

**Columbia County Aging Plan
and
Required Documents
FY 2025–2027**

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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.

Wisconsin Counties are responsible for the development of a three-year aging plan. These plans not only direct the work of the Older Americans Act (OAA) programs of the county but assist the Area Agencies on Aging (AAA) and the Bureau of Aging and Disability Resources in developing our state plan to be submitted to the federal government. The three-year aging plans are inclusive of the programs funded by the Older Americans Act and are developed based on the input of our county older adults, their supports and professionals also serving seniors.

Columbia County began the process of collecting input and feedback for the 2025-2027 plan in the spring of 2024. Data Collection was primarily conducted via surveys, which were widely promoted through a variety of channels throughout the county. Feedback was also collected through in-person meetings where older adults and those serving older adults were located. We also engaged in personalized and more informal conversations with older adults.

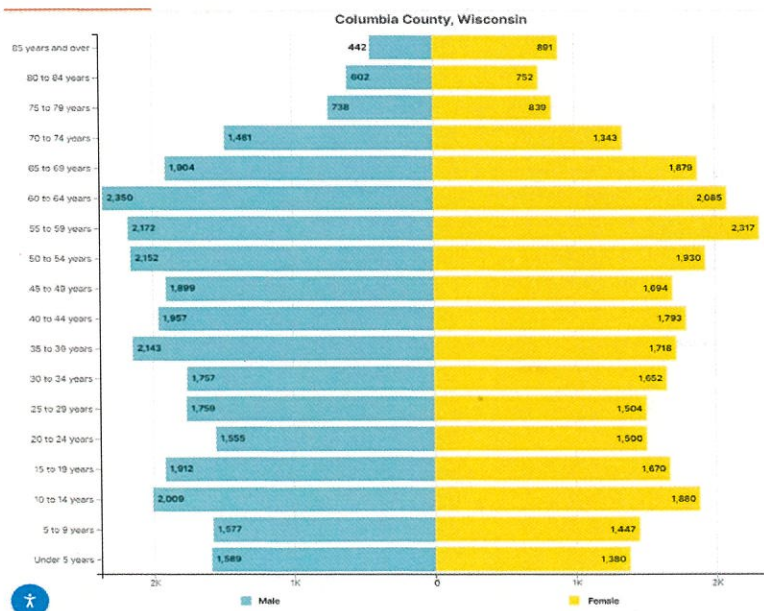
The information we learned through these methods did not evidence clear themes and represented voices who were satisfied with most parts of their lives and the services provided by the ADRC. Despite this, there are definitely data points to guide our work over the next three-year period.

Social isolation and loneliness have reached epidemic levels. Research has revealed that prolonged isolation contributes to mortality as much as smoking 15 cigarettes a day. Columbia County has seen a rise in the number of deaths by suicide in the older adult population. In fact, more than half of the deaths by suicide in our county in 2023 were people over the age of 60. Survey respondents indicated that access to social and recreational opportunities were important, and more than half said they socialize with family and friends often/very often. Close to half of the respondents indicated they were lonely/very lonely, and the other half endorsed not feeling lonely.

We know that addressing social isolation and loneliness needs to be a priority over the next three years. Columbia County Aging program staff are not trained and licensed mental health professionals, but there are areas of this epidemic we can affect. We will continue to examine where and what the ADRC staff can do to positively affect this epidemic through the programs and services we provide. We will also continue to discuss current data and county relevant facts with both older adults who are our experts, and also our professional partners. This is another area that the adage "it takes a village" is extremely relevant.

We also know through our work with older people, and with the comments provided by our respondents, that our residents continue to want opportunities for exercise, for building muscle and strength and reducing falls, for opportunities to gather together and that there continues to be need with housekeeping and outdoor upkeep in particular. While we hear and see these needs, there were multiple incidents of canceling health classes or other communal events over the course of the prior three-year plan. Relying on the knowledge and experiences of our customers will be incredibly important in understanding how we can better meet what is wanted and needed.

Twelve thousand people turn 65 each day in the United States. Columbia County's largest population is the 55-59 female age group and the 60-64 male group. Demand for services like home-delivered meals and homemaker services exceed funding, in Columbia County and nationally. COVID-19 relief funding for OAA programs will end before this three-year plan expires. How well we flourish as we age in Columbia County will be impacted by the inclusion and engagement with our experts—older people. The experiences and knowledge we gain over time equips us to think creatively and propel new ideas. We will continue to use our resourcefulness to help position our agency to meet the upcoming landscape with energy and vigor.



Context

Columbia County is located centrally in southern WI. According to the US Bureau of Census, Columbia County has a population of 58,272 people of which 15,306 are aged 60 and older. This represents 26.3% of our total population. Of the 24,068 households in Columbia County, 44.2% of them include at least one person aged 60 or older and nearly 32.7% have at least one member aged 65 and older.

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Our older adult population, aged 60 and older, is expected to grow to account for approximately 31% of our total population by year 2040.

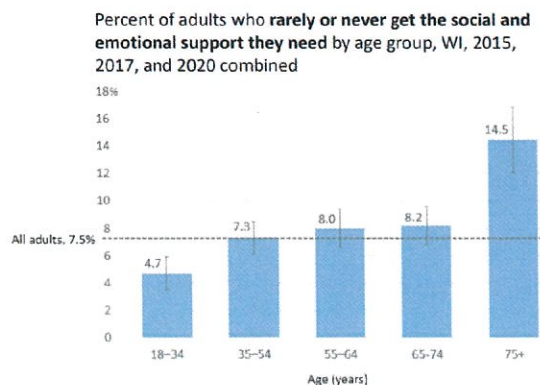
Age Group Estimates	Wisconsin	Columbia County
Total Population - All Ages, All Races	5,882,128	58,272
60+	1,449,786	15,306
65+	1,038,620	10,871
75+	420,624	4,264
85+	127,919	1,333
% 60+	24.6%	26.3%
% 65+	17.7%	18.7%
% 75+	7.2%	7.3%
% 85+	2.2%	2.3%
Males age 65+	478,089	5,167
<i>Males as percent of 65+ population</i>	46.0%	47.5%
Females age 65+	560,531	5,704
<i>Females as percent of 65+ population</i>	54.0%	52.5%
<small>Source: U.S. Bureau of the Census, American Community Survey, 2018-22 Five-year Estimates, Table B01001</small>		

Households with Older Members	Wisconsin	Columbia County
Total number of households	2,425,488	24,068
Households with one or more people 60 years and over:	990,971	10,635
<i>Percent with a member age 60+</i>	40.9%	44.2%
Households with one or more people 65 years and over:	736,807	7,872
<i>Percent with a member age 65+</i>	30.4%	32.7%
<small>Source: U.S. Bureau of the Census, American Community Survey, 2018-22 Five-year Estimates, Tables B11006 and B11007</small>		

Ages 65 and Older, Living Alone	Wisconsin	Columbia County
Persons 65+	1,038,620	10,871
Persons 65+ living alone	303,872	3,092
<i>Persons, % living alone</i>	29.3%	28.4%
Males age 65+	478,089	5,167
Males age 65+ living alone	98,547	918
<i>Males, % living alone</i>	20.6%	17.8%
Females age 65+	560,531	5,704
Females age 65+ living alone	205,325	2,174
<i>Females, % living alone</i>	36.6%	38.1%
<small>Source: U.S. Bureau of the Census, American Community Survey, 2018-22 Five-year Estimates, Tables B01001 and B09020</small>		

Columbia County has a total of 10,871 residents aged 65 and older, 28.4% of whom live alone. According to the National Institute on Aging (NIA), approximately 28% of older adults in the United States live alone. 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. Important to understand is that social isolation and loneliness are not the same. There can be people who are surrounded by family and friends reporting loneliness while others who are more socially isolated report not feeling lonely.

Adults ages 75 and older were the most likely to lack the social support they needed.



This data cannot be ignored. We have a responsibility to use our OAA programs as a way to recognize and assess for social isolation and loneliness, and then to respond to it. Our health promotion classes not only address the desire for more access to exercise and exercise activities, but also serve as meaningful sources of social connection. It is our goal to use this opportunity as one intervention to address this epidemic, but also as a mechanism to share additional resources geared towards combatting both social isolation and loneliness.

In addition to 28.4% of our population 65 and over living alone, Columbia County has nearly 8% of our 65-plus population living in poverty (\$15,000 or less annually). Columbia County females aged 65 have almost double the rate of poverty compared to men.

Ratio of Income to Poverty: Ages 65 and Older*	Wisconsin	Columbia County
Total, Age 65+	1,011,129	10,524
Age 65+ below poverty	82,301	817
<i>% of 65+ Pop below poverty</i>	8.1%	7.8%
Age 65+: 150% of poverty or less	152,812	1,555
<i>% of 65+ Pop: 150% of poverty or less</i>	15.1%	14.8%
Age 65+: 185% of poverty or less	217,160	2,361
<i>% of 65+ Pop: 185% of poverty or less</i>	21.5%	22.4%
Age 65+: 200% of poverty or less	255,295	2,758
<i>% of 65+ Pop: 200% of poverty or less</i>	25.2%	26.2%
Age 65+: 300% of poverty or less	434,957	4,495
<i>% of 65+ Pop: 300% of poverty or less</i>	43.0%	42.7%
*Note: Totals for this table only include persons for whom poverty status can be determined.		

This data brings us to another important area of importance—our Senior Nutrition Program, especially as it relates to our homebound and at-risk older adult residents. Meals on Wheels reports Wisconsin older adult residents living with marginal food security to be 10.7%, while 6% are low food insecure and 1.6% to be very low food secure. Wisconsin has 8.6% of the older adult population utilizing food assistance/SNAP benefits. Seniors eating less than 1 vegetable per day is 18.5% of our population and Seniors eating less than 1 fruit a day at 30.9%.

Columbia County residents 65 and older who are living with a disability is 27% of our county. U.S census data 2018-2022 asked question about specific disabilities. Each question is prefaced with “had serious difficulty.” The data included hearing difficulties (13.6%), cognitive difficulties (6%), vision difficulties (3.7%), difficulty with ambulation (15.2%), self-care difficulties (5.4%) and independent living difficulties (9%).

As we look at Columbia County statistics including our number of older adult residents, older adults living alone, older adults living in poverty and living with a disability combined with data about food insecurity, we clearly see that the demand for nutrition and socialization services are

only going to rise. As funding for these programs is not currently keeping pace with demand, it will be imperative for us to continue to draw on the experiences and expertise of our older adults to help educate our county representatives, as well as to continue to nurture public/private partnerships and grants to expand funding streams as indicated in our goals.

These key data points help illustrate our county's older adult population. There is work to do ahead and many opportunities for partnerships. A shared community-based response will be critical. We absolutely need the voices of older adults to help us navigate the road ahead and we fully commit to holding a listening session in two different parts of our county annually throughout the course of this plan.

Public Hearing Requirements

The Public Hearing Report is attached.

Columbia County Aging Plan Goals for 2025–2027

Older Americans Act program area (Select a program area if applicable.) <input type="checkbox"/> Title III-B Supportive Services <input type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program <input checked="" type="checkbox"/> Title III-D Evidence-Based Health Promotion <input type="checkbox"/> Title III-E Caregiver Supports
Aging Network value (Select a value if applicable.) <input checked="" type="checkbox"/> Person centeredness <input type="checkbox"/> Equity <input type="checkbox"/> Advocacy
Goal statement: In response to an increased rate of completed suicides amongst older adults in 2023 and 2024, Columbia County will work to improve the sense of belonging and mitigate the negative effects from social isolation and loneliness. We will utilize Evidence Based Health Promotion programs along with social isolation

and loneliness prevention initiatives to foster meaningful connections to enhance physical and mental wellness amongst older adults.

Plan or strategy:

- We will utilize components from Action Guide for Building Socially Connected Communities (Action4Connection) and the Wisconsin Coalition for Social Connection to build a framework for assessing, and responding to, social isolation and loneliness.
- We will work with existing resources for connectedness and customize it with local resources to build a plan specific to each customer's preferences.
- We will participate in the Wisconsin Coalition for Social Connection's awareness week in November annually.
- We will offer Stepping On and Mind over Matter twice each year.
- We will collaborate with UW-Extension to offer Strong Bodies twice each year.
- We will offer Walk with Ease twice each year.
- We will offer the opportunity to participate virtually in both Eat Smart, Move More, Weigh Less and Eat Smart, Move More, Prevent Diabetes.

Documenting efforts and tools:

Documenting **how much** has been done:

- We will record data obtained from listening sessions and report those findings at the ADRC and Health and Human Services Board meetings as well to our staff at those meetings and at our county coalition meetings.
- We will record the number of social isolation and loneliness screenings performed, the results of those screenings and referrals made.
- We will record the types and numbers of awareness efforts made through our various mechanisms including Facebook posts, ADRC website, flyers, placemats, newsletters, etc.
- We will add social isolation and loneliness screening questions to participant registration forms and evaluations for Evidence Based Health Promotion Programs.

Documenting **how well** it has been done:

- We will assess recruitment efforts for evidence-based classes and compare to prior year's numbers.
- We will evaluate facilitators at the conclusion of our programming.

Assessing whether anyone is **better off**:

- We will analyze data from our health promotion classes.
- We will offer the opportunity to provide feedback after receiving referrals/resources for those scoring high-risk through social isolation and loneliness screenings.

OPTIONAL: Notes on considerations for framing goals

1. Why are we choosing this thing to focus our efforts on?
 - Increased deaths by suicide in our county with little other focus on this age group locally.
2. Why do we believe this particular effort will make things better?
 - Our health-promotion classes are natural fits for increasing social connectedness (and the screening that precedes and follows).
3. How do we think this leads to people being better off?
 - Participating in health promotion classes not only helps people improve physical health, but introduces them to others often going through similar things and facilitates that connection between people, as well as having a trained facilitator/staff person to help make referrals, offer resources, etc.
4. How will we know that when we're done with this effort?
 - This isn't an effort that we see ending but instead becoming a part of this work.
5. How will we know whether anyone is better off because of this effort?
 - Feedback and input from our customers primarily but over time, we hope to hear this same feedback from our community partners and ultimately see few older adult deaths by suicide in our county.

Older Americans Act program area (Select a program area if applicable.)

☒ Title III-B Supportive Services

☐ Title III-C1 and/or III-C2 Nutrition Program

☐ Title III-D Evidence-Based Health Promotion

☐ Title III-E Caregiver Supports

Aging Network value (Select a value if applicable.)

☐ Person centeredness

☐ Equity

☒ Advocacy

Goal statement:

Columbia County uses its Title III-B Supportive Services funding to provide homemaker services to our customers. As costs for caregiving services continue to increase since the pandemic, so then has our actual cost of services. Higher costs per hour translates into fewer hours of service we can provide to clients. Columbia County will continue to provide as much service to people as we responsibly can with funding available.

Plan or strategy:

- We will continue to build provider networks to have a depth from which to choose providers to match with customers so that we can optimize lower cost options whenever possible.
- We will work with GWAAR on developing Wait List policies for OAA programs in addition to Nutrition Services.
- We will continue to share information about service numbers, availability/waitlist updates and OAA funding at all county board meetings and all ADRC coalition meetings to better inform our community on needs and funding and share opportunities for all to be advocates for older adults.
- We will continue to educate our customers on our costs and provide them the opportunity to contribute toward the cost for services provided.
- We will continue to share Wisconsin Aging Advocacy Network briefs and GWAAR advocacy updates with board and committee meetings, staff meetings, driver meetings, nutrition staff meetings and Nutrition Advisory Council meetings.

Documenting efforts and tools:

Documenting **how much** has been done:

- ADRC leadership will complete required paperwork and tracking for all new contracts and business associate agreements, which will also evidence the number of new partners and the affiliated fees for each.

Documenting **how well** it has been done:

- Providing customers with service without a lag due to a lack of providers will be a key indicator on how well we have done at fostering new/additional relationships.
- Not having to decrease the number of people served through IIIB Supportive Services because of rising costs of the service is another key performance indicator.
- Improving customer contributions is another way for us to know we are providing high quality services and that our education and outreach efforts are working.

Assessing whether anyone is **better off**:

- Utilizing all available 111B-Supportive Services funding, both in what is authorized and what is used by each customer will help evidence that our customers are better off.

OPTIONAL: Notes on considerations for framing goals

1. Why are we choosing this thing to focus our efforts on?
 - IIIB funding is typically expended each year and historically has had a waitlist.
2. Why do we believe this particular effort will make things better?
 - Our goal is to use all funding and to do that, we must have a provider pool in order to ensure access to services.
3. How do we think this leads to people being better off?
 - Having in-home supports that can help delay the need for out-of-home care not only is providing person-centered care but the ADRC having affordable resources allows us to spread our grant dollars to more being served.
4. How will we know that when we're done with this effort?
 - We don't see this work ever being done and thus the need for continuous provider recruitment. The more providers we have, the better positioned we are to negotiate rates with those coming in higher.
5. How will we know whether anyone is better off because of this effort?
 - Utilizing our dollars translates into care being provided. Providing the case management on a regular basis also helps us know and address any concerns earlier to maintain customer satisfaction and/or providing additional resources earlier.

<p>Older Americans Act program area (Select a program area if applicable.)</p> <p><input type="checkbox"/> Title III-B Supportive Services</p> <p><input checked="" type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program</p> <p><input type="checkbox"/> Title III-D Evidence-Based Health Promotion</p> <p><input type="checkbox"/> Title III-E Caregiver Supports</p>
<p>Aging Network value (Select a value if applicable.)</p> <p><input type="checkbox"/> Person centeredness</p> <p><input type="checkbox"/> Equity</p> <p><input checked="" type="checkbox"/> Advocacy</p>
<p>Goal statement:</p> <p>Columbia County will work to create a stable senior nutrition program that is able to withstand the ebb and flow of funding, staff, and volunteers to decrease impact felt by consumers.</p>
<p>Plan or strategy:</p> <ul style="list-style-type: none"> • Continue to successfully apply for and to additional funding sources and decrease sole reliance on OAA/government funds to prevent waitlists. • Utilize our current stream of volunteer recruitment lines while creating and nurturing additional public/private relationships and adding to our volunteer team. • Offer volunteer information at all Welcome to Medicare classes. • Continue to share stories at board meetings to help new and existing board members better understand the people we serve and the conditions in which many older adults live as one tool to help create tools to better attract and retain quality staff. • Offer a yearly Advocacy 101 including information on the legislative process to empower older adults so that they can effectively share their stories and advocate for services and programs important to them. • Identify state and local leaders and invite them to ride along on home-delivered meal routes.

Documenting efforts and tools:

Documenting **how much** has been done:

- Track the number of grant applications submitted and result of each.
- Track how we are recruiting meal delivery drivers including format, platform.
- Track which board we are sharing stories to and how many meetings stories are shared.
- Track advocacy events including quantity, number of attendees, cancelations.
- Track ride-along data.

Documenting **how well** it has been done:

- Document award dollars year after year.
- Track the number of successful volunteer recruitment events held and how many applications received as a result of each.
- Track successful volunteer applicants and length of service.
- Pre/Post surveys for Advocacy Training events
- Track the number of local leaders accepting/following through with ride along offers and documenting feedback.

Assessing whether anyone is **better off**:

- Right Meal For You Satisfaction Surveys
- Tracking number of placements of individuals receiving HDM services
- Waitlist prevention during 3-year period.
- Prevention of disruption of services within ENP due to lack of delivery drivers and/or dining center coordinators

<p>OPTIONAL: Notes on considerations for framing goals</p> <ol style="list-style-type: none"> 1. Why are we choosing this thing to focus our efforts on? <ul style="list-style-type: none"> • Numerous congregate disruptions due to lack of dining center staff as well as too much uncertainty and last-minute staffing maneuvers to assure at least HDM were provided. 2. Why do we believe this particular effort will make things better? <ul style="list-style-type: none"> • Our crew has been stable during the prior goal plan period, and we have had luck with recruiting volunteers and continuous efforts lagged. That coupled with an aging ENP crew, we need to focus on having depth to our resources and focus recruitment efforts to attract a wider array of volunteers and staff. 3. How do we think this leads to people being better off? <ul style="list-style-type: none"> • Preventing service disruptions will always assure people are better off. Attracting a wider variety in the types of people running our dining centers and delivering meals will help in creating a diversified workforce. 4. How will we know that when we're done with this effort? <ul style="list-style-type: none"> • We will build on success and try to anticipate needs and be ahead of major changes through ongoing efforts. 5. How will we know whether anyone is better off because of this effort? <ul style="list-style-type: none"> • Satisfaction surveys, both with Right Meal For You, but our annual satisfaction surveys and Rate Your Plate surveys all help create the evidence for a high-quality nutrition program. • Preventing service disruptions will mean we are more effectively meeting the social-emotional and nutritional needs of our older adults. • Creating a more diversified revenue portfolio will help prevent/delay waitlists amongst our growing aging population.
<p>Older Americans Act program area (Select a program area if applicable.)</p> <p><input type="checkbox"/> Title III-B Supportive Services</p> <p><input type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program</p> <p><input type="checkbox"/> Title III-D Evidence-Based Health Promotion</p> <p><input checked="" type="checkbox"/> Title III-E Caregiver Supports</p>
<p>Aging Network value (Select a value if applicable.)</p> <p><input type="checkbox"/> Person centeredness</p> <p><input type="checkbox"/> Equity</p>

☐ Advocacy

Goal statement:

We will fully utilize all funds received to administer caregiver respite services and help our community partners, caregivers and staff find their voice to share their stories.

Plan or strategy:

- Develop solid relationships with clinic managers/designees for each healthcare system represented in Columbia County.
- Establish a cadence to provide status updates on availability in NFCSP and AFCSP specifically.
- Offer to provide education to clinic staff at their meetings.
- Provide ongoing education on RCAW services, processes, and procedures at ADRC staff meetings so that all needed screening or exclusion criteria are addressed at initial intake increasing efficiency/decreasing lag time between exhaustion of caregiver dollars and referrals to other funding sources (RCAW grants).
- Continue to develop rich and powerful stories to share at ADRC and HHS board meetings, local committee meetings and with our state representatives (increasing quality of advocacy work being done).

Documenting efforts and tools:

Documenting **how much** has been done:

- Track outreach activities with special attention to healthcare entities.
- Track where caregiver respite referrals are coming from.
- Track referrals to RCAW services.

Documenting **how well** it has been done:

- Track cases where initial screening for RCAW respite grants was done vs not done and how many referrals to RCAW were delayed due to same.

- Establish baseline numbers and track where caregiver respite service referrals are coming from.

Assessing whether anyone is **better off**:

- Monitoring of NFCSP and AFCSP grant dollars and using that information to help increase referrals from hospitals and clinics.
- Monitoring timelines between referral to and enrollment with RCAW services.

OPTIONAL: Notes on considerations for framing goals

1. Why are we choosing this thing to focus our efforts on?
 - We have struggled to utilize our caregiver funding, initially due to lack of available caregiver providers/resources but also due to the AFCSP income limits. We are also seeing folks coming onto caregiver respite services too late, i.e., with placement or death happening within a short timeframe of receiving respite.
2. Why do we believe this particular effort will make things better?
 - We need to be more people and more people sooner in their caregiving journey. We know caregivers are residing here and it is critical that we reach them, they see us as trustworthy and qualified partners and we provided that much needed care management during their caregiving journey.
3. How do we think this leads to people being better off?
 - Providing allowable services under AF and NFCSP will impact that caregiving journey in some way. It may not solve all their needs or struggles, but the positive impact will become at least a small part of their caregiving story.
4. How will we know that when we're done with this effort?
 - We won't ever be done, but success is utilizing all available dollars. The next step is then how to help those when our funds are fully expended.
5. How will we know whether anyone is better off because of this effort?
 - Allocated funds will be fully spent.

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Community Involvement in the Development of the Aging Plan

2025-2027 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 15th
- Health and Human Service Board Meetings: April 3rd
- Aging and Disability Resource Center Board Meetings: May 16th
- ADRC Transportation Driver Meeting: April 16th
- Nutrition Advisory Council Meetings: May 7th
- Nutrition Program Site Manager Meetings: May 21st
- APS I-Team: April 17th
- TRIAD: April 8th
- Caregiver Support Groups: April

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 via 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.

Columbia County ADRC will notify Tribal Elders that even without living within Tribal boundaries or service areas, there are comparable aging services available through our agency. As our services identify a Tribal member receiving services, and has the consent of that Tribal Elder, we will reach out to Tribal Aging Programs and to learn if there services the Tribal Elder would be eligible for from their program and to learn if there are ways to best serve the Tribal Elder. This communication and coordination ensure the Tribal Aging Program is aware that Tribal Elders not within their Tribal service area have been aware of Title VI services and eligibility.

Aging Unit Coordination with ADRCs

Our ADRC is inclusive of both Aging/Title III services and contractual ADRC services. This allows for streamlined services for those needing services and resources resulting in our ability to provide whole-person, person-centered care and a high-quality experience.

Emergency Preparedness

The input and support of our older adults was a large part of our success in efforts to provide continuity of services throughout the pandemic. The ADRC of Columbia County worked in tandem with our other Health and Human Services divisions including the Division of Health, Health and Human Services Boards, the full county board and all of our community partners to continue to minimize the impact to services to our citizens. Columbia County returned to the office within a very short time after the start of the pandemic. The ADRC developed a plan to keep staff and customers safe while still providing high-quality services and with our doors open. With the allowances made to our rules and regulations by our state and federal government, we discovered efficiencies that allowed for shorter turnaround times and faster access. Our partnerships with our dining center locations helped home-delivered meals to continue. We worked with our Division of Health in providing vaccine services to those who could not get to our building. We are continuing with those lessons learned and are expanding our knowledge and capabilities by partnering more closely with Columbia County Emergency Management and our Division of Health.

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@columbiacountywi.gov Phone #: 608-742-97

Organizational Chart of the Aging Unit

AGING & DISABILITY RESOURCE CENTER		
<u>SUE LYNCH</u> Director		
Banks, Steve - 50% (Transp. Coord/Receptionist) Craig, Amy Jane - (HPC) Cummings, Kathleen (EBS) Gilbertson, Madelyn (Transp Coord) Mueller, Nellie - 50% (DCS) Pertle, Katlyn (Market and Outreach Coordinator) Robarge, Nichole (DBS) Smit, Kennedy (ILSP Specialist LTE) Smith, Melissa - 20% (DTR) Warnke, Jennifer (Receptionist) Williams, Brianne (Assistant Director) NP		
<u>APS</u>	<u>I&A</u>	
Johnson, Jennifer (SW)	Davies, David (SW)	
Weaver, Sue (SW)	Duerst, Julie (SW)	
	Robson, Serena (I&A)	
	Savage, Dana (I&A)	
<u>DRIVERS</u>	<u>DRIVERS</u>	<u>MEAL SITE MGRS</u>
Anderson, Todd	Nelson, Paul	Colson, Elijah
Banks, Steve	Ranger, Francine	Heiniger, Beth
Bond, Mark	Rygiewicz, Phillip	Melvin, Penney
Davis, David	Thompson, Jerry	Tomlinson, Becki
Hosig, Richard	Tierney, Bill	Villwock, Patsy
Lynch, Tom	VanderWerff, Lenny	
Manthey, Russell	Wiltz, Sue	
Miller, Bob	Zydowsky, Ed	
Nehls, Val		

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@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: **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@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@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

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: Dana Savage

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

Telephone Number/email Address: 608-742-9205

dana.savage@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: Jennifer Johnson

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

Telephone Number/email Address: 608-742-9288

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@columbiacountywi.gov

Name: Nichole Robarge

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

Telephone Number/email Address: 608-742-9200

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: Kathleen Cummings

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

Telephone Number/email Address: 608-742-9210

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: Steve Banks

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

Telephone Number/Email Address: 608-742-9217

steve.banks@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

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: **Madelyn Gilbertson**

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

Telephone Number/email Address: 608-742-9213

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: **Amyjane Craig**

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

Telephone Number/email Address: 608-742-9219

amyjane.craig@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: **Katlyn Pertle**

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

Telephone Number/email Address: 608-742-9207

katlyn.pertle@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: Jennifer Warnke

Job Title: ADRC Receptionist (Full Time- 40 Hours/Week)

Telephone Number/email Address: 608-742-9233

jennifer.warnke@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.

Statutory Requirements for the Structure of the Aging Unit

[Chapter 46.82 of the Wisconsin Statutes](#) sets certain legal requirements for aging units. Consider if the county or tribe is in compliance with the law. If the aging unit is part of an ADRC the requirements of [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 Aging: The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
For an aging unit that is described in (1) or (2) above, organized as a committee of the county board of supervisors/tribal council, composed of supervisors and, advised by an advisory committee, appointed by the county board/tribal council. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.	
For an aging unit that is described in (1) or (2) above, composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	YES
For an aging unit that is described in (3) above, the board of directors of the private, nonprofit corporation. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	
Full-Time Aging Director: The law requires that the aging unit have a full-time director as described below. Does the county have a full-time aging director as required by law?	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 Advisory Committee: Aging and Disability Resource Center Board

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: Steve Balsiger		x	2022
Vice Chairperson: Susan Schweitzer		x	2024
Secretary: Vanessa Chapman			2023
Fred Kocher	x		2024
Ginny Miller	x		2024
Rosemary Minnema	x		2021
Connie Pease	x		2022
Jolene Wheeler			2019
Rita Woelffer Burmania			2024
Kayla Wolff			2021
Paul Zarnikow	x		2021

Budget Summary

	Title III Federal Contract Expenses	Other Federal Contract Expenses	Cash Match Expenses	Other Federal Expenses	Other State Expenses	Other Local Expenses	Program Income Expenses		Total Cash Expenses	In-Kind Match Allocations	Grand Total
Supportive Services	\$ 37,092.00	\$ 54,000.00	\$ 6,639.00	-	-	-	\$ 1,933.00		\$ 99,664.00	\$ 891.00	\$ 100,555.00
Congregate Nutrition Services	\$ 94,144.00	-	-	-	-	-	\$ 21,321.00		\$ 115,465.00	\$ 63,769.00	\$ 179,234.00
Home Delivered Nutrition Services	\$ 128,509.00	\$ 10,314.00	\$ 78,596.00	-	\$ 7,391.00	-	\$ 87,700.00		\$ 312,510.00	\$ 47,565.00	\$ 360,075.00
Health Promotion Services	\$ 4,619.00	\$ 2,500.00	\$ 1,500.00	-	-	-	\$ 193.00		\$ 8,812.00	-	\$ 8,812.00
Caregiver Services - 60+	\$ 25,544.00	\$ 15,000.00	\$ 7,545.00	-	-	-	\$ 761.00		\$ 48,850.00	-	\$ 48,850.00
Caregiver Services - Underage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	-	\$ -
Legal Services (EBS)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	-	\$ -
Alzheimer's Elder Abuse	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	-	\$ -
Grand Total	\$ 289,908.00	\$ 81,814.00	\$ 94,280.00	\$ -	\$ 28,071.00	\$ -	\$ 111,908.00		\$ 605,981.00	\$ 112,225.00	\$ 718,206.00

Assurances of Compliance with Federal and State Laws and Regulations

The assurances below often refer to requirements of area agencies on aging (AAAs) and is absent of references to aging units. Wisconsin's structure of AAAs and local county and tribal aging units differs from other states but is recognized in state statute 46.82 and by the federal Administration for Community Living. Therefore, AAAs and county and tribal aging units are required to provide assurances of compliance with federal and state laws in the delivery of Older Americans Act programs and supports.

The structure of AAAs in Wisconsin are as follows:

1. An agency designated as the AAA must subcontract with counties, tribal nations, or providers to carry out Older Americans Act programs. The AAA, in a binding contract with the state, and counties and tribal nations, in a binding contract with the AAA, must support and comply with 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 as updated in March 2024.
2. A county designated as the AAA must designate a department of local government as the aging unit. The AAA and the county aging unit are bound by a binding contract with the state and must support and comply with 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 as updated in March 2024.

AAAs and aging units are subject to the requirements in the Wisconsin Elders Act 235, often referenced in [Chapter 46.82](#) of Wisconsin Statutes. Please note: Chapter 46.82 has been updated to reflect changes in programs originally referenced in the Act when passed in 1991.

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

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

Use the template provided below and include as an appendix to the aging plan.

Compliance with Federal and State Laws and Regulations for 2025–2027

On behalf of the county or tribal nation, we certify

The Aging and Disability Resource Center of Columbia County

(Give the full name of the county or tribal aging unit)

has reviewed the appendix to the county or tribal aging plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 2025–2027. We assure that the activities identified in this plan will be carried out to the best of the ability of the county or tribal nation in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2025–2027.



10/14/24

Signature and Title of the Chairperson of the Commission on Aging

Date



10-31-2024

Signature and Title of the Authorized County or Tribal Board Representative

Date