

2017—2019 Multi Year Plan
FY 2019 ANNUAL IMPLEMENTATION PLAN
U.P. AREA AGENCY ON AGING UPCAP SERVICES, INC. 11

DRAFT



Planning and Service Area

Alger, Baraga, Chippewa, Delta,
Dickinson, Gogebic, Houghton, Iron,
Keweenaw, Luce, Mackinac, Marquette,
Menominee, Ontonagon, Schoolcraft

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County/Local Unit of Govt. Review

UPCAP's responsibility as the administrator for the Upper Peninsula Association of County Commissioners plays a vital role in the agency's overall ability to address the needs of older adults, particularly as these needs impact county government activities. This has been very advantageous in terms of guiding decisions related to local funding for senior programs and decisions to pursue local senior millage elections. A copy of the final proposed FY 2019 Annual Implementation Plan will be presented to UPCAP's Board of Directors at their meeting on June 22, 2018 requesting formal resolution of approval. Information on the plan will then be sent via certified mail to the chairperson of each of the 15 County Board of Commissioners within the region by July 1, 2018 requesting approval of the plan as written by July 31, 2018.

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

In 1974, UPCAP Services, a non-profit multi-purpose human services organization, was designated as the Upper Peninsula Area Agency on Aging (UPAAA). A 21-member Board of Directors and a 18-member Advisory Council assist the UPAAA in accomplishing its mission of serving the U.P. elderly. The UPAAA's Board of Directors is composed of senior citizens, elected officials, leading local citizens representing U.P. counties, and other members of the private sector. In addition, the Board appoints an Advisory Council, composed primarily of senior citizens age 60 and older, who are eligible participants in programs under the Area Agency's Area Plan. Advisory Council members also include individuals representing the low-income elderly, those with disabilities, minority groups, health care and advocacy organizations, and the general public. These individuals meet at least six times a year to advocate for senior programs and needs, conduct public hearings, aid in the development of the Area Plan, and review and comment on policies, programs, and legislation affecting the elderly.

The UPAAA is a regional focal point for aging services and programs for persons with disabilities. The mission of the Area Agency on Aging is to serve as a leader relative to all aging issues on behalf of older persons in the 15 counties of the Upper Peninsula of Michigan. With the help of its partners, the UPAAA carries out a wide range of functions related to advocacy, planning, coordinating, inter-agency linkages, resource and program development, information sharing, brokering, monitoring and evaluation; and is designed to lead to the development of comprehensive and coordinated systems serving each community within the region. These systems are intended to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities for as long as possible.

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

According to the U.S. Census Bureau's latest American Community Survey, there are almost 83,000 older adults eligible for services in Michigan's Upper Peninsula. The U.P. is comprised of 16,452 square miles, about one-third of the State's land area. Yet the U.P.'s population comprises only about 3% of the State's total population. This equates to a population density of approximately 19 persons per square mile. This has always created unique challenges in providing services to those needing them in this region and proves to become more challenging as our population becomes older and more frail, and as the workforce declines. According to the U.S. Census Bureau, demographic trends over the past few years show an increase of those age 60+, with a subset of those folks age 85 and older also increasing. Yet those in the workforce (age 40-60 years of age) are declining, as is the overall population of the PSA for all ages.

Demographic trends indicate that as time goes on, the numbers of adults age 85+ will continue to increase while those in the workforce will decrease. The challenge will be for the UPAAA to continue to provide leadership in advocacy and education throughout the PSA, engaging its partners and the communities we serve to think and act creatively in the coming years so that older adults and those with disabilities can remain in their own homes throughout their lifespan, if they so choose.

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

The UPAAA studies needs among the elderly and those with disabilities within the region, and prioritizes

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services to meet those needs. The Area Plan provides for development of a comprehensive, coordinated service delivery system, outlines fundable services for the elderly, and summarizes activities of the AAA. The five programs serving the most participants are 1) congregate meals, 2) home-delivered meals, 3) homemaker, 4) home care assistance, and 5) respite. Conversely, the programs utilizing the most funding are as follows, in order of expenditures: 1) home-delivered meals, 2) congregate meals, 3) respite, 4) homemaker, and 5) home care assistance. Additional services to be provided by the UPAAA and its partners in 2016 include:

- Information & Assistance
- Care Management
- Chore Service
- Home Injury Control
- Nursing Services
- Adult Day Services
- Transportation
- Disease Prevention/Health Promotion
- Legal Assistance
- Long-term Care Ombudsman
- Programs for Prevention of Elder Abuse, Neglect & Exploitation
- Kinship Support Services
- Caregiver Education, Support, and Training
- Creating Confident Caregivers

4. Highlights of planned Program Development Objectives.

The UPAAA's Plan sets forth five Program Development Objectives for which significant efforts will continue to be applied to meet the growing and emerging needs of the region's older adults. A brief synopsis of each are as follows:

1. More communities within the region will conduct an aging-friendly community assessment and apply for recognition to the Aging & Adult Services Agency (AASA) as a Community for a Lifetime: the objective is to assist at least one additional community within the PSA to conduct an aging-friendly community assessment and apply for recognition to the Aging & Adult Services Agency (AASA) as a Community for a Lifetime.
2. Identify and implement strategies to ease the shortage of competent direct care workers in the region: the objectives are to assist in the recruitment and training of direct care workers, as well as advocating for their economic stability in order to retain good workers who can meet the needs of a growing older population.
3. Enhance the caregiver experience, and thus their effectiveness, by providing improved access to information, support and resources: the objective for this goal is to develop new and creative ways to meet the needs of family caregivers so that they can successfully care for their loved ones at home, as well as for themselves.
4. Protect older adults from abuse, neglect, and exploitation: the objective is to increase community awareness and understanding of elder abuse issues and how to report suspected cases of abuse, so that the incidents of abuse towards older adults in the region will decrease.
5. Ensure that older adults have a choice in where they live through increased access to information and services: the objective is that by using the principles of person-centered planning, more services and options will be

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available to consumers, allowing them to live as independently as possible and assure that they have choices in where they live.

5. A description of planned special projects and partnerships.

The UPAAA has always placed great emphasis on the development and preservation of strong partnerships to meet the needs of older adults in the most cost-effective and practical way. Special projects with partners in which we are currently participating are as follows:

--Veterans Self-Directed Care Program: partnering with the Veterans Administration to provide self-directed assessments and care planning to veterans facing long term care needs.

--Senior Reach Initiative: partnering with Copper Country Mental Health to identify isolated, at-risk older adults to offer them behavioral health and care management services, and connect them to other community services so they can live independently in their own homes.

--Diabetes Prevention Program: partnering with Public Health of Delta and Menominee Counties to provide this program to anyone in these areas who would like to know how to better manage their health and prevent Type 2 Diabetes.

UPCAP has also played a role in Michigan's Dual Eligible Medicaid/Medicare Integrated Care (IC) initiative. UPCAP will continue to engage and build on its relationships with key stakeholders of the IC. Additionally, UPCAP has had a long-lasting and viable relationship with the Superior Alliance for Independent Living (SAIL, the U.P. CIL), working together on many projects, including the ADRC of the U.P., the Nursing Facility Transition Program and many others. The UPAAA Executive Director is a member of the SAIL Board and the SAIL Executive Director is a member of the UPAAA Policy Board. The goal of both agencies is to provide a seamless and integrated service delivery system to older adults and those with disabilities across the continuum.

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

Increased efficiency in service delivery and program management is a continual goal for the UPAAA. The AAA continues to work to increase the effectiveness and efficiency of services provided to older adults throughout the region by promoting open dialogue and technical assistance to its partners through the quality assurance process, and through regularly scheduled meetings, collaboratives, and advisory groups. Additionally, a concerted effort continues to be made to help nutrition partners better manage the rising costs of providing both congregate and home-delivered meals in a vastly rural area.

The UPAAA has received accreditation from the American Association of Diabetes Educators and is a Medicare certified provider for diabetes education. Additionally, the AAA plans to seek national recognition status from the Centers for Disease Control and Prevention for its National Diabetes Prevention Program, which started in 2016. This will help to generate income to sustain these programs, as well as to continue to promote health education and wellness to those at risk for Type 2 Diabetes.

While the AAA was working towards CARF accreditation, it was determined that the process and final result may not as beneficial as was initially thought. The AAA is currently pursuing the viability of becoming accredited through the National Committee for Quality Assurance, as this may prove to be the most advantageous path in the future.

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

The AAA's strategy for developing non- or underfunded programs and providing necessary resources will continue by entering into Memorandums of Understanding with partner agencies to promote and manage various programs in creative ways. These MOUs promote the utilization of volunteers to provide EBDP programs, MMAP and LTC Ombudsman services in particular. It remains a challenge to appropriately manage, train, and supervise these volunteers and programs with the limited funding allowed, as each require specific requirements and skill sets.

UPCAP, as a multi-purpose non-profit organization, administers a variety of other programs which positively impact on the UPAAA's purpose and mission. UPCAP continually encourages utilization of its region-wide AIRS accredited 2-1-1 Information and Referral System as a gateway for all programs and resources available in the PSA. Almost one-half of the calls received by the Call Center are request for information or assistance related to long-term care, care giving, and housing issues. Other programs supporting the UPAAA's mission include congregate housing development/management and the Mediation Program, which resolves disputes and disagreements between parties (i.e. landlord-tenant, medical billing, caregiver issues, etc). Working together across the agency and with all of our community partners will help to increase capacity and, at the very least, maintain important programs and services that the UPAAA provides.

8. Highlights of strategic planning activities.

In an effort to collect the information necessary to create a meaningful and hopefully successful multi-year plan for services to older adults, the UPAAA staff meets with community partners at least quarterly to discuss trends, issues, and opportunities concerning the delivery of needed/requested goods and services to older adults throughout the region. The AAA Advisory Council is also a sounding board, advocating for the needs of older adults in the region, and meets bi-monthly to plan and strategize how best to meet those needs in the most cost-effective manner.

Additionally, the UPAAA conducted 7 public forums in March and April 2016 in several areas of the region to garner input from older adults themselves. During these forums, an informal discussion was held to review services that are available, as well as those that might not be. People in attendance discussed their gratitude for services received, but also shared concerns for those services that are not available, those they felt were necessary to maintain their own homes. Participants at these forums were also asked to complete a needs assessment survey to help track their needs and wants for the AAA planning process. This survey was also provided to area senior centers, community partners, and also available on-line at the agency's website.

Finally, key AAA staff met several times to discuss input received from all sources, and worked together to identify the strengths and weaknesses of the agency, the needs and wants of older adults and those with disabilities the community, and to develop a plan to best serve them in the coming years.

9. FY 2018 AIP Highlights: Description of any significant new priorities, plans or objectives.

The UPAAA is committed to ensuring that the current goals and objectives of the MYP are met. Due to the uncertainty of the current economic and political climate, there are currently no new program objectives or major changes to the UPAAA area plan this time. We do believe that access to new grant opportunities will help us meet our current objectives, so there are plans to support and participate in new initiatives as they become available. We have recently become a partner with other Area Agencies on Aging to apply for the Administration

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for Community Living's (ACL) Chronic Pain Self-Management Program, and have now partnered with the MSU Extension to seek a Falls Prevention grant (also offered by ACL) that will promote and provide Tai Chi for Arthritis in this region.

The UPAAA continues to work to increase the effectiveness and efficiency of services provided to older adults throughout the region by promoting open dialogue, technical assistance, and training to its partners. The UPAAA has already received accreditation from the American Association of Diabetes Educators and is a Medicare certified provider for diabetes education. We are currently working to seek national recognition status from the Centers for Disease Control and Prevention for its National Diabetes Prevention Program. This will help to generate income needed to sustain these programs, as well as to continue to promote health education and wellness to those at risk for Type 2 Diabetes.

We will continue to encourage and preserve strong partnerships in order to help us grow existing programs and begin new projects where feasible to help meet the needs of older adults in the most cost-effective and practical way possible, thus fulfilling our mission to advocate for and provide services to older adults residing in the Upper Peninsula so they can lead independent, meaningful and dignified lives in their own homes and communities for as long as possible.

2019 AIP Highlights

The UPAAA is committed to ensuring that the current goals and objectives of the MYP are met. Due to the uncertainty of the current economic and political climate, there are currently no new program objectives or major changes to the UPAAA area plan this time. In the event that a reduction in federal funding occurs, the UPAAA would look to local millage and state funding sources to maintain levels of service to the extent possible to deal with temporarily reduced funding levels. If reductions become permanent, service level reductions and cuts would occur with low-income, high need consumers protected as is feasible.

We believe that access to new grant opportunities will help us meet our current objectives, and there are plans to support and participate in new initiatives as they become available. We continue to partner with the MSU Extension to seek a Falls Prevention grant (also offered by ACL) that will promote and provide Matter of Balance and Tai Chi for Arthritis in this region. We are working with several of the region's hospital trauma centers and also the Hannahville Tribe to promote Matter of Balance via grants they have received for fall prevention. We are seeking out additional grant funding through the MI Health Endowment Fund to grow the Respite Education & Support Tools (REST) program and Powerful Tools for Caregivers in order to assist more family caregivers to cope and sustain their caregiving duties.

The UPAAA continues to work to increase the effectiveness and efficiency of services provided to older adults throughout the region by promoting open dialogue, technical assistance, and training to its partners. The UPAAA has already received accreditation from the American Association of Diabetes Educators and is a Medicare certified provider for diabetes education. We are currently working to seek national recognition status from the Centers for Disease Control and Prevention for its National Diabetes Prevention Program. This will help to generate income needed to sustain these programs, as well as to continue to promote health education and wellness to those at risk for Type 2 Diabetes.

We are requesting to provide Kinship Support Services as a direct service this year, as we feel we can better meet the needs of kinship families throughout the U.P. needing this support. Currently, we only have a few partner agencies in 4 of the region's 15 counties willing to assist with this service as there are no funds available to cover the administrative costs of providing this funding to families. We feel that by using UPCAP's 2-1-1 Call Center we will be able to provide support to kinship families in any part of the region; this will also help to ensure they get information and connections to other services that may be helpful to them.

UPCAP is committed to ongoing advocacy efforts to help promote the safety and wellbeing of older adults in our region. Resolutions that have been adopted by the UPAAA in the past fiscal year included sustaining/increasing the 2018 federal budget, MMAP/SHIP funding and support, and protecting the MI Choice Waiver program, all of which resulted in favorable outcomes. The UPAAA will continue to advocate for funding for non-emergency medical transportation, increased housing options, adequate 2019 federal and state budgets, and increasing direct care worker wages. We will also continue to encourage and preserve strong partnerships in order to help us grow existing programs and begin new projects where feasible to help meet the needs of older adults in the most cost-effective and practical way possible, thus fulfilling our mission to advocate for and provide services to older adults residing in the Upper Peninsula so they can lead independent, meaningful and dignified lives in their own homes and communities for as long as possible.

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Access Services

Information and Assistance

<u>Starting Date</u>	10/01/2018	<u>Ending Date</u>	09/30/2019
Total of Federal Dollars	\$70,000.00	Total of State Dollars	\$0.00

Geographic area to be served

15 Counties of the Upper Peninsula

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

Goal: Over the course of the multi-year planning period, the UPAAA will increase awareness and improve access to available resources for caregivers, family members, and older adults, including individuals living in isolated and rural areas.

Activities:

- UPCAP is working closely with Michigan 2-1-1 and the other six call centers in Michigan to enhance and improve the database and resources by upgrading to a new platform that will be able to provide resources to be sent via text message and email. We will continue to update the region's comprehensive data base using AIRS Taxonomy following Michigan 2-1-1's protocol to ensure the system is accurate and current.
- I & A staff will continue to coordinate with Emergency Management Coordinators for all 15 counties via the U.P. 911 Authority in regards to its role in the event of a national or regional disaster. Memorandums of Understanding have been developed between the 2-1-1 program and the region's emergency management systems which detail the UPAAA's role in the coordination of essential and necessary services in the event of a disaster.
- Continue conducting a public relations campaign across the region to inform the public of the 2-1-1 Information and Assistance Call Center, increasing its call volume by 10% over the next fiscal year as a result of additional television and radio advertising, and other public relation events. The Call Center will also increase access to information and assistance through the addition of a texting option.
- UPCAP is also coordinating with six other call centers throughout Michigan in a statewide advertising campaign that will include providing I & A for long term care options, basic human needs, and veteran's resources.

Care Management

<u>Starting Date</u>	10/01/2018	<u>Ending Date</u>	09/30/2019
Total of Federal Dollars	\$47,000.00	Total of State Dollars	\$537,382.00

Geographic area to be served

15 Counties of the Upper Peninsula

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

Goal: Over the course of the multi-year planning period, the UPAAA will assist individuals needing nursing

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facility level of care to remain at home through the provision of Care Management, utilizing a person-centered planning/self-directed care process. This includes caregiver case management using the T-Care model, and the Veteran's Self-Directed Home and Community-Based Program in partnership with the Veterans' Administration Medical Center (VAMC) in Iron Mountain, MI. The information below for the current year is accurate through 5/1/18.

Activities:

1.1. The UPAAA will continue to utilize Older Michiganians Act (OMA) resources to provide comprehensive, person-centered Care Management services to individuals who screen eligible for Long Term Care Supports and Services (LTSS) via a standardized screening process. In 2019, the UPAAA will conduct approximately 200 screenings of individuals requesting LTSS, and conduct initial assessments for an estimated 175 individuals screening eligible for LTSS. The UPAAA will open active case activities for an estimated 150 individuals who meet the Nursing Facility Level of Care (NFLOC) criteria for LTSS, initiating 150 person-centered support and services plans.

2. The UPAAA will utilize Older Americans Act (OAA) and OMA resources to provide comprehensive, person-centered case management services to caregivers of older adults with Alzheimer's Disease or other forms of dementia or who are otherwise burning out from the demands of providing informal supports to those older adults needing extensive LTSS. The UPAAA has had to halt T-Care activities as all care managers trained in T-Care have either retired, taken on other job responsibilities or left the agency. UPCAP is in the process of recruiting new care managers to undergo training so that we may continue the T-Care screening process for caregivers in the following multi-year planning cycle.

3. The UPAAA will continue to work with the local VAMC to provide person-centered, self-directed long term supports and services to eligible veterans throughout the Upper Peninsula and northeastern Wisconsin. The UPAAA will conduct assessments and develop appropriate supports and service plans for all veterans referred and whom are willing to utilize a self-directed approach to LTSS. The agency is currently serving 52 veterans under the Veterans Self-Directed Care Program.

Number of client pre-screenings:	Current Year:	110	Planned Next Year:	200
Number of initial client assessments:	Current Year:	84	Planned Next Year:	175
Number of initial client care plans:	Current Year:	78	Planned Next Year:	150
Total number of clients (carry over plus new):	Current Year:	130	Planned Next Year:	180
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:17	Planned Next Year:	1:18

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Direct Service Request

Kinship Support Services

Total of Federal Dollars \$14,300.00 Total of State Dollars \$0.00

Geographic Area Served 15 Counties of the Upper Peninsula

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

Goal: Over the course of the multi-year planning period, the UPAAA will increase awareness and improve access to available resources for Grandparents and others caring for a relative's child(ren).

Activities:

1. The UPAAA will continue to update the region's comprehensive 2-1-1 data base to ensure the system has up to date referral sources.
2. The UPAAA will work closely with 2-1-1 to prescreen kinship care applicants and provide additional referrals to supportive services when available.
3. UPAAA will continue to work with partnering agencies (Senior Centers, Community Action Agencies, etc.) to promote the kinship program.
4. The UPAAA will conduct a public relations campaign across the region to inform the public of the Kinship Program and the supportive services it can provide.
5. The UPAAA will utilize Title 3E resources to provide kinship services or goods to eligible grandparents and other relatives throughout the Upper Peninsula. The UPAAA anticipates receiving/processing approximately 50 applications annually.

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.

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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.

Kinship Support Services included as part of the UPAAA's administrative activities is a way to streamline the application process and increase efficiency of the program. By reducing the number of channels the applications and funds must go through, we will be able to address urgent matters kinship families may have in a much more timely manner. The UPAAA will also be able to increase accessibility to kinship resources while assuring fair and reasonable distribution of funds throughout the Upper Peninsula. New processes will also be put in place to reduce the chances of fraud, waste, and abuse of kinship funds.

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

Approved MYP Program Development Objectives

Area Agency on Aging Goal

A. More communities within the region will conduct an aging-friendly community assessment and apply for recognition to the Aging & Adult Services Agency (AASA) as a Community for a Lifetime.

State Goal Match: 5, 6

Narrative

The demographic transition underway in the region will require that organizations and individuals take action to support independent, healthy aging for older adults. There are many potential stakeholders who are either unaware of the dramatic increase to the older adult population, or do not fully understand the magnitude of the impact. Ensuring that our region can support healthy aging is a priority, by implementing appropriate solutions in a variety of unique and vastly rural settings. Communities for a Lifetime (CFL) promotes linkages between the aging network, municipalities and private partnerships to assess and promote the aging-friendliness of a community. To this end, the UPAAA will work to recruit and support a network of local leaders who will work within their communities to promote programs and services that will meet the needs of older adults, their families, and caregivers; attract and retain more residents and be able to provide them with a better quality of life.

Objectives

1. One new community within the PSA will receive recognition as a Community for a Lifetime by 9/30/2019.
Timeline: 10/01/2016 to 09/30/2019

Activities

1. Working closely with the AAA Executive Board and area partners, identify at least one community that has an interest and the resources to conduct an aging friendly community assessment in their area, formulating a workgroup consisting of public and private participation and representation by older adults for this purpose.
2. The workgroup will meet to plan steps and strategies to conduct the required assessment within the first 12 months of the process.
3. Once the assessment is completed, the workgroup will identify the communities strengths and weakness, and develop an action plan for making improvements and promoting assets for both short-term and long-term goals. The steps within the action plan will be prioritized based on the group's recommendations.
4. The completed application with all pertinent documentation will be submitted to AASA by December 1, 2017, or as soon thereafter as possible.
5. The UPAAA will assist any other community within the PSA willing and able to complete the CFL process.

Expected Outcome

Through the CFL assessment and recognition process, at least one additional city or community within the region will be identified as aging-friendly, promoting a better quality of life for older adults choosing to remain in that community through their lifespan.

Progress

Due to circumstances beyond UPCAP's control, the Marquette County Community for a Lifetime Task Force has been dismantled. We are currently looking at a new plan of action in Marquette County to conduct the Community for a Lifetime (CFL) assessment. UPCAP's director will be meeting soon with a Marquette County Commissioner

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to discuss potential cities in Marquette County in which to conduct the CFL assessment. Once a potential city is determined, putting together a new task force will be the next step. We still have a few members of the original task force that are willing to participate. If we are unsuccessful in pursuing a city in Marquette County, we will look at other communities that might potentially be more interested and better suited to the Communities for a Lifetime project.

B. Enhance caregiver efficacy by providing improved access to information, support and resources.

State Goal Match: 3

Narrative

As the population ages and more people are being cared for by family or other informal caregivers, the UPAAA is looking for ways to better support these caregivers with education, training, and services. We know that caregiver burnout is often the reason why many individuals with dementia end up in long term care facilities prematurely. Also, the lack of sufficient resources in many rural areas makes it difficult to provide respite and other necessary services to help families successfully caregive for longer periods of time. Many agencies who provide these services are concerned about the ability to pay for workers who are well-trained and capable of working with dementia clients; retaining good workers like this is extremely difficult when funding does not allow for a comparable wage. The UPAAA acknowledges these issues and will work to come up with new and creative ways to meet the needs of family caregivers so that they can successfully care for their loved ones and themselves.

Objectives

1. The UPAAA will research, support and participate in new programs and initiatives that will provide more services and supports to allow families and caregivers to successfully care for their loved ones at home.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. The UPAAA will participate in the evidence-based Alzheimer's Disease Initiative-Specialized Supportive Services project which will help expand the availability of dementia-capable support services for person's with dementia, their families, and their caregivers.
2. The UPAAA will work to bring the Respite Education and Support Tools (REST) program to the region. This program focuses on creating a network of trained volunteer REST Companions to help provide respite to family caregivers in a cost-effective manner.
3. The UPAAA will continue to pursue funding to develop and/or provide dementia training to community organizations and the general public so that they may have a better understanding of the disease process and are able to make appropriate referrals to services.

Expected Outcome

Families and informal caregivers will receive the repite and support they need to caregive successfully and enjoy a better quality of life.

Progress

The UPAAA continues to participate in the Alzheimer's Disease Initiative-Specialized Supportive Services grant, which is in its' second year of funding. We have created a survey utilized by the U.P. 2-1-1 outreach staff to help identify potential dementia/memory issues in callers and/or the needs of family caregivers when calling for assistance. Call specialists offer information and referrals to programs and resources that may assist them, and provide follow-up calls to ensure their needs are met. Care management staff have also been trained on how they

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can better assess & identify needs that caregivers may have. In addition, we have provided two 'Brain Health' and three Basic Dementia Education sessions to agency staff and others within the region. These presentations have reached 65 individuals in a variety of settings in an effort to expand on the Initiative and encourage dementia-friendly communities.

With the help of a MI Health Endowment fund grant, the UPAAA now has two staff members who have successfully completed certification as Master Trainer for REST. In the past fiscal year these two REST Master Trainers and 7 REST leaders conducted 16 workshops within the region, training 105 REST companions in 6 of 15 counties. Two UPAAA staff members were also recently certified as leaders in the Powerful Tools for Caregivers program. Powerful Tools for Caregivers was developed as a 6-week educational program designed to help family caregivers better care for themselves while caring for a relative or friend. Two workshop series have already been planned in the coming months, and these two leaders will eventually become certified as Master Trainers in this program. The UPAAA continues to seek out and pursue additional funding to help sustain - and more importantly grow - these important programs in order to assist as many caregivers in our 15-county region as possible.

2. The Creating Confident Caregivers program will be maintained and potentially expanded to reach more family caregivers caring for their loved ones with Alzheimer's Disease and related dementias.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Recruit and train an additional 2-3 new CCC leaders to reach more family caregivers, especially those in currently underserved areas of the region.
2. Conduct at least 30 workshops throughout the PSA, with the goal of 200 caregivers successfully completing the class.
3. Continue to partner with in-home service providers, medical clinics, churches, adult day care centers, and others to help promote the program and identify family caregivers who could benefit from the class.

Expected Outcome

Family caregivers whose loved ones have Alzheimers Disease or other related dementia will have a better understanding of the disease process and learn ways to cope with this progressive illness in a more positive manner.

Progress

The UPAAA continues to provide the Creating Confident Caregivers program to family members caring for a family member living at home with dementia or other memory loss issues. In this past fiscal year 3 six-week workshops were held, reaching 56 caregivers. It has been difficult to recruit and plan additional classes as many family members feel they cannot devote so much time to the program, away from their caregiving duties. And while we certainly believe that Creating Confident Caregivers is a valuable program, it appears to be a bit too narrow in scope, especially as it regards to those who are allowed to attend. For instance, many caregivers would like to take the class but are not caring for someone who actually has a diagnoses of dementia or other memory loss; or perhaps their loved one lives in an alternative setting; or, they may be a caregiving friend that wants to help their neighbor, etc. We are hopeful that bringing Powerful Tools for Caregivers to the region in the coming months will help meet the needs many of our informal caregivers have.

3. The UPAAA will continue to encourage and assist in-home services agencies to provide training to direct care workers so that they can better serve family caregivers, especially those caring for loved ones with dementia.

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Timeline: 10/01/2016 to 09/30/2019

Activities

1. The UPAAA will continue to provide training to contracted partner agency staff via the Building Training, Building Quality Initiative (BTBQ).
2. The UPAAA will continue to provide training to contracted partner agency staff on the Prevention of Elder Abuse, Neglect, and Exploitation (PREVNT).
3. The UPAAA will work to encourage and advocate for professionalization of direct care workers trained in working with dementia patients.

Expected Outcome

A well-trained direct care workforce will be easier to retain and will provide a higher quality of care to family caregivers and their loved ones.

Progress

The UPAAA has a number of certified trainers in many programs that will assist in-home care staff become better caregivers. We routinely encourage the region's provider agencies to request & host trainings for their staff such as Building Training, Building Quality (BTBQ) and its Daily Skills & Nutrition components, Training to Prevent Abuse & Neglect (TPAAN), REST, Powerful Tools for Caregivers, and others. Several partner agencies have hosted and/or allowed their staff to attend several of these training programs this past year.

The UPAAA will continue to offer and conduct these trainings as requested and continue to support agencies to have their own staff certified as trainers in these programs.

4. The UPAAA will continue to participate in the assessment, identification, and planning of services needed by persons with dementia and their caregivers.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. The UPAAA will continue to identify and assess caregiver needs through Options Counseling and Care Management. Referrals will be made to T-Care where appropriate to address those needs.
2. Partner agencies conducting assessments for OAA funded services will be encouraged to refer family caregivers to care management services and the T-Care process.

Expected Outcome

Family caregivers, especially those dealing with dementia-related illness, will receive the guidance, support, and services they need to improve their quality of life and be successful caregivers.

Progress

The UPAAA continues to identify and assess caregiver needs through Options Counseling and Care Management. As mentioned earlier, a survey has been developed for the 2-1-1 Call Center staff to utilize when speaking to family caregivers about their needs and wants, and to provide the specific information and resources they might need to help them with providing care to their loved ones. Additionally, partner agencies conducting assessments for OAA funded services are routinely encouraged to refer family caregivers to 2-1-1 and care management services for further information and assistance.

C. Protect older adults from abuse, neglect, and exploitation.

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State Goal Match: 4

Narrative

Abuse and neglect of vulnerable adults is not always intentional, nor is it always recognized as abuse. Providing critical information about elder abuse and neglect to the public, including what abuse is, residents' rights, Medicare fraud, where to report it and how to prevent it may help reduce the incidents of abuse, neglect and fraud, and will help to ensure that any potential incidents are reported to the proper authorities.

Objectives

1. Assure visibility and access of the Long Term Care Ombudsman.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Increase awareness of the Ombudsman program through presentations at resident and family council meetings and distribution of program materials to residents, family members, and other interested parties. The ombudsman will provide information to the public through print and local media, participation in health fairs, and in consultation with local agencies.
2. Promote and provide training on the ombudsman program, resident's rights, elder abuse and other topics of interest to facility staff of long-term care facilities as needed and requested throughout the region.
3. The Ombudsman Program Manager will continue to train competent volunteer Ombudsman throughout the region, so that at least one volunteer Ombudsman is retained and available in each county, and to enhance the visibility, availability, and effectiveness of local services.
4. The Ombudsman will continue to participate in regularly scheduled Quality Assurance Collaborative meetings to provide input on LTC issues related to residents' rights and issues facing participants in long-term care programs/facilities.

Expected Outcome

Ensure that residents understand their rights and know where to go for help if they feel they are being abused, neglected, or exploited in any way. Additionally, staff working in long term care facilities will receive appropriate and effective training on the prevention of elder abuse, and will understand their duties as mandatory reporters, thus improving the quality of life for the people in their care.

Progress

Upon Resident Council members' permission, the Ombudsman and six volunteers attend Resident Council meetings as they occur. Most often the Ombudsman conducts a short introduction of the program and what the Ombudsman's duties are as a resident advocate. The Ombudsman and/or volunteers address any questions or concerns that pertain to resident care or the quality of care within the facility. Generally the topics that are discussed as a group are about therapies, administration, dietary, activities, and nursing. Members of the group are also informed that they can speak with the Ombudsman and/or volunteers in private if they wish to do so. The Ombudsman and/or volunteers have made efforts to encourage more facilities across the U.P. to promote family council meetings. However, many family members have stated that they feel their issues and concerns are being addressed appropriately and do not feel the need for a family council.

The Ombudsman and volunteers have made available brochures on various topics to staff, residents and families. Brochures include: Resident Rights, Your Rights as a Resident in a Long Term Care Facility, 211 brochures, mediation brochures, and Ombudsman brochures. Since October 2017, Ombudsman and/or volunteers have

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visited over 156 residents who are located in our long term care facilities' across the Upper Peninsula. The Ombudsman Program has filed over 15 formal complaints with the state investigative team.

The U.P. Ombudsman Program has gratefully been able to retain six long-standing volunteers, and has obtained two new volunteers in this past year. Training for new volunteers is provided by the U.P. Long Term Care Ombudsman with help from the State Ombudsman office. The U.P. Ombudsman Program continues to educate all volunteers at least quarterly at the local level, as well as supporting their involvement in training offered by the State Ombudsman Office. The State Ombudsman Office has become highly involved in making sure not only our local Ombudsman are effectively trained but that all the volunteers have the continued training and support they need to effectively advocate for the residents.

2. Increase community awareness and understanding of elder abuse, neglect, and financial exploitation across the region.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Using PREVNT, Promote and provide updated training and education programs to senior centers, nursing homes, adult foster homes and other agencies providing services to older adults, as requested.
2. Also using PREVNT, educate the public via community seminars at churches, civic organizations, senior centers, places of business, and others to explain what elder abuse, neglect and exploitation is, and how to report suspected abuse to local authorities.
3. Continue to provide public service announcements about elder abuse and how to report it via newspaper articles, television commercials, and other forms of media.
4. Work with the Ombudsman program to train the Region's Ombudsman volunteers on how to conduct elder abuse presentations to families and caregivers of older adults and those with disabilities in long term care facilities.

Expected Outcome

Service providers and the general public will become more aware of residents' rights and elder abuse issues and the incidents of abuse towards older adults in the region will decrease.

Progress

Although the Ombudsman Program is no longer involved in PREVNT since the grant ended in 2017, the Ombudsman continues to educate and present workshops on elder abuse, financial exploitation and neglect of elders when the request is received. The Ombudsman Program provided over 18 trainings on elder abuse, financial exploitation and neglect over the past year to local nursing homes, financial institutions and agencies across the U.P., reaching over 100 long term care staff and 85 community members across the Upper Peninsula.

The Ombudsman is available to do public service announcements when requested. The Ombudsman Program is continuously handing out informational brochures on mediations, elder abuse services, exploitation services, and advocacy services to keep the public informed throughout the region.

3. Increase community awareness and understanding of Medicare fraud and abuse across the region

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Continue working with the region's Medicare/Medicaid Assistance Program (MMAP) to further train and update

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MMAP counselors so that they are better able to identify cases of Medicare Fraud and Abuse and know how to properly report them.

2. Conduct at least 25 outreach/training events specific to Medicare fraud and abuse in each county of the PSA during the 3-year planning cycle.

Expected Outcome

Medicare beneficiaries in the region will become more aware of marketing and billing abuses associated with the Medicare program, and will know where to report these abuses, thus saving money for both the beneficiary and Medicare.

Progress

In October 2017, U.P. MMAP counselors received training on the new Medicare cards being mailed to beneficiaries in 2018-2019. There were 62 outreach events held by MMAP counselors throughout the U.P. specifically regarding information on the new Medicare cards, to assist in combatting potential fraud and abuse associated with this endeavor. These events included in-person presentations, information provided at health and senior fairs, local newspaper and senior newsletter articles, and social media postings on Facebook and Twitter. UPCAP's Facebook postings about the new Medicare cards have been viewed by over 4500 people. This social media campaign is a new initiative for the UPAAA and we will continue to track it's value as time progresses.

All U.P. MMAP counselors continue to receive on-going training, emails, articles, and other resources to share with their communities in order to increase awareness of Medicare fraud and abuse.

D. Ensure that older adults have a choice in where they live through the adequate provision of information, support, and services.

State Goal Match: 2

Narrative

It is the objective of the AAA to ensure that all people within the region have the ability to choose their place of residence throughout their lifespan. Regional needs surveys conducted by the agency indicate that people are concerned about having enough affordable housing options within their own communities as they age in place, as well as having accessible and affordable services available to them to help them remain in their own homes. Additionally, providing critical information on the myriad of services and choices when families face long term care needs is imperative to ensuring that they have the knowledge and assistance needed to make decisions best for them. Use of person-centered planning to provide options and services through programs such as Care Management, Nursing Home Transitions, Communities for a Lifetime, MMAP, and readily accessible services available through the Older American's Act will help ease the burden of health care costs and allow those who choose to do so age in place in the setting of their choice.

Objectives

1. Continue to provide consumers in community-based residential facilities the option to age in place.
Timeline: 10/01/2016 to 09/30/2019

Activities

1. Care managers will promote Residential Services options for waiver-eligible consumers residing in assisted living facilities so that they can remain in their residence of choice.
2. UPAAA staff will research and seek out community and assisted living providers, building positive relationships

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with those that promote and deliver excellence in care for the purpose of contracting for direct services through the Residential Services option of the waiver program.

3. The agency will partner with the developers who are participating in the Affordable Assisted Living Project, joint effort between the Department of Health and Human Services and MSHDA, to provide waiver services to people facing skilled care needs in certain assisted living facilities built for this purpose, rather than moving them to a skilled nursing facility.

4. The AAA will continue to pursue other opportunities and projects that will allow any consumer in the region who desires to remain in the community setting to do so, even when facing complex care needs.

Expected Outcome

More consumers in the region will be given the opportunity to age in place within in a community-based setting of their choosing, rather than being forced to enter more costly nursing home placement.

Progress

UPCAP care managers promote Residential Services Options for consumers residing in assisted living facilities that meet MI Choice Waiver eligibility, as well as for individuals who desire a less structured environment such as a nursing facility while still providing for assistance and supervision that might not be available in a single family home or apartment environment.

UPAAA staff continue to work with interested Adult Foster Care and Homes for the Aged providers to meet the latest requirements for Residential Services as set forth in the Final Rules for Home and Community Based Services. It is hopeful that these facilities will be able to continue to offer their services through Medicaid licensure and/or purchase of service contracts. Additionally, the UPAAA will continue to work with interested developers who are participating in Affordable Assisted Living Projects and HUD 811 projects, to provide access to MI Choice participants to these new developments as alternatives to moving into a skilled nursing facility.

The UPAAA will continue to pursue other opportunities and projects that will allow any consumer in the region who desires to remain in a community setting to do so, even when facing complex care needs.

2. Enhance and improve information and assistance programs to support consumer-directed long term care and residential options.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Care managers will continue to participate in comprehensive training in advanced options, person-centeredness, LGBT and sensitivity training, and benefits counseling practices and philosophies so that the AAA can remain the long term care connection for individuals of any age and/or disabilities within the region.

2. The UPAAA's 2-1-1 database will be maintained and updated to reflect all in-home and community services and residential options. Call specialists will continue to conduct intake on all requests for information on long term care, with referrals made to care managers/supports coordinators for unbiased, one-on-one assistance with long term care planning. Additionally, call specialists have been trained to conduct screenings for individuals who may benefit from participation in T-CARE and to make referrals to the specially-trained T-CARE care managers.

Expected Outcome

All consumers in the region will be provided with complete and unbiased information on long term care and community-based options and services, as well as information and assistance with caregiving issues, so that they can make informed, self-directed decisions concerning their individual needs.

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Progress

So far this fiscal year, the UPAAA has assisted over 1600 older adults gain access to information and services on such topics as Medicare & Medicaid counseling, Care Management & in-home services, Veteran's benefits, Legal Aid, housing search assistance, utility payment assistance, transportation, and more via the 2-1-1 Call Center. Also, UPCAP is currently working with the Michigan LGBT & Aging Initiative and will be hosting an additional training for care managers, AAA staff, and 2-1-1 call center staff in Spring 2018 to help improve access to care for these individuals. The 2-1-1 database is routinely updated to expand information and resources on LGBT resources and demographics. I & A call specialists and care managers will continue to conduct surveys pertinent to family caregivers in hopes of identify their specific needs and ensuring that referrals to appropriate services and programs are made.

3. Provide consumers with options and assistance in obtaining self-directed community-based care when they are facing nursing home placement.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Care managers/supports coordinators will provide information and assistance to all care management and MI Choice Waiver clients on person-centered planning and self-directed care. Those who choose to direct their own care will be provided assistance and support in doing so.
2. The AAA will continue to work under contract with the local VMAC to provide self-directed home and community-based long term care services to veterans needing long-term care services, with a specific emphasis on self-determination and person-centeredness in developing those services.
3. The AAA will continue its contractual relationship with SAIL to purchase transition services for individuals wanting to leave nursing facility placement in favor of community-based options through the Waiver Program or other community-based systems for individuals who may be ineligible for or do not want waiver services.

Expected Outcome

Veterans and consumers both eligible and non-financially eligible for traditional waiver services will be assisted in accessing services that will allow them the ability to self-direct their own care in a more cost-effective and personal manner.

Progress

Person-centered planning and self-directed care are core principles guiding the daily activities of care managers/supports coordinators in their efforts to help consumers remain in a community-based/home setting. Care Managers discuss the self-determination option with each new consumer enrolled as well as during on-going care planning activities. For those wishing to participate in the self determination process, care managers provide necessary assistance and support in achieving their goal

AAA staff continue to work with the local VAMC through its contract for the Veterans HCBS Self Directed Care program. While referrals have significantly decreased over the past fiscal year as the local VAMC tries to find necessary resources to fund the program, AAA staff continue to make referrals for Veterans interested in the VAMC option as opposed to a Medicaid-financed option for home and community based services.

The AAA continues to work closely with the Superior Alliance for Independent Living (SAIL) to provide on-going nursing facility transition services. Currently the process is one of referral, consultation and weekly meetings to discuss transition activities and to problem solve difficult transition cases. SAIL contracts directly with MDHHS to

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assist nursing facility individuals who do not meet the Nursing Facility Level of Care (NFLOC) criteria for continued placement or enrollment into the MI Choice program, as well as assisting those individuals who do not wish to enroll into the MI Choice program.

4. Ensure adequate community services are available to those who need them to enable to allow them to remain in their own homes for as long as they choose.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Seek out new resources and opportunities to expand requested and necessary services such as chore services and non-medical transportation that are currently not available to all older adults in the region who need them.
2. Continue to provide evidence-based wellness programs like PATH, Matter of Balance, Walk with Ease, and Diabetes Prevention Education to anyone who wants to participate, so that they can learn strategies to maintain their health and wellness for longer periods of time.
3. Advocate for increased funding to ensure current services continue to be available to an expanding older population.

Expected Outcome

More older adults will have the opportunity to age in place because necessary services and programs needed to help them remain in their own homes will be available and affordable.

Progress

The UPAAA continues to work with community partners and volunteers to provide health and wellness programs across the region so that all consumers have access to programs that help keep them healthy and well, and supports their choice to age in place. These programs include Matter of Balance, the National Diabetes Prevention Program, and Personal Action Toward Health (PATH). In Fiscal Year 2017, 264 consumers attended at least one Matter of Balance class, with 23 classes being held. UPCAP also employs 3 Master Trainers for Matter of Balance, who help to oversee the program and ensure program fidelity is met. Additionally, the UPAAA and partners/volunteers provided 12 PATH workshops in FY 2017, with 138 consumers attending workshop sessions related to diabetes prevention, pain management, or dealing with other chronic conditions. The UPAAA also conducted two 12-month Diabetes Prevention Program classes; 30 consumers participated in these classes.

The UPAAA was again asked to partner with MSU Extension in pursuing a grant from the Administration for Community Living (ACL) to help sustain Matter of Balance and expand Tai Chi for Arthritis across the region. It is hopeful that this endeavor will successfully reach consumers in rural areas of the region where programs of this nature are not always readily available.

5. Identify housing needs on a county-by-county basis and where applicable, provide assistance in addressing those identified needs.

Timeline: 10/01/2016 to 09/30/2019

Activities

1. Work with county commissioners to identify local housing needs and issues through regularly-scheduled UPCAP board meetings.
2. Allocate funding through Title III for home modifications and home injury control to assure a safe home environment and accommodate disabilities.
3. Continue to provide at least two trainings per year to housing managers throughout the region, providing

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updated information on the needs of older adults, those with disabilities, and those facing chronic health conditions.

4. The UPAAA will assist communities in obtaining "Community for a Lifetime" status if so desired. By doing so, communities will be in a better position to promote their city, as well as understand their weaknesses so they can be in a better position to obtain grant funding and work on improvements.
5. Continue to work with local housing authorities, Rural Development, MSHDA, and HUD to seek new and innovative ways to ensure that safe and affordable housing is available where and when needed.

Expected Outcome

Sufficient affordable, safe, and age-friendly options will be available to older adults and those with disabilities to allow them to continue to live independently and assure that they have choices in where they live.

Progress

UPCAP is committed to ensuring accessible and affordable housing for all, and currently manages ten housing projects in 7 of 15 counties in the region. Most of these are located in the most rural areas of the Upper Peninsula. UPCAP's Housing Specialist works closely with all public housing facilities throughout the U.P. and maintains a county by county listing of available housing options. This information is shared with all interested parties, including care management staff. The Housing Coordinator also conducts outreach activities with private landlords and maintains a county-by-county listing of accessible private, unsubsidized housing options. Trainings are routinely offered to local housing managers related to issues pertaining to older adults and individuals with disabilities.

6. Explore and identify strategies to ease the shortage of competent direct care workers in the region.
Timeline: 10/01/2016 to 09/30/2019

Activities

1. Encourage and assist in the provision of training and skill building opportunities for direct care workers by use of training programs such as Building Training, Building Quality and PREVNT.
2. Promote economic stability and advocate for fair wages for direct care workers striving to live and work within the region by participating in the state-wide Workgroup on the Direct Support Workforce and advocating to legislators to provide funding that would allow an increase in wages to direct care staff and promote better compensation like health insurance and overtime pay.

Expected Outcome

A larger and more stable workforce of competent direct care workers will be available throughout the region and to everyone needing services to help them remain independent and in their own homes for as long as possible.

Progress

UPCAP has historically been an advocate for economic stability and fair wages for direct care workers, and this will continue as the need for this important work grows and as our aging population expands. Care managers currently work with one of the U.P.'s fiscal intermediaries, Northern Homecare Services, to find appropriate in-home workers for those who can self-direct their own care, especially in more rural areas of the region where traditional providers are unable or unwilling to provide services. UPCAP also continues to offer and provide low- or no-cost training to direct care staff of the region's contracted service providers to ensure a more stable and competent workforce.