road, St. Helen, MI 48656</b>
<b>Website</b>	<a href="http://www.roscommoncounty.net">www.roscommoncounty.net</a>
<b>Telephone Number</b>	<b>989-389-7551</b>
<b>Contact Person</b>	<b>Liz Dunaj, Center Manager</b>

<b>Name</b>	<b>The Caring Place Adult Day Services</b>
<b>Address</b>	<b>100 Woods Circle, Alpena, MI 49707</b>
<b>Website</b>	<a href="http://www.dhd4.org/tcpadc.htm">www.dhd4.org/tcpadc.htm</a>
<b>Telephone Number</b>	<b>989-358-7928</b>
<b>Contact Person</b>	<b>Karol Cain, Director</b>
<b>Service Boundaries</b>	<b>Alcona, Alpena, Montmorency and Presque Isle</b>
<b>Number of persons within boundary</b>	<b>60+ population = 18,929</b>
<b>Services Provided</b>	<b>Adult Day Care Services.</b>

<b>Name</b>	<b>Pleasant Days Adult Day Services</b>
<b>Address</b>	<b>131 Clyde, Omer, MI 48749</b>
<b>Website</b>	<b>None</b>
<b>Telephone Number</b>	<b>1-888-370-7184</b>
<b>Contact Person</b>	<b>Karen Pitylak, Director</b>
<b>Service Boundaries</b>	<b>Arenac County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 3,991</b>
<b>Services Provided</b>	<b>Adult Day Care Services.</b>

<b>Name</b>	<b>Sand Castles Adult Day Services</b>
<b>Address</b>	<b>1531 Sand Road, Cheboygan, MI 49721</b>
<b>Website</b>	<b><a href="http://www.3coa.com">www.3coa.com</a></b>
<b>Telephone Number</b>	<b>231-597-8317</b>
<b>Contact Person</b>	<b>Mike Bur, Director</b>
<b>Service Boundaries</b>	<b>Cheboygan County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 6,657</b>
<b>Services Provided</b>	<b>Adult Day Care Services.</b>

<b>Name</b>	<b>Otsego Haus Adult Day Services</b>
<b>Address</b>	<b>95 Livingston Boulevard, Gaylord, MI 49735</b>
<b>Website</b>	<b><a href="http://www.otsegocountycoa.org">www.otsegocountycoa.org</a></b>
<b>Telephone Number</b>	<b>989-732-1122</b>
<b>Contact Person</b>	<b>Dona Wishart, Executive Director</b>
<b>Service Boundaries</b>	<b>Otsego County</b>
<b>Number of persons within boundary</b>	<b>60+ population = 4,916</b>
<b>Services Provided</b>	<b>Adult Day Care Services.</b>

## **GLOSSARY OF ACRONYMS**

AAA	Area Agency on Aging
AAAAM	Area Agency on Aging Association of Michigan
AARP	American Association of Retired Persons
AD	Alzheimer's Disease
ADC	Adult Day Care
ADRC	Aging and Disability Resource Center
ADS	Adult Day Service
ADL	Activities of Daily Living
AFC	Adult Foster Care
AG	Attorney General
AIM	Aging in Michigan (OSA Publication)
AIP	Annual Implementation Plan
AIS	Aging Information System
ALF	Assisted Living Facility
4AM	Area Agencies on Aging Association of Michigan
AoA	Administration on Aging
APS	Adult Protective Services
BEAM	Bringing the Eden Alternative to the Midwest
ASA	American Society on Aging
CAP	Community Action Program
CBC	Citizens for Better Care
CM	Care Management
CMIS	Client Management Information System
CMS	Center for Medicare & Medicaid Services (formerly HCFA)
CNS	Corporation for National Service
COA	Commission on Aging/Council on Aging
CPHA	Community Public Health Agency
CR	Caregiver Respite (state)
CSA	Commission on Services to the Aging
DCH	Department of Community Health
DCIS/CIS	Department of Consumer and Industry Services
DHHS/HHS	U.S. Department of Health and Human Services
DHS	MI Dept. of Human Services (formerly the Family Independence Agency)
DMB	Department of Management and Budget

DoE	Department of Education
DoL	Department of Labor
DoT	Department of Transportation
DV	Domestic Violence
ELM	ElderLaw of Michigan
FGP	Foster Grandparent Program
FTC	Federal Trade Commission
FY	Fiscal Year
GAO	General Accounting Office
HB	House Bill (state)
HCBS/ED	Home & Community Based Services for the Elderly and Disabled Waiver (HCBS/ED) program commonly known as MIChoice
HDM	Home Delivered Meals
HMO	Health Maintenance Organization
HR	House Bill (federal)
HSA	Health Systems Agency
I&A	Information and Assistance
I&R	Information and Referral
IADL	Independent Activities of Daily Living
IM	Information Memorandum
IoG	Institute of Gerontology
LEP	Limited English Proficiency
LSP	Legal Services Program
LTC	Long-Term Care
MADSA	Michigan Adult Day Services Association
MATF	Merit Award Trust Fund (formerly known as “Tobacco Settlement”)
MCO	Managed Care Organization
MHSCC	Michigan Hispanic Senior Citizens Coalition
MIACoA	Michigan Indian Advisory Council on Aging
MICIS	MI Choice Information System
MIS	Management Information System
MLSC	Michigan Legal Services Corporation
MMAP	Medicare/Medicaid Assistance Program
MSA	Medical Services Administration
MSAC	Michigan Senior Advocates Council
MSC	Michigan Senior Coalition (formerly Senior Power Day)

MSHDA	Michigan State Housing Development Authority
MSG	Michigan Society of Gerontology
MQCCC	Michigan Quality Community Care Council
MYP	Multi-Year Plan
N4A	National Association of Area Agencies on Aging
NAPIS	National Aging Programs Information System
NASUA	National Association of State Units on Aging
NCBA	National Center on Black Aged
NCOA	National Council on Aging
NCSC	National Council of Senior Citizens
NF	Nursing Facility
NFA	Notification of Financial Assistance
NFCSP	National Family Caregiver Support Program
NIA	National Institute on Aging
NISC	National Institute of Senior Citizens
NSSC	National Senior Service Corps
OAA	Older Americans Act
OAVP	Older American Volunteer Program
OHDS	Office of Human Development Services
OMB	Office of Management and Budget (federal)
OSA	Office of Services to the Aging
OWL	Older Women's League
PA	Public Act
PI	Program Instruction
PRR	Program Revision Request
PSA	Planning and Service Area
PY	Program Year
RFP	Request For Proposal
RSVP	Retired & Senior Volunteer Program
SAC	State Advisory Council
SB	Senate Bill (state)
SCP	Senior Companion Program
SCSEP	Senior Community Service Employment Program
SEAQRT	Senior Exploitation and Abuse Quick Response Team
SGA	Statement of Grant Award
SMSA	Standard Metropolitan Statistical Area

SNF	Skilled Nursing Facility
SPE	Single Point of Entry
SR	Senate Bill (federal)
SS	Social Security
SSA	Social Security Administration
SSI	Supplemental Security Income
SUA	State Unit on Aging
TA	Technical Assistance
TCM	Targeted Case Management
USDA	United States Department of Agriculture
VA	Veterans' Administration
WHCoA	White House Conference on Aging
WOW	Wider Opportunities for Women

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