

County Aging Plan Template 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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Executive Summary

The Columbia County Commission on Aging integrated with the Aging and Disability Resource Center in April of 2014 and together we strive to ensure that older adults in our County can live life to the fullest. Our mission is to provide a one stop source of information and assistance for older adults by advocating for, and linking them with, resources and services that enable them to live as independently as possible.

Given the continuation of the global pandemic, and our assessment that it was not yet time to sponsor in-person activities, we provided opportunities for input through surveys throughout our county as outlined in our Community Engagement Report. Though many more surveys were handed out, we were very satisfied that we were able to engage nearly 150 respondents in helping us develop our next three-year aging plan. This is in addition to presenting and discussing the Aging Plan process and community input with all of the boards, councils and ADRC teams.

Four main themes emerged from the survey responses:

- Affordable housing and help with home repairs and seasonal home maintenance needs
- Alternative transportation options
- Help with Medicare and prescription drug choices
- Social Isolation and Loneliness

Many respondents provided additional comments, which supported the emerging themes:

- More social activities geared toward older adults and activities connecting older adults and youth
- Needing a listing of volunteer and/or low-cost options for home care and maintenance needs
- Increased transportation availability to include rides to non-medical and social activities.

Given the structure of specific areas to address in the aging plan, this information was used to develop consumer-driven goals and outcomes as best possible. We are a small county with limited funds available; this drives our primary goal to maintain the current level of required and high-quality services our older community is accustomed to. Our secondary goal is to identify opportunities to work with community partners to help develop the services our community has identified as important and needed. Our agency cannot do this work alone, but together as a community, we are able to foster an environment that respects, acknowledges, includes and listens to its constituents so that older adults are able to live with dignity, respect and joy.

Context

Columbia County is located centrally in southern WI. According to the US Bureau of Census, we currently have 14,293 residents aged 60 and older representing 25% of our total population. Of the 24,1112 households in Columbia County, 40.6% of them include at least one person aged 60 or older and nearly 30% have at least one member aged 65 and older.

Our older adult population, aged 60 and older, is expected to grow to account for almost 50% of our total population by year 2040, which is less than 20 years away.

Households with Older Members	Columbia County
Total number of households	24,112
Households with one or more people 60 years and over:	9,800
<i>Percent with a member age 60+</i>	40.6%
Households with one or more people 65 years and over:	7,186
<i>Percent with a member age 65+</i>	29.8%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2015-19 Five-year Estimates, Tables B11006 and B11007, 1/2021</i>	

Age Group Estimates	Columbia County
Total Population - All Ages, All Races	57,133
60+	14,293
65+	9,968
75+	4,049
85+	1,341
<i>% 60+</i>	25.0%
<i>% 65+</i>	17.4%
<i>% 75+</i>	7.1%
<i>% 85+</i>	2.3%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2015-19 Five-year Estimates, Table B01001, 1/2021</i>	

	Ages 60 and Older	% Ages 60 and Older					
County	2015	2020	2025	2030	2035	2040	2040
Columbia	13,405	15,940	18,285	19,775	20,460	20,970	49.9%

Columbia County has a total of 9,968 residents aged 65 and older, 29.7% of whom live alone. According to the National Institute on Aging (NIA), approximately 28% of older adults in the United States live alone. Social isolation and loneliness are not one and the same with some people who are surrounded by family and friends reporting loneliness while others who are more socially isolated report not feeling lonely. Being that humans are mostly social by nature, living alone can lead to loneliness and social isolation and other related concerns including decreased cognition, heart disease and depression.

Our Aging Plan respondents identified social isolation and the need for transportation to non-medical activities as some of their top priorities. The additional comments also included the desire to have more social opportunities. Our goals include increased mechanisms to offer social events both in collaboration with our community partners and with the Senior Meal Program. We will also explore the option of a phone-based senior companion program that could be intergenerational and community building in structure.

It is also important to note that Columbia County has roughly six percent of our 65-plus population living in poverty, almost evenly divided between our male and female elders.

Individuals responding to our Aging Plan survey also told us clearly that they need assistance with no-cost or affordable home-based maintenance and care needs including raking, snow removal, repairs, etc. We see this as another opportunity to provide community awareness and foster community relationships through connecting those willing and able to help with those that are in most need of the assistance.

Ages 65 and Older, Living Alone	Columbia County
Persons 65+	9,968
Persons 65+ living alone	2,961
<i>Persons, % living alone</i>	29.7%
Males age 65+	4,651
Males age 65+ living alone	975
<i>Males, % living alone</i>	21.0%
Females age 65+	5,317
Females age 65+ living alone	1,986
<i>Females, % living alone</i>	37.4%
<small>Source: U.S. Bureau of the Census, American Community Survey, 2015-19 Five-year Estimates, Tables B01001 and B09020, 1/2021</small>	

Poverty by Sex, Ages 65 and Older*	Columbia County
Males age 65+	4,539
65+ Males in Poverty	255
<i>% of 65+ males in poverty</i>	5.6%
Females age 65+	5,142
65+ Females in Poverty	338
<i>% of 65+ females in poverty</i>	6.6%
Persons age 65+	9,681
Persons 65+ in poverty	593
<i>% of persons 65+ in poverty</i>	6.1%
*Note: Totals for this table only include persons for whom poverty status can be determined.	
Source: U.S. Bureau of the Census, American Community Survey, 2015-19 Five-year Estimates, Table B17001, 1/2021	

The 2022-2024 Aging Plan is required to include mechanisms by which to acknowledge racial and health equity while working on ways to assure our services are available to all of our older adult residents. We hope to accomplish this through outreach to key leaders in specific communities in order to foster relationships and trust to better serve those we are not currently reaching.

Columbia County is primarily a white community, with 97.7 percent of our residents identifying as such. With that said, we are accountable for being a safe and trusted source of information and services for all of our older adults choosing to reside here.

Population by Race and Ethnicity, <u>July 2019</u>	Columbia County
Total - All Ages: Total Population	57,532
65+ All Races and Hispanic Ethnicity	10,579
<i>% of Total Population that is 65+</i>	18.4%
<i>% of 65+ that is All Races and Hispanic Ethnicity</i>	100.0%
Total - All Ages: White/Caucasian Alone, not Hispanic	53,087
65+ White/Caucasian	10,333
<i>% of White/Caucasian pop that is 65+</i>	19.5%
<i>% of 65+ that is White/Caucasian</i>	97.7%
Total - All Ages: Black/African American Alone, not Hispanic	927
65+ Black/African American	41
<i>% of Black/African American pop that is 65+</i>	4.4%
<i>% of 65+ that is Black/African American</i>	0.4%

Total - All Ages: Native American/Alaska Native Alone, not Hispanic	318
65+ Native American/Alaska Native	32
<i>% of Native American/Alaska Native pop that is 65+</i>	10.1%
<i>% of 65+ that is Native American/Alaska Native</i>	0.3%
Total - All Ages: Asian Alone, not Hispanic	423
65+ Asian	56
<i>% of Asian pop that is 65+</i>	13.2%
<i>% of 65+ that is Asian</i>	0.5%
Total - All Ages: Hawaiian/Pacific Islander Alone, not Hispanic	35
65+ Hawaiian/Pacific Islander	3
<i>% of Hawaiian/Pacific Islander pop that is 65+</i>	8.6%
<i>% of 65+ that is Hawaiian/Pacific Islander</i>	0.0%
Total - All Ages: Two or More Races, not Hispanic	641
65+ Two or More Races	32
<i>% of Two or More Races pop that is 65+</i>	5.0%
<i>% of 65+ that is Two or More Races</i>	0.3%
Total - All Ages: Hispanic/Latino (may be any race)	2,101
65+ with Ethnicity Hispanic/Latino	82
<i>% of Ethnicity Hispanic/Latino pop that is 65+</i>	3.9%
<i>% of 65+ with Ethnicity Hispanic/Latino</i>	0.8%
<i>Source: U.S. Bureau of the Census, Annual Population Estimates, July 2019 released Summer 2020, 1/2021</i>	

Community Involvement in the Development of the Aging Plan

2022-2024 Aging Plan community input was discussed at each of the meetings and dates that follow. In addition to these discussions, surveys were provided to each participant/member and members were also asked to assist with community engagement efforts.

- The Ride Improvement Project committee Meetings: April 20th and July 20th
- Health and Human Service Board Meetings: April 14th , May 12th, June 7th
- Aging and Disability Resource Center Board Meetings: May 20th and July 15th
- ADRC Transportation Driver Meeting: April 16th
- Nutrition Advisory Council Meetings: May 11th and August 10th
- Nutrition Program Site Manager Meetings: May 4th and July 13th
- Columbia County Vaccine Clinics: April 15th and April 29th

The Aging and Disability decided to not hold public forums during the community engagement period due to continued health and safety concerns related to the pandemic. We utilized surveys, which were widely distributed across the county via direct mailings as well as public postings on our Facebook page and website. Detailed survey results are included in the attached Community Engagement Report.

Public Hearing Requirements

The Public Hearing Report is attached.

2022-2024 Aging Plan Goals

Focus area: IIIB-Supportive Services		Due Date
Goal statement: Create a volunteer registry that consumers can easily access to assist with home-based chores and maintenance needs.		06/23
<p>Plan for measuring overall goal success – <i>How will you know that you have achieved the results you want? Use data.</i></p> <p>Implementation of a volunteer and low-cost resource listing will be added to our Resource Guide and included into our outreach presentation materials.</p> <p>Review of unmet needs data to assess for improvement.</p>		
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)	Due Date
Strategy 1: Research viability and identify current strengths and barriers.		
Action step: Meet with Corporation Counsel to address liability concerns.	Meeting completed	04/22
Action step: Arrange a meeting with Sauk County ADRC to better understand how they manage their community-based volunteer registry.	Meeting completed	03/22
Action step:		
Strategy 2: Develop a volunteer registry of at least 10 volunteers.		
Action step: Conduct person-to-person conversations with at least two local high schools to identify opportunities for partnerships.	2 meetings completed	09/22
Action step: Conduct a meeting with at least one service club within at least three communities to discuss partnerships.	3 meetings completed	10/22
Action step: Develop a community-based recruitment and outreach plan utilizing social media, letters to businesses, etc.	Volunteer Recruitment mechanisms advertised to public	12/22
Strategy 3: Implement Go-Live		
Action step: Develop registry using our current online ADRC Resource Guide.	Resource Guide updated	02/23
Action step: Advertise and Promote registry to consumers	Facebook posts, Website updated and staff educated.	03/23

Annual progress notes

Focus area: IIC Nutrition/Person-Centered Services & Community Engagement		Due Date
Goal statement: Improve Congregate Participation through increased consumer-driven initiatives		06/23
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. We will evidence improved congregate utilization in at least two of our site locations by end of the three-year aging plan.		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Research alternative models that might better suit certain communities		
Action step: Involve current participants, Nutrition Advisory Council and board to get input.	In-person forum held at each congregate location	03/22
Action step: Meet with community leaders in struggling locations to better ascertain needs and wants of their older adults and analyze options	Meetings held in 2 communities	03/22
Action step: Identify 1-2 potential vendors, obtain price quotes and work with fiscal to review feasibility.	Quotes obtained	05/22
Strategy 2: Support enhancing social activities to draw additional participants to partake in a congregate meal setting.		
Action step: Identify community partners willing to sponsor/host activities	3 partners confirmed	05/22
Action step: Develop activity cadence for at least 2 nutrition program locations	Schedule developed for 2 locations evidencing regular activity cadence	06/22
Action step: Gather satisfaction data and participant input annually through either public forum or survey format.	Surveys administered	12/22, 12/23
Strategy 3: Increase outreach to underserved populations		
Action step: Review SAMS data for a better understanding of who is utilizing nutrition services and determine population(s) not participating in Nutrition Services.	Understanding of data completed and in hand	09/22
Action step: Identify community partners such as the faith community in helping us reach underserved populations to increase their input.	At least 2 partners have been identified	12/22

Action step: Use input received to help develop a more culturally appropriate and effective marketing strategy.	New marketing strategy developed and shared with community leader partners	04/23
Annual progress notes		

Focus area: III-C Nutrition/Community Engagement		Due Date
Goal statement: Expand opportunities for socialization as requested by our community		12/22
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. We will have offered at least one social activity per month at two of our nutrition sites by the end of the goal period.		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Collaborate with local organizations to sponsor social activities		06/22
Action step: Communicate an offer to all providers within a designated category to sponsor an activity at a congregate location.	Written communication mailed	03/22
Action step: Make direct calls to at least 4 of said providers to make person-to-person contact to discuss sponsoring an activity.	Calls completed with commitment from at least three organizations	04/22
Action step: Make direct calls to at least 3 community service organization to discuss sponsoring a social activity at a congregate location.	Calls completed with commitment secured from at least one organization	05/22
Strategy 2: Involve congregate consumers to improve consumer voice in the services offered to them.		05/22
Action step: Invite congregate participants to provide feedback held during the congregate meal time.	Will have met with each congregate location in Quarter one of 2022	04/22
Action step: Analyze feedback to develop priority areas based on consumer input.	Feedback received with input summarized	04/22
Action step: Reach out to subject matter experts involved in those priority areas to garner support for offering an activity on said priority.	Activity scheduled in at least one area identified by congregate consumers	05/22
Strategy 3: Develop implementation plan.		08/22
Action step: Engage site locations to assure information sharing and agreement with additional activities if it will extend the time congregate will be using the space.	Meetings held with site managers and property managers where applicable	08/22

Action step: Assure well-thought plan for who will “host”, make sure set-up is arranged as well as clean-up and securing of site location at the end.	Written procedure/plan communicated to each location	08/22
Action step: Query participants to obtain consumer input on satisfaction and additional ideas.	Surveys or in-person forum completed to measure satisfaction	12/23
Annual progress notes		

Focus area: IID Health Promotion		Due Date
Goal statement: Reduce health effects of loneliness in older adults		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. A pre-and post-program questionnaire will be administered to measure that participants felt a higher level of connection following participation in a phone companion program.		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Explore options of administering a phone companion program		
Action step: Investigate funding options available		09/22
Action step: Meet with community partners to explore collaboration to administer program	Meetings held with at 2-3 local partners	10/22
Action step: Research staff time needed to administer screening phone volunteers and participants, matching volunteers and participants	Data collected on intensity of program oversight	10/22
Strategy 2: Recruit Phone Companion Volunteers		
Action step: Schedule meetings with service clubs, churches and high school guidance counselors.	Meetings held with at least 3 community entities.	01/23
Action step: Meet with UW-Extension to explore partnership	Meeting held	11/22
Action step: Develop strategy of matching volunteers and participants	Plan developed with community partners identifying roles and responsibilities	03/23
Strategy 3: Implement Phone Companion program.		
Action step: Identify participants initially through existing programs and matching companions	A set number of participants, to be determined, will be identified.	05/23

Action step: Administer pre-match questionnaire	Questionnaire completed by each participant and volunteer	06/23
Action step: Administer 6 or 12-month post-match questionnaire	Completed by each participant and volunteer	12/23
Annual progress notes		

Focus area: IID Health Promotion		Due Date
Goal statement: Offer additional preventative health programs designed to meet the needs of our specific community		12/23
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Recruited at least two volunteer co-leaders Expanded offerings to four per year		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Recruit volunteer co-leaders		
Action step: Approach past co-leaders for recommendations	Contact made with 2 past co-leaders	08/22
Action step: Ask ADRC board and staff for recommendations	Request for recommendations completed	08/22
Action step: Ask prior participants who successfully completed one our evidence-based programs to consider being trained as a co-leader	Contact made with 2-3 past participants	08/22
Strategy 2: Analyze past SAMS data to determine who has and hasn't utilized evidence-based health promotion classes		
Action step: Identify leaders in populations who have not utilized past evidence-based classes.	Will have secured 1-2 individuals with whom we can make contact	08/22
Action step: Meet with identified leaders to discuss needs of their community	Meetings held with 1-2 identified community leaders	02/23
Action step: Make request to identified leaders to identify an individual who may be interested in being trained to co-lead	Will have made personal request to identified individual	02/23
Strategy 3: Implement annual plan for preventative health programming		
Action step: Identify all available leaders for classes	Make a list of leaders trained in which classes	04/23

Action step: Develop plan annually for classes, leaders and locations	Plan developed with staff and leaders	04/23
Action step: Review SAMS data to analyze for improvements in utilization by currently underserved populations	Analyze data after each class and compare with baseline/prior years.	12/23
Annual progress notes		

Focus area: 111E National Family Caregiver Support/Equity		Due Date
Goal statement: Improve access to caregiver supports for underserved populations in Columbia County		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Analyze pre- and post- demographic data to measure for increased participation in currently underserved populations.		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Analyze current data to direct action steps		
Action step: Review SAMS data on who is using our NFSCP funds	Data summarized and understood	09/22
Action step: Meet with UW Extension to analyze their data to better guide next steps	Meeting completed	09/22
Action step:		
Strategy 2: Foster relationships with leaders in underserved populations		
Action step: Identify leaders in the underserved populations	At least 2 leaders identified	12/22
Action step: Schedule meetings with community leaders to converse about current barriers to program participation	Meetings held with identified community leaders	02/23
Action step: Review marketing materials to ensure cultural appropriateness and revise to increase representation and inclusion	Identified changes will have been to those particular materials	04/23
Strategy 3: Active recruitment of underserved populations		
Action step: Schedule outreach within underserved populations and distribute updated marketing materials	At least one outreach opportunity completed within an identified community	05/23

Action step: Analyze data to measure for increased utilization of services from diverse populations.	Review, summarize and understand data from baseline to 06/23 to 12/23	12/23
Action step: Follow-up with leaders in these communities	At least 2 meetings completed to share data and adjust	06/24
Annual progress notes		

Focus area: IIIE National Family Caregiver Support		Due Date
Goal statement: Decrease caregiver stress through improved accessibility to caregiving services		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Collect data from the participating supportive home care agencies on the number of applicants and number of successfully onboarded new staff.		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Engage respite providers in collaborating to expand pool of respite staff.	Written communication completed	03/22
Action step: Survey current contracted providers to assess for need of caregiving staff.	Contact made with each contracted provider	04/22
Action step: Connect with our contracted respite providers to engage in collaboration to increase pool of respite staff.	Commitment from at least 3 providers to collaborate	04/22
Action step:		
Strategy 2: Apply for a CORE Respite Grant		05/22
Action step: Develop a marketing/outreach plan with our respite providers to host a recruitment event in 3 communities in the county	Action plan completed	
Action step: Identify key areas to host recruitment events and secure locations.	Details confirmed	
Action step: Host 3 recruitment events with our collaborative partners.	Three events completed with our community partners	
Strategy 3:		
Action step:		

Action step:		
Action step:		
Annual progress notes		

Focus area: Advocacy		Due Date
Goal statement: Older adults will have access to training on Advocacy and will be provided opportunities to use those skills in action.		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data.		
At least 10 Columbia County older adults will have participated in advocacy training.		
At least 3 Columbia County older adults will have participated in advocacy events during years 2023 and 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 advocacy informational events/training opportunities in at least two communities in years 2023 and 2024.		
Action step: Collaborate with GWAAR and ADRC staff to identify trainers	Will have talked with Janet Zander	06/22
Action step: Schedule training events at two congregate nutrition sites	Schedule and marketing plan completed	10/22
Action step: Identify at least two community events in which an advocacy training seminar could be included	Participation secured with at least one event	06/23
Strategy 2: Provide advocacy education to older adults		
Action step: Include education on advocacy in each of our Grapevine newsletters	Staff assigned and articles published each edition from 09/23-12/24	12/24
Action step: Provide advocacy education and information to senior meal participants	Include an advocacy topic each year 2023 and 2024 to all HDM participants	12/24
Action step: Incorporate advocacy information at health fairs/community events	Participate in at least one community/health fair	12/23
Strategy 3: Identify older adults to participate in advocacy days		
Action step: Advertise advocacy opportunities throughout social media and newsletter outlets	Completed marketing each quarter in 2024	12/24

Action step: Identify specific individuals to participate in advocacy days and personally invite them to participate	Successful recruitment of 3 individuals each year of the aging plan	
Action step: Identify at least one HHS or ADRC board member to participate in each advocacy day opportunity.	Personal invites completed in January of each year	
Annual progress notes		

Coordination Between Title III and Title VI

There is no tribe located in Columbia County; however, we are aware that there could be tribal members residing in our county. We also acknowledge that we border Sauk County and the Ho-Chunk Nation. Continuous marketing of our services occurs throughout every year through our newsletter, our active Facebook account, our collaboration and interactions with professional partners and always looking for opportunities to participate, speak and share the many ways in which we can help our community. We also share referrals from our local tribal partners and work collaboratively to try to best meet the needs of tribal members.

Organization, Structure and Leadership of the Aging Unit

Primary Contact to Respond to Questions About the Aging Plan Template

Name: Sue Lynch

Title: Director

County: Columbia

Organizational Name: Aging and Disability Resource Center of Columbia County

Address: 111 East Mullett Street

City: Portage State:WI Zip Code: 53901

Email Address: sue.lynch@co.columbia.wi.us Sue.Lynch@columbiacountywi.gov

Phone #: 608-742-9706

Organizational Chart of the Aging Unit

Columbia County Department of Human Services Health and Human Board Heather Gove, Director		
ADRC BOARD, TRIP COUNCIL ↓ AGING & DISABILITY RESOURCE CENTER		
<u>SUE LYNCH</u> Director		
Vacant Brianne Williams (Assistant Director)		
Vanessa Chapman Madelyn Gilbertson (Transp Coord) Mary Dresen Thomas Brennan - 50% (Transp. Coord.) Trina Gaunt Kathleen Cummings (EBS) Shari Genrick (HPC) Sandy Kinder (Receptionist) Dana Luedeman Vacant (MOC) Melissa Smith - 20% (DTR) Eliza White Pentony Nichole Robarge (DBS)		
<u>APS</u> Sue Weaver (SW) Vacant Jenny Johnson (SW)	<u>I&A</u> David Davies (SW) Julie Duerst (SW) Serena Robson (I&A) Brianne Williams Dana Luedeman (I&A)	
<u>DRIVERS</u> Todd Anderson Steve Banks David Davis Richard Ferguson Michael Horkan Tom Lynch Bob Miller Becki Tomlinson	<u>DRIVERS</u> Val Nehls Phillip Rygiewicz Jerry Thompson Bill Tierney Jerry Traut Lenny Vander Werff Sue Wilz Ed Zydowsky Courtney McFarlane	<u>MEAL SITE MGRS</u> Joelle Arentson Robin Babcock Diane Curtis Beth Heiniger Sharon Lombardi Penney Melvin

Staff of the Aging Unit

Name: **Sue Lynch**

Job Title: ADRC of Columbia County/COA Director (Full Time-40 Hours/Week)

Telephone Number/email Address: 608-742-9706

~~Sue.Lynch@co.columbia.wi.us~~ Sue.Lynch@columbiacountywi.gov

Brief Description of Duties:

The Aging and Disability Resource Center Director position supervises, coordinates, plans, directs, and monitors the Aging and Disability Resource Center services and Aging programs in Columbia County in accordance with federal and state laws in conjunction with county policy. This work is performed under supervision of the Health and Human Services Director. Direct Supervision of the Information and Assistance Specialist, Adult Protective Services, Transportation Coordinator, Marketing/Outreach and general direction in all other areas of direct supervision of the Assistant Director.

Name: ~~Vacant~~ **Brianne Williams**

Job Title: ADRC of Columbia County Assistant Director/ Nutrition Director (Full Time- 40 Hours/ Week)

Telephone Number/email Address: 608-742-9246

Brianne.Williams@columbiacountywi.gov

Brief Description of Duties:

The Assistant Director of the Aging and Disability Resource Center position is a management position reporting to the Aging and Disability Resource Center Director. This position assists in empowering and supporting seniors, people with disabilities and their families to help them remain living in their own homes as long as possible. Assistant Director acts as the Nutrition Director and supervises ADRC staff including Nutrition/Prevention/Caregiver Support Staff, Meal Site Managers, Disability Benefit Specialist, Elder Benefit Specialist, Receptionist and Volunteer Program. The Assistant Director is the back up to the Director in all other areas.

Name: **Julie Duerst**

Job Title: Information and Assistance Specialist/Social Worker (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9208

~~Julie.Duerst@co.columbia.wi.us~~ Julie.Duerst@columbiacountywi.gov

Brief Description of Julie's Duties:

The Information and Assistance Specialist position provides the general public, and particularly older individuals and adults who have physical and/or intellectual/developmental disabilities with information about their options and assists them in connecting with community options both private and publicly funded. This position assists individuals in identifying needs, determining program eligibility through assessments and functional screens, serves as an advocate, provides decision support related to long term care needs and links individuals with services and resources so that

they may live with dignity, respect, health and purpose. This position raises community awareness of the Aging and Disability Resource Center through outreach activities. This position reports to the ADRC Director.

Name: **David Davies**

Job Title: Information and Assistance Specialist/Social Worker (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9242

David.Davies@co.columbia.wi.us – David.Davies@columbiacountywi.gov

Brief Description of David's Duties:

The Information and Assistance Specialist position provides the general public, and particularly older individuals and adults who have physical and/or intellectual/developmental disabilities with information about their options and assist them in connecting with community options both private and publicly funded. This position assists individuals in identifying needs, determining program eligibility through assessments and functional screens, serves as an advocate, provides decision support related to long term care needs and links individuals with services and resources so that they may live with dignity, respect, health and purpose. This position raises community awareness of the Aging and Disability Resource Center through outreach activities. This position reports to the ADRC Director.

Name: **Serena Robson**

Job Title: Information and Assistance Specialist (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9204-9205

Serena.Robson@co.columbia.wi.us – Serena.Robson@columbiacountywi.gov

Brief Description of Duties:

The Information and Assistance Specialist position provides the general public, and particularly older individuals and adults who have physical and/or intellectual/developmental disabilities with information about their options and assist them in connecting with community options both private and publicly funded. This position assists individuals in identifying needs, determining program eligibility through assessments and functional screens, serves as an advocate, provides decision support related to long term care needs and links individuals with services and resources so that they may live with dignity, respect, health and purpose. This position raises community awareness of the Aging and Disability Resource Center through outreach activities. This position reports to the ADRC Director.

Name: **Brianne Williams Dana Luedeman**

Job Title: Information and Assistance Specialist (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9205-9204

Brianne.Williams@co.columbia.wi.us – Dana.Luedeman@columbiacountywi.gov

Brief Description of Duties:

The Information and Assistance Specialist position provides the general public, and particularly older individuals and adults who have physical and/or intellectual/developmental disabilities with information about their options and assist them in connecting with community options both private and publicly funded. This position assists individuals in identifying needs, determining program eligibility through assessments and functional screens, serves as an advocate, provides decision support related to long term care needs and links individuals with services and resources so that they may live with dignity, respect, health and purpose. This position raises community awareness of the Aging and Disability Resource Center through outreach activities. This position reports to the ADRC Director.

Name: ~~Vacant~~ **Jenny Johnson**

Job Title: Adult Protective Services (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9288-9214

Jennifer.Johnson@columbiacountywi.gov

Brief Description of Duties:

Adults At Risk/Adult Protective Services (APS) position encompasses “core” services such as response and reporting of alleged abuse, neglect or exploitation; short-term protective interventions, including petitioning for guardianship and protective placement when necessary; court-required reviews, including an annual review of court-ordered placements (i.e., Watts Reviews); and, if a Managed Care Organization participant refuses care management offered by the MCO. APS is a service mandated by the State.

Adult Protective Services are provided when a mandated reporter or another person in the community contacts the department with a concern for an elder or adult at risk. The department is responsible for determining the response to the referral and what, if any, services should be provided to protect the individual.

Name: **Sue Weaver**

Job Title: Adult Protective Services (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9239

Sue.Weaver@co.columbia.wi.us Sue.Weaver@columbiacountywi.gov

Brief Description of Sue’s Duties: Adults At Risk/Adult Protective Services (APS) position encompasses “core” services such as response and reporting of alleged abuse, neglect or exploitation; short-term protective interventions, including petitioning for guardianship and protective placement when necessary; court-required reviews, including an annual review of court-ordered placements (i.e., Watts Reviews); and, if a Managed Care Organization participant refuses care management offered by the MCO. APS is a service mandated by the State.

Adult Protective Services are provided when a mandated reporter or another person in the community contacts the department with a concern for an elder or adult at risk.

The department is responsible for determining the response to the referral and what, if any, services should be provided to protect the individual.

Name: ~~Eliza White-Pentony~~ **Nichole Robarge**

Job Title: Disability Benefit Specialist (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9200

Eliza.Pentony@co.columbia.wi.us Nichole.Robarge@columbiacountywi.gov

Brief Description of Duties:

This position is performed under the general direction of the ADRC Director/Assistant Director in close collaboration with the Disability Benefits Specialist (DBS) program attorney who provides substantive case oversight. The employee in this position provides benefits counseling and advocacy to adults between the ages of 18 and 59 who have a physical, developmental/intellectual disability, and/or mental illness, to assure that individuals in these target groups receive information about and assistance in, accessing public and private benefits, health care financing, and employment-related benefits such as Supplemental Security Income (SSI), SSI Disability Income, Medicare, Medicaid, unemployment compensation, and work-related health or disability insurance. This position is responsible for coordinating with other county, community and governmental agencies to assist individuals with disabilities to access resources and services to meet their needs.

Name: ~~Trina Gaunt~~ **Kathleen Cummings**

Job Title: Elder Benefit Specialist (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9210

Trina.Gaunt@co.columbia.wi.us Kathleen.Cummings@columbiacountywi.gov

Brief Description of Duties:

The Elder Benefit Specialist (EBS) position provides advocacy, assistance and education to Columbia County residents whom are 60 or older. The EBS is continually trained and monitored by attorneys knowledgeable in Elder Law and provide legal assistance under Title III-B. The EBS provides information about Medicare, Medicaid, Supplemental Health Insurance, Consumer Issues, Housing Issues, Food Share, Prescription Drug Programs and all other public assistance benefits. The EBS provides extensive outreach and enrollment for the Medicare Savings Programs, Low Income Subsidies, Senior Care and Medicare Part D in all areas of Columbia County. The EBS also provides education to all individuals about their Medicare covered Preventative and Wellness benefits to ensure our county residents live longer and healthier lives. The EBS can also provide individuals with assistance in understanding benefit denials and provide advocacy on their behalf if they've been wrongly denied by assisting with grievances and appeals.

Name: ~~Mary Dresen~~ **Thomas Brennan**

Job Title: Part-time Transportation Coordinator (18.75 Hours/Week)

Telephone Number/Email Address: 608-742-9217

Mary.Dresen@co.columbia.wi.us thomas.brennan@columbiacountywi.gov

Brief Description of Duties:

This position coordinates the Specialized Transportation Assistance Program which promotes the general public health and welfare by providing transportation services for elderly and disabled persons. With this position, consumers are able to have improved dignity and self-sufficiency by affording the benefits of transportation services to those people who would not otherwise have an available or accessible method of transportation.

Name: Melissa Smith

Job Title: 20 % Dietician Technician Registered (Part Time-7.5 Hours/Week)

Telephone Number/email Address: 608-742-9211-9258

Melissa.Smith@co.columbia.wi.us Melissa.Smith@columbiacountywi.gov

Brief Description of Melissa's Duties:

This is a professional position in the Public Health Classification under the general direction of the Assistant Director/Nutrition Director of the Senior Nutrition Program and under the general guidance of the Columbia County ADRC Director. This position performs basic nutrition assessments and education for at risk Elderly Nutrition Program participants.

Name: ~~Vanessa Chapman~~ Madelyn Gilbertson

Job Title: Transportation Coordinator/Mobility Manager (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9213

Vanessa.Chapman@co.columbia.wi.us madelyn.gilbertson@columbiacountywi.gov

Brief Description of Duties:

This position coordinates the Specialized Transportation Assistance Program which promotes the general public health and welfare by providing transportation services for elderly and disabled persons. With this position, consumers are able to have improved dignity and self-sufficiency by affording the benefits of transportation services to those people who would not otherwise have an available or accessible method of transportation.

Name: Shari Genrick

Job Title: Health and Human Services Aide and Family Caregiver Coordinator (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9219

Shari.Genrick@co.columbia.wi.us shari.genrick@columbiacountywi.gov

Brief Description of Duties:

This position assists in the coordination and support of the following programs under direct supervision of the Assistant Director/Nutrition Director and general supervision of the Director: The Alzheimer's Family Caregiver Support Program, National Family Caregiver Support Program, Title III-B chore services and the elderly nutrition program to include congregate and home-delivered meals. This position also takes an active role in the coordination of evidence-based prevention and early intervention activities.

Name: **Dana Luedeman** ~~Vacant~~

Job Title: Marketing/Outreach Coordinator (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9207

~~Dana.Luedeman@co.columbia.wi.us~~ Dana.Luedeman@columbiacountywi.gov

Brief Description of Duties:

This position is a skilled Marketing & Outreach position in the Aging and Disability Resource Center. This position provides leadership in developing, implementing and maintaining outreach strategies to inform the public and service providers about ADRC services. This position advocates for resource development in the community to address unmet needs of consumers. This position maintains an on-going process to determine consumer satisfaction with ADRC services. This position reports to the Aging and Disability Resource Center Director.

Name: **Sandy Kinder**

Job Title: ADRC Receptionist (Full Time-37.5 Hours/Week)

Telephone Number/email Address: 608-742-9233

~~Sandy.Kinder@co.columbia.wi.us~~ Sandy.Kinder@columbiacountywi.gov

Brief Description of Duties:

This position is a full-time position in the ADRC under the direct supervision of the ADRC Assistant Director and general supervision of the ADRC Director. This position performs a variety of moderately complex office procedures according to a prescribed practice and provides clerical support for a variety of specific duties as assigned for ADRC staff. This position acts as the receptionist and directs walk-ins and incoming calls to the appropriate ADRC staff as well as schedules of appointments for the foot clinic, and provides back up for the transportation coordinator.

Ageing Unit Coordination with ADRCs

Briefly describe the organizational arrangement that exists between the ageing unit and ADRC. Include an indication of whether the ageing unit is organizationally integrated with the ADRC or separate; whether the two are co-located; and whether the ageing unit and ADRC serve a single county or multiple counties.

Statutory Requirements for the Structure of the Ageing Unit

[Chapter 46.82 of the Wisconsin Statutes](#) sets certain legal requirements for ageing units. Consider if the county or tribe is in compliance with the law. If the ageing unit is part of an ADRC the requirements of [46.82](#) 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.	YES
(3) A private, nonprofit corporation, as defined in s. 181.0103 (17).	
Organization of the Commission on Ageing: The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
For an ageing 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.	
For an ageing 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.	YES
For an ageing 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 Ageing Director: The law requires that the ageing unit have a full-time director as described below. Does the county have a full-time ageing director as required by law?	Circle One 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.

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

Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Eric Shimpach		x	2020
Barry Pufahl	x	x	2020
Tom Borgkvist	x	x	2018
Denise Brusveen		x	2020
Keith Miller	x	x	2018
Doug Richmond	x	x	2020
Tom Drury	x		
Jessica Smith, RN			
Dr. Daniel Gutman			

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.

Official Name of the County Aging Unit's Advisory Committee: Aging and Disability Resource Center Board

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: Tom Borgkvist	x	x	2020
Eric Shimpach		x	2020
Darlene Anderson-Prest	x		2019
Allan Baumgartner	x		2017
Danny Beard	x		2020
Shelby Carter	x		2019
Sarah Lochner			2020
Jolene Wheeler			2019
Rosemary Minnema	x		2021
Kayla Wolff			2021
Adaora Bilse			2021

Budget Summary

Submitted to Greater Wisconsin Agency on Agency Fiscal Department separately.

Verification of Intent

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
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Signature and Title of the Authorized County Board Representative	Date
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Compliance with Federal and State Laws and Regulations for 2022-2024

On behalf of the county, we certify

Aging and Disability Resource Center of Columbia County

(Give the full name of the county aging unit)

has reviewed the appendix to the county plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 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 Chairperson of the Commission on Aging	Date
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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 confidentiality of the individual's contributions.
- The applicant must assure that each service provider establishes appropriate procedures to safeguard and account for all contributions.
- The applicant must assure that each service provider considers and reports the contributions made by older people as program income. All program income must be used to expand the size or scope of the funded program that generated the income. Nutrition service providers must use all contributions to expand the nutrition services. Program income must be spent within the contract period that it is generated.

6. Confidentiality

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

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

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

7. Records and Reports

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

8. Licensure and Standards Requirements

- The applicant shall assure that where state or local public jurisdiction requires licensure for the provision of services, agencies providing services under the county/tribal or area plan shall be licensed or shall meet the requirements for licensure.

- The applicant is cognizant of and must agree to operate the program fully in conformance with all applicable state and local standards, including the fire, health, safety and sanitation standards, prescribed in law or regulation.

9. Civil Rights

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

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

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

11. Political Activity of Employees

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

12. Fair Labor Standards Act

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

13. Private Gain

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

14. Assessment and Examination of Records

- The applicant shall give the Federal agencies, State agencies and the Bureau of Aging and Disability Resources 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 low-income minority individuals and older individuals residing in rural areas);
- (III) older individuals with greatest social need (with particular attention to low-income 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 aging 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

Community Engagement Report

Complete one worksheet for each separate method used to elicit input from the community. i.e. 12 interviews conducted can be compiled on one sheet. At least two methods must be used.

Your County or Tribe: Columbia	Date/s of Event or Effort: April-June 2021
Target audience(s): Older adults, caregivers/family of older adults, professionals working with/representing older adults	Number of Participants/ Respondents 147 Respondents
Describe the method used including partners and outreach done to solicit responses: We utilized surveys to collect community input for the upcoming three-year Aging Plan. Surveys were done at our Health and Human Service COVID19 vaccine clinics, sent to our local hospitals and medical clinics, included in our April Grapevine Newsletter, provided to the senior apartment complexes in Portage, Poynette and Lodi, provided to all nutrition program participants and survey links were included on our website and Facebook page. Surveys were also handed out at May Health and Human Services board meetings, during the April The Ride Improvement Project meeting, Nutrition Advisory Council meeting, our transportation driver meeting and our nutrition site manager meeting.	
Describe how the information collected was used to develop the plan: It was decided that it was imperative to use the community feedback to frame as much of the Aging Plan as possible with an emphasis on the need for affordable options for home-related needs, addressing both social isolation and loneliness, the need for increased social activities throughout the county and additional transportation options. Information from the surveys was tallied, analyzed and used as the emphasis of every goal development area.	
What were the key takeaways/findings from the outreach? We had 147 surveys completed. An email was sent from the Director to every respondent who included a name and email address offering an opportunity to discuss their feedback in more detail; no responses were received. Eight respondents identified themselves as caregivers. Sixteen indicated they were professionals working with/on behalf of older adults. Three marked "other" with the remaining 120 respondents identifying themselves as older adults.	

Four main themes presented in the survey responses in descending order:

- Affordable Housing
- Alternative Transportation options
- Help with Medicare and Prescription Drug Choices
- Social Isolation and Loneliness
- Help with Home repairs/seasonal home maintenance

The additional comments provided also supported these themes and can be summarized as follows:

- More social activities geared toward older adults
- Needing a listing of volunteers and/or low-cost options for home-related needs such as maintenance, yard work, etc.
- Increased transportation availability to include rides to non-medical social activities and connecting older adults and youth

