



**Aging and Disability Resource Center  
ADRC of Door County**

**ADVISORY BOARD - NOTICE OF PUBLIC MEETING**

MONDAY, January 16, 2017 - 4:00 P.M.  
ADRC of Door County @Senior and Community Center  
832 N. 14<sup>th</sup> Avenue, Sturgeon Bay, WI 54235

**AGENDA**

1. **Call to Order at 4:00 p.m.**
2. **Establish Quorum**
3. **Adopt Agenda**
4. **Approve Minutes from the 09/19/2016 Meeting**
5. **Public Comment**
  
6. **Old Business**
  - Building Project Update
  - ADRC 2016 Business Plan Update
  - SRC & ADRC Blending Update
  
7. **New Business**
  - Agency Goals 2017
  - Aging Unit Plan
  - Customer Satisfaction Survey Report
  - Functional Screen – Assessments
  - Lakeland Care Inc – Name change
  - Director's Report
  
8. **Confirm Next Meeting Date and Time**
  - The next meeting is tentatively scheduled for March 20, 2017 at 4:00 p.m.
  
9. **Adjourn**

*In compliance with the Americans with Disabilities Act, any person needing assistance to participate in this meeting should contact the Office of the County Clerk at (920) 746-2200. Notification 72 hours prior to a meeting will enable the County to make reasonable arrangements to ensure accessibility to that meeting.*

**Deviation from the printed order may occur.**

**Posted:**

# ADRC Advisory Board - Minutes

Monday, September 19, 2016 at 04:00 p.m.

Senior Resource & Community Center, 832 N. 14<sup>th</sup> Ave., Sturgeon Bay, WI

THESE MINUTES HAVE NOT BEEN REVIEWED AND APPROVED BY THIS BOARD AND ARE SUBJECT TO REVIEW AND REVISION BY THE BOARD AT THEIR NEXT REGULARLY SCHEDULED MEETING.

## Business Meeting

### 1. Call to Order

- The meeting was called to order at 4:00 p.m. by Helen Bacon. Members present were: Christine Andersen, Helen Bacon, Tom Krueck, Julie Kudick, Tami Leist, Judy Treptow, Melissa Wolfe, and Lucille Kirkegaard. Robert Sullivan was absent. Other persons present were Rachelle Gramann. Barb Snow took minutes.

### 2. Establish a Quorum

- A quorum was established and the meeting continued.

### 3. Adoption of Agenda

- A motion was made by Christine Andersen, and seconded by Julie Kudick to adopt the agenda. The motion was carried unanimously.

### 4. Approve Minutes from 7/18/16 Meeting

- Correction on Next meeting date from November 20<sup>th</sup> to September 19<sup>th</sup>.
- A motion was made by Christine Andersen to approve the minutes with corrections and was seconded by Melissa Wolfe. The motion was carried unanimously.

### 5. Public Comment - None

### 6. Old Business

- **Building Project Update** – Rachelle Gramann showed the renderings of the new building that was brought to the public forum held here at the Senior Center. Rachelle explained the layout of the offices, bathrooms, and other areas and Helen Bacon explained where the fuel pumps would be set up. Rachelle also brought up that the ADRC is branching out throughout Door County. There is the Caregiver Support Group that is on the 2<sup>nd</sup> and 4<sup>th</sup> Wednesdays of the month in Sister Bay. We have a new Activities Coordinator trying to draw more people in throughout the county. Rachelle also discussed that she expects the meal program to grow bigger in the new building.
- **ADRC 2016 Business Plan Update** – Rachelle directed the board to the handout of the ADRC Business Plan. She mentioned that this is the final template and that the State will plug-in some of the numbers and we will plug-in the rest. This will help look for quality improvement gaps in services. The Business Plan is due November 1<sup>st</sup>. She also mentioned that the budget will go down due to lower numbers. The ADRC is down from 42% to 35% with 100% time reporting. This is partially due to Family Care coming in last year where we had two limited term full time employees that could 100% time report. We are looking at how to improve 100% time reporting, one way is to use outreach to help bring people into the ADRC. Julie Kudick mentioned that one way to get in touch with the people is to reach out to the younger aged group with aging parents. Melissa Wolfe mentioned that getting the word out would help, a lot of people do not know what the ADRC does. Melissa is part of the People First of Door County which meets the 3<sup>rd</sup> Tuesday of each month

at 4:15 p.m. at the Bayview Terrace Apartments. She is going to talk to her group about the ADRC. Rachelle said that the ADRC could send one of our staff to talk to the People First of Door County Group.

- **Update SRC & ADRC blending.** Rachelle referenced the ADPAW Report mentioning that there are just a few other things to do to get the SRC and ADRC integrated. There are 41 ADRC's in the state and 2/3rds are combined with Aging Programs. The SRC and ADRC board will combine and the Nutrition Board will stay separate. The ADRC would also become part of the 3 year Aging Plan. Rachelle is staying in contact with State, ORCD, and GWAAR who are willing to help anyway that they can. Julie Kudick asked if there was an impact on funding if they integrate. Rachelle answered that blending should help with funding. The 100% time reporting is important for funding as well. We also have two I & A's and one APS worker facilitating Caregiver Support groups to help get the information out and bring in more people along with doing outreach.
- **Memory Screenings Update.** The ADRC is increasing our work with the Alzheimer's Association. Jenny is scheduling more with the Alzheimer's Association. They will be here the 1<sup>st</sup> Friday of every month starting November 4<sup>th</sup>. They will take a short break and then come back in February. We will be doing outreach, time reporting, preventive catching early marketing, and advertisements on the radio (WDOR). We are working on getting the memory screenings throughout the county. We are also looking for community report to staff the Café. The Dementia care specialists can time report. We have the Low Vision Support Group which is an open group coming in at 1:00 pm on Friday. We did advertise the group in the Senior Center newsletter. The Support Group is run by Angie Zalig who is the Regional Specialist from the Vision and Blind. Melissa mentioned that she could ask People First of Door County to advertise the group on their Facebook. It was also mentioned to advertise the group in the doctors' offices.
- **Scope of Services questions. None**

## 7. New Business

- **Wisconsin Dementia Care System Redesign.** Rachelle referred to the handout. Joe and Cori chose this project and are talking with professors from UW Milwaukee. Door County is working on creating a Dementia friendly community. Other agencies in the county are talking about this and noticing more dementia and Alzheimer's and early onset Alzheimer's. The board mentioned that we are noticing it more because of better diagnosis and recognition. Tom Krueck said they need a friendly atmosphere and referenced page 3 of the handout stating by 2040 Wisconsin Alzheimer's cases are expected to more than double the cases in 2016. The board also discussed the Wisconsin Music and Memory Program on page 16. Anna Zahorik our Information and Assistance Specialist is working toward being the Dementia Care Specialist. Rachelle mentioned that she was trying to get the new Geriatrician with Aurora to the Senior Center to do a presentation.
- **Director's Report**
  - October 7<sup>th</sup> our Regional Quality Specialist (RQS), Sherry will be here to meet with Joe Krebsbach, Jake Erickson, and Rachelle Gramann. Rachelle will bring the numbers from that meeting to the next board meeting.
  - Rachelle went to New Director Orientation and brought back some information about getting the board more involved. Rachelle asked the board to help with outreach, networking, and getting the word out about the ADRC so we can reach people before they get to crisis mode. Our APS department is way bigger than most counties that are bigger. How can we get people the tools they need before they are in crisis. Julie Kudick said that they need to reach providers of services and agencies as well. Education piece to funding and those who are healthy and younger to help

prepare them for aging and help them take care of their lives. We do have to be careful of overreaching, but help them stay independent helping people help themselves. Tom Krueck stated we need to look at what we can do with excellence and enhance the program. Judy Treptow said the Senior Center helped her to learn to grow old with their resources.

**8. Confirm Next Meeting Date and Time**

- The next meeting of the ADRC Advisory Board will be held on Monday, November 21, 2016, at 4:00 p.m. at the Senior Resource & Community Center.

**9. Adjourn**

- A motion was made by Tom Krueck, to adjourn the meeting. The motion was seconded by Judy Treptow. The motion was carried unanimously. Meeting adjourned at 5:35 p.m.

Recorded by Barb Snow

# **ADRC of Door County Business Plan**

## **Current Status and Opportunities for Enhancing ADRC Services and Expanding the Customer Base**

**ADRC Name:** ADRC of Door County

**Counties Served:** Door County

**Director Name:** Rachelle Gramann Phone: 920-746-5371 E-mail: [rgramann@co.door.wi.us](mailto:rgramann@co.door.wi.us)

*This Business Plan is intended to guide the ADRC's efforts to enhance its services, expand its customer base, and operate efficiently. By pulling together key data on who the ADRC currently serves, how the ADRC presents itself to the public, which services it emphasizes, how its customers perceive the ADRC, and how the ADRC uses its staff and financial resources, this Business Plan format provides a structure for presenting key factors for each ADRC to consider in developing business strategies appropriate to its individual situation.*

## Customer Base

**TABLE 1**  
**Number of ADRC Customers Served**

<b>Unduplicated ADRC Customers</b>	<b># Customers</b>	<b># Contacts</b>	<b>Contacts/ Customer</b>
Actual Count, May-July, 2016	225	718	3.19
Estimated Annual Number	900	2872	3.19

Source: ADRC Encounter Data. Does not include EBS and DBS customers to avoid duplication in the customer count because of incompatibilities between reporting systems.

**TABLE 2**  
**Benefit Specialist Customers\***

<b>Benefit Specialist Service</b>	<b># Customers</b>	
	<b>May-July 2016</b>	<b>Estimated Annual #</b>
Elder Benefit Specialist	N/A	N/A
Disability Benefit Specialist	45	180
Total	N/A	N/A

Note: Benefit Specialist customers are those for whom cases have been opened. Those receiving brief information only services from the Benefit Specialist are not included.

**TABLE 3**  
**ADRC Market Penetration**

<b>ADRC Target Groups*</b>	<b>% of Target Group (TG) Who Are ADRC Customers</b>	
	<b>All ADRCs Statewide</b> (All ADRC Customers / Statewide TG Population)	<b>This ADRC</b> (This ADRC's Customers / Geographic Area TG Population)
Elderly (Age 60+)	3.4%	6.2%
Adults with Disabilities (age 18-59)	4.4%	5.0%
Total Target Population	3.7%	5.8%

\*Service area population data is from the U.S. Census, American Community Survey, 2010-2014. ADRC customer data is from encounter reporting and includes youth who receive services at age 17 years 6 months. Elder Benefit Specialist and Disability Benefit Specialist customers are not included.

How does the ADRC's market penetration rate compare to the statewide rate for all ADRCs? Are there differences among target groups? What might explain the differences? Are changes to the ADRC's market penetration rate anticipated in the future? If yes, why?

***In 2015 the Statewide data for residents over 60 years of age was 21.9% and is expected to increase to 28.5% by 2035. Door County is known as a recreational, tourist based area of the state and as a result over time, has been an inviting community to move to for retirement. Therefore, statistically In comparison to the above listed Statewide average, Door County's population of 60 plus in 2015 was 36.1% and is expected to rise to 45.1% by 2035.***

*Currently, adults with disabilities (age 18-59) are being served by other areas of Door County Human Services particularly related to mental health and substance abuse. At this time this target group is close to the statewide average. With that said, the ADRC was initiated in Door County only three years ago in 2013, with Family Care/IRIS programs implemented only one year ago in 2015. Therefore, with our growing aging population and being in the early stages of changing to the ADRC and Family Care/IRIS LTC community service model, it is expected that our market penetration in both target groups will continue to expand.*

## Customer Base (Continued)

**TABLE 4**  
**Target Group Distribution - ADRC Customers Compared to Statewide\***

ADRC Target Groups	Target Group as a % of Total Target Population		% ADRC Customers in this Target Group (May-July, 2016)
	Statewide Distribution	Distribution in ADRC Service Area	
Elderly (age 60+)	71.3%	67.2%	71.5%
Adults with Disabilities (age 18-59)	28.7%	32.8%	28.5%
Total Target Population	100%	100%	100%

\*Numbers do not include Elder Benefit Specialist and Disability Specialist Customers.

*How does the proportion of ADRC customers in each target group compare to the representation of that target group in the ADRCs service area? Do the differences, if any, represent underserved populations or are they reflective of differing needs and why?*

*Currently our target group distribution is 67.2% in the area of Elderly (age 60+) and 32.8% for Adults with Disabilities (age 18-59), while our % of ADRC customers for the Elderly group is 71.5% and 28.5% for Adults with Disabilities. By looking at this data at face value, this represents an imbalance in several percentage points between serving the elderly versus the disabled. This shows Door County is adequately serving the elderly population (age 60+) however, is underserving adults with disabilities (age 18-59).*

*As stated in table 3, the ADRC was initiated in Door County only three years ago in 2013, with Family Care/IRIS programs implemented only one year ago in 2015. August 1, 2015 marked the official date of transition for approximately 200 individuals to managed care and therefore, Door County was officially no longer the provider entity for long term care services for adult developmentally disabled, people with physical disabilities, and the frail elderly. However, as we shift to the ADRC and Family Care/IRIS LTC community service model, we still have a large waiting list for services. As a result there has been continued case management in other areas of Human Services separate from the ADRC. These departments have a much longer history of providing services and community members are more likely to "go there first". These services include Behavioral Health, CCS, CPS and APS, and include but are not limited to mental health and substance abuse. Therefore, data for these target groups is not captured realistically at this time, and will continue to increase as we fully transition to*

*the new model of community care. Furthermore, it is hard to get an accurate snapshot of the % of ADRC customers without EBS and DBS data included.*

**TABLE 5**  
**ADRC Customers, Percentages by Disability Type**

Disability Type	% of Customers Age 18-59		% of Customers Age 60+	
	All ADRCs	This ADRC	All ADRCs	This ADRC
Intellectual/Developmental Disability	17%	21%	5%	4%
Physical Disability	46%	45%	58%	51%
Mental Health	18%	18%	16%	30%
Substance Use	2%	0%	3%	0%
No Disability or Unknown	17%	16%	18%	15%
Total	100%	100%	100%	100%

Source: ADRC encounter data for May-July, 2016.

How does the ADRC's service to the different customer groups compare to that of ADRCs statewide? What, if any, are the main differences and what explains them?

*Compared to the statewide average in the area of % of customers age 18-59, Door County has a higher percentage of persons with Intellectual/Developmental Disabilities, and lower percentage in the area of substance abuse. To date there is no data from the Department of Health as to why there is a high percentage of intellectual/developmental disabilities in Door County. However, many calls come into the ADRC from outside the county and even outside the state of Wisconsin from relatives of persons with disabilities inquiring about services in Door County. Most say they have heard that Wisconsin has better services available for people with disabilities and/or they are considering moving to Door County to obtain these services. As for the low number of customers age 18-59 with substance use issues, as stated before, outside of the ADRC there is a strong component of services in Door County Human Services Department for mental health and AODA in which these numbers are not captured in SAM's reporting.*

*The % of age 60+ with physical disability is lower than the statewide average by seven percentage points. With Family Care/IRIS programs implemented only 1 year ago, a higher percentage of this group could be sitting on the long (90+) waiting list. With that said, Door County is a small contained*



*community with numerous non-profit organizations that may be providing services to this group while they are waiting to become eligible for services.*

*In contrast, the percentage of this age group with mental health issues is much higher than the statewide average. Door County's Human Services Department historically has not been strong in the area of mental health services for the age group 60+. This limited service history along with ADRC outreach may explain why the ADRC is seeing a higher percentage of individuals with Depression. Much of these issues are related to depression and anxiety which could be attributed to many variables with the most common being isolation. Isolation in two ways: 1) Socially isolated because many of our elderly relocated to Door County for their retirement years and it is common to find they have no family in the area; and 2) Door County presents geographical challenges in regards to isolation. Related to AODA, most of the referrals for individual over 60 with substance abuse issues are currently going to APS rather than the ADRC.*

### ***Customer Base (Continued)***

**TABLE 6  
Persons with a Disability in the ADRC Service Area, by Type of Disability\***

Disability Type	Population Age 18-64		Population age 65+	
	#	% of Age Group Total	#	% of Age Group Total
Independent Living Difficulty	566	3.5%	545	8.2%
Self-Care Difficulty	307	1.9%	281	4.2%
Ambulatory Difficulty	733	4.6%	892	13.4%
Cognitive Difficulty	593	3.7%	431	6.5%
Hearing Difficulty	428	2.7%	892	13.4%
Vision Disability	227	1.4%	389	5.9%
Total with Any Disability	1478	9.2%	1807	27.2%
Total Population	16138	100%	11651	100%

\* Source: U.S. Census, American Community Survey, 2010-2014. Population numbers are estimates averaged over a 5 year period.

What types of customers currently make the most use of the ADRC? Are there disability-related, geographic economic, cultural or other subgroups within the ADRC's main target populations that could potentially benefit from ADRC services but are currently underrepresented among the ADRC's customers? Groups to consider include but are not limited to: young adults with any level of disability who are not participating in a LTC program; adults with chronic conditions such as diabetes, cancer, heart disease, kidney disease, etc.; ethnic minorities; and private pay individuals with LTC needs.

*Over one-third of Door county residents 65+ are eligible for some level of service. With that said, even though these are the customers making the most use of the ADRC, due to the large percentage in the overall county population, they are underserved. Geographically, there is a deficit in contacts from Southern Door (south of Sturgeon Bay), and Northern Door (north of Egg Harbor). Culturally, Northern Door area is more isolated, more affluent and less informed about the ADRC. This group can tend to be private, prideful and lack trust in letting other's help. Southern Door area is lower income with many being retired farmers who are property poor. This group as well, places value on privacy and is prideful of their independent sustainability as farmers.*

*Many of our young adults with disabilities continue to live with their parents who choose not to connect with the ADRC as they plan to meet the adult child's needs throughout their life. Often times higher functioning young adults with intellectual and/or developmental disabilities that could be independent in the community with some level of managed care, unfortunately do not qualify for Family Care per the LTCFS.*

*Upon review of the Customer Satisfaction Survey, it became apparent that there is a lack of referrals from our health care professionals in the county. And when there was a recent diagnosis or change in medication, contact to the ADRC came from only the caregiver. This would indicate a significant underrepresentation of adults with chronic medical conditions.*

## Outreach and Marketing

**TABLE 7**  
**How Customers Contacted the ADRC**

Who Initiated Contact with the ADRC*	% of Customers	
	For this ADRC	For All ADRCs Statewide
Self	43%	44%
Guardian, POA or other legal decision-maker	4%	7%
Caregiver	5%	6%
Relative, friend, neighbor, or community member who is not a legal decision-maker or caregiver	29%	23%
Agency service provider (referrals from a human service agency, health care service provider, facility, etc.)	19%	18%
Other, not initiated by the ADRC	0%	2%
Total	100%	100%

\* Each customer is assigned to the first category in the list which applies and is assigned to only one category.

Describe the ADRC's approach to marketing and outreach. How effective has this approach been in reaching different groups within the ADRC's target populations? In reaching the different types of people who initiate contact with the ADRC?

***When initiated in 2013, marketing and outreach was accomplished through public education, radio, newspaper and public announcements. This approach continued through 2014. In 2015 marketing was almost completely stopped due to the rollout of Family Care and the high volume of work related to that rollout. The effectiveness is comparable to all ADRC's statewide.***

***Since opening our ADRC in 2013, we have had a steady change in leadership and staff, which has been detrimental in our marketing and educating the community. Community members have had difficulty getting to "know" the staff and develop long standing relationships. In 2016, we, increased the number of public presentations out in the community particularly in Northern and Southern Door.***

***It is evident from the data that there is a need to increase outreach/education to healthcare providers to Guardians, POAs or other legal decision-makers as well as the community at large. Targeting the northern and southern parts of the county will require us to collaborate more with our community non-profits as word of mouth seems to be the way to penetrate those areas.***

## Service Provision

**TABLE 8**  
**ADRC Services, by Service Type, Compared to Statewide Averages**  
**May, June, July 2016**

Type of Service Provided	% of Customers		Contacts/Customer	
	State Avg.	This ADRC	State Avg.	This ADRC
Information & Assistance	52%	58%	2.54	3.0
Options Counseling	9%	7%	1.4	1.3
LTC Functional Screen	6%	7%	1.69	1.2
Enrollment Counseling	5%	4%	1.54	1.2
Disenrollment Counseling	1%	0%	1.60	1.0
Disability Benefit Specialist (DBS)	5%	12%		
Elder Benefit Specialist (EBS)	N/A	N/A		
Assistance with MA application	5%	4%	2.39	1.6
Services for youth in transition	1%	0%	2.49	
Memory Screens	1%	1%	1.19	1.0
Nursing home relocations	4%	2%	1.80	3.0
All Other	11%	5%	1.92	2.0
Total*	100%	100%		

Describe the ADRC's participation in health fairs, prevention programs, and other community activities that reach and educate the public about issues relating to aging and disability and are not reflected in individual customer counts. Include the number of events and participants, if available.

***Since January of this year (2016) we have facilitated approximately 30 outreach events. The venues include: churches; meal sites; health and wellness fairs; senior and young adult with disabilities network meetings; Probation and Parole; Sheriff's Dept.; Red Cross Station re: displacement due to apartment building fire; Rotary Club; Learning in Retirement; Home Health Agency; Public Radio; Children's Services within County Human Services Dept.; Newspaper; Caregiver Support Groups; and Dementia Care Conference. With the exception of public radio and newspaper articles, we reached approximately 300-400 participants. Information provided included: ADRC overview; Roles of I&A, EBS and DBS; Social Security, Medicare and Medicaid Education; Dementia Education and resources at ADRC for dementia and memory screens; POAHC education; Caregiver Support Information; Low Vision Support Group Information; Transition to adult for SSI and DBS role; Guardianship; Social Security Disability process.***

Which services are the main focus of the ADRC's current activities and why?

***The majority of our focus at this time is with Information & Assistance mainly due to two factors: 1) The ADRC is new to the County (in place for just over 3 years); 2) Transitioned to Family Care one year ago and are limited to three enrollments per month (waiting list of 90+).***

Does the ADRC provide significantly greater or lesser proportions of some types of services than the average for all ADRCs? How do the number of contacts per customer provided by the ADRC compare to statewide averages? What would explain these differences? What questions or issues does the comparison raise?

***As stated above, our ADRC provides a significantly greater amount of Information and Assistance services due to the fact that we are a fairly new ADRC (3+ years old). In addition, Family Care was implemented only 1 year ago and therefore, we have a long waiting list as we are limited to 3 enrollments per month.***

***It is noted in the customer contacts that our ADRC has a much higher number than the state average related to nursing home relocations. Again, this most likely is connected to the newness of Family Care and the large waiting list.***

***In many areas our contacts/customer numbers are lower than the state average. We are a new ADRC that is assisting the community in transitioning away from the County waiver program and accepting the Family Care model of community care management. We believe most of our service to youth in transition is being done thru our DBS which is not captured here. In the ADRC development we have experienced numerous turnovers at the director's level. It is too early for us to question ourselves or compare ourselves with other seasoned ADRC's as we are performing quite well despite the obstacles and because of a strong, dedicated team. We are consistently looking at quality improvements and best practices.***

## ***Customer Preferences and Expectations***

Based on your ADRC's customer satisfaction surveys and other feedback from customers, what do customers like best about the ADRC? What do they want more of, want added, or want improved?

***Customers rated their overall experience with our ADRC very favorably. Customers feel they were well informed and guided with a wide variety of issues including needs for financial assistance, issues related to insurance, transportation or help staying in their home. Customers indicated they found it important that the ADRC has no financial interest in their decisions, never charges for services and allows the customer to return if they need additional information or change their mind about the services they need.***

***Areas that were not rated significantly low however, our current leadership is focusing on helping the ADRC staff improvement in these areas; assistance with paperwork, help with considering the pros***

*and cons, offering a home visit, follow-up call. An example of how we are focusing on this, as mentioned elsewhere, we are putting staff in a northern Door office as a way to develop some presence and make home visits more efficient for staff. Working from the Sturgeon Bay office means that travel time to the northern part of the county very time consuming.*

What does the survey data and customer feedback tell you about how well the ADRC is meeting customer expectations in the following areas? *(This report is based on a small sample size of 73 Door County customers)*

- The ease of locating and contacting the ADRC: *Accessibility was rated slightly above the statewide average (3.6). The majority of those surveyed heard of our ADRC through “work of mouth” (52.1%); and at (16.4%) was through a “referral from an agency”. Historically our staff believed that they were unable to call clients when a referral came through another entity. We will see an increase in contacts as we continue to make follow up calls from outside referrals.*
- The number and location of ADRC sites: *Door County customers rated the ADRC between “good” and “excellent”. Ease of finding the phone number rating (3.7). These ratings were slightly above the statewide average. , There are limitations related to accessibility to location as we are currently located only in Sturgeon Bay, which we are trying to address.*
- The ADRC’s hours of operation: *3.6 rating for hours someone is available. Our hours are 8:00-4:30 M-F with flexibility outside of regular office hours where needed. For over a year we experimented with keeping our Senior Center and ADRC open until 6:00 but the volume was too low to justify with those expanded hours.*
- How telephone calls to the ADRC are answered: *Protocol is to answer “Aging and Disability Resource Center of Door County, this is “name”. In the area of “Culture of Hospitality”, Door County rated 3.15 compared to the statewide average of 2.99.*
- The ADRC reception area and other building and office space characteristics: *We are lacking privacy in our reception area due to limited space. However, less than 2% of Door County ADRC customers expressed concerns about the privacy of their conversation with the ADRC. We are currently working on plans for a new building that will greatly improve this aspect of our services.*
- The services provided by the ADRC: *Almost 99% of Door County customers surveyed said they would recommend the ADRC’s services. One of three customers (36.6%) received a home visit, which is below the statewide average. Of these home visits conducted, Door County rated slightly higher in relation to visits within one week and less than 3 days as compared to the statewide average. Home visit satisfaction was rated high at 3.8.*

## Financial Resources

**TABLE 9**  
Sources of Funding in the 2016 ADRC Budget

Funding Source	Amount	% of Total
State ADRC, DCS and nursing home relocation funding	235,202	51%
Federal MA match	176,468	38%
Local financial contribution	52,718	11%
Total	464,388	100%
Describe local in-kind contributions, if any, and estimate their dollar value:		

**TABLE 10**  
ADRC -Spending Compared to Budget, by Year

Over- or Under-Spending	2013	2014	2015
Underspending of ADRC grant			
• Amount of underspending, if any	0	13,601	0
• Underspending as a % of ADRC state grant	0%	6%	0
• Underspending as a % of total ADRC budget	0%	4%	0
Local financial contribution	25,970	14,771	13,893

Based on the ADRC's current budget and spending history, what is the ADRC's financial capacity for enhancing the services it provides or increasing the number of people it serves? What opportunities are potentially available for enhancing the resources available to the ADRC? What barriers may limit the potential for service enhancement or expansion? Explain.

*The ADRC has continued to try and maximize its services based on budget capacity since we began in 2013. We started with only a half time receptionist, and two I&A staff. In 2015 we increased that staffing to a full time receptionist position and three I&A workers. Moving into 2017 we are increasing our hours for the DBS position from 28 hours to 32 hours per week. This is a significant budget increase due to moving the DBS worker into a higher benefit package. Obviously these changes have provided us the opportunity to increase the number of individuals we can serve. We will continue to work on our time reporting to make sure that we are able to capture all available revenue. We will continue to plan for how we will use funding in the future to maximize services.*



## Allocation of ADRC Resources

**TABLE 11**  
**ADRC Staff Time and Expenditures, by Type of Service**

Type of Service Provided*	# Known Customers (unduplicated)	Staff Time Devoted to Service Provision			Expenditures by Service Category		
		Staff Time In Hours	% of Staff Time	Average Minutes /Customer	Dollar Amount	% of Total	Cost per Customer
I&A and Options Counseling	181	910	81%	302	65,767	81%	363
LTC Functional Screen	25	162	15%	388	12,179	15%	487
Enrollment/Disenrollment Counseling	15	24	2%	96	1,624	2%	108
Youth in transition		1	0%	0	0	0%	0
Dementia related services	3	26	2%	525	1,624	2%	541
Nursing home relocations	1	0	0%	0	0	0%	0
All Other	0	0	0%	0	0	0%	0
<b>Total</b>	<b>225</b>	<b>1123</b>	<b>100%</b>		<b>81,194</b>	<b>100%</b>	
<b>Average per Customer</b>				<b>299</b>			<b>361</b>

\* Data on EBS and DBS services is not included in this table in order to avoid duplication of customer counts.

**TABLE 12**  
**ADRC Expenditures, by 2015 Budget Category Percentages**

Budget Category	Expenditures by Budget Category*			
	ADRC 2015 Budget Percentages		ADRC Expenditure – Allocated by 2015 %	Cost / Customer by Budget Category
	Amount	%	Amount	Cost/Customers*
Personnel	358,347	84.2%	85,394	379
Other staff-related costs (travel, training, certifications, etc.)	5,670	1.3%	1,318	6
Rent	0	0%	0	0
Other building related costs (utilities, furniture, etc.)	1,776	0.4%	406	2
Phone system	2,300	0.6%	608	3
Computer / IT System	1,000	0.2%	203	1
Other direct expense	18,200	4.3%	4,361	19



AMSO	38,453	9.0%	9,128	41
Total	425,746	100%	101,418	451

\* The total number of known customers from Table 11 is used in computing the cost-to-customer ratios. EBS and DBS data is not included. *DBS Expenditure data is included, however, per response from Tara R.*

## **Allocation of ADRC Resources (Continued)**

What are the ADRC’s key service and budget cost centers? Identify areas where efficiencies could potentially be made or resources reallocated to enhance ADRC services, address customer expectations, and expand the ADRC’s customer base.

***Obviously our greatest cost center is personnel. Some of these costs will shift when we move into a new building in 2017 or 2018. We believe that we already are doing a good job of maximizing the budget we have for the program. One area that we will need to consider is in an increase in our marketing budget which has been significantly cut back with the change in leadership. To enhance services, address expectation and expand customer base, we are shifting part of an I&A’s role to dementia care specialist, another I&A will be taking the lead in outreach events and two of our I&A’s will be facilitating caregiver support groups 2x per month.***

## **Business Strategy for 2017**

Describe the steps the ADRC will take in 2017 to enhance and expand its services and customer base.

- *Reach new customers and increase the number of new ADRC contacts.* Identify which customer population(s) will be targeted and why. Describe how the ADRC will reach out to inform and educate members of these groups about the services of the ADRC and what the anticipated outcome will be.
- *Enhance and/or expand current services.* Describe what changes the ADRC will make to increase or improve its services, together with the anticipated result of these enhancements.

- *Realize efficiencies and allocate resources.* Describe areas where efficiencies will be implemented and resources allocated or reallocated in order to facilitate the proposed customer and service expansions.

***Our number one goal for 2017 is to integrate our ADRC and Aging Unit with the intention to minimize confusion while increasing marketing as a single entity. We are in the middle of a new building project for our combined program, and if all goes as planned we should be in a new facility late 2017, early 2018. With this will come increased programs and services that will address prevention, health and wellness to empower consumers in maintaining and/or restoring their independence. Our marketing strategy is to reach all corners of the county, particularly Northern and Southern Door as well as Washington Island, through regular and consistent radio ads. It is our intention to staff a satellite office in Northern Door (Sister Bay) at least 2x per month with hopes to increase to 1x per week. We recently increased the number of community presentations throughout the County and will continue to do so in 2017 with emphasis on the medical community and LTC facilities. Our goal is to find ways to meet with physicians individually to provide education regarding the ADRC. In addition, we are looking into getting on the agenda for the hospital's monthly physician's meeting.***

***In our Three Year Aging Plan (2015-2017) our main goals for 2017 are as follows: 1) Increase services to people with dementia as well as increase community awareness via dementia friendly community education. We have targeted an I&A staff member as our dementia care specialist and she is currently receiving training; 2) Increase the availability of health activities; 3) Present adding three programs specific to aging services to the Learning in Retirement curriculum; 4) To improve coordination of meals for individuals being discharged from medical care, we will increase partnership opportunities with the discharge planning staff at local medical facilities including those in Brown County. Plan to create referral form to be included with all discharges for individuals over 60; 5) Increase availability of Caregiver Support; 6) Increase socialization/activities at our Sturgeon Bay site and add one additional special event to our all four of our small satellite meal sites.***

**COMMUNITY OUTREACH LOG**

DATE	EVENT/GROUP	STAFF	NO. OF PARTICIPANTS	PARTICIPANTS	CONTENT OF PRESENTATION/COMMENTS
1/10/2016	Grace Church Adult Forum	Lisa	24	community members	What is the ADRC? What kind of assistance can you get there?
2/16/2016	Red Cross/Oxford Apartment fire victims	Jennifer and Rachelle	12	Community Members	Offered housing resources to those displaced by the fire. Gave other ADRC resources as needed.
3/1/2016	County of Door Newsletter	Mary and Jess		County Employees	Offering assistance with issues related to Social Security, Medicare, and Medicaid
4/5/2016	Forestville Meal Site	Anna, Mary, and Rachelle	4	community members	Overview of ADRC- how information and assistance specialists and benefit specialists can help you.
4/6/2016	St. Francis church in Brussels	Anna and Mary	33	community members	Overview of ADRC- who we are and what we do. Brief discussion of Medicare Part D plan finders and Senior Care. Answered questions. Brochures, business cards, and merchandise provided.
4/13/2016	Baileys Harbor Meal Site	Jennifer and Mary	9	Community Members	Chatted with individuals about who we are and how we can assist them.
4/18/2016	Senior Network Meeting	Lisa and Mary	6		Went to meeting that had been cancelled because of lack of attendance but ended up sharing with who was there!
4/20/2016	Liberty Grove Meal Site	Lisa and Mary	14	Community Members	Chatted with individuals about who we are and how we can assist them.
4/27/2016	Washington Island Meal Site	Jennifer and Mary	7	Community Members	Chatted with individuals about who we are and how we can assist them.
5/18/2016	Fish Creek YMCA Wellness Fair	Jennifer	30+	Community Members	What is the ADRC? What kind of assistance can you get there? Explained roles of EBS, DBS and I&A. Gave examples of reasons why people might call.
5/26/2016	Probation and Parole	Jess and Lisa	14		What is the ADRC? What kind of assistance can you get there? Explained roles of EBS, DBS and I&A. Gave examples of reasons why people might call.
6/14/2016	Washington Island Open House	Rachelle, Lisa, Jess, Mary, Carol, Jake		Community Members	What is the ADRC? What kind of assistance can you get there? Explained roles of EBS, DBS and I&A. Gave examples of reasons why people might call.
6/24/2016	Dementia Summit	Anna	44	community members	Gave an overview of dementia. Discussed resources available at ADRC for dementia and memory screens. ADRC brochures were provided.
6/29/2016	Sheriff's Department with Tammy Sternard	Jess	1	County Employee	What is the ADRC? What kind of assistance can you get there? Explained roles of EBS, DBS and I&A. Gave examples of reasons why people might call.
7/2/2016	Sandi Bosch	Jess	1		What is the ADRC? What kind of assistance can you get there? Explained roles of EBS, DBS and I&A. Gave examples of reasons why people might call.
7/20/2016	Huehns Funeral Home/Todd, Renee and Eric Huehns	Mary and Jess	3	Community members	Explained roles of EBS/DBS and I&A. Explained how they can make referrals.
8/29/2016	Peninsula Pulse Press Release	Jess	unknown	Ppulse readers	Open enrollment appointments available
8/29/2016	Door County Advocate	Jess	unknown	Door County Advocate Readers	Open enrollment appointments available
8/30/2016	Rotary Club	Rachelle	20	Rotary Members	What is the ADRC? Intro and brief explanation of the ADRC Services.
9/1/2016	CareGiver Support Breakfast	Lisa	36	Community members	CareGiver Support Information Talk
9/8/2016	Learning In Retirement	Mary and Jess	22	LIR members	The Maze of Medicare and Medicaid
9/18/2016	St. Peters	Judy Treptow (ADRC Board)	12	Community Members	ADRC General Information
9/21/2016	Eddie Allen (Radio)	Lisa	unknown	Community Members	ADRC Low Vision Support Group On Friday 9-23-2016

**COMMUNITY OUTREACH LOG**

DATE	EVENT/GROUP	STAFF	NO. OF PARTICIPANTS	PARTICIPANTS	CONTENT OF PRESENTATION/COMMENTS
9/30/2016	WDOR Radio Station	Jess and Mary	unknown	Listeners of WDOR radio station	Medicare open enrollment
10/4/2016	Door County Daily News / WBDK Radio Stations	Jess and Mary	unknown	Listeners of WBDK radio stations	Medicare open enrollment
10/18/2016	Children's Services Team - Human Services	Jess	8	CST Team Members	Age 18 transition for SSI/foster care youth. The Social Security disability process. Assistance DRBS may provide. Referrals for guardianship.
10/18/2016	People 1st of Door County	Anna and Jess	6	community members	Intro group to ADRC I & A and DBS
10/24/2016	Transistion Fair Sevastapol	Jess	20	community	Offered information to families with Special Ed Students transitioning out of school.
10/25/2016	Health Fair YMCA	Jennifer	35	Community	Ran booth and talked to possible consumers about General ADRC information
12/13/2016	Aurora	Robin and Barb	1	Lisa Frisque	Talked to Lisa about getting ADRC information out to patients. (Barb) Dropped off ADRC/EBS/DBS brochures.
12/16/2016	WDOR	Rachelle and Jake	unknown	Listeners of WDOR radio station	General ADRC information

**Door County Plan for Older People  
2016-2018**

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**Section 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 2016-2018.

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.

*Charles D. Vigness*

*10-22-15*

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

Date

*William Mueller*

*11-23-15*

Signature, and Title of the Authorized County Board Representative

Date

## Section 2 – Executive Summary

There is a significant amount of change happening in Door County that will influence our Aging Services and certainly our implementation of the 2016-2018 Aging Plan. These changes are following some very positive enhancements to our programming in Door County in the past three years. The changes will present both some challenges and interesting opportunities as we continue to strive to improve our services to the aging Door County population.

In 2013, we launched the Aging and Disability Resource Center of Door County (ADRC). As prescribed this was to be a one-stop-shop for individuals to receive information and assistance. At the same time, the Door County Senior Resource Center (SRC) was given a face-lift. The inside of the building was refurbished while programs and activities were enhanced. During the first year of the ADRC operations, we found that our senior population continued to have to get services in two separate places. To remedy this we moved our ADRC services to the SRC in August of 2014. In the first half of 2015, the county began to revisit the need for a new center. Although this is still in process, staff are optimistic that this will continue to move through the channels needed to get us adequate space for our programming needs.

We have recently lost two dynamic leaders in key roles, Aging Unit Manager and ADRC Director who have decided to retire. As we bring in their replacements we will have opportunity to continue to learn from our seniors about what program enhancements they would like to see. As these new managers get up to speed they will have opportunity to collaborate with our community partners, as we plan ways to meet the needs of our aging population.

The transitioning of these key staff members has hindered the planning process. However, we believe we have developed some sound areas to focus on, as well as appropriate goals. Our report reflects the five primary goals developed by the state as well as some additional local priorities. We understand that new leadership may bring different perspectives and may want to adjust these goals. We hope the plan reflects that we are already moving in the right direction to care for our older adults, and that we will continue to progress in the upcoming years.



<p style="text-align: center;"><b>Section 3 – Organization and Structure of the Aging Unit</b> <b>Section 3-A Mission Statement and Description of the Aging Unit</b></p>
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**Descriptive Information:**

The Aging Unit is managed by Jake Erickson who was just hired in August 2015. This position reports directly to the ADRC/Aging Unit Director. Jake's role is to oversee the services at the Door County Senior Center, as well as the four additional meal sites throughout the county. All staff involved with the meals, transportation and activities will report to the Aging Unit Manager.

We have added two additional staff positions in August 2015 which we are currently working to fill. These two positions include a Transportation/Accounts Specialist and an Activities Assistant. These positions were created to help meet the need of our aging population.

As we move forward, the Aging Unit will be a branch of service that is a part of the ADRC. Our goal is to stop thinking of the ADRC and the Senior Center as separate programs. This merge of units is an ongoing process that is currently taking place in Door County.

**Aging Unit Mission Statement:** Through Advocacy for the personal choices of older adults and their care givers, the Door County Senior Resource Center strives to design affordable, safe and accessible services.

Current contacts related to the plan include the Human Services Director, Joseph Krebsbach, ADRC/Aging Unit Director, Rachelle Gramman and the Aging Program Manager, Jacob Erickson. Please see below for contact information:

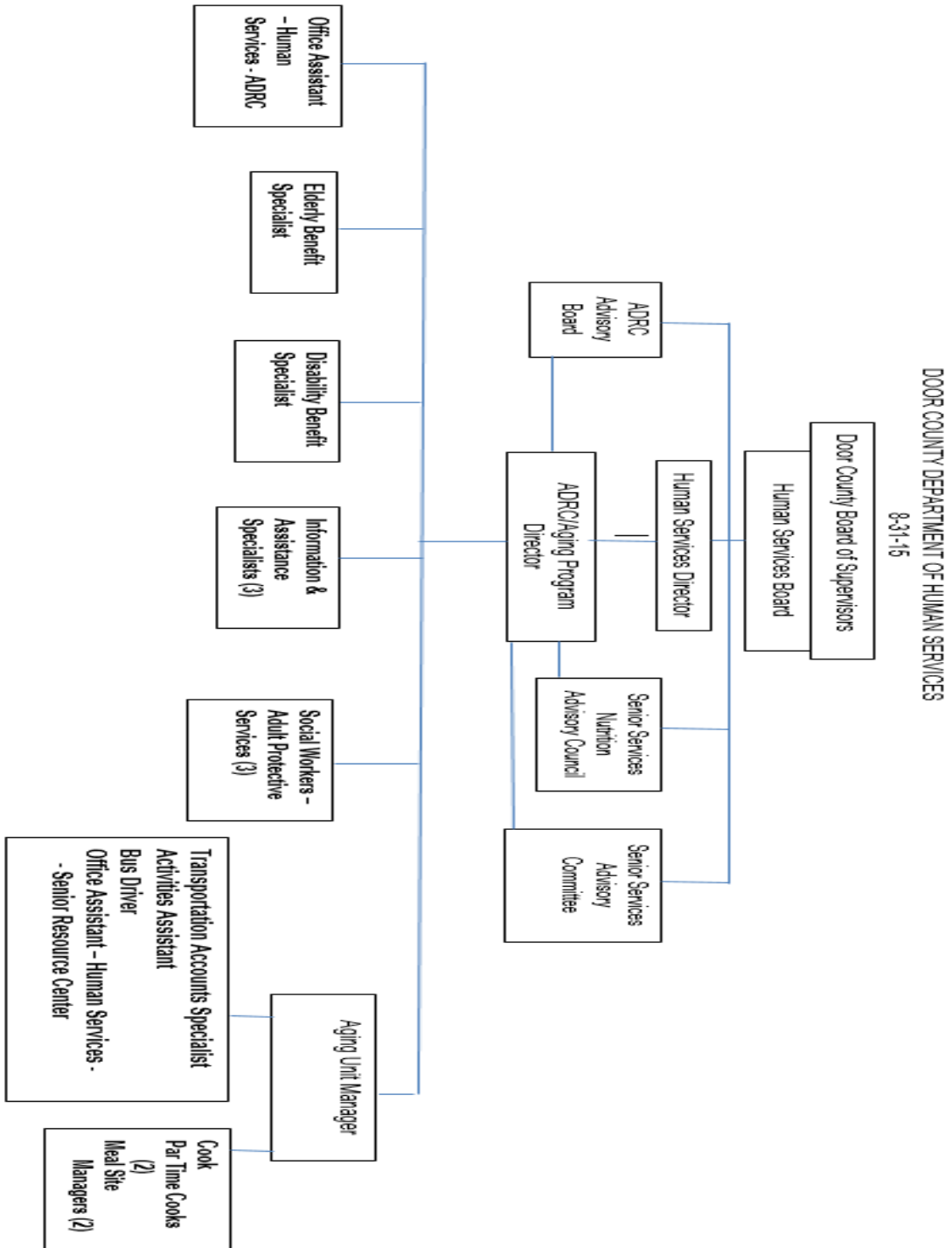
Joseph Krebsbach  
Human Services Director  
920-746-7155  
[jkrebsbach@co.door.wi.us](mailto:jkrebsbach@co.door.wi.us)

Rachelle Gramman  
ADRC/Aging Unit Director  
920-746-7153  
[rgramman@co.door.wi.us](mailto:rgramman@co.door.wi.us)

Jake Erickson  
Aging Program Manager  
920-746-2542  
[jerickson@co.door.wi.us](mailto:jerickson@co.door.wi.us)

**Section 3 – Organization and Structure of the Aging Unit  
Section 3-B Organizational Chart of the Aging Unit**

DOOR COUNTY DEPARTMENT OF HUMAN SERVICES – Revised 08/31/2015



<p style="text-align: center;"><b>Section 3 – Organization and Structure of the Aging Unit</b> <b>Section 3-C Aging Unit Coordination with ADRCs</b></p>
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In August 2014, we physically moved the ADRC from the Government Center to the Senior Center. This was to create better service to our consumers and a true “one-stop-shop”. Since the time of the move, our walk in traffic has significantly increased. Our staff continue to provide information and assistance services while pooling their resources.

The ADRC/Aging Director will report directly to the Human Services Director and will work with the three boards associated to the senior services. This ADRC Director position is one we are currently recruiting for. The ADRC Director position will have oversight of all services provided to our aging and disabled populations.

There will be lead workers in the areas of Information & Assistance as well as Adult Protective Services.

**ADRC Mission Statement:** The Aging and Disability Resource Center of Door County offers a friendly, personal and timely approach to providing information, assistance and access to community resources. The goal is to keep the citizens of the county active and engaged in their own well-being and with their communities.

In the first quarter of 2016, we will be working to create one distinctive mission statement for the combined divisions.

**Section 3 – Organization and Structure of the Aging Unit**  
**Section 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.

\*\*\*\*\*Currently recruiting for the Full-Time ADRC/Aging Program Director

<b>Organization</b> -The law permits one of three options. Which of the following permissible options has the county chosen?	<b>Check One</b>
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.	<b>X</b>
3. A private nonprofit corporation, as defined in s. 181.0103 (17).	
<b>Organization of the Commission on Aging</b> -The law permits one of three options. Which of the following permissible options has the county chosen?	<b>Check One</b>
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.	<b>X</b>
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.	
<b>Full-Time Aging Director</b> -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?	<b>Yes</b> *****

**Section 3 – Organization and Structure of the Aging Unit**  
**Section 3-E Membership of Policy-Making Body**

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

“Members of a county/tribe 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.

<b>Official Name of the Human Services Board</b>			
<b>Name</b>	<b>Age 60 or Older</b>	<b>Elected Official</b>	<b>Year First Term Began</b>
Mark Moeller	No	Yes	Reappointed Yearly
Roy Englebert	Yes	Yes	2012
Susan Kohout	Yes	Yes	2013
Wayne Kudick	Yes	Yes	2015
Megan Lundahl	Yes	Yes	2015
Helen Bacon	Yes	No	2012
Thomas Leist	Yes	No	2004
Joe Miller	Yes	No	2013
Robert Rau	?	Yes	2015
Nancy Robillard	?	Yes	2015

**Section 3 – Organization and Structure of the Aging Unit  
Section 3-F: Membership of the Advisory Committee**

If the aging unit has an advisory committee, listed below are the members of the advisory committee.

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.

<b>Official Name of the Aging Unit's Advisory Committee: ADRC Advisory Board</b>			
<b>Name</b>	<b>Age 60 or Older</b>	<b>Elected Official</b>	<b>Year First Term Began</b>
David Lienau (Chair)	Yes	Yes	2014
Christine Anderson (Vice-Chair)	No	No	2013
Julie Kudick	Yes	No	2015
Tom Krueck	Yes	No	2013
Robert Sullivan	Yes	No	2013
Wally Tess, Jr.	Yes	No	2013
Judith Treptow	Yes	No	2013
Tami Leist	No	No	2014
Rachelle Gramman	No	No	2016
Jacob Erickson	No	No	2015

<b>Official Name of the Aging Unit's Advisory Committee: Senior Services Advisory Committee</b>			
<b>Name</b>	<b>Age 60 or Older</b>	<b>Elected Official</b>	<b>Year First Term Began</b>
Judy Treptow	Yes	No	2013
Michael Green	Yes	No	2013
Susan Clemens	Yes	No	2014
Chuck Wagner	Yes	No	2012
Lynn Ballendux	Yes	No	2014
Christine Andersen	No	No	2012

**Official Name of the Aging Unit's Advisory Committee:  
Official Name of the Senior Services Nutrition Advisory Council**

<b>Name</b>	<b>Age 60 or Older</b>	<b>Elected Official</b>	<b>Year First Term Began</b>
Judith Treptow	Yes	No	2013
Michael Green	Yes	No	2013
Susan Clemens	Yes	No	2014
Chuck Wagner	Yes	No	2013
Jenny Spude	No	No	2014
Lynn Ballendux	Yes	No	2014
Carmen Schroeder	No	No	2012
Christy Wisniewski	No	No	2013
Christine Andersen	No	No	2013

**Section 3 – Organization and Structure of the Aging Unit**  
**Section 3-G Staff of the Aging Unit**

Listed below are the people employed by the aging unit – Senior Resource Center. Attach additional pages as needed.

<p>Name: Jake Erickson          Job Title: Aging Program Manager          Telephone Number/Email Address: 920-746-2545 <a href="mailto:jerickson@co.door.wi.us">jerickson@co.door.wi.us</a></p>
<p>Brief Description of Duties: Responsible for overall program administration for the Senior Resource Center including budget preparation, program and staff development, outreach and community collaboration. Is responsible for coordination of the Caregiver Coalition, acts as the Nutrition Director and Transportation Director.</p>
<p>Name: Jenny Fitzgerald          Job Title: Activities Assistant          Telephone Number/Email Address: (920)746-2544 <a href="mailto:jfitzgerald@co.door.wi.us">jfitzgerald@co.door.wi.us</a></p>
<p>Brief Description of Duties: This position works closely with the Aging Program Manager and will coordinate volunteers and activities and various events connected to the Senior Resource and Community Resource Center.</p>
<p>Name: Mary Bink          Job Title: Elderly Benefit Specialist          Telephone Number/Email Address: 920-746-2546          (Note – this position is now attached to the ADRC, not the Senior Resource Center)</p>
<p>Brief Description of Duties: Provides information, assistance and representation to county residents over 60 years and older about their public benefits and a wide variety of programs. Provides direct application assistance and acts as an advocate on their behalf.</p>
<p>Name: Robin Mark          Job Title: Transportation Accounts Specialist          Telephone Number/Email Address: 920-746-2372 <a href="mailto:rmark@co.door.wi.us">rmark@co.door.wi.us</a></p>
<p>Brief Description of Duties: Responsible for the oversight of the Door to Door Public Transportation System. In addition the position will perform various and numerous accounting duties, related the ADRC and Aging Programs.</p>
<p>Name: Wendy Schubert          Job Title: Office Assistant – Human Services – Senior Resource Center          Telephone Number/Email Address: 920-746-2542 <a href="mailto:wschubert@co.door.wi.us">wschubert@co.door.wi.us</a></p>
<p>Brief Description of Duties: SAMS data entry, meal counts, transportation coordination, completes various reports as well as receptionist duties.</p>
<p>Name: Gary Hanson          Job Title: Bus Driver          Telephone Number/Email Address: 920-746-2542 <a href="mailto:ghanson@co.door.wi.us">ghanson@co.door.wi.us</a></p>
<p>Brief Description of Duties: Provides transportation Services.</p>
<p>Name: Arne Thompson          Job Title: Cook          Telephone Number/Email Address: 920-746-2542 <a href="mailto:athompson@co.door.wi.us">athompson@co.door.wi.us</a></p>
<p>Brief Description of Duties: Prepares meals according to safe food practices.</p>
<p>Name: Jamie Stephan          Job Title: Nutrition Site Manager          Telephone Number/Email Address: 920-746-2542 no email</p>
<p>Brief Description of Duties: Delivers, serves and cleans up at Meal Sites.</p>



Name: Stacy Volkmann Job Title: Nutrition Site Manager Telephone Number/Email Address: 920-746-2542 no email
Brief Description of Duties: Delivers, serves and cleans up at Meal Sites.
Name: Nelvie Cauldwell Job Title: Nutrition Site Manager/Cook Telephone Number/Email Address: 920-847-2522 no email
Brief Description of Duties: Prepares meals and manages the meal site on Washington Island.

Listed below are the people employed by the Aging and Disability Resource Center. Attach additional pages as needed.

Name: <b>Rachelle Gramman</b> Job Title: ADRC/Aging Program Director Telephone Number/Email Address: 920-746-7153 <a href="mailto:rgramman@co.door.wi.us">rgramman@co.door.wi.us</a>
Brief Description of Duties: Development, administration, and operation of programs and services offered by the ADRC, Elder & Adult at Risk programs, and the Aging Unit, in accordance with State and Federal laws, rules, and regulations. Some of the key services provided are: information and assistance, benefits counseling, long-term care options counseling, health and safety services for elders / adults at risk, as well as a full array of Older Americans' Act services in our Aging Unit. This position is also responsible for the overall coordination and integration of these program areas that serve elderly persons, persons with physical or developmental disabilities, and their families.
Name: Jessica Holland Job Title: Disability Benefit Specialist Telephone Number/Email Address: 920-746-7154 <a href="mailto:jholland@co.door.wi.us">jholland@co.door.wi.us</a>
Brief Description of Duties: Responsible for providing information and assistance, counseling, consultation and representation to all county residents between the ages of 18 and 59, regarding public benefits and eligibility requirements of programs available to them. Services provided will meet all the State Department of Health Services' requirements as contained in the <i>Disability Benefit Specialist Program Policies and Procedures</i> and the <i>Disability Benefit Specialist Scope of Services</i> documents.
Name: Lisa VanAlstine Job Title: Information & Assistance Specialist Telephone Number/Email Address: 920-746-2315 <a href="mailto:lvanalstine@co.door.wi.us">lvanalstine@co.door.wi.us</a>
Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community resources; informing and educating people about their options; and assisting in connecting them to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.
Name: Anna <b>Zahorik</b> Job Title: Information & Assistance Specialist Telephone Number/Email Address: 920-746-2476 <a href="mailto:avanlannen@co.door.wi.us">avanlannen@co.door.wi.us</a>
Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community resources; informing and educating people about their options; and assisting in connecting them

to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.

Name: Jennifer Bender

Job Title: Information and Assistance Specialist

Telephone Number/Email Address: (920)746-7154 [jbender@co.door.wi.us](mailto:jbender@co.door.wi.us)

Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community resources; informing and educating people about their options; and assisting in connecting them to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.

Name: VACANT

Job Title: Administrative Assistant III – Human Services – ADRC

Telephone Number/Email Address: 920-746-2372

Brief Description of Duties: Prepares financial reports, reconciles accounts, assists with budget preparation, data entry and also provide general clerical duties.

Name: Barbara Snow

Job Title: Office Assistant – Human Services – ADRC

Telephone Number/Email Address: 920-746-2544 [bsnow@co.door.wi.us](mailto:bsnow@co.door.wi.us)

Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information and assistance about a wide variety of public and privately funded community resources, including referral to the appropriate ADRC staff person(s). Also performs a variety of receptionist / data entry / fiscal / and simple information and assistance functions

Name: Erin Szakala

Job Title: Social Worker – Adult Protective Services

Telephone Number/Email Address: 920-746-2543 [eszakala@co.door.wi.us](mailto:eszakala@co.door.wi.us)

Brief Description of Duties: Investigates and provides services to Elders and Adults at Risk of Self-Neglect, physical, sexual, emotional and financial abuse.

Name: Kim Kramer

Job Title: Social Worker – Adult Protective Services

Telephone Number/Email Address: 920-746-2318 [kkramer@co.door.wi.us](mailto:kkramer@co.door.wi.us)

Brief Description of Duties: Investigates and provides services to Elders and Adults at Risk of Self-Neglect, physical, sexual, emotional and financial abuse.

Name: Carol Lenius

Job Title: Social Worker – Adult Protective Services

Telephone Number/Email Address: 920-746-2550 [clenius@co.door.wi.us](mailto:clenius@co.door.wi.us)

Brief Description of Duties: Investigates and provides services to Elders and Adults at Risk of Self-Neglect, physical, sexual, emotional and financial abuse.

## Section 4 – Context

The provision of any social service that wishes to be appropriate, adequate and ultimately successful must recognize the unique environment in which the need exist. Door County presents a very challenging set of geographical, economic and social considerations. The mosaic of these three aspects provides the context within which the Aging Plan for 2016 – 2018 is set. Door County covers a vast range geographically. It is 90 miles from the southwest corner to the northeast tip. Washington Island accessible by ferry brings an additional, but valued, dimension to the County. The peninsula encompasses sparsely populated agricultural regions as well as a number of small towns and villages along its coastal landscape.

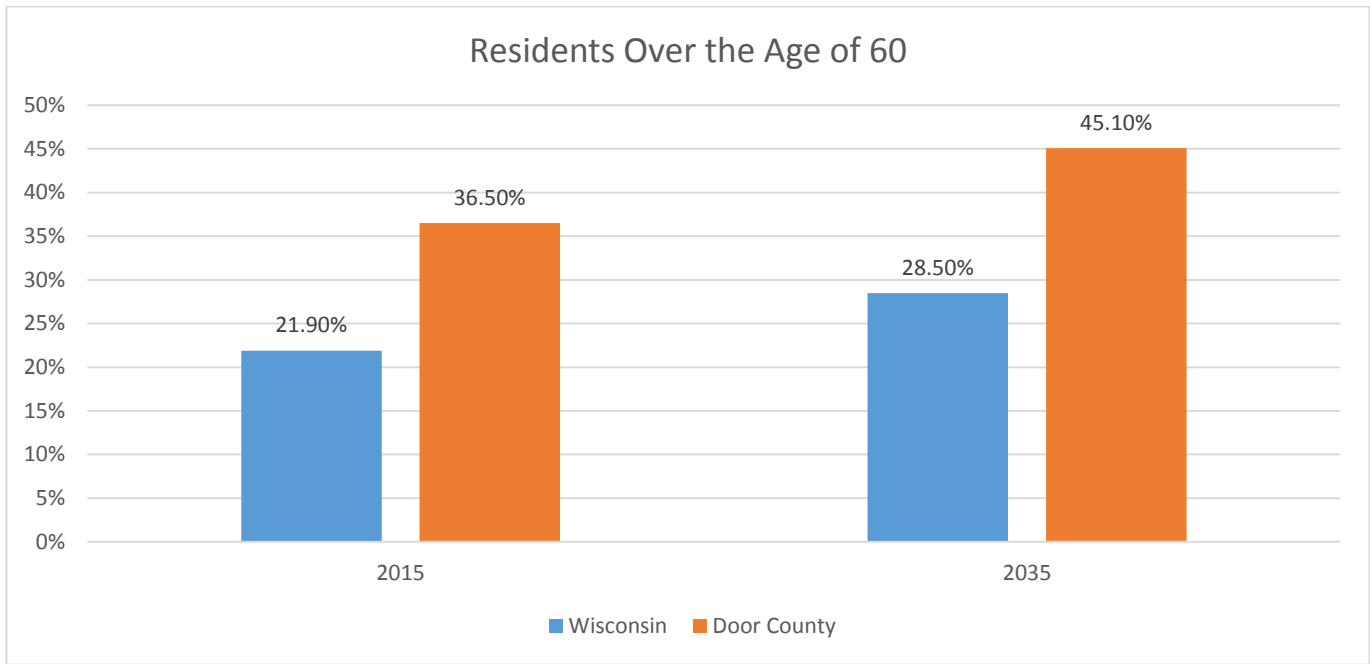
According to the U.S. Census Bureau the county sect of Sturgeon Bay has an estimated 2014 population of 9,155 while Door County's population is 27,976. The county sect of Sturgeon Bay has 32.7 percent of Door County's population in 2014 and is located in the southern portion of the County. From an economical perspective, Door County relies heavily on the recreational, tourism based sector. There is a large agricultural dimension and a small, but significant manufacturing segment. The population of Door County reflects a strong Scandinavian and Belgian influence. Added to the above noted factors, servicing the aged population must take into account seasonal variance. From Memorial Day to Labor Day the sheer number of people within the county can place greater pressure on services. Conversely, the long winter months increase isolation and mobility.

Door County's widely held attractiveness has drawn a very diverse population reflecting both the arts and those seeking a retirement setting. There are many who have part time residences desiring a warmer setting from November to April.

Current census data reflects the dramatic impact of two significant factors:

1. The upward trend of expected lifespan for both males and females.
2. The large number of "baby boomers" – those born between 1946 and 1964 – entering the over 60 category.

According to Statewide 21.9% of residents in 2015 are over 60 years of age. This proportion is expected to reach 28.5% by 2035. However, Door County's makeup of those over 60 is going from 36.1% to 45.1%. This is a 25 percent increase with respect to those in the target group to be served. Door County ranks as one of the top three counties with respect to the proportion of the target population in the State of Wisconsin. The gender distribution has females outnumbering males by more than 20 percent.



The reality of over one-third of Door County residents eligible for some level of service trending up to a proportion nearing one-half within two decades means this plan must begin to prepare for the future.

Given our experience over the past three years and the above information about the demographics of Door County, a critical issue is the rapid growth of our aging population. We will have an increased need for services that don't currently exist at a capacity to meet the increased demands. Door County has also seen a continuing trend of increased elder abuse referrals. These current trends are confronted with the clear issue of financial county support at a time when increasing demands are being placed on limited resources.

To obtain information from seniors concerning needs and services for the plan, we used both a written survey and oral surveys (see Section 11 – Appendices – Attachments 1 & 2). The written surveys were done at all meal sites, was in our newsletter and was handed out at the recent Door County Fair. The Lion's Club worked at the Fair to collect these. Aging Services Committee Members also did oral surveys at the meal sites. Surveys were also given to our Meals on Wheels participants. The questionnaires and interviews identified the following as primary needs in the county:

- Physical/Health Condition of the target population
- Nutrition
- Socialization
- Caregiver Support/Burnout
- Transportation

The last three year aging plan had focused on isolation as a concern. It did not rise to the level of the above needs through the survey; however, there is concern about who completed the surveys and those who were interviewed as possibly not representing all those who are actually isolated. Based on staffs' interactions and input from other community providers, isolation still appears to be a problem for our population. Therefore, addressing isolation issues will be included in this plan as well.

Door County's long-term care system is in the process of significant changes as we create this plan. We are currently transitioning from the CIP and COP System to the Family Care System.

We are not yet sure the implications of how this new long-term care system will work with our aging network. We have kept open communication with the Managed Care Organizations, specific to our roles related to adult protective services and the Aging Disability Resource Center functions of determining eligibility, for Family Care.

As mentioned in our organization information, the ADRC and Aging Unit are in the process of becoming one unit. This unit includes our information and assistance services, nutrition programs, educational programs, as well as adult protective services systems. This is why section 3 of this plan has included all staffing affected by this merger. Consistent with the staffing changes that are being made within the County, we are considering looking at the make-up of these boards representing the aging population.

Door County is a resource rich community with a high number of for profit and nonprofit organizations serving our target population. There is also positive and far reaching collaboration between those groups. These groups have an intense concern over the growth of the target population. As an example of this collaboration, our aging programs already partners with hospital staff in areas related to memory care, physical rehabilitation, and nutrition programming. Hospital staff regularly give health-related presentations at our Sturgeon Bay meal site and regularly collaborate with our ADRC and APS staff. The work with the hospital is indicative of the kind of collaboration that occurs. Door County has had a very strong support of our I-Team from various county government units as well as private entities. The aging unit continues to collaborate with church and civic group for provisions of our meals programs and in outlying areas of the county.

As mentioned, the county is looking to move forward with a new building. Fortunately, in addition to the collaborating partnerships Door County has been blessed to have a newly developed Friends of the Senior Center group. Their goal and purpose is to help with financial support and guidance into filling gaps in our service arrays for our target population.

The challenges facing Door County are how to maintain and grow upon our successes in transportation and nutrition as well as responding to currently under-met or unmet needs. Over the past three years, Door County has struggled with maintaining facilitators for our caregivers support group and as a result we have seen decreased participation in these groups. In our surveys, consumers continue to identify caregiver burnout as an area to address. Another challenge will be to provide appropriate representation of the target groups needs when competing for dwindling financial support.

Although we provide services such as frozen meals and meals on wheels outside of the Sturgeon Bay areas, we continue to be limited in providing an array of services in the outlying areas of the county.

## **Section 5 – Public Involvement in the Development of the County Aging Plan**

Input into the aging plan was received through the former mentioned surveys and has also been on the agenda and reviewed in both the ADRC board meetings as well as our Senior Services Advisory Committees meetings.

Door County will hold its Public Hearing to review the plan on September 15<sup>th</sup> 2015 at 1:30 at the Senior Resource Center. Public notice of this was in the County Newspaper on September 9<sup>th</sup> and 12<sup>th</sup> 2015. The Public Hearing was also announced in the September issue of the Senior Center Newsletter distributed at various public locations and mailed or emailed to our consumer list. We had only one hearing pertaining to this plan, however, as the publication indicates the plan was available for review at all meal sites and per request.

### **PUBLIC MEETING NOTICE 2016-2018 Aging Unit Plan (Senior Resource Center)**

The Door County Department of Human Services will hold a public participation meeting on Tuesday, September 15, 2015 beginning at 1:30p.m. The meeting will take place in the Senior Resource Center located at 832 North 14<sup>th</sup> Avenue, Sturgeon Bay, WI. The Senior Center is accessible to those with special needs.

The purpose of the meeting is to gather citizen input on the proposed Aging Unit Plan for 2016-2018 focusing on the services provided by the Senior Aging and Disabilities Resource Center. These services include: outreach, information and assistance, nutrition programs, transportation program, elderly benefit specialist, activity programs, caregiver support, evidence based health promotions, etc.

A draft copy of the proposed Aging Unit Plan for 2016-2018 will be available for inspection at the Senior Center and other meal sites beginning September 2<sup>nd</sup>.

Those unable to attend the meeting who would like to offer comments may submit their written statements to the Department of Human Services in care of Joseph Krebsbach, Director at 421 Nebraska Street, Sturgeon Bay, WI 54235. Additionally, citizens may offer comments via email to [sbarlament@co.door.wi.us](mailto:sbarlament@co.door.wi.us).

The regular open board meeting of the department will occur immediately upon conclusion of the public participation process meeting.

**In compliance with the Americans with Disabilities Act, any person needing assistance to participate in this meeting should contact the Office of the County Clerk at 920-746-2200. Notification 48 hours prior to a meeting will enable the County to make reasonable arrangements to ensure accessibility to that meeting. This meeting location is wheelchair accessible.**

Below is a copy of the Public Meeting Notice that was in the Door County Advocate. This notice ran on September 9<sup>th</sup> and 15<sup>th</sup>, 2015.

**PUBLIC-MEETING NOTICE**  
**2016-2018 Aging Unit Plan**  
(Senior Resource Center)

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WI-5001-9C2870

WNAXLP

# Door County Advocate

STATE OF WISCONSIN  
BROWN COUNTY

**DOOR CO HUMAN RESOURCES**  
421 NEBRASKA ST  
STURGEON BAY, WI 54235-2225

Being duly sworn, doth depose and say that she is an authorized representative of the Door County Advocate, a newspaper published in Door County, Wisconsin, and that an advertisement of which the annexed is a true copy, taken from said paper, which was published therein on:

**Account Number: 279155**

**Ad Number: 5001932870**

Published Date: September 9, 2015

Published Date: September 12, 2015

(Signed): Bradley Zitek Date: 9-14-15  
Legal Clerk



Signed and sworn to before me

Alexandra Zakowski  
Notary Public,  
Brown County, Wisconsin

My commission expires 3/3/19

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FAX 877-943-0443  
EMAIL [legals@doorcountyadvocate.com](mailto:legals@doorcountyadvocate.com)



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WNAXLP

WA-5201032870

**DOOR COUNTY AGING AND DISABILITY RESOURCE CENTER**

**ADRC Advisory Board**

**Monday, July 20, 2015**

**4:00 p.m. at the Door County Senior Resource Center**

**AGENDA**

**Helen Bacon, Chair**

1. Call to order at 4:00 p.m.
2. Establish Quorum
3. Adopt Agenda
4. Approve Minutes from the 4/20/2015 Meeting
5. Public Comment
6. Old Business
  - Space Issues: Tour of temporary office space.  
Other office changes
7. New Business
  - 4/10 ADRC/SRC Schedule
  - 3 yr. Aging Plan
  - Friends of the Senior Center
  - Implications of Governor's Budget-attachments
  - May ADRC month celebration
  - Family Care Update:
    - Waitlist Management
    - New ICA (IRIS)-attachment
  - MDCMC Strategic Plan Follow-up/Senior Care HoshinOther general updates
  - One Board member position opening
  - Staff Changes
8. Confirm Next Meeting Date and Time
  - The next meeting is tentatively scheduled for October 19, 2015 at 4:00 p.m.
9. Adjourn

*These minutes have not been approved by the oversight committee and are subject to approval or revision at the next meeting.*

## **ADRC Advisory Board - Minutes**

**Monday, July 20, 2015**

**Senior Resource & Community Center, 832 N. 14<sup>th</sup> Ave., Sturgeon Bay, WI**

**THESE MINUTES HAVE NOT BEEN REVIEWED AND APPROVED BY THIS BOARD AND ARE SUBJECT TO REVIEW AND REVISION BY THE BOARD AT THEIR NEXT REGULARLY SCHEDULED MEETING.**

### **Business Meeting**

#### **1. Call to Order**

- The meeting was called to order at 4:02 p.m. by Helen Bacon. Members present were: Christine Andersen, Helen Bacon, Paul Kok, Tom Krueck, Robert Sullivan, Tami Leist, Butch Tess and Judith Treptow. Dave Lienau was excused. Other persons present were Patti Peterson. Robin Mark took minutes.

#### **2. Establish a Quorum**

- A quorum was established and the meeting continued.

#### **3. Adoption of Agenda**

- A motion was made by Christine Andersen, and seconded by Butch Tess to adopt the agenda. The motion was carried unanimously.

#### **4. Approve Minutes from 4/20/15 Meeting**

- A motion was made by Tom Krueck to approve the minutes and was seconded by Butch Tess. The motion was carried unanimously.

#### **5. Public Comment**

- Tom Krueck shared that with the onset of Family Care, he is hearing many concerns from the public regarding the workings of the new process. With 2 MCO's offering different pay scales for services, consumers are concerned about finding care providers. Judy Treptow asked if private vendors can be a part of Family Care and Patti explained that yes they can as long as they have a contract with the MCO's and IRIS.

#### **6. Old Business**

- **Space Issues: Tour of Temporary Office Space** -Patti invited the board to tour the trailer that currently is housing some of the ADRC and SRC staff. Judy and Christine shared that they had already been out to the trailer and had some concerns regarding the heavy chemical smell that permeates the air inside. The other item of concern was air circulation. Patti shared that the worker's did have the windows open for a while but found that telephone conversations were not necessarily private, people in the parking lots could hear them speaking. Once the board went to the trailer, the first item of concern was the metal ramp. There was concern about slipperiness not only during the upcoming winter but also during rainy days. Once the board

entered the trailer, they immediately noticed the chemical smell. The workers that were present shared that they were pretty much used to the smell, but sometimes, if they are away from the trailer for a while, it hits them when they return. The staff tries to combat this with scented air fresheners. The ant problem that was present when the staff moved into the trailer seems to have abated since the purchase of ant traps. The board also noted that the trailer has no running water and employees must walk across to the Senior Center to use the restroom. The staff also cannot meet with clients in the trailer due to a lack of separate offices and no privacy. The board asked if there were mold issues in the trailer and while the workers stated they were not aware of any, the board suggested they watch for leaks and drips during inclement weather. The staff present did share with the board that there were positive aspects to being in the trailer. These included the many windows that let in a lot of natural light, the solitude with minimal interruptions, WIFI and great co-workers. Small issues with the trailer, such as wall panels coming loose, were corrected before the staff moved in, so all in all, it is a tolerable space.

- **Other Office Changes:**

The Disability Benefit Specialists old office has been converted into a small conference room. This room can be used by all who need it, but is being used primarily by the Disability Benefit Specialist since they cannot meet with clients in the trailer. The back room that housed the Senior Center Manager and ADRC Director is currently empty and used for larger meetings. Once a new Senior Center Manager is hired, that person will be housed in the back room. There also will be another position added. The position will be a part time Activities/Volunteer Coordinator position. This position will support the Senior Center Manager and be housed in the back room also. The goal is to get this person hired during the month of August. The Senior Center Manager will still be responsible for the entire aging program and will oversee the Activities/Volunteer Coordinator. Now that the Senior Center Manager has resigned and the ADRC Director is leaving, the two departments will be reorganized. Another position that is being talked about adding is a Financial/Transportation position. There will also be 2 full time receptionists. Tom Krueck wanted to know how the decisions get made on what types of positions are needed and when to fill them. Helen explained that they look at the needs of the department then the budget. Once those items are looked at, the information is brought to the different boards and they have the final say so on whether or not the positions get filled. Tom's concern was that they were just dovetailing job duties together without giving much thought to the qualifications needed to complete the different jobs. Helen assured him that this was not the case. Tom also stated that it is hard to replace good knowledgeable employees and wondered what the County was going to implement to try to keep their employees on staff with a high morale. Judy Treptow stated that changes need to happen from the top down. Patti shared that the Management team has been looking at ways to try and increase employee morale and has so far come up with a mission statement and will be soliciting employee input on how to accomplish this. Paul Kok brought up that the issues in Human Services are not just a problem in this department. The problem is wide spread among other departments also. The county has not had long term steady leadership for a while and he feels that once we have steady leadership things should improve. Paul himself has just been appointed to the County

Board and is still learning all the ins and outs. It was shared by others that they felt that the County Board does not recognize the SRC or the ADRC and the work that goes on in those two organizations. Helen does sit in on the meetings and while there is support for the SRC, the SRC is just one of many departments with issues.

## 7. New Business

- **4/10 ADRC/SRC Schedule** – Patti explained to the board why we started the 4/10 schedule. Now that we have more room, issues have arisen regarding long work days and finding a work/family balance. We currently have a survey out that is being filled out by all customers of the SRC and ADRC. There is another survey being created for the staff. Once all the surveys have been distributed, filled out and tallied, decisions will be made on whether to keep the 4/10 schedule or revert back to the traditional 5/8 schedule.
- **3 Yr. Aging Plan** – The plan is supposed to be done and submitted to GWAAR by 9/1/15. The plan is very in-depth. We have contracted with Lyndsey DeKeyser, an old GWAAR employee, to assist the team in the creation of the plan. Judy Dobbins, previous Senior Center Manager, has chosen to not be a part of this new aging plan. There is a big part of the plan that is community feedback. Barb Snow, Office Admin, is working on modifying a survey we borrowed from Brown County. This survey will be done tomorrow and ready to hand out to the Senior Services Advisory Committee/Nutrition Board. The Committee/Board will work to go to the public and get the surveys filled out and back to the County as soon as possible. Tom Krueck has volunteered to tally those surveys once they have all been received back. Bob Sullivan and Helen also volunteered to help wherever they are needed to get this information gathered and back to the team. Patti shared that if she has any questions, she can call Judy Dobbins, but Judy does not wish to be on the County payroll anymore. Robin will make sure that Tom has a blank copy of the survey to use to prepare for when the surveys are completed. This way he will have an idea of what questions are being asked of the community.
- **Friends of the Senior Center** – Patti shared with the team that the group seems to have lost a bit of steam. The top person who had volunteered to do the main fund raising ended up resigning due to frustration at the slowness of County Government. The President has also had some health issues which have slowed the group down. With Judy Dobbins no longer a County employee, she will have time to join the group and help renew the enthusiasm for raising money. Helen shared that there are many convoluted stories in the community about the County Board and their lack of support for the new Senior Center. These stories are just not true. The County Board is for the new center and wants to see it completed. Patti stated that she would ask Judy Dobbins if she would be willing to write an article each month regarding the Friends group and how they are doing.
- **Implications of Governor's Budget** – Patti included attachments to the agenda which gave some information on the survival coalition and the types of questions. She felt the articles did a good job of summarizing the pros and cons. There will be huge changes for clients between the new program and the loss, in some cases, of their case managers. People waited until Connections was on board due to LuAnn (a former county case manager) working for them. The Enrollment Counselors have 16 more to enroll. Enrollment Counselors have done an amazing job and are done September 15<sup>th</sup>. Patti would love to see an opportunity open up for Jen. Tom K had

questions regarding the MCO's. If people see services cut will be voiced loudly by second month because that is when things will pick up. Helen said people need to call their legislators because they need to hear what is going on. Patti hopes folks will give the MCO's a chance. They really do want to help and provide quality services. Helen said we are in the top 7 of all counties in the state as far as providing services to our community. The ADRC will be hearing about gaps in coverage. The ADRC should have everyone off of the waitlist by April 16<sup>th</sup>. Butch shared frustrations in the community from folks that use wheelchairs with doors that don't open with buttons or electric eyes

- **May ADRC Month Celebration** - Patti thanked Helen and Judy for helping with celebrations. Staff were surprised by ADRC by gifts. Patti passed around a thank you card to the board from the staff.
  - **Family Care Update** – Training is this Thursday. Seven people per month paperwork starts August 1<sup>st</sup> to get ready for October 1<sup>st</sup> folks coming off the waitlist. Christine who does when EC leaves. Patti shared that the I&A Specialists will continue with the enrollment/disenrollment process.
  - **MDCMC Strategic Plan Follow-Up/Senior Care Hoshin** – Judy and Patti did a presentation at Stone Harbor for the hospital. The hospital wanted a follow up meeting to prepare for not thinking ahead enough about help for seniors. The next meeting is August 19<sup>th</sup> and will need 4 hours of planning.
  - **Other General Updates** – one board member position opening. See information above. Paul talked to Dan Austad about continuing on the ADRC board and will be continuing to do so until told differently. Patti shared with the board that the Elder Benefit Specialist, Melissa Andrews, will be leaving for another position outside the county at the end of July.
- 8. Confirm Next Meeting Date and Time**
- The next meeting of the ADRC Advisory Board will be held on Monday, October 19, 2015, at 4:00 p.m. at the Senior Resource & Community Center.
- 9. Adjourn**
- A motion was made by Christine Andersen, to adjourn the meeting. The motion was seconded by Judy Treptow. Meeting adjourned at 6:10 p.m.

Recorded by Robin Mark

**DOOR COUNTY SENIOR RESOURCE CENTER**  
**COMBINED - Senior Services Advisory Committee/Nutrition Advisory Council**  
**Thursday, July 16, 2015**  
**10:00 a.m. at the Door County Senior Resource Center**

**AGENDA**

1. Call meeting to order at 10:00 a.m.
2. Read Opening Statement – “Seniors Really in Charge”
3. Review and approve the agenda
4. Review and approve the Minutes of the 04/16/2015 – Joint Senior Services Advisory Committee / Nutrition Advisory Council meetings
5. Senior and Community Center
6. Three year Aging Plan
7. Nutrition related agenda items:
  - Farmer Market Vouchers/Barb
  - Meal site updates/Carmen
8. Ideas for future meeting agenda items:
  - a) Tentative future meeting date: September 1, 2015
  - b) Adjournment

Menu: Lemon pepper chicken, brown rice pilaf, carrots, fresh grapes, birthday cake with ice cream/soup and salad bar option.

# Combined Senior Services Advisory Committee/Nutrition Advisory Council – Minutes

Thursday, July 16, 2015 at 12:00 p.m.

Senior Resource & Community Center, 832 N. 14<sup>th</sup> Ave., Sturgeon Bay, WI

**THESE MINUTES HAVE NOT BEEN REVIEWED AND APPROVED BY THIS BOARD AND ARE SUBJECT TO REVIEW AND REVISION BY THE BOARD AT THEIR NEXT REGULARLY SCHEDULED MEETING.**

## **Business Meeting**

### **1. Call to Order**

- The meeting was called to order at 10:00 a.m. by Chuck Wagner. Members present were: Carmen Schroeder, Christine Andersen, Jennifer Spude, Judy Treptow, Lynn Ballendux, and Sue Clemens. Others Present were: Patti Peterson, Joe Krebsbach, Lyndsay DeKeyser, and Mark Moeller. Carrie Porter from GWAAR on the phone. Barb Snow took minutes.

### **2. Establish a Quorum**

- A quorum was established and the meeting continued.

### **3. Adoption of Agenda**

- A motion was made by Jennifer Spude, and seconded by Sue Clemens to adopt the agenda. The motion was carried unanimously.

### **4. Approve Minutes from 04/16/2015 Meeting**

- The meeting minutes were approved with the edit removing Christine Andersen who was not at that meeting. Request was made to make the minutes shorter and get them out faster.

### **5. Senior and Community Center**

Joe reviewed the progress on the new Senior Center building. He stated that the preliminary design phase was going to Venture Architect. The county board passed the resolution to move the project forward. \$4 million, half paid by the county and half fundraised. Venture Architect said \$6.4 million and the county board move that they would cover \$4.4 million and still looking to fundraise \$2 million. The resolution passed in June so now we can move to phase three on the project which is the size of things. The county board says they can start phase three once \$1 million is raised in fundraising by September. When Joe and Patti went to the friends group and told them they had to raise the \$1 million fundraising by September they replied that it was really aggressive. Joe stated that he is working on being prepared behind the scenes with Venture Architect. They will hire a contract manager on the county's behalf to work with us on what our needs are and will also oversee the building. Mark Moeller mentioned that Paul Kok was familiar with the process and fundraising and hopes he works with the friends group.

- Lyndsay DeKeyser is here to help with the Aging Plan. She is working with Carrie Porter at GWAAR to work with getting approved and Feedback from community and partners. Carrie Porter joined the conversation by phone to help walk through what the requirements were for the Aging Plan as well as



to give advice on how to reach the public, who has to be notified and example questions to ask. The draft has to be done by September 1st. The Common Identity for the Aging Handout was used by Carrie Porter to help describe Principles of the Aging Plan. Carrie said that the Aging Plan is required by the Older Americans Act from GWAAR to engage them in planning and that the Wisconsin Elders Act does that as well. This is to be done with the elders not for the elder adults. The Policy and Advisory Committee follow the format is given by GWAAR and approved by state. Appendix E gathering input has four basic questions that are asked; 1) Where are you now? 2) Where do you want to be? 3) How will we get there? and 4) How will we know we are making progress? This helps gain staff input within the community. It has five required goals; Elder, Nutrition, Services, Supports, and Caregivers. One plan for each goal is required. Physical staff and Nutrition team approved plans. GWAAR has to submit to state by November. Carrie also pointed out that the goals for this plan need to look significantly different than the last plan. Clinics and classes held on a regular basis should not be implemented in the plan as this is regular business. Joe asked Carrie that since the plan is due September 1<sup>st</sup>, what happens if we get the plan done but cannot get the signatures? Lyndsay said and Carrie confirmed that the plan can be submitted without the signatures and get the signatures by the second week in September. Once the plan is written a public hearing is required so they can add their input. Carrie said the Public hearing has to be officially noted and can be done where the Seniors would know it's happening and they are already there. Joe mentioned the public hearing could be done during the August 11 board meeting scheduled. Lyndsay says it has to be written before public hearing. Joe said maybe will do an extra meeting DHS specific to Aging Plan at the end of August meeting need to schedule. Chuck said for public input the best place to do it is at lunch at the Senior Center where you can sit down with the people who eat here and ask questions. Sue asked if there were specific questions. Carrie said she can send us a sample of questions. Joe said the public that does not attend the meeting or at the center should also be asked. Carrie said she will send Lyndsay info from other aging units that have questions that worked for them. Jennifer said we should put a note on the human services board agenda for the public. Chuck mentioning reaching the other meal sites as well as the Door County Fair. Joe mentioned to Christine Andersen that she can connect to the people up in Washington Island. When asked if we could get someone on the board from Southern Door Chuck mentioned that they probably don't want to be on the board. Chuck works the Lions Club stand he could get out surveys there. Patti said it would be better if we had someone there to fill out the questions. Joe said he was going to ask for assistance from the SSAC group to get the surveys out there. Chuck to get him a questionnaire and he'll put it out there at the fair. Also Roy Englebert will be there at the Lions Club stand as well and can help hand out the surveys. Joe said get the survey by Wednesday the 29<sup>th</sup> to Chuck. Jennifer said it meets all audiences. Patty is going to bring this up at the ADRC meeting and ask for volunteers. Lyndsay said we're just trying to reach the people the plan is for. Joe said we have the written survey and the oral conversation to get together for Judy Treptow, Lynn Ballendux and Sue Clemens. Lynn and Sue are going to get 3 to 5 people out of their craft group to do the oral surveys. The same surveys go to Christine Andersen for Washington island. Christine said yes but she is concerned her group may feel the same way that Southern Door is feeling which is separated from us. Joe said that it's a plan for all services; Meals on Wheels ADRC, Washington Island outreach etc. The Aging plan is for all areas not just Senior Center building related. Carmen asked if we can add it to the newsletter and reach out to the meal sites.

Carrie Porter said that the September 1<sup>st</sup> Aging Plan deadline was extended until September 21<sup>st</sup>. Joe going to ask that Carrie get the questions to Lyndsay by July 21<sup>st</sup>. Chuck mentioned getting the surveys to the homebound, MOW's. Judy Treptow said maybe we can get Trudy from the Red Hatters to help with the surveys. Joe asked Barb to get the information for Trudy Berkhahn and call and ask her to help. Patti said she would bring it up at the ADRC Advisory Committee and get their thoughts on Monday (July 20<sup>th</sup>). Chuck said the Public hearing can be on September 8<sup>th</sup> and changes in the Aging plan can be done by the 21<sup>st</sup>. It just won't get signed until October.

Joe working on how to restructure the ADRC and Senior Center. Changing job descriptions, creating jobs, some things have fallen apart. Guardianships are nonexistent, no new volunteers, no recruiting and training etc. The Caregiver program has been struggling. Southern Door and Sturgeon Bay are without facilitators for those groups. Lyndsay said she is still trained in Powerful Tools and that there is training for facilitators. Lyndsay said that could be a goal for the Aging Plan; to get training for Facilitators for Caregiver.

**6. Nutrition related agenda Items.**

- **Farmers Market Vouchers/Barb**

We were able to start handing out Farmers Market vouchers on June 1<sup>st</sup>. We only have a few farmers market packets left. Judy set up a Mini farmers market here at the Senior Center with a couple of vendors on Thursdays from 12:00-1:30. So far it has been a huge success.

- **Meal site updates/Carmen**

Forestville and Baileys Harbor have been safety and sanitation education. The function of meal sites are for community enjoyment and talking. Carmen is going to Northern Door and Washington Island Packer Party. Site surveys here as well. Next week Linda Will and Kathy Ash and Nelvie going to Safe Serve Certified. This is offered to staff as well. Mark mentioned that the Packer Party is August 21<sup>st</sup> here at the Senior Center and September 21<sup>st</sup> on Washington Island. Chuck mentions that MOW's is more about human contact versus nutrition. Carmen replies that it is about nutrition of the heart and health.

**7. Ideas for future meeting ideas**

- Better in Communication.
- Chuck said he was going to step down as chairman but was persuaded to stay until April.

**8. Confirm Next Meeting Date and Time**

- A motion was made by Sue Clemens and seconded by Judy Treptow to confirm the next meeting. The meeting will be held on Thursday, September 17, 2015.

**9. Adjourn**

**Recorded by Barb Snow**

## DOOR COUNTY HUMAN SERVICES BOARD MINUTES

Wednesday, September 15, 2015

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

1. **Call to Order-**  
Chair Mark Moeller called the September 15, 2015 meeting of the Door County Human Services Board to order at 1:38 pm at the Senior Center, 832 North 14<sup>th</sup> Avenue in Sturgeon Bay immediately following the Public Participation Meeting that was scheduled for 1:30 p.m.
2. **Roll Call / Establishing a Quorum-**  
**Present:** Chairman Mark Moeller, Helen Bacon, Roy Englebert, Paul Kok, Susan Kohout, Tom Leist.  
**Excused:** Dr. John Beck and Joe Miller  
**Staff Present:** Joseph Krebsbach - Human Services Director, Cori McFarlane – Human Services Deputy Director, Ken Pabich – County Administrator, Robyn Brauer – HS Administrative Assistant and Shawn Barlament – Office Manager / Recording Secretary.  
**Others present:** Sandy Brown, Andrew Goodman, Pam Busch, Judy Ritter and Markus Ritter.  
The Board members present established a quorum.
3. **Adopt Agenda-**  
A motion was made by Tom Leist and seconded by Roy Englebert to adopt the agenda. All were in favor.
4. **Approve Minutes-**  
Susan Kohout motioned to approve minutes from the August 11, 2015 Human Services Board meeting. This was seconded by Paul Kok. All approved.
5. **Correspondence-**  
None
6. **Public Comment-**  
Paul Kok commended Mark Hill on his presentation to the Big Brother Big Sisters of Northeast Wisconsin organization.
7. **Public Comment/Discussion of Public Participation Meeting-**  
None

8. **Program Reports-**

There were no questions on the written reports. The Birth-3/CLTS/FSP/CST report that was not included in this meeting's agenda packet is attached to these minutes.

a. **ADRC/Adult Protective Services**

Joe Krebsbach, Director, gave a brief oral report. In the absence of an Aging Director and until recently the Senior Center Manager, he has been spending additional time at the center. The staff remains focused, working very cooperatively during this time of transition. We are considering hiring a limited term employee (LTE) for supervision responsibilities until all the management positions can be filled.

b. **Behavioral Health & d. Community Support Program**

Cori McFarlane, Deputy Director, gave a verbal report. There continues to be 4 vacancies in Behavioral Health, all at varying steps in the hiring process. Crisis call volume is high with suicide assessments and drug overdoses most prevalent. CCS now has 4 children and 5 adults enrolled. There have been a few clients transitioning from CSP to CCS. Board members discussed the continuity of care and medications when clients are transitioning to and from incarceration.

9. **Continuing / Pending Business-**

a. **Family Care Updates**

The transition is complete. A thank you to all staff involved, Long Term Care, ADRC and Kathy Zak of the support team. A limited term employee (LTE) is helping with the waitlist and with the I&A Specialist shortage after the promotion of Jake Erickson to the Senior Center Manager. The Support Team is developing procedures to invoice the Managed Care Organizations (MCO) for services we are providing.

b. **Resource Center Building Updates**

A Request for Proposal (RFP) will be sent out for a feasibility study on the former Highway Shop as a possibility of providing the space needs for the Senior Center.

c. **Staff Recruitment Updates**

The department continues to look for other qualified individuals for the ADRC Director. An offer will go out this week for the Behavioral Health Manager. Review of the applicants for the 2 Behavioral Health Case Manager positions will be next week. The Elder Benefits Specialist, AODA case manager, and the Senior Center Supervision LTE will close tomorrow. The Senior Center Office Assistant position will close on September 24<sup>th</sup>. We are delaying the hiring process for the ½ time Activities Coordinator position until the new Senior Center Manager can acclimate to what is needed at the Center.

d. **Vouchers**

No questions asked.

10. **Legislative Topics-**

None

11. **New Business-**

**a. Proposed 2016 Budget**

Joe reviewed significant changes due to the implementation of Family Care and the highest increases in inpatient care within the past several years. Additional funds were added to the Boys & Girls Club Truancy Program, JAK's Place for their work emphasis program and Wednesday Night Meal Program and to Help of Door County for supervised visitation.

Roy Englebert moved to approve the 2016 Budget as presented. Helen Bacon seconded the motion. All were in Favor

**b. Draft 2016-2018 Aging Plan**

Roy Englebert, requested that the last sentence, "They have agreed to do fundraising for the new building." of paragraph 4 on page 16 of the plan, to be removed. Roy is a member of the Friends of the Senior Center and fundraising was not a component of their purpose. The board agreed to move the plan to the Senior Advisory Committee and will review and approve in the October meeting.

12. **Matters to Be Placed on a Future Agenda or Referred to a Committee, Official or Employee-**

Please contact Joe Krebsbach or Mark Moeller with any other additional agenda items.

13. **Next Meeting Date:**

Tuesday, October 13, 2015 at 8:30am in the Chambers Room of the Government Center, 421 Nebraska Street, Sturgeon Bay.

14. **Adjournment:**

Tom Leist motioned and Paul Kok seconded to adjourn the meeting. The motion carried. The meeting adjourned at 3:08 pm.

Respectfully submitted,

Shawn M. Barlament, Recording Secretary

**DISABILITIES PROGRAM UPDATE: September, 2015**

**DOOR COUNTY DEPARTMENT OF HUMAN SERVICES**

By Cindy Zellner-Ehlers, Program Coordinator

**BIRTH TO THREE EARLY INTERVENTION PROGRAM:**

We continue to look at strategies to do outreach and child find activities promoting child development and the resources within the Department in our Early Intervention Program. We've had a number of referrals recently of children with special health care needs whereby coordination of services along with our community partners is essential to quality care and coordination of services.

Current enrollment: **24**

**CHILDRENS SERVICES:**

- Our collaborative work continues as we seek to refine our "single point of entry" referral and intake process. With the advent of the new CCS Program and the addition of one more program resource for children and families it remains our goal as a Department to help families have one entrance to a milieu of supports/services. We are looking at the design of COMPASS-Threshold out of the Racine/Kenosha area to springboard this concept and program design. As a Board member, if you are interested in looking at this design you can access it <http://www.compasswisconsin.org> to see what lies ahead for our Department.
- We are partnering with our Children and Families Unit within the Department to undergo a shared learning experience with the Behavioral Partnership Project through UWGB to explore crisis planning strategies for youth. This will involve agency staff training around roles and responsibilities/role mapping, understanding the neurobiology of youth in crisis, and the art of crisis planning.
- In the new State budget the Family Support Program will end, as we know it, with a replacement of a Community Options Program for Children. The rules and regulations related to the how that program can be accessed and expectations around implementation will be released to us sometime this Fall. We are looking at ways to incorporate this in our menu of services, combining oversight committee responsibilities with existing committee

structures, and having some thoughtful planning on still another new program's implementation.

**PERSONAL CARE PROGRAM SERVICES:**

Current enrollment: 61 -planning for the reduction in client services as we enroll clients in Family Care or IRIS. We remain hopeful that as we transition clients into managed care this will open up opportunities for children and youth to access the PCW Program whereby in the past we've had a waiting list for such services. PCW is being looked at as a safety net resource for elderly and physically disabled individuals who may not qualify for Family Care and are at risk of involvement in our APS/Adults at Risk Unit if unable to get the services/care needed in the community.

**ADULT SERVICES:**

August 1<sup>st</sup> marked the official date of transition for over 160 individuals to managed care, and the remainder near 40, September 1<sup>st</sup>. We are now officially no longer the provider entity for long term care services for adult developmentally disabled, people with physical disabilities, and the frail elderly. Our ADRC operates as the single point of entry for any person needing or wanting access to services. The two care management organizations are Lakeland District and Care Wisconsin. The two IRIS (self-directed) organizations are IRIS-TMG and Lutheran Social Services-Connections. We continue to field telephone calls and drop in office visits by clients and provider agencies, confused, concerned or unfamiliar with how to access their care management resource, in which we guide them to the appropriate entity for answers. A special thank you one more time for hard work of Kathy Zak, support staff person, who helped make this as smooth of a transition as possible regarding recordkeeping and communications with the organizations. Thank you Kathy!

This concludes the September Board report.

Respectfully submitted,

Cindy Zellner Ehlers

Program Manager- Children's Long Term Support Services

*These minutes have not been approved by the board and are subject to approval or revision at the next meeting.*

**DOOR COUNTY DEPARTMENT OF HUMAN SERVICES**

**PUBLIC PARTICIPATION PROCESS MEETING (2016-2018 Aging Unit Plan)**

**\*\*\*\*\* Tuesday, September 15, 2015 at 1:30 p.m. \*\*\*\*\***

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

The Door County Human Services Board held a public participation meeting. The purpose of the meeting was to receive public comments regarding the 2016-2018 Aging Unit Plan of the Door County Department of Human Services. The Notice of Public Hearing appeared in the September 7, 2015 and September 10, 2015 issues of the Door County Advocate and on radio announcements.

Chairman Mark Moeller called the Public Participation Process Meeting to order at 1:30 p.m. Human Service Board members and staff present introduced themselves. The Chair then shared the public participation meeting process formalities. A written sign-in sheet for the public guests present and those that wished to speak was provided to the Recording Secretary and to the Chairman to acknowledge requests. This list is attached to these minutes.

Joseph Krebsbach, Director of the Door County Department of Human Services, shared the goals of this proposed plan (Section 6A-F of the plan).

Mr. Moeller asked the one individual to speak before the Board and the following is the one public comment made. No written correspondence was received prior to the meeting regarding the proposed Aging Plan.

1. **Judy Ritter – Community Member:**

Judy shared that the Nutrition Program at the center is terrific.

Mr. Moeller asked if anyone else wished to add any comments and then thanked the public for their participation.

The Public Participation Meeting was adjourned at 1:37 p.m.

Respectfully submitted,  
Shawn M. Barlament – Recording Secretary



Door County Department of Human Services  
 Public Participation Meeting - Aging Plan  
 September 15, 2015 1:30pm Senior Resource Center

**Please Print**

	Name	Organization	"X" If You Wish to Speak
1	SANDY BROWN	LWV & PFLAG	
2	Andrew Goodman	Golden Living Center - Portchester	
3	Pam Busch	Door-Tran	
4	Judy Putter	community member	X
5	Markus Putter	"	
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<p>Notice of Public Meeting Thursday September 17<sup>th</sup>, 2015 10:00 a.m. – 12:00p.m.</p>	<p><b>COMBINED SENIOR SERVICES ADVISORY COMMITTEE / NUTRITION ADVISORY COUNCIL</b></p>	<p>Door County Senior Resource Center  832 N. 14<sup>th</sup> Avenue Sturgeon Bay, WI 54235</p>
<p>Advisory Committees for the Door County Aging Unit with the Human Services Board</p>		

**AGENDA**

1. Call meeting to order at 10:00 a.m.
2. Read Opening Statement – "Seniors Really in Charge"
3. Review and approve the agenda
4. Review and approve the Minutes of the 01/15/2015 and 07/16/2015- Joint Senior Services Advisory Committee / Nutrition Advisory Council meetings

**Senior and Community Center**

5. 2016-2018 Aging Plan
6. Organizational Structure
7. Staff Recruitment Update
8. Hours Change
9. Physical Office Moves

**Nutrition related agenda items:**

10. Farmers Market
11. Meal Site Updates/Carmen

**Ideas for future meeting agenda items:**

- a) Tentative future meeting date:
- b) Adjournment

MENU: Liver and Onion/Bacon, Steamed Potatoes, Asparagus, Cottage Cheese w/Fruit, Birthday cake, soup and salad bar option

Deviation from the order shown may occur.

*Members of the Door County Board of Supervisors and / or its subunits may be in attendance at this meeting to listen and gather information. Notice is hereby given that the above meeting may constitute a meeting of the Door County Board of Supervisors or one of its subunits. However, no official action will be taken except by the Senior Services Advisory Committee or Senior Services Nutrition Advisory Council.*

*In compliance with the Americans with Disabilities Act, any person needing assistance to participate in this meeting, should contact the Office of the County Clerk at (920) 746 - 2200. Notification 48 hours prior to a meeting will enable the County to make reasonable arrangements to ensure accessibility to that meeting.*

Posted-

**COMBINED SENIOR SERVICES ADVISORY  
COMMITTEE/NUTRITION ADVISORY COUNCIL**

**Advisory Board**

**Thursday, September 17, 2015 at 10:00 a.m.**  
Senior Resource & Community Center, 832 N. 14<sup>th</sup> Ave., Sturgeon Bay, WI

THESE MINUTES HAVE NOT BEEN REVIEWED AND APPROVED BY THIS BOARD AND ARE SUBJECT TO REVIEW AND REVISION BY THE BOARD AT THEIR NEXT REGULARLY SCHEDULED MEETING.

**Business Meeting**

**1. Call to Order**

- The meeting is called to order at 10:05 a.m. by Mark Moeller. Members Present are: Carmen Schroeder, Christine Andersen, Christine Wisniewski, Jennifer Spude, Judy Treptow, Mike Green, and Sue Clemens. Others present are: Joe Krebsbach, Mark Moeller (acting-chairperson), Barb Snow (Minutes), and Robyn Brauer (Joe's Assistant).

**2. Establish Quorum:**

- 4 members are present for a Senior Advisory Committee Quorum and 7 members are present for a Nutrition Advisory Committee Quorum.

**3. Adopt Agenda**

- A motion was made by Mike Green, and seconded by Sue Clemens to adopt the agenda. The motion is carried unanimously.

**4. Approve Minutes from 01/15/2015 Meeting**

- Corrections made to include changing 2014 to 2015 and 2:00 p.m. to 10:00 a.m. in the header, and change PM to AM in Call to Order. On page 7 adding Washington Island to section c.
- Motion to approve with corrections was made by Carmen Schroeder and seconded by Mike Green. The motion is carried unanimously.

**Approve Minutes from 07/16/2015 Meeting**

- One correction was on the last page changing the date of the Washington Island Packer party from September 21<sup>st</sup> to September 11<sup>th</sup>.
- Motion to approve with corrections was made by Carmen Schroeder and seconded by Mike Green. The motion is carried unanimously.

**Introductions were made by the committee for guest Robyn Brauer, who is Joe's Assistant.**

**Senior and Community Center**

**5. 2016-2018 Aging Plan**

- Joe credits Robyn Brauer and Tom Krueck for their efforts in helping put together the Aging Plan. Information from the survey was integrated into the Aging Plan. The 5 goals in Section 6 are directed by the State. Joe indicated that the plan would be reviewed each year.
- The Human Services Board talked about the Aging Plan and suggested only one change which was that the "Friends Group is not going to fundraise for the new building".
- There was a significant amount of discussion on the Aging Plan and changes were made in these goal areas (please see the Revised Aging Plan for specifics):

- The SSAC/NAC had some minor grammatical changes that were made throughout the Aging Plan
  - Section 6-B, The Elder Nutrition Program. The Committee discussed changing the goals to include accessibility of fresh produce.
  - Section 6-C, Services in Support of Caregivers. Wording was changed to expand the goal from groups to programs.
  - Section 6-D, Services to People with Dementia. Wording changed to note the changes that the Virtual Dementia Tour can only be done in 2 locations.
  - Section 6-E, Healthy Aging. Dropping a word to include more locations.
- We go back to Human Services Board in October to get the Aging Plan technically approved with signatures but we send the plan into the State as a final on the 21<sup>st</sup> of September.
  - Motion to approve the Aging Plan with all changes mentioned by the Human Services Board and the SSAC/NAC Committees and to forward to DHS Board and GWAAR was made by Christine and seconded by Mike Green. The Motion is carried unanimously.
6. **Organizational Structure – Not Discussed**
  7. **Staff Recruitment Update – Not Discussed**
  8. **Hours Change**  
Joe- The building hours for the Senior and Community Center and the ADRC were changed to 8:00-6:00, with staff offices closing at 4:30 pm and the Evening Soup and Salad Bar open from 3:30-5:30.
  9. **Physical Office Moves – Not Discussed**

**Nutrition Agenda Items- Carmen**

10. **Farmers Market – Discussed in the Aging Plan**
11. **Meal Site Updates/Carmen**
  - Washington Island Packer Party with Nelvie. Carmen helped in the kitchen. The meals were accepted. There is talk about kitchen remodeling. The staff are in ongoing discussions with the city. Nelvie took the Serve Safe class and missed by 2 points she is continuing to study and will take it again. The report went to Jake and Arne.

**Ideas for future meeting agenda items:**

- a) **Confirm Next Meeting Date and Time**
  - The next meeting will be held on January 21, 2015, at 10:00 a.m.
- b) **Adjourn**
  - A motion was made by Carmen Schroeder and seconded by Mike Green. The motion was carried unanimously. Meeting adjourned at 11:50 a.m.

**Recorded by: Barb Snow**

*In compliance with the Americans with Disabilities Act, any person needing assistance to participate in this meeting should contact the Office of the County Clerk at (920) 746-2200. Notification 72 hours prior to a meeting will enable the County to make reasonable arrangements to ensure accessibility to that meeting.*

**Deviation from the printed order may occur.**

**Posted:**

Tuesday, October 13, 2015  
8:30 a.m.

**HUMAN SERVICES BOARD**

Door County Government Center  
Chambers Room (C102), 1st floor  
421 Nebraska Street, Sturgeon Bay, WI

Oversight Board for the Department of Human Services

**AGENDA**

**HUMAN SERVICES BOARD MEETING**

1. Call Meeting or Order
2. Roll Call
3. **Adopt** Agenda
4. **Approve** Minutes – September 15, 2015 Public Participation Meeting for Aging Plan and Human Services Board Meeting
5. Correspondence
6. Public Comment
7. Program Reports
  - a. ADRC/Adult Protective Services
  - b. Aging/Senior Center
  - c. Behavioral Health – Verbal from Deputy Director
  - d. Children & Family Services
  - e. Community Support Program – Verbal from Sheryl Flores
  - f. Birth-3 / CLTS / FSP / CST
  - g. Economic Support
8. Continuing /Pending Business
  - a. Family Care Updates
  - b. Resource Center Building Update
  - c. Staff Recruitment Updates
  - d. Vouchers
9. Legislative Topics
10. New Business
  - a. Dissolution of LTC Support Committee
  - b. Resolution of CCOP Support Committee beginning January 2016
  - c. Letter of Resignation – Lindsey Reckelberg
  - d. Request to Refill Position – Social Worker/Child & Family Unit
  - e. Transportation Program Update & Grant Application
  - f. 2016-2018 Aging Plan
  - g. Revised Organizational Chart
11. Matters to be Placed on a Future Agenda or Referred to a Committee, Official or Employee
12. Set Next Meeting Date – Tuesday, November 10, 2015
13. **Adjourn** Meeting

Members of the Door County Board of Supervisors and/or its sub-units may be in attendance at this meeting to listen and gather information. Notice is hereby given that the above meeting may constitute a meeting of the Door County Board of Supervisors or one of its sub-units. However no official action will be taken except by the Administrative Services Committee.

*Deviation from the order shown may occur*

## DOOR COUNTY HUMAN SERVICES BOARD MINUTES

Tuesday, October 13, 2015

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

- 1. Call to Order/Establish a Quorum of Members Present:** Chair Mark Moeller called the October 13, 2015 meeting of the Door County Human Services Board to order at 8:30 a.m. at the Door County Government Center Chambers Room.

Present: Chairman Mark Moeller, Helen Bacon, Roy Englebert, Susan Kohout, Dr. John Beck, Tom Leist, Paul Kok.

Absent: Joe Miller

Staff Present: Joe Krebsbach, Human Services Director, Ken Pabich, Door County Administrator, Debby Karas, Recording Secretary.

- 2. Roll Call was taken and The Board members in attendance established a quorum.**
- 3. Adopt Agenda:** Motion by Roy Englebert, seconded by Tom Leist to adopt the agenda. The motion carried.
- 4. Approve Minutes:** Motion by Paul Kok, seconded by Susan Kohout to approve the minutes from the Human Services Board meeting on September 15, 2015. The motion carried.
- 5. Correspondence:**  
Referenced letter from citizen requesting that a new Senior Center be built.
- 6. Public Comment:** None
- 7. Program Reports-written reports**
  - ADRC/Adult Protective Services at Door County
  - Aging/Senior Center - Question regarding Jake Erickson attending Senior Hoshion which is a meeting involving planning events for seniors as a pro-active means of staying healthy.
  - Behavioral Health – Wait list: 15 total, 11 for AODA services, and 4 for Mental Health. Eight consumers enrolled in CCS.
  - Children & Family Services – Psychiatrist is collaborating with this team related to children with MH issues. We are trying to improve our internal referral process.
  - Community Support Program – In the last year five longtime consumers have died and five went to Family Care. This is the most significant amount of client changes in years.
  - Birth-3/CLTS/FSP/CST
  - Economic Support

## **8. Continuing/Pending Business**

- a. Family Care Updates – Some of the MCO's have reduced services, they are watching closely for duplication of services, AFH rates have been reduced. One board member expressed frustration with lack of local service providers, reduction in hours provided, and mileage reimbursement for those providers.
- b. Resource Center Building Update – Several construction companies did a walk through of the old Highway Shop with ideas for potential remodeling the building to house the Senior Center and Emergency Services. RFP's are due 10/21/15. – Ken Pabich, Wayne Spritka, Dan Williams and Joe Krebsbach will review and bring to Property Committee.
- c. Staff Recruitment Updates
  - \*AODA Counselor – Brenda Franco, starting 10/19/15
  - \*Behavioral Crisis Case Manager – Jamie Loehnis started 10/1/15
  - \*Behavioral CCS Case Manager – Still searching.
  - \*Behavioral Health Manager – offer made, candidate took different position. Will advertise wider area.
  - \*ADRC Manager – interviews, but no candidate selected. Michael VanDyke will fill in the interim, three hours a day.
  - \*ADRC Director – Jake Erickson hired.
  - \*Adult Protective Services – interviews, no candidates hired.
  - \*Elderly Benefits Specialist – Internal offer goes to Administrative committee for approval next week
  - \*Economic Support – The two new hires are in training. May need to fill a third position in EBS position approved.
  - \*CCS Coordinator – We made an offer yesterday for a tri- county position.
  - \*ADRC Receptionist – Barb Snow has accepted the fulltime position.
  - \*I & A Worker – will make offer this week.
- d. Vouchers

## **9. Legislative topics –**

Concerns re: Family Care regarding rates paid are not enough to attract service providers.

Discussion regarding seventeen year old non-violent first time offenders being transferred to trial in the juvenile system instead of adult court. The WCA conducted a study of the cost involved.

## **10. New Business**

- a. Dissolution of LTC Support Committee – Since our agency transitioned its adult CIP and COP Waiver program participants to Family Care and IRIS and no longer receives a COP or waiver allocation for these target groups, a COP Planning Committee is no longer required.
- b. Resolution of CCOP Support Committee will be needed beginning January 2015 – Cindy Zellner-Ehlers and Cori McFarlane are working with Children's Services Team advisory board and CCS Committee to come up with recommendations.

- c. Letter of Resignation Accepted from Lindsey Reckelberg, Child Protection Social Worker & Foster Care Coordinator
- d. Request to Refill Position – Child Protection Social Worker/Child & Family Unit – Motion made by Susan Kohout, seconded by Roy Englebert to refill this position. Unanimous.
- e. Transportation Program Update & Grant Application – The board reviewed the list of Door to Door consumer complaints & declined rides. Number of rides provided in first eight months of 2015 = 27,000. Percentage of complaints equals less than 1%. The grant proposal is due this week, the full cost of the system will be just over \$1.1 million. Most of our declined rides are on Saturdays. We are asking for additional funding to run one more 8 hour shift on Saturday. When we ask for another shift we will need to have a public hearing. We have a three year contract with Abby Vans and another two years are optional. We hired Robin Mark as Transportation Specialist. There was a suggestion to ask the Advocate to do an article on the history of Door to Door transportation system to promote use.
- f. 2016-2018 Aging Plan – The Senior Advisory committee changed three goals. Paul Kok made a motion to accept those changes as approve as proposed, Tom seconded the motion, passed unanimous.
- g. Revised Organizational Chart – Review, the board asks that this chart be included in the packet monthly.

**11. Matters to be placed on a Future Agenda or Referred to a Committee, Official or Employee:** Contact Joe Krebsbach or Mark Moeller with any agenda items.

**12. Set Next Meeting Date:**

Wednesday, November 11, 2015 at 8:30 a.m.

**13. Approve adjournment:** Tom Leist made a motion to adjourn. Helen Bacon seconded. The motion carried. The meeting adjourned at 10:55 a.m.

Respectfully submitted,

Debby Karas, Secretary



## Section 6 – Goals for the Plan Period

### Section 6-A – Involvement of Older People in Aging-Related Program Development and Planning

#### a. *Involvement of Older People in Aging-Related Program Development and Planning*

- 1) In order to increase the visibility of the Advisory groups; ADRC, Senior Advisory Committee and Nutrition Counsel, the ADRC Director and Aging Unit Manger will work with the three committees to explore options for increased advertisement, collaboration, and information sharing to the policy making boards. By December 2016, the group will have three action recommendations, one in each area for implementation in 2017.
- 2) In an effort to enhance the Aging Unit and ADRC's operational effectiveness within the community we serve, both units will work towards building a more integrative arrangement by December 2017. This will include the following tasks: designating one agency name which is the "Aging and Disability Resource Center (ADRC) of Door County." In addition to one agency name there will also be one agency phone number, which is 920.746.2372(ADRC). There will also be work towards creating one comprehensive marketing plan which will include one unified brand and website. Having one comprehensive marketing plan will further promote our agency as one entity and support a greater "one stop shop" philosophy. Lastly, the ADRC Director and Aging Unit Manager will work to combine the Senior Services Advisory Committee with the ADRC Advisory Committee, keeping the Nutritional Advisory Council separate.
- 3) In order to increase older adults' knowledge of programs or services available to them, including the impact local state and federal legislators have on those services, the ADRC Director and Aging Unit Manger will work with the Learning in Retirement Group to present three programs specific to aging services within their curriculum before December 31<sup>st</sup> 2018.

## Section 6 – Goals for the Plan Period

### Section 6-B – The Elder Nutrition Program

#### b. *The Elder Nutrition Program*

- 1) To increase access to fresh produce and enhance eating habits of our older population, the Aging Unit will offer weekly on-site vendors for farmer's market and increase participation of the evening soup and salad bar by 25% offered by the Sturgeon Bay Meal site by December 2016. In May 2016, the Aging Unit and ADRC made the decision to discontinue the evening soup and salad bar program offered at the Sturgeon Bay meal site. The reason for the discontinuation of the evening soup and salad bar program had to do with a difficulty in staffing and a lack of participation. Additionally, the ADRC changed their hours of operation from 7:00 a.m. - 6:00 p.m. Monday thru Friday to 8:00 a.m. - 4:30 p.m. Monday thru Friday.

- 2) To improve access to nutritious options throughout the county and reach more of our older population, we will work to relocate our Southern Door meal site from the Forestville community to the Brussels community by December 31, 2018.
- 3) To increase the coordination of meals for individuals being discharged from medical care, the ADRC will work with discharging units at local medical facilities including those in Brown County. By December of 2017, we will have a referral form to be included with all discharges for individuals over the age of 60.

<b>Section 6 – Goals for the Plan Period</b> <b>Section 6-C – Services in Support of Caregivers</b>
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*c. Services in Support of Caregivers*

- 1) To increase the availability of Caregiver support, by the end of 2016, Door County will have 8 individuals trained in caregiver program facilitation. Throughout the year 2016, the ADRC was successful in training 4 new Powerful Tools for Caregiving facilitators and 4 new Caregiver Support Group facilitators.
- 2) To continue with efforts to increase availability of Caregiver support groups, by December 2017 we will have caregiver support programs in four geographical locations throughout the county.
- 3) By the end of 2018, Door County will have an average participation of six or more caregivers attending our caregiver programs in each of our locations.

<b>Section 6 – Goals for the Plan Period</b> <b>Section 6-D – Services to People With Dementia</b>
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*d. Services to People With Dementia*

- 1) To increase the knowledge of available community resources regarding Alzheimer's and other dementias the Caregiver Coalition, ADRC and Aging Unit will identify six additional opportunities to provide the Door County Resource Guide in addition to the medical providers in the county by December 2016.
- 2) To raise awareness and understanding of dementia and its impact on our community, the Aging Unit and ADRC will designate one staff member to complete additional dementia specific training by December 2017. This one staff member will also be tasked with the responsibility of conducting several outreach and educational events related to dementia throughout the year 2017 and moving forward.
- 3) To help students understand the challenges of Alzheimer's disease, the Aging Manager will work in collaboration with the hospital to offer a Virtual Dementia Tour as part of the Life Skills programs to each of the school district by December of 2018.

**Section 6 – Goals for the Plan Period**  
**Section 6-E – Healthy Aging**

*e. Healthy Aging*

- 1) To provide ongoing education regarding health, by December 2016 we will provide a minimum of three evidence-based training programs such as living well with chronic illness in Sturgeon Bay.
- 2) To increase the availability of healthy activities to our older population, we will complete an interest study by December 2017 to determine the interest in programming and location options for providing healthy physical activity programs or classes in the county.
- 3) To provide additional healthy activities by December 2018, we will provide at least two additional programs at sites where there is a demand based upon the above mentioned interest study.

**Section 6 – Goals for the Plan Period**  
**Section 6-F – Local Priorities**

*f. Local Priorities*

- 1) To continue to enhance our current transportation system which has been crucial to the mobility of our senior population and to help reduce isolation, we will look to have an increase in local financial support. The goal will be to add at least one additional taxi to the system by December of 2016.
- 2) We have significantly increased the number of socialization events/activities at the Sturgeon Bay meal site. In 2017, one additional special event will be held at the other four locations.
- 3) Through collaboration with community partners we will work to identify need and options for adult day services. The goal is to work with at least one community partner to develop one to two sites where day services are available five days per week by December 2018.

**Section 7 – Coordination Between Titles III and VI**

Not applicable

**Section 8 - Budget**

See additional Excel Document

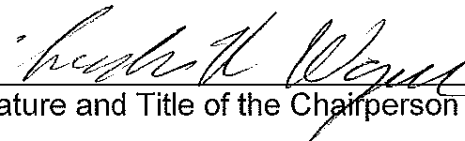
**Section 9 – Compliance With Federal and State Laws and Regulations**

On behalf of the county, we certify

Door County Human Services Aging Unit

(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 2016-2018. We assure that the activities identified in this plan will be carried out to the best of the ability of the tribe in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2016-2018.

  
Signature and Title of the Chairperson of the Commission on Aging

10-27-15  
Date

  
Signature and Title of the Authorized County Board Representative

10/23/15  
Date

## Section 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 Needs**

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 all 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.

## **5. 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 who 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, and 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 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 changes 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 state 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 the 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 board 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, received 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 for 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) 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 the 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-years 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 personnel policies and procedures established by the county board of supervisors.

(3) 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.

## **From the Desk of the ADRC**

# **ORAL SURVEY**

The Older Americans Act is founded on a principle of American democracy that people affected by programs and policies should have ownership of those programs and policies, including an integral role in their planning and development. The active participation of older people in the design, development and implementation of policies and programs gives them ownership of and responsibility for the aging network. Participation in the operation of the aging network not only gives an older person an opportunity to comment on a particular issue but also recognizes her/him as an equal partner in the discussion. Simply put we want your ideas on what you want so that we may provide the best possible policies and services for you.

**What are the three most important issues that you are facing?**

**Are there services that would make your life easier?**

**What would make it easier for you to be involved in providing input to our agency about the services we provide?**

**What ideas might you have for new programs or improvements on our current programs?**

**What do you see as some of the biggest challenges to remaining in your home as you age?**

**What do you think you will need in the next 3, 5 or even 10 years to help you remain as independent as possible?**

**What does healthy living mean to you?**

**What would you like your Senior Resource Center to do to promote healthy aging in our communities?**

**What do you like the most about our current nutrition programs?**

**Where do you see improvements could occur?**

**If you were to wave a magic wand and create the ideal nutrition program for you, your family members what would it look like?**

**Are there barriers for you to participate in the nutrition program?**

**Do you wish there was more nutrition education sessions? Cooking demonstration?**

**Have you attended one of our evidenced based health promotion classes? Living Well with Chronic Conditions? Living Well with Diabetes? Exercise classes? Powerful Tools for Caregiving?  
What gaps exist in our community for people who want to get or stay healthy?**

What barriers exist for people to participate in wellness activities or programs?

What is one or two things you currently do to stay healthy?

## Caregivers

What do you see are the most important issues that caregivers face?

Are there opportunities to reach out to caregivers that are not being explored?

Are there programs and services that should be available but are not?

## Services to people with Dementia how can aging care implement programs?

What needs do persons with Dementia and their families need but are unable to obtain?

What programs could the Senior Resource Center develop or enhance that might support persons with Dementia more effectively?

What is available in our community for folks with dementia that are working well?

How might we create a dementia friendly community?

Please complete and return this survey by August 7, 2015. Your participation is greatly appreciated.

Thanks,

Patti Peterson



**Section 11 – Appendices**  
**Attachment 2: Written ADRC Survey**

**From the Desk of the ADRC**  
**SURVEY**

The Older Americans Act is founded on a principle of American democracy that people affected by programs and policies should have ownership of those programs and policies, including an integral role in their planning and development. The active participation of older people in the design, development and implementation of policies and programs gives them ownership of and responsibility for the aging network. Participation in the operation of the aging network not only gives an older person an opportunity to comment on a particular issue but also recognizes her/him as an equal partner in the discussion. Simply put we want your ideas on what you want so that we may provide the best possible policies and services for you.

1. What are the three most important issues that you are facing? Pick top 3  

<input type="checkbox"/> Nutrition	<input type="checkbox"/> Socialization	<input type="checkbox"/> Independence
<input type="checkbox"/> Transportation	<input type="checkbox"/> Caregiving	<input type="checkbox"/> Family
<input type="checkbox"/> Mental Health	<input type="checkbox"/> Financial	<input type="checkbox"/> Isolation
<input type="checkbox"/> Physical Health	<input type="checkbox"/> Insurance	<input type="checkbox"/> Abuse
2. What do you like most about the current Nutrition Program?  
 Food       Socialization       Convenience       Other \_\_\_\_\_
3. Have you attended one of our health promotion classes?  
(Example: Living Well, Powerful Tools, Arthritis Class, etc).  
 Yes       No
4. I would attend programs and services at the Senior Center for my: (Mark all that apply)  

<input type="checkbox"/> Quality of Life	<input type="checkbox"/> Connection to Support Services
<input type="checkbox"/> Learning	<input type="checkbox"/> Mental Health
<input type="checkbox"/> Physical Health	<input type="checkbox"/> Transportation
<input type="checkbox"/> Nutrition	<input type="checkbox"/> Socialization
5. Would you like to see more:  

<input type="checkbox"/> Exercise Classes	<input type="checkbox"/> Entertainment
<input type="checkbox"/> Mental Health Classes	<input type="checkbox"/> Activities (specify _____)
<input type="checkbox"/> Community Outreach	<input type="checkbox"/> Learning opportunities
<input type="checkbox"/> Intergenerational interaction	<input type="checkbox"/> Nutritional Classes
6. What do you see as some of the biggest challenges to remaining in your home as you age?  

<input type="checkbox"/> Mobility	<input type="checkbox"/> Mental Health	<input type="checkbox"/> Physical Health	<input type="checkbox"/> Financial
<input type="checkbox"/> Support	<input type="checkbox"/> Transportation	<input type="checkbox"/> Nutrition	
7. Are you a Caregiver?  
 Yes       No
  - a. If Yes do you attend or would you want to attend a Caregiver support group?  
 Yes       No
  - b. If no then what prevents you from becoming a caregiver? (example: Scheduling, Responsibilities, disabilities or illness, emotions, Age, other, etc.)
  - c. Would you like to have information on being a Caregiver?  
 Yes       No
8. Would you like to see more learning opportunities about Dementia/Alzheimer's?  
 Yes       No
9. Do you have someone in your family with Dementia/Alzheimer's?  
 Yes       No

10. Is there anything you would like to add or comment on?

Please complete and return this survey by August 7, 2015. Your participation is greatly appreciated.

Thanks,

Patti Peterson

# Customer Satisfaction Report

for the Aging and Disability Resource Center  
of Door County



This report was prepared by Analytic Insight  
for the Wisconsin Department of Health Services

August 2016

## ACKNOWLEDGEMENTS

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This report was made possible by the Aging and Disability Resource Center directors, staff and customers who took the time to answer questions and provide information about their background, perceptions and experience. Customers answered many detailed questions and contributed their opinions, experiences and information to make the survey and focus group possible.

The authors would like to thank both staff and customers of the Wisconsin Aging and Disability Resource Centers for their participation in this study.

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## EXECUTIVE SUMMARY

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This report presents the 2015 results for the Aging and Disability Resource Center of Door County. The purpose of the report is to summarize the ADRC's service strengths, opportunities for improvement and overall customer satisfaction ratings. The ADRC can make strategic decisions using an evidence-based approach to developing strategies that improve ADRC services and customer satisfaction.

## HIGHLIGHTS OF THE RESULTS

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- ✓ The vast majority of Door customers say they will recommend the services of the ADRC, and they do. Almost 99% of customers said they would recommend the ADRC's services, and over half of new customers surveyed said that they came to the ADRC because of a recommendation or word of mouth.

## COMPARISONS TO STATEWIDE RESULTS

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- ✓ One in three customers (36.6%) received a home visit, which is below the statewide average of 44.5%.
- ✓ Approximately two out of three customers (63.1%) reported receiving a follow-up to see how they were doing. This is close to the statewide average of 64.7%.
- ✓ Customers rated their overall experience at Door and the usefulness of their interaction very favorably (3.7, respectively), with each more than halfway between good and excellent. The rating for overall experience was somewhat higher than the statewide average of 3.6 and the rating for usefulness was close to the statewide average of 3.7.

## METHODOLOGY

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This report is based on a telephone survey of 73 Door customers who participated in a statewide survey of 4,453 ADRC customers. Customers received information and assistance (I&A), options counseling or enrollment services. Completed interviews were conducted between June 1 and October 13, 2015.

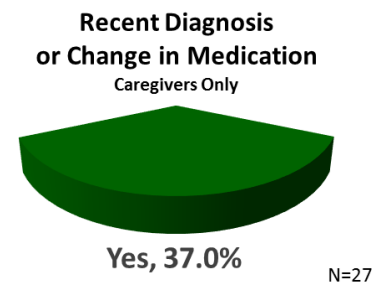
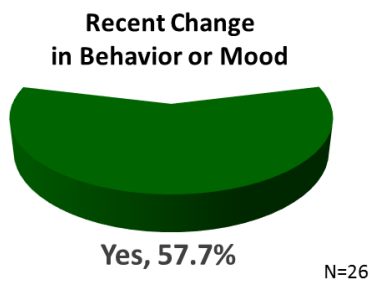
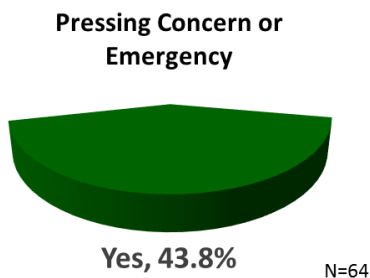
<b>Sample Description</b>	<b>Size</b>
Statewide 2015 survey	4453
ADRC of Door County 2015	73

The survey contained several skip patterns. For example, only those respondents who received a home visit were asked questions specific to the home visit. In addition, some respondents opted out of particular questions. Results are reported only for groups of 5 or more respondents and small sample sizes are noted when applicable.

## FIRST VISIT

This section describes how customers come to visit the ADRC of Door County. These results are compared to other Wisconsin ADRCs in the charts below and may be useful in interpreting your other results, understanding your new customers or identifying target areas for marketing your ADRC.

- ✓ Two out of three Door customers had a pressing concern or emergency when they visited the ADRC.
- ✓ Word of mouth is the most common way that customers learn about the ADRC.
- ✓ Customers came in with a wide variety of issues including needs for financial assistance, issues related to insurance, transportation or help staying in their home.



## FIRST HEARD OF THE ADRC THROUGH

	Door	Statewide
Recommendation/Word of mouth	<b>52.1%</b>	<b>55.8%</b>
Referral from an agency	<b>16.4%</b>	<b>12.7%</b>
Newspaper, TV or other media	<b>5.5%</b>	<b>4.1%</b>
Healthcare professional	<b>4.1%</b>	<b>10.8%</b>
Brochure/Flyer	<b>4.1%</b>	<b>4.1%</b>
Through work	<b>2.7%</b>	<b>2.8%</b>
Internet	<b>2.7%</b>	<b>3.4%</b>
Sample Size	73	4446



## PERSON WHO CONTACTED THE ADRC

	Door	Statewide
Self	52.1%	55.9%
Parent	26.0%	19.4%
Spouse	11.0%	7.2%
Other relative	4.1%	7.9%
Child	2.7%	5.5%
Friend	1.4%	1.8%
Sample Size	73	4438

## MAIN ISSUE OF CONCERN

	Door	Statewide
Financial Assistance	28.8%	18.2%
Help staying in home	26.0%	22.5%
LTC enrollment	23.3%	12.2%
Insurance issues - Medicaid, Family Care, IRIS	16.4%	16.8%
Transportation	8.2%	5.8%
Dementia or Alzheimer's	5.5%	8.3%
Medical Issues	2.7%	5.5%
Unsure	1.4%	2.9%
Adaptive equipment	1.4%	1.8%
SSI or SSDI	1.4%	3.6%
Work related help	1.4%	0.6%
Sample Size	73	4428

## SOURCES OF INFORMATION

	Door	Statewide
No other source of information	72.3%	73.3%
Internet	13.8%	11.5%
Other	7.7%	5.1%
Advice of friends or family	3.1%	4.7%
Doctor or healthcare provider	3.1%	4.4%
Sample size	73	3669

## PRIVACY CONCERNS

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Less than 2% of Door County ADRC customers expressed concerns about the privacy of their conversations with the ADRC.

## TIMING OF THE VISIT

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The majority of customers said they came to the ADRC at about the right time.

	Door	Statewide
Came at about the right time	76.1%	69.3%
Wish they'd come sooner	23.9%	30.2%
Sample Size	67	4295

## EASE OF GETTING IN TOUCH

---

On a scale of one to four, where one is poor and 4 is excellent, customers rated the Door ADRC more than halfway between “good” and “excellent.” These ratings are very favorable and higher than the statewide averages.

	Door	Statewide
Ease of finding the phone number	3.7	3.5
Returning calls promptly	3.6	3.5
Hours someone is available	3.6	3.5

# THE CUSTOMER EXPERIENCE

- ✓ Customer ratings of their experience related to interactions with staff are close to statewide averages, with the exceptions of helping to navigate the system, which is higher and help with the paperwork and help considering pros and cons, which are each lower than statewide averages.
- ✓ Each item was rated very favorably (3.6 to 3.8) on a scale of one to four, with four being “excellent.”

## CUSTOMER RATINGS OF ELEMENTS OF THEIR ADRC EXPERIENCE

	Door	Statewide
Was knowledgeable about a range of services	3.8	3.8
Understood my needs and preferences	3.8	3.8
Helped me navigate the system	3.8	3.7
Made it easier to get needed information	3.8	3.8
Explained each step clearly	3.8	3.8
Got a good sense of what I could afford	3.8	3.8
Helped me understand the cost of different alternatives	3.8	3.8
Helped me use resources wisely	3.8	3.8
Helped me follow through on my decisions	3.7	3.7
Helped with the paperwork if needed	3.7	3.8
Helped me consider the pros and cons	3.6	3.7
Sample Size	70	4295

## IMPORTANCE OF THE OBJECTIVITY OF THE ADRC

The vast majority of customers think it is very important that the ADRC has no financial interest in their decisions, never charges for services and lets customers return if they need additional information or change their mind about the services they need.

They have no financial interest in your decisions.



Very Important, 73.5% N=68

They never charge for their services.



Very Important, 87.1% N=70

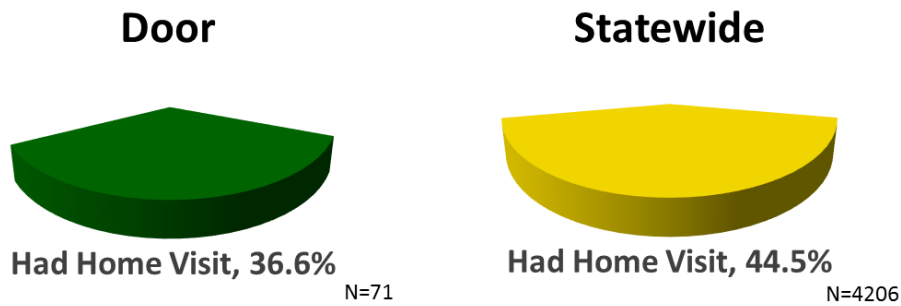
You can go back if you change your mind or need more information.



Very Important, 91.3% N=69

# HOME VISITS

One in three customers (36.6%) received a home visit, which is below the statewide average of 44.5%.



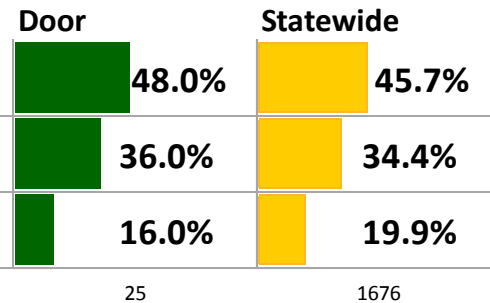
## LENGTH OF TIME TO HOME VISIT

The ADRC of Door County conducted a slightly higher percentage of home visits both within one week and less than 3 days as compared to the statewide average.”

within one week as compared to the statewide average.  
Less than 3 days

One week

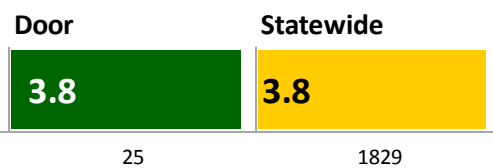
More than one week



## SATISFACTION WITH THE HOME VISIT

Satisfaction with home visits is very high.

Average Satisfaction



## REFERRALS TO COMMUNITY RESOURCES

This section presents results related to referrals made through the ADRC and their outcomes. In addition to the information below, less than half (37.3%) of customers received a referral compared with 40.1% statewide in 2015. A higher than average percentage of Door customers received a referral to a long-term care facility, nursing home or assisted living and a lower than average percentage were referred to Family Care or IRIS. Note that this section refers to just those customers who received a referral to a resource external to the ADRC. The small sample size requires caution in interpreting these results.

### CUSTOMER REFERRALS TO RESOURCES

	Door	Statewide
Long-term care facility, nursing home or assisted living	20.0%	11.7%
Medicaid, Medicare	8.0%	8.6%
Food stamps, food bank	8.0%	3.7%
Legal services	8.0%	2.4%
Disability services	4.0%	9.9%
Family Care, IRIS	4.0%	20.3%
Meals on Wheels	4.0%	6.6%
Housing	4.0%	4.0%
Social Security	4.0%	1.8%
County Services	4.0%	6.0%
Sample Size	25	1643

### RESULTS OF CUSTOMER REFERRALS TO RESOURCES

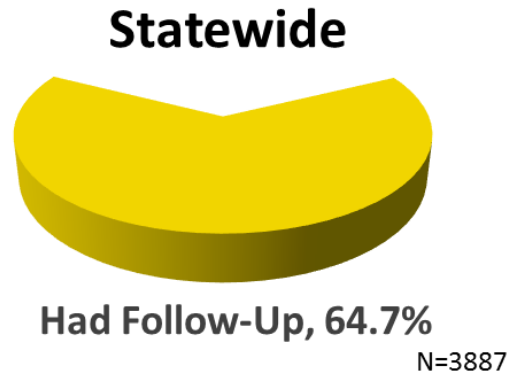
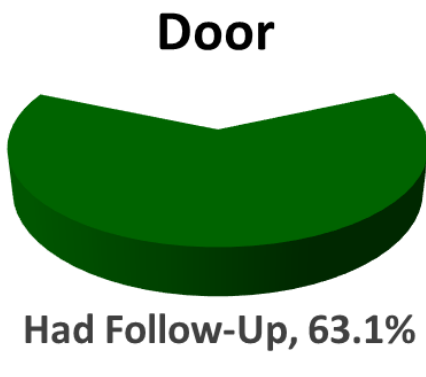
	Door	Statewide
Received services	60.0%	69.6%
Too soon to tell	20.0%	15.3%
Services not what was wanted/needed	8.0%	4.1%
Not eligible	8.0%	3.9%
Unsure	4.0%	5.1%
Sample Size	25	1643

## FOLLOW-UPS

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Following up, calling a customer after they have received the needed information to check on any additional needs or barriers they may have encountered, has been shown in previous research to have a strong impact on customer satisfaction and the usefulness of the ADRC experience.

- ✓ Approximately two out of three customers (63.1%) reported receiving a follow-up to see how they were doing. This is comparable to the statewide average.
- ✓ Among those customers who did not receive a follow-up (not shown), slightly more than half (52.4%) said they would have liked one.



## CUSTOMER SATISFACTION DOMAINS

In the 2008 and 2010 customer satisfaction surveys, a set of domains were developed to provide a nuanced understanding of the elements that comprise customer satisfaction. Through statistical analysis, these domains emerged as distinct qualities of the ADRC that are significant predictors, or key drivers, of all aspects of customer satisfaction.

Domain scores are assessed by taking an average of all items that contribute to the domain. Like the items that comprise them, domain scores are measured on a scale of one to four. Customers were asked if each item was excellent (4), good (3), fair (2) or poor (1) or, in the case of statements, if they strongly agreed (4), somewhat agreed (3), somewhat disagreed (2) or strongly disagreed (1). Responses of “don’t know” were removed from the analysis.

Domain	Meaning	2015 Indicators
<b>Personalization</b>	Consideration for the customer’s and their family’s individual needs and circumstances, following up to see how they were doing.	The person I worked with understood my needs and preferences. Got a good sense of what I could afford.
<b>Accessibility</b>	Convenience of location, hours, responsiveness and privacy when talking to staff.	Ease of finding the phone number. Returning calls promptly. Hours someone is available.
<b>Culture of Hospitality</b>	Responsiveness and courtesy of staff.	Waiting time in office. Comfort of the waiting room environment. Privacy of conversation.
<b>Knowledge</b>	Offering knowledge about a wide range of services and easy access to information.	Was knowledgeable about a range of services. <Did not> overwhelm me with too much information Made it easier to get the information I needed.
<b>Guidance</b>	Explaining each step clearly, helping to navigate the system and fill out paperwork.	Helped me consider the pros and cons. Explained each step clearly. Helped with the paperwork if needed. Helped navigate the system.
<b>Empowerment</b>	Helping the customer to explore their choices, weigh the pros and cons, and connect to needed services.	Let me know what to expect next (yes/no) Helped me follow through on decisions. Helped me consider future needs. Helped me understand the cost of different alternatives. Helped me use my resources wisely.

## DOMAIN RATINGS

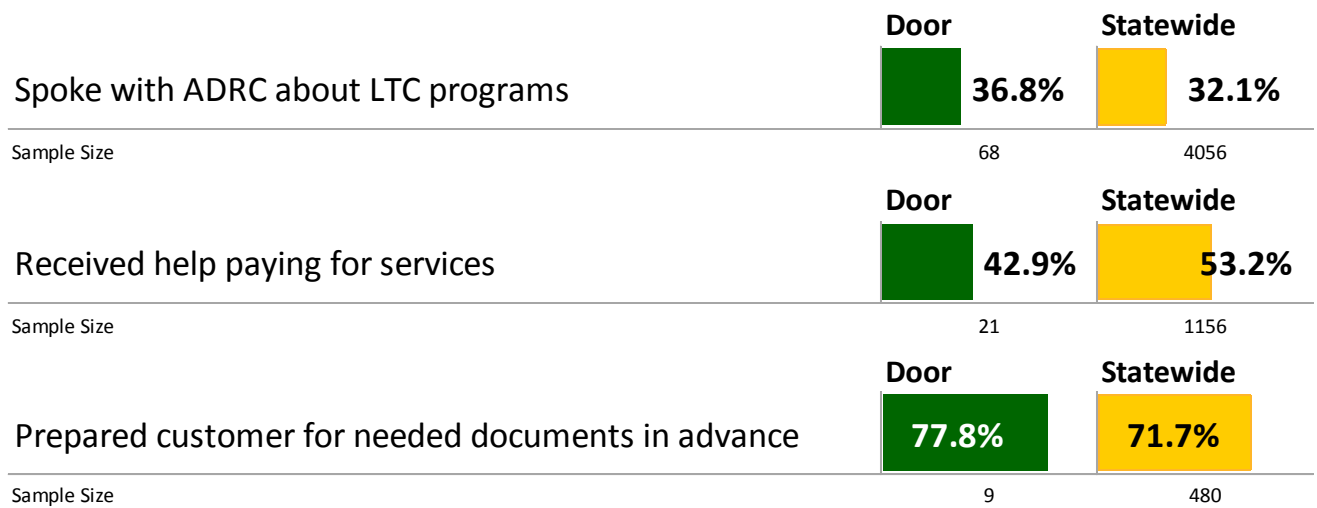
- ✓ Accessibility, Hospitality, Guidance and Empowerment are each rated above the statewide averages.
- ✓ All domains were rated favorably, with good to excellent ratings (3.0 to 3.9).

	Door	Statewide
Personalization	3.0	3.0
Accessibility	3.6	3.5
Hospitality	3.1	3.0
Knowledge	3.6	3.6
Guidance	3.9	3.8
Empowerment	3.6	3.5



# ENROLLMENT COUNSELING INTO PUBLICLY FUNDED LONG TERM CARE PROGRAMS

- ✓ Approximately one in three Door customers (36.8%) talked to the ADRC about Medicaid program choices. Among those who talked with the ADRC about this issue, less than half (42.9%) pursued Medicaid as a way to help receive services.
- ✓ Among those who did enroll in a Medicaid program, the vast majority (77.8%) said that the ADRC prepared them for the documents that would be needed.
- ✓ The small sample size for Door customers requires caution in interpreting these results.



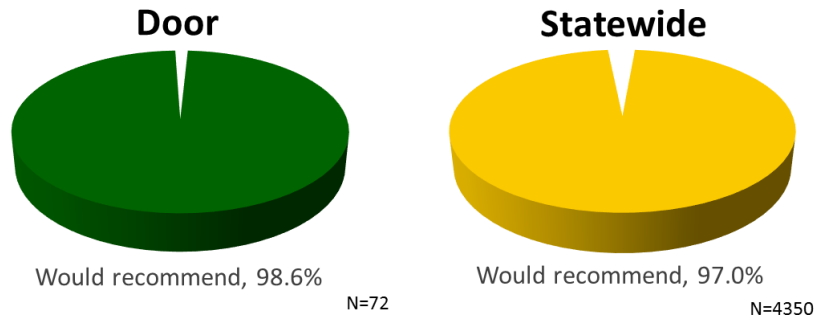
# CUSTOMER SATISFACTION OUTCOMES

- ✓ Customers rated their overall experience at the ADRC of Door County very favorably at 3.7, more than halfway between good and excellent. This is slightly above the statewide average.
- ✓ The usefulness of the information received was rated at 3.7.

	Door	Statewide
Overall experience	3.7	3.6
Usefulness	3.7	3.7
Sample Size	72	4293

## OTHER OUTCOMES

The vast majority of Door customers said that they would recommend the services of the ADRC.

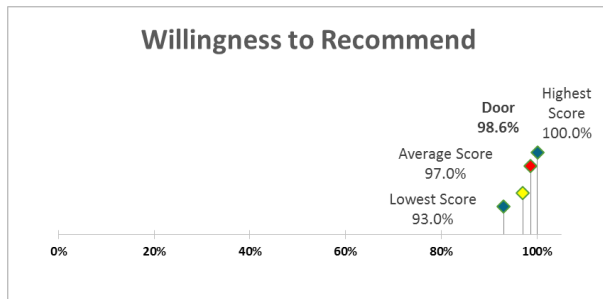
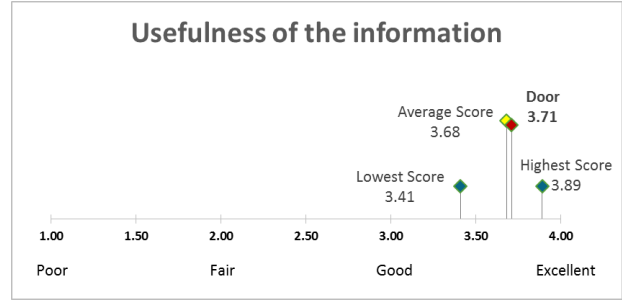


More than one in four customers said that their experience with the ADRC helped them prevent or delay going into a nursing home.

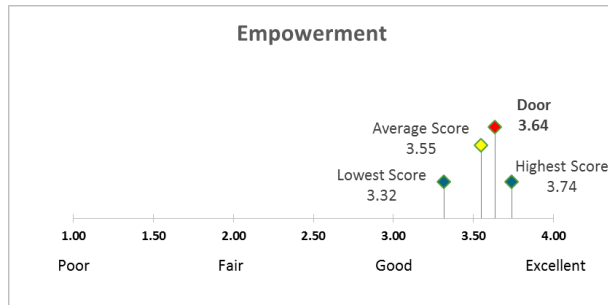
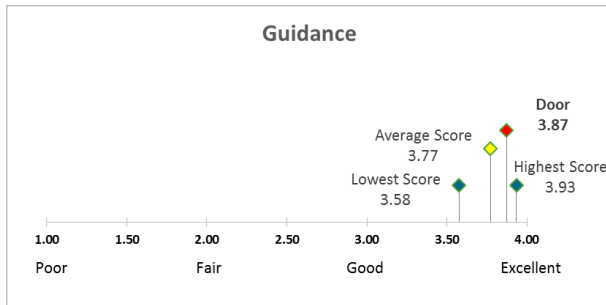
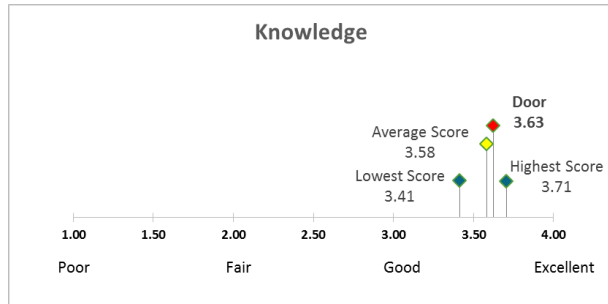
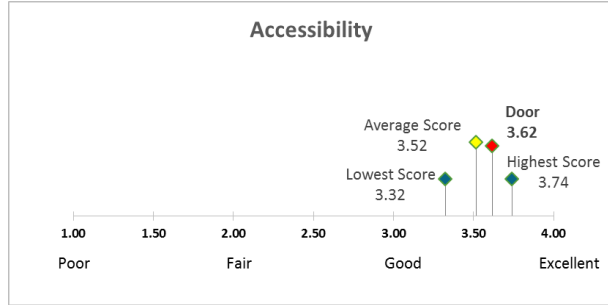
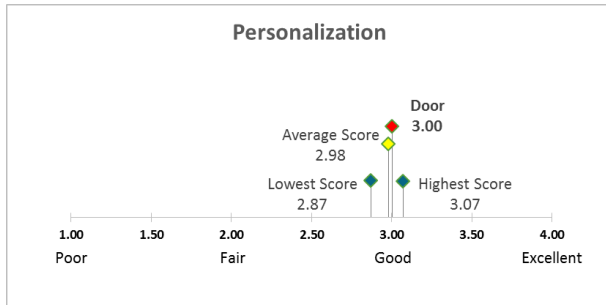
	Door	Statewide
Noticed an unrecognized need or concern	30.0%	33.7%
Helped avoid or delay nursing home care	27.0%	29.6%
Helped prevent a fall or an accident	58.1%	66.7%
Learned about safety issues	50.8%	53.6%
Was not overwhelmed by too much information	87.3%	82.8%
Sample Size	71	4344

## COMPARISONS TO AVERAGE, LOWEST AND HIGHEST SCORES

The following charts show the Door County ADRC relative to the lowest, highest and average scores for other ADRCs statewide. Shown on this page are outcomes for overall experience, usefulness, willingness to recommend and ease of obtaining information.



The following charts show the domain averages for Door relative to the lowest, highest and average scores for other ADRCs statewide. Shown on this page are the domains of Personalization, Accessibility, Culture of Hospitality, Knowledge, Guidance and Empowerment.



## INFLUENCES ON CUSTOMER SERVICE OUTCOMES

The following table shows Door results for questions that are strong predictors of customer service outcomes. The Gap Analysis shown in the table provides an indicator of how far above or below the statewide average Door was rated. A negative “gap” means that your ADRC is below average, and a positive gap that you are above average. All of the Door County ADRC items listed below are rated above average.

Key drivers of customers’ rating of their overall experience at the ADRC included helping with the paperwork if needed, letting customers know what to expect next, understanding customers’ needs and preferences and the percentage of customers reporting they only had to explain situation once.

Helping customers understand the cost of different alternatives and navigate the system were each strongly associated with customers’ rating of the usefulness of the information they received.

All items are at or above statewide averages.

### ADRC PROCESSES AND CHARACTERISTICS ASSOCIATED WITH SELECTED ASPECTS OF CUSTOMER SERVICE

Customer Service Aspect	Predictors	Door	Statewide	Gap
Overall Experience	Helped with the paperwork if needed	3.92	3.82	0.10
	Let me know what to expect next	78.8%	78.6%	0.2%
	Understood my needs and preferences	3.86	3.80	0.06
	Percentage of customers reporting they only had to explain situation once	86.1%	76.6%	9.5%
Usefulness	Helped me understand the cost of different alternatives	3.90	3.75	0.15
	Help me navigate the system	3.82	3.75	0.07



## NEW OPPORTUNITIES

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- ✓ **Targeting Follow-Ups.** Approximately two out of three (63.1%) of customers received a follow-up, comparable to the statewide average. Among those customers who did not receive a follow-up however, more than half said they would like one. By continuing to refine the understanding of when a follow-up is desired and providing follow-up to all customers who are open to the contact may help Door to continue to improve its excellent level of customer service.
- ✓ **Increasing Referral Utility.** Eight percent of customers said that the referral they received was not what they needed or wanted, and another eight percent said they were not eligible for the referred service. The utility of referrals could be improved by better understanding the customers' needs before making a referral and by following up to identify those who have encountered a barrier to following through or who have found that the referral is not what was needed.
- ✓ **Reaching New ADRC Customers.** Although over 75% of Door customers said that they came to the ADRC at about the right time, expanded outreach efforts can always reach new customers and inform the public that they can seek information for themselves or a loved one.