



Affordable Assisted Living - All Services Plan Schedule with Community Outreach Strategy Draft 3 – 11/11

Intent

This addresses a timetable for the development of all services to be provided at the AAL residence with an outreach strategy. The strategy is designed to engage the local service delivery network and business, civic, education and spiritual community agencies with the program and its tenants. There are three components to the AAL services and outreach plan:

- Managing operator services delivered directly or through contractual arrangements that include meals, property management, wellness and activities planning and coordination, transportation and housekeeping.
- Personal care and health related services provided by an on-site community based services provider through agreement with the managing operator.
- A community outreach and engagement strategy.

I. Pre Proposal Submission – In preparation for the initial AAL meeting with MSHDA; a developer should do some due diligence in regard to identifying MSHDA AAL requirements for project specifications, service requirements and community support, as well as the AAL proposal process. In addition, a developer should identify one or more potential sites that offer Aging in Place opportunities for future AAL tenants. This would include a site that is accessible to health care, food, social opportunities and access to other goods and services.

Month 1

Developer meets with AAA and other MI Choice agency (service funders) 6 to 8 months prior to proposal submission and meets with MSHDA staff which occurs 5 to 7 months in advance of the due date for submitting their LIHTC application. The developer should present an outline or summary *that addresses how MSHDA requirements will be met. Please see the document titled “Application Process” in the Affordable Assisted Living section of the MSHDA website;*

<http://www.michigan.gov/mshda/0,4641,7-141-5587---,00.html>

- The goal of the meeting with service funders is to secure verbal support of the developer’s proposed AAL project, commitment to provide a letter of support with the LIHTC application and a commitment to entering into an MOU.
- The goal of the initial meeting with MSHDA is to present a general proposal and gain staff support to move the AAL project forward by presenting information to the AAL Steering Committee for approval and of a letter of support to the MSHDA Executive Director.

Month 2

Assuming approval by the Steering Committee of the developer’s proposal and in the event that the developer prefers a meal and/or personal care and health related services provider not enrolled in the MI

Choice agency provider pool; the developer meets with service funders to determine the timetable for adding new vendors into the service funders' provider pool.

- The goal of the meeting is to either assure that the timetable will accommodate enrollment of the new provider(s) into the service funders' provider pool or secure support to request an exception to the timetable to enroll potential providers.

Months 3 through 5

Developer communicates to service funder(s) on updates to LIHTC proposal development and explores support for other potential AAL funding opportunities

- The goal is to keep service funders apprised of development activities and to solicit involvement and support with potential AAL housing funders (e.g. foundations) as needed.

Month 6

Developer meets with service funder(s) to establish elements of letter of support for LITCH application submission and initial MOU agreements (e.g. priorities for volume of affordable apartments, preferences for NFT, etc.). *Please see the document titled "Memorandum of Understanding (MOU) with Waiver Agent" in the Affordable Assisted Living section of the MSHDA website;*

<http://www.michigan.gov/mshda/0,4641,7-141-5587---,00.html>

- The goal is to secure a letter of support from service funders and an initial MOU between parties for the LIHTC application submission.

Month 7 – LIHTC proposal submission to MSHDA

II. Post LIHTC Proposal Submission – The timeframe for MSHDA's proposal approval process will vary depending upon funding and funding award as well as the quality of the proposal. The following schedule assumes MSHDA approval:

Note: *Month 1- is the 1st month of construction. This schedule assumes move-in of tenants to the AAL residence within 12 months from the 1st month of construction.*

Month 1 The managing operator:

- Assures preparation and submission of service funder application for meal provider (home delivered meals) to enter service funders' provider pool.
- Defines and initiates a neighborhood and community outreach and engagement strategy.
- Initiate competitive request for proposal (RFP) process for selection of on-site personal care and health related services provider as follows:

RFP Timetable – selection of the on-site personal care and health related services provider

Month 1 continued; the managing operator:

- Requests a list of top performing providers from MI Choice agents based upon service and business performance data and considerations discussed above
- Assures that interested providers previously not enrolled in MI Choice provider pools have successfully met funder requirements and are enrolled

- Requests a meeting with MI Choice agents to discuss selected providers, as needed
- Provides AAL program information and invites selected providers to a Pre-proposal Conference

Month 2 Conduct Pre-proposal Conference, agenda items include:

- AAL program and local project overview (e.g. partnerships, funding arrangements)
- Site floor plan and provider input on location office space, etc.
- Managing Operator commitments
- Provider requirements
- Proposal format, content, review process, timetable (due date, review date, notification date)

Secure interested parties commitments by 15th of month; proposals are due in 30 days.

Month 3 Review proposals – select provider or finalists

- Form the review committee
- Receive proposals by 15th of the month, initial review by Managing Operator
- Secure MI Choice agency provider proposal information if needed
- Request additional information from providers if needed
- Provide completed provider proposals to committee members no less than 1 week in advance of the review session
- The review session is conducted at the end of the month

Month 4 Finalize selection on-site provider

- Interview finalists (if needed)
- Negotiate and enter into service agreement with selected provider
- Explore MI Choice, PACE and other funder requirements and establish service delivery options (e.g. per diem, bundled services, etc.) with funders for AAL tenant services

Month 5 Finalize MI Choice and PACE service arrangements orientation with the selected provider to AAL and Funder requirements and expectations

- Define collective mission, objectives and steps toward completion

- Establish and finalize owner – provider strategies for lease up and services coordination

Month 6 Coordination with MI Choice referral/case finding supports

- Provide AAL program information (referral “triggers”) to MI Choice supports coordinators, information and referral/call center staff at levels supported and preferred by MI Choice Agents
- Provide support in review of waiting list, current caseload and other support to MI Choice agencies as supported and preferred by MI Choice agents

Month 7 Begin move in reservations

Month 8 & 9 Update outreach network and work closely with on-site provider to coordinate provider staffing and supervision ramp up activities

Month 10 Finalize arrangements for meals, transportation, wellness and activities coordination and property management.

III Outreach Strategy - outline

Purpose

- The strategy defines the process by which the AAL program will interact and engage with the local neighborhood and area community.

Aims – Objectives

- Identify area resources to support AAL tenants to age in place.
- Encourage tenant involvement with local businesses and community services including wellness programs, libraries, parks, etc.
- Assure that the AAL program is integrated into the local community.
- Establish local political support.
- Encourage local inter-agency collaboration.

Coordination with MSHDA approved tenant selection and marketing plans

- Coordinate development of materials, advertising, events, etc. with the marketing plan
- Coordinate local outreach efforts for move-in reservations and priority populations with these plans
- Establish performance measures for lease-up goals established in the marketing plan

Inter-agency approach

- Work closely with existing community based long term care programs to address unmet housing with services needs including review of current caseloads, waiting lists, etc.
- Establish referral relationships with discharge planning systems across multiple health care systems.

- Identify and establish referral strategies with a variety of local information and referral programs.
- Identify and establish engagements with wellness, prevention and evidence based programs.

Targeting Groups and Persons

- While the outreach plan addresses all community members, targeting strategies are established to address certain groups within the population and specific geographic areas. Groups would include residents of nursing facilities, senior housing, fair market housing with services organizations, etc.

Diversity Strategies:

- Utilize marketing plan demographics and other information to define diverse groups within the community.
- Define particular needs for non-standard service delivery methods as needed.
- Locate service groups with specialized expertise or special interests to support outreach efforts.

Outreach strategy – roles & responsibilities of key stakeholders:

- Consider a speakers bureau and peer educators approach for outreach to:
 - Local elected officials
 - Church and related spiritual organizations
 - Industry and commerce leaders
 - Senior housing, housing with services, and nursing facility residences
 - Senior center and other senior groups.