

Annual Report

MICHIGAN OFFICE OF SERVICES TO THE AGING | FISCAL YEAR 2014



Program data presented in this report is preliminary, compiled through December 2014. Final data will be submitted to the federal Administration for Community Living by February 2015, and certification is expected in March 2015.

The Michigan Office of Services to the Aging is an equal opportunity employer and program provider. This report, required by state law, is developed with federal funds by authority of the Older Americans Act of 1965, as amended.

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Annual Report

Michigan Office of Services to the Aging

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SUMMARY

Public Act 180 of 1981, the Older Michiganians Act, requires the Michigan Office of Services to the Aging (OSA) to submit an annual report to the governor and the Michigan Legislature by January 31 each year.

The annual report details the progress OSA and the Michigan Commission on Services to the Aging (CSA) have made in implementing Michigan's state plan on aging, which is required for federal funding through the Older Americans Act of 1965.

As the designated state unit on aging, OSA is granted authority to develop and administer the state plan, and is responsible for coordinating all state activities related to the intent of the Older Americans Act, as amended, and the Older Michiganians Act. The CSA is granted authority for expenditure of all funds related to both laws.

All state plans are reviewed annually to ensure Michigan continues to build toward a future in which every Michigander has the opportunity to live a high quality of life in the setting of their choice as they age.

The activities and accomplishments outlined in this report are based on a newly-developed, three-year state plan for fiscal years 2014-2016.

MICHIGAN'S OLDER ADULT POPULATION*

- Michigan has 1,996,185 people age 60 or older – 20.2% of the total state population.
- The majority of the older adult population is female – 1,099,898 or 55.1%; and 896,287 or 44.9% are males.
- More than thirty-two percent (32.8%) of all households in the state of Michigan contain someone age 60 or older living in them.
- There are 417,203 Michigan veterans age 60 or older.
- More than thirteen percent (13.2%) of the 60-or-older population identifies as something other than of white European ancestry. African Americans represent the largest of such groups at 10.3%; Asians represent 1.4%; American Indians and Alaska Natives comprise 0.4%; and 0.8% identifies as being two or more races. Additionally, 1.6% of the population identifies themselves as Hispanic.
- For the 60-or-older age group, 84% graduated from high school; 26.6% have had some college (Note: this includes associate degrees); and 21.7% have a Bachelor's degree or higher.
- More than forty-five percent (45.1%) of people age 60 or older live with a spouse; 40.1% live alone; 9.6% live with relatives; 2.4% live with non-relatives; and 2.7% live in group quarters.
- More than twenty-four percent (24.6%) of people age 60 or over volunteer in their community, averaging 142 hours per person each year.
- Twenty-one percent (21%) of people age 60 or older are in the labor force.
- Approximately 126,000 Michigan residents age 65 or older identify themselves as having a cognitive disability.
- More than 77,000 grandparents live with their own grandchildren under the age of 18. Approximately 24,000 grandparents live with grandchildren under age 18 without the child's parent being present.

**Data presented for the age 60 or older age group was from the 2013 American Community Survey.*

ABOUT OSA

The Michigan Office of Services to the Aging (OSA) is Michigan's designated state unit on aging, formed under the Older Michiganians Act of 1981.

OSA operates under the authority of the Older Americans Act, which was signed into law in 1965 to meet the diverse needs of the growing numbers of older adults in the United States. The Older Americans Act set out specific objectives for maintaining the dignity and welfare of older adults and established the National Aging Network, which is comprised of the Administration for Community Living at the federal level, state units on aging, and area agencies on aging at the local level.

OSA has a unique role within state government, serving as an:

- Informed leader, advocate, and expert on aging
- Information source for older adults and their families, friends, neighbors, and the general public
- Effective steward of federal and state taxpayer dollars
- Agent that works to improve the effectiveness, efficiency, and quality of supportive services provided through Michigan's aging network and its partners

While OSA provides leadership on aging programs and policies at the state level, serving Michigan's older adult population is a collaborative process. OSA works with Michigan's aging network – a partnership of the state of Michigan, 16 regional area agencies on aging, and more than 1,200 community-based agencies.

In fiscal year 2014, OSA provided financial and program oversight of all 16 area agencies on aging in the following ways:

- Area service plans were thoroughly reviewed, then submitted to the Commission on Services to the Aging for approval
- Formal area plan performance assessments were conducted
- Financial, program, and audit reports were reviewed
- On-site monitoring of area agency on aging governance and program/financial operations was conducted
- Technical assistance was provided as needed

The following commissions and advisory councils also work closely with OSA and Michigan's aging network to shape policy and address the concerns of older adults across the state.



Michigan Commission on Services to the Aging meeting held in Port Huron on July 18.

Michigan Commission on Services to the Aging

The Commission is a 15-member, bi-partisan body that advises the governor, Legislature, and OSA on matters relating to aging policies and programs.

The Commission approves funds for services, participates in the preparation of the state plan, determines aging policy as needed, and appoints a 40-member State Advisory Council to advise state-level decision-making. In its work as an effective and visible advocate for older adults in government decisions, the Commission convenes public hearings to learn, first hand, what is important to older adults, as well as to service providers throughout the state.

The Commission meets monthly to conduct its work. All meetings are open to the public. In fiscal year 2014 it held public hearings in St. Joseph, Lansing, Coldwater, Port Huron, and Gaylord.

State Advisory Council

The State Advisory Council on Aging, established by the Michigan Commission on Services to the Aging, has an important role in being the eyes and ears of older adult issues at the local level. This 40-person body brings a wealth of experience and expertise to advising on state level decision-making, as it represents the interests of older adults statewide. Among their duties, council members have input on the state plan, aging policies, and legislative advocacy.

Each year the Council studies an aging topic or area of concern deemed important by the Commission, by holding workgroup conference calls over the winter months and four face-to-face meetings in the spring, summer and fall. Council recommendations for future action on each topic are presented to the Commission at an annual joint meeting.

In 2014, the Council's charge to research Baby Boomers was continued, and the Council presented practical ideas on what can be done at the state level to address the growing number of Boomers. In November 2014, the Commission approved the Council's preliminary report, entitled Baby Boomers – Now and in the Future. As an offshoot of this report, the Council will work closely with OSA and the Commission on a positive aging campaign in 2015.

Michigan Long-Term Care Supports and Services Advisory Commission

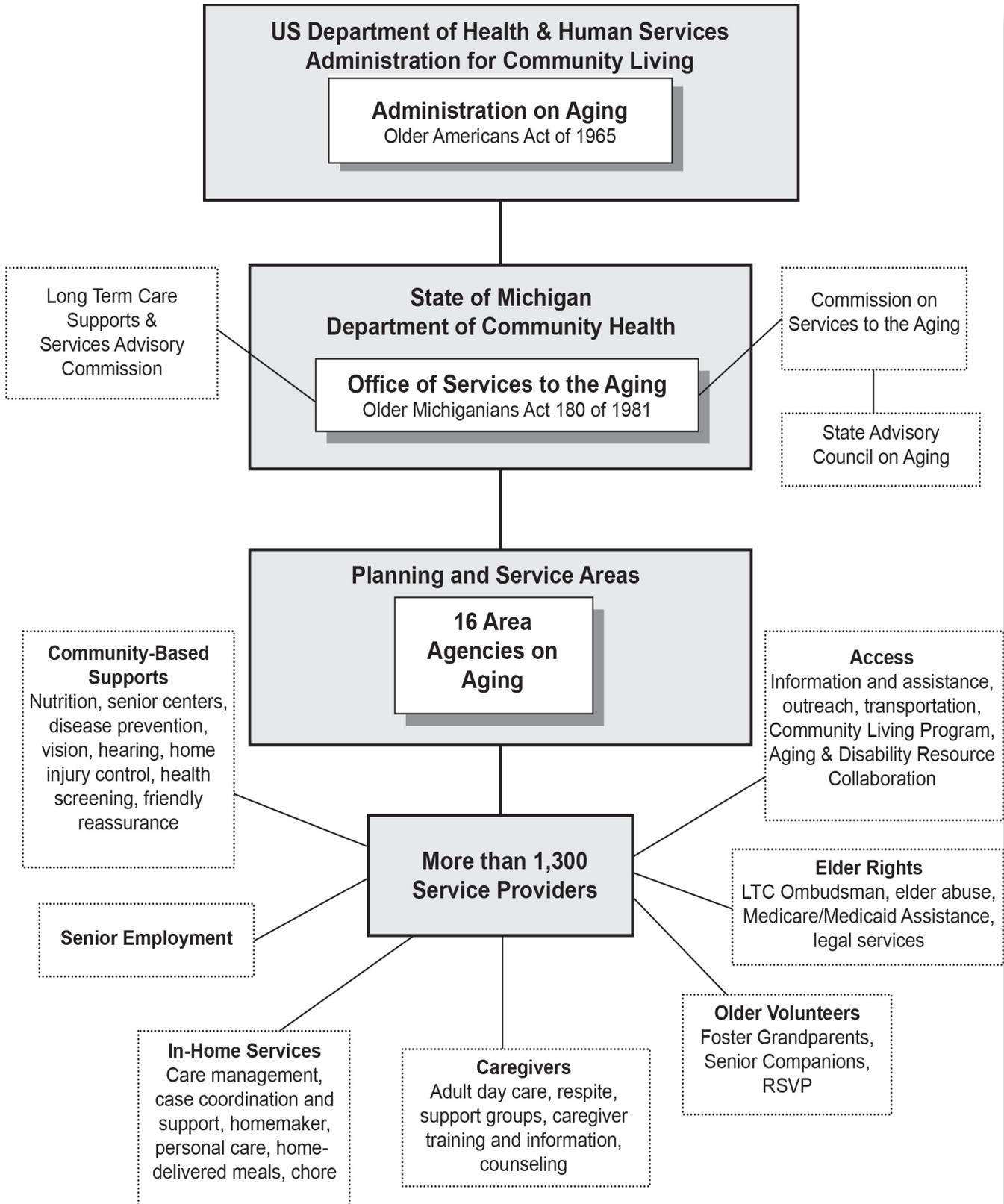
The Michigan Long-Term Care Supports and Services Advisory Commission was established as a forum for discussion on issues related to long-term care services and supports. The Commission is also charged with making recommendations as requested by the governor or OSA director for improving the lives of Michigan's older adults and individuals with a disability.

Over the past two years the Commission has focused on ways to provide a person-centered care model that empowers patients to customize their preferred choice of service and provider.

In April 2014, the Commission submitted 13 recommendations to Governor Snyder for consideration in support of the current and future needs of the long-term care system. These recommendations will help Michigan have a more integrated, coordinated, and consumer-focused long-term care system.

ABOUT MICHIGAN'S AGING NETWORK

A Federal, State and Local Partnership



MICHIGAN STATE PLAN ON AGING - 2014-2016

The Michigan State Plan on Aging - 2014-2016 outlines a policy and program framework to provide services to Michigan's older adult population.

OSA has adopted the following goals for the Michigan State Plan on Aging - 2014-2016:

- I. Recognize and celebrate the cultural, economic, and social contributions of older adults, and create opportunities for engagement in their communities.
- II. Use person-centered planning to ensure older adults have independence and self-direction through an array of long-term supports and services provided in the setting of their choice.
- III. Provide a variety of opportunities for older adults to enhance their physical and mental well-being, using evidence-based practices and other innovative programs.
- IV. Provide advocacy, information, training, and services to support the rights of older adults to live free from abuse, neglect, and exploitation.
- V. Develop and enhance public and private partnerships to better serve older adults.
- VI. Employ continuous quality improvement and innovation to accommodate the changing needs of older adults.

Visit www.michigan.gov/osa to read the full plan.

CORE SERVICE ACTIVITIES AND ACCOMPLISHMENTS

Core services help older adults live in the setting of their choice for as long as possible, and complement care provided by family or friends by supporting activities of daily living like bathing and food preparation.

These services are targeted to those who are frail, and those who are economically and socially vulnerable, including American Indian elders and older adults residing in rural areas. Core services in Michigan include Access, Caregiver, Community, In-Home and Nutrition.

Access Services

Access services help older adults and their families find local services and programs. Access services through Michigan's aging network include care management, case coordination and support, information and assistance, outreach and transportation.

Service Type	Clients	Hours/Units
Care Management	3,355	23,589
Case Coordination	8,885	45,683
Information & Assistance	N/A	123,005
Outreach	N/A	100,711
Transportation	6,961	125,424

Caregiver Services

Family caregivers are relatives, friends or neighbors who provide support to individuals who need help with activities of daily living because of a physical or mental disability or another health issue. Family caregivers are the foundation of Michigan's long-term care system and provide up to 80 percent of care for Michigan's older adults and residents who have a disability.

Caregiving presents many physical, emotional and economic challenges. Research has clearly demonstrated that caregivers often neglect their own personal needs while caring for others, and if they are given proper support in their role they are able to provide better care for longer.

Caregiver services through Michigan's aging network include, but are not limited to, education and support training, respite care and adult day care.

In 2014, 6,963 caregivers were supported by 681,180 hours of adult day care, respite care, counseling services, training and supplemental care. Additionally, 80,869 home-delivered meals were served as respite care.

Profile of registered caregivers:

- 70% were female
- 45% were younger than 65 years of age
- 43% resided in rural areas
- 27% of caregivers were daughters or daughters-in-law; 29% of caregivers were spouses
- 31% were low-income
- 26% were minority by race and/or ethnicity

Profile of caregiving:

- 64% provided daily, hands-on care
- 73% have been caregiving for more than one year; 50% for three or more years 51% lived with the individual(s) that they care for; 40% travel up to one hour to provide care 44% indicated that there were “no other family members willing or able” to help provide care
- 36% were employed full or part-time
- 29% described their health as “fair” or “poor”
- 7% were kinship caregivers (e.g., caregiving for grandchildren)

Community Services

Community services help older adults maintain their independence at home and in their community. These services complement other services provided through existing medical and health care systems to help prevent hospital readmissions by supporting activities of daily living.

A priority service under the community services umbrella is legal services. Michigan has nine legal assistance providers and a legal hotline for Michigan’s older adults. Legal services include information and referral, advice and counseling, education and direct representation. These services target older adults with economic or social needs, including limited English proficiency, low-income minority individuals, and those who live in rural areas. In fiscal year 2014, 17,407 cases were closed and 80 percent of those served were living 200 percent below poverty.

Community services through Michigan’s aging network also include, but are not limited to, disease prevention/health promotion, health screening, assistance to the hearing impaired, home repair, vision services and programs for prevention of elder abuse, neglect and exploitation.

Service Type	Clients	Hours/Units
Assistance to the Hearing Impaired	1,589	4,386
Assistive Devices & Technologies (e.g., PERS)	774	7,081
Community Support Navigator	2,899	5,988
Counseling	97	482
Crisis Service Energy Assistance	723	435
Disease Prevention/Health Promotion	7,398	31,522
Elder Abuse Prevention	6,948	6,117
Friendly Reassurance	175	19,533
Health Screening	646	445
Home Injury Control	838	2,059
Home Repair	145	4,462
Information & Assistance	N/A	123,005
Legal Assistance	9,128	31,784
Medication Management	2,960	6,161
Nutrition Education	361	361
Outreach	N/A	100,711
Senior Center Operations/Staffing	12,083	36,386
Transportation	6,961	125,424
Vision Services	948	1,549
Wellness Center Support	4,105	27,859

In-Home Services

In-home services help residents who have functional, physical, or mental characteristics that limit their ability to care for themselves, and who have insufficient or unavailable informal supports such as family or friends. Targeting for in-home services is based on social, functional, and economic characteristics.

In-home services through Michigan's aging network include, but are not limited to, chore, home care assistance, home injury control, homemaking and personal care.

In 2014, 19,690 older adults were supported by 679,510 units (hours) of care management, case coordination and support, chore, homemaker, home health aide, personal care and other in-home services.

Profile of registered participants:

- 67% were 75 years of age or older
- 71% were female
- 56% lived alone
- 56% resided in rural areas
- 30% were low-income
- 15% were minority by race and/or ethnicity



Older adults volunteering at a local food bank.

Nutrition Services

Adequate nutrition is critical to maintaining a healthy and active lifestyle and achieving a high quality of life. That is why nutrition services have always been an essential service for older adults. In addition to providing nutritious meals, nutrition services significantly reduce social isolation and give older adults the knowledge to eat healthier through nutrition education. While there is no “means test” for program participation, services are targeted to older adults with the highest need through the aging network.

Nutrition services through Michigan’s aging network include congregate meals, home-delivered meals, nutrition counseling and nutrition education.

A total of 9,970,525 meals were served to 105,903 participants in fiscal year 2014.

Home-Delivered Meals

A total of 48,050 home-delivered meal (HDM) participants received 7,702,752 meals. *

Participant profile:

- 65% were aged 75 or older
- 64% were female
- 50% lived alone
- 39% resided in rural areas
- 37% were low-income
- 29% were minority by race and/or ethnicity

Congregate Meals

A total of 57,853 congregate meal participants received 2,267,773 meals.

Participant profile:

- 52% were aged 75 or older
- 63% were female
- 32% lived alone
- 60% resided in rural areas
- 29% were low-income
- 81% were minority by race and/or ethnicity

*Includes HDM respite meals



OSA's Dan Doezema and Laura McMurtry lead a breakout session during the Nutrition Summit in Roscommon.

Nutrition Summit

“Action, Challenges, and Tenacity” was the theme of the 2014 Nutrition Summit held on September 11 at the Department of Natural Resources’ Ralph A. MacMullan Conference Center in Roscommon. More than 80 people involved with older adult nutrition programs across the state came together to discuss current practices and challenges, as well as discuss new ideas to increase participation in congregate meal programs.

Breakout sessions included person-centered planning, using social media, activities that can be incorporated into the meal time and new meal ideas. A question and answer session was also conducted for the updated nutrition standards and the nutrition reporting system.

SPECIAL PROGRAM ACTIVITIES AND ACCOMPLISHMENTS

Special programs have been developed and implemented over the years to complement core aging services offered through the Michigan's aging network.

Communities for a Lifetime

The Communities for a Lifetime (CFL) program provides guidance to local communities interested in reshaping their vision, public policies, and practices to create more desirable and welcoming living environments for people of all ages, including older adults. The program is part of a broader national movement called Creating Aging Friendly Communities, and was developed by the Michigan Commission on Services to the Aging in 2007 with input from the State Advisory Council on Aging.

In fiscal year 2014 the program achieved the following:

- Livingston and St. Joseph Counties were designated as "Communities for a Lifetime" by OSA and the Commission on Services to the Aging, bringing the total number of recognized CFL communities to 23.
- A Communities for a Lifetime Forum was held for communities that received CFL designation from 2007-2014. The forum provided information sharing, expert foundation and community development speakers, and technical assistance resources for sustaining aging-friendly community improvements.
- A CFL presentation was made to the Council of Michigan Foundations, Michigan Economic Development Corporation, Michigan Association of Senior Centers and Michigan Community Action Agency Association.
- A fact sheet was developed on economic benefits of better serving persons age 50 or older.

Emergency Preparedness

As part of the state's emergency preparedness and disaster response system, OSA reports to the State Emergency Operations Center (SEOC) when it is activated in response to an emergency.

In fiscal year 2014, OSA participated in the SEOC's Southeast Michigan flood emergency response, ensuring that aging service delivery was not disrupted, and that information on accessing Federal Emergency Management Agency (FEMA) disaster recovery resources was made available to the aging network. Last year OSA also regularly attended emergency preparedness trainings and practice drills provided by the Michigan State Police and the Michigan Department of Community Health, as well as participated in statewide emergency preparedness activities including cyber-attack training, an Ebola response drill, and six exercises for nuclear power plant emergencies.

At the local level, OSA worked with the aging network to be better prepared to respond to emergency events. In June, OSA coordinated with five area agencies on aging to provide ten FEMA trainings designed to help both caregivers of seniors and local community leaders improve their natural disaster awareness. Trainings were held in Traverse City, Escanaba, Grayling, Bay City, and Southfield. A total 78 caregivers of older adults and 115 local community leaders participated.

Gatekeeper Program

Launched in 1987, the Gatekeeper Program is made possible through a partnership between Consumers Energy, DTE Energy and Michigan's aging network. The program identifies older adults in need through the utility company's employees who have frequent and direct contact with natural gas and electric customers.

Employees are trained to stay alert to warning signs that may indicate an older adult needs help. They look for signs of distress in communication, economic condition, social condition, emotional health, personal appearance, physical limitations and condition of the home. When an issue for an older adult is suspected, a referral is generated and that in turn, prompts communication with Michigan's aging network to help.

Each year two Gatekeepers are recognized by the OSA and the Commission on Services to the Aging for going above and beyond to help an older adult in need. In fiscal year 2014, David Popp of DTE and Toni Fabus of Consumers Energy were chosen for this honor. Mr. Popp, a service technician, witnessed an older adult slip and fall and got her the help she needed, which allowed her to continue living an independent life. Toni Fabus, an electric meter services worker, found a woman collapsed on the floor of her home. This was a case of personal neglect and it prompted Adult Protective Services to investigate and help her find alternative housing.

Senior Citizens of the Year

Each year two senior citizens are named Senior Citizen of the Year by OSA, the Commission on Services to the Aging, and Consumers Energy at a special ceremony during Older Michigianians Day at the State Capitol. Helen Buccella-Costa of Ann Arbor and Eleanor Nielsen of Grand Rapids were honored in 2014.

Ms. Buccella-Costa, nominated by Arbor Hospice, was instrumental in establishing Arbor Hospice's pet therapy program. She and Alpine, a trained Golden Retriever, bring comfort, compassion, and peace to individuals at the end of their lives, as well as their family members. Her volunteer work spans seven counties. She has clocked 1,100 volunteer hours and has traveled 12,000 miles at her own expense.

Eleanor Nielsen, nominated by the Area Agency on Aging of Western Michigan, has played a major role in establishing the aging network in Western Michigan since the 1980s. Among her many accomplishments, she served on the Area Agency on Aging Policy Board; she formed the Allegan County Commission on Aging; and was a catalyst in launching the first Allegan County senior millage.

Senior Volunteer Programs

In partnership with the Corporation for National and Community Service, OSA oversees three volunteer programs – the Foster Grandparent Program, the Senior Companion Program, and the Retired and Senior Volunteer Program (RSVP) – that connect older adults to people, community projects, and organizations in need.

A total of 9,429 older adults participated in Michigan’s three older-adult volunteer programs in fiscal year 2014.

Participants in the Foster Grandparent Program help children who have “exceptional” or “special” needs.

- 1,055 Foster Grandparents served 2,500 children and youth with exceptional and special needs in 750 different settings within 333 non-profit organizations.

Senior Companion Program volunteers help other older adults maintain their independence by providing help with activities of daily living like simple chores and transportation to medical appointments.

- 533 Senior Companions served 3,333 adults with special needs in 921 different settings within 185 organizations.

RSVP matches the skills, interests, and availability of older adults with community volunteer opportunities that will most benefit from them.

- 7,841 RSVP volunteers provided service to 1,336 non-profit organizations, equating to 803,961 hours of service to local communities.

Tailored Caregiver Assessment and Referral®

Tailored Caregiver Assessment and Referral, TCARE®, has been funded since 2009 with the goal of reducing the burden and stress on people who are serving as caregivers to family or friends. Area agencies on aging and other partner agencies use existing federal caregiving funding to implement TCARE®.

In order to help caregivers who are at high risk from the stress of their duties, care-certified assessors work with them one on one to find specific community resources that are most apt to be beneficial and acceptable to their situation. This is an evidence-based individualized assessment and referral process.

Training for 12 new staff was held in fiscal 2014. There are now 35 certified TCARE® staff in Michigan. Each certified staff member serves three to five high-risk caregivers per year. The program is proven to be a valuable support in reducing caregiver stress and depression.

FY 2014 GRANT ACTIVITIES AND ACCOMPLISHMENTS

Last year OSA worked on several special grants aimed at improving upon or expanding the depth and breadth of core aging services and special programs offered through Michigan's aging network.



Creating Confident Caregivers training session in 2014.

Creating Confident Caregivers®

Since 2009, Creating Confident Caregivers® (CCC) has conducted 471 evidence-based programs for family members of all ages and incomes who are involved with helping a relative who has memory loss or dementia. More than 8,552 caregivers and persons with dementia have benefited from the program. The program was expanded in 2010 with a focus on serving urban and racially and ethnically-diverse caregivers.

Participant data from the initial CCC project found statistically-significant improvement in caregivers' well-being, skills, attitude, and self-care. These findings affirm the effectiveness of the program in reducing caregiver distress, when delivered as tested.

In addition to providing programs for caregivers, this year CCC master trainers also held dementia training sessions for person-centered counselors and personal care aides in order to familiarize them with a person-centered dementia approach.

Evidence-Based Disease Prevention Programs

Based on the premise that it's never too late to adopt a healthy lifestyle, evidence-based disease prevention programs (EBDP) are available to help older adults learn how to reduce their risk of developing chronic conditions, as well as learn how to better manage those conditions that already exist.

“Evidence-based” programs – referring to those that have been scientifically researched and tested with proven results – offer the benefits of self-efficacy and decreased health service utilization, and enable participants to adopt healthy self-management behaviors. The programs work best when participants are informed, motivated and involved as partners in their own care.

Programs offered through Michigan’s aging network include, but are not limited to, EnhanceFitness, Matter of Balance, Chronic Disease Self-Management, known as “PATH” in Michigan, Diabetes Self-Management, known as “Diabetes PATH” in Michigan, and Chronic Disease Self-Management.

In fiscal year 2014, OSA was in its second year of a two-year grant from the Administration on Aging called “Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education.”

The overall purpose of this grant is to help ensure that evidence-based self-management education programs are embedded into the state’s health and long-term services and supports systems.

In fiscal year 2014:

- 225 workshops on chronic disease self-management were held. A total of 1,608 people participated and of those, 1,135 people completed at least four of six sessions – a completion rate of 70.5%
- 2,356 people participated in 89 “Matter of Balance” workshops

This work has led Michigan to become a national leader in working with the Geriatric Education Center to educate medical professionals on the need to refer patients to self-management classes such as PATH. The grant includes working with medical students to be trained as PATH leaders. The education of medical professionals is taking place at conferences and workshops across Michigan.

Medicare Improvements for Patients and Providers Act

Michigan’s aging network received federal funding in fiscal year 2014 under the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 to help Michigan residents who are Medicare beneficiaries to apply for the Medicare Part D Extra Help/Low-Income Subsidy and the Medicare Savings Programs. In addition, funding also helped provide Part D counseling to Michigan residents who live in rural areas. Funding was divided between area agencies on aging, the Michigan Medicare and Medicaid Assistance Program, known as MMAP, and four local Aging and Disability Resource Collaboration (ADRC) partnerships.

In fiscal year 2014:

- MIPPA AAA partners assisted beneficiaries with 2,413 enrollment applications
- MIPPA MMAP partners assisted beneficiaries with 1,940 enrollment applications
- MIPPA ADRC partners assisted beneficiaries with 692 enrollment applications

Michigan Aging and Disability Resource Collaboration Program

In 2009, the U.S. Administration on Aging awarded Michigan a grant to streamline access to services and provide residents information on all aspects of life related to aging or living with a disability.

Michigan's program, the Aging & Disability Resource Collaboration (ADRC), is regionally-driven through several local programs located throughout Michigan. Each local program will serve as a connecting point for access to aging and disability services in its community. These collaborations were made possible through strong partnerships between the state's aging and disability communities and other partners and supporters throughout Michigan.

A part of the ADRC grant included funding for training for staff of aging and disability organizations at the local level to provide options counseling, also called person-centered counseling. In fiscal year 2014 nearly 48 person-centered counselors participated in in-person training sessions and monthly strategy calls were held for all person-centered counselors statewide.

By the end of fiscal year 2014, 17 partnerships between local aging and disability organizations covered all Michigan counties and met federal requirements to be considered "fully functional." A state-level ADRC Advisory Committee, comprised of aging and disability representatives, was also formed to share best practices and provide input on ADRC policy and shape the future direction of the program.



*Michigan Medicare and Medicaid Assistance Program
2014 volunteer award winners.*

Michigan Medicare and Medicaid Assistance Program

The Michigan Medicare and Medicaid Assistance Program (MMAP) works through Michigan's area agencies on aging to provide high quality and accessible health benefit information and counseling. It is supported by a statewide network of unpaid and paid skilled professionals that offer free, objective, and confidential health benefits counseling and information to assist Medicare and Medicaid beneficiaries.

In fiscal year 2014:

- The program served 82,319 Medicare beneficiaries
- MMAP counselors achieved savings of approximately \$60,389,000 for their clients
- Team members had 104,698 client contacts, 51,287 of these contacts were with individuals whose household's annual income is \$23,595 or less
- 22,640 contacts were with beneficiaries enrolled in Medicare due to a disability
- Team members spent 3,103 hours conducting community education and outreach
- Team members held 1,093 presentations that reached 45,391 individuals
- Team members participated in 322 health or senior and community resources fairs and 195 enrollment events
- 3,006 beneficiaries received enrollment assistance in a Medicare Prescription Drug Plan, Medicare Savings Program, or the Part D Low-Income Subsidy
- Primary topics discussed were Medicare eligibility and benefits, Medicare Part D plans and plan comparison, Medicare supplemental policies, Medicare Savings Program, and Part D Low-Income Subsidy eligibility

Personal and Home Care Aide State Training Program: Building Training...Building Quality

Michigan was one of six states in 2010 that received a federal grant from the U.S. Department of Health and Human Services to develop a state training program to boost Michigan's personal and home care aide workforce, and give these workers the knowledge and skills to provide better long-term care services and supports to individuals. Michigan's program, Building Training...Building Quality (BTBQ), focused on developing, implementing, and evaluating an evidence-based, model training program for personal care aides, using teaching methods for adults.

The program created a "gold standard" of training. It worked closely with personal care aides serving individuals enrolled in the MI Choice Waiver program, which provides in-home services similar to those provided in a nursing home. It also focused on the need to recruit more personal care aides, one of the fastest growing occupations in Michigan. It is estimated that by 2020 Michigan will need an additional 25,000 home health and personal care aides.

BTBQ program accomplishments included the development of a 77-hour core training program and the certification of 28 trainers from across the state. Nearly 400 people were trained in the core curriculum, 296 were trained to support persons with dementia, 193 received home skills training, and 308 were trained in the prevention of adult abuse and neglect.

BTBQ program evaluation findings showed:

- Significant knowledge, skills, and confidence were gained by BTBQ graduates
- Unemployment dropped from 58 percent to 36 percent among BTBQ graduates
- Improved job satisfaction - 99 percent stated they would recommend BTBQ to others
- Skills gained increased employability of BTBQ graduates
- Graduates identified essential training features that should be mandatory – person-centeredness, communication skills, and how to establish professional boundaries

A Michigan final report was developed in August 2014. Visit www.michigan.gov/osa to read the full report. The BTBQ program was made possible by a partnership between OSA, Michigan State University's Department of Family Practice within the College of Human Medicine, and PHI Michigan.

Senior Project FRESH/Market FRESH

The Senior Farmers Market Nutrition Program, known as Senior Project FRESH/Market FRESH in Michigan, provides those who qualify with unprocessed, Michigan-grown foods.

Qualified older adults and Michigan Department of Community Health (MDCH) Wisewoman participants receive coupons that are used to purchase Michigan-grown produce at registered roadside stands and farmers markets.

Participants are age 60 or over, and also younger women enrolled in the MDCH Wisewoman program. Each participant receives a minimum of ten, \$2.00 coupons for purchasing Michigan-grown fruits, vegetables and other non-processed food at registered roadside stands and farmers markets throughout Michigan.

The program is free for both the participant and the farmer. Senior Project FRESH/Market FRESH originates from U.S. Department of Agriculture funding. It is part of the Senior Farmers Market Nutrition Program and these federal dollars come out of the federal Farm Bill. The program was designed to benefit both farmers and older adults.

To qualify, an older adult must a MDCH Wisewoman participant or be:

- 60 years of age or older
- Have a total household income of 185% of poverty or less
- Live in the county where the coupons are issued

In fiscal year 2014:

- More than 230,000 coupons were distributed by 113 agencies in 82 counties to eligible participants
- More than 300 markets and roadside stands participated across Michigan, representing 2,800 farmers
- The program put more than \$500,000 into Michigan's agricultural economy

MICHIGAN STATE LONG-TERM CARE OMBUDSMAN

This program provides advocacy and information to individuals in need of long-term supports and services, particularly those living in nursing homes, homes for the aged, and adult foster care homes. The Ombudsman also provides training, oversight, and management of the local Ombudsman programs statewide.

Program Details

- Long-term care consultations were held with 3,141 individuals and 1,177 facility staff.
- 163 community education sessions were held.
- 92.5% of complaints were made against nursing facilities; 7.5% were made against adult foster care homes or homes for the aged.
- 1,658 complaint cases involving 3,214 complaint issues were completed and closed.

Top 5 Complaint Sources:

- 651 (40%) self-reported by residents
- 378 (23%) initiated by friends/relatives
- 245 (15%) reported by Ombudsman
- 188 (11%) anonymously reported
- 93 (6%) reported by facility staff

Top 10 Complaint Issues:

- Failure to respond to requests for help (235)
- Involuntary discharge/eviction from a facility (219)
- Lack of dignity/staff treatment of residents (181)
- Requests for less restrictive settings (146)
- Medication administration/mistakes (129)
- Guardianship, conservatorship, powers of attorney, wills (113)
- Inadequate care plans (101)
- Food - quality, quantity, choice (95)
- Civil rights, choice, preference, including right to smoke (94)
- Personal hygiene, grooming (77)

FY 2014 BUDGET APPROPRIATION

Line Item	Appropriation
OSA Administration	6,389,200
Community Services	36,614,400
Nutrition Services	37,244,000
Retired and Senior Volunteer Program	627,300
Foster Grandparent Program	2,233,600
Senior Companion Program	1,604,400
Employment Assistance	3,500,000
Respite Care	7,643,700
Appropriation Total	\$95,856,600
Total Federal Revenues	58,154,600
Title III - Older Americans Act	41,833,700
Title VII - Older Americans Act	807,300
Nutrition Services Incentive Program - DHHS	7,260,500
Bridging the Gap - ACL/DHHS	200,000
ADSSP Michigan Expansion - ACL/DHHS	265,000
NWD/ADRC Sustainability Project	484,000
USDA - DOA	332,000
Calhoun EAP - DOJ	200,000
Title V - DoL	3,663,500
Title XIX - Medicaid	3,108,600
Total State Restricted Revenues:	7,643,700
Abandoned Property Funds (Respite)	3,575,000
Merit Award Funds	4,068,700
Miscellaneous Private Revenues	677,500
General Fund/General Purpose	29,380,800
Revenue Total	95,856,600

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Eric Berke

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