AGENDA

St. Clair County Board of Commissioners
Human Services Committee

Board of Commissioners' Room
County Administrative Office Building, 2nd Floor
200 Grand River Avenue
Port Huron, MI 48060

July 1, 2021 at 6:00 PM

1. **Roll Call/Opening/Pledge of Allegiance**
2. **Additions/Deletions/Changes to the Agenda**
   A. Addition: Resolution 21-13 Approving the AAA 1-B FY2022 Implementation Plan
3. **Citizens to be Heard**
4. **Updates**
5. **Conceptual Initiatives**
6. **Old Business**
7. **New Business**
8. **Other Human Services Matters**
9. **Information Only**
   A. Health Department Points of Interest
10. **Receive and File Packets**
11. **Adjournment**

Committee Chair: Lisa Beedon

Note: The County complies with the "Americans with Disabilities Act" and if auxiliary aids or services are required at the meeting for individuals with disabilities, please contact Administrator/Controller's Office, Suite 203, 200 Grand River Avenue, Port Huron, MI 48060, (810) 989-6900 three days prior to said meeting.

Addition: Resolution 21-13 Approving the AAA 1-B FY2022 Implementation Plan

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
🗋	Resolution 21-13 Approving the AAA 1-B FY2022 Implementation Plan	6/30/2021	Cover Memo
🗋	Saint Clair Cover letter 2021	6/30/2021	Cover Memo
🗋	AAA 1-B FY2022 Annual Implementation Plan 06-29-2021	6/30/2021	Cover Memo

ST. CLAIR COUNTY BOARD OF COMMISSIONERS

RESOLUTION 21-13

RESOLUTION APPROVING THE AREA AGENCY ON AGING 1-B FY 2022 ANNUAL IMPLEMENTATION PLAN

WHEREAS, the Area Agency on Aging 1-B has been supporting services to St. Clair County residents since 1974; and

WHEREAS, the Area Agency on Aging 1-B has assessed the needs of older county residents and developed a plan to provide assistance that addresses identified needs; and

WHEREAS, the proposed plan has been submitted for review by the public, and has been subjected to a public hearing; and

WHEREAS, the comments at the public hearings on the proposed plan were mostly favorable, and constructive changes in the plan were made as a result of some comments; and

WHEREAS, the St. Clair County Board of Commissioners appoints two representatives to the AAA 1-B Board of Directors, a County Commissioner and a county resident who is at least 60 years of age; and

WHEREAS, the Michigan Aging and Adult Services Agency requires that county Boards of Commissioners be given the opportunity to review and approve an area agency on aging's annual implementation plan;

THEREFORE BE IT RESOLVED, that the St. Clair County Board of Commissioners hereby approves the FY 2022 Annual Implementation Plan of the Area Agency on Aging 1-B, for the purpose of conveying such support to the Area Agency on Aging 1-B and the Michigan Aging and Adult Services Agency.

Dated: July 15, 2021

ST. CLAIR COUNTY
BOARD OF COMMISSIONERS

Reviewed and Approved by: ____________________________

____________________________ ____________________________

Gary A. Fletcher
County Corporation Counsel
511 Fort Street, Suite 101
Port Huron, MI 48060

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Area Agency on Aging 1-B
Advocacy • Action • Answers on Aging

29100 Northwestern Highway
Suite 400
Southfield, MI 48034
800-852-7795
Fax: 248-948-9691
www.aaa1b.com

June 28, 2021

Commissioner Jeffery L.Bohm, Chairperson
Saint Clair County Board of Commissioners
200 Grand River
Port Huron, MI 48060

Dear Commissioner Bohm:

Enclosed please find the Area Agency on Aging 1-B (AAA 1-B) FY 2022 Annual Implementation Plan (AIP). The FY 2022 AIP was adopted by action of the AAA 1-B Board of Directors on June 25, 2021, and has been submitted to the Michigan Aging & Adult Services Agency for approval. The AAA 1-B Board of Directors' review and approval process involves two appointees from each Region 1-B county Board of Commissioners, a member commissioner and an older adult representative. As you may know, the AAA 1-B Board of Directors consists of a majority of county commission appointees. The plan has also been reviewed and approved by the AAA 1-B Advisory Council, and has been the subject of a public hearing, where favorable comments on the plan were received.

This document is being sent to you in accordance with a directive from the Michigan Aging & Adult Services Agency, which allows each county Board of Commissioners to adopt a resolution of approval for the plan. A model resolution is enclosed for your convenience. State policy stipulates that if a county chooses to take such action, it must be completed by July 31, 2021. Please forward any adopted resolution, or minutes of the meeting where such action is taken, to the AAA 1-B, Attention: Pamela Moffitt or send by email to pmoffitt@aaa1b.org by July 30, 2021.

Thank you for your consideration of this request. If you have questions or require assistance relative to the plan, please contact Jim McGuire, Director of Research, Policy and Advocacy at (248) 262-9216.

Sincerely,

Michael Karson
Chief Executive Officer

Enclosures

cc: St. Clair County Commissioner Lisa Beedon, member, AAA 1-B Board of Directors
Martha Burich, member, AAA 1-B Board of Directors

2020-2022 Multi Year Plan

FY 2022 ANNUAL IMPLEMENTATION PLAN

AREA AGENCY ON AGING 1-B

Planning and Service Area
Livingston, Macomb,
Monroe, Oakland,
St. Clair, Washtenaw

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Area Agency On Aging 1-B **FY 2022**

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Area Agency On Aging 1-B **FY 2022**

Executive Summary

Include a brief description of the planning and service area and any significant changes to the current area plan: (A) Any significant new priorities, plans or objectives set by the area agency for the use of Older Americans Act (OAA) and state funding during FY 2022. If there are no new activities or changes, note that in your response. (B) Include changes, if any, to the access, in-home and community-based services and supports provided within the plan. (C) Address the agency's response to the COVID-19 pandemic emergency, including a description of the challenges and continuing needs brought on by this emergency. (D) Current information about contingency planning for potential reduced federal funding (if plans include the pursuit of alternative funding, identify specific funding sources). (E) A description of progress made through advocacy efforts to date and focus of advocacy efforts in FY 2022.

PSA Description

The Area Agency on Aging 1-B (AAA 1-B) is a non-profit organization that is responsible for planning and coordinating a network of services to approximately 29% of the state's adults who are older and/or disabled. About 780,000 persons age 60 and older reside in Livingston, Macomb, Monroe, Oakland, St. Clair, and Washtenaw counties (SEMCOG 2045 Regional Forecast). It is the mission of the AAA 1-B to enhance the lives of older adults and adults with disabilities in the communities we serve. Our vision is independence and well-being for those we serve. We are dedicated to: 1) ensuring access to a network of long-term care services; 2) allocating federal and state funds for social and nutrition services; 3) advocating on issues of concern; 4) developing new older adult and independent living services; 5) coordinating activities with other public and private organizations; and 6) assessing needs of communities as well as older adults and adults with disabilities, creating connections with home and community-based long term care services. We prioritize activities that allow people to maintain their independence with dignity and place a special emphasis on assistance to frail, low income, disadvantaged, cultural/minority elders and adults with disabilities.

Plan Changes

The AAA 1-B anticipates that it will be necessary to focus significant resources to continue responding to the COVID-19 pandemic outbreak and recovery in FY 2022. The AAA 1-B is adding a new program development goal to review AAA 1-B service standards with input from contractors in preparation for the FY 2023-2025 Request for Proposals (RFP) in response to feedback at the public hearing. The AAA 1-B plans to expand program offerings for Caregiver Education, Support and Training to include the Caregiver Coaching Program. An update to the AAA 1-B direct service waiver has been provided to include this program.

Contingency Planning for Potential Funding Reduction

In the event any circumstance where authorization to spend is reduced or suspended, the AAA 1-B shall focus on ensuring that the health and welfare of the most vulnerable adults is protected.

The following considerations are made:

1.Services will be reduced or eliminated based on the 2019 Service Prioritization survey, which is based on a stakeholder opinion survey. Priority services are: Home Delivered Meals, Community Living Program Services (in-home personal care, homemaking, and respite), Information and Assistance and Home Injury Control. Services with waitlists, recent funding increases or decreases or with alternative funding sources will be taken

into consideration prior to determining any reductions.
Operationally, AAA 1-B shall retain a workforce that ensures critical operations are delivered. Discretionary spending will be prioritized based on need to maintain critical operations.

Advocacy Efforts

The AAA 1-B advocacy efforts to extend the premium pay increase for direct care workers were successful. In March 2021 the direct care worker premium pay rate increase was extended until the end of FY 2021 and increased by $.25 per hour. Congress approved increased funds for Older Americans Act services provided by the aging network to support emergency response to the COVID-19 pandemic in a December 2020 COIVD-19 supplemental appropriation and the 2021 American Rescue Plan.

The AAA 1-B created a Legislative Platform for the 2021-2022 legislative session with input from the AAA 1-B Advisory Council and Board of Directors. The platform includes information about fourteen priority advocacy issues for the agency. In FY 2022 the AAA 1-B will continue to provide leadership to the statewide Silver Key Coalition, advocate in support of the MI Choice Medicaid Waiver Program, and work to address the direct care workforce shortage by advancing policies that attract and retain workers.

COVID-19

Region 1-B continues to be highly impacted by COVID-19. The AAA 1-B worked with local service providers to help ensure older adults throughout Region 1-B had access to food and essential items throughout the pandemic. The aging network response to COVID-19 in Region 1-B was successful thanks to the strong service providers that work with and alongside the AAA 1-B. A summary of key challenges and AAA 1-B operational changes, including ongoing needs, is provided below.

ONGOING NEEDS

VACCINATIONS- The AAA 1-B has worked to connect older adults, caregivers, and direct care workers with information about the COVID-19 vaccine. Vaccination information is updated daily and is available from the AAA 1-B Resource Center, website, and social media platforms. All AAA 1-B in-home service participants were contacted to provide support to register for vaccine appointments. The AAA 1-B is collaborating with all six county health departments in the region to ensure homebound older adults have access to in-home vaccinations. If vaccination boosters are reccomended, additional outreach and public education will be required.

DIRECT CARE WORKFORCE- Region 1-B continues to experience severe shortages in the direct care workforce due to COVID-19. Fear of contracting COVID-19, lack of childcare options, and the ability to earn more collecting unemployment than if they continued to work led to a shortage of workers. Premium pay was implemented for direct care workers providing approved services from March 2020 through September 2021.

SOCIAL ISOLATION- Social isolation has been a challenge throughout the COVID-19 pandemic as older adults have followed quarantine and social distancing guidelines and reduced contact with people outside of their households. Social distancing requirements necessitated the closure of many programs that seniors rely on, including adult day centers, congregate meal sites, and senior centers. In addition to these closures, many other facilities, including assisted living facilities, licensed care facilities, and nursing homes prohibited outside visitors, further limiting socialization. Social isolation has many negative health implications and can be especially difficult for individuals with dementia.

Area Agency On Aging 1-B **FY 2022**

Social Isolation in congregate living settings is being addressed through several initiatives:
·Use of AASA No Wrong Door grant funds to provide devices that address social isolation to select residents in 29 targeted nursing homes, and MI Choice and Community Living Program participants. The devices include Amazon ECHO Shows, Super Ear sound augmentation devices, robotic pets, Simple Music Players, and comfort dolls.
A private/public partnership with Oakland County, Amazon and American House Senior Living Residences to connect quarantined residents virtually with family and friends utilizing ECHO Show devices.

TAX PREPARATION – The AAA 1-B identified an unmet need for tax preparation assistance during the 2021 tax season. Providers that typically offer tax preparation programs were operating at a reduced capacity due to COVID-19 restrictions and a shortage of volunteers. Demand for tax preparation was high, with some seniors needing to file if they had an issue receiving federal stimulus payments and others who rely on filing the Michigan home heating credit to receive enhanced food benefits. The AAA 1-B advocated with federal and state officials to extend the tax deadline and increase awareness of the need for tax preparation assistance.

DIGITAL DIVIDE- Difficulty using and obtaining technology is a significant challenge for older adults during the pandemic. Seniors without internet access face added difficulties signing up for vaccines, obtaining health care, and had fewer outlets to combat isolation during quarantine.

ACCESS TO CARE/CARE REFUSAL- In Region 1-B, some older adults have declined to seek care and canceled appointments out of fear of contracting the virus. This placed some older adults at risk who otherwise depend on in-home services. This issue was especially prevalent in the early phases of the pandemic; the agency has seen requests from participants to reinstate services that they had previously cancelled.

SHARING INFORMATION- The AAA 1-B staff continue to provide virtual presentations on agency programs and services for seniors and family caregivers. In early 2021 the AAA 1-B hosted four successful webinars reaching over 1,000 caregivers and older adults. Topics have included a caregiver services panel discussion, elder care coordination, COVID-19 vaccine, and effective communication strategies for individuals with Alzheimer's. The AAA 1-B has earned several successful media placements, including articles and television coverage on social isolation, alternatives to nursing home care, and distribution of food boxes and masks.

OPERATIONAL UPDATES
PARTNERSHIPS- The AAA 1-B secured grant funding from United Way for Southeastern Michigan to stabilize older adult households in Macomb and Oakland counties. In partnership with Interfaith Volunteer Caregivers, Lakeshore Legal Aid, and OLHSA, older adults in Macomb and Oakland counties were provided food and housing assistance for needs related to COVID-19 induced hardships.

TELEPHONIC SERVICES- The AAA 1-B Supports Coordination and Caseworker staff continue to conduct assessments via telephonic model to maintain the safety of staff and participants. These activities include assessments, care plan development and revisions, service level determination, and ongoing participant monitoring. Participants who lost their services because of an adult day center closure were offered in-home personal care and homemaking services. The AAA 1-B clinical staff continue to perform increased wellness checks for program participants ensuring their health and safety, connecting with local resources, and often serving as a source of friendly reassurance and socialization. With increased social isolation among older adults during the COVID-19 pandemic, resources were offered during regular reassessments and provided in a March letter to participants addressing social isolation. Case coordination and support for participants are offered in a monthly friendly call from the AAA 1-B staff. Many AAA 1-B contracted service providers have transitioned to telephonic models, including Grandparents Raising Grandchildren, Elder Abuse and Prevention, and Community Liaison programs.

MONITORING COVID-19 EXPOSURE- The AAA 1-B developed a COVID-19 protocol for monitoring participants who tested positive or were exposed to COVID-19. The AAA 1-B staff monitor participants who have tested positive for COVID-19, as well as those with potential and confirmed exposure. Participants being monitored receive weekly wellness checks, are offered resources and education, and are connected with other health care professionals such as physicians, hospitals, and discharge planners. The AAA 1-B also monitors direct care workers. In the event a direct care worker was exposed or tested positive, the COVID-19 Task Force performs tracing to see if the direct care worker had been in contact with other participants within the last 14 days. If there had been contact, those participants were notified and added to the monitoring list for the task force.

RETURN TO COMMUNITY PREPARATION – The AAA 1-B is preparing protocols in anticipation of returning to face-to-face assessment. Protocol development is being guided by “A Phased Approach Resuming Standard Operations” provided by Michigan Department of Health and Human Services (MDHHS). Examples of current preparation efforts include a hybrid model approach, Personal Protective Equipment (PPE) training, PPE distribution protocol, and COVID-19 symptom screening for participants and staff.

ADVOCACY- The AAA 1-B successfully advocated for increased federal funding to support pandemic response, premium pay for direct care workers, and maintenance of Older Americans Act and AASA funding.

SUPPORTING EMPLOYEES- The AAA 1-B employees reported increased stress, difficulty maintaining work-life balance while working at home, and increased anxiety as a result of the COVID-19 pandemic. The AAA 1-B has provided resources for employees including those available through agency sponsored benefit programs (COVID-19 testing/coverage, increased telehealth services and mental health/work-life resources), training sessions for managers to provide tools for mitigating operational challenges, and opportunities for remote employee engagement. The Agency has provided employees and family members with a new Employee Assistance Plan (EAP) provider through Ulliance.

REMOTE WORKFORCE- The AAA 1-B moved all agency operations to remote-based, providing necessary equipment to all staff.

SAFETY PROTOCOLS- The AAA 1-B developed and implemented pandemic protocols to safeguard the health and safety of employees and participants, incorporating directives and guidance from the state and federal governments, CDC, OSHA and DOL.

NUTRITION- Access to nutrition was identified as a key challenge for seniors during the pandemic. The AAA 1-B nutrition providers continue to ensure participants receive meals through home delivery as well as pick up from congregate sites that transitioned to curbside grab ‘n go programs. Nutrition providers are delivering meals to all home delivered meal recipients despite losing volunteers and staff out of fear of being exposed to the virus. Region 1-B does not have any nutrition providers with an active waitlist. The AAA 1-B staff and volunteers delivered over 15,000 quarantine (Q) boxes and produce boxes to seniors who had limited to no access to food. In partnership with AASA, the AAA 1-B was able to feed thousands of seniors by providing over 364,000 pounds of food.

PPE- The AAA 1-B staff assisted with PPE distribution to its vendor network, equipping essential workers with PPE to safely deliver services to older adults.

WELLNESS PROGRAMS- While many AAA 1-B wellness workshops can be offered virtually, it has been a challenge to train older adults on the use of virtual platforms, such as GoToMeeting, and several AAA 1-B trainers have expressed that they do not feel confident to instruct classes using this format. There has been a statewide collaboration among Evidence Based Program Coordinators to provide technology training to wellness program facilitators and program participants to host successful virtual workshops. Several of the Evidence Based Programs offered by the AAA 1-B have been approved to be offered virtually by the program developers, including Diabetes PATH, Chronic Pain PATH, Aging Mastery Program, and Powerful Tools for Caregivers. A Matter of Balance will be offered virtually in late spring of 2021. The National Kidney Foundation of Michigan recently hosted a virtual PATH workshop and has plans to offer more workshops from the PATH suite of classes (diabetes PATH, chronic pain, etc.). They will also offer Walk with Ease and Enhance Fitness programs virtually until in-person programs can be resumed safely.

ADULT DAY SERVICES: Adult Day Service and Dementia Adult Day Care programs have been following MDHHS Epidemic Orders including capacity limitations and following the mask mandate. COVID-19 safety and sanitation policies and processes are also in place. One-on-one activities have continued to be provided, as well as a meal, according to AASA programming standards. The Adult Day Services and Dementia Adult Day Care programs have continued to provide support to caregivers through virtual support groups, education, and ongoing wellness checks. If the adult day center must close, virtual programming is an option.

SOCIAL SERVICES: 3,000 Essential Care Kits funded through an AASA grant were distributed across Region 1-B.

GAP FILLING- The AAA 1-B has “gap-filling” funds to cover COVID-19 related needs such as grocery delivery fees, medication delivery, and others to support older adults during this crisis.

LEGAL SERVICES- Funding was secured from a local foundation for an AAA 1-B legal services contractor to address housing problems that were exacerbated by the pandemic. Housing stabilization services including mortgage foreclosure, tax foreclosure, and eviction or landlord/tenant issues were provided. 178 individuals were served by the program, with 110 individuals receiving legal advice and 68 individuals receiving attorney-led advocacy to negotiate resolution of housing issues.

MMAP- The MMAP team assisted over 4,000 Medicare beneficiaries during Medicare Open Enrollment using virtual appointments through Zoom. MMAP volunteers were equipped with the necessary technology including laptops, Zoom licenses, phones and information on how to set up a google phone to ensure a successful open enrollment program. MMAP continues to provide information on COVID-19 vaccination scams and other scams related to the pandemic through volunteer education and community outreach.

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County/Local Unit of Government Review

The Area Agency on Aging must send a request to the chairperson of each County Board of Commissioners within the Planning and Service Area (PSA), for approval of the final AIP by August 2, 2021. Notification can be sent via US mail or by electronic means, with delivery and signature confirmation, by no later than June 30, 2021. Describe the efforts made to distribute the AIP to, and gain support from, the appropriate county and/or local units of government.

In early June, the AAA 1-B contacts each Region 1-B county Board of Commissioners (BOC) to determine their July meeting date and deadlines for submission of materials. The AAA 1-B Advisory Council and Board of Directors approve the Annual Implementation Plan (AIP) during their June meetings. Upon Board of Directors approval, the AAA 1-B emails with delivery and read receipt, a copy of the AIP and a draft resolution to the chairperson of each county BOC, with a letter requesting BOC action prior to July 31. A copy of the materials is also emailed to each of the BOC's clerk/administrative assistant who is asked to ensure approval of the AIP is placed on the July meeting agenda . A county commissioner serving as the designated Board member of AAA 1-B and the AAA 1-B staff member attends each BOC's July meeting to answer any questions and encourage approval of the AIP. In the past all six county boards of commissioners have approved the plans. No action by a BOC is considered passive approval. The AAA 1-B notifies AASA by August 1 of the status of county level action on the AIP.

Area Agency On Aging 1-B **FY 2022**

Public Hearings

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. A narrative description of the public input strategy and hearing(s) is also required. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and the resultant impact on the AIP. Indicate whether the meeting complied with the Michigan Open Meetings Act. (See Transmittal Letter 2021-448.)

Date	Location	Time	Barrier Free?	No. of Attendees
05/13/2021	Virtual- Microsoft Teams	01:00 PM	Yes	41

The AAA 1-B held a public hearing on May 13 via Microsoft Teams, at which 41 members of the public were in attendance. The public hearing complied with the Open Meetings Act and was held virtually due to an emergency order in effect in City of Southfield. The AAA 1-B provided an overview of the FY 2022 Annual Implementation Plan (AIP) and encouraged feedback from participants.

Attendance at the public hearing was encouraged through emails to AAA 1-B contractors, vendors, and interested parties; postings on social media and the AAA 1-B website; press releases to area news outlets, including a paid public notice in the Detroit Free Press and Detroit News on April 12, 2021. As of April 27, the draft Annual Implementation Plan was available on the AAA 1-B website at https://aaa1b.org/about-us/key-data-and-policies/.

Written comments on the FY 2022 AIP were received in writing from five individuals: two emails and three letters (attached). Four individuals provided written comments related to the importance of the kinship care program. Another written comment shared that the AAA 1-B can do more to interact with service providers and concerns about the changes to “allowable tasks/jobs” for chore and home injury control services.

Feedback from attendees during the public hearing included the need for flexibility with service definitions and support for chore services, home injury control services, and kinship care programs.

Several attendees stressed the importance of the grandparents raising grandchildren program and the need for increased funding for the program. An attendee shared their appreciation for the food they received from a grant funded initiative through which the AAA 1-B partnered with OLHSA to support the COVID-19 related nutritional needs of Grandparents Raising Grandchildren program participants.

The AAA 1-B was asked what options were available for funding a friendly caller program. It was stated that the program is in high demand and funding to support it is limited.

Two attendees indicated they found the AAA 1-B’s changes in service standards for chore services restrictive.

The attendees reported that the programs were not meeting the needs of the community due to the changes. The AAA 1-B was asked for more flexibility with service standards and for advocacy if the changes are out of the AAA 1-B's control. This was also addressed in a written comment received by the AAA 1-B.

Three attendees shared appreciation with the AAA 1-B for flexibility regarding home delivered and congregate meal programs throughout the COVID-19 pandemic.

It was noted that the AAA 1-B should acknowledge the hard work of the provider network during the COVID-19 pandemic in the executive summary of the Annual Implementation Plan. The AAA 1-B was successful in serving older adults because of its community partners.

Based on comments provided at the public hearing, the following edits to the draft plan were made:
-Added acknowledgement of the actions by the local provider network in the COVID-19 section.
-Added a new program development goal to review AAA 1-B service standards with input from contractors in preparation for the FY 2023-2025 Request for Proposals (RFP).

The AAA 1-B will also work in partnership with AASA to determine if any flexibility can be provided to chore service providers in FY 2022 to meet community need.

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Regional Service Definitions

If the area agency is proposing to fund a new (not previously approved in this multi-year planning cycle) service category that is not included in the Operating Standards for Service Programs, then information about the proposed service category must be included in this section. Enter new regional service name, identify the service category and fund source, include unit or service, minimum standards and why activities cannot be funded under an existing service definition.

Service Name/Definition

Rationale (Explain why activities cannot be funded under an existing service definition.)

Service Category	Fund Source	Unit of Service
Access In-Home Community	Title III PartB Title III PartD Title III PartE Title VII State Alternative Care State Access State In-home State Respite Other ______	

Minimum Standards

Area Agency On Aging 1-B **FY 2022**

Access Services

Select from the list of access services those services the area agency plans to provide directly during FY 2022, 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

Starting Date	10/01/2021	Ending Date	09/30/2022
Total of Federal Dollars	$184,078.00	Total of State Dollars	$30,000.00

Geographic area to be served

Region 1-B

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

Objective1: Continue to utilize the Service Coordination Continuum to move participants from Case Coordination and Support or the in-home service waitlist into the Care Management program as they are determined to need this level of services and supports coordination. Provide Care Management services to MI Choice participants whose Medicaid becomes temporarily inactive.
Expected Outcome 1: Older adults at the greatest risk for unnecessary nursing home placement or hospitalization will receive Aging and Adult Services Aging (AASA) funded Care Management services.

Objective 2: Conduct at least four trainings for Care Management Supports Coordinators on topics such as new technology, current practice guidelines, elder abuse, and caregiver resources. All new staff will complete person-centered thinking online training within their first year of hire.
Expected Outcome 2: Care Management supports coordinators will keep their knowledge and skill levels current to the agency and state priorities and models of provision of care to participants.

Number of client pre-screenings:	Current Year:	49	Planned Next Year:	50
Number of initial client assesments:	Current Year:	39	Planned Next Year:	40
Number of initial client care plans:	Current Year:	39	Planned Next Year:	40
Total number of clients (carry over plus new):	Current Year:	74	Planned Next Year:	79
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:12	Planned Next Year:	1:25

Case Coordination and Support

Starting Date	10/01/2021	Ending Date	09/30/2022

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Total of Federal Dollars	$492,624.00	Total of State Dollars	$1,301,263.00

Geographic area to be served

Region 1-B

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

Objective 1: Conduct at least four trainings for Case Coordination & Supports Caseworkers and Supports Coordinators on topics such as new technology, current practice guidelines, elder abuse, and caregiver resources. All new staff will complete person-centered thinking online training within their first year of hire.
Expected Outcome 1: Care Management supports coordinators will keep their knowledge and skill levels current to the agency and state priorities and models of provision of care to participants.

Objective 2: Reduce the number of participants reporting social isolation through targeted efforts by the AAA 1-B Case Workers and Supports Coordinators.
Expected Outcome 2: Participants with reduced social isolation will experience improved health status, increased self-esteem, and reduced feelings of loneliness.

Information and Assistance

Starting Date	10/01/2021	Ending Date	09/30/2022
Total of Federal Dollars	$718,000.00	Total of State Dollars	$0.00

Geographic area to be served

Region 1-B

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

Objective: Increase the presence of Information & Assistance (I&A) within the communities we serve.
Expected Outcome: Increased awareness of I&A services, improved relationship building with community agencies for resource development, and increased access to I&A for a more person-centered approach.

Objective: Provide more enhanced Information & Assistance and support by helping with accessing resources at the first point of contact.
Expected Outcome: More older adults and family caregivers receive needed resources.

Outreach

Starting Date	10/01/2021	Ending Date	09/30/2022
Total of Federal Dollars	$679,965.00	Total of State Dollars	$10,000.00

Geographic area to be served

Region 1-B

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

Objective: Enhance the digital presence of the AAA 1-B to increase awareness of the agencies and meet individuals at their point of need.
Expected Outcome: Increase the number of older adults and family caregivers who access the AAA 1-B for information and assistance.

Objective: Continue to develop relationships with local companies to reach working family caregivers with

Area Agency On Aging 1-B **FY 2022**

information on the AAA 1-B and our programs and services.
Expected Outcome: Increase the awareness of working family caregivers of the AAA 1-B and the various programs and services available through the agency.

Objective: Strengthen the position of the AAA 1-B as the source of information on aging through active outreach to local and state media.
Expected Outcome: Increase the awareness of the AAA 1-B among all individuals with a focus on increasing awareness of the agency for older adults and family caregivers.

Objective: Increase the number of community presentations to older adults and family caregivers on agency services.
Expected Outcome: To increase the awareness of the AAA 1-B among older adults and family caregivers.

Options Counseling

Starting Date	10/01/2021	Ending Date	09/30/2022
Total of Federal Dollars	$52,000.00	Total of State Dollars	

Geographic area to be served

Region 1-B

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

Objective: To provide options counseling to older adults and family caregivers at first point of contact through the AAA 1-B Information & Assistance department.
Expected Outcome: An increase in the understanding of and access to the programs and services by older adults and/or family caregivers.

Area Agency On Aging 1-B **FY 2022**

Direct Service Request

Select the service from the list and enter the information requested pertaining to basis, justification and public hearing discussion for any new Direct Service Request for FY 2022. Specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Include any COVID-19 policy waiver-approved direct provision of service that is continuing into FY 2022. Direct service budget details for FY 2022 are to be included under the Direct Service Budget tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified on the Support Services Detail page. Please skip this section if the area agency is not submitting a new request to provide an in-home, community, or nutrition service directly during FY 2022.

Caregiver Education, Support and Training

Total of Federal Dollars Total of State Dollars

Geographic Area Served Region 1-B

Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.
The AAA 1-B has an approved Direct Service Request to provide Caregiver Education, Support and Training for the Fiscal year 2020-2022 multi-year plan period. In FY 2022, the AAA 1-B requests approval to add the Caregiver Coaching program to our Caregiver program offerings.

Trualta
The AAA 1-B requests approval to continue to provide Trualta as a direct service. Trualta is an innovative eLearning program for family caregivers of a care recipient with dementia that the AAA 1-B began providing in FY 2019. This program offers skill-based training delivered through an online learning system built specifically for the family caregiver audience. Each family caregiver receives a personalized learning journey based on the caregiving topics that are most relevant to their care situation. Family caregivers will gain practical knowledge of the basics of personal care (e.g., tips for showering and toileting), dementia care for managing difficult situations (e.g., wandering and agitation), safety and injury prevention, and caregiver wellness (e.g., balancing work and caregiving) from the comfort of their home.

The AAA 1-B provides regional leadership for the Trualta program by providing at least 100 caregivers a year access to this program, either through the Community Living Program staff or through sign-up by the AAA 1-B staff at Caregiver Trainings in the community. The AAA 1-B staff will add increased access as demand warrants and funding allows, ensuring that 100 family caregivers who live throughout the region will have access to this program in FY 2022. This program will be provided in partnership with Trualta.

Dementia Friends
The AAA 1-B will continue to provide Dementia Friends as a direct service. The goal of the Dementia Friends informational session is to help community members understand dementia and the small things they can do to make a difference for people living with dementia throughout our networks and communities in Region 1-B in Southeastern Michigan.

Caregiver Coaching
The AAA 1-B will provide Caregiver Coaching as a direct service. The Caregiver Coaching Program is based on a curriculum developed by the Westchester County Department of Senior Programs and Services (WCDSPS) and Fordham University Ravazzin Center on Aging. Caregiver Coaches are volunteers who are required to make a one-year commitment to the program. The volunteer coaches are trained on the Caregiver Coaching curriculum, which includes a 12-hour training that covers caregiver challenges, the aging process, and coaching techniques. Once trained, Caregiver Coaches are matched with a family caregiver in need of support.

After coaches and caregivers are matched, there is no specific length of time for the coaching relationship. In some instances, it will be a longer-term relationship spanning months or possibly years, while other times it will be only a couple of contacts while the caregiver is needing assistance with something that is time limited. Coaches act as mentors, referral sources, and valuable resources for caregivers with whom they work. Caregiver Coaches work with AAA 1-B employees, including Project Manager and Caregiver Resource Specialist, to receive ongoing education and support. Caregiver Coaches report to the AAA 1-B on their contacts with caregivers to track hours spent supporting caregivers and the types of support provided.

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 direct service 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.

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

Provide a detailed justification for the direct 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.
Trualta
The AAA 1-B is the first area agency on aging in Michigan to use Trualta on-line training for family caregivers. Costs include access to the software platform for the AAA 1-B staff trainings, creation of 100 unique user profiles, data analytics, printed manuals, and platform maintenance/assistance.

Dementia Friends
The AAA 1-B is the only organization in Region 1-B to provide Dementia Friends informational sessions for families, colleagues, and the wider community. The AAA 1-B has several employees who are master trained Dementia Friends Champions, who can train other Dementia Friends Champions and conduct Dementia

Friends informational sessions. Costs include purchase of handouts and administrative costs for coordination of the program.

Caregiver Coaching
The AAA 1-B is the only organization in Michigan to provide the Caregiver Coaching program. The AAA 1-B piloted the program through grant funding in Livingston, Macomb, Oakland, and Washtenaw counties and the successful pilot led the AAA 1-B to plan for expansion of the program throughout Region 1-B in FY 2022. The program is a cost-effective program that serves family caregivers using a one-on-one method that utilizes volunteers and serves as a next step for caregivers after attending traditional support groups and caregiver trainings and workshops. Costs include training volunteer Caregiver Coaches, volunteer management, staffing for the Program Manager, and administrative costs for coordination of the program.

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).
There were no comments related to Caregiver Education, Support and Training at the AAA 1-B public hearing.

Area Agency On Aging 1-B **FY 2022**

Regional Direct Service Request

Area agencies that have a new request to provide a regional service directly must complete this tab for each service category. Enter the regional service name in the box and click "Add." The regional service name will appear in the dialog box on left after screen refresh. Select the link for the newly added regional direct service and enter the information requested pertaining to basis, justification and public hearing discussion for any new regional direct service request for FY 2022. Also specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Include any COVID-19 policy waiver-approved regional direct provision of service that is continuing into FY 2022. Address any discussion at the public hearing related to each new regional direct service provision request. Regional Direct Service Budget details for FY 2022 are to be included under the appropriate tab in the Area Plan Grant Budget. 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, Support Services Detail page.

Total of Federal Dollars

Total of State Dollars

Geographic Area Served

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

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 direct service 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 direct 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.

Area Agency On Aging 1-B **FY 2022**

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

Area Agency On Aging 1-B **FY 2022**

Approved MYP Program Development Objectives

Program development goals and objectives previously set by the area agency 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 area agency to provide information on progress toward the objectives to date. This text box is editable. Please provide information on progress to date for each established objective under the section tab entitled "Progress."

For the Diversity, Equity and Inclusion (DEI) objective, include progress on trainings for staff and subcontractors in DEI and unconscious bias. Discuss efforts to ensure that programming and outreach is culturally sensitive and welcoming to all participants, including non-English speaking persons. Discuss efforts to ensure that providers are trained to adapt to diverse cultural needs.

Area Agency on Aging Goal

A. Implement the AAA 1-B Advocacy Strategy to secure increased state, federal, and/or local support for older adult services

Objectives

1. Implement the AAA 1-B Advocacy Strategy to secure increased state, federal, and/or local support for older adult services.
   Timeline: 10/01/2019 to 09/30/2022

Progress
The AAA 1-B created a Legislative Platform for the 2021-2022 legislative session with input from the AAA 1-B Advisory Council and Board of Directors. The platform includes information about fourteen priority advocacy issues for the agency, including rebalancing Michigan's long term care spending, support for AASA in-home services, and support for the direct care workforce.

The AAA 1-B created Contact your Legislator Guides for each of Region 1-B's six counties. The guides provide information about effective methods for grassroots advocates to contact their legislators, along with contact information for federal, state and county elected officials.

The AAA 1-B advocacy efforts to extend the premium pay increase for direct care workers were successful. In March 2021, the direct care worker premium pay rate increase was extended until the end of FY 2021 and increased by $.25 per hour.

Congress approved increased funds for Older Americans Act services provided by the aging network to support emergency response to the COVID-19 pandemic in a December 2020 COIVD-19 supplemental appropriation and the 2021 American Rescue Plan.

The AAA 1-B has worked with all six county health departments in Region 1-B to advocate for in-home vaccinations to be provided to homebound individuals.

Area Agency On Aging 1-B **FY 2022**

The AAA 1-B has continued to provide leadership to the statewide Silver Key Coalition, which is focused on addressing unmet needs for AASA in-home services. The Coalition is requesting a $6.375 million increase for senior in-home services and a $1 million increase for Home Delivered Meals in the Aging and Adult Services Agency (AASA) FY 2022 budget.

On May 14th, the AAA 1-B hosted a virtual legislative town hall for senior advocates featuring a panel of four legislators in recognition of Older Michiganians Day Senior Action Week.

2. Secure increased support for regional transportation and expansion of the Michigan Department of Transportation Specialized Services program, which provides operating support for small bus service targeted to older adults and adults with a disability.
   Timeline: 10/01/2019 to 09/30/2020

Progress
The timeline set for this objective ended on 9/30/20. An update on this objective was provided in the FY 21 Annual Implementation Plan.

B. Develop additional resources for caregivers which will improve their confidence and ability to care for their loved one

Objectives

1. Develop additional resources for caregivers which will improve their confidence and ability to care for their loved one.
   Timeline: 10/01/2019 to 09/30/2022

Progress
Many community-based programs provided by the AAA 1-B have been put on hold due to the COVID-19 outbreak. Some programs have been offered virtually, including legal presentations for caregivers and the Powerful Tools for Caregivers program. The Trualta e-learning platform continues to be promoted and utilized by caregivers throughout the AAA 1-B region.

The AAA 1-B launched a new grant funded pilot program, Caregiver Coaching, in 2020. Volunteer Caregiver Coaches are matched with an informal family caregiver to provide information, support, resources, and to be a listening ear. Caregiver Coaches in the program undergo a 2-day training and attend monthly meetings to discuss problems that informal caregivers face. The Caregiver Coaching program is currently operating in Washtenaw and Livingston Counties with plans to expand the program throughout Region 1-B in FY 2022.

2. Increase family caregiver eLearning usage through a partnership with Trualta for caregiver education, support and training through the delivery of online education as a direct service.
   Timeline: 10/01/2019 to 09/30/2020

Progress
The timeline set for this objective ended on 9/30/20. An update on this objective was provided in the FY 21 Annual Implementation Plan.

C. Expand wellness programming throughout Region 1-B.

Objectives

1. Expand wellness programming throughout Region 1-B
   Timeline: 10/01/2019 to 09/30/2022

Progress
Evidence-Based Health and Wellness Programs continue to be offered virtually throughout the AAA 1-B region, using the GoToMeeting virtual platform. Workshop participation is less than in previous years, as many older adults are not able to access or do not have the knowledge to access virtual platforms; however, the AAA 1-B continues to promote programming around the region and across the state offering technical assistance as needed. Evidence-Based programs that have been offered virtually include: Chronic Pain PATH, Diabetes PATH, Aging Mastery Program, and Powerful Tools for Caregivers. A Matter of Balance will begin to be offered virtually in late spring of 2021.

D. Expand Medical Nutrition Therapy (MNT) throughout Region 1-B to Medicare recipients

Objectives

1. Expand Medical Nutrition Therapy (MNT) throughout Region 1-B to Medicare recipients.
   Timeline: 10/01/2019 to 09/30/2020

Progress
The timeline set for this objective ended on 9/30/20. An update on this objective was provided in the FY 21 Annual Implementation Plan.

E. Incentivize communities to conduct a Caregiver Friendly Community Self-Assessment and enact improvements to their caregiver support resources.

Objectives

1. Incentivize communities to conduct a Caregiver Friendly Community Self-Assessment and enact improvements to their caregiver support resources.
   Timeline: 10/01/2019 to 09/30/2022

Progress
The AAA 1-B publicly launched the Caregiver Friendly Communities Assessment in April 2021. Leading up to public launch, 21 cities and counties across Michigan completed the Caregiver Friendly Communities Assessment and provided valuable feedback for the final product. Public launch included outreach to older adult service providers, and community planners across Michigan, encouraging them to conduct the assessment for their community. Public launch marketing efforts included information on the shrinking ratio of informal caregivers to older adults and encouraged communities to use the Caregiver Friendly Communities Assessment as a planning tool to identify supports to improve their community in readiness for this trend. After taking the Assessment and receiving a community-specific report detailing strengths and weaknesses, assessment takers have access to a resource website with best practices and recommendations to improve their community's support of caregivers and older adults.

On April 13, the AAA 1-B presented the Caregiver Friendly Communities Assessment at the American Society on Aging's annual conference.

F. Increase AAA 1-B capacity to secure additional funding resources.

Objectives

1. Increase AAA 1-B fundraising capacity to secure additional financial resources that support agency services, operations, and older adult unmet needs
   Timeline: 10/01/2019 to 09/30/2022

Progress
As of May 31, 2021, the AAA 1-B philanthropy efforts in FY 2021 have resulted in $33,307 for the agency's unrestricted annual fund and $52,412 for the Holiday Meals on Wheels program. The AAA 1-B has additional fundraising campaigns and several grant solicitations planned for the remainder of FY 2021. It is projected that the AAA 1-B will slightly exceed the total amount raised in FY20.

2. Increase AAA 1-B grant seeking activities to support program innovation and enhancement.
   Timeline: 10/01/2019 to 09/30/2022

Progress
Through March 2021, the AAA 1-B increased grant seeking activities to secure grants that supported innovation, systems change, and program enhancement for older adults and family caregivers. The AAA 1-B secured new and increased grant funding totaling $701,103 for four grants. Two additional grants are currently pending decision. Grants secured include the following:

- Reimagine Caregiving: awarded the Ralph C. Wilson, Jr., Foundation Caregiver Prize through the Vital Seniors Initiative at Ann Arbor Area Community Foundation for activities in Washtenaw County. Reimagine Caregiving is aimed at changing mental models at the individual, community, and organizational levels to affect systems change, which will result in better support to caregivers and increased quality of life for caregivers and older adults.

- Older Adult Refugee Assistance: funded by Office of Global Michigan in the Michigan Department of Labor and Economic Opportunity to provide services to older adult refugees in Oakland and Macomb counties. This program received increased funding in FY 2021 and services are subcontracted to Chaldean American Ladies of Charity.

- COVID-19 No Wrong Door System: funded by the Aging and Adult Services Agency (AASA), provides services and supports to ensure older adults and adults with disabilities throughout NWD Region 7 (AAA Region 1-B) have access to services and technological solutions to address the increased prevalence of social isolation due to COVID-19. To implement this initiative to older adults and adults with disabilities, the AAA 1-B is partnering with Ann Arbor Center for Independent Living, Blue Water Center for Independent Living, and Disability Network Oakland and Macomb.

- Winter Crisis Relief: funded by United Way for Southeastern Michigan to stabilize older adult households in Macomb and Oakland counties. The AAA 1-B contracted with three organizations to provide services through this grant: Interfaith Volunteer Caregivers, Lakeshore Legal Aid, and OLHSA.

- Livingston County Resource Directory: funding by United Way of Livingston County and Livingston County Board of Commissioners will allow the Livingston County Leadership Council on Aging to provide a printed resource directory of services available for older adults in Livingston County.

G. Undertake basic research and demonstration projects that provide evidence for data-driven decision making for program advocacy and management.

Objectives

1. Undertake basic research and demonstration projects that provide evidence for data-driven decision making for program advocacy and management.
   Timeline: 10/01/2019 to 09/30/2022

Progress
Actions and outcomes in FY 2020 that were influenced by the solutionary reports and presentations include:
- Advocacy and collaboration with county health departments to develop strategies to vaccinate homebound older adults and adults with disabilities.
- Establishment of a grant funded out-of-home extended respite service in Washtenaw county.
- Integration of a Smart Question strategy into ongoing MI Choice participant monitoring that predicts elevated risk of hospitalization and prompts a clinical intervention to address factors associated with the risk of hospitalization.
- Documented the outcomes of a public/private project to address social isolation in senior congregate living facilities involving Oakland County, Amazon, and American House Senior Living Residences.
- Developed a project with the Oakland County Board of Commissioners to undertake a senior needs and solutions study and produce a Blueprint for Aging Master Plan.

2. Identify additional resources and advocate for policy solutions to increase support to grandparents raising grandchildren, including understanding and addressing the respite needs of grandparents raising grandchildren.
   Timeline: 10/01/2019 to 09/30/2020

Progress
The timeline set for this objective ended on 9/30/20. An update on this objective was provided in the FY 21 Annual Implementation Plan.

3. Initiate the identification, measurement, and reporting of outcomes for contracted services in collaboration with the aging network.
   Timeline: 10/01/2019 to 09/30/2022

Progress
An outline for a white paper on Older Americans Act funded home and community-based service outcomes measurement has been created and drafting of the report has begun. Services are being identified to begin the data collection process. The team will continue to meet to develop a plan of work. The AAA 1-B staff will meet with the contracted service providers identified for evaluation to discuss the data collection and outcomes.

H. Ensure that AAA 1-B services are accessible to Michigan's communities and people of color, immigrants and LGBTQ+ individuals

Objectives

1. Establish outreach partnerships with key local organizations to understand the caregiver cultural needs within each minority population.
   Timeline: 10/01/2020 to 09/30/2021

Progress
The AAA 1-B is partnering with Asian Center Southeast Michigan to provide support to Chinese American family caregivers. Through the partnership, Asian Center Southeast Michigan will provide a nine-month support and education series to Chinese American family caregivers in their native language.

The AAA 1-B is establishing partnerships with the Association of Chinese Americans and the Michigan Asian Pacific American Affairs Counsel for outreach to Asian Pacific family caregivers.

The AAA 1-B is working to establish partnerships with Centro Multicultural La Familia and the Michigan Hispanic Chamber of Commerce for outreach to Hispanic family caregivers.

The Diverse Elders Resource Hub is a non-profit organization is specifically focused on identifying barriers and challenges for family caregivers within minority populations. The AAA 1-B will utilize this resource to address barriers with local minority organizations.

In FY 2021 the AAA 1-B has seen a 40% increase, compared to first two quarters of FY 2020, in LGB and/or T identified callers. The Area Agency on Aging 1-B has a strong relationship with SAGE Metro Detroit to assist with increasing those referrals. An agency staff member serves on the SAGE Metro Detroit Board. The Information and Assistance Manager has also met with the SAGE Friendly Caller Coordinator to ensure the coordinator is familiar with agency services and has multiple avenues for referring SAGE Friendly Caller participants.

The AAA 1-B uses a Language Line to provide telephonic translation services when talking with an individual who speaks a language other than English. The AAA 1-B is on track to serve more people using the Language Line service in FY 2021 than in FY 2020. As of March 31, 2021, the AAA 1-B has used the Language Line service for 93 calls with 56% of those calls for Arabic speaking individuals, 12% Somali, and 8.6% Mandarin. In FY 2020, the agency supported 108 total callers with 65% of the calls for Arabic translation, 9% Spanish, and 6.5% Russian.

Through the COVID-19 Immunization Support grant from AASA, the AAA 1-B is partnering with local service providers that work with minority and harder-to-reach older adult populations to provide COVID-19 vaccine outreach and support. The project increases awareness of and access to the COVID-19 vaccine amongst minority populations and strengthens partnerships with organizations serving elders in these communities. AAA 1-B is partnering with the following organizations: SAGE to serve LGBTQ+ older adults; Chaldean American Ladies of Charity to serve Chaldean and Arabic older adults; Association of Chinese Americans to serve Chinese and Asian Pacific older adults; and Centro Multicultural La Familia to serve Latinx and African American older adults. In addition to the minority-focused organizations, the AAA 1-B is partnering with Monroe County Opportunity Program and Council on Aging, serving St. Clair County to reach rural populations.

2. Ensure culturally relevant outreach materials targeted at the family members providing care for older loved ones are available in Region 1B.
   Timeline: 10/01/2020 to 09/30/2021

Progress
The AAA 1-B has translated updated agency brochures into Spanish (attached in appendix) and is working to translate brochures to Mandarin to address the language access barrier for materials and information.

3. Ensure family caregivers from diverse communities are aware of available programs and services.
   Timeline: 10/01/2020 to 09/30/2021

Progress
The AAA 1-B will distribute translated brochures through local partnerships to reach minority family caregivers. Once in-person presentations can be provided again, the AAA 1-B will work with local partnering organizations to host presentations, with translators, to provide information on programs and services available for family caregivers and their older loved ones.

4. Ensure that contracted organizations and AAA 1-B staff receive annual diversity, equity, and inclusion training, including education on recognizing and addressing unconscious bias.
   Timeline: 10/01/2020 to 09/30/2021

Progress
In November 2020, the AAA 1-B staff participated in a 90-minute interactive Implicit Bias and Diversity, Equity and Inclusion Workshop. Through the interactive virtual workshop, participants engaged in discussions and exercises around understanding the origin of biases and how they may impact decisions, perceptions, and interactions in the context of diversity and inclusion.

The AAA 1-B will provide diversity, equity and inclusion training during quarterly trainings for contracted providers, which have been tentatively scheduled for June and September 2021.

In FY 2021, seven AAA 1-B staff responsible for clinical program intake completed the SAGE (Services and Advocacy for GLBT Elders) Metro Detroit ARC (Act, Reflect, Commit) training, and eighteen staff members attended the 2-hour virtual training, “LGBT Older Adults: A Step Forward in Understanding”, with SAGE Metro Detroit. Clinical staff that did not participate in the SAGE Metro Detroit Training participated (or are scheduled to participate) in either a SAGE National Webinar or a Relias LGBTQ on-line training. The Area Agency on Aging 1-B has maintained our Bronze SAGECare Credential for 2021; the SAGECare Credential confirms that at least 25% of agency staff have completed LGBT cultural competency training.

Area Agency On Aging 1-B **FY 2022**

2022 Program Development Objectives

The area agency must enter each new program development goal in the appropriate text box. It is acceptable, though not required, if some of the area agency's program development goals correspond to AASA's State Plan Goals. There is an entry box to identify which, if any, State Plan Goals correlate with the entered goal. A narrative for each program development goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box. Complete the information in the text boxes for the timeline, planned activities and expected outcomes for each objective. (See Document Library for additional instructions on completing the Program Development section.)

Area Agency on Aging Goal

A. Evaluate AAA 1-B services offered and service standards for FY 2023-20215 Request for Proposals cycle.
State Goal Match: 4

Narrative
1.The AAA 1-B will work with its contractors and AASA to evaluate services offered and service standards to ensure services are meeting the needs of older adults in their homes and the community. Identified improvements to service options and standards will be incorporated into the FY 2023-2025 Request for Proposals.

Objectives

1. With input from AAA 1-B contractors and AASA, the AAA 1-B will review and potentially update its services offered and the standards to improve services at the community level in anticipation of COVID-19 reopening and the FY 2023-2025 Request for Proposals (RFP) cycle.
Timeline: 10/01/2021 to 09/30/2022

Activities
The AAA 1-B will seek feedback from contracted service providers and other stakeholders regarding community needs through provider meetings and surveys.
The AAA 1-B will work collaboratively with AASA to determine how AAA 1-B service standards can be modified to reflect community needs.

Expected Outcome
1.Service options and standards will be reviewed and updated, as allowable, for the FY 2023-2025 Request for Proposals cycle.

Area Agency On Aging 1-B **FY 2022**

Supplemental Documents

This year, the completion of the Quality Outcome Measures Reporting Form (six-month report) and the Emergency Management and Preparedness document are required and may be found in the Document Library.

Supplemental Documents A through F are presented in the list below. Select the applicable supplemental document(s) from the list on the left. 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.

A. Policy Board Membership - Required
B. Advisory Council Membership - Required
C. Proposal Selection Criteria - *should only be completed if there are new or changed criteria*
D. Cash-In-Lieu-Of-Commodity Agreement - *should only be completed if there are new or changed criteria*
E. Waiver of Minimum Percentage of a Priority Service Category - *should only be completed if there are new or changed criteria*
F. Request to Transfer Funds - *should only be completed if there are new or changed criteria*

Area Agency On Aging 1-B **FY 2022**

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	1	0	0	0	11	19
Aged 60 and Over	0	1	0	0	0	6	9

Board Member Name	Geographic Area	Affiliation	Membership Status
Comm. Lisa Beedon	St. Clair County	St. Clair County Board of Commissioners	Elected Official
Ronald Borngesser	Oakland County		Appointed
Jeff Chang		Business/ Information Technology	Community Representative
Howard Collens		Legal	Community Representative
Kelli Dobner		Philanthropy	Community Representative
Sandra Hann	Macomb County		Appointed
Michelle Hodges		Finance	
Comm. Wes Nakagiri	Livingston County	Livingston County Board of Commissioners	Elected Official
Comm. Penny Luebs	Oakland County	Oakland County Board of Commissioners	Elected Official
Kathy Lyall		Healthcare/Health Insurance	Community Representative
Comm. Jason Maciejewski	Washtenaw County	Washtenaw County Board of Commissioners	Elected Official
Martha Vurich	St. Clair County		Appointed
Tom Miree	Washtenaw County		Appointed
Hamza Osto		Medical/Telehealth	Community Representative
Comm. Julie Matuzak	Macomb County	Macomb County Board of Commissioners	Elected Official

Area Agency On Aging 1-B **FY 2022**

Sue-Anne Sweeney		Gerontology/Geriatrics	Community Representative
Barbara Turner	Monroe County		Appointed
Comm. Dawn Asper	Monroe County	Monroe County Board of Commissioners	Elected Official
Marc Zwick		Finance	Community Representative

Area Agency On Aging 1-B **FY 2022**

SUPPLEMENTAL DOCUMENT B

Advisory Board Membership

	Asian/ Pacific Islander	African American	Native American/Alaskan	Hispanic Origin	Persons with Disabilities	Female	Total Membership
Membership Demographics	1	2	0	0	1	9	17
Aged 60 and Over	0	2	0	0	1	5	11

Board Member Name	Geographic Area	Affiliation
Ruth Dunkle		Public Sector: Education/Gerontology
Gloria Edwards	Washtenaw County	Older Adult Representative
Steve Faine	Oakland County	Older Adult Representative
Jim Forrer		Private Sector: Nonprofit/Charity
Jyme Hager		Private Sector: Title IIIB Nutrition Provider
Catherine Martin		Private Sector: UAW Retirees
Floreine Mentel	Monroe County	Older Adult Representative
Vanessa Metti		Private Sector: DSP Provider
Christina Murray		Public Sector: Veterans Administration
Dan Sier	Macomb County	Older Adult Representative
Joseph Sucher	Oakland County	Older Adult Representative
Mark Swanson	Livingston County	Older Adult Representative
Carol Thompson		Private Sector: Home Care Provider
Tom Zaremba	Washtenaw County	Older Adult Representative
David Soltis		Private Sector: Elected Official
Carol Weidenbach	Macomb County	Older Adult Representative
Jeff Chang		Ex Officio

Area Agency On Aging 1-B **FY 2022**

SUPPLEMENTAL DOCUMENT D

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

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

Estimated number of meals these funds will be used to produce is:	**1,049,000**

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

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

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

Area Agency on Aging 1-B

Answers you can trust

La edad es solo un número. Llámanos de todos modos.

Area Agency on Aging1-B es una organización sin fines de lucro que conecta a adultos mayores y cuidadores familiares con servicios y programas en el sureste de Michigan. Los amables especialistas en recursos que trabajan en nuestra línea telefónica de Información y Asistencia lo ayudarán a conectarse con los recursos y las referencias que necesita. Llámenos a nosotros primero.

800-852-7795

www.aaa1b.org

Al servicio de los condados de Livingston-Macomb-Monroe-Oakland-St.Clair-Washtenaw

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Area Agency on Aging 1-B

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The Council on Aging, Inc.,
serving St. Clair County
www.thecouncilonaging.org

May 13, 2021

ADMINISTRATION OFFICE
600 Grand River Avenue
Port Huron, MI 48060
Phone: (810) 987-8811

DISTRICT OFFICES:

PORT HURON SENIOR CENTER
600 Grand River Avenue
Port Huron, MI 48060-3898
Phone: (810) 984-5061

WASHINGTON LIFE CENTER
403 N. Mary Street
Marine City, MI 48039
Phone: (810) 765-3523

YALE SENIOR CENTER
3 First Street
Yale, MI 48097
Phone: (810) 387-3720

CONRAD COMMUNITY CENTER
585 N. Main Street
Capac, MI 48014
Phone: (810) 395-7889

Area Agency on Aging 1-B
Attn: Amanda Sears
29100 Northwestern Hwy., Suite 400
Southfield, MI 48034-1091

Dear Amanda and Implementation Plan Drafters,

After reading through AAA 1-B's Implementation Plan for FY 2022 there is very little mention of how AAA 1-B plans to interact, communicate, and engage with their service providers. Discussions with AAA 1-B contract vendors specifically related to contracted and DSP service needs, definitions, and allowed tasks/jobs needs to occur as AAA 1-B staff prepare for the next three-year funding cycle during FY2022. In order for seniors to continue living safely and independently in their own homes in this region items that were removed from the "allowable tasks/jobs listing" for the current three-year cycle, that are requested by seniors need to be reinstated.

For the current three-year funding cycle changes made to the list of "allowable tasks/job" removed tasks which for years have been on the listing to allow us to keep the seniors, and their living environment, safe and healthy. During the Covid Pandemic the shortened allowable task lists restricted we providers in what we could do for seniors under contracts. With seniors limiting access to their homes as they isolated themselves, outside jobs or emergency needs assistance were all that could be done and counted towards contracts given the state's executive orders, which resulted in reduced client and unit numbers. There was no option available per the RFP for contract managers to be able to authorize deviations to the allowable jobs/tasks listing which could have increased reported units of service.

Having been involved in the definitions and allowable tasks development during the past 35 years that I have been involved in senior services, we providers had worked together at meetings with the AAA 1-B staff to compile more comprehensive listings for many of the services than what is now in place. We providers were able to provide the rationale for the items that had embellished the basic listing put forth by OSA/ASAA allowing AAA 1-B's staff to get state approval and the addition of those jobs to the list in the RFP for Region 1-B. The following are examples of the types of work we are no longer allowed to do for our seniors under the current RFP listings.

- The removal of gutter cleaning services leaves the seniors' homes vulnerable to water damage inside their homes due to clogged eve troughs backing water up under shingles in a heavy rain that quickly can become a "black mold" health issue. In St. Clair County we had 194 seniors in FY 2019 we provided this service for. But in FY 2020 172 seniors requested this service and six months into FY2021 we had another 89 requests which we could not do under our Chore contract with AAA 1B. For FY2020 that, at a minimum, would have been over 300 additional Chore units we could have done under contract.

- The removal of "carpentry repairs to steps, floorboards and railings" leaves seniors at risk of falls themselves, as well as their visitors or delivery people. Injuries caused by these repairs being neglected can result in citations and possible costly litigation for our seniors. We had 52 request in FY2020, and another 18 in the first six months of FY2021 that could not be done and counted towards our Chore contract with AAA 1B. Again, a loss of several hundred units for AAA 1-B.
- Another item removed from the listing puts seniors' lives at risk if emergency services cannot locate a clearly displayed address number on a home or if they are missing a numbered mailbox. Minutes matter on calls for help and if emergency personnel have to search for an address it could cost someone their life.
- Also removed from the tasks list was the replacement of batteries in smoke and CO detectors. Having our staff climbing ladders to do this work is much safer than having the seniors attempt it. It is a task that needs to be done periodically to ensure the devices work to notify the residents of dangerous situations. In FY 2019 Council on Aging had 20 senior homes where we did this for seniors. In FY 2020 we had 27 seniors requesting this service and in the first six months of FY 2021 another 10. Not a difficult task for our crews, but a necessity for safety.
- AAA 1-B's revised listing has us able to trim overhanging tree branches, but you removed the trimming of shrubs, which can be more of a safety issue, especially if the overgrown shrubs infringe on walkways and home entrances. Not only do they increase the chance of falls, but they also become homes to wild animals and hornets, bees, and wasps which become aggressive when disturbed. We had 80 requests for shrubs to be trimmed in FY 2020 and have had 37 request in the first six months of FY 2021. Again, amounting to several hundred units not countable under the current Chore description.
- In St. Clair County there are a number of large mobile home parks which have regulations their residents must follow, or they face fines, or in severe situations removal from the park. Most require the mobile homes to be skirted to reduce the chances of racoons, opossums and other vermin from taking up residency and spreading filth and disease. Repairing or replacing the skirting isn't a task most of the seniors living in these communities can do on their own, so they have turned to us for assistance in the past, which we cannot do under the revised definition for Chore.
- The item that was removed from the Home Injury Control list that really doesn't make sense was the handheld shower. If you allow for shower chairs/benches, but do not allow for the installation of a handheld shower along with it you are risking falls that could be easily prevented. No one stands in the constant stream of a fixed placement shower head. You move in and out of the water stream to suds and rinse and to catch your breath. If you are seated on a shower bench you cannot direct the flow of water is on your own. For personal care workers assisting seniors seated on a chair in a shower with a fixed shower head it is back wrenching work to get the senior lathered and rinsed. The safer solution is to install a handheld shower so the flow of the water can be better directed on the senior. It also reduces the chances of water getting onto the floor outside of the tub where falls could then occur. In FY2019 we installed 10 handheld showers under HIC. In FY 2020 we had requests for 16 handheld showers, and in the first six months of FY 2021 had 11 more, none of which could be done under Home Injury Control.
- Being stuck in a home or apartment that does not have air conditioning and/or that has limited air flow during the hottest part of the summer can prove deadly for some seniors. Air conditioner units and box fans were added to the allowable HIC list years ago to help those who

have difficulty breathing in high temperatures when high humidity is present. We have 23 air conditioning units we install in those seniors' residencies at the beginning of the summer and then we return in the fall to remove them and store them until they are needed the next year. Prior to them coming off of the "allowable listing" we had funds available to replace worn out/broken machines. We are still putting in the air conditioners and box fans we have in stock that were purchased with HIC funds, but since FY 2020 we cannot count them in the HIC units for AAA 1-B any longer.

- The inflexibility of limiting us to only the specific items on the "allowed lists" shortchanges the units reported to AAA 1-B and doesn't allow for assistance to be provided to the seniors to meet their needs. The installation of the air conditioners is a perfect example. We cannot count the installation of an air conditioning unit (which a few years ago was paid for from HIC dollars) as a unit for our current HIC contract. However, the time our Home Repair crews spend installing the devices we have, nor those of seniors who have their own, can count for Chore units, since only screen installation is allowed to help reduce the heat in seniors' homes during the summer. The listings need to have an option that the contract manager can authorize common sense tasks/jobs not appearing on the lists, but that can meet the requests for assistance and help keep seniors safe and healthy in our communities.

We service providers are on the front lines to assist the seniors in our service area. We hear from the seniors each and every day. This past thirteen and half months have challenged our staff in ways we never imagined. They have put themselves at risk each and every day to see that our seniors were fed, and their personal care needs met. We have done what we could under ever-changing mandates and orders. It has been stressful but rewarding knowing we were making a difference in a crazy time in our country's history. It has also been heart-wrenching to see so many of our seniors' names in the local obituaries and seeing how the imposed isolation to avoid Covid has diminished the vitality, and cognitive abilities of those we still serve. We deserve a chance to discuss as groups of service specific providers with the AAA 1-B staff how service deliveries should progress in this region based on what we have each experienced this past year. Open communication has to happen for us all to succeed.

Sincerely,

Mary M. Taylor

Mary M. Taylor, L.B.S.W.
Assistant Director

Amanda Sears
AAA I-B
29100 Northwestern Hwy suite 400
Southfield, MI 48034

May 13, 2021

Dear AAA I-B,

I wish to direct area funding for the OLHSA grandparents Raising grandchildren program.

We have participated in this program after receiving our 1 yr old granddaughter into our care 9 yrs ago.

OLHSA program has been invaluable in the support of older grandparents raising a grandchild under financial retirement restrictions.

Recently we have had to make a rapid (due to court) decision to adopt our granddaughter. We turned to OLSHA for legal advise. LISA Gronsky referred us to Lakeshore Legal Aide office.

There needs to be a navigator program to assist kinship care givers with legal issues and medical issues. A resource that grandparents can use to make informed decisions on best care of their grandchildren would be very helpful.

We appreciate AAA 1-B funding for the Grandparents Raising Grandchildren program. There are many families in need of this program. It's better to have a child raised in their extended family rather than foster care.

But we need support through this process.

Thank you for your consideration

Pat Schulte
Bill Schulte

1407 W Davison Lake Rd
Oxford, MI 48371
248 628 2803

From: Gaspare1
To: Amanda Sears
Subject: GPRG -Thank you
Date: Thursday, May 13, 2021 1:38:14 PM

May 13, 2021

Reference: Grandparents raising Grandchildren

Dear Ms. Lisa Grodski, In these difficult times of our lives and the fear of worse happening, we rely even more in all the help from Grandparents raising Grandchildren. The sacrifice is not in vein but in peace, happiness and hope for our Grandchildren to achieve more in life, to have good jobs, credibility, and the ability to have the proper Nutrition, Schooling, Socializing as well as the love that bonds Families together.
Healthy contented and - loving Grandparent(s) endear their Grandchildren with the continued Support of GPRG, with these programs, meetings and Support Groups our lives are enriched, that's why we plead and thank you for even more continued meetings to obtain more knowledge to prosper in our lives raising our Grandchildren. The future is theirs, we have to guide them when they are young, GPRG project us to enhance what is necessary to inform their lives as well as our lives. Please continue funding for the services we are so Thankful for everything in our lives & we know more funding is always needed as we grow in community with these hard times, we hope these funds can be allowed and created the the coming 2022 year. Thank you for everything you do to unite our lives and help in so many ways.

Sincerely,

The Bommarito Family Shelby Township, Michigan 48315

From: tweeter
To: Amanda Sears
Subject: grg program
Date: Thursday, May 13, 2021 9:58:05 PM

Hello,
I was unable to make the meeting today but just wanted you to know how much this program has helped our quality of life.... the resources that grg offers is amazing.... I have been raising my grandson for almost 8 years now.. (since birth) and the road has been rough.... I can only hope that funding is increased for this program.... As grandparents we never thought we would be spending our ss checks on raising another child. We thought our job was done, but sadly it was not... so know we cut corners to try and figure out how to care for this extra mouth to feed, and maybe once in awhile have some fun with our grandkids, but things are so expensive and we never "planned" to be raising children this late in our lives..... Any extra help and support is much appreciated..

Heather Brown

Camp Cavell Conservancy
3335 Lakeshore Road
Lexington, Michigan 48450
(810) 359-2267
rebecca@campcavell.org

May 12, 2021

To Whom It May Concern:

I am writing to you on behalf of Camp Cavell Conservancy, a 501(c)3 non-profit organization committed to providing stewardship of our property while continuing to provide life-changing camp experiences, and our partnership with Oakland Livingston Human Services Agency's (OLHSA) Grandparents Raising Grandchildren program.

As a community organization ourselves, we see the importance of providing resources and opportunities to people of all ages. In 2019, OLHSA brought grandparents and grandkids together for an overnight weekend experience at Camp Cavell. Both grandparents and grandkids were able to step out of their comfort zones to try new things with the guidance of camp and OLSHA staff. They did everything from swimming and kayaking to basket weaving and learning about the Great Lakes. Everyone enjoyed the comforts of camp, while expanding their knowledge of nature and each other. The experience was unforgettable and deeply touched the hearts of all who attended. Camp has a way of bonding people, even with their own family members, that is unlike anything else.

The Grandparents Raising Grandchildren program is so important in so many ways, which we saw firsthand at Camp Cavell. The focus on providing support and resources, while creating lasting memories is seamless. We hope to continue this special retreat annually. Unfortunately, we have not been able to do so with the emergence of COVID-19. Now more than ever, safe, local retreats for families are needed. People need to get outside, enjoy together, and explore their surroundings. With continued funding and support, we look forward to this program rising again and make the positive, powerful impact that it had just two years ago.

Thank you for your support of OLHSA and Camp Cavell Conservancy. Seniors and their families need wonderful people like you to care for and enrich their lives every day.

With much appreciation,

Rebecca Nielsen
Associate Director, Camp Cavell Conservancy

From:	Joseph Cooke
To:	Amanda Sears
Cc:	Ernest Cawvey; Steve Schuster; Julie Matuzak
Subject:	MCA Public Hearing Input for AAA 1B Annual Implementation Plan
Date:	Friday, May 28, 2021 10:53:48 AM

Good Morning Amanda,

Please find below comments from Macomb Community Action's Community Services Division as it pertains to the request for comments during the recent Public Hearing/Town Hall regarding the Annual Implementation Plan for the Program Year 2021/22.

In response to the request for comments as part of the recent Area Agency on Aging 1B (AAA 1B) Public Hearing on the Annual Implementation Plan for the Program Year 2021/2022, Macomb Community Action's (MCA) Community Service Division would like to offer the following comments. First, let us preface that these comments pertain only to the Home Injury Control (HIC) program and are in no way indicative of the thoughts or opinions of MCA's Office of Senior Services and the Meals on Wheels, Congregate Dining, CHORE, or Adult Day programs.

Several years ago, the HIC program was moved to MCA's Community Services Division and integrated with other housing services programs. These programs include Minor Home Repair, Housing Rehabilitation, Weatherization, Accessibility, and the Grass and Snow program. Since that time, through cross-program referral and assessment, the HIC program has seen tremendous growth. MCA's Community Services Division has worked tirelessly to implement a thorough process of assessing residents' needs and developing programs that have lasting impact on their housing situation. Through that process, we have built a successful model of introducing residents to programs that, in many cases, they did not know existed. Our portfolio of diverse and helpful programs, affords us the ability to ensure that Macomb County seniors remain safe and independent in their homes.

By supplementing and leveraging the modest allocation received from AAA 1B with grants from organizations like United Way and COVID- CARES, the HIC program now boasts an inventory of more than 65 temporary modular ramps that are placed out in the community, up from 15 just a few years ago. Demand for the program has never been higher, leading to a robust waiting list for services.

As the senior population continues to increase rapidly in Macomb County, it is important that MCA be prepared to respond with services that are in demand. Part of that preparation is securing adequate funding. While one time grants and other funding opportunities are beneficial, they do not create an environment for longevity. We must ensure that these valuable and needed programs are funded at a sustainable level. That being said, we would like to request that AAA 1B consider a further, robust investment in the HIC program in Macomb County in order to maintain and further the reach of these services. The more dollars that can be secured, the more homes we can service. This will also create additional referrals to the great programs in our Office of Senior Services mentioned earlier. The mission statement of MCA is "persistent action to diminish poverty and promote independence". We feel that the HIC program helps meet our mission of promoting independence and keeping seniors safe and in their homes. We have the agency capacity and we have the demand. We simply need the means by which to help us meet that mission. We thank you for your consideration.

--

Joseph H. Cooke, MPA
Division Director-Community Services
Macomb Community Action
21885 Dunham Road, Suite 10
Clinton Township, MI 48036
mca.macombgov.org
Phone: (586) 469-6277
Fax: (586) 469-5530

Office Hours:
Monday-Friday 7:30 am - 4:00 pm

"Persistent Action to Diminish Poverty and Promote Independence"

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EVIDENCE-BASED PROGRAMS PLANNED FOR FY 2022

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 beginning in FY 2020. 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	Anticipated No. of Participants	Funding Amount for Service
Example **Arthritis Exercise Program**	*Example: List each provider offering programs on a single line as shown below.* **1) Forest City Senior League Program** **2) Grove Township Senior Services** **3) Friendly Avenue Services**	*Example: Total participants for all providers* **80**	*Example: Funding total for all providers* **$14,000**
Diabetes PATH	AAA 1-B	48	$8,403
Chronic Pain PATH	AAA 1-B	48	$8,403
A Matter of Balance: Managing Concerns About Falls	AAA 1-B	224	$47,950
Powerful Tools for Caregivers	AAA 1-B	144	$28,272
Aging Mastery Program	AAA 1-B	80	$22,260
Aging Mastery Program for Caregivers	AAA 1-B	20	$5,355
Diabetes Prevention Program	National Kidney Foundation of Michigan	15	$3,584

PATH	National Kidney Foundation of Michigan	85	$22,714
A Matter of Balance: Managing Concerns About Falls (14)	National Kidney Foundation of Michigan	46	$11,779
Walk With Ease	National Kidney Foundation of Michigan	58	$5,569
Enhance Fitness	National Kidney Foundation of Michigan	210	$35,755
Tai Chi	National Kidney Foundation of Michigan	18	$6,183

Quality Outcome Measures Reporting Form
Submitted April 13, 2021

1. Participant Satisfaction Level
   Measure: The percentage of the total participant satisfaction survey question responses that are positive; negative; or neutral for:

Care Management	Positive 69%	Negative 9%	Neutral 22%
Case Coordination & Support	Positive 73 %	Negative 9%	Neutral 18%

2. Participant Quality of Life Satisfaction Level Before and After Receiving Services
   Measure: The percentage of the total participant satisfaction survey question responses about quality of life before and after receiving services that are positive; negative; or neutral (based on these two questions to be added to the area agency survey):

   A. My quality of life prior to receiving services was:

Care Management	Positive 25%	Negative 25%	Neutral 50%
Case Coordination & Support	Positive 23%	Negative 35%	Neutral 42%

   B. My quality of life after receiving services is:

Care Management	Positive 92%	Negative 8%	Neutral 0%
Case Coordination & Support	Positive 76%	Negative 3%	Neutral 21%

3. Prevalence of Social Isolation
   Measure: The percentage of all participants who are alone for long periods of time or always AND who also report feeling lonely -OR- Participants who are distressed by declining social activity, 90 days prior to assessment/reassessment (or since last assessment if less than 90 days) for:
   Care Management: 16% Case Coordination & Support: 28%

4. Prevalence of Emergency Room Visits and Hospital Stays
   Measure: The percentage of all participants who have had one or more hospitalizations or emergency room visits during the last 90 days before the assessment/reassessment (or since last assessment if less than 90 days) for:
   Care Management: 17% Case Coordination & Support: 21%

5. Prevalence of Inadequate Meals and Dehydration
   Measure: The percentage of all participants who in at least 4 of last 7 days prior to assessment/reassessment ate one or fewer meals for:
   Care Management: 2% Case Coordination & Support: 5%
   Measure: The percentage of all participants who in the last 3 days prior to assessment/reassessment had fluid intake less than 1,000 cc per day (less than four 8 oz. cups/day) for:
   Care Management: 2% Case Coordination & Support: 7%

EMERGENCY MANAGEMENT AND PREPAREDNESS

Minimum Elements for Area Agencies on Aging

FY 2022 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 2022 will address the element.

Area Agency on Aging 1B
A. General Emergency Preparedness Minimum Elements (required by the Older American's Act).
1. Anticipated expectations during a State or locally declared emergency/disaster. Include having a staff person (the area agency director or their designee) available for communication with AASA staff to provide real time information about service continuity (status of aging network service provider's ability to provide services).
The current Emergency Preparedness Plan for the Area Agency on Aging 1-B (AAA 1-B) has one primary designee, Director of Clinical Operations, AASA, as the organization contact for communications with AASA staff on current status of emergency situations.
2. Being prepared to identify and report on unmet needs of older individuals.
Unmet needs are currently collected by the AAA 1-B Resource Center. A report can be generated that identifies unmet needs of older adults that cannot be met by current programs and services available through the agency and community partners.
3. Being able to provide information about the number and location of vulnerable older persons receiving services from the area agency residing in geographic area(s) affected by the emergency/disaster.
The AAA 1-B generates a quarterly report of all high-risk homebound individuals, sorted by county, who would need assistance through first responders and/or the AAA 1-B in the event of emergency situations.
4. Being able to contact such affected older persons to determine their well-being.
The AAA 1-B report above includes name, address, primary contact information of either the older adult or designated representative and indicates the service need level.
5. Anticipated minimum expectations during a State or locally organized preparedness drill include being available to establish communication between AASA staff and area agency staff and being able to provide information upon request to both state and local emergency operation centers regarding the number and location of vulnerable older individuals residing in geographic areas affected by the drill.
All individuals on the AAA 1-B emergency preparedness committee are provided with laptops and car chargers for laptop to ensure the ability to charge the computer if there is a power outage. All emergency preparedness committee members also receive an electronic copy of the high-risk individuals and are required to copy this list to a secure flash drive. The information can then be sent to the state or other first responders, if needed, through a secure email.

B. Nutrition providers shall work with the respective area agency to develop a written emergency plan. The emergency plan shall address, but not be limited to the following elements:
1. Uninterrupted delivery of meals to home-delivered meals participants, including, but not limited to use of families and friends, volunteers, shelf-stable meals and informal support systems.
Also included in the emergency plan are: -A backup plan for food preparation if usual kitchen facility is unavailable. -Agreements in place with volunteer organizations, individual volunteers, hospitals, LTC facilities, and/or other nutrition providers. -Communications system to alert congregate and home delivered meals participants of changes in meal site/delivery.
2. Provision of at least two, and preferably more, shelf-stable meals and instructions on how to use for home-delivered meal participants. Every effort should be made to assure that the emergency shelf-stable meals meet the nutrition guidelines. If it is not possible, shelf-stable meals will not be required to adhere to the guidelines.
All nutrition providers send out emergency meals packs with a minimum of six shelf-stable meals and instructions on how to use such meals. They are replenished as necessary. Emergency meals are distributed to each new participant and are replaced as used within a reasonable time period. MI Choice participants receive emergency meals at the same time.
3. Backup plan for food preparation if usual kitchen facility is unavailable.
Nutrition Providers have agreements with different agencies and organizations to assist with meal prep and delivery in the event a kitchen facility becomes unavailable. They also utilize satellite kitchens within their organization to relocate HDM or congregate programs should the kitchen become unavailable.
4. Agreements in place with volunteer agencies, individual volunteers, hospitals, long-term care facilities, other nutrition providers, or other agencies/groups that could be on standby to assist with food acquisition, meal preparation, and delivery.
Nutrition Providers utilize these agreements should an emergency arise if usual kitchen facility is unavailable.
5. Communications system to alert congregate and home-delivered meals participants of changes in meal site/delivery.
Nutrition Providers alert participants of changes in meal site/delivery via television, radio, social media, and the organization's website.
6. The plan shall cover all the sites and home-delivered meals participants for each nutrition provider, including sub-contractors of the AAA nutrition provider.
Nutrition Providers are required to submit policies and procedures to the Nutrition Services Program Manager for review and approval.
7. The plan shall be reviewed and approved by the respective area agency and submitted electronically to AASA for review.
The plan is reviewed and updated as needed, and then is submitted electronically to AASA for review.

Area Agency on Aging 1-B Executive Leadership

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Advisory Council

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Chief Executive Officer

Pamela Moffitt
Corporate Secretary and Executive Services Manager (p.2)

Kimberly Cope
Chief Compliance & Quality Officer (p.4)

- Regulatory Compliance
- Quality
- Accreditation
- Appeals
- HIPAA Officer
- HCBS Compliance

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Chief Financial Officer (p.3)

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- Accounting
- Pension
- 401K
- Audit

Jenny Jarvis
Chief Communications & Strategy Officer (p.7)

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- Marketing
- Strategic Plan
- MMAP
- Resource Center
- Research, Policy Development & Advocacy
- Ombudsman

Aimee Page
Chief Clinical Officer (p.10)

- MI Choice
- MI Health Link
- Community Living Program
- Veteran's Admin.
- Care Management
- Svc. Coordination
- Rapid Response Respite
- Discharge Follow Up and Readmission Prevention Pgm. For McLaren and Total Health Care
- Vendor & Contractor Mgmt.
- Mobility Mgt.
- Wellness Training
- Social Services
- Nutrition

Tony Zolin
Sr.Technology Manager (p.9)

- Technology & Analytics

Angela Rutterbush
Chief Human Resources Officer (p.5)

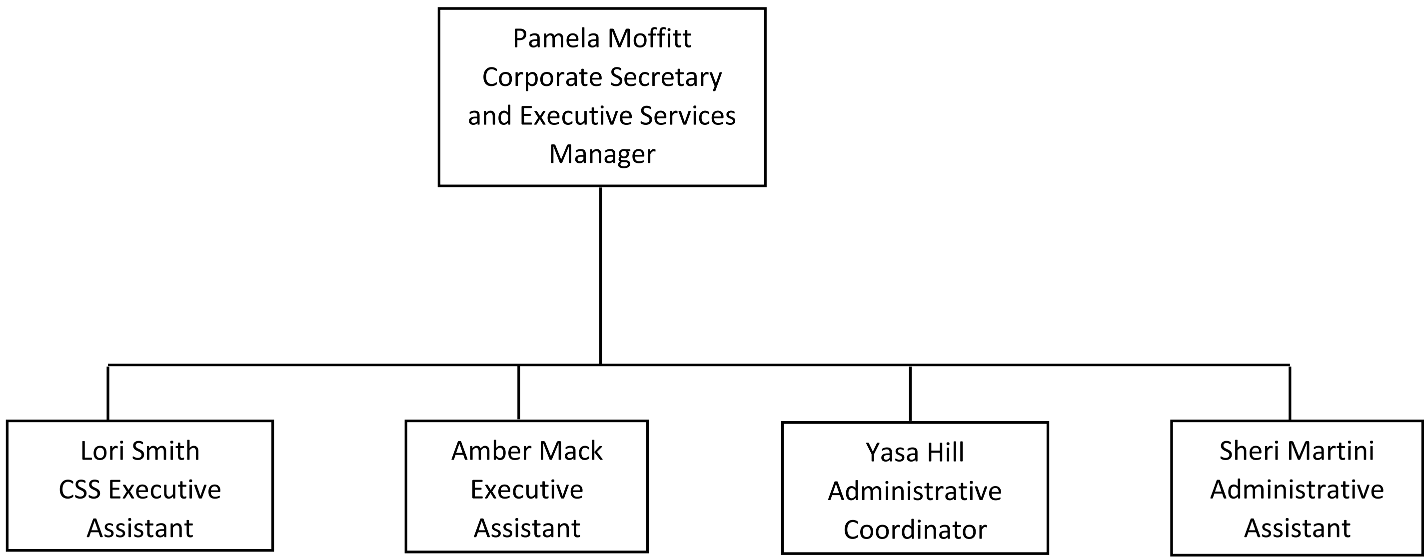
- Compensation
- Benefits
- Payroll
- Recruitment
- On-boarding
- Policy Maintenance
- Employee Relations
- Performance Management

Kathryn Brennan
Director of Philanthropy (p.6)

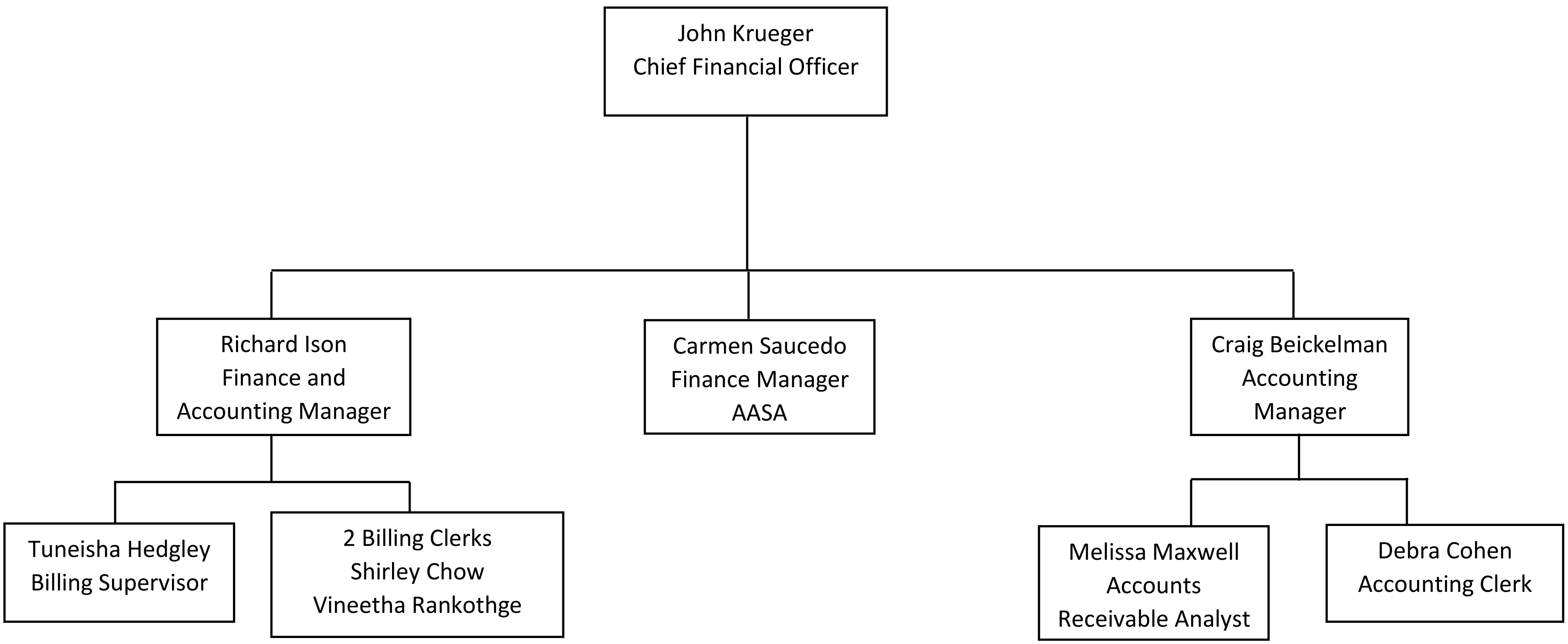
- Philanthropy
- Fundraising
- Events

** number in parenthesis indicates page number of department specific chart

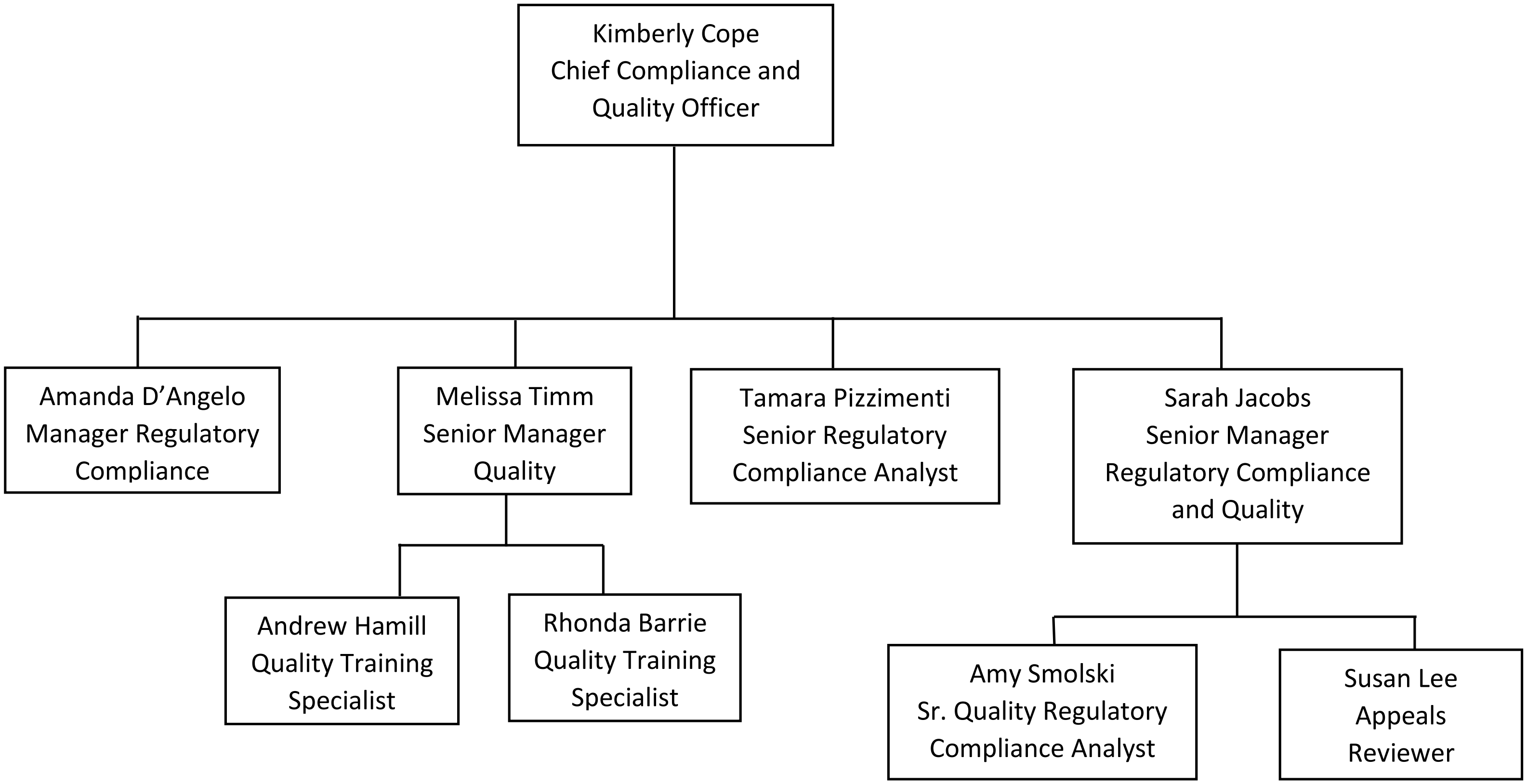
Area Agency on Aging 1-B Executive Services Department



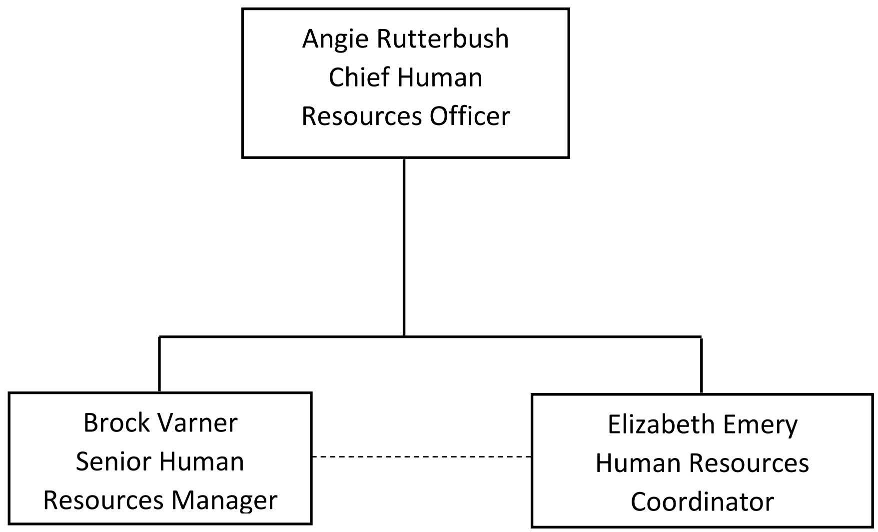
Area Agency on Aging 1-B Finance Department



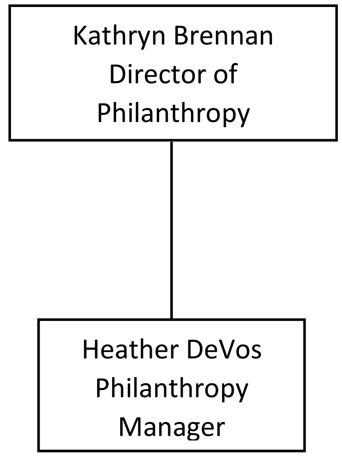
Area Agency on Aging 1-B Compliance and Quality Department



Area Agency on Aging 1-B   Human Resources Department

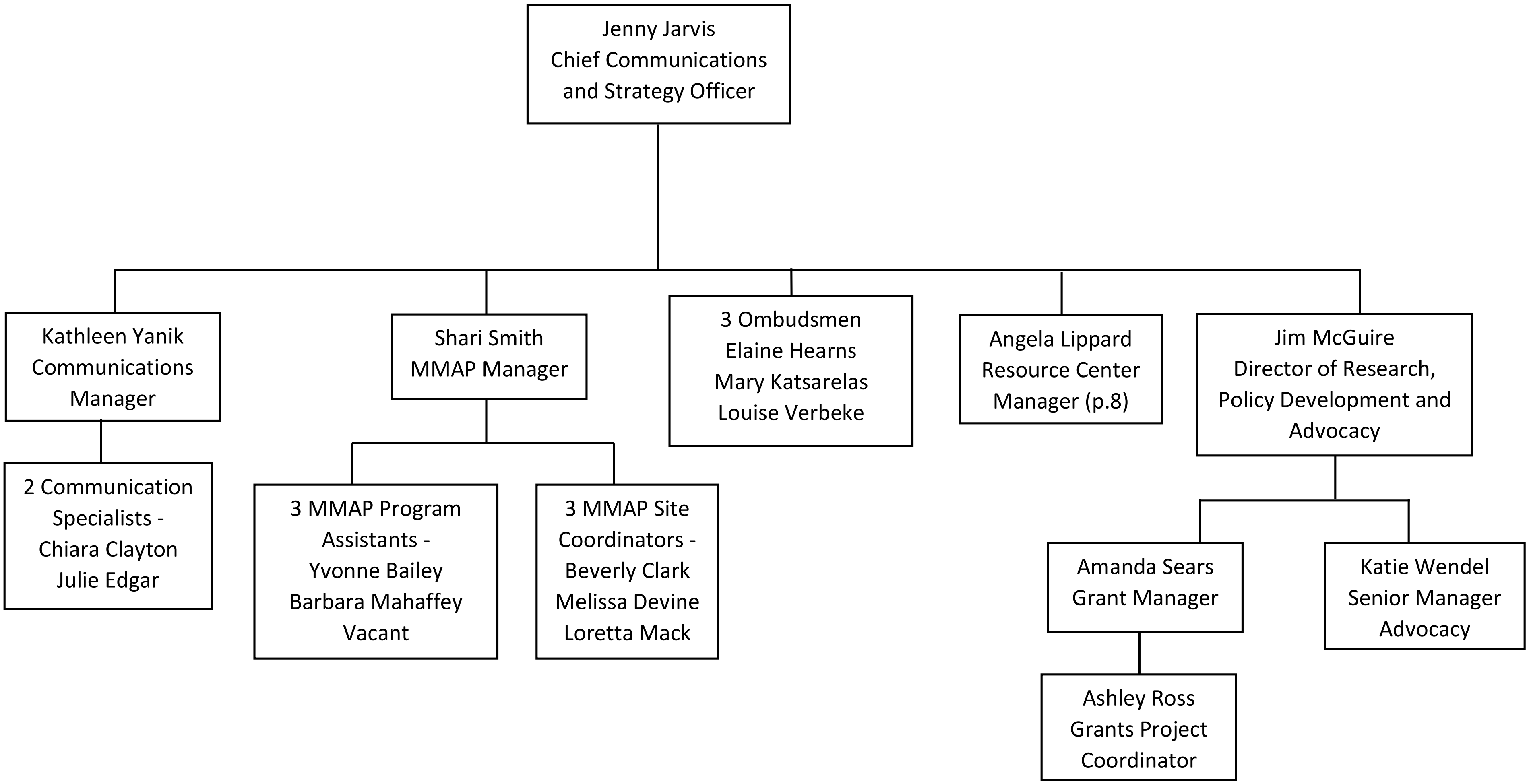


Area Agency on Aging 1-B Philanthropy Department



Area Agency on Aging 1-B
Advocacy • Action • Answers on Aging

Area Agency on Aging 1-B Communications and Strategy Departments

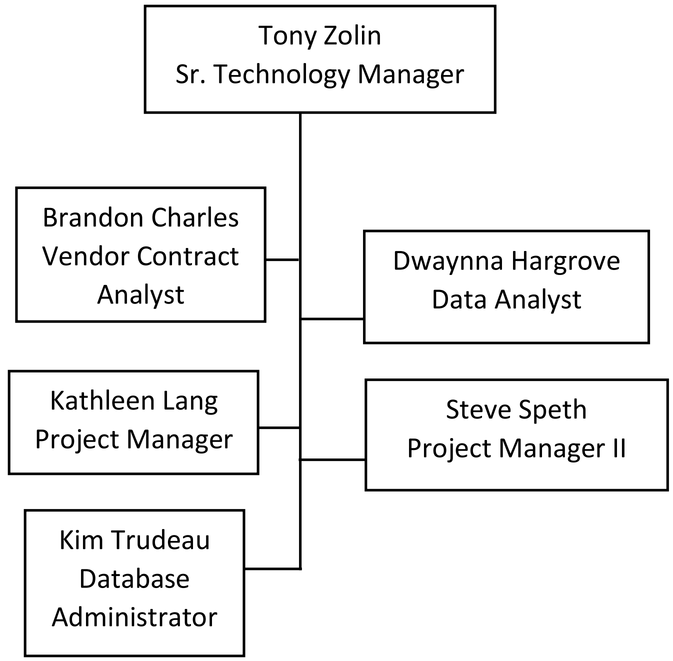


** number in parenthesis indicates page number of department specific chart Version 6/18/2021

Area Agency on Aging 1-B Resource Center

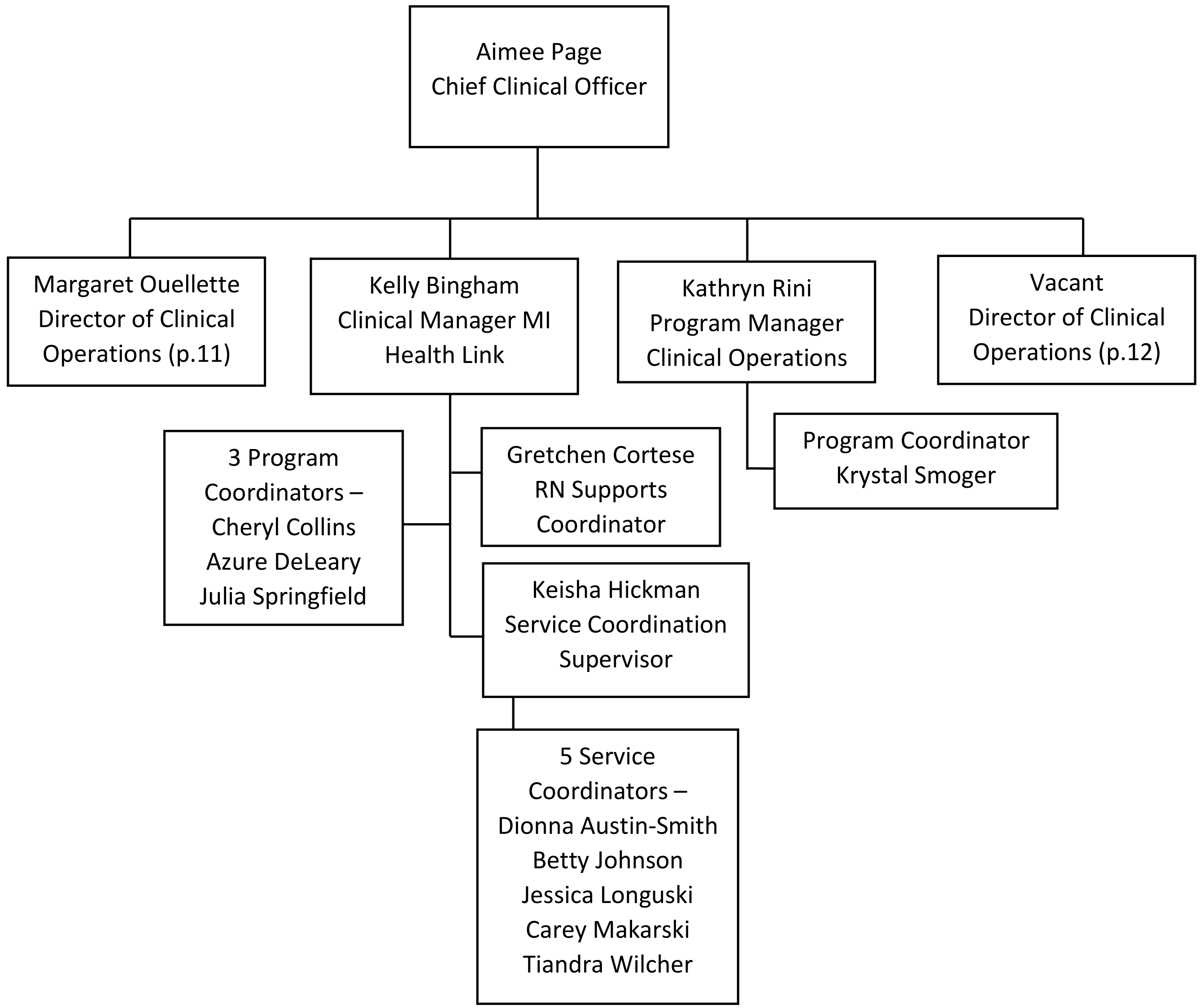
- Angela Lippard
  Resource Center Manager
  - Kelly Elswick
    Resource Database Specialist
  - Karen Frey
    Resource Center Team Lead
  - Lana LaFleur-Jackson
    Resource Center Assistant
  - Robin Hamilton-Morris
    Caregiver Resource Specialist
  - 6 Resource Specialists
    Vacant
    Chris Considine
    Kara Groom
    Katherine Hart
    Raylon Leaks-May
    Brieanna Schofield

Area Agency on Aging 1-B Technology, Analytics and AASA Departments



Area Agency on Aging 1-B
Advocacy • Action • Answers on Aging

Area Agency on Aging 1-B Clinical Department



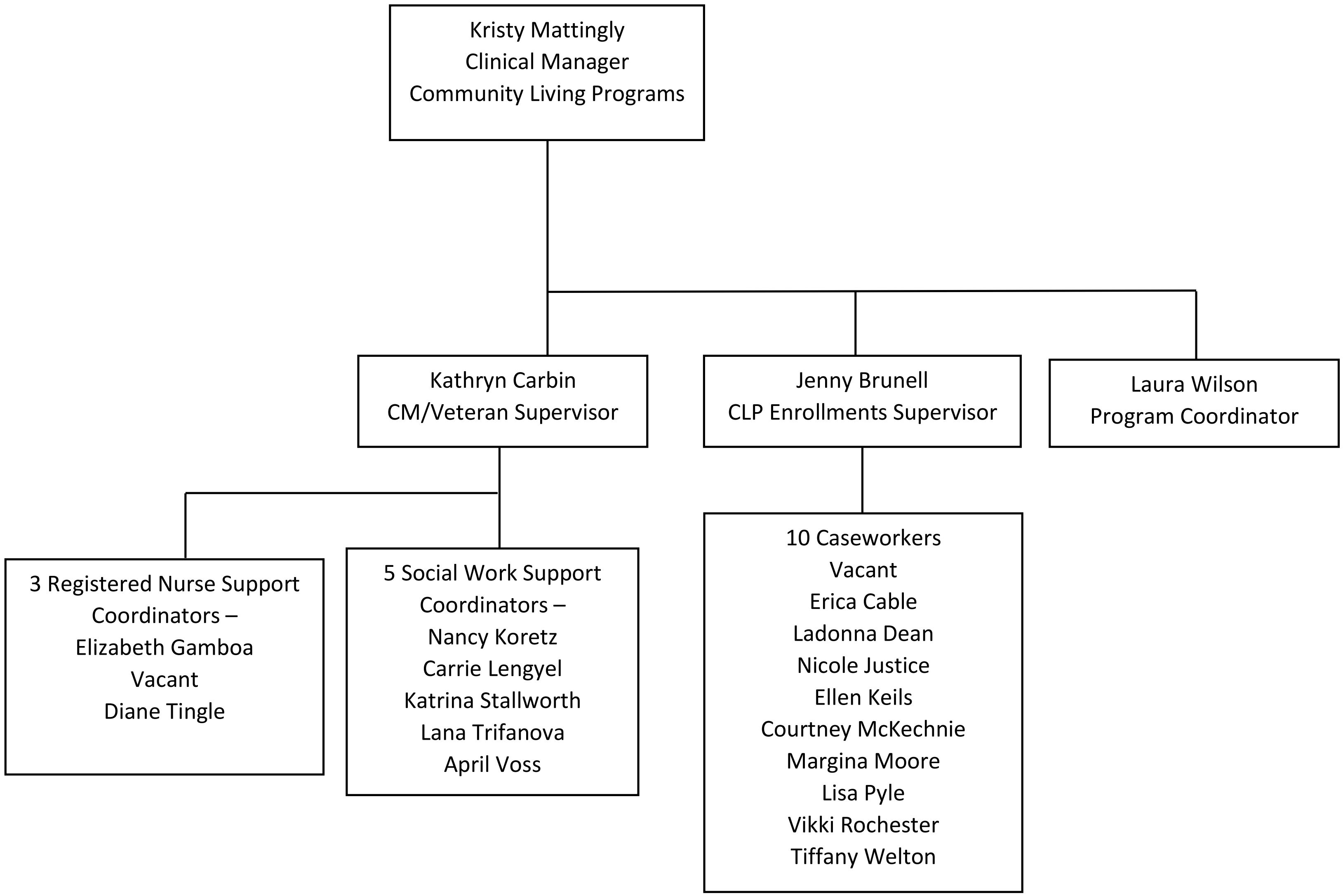
Area Agency on Aging 1-B Clinical Department

- Margaret Ouellette, Director of Clinical Operations
  - Kristy Mattingly, Clinical Manager Community Living Programs (p.13)
  - Valarie Pierson, Network Manager
    - Carrie Sherwood, Vendor Coordinator
    - Nicole Terrell, Credentialing Coordinator
  - AASA Program Managers
    - Andrea Lang, Program Manager Caregiver Services
    - Angela Patten, Program Manager Nutrition Services
    - Kristin Wilson, Manager of Wellness & Social Services
    - Jeannine Roach, Manager of Health Promotion
      - 23 Part-Time Trainers
  - LaVonna Howard, Manager of Mobility Services
    - Roberta Habowski, Mobility Project Advisor
    - Debra Price-Ryan, Transportation Project Coordinator
    - 3 Mobility Specialist: Jessica Davey, Katherine Giampino, Vacant

** number in parenthesis indicates page number of department specific chart

- Vacant
  Director of Clinical Operations
  - Chelsea DeNio
    Clinical Manager
    MI Choice Clinical Operations (p.14)
  - Robert Amos
    Clinical Trainer
  - Susan Miller
    Clinical Manager
    Enrollment (p.15)

Area Agency on Aging 1-B Clinical Department



Area Agency on Aging 1-B Clinical Department

- Chelsea DeNio
  Clinical Manager
  MI Choice Clinical Operations
  - Catherine Bugeja-Jackson
    Supervisor MI Choice
    - 3 RN Support Coordinators-
      Lisa Johnson
      Filomena Sexton
      Brandi Yousif
    - 9 Social Work Support Coordinators –
      Vacant
      Brittany Banks
      Cortez Brown
      Annmarie Carufel
      Carrie Eriksen
      Kara Fiedler
      Adriana Hernandez
      Sarah Rinna
      Maria Theresa Sabornido
  - Kristin Flynn
    Supervisor MI Choice
    - 4 RN Support Coordinators-
      Kelley Copp
      Sherrie Maxwell
      Tameka Nolton
      Judith Pittenger
    - 7 Social Work Support Coordinators –
      TyAnn Elenich
      Lucy Fichter
      Breann Fielder
      Cassidy Groshek
      Danielle Soderman
      Nicole Sportsman
      Tanya Trometer
  - Andrea Sargente
    Supervisor MI Choice
    - 3 RN Support Coordinators-
      Neva Cafarillia
      Nicole Toole
      Vacant
    - 11 Social Work Support Coordinators –
      Paula Aiello-Grundy
      Lisa Ball
      Chanel Beckford
      Jennifer Dawson
      Vacant
      Taylor Clark
      Laura Medema
      Keegan Pabst
      Saima Rashid
      Sarah Riesterer
      Allyson Shaeff

Area Agency on Aging 1-B Clinical Department

- Susan Miller
  Clinical Manager
  Enrollment
  - Deborah Nelson
    Supervisor of Enrollment
    - 5 RN Support Coordinators-
      Janet Belsky
      Chase Gibson
      Elissa Ladzinski
      Mary Beth Platt
      Nicole Washington
    - 5 Social Work Support Coordinators –
      Amy Frawley
      Mallory Montcastle
      Samantha Oulch
      Nicole Smith
      Kevin Valenti
  - Krystn Hartner
    Intake & Waitlist Supervisor
    - 2 MI Choice Schedulers-
      Vacant
      Kim Smart
    - Chevon Sherman
      Senior Eligibility Specialist
    - 2 Eligibility Specialists –
      Shayla Fenn
      Alaina Kastl
    - 4 Clinical Screeners –
      Jessica Mihaij
      Devon Brookover
      Mary Sexton
      Katherine Taylor
    - 4 Program Coordinators -
      Alayna Fiore
      Hannah Godfrey
      Maebrina Gray
      Michelle Keyser-Speth

FY 2022 AREA PLAN GRANT BUDGET

Rev. 3/2/21

Agency: Area Agency on Aging 1-B | Budget Period: 10/01/21 to 09/30/22

PSA: 1-B | Date: 05/27/21 | Rev. No.: 0 | Page 1of 3

SERVICES SUMMARY

FUND SOURCE	SUPPORTIVE SERVICES	NUTRITION SERVICES	TOTAL
1. Federal Title III-B Services	2,727,915		2,727,915
2. Fed. Title III-C1 (Congregate)		3,599,095	3,599,095
3. State Congregate Nutrition		62,518	62,518
4. Federal Title III-C2 (HDM)		1,925,330	1,925,330
5. State Home Delivered Meals		3,118,350	3,118,350
8. Fed. Title III-D (Prev. Health)	205,445		205,445
9. Federal Title III-E (NFCSP)	1,297,450		1,297,450
10. Federal Title VII-A	18,728		18,728
10. Federal Title VII-EAP	42,555		42,555
11. State Access	186,610		186,610
12. State In-Home	3,327,050		3,327,050
13. State Alternative Care	733,492		733,492
14. State Care Management	863,653		863,653
15. St. ANS	291,000		291,000
16. St. N ursing Home Ombs (NHO)	73,035		73,035
17. Local Match			
a. Cash	500,000	-	500,000
b. In-Kind	982,700	940,900	1,923,600
18. State Respite Care (Escheat)	289,228		289,228
19. MATF	780,452		780,452
19. St. CG Support	96,318		96,318
20. TCM/Medicaid & MSO	27,308		27,308
21. NSIP		702,608	702,608
22. Program Income	200,000	-	200,000
TOTAL:	12,642,939	10,348,801	22,991,740

ADMINISTRATION

Revenues		Local Cash	Local In-Kind	Total
Federal Administration	1,083,915	190,000	-	1,273,915
State Administration	187,331			187,331
MATF Administration	77,200	-	-	77,200
St. CG Support Administration	9,500	-	-	9,500
Other Admin				-
Total AIP Admin:	1,357,946	190,000	-	1,547,946

Expenditures

	FTEs	
1. Salaries/Wages	29.50	1,095,000
2. Fringe Benefits		248,000
3. Office Operations		204,946
Total:		1,547,946

Cash Match Detail		In-Kind Match Detail	
Source	Amount	Source	Amount
County Support	190,000		
Total:	190,000	**Total:**	-

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.

John Krueger	Chief Financial Officer	05/27/21
Signature	Title	Date

FY 2022 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL

Agency: Area Agency on Aging 1-B | Budget Period: 10/01/21 to 09/30/22 | Rev. 3/2/21

PSA: 1-B | Date: 05/27/21 | Rev. No.: 0 | page 2 of 3

*Operating Standards For AAA's

Op Std	SERVICE CATEGORY	Title III-B	Title III-D	Title III - E	Title VII/EAP	Title VII A 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	174,078		10,000			10,000			10,000		10,000							21,500	235,578
A-2	Case Coord/supp	65,276		427,348			166,610			853,653		281,000						149,995	179,400	2,123,282
A-3	Disaster Advocacy & Outreach Program																		-	-
A-4	Information & Assis	359,000		359,000															71,800	789,800
A-5	Outreach	451,515		257,450			10,000												71,900	790,865
A-6	Transportation	9,100		-										10,000					1,000	20,100
A-7	Options Counseling	47,200		-															4,800	52,000
B	**In-Home**																			
B-1	Chore	400,000															50,000	20,000	40,000	510,000
B-2	Home Care Assis																		-	-
B-3	Home Injury Cntrl	132,500		-														10,200	13,300	156,000
B-4	Homemaking	3,000						1,792,050	310,492								50,000	150,000	210,600	2,516,142
B-6	Home Health Aide																		-	-
B-7	Medication Mgt	2,400						18,000										790	2,100	23,290
B-8	Personal Care	150,000						800,000									50,000	59,075	95,000	1,154,075
B-9	Assistive Device&Tech	70,900						150,000										15,018	22,100	258,018
B-10	Respite Care	1,000		178,652				567,000	324,848				189,228	252,000	46,000		50,000	49,942	111,800	1,770,470
B-11	Friendly Reassure																		-	-
C-10	Legal Assistance	253,000		-															25,300	278,300
C	**Community Services**																			
C-1	Adult Day Services			-					98,152				-	177,452	-			14,915	9,900	300,419
C-2	Dementia ADC	67,646		-									100,000	341,000	50,318			5,065	11,800	575,829
C-6	Disease Prevent/Health Promtion		205,445	-														18,000	20,600	244,045
C-7	Health Screening																		-	-
C-8	Assist to Hearing Impaired & Deaf Cmty	47,000																	4,700	51,700
C-9	Home Repair																		-	-
C-11	LTC Ombudsman	30,000				18,728					73,035					27,308			13,100	162,171
C-12	Sr Ctr Operations																		-	-
C-13	Sr Ctr Staffing	-																	-	-
C-14	Vision Services																		-	-
C-15	Prevnt of Elder Abuse,Neglect,Exploitation	40,000			42,555														4,000	86,555
C-16	Counseling Services	-		-															-	-
C-17	Creat.Conf.CG® CCC	-	-	-															-	-
C-18	Caregiver Supplmt Services	-		-															-	-
C-19	Kinship Support Services	3,000		65,000														4,000	6,800	78,800
C-20	Caregiver E,S,T	105,000																3,000	10,500	118,500
*C-8	Program Develop	306,300																	30,700	337,000
	Region Specific																			
	a. Gap Filling	10,000																		10,000
	b.																			-
	c.																			-
	d.																			-
	7. CLP/ADRC Services																			-
Sp Co	8. MATF Adm													77,200						77,200
Sp Co	9. St CG Sup Adm														9,500					9,500
	SUPPRT SERV TOTAL	2,727,915	205,445	1,297,450	42,555	18,728	186,610	3,327,050	733,492	863,653	73,035	291,000	289,228	857,652	105,818	27,308	200,000	500,000	982,700	12,729,639

FY 2022 NUTRITION / OMBUDSMAN / RESPITE / KINSHIP - PROGRAM BUDGET DETAIL

Rev. 3/2/21

Agency: Area Agency on Aging 1-B   Budget Period: 10/01/21 to 9/30/22
PSA: 1-B   Date: 05/27/21   Rev. Number 0

FY 2022 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	3,584,095		62,518		70,000			371,700	4,088,313
B-5	Home Delivered Meals		1,925,330		3,118,350	632,608			567,700	6,243,988
C-4	Nutrition Counseling									-
C-5	Nutrition Education	15,000							1,500	16,500
	AAA RD/Nutritionist*									-
	Nutrition Services Total	3,599,095	1,925,330	62,518	3,118,350	702,608	-	-	940,900	10,348,801

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

FY 2022 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	30,000	18,728	-	73,035	27,308	-	-	13,100	162,171
C-15	Elder Abuse Prevention	40,000		42,555			-	-	4,000	86,555
	Region Specific	-	-		-		-	-	-	-
	LTC Ombudsman Ser Total	70,000	18,728	42,555	73,035	27,308	-	-	17,100	248,726

FY 2022 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 2022 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	3,000	65,000				-	4,000	6,800	78,800
C-20	Caregiver E,S,T	-	-				-	-	-	-
		-	-				-	-	-	-
	Kinship Services Total	3,000	65,000				-	4,000	6,800	78,800

Planned Services Summary Page for FY 2022			PSA:	1-B	
Service	Budgeted Funds	Percent of the Total	Method of Provision		
			Purchased	Contract	Direct
ACCESS SERVICES					
Care Management	$ 235,578	1.02%			X
Case Coordination & Support	$ 2,123,282	9.20%			X
Disaster Advocacy & Outreach Program	$ -	0.00%			
Information & Assistance	$ 789,800	3.42%			X
Outreach	$ 790,865	3.43%		X	X
Transportation	$ 20,100	0.09%	X		
Option Counseling	$ 52,000	0.23%			X
IN-HOME SERVICES					
Chore	$ 510,000	2.21%		X	
Home Care Assistance	$ -	0.00%			
Home Injury Control	$ 156,000	0.68%		X	
Homemaking	$ 2,516,142	10.90%		X	
Home Delivered Meals	$ 6,243,988	27.06%		X	
Home Health Aide	$ -	0.00%			
Medication Management	$ 23,290	0.10%	x		
Personal Care	$ 1,154,075	5.00%	x		
Personal Emergency Response System	$ 258,018	1.12%	x		
Respite Care	$ 1,770,470	7.67%	x		
Friendly Reassurance	$ -	0.00%			
COMMUNITY SERVICES					
Adult Day Services	$ 300,419	1.30%	x	x	
Dementia Adult Day Care	$ 575,829	2.50%	x	x	
Congregate Meals	$ 4,088,313	17.71%		x	
Nutrition Counseling	$ -	0.00%			
Nutrition Education	$ 16,500	0.07%			x
Disease Prevention/Health Promotion	$ 244,045	1.06%		x	x
Health Screening	$ -	0.00%			
Assistance to the Hearing Impaired & Deaf	$ 51,700	0.22%		x	
Home Repair	$ -	0.00%			
Legal Assistance	$ 278,300	1.21%		x	
Long Term Care Ombudsman/Advocacy	$ 162,171	0.70%			x
Senior Center Operations	$ -	0.00%			
Senior Center Staffing	$ -	0.00%			
Vision Services	$ -	0.00%			
Programs for Prevention of Elder Abuse,	$ 86,555	0.38%		x	
Counseling Services	$ -	0.00%			
Creating Confident Caregivers® (CCC)	$ -	0.00%			
Caregiver Supplemental Services	$ -	0.00%			
Kinship Support Services	$ 78,800	0.34%		x	
Caregiver Education, Support, & Training	$ 118,500	0.51%			x
AAA RD/Nutritionist	$ -	0.00%			
PROGRAM DEVELOPMENT	$ 337,000	1.46%			X
REGION-SPECIFIC					
a. Gap Filling	$ 10,000	0.04%	X		
b.	$ -	0.00%			
c.	$ -	0.00%			
d.	$ -	0.00%			
CLP/ADRC SERVICES	$ -	0.00%			
SUBTOTAL SERVICES	**$ 22,991,740**				
MATF & ST CG ADMINSTRATION	$ 86,700	0.38%			
TOTAL PERCENT		100.00%	18.83%	60.73%	20.44%
TOTAL FUNDING	**$ 23,078,440**		$4,343,602	$14,017,000	$4,717,838

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 2022 **BUDGET REVIEW SPREADSHEET** Rev. 3/2/21

Agency:	Area Agency on A	1B	
Date of SGA:		**SGA No.**	
Date of Budget:	05/27/21	**Revision No.**	0

Fiscal Year:	**FY 2022**
Date Reviewed by AASA:	
Initials of Field Rep Approving:	

SGA CATEGORY	SGA AWARD	C/O AMOUNT	TOTAL
Title III Administration	$ 1,083,915		$ 1,083,915
State Administration	$ 187,331		$ 187,331
Title III-B Services	$ 2,727,915		$ 2,727,915
Title III-C-1 Services	$ 3,599,095		$ 3,599,095
Title III-C-2 Services	$ 1,925,330		$ 1,925,330
Federal Title III-D (Prev. Health)	$ 205,445		$ 205,445
Title III-E Services (NFCSP)	$ 1,297,450		$ 1,297,450
Title VII/A Services (LTC Ombuds)	$ 18,728		$ 18,728
Title VII/EAP Services	$ 42,555		$ 42,555
St. Access	$ 186,610		$ 186,610
St. In Home	$ 3,327,050		$ 3,327,050
St. Congregate Meals	$ 62,518		$ 62,518
St. Home Delivered Meals	$ 3,118,350		$ 3,118,350
St. Alternative Care	$ 733,492		$ 733,492
St. Aging Network Srv. (St. ANS)	$ 291,000		$ 291,000
St. Respite Care (Escheats)	$ 289,228		$ 289,228
Merit Award Trust Fund (MATF)	$ 857,652		$ 857,652
St. Caregiver Support (St. CG Sup.)	$ 105,818		$ 105,818
St. Nursing Home Ombuds (NHO)	$ 73,035		$ 73,035
MSO Fund-LTC Ombudsman	$ 27,308		$ 27,308
St. Care Mgt.	$ 863,653		$ 863,653
NSIP	$ 702,608		$ 702,608
			$ -
SGA TOTALS:	$ 21,726,086	$ -	$ 21,726,086

AAA COMMENTS

AASA COMMENTS

ADMINISTRATION	BUDGET	SGA	DIFFERENCE
Federal Administration	$ 1,083,915	$ 1,083,915	$ -
State Administration	$ 187,331	$ 187,331	$ -
Sub-Total:	$ 1,271,246	$ 1,271,246	$ -
MATF	$ 77,200		
ST CG Supp	$ 9,500		
Local Administrative Match			
Local Cash Match	$ 190,000		
Local In-Kind Match	$ -		
Sub-Total:	$ 190,000		
Other Admin	$ -	**AIP TOT ADMIN**	**DIFFERENCE**
Total Administration:	$ 1,547,946	$ 1,547,946	$ -
SERVICES:	**BUDGET**	**SGA**	**% BUDGETED**
Federal Title III-B Services	$ 2,727,915	$ 2,727,915	100.0000%
Fed. Title III C-1 (Congregate)	$ 3,599,095	$ 3,599,095	100.0000%
State Congregate Nutrition	$ 62,518	$ 62,518	100.0000%
Federal C-2 (HDM)	$ 1,925,330	$ 1,925,330	100.0000%
State Home Delivered Meals	$ 3,118,350	$ 3,118,350	100.0000%
Federal Title III-D (Prev. Health)	$ 205,445	$ 205,445	100.0000%
Federal Title III-E (NFCSP)	$ 1,297,450	$ 1,297,450	100.0000%
St. Access	$ 186,610	$ 186,610	100.0000%
St. In Home	$ 3,327,050	$ 3,327,050	100.0000%
St. Alternative Care	$ 733,492	$ 733,492	100.0000%
St. Care Mgt.	$ 863,653	$ 863,653	100.0000%
State Nursing Home Ombs (NHO)	$ 73,035	$ 73,035	100.0000%
St ANS	$ 291,000	$ 291,000	100.0000%
Sub-Total:	$ 18,410,943	$ 18,410,943	100.0000%
Local Service Match			
Local Cash Match	$ 500,000		
Local In-Kind Match	$ 1,923,600		
Sub-Total:	$ 2,423,600		
Title VII/A Services (LTC Ombuds)	$ 18,728	$ 18,728	100.0000%
Title VII/EAP Services	$ 42,555	$ 42,555	100.0000%
NSIP	$ 702,608	$ 702,608	100.0000%
St. Respite Care (Escheats)	$ 289,228	$ 289,228	100.0000%
MATF	$ 780,452	$ 780,452	100.0000%
St. CG Support	$ 96,318	$ 96,318	100.0000%
MSO Fund-LTC Ombudsman	$ 27,308	$ 27,308	100.0000%
TCM-Medicaid / CM	$ -		
Program Income	$ 200,000		
Total Services:	$ 22,991,740		
Grand Total: Ser.+ Admin.	$ 24,539,686		

Administrative Match Requirements	
Minimum federal administration match amount	$361,305
Administration match expended (State Adm. + Local Match)	$377,331
Is the federal administration matched at a minimum 25%?	Yes
Does federal administration budget equal SGA?	Yes
Does state administration budget equal SGA?	Yes
Merit Award Trust Admin. & St. Caregiver Support Admin must be expended at or below 9% of	
Total Merit Award Trust Fund & St. Caregiver Support Admin. Funds budgeted:	8%
Is Merit Award Trust Fund & St CG Support Admin. budgeted at 9% or less?	Yes
Amount of MATF Funds budgeted on Adult Day Care	$ 518,452
Is at least 50% of MATF budgeted on Adult Day Care services?	Yes
Title III-E Kinship Services Program Requirements	
Are kinship services budgeted at > 5% of the AAA's Title III-E funding?	Yes
[note: see TL #369 & TL#2007-141]	
For Agencies required to budget a minimum of $25,000 of Title III-E requirement met?	Yes
Title III-B Long Term Care Ombudsman Maintenance of Effort Requirements	
Amount required from Transmittal Letter #2020-431. (see cell L 42)	$27,100
Budgeted amount Title III-B for LTC Ombudsman.	$30,000
Is required maintenance of effort met?	Yes
Service Match Requirements	
Minimum service match amount required	$2,059,394
Service matched budgeted: (Local Cash + In-Kind)	$2,423,600
Is the service allotment matched at a minimum 10%?	Yes
Miscellaneous Budget Requirements / Constraints	
Amounts budgeted for OAA / AASA Priority Services:	
Access:	$1,106,169
In-Home:	$759,800
Legal:	$253,000
Total Budgeted for Priority Services:	$2,118,969
Are Access Services budgeted at minimum 10% of Original ACL Title III-B	Yes
Are In Home Services budgeted at minimum 10% of Original ACL Title III-B	Yes
Are Legal Services budgeted at minimum 6.5% of Original ACL Title III-B	Yes
(Actual % of Legal)	9.27%
Title III-B award w/o carryover or Transfers in current SGA	$2,727,915
Amount budgeted for Program Development:	$306,300
% of Title III-B Program Development (must be 20% or less):	11.0%
Is Program Development budgeted at 20% or less?	Yes
Title III-D allotment with carryover:	$205,445
Amount budgeted for EBDP Activities, per TL#2012-244:	$205,445
Is 100% of Title III-D budgeted on APPROVED EBDP?	Yes

PRIORITY SERVICE SECTION

Access Services	III-B Budget Amount	
a. Care Management	$174,078	
b. Case Coord/supp	$65,276	
c. Disaster Advocacy	$0	
d. Information & Assis	$359,000	
e. Outreach	$451,515	
f. Transportation	$9,100	
g. Options Counceling	$47,200	
		(AAA Regional Access Service)
Access Total:	$1,106,169	

In Home Services	III-B Budget Amount	
a. Chore	$400,000	
b. Home Care Assis	$0	
c. Home Injury Cntrl	$132,500	
d. Homemaking	$3,000	
e. Home Health Aide	$0	
f. Medication Mgt	$2,400	
g. Personal Care	$150,000	
h. Assistive Device&Tech	$70,900	
i. Respite Care	$1,000	
j. Friendly Reassure	$0	
		(AAA Regional In-Home Service)
		(AAA Regional In-Home Service)
In Home Services Total:	$759,800	

Kinship Services	III-E Budget Amount	
1. Caregiver Supplmt - Kinship Amount Only		
2. Kinship Support	$65,000	
3. Caregiver E,S,T - Kinship Amount Only	$0	
0	$0	(Other Title III-E Kinship Service)
		(Other Title III-E Kinship Service)
Kinship Services Total:	$65,000	

Title III-B Transfers reflected in SGA	Title III-B Award	(Use ONLY If SGA Reflects Transfers)
Title III-B award w/o carryover in SGA	$2,727,915	
a. Amt. Transferred into Title III-B		(Always Enter Positive Number)
b. Amt. Transferred out of Title III-B		(Always Enter Positive Number)
AoA Title III-B Award Total:	$2,727,915	

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

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #1

AAA: Area Agency on Aging 1-B

FISCAL YEAR: FY 2022

SERVICE: Care Management

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	118,522		23,077			14,252		**155,850**
Fringe Benefits	35,556		6,923			4,248		**46,728**
Travel	5,000					500		**5,500**
Training	5,000					500		**5,500**
Supplies	10,000					1,000		**11,000**
Occupancy						0		**0**
Communications	10,000					1,000		**11,000**
Equipment						0		**0**
Other:						0		**0**
Service Costs						0		**0**
Purchased Services (CM only)						0		**0**
								0
Totals	**184,078**	**0**	**30,000**	**0**	**0**	**21,500**	**0**	**235,578**
	0		0		0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #1 **FY 2022**

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		21,500		
Totals	**0**	**21,500**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #2

AAA: Area Agency on Aging 1-B **FISCAL YEAR:** FY 2022

SERVICE: Case Coordination & Support

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	355,095		977,125		149,995	133,233		**1,615,449**
Fringe Benefits	106,529		293,138			39,967		**439,633**
Travel	6,000		6,000			1,200		**13,200**
Training	5,000		5,000			1,000		**11,000**
Supplies	20,000		20,000			4,000		**44,000**
Occupancy								**0**
Communications								**0**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**492,624**	**0**	**1,301,263**	**0**	**149,995**	**179,400**	**0**	**2,123,282**
	0		0		0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

Explanation for Other Expenses:

SCHEDULE OF MATCH & OTHER RESOURCES #2 **FY 2022**

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	149,995			
Contractors		179,400		
Totals	**149,995**	**179,400**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #3

AAA: Area Agency on Aging 1-B **FISCAL YEAR:** FY 2022

SERVICE: Information & Assistance

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	530,769					53,077		**583,846**
Fringe Benefits	159,231					15,923		**175,154**
Travel	1,000					100		**1,100**
Training	10,000					1,000		**11,000**
Supplies	2,000					200		**2,200**
Occupancy								**0**
Communications	15,000					1,500		**16,500**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**718,000**	**0**	**0**	**0**	**0**	**71,800**	**0**	**789,800**
	0				0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #3 FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		71,800		
Totals	**0**	**71,800**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #4

AAA: Area Agency on Aging 1-B

FISCAL YEAR: FY 2022

SERVICE: Outreach

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	496,127					49,613		**545,740**
Fringe Benefits	148,838					14,884		**163,722**
Travel	5,000					500		**5,500**
Training	10,000					1,000		**11,000**
Supplies	15,000					1,500		**16,500**
Occupancy								**0**
Communications	5,000		10,000			1,500		**16,500**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**679,965**	**0**	**10,000**	**0**	**0**	**68,997**	**0**	**758,962**
	0		0		0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #4 FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		68,997		
Totals	**0**	**68,997**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #5

AAA: Area Agency on Aging 1-B

FISCAL YEAR: FY 2022

SERVICE: Nutrition Education

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	15,000					1,500		**16,500**
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	**15,000**	**0**	**0**	**0**	**0**	**1,500**	**0**	**16,500**
	0					0		$ -

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

Does the Direst Service Budget reflect any changes to the one approved as part of the agency's FY 2014 AIP? Yes __ No _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #5 FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		1,500		
Totals	**0**	**1,500**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #6

AAA: Area Agency on Aging 1-B **FISCAL YEAR:** FY 2022

SERVICE: Disease Prevention/Health Promotion

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	57,265				18,000	17,782		**93,047**
Fringe Benefits	17,180					1,718		**18,898**
Travel	1,000					100		**1,100**
Training	5,000					500		**5,500**
Supplies	5,000					500		**5,500**
Occupancy								**0**
Communications								**0**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**85,445**	**0**	**0**	**0**	**18,000**	**20,600**	**0**	**124,045**
	0				0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES #6 FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	18,000			
Contractors		20,600		
Totals	**18,000**	**20,600**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #7

AAA: Area Agency on Aging 1-B

FISCAL YEAR: FY 2022

SERVICE: Long Term Care Ombudsman/Advocacy

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	34,406		71,033			8,737		**114,176**
Fringe Benefits	10,322		21,310			3,163		**34,795**
Travel	2,000		4,000			600		**6,600**
Training								**0**
Supplies	2,000		4,000			600		**6,600**
Occupancy								**0**
Communications								**0**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**48,728**	**0**	**100,343**	**0**	**0**	**13,100**	**0**	**162,171**
	0		0		0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		13,100		
Totals	**0**	**13,100**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #8

AAA: Area Agency on Aging 1-B **FISCAL YEAR:** FY 2022

SERVICE: Caregiver Education, Support, & Training

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	78,462				3,000	7,846		**89,308**
Fringe Benefits	23,538					2,354		**25,892**
Travel								**0**
Training								**0**
Supplies	3,000					300		**3,300**
Occupancy								**0**
Communications								**0**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**105,000**	**0**	**0**	**0**	**3,000**	**10,500**	**0**	**118,500**
	0				0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	3,000			
Contractors		10,500		
Totals	**3,000**	**10,500**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #9

AAA: Area Agency on Aging 1-B **FISCAL YEAR:** FY 2022

SERVICE: PROGRAM DEVELOPMENT

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	214,077					21,478		**235,555**
Fringe Benefits	64,223					6,422		**70,645**
Travel	10,000					1,000		**11,000**
Training	10,000					1,000		**11,000**
Supplies	6,000					600		**6,600**
Occupancy								**0**
Communications	2,000					200		**2,200**
Equipment								**0**
Other:								**0**
Service Costs								**0**
Purchased Services (CM only)								**0**
								0
Totals	**306,300**	**0**	**0**	**0**	**0**	**30,700**	**0**	**337,000**
	0				0	0		$ -

SERVICE AREA:
(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 _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
County Support	0			
Contractors		30,700		
Totals	**0**	**30,700**	**0**	**0**
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

FY 2022 Annual Implementation Plan
Direct Service Budget Detail #10

AAA: Area Agency on Aging 1-B

FISCAL YEAR: FY 2022

SERVICE: Option Counseling

LINE ITEM	Federal OAA Title III Funds	Other Fed Funds (non-Title III)	State Funds	Program Income	Match Cash	Match In-Kind	Other Resources	Total Budgeted
Wages/Salaries	40,000							40,000
Fringe Benefits	12,000							12,000
Travel								0
Training								0
Supplies								0
Occupancy								0
Communications								0
Equipment								0
Other:								0
Service Costs								0
Purchased Services (CM only)								0
								0
Totals	**52,000**	**0**	**0**	**0**	**0**	**0**	**0**	**52,000**

$ -

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

Does the Direst Service Budget reflect any changes to the one approved as part of the agency's FY 2014 AIP? Yes __ No _X_
If yes, please describe:

SCHEDULE OF MATCH & OTHER RESOURCES FY 2022

SOURCE OF FUNDS	MATCH VALUE Cash	MATCH VALUE In-Kind	OTHER RESOURCES VALUE Cash	OTHER RESOURCES VALUE In-Kind
Totals	0	0	0	0
Difference	0	0	0	
	OK	OK	OK	

Explanation for Other Expenses:

AREA AGENCY ON AGING--OPERATING BUDGET

PSA: ________ Budget Period: 10/01/21 to: 09/30/22 Date of Budget: ________

Agency: Rev. No.: Page 1 of 2

	Operations		Program Services/Activities									
	Admin	Program Develop	AASA	MI Choice	MI Health Link	Veterans Administraton	Contract Services	MMAP	Mobility Management	Refugee Grant		TOTAL
REVENUES												
Federal Funds	1,083,915	300,000	13,399,994					308,000				15091909
State Funds	274,031		6,668,146	25,700,000						95,000		32737177
Local Cash	190,000		500,000									690000
Local In-Kind			1,923,600					594,000				2517600
Interest Income	65,131											65131
Fund Raising/Other	202,000		200,000		3,265,000	1,600,000	87,000		357,000			5711000
TOTAL	1815077	300000	22691740	25700000	3265000	1600000	87000	902000	357000	95000	0	56812817
EXPENDITURES												
Contractual Services			13,599,100	18,333,881	2,749,633	1,249,191				89201		36021006
Purchased Services			4,306,431	-				594,000				4900431
Wages and Salaries	2233562	300000	3083194	3897519	261267	112241	18954	212784	172457	7319	0	10299297
Fringe Benefits	713,131			715,737	60,778		2,852	30,035	32,514	928		1555975
Payroll Taxes				298,163	19,987		930	16,279	13,193	286		348838
Professional Services	155300		62440	144,000	1300		17000		59700			439740
Accounting & Audit Services	40000											40000
Legal Fees	210000		3100									213100
Occupancy	355600		2500									358100
Insurance	74000											74000
Office Equipment	873129		21620	35,000				1300	39000			970049
Equip Maintenance & Repair	20000							500				20500
Office Supplies	79050		97960	1,600	425	400		9814	6850	852		196951
Printing & Publication	17000		77750	1,300				850	3000			99900
Postage	27250		32700	1,000		100		500	500			62050
Telephone	297100							70				297170
Travel	58400		65590	65,000	1940	2500	2264	2488	2786			200968
Conferences	79548		51720	7,800	470			3050	2000			144588
Memberships	56750		8050									64800
Special Events	32000		16800					2700				51500
	48000											48000
	-3460785		1262785	1,799,000	229000	112000	6000	27000	25000			0
TOTAL	1909035	300000	4786209	6966119	575167	227241	48000	307370	357000	9385	0	15485526

AREA AGENCY ON AGING--WAGES AND SALARIES

PSA:
Agency:

Budget Period: 10/01/21 to: 09/30/22

Date of Budget:
Rev. No.:

		Operations		Program Services/Activities									
			Program	AASA	MI Choice	MI Health	Veterans	Contract	MMAP	Mobility	Refugee	0	
JOB CLASSIFICATION	FTEs	Admin	Develop	0	0	Link	Administrator	Services	0	Management	Grant	0	TOTAL
	29.5	2,233,562											2233562
	58.5			3,083,194									3083194
	2.6		300,000										300000
	78.3				3,897,519								3897519
	5.1					261,267							261267
	3.4						112,241						112241
	0.4							18,954					18954
	6.0								212,784				212784
	5.5									172,457			172457
	0.1										7,319		7319
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													0
TOTAL	189.10	2233562	300000	3083194	3897519	261267	112241	18954	212784	172457	7319	0	10299297

Health Department Points of Interest

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
🗋	POI document	6/23/2021	Cover Memo

ST. CLAIR COUNTY HEALTH DEPARTMENT PUBLIC HEALTH UPDATES

JUNE 2021

ST. CLAIR COUNTY HEALTH DEPARTMENT
Our Community. Our Environment.

Points of Interest…

- Since the beginning of the Coronavirus pandemic (March 2020), St. Clair County has had 18,493 known cases of COVID-19 among our residents. Of those individuals, we know of 425 residents that have died due to the virus or complications from the disease. Thankfully, current infections rates have recently declined with just under two new known infections a day over the last seven days. The reduction in infection rates is likely directly related to COVID-19 vaccinations. As of the last report from the State, 48.7% of our residents (12 & older) have received at least one dose of a COVID-19 vaccine. With new variants of the virus emerging, it is our hope that vaccination rates will continue to improve to protect our residents from the virus.

- To date, the COVID-19 Delta variant has been identified in 25 Michigan residents. The Delta variant was first identified in India and has been reported by the CDC to be significantly more infectious than the UK or Alpha variant which was the variant that likely drove the last surge in cases within the county. With around 50% of our St. Clair County population over the age of 12 unvaccinated, we are still at risk of another surge in COVID-19 cases. The more people that are vaccinated now, the better protected our community will be from the virus.

- School closures and virtual leaning during the Pandemic had a great impact on hearing and vision screening for school aged children as well as kindergarten roundup. Typically, the program provides kindergarten roundup for 15 schools; Technicians attended six. All schools received a flier from the St. Clair County Health Department (SCCHD) Hearing and Vision program indicating free screening availability at the health department in place of kindergarten roundup. Historically, technicians do not work during the summer months because schools are not in session. This summer, technicians will remain in the office so they can continue to provide screening and assist with COVID duties as needed.

- Community collaboration and partnerships emerged and gained strength out of the COVID response. SCCHD has partnered with Blue Meets Green to address economic impacts of COVID and improve COVID vaccine uptake. From this partnership, COVID vaccination clinics were held at over 18 local employers (ranging from municipalities to manufacturing) and a large media campaign was created to promote COVID vaccination. Another partnership, "The Better Together Diversity Initiative" dedicated time and efforts to hosting 20 COVID vaccination clinics committed to individuals with increased social vulnerability.

- The Environmental Health Division has begun beach monitoring. Utilizing grant funding, eight beaches (Chrysler, Conger-Lighthouse, Fort Gratiot County Park, Holland, Keewahdin, Lakeport State Park, Lakeside and Marine City) are being tested weekly for water quality. In addition to the standard method, two beaches (Chrysler, Holland) are also monitored using a rapid testing technology that allows for results within four hours. New this year is that these two beaches will be further evaluated with microbial source tracking to determine if the source of any fecal contamination is from gulls, geese or humans.