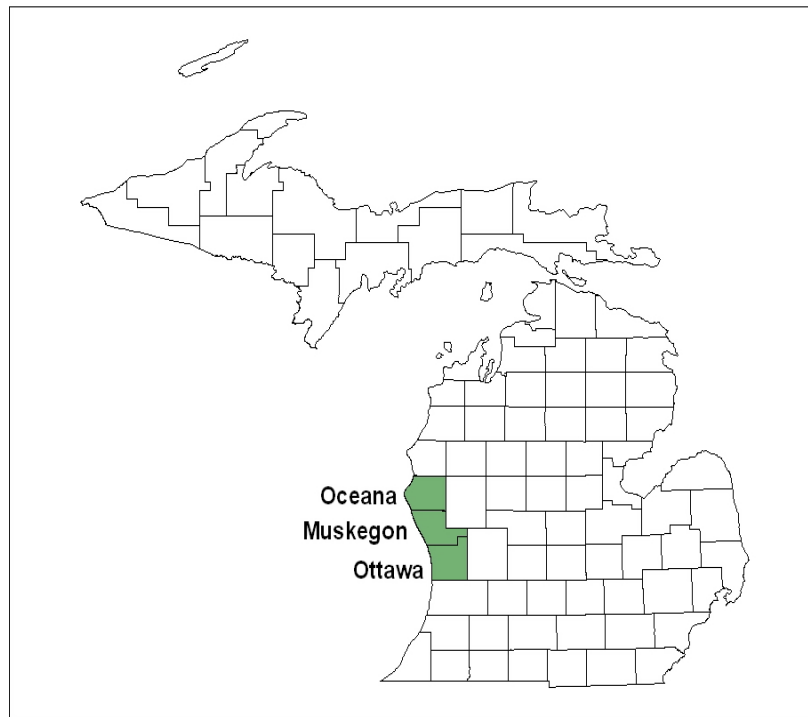


Draft

Multi Year Plan Fiscal Years 2027-2029
Annual Implementation Plan Fiscal Year 2027



Senior Resources of West Michigan
560 Seminole Rd. Muskegon, MI 49444
231-739-5959 or 1-800-442-0054
Pam Curtis, Chief Executive Officer
Amy Florea, Community Services Director

Draft

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Table of Contents

Executive Summary	3
Access Services	7
Direct Service Request	9
2027–2029 MYP Goals	18
Planned Service Array	25
Program Development Spending Plan	30
Advocacy Strategy	31
Planning and Service Area Aging Landscape	34
Greatest Economic and Greatest Social Need	42
Coordination to Serve Native American Elders and Family Caregivers	44

Executive Summary

Instructions

Please include in the Executive Summary a brief description of the following:

A. The history of your Area Agency on Aging (AAA) and Planning and Service Area (PSA) including mission statement, vision, and primary focus for the next three years

B. How the AAA used data from assessment of unmet needs and the perspectives of older adults, family caregivers, service providers, and the public to inform and develop the multi-year plan. (OAA 1321.65(b)(3), OMA 400.586(y))

C. The AAA's Strategic/Long-Term Plan

D. Awards and Accreditations received by the AAA

Please review demographic data for the PSA provided in the *Document Library* and confirm accuracy with the AAA's Regional Aging Representative for inclusion in the demographic data chart.

1. Provide a brief history of your AAA and PSA including the mission statement, vision, service population, and primary focus for the next three years.

Senior Resources of West Michigan (Senior Resources) serves Muskegon, Oceana, and Ottawa counties along the Lake Michigan shoreline. Within this public service area (PSA), the total population is 503,505, including 121,126 individuals age 60 and older, representing approximately 24% of the population.

The PSA includes a diverse mix of urban, suburban, and rural communities, encompassing areas with varying levels of resources as well as communities experiencing poverty and limited access to food and transportation. These geographic and socioeconomic factors contribute to disparities among older adults and underscore the importance of a coordinated system of services that prioritizes individuals with the greatest social and economic need, greatest physical need, and those at risk of institutionalization.

The vision of Senior Resources' Board of Directors, leadership, and workforce is lifelong dignity and independence for all. This vision aligns with the Older Americans Act (OAA) and is carried out through the agency's mission to develop and administer a comprehensive and coordinated system of services that supports older adults and their caregivers—particularly those most in need—to remain living safely and independently in their homes and communities.

As the designated Area Agency on Aging (AAA), Senior Resources serves as a visible and effective advocate for older adults. The agency advances OAA priorities by educating older adults, caregivers, service providers, and the public about available programs, individual rights, and emerging issues affecting aging populations. Senior Resources engages in advocacy at the local, state, and national levels and works collaboratively with partners to influence policies and practices that promote access to services, equity, and quality of life for older adults.

Senior Resources prioritizes the availability of home- and community-based services that support aging in place and delay or prevent unnecessary institutionalization. As the older adult population continues to grow, demand for in-home services and caregiver supports increases. In the context of static funding levels and rising service costs, the agency regularly reviews service delivery and prioritization criteria to ensure that limited resources are directed to older adults with the greatest need, consistent with OAA requirements.

Senior Resources of West Michigan

FY 2027

The Board of Directors, leadership, and workforce are committed to serving older adults most at risk within the public service area (PSA). To fulfill this commitment, Senior Resources contracts with and coordinates over 70 home- and community-based service providers across the three-county region. Priority services include personal care, community living supports, homemaking, respite care, home-delivered meals, congregate nutrition services, adult day care, and caregiver support services, all of which are core OAA-funded or OAA-aligned services.

Senior Resources collaborates with key community partners to strengthen the regional aging services network. These partners include Four Pointes Center for Successful Aging and the Oceana County Council on Aging, Evergreen Commons senior wellness center, and additional senior and wellness centers throughout the PSA. Through these collaborations, Senior Resources enhances outreach, information and assistance, referrals, and service coordination to improve access and outcomes for older adults and caregivers.

The agency's primary goal is to effectively implement the Older Americans Act through the development, administration, and oversight of a regional Area Plan. This includes coordinating services and contracting with qualified providers to ensure the delivery of high-quality, person-centered services for adults age 60 and older.

2. Describe how the AAA used data from the assessment of unmet needs and the perspectives of older adults, family caregivers, service providers, and the public to inform and develop the multi-year plan.

[See OAA §1321.65(b)(3); OMA 400.586; Operating Standard for AAAs C-2(4).]

To guide the development of the Multi-Year Area Plan, Senior Resources implemented a comprehensive and inclusive community engagement process. The agency hosted nine in-person public input sessions across the service area, along with one virtual session to ensure broader accessibility. In addition, an accessible Microsoft-based survey was widely distributed to service providers, adults aged 60 and older, caregivers, and members of the broader community, enabling participation from individuals who may not have been able to attend in person.

To strengthen this community-driven approach, Senior Resources incorporated multiple data sources to better understand regional needs and service gaps. These included demographic and population trends from U.S. Census Bureau, as well as service request and unmet needs data from Call 211, with a focus on individuals aged 60 and older across counties. The agency also reviewed recent Community Needs Assessments conducted in Muskegon, Oceana, and Ottawa counties to ensure local priorities were accurately reflected.

In total, more than 200 responses were collected and analyzed from a diverse group of stakeholders, including service providers, caregivers, older adults, workforce professionals, and community residents. Local input was compared with state-level data and priorities to identify common themes, highlight regional distinctions, and ensure alignment with statewide aging goals and initiatives.

Finally, the planning process was informed by a review of national trends and best practices related to aging, caregiving, and service delivery systems. This included consideration of emerging issues such as the growing demand for caregiver support, workforce challenges within aging services, and the increasing need for accessible, community-based supports that promote independence and quality of life for older adults. Together, these efforts ensure that the Multi-Year Area Plan is data-driven, community-informed, and responsive to the evolving needs of the region's aging population.

3. List all awards and accreditations received by the AAA.

In 2025, Senior Resources received a Healthy Aging – Aging Innovations Award from USAging for its *Behavioral Health at Home* program. This initiative was developed to address the significant barriers older

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

adults often face when accessing mental health services, particularly those who are home-limited, have mobility challenges, or lack access to transportation or technology. The program delivers behavioral health support directly in the home through a coordinated, person-centered model.

Senior Resources also maintains accreditation from the National Committee for Quality Assurance (NCQA) for our Care Management Services, demonstrating the agency’s adherence to rigorous national standards for quality, accountability, and person-centered care. This accreditation reflects Senior Resources’ commitment to continuous improvement, effective care coordination, and delivery of high-quality services that support older adults in remaining safe and independent in their homes and communities.

For the 4th consecutive year, Senior Resources was awarded Best and Brightest Companies to Work for – West Michigan, recognized for exceptional employment practices and organizational culture.

4. Does your AAA have a Strategic/Long-Term Plan? Yes No

Please describe your Strategic/Long-Term Plan and how it informed the development of the MYP.

Senior Resources uses a mission and vision driven strategic planning process to guide organizational priorities and ensure alignment across all programs and services. This process includes analyzing community needs and assets, conducting environmental scans, engaging in long-term visioning, and establishing clear goals and performance measures. The outcome is a rolling multi-year strategic plan that is regularly updated to reflect changing conditions, inform financial planning, and align departmental objectives and performance expectations. This integrated approach ensures the agency’s mission, values, and long-term vision remain central to all decisions and resource allocations.

The strategic plan also provides the foundational framework for the development of Senior Resources’ Area Plan. Because the strategic plan establishes the agency’s long-term vision, major initiatives, and annual performance goals, it ensures that the Area Plan is grounded in a clear understanding of community needs, environmental factors, and organizational priorities. Alignment between the strategic plan and Area Plan allows Senior Resources to set service goals, budget priorities, and program strategies that are consistent with our organizational direction and responsive to emerging trends seen throughout the region. Ongoing monitoring of strategic performance, engagement of the Board and leadership through a regular review cadence, and communication to stakeholders ensure that the Area Plan remains closely tied to the agency’s strategic goals and accurately reflects progress, challenges, and evolving needs within the community.

Demographic Data for PSA

Population	Census (most current data available)	AAA Population Served Last Fiscal Year (NAPIS)
Total Population 60+ (%)	22.99	2.71
Race/Ethnicity 60+ (%)		
a. Black/African American	3.72	8.08
b. Asian	0.95	0.39
c. White	91.76	78.37
d. Hispanic/Latino	3.17	0.58
e. Other	3.56	0.74

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Total 60+ Population in Rural areas (%)	31.35	30.80
Total 60+ Population at Poverty Level (%)	7.62	21.37
Total 85+ Population (%)	9.00	23.50
Total 60+ Non-English-Speaking Population (%)	4.12	0.35

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Access Services

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Management; Care Transition Coordination & Support; Case Coordination and Support; Disaster Advocacy and Outreach Programs; Information and Assistance; Options Counseling; Outreach (with specific attention to underserved populations); and Transportation. If the AAA is planning to provide any of these access services directly during FY 2027-2029 MYP cycle, complete this section.

Instructions

Select from the list of access services those services the AAA plans to provide directly, and provide the information requested.

Care Management

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2027
<u>Total of Federal Dollars</u>		<u>Total of State Dollars</u>	\$107,957.00

Geographic area to be served
Muskegon, Oceana, Ottawa Counties

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

GOAL:

To consistently provide high-quality Care Management (CM) services across the entire PSA.

ACTIVITIES:

1. CM clients will receive a comprehensive assessment and the desired level of assistance with coordination of services most appropriate to their needs and preferences. Enrollment continues on an ongoing basis.
2. Program quality will be monitored on an ongoing basis, as necessary, program improvements will be made.
3. Program level performance reviews shall be conducted annually.
4. Staff training will be identified through quality activities, and training will be provided, as needed. Staff will also be provided access to CEs as appropriate for their licensure.
5. Program staff shall receive in-service training at least twice each fiscal year that is specifically designed to increase their knowledge and understanding of the program and participants, and to improve their skills in completion of job tasks.

Case Coordination and Support

<u>Starting Date</u>	10/01/2026	<u>Ending Date</u>	09/30/2027
<u>Total of Federal Dollars</u>	\$116,185.00	<u>Total of State Dollars</u>	\$187,421.00

Geographic area to be served
Muskegon, Oceana, Ottawa Counties

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

GOAL:

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Deliver high-quality Case Coordination and Support (CCS) services to older adults throughout the PSA.

ACTIVITIES:

1. Clients who do not currently need a nursing facility level of service, but are at-risk of needing that level of care; will receive support to prevent or slow a further medical or functional decline.
2. Enrollment is open and ongoing.
3. Program quality will be monitored on an ongoing basis. As necessary, program improvements will be made. Staff training will be identified through quality assurance activities and trainings will be provided, as needed.
4. Program staff shall receive in-service training at least twice each fiscal year that is specifically designed to increase their knowledge and understanding of the program and participants, and to improve their skills in completion of job tasks.

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Direct Service Request

Because this is the beginning of a multi-year cycle, all requests to provide services directly must be included in the MYP for approval.

It is expected that in-home, community, nutrition, caregiver, and kinship caregiver services will be provided under contracts with community-based service providers, but when appropriate, AAAs can request to provide these services directly. Direct service provision requests must be approved by the Commission on Services to the Aging (CSA).

Direct service provision is defined as “providing a service directly to a senior, such as preparing meals, doing chore services, or working with seniors in an adult day setting.” Direct service provision by the AAA may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the AAA’s administrative functions; or C) a service can be provided by the AAA more economically than any available contractor, and with comparable quality.

Prior to adding requests for direct service provision, please have a conversation with the AAA's Regional Aging Representative to discuss ACLS Bureau and CSA criteria for approval to determine the best course of action.

Instructions

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for all Direct Service Request for FY 2027-2029. *If you think you may wish to provide a service directly at any time during the multi-year cycle, even if it's not in year one, please submit the request with your MYP.

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

Long Term Care Ombudsman

Total of Federal Dollars \$16,514.00 Total of State Dollars \$138,342.00

Geographic Area Served Muskegon, Oceana, Ottawa Counties

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

Ombudsman:

Goal

Ensure that residents of long-term care facilities receive quality care, have their rights protected, and are able to voice concerns without fear of retaliation.

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Objectives

- Advocate for the rights and well-being of residents in nursing homes, assisted living, and other long-term care settings
- Investigate and resolve complaints made by or on behalf of residents
- Promote person-centered care and informed decision-making
- Increase awareness of resident rights under laws such as the Older Americans Act
- Strengthen communication between residents, families, and care providers

Activities

- Complaint Investigation & Resolution - Receive, document, and investigate complaints related to care, safety, abuse, neglect, or rights violations, and work toward resolution
- Resident Advocacy - Represent resident interests in care planning and facility discussions while maintaining confidentiality
- Facility Visits - Conduct regular visits to nursing homes and other long-term care facilities to monitor conditions and build relationships with residents
- Education & Outreach - Educate residents, families, and facility staff about rights, services, and how to file complaints
- Systems Advocacy - Identify trends and systemic issues and advocate for policy or regulatory changes at the state level
- Data Collection & Reporting - Maintain accurate records of cases and outcomes to support state and federal reporting requirements

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.

For FY 2027–2029, and in compliance with ACLS Bureau requirements, Senior Resources conducted a formal marketing and recruitment process, including issuing a Request for Proposals, to identify qualified community agencies to deliver Ombudsman services throughout the region. This process did not result in any agencies expressing interest in providing the service.

Because Ombudsman services are required, Senior Resources is requesting authorization to provide the service directly. We have the organizational capacity to support the Ombudsman role by ensuring position

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

stability, necessary supplies and equipment, and ongoing supervision and support to effectively carry out program responsibilities.

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

Caregiver Case Management

Total of Federal Dollars \$20,000.00

Total of State Dollars

Geographic Area Served Muskegon, Oceana, Ottawa Counties

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

Goal

To enhance the capacity of caregivers to deliver high-quality, person-centered care while maintaining their own health and well-being.

Objectives

- Enhance understanding of caregiver needs by identifying and prioritizing the unique challenges, strengths, and support requirements of caregivers to inform appropriate interventions.
- Ensure individualized, responsive care planning. Provide care plans that reflect each caregiver's specific circumstances, preferences, and goals.
- Improve access to coordinated services and supports. Strengthen connections between caregivers, care recipients, and community resources to reduce gaps and duplication in services.
- Foster emotional, physical, and social well-being, reducing stress and preventing burnout among caregivers.

Activities

1. Conduct a caregiver assessment including:

- Intake and Initial Contact
 - Collect basic demographic information about the caregiver and care recipient.
 - Document the caregiver's relationship to the care recipient and the type of care provided .
- Needs and Strengths Evaluation
 - Assess the caregiver's knowledge, skills, and experience with caregiving tasks.
 - Identify physical, emotional, and social needs, including stress levels and risk of burnout.
 - Evaluate the care recipient's health status, functional abilities, and level of dependency.
- Service and Resource Identification
 - Determine gaps in services, supports, or training that the caregiver may require.
 - Explore eligibility for community-based programs, respite, financial assistance, and healthcare resources.

2. Caregiver Support

- Provide education on stress management, self-care strategies, and burnout prevention
- Connect caregivers to respite services and community-based resources

3. Resource Navigation

- Train caregivers to effectively access and coordinate supportive services , including healthcare, transportation, and nutrition programs

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

- Distribute educational materials, toolkits, and referral guides
- 4. Evaluation and Continuous Improvement
 - Collect participant feedback to inform program improvements
 - Track outcomes related to caregiver confidence, care quality, and participant satisfaction

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.
- (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.

Senior Resources, is seeking funding to provide caregiver case management directly, ensuring that caregivers receive personalized, timely, and coordinated support tailored to their specific needs. Delivering these services in-house allows us to conduct comprehensive assessments, develop individualized care plans, and connect caregivers to resources efficiently and effectively. Because we are already actively engaged with the care recipient through our existing programs such as support coordination and care management our connection with the caregiver occurs naturally, and we already gathering a detailed understanding of the care recipient’s/caregiver needs, preferences, and health status. This foundation enables us to offer targeted guidance and support to caregivers, ensuring that care plans are aligned, responsive, and practical. Providing services directly also allows us to maintain high standards of quality and consistency, closely monitor outcomes, and adjust care plans as circumstances evolve. It strengthens our ability to build trusting relationships with both caregivers and care recipients, offering guidance, advocacy, and problem-solving support that addresses immediate challenges while promoting long-term well-being. This hands-on approach is fully aligned with our mission to support caregivers and enhance care for older adults.

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

Caregiver Education

Total of Federal Dollars \$10,000.00

Total of State Dollars

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Geographic Area Served Muskegon, Oceana, Ottawa Counties

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

Goal

To equip caregivers with the knowledge, skills, and confidence needed to provide high-quality, person-centered care while supporting their own health and well-being.

Objectives

Enhance caregiver understanding of essential care practices, safety procedures, and condition-specific care (e.g., dementia, Alzheimer's).

Improve caregivers' communication, problem-solving, and interpersonal skills with care recipients, healthcare providers, and families.

Promote caregiver self-care and strategies to prevent stress and burnout.

Increase awareness and application of residents' rights, dignity, and person-centered care principles.

Enable caregivers to recognize changes in health or behavior and respond appropriately.

Activities

1. Support and Wellness Initiatives

Facilitate peer caregiver support groups and peer mentoring opportunities.

Offer education on stress management, self-care, and burnout prevention.

Connect caregivers to respite services and community resources.

2. Resource Navigation

Train caregivers to access local services such as healthcare, transportation, and meal programs.

Provide educational materials, toolkits, and referral guides.

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.

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

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

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.

Senior Resources requests funding approval to directly provide caregiver education services to address critical gaps in the local provider network, particularly in rural and underserved areas where access to supports are limited. By delivering services in-house, along with our provider network, we improve timeliness and reduce barriers to access, ensuring caregivers receive the assistance they need without delay. This approach allows us to maintain a high level of quality and consistency, aligning all services with best practices and person-centered care principles. Direct service delivery also strengthens our ability to coordinate care across programs, integrating caregiver supports with case management, options counseling services, etc. for a more seamless experience. In addition, it enhances our capacity to track outcomes, ensure accountability, and meet funding requirements. Providing services directly enables us to pilot innovative approaches and respond flexibly to emerging community needs. Most importantly, it allows Senior Resources to build strong, trusted relationships with caregivers and families, increasing engagement and improving overall outcomes.

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

Caregiver Options Counseling

Total of Federal Dollars \$15,000.00 Total of State Dollars

Geographic Area Served Muskegon, Oceana, Ottawa Counties

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

Goal

To empower caregivers to make informed decisions about long-term care options, resources, and supports that best meet the needs of both the care recipient and the caregiver.

Objectives

- Increase caregivers' knowledge of available community resources, services, and funding options.
- Support caregivers in identifying and evaluating care options that align with the care recipient's needs and preferences.
- Reduce caregiver stress by connecting them with appropriate supports and services.
- Enhance caregiver decision-making skills through personalized guidance and education.
- Promote timely access to programs that improve care quality, safety, and well-being for both caregivers and care recipients.

Activities

1. Individual Counseling Sessions

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Meet with caregivers one-on-one to assess needs, challenges, and goals.

Provide information on long-term care options, respite programs, home- and community-based services, and financial eligibility/assistance.

2. Resource Navigation and Referrals

Guide caregivers to local agencies, support programs, and specialized services.

3. Education and Decision Support

Offer guidance on service providers, care settings, and support networks.

Provide tools and resources to help caregivers weigh options, plan transitions, and set care priorities.

4. Follow-Up and Monitoring

Conduct follow-up contacts to ensure caregivers were able to access services and supports.

Update plans as needs change or new options become available.

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.

(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.

Senior Resources has been providing options counseling for over 15 years, providing callers with all options for care and long-term supports available in the region. This work naturally aligns with providing family and informal caregivers with the guidance and support they need to make informed decisions about long-term care and community services. Many caregivers face complex challenges and may not be aware of all the resources available to them. Through personalized counseling, we help caregivers navigate home and community-based services, respite programs, and financial or legal supports, empowering them to select options that best meet the needs, preferences, and safety of the care recipient. Connecting caregivers to the right services can reduce stress, prevent care gaps or crises, and promote the well-being of both caregivers and those they support. This approach also strengthens care coordination by linking caregivers to other Senior Resources programs, such as nutrition, transportation, and case management. Providing this counseling aligns with our mission and federal mandates under the Older Americans Act to support caregivers, enhance access to services, and improve outcomes for older adults in our community.

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

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

Caregiver Training

Total of Federal Dollars \$57,975.00 Total of State Dollars

Geographic Area Served Muskegon, Oceana, Ottawa Counties

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

Goal

To enhance the capacity of caregivers to deliver high-quality, person-centered care while maintaining their own health and well-being.

Objectives

- Increase caregiver knowledge of essential care practices, safety protocols, and infection control
- Strengthen communication and interpersonal skills to support effective interaction with care recipients families and healthcare providers
- Improve caregiver competency in supporting individuals with conditions such as Dementia and Alzheimer's disease
- Promote caregiver resilience by providing tools to manage stress and prevent burnout
- Ensure understanding and application of person-centered care principles and client rights
- Enhance caregivers' ability to identify and respond to changes in physical , emotional, and cognitive health

Activities

1. Training Delivery
 - Offer structured training sessions (in-person and virtual)
 - Provide instruction on personal care techniques, mobility assistance, nutrition, and infection prevention
 - Offer specialized modules on dementia care, behavior management, etc
2. Caregiver Support
 - Provide education on stress management, self-care strategies, and burnout prevention
 - Connect caregivers to respite services and community-based resources
3. Resource Navigation
 - Train caregivers to effectively access and coordinate supportive services , including healthcare, transportation, and nutrition programs
 - Distribute educational materials, toolkits, and referral guides
4. Evaluation and Continuous Improvement
 - Collect participant feedback to inform program improvements
 - Track outcomes related to caregiver confidence, care quality, and participant satisfaction

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

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.

(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.

Senior Resources is requesting funding to directly provide caregiver services to address critical gaps in the local provider network, particularly in rural and underserved areas where access to supports are limited. By delivering services in-house, along with our provider network, we improve timeliness and reduce barriers to access, ensuring caregivers receive the assistance they need without delay. This approach allows us to maintain a high level of quality and consistency, aligning all services with best practices and person-centered care principles. Direct service delivery also strengthens our ability to coordinate care across programs, integrating caregiver supports with case management, options counseling, nutrition, and transportation services, etc. for a more seamless experience. In addition, it enhances our capacity to track outcomes, ensure accountability, and meet funding requirements. Providing services directly enables us to pilot innovative approaches and respond flexibly to emerging community needs. Most importantly, it allows Senior Resources to build strong, trusted relationships with caregivers and families, increasing engagement and improving overall outcomes.

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

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

2027–2029 MYP Goals

For each State Plan on Aging (SPoA) goal, AAAs are asked to identify the objectives and planned activities that will guide their work related to the goal during this multi-year cycle.

AAA may also enter goals, in addition to those corresponding with the SPoA goals.

The State Unit on Aging has identified the following four goals for their 2027-2029 State Plan on Aging (AAAs can type these in, under the Add MYP Goal tab, when creating their SPoA goals):

Goal 1 - Enhance access to services for older adults and caregivers to support their health, independence, and social connectedness.

Goal 2 - Promote collaborations and partnerships across MDHHS and other state departments, AAAs, Title VI Tribal grantees, and other agencies and organizations.

Goal 3 - Enhance pathways for accessing information, so that older adults and their support network, including those of greatest economic need and greatest social need, are aware of resources.

Goal 4 -Utilize language and messaging that celebrates aging and communicates the strength and value of older adults and those who provide care.

Instructions

Select the link entitled Add MYP Goal

Provide the title of goal in the MYP Goal tab. A narrative for each goal can be entered in this text box.

Objectives related to each goal can be entered in the Objectives tab and timeline, planned activities and expected outcomes for each objective can be entered in the Planned Activities tab.

This same process can be used to add additional,non-SPoAgoals.

-

MYP Goal

A. Enhance access to services for older adults and caregivers to support their health, independence, and social connectedness.

State Goal Match: 1

Objectives

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Senior Resources will enhance access to services by increasing awareness of available programs through community outreach, media, and strong referral partnerships with healthcare providers, community organizations, and local governments. Efforts will ensure information is accessible, culturally appropriate, and available in multiple formats.

The agency will expand caregiver supports by expanding partnerships and, if awarded Merit Award Trust Funding (MATF), hiring an additional Caregiver Supports Coordinator to increase access to education, training, and support groups.

To reduce barriers, Senior Resources will support transportation options, expand non-traditional in-home services such as behavioral health supports, and provide timely assistance with benefits referrals and system navigation.

To promote social connectedness, the agency will support congregational meal sites, senior centers and evidence-based programs through outreach efforts and expand friendly visiting and telephone reassurance programs as needs are identified.

Planned Activities

1. Increase awareness of available services and supports

Timeline: 10/01/2026 to 09/30/2029

Planned

- Conduct outreach through community presentations, libraries, health fairs, and partner events
- Expand use of social media, print materials, and local media to promote services
- Maintain and strengthen referral partnerships with healthcare providers, community organizations, and local governments
- Ensure information is accessible, culturally appropriate, and available in multiple formats

Expected Outcome

Through these efforts, Senior Resources expects that older adults, caregivers, and referral partners will have increased awareness of available services and supports, resulting in more timely connections to resources that meet their needs

Progress

2. Reduce barriers to accessing services

Timeline: 10/01/2026 to 09/30/2029

Planned

- Support and advocate for transportation options to improve access to programs and appointments
- Support and expand non-traditional in-home services for individuals who are homebound, including services such as access to behavioral health support.
- Provide timely assistance with benefits referrals and system navigation.
- Strengthen marketing communications in coordination with state and community partners to ensure older adults and caregivers are directed to Senior Resources as the primary local contact for options counseling services.

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Expected Outcome

By addressing barriers such as transportation, limited in-home services, and challenges navigating benefits, older adults and caregivers will be better able to access the services they need to maintain their health and independence.

Progress

3. Promote social connectedness and reduce isolation

Timeline: 10/01/2026 to 09/30/2029

Planned

- Support senior centers and evidence-based programs through our marketing and outreach avenues
- We will expand friendly visiting and telephone reassurance programs as need arises and funding is available.

Expected Outcome

Promoting social connectedness through senior centers, evidence-based programs, and initiatives like friendly visiting and telephone reassurance will help reduce isolation and strengthen community engagement. These efforts are expected to enhance the health, independence, and quality of life for older adults and caregivers across the service region.

Progress

4. Expand caregiver supports and resources

Timeline: 10/01/2026 to 09/30/2029

Planned

- If Senior Resources receives MATF funding, the agency will hire an additional Caregiver Supports Coordinator to increase access to caregiver education, training, and support groups.
- Partner with healthcare and community organizations to connect caregivers to resources
- Promote Mi Caregiver Connection as an online resource for caregivers seeking additional information or who are not interested in speaking with someone directly.

Expected Outcome

Access to caregiver education, training, and support groups will reduce caregiver burden and improve overall caregiver well-being.

Progress

B. Promote collaborations and partnerships across MDHHS and other state departments, AAAs, Title VI Tribal grantees, and other agencies and organizations.

State Goal Match: 2

Objectives

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Senior Resources will strengthen coordination across state, regional, and local partners by participating in Michigan Department of Health and Human Services (MDHHS) and Administration on Community Living (ACL) meetings and workgroups, sharing best practices, and engaging in statewide and national networks such as 4AM and USAging.

The agency will enhance collaboration with Native American tribes by establishing and maintaining relationships, coordinating outreach and referrals, and including tribal representation on the Program & Planning Advisory Committee.

Senior Resources will also support advocacy and system improvements by participating in advisory groups, public forums, and stakeholder engagement, providing input on initiatives, and promoting changes that improve coordination, access, and services for older adults and caregivers.

Planned Activities

1. Support coordinated advocacy and systems improvement

Timeline: 10/01/2026 to 09/30/2029

Planned

- Participate in advisory groups, public forums, and stakeholder engagement efforts, and respond to issues impacting older adults and caregivers.
- Provide input on national, state, and local initiatives impacting aging services
- Promote system-level changes that improve coordination and access to care

Expected Outcome

By actively engaging in advisory groups, public forums, and stakeholder efforts, Senior Resources will influence policies and initiatives that improve access to services, promote system-level improvements, and better meet the needs of older adults and caregivers with the overall goal of a more connected, coordinated, and responsive aging services network across the region.

Progress

2. Enhance collaboration with Native American Tribes in the Region

Timeline: 10/01/2026 to 09/30/2029

Planned

- Establish and maintain relationships with tribal organizations serving older adults
- Pursue a representative from a Native American Tribe to be a member of the Program & Planning Advisory Committee

Expected Outcome

Enhanced relationships with Native American tribes will ensure culturally responsive outreach, coordinated service delivery, and tribal representation in planning and decision-making processes.

Progress

3. Strengthen coordination across state and regional partners

Timeline: 10/01/2026 to 09/30/2029

Senior Resources of West Michigan

FY 2027

Planned

- Participate in regular meetings and workgroups with MDHHS, ACL, and other state departments
- Collaborate with other AAAs to share best practices, resources, and service strategies
- Engage in statewide and national initiatives through networks such as 4AMand USAging

Expected Outcome

Through these efforts, Senior Resources expects to strengthen coordination and communication among national, state, regional, and local partners, resulting in more aligned and efficient service delivery for older adults and caregivers.

Progress

C. Enhance pathways for accessing information, so that older adults and their support network, including those of greatest economic need and greatest social need, are aware of resources.

State Goal Match: 3

Objectives

Older adults and caregivers are more likely to access services when they can directly contact a familiar local organization, rather than navigating centralized or automated systems. Senior Resources will increase community and professional awareness of its role as the Area Agency on Aging (AAA) to ensure older adults, caregivers, and referral partners can quickly access services. Efforts will focus on clarifying the AAA role across all communication channels, simplifying “how to start” pathways in web, print, and outreach materials, and providing standardized partner education through toolkits, quick cards, and repeatable presentations. By positioning Senior Resources as the front door for aging services in the three-county region and building scalable education campaigns, the agency will strengthen awareness of resources across the full community, including those with the greatest economic and social need.

Planned Activities

1. Objective 1: Increase community and professional awareness of Senior Resources of West Michigan as the Area Agency on Aging (AAA), ensuring older adults, caregivers, and referral partners can quickly access services.

Timeline: 10/01/2026 to 09/30/2029

Planned

- Clarify the role of Area Agencies on Aging and reduce referral confusion with consistent “Who we are” language across all channels.
- Improve “how to start” pathways on web, print, outreach, and partner materials so people can take the next step quickly.
- Scale partner education using standardized toolkits, quick cards, and repeatable presentations.
- Clarify Senior Resources’ role as the front door for aging services and referrals in the three-county region, with clear pathways for older adults, caregivers, and partners to access information
- Build repeatable education campaigns that scale beyond in-person outreach moments and strengthen awareness of resources across the full community, including those with greatest economic need and greatest social need

Senior Resources of West Michigan

FY 2027

Expected Outcome

Through these efforts, Senior Resources expects that older adults, caregivers, and referral partners will have a clearer understanding of Senior Resources role as the AAA and will be able to quickly access the services and resources they need. By simplifying “how to start” pathways and providing consistent, accessible messaging across web, print, and outreach materials, there will be reduce confusion and improve navigation for both individuals and partners.

These efforts are expected to result in faster connections to services, more informed decision-making, and broader community awareness of the supports available to older adults and their caregivers.

Progress

D. Utilize language and messaging that celebrates aging and communicates the strength and value of older adults and those who provide care.

State Goal Match: 4

Objectives

Senior Resources will promote positive perceptions of aging by highlighting the contributions and value of older adults and caregivers in communications and outreach. The agency will standardize materials and presentations using strengths-based, age-positive language. We will celebrate Older Michiganians Day to honor seniors statewide, and share stories and testimonials that showcase the experiences, skills, and achievements of older adults and caregivers.

Planned Activities

1. Objective 1: Promote positive perceptions of aging and highlight the contributions of older adults and caregivers in all communications and outreach efforts.

Timeline: 10/01/2026 to 09/30/2029

Planned

- Standardize Senior Resources outreach materials and presentations using strength-based, age-positive language that recognizes the value of older adults and caregivers.
- Promote Older Michiganians Day as an opportunity to advocate and celebrate the contributions of seniors across the state.
- Highlight stories and testimonials from older adults and caregivers to showcase their experiences, skills, and contributions.

Expected Outcome

Through these efforts, Senior Resources expects to foster positive perceptions of aging and highlight the value and contributions of older adults and caregivers. Standardizing materials and presentations with strengths-based, age-positive language will ensure consistent, respectful messaging across all communications. Celebrating Older Michiganians Day and sharing stories and testimonials will increase recognition of seniors’ experiences, skills, and achievements, while also raising awareness of the important role caregivers play. These activities are expected to strengthen community appreciation for older adults, reduce age-related stigma, and promote a culture that values aging and caregiving.

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Progress

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

Planned Service Array

Instructions

Complete the FY 2027-2029 MYP Planned Service Array for the PSA.

Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

*Prior to finalizing the Planned Service Array, AAAs should meet with their Regional Aging Representative to discuss goals for service delivery.

Category	Services
Provided by Area Agency	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Case Coordination and Support <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Caregiver Case Management • Caregiver Education • Caregiver Options Counseling • Caregiver Training
Contracted by Area Agency	<p>Access</p> <ul style="list-style-type: none"> • Case Coordination and Support • Information and Assistance • Transportation * <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Friendly Reassurance • Home Care Assistance • Home Health Aide • Home Injury Control • Homemaking • Medication Management • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Disease Prevention/Health Promotion • Legal Assistance

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

	<p>Community</p> <ul style="list-style-type: none"> • Long Term Care Ombudsman • Prevention of Elder Abuse, Neglect and Exploitation <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals • Home Delivered Meals • Supplemental Nutrition Services - Food • Supplemental Nutrition Services - Oral Nutrition Supplements <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Education • Caregiver Support Groups • Caregiver Training • Respite Care
<p>Local Millage Funded</p>	<p>Access</p> <ul style="list-style-type: none"> • Case Coordination and Support * • Options Counseling * • Transportation * <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies * • Chore * • Friendly Reassurance * • Home Care Assistance * • Home Health Aide * • Homemaking * • Medication Management * • Personal Care * <p>Community</p> <ul style="list-style-type: none"> • Disease Prevention/Health Promotion * • Home Repair * • Legal Assistance * • Prevention of Elder Abuse, Neglect and Exploitation * • Senior Center Staffing * <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals *

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

	<p>Nutrition Services</p> <ul style="list-style-type: none"> • Home Delivered Meals * • Supplemental Nutrition Services - Oral Nutrition Supplements * <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services * • Respite Care *
<p>Participant Private Pay</p>	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Care Transition Coordination and Support • Case Coordination and Support • Information and Assistance • Options Counseling • Transportation * <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Chore • Friendly Reassurance • Home Care Assistance • Home Health Aide • Home Injury Control • Homemaking • Medication Management • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Assistance to Hearing Impaired & Deaf Community • Counseling Services • Disease Prevention/Health Promotion • Health Screening • Home Repair • Legal Assistance • Prevention of Elder Abuse, Neglect and Exploitation • Vision Services <p>Nutrition Services</p> <ul style="list-style-type: none"> • Carry Out Meals • Congregate Meals

STATE OF MICHIGAN
 Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
 FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

	<p>Nutrition Services</p> <ul style="list-style-type: none"> • Home Delivered Meals • Nutrition Counseling • Nutrition Education • Supplemental Nutrition Services - Oral Nutrition Supplements <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Case Management • Caregiver Counseling • Caregiver Education • Caregiver Information and Assistance • Caregiver Options Counseling • Caregiver Supplemental Services • Caregiver Support Groups • Caregiver Training • Respite Care <p>Older Relative (Kinship) Caregiver Services</p> <ul style="list-style-type: none"> • Kinship Caregiver Counseling • Kinship Caregiver Respite Care • Kinship Caregiver Supplemental Services • Kinship Caregiver Training
<p>Funded by Other Sources</p>	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Care Transition Coordination and Support * • Case Coordination and Support • Disaster Advocacy & Outreach * • Information and Assistance * • Options Counseling * • Transportation * <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Chore • Friendly Reassurance • Home Care Assistance • Home Health Aide

STATE OF MICHIGAN
 Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
 FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

	<p>In-Home</p> <ul style="list-style-type: none"> • Home Injury Control • Homemaking • Medication Management • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Assistance to Hearing Impaired & Deaf Community • Counseling Services • Disease Prevention/Health Promotion • Health Screening • Home Repair • Legal Assistance • Senior Center Operations • Senior Center Staffing • Vision Services <p>Nutrition Services</p> <ul style="list-style-type: none"> • Home Delivered Meals • Nutrition Education <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Counseling * • Caregiver Education * • Caregiver Information and Assistance * • Caregiver Support Groups * • Respite Care <p>Regional Services</p> <ul style="list-style-type: none"> • Case Coordination & Support for the Deaf and Hard of Hearing * • Kinship Caregiver Counseling * • Kinship Caregiver Support Groups * • Kinship Caregiver Training *
--	---

* Not PSA-wide

Program Development Spending Plan

AAAs may use up to 20% of their OAA Title III-B allocation for program development during the 12-month fiscal year.

If approved by the State Unit on Aging, AAAs may use service funds for program development and coordination activities. (OAA 1321.17)

Instructions

Please provide answers to the question(s) below:

Does the MYP budget reflect the use of Program Development funds?

Yes No

If yes, please describe how the funds will be used.

Senior Resources' program development activities remain firmly grounded in our mission. We continually evaluate how to maintain a comprehensive, well-coordinated system of services that enables older adults and people with disabilities to remain in the community setting of their choice for as long as possible, while ensuring caregivers receive the support they need. This work also includes identifying opportunities to diversify funding and improve operational efficiency.

In 2027, Senior Resources will continue advancing AAA Health Solutions (AAHS), a Michigan Limited Liability Company formed in partnership with Region IV Area Agency on Aging and the Area Agency on Aging of Western Michigan. Together, the partners develop, refine, and implement programs that enhance the health and independence of older adults, caregivers, and people with disabilities. This partnership allows us to leverage shared efficiencies and operate across a three-region service area, a structure that appeals to payors.

Additionally, Senior Resources participates in the Michigan Community Care Collaborative (M3C), a formal partnership of 10 Michigan-based Area Agencies on Aging. M3C works to integrate and coordinate long-term support services statewide, creating a seamless social care system for communities, health plans, and healthcare partners. Its initial efforts focus on building partnerships with Highly Integrated Dually Eligible Special Needs Plans (HIDE SNP), launched on January 1, 2026, in former MI Health Link regions, and expansion planned statewide in FY2028.

Senior Resources also collaborates through Connect Ottawa, a coalition of public and private organizations committed to ensuring that all county residents have the tools and support needed to participate fully in the digital age. With high-speed internet now essential for daily life yet not universally accessible, the initiative aims to build a supportive ecosystem that improves digital access and connectivity for all community members.

Additional program development efforts include engagement in county food committees, transportation, housing, and case management advisory groups, and nonprofit collaboratives, where we routinely learn about and identify new opportunities for program development and collaboration.

Advocacy Strategy

Instructions

AAAs will describe the comprehensive strategy for FY 2027-2029.

Included will be descriptions on how advocacy efforts will improve the quality of life for older adults within the PSA. Additionally, AAAs will give updates on current advocacy efforts (OAA 1321.61(a)(b)(c)) (Operating Standard for AAAs C-6)

Instructions

Please answer the following questions:

Please describe the following:

1. How will the AAA monitor, evaluate, and comment on policies, programs, hearings, levies, and community actions which affect older individuals and family caregivers which the area agency considers to be aligned with the interests identified in the Act?

Senior Resources with support from our national association, USAging, and state association, Area Agency on Aging Association of Michigan, will actively monitor, evaluate, and provide input on policies, programs, public hearings, levies, and community initiatives that impact older adults and family caregivers. Senior Resources will review proposed legislation, regulatory changes, and local community actions to assess alignment with the priorities and protections outlined in the Older Americans Act. This includes tracking federal, state, and local policy developments; participating in public hearings and advisory groups; and collaborating with community partners, advocacy organizations, and service providers. When policies or initiatives affect the well-being, independence, or access to services for older adults and caregivers, Senior Resources will provide comments, recommendations, and formal feedback to policymakers and community leaders to ensure the interests and needs identified in the Older Americans Act are represented and supported.

2. How will the AAA solicit comments from the public on the needs of older individuals and family caregivers?

To inform its advocacy efforts, Senior Resources routinely gathers input from older adults, caregivers, and stakeholders through advisory councils, surveys, feedback from our participants and caregivers, and broader community engagement activities. Senior Resources convenes the Senior Advocates Coalition on a quarterly basis, offering both in-person- and virtual participation. These meetings highlight proposed legislation and emerging issues that affect the independence and service delivery system for older adults.

When an issue becomes especially relevant, Senior Resources provides a summary in its monthly newsletter, *The Compass*, along with information on how readers may contact their elected officials to share their perspectives. For issues that are urgent or rapidly evolving, the agency distributes targeted advocacy alerts to its provider network, Policy Board, Advisory Board, and public listserv. These alerts raise awareness and supply timely guidance to help individuals engage with their lawmakers and express their views.

3. How will the AAA represent the interests of older individuals and family caregivers to local level and executive branch officials, public and private agencies, or organizations?

Senior Resources' leadership maintains ongoing communication with lawmakers through regional "coffee hours," email, phone conversations, and in-person meetings in both Lansing and Washington, D.C. These regular touchpoints help build strong, mutually beneficial relationships with legislative offices. In addition, we facilitate the Senior Advocates Coalition for Muskegon, Ottawa, and Oceana counties. Through these engagements, Senior Resources is able to effectively represent the interests of adults aged 60 and older and

Senior Resources of West Michigan

FY 2027

their caregivers, while also serving as a trusted resource for legislators when constituents contact their offices with issues that Senior Resources can assist in resolving.

4. How will the AAA consult with and support the State's Long-Term Care Ombudsman Program?

Senior Resources supports the local Long-Term Care Ombudsman program by providing the structure, resources, and coordination it needs to run smoothly throughout the region. For the past several grant cycles, Senior Resources has opened ombudsman service for community provider bid without any response and as a result we have assumed the responsibility of hosting the long-term care ombudsman. This includes coordinating staffing, providing training, and offering ongoing support for their work. Senior Resources provides information about the program through outreach and education, so residents, families, and facilities know their rights and how to get help. Senior Resources helps coordinate volunteers, build relationships with local care facilities and community partners, and make sure the program has what it needs to respond to concerns and complaints. The majority of the long-term care ombudsman program operates under the oversight of the State Long-Term Care Ombudsman, who provides guidance and training, ensures compliance with state regulations, collects reporting and sets benchmarks, and helps maintain program standards. This combined support provides the framework for the Ombudsman program to effectively champion the rights, safety, and well-being of people living in long-term care.

5. How will the AAA coordinate with public and private organizations, including units of general-purpose local government to promote new or expanded benefits and opportunities for older individuals and family caregivers?

To support a comprehensive approach to service delivery and increase awareness of available services across the continuum of settings where older adults and family caregivers may turn for help, Senior Resources has built partnerships and awareness of our services with local governments, healthcare systems, community mental health agencies, nonprofit organizations, and advocacy groups.

Senior Resources stays connected and coordinated through a regular communication cadence, collaborative planning, and participation in community coalitions to identify emerging needs, share information, and highlight available programs and resources.

Efforts to promote new or expanded benefits and services include outreach through public notices and announcements, presentations, social media, and educational activities. These efforts are supported by established cross-referral systems that help improve awareness and make it easier for individuals to connect with the services they need.

6. How will the AAA take a leadership role in the PSA to assist communities in targeting resources from all appropriate sources to meet the needs of older adults and family caregivers with greatest economic and social need, particularly low-income minorities?

Senior Resources supports organizations by providing current demographic data and guidance on Older Americans Act (OAA) requirements to help ensure individuals with the greatest need are prioritized. When appropriate, Senior Resources provides technical assistance by working with community partners to identify and prioritize the needs of older adults and family caregivers with the greatest economic and social need, including low-income and minority populations. By using data from community needs assessments, service utilization, and demographic trends, Senior Resources provides information that can help guide how resources are targeted and distributed to ensure they reach those who need them most. In our role as an AAA, Senior Resources, as appropriate, provides input to partners on culturally appealing marketing strategies to help improve outreach and increase engagement within underserved and diverse communities.

Most community-based organizations (CBOs) operate with limited funding and are unable to serve everyone in need and many have long relied on established prioritization criteria to guide their service delivery. As the 60+

Senior Resources of West Michigan

FY 2027

population continues to grow, while funding remains flat or declines, there are frequent discussions about how to best serve as many individuals as possible with available resources.

Senior Resources convenes and participates in local coalitions, collaboratives and advisory groups, to align efforts among public and private organizations, including local governments, healthcare providers, community-based organizations, and advocacy groups. Through these collaborations, Senior Resources promotes shared strategies, works to ensure there isn't duplication of services, and identify gaps in access particularly in underserved communities.

7. How will the AAA work with other aging network providers, including other AAAs, in coordinated effort?

During this grant cycle, Senior Resources will continue advancing AAA Health Solutions (AAAHS), a Michigan Limited Liability Company formed in partnership with Region IV Area Agency on Aging and the Area Agency on Aging of Western Michigan. Together, the partners develop, refine, and implement programs that enhance the health and independence of older adults, caregivers, and people with disabilities in areas where collaboration makes sense. This partnership allows us to leverage shared efficiencies and operate across a three-region service area, a structure that appeals to payors.

As part of the Area Agency on Aging Association of Michigan (4AM), 4AM members will continue to coordinate in our efforts to reach caregivers across Michigan through our Mi Caregiver Connection online platform. This platform serves as a centralized entry point where caregivers can access trusted, local resources and find meaningful support when searching for assistance online.

Additionally, Senior Resources participates in the Michigan Community Care Collaborative (M3C), a formal partnership of 10 Michigan-based Area Agencies on Aging. M3C works to integrate and coordinate long-term support services statewide, creating a seamless social care system for communities, health plans, and healthcare partners. Its initial efforts focus on building partnerships with Highly Integrated Dually Eligible Special Needs Plans (HIDE SNP) plans, with one contract launched on January 1, 2026, in former MI Health Link regions, and expansion planned statewide in FY2028.

Planning and Service Area Aging Landscape

Constantly changing service demands make it essential for AAAs to carefully evaluate the potential, priority, targeted, and unmet needs of its service population for effective planning. All AAA PSAs are different, and it is important to understand the unique landscape of each and the impact on planning for service delivery.

Instructions

AAA's will provide for the CSA and ACLS Bureau a snapshot of the landscape of the aging services within the PSA by answering the following questions:

1. Describe notable changes in trends since the last MYP providing a picture of potentially eligible service population.

Over the past five years, the region has experienced steady growth in its older adult population. Between 2020 and 2025, the number of residents aged 60 and older rose from 109,538 to 121,126, reflecting a 10.6% increase in individuals eligible for OAA services. During this same period, economic vulnerability also deepened among older adults. The number of people aged 55 and older living below the poverty level grew sharply—from 9,809 to 11,461, an increase of 16.9%. Even more striking was the rise in poverty among minority individuals age 55 and older, which climbed from 1,776 to 2,261, representing a 27.3% increase. Taken together, these trends illustrate a growing population with increasingly complex needs, underscoring the importance of accessible and well-coordinated aging services throughout the region.

The costs associated with delivering services continue to rise across the region. Increases in food prices, fuel costs, and workforce expenses—combined with the continued growth of the older adult population—place additional pressure on an already strained system. At the same time, funding levels have remained relatively static. This imbalance requires Senior Resources to further prioritize service delivery, ensuring that limited resources are directed to individuals who meet Older Americans Act (OAA) priority criteria. As demand continues to outpace available funding, the agency must increasingly focus on addressing the needs of older adults with the greatest economic, social, and physical challenges.

2. Describe how the AAA coordinates a comprehensive system of aging services within the PSA.

Senior Resources mission is to provide a coordinated, comprehensive and responsive system of services that supports independence, dignity, and quality of life for older adults and their caregivers.

To meet that mission, Senior Resources coordinates a comprehensive network of aging services through planning, partnerships, funding, and oversight to ensure older adults have access to the supports they need to live safely and independently in the community.

Senior Resources assesses the needs of older adults and caregivers through community input sessions, surveys, demographic analysis, needs reports and stakeholder engagement. This information is used to develop the Multi Year and Annual Implementation plans which guides how services and funding will be prioritized within the Planning and Service Area (PSA).

Based on the public input and federal/state required services, Senior Resources contracts with over 70 local providers such as senior centers, transportation programs, meal providers, and home care agencies to deliver services funded through the Older Americans Act and state funding. Most of our contracted service providers are locally owned and operated, resulting in a significant economic impact within the community

Senior Resources of West Michigan

FY 2027

through the funding provided.

Senior Resources ensures access to information, referrals, and access by contracting with Call 211 of the Lakeshore. Call 211 serves as a central access point for aging services by providing information and assistance and referrals to community resources. Additionally, Senior Resources employs 4 full time options counselors who assist older adults and people with disabilities, caregivers, and professionals navigate available long-term care supports. Senior Resources publishes and widely distributes a Long-Term Care Options Booklet which outlines all long-term options providing information for individuals as they consider their particular situation and programs for which they may be eligible.

Through programs such as targeted care management, case management, and options counseling, Senior Resources and our partner sites, help individuals identify needs, develop person-centered service plans, and connect to appropriate supports to remain in their homes and communities.

When a participant need arises that Senior Resources cannot meet through an existing contracted provider, we actively seek new partnerships and collaborative opportunities to address the gap. Senior Resources works closely with health systems, community mental health agencies, housing providers, local governments, nonprofit organizations, and advocacy groups to coordinate services, strengthen collaboration, and ensure a more comprehensive and responsive aging services network.

Our agency provides oversight of contracted providers through performance monitoring, site visits, reporting requirements, and ongoing technical assistance, helping to ensure that all services consistently meet established state and federal standards. Additionally, Senior Resources routinely conducts internal monitoring and quality assurance activities, working closely with the State Office on Aging to ensure compliance with all federal and state requirements.

Finally, Senior Resources advocates for policies and resources that support older adults and caregivers while also working to develop new programs, strengthen service coordination, and address emerging needs in the community.

3. Describe ways in which the AAA is informing, educating and advocating within their communities.

Senior Resources produces a monthly newsletter, *The Compass*, which reaches approximately 450 recipients. The purpose of *The Compass* is to keep the public informed about the work of Senior Resources, highlight partnerships across the aging services network, and uplift the stories and dedication of our workforce—the individuals who show up every day to ensure that older adults and people with disabilities can live with dignity and independence. This publication is widely distributed to partner organizations, community-based agencies, decision makers, and the public.

Six times per year, Senior Resources publishes *The Caregiver Link*, distributed to more than 600 caregivers. This targeted newsletter provides practical guidance on avoiding caregiver burnout, information about available caregiver supports, and tips for navigating common caregiving challenges. It serves as a helpful resource for both new and experienced caregivers who may feel overwhelmed or isolated in their roles.

Senior Resources is a regular contributor to the local *Senior Perspectives publication*, benefiting from advertisements and article space within the publication. With a distribution rate of more than 18,000, *Senior Perspectives* remains an effective avenue for increasing public awareness of programs such as SHIP counseling and caregiver services, ensuring that critical information reaches a broad audience of older adults and their families.

Senior Resources of West Michigan

FY 2027

Senior Resources convenes and facilitates the Senior Advocates Coalition, a forum that brings together community partners, service providers, older adults, and advocates. The Coalition regularly hosts state and federal representatives to discuss current policy issues and emerging trends affecting older adults. These meetings occur 4-6 times per year and provide valuable opportunities for education, collaboration, and coordinated advocacy across the region. Advocacy alerts are communicated with coalition members and our aging network as needed.

At the end of each calendar year, Senior Resources develops and releases an Annual Report summarizing our impact across the region. This report offers a clear, concise overview of key achievements, service utilization, financial stewardship, and major accomplishments. It is distributed to board and advisory council members, county commissioners, and other regional stakeholders. The public can access both printed and electronic versions through our website.

4. Describe what home and community-based Medicaid services are available within the PSA. (Examples: PACE, MI Choice Waiver, etc.)

Senior Resources collaborates with a wide range of long-term services and supports programs to help ensure older adults and caregivers have access to person-centered, coordinated care within the community. The agency provides information and assistance, options counseling, referrals, and connections to community-based resources to support informed decision-making. Through these collaborations, Senior Resources helps to ensure that older adults and family caregivers are aware of the full range of available long-term services and supports so they can make choices that best meet their needs and preferences.

Within Senior Resources catchment area residents have access to a strong network of home- and community-based Medicaid services. Two MI Choice Waiver providers serve the region: Senior Resources of West Michigan and Reliance Community Care Partners with whom we have a good working relationship and share a regional waitlist. Together, these organizations deliver person-centered long-term supports designed to help eligible individuals remain safe in their homes and communities rather than entering institutional care.

In addition to MI Choice services, the Program of All-Inclusive Care for the Elderly (PACE) programs are available throughout the entire region. These programs offer a comprehensive model of care that integrates medical, social, and supportive services for older adults who meet nursing facility level of care criteria but prefer to remain in a community setting. The presence of PACE across all counties ensures that residents have access to a coordinated continuum of care regardless of location within the PSA. Senior Resources is a partner in LifeCircles PACE, the Muskegon and Ottawa PACE initiative.

5. Describe other significant initiatives and grants leveraged by the AAA. (Examples: MI Options, SCSEP, MHEP, etc.)

Senior Resources, through its participation in AAA Health Solutions, successfully applied for and received a MI Options grant for fiscal years 2025 and 2026. This funding supports the delivery of person-centered Options Counseling and SHIP/MIPAA services within the region. By braiding MI Options funds with traditional and local funding, Senior Resources is able to strengthen and expand its capacity to inform older adults, caregivers, and individuals with disabilities through complex long term care decisions. Through this grant, Options Counselors provide comprehensive, unbiased information about the full range of long-term care programs, community supports, and benefits available to individuals based on their needs, goals, and preferences. This person-centered approach helps individuals understand and evaluate their choices, plan for future needs, and access services that promote independence and stability.

Senior Resources of West Michigan

FY 2027

As another facet of long-term care planning, the MI Options funding allows the agency the ability to continue offering Medicare and MIPAA-related education, including assistance with Medicare coverage, cost saving programs, and special assistance initiatives. This approach ensures that individuals receive coordinated guidance across both long-term care and health insurance systems, empowering them to make informed decisions that align with their financial, medical, and personal circumstances.

Senior Resources is a proud recipient of a replication grant through WellWise Services to continue to provide the Safe Haven program in our region. This initiative provides Elder Abuse Victim Advocacy and Care Management, offering confidential, trauma informed, and person-centered support services for vulnerable adults aged 60 and older who have experienced abuse, neglect, or exploitation.

The Safe Haven team consists of trained elder victim specialists with expertise in addressing the unique needs of older victims of crime. These specialists provide compassionate support and guidance tailored to each individual's situation and is participant driven. Referrals to the program can come from any community partner or internal sources, ensuring that those in need can access assistance quickly and effectively.

Safe Haven works in close partnership with our regional SafeSeniors Elder Abuse Collaborative, enhancing efforts to safeguard and support older adults in our community. Each intervention is guided by the individual's own goals and comfort level, this person-centered approach empowers them to regain stability and security in a way that they are comfortable with and best meets their needs.

6. a. Describe how the AAA addresses unmet needs by referring individuals to organizations such as Commissions/Councils on Aging, Departments on Aging, Health Care Organizations/Systems, Veterans Agencies, Tribal Organizations, Faith-based Organizations, Public Health, Mental Health, Community Action Agencies, Legal Assistance and Elder Rights Programs, etc.

Senior Resources uses a flexible, sustainable approach to address unmet needs among older adults, caregivers, and individuals with disabilities throughout the planning period. We focus on strengthening referral pathways and community partnerships to ensure individuals are connected to appropriate services in a timely, person-centered manner. This approach supports equity, cultural responsiveness, and a "no wrong door" system of access. Over the planning period, we aim to reduce unmet needs by improving access to community-based services, strengthening coordination among providers to minimize duplication and gaps, ensuring individuals do not need to repeatedly share their story, and using data and community input to continuously refine referral strategies.

We identify needs through intake, options counseling, assessments, caregiver support activities, and community outreach. We provide warm transfers that include follow-up, coordination, and shared accountability when appropriate, and continue to partner with platforms such as Call 2-1-1 and the Community Information Exchange (CIE) to streamline referrals. CALL 2-1-1, available 24/7 regionwide, serves as the first step in the continuum of care, offering families information and assistance on in-home services, care management, insurance, transportation, housing, support groups, and more. When additional discussion of long-term services is needed, calls are transferred to a Senior Resources Options Counselor who provides education, explores options, and makes appropriate referrals.

Senior Resources participates in the Muskegon County CIE, Tandem, launched in 2024, which connects healthcare providers, social service organizations, and community-based agencies through a cloud-based referral platform. Tandem simplifies access to essential services—such as food, transportation, housing, and healthcare—while reducing duplication and improving outcomes for individuals with complex needs. We also utilize Findhelp and Tandem's closed-loop referral systems to coordinate services for older adults referred

Senior Resources of West Michigan

FY 2027

through Michigan's In Lieu of Services (ILOS) program, ensuring communication and follow-up while receiving reimbursement for approved services.

Throughout the planning period, we will maintain and strengthen referral relationships with a broad network of partners.

Commissions on Aging and Senior Centers (COA's): We partner with two COA's in our region, supporting locally funded services, senior center programs, transportation, nutrition, and social opportunities. Along with senior centers in the region, these COA's are a key part of the aging network. They serve as trusted and easy-to-find sources of information and support for older adults.

Healthcare Organizations and Health Systems: As the local AAA, we collaborate with hospitals, FQHCs, clinics, and public health organizations to connect older adults to home- and community-based services. We offer evidence-based wellness and chronic disease programs and participate in care transitions to prevent readmissions. We also address social drivers of health, such as social isolation, food insecurity, and transportation barriers.

Veterans Agencies: We partner with veteran-serving organizations to connect eligible veterans and caregivers to federal, state, and local benefits, healthcare services, housing supports, and veteran-specific programs. We maintain a contract with the Battle Creek VA to administer the Veterans Directed Care (VDC) Program, expanding coverage as requested by the VA.

Tribal Organizations: Although there are no federally recognized tribes in Region 14, we coordinate with the Little River Band of Ottawa Indians and the Match-e-be-nash-she-wish Band of Pottawatomi to support culturally responsive services for Native American elders.

Faith-Based Organizations: We maintain strong partnerships with faith-based groups to provide informal supports including food assistance, transportation, caregiver respite, and spiritual care, especially in rural and underserved areas.

Public Health Departments: We collaborate on community initiatives including healthy food access, nutrition programs, disease prevention, health education, and emergency preparedness. We also serve as grants administrator for the Muskegon County Senior Millage and maintain active engagement in public health collaborations.

Mental Health Agencies: We work closely with Community Mental Health agencies, Federally Qualified Health Care Clinics (FQHCs), and local mental health providers to connect older adults to counseling, crisis intervention, substance use services, and psychiatric care. We also provide in-home behavioral health services, including Empower at Home and face-to-face counseling for home-limited participants.

Community Action Agencies: In Ottawa County, we administer Older Americans Act funds and coordinate services with local senior-serving organizations, Community Action Agencies, and other human service networks to prevent duplication and ensure equitable access to housing, food, utilities, and other basic needs.

Legal Assistance and Elder Rights Programs: We participate in the SafeSeniors Collaborative and administer the Safe Haven Program, providing trauma-informed advocacy and care management for older adults experiencing abuse, neglect, or exploitation. We partner with Legal Aid of Western Michigan and the Fair Housing Center of West Michigan to provide legal support, advocacy, and resources for housing stability, benefits, and protection from abuse or exploitation.

Through these efforts, Senior Resources ensures that older adults, caregivers, and individuals with disabilities can access the services and supports they need, while maintaining coordinated, person-centered, and culturally responsive care throughout our region.

6. b. How does the AAA foster relationships with these community partners?

Area Agencies on Aging are charged with building and sustaining strong relationships with community

Senior Resources of West Michigan

FY 2027

partners to ensure a strong aging services network. Senior Resources collaborates with a broad array of stakeholders including healthcare systems, local governments, nonprofit organizations, transportation providers, housing agencies, and volunteer groups—to ensure older adults can access coordinated supports that promote independence, safety, and well-being.

Through contracts and funding agreements, Senior Resources partners with community-based organizations to deliver essential services such as information and referral, nutrition programs, home supports, transportation, and in-home services. When a service gap is identified, Senior Resources contract management staff actively seek community partners to help address the need and explore opportunities for collaboration. Senior Resources provides training and technical assistance to strengthen the capacity of partner agencies.

Senior Resources workforce members participate in a wide range of collaborations and committees across the region ranging from elder abuse prevention, transportation, non-profit county collaboratives, human resources, and various advisory committees. The agency also engages partners through community needs assessments, strategic planning activities, and advisory council participation to ensure that service priorities align with the needs of the region.

Recognizing the positive impact and natural alignment of services, Senior Resources has sought out partnerships with healthcare organizations and is currently participating in cross sector initiatives addressing social determinants of health, care transitions, dementia friendly practices, and other emerging needs.

Senior Resources employs a fulltime Director of Marketing Communications who leads the agency's outreach efforts by delivering in-person presentations, producing publications, managing social media, and fostering strong relationships with community partners and the broader public.

7. Describe how the AAA identifies veterans during intake and coordinates veteran-related support services and/or referral programs with appropriate veteran agencies.

Senior Resources continues to maintain strong and mutual referral relationships with veteran support agencies throughout the region. These partnerships ensure that older adults and caregivers with military backgrounds are connected to the benefits, services, and resources they may be eligible for.

During the initial intake process, Senior Resources Options Counselors ask each participant, *“Have you or any member of your family ever served in the military?”* This phrasing has proven to be more conversational and less formal than directly asking about “veteran status,” resulting in more accurate and forthcoming responses. By identifying prior military service early, Senior Resources can coordinate timely referrals to Veterans Service Offices, VA benefit programs, caregiver supports, and other veteran-specific community resources that address the unique needs of those who have served.

Additionally, Senior Resources continues to maintain its contract with the Battle Creek Veterans Administration (VA) to deliver the Veterans Directed Care (VDC) Program. In 2025, Senior Resources successfully completed the Readiness Review conducted by the Lewin Group, affirming our capacity to continue administering VDC services at a high standard of quality and compliance.

When the Area Agency on Aging of Western Michigan discontinued its VDC contract in 2025, Senior Resources was approached to assume a portion of the cases previously served in that region. Following a thorough analysis of staffing capacity, service demand, and administrative readiness, Senior Resources agreed to take on these additional participants. As a result, the agency has experienced significant growth in

Senior Resources of West Michigan

FY 2027

its VDC caseload—nearly doubling the number of veterans and caregivers served within the past year. This expansion has strengthened our role as a trusted VDC provider and reflects our commitment to ensuring veterans have access to person-centered, self-directed supports that honor their service and promote independence.

8. Describe services that address incidence of hunger, food insecurity, malnutrition, physical and mental conditions and/or self-direction. [See OAA 306(a)(16) (42 U.S.C. 3026(a)(16)).]

Senior Resources maintains a strong partnership with AgeWell Services, the contracted meal provider serving Muskegon, Oceana, and Ottawa counties. To enhance meal variety and honor participant choice, AgeWell Services is developing a new “choice” meal program that will allow home-delivered meal recipients to select their preferred meals from a menu. These meals will be delivered in multipack formats and will require reheating prior to eating.

Across the region, five congregate restaurant voucher programs currently operate, giving diners the flexibility to choose both what and where they eat. This includes one participating ethnic restaurant that offers soul food, expanding culturally relevant dining options for older adults.

Senior Resources participates in the Ottawa Food collaborative in Ottawa County. In 2026 Ottawa Food has established a goal of increasing home delivered nutrition in Ottawa County by 25%, which includes expanding access to food boxes, meals, and pantry items for individuals who are home limited or unable to safely obtain food on their own.

In the past year, Senior Resources has leveraged multiple community partnerships and supports such as the Tandem Community Information Exchange (CIE) food boxes, gift card distribution through partnership with the Food Bank Council, and collaborations with Ottawa Food to address hunger, food insecurity, and nutrition needs among older adults.

During the 2026 SNAP benefit pause, an ad hoc committee in Muskegon County and an already established group in Ottawa County, Community SPOKE, were convened to assess emerging gaps, identify high-risk individuals, and coordinate timely responses across service providers. This collaborative effort strengthened communication between agencies, ensured quicker identification of residents experiencing food insecurity, and supported the development of targeted strategies—such as increased outreach, supplemental food resources, and enhanced referral pathways—to help older adults maintain adequate nutrition during periods of instability.

9. Describe how the AAA or its subcontractors are maintaining the fidelity of the health promotion/disease prevention programs.

Facilitators of Senior Resources approved evidenced-based programs must complete the required program-specific training, obtain certification in program delivery, and submit proof that the certification with their contract documents before receiving approval to conduct any workshops. In addition, each facilitator must affirm their assurance to maintaining program fidelity by adhering to all required protocols, instructional guidelines, and quality standards established by the evidence-based model. This structured approach helps safeguard the integrity of each program and ensures participants receive consistent, evidence-based interventions that achieve the intended health and wellness outcomes.

10. Describe how the AAA promotes health promotion/disease prevention programs to maximize community awareness and participation.

Senior Resources employs multiple marketing and outreach strategies to ensure that information about evidenced based programs to reach a broad and diverse audience. These strategies include distributing printed materials such as flyers, brochures, and informational sheets; sharing program announcements

Senior Resources of West Michigan

FY 2027

through senior center newsletters and monthly activity calendars; and promoting workshops through social media channels managed both by Senior Resources and partnering agencies. Together, these approaches help maximize community awareness, engage underserved populations, and ensure that potential participants receive timely and accessible information about available health promotion opportunities.

11. Describe Alzheimer’s Disease and related disorders programs and education that the AAA offers and/or supports.

Senior Resources offers an array of dementia and caregiver focused programs designed to educate , support, and empower caregivers throughout the region. These include evidence-based workshops such as *Powerful Tools for Caregivers*, the *Stress Busting Program*, *Savvy Caregiver Training*, and *Loving Someone with Dementia*, all of which equip caregivers with practical strategies to manage stress, understand disease progression, and provide effective, compassionate care.

In addition to structured training programs, Senior Resources provides the opportunity for caregivers to attend 1 of the 13 in-person caregiver support groups each month across Muskegon, Oceana, and Ottawa counties, ensuring ongoing, peer driven support.

Senior Resources maintains a strong partnership with the Alzheimer’s Association , collaborating on community education, referral pathways, and awareness-building efforts. We regularly refer to the Alzheimer Association network whose support groups includes a men’s-only group offered in a local hardware store in Grand Haven, offering a safe and tailored environment for male caregivers to connect and share their experiences.

Senior Resources employs a full-time Caregiver Support Specialist who provides personalized guidance and helps caregivers navigate available resources. Having a team member dedicated to supporting caregivers across the region has proven effective, with 85% of caregivers reporting a reduction in their caregiver burden at six months, as measured by the Modified Strain Index.

Further strengthening coordination, Senior Resources participates in the *Mi Caregiver Connection* initiative through the Area Agencies on Aging Association of Michigan , expanding access to high quality, consistent caregiver resources across the state.

To support ongoing caregiver education and connection , Senior Resources publishes *The Caregiver Link* newsletter six times per year. Distributed to more than 600 caregivers and community members, this publication provides timely information on caregiving strategies, upcoming workshops, community resources, and opportunities for support.

Finally, Senior Resources is a Center for Medicare Services (CMS) Guiding an Improved Dementia Experience (GUIDE) provider. The GUIDE program supports coordinated, person-centered dementia care, with a focus on helping individuals remain safe in their homes and communities while reducing caregiver burden and avoidable hospitalizations. It emphasizes a holistic approach to care for individuals living with dementia, while also providing essential support to family caregivers through care navigation, education, and respite services.

12. Does the AAA administer a senior millage in the PSA? Yes No

13. Are there any counties or townships in the PSA in which the AAA is working with the local officials to initiate potential senior millage? If yes, please describe: Yes No

Greatest Economic and Greatest Social Need

In compliance with OAA regulations, AAAs are required to have a targeted focus on populations with Greatest Economic and Greatest Social Need. (45 CFR OAA 1321)

Instructions

AAAs will describe how the agency defines Greatest Economic and Greatest Social Need for the PSA; how the AAA educates its partners, services providers, and the public on OAA expectations; strategies for targeting priority populations; and how the Advisory Council is engaged, by providing answers to the following questions:

Please describe the following:

1. How the AAA defines Greatest Economic and Greatest Social need for the PSA.

While Older Americans Act (OAA) programs and services are available to all adults aged 60 and older, the Act includes specific requirements to ensure that limited resources are directed toward those with the greatest need. Senior Resources follows a clear, structured approach to prioritizing services, guided by both internal policy and contract standards. To help ensure that limited funding and services are reaching those who need them most, Senior Resources considers factors that may threaten an individual's ability to live independently, including isolation/living alone, those living in rural areas, being age 75 or older, or being non-English speaking.

2. How the AAA educates the public, its partners, and service providers on the Older Americans Act expectations regarding targeting older adults with greatest economic and greatest social need.

Senior Resources provides education to contracted service providers during onboarding and ongoing technical assistance regarding census specifics related to each county's service area. Onboarding includes a review of OAA requirements, definitions of Greatest Economic Need and Greatest Social Need, and expectations for prioritizing services to individuals who may face barriers such as low income, social isolation, rural location, limited English proficiency, or belonging to underserved populations.

Every quarter, each provider receives a report detailing the number of individuals served, including totals for key subpopulation groups. This helps ensure providers understand their responsibilities for appropriately targeting and prioritizing services. Ongoing program monitoring and contract management reinforce these expectations and provide opportunities to review compliance.

Senior Resources also educates community partners and the public through presentations, outreach events, community meetings, and informational materials that highlight the importance of reaching older adults who experience economic hardship or social barriers. Collaboration with community organizations serving vulnerable populations helps ensure that individuals with the greatest needs are identified and connected to available services.

Through these combined efforts, Senior Resources works to ensure that services funded through the OAA are delivered in a manner consistent with federal expectations and prioritize older adults with the greatest economic and social needs.

3. AAA's strategy to target priority populations for greatest economic and greatest social need.

To ensure emphasis is put toward serving those designated as at risk, Senior Resources provides grantee organizations with demographic information including age, minority, and poverty level setting to assist them in establishing benchmarks and outreach strategies for underserved populations. Grantee organizations are

Senior Resources of West Michigan

FY 2027

instructed, using guidance from the Administration of Community Living and the MDHHS Bureau of Aging, Community Living, and Supports, to give substantial emphasis to serving eligible persons with greatest social and/or economic need, with particular attention given low income and minority individuals. "Substantial emphasis" is regarded as an effort to serve a greater percentage of older persons with economic and/or social needs than their relative percentage of the total elderly population within the geographic service area. Each provider must be able to specify how they satisfy the service needs of the low-income minority in the area they serve and to the maximum extent feasible, must provide services to low-income minority individuals in accordance with their need for such services, and in numbers greater than their relative percentage to the total age 60+ population within the geographic service area.

Four times per fiscal year, grantee organizations are provided with a report indicating how many individuals were served with breakouts for minority/diversity factors. Technical support to increase service provision to targeted populations is offered if/when percentage is not in numbers greater than the relative percentage to the total age 60+ population in their service area. Additionally, Senior Resources runs a National Aging Program Information System (NAPIS) Data Assessment report twice per year to assess the diversity of registered participants documented in the NAPIS platform. The report results help guide adjustments to marketing and outreach efforts, ensuring that underserved populations receive information in ways that are accessible and responsive to their needs.

4. How the AAA's Advisory Council assisted in targeting individuals with greatest economic and greatest social need. [See OAA § 1321.63(b)]

Senior Resources Program & Planning Advisory Committee assists in targeting individuals with the greatest economic and social need by providing community-informed guidance on priorities, outreach, and service delivery. Members help identify who needs the most support, such as low-income seniors, people in rural areas, minority populations, and those who are socially isolated—by combining their own experiences, local knowledge with data from community assessments and service trends. They look at this information to spot gaps, suggest how programs and funding should be focused, and make sure efforts stay in line with Older Americans Act guidelines. The committee also shares ideas on how to better connect with underserved groups, including working with local partners and using culturally appropriate approaches. By reviewing outcomes and giving feedback, they help ensure services are reaching the people who need them most and suggest changes when they're not. By sharing ideas, building community partnerships, and reviewing how well services are working, the council helps make sure all voices are heard, and that support is reaching those who need it most.

Coordination to Serve Native American Elders and Family Caregivers

All Tribes have unique cultures and identities that should be honored and respected. AAAs should use this section to describe methods used for collaboration, sharing program information, opportunities for Tribal representation in various groups, connection with services beyond Title VI, and engagement with elders and organizations within and adjacent to the PSA.

Instructions

In compliance with the OAA, AAAs will describe the following:

Please describe the following:

1. Methods for collaboration on and sharing of program information and changes.

At Senior Resources, we are beginning to build respectful connections with tribal communities to ensure that older adults and caregivers have access to appropriate services. We continue to initiate communication with tribal leaders through introductory meetings and collaborative discussions to share information about available programs and begin exploring areas where services align. We seek to involve tribal representatives in early planning and needs assessment conversations and will seek input on how to develop culturally responsive approaches that align with community priorities. We recognize that identifying staff to serve as tribal liaisons, facilitating communication, coordinating referrals, and supporting tribal-led initiatives will be critical as these partnerships grow. Communication with tribes adjacent to our Public Service Area (PSA) throughout the planning process has occurred. Our State Health Insurance Program (SHIP) program has provided education at elder tribe meetings within the past year. Through these initial steps, we are laying the foundation for relationship-based collaboration that respects tribal sovereignty and works toward seamless, person-centered services for tribal elders and their caregivers.

2. How services will be provided in a culturally appropriate and trauma-informed manner.

Senior Resources is dedicated to delivering services in a culturally appropriate and trauma-informed way to ensure that every older adult and caregiver we serve feels respected, safe, and supported. Our workforce-led L-isten, E-ducate, A-ppreciate, D-evelop (L.E.A.D.) Committee develops an annual training curriculum that provides education for our entire staff, raising awareness and building skills to effectively serve diverse and underserved populations. We begin by understanding the unique cultural, linguistic, and social backgrounds of our community members, tailoring programs and services to align with their values, traditions, and preferences. All staff receive ongoing training in cultural competence and trauma awareness, equipping them to recognize and respond to the effects of abuse, neglect, or other adverse experiences while delivering care that is both sensitive and empowering. We collaborate closely with culturally specific organizations, tribal governments, and faith-based partners to reach underserved populations and ensure that services are accessible and relevant. Every interaction is guided by principles of safety, trust, and person-centered care, giving individuals and caregivers a voice in decisions that affect their lives. Senior Resources requires initial and ongoing Person-Centered Training for all staff to ensure a deep understanding of these principles and continuous reinforcement through refresher sessions. Through this combination of training, partnership, and feedback, we embed culturally responsive and trauma-informed practices into all aspects of our programs, creating an environment where older adults and their caregivers can confidently access the supports they need to maintain independence, well-being, and dignity.

3. Communication opportunities that service providers will offer to Title VI programs, such as participation in meetings, inclusion on email distribution lists, and presentation opportunities.

During this grant cycle, Senior Resources will actively work to strengthen and expand our engagement with tribal communities by seeking representation from adjacent tribes on our Program and Planning Advisory

Senior Resources of West Michigan

FY 2027

Committee, as well as on our full board. We will extend invitations to tribal representatives to participate in our Senior Advocates Coalition, ensuring that tribal perspectives and priorities are included in program planning, policy discussions, and advocacy efforts. In addition, we will identify and cultivate additional tribal contacts to add to our communication networks, including email distribution lists for resources such as Caregiver Link, The Compass newsletter, and email listservs for updates on urgent legislation impacting older adults and tribal communities. Senior Resources will also maintain ongoing connections with tribal partners by offering SHIP (State Health Insurance Assistance Program) training and remaining responsive to requests for additional trainings or educational sessions on topics identified by tribal members. By taking these steps, we aim to build stronger, sustainable relationships with tribal communities, ensure culturally responsive services, and enhance opportunities for collaboration, information sharing, and advocacy that directly benefit elders, caregivers, and tribal members throughout our region.

4. Opportunities to serve on advisory councils, workgroups and boards. AAAs please note whether your policy and advisory boards have tribal representation.

Currently, Senior Resources does not have tribal representation on any of our official boards. During this grant cycle, we will actively increase our efforts to engage tribal members in meaningful ways, including representation on our boards, participation in workgroups, and involvement in planning and providing input on any new or expanded programming. Our goal is to ensure that all perspectives include tribal perspectives are integrated into decision-making processes and that programming reflects the unique needs, priorities, and cultural values of tribal communities.

5. How service providers will provide outreach to Tribal elders and family caregivers regarding Title III services for which they may be eligible.

During this grant cycle, Senior Resources will prioritize proactive communication and engagement with tribal partners to enhance awareness and understanding of the full range of services available to older adults, caregivers, and tribal community members. This includes providing clear guidance on how to access services, understanding eligibility criteria, and explaining the variety of supports and resources offered through our programs. To support this effort, we will designate a workforce member as a tribal liaison, serving as a consistent point of contact for tribal communities. This role will facilitate communication, coordinate referrals, provide timely updates on programs and services, and ensure that any questions or concerns are addressed promptly.

By establishing a dedicated liaison and maintaining regular outreach, we aim to foster strong, trusting relationships with tribal partners, ensuring their perspectives are included in planning, program development, and decision-making. These efforts will strengthen collaboration and create more seamless pathways for tribal elders and their caregivers to access culturally responsive, equitable, and person-centered services. Through ongoing engagement, education, and partnership, Senior Resources seeks to build sustainable connections that enhance both access and quality of care, while honoring the values, traditions, and unique needs of tribal communities throughout our region.

6. Is there a Federally Recognized Tribe within your PSA?

Yes No

7. How Title VI programs may refer individuals for Title III services.

Two, The Little River Band of Ottawa Indians/Muskegon has a healthcare clinic in the region, and the Match-e-be-nash-she-wish Band of Pottawatomis provide services in part of Ottawa County.

8. Describe any current and future collaborative efforts with Tribe(s) within the PSA including any anticipated outreach efforts.

Senior Resources has sought to actively engaged with the Little River Band of Ottawa Indians in Muskegon and the Match-e-be-nash-she-wish Band of Pottawatomis, who provide services in Ottawa County, and will continue to strengthen these connections. During this grant cycle, we will expand engagement with tribal

STATE OF MICHIGAN
Michigan Department of Health & Human Services
BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS
FY2027-2029 Multi Year Plan

Senior Resources of West Michigan

FY 2027

communities by seeking representation on our Program and Planning Advisory Committee and full board , and by continuing invitations for participation in our Senior Advocates Coalition . These steps will ensure that tribal perspectives are fully integrated into program planning, decision-making, and policy guidance.

We will also enhance communication by identifying additional tribal contacts for inclusion in our email networks, providing timely updates on caregiver resources, newsletters such as Caregiver Link and The Compass, and urgent legislation affecting older adults and tribal members . Senior Resources will offer responsive training opportunities, including SHIP sessions and other workshops requested by tribal partners , to increase awareness of available services, eligibility requirements, and pathways to access support.

To support these efforts, we will designate a workforce member as a tribal liaison, serving as a consistent point of contact to facilitate communication, coordinate referrals, provide updates, and respond to questions or concerns. Through these strategies, we aim to foster trust, strengthen collaboration, and build sustainable partnerships. This approach ensures that services are culturally responsive, equitable, and person-centered, honoring tribal traditions and addressing the unique needs of tribal elders and their caregivers throughout our region.

FY 2025 AREA PLAN BUDGET

Senior Resources of West Michigan
 14

Date: 3/31/2026
 Budget Period: 10/1/2026

Rev No: 0
 to 9/30/2027

Area Plan Budget Overview

Area Plan Budget Summary	Federal/State Award	Other	Program Income	Cash Match	In-Kind Match	Grand Total
Administration	\$ 238,882	\$ -	\$ -	\$ -	\$ 40,000	\$ 278,882
Program Development & Coordination Activities	\$ 85,000	\$ -	\$ -	\$ -	\$ 9,000	\$ 94,000
AAA RD/Nutritionist	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Services	\$ 3,854,431	\$ 275,000	\$ -	\$ -	\$ 372,100	\$ 4,501,531
Total	\$ 4,178,313	\$ 275,000	\$ -	\$ -	\$ 421,100	\$ 4,874,413

Administration Budget

Administration Revenue	Federal / State / Other Administration	Local In-Kind Match	Grand Total
Federal	\$ 192,445	\$ 40,000	\$ 232,445
Title III Administration	\$ 192,445	\$ 40,000	\$ 232,445
State	\$ 46,437		\$ 46,437
State Administration	\$ 33,707		\$ 33,707
State Merit Award (MATF) Administration	\$ 12,730		\$ 12,730
Grand Total	\$ 238,882	\$ 40,000	\$ 278,882

Administration Expenditures	Amount	FTEs
Salaries/Wages	\$ 170,000	2.10
Fringe Benefits	\$ 58,000	
Office Operations	\$ 50,882	
Total	\$ 278,882	

Expenditures by Service & Fund Category

	39.03%	46.60%	6.11%	0.00%	8.27%	100.00%
Services	Federal	State	Medicaid	Program Income	Local	Grand Total
Access Services	\$ 241,185	\$ 295,378	\$ 275,000	\$ -	\$ 61,000	\$ 872,563
Care Management	\$ -	\$ 107,957	\$ 275,000	\$ -	\$ 12,000	\$ 394,957
Case Coordination & Support	\$ 116,185	\$ 187,421	\$ -	\$ -	\$ 34,000	\$ 337,606
Information & Assistance	\$ 50,000	\$ -	\$ -	\$ -	\$ 6,000	\$ 56,000
Transportation	\$ 75,000	\$ -	\$ -	\$ -	\$ 9,000	\$ 84,000
In-Home Services	\$ 63,000	\$ 947,660	\$ -	\$ -	\$ 84,000	\$ 1,094,660
Assistive Devices & Technologies	\$ 5,000	\$ 53,568	\$ -	\$ -	\$ 7,000	\$ 65,568
Friendly Reassurance	\$ 15,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 17,000
Homemaker	\$ 40,000	\$ 447,722	\$ -	\$ -	\$ 24,000	\$ 511,722
Medication Management	\$ 3,000	\$ 75,000	\$ -	\$ -	\$ 9,000	\$ 87,000
Personal Care	\$ -	\$ 371,370	\$ -	\$ -	\$ 42,000	\$ 413,370
Community Services	\$ 86,621	\$ 121,828	\$ -	\$ -	\$ 21,100	\$ 229,549
Elder Abuse Prevention	\$ 6,815	\$ -	\$ -	\$ -	\$ -	\$ 6,815
Health Promotion: Evidence-Based	\$ 34,185	\$ -	\$ -	\$ -	\$ 3,800	\$ 37,985
Legal Assistance	\$ 29,107	\$ -	\$ -	\$ -	\$ 3,300	\$ 32,407
Ombudsman	\$ 16,514	\$ 121,828	\$ -	\$ -	\$ 14,000	\$ 152,342
Nutrition Services	\$ 1,155,011	\$ 507,780	\$ -	\$ -	\$ 176,000	\$ 1,838,791
Congregate Meals	\$ 671,326	\$ 10,035	\$ -	\$ -	\$ 71,000	\$ 752,361
Home-Delivered Meals	\$ 458,685	\$ 497,745	\$ -	\$ -	\$ 102,000	\$ 1,058,430
Supplemental Nutrition Services - Oral Nutrition Supplements	\$ 25,000	\$ -	\$ -	\$ -	\$ 3,000	\$ 28,000
Caregivers of Older Adults Services	\$ 199,975	\$ 224,993	\$ -	\$ -	\$ 28,000	\$ 452,968
Adult Day Services	\$ 85,000	\$ 145,705	\$ -	\$ -	\$ 12,000	\$ 242,705
Caregiver Case Management	\$ 20,000	\$ -	\$ -	\$ -	\$ 3,000	\$ 23,000
Caregiver Education (use for Caregiver Outreach)	\$ 10,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 12,000
Caregiver Options Counseling	\$ 15,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 17,000
Caregiver Training	\$ 57,975	\$ -	\$ -	\$ -	\$ 7,000	\$ 64,975
Respite Care – In-Home Respite	\$ 12,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 14,000
Respite Care – Out-of-Home Respite (Day)	\$ -	\$ 79,288	\$ -	\$ -	\$ -	\$ 79,288
Older Relative (Kinship) Caregiver Services	\$ 11,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 13,000
Kinship Caregiver Respite Care	\$ 11,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 13,000
Grand Total	\$ 1,756,792	\$ 2,097,639	\$ 275,000	\$ -	\$ 372,100	\$ 4,501,531

Services Budget

Fund Sources	Access Services	In-Home Services	Community Services	Nutrition Services	Caregivers of Older Adults Services	Older Relative (Kinship) Caregiver Services	Grand Total
Federal	\$ 241,185	\$ 63,000	\$ 86,621	\$ 1,155,011	\$ 199,975	\$ 11,000	\$ 1,756,792
Title III-B Supportive Services	\$ 241,185	\$ 63,000	\$ 33,607	\$ 25,000	\$ -	\$ -	\$ 362,792
Title III-C1 Congregate Meals	\$ -	\$ -	\$ -	\$ 620,826	\$ -	\$ -	\$ 620,826
Title III-C2 Home-Delivered Meals	\$ -	\$ -	\$ -	\$ 418,254	\$ -	\$ -	\$ 418,254
Title III-D Preventive Health	\$ -	\$ -	\$ 34,185	\$ -	\$ -	\$ -	\$ 34,185
Title III-E National Family Caregiver Support	\$ -	\$ -	\$ -	\$ -	\$ 199,975	\$ 11,000	\$ 210,975
Title VII-A Ombudsman	\$ -	\$ -	\$ 12,014	\$ -	\$ -	\$ -	\$ 12,014
Title VII EAP Elder Abuse Prevention	\$ -	\$ -	\$ 6,815	\$ -	\$ -	\$ -	\$ 6,815
Nutrition Services Incentive Program (NSIP)	\$ -	\$ -	\$ -	\$ 90,931	\$ -	\$ -	\$ 90,931
State	\$ 295,378	\$ 947,660	\$ 121,828	\$ 507,780	\$ 224,993	\$ -	\$ 2,097,639
State Access Services	\$ 31,048	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31,048
State In-Home Services	\$ -	\$ 553,568	\$ -	\$ -	\$ -	\$ -	\$ 553,568
State In-Home Services (Direct Care Worker Pay)	\$ -	\$ 272,722	\$ -	\$ -	\$ -	\$ -	\$ 272,722
State Congregate Meals	\$ -	\$ -	\$ -	\$ 10,035	\$ -	\$ -	\$ 10,035
State Home Delivered Meals	\$ -	\$ -	\$ -	\$ 497,745	\$ -	\$ -	\$ 497,745
State Alternative Care	\$ -	\$ 121,370	\$ -	\$ -	\$ -	\$ -	\$ 121,370
State Aging Network Services	\$ 48,417	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 48,417
State Caregiver Support	\$ -	\$ -	\$ -	\$ -	\$ 16,984	\$ -	\$ 16,984
State Respite Care	\$ -	\$ -	\$ -	\$ -	\$ 79,288	\$ -	\$ 79,288
State Merit Award (MATF)	\$ -	\$ -	\$ -	\$ -	\$ 128,721	\$ -	\$ 128,721
State Nursing Home Ombudsman	\$ -	\$ -	\$ 21,545	\$ -	\$ -	\$ -	\$ 21,545
Michigan State Ombudsman	\$ -	\$ -	\$ 100,283	\$ -	\$ -	\$ -	\$ 100,283
State Care Management	\$ 215,913	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 215,913
Medicaid	\$ 275,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 275,000
Targeted Case Management	\$ 275,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 275,000
Program Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Program Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Local	\$ 61,000	\$ 84,000	\$ 21,100	\$ 176,000	\$ 28,000	\$ 2,000	\$ 372,100
Cash Match	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
In-Kind Match	\$ 61,000	\$ 84,000	\$ 21,100	\$ 176,000	\$ 28,000	\$ 2,000	\$ 372,100
Grand Total	\$ 872,563	\$ 1,094,660	\$ 229,549	\$ 1,838,791	\$ 452,968	\$ 13,000	\$ 4,501,531

Method of Service Provision

18.71%

47.69%

33.60%

100.00%

Services	Direct Services	Contracted Services	Purchased Services	Grand Total
Access Services	\$ 567,957	\$ 304,606	\$ -	\$ 872,563
Care Management	\$ 394,957	\$ -	\$ -	\$ 394,957
Case Coordination & Support	\$ 173,000	\$ 164,606	\$ -	\$ 337,606
Information & Assistance	\$ -	\$ 56,000	\$ -	\$ 56,000
Transportation	\$ -	\$ 84,000	\$ -	\$ 84,000
In-Home Services	\$ -	\$ 17,000	\$ 1,077,660	\$ 1,094,660
Assistive Devices & Technologies	\$ -	\$ -	\$ 65,568	\$ 65,568
Friendly Reassurance	\$ -	\$ 17,000	\$ -	\$ 17,000
Homemaker	\$ -	\$ -	\$ 511,722	\$ 511,722
Medication Management	\$ -	\$ -	\$ 87,000	\$ 87,000
Personal Care	\$ -	\$ -	\$ 413,370	\$ 413,370
Community Services	\$ 152,342	\$ 39,222	\$ 37,985	\$ 229,549
Elder Abuse Prevention	\$ -	\$ 6,815	\$ -	\$ 6,815
Health Promotion: Evidence-Based	\$ -	\$ -	\$ 37,985	\$ 37,985
Legal Assistance	\$ -	\$ 32,407	\$ -	\$ 32,407
Ombudsman	\$ 152,342	\$ -	\$ -	\$ 152,342
Nutrition Services	\$ -	\$ 1,763,791	\$ 75,000	\$ 1,838,791
Congregate Meals	\$ -	\$ 752,361	\$ -	\$ 752,361
Home-Delivered Meals	\$ -	\$ 983,430	\$ 75,000	\$ 1,058,430
Supplemental Nutrition Services - Oral Nutrition Supplements	\$ -	\$ 28,000	\$ -	\$ 28,000
Caregivers of Older Adults Services	\$ 121,975	\$ 9,000	\$ 321,993	\$ 452,968
Adult Day Services	\$ -	\$ -	\$ 242,705	\$ 242,705
Caregiver Case Management	\$ 23,000	\$ -	\$ -	\$ 23,000
Caregiver Education (use for Caregiver Outreach)	\$ 12,000	\$ -	\$ -	\$ 12,000
Caregiver Options Counseling	\$ 17,000	\$ -	\$ -	\$ 17,000
Caregiver Training	\$ 64,975	\$ -	\$ -	\$ 64,975
Respite Care – In-Home Respite	\$ 5,000	\$ 9,000	\$ -	\$ 14,000
Respite Care – Out-of-Home Respite (Day)	\$ -	\$ -	\$ 79,288	\$ 79,288
Older Relative (Kinship) Caregiver Services	\$ -	\$ 13,000	\$ -	\$ 13,000
Kinship Caregiver Respite Care	\$ -	\$ 13,000	\$ -	\$ 13,000
Grand Total	\$ 842,274	\$ 2,146,619	\$ 1,512,638	\$ 4,501,531

Access Services Expenditures by Fund Source

Service	Title III-B Supportive Services	State Access Services	State Aging Network Services	State Care Management	Targeted Case Management	In-Kind Match	Grand Total
Access Services	\$ 241,185	\$ 31,048	\$ 48,417	\$ 215,913	\$ 275,000	\$ 61,000	\$ 872,563
Care Management	\$ -	\$ -	\$ -	\$ 107,957	\$ 275,000	\$ 12,000	\$ 394,957
Case Coordination & Support	\$ 116,185	\$ 31,048	\$ 48,417	\$ 107,956	\$ -	\$ 34,000	\$ 337,606
Information & Assistance	\$ 50,000	\$ -	\$ -	\$ -	\$ -	\$ 6,000	\$ 56,000
Transportation	\$ 75,000	\$ -	\$ -	\$ -	\$ -	\$ 9,000	\$ 84,000
Grand Total	\$ 241,185	\$ 31,048	\$ 48,417	\$ 215,913	\$ 275,000	\$ 61,000	\$ 872,563

In-Home Services Expenditures by Fund Source

Service	Title III-B Supportive Services	State In-Home Services	State In-Home Services (Direct Care Worker Pay)	State Alternative Care	In-Kind Match	Grand Total
In-Home Services	\$ 63,000	\$ 553,568	\$ 272,722	\$ 121,370	\$ 84,000	\$ 1,094,660
Assistive Devices & Technologies	\$ 5,000	\$ 53,568	\$ -	\$ -	\$ 7,000	\$ 65,568
Friendly Reassurance	\$ 15,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 17,000
Homemaker	\$ 40,000	\$ 175,000	\$ 272,722	\$ -	\$ 24,000	\$ 511,722
Medication Management	\$ 3,000	\$ 75,000	\$ -	\$ -	\$ 9,000	\$ 87,000
Personal Care	\$ -	\$ 250,000	\$ -	\$ 121,370	\$ 42,000	\$ 413,370
Grand Total	\$ 63,000	\$ 553,568	\$ 272,722	\$ 121,370	\$ 84,000	\$ 1,094,660

Community Services Expenditures by Fund Source

Service	Title III-B Supportive Services	Title III-D Preventive Health	Title VII-A Ombudsman	Title VII EAP Elder Abuse Prevention	State Nursing Home Ombudsman	Michigan State Ombudsman	In-Kind Match	Grand Total
Community Services	\$ 33,607	\$ 34,185	\$ 12,014	\$ 6,815	\$ 21,545	\$ 100,283	\$ 21,100	\$ 229,549
Elder Abuse Prevention	\$ -	\$ -	\$ -	\$ 6,815	\$ -	\$ -	\$ -	\$ 6,815
Health Promotion: Evidence-Based	\$ -	\$ 34,185	\$ -	\$ -	\$ -	\$ -	\$ 3,800	\$ 37,985
Legal Assistance	\$ 29,107	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,300	\$ 32,407
Ombudsman	\$ 4,500	\$ -	\$ 12,014	\$ -	\$ 21,545	\$ 100,283	\$ 14,000	\$ 152,342
Grand Total	\$ 33,607	\$ 34,185	\$ 12,014	\$ 6,815	\$ 21,545	\$ 100,283	\$ 21,100	\$ 229,549