Public Comment:

Consent Items:

1. Approval of the Agenda.

2. Approval of the Proposed Minutes from the April 12, 2017 Health and Human Services Committee meeting.

Action Items:

1. Senior Resources Annual Implementation Plan for FY 2018
   Suggested Motion:
   To approve and forward to the Board of Commissioners the Resolution approving the Senior Resources Annual Implementation Plan for FY 2018.

2. Resolution Opposing Legalization of the General use of Marijuana
   Suggested Motion:
   To approve and forward to the Board of Commissioners the Resolution opposing legalization of the general use of Marijuana within the State of Michigan.

Discussion Items:

1. Department Updates

Adjournment

Comments on the day’s business are to be limited to three (3) minutes.
HEALTH & HUMAN SERVICES COMMITTEE

Proposed Minutes

DATE: April 12, 2017
TIME: 9:00 a.m.
PLACE: Fillmore Street Complex
PRESENT: Allen Dannenberg, Matthew Fenske, Frank Garcia
ABSENT: James Holtvluwer and Kelly Kuiper
STAFF & GUESTS: Keith Van Beek, Assistant Administrator; Greg Rappleye, Corporate Counsel; Paula Huyser, CAA Housing Program Supervisor; Lisa Stefanovsky, Health Officer; Dr. Paul Heidel, Medical Director; Patrick Cisler, Human Services Coordinating Council Executive Director; Rachel Sanchez, Deputy Clerk; Kendra Spanjer, DHS Director; Lynne Doyle, Community Mental Health Director; Rebecca Young, Community Health Services/Health Promotion Team Supervisor; Angie Schultz, Community Health Services/Health Educator

SUBJECT: CONSENT ITEMS

HHS 17-006 Motion: To approve the agenda of today as presented.
Moved by: Fenske UNANIMOUS

HHS 17-007 Motion: To approve the minutes from the March 8, 2017 meeting as presented.
Moved by: Garcia UNANIMOUS

SUBJECT: ACTION ITEMS

None

SUBJECT: DISCUSSION ITEMS

Ms. Kuiper arrived at 9:05 a.m.

1. Rebecca (Becky) Young and Angie Schultz gave an update on the substance abuse program. Becky began by giving an overview of the program. She said that it is currently funded by LRE and they focus on preventing traffic crashes related to alcohol. Their primary focus is people ages 18-24 in Ottawa County. Angie explained that her job requires her to go out and educate businesses that sell alcohol and make sure they are aware of the protocols and rules. She said that they work very closely with law enforcement and visit problem retailers to help educate them. They also work with law enforcement to do compliance checks. On the last check, 87% of businesses were tobacco compliant and 86% were alcohol compliant. For the businesses not compliant they set up vendor improvement plans. Becky also briefly
spoke about vaping and said that they are going to start doing checks on these stores next year.

There was then a lot of discussion around a new position Lisa Stefanovsky is going to be requesting in the near future that will focus on opiate/heroin use and abuse.

2. Department Updates
   a. Public Health Department-Lisa Stefanovsky updated on position requests that she has submitted. She then passed around a booklet that the CDC published that had a little write up on the Step it up program in Ottawa County. A brief case management on lead update was given and she passed out a flier on local level work that they are doing. Lisa also said that her assistant is going to be retiring next week and she is going to miss her.

   b. Human Services Coordinating Council- Patrick Cisler updated that they have had 2 community meetings on the Age Friendly program and decided to move forward with transportation. They are looking at early May to convene a group together to work on this. The plan is to survey older adults to find out their needs.

   c. Community Mental Health- Lynne Doyle updated that they have an existing opiate/heroin task force that she is a part of. They have been meeting for over a year. She briefly talked about the four pillars they are focusing on and said that they align with the State’s focus. She also said that she recently attended a conference in Seattle and gave a presentation on the millage. She briefly spoke about 298 work group information and State budget talk for 2018 for CMH. She would encourage advocacy with local legislators. And finally she said that their accreditation is coming up in May for CARF.

   d. Community Action Agency-Paula Huyser said she is in the process of monitoring the actual processes for CARF. They are also beginning the strategic plan process. They are looking at a 3-5 year plan. She also wanted to highlight a utility assistance program they have with Consumers Energy. They match 2 to 1 for regular grant money they receive. $15,000 was able to be used to help consumers this year. She also updated that the current proposed national budget would eliminate almost all programs that CAA offers. They are watching this very closely.

   e. Department of Human Services – Kendra Spanjer gave some statistics that the Board had asked for last month on the time limited food assistance program. She said she will see the true impact numbers in May. April is child abuse prevention month and you will start to see pinwheels popping up around the County. She also updated that the State Child Services Administrator is retiring this month.

Keith Van Beek updated that the ground breaking ceremony for the Child Advocacy Center is Friday at 11:30 a.m.
SUBJECT: ADJOURNMENT

HHS 17-008  Motion: To Adjourn

The meeting adjourned at 10:22 a.m.
SUGGESTED MOTION:

To approve and forward to the Board of Commissioners the Resolution approving the Senior Resources Annual Implementation Plan for FY 2018.

SUMMARY OF REQUEST:

It is a requirement of the Michigan Office of Services to the Aging that area agencies on aging send a copy of their Area Plan and seek a resolution from County Boards by August 3 of each year. The Plan will be on the agenda of the May 24 Ottawa County Human Services Coordinating Council if they approve the plan it is recommended that this item be placed on the June 13, 2017 Board of Commissioners agenda.

The request from Senior Resources also includes a $20,000 local match for 2018 to leverage $6,760,972.66 in federal and state funds. Action on this resolution does not commit the County to that amount, but rather reserves that appropriation decision for the budget cycle later in 2017.

FINANCIAL INFORMATION:

| Total Cost: $0.00 | General Fund Cost: $0.00 | Included in Budget: | Yes | No |

If not included in budget, recommended funding source:

ACTION IS RELATED TO AN ACTIVITY WHICH IS:

- ☑ Mandated
- ☑ Non-Mandated
- ☐ New Activity

ACTION IS RELATED TO STRATEGIC PLAN:

Goal: 3: To Contribute to the long-term economic, social and environmental health of the County.

Objective: Goal 3-2: Consider initiatives that contribute to the social health and sustainability of the County and its’ residents.

ADMINISTRATION

County Administrator:

[Signature]

Committee/Governing/Advisory Board Approval Date:

Form Last Revised 6/12/2014
COUNTY OF OTTAWA
STATE OF MICHIGAN

RESOLUTION

At a regular meeting of the Board of Commissioners of the County of Ottawa, Michigan, held at the Fillmore Street Complex in the Township of Olive, Michigan on the 13th day of June, 2017 at 1:30 o’clock p.m. local time.

PRESENT: Commissioners:____________________________________________________
____________________________________________________________________________
____________________________________________________________________________

ABSENT: Commissioners:_______________________________________________________
____________________________________________________________________________
____________________________________________________________________________

It was moved by Commissioner ________________________ and supported by Commissioner ________________________ that the following Resolution be adopted:

WHEREAS, Senior Resources, the Area Agency for Aging serving the residents of Ottawa County, has filed its Annual Implementation Plan for FY 2018 ("the Plan") with the Ottawa County Board of Commissioners; and,

WHEREAS, the Ottawa County Board of Commissioners, upon review of the Plan, has determined that it is consistent with the goals and objectives of the County of Ottawa with regard to services for senior citizens, and has further determined that implementation of the Plan will protect and benefit the health, safety, and welfare of the senior citizens of Ottawa County, with County funding therefore, if any, subject to the availability of such resources in the County
NOW THEREFORE BE IT RESOLVED, that the Ottawa County Board of Commissioners receives and approves the Senior Resources Annual Implementation Plan for FY 2018, with County funding, if any, subject to the availability of such resources in the County budget, as may be determined in the sole discretion of the Ottawa County Board of Commissioners; and,

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

YEAS: Commissioners: 

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NAYS: Commissioners: 

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ABSTENTIONS: Commissioners: 

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RESOLUTION ADOPTED.

______________________________  ____________________________
Chairperson, Ottawa County   Ottawa County Clerk/Register
Board of Commissioners
Senior Resources of West Michigan
560 Seminole Rd.
Muskegon, MI 49444
(231) 739-5858 or 800-442-0054
Pam Curtis, Chief Executive Officer
Amy Florea, Community Services Director
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Senior Resources will send a copy of the 2018 Annual Implementation Plan via certified mail or email with a delivery receipt and read receipt request to each chairperson of the county commissioner’s board and the administrator of the board for each county in our region no later than April 28, 2017. In a cover letter sent to the chairperson of each board of commissioners, Senior Resources will offer to attend the County Board meeting or any subcommittee of that Board for each county in our region to respond to any questions related to the plan. The letter will indicate that if we do not hear from their local units of government prior to August 3, 2017 with a written or emailed resolution or approval, Senior Resources will assume their board’s passive approval of the plan.
Approved Multi-Year Plan Highlights

1. A brief history of the area agency and respective PSA that provides a context for the MYP. It is appropriate to include the area agency's vision and/or mission statements in this section.

Senior Resources was designated as an Area Agency on Aging in 1974 by the State of Michigan to administer the federal Older Americans Act and the Older Michiganians Act funding. Senior Resources has served West Michigan for over 40 years as the gateway to local resources, planning efforts and services to help older adults, their families and caregivers in Muskegon, Oceana and Ottawa Counties.

It is the vision of Senior Resources to promote lifelong dignity and independence. That vision coupled with our mission of providing a comprehensive and coordinated system of services designed to promote the independence and dignity of older persons and their families - a mission compelling us to focus on older persons in greatest need and to advocate for all - guides our purpose.

Senior Resources serves as a focal point and acts as an advocate for the elderly by advancing causes or issues that are vital to their welfare. It is a goal of the agency to inform and educate seniors, families and the public on available services and issues affecting older adults. In addition, Senior Resources staff is active in many local, regional, and statewide groups and organizations. From advocacy at the national and state levels, to partnering with a local senior center or food bank, we recognize the need to be active and involved in all aspects of our community.

We directly provide a variety of services that support individuals, families, and caregivers in the form of case management and options counseling. Our staff talk with thousands of individuals to assist them in gaining information about local services and to access support.

Services provided through contracts include: Long Term Care Ombudsman Program, congregate nutrition, home-delivered meals, adult day care, transportation, legal services, respite care, in-home personal care, kinship and family caregiver support.

It is the agency’s specific goal to effectively implement the Older Americans Act by developing and administering a regional area plan for coordinating and contracting with viable agencies for services for persons 60 years and older. The Area Plan outlines a considerable amount of information about our communities such as a demographic overview and provider and service systems, as well as multi-year planning objectives and the 2017 projected expenditure proposals.

2. A summary of the area agency's service population evaluation from the Scope of Services section.

In Region 14 there is an estimated 92,000 people over the age of 60, approximately 18.5% of the total population. 29% of people age 60+ in the Region have a disability and 7% have income levels below poverty. 16% have an income below 150% of the poverty level. Between 2010 and 2013 the population of seniors in Region 14 increased by 1% annually.

There are 6,755 older adults in rural Oceana County, and while the number of older adults living in this community is relatively small, these areas can be very difficult and costly to serve. Aging adults in these communities may face additional barriers to remaining in their homes, staying active, and engaging in the local community, all resulting in increased risk of becoming isolated.
Senior Resources

Within this planning timeframe, fiscal years 2017-2019, approximately 32,023 people in the PSA will turn age 60. This will equate to a 35% increase of people over the age of 60 Region-wide. The sheer number of older adults within the population is increasing dramatically as the baby boomer generation continues to move into retirement age. This significant, new, demographic shift brings not only challenges, but new opportunities as well. Senior Resources strives to engage our community, provide leadership in advocacy and education, and challenge ourselves and community partners to think and act creatively in these unique times.

3. A summary of services to be provided under the plan which includes identification of the five service categories receiving the most funds and the five service categories with the greatest number of anticipated participants.

In home services sufficient to assist older adults and their caregivers to remain in their environment of choice continues to be the focus of service delivery. Home delivered and congregate meals, respite care, adult day services and homemaking are the top funded service categories and they remain the services with the highest anticipated number of participant utilization.

Individuals in need of homecare services must become clients of either one of the Case Coordination & Support programs or the Care Management program in order to receive services through our Purchase of Service system. Participants choose from a group of contracted personal care, homemaking, in-home respite, and adult day care providers. Supports coordinators, along with the participant and the participant’s support team, consider the person’s physical, social and financial needs and then, if applicable, make arrangements for in-home services including: home delivered meals, personal care, in-home respite, homemaking, medication management, personal emergency response systems and adult day care. If necessary, transportation services can be arranged, Medicare, Medicaid and other insurance counseling can be provided with additional assistance available through the MMAP Program. Referrals are also made to other applicable community programs.

Throughout the public input process, feedback was provided by the attendees that indicated that navigation of available resources and services is a critical part of essential services for older adults and/or their support team. Our Supports Coordinators and Options Counselors are trained to provide the person and/or their support team with the knowledge, navigation and coordination of all available resources while taking into account the desires of the person and their support team.

Senior Resources has four Options counselors and we have incorporated their service into the Intake Process. Callers identified at the time of the initial contact with an Options Counselor as a candidate at risk for nursing home placement are referred to the appropriate program immediately. The Options counselors role is to not only explain someone’s long term care options, but also initiate a discussion on a person’s personal finances/resources and how to best utilize them to make them last for as long as possible and still allow the person to remain in the setting of their choice. Upon hire, Supports Coordinators and Options counselors receive training in long term care options and Senior Resources will continue to provide opportunities for them to enhance their training as an element of ongoing core competency training.

Supports coordinators and/or options counselors will also assist clients in accessing other services funded through Senior Resources such as Long Term Care Ombudsman, Caregiver Support, Health Promotion/Disease
Senior Resources

Prevention, and Kinship Care. If a need is identified that cannot be met through Senior Resources, the options counselors and/or supports coordinators will refer the person to the community service provider that can meet their need or will make the referral with permission from the person or designee.

4. Highlights of planned Program Development Objectives.
During the next three year planning cycle, much emphasis is being placed on good nutrition, socialization and wellness opportunities. Our objectives, in partnership with our meal provider AgeWell Services, are to enhance methods in which food is procured, prepared and delivered. In the congregate meal setting, attention will be paid to promoting socialization in ways that appeal to the younger senior as well as meet the needs of the people who have been attending the center for years. We wish to incorporate evidence based wellness opportunities within local communities where older adults are already present. These wellness opportunities will be in response to input from the seniors and their request to know more about a particular area of health.

As advocates for older adults, we wish to promote the prosecution of those who commit elder abuse in our region, statewide and nationally. To address the prosecution of elder abusers in our region, two task force subcommittees of the Tri-County Protection team will develop protocols, by county in Muskegon and Ottawa, which will aid in the investigation of elder abuse cases and assist the prosecutors in holding the offenders accountable. In addition, the Tri-County Protection team will begin a weekly or as needed news e-blast to keep the community apprised of all potential scams and have community trainings scheduled throughout the PSA.

The unprecedented demographic transition underway in the region will require that organizations and individuals take action to support independent, healthy aging for older adults throughout the region. There are many potential stakeholders who are either unaware of the dramatic increases in older adult population or do not fully understand the magnitude of the impact. Ensuring that our region can support healthy aging will be built on local responses that recognize changing conditions and implement appropriate solutions in many unique settings. Senior Resources will support a network of local leaders who carry the message of livable communities throughout the region, as well as promote opportunities for communities to support healthy aging through local millages.

Participants in the AAA’s community conversations consistently ranked transportation in the top three when asked to prioritize services most critical to helping them age at home, and many low-income and homeless seniors said public transportation and special transit services were the only ways they could access medical services and food banks. The need for transportation options will grow along with the expanding senior population. The region’s ability to help people stay in their own homes as they age will be directly correlated to the transportation services available to them. When livable communities or the addition of affordable housing is being explored by community leaders it is vitally important to advocate for suitable transportation that is functional for all.

As the population ages and more and more people are being cared for by family caregivers, Senior Resources is looking for ways to better support the caregiver with education, training, emotional support, and services. We are advocating at a state level for caregivers to have greater access to information and training after their person has had a hospital or long term care admission. Senior Resources plans to collect information of particular interest to caregivers and have it available in various mediums for ease of access.

It has been shown that chronic illness and multiple emergency room visits commonly results in seniors who are particularly vulnerable to hospital readmissions. Using an evidence based program, Senior Resources plans to
expand our partnership with local health care organizations to provide follow up care for 30 days after an ER visit to eligible seniors in the way of support coordination, medication review, and transportation to physician visits, meals and Personal Emergency Response systems. This effort is proven to support seniors in their home as they gain strength and health.

5. A description of planned special projects and partnerships.
Senior Resources’ Board of Directors, staff, and stakeholders have placed a high significance on and included in our agency mission the priority to provide services to the persons most in need. To meet that mission, we partner with over 90 In-Home Care Agencies that are located in and/or provide care throughout our three-county area. In-home services, including personal care, homemaking, respite, and home-delivered meals, remain priority services as well as adult day care and caregiver services. Senior Resources will continue to work with all relevant collaborative bodies to insure that services reach the frailest elderly. We work closely with the established four focal points that are situated throughout the region, two of them councils on aging, one senior wellness center and the AAA.

Senior Resources has been a contracted partner of Pathways since its conception in 2012. The Pathways to Better Health Program was developed from a grant received by Michigan Public Health Institute (MPHI) from the Centers of Medicaid and Medicare (CMS) Innovations Awards. The proposal introduced the role of the Community Health Worker (CHWs) embedded within social service agencies throughout program regions. Muskegon Health Project partnered with MPHI to administer the program in Muskegon, Oceana and Northern Ottawa County. In 2015, the Pathways program approached Senior Resources to dedicate 2 CHWs to a new program. The Care at Hands Program was developed from a grant received by Dr. Stein, CMO Continuing Care with Trinity Health. The Care at Hands model serves Medicare/Medicaid recipients who are hospitalized, transitioning to a skilled nursing home, and then back to the community. A Community Health Worker follows the person for a 90 day period in which they will complete weekly surveys with the participants. The surveys will serve as a tool to track the health outcomes and issues a participant is experiencing. The Community Health worker will connect the participant to programs, resources, and education to improve their health outcomes and reduce risk of re-hospitalization. In addition, the Community Health Worker will collaborate with an RN clinical supervisor regarding identified issues impacting the participant’s success to transitioning and remaining in the community. Senior Resources is currently contracted for 2 full time employees dedicated to the Care at Hand Program. The request for services is expected to continue to grow with the rapidly aging population.

The amount of funding Senior Resources receives for services does not keep up with demand. To help alleviate some of the excess demand and at the suggestion of the Administration of Community Services, Senior Resources is partnering with CST Technology. This partnership affords us an opportunity to participate in a private pay Personal Emergency Response System that will provide subscribers and their family members with access to a professionally staffed call center for all their care needs, not just those related to an emergency. Due to CST Technologies’ relationship with N4A, this partnership is a way for Senior Resources to gain revenue that is returned back into service delivery.

We continue to work with a variety of volunteer programs and youth summer camps to provide an assortment of chore services. Senior Resources Board of Directors has committed the use of our interest income to support the unmet needs program. We use these funds to purchase items such as dentures, glasses, furnace repairs, ramps, appliances, and emergency transportation.
Senior Resources

Senior Resources contracts with CALL 2-1-1 as our first step in the continuum of care. CALL 2-1-1 is a 24 hour/7 days a week information and assistance call center with call specialists trained in helping families clarify their situation and identify the best solutions. This Information and Assistance is available region-wide. A phone call provides access to information and assistance regarding in-home services, case coordination & support, Care Management/Medicaid Waiver programs, insurance, prescriptions, taxes, transportation, support groups, home repair, housing, and a host of other community services. When the call warrants, a transfer is made to a Senior Resources Options Counselor who can listen to the caller’s story, provide education, explore options, and make appropriate referrals as needed.

Several of our contractors and Senior Resources are recipients of United Way funds. Senior Resources will continue to work closely with the United Ways in an effort to provide the broadest amount of service coverage possible. The combination of United Way and Senior Resources funds allows many providers to enhance and expand the amount of service they are providing, rather than duplicate it.

In the Senior Resources service area Oceana County and several townships in Ottawa County receive millage service dollars. The Oceana County Council on Aging and Four Pointes Center for Successful Aging (Ottawa County) are recipients of millage funds in their areas. These funds are used to cover operating expenses for all services and support existing programs within the Councils on Aging. Without these funds both agencies would be forced to cut back or eliminate services to older adults in their areas. Muskegon County will have a senior millage request on the August 2016 ballot.

In Ottawa County, Senior Resources is a member of the Ottawa County Human Resource Council where many community agencies collaborate, including the Community Action Agency. The Community Action Agency carries out the oversight role of the Senior Resources Ottawa County matching funds. Involvement in the Muskegon and Ottawa Human Service Coordinating Councils raises knowledge level of service availability and prevents duplication of services. Senior Resources works with the Public Health Departments on several community collaboratives. In Ottawa County, the Food Policy Council is working to improve healthy choices and special diet options in food pantry selections with an emphasis on training the pantry volunteers in assisting consumers with choices to accommodate special diets. In addition, Senior Resources is part of the Muskegon County Collaborative in which the Muskegon County Health Department is also a member and their executive director is the secretary/treasurer of our Board of Directors.

The Aging and Disability Resources Collaboration of the Lakeshore was granted operational status from the Aging & Adult Services Agency in September 2014. Senior Resources, along with the two Centers for Independent Living (CIL) that function within the PSA, meets twice a year to set the direction of the ADRC, explore ways to better enhance the referral process and decrease the need for community members to tell their story to many different referral sources. In addition to partnering with the CILs in the ADRC capacity, Senior Resources also works in partnership with the CILs in the region to provide the NFT, money follows the person initiative.

We are pleased to have an ongoing partnership with the Muskegon County Sheriff’s Office to offer the Project Lifesaver program in Muskegon County. Project Lifesaver is for people living with severe brain injuries or diseases such as Alzheimer’s, Dementia, Down’s syndrome, or Autism. Individuals who are prone to wander as a result of their disease or injury or become disoriented and confused when in the community are eligible for this
Senior Resources

program. There are similar programs in all three counties in the PSA and our marketing has been expanded to include all programs in the region that will locate those that wander. The Muskegon County Volunteer Search and Rescue Unit has joined the partnership and we are happy to work with this important branch of law enforcement and emergency personnel.

6. A description of specific management initiatives the area agency plans to undertake to achieve increased efficiency in service delivery, including any relevant certifications or accreditations the area agency has received or is pursuing.

Senior Resources is currently seeking Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation. CARF accreditation is evidence that an organization continually strives to improve efficiency, fiscal health and service delivery. We are proud of the quality services we deliver and CARF accreditation will further demonstrate that our agency meets internationally developed quality standards and maintains a client-centered focus. In addition, our board of directors and management team recognized that accreditation is increasingly being required as a baseline for organizational contracting with health insurers, government, and other interested stakeholder entities. Our tentative CARF assessment dates are May 2 & 3, 2016.

Senior Resources has embraced the concept of value stream mapping to assist us in discovering processes that could be streamlined and areas of waste that could be eliminated. Through this method Senior Resources has identified areas of inefficiency within our internal processes and created new procedures which have limited the redundancies. In addition, we are committed to continuous improvement using this method and are expanding the process to include our interactions with participants and providers.

7. A description of how the area agency’s strategy for developing non-formula resources (including utilization of volunteers) will support implementation of the MYP and help address the increased service demand.

Graduates of Health Promotion Disease Prevention (HPDP) workshops are encouraged to become trainers for the workshop that they attended. We find that alumni of the programs are our greatest champions of the workshops as they have experienced the positive results of participation. For two of the HPDP workshops (Matter of Balance and Diabetes PATH), Senior Resources will compensate the volunteers with a stipend upon successful completion of a workshop.

Senior Resources maintains a Memorandum of Understanding with the Retired and Senior Volunteer Program of West Michigan. This Program assists us in locating appropriate volunteers for our MMAP counselors as well as lay leader and coaches for our evidence based programs.

Senior Resources has an unmet needs fund for those services or products which participants cannot access through standard means. This fund has limited availability and is reserved for participants in the case that all other community service agencies’ aid has been exhausted.

Senior Resources is thrilled to have over 30 volunteers specifically trained to facilitate the Medicare/Medicaid Assistance Program (MMAP). Without these volunteers, the MMAP program would not be functional. Senior Resources spends a considerable amount of time in outreach, soliciting additional volunteers to meet the needs of the MMAP program.
For those participants who are able to use personal resources to pay for care, Senior Resources offers a private pay component to our case management program.

8. Highlights of strategic planning activities.
Senior Resources has established an ongoing strategic planning process by which it translates its mission and values into actionable and measurable goals, strategies, initiatives, and programs. The plan provides direction for both long and short-term decision-making by the Board of Directors and senior leadership to fulfill the mission of the organization and make choices among competing demands for capital investment, philanthropy, facilities, and human resources. The most recent strategic planning session took place in 11/15 and was attended by Board members, management team and employees from all departments/levels within Senior Resources.

The three year written, Board-approved Strategic Plan incorporates the following components:
· Mission statement
Values statement
Long term vision statement
Community health needs and assets assessment
Environmental factors assessment
Critical assumptions about the future
Major initiatives and goals (time horizon- 2-3 years)
Data gathering may include input from :
· Community health needs and assets assessment
Environmental assessment, including national, state and local trends in grant funding and advocacy efforts; payment systems; competitive market; capital financing; technology; staff; etc.
· Opinions of organizational leaders, including the Board of Directors, senior executive team, clinical staff, and operating unit/department managers
· Expert panels of community and industry leaders
· Opinions of local community and stakeholder leaders.
· Client and caregiver satisfaction surveys
· Senior Advocates Coalition
· Annual performance reviews/feedback by State and Federal regulatory
· Annual plan and goals (time horizon – 1 year)
Standard format for cascading overall strategic plans and goals into aligned plans for departments, managers and employees
· Strategic performance measurement report format
Active engagement in the process at all levels of the organization.

Using this process and the input provided, Senior Resources has identified three main areas of focus in which all strategic planning goals will be categorized: Area Planning & Program Development; Access to Supports & Services; Advocacy - Local, State & Federal. Under these categories, goals, key strategies, identified action items, measurable objectives, actions needed for success, barriers to success, timeframe, and focus area/responsibility are identified and tracked for reporting to follow agency progress as well as report to various stakeholders and public.

The full Board-approved strategic plan is attached to this document in the appendices.
Senior Resources

2018 AIP Highlights

In addition to the goals listed in the multi-year plan during the next year Senior Resources plans to address three additional areas of interest.

Recognizing that those who suffer from chronic pain tend to have higher rates of depression, anxiety, sleep disturbances and other physical manifestations, Senior Resources will begin to offer an evidenced based pain management workshop. Within the next year we will identify a pain management curriculum, train staff and volunteers in the facilitation of the curriculum and conduct a minimum of 2 workshops aimed to assist participants in identifying and implementing effective pain management interventions.

In cooperation with the National Area Agency on Aging Associations campaign to combat social isolation, Senior Resources will strive to will raise awareness of the problem of isolation and loneliness in several ways, including one-on-one counseling with our participants, leveraging traditional and social media to spread the word about the effects of social isolation and encouraging community awareness and intervention.

Maintaining relevance through the rapidly evolving roles of Health Care Plans is one of the Aging Networks and Senior Resources most pressing opportunities. As plans transition from paying for volume to paying for value, providers have incentives to ensure that their patients’ care plans are reinforced and supported outside the clinical setting in their homes and communities. To create a link between the medical and home settings, health care systems will develop a structure in which they can provide the connection or seek partnership with organizations that are established in this service. This presents a decisive opportunity for the Aging Network. We must expand Health Care Plan's and lawmakers knowledge base of the established supports coordination we have provided for years. Over the course of the next year we will be coordinating with our state association to to track and demonstrate improved outcomes due to our interventions, quantify how this will relate to a return on the on investment with us anc emphasize that we have current systems in place to address this need.

Senior Resources received a 3 year accreditation through the Commission on Accreditation of Rehabilitation Facilities (CARF) on May 31, 2016. We are committed to continuous improvement in our internal and participant processes and proud of the quality of services we deliver to the community.
A public hearing was held on April 13, 2017 at Tanglewood Park in Muskegon. A formal presentation was made during the public hearing outlining Senior Resources FY18 AIP goals and priorities. Input during the public hearing included:
An attendee indicated that Senior Resources requesting funds to directly provide Health Promotion/Disease Prevention services is a good idea.

The public hearing press release was sent to:
100.9 radio
iHeart radio (several local stations)
Cooperating Churches
Muskegon Chronicle/mLive
Grand Haven Tribune
Muskegon Tribune
White Lake Beacon
Holland Sentinel
WZZM
NewsTalk 1090 radio
Norton Lakeshore Examiner
Oceana’s Herald-Journal
103.7 The Beat radio
Ludington Daily News
The Morning Show WGVU radio
The Senior Resources website
TheSenior Resources and Tanglewood Park Facebook pages.
Case Coordination and Support

Starting Date 10/01/2017  Ending Date 09/30/2018
Total of Federal Dollars $112,899.00  Total of State Dollars $107,000.00

Geographic area to be served
Muskegon

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

Goal: Supports Coordinator will employ Person Centered Thinking to assure participant choice in services and providing agencies or support persons.
Outcome: Participant will have greater autonomy regarding their care resulting in a higher satisfaction rate and continued compliance.

Goal: Supports Coordinators will assist the participant and their family in identification of natural supports, personal resources and other community/external resources available for long-term care.
Outcome: Participant will have awareness of and access to community support services.

Goal: Case Coordination & Support participants will be moved to Care Management or MI Choice/Waiver as frailty increases and eligibility becomes evident.
Outcome: Participant will have greater ease of access to services.

Care Management

Starting Date 10/01/2017  Ending Date 09/30/2018
Total of Federal Dollars  $108,913.00
Total of State Dollars

Geographic area to be served
Muskegon, Oceana and Ottawa

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

Goal: Support Coordinators will employ Person Centered Thinking and self-determination to assure consumer choice in services and providing agencies or support persons.
Time Line: Through September 30, 2018
Outcome: Participants will have greater autonomy regarding their care resulting in a higher satisfaction rate and continued compliance.

Goal: Supports Coordinators will assist the consumer and their family in identification of natural supports, personal resources and other community/external resources available for long-term care.
Time Line: Through September 30, 2018
Outcome: Consumers will have awareness of and access to community support services.
Senior Resources

Goal: Care Management participants will be moved to Targeted Care Management or MI Choice/Waiver programs as frailty increases and eligibility requirements are reached.
Time Line: Through September 30, 2018
Outcome: Consumers will have greater ease of access to services.

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<tr>
<th>Metric</th>
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<td>Staff to client ratio (Active and maintenance per Full time care)</td>
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Direct Service Request

Disease Prevention/Health Promotion

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<td>Total of State Dollars</td>
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Geographic Area Served     Muskegon, Oceana and North Ottawa

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

Goal: Provide opportunities to participants which can assist them in finding practical ways to deal with pain and fatigue, discover better nutrition and exercise choices, understand treatment choices, create weekly action plans, share experiences, and learn better ways to talk with their doctor and family about their health.

Activities: Senior Resources will continue to develop a volunteer base of coaches and lay leaders who will provide various evidenced based workshop throughout the PSA. Employees will participate in train-the-trainer opportunities as a way to assure the perpetuation of the programs.

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

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

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

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

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

The request for proposal process yielded few applying organizations and a lack of variety in workshop programming in Muskegon, Oceana and North Ottawa Counties. To ensure that seniors living in these areas have access to evidenced based workshops Senior Resources proposes to directly provide desired workshops.

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

This direct service request was highlighted at the 4/13/17 Public Hearing. The response was that it was a good idea to have Senior Resources train master trainers who can train lay leaders thereby perpetuating the health promotion/disease prevention programs.
Area Agency on Aging Goal

A. Improve the health and nutrition of older adults.

State Goal Match: 1

**Narrative**
During the next three year planning cycle, much emphasis is being placed on good nutrition, socialization and wellness opportunities. Our objectives, in partnership with our meal provider AgeWell Services, are to enhance methods in which food is procured, prepared and delivered. In the congregate meal setting, attention will be paid to promoting socialization in ways that appeal to the younger senior as well as meet the needs of the people who have been attending the center for years. We wish to incorporate evidence based wellness opportunities within local communities where older adults are already present. These wellness opportunities will be in response to input from the seniors and their request to know more about a particular area of health.

**Objectives**

1. Objective: Streamline kitchen, inventory, and purchasing processes to realize efficiencies.
   
   **Timeline:** 10/01/2016 to 09/30/2017

   **Activities**
   Activities: AgeWell Services will engage a Six Sigma Lean consultant volunteer to assess their kitchen processes and identify areas of improvement that will lend itself to efficiencies. They will also research national best software products that can assist the kitchen staff in managing inventory. In addition, AgeWell Services intends to work with local food sources and growers to explore opportunities for food gleaning or second harvest. The staff will develop local relationships with these growers/food sources to reduce food costs and provide fresh food items – working to be more purposeful regarding access to local foods.

   **Expected Outcome**
   Fiscal efficiencies regarding home delivered and congregate meals can be realized while improving consumer nutrition and satisfaction and utilizing local food sources

   **Progress**
   AgeWell Services is seeking a LEAN consultant to review food service improvements with a target start date of summer 2017.
   After extensive research, AgeWell found ServTracker, an on-line data management system designed for senior meal programs. Funding was secured from the Glick Foundation, Community Foundation for Muskegon County and private donors. Software will be implemented in August 2017.
   AgeWell Services was a recipient of HEALTHY Muskegon funds from the Community Foundation for Muskegon County through the Michigan Health Endowment Foundation. This venture has developed relationships with other grantees working on second harvest initiatives in partnership with Pioneer Resources and the Muskegon Farmers Market.
   AgeWell is part of the Muskegon Food Hub, a collaborative effort of the Muskegon Farmer’s Market, Cherry Republic, USDA Farm-to-School Initiative, City of Muskegon and Kitchen 242 to purchase and process Michigan
produce for Meals on Wheels and Congregate Meal sites. The summer 2017 pilot will focus on lettuce, snap peas, spinach and asparagus. AgeWell Services is currently seeking funding to hire two part-time food preparation, second shift team members to prepare the inventory.

2. Increase participant satisfaction regarding HDM meal choice while maintaining the vital daily well check
   Timeline: 10/01/2016 to 09/30/2017

Activities
AgeWell Services will pilot select home delivered meal routes to implement options related to menu choice. These meal choices will include ethnic, therapeutic, and a variety of other meal selections. On these routes, meal delivery will not occur each day but more likely once per week. However, as we believe that the daily well check is an important part of the home delivered meal they will explore other options to ensure the daily health well check is performed. This may take the form of phone call, text message, email, etc.

Expected Outcome
We expect that with the implementation of this objective we can increase participant satisfaction and fiscal efficiencies while maintaining a daily well check with the participant.

Progress
AgeWell Services has worked to eliminate barriers to prepare for a Choice Meal system. One important barrier is funding the new ServTracker software. Second, we need a large, walk-in freezer which is estimated to cost approximately $40,000. They will begin seeking funding for this project in the summer of 2017. Site visits to other Michigan Meals on Wheels programs offering choice will take place no later than Fall 2017. AgeWell staff will engage in discussions about best practices.

3. AgeWell Services will increase/maintain participant satisfaction with meal products while realizing raw food cost savings.
   Timeline: 10/01/2016 to 09/30/2017

Activities
AgeWell Services will implement increased scratch cooking on select menu items in their kitchens for home delivered and congregate meals.

Expected Outcome
We expect that the participants' satisfaction with meals will remain the same or increase with the implementation of scratch cooking. In decreasing the amount of prepared food that is purchased we believe that raw food costs will decline.

Progress
AgeWell Services is currently producing meals that are 50% scratch; our goal is to be at 80% scratch cooking. A new internal committee will be created to develop new recipes for main and side dishes.

4. Assess congregate sites for viability.
   Timeline: 10/01/2016 to 09/30/2017
Senior Resources

Activities
AgeWell Services will evaluate current meal sites and consolidate sites as needed. They will facilitate the transition by providing transportation opportunities and other incentives.

Expected Outcome
Consolidating meal sites will allow the remaining sites to enhance and expand wellness, enrichment, and workshop opportunities.

Progress
In December, AgeWell closed their oldest meal site. Fellowship Church in east Muskegon County ran successfully for 40 years consecutively but has suffered dramatically from attendance. AgeWell Services is seeking new partnerships, especially in targeted areas of poverty or high concentrations of Hispanic and African American populations. AgeWell expanded offerings in Jenison at Georgetown Senior Connections by providing an on-site cook at this brand new senior center. Attendance numbers continue to grow at this site. AgeWell also partnered with The Ladder in Shelby located in Oceana County. This rural community has a generous underserved senior population with a high rate of food insecurity. The Ladder is a multi generational community center.

5. Make congregate meal sites more attractive to baby boomers.
   Timeline: 10/01/2016 to 09/30/2017

Activities
Using best national best practices, AgeWell Services will implement ideas such as dinner clubs, theme meals/events or cooking the meal together to draw younger seniors to the site. In rural areas where there are underserved participants, this goal may take the form of discount dining.

Expected Outcome
Congregate meal site attendance will increase and the average age of attendees will lower.

Progress
AgeWell Services added two new important positions: Congregate Meal Site Manager and Mission Services Senior Manager. Supported by the Director of Mission Services, this team is responsible for the oversight of all AgeWell Services meal locations. In addition to supporting the Meal Site Coordinators, they are creating a strategy for implementing unique programming.
In the Spring 2017, they plan to conduct a postcard mailing to all adults who attended the DTE Holiday Meals event, inviting them to an “invitation only” event at our meal sites.

6. To support older adults in the management of their chronic conditions and provide opportunities to encourage them to lead healthy lifestyles.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Senior Resources will continue to coordinate with community partners to provide ongoing evidence based health promotion workshops. Also, we will explore, using input from older adults and their support persons, which
Senior Resources

additional workshops garner the most interest and implement based on funding.

Expected Outcome
People with chronic conditions who learn how to manage their symptoms can improve their quality of life and reduce their health care costs. In addition, an active healthy lifestyle can help older adults prolong their independence and improve their quality of life.

Progress
During 2017 Senior Resources and our community partners are scheduled to provide 30 evidenced based prevention/management workshops throughout the region with a potential reach to over 300 older adults. In speaking with seniors and conducting gap analysis with organizations that serve seniors it has become clear that there is community interest in programs such as Arthritis Tai Chi and Enhanced Fitness. These programs are available in some areas of our region but not all with the barrier being access to trained leaders. Senior Resources is actively seeking a Certified Fitness Instructor who would train in the programs and conduct workshops in the undeserved areas.

7. To support older adults in the management of their medications.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Senior Resources will implement the evidence based program HomeMeds. Older adults receiving in-home services will have access to a medication review.

Expected Outcome
We believe that employing this program with our in-home participants will limit unnecessary therapeutic drug duplication, thereby reducing falls, dizziness, or confusion possibly caused by inappropriate psychotropic drugs or drug mixes. The final expected outcome would be to reduce unnecessary hospitalization.

Progress
Senior Resources continues to explore the feasibility of implementing the HomeMeds or other medication review program in our region. In the past year we have met twice with representatives from Walgreens to discuss a potential partnership. For planning purposes pharmacists from Walgreens have accompanied a support coordinator on a home visit to assess how medication lists are obtained. Analysis of the viability of this partnership is ongoing.

B. Protect older adults from abuse and neglect.
   State Goal Match: 3

Narrative
As advocates for older adults, we wish to promote the prosecution of those who commit elder abuse in our region, statewide and nationally. To address the prosecution of elder abusers in our region, two task force subcommittees of the Tri-County Protection team will develop protocols, by county in Muskegon and Ottawa, which will aid in the investigation of elder abuse cases and assist the prosecutors in holding the offenders accountable. In addition, the Tri-County Protection team will begin a weekly or as needed news e-blast to keep the community
Senior Resources

apprised of all potential scams and have community trainings scheduled throughout the PSA.

Objectives

1. Form investigation teams to aid in elder abuse investigations.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Two task force subcommittees of the Tri-County Protection team will develop protocols, by county, that will aid in the investigation of elder abuse cases and assist the prosecutors in holding the offenders accountable. These task forces will consist of multi-disciplinary teams and provide support for case reviews as well as input.

Expected Outcome
There will be a higher level of successful prosecutions of elder abuse cases in the PSA.

Progress
AgeWell Services has just developed a new, 8 hours per week part-time person dedicated to being the Tri-County Protection Team Coordinator. Her responsibilities will include the planning and implantation for the A-TEEAM (A Team to Ending Elder Abuse in Muskegon), a multi-disciplinary team coordinated in collaboration with the Muskegon County Prosecutor’s Office, law enforcement and Adult Protective Services. The Coordinator will help the team author the county-wide elder abuse investigative protocol, engage stakeholders, implement a case review process and engage law enforcement in training. We hope to have the protocol authored by Summer 2017, training and case coordinator by Fall/Winter 2017.

The team is currently seeking funding to expand staffing, training and a dedicated deputized detective to investigate elder financial fraud and sexual abuse cases.

2. Explore national best practices in regards to and implement an elder death review team.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Explore national best practices and if indicated, establish an interagency elder death review team. This team will help local agencies identify and review suspicious elder deaths and facilitate communications among people who perform autopsies and people involved in the investigation or reporting of elder abuse or neglect.

Expected Outcome
Results from the death review teams findings can be used to educate the public about the potential deadly outcome of elder abuse. Second, it can help to identify patterns—known as lethality factors—of both perpetrator behavior and victims’ situations that contribute to untimely deaths. This knowledge may eventually be used to more accurately predict risk, resulting in earlier intervention and, in some cases, preventing death.

Progress
AgeWell Services will explore this effort in early 2019 once the A-TEEAM has been implemented and show results.
Senior Resources

3. Educate the public regarding elder abuse and scams
   Timeline: 10/01/2016 to 09/30/2019

Activities
The Tri-County Protection team will send out a weekly e-blast outlining any pertinent abuse or scam information. These e-blasts are sent to older adults, their family members, community organizations, financial institutions, etc. In addition, the team will hold 3 public education sessions in the next year as well as continue to recruit target organizations for team membership.

Expected Outcome
The public and community organizations and businesses within the PSA will have a heightened awareness regarding elder abuse and scams and how to report it.

Progress
The Tri-County Protection Team hosted a new format for training called the “Senior Symposium” with a theme of “Protecting Your Identity”. We plan to repeat this event in September 2017 with a focus on isolation and loneliness. There is a strong correlation of loneliness and “sweetheart” financial fraud, which is an emerging concern in protecting vulnerable adults.

The team is also planning a “Provider’s Conference” in July 2017 which will focus on the same topic from a clinical perspective. Dr. Abore from San Diego, California will be our keynote speaker.

C. More communities in the PSA will conduct an aging-friendly community assessment and apply for recognition to AASA as a Community for a Lifetime.
   State Goal Match: 0

Narrative
The unprecedented demographic transition underway in the region will require that organizations and individuals take action to support independent, healthy aging for older adults throughout the region. There are many potential stakeholders who are either unaware of the dramatic increases in older adult population or do not fully understand the magnitude of the impact. Ensuring that our region can support healthy aging will be built on local responses that recognize changing conditions and implement appropriate solutions in many unique settings. Senior Resources will support a network of local leaders who carry the message of livable communities throughout the region, as well as promote opportunities for communities to support healthy aging through local millages.

Objectives

1. Advocate with local governmental and planning agencies to ensure that an adequate supply of affordable rental and ownership housing options are available in order to meet current and projected needs of older adults promoting aging readiness in community settings. One new community with our PSA will receive recognition as a Community for a Lifetime by 9/30/19.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Advocate and collaborate for the production of data necessary for the region’s planning purposes, particularly with regard to older adults and special needs populations. Special emphasis for advocacy will be given to access to
Senior Resources

transportation and healthcare. Older adults who lose the ability to drive are often left at home isolated, with their personal and physical needs unmet, because of too few transportation options – or none at all. In addition, lack of integration between housing and healthcare increases costs and puts the independence of older people at risk. Unfortunately, especially in rural areas, healthcare infrastructure is not readily accessible to many of the most vulnerable older adults. When appropriate, we will advocate to facilitate collaborations between housing and health providers to link residents of affordable senior housing properties with health and other supportive services.

Expected Outcome
Advocating for affordable housing and strategies that will provide the necessary resources to help meet the health and social service needs of elderly and younger disabled residents and support them to age successfully in their homes and communities. Focusing not just on individual older adults, but also the communities in which they live, will further seniors’ ability to live independently and contribute to their communities.

Progress
Senior Resources CEO is one of a four-member organizing team that initiated a community effort in southern Ottawa county called Building an Age-Friendly Holland/Zeeland. Two forums have been held with 40-50 individuals representing human service organizations attending. The clear message is that lack of affordable housing and transportation are substantial barriers to community living, not only for older adults but for all persons living in the area. Ottawa county is fortunate to have a group already formed related to housing concerns called Ottawa Housing Next. This group is part of the Building an Age-Friendly Holland/Zeeland and will be reporting out to the larger group as their work takes shape. A transportation task force is being developed with the anticipated convening date of 5/17.

D. **Enhance caregiver efficacy by providing improved access to information and resources.**
State Goal Match: 0

Narrative
As the population ages and more and more people are being cared for by family caregivers, Senior Resources is looking for ways to better support the caregiver with education, training, emotional support, and services. We are advocating at a state level for caregivers to have greater access to information and training after their person has had a hospital or long term care admission. Senior Resources plans to collect information of particular interest to caregivers and have it available in various mediums for ease of access.

Objectives

1. Enhance caregiver efficacy by providing improved access to information and resources.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Develop a toolkit to provide to caregivers as they are identified. The toolkit will provide introductory information regarding community resources as well as practical applications for caregivers caring for their person. This toolkit will be available on our website as well as available to working caregivers at their worksites.

Expected Outcome
We believe that caregivers provided with information that can ease their caregiver burden will be in better health...
and less depressed. This will result in the caregiver benefitting more from supportive services and interventions that will fill the gap that currently exists between the overwhelming amount of information and the overworked caregiver.

Progress
Senior Resources has instituted a new training format for the Tanglewood Park Caregiver Support & Training group. The first 30 minutes of the meeting is a training that follows the information highlighted in the book, Quick Tips for Caregivers, Marion Karpinski, R.N. We provide the book for attendees for a fee or a lending library is available for them to borrow the book. The final hour follows more of a traditional support group format with group members engaging in mutual sharing and learning.

Our intention is to translate the information shared by the training experts into a tool kit available on our website for download. Much of the supplemental information shared is in written form and can easily be replicated or placed onto a webpage. In addition, we have updated our website to include national and local links to services and supports specific to caregiver needs.

E. Enhance transportation availability throughout the PSA.
State Goal Match: 0

Narrative
Participants in the AAA’s community conversations consistently ranked transportation in the top three when asked to prioritize services most critical to helping them age at home, and many low-income and homeless seniors said public transportation and special transit services were the only ways they could access medical services and food banks. The need for transportation options will grow along with the expanding senior population. The region’s ability to help people stay in their own homes as they age will be directly correlated to the transportation services available to them. When livable communities or the addition of affordable housing is being explored by community leaders it is vitally important to advocate for suitable transportation that is functional for all.

Objectives

1. Enhance transportation availability throughout the PSA.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Work in collaboration with transportation and county units in developing a senior transportation advocacy strategy; foster regional coordination and cooperation; strengthening intercounty partnerships; and explore a single call center for scheduling and dispatching in areas with more than one transportation agency providing coverage.

Expected Outcome
Ensure that older adults receive safe, predictable transportation services with enhanced geographical and "off hour scheduling" coverage.

Progress
Senior Resources continues to serve as a member of the Specialized Transportation Committees in each of the counties we represent advocating for enhancements to the current transportation structure where funding allows. In
the past year, we have supported the Max Transit transportation expansion in southern Ottawa Co. with an anticipated start date of July 2017 into Park Township. We participated in the Prosperity Region 4 strategic planning session and continue to support the development of transportation contracts that facilitate transportation over county lines.

F. Reduce hospitalizations for persons with frequent emergency room or hospital admissions.

State Goal Match: 0

Narrative
It has been shown that chronic illness and multiple emergency room visits commonly results in seniors who are particularly vulnerable to hospital readmissions. Using an evidence based program, Senior Resources plans to expand our partnership with local health care organizations to provide follow up care for 30 days after an ER visit to eligible seniors in the way of support coordination, medication review, and transportation to physician visits, meals and Personal Emergency Response systems. This effort is proven to support seniors in their home as they gain strength and health.

Objectives

1. Reduce hospitalizations for persons with frequent emergency room or hospital admissions.
   Timeline: 10/01/2016 to 09/30/2019

Activities
Partner with community hospitals to provide a Care Transitions program for those individuals that have high emergency room utilization. Provide an assessment and supportive services for 30 days after hospitalization.

Expected Outcome
It has been proven that employing this type of intervention combined with supportive services significantly reduces the participant’s likelihood to be readmitted to a hospital within 30 days. In addition, the hospital and health plan are less likely to incur further costs and the person is more likely to achieve self-identified personal goals around symptom management and recovery.

Progress
Senior Resources is piloting a program with the Muskegon Mercy Gerontology office called Let’s Stay Home. The doctor’s office refers patients that are identified as being at risk of hospitalization to Senior Resources for an intensive 30-day intervention. This demonstrates a preventative approach to potential at risk persons as well has bridges the gap between the medical community and the participants needs in the home. There are four main goals in utilizing this intervention. First, to increase the participants and their caregiver’s knowledge of appropriate urgent care and emergency room utilization thereby decreasing unnecessary emergency room utilization or hospitalization. Second, through the assessment process identify needs and increase access to needed services and supports through information, referral and direct service arrangement. Third, to increase the caregiver’s knowledge and skills to care for a loved one with complex chronic conditions. Finally, to ensure that participants meet all their scheduled health care appointments.
A Senior Resources Supports Coordinator who has been trained in Care Transitions, is a Medicare and Medicaid Assistance Program Counselor, and has experience as an Options Counselor for Long Term Care will work with the participant to formulate a plan for their care utilizing navigation of community services and direct service
Senior Resources

provision through our provider network. Each plan will be directed by the participant to meet their needs and the service array includes home delivered meals, transportation, homemaking, personal care, respite care, and personal emergency response system.
Senior Resources has had 16 referrals to this program and we are in the process of analyzing results of these interventions thus far.
2018 AIP Program Development Objectives

Area Agency on Aging Goal

A. Increase evidenced based workshop offerings to include the Stanford Chronic Pain Management Program.
   State Goal Match: 1

   Narrative
   Senior Resources will train staff and volunteers in the facilitation of the Stanford Chronic Pain Management curriculum and conduct a minimum of 2 workshops throughout our region. The expected outcome is that participants will be better informed as to how to identify and implement the most effective pain management intervention for them resulting in increased pain management and satisfaction with their life.

   Objectives

   1. Increase evidenced based workshop offerings to include the Stanford Chronic Pain Management Program.
      Timeline: 10/01/2017 to 09/30/2019

   Activities
   Senior Resources will train staff and volunteers on the facilitation of the curriculum and conduct a minimum of 2 workshops throughout our region.

   Expected Outcome
   It is our expectation that participants will be better informed as to how to identify and implement the most effective pain management intervention for them resulting in increased pain management and satisfaction with their life.

B. Regional Goal: Area Agencies on Aging will be able to better advocate for and prove the value of Access Services.
   State Goal Match: 0

   Narrative
   The aging network must expand decision makers knowledge base regarding the value of the access services we have provided for years. We must track and demonstrate improved outcomes due to our interventions, quantify how this will relate to a return on their investment with us and emphasize that we have current systems in place to address this need.

   Objectives

   1. Area Agencies on Aging will be able to advocate for and prove the value of Access Services.
      Timeline: 10/01/2017 to 09/30/2019
Senior Resources

**Activities**
Senior Resources will research and/or develop and implement a tracking/reporting mechanism to better quantify the monetary impact of access services and using those services to keep people in the community.

**Expected Outcome**
Area Agencies on Aging will be able to track and demonstrate improved outcomes due to our interventions, quantify how this will relate to a return on investment with us and emphasize that we have current systems in place to address this need.

**C. To prevent social isolation and loneliness in older adults.**

State Goal Match: 1

**Narrative**
It is estimated that one in five adults over age 50 are affected by social isolation, a problem that has been associated with higher rates of chronic disease, depression, dementia and death. Over the next year, Senior Resources will raise awareness of the problem of isolation and loneliness in a number of ways, including one-on-one counseling with our participants, leveraging traditional and social media to spread the word about the effects of social isolation and encouraging community awareness and intervention.

**Objectives**

1. To educate and inform the community regarding the effects of social isolation in older adults and ways to combat this health risk.
   Timeline: 10/01/2017 to 09/30/2019

**Activities**
Over the next year, Senior Resources will raise awareness of the problem of isolation and loneliness in a number of ways, including one-on-one counseling with our participants, leveraging traditional and social media to spread the word about the affects of social isolation and encouraging community awareness and intervention. We will provide tools and resources to help people evaluate their isolation risk, reach out to others who may be feeling lonely and disengaged, and find practical ways for them to reconnect with their community.

**Expected Outcome**
Preventing or addressing loneliness and social isolation will result in an increase quality of life for older adults as well as decrease health risks associated with social isolation.
ANNUAL & MULTI YEAR IMPLEMENTATION PLAN
FY 2017-2019

Senior Resources

Appendices
## Services Summary

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**Support Serv Total**: 1,939,302
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*Registered Dietitian, Nutritionist or individual with comparable certification, as approved by AASA.

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<td>4,445</td>
<td>8,003</td>
<td>6,399</td>
<td>22,010</td>
<td>10,576</td>
<td>4,000</td>
<td>4,525</td>
<td>59,958</td>
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### FY 2018 AREA PLAN GRANT BUDGET - RESPITE SERVICE DETAIL

<table>
<thead>
<tr>
<th>SERVICES PROVIDED AS A FORM OF RESPITE CARE</th>
<th>Title III-B</th>
<th>Title III-E</th>
<th>State Alt Care</th>
<th>State Escheats</th>
<th>State In-Home</th>
<th>Merit Award</th>
<th>Program Income</th>
<th>Cash/In-Kind Match</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Chore</td>
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<tr>
<td>2. Homemaking</td>
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<tr>
<td>3. Home Care Assistance</td>
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<tr>
<td>4. Home Health Aide</td>
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<tr>
<td>5. Meal Preparation/HDM</td>
<td>-</td>
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<td>-</td>
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<tr>
<td>6. Personal Care</td>
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<tr>
<td>Respite Service Total</td>
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### FY 2018 AREA PLAN GRANT BUDGET - TITLE E- KINSHIP SERVICES DETAIL

<table>
<thead>
<tr>
<th>SERVICE CATEGORY</th>
<th>Title III-B</th>
<th>Title III-E</th>
<th>Program Income</th>
<th>Cash Match</th>
<th>In-Kind Match</th>
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<tbody>
<tr>
<td>Kinship Ser. Amounts Only</td>
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<td>-</td>
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<tr>
<td>1. Caregiver Sup. Services</td>
<td>-</td>
<td>-</td>
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<tr>
<td>2. Kinship Support Services</td>
<td>-</td>
<td>8,150</td>
<td>-</td>
<td>2,500</td>
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<td>10,650</td>
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<tr>
<td>3. Caregiver E.S.T</td>
<td>-</td>
<td>-</td>
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<tr>
<td>4.</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Kinship Services Total</td>
<td>-</td>
<td>8,150</td>
<td>-</td>
<td>2,500</td>
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<td>10,650</td>
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<td>Service</td>
<td>Budgeted Funds</td>
<td>Percent of the Total</td>
<td>Method of Provision</td>
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<td></td>
<td></td>
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<td>Purchased Contract Direct</td>
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<tr>
<td>ACCESS SERVICES</td>
<td></td>
<td></td>
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<tr>
<td>Care Management</td>
<td>270,580 $</td>
<td>7.25%</td>
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<tr>
<td>Case Coordination &amp; Support</td>
<td>363,550 $</td>
<td>9.74%</td>
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<tr>
<td>Disaster Advocacy &amp; Outreach Program</td>
<td>79,436 $</td>
<td>2.13%</td>
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<tr>
<td>Information &amp; Assistance</td>
<td></td>
<td>0.00%</td>
<td>X</td>
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<tr>
<td>Outreach</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Transportation</td>
<td>52,661 $</td>
<td>1.41%</td>
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<tr>
<td>IN-HOME SERVICES</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Chore</td>
<td></td>
<td>0.00%</td>
<td></td>
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<tr>
<td>Home Care Assistance</td>
<td>169,175 $</td>
<td>4.53%</td>
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<tr>
<td>Home Injury Control</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Homemaking</td>
<td>167,950 $</td>
<td>4.50%</td>
<td>X</td>
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<tr>
<td>Home Delivered Meals</td>
<td>999,710 $</td>
<td>26.79%</td>
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<tr>
<td>Home Health Aide</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Medication Management</td>
<td>57,934 $</td>
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<td>Personal Care</td>
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<td>Respite Care</td>
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<tr>
<td>Friendly Reassurance</td>
<td></td>
<td>0.00%</td>
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<td>COMMUNITY SERVICES</td>
<td></td>
<td></td>
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<tr>
<td>Adult Day Services</td>
<td>148,214 $</td>
<td>3.97%</td>
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<tr>
<td>Dementia Adult Day Care</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Congregate Meals</td>
<td>792,184 $</td>
<td>21.23%</td>
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<td>Nutrition Counseling</td>
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<tr>
<td>Nutrition Education</td>
<td></td>
<td>0.00%</td>
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<td>Disease Prevention/Health Promotion</td>
<td>29,081 $</td>
<td>0.78%</td>
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<tr>
<td>Health Screening</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Assistance to the Hearing Impaired &amp; Deaf</td>
<td>27,792 $</td>
<td>0.74%</td>
<td>X</td>
<td></td>
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<tr>
<td>Home Repair</td>
<td></td>
<td>0.00%</td>
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<td></td>
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<tr>
<td>Legal Assistance</td>
<td>27,792 $</td>
<td>0.74%</td>
<td>X</td>
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<tr>
<td>Long Term Care Ombudsman/Advocacy</td>
<td>52,834 $</td>
<td>1.42%</td>
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<tr>
<td>Senior Center Operations</td>
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<tr>
<td>Senior Center Staffing</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Vision Services</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Programs for Prevention of Elder Abuse</td>
<td>7,124 $</td>
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<tr>
<td>Counseling Services</td>
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<tr>
<td>Creating Confident Caregivers® (CCC)</td>
<td>6,667 $</td>
<td>0.18%</td>
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<tr>
<td>Caregiver Supplemental Services</td>
<td></td>
<td>0.00%</td>
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<tr>
<td>Kinship Support Services</td>
<td>10,650 $</td>
<td>0.29%</td>
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<tr>
<td>Caregiver Education, Support, &amp; Training</td>
<td>32,893 $</td>
<td>0.88%</td>
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<td>AAA RD/Nutritionist</td>
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<td>0.00%</td>
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<tr>
<td>PROGRAM DEVELOPMENT</td>
<td>83,650 $</td>
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<tr>
<td>REGION-SPECIFIC</td>
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<td>b.</td>
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<td>0.00%</td>
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<tr>
<td>CLP/ADRC SERVICES</td>
<td></td>
<td>0.00%</td>
<td></td>
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<tr>
<td>SUBTOTAL SERVICES</td>
<td>3,719,696 $</td>
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<tr>
<td>MATF &amp; ST CG ADMINISTRATION</td>
<td>11,500 $</td>
<td>0.31%</td>
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<tr>
<td>TOTAL PERCENT</td>
<td>100.00%</td>
<td>25.52%</td>
<td>55.97%</td>
<td>18.51%</td>
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<tr>
<td>TOTAL FUNDING</td>
<td>3,731,196 $</td>
<td>$952,132</td>
<td>$2,088,462</td>
<td>$690,602</td>
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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.
# Action Request

<table>
<thead>
<tr>
<th>Committee:</th>
<th>Health and Human Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Date:</td>
<td>05/10/2017</td>
</tr>
<tr>
<td>Requesting</td>
<td></td>
</tr>
<tr>
<td>Department:</td>
<td>Administration</td>
</tr>
<tr>
<td>Submitted By:</td>
<td>Greg Rappleye</td>
</tr>
<tr>
<td>Agenda Item:</td>
<td>Resolution Opposing Legalization of the General use of Marijuana</td>
</tr>
</tbody>
</table>

**SUGGESTED MOTION:**

To approve and forward to the Board of Commissioners the Resolution opposing legalization of the general use of Marijuana within the State of Michigan.

**SUMMARY OF REQUEST:**

The Lakeshore Regional Entity has requested that the Ottawa County Board of Commissioners approve a resolution, approved by the Ottawa County Substance Abuse Prevention Coalition, opposing legalization of the general use of Marijuana within the State of Michigan. A resolution to accomplish this is attached. The facts set forth in the proposed resolution were supplied by the Lakeshore Regional Entity in its model resolution.

**FINANCIAL INFORMATION:**

<table>
<thead>
<tr>
<th>Total Cost:</th>
<th>General Fund Cost:</th>
<th>Included in Budget:</th>
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</thead>
<tbody>
<tr>
<td>$ 0.00</td>
<td>$ 0.00</td>
<td>□ Yes ✔ No</td>
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</tbody>
</table>

If not included in budget, recommended funding source:

**ACTION IS RELATED TO AN ACTIVITY WHICH IS:**

□ Mandated ✔ Non-Mandated □ New Activity

**ACTION IS RELATED TO STRATEGIC PLAN:**

Goal: 3: To Contribute to the long-term economic, social and environmental health of the County.

Objective: Goal 3-2: Consider initiatives that contribute to the social health and sustainability of the County and its’ residents.

**ADMINISTRATION**

☑ Recommended □ Not Recommended □ Without Recommendation

County Administrator: 

Committee/Governing/Advisory Board Approval Date:
COUNTY OF OTTAWA
STATE OF MICHIGAN

RESOLUTION

At a regular meeting of the Board of Commissioners of the County of Ottawa, Michigan, held at the Fillmore Street Complex in the Township of Olive, Michigan on the 23rd day of May, 2017 at 1:30 o’clock p.m. local time.

PRESENT: Commissioners: _____________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

ABSENT: Commissioners:_________________________________________ ______________
_____________________________________________________________________________
_____________________________________________________________________________

It was moved by Commissioner _________________________ and supported by Commissioner _________________________ that the following Resolution be adopted:

WHEREAS, proposals to legalize the general use of marijuana are being placed on the ballot in communities across Michigan; and

WHEREAS, there is significant evidence demonstrating that non-medical or recreational use of marijuana has a profoundly negative impact on our youth; and

WHEREAS, Ottawa County Youth Report, via the Youth Assessment Survey (YAS) in 2015, that only 54% of students thought marijuana use was risky; 43.3% of students surveyed reported that it would be easy or very easy to get marijuana; and 14% reported that they have tried marijuana.

WHEREAS, The National Institute on Drug Abuse reports that one in six teens that use marijuana become addicted to its use; and
WHEREAS, Monitoring the Future, 2013 reports that in states where medical marijuana use has been legalized, about one third of 12th graders reported access to another person's medical marijuana supply; and

WHEREAS, Rocky Mountain HIDTA, 2015 reports that there was a 40 percent increase in drug-related suspensions and expulsions in Colorado from school year 2008/2009 to 2013/2014, a state in which the general use of marijuana has been legalized; and

WHEREAS, National Highway Traffic Association reports that driving under the influence of marijuana is associated with an increased risk of car crashes, especially fatal crashes; and

WHEREAS, the University of Colorado, Denver reports that marijuana-impaired driver related fatalities have risen 114% in Colorado since that state legalized the general use of marijuana; and

WHEREAS, Join Together reports that the active ingredient in marijuana, Tetrahydrocannabinol (THC), has increased significantly from an average of 1% in 1970 to 30% in 2013, making today’s marijuana an alarmingly more potent drug; and

WHEREAS, general marijuana use and possession is not permitted by Federal and Michigan State Law; and

WHEREAS, it is not possible to foresee and mitigate all the associated risks and impact to our communities through the legalization of marijuana for general use; and

WHEREAS, the Ottawa County Board of Commissioners recognizes the need to educate all sectors of our community regarding the dangers of non-medical marijuana use;

NOW THEREFORE BE IT RESOLVED, that the Ottawa County Board of Commissioners is opposed to the legalization of marijuana for general use; and

NOW THEREFORE BE IT FURTHER RESOLVED, that Ottawa County Board of Commissioners encourages other communities to oppose the legalization of marijuana for general
use including the adoption of similar resolutions in opposition to the legalization of non-medical marijuana; and,

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

YEAS: Commissioners: ______________________________________________________
____________________________________________________________________________
____________________________________________________________________________

NAYS: Commissioners: ____________________________________________________________________________
____________________________________________________________________________

ABSTENTIONS: Commissioners: ________________________________________________
____________________________________________________________________________
____________________________________________________________________________

RESOLUTION ADOPTED.

Chairperson, Ottawa County
Board of Commissioners

Ottawa County Clerk/Register

(This resolution does not relate to the use of marijuana approved for medical purposes in compliance with current state law)