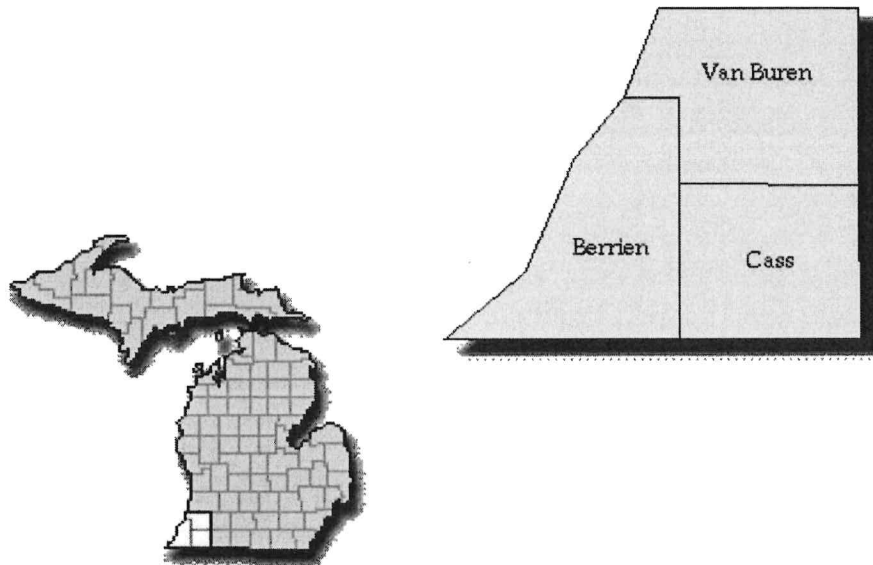


2023-2026 Multi Year Plan

FY 2026 ANNUAL IMPLEMENTATION PLAN

REGION IV AREA AGENCY ON AGING



Planning and Service Area

Berrien, Cass, Van Buren

Region IV Area Agency on Aging

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Christine Vanlandingham, CEO
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Regional Aging Representative

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Executive Summary

Instructions

Please include in the Executive Summary a brief description of the following (*note - if you need additional space, you may upload a Word document via the **Budget and Other Documents** tab):

A. Any substantive changes in priorities, plans, or objectives set by the Area Agency on Aging (AAA) for the use of federal and state funding during FY 2026. If none, indicate, "no" to the question: *"Have there been any substantive changes since the previous year?"*

B. How the AAA educates the public, its partners, and service providers on the Administration for Community Living (ACL) and the ACLS Bureau expectations regarding targeting older adults in the greatest social and/or economic need.

C. Progress made through advocacy efforts to date and focus of advocacy efforts in FY 2026.

D. AAA's successes over the past year, highlights of new services or other topics, as well as any anticipated challenges.

E. Ways in which your agency will support the Veteran population and a description of any partnerships and/or collaborations with Veteran service organizations within your region.

F. Please provide, in the spaces below, information on counties served, Federally Recognized Tribes in your Planning and Service Area (PSA), and accreditations awarded to your AAA.

Please provide demographic data in the chart below for your PSA (using the most currently available data from the American Community Survey (ACS), the Decennial Census Survey, and NAPIS--see chart entitled: *FY 26 AIP Demographic Data* in the Document Library).

Upload the required supplemental document entitled: **Contingency Planning**, addressing a contingency plan for lack of funding or in the event of a government shutdown/continuing resolution, in the **Budget and Other Documents** section

Have there been substantive changes since the previous year? (If yes, please describe below.)

☐ Yes ☒ No

Region IV Area Agency on Aging (RIV AAA), is a private, not-for-profit organization established in 1974 and designated by the Bureau of Aging, Community Living, and Supports (ACLS Bureau) to plan, develop, and implement services as guided through the federal Older Americans Act (OAA) of 1965 and its subsequent amendments. The Older Michiganians Act (OMA) was enacted by the State of Michigan in 1981 to build upon the efforts of the aging network through state resources. Guided by a mission to "Offer Choices for Independent Lives," RIV AAA's serves older adults, caregivers, and individuals with disabilities, targeting

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those with the greatest social and economic needs. The organization strives to empower individuals to maintain their independence and dignity through advocacy, education, and collaboration.

Educating the Public and Partners on ACL and ACLS Bureau Expectations

Region IV AAA has developed a comprehensive strategy to educate the public, partners and service providers on the Administration for Community Living (ACL) and the ACLS Bureau's expectations, primarily focusing on targeting older adults in the greatest social and/or economic need. This includes those who have historically been underserved.

Training and Capacity Building – RIV AAA provides training and educational resources and opportunities for staff, volunteers, partners, and providers inclusive of topics such as understanding the criteria for identifying older adults in greatest need, recognizing barriers faced by historically underserved populations, and implementing cultural humility into service delivery approaches.

Outreach and Engagement – Through targeted outreach efforts, RIV AAA engages stakeholders and community leaders to raise awareness about available services and resources for older adults in need. RIV AAA is also conducting stakeholder focus groups to identify and develop strategic action plans to resolve barriers to access for members of historically underserved communities.

Collaborative Partnerships – RIV AAA nurtures and supports a community of care comprised of over 100 partners and providers across multiple sectors including healthcare, home and community-based care, public health, arts, education, law enforcement, and more to address the diverse needs of older adults. Partner meetings are held bi-monthly during which opportunities for leveraging collective resources and developing innovative solutions to expand and ensure equitable access to services are explored.

Data-Driven Decision Making – RIV AAA utilizes data collection and analysis to inform decision making processes and identify gaps in service delivery. By collecting demographic data and soliciting feedback from older adults and caregivers, including those from historically underserved communities, RIV AAA and its partners, with whom it actively shares this information, can tailor outreach, engagement, and service delivery to better meet those served where they are.

Contractual Expectations and Support – RIV AAA requires annual contract providers to demonstrate how they meet expectations for targeting older adults in greatest need. RIV AAA is working towards offering annual contract providers increased support in the form of assisting with defining greatest social and/or economic need, data analysis of progress made towards serving a greater percentage of older adults in greatest social and/or economic need than their relative percentage of the total older adult population, and formal learning collaborative and technical assistance aimed at raising collective understanding and execution of strategies for continuous improvement. Through these concerted efforts, and by working together and prioritizing those in greatest need, RIV AAA is committed to promoting equity, inclusion, and dignity for all older adults, fostering a supportive and age-friendly community for all.

The RIV AAA Annual Implementation Plan (AIP) for the period of October 1, 2025 through September 30, 2026, sets forth a plan to continue to provide and improve upon a comprehensive coordinated system of services to assist aging adults in maintaining independence in their homes and communities. The corporation manages an array of grants and contracts for service delivery in southwest Michigan.

Advocacy and Focus for FY 2026

RIV AAA engages in a robust and comprehensive advocacy strategy focused on the development of a comprehensive long-term care service system to allow older adults to live quality lives in the settings of their choice, the development of local, state, and federal policies that foster and facilitate older individuals'

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ability to be valued and engaged members of their community across the lifespan, and the identification of policies that impact the health inequities experienced by older minority individuals and incorporating policy recommendations to address those disparities in RIV AAA advocacy priorities.

Policy priorities and objectives are determined with input from RIV AAA Advisory Council, RIV AAA Board of Directors, a broad coalition of community, state, and national partners and in response to local, state and federal legislative activity.

Because of advocacy across the State of Michigan, including Southwest Michigan, efforts around increases to the Ombudsman program and advocacy around the spend down to Medicaid were successful.

Current National Advocacy Priorities include:

- Supporting aging well at home through Older Americans Act programs and services
- Increasing the capacity of family and professional caregivers
- Reducing unnecessary institutionalization by protecting Medicaid home and community-based Services
- Connecting health care and aging sectors to reduce costs

Current State Advocacy Priorities include:

- Expanding access to MI Choice
- Increasing access to home and community-based services
- Supporting family and informal caregivers

Strategies to achieve those objectives include:

·*Improving Access/Information about long-term care:* Access to all options and services is enhanced through the implementation of Information & Assistance (I&A) staff presence at the Campus for Creative Aging and co-location with Disability Network of Southwest Michigan and PACE of Southwest Michigan at RIV AAA's main office.

·*Use of Technology:* Expanded use of technology tools including RIV AAA website and social media channels to inform consumers about public policy issues will inform and empower older adults to self-advocate.

·*Public Awareness:* RIV AAA works with varied public and private entities to increase awareness of issues facing older adults. This includes taking an advocacy role when participating on collaborative bodies that may be able to influence the direction of resource use. Those collaborative bodies include three county-level Human Services Collaborative Councils and regional Strategic Leadership Council. RIV AAA is also represented on the Advisory Council of each of the public transportation systems within its PSA.

·*Policy Analysis:* Key legislation at both the national and state level is analyzed for scope and seriousness of impact. The ongoing analysis of needs and barriers to independence translates into an evolving and fluid course for advocacy analysis and public policy.

·*Grassroots Advocacy (consumer engagement):* RIV AAA Advisory Council focuses on consumer advocacy issues and engages in activities to empower seniors to self-advocate.

·*Informing Legislators:* RIV AAA staff conduct regular face-to-face contact with elected officials and their staff to inform them of the impact of pending legislation on older adults in the service area. Additionally, RIV AAA staff provides direct testimony before elected officials, legislative committees, and others on issues of concern to older adults.

Other efforts RIV AAA is engaged in and will continue throughout FY26 include:

·Continuation and expansion of efforts launched through participating in the Aging Health Equity Planning project to identify and address the root causes of disparate health outcomes among minority older adults. Developing an actionable strategic plan to build community capacity and connectedness to impact

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systems-level policy changes thereby improving the health of minority older adults.

- Implementation of a Provider Employee Needs Fund to assist direct care workers who are experiencing hardship and preventing them from being able to meet the requirements of their position.

- Establish and operationalize a Direct Care Workforce Coalition to address recruitment, training, and retention challenges in the direct care workforce. The coalition includes home care providers, community-based organizations (e.g., Disability Network Southwest), and strategic partners (e.g., Michigan Works! and Michigan Rehabilitation Services). This initiative will prioritize recruitment of non-traditional employees, including individuals with disabilities, older workers, immigrants, and others who are often underrepresented in the workforce.

- Representation of AAA staff on the Berrien County TRIAD which focuses on the safety and wellbeing of seniors and efforts to launch/reinvigorate similar coalitions in Cass and Van Buren counties.

- Representation of AAA staff on all three county public transportation committees.

- Recruiting members to represent all three counties on the Michigan Senior Advocates Council.

Successes and Opportunities:

Over the last year, RIV AAA achieved several notable successes that significantly contributed to the advancement of its mission. The following accomplishments reflect not only the dedication and commitment of staff, volunteers, providers, and partners but also the resilience and strength of the community served:

Awards & Recognitions:

- The Arts & Aging Partnership was recognized at the national level for bringing together the local arts, public health, higher-ed, philanthropy, and business community to harness the power of the arts to inform and engage Southwest Michigan residents about public health needs like dementia. The project won the 2024 Aging Innovations Award in the Healthy Aging category from USAging at its Annual Conference and Tradeshow.

- Region IV Area Agency on Aging CEO, Christine Vanlandingham, was named the recipient of the 2024 National Excellence in Leadership Award at USAging's Annual Conference and Tradeshow.

Program Development:

- Implementation of Integrated Care at Home, providing in-home primary care, chronic and transitional care management, remote patient monitoring, and behavioral health and nutrition counseling.

- Continued evolution of the Arts & Aging Partnership of Southwest Michigan by incorporating the visual arts. In collaboration with South Haven Center for the Arts, established a community art initiative, entitled "Window to Our World." The community art project enhances the bond between the caregiver and care recipient and helps the community see the importance of caregivers. Through this project, community members will have a better understanding of the role of caregivers, and how individuals and organizations can better support caregivers through their caregiving journey.

- Celebrated 50 years of serving Southwest Michigan. Honored 50 older adults over the age of 60 with the "50 over 60" campaign. Those honored were nominated by community members because they are investing their energy, time, and wisdom in making others' lives better. Through this campaign, AAA was able to highlight older adults of all ages in the community who are making a difference and inspiring others.

- Partnered with the Chamber to host a Business After Hours to help the business sector connect to the mission of the agency.

- Awarded \$1,000,000 through HUD's Older Adults Home Modification Grant to address critical housing needs within underserved communities by providing comprehensive home modification services for low-income older adults and individuals with disabilities. The program utilizes a community-based

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approach to make homes safer, more accessible, and supportive of the residents' health and independence. Through home modifications, the program aims to enhance the quality of life for residents, reduce the risk of injury, and promote independent living within the community.

- Implemented, in partnership with Area Agencies on Aging across the state, new virtual support groups for caregivers.

- Awarded the No Wrong Door grant opportunity in collaboration with AAA Health Solutions, a partnership with Region IV AAA, AAA of Western Michigan, and Senior Resources.

- Welcomed Michigan Attorney General Dana Nessel to the Campus for a presentation about scams targeting older adults. Attendees learned how to recognize and thwart a variety of potential scams, as well as received resources for consumer protection. The event, also in partnership with State Representative Joey Andrews, had over 70 community members in attendance and garnered heavy press coverage.

- Award of additional dollars for the Safe Haven Replication Grant from WellWise Services to provide immediate and ongoing safety and support for vulnerable adults impacted by abuse, neglect, or exploitation and to foster community partnerships for collective impact in this critical space.

- Recently approved by Centers for Medicare and Medicaid Services to deliver a specialized model of dementia care, Guiding an Improved Dementia Experience (GUIDE). RIV AAA partners with home and community-based, primary, specialty, and mental health care partners and providers across Southwest Michigan, developing structural linkages for seamless referral and care coordination to ensure every individual and caregiver impacted by dementia receives comprehensive, tailored assessment, care planning, supports and services for improved quality of life and ability to remain living in their home.

- Continued efforts to identify inequities in access to services. AAA worked with MiGen, the Michigan LGBTQ+ Elders Network, to review AAA policies and provide Culturally Responsive Training to AAA staff. Once completed, AAA was officially credentialed as a LGBTQ+ older adult friendly organization.

- Awarded a Community Care Corps grant to launch the Friendly Helper Program, an innovative, volunteer-driven initiative addressing critical health-related social needs including social isolation, transportation barriers, food security, emergency preparedness, and caregiver respite, particularly among underserved and rural populations.

- Selected to participate in USAging's 2025 Community Care Hub National Learning Community, a national initiative designed to strengthen operational readiness, service capacity, and contractual partnerships with healthcare entities to address health-related social needs, enhancing Region IV AAA's leadership in integrated, community-based care.

Supporting the Veteran Population

In FY 2026, RIV AAA will continue its focus on supporting the veteran population. The agency's veteran services include:

- Veteran Training: RIV AAA will coordinate with the Older Adult Veteran Coordinator, as well as local agencies to conduct annual veteran training for staff, ensuring they understand the unique needs of veterans.

- Veteran Service Partnerships: RIV AAA partners with veteran service organizations to improve access to services for veterans and their families.

- Veteran Stand Down: RIV AAA will continue to participate in veteran stand-down events to provide veterans with critical services and resources.

- Veteran Connector Status: RIV AAA will continue to develop veteran connector status and explore new ways to strengthen collaborations with local veteran service organizations.

- Veteran Language: RIV changed language on multiple forms to be more inclusive of all veterans, utilizing the prompt, "Have you, or a member of your household served in the military?"

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Anticipated Challenges and Opportunities

It's vital to acknowledge that future successes do not come without challenges and the opportunities they present. Opportunities anticipated by RIV AAA in FY26 include:

·*Increased Demand for Support and Services:* The number of adults ages 60 and older continues to grow and along with, the number of family members, friends, and neighbors needing to step into the role of informal caregivers.

·*Increased Complexity of Need:* Older adults and their care partners present increasing complexities in their needs due to the growing prevalence of mental health and chronic health conditions such as depression, heart disease, diabetes, respiratory conditions, and dementia.

·*Budgetary Constraints:* in the face of increasing demand, funding allocations to home and community-based services as well as capitated payment rates for the MI Choice Waiver continue to not keep pace with the rising costs of service delivery due to economic inflation. This imbalance poses a significant challenge to maintain or expand services.

·*Recruitment and Retention:* Shortages in direct care, social work, and nursing workforce and high volunteer turnover make recruiting and retaining qualified and diverse staff and volunteers challenging for RIV AAA and its partners and providers.

·*IT Interoperability and Community Information Exchange:* Ensuring seamless interoperability of IT systems and fostering community information exchange is a essential strategy to position RIV AAA and the network of home and community-based organizations to more meaningfully integrate their services into the healthcare continuum and build community capacity to best assess and meet the social determinant of health and health-related social needs of older adults, people with disabilities, and caregivers. Despite these challenges, RIV AAA is committed to ensuring that older adults in Southwest Michigan continue to receive the support they need. Through innovative programs, strategic partnerships, and continued advocacy, RIV AAA will work to enhance the lives of older adults and address emerging needs in the community.

Planning and Service Area (counties) Served.

Berrien, Cass, and Van Buren counties

Is there a Federally Recognized Tribe within your PSA? (If yes, list below.)

☒ Yes ☐ No

Pokagon Band of Potawatomi Indians

Please list any accreditations your AAA has received.

National Committee for Quality Assurance (NCQA) Accreditation in Case Management for Long-Term Services and Supports

Inform USA Certification of Information & Access Staff

Demographic Data for PSA

Population	Census (most current data available)	AAA Population Served Last Fiscal Year (NAPIS)
Total Population 60+ (%)	28.17	2.82
Race/Ethnicity 60+ (%)		
a. Black/African American	7.23	13.83
b. Asian	0.83	0.51

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c. White	91.46	83.09
d. Hispanic/Latino	1.96	1.58
e. Other	0.48	3.06
Total 60+ Population in Rural areas (%)	100.00	99.95
Total 60+ Population at Poverty Level (%)	10.15	31.63
LGBTQ+ Clients served		0.78
Total 85+ Population (%)	9.12	6.33
Total 60+ Non-English-Speaking Population (%)	3.18	0.09

Did the AAA upload the required supplemental document addressing a contingency plan for lack of funding or in the event of a government shutdown?

☒ Yes ☐ No

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County/Local Unit of Government and Tribal Review

The Michigan Department of Health and Human Services (MDHHS) recognizes the importance of local collaboration including consultation of the complete AIP for each AAA with their county/local unit of government to encourage and foster collaboration between Older Americans Act (OAA) programming and that provided by other non-OAA resources.

MDHHS also has an established relationship of working directly with the Federally Recognized Sovereign Indian Tribes of Michigan (Tribes). As part of this work, MDHHS recognizes the importance of Tribal notification, including consultation of the complete AIP for each AAA within their PSA to encourage and foster collaboration between Title III and Title VI programming as outlined in the OAA.

The AAA must send a notification of the complete AIP to the chairperson of each County Board of Commissioners, and to any Tribes within the Planning and Service Area (PSA) for notification and consultation. Notification can be sent via U.S. Mail or by electronic means, with delivery and signature confirmation, no later than June 20, 2025. For a PSA comprised of a single county or portion of the county, notification of the AIP is to be sent to each local unit of government. AAAs are encouraged to provide a copy of their official press release for public hearing to their county/local unit of government and Tribes within the PSA as well. The AAA may use electronic communication, including e-mail and website-based documents, as an option for local government notification and consultation of the AIP. To employ this option, the AAA must do the following:

- Send a letter through the U.S. Mail, with delivery and signature confirmation, or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft AIP on the AAA's website.
- Offer to provide a printed copy of the AIP via U.S. Mail, or an electronic copy via e-mail, if requested.
- Be available to discuss the AIP with local government officials, if requested.
- Request e-mail notification from the local unit of government of their feedback of the AIP or concerns.

Instructions

Describe the AAA's efforts, including use of electronic communication, to distribute the AIP to the appropriate county and/or local units of government, and Tribes for notification and consultation, to gain support.

Describe any current and future collaborative efforts with Tribe(s) within your PSA including any anticipated outreach efforts. AAAs, note whether your Policy and Advisory Boards have representation from the Tribe(s) and/or elders within your PSA. If not, describe the AAAs efforts to build and foster relationships with the Tribe(s) to encourage potential representation on these respective boards.

Region IV Area Agency on Aging (RIV AAA) will send a letter along with a printed copy and email with an

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attached copy of the final draft Annual Implementation Plan on June 21, 2025 to the chief elected official and administrator of Berrien, Cass and Van Buren County Commissions and the Pokagon Band of Potawatomi Tribal Council. The letter will be sent with delivery and signature confirmation receipt required, and the email sent with delivery and read receipt requested. The letter and email will inform County Commissions and the Tribal Council that RIV AAA staff are available to answer questions or address concerns related to the Annual Implementation Plan if requested and welcome their comments and feedback. The letter and email will request approval of the Annual Implementation Plan by July 22, 2025 and inform the Commissions that if no response is received, RIV AAA will assume passive approval.

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Public Hearings

At least one public hearing on the FY 2026 AIP must be held in the PSA. Hearing(s) must be made accessible to all. Persons need not be present at the hearing(s) to provide testimony. E-mail and written testimony must be accepted for at least a 30-day period beginning when the summary of the AIP is made available.

The AAA must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the public about the hearing(s). Acceptable posting methods include but are not limited to paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA; press releases and public service announcements; and a notice to AAA partners, service provider agencies, older adult organizations, and local units of government. See Operating Standards for AAAs, Section B-2 #3. The public hearing notice should be available at least 30 days in advance of the scheduled hearing. This notice must indicate the availability of a summary of the AIP at least 14 days prior to the hearing, along with information on how to obtain the summary. All components of the AIP should be available for the public hearing(s).

Instructions

Complete the chart below regarding your public hearing(s). Include the date, time, number of attendees and the location city and accessibility of each public hearing. Please scan any written testimony (including emails received) as a PDF and upload under the Budget and Other Documents tab.

The AAA should upload a copy of your official notice and/or press release(s) for a public hearing. Please describe the strategy/approach employed to encourage public attendance and testimony on the AIP. Describe all methods used to gain public input and any impacts on the AIP. Describe how the AAA factored the accessibility issues of the service population and others in choosing the format of the meeting.

AAAs are also required to upload document entitled: *Newspaper and Media Outlets Notification List*.

For FY 2026, AAAs please describe how the agency involved the Policy and Advisory Boards with encouraging and promoting participation at the public hearings(s). Did a representative from either the Policy and/or Advisory Board attend the hearing(s).

Date	City	Time	Barrier Free?	No. of Attendees
04/28/2025	St. Joseph	02:00 PM	Yes	78

RIV AAA held its public hearing for the AIP in conjunction with its annual Legislative Forum to ensure maximum public visibility, interest, and attendance. The public hearing was held in an accessible venue at RIV AAA's Campus for Creative Aging. Notice for the public hearing along with instructions for accessing a draft plan via RIV AAA's website and submitting oral, email, and written testimony was sent to small and large-scale local news outlets across all three counties, administrators of Berrien, Cass, and Van Buren County Commissions and representatives of the Pokagon Band of Potawatomi Tribal Council and posted

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on the RIV AAA website on April 14, 2025. RIV AAA's draft AIP was made available both on its website and to the general public by request on April 14, 2025. Between March 19, 2025, and April 28, 2025, invitations to the public hearing and legislative forum were also widely distributed across RIV AAA's social media, emailed to community partner distribution lists multiple times, and featured in the Generations column of the Herald Palladium. RIV AAA staff and members of the Board of Directors and Advisory Council were asked to widely distribute invitations to the public hearing to their mailing lists, and Advisory Council and Board Members with connections within minority and underserved communities were asked to assist in ensuring diverse representation and attendance of older adults and caregivers. RIV AAA continued to accept all forms of testimony through May 9, 2025; no email or written testimony was received. All oral and public input were incorporated into and informed development of the AIP.

Public Hearing held at Region IV Area Agency on Aging Campus for Creative Aging – April 28, 2025

In addition to RIV AAA staff, community members and the following elected officials and/or their representatives were in attendance: Representatives Joey Andrews, Steve Carra, Brad Paquette, and Pauline Wendzel, Senators Jonathan Lindsey and Aric Nesbitt, Congressman Bill Huizenga and Tim Walberg and Senator Gary Peters. Community members in attendance included older adults, people with disabilities, caregivers, annual contract providers, direct purchase providers, direct care workers, and community partners.

Barry Nabonzny, Owner of Right at Home Southwest Michigan asked "if over the last few years is RIV AAA seeing a higher demand for more complex care?"

A community member mentioned that she was having a rough time with losing her husband, son and three good friends and was feeling overwhelmed. She stated that she couldn't afford counseling.

On June 2, 2025 and June 16, 2025, the draft AIP and results from the public hearing were presented to the Advisory Council and Board of Directors respectively. The Advisory Council unanimously voted to recommend approval of the AIP to the Board of Directors, and the Board of Directors unanimously voted to approve the AIP for submission to the State Commission on Aging.

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Access Services

Access services may be provided to older adults directly through the AAA without a direct service provision request. These services include Care Management; Care Transition Coordination & Support; Caregiver Case Management; Caregiver Information and Assistance; Caregiver Options Counseling; Case Coordination and Support; Disaster Advocacy and Outreach Programs; Information and Assistance; Options Counseling; Outreach (with specific attention to underserved populations); and Transportation. If the AAA is planning to provide any of these access services directly during FY 2026, complete this section.

Instructions

Select from the list of access services those services the AAA plans to provide directly during FY 2026, and provide the information requested.

Care Management

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$0.00	<u>Total of State Dollars</u>	\$53,861.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Care Management to older adults that promotes independence and quality of life and enables them to continue living safely in their home.

Activities:

- Continue to implement a holistic, person-centered model of care coordination that allows Supports Coordinators the flexibility to provide care, support, and services based on the unique needs and preferences of participants and their chosen or legal representative(s).
- Provide comprehensive telephonic and in-person professional assessment, consultation, care planning, and service arrangement and monitoring.
- Provide ongoing home and community-based services and supports to meet needs as identified during the person-centered planning process.
- Provide health coaching and motivational interviewing to engage and empower participants and their caregivers towards action that improves management of chronic conditions, self-care, and overall quality of life.
- Provide conflict-free information and assistance in accessing community resources.
- Engage participants in person-centered emergency preparedness planning.
- Provide seamless transition of participants among programs as changes in eligibility allow.
- Assure high quality service is being provided through annual participant surveys.
- Implement continuous quality improvement efforts to meet or exceed ALCS Bureau Quality Outcome Measures.
- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants and improve skills in completion of job tasks.
- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for

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consumers served.

- Perform peer reviews of at least 10% of active caseload annually.

Case Coordination and Support

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$70,500.00	<u>Total of State Dollars</u>	\$39,522.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Case Coordination & Support to older adults that promotes independence and quality of life and enables them to continue living safely in their home.

Activities:

- Continue to implement a holistic, person-centered model of care coordination that allows Supports Coordinators the flexibility to provide care, support, and services based on the unique needs and preferences of participants and their chosen or legal representative(s).
- Provide comprehensive telephonic and in-person professional assessment, consultation, care planning, and service arrangement and monitoring.
- Provide ongoing home and community-based services and supports to meet needs as identified during the person-centered planning process.
- Provide health coaching and motivational interviewing to engage and empower participants and their caregivers towards action that improves management of chronic conditions, self-care, and overall quality of life.
- Provide conflict-free information and assistance in accessing community resources.
- Engage participants in person-centered emergency preparedness planning.
- Provide seamless transition of participants among programs as changes in eligibility allow.
- Assure high quality service is being provided through annual participant surveys.
- Implement continuous quality improvement efforts to meet or exceed ALCS Bureau Quality Outcome Measures.
- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants and improve skills in completion of job tasks.
- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.
- Perform peer reviews of at least 10% of active caseload annually.

Information and Assistance

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$51,000.00	<u>Total of State Dollars</u>	\$18,819.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Information and Assistance (I&A) that promotes independence and quality of life and empowers older adults and caregivers to make informed decisions

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and access community resources needed to support their long-term care choices.

Activities:

- Facilitate person-centered, conflict-free access to information and home and community-based services for individuals (professional and community) by answering all requests timely and completely.
- Conduct screening, assessment, and intake for appropriate program referrals.
- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants, and to improve skills in completion of job tasks.
- Maintain MMAP counselor certification for all I&A staff. New staff hired will become MMAP certified within one year of hire.
- Continue staff development and training to expand the number of AIRS certified staff.
- Maintain a resource database to ensure individuals are provided with an array of current and accurate information to meet the needs of the aging, disability, and caregiver population in the service area.
- Assure high quality service is being provided by annually surveying participant satisfaction levels.
- Continue to extrapolate and analyze data from the I&A data system for outcome-driven quality improvement.
- Develop and implement a peer review documentation process.
- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.
- Provide education and outreach at senior centers, health fairs, housing complexes, and other professional agencies and events.

Outreach

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$10,000.00	<u>Total of State Dollars</u>	\$0.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide inclusive, culturally and linguistically appropriate outreach and communication that engages older adults, caregivers, community groups, and human services agencies and builds awareness of and access to aging resources and information.

Activities:

- Facilitate conflict-free outreach and communication about aging information and resources.
- Create materials that reflect the diverse population served in a variety of formats including, but not limited to, print, digital, social media, presentations, events, and other efforts to reach broad and diverse audiences.
- Build relationships with a wide range of community-based partners including, but not limited to, health providers, community focal points, and organizations and leaders within the community known and trusted for serving members of minority and underserved populations.
- Provide Outreach staff in-services and training opportunities specifically designed to increase knowledge and understanding of aging services, providers, and population served, and to improve skills in completion of job tasks.
- Utilize analysis of local population health data and aging service and program delivery data for

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outcome-driven quality improvement and development of a data-informed targeting strategy aimed toward communities and geographies with higher percentages of older adults with low-incomes, multiple chronic health conditions, and/or experiencing poor health outcomes.

- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.

- Provide education and outreach at senior centers, health fairs, housing complexes, community groups, religious organizations, health care facilities, and other professional agencies and events.

Options Counseling

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$0.00	<u>Total of State Dollars</u>	\$108,173.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Options Counseling to older adults that promotes independence and quality of life and empowers them to make informed decisions and access community resources needed to support their long-term care choices.

Activities:

- Continue to implement a holistic, person-centered model of care coordination that allows Supports Coordinators the flexibility to provide care, support, and services based on the unique needs and preferences of participants and their chosen or legal representative(s).

- Provide comprehensive telephonic and in-person professional assessment, consultation, care planning, and service monitoring.

- Provide immediate and short-term home and community-based services and supports to meet needs as identified during the person-centered planning process.

- Provide health coaching and motivational interviewing to engage and empower participants and their caregivers towards action that improves management of chronic conditions, self-care, and overall quality of life.

- Provide conflict-free information and assistance in accessing community resources.

- Engage participants in person-centered emergency preparedness planning.

- Provide seamless transition of participants among programs as changes in eligibility allow.

- Assure high quality service is being provided through participant exit surveys.

- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants and improve skills in completion of job tasks.

- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.

- Perform peer reviews of at least 10% of active caseload annually.

Care Transition Coordination and Support

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$0.00	<u>Total of State Dollars</u>	\$53,879.00

Geographic area to be served

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Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Care Transition Coordination and Support to older adults that promotes independence and quality of life and empowers them to make informed decisions and access community resources needed to support their long-term care choices.

Activities:

- Continue to implement a holistic, person-centered model of transitional care coordination that allows Supports Coordinators the flexibility to provide care, support, and services based on the unique needs and preferences of participants and their chosen or legal representative(s).
- Provide comprehensive telephonic and in-person professional assessment, consultation, care planning, accessible housing support, assistance with ensuring appropriate follow-up with primary care, and service arrangement and monitoring.
- Provide immediate and short-term home and community-based services and supports to meet needs as identified during the person-centered planning process.
- Provide health coaching and motivational interviewing to engage and empower participants and their caregivers towards action that improves management of chronic conditions, self-care, and overall quality of life.
- Provide conflict-free information and assistance in accessing community resources.
- Engage participants in person-centered emergency preparedness planning.
- Provide seamless transition of participants among programs as changes in eligibility allow.
- Assure high quality service is being provided through participant exit surveys.
- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants and improve skills in completion of job tasks.
- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.
- Perform peer reviews of at least 10% of active caseload annually.

Caregiver Case Management

<u>Starting Date</u>	10/01/2025	<u>Ending Date</u>	09/30/2026
<u>Total of Federal Dollars</u>	\$27,396.00	<u>Total of State Dollars</u>	\$0.00

Geographic area to be served

Berrien, Cass, Van Buren

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

Goal: Provide comprehensive, person-centered Caregiver Case Management to caregivers that promotes independence and quality of life and engages caregivers to make informed decisions and access community resources that enables them to continue in their role as a caregiver.

Activities:

- Continue to implement a holistic, person-centered model of care coordination that allows Supports Coordinators the flexibility to provide care, support, and services based on the unique needs and preferences of participants.
- Provide comprehensive telephonic and in-person professional assessment, consultation, care planning,

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and service monitoring.

- Provide conflict-free information and assistance in accessing community resources.
- Provide immediate and short-term home and community-based services and support to meet needs as identified during the person-centered planning process.
- Provide health coaching and motivational interviewing to engage and empower participants towards action that improves management of caregiver role, self-care, and overall quality of life.
- Assure high quality service is being provided by annually surveying participant satisfaction levels.
- Provide staff in-services and training opportunities specifically designed to increase knowledge and understanding of the program and participants and improve skills in completion of job tasks.
- Engage in interdepartmental training, collaboration, and horizontal process improvement to explore and implement efficiencies that maximize staff expertise to provide seamless transition and support for consumers served.
- Perform peer reviews of at least 10% of active caseload annually.

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Program Development Objectives

Please provide information for any new goals and objectives that are proposed by the AAA during FY 2026.

For FY 2026, this is also where you will provide updates to the current Approved MYP Objectives.

Instructions

The AAA may enter a new goal in the appropriate text box. It is acceptable, *though not required*, if some of the AAA's goals correspond to the ACLS Bureau's state plan goals. There is an entry box to identify which, if any, state plan goal(s) correlate with the entered goal. See the Document Library for Michigan's State Plan on Aging for FY 2024 – FY 2026.

A narrative for each goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box.

Complete the information in the text boxes for the timeline, planned activities and expected outcomes for each objective (see Document Library for additional instructions on completing this section).

*Please work with your Regional Aging Representative on updating current MYP objectives.

Area Agency on Aging Goal

- A. Improve the accessibility of services to Michigan's communities and people of color, immigrants, and LGBTQ+ individuals.**

State Goal Match: 1

Narrative

RIV AAA is committed to diversity, equity, and inclusion through improving the accessibility of services to minority populations in southwest Michigan inclusive of people of color, immigrants, and LGBTQ+ individuals by ensuring AAA staff and subcontractors are trained in diversity, equity and inclusion, including ability to recognize and address implicit bias, ensuring that programming and outreach is culturally sensitive and welcoming to all, and ensuring that culturally and linguistically appropriate outreach is directed to non-English speaking persons and that staff and providers are trained to adapt to the diverse cultural needs.

Objectives

1. Increase the number of area agency staff, providers, and caregivers trained in implicit bias, cultural competences, and root causes of racism.

Timeline: 10/01/2025 to 09/30/2026

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Activities

1. Develop and execute a strategic diversity, equity, and inclusion orientation and training plan inclusive of RIV AAA staff, volunteers, and provider network.

1. Expand access to diversity, equity and inclusion resources, education, and training available on topics such as implicit bias, cultural competence, root causes of racism.

Expected Outcome

Consumers will receive services provided by culturally competent professionals.

FY24 Progress:

- Quality & Compliance and Human Resources staff track participation of staff, providers, caregivers, and volunteers in training focused on implicit bias, cultural competency, cultural humility, and root causes of racism, ensuring annual growth in the number of individuals trained.

- Staff and volunteers complete DEI orientation and training within 90 days of hire or enrollment and at least annually thereafter.

- Continued expansion of DEI educational resources available 24/7 via the online professional development platform, Relias, and extending these resources to volunteers, caregivers, and providers through the caregiver education platform, Trualta.

- Annual agency-wide conversations are held to reaffirm organizational group agreements, reinforcing each staff member's personal accountability to foster an inclusive culture grounded in respect and belonging.

- The staff-led Respect and Belonging Committee, comprising members from all service lines, meets quarterly to coordinate DEI efforts, discuss systemic improvements, and lead project-specific initiatives; typically, 10-30% of staff voluntarily participate.

- The Respect and Belonging Committee is coordinating DEI-focused "lunch and learn" sessions featuring external speakers, with plans to extend these educational opportunities to volunteers and providers.

- Increased engagement of staff across all service lines in community-based cultural events and activities that reach diverse populations.

- Monthly internal agency newsletter features a "Respect and Belonging Corner," sharing educational resources such as articles and videos, designed to enhance staff awareness and engagement with DEI topics.

- All staff and volunteers complete Dementia Friends training certification, increasing dementia awareness, enhancing communication skills, and reducing stigma.

- Over 90% of staff participated in MiGen's LGBTQ+ older adults training, significantly increasing organizational cultural sensitivity and competency in serving LGBTQ+ communities.

2. Increase services provided to black, indigenous and people of color and the LGBTQ+ communities.

Timeline: 10/01/2025 to 09/30/2026

Activities

1. Build structural linkages to organizations within the community known and trusted for serving members of minority and underserved populations.

1. Collect and analyze local population health and participant data such as race, ethnicity, language preference, gender identify, sexual orientation, health outcomes, social determinant of health barriers and needs, and geography to execute a DEI data-informed approach to design, outreach, delivery, and continuous quality improvement of programs and services.

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Expected Outcome

Increased service outreach, accessibility, and delivery to members of minority and underserved communities.

FY24 Progress:

- Region IV AAA continued data-driven DEI efforts by systemically collecting and analyzing comprehensive demographic data, including race, ethnicity, sexual orientation, and gender identity, across service lines. This approach supports personalized, equitable service provision and allows targeted outreach adjustments based on data-driven insights.
- Stakeholder focus groups identified barriers and strategic actions to improve access to BIPOC and LGBTQ+ communities. Additionally, Region IV AAA achieved official credentialing as an LGBTQ+ older adult-friendly organization through partnership and comprehensive policy review and training with MiGen.
- On-site, in-person Information & Assistance services continued at trusted locations, including United Christian Services in Van Buren County and Neighbor by Neighbor in southwest Berrien County, with strengthened relationship ongoing with Pokagon Health Services in Cass County.
- Outreach and Communications actively participated in multiple culturally significant community events, including Pride Festivals in Dowagiac and Benton Harbor, Juneteenth celebrations, and the Pokagon Band of Potawatomi's back-to-school event, collectively engaging over 700 diverse community members.
- AAA established an ongoing community presence by hosting monthly informational booths at Benton Harbor Library, consistently engaging lower-income and minority residents, and actively participated in Strong Women of Faith's Health Awareness Day, effectively connecting with community member from Benton Harbor's faith-based and predominantly black communities.
- Staff demonstrated active allyship through visible symbols (ally pins) worn by approximately half of staff, directly supporting participant comfort and inclusive service delivery.

3. Increase availability of linguistic translation services and communications based on the cultural needs in Berrien, Cass, and Van Buren counties.
Timeline: 10/01/2025 to 09/30/2026

Activities

1. Expand linguistic translation of outreach and education materials across all mediums.
1. Strengthen and utilize partnerships with organizations within the community known and trusted for serving members of minority and underserved populations for review and input on the development of outreach and education materials across all mediums to ensure cultural and linguistically appropriate service.
1. Provide linguistic translation services to individual consumers for oral and written communication according to their person-centered needs.

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Expected Outcome

Consumers will receive culturally and linguistically appropriate information and services.

FY24 Progress:

- Region IV AAA provided extensive linguistic translation support through comprehensive training of all staff in accessing and effectively utilizing Language Line Solutions , with 100% training completion across participant and community-facing service lines.
- AAA expanded access for Spanish-speaking community members by hiring bilingual staff member in both ICAH and MI Choice programs, increasing personalized, culturally responsive communication and support.
- Strategic partnership with Voices for Health resulted in the development of a dedicated Spanish line , providing immediate interpreter support and direct connections to AAA services. Additionally, the AAA main brochure and key program brochures were professionally translated into Spanish.
- Outreach teams collaborated with a Spanish-speaking intern, translating numerous additional print materials into Spanish, enhancing AAA's ability to effectively reach Spanish-speaking community members with culturally relevant information.
- AAA actively engages community leaders and organizations recognized and trusted by minority and underserved populations to solicit their feedback and expertise in developing outreach and educational materials, ensuring communications are culturally and linguistically responsive and appropriate.

B. Expand the reach of information and awareness of aging network services, ensuring all older adults and caregivers can access culturally and linguistically appropriate information and have awareness of and access to quality services where and when they need them.

State Goal Match: 2, 3

Narrative

Central to RIV AAA's mission and vision of *Offering Choices for Independent Lives* so that through choice and range of service, every aging adult lives a quality life is empowering older adults and caregivers with information needed to make informed decisions. Because navigating the complex continuum and web of health and human services is challenging for both community members and health and human service professionals, RIV AAA pursues a multi-faceted strategic approach to expanding outreach and awareness throughout the planning and service area.

Objectives

1. Promote awareness of and access to programs and services available for older adults and caregivers through the AAA and its network of providers and partners that expand their ability to make informed decisions and support quality of life and independence.
Timeline: 10/01/2025 to 09/30/2026

Activities

1. Build structural linkages to organizations within the community known and trusted for serving members of minority and underserved populations.
1. Continue to develop and maintain strong working relationships with professional referral sources across the health and human services continuum of care.
1. Develop and execute a strategic marketing and communications plan informed by the evolving needs of older adults and caregivers and analysis of local population health and participant data.

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Expected Outcome

Older adults and caregivers will have access to and receive information and services that support informed decision-making, quality of life, and independence.

FY24 Progress:

- Reestablished and maintained structural linkages with community organizations and leaders through bimonthly Partner Network meetings. The most recent meeting engaged 40+ community partners, facilitating collaboration on outreach and improving access to aging services.

- Staff across all service lines actively participated in numerous boards, councils, and committees, including but not limited to Berrien Bus Local Advisory Committee, Cass County Transportation Authority Local Advisory Committee, Van Buren County Transportation Authority Local Advisory Council, Berrien County Human Services Coordinating Council, Cass County Human Services Coordinating Council, Van Buren County Human Services Coordinating Council, Healthy Berrien Consortium and its Assessment and Social Cohesion Workgroups, and Berrien County TRIAD, significantly strengthening collaborative relationships and cross-sector engagement.

- Actively participated in over 37 community outreach events and presentations, both in-person and virtual, reaching over 3,000 community members, partners, and stakeholders. Highlights included the Annual Senior Expo, Antwerp Senior Expo, and legislative forums, significantly increasing community engagement and awareness.

- Partnered with the Herald Palladium to successfully host the Annual Senior Expo, attracting approximately 800 older adults, caregivers, and community members who received direct access to AAA resources and personalized interactions with AAA staff.

- Expanded the Safe Haven program replication in partnership with Adult Protective Services (APS) to provide rapid response care management to older adult victims of abuse, significantly enhancing service availability and improving collaboration with APS across all three counties.

- Provided Information & Assistance outreach services at community-based sites: United Christian Services (Van Buren County) and Neighbor by Neighbor (south Berrien County), increasing localized service accessibility.

- Conducted bi-weekly radio interviews and weekly columns in The Herald Palladium, spotlighting AAA programs and services, thereby increasing public awareness and community engagement substantially.

- Enhanced monthly community communications through two newsletters (AAA, Caregiver) reaching over 2,000 readers, reflecting a more than 50% increase in subscriptions and engagement compared to the previous year.

- Utilized AAA's 50th Anniversary as a focal point to spotlight agency programs and activities, hosting a "Business After Hours" event attended by over 75 local business professionals and recognizing "50 over 60" community leaders, successfully elevating AAA's community profile and fostering additional outreach opportunities.

- Conducted targeted mailings providing AAA resource and class information to over 645 community members and connected with 20 community businesses, expanding potential client and volunteer networks.

C. Promote social interaction and connectedness, including expanding access to technology and transportation.

State Goal Match: 1, 2

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Narrative

According to a 2020 report by the National Academies of Science, Engineering, and Medicine on Social Isolation and Loneliness in Older Adults, approximately one-fourth of older adults living in the community are socially isolated and an even greater number experience loneliness despite having social connections. The report further indicates that individuals in immigrant and LGBTQ+ communities are at higher risk and outlines the resultant significant health risks. While contributing factors to social isolation and loneliness are likely different for older adults, people with disabilities and caregivers, the health risks are just as significant and the rates of incidence also high*. Developing and coordinating services and supports that reduce social isolation and loneliness will help improve quality of life, health, and independence of those in the planning and service area.

*Emerson, E., Fortune, N., Llewellyn, G., & Stancliffe, R. (2021). Loneliness, social support, social isolation and wellbeing among working age adults with and without disability: Cross-sectional study. *Disability and health journal*, 14(1), 100965. <https://doi.org/10.1016/j.dhjo.2020.100965>

Hajek, A., Kretzler, B., & König, H. H. (2021). Informal Caregiving, Loneliness and Social Isolation: A Systematic Review. *International journal of environmental research and public health*, 18(22), 12101. <https://doi.org/10.3390/ijerph182212101>

Objectives

1. Expand access to and opportunities for virtual and in-person social and community engagement of older adults, people with disabilities, and caregivers.

Timeline: 10/01/2025 to 09/30/2026

Activities

1. Explore opportunities to build partnerships and contribute to collective impact strategies to improve and develop transportation solutions.

1. Promote opportunity to become a friendly caller volunteer among older adults and people with disabilities reporting social isolation or loneliness.

1. Explore user-friendly virtual platforms to promote social interaction and connectedness between older adults, people with disabilities, and caregivers.

1. Promote awareness of and expand opportunities for creativity, learning, growth and purpose through the Campus for Creative Aging.

1. Support advocacy efforts to expand broadband access.

1. Establish local Dementia Mindsgroup and explore partnerships for further expansion of Dementia Minds groups across Berrien, Cass, and Van Buren counties.

1. Develop and conduct a comprehensive assessment of the characteristics, needs, and preferences of caregivers in Berrien, Cass, and Van Buren counties to execute a data-informed approach to design, outreach, delivery, and continuous quality improvement of programs and services.

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Expected Outcome

Older adults, people with disabilities, and caregivers will have access to meaningful opportunities for social and community engagement.

FY24 Progress:

- Staff continued active participation in local transportation advisory councils including Berrien Bus , Cass County Transportation Authority, and Van Buren County Transportation Authority. These efforts facilitated community partnerships and advanced collective strategies to improve transportation access and reduce mobility barriers for older adults and people with disabilities.

- Expanded opportunities for older adults and individuals with disabilities to volunteer as Friendly Callers, providing meaningful engagement for volunteers and directly addressing social isolation and loneliness among community members. Staff across service lines identified and referred participants experiencing isolation to these volunteer services, resulting in measurable reduction in reported loneliness.

- Promoted and expanded creative, educational, and purposeful engagement opportunities through the Campus for Creative Aging. Offerings included Computer Learning Center classes (6 classes, 10 participants), Kinship support programming (2 presentations, 15 attendees; 9 support group sessions, 15 attendees), and various evidence-based and healthy lifestyle classes.

- Conducted a comprehensive Caregiver Community Needs Assessment, with active participation from 159 caregivers across Berrien, Cass, and Van Buren counties. Findings will inform data-driven approaches for program design, targeted outreach, enhanced service delivery, and continuous quality improvement in caregiver support.

- In collaboration with other AAAs statewide, successfully implemented and sustained four monthly virtual support groups for caregivers (general, dementia, professional, and kinship) and partnered with Corewell Health, the Alzheimer's Association, and the Parkinson's Foundation to host three monthly in-person support groups at the Campus for Creative Aging, broadening access to peer support and resources.

- Continued robust promotion of AAA's diverse programs and engagement opportunities - including Friendly Helpers/Senior Companions, Foster Grandparents, Dementia Friends, Kinship Care programming, caregiver resources, and specialized event like AG Scam presentations - through newspaper columns, radio broadcasts, updated printed materials, social media channels, outreach events, and newsletters. These coordinated professional efforts increased community awareness, resulting in steadily growing attendance and positive participant feedback.

- Supported community advocacy initiatives aimed at expanding broadband access to facilitate improved virtual connections and online engagement opportunities for older adults and caregivers.

- Maintained active outreach and engagement in the AAA-hosted Dementia Minds group, enhancing support to individuals impacted by dementia.

- Provided targeted training for Information & Access staff to ensure effective referrals to programs addressing social isolation, loneliness, and engagement opportunities, thereby improving community members' access to resources and connectivity.

- Staff across service lines consistently connected clients experiencing isolation or loneliness with interpersonal engagement opportunities, such as Friendly Callers and Senior Companions, further supporting the reduction of social isolation within the community.

- Delivered 17 in-service training sessions for AmeriCorps Seniors, significantly enhancing volunteer readiness and engagement across AAA programs.

D. Increase the number of well-trained, qualified, and supportive multicultural direct care workers through collaboration by elevating the workforce, improving retention, promoting its collective value, and supporting opportunities to increase wages.

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State Goal Match: 1, 2, 3

Narrative

The direct care workforce shortage is a national crisis that demands multi-level strategies and solutions. RIV AAA is committed to its roles in advocacy, convening community partners, building coalitions, and pursuing innovative approaches to develop and support a robust and diverse direct care workforce.

Objectives

1. Enhance support of the direct care workers and employing providers through implementation of a comprehensive and multi-level strategy.
Timeline: 10/01/2025 to 09/30/2026

Activities

1. Explore opportunities to build partnerships and contribute to collective impact strategies to expand and support the direct care workforce including, but not limited to, advocacy efforts.
1. Design and implement a collaborative direct care workforce development strategy to support the recruitment, training, job placement, and retention of direct care workers to impact quality of life for older adults, people with disabilities, caregivers, and direct care workers.
1. Support retention of direct care workers employed by AAA provider network through the provision of the Provider Employee Needs Fund to cover costs associated with mentoring newer workers and/or resolving immediate hardships that threaten workers' ability to meet job requirements.
1. Promote use of online caregiver education platform Trualta across providernetworkto foster professional development and skill building of direct care workers.
1. Develop and implement AAA staff training focused on partnering with providers in person-centered care plan development and implementation.
1. Reorganize Provider Relations Committee to promote collaboration within AAA to support and enhance the provider network.

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Expected Outcome

The direct care workforce of Southwest Michigan will receive the support needed to meet the complex challenges it faces in recruitment, professional development, and retention.

FY24 Progress:

- Advocated at state and federal levels for increased funding specifically aimed at supporting direct care worker wage enhancements, contributing to broader workforce sustainability efforts.
- Successfully established a Direct Care Workforce Coalition involving representatives from seven local agencies, strategically addressing challenges in recruitment, training, and retention. This collaborative effort prioritizes recruitment of non-traditional workers, such as individuals with disabilities, older adults, immigrants, and others historically underrepresented in the direct care workforce.
- In collaboration with other AAAs statewide, successfully implemented and sustained monthly virtual support groups specifically for professional caregivers, significantly broadening peer support networks, reducing isolation, and providing essential resources and supports.
- Continued robust promotion and utilization of the online caregiver education platform, Trualta, throughout the provider network. The platform provides direct care workforce providers and staff continuous, no-cost access to evidence-based training and professional development resources, supporting enhanced skills and service delivery.
- Honored outstanding Direct Care Worker of the Year at the annual meeting, significantly elevating community awareness, recognition, and esteem of the direct care workforce, and highlighting the essential contributions these workers provide to our community.

E. Inspire a dementia friendly community movement throughout Southwest Michigan.

State Goal Match: 1, 2, 3, 4

Narrative

Alzheimer's disease and other forms of dementia represent an emergency public health crisis for individuals, families, and caregivers impacted by a dementia diagnosis. With the Alzheimer's Association's 2019 Alzheimer's Disease Facts and Figures Report indicating that 3% of individuals aged 65-74 years, 17% of individuals aged 75-84 years old, and 32% of individuals ages 85 and over have a diagnosis of Alzheimer's dementia, an estimated 5,903 residents of Berrien, Cass, and Van Buren counties have Alzheimer's dementia. While Alzheimer's disease is the most common type of dementia, representing 60-80% of all cases, there are still many more residents in the service area impacted by other forms of dementia, and current projections indicate these numbers will increase by 15.8% from 2020-2025. In response to this increasing challenge, RIV AAA will explore strategies to expand awareness of and access to local dementia resources, supports, and services and build partnerships to inspire and work towards a dementia friendly Southwest Michigan that fosters quality of life and inclusion for people living with dementia and their care partners.

Objectives

1. Reduce fear, stigma, and isolation associated with a dementia diagnosis.
Timeline: 10/01/2025 to 09/30/2026

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Activities

1. Establish local Dementia Minds group and explore partnerships for further expansion of Dementia Minds groups across Berrien, Cass, and Van Buren counties.

1. Explore and implement strategies to expand awareness of and access to local dementia resources, supports, and services.

1. Convene partners to co-host Remember Project and/or locally produced theater events that bring to life real issues connected to the care, diagnosis and lived experience of those impacted by dementia and provide an opportunity for facilitated conversation about the themes depicted.

Expected Outcome

Individuals impacted by dementia will experience community inclusion and cohesion.

FY24 Progress:

- Implemented the CMS GUIDE Model, providing structured dementia care designed explicitly around principles of non-stigma-based support, enabling individuals and families to approach a dementia diagnosis as a manageable condition that allows continued meaningful, dignified community living.

- Expanded Dementia Minds community events, where individuals living with dementia share lived experiences directly with the public, powerfully reducing stigma, fear, and isolation through personal storytelling and dialogue.

- Grew the Arts & Aging Partnership, notably through the visual arts initiative, "Window to Our World," highlighting and destigmatizing the caregiving and dementia experience, while enhancing public empathy and inclusion.

- Collaborated closely with the Alzheimer's Association to regularly host caregiver support groups at the Campus for Creative Aging, significantly reducing caregiver isolation and foster supportive connections among families.

- Actively participated in community-focused events like the Alzheimer's Association Walk, offering direct engagement opportunities and distributing accessible dementia resources, promoting stigma reduction and building community solidarity.

2. Expand and deepen community respect, awareness, and inclusion of individuals living with a dementia diagnosis.

Timeline: 10/01/2025 to 09/30/2026

Activities

1. Host local Dementia Minds events in which people with neurocognitive disorders share and answer questions about their personal experiences of receiving and living with a dementia diagnosis.

1. Convene partners to co-host Remember Project and/or locally produced theater events that bring to life real issues connected to the care, diagnosis and lived experience of those impacted by dementia and provide an opportunity for facilitated conversation about the themes depicted.

1. Explore opportunities to build partnerships to embed dementia friendly practices, services, and supports across a variety of community sectors.

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Expected Outcome

Organizations and businesses across the community will have expanded awareness of and implement dementia friendly strategies resulting in greater community cohesion and inclusion for those impacted by dementia.

FY24 Progress:

- Successfully launched the CMS Guiding an Improved Dementia Experience (GUIDE) Model within the Integrated Care at Home primary care practice, providing structured, person-centered dementia care and comprehensive training for AAA staff and community partners, significantly increasing community capacity to support individuals with dementia through referrals to AAA's GUIDE program.
- Developed and broadly disseminated GUIDE Program informational materials (webpage, flyers, brochures), significantly enhancing community-wide awareness.
- Continued Dementia Friends training, achieving 100% participation among AAA staff and volunteers, equipping them to provide inclusive interactions and support.
- Conducted expanded Dementia Friends outreach, including abbreviated training for over 50 attendees at the Annual Senior Expo.
- Hosted virtual, hybrid, and in-person Dementia Friends workshops.
- Developed a strategic plan for sector-specific Dementia-Friendly Business, First Responder, and Volunteer training.
- Increased community engagement through comprehensive promotion of dementia-related resources and programs via multi-platform outreach (newspapers, radio, presentations).
- Launched and actively promoted a dementia-specific resource guide available widely in both print and online formats providing essential information and tools for community members, caregivers, and healthcare providers.

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Planned Service Array

Complete the FY 2026 AIP Planned Service Array form for your PSA. Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

Category	Services
Provided by Area Agency	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Care Transition Coordination and Support • Case Coordination and Support • Information and Assistance • Options Counseling • Outreach <p>In-Home</p> <ul style="list-style-type: none"> • Friendly Reassurance <p>Community</p> <ul style="list-style-type: none"> • Counseling Services • Disease Prevention/Health Promotion • Long Term Care Ombudsman • Prevention of Elder Abuse, Neglect and Exploitation <p>Nutrition Services</p> <ul style="list-style-type: none"> • Nutrition Counseling • Nutrition Education <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Caregiver Case Management • Caregiver Education • Caregiver Support Groups • Caregiver Training • Respite Care <p>Regional Services</p> <ul style="list-style-type: none"> • Case Coordination & Support for the Deaf and Hard of Hearing • Kinship Caregiver Case Management • Kinship Caregiver Counseling • Kinship Caregiver Education • Kinship Caregiver Information and Assistance

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	Regional Services <ul style="list-style-type: none"> • Kinship Caregiver Respite Care • Kinship Caregiver Supplemental Services • Kinship Caregiver Support Groups • Kinship Caregiver Training
Contracted by Area Agency	Access <ul style="list-style-type: none"> • Transportation In-Home <ul style="list-style-type: none"> • Assistive Devices & Technologies • Chore • Home Injury Control • Homemaking • Medication Management • Personal Care Community <ul style="list-style-type: none"> • Counseling Services • Legal Assistance Nutrition Services <ul style="list-style-type: none"> • Congregate Meals • Home Delivered Meals Caregivers of Older Adults Services <ul style="list-style-type: none"> • Adult Day Services • Caregiver Education • Caregiver Supplemental Services • Caregiver Support Groups • Caregiver Training • Respite Care
Local Millage Funded	Access <ul style="list-style-type: none"> • Information and Assistance * • Options Counseling * • Outreach * • Transportation * In-Home <ul style="list-style-type: none"> • Chore * • Friendly Reassurance *

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	<p>In-Home</p> <ul style="list-style-type: none"> • Home Injury Control * • Homemaking * • Personal Care * <p>Community</p> <ul style="list-style-type: none"> • Home Repair * • Senior Center Operations * • Senior Center Staffing * <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals * • Home Delivered Meals * <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services * • Caregiver Education * • Caregiver Support Groups * • Caregiver Training * • Respite Care *
Participant Private Pay	<p>Access</p> <ul style="list-style-type: none"> • Care Management • Care Transition Coordination and Support • Case Coordination and Support • Options Counseling • Transportation <p>In-Home</p> <ul style="list-style-type: none"> • Assistive Devices & Technologies • Chore • Friendly Reassurance • Home Care Assistance • Home Health Aide • Home Injury Control • Homemaking • Medication Management • Personal Care <p>Community</p> <ul style="list-style-type: none"> • Assistance to Hearing Impaired & Deaf Community

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	<p>Community</p> <ul style="list-style-type: none"> • Counseling Services • Disease Prevention/Health Promotion • Health Screening • Home Repair • Legal Assistance • Long Term Care Ombudsman • Prevention of Elder Abuse, Neglect and Exploitation • Senior Center Operations • Senior Center Staffing • Vision Services <p>Nutrition Services</p> <ul style="list-style-type: none"> • Congregate Meals • Home Delivered Meals • Nutrition Counseling • Nutrition Education <p>Caregivers of Older Adults Services</p> <ul style="list-style-type: none"> • Adult Day Services • Caregiver Case Management • Caregiver Counseling • Caregiver Education • Caregiver Information and Assistance • Caregiver Options Counseling • Caregiver Supplemental Services • Caregiver Support Groups • Caregiver Training • Respite Care
Funded by Other Sources	<p>Access</p> <ul style="list-style-type: none"> • Disaster Advocacy & Outreach

* Not PSA-wide

FY 2026 AREA PLAN BUDGET

Region IV Area Agency on Aging, Inc.

Date: 3/6/2025

Rev No: 0

4

Budget Period: 10/1/2025

to 9/30/2026

Method of Service Provision

	58.35%	23.13%	18.53%	100.00%
Services	Direct Services	Contracted Services	Purchased Services	Grand Total
Access Services	\$ 394,169	\$ 72,556	\$ -	\$ 466,725
Access Services	\$ 394,169	\$ 72,556	\$ -	\$ 466,725
Care Management	\$ 59,845	\$ -	\$ -	\$ 59,845
Care Transition Coordination & Support	\$ 59,865	\$ -	\$ -	\$ 59,865
Case Coordination & Support	\$ 122,246	\$ -	\$ -	\$ 122,246
Information & Assistance	\$ 20,910	\$ -	\$ -	\$ 20,910
Options Counseling	\$ 120,192	\$ -	\$ -	\$ 120,192
Outreach	\$ 11,111	\$ -	\$ -	\$ 11,111
Transportation	\$ -	\$ 72,556	\$ -	\$ 72,556
Caregivers of Older Adults Services	\$ 187,105	\$ 379,699	\$ 110,624	\$ 677,428
Access Assistance	\$ 87,106	\$ -	\$ -	\$ 87,106
Caregiver Case Management	\$ 30,440	\$ -	\$ -	\$ 30,440
Caregiver Information and Assistance	\$ 56,666	\$ -	\$ -	\$ 56,666
Counseling/Support Groups/Training	\$ 22,222	\$ 17,111	\$ -	\$ 39,333
Caregiver Support Groups	\$ 11,111	\$ -	\$ -	\$ 11,111
Caregiver Training	\$ 11,111	\$ 17,111	\$ -	\$ 28,222
Information Services	\$ 11,111	\$ -	\$ -	\$ 11,111
Caregiver Education (use for Caregiver Outreach)	\$ 11,111	\$ -	\$ -	\$ 11,111
Respite Services	\$ 66,666	\$ 362,588	\$ 105,069	\$ 534,323
Adult Day Services	\$ -	\$ 307,033	\$ -	\$ 307,033
Respite Care – In-Home Respite	\$ 66,666	\$ 55,555	\$ 85,069	\$ 207,290
Respite Care – Out-of-Home Respite (Day)	\$ -	\$ -	\$ 10,000	\$ 10,000
Respite Care – Out-of-Home Respite (Overnight)	\$ -	\$ -	\$ 10,000	\$ 10,000
Supplemental Services	\$ -	\$ -	\$ 5,555	\$ 5,555
Caregiver Supplemental - Other	\$ -	\$ -	\$ 5,555	\$ 5,555
Community Services	\$ 214,999	\$ 28,000	\$ 55,667	\$ 298,666
Community Regional Services	\$ -	\$ -	\$ 53,223	\$ 53,223
Gap Filling/Special Needs(RSD)	\$ -	\$ -	\$ 53,223	\$ 53,223
Community Services	\$ 214,999	\$ 28,000	\$ 2,444	\$ 245,443
Counseling	\$ 5,555	\$ -	\$ 222	\$ 5,777
Disease Prevention/Health Promotion	\$ 77,996	\$ -	\$ -	\$ 77,996
Elder Abuse Prevention	\$ 5,003	\$ -	\$ -	\$ 5,003
Home Repair	\$ -	\$ -	\$ 2,222	\$ 2,222
Legal Assistance	\$ -	\$ 28,000	\$ -	\$ 28,000
Ombudsman	\$ 126,445	\$ -	\$ -	\$ 126,445
In-Home Services	\$ 8,888	\$ -	\$ 483,174	\$ 492,062
In-Home Services	\$ 8,888	\$ -	\$ 483,174	\$ 492,062
Assistive Devices & Technologies	\$ -	\$ -	\$ 63,477	\$ 63,477
Chore Services	\$ -	\$ -	\$ 1,293	\$ 1,293
Friendly Reassurance	\$ 8,888	\$ -	\$ -	\$ 8,888
Home Injury Control	\$ -	\$ -	\$ 2,155	\$ 2,155
Homemaker	\$ -	\$ -	\$ 180,863	\$ 180,863
Medication Management	\$ -	\$ -	\$ 640	\$ 640
Personal Care	\$ -	\$ -	\$ 234,746	\$ 234,746
Nutrition Services	\$ 11,110	\$ 1,635,331	\$ 22,222	\$ 1,668,663
Nutrition Services	\$ -	\$ 1,635,331	\$ 22,222	\$ 1,657,553
Congregate Meals	\$ -	\$ 634,017	\$ -	\$ 634,017
Home-Delivered Meals	\$ -	\$ 1,001,314	\$ 22,222	\$ 1,023,536
Other Nutrition Services	\$ 11,110	\$ -	\$ -	\$ 11,110
Nutrition Counseling	\$ 5,555	\$ -	\$ -	\$ 5,555
Nutrition Education	\$ 5,555	\$ -	\$ -	\$ 5,555
Older Relative (Kinship) Caregiver Services	\$ 22,221	\$ -	\$ -	\$ 22,221
Counseling/Support Groups/Training	\$ 5,555	\$ -	\$ -	\$ 5,555
Kinship Caregiver Support Groups	\$ 5,555	\$ -	\$ -	\$ 5,555

Services	Direct Services	Contracted Services	Purchased Services	Grand Total
Information Services	\$ 16,666	\$ -	\$ -	\$ 16,666
Kinship Caregiver Education (use for Kinship Caregiver Outreach)	\$ 16,666	\$ -	\$ -	\$ 16,666
Grand Total	\$ 838,492	\$ 2,115,586	\$ 671,687	\$ 3,625,765