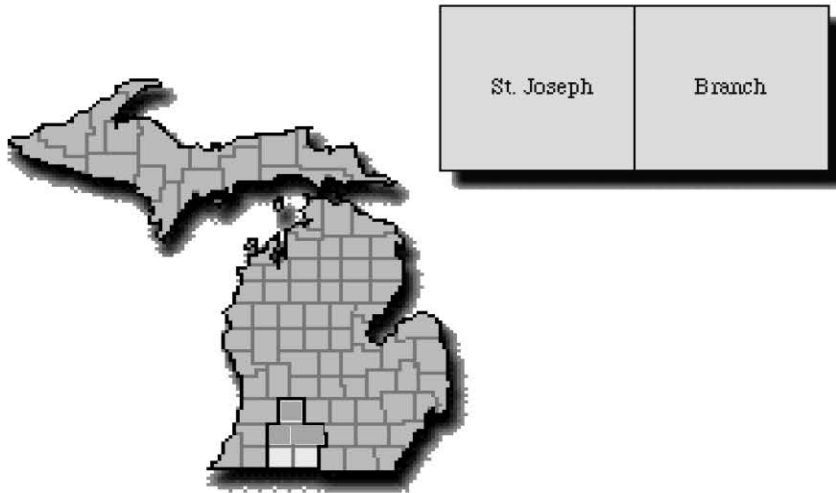


FY 2024 ANNUAL IMPLEMENTATION PLAN

BRANCH-ST. JOSEPH AREA AGENCY ON AGING 3-C



Planning and Service Area

Branch, St. Joseph

Branch-St. Joseph Area Agency on Aging 3-C

Branch-St. Joseph
Community Health Agency
570 N. Marshall Road
Coldwater, MI 49036
517-278-2538 (phone)
888-615-8009 (toll-free)
517-278-2494 (fax)
Rebecca A. Burns, Health Officer
Laura Sutter, Director
Area Agency on Aging
www.bhsj.org/aaa

Field Representative Ashley Ellsworth

EllsworthA2@michigan.gov
517-294-9680

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Executive Summary

Include a summary that describes the AAA and the implementation plan including a brief description of the PSA (to include older adults in greatest economic need, minority, and/or non-English speaking), the AAA's mission, and primary focus for FY 2024.

Instructions

Please include in the Executive Summary a brief description of the following: The PSA and any significant changes to the current area plan.

A.) Any significant new priorities, plans or objectives set by the AAA for the use of (OAA) and state funding during FY 2024. If there are no new activities or changes, note that in your response.

B.) Any permanent changes to the AAA's operations based on the COVID-19 pandemic. In addition, please describe how the AAA is utilizing its American Rescue Plan Act (ARPA) funding.

C.) Current information about contingency planning for potential reduced federal funding (if plans include the pursuit of alternative funding, identify specific funding sources).

D.) A description of progress made through advocacy efforts to date and focus of advocacy efforts in FY 2024.

E.) A brief description of AAA's successes over the past year and any anticipated challenges for FY 2024.

The Branch-St. Joseph AAA mission is to provide a full range of high-quality services, programs and opportunities which promote the independence and dignity of older adults while supporting those who care for them throughout Branch and St. Joseph Counties. As an autonomous department within the Branch-Hillsdale-St. Joseph Community Health Agency, our agency has held this mission since our designation as an Area Agency on Aging in 1996. We are one of 16 AAAs in the State of Michigan responsible for administering Older Americans Act and Older Michiganians Act funding to address the needs of older adults age 60 and over, and family caregivers living in Branch and St. Joseph Counties. Our Vision states: We envision inclusive communities filled with enriching activities and opportunities for older adults. Where people who have questions or needs can find assistance and support in a manner that suits their preferences.

Our Values include:

1. We place the people we serve at the center of our operations , honoring their preferences and privacy.
2. We assure efficient use of public and private resources.
3. We develop programs and services using an inclusive process to promote healthy aging and livable communities for all ages.
4. We exhibit strong leadership which responds to changing needs and fosters collaboration and cooperation throughout the communities we serve.
5. We use effective communication to carry out our mission and vision in an open , respectful and unbiased manner.

The two-county planning and service area (PSA) is completely rural, yet we have a diverse population and

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a wide continuum of agencies providing supports and services. One of our biggest strengths, and most poignant over the past three years, has been our organizational structure as being a division within local public health. Handling a pandemic alongside a team of public health officials is much different than being a separate entity! Some of the lessons learned throughout 2020, 2021, 2022 and now 2023 have permanently shaped and reaffirmed our place here, within the Community Health Agency. We continue to respond to inquiries related to the vaccine, testing and accessing health care services. We continue to answer these calls, live. We continue person-centered information & assistance, referral and over the phone options counseling with families, individuals and professional seeking answers. We will continue to serve vulnerable adults who've been victims of abuse, neglect and/or exploitation through our Victim Assistance Program funded by the MDHHS Division of Victim Services. All of these projects and core functions remain what we're most proud of in PSA IIIC.

Friendly Reassurance calls and Gap Filling services have continued and addressed unique situations & needs among those individuals who reside alone and without many family supports. Further, the community partnerships that were built as we addressed food insecurity, housing emergencies and service delays have remained intact and further leveraged to support ongoing needs. We've also continued to focus on immunization support among adult foster care homes and homes for the aged. By coordinating communication, the facilities' needs for the type of immunization and the health department clinic team and mobile clinic unit, we have been able to offer the supports on-site to staff, residents and families/friends. Additional marketing and outreach will continue into 2024 focusing on immunization supports available through the Community Health Agency clinic division.

The American Rescue Plan Act (ARPA) funding was spent nearly entirely in FY2022. Our regions direct service providers were very motivated to spend the funding to support unique supply needs, offset additional program costs, provide additional units of service, and purchase equipment to replace many aged items. New home delivered meal delivery vehicles were purchased as well as kitchen equipment for the production of home made meals. There were investments at both County Commissions on Aging for software to track activities and support operations, as well as try new programs to support emerging needs among adults with chronic conditions. SAIL, Bingocize and Arthritis Aquatics were newer evidence-based programs that were supported with ARPA funds. The remaining funds will be utilized in FY23 and FY24, including the welcomed administrative funds which will support our extended operational efforts during and post-pandemic as well as ongoing outreach and support to our community partners.

The Plan does not outline any significant new priorities, plans or major objectives for the use of Older Americans Act (OAA) or state funding during FY 2024. As always, we will continue to work transparently with providers, the ACLS Bureau and our leadership team to address local needs and utilize federal and state funds in an efficient manner. Advocacy efforts are underway to develop new relationships with our elected officials in the State Legislature and US Congress. We utilize our established relationships with fellow AAA's, our state AAA Association, the Michigan Senior Advocates Council and local Advisory Committee members to share our local stories, invite legislators to local events and also participate in home visits when possible. FY2024 will be a continuation of these efforts both locally and in Lansing with legislators and their staff. There will be many messages delivered about planning for the end of the ARPA funding and how the network will move forward without these additional dollars. FY2024 could be the beginning of those funding challenges in Region IIIC, as again, many of our ARPA funds are expended yet demand remains.

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Our budget, program development objectives & updates and Access Services narratives encompass the sentiments of our communities and community partners. We remain diligent and committed to serving those greatest in social and/or financial need in a manner that is respectful of their preferences and goals. Working in conjunction with a dynamic array of service providers and community partners at the local level, we intend to maintain high quality and accessible services for all who may seek assistance.

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County/Local Unit of Government Review

COUNTY/LOCAL UNIT OF GOVERNMENT REVIEW

The Area Agency on Aging (AAA) must send a request to the chairperson of each County Board of Commissioners. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation, no later than June 30, 2023. For a Planning and Service Area (PSA) comprised of a single county or portion of the county, approval of the AIP is to be requested from each local unit of government. If the AAA does not receive a response from the county and/or local unit of government by July 20, 2023, the AIP is deemed passively approved. The AAA must notify their Bureau of Aging, Community Living, and Supports (ACLS Bureau) Field Representative by July 21, 2023, whether their counties and/or local units of government formally approved, passively approved, or disapproved the AIP.

The AAA may use electronic communication, including email and website-based documents, as an option for acquiring local government review and approval of the AIP. To employ this option, the AAA must do the following:

- A.) Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft AIP on the AAA's website. Instructions for how to view and print the document must be included.
- B.) Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via email, if requested.
- C.) Be available to discuss the AIP with local government officials, if requested.
- D.) Request email notification from the local unit of government of their approval of the AIP or their related concerns.

Instructions

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate county and/or local units of government to gain support.

TRIBAL NOTIFICATION

The Michigan Department of Health and Human Services (MDHHS) has an established relationship of working directly with the Federally Recognized Sovereign Indian Tribes of Michigan (Tribes). As part of this work, MDHHS recognizes the importance of Tribal notification including consultation of the complete AIP for each AAA within their PSA to encourage and foster collaboration between Title III and Title VI programming as outlined in the Older Americans Act (OAA).

AAAs, please send an official notification of your complete AIP for any Tribe(s) within your PSA for their review and consultation. If there are no Tribes within the PSA, please indicate that in your response and if a Tribe crosses more than one PSA, each AAA is still expected to send their AIP. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation,

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no later than June 30, 2023. The AAA will notify their ACLS Field Representative by July 21, 2023, of any comments or feedback received from their Tribe(s). If no comments or feedback received, please indicate that in your response.

The AAA may use electronic communication, including email and website-based documents, as an option for Tribe notification and consultation of the AIP. To employ this option, the AAA must do the following:

A.) Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the Chairperson of the Tribal Council advising them of the availability of the final draft AIP on the AAA's website. Instructions for how to view and print the document must be included.

B.) Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via email, if requested.

C.) Be available to discuss the AIP with Tribal elders and/or Tribal officials, if requested.

D.) Request email notification from the Tribe of their comments and feedback of the AIP or their related concerns.

Instructions

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate Tribe(s) within your PSA for notification and consultation. Describe any current and future collaborative efforts with Tribe(s) within your PSA. If no collaborative efforts planned, note that in your response.

The Branch-St. Joseph Area Agency on Aging (AAA) is an autonomous department within the Branch-Hillsdale-St. Joseph Community Health Agency (CHA). The CHA Board of Health serves as the AAA Policy Board. The Board is comprised of two County Commissioners from each county in the public health jurisdiction. The DRAFT FY2024 Area Implementation Plan (AIP) was formally sent to the Board of Health's Program, Policy and Appeals Committee on May 10, 2023 in preparation for their formal meeting on May 17, 2023. The Advisory Committee members received an electronic copy on May 2nd in advance of the Public Hearing being held on May 8, 2023. Discussion about the Plans began in February 2023, with the Director offering monthly updates to Board and Advisory Committee members along with encouragement to share input, pose questions, and attend the Public Hearing in Coldwater.

In regard to County Board of Commissioners review of the 2024 Annual Implementation Plan, the AIP was sent via electronic mail to Branch and St. Joseph County Board of Commissioners on June 1, 2023 for review and approval. <<< COMPLETE REMAINING DETAILS OF COUNTY REVIEW/PRESENTATION REQUEST >>>

The Branch-St. Joseph AAA Director will share feedback and any subsequent County action taken with our ACLS Bureau field representative .

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Public Hearings

At least one public hearing on the FY 2024 AIP must be held in the PSA. Hearing(s) must be made accessible to all. Persons need not be present at the hearing(s) to provide testimony. E-mail and written testimony must be accepted for at least a 30-day period beginning when the summary of the AIP is made available.

The AAA must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the public about the hearing(s). Acceptable posting methods include, but are not limited to: paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA; as well as news sources geared toward communities of color, tribal, Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+), immigrant communities and/or other underrepresented groups; presentation on the AAA's website, along with communication via email and social media referring to the notice; press releases and public service announcements; and a notice to AAA partners, service provider agencies, older adult organizations, and local units of government. See *Operating Standards for AAAs, Section B-2 #3*. The public hearing notice should be available at least 30 days in advance of the scheduled hearing. This notice must indicate the availability of a summary of the AIP at least 14 days prior to the hearing, along with information on how to obtain the summary. All components of the AIP should be available for the public hearing(s).

Instructions

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

In addition, the AAA should also upload into AMPS a copy of your official notice and/or press release(s) for a public hearing. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and any impacts on the AIP. Describe how the AAA factored the accessibility issues of the service population and others in choosing the format of the meeting.

Date	Location	Time	Barrier Free?	No. of Attendees
05/08/2023	Branch-Hillsdale-St. Joseph C	10:00 AM	Yes	2

The Branch-St. Joseph Area Agency on Aging utilized multiple methods to encourage public and community partner input on the AIP. The Public Hearings were advertised, 30 days in advance, as "public notice ads" in our three (3) main newspapers in the PSA: Three Rivers Commercial News, Sturgis Journal and Coldwater Daily Reporter. These print and electronic news outlets also coincide with our community focal points. The affidavit's for publication are also attached in the "budget and other documents" section of the AIP. Aging network providers, the Board of Health (AAA IIIC Policy Board) and the AAA Advisory Committee were also engaged in and sent notices for the Public Hearings.

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Access Services

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Transition Coordination & Support; Care Management; Case Coordination and Support; Options Counseling; Disaster Advocacy and Outreach Programs; Information and Assistance; Outreach, with specific attention to outreach with underserved populations, and Merit Award Trust Fund/State Caregiver Support-funded transportation. If the AAA is planning to provide any of the above noted access services directly during FY 2024, complete this section.

Instructions

Select from the list of access services those services the AAA plans to provide directly during FY 2024, and provide the information requested. Specify, in the appropriate text box for each service category, the planned goals and activities that will be undertaken to provide the service.

The Area Plan Grant Budget that is uploaded and saved in AMPS must include each access service to be provided directly in the Direct Service Budget details tab. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and state funds) identified in the Area Plan Grant Budget's Support Services Detail tab. The method of provision must be specified in the Service Summary tab.

Care Management

<u>Starting Date</u>	10/01/2023	<u>Ending Date</u>	09/30/2024
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Total of Federal Dollars	\$54,370.00	Total of State Dollars	\$92,686.00
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Geographic area to be served

Branch and St. Joseph counties

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

Goal #1: Implement more flexible service options in order to provide a more self-directed care model.

Activities:

- ~ Care Consultants will further refine and improve the intake process to assure targeting of appropriate participants to each level of care outlined in the "Access and Service Coordination Continuum"
- ~ Seek additional service providers (purchase of service vendors) to serve participants in Region IIIC
- ~ Communicate continued need for additional flexibility and additional staff from existing service providers to be able to accommodate participants' person-centered support plan/care plan
- ~ Care consultants will discuss with participants adult immunizations (including COVID-19 immunization/boosters, flu, pneumonia and shingles) for themselves, their family members and/or caregivers

Expected Outcomes:

- ~ Increase number of Purchase of Service vendors to serve CLP participants

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- ~ Better identify the needs of individuals through a more comprehensive intake process
- ~ Better meet the needs of participants with additional categories/levels of care available
- ~ Supportive immunization consultation and access for CLP participants and their caregivers intended to increase adult immunizations

Goal #2: Continue staff education and skill building including staff collaboration to better serve victims of elder abuse, neglect and exploitation

Activities:

- ~ Care Consultants will continue to screen/assess participants/victims for current or past abuse, neglect and/or exploitation
- ~ Care Consultants will seek training and education sessions relevant to the prevention of abuse, neglect and/or exploitation

Expected Outcomes:

- ~ Care Consultants will have an increased capacity to build stronger person-centered support plans by including resources and knowledge about abuse, neglect and exploitation
- ~ Care Consultants will continue to build their skill set to provide supports/services and arrange services through attending available state & locally available training events

Goal #3: Minimize wait times for individuals seeking access/care management services

Activities:

- ~ Continue implementation of the tiered approach to Access Services (Care Management funded)
- ~ Care Consultants will complete a thorough intake and referral making process
- ~ Care Consultants will continue to monitor the Waiting List for access services weekly

Expected Outcomes:

- ~ Individuals and caregivers will be referred to alternate resources or be able to obtain services through direct service providers in a more timely manner
- ~ Care Consultants will be able to better identify needed services as a result of implementing the tiered approach

Number of client pre-screenings:	Current Year:	65	Planned Next Year:	70
Number of initial client assessments:	Current Year:	50	Planned Next Year:	55
Number of initial client care plans:	Current Year:	50	Planned Next Year:	55
Total number of clients (carry over plus new):	Current Year:	101	Planned Next Year:	115
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:40	Planned Next Year:	1:40

Information and Assistance

Starting Date 10/01/2023 Ending Date 09/30/2024

Total of Federal Dollars \$2,400.00 Total of State Dollars

Geographic area to be served

Branch and St. Joseph counties

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

Goal #1: Provision of comprehensive, unbiased information & assistance/referral

Activities:

~ Continue to provide referrals according to the ACLS Bureau and national Alliance for Information and Referral Systems (AIRS) standards

~ Continue to update files and maintain data entry into the State of Michigan Aging Information System - ADRCIS database

~ Staff shall complete surveys with (10% as per Information and Assistance standard) callers each quarter to assure high quality information & assistance services

~Staff shall support education efforts among callers regarding immunization , including COVID-19 vaccination/testing/support as well as other adult immunizations, as needed.

Expected Outcomes:

~ Staff will continue to provide the highest quality Information and Assistance /referral services to any person with an inquiry.

~Individuals will experience timely, accurate information to their questions and requests.

Goal #2: Continue ongoing outreach and education activities among local and regional aging/disability network partners and among general community audiences as well.

Activities:

~ Staff shall continue participation in community-based taskforces, workgroups, committee-type partnership meetings to uphold information sharing and resource collaboration.

~ Staff shall continue to share recent and relevant information/resources to all community and aging network partners

~ Staff shall continue to attend and participate in outreach events and seasonal community-based activities throughout the planning and service area.

Expected Outcome:

~ Local and regional aging/disability network partners will continue to seek and receive accurate information from Branch-St. Joseph AAA.

~ Branch St. Joseph AAA will continue to see an increase in Information and Assistance /referral calls

Goal #3: Continue to maintain accurate data and submit accurate data/program reporting related to ACLS

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Bureau Standards and reporting requirements, for inclusion in the statewide resource database and NAPIS reporting tool.

Activities:

~ Staff shall continue to develop and monitor the ADRCIS resource database for accurate data entries , as necessary

~ Staff shall continue to seek updated information through contact with programs , service agencies, and organizations for inclusion in the database

~ Staff shall continue to complete accurate data entry into the database according to the ACLS Bureau standards

Expected Outcome:

All requested and required data and reports will be submitted accurately and timely

Goal #4: Continue to use and promote a person-centered approach

Activities:

~ Staff shall continue to use the person-centered approach in all interactions with callers, families, caregivers, participants and community partners

~ Staff shall continue to be able to explain the person-centered philosophy, providing education where opportunities arise

Expected Outcomes:

~ People contacting and interacting with the Area Agency on Aging IIIC will indicate they have been listened to and responded to with the information/supports they were seeking and according to their preferences

~ Community partners will have an increased awareness of person-centered thinking and its practice within their organizations

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Approved MYP Program Development Objectives

Program development goals and objectives previously set by the AAA and approved by the CSA in this multi-year planning cycle are included as read-only. For each of these established program development objectives, a text box is included for the AAA to provide information on progress toward the objectives to date. This text box is editable.

Instructions

Please provide information on progress to date for each established objective under the section tab entitled "Progress."

For the Diversity, Equity, and Inclusion (DEI), the ACLS Bureau Operating Standards for AAAs have long required that preference be given to serving older persons in greatest social or economic need with particular attention to low-income minority elderly.

Please refer to Operating Standards for AAAs sections C-2 and C-4 along with the Document Library for the ACLS Bureau training completed on Embedding Diversity, Equity & Inclusion (DEI) within Aging Services across Michigan for the MYP 2023-2025 Cycle.

Within the progress tab, ensure to address, at a minimum, the below DEI Program Development Objectives that correlate to the MYP DEI Goal:

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

Objective 1- Increase services provided to Black, Indigenous (tribal) and People of Color (BIPOC) and LGBTQ+ seniors served in your region. ***Please include how the AAA is measuring this progress including how you will ensure that programming and outreach is culturally sensitive and welcoming to all.***

Objective 2- Increase the number of AAA staff, providers, caregivers, and volunteers trained in implicit bias, cultural competencies, and root causes of racism. ***Please include a brief description of how the AAA tracks to ensure the number of individuals trained has increased.***

Objective 3- Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve. ***Please include the top 3 requested linguistic translation services for your PSA. How does the AAA ensure that linguistic translation services are meeting the needs of the older adults within their PSA?***

See Document Library for training PPT and recording of ACLS DEI training completed for the 2023-2025 MYP Cycle.

Area Agency on Aging Goal

A. Work with community partners to develop an adult day program in Branch County.

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Objectives

1. Work to develop a viable community partner to develop an adult day program for individuals and families in Branch County.
Timeline: 10/01/2022 to 09/30/2023

Progress

We've been giving our community partners some "space" in terms of our development and timing to approach them again to discuss a Branch County Adult Day program. We last approached specific contacts in 2019, then the pandemic began in 2020, so we've paused our efforts. Our most viable entity to examine the feasibility of an adult day program is our County Medical Care facility, MapleLawn. We will work to set meetings to discuss these efforts in summer 2023.

B. Provide advocacy, information, and training to support the rights of older/vulnerable adults to live free from abuse, neglect and/or exploitation.

Objectives

1. Increase the awareness of vulnerable adult abuse, neglect and exploitation throughout the PSA via participation in local partnerships, coalitions/task forces, and community groups.
Timeline: 10/01/2022 to 09/30/2023

Progress

FY2023 has been a very busy year for our team in responding to victims of abuse, neglect and exploitation. As of the end of the second quarter, we've served more individuals that we served all of last fiscal year! The third quarter is also off to a busy start, receiving multiple referrals a day for the past 10 business days. Our team has been working diligently to provide victim-centered advocacy, support, resources and safety planning to assure victims stated goals are achieved. Each county's Interdisciplinary Team is meeting monthly, discussing complex cases and working to address community-specific issues related to the prevention of abuse, neglect and exploitation. Ongoing communication and collaboration with local community partners, including law enforcement and other first responders, has been a strongly held priority for our agency. Branch County officials, including our Probate Judge, Prosecutor, mental health, MDHHS, and many other organizations, worked to update and adopt "Branch County Vulnerable Adult Protocol" to address our work as we combat elder justice issues in Branch County. St. Joseph County's Protocol has been in place since 2016 and moving forward with strength!

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

Objectives

1. Assure AAA staff and local aging network providers are trained in diversity, equity and inclusion topics. This will include training topics on how to recognize and address unconscious bias.
Timeline: 10/01/2022 to 09/30/2023

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Progress

In late 2022 and early 2023, AAA staff have completed various trainings surrounding diversity, equity and inclusion. DEI training formally began in 2021 with Bureau-sponsored "Advancing Equity Through Systems Change" training. In November 2022, staff completed Implicit Bias Recognition and Remediation training, hosted by the Community Health Agency. In March 2023 various staff participated in Ableism training, LGBTQ+ Veteran Care training as well as additional hours in dementia-related trainings. During our monitoring visits with providers, we will be discussing their agency's participation in DEI trainings. Monitoring visits begin with our providers in May 2023.

2. Ensure that AAA3C staff and providers use outreach methods which are culturally sensitive and welcoming to all individuals. This targeted outreach includes sensitivity for individuals from other cultures, backgrounds, and whom use other language(s) than English.

Timeline: 10/01/2022 to 09/30/2023

Progress

The AAAIIC brochure is currently being translated into Arabic and Spanish, and is due from the printer any day now as the AIP is being written! Thanks to the ACLS Bureau for supporting our efforts to translate our main outreach tool into languages spoken in our planning & service area.

In May 2023, our provider assessments/monitoring visits will begin. During these visits we will be discussing, observing and noting providers outreach methods including items published, images used, and language used in their materials. More to come on this objective!

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Supplemental Documents

Document A: Policy Board Membership (Required).

Document B: Advisory Council Membership (Required).

SUPPLEMENTAL DOCUMENTS FOR SPECIAL APPROVAL

Select the supplemental document(s) from the list below only if applicable to the AAA's FY 2024 AIP.

Provide all requested information for each selected document. Note that older versions of these documents will not be accepted and should not be uploaded as separate documents.

Document C: Proposal Selection Criteria - should only be completed if there are new or changed criteria for selecting providers (only if applicable).

Document D: Cash-In-Lieu-Of-Commodity Agreement (only if applicable).

Document E: Waiver of Minimum Percentage of a Priority Service Category (only if applicable).

Document F: Request to Transfer Funds (only if applicable).

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SUPPLEMENTAL DOCUMENT A

Board of Directors Membership

	Asian/Pacific Islander	African American	Native American/ Alaskan	Hispanic Origin	Persons with Disabilities	Female	Total Membership
Membership Demographics	1	0	0	0	0	0	6
Aged 60 and Over	1	0	0	0	0	0	3

Board Member Name	Geographic Area	Affiliation	Membership Status
Brent Leininger	Hillsdale County	County Commissioner	Elected Official
Rusty Baker	St. Joseph County	County Commissioner	Elected Official
Steve Lanius	Hillsdale County	County Commissioner	Elected Official
Tom Matthew	Branch County	County Commissioner	Elected Official
Jared Hoffmaster	St. Joseph County	County Commissioner	Elected Official
Jon Houtz	Branch County	County Commissioner	Elected Official

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Branch-St. Joseph Area Agency on Aging

FY 2024

SUPPLEMENTAL DOCUMENT B

Advisory Board Membership

	Asian/ Pacific Islander	African American	Native American/ Alaskan	Hispanic Origin	Persons with Disabilities	Female	Total Membership
Membership Demographics	0	0	0	0	0	7	11
Aged 60 and Over	0	0	0	0	0	0	3

Board Member Name	Geographic Area	Affiliation
Amy Duff	Branch County	Focal Point - COA Director
Richard Jacoby	Branch County	Human Services - MDHHS
Michelle Lock	Branch County	Human Services - MDHHS
James Cook	Branch County	Community Advocate
Rick Shaffer	St. Joseph County	St. Joseph County Commissioner
Madelene Wirgau	St. Joseph County	Human Services - MDHHS
Joanna Adams	St. Joseph County	Human Services - MDHHS
Pamela Riley	St. Joseph County	Focal Point - COA Director
Trisha Wood	Branch and St. Joseph Cou	LTC Ombudsman
Kelly Jonker	Branch and St. Joseph Co.	LTC Ombudsman
Dennis Brieske	Branch County	Community Advocate

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SUPPLEMENTAL DOCUMENT F
Request to Transfer Funds

1	The Area Agency on Aging requests approval to transfer funds from Title III-B Supportive Services to Title III-C Nutrition Services. The Agency assures that this action will not result in a reduction in support for in-home services and senior center staffing. Rationale for this request is below.	Amount of Transfer 0
2	The Area Agency on Aging requests approval to transfer funds from Title III-C1 Congregate Nutrition Services to Title III-B Supportive Services for in-home services. The rationale as to why congregate participation cannot be increased is described below.	Amount of Transfer 60,000
<p>As in years past, in-home and other supportive services such as care management/case coordination & support are in greater demand in PSA 3C than that of Congregate Meals. This request of transferred funds allows us to better fulfill needs in the planning and service area.</p> <p>As such, the \$60,000 transfer out of Title IIIC-1 shall be allocated as follows: C1 to 3B --- \$35,000 C1 to C2 --- \$25,000</p>		
3	The Area Agency on Aging requests approval to transfer funds from Title III-C1 Congregate Nutrition to Title III-B Supportive Services for participant transportation to and from meal sites to possibly increase participation in the Congregate Nutrition Program. Rationale for this request is below.	Amount of Transfer 0

EVIDENCE-BASED PROGRAMS PLANNED FOR FY 2024

Funded Under Disease Prevention Health Promotion Service Definition

Provide the information requested below for Evidence-Based Programs (EBDP) to be funded under Title III-D.

Title III-D funds can only be used on health promotion programs that meet the highest-level criteria as determined by the Administration for Community Living (ACL) Administration on Aging (AoA). Please see the “List of Approved EBDP Programs for Title III-D Funds” in the Document Library. Only programs from this list will be approved for FY 2024. If funding has been allocated as a single amount for all Title III-D programs for a provider, enter on first line under “Funding Amount for This Service”.

[illegible]

EMERGENCY MANAGEMENT AND PREPAREDNESS

Minimum Elements for Area Agencies on Aging FY 2024 Annual Implementation Plan

After each general and nutrition minimum element for emergency preparedness, provide a brief description regarding how the AAA Emergency Preparedness Plan for FY 2024 will address the element.

Area Agency on Aging
A. General Emergency Preparedness Minimum Elements (required by the Older American's Act).
1. Does your agency have an Emergency Preparedness Plan? If so when was the latest update and was it sent ACLS? If not, please sent to albrechtc@michigan.gov
2. Does your agency work with local emergency management? If yes please provide a brief description of how you are working with them. If no Why.
3. ACLS does have expectations during a State or locally declared emergency/disaster to have staff person (the area agency director or their designee) available for communication with ACLS staff to provide real time information about service continuity (status of aging network service provider's ability to provide services). Please provide ACLS with any updated contact information on staff listed as emergency contact. Including drills.
4. Being able to provide information about the number and location of vulnerable older persons receiving services from the area agency.
5. What barriers have you had with emergency/disaster drills or with man-made or natural disaster such as flooding, pandemic, flu, and extreme weather? What can ACLS do to assist the AAAs with emergency/disasters? Can include funding, communication issues and PPE for example.