

BOARD OF HEALTH – PROGRAM, POLICY, & APPEALS COMMITTEE

Agenda for May 17, 2023 at 8:30 AM

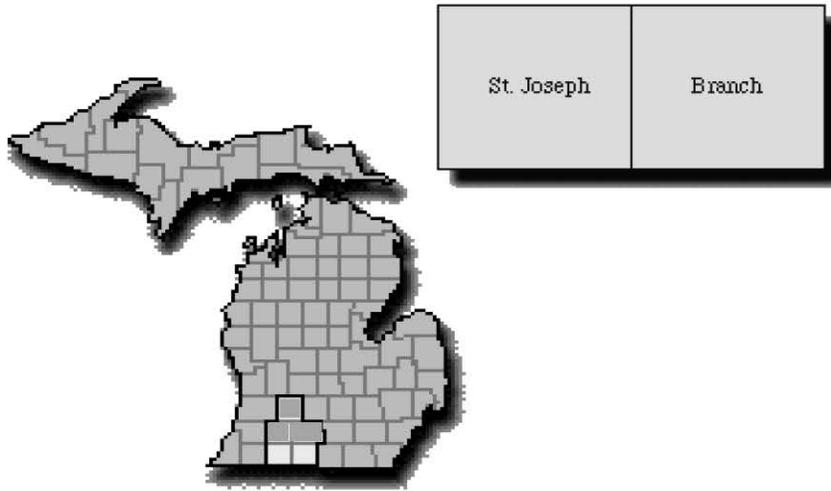
1. Call to Order
 - a. Opening ceremonies – Pledge Allegiance to the Flag of the United States of America
 - b. Roll Call
 - c. Approval of the Agenda*
2. Public Comment
3. New Business
 - a. AAA FY2024 Annual Implementation Plan*
 - b. Annual Report*
4. Public Comment
5. Adjournment - Next meeting: June 21, 2023

Public Comment:

For the purpose of public participation during public hearings or during the public comment portion of a meeting, every speaker prior to the beginning of the meeting is requested but not required to provide the Board with his or her name, address and subject to be discussed. Speakers are requested to provide comments that are civil and respectful. Each speaker will be allowed to speak for no more than three (3) minutes at each public comment opportunity.

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
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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 IIC 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
Total of Federal Dollars	\$54,370.00	Total of State Dollars	\$92,686.00

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 IIC 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).

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 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

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 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 III-C1 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”.

Program Name	Provider Name	Funding Amount for Service
<i>Example</i>	<i>Example: List each provider offering programs on a single line as shown below.</i>	<i>Example: Funding total for all providers</i>
Arthritis Exercise Program	1) Forest City Senior League Program 2) Grove Township Senior Services 3) Friendly Avenue Services	\$14,000

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 albrecht@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 vulneralbe 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 extremem weather? What can ACLS do to assist the AAAs with emergency/disasters? Can include funding, communication issues and PPE for example.

FY 2024 AREA PLAN GRANT BUDGET

Rev. 2/7/23

Agency: Branch-St. Joseph AAA

Budget Period: 10/01/23 to 09/29/24

PSA: IIC

Date: 04/27/23

Rev. No.: original Page 1of 3

SERVICES SUMMARY			
FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	156,970		156,970
2. Fed. Title III-C1 (Congregate)		101,282	101,282
3. State Congregate Nutrition		2,676	2,676
4. Federal Title III-C2 (HDM)		133,956	133,956
5. State Home Delivered Meals		132,785	132,785
8. Fed. Title III-D (Prev. Health)	9,282		9,282
9. Federal Title III-E (NFCSP)	57,653		57,653
10. Federal Title VII-A	-		-
10. Federal Title VII-EAP	-		-
11. State Access	7,989		7,989
12. State In-Home	195,315		195,315
13. State Alternative Care	31,233		31,233
14. State Care Management	80,228		80,228
15. St. ANS	12,458		12,458
16. St. Nursing Home Ombs (NHO)	-		-
17. Local Match			
a. Cash	280,554	105,250	385,804
b. In-Kind	17,250	-	17,250
18. State Respite Care (Escheat)	39,334		39,334
19. MATF	33,416		33,416
19. St. CG Support	4,123		4,123
20. TCM/Medicaid & MSO	60,000		60,000
21. NSIP		121,446	121,446
22. Program Income	82,650	180,000	262,650
TOTAL:	1,068,455	777,395	1,845,850

ADMINISTRATION				
Revenues		Local Cash	Local In-Kind	Total
Federal Administration	51,016	32,504	20,250	103,770
State Administration	8,896			8,896
MATF Administration	3,300	-	-	3,300
St. CG Support Administration	407	-	-	407
Other Admin	96,800			96,800
Total AIP Admin:	160,419	32,504	20,250	213,173

Expenditures		
	FTEs	
1. Salaries/Wages	5.00	174,800
2. Fringe Benefits		33,600
3. Office Operations		4,773
Total:		213,173

Cash Match Detail		In-Kind Match Detail	
Source	Amount	Source	Amount
Branch County	15,515	Local Appropriation	20,250
St. Joseph County	16,989		-
	-		-
	-		-
	-		-
	-		-
	-		-
	-		-
	-		-
Total:	32,504	Total:	20,250

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

Rebecca A. Burns
Signature

Health Officer
Title

04/27/23
Date

FY 2024 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL

Agency: Branch-St. Joseph AAA

Budget Period: 10/01/23

to 09/29/24

Rev. 2/7/23

PSA: IIIC

Date: 04/27/23

Rev. No.: original

page 2 of 3

*Operating Standards For AAA's

Op Std	SERVICE CATEGORY	Title III-B	Title III-D	Title III - E	Title VII A Title VII/EAP OMB	State Access	State In-Home	St. Alt. Care	State Care Mgmt	State NHO	St. ANS	St. Respite (Escheat)	MATF	St. CG Suppl	TCM-Medicaid MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL	
A	Access Services																			
A-1	Care Management	23,270		26,000					80,228		12,458				60,000		32,504	8,000	242,460	
A-2	Case Coord/supp			7,000		7,989											30,000		44,989	
A-3	Disaster Advocacy & Outreach Program																		-	
A-4	Information & Assis	24,000																3,000	27,000	
A-5	Outreach																		-	
A-6	Transportation	30,000		7,000									8,000			22,000	28,000		95,000	
A-7	Options Counseling																		-	
A-8	Care Transition																		-	
B	In-Home																			
B-1	Chore	10,100														500	2,650		13,250	
B-2	Home Care Assis																		-	
B-3	Home Injury Cntrl																		-	
B-4	Homemaking							90,500	15,616							16,500	50,000		172,616	
B-6	Home Health Aide																		-	
B-7	Medication Mgt								9,300										9,300	
B-8	Personal Care							69,000	15,617							16,500	50,500		151,617	
B-9	Assistive Device&Tech							9,000											9,000	
B-10	Respite Care							17,515				16,634	5,416			5,200	18,550		63,315	
B-11	Friendly Reassure	10,000															600	1,500	12,100	
C-10	Legal Assistance	12,000														500	1,500		14,000	
C	Community Services																			
C-1	Adult Day Services											22,700	20,000	4,123		20,000	31,250		98,073	
C-2	Dementia ADC																		-	
C-6	Disease Prevent/Health Promtion		9,282													250	2,500		12,032	
C-7	Health Screening																		-	
C-8	Assist to Hearing Impaired & Deaf Cmty																		-	
C-9	Home Repair	12,000														500	3,500		16,000	
C-11	LTC Ombudsman	2,000															18,000		20,000	
C-12	Sr Ctr Operations																		-	
C-13	Sr Ctr Staffing																		-	
C-14	Vision Services																		-	
C-15	Prevnt of Elder Abuse,Neglect,Exploitation																		-	
C-16	Counseling Services																		-	
C-17	Creat.Conf.CG@ CCC/ inactive use C20																		-	
C-18	Caregiver Supplmt Services																		-	
C-19	Kinship Support Services																		-	
C-20	Caregiver E,S,T			17,653												700	11,000		29,353	
*C-8	Program Develop	23,000																3,000	26,000	
	Region Specific																			
	Community Living Program Services	5,100																1,100	6,200	
	Gap Filling	5,500																650	6,150	
	c.																		-	
	d.																		-	
	7. CLP/ADRC Services																		-	
Sp Co	8. MATF Adm												3,300						3,300	
Sp Co	9. St CG Sup Adm													407					407	
	SUPPRT SERV TOTAL	156,970	9,282	57,653	-	-	7,989	195,315	31,233	80,228	-	12,458	39,334	36,716	4,530	60,000	82,650	280,554	17,250	1,072,162

FY 2024 NUTRITION / OMBUDSMAN / RESPITE / KINSHIP - PROGRAM BUDGET DETAIL

Rev. 2/7/23

Agency: Branch-St. Joseph AAA Budget Period: 10/01/23 to 9/29/24
 PSA: IIC Date: 04/27/23 Rev. Number original

page 3 of 3

FY 2024 AREA PLAN GRANT BUDGET - TITLE III-C NUTRITION SERVICES DETAIL

Op Std	SERVICE CATEGORY	Title III C-1	Title III C-2	State Congregate	State HDM	NSIP Title III-E	Program Income	Cash Match	In-Kind Match	TOTAL
	Nutrition Services									
C-3	Congregate Meals	100,332		2,676			55,000	15,000		173,008
B-5	Home Delivered Meals		133,956		132,785	121,446	125,000	90,250		603,437
C-4	Nutrition Counseling									-
C-5	Nutrition Education									-
	AAA RD/Nutritionist*	950								950
	Nutrition Services Total	101,282	133,956	2,676	132,785	121,446	180,000	105,250	-	777,395

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

FY 2024 AREA PLAN GRANT BUDGET-TITLE VII LTC OMBUDSMAN DETAIL

Op Std	SERVICE CATEGORY	Title III-B	Title VII-A	Title VII-EAP	State NHO	MSO Fund	Program Income	Cash Match	In-Kind Match	TOTAL
	LTC Ombudsman Ser									
C-11	LTC Ombudsman	2,000	-	-	-	-	-	18,000	-	20,000
C-15	Elder Abuse Prevention	-	-	-	-	-	-	-	-	-
	Region Specific	-	-	-	-	-	-	-	-	-
	LTC Ombudsman Ser Total	2,000	-	-	-	-	-	18,000	-	20,000

FY 2024 AREA PLAN GRANT BUDGET- RESPITE SERVICE DETAIL

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

FY 2024 AREA PLAN GRANT BUDGET-TITLE E- KINSHIP SERVICES DETAIL

Op Std	SERVICE CATEGORY	Title III-B	Title III-E				Program Income	Cash Match	In-Kind Match	TOTAL
	Kinship Ser. Amounts Only									
C-18	Caregiver Sup. Services	-					-		-	-
C-19	Kinship Support Services	-	-				-	-	-	-
C-20	Caregiver E,S,T	-	5,000				-	-	-	5,000
	Kinship Services Total	-	5,000				-	-	-	5,000

Planned Services Summary Page for FY 2024			PSA:	IIIC	
Service	Budgeted Funds	Percent of the Total	Method of Provision		
			Purchased	Contract	Direct
ACCESS SERVICES					
Care Management	\$ 242,460	13.11%	X		X
Case Coordination & Support	\$ 44,989	2.43%		X	
Disaster Advocacy & Outreach Program	\$ -	0.00%			
Information & Assistance	\$ 27,000	1.46%			X
Outreach	\$ -	0.00%			
Transportation	\$ 95,000	5.14%		X	
Option Counseling	\$ -	0.00%			
Care Transition	\$ -	0.00%			
IN-HOME SERVICES					
Chore	\$ 13,250	0.72%		X	
Home Care Assistance	\$ -	0.00%			
Home Injury Control	\$ -	0.00%			
Homemaking	\$ 172,616	9.33%	X	X	
Home Delivered Meals	\$ 603,437	32.63%		X	
Home Health Aide	\$ -	0.00%			
Medication Management	\$ 9,300	0.50%	X		
Personal Care	\$ 151,617	8.20%	X	X	
Personal Emergency Response System	\$ 9,000	0.49%	X		
Respite Care	\$ 63,315	3.42%	X	X	
Friendly Reassurance	\$ 12,100	0.65%		X	X
COMMUNITY SERVICES					
Adult Day Services	\$ 98,073	5.30%		X	
Dementia Adult Day Care	\$ -	0.00%			
Congregate Meals	\$ 173,008	9.35%		X	
Nutrition Counseling	\$ -	0.00%			
Nutrition Education	\$ -	0.00%			
Disease Prevention/Health Promotion	\$ 12,032	0.65%		X	
Health Screening	\$ -	0.00%			
Assistance to the Hearing Impaired & Deaf	\$ -	0.00%			
Home Repair	\$ 16,000	0.87%		X	
Legal Assistance	\$ 14,000	0.76%		X	
Long Term Care Ombudsman/Advocacy	\$ 20,000	1.08%		X	
Senior Center Operations	\$ -	0.00%			
Senior Center Staffing	\$ -	0.00%			
Vision Services	\$ -	0.00%			
Programs for Prevention of Elder Abuse,	\$ -	0.00%			
Counseling Services	\$ -	0.00%			
Creating Conf Caregivers® (CCC) inactive		0.00%			
Caregiver Supplemental Services	\$ -	0.00%			
Kinship Support Services	\$ -	0.00%			
Caregiver Education, Support, & Training	\$ 29,353	1.59%		X	
AAA RD/Nutritionist	\$ 950	0.05%		X	
PROGRAM DEVELOPMENT	\$ 26,000	1.41%			X
REGION-SPECIFIC					
Community Living Program Services	\$ 6,200	0.34%	X		
Gap Filling	\$ 6,150	0.33%	X	X	
c.	\$ -	0.00%			
d.	\$ -	0.00%			
CLP/ADRC SERVICES	\$ -	0.00%			
SUBTOTAL SERVICES	\$ 1,845,850				
MATF & ST CG ADMINISTRATION	\$ 3,707	0.20%			
TOTAL PERCENT		100.00%	11.88%	79.74%	8.38%
TOTAL FUNDING	\$ 1,849,557		\$219,545	\$1,475,005	\$155,007

Note: Rounding variances may occur between the Budgeted Funds column total and the Total Funding under the Method of Provision columns due to percentages in the formula. Rounding variances of + or (-) \$1 are not considered material.

FY 2024 BUDGET REVIEW SPREADSHEET

Rev. 2/7/23

Agency:	Branch-St. Joseph	3C		Fiscal Year:	FY 2024
Date of SGA:	3/3/2023	SGA No.	cost alloc plan	Date Reviewed by AASA:	
Date of Budget:	04/27/23	Revision No.	original	Initials of Field Rep Approving:	
SGA CATEGORY	SGA AWARD	C/O AMOUNT	TOTAL	AAA COMMENTS	
Title III Administration	\$ 51,016		\$ 51,016		
State Administration	\$ 8,896		\$ 8,896		
Title III-B Services	\$ 156,970		\$ 156,970		Transfer Request submitted (Appendix F)
Title III-C-1 Services	\$ 101,282		\$ 101,282		From Title IIIC1 (\$60,000)
Title III-C-2 Services	\$ 133,956		\$ 133,956		To Title IIIC2 \$25,000
Federal Title III-D (Prev. Health)	\$ 9,282		\$ 9,282		To Title IIIB \$35,000
Title III-E Services (NFCSP)	\$ 57,653		\$ 57,653		
Title VII/A Services (LTC Ombuds)	\$ -		\$ -		
Title VII/EAP Services	\$ -		\$ -		
St. Access	\$ 7,989		\$ 7,989		
St. In Home	\$ 195,315		\$ 195,315		
St. Congregate Meals	\$ 2,676		\$ 2,676		
St. Home Delivered Meals	\$ 132,785		\$ 132,785		
St. Alternative Care	\$ 31,233		\$ 31,233		AASA COMMENTS
St. Aging Network Srv. (St. ANS)	\$ 12,458		\$ 12,458		
St. Respite Care (Escheats)	\$ 39,334		\$ 39,334		
Merit Award Trust Fund (MATF)	\$ 36,716		\$ 36,716		
St. Caregiver Support (St. CG Sup.)	\$ 4,530		\$ 4,530		
St. Nursing Home Ombuds (NHO)	\$ -		\$ -		
MSO Fund-LTC Ombudsman	\$ -		\$ -		
St. Care Mgt.	\$ 80,228		\$ 80,228		
NSIP	\$ 121,446		\$ 121,446		
			\$ -		
SGA TOTALS:	\$ 1,183,765	\$ -	\$ 1,183,765		
Administrative Match Requirements					
ADMINISTRATION	BUDGET	SGA	DIFFERENCE		
Federal Administration	\$ 51,016	\$ 51,016	\$ -	Minimum federal administration match amount	\$17,005
State Administration	\$ 8,896	\$ 8,896	\$ -	Administration match expended (State Adm. + Local Match)	\$61,650
				Is the federal administration matched at a minimum 25%?	Yes
				Does federal administration budget equal SGA?	Yes
Sub-Total:	\$ 59,912	\$ 59,912	\$ -	Does state administration budget equal SGA?	Yes
MATF	\$ 3,300				
ST CG Supp	\$ 407				
Local Administrative Match				Merit Award Trust Admin. & St. Caregiver Support Admin must be expended at or below 9% of	
Local Cash Match	\$ 32,504			Total Merit Award Trust Fund & St. Caregiver Support Admin. Funds budgeted:	8%
Local In-Kind Match	\$ 20,250			Is Merit Award Trust Fund & St CG Support Admin. budgeted at 9% or less?	Yes
Sub-Total:	\$ 52,754			Amount of MATF Funds budgeted on Adult Day Care	\$ 20,000
Other Admin	\$ 96,800	AIP TOT ADMIN	DIFFERENCE	Is at least 50% of MATF budgeted on Adult Day Care services?	Yes
Total Administration:	\$ 213,173	\$ 213,173	\$ -	Title III-E Kinship Services Program Requirements	
SERVICES:	BUDGET	SGA	% BUDGETED	Are kinship services budgeted at > 5% of the AAA's Title III-E funding?	Yes
Federal Title III-B Services	\$ 156,970	\$ 156,970	100.0000%		
Fed. Title III C-1 (Congregate)	\$ 101,282	\$ 101,282	100.0000%	[note: see TL #369 & TL#2007-141]	
State Congregate Nutrition	\$ 2,676	\$ 2,676	100.0000%	For Agencies required to budget a minimum of \$25,000 of Title III-E requirement met?	N/A
Federal C-2 (HDM)	\$ 133,956	\$ 133,956	100.0000%	Title III-B Long Term Care Ombudsman Maintenance of Effort Requirements	
State Home Delivered Meals	\$ 132,785	\$ 132,785	100.0000%	Amount required from Transmittal Letter #2020-431. (see cell L 42)	\$2,000
Federal Title III-D (Prev. Health)	\$ 9,282	\$ 9,282	100.0000%	Budgeted amount Title III-B for LTC Ombudsman.	\$2,000
Federal Title III-E (NFCSP)	\$ 57,653	\$ 57,653	100.0000%	Is required maintenance of effort met?	Yes
St. Access	\$ 7,989	\$ 7,989	100.0000%		
St. In Home	\$ 195,315	\$ 195,315	100.0000%		
St. Alternative Care	\$ 31,233	\$ 31,233	100.0000%	Service Match Requirements	
St. Care Mgt.	\$ 80,228	\$ 80,228	100.0000%	Minimum service match amount required	\$102,883
State Nursing Home Ombs (NHO)	\$ -	\$ -	#DIV/0!	Service matched budgeted: (Local Cash + In-Kind)	\$403,054
St ANS	\$ 12,458	\$ 12,458	100.0000%	Is the service allotment matched at a minimum 10%?	Yes
Sub-Total:	\$ 921,827	\$ 921,827	100.0000%		
Local Service Match				Miscellaneous Budget Requirements / Constraints	
Local Cash Match	\$ 385,804			Amounts budgeted for OAA / AASA Priority Services:	
Local In-Kind Match	\$ 17,250			Access:	\$77,270
				In-Home:	\$20,100
				Legal:	\$12,000
Sub-Total:	\$ 403,054			Total Budgeted for Priority Services:	\$109,370
Title VII/A Services (LTC Ombuds)	\$ -	\$ -	#DIV/0!	Are Access Services budgeted at minimum 10% of Original ACL Title III-B	Yes
Title VII/EAP Services	\$ -	\$ -	#DIV/0!	Are In Home Services budgeted at minimum 10% of Original ACL Title III-B	Yes
NSIP	\$ 121,446	\$ 121,446	100.0000%	Are Legal Services budgeted at minimum 6.5% of Original ACL Title III-B	Yes
St. Respite Care (Escheats)	\$ 39,334	\$ 39,334	100.0000%	(Actual % of Legal)	7.64%
MATF	\$ 33,416	\$ 33,416	100.0000%		
St. CG Support	\$ 4,123	\$ 4,123	100.0000%	Title III-B award w/o carryover or Transfers in current SGA	\$156,970
MSO Fund-LTC Ombudsman	\$ -	\$ -	#DIV/0!	Amount budgeted for Program Development:	\$23,000
TCM-Medicaid / CM	\$ 60,000			% of Title III-B Program Development (must be 20% or less):	14.0%
Program Income	\$ 262,650			Is Program Development budgeted at 20% or less?	Yes
				Title III-D allotment with carryover:	\$9,282
Total Services:	\$ 1,845,850			Amount budgeted for EBDP Activities, per TL#2012-244:	\$9,282
Grand Total: Ser.+ Admin.	\$ 2,059,023			Is 100% of Title III-D budgeted on APPROVED EBDP?	Yes

PRIORITY SERVICE SECTION

Access Services	III-B Budget Amount
a. Care Management	\$23,270
b. Case Coord/supp	\$0
c. Disaster Advocacy	\$0
d. Information & Assis	\$24,000
e. Outreach	\$0
f. Transportation	\$30,000
Access Total:	\$77,270

(AAA Regional Access Service)

In Home Services	III-B Budget Amount
a. Chore	\$10,100
b. Home Care Assis	\$0
c. Home Injury Cntrl	\$0
d. Homemaking	\$0
e. Home Health Aide	\$0
f. Medication Mgt	\$0
g. Personal Care	\$0
h. Assistive Device&Tech	\$0
i. Respite Care	\$0
j. Friendly Reassure	\$10,000
In Home Services Total:	\$20,100

(AAA Regional In-Home Service)
(AAA Regional In-Home Service)

Kinship Services	III-E Budget Amount
1. Caregiver Supplmt - Kinship Amount Only	
2. Kinship Support	\$0
3. Caregiver E,S,T - Kinship Amount Only	\$5,000
	\$0
Kinship Services Total:	\$5,000

(Other Title III-E Kinship Service)
(Other Title III-E Kinship Service)

Title III-B Transfers reflected in SGA	Title III-B Award
Title III-B award w/o carryover in SGA	\$156,970
a. Amt. Transferred into Title III-B	
b. Amt. Transferred out of Title III-B	
AoA Title III-B Award Total:	\$156,970

(Use ONLY If SGA Reflects Transfers)

(Always Enter Positive Number)
(Always Enter Positive Number)

NOTE: AoA Title III Part B award for the current FY means total award from AoA without carryover or transfers.

**FY 2024 Final Annual Implementation Plan
Direct Service Budget Detail #1**

AAA: Branch-St. Joseph AAA

FISCAL YEAR: FY 2024

SERVICE: Care Management

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	31,970		45,000		18,500	4,500	12,000	111,970
Fringe Benefits	5,700		4,686		4,004	2,000	5,500	21,890
Travel	3,000					1,000		4,000
Training	2,100					500		2,600
Supplies	2,500							2,500
Occupancy	2,500							2,500
Communications	1,500							1,500
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)	5,100		43,000		10,000		42,500	100,600
								0
Totals	54,370	0	92,686	0	32,504	8,000	60,000	247,560

SERVICE AREA: Branch & St. Joseph Counties

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #1

FY 2024

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
County Appropriation	32,504				
Local Appropriation		8,000			
Medicaid Targeted Case Management			60,000		
Totals	32,504	8,000	60,000	0	

**FY 2024 Final Annual Implementation Plan
Direct Service Budget Detail #2**

AAA: Branch-St. Joseph AAA

FISCAL YEAR: FY 2024

SERVICE: Information & Assistance

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	21,600					3,000		24,600
Fringe Benefits	2,400							2,400
Travel								0
Training								0
Supplies								0
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	24,000	0	0	0	0	3,000	0	27,000

SERVICE AREA: Branch & St. Joseph Counties

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

Explanation for Other Expenses:

SCHEDULE OF MATCH & OTHER RESOURCES #2

FY 2024

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Local Appropriation		3,000			
Totals	0	3,000	0	0	

**FY 2024 Final Annual Implementation Plan
Direct Service Budget Detail #3**

AAA: Branch-St. Joseph AAA

FISCAL YEAR: FY 2024

SERVICE: Gap Filling

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries						650		650
Fringe Benefits								0
Travel								0
Training								0
Supplies	2,500							2,500
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	2,500	0	0	0	0	650	0	3,150

SERVICE AREA: Branch & St. Joseph Counties

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #3

FY 2024

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Local Appropriation		650			
Totals	0	650	0	0	

**FY 2024 Final Annual Implementation Plan
Direct Service Budget Detail #4**

AAA: Branch-St. Joseph AAA

FISCAL YEAR: FY 2024

SERVICE: Friendly Reassurance

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match		Other Resources	Total Budgeted
					Cash	In-Kind		
Wages/Salaries	4,000					850		4,850
Fringe Benefits								0
Travel								0
Training								0
Supplies								0
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	4,000	0	0	0	0	850	0	4,850

SERVICE AREA: Branch & St. Joseph Counties

(List by County/City if service area is not entire PSA)

Does the Direct Service Budget reflect any changes to the one approved as part of the agency's FY AIP? Yes No

If yes, please describe:

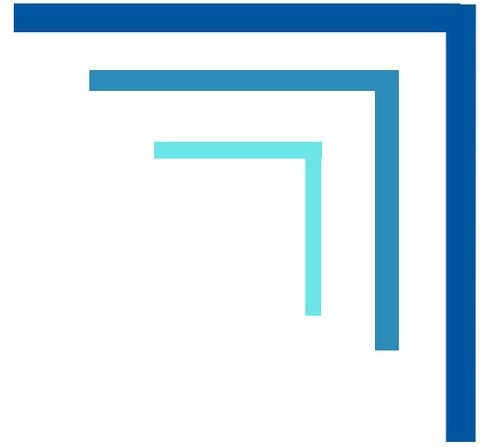
SCHEDULE OF MATCH & OTHER RESOURCES #4

FY 2024

SOURCE OF FUNDS	MATCH		OTHER RESOURCES		Explanation for Other Expenses:
	VALUE		VALUE		
	Cash	In-Kind	Cash	In-Kind	
Local Appropriation		850			Insurance
Totals	0	850	0	0	



**BRANCH-HILLSDALE-ST. JOSEPH
COMMUNITY HEALTH
AGENCY** | YOUR LOCAL
HEALTH DEPARTMENT



2022 Annual Report



Board of Health



Kathy Pangle

Commissioner
St. Joseph
County



**Tom Matthew,
Chair**

Commissioner
Branch County



Brent Leininger

Commissioner
Hillsdale
County



**Jared
Hoffmaster**

Commissioner
St. Joseph
County



**Mark E. Wiley,
Vice Chair**

Commissioner
Hillsdale
County



Jon Houtz

Commissioner
Branch County

Agency Directors



**Rebecca Burns,
MPH, RS
Health Officer**



**Dr. Karen
Luparello, DO
Medical
Director**



**Theresa Fisher
Director of
Administrative
Services**



**Kali Nichols,
MPH
Director of
Personal Health
& Disease
Prevention**



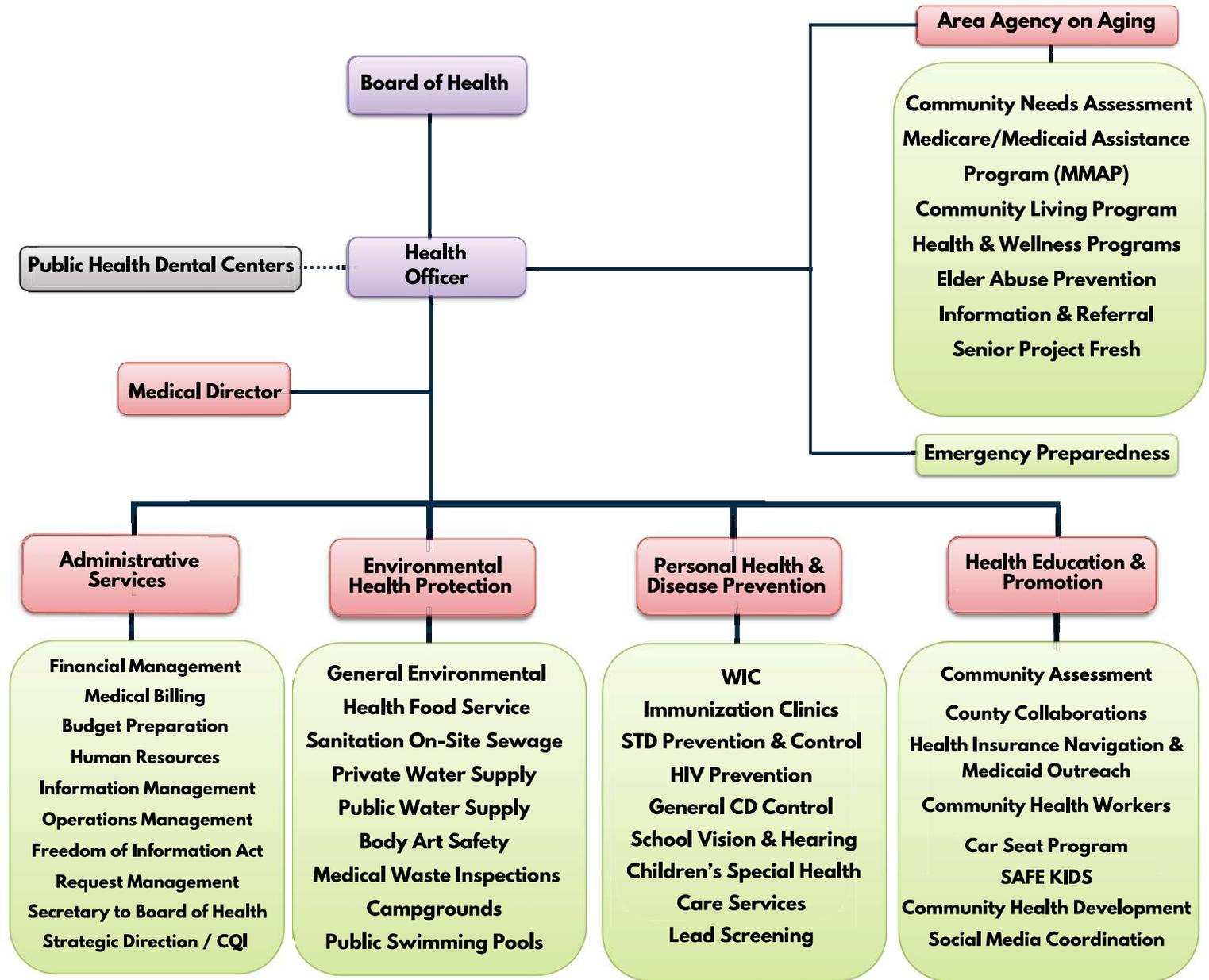
**Laura Sutter
Director of
Area Agency on
Aging (AAA IIIC)**



**Paul Andriacchi,
REHS
Director of
Environmental
Health**



Branch-Hillsdale-St. Joseph Community Health Agency Organizational Chart



Our Mission...

Helping People Live Healthier

Our Vision...

To Be The Trusted Health Resource For All People

Letter to the Community

4

To the Residents of Branch, Hillsdale, and St. Joseph Counties,

On behalf of the Board of Health and staff of the Branch-Hillsdale-St. Joseph Community Health Agency, it is my pleasure to share with you this fiscal year (FY) 2022 Annual Report.

Much of the work in FY22 continued around the response by public health as the pandemic entered the third year.

- Emergency Use Authorization of COVID-19 vaccines for the youngest members of our community allowed children aged 5 to 11 protection in November 2021, with infants 6 months to 5 years eligible in June 2022.
- COVID-19 booster doses were in demand.
- Immunization opportunities were provided in our offices, and throughout the jurisdiction in collaboration with community partners and schools.
- Free COVID-19 testing continued to be a focus. Our offices offered weekly testing for school children and community members. Local schools were encouraged to participate in the MI Backpack program which provided free at home testing kits.
- Resources for what to do when testing positive were available on our website for community members and business owners.
- The agency also provided access to free masks for community members.

Our agency recognizes the need for dental care, especially for individuals with Medicaid and the uninsured. The closure of My Community Dental Center (MCDC) in Hillsdale County in 2021 created challenges for residents trying to access dental care. We brought together representatives from MCDC, Hillsdale Hospital, Hillsdale Community Foundation, and the Hillsdale Human Service Network to develop an incentive package to recruit a dentist for the Hillsdale MCDC office. By the end of FY22, the MCDC facility had recruited a dentist and was finalizing plans to reopen.

A WIC formula recall mid-year created a crisis for the agency's WIC clients and community members, as families struggled to find formula to feed their infants. Messaging on alternative formulas covered by WIC were distributed to clients, posted on the agency's website, and shared on social media sites. Our Breastfeeding Peer Counselors and Nurses worked with moms to answer questions and support those who had questions about breastfeeding in the midst of the uncertainty.

The agency completed a new strategic plan which will focus our efforts in the areas of employee investment, communications, advocacy, policy, and programming.

In order to ensure residents could locate our offices, the agency updated signage at our Hillsdale, Sturgis, and Three Rivers locations. For the safety of our clients and staff, we replaced the parking lot at our Three Rivers office. Additional parking lot renovations are planned for 2023.

The team at Your Local Health Department is proud of our public health work and we look forward to continuing to serve you and your family into 2023.

Yours in Good Health,

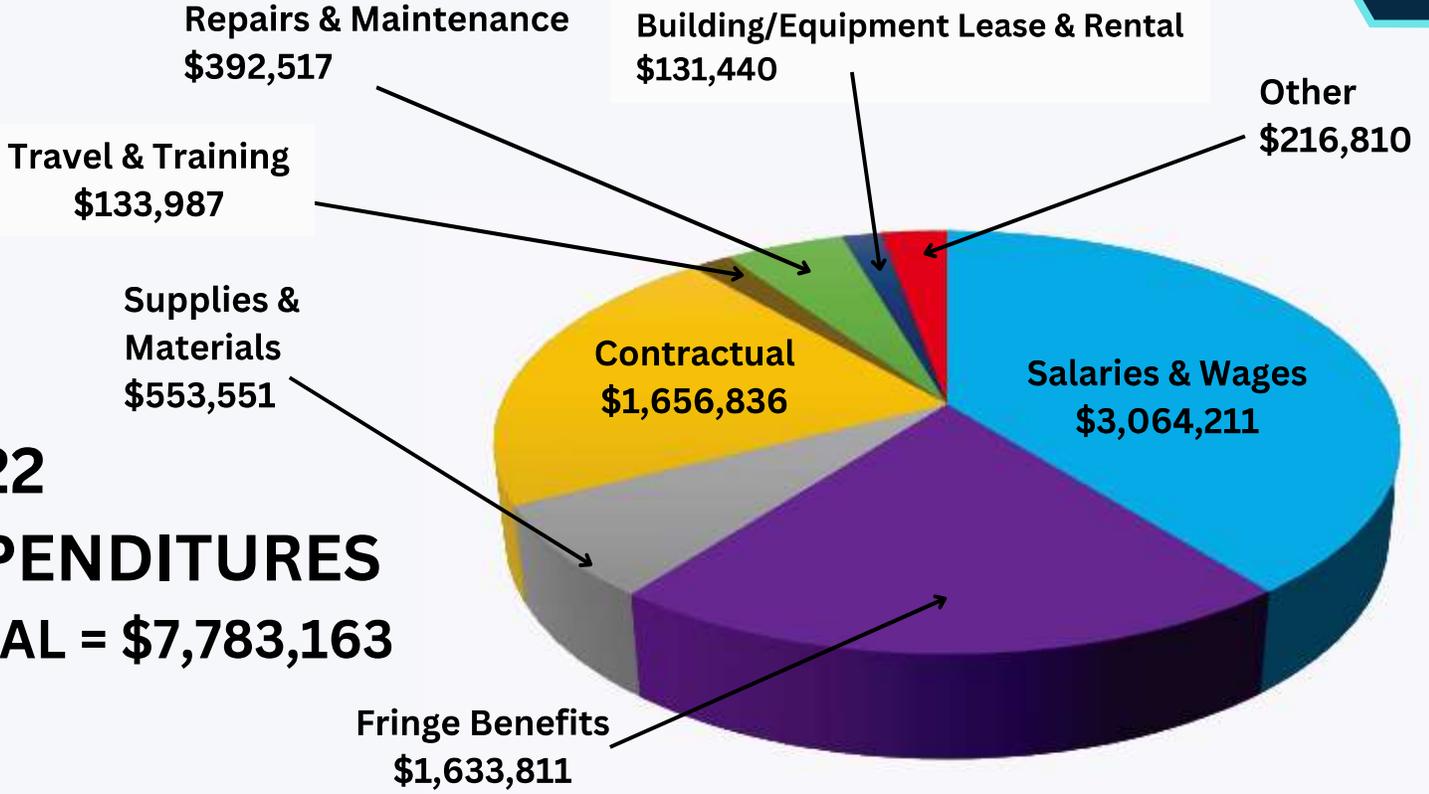


Rebecca A. Burns, MPH, RS
Health Officer

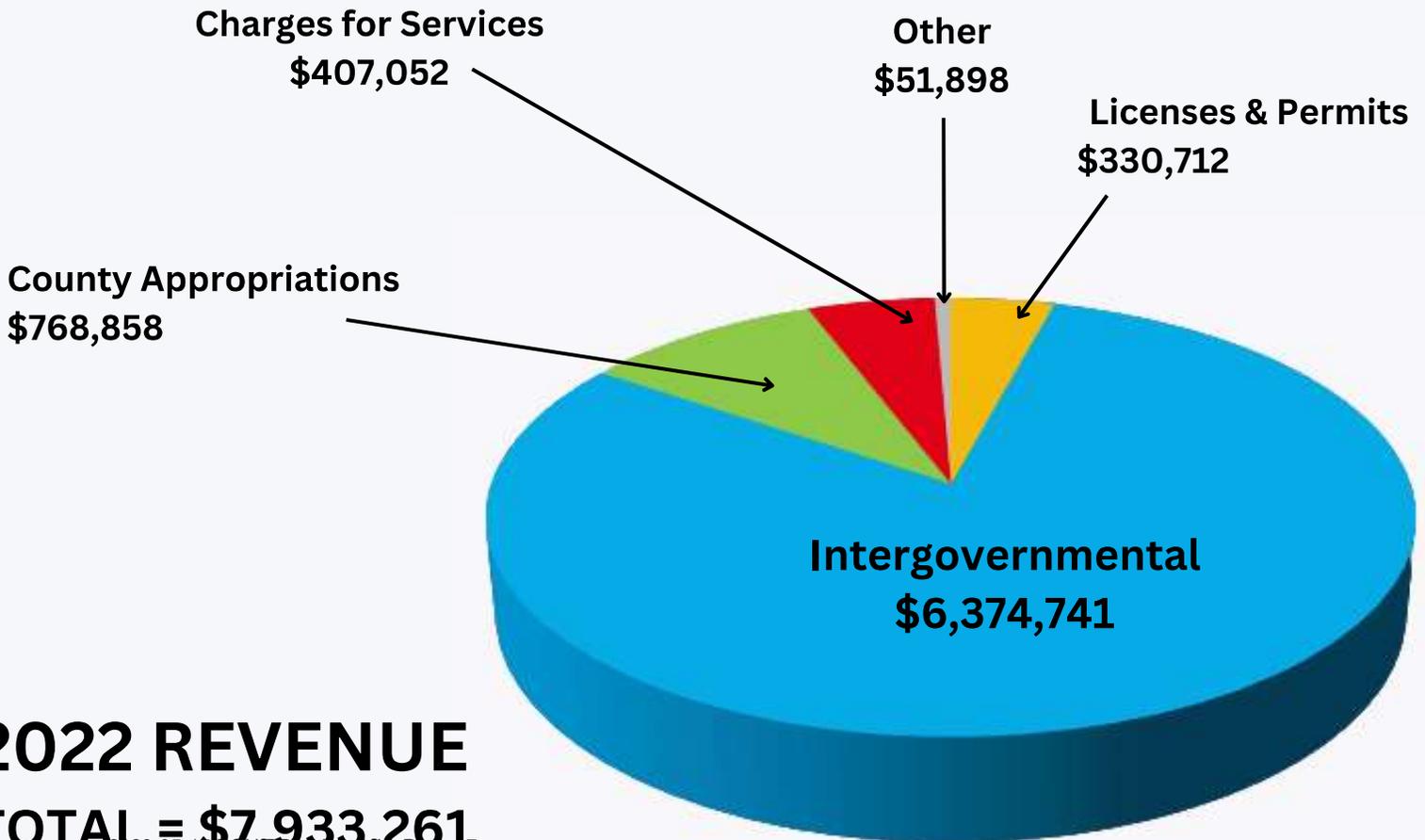
Financial Statements



**2022
EXPENDITURES
TOTAL = \$7,783,163**



**2022 REVENUE
TOTAL = \$7,933,261**



Public health dental services are provided by My Community Dental Centers (MCDC) through agreements with the Branch-Hillsdale-St. Joseph Community Health Agency. MCDC facilities offer a full suite of services, ranging from routine preventive to restorative dentistry.

Age	Coldwater	Hillsdale	Three Rivers	Sturgis	Total
0-4	2.5%	0	4.3%	5%	3.9%
5-14	10%	0	18.5%	24.1%	17.6%
15-20	5.9%	0	10.2%	9.9%	8.7%
21-60	64.1%	0	52.8%	47.5%	54.8%
60+	17.5%	0	14.1%	13.5%	15%

	Coldwater	Hillsdale	Three Rivers	Sturgis	Total
# of Patients	2527	0	2701	2505	7733
Medicaid	32.8%	0	23.1%	17.4%	24.5%
Healthy Michigan Plan	22.7%	0	19.5%	15.8%	19.4%
Traditional Insurance	26.3%	0	25.8%	28.2%	26.7%
Healthy Kids	14.7%	0	27.3%	29.7%	23.9%
My DP/NDP	3.5%	0	4.2%	9%	5.5%

**** Hillsdale Office temporarily closed as of April 2021 to October 2022**

"Melissa and Robert the dentist and all of the staff at this location saved my life literally, I really appreciate them and so does my whole family." - Bobby, Coldwater

"These people are so tender and caring. If I could give more stars, I would. They are patient and they listen to your concerns. They are a comfort in my fear of the dentist. Highly recommend." - Corey, Three Rivers

"Absolutely love this place! The doctor was so kind and caring and completely honest with me about everything. The dental hygienist was so kind and gentle and answered every question I had. The receptionist and X-Ray Technician helped me with my newborn baby. Amazing, AMAZING people. Thank you so much for everything." - Mae, Sturgis

2022 County Health Profile



	Branch	Hillsdale	St. Joseph	Michigan
Population	44,975	45,542	60,758	10,050,511
Marriage	254	297	280	41,977
Divorce	131	162	178	20,759
% Population >65	19.1%	20.7%	18.7%	18.2%
Leading Causes of Death	*Data last updated 11/14/2022 (1-Year Range)			
Heart Disease	19%	20.2%	20.1%	22.6%
Cancer	18.1%	17.6%	16.1%	18%
COVID-19	13.1%	16.5%	11%	11.6%
Accidents	5.5%	4.9%	5.3%	5.6%
Stroke	4.1%	3.7%	4.9%	4.9%
Chronic Lower Respiratory Disease	6.6%	6.7%	7%	4.4%
Alzheimer's Disease	3.9%	3.1%	4.8%	3.6%
Diabetes Mellitus	3.9%	2.5%	3.9%	2.9%
Kidney Disease	2%	1.4%	1.5%	1.7%
Cirrhosis	0.9%	1.5%	1.3%	1.5%
Maternal/Infant Health Indicators	*Data last updated 11/14/2022 (1-Year Range)			
# of Live Births	572	497	647	105,022
# of Teen Births (age 15-19)	31	17	33	3870
% of Teen Births (age 15-19)	5.4%	3.4%	5.1%	3.7%
% Low Birth Weight	8%	10.5%	5.3%	9.2%
Infant Mortality Rate (per 1000) (Avg. 2019-2021)	5.3	6.8	7.2	6.5
% Adequate Prenatal Care-Kessner Index	51%	59.4%	48.5%	68.6%
Economic Indicators (2022 County Health Rankings)				
% Unemployment	8.1%	9.1%	9.1%	8.1%
Median Household Income	\$51,800	\$55,000	\$54,900	\$63,400
% Children in Poverty	18%	19%	17%	16%
% High School Completion	89%	90%	87%	89%

• WIC: Women, Infants, & Children

What is WIC?

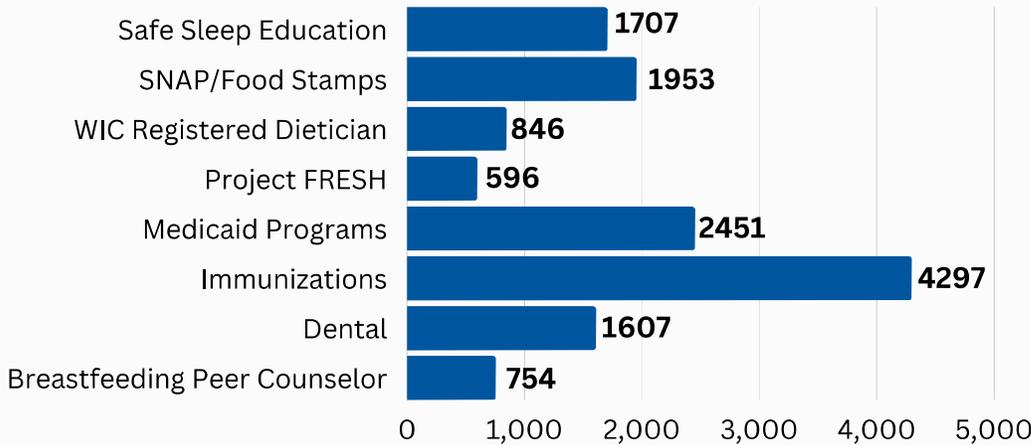
The special supplemental nutrition program for Women, Infants, and Children (WIC) is a public health nutrition program under the USDA that provides the following for income-eligible women who are pregnant or post-partum, infants and children up to age five:

- Nutrition Education
- Nutritious Foods
- Breastfeeding Support
- Healthcare Referrals

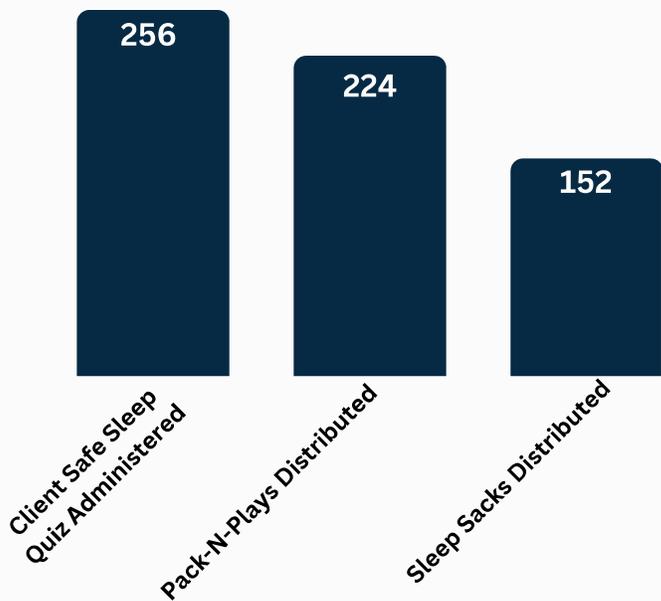
WIC Can Help A Family By:

- Reducing premature births
- Reducing low birth-weight babies
- Reducing fetal and infant deaths
- Improving diet quality
- Increasing access to regular healthcare
- Increasing immunization rates
- Increasing access to prenatal care
- Increasing pregnant women's consumption of vital nutrients

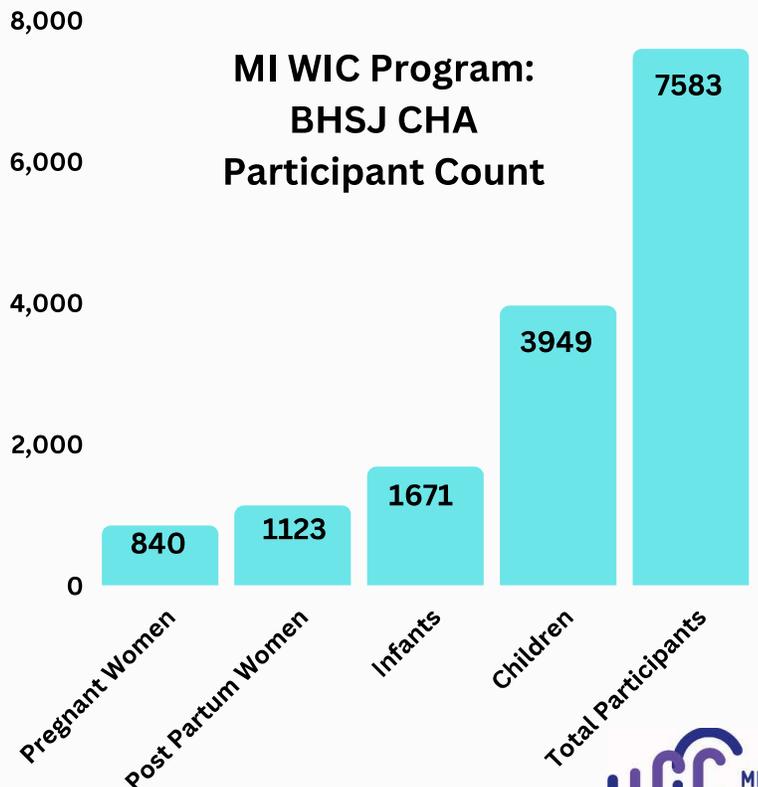
Top BHSJ CHA Community Resource Referrals Offered



Maternal Child Health: Safe Sleep

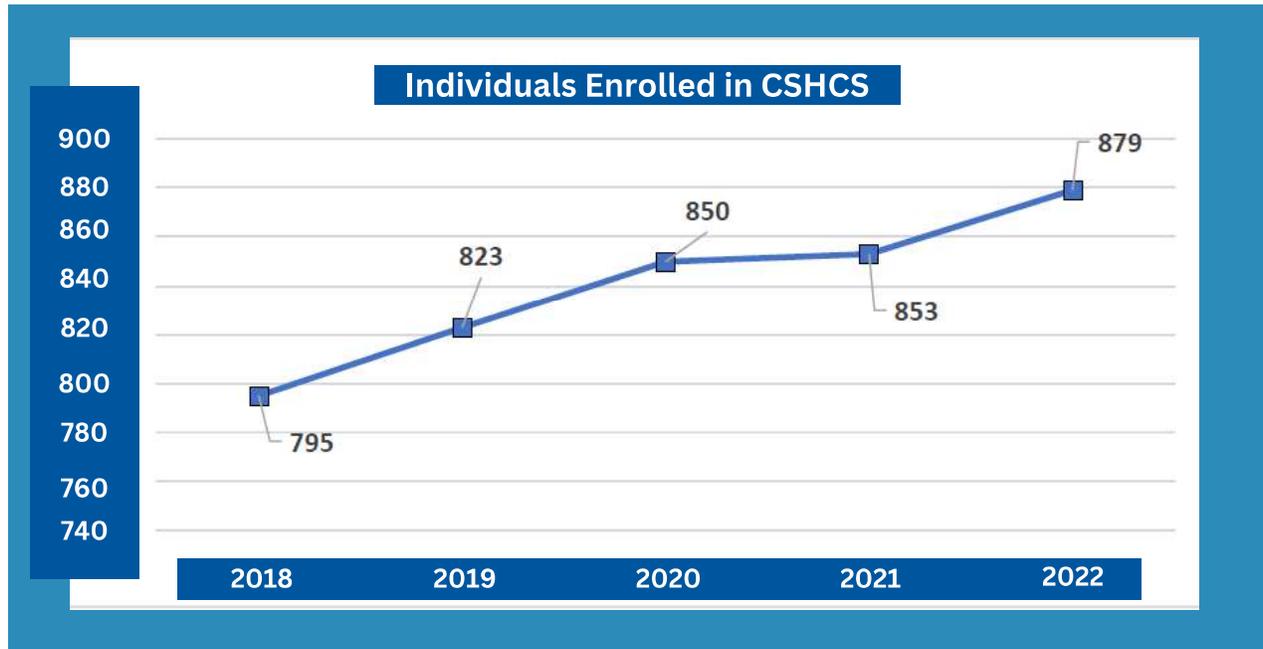


MI WIC Program: BHSJ CHA Participant Count



• CSHCS: Children's Special Health Care Services

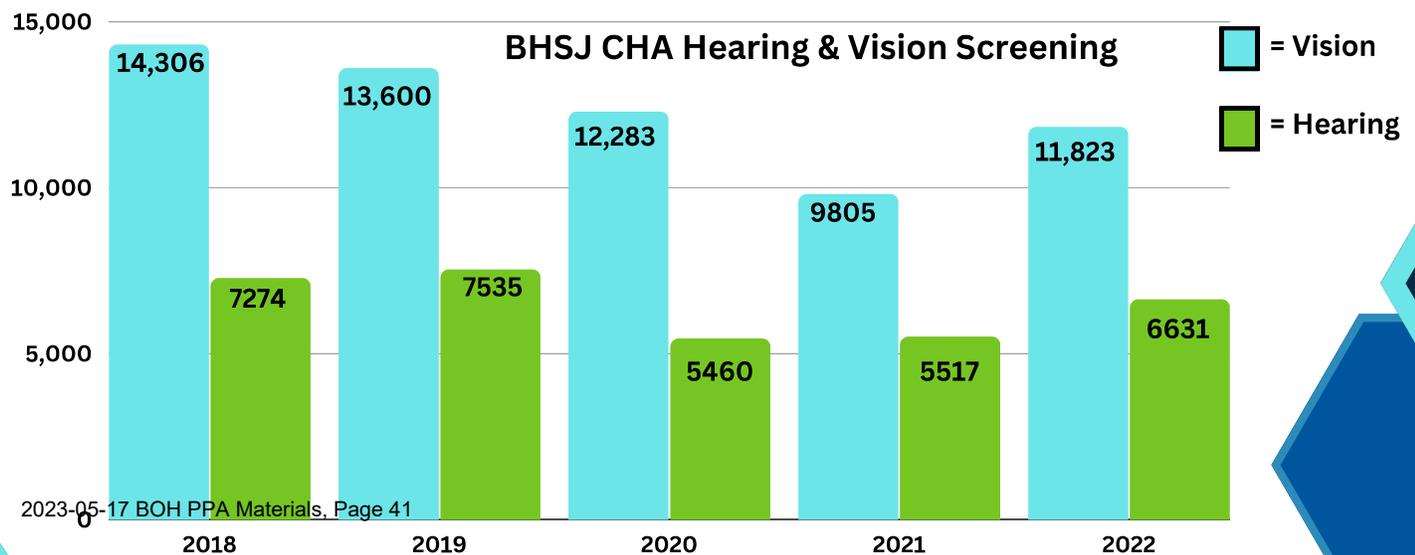
Children's Special Health Care Services (CSHCS) provides services to children with special needs and their families. You are eligible for CSHCS if you are a Michigan resident between the ages of 0-21 years, have a qualifying medical condition, and are seeing a specialist. CSHCS covers up to 3000 various conditions and is available to families at all income levels



• Hearing & Vision

The Michigan Department of Health and Human Services (MDHHS) provides FREE hearing and vision screenings to all children in Michigan. Screenings are conducted in schools or at the BHSJ CHA.

- An undiagnosed hearing and/or vision problem may interfere with development.
- Early detection and treatment of hearing and vision problems can help children succeed in school.
- Screenings are conducted by fully trained hearing and vision technicians.
- 10% of children screened for vision and 5% screened for hearing are referred to specialists.



• Communicable Disease

"Communicable Disease is caused by micro-organisms such as bacteria, viruses, parasites, and fungi that can be spread directly or indirectly from one person to another. Transmission can occur through insect bites, human to human contact and digestion of contaminated food or water." - World Health Organization

BHSJ CHA: Communicable Disease (Data represents trending analysis of communicable diseases in our three counties for the past 5 years, *Data is based on the Calendar Year*)

Disease: Confirmed Cases	2018	2019	2020	2021	2022	Total
HIV/AIDS	2	3	1	2	3	10
Multi-System Inflammatory Syndrome	0	0	0	2	2	4
Campylobacter	39	42	19	31	30	161
Giardiasis	7	8	7	7	7	36
Norovirus	1	18	6	6	8	39
Salmonellosis	29	27	27	19	12	114
Shiga Toxin-Producing Escherichia Coli	0	5	3	2	4	14
Shigellosis	0	2	1	1	1	5
Yersinia Enteritis	2	2	2	1	3	10
Meningitis - Aseptic	5	4	1	0	5	15
Meningitis - Bacterial/Other	1	1	0	1	0	3
Meningococcal Disease	0	2	0	0	0	2
Streptococcus Pneumoniae, Inv	16	17	10	13	15	71
Coccidioidomycosis	2	2	0	1	0	5
Histoplasmosis	1	6	5	3	0	15
Legionellosis	0	4	5	5	1	15
Streptococcal Dis, Inv, Grp A	6	9	11	6	3	35
Rabies Animal	3	0	0	3	1	7
Rabies: Potential Exposure & PEP	0	114	93	91	32	330
Chlamydia (Genital)	468	407	390	431	388	2084
Gonorrhea	118	166	217	241	97	839
Tuberculosis	0	1	0	1	0	2
Chickenpox (Varicella)	4	4	0	1	1	10
H. Influenza Disease - Inv	3	1	3	2	6	15
Measles	0	0	0	0	0	0
Mumps	0	0	0	0	0	0
Pertussis	7	14	0	5	10	36
Polio	0	0	0	0	0	0
Shingles	0	3	0	0	1	7
Lyme Disease	0	2	1	12	8	23
Hepatitis A	2	1	1	0	0	4
Hepatitis B, Acute	0	3	0	0	0	3
Hepatitis B, Chronic	1	2	1	1	2	7
Hepatitis C, Acute	0	0	0	1	2	3
Hepatitis C, Chronic	63	46	23	25	34	191

Prevent the Spread of Disease by Doing the Following:

- Properly wash your hands often
- Handle and prepare food safely
- Stay home when you feel sick
- Avoid touching wild animals
- Clean and disinfect commonly used surfaces
- Keep up on your vaccinations
- Avoid sharing personal items

• Immunizations

Top Administered Vaccines (2022)

1. Tetanus, diphtheria, acellular pertussis (Tdap)
2. PCV13 (pneumococcal)
3. Hepatitis A
4. Menactra (meningococcal)
5. Human Papillomavirus (Gardasil 9)



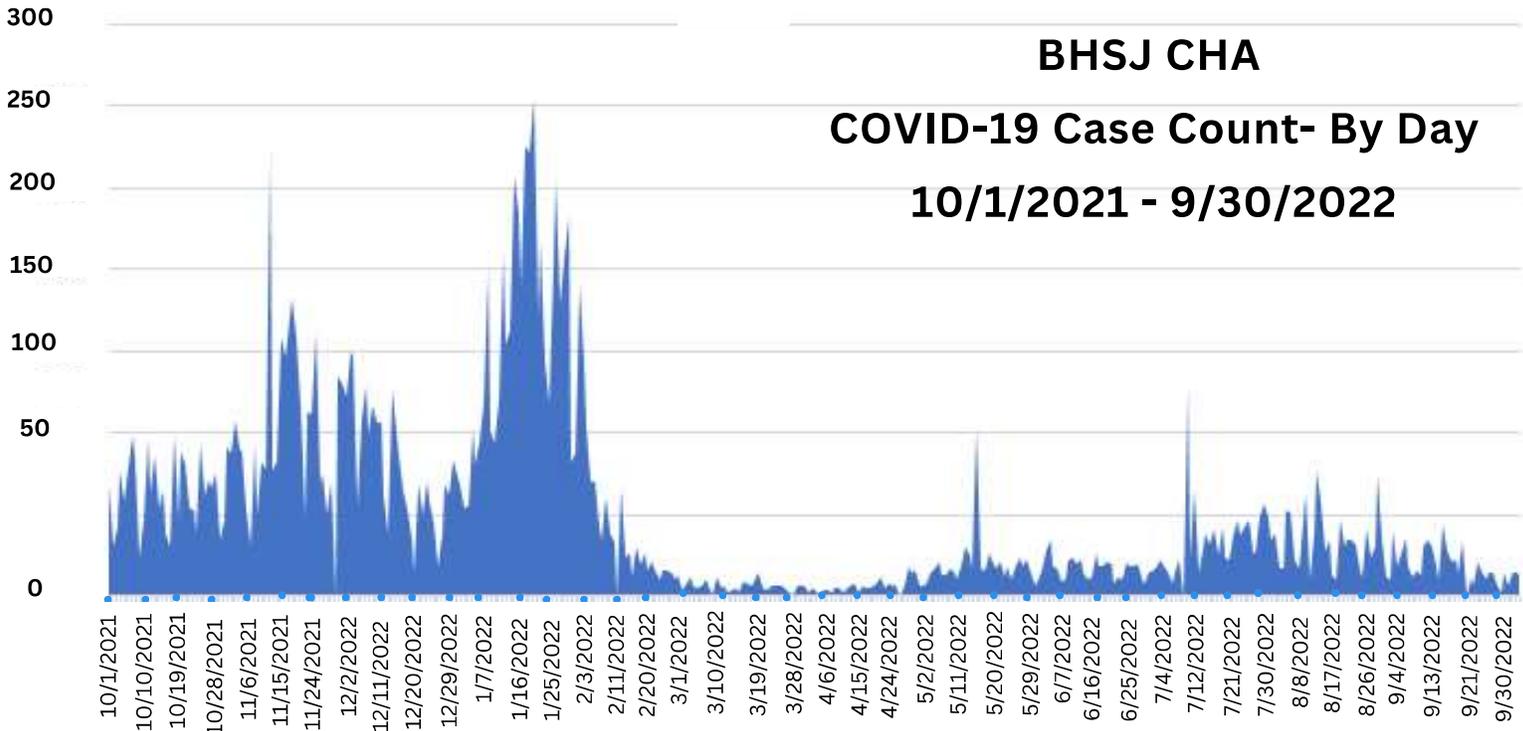
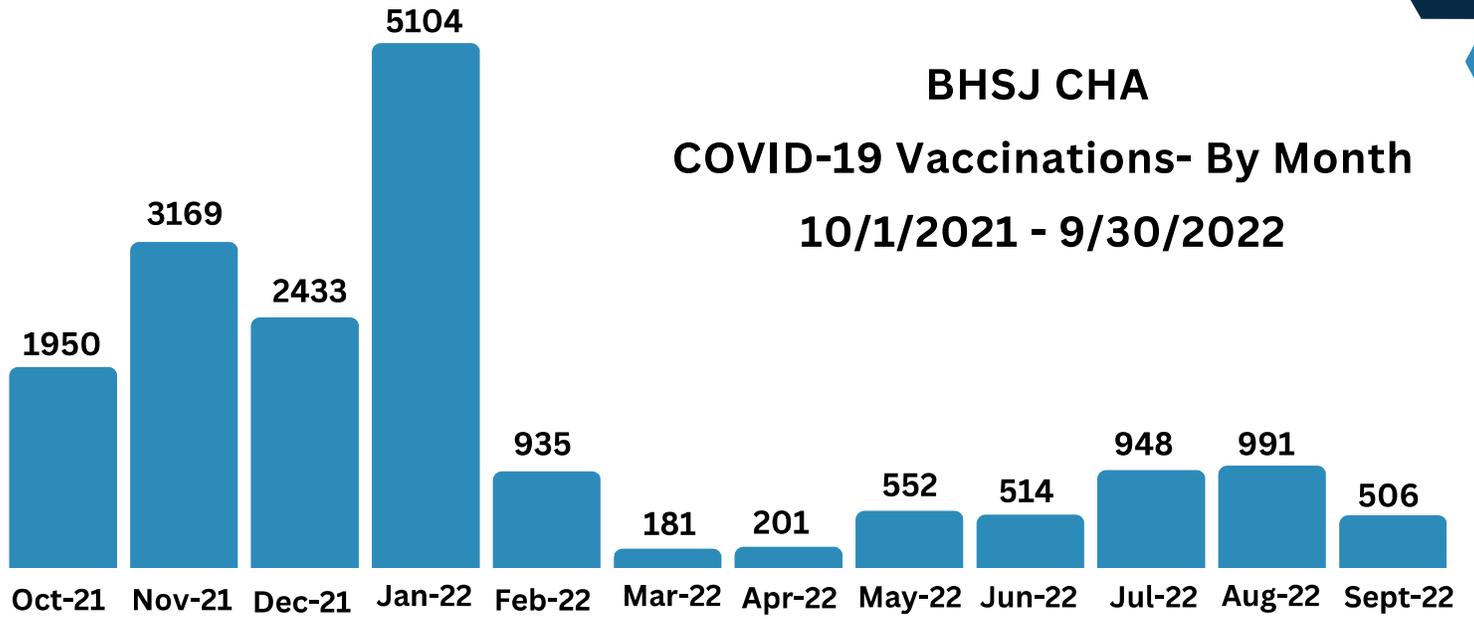
BHSJ Vaccines Administered	2018-2019	2019-2020	2020-2021	2021-2022
Influenza Only	1719	1556	955	621
COVID-19 Only	0	0	53,623	7843
All Other Vaccines	7439	4517	3450	3437
Total	9158	6073	58,028	11,901



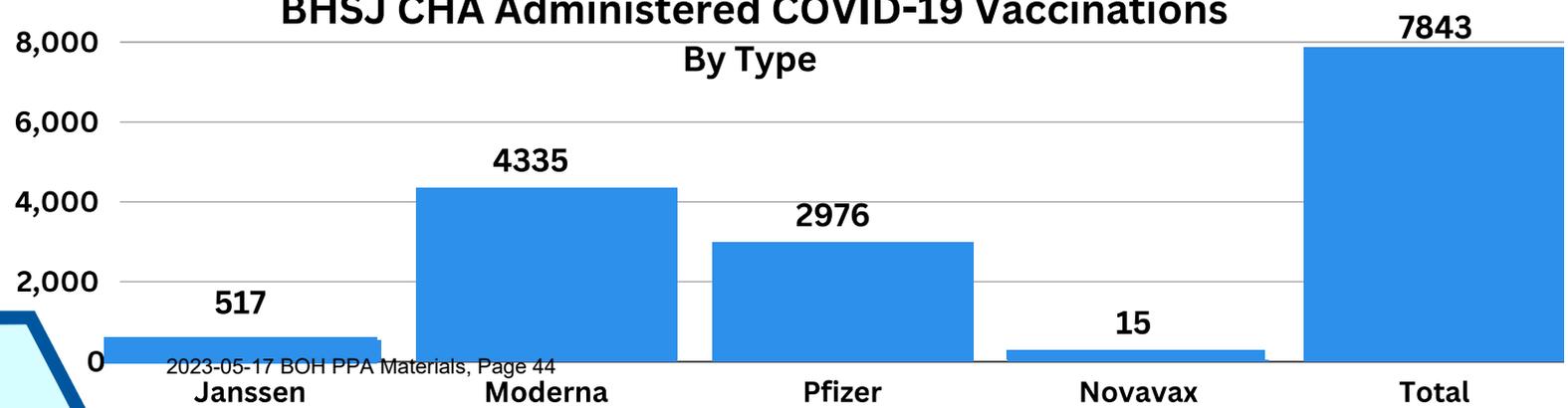
BHSJ CHA Tuberculin Skin Tests			
2018-2019	2019-2020	2020-2021	2021-2022
442	252	260	256

What You Should Know About Vaccines:

- Vaccines help protect against serious disease.
- Outbreaks of vaccine preventable disease can, and does, happen in our communities.
- The CDC and FDA take many steps to make sure our vaccines are safe.
- Vaccines protect our children from getting sick.
- Vaccines are for everyone.



BHSJ CHA Administered COVID-19 Vaccinations By Type



Health Education & Promotion (HEP) Promotes the services and programs offered by the agency through the use of print media, social media, community engagement, radio promotions, etc.; and, provides educational services to community organizations and schools on pertinent health-related topics.

HEP contributes to the Agency in many unique ways, the team is dedicated to supporting the agency's other departments by collaborating with them to promote these services through various mediums. Some of the educational topics and promotions that were of significance during 2022 included: WIC, Medicaid, anti-vaping, vaccine hesitancy, marijuana safety, COVID-19, infectious disease, contraceptives, STD/STI, HIV/AIDS, school health, environmental health, etc.

The department serves as the Agency's representative at community events, coalitions, task forces, and any collaborative group that has a stake in the health and well-being of our community members. We are proud to be serving the members of our three county area and will continue to work towards utilizing innovative and effective methods of communication to get the Agency's messaging out to the public.

2022 GRANTS

LARA - 2022 Medicinal Marijuana Operations & Oversight Grant (MMOOG)

For the 2022 application, lockable medicine bags were purchased for distribution to community members. The HEP team also wanted to create a more collaborative work plan and include interested outside organizations in order to spread the "Lock It Up" message of the campaign. The team utilized the expanding number of dispensaries in our service area as places of emphasis to display this message. Many of these businesses did welcome the idea and we were able to purchase, and distribute, promotional items such as posters, stickers, bracelets, window-clings, etc. that all carried the "Lock It Up" slogan.



Lastly, the HEP team was able to work with the Branch Area Transit Authority to purchase promotional space on one of their public transportation buses. We created a design using the "Lock It Up" logo and a message reminding the public to keep kids safe. This design was applied to the entire side of one of their buses and will remain there for a period of one year, or until we renew the contract.

HRSA -The Rural Community Opioid Response (RCOR) - Planning Grant

This grant concluded in February of 2022 with the completion of the project's deliverables, including: a community needs assessment and gap analysis, an action and strategic plan, and the creation of a memorandum of understanding. The Agency is hopeful that future funding will allow for the implementation of the work plan that these deliverables helped to create.

MPHI - "Creating an Age-Friendly Public Health System in Michigan"

In partnership with the Area Agency on Aging (AAA IIIC) and Region 2 Area Agency on Aging (R2AAA), the HEP team and the AAA partners were awarded this funding in May of 2021. The goal of the project was to utilize the funds to review and revise our current practices and policies as they relate to the aging population in hopes of creating a more age-friendly public health system. The project period for this grant ended in February 2022 with the final report presented at the June 2022 Michigan Premier Public Health Conference.

MCRH - Embedding a Community Health Worker Program within the Local Public Health Department

The Agency received funding for this grant in March of 2022 that will allow the integration of a Community Health Worker Program into the BHSJ CHA services. A Community Health Worker acts as a connection source to health and social resources for our community members. Some of the services that they are able to assist with include, but are not limited to: Medicaid assistance, food assistance, housing, domestic concerns, community outreach, medicine management, mental health referrals, etc.

Community Health Workers bridge the healthcare system and community needs.



Emergency Preparedness encompasses the planning, preparation, training, evaluation, and response to disasters, which have the potential to impact the community's health. Your local Health Department prepares daily for pandemics, diseases outbreaks, food-borne illness outbreaks, hazardous material spills, weather events, flooding, and almost anything in the chemical, biological, radio-logical, nuclear, and explosive areas. The Emergency Preparedness Coordinator is an essential service of Public Health.

During 2022, the agency's Emergency Preparedness programming continued to focus on supporting the COVID-19 pandemic response. Collaboration with new partners, agencies and industries to ensure testing, prevention, treatment, and vaccination efforts met the needs of all communities.



The Agency's Mobile Unit played a critical role in providing access to COVID-19 vaccinations. With support from the Michigan National Guard, Your Local Health Department partnered with numerous community organizations and businesses, bringing services to local festivals, county fairs, and workplaces. Community vaccine clinics were also held at schools, fire stations, and township halls. Additionally, the Mobile Unit allowed the agency to provide services to individuals in their homes.

Plans & Training - The pandemic has given the agency an opportunity to review and improve our response plans and processes. Lessons learned from the past year will be included in our Emergency Response Plans as we move forward. Our Emergency Response Plan is also reviewed by outside agencies such as our colleagues in our Response Regions and MDHHS. The plan will continue to be improved, especially focused on meeting the needs of the elderly, disabled, and residents at high risk due to social factors such as those facing food insecurity, housing issues, and low income.

Whole Community Inclusion - MDHHS tasked Emergency Preparedness Coordinators with a five-year project to develop a Whole Community Inclusion plan. We were into the second year of the plan process when COVID-19 changed our planning and training exercises into a real emergency event. The response to the pandemic required our whole community to come together and highlighted the strengths of our community members, partnerships, and community organizations. The pandemic has also uncovered areas of opportunity for the agency which will be factored into our planning as we move forward.

2022 Top Hazards in Branch, Hillsdale, and St. Joseph Counties:

- Natural
- COVID-19 Pandemic
- Floods
- Tornadoes/Severe Storms
- Winter Weather
- Technological
- Utility Disruption
- Hazardous Chemicals from Manufacturing/Agricultural Business



Environmental Health

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Interactions with the environment affect quality of life, years of healthy life lived and health disparities. The World Health Organization (WHO) defines environment, as it related to health as "all the physical, chemical, and biological factors external to a person and their related behaviors. "Environmental Health" consists of preventing and controlling disease, injury, and disability related to the interactions between people and their environment.

The Environmental Health (EH) division conducts a variety of programs to serve our communities. The two most prominent programs are the Food Service Sanitation and On-Site Water and Wastewater programs. The food service program conducts inspections of restaurants, industrial kitchen sites, school kitchens, temporary food establishments and mobile food facilities (food trucks). Other functions include the review of plans for any new facility or remodel of an existing facility, conducting food service manager certification classes and providing general food handling education to facility staff. The on-site water and wastewater staff conduct site evaluations for the construction of septic systems and water wells for homes and commercial sites. They also inspect existing wells and septic systems for functionality for the sale of a home or business. Additionally, Environmental Health staff perform the following services:

- Campground Inspections
- Public Pool Inspections
- General Nuisance Complaints
- Body Art Facility Inspections
- Non-Community Water Supply Monitoring
- Long-Term Monitoring of Water Supplies in Contaminated Areas
- Daycare and Foster Care Inspections
- Septage Hauler/Land Application Inspections
- PFAS Contamination Investigation
- Vapor Intrusion Investigation

For the past 5 years, the CDC and MDHHS have funded a vector surveillance grant project that BHSJ CHA has participated in. The grant focuses on two areas:

1. Mosquito trapping for the mosquitoes associated with the Zika Virus.
2. Tick collection (dragging) for ticks associated with Lyme Disease

The technicians collect the specimens and then do identification of all species; any specimens that fall into the targeted species are then sent to the lab for confirmation and testing.

Food Protection

The food program provides a systematic inspection approach focused on minimizing the risk of food-borne illness and to ensure that food meets the consumer's expectation. This is done through the application of statewide code standards for all establishments where food is prepared and/or served to the public. Our staff also provides a food service manager certification class that provides necessary credentials for management level food workers.

	2021	2022
Establishments Inspected	882	829
Plans Reviewed	30	39
Temporary Food Inspections	163	210
Food Manager Certification Class (# of Attendees)	0	73
Total	1075	1151



Private & Public Water Supply

These programs focus on the proper siting and construction of residential water wells and the monitoring and regulation of Type II public water supplies to ensure safe drinking water is being provided to all consumers.

	2021	2022
Well Construction Permits Issued	621	511
Well Permits Inspected	433	571
New Water Supplies Approved	428	475
Non-Community Water Supply Inspections	59	45
Total	1541	1602

	2021	2022
Sewage Disposal Construction Permits	542	501
Sewage Systems Inspected	403	432
Well & Septic Evaluations	21	8
Vacant Land Evaluations	49	50
Change of Use Evaluations	365	312
Total	1380	1303

On-Site Sewage

Work in this program involves field testing for proposed sewage disposal, issuance and/or denial of permits, evaluation of existing sewage systems, inspections of newly constructed systems, investigation of failed systems and enforcement for violations of environmental health code.

Other Programs

There are several other programs that environmental health is responsible for that don't consume as much time but are equally important.

	2021	2022
Public Swimming Pool Inspections	48	47
Campground Inspections	61	61
Body Art Facility Inspections	14	20
DHHS Inspections (Daycare & Foster Care)	53	69
Septage Hauler	36	40
Total	218	212



Area Agency on Aging (III C)

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Our 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 the Branch and St. Joseph Counties. Please contact the Branch-St. Joseph Area Agency on Aging for specific information and assistance at (517) 278-2538 or toll free (888) 615-8009.

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

Over the past year, the Area Agency on Aging III C team continued to rise above challenges posed by the COVID-19 pandemic. Newly developed programs, supports, and services continued to flourish to meet unique needs across our two-county planning & service area.

We gratefully acknowledge our extraordinary provider network who tirelessly serve individuals with compassionate, high-quality care: A+ Nursing, Branch Area Transit Authority, Branch County Commission on Aging, Community Action Agency of South Central Michigan, Connect America, Crossroads Homecare, Home Care Wellness, HomeJoy, Legal Services of South Central Michigan, Long-Term Care Ombudsman/Area Agency on Aging 3A, Medical Care Alert, St. Joseph Co-Op/Hulda's Household Helpers, St. Joseph County Commission on Aging, St. Joseph County Transportation Authority, Thurston Cares Adult Day Program, and VRI Inc.

Elder Abuse Prevention & Awareness: The Services to Victims of Elder Abuse (SVEA) project completed its fourth year of grant activities. Victim Specialists served 40 individuals with a wide-range of direct services including personal advocacy, crisis intervention, emergency financial assistance, relocation assistance, criminal justice advocacy, and personal protective orders. Victim Specialists maintained regular contact with referral sources and supported each county's multi-disciplinary team/coalition efforts. If you would like more details or to become more involved in your community's efforts to prevent abuse, neglect, or exploitation, please call our office.



Community Living Program - This program continues to soar! Care Consultants with individuals who have complex medical/social needs to develop a person-centered support plan. 98 individuals were served in their home and supported in their community over the past year! If you would like more information about the Community Living Program or other services available in your community, please contact our office.

Senior Project FRESH - Over 200 coupon books were distributed throughout the spring and summer of 2022. Senior Project FRESH provides free nutrition counseling and \$25 in coupons to be used at local participating farm markets for fresh fruits & vegetables. Residents who are age 60 or older and who meet certain household income/eligibility may apply for the program through our office or through our community partners. Please contact us for more information!

Direct Care Worker Premium Pay - AAA IIC providers and vendors were allocated COVID-19 relief funds to support a \$2.64 per hour wage increase. These direct care workers provided hours of personal care, homemaking, respite care and/or adult day services during and post pandemic. Over 23,800 hours were reimbursed from October 2021 - September 2022.

American Rescue Plan Act (ARPA) - The aging network in Michigan received special ARPA funding to support services for older adults as well as address unique local needs. The ARPA funds in Region IIC were used to expand local providers infrastructure & technology and purchases equipment and supplies that are not generally authorized with traditional funding sources. Network providers were able to purchase temperature-controlled vehicles to deliver home meals, senior center software programs and evidence-based disease prevention program supplies. ARPA also supported the provision of additional direct services including meals, personal care, homemaking, caregiver supports, and transportation.

Program Success - Friendly Reassurance and Gap filling services remained supportive to the needs of individuals across our communities. Friendly Reassurance calls were made regularly to address social isolation being felt by so many. Social isolation was also addressed with the purchase of IN2L Tablets and automated pets that were distributed to adult day programs, Commissions on Aging, and CLP Participants. Gap filling became essential to address unique needs that we, and our community partners, couldn't provide for otherwise. Over 2000 individuals benefitted from these supportive Services. No Wrong Door funding was utilized to purchase technology & devices in an effort to encourage older adults to virtually participate in programming, social media, and on-line learning sessions to prevent social isolation.



Population Served	
Total Population 18+	25,563
White (non-Hispanic)	24,403
African American	597
Asian/Pacific Islander	138
American Indian/Alaskan	32
Hispanic (of any race)	362
Below Poverty	1954
Rural	25,563

Special Project Funding	
MDHHS - Division of Victim Services "Services to Victims of Elder Abuse"	\$135,896
American Rescue Plan Act of the Older American's Act	\$369,773
State In-Home Services - Direct Care Worker Pay Increase	\$52,886
COVID-19 Immunization Support	\$1,337
COVID-19 Supplemental Nutrition (HDC5)	\$42,751
MDHHS - Aging & Adult Services Agency "No Wrong Door"	\$17,070

Services	Totals	Units
Operations	\$66,865	N/A
Nutrition	\$574,409	164,221
In-Home	\$377,915	22,757
Community	\$111,896	3295
Access	\$426,375	24,460
Legal	\$11,821	390

LOCATIONS

Coldwater - Branch County



**570 Marshall Rd.
Coldwater, MI 49036**
517-279-9561
Fax: 517-278-2923
Business Hours: 8-4, M-F

Hillsdale - Hillsdale County



**20 Care Drive
Hillsdale, MI 49242**
517-437-7395
Fax: 517-437-0166
Business Hours: 8-4, M-F

Sturgis - Satellite Clinic



**Sturgis Medical Commons II
1555 E. Chicago Rd., Suite C
Sturgis, MI 49091**
269-273-2161
Business Hours: 8-4,
Wed. & Thurs.

Three Rivers - St. Joseph County



**1110 Hill St.
Three Rivers, MI 49093**
269-273-2161
Fax: 269-273-2452
Business Hours: 8-4, M-F

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