

AGENDA

Eau Claire County
Aging & Disability Resource Center Board
Wednesday, March 19, 2014, 4:00 pm
Rooms 1301/1302 Courthouse, Eau Claire WI

1. Call to order
2. Confirm Agenda
3. Introductions
4. Public Comment
5. Review February 19, 2014 ADRC Board meeting minutes /Discussion – Action Handout #1
6. Youth Transition Services Staff Presentation- Dawnelle Horvath Handout #2
7. Meals on Wheels vendor update- Rebecca Hinzmann
8. Nutrition Program Grant Opportunity- Rebecca Hinzmann/Discussion – Action Handout #3
9. LTS Subcommittee discussion
10. Director's Report
 - a. Vouchers Handout #4
 - b. Annual Report & 2013 Year End Performance Management Handout #5
 - c. Care Transition Program Update
 - d. Dementia Care Specialist Grant Opportunity/Discussion - Action Handout #6
11. April meeting date
12. Discuss Future Agenda Items
13. Next meeting date
14. Adjourn

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 839-4710, (FAX) 839-1669, tty: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

Aging & Disability Resource Center Board
Wednesday, February 19, 2014, 4:00 pm
Rooms 1301/1302 Courthouse, Eau Claire WI

Handout #1

Members Present: Tom Christopherson, Louise Garvey, Lauri Malnory, Richard Ziemann, Mark Beckfield, Sue Miller, Gordon Steinhauer, Cheryl Stahl, Katherine Schneider, Mary Pierce, Stella Pagonis

Others Present: Jennifer Owen, Becky Hinzmann, Tim Moore, Jenna Belter, Marlene Rud, Nicole Everson

Chair Miller called the meeting to order at 4 pm.

Confirm agenda – yes

Introductions of board members, ADRC staff and others in attendance.

Public Comment – upcoming Senior Americans Day.

ADRC statewide commercials – Jennifer Owen. Discussed statewide ADRC grant and marketing initiative. Viewed the current commercials that are playing on WQOW TV18, up to 20 times per week. Upcoming commercials will be played on WEAU TV13.

ADRC Board January 15, 2014 meeting minutes. Katherine Schneider moved approval. Motion carried.

Connections to Community Living Program – Jenna Belter. Reviewed handouts and the ADRC role in the Connections to Community Living Program initiative. The goal of the program is to give nursing home residents that would be eligible to live in a less restrictive setting, options and resources for supported care that could be assisted living or in their home with in home care. Jenna provides Options Counseling outreach at area nursing homes on a regular weekly schedule to get information out to staff and residents.

Meal vendors update – Jennifer Owen. At their February 12, 2014 meeting, the ADRC Sub Committee on Older Americans Act Program reviewed proposals and recommended ADRC staff to contract with Aramark for meal service for senior dining and Meals on Wheels. However, when ADRC staff met with Aramark, the cost figures were not accurate and did not include meal packaging cost. Aramark will provide another bid with current information. Current meal provider, Sacred Heart Hospital, submitted another bid with reduced meal cost. At this time, meal provider contract with Sacred Heart Hospital will continue.

Director Report – Jennifer Owen. Reviewed ADRC January check summary, Care Transition Program status and January ADRC programs stats.

Future agenda items: youth transition, update on meal providers, year-end 2013 budget information

Motion to adjourn at 4:55 pm.

Respectfully Submitted

Marlene Rud, Clerk
Aging & Disability Resource Center Board

Chairperson

Suggested Timeline for Transition from School to Adult Life

Student Age	Action (Student, Parent, Both)
11-14	<ul style="list-style-type: none"> • Focus on your IEP (Individualized Education Plan). Make sure it includes social skills, communication skills and self-help skills as well as functional math and reading skills (as appropriate). • It is never too early to start learning about adult resources by talking with your Aging & Disability Resource Center (ADRC), talking with other parents/families as well as the school. To find your local ADRC, visit www.dhs.wisconsin.gov/lcicare/adrc
By 14	<ul style="list-style-type: none"> • <i>Begin transition planning— focus student’s course of study on possible transition plans</i> • Learn about after-graduation options to ensure you are able to reach your goal. For example, if you are interested in going to college, start researching colleges.
No later than 16	<ul style="list-style-type: none"> • Identify job interests and abilities and focus on what training you need in order to get the type of job you are interested in • Identify community services that provide job training and placement • Consider summer employment to gain work experience and/or • Participate in volunteer experiences
16-17	<ul style="list-style-type: none"> • If you haven’t already done so, begin contacting colleges, vocational and/or technical schools • Look into recreational/leisure groups– you will want a way to socialize with others after you graduate • Discuss adult medical services with your primary care physician/pediatrician
17 years and 6 months-18	<ul style="list-style-type: none"> • Contact your local Aging & Disability Resource Center for assistance with transition planning <ul style="list-style-type: none"> - applying for Social Security - applying for long-term care assistance and support - discussing guardianship - discussing representative payee status - overall counseling on resources and options (housing, vocational, day services, etc) • <i>Begin to consider and plan for Guardianship (as appropriate). **Parents– remember that even if you child stays in school until 21, they are legally an adult at age 18**</i> • Visit colleges and their Disability Services Offices • Take the ACT or SAT tests if you plan to apply for college

As many of you know, the Bureau of Aging and Disability Resources (BADR) convened the Wisconsin Nutrition Revitalization Task Force in 2013 to examine ways to strengthen and invigorate the Wisconsin Elderly Nutrition Program. The task force, comprised of local citizens and professionals in the aging network, has held two meetings in order to refine the goals of the revitalization initiative and to develop new ideas and approaches to providing nutrition services to older adults throughout Wisconsin. The work of this group is currently dedicated to enhancing congregate meal services.

The task force has played an integral role in focusing revitalization at the local level beyond minute changes to routine program operations by developing innovative suggestions for local pilot projects in four focus areas. Focus areas include: Facility/Infrastructure Modifications, Programmatic Enhancements, Administrative Changes, and Outreach/Marketing. Examples of suggestions generated by the revitalization task force in each area are attached. These suggestions may help you to determine which types of pilot projects would be successful in your area. Note you are not limited to changes within this list.

BADR is pleased to announce the availability of to support local pilot projects for congregate meal services throughout the state. Nutrition program directors from county/tribal aging units and/or ADRCs are encouraged to apply for funding to support projects in their local area that adhere to the mission of the revitalization effort and the intent of the Elderly Nutrition Program.

A maximum of \$20,000 in one-time funding will be awarded to each successful applicant for projects in one or more congregate dining centers. Funds will be awarded utilizing a competitive application process. Application materials are attached, including:

- Request for Applications Cover Letter – Please read this letter carefully as it includes information that is critical to submission of a successful application, along with expectations of potential award recipients!
- Pilot Project Funding Application
- Nutrition Program Revitalization Focus Areas/Suggestions
- Implementation Plan template
- Pilot Project Budget Worksheet template

The timeline for application and awards is short, because funds are only available for a very limited time. If your aging unit/ADRC would like to apply for nutrition program revitalization pilot project funds please provide the information requested in the attached application document, budget worksheet, and implementation plan. **Applications must be submitted electronically to Sara Koenig at saras.koenig@wisconsin.gov on or before 3:00 p.m. on March 24, 2014.** Late applications will not be considered.

This email serves as an impetus for county and tribal aging units and ADRCs to begin to seriously consider the type of project that could be implemented in their communities. I am hopeful that all nutrition directors will take advantage of this opportunity to obtain funding to pilot some truly innovative approaches for revitalizing the nutrition program in your area. If you have any questions about the application process, please feel free to direct them to me.

Thank you,

Sara Koenig, MS RDN CD
Elder Nutrition Program Manager
Bureau of Aging and Disability Resources
1 West Wilson Street, Room 551
Madison, WI 53707
Phone: 608-266-3746
Fax: 608-267-3203
SaraS.Koenig@wisconsin.gov

ADRC CHECKS ISSUED

February 2014

85.21 TRANSPORTATION

Abby Vans	\$ 3,601.90	Extended hours transportation - Jan 2014
Abby Vans	177.00	Fare assistance
<i>subtotal</i>	<u>3,778.90</u>	

NUTRITION PROGRAM MEALS

Abbott Nutrition	\$ 2,274.00	Nutrition supplements
Augusta Nursing Home	3,597.75	Meals
Fall Creek Valley Care Center	1,515.75	Meals
Sacred Heart Hospital	23,615.90	Meals & cakes
<i>subtotal</i>	<u>31,003.40</u>	

SHORT TERM AND SUPPORTIVE SERVICES

- Kathleen Dennis	185.00	short term services
- Grace Lutheran Foundation	1,263.00	alzheimers supportive services
- Home Instead Senior Care	374.00	short term services
- Vantage Point Clinic	360.00	short term services
<i>subtotal</i>	<u>1,822.00</u>	

SUPPLIES AND SERVICES

- Aramark Services Inc.	\$ 6.00	cookies
- AT & T	57.63	long distance phone service
- CDW Computer Center	216.26	Office equipment
- Centurylink	45.44	phone service
- Office Depot	953.21	office supplies
- RCU	150.00	room rental (discount applied)
- Schilling Paper Co.	143.03	nutrition supplies
- Verizon Wireless	139.78	data cards and cell phone service
- State of Wisconsin	30.00	volunteer background checks
<i>subtotal</i>	<u>1,741.35</u>	

MARKETING AND SPONSORSHIPS

- Award Winning Sports	632.16	clothing (net; includes reimbursements)
- Geraldine Krause	565.00	dementia flyer
- UW - Eau Claire	150.00	Employee Wellness Fair (booth fee)
- YP LLC	50.00	Yellow Book listing
<i>subtotal</i>	<u>1,397.16</u>	

TRAINING AND MEMBERSHIPS

- Aging & Disability Professionals Assoc	50.00	membership fees
- University of WI - Eau Claire	45.00	lunch tickets - Sr American Day
- Wisconsin Assoc of Nutrition	105.00	membership/registraton fees
-	<i>subtotal</i>	<u>200.00</u>

UNEMPLOYMENT COMPENSATION

WI Dept. of Workforce Development	\$ 141.11	2014 payments (JAN)
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- Staff and volunteer travel listed on second page.

STAFF TRAVEL AND EXPENSE REIMBURSEMENT

- Jenna Belter	95.37	options counselor
- Kris Bertrand	700.23	delivery worker

-	Deb Bruning	35.70	prevention program coordinator
	Cleo Carpenter	410.55	delivery worker
	Gerald Carpenter	542.13	delivery worker
	Jim Coldwell	8.16	disability benefit specialist
	Lisa Ehr	28.05	options counselor
	Emily Gilbertson	132.60	care transition program
	Dana Greicar	13.26	options counselor
	Rebecca Hinzmann	74.97	nutrition program supervisor
	Dawnelle Horvath	81.60	options counselor
	Jessica Krause	46.92	office associate
	Timothy Moore	9.18	ADRC supervisor
	Sue O'Branovich	41.00	options counselor
	Lisa Riley	37.74	care transition program
	Doug Salter	14.28	nutrition program
	Jillian Sommerfeld	44.37	options counselor
	Kaylynn Stahlbusch	30.60	nutrition volunteer coordinator
	Leda Welke	45.39	elder benefit specialist
	Lisa Wells	52.53	options counselor

subtotal 2,444.63

VOLUNTEER MILEAGE AND SUBSTITUTE WORKERS

-	Luana Allen		
-	Roy Anderson	\$ 14.28	
-	Michael Ashbaugh	21.93	
-	Phillip Berman	127.50	
-	Orville Bierman	18.36	
-	Peggy Blomenberg	83.13	substitute meal worker
-	Jonathan Case	11.22	
-	Thomas Christopherson	32.64	
-	Michael Feight	124.44	
-	Heather Garber	17.85	
-	Gordon Geurink	50.49	
-	Joe Hayden	50.49	
	Jean Heller	36.72	
	Delyle Henschel Spindt	18.87	
	Paul Hoff	7.65	
	Joyce LaNou	107.10	
	Ronald Larson	43.86	
	Sharon Long	51.00	
	David Lundberg	34.68	
	Kent Magnuson	13.77	
	Douglas Mason	24.99	
	Marian Olson	55.59	
	Barbara Parenteau	23.97	
	REACH Inc.	55.08	
	Leon Salander	91.80	
	Annette Truslow	27.54	
	Kathleen Wiese	61.71	

subtotal 1,206.66

TIMEBANK - CONTRACT SERV

	Cheryl Fricke	1,930.00	Timebank coordinator (includes travel)
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subtotal 1,930.00

TOTAL ISSUED \$ 45,665.21

Aging & Disability Resource Center 2013 Annual Report

Handout #5

Mission: To help people age 60+ and adults with disabilities secure needed services or benefits, live with dignity and security, and achieve maximum independence and quality of life.

Staff in 2013:

Jennifer Owen, Director (1.0 FTE)

Tim Moore, ADRC Supervisor (1.0 FTE)

Jenna Belter, Lisa Ehr, Dana Greicar, Dawnelle Horvath, Sue O'Branovich, Jill Sommerfeld, Lisa Wells, Options Counselors (6.75 FTE)

Sue Brown, Leda Welke, Elder Benefit Specialists (1.625 FTE)

Jim Coldwell, Melissa Wendtland, Disability Benefit Specialist (2.0 FTE)

Deb Bruning, Prevention Program Coordinator (1.0 FTE)

Emily Gilbertson, Lisa Riley, Care Transition Coaches (2.0 FTE)

Mary Berg, Lindi Engedal, Jessica Krause, Marlene Rud, Office Associates (4.0 FTE)

Becky Hinzmann, Nutrition Program Supervisor (1.0 FTE)

Kaylynn Stahlbusch, Volunteer Coordinator (1.0 FTE)

Doug Salter, Meal Site Worker (.375 FTE)

Kris Bertrand, Cleo Carpenter, Jerry Carpenter, Delivery Workers (1.125 FTE)

27 total employees 22.875 total FTEs

2013 Revenue and Expenditure Summary

Pending

Program #1: Information & Counseling

This program provides a central source of information about a broad range of community resources and benefits of interest to people age 60+ and adults with disabilities of all incomes and their caregivers. ADRC customers are helped to understand the various short and long term care options and benefits available, use their personal resources wisely, and delay or reduce the demand for public funding for services.

OUTPUTS

			<u>2011</u>	<u>2012</u>	<u>2013</u>
Information & assistance; long term care options counseling visits:			6,986	9,112	10,219
Publicly funded long term care enrollments:			247	274	215
Nursing home relocations			N/A	N/A	29
Disability Benefit Specialist cases:			584	567	583
Disability Benefit Specialist Information only:			127	353	320
Elder Benefit Specialist cases:			590	867	1,009
Elder Benefit Specialist Information only:			635	474	513
Unduplicated number of people receiving assistance:			3,369	3,848	3,934
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To provide ADRC customers will reliable and objective information so that they can access services and make informed choices about their short and long term care options.	95% of ADRC customers completing satisfactions surveys will report services provided were helpful and met their needs for making informed choices about short and long term care options.	95%	96%	99%	TBD
To provide ADRC customers will assistance in understanding and accessing public and private benefits.	95% of ADRC customers completing satisfaction surveys will report the service provided by the Elder and Disability Benefit Specialists helped them understand and access public and/or private benefits.	95%	98%	96%	99%

Program #2: Elderly Nutrition Program

The program includes Meals on Wheels delivered throughout the county and two Senior Dining sites located at the Augusta Senior Center and St. John's Apartments in Eau Claire. Also included are the Senior Farmer's Market Voucher Program, liquid nutritional supplements and the large volunteer programs that support all of these services.

OUTPUTS

			<u>2011</u>	<u>2012</u>	<u>2013</u>
Congregate meals served:			17,859	15,190	12,262
Meals on Wheels delivered:			79,025	78,622	78,881
People served:			1,570	1,658	1,618
Cases of liquid supplement distributed:			1,284	1,382	1,202

Emergency food packs delivered:			400	375	
Senior Farmers Market Nutrition Program vouchers issued:			300	300	313
Total number of volunteers:			523	656	782
New volunteers recruited, screened and trained:			96	130	92
Hours donated by volunteers:			18,097	16,786	15,614
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To make high quality Nutrition Program services available to eligible individuals, countywide.	85% of program participants responding to semi-annual satisfaction surveys will indicate meal and service quality as very good to excellent	85%	79%	78%	84%
	100% of individuals requesting Meals on Wheels will receive service within 48 hours of the requested start date.	100%	100%	100%	100%
To ensure an adequate number of trained volunteers are available to keep program costs down and meet demand for Meals on Wheels	90% of all Meals on Wheels routes will be delivered by volunteers	90%	90%	91%	91%

Program #3: Specialized Transportation

Under advisement of the Transportation Coordination Advisory Committee, the county partners with the City of Eau Claire to provide transportation for people age 60+ and adults with disabilities who do not have access to transportation. Rides are provided for medical, nutrition, social and employment purposes. The program is funded with a WI Department of Transportation grant and levy match.

Outputs

	<u>2011</u>	<u>2012</u>	<u>2013</u>		
Total number of trips	26,774	24,657	26,332		
Trip purpose: Employment	14,293	13,254	14,255		
Social	7,518	7,087	8,167		
Medical	3,619	3,215	2,621		
Education	479	365	139		
Nutrition	382	165	189		
Shopping/Personal Business	402	568	554		
Total number of rides for people age 60+:	10,965	9,712	9,841		
Total number of rides for adults with disabilities:	15,809	14,350	16,844		
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To ensure that individuals using paratransit and specialized transportation are satisfied with the service.	96% of users responding to a semi-annual survey will indicate they are satisfied to very satisfied with services.	96%	96%	90%	90%

Program #4: Eligibility Determination

This program includes administering the Adult Long Term Care Functional Screen for frail elders and adults with physical and intellectual disabilities to determine their functional eligibility for publicly funded long term care programs: Include, Respect, I Self Direct (IRIS) and Family Care.

Outputs

	<u>2011</u>	<u>2012</u>	<u>2013</u>
Adult long term care functional screens completed:	200	247	292

Screens reviewed for accuracy/quality assurance:	73	108	248
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<u>Performance Goal</u>	<u>Outcome Measure</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To provide functional eligibility determination in an accurate and timely manner.	The percentage of random screen samples will meet or exceed the WI Dept. of Health Services error free percentage rate of 80%.	80%	86%	81%	82%
To ensure frail elders and adults with disabilities understand the purpose of the screen and the process for functional eligibility determination.	95% of individuals screened who respond to a survey will report they understand the purpose and process of functional eligibility determination.	95%	95%	100%	100%

Program #5: Evidenced Based and Other Prevention Programs

This program includes a number of evidenced based programs: Stanford University Chronic Disease Self-Management “Living Well”, Stepping On Falls Prevention, Powerful Tools for Caregivers, Memory Care Connections and the Care Transition Intervention. Other prevention program include: in home fall prevention screening and education, memory screening and referral, nutrition risk screening and counseling, and nutrition education activities.

Outputs

	<u>2011</u>	<u>2012</u>	<u>2013</u>
Individuals participating in Chronic Disease Self-Management:	12	11	39
Individuals participating in Stepping On class:	25	39	59
Individuals participating in Care Transition Intervention in Eau Claire & Chippewa counties:	N/A	358	278
Individuals completing the Care Transition Intervention:	N/A	178	144
Individuals participating in Powerful Tools for Caregivers classes:	0	5	15
Total Nutrition Risk Screens completed:	926	821	585
Number of individuals found to be at high risk on Nutrition Risk Screen:	175	175	97
Number of memory screens completed:	32	33	29
Individuals receiving services through Older Americans Act grant:	16	43	39
Individuals receiving services through Alzheimer Family Caregiver Support Program:	13	18	14
Individuals receiving services through county levy funds:	5	21	38

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To provide classes, risk screenings, counseling and education to ADRC customer in order to promote healthy practices and strategies for chronic disease management, fall prevention, health care management and caregiving.	95% of individuals responding to a post class survey will indicate information and education provided met or exceeded their expectations.	95%	100%	100%	100%
	100% of caregiving class participants responding a survey will report an increase in confidence with dealing with increasing needs of the person they are caring for.	100%	N/A	100%	100%
	90% of individuals	90%	N/A	90%	96%

	<p>participating in the Care Transition intervention will increase their patient activation score from the beginning to the end of the intervention.</p> <p>80% of individuals participating in the Care Transition Intervention will report not being readmitted to the hospital on the 30 day post intervention follow up survey.</p>	80%	N/A	94%	93%
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Program #6: Outreach and Public Education

This program promotes awareness of ADRC programs and issues relating to aging and disability includes: staff presentations, website, Facebook page, monthly newsletter, resource directories, posters, ads, mailings, news releases, health fairs, and a wide variety of other educational activities. It also includes the annual Youth Transition Conference, Caregiver Town Hall Meeting, Caring for the Caregiver Conference, Final Affairs Seminar, Regional Caregiver Alliance activities, “Medicare and You” presentations and “Aging in Place: Planning for Future Care Needs” presentations.

OUTPUTS

	<u>2011</u>	<u>2012</u>	<u>2013</u>
Contacts for assistance ages 18-59 with a disability (standard is 768):	2,224	2,562	2,422
Contacts for assistance ages 60+ (standard is 1,344):	4,105	6,810	7,304
Staff presentations:	95	128	76
Number of people attending presentations:	2,776	3,665	7,590
Newsletters distributed:	24,137	23,518	21,236
Posters, news releases, resource directories, brochures, mailings, etc.:	33,358	33,803	45,151

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
To ensure people age 60+ and adults with disabilities are aware of and use ADRC services.	100% of the marketing standards set by the ADRC contract will be met.	100%	100%	100%	100%
To provide a variety of educational opportunities and information materials to ADRC customers and professionals who work with ADRC customers.	100% of individuals attending ADRC staff presentations and responding to the post presentation survey will report the information provided in the presentation met or exceeded their expectations.	100%	100%	99%	99%

ADRC Accomplishments in 2013

We experienced a significant amount of growth in our **Health Promotion and Wellness** programs in 2013. There was a nearly 50% growth in participation in our Stepping On, Living Well with Chronic Conditions and Powerful Tools for Caregivers classes. We also added **2 new programs** in 2013, including Strong Women and Healthy Eating for Successful Living.

On January 1, 2013, Eau Claire County's managed care provider for the Family Care program changed to **ContinuUs**. We successfully assisted all Eau Claire County residents enrolled in the Family Care or IRIS programs with the transition and provided information about their public long-term care options.

We expanded our nursing home resident outreach efforts as a part of the **Connections to Community Living** program efforts. The goal of this program is to provide nursing home residents with information regarding long-term care options available in the community. At the end of 2013 we have monthly, scheduled outreach hours at 4 of Eau Claire County's 8 nursing homes.

In the fall of 2013, we began operating an **Adaptive Equipment Loan Program**. We have a supply of 130+ items of adaptive equipment available for loan. Items can be loaned for up to 90 days and there is a small, refundable deposit associated with the various pieces of equipment. Some examples of what is available include walkers, manual wheelchairs, bed rails, grab bars, etc.

"Aging in Place: Planning for Future Care Needs" is a new seminar we began offering in 2013. We offer this two times per month. It is designed for those who do not currently have long-term care needs. It is for the pro-active person looking to plan for their future. This seminar was implemented in an effort to reach the baby boomers and keep up with meeting the demand of a rapidly growing aging population.

Future Challenges for the ADRC

Continuing to meet the demand of the growing aging population is an ongoing challenge for the ADRC. In our programs that specifically serve individuals age 60 and older, we experienced a **15% growth** in 2013 from the previous year. The US Census Bureau estimates that by the year 2030, 26% of Wisconsin's population will be 60 years of age or older. This is an increase of over 36% since 2012. Coming up with creative and innovative ways to meet demand in providing Information & Assistance, Options Counseling, Benefits Counseling and Health Promotion programming will continue to be a top priority for the ADRC.

Level and in some cases, decreasing grant funding has made it difficult to keep up with the demand on services. We experienced a **10% reduction in Older Americans Act** grant funding as a result of federal sequestration. Our largest Older Americans Act program is Meals on Wheels and Senior Dining. A large challenge has been coming up with creative ways to increase revenue to support Meals on Wheels and Senior Dining with strict federal restrictions on program fundraising.

There is a need and support at the State level to come up with ways to increase participation in Senior Dining programs throughout the State by 'modernizing' the program. Eau Claire County currently has only **2 Senior Dining Sites** and we continually struggle with keeping participation levels up. Modernizing the Senior Dining program will become a priority looking for ways to boost participation and new, innovative ways for service delivery.

DATE: February 28, 2014

TO: Aging and Disability Resource Center Directors

FROM: Carrie Molke, Director
Bureau of Aging and Disability Resources

RE: Expansion of the Dementia Care Specialist Program

The Department of Health Services is pleased to announce an expansion of the Aging and Disability Resource Center (ADRC) Dementia Care Specialist program in response to anticipated growth in the elderly population, the numbers of people with Alzheimer's disease and related dementias, and the *Wisconsin Dementia Care System Redesign* plan.

Funding Opportunity for Wisconsin ADRCs

The Division of Long Term Care will award funding for ten additional ADRC Dementia Care Specialist (DCS) programs, using a competitive and reviewed application process. The maximum amount of funding available for a twelve month period per ADRC is \$80,000 (GPR), plus any Federal Medicaid Administrative Funding that results from required 100% time reporting. Funding will be available through calendar year 2015. In 2014, ADRCs receiving a DCS award will receive a pro-rated contract amount based on the date the contract is issued. The Department may seek funding in future budget cycles to make the service available statewide.

Funding for the initial five ADRC DCS program pilots will be continued through calendar year 2015 without the need to re-apply through this application process. Program continuation will be addressed in a separate communication.

Purpose

Expansion of the Dementia Care Specialist program is intended to increase the dementia capability of Wisconsin's ADRCs, create more dementia friendly communities, and increase opportunities for people with dementia to remain in their own homes as long as is appropriate.

- **Dementia Capable ADRCs**

The DCS will provide consultation and technical assistance to ADRC, county/tribal aging unit and adult protective services (APS) staff who interact with people who are experiencing cognitive changes or have been diagnosed with Alzheimer's disease or related dementia. Staff members who provide nutrition services, support and prevention programs, benefits counseling, options counseling, information and assistance as well as other county program staff will benefit from the expertise of the DCS and collaborate in serving individuals and families facing dementia or undiagnosed early cognitive changes.

- **Dementia Friendly Communities**

An important role for the DCS will be to develop referral processes to physicians and health care systems in the area, making them aware of the programs and services that are available to individuals with dementia, the support that is available at the ADRC, and the benefits of early identification and diagnosis. The DCS will also be responsible for developing strategies for engaging the larger community to recognize, communicate with and support people with dementia.

- **Opportunities for People with Dementia to Remain in Their Own Home.**

The DCSs provide a variety of services to help people with dementia stay in their homes longer than might otherwise be possible. They provide education and support for family caregivers; facilitate access to the Alzheimer's Family Caregiver Support Program (AFCSP), the National Family Caregiver Support Program (NFCSP) and other services and supports; and implement evidence-based programs for both family caregivers (Memory Care Connections) and people in early stage dementia (Language Enriched Exercise Plus Socialization [LEEPS]). The DCS is to consult with ADRC, county/tribal aging unit and APS staff members.

Additionally, they may make joint home visits and/or meet privately with individuals identified as having positive cognitive screen results and those diagnosed with a dementia. The DCS may assist individuals with positive screens, those diagnosed with dementia and family or informal caregivers with better understanding community resources while supporting them as their options are evaluated. The DCSs are able to provide limited short-term care coordination for individuals or families to address immediate needs.

Lessons Learned during the 2013 DCS Pilot Projects

Based on recommendations and feedback from the pilot ADRC managers and DCS staff members, the following lessons learned have been incorporated into the application process.

- Equal time and effort should be devoted to ADRC, community and individual/caregiver activities. The DCS is to coordinate a phase-in for the three major components of the project: direct support to individuals with dementia and their families; the activities required to develop dementia capable systems within the ADRC; and a dementia friendly community.
- An initial investment of time will be spent in identifying and developing relationships with the agencies, programs and providers that touch the lives of people with dementia.
- Participation in the evidence-based programs will require time to ramp up. Building interest and awareness of the existence of the programs, acceptance by potential participants and referrals from community organizations will take time.
- A full-time position filled by one person without sharing DCS program responsibilities with another or other staff members is required to meet additional activities within the Dementia Care System Redesign Plan. Unusual circumstances might be considered and must be addressed in the application.
- Volunteer recruitment for the LEEPS program is beyond the scope of the DCS position due to time constraints and competing activities. The ADRC, aging office, community volunteer organizations such as RSVP, Interfaith Volunteer Programs, are to recruit volunteers for the LEEPS program; the DCS is to train and support volunteers, monitor participant progress and assure fidelity to the model.

Roles and Responsibilities in the DCS Program Expansion

ADRCs selected for the DCS program expansion will be expected to fulfill the duties described below for both the DCS and the ADRC. Support to be provided by the Department is also described.

Dementia Care Specialist *[for a full description, see the attached position description]*

- Recruit participants and provide the Memory Care Connections (MCCs) intervention program for family caregivers (the New York University Caregiver Intervention).
- Recruit participants and implement the Language Enriched Exercise Plus Socialization (LEEPS) program by providing volunteer training and technical support, enrolling participants, developing individual plans and monitoring the program.
- Provide culturally competent services and supports to individuals, families and community members.
- Develop referral relationships with health and community care providers.
- Provide consultation and education to ADRC, county/tribal aging unit and APS staff.
- Offer person-centered follow-up if cognitive screens are positive.
- Offer limited short-term service coordination for individuals with dementia and their caregivers.
- Provide outreach and awareness about ADRC activities and the DCS program to professionals and the general community. The DCS is not to provide professional education but to refer professionals and providers to community-based educational programs, e.g., technical colleges, Alzheimer's organizations, Division of Quality Assurance.
- Develop and implement strategies that create a dementia friendly community.
- Participate in DCS program evaluation through data collection and periodic reports.
- Maintain fidelity to evidence-based programs and participate in scheduled conference calls and training programs sponsored by the Bureau of Aging and Disability Resources.

Aging and Disability Resource Center

- Recruit and hire a qualified person who is able to fulfill the dementia care specialist duties.
- Support the DCS orientation plan to better integrate the new staff person into the ADRC and county/tribal aging unit.
- Develop processes for smooth transitions for people and families facing dementia or positive cognitive screens when the DCS is to become involved. Examples include: connections with ADRC staff, county/tribal aging unit staff, APS staff and community organizations, especially the dementia support organizations and local dementia networks.
- Review and approve time reporting and assure program data is collected.
- Perform cognitive screening as part of information and assistance and options counseling activities and support data collection for screen results.
- Recruit and support volunteers for the LEEPS intervention; coordinate with existing volunteer programs—this is not the responsibility of the DCS.
- Promote the dementia care specialist program and services via outreach to the general community and health care systems.
- Supervise and evaluate the dementia care specialist, the relationship with other ADRC and county/tribal aging unit staff members and the dementia capability of the ADRC.
- Partner with the Department to provide program oversight for MCC and LEEPS activities and support DCS in required training programs.
- Evaluate or develop referral relationships with local Alzheimer's and dementia service organizations and community groups.
- Evaluate the effectiveness of the project via written and verbal feedback to the Department.

Department of Health Services

- Provide training and support to ADRCs and DCSs in implementation and management of the MCC and LEEPS programs.
- Collaborate with ADRCs and DCSs in program oversight and development of a dementia friendly community.
- Provide training, support and oversight to ADRC staff on cognitive screening.
- Provide ongoing technical assistance on DCS program and activities.
- Assure qualifications of DCS and, if necessary, review and act on requests to waive education and experience requirements.
- Identify and request data elements to be collected through the DCS program.

Application Process

In order to respond to questions about the program or application process a **conference call has been scheduled for Tuesday March 4, 2014, from 1:00 pm to 2:30 pm**. The conference call line is: 877-820-7831, the access code is: 997313.

Applicants must complete the Request for Application that accompanies this letter and submit it electronically to Sharon Beall at Sharon.Beall@Wisconsin.gov **on or before 3:00 p.m. Monday March 31, 2014**. Late and incomplete applications will not be considered.

See the attached Dementia Care Specialist Program 2014 Application Packet for specific details and application requirements.