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# I.

## Executive Summary

*This is a summary of the "Report and Recommendations of the Blueprint for Aging Services Partnership, Washtenaw County" dated November 2003.*

### A. Background

#### 1. Study Impetus, Purpose and Organization

- a. **Impetus for the Study.** Reflecting the national trend, the population of Washtenaw County is aging. Consequently, the number of older adults in the County is increasing. Meanwhile, seniors and their families are encountering barriers to needed services.

Against this backdrop, a core group of agencies serving older adults in Washtenaw County recognized that problems facing the County's older adults require fundamental solutions that include all community stakeholders. A current community-wide plan addressing specific needs of the elderly would be necessary.

To create such a community-wide plan, the collaborative group of agencies submitted a proposal to the Ann Arbor Area Community Foundation. Catholic Social Services of Washtenaw County agreed to serve as fiduciary agency for the project. In April 2002, this proposal resulted in the funding of a one-year planning project, which became known as the Blueprint for Aging Services Partnership ("BASP").

- b. **Project Purpose.** The overall goal of the project was to first identify and characterize the needs of aging adults in Washtenaw County adults and then define an appropriate community response. Toward this end, the following objectives were established:

- (1) Involve stakeholders: identify and enlist participation of interested stakeholders.
- (2) Create plan: develop a Strategic Plan that would outline findings regarding the efficacy of existing programs and services for older adults in Washtenaw County, and then present recommendations for addressing identified deficiencies.

- c. **Project Organization.** The structure and membership of the Project are described below:

(1) Structure: The BASP Project was organized to include three key structural elements:

- BASP "Members": Through public notice and direct solicitation, leaders and private citizens with interest and/or involvement in aging services in Washtenaw County volunteered to participate in the project. This Membership group was convened on July 23, 2002 for the purpose of orientation, endorsement of the proposed committee structure for the Project, and appointment of members for the Steering Committee.
- Steering Committee: An eleven member Steering Committee was appointed to establish guidelines, to monitor the Project schedule, and to oversee and coordinate Workgroup activities.
- Workgroups: The Project was organized into the following five Workgroups: 1) Health; 2) Housing; 3) Quality of Life; 4) Social Services, and; 5) Transportation. These Workgroups met regularly throughout the course of the Project to develop findings and recommendations in their assigned areas.

(2) Participants: Appendix A lists the BASP Project's 56 active participants and 8 ad hoc contributors. A full spectrum of 33 non-profit, governmental and private organizations and agencies serving older adults in Washtenaw County, as well as private citizens, was represented. Given this strength and diversity of membership, each Workgroup was considered to be an authoritative and credible source of findings and recommendations on their assigned topic.

## **2. Key Demographic Trends**

- a. **Changes During the Decade of the '90s.** A review of demographic trends over the 1990-2000 period led to the following observations:

- (1) The total population in Washtenaw County grew more than twice as fast as Michigan's as a whole.
- (2) The County's age 60-plus population grew more than three times as fast as did Michigan's comparable segment.
- (3) The age 85-plus population in the County recorded a growth rate that was 80 percent higher than for the 60-plus population as a whole,

indicating a trend toward a higher average age of older adults in the County.

- (4) The minority population aged 60 and over grew by an above-average 50 percent during the period, constituting 13 percent of the 60-plus population by 2000.
- (5) Washtenaw County saw its total foreign-born population increase by more than two-thirds during the 1990-2000 period, to over 10 percent of the total population.

**b. Projected Growth in the Senior Population.** A review of demographic projections for the 2000-2030 period led to the following observations:

- (1) Between 2000 and 2030 the 65-plus population in the County is projected to grow nearly three-fold, from about 26,000 to nearly 73,000.
- (2) Meanwhile the County's total population is projected to increase only 39 percent, from about 323,000 in 2000 to over 448,000 in 2030.
- (3) As a result of significantly above-average rate of growth, the proportion of the population aged 65 and over is projected to double, from 8 percent of total in 2000 to 16 percent of total in 2030.
- (4) The actual number of additional seniors added each successive decade between 2000 and 2030 is projected to grow to significant levels (e.g. Washtenaw County will add 7,400 seniors between 2000 and 2010, and will grow by 17,900 seniors in the decade ending 2030).
- (5) An exceptionally high *rate* of growth in the senior population of Washtenaw County is expected to be sustained between 2010 and 2020 (i.e. a projected 53 percent growth rate for the decade).
- (6) The exceedingly high rate of growth projected for the County's senior population after 2010 should not be allowed to obscure the fact that this segment of the population is currently growing at a rapid rate (i.e. an estimated 28 percent growth rate for the current decade).

**c. Conclusion.** The rapidly increasing numbers and diversity of older adults in Washtenaw County will continue to add potentially overwhelming demands on the support services and programs for seniors in the County.

## **B. Vision for the Future**

This section provides a vision of the future for older adults in Washtenaw County as developed by the BASP Project. It describes a desired future state in which all segments of the older adult population and their caregivers experience a consistently high quality of life. The future vision is described from the perspective of older adults in several stages as they age, and also addresses the perspective of caregivers.

**1. Overview.** In the future, as envisioned, the following general conditions would exist for older adults in all age segments:

- Society truly values older adults
- Older adults themselves view aging in a positive light
- Older adults have a strong sense of security
- Community and social support systems are strong
- Needed programs and services are readily accessible
- Basic needs are met
- Benefits of technology are embraced

**2. Early Years of Older Adulthood—Age 55-69.** In the desired future, the following general conditions would exist for a typical older adult in the early stage of aging:

- A full range of employment options are available
- Mental preparation for aging is well underway
- Transition to retirement is well planned
- An active and independent lifestyle is maintained
- Good health is actively sustained
- Targeted programs and services are available

**3. Middle Years of Older Adulthood—Age 70-84.** While going through this stage, older adults can expect to experience (in varying degrees) diminishing health and associated reductions in independence. In the desired future, the following general conditions would exist for a typical older adult in the middle years of aging:

- An active lifestyle is maintained, despite losses of independence
- Independent home ownership/ occupancy is supported
- Affordable housing options are available, once independent home ownership/ occupancy is no longer appropriate
- The increased need for ongoing health services is fully met
- Family caregivers are fully supported

**4. Later Years of Older Adulthood—Age 85 and Over.** In this stage, older adults are certain to experience seriously diminishing health, associated loss of independence and, finally, death. In the desired future, the following general conditions would exist for a typical older adult in the final stage of aging:

- Independent home ownership/ occupancy continues to be supported for the diminishing number of seniors who remain capable
- For those requiring long-term care, choices are available from a full range of institutional options
- Mental health services are available to meet the growing needs of older adults and their families
- Care management insures that all appropriate services are orchestrated
- Older adults maintain personal dignity and peace of mind as end of life approaches

**5. Family Caregivers.** Family caregivers often play an essential role in the care of an older adult. In the desired future, the following general circumstances would support caregivers and the family/ social network:

- Family and friends are fully engaged in caregiving
- Needed programs and services are readily accessible to the caregiver(s)
- A designated care manager works with the caregiver(s)
- Dependable respite care is available to the caregiver(s)

## **C. Findings and Recommendations**

This section begins with the overall strategic framework for the BASP Project. It then presents summary findings and recommendations organized under the individual Workgroups' areas of focus. Finally, a summary of general findings/ recommendations is presented for certain key issues that cut across the focus areas of Workgroups.

### **1. Strategic Framework**

In the course of the Project, certain top-priority issues affecting seniors in Washtenaw County emerged from the findings and recommendations of the Workgroups. Accordingly, the following top-priority agendas were identified as an overall strategic framework for the Project.

- a. **Awareness and Education Concerning Aging Issues.** A recurring theme in Workgroup deliberations was the problem of low public awareness and understanding of major issues affecting the quality of life of older adults in Washtenaw County. The Workgroup findings strongly suggest that improved public awareness and education are an essential foundation for the success of virtually any concerted initiative to fundamentally address major aging issues in the County.
- b. **Support for Family Caregivers.** The findings indicate that informal family caregivers are an essential underpinning of home-based services for a large portion of the 28,000-plus older adults in Washtenaw County. Unfortunately,

assistance and support for these voluntary caregivers was found to be insufficient.

- c. **Access to Programs and Services.** In every Workgroup, serious questions were raised regarding how individual older adults, or family members, gain information about, and access to, needed programs and services. It was apparent that a high degree of informal cooperation currently takes place, among Washtenaw County's agencies, in referring and advising those seeking help. Nonetheless, it was equally apparent that the situation could be significantly improved.
- d. **Funding/ Affordability.** In deliberations at the various Workgroups, problems of funding and affordability arose frequently. Providers of senior support services typically require subsidies from a combination of sources. However, funding from various sources has not kept pace with increasing costs and greater demand from a growing older adult population. Meanwhile, organizations providing senior services have generally not secured stable sources of income.
- e. **Advocacy.** It became apparent in Workgroup deliberations that solutions to many of the problems facing Washtenaw County seniors require actions by decision makers who hold elective office, particularly legislative and policy makers at the state and federal levels. Consequently, there is a need for a concerted and proactive "advocacy" effort to inform and educate elected officials and decision-makers about the needs, concerns, and preferences of older adults in Washtenaw County. Furthermore, a mechanism is needed to encourage and empower provider and older adult advocacy on aging issues.

Within this strategic framework, the following sections summarize the findings and recommendations of the various Workgroups.

## **2. Health**

### **a. Prescription Drug Assistance**

- (1) Goal Statement: *All Washtenaw County residents shall have access to affordable prescription medications.*
- (2) Finding:
  - Affordable medications remain a primary concern for older adults, particularly those with limited resources.
- (3) Recommendations:
  - Advocate to reopen the full (year round) Elder Prescription Insurance Coverage (EPIC) program, a state program designated to provide prescription drug assistance to low income older adults.

- Support maximum enrollment in Washtenaw County Prescription Plan, a discount program co-sponsored by Washtenaw County and the Washtenaw Health Plan, aimed at uninsured and underinsured residents of the County.
- Advocate for legislative action at the state and federal levels to make prescription drugs affordable and accessible for older persons (e.g. a meaningful drug benefit provided to older adults under Medicare).
- Establish a fund to help older persons acquire prescription medications.
- Educate physicians' offices as to medication sources available to older persons.

**b. Long-Term Care Services--Community-Based Setting**

(1) Goal Statement: *All Washtenaw County Medicaid long-term care consumers will have the option of receiving services in the setting of their choice. Access to community-based long-term care services will be integrated, with a single point of access.*

(2) Findings:

- Many older Washtenaw County residents are in need of in-home assistance.
- While the majority of older adults who require long-term care prefer to receive it in their home, many are unable to qualify for these services.
- Additional, affordable assisted living options should be available to older persons in the County.
- Community-based long-term options are fragmented and difficult to access.

(3) Recommendations:

- Advocate to significantly expand services of the Michigan's Home and Community Based Waiver program.
- Establish a single-point of access for community based long-term care services in Washtenaw County.
- Educate physicians' offices on community-based alternatives to nursing home care.

**c. Long-Term Care Services--Institutional Setting**

(1) Goal Statement: *All Washtenaw County residents will have access to quality institutional long-term care options.*

(2) Findings:

- There is a lack of high-quality options available to institutional long-term care consumers who are reliant upon Medicaid.
- The need for specialized care in a long-term care setting exceeds options that are available.

- Innovative improvements to long-term care are available and attainable.

(3) Recommendations:

- Advocate for re-evaluation of Michigan’s Certificate of Need to determine whether the needs of low-income elderly population are accurately reflected.
- Expand number and/or capacity of specialized nursing home units capable of meeting the specialized needs of disabled individuals and Alzheimer’s patients.
- Encourage all Washtenaw County nursing homes to adopt components of the Eden Alternative.

**d. Mental Health Services**

(1) Goal Statement: *All Washtenaw County older adults with mental health needs shall have access to mental health services.*

(2) Finding:

- Many older Washtenaw county residents with mental health needs are not able to receive mental health services.

(3) Recommendations:

- Educate physicians on available and appropriate referrals for mental health services for older adults.
- Advocate that the Medicaid Waiver be expanded to include older adults whose primary health diagnosis is mental illness.
- Advocate for existing mental health services, and educate older adults regarding accessing these services, using public forums, senior events, congregate senior sites.
- Support and advocate for existing geriatric social work programs and fellowships (e.g. Hartford) to increase the awareness of need for specialists who work with older adults with mental illnesses.
- Advocate for gatekeeper program that provides outreach to older Washtenaw County residents who are in need of mental health services.

**e. Substance Abuse**

(1) Goal Statement: *All Washtenaw County older adults with substance abuse needs shall have access to affordable substance abuse services.*

(2) Findings:

- Many older Washtenaw County residents who have a substance abuse or dependence problem are unable to receive services they need.
- Professionals are often unprepared to identify/ treat older adults with substance abuse problems.

(3) Recommendations:

- Develop funding, effective screening and delivery strategies for patients in long-term care settings who need assessment and/or treatment.
- Continue to develop funding strategies for older adults living in the community who need senior-specific assessment and/or treatment available at Chelsea Arbor.
- Expand and improve current training and supervision to professionals and paraprofessionals by offering continuing education credit and other incentives to area organizations.

**f. Dementia Care Services**

(1) Goal Statement: *All Washtenaw County older adults with Alzheimer's and related disorders and their families will have access to high-quality and affordable care and support.*

(2) Findings:

- Alzheimer's is the most common irreversible, progressive dementing illness, and it has devastating effects upon its victims and their families.
- Because of the chronic nature of Alzheimer's, and the impairments it causes, the cost and accessibility of appropriate care represents a substantial challenge.
- There is need for improvement in quality, accessibility and affordability of care, support and services for older adults in Washtenaw County with Alzheimer's and related disorders, and their families.

(3) Recommendations:

- Develop intensive dementia-specific training modules and in-service programs for in-home, direct-care providers and those working in the variety of long-term care settings.
- Provide physician training in the special challenges faced by informal caregivers, and how appropriate referrals can be made.
- Develop specially targeted grief support groups.
- Implement caregiver training program to provide in-home, hands-on assistance to develop workable solutions for handling challenging behaviors and changes in communication.
- Increase adult day programs, especially those that can handle extremely challenging behaviors, in selected areas of Washtenaw County.

**g. Dental Services**

(1) Goal Statement: *All Washtenaw County older adults shall have access to affordable dental services.*

(2) Findings:

- Public knowledge about the importance of oral health care for older adults is limited.
- Some older adults in Washtenaw County are not getting the dental care they need.
- Funding support for dental care for older adults is very limited, and few dental service providers in Washtenaw County accept low-income elderly patients.

(3) Recommendations:

- Improve the quality of referral services addressing the dental needs of older adults in Washtenaw County, including the ability to locate dentists that accept Medicaid.
- Encourage university outreach programs to serve the dental needs of nursing home residents.
- Increase the awareness of health professionals and dental students on the dental needs of older persons.
- Advocate for the addition of basic dental coverage to the Medicare program, in order to promote general health and well-being among older adults.

**h. Hearing/ Speech Services**

(1) Goal Statement: *All Washtenaw County older adults shall have access to programs that increase awareness and knowledge of hearing impairment issues, and assistance in funding hearing tests, hearing aids and assistive devices.*

(2) Findings:

- Many older adults experience hearing loss significant enough to affect daily activities, resulting in a host of negative physical and social outcomes.
- Health providers have a generally low awareness of hearing loss, and their skills in communicating with the hearing impaired could be improved.
- There are opportunities to educate and assist seniors on various methods to maximize hearing/ speech capabilities that will positively impact their health and social well-being.
- Low-income seniors need assistance in funding hearing tests, hearing aids and assistive devices, etc.
- The deaf face a lack of available interpreters to assist in health care encounters.

(3) Recommendations:

- Assist low-income seniors with funding to purchase assistive devices and hearing aids.
- Provide innovative and culturally sensitive outreach presentations to seniors and their families on the potential benefits available through

appropriate communication strategies, assistive devices and hearing aids.

- Provide training programs for primary care physicians, home care providers, caregivers, family members and other persons in the community to maximize communication skills with persons with hearing loss.
- Advocate for increased training of and reimbursement for interpreters.
- Increase recruitment of and support for volunteer interpreters.

**i. Vision Services**

(1) Goal Statement: *All Washtenaw County older adults shall have access to knowledge about vision impairment issues, diagnostic and rehabilitation services, and assistive devices that enhance sight.*

(2) Findings:

- Vision impairment often accompanies advancing age.
- Insurance does not cover many of the services and/or devices needed by visually impaired older adults.
- Visually impaired older adults face unique access issues.

(3) Recommendations:

- Assist low-income seniors with funding to purchase or rent assistive visual devices that will improve their ability to function and remain independent.
- Increase education to primary care physicians about the need for regular eye care check-ups for persons over 50 years of age.
- Increase education of primary care physicians, optometrists and ophthalmologists about availability and appropriate use of rehabilitative services, home equipment, and home assessments by physical/ occupational therapists.
- Develop/ support volunteer programs that are attuned to the needs of persons with visual impairments.
- Increase advocacy for public planning that considers the needs of low vision seniors.
- Establish an equipment donation program aimed at the visually impaired.

**j. End of Life Care**

(1) Goal Statement: *All Washtenaw County older adults shall have access to quality end of life care, including hospice services (palliative care).*

(2) Findings:

- Hospice is a supportive yet cost-effective option for end of life care.
- Hospice care is not always available/ accessible to all who might prefer this option.

(3) Recommendations:

- Provide more education regarding hospice/ palliative care to the general population so they may better understand family members' options and more appropriately utilize hospice services.
- Encourage and support greater numbers of primary doctors who specialize in palliative care, full-time nurses to become certified in palliative care, and in-home trained caregivers.
- Increase education/ training regarding end of life issues and palliative care for family practitioners, primary care physicians, medical social workers in hospitals, and spiritual leaders.
- Encourage the local medical community to continue/ increase the integration of palliative care and pain management into ordinary treatment regimes.
- Advocate for insurers to minimize co-pays and deductibles for end of life care.
- Advocate for relaxing the present Medicare requirement of a six-month or less life expectancy prognosis for hospice eligibility.

k. **Health Care Financing/ Affordable Health Insurance**

(1) Goal Statement: *All Washtenaw County older adults shall have access to affordable health care, including education and assistance on health insurance issues and options.*

(2) Findings:

- Older adults face significant gaps in health insurance coverage that can impede access to health care due to high out-of-pocket costs.
- Widespread lack of knowledge about Medicaid options, together with a cumbersome application process, results in significant under-enrollment of eligible low-income Medicare beneficiaries.

(3) Recommendations:

- Increase education about insurance options to older adults, providers, professionals in aging services, and adult children.
- Encourage providers to accept Medicare assignment and assist their patients unable to pay for care by referring to appropriate programs.
- Work with local, state and federal advocacy groups to develop services and sources of reimbursement for uncovered areas of care, such as prescriptions, dental, vision, hearing, and long-term care.
- Increase the number in the aging network who can assist with the Medicaid application process, including physician offices, nursing homes, and hospitals.
- Improve the partnership with the Family Independence Agency to resolve problems and reduce barriers to accessing Medicaid programs.
- Develop effective partnerships between the aging network and groups in the County who can help access medical care for lower-income older adults (e.g., Washtenaw Health Plan, McAuley

Support, clinics with sliding fee scales), and support the expansion of those programs.

**l. Sensitivity to Cultural Factors**

(1) Goal Statement: *All staff at organizations serving Washtenaw County's minority older adult population shall utilize approaches and interventions that respect cultural values and beliefs, and are appropriate to address minority population needs.*

(2) Findings:

- There has been a substantial increase in Washtenaw County's minority older adult population.
- Understanding cultural factors is critical to insuring older persons receive necessary social and health care services.

(3) Recommendations:

- All Washtenaw County organizations that provide services to older adults should provide cultural sensitivity training to all staff.
- Washtenaw County aging service providers should design services that address and eliminate structural and cultural barriers that can impede culturally competent service delivery.

**m. Technology/ Equipment**

(1) Goal Statement: *All Washtenaw County older adults shall have access to adaptive equipment necessary to allow maximum independence.*

(2) Finding:

- Older adults have difficulty accessing standard equipment that could improve their quality of life.

(3) Recommendations:

- Educate physicians about equipment available to meet the needs of at-home seniors and their caregivers.
- Encourage physicians of seniors to order a therapist (physical and/or occupational) to do a home assessment for equipment recommendations.
- Encourage the establishment of an equipment donation program in Washtenaw County.

### **3. Housing**

#### **a. Goal Statement**

*All Washtenaw County older adults shall have access to housing that is functional, safe and conducive to a sense of community. This access shall include education and assistance on housing issues and options.*

#### **b. Findings**

##### (1) Overview:

- Appropriate housing is critical to the well-being of older adults.

##### (2) Financing:

- Government, charitable and/or private funding support for older adult housing and related services is generally inconsistent and often insufficient.
- Because consumers underestimate the cost of housing and related services for their later years, there is insufficient preparation for these costs.

##### (3) Types of Housing; Availability and Access:

- Currently there are imbalances in the supply and demand/ need for various types of housing for older adults.
- Some housing categories, such as low-cost assisted living, appear to be in short supply.
- While quality is difficult to judge objectively, it appears that the general quality of housing for older adults in various categories ranges from excellent to poor.
- Demographic trends indicate that the demand/ need for all types of older adult housing will increase in the next decade.

##### (4) Lack of Public Awareness:

- Older adults who may need to relocate to more affordable or supportive housing have insufficient knowledge about what kinds of housing are available.

##### (5) Public Policy and Regulation:

- Recent trends in public policy regarding special populations (those with mental illness, substance abuse issues, etc.) may have had a negative impact on the general supply of housing for seniors.
- Certain regulations have the effect of restricting the type and availability of housing choices, while regulations to insure quality of housing have not always been effective.

##### (6) Services:

- Support services (e.g. transportation, in-home health and social services, etc.) are critical to the ability of adults to age in place.

- Availability of mental health services is essential for many to maintain independence in the least restrictive environment.

(7) Technology:

- Technology is expected to improve the ability of older adults to age in place.

c. Recommendations

(1) Financing and Availability:

- Make County, state and federal administrators and elected officials aware that there is a great need for additional funding for low to moderate-income senior housing and associated support services.
- Encourage state and federal elected officials to adjust Medicaid laws in order to free-up more dollars for low-income seniors, by closing loopholes that benefit middle and upper-income seniors and their families.
- Encourage state and federal elected officials to make Medicaid available for the full continuum of facilities, not just nursing homes.
- Create incentives for local for-profit and non-profit providers to offer a percentage of their housing at rates affordable to low and moderate-income individuals, particularly seniors.
- Increase the awareness and use of federal housing funds, particularly for seniors.
- Involve County and city elected officials in exploring options for increasing low and moderate-income housing for seniors.

(2) Public Awareness:

- Consider developing a web site educating the public on all senior housing and care services, possibly supported by (and with web links to) all local for-profit and non-profit providers.
- Encourage County officials to develop an 800 number educating the public on all senior housing and related care services, supported by PR and advertising (possibly linked to the developing state-wide 211 line).
- Encourage County and local communities to develop an information "senior service mobile" which would travel throughout the County, but especially to lower income areas, educating the public on services available for seniors.
- Promote cost-sharing and coordination among various agencies in developing a primary clearinghouse (e.g. Housing Bureau for Seniors) for information on all housing options, including referrals to appropriate facilities for more detailed information.
- Approach the local news media for coverage of relevant topics and issues related to housing for seniors in Washtenaw County.

(3) Policy and Regulation:

- Encourage state and federal elected officials to create a more flexible reimbursement and regulatory environment that eliminates the restrictive categorical labels of "assisted living" and "nursing home", thereby supporting a full "continuum of care" for senior medical/residential services.

## **4. Social Services**

a. Goal Statement

*Senior adults are able to utilize important social services that support their desired level of independence, safety and quality of life.*

b. Support for Caregivers

(1) Findings:

- Informal family caregivers are the essential underpinning of in-home services for older adults, and older adults are often themselves caregivers for spouses and other family members, including grandchildren.
- Informal family caregivers can greatly benefit from "respite" care that provides periodic relief from the stressful daily routine of caregiving.
- Respite services (including in-home, overnight and adult day) that are available and accessible to Washtenaw County family caregivers fall short of needs.
- Beneficial education and support group programs for caretakers reach only a fraction of the many caretakers in the County.

(2) Recommendations:

- Educate the general public and target caregivers about services available.
- Educate area physicians, particularly internists and family practitioners.
- Reach out and train a variety of community persons about caregiving to encourage their formal and informal participation.
- Inform and train County churches about available services in caregiving.
- Increase the financial support for respite programs available for caregivers (including grandparents as parents).
- Increase the numbers of respite beds available for the frail senior.
- Increase the number of adult day service programs for all older adults in the County.

**c. Case Management**

(1) Findings:

- Older adults often need case management assistance in identifying and obtaining needed services required to maintain their quality of life.
- Case management services that are available and accessible to older adults in Washtenaw County are insufficient to address significant needs.

(2) Recommendations:

- Increase public awareness of both the problem, and of the value of case management, targeting caregivers, clients, human service agencies, local governmental leaders, foundations and other potential funding sources.
- Improve the process of identifying client populations requiring case management services.
- Increase the number of case managers serving older adults in Washtenaw County, thereby improving access to in-home services essential to maintaining independence.
- Develop a formalized collaborative partnership in Washtenaw County among agencies, to maximize case management resources for clients.
- Advocate for increased funding for comprehensive case management services via political activism with federal and state legislators.
- Increase advocacy efforts with state legislators and the Executive branch to expand the MI-CHOICE program.
- Identify alternate funding streams to support additional staffing and increase dollars for services.

**d. Services Supporting Independence**

(1) Findings:

- Older adults often need help in managing their affairs and thereby maintaining independence, but such help is frequently fragmented or unavailable.
- Older adults face a confusing array of major health, financial and social issues with legal ramifications, but available legal assistance falls far short of needs.
- There is a general lack of availability/ affordability of basic ongoing housekeeping and chore services that allow frail seniors to adequately and safely maintain their independent households.
- Seniors' access to needed health care through Medicare and Medicaid is seriously compromised by coverage limitations as well as the confusing procedures for eligibility and reimbursement.
- Seniors and their families need assistance in dealing with financial management and tax issues.

(2) Recommendations:

- Lobby lawmakers to increase funding for preventive legal and consumer education and services.
- Provide education/ training programs that increase awareness and foster independence by averting crises.
- Expand community legal services to include credit counseling and money management services.
- Increase the number of social workers, thereby lowering case-loads, which will allow social workers time to address root causes.
- Identify additional funding sources to increase staffing in existing successful cost-effective programs.
- Raise income and asset limits for Medicaid eligibility.

e. Nutrition

(1) Findings:

- Washtenaw County seniors rely upon a number of formal nutrition programs, consisting of both congregate and home-delivered meals.
- Nutrition programs for seniors are now under-funded, and further funding reductions are expected that will reduce/ eliminate many needed programs/ services.

(2) Recommendations:

- Develop community awareness by educating the community on the increasing need for and critical role of meal programs in sustaining older adults.
- Develop broad community commitment to engage and mobilize needed volunteers.
- Develop best practices to maximize the ability of programs to meet the increasing nutritional needs of our aging population.
- Obtain additional financial support needed to properly meet the nutrition needs of the growing frail elderly population (e.g. County millage).
- Create additional food distribution systems for getting supplemental food in homes.

f. Employment Support

(1) Finding:

- Job-finding assistance is needed for those older adults who require income from continued employment.

(2) Recommendations:

- Educate the senior population regarding available services.
- Advocate with congress for Title V funds under the Workforce Investment Act.

- Identify funding to set-up a senior job bank, and training in job-seeking skills.
- Develop a volunteer organization for employed older adults to mentor senior job seekers.

**g. Diversity**

(1) Findings:

- There is inadequate information on diversity in Washtenaw County.
- Lack of diversity sensitivity adversely affects how well agencies assist minority older adults.

(2) Recommendations:

- Develop periodic training sessions on the subject of diversity for all Washtenaw County older adult programs.
- Include diversity as a factor in any program planning by agencies serving seniors to ensure that programs appropriately identify and address the needs of various target groups.
- Develop a directory and profile of religious, cultural and ethnic minority elders for older adult programs to use when working with minority families.

**h. Protection from Abuse**

(1) Findings:

- National research indicates that older adults are subject to various types of elder abuse.
- National experience suggests that a substantial number of older adults in Washtenaw County are victims of abuse and neglect.

(2) Recommendations:

- *Advocacy/funding:*
  - (a) Develop a coalition of agencies and consumers to advocate for passage of favorable legislation, and to influence the development of new legislation, that has an impact on the availability and accessibility of services to the victims of elder abuse.
  - (b) Advocate for increased funding for elder abuse services via political activism with federal and state legislatures and other funding sources both public and private.
  - (c) Identify alternate funding sources to support additional staffing and increase dollars for services.
  - (d) Collaborate with existing domestic violence shelters to develop a specialty area for victims of elder abuse.
  - (e) Develop more neighborhood programs such as “Gatekeepers”.

- *Education:*
  - (a) Increase public awareness of this vulnerable population through the use of the multi-media outlets.
  - (b) Educate the public to the problem of abuse and neglect, teach them how to recognize it, and encourage them to report it.
  - (c) Educate physicians and other health care workers to recognize and report abuse and neglect.
  - (d) Organize a speakers bureau, letter writing campaign and lobbying effort to facilitate education and change.

**i. Senior Centers**

(1) Finding:

- Senior centers in Washtenaw County play a vital role in providing older adults with access to needed programs and services, but funding support is generally insufficient.

(2) Recommendations:

- Senior centers should have a dedicated source of funding that meets basic operational costs for full-time operation of diverse programming and professional staffing.
- Opportunities for effective collaboration between senior centers and other institutions and agencies should be maximized.
- The majority of Washtenaw County senior centers should meet recognized quality standards.

**5. Transportation**

**a. Goal Statement**

*Public transportation services in Washtenaw County, in collaboration with private services, volunteers and/or social services agencies, is sufficiently available and accessible to ensure that all older adults in the County have access to transportation services needed to sustain quality of life.*

**b. Findings**

(1) Public Transportation:

- The current level of public transportation services available to older adults throughout the County is generally good for a majority of the population, but these services are virtually non-existent in certain rural Townships.
- While some coordination exists among public transportation service providers in the County, there are inherent restrictions on the ability to extend and/or connect services between and among municipalities.
- Since the economics of public transportation are largely driven by population density, regular service to/from certain remote low-density areas of the County cannot be cost-justified.

- When public transportation is available, it is often unsuitable for older adults with special needs.

(2) Private Transportation:

- Loss of ability to drive a private automobile has profound consequences on the independence of older adults.
- Many older adults rely on private transportation services, particularly seniors who have special needs that are not met by public transportation.
- Older adults' access to needed private transportation services may be limited by service availability and/or affordability issues.

(3) Volunteerism:

- One reason community organizations often shy away from assisting seniors with transportation needs is concern about liability.
- Family and social support systems are often unavailable or insufficient to personally transport seniors in private automobiles.

(4) Education, Information and Referral:

- There appears to be a lack of widespread knowledge and understanding of the availability of various transportation services and how they are accessed.
- The County already has a key transportation broker that can serve as a foundation for further development of the information and referral network.

## 1. Recommendations

(1) Awareness:

- Increase resource information/ material to spread awareness of available services.

(2) Coordination and collaboration:

- Establish County-wide Transportation Authority, with sufficient authority and resources to comprehensively address the needs of entire County.
- Increase networking, coordination and communications between transportation entities and social service agencies.
- Increase coordination of services among senior service agencies.

(3) New/ Expanded services:

- Identify and, as appropriate, replicate successful transportation models that effectively address under-served areas in other communities.
- Expand senior driver awareness programs.
- Extend senior cab concept to under-served areas/ populations.

(4) Volunteerism:

- Take a County-wide approach to addressing and mitigating volunteer liability issue.
- Encourage churches to help address gaps in under-served areas in their communities.
- Expand/ replicate the Neighborhood Senior Services accompanied transportation model.
- Encourage and support families and the community in taking charge of senior transportation issues.
- Enlist the cooperation of the business community and the community-at-large to address senior transportation issues from a community perspective.

(5) Funding:

- Encourage funders and transportation entities to show flexibility in meeting needs of under-served/ special needs populations.
- Encourage funders and social service agencies to apply consistent priorities in supporting transportation service needs.

## **6. Findings/ Recommendations Central to Multiple Areas**

*In the course of the project, certain themes emerged repeatedly in the fact-finding and deliberations of the various Workgroups. A Project-wide perspective on seven of these recurring themes is presented below.*

### **a. Public Awareness**

- (1) Multifaceted approach. Employ a multifaceted approach that recognizes how different categories of older adults and their caregivers prefer to access information and/or services:
  - Recognize that various intermediaries and media channels are used.
  - Maintain sensitivity to certain key population characteristics that affect communication (e.g. ethnic/ cultural characteristics; visual and/or hearing impairment; etc.).
- (2) Education. Actively educate providers on the full range and choices of services/ programs available to older adults in Washtenaw County, and how to access them (e.g. clearinghouses).
- (3) Collaboration. Encourage the various organizations serving older adults in Washtenaw County to band together in developing and implementing a coordinated public relations and advertising strategy to raise general awareness and understanding of key issues.

**b. Access**

- (1) Costs. Minimize duplication of investment of limited community resources for new information/ referral program(s) that would require substantial capital investment and additional annual operating costs.
- (2) Community resources. Coordinate and build upon the various special focus information/ referral resources serving the needs of older adults in Washtenaw County:
  - As possible, maintain Washtenaw County focus to take advantage of the deep knowledge of locally-based organizations.
  - Bring existing special-focus clearinghouses, such as Housing Bureau for Seniors and RideSource, into a broader community-wide effort that encompasses the full spectrum of needs.
  - Establish common protocols for communication and cross-referral between and among special focus information and referral programs to insure that the "no wrong door" philosophy is effectively implemented.
  - As practical, integrate broader initiatives, such as the "211" information call-line under development by the state of Michigan.
- (3) Collaboration. Encourage coordination among existing agencies in the development, production and/or distribution of resource guides and directories, such as:
  - Turner Geriatric Clinic's "Where to Turn: Guide to Washtenaw County Programs and Services for People over 60".
  - The "Access" directory of resources published by the Ann Arbor Center for Independent Living.
  - A resource directory poster, developed by Catholic Social Services, that catalogues resources in the community serving older adults.

**c. Volunteering**

- (1) Programming. Establish volunteer programming as key element of social service provision through professional leadership, supervision and funding:
  - Train churches and non-profit agencies to provide appropriate coordination, monitoring and risk management.
  - Present volunteer programming as cost-effective but not cost-free in terms of resources and financial support.
- (2) Education and promotion. Educate community on the benefits of volunteering, and make volunteering more accessible and appealing:
  - Educate the community on the monetary value, programming achievements and health benefits of volunteering in community-wide forums.
  - Design programs that will appeal to modern volunteers (i.e. rewarding, meaningful opportunities, etc.).

- Establish and fund clearinghouse for volunteers, for those younger than 55 years of age.

(3) Funding:

- Expand volunteer support by obtaining federal Senior Companion funding for Washtenaw County.
- Develop corporate funding for volunteer programs.
- Advocate with the state legislature for additional funding support.

**d. Funding/ Affordability**

(1) Findings:

- The majority of senior service provider organizations in the County are solely dependent on one or more of the following sources of revenue: federal, state, County, local municipality, grants, and/or client contributions.
- In general, funding from the above sources has been stagnant and has not kept pace with increasing costs and the greater demand from a growing older adult population.
- Meanwhile, senior services provider organizations have generally not developed financial security through mechanisms such as permanent endowments or other dedicated sources of revenue.
- Washtenaw County lags other counties in southeast Michigan with regard to fiscal and programmatic support for aging services; specifically, Washtenaw and Livingston are the only Counties in southeast Michigan without a formal entity (commission, agency, or individual) or millage to address older adult issues at the County level.
- A stronger fiscal and organizational infrastructure is needed in Washtenaw County to support, sustain and enhance the aging services delivery system.

(2) Recommendations:

- Establish a dedicated senior millage in Washtenaw County that regularly generates revenue for a wide range of older adult services and programs.
- Establish/ sustain a County-level entity that is responsible for providing leadership on aging issues, and for coordinating County services that respond to older adult needs.
- Develop additional ongoing revenue sources, such as endowment funds, that can support and strengthen organizations that provide services to older persons in the County.

**e. Advocacy**

(1) Findings:

- A common theme among many of the BASP Workgroup recommendations is that advocacy is needed in order to

fundamentally address problems facing older adults in Washtenaw County.

- Enacting broader, long-term public policy solutions at the state or federal level is often more effective, in the long run, than administering a County-specific response to address the identified needs.
- Change of this nature will only be achieved by informing and educating elected officials and decision-makers about the needs, concerns, and preferences of older persons through advocacy.
- Although Washtenaw County has many older adults, and other interested parties, who are very articulate and active in promoting policy change, there is no visible, structured mechanism that supports or encourages advocacy efforts on behalf of older adults.
- The absence of an organized advocacy network fragments and suppresses the voice of older persons who want to raise the visibility of their needs and preferences.
- Elected officials are said to be receptive to a carefully targeted message requesting a specific action on a specific issue, as opposed to a broad message voicing general concerns on multiple problems.

(2) Recommendations:

- There should be a concerted, ongoing effort to provide senior advocates (persons of any age who wish to advocate on older adult issues) with a mechanism to become educated on public policy issues affecting older adults, and direction on how and when to deliver their messages in the most effective manner:
  - (a) Offering advocates an opportunity to establish relationships and network with each other to exchange ideas about policy issues and strategies.
  - (b) Educating advocates on aging issues so those messages will be well reasoned and articulate.
  - (c) Training advocates on effective advocacy strategies, techniques, and skills.
  - (d) Facilitating opportunities for advocates to encourage policy change through direct interaction with decision makers.
  - (e) Linking advocates with other advocacy organizations at the local, state, and federal levels that are sources of information and support.
  - (f) Requesting advocates to take action, when necessary, in order to influence key decisions.
- Organized central efforts should not preclude other local or issue-specific advocacy efforts:
  - (a) For example, individuals strongly interested in emergent issues that have been addressed by the Workgroups should be encouraged to come together in support of their specific advocacy agenda.
  - (b) Such efforts should be encouraged whether or not an advocacy network is yet in place.

**f. Labor Force Quality/ Staffing Shortages**

(1) Findings:

- The increasing shortage of direct-care workers is a long-term structural problem that will continue to intensify without intervention.
- Factors, such as low wages, lack of health care coverage, inadequate training, and physically and emotionally demanding work conditions, present significant challenges for direct care workers, which contribute to excessive turnover rates and high rates of staff vacancies.

(2) Recommendations:

- The following initiatives should be undertaken to increase the size and capacity (and quality) of the future direct care workforce:
  - (a) Collaborative efforts should occur at all levels to undertake a recruitment campaign aimed at creating a future pool of direct care workers.
  - (b) A public image campaign should be initiated to promote working in long-term care.
- Washtenaw County employers of direct care workers should close the gap between the average wage to Michigan workers and the average wage for a Michigan direct care worker.

**g. Prevention**

(1) Findings.

- The incorporation of preventive measures into the lifestyle of older adults has been demonstrated to be very effective at preventing the major causes of chronic conditions and disease.
- Effective approaches can include regular health care, avoiding tobacco products, scheduling periodic health screenings and examinations, maintaining a prudent diet (with adequate calcium, fiber, and proteins), and taking medications as prescribed by physician.
- Moreover, regular physical activity has been shown to be helpful for older adults with chronic disease risk factors such as hypertension, high cholesterol, diabetes and overweight.
- As previously noted, preventive measures are important in maintaining dental health and hearing ability.

(2) Recommendations:

- Provide older adults and their family caregivers with information and education on the positive effects of preventative approaches.
- Encourage providers of aging services in Washtenaw County to increase education/ training regarding preventive measures.
- Advocate for insurers to cover appropriate preventive services for seniors.