

Saginaw County Commission on Aging

SENIOR SERVICES STRATEGIC PLAN

Fiscal Years 2022-2026



*Report Completed by: Jessica Sargent, SCCOA Director
Draft Presented to SCCOA Advisory Board: October 21, 2021
Final Strategic Plan approved by SCCOA Advisory Board: March 17, 2022*

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ATTACHMENTS

A Older Adult Survey 60+

Older Adult Survey 60+ Summary and Results

B Senior Center Wellness and Activity Survey

Senior Center Wellness and Activity Survey Summary and Results

C Senior Center Public Hearing Input Summary

D Survey Monkey Partner Survey

Strategic Planning: Special Committee

At the September 2021 Saginaw County Commission on Aging (SCCOA) Advisory Board meeting, the draft Strategic Planning and Informational Document was presented to members. During this meeting, Larrie Packard (Chair) appointed Advisory Board members to serve on a Special Committee to develop the Senior Services Strategic Plan. In addition to appointed members from the board, several SCCOA leadership staff were also asked to participate and offer input regarding the plan.

SCCOA Board Members:

Martin Warnick (Chair)

Terry Crevia

Tom McIntyre

Julia Rohde

SCCOA Staff:

Jessica Sargent (Director)

Vera Haller (Administrative/Program Supervisor)

Susan Caister (Nutrition Program Manager)

Tara Stinson (Foster Grandparent Program Coord.)

Gene Schmidt (Accountant)

The Committee held a total of five meetings in October, November, and December of 2021 and again in February and March 2022.

In addition to the Strategic Planning Committee, the agency offered opportunity for public comment through February 13, 2022. The Draft Strategic Planning and Informational Document was posted on the SCCOA website, and a hard copy distributed to each senior center, information regarding opportunity for public comment was included in the January and February 2022 monthly newsletter (which is available online and 2,000 paper copies distributed monthly) and information about the plan was presented to Commission on Aging staff. Five in-person opportunities were scheduled at Senior Centers throughout Saginaw County and two virtual zoom opportunities were also offered (Attachment C). A Survey was also sent to community partners, municipalities, faith affiliations, and any organization that may serve older adults in some capacity (Attachment D).

During Special Committee meetings, members reviewed and updated the agency's mission and vision, analyzed public comment from surveys collected (Attachment A and B), discussed agency challenges and opportunities, and identified five goals and prioritized tasks for implementation (page 13).

At the March 2022 Special Committee meeting the Senior Services Strategic Plan, for fiscal years 2022 through 2026, was approved by Committee members to present to the SCCOA Advisory Board. On March 17, 2022, the SCCOA Advisory Board approved by motion to adopt the plan, and present to the Saginaw County Board of Commissioners.

A SPECIAL THANK YOU TO COMMITTEE MEMBERS AND COMMISSION ON AGING LEADERSHIP STAFF, FOR DEDICATING THEIR TIME AND OFFERING VALUABLE INPUT AND GUIDANCE THOROUGHOUT THIS PROCESS.

SCCOA Mission & Vision

Mission Statement:

To develop and provide a comprehensive array of services, programs, and opportunities to enhance the quality of life for older adults.

Vision Statement:

To be the main source that makes a difference in the lives of Saginaw County older adults and their families.

Core Values:

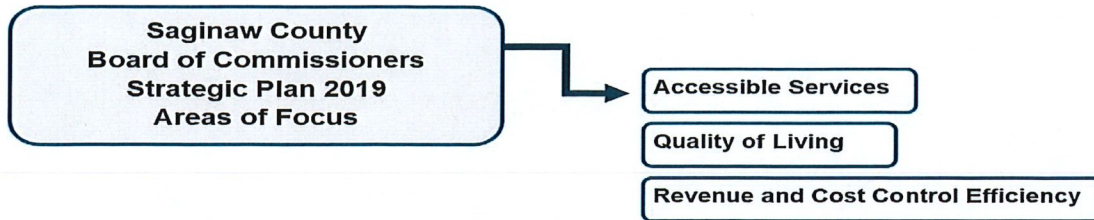
- High quality services provided by professional and compassionate employees
- A workplace that is enjoyable, safe, and friendly
- The continuous growth and development of all employees
- The need to achieve our goals and objectives as a team
- High integrity and honesty in all actions and encounters
- The continuous improvement of all services and processes
- Engaging in community and collaborative partnerships

Introduction

Why a Strategic Plan?

The purpose of a strategic plan is to help chart a course of direction that the Director and Advisory Board will follow in their tasks of providing leadership and governance for the Saginaw County Commission on Aging (SCCOA) in the next five years. The strategic plan identifies goals and action items that will need to be taken to achieve the goals. Goals are based on understanding an organizations strengths, weaknesses, opportunities, and threats as well as, and more importantly, the needs of older adults who utilize the services at SCCOA. Action items are based upon a true understanding of the authority of the Commission on Aging decision makers, staffing capacity and capabilities as well as budgetary constraints. Nothing is unachievable but a realistic outlook is important. By identifying goals, the organization can work diligently to seek resources, such as funding, to make the goals a reality.

The SCCOA is pleased to present the Senior Services Five-Year Strategic Plan for adults 60 and older in Saginaw County, Michigan. The SCCOA directs programs and services to improve the quality of life for seniors. The strategic plan will also help align and communicate the SCCOA's goals with other community organizations and governing entities, such as the Saginaw County Board of Commissioners' strategic plan. This collaboration, communication, and understanding will create an atmosphere of partnership thereby fostering a climate where things will get done. Collaboration is essential to make many of the goals established achievable.



Governance

The Saginaw County Commission on Aging (SCCOA) is a Department of the County of Saginaw. The agency is comprised of an Advisory Board with 11 members, appointed by the Saginaw County Board of Commissioners for each of the eleven districts representing constituents of Saginaw County.



The agency has a total of 72 employees (21 full time, 30 part time, and 21 on-call/temporary) with 250+ volunteers in any given year. The agency does not receive any general fund appropriations and is entirely supported by the SCCOA property tax millage, State/Federal Grants, donations, in-kind and interest. SCCOA’s millage levied at .5900 mills generates approximately \$2,952,472 in revenue annually and levied for six years through fiscal year 2025. The agency operates on a \$5.5 million annual budget and is currently operating in a deficit position, with expenses exceeding revenue.

Background

The Older Americans Act (OAA) of 1965 created the framework for providing programs and services specifically designed to help older adults remain as independent as possible. The majority of OAA programs are “core services” authorized by grants for State and Community Programs on Aging. These core services vary depending on local needs but often include nutrition, caregiver support, in-home assistance and more. States receive grants according to a formula based on their share of the nation’s population of individuals age 60 and older. States then pass these funds to Area Agencies on Aging (AAA), which coordinate programs and services for senior citizens through local providers. Counties are key recipients of funding and frequent administrators of these programs, and often supporting the same programs with local tax revenue dollars (millage), which is the case in Saginaw County. Services provided through Michigan’s aging network can help older adults live at home longer. For many, these services can provide a community-based alternative to a nursing home as they complement the care provided by informal caregivers, like family or friends. Saginaw County’s immediate network which includes Region VII Area Agency on Aging and the neighboring Counties of Bay, Clare, Gladwin, Gratiot, Huron, Isabella, Midland, Sanilac, and Tuscola. As the nation’s population rapidly ages, counties face increasing demand and challenges in providing services to their older residents. Federal funding for OAA programs has not kept pace with these demographic changes. Without additional resources, counties will face new challenges in providing the aging population with access to critical services.

Other SCCOA sources of funding, in addition to OAA programs, include a local property tax millage, federal/state funding for Transportation, federal funding for the Foster Grandparent Program (AmeriCorps), and local grants/donations. Most programs and services offered are partially supported by revenue in the form of state/federal grants, in addition to local resources. The agency does not receive any general fund dollars from the County of Saginaw. The agency budget includes 58% from local millage, 22% federal grants, 14% state grants, 4% donations, and 2% interest/other.

Key External Factors

- State and Federal legislation can impact programs administered by the Saginaw County Commission on Aging (SCCOA).
- Additions or reductions in federal appropriations or program mandates are unpredictable and directly affect activities and expenditure plans.
- Indirect costs from the County including but not limited to; Mainframe Modernization Project; unfunded liabilities.
- Expansion of the aging population increases the demand for aging services, which affects the quantity and diversity of these services.
- Local property tax evaluations impact annual millage levy.

Executive Summary

The Saginaw County Commission on Aging (SCCOA) was established in 1973 and for 49 years provided many programs and services to meet the needs of older adults and defines an “older adult” as someone 60 years of age or older. The agency was officially established as its own Department of the County in 1994 and found its home at the current location at 2355 Schust in August of the same year. SCCOA will mark its 50th Anniversary as an organization in the year 2023. It is recognized that SCCOA staff and volunteers are dedicated to clients and this strength is a driving force within the organization that influences the effectiveness of the agency and its ability to provide and manage services.

SCCOA specializes in not only serving older adults, but also helps families, caregivers, and provides opportunities for volunteers. Services provided through Michigan’s aging network can help older adults live at home longer. The political climate and support for programs addressing the needs of older adults has been very positive at both the state and federal level in the recent years, however funding has remained stagnant. The impact of the COVID-19 pandemic has shed light on our older adult populations, whom have been considered the highest risk and most vulnerable. Emphasis has been placed on support systems to reduce social isolation and support mental health, especially for a population which many were already socially isolated prior to the pandemic. The momentum gained for this support must continue to be promoted through funding and policy changes to ensure local service providers can continue to meet the demand for services that will only increase as the population ages. Trends and changes in the older adult population, and their needs must continue to be evaluated to stay relevant and based on the needs of the target populations served. Consideration of the unknown potential impact of the COVID-19 pandemic on operations, staffing challenges, and increased cost of food/supplies will remain on the radar in future years. Additional revenue from Older American Act funding affiliated with the American Rescue Plan Act (ARPA) and other proposed legislation will also impact the agency’s ability to provide services.

There is a high value on having services accessible throughout the geographic areas of Saginaw County, however our services must remain financially sustainable, and this is often difficult to do with a slow tax base increase, coupled with increasing costs. Continuously engaging with agency stakeholders and assessing potential future partners, will be an important component throughout the planning process. While organizational strengths are evident in the many served older adults, there are always weaknesses and challenges that are faced. Historically, residents and stakeholders have proven to support older adults in Saginaw County through millage renewal and increases. While the organization has a dedicated team of staff and volunteers that accompany quality programs, issues such as a need to expand services and financial limitations are weaknesses that need to be addressed. Evaluating programs and services will be necessary to ensure SCCOA facilities are better equipped to provide/deliver service in a more cost-effective manner and continue to meet the needs of residents in the community. Offering fewer service facilities that are better equipped to provide/deliver service may be necessary. Transportation continues to be a high need, especially outside of the city limits.

Much of what the agency has been able to accomplish can be attributed to older adults in our community, through taxes paid, volunteerism, and civic activities. *We owe them much gratitude.* We must also acknowledge the dedication of many County officials and staff, along with nonprofit organizations, business and community partners who have helped make our successes to date and with whose help we will continue to improve and expand on those successes.

Ongoing analysis will need to be done on the Baby Boomer generation to project their utilization of senior centers and other community-based services within the department, as the large and diverse “Boomer” cohort will continue to shape the demands on services as they age. Changes on the Federal, State and local levels will likely influence the climate for department’s financial growth. As our population ages, *accessibility to programs and services* should be placed at a high priority as a County, as this affects overall *quality of life*.

General Demographics

Saginaw County, according to the 2020 Census has a population of 190,124, with 49,146 adults over the age of 60 (or 26% of the population). While the overall population in Saginaw County has shown a decline in the recent decades, the estimated number of older adults in the County is growing. In 2010, approximately 20% of the total population was 60 years of age or older, by 2019 this grew to 26%. Individual’s age 85 and over are the fastest growing segment in our state. This is aligned with the Baby Boomer generation (born between 1946 and 1964), which was the largest generation in history occupying the age range of 57 to 75 years old. Census Bureau reports show older adults are more educated, have higher incomes, better health, and are more likely to live alone and have fewer children whom they can rely on. They are also living longer, creating a cohort of seniors who have very different and diverse needs.

	Nation	Michigan	Saginaw County
Total population	328,239,523	10,077,331	190,124
Age 60 and older	75,058,081	2,464,173	49,146
Percentage age 60 and older	23%	24%	26%

Saginaw County residents age 60 and older are a diverse population. Of those populations identifying as one race, 72% identify as white, 15% Black/African American, 0.2% American Indian or Alaska Native, 0.7% Asian, 0% Native Hawaiian and Other Pacific Islander and 1.2% some other race. For populations identifying as two or more races, 0.8% identifies with two or more races, 4.9% Hispanic or Latino origin (of any race) and 79% identified as White alone, not Hispanic or Latino. The median age in Saginaw County for individuals age 60 and over is 70 with 44% Male and 56% identifying as Female. A high percentage, 82% own their own home, 18% rent and 42% live alone. Older adults that live below poverty is 17% (or less than \$10,830 for a single person household) with another 83% at or above the 150% poverty threshold (or less than 19,329 for a single person household).

Income, poverty level, and education of residents are considered indicators of the economic wellbeing of a community. The U.S. Census Bureau estimates that 40% of Saginaw County residents age 60 and older have attained a High School Diploma or GED, 32% completed some college or an Associate's Degree and 16% a Bachelor Degree or higher. Only 13% were considered to have achieved less than a high school diploma/GED. Approximately 21% of older adults are still in the workforce, 16% identify as a Veteran, 11% receive SNAP benefits, and 34% indicate they have a disability.

The year 2030 marks a demographic turning point for the United States. Beginning that year, all baby boomers will be older than 65. In 2034, it is projected that older adults will outnumber children for the first time in U.S. history, according to the U.S. Census Bureau. The nation's 65 and older population is projected to nearly double in size in the coming decades, from 49 million in 2016 to 85 million in 2060. Aging boomers and rising life expectancy will increase the older population as well. The State of Michigan indicates that the 60+ population is expected to peak in 2034 at 2.9 million and as of August 2021 there are more residents over the age of 60 than under the age of 18. In Saginaw County, one in every four residents is age 60 or older. Additionally, as the Boomer generation gets older, they will likely need more in-home supports to age safely in their home. The trend for the Nation, State and County is an ever-increasing senior population. How will we, as a community, respond to the growing needs and preferences of this expanding older adult population? How will needs change and how will our organization evolve to continue to meet those needs in the future?

Programs and Community Supportive Services

INFORMATION & REFERRAL	TRANSPORTATION	MEALS ON WHEELS	CONGREGATE (SENIOR CENTERS)
CARE MANAGEMENT	MINORITY OUTREACH	IN-HOME SUPPORT SERVICES	CAREGIVER & KINSHIP CARE SUPPORT
PROJECT LIFESAVER	MONTHLY NEWSLETTER	TAI CHI FOR ARTHRITIS	ANNUAL SENIOR PICNIC
SENIOR PROJECT FRESH	CASE COORDINATION AND SUPPORT	FOSTER GRANDPARENT PROGRAM	VOLUNTEER OPPORTUNITIES AND RECOGNITION

Climate: A Reflection on the Pandemic

Census Bureau statistics indicate that there will be an increase of older adults living in Saginaw County who will be eligible for services. Individuals are living longer which will affect their physical ability to access community supports and activities which provide for quality of life. In March 2020, the COVID-19 pandemic significantly impacted the health and wellbeing of Michigan's older adults and many businesses and organizations were forced to close their doors for the safety of all Michiganders. Four areas of concern of the effects of the COVID-19 pandemic from a statewide perspective include:

- Social Isolation
- Direct Care Workforce Limitations
- Transportation Access
- Service and Resource Awareness

The SCCOA was deemed an essential service provider and offered transportation to medical appointments, grocery shopping, home delivered meals, wellness checks, virtual programming, and a new curb-side meal pick up program (to replace the traditional congregate model). The agency also started to transition programs that would normally be offered in the senior center, to a virtual model. During this transition, it was evident that many older adults that are served by SCCOA either could not access or did not want to participate virtually. The pandemic shed a lot of light on the value of person to person contact and virtual is a great alternative when in-person contact is not possible, however not the solution. As we rationalize the importance and relevance of senior center programming in the future, several indicators throughout the pandemic suggest they are an important facet in the community. Even though some centers see less participation than others do, the sense of community is present, and this strength is critical for all of our programming endeavors.

Congregate/Curbside Pick Up Meal Program: The curbside pick-up meal program saw a diverse "different" group of older adults participating. For the more rural centers, many of the regular participants continued to visit through the drive through where offerings of birthday celebrations, anniversaries, holidays, etc. were still celebrated all while social distancing. "Mini routes" were established by more active older adults, who would pick up meals and deliver to those without transportation. A food need was being met, but also in this community participants continued to stay connected with program staff, even without the socialization of the senior center activities. The Marie Davis Center normally operates with limited activities (activities are driven by participants) although has seen an increase in participation over the past several years. The curbside meal program saw an increase in demand and had many folks participating in the program, that may have been too frail to drive themselves and/or participate in programming in the past. They were connected with our agency and offered additional support services after curbside discontinued and the centers re-opened. Participants picking up meals had a few "regulars" but also a large number of individuals that have not participated before. The Eleanor Frank Center served mostly new participants, which is an indicator that folks participate at the center for the socialization, not necessarily the food, and may have had other options in the area to meet those needs. The centers serve as a community focal point, to disseminate information and connect residents in each community with services. Is the grab and go model something our boomers are looking for versus the traditional senior center model? The congregate dining setting emphasizes healthy nutrition options, socialization, and connections with

other community resources. These changes could be seen as policy changes in the future, as meals are still permitted to be picked up "to-go".

Virtual Programming: Classes were successful, but only where additional time and effort could be placed on assisting individuals who wanted to participate. For example: the Caregiver/Kinship Caseworker dedicated a lot of time assisting participants setting up zoom and teaching them how to use it on their phone/computer. SCCOA found that when just a virtual program was offered, it was more likely to get participation if we told participants to call-in, vs use a virtual platform, which very much limited the many benefits of using a virtual platform as opposed to talking on the phone. Facilities are not set up with Wi-Fi or ability to offer programs virtually. A staff person must be present to get everything set up and troubleshoot throughout a program or activity for it to be successful. Enhanced technology improvements at each senior center, training to staff (many who are older adults themselves), could offer individuals new opportunities that do not cost much to facilitate such as exercise classes, educational material, etc. The YMCA also offered a free general membership to all of our senior center locations to offer virtual programming at their site and access to thousands of online wellness activities. The challenge, most senior centers do not have internet or the technology necessary to carry out these programs.

Transportation: Transportation continues to be a barrier in our community. To privately pay for transportation, it could cost a resident upward of \$50-70 each one-way trip depending on the destination. This is a high demand service provided by our agency which is limited to medical appointments and grocery trip shopping. Recently, a wait list was established for dialysis transportation (as often dialysis required regular weekly trips of 2-3 visits per week). To maintain equitable services offerings, the total number of individuals we can provide this service to is limited, so other trips can be offered to residents. With no other public transportation options available for those residents living outside city limits, this is a high need service, that will require further analysis to determine ability to expand and offer more services. A volunteer model is presently being explored, although ability to recruit and retain volunteers has been a challenge for other programs within the agency. Liability and insurance coverage is also a concern in regards to a volunteer program.

Meals on Wheels: This program serves older adults who represent an extremely frail and vulnerable population, often with significant health and social support needs and continues to see an increase in demand for services. Since the beginning of the pandemic, this program has been operating on a modified delivery schedule to address the shortage of drivers and kitchen staff and inability to fill critical positions. Typically, a meal is delivered five days/week (or 3 days/week), along with a daily wellness check, from the senior center closest to the individuals residence. A combination of HOT and FROZEN meals are currently being delivered 2/x per week, which does not provide for a daily wellness check and frozen meals are often difficult for some consumers to handle/prepare. While this model is working temporarily, every effort should be made to resume normal operations and deliver HOT meals five days per week or at the very least research and explore this alternative delivery model more in depth. The Meals on Wheels Association of America, recently conducted research that reported, a daily HOT meal delivery lessened feelings of isolation and loneliness and reduced the rate of falls by using this traditional service delivery model. Individuals participating in this program also have an assigned caseworker, who has maintained regular contact (mostly by phone) during the pandemic.

Foster Grandparent Program: This federal grant allowed for much flexibility on what it meant to serve in the height of the pandemic. Program staff worked diligently to offer “new ways” of serving and connecting with students in a virtual world. Funding was appropriated to purchase and upgrade some technology, which will be utilized for program training and possibly virtual learning in future years.

In-home Support Services: In 2018, a wait list started for In-Home Support Services due to financial limitations (i.e. more people in need of the program vs. funding available to support). Throughout the pandemic, many individuals cancelled care due to the reasoning they did not want anyone inside their home that could get them sick. As a result, many folks did not receive care for months at the height of the pandemic. As vaccines became readily available, the agency saw an increase in demand for in-home services again. In addition to an already established waitlist, the program now had the funding to provide services, but the network of services providers the SCCOA is authorized to contract with were experiencing a shortage of **Direct Care Workforce**. This has only gotten worse, as “help wanted” signs and more lucrative opportunities have shaped way in the past year. Now SCCOA’s established wait list is because services cannot be staffed. This is a problem identified across the State of Michigan.

Analysis of Stakeholders

Stakeholders are those who have an interest in and/or influence in decisions made about senior services.

The stakeholders in senior services in Saginaw County include:

- Older adults
- Taxpayers
- Adult children of aging parents, caregivers
- Various agencies and organizations that network and collaborate with SCCOA in service delivery
- SCCOA Advisory Board and Staff
- Saginaw County Board of Commissioners
- Other elected officials
- Home health care agencies
- Whole community and/or adults who may become eligible for services

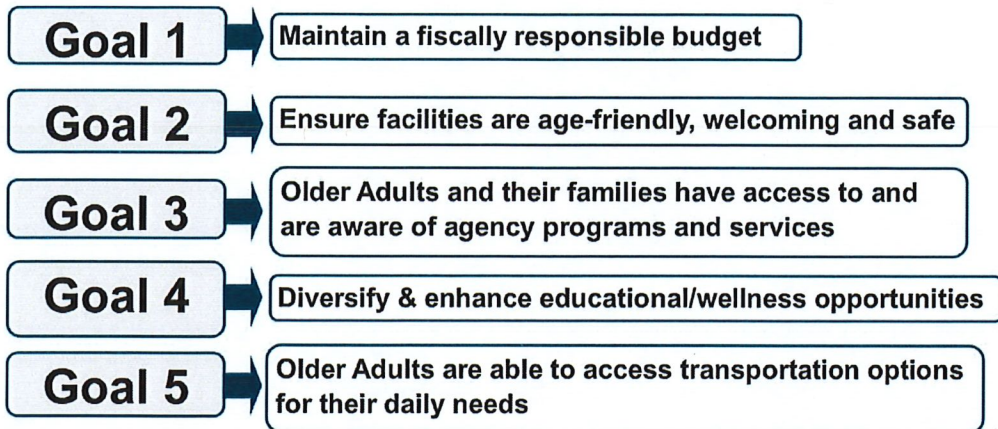
Takeaway notes to consider regarding stakeholders:

- What do stakeholders think about SCCOA services?
- Many in the community are unaware and uninformed of what SCCOA provides.
- In general, people do not want to deal with issues relating to aging, illness, or frailty until it affects them personally.
- Participants who receive SCCOA services are generally satisfied.

SWOT Analysis

<p style="text-align: center;">STRENGTHS</p> <ul style="list-style-type: none"> • Promotion of Activities- Monthly Newsletter • All are welcome attitude • Friendliness expressed at activities • Strong leadership/workforce present • Exemplary dedicated Volunteers • Already meet many needs through programs/ services • New leadership brings fresh perspective and changes • Consistent and positive working relationships 	<p style="text-align: center;">WEAKNESSES</p> <ul style="list-style-type: none"> • Service expansion to meet increase in demand for meals on wheels (especially within the City limits where it is historically more difficult to find volunteers to deliver) • Limited transportation outside of City limits • "Poverty" stigma • Lack of participation in some activities, due to multiple generations in the 60+ age group • Aging population needs have become more complex, requires more staff time and assistance • High % of older adults need assistance with technology • Donations have declined as inflation rises • Wage increases due to Compensation Study Implementation and fringe increases due to unfunded liability • Strategic planning during an uncertain time
<p style="text-align: center;">OPPORTUNITIES</p> <ul style="list-style-type: none"> • Form new collaborative partnerships • Senior center image/re-branding • New grant opportunities • Technology use to streamline processes • Better marketing strategies to reach older adults and their families • Recognition from federal/state level importance of Older American Act Programs highlighted during the pandemic • Healthcare partnerships • New ways to incorporate volunteers into programs • Re-establish advisory councils at senior center's • ARPA and other legislation that could bring additional revenue to programs and services • On-going local research to meet unmet needs 	<p style="text-align: center;">THREATS</p> <ul style="list-style-type: none"> • Increase in population age 60+ (also increase in those age 75+ requiring more assistance) • Longer term impact of COVID-19 on volunteers and programs • Programming limitations due to budget constraints and minimal grant increases in funding • Millage renewal not up until 2024. Must rely on present resources/fund balance for operation/capital improvements • Finding/recruiting new volunteers • Increase cost of materials and supplies • Difficulty filling critical positions • Minimal growth in tax revenue • Services restricted by funding availability

Top Five Goals & Prioritized Tasks for Implementation



YEAR 1

- ⇒ Complete Facility Assessment/Concept Design.
- ⇒ Develop Capital Plan and assessment for implementation.
- ⇒ Evaluate programming and need for re-alignment of resources.
- ⇒ Evaluate delivery of service for meals on wheels program.
- ⇒ Return Annual Senior Picnic and Volunteer Recognition Events.
- ⇒ Develop direct mailing system for monthly newsletter.
- ⇒ Analyze opportunity for American Rescue Plan Act (ARPA) funding from Saginaw County Board of Commissioners and Region VII Area Agency on Aging and impact on programs/budget.
- ⇒ Support re-structure of FGP program staffing complement to accommodate expansion grant.
- ⇒ Explore new grant opportunities or partnerships to support goals.

YEAR 2-3

- ⇒ Develop new agency logo & senior center branding.
- ⇒ Develop marketing plan. Streamline marketing and media presence.
- ⇒ Reduce use of unrestricted fund balance.
- ⇒ Develop annual training plan for program staff. Bring back Annual Staff Day.
- ⇒ Add a special agency event to include seniors *and* their families.
- ⇒ Develop fund to support senior center activities.
- ⇒ Explore avenues to attract “younger” seniors.
- ⇒ Establish new volunteer opportunities.
- ⇒ Advocate for Millage *renewal and increase*.

YEAR 4-5

- ⇒ Add technology to senior centers & increase digital literacy.
- ⇒ Add one (1) new class/activity to at least five (5) senior center locations.
- ⇒ Develop guest speaker plan to offer to other organizations/churches to request/share information.
- ⇒ Develop cost analysis/needs plan on whether to expand or maintain current structure of transportation program. Determine feasibility of adding volunteers to compliment transit program.

2021 Advisory Board, Board of Commissioners and SCCOA Employees

<u>COA ADVISORY BOARD</u>		<u>BOARD OF COMMISSIONERS</u>	
Larrie Packard	<i>Chairperson</i>	District #10	Carl Ruth
Martin Warnick	<i>Vice-chairperson</i>	District #8	Dennis Krafft
Terry Crevia		District #5	James Theisen
Cheri Stack		District #2	Jack Tany
Robert Hanley		District #11	Michael Webster
Mary Speaker		District #1	Cynthia Winiecke
Dennis Morrison		District #4	Sheldon Matthews
Julia Rohde		District #6	Kyle Harris
Tom McIntyre		District #3	Christopher Boyd
Reno Shores		District #7	Carol Ewing
Exie Robinson		District #9	Gerald Little
<u>General/Administrative</u>		<u>Foster Grandparent Program</u>	
Jessica Sargent	Director	Tara Stinson	Foster Grandparent
Vera Haller	Administrative/Program	Aubree Bischer	Program Coordinator
	Supervisor (Office/	(vacant)	Program Assistant
	Transportation)		Program Assistant
Gene Schmidt	Accountant II	<u>Nutrition Program</u>	
Angela Vasquez	Office Assistant	Susan Caister	Nutrition Program Manager
Rasheda Corley	Program Assistant	Adam Stephan	Food Service Supervisor
Deborah Grasley	Account Clerk	Riley Lutz	Food Service Coordinator
		(vacant)	Volunteer/Activities
<u>Transportation Program</u>			Coordinator
Darrell Beemon	Program Specialist I/	Augustine Martinez	Senior Center Specialist
	Dispatcher	Jamie Chapman-Jones	Program Specialist
Subrina Bland-Carter	Driver II	Tracey Allen	Kitchen Assistant
Williams Jones	Driver II	Mary Ann Currier	Kitchen Assistant
Albert Garcia	Driver II	Julie Seige	Kitchen Assistant
Letreanna Brooks	Driver II	Tashannon Evans	Kitchen Assistant
Mike Lozano	Driver II	Yvonne Weathers	Kitchen Assistant
Mark Foster	Driver II	Sue Quaderer	Senior Center Coordinator
Tom Calligaro	Driver II	James Benjamin	Senior Center Coordinator
Lloyd Riley	Driver II	Amy DeGeus	Senior Center Coordinator
James Jasper	Driver II	Laura Nixon	Senior Center Coordinator
Mike Hart	Driver II	Maria Sanchez	Senior Center Coordinator
Fred Taylor	Driver II	Carol Zaremba	Senior Center Coordinator
		Joanie Patyk	Senior Center Coordinator
<u>Case, Coordination & Support/Caregiver Support</u>		Helen Lutz	Senior Center Coordinator
<u>Program/In-Home Support Services</u>		Shirley Dunbar	Senior Center Coordinator
Susan Wyman	Caseworker	Candelaria Barsenas	Senior Center Coordinator
Tanya Monville	Caseworker	Belinda McCray	Senior Center Coordinator
Amy Smithhart	Caseworker	Bonnie Jackson	Meals on Wheels Driver
Deborah Gibson	Caseworker	Reed Bradshaw	Meals on Wheels Driver
Dorothy Omar-Antwine	Caseworker	George Myles	Meals on Wheels Driver
Joyce Rivers	Caseworker	Dan Poag	Meals on Wheels Driver
Darlene Byrd-Young	Caseworker	David Kelso	Meals on Wheels Driver
		Jacqueline Littlejohn	Meals on Wheels Driver
		Miguel Torres	Meals on Wheels Driver
		Glorie Harris-Jelks	Meals on Wheels Driver
		Ruben Brooks	Meals on Wheels Driver

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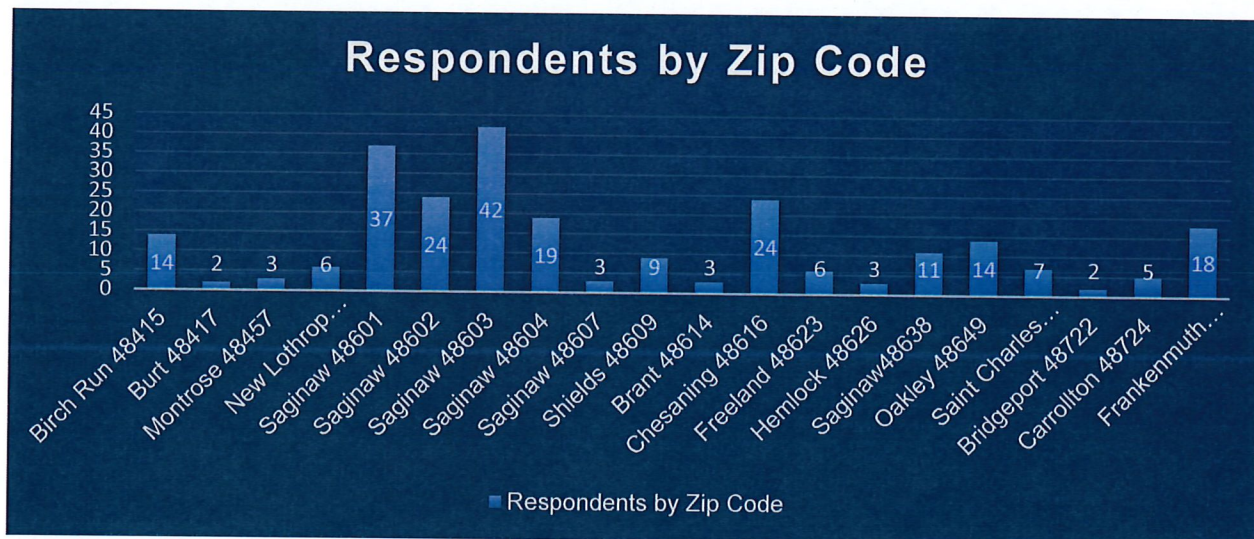
- Administration for Community Living: 2020 Profile of Older Americans.
- U.S. Department of Commerce, U.S. Census Bureau: Population Projections for 2020 to 2060.
- Saginaw County Department of Public Health: Community Health Assessment
- Meals on Wheels Association of America (www.mealsonwheels.org)
- MDHHS: Michigan State Plan on Aging Fiscal Years 2021-2023

ATTACHMENT

A

Older Adult Survey and Summary and Results

In October 2019, surveys were distributed at senior centers, to clients currently receiving other services through the agency, and made available online. The agency wanted to know more about the experience of aging in the local region so resources could be aligned and planned to meet the current and future needs of Saginaw County resident's age 60 and better. It is important to note data driven from the survey results are perceptions of those age 60 and older.



Of the 277 surveys returned, **seventy-seven percent (77%) of respondents have utilized COA programs and services in the past year.** Survey completion was well represented throughout the geographic area of Saginaw County, with a higher percentage in the City of Saginaw and Saginaw Township. The data is reflective of the top three services utilized at the agency and include Home Delivered Meals (41%), Senior Centers (28%), and Transportation (15%). The goal of the survey was to obtain information from residents both utilizing services and *not utilizing* services. Of the respondents, only 23% have not utilized a program or service in the past year. It may prove beneficial to re-do the survey with support of additional marketing/advertisement to reach a different demographic. This information may also assist to guide goals and action items for future programming and service needs. While our programs and services are not income based, understanding the overall economic climate of older adults the agency serves, could offer certain assumptions regarding overall health and quality of life.

Of the 277 surveys returned, 10% were age 60-64, 33% age 65-74, 31% age 75-84, 26% age 85 or older and 57% of respondents were age 75 or older. In addition, 71% identified as Female, 25% as Male, and 4% did not disclose. Over 71% own their own home, 65% live alone, 25% live with a spouse and 13% Live with family or friends.

Additional information obtained concluded that 44% of older adults surveyed currently drive, 42% do not drive, and 14% *drive only when they have to*. Assumptions about perceived health include 88% ranking their health as GOOD or FAIR with only 12% self-reporting their health as

POOR. In addition, 24% have an income at or below poverty for a single person household with 65% reporting income below \$2,000/month (if a 2-person household this is also at or below poverty). Over 29% have regular contact with family/friends/neighbors every day, 43% have contact several times a week, 13% once a week or fewer, 15% once a month or fewer and 26% receive help or assistance from another person/program.

Individuals responded how Older Adults were asked how important they think it is for older adults to have access to the programs and services listed below. Responses reflected that over 75% of individuals felt it was ***Somewhat Important*** or ***Very Important*** for older adults to have access to ALL of the programs or services listed. Less than 10% of respondents were ***Neutral*** or responded ***Not Important***. We can assume most respondents are utilizing or have utilized a program or service within the last year, therefore their perception would be that particular program (s) are important to have access to.

Home Delivered Meals (Meals on Wheels)	(93%)
Information on programs and services available	(92%)
Senior Centers	(89%)
Home Safety (smoke detectors, hand rails, etc.)	(86%)
Health and Wellness Programs	(84%)
Transportation (Grocery Shopping, Recreational, Other)	(81%)
Home repairs/modification services	(81%)
Legal Services	(79%)
Caregiver Support Groups	(79%)
Elder abuse prevention education and supports	(79%)
Incontinence supplies	(78%)
Loan Closet (loan equipment wheelchair, walker, cane)	(78%)
Transportation (Medical)	(76%)
Volunteer Programs	(75%)
Emergency financial assistance for utilities	(75%)
Help with housekeeping, bathing & respite for caregiver	(75%)

Individuals were also asked about current needs and opportunities when utilizing programs and services. Technology appears twice for most responses that individuals always need help with. Technology was also a top response for activities and programs individuals would like to have access to.

Top five (5) responses that individuals <i>sometimes</i> need help with:	
1.	Knowing where to obtain information about services and benefits
2.	Understanding health insurance/Medicare
3.	Household chores
4.	Loneliness, isolation, or depression
5.	Technology needs such as using a phone/internet/computer
Top five (5) responses that individuals <i>always</i> need help with:	
1.	Tax Preparation Assistance
2.	Transportation (Grocery shopping, recreational, other)
3.	Home repairs or maintenance
4.	Transportation (Medical)
5.	Impaired Mobility <i>and</i> ; Technology needs such as using a phone/internet/computer

ATTACHMENT

B

Wellness & Activity Survey and Summary and Results:

Surveys were distributed in February of 2020 in preparation of the \$50,000 wellness grant from the State of Michigan. All senior centers were included in the survey; however, the South Colony Senior Center was not eligible for the carry out of the grant as individuals live inside of that facility. Over 500 surveys were distributed, 399 returned. Participants also asked about Virtual Programming and concluded 75% were not interested in virtual programming. The primary reasons listed included; do not have a computer, do not know how to use a computer, hearing problems, want to be around people, do not do anything online, not good with technology, hard to get to know other seniors, no internet and need help using phone/tablet.

MARIE DAVIS

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Computer/Technology/Internet, Strength Training, Puzzles/Brain Teasers, Walking Club, Guest Speakers (mental health, covid-19, cooking)

Existing Activities meet needs: 35% Yes 65% No

Other Comments: Transportation to center, Wi-Fi, mental health training, help with housing and financial.

ELEANOR FRANK

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Bingo, Computer/Technology/Internet, Dancing, Guest Speakers, Chair Aerobics

Existing Activities meet needs: 70% Yes 30% No

Other Comments: Evening programs, more active programs, mail out information

FRIENDSHIP

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Walking Club, Computer/Technology/Internet, Dancing, Strength Training, Bingo

Existing Activities meet needs: 39% Yes 61% No

Other Comments: Handicap parking, singles to meet other singles, more active things to do, toiletries

BUENA VISTA

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Cooking, Bingo, Walking Club, Water Aerobics, Computer/Technology/Internet.

Existing Activities meet needs: 80% Yes 20% No

Other Comments: Open swim & aerobics in the pool, personal hygiene products, more speakers (mental health), transportation.

HEMLOCK

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Bingo, Computer/Technology/Internet, Guest Speakers, Chair Aerobics, Yoga

Existing Activities meet needs: 58% Yes 42% No

Other Comments: Movies, only bingo needs other activities, more interaction with people, play games.

FREELAND

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Strength Training, Computer/Technology/Internet, Guest Speakers, Bingo, Line Dancing

Existing Activities meet needs: 65% Yes 35% No

Other Comments: Pickle ball, cardio drumming, line dancing, evening hours.

CHESANING

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Bingo, Guest Speakers, Sing-A-Longs, Strength Training, Tai-chi.

Existing Activities meet needs: 77% Yes 23% No

Other Comments: Need more than bingo and pool, open longer hours (not enough time after lunch), need special programs, more programs geared towards younger retired people.

BRADY

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Bingo, Nutrition Education, Guest Speakers, Strength Training, Dancing, Tai-chi.

Existing Activities meet needs: 90% Yes 10% No

Other Comments: Transportation, more people and varied activities.

MAPLE GROVE

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Bingo, Line Dancing, Strength Training, Walking Club, Guest Speakers

Existing Activities meet needs: 73% Yes 27% No

Other Comments: Need more activities, combine Maple Grove/Chesaning/Brady, more outings, coordinators are great, speakers, crafts.

SOUTH COLONY

Activities I enjoy or would like more of (organized classes/topics):

- Top Five: Dancing, Computer/Technology/Internet, Walking Club, Guest Speakers, Chair Aerobics

Existing Activities meet needs: 45% Yes 55% No

Other Comments: Outdoor trips, movies, activities for those less fluent in English, how to use a computer.

ATTACHMENT

C

Senior Center Public Hearing Input Summary:

Frankenmuth January 27, 2022

"We should look into the "fun buddy" which is a transportation program operated in Tuscola County"

"People would come here if they could get here"

"Had a new cooking class and two new people came"

"We would like more exercise classes"

Present: Jessica Sargent, Martin Warnick, Susan Caister, Phil Kerns, 7 participants

Virtual January 27, 2022

Ideas of iPad or mobile units to assist people with technology

Rural community health workers

Transportation United Way of Southeast MI (Detroit area) have a partnership with Lyft to offer 1-2 pantry rides/month (AAA, Taxis)

Pre-paid account

Public needs volunteer sign up for a "ride board"

Local universities (students) delta, SVSU, CMU

Present: Jessica Sargent, Shannon Benjamin (211)

Maple Grove January 31, 2022

So thankful for the wellness grant and Kraig's classes, want to see more exercise related programs, not a lot of options in their area.

Suggested a digital sign out front so people knew the center was there.

Asked about calling it a "senior center". Could there be something else we could call it like community center to draw in younger seniors?

Love the center and the staff work so hard. Appreciate all of the services.

Recommended different presentations to help those with hearing impairment.

Talked about doing more with the Facebook page

Would like to see help with technology. A lot of doctors' appointments are virtual now, trying to always figure this out is hard. Having classes and assistance would be really great. The township now has wi-fi in the building.

Present: Jessica Sargent, Susan Caister, Sue Quaderer, 20 participants

Marie Davis February 2, 2022

No senior center participants due to inclement weather. Staff on site if any members of the public showed up for comment. Discussed with James to share with participants and left summary presentation in paper form to distribute.

All needs, comments and requests listed below are intended solely for the Marie Davis building at 233 Roosevelt Austin.

- Much greater concern needs to be shown for the health, safety and comfort of those guests and employees using the Marie Davis building:
- Regular and thorough cleaning of building interior - once a month and even once a week is not enough
- Regular maintenance of existing utility units - specifically air filters on ac units
- Regular review and maintenance of all building needs - interior & exterior - parking lot, heating system, floor and door upgrades
- Bike stands for those that use that form of transportation
- Deliberate and obvious effort to make bus service available for those that need transportation
- Safer entry doors and upgraded surveillance system with views of blind areas
- Removal of unsightly and unsafe exterior structures - greenhouse entry can be sealed and the enclosure remove replaced inexpensively with topsoil & plants
- Deliberate effort to provide information and communication of COA services to those needing them
- In general, the Commission on Aging has many needs. However, for many years the very real needs of property and services at Marie Davis have been ignored while new equipment, new furnishings and decorative improvements have been made to Eleanor Frank. Both buildings receive their support from the same sources.
- Some of the above items can be accomplished immediately with very little effort or expense. Others require greater funding from sources such as the recent ARPA requests. In either instance, the needs of Marie Davis should be given primary and earliest consideration. It is time that the Commission on Aging shows support to the community that Marie Davis serves by putting time, energy & financial resources into it.

Eleanor Frank February 7, 2022

Have salad bar

More entertainment, pay for entertainment (cover charge at door)

Better food

Bring the movies back

Would like COA to support them more with special events/parties and buying “extras” for the center.

Present: Jessica Sargent, Susan Caister, Augustine Martinez, Maria Sanchez, 30 participants

Hemlock February 9, 2022

Could we partner with the Richland Park department to have events and activities at the park in the summer (picnic)

Transportation is important

Physical exercise classes

Better vegetables

Parking lot can be slippery in winter (not paved)

Sprucing the current space up or using another space at the Richland Township office.

More advertising

Present: Jessica Sargent, Susan Caister, Shirley Dunbar, Terry Crevia, 15 participants

Virtual February 9, 2022

Challenge finding staffing at STARS also, had to raise pay, provide incentives.

Advertising: STARS indicated most success through radio ads (KISS 107, WSGW, ART LEWIS) but also had success with Facebook and tv campaign.

Spoke about possibly pursuing more \$ for subsidized transportation options.

Veterans' millage levy through BOC for \$ for transportation

Food desert on east side (not a lot of options for folks to obtain fresh foods/groceries).

Some community events held grocery cart giveaway.

Rides to wellness offers opportunities for nursing homes and other organizations to work with STARS to provide transportation for their clients for \$15 each way. Must be in the city.

Seniors access to healthy food, can only carry so much when using public transportation, is transportation to grocery stores a barrier?

Possibly collaboration with Region VII for a pilot friendly reassurance call system (look at concentrated area in city to make a 2–3-minute call to check on people.

Region VII seeing record number of waiver clients (in home care is always a high need).

Q box delivery has ended.

Present: Jessica Sargent, Jamie Forbes (STARS), Vera Haller, Bob Brown (Region VII)

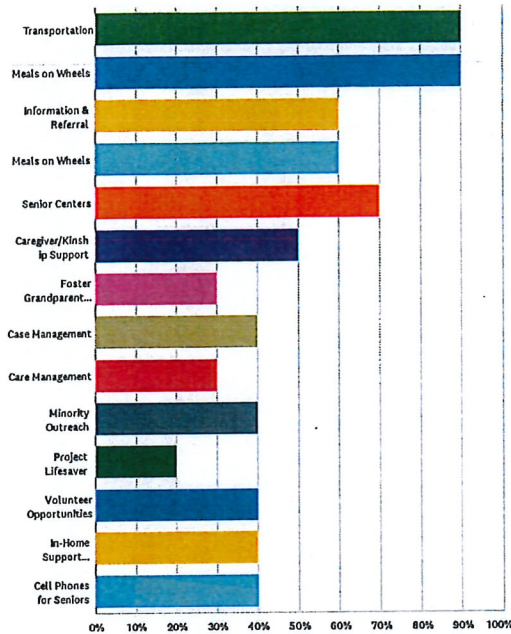
ATTACHMENT

D

Survey Monkey Partner Survey:

Q1 Please check programs/services you are aware of offered by our agency.

Answered: 10 Skipped: 0



***Survey Monkey responses from survey distributed to local churches, municipalities, non-profit and partner organizations, board of commissioners and COA board.

Saginaw County Commission on Aging

ANSWER CHOICES	RESPONSES	
Transportation	90.00%	9
Meals on Wheels	90.00%	9
Information & Referral	60.00%	6
Meals on Wheels	60.00%	6
Senior Centers	70.00%	7
Caregiver/Kinship Support	50.00%	5
Foster Grandparent Program	30.00%	3
Case Management	40.00%	4
Care Management	30.00%	3
Minority Outreach	40.00%	4
Project Lifesaver	20.00%	2
Volunteer Opportunities	40.00%	4
In-Home Support Services	40.00%	4
Cell Phones for Seniors	40.00%	4
Total Respondents: 10		

Comments:

I work here

211

Community Leader Awareness and Collaboration

Word of Mouth (x2)

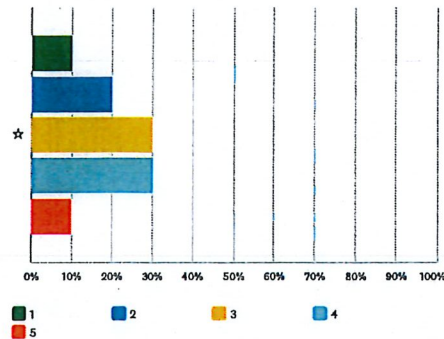
I worked at COA in the past

Through my church and prior knowledge when i was actively employed

Friends

Q2 How would you rate Saginaw County as a place for people to live as they age?

Answered: 10 Skipped: 0



	1	2	3	4	5	TOTAL	WEIGHTED AVERAGE
★	10.00%	20.00%	30.00%	30.00%	10.00%	10	3.10
	1	2	3	3	1		

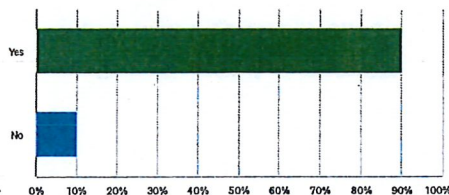
Comments:

- The city is not the safest for older people.
- Resources for basic needs are lacking, especially housing and shelter.
- It seems the needs can outweigh what is available.
- Scale, pace, services.
The services they need are available and easily accessible.
- The general community environment is not truly sensitive to needs of the older population.
- Its hard to find activities for the elderly that are accessible.
- Saginaw County is smaller community that allows for closer ties and working together if all pursue the same or similar goals. Just the right size in my opinion.
- Not enough programs or places to go in Saginaw for the elderly.

3 / 7

Q3 Are there unmet needs in the community for older adults (60+) that you or your organization can identify?

Answered: 10 Skipped: 0



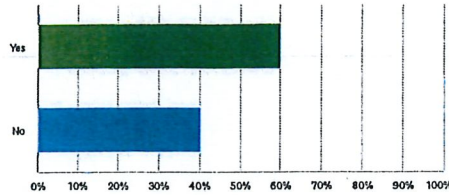
ANSWER CHOICES	RESPONSES	
Yes	90.00%	9
No	10.00%	1
TOTAL		10

Comments:

- Yes, transportation.
- Housing, utility and transportation.
- Tie together multiple services in convenient ways/venues for seniors.
- Additional transportation to medical appointments, liaisons for medical appointments.
- From digital access to lifestyle accoutrements, the needs of seniors is subordinate to the boomer, genX, and millennial populations.
- Yes, housing, helping seniors fix their homes repairs.

Q4 Do you think access/use of technology has negatively impacted older adults during the pandemic?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	60.00%	6
No	40.00%	4
TOTAL		10

Comments:

Missing out on a lot of things.

Online-only forms are detrimental to seniors with physical or cognitive disabilities and resources communication between servicer and client.

Not all have it, know how, or want to.

I think those who embrace technology they grew and depended on it more while those with prior technology gaps have already coped/adapted to less technology/connectiveness...

I believe it has helped them to become more adaptable to the world in the way it communicates and operates. I think seniors should have some level of understanding and use of technology.

Most of the senior population that is not academically advances does not have digital experiences or access. This has been seriously compromised even more because of the lack of social interaction with younger generations.

Those without access are unable to connect with others.

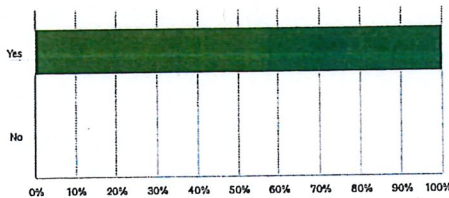
Technology has allowed older adults to stay connected to the community in many ways; virtual church services; access to devices through grants and volunteers to help maneuver the device. Some are reluctant to use the devices but being persistent rather than overbearing has proven to be positive in my opinion.

Need help to understand technology/ Give them computers and lessons to improve skills.

5 / 7

Q5 Do you think transportation is a barrier for older adults in Saginaw County?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	10
No	0.00%	0
TOTAL		10

Comments:

More need than available.

Bus lines are limited, medical transportation is limited and/or cost prohibitive, and gas money is an unmet need in Saginaw County.

Limitations on public routes. Limited resources with private/agency providers.

Yes; STARS cannot service everyone, there are gaps in service with Samaritas not being operable.

When directing someone to an event out of their town, they explain how hard it is to get to the location.

Many older adults depend on other to transport them to their designations. If this service isnt available to them many go without the service (s) they may need.

Some elderly people who live in high rises and apartments need handouts and directions.

Q6 If you could provide one suggestion to our agency to better serve residents, what would it be?

Answered: 9 Skipped: 1

Comments:

Increase volunteer members.

Increase staffing in homemaker/personal care services.

At the capacity in which you can serve.

Progress from one-stop equals one-service, to one-stop equals several services. Create efficiencies and communities for seniors.

I think the County Commission on Aging is doing a great job. I believe more work could be done in preparing seniors for technology gaps; this will help them become more adaptable to the ever-changing world. Also, more programs and services that provide therapy and pass-times that provide wellness.

Consider the potential of multiple locations for seniors to gather, receive services and information. Many of the seniors above 70 will not venture to request services, so there is a need for outreach to that demographic.

Connect with public spaces to provide services to rural communities (i.e. libraries).

Listen attentively to what they have to say and show that you really care by including them in dialogues.

Visit at least 4 sites a week (one in the morning and one in the afternoon) so its only 2 days a week out doing field work in the spring and summer months. Ask them what are their needs. By fall you have a plan to assist the elderly better.