

**GREEN LAKE COUNTY
DEPARTMENT OF HEALTH & HUMAN SERVICES**

HEALTH & HUMAN SERVICES

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Post Date: 4/19/16

The following documents were distributed at the Aging Advisory Committee meeting held on Wednesday, March 16, 2016

- Agenda for March 16, 2016 meeting
- Draft Aging Advisory Minutes – January 20, 2016
- Aging/Long Term Care January/February Report
- 2015 Aging/Long Term Care Annual Report
- Aging Unit Self-Assessment for 2015



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DEPARTMENT OF HEALTH & HUMAN SERVICES

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Health & Human Services Aging Advisory Committee Meeting Notice

Date: March 16, 2016 Time: 10:00 AM
Green Lake County Government Center
571 County Road A, Room #1135, Green Lake, WI

AGENDA

**Committee
Members**

Dick Trochinski
Barb Reif
Yolanda Gallegos
Betty Gross
Carol Kujawa

1. Call to Order
2. Certification of Open Meeting Law
3. Pledge of Allegiance
4. Agenda
5. Minutes: (1/20/16)
6. Appearances:
7. Public Comment (3 minutes):
8. Correspondence
9. Greater Wisconsin Agency on Aging Resources Inc.
10. Health & Human Services Board Report
11. Old Business:
 - January and February Program Information
 - Network Health Insurance
12. New Business:
 - 2015 Self Assessment
13. Committee Discussion
 - Future Meeting Date/meal sign-up
 - Future Agenda items for action & discussion
14. Adjourn

Kindly arrange to be present, if unable to do so, please notify our office.
Sincerely, Betty Bradley, Aging/Long Term Care Unit Manager

Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date of the meeting.

COMMISSION ON AGING ADVISORY MINUTES

January 20, 2016

Present: Dick Trochinski, Betty Gross-Flanigan, Carol Kujawa, Barb Reif

Others Present: Betty Bradley, Karen Davis

Absent: Yolanda Gallegos

Requirements of Open Meeting Law have been met.

CALL TO ORDER:

The meeting was called to order at 10:05 a.m. by Trochinski at the Green Lake County Government Center.

PLEDGE OF ALLEGIANCE:

The Pledge of Allegiance was recited.

APPROVAL OF AGENDA:

Motion/second (Gross-Flanigan/Reif) made a motion to approve the agenda. All ayes. Motion carried.

ACTION ON MINUTES:

Motion/second (Gross-Flanigan/Reif) to approve the November 4, 2015 minutes. All ayes. Motion carried.

APPEARANCES: None.

PUBLIC COMMENT: None.

CORRESPONDENCE: Bradley read a letter from the Green Lake County Ripon Foundation approved for a grant for 2016 for the food pantry in the amount of \$3,472.00 from Green Lake basic needs fund. Discussion followed.

Bradley reported that she received a e-mail from GWAAR regarding the 2015 self-assessment that is due in March 2016.

Bradley reported that the Green Lake County Aging Plan and budget were approved through GWAAR.

GREATER WISCONSIN AGENCY ON AGING RESOURCES, INC (GWAAR): Bradley reported there was a conference call on Tuesday, January 19, 2016. Bradley reported regarding a program called elder tree - social media site similar to Facebook for older individuals.

Bradley discussed the potential transition in the State regarding assisting in the care of elderly individuals. Discussion followed.

The next meeting for GWAAR will be in April 2016.

HEALTH & HUMAN SERVICES BOARD REPORT Trochinski reported regarding the January the Health & Human Services Board. Trochinski updated Committee members regarding the Director applications. Trochinski reported that Linda Van Ness will continue as the Acting Director.

OLD BUSINESS: September, October, November & December Program Information: Bradley provided the September, October, November and December Program reports for Committee review. Discussion followed..

2016-2018 Aging Plan: Bradley reported that the final 2016-2018 Aging Plan was approved. Betty provided Committee members with a summary of budget amounts. Discussion followed.

NEW BUSINESS: Network Health Insurance: Bradley updated Committee members that ThedaCare is considering not continuing with Network Health Insurance as a provider. Bradley updated Committee members regarding circumstances. Discussion followed.

COMMITTEE DISCUSSION Discussion followed regarding the location of the business meetings.

Future Meeting Date: The next meeting of the Aging Advisory Committee will be March 16, 2016 at the Green Lake County Government Center at 10:00 a.m.

Future Agenda Items for Action and Discussion: Self-Assessment; new Committee members; Annual Report

Motion/second (Gross-Flanigan/Cujawa) to adjourn the meeting. All ayes. Motion carried.

The meeting adjourned at 10:53 a.m.

AGING REPORT - 2016

Mealsites - Berlin Senior Center, Darford Bay Apartments, Grand River Apartments																		
HOME BOUND								CONGREGATE								MEAL PROGRAM		
HDM #	DONATION AMOUNT	HDM #	DONATION AMOUNT	HDM #	DONATION AMOUNT	HDM TOTAL MEALS	HDM TOTAL DONATION	CONG # SERVED	DONATION AMOUNT	CONG # SERVED	DONATION AMOUNT	CONG # SERVED	DONATION AMOUNT	CG TOTAL MEALS	CG TOTAL DONATION	TOTAL MEALS	TOTAL DONATION	
January	502	\$1,652.80	462	\$1,506.56	345	\$1,194.00	1,309	\$4,353.36	247	\$878.00	118	\$152.00	114	\$124.00	479	\$1,964.00	\$ 1,788.00	\$5,507.96
February	437	\$2,134.80	505	\$1,643.80	342	\$939.00	1,284	\$4,717.60	254	\$751.10	115	\$277.00	128	\$244.80	489	\$1,272.90	\$ 1,779.00	\$5,990.50
March																		
April																		
May																		
June																		
July																		
August																		
September																		
October																		
November																		
December																		
TOTALS	939	\$3,787.60	967	\$3,150.36	687	\$2,133.00	2593	\$9,070.96	501	\$1,629.10	233	\$429.00	240	\$368.80	974	\$2,426.90	\$ 3,567.00	\$11,467.86

3/16/16

2015 Annual Report
Aging and Long Term Care Unit

The Aging / Long Term Support Unit provides services to Elderly and Disabled residents of Green Lake County. The staff is divided into program areas largely defined by funding source, however, the programs overlap in many areas, and the combined unit is able to maximize these resources to the advantage of all of the people we serve.

There were 11 staff in the Aging and Long Term Care Unit during 2015 including the Unit Manager, 2 Resource Specialist Social Workers, the Adult Protective Services Worker, three Meal Site Managers, the Nutrition/Volunteer Coordinator, the Elderly Benefit Specialist, the Disability Benefit Specialist, and the Aging Disability Resource Center Coordinator.

Aging and Disability Resource Center

Green Lake County operates the Aging and Disability Resource Center (ADRC) in a consortium with Adams, Marquette and Waushara Counties. This consortium is funded by the State to provide a single point of entry to Long Term Care Services and Information and Assistance for residents of the four counties. Aging and Disability Resource Centers are the first place to go to get accurate, unbiased information on all aspects of life relating to aging or living with a disability. The ADRC provides information on a broad range of programs and services, helps people understand the various long term care options available to them, helps people apply for programs and benefits, and serves as the access point for publicly-funded long term care. Green Lake County continues to employ the ADRC Coordinator, who works with the multi-county committee that contracts with the state to assure ADRC service provision. Additional ADRC staff are employed by each county and duties are shared across county lines.

DISABILITY BENEFIT SPECIALIST

The Disability Benefit Specialist (DBS) position provides assistance for persons ages 18 to 59 who have any kind of disability, in applying for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). Like the EBS, the DBS assists people with Medicare, to find the best Medicare Part D prescription drug plans for their individual needs.

The DBS program is overseen locally by the Aging Unit Supervisor and technical assistance is provided by attorneys at Disability Rights of Wisconsin (DRW), whose office is based in Madison. DRW is a private non-profit organization that fights for the rights of disabled people across Wisconsin. DRW has a contract with the State of Wisconsin to provide technical assistance to the Disability Benefit Specialist across the State. DRW provides monthly training through meetings and web casts with all DBS positions across the state. Each DBS also has a weekly phone conference with the assigned attorney to provide assistance with day to day questions.

In 2015 a total of 131 new cases were opened, 108 cases were closed, 55 cases were carried over and a total of 210 cases were served. A conservative estimate of the economic impact of the DBS program in Green Lake County for 2015 shows that is brought in over 1 million dollars to the local economy. The DBS carries an average case load of 60 cases at any one time.

HEALTH PROMOTION PROGRAMS

The ADRC has actively offered community health and disease prevention education programs, with an emphasis on fall prevention and chronic disease self management. In 2015 5 classes were held in Green Lake County. There were 36 individuals who participated in workshops offered through the Health Promotion Programs. The workshops offered were: Living Well with Chronic Conditions, Healthy Living with Diabetes, Mind Over Matter, and Stepping On.

AGING PROGRAMS

The County Aging Unit is the Agency designated by the County Board and authorized by the Older Americans Act to continue to develop, support, assist, and evaluate County-based programs for older adults (over age 60) with the purpose of fostering independence and enhancing the quality of life for older adults in the county.

All Federal money from the Older Americans Act, Title III, is distributed to the state, which gives it to the regional Area Agency on Aging and then to the Counties. The amount each County receives is determined by a set formula. Included in the formula is the number of elderly, low-income elderly and isolated elderly individuals within the County.

Federal Title III-B money is used for various service programs such as elderly health screening, transportation, the elderly benefit specialist, and program development for Senior Centers. Matching local funds and required In-Kind assistance provides the rest of the resources for the Aging programs. In 2015, volunteers provided 688.5 hours equal to \$11,539.57 In-Kind match for Title III-B programs. Federal Title III C-1 & 2 must be used for elderly nutrition. See below for more information on the elderly nutrition and matching In-Kind amounts.

CONGREGATE NUTRITION PROGRAM (C-1)

The Nutrition Program assists older individuals to live independently by promoting better health through improved nutrition. It reduces the isolation of older individuals through nutrition related and supportive services. It prevents malnutrition and promotes good health through nutrition education, screening and intervention. The Aging Unit Nutrition/Volunteer Coordinator is trained as a certified ServSafe Professional Food Manager/Nutrition Director and oversees both the Congregate and Homebound Meal Programs.

In 2015, 7083 meals were served at three Mealsites: Berlin Senior Center, Dartford Bay Apartments - Green Lake, and Grand River Apartments - Markesan. The meals are prepared by Berlin Senior Center Kitchen (Berlin only) and the rest by Feil's Catering from Randolph.

Menus are prepared a month in advance and approved by a contracted state approved Nutritionist to ensure that they meet the USDA dietary requirements.

Volunteers play a vital role in all our C-1 programs; twenty-five (25) volunteers donated approximately 1,725 hours in the Nutrition Program. These hours equal \$12,508.06 in In-Kind Dollars. In-Kind includes activities such as setting tables, serving food, clean-up tasks, and doing paperwork and are a requirement of the Older Americans Act to earn funds for the meal programs. Donations at \$4.00 per meal received in this program were \$23,650.14.*

HOMEBOUND MEAL PROGRAM (C-2)

In 2015, 14,221 meals were served throughout the County to persons who are unable to go to the meal sites for health related reasons. Requests for Homebound meals come from hospital discharge planners, meal site managers, units of Health and Human Services, doctors, and families and enable the older person to remain in his or her own home as long as possible. Requests are referred to the Resource Specialist who meets with each new enrollee to conduct a thorough nutritional assessment; these are updated annually. The meal delivery program is also a part of a support system that checks on the elder person four to five days per week depending on their location. Drivers are trained to watch for changing needs and to alert the Resource Specialist/Nutrition Director as necessary.

Donations at \$4.00 per meal received in this Program were \$62,721.87.*

* Subject to Audit

TITLE III-D PROGRAM

In 2015 this program provided funding for nutrition services, medication management and adult health screening. Eating Healthy for Successful Living for older Adults was also funded in Green Lake County. 12 seniors attended and enjoyed the classes.

TRANSPORTATION

One of the greatest needs for the elderly and/or handicapped person is transportation. The Aging Unit receives and administers the 85.21 State Grant monies, \$81,740.00 in 2015. Service priorities are MEDICAL TRIPS, NUTRITION-RELATED ACTIVITIES, WORK-RELATED ACTIVITIES, and SOCIAL ACTIVITIES. Handicapped and older adults were provided 26,262 trips in 2015 with 85.21 funding.

TEFAP - (THE EMERGENCY FOOD ASSISTANCE PROGRAM)

The Food Pantry is operated by the Aging/Long Term Care Unit of the Department of Health and Human Services and is available to any indigent person/family in an emergency situation. The Food Pantry is funded by TEFAP, FEMA and private donations from fundraisers and local donors.

The Emergency Food Assistance Program/Food Pantry operates the first, second, and fourth Thursdays each month, and the third Tuesday evening. The Food Pantry currently has 31 volunteers who staff the days the food pantry is open. The volunteers also help pack food bags, pick up donations and food that has been purchased at Feeding America or local grocery stores.

Eligible residents of the County may attend once each month. Throughout 2015, the Food Pantry served an average of 259 households, and 535 individuals per month. Each household was provided an average of 45 pounds of food for a month. The bags include such things as fresh potatoes, carrots, margarine, cheese, cereal, canned fruit and vegetables, pasta, peanut butter, and soup, etc. In 2015 the food pantry was able to provide turkeys and hams for the holiday season.

ELDER ABUSE AND NEGLECT PROGRAM

The County Aging and Long Term Care Unit has been designated as the lead Agency in the Elderly Abuse Reporting System. Services provided to elders in crisis include Relocation and Shelter costs, Medical care, Legal Services, Supportive Homecare, Guardianship evaluations, and Outreach. These services are offered to older adults to help them resolve abusive or neglectful situations. The Adult Protective Services Social Worker investigates abuse and neglect referrals.

There were a total of twenty-seven (27) Elder Abuse investigations in 2015, with ten (10) Elder Abuse cases substantiated. The remaining cases were either unsubstantiated (8) or unable to be substantiated (9) for a variety of reasons. The most frequent concern was self-neglect, followed by material / financial abuse. (Also see Adult Protection / Guardianship in Long Term Support Section).

In 2007, a parallel system for Abuse and Neglect investigation and reporting for **Vulnerable Adults** was instituted by state law. The Adult Protective Services worker is the lead for this system also. The reporting requirements are very similar to the Elder Abuse system. In 2015, there were 4 reports of abuse to **Vulnerable Adults**; 2 were substantiated, 1 unsubstantiated, and 1 unable to substantiate.

In either system, investigations are handled in different ways depending on the initial referral and assessment. Some cases will go directly into the Court system due to a need for a Protective Placement. These can result in a 72-hour placement with guardianship assessment for competence. Other cases may involve various support systems including: family members, physicians, homecare, banks, attorneys, and law enforcement, and may take months for each case to be resolved.

ELDERLY BENEFIT SPECIALIST PROGRAM

The Elderly Benefit Specialist coordinates information and counseling regarding the public benefit program to individuals **sixty** years of age and older. Case records are maintained and all are kept confidential. Monthly reports are completed and forwarded to the State.

The Elderly Benefit Specialist also attends ongoing training programs, maintains public relations, does public speaking, writes media releases, performs Outreach services at Senior Centers, Mealsites, Community Meetings, and contributes articles Bi-monthly to the Senior publication, the Senior Sentinel.

Outreach services may include providing Medicare Part D or Senior Care appointments. Moreover, Social Security, SSI, Medical Assistance, Spousal Impoverishment, Medicare, Medicare Part D, Medicare Advantage and Supplemental Insurance may be reviewed along with Information and Referral services.

In 2015, there were 382 Open Cases, and 92 hours of training. Through these efforts, the Elderly Benefits Specialists' program saved Green Lake County elderly clients \$68,432.00 for the Senior Care program, \$262,168.00 for MA QMB/SLMB, \$1,399,029.00 for Medicare Programs, \$120,791.00 for Food Share, \$366,093.00 for EAP, Fraud or MAPP Programs, \$87,228.00 for SS/SSI Disability and \$79,150.00 for other programs in the Aging Unit. This is a total savings of \$2,382,891.00 for the elderly citizens of Green Lake County.

There were 1473 Information and Referral and 349 Medicare Part D inquiries to the Aging Unit and 204.5 hours of Outreach Services and 29 hours of presentations at the various Senior Centers and meal sites.

FAMILY CAREGIVER PROGRAM

Under the Federal Family Caregiver Grant, the Volunteer Coordinator identifies and meets with caregivers who are elderly, including grandparents who are raising grandchildren. A monthly support group, training, loan library, respite care and information and assistance are available for caregivers. We served fifteen (15) caregivers in 2015 through this program.

OTHER PROGRAMS

Volunteers for programs in the Aging Unit are recognized for their services at the Volunteer Luncheon in April. In 2015, over 150 persons were invited and given a small gift of thanks. The volunteers serve in all the programs listed for this Unit. They are most valuable; we could not serve the public without them.

The Senior Sentinel is a bi-monthly newsletter, which is published and delivered to over 950 households. The articles that appear in this publication help elders keep up-to-date with current information about our services and programs. The UW Extension Office and the Nutrition program provides healthy recipes and health tips. Notices are published concerning Immunizations, Foot Care Clinics, up-coming programs, Food Pantry news, Support Group dates, TRIAD meetings and Benefit Specialist updates. Articles are also submitted by the local senior centers. The publications let the community know what is happening at each center. Information is also published regarding Health Promotion classes, Energy Assistance, Homestead Tax Credit, Social Security and how to contact your legislators, as well as volunteer opportunities, and menus for the Senior Nutrition Program.

Each year in August, the Commission on Aging sponsors a countywide Senior Picnic. In 2015, 180 elders from throughout the County, along with 10 staff and volunteers, attended the County Senior Picnic at St John the Baptist Catholic School Gym in Princeton.

LONG TERM CARE UNIT

COMMUNITY OPTIONS PROGRAM (COP)

Throughout 2015, one (1) individual received COP funds. These funds were used to purchase group home care, monitoring and supervision. 2015 was the final year for the COP Program.

ALZHEIMER'S FAMILY CAREGIVERS SUPPORT PROGRAM

During 2015, we received \$5434.00 in Alzheimer's Family Caregivers Support Program (AFCSP) funds. These funds provided a variety of services to two (2) individuals who suffer from Alzheimer's disease.

SUPPORTIVE HOME CARE

Throughout the year, two (2) individuals received Supportive Home Care (SHC) funded services, including housecleaning, yard work, meal preparation and assistance with laundry, lifeline, etc.

ADULT PROTECTIVE SERVICES/GUARDIANSHIPS

The Adult Protective Services Social Worker performed twelve (12) guardianship studies for adults in 2015. These consisted of Temporary, Permanent and Successor Guardianships. In addition, thirty-seven (37) Protective Placement reviews were completed. All reviews require a brief summary hearing on each of these placements to ensure that the continuation of the placement is appropriate, least restrictive and most integrated into the community. The Adult Protective Services worker submits a report to the court and attends each review hearing. The Protective Placement reviews consisted of one (1) due to Infirmities of Aging, eighteen (18) associated with Developmental Disabilities, six (6) with Mental Illness and thirteen (12) due to Degenerative Brain Disorder or other incapacities. Placements were monitored in nursing homes, Community Based residential Facilities (CBRF), State Centers for the Developmentally Disabled, Adult Family homes, and private homes or apartments. In addition, Power of Attorney documents and advanced planning information is regularly requested and assistance provided as needed. (Also see Elder Abuse/Neglect)

3/16/14

**BUREAU OF AGING AND DISABILITY RESOURCES
AGING UNIT SELF-ASSESSMENT FOR 2015**

County/Tribe: Green Lake County					
Name of Aging Unit Director: Betty Bradley					
Approved by Commission on Aging?	Yes		No		Date Approved: 03-16-16

Part I: Compliance With the Wisconsin Elders' Act

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

Part I: Compliance With the Wisconsin Elders' Act (continued)

Needs to be completed only if there have been changes since completing your 2013-2015 plan.

Full-Time Aging Director The law requires that the aging unit have a full-time director as described below. Does the county/tribe have a full-time aging director as required by law?	Does the aging unit have a full-time aging director?	
		Yes X
		No
Membership of the Commission on Aging Members of a county or tribal commission on aging shall serve for terms of 3 years, so arranged that as nearly as practicable, the terms of one-third of the members shall expire each year and no member may serve more than 2 consecutive 3-year terms. In the case of county board members, the requirement is 3 consecutive 2-year terms.	Is the aging unit in compliance?	
		Yes X
		No

Members of the Commission on Aging (please list)

Name of Individual	Age 60 and Older (x)	Elected Official (x)	Year first term began
Chairperson: Richard Trochinski	X	X	2011
Betty Gross	X		2010
Yolanda Gellegos	X		2015
Jack Meyers	X	X	2010
Carol Kujawa	X		2010
Barbara Reif	X		2014

IMPORTANT: If the aging unit does not meet with all of the above, it is required to submit a corrective action plan outlining a timeline and goals, in SMART format, to GWAAR.

The policy manual outlines such plans which must include involvement of older persons, discussion of such a plan at commission on aging/advisory committee meetings and appropriate public hearing notices, meeting notices, agendas, and minutes. Corrective action plan documents must be sent electronically to GWAAR (sarah.cowen@gwaar.org).

Part II: Activities to Help Older People Advocate for Themselves

1. What does the aging unit do to inform older people about the issues that affect their lives?

Green Lake County publishes a bi-monthly Senior Newsletter that goes to over 900 households in the community. This newsletter contains articles regarding issues that affect the elderly, upcoming classes and events, and updates from all the Sr. Centers in the County. We also publish articles in the County Newspaper regarding upcoming events and important issues. The Aging unit also works closely with the ADRC, and the ADRC informs the elderly who have contact with the ADRC of events, classes, and issues that may affect them. The EBS holds open hours at each of the Senior Centers in the County monthly, where any Senior may come to discuss any issue, topic, or problem. Posters with information on events/issues or classes are displayed throughout the community and at the ADRC and Food Pantry.

2014 – The Green Lake county Aging Unit continues to publish its bi-monthly newsletter which informs the community about upcoming events and important issues that affect the elderly. We continue to hold open hours in each of the Senior Centers monthly, where any senior may come to discuss any issue that is affecting them in their everyday life. The Aging unit publishes articles in the local newspapers informing the elderly of issues or events that may affect them.

2015 – Green Lake county continues to hold open hours at each of the Senior Centers in the County on a monthly basis, at which any senior may come to discuss any issue/topic they wish. Aging Unit staff provide presentations at the local TRIAD meetings to keep seniors updated on important issues and programs. We continue to publish a bi-monthly Newsletter that goes out to over 900 Seniors in the community to keep them informed. We also publish articles in the local newspaper regarding important issues or programs.

2. How does the aging unit teach older people to act as advocates?

Our EBS does a lot of one on one counseling with elderly consumers to help them learn to advocate for themselves. We also schedule seminars on different topics to educate seniors and let them know how they can advocate for themselves and others. The Green Lake County ADRC also meets with seniors to assist them in advocating for themselves.

2014 – Our EBS and ADRC staff continue to meet one on one with seniors in Green Lake County to help them learn to advocate for themselves, and to assist and act as advocates for the elderly.

2015 – The EBS and ADRC staff continue to work with seniors one-on-one to help them advocate for themselves. Our Staff also speak at the local TRIAD meetings on topics such as self advocacy. Staff also speak at the local Senior Centers on various topics including advocacy.

3. How does the aging unit advocate on behalf of the older people it serves?

The aging unit advocates by taking issues of concern to the elderly, to the supervising committees to try to influence policy, procedure and budgets for aging programs. The EBS advocates on an individual basis by contacting Social Security, Veterans Services, Economic Support, landlords, health care providers, and/or insurance companies, on behalf of the elderly consumer they are working with to try to affect positive change for the senior. We advocate by educating the County Supervisors, Department Heads and the general public about issues/policies/programs that affect the elderly.

2014 – We continue to advocate on the behalf of elderly individuals by educating the elected officials in Green Lake County on issues that affect the elderly. We also advocate by trying to influence policy and budgets that affect the delivery of programs to the elderly in Green Lake County. The EBS continues to advocate on an individual basis with the Social Security Administration, Veterans Services, Insurance Companies, health care providers, landlords, and other County departments, on the behalf of individual elderly citizens of the County.

2015 – We continue our efforts to educate the elected officials of Green Lake County on the needs of the older person in Green Lake County. We advocate by influencing the policy and budgets adopted by the Board. Our EBS and DBS continue to advocate for individuals with the Social Security Administration, Veteran Services office, Insurance Companies, landlords, and healthcare providers.

Part III: Progress on the Aging Unit Plan for Serving Older People – Statewide Priorities

Section 4 A-F: Statewide Focus Areas Please put new progress notes in green font.	Progress Notes (briefly summarize only those activities completed as of Dec. of each year; explain if a goal was not accomplished)	Check if Done		
		2013	2014	2015
Focus 4-A: Development of a System of Home and Community-Based Services				
Goal 1: During all three years of the plan, 2013, 2014, and 2015, the Elderly Benefit Specialist will work in partnership with the Disability Benefit Specialist to provide a “Medicare and You” presentation to the citizens of Green Lake County. The purpose of the presentation is to provide information on Medicare eligibility and options to new enrollees of the program. We will conduct one joint presentation by June 30 th each year of the plan.	2013 – Two presentations were held, a total of 23 consumers attended. 2014 – Two presentations were held a total of 26 consumers attended. 2015 – Two presentations were held in 2015 with a total of 21 consumers attending.	X	X	X
Goal 2: In order to provide accurate information to the citizens of Green Lake County about home and community based services available in Green Lake and the surrounding counties, the Aging unit will work cooperatively with the ADRC to update and keep current a Resource Guide of all services available in the ADRC consortium by December 31, 2014.	2013 – Resource was updated and is on ADRC website 2014 – Since Resource Guide is on website it is kept updated at all times by ADRC staff. Small amounts are printed as well. 2015 – The Resource Guide is on our Website and updated regularly. Each site prints out guides as needed for consumers.	X	X	X
Goal 3: During all three years of the plan, 2013, 2014 and 2015, the Aging Unit staff will assist the ADRC with marketing and outreach by conducting joint outreach activities at each of the Sr. Centers in Green Lake County at least 1 time per year. The purpose of the outreach will be to make the elderly population of Green Lake County aware of the ADRC and the services it provides.	2013 – Outreaches were held at three of the Senior Centers 2014 – Outreaches and presentations were held at two of the Senior Centers. There are 6 SC, Aging Staff do monthly and weekly outreach, ADRC staff could only join twice. 2015 – Joint outreaches were held at 4 of the six Senior Centers in 2015.	X	X	X
Focus 4-B: Older Americans Act Programs				
Goal 1: The Elder Benefit Specialist will work in partnership with the UW-	2014 – The EBS did give a presentation at the		X	

<p>Extension office to be a presenter at their annual "Our Day" workshop. The purpose of the presentation will be to give the public an idea of the Older Americans Act programs and services available through their local Aging Office. The EBS will participate in the workshop in both 2014 and 2015.</p>	<p>workshop in 2014. 2015 – Our EBS was available to speak at this event in 2015, but UW –Extension chose another speaker.</p>			
<p>Goal 2: During all three years of the Plan Green Lake County will work to increase participation in Evidence based Prevention Programs. We will implement Healthy Eating for Successful Living among Older Adults by 12-31-13. We will work to recruit and train 2 new volunteers to lead Living Well with Chronic Disease and hold at least one class per year by 12-31-14.</p>	<p>2013 – Two Healthy Eating for Successful Living classes were held in conjunction with the Public Health Unit, 20 people attended. 2 Tai Chi, 1 Med Wise, 2 stepping on, and 1 living with Diabetes classes were held in conjunction with the ADRC. 2014 – The following classes were held in Green Lake County during 2014: Healthy Eating for Successful living 17 , Healthy Living With Diabetes 8, MedWise 5, Stepping On 5, Tai Chi.No volunteer for Living Well class, but ADRC Prevention Coordinator just hired and will try to find volunteers for this in 2015. 2015 – The following classes were held in 2015: Healthy Eating for Successful Living - 12 attended; Healthy Living with Diabetes - 12 attended; Living Well with Chronic Conditions - 7 attended; Stepping On - 8 attended; and Mind Over Matter - 9 attended.</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Goal 3: The Green Lake County Aging Unit will develop an educational presentation on the Aging programs, Aging staff and their responsibilities and how the public can access these programs, to provide information and training to the Health and Human Services Board, and the Aging Advisory Board by 12-31-15.</p>	<p>Still working on this goal. 2015 – The Aging/ADRC Unit developed and presented training to Board members, Health and Human Services Staff and other County employees on 9/10/15. The training was well attended by over 50 people. We received good feedback from attendees, who felt it was very helpful, and educational.</p>			<p>X</p>
<p>Focus 4-C: Alzheimer's Disease</p>				

<p>Goal 1: We will work with the Alzheimer’s Association to promote awareness of and participation in their annual Alzheimer’s Walk. The aging unit and the ADRC will provide one staff person each to be on the planning committee to help plan and promote the event by 9-30-13, and they will continue this partnership all three years of the plan.</p>	<p>2013 – the EBS and a Resource Specialist sit on the planning committee and help organize and promote the annual event 2014 – The EBS and Resource Specialist continue to work on the annual Alzheimer’s walk. 2015 – In 2015 our Adult Protective Services Worker assisted with the Alzheimer’s walk.</p>	<p>x</p>	<p>X</p>	<p>X</p>
<p>Goal 2: The AFCSP and NFCSP coordinators will meet with ADRC staff to educate them on the two programs, eligibility criteria, and how to make referrals to the programs, in an effort to increase promotion of and participation in the programs by 12-31-14.</p>	<p>This goal will continue in 2014. 2014 – The AFCSP and NRCSP coordinators have worked with the ADRC staff and the ADRC staff are referring more individuals to these two programs. Enrollment in both programs has increased in 2014. 2013 no one enrolled for NFCSP, in 2014 3 people did. 2015 – Four individuals were enrolled in the program and 2 were on the waiting list.</p>		<p>X</p>	<p>X</p>
<p>Goal 3: The Green Lake County Aging unit will provide educational programming to its community partners by arranging for and Alzheimer’s presentation at the I-Team meeting. The Aging Unit will arrange for a Psychologist to provide training on Alzheimer’s Disease and treatment options by 12-31-15.</p>	<p>2013 – Dr MaryAnn Niles presented at the I-team meeting and it was well received 2015 – Dr. MaryAnn Niles presented at our Dementia Care Coalition. 8 people were present and felt the training was very informative.</p>	<p>x</p>		<p>X</p>
<p>Focus 4-D: Emergency Preparedness</p>				
<p>Goal 1: All three years the Green Lake Aging Unit will continue to be a member of the Green Lake County Emergency Preparedness Team, and will help to update the emergency preparedness plan annually by identifying the frail elderly and disabled residents of Green Lake County who would have special needs during an emergency, helping to identify what those needs may be and be a part of planning how to meet those needs.</p> <ol style="list-style-type: none"> 1. Attend all scheduled meetings of the emergency government team as scheduled throughout the three years of the plan. 2. Assist with mock disaster that will be scheduled during the three year 	<p>On 5-29-13 the aging unit participated in a table top disaster drill with all the other emergency management team members in Green Lake County. Follow up meetings were held to discuss the drill. 2014 – the Aging Unit and the ADRC continue to attend all emergency preparedness meetings held in Green Lake County. We again participated in a regional disaster drill on April</p>	<p>x</p>	<p>x</p>	<p>X</p>

period.	24, 2014, along with all follow up meetings to discuss what worked and what did not. 2015 – Aging Staff participated in a training/ exercise on 6/10/15 on setting up a shelter. On 9/23/15 we participated in a regional disaster drill in Green Lake involving a tornado with fatalities and shelter needed. The staff continue to attend all emergency preparedness meetings.			
Goal 2: The Aging Unit will work in partnership with the Nutrition Advisory council to an emergency preparedness training and fire drill at each mealsite in the County by 12-31-14.	This goal will continue in 2014. No training or drills held in 2014, but will complete in 2015. This goal will continue in 2015. 2015 – We were not able to complete this goal in 2015.			
Goal 3: The Aging Unit will work with the Nutrition Advisory Council to add a section to our Meals on Wheels assessment document to identify what type of assistance each individual might need in and emergency/disaster and who they have in their lives that would help them or be the contact during an emergency, by 12-31-15.	This goal will continue in 2014. This goal will continue in 2015. 2015 – The Nutrition Assessment forms do have a section for Emergency contacts on them, and how and when to get a hold of the person.			X
Focus 4-E: Evidence-Based Prevention Programming				
Goal 1: Green Lake County Aging Unit will work in partnership with the Green Lake County Public Health Unit to have a RN trained as a certified training for the Healthy Eating for Successful Living among Older Adults prevention program by March of 2013. We will then hold at least one session of Healthy Eating for Successful Living among Older adults each year of the plan.	2013 – this goal was accomplished and two classes were held. 2014 – Two classes were held with 20 individuals attending. 2015 – Two classes were held with 12 people attending.	x	x	X
Goal 2: The Green Lake County Aging unit will work in cooperation with the Multi-County ADRC Prevention Coordinator to recruit at least two volunteers to become trainers for Living Well with Chronic Disease by December 31 2014. We will then hold at least one Living Well class in Green Lake County each year.	This goal will be worked on in 2014. No volunteers recruited in 2014, but working with new prevention coordinator to get this going in 2015. This goal will continue in 2015. 2015 – Recruitment attempts were made at all classes that were held, but we have had no			

	volunteers step forward to become leaders.			
Goal 3: The Green Lake County Aging Unit will work with the ADRC Prevention Coordinator to find and train leaders for the Stepping On Program and increase the number of classes held in Green Lake County to two per year by 12-31-15.	2013 – two stepping on classes were held 2014 – One class was held and another was scheduled but canceled due to lack of participants. 2015 – Two classes were scheduled, one was canceled due to lack of interest, 8 consumers attended the other. No volunteers have stepped forward to be trained as leaders.	X	X	X
Focus 4-F: Family Caregiver Support (NFCSP) Please answer the following where the aging unit is the direct services provider.				
Area 1: Provide information to caregivers about available services.				
Goal 1: The NFCSP coordinator will arrange for a representative of the ADRC to come to the NFCSP support to explain the roll of the ADRC and the services available in the County, and how to access these services, by 12-31-13.	The ADRC Director and a Resource Specialist did a presentation to the Caregivers Support Group in October 2013 and it was well received.	X		
Goal 2: To increase education and awareness of the program the Aging Unit staff will develop and present an informational training for all Human Service staff and Board members by 12-31-14.	This goal will continue in 2014. Scheduled for June 2015 for all AU and ADRC staff to present on all programs and NFCSP. This goal will continue in 2015. 2015 – This training was held on 9/10/15 and was well attended.			X
Goal 3: Green Lake County will work with local supportive home care agencies, hospitals, CBRF's, ADRC and other community partners to develop a Care Giver Coalition by 12-31-15. The individuals who will be invited to join our Caregiver Coalition are: The ADRC, the Children and Family Unit Supervisor, the Veteran's Service officer of Green Lake County, the Green Lake County Sherriff, The Green Lake County UW-Extension Office, Community Health Network, Dr. Tom Willett, Dr. James Williams, the Green Lake County Public Health Unit, the Green Lake County Commission on Aging, Kindred Hearts CBRF, Martha's Inc CBRF, Barrett House CBRF, American House RCAC, Patriot Place CBRF, Community Options Inc, Care Wisconsin CMO, and any other interested party/agency.	This goal will continue in 2014. 2014 – In June 2014 Green Lake County began a Dementia Caregiver Coalition. The Coalition meets quarterly. 2015 – Our Dementia Coalition continues to meet quarterly. In 2016 we will look to increase membership and attendance, and to provide educational opportunities to law enforcement and emergency response personnel.		x	X

Area 2: Provide assistance to caregivers in gaining access to the services.				
<p>Goal 1: The NFCSP coordinator will provide training to the I & A staff and Options Counselors on the program and how to make a referral, to increase the number of participants in the program, by 12-31-13.</p>	<p>Training ideas were developed in 2013 and training will take place in 2014. 2014 – Training was provided to the ADRC staff in May of 2014. Referrals into the program have increased to 6 in 2014 from 0. 2015 – Four individuals were referred to the program from the ADRC staff in 2015.</p>		X	X
<p>Goal 2: The Aging unit will work with the Kinship Care program to identify potential grandparents raising grandchildren. The NFCSP will then mail information to all potential program participants to make them aware of the program by 12-31-14.</p>	<p>2013 – One grandparent raising grandkids was identified, assessed and offered service. At this time they have not accepted any service. This goal will continue. This goal will continue in 2015. 2015 – One potential grandparent was identified in 2015, but was not interested in participating in the program.</p>	X		
<p>Goal 3: The NFCSP Coordinator will work with the APS worker to identify potential individuals who could benefit from the program and will then provide a direct mailing to the individuals with information on the NFCSP program by 12-31-15.</p>	<p>2013 – APS worker is making referrals to the NFCSP Coordinator, thus far no one has enrolled in the program. This goal will continue in 2014. 2014 – APS worker continue to make referrals into the program. No direct mailing was done. APS referred 2 people to NFCSP, both contacted by phone and declined services so no mailing done. 2015 – Three consumers were referred to the NFSCP program by the APS Worker. Although none of the three chose to enroll in NFCSP, all three did receive a mailing. All three also met one on one with the NFCSP Coordinator, and two of them chose to enroll in the home delivered meals program.</p>	X	X	X
Area 3: Provide individual counseling, organization of support groups, and training to caregivers to assist in making decisions and solving problems relating to their caregiver roles.				

<p>Goal 1: Each year of the plan the NFCSP coordinator will hold a monthly Caregiver Support Group with information provided on support and services available in Green Lake County. This goal will be for 2013, 2014 and 2015.</p>	<p>2013 – Monthly Support Group meetings are held. This goal will continue in 2014. 2014 – Monthly Support Groups were held. 2015 – Monthly support groups are held.</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>Goal 2: To partner with the Kinship Care program to develop a Support Group for Grandparent Raising Grandchildren by 12-31-14.</p>	<p>This goal will continue in 2014. This group was not started. One family was identified and contacted but refused service at this time. This goal will continue in 2015. 2015 – No families were identified to form this group. Kinship care program will continue to attempt to identify grandparents interested in the program.</p>			
<p>Goal 3: The Aging Unit will partner with the UW Extension office to train two leaders to provide Powerful Tools for Caregivers locally by 12-31-13. We will then provide at least one Powerful Tools for Caregivers presentation each year in 2013, 2014, and 2015.</p>	<p>2013 – A staff person was trained and left employment before a class was held. The trained leader in UW Extension has also left employment. We are currently assessing if we can find another agency to partner with and will then send a staff person to the training. 2014 – We were not able to find an agency to partner with us on this goal. Goal will continue in 2015. 2015 – UW extension is no longer interested in this program. We do not have enough staff time to devote two staff to the training and we have not been successful in finding another agency or community volunteers who wish to partner with us on providing this training.</p>			
<p>Area 4: Provide <i>respite</i> care to enable caregivers to be temporarily relieved from their caregiving responsibilities.</p>				
<p>Goal 1: Each individual attending the Caregiver Support groups or contacting the NFCSP Coordinator will be provided with a Resource Guide for Green Lake County identifying respite providers, and if appropriate and within the program guidelines pay for temporary respite services by 12-31-13.</p>	<p>2013 – Each individual inquiring about services was provided a resource guide and assessed for services. No participant has accepted respite services. 2014 – This goal has continued and we do have</p>	<p>X</p>	<p>X</p>	<p>X</p>

	<p>participants receiving respite services. 2015 – We have four individuals who received respite services in 2015.</p>			
<p>Goal 2: During all three years of the plan the NFCSP Coordinator will work with the ADRC staff to refer individuals who could benefit from Family Care to assist in funding services needed by their loved ones. This goal is for 2013, 2014 and 2015. The NFCSP coordinator will attend the ADRC monthly all staff meeting at least three times a year to discuss referral processes and any upcoming NFCSP events.</p>	<p>2013 – The ADRC is making referrals into the program. In 2014 we will be meeting with ADRC to look at ways to increase referrals and utilization of the service dollars. 2014 – ADRC staff continue to make referrals into the program and participation in the NFCSP program has increased. NFCSP attends meetings with ADRC staff. Joint meetings now held weekly with ADRC and AU staff. 2015 – The AU and ADRC staff continue to have weekly staffings at which we discuss in common clients, make referrals back and forth for services, and provide ongoing cross-training for staff.</p>	X	X	X
<p>Area 5: Provide supplemental services, on a limited basis, to complement the care provided by caregivers.</p>				
<p>Goal 1: This goal will be for all three years of the plan. To meet individually with each caregiver applying for the program, to provide an individual assessment and individual care plan to include any and all supplemental services needed to assist the individual in caring for their loved one, and what resources are available to assist in funding these services if needed. Supplemental Services can include temporary respite, transportation, nutrition counseling, home health care, etc. The NFCSP Coordinator will provide the individual assessment to each applicant by 12-31 of each year of the plan, 2013, 2014, and 2015. The NFCSP Coordinator will assist the caregiver in setting up supplemental services as needed.</p>	<p>2013 – The NFCSP Coordinator does meet individually with each individual referred to the program. At this time no one is requesting direct services, but they are attending the Support Group. The NFCSP Coordinator will meet with the ADRC staff in 2014 to look at ways to increase the number of referrals into the program and the number of families benefitting from services. 2014 – NFCSP Coordinator meets individually with each person referred for the NFCSP program. 2015 – NFCSP Coordinator continues to meet individually with each person referred for the program. An individual assessment is done and</p>	X	X	X

if eligible services are offered.

Part IV: Progress on the Aging Unit Plan for Serving Older People – National Family Caregiver Support Program

This section is not required for tribal aging units.

Caregiver Coordination: *To ensure coordination of caregiver services in the county, the aging unit shall convene or be a member of a local family-caregiver coalition or coordinating committee with other local providers who currently provide support services to family caregivers. The aging unit shall coordinate activities under this program with other community agencies and voluntary organizations providing services to caregivers.*

Does the aging unit facilitate a local caregiver coalition?

YES or NO

If No, please state which local agency facilitates this coalition: _____

If Yes, was information provided in the 3-year plan on the coalition's members?

YES or NO

If Yes, were goals stated for 2014 to coordinate caregiver services?

YES or NO

Please provide a brief update on coalition activities conducted in 2013:

Green Lake County does not currently have a caregiver coalition. We have begun steps to identify partners who would join us in starting a coalition and we are hoping to have our first meeting in the fall of 2014.

Please provide a brief update on coalition activities conducted in 2014:

In June 2014 Green Lake County held a Dementia Roundtable out of which a Dementia Caregiver Coalition was started. Goals have not yet been developed for the Coalition.

Please provide a brief update on coalition activities conducted in 2015: Our Dementia Coalition continues to meet quarterly. In 2015 we had training by a Psychologist on Dementia, a presentation on Music and Memory, and a presentation on Share the Care.

Part V: Progress on the Aging Unit Plan for Serving Older People – Local Priorities

It is expected that each aging unit will have at least one local focus area/goal for each year of the plan. Please provide information here on goals accomplished in the previous year.

Goal 1: To increase the Nutrition/Volunteer Coordinator position from half time to full time by 12-31-13.	The Position is now full time	X		
Goal 2: This goal is for all three years of the plan. To Partner with UW-Extension office to train two leaders to present Powerful Tools for Caregivers locally by 12-31-13. We will then provide the Powerful Tools training at least once a year each year in 2013, 2014 and 2015.	Two leaders were trained and both have left employment with the County. We are now evaluating who we could partner with to continue on with this goal. This goal will continue in 2015. 2015 – We are no longer pursuing this goal due to lack of commitment of individuals to become trainers.			
Goal 3: To work with local farmers to increase the awareness of the Senior Farmer’s Market Vouchers program and get increased vendor participation by 12-31-15.	2013 – Through the Green Lake County Wellness coalition, each area farmer’s market has been contacted about the Senior Farmer’s Market Voucher Program, and each market has been certified. The wellness coalition will now start working with local farmer’s to get them certified to accept the vouchers. 2014 – Efforts continue with the Wellness coalition to get increased vendor participation. 2015 – In 2015 we issued 103 sets of Farmers Market Vouchers to consumers in Green Lake County. We continue our efforts to educate local farmers and get them to participate as venders in the program.	X	X	X

Part VI: Significant Accomplishments or Issues Not Included in the Aging Unit Plan

(Unplanned accomplishments or issues that had a significant impact on the aging unit’s activities during the previous year. This is not meetings attended or actions that fit under plan goal objectives but may reflect noteworthy events or achievements.) This section is not required.

Significant unplanned accomplishments (briefly describe).

On June 26, 2014 Green Lake County held a Dementia Care Roundtable. Those in attendance included representatives from the State Department

on Aging, GWAAR, the Alzheimer's Association, County and local law enforcement agencies, Green Lake County Health and Human Services staff, two area hospitals, two area Nursing Homes, local CBRF's, the County Corporation Council, and a hospital legal counsel. The purpose of the meeting was to begin the discussion on making Green Lake County a Dementia Friendly Community and develop a Dementia Care Coalition. The meeting was well received and the Coalition now meets quarterly. Although specific goals have not yet been written the underlining theme of the coalition is Community Education.

Also in 2014 Green Lake County received a \$20,000.00 grant through Elderly Nutrition Revitalization Pilot Project. Our project was to start a breakfast café in the Sr. Center in the City of Berlin. The idea was for the Café to become self-supporting, and to produce revenue for the Senior Center. The café opened in August 2014. We serve an average of 7 people each day at the café. We have come to the conclusion that the café will not be self-supporting. But what we did find is that 54% of the individuals who ate at the café had never visited the Senior Center before. Through the café they came to know the services at the Senior Center and most of them now come to the Senior Center to participate in other programs there. The grant will continue through May 31, 2015.

2015 – The breakfast grant continued until 5-31-15. After evaluating the Breakfast Café idea it was decided to let the Café sunset. Many people came and enjoyed the program, but not enough to make it self-sustaining, and without the grant funds we were unable to continue. We did find that around 40% of the people who came to the Breakfast Café had never been to the Berlin Senior Center before, and they now continue to come to the Center for different activities.

Part VII: Coordination Between Titles III and VI

If the county includes part or all of a federally-recognized tribe, indicate how the county aging unit and the tribal aging unit have worked together in the previous year to coordinate and ensure the provision of services to tribal elders.

If the county does not include part or all of a federally-recognized tribe, please indicate: Not Applicable

The box below to be completed by GWAAR staff

Reviewed by (last name): Carrie Porter	Date Reviewed:
Aging Unit Self-Assessment Approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No (check one)
If No, provide brief comment for why this self-assessment is not approved.	
Is there a need for a Corrective Action Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please contact Older Americans Act Program Manager John Schnabl at john.schnabl@gwaar.org	
<i>Letters of approval will both be emailed to the director who is asked to please forward the chairperson's copy to them on behalf of GWAAR.</i>	
Aging Unit Self-Assessment Approval Letter sent to Director? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Aging Unit Self-Assessment Approval Letter sent to Committee Chairperson? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date approval letters sent:	