### **Session Overview**

Michigan's Age-Friendly Initiatives

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- Supporting Age-Friendly Initiatives through Assessment and Planning
- Creating an Age-Friendly Public Health System

## **Age-Friendly States**





# Leveraging Assessment & Planning to Support Age Friendly Initiatives



State Health Assessment & Improvement Plan Local Health Assessments & Improvement Plans State Plan on Aging Area Agency on Aging Plans

## State Plan on Aging Themes

- Access to Quality Care & Services
- Awareness of Services & Resources
- Social Isolation
- Aging in Place
- Transportation Barriers
- Workforce Challenges
- Elder Abuse & Exploitation
- Diversity, Equity, & Inclusion



### GOAL #1

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 quality services where and when they need them.

#### GOAL #2

Prioritize resources to promote social interaction and connectedness, including expanding access to technology and transportation.

#### GOAL #3

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.

### GOAL #4

Leverage programs, services, and resources to ensure older adults have the opportunity to make their own decisions and enable them to age in place.

# Takeaways: Practices in Assessment & Planning that **Promote Equity**

 $\overset{\checkmark}{\diamond}\overset{\checkmark}{\diamond}$ 

Engage community members as broadly and inclusively as possible and remain aware of gaps

Embrace many ways of knowing, looking beyond quantitative data



Intentionally focus on differences of perspective and experience



Develop strategies that address systems

### Creation of an Age-Friendly Public Health System

National Movement

#### • Multi-state engagement

- $\circ$  18-month FL pilot
- $\circ~$  State expansion: MI, MS, NY, WA

#### ○ Federal partners

- HHS Healthy Aging Convenings
- CDC Healthy Aging Branch

#### $\circ~$ Public Health Accreditation Board

- $\circ~$  Healthy Aging Recommendations
- $\circ~$  Focus on Health Equity

#### • Age-Friendly Ecosystem:

- $\circ$  Public health
- Health systems
- Communities
- $\circ$  State



Creating and leading policy, systems, and environmental changes



Connecting and convening multi-sector stakeholders



Coordinating existing supports and services



**Collecting,** analyzing, and translating relevant data



Communicating important public health information



Complementing existing health promoting programs



## Creating an Age-Friendly Public Health System in Michigan



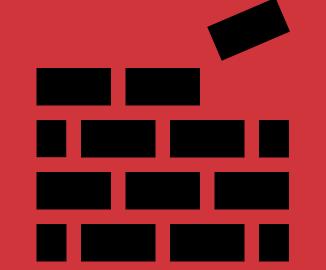




Build on current partnerships and efforts



Systematically assess health & wellbeing of older adults



**Identify** and dedicate **resources** 

## 2022 Michigan Premier Public Health Conference

### Creating an Age-Friendly Public Health System in Michigan: Mini Grant Program

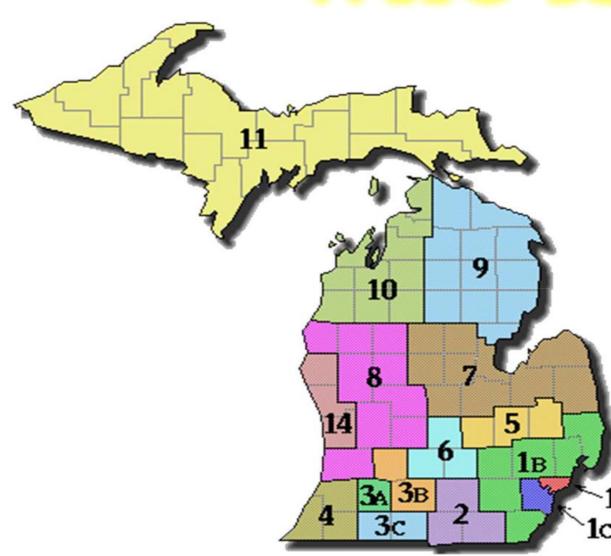
Laura Sutter: Branch-St. Joseph Area Agency on Aging (Region 3C), Director Nichole Baker: Region 2 Area Agency on Aging, Aging & Adult Services Manager Cami Emerson: Region 2 Area Agency on Aging, Community Health Specialist Alex Bergmooser: Branch-Hillsdale-St. Joseph Community Health Agency, Health Promotion & Education Supervisor

# **OUR MISSION**

- Mission: Build, Strengthen, and Sustain an Inter-Agency Relationship
- Goal/Objective: Evaluate, Revise, & Implement Internal Policies to Promote a Friendlier Public Health System for the Aging Population.

• Collaboration & Communication are the Keys to Success!

# WHO IS AAA?



- Nationally 624 AAAs
- Michigan 16 AAAs
- 14 are Non-Profit (Including Region 2 & 3C)
- 4 Reside in Multi-Purpose Agencies (Including Region 3C)

# AREA ÁGENCY ON ÁGING REGION 2 & REGION 3C

• **Mission:** Support older adults, family caregivers, and people with disabilities so that they can live independently in their own homes and communities for as long as is safely possible.

### Tools to Achieve this Mission:

- Agency collaboration & communication
- Partnerships with the LHD
- Mutually beneficial funding opportunities
- Consistent communication & sharing of best practices

### **Area Agency on Aging (Regions 2, 3C) & BHSJ CHA: Pandemic Response**

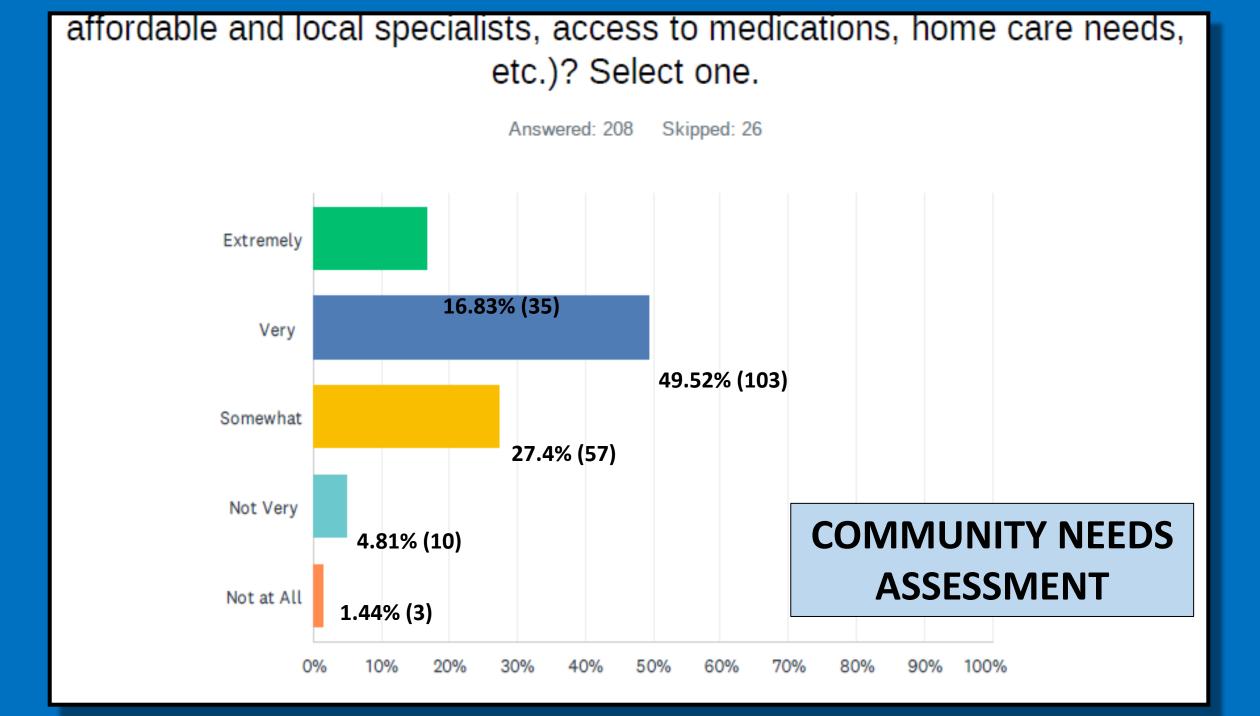
- AAA asked to assist the LHD (Communication & Collaboration)
  - Scheduling Vaccine/Testing appointments, providing clinic venue information, general information on vaccine eligibility and accessibility, etc.
- The support provided by AAA during an unprecedented event like the pandemic exemplified the importance of working together with other agencies and organizations within your jurisdiction towards a common goal (*Relationship Building*).
- Provided a "template" for the partnership between the agencies involved in this mini-grant

### How Did the Pandemic Affect this Project? How Were We Able to Overcome This?

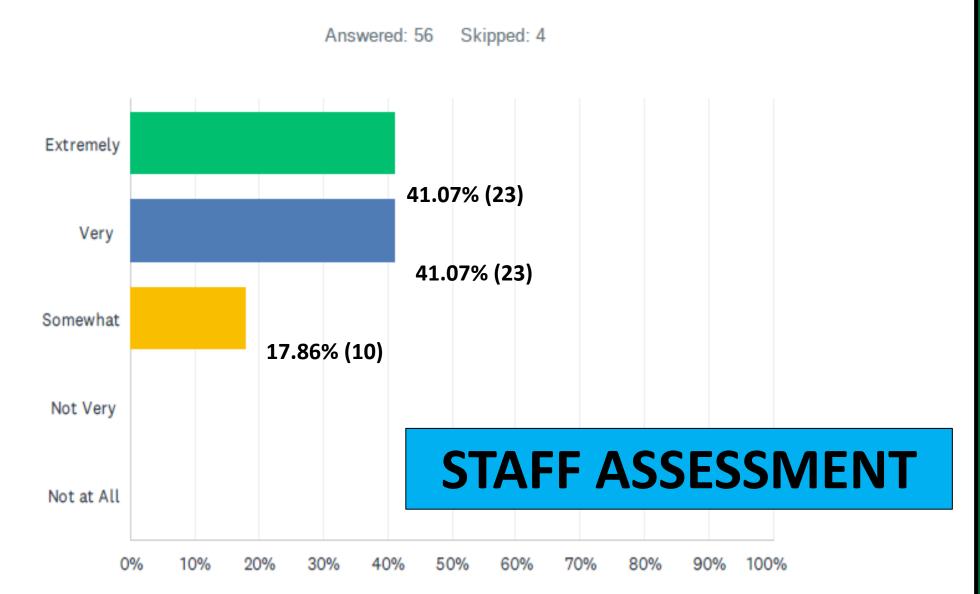
- The Pandemic and effects on the aging population:
  - Social isolation, lack of access to needed services, increased vulnerability for elderly persons, distrust of the medical system, lack of transportation, lack of available home health care options, etc.
- How it affected our project:
  - Although extremely detrimental to the aging population, the Pandemic did highlight the many unique needs of the aging population during a time of worldwide crisis.
  - These needs were further identified through community member, and staff, assessments of our current policies and procedures.
- How our team was able to effectively communicate, collaborate, and overcome obstacles presented by the Pandemic:
  - A detailed Action Plan: Clear, concise, and attainable objectives; well-defined roles & responsibilities; and, communicative & supportive team members.

### Creating an Age-Friendly Public Health System in Michigan: Needs Assessments

- Overall Scope & Purpose of the Needs Assessment
- Developed 2 Surveys: The Community Needs Assessment Survey & the Staff Assessment Survey
- Identify the Biggest Gaps in Care and Unmet Needs of the Community Members
- Use Staff Input to Identify Perceived Deficiencies within our Agencies Current Programs and Policies.



# senior care centers, hospitals, etc. would be in addressing the unique needs of the aging population? Select One.



# **Policy Review Process**

- 1. Gather policy documents from Emergency Preparedness Coordinator.
- 2. Develop a list of key topics and target population to consider when reviewing.
- 3. Read through policy document and "red flag" any statement that does not align with key topics or target population.
- 4. Leave a comment with thoughts on why it is red flagged and how it can be changed to support key topics and target population.
- 5. Discuss red flags with Emergency Preparedness Coordinator for future change.

## Creating an Age-Friendly Public Health System in Michigan: *Policy Review & Revision*

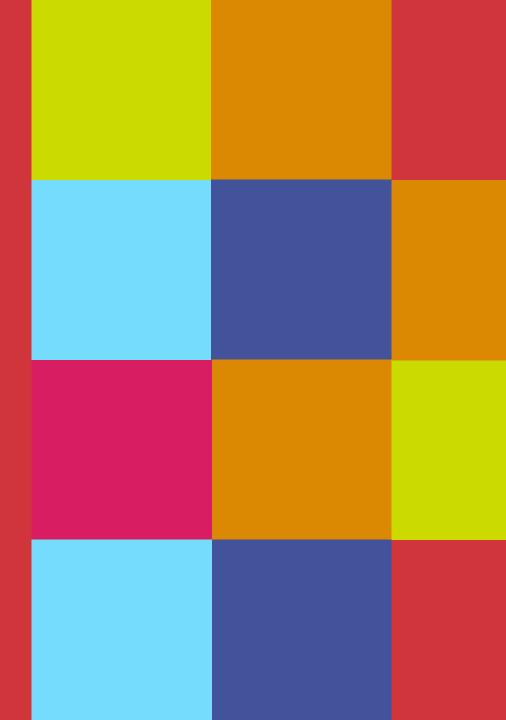
- Policy review and flagging
- Create new age-friendly language to replace the flagged sections within the policies by utilizing the data from the needs assessments.
- Dedicate staff hours to the actual revision process
- Present these changes to the policymakers (Emergency Preparedness Coordinator, Health Officer, Board of Health, etc.) for their approval.
- Implement

# **THANK YOU!**

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### Discussion

Any comments or questions for us?

What opportunities do you see for collaboration between public health, aging services, and community?

How can MDHHS support local collaboration on issues related to aging?