

**SAMPLE LETTER OF SUPPORT
(Place on Your Agency Stationary)**

July 1, 2010

Paul Bridgewater, President & CEO
Detroit Area Agency on Aging
1333 Brewery Park Boulevard, Suite 200
Detroit, MI 48207-4544

Dear Mr. Bridgewater:

_____ supports the Detroit Area Agency on Aging (DAAA) partnership with the Disability Network – Wayne County to establish an Aging and Disability Resource Center (ADRC) for Long Term Care in Region 1-A that builds on lessons learned from the implementation of the Detroit-Wayne County Long Term Care Connection. The new ADRC being established will enable collaborating partners to improve access to long term care and community resources for older persons, adults with disabilities and family caregivers. Our organization supports the establishment of an ADRC designed to implement a unified approach that allows a network of local partners to help consumers to make informed, long term care decisions that are based upon their individual preferences through a centralized model with Options Counseling satellites. In addition, we support the expanding of access to public and private benefits to ADRC consumers through the DAAA's National Council on Aging Economic Security Service Center initiative.

As a community partner in the targeted service area, our organization will provide support to the proposed ADRC as follows:

- Provide input on the ADRC Readiness Review and/or Business Plan Development process, as needed;
- Refer older persons and adults with disabilities to the ADRC for information and assistance, long term care options counseling and other services;
- Supports benefits screening through DAAA's Economic Security Service Center initiative targeted for individuals who meet age, residency and income requirements;
- Support long term care training and/or public education in long term care;
- Promote expansion in the availability of resources that support long term care services and supports in the community;
- Provide services to ADRC consumers eligible for services through my organization in alignment with our agency's mission;
- Provide options counseling and supports coordination, as needed; and
- Serve on ADRC workgroups or committees.

_____ looks forward to working with the DAAA and other collaborative partners to make the ADRC and expanded economic security and benefits counseling a reality. Attached is the ADRC Partnership Form with the contact information for our organization's primary and secondary representatives.

Sincerely,

Executive Director or President/CEO

Attachment

**Mail updated Letter of Support and ADRC Partnership Form to the
Detroit Area Agency on Aging by July 30, 2010**

Aging & Disability Resource Center Partnership Form

Primary Representative
Name:
Position/Title:
Organization/Affiliation:
Address:
City, State, Zip Code:
Phone:
Fax:
Email:
Secondary Representative
Name:
Position/Title:
Organization/Affiliation:
Address:
City, State, Zip Code:
Phone:
Fax:
Email:

Instructions: Please send ADRC Letter of Support with Aging and Disability Resource Center Partnership Form by July 30, 2010 to the attention of:

Anne Holmes Davis, Senior Director of Planning and Community Access
Detroit Area Agency on Aging
1333 Brewery Park Boulevard, Suite 200
Detroit, MI 48207-4544
Telephone: 313.446.4444, ext. 5803
Fax: 313.446.4445