

Human Services Board Agenda - Jefferson County
Jefferson County Courthouse, 311 S Center Ave, County Board Room 205
Jefferson, WI 53549

Date: Tuesday, Aug 11, 2020 Time: 8:30 a.m.

Topic: Human Services Board Meeting

Join Zoom Meeting

<https://zoom.us/j/95399988906?pwd=UDJYSm43SytpUWNhZlFUMUHJsT29ydz09>

Meeting ID: 953 9998 8906

Passcode: 588946

+13126266799,,95399988906# US (Chicago)

Committee Members:

Jones, Dick (Chair)
Kutz, Russell (Vice Chair)
Tietz, Augie
Wineke, Michael

Crouse, Cynthia (Secretary)
Schultz, Jim
Golden, Leslie

1. Call to Order
2. Roll Call (Establish a Quorum)
3. Certification of Compliance with the Open Meetings Law
4. Approval of the August 11, 2020 Agenda
5. Public Comment
6. Approval of July 14, 2020, Board Minutes
7. Communications
8. Review of the June 2020 Financial Statement
9. Discuss and Approve July 2020 Vouchers
10. Division Updates: Child and Family Division, Behavioral Health, Administration, Economic Support, and Aging & Disability Resource Center
11. Discussion and Possible Action on New Professional Service Contracts (Foster Care and Psychiatric)
12. Discussion and Possible Action on 2021 Budget Presentation
13. Discussion and possible action on the 2021 Mobility Manager Application
14. Discussion and possible action on the 2021 5310 Vehicle Application
15. Discussion and possible action on the 2021 Aging Plan Goals for review
16. Director's Report
17. Discuss Potential Agenda Items for the September Board Meeting.
18. Adjourn

Next Scheduled Meetings:

Tuesday, September 8, 2020, at 8:30 a.m.

Tuesday, October 13, 2020, at 8:30 a.m.

A Quorum of any Jefferson County Committee, Board, Commission, or other body, including the Jefferson County Board of Supervisors, may be present at this meeting.

Special Needs Request - Individuals requiring special accommodations for attendance at the meeting should contact the County Administrator 24 hours before the meeting at 920-674-7101 so appropriate arrangements can be made.

JEFFERSON COUNTY HUMAN SERVICES
Board Minutes
July 14, 2020

Board Members Present in Person: Richard Jones and Michael Wineke

Board Members Present via Zoom: Cynthia Crouse, Russell Kutz, Augie Tietz, and Jim Schultz

Absent: Leslie Golden

Others Present: Director Kathi Cauley; Deputy Director Brent Ruehlow; Administrative Services Division Manager Brian Bellford; Economic Support Manager Jill Johnson; Aging & Disability Resource Division Manager Sharon Olson; Office Manager Kelly Witucki, County Administrator Ben Wehmeier and Board Supervisor Anita Martin.

1. CALL TO ORDER

Mr. Jones called the meeting to order at 8:30 a.m.

2. ROLL CALL/ESTABLISHMENT OF QUORUM

Golden absent/Quorum established.

3. CERTIFICATION OF COMPLIANCE WITH THE OPEN MEETINGS LAW

Ms. Cauley certified that we are in compliance.

4. REVIEW OF THE JULY 14, 2020 AGENDA

5. PUBLIC COMMENTS

No comments

6. APPROVAL OF THE JUNE 9, 2020 BOARD MINUTES

Mr. Schultz made a motion to approve the June 9, 2020 board minutes with the corrections.

Mr. Kutz seconded.

Motion passed unanimously.

7. COMMUNICATIONS

A group of members from the larger surrounding counties meets regularly with the State Secretary at the Governor's office. One of our colleagues informed Ms. Cauley that at the previous meeting they were discussing foster care and children being removed from homes and one of the judges mentioned what a great job Jefferson County is doing.

8. REVIEW OF MAY 2019 FINANCIAL STATEMENT

Mr. Bellford reviewed the May 2020 financial statement (attached) and reported that there is a projected positive year-end fund balance of \$1,199,715. This balance includes \$650,000 from our reserve carryover but excludes any prepaid adjustments. Projections this early in the year are very volatile and subject to change.

9. REVIEW AND APPROVE JUNE, 2020 VOUCHERS

Mr. Bellford reviewed the June 2020 summary sheet of vouchers totaling \$443,709.46 (attached).

Mr. Wineke made a motion to approve the June 2020 vouchers totaling \$443,709.46.

Mr. Tietz seconded.

Motion passed unanimously.

10. DIVISION UPDATES: ECONOMIC SUPPORT, ADMINISTRATION, AGING & DISABILITY RESOURCE CENTER, BEHAVIORAL HEALTH, AND CHILD & FAMILY RESOURCES

Economic Support:

Ms. Johnson reported on the following items:

- Our **Key Outcome Indicators** were as follows:

- *We have 30 days to get 100% of all applications processed. We processed 99.61% of them timely.*
- *The Consortium Call Center must answer calls timely within 98% of the time. The Call Center was at 98.86% and the state rate was at 98.84%.*
- Ready Kids this year will be working directly with the school district offices to get the necessary materials to all children in need.
- We received \$1,200 from the Emergency Food & Shelter Program that we have until next May to use for our food pantry.
- Food Share error rates for Wisconsin was 5.40% for the last fiscal year. The National rate was at 7.36% and the Southern rate was at 3.27%.
- Ms. Johnson read a letter from a resident expressing their appreciation for the additional food share they received during this pandemic.

Administration:

Mr. Belford reported on the following items:

- Billing is currently up-to-date.
- We are beginning the 2021 budget process.
- The 2019 WIMCR report needs to be certified by the end of July.
- Mary Ostrander, our Financial Intake Worker is retiring.
- Maintenance continues to perform additional cleaning duties daily.

ADRC:

Ms. Olson reported on the following items:

- **APS**
 - Kassie Kluge started June 1st as our new Adult Protective Services worker.
- **ADRC**
 - The new ADRC Key Outcome Indicator is within 10 business days from the date the customer is determined functionally and financially eligible for publicly funded long term care. ADRC staff shall provide enrollment counseling to assist the customer in the selection of a Family Care, Partnership, or IRIS program and have the enrollment or referral submitted to the designated Managed Care Organization or Iris Consultant Agency (unless the customer request a date greater than 10-business days or enrollment/referral is delayed for reasons outside the control of ADRC staff). For June, the Key Outcome Indicator was met. Eleven customers were enrolled in an LTC program per the above KOI guidelines.
 - In June, ADRC staff (6 total) documented 1,299 calls with 444 unduplicated callers in comparison to 1,096 calls in May. This increase of 203 calls from the previous month and includes 5 home visits (for special circumstances) and 3 walk-in office visits. Recognizing the vulnerability of many of our Home Delivered Meal recipients, staff provided approx. 622 wellbeing phone calls in June. The Elder Benefit Specialist Program hosted its second virtual “Welcome to Medicare” workshop on 7-13-20 from 1-3 pm. The June virtual workshop had 15 participates. ADRC staff has also distributed approx. 116 of the 201 Farmer Market vouchers provided to Jefferson County. Most Farmers’ Markets in the county (except Jefferson) are operational with restrictions due to COVID-19.
- **Senior Dining**
 - KOI met. 15 new Home Delivered Meal Consumers started in June. No one has been denied. Meals for June = 2,167 average is 99 meals per day. Caterer Cost at \$4.89/meal = \$10,596.63 contactless curbside Meals starting on July 20th at Watertown, Jefferson, Lake Mills, and Palmyra sites. Weekend home-delivered meals, delivered on Friday consisting of 2 frozen meals and cold accompaniments + 2 milk. 13 Participants signed up

- A \$500 donation for dairy for HDM participants, so K Contacted Crystal Farms Dairy Company, as the Donor was from LM. Crystal Farm wanted to donate 38 cases of cheese nibbler snacks. Now we are back to figuring out how to purchase \$500 of dairy products.
- **Transportation**
 - KOI met. 538 1- way trips completed out of 568 requested for the Driver Escort Program in June. 51 wheelchair van/5 was transported through C&W or LaVigne. 104 were canceled. For the VA van, 32 requested 1-way trips and 20 canceled – Leaving 12 trips given of the VA. Ridership for the ADRC of Jefferson County Driver / Escort Service peaked during the 1st Quarter of FY20. A new monthly ridership record was set in February 2020 with 865 one way rides provided for the month. However, due to the COVID-19 pandemic, ridership decreased dramatically (by roughly 50%) in the 2nd Quarter of FY20, but ridership has begun to increase again as clinics and other services have reopened. The ADRC's Driver/Escort Service are following the CDC COVID-19 Transportation Guidelines and the WI Covid-19 Transportation Task Force Best Practices recommendations including single rider trips, sanitizing surfaces between rides, use of hand sanitizer, physical distancing when possible, encouraging customers to wear masks, drivers required to use provided masks, and installing physical barriers where possible. ADRC's Driver/Escort Service has now installed inexpensive sneeze barriers in all their agency vehicles.
- **Dementia Care Specialist**
 - The program has extended the Monday Morning Caregiver Coffee Hour virtual meeting until the end of July due to current demand. A Virtual Powerful Tools for Caregivers class is scheduled to start August 7th thru September 11th, with Rock County. This has been pushed back a couple of times already due to COVID-19.

Behavioral Health:

Ms. Cauley reported on the following items:

- **All Key Outcome Indicators** are being met
 - Crisis contacts are up to 8216 through June, compared to 6815 in 2019.
- Emergency detentions have increased, even though our assessments have decreased, due to more serious suicide attempts. Our diversion rate is 73%.
- Early into 2021, Madison and Milwaukee will have new psychiatric hospitals.
- Ms. Cauley read an email that she received regarding the Family Centered Therapy program.
- In June we were able to negotiate a contract with the Department of Corrections to provide intensive outpatient group therapy for participants. This will be starting in July.
- Updates with Telehealth:
 - No show rate has decreased.
 - Adolescents are more engaged.

Child & Family Resources:

Mr. Ruehlow reported on the following items:

- **All Key Outcome Indicators** are being met
 - 75% of our youth that is placed outside the home are placed with a relative or lik-kin provider.
 - Our Intake Department is currently at 95% for face-to-face contacts as well as completion of our initial assessments. It is worthy of note that during COVID-19 times that they were still required to meet with families in person to assess safety. All of the precautions were used to support them in this difficult time.
- CLTS continues to work on removing children from the waitlist. At this time we are serving 225 kids with 6 kids on the waitlist, down from 120 at one time.
- Mr. Ruehlow read a complimentary letter that he received from a foster family recognizing Kayla DuBois for her hard work.

- 11. DISCUSSION AND POSSIBLE ACTION ON NEW PROFESSIONAL SERVICE CONTRACTS (Psychiatric Evaluations, CCS Regional Service Array, Child Alt Care, and Foster Care)**
Ms. Cauley reported that we have four new service providers. (attached)
Mr. Tietz made a motion to approve the contracts as listed.
Mr. Schultz seconded.
Motion passed unanimously.
- 12. DISCUSSION AND POSSIBLE ACTION ON REQUESTS FROM PUBLIC HEARING**
1. New Beginnings - \$20,000
 2. Dave Gallup Foundation - \$20,000
- The Board expressed support for these organizations. Mr. Kutz asked if the Board could get a Balance Sheet showing unreserved net assets from the Dave Gallup Foundation. Ms. Cauley agreed to follow up on that. It was ultimately decided to wait until we go over the budget to see if there will be funds to take action on the requests from New Beginnings and the Dave Gallup Foundation.
- 13. DISCUSSION AND POSSIBLE ACTION ON BONDING PROJECTS**
Mr. Weinheimer presented an update on all of the general bonding projects across Jefferson County.
Mr. Jones made a motion to approve this resolution and send it to the County Board.
Mr. Wineke seconded.
Motion passed unanimously.
- 14. DISCUSSION AND POSSIBLE ACTION ON PARENTS AS TEACHERS GRANT**
Ms. Cauley reported we received a grant for \$8,945 from the Greater Watertown Community Health Foundation to fund the purchase of the Parents as Teachers online curriculum.
Ms. Crouse made a motion to approve this resolution and send it to the County Board.
Mr. Schultz seconded.
Motion passed unanimously.
- 15. DISCUSSION ON BUSINESS PLAN GIVEN THE COVID CHANGES**
Ms. Cauley presented the business plan regarding the CoVid changes. Human Services has tried to be as adaptable as possible to the pandemic. We've increased electronic and telehealth services. The use of telehealth and technology has been critical to the Behavioral Health teams. We've expanded our cleaning throughout the buildings. The need for space and vehicles has decreased. We've worked with other County Departments to make sure staff have the necessary PPE. We build barriers and shields in the Transportation vehicles. We've expanded our meal program. Many teams have seen an increase in requests for services, including Crisis, CPS, and CLTS. We have seen more homelessness and had rental assistance costs increase.
- 16. MARSH COUNTRY HEALTH ALLIANCE UPDATE**
Ms. Cauley presented information on the Marsh County Health Alliance (MCHA). The MCHA started among several counties years ago to be able to use the nursing home that Dodge County runs. Mr. Bellford and Mr. Kutz listened to the recent MCHA meeting. Mr. Bellford explained that our assessment for 2021 is budgeted to be \$1,188. This is down significantly from prior years, because of positive financial results at MCHA. Mr. Kutz explained that the total census days at the MCHA are down because of the pandemic. This could impact future assessments.
- 17. DIRECTOR'S REPORT**
- Due to CoVid Ms. Cauley was unable to hold her yearly Listening Session but received several emails from staff.
 - For the state budget, Ms. Cauley stated they are looking into the institution rates that have increased, as it is projected the State will have an MA surplus.
 - We need to advance and incentivize Evidence-Based Practices for Behavioral Health. WCHSA is looking at some options.

- Ms. Cauley and Mr. Ruehlow are keeping a close on eye on changes in the CLTS program. Currently, DHS contracts with Compass to do assessments. DHS wants the Counties to take this function back. The dollars associated with the contract should also go back to the Counties which is not the State's plan at this point.
- Ms. Cauley is initiating a Diversity Committee at Human Services. African American staff members have experienced racism in the community.

18. ADJOURN

Mr. Wineke made a motion to adjourn the meeting.

Mr. Tietz seconded.

Motion passed unanimously.

Meeting adjourned at 10:12 a.m.

Respectfully submitted by Kelly Witucki

NEXT BOARD MEETING

Tuesday, August 11, 2020, at 8:30 a.m.

Jefferson County Courthouse County Board Room 205

311 S Center St, Jefferson, WI 53549

Financial Statement Summary

June, 2020

We are projecting a positive year-end fund balance of \$1,259,487. This balance includes \$650,000 from our reserve carryover, but excludes any prepaid adjustments. Projections this early in the year are very volatile and subject to change.

Summary of Variances:

Revenue: Overall, revenues are projected to be unfavorable by \$1,142,959.

- CCS revenues are projected to be under budget by \$959,461. We added several new CCS and FCT positions in 2020 that were anticipated to bill MA. We have had several vacant positions, so we did not have any of the revenue or expenses associated with them. Additionally, billing collections are down because of telehealth issues; however, we do expect to recover all of those funds. Finally, we anticipate less WIMCR settlement, because we raised our rates in 2019.
- MA Collections for Winnebago/Mendota hospitalizations are projected to be over budget by \$150,090. This is based on our actual collections through June. While we have collected quite a bit of revenue, our hospitalization expenses are also higher.
- Income Maintenance and W2 program revenue is projected to be under budget by \$110,931, compared to \$142,296. This is because we have not received any enhanced funding yet in 2020. That typically comes later in the year. Additionally, our RMS payment was \$41,516 this year, compared to \$195,583 last year. We budgeted for combined enhanced funding and RMS funding amount of \$100,000 for 2020. We do anticipate some additional revenue for the rest of 2021.
- CLTS revenue is projected to be \$17,233 over budget, as we continue to provide additional services. We obtained increases to our CLTS contract from DHS in March and again in June of 2020.
- ADRC revenue projections increased from last month because of additional 2019 carryover and additional CARES funding. The nutrition program has also seen a revenue increase, due to additional CARES and FFCRA funding.
- We obtained an additional \$21,593 in May from DCF for out-of-home costs incurred in 2019, and an additional \$6,125 of funding related to these costs for 2020.

Expenditures: Overall, expenses are projected to be favorable by \$2,402,445. We carried over money for several projects, positions, and trainings that we do not anticipate using this year. The favorable projection in 2020, along with comparative 2019 balances, is due to the following:

Program	2020 Projected Balance	2019 Balance
Salary and Fringe	Favorable \$947,489	Favorable \$448,570

Child Alternate Care	Favorable \$654,757	Favorable \$631,469
Hospitals & Detox	Favorable \$65,190	Favorable \$332
CLTS	Unfavorable \$52,009	Unfavorable \$486,295
Operating Costs	Favorable \$42,086	Favorable \$293,154
Operating Reserve	Favorable \$650,000	Favorable \$650,000

Major Classifications Impacting the Balance

- **Salary expenses are projected to be under budget by \$655,352:** This is because of numerous vacant or unfilled positions, most of which are in CCS and in the Management/OH teams.
- **Fringes and benefit expenses are projected to be under budget by \$292,137:** Most of this is due to health insurance, which can still be very volatile because of unfilled positions and changes in coverage. In 2019, we had \$2,292,257 in health insurance expenses. Our 2020 budget is for \$2,666,842. We are projecting \$2,522,612 in health insurance expenses right now for 2020.
- **Children Alternate Care expenses are projected to be under budget by \$557,706.**

	2020	2019
June	\$103,913	\$142,514
Monthly Average	\$135,208	\$139,810
YTD Total (through June)	\$811,246	\$838,858

- **Hospital/Detox is projected to be favorable \$178,525 (Net basis):**

	Budget	Actual	Projection
Revenue	\$356,635	\$253,362	\$506,725
Expenditures	\$1,271,224	\$603,017	\$1,206,034
Net	\$(914,589)	\$(349,655)	\$(699,309)

We ended 2019 with a net balance of \$(912,372).

- **CLTS expenses are projected to be over budget by \$52,009.** Expenses have increased, along with revenue, as we've added more staff and children to service.
- **Operating Costs are projected to be under budget by \$42,086.** This includes Employee Travel, which are projected to be under budget by \$75,861. This also includes COVID costs, which were not budgeted for.
- **Operating Reserve:** We are projecting a year-end balance of \$650,000 in the operating reserve.

BEHAVIOR HEALTH DIVISION: Projected unfavorable balance of \$358,970, because of CCS revenue.

In May of 2020, we received a Winnebago/Mendota charge of \$28,530. In June of 2020, we received a Winnebago/Mendota charge of \$32,354.

CHILDREN & FAMILY DIVISION: Projected favorable balance of \$980,224, because of reduced alternate care costs and increased CLTS revenue.

ECONOMIC SUPPORT DIVISION: Projected unfavorable balance of \$63,970, because of uncertainty related to IM enhanced funding payments.

AGING & ADRC DIVISION: Projected favorable balance of \$105,673. We have received additional CARES Act and FFCRA funding for several programs, including the ADRC, the nutrition programs, III-B (Supportive Services), and III-E (Family Caregiver). We have also received carryover funding for the ADRC.

ADMINISTRATIVE DIVISION: Projected unfavorable balance of \$53,470, because of additional COVID expenses.

OPERATING RESERVE: Projected favorable balance of \$650,000.

Statements are unaudited.

JEFFERSON COUNTY HUMAN SERVICES DEPARTMENT
STATEMENT OF REVENUES & EXPENDITURES
 Projection based on JUNE 2020 - Financial Statements

SUMMARY

	Y-T-D @ Ledgers	Adjust -ments	Y-T-D Projection	Prior Y-T-D Projection	Prorated Budget	Year End Projection	2020 Budget	Year End Variance
Federal/State Operating Revenues	5,150,750	3,136,481	8,287,232	16,644,533	8,704,656	16,266,354	17,409,313	(1,142,959)
County Funding for Operations (tax levy & transfer in)	4,616,256	0	4,616,256	9,291,262	4,683,111	9,366,221	9,366,221	(0)
Total Resources Available	9,767,007	3,136,481	12,903,488	25,935,795	13,387,767	25,632,575	26,775,534	(1,142,959)
Total Adjusted Expenditures	12,211,038	486,036	12,697,073	25,234,116	13,746,444	25,383,638	27,786,084	2,402,445
OPERATING SURPLUS (DEFICIT)	(2,444,031)	2,650,446	206,415	701,679	(358,678)	248,937	(1,010,550)	1,259,487
Balance Forward from 2019-Balance Sheet Operating Reserve	1,010,550		1,010,550	1,166,829		1,010,550	1,010,550	0
NET SURPLUS (DEFICIT)	(1,433,481)	2,650,446	1,216,965	1,868,508	(358,678)	1,259,487	0	1,259,487

REVENUES

STATE & FEDERAL FUNDING

MH & AODA Basic County Allocation	422,356	555,919	978,275	1,956,549	976,324	1,956,549	1,952,647	3,902
Children's Basic County Allocation	331,850	293,721	625,571	988,673	676,019	1,251,141	1,352,038	(100,897)
Family Care County Contribution	0	0	0	0	0	0	0	0
Children's L/T Support Waivers	594,106	46,869	640,975	1,363,700	534,294	1,096,270	1,068,587	27,682
Behavioral Health Programs	126,290	128,543	254,833	389,963	205,837	508,815	411,673	97,142
Community Options Program	11,075	96,290	107,365	214,748	109,059	214,730	218,118	(3,388)
Aging & Disability Res Center	239,880	271,222	511,102	1,008,024	505,887	1,022,204	1,011,773	10,431
Aging/Transportation Programs	405,349	(6,727)	398,622	739,184	357,668	737,052	715,335	21,717
Project YES!	0	0	0	82,289	0	0	0	0
Youth Aids	333,964	80,330	414,293	813,439	381,438	727,068	762,877	(35,809)
IV-E Legal and Legal Rep	21,500	3,496	24,996	33,160	23,037	49,992	46,074	3,918
Family Support Program	0	0	0	0	0	0	0	0
Children & Families	108,639	(14,343)	94,296	225,794	144,144	263,399	288,288	(24,889)
ARRA Birth to Three	0	0	0	0	0	0	0	0
I.M. & W-2 Programs	287,470	617,817	905,287	1,799,615	807,460	1,503,989	1,614,920	(110,931)
Client Assistance Payments	131,959	45,529	177,487	273,823	151,167	311,631	302,333	9,298
Early Intervention	82,782	0	82,782	165,564	82,782	165,564	165,564	0
Total State & Federal Funding	3,097,220	2,118,664	5,215,885	10,054,527	4,955,113	9,808,404	9,910,227	(101,823)

COLLECTIONS & OTHER REVENUE

Provided Services	1,210,529	809,376	2,019,905	4,703,208	2,822,930	4,408,317	5,645,860	(1,237,542)
Child Alternate Care	93,306	0	93,306	135,506	70,000	186,612	140,000	46,612
Adult Alternate Care	107,831	0	107,831	163,540	100,000	215,663	200,000	15,663
Children's L/T Support	221,731	105,800	327,531	492,308	332,756	655,062	665,512	(10,450)
1915i Program	(1,123)	25,217	24,094	148,971	65,217	110,120	130,433	(20,313)
Donations	51,875	5,703	57,578	136,239	55,186	110,242	110,371	(129)

	Y-T-D @ Ledgers	Adjust -ments	Y-T-D Projection	Prior Y-T-D Projection	Prorated Budget	Year End Projection	2020 Budget	Year End Variance
Cost Reimbursements	84,102	(12,189)	71,913	171,757	76,127	140,376	152,254	(11,878)
Other Revenues	285,279	83,911	369,189	638,477	227,328	631,558	454,656	176,902
Total Collections & Other	2,053,530	1,017,817	3,071,347	6,590,006	3,749,543	6,457,950	7,499,086	(1,041,136)
TOTAL REVENUES	5,150,750	3,136,481	8,287,232	16,644,533	8,704,656	16,266,354	17,409,313	(1,142,959)
<u>EXPENDITURES</u>								
<u>WAGES</u>								
Behavioral Health	963,506	5,000	968,506	1,828,260	973,078	1,972,371	2,005,753	(33,382)
Children's & Families	944,794	65,000	1,009,794	1,837,513	958,718	2,019,589	1,961,072	58,517
Community Support	488,435	0	488,435	944,827	520,899	976,870	1,041,798	(64,928)
Comp Comm Services	796,808	0	796,808	1,294,020	914,485	1,593,616	1,921,713	(328,097)
Economic Support	650,007	0	650,007	1,291,718	664,325	1,300,014	1,328,650	(28,636)
Aging & Disability Res Center	253,627	0	253,627	514,079	269,972	507,254	539,943	(32,689)
Aging/Transportation Programs	252,920	0	252,920	489,419	255,365	505,839	510,730	(4,890)
Childrens L/T Support	223,054	10,000	233,054	346,397	234,495	466,107	468,989	(2,882)
Early Intervention	158,932	0	158,932	321,186	164,111	317,863	328,222	(10,358)
Management/Overhead	519,415	7,500	526,915	1,117,554	620,140	1,053,831	1,240,280	(186,449)
Lueder Haus	153,609	0	153,609	296,515	155,576	307,217	311,153	(3,935)
Safe & Stable Families	36,691	0	36,691	80,971	45,502	73,382	91,003	(17,622)
Supported Emplmt	0	0	0	0	0	0	0	0
Total Wages	5,441,797	87,500	5,529,297	10,362,459	5,776,665	11,093,953	11,749,306	(655,352)
<u>FRINGE BENEFITS</u>								
Social Security	399,157	0	399,157	766,875	434,357	798,314	868,713	(70,399)
Retirement	357,495	0	357,495	661,258	384,944	714,990	769,888	(54,898)
Health Insurance	1,225,854	25,000	1,250,854	2,292,980	1,333,421	2,522,612	2,666,842	(144,231)
Other Fringe Benefits	313,295	0	313,295	332,633	135,783	327,206	349,815	(22,609)
Total Fringe Benefits	2,295,801	25,000	2,320,801	4,053,746	2,288,504	4,363,121	4,655,258	(292,137)
<u>OPERATING COSTS</u>								
Staff Training	20,036	0	20,036	94,847	32,127	39,540	70,458	(30,918)
Space Costs	140,384	0	140,384	287,293	132,489	280,768	264,977	15,790
Supplies & Services	606,757	18,741	625,499	1,247,888	609,990	1,220,237	1,220,980	(743)
Program Expenses	110,116	0	110,116	219,521	87,071	252,678	174,141	78,537
Employee Travel	36,796	0	36,796	157,283	74,166	73,593	149,453	(75,861)
Staff Psychiatrists & Nurse	202,868	0	202,868	398,405	208,985	405,736	417,969	(12,233)
Birth to 3 Program Costs	92,850	20,000	112,850	231,964	121,000	225,700	242,000	(16,300)
Busy Bees Preschool	482	0	482	4,360	1,300	965	2,600	(1,635)
ARRA Birth to Three	0	0	0	0	0	0	0	0
Opp. Inc. Payroll Services	0	0	0	0	0	0	0	0
Other Operating Costs	38,359	0	38,359	48,038	19,286	119,263	38,571	80,692
Year End Allocations	(26,310)	1,634	(24,676)	(72,558)	(3,387)	(53,995)	3,870	(57,864)
Capital Outlay	103,921	0	103,921	423,205	153,870	286,188	307,740	(21,552)
Total Operating Costs	1,326,260	40,376	1,366,636	3,040,245	1,436,895	2,850,674	2,892,760	(42,086)

	Y-T-D @ Ledgers	Adjust -ments	Y-T-D Projection	Prior Y-T-D Projection	Prorated Budget	Year End Projection	2020 Budget	Year End Variance
<u>BOARD MEMBERS</u>								
Per Diems	2,090	0	2,090	4,125	2,310	4,180	4,620	(440)
Travel	96	0	96	574	369	192	738	(546)
Training	0	0	0	0	0	0	0	0
Aging Committee	0	0	0	0	0	0	0	0
Total Board Members	2,186	0	2,186	4,699	2,679	4,372	5,358	(986)
<u>CLIENT ASSISTANCE</u>								
W-2 Benefit Payments	0	0	0	0	0	0	0	0
Donation Expenses	5,745	0	5,745	16,607	15,155	11,489	30,309	(18,820)
Medical Asst. Transportation	0	0	0	0	0	0	0	0
Energy Assistance	60,796	0	60,796	123,925	77,775	121,592	155,550	(33,958)
Kinship & Other Client Assistance	66,797	0	66,797	103,979	44,642	133,594	89,283	44,311
Total Client Assistance	133,338	0	133,338	244,511	137,571	266,675	275,142	(8,467)
<u>MEDICAL ASSISTANCE WAIVERS</u>								
Childrens LTS	604,460	(0)	604,459	1,563,713	577,121	1,206,251	1,154,242	52,009
Total Medical Assistance Waivers	604,460	(0)	604,459	1,563,713	577,121	1,206,251	1,154,242	52,009
<u>COMMUNITY CARE</u>								
Supportive Home Care	8,419	0	8,419	44,602	16,500	16,838	33,000	(16,162)
Guardianship Services	24,602	0	24,602	53,294	36,211	49,203	72,422	(23,218)
People Ag. Domestic Abuse	0	0	0	0	7,500	0	15,000	(15,000)
Family Support	0	0	0	0	0	0	0	0
Transportation Services	27,684	0	27,684	50,583	22,500	55,367	45,000	10,367
Opp. Inc. Delinquency Programs	0	0	0	0	0	0	0	0
Opp. Inc. Independent Living	0	0	0	0	0	0	0	0
Other Community Care	358,601	15,000	373,601	803,425	399,573	746,680	799,146	(52,466)
Elderly Nutrition - Congregate	11,049	0	11,049	56,393	31,285	22,097	62,570	(40,473)
Elderly Nutrition - Home Delivered	72,377	0	72,377	129,762	63,435	144,755	126,871	17,884
Elderly Nutrition - Other Costs	2,313	0	2,313	6,833	3,100	4,625	6,200	(1,575)
Total Community Care	505,044	15,000	520,044	1,144,892	580,104	1,039,567	1,160,209	(120,642)
<u>CHILD ALTERNATE CARE</u>								
Foster Care & Treatment Foster	379,401	0	379,401	781,551	462,500	742,713	925,000	(182,287)
Intensive Comm Prog	0	0	0	0	0	0	0	0
Group Home & Placing Agency	50,908	0	50,908	285,718	205,000	189,024	410,000	(220,976)
L.S.S. Child Welfare	0	0	0	0	0	0	0	0
Child Caring Institutions	218,279	0	218,279	419,885	325,000	484,989	650,000	(165,011)
Detention Centers	10,500	0	10,500	101,668	62,500	21,000	125,000	(104,000)
Correctional Facilities	0	0	0	0	0	0	0	0
Shelter & Other Care	67,154	5,270	72,424	153,108	63,665	144,848	127,330	17,518
Total Child Alternate Care	726,241	5,270	731,511	1,741,931	1,118,665	1,582,573	2,237,330	(654,757)

	Y-T-D @ Ledgers	Adjust -ments	Y-T-D Projection	Prior Y-T-D Projection	Prorated Budget	Year End Projection	2020 Budget	Year End Variance
<u>HOSPITALS</u>								
Detoxification Services	19,612	0	19,612	30,335	27,500	39,224	55,000	(15,776)
Mental Health Institutes	583,405	0	583,405	1,238,554	608,112	1,166,810	1,216,224	(49,414)
Other Inpatient Care	0	0	0	0	0	0	0	0
Total Hospitals	603,017	0	603,017	1,268,890	635,612	1,206,034	1,271,224	(65,190)
<u>HS RESERVE FUND</u>								
Operating Reserve	0	0	0	0	325,000	0	650,000	(650,000)
<u>OTHER CONTRACTED</u>								
Adult Alternate Care (Non-MAW)	96,538	0	96,538	251,878	106,658	193,076	213,317	(20,241)
Family Care County Contribution	0	312,549	312,549	625,097	312,549	625,097	625,097	0
AODA Halfway Houses	0	0	0	0	0	0	0	0
1915i Program	183,725	0	183,725	332,848	195,906	377,137	391,812	(14,676)
IV-E TPR	101,441	0	101,441	90,381	62,379	202,883	124,758	78,125
Emergency Mental Health	2,194	0	2,194	8,894	1,000	3,388	2,000	1,388
Work/Day Programs	0	0	0	0	0	0	0	0
Ancillary Medical Costs	110,209	0	110,209	228,725	104,459	220,417	208,919	11,498
Miscellaneous Services	77,965	342	78,307	246,987	82,355	146,777	164,709	(17,932)
Prior Year Costs	0	0	0	82	0	0	0	0
Clearview Commission	822	0	822	24,139	2,322	1,643	4,643	(3,000)
Total Other Contracted	572,894	312,891	885,784	1,809,030	867,627	1,770,418	1,735,255	35,163
TOTAL EXPENDITURES	12,211,038	486,036	12,697,073	25,234,116	13,746,444	25,383,638	27,786,084	(2,402,445)

JEFFERSON COUNTY HUMAN SERVICES DEPARTMENT State of Program Projection based on June 2020 Revenue & Expenditures Financial Statement

Summary Sheet

() Unfavorable

Program	Annual Projection			Budget				Variance
	Revenue	Expenditure	Tax Levy	Revenue	Expenditure	Tax Levy		
Behavior Health								
65000 BASIC ALLOCATION	3,621,136	4,620,198	999,063	3,606,272	4,584,297	978,025	(21,038)	
65003 LUEDER HAUS	126,789	579,308	452,519	127,000	573,244	446,244	(6,275)	
65007 EMERGENCY MENTAL HEALTH	73,999	953,543	879,544	85,000	887,738	802,738	(76,806)	
65008 CRISIS INNOVATION	101,519	98,541	(2,978)	136,576	135,830	(746)	2,232	
65010 MENTAL HEALTH BLOCK SUPPLEMENT	53,748	53,683	(65)	0	0	0	65	
65011 MENTAL HEALTH BLOCK	23,355	22,132	(1,223)	51,078	52,656	1,578	2,802	
65025 COMMUNITY SUPPORT PROGRAM	669,943	1,634,477	964,534	715,737	1,776,274	1,060,537	96,003	
65027 COMP COMM SERVICE	2,413,886	2,697,790	283,904	3,380,819	3,093,666	(287,153)	(571,057)	
63027 FAMILY CENTERED THERAPY	0	89,292	89,292	0	228,526	228,526	139,234	
65031 AODA BLOCK GRANT	135,269	125,001	(10,268)	158,484	178,018	19,534	29,802	
65035 AODA BLOCK GRANT SUPPLEMENTAL	49,185	49,185	0	0	0	0	0	
65032 OPIOID GRANT	149,417	192,767	43,350	100,502	199,166	98,664	55,314	
65033 JAIL AODA COUNSELING	0	0	0	0	0	0	0	
65043 COMMUNITY MENTAL HEALTH	97,609	0	(97,609)	97,609	0	(97,609)	0	
65044 CCISY CRISIS GRANT	231	3,605	3,374	4,000	4,000	0	(3,374)	
65063 1915I PROGRAM (CRS)	110,120	377,303	267,183	130,433	391,812	261,379	(5,804)	
65090 YOUTH EMPOWERMENT SOLUTIONS	0	0	0	0	0	0	0	
65034 WATERTOWN FOUNDATION TIC	7,788	7,788	0	0	0	0	0	
66000 DONATIONS	992	1,060	68	0	0	0	(68)	
Total Behavior Health	7,634,986	11,505,674	3,870,687	8,593,510	12,105,227	3,511,717	(358,970)	
Children & Families								
65001 CHILDREN'S BASIC ALLOCATION	1,562,458	2,650,719	1,088,261	1,552,038	2,896,203	1,344,165	255,904	
65002 KINSHIP CARE	122,251	122,251	0	86,783	86,783	0	0	
65005 YOUTH AIDS	611,660	1,359,035	747,375	664,202	1,955,537	1,291,335	543,960	
65013 CHILD WELFARE COVID-19	17,882	17,882	0	0	0	0	(0)	
63109 YOUTH JUSTICE INNOVATION	0	13,740	13,740	0	0	0	(13,740)	
60683 CITIZEN'S REVIEW PANEL	7,394	7,394	0	10,000	10,545	545	545	
63612 IN HOME SAFETY SERVICES	69,720	77,466	7,747	60,435	67,068	6,633	(1,114)	
63112 PARENTS SUPPORTING PARENTS	7,235	7,235	0	77,800	77,800	0	0	
65009 YA EARLY & INTENSIVE INT	46,501	120,060	73,559	46,501	189,322	142,821	69,262	
63110 PARENT VOICE STAKEHOLDER	0	0	0	0	0	0	0	
65121 CHILDREN'S COP	214,730	219,573	4,843	218,118	218,118	0	(4,843)	
65020 DOMESTIC ABUSE	0	0	0	0	15,000	15,000	15,000	
65021 SAFE & STABLE FAMILIES	66,160	124,289	58,129	71,586	150,656	79,070	20,940	
65036 SACWIS	0	9,676	9,676	0	0	0	(9,676)	
65040 CHILDRENS LTS WAIV-DD	1,470,773	1,659,722	188,949	1,330,074	1,710,631	380,557	191,609	
65067 COMMUNITY RESPONSE GRANT	82,556	157,195	74,639	93,932	191,951	98,019	23,380	
63111 FOSTER PARENT RETENTION	17,806	17,806	0	11,400	11,400	0	0	
65068 FOSTER PARENT TRAINING	2,891	8,626	5,735	1,067	2,667	1,600	(4,135)	
65060 IV-E CHIPS LEGAL	19,318	119,850	100,533	0	0	0	(100,533)	
65070 IV-E TPR	30,362	79,900	49,538	30,752	109,436	78,684	29,146	
65069 LEGAL REP: TPR	0	0	0	15,322	15,322	0	0	
65079 LEGAL REP: CHIPS	312	3,132	2,820	0	0	0	(2,820)	
65080 YOUTH DELINQUENCY INTAKE	0	896,596	896,596	0	934,912	934,912	38,316	
65082 AUTISM	280,559	353,805	73,246	404,025	293,917	(110,108)	(183,354)	
65175 EARLY INTERVENTION (BIRTH TO 3)	194,802	740,244	545,442	193,564	789,050	595,486	50,044	
65105 KINSHIP ASSESSMENTS	4,493	4,493	0	4,643	4,643	0	0	
65120 COORDINATED SERVICE TEAM	60,000	74,186	14,186	60,000	97,472	37,472	23,286	
63120 CST SUPPLEMENT	817	817	0	0	0	0	0	
65188 BUSY BEES PRESCHOOL	1,575	25,398	23,823	3,000	36,011	33,011	9,188	
65189 INCREDIBLE YEARS	375	57,576	57,201	0	62,725	62,725	5,525	
66000 DONATIONS	4,454	10,429	5,975	0	30,309	30,309	24,334	
Total Children & Families	4,897,083	8,939,096	4,042,012	4,935,242	9,957,479	5,022,236	980,224	

JEFFERSON COUNTY HUMAN SERVICES DEPARTMENT State of Program Projection based on June 2020 Revenue & Expenditures Financial Statement

Summary Sheet

() Unfavorable

Program	Annual Projection			Budget			Variance
	Revenue	Expenditure	Tax Levy	Revenue	Expenditure	Tax Levy	
Economic Support Division							
65051 INCOME MAINTENANCE	1,366,108	2,136,438	770,330	1,493,597	2,167,351	673,754	(96,576)
65053 CHILD DAY CARE ADMIN	120,682	6,102	(114,579)	100,000	0	(100,000)	14,579
65057 ENERGY PROGRAM	121,592	121,592	0	155,550	155,550	0	0
65071 CHILDREN FIRST	1,829	0	(1,829)	4,800	0	(4,800)	(2,971)
65073 FSET	10,878	0	(10,878)	11,880	0	(11,880)	(1,002)
65100 CLIENT ASSISTANCE	22,000	0	(22,000)	0	0	0	22,000
Total	1,643,088	2,264,132	621,044	1,765,827	2,322,901	557,074	(63,970)
Aging Division & ADRC							
65012 ALZHEIMERS FAM SUPP	16,742	16,742	0	33,000	33,000	0	0
65046 ADRC - DBS	0	148,856	148,856	0	181,683	181,683	32,827
65047 ADRC - DCS	0	97,017	97,017	0	94,860	94,860	(2,157)
65048 AGING/DISABIL RESOURCE	1,022,204	632,065	(390,139)	1,011,773	672,202	(339,571)	50,569
65075 GUARDIANSHIP PROGRAM	1,743	20,850	19,107	0	27,422	27,422	8,315
65076 STATE BENEFIT SERVICES	52,605	91,125	38,520	54,553	95,603	41,050	2,531
65077 ADULT PROTECTIVE SERVICES	56,827	62,612	5,785	56,827	86,914	30,087	24,301
65078 NSIP	21,782	29,428	7,646	17,186	17,186	0	(7,646)
65151 TRANSPORTATION	249,787	292,586	42,800	286,595	317,739	31,144	(11,656)
65152 IN-HOME SERVICE III-D	9,028	0	(9,028)	4,245	5,000	755	9,783
65154 SITE MEALS	84,663	84,662	(0)	146,084	153,261	7,177	7,177
65155 DELIVERED MEALS	211,404	211,404	0	172,744	217,235	44,491	44,490
65156 HDM COVID-19	0	18,170	18,170	0	0	0	(18,170)
65157 SENIOR COMMUNITY SERVICES	5,938	0	(5,938)	7,986	0	(7,986)	(2,048)
65158 ELDER ABUSE	25,025	188,982	163,957	25,025	136,075	111,050	(52,907)
65159 III-B SUPPORTIVE SERVICE	76,434	88,823	12,389	66,543	75,760	9,217	(3,173)
65163 TITLE III-E (FAMILY CAREGIVER SUPPORT)	36,302	43,103	6,801	29,918	41,000	11,082	4,281
65195 VEHICLE ESCROW ACCOUNT	155	18,176	18,021	0	39,427	39,427	21,406
63010 MOBILITY MANAGER	80,000	104,478	24,478	80,000	102,227	22,227	(2,251)
66000 DONATION	0	0	0	0	0	0	0
Total	1,950,639	2,149,079	198,440	1,992,479	2,296,592	304,113	105,673
Administrative Services Division							
65187 UNFUNDED SERVICES	19,381	41,156	21,775	0	48,317	48,317	26,542
63101 DODGE STREET HOUSE	0	8,036	8,036	0	0	0	(8,036)
65190 MANAGEMENT	0	6,374	6,374	0	6,500	6,500	126
65200 OVERHEAD AND TAX LEVY	9,487,398	114,625	(9,372,773)	9,488,475	130,754	(9,357,721)	15,052
65200 Overhead Cleared	0	0	0	0	0	0	0
65210 CAPITAL OUTLAY	0	268,012	268,012	0	268,313	268,313	301
22101 COVID-19	0	87,455	87,455	0	0	0	(87,455)
Balance Sheet Non Lapsing Funds	1,010,550	0	(1,010,550)	1,010,550	0	(1,010,550)	0
Total	10,517,329	525,658	(9,991,671)	10,499,025	453,885	(10,045,141)	(53,470)
Human Services Reserve Fund							
63001 Operating Reserve	0	0	0	0	650,000	650,000	650,000
Reserve Fund	0	0	0	0	650,000	650,000	650,000
GRAND Total	26,643,125	25,383,638	(1,259,487)	27,786,084	27,786,084	(0)	1,259,487

Note: Variance includes Non-Lapsing from Balance Sheet

Children - Alternate Care Costs

Type of Placement	# of Children	# of Days	Cost	Cost per Day	Cost Per Child
January-20					
Foster Care	58	1,660	\$77,177	\$46	\$1,331
Group Home	3	74	\$16,574	\$224	\$5,525
Kinship Care	36	1,116	\$9,144	\$8	\$254
Subsidized Guardianship	17	527	\$6,869	\$13	\$404
RCC's	2	62	\$25,607	\$413	\$12,803
RCC's - Out of State	2	62	\$33,325	\$538	\$16,663
Total January 2020	118	3501	\$ 168,696	\$48	\$1,430
			2020 YTD Avg. per Month	\$168,696	
			2019 YTD Avg. per Month (thru January 2019)	\$156,643	
February-20					
Foster Care	55	1,534	\$69,688	\$45	\$1,267
Group Home	3	74	\$16,549	\$224	\$5,516
Kinship Care	43	1,259	\$10,988	\$9	\$256
Subsidized Guardianship	17	493	\$6,869	\$14	\$404
RCC's	2	58	\$23,954	\$413	\$11,977
RCC's - Out of State	2	58	\$31,175	\$538	\$15,588
Total February 2020	122	3476	\$159,224	\$46	\$1,305
			2020 YTD Avg. per Month	\$163,960	
			2019 YTD Avg. per Month (thru February 2019)	\$142,249	
March-20					
Foster Care	54	1,525	\$68,765	\$45	\$1,273
Group Home	2	17	\$3,868	\$228	\$1,934
Kinship Care	46	1,331	\$10,906	\$8	\$237
Subsidized Guardianship	18	558	\$7,553	\$14	\$420
Supervised Independ Living	1	26	\$5,200	\$200	\$5,200
RCC's	2	62	\$25,607	\$413	\$12,803
RCC's - Out of State	2	36	\$17,855	\$496	\$8,928
Total March 2020	125	3555	\$139,754	\$39	\$1,118
			2020 YTD Avg. per Month	\$155,891	
			2019 YTD Avg. per Month (thru March 2019)	\$141,269	
April-19					
Foster Care	56	1,640	\$90,536	\$55	\$1,617
Group Home	0	0	\$0	\$0	\$0
Kinship Care	46	1,336	\$11,299	\$8	\$246
Subsidized Guardianship	18	540	\$7,553	\$14	\$420
Supervised Independ Living	1	24	\$3,432	\$143	\$3,432
RCC's	2	19	\$15,200	\$800	\$7,600
RCC's - Out of State	1	30	\$14,400	\$480	\$14,400
Total April 2020 **	124	3589	\$142,421	\$40	\$1,149
			2020 YTD Avg. per Month	\$152,523	
			2019 YTD Avg. per Month (thru April 2019)	\$137,660	
<i>**\$17,882 of these costs are additional COVID-19 costs that are offset with State funding</i>					

Children - Alternate Care Costs

Type of Placement	# of Children	# of Days	Cost	Cost per Day	Cost Per Child
May-20					
Foster Care	61	1,812	\$75,528	\$42	\$1,238
Group Home	1	26	\$5,688	\$219	\$5,688
Kinship Care	40	1,144	\$9,373	\$8	\$234
Subsidized Guardianship	18	558	\$7,553	\$14	\$420
RCC's	1	5	\$2,099	\$420	\$2,099
RCC's - Out of State	1	31	\$14,880	\$480	\$14,880
Total May 2020	122	3576	\$115,121	\$32	\$944
2020 YTD Avg. per Month			\$145,043		
2020 YTD Avg. per Month w/out additional COVID-19 costs			\$141,467		
2019 YTD Avg. per Month (thru May 2019)			\$139,269		
June-20					
Foster Care	61	1,638	\$65,717	\$40	\$1,077
Group Home	2	36	\$8,005	\$222	\$4,002
Kinship Care	38	1,104	\$9,339	\$8	\$246
Subsidized Guardianship	17	510	\$6,453	\$13	\$380
RCC's	0	0	\$0	\$0	\$0
RCC's - Out of State	1	30	\$14,400	\$480	\$14,400
Total June 2020	119	3318	\$103,913	\$31	\$873
2020 YTD Avg. per Month			\$138,188		
2020 YTD Avg. per Month w/out additional COVID-19 costs			\$135,208		
2019 YTD Avg. per Month (thru June 2019)			\$139,810		
Projected 2020 Cost			\$1,622,492		
2020 Budget			\$2,046,788		

**Detox/AODA CBRF
Jefferson County - HSD**

Detox Facility	Clients *	Comments	Billed YTD **	Days **
Tellurian Community	33	June 2020	\$22,880	44
Matt Talbot Recovery	0	June 2020	\$0	0
Nova Counseling	1	June 2020	\$512	3
Lutheran Social Services	0	June 2020	\$0	0
Hope Haven	9	June 2020	\$63,327	232
Friends of Women	1	June 2020	\$16,736	90
Meta House, Inc	1	June 2020	\$5,565	21
Blandine House	1	June 2020	\$3,978	34
All - June 2020	46	2020 total through June	\$112,998	424
All - June 2019	33	2019 total through June	\$105,475	427

* Count is based on Unduplicated Clients.

** Count is based on bills paid to-date with a service date in Comments column.

Costs by Month

Month	Detox	AODA
January	\$5,200	\$18,123
February	\$3,120	\$15,015
March	\$6,760	\$20,224
April	\$5,200	\$12,942
May	\$1,560	\$10,875
June	\$1,040	\$12,939
July - estimated	\$3,813	\$9,431
August		
September		
October		
November		
December		

Total Estimated Costs for 2020 (Thru July) \$126,242

Total Costs for 2019 (Thru July) \$137,380

Calendar Year 2021: Section 5310 Grant Program Application

Mobility Management and Operating Assistance Grants Only

The Wisconsin Department of Transportation sponsors the federal Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Program in cooperation with the Southeastern WI RPC, the East Central WI RPC, the Green Bay MPO, and the Madison Area MPO. This program provides formula funds to states and designated recipients to improve mobility for seniors and individuals with disabilities.

Do not submit an application to the BlackCat website if you are applying for a project in the Milwaukee, Madison or Green Bay urbanized areas (UZA). Application instructions for these regions can be found at:

- * [Milwaukee UZA 5310 Program](#)
- * [Madison UZA 5310 Program](#)
- * [Green Bay UZA 5310 Program](#)

Eligible applicants for this portion of the 5310 program are:

- * Private non-profit organizations
- * Municipal or County government agencies
- * Public transportation operators receiving a Section 5310 grant indirectly

Instructions:

- * Complete gray-shaded areas on appropriate worksheets. There are multiple tabs at the bottom of the workbook that you will need to scroll through to complete. Do not modify the tab names or delete tabs that you do not use.
- * Each project requires a budget, goals, and staffing sheet to be completed.
- * Upload the completed workbook back into the BlackCat website under the "Applications" tab

Applications submitted after this deadline will not be evaluated.

Timeline:	
Application Released:	June 22, 2020
Applications due:	August 28, 2020
Awards Announced:	November/December, 2020
Grant Cycle Begins:	January 1, 2021
Grant Cycle Ends:	December 31, 2021

2021 SECTION 5310 PROGRAM

Vehicle Application

Four (4) Pages included in this tab

CONTACT INFORMATION

AGENCY/ORGANIZATION

Agency:	Jefferson County Human Services Department
Address:	1541 Annex Road
City, State Zip:	Jefferson, WI 53549
County:	Jefferson
FEIN Number:	39-6005705
DUNS Number:	07-383-0879
SAM Number:	

PROJECT CONTACT

Name:	Sharon Olson
Title:	ADRC Division Manager
Address 1:	1541 Annex Road
Address 2:	
City, State Zip:	Jefferson, WI 53549
Phone:	920-674-8139
Email:	shaorno@jeffersoncountywigo

SINGLE AUDIT

WisDOT is responsible for reviewing single audits of subrecipients that expend more than \$750,000 annually of federal funding from all sources, not just US DOT funds, in accordance with OMB - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards 2 CFR 200 (Subpart F § 200.501). Audits shall be made by an independent auditor in accordance with generally accepted government auditing standards covering financial audits.

Check ONE box to the right of the correct statement

1. Our agency expends less than \$750,000 in a year in federal funds from all sources.

2. Our agency expends more than \$750,000 in a year in federal funds from all sources.

X	
2019	
audit	

If checked box for #2 - please indicate date of most recent single audit submission:
(WisDOT staff will review the harvester.census.gov website for any program-related findings and follow up with affected grantees)

COORDINATION

The Federal Transit Administration (FTA) requires that projects funded under the 5310 program are derived from a "locally developed coordinated public transit-human services transportation plan". This ensures that applicants are coordinating services with other private, public and non-profit transportation providers. Section 5310 projects must be identified by a strategy and/or action item in a county, multi-county or regional plan. The plan name, strategy/action item, and page number must be provided below.

Title of Coordination Plan:	2019-2023 Jefferson County Transportation Plan
Page number(s) of the strategy(ies) from which your project is derived from:	Page 16
Strategy(ies) from which your project is included in:	Maintain and expand fleet as needed to meet the demands of the Jefferson County Driver Escort program. Measure: Continue to apply for funding through Section 85.21 and other grants as needed to support the county transportation program

OTHER STATE AND FEDERAL FUNDING FOR TRANSPORTATION

Does your organization currently receive or have a pending application for other state and Federal Transit Administration (FTA) funding through WisDOT or directly from FTA? Examples include, but are not limited to the following transit funding programs:

Program Name	Program Number	Program Type
Urban mass transit assistance	85.20	State
Non-urban assistance	5311	Federal
Urbanized areas assistance	5307	Federal
County Specialized transportation	85.21	State
Elderly tribal transportation	85.215	State

YES or NO: **County Agency Applicants ONLY -** 85.21 Trust Fund Balance: \$

If yes, please list the funding programs and explain how the projects in this application are related to your current state/federally funded transportation projects or any pending applications for this funding. Applicants may be required to submit a cost allocation plan for items and staff that are funded with multiple grants. WisDOT will contact you if required. **(Alt+Enter will allow you to insert a line break)**

The request for a wheelchair accessible vehicle will be added to increase our fleet of vehicles in providing transportation services through our driver escort program which is funded by state, 85.21 program. In 2019, we have increased our driver pool by 4 additional part-time staff and since we only have one wheelchair accessible vehicle, we have a project to fund wheelchair transportation requests through private providers, and that funding is being maxed out. Private providers costs are very expensive and our plan to be more cost effective by providing that service through our driver escort program.

PROJECT LOCATION

What is the service area of the proposed project(s)? List counties, municipalities, etc.

--

Within which Regional Planning Commission(s) is your project(s)?

RPC 1:	unserved
RPC 2:	
RPC 3:	

If the project service area is partially or fully in a Metropolitan Planning Organization (MPO), please list. (Links to MPO's located on the WisDOT website)

MPO 1:	
MPO 2:	
MPO 3:	

What Congressional District(s) is your project located?

CD 1:	First District in accordance with Wis Stat.3.01
CD 2:	
CD 3:	

If your project's service area covers more RPCs, MPOs or CDs than space allows above, please list below.

--

Jefferson County Plan on Aging 2019-2021

FINAL was rec'd and
approved -10-24-18

Annual updates are noted
where required (jfm)

**Contact is Sharon Olson
(920) 674-8139**

TABLE OF CONTENTS

1. Verification of Intent
2. Executive Summary
3. Organization and Structure of the Aging Unit
 - a. Mission Statement and Description of the Aging Unit
 - b. Organizational Chart of the Aging Unit
 - c. Aging Unit Coordination with ADRCs
 - d. Statutory Requirements for the Structure of the Aging Unit
 - e. Membership of the Policy-Making Body
 - f. Membership of the Advisory Committee
 - g. Assessment Only - update the Commission on Aging and Aging Advisory membership
4. Context
5. Public Involvement in the Development of the County Aging Plan
6. Goals for the Plan Period
 - a. Assessment Only - National Family Caregiver Support Program
7. Coordination Between Titles III and VI
9. Compliance with Federal and State Laws and Regulations
10. Assurances
11. Appendices

**Yellow Highlight indicates sections required for annual assessment*

1. Verification of Intent

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 the 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 2019-2021.

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.

Russell Kutz, ADRC Advisory Committee Chair 10-2-2018
Signature, and Title of the Chairperson of the Commission on Aging Date

Jim Mole Human Services Bd. Chair 10/9/18
Signature, and Title of the Authorized County Board Representative Date

2019

Date of meeting:	Location: phone
A/U Representative(s):	GWAAR Representative(s): Jayne Mullins
Any CoA member changes? Any org or staff changes? Who gets cc'd a letter? Goal updates (noted in blue) changes are crossed off and new text in blue font.	
Policy-making Board Chair email address:	
Advisory Board Chair email address:	

2020

Date of meeting: July 20,2020	Location: Zoom
A/U Representative(s):	GWAAR Representative: Jayne Mullins
Policy-making Board Chair email address: RichardJ@jeffersoncountywi.gov	
Advisory Board Chair email address: RussellK@jeffersoncountywi.gov	

2021

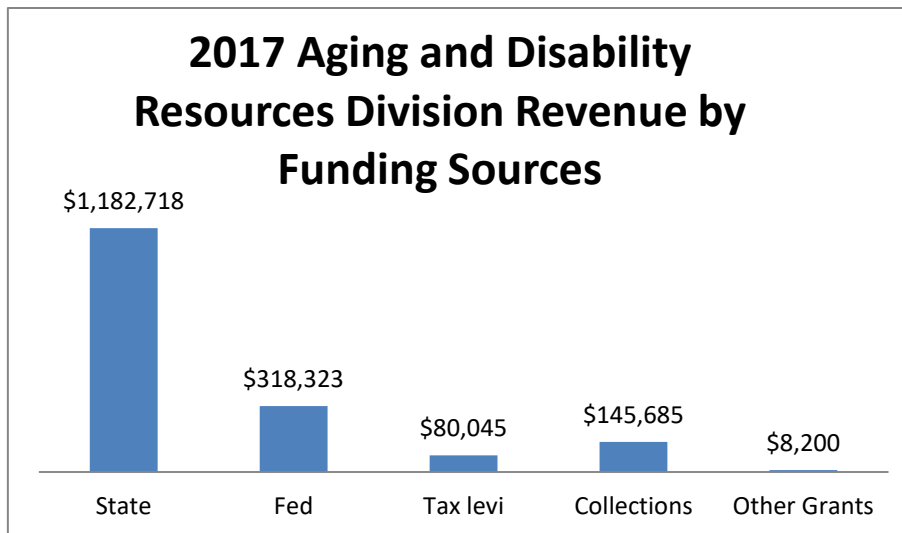
Date of meeting:	Location:
A/U Representative(s):	GWAAR Representative(s):
Policy-making Board Chair email address:	
Advisory Board Chair email address:	

2. Executive Summary

The Aging and Disability Resource Division of Jefferson County was redesigned and formally established in July of 2008 by encompassing all the Older American Act Program, Transportation and the Aging and Disability Resource Center. This coincided with the opening of the Aging and Disability Resource Center (ADRC) which just celebrated its ten year anniversary.

Our purpose is to advocate for and help people achieve their goals by providing them with comprehensive information, assistance and opportunities to engage in the public policy process so they can make informed decisions and remain in charge of their lives.

The Aging & Disability Resources Division of Jefferson County Human Services encompasses many programs and funding streams that provide services and supports to the elderly, adults with disabilities, children with disabilities as they transition into adulthood, and persons with Alzheimer's disease or another dementia and their caregivers. Services and supports are intended to help people live with a high degree of independence in their own homes and communities for as long as they desire. We adhere to the principals of motivational interviewing to help people achieve their best possible outcomes.



The Aging Programs are funded with federal and state dollars, county tax levy and private donations. Federal funding comes from the Older American's Act or OAA. The OAA provides the framework under which the Division's two oversight committee's exist and operate.

1: Aging & Disability Resource Center Advisory Committee

This committee is actively involved in oversight and planning efforts on behalf of the division's constituents and is responsible for advising the Human Services Board about programs, policies and unmet community needs.

2: Nutrition Project Council

This council is responsible for advising the Nutrition Program Director on all matters relating to the delivery of nutrition and nutrition supportive services within the program area, including making recommendations regarding days and hours of meal site operations and site locations, setting the annual "suggested donation," and making recommendations regarding meal site furnishings with regard to persons with disabilities.

Plan Summary & Context: It is anticipated that no major changes will be made in the structure of the ADRC division over the next several years. Each area presents opportunities to explore solutions to ongoing challenges.

Involvement of Older People in Aging Related Program Development and Planning

Historically, Jefferson County experiences low or no attendance at public hearings or meetings around Older American's Act Programs and transportation. When elders, who are benefiting from OAA or other services, are informed that they may be subject to change(s) that directly affects them, people may be more inclined to become involved in advocacy. We need to move people from being reactive to proactive ~ and this has been our greatest challenge this planning period.

Major Topical Areas and Goals:

Challenges exist where demand is exceeding revenue sources, most specifically regards to the Home Delivered Meal program. This plan identifies goals in the areas of advocacy, elder nutrition, caregiver support, dementia care and healthy aging. These goals were chosen to expand services and opportunities for individuals as well as maintaining cost effective budgets by maximizing local resources as well as collaborating with other professional staff within our department, such as the Behavioral Health Unit to provide Columbia Suicide and Mental Health First Aide training to our staff and volunteers.

3 - Organization and Structure of the Aging Unit

3-A Mission Statement and Description of the Aging Unit

Our vision is of an inclusive community where older adults and people with disabilities are respected, healthy and productive.

Our mission is to advocate for and help people achieve their goals by providing them with comprehensive information, assistance and opportunities to engage in the public policy process so they can make informed decisions and remain in charge of their lives.

The Jefferson County Human Services Department has 5 divisions; Behavioral Health, Child and Family, Economic Support, Administrative Services and the Aging and Disability Resource Center whereas the Aging Unit, Transportation and ADRC are under the umbrella of the Aging & Disability Resources Division. Due to branding the ADRC is known as the place to come or call to access all aging programs and services. The ADRC is located on the southwest corner of town at 1541 Annex Road, Jefferson. The building has ample signage, is fully accessible and offers private office space to maintain confidentiality standards.

The core hours of operation are Monday-Friday 8:00 a.m. – 4:30 p.m. Staff are available to accommodate the needs of consumers and families to meet between 7 am to 6:30 pm. For individuals needing assistance beyond those hours, the Human Services Department employs after hours social workers in order to provide assistance 24/7.

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

Sharon Olson, Division Manager

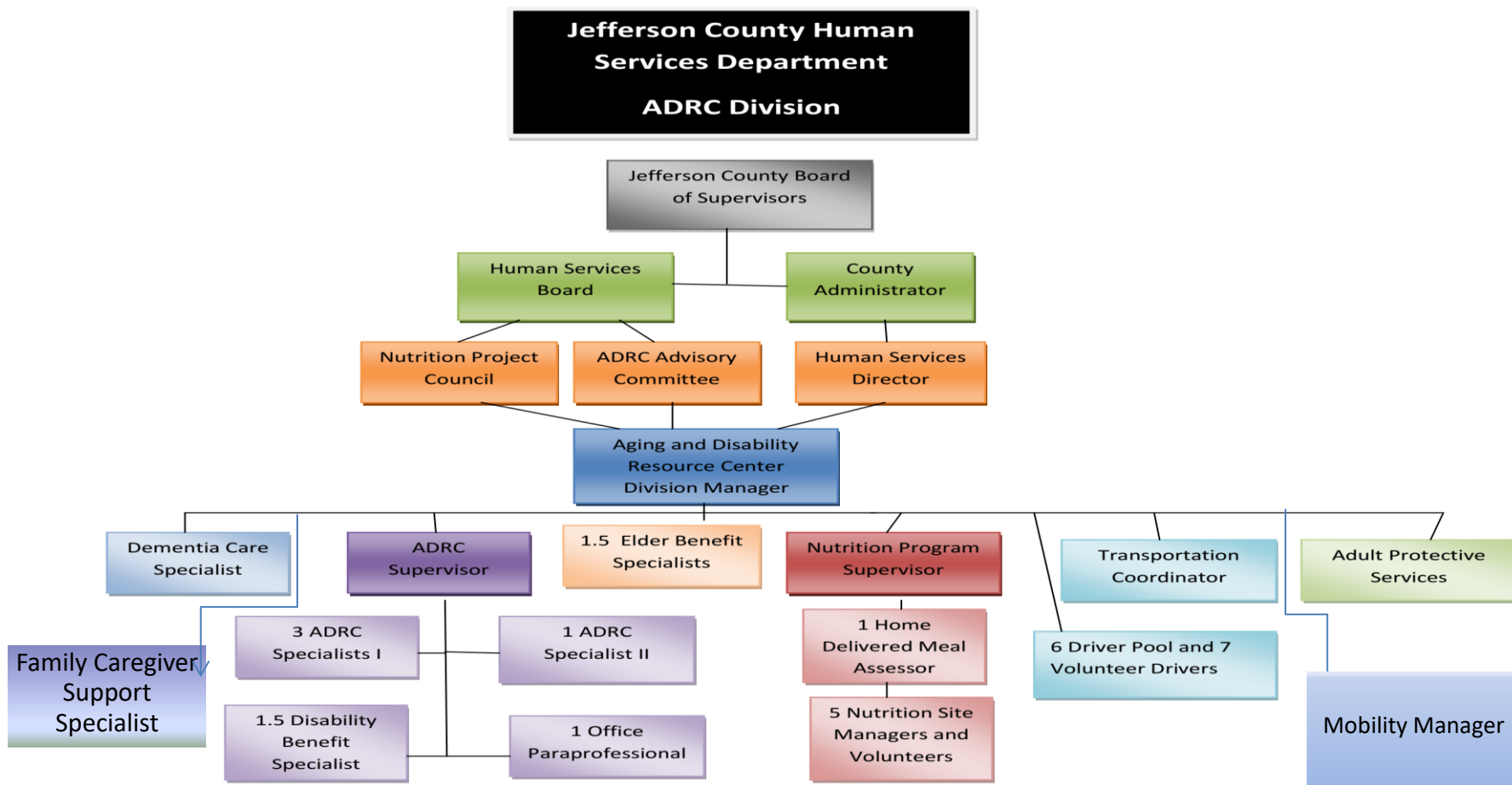
Aging & Disability Resources Division

920-674-8139 - Direct

adrc@jeffersoncountywi.gov email
www.jeffersoncountywi.gov website

3. Organization and Structure of the Aging Unit 3-B Organizational Chart of the Aging Unit

Provide an organizational chart, which clearly depicts the place of the aging unit, the policy-making body, and (where applicable) the advisory committee, in relation to the county government. (Not-for-profit aging units will not include their relationships to county government in the organization chart.)



3. Organization and Structure of the County Aging Unit 3-C Aging Unit Coordination with ADRCs

The ADRC and all other aging services are co-located within the Human Services Department. All Older American's Act (OAA) programs and services are offered under the umbrella of the ADRC. While also located adjacent to ADRC offices, the Adult Protective Services unit maintains its identity under the Human Services Department.

The Aging and Disability Resource Centers (ADRC's) offer the general public a no-cost, coordinated system of information and access for older people (60+), people with disabilities (17 ½-59), caregivers, family members and professionals alike seeking long-term care supports and resources. ADRC professional staff provides unbiased, objective information on a variety of public and private services and programs.

We promote individual choice using dialectical behavior therapy skills, support informed decision-making, connect people with the services they need and minimize confusion. Our goal is to improve life experience, maintain self-sufficiency, conserve personal resources and delay or prevent the need for potentially expensive long-term care. An ADRC representative is available in person through office and home visits, by telephone, text and email, whichever is more convenient to the individual(s) seeking our assistance. Consumers are referred or transferred to the person responsible for coordinating nutrition services, transportation, and/or caregiver support; however, due to changes in the state ADRC contract, short-term case coordination to assist caregivers in accessing services will be provided by ADRC staff. This is the only OAA service that is shared.

3. Organization and Structure of the County Aging Unit
3-D Statutory Requirements for the Structure of the Aging Unit

Chapter 46.82 of the Wisconsin Statutes sets certain legal requirements for aging units.

Organization: The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
1. An agency of county/tribal government with the primary purpose of administering programs for older individuals of the county/tribe.	
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.	
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.	X
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

3. Organization and Structure of the Aging Unit 3-E Membership of the Policy-Making Body

The commission is the policy making entity for aging services and an aging advisory committee is not the commission. Chapter 46.82 of the Wisconsin Statutes sets certain legal requirements for aging units.

“Members of a county/tribal commission on aging shall serve for terms of 3 years, so arranged that, as nearly as practicable, the terms of one-third of the members shall expire each year, and no member may serve more than 2 consecutive 3-year terms.” In the case of county board/tribal council members, the requirement is 3 consecutive 2-year terms.

Official Name of the County Aging Unit’s Policy-Making Body (list below)			
Jefferson County Human Services Board			
Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Jim Mode Richard Jones	X	X	2004 2007
Vice – Chair: Richard Jones Russel Kutz	X	X	2007 2015
Secretary: Cynthia Crouse			2015
Russell Kutz	X	X	2015
Augie Tietz	X	X	2009
James Schultz	X		2007
Leslie Golden			2020
Michael Wineke		X	2020

3. Organization and Structure of the County Aging Unit 3-F Membership of the Advisory Committee

If the aging unit has an advisory committee, listed below are the members of the advisory committee. *An aging advisory committee is required if the commission (policy making body) does not follow the Elders Act requirements for elected officials, older adults and terms or if the commission (i.e. policy-making body) is a committee of the county board.*

Chapter 46.82 of the Wisconsin Statutes requires that the membership of the aging advisory committee (where applicable) must consist of at least 50% older people, and individuals who are elected to office may not constitute 50% or more of the membership.

Official Name of the County Aging Unit's Advisory Committee (list below)			
ADRC Advisory Committee			
Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Russell Kutz	X	X	2015
Vice – Chair: Jeanne Tyler	X		2017
Secretary: Janet Sayre Hoeft	X		2019
Ellen Sawyers	X		2016
Ruth Fiege	X		2019
Frankie Fuller	X		2020
LaRae Schulz			2020

For assessment only – Please update the Commission on Aging and Aging Advisory membership and answer questions below.

<i>Please answer "Y" or "N"</i>	2019	2020	2021	Describe
Has the organization of the <i>Aging Unit</i> changed this past year?	N	N		
Has the organization of the <i>Commission on Aging</i> changed this past year?	N	N		
Does the aging unit have a full-time aging director?	Y	Y		
Is the membership of the Commission on Aging in Compliance?	Y	Y		

3. Organization and Structure of the County Aging Unit 3-G Staff of the Aging Unit

Listed below are the people employed by the County Aging Unit. Include additional pages as needed.

<p>Name: Sharon Olson Job Title: Aging & Disability Resource Center Division Manager Telephone Number/email Address: 920-674-8139 / sharono@jeffersoncountywi.gov</p>
<p>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.</p>
<p>Name: Dominic Wondolkowski Job Title: Aging & Disability Resource Center Supervisor Telephone Number/email Address: 920-674-8732 / dominicw@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to oversee, direct, promote and supervise the daily activities and staff of the Aging and Disability Resource Center.</p>
<p>Name: Kimberly Swanson Job Title: Nutrition Program Supervisor Telephone Number/email Address: 920-674-8134 / kimberlys@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to supervise the daily activities and staff of the Senior Dining Programs.</p>
<p>Name: Sharon Endl (PT) Job Title: Nutrition Outreach Worker Telephone Number/email Address: 920-674-8787 sharone@jeffersoncountywi.gov</p>
<p>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.</p>
<p>Name: Joy Clark, Patti Hills, Julie Schultz, JaNae Kreul, a vacant position (all PT) Job Title: Senior Dining Program Managers Telephone Number/email Address:</p>
<p>Brief Description of Duties: The purpose of the position is to oversee the daily operations of the Senior Dining & Home Delivered Meals Program and to ensure compliance with all rules and regulations.</p>

Name: Alyssa Kulpa & Karla Nava (PT)
Job Title: Elder Benefit Specialist
Telephone Number/email Address: 920-674-1945 Alyssak@jeffersoncountywi.gov
920-674-8135 Karlan@jeffersoncountywi.gov

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: Mike Hansen
Job Title: Mobility Manager
Telephone Number/email Address: 920-675-4049 Michaelh@jeffersoncountywi.gov

Brief Description of Duties: The purpose of the Mobility Manager is to plan and develop a consolidated transportation program for persons who are disabled, older adults and low-income residents of Jefferson County. This position will be responsible for Mobility Management which, under the Federal Transit Administration (FTA) definition: "consists of short-range planning, management activities and projects for improving coordination among public transportation and other transportation service providers with the intent of expanding the availability of services."

Name: Jean Thiede
Job Title: Transportation Coordinator
Telephone Number/email Address: 920-674-8104 Jeant@jeffersoncountywi.gov

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: Rick Pfeifer (PT), Lola Klatt (PT), Richard Crosby (PT) Alan Danielson (PT), Michael Solovey (PT) , Jacquelyn Ward (PT) , Dale Schweitzer (PT) , Randy Frohmader (PT)
Job Title: Drivers
Telephone Number/email Address: n/a

Brief Description of Duties: The purpose of this position is to provide transportation to seniors and persons with disabilities to medical appointments.

Name: Heather Janes
Job Title: Dementia Care Specialist
Telephone Number/email Address: 920-675-4035

Brief Description of Duties: The purpose of this position is to increase the dementia capability of Wisconsin's ADRCs, create more dementia friendly communities, and increase opportunities for people with dementia to remain in their own homes as long as is appropriate.

Name: Kassie Kluge & Shelly Theder

Job Title: Adult Protective Services

Telephone Number/email Address: 920-674-8126 KassieK@jeffersoncountywi.gov
920-674-8191 Shellyt@jeffersoncountywi.gov

Brief Description of Duties: The purpose of this position is to receive and respond to allegations of abuse/neglect of vulnerable adults using legal interventions when necessary under Chapter's 54 & 55 of the WI Statutes.

<p>Name: Penny Klement Job Title: ADRC Paraprofessional</p> <p>Telephone Number/email Address: 920-674-7187 Pennyk@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to greet the general public, answer phones and respond to simple requests for information and support the daily operations of the ADRC.</p>
<p>Name: Shelly Wangerin, Karla Nava PT Job Title: Disability Benefit Specialist Telephone Number/email Address: 920-674-8158 Shellyw@jeffersoncountywi.gov 920-674-8135 Karlana@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to provide comprehensive and current information on government and private sector benefits and programs for adults with disabilities aged 18-59; technical assistance in accessing these programs; advocacy and representation in the areas of consumer rights, grievances, appeals, and hearings at the local, State and Federal levels.</p>
<p>Name: Erika Holmes, Erin Bleck, Wendy Petitt, Sara Zwieg</p> <p>Job Title: Aging & Disability Resource Specialists Telephone Number/email Address: 920-674-8140 Erikah@jeffersoncountywi.gov 920-674-7105 Erinb@jeffersoncountywi.gov 920-674-8731 Saraz@jeffersoncountywi.gov 920-674-8191 Wendyp@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to provide information & assistance, options counseling, short term service coordination, advocacy services and enrollment/disenrollment counseling services to individuals interested in accessing the Family care, Partnership or the IRIS Programs. Services shall be targeted to adults in the following categories: elderly, caregivers, persons with physical or developmental disabilities, persons with mental health and /or AODA issues and youth transitioning from the children’s services system into the adult system.</p>
<p>Name: Kim Herman (PT) Job Title: Family Caregiver Support Specialist Telephone Number/email Address: 920-728-4903 Kimh@jeffersoncountywi.gov</p>
<p>Brief Description of Duties: The purpose of this position is to offer and provide person centered support to people over the age of 60, as well as, caregivers and their care recipients.</p>

4. Context

Jefferson County is home to an estimated 84,538 residents. It is a rural county, conveniently located between two of Wisconsin’s major cities, and makes for an easy commute for residents working in or between the state’s largest urban areas, Madison and Milwaukee. According to the US Census, American Community Survey, 2012 – 2016 estimates, the median age is 39.5 years. The table below estimates that the aging population of 60 and over represents 21% of our county population. Statistical information is primarily dispersed into the 64 years and younger group and 65 years and older target age groups.

Age Group Estimates	Wisconsin	Jefferson County
Total Population - All Ages, All Races	5,754,798	84,538
60+	1,237,534	17,786
65+	875,220	12,585
75+	390,565	5,265
85+	126,417	1,605
% 60+	21.5%	21.0%
% 65+	15.2%	14.9%
% 75+	6.8%	6.2%
% 85+	2.2%	1.9%
Males age 65+	391,177	5,743
<i>Males as percent of 65+ population</i>	44.7%	45.6%
Females age 65+	484,043	6,842
<i>Females as percent of 65+ population</i>	55.3%	54.4%
<small>Source: U.S. Bureau of the Census, American Community Survey, 2012-16 Five-year Estimates, Table B01001, 1/2018</small>		

Eric Grasso from the Department of Health Services shared projections of the total population and counties for the time span of 2015-2040 to help with preparing for upcoming estimated population growth. The population in Jefferson County is expected to increase over the next couple of decades for all ages of the population but the expectation of our very oldest 85+ is expected to double in population by 2040.

Jefferson County	2015	2020	2025	2030	2035	2040
All Ages	85,455	90,120	93,860	97,305	99,265	100,300
Aged 60 +	18,185	21,360	24,320	26,135	27,215	27,890
Aged 65+	12,735	15,360	18,090	20,605	21,825	22,490
Aged 85+	1,475	1,520	1,770	2,155	2,815	3,570

The Older Americans Act (OAA) specifies that its funds should be directed to individuals with the greatest economic and social need (with particular attention to low-income older individuals, including low-income minority individuals, older individuals with limited English proficiency and older individuals residing in rural areas.” The growth of the

aging populations in Jefferson County in the coming decades will create opportunities and challenges for our long-term supports and services. Between now and 2040, the proportion of the population age 65 and over will increase so strategic planning of program services is needed to meet the demand of people who may have reported a disability and those who have a ratio of income below the poverty line to ensure there is enough service to meet the need. The projection is that 9.5 % of Jefferson County Seniors over the age of 65 are living in poverty, whereas, the state average is 7.7%.

Ratio of Income to Poverty: Ages 65 and Older*	Wisconsin	Jefferson County
Total, Age 65+	846,685	12,301
Age 65+ below poverty	65,437	1,166
% of 65+ Pop below poverty	7.7%	9.5%
Age 65+: 150% of poverty or less	150,659	2,142
<i>% of 65+ Pop: 150% of poverty or less</i>	17.8%	17.4%
Age 65+: 185% of poverty or less	218,464	3,008
<i>% of 65+ Pop: 185% of poverty or less</i>	25.8%	24.5%
Age 65+: 200% of poverty or less	247,342	3,377
<i>% of 65+ Pop: 200% of poverty or less</i>	29.2%	27.5%
Age 65+: 300% of poverty or less	429,664	6,282
<i>% of 65+ Pop: 300% of poverty or less</i>	50.7%	51.1%
*Note: Totals for this table only include persons for whom poverty status can be determined.		
Source: U.S. Bureau of the Census, American Community Survey, 2012-16 Five-year Estimates, Table B17024, 1/2018		

Based on the latest County Health Rankings study performed by the Robert Wood Johnson Foundation and University of Wisconsin, Jefferson County ranked 12 healthiest county out of 72 Wisconsin counties (1=the healthiest: 72 = unhealthiest). In reviewing our Community Health Assessment for Jefferson it is determined the top focus areas for our Community Health Improvement Plan to be 1. Obesity/Excessive Weight – Lack of Physical activity and poor nutrition habits; 2. Mental Health; 3. Substance Abuse – including drugs, smoking and excessive drinking.

Planning Process used in the Development of this Plan

As part of the planning process, ADRC staff and ADRC Advisory Committee Members had peer-to-peer and group discussions facilitated by survey questions that our ADRC Advisory Members created to initiate conversations and gather information to create goals. The survey can be found in the Public Input section of this plan. Some of the highlighted areas where people shared the most information are around three questions:

1. *Are there services or events you have seen or heard of in other communities that you think would be helpful to seniors in our community?*

Transportation is the most recommended service that people identified – some locations are not served with taxi services which is quite challenging for those people who are transportation disadvantaged.

2. *What are the three most important issues facing older adults today?*

Depression and isolation; not enough funding & rising costs of everything; & healthcare and medications

3. *What are the top three concerns you have at this time?*

Finances, what do I do when I can't be independent and need help, and mobility

One of our primary goals within this plan, will focus on getting older people in our community involved by educational presentations to create a greater awareness of resources and develop more cohesive, and informed advocates to help with focusing on the needs and strengths of our community.

To work toward our Community Health Improvement Plan, our goal through-out this next plan period is that the ADRC/Aging Program will promote a leadership role in the community by improving food for nutrition site/home delivered meal dining participants as well as promote physical activity for diners. Aging staff along with a volunteer(s) will be trained in the Stepping On Program to promote good nutritious food with exercise.

In the realm of a Mental Health Implementation plan, our Aging Unit staff and volunteers will participate in the Mental Health First Aid class, as well as offer self-help alternatives to participants especially to those folks who are home bound and/or isolated.

We have been working with our Public Health department to increase awareness and provide education for area residents on medication alternatives, workshops for chronic pain management and resources to destroy unneeded pharmaceuticals.

Conclusion

The Aging and Disability Resource Center of Jefferson County is committed to meeting the various needs of our rapidly growing aging population and employing their knowledge as a key resource. Our best work will come when we work together, to enhance collaboration and streamline our services to support and provide strength to our citizens. As we move forward, we need to be aware of the economic challenges many of our seniors are facing as well as be accountable for providing cost effective and practical solutions. We will be working with many local, private, and nonprofit providers to provide services and support to achieve the goals defined in this plan.

5. Public Involvement in the Development of the County Aging Plan

Please use the [Public Input Report form](#) to explain how you gathered information and ideas from the public prior to developing your plan. Attach completed forms to the plan.

Public Input Report

Complete one worksheet for each separate method of public input used. i.e. 12 interviews conducted can be compiled on one sheet.

Your County or Tribe: Jefferson	Your Name and Email: Sharon Olson, sharono@jeffersoncountywi.gov
Type of Public Input: <input type="checkbox"/> Community Forum or Listening Session <input type="checkbox"/> Focus Group Discussions <input checked="" type="checkbox"/> Structured Interviews (with individuals) <input type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): _____	
Date/s of Event or Effort: One on one through providing Caregiver Needs Assessment has been most successful Held a Caregiver conference in November of 2017, three caregivers showed. Tried a couple times for group/call in, asking for written input - no turnout or response. Interviews were conducted January through March of 2018, as a mandatory requirement so as part of those conversations, input was gathered to understand what types of services caregivers would be interested in.	
Number of Participants or Respondents: 34 caregivers	
Key Issues Discussed: During Caregiver needs assessment, which is a one on one conversation to identify caregiver needs, areas of strengths and identify gaps in services in supports that is needed to fulfill role as a caregiver. Many caregivers have been providing support for many years, which surprised some people as they didn't really identify themselves as a caregiver until they applied for programs or sought help. Of the 24 caregivers interviewed, that are receiving services, 15 responded that they do not have a plan B, in case there was an emergency and they as the caregiver could not provide care. Nine responded that they have a plan, four stated that their care receiver would need to be placed in a nursing home or assisted living, only two of these identified where their person would go for a placement. Six out of the 10 that are on the wait list for NFCSP state they do not have any back up plan.	
Key Takeaways/Findings: Nineteen of the 34 caregivers identified a level of stress in caregiving, but needing help, more respite and finding time for themselves.	
Any Planned Response? A couple ideas from conversations is to have a folder/binder to store information in case of emergency and ways to relax, care for themselves, such as powerful tools	

Public Input Report

Complete one worksheet for each separate method of public input used. i.e. 12 interviews conducted can be compiled on one sheet.

Your County or Tribe: Jefferson County	Your Name and Email: Sharon Olson, sharono@jeffersoncountywi.gov
Type of Public Input: <input checked="" type="checkbox"/> Community Forum or Listening Session <input type="checkbox"/> Focus Group Discussions <input type="checkbox"/> Structured Interviews (with individuals) <input type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): _____	
Date/s of Event or Effort: RockWell Court Apartments - June 12, 2018	
Number of Participants or Respondents: 6 people attended.	
Key Issues Discussed: <p>Transportation was a priority topic that was discussed. There are no grocery stores on this side of town and no discount stores. They are located in other city in which any money they would save would be paid to get them there in the taxi. \$10 to \$15.00 for a round trip. If a person goes to the doctor and the doctor orders a med and blood work, that may be four "trips" in the cab and then follow up next week.</p> <p>One person has a service dog and there are no breaks on the vet bills and just to go to the vet in the cab was \$6.50 for the round trip. It is very difficult to financially afford the shots, license, grooming, but the person I spoke to said that the dog helps her as an emotional confidant and without her dog she would have given up a long time ago.</p>	
Key Takeaways/Findings: <p>Review areas of transportation. Years ago we had a van that would pick up residents at apartment building and take them to their appointments, beauty shops and shopping, but then nobody was using the service that it ended in this community. At that point of time there were more people driving. We can revisit and pilot a program to see if it works.</p>	
Any Planned Response? <p>Will be looking at transportation options. Will look at other suggestions, some communities have fundraisers to fund free cab tickets for lower income residents. I will pass on some of the information to the Fort Mobility Group that is looking for input to maximize Easterseal's funds.</p>	

Public Input Report

Complete one worksheet for each separate method of public input used. i.e. 12 interviews conducted can be compiled on one sheet.

Your County or Tribe: Jefferson County	Your Name and Email: Sharon Olson
Type of Public Input: <input type="checkbox"/> Community Forum or Listening Session <input type="checkbox"/> Focus Group Discussions <input type="checkbox"/> Structured Interviews (with individuals) <input checked="" type="checkbox"/> Paper or Internet Survey <input checked="" type="checkbox"/> Other (please describe): <u>Interviews with participants and residents / SFMV Outreach</u>	
Date/s of Event or Effort: June 4, 2018 St. Johns’s Lutheran Church, Johnson Creek, WI June 7 th , 2018 Jefferson Senior Center & Rivercrest Apartments - Jefferson WI June 8, 2018 Fort Atkinson Senior Center, Fort Atkinson, WI June 11, 2018 Watertown Senior Center, Watertown, WI June 13 th , 2018 Rocklake Manor, Lake Mills City Hall, Lake Mills, WI June 13 th , Riverview Manor, Fort Atkinson, WI June 18 th 2018, Johnson Arms Apt., Watertown, WI June 21, 2018 Riverview Commons, Watertown, WI June 25, 2018, Hawthorne Apartments, Waterloo, WI	
Number of Participants or Respondents: St. Johns’s Lutheran Church, 9 Jefferson Senior Center and 7 at Rivercrest Apartments 12 Fort Atkinson Senior Center, 24 Watertown Senior Center 19 Rocklake Manor 15 Riverview Manor 2 Johnson Arms Apt 15 River View Commons 10 Hawthorne Apartments	
Key Issues Discussed: Affordable Transportation options, van service to help with shopping Loneliness, health, keeping mobility Money, finances,	
Key Takeaways/Findings: Many residents shared that they are concerned that their financial affairs are not going to make it through how much they will need in the future. Medical bills and insurance is too expensive, medications are expensive. Social Security raises your amount a little then takes out 3 months of premiums. Seniors are having a very difficult time with technology, using older models of phones as they were able to get for \$1 with a 2 year plan but now phones do not keep up and now cost \$500 or more to replace. Many people miss the store coupons that used to come in the newspapers, they don’t anymore. That helped with finances. Many people shared concerns of being lonely or poor health, having a difficult time managing emotional	

wellbeing. Some of the conversations with people, they feel stuck. They are now living in a little apartment, and they can't believe what they are paying for rent, it is more than their house payments were but they couldn't keep up with their home, so sold it, or some lost their homes to foreclosures.

Any Planned Response?

Working through our transportation plan at the same time of aging plan – looking at ways to help with mobility and meeting peoples need for shopping and errands.

We may need to revitalize some programs that stopped due to lack of participants.

Technology, Healthy Aging and transportation were the number one areas that people wanted to learn about.

Public Input unofficial question ~

A noteworthy response from many people when asked if they would be willing to come to a public hearing to review the findings of all the survey questions, most answered no. They may consider attending a discussion if at their apartment complex.

Public Input Report

Complete one worksheet for each separate method of public input used. i.e. 12 interviews conducted can be compiled on one sheet.

Your County or Tribe: Jefferson County	Your Name and Email: Sharon Olson, Sharono@jeffersoncountywi.gov
Type of Public Input: <input type="checkbox"/> Community Forum or Listening Session <input type="checkbox"/> Focus Group Discussions <input checked="" type="checkbox"/> Structured Interviews (with individuals) <input type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): _____	
Date/s of Event or Effort: ADRC Advisory Committee members	
Number of Participants or Respondents: 12 replies	
Key Issues Discussed: Services or events offered in other communities that would be helpful to senior in our community? Transportation; (4) Self-help and advocacy groups for mental heal and hearing loss. Need publicity about the issues and where help is available (not costly); A resource fair of available services in Jefferson County; A music and memory social would be cool that is specific to dementia and caregivers. Open to public too. At a park like Barrie Park; Community based memory care. I have seen memory care facilities that look like a small community/city rather than looking like a hospital or nursing home, which enables more free movement, but still employs an enclosed secure and safe environment; Although I have not experienced it, I recently read about a program in Madison started by a gourmet chef. He prepares nutritious and delicious meals for the elderly and then personally delivers. He visits with the elderly participant providing much needed and appreciated socialization.. From what I understand, he is trying to expand the idea with others who have the same passion for food and service.	
Key Takeaways/Findings: Transportation is the first most important issue facing older adults, the top three concerns is isolation/loneliness /depression, and then money/financial instability and health / ability to perform activities are pretty equal.	
Any Planned Response? Transportation: Within the transportation program, will look at availability of funds to provide other resources for transportation needs. Services that were available a few years ago but then due to not being used by the community they ended. Will need to check if services can be increased for van services to provide more shopping options.	

Date: _____ Consumer over 60 under 60

Survey for Collecting Public Information - Questions do not need to be asked in order

1. Are there services or events you have seen or heard of in other communities that you think would be helpful to seniors in our community?
2. What are some services or ideas you feel might make your community easier or more enjoyable for you to live in?
3. Have you participated at a nutrition site or received home delivered meals in the past 5 years?

If yes, pros and cons of the meals or site location:

If not, why haven't you tried the program:

4. What does healthy aging mean to you?
5. What are the three most important issues facing older adults today?
6. What are the top three concerns you have at this time?
7. Do you know of anyone struggling with caregiver responsibilities?

If so, what are some concerns shared:

8. What areas would you like to learn more about:

- | | |
|--|--|
| <input type="checkbox"/> Technology – computer, Cell phone, I pads | <input type="checkbox"/> Understanding government /policies |
| <input type="checkbox"/> Nutrition <input type="checkbox"/> Dementia capable communities | <input type="checkbox"/> Healthy Aging <input type="checkbox"/> Transportation |

Before submitting the final plan to the Area Agency on Aging (AAA), the aging unit must conduct one or more public hearings on the draft plan. Please use the [Public Hearing Report form](#) to document your public hearings and attach forms to the plan.

STATE OF WISCONSIN }
 JEFFERSON COUNTY } S S

Notice of Public Hearing

The Aging & Disability Resource Center (ADRC) of Jefferson County will be conducting four public hearings for the public to review the **2019-2021 Aging Plan** which provides supplemental funding for Senior dining, Family caregivers, Health Promotion supplemental services as well as Adult Protective Services and the **2019 85.21 Transportation Plan**, allocation of \$196,444. The **2019-2023 Coordinated Public Transit- Human Services Transportation Plan** will be available for public comment and review.

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 ADRC Manager, 1541 Annex Road, Jefferson WI 53549 or email ADRC@jeffersoncountywi.gov. The plans will be available for public inspections prior to the hearing at the ADRC between the hours of 8:00 am to 4:30 pm Monday –Friday.

Thursday, October 4, 2018 - 10:00 am
 Jefferson Senior Center
 869 Collins Road, Jefferson, WI 53549

Monday, October 8, 2018 – 10:00 am
 Fort Atkinson Senior Center
 307 Robert Street, Fort Atkinson, WI 53538


Monday, October 8, 2018 – 5:00 pm
 ADRC of Jefferson County
 1541 Annex Road, Jefferson, WI 53549

Friday, October 12, 2018 – 1:00 pm
 Watertown Senior & Community Center
 514 S. First Street, Watertown, WI 53094

Persons with a disability that require special accommodation wishing to attend the hearing should contact Sharon Olson at 920-674-8139 prior to October 1. The location of the hearing is accessible to person with disabilities.

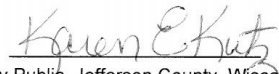
WNAXLP

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 once in each week for the period of 2 successive weeks, the first publication being on the 26th day of September, A.D. 2018, and the last on the 2nd day of October, A.D. 2018.



 Brian V. Knox

Subscribed and sworn to before me this 16th day of October, A.D. 2018.



 Notary Public, Jefferson County, Wisconsin
 My commission expires: 08-01-21



2019-2021 Aging Unit Plan - Summary of Public Hearing Comments

Comments received at public hearings must be recorded in written or recorded format. A written summary of the comments received at public hearings must be included in the plan. The aging unit must also indicate changes that were made to the plan as a result of the comments received at public hearings. Please note the public hearing process takes place after the draft plan is written and is separate from the public input process that takes place before the writing of the plan.

Public Hearing 1

County or Tribe: Jefferson	Date of Hearing: 10/4/2018 10:00 am
Location: Jefferson Senior Center	Number of Attendees: 3
Summary of Comments: (bullet points are fine and names are not required)	
<p>Suggestions from the attendees were to address how to get information out to the public. Allt here responded that they did not see the public notice as they do not get the newspaper, due to cost and content.</p> <p>Suggestions received:</p> <p>Information on the ADRC and Aging Programs should be mailed out to everyone.</p> <ul style="list-style-type: none"> • Mass mailing of brochures to every household in Jefferson County by using the phone book. • Include information when the county sends out property tax forms • Ask the hospital to include the brochure in one or two of their mailings as info is sent to every patient and resident in Jefferson County and surrounding areas <p>One person needed to leave early due to an appointment. The other citizens stated that they thought the goals in the plan were good ones to have.</p>	
Was the draft plan altered as a result? (provide a brief note on any revisions made)	
No, alterations to the plan.	

Public Hearing 2

County or Tribe: Jefferson	Date of Hearing: October 8, 2018 10:00 am
Location: Fort Atkinson Senior Center	Number of Attendees: 1
Summary of Comments: (bullet points are fine and names are not required)	
<p>Jane Mullins from GWAAR was in attendance at this hearing. No one showed at the start of the public hearing. One person showed up a half hour later requesting a copy of the Aging Plan and Transportation Plan. She is the manager of an apartment complex that I presented our Aging and Transportation plans to the residents the previous week, which she missed the meeting.</p> <p>No plan updates or comments.</p>	

Was the draft plan altered as a result? (provide a brief note on any revisions made including referencing section revised)

No alterations for the plan

Public Hearing 3

County or Tribe: Jefferson	Date of Hearing: October 8, 2018 5:00pm
Location: ADRC of Jefferson County	Number of Attendees: 0
Summary of Comments: (bullet points are fine and names are not required) No one attended.	
Was the draft plan altered as a result? (provide a brief note on any revisions made including referencing section revised)	

Public Hearing 4

County or Tribe: Jefferson	Date of Hearing: 10/12/2018 1:00 PM
Location: Watertown Senior Center	Number of Attendees: 2
Summary of Comments: (bullet points are fine and names are not required) One attendee was interested in what services would be available to her as she is the caregiver for her husband who has dementia. The other attendee was interested in learning about the Aging and Transportation Plan as she never knew that this was review and saw it in the paper. No specific comments on either of the plans, but shred that it is good information to have and does not know why other people do not attend these types of events.	
How was draft plan altered as a result? (provide a brief note on any revisions made including referencing section revised) No alterations to the plan.	

6. Goals for the Plan Period

Progress notes to be completed during self-assessment process.

Aging Unit Plan Goals <i>(write at least one goal per focus area per year - add extra boxes as needed – put cursor to the left of the box and click the + sign)</i>	Progress Notes <i>(briefly summarize only those activities completed as of Dec. of each year)</i>	check if completed		
		2019	2020	2021
Focus Area 6-A. Advocacy Related Activities				
6.A.1 By 12/31/2019, in promotion of citizen involvement and advocacy concerning aging issues, a goal is to present at four resident meetings in at least two apartment complexes to provide training to older adults in practical skills that will enable them to take an active part in advocating for the services and programs that may affect them and to improve their understanding of local and national government policies. Our goal would be to recruit 10 individuals from the apartment complexes to provide opportunities in building skills in making informed decisions regarding programs/services and advocating for their community needs.	2019 Quarterly meeting at the Hawthorne Apartments in Waterloo, during the resident council meetings. Great turnout of residents from 13-22 participating. Presented at Riverview Manor in Fort Atkinson, and had a good turn out of 12 residents. Unfortunately, they do not want to start resident meetings at this time, will try again in 2020. They had set up a date at Rockwell Apartments, but no one showed up.	X		
6.A.2. By 12/31/2020, Partner with the GWAAR Advocacy staff to provide training to 20 individuals for Senior Awareness Day. Workshops for older adults and caregivers to include motivational speakers, films and presentations to help inspire advocacy and esteem. Participants will engage in advocacy workshops and improve communications with local, state and national community leaders. A goal would be for 10 program graduates to attend WAAN’s Advocacy Day in Madison.	2020 This goal will be revised: By 12/31/2020, Partner with the GWAAR Advocacy staff to provide training to 10 ADRC Patrons.			
6.A.3. By 12/31/2021, invite local legislative representation to a Meet and Greet Your Legislator. This will give people the opportunity to meet and discuss their issues and concerns in person with legislatures. Our goal will be to recruit 20 individuals.				

Focus Area 6-B. The Elder Nutrition Program				
<p>6. B. 1. By the end of 2019, the Nutrition Program will open a restaurant model dining site in one rural community and achieve participation of 12 participants on an average day. If successful, this model will be duplicated in other identified rural areas at least 1 per year for 2020 and 2021.</p>	<p>2019 Due to staff time restrictions this did not get done. Sharon said they will work on this in 2020</p> <p>2020. Maintain goal for program working with new Nutrition Program Supervisor.</p>	no		
<p>6. B. 2. The Nutrition Program will secure two shelf-stable meals in the event of inclement weather for 131 home delivered meal participants and 275 congregate participants for a total of 812 emergency meals. This will be achieved by reaching out to local businesses for contributions. Then distributing the meals through either picking-it up at the meal site or home delivered meal drivers. The goal is to have two meals secured and distributed for all active participants by 12/31/2019.</p>	<p>2019 - Changed goal to 2020 due to staff resignation.</p> <p>2020. Maintain as a goal for program working with new Nutrition Program Supervisor.</p>	no		
<p>6. B. 3. To increase community interactions for program participants, outreach to community providers (Girls and Boy Scouts, 4 H, Adopt a grandparent) to complete service learning projects will be completed via mailings, emails, and/or face to face with community group leaders. These service learning projects may be activities such as decorating placemats to be distributed to congregate meal sites for participants, writing holiday/seasonal cards to be distributed to congregate and home delivered meal participants, or creating holiday/seasonal décor to be distributed to home delivered participants or to be displayed at the congregate meal sites during the appropriate holiday season. By 12/31/2020, community groups will create a minimum of 25 placemats/decorations/cards or other projects agreed upon per month for a total of 12 service learning projects for the year for Jefferson county nutrition program participants. If successful, 12 new service learning projects will be completed by community groups in 2021.</p>	<p>2020 Goal has been met. Placemats from 4H group in January, February, and March. On hold for a couple months due to Congregate Sites closing due to Covid. Quilt club donated 120 quilted placemats for hdm participants during COVID.</p>		X	
<p>6. B. 4. To increase rural nutrition program participation, the aging unit will educate rural residents about meals programs and ways of obtaining food and groceries by: 1. Noting additional external resources available (i.e. grocery delivery through</p>	<p>2020 Goal accomplished for the resource guide, delivered at over 30 locations, in papers and Facebook due to COVID.</p>		X	

<p>stores) to the current resources guide currently provided.</p> <p>2. Then, providing resources guides to 30 local businesses that will allow them to be displayed such as doctor’s offices, grocery stores, etc. As well as displaying and distributing them at the ADRC.</p> <p>3. By educating rural residents about services available, we hope to achieve an increase in meal delivery volunteers by an addition of 8 more volunteers through Increasing community awareness of the program and volunteer opportunities to service new rural participants.</p> <p>Objectives are to be accomplished by 12/31/2021 to meet and end goal of increasing rural program participation by 5% of the current quarterly total participation rate of 406 consumers.</p>				
<p>Focus Area 6-C. Services in Support of Caregivers</p>				
<p>6.C.1 Many of the caregivers from the Caregiver needs assessment, identified stress as a concern, not getting enough help, not getting enough quiet time, and a few shared they need more sleep. In order to reduce stress for caregivers, and empower caregivers in providing their best care and to make informed decisions, there will be two Powerful Tools for Caregiver workshops conducted in 2019. The goal would be to have 16 caregivers complete the Powerful Tools for Caregiver workshop.</p>	<p>One workshop was completed for Powerful Tools for caregivers in 2019 as a new staff person needed to be trained. The staff person trained in 2018 retired. 12 people registered.</p> <p>Two classes are scheduled for 2020. 2020 -</p>	<p>X</p>		
<p>6. C. 2. Of the 34 Caregiver needs assessments completed in 2018, 21 caregivers shared that they did not have a crisis plan or Plan B. In order to strengthen caregivers and support their need of crisis planning, an Emergency Kit/folder with resources and tools will be created and distributed to all caregivers who are participants of the NFCSP and AFCSP program as well as those that are on the wait list for these programs. Caregivers will be invited to provide input in at least two meetings on the product and to test the usefulness of the kits. The goal will then to distribute 40 kits/folders to caregivers in 2020 and an additional 40 kits in 2021 to caregivers who may not be on a program.</p>	<p>2020 Working on this goal with Family Caregiver Specialist.</p>			

<p>6. C. 3. In 2017, a Caregiver Resource Fair in was held and 3 caregiver attended. To provide caregiver training and educational resources to family caregivers to strengthen family capacity to provide care, a goal for 2019, 2020, and 2021 is to increase caregiver participation in a Caregiver Conference. Goal for 2019 is to get 10 participants, 2020 – 20 participants and 2021 – 40 participants.</p>	<p>In 2019, the ADRC held a caregiver month of activities. A total of 91 participants attended a variety of activities from Caregiver Pizza night, to caregiver presentations. In 2020, goal revised due to cancelling fall event. Monday Morning Coffee hour through Zoom with collaboration with other counties started in April and continues during COVID.</p>	<p>X</p>	<p>X modi fied</p>	
<p>Focus Area 6-D. Services to People with Dementia</p>				
<p>6.D.1 Work with community partners to open one Memory Café in Jefferson County in 2019, 2020 and 2021.</p>	<p>In 2019, added the Fort Atkinson Library and re-opened a memory café. In 2020, goal modified due to COVID, one virtual Memory Café started. All sites closed.</p>	<p>X</p>		
<p>6.D.2 To increase awareness of the business-friendly community, the goal is to target outreach efforts to those organizations that have not received dementia training. Training will be offered to 2 businesses each year as well as support individuals who have taken the Dementia Friends training to offer support and outreach. This will be an annual goal for 2019, 2020 and 2021.</p>	<p>2019 Dementia Friends training in March and 33 participants of the YOST Program Badger Bank 4 locations. and Watertown Public Health Department. Dementia Care Specialist has worked well with partners. In 2020, this goal has been met. Hometown Pharmacy and Lake Mills Optical have been trained. A virtual training for County-City Credit Union scheduled for Sept.</p>	<p>X</p>	<p>X</p>	
<p>6.D.3. To provide early diagnostic of memory loss, the number of memory screens for each year will exceed the previous year by 10%. Memory screen clinics will be conducted through-out Jefferson County. In 2016, the Dementia Care Specialist and I & A staff completed 45 memory screens, in 2017 95 screens were completed. The annual goal will be to increase by 10 additional screens per year for 2019 would be 10 additional screens (105), 2020 would be 116 screens , and for 2021 129 screens.</p>	<p>2019 This goal has been met with 117 Memory Screens completed. There were 10 Memory Screening events held at different locations throughout the county. 2020 This goal is on hold due to COVID.</p>	<p>X</p>		
<p>Focus Area 6-E. Healthy Aging</p>				

<p>6. E. 1. The ADRC will sponsor a Fall’s prevention initiative. Staff will be trained to provide the “Stepping On” evidence-based falls prevention series of workshops to conduct 2 workshops by December 31 of each year 2019, 2020, and 2021. Goal would be 20 participants in 2019, 30 in 2020 and 40 for 2021.</p>	<p>2019 One class was completed. The second class will need to carry over into 2020 as the staff person trained for Stepping On, resigned before the last class. First session had 12 participants and the second session had 11 participants 2020 This goal is on hold due to COVID and no staff are trained at this time.</p>	<p>X</p>		
<p>6. E. 2. The ADRC will work on a Fall Prevention goal of reducing falls among older adults, by implementing a community input EMS intervention. The goal would be for the local EMS to refer 2 consumers a month to the ADRC for information and fall prevention services.</p>	<p>2019 Met, working with local EMS</p>	<p>X</p>		
<p>6. E. 3. To maximize the integration of person-centered philosophy in our service delivery, the Dementia Care staff will receive REACH II training and provide two workshops by the end of 2019. Two workshops will be completed in 2020 (10 participants) and 2021, with an additional 10 participants.</p>	<p>2019 This goal is modified due to staff changes. DCS staff is trained in Dementia Live to offer a person centered experience of living with dementia. In 2019, 71 people participated. 2020, This goal is has been revised to refer 10 caregivers to the Trualta is an online portal that helps caregivers develop skills and find local resources, all from the comfort and safety of home.</p>	<p>X</p>		
<p>6. E. 4. To expand access to, and increase participation in evidence-based health promotion and disease prevention programs, a goal is to increase the number of those who participate in evidenced based health promotion programs by increasing leadership availability to provide Living Well with Chronic Condition/Diabetes and Pain Self- management classes. At this time, the ADRC has two trained leaders for LSWCC, by the end of 2020, our goal is to have two more trained LWCC/D/Pain self- management leaders to provide 2 workshops each year with 10 participants for each class.</p>	<p>Staff were trained as facilitators in 2019 and conducted two classes. First class had 8 participants and the second class had 4. (HOW MANY ATTENDED?) 2020 - Classes are on hold due to COVID although working on staff training for virtual class.</p>	<p>X</p>		
<p>Focus Area 6-F. Local Priorities</p>				

<p>6. F. 1. The Elder Benefit Specialist will create a condensed presentation of Puzzled about Medicare and present at two community settings such as an apartment complex, library or community center in 2019 to inform Medicare Beneficiaries about benefits and promote wellness by providing information on LIS – Low-Income Subsidy and MSP – Medicare Savings Programs. The goal will be to present to 10 residents at each location.</p>	<p>Completed – This goal was completed by creating a condensed, very basic overview of Medicare and the different parts. It was presented at Rockwell Court apartments 10, Watertown Senior Center (28 participants), Waterloo Library ? and Lake Mills Library?.</p>	<p>X</p>		
<p>6. F. 2. Promote the Sip and Swipe program that is available at community locations. Many survey recipients are interested to learn more about technology such as computer, I-pads and cell phones. Many respondents reported isolation and loneliness so the ability to connect them to a social network and applications may be resourceful. Many mindfulness programs are free and available on the computer, iPad and cell phone. Goal is to have 50 participants enrolled in the My Strength App in 2019, 100 by 2020.</p>	<p>2019 UPDATE - Sip and swipe started at Waterloo Library. Offered at the Jefferson Senior Center. Goal was not met for 50 participants enrolling into My Strength. For 2019 the ADRC had 14 as of August. Application change to incorporated all enrollees into the Jefferson County APP.</p> <p>2020 Still promoting the My Strength app, but due to changes in application, no longer able to track # per department.</p>	<p>½ goal met</p>		
<p>6. F. 3. To promote Elder Abuse Awareness, the Adult Protective Services staff will offer presentations on scams, guardianship roles and responsibilities, and Prevention on Elder Abuse. The plan would be to conduct 2 presentations a year: a guardianship presentation in the spring and prevention program in the fall and have 10 for attendance at each presentation. Participants will be surveyed for effectiveness of the presentation materials.</p>	<p>2019 UPDATE Two presentations scheduled in 2019. The spring presentation had 10 attendees, the winter presentation was cancelled due to no participants.</p> <p>2020 Modified for 1 presentation for 2020. Had a presentation scheduled in March that was cancelled due to COVID. Will scheduled another presentation virtually in Fall of 2020.</p>	<p>X</p>		
<p>6. F. 4. Columbia 211 Suicide training for all ADRC staff including Nutrition site managers, nutrition volunteers and volunteer drivers as well as patrons of the senior programs. In 2019, our goal will be to train 200 people and increase this incentive by 10 % a year.</p>	<p>2019 UPDATE - Edited to provide Mental Health First Aide training. Trainer needed to cancel. Staff is no longer certified in this training.</p> <p>2020 Will modify goal as session planning was</p>	<p>no</p>		

	cancelled for Waterloo Library session due to closure and Covid. Will modify for 2020 as this is the opportune time for this type of training due to COVID and loneliness.			
6. F. 5. To expand training and education opportunities to the aging network of the unique need of the aging lesbian, gay, bisexual, transgender, queer (LGBTQ) community, a goal will be to conduct a least one provider training annually: 2019, 2020 and 2021.	2019 UPDATE Worked with Rainbow Hospice to offer to Community Care Alliance. This was offered to members. 2020 – ADRC staff participated in training from Alzheimer’s Association. Information on LGBTQ was shared with other community providers. Unknown if other participated.	X	X	

For Assessment Only (2019 not needed here as Jane Mahoney sent out survey on NFCSP)

2020 -

Part IV: Progress on the Aging Unit Plan for Serving Older People – National Family Caregiver Support Program (NFCSP)		
<i>This section is not required for tribal aging units.</i>		
Minimum Service Requirements: <i>The minimum service requirements of NFCSP must be provided by the aging unit or contracted with another agency. Please indicate who provides these services.</i>		
Service	Aging Unit (X)	Other Agency (please list)
Information to caregivers about available services	X	
Assistance to caregivers in gaining access to the services	X	
Individual counseling, support groups, and training to caregivers	X	
Respite care	X	
Supplemental services (e.g., transportation, assistive devices, home modifications, adaptive aids, emergency response systems, supplies, etc.)	X	

Caregiver Coordination: *To ensure coordination of caregiver services in the county, the aging unit shall convene or be a member of a local family-caregiver coalition or coordinating committee with other local providers who currently provide support services to family caregivers.*

Does the aging unit belong to a local caregiver coalition?

YES NO

Name of Coalition: Dementia Friendly Community Network

If YES, please provide a brief update on coalition activities conducted each year.

If NO, please explain plan for compliance.

2019 Activities:

Dementia Friendly Community Network

In Jefferson County we created a Caregiver Month of Activities that approximately 93 participants attended at a variety of events/presentations.

2020 Activities: New Position filled for a Family Caregiver Support Specialist (pt)

Plan on hold for Caregiver Fall 2020 Conference due to COVID. Caregiver Coffee Hour on Mondays that is Virtual since April 2020. Working on The Hummingbird Project, Truilta, and Caregiver Book review projects for 2020. Working on offering the Grandpa and Lucy Program.

2021 Activities:

7. Coordination Between Titles III and VI

If the county includes part or all of a federally recognized tribe or is home to a significant population of tribal members, describe how the County and Tribal aging units will work together to coordinate and ensure the provision of services to tribal elders. Provide a narrative describing collaboration efforts and goals for each year of the plan.

Progress notes to be completed during self-assessment process.

Provide goals for each year of the plan.	Progress Notes	2019	2020	2021
Not applicable				

9. Compliance with Federal and State Laws and Regulations

On behalf of the county, we certify

Aging and Disability Resource Center of Jefferson County
(Give the full name of the county aging unit)

has reviewed the appendix to the county plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 2019-2021. 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 2019-2021.

Russell Katz, ADRC Advisory Committee Chair 10-2-2018
Signature and Title of the Chairperson of the Commission on Aging Date

Jim Mole, Human Services Bd, Chair 10/8/18
Signature and Title of the Authorized County Board Representative Date

10. Assurances

The applicant certifies compliance with the following regulations:

1. Legal Authority of the Applicant

- The applicant must possess legal authority to apply for the grant.
- A resolution, motion or similar action must be duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein.
- This resolution, motion or similar action must direct and authorize the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.

2. Outreach, Training, Coordination, & Public Information

- The applicant must assure that outreach activities are conducted to ensure the participation of eligible older persons in all funded services as required by the Bureau of Aging and Disability Resources designated area agency on aging.
- The applicant must assure that each service provider trains and uses elderly persons and other volunteers and paid personnel as required by the Bureau of Aging and Disability Resources designated area agency on aging.
- The applicant must assure that each service provider coordinates with other service providers, including senior centers and the nutrition program, in the planning and service area as required by the Bureau of Aging and Disability Resources designated area agency on aging.
- The applicant must assure that public information activities are conducted to ensure the participation of eligible older persons in all funded services as required by the Bureau of Aging and Disability Resources designated area agency on aging.

3. Preference for Older People with Greatest Social and Economic Need

The applicant must assure that all service providers follow priorities set by the Bureau of Aging and Disability Resources designated area agency on aging for serving older people with greatest social and economic need.

4. Advisory Role to Service Providers of Older Persons

The applicant must assure that each service provider utilizes procedures for obtaining the views of participants about the services they receive.

5. Contributions for Services

- The applicant shall assure that agencies providing services supported with Older Americans Act and state aging funds shall give older adults a free and voluntary

opportunity to contribute to the costs of services consistent with the Older Americans Act regulations.

- Each older recipient shall determine what he/she is able to contribute toward the cost of the service. No older adult shall be denied a service because he/she will not or cannot contribute to the cost of such service.
- The applicant shall provide that the methods of receiving contributions from individuals by the agencies providing services under the county/tribal plan shall be handled in a manner that assures the confidentiality of the individual's contributions.
- The applicant must assure that each service provider establishes appropriate procedures to safeguard and account for all contributions.
- The applicant must assure that each service provider considers and reports the contributions made by older people as program income. All program income must be used to expand the size or scope of the funded program that generated the income. Nutrition service providers must use all contributions to expand the nutrition services. Program income must be spent within the contract period that it is generated.

6. Confidentiality

- The applicant shall ensure that no information about, or obtained from an individual and in possession of an agency providing services to such individual under the county/tribal or area plan, shall be disclosed in a form identifiable with the individual, unless the individual provides his/her written informed consent to such disclosure.
- Lists of older adults compiled in establishing and maintaining information and referral sources shall be used solely for the purpose of providing social services and only with the informed consent of each person on the list.
- In order that the privacy of each participant in aging programs is in no way abridged, the confidentiality of all participant data gathered and maintained by the State Agency, the Area Agency, the county or tribal aging agency, and any other agency, organization, or individual providing services under the State, area, county, or tribal plan, shall be safeguarded by specific policies.
- Each participant from whom personal information is obtained shall be made aware of his or her rights to:
 - (a) Have full access to any information about one's self which is being kept on file;
 - (b) Be informed about the uses made of the information about him or her, including the identity of all persons and agencies involved and any known consequences for providing such data; and,
 - (c) Be able to contest the accuracy, completeness, pertinence, and necessity of information being retained about one's self and be assured that such information, when incorrect, will be corrected or amended on request.

- All information gathered and maintained on participants under the area, county or tribal plan shall be accurate, complete, and timely and shall be legitimately necessary for determining an individual's need and/or eligibility for services and other benefits.
- No information about, or obtained from, an individual participant shall be disclosed in any form identifiable with the individual to any person outside the agency or program involved without the informed consent of the participant or his/her legal representative, except:
 - (a) By court order; or,
 - (b) When securing client-requested services, benefits, or rights.
- The lists of older persons receiving services under any programs funded through the State Agency shall be used solely for the purpose of providing said services, and can only be released with the informed consent of each individual on the list.
- All paid and volunteer staff members providing services or conducting other activities under the area plan shall be informed of and agree to:
 - (a) Their responsibility to maintain the confidentiality of any client-related information learned through the execution of their duties. Such information shall not be discussed except in a professional setting as required for the delivery of service or the conduct of other essential activities under the area plan; and,
 - (b) All policies and procedures adopted by the State and Area Agency to safeguard confidentiality of participant information, including those delineated in these rules.
- Appropriate precautions shall be taken to protect the safety of all files, microfiche, computer tapes and records in any location which contain sensitive information on individuals receiving services under the State or area plan. This includes but is not limited to assuring registration forms containing personal information are stored in a secure, locked drawer when not in use.

7. Records and Reports

- The applicant shall keep records and make reports in such form and requiring such information as may be required by the Bureau of Aging and Disability Resources and in accordance with guidelines issued solely by the Bureau of Aging and Disability Resources and the Administration on Aging.
- The applicant shall maintain accounts and documents which will enable an accurate review to be made at any time of the status of all funds which it has been granted by the Bureau of Aging and Disability Resources through its designated area agency on aging. This includes both the disposition of all monies received and the nature of all charges claimed against such funds.

8. Licensure and Standards Requirements

- The applicant shall assure that where state or local public jurisdiction requires licensure for the provision of services, agencies providing services under the county/tribal or area plan shall be licensed or shall meet the requirements for licensure.
- The applicant is cognizant of and must agree to operate the program fully in conformance with all applicable state and local standards, including the fire, health, safety and sanitation standards, prescribed in law or regulation.

9. Civil Rights

- The applicant shall comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with that act, no person shall on the basis of race, color, or national origin, be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any program or activity under this plan.
- All grants, sub-grants, contracts or other agents receiving funds under this plan are subject to compliance with the regulation stated in 9 above.
- The applicant shall develop and continue to maintain written procedures which specify how the agency will conduct the activities under its plan to assure compliance with Title VI of the Civil Rights Act.
- The applicant shall comply with Title VI of the Civil Rights Act (42 USC 2000d) prohibiting employment discrimination where (1) the primary purpose of a grant is to provide employment or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the service funded by the grant.
- All recipients of funds through the county/tribal or area plan shall operate each program or activity so that, when viewed in its entirety, the program or activity is accessible to and usable by handicapped adults as required in the Architectural Barriers Act of 1968.

10. Uniform Relocation Assistance and Real Property Acquisition Act of 1970

The applicant shall comply with requirements of the provisions of the Uniform Relocation and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of federal and federally assisted programs.

11. Political Activity of Employees

The applicant shall comply with the provisions of the Hatch Act (5 U.S.C. Sections 7321-7326), which limit the political activity of employees who work in federally funded programs. [Information about the Hatch Act is available from the U.S. Office of Special Counsel at <http://www.osc.gov/>]

12. Fair Labor Standards Act

The applicant shall comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (Title 29, United States Code, Section 201-219), as they apply to hospital and educational institution employees of state and local governments.

13. Private Gain

The applicant shall establish safeguards to prohibit employees from using their positions for a purpose that is or appears to be motivated by a desire for private gain for themselves or others (particularly those with whom they have family, business or other ties).

14. Assessment and Examination of Records

- The applicant shall give the Federal agencies, State agencies and the Bureau of Aging and Disability Resources authorized Area Agencies on Aging access to and the right to examine all records, books, papers or documents related to the grant.
- The applicant must agree to cooperate and assist in any efforts undertaken by the grantor agency, or the Administration on aging, to evaluate the effectiveness, feasibility, and costs of the project.
- The applicant must agree to conduct regular on-site assessments of each service provider receiving funds through a contract with the applicant under the county or tribal plan.

15. Maintenance of Non-Federal Funding

- The applicant assures that the aging unit, and each service provider, shall not use Older Americans Act or state aging funds to supplant other federal, state or local funds.
- The applicant must assure that each service provider must continue or initiate efforts to obtain funds from private sources and other public organizations for each service funded under the county or tribal plan.

16. Regulations of Grantor Agency

The applicant shall comply with all requirements imposed by the Department of Health and Family Services, Division of Supportive Living, Bureau of Aging and Disability Resources concerning special requirements of federal and state law, program and fiscal requirements, and other administrative requirements.

17. Older Americans Act

The applicant shall comply with all requirements of the Older Americans Act (PL 89-73).

18. Federal Regulations

The applicant shall comply with all federal regulations (45 CFR 1321) governing Older Americans Act funds and programs.

19. Wisconsin Elders Act

The aging unit must comply with the provisions of the Wisconsin Elders Act.

Wisconsin Statutes Chapter 46.82 Aging unit.

“Aging unit” means an aging unit director and necessary personnel, directed by a county or tribal commission on aging and organized as one of the following:

- (1) An agency of county or tribal government with the primary purpose of administering programs of services for older individuals of the county or tribe.
- (2) A unit, within a county department under s. 46.215, 46.22
- (3) or 46.23, with the primary purpose of administering programs of and services for older individuals of the county
- (4) A private corporation that is organized under ch. 181 and
- (5) that is a nonprofit corporation, as defined in s. 181.0103 (17).

Aging Unit; Creation. A county board of supervisors of a county, the county boards of supervisors of 2 or more contiguous counties or an elected tribal governing body of a federally recognized American Indian tribe or band in this state may choose to administer, at the county or tribal level, programs for older individuals that are funded under 42 USC 3001 to 3057n, 42 USC 5001 and 42 USC 5011 (b). If this is done, the county board or boards of supervisors or tribal governing body shall establish by resolution a county or tribal aging unit to provide the services required under this section. If a county board of supervisors or a tribal governing body chooses, or the county boards of supervisors of 2 or more contiguous counties choose, not to administer the programs for older individuals, the department shall direct the area agency on aging that serves the relevant area to contract with a private, nonprofit corporation to provide for the county, tribe or counties the services required under this section.

Aging Unit; Powers and Duties. In accordance with state statutes, rules promulgated by the department and relevant provisions of 42 USC 3001 to 3057n and as directed by the county or tribal commission on aging, an aging unit:

(a) **Duties.** Shall do all of the following:

1. Work to ensure that all older individuals, regardless of income, have access to information, services and opportunities available through the county or tribal aging unit and have the opportunity to contribute to the cost of services and that the services and

resources of the county or tribal aging unit are designed to reach those in greatest social and economic need.

2. Plan for, receive and administer federal, state and county, city, town or village funds allocated under the state and area plan on aging to the county or tribal aging unit and any gifts, grants or payments received by the county or tribal aging unit, for the purposes for which allocated or made.
3. Provide a visible and accessible point of contact for individuals to obtain accurate and comprehensive information about public and private resources available in the community which can meet the needs of older individuals.
4. As specified under s. 46.81, provide older individuals with services of benefit specialists or appropriate referrals for assistance.
5. Organize and administer congregate programs, which shall include a nutrition program and may include one or more senior centers or adult day care or respite care programs, that enable older individuals and their families to secure a variety of services, including nutrition, daytime care, educational or volunteer opportunities, job skills preparation and information on health promotion, consumer affairs and civic participation.
6. Work to secure a countywide or tribal transportation system that makes community programs and opportunities accessible to, and meets the basic needs of, older individuals.
7. Work to ensure that programs and services for older individuals are available to homebound, disabled and non-English speaking persons, and to racial, ethnic and religious minorities.
8. Identify and publicize gaps in services needed by older individuals and provide leadership in developing services and programs, including recruitment and training of volunteers, that address those needs.
9. Work cooperatively with other organizations to enable their services to function effectively for older individuals.
10. Actively incorporate and promote the participation of older individuals in the preparation of a county or tribal comprehensive plan for aging resources that identifies needs, goals, activities and county or tribal resources for older individuals.
11. Provide information to the public about the aging experience and about resources for and within the aging population.
12. Assist in representing needs, views and concerns of older individuals in local decision making and assist older individuals in expressing their views to elected officials and providers of services.
13. If designated under s. 46.27 (3) (b) 6., administer the long-term support community options program.
14. If the department is so requested by the county board of supervisors, administer the pilot projects for home and community-based long-term support services under s. 46.271.
15. If designated under s. 46.90 (2), administer the elder abuse reporting system under s. 46.90.
16. If designated under s. 46.87 (3) (c), administer the Alzheimer's disease family and caregiver support program under s. 46.87.

17. If designated by the county or in accordance with a contract with the department, operate the specialized transportation assistance program for a county under s. 85.21.

18. Advocate on behalf of older individuals to assist in enabling them to meet their basic needs.

19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate the resource center.

20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.284 (1) (a) 1., apply to the department to operate a care management organization under s. 46.284 and, if the department contracts with the county under s. 46.284 (2), operate the care management organization and, if appropriate, place funds in a risk reserve.

(b) Powers. May perform any other general functions necessary to administer services for older individuals.

(4) Commission On Aging.

(a) Appointment.

1. Except as provided under sub. 2., the county board of supervisors in a county that has established a single-county aging unit, the county boards of supervisors in counties that have established a multicounty aging unit or the elected tribal governing body of a federally recognized American Indian tribe or band that has established a tribal aging unit shall, before qualification under this section, appoint a governing and policy-making body to be known as the commission on aging.

2. In any county that has a county executive or county administrator and that has established a single-county aging unit, the county executive or county administrator shall appoint, subject to confirmation by the county board of supervisors, the commission on aging. A member of a commission on aging appointed under this subdivision may be removed by the county executive or county administrator for cause.

(b) Composition.

A commission on aging, appointed under par. (a) shall be one of the following:

1. For an aging unit that is described in sub. (1) (a) 1. or 2., organized as a committee of the county board of supervisors, composed of supervisors and, beginning January 1, 1993, advised by an advisory committee, appointed by the county board. 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.

2. For an aging unit that is described in sub. (1) (a) 1. or 2., 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 sub. (1) (a) 3., 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.

(c) Terms.

Members of a county or tribal commission on aging shall serve for terms of 3 years, so arranged that, as nearly as practicable, the terms of one-third of the members shall expire each year, and no member may serve more than 2 consecutive 3-year terms. Vacancies shall be filled in the same manner as the original appointments. A county or tribal commission on aging member appointed under par. (a) 1. may be removed from office for cause by a two-thirds vote of each county board of supervisors or tribal governing body participating in the appointment, on due notice in writing and hearing of the charges against the member.

(c) Powers and duties.

A county or tribal commission on aging appointed under sub. (4) (a) shall, in addition to any other powers or duties established by state law, plan and develop administrative and program policies, in accordance with state law and within limits established by the department of health and family services, if any, for programs in the county or for the tribe or band that are funded by the federal or state government for administration by the aging unit. Policy decisions not reserved by statute for the department of health and family services may be delegated by the secretary to the county or tribal commission on aging. The county or tribal commission on aging shall direct the aging unit with respect to the powers and duties of the aging unit under sub. (3).

(5) Aging Unit Director; Appointment. A full-time aging unit director shall be appointed on the basis of recognized and demonstrated interest in and knowledge of problems of older individuals, with due regard to training, experience, executive and administrative ability and general qualification and fitness for the performance of his or her duties, by one of the following:

(a) 1. For an aging unit that is described in sub. (1) (a) 1., except as provided in subd. 2., a county or tribal commission on aging shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors or the tribal governing body that participated in the appointment of the county or tribal commission on aging. 2. In any county that has a county executive or county administrator and that has established a single-county aging unit, the county executive or county administrator shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors that participated in the appointment of the county commission on aging.

(b) For an aging unit that is described in sub. (1) (a) 2., the director of the county department under s. 46.215, 46.22 or 46.23 of which the aging unit is a part shall make the appointment, subject to the personnel policies and procedures established by the county board of supervisors.

(d) For an aging unit that is described in sub. (1) (a) 3., the commission on aging under sub. (4) (b) 3. shall make the appointment, subject to ch. 181.

12. Appendices



Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, January 2, 2018

Call to Order

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

Roll Call

Present: Earlene Ronk, Chair; Connie Stengel, Russell Kutz, Marcia Bare, Ellen Sawyers

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski, ADRC Staff, Katelyn Marschall, DHS and Sandy Free, Dementia Care Specialist.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Motion to approve by Russell Kutz, second by Marcia Bare. Approved unanimously.

Approval of 12/05/2017 Minutes

Marcia Bare made a motion to approve the December 5, 2017 meeting minutes as written, Connie Stengel seconded. Motion carried 5/0.

Communications

None

Public Comment

None.

Advocacy Updates from from GWAAR – Greater Wisconsin Agency on Aging Resources and /or ORCD – Office of Resource Center Development:

- **AB-628 - Silver Alert Referral** - This modification to the Silver Alert program ensures that if a credible Silver Alert has been issued the law enforcement agency that has issued the alert for the missing adult at risk, commonly known as a “Silver Alert,” to refer the person making the report and any guardian of the missing person to a local Aging and Disability Resource Center. If the subject of such an alert was driving a vehicle when he or she was reported missing, this bill also requires the law enforcement agency to notify the Department of Transportation (DOT). If DOT receives such a notification, DOT must review the driver's license of the person to

determine if restrictions should be imposed on the person's license for the safety of the person or the public.

- **AB-629 - Uniform Adult Guardianship Jurisdiction** – Incorporates the uniform guidelines on guardianship jurisdiction into Wisconsin law with some modifications. Generally, the bill addresses court jurisdiction issues for adult guardians exercising their authority across state lines.
- **AB-630 - Dementia Specialist Certification** - Creates new opportunities for professional development through the creation of a voluntary dementia specialist certification program. Prohibits any person from using the title “dementia specialist” or “certified dementia specialist” without the certification.
- **AB-631 - Caregiver Tax Credit** – Eases the financial burden of family caregivers by creating a nonrefundable individual income tax credit for certain expenses related to caregiving. Max. credit = \$1,000.
- **AB-632 - Alzheimer’s Disease and Dementia Awareness Grants** – Allows the state Department of Health Services (DHS) to distribute up to \$500,000 in grants to community programs across the state to raise awareness for Alzheimer’s and dementia resources.

Discuss and possible action on Requests for Waiver of Transportation Co-payment:

Olson reviewed the co-payment requirement for transportation services. For consumers there is \$1.50 co-pay per trip for intercounty transportation and \$7.50 per trip for out of county transport. Many consumers have one trip.

Reviewing a person’s request for a waiver, person may have limited income, but assets are over \$2,000 which is the benchmark for Medicaid for a single person. Committee would like to work on a policy to review waivers and reductions. Olson will work on a draft for our next committee meeting.

Discussion and review of Transportation Survey

Olson distributed a copy of the 2017 Transportation Survey that was completed in October and November. Highlights: 41 Respondents -

- 68 % responded that they have difficulty reaching certain places due to lack of transportation.
- The top 3 places people need transportation 1st – Medical/Healthcare, 2nd Shopping, and 3rd is Worship
- 85% responded that Weekdays between 7 – 5 is the most time a person needed transportation services; 20% responded Sundays between 7 and 5 pm and 15% requested Saturdays between 7 and 5.

- The top three response for type of funding assistance that would help manage transportation needs: 37 %- more hours through f he Driver Escort Program; 19% - transportation vouchers and 19% a loan program to purchase or fix/repair a car.
- Many comments that consumers shared were very appreciative of the Volunteer Driver Program.

Discussion: ADRC Report:

Wondolkowski reported on the ADRC KOI for December was met; 15 of 15 LTCFS (100%) were calculated within the 14-day time frame.

The ADRC billboard sign is installed and will run for 60-days (approx. Feb 11th).

Sue Torum and Sue Konkel have concluded their role as the Dementia Care Specialist (DCS). Sandy Free (currently a Disability Benefit Specialist - DBS) has been hired to fill the DCS position. Shelly Wangerin (currently the ADRC Resource Specialist/Receptionist) was hired to fill the DBS position. Applications from internal candidates only are now being accepted through 1-2-18 to fill the Resource Receptionist position.

Advocacy: Tax Bill Updates communicated by Beth Sweeden at DHS: the U.S. Senate passed a tax cut bill on 12-1-17; the House passed its own version of the tax bill a month earlier. The bill is now on its way to the President’s desk to be signed into law. People with disabilities and their families’ advocacy made a difference as the final tax bill restores some important tax provisions for people with disabilities (see summary below). However, the final bill is projected to leave millions of Americans without health insurance, project increase premiums and deductibles for individuals, and impact health insurance for everyone. The bill also increases the federal deficit by \$1.5 trillion. Advocates are stating Congress’s next step will be to attempt massive cuts to Medicaid, Medicare and other programs.

Wondolkowski reviewed key disability provisions within the tax bill which include: the requirement for all people to have health insurance under Affordable Care Act is repealed; the Orphan drug tax credit was not eliminated, but was reduced from reimbursing 50% of qualified clinical testing expenses to 25%; the Work Opportunity Tax Credit is kept, meaning businesses will get a tax credit if they hire people with disabilities; the low-income housing tax credit—used by many people with disabilities is kept; and the ability to move money from a 529 college savings account to an ABLE account is included, but only until December 31st, 2025 (ABLE accounts are tax-advantaged savings accounts for individuals with disabilities and their families).

Senior Dining Program Updates:

Fritter stated the increase for 2018 suggested donation rate to \$4.00 was put into place for the congregate and home delivered meal participants. She discussed that the site managers

notified the congregate meal participants, and the home delivered meal participants were notified via letter.

Fritter discussed the Watertown meal site, and reminded committee members that the site began providing home delivered meals within the city of Watertown, both Jefferson and Dodge county residents in December 2017. She stated that currently two routes were for delivery, and there were currently 20 home delivered meal participants receiving meals from the Watertown meal site. The Dining Site Manager, Patti Hills has taken on the new duties that go along with providing home delivered meals seamlessly. She also stated that the Watertown groups that have been delivering meals have done a great job, and the program is grateful for their selflessness in providing meals to seniors in their community. Fritter notified the committee that there are opportunities available for volunteers in the Watertown area to help package meals.

Discussion and Review of 2017 ADRC Customer Satisfaction Surveys:

Wondolkowski explained there were 56 respondents in 2017 (an increase from only 38 respondents in 2016). The majority of consumers provided a rating of excellent or good to all survey questions on topics such as welcoming environment, care about your needs, conduct home visits in a timely fashion, etc. 100% of respondents said they would recommend the ADRC to someone else. DHS has contracted with Analytic Insight and Dr. Amy Flowers to conduct satisfaction surveys for all ADRC's the first six months of 2018 and so, ADRC staff will not distribute our own in-house survey to consumers until further notice.

Presentation on Dementia Types and Community Challenges - Katelyn Marschall, Dementia Program Grants Manager

Katelyn presented on the different types of dementia. She also shared her top community challenges: People with Dementia in crisis and how to stabilize in place; early detection and diagnosis; Health care provider's education of programs to refer.

Discussion on Draft Community Needs Survey for Aging Plan and unmet needs of the ADRC

Olson shared a Survey of Adult and Aging Populations - Committee reviewed the 29 suggested questions. One issue that needs to be added is broadband/ internet access. We will review the survey at our next meeting. The plan is to have each committee member seek out 5 community members to review the survey. Olson will be using the survey to discuss with people in apartment building, support groups in Jefferson County and have that I & A staff will be able to assist with the survey.

Discuss Future Agenda Items

At a future meeting the committee would like someone to come from the Library, I suggested to contact Angela from the Bridges Library. Some of the members did not know all the different programs that are offered.

Adjourn:

Marcia Bare made a motion to adjourn, Russ Kutz seconded. Motion approved unanimously.

Respectfully submitted,

Sharon Olson, Manager,
Aging & Disability Resources Division



Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, March 6, 2018

Call to Order

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

Roll Call

Present: Earlene Ronk, Chair; Connie Stengel, Russell Kutz, Marcia Bare, Ellen Sawyers, Carolyn Niebler, Jeanne Tyler and Mary Vohs

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski, ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Olson requested to defer item 10, Discussion and possible action on the 2017 Annual Financial Report as it is still in the fiscal department for completion. Marcia Bare made a motion to approve the March agenda with the change to defer item 10 to our next meeting. Second by Carolyn Niebler. Approved unanimously.

Approval of 1/02/2018 Minutes

Russ Kutz made a motion to approve the January 2, 2018 meeting minutes as written, Connie Stengel seconded. Motion carried.

Communications

Dominic shared a note from Dan Krause.

Public Comment

None.

Advocacy Updates from from GWAAR – Greater Wisconsin Agency on Aging Resources and /or ORCD – Office of Resource Center Development:

Senate leaders appear to have reached a two-year budget deal that would lift overall budget caps for discretionary programs and alleviate the threat of another round of sequestration cuts. Temporary funding through March 22 to allow lawmakers more time to work out a full-

year FY 2018 appropriations proposal. This deal increases overall budget caps for non-defense discretionary (NDD) programs by \$63 billion in FY 2018 (roughly a 12 percent boost) and \$68 billion in FY 2019 by amending the Budget Control Act of 2011 (BCA). The bipartisan deal would be the latest in a series of two-year changes to the BCA and would lift the too-stringent caps on discretionary programs. The patchwork package would also include emergency supplemental funding to respond to recent natural disasters. Additionally, the measure would extend a number of health care programs, including a two-year extension of funding for AAAs, ADRCs and SHIPs to provide outreach and enrollment assistance to low-income Medicare beneficiaries (MIPPA). At this point, it doesn't appear likely that the Senate bill will address immigration policy, which could prove to be a sticking point for House Democrats.

What Does a Deal Mean for Funding for Aging and Health Care Programs?

Assuming this bipartisan deal passes both chambers and is signed into law—which is still an uncertain outcome at this point—congressional appropriators would have six weeks to negotiate the details of a final FY 2018 federal funding omnibus bill. If this budget agreement passes, advocates should once again weigh in with their lawmakers about how to allocate additional funding for aging and other NDD non-defense discretionary programs in FY 2018. Preliminary details on the budget agreement indicate that roughly \$45 billion of the \$63 billion increase for NDD funding is already directed toward agreed-upon priorities. Aging advocates must continue the drumbeat to protect SHIP funding, which was slated for elimination in the House FY 2018 funding bill, as well as to increase funding for Older Americans Act programs and other essential aging and health care services.

Discuss and possible action on Requests for Waiver of Transportation Co-payment:

Olson reviewed the co-payment requirement for transportation services. For consumers there is \$1.50 co-pay per trip for intercounty transportation and \$7.50 per trip for out of county transport. Many consumers have one trip. Olson will work on a draft policy to review at our next committee meeting for reviewing waivers and reductions for co-payments. At this time there is one consumer who has not submitted their review paperwork.

Discussion on ATCI – Accessible Transportation Community Initiative Grant with the City of Fort Atkinson

The City of Fort Atkinson received a \$100,000 grant from the Easter Seals Society to improve transit options. As part of the Grant, we were required to find 30 stakeholders and invite them to a facilitated 2-day meeting to come up with a custom solution to transportation problems. It was an incredible experience working through this process and just when we thought we knew what the problem and solution would be, we identified four objective projects. So from there, we created committees to seek out viable solutions for finding ways to get everyone around a little easier as this transportation concern is not just an aging

problem or a poverty problem it is a transportation problem that affects many people. The plan is to work within these 4 committees over the next year or so, to find solutions to meet these objectives:

a) run a 6 to 12 month pilot project in Fort Atkinson where we expand on the existing United Way voucher program (which underwrites low income people's Brown Cab rides to area Food Pantries.) Left to work out is to add destinations to this and see what kind of demand we see, and what kind of cost it is likely to have on-going. This is something of a needs assessment but an active one instead of a paper-interview one.

b) implement a 12 month pilot project using one of the City's 7-seater vans with wheelchair lift at the Fort Senior Citizens Center. The City will handle registration and licensing expenses and subsidize gas purchases through the City garage. The Senior Center will be responsible for driving the van. In order to support this program long term, the Senior Center will create a fund raising plan, so as to purchase their own van, without the need for new City or grant funds. During the pilot the van will be dedicated to the Senior Center's use during their peak hours, and will be available to other groups when they are not in need of it.

c) work with the Jefferson County Aging and Disability Resource Center to capture the federal funding available to offset 80% of the costs for Jefferson County hiring a Mobility Manager. Concurrently, we will be compiling and mapping the many different transit services throughout the county already in play. We will establish a website for dispatchers and the general public that allows them to clearly input their destinations, dates, and ability to pay in order to connect them with the service providers that best can meet their needs. On-going maintenance of the website will be part of the Mobility Manager's job.

d) marketing of these programs will be marketed by the Coalition to raise awareness; reduce stigma associated with taking alternative transit; and to help the programs sustain themselves once the Easter Seals grant money is depleted.

A next meeting of the Coalition is scheduled for March 15, in the Rotary Room of the Fort Atkinson library, 2:30 - 4:00 pm. Everyone who would like to continue to see this project through to its next phase of actually designing and implementing these pilot projects, is encouraged to attend.

Discussion: ADRC Report, Wondolkowski

New 2018 KOI: Increase the number of referrals for the Family Caregiver Program by 10% or 35 referrals. In 2017, staff made 25 referrals to these programs. Expectation-ADRC staff shall complete the Caregiver needs assessment and application as part of options counseling. In doing so, staff will help consumers explore their needs and perhaps facilitate other opportunities, such as advanced directives. Funding up to 112 hours/year/recipient is available. In January, staff had options and/or I & A conversations with 13 consumers resulting in five (5) referrals to the NFCSP program. In February, staff had conversations

with 12 consumers resulting in one referral. The goal is three referrals per month. January-February totals =6 and therefore, KOI is met for reporting period.

Wisconsin Association of Health Care Quality (WHCQ) Conference : On March 2nd, Olson and Wondolkowski representing the Jefferson Co. Cares Transition Coalition were part of a panel presentation that included coalitions from Brown, Kenosha and Sheboygan Counties along with MetaStar. The Jefferson Co. Coalition is a multi-discipline team and exists to improve healthcare services for residents who transition from a hospital admission back to their “home” setting. MetaStar provides the Medicare recipient data used to identify a need and develop a project or intervention. Projects by the coalition include the Safe Swallowing training and education, now available on the ADRC website.

Civil Rights Plan: In March, the ADRC and Aging departments submitted its four year plan to DHS. The plan requires agencies to determine if you are serving a percentage of all populations and minorities and if not, have a plan of correction. SAMS-IR, the ADRC’s current data base, did not collect specific ethnic data until 04/2017 and therefore, only estimates of those served could be made based on data collection from outside sources, such as the US Census Bureau. “Business Objects”, a software available at DHS, but not ADRC’s provides more definitive data of who is served.

Moving Forward Event – March 16, 2018

Youth Transition Coalition, facilitated by Wondolkowski is in their final preparation for the MF event that will be held at the MATC Watertown Campus and will include sessions on Cyber Bullying/Social Media, Financial Literacy, College Bound, Interview Do’s and Don’ts and Keeping a Job. The Coalition is anticipating 75 students from several school districts.

Staff Changes: Penny Klement is the new ADRC Paraprofessional Resource Receptionist. The ADRC is once again fully staffed.

Senior Dining Program Updates:

Fritter shared that she would be attending the Wisconsin Association of Nutrition Directors Spring Conference in April, and that some of the topics that would be covered would be working in mindfulness, how to maintain wellbeing mentally, physically and emotionally. As well having speakers on grief and depression in seniors, and maintaining a volunteer driver base. She discussed that there is a continued need for volunteers at the Watertown meal site to package meals, and a driver is needed in the Rome/Sullivan area to deliver meals. She stated that the Watertown meal site is doing well with the recently added home delivered meals. She shared that the amount of home delivered meals in December, the month that home delivered meals began, was 249. In January, the amount of home delivered meals increased to 414, and the program started with 14 meal participants and by the end of January had 29 participants. Fritter stated that she was working on the volunteer recognition banquet which will be held Wednesday, May 9th. She stated that she had already planned the entertainment of a Patsy Cline tribute artist, Karen Wickham.

Discussion on the 2017 Self-Assessment for the Aging Plan Due 3/16/2018

Olson distributed the 2017 Aging Unit Self-Assessment for 2017, updates are required to be made in orange font. Some of the highlights: 2 new ADRC committee members; we exceeded our goal of a 25% to increase the number of memory screens as there were 93 completed in 2017 through the ADRC Staff, Dementia Care Specialists who held 10 community events; advocacy through our Benefit Specialist program is exceptional in increasing public knowledge of Medicare through SHIP and Seniors Out Speaking as well as the ABC's of Medicare and setting up computer labs for Medicare Part D plan finders. Jeanne Tyler made a motion to approve the Aging Self-Assessment plan, second by Marcia Bare and approved unanimously.

Discussion on Draft Community Needs Survey for Aging Plan and unmet needs of the ADRC

Olson shared a few resources from the GWAAR website on question to gather ideas from the public. By the next meeting, Olson will have a survey to share with committee members to seek input. We will start moving forward to gather ideas for the Aging Plan.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the planning stages have begun to work on the Human Services Transportation Plan. A few committee members would be very interested in working on the Coordinated Plan, so Olson will share more details at our April meeting. This plan will be due in October.

Discuss Future Agenda Items

Jeanne Tyler suggested committee involvement in advocacy. Olson shares that part of the Aging Plan goal for 2018 is to have Janet Zander from GWAAR present on Power UP strategies and education.

Adjourn:

Connie Stengel made a motion to adjourn at 2:59 pm, Russ Kutz seconded. Motion approved unanimously.

Respectfully submitted,

Sharon Olson, Manager, Aging & Disability Resources Division



Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, April 3, 2018

Call to Order

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

Roll Call

Present: Earlene Ronk, Chair, Russell Kutz, Ellen Sawyers, Carolyn Niebler, and Jeanne Tyler.

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski and Jean Thiede, ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Olson requested to defer item 16, Discussion and possible action on the Alzheimer's Family Caregiver Support Program 2017 Review as it is still in the fiscal department for completion. Ellen Sawyers made a motion to approve the April agenda with the change to defer item 16 to our next meeting. Second by Russ Kutz. Approved unanimously.

Approval of 3/06/2018 Minutes

Russ Kutz made a motion to approve the March 6, 2018 meeting minutes as written, Carolyn Niebler seconded. Motion carried.

Communications

Olson shared the Jefferson County Self-Assessment from GWAAR read by Earlene Ronk, Chair.

Public Comment

None.

Advocacy Updates from GWAAR – Greater Wisconsin Agenda on Aging Resources and /or ORCD – Office of Resource Center Development:

May 16th is Aging Advocacy Day! Your voice can make a difference. Registration deadline is May 1, 2018 with the starting location at the Bethel Lutheran Church and walking down to the State Capitol. The day will wrap up by 3 pm.

Older Americans Act Title III Programs - In a huge win for advocates in this incredibly difficult budget environment, funding for OAA Title III B Home and Community-Based Supportive Services, which has, received nearly a \$35 million (10 percent) boost for a final funding level of \$385 million. Title III C Nutrition Services received a total \$59 million (7 percent) increase (\$490 million for Congregate and \$246 million for Home-Delivered Nutrition Services), and Title III E Family Caregiver Support received a major \$30 million (20 percent) boost as lawmakers proposed \$180 million for the program. Additionally, OAA Title III D Preventative Health received a sizable \$5 million (25 percent) increase, the first boost in years.

Funding for Aging and Disability Resource Centers (ADRC) also received a \$2 million (25 percent) ending at \$8.1 million, which represents the first federal funding increase for ADRC since \$10 million in annual mandatory funding expired in September 2014.

Discuss and possible action on Requests for Waiver of Transportation Co-payment:

Olson reviewed the co-payment requirement for transportation services. For consumers there is \$1.50 co-pay per trip for intercounty transportation and \$7.50 per trip for out of county transport. At this time there is one consumer who has not yet submitted their waiver request paperwork.

Discussion and possible action of the 2017 Annual Financial Transportation Report.

Olson distributed a copy of the report and review with the members. Carolyn Niebler moved to approve the report, seconded by Russ Kutz. Motion carried.

Discussion: ADRC Report, Wondolkowski

In March, three referrals were made to the NFCSP in addition to one referral to both AFCSP and the Housekeeping Program. Key Outcome Indicator met.

The 2017 ADRC Annual Report was reviewed. Staff had 6,418 contacts with 2,436 unduplicated individuals. This is a decrease of 779 contacts compared to 2016. However, in 2017, there was an increase (in some categories by 18%) in home-hospital-nursing home-residential setting and walk-in appointments. Providing in-person service is more time consuming. The ADRC also enrolled 209 individuals into Family Care, Partnership or IRIS (7% increase from 2016).

There are thirteen required “Core Services” in the Contract between ADRC’s and DHS. In 2017, staff had 4,436 Information & Assistance contacts. Staff also provided 260 functional screens and assisted 402 consumers with Medicaid applications. Staff performed options counseling to 154 consumers; enrollment counseling to 34 youth and completed 35 marketing activities. Our Disability Benefit Specialist Program assisted 258 individuals with 456 case issues. Another 198 were assisted with telephone or mail contact. The value of gained benefits for county residents is \$2,936,765 in Federal and State funds, which impacts the local economy.

The ADRC’s 2017 goals were reviewed: 100% compliance with the State Contract –goal met. The Contract did require the ADRC to submit a Business Plan by 11-1-17. DHS deferred the requirement to 2018. The Key Outcome Indicator to have all LTCFS calculated within 14-days from the date the screen was administered was not met (compliance rate= 88.5%). The goal to increase the number of seniors redeeming Farmer Market vouchers to 86% or higher was not met (redemption rate was 75%.) The ADRC did meet its goal of having two Aiming for Excellence Projects. DBS also met their two goals by providing a presentation to HS staff and by updating information on the ADRC website.

Beginning April 1st, ADRC of Jefferson began to claim federal dollars for additional activities. This required modifications to the time and task reporting sheet.

The Moving Forward event was a success. Approx. 40 students; 25 teachers/helpers attended.

Denise Grossman, EBS will retire in June. Alyssa Kulpa is the internal transfer. Alyssa's current position is half DBS/EBS responsibilities. Applications are now being accepted.

Senior Dining Program Updates:

Fritter discussed the mailing that went out in March for recruitment for the Nutrition Project Council which was sent out to the newspapers, congregate sites, and home delivered meal participants. She stated that there were 3 applications submitted by interested congregate site participants.

Meals numbers from October to February for the Federal Fiscal Year (FFY) were reviewed; congregate meals received are at 5,151 meals, and home delivered meals were at 6,864 thus far for the 2018 FFY. In 2018, home delivered meal rates in comparison to 2017 noted an increase of 1922 meals. Congregate meals noted an increase from 2017 to 2018 of 117 meals. She updated the council on participation numbers for the home delivered meal program in Watertown increased from 27 participants to 32 participants.

Fritter discussed the program's key outcome indicators:

1. 100% of seniors completing satisfaction surveys report that they are not experiencing hunger or food insecurity.
2. 95% of qualifying home delivered meal requests is served.

The 2018 nutrition program goals were also reviewed with the committee:

- Providing 6 on-site trainings about local resources at meal sites by the end of the year.
- The program nutritionist will continue to review local resources with new and ongoing home delivered meal participants.
- The nutritionist will provide 6 onsite trainings by the end of the year about 'Cooking for 1 or 2' to provide tools for participants to stretch their food budget through planning.
- To reduce paperwork used throughout the program, the program will test run an iPad at the Fort Atkinson meal site to see if it would be the appropriate technical device to reduce paperwork as a step in the communication between the meal sites and the nutrition office.
- To ensure that all on-going volunteers have renewed their red flags training, the Nutrition Program Supervisor will hold trainings at the 6 congregate meal sites for volunteers to attend.

Discussion on the 2019-2021 Aging Plan

Olson discussed strategies for gathering public input for the Aging Plan and discussed the need to wait for the final survey for the board members due to some Transportation Survey Questions that are being restructured. Jean Tyler suggested reaching out to the Hard of Hearing community; she was going to see if she could find a contact person for this area.

Discussion on Draft Community Needs Survey for Aging Plan and unmet needs of the ADRC

Olson shared a few resources from the GWAAR website on question to gather ideas from the public. By the next meeting, Olson will have a survey to share with committee members to seek input. We will start moving forward to gather ideas for the Aging Plan.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the planning stages have begun to work on the Human Services Transportation Plan.

Discuss Future Agenda Items

Olson shared that Angela Meyers from the Bridges Library will be presenting at the May meeting.

Adjourn:

Russ Kutz Carolyn Niebler made a motion to adjourn at 3:01 pm, seconded. Motion approved unanimously.

Respectfully submitted,

Sharon Olson, Manager, Aging & Disability Resources Division



Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, May 1, 2018

Call to Order

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

Roll Call

Present: Earlene Ronk, Chair, Russell Kutz, Ellen Haines, Ellen Sawyers, Marcia Bare, Carolyn Niebler, Connie Stengel and Jeanne Tyler.

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski , ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Marcia Bare made a motion to approve the May agenda. Seconded by Jeanne Tyler. Approved unanimously.

Approval of April 3, 2018 Minutes

Carolyn Niebler made a motion to approve the April 3, 2018 meeting minutes as written, Ellen Sawyers seconded. Motion carried.

Communications

Wondolkowski read a letter authored by ADRC student intern-Bridgette Unger that was mailed to The Honorable Orrin G. Hatch, Chairman, Committee of Finance, United States Senate in support of the EMPOWER Care Act. This legislation would extend the Money Follows the Person Rebalancing Demonstration, which helps elderly and disabled people on Medicaid relocate into the community. The MFP program expired in September 2016 but states, including Wisconsin have been using remaining funds that will soon run out.

Public Comment

None.

Advocacy Updates from GWAAR – Greater Wisconsin Agenda on Aging Resources and /or ORCD – Office of Resource Center Development:

Another reminder that May 16th is Aging Advocacy Day! Your voice can make a difference.

Jeanne Tyler gave an update of Legislature Lobby Day that she attended with the Wisconsin Association of Deaf and Hard of Hearing as well as the Association of Interpreters. Although it was a bad weather day, representatives talked about a few bill and issues that would like to see improved. One is Standardizing the Representation of Interpreters. There are 2 issues that consumers need to be informed about on T-Coils for hearing aids. – Some can use a variety of assisted technology that can be used in a 3 – 5 foot range and the other is the Hearing Loop. Jeanne also mentioned special challenges for providers in providing Mental Health for people who are deaf and hard of hearing as well as people who are blind and deaf.

Discuss and possible action on Requests for Waiver of Transportation Co-payment:

Olson reviewed the co-payment requirement for transportation services. For consumers there is \$1.50 co-pay per trip for intercounty transportation and \$7.50 per trip for out of county transport. We reviewed a couple requests for waiver of co-pays for transportation. Members discussed and approved a letter to use for notification and that with consumers that have a limited fixed income committee member would agree a yearly review would be in order with a suggested that they meet with a benefit specialist. For consumer who may be working, a 6 month review which could be extended would be the best practice at this time.

Presentation of Bridges Library Programs and Services – Angela Meyers

Angela presented with a variety of resources the Bridges Library system, which includes all the Jefferson county Libraries had to offer. Angela has worked with the ADRC on the Music and Memory programs, Sip and Swipe and some of the Memory Cafes. She discussed the

Wisconsin digital library and renting e-book and iPad as well as Flipster, which is an online magazine program – no paper.

Discussion and update on the ACTI Grant Coalition with the City of Fort Atkinson.

Olson shared that the working title will be Fort Mobility Coalition. Jean Thiede is on the survey committee. Sharon is reviewing job descriptions and functions of other Mobility Managers in the state. Monthly meetings will be held the third Thursday of each month.

Discussion: ADRC Report, Wondolkowski

In April, staff provided options and/or I & A conversations to six consumers resulting in one referral to the NFCSP and two referrals to the Housekeeping Program. Key Outcome Indicator not met. Reason: some consumers opted to apply for LTC programming rather than NFCSP.

Governor Scott Walker has proclaimed May 2018 as Aging & Disability Resource Center Month. The 10th Anniversary for the ADRC of Jefferson is in July 2018. In celebration of both milestones, the ADRC will host an Open House on Friday, May 11th from 9 am-1 pm. The event will include free blood pressure checks, memory screens, giveaways and treats and refreshments. To promote ADRC month & the Open House, a flier has been distributed. Dominic is also scheduled to appear on the Morning Magazine show on WFAW radio on May 3rd at 9:30 am.

With May declared as ADRC month, the ADRC is also the department “spotlight” at the Human Services all-staff monthly meeting. ADRC staff will provide a small presentation on May 9th. The Human Services staff appreciation luncheon is scheduled for May 22nd and ADRC staff are working on a wall board project to display at the luncheon.

The next MCO/ICA/ADRC/IM Roundtable will be held on May 4th. A primary agenda item is the use of Change Routing Forms (CRF). A CRF is issued by the MCO or ICA agency to ADRC’s when there is an adverse action (i.e. consumer has not paid their cost share and disenrollment is requested). Recently, CRF have not been submitted until end of the month and in some cases, consumers are unaware of their disenrollment.

Beginning April 1st, ADRC of Jefferson began to claim more federal dollars for additional activities. This required modifications to Time and Task reporting. DHS /ORCD has provided several modified, more user-friendly versions but not in a timely fashion.

Senior Farmer Market vouchers will be available again this year for distribution beginning June 1, 2018. All printed materials/brochures were ordered and received on 4-30-18.

The ADRC of Jefferson received 20 applications for the Benefit Specialist vacancy. Interviews are scheduled later this week. I & A Specialist-Jenifer Eilert accepted an internal position with CPS Intake Unit and her last day with the ADRC is May 4th. The Information & Assistance Specialist position has been posted internally and externally and applications are now being accepted through 5-7-18.

Bridgette Unger, ADRC student intern's last day is May 18th.

Senior Dining Program Updates:

Program Supervisor, Fritter discussed the meal numbers for March; Congregate Meals 950 meals which is a increase of 2% from march 2017. Home Delivered Meals, 1612 meals which is an increase of 43% from March of the prior year. She stated that the addition of home delivered meals in Watertown have added to the increase numbers. Fritter also discussed the volunteer banquet on Wednesday May 9th and that the total number of RSVP's was 222, which was above the amount of attendees from the year prior, and that she would notify the committee of the total attendance at the following meeting.

Discussion on the 2019-2021 Aging Plan

Olson shared a draft survey for collecting public information. A few minor edits and Olson will share with everyone through the email list serve and mail out to a few members. The plan is for committee members to get 3 – 5 responses from conversations with someone in the community. We will review at the next meeting.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the planning stages have begun to work on the Human Services Transportation Plan. Olson will share as more details become available.

Discuss Future Agenda Items

Olson shared that she will reach out to the Community Action Coalition to see if a representative would be able to discuss what they have found for community needs.

Adjourn:

Russ Kutz made a motion to adjourn at 2:50 pm, Connie Stengel seconded. Motion approved unanimously.

Respectfully submitted,



Sharon Olson, Manager, Aging & Disability Resources Division

Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, July 3, 2018

Call to Order

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

Roll Call

Present: Russell Kutz, Ellen Haines, Ellen Sawyers, Marcia Bare, Carolyn Niebler, Connie Stengel and Jeanne Tyler.

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski , ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Marcia Bare made a motion to approve the July agenda. Seconded by Ellen Haines.
Approved unanimously.

Approval of May 1, 2018 Minutes

Ellen Sawyers made a motion to approve the May 1, 2018 meeting minutes as written, Carolyn Niebler seconded. Motion carried.

Communications

None.

Public Comment

None.

Election of Officers: Chairperson, Vice Chair and Secretary

Olson asked for nominations of Chair.

Marcia Bare nominated Russel Kutz.

Connie Stengel seconded the nomination.

No other nominations were made.

Ellen Haines made a motion to close the ballot and elect Russel Kutz as Chair.

Motion passed unanimously.

Olson asked for nominations of Vice-Chair.

Connie Stengel nominated Jeanne Tyler.

Carolyn Niebler seconded the nomination.

No other nominations were made.

Ellen Haines made a motion to close the ballot and elect Jeanne Tyler as Vice-Chair.

Motion passed unanimously.

Olson asked for nominations of Secretary.

Ellen Haines nominated Carolyn Niebler.

Marcia Bare seconded the nomination.

No other nominations were made.

Russell Kutz made a motion to close the ballot and elect Carolyn Niebler as Secretary.

Motion passed unanimously

Advocacy Updates from GWAAR – Greater Wisconsin Agenda on Aging Resources and /or ORCD – Office of Resource Center Development:

Now that the Supported Decision-Making Agreements legislation has been signed into law ([2017 Wisconsin Act 345](#)), there has been a lot of interest in learning how to put the

agreements into place and where to get the supported decision-making (SDM) agreement form.

A sample SDM form has been provided to the state Department of Health Services (DHS) and is currently under review by the Department. Once the form has been finalized, DHS will provide access to the document and accompanying information (in accordance with 2017 Wisconsin Act 345). The law states, a SDM agreement is valid if it is in writing, entered into voluntarily (as described under s. 52.10* – click on the link to the law to view details), signed and dated as described under s. 52.18* (see law for details), and *is in substantially the form outlined in the law*. The Wisconsin Board for People with Developmental Disabilities has developed a form which is compliant with the form outlined in the new law: http://wi-bpdd.org/wp-content/uploads/2018/05/Sample_SDMForm_-5212018.pdf and it is available for anyone to use.

Discussion and update on the ACTI Grant Coalition with the City of Fort Atkinson.

Olson shared that the working title will be Fort Mobility Coalition. Monthly meetings will be held the third Thursday of each month at 11:30 at the Fort Atkinson Library. Surveys' will be getting distributed soon.

Discussion: ADRC Report, Wondolkowski

In June, staff provided options and/or I & A conversations to six consumers resulting in one referral to the National Family Caregiver Support Program (NFCSP). Of the six consumers, one declined NFCSP due to a wait list/having more immediate needs. Two others declined due to having high assets/high monthly income and they did not want to accept public funding. Another was referred for housekeeping wait list. Through six months, 13 referrals to the NFCSP have been made; the Key Outcome Indicator goal is 17/18 referrals though 6-30-18.

Dr. Amy Flowers and Analytic Insight has been contracted by DHS to provide ADRC customer satisfaction analysis. At the April ADRCConnect meeting, Dr. Flowers presented on the project, which began Jan 1st. The statewide response rate is 27%, which is very good. The telephone response rate is only 9.3%. On-line surveying is now in the testing phase. ADRC's with 25+ responses were to receive a quarterly report in May. The ADRC of Jefferson never received a report so Wondolkowski is not sure of Jefferson Co.'s response rate. More information may be known after the statewide conference call with Dr. Flowers scheduled for July 10th.

Wondolkowski is scheduled to attend the first ever joint ACE and ADRCConnect meeting in Stevens Point on July 13th. Leaders from GWAAR (Greater Wisconsin Agency on Aging) and BADR (Bureau of Aging and Disability Resources, Division of Public Health) will present about the network. Wondolkowski plans to also attend the next ADRCConnect Director's meeting on August 1st in WI Rapids. Anticipated agenda items include final contract changes/discussion.

ADRC has distributed 176 Sr. Farmer Market vouchers; 25 vouchers are still available. ADRC staff are scheduled to market at four local sites in July: Tues, July 10th at Watertown FM; Wed. July 11th at Lake Mills; Thurs. July 12th at Jefferson and Sat. July 28th at Fort Atkinson FM.

Erin Bleck, the new Benefit Specialist (EBS/DBS) started on 6-18-18. Erika Holmes, the new I & A Specialist started on 6-25-18. The ADRC unit is fully staffed again.

Senior Dining Program Updates:

Fritter shared the 2017 Nutrition Satisfaction Survey results for with local and statewide data via PowerPoint presentation. She discussed the rate of return for surveys being 45% for congregate meals and 59% for Home Delivered Meals in Jefferson County, which was greater the Statewide average of 14% for congregate and 23% for Home Delivered meals returning the satisfaction surveys.

This data helps to gauge meeting nutrition program goals of

Promoting Independence, Socialization and Improving quality of life.

Congregate

- 69% of participants feel the nutrition program has improved their quality of life.
- **78%** said the program helps them live independently!
- 94% of participants did not skip any meals due to lack of food or money, this helps demonstrate that people attend the sites more to socialize which is also a vital part of successful aging.

Home Delivered Meals

- 78% of HDM participants say the meals help them continue to live independently.
- 35% 1 in 3 said they HDM driver is the only person they see during the day. The socialization and daily check is critical to their well-being.
- 83% said the program has improved their quality of life.

When asked, why do you attend the dining center?

Congregate

Eat a Balance Diet 61%
Visit with Friends 84%
To Make Ends Meet 11%
Unable to Prepare Meals 1%
Food & Nutrition Info. 19%

Having meals delivered in person offers:

Home Delivered Meals

- Someone to talk to 66%
- Safety/Security Check 45%
- Link to Other Supports 28%
- None of these: 21%

Reducing Hunger and Food Insecurity

Congregate

- 51% said the meals provide half or more of their daily food intake!
- 19% said they would not have a hot meal without this program.
- 6% of participants skipped meals due to lack of food or money.
- 11% attend to make ends meet.
- 8% said without the program there would be days they wouldn't get enough to eat.

Home Delivered Meals

- 77% said the meals provided half or more of their total food intake for the day. This is significant because our meals provide ~675 calories and 19 grams of protein, 1/3rd of the daily requirement.
- 46%, *almost half*, said if meals weren't available they would not have at least 1 fresh, hot meal.
- 34%, ~1 in 3, said there would be days there don't get enough to eat.
- 2% have skipped meals to pay for other living expenses.

Supporting Chronic Health Conditions & Decreasing Health Care Visits

Congregate

- 36% participants said the meals help maintain or improve their health or chronic condition(s)
- 76% say they eat healthier because of the program.
- 11% said they prevented or decreased healthcare visits and/or hospitalizations.

Home Delivered Meals

- 45%, *almost half*, said the meals help them maintain or improve their health conditions!
- 85 % reported eating healthier because they receive Mow's.
- 16% said they had a decrease in healthcare visits or hospitalizations.

Nutrition Education Topics of Interest

Local 2017 Results:

1. **Cooking for 1 or 2 (52%)**
2. **Healing Foods & Healthy Recipe Exchange (Tied at 34%)**
3. **Popular Diets & Food Trends (29%)**
4. **Nutrition for Brain Health (27%)**

Discussion on the 2019-2021 Aging Plan

Olson shared the draft goals for the Aging Plan that needs to be reviewed and approved to be submitted to GWAAR for review by July 13th. Goals were reviewed. Carolyn Niebler made a motion to approve the draft goals to submit to Human Services Board to review and then on to GWAAR, Jeanne Tyler seconded. Motion carried.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the planning stages have begun to work on the Human Services Transportation Plan. Olson will share as more details become available. Meeting scheduled for September. Reviewed quote for Ford Transit Passenger Wagon with capacity to transport 2 wheelchairs.

Discuss Future Agenda Items

Olson shared that during the next couple of months the Aging Plan as well as the Transportation Plan will need to be approved and two Public Hearings will need to be set up for public review.

Adjourn:

Carolyn Niebler made a motion to adjourn at 3:00 pm, Jeanne Tyler seconded. Motion approved unanimously.

Respectfully submitted,



Sharon Olson, Manager
Aging & Disability Resources Division
Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, September 4, 2018

Call to Order

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

Roll Call

Present: Russell Kutz, Ellen Haines, Ellen Sawyers, Marcia Bare, Connie Stengel and Jeanne Tyler.

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski , ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Ellen Haines made a motion to approve the September agenda. Seconded by Marcia Bare. Approved unanimously.

Approval of July 3, 2018 Minutes

Ellen Haines made a motion to approve July 3, 2018 meeting minutes as written, Marcia Bare seconded. Motion carried.

Communications

None.

Public Comment

None.

Advocacy Updates from GWAAR – Greater Wisconsin Agenda on Aging Resources and /or ORCD – Office of Resource Center Development:

Olson shared updates:

- Flood Recovery replacement Benefits available for FoodShare Members
- CMS is seeking public comment on Senior Care Prescription Drug Program
- Direct Care Workforce Crisis story collection
- Legislative and Budget Priorities and issue card
- Federal FY 2019 Budget
- The Farm Bill and SNAP

Discussion and possible action on Requests for Waiver of Transportation Co-payment

Olson reviewed a request for a waiver of transportation of copayments situation. Jeanne Tyler made a motion to approve the waiver of copay for 6 months. Ellen Sawyers seconded. Approved unanimously.

Discussion and update on the ACTI Grant Coalition with the City of Fort Atkinson.

Olson shared that the working title will be Fort Mobility Coalition. Olson shared that the Fort Mobility Coalition submitted a letter of support that it would fund up to \$17,000 in match for the Mobility Manager Position if approved for a 5310 Grant which was submitted on 8/31/2018.

Update on Mobility Manager 5310 Application

The 5310 Enhanced Mobility Application to hire a Mobility Manager was submitted on August 31, 2018. Now just the wait time for application approval/denial .

Discussion: ADRC Report, Wondolkowski

Key Outcome Indicator: In August, staff provided options and/or I & A conversations to 13 customers resulting in 5 referrals to the FCSP and 3 referrals to the Housekeeping Assistance Program. Year-to-date, 22 referrals have been made; the goal is 35.

Dr. Amy Flowers and Analytic Insight have been contracted by DHS to provide customer surveys. Statewide data followed by an interim report was provided to each ADRC. From Jan. 1- May 30th, 244 surveys were mailed to Jefferson Co. customers; 47 surveys were returned (response rate 19%; state average 20.4%). Survey results include the following: 50% (67.3% statewide) first heard about the ADRC from family or a friend followed by 40.9% (27.3% statewide) heard about the ADRC from a health care provider. Others learned from our Resource Guide (15.9%); Information Fair (9.1%) and brochure (6.8%). The main concern to contact the ADRC included: Medicare or other insurance questions 40.5% (21.3% statewide); helping with a disability 35.7% (23.4% statewide) and help staying in my home 31% (vs. 38.3% statewide). Of the 47 surveys, 53.5% (50% statewide) received a referral from staff and 54.5% (80% statewide) acted on the referral and received services. 44.2% (62% statewide) received a

home visit and 100% (88% statewide) said the timing of the visit was “just right”. Follow-up was provided 69% of the time (state average 76%) and 37.5% (vs 31.3% statewide) said they wanted follow-up. I & A staff are now working on a Change Project to increase follow-up contacts. On a 1.0-4.0 scale, customers rated overall experience as very good (3.4) and rated the information received as useful (3.7 vs. 3.5 statewide). A customer’s willingness to recommend an ADRC overtime is 92.5% (90.9% statewide). Locally and statewide, a customer’s willingness to recommend an ADRC declined 6% between 2015 and 2018 surveys.

On 8-21-18, Wondolkowski and I & A Specialist-Tyne attended a Regional Meeting to discuss Enrollment and Disenrollment Plan. DHS’s intent is to develop a plan for all MCO/ICA/ ADRC’s to follow. The initial plan, drafted in 2015 was never signed by all interested parties.

Chairperson-Kutz inquired if random moment time study will replace 100% time reporting. A discussed followed about “enhanced funding” through 100% TR, current state and federal allocations and a “Planning Committee” to study and recommend future funding allocations.

Every two years, long-term care functional screeners are required to pass a Continuing Skills Exam (80% or better). All staff passed; 3 of 4 staff scored 90% or better (state average 89%).

The 2018 Aging and Disability Network Conference is Sept. 13-14th in WI Dells. I & A Specialist-Erika Holmes, Olson and Wondolkowski have registered for the conference

Senior Dining Program Updates:

Fritter discussed the Caterer bid being open for bidding with the last date for submissions being September 1st; it was noted that there was one bid received by mail and it would be checked on to see if there were any bids submitted online.

Customer satisfaction surveys were sent out to home delivered meal participants and to the meal sites to be distributed. The surveys will be distributed until October 31st to provide a longer time frame to all participants to complete a survey, and have their opinions heard.

As result of the previous year’s survey, the Home Delivered Meal Assessor, Sharon will be kicking off a “Cooking for 1 or 2’ series of classes at the Fort Atkinson, Jefferson and Watertown Senior Centers in November. This was a topic of great interest to congregate participants per survey data collected from 2017.

Fritter shared that meal sites would be closed on Wednesday September 26th due to the Fall Site Manager training. Topics such as Suicide Prevention in older adults, the Opioid and other drug crisis, and Healthy Wisconsin information will be covered.

Two new representatives for the Nutrition Project Council; Nancy Boos representing Fort Atkinson and Barbara Schmitt representing Johnson Creek were approved by the Committee.

Discussion on the 2019-2021 Aging Plan

Olson shared that she is still waiting for the draft goals for the Aging Plan to be reviewed from the state. The Aging Plan needs to be turned in by November 2, 2018.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the Locally Developed Human Transit Coordinated Plan meeting will be held on September 18, 2018, at 9 am. All Committee members are invited to attend and partake in this planning event for improving transportation.

Discuss Future Agenda Items

Olson shared that in October the 2019-2021 Aging Plan as well as the 2019 – 2023 Coordinated Transportation Plan will need to be approved and that there will be two - four Public Hearings scheduled. Jeanne Tyler inquired about having a representative from the state come to discuss advocacy needs for people who are deaf or have profound hearing loss.

Adjourn:

Ellen Haines made a motion to adjourn at 3:02 pm, Marcia Bare seconded. Motion approved unanimously.

Respectfully submitted,
Sharon Olson, Manager
Aging & Disability Resources Division



Aging & Disability Resource Center Advisory Committee
Minutes of Meeting
Tuesday, October 2, 2018

Call to Order

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

Roll Call

Present: Russell Kutz, Ellen Sawyers, Marcia Bare, Connie Stengel, Carolyn Niebler, Jeanne Tyler and Mary Vohs.

Also Present: Sharon Olson, Leigh Fritter and Dominic Wondolkowski , ADRC Staff.

Certification of Compliance with Open Meetings Law

It was determined that the committee was in compliance with the Open Meetings Law.

Approval of Agenda

Ellen Sawyers made a motion to approve the September agenda with the correction of the 7/3/18 minutes to be reviewed, it should state the 09/04/18 minutes to review. Motion econded by Marcia Bare. Approved unanimously.

Approval of September 4, 2018 Minutes

Marcia Bare made a motion to approve September 4, 2018 meeting minutes as written, Carolyn Niebler seconded. Motion carried.

Communications

None.

Public Comment

None.

Advocacy Updates from GWAAR – Greater Wisconsin Agenda on Aging Resources and /or ORCD – Office of Resource Center Development:

Olson shared updates:

- ❖ The House and Senate have now passed the funding bill for Older Americans Act and other aging services programs.
- ❖ The OAA Title III-C Nutrition Services received a total increase of \$10 million, which was split evenly between Title III-C1 Congregate Meals (\$495 million) and Title III-C2 Home-Delivered Meals (\$251) million.
- ❖ an additional \$600,000 in the Title III-E National Family Caregiver Support Program to provide funding to ACL to implement the Recognize, Assist, Include, Support and Engage (RAISE) Family Caregivers Act and the Supporting Grandparents Raising Grandchildren Act, both which were signed into law earlier this year.
- ❖ Funding for OAA Title VII Long-Term Care Ombudsman and Prevention of Elder Abuse and Neglect programs (\$21 million) and Elder Rights Support Activities, including the Elder Justice Initiative (\$15.8 million total, which includes \$12 million for the EJI
- ❖ Lawmakers maintained funding for the State Health Insurance Assistance Program, at the \$49.1 million FY 2018 level.
- ❖ A \$425 million increase for Alzheimer's disease research and a \$6 million increase for the Corporation for National and Community Services' Senior Corps programs!

Update on Mobility Manager 5310 Application

Olson shared that there was notification that there were 76 applications for the 5310 Program and the grant request amounts are greater than what is available to distribute. A non-binding indication of awards **may be** notified in early November with a public release in mid- December.

Discussion: ADRC Report, Wondolkowski

In September, staff met with ten consumers resulting in one referral to the NFCSP and two referrals to the Housekeeping Assistance Program for a total 23 referrals year-to-date. Of the other seven, three consumers did not qualify for NFCSP, two declined or will apply later, one was already in the program and one is in the process of enrollment in a LTC program.

For August, our Encounter Report to DHS indicated 496 contacts by five staff members. This includes phone calls, attempted phone calls, home and office visits. Monthly total unduplicated customer's contacts is 325 including 38 office visits and 39 home visits.

Starting October 1st, staff began using Version 11 of the individual ADRC 100% Time and Task Activity Log. Changes include the methods in which NH relocation is recorded. A column was added to allow for Dementia Care Specialist enhanced federal funding.

The Youth Transition Network will host a “Tools to Support Transitioning Youth” event on October 19th @ 8-11 am at the Fort Atkinson High School Auditorium. The purpose of the event is to provide Special Education staff information on various agencies who serve students who present challenging behaviors and their families. Speakers from Children’s Long Term Services, Wraparound, SE Regional Center, ADRC, DVR, Opp. Inc., St Coletta, and Project Yes! will be present.

Olson and Wondolkowski will be the guest speakers at the next Community Care Alliance meeting scheduled on October 16th at Rainbow Hospice Care Inpatient Center in Johnson Creek.

Wondolkowski will again be a vendor at the 2018 Ball Corporation Employee Wellness Fair on Oct. 9th & 10th @ 4-7:30 pm. In 2017, staff reached 20 citizens during the two-day event.

Olson represented the ADRC at the United Way Resource Fair for people who are aging, disabled and/ or a Veteran at the First Congregational Church in Fort on Sept. 22nd. There was a very small turnout of four.

Wondolkowski is attempting to coordinate a “Living Well with Chronic Conditions” workshop. Invitations have been posted at local senior centers, senior apartments, etc. to determine interest. So far, one citizen has contacted the ADRC.

Through the Wisconsin Institute for Healthy Aging, leader trainings are offered for several preventive health, evidenced based programs, including Living Well with Chronic Conditions, Stepping On and new program Chronic Pain Self-Management. Two ADRC staff were scheduled to attend leader training only to be cancelled due to a lack of interest.

The 2018 Aging and Disability Network Conference included sessions on Medicare fraud and Supportive Decision making in Wisconsin. SDM does not eliminate the need for POA and/or guardianship when signing enrollment documents.

Senior Dining Program Updates:

Leigh Fritter, Nutrition Program Supervisor discussed the topics that were covered at the Fall Site Manager Training of Suicide prevention, the Opioid Crisis and Jefferson County Nutrition Program being part of the winning team for the Nutrition Program Trivia game. She also discussed the 5 topics of Healthy Wisconsin which was covered by Sara Koenig, Elder Nutrition Program Manager from the Wisconsin Bureau of Aging and Disability Resources at the training. Fritter discussed a kick off for Mental Health First Aid training at the Fort Atkinson Senior Center for Nutrition program staff and volunteers, which will then follow at other Nutrition Program Meal Sites. To go along with the topics of keeping Wisconsin Healthy, Fritter stated that she and a volunteer would receive training to provide an evidence based falls prevention training,

‘Stepping-on’ which would start at the Jefferson Senior Center and other locations in the future to promote the reduction of falls in Jefferson County.

Discussion on the 2019-2021 Aging Plan

Olson shared the final version of the 2019-2021 Aging Plan. Final plan was reviewed with the suggestion from GWAAR to have measurable outcomes of an estimate of how many people would attend or participate. A motion to approve the plan and forward to the Human Service Board was made by Carolyn Niebler, seconded by Marcia Bare and passed unanimously.

Discussion on the 2019 – 2023 Locally Developed Coordinated Public Transit – Human services Transportation Plan

Olson shared that the Locally Developed Human Transit Coordinated Plan. On September 18, 2018, we had four people participate and there was good conversation shared. We reviewed the transportation plan. A motion to approve the plan and forward to the Human Services Board was made by Ellen Sawyers, seconded by Caroline Niebler, passed unanimously.

Discuss Future Agenda Items

Jeanne Tyler inquired about having a representative from the state for information on services and from the office on for advocacy. Jeanne also mentioned Madison Church became Dementia Friendly.

Members would like if the elder Benefit Specialist came to explain some of the rules of not taking Medicare D on Time. Members were also quite interested in what constitutes observation day s in the hospital vs being admitted. Also members are interested on the number of enrollments in Family Care and Partnership.

Adjourn:

Connie Stengel made a motion to adjourn at 3:30 pm, Jeanne Tyler seconded. Motion approved unanimously.

Respectfully submitted,
Sharon Olson, Manager
Aging & Disability Resources Division

**JEFFERSON COUNTY HUMAN SERVICES
Board Minutes
October 9, 2018**

Board Members Present: Jim, Mode, Richard Jones, Russell Kutz, Augie Tietz, Cynthia Crouse, John McKenzie and Jim Schultz

Others Present: Director Kathi Cauley; Deputy Director Brent Ruehlow; Administrative Services Division Manager Brian Belford; Economic Support Manager Jill Johnson; Aging & Disability Resource Division Manager Sharon Olson; Office Manager Kelly Witucki, and County Administrator Ben Wehmeier; Jeff De La Rosa.

- 1. CALL TO ORDER**
Mr. Mode called the meeting to order at 8:30 a.m.
- 2. ROLL CALL/ESTABLISHMENT OF QUORUM**
All present/Quorum established.
- 3. CERTIFICATION OF COMPLIANCE WITH THE OPEN MEETINGS LAW**
Ms. Cauley certified that we are in compliance.
- 4. REVIEW OF THE OCTOBER 9, 2018 AGENDA**
Item 13 will be moved up to follow item 8.
- 5. PUBLIC COMMENTS**
No Comments
- 6. APPROVAL OF THE SEPTEMBER 11, 2018 BOARD MINUTES**
Mr. Jones made a motion to approve the September 11, 2018 board minutes.
Mr. Kutz seconded.
Motion passed unanimously.
- 7. COMMUNICATIONS**
No communications
- 8. REVIEW OF AUGUST 2018 FINANCIAL STATEMENT**
Mr. Bellford reviewed the August 2018 financial statement (attached) and reported that there is a projected positive year-end fund balance of \$466,320; however, \$124,000 is related to capital projects that will not be completed in 2018 and carried over in 2019, leaving a spendable projected year-end fund balance of \$342,320. He also presented the summary and financial statements (attached) that detail revenue, expenses, tax levy and variance by program within each Division and discussed the areas that are having the most impact on the budget. He also presented reports showing Detox and Alternate Care statistics (attached).
- 9. REVIEW AND APPROVE SEPTEMBER, 2018 VOUCHERS**
Mr. Bellford reviewed the summary sheet of vouchers totaling \$1,237,797.59 (attached).
Mr. Jones made a motion to approve the September 2018 vouchers totaling \$1,237,797.59.
Mr. Kutz seconded.
Motion passed unanimously.

10. **DIVISION UPDATES: CHILD & FAMILY RESOURCES, BEHAVIORAL HEALTH, ADMINISTRATION, ECONOMIC SUPPORT, AND AGING & DISABILITY RESOURCE CENTER**

Child & Family Resources:

Mr. Ruehlow reported on the following items:

- The **Key Outcome Indicators** are all being met.
 - The Child Protective Services team is to screen and have a formal staffing for new out of home cases within 90 days. Supervisor Erica Lowrey has kept us at 100% since she took over a year and a half ago.
- We had a training refresher on Family Find, a program that has a philosophy around finding family connections, not just relative placement. Our current relative placements are just above 37 percent. We were a pilot when Family Find started four years ago. DCF has applied for Federal funding to train the all the remaining counties in Family Find. We will be starting a NiaTx project in the next week and a half.
- Carly King is our new Access employee. She has previously worked as an Access Worker and an Initial Assessment Worker, so she has lots of experience. She also is Intake Certified and Juvenile Court Intake Certified.
- Currently there are fewer kids in care. We did have a young man leave a residential treatment center and go into one of our foster homes.
- The state of Wisconsin is going to have a new assessment tool called the YASI, Youth Assessment and Screen Instrument. We completed an application to be one of the agencies to get involved early on and be one of the initial counties. They recently notified us stating they accepted us to be a Phase 1 county. We will start our training in January.
- Update on the Judicial Engagement Team (JET) Program: we were able to increase our attorneys available for Termination Parental Rights (TPR). We are also pushing to go back into court to get our six-month reviews done judicially, as we receive better results with the families involved.
- Mr. Ruehlow commended our Corporation Counsel Blair Ward and Assistant Corporation Counsel Yelena Zarwell for their services and hard work in helping with a difficult case.

Behavioral Health:

Ms. Cauley reported on the following items:

- **Key Outcome Indicators** for all teams are being met.
- Increase in emergency detentions and crisis calls compared to last year, but our diversion rate to voluntary services 77%.
- Adult Alternate Care is coming down and is currently at \$43,700 for the month, compared to a high of \$60,000 at one point.
- The outpatient clinic is currently booking in to December and January. The clinic has added additional groups, and our IDP Assessor is doing the assessments for the substance abuse clinic.

- Wisconsin County Human Services Association (WCHSA) did vote to support Ms. Cauley's crisis paper and she will continue to press on to use that for advocacy.
- Ms. Cauley had a positive conversation with the Watertown Hospital CEO who mentioned he is willing and trying to work with the community regarding mental health and substance abuse. They are looking into doing medical detox as well as they have added an AODA counselor at Directions Counseling Center in Watertown.

Administration:

Mr. Belford reported on the following items:

- We are working on getting a list of contracts and a resolution for the 2019 contracts.
- We are working diligently on the 2018 billing and plan to be current by the end of the year.
- Some capital Projects that were scheduled to be completed in 2018 are getting pushed back to be completed in 2019, such as the dual purchase of the tractor/plow with the Parks Department, replacing windows in the main building, and the mechanical room updates.
- The project for replacing the Lueder Haus wall has begun and currently is on track for completing that by the end of October, weather permitting.

Economic Support:

Ms. Johnson reported on the following items:

- Our **Key Outcome Indicators** are being met and are as follows:
 - *We have 30 days to get 100% of all applications processed.* We processed 98.57% of them timely. We received 491 applications and did 484 timely.
 - *The Consortium Call Center must answer calls timely within 95% of the time within 10 minutes.* Southern call center answered within 92.38% of the time. The State Call Center average was at 87.79%.
 - *There were 12,000 calls in September.*
- Energy Assistance Program started the new federal fiscal year on October 1. It helps families with high-energy costs between the months of October and May.
- Affordable Care Act starts enrollment on November 1.
- Nina Hanfler from Salvation Army will start going to Workforce Development Center for a few hours each week to be of assistance to anyone in need.
- Valero gave Ready Kids \$6,500

ADRC:

Ms. Olson reported on the following items:

- Our Key Outcome Indicators are as follow:
 - ADRC – 100% of Compliance for Contract; Goal is 35 referrals to the NFCSP and we are at 23.
 - 9 new home delivered meals started in September. A contract with Rock for HDM. Meals for September 2,387
 - Transportation – 383 trip, 10 via wheelchair transportation via contract.

- Dementia Care Specialist – Interviews are completed.

11. DISCUSSION AND POSSIBLE ACTION ON ENTERING INTO NEW PROFESSIONAL SERVICE CONTRACTS (Mentoring, Therapeutic Services and Alcohol and Other Drug Abuse (AODA) Residential Treatment)

Ms. Cauley reported that we have several new service providers. (attached)
Mr. Jones made a motion to approve the contracts as listed.
Mr. Kutz seconded.
Motion passed unanimously.

12. DISCUSSION AND POSSIBLE ACTION ON AGING DISABILITY RESOURCE CENTER ADVISORY COMMITTEE (ADRC) FOOD VENDOR BIDS FOR THE SENIOR DINING PROGRAM

Ms. Olson discussed that the bid for meals from Feils Catering quoted at \$4.74 per meal. Checked with Dodge County, their bid is for \$4.69, which is same \$.05, difference from 2018 most likely due to closer proximity. Green and Columbia Counties have not set their contracted rates yet. Review of Bid contract time.
Mr. Tietz made a motion to approve a 2-year contract of \$4.74 per meal.
Mr. Schultz seconded.
Motion passed unanimously.

13. DISCUSSION AND POSSIBLE ACTION ON PEOPLE AGAINST DOMESTIC AND SEXUAL ABUSE (PADA) INVOICES

Mr. De La Rosa reported that PADA is currently open and providing services for Jefferson County residents. Mr. De La Rosa stated that they currently have two employees: Shannon Curley, who is an Advocate, and Lisa Berndsen, who is also an Advocate as well as currently working as the Interim Executive Director. They are looking to hire a new employee. Mr. De La Rosa is currently the Board President, but his term will expire in December. Mr. De La Rosa explained that PADA is providing services right now, but is not receiving State funding because they did not provide appropriate grant reporting in a timely manner. Mr. De La Rosa expects PADA to be able to continue funding operations for a while out of fund balance.

14. DISCUSSION AND POSSIBLE ACTION ON THE 2019-2021 AGING PLAN

Ms. Olson reviewed the Aging Plan for Jefferson County.
Mr. McKenzie made a motion to approve the 2019-2021 Aging Plan.
Mr. Schultz seconded.
Motion passed unanimously.

15. DISCUSSION AND POSSIBLE ACTION ON THE 2019-2023 LOCALLY DEVELOPED COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN

Ms. Olson reviewed the 2019-2023 Transportation Plan.
Mr. McKenzie made a motion to approve the 2019-2023 Human Services Transportation Plan.

Mr. Tietz seconded.
Motion passed unanimously.

16. DISCUSSION AND POSSIBLE ACTION ON NUTRITION PROJECT COUNSEL MEMBERS: BARBARA SCHMITT – VOLUNTEER AT JOHNSON CREEK NUTRITION SITE AND NANCY BOOS A VOLUNTEER AT THE FORT ATKINSON NUTRITION SITE.

Mr. Kutz made a motion to support the Nutrition Project Counsel Members.
Mr. Schultz seconded
Motion passed unanimously

17. DISCUSSION ON WISCONSIN COUNTIES HUMAN SERVICES ASSOCIATION REPORT

Ms. Cauley reported on the following items:

- WCHSA has gone through a lengthy organizational effectiveness process, which has led to the development of a number of communication tools and procedures.
- WCHSA will be having elections at the end of the month and will elect a new President, Vice President and Secretary.

18. DIRECTOR'S REPORT

Ms. Cauley reported on the following items:

- Every Child Thrives (ETC) event is on December 12 at 8:00 a.m. at Turner Hall in Watertown.

19. ADJOURN

Mr. Tietz made a motion to adjourn the meeting.
Mr. Kutz seconded.
Motion passed unanimously.
Meeting adjourned at 10:57 a.m.

Minutes prepared by:

Kelly Witucki
Office Manager
Human Services

NEXT BOARD MEETING
Tuesday, November 13, 2018 at 8:30 a.m.
Workforce Development Center, Room 103
874 Collins Road, Jefferson, WI 53549

(END OF PLAN)