Detroit Area Agency on Aging

Inclusive Health Care Partners-in-Action





Final Report

November 2025







INTRODUCTION

In 2003, Detroit faced a sobering reality: the loss of nearly a quarter of its older adult population over a decade. Why were so many seniors dying prematurely? The Detroit Area Agency on Aging (DAAA) asked that question—and the answers, revealed in three groundbreaking studies entitled, **Dying Before Their Time** initiated 19 years ago sparked a valiant movement that continues today.

Partnering with Wayne State University's School of Community Medicine, the reports uncovered a disturbing truth: older adults in the Detroit area were dying at far higher rates than expected when compared to older adults in the remainder of the State. For every 100 middle-aged adults expected to die, 122 were lost many never making it to age 60 years old. This trend continued when the study was updated in 2012 and 2020, though with some slight improvements in longevity prior to the Covid-19 public health emergency.

Long-standing systemic inequalities and health disparities have been leaving too many Detroiters with a deteriorating social and health service system, food insecurity, poor living conditions, inadequate access to care, and higher rates of chronic illness.

Determined to take action after the release of *Dying Before Their Time III Report*, DAAA secured an 18-month Healthy Aging grant from the Michigan Health Endowment Fund in 2021 for the planning phase and a second grant in 2022 to implement the Community Action Plan. The goal of the Community Action Plan was to implement strategies to better coordinate and integrate the Social Determinants of Health to address premature death and improve the quality of care.

DAAA worked collaboratively with Michigan Public Health Institute (MPHI) and AARP Michigan to establish the Inclusive Health Care Taskforce which was organized into five committees, each representing one of the Social Determinants of Health: Health Care, Community & Social Context, Education, Neighborhoods & Built Environment, and Economics & Retirement with technology acting as a throughline across all areas. The Taskforce brought together public and private partners, community stakeholders, and older adults themselves to build solutions.

Ironically, the ambitious work of the Taskforce began under unprecedented circumstances. The Taskforce was formed right at the height of the Covid-19 pandemic, when a lot of unknowns came into play and the world went virtual. Planning sessions and meetings all had to be held virtually. The need for social isolation highlighted the already stark disparities in technological access among the aging community with often life-threatening consequences.

Despite these hurdles, more than 40 representatives committed their time and expertise—proving that even in isolation, collaboration can thrive when lives are at stake. Over the last three-plus years, the Taskforce has transformed challenges into solutions to address the very issues the *Dying Before Their Time* reports uncovered—excess deaths, limited access to care and chronic illnesses in a Medically Under-Served area exacerbated by the Covid-19 pandemic. Older Detroiters age 65-plus represented 20% of Covid-19 cases and accounted for 80% of the deaths. Key deliverables resulting from the Taskforce's implementation work are highlighted below:

Health Care: To reduce excess deaths and improve the quality of care, the Health Care Subcommittee and partners created an Al-powered online training program consisting of six modules for direct care workers complete with technology training aids and 5Ms Bill of Rights to ensure older adults receive care that respects their mobility, mind, medications, multi-complexity, and what matters most to them. This online training will be the first Al-scripted training on the WSU's College of Education's Health Care and Public Health Education platform for Community Health Workers and other Direct Care Workers. Two IHC Forums were held at the MSU Center on May 3, 2024, and March 6, 2025, to engage older adults, Health Departments, Community-Based Organizations, WSU, Madonna University and the University of Michigan. Then workgroups rolled up their sleeves to develop the modules complete with training, skills labs, quizzes and additional resources. The modules are programmed with Al- scripted voice-overs in sync with training materials to make the training interactive.

Education: To expand access to care, the Education Subcommittee introduced Pop-Up and On-Site Technology training at St. Patrick Senior Center, four other locations along with a Senior Savvy Tech Guide to connect seniors with technology training, affordable devices, and reliable internet service. DAAA worked with 98*Forward* to produce a three-part media series to give older and younger individuals across generations the tools and knowledge to navigate health systems and their communities more effectively. A Resource Fair was held on June 13, 2024, to engage older adults and the community stakeholders to update them on the IHC initiative and share information about community resources. This effort help to formulate the contents of these two deliverables along with Education Subcommittee discussions.

Social and Community Context: To combat chronic illness and its roots in inequality, the Social and Community Context team and partners worked with PICF, Inc. to initiate development of CareLinkMI, a mobile app for older adults and caregivers offering community resources, a Calendar of Events, and a peer-to-peer chat to keep them informed, connected and less isolated. Three weeks of focus groups were held with older adults, caregivers, and service providers to specifically garner their input on the mobile app design.

Neighborhood and Built Environment: The Neighborhood and Built Environment team created a Regional Age-Friendly Communities Report Card Poster with nine city-specific report cards, shining a light on disparities across Detroit's neighborhoods and offering Age-Friendly Communities Advocacy Platform for 2026 – 2030 promoting safer, healthier, and more walkable communities. These report cards were created after three Age-Friendly Communities Forums and will be shared with advocates and city/county government to further develop livable communities in the City of Detroit/Highland Park, Hamtramck and Grosse Pointes/Harper Woods areas through a joint venture between DAAA, AARP Michigan and community stakeholders.

Economics and Retirement: In the realm of economics and retirement, the Taskforce created LifeGuide 360 ° Focus on Your Future, a financial planning toolkit and seminar series for all ages to empower residents to prepare for healthier, more secure futures. The training will be made available online, virtually and/or in-person. An Economics and Retirement Forum was held on August 2, 2024, to seek input from public and private partners, community stakeholders and older adults along with Committee discussions and focus groups conducted by Wayne State University Center for Social Work Research.

To produce the deliverables during the Implementation phase, DAAA and community partners convened monthly committee meetings over an 18-month period, quarterly Steering and Taskforce meetings, periodic Executive Advisory Council as well as monthly Implementation Team meetings. Seven community forums, two sets of focus group series culminating in an Inclusive Health Care Summit held on September 25, 2025, engaged over 600 individuals (duplicated count) from the community. In addition, numerous meetings were held with partners and contracted organizations to support planning, development and implementation to supplement a focus group series convened by WSU in November and December 2022 with funding from Phase I. The results of the Inclusive Health Care Taskforce demonstrate what is possible when a group of older adults, organizations and community stakeholders confront long-standing heath disparities and challenges with innovation, conviction, and collaboration.

Inclusive Health Care-Phase II Timeline: (December 1, 2022-September 30, 2025)

The implementation of Phase II of the Inclusive Health Care Taskforce's Partners-in-Action initiative was implemented from December 1, 2022, through November 31, 2025 inclusive of a seven-month extension. DAAA was unable to secure contractors for the mobile app and retirement planning toolkit during its Inclusive Health Care Call for Proposals. The LifeGuide 360° Toolkit was prepared by DAAA in collaboration with MPHI while the online training was developed in collaboration with Littles Financial Group, LLC.DAAA contracted with 98Forward and St. Patrick Senior Center for work on the Senior-Directed Media Program and Technology Training. Internally, DAAA engaged team members from every department within its organization to assist with program implementation under the leadership of the Executive Office and Planning and Program Development Department.

Business Tactics Implementation	2021	2022	2023	2024	2025
Phase I Funding Provided via Health Endowment Fund	Х				
IHC Taskforce Engagement	Х	×	Х	X	X
Community Action Plan Developed	Х				
Focus Group Series – WSU Center for Social Work Research	Х	Х			
Phase II Funding Provided via Health Endowment Fund					
Phase II Launch and Kick Off		X	Х		
IHC Subcommittees Prioritize Implementation Strategies			Х		
IHC Subcommittees, Steering Committees and/or Taskforce Meetings Held	Х	Х	х	х	Х
IHC Call for Proposal / Request for Quotes			Х		
IHC Health Care Forums – Direct Care Worker Training				х	x
IHC Age Friendly Communities Forums – Report Cards				х	Х
IHC Resource Fair				Х	
IHC Economics and Retirement Forum				Х	

IHC Workgroup Meetings -Steering Committees, Partners			х	x
Pop-Up and Onsite Technology Training (Five Locations)			x	x
Senior-Directed Media Program Development			х	Х
Age-Friendly Communities Report Cards – Regional/Cities		х	х	х
Savvy Senior Tech Guide Development			х	х
LifeGuide 360° Toolkit and Training Mod	ules		х	Х
CareLink MI Focus Groups, Prototype, Survey, Outreach			х	х
Direct Care Worker Curriculum, Bill of Rights, Al Scripting		x	x	х
IHC Summit Planning and Implementation				Х
IHC Evaluation and Final Report / Sustainability Plan		х	х	х

Sustainability

To sustain the programs and services after implementation, the following sustainability strategies are planned:

Health Care: Six Direct Care Worker 5Ms and Technology modules are being placed on the WSU Healthcare and Public Health Education online platform (formerly Community Health Worker Academy). At this time, DAAA and WSU projects that Direct Care Workers can take individual modules for \$15 or all 5Ms for \$75 with the 30-minute technology provided for free. Badges and Certificate of Completion(s) are available. Organizations who are unable to pay these fees can access the training from the DAAA's Inclusive Health Care Webpage; however, certificates and badges will not be available. DAAA will encourage non and for-profit agencies to pay for the training of the Direct Care Workers and will seek additional funding to subsidize the training through IMPART Alliance in Michigan and other sources.

Sustainability Tactics:

- Organizations can also download the curriculum from the DAAA Website to provide in person to their teams or even provide with CEUs.
- DAAA will be offering a Train-the-Trainer Training session for those who want to be trained to provide the 5Ms training, complete with the modules and Facilitator Guide.
- DAAA plans to approach the Michigan Health Endowment Fund, IMPART Alliance, MI Community Health Workers Association, foundations, home and community-based organizations and other colleges and universities to sponsor the online training for their employees.
- The 5Ms Bill of Rights magnets and handouts will be disseminated to participants or downloaded at www.detroitseniorsolution.org

Education: During the implementation phase, DAAA contracted with St. Patrick Senior Center to make technology training available to older adults at the Community Wellness Center and four other pop up locations. SPSC hired six Senior Technology Navigators who were trained to provide training and technical assistance and also provided training through several tech partners thanks to funding from Michigan Health Endowment Fund, Thome and Xfinity. One-hundred and forty-seven older adults of 700 were trained with IHC funding.

Sustainability Tactics:

- Pop-Up and Onsite Technology training will continue to be supported by DAAA under the Social Determinants of Health Coordination funding with Older Americans Act monies in addition to Thome and Xfinity.
- DAAA is recruiting additional Tech Navigators in collaboration with St. Patrick SeniorCenter through its "Join the Inclusive Health Care Movement Campaign" launched at the Inclusive Health Care Summit. Several individuals expressed interest through our QR Code Registration form.
- The Senior-Directed Media Program three-part video series will be offered on DAAA's YouTube channel and posted on Social Media. Likes will be tracked.
- Senior Savvy TechGuides are available in printed form and on the DAAA Website at www.detroitseniorsolutions.org and Partner Websites. Electronic copies will be periodically updated.

Social & Community Context: CareLinkMI mobileapp will be finalized through PICF, Inc. and will be supported through sponsorship fees charged to organizations hosted in the community resources feature of the application. The organizations beinghosted under the first phase will not be charged.

Sustainability Tactics:

• Pioneer organizations will be hosted on the Mobile App for free; however, organizations who want to be hosted on the application later will be charged an annual fee.

Economics & Retirement: LifeGuide 360° Toolkitsand Training Modules have been developed and dissemination has been initiated. The LifeGuide 360Boot Camp (Introductory) Training module is Al-Scripted and will be available on the WSU PublicHealth and Health Care Online Platform for free. The training and interactive toolkit will be availableonthe DAAA Website's Inclusive Health Care Page. Select training modules on subsets of the toolkithave also been created for use by trained aging and financial advisors who will offer the trainingsemi-annually or quarterly.

Sustainability Tactics:

• LifeGuide 360 ° Toolkits have been printed and an interactive pdf has been placed on the www.detroitseniorsolutions.org/inclusive-health-care/ Webpage.

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- One version of the LifeGuide360 module will be made available on the WSU Health Care and Public Health Education online platform/catalog for Direct Care Workers, students or other registered users at no charge.
- The LifeGuide360 ° Boot Camp training module is also on the DAAA Website for use and will also be available at select partner locations such as AARP Michigan, Operation ABLE, Elder Law of Michigan, Neighborhood Legal Services and other partner sites.
- Teams of aging professionals / financial advisors are being recruited as volunteers for Train-the-Trainer training so the LifeGuide 360° training can be offered in-person and virtually in Quarterly webinars/seminar series. DAAA will also be approaching Detroit Public Schools and their partners to offer the training via their Parent University.
- DAAA is also exploring finding sponsors who will support the printing costs and charging readers a fee that will be used for future printing depending on the demand.

Neighborhood & Built Environment: A Regionaland nine city specific report cards with an Advocacy Platform was produced by the InclusiveHealth Care Taskforce to promote livable communities for all ages to address social and environmental determinants of health.

Sustainability Tactics:

- Regional Age-Friendly Report Card was printed and nine-city-specific report cards are posted on the www.detroitseniorsolution.org/inclusive-health-care/ web page for downloading.
- DAAA and AARP Michigan are recruiting Livable Communities Advocates to engage their cities to seek designation of their communities as anAARP Livable Community.

Key Outcomes & Accomplishments

Over the course of the last four years, DAAA and its partners have been able to accomplish the following outcomes with additional work planned for the future:

- Engaged over 40 organizations and 630 individuals (duplicated count) in the Inclusive Health Care initiative across meetings, 7 forums, focus groups, partnerships and participants
- Developed six Al-scripted Direct Care Worker 5Ms / Technology Training modules on the Wayne State University (WSU) College of Education Online Public Health Education platform. These are the first modules to be Al-scripted on the platform. Developed 5Ms Bill of Rights – Patient (Magnet) and Direct Care Worker document. Five Ms-specific Bill of Rights were also incorporated into the 5Ms training.

- Created first known Age-Friendly Communities Report Card in the country Regional and Nine City-Specific Versions with Advocacy Platform and summary of Community Voices from the Age-Friendly Communities Forums.
- LifeGuide 360 Focus on Your Future Toolkit and Training Module to encourage financial and life planning early through retirement years.
- Produced Senior-Directed Media Program, a three-part video series for Social Media.
- Pop-Up and On-Site Technology Training 147 older adults provided with 433 units of service among 700 older adults trained in partnership with St. Patrick Senior Center, Xfinity and Thome.
- Created Senior Savvy TechGuide to connect older adults to internet, training and low-cost/free devices.
- Built CareLinkMI Mobile App prototype for beta testing after sufficient service providers and vendors are posted. Mobile app to feature community resources, Calendar of Events and Peerto-Peer Chat.
- Produced IHC Summit Summary / Recap Videos to continue to promote engagement in the Join Inclusive Health Care Movement Campaign.
- Created tools to build and continue engagement of partners, constituents and community stakeholders in the short and long term.
- Developed an actionable Sustainability Plan to maintain each of the key programs and services.
- Evaluated the Program to share lessons learned and best practices.

Evaluation Results & Lessons Learned

The planning and implementation of the Inclusive Health Care initiative over two phases enabled partners to engage community stakeholders in the development of the Community Action Plan without the limitation of placing guard rails on community ideas while providing focused time on implementation after prioritizing strategies that could make the largest impact.

Convening meetings with the five Committees, the Steering Committee and Taskforce kept community partners and stakeholders engaged; however, pivoting to community forums with focused work on the deliverables proved to be effective in finalizing the deliverables during the implementation phase. This was accomplished through educating attendees through presentations and panel discussions followed by brainstorming to solicit their input versus multiple meetings over months.

Phase two of the initiative enabled community partners to review the Community Action Plan, prioritize what was realistic to pursue and to engage the community in participating in the development of project deliverables with sustainability in mind. Facilitated engagement of key partners through an effective Executive Advisory Council and Implementation Team model helped keep the project focused and on schedule.

Solicitation of vendors through a Call for Proposal, Request for Quote and networking proved to be challenges to vet contractors for the financial planning tool and mobile app.

Evaluation Methodology

To evaluate the Inclusive Health Care Partners-in-Action Initiative, DAAA utilized the RE-AIM Approach to assess the project's ability to **reach** the targeted population it pursued; ability to **effectively** implement the planned projects using the methodologies planned; capacity to drive **adoption** of the project with institutional and community support needed; whether it was able to **implement** planned programs and protocols; and if the program design strategies are capable of **maintaining** and sustaining services long term. The RE-AIM approach examines the following questions:

- Reach Did DAAA and partners reach the proportion of the targeted population that we wanted to engage during the grant period?
- **Effectiveness** Was the program deliverables designed effectively to meet the expected outcomes?
- Adoption Was DAAA and partners able to develop institutional and community support to deliver the interventions?
- **Implementation** Are the deliverables designed to be delivered to the target population properly?
- **Maintenance** Was the IHC Taskforce able to incorporate the interventions that can be maintain/sustained long term?

REACH

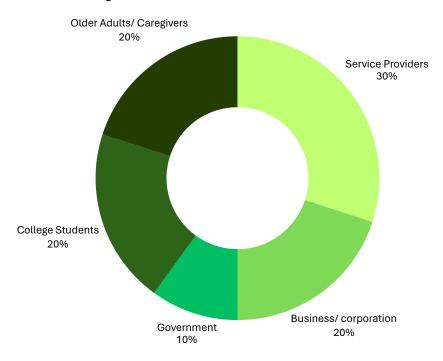
The goal of the establishment of the Inclusive Health Care Taskforce was to bring together both public and private partners to develop and implement a community action plan to improve the quality of care and reduce health disparities across the life span to better coordinate and integrate the social and environmental determinants of health.

To gauge our reach and partner engagement, DAAA analyzed meeting/event engagement data and disseminated an Inclusive Health Care PartnerSurveyin October 2025 to solicit information from community partners. In reviewing key meetingsandevents data, DAAA found that it had engaged about 630 individuals (duplicate count) in keyeventsand activities with the majority being individuals associated with aging network, academia and the community at large with minor engagement of the private sector. It was found that aging organizations, academia engaged in addressing older adult issues and aging organizations with a vested interested, along with older adults and caregivers themselves were more interested in participating in program activities. The chart below highlights engagement through attendance data:

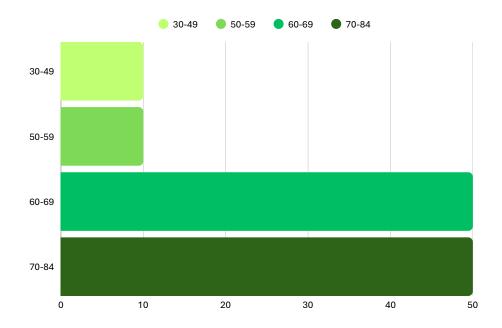
SPECIAL EVENT/MEETING	DATE	PLACE/METHODOLOGY	ATTENDANCE	
IHC Launch/Kick Off	March 2023	Powered by Zoom	22	
Inclusive Health Care Forum	5/3/2024	MSU Center	70	
IHC Resource Fair	6/13/2024	Northwest Activities Center	110	
Age-Friendly Communities Forum - Detroit	6/27/2024	Northwest Activities Center	115	
Economics & Retirement Forum	8/2/2024	MSU Center	72	
Age-Friendly Communities Forum-Grosse Pointes/Harper Woods	10/30/2024	The Helm @ The Boll Life Center	30	
Age-Friendly Communities Forum – City of Hamtramck	10/31/2024	Hamtramck Senior Plaza	20	
Inclusive Health Care Forum #2	3/6/2025	MSU Center	21	
Inclusive Health Care Summit	9/25/2025	Fellowship Chapel	170	

Inclusive Health Care Partner Survey

Of those responding to the Partner Survey, DAAA found that 30% were service providers, 20% were from business/corporations, 10% where from government, 20% were from colleges/universities and 20% were older adults or caregivers.



All respondents were female, with 10% age 30 –49,10% 50-59, 40% age 60 – 69 years, and 40% age 70 – 84 years old. Seventy percent (70%) oftherespondents were African American/Black, 10% Caucasian, 10% Hispanic and 10% Asian.



Inclusive Health Care Partner Survey

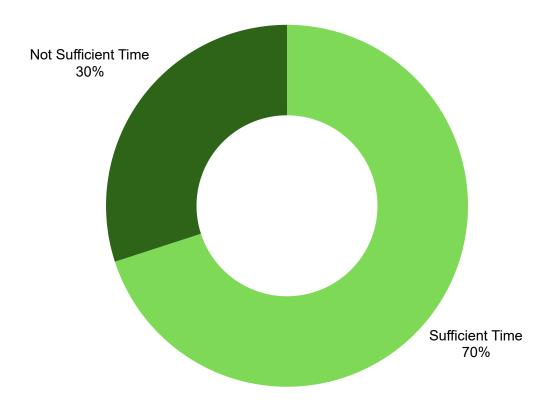
General comments shared by respondents includerecommending that DAAA continue to support and promote older adult attendance at meetings and applauding the dedication of the DAAA staff and administration for implementing the initiative. "DAAA tried their best to be inclusive, to listen to many ideas, and to implement them," commented one respondent.

Of those participating in the Partnership Survey,20% had participated in 1-2 meetings, 10% 3-4 meetings, and 60% had attended 5-6 meetings. When asked which type of events they had been engaged in during the implementation process,1-Kick Off/Launch and Summits (tie) were the most popular, followed by 2 - Health Care Forums,3–Age Friendly Community Forums, and 4 – Economics and Retirement and Resource Fair(tied).



Inclusive Health Care Partner Survey

Seventy percent (70%) of respondents felt that DAAA and its community partners had sufficient time to implement the Community Action Plan while 30% indicated that there was not sufficient time.



When asked which of the deliverables will best help the community to better coordinate the Social Determinants of Health, the following ranking in program deliverable ratings emerged:

Direct Care Worker Training/5Ms Bill of Rights- 6 votes

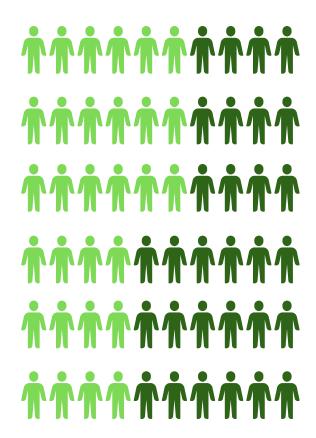
Age Friendly Communities Report Card – 6 votes

Senior-Directed Media Program – 6 votes

LifeGuide 360° Focus on Your Future / Training – 4 votes

Savvy Senior Tech Guide – 4 votes

Pop-Up Tech/Onsite Training – 4 votes



EFFECTIVENESS

Much of the work of the Inclusive Health Care Taskforce will be realized over the next several years as the deliverables developed during the implementation phase have been realized or will be finalized through FY 2026 (October 1, 2025 – September 30, 2026), but not fully implemented. The key program that was rolled out during the implementation phase was the Pop-Up and On-site Technology Training launched by St. Patrick Senior Center where 147 older adults were trained and provided with 433 units of service at five locations.

As each of the deliverables were developed, strategies were put in place to support their full implementation with key performance measures outlined to sustain them short and long term. The section below outlines the expected outcomes and how implementation is to be measure over the next three to five years.

Health Care: Age-Friendly Health Care Direct Care Worker Training was developed for professionals who provide care in the home and community setting. Key target populations for this 5Ms training include: certified nurse aides, home health aides, community health workers, supports coordinators, nutrition assessors, paid caregivers, health educators and other professionals.

The 5Ms training developed under the Age FriendlyCommunities Health Care Framework will prepare these professionals to improve the qualityofcare through online, in-person or virtual training that can be solicited by DAAA's service providers,othernon or for-profits, university and colleges, and health care systems. Promotional materials havebeenprepared to promote the program through DAAA, Wayne State University Platform and viasocialmedia. DAAA is working with WSU to solicit registrants who will be able to start obtaining traininginJanuary 2026 after a mechanism is put into place for payment, if approved.

Health Care Expected Outcome: Train 25% of the DAAA Direct Care Workers within the local Aging Services Network per year over the next five years with overall score of 80%.

Key Performance Indicators

- Increase knowledge of 5Ms principles to improve the quality of care.
- Increase in confidence level in providing direct care to older persons and adults with disabilities and their caregivers.
- Promote compliance with the 5Ms Bill of Rights among direct care workers and those receiving care.

Success Measures:

- All Direct Care Worker 5Ms training modules include a quiz to test knowledge transfer, confidence level that is assessed after the quiz and a standard satisfaction survey. Learners must receive a score of at least 80% to earn a badge and certificate.
- The 5Ms training modules include an overview of the training topic, a skills lab and at least one case study to facilitate learning.
- Training satisfaction surveys are designed to measure satisfaction with the knowledge gained, whether or not the learner is satisfied with achieving the learning objectives, their rating of the overall quality of the training, and if the training meets their expectations. In addition, they are asked if they would refer the training to a classmate or friend and any suggestions for improving the training. The training modules are designed to be provided online, virtually or in-person for additional interactive discussion.

Education: Pop-Up and On-Site Technology Training, Senior Savvy TechGuide and Senior Directed Media Program were developed to increase awareness about technology resources, technology skills development and older adult engagement in the DAAA service area.

Expected Outcomes:

- •Increase access to technology training, Internet access, and technology usage by 3% per year over the next five years.
- •Increase awareness about technology resources in DAAA service area particularly health care access by 5% over the next five years.
- •Increase engagement of older adults in health care, aging in place and financial planning by 5% through social media.

Key Performance Indicators:

- Increase use of technology of homebound and active older adults and adults with disabilities by 1-3%. by 2030.
- Increase enrollment of technology training through local programming featured in the Savyy Senior Tech Guide by 3% per year, by 2030.
- Increase likes in health care, aging in place and financial planning video through social media campaign per year, by 2030.

Success Measures:

Pop-Up Technology Training: At St. Patrick's, NorthStar classes included instruction on how to use a mouse and keyboard, setting up an email account, and accessing social media or the internet to stay connected. Learners were able to bring their own tablet or use an on-site device.

More advance training was provided on Word, Excel and PowerPoint, avoiding senior scams and using social media. All learners participating in NorthStar technology training classes are assessed and tested for knowledge transfer

Savvy Senior Tech Guide: This pullout brochuremeets all older adults where they are by including descriptions of community resources, scannableQR codes or website information. These tech guides are being disseminated via social media, websitesand drop off to senior locations or through outreach events. Information on health and social activities as well as employment/IT related training was also included in the guide.

Senior-Directed Media Program: DAAA will tracklikes and hits on YouTube and Social Media for the three videos for Social Media campaign to promoteaging in place, retirement training and healthcare.

Economics and Retirement Expected Outcomes: LifeGuide 360 Focus on Your Future Toolkit and Training Series will assist individuals 18+ to better plan for life and financial planning.

Key Performance Indicators:

- Increase the number of Detroiters engaged in financial planning early by 1% per year over the next five years through dissemination of toolkit and/or training, by 2030. Provide access to
- online LifeGuide 360 Training by 1-3% per year, by 2030.

Success Measures:

- The **LifeGuide 360** ° Toolkit is available through the DAAA and partner Websites in an interactive pdf that is downloadable as well as in printed form.
- LifeGuide 360 training will be made available to students and Direct Care Workers on the WSU College of Education Health Care and Public Health online platform (formerly Community Health Worker Academy).
- Teams of aging professionals and financial advisors teams are being recruited to make the training available virtually and/or in-person on a quarterly basis.
- In addition, Operation ABLE and its affiliated Centers for Working Families will be incorporating the curriculum into their programming.
- Training rollout planned for Senior Money Smart Month April 2026 and on an annual basis.
- Plan to disseminate toolkit and training through MI Options, Detroit Public Schools Parent University, Kinship Families and Caregivers, Congregate Meals Programs, CWSCs and Long Term Care Services.

Age-Friendly Communities Report Cards

Regional Age-Friendly Communities Poster provides a score board for the DAAA region using AARP Livable Communities Rating, Technology Rating and City Likability Scores along with outlining an Advocacy Platform that resulted from discussions with older adults and community stakeholders at three Age-Friendly Communities forums. The goal of the regional and nine city-specific report cards is to use the tools to have facilitated dialog with each of the cities within the region to encourage the development of action plans that support improvements in housing, neighborhoods, transportation, environment, health, engagement, and opportunity along with technology. Advocates have signed up to work with AARP Michigan and DAAA to encourage Age-Friendly Communities.

Key Performance Indicators:

- Increase the number of cities in DAAA's service area in the AARP Livable communities network from 2 to 9, by 2030.
- Achieve 80% designation of the nine communities as AARP Livable communities.
- Improve access to affordable and accessible housing, home repair services, transportation and technology by 1-3%, by 2030.
- Increase funding for senior/caregiver services by \$5M, by 2030.

Success Measures:

- Dissemination City and County Government and DAAA / AARP Michigan and Partner Websites.
- Dissemination SEMCOG, Michigan Area Agency on Aging Conference, USAging, American Society on Aging, Advancing States, etc.
- Age Friendly Communities Ambassadors recruited at IHC Summit.

Neighborhood and Built Environment ExpectedOutcomes: Promote Age Friendly Communities to increase the number of designated AARP Livable Communities through Advocacy Campaign.

Key Performance Indicators:

- Partner with AARP Michigan, MPHI and other community stakeholders to promote the designation of AARP Livable Communities of all nine communities, by 2030.
- Advocate for additional funding for older adult, caregiver and adults with disabilities to increase funding from public and private resources \$5M, by 2030.
- Mobilize Age-Friendly/Livable Communities ambassadors to encourage cities to become Age-Friendly, by 2030.

Success Measures:

- Disseminate Age-Friendly Communities Report Cards to municipalities in DAAA's service area.
- Convene Age-Friendly Communities Forum in partnership with AARP Michigan, SEMCOG, Nine Municipalities, State of Michigan, Wayne County and policy makers to promote livable communities and action on funding for aging programs and services.
- Seek designation of 100% of cities as livable communities, by 2030.

Social & Community Context Expected Outcomes: Full implementation of CareLink MI in Metro Detroit.

Key Performance Indicators:

- Work with PICF, Inc. and other partners to implement and deploy CareLink MI, by September 30, 2026.
- Mobilize CareLinkMI Navigators to educate 10% of older adults in the DAAA service area on how to use the application, by 2030.

Success Measures:

- Full implementation of CareLink MI with functionality, accessibility, and compliance (HIPAA, ADA, cybersecurity infrastucuture in Metro Detroit with a focus on DAAA's service area. Phase I:
- Community Resource Hub (Winter 2026) Easily search and connect to vetted community resources in the 12 targeted areas. Seniors and caregivers can use keyboard searches or browse categories to find services such as transportation, food, health, home repair and more.
- Phase II: Events Calendar (Spring 2026) Stay informed on community events submitted by sponsoring organizations. Events will be vetted and, once approved, displayed in the calendar for seniors and caregivers to review and register.
- Phase III: (Summer 2026) Engage and stay connected with other registered CareLinkMI users through a secure peer-to-peer chat feature designed to reduce isolation and support social connection.

IMPLEMENTATION

During the Implementation Phase of the Inclusive Health Care Partners-in-Action Initiative, each subcommittee reviewed the identified goal, and prioritized core objectives, key results to show those objectives had been met, action steps and partners needed to get there, as well as throughline issues tied to the digital divide. The high-level results and strategies outlined in the Community Action Plan are highlighted below as they are compared to the prioritized strategies from the IHC Community Action Plan:

Inclusive Health Care Partners-in-Action Phase - Evaluation

Strategic Goals

HEALTH CARE To improve the health status of older adults through enhanced access to care and technology, and to reduce premature death and health disparities of older adults.

RESULT: Built ground-breaking, AI-scripted Direct Care Worker 5Ms and technology training that is offered online, virtually and/or in-person training to improve the quality of care and increase access to technology. Knowledge transfer of the developed curriculum is measured through quiz after the training, confidence level assessment, and a satisfaction survey.

Earning of Badges and Certificates of Completion are tracked on Wayne State University 's Health Care and Public Health Education Online training platform. This training is the first Alscripted modules to be offered at WSU and can be accessed after registration throughout the State of Michigan, nationally and internationally. Kick Off – January 2026

EDUCATION Equal accessibility, earmarked funding outlay for aging and their programs, with seniors having a voice in what's best for them. Empowerment through technology training, engagement and having voices heard.

RESULT:

Recommendations regarding sustainability funding older adult programs and services have been incorporated into the Age-Friendly Communities Report Card.

Pop-Up and Onsite Technology Training was made available through St. Patrick Senior Center and four other sites with the use of six Senior Tech Navigators. About 700 older adults have received training with resources through DAAA, Thome and Xfinity Project Up with 147 older adults receiving 433 units of serve with Michigan Health Endowment funding.

Community Partners also developed a Senior Savvy Tech Guide with information about technology training, broadband internet access and low-cost or free digital devices.

DAAA partnered with 98 Forward to develop a Senior-Directed Media Program with a three-part Video series that will be disseminated via Social Media. The series focuses on aging in place, health care and retirement planning.

ECONOMICS & RETIREMENT Everyone has adequate access to income/benefits throughout the life course to yield their financial security.

RESULT: LifeGuide 360 ° Focus on Your Future Toolkit and Training Modules were developed to increase financial literacy around finance, budgeting and life planning encourage individuals and families to plan for retirement from young adulthood through retirement.

The 80-page toolkit and online training covers health, legal issues and estate planning, family caregiving, housing, leisure activities, end of life decision-making, securing essential documents and moving from crisis-to-thriving living.

The **LifeGuide 360** ° Toolkit is available through the DAAA and partner Websites in an interactive pdf that is downloadable as well as in printed form. It will also be made available to students and Direct Care Workers in particular on the WSU College of Education Health Care and Public Health online platform (formerly Community Health Worker Academy).

Teams of aging professionals and financial advisors teams are being recruited to make the training available virtually and/or in-person on a quarterly basis. In addition, Operation ABLE and its affiliated Centers for Working Families will be incorporating the curriculum into their programming. Training rollout planned for Senior Money Smart Month – April 2026. Plan to disseminated through Detroit Public Schools Parent University – presenter at IHC Taskforce Meeting.

NEIGHBORHOOD & BUILT ENVIRONMENT Engage all generations, including private and public sectors of the community, in creating a place to age safely and successfully.

RESULT: Developed Regional Age-Friendly Communities Report Card and Nine City-Specific Report Cards and Advocacy Platform to create more livable, walkable and safe communities with adequate housing, transportation, and access to technology.

Dissemination – City and County Government and DAAA / AARP Michigan and Partner Websites. Dissemination – SEMCOG, Michigan Area Agency on Aging Conference, USAging, American Society on Aging, Advancing States, etc. Age Friendly Communities Ambassadors recruited at IHC Summit.

SOCIAL & COMMUNITY CONTEXT Better coordination of resources among supportive service providers.

RESULT: Social and Context Committee and DAAA worked with PICF, Inc. on the development of CareLinkMI, a mobile app for older adults and caregivers.

This mobile app will feature searchable community resources, a Calendar of Events and a Peer-to-Peer Chat. In addition, CareLinkMI Navigators are being recruited to equip the targeted populations with knowledge about how to use this technology in addition to the execution of a CareLinkMI Social Media Campaign. Mobile app training is being shared through St. Patrick Senior Center Senior Tech Navigators.

Outstanding Issues:

PICF and DAAA must vet vendors and providers for the following services to build out the mobile app: (1) Transportation/Ride Share, (2) Housing/Senior Shared Housing, (3) Health and Wellness, (4) Rx/Prescription Delivery, (5) Food Pantries/Food Delivery, (6) Home Care/Caregiver Support, (7), Eye Exams/Eye Glasses, (8) Dentist/Dental Care, (9) Medical Doctor/Physician Services/Clinics, (10) Home Improvement/Lawn Care, (11) Activities/Classes and (12) Events/Community Engagement.

DIRECT STRATEGIES TO COMBAT THE DIGITAL DIVIDE Draw out from each Social Determinant of Health a plan from which to overcome barriers through the use of technology while simultaneously overcoming the digital divide.

RESULT: Each subcommittee used technology to implement their assigned deliverable. Assess the status of technology in each municipality. Provided technology training and public awareness about technology resources for older adults.

MAINTENANCE & SUSTAINABILITY

One of the most important things that the Inclusive Health Care Taskforce focused on was developing strategies that can be sustained to maximize community impact. One key strategy discussed was securing Michigan Lottery Funding for older adult services in DAAA's service area along with other public and private support. This recommendation was incorporated into the Regional Age Friendly Communities Advocacy platform for further action. Other strategies consisted of embedding sustainability through increased sponsorships, fee structures and community volunteerism.

Conclusion

The implementation of the Inclusive Health Care Taskforce's Partners-in-Action initiative during Phase II was successful in developing the deliverables that were outlined and prioritized in the Inclusive Health Care Community Action Plan. During the implementation phase, The Taskforce's subcommittee reviewed the strategies and prioritized what they thought could be sustainable. DAAA and its partners were able to engage the community in better integrating and coordinating the Social Determinants of Health through strategically focusing on ways to improve the quality of care, using technology, engagement of community stakeholders around age-friendly health care and communities frameworks as well as to promote financial and life planning down stream to have greater impact longer term. The taskforce strived to use innovative strategies that can provide the ground work for sustaining programs through new and existing platforms, partners who are forward-thinking and through future advocacy discussions.

DAAA plans to incorporate the sustainability of the Inclusive Health Care Taskforce's work into its fiveyear strategic plan to sustain the programs that have been developed. It is also planning to disseminate lessons learned at the national, state and local levels through conferences, convenings, social media and other methods. A number of individuals have expressed interest in being trained to be further engaged in the Join the Inclusive Health Care Movement!

Key Lessons Learned

- Community stakeholders can develop creative solutions in times of crisis as partners came together during the Covid-19 public health emergency.
- Effective partner and community stakeholder engagement can be achieved virtually, through focused half-day events and ongoing meetings.
- Technology can be an effective method to address better coordination and integration of the social determinants of health. This includes connecting older adults, caregivers, professionals and community residents to training and health care resources.
- Al technology can add value to training curriculum to make it interactive and effective.
- Older adults and caregivers want to be engaged and involved in shaping the future of their communities.

Recommendations for the Future

- 1.Encourage all nine cities in the DAAA service area to aspire to join the AARP Livable Communities Network to support healthy, walkable, safe and vibrant communities for all ages.
- 2. Promote the maintenance and development of accessible and affordable housing as well as senior home repair services to support aging in place with independence and dignity, regardless of age.
- 3. Strengthen private and public paratransit services for older residents and individuals living with disabilities to make them accessible, affordable, efficient and safe with federal, state, local and private resources in partnership with the Regional Transportation Authority, DDOT, SMART, Uber, Lyft and Transportation Advocates.
- 4. Expand access to high-speed and affordable Internet, practical technology training and digital/assistive devices for older adults and under-served populations.
- 5. Promote the coordination of high-quality healthcare through highly trained and supported Direct Care Workers, Community Health Workers and other Health Care Professionals in home, community and clinical settings while arming seniors with knowledge about their health care rights and responsibilities.
- 6. Support the engagement of people of all ages in civic, social and volunteer opportunities that foster community vitality and connectivity to create friends and reduce social isolation.
- 7. Promote access to additional funding for new, expanded or enhanced programs and services for older residents through revenues generated from the Michigan Lottery, Casinos and other public and private resources.

Appendix: Links to Inclusive Healthcare Deliverables

Links to the deliverables have been uploaded to the Michigan Health Endowment Portal and videos can be found on the DAAA Inclusive Health Care Taskforce Webpage.

Health Care

Direct Care Worker 5Ms Training Curriculum – Six Modules

- What Matters
- Mentation
- Mobility
- Medications
- Multi-Complexity
- Technology

5Ms Bill of Rights – OlderAdults (Simplified Version)

5Ms Bill of Rights – Direct Care Workers (Technical Version)

Neighborhood & Built Environment

Age-Friendly Communities Report Cards (Regional)

Age-Friendly Communities – City-Specific Versions

- · City of Detroit
- · City of Grosse Pointe
- City of Grosse Pointe Farms
- City of Grosse Pointe Park
- City of Grosse Pointe Shores
- City of Grosse Pointe Woods
- City of Harper Woods
- City of Hamtramck
- City of Highland Park

Education

Senior-Directed Media Program – 3 Part Video Series

- Aging In Place
- · Health Care
- Retirement Planning

Savvy Seniors Tech Guide

Pop-Up and On-site Technology Training Video / Assessment Results

Appendix: Links to Inclusive Healthcare Deliverables

Economics & Retirement Planning

LifeGuide 360 ° Focus on Your Future Toolkit

LifeGuide 360 ° Focus on Your Future Training Boot Camp

Social & Community Context

CareLinkMI Mobile App for Seniors and Caregivers Kicker Card (Feedback)

CareLinkMI Animated Video

Caregiver Focus Groups – Summary /Vendor Application

Inclusive Health Care Showcase

Inclusive Health Care Video

Inclusive Health Care Summit Recap