



Innovations in Aging Well

Transforming Systems of Care Through Collaboration

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Agenda

- 1 INTRODUCTIONS
- 2 SETTING THE STAGE FOR INNOVATION
- 3 APPROACHES TO SYSTEM TRANSFORMATION
- 4 SCENARIO EXERCISE
- 5 CLOSE OUT

ENTERPRISE COMMUNITY PARTNERS

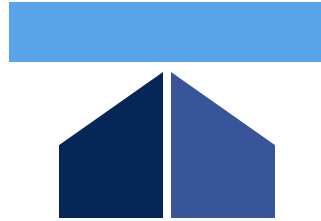
What We Do

We focus on the greatest need – the massive shortage of affordable rental homes – to achieve three goals:



Increase Housing Supply

Preserve and produce good homes that people can afford



Advance Racial Equity

After decades of systematic racism in housing



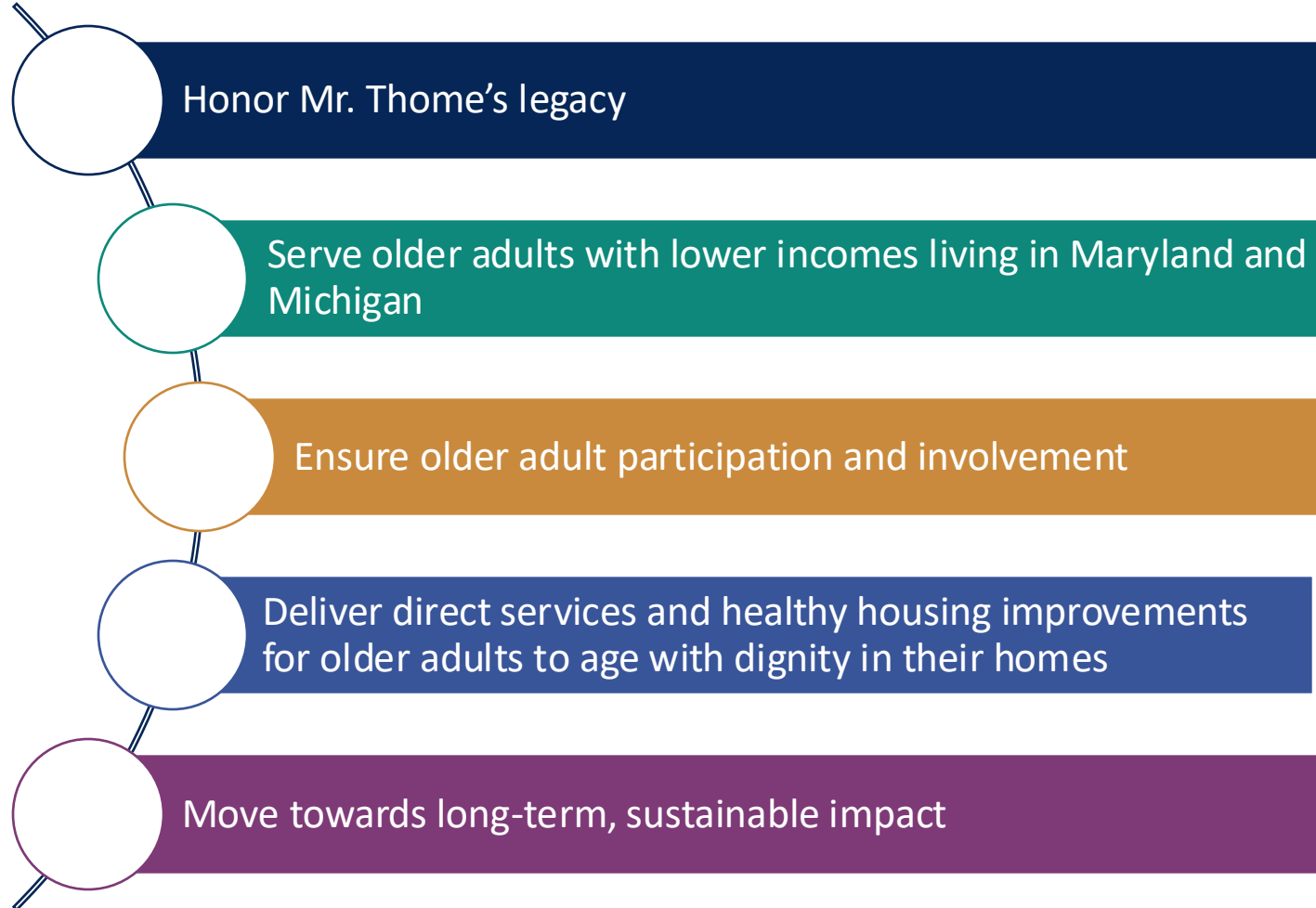
Build Resilience & Upward Mobility

Support residents and strengthen communities to be resilient to the unpredictable

**THOME AGING WELL
PROGRAM**

Funded by the **Edward N. and Della L. Thome Memorial Foundation**, Bank of America trustee, the Aging Well program is conducting multiple grant phases to both scale efforts with proven results and foster innovative approaches to the structural barriers that hinder the ability of older adults to age well while continuing to live in their homes in Michigan and Maryland for years to come.

Guiding Principles





**Thome Aging
Well Program**



Thome Aging Well Program

Impact Thus Far

The Thome Aging Well Program strives to improve the health and well-being of low-income older adults in Michigan and Maryland through scaling evidence-based programs and innovations. In the first three years, the Aging Well Program has:

- Awarded over \$9.5M in grants to support organizations in scaling existing and impactful programs to support older adults through service delivery and housing repair programs
- Awarded close to \$10M in grants to support innovations to transform existing systems of care, especially in ways that create more equitable outcomes and are sustainable, feasible, and replicable
- Served over 11,000 older adults
- Supported and connected over 55 organizations in their work to serve older adults
- Implemented a trust-based philanthropy and healing-centered approach

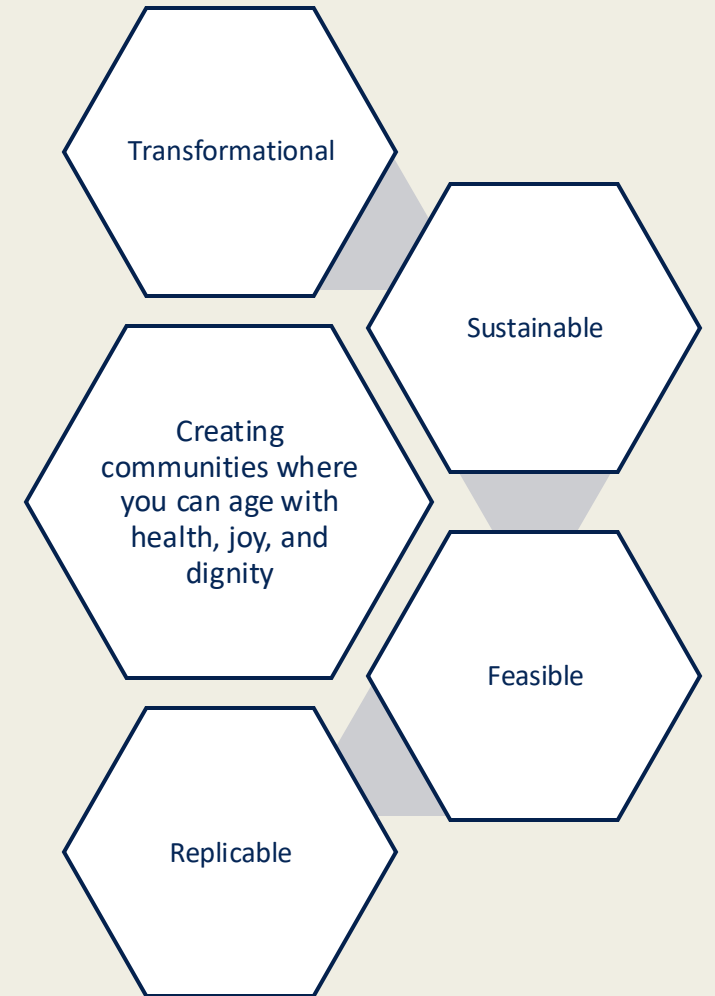
The Growing Challenge

- Older adults are one of the fastest-growing age groups in the US.
- Today, one in six Americans is aged 65 years or older, with that number expected to reach 78.3 million people by 2040.
- Existing systems of care are already overwhelmed, and ill-equipped to cope with this shift.
- **Innovation is needed to transform systems and foster resilient solutions for current and future generations.**



Aging Well **Innovation Grants**

- Purpose of these grants are to support innovative solutions that transform systems of care, enabling older adults to age with health, joy, and dignity in community
- Funding was open to nonprofit organizations, housing providers, health organizations, and community-based groups in Michigan and Maryland
- Over \$9 million was awarded across 17 organizations reimagining the way we care for older adults in Michigan and Maryland
- **Collaboration and coordination emerged as key drivers of innovation and transformation.**



**SENIOR REGIONAL
COLLABORATIVE**



Kristie King
Executive Director
Southeast Michigan Senior Regional Collaborative
April 27, 2026

“None of us is as smart as all of us.”

Ken Blanchard

The Power of Collaboration



IMPORTANCE OF A COLLABORATIVE COMMUNITY




- Empowerment
- Diversity of Thought
- The Expert
- Community Voice
- Learning & Education

Community Care Hubs:

Improving health through efficient coordination of services and supports




Connect With The SRC!

 www.semisrc.org

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TRUENORTH
COMMUNITY SERVICES

TrueNorth
community services



ENGAGE!



What Matters To You?

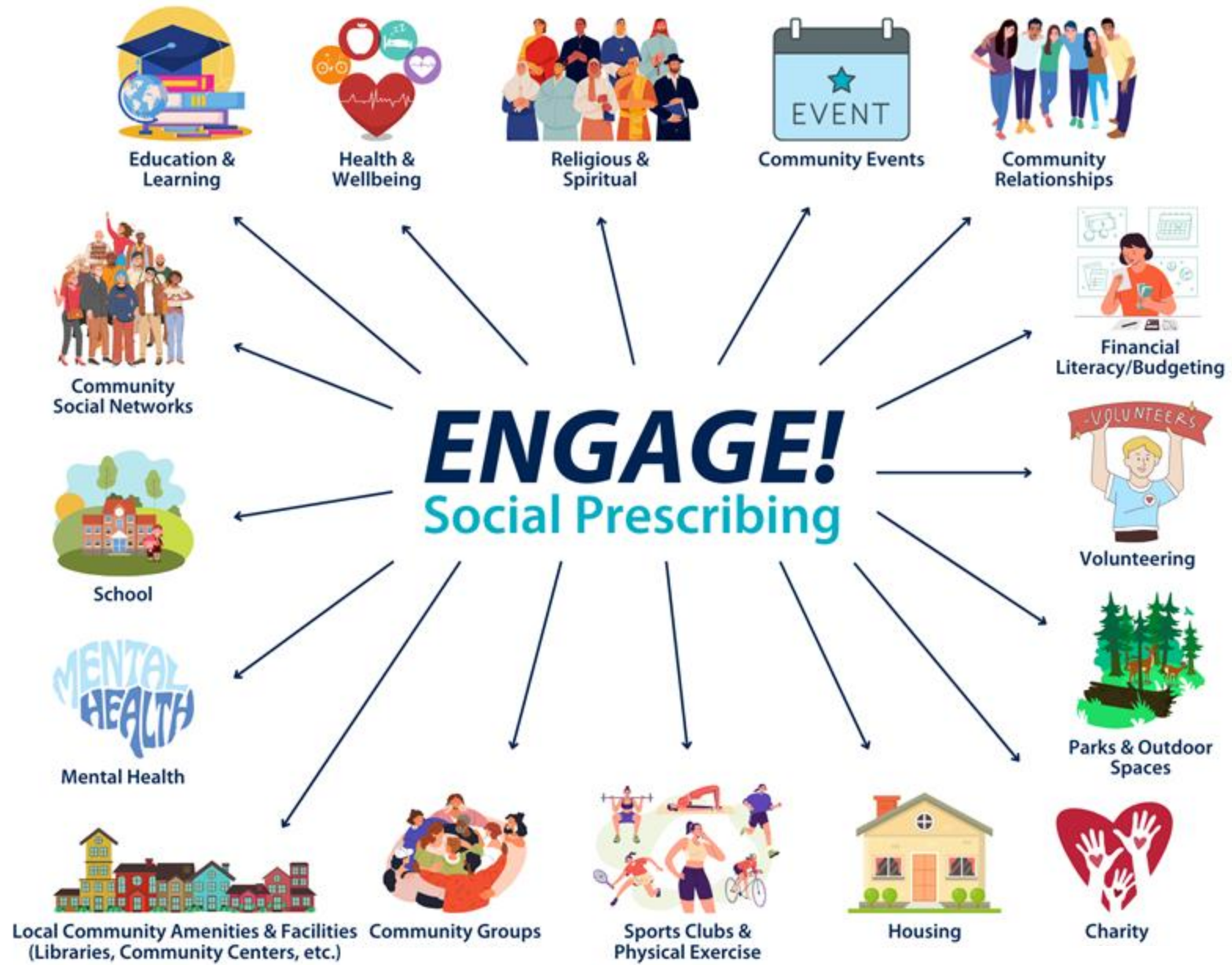
Are you 55+ and looking for ways to stay connected, be active and fulfilled?

Connecting what matters!

The Why - Facts:

By 2034, the number of adults 65 and older is projected to surpass the number of children under 18 for the first time in the United States history

(Source: U.S. Census Bureau, 2018)



WHAT MATTERS TO YOU?



CALHOUN COUNTY SENIOR SERVICES

An illustration of a meal on a green background. In the top left, there are green leafy vegetables. In the top right, a hand holds a knife over a bowl of green soup with a yellow spoon. In the center, a white plate contains a salad with sliced cucumbers, tomatoes, onions, and hard-boiled eggs, next to a bowl of yellow soup. In the bottom left, a hand holds a white fork. In the bottom right, a hand holds a white fork over a plate of food including broccoli, sliced tomatoes, and a round bread-like item. The text 'Healthy Aging Calhoun' is centered in white, with a white wavy line above it and a white brushstroke line below it.

Healthy Aging Calhoun

Calhoun County, MI

The Story

Barriers

- Transportation limitations
- Mobility challenges
- Rising food costs
- Social isolation
- Other social determinant of health needs

Many resources exist—but are:

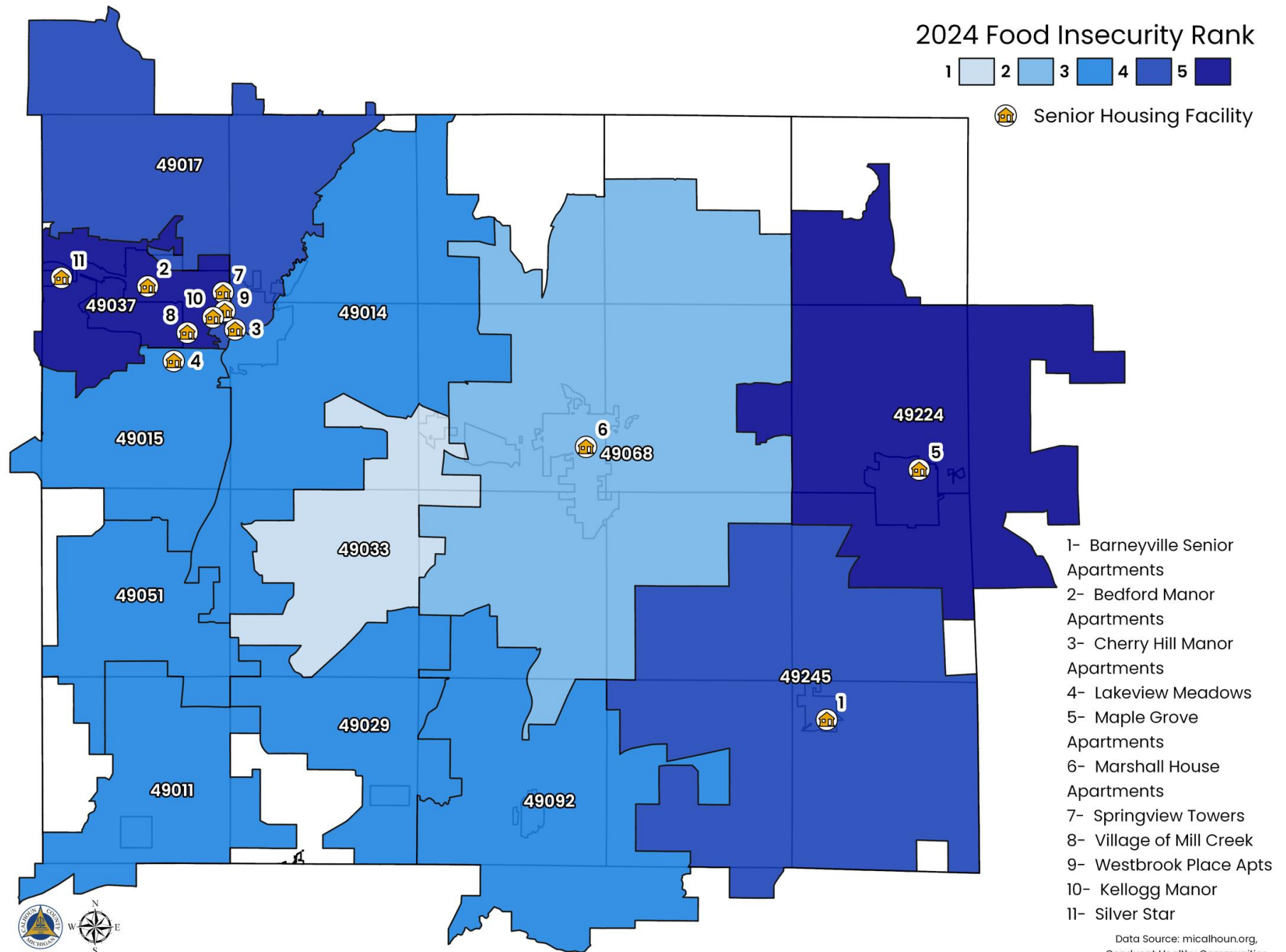
- Hard to access
- Not well-connected
- Not always known

System Gaps

- Services often operate in silos
- Limited coordination between organizations
- Communication gaps across providers

Impact on Older Adults

- Missed opportunities for support
- Increased risk of food insecurity
- Difficulty navigating available services





Strengthening and Aligning Partners to Function as A Coordinated Food Access System.

- **Calhoun County Senior Services**
- **CareWell Services**
- **Community Action**
- **Milestone Senior Services**
- **South Michigan Food Bank**
- Senior Housing Sites
- Townships
- Community Health Workers (CHWs)
- Healthcare Systems
- Food Distribution Partners
- The Coordinating Council
- Academic Organizations

Delivering consistent, low-barrier food distribution directly where need exists.

Delivery Models

- Sprout Distributions
- South Michigan Food Bank On-Site Pantries

Priority Communities

- Rural communities
- Low-income senior housing residents

Access Strategies

- Bringing food to trusted community sites
- Reducing transportation barriers
- Dignity-centered distribution practices
- Using food access as a point of connection to services

Connecting older adults to resources, knowledge, and support systems that increase stability beyond food access.

Current Focus

- Community Health Worker (CHW) integration at food distribution sites
- On-site resource navigation and benefits assistance
- Warm referral pathways to health, housing, and social services
- Cross-agency coordination to reduce duplication

Capacity-Building & Future Expansion

- Training materials and shared tools
- Learning collaboratives
- Mini-grant opportunities
- Cross-sector conversations and summits



Network



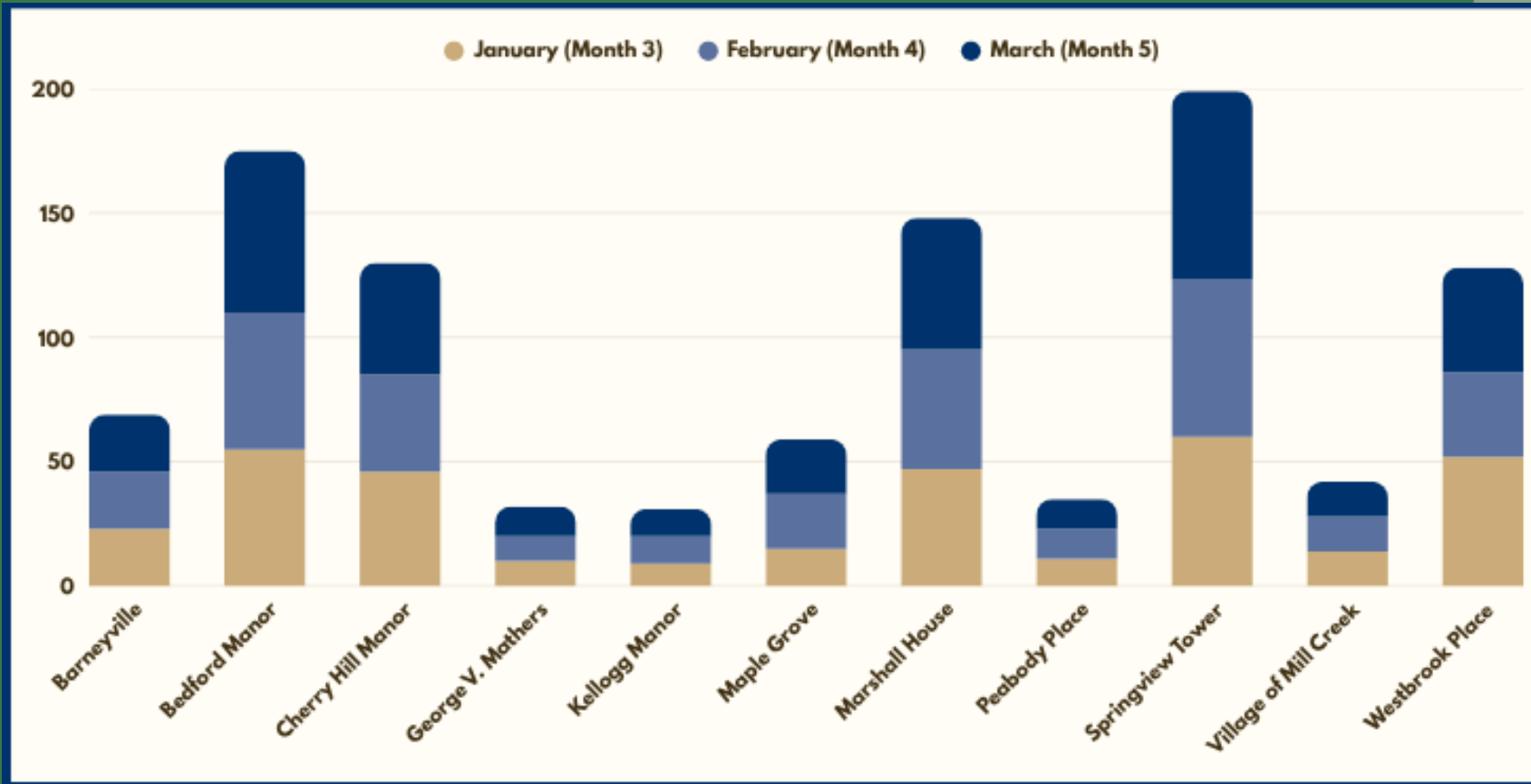
Access



Empowerment



The Impact



- 1,600+ older adults served (since Nov. 2025)
- Active in 11 senior housing complexes

Two Distribution Models:

Pop-Up Distributions

- Held in community rooms
- Residents choose their own produce

Door-to-Door Distributions

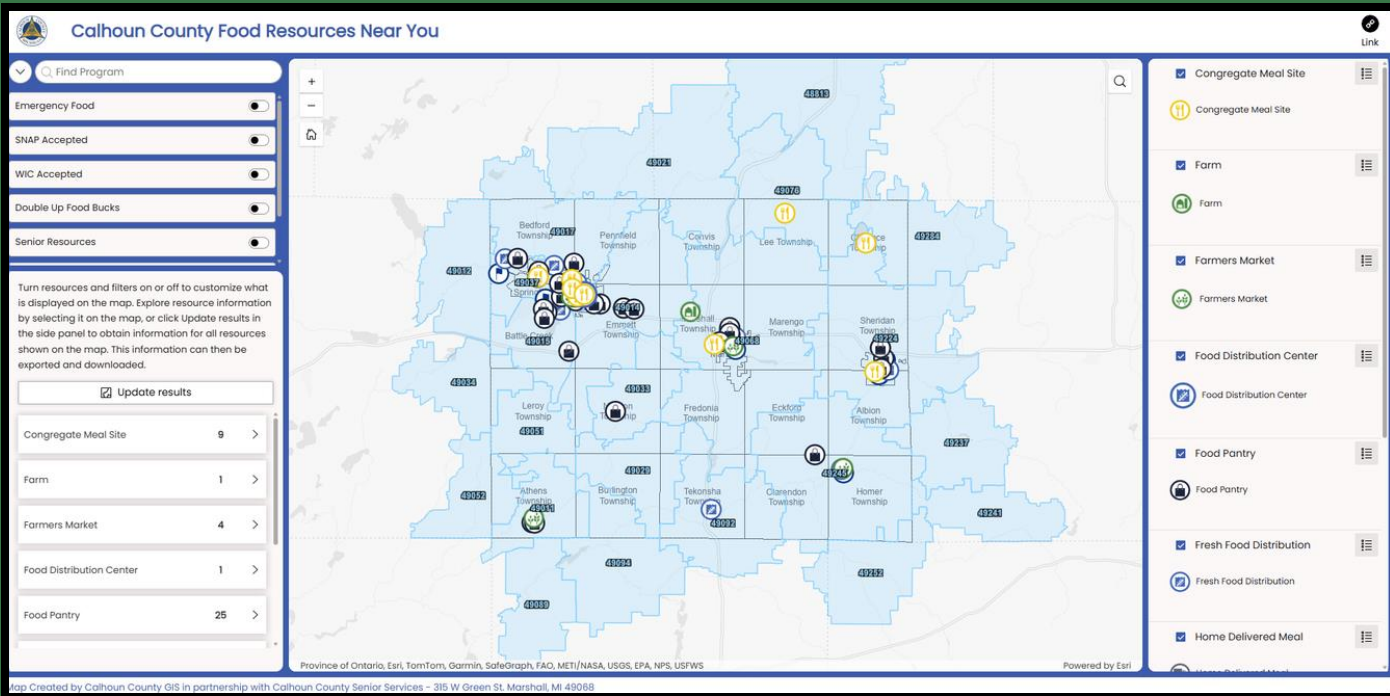
- Prepacked boxes delivered to residents
- Ideal for smaller or less mobile communities

Beyond Food Distributions:

- Relationship building with residents
- Increased awareness of services
- On-site presence → **trust**
- Establishing mini pantries → **sustainability**



Next Steps



Community Health Workers at Distributions:

- Benefits navigation
- Healthcare connections
- Resource Support

Nutrition Education:

- Recipe cards
- Simple guides (“nutrition nudges”)
- Cooking videos & demos

Interactive Food Access Map

- County-wide resource hub
- Expanding beyond food (transportation, health, etc.)
- Partnership with The Coordinating Council

Shift in Strategy

- **Original:** centralized online hub – inspiration from the Tri-State Learning Collaborative on Aging
- **Reality** → outgrew that model

Current Solution

- Bimonthly newsletters to network
- Interactive map developed at its own large-scale tool



ASIAN-INSPIRED TUNA AND CUCUMBER SALAD

Ingredients:

- 2 medium cucumbers, sliced into thin half-moon shapes
- 2 tablespoons sugar
- 4 tablespoons rice vinegar or white vinegar
- 4 tablespoons chopped white or yellow onion, minced
- 2 cans no-salt-added tuna in water, drained
- 1 tablespoon low-sodium soy sauce
- 2 tablespoons sesame seeds or other chopped nuts (cashews, almonds, etc.)

YIELD: 2 SERVINGS
PREP TIME: 30 MINUTES

SERVING SIZE: 2 AND 1/2 CUPS SALAD
CHILL TIME: 30 MINUTES

THE DIABETES PLATE METHOD

1 Non-Starchy Vegetables

2 Protein

3 Carbohydrate Foods

Eat your food in the order of 1-2-3 to help lower blood sugar:
1. Vegetables first – take a few bites to start. 2. Protein next – a few bites help to slow digestion. 3. Carbohydrate last – this helps reduce blood sugar spikes.

Q&A

SCENARIO EXERCISE

Before We Begin

At your table, you'll meet someone who reminds you why this work matters.

You will be handed a scenario.

Read it. Discuss it.

We'll come back to it.

Your Table's Discussion

01

What unmet needs might this individual have?

02

What are the barriers keeping them from connection?

03

What resources can be aligned to facilitate connection?

SCENARIO A

Meet Dorothy, 79

Dorothy farmed this land for 52 years alongside her husband Earl, who passed away 18 months ago. Her children live in Grand Rapids and Traverse City. She drives herself to the grocery store on Tuesdays — the one day each week she speaks to another person face to face.

She tells her daughter on the phone that she is "just fine."



Rural Widow

1 human
conversation
per week

TABLE DISCUSSION → What would connection look like for Dorothy? What would she need to say yes?

SCENARIO B

Meet Gerald, 68

Gerald retired from the paper mill three years ago. He thought retirement would feel like a reward. Instead, it feels like Tuesday. His identity was his work. His coworkers were his friends. Now he watches a lot of television and avoids calling his doctor about the knee that's been hurting for six months.

He thinks programs "for seniors" are not for people like him.



Retired Worker

Lost identity
& community
overnight

TABLE DISCUSSION → How do you reach someone like Gerald — who doesn't see himself in the program?

SCENARIO C

Meet Marlene, 83

Marlene has four grandchildren she has never met in person — they live in Texas and she has no car. She moved to Newaygo County 45 years ago and has outlived most of her friends. Her home healthcare aide comes twice a week and is the person Marlene looks forward to most.

She has a lifetime of stories. She has no one to tell them to.



Stories Unshared

Outlived her
circle. No
transportation.

TABLE DISCUSSION → Marlene has so much to give. What does she need to feel like she still belongs?

Thank you!

