

Aging & Disability Resource Center Advisory Committee Minutes of Meeting

Tuesday, August 6, 2013

Call to Order

The meeting was called to order at 1:00 p.m.

Introduce New Committee Recruit & Roll Call

Present: Carol Battenberg, Dan Krause, Jim Mode, Georganne Mortensen, Earlene Ronk, Darlene Schaefer, Connie Stengel and Ellen Haines.

Also Present: Sharon Olson, Denise Grossman, Dominc Wondolkowski, Karen Tyne, Nancy Toshner and Sara Zweig, staff.

Olson introduced Ellen Haines, new committee recruit. Mode made a motion to forward the name of Haines to the Human Services Board for appointment. The motion was seconded by Krause and passed unanimously.

<u>Certification of Compliance with Open Meetings Law</u> Olson certified compliance.

Review Agenda

The agenda was reviewed.

Election of Chairperson, Vice Chair and Secretary

Mode made a motion to elect Ronk to fill Chair vacancy and to elect Mortensen as Secretary, seconded by Schaefer and passed unanimously.

Public Comment

None

Approval of 7/2/13 Minutes

A motion to approve the 07/2/13 minutes was made by Mode and seconded by Battenberg. The motion passed unanimously.

Communications

None

ADRC Report

Olson reported on the ADRC Open House that was held on July 22nd; only a few residents (9 total) attended and met with staff. ADRC Specialists are having more success with marketing and outreach by attending the various Farmer's Markets being held in various municipalities' through-out the county. She provided updates about the new managed care organization operating in Jefferson County which began on August 1. She also provided an update on the Bethesda Lutheran Communities ICF-MR closing process; staff have been busy working with the residents and guardians to provide options and enrollment counseling.

Olson also reported that the ADRC is involved with the Jefferson County Care Transitions Coalition. The Centers for Medicare and Medicaid have been tracking 30 day re-admission rates for Medicare beneficiaries for some time. On a national average 19.6% of Medicare beneficiaries are readmitted to the hospital within 30 days of discharge at a cost of \$26 billion dollars. The Medicare Payment Advisory Commission estimates that up to 76% of these readmissions may be preventable. At this point we are gathering statistical information on readmission rates in Jefferson County to perform a root cause analysis.

Olson shared that on Aug. 20 from 1:00 p.m.-4:30 p.m. there will be a Dementia Summit. Sue Torum and Susan Konkel have been working with the Alzheimer's Association of Southeast Wisconsin on the Dementia Summit. The program focuses on partnerships and protections for people with dementia, identifying community concerns, and how advocacy at the local level can make a difference. The discussion will look at the current gaps in services needed by people with dementia and their caregivers in our area. By the year 2025, an estimated 1 in 9 residents 65 and older in our state will be living with Alzheimer's disease. The key question, as we move forward: What can we do together to make Jefferson County truly a "Dementia Capable Community?" The summit will take place at Fort Memorial Hospital.

Elder Benefit Specialist Report

Denise Grossman, Elder Benefit Specialist from Jefferson County shared information on Food Share Outreach being done. Food Share Wisconsin was created to improve nutrition and health and can be used to purchase healthy foods such as fruits, vegetables and meat. Benefits are distributed on a debit-like card called QUEST, which is a secure and confidential way to purchase food from grocery stores and many farmers' markets. Second Harvest helps people apply for Food Share at a variety of convenient locations, such as libraries, and partnering with local ADRC's to ensure residents know about other community resources.

ADRC Staff introductions

Staff of the ADRC introduced themselves to the Advisory Committee Members. ADRC Staff asked if committee members would be willing to try out a new marketing game called **ADRC Bingo.** It is played a little different than typical bingo, once a tile is called; staff explain their role or a program. For example, when DBS is pulled, Sandy Free the Disability Benefit Specialist explained her role and responsibilities to help consumers under the age of 60 with application and advocacy to be eligible or maintain their public benefits.

Set next meeting date and possible agenda items

The next meeting will be on September 3, 2013.

Adjourn

A motion to adjourn was made by Mode, seconded by Mortensen and passed unanimously.

Respectfully submitted,

Sharon Olson, Supervisor Aging & Disability Resource Center

JEFFERSON

County
Plan for
Older
People

2013-2015

Final

Table of Contents

- Signature Page
- Executive Summary
- SECTION 1 Organization and Structure of the Aging Unit
- SECTION 2 Context
- SECTION 3 Planning Process
- SECTION 4 Statewide Focus Areas
- SECTION 5 Local Focus Areas
- SECTION 6 Coordination Between Titles III and VI
- SECTION 7 Budgets
- Compliance with Federal and State Laws and Regulations
- Assurances
- ADRC Advisory Committee Meeting Minutes
- Human Services Board Minutes

Approval of the County Plan for Older People 2013-2015

This plan represents the intent of the county to assure that older people have the opportunity to realize their full potential and to participate in all areas of community life.

On behalf of county, we certify that these organizations have reviewed the plan, and have authorized us to submit this plan which outlines activities to be undertaken on behalf of older people during 2013-2015.

We assure that the activities identified in this plan will be carried out to the best of the ability of the county.

We verify that all information contained in this plan is correct.

Signature, and Title of the Authorized County Board Representative

Signature, and Title of the Chairperson of the Commission on Aging

Olay (2)

EXECUTIVE SUMMARY

The Aging and Disability Resources Division of Jefferson County Human Services was formally established in July 2008. The division encompasses all Older American's Act Programs and the Aging & Disability Resource Center. The structure of the division allows for the provision of comprehensive, streamlined services to our customers, and has greatly enhanced the county's ability to meet our 2013-2015 planning goals.

Who do we serve? The Aging & Disability Resources Division works with adults who have disabilities and the elders. Historically, elders have comprised the largest group of customers we serve. Persons with disabilities are the second largest group. We also work with children aged 17 years, 9 months as they transition into the adult system of care and caregivers.

Services: The Aging & Disability Resources Division provides the following services through the ADRC: information and assistance, long term care options counseling; nursing home referrals; elderly & disability benefits counseling; evidenced based prevention services; advocacy; access to publicly funded long term care programs and services; enrollment/disenrollment counseling and transitional services for students and youth. The Aging & Disability Resources Division also provides elders with nutrition services, including congregate and home delivered meals, nutrition risk assessments, education and counseling; medication management; specialized transportation; caregiver support services and adult protective services which encompass elder (60+) and adults-at-risk services.

Major Issues & Trends: This plan represents the areas that need the most attention over the next three years.

Senior Dining: The Senior Dining Program continues to see a steady decrease in participation. This decrease has been approximately 6% per year for the last five years. The reasons are as varied as our consumer meal preferences! Efforts thus far have centered on satisfying current participants so that they will spread the word about the program, outreach to a wide variety of organizations that deal with seniors in the county and via news letter articles. The list of things Nutrition Program staff have tried to encourage participation is very long.

The Department of Health Services is working to "modernize" this 40 year old program and Jefferson County intends to do the same by reaching out to new people using a variety of new tactics.

Alzheimer's Disease: The numbers of individuals living throughout the county with Alzheimer's Disease is expected to present the biggest challenges throughout the community over the course of this plan and beyond. According to the Alzheimer's Association:

- 5.4 million Americans are living with Alzheimer's disease.
- One in eight older Americans has Alzheimer's disease.
- Alzheimer's disease is the sixth-leading cause of death in the United States and the only cause of death among the top 10 in the United States that cannot be prevented, cured or even slowed.
- More than 15 million Americans provide unpaid care valued at \$210 billion for persons with Alzheimer's and other dementias.
- In 2012, payments for care are estimated to be \$200 billion in the United States.

The Helen E.F. Supreme Court ruling impacts that way in which the Human Services Department responds to families or individuals in crisis; the counties dementia concerns coalition needs to be reinvigorated. An Alzheimer's patient in crisis is no longer just a problem for the human services department. The ruling is a paradigm shift which makes responding to folks with urgent needs a community issue and the long term care community needs to be engaged in the planning process to address it.

Emergency Preparedness: With the earth already showing signs of worldwide climate change and an upsurge in the amount of extreme weather related events, the ADRC of Jefferson County is active in county-wide, regional, state, and federal effort to coordinate disaster responses so that each responder is aware of each other's role in the event of the next emergency. The ADRC has developed a web page dedicated to this topic and will increase outreach efforts throughout each year of the plan.

Elder Abuse/Neglect: Activities that focus on the prevention of abuse and exploitation of older adults is another priority issue in Jefferson County. In collaboration with *Your Friends-in-Action*, an in-service will be provided to the organizations volunteers. The mission of *Your Friends-on-Action* and services they provide are in complete alignment with the University of California, Irvine's Center of Excellence on Elder Abuse and Neglect.

We will also explore initiating a "hotline" for seniors who wish to remain anonymous to call to get information about their individual circumstances. We would anticipate that this might be of use by parents of adult children as that type of exploitation is on the rise.

Family Caregiver Support: The Caregiver Coalition that was formed in 2010 is alive and well. Throughout this plan activities will focus on increasing awareness of available resources and support systems.

Quality Improvement: The ADRC uses the NIATx Change Process to ensure quality improvement in all that we do. Some upcoming projects will include reviewing the helpfulness of the information we provide to Alzheimer's Disease or other dementia caregivers; reviewing our materials to ensure that our Hispanic

population has equal access and to expand staff knowledge on the various avenues of advocacy that are available to all ADRC customers.

Please Note: Transportation was mentioned as a high level concern during the public input process and planning to effectuate change in that area will be a focus of the S85.21 & locally developed coordination plan.

SECTION 1 – ORGANIZATION & STRUCTURE OF THE AGING UNIT

SECTION IA - OVERVIEW OF THE AGING UNIT

Vision & Mission of the Aging Unit

The Aging & Disability Resource Center's vision is to provide information and assistance to our diverse community where the elderly and people with disabilities are respected, healthy and productive. Our mission is to help people achieve their goals by providing them with comprehensive information so they can make informed decisions; and advocacy support to ensure that they remain in charge of their lives.

Address of the Aging Unit

Aging & Disability Resource Center of Jefferson County 1541 Annex Road Jefferson, WI 53549

Hours of Operation

Core Hours:

Monday-Friday 8:00 a.m. - 4:30 p.m.

Urgent/Emergency Services: Available after hours and weekends via the agency's intake unit.

Helpful Telephone Numbers and Email Addresses:

Aging & Disability Resource Center - See SECTION 1F for staff listing.

Telephone: 920-674-8734
Fax: 920-674-7603
TTD: 920-674-5011
TTY: 800-947-3529
Toll-free: 866-740-2372

Descriptive Information:

Comments or questions about this plan document should be directed to:

Susan Torum, Manager Aging & Disability Resources Division 920-674-8136 - Direct

<u>adrc@jeffersoncountywi.gov</u> <u>email</u> <u>www.jeffersoncountywi.gov</u> <u>website</u>

SECTION 1B - ORGANIZATIONAL CHART Aging & Disability Resources Division **Human Services Board Human Services Director Division Manager ADRC Advisory Committee & Nutrition Project Council ADRC Supervisor Nutrition Coordinator** Home Delivered Meal Assessor **Nutrition Site Managers** Aging & Disability Resource Transportation Coordinator Specialists Van Driver **Disability Benefit Specialist Elder Benefit Specialists** RN **Adult Protective Services** Office Paraprofessional Workers

SECTION 1C - STATUTORY REQUIREMENTS

Organization -The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
An agency of county/tribal government with the primary purpose of administering programs for older individuals of the county/tribe.	820-8
2. A unit, within a county/tribal department with the primary purpose of administering programs for older individuals of the county/tribe.	X
3. A private nonprofit corporation, as defined in s. 181.0103 (17).	
Organization of the Commission on Aging -The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
1. For an aging unit that is described in (1) or (2) above, organized as a committee of the county board of supervisors/tribal council, composed of supervisors and, advised by an advisory committee, appointed by the county board/tribal council. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.	х
2. For an aging unit that is described in (1) or (2) above, composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	
3. For an aging unit that is described in (3) above, the board of directors of the private, nonprofit corporation. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	
Full-Time Aging Director-The law requires that the aging unit have a full-time director as described below. Does the county have a full-time aging director as required by law?	Yes

Name	Age 60 and Older	Elected Official	Year First Term Began
Jim Mode, Chair	х	x	2004
Richard Jones	X	х	2007
John McKenzie	X	The strict of th	1998
Julie Merritt	IdealO and Olashi	o anoitas operations o	2011
Pam Rogers	x	X	2005
James Schultz	x	1112	2007
Augie Tietz	X	X	2009
SECTION 1-E Membership of	the ADRC Advisory	Committee	
Nama	Age 60 and	Elected	Year First
Name	Older	Official	Term Began
Nancy Haberman, Chair	Older	Official	Term Began 2008
ial Spacialist	tnevent become A lest	Official	and commen
Nancy Haberman, Chair	X	Official	2008
Nancy Haberman, Chair Carol Battenberg	X	Official	2008
Nancy Haberman, Chair Carol Battenberg Daniel Krause	X X	Official	2008 2012 2012
Nancy Haberman, Chair Carol Battenberg Daniel Krause Marian Moran	X X	Official	2008 2012 2012 2008
Nancy Haberman, Chair Carol Battenberg Daniel Krause Marian Moran Georganne Mortensen	X X X	ne Delivered V	2008 2012 2012 2008 2012
Nancy Haberman, Chair Carol Battenberg Daniel Krause Marian Moran Georganne Mortensen Jim Mode	X X X X	ne Delivered V	2008 2012 2012 2008 2012 2009

and aducation, legal information, advocacy and representation to County residents 60

SECTION 1F - STAFF OF THE AGING UNIT

Listed below are the people employed by the aging unit as the aging unit director, nutrition director, lead information and assistance specialist, benefit specialist, transportation coordinator, and caregiver coordinator. Attach additional pages as needed.

Name: Susan Torum

Job Title: Manager, Aging & Disability Resources Division

Telephone Number/email Address: 920/674-8136 <u>suet@co.jefferson.wi.us</u>

Brief Description of Duties: The purpose of this position is to plan, direct, implement, and monitor the operations of the Aging and Disability Resource Center which, encompasses all State and Federally funded Aging and Transportation programs, and to integrate ADRC and related Aging programs into other Human Services programs, services, funding sources as required based on community and consumer needs.

Name: Beth Eilenfeldt

Job Title: Nutrition Coordinator

Telephone Number/email Address: 920/674-8134 bethe@co.jefferson.wi.us

Brief Description of Duties: The purpose of this position is to serve as the lead worker in all aspects of the Senior Dining Program.

Name: Sharon Endl

Job Title: Home Delivered Meal Assessor/Prevention Specialist

Telephone Number/email Address: 920/674-8187 sharone@co.jefferson.wi.us

Brief Description of Duties: The purpose of this position is to provide nutrition education and outreach services to individual's 60+; to conduct home delivered meal assessments and implement evidenced based nutrition practices.

Name: Joy Clark, Martha Parker, Patti Hills, Linda Winterland, Donna Gnabisik

Job Title: Senior Dining Site Managers

Telephone Number/email Address: Varies by site

Brief Description of Duties. The purpose of the position is to oversee the daily operations of the Senior Dining Program and to ensure compliance with all rules and regulations.

Name: Denise Grossman

Job Title: Elder Benefit Specialist

Telephone Number/email Address: 920/674-8135 deniseg@co.jefferson.wi.us

Brief Description of Duties: The purpose of this position is to provide benefit counseling and education, legal information, advocacy and representation to County residents 60

years or older; coordinate efforts with other County, Community and governmental agencies.

Name: Doug Carson

Job Title: Elder Benefit Specialist

Telephone Number/email Address: 920/674-1945 dougc@co.jefferson.wi.us

Brief Description of Duties: The purpose of this position is to provide benefit counseling and education, legal information, advocacy and representation to County residents 60 years or older; coordinate efforts with other County, Community and governmental agencies.

Name: Jackie Cloute

Job Title: Transportation Coordinator

Telephone Number/email Address: 920/674-8104 Jackiec@co.jefferson.wi.us

Brief Description of Duties: The purpose of this position is to schedule rides for the elderly and disabled persons, agency clients and others wishing to use the County transportation services and to perform van driver duties for Jefferson County Human Services.

Name: Buddy Walton Job Title: Van Driver

Telephone Number/email Address: 920-674-8104

Brief Description of Duties: The purpose of this position is provide van transportation and hands on assistance to the elderly and/or disabled while grocery shopping, etc.

SECTION 2 - CONTEXT

Jefferson County is a rural county with 83,868 residents. It is conveniently located between two of Wisconsin's major cities, Madison and Milwaukee. 13.2% of the population is aged 65+. Between 2005 and 2030 the population of older adults (65+) is expected to increase 84.7%, as compared with the 19.3% increase in the general population. The majority of older persons live in their own homes, and according to the 2010 census, 907 men and 2,226 women aged 65+ live alone. This amounts to 28.7% of the 65+ cohort and has significantly increased from 9.6% as reported in the previous census. The Alzheimer's Association estimates that 1 out of 7, or 453 people in this category have been diagnosed with dementia. This is 14% of the total population 65+ living alone.

According to the 2012 Elder Economic Security Index which measures how much income a retired older adult requires to meet his or her basic needs, a single elder living in their own home is \$18,496 (for homeowners without a mortgage) or \$19,293 (for renters). The amounts for married couples rise to \$28,263 (for

homeowners without a mortgage) or \$29,068 (for renters). In 2011 100% of the federal poverty rate was \$10,890 for an individual and \$14,710 for a couple. According to the 2010 American Community Survey, 286 individuals were living below 100% of the federal poverty level. The elder index figures provided above are between 175-200% of the federal poverty level and the survey revealed that 27.8% of senior residing in Jefferson County are at or below 200% of the federal poverty level.

Jefferson County's share of the state's older low-income population has grown. At the time of Census 2000, the number of people age 60+ with income below 125% of poverty was 1,070. This was 1.074% of the state's total older low-income population. At the time of the American Community Survey data the DHS is using for the updated formulas (2005-2009), Jefferson's older low-income population had grown to 1,555, which was 1.292% of the state's total older low-income population. Due to this increase, which is significant when compared to other counties, Jefferson County's federal share of Older American's Act funding will increase in 2013. This funding has been stagnant for years.

As part of the planning process, ADRC staff and ADRC Advisory Committee Members had peer-to-peer and group discussions centering around two questions:

- 1. What are the three most important issues facing you or other older people in your community?
- 2. If you are on Family Care, Partnership or IRIS, what has been your experience and do you have any suggestions for ways to improve any of these programs?

Unsurprisingly, the top area of concern was economic security. The second was transportation Recurring themes revolved around the increasing costs-of-living, having enough resources to pay for services needed to remain in their own homes, the fear of losing the Homestead Tax Credit, SeniorCare and income from declining investments. People are aware of the transportation options available through Jefferson County but want a more demand response system that would be available to take them anywhere they want to go, nights and weekends. Remaining autonomous was the area of most importance.

Several constituents commented that they are heavily involved in volunteering and that they see a shrinking volunteer base, and are concerned about who will be there to help them when they are in need.

The Aging & Disability Resource Center saw the end of its waiting list for publicly funded long term care in June of 2011. As the Managed Care Organization serving Jefferson County increases its operations to meet needs, we had expected to see a proliferation in service providers; however, with increased pressures to reduce costs, other funding sources and volunteer organizations are

being asked to "share the care." This directly impacts people who are not enrolled in managed care, and those who do not have the resources to purchase care. An increase in our Title III funding will help us fill gaps.

The biggest challenge for the Aging and Disability Resource Division throughout the next three years will be responding to the immediate needs of persons with Alzheimer's disease and their caregivers. In light of the Helen E.F. Supreme Court Decision, the division will work with community partners to identify issues and look at ways to support one another when risk is high and options are limited. All stakeholders have a vested interest in the community's response to this very vulnerable population.

SECTION 3 – PLANNING PROCESS

SECTION 3-A - PLANNING PROCESS USED IN THE DEVELOPMENT OF THIS PLAN

This plan was developed in conjunction with peer-to-peer interviews, facilitated discussions at Senior Centers and/or Senior Dining programs, discussions with community providers, the ADRC Advisory Committee and Human Services Board members. The ADRC Advisory Committee took an active role in facilitating discussions about the planning process with groups that they are involved in, i.e. the Knights of Columbus, Christian Mothers Group, an RCAC and a St. Vincent DePaul Board. They have also spoken to individuals participating in the meals on wheels program and blood pressure screenings at a senior center. One member spoke with a group for parents of adult children with disabilities.

A review of Older American's Act program participation by age, gender, frailties and financial status was taken from the SAMS database to examine any trends worth noting through the planning process.

Planning began in February 2012, and as the attached meeting minutes show, discussions focused on the 2013-2015 plan each and every meeting. The draft plan was approved by the ADRC Advisory Committee on 8/7/12. Details of the planning process were shared with the Human Services Board under Division Reports on the board's monthly agenda. The board reviewed and approved the draft plan on 8/14/12.

SECTION 3-B - PUBLIC HEARINGS, COMMENTS, CHANGES

Public Hearing #1

Public Hearing #2

Tuesday, 8/28/2012

Tuesday, 8/28/2012

11:00 a.m. Jefferson Senior Center 859 Collins Road Jefferson, WI 53549

4:30 p.m. ADRC 1541 Annex Road Jefferson, WI 53549

Advanced notice of the hearings was distributed to the County Facebook page, two major newspapers, three senior centers, all congregate meal sites and two local radio stations. It was also posted on the ADRC webpage. The notice first appeared in the Daily Jefferson County Union on 8/9/12.

Advanced copies of the notice and posters were sent to GWAAR on 8/6/12. The hearing on 8/28 @ 11:00 a.m. was attended by two people who were primarily interested in learning more about services available for caregivers. They had no suggestions for changes to the plan.

STATE OF WISCONSIN
JEFFERSON COUNTY

SS

Brian V. Knox being duly sworn, deposes and says that he is the Publisher of the DAILY JEFFERSON COUNTY UNION, a public newspaper, printed at the City of Fort Atkinson, in said County, and that a notice, a printed copy of which, taken from said newspaper, is hereunto attached, was published in said newspaper on the 10th day of August, A.D. 2012.

Brian V. Knox

Subscribed and sworn to before me this 2nd october , A.D. 2012 .

_day of

Notary Public, Jefferson County, Wisconsin

My commission expires: 11-10-13

NOTARY NOTARY PUBLIC OF WISCON

Notice of Public Hearing

The Aging & Disability Resource Center (ADRC) of Jefferson County will be conducting two public hearings for the public to review the draft 2010-2012 Aging Unit Plan. The plan focuses on Emergency Preparedness, Senior Dining, Alzheimer's Disease, Family Caregiver Support, Advocacy and Abuse/Noglect of the Elderly.

Time & Place:

Tuesday, August 28, 2012 • 11:90 a.m. Jefferson Area Senior Center 869 Collins Road, Jefferson, WI 53549

Tuesday, August 28, 2012 • 4:30 p.m. Aging & Disability Resource Center 1541 Annex Road, Jefferson, Wi 53549

Those persons unable to attend the hearing who wish to submit comments in advance may do so by mailing their comments prior to the hearing to the Agling & Disability Resources Division Manager at the ADRC, 1541 Annex Road, Jefferson, WI 53549. The plan will be available for public inspection prior to the hearing at the ADRC between the hours of 8:00 a.m. – 4:30 p.m. Monday – Friday.

Persons with disabilities that require special accommodations wishing to attend the hearing should contact the person isleed above prior to September 7th. The telephone number to call is 920/674-8136. The focation of the hearings is accessible to persons with disabilities. who was the property of the persons with disabilities.

SECTION 4 - STATEWIDE FOCUS AREAS

SECTION 4-A DEVELOPMENT OF A SYSTEM OF HOME AND COMMUNITY BASED SERVICES

The ADRC of Jefferson County relies on the NIATx model of process improvement to continually review our practices in order to provide our customers with the best possible service.

Past projects have included:

- Improving the accuracy of response to requests for senior dining program services.
- Reduce customer wait time from initial call to home visit to within 14 days.
- Increasing new customers through targeted marketing.
- Increasing the customer's ability to be healthy at home.

Goal: To increase the utility of referrals for people who are calling on behalf of a family member with dementia, questionnaires will be sent within two weeks of contact to measure the extent of its usefulness on a Likert Scale. The project will test for three months.

Goal: To expand staff knowledge of the various avenues of advocacy under publicly funded long term care programs, a project will be undertaken to test staff knowledge. Four staff members will be provided a pre and post test and those with scores below 90% will retest with results at or above 90%.

Goal: To increase staff awareness in the area of cultural competence, a project will focus on how the ADRC is prepared to respond to non-English speaking customers or those identified as Latino or Hispanic origin. According to most recent Census, 6.2% of Jefferson County residents identify themselves in this category.

Please Note: It is difficult to identify outcomes and measurements in this area since we have not yet followed the NIATx process to even see if improvements needs to be made. It is also difficult to establish timelines over three years. We use the process on a continual basis and I would expect that all three of these projects could easily be completed by the end of 2013. We would identify new projects when we complete the 2014 plan amendment.

SECTION 4B - OLDER AMERICAN'S ACT PROGRAMS

Goal: To increase participation in the Senior Dining Program by 5% the first year of the plan; 7% the second year and 10% the third year.

 Program staff will reach out to senior apartment complexes to offer a "Greet & Eat!" The meal will be on us as a way of introducing people to our menu and program.

 Satellite programs will be explored to encourage congregate dining without the necessity of the person leaving home, i.e. a meal once per month in the community room of the apartment complex.

Aging & Disability Resource Specialists will be provided with gift certificates that they will be encouraged to hand out to seniors who show

an interest in attending a meal site.

4. Working under rules and regulations, we will "cater" events where we have an opportunity to reach out to more seniors.

Every staff member will be expected to have an individual goal related to promoting healthy eating and how they will reach out to people who are unaware of the program.

SECTION 4C - ALZHEIMER'S DISEASE

Goal: Conduct 15 Cognitive Screens by 12/31/2013.

- All trained Aging & Disability Resource staff and Adult Protective Services staff will routinely use the screening tool and follow protocol.
- Maintain in close contact with the county's Alzheimer's Association representative.
- Develop an outreach plan to be used when talking to the medical community.

Goal: Develop a county wide identification system for people diagnosed, who also are in some way at risk of interventions by law enforcement, to alert officers to the individual's plan by 12/31/2013.

Goal: Implement the identification system in two jurisdictions each year of the plan, i.e. Watertown & Lake Mills by 12/31/2013; Jefferson & Fort Atkinson by 12/31/2014 and Palmyra & Waterloo by 2015.

- Contact Chiefs Association, educate and ask for support. Explore replicating a system already in use in Lake Mills.
- Use Alzheimer's Family Caregiver Funding to fund education and outreach.
- Maintain in close contact with the county's Alzheimer's Association representative.

SECTION 4D - EMERGENCY PREPAREDNESS

Goal: To raise awareness about staying safe at Senior Dining Sites, Nutrition Program staff shall provide participants with information about what to do in an emergency at each of its 6 dining centers each year of the plan.

 In-services will be held on evacuating buildings, where to take shelter and sheltering in place on an annual basis.

Goal: In order to increase awareness of natural events that are prevalent in WI, the ADRC will distribute no less than one news release on a quarterly basis each year of the plan.

- Information shall be posted on the ADRC webpage and county Facebook page.
- Aging & Disability Resource Specialists will provide information to customers as part of home visits.
- Information shall be provided to newspapers, radio and cable TV.
- Information shall be mailed to home delivered meal participants.

Goal: In order to increase staff awareness regarding their responsibilities before, during or after a disaster, review & revise the agency's Continuity of Operations Plan on an annual basis. Train staffing will occur on a quarterly basis to address: flooding, winter storms, tornados, heat, etc.

SECTION 4E - EVIDENCED BASED PREVENTION PROGRAMMING

Goal: The ADRC will expand prevention programming by offering 1 evidenced based prevention program in 2 communities by 12/31/2013 and 2 evidenced based practice programs in 2 different communities by 12/31/2015.

 Staff trained in Living Well with Chronic Conditions will be responsible for scheduling no less than 2 sessions in 2 communities.

Goal: The ADRC will expand its ability to provide prevention programs by training two Aging & Disability Resource Specialists about the *Stepping On* program by 12/31/2014.

- Work with the GWAAR prevention team to identify available training.
- Develop media campaign to raise awareness about the importance of falls prevention programs.
- Offer program.

SECTION 4F - FAMILY CAREGIVER SUPPORT

In 2011, a Caregiver Coalition was developed in the County. Meetings are held quarterly and members come from various organizations including: home health, hospice, adult day care, ADRC, assisted living, support groups, Alzheimer's Association and parish nursing. Caregivers also attend regularly.

Because of connections with community partners, the coalition has identified new opportunities to help train caregivers with various tasks. St. Coletta of WI employs formal caregivers to provide community based care. Many of the sessions are relevant to family caregivers and they will be encouraged to attend. NFCSP funds will subsidize training and respite arrangements may be available on site. St. Coletta has a fleet of vans that takes people to its adult day care center. This is just one example of community organizations working together to support caregivers.

Goal: Information to caregivers about available services will be provided via local newsletter articles twice annually.

- Review materials posted on the NFCSP website.
- Review materials posted on the GWAAR website.
- Recognize National Caregiver Month.

Goal: Assistance to caregivers in gaining access to the NFCSP funded services shall be provided via a follow-up call to 20 caregivers.

- Provide caregivers with resource directory.
- Inform and discuss options, including self-directed.
- · Assist in arranging for formal services when caregiver asks.

Goal: At least one of the following activities shall occur on a monthly basis each year of the plan: counseling, support group and caregiver training.

- Support Groups are offered monthly.
- In-person consultations/counseling sessions are offered on an ongoing basis.
- 5 caregivers will accept subsidies to attend trainings sponsored by other organizations or counties; or the Caregiver Coalition offers an in-county training.

Goal: Respite care subsidies shall be available to 25 caregivers in 2013-2015.

 Additional funds may be awarded if there is need and the funds are available.

Goal: Supplemental services to compliment care shall be provided to 3 persons in 2013.

SECTION 5 – LOCAL FOCUS AREAS

Goal: Expand elder abuse prevention training by completing 1 workshop for *Your Friends-in-Action Volunteers* by 12/31/2013; 1 workshop by 12/31/2014 & 1 workshop by 12/31/2015.

- Coordinate workshop with Your Friends-in-Action Director.
- Teach workshop using *University of California, Irvine, Center of Excellence on Elder Abuse and Neglect* information.

Goal: To dedicate two hours per month to provide information and assistance to elders wishing to discuss concerns about abuse or neglect in a neutral environment where anonymity is guaranteed by 12/31/2013.

- Collaborate with APS staff to establish policy and procedures.
- Review schedules and establish consistent availability of this service.
- Provide staff with relevant materials and resources.

Goal: To educate elders about identifying risk factors related abuse/neglect, the I-team will develop a toolkit to use in conjunction with training sessions. The tool kit shall be completed by 12/31/2013. The training sessions will be scheduled in 2014 and 2015 offered twice per year.

SECTION 7 – Budgets

Attached

Compliance with Federal and State Laws and Regulations

On behalf of the county, we certify

ADRC of Jefferson County

(Give the full name of the aging unit)

has reviewed the appendix to the county plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 2013-2015. We assure that the activities identified in this plan will be carried out to the best of the ability of the county in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2013-2015.

Signature, and Title of the Chairperson of the Commission on Aging Date

Signature, and Title of the Authorized County Board Representative Da

Sequestration

The **HEAVY** impact on older people in Wisconsin

Because of sequestration — the automatic federal spending cuts enacted in 2013 — Wisconsin county and tribal aging programs will receive an across-the-board reduction in federal funding for programs that people age 60 and older depend on to maintain their health and independence.

Ending sequestration and fully funding programs that support seniors is both cost-effective AND what older people want!

Older People are at risk when Programs are at ri

Sequestration cuts mean fewer services provided by counties and tribes*

grigures exclude Dune and Willwarkee Counties)	2013	2014	2015
Meals Delivered to home	1,637,244 meals	1,473,922 meals	1,262,625 meals
In a dining center	1,294,818 meals	1,222,294 meals	1,135,998 meals
Help at Home Includes personal care, homemaker and chore help	28,549 hours	26,549 hours	23,683 hours
Programs Promoting Health Includes workshops and services that help older maintain health and wellness	20,928 sessions	17,697 sessions	13,363 sessions
Caregiver Support For respite care (i.e., someone to stay with the person needing care so the caregiver can take a break)	34,992 hours	29,301 hours	21,643 hours





Who could get hurt . . .

Meet Betty. The 80-year old widow lives alone, has limited monthly income, does not drive, and is confined to a wheelchair due to a chronic spinal condition that makes it impossible to prepare meals on her own.

Betty was referred to the Aging & Disability Resource Center by the local hospital and started receiving home-delivered meals. She says that without her daily meal she would likely be in a nursing home. For Betty, leaving her home would be devastating. It is the home she has lived in for the past 60 years. It's where she raised seven children with her husband who recently died. She didn't think she could cope with another major loss in her life.

Since starting her daily meals, she has regained some strength and has started going to church again — something she thought she would never be able to do. She still uses a wheelchair, but feels life is more manageable. Things are much brighter now.

While getting meals has been a life-saver for Betty, it has been equally important for her family, most of whom live far away. It's reassuring to know that a friendly volunteer is checking on her every day when the meal is delivered.

"Without the meals, who knows where I would be now?" says Betty. "I am so thankful to be in my home with all my wonderful memories."

^{*} Figures based on county and tribal data reporting, state-announced funding allocations, and trend analysis and forecasting.

Funding for Programs to Support Elder Population on the Rise 38% % of population in Wisconsin age 60+ Wisconsin Elders is on the Decline Total expected funds for county & tribal aging 30% programs and services: Percentage of people 24% \$20 in Wisconsin age 65+ 20% \$19.5 \$19 with a household million 17% income at or below \$18 10% \$25,000 \$17 \$17.1 million annually \$16 0% in millions 2013 2000 2010 2020 2030 2014 2015 Source: U.S. Bureau of the Census Based on state announced budget cuts and projecti

\$118

The average cost of one day in an assisted living facility**

\$248

The average cost of one day of nursing home care**

\$2,030

The average cost of one day of inpatient hospital care in Wisconsin***

** 2012 MetLife Market Survey of Nursing Home, Assisted Living, Adult Day Services, and Home Care Costs, *** Henry J. Kaiser Family Foundation

Where the heart is . . .

The services provided by county and tribal aging programs (*listed below*) are a cost-effective way to help older people stay independent at home.

\$ 8.98 The average cost of one homedelivered meal in Wisconsin.

\$33.56 The average cost of two hours of respite care in Wisconsin.

\$64.52 The average cost of two hours of help at home in Wisconsin.



Who could get hurt . . .

Edith came to the Aging & Disability
Resource Center looking for help. She
struggled with stenosis, vertigo, and
pain — had fallen many times and
feared walking without a cane — and
worried that she would soon need a
wheelchair. But her biggest worry was
that she would have to leave her home.

She learned about the ADRC's falls prevention program — Stepping On — and hoped that by taking the class, she could turn her situation around.

She did.

Today, Edith is wheelchair-free and is leading Stepping On classes as a peer leader. She says the program changed her life.

"Every morning I get up and bet on myself," says Edith. "I never give up."

Prevention programs like Stepping On offer more than just an education — they offer hope. And they're critical to keeping Edith — and others like her — safe and at home.

Don't let Sequestration hurt older people in Wisconsin

For more information, contact:

Janet Zander, Public Policy & Advocacy Coord. Greater Wisconsin Agency on Aging Resources



(608) 228-7253 janet.zander@gwaar.org