GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

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Post Date: 9/9/2021

The following documents are included in the packet for Commission on Aging Advisory Board held on Wednesday September 22, 2021

- September 22, 2021 Commission on Aging Advisory Board agenda
- July 28, 2021 Commission on Aging Advisory Board Draft Minutes
- 2022-2025 Aging Plan
- Aging Unit Report



GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

Office: 920-294-4070 FAX: 920-294-4139 Email: <u>glcdhhs@co.green-lake.wi.us</u>

Health &	Health & Human Services Commission on Aging Advisory Committee Meeting Notice		
	Date: September 22, 2021 Time: 10:30 AM		
Gre	en Lake County Government Center Room County Board Room #0902		
	571 County Road A Green Lake WI 54941		
	AGENDA		
Committee	1. Call to Order		
Members	2. Certification of Open Meeting Law		
	3. Pledge of Allegiance		
Robert Dolgner	4. Introductions		
Darlene Krentz	 5. Minutes: (7/28/2021) 6. Senior Picnic 		
Gloria Lichtfuss	7. 2022-2025 Aging Plan		
Parkis Waterbury	8. Senior Dining Sites Reopening		
Judith Street	9. Health & Human Services Board Report		
	10. Advocacy		
	11. Year-to-Date Program Information		
	12. Committee Discussion		
	• Future Meeting Date: November 17, 2021		
	Future Agenda items for action & discussion		
	13. Adjourn		
	Kindly arrange to be present, if unable to do so, please notify our office. Sincerely, Betty Bradley, Aging/Long Term Care Unit Manager		
	Due to the COVID-19 pandemic, this meeting will be conducted and available through in person attendance (6 ft. social distancing required) or audio/visual communication. Remote access can be obtained through the following link:		
	Join Zoom Meeting		
	https://us06web.zoom.us/j/81373523048?pwd=c3NBVGpjRjZQNGQ3dmFHT1BQZ0dXdz09		
	Meeting ID: 813 7352 3048 Passcode: 508847		
	One tap mobile		
	+13126266799,,81373523048# US (Chicago)		
	+19294362866,,81373523048# US (New York)		
	Dial by your location		
	+1 312 626 6799 US (Chicago)		
	+1 929 436 2866 US (New York)		
	+1 301 715 8592 US (Washington DC)		
	+1 346 248 7799 US (Houston)		
	+1 669 900 6833 US (San Jose) +1 253 215 8782 US (Tacoma)		
	Meeting ID: 813 7352 3048		
	Find your local number: <u>https://us06web.zoom.us/u/khVHivlOf</u>		

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

July 28, 2021

Present in Person: Judith Street, Darlene Krentz, Betty Bradley, Kayla Yonke, Harley Reabe, Gloria Lichtfuss, Jason Jerome and Parkis Waterbury.

Excused: Robert Dolgner

CALL TO ORDER:

The meeting was called to order at 10:28 a.m. by Bradley at the Green Lake County Government Center.

<u>CERTIFICATION OF OPEN MEETING LAW:</u> The requirements of the Open Meeting Law have been met.

PLEDGE OF ALLEGIANCE: The Pledge of Allegiance was recited.

Motion/Second (Street/Waterbury) to nominate Gloria Lichtfuss to run the meeting.

ACTION ON MINUTES: Motion/second (Waterbury/Lichtfuss) to approve the January 20, 2021 and the May 19, 2021 meeting minutes. All ayes. Motion carried.

<u>Senior Picnic</u>: Bradley Stated the Senior Picnic will be on September 10th at St Johns. Bradley reported there is less than 20 left to sell. Discussion Followed.

2022-2025 Aging Plan: Bradley stated the draft goals were submitted to the state for review. Bradley stated once goals are returned from the state there will be a public hearing. Final goals are to be submitted to the state by November 5th, 2021. Discussion Followed.

<u>Senior Dining Site Reopening</u>: Bradley reported Green Lake and Markesan Dining site reopened on July 2nd. Bradley reported the Berlin Site will reopen in August or early September. Discussion Followed.

Health and Human Services Board Report: Jerome reported the 2022 Budget Hearing for that will be held on August 9, 2021.

Advocacy: Bradley provided a resource on how to contact our state representatives. Discussion followed.

Year-to-Date Program Information: Bradley reviewed the nutrition program numbers. Bradley stated we are currently looking for 2 meal drivers. Bradley reported the food pantry numbers are up a little bit due to opening the food pantry up for one night a month. This has had a good response. Bradley stated APS, EBS and ADRC numbers have been steady through the first half of the year. Discussion Followed.

Committee Discussion: Bradley stated November 11,2021 from 12-1 there will be a speaker on Hoarding, all open to come.

Future Meeting Date: The Aging Plan Budget Hearing will be on September 22, 2021 at 10:00a.m. with the regular Aging Advisory Meeting to follow at 10:30a.m.

Future Agenda Items for Action and Discussion: Aging Plan and Budget, 85.21 Transportation grant, Dining Site BIDS and Senior Picnic outcome.

Bradley adjourned the meeting at 10:50.

County Aging Plan and Required Documents FY 2022–2024



Wisconsin Department of Health Services Division of Public Health Bureau of Aging and Disability Resources Office on Aging

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Directions

The County Aging Plan Template and Required Documents will assist aging units with aging plan development. As in the past, the template will require authors of the plan to adjust and format how the information appears within the plan, but all information should be organized as listed in the table of contents. Each section has a brief set of instructions, please remove this language from the template as content is added. The Goals for the Plan Period section will require authors to copy and paste additional goal templates for the required content areas.

A blank version of this template and the County Aging Plan Instructions 2022-2024 can be found on the <u>Aging SharePoint</u> site. Please refer to the Aging Plan Instructions for additional guidance related to each section of the plan.

Our shared goal is to make aging unit plans visually and physically accessible to the public. Approved aging unit plans for 2022-2024 will be posted on the <u>Aging SharePoint</u> site and available to the Aging and Disability Network.

Executive Summary

The Green Lake County Plan on Aging for 2022-2024 focuses on providing more opportunities for seniors in the community to have access to and input into the services provided in their community. Green Lake County will work with its Community Partners to provide educational opportunities for elderly citizens living in the County.

In gathering public input for the plan, the Green Lake County aging unit conducted several surveys. Surveys were handed out at the mass vacation clinics held by our Public Health Department. In addition the survey was sent to all individuals receiving home delivered meals in the County, all County employees and was put in our Senior Newsletter for public response. We held a focus group discussions with the Princeton Senior Center, our Aging Advisory Committee and with our Transportation Coordinating Committee. In addition all members of the Aging Advisory Committee were asked to take copies of our survey and interview friends, neighbors and family and return them to the office. Public input from all of these sessions was used to identify community needs and develop goals for the next three years.

The Aging Unit staff will continue to work closely with the ADRC staff, and other community partners, to provide opportunities for seniors to have access to community leaders and legislators, to give input on issues that affect them. We will also work on providing educational opportunities for seniors in Green Lake County. We will work to provide more opportunities for community activities for our seniors and transportation for those who need it in order to participate.

The senior Nutrition Program is one of our largest programs for seniors. During the next three years, the Aging Unit will work to increase participation in the Senior Dining Program, and to provide opportunities for those participating in the program to have more choice in the meals they receive and where and how they receive them. We will also work with our community partners to provide more nutritional education to seniors participating in the program.

The Aging Unit will work in Partnership with the ADRC Health Promotions Coordinator and the Green Lake County Public Health Office to provide additional opportunities for seniors to participate in high-level health promotions classes, and educational opportunities, which can enhance quality of life for those who participate.

The Aging Unit will work through our Family Caregivers program to provide more access for minorities to participate in the program. We will work with Community Partners to identify the needs of the Hispanic/Latinx community as it pertains to caregiving and implement strategies to ensure those who need and wish to participate are included.

Locally we hope to provide more education and training to our department staff and to local Law Enforcement and EMS agencies, to enhance our skills to work with the aging

population, working with different ethnic groups, and how to advocate for their consumers. We will also provide training to seniors in the community to help them develop and use their advocacy skills.

The Green Lake County Aging Unit is a small department with a limited budget, so it is vital for us to work on maintaining and strengthening our collaborative efforts with community partners. We hope to maintain our current level of services; however, this is dependent on maintaining current levels of funding.

Context

Green Lake County is located in Central Wisconsin, southwest of the Fox River Valley. It is primarily a retirement and vacation area, known for its lakes and beautiful golf courses.

The population of Green Lake County is rural, with four main cities and three smaller towns. The total population, based on July 2019 population estimates is 18,913. The percentage of persons over the age of 60 is 30.9%, 6.5% above the statewide average of 24.4%. The population over age 80 is 5.5%, again above the statewide average of 4.2%. 26.9 % of those over age 65 live alone in their own home. Population projections done by the Bureau of Aging and Disability resources project that the Green Lake County population over the age of 65 will be over 31.4% of the total county population by 2040.

The median income for the 65 and older age group is \$40,317. Approximately 8.2% of those over 65 live below the poverty level. 18.6% of those over the age of 65 are employed.

The population growth since the 1990 Census has been slow, overall 2.4%. However, the change in the over 85 age group was 21.9%. It is anticipated that there will be continued growth, due to the aging Baby Boomer generation, that is now in their 60's.

Green Lake County's health outcomes ranking is 57th out of 72. Green Lake County has higher than state rates of adults with hypertension, coronary heart disease, heart attacks, obesity, asthma and arthritis. The higher than average occurrence of these conditions is consistent with the higher than average aging population of Green Lake County.

The Green Lake County Area Health & Wellness Coalition has identified these three areas as the top three health issues for Green Lake County residents: 1) Mental Health; 2) Alcohol, Tobacco and other Drug use; and 3) Chronic Disease Prevention and Management. All three of these areas affect the aging population of Green Lake County. The Green Lake County Aging Director is a member of the Green Lake County Health and Wellness Coalition.

As with every County in 2019 the most pressing health concern in Green Lake County was the COVID-19 pandemic. The need to self-isolate and socially distance did cause many seniors to have more depression and anxiety. Nutrition dining sites had to be closed which took away social opportunities. Now that many of the seniors are vaccinated they are looking forward to getting back out and having more socialization opportunities. Seniors in Green Lake County identify having good health care and good health, and being physically and mentally fit, as the most important issues in their lives. After living through the pandemic health care and good health outcomes have become even more important to them. Many identify transportation, access to health care and nutrition, social isolation as important issues in their communities. Affordable housing and adequate income are also important issues to the Senior Community in Green Lake County.

As the population of Green Lake County ages the challenge will be to provide services to a growing aging population with increased service needs and insufficient funds to cover those needs. We will be challenged to find more community partners to fill those gaps in service.

We are a Tri-County ADRC along with Adams and Waushara Counties. In Green Lake County, the Aging programs and ADRC are in the Aging/ADRC unit of the Human Services Department. We feel having all services/funding for aging and ADRC run out of the same unit allows us to maximize service delivery and funding for the residents of Green Lake County. The Aging and ADRC staff work together to provide service to the residents of Green Lake County.

Community Involvement in the Development of the Aging Plan

The planning process began at the November 2020 meeting of the Aging Advisory Committee. The Aging Director explained that the Aging plan for years 2022 – 2024, the required areas of focus and possible ways we will look at gathering input due to the pandemic. The idea of a survey was discussed.

The Survey was sent out to all consumers receiving home delivered meals. The survey was handed out to seniors attending vaccination clinics. It was also emailed to every County employee. A copy of the survey was printed in our Senior Newsletter with instructions on how to submit your answers. At the March meeting of the Aging Advisory Committee the survey was discussed and Committee members gave their input. Each Member also took a copy of the survey and spoke to family, friends and neighbors about the plan. Once they had input from family, friends and neighbors, they submitted that data to the Aging Director. The Aging Plan was also discussed at the April meeting of the Transportation Coordination Committee to get their input and ideas for the plan. We also conducted a focus group meeting with members of the Princeton Senior Center in June to solicit input on the plan.

At the July 2021 meeting of the Commission on Aging results of the surveys that were in were discussed. A very rough draft of the plan was discussed. Proposed goals in the focus areas were discussed. The Committee set the next meeting date as the date of the public hearing.

Public Hearing Requirements

Please provide a brief summary of the hearings and input from community members.

Use the <u>Public Hearing Report</u> to list the dates, times, locations, and numbers of people in attendance at public hearings. The report should include a summary of public comments and explain modifications made to the draft version of the plan as a result of input collected during the public hearing. Attach <u>Public Hearing Report</u>(s) to the appendices of the aging unit plan.

Goals for the Plan Period

This section describes both the goals and supporting measurable activities the aging unit will do during the planning period 2022–2024. Aging units should clearly state each goal, list specific strategies, and define how the goal will be measured.

The <u>Goals Development Worksheet</u> is an effective tool to strategize goals. Page one is a list of thought-provoking questions to help aging units develop well-thought-out goals. Aging units should retain page one of the worksheet for ongoing planning; it is not required to appear within the plan. Page two of the Goal Development Worksheet is a Goal Template. Aging units are encouraged to organize goals using the template and insert individual templates for each focus area in the body of the plan and not as attachments. You will need to copy and paste additional Goal Template sheets for the each of your goals.

Focus area: Title II-B Supportive Services/Person Centered Services	Due Date
Goal statement: To Provide increased opportunities for older adults to participate in social activities within the County.	8-1-2023
Plan for measuring overall goal success – How will you know that you have	

achieved the results you want? Use data. Increased number of participants attending events. Number of trips provided. Satisfaction surveys.

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Reach out to Senior Centers to find out what events/activities older adults are interested in attending.		
Action step: Step up meetings at Senior Centers to discuss the current activities offered in their communities.	Meetings at Sr. Centers completed	1/1/22
Action step: Produce survey to determine which events are of interest to the majority of people.	Surveys completed.	4/30/22
Action step: Create a calendar of events available to older adults.	Calendars completed and disbursed by	5/15/22
Strategy 2: Partner with Fox River Industries to create MOU to provide transportation to Community events for Seniors.		
Action step: Set up a meeting with Fox River Industries to discuss setting up transportation to community events.	Meeting completed.	3/30/22
Action step: Develop a schedule of events that transportation could be provided to.	Schedule completed	5/15/22
Action step:		
Strategy 3: Pilot the program through the Princeton Senior Center.		
Action step: Provide a calendar of events with transportation available to older adults and begin trips.	Start providing trips	6/1/22
Action step: Evaluate success of the pilot.	Satisfaction Surveys	8/31/22

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Action step: Implement the program County wide.	Develop a County wide calendar of events with transportation available	5/15/23
Annual progress notes		

Focus area: Title III-C Nutrition Program/Person Centered Services	Due Date
Goal statement: Ensure that Nutrition Program Participants have choice based meal options.	7/2024
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Pre and post surveys. Increase in menu choices. Menu comparisons. Increase in participant's exercising choice.	

Encoific attrategies and stone to most	Maggurg (How will you know	Due Date
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have	Due Dale
	been completed?)	
Strategy 1: Develop a choice based menu		
Action step: Survey current participants to get input into menu choices.	Number of surveys filled out	6/2022
Action step: Meet with caterer to develop choice based menus	Meeting occurs	9/2022
Action step: Pilot choice menu at one meal site	Pilot is completed	3/2023
Strategy 2: Increase menu choices for		
home Delivered Meals participants by		
developing a frozen meal option		
Action step: Work with caterer to develop frozen meals options.	Create frozen meal menu	6/2022
Action step: Develop a procedure for ordering and delivering frozen meals.	Procedure created	9/2022
Action step: Implement frozen meal option for Homebound Meal participants	Program up and running	1/2023
Strategy 3: Implement the Stepping Up your Nutrition Program for Nutrition Program Participants		

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Action step: Identify staff and volunteers to become trained leaders.	Trained staff and volunteers	6/2022
Action step: Develop a schedule of classes to be held at dining sites	Schedule completed	9/2022
Action step: Classes up and running at all three dining sites	Classes help at least quarterly at each site	01/2023 2024
Annual progress notes		

Focus area: III-D Health Promotions	Due Date
Goal statement: Enhance accessible, affordable and safe exercise opportunities throughout Adams, Green Lake, and Waushara to improve quality of life and chronic disease outcomes, and help reduce number of falls.	12/2024
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Program participation in EBP program increases by 25% over a 3-year period, the number of workshops canceled be low attendance is no more than 1 per year per county, and the number of call EMS does not increase.	rams because of

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: : Increase availability, awareness, and ultimately participation in Evidence Based Programs (EBP), including Stand Up, Move More, StrongBodies, PALS, Tai Chi, Walk with Ease, and Stepping On		
Action step: Strengthen partnerships with senior centers, libraries, health clinics (PT departments), and other related agencies to recruit facilitators, increase referrals into the programs, expanding facility options to host programs.	15% of class participants come from partner referrals.	12/2024
Action step: Advocate for and partner with UW-Extension in Waushara County and Public Health in Green Lake County to	2 StrongBodies workshops are completed in each county.	12/2024

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
expand and enhance Strong Bodies into Waushara and Green Lake, and partner in promoting the Adams County Strong Bodies program.		
Action step: Implement ongoing efforts to recruit additional volunteer/professional leaders for PALS, Stand Up, Move More, and Tai-Chi.	3 new leaders are recruited and trained.	12/2024
Action step: Expand and enhance availability of evidence based programming by offering virtual, hybrid, telephonic and/or in-person classes during the evening and/or on weekends.	At least one evening or weekend class option is available in each county annually. Overall EBP participation increases by 10%.	12/2024
Action step: Create and implement a formal outreach and awareness plan to increase program participation.	No more than 1 workshop class canceled each year because of low attendance.	12/2024
Strategy 2: Develop an exercise and physical activity program available for use at the dining centers in all 3 counties.		
Action step: Assess space requirements, equipment needs, and liability concerns related to program implementation.	Implementation plans developed for participating locations.	12/2022
Action step: Use current evidence-based health promotion exercise workshop materials to formalize structured program options suitable for multiple abilities.	Program developed with exercise modifications for varying ability levels.	12/2022
Action step: Recruit volunteers through press releases, senior newsletters and other related venues, and provide thorough training.	A minimum of 3 volunteers are recruited and trained for each county.	12/2023
Action step: Implement exercise program schedule, evaluate effectiveness, survey participant satisfaction, and make necessary program adjustments.	Surveys indicate satisfaction with the program.	12/2024
Strategy 3: Promote and advocate for adequate safe indoor and outdoor walking options.		
Action step: Utilize the ADRC CHANGE Project process to develop a walking path	Directory is complete and distributed.	12/2023

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
directory for each county available in both English and Spanish.		
Action step: Identify committees or groups currently working toward health and wellness/safe walking options in each county, and, as necessary, attend these or related meetings to advocate for paved paths and trails throughout the counties	Attendance at a minimum of 3 meeting events.	12/2024
Action step:		
Annual progress notes		

Focus area: III-E Caregivers/ Racial Equity	Due Date
Goal statement: To provide equitable access to Caregiver Programs for Hispanic/Latinx Caregivers.	2024
Plan for measuring overall goal success – How will you know that you hav achieved the results you want? Use data. Pre and Post participation levels n Satisfaction Surveys.	

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Meet with Community Partners to determine best strategy to implement to meet the needs of the Hispanic/Latinx community.		
Action step: Identify Community businesses, churches, agencies that currently work with, employ or provide services to the Hispanic/Latinx community.	Create a database	6/2022
Action step: Have a roundtable discussion with identified partners to determine strategies to be implemented.	Roundtable is held, list of strategies created	12/2022

Specific strategies and steps to meet your goal:	es and steps to meet Measure (How will you know the strategies and steps have been completed?)	
Action step:		
Strategy 2: Work with partners to create materials focused on the Hispanic/Latinx communities.		
Action step: Identify and train bi-lingual volunteers to assist with Caregiver program.	List of trained volunteers	05/2023
Action step: Identify or create materials focused on Hispanic/Latinx population, including translated materials.	Materials designed and translated for use.	09/2023
Action step:		
Strategy 3: Implement strategies and provide culturally appropriate services.		
Action step: Identify specific roles of partners to promote the Caregiver programs within the Hispanic/Latinx community.	Roles are defined and agreed upon by all partners	02/2024
Action step: Create satisfaction survey to be used with new and existing participants.	Survey completed	06/2024
Action step:		
Annual progress notes	1	1

Focus area: Enhance Ongoing Community Engagement	Due Date
Goal statement: Ensure that Community Engagement efforts are representative of Community Members.	10/2024
Plan for measuring overall goal success – How will you know that you ha achieved the results you want? Use data. Compare participant data to previo	

Specific strategies and steps to meet your goal:	d steps to meetMeasure (How will you know the strategies and steps have been completed?)Due Dat	
Strategy 1: Work with our existing		
Aging Network to increase opportunities for input into the Aging		
Programs/Plan.		
Action step: Develop a committee of	Committee is established	08/2022
volunteers to organize and implement a		
Community Senior Fair.		
Action step: A Senior Fair at which older	Fair is held	05/2023
adults can find out about existing		
community partners and programs, and		
give input into programs and plans		
through an exit survey is held.		
Action step:		
Strategy 2: Develop a schedule of Town Hall meetings to be held on a regular basis at which older adults can gather to give input into programs and plans.		
Action step: Identify community	List of locations/partners in	6/2022
locations/partners to host regular Town Hall meetings.	developed	
Action step: Schedule 3 Town Hall	Town Hall meeting are	2022
meetings each year at locations where	scheduled	2023
older adults gather to give input about		2024
community programs		
Action step:		
Strategy 3:		
Action step:		
Action step:		
Action step:		
Annual progress notes		

Focus area: Increase knowledge and skills related to advocacy	
Goal statement: Provide older adults with annual trainings and/or workshops with opportunity for them to increase and use their advocacy skills. Bay May 2024 we have a group of three trained older	12/31/22 6/1/24
adults attend Aging Advocacy Day in Madison. Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Number of trained older adults willing to be	

achieved the results you want? Use data. Number of trained older adults willing to be members of current committees will increase by 3. Three older adults will attending Aging Advocacy Day in 2024.

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Offer training on the legislative process at least annually.		
Action step: Identify and secure qualified trainers and schedule annual workshops between 1-1-22 and 12-31-24.	Training date calendar	2022 2023 2024
Action step: Conduct trainings in an accessible location.	Trainings held	2022 2023 2024
Action step: Conduct pre and post surveys to measure participants' knowledge.	Participants evaluation will demonstrate an increase in knowledge of the legislative process	2022 2023 2024
Strategy 2: Identify opportunities for newly trained older adults to use their advocacy skills.		
Action step: Work with local Senior Centers to provide Town Hall meetings with our local legislators.	Meetings are scheduled and advertised.	2022 2023 2024
Action step: Work with local partners to provide transportation for older adults to attend Town hall meetings	Transportation provided.	2022 2023 2024
Action step: Include advocacy information and resources in Aging Unit Newsletter	Aging Unit Newsletter will contain and advocacy section	2022 2023 2024
Strategy 3: Provide organizational support for Advocates interested in attending Wisconsin's Aging Advocacy Day.		
Action step: Identify at least three trained older adults interested in attending Wisconsin's Aging Advocacy day.	Three trained older adults volunteer to go to Aging Advocacy day.	1/31/24

Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Action step: Work with community partners to secure transportation for trained older adults to attend Aging Advocacy Day Action step:	Transportation provided	6/1/24
Annual progress notes		

Coordination Between Title III and Title VI

In Green Lake County 0.4% of the population over the age of 65 is Native American. Should someone who is Native American seek services through the Aging and Disability Resource Center, or the Aging Programs in Green Lake County, they would be provided with information on any and all resources available to them. The ADRC has contact information for all Tribes inn Wisconsin. Should a tribal member wish to contact a tribal authority the ADRC and Aging staff will assist with coordinating the contact. All Native Americans contacting the ADRC/Aging Unit requesting services will be assessed for eligibility and offered any and all services they are eligible for.

Organization, Structure and Leadership of the Aging Unit

This section of the plan describes the organizational structure and leadership of the aging unit. It includes written text and fillable templates to be used in the body of the plan and additional templates to attach in appendices.

Please refer to the County Aging Plan Instructions for additional guidance related to the organization, structure and leadership section of the plan.

Primary Contact to Respond to Questions About the Aging Plan

Provide contact information for the primary person who will respond to questions and comments about the aging unit and three-year plan. Aging units may use their own chart but a template is provided below. Include primary contact information in the body of the aging plan.

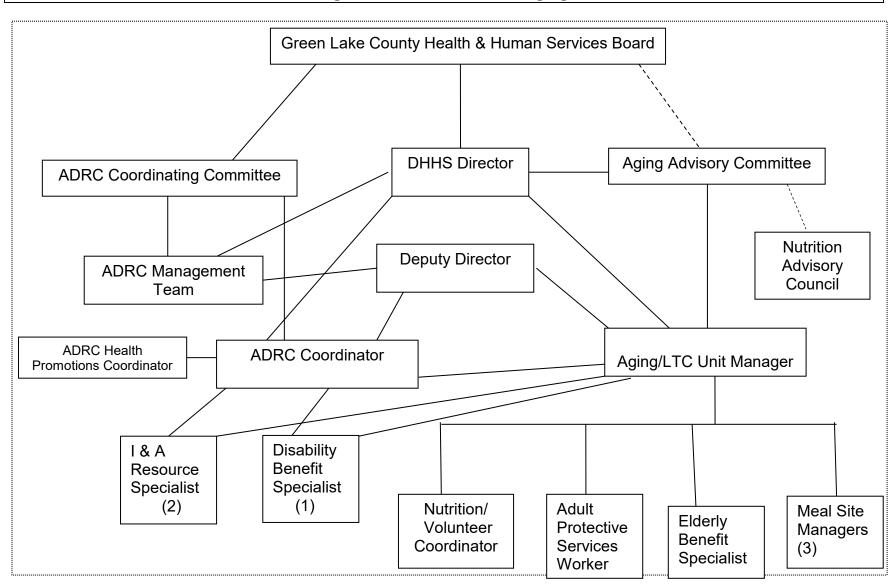
Primary Contact to Respond to Questions About the Aging Plan Template

Name:Betty Bradley
Title:Aging/ADRC Unit Manager
County:Green Lake
Organizational Name: _Green Lake County HHSD
Address: _571 County Road A
City: _Green Lake State:WI Zip Code: _54941
Email Address: bbradley@co.green-lake.wi.us Phone # 920-294-4070

Organizational Chart of the Aging Unit

Provide an organizational chart, which clearly depicts the place of the aging unit, the policy-making body, and (where applicable) the advisory committee, in relation to the county government. The chart(s) should appear in the body of the aging plan. View the <u>Aging Unit Organizational Chart Template</u> as an example.

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



County Aging Plan Template and Required Documents 2022–2024

Staff of the Aging Unit

Provide the required information on the people employed as the aging unit director, nutrition director, program nutritionist (including under contract), lead information and assistance specialist, benefit specialist, health promotion coordinator, family caregiver coordinator, transportation coordinator, and other aging unit staff (as applicable). Use the template provided below and include in the body of the aging plan.

Staff of the Aging Unit Template

List the people employed by the aging unit. Include additional rows as needed.

Name: Betty Bradley Job Title: Aging/ADRC Unit Manager <u>Telephone Number/email Address: 920-294-4070; bbradley@co.green-lake.wi.us</u> Brief Description of Duties: Administers all Title III Aging Program services, including budgeting, reporting, and contracting for services. Supervises Aging Unit Staff,, and all elderly and disability programs, including Elder Abuse and Adult Protective Services, 85.21 transportation(contracted services), and the Aging and Disability Resource Center staff.

Name: : Irene Kutz

Job Title: : Elder Benefit Specialist

Telephone Number/email Address: 920-294-4070; ikutz@co.green-lake.wi.us

Brief Description of Duties: Provide Elder Benefit Specialist services to seniors age 60+. Does public education and assists with Senior Care and Medicare Part D applications. Assist with outreach. Provides I&A services and serves as back up for the Elderly Nutrition Program.

Name: Kathy Mulhern

Job Title: Nutrition/Volunteer Coordinator

Telephone Number/email Address: 920-294-4070; kmulkhern@co.green-lake.wi.us Brief Description of Duties: Coordinates the Green Lake County Elder Nutrition Program

and volunteer program. Assembles and distributes the Sr. Newsletter.

Name: Kristen Dorsch

Job Title: Adult Protective Services/Elder Abuse Worker Telephone Number/email Address/email Address: 920-294-4070; kdorsch@co.green-lake.wi.us

Brief Description of Duties: Provides Elder Abuse and APS investigations, reports summary information on the WITS system. Assists with guardianships, and WATTS reviews. Coordinates the AFCSP and NFCSP programs. Coordinates the I-Team. Co-facilitates the Dementia Coalition meetings.

Name: Jennifer Dille Job Title: ADRC Director

Telephone Number/email Address: 920-294-4070; jdille@co.green-lake.wi.us

Brief Description of Duties: Brief Description of Duties: Coordinates the Adams, Green Lake, Waushara County Consortium ADRC. Assures consistent service delivery among the three sites. Supervises the day-to-day activities of the I&A staff, DBS staff, and the Health Promotion Coordinator.

Name: Matthew Wecker

Job Title: Disability Benefit Specialist

Telephone Number/email Address: 920-294-4070; mwecker@co.green-lake.wi.us

Brief Description of Duties: Provides advocacy and assistance to persons age 18 to 59, in accessing and applying for disability benefits and Medicare Part D.

Name: Vanessa Schultz

Job Title: Resource Specialist

Telephone Number/email Address: 1-877-883-5378; vschultz@co.green-lake.wi.us Brief Description of Duties: Provides I&A services to persons age 18 and over who contact the ADRC. Provides Options and Enrollment Counseling. Assists with Medicaid applications. Provides Short Term case Management. Is lead Screener for the Adams, Green Lake, and Waushara county ADRC.

Name: Lisa Zimmerman

Job Title: Resource Specialist

Telephone Number/email Address: 1-877-883-5378; lzimmerman@co.green-lake.wi.us

Brief Description of Duties: Provides I&A services to persons age 18 and over who contact the ADRC. Provides Options and Enrollment Counseling. Assists with Medicaid applications. Provides short-term Case management.

Aging Unit Coordination with ADRCs

Green Lake County is served by the ADRC of Adams, Green Lake, and Waushara County. The ADRC site in Green Lake County is co-located within the Aging Unit. Aging and ADRC staff work side by side. The ADRC Director is employed by Green Lake County, but works in all three Counties in the consortium. Locally the ADRC Director and staff fall under the direction of the Aging Director. Aging and ADRC staff work closely with each other, referring consumers to workers in either area. Often ADRC and Aging staff are working together on a case to facilitate the best outcome for the consumer. Aging and ADRC staff hold joint weekly staff meetings to discuss issues and develop care plans when needed. The ADRC employs a full-time Health Promotions Coordinator out of the Wautoma office, whose position is funded by ADRC and Aging and ADRC programs. The Economic Support Unit is located in the hall next to the Aging Unit. Both ADRC and Aging staff work closely with ESU staff to ensure the best outcome for the consumer

Statutory Requirements for the Structure of the Aging Unit

<u>Chapter 46.82 of the Wisconsin Statutes</u> sets certain legal requirements for aging units. Consider if the county or tribe is in compliance with the law. If the aging unit is part of an ADRC the requirements of <u>46.82</u> still apply.

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

Role of the Policy-Making Body

The policy-making body, also called the commission on aging, must approve the aging unit plan. Evidence of review and approval of the draft and final version of the aging unit plan must be included as part of the plan. Attach the evidence of this required involvement as an appendix to the aging plan.

Membership of the Policy-Making Body

The commission is the policy making entity for aging services (46.82 (4) (a) (1)) and an aging advisory committee is not the commission. List the membership of the aging unit's policy-making body using the template provided below and include in the body of the aging plan. There are term limits for the membership of the policy-making body.

Membership of the Policy-Making Body Template

Official Name of the County Aging Unit's Policy-Making Body: Green Lake	
County Health and Human Services Board	

Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Joe Gonyo	Y	Y	2004
Harley Reabe	Y	Y	2012
Richard Trochinski	Y	Y	2010
Charlie Wielgosh	Y	Y	2018
Brian Floeter	Ν	Y	2015
Joy Waterbury	Y	Ν	2018
Christine Schapfel	Y	Ν	2021
Nancy Hoffman	N	Ν	2016
Joanne Guden	Y	Ν	2021

Role of the Advisory Committee

Where an aging unit has both an advisory committee (sometimes referred to as the advisory council) and a policy-making body, a key role of the advisory committee is to advise the policy-making body in the development of the plan and to advocate for older adults. Evidence of this involvement should be listed as an attachment in the appendices of the aging unit plan.

Membership of the Advisory Committee

An aging advisory committee is required if the commission (policy-making body) does not follow the Elders Act requirements for elected officials, older adults, and terms, or if the commission is a committee of the county board (46.82 (4) (b) (1)). If the aging unit has an advisory committee, list the membership of the advisory committee using the template provided below and include in the body of the aging plan. 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. There are no term limit requirements on advisory committees.

Membership of the Advisory Committee Template

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: Robert Dolgner	Ν	Y	May 2020
Gloria Lichtfuss	Y	Y	May 2019
Parkis Waterbury	Y	Y	May 2020
Darlene Krentz	Y	Y	May 2018
Judy Street	Y	Y	June 2021

Official Name of the County Aging Unit's Advisory Committee: Green Lake County Aging Advisory Committee

Budget Summary

The aging unit is required to submit an annual budget to the AAA using a budget worksheet approved by BADR. Final budgets are to be submitted with the aging plan on November 5th, 2021. Due dates for annual aging unit budgets for CY 2023 and 2024 will be determined in cooperation with the AAAs and BADR and communicated with aging units when the dates are set.

Budget summary information should be inserted into the document. It is also acceptable to provide a hyperlink to budget summary information. Aging units may choose to use pie charts or graphs to highlight how funds are spent for services and supports for older adults and caregivers.

In addition, the budget summary page must be clearly posted on a public webpage for review following final approval by the aging unit governing body.

Verification of Intent

The purpose of the Verification of Intent is to show that county government has approved the plan. It further signifies the commitment of county government to carry out the plan. Copies of approval documents must be available in the offices of the aging unit.

Use the template provided below and include in the body of the aging plan.

Verification of Intent Template

The person(s) authorized to sign the final plan on behalf of the commission on aging and the county board must sign and indicate their title. This approval must occur before the final plan is submitted to the AAA for approval.

In the case of multi-county aging units, the verification page must be signed by the representatives, board chairpersons, and commission on aging chairpersons, of all participating counties.

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

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

Signature and Title of the Authorized Court	nty Board Representative	Date
5		

Assurances of Compliance with Federal and State Laws and Regulations

A signed copy of this statement must accompany the plan. The plan must be signed by the person with the designated authority to enter into a legally binding contract. Most often this is the county board chairperson. The assurances agreed to by this signature page must accompany the plan when submitted to the AAA and BADR.

The assurances need not be included with copies of the plan distributed to the public.

Use the template provided below and include in the body of the aging plan.

Compliance with Federal and State Laws and Regulations for 2022-2024

On behalf of the county, we certify

Green Lake County Aging/ADRC 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 2022-2024. We assure that the activities identified in this plan will be carried out to the best of the ability of the county in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2022-2024.

Signature and	Title of the Cha	irperson of the	Commission on A	vging Date	
5				5 5	

Signature and Title of the Authorized County Board Representative Date

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 Resource's 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 Resource's 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 Resource's 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 Resource's designated Area Agency on Aging.
- 3. Preference for Older People with Greatest Social and Economic Need

The applicant must assure that all service providers follow priorities set by the Bureau of Aging and Disability Resources Resource's 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 confidentially of the individual's contributions.
- The applicant must assure that each service provider establishes appropriate procedures to safeguard and account for all contributions.
- The applicant must assure that each service provider considers and reports the contributions made by older people as program income. All program income must be used to expand the size or scope of the funded program that generated the income. Nutrition service providers must use all contributions to expand the nutrition services. Program income must be spent within the contract period that it is generated.
- 6. Confidentiality
 - The applicant shall ensure that no information about, or obtained from an individual and in possession of an agency providing services to such individual under the county/tribal or area plan, shall be disclosed in a form identifiable with the individual, unless the individual provides his/her written informed consent to such disclosure.
 - Lists of older adults compiled in establishing and maintaining information and referral sources shall be used solely for the purpose of providing social services and only with the informed consent of each person on the list.
 - In order that the privacy of each participant in aging programs is in no way abridged, the confidentiality of all participant data gathered and maintained by the State Agency, the Area Agency, the county or tribal aging agency, and any other agency, organization, or individual providing services under the State, area, county, or tribal plan, shall be safeguarded by specific policies.
 - Each participant from whom personal information is obtained shall be made aware of his or her rights to:

(a) Have full access to any information about one's self which is being kept on file;

(b) Be informed about the uses made of the information about him or her, including the identity of all persons and agencies involved and any known consequences for providing such data; and,

(c) Be able to contest the accuracy, completeness, pertinence, and necessity of information being retained about one's self and be assured that such information, when incorrect, will be corrected or amended on request.

• All information gathered and maintained on participants under the area, county or tribal plan shall be accurate, complete, and timely and shall be legitimately

necessary for determining an individual's need and/or eligibility for services and other benefits.

- No information about, or obtained from, an individual participant shall be disclosed in any form identifiable with the individual to any person outside the agency or program involved without the informed consent of the participant or his/her legal representative, except:
 - (a) By court order; or,
 - (b) When securing client-requested services, benefits, or rights.
- The lists of older persons receiving services under any programs funded through the State Agency shall be used solely for the purpose of providing said services, and can only be released with the informed consent of each individual on the list.
- All paid and volunteer staff members providing services or conducting other activities under the area plan shall be informed of and agree to:

 (a) Their responsibility to maintain the confidentiality of any client-related information learned through the execution of their duties. Such information shall not be discussed except in a professional setting as required for the delivery of service or the conduct of other essential activities under the area plan; and,
 (b) All policies and procedures adopted by the State and Area Agency to safeguard confidentiality of participant information, including those delineated in these rules.
- Appropriate precautions shall be taken to protect the safety of all files, microfiche, computer tapes and records in any location which contain sensitive information on individuals receiving services under the State or area plan. This includes but is not limited to assuring registration forms containing personal information are stored in a secure, locked drawer when not in use.
- 7. Records and Reports
 - The applicant shall keep records and make reports in such form and requiring such information as may be required by the Bureau of Aging and Disability Resources and in accordance with guidelines issued solely by the Bureau of Aging and Disability Resources and the Administration on Aging.
 - The applicant shall maintain accounts and documents which will enable an accurate review to be made at any time of the status of all funds which it has been granted by the Bureau of Aging and Disability Resources through its designated Area Agency on Aging. This includes both the disposition of all monies received and the nature of all charges claimed against such funds.
- 8. Licensure and Standards Requirements
 - The applicant shall assure that where state or local public jurisdiction requires licensure for the provision of services, agencies providing services under the county/tribal or area plan shall be licensed or shall meet the requirements for licensure.

- The applicant is cognizant of and must agree to operate the program fully in conformance with all applicable state and local standards, including the fire, health, safety and sanitation standards, prescribed in law or regulation.
- 9. Civil Rights
 - The applicant shall comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with that act, no person shall on the basis of race, color, or national origin, be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any program or activity under this plan.
 - All grants, sub-grants, contracts or other agents receiving funds under this plan are subject to compliance with the regulation stated in 9 above.
 - The applicant shall develop and continue to maintain written procedures which specify how the agency will conduct the activities under its plan to assure compliance with Title VI of the Civil Rights Act.
 - The applicant shall comply with Title VI of the Civil Rights Act (42 USC 2000d) prohibiting employment discrimination where (1) the primary purpose of a grant is to provide employment or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the service funded by the grant.
 - All recipients of funds through the county/tribal or area plan shall operate each program or activity so that, when viewed in its entirety, the program or activity is accessible to and usable by handicapped adults as required in the Architectural Barriers Act of 1968.
- 10. Uniform Relocation Assistance and Real Property Acquisition Act of 1970

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

11. Political Activity of Employees

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

12. Fair Labor Standards Act

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

13. Private Gain

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

14. Assessment and Examination of Records

- The applicant shall give the Federal agencies, State agencies and the Bureau of Aging and Disability Resources Resource's 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

Aging Units, through binding agreement/contract with an Area Agency on Aging must support and comply with following requirements under the Older Americans Act (Public Law 89-73) [As Amended Through P.L. 116-131, Enacted March 25, 2020] Reference: 45 CFR Part 1321 – Grants to State and Community Programs on Aging.

Sec. 306. (a)

(1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;

(2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the Area Agency on Aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(3)(A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and (B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated; (4)(A)(i)(I) provide assurances that the Area Agency on Aging will—

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) provide assurances that the Area Agency on Aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the Area Agency on Aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each Area Agency on Aging shall--

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the Area Agency on Aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each Area Agency on Aging shall provide assurances that the Area Agency on Aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to lowincome minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to lowincome minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and (VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and

(4)(C) Each area agency on agency shall provide assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each Area Agency on Aging shall provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:

in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the Area Agency on Aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(6)(G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;

(6)(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and

(9)(A) the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title; and (Ombudsman programs and services are provided by the Board on Aging and Long Term Care)

(10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;

(11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the Area Agency on Aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title; (B) an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13) provide assurances that the Area Agency on Aging will

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(B) disclose to the Assistant Secretary and the State agency-

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the Area Agency on Aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used-

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;

(17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery;

Wisconsin Elders Act

If the applicant is an aging unit, 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
- (4) services for older individuals of the county.
- (5) A private corporation that is organized under ch. 181 and
- (6) that is a nonprofit corporation, as defined in s. 181.0103 (17).

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

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

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

1. Work to ensure that all older individuals, regardless of income, have access to information, services and opportunities available through the county or tribal aging unit and have the opportunity to contribute to the cost of services and that the services and resources of the county or tribal aging unit are designed to reach those in greatest social and economic need.

2. Plan for, receive and administer federal, state and county, city, town or village funds allocated under the state and area plan on aging to the county or tribal aging unit and any gifts, grants or payments received by the county or tribal aging unit, for the purposes for which allocated or made.

3. Provide a visible and accessible point of contact for individuals to obtain accurate and comprehensive information about public and private resources available in the community which can meet the needs of older individuals.

4. As specified under s. 46.81, provide older individuals with services of benefit specialists or appropriate referrals for assistance.

5. Organize and administer congregate programs, which shall include a nutrition program and may include one or more senior centers or adult day care or respite care programs, that enable older individuals and their families to secure a variety of services, including nutrition, daytime care, educational or volunteer opportunities, job skills preparation and information on health promotion, consumer affairs and civic participation.

6. Work to secure a countywide or tribal transportation system that makes community programs and opportunities accessible to, and meets the basic needs of, older individuals.

7. Work to ensure that programs and services for older individuals are available to homebound, disabled and non–English speaking persons, and to racial, ethnic and religious minorities.

8. Identify and publicize gaps in services needed by older individuals and provide leadership in developing services and programs, including recruitment and training of volunteers, that address those needs.

9. Work cooperatively with other organizations to enable their services to function effectively for older individuals.

10. Actively incorporate and promote the participation of older individuals in the preparation of a county or tribal comprehensive plan for aging resources that identifies needs, goals, activities and county or tribal resources for older individuals.

11. Provide information to the public about the aging experience and about resources for and within the aging population.

12. Assist in representing needs, views and concerns of older individuals in local decision making and assist older individuals in expressing their views to elected officials and providers of services.

13. If designated under s. 46.27 (3) (b) 6., administer the long–term support community options program.

14. If the department is so requested by the county board of supervisors, administer the pilot projects for home and community –based long–term support services under s. 46.271.

15. If designated under s. 46.90 (2), administer the elder abuse reporting system under s. 46.90.

16. If designated under s. 46.87 (3) (c), administer the Alzheimer's disease family and caregiver support program under s.

46.87.

17. If designated by the county or in accordance with a contract with the department, operate the specialized transportation assistance program for a county under s. 85.21.18. Advocate on behalf of older individuals to assist in enabling them to meet their basic needs.

19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate the resource center. 20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.284 (1) (a) 1., apply to the department to operate a care management organization under s. 46.284 and, if the department contracts with the county under s. 46.284 (2), operate the care management organization and, if appropriate, place funds in a risk reserve.

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

(4) Commission on Aging.

(a) Appointment.

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

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

(b) Composition.

A commission on aging, appointed under par. (a) shall be one of the following: 1. For an aging unit that is described in sub. (1) (a) 1. or 2., organized as a committee of the county board of supervisors, composed of supervisors and, beginning January 1, 1993, advised by an advisory committee, appointed by the county board. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.

2. For an aging unit that is described in sub. (1) (a) 1. or 2., composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.

3. For an aging unit that is described in sub. (1) (a) 3., the board of directors of the private, nonprofit corporation. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.

(c) Terms.

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

(c) Powers and duties.

A county or tribal commission on aging appointed under sub. (4) (a) shall, in addition to any other powers or duties established by state law, plan and develop administrative and program policies, in accordance with state law and within limits established by the department of health and family services, if any, for programs in the county or for the tribe or band that are funded by the federal or state government for administration by the aging unit.

Policy decisions not reserved by statute for the department of health and family services may be delegated by the secretary to the county or tribal commission on aging. The county or tribal commission on aging shall direct the aging unit with respect to the powers and duties of the aging unit under sub. (3).

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

(a) 1. For an aging unit that is described in sub. (1) (a) 1., except as provided in subd. 2., a county or tribal commission on aging shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each

county board of supervisors or the tribal governing body that participated in the appointment of the county or tribal commission on aging. 2. In any county that has a county executive or county administrator and that has established a single–county aging unit, the county executive or county administrator shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors that participated in the appointment of the county commission on aging.

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

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

Appendices

Attach copies of comments received during public review of the plan.

Attach other documents that support the aging unit plan.

	Mealsites -	Berlin Senior	Center, D	artford Bay A	partments,	Grand River /	Apartments											
		HOMEBOUND									CARRY OUT (WAS CONGREGATE prior to March 15th, 2020) Opened Congregate Dining July 2, 2021 in Green Lake & Markesan.							
		Berlin		Green Lake/Prince.		Markesan			Berlin		GL/Princeton		Markesan				MEAL PF	ROGRAM
	HDM #	DONATION	HDM #	DONATION	HDM #	DONATION	HDM TOTAL	HDM TOTAL	CARRY OUT	DONATION	CARRY OUT	DONATION	CARRY OU	DONATION	Carry Out TOTAL	Carry Out TOTAL	TOTAL	TOTAL
		AMOUNT		AMOUNT		AMOUNT	MEALS	DONATION	# SERVED	AMOUNT	# SERVED	AMOUNT	# SERVED	AMOUNT	MEALS	DONATION	MEALS	DONATION
January	690	\$2,368.00	477	\$1,502.00	497	\$1,892.52	1664.00	\$5,762.52	475	\$1,749.00	103	\$34.00	52	\$8.00	630	\$1,791.00	2,294.00	\$7,553.52
February	670	\$2,774.80	433	\$2,462.56	470	\$1,972.00	1,573	\$7,209.36	395	\$1,342.00	99	\$34.00	50	\$20.00	544	\$1,396.00	2,117.00	\$8,605.36
March	798	\$2,657.20	535	\$1,936.80	581	\$2,156.00	1,914	\$6,750.00	502	\$1,619.00	105	\$50.00	66	\$48.00	673	\$1,717.00	2,587.00	\$8,467.00
April	748	\$2,346.00	508	\$1,421.00	508	\$3,528.00	1,764	\$8,311.00	451	\$1,747.00	84	\$59.00	44	\$28.00	579	\$1,834.00	2,343.00	\$10,145.00
Мау	709	\$2,895.09	482	\$2,281.20	442	\$2,013.00	1,633	\$7,189.29	400	\$967.00	69	\$73.00	48	\$28.00	517	\$1,068.00	2,150.00	\$8,257.29
June	749	\$2,720.24	528	\$1,810.00	493	\$2,019.00	1,770	\$6,549.24	348	\$1,286.00	82	\$60.00	55	\$0.00	485	\$1,346.00	2,255.00	\$7,895.24
July	662	\$2,432.08	431	\$1,839.44	463	\$1,995.00	1,556	\$6,266.52	286	\$1,041.00	85	\$38.00	44	\$0.00	415	\$1,079.00	1,971.00	\$7,345.52
August		\$2,609.68		\$1,878.88		\$1,432.00	#VALUE!	\$5,920.56				\$8.00		\$0.00	#VALUE!	#VALUE!	#VALUE!	#VALUE!
September							#VALUE!	#VALUE!							#VALUE!	#VALUE!	#VALUE!	#VALUE!
October							#VALUE!	#VALUE!							#VALUE!	#VALUE!	#VALUE!	#VALUE!
November							#VALUE!	#VALUE!							#VALUE!	#VALUE!	#VALUE!	#VALUE!
December							#VALUE!	#VALUE!							#VALUE!	#VALUE!	#VALUE!	#VALUE!
TOTALS	5026	\$20,803.09	3394	\$15,131.88	3454	\$17,007.52	#VALUE!	#VALUE!	2857	\$9,751.00	627	\$356.00	359	\$132.00	#VALUE!	#VALUE!	#VALUE!	#VALUE!

AGING REPORT - 2021

		ELDER ABUSE				Elderly Benefit Specialist Pro		alist Progra	<mark>jram 20</mark> 2				DBS			
			REPORTED	REPORTED			I&A				QUARTERLY REPORTS					
	5000															
	FOOD		ELD ABUSE		ADRC	TRNG	CALLS FOR		OUTREACH		NEW	CLIENT \$	OPEN			
	PANTRY	CASES	CASES	CASES	CONTACTS	HOURS	EBS	SPEAKING	HOURS	ADRC	CASES	SAVED	CASES			
January	152	51	4	0	209	17	109	0	0	0	58		57			
F . I	150															
February	153	51	5	1	244	15	108	0	0	0	39		49			
March	160	50	0	2	000	40	405		0	0	40					
warch	100	50	8	2	326	16	105	0	0	0	42		68			
April	130	50	4	0	211	18	107	0	5	0	36		47			
	130	50	4	0	211	10	107	0	5	0			47			
Мау	127	52	1	2	222	14	101	0	10	0	40	<u> </u>	42			
		52		L					.0	0	.0		12			
June	144	53	4	3	251	39	123	0	11	0	48		69			
July	175	55	7	0	239	17	139	1	10	0	22		43			
August	179	55	3	1	234	14	93	0	11	0	21		52			
September			0	0				0		0						
October				0				0	0	0					_	
Neversber																
November								0	0	0						
December				0				0	0	0						
December				0				0	0	0						
TOTAL	1220	417	36	9	1936	150	885	1	47	0	306	\$0.00	1			
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