

**ADRC of Oneida County
Aging Plan
and
Required Documents
FY 2022–2024**



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

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Executive Summary

The ADRC of Oneida County is the County Aging Unit as defined in Wisconsin §46.80. Within Oneida County, the ADRC is a unit of the Department of Social Services. The ADRC is an integrated Aging Unit and Aging and Disability Resource Center.

The mission of the ADRC is “To provide older adults and people with physical or intellectual/developmental disabilities the resources needed to live with dignity and security, and achieve maximum independence and quality of life. The goal of the ADRC is to empower individuals to make informed choices and to streamline access to the right and appropriate services and supports.”

The ADRC values self-determination, consumer choice, professionalism, and service to the community. We are committed to assuring older adults can remain independent in their setting of choice for as long as possible.

The ADRC of Oneida County provides a variety of services to the community, including:

- Home delivered meals
- On-site meals for older adults (“congregate dining”)
- Volunteer Escort Transportation
- Caregiver Respite programs
- Elder Benefits Specialist services
- Retired and Senior Volunteer Program
- Evidence-based health promotion programming
- Information and Assistance
- Disability Benefits Specialist services
- Multipurpose Senior Center activities
- Monthly community newsletter
- Monthly educational programs on Medicare and Advance Directives
- Beginning in 2022, Dementia Care Specialist services
- Access to Home and Community Based Services (Family Care/IRIS)

Community Input

Needs identified by the community for older adults include:

- More and better transportation options
- “Handyman” services
- Homemaker and chore services
- Socialization and combatting isolation
- Planning for older age and increased disability
- Greater access to services for caregivers
- More volunteer opportunities and use of volunteers to provide services

- Affordable and appropriate housing
- Caregivers
- Broadband and technical assistance to use computer technology
- Financial and legal planning
- Crisis planning and prevention

Challenges and Needs

Oneida County is a rural county with a relatively high mix of industries. Oneida County’s population has been in “natural decline” (fewer births than deaths) for the past few decades. Net in-migration has not compensated for the decline in births. The number of older adults continues to grow as a percentage of the population.

Natural Change and Net Migration, 2010-2018
Total Population: Gains, Losses



Forward Analytics: *Deconstructing Depopulation*, June 2020

Oneida County lacks an adequate workforce to meet the needs of the growing older adult population. This deficit is exacerbated by the rural nature of the county and long distances that must be traveled to deliver care and services to many older adults.

Unemployment in Oneida County is relatively low, with seasonal fluctuations. Many businesses report difficulty in finding workers. Home care companies routinely report that they have waiting lists for their services.

Oneida County remains a relatively popular area for retirement living. While retirees are obviously a welcome population both for cultural and economic reasons, many individuals who retire to the area do not adequately plan for the eventuality that they may no longer be able to provide for their own self-care, maintain their ability to drive, and even access needed health care services. Failure to plan for eventual debility in older age often results in frustration at lack of resources and forced moves out of the area so family can provide care and supervision.

Longpath Vision

Longpath thinking encourages combatting “short-termism” (or maximizing short-term gains today at the expense of future generations) by thinking and acting with future generations in mind (our great grandchildren’s great grandchildren).

It is the vision of the ADRC of Oneida County that older adults be as healthy and independent as possible for as long as possible. To that end, in the short-term, the ADRC will place greater emphasis and more resources on health promotion, nutrition education, mental health and physical activity in later life. We will work with the Department of Public Health and the YMCA to promote physical activity at all stages of life. We will work with the UW-Extension to expand health promotion programming. We will continue our work to be a Trauma-Informed agency and will work to educate our citizens about the long-term, intergenerational effects of trauma. We will collaborate with local agencies to reduce the occurrence of adverse childhood experiences, which we know can have negative effects on our physical and mental health as we age. In partnership with Public Health and the UW-Extension we will promote healthy eating at all ages.

Structure and Leadership

The ADRC of Oneida County merged with the Oneida County Department of Social Services at the beginning of calendar year 2021. Ongoing work to integrate the two departments includes reviewing and revising responsibilities and delivery of services. The Department of Social Services (DSS) is the Elder Abuse agency for the county. DSS also operates a Supportive Home Care program.

Joel Gottsacker, MSW, is the Aging Unit director (“ADRC Manager”). Joel has over 30 years’ experience working in aging services from community outreach to community based long term care services to administration.

The Aging Unit director reports to the Social Services director, Mary Rideout. Mary has 28 years’ experience in Oneida County government and has been Social Services director for eight years.

The policy making body of the Aging Unit is the ADRC Committee that is comprised of four elected county supervisors and five citizen members. The majority of committee

members are aged 60 or older. Steven Schreier is the Committee Chair. The ADRC does not have an advisory committee.

Context

In the most recent available estimates (American Community Survey data 2015-2019, compiled by Eric Grosso, DHS), Oneida County's age 60+ population is approximately 35% of the total population (12,500 individuals). If projections hold true, by 2040, over 39% of the population will be 60 or older. The oldest older adults (aged 85+) will comprise 6.5% of the population in 2040.

Oneida County, like many of the northern rural counties of Wisconsin, is experiencing net population loss over the years. This is "natural depopulation" resulting from more deaths than births or in-migration into the county. While the older adult population continues to grow in real numbers, the overall population continues to decline.

Oneida County's population is predominately white persons of European descent with 98.1% of the older adult population identifying as white. Oneida County is highly rural with three communities that are more densely populated: Rhinelander, Minocqua/Woodruff and Three Lakes. Higher density communities represent about 45% of Oneida County's population. The population declines in the colder-weather months as "snow birds" leave the area for warmer climates.

Social issues facing Oneida County include high use of illicit drugs (methamphetamine, heroin, fentanyl) resulting in disruption to families, increased criminality and incarceration, employment issues and child abuse. Oneida County has a relatively high rate of obesity, diabetes, and heart disease.

The COVID-19 pandemic has increased isolation for many, particularly older adults. The pandemic negatively affected caregivers, and their ability to have social connections. Many services for physical and/or mental health were missed or postponed. Though virtual services have been available for some, they may not be as effective as in-person visits.

Needs identified by the community for older adults include:

- More and better transportation options
- "Handyman" services
- Homemaker and chore services
- Socialization and combatting isolation
- Planning for older age and increased disability
- Greater access to services for caregivers
- More volunteer opportunities and use of volunteers to provide services
- Affordable and appropriate housing
- Caregivers
- Broadband and technical assistance to use computer technology
- Financial and legal planning
- Crisis planning and prevention

The aging network in Oneida County is comprised of a variety of agencies and programs that serve older adults. Included are the ADRC, Department of Social Services, The Human Service Center (mental health/AODA provider), Public Health, law enforcement, townships, Alzheimer's Association, UW-Extension, public libraries, Generations Community Center, YMCA, churches, hospital/health systems, nursing homes, community-based long-term care, hospice, private-duty home care, banks, and non-profit agencies like United Way and food pantries.

The aging network strives to maintain open communication to promote services available through the various members. As a county with a smaller population, most professionals in the aging network are familiar with each other and are comfortable making referrals and seeking assistance when necessary. The ADRC works to be a focal point for information and assistance for access to services for older adults.

The network holds inter-agency meetings in smaller groups in either a formal manner or on an ad-hoc basis when necessary to share information. Partner agencies make available resources with and through each other. For instance, the Rhinelander Public Library utilizes the home delivered meal program to deliver books to homebound elderly persons. The ADRC provides back-up Adult Protective Services to the Department of Social Services. The ADRC and Public Health partner to provide vaccine clinics. The ADRC, YMCA, and UW-Extension collaborate to provide health promotion programs. Multiple agencies and law enforcement collaborate to provide the Project Lifesaver program. These are just a few examples of how the aging network in Oneida County supports older adults and their families.

Community Involvement in the Development of the Aging Plan

Community Engagement Report

Your County or Tribe: Forest, Oneida & Vilas	Your Name and Email: Tammy Queen tqueen@co.forest.wi.us Sue Richmond surich@vilascountywi.gov Joel Gottsacker jgottsacker@co.oneida.wi.us
Community Engagement Activity: <input type="checkbox"/> Community Forum or Listening Session – virtual or in person <input checked="" type="checkbox"/> Focus Group Discussions – virtual or in person <input type="checkbox"/> Personal Interviews – by phone or in person <input type="checkbox"/> Facebook Live or Social Media Virtual Event <input type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): <hr/>	
Date/s of Event or Effort: April 27, 2021	Number of Participants or Respondents: 14
Key Issues Discussed: Forest, Oneida and Vilas counties did a joint virtual Community Engagement forum with professionals in various fields. The professionals were invited by our agencies. We worked with Terri Kolb, UW-Extension who facilitated the forum. The key issues discussed were: <ul style="list-style-type: none"> • Needing reliable transportation for older adults to medical appointments and social events. • More in-home providers and better wages to attract people to the field. • Assistance with chores around the house. • Medical providers that are trained in the special needs of seniors and dementia patients. • More facilities that provide memory care. • More affording housing for older adults. More supportive housing. • Getting information on resources to older adults before they are in a crisis. • Helping older adults navigate through crises. • Education on the importance of advance directives. • Some older adults do not have technology skills. We need to meet older adults where they are at and use media outlets that they are using, not what’s trending (e.g., Facebook may be the social media of choice in coming years for older adults). • Need better and more widely distributed broadband services so older adults can actually use technology if they have it. • Provide volunteer opportunities. Some ideas were RSVP and Senior Volunteer Medicare Patrol. 	

- Activities: place for seniors to sell/share crafts without having to pay for space. Dances, art and craft fairs, community gardens, transportation to events. Opportunities for Individuals to share their hobbies (“Community Share Center”).
- Older Adult “Statesman” training. Some feel legislators do not listen to constituents. Public never sees the results of advocacy efforts.
- Older adults feel that there are too many obstacles to access services.

Key Takeaways/Findings:

The individuals at the input session would like to see more services for caregivers; more healthcare availability and training to meet the needs of older adults, persons with disabilities, and individuals with dementia; more trainings on understanding legal documents. People would like to see more services to help older adults with shopping, home repairs, cleaning and opportunities for activities to avoid isolation. Community members would like more volunteer opportunities for older adults. Building a better volunteer network that may be able to offer services that County Aging Units cannot. Finally, transportation services need to be marketed better for everyone to know and providing transportation to community/social events.

Planned Response:

The County Aging Units will continue to advertise available services and programs to older adults and endeavor to include additional mechanisms. Some ideas include getting on local news programs (Newswatch 12 and Up North @ 4) and using social media platforms like Facebook.

We will advocate for funding to expand affordable housing options for older adults.

Aging Units will assist older adults to understand and access broadband services when and if they become available. Aging units will incorporate Sip and Swipe Café programming into community service availability.

Vilas and Forest County will consider applying for RSVP funds should a competition become available in those counties.

Aging units will continue to provide educational opportunities on advance directives.

Community Engagement Report

Your County or Tribe: Forest, Oneida & Vilas	Your Name and Email: Tammy Queen tqueen@co.forest.wi.us Sue Richmond surich@vilascountywi.gov Joel Gottsacker jgottsacker@co.oneida.wi.us
Community Engagement Activity: <input type="checkbox"/> Community Forum or Listening Session – virtual or in person <input type="checkbox"/> Focus Group Discussions – virtual or in person <input type="checkbox"/> Personal Interviews – by phone or in person <input type="checkbox"/> Facebook Live or Social Media Virtual Event <input checked="" type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): <hr style="width: 50%; margin-left: 0;"/>	
Date/s of Event or Effort: May 17, 2021	Number of Participants or Respondents: 8
Key Issues Discussed: Forest, Oneida and Vilas counties did a joint survey with professionals in various fields. The professionals were invited by our agencies. We worked with Terri Kolb, UW-Extension who facilitated the survey. The key issues identified were: <ul style="list-style-type: none"> • In home supports • Understanding public benefits • Technology/internet access • Retirement/Financial/Healthcare • Brain Health/Dementia • Transportation options • Medical Specialists in closer proximity 	
Key Takeaways/Findings: Survey respondents identified quality of life concerns for older adults including opportunities for education, recreation and exercise. Healthcare access was a concern mentioned by a number of respondents. Accessible transportation was mentioned several times. Lack of low-income housing is a concern.	

Planned Response:

The County Aging Units will continue to advertise available services and programs to older adults and endeavor to include additional mechanisms. Some ideas include getting on local news programs (Newswatch 12 and Up North @ 4) and using social media platforms like Facebook.

We will advocate for funding to expand affordable housing options for older adults.

Aging Units will assist older adults to understand and access broadband services when and if they become available. Aging units will incorporate Sip and Swipe Café programming into community service availability.

Vilas and Forest County will consider applying for RSVP funds should a competition become available in those counties.

Aging units will continue to provide educational opportunities on advance directives.

Community Engagement Report

Your County or Tribe: Oneida County	Your Name and Email: Joel Gottsacker jgottsacker@co.oneida.wi.us
Community Engagement Activity: <input type="checkbox"/> Community Forum or Listening Session – virtual or in person <input type="checkbox"/> Focus Group Discussions – virtual or in person <input type="checkbox"/> Personal Interviews – by phone or in person <input type="checkbox"/> Facebook Live or Social Media Virtual Event <input checked="" type="checkbox"/> Paper or Internet Survey <input type="checkbox"/> Other (please describe): <hr/>	
Date/s of Event or Effort: June 2021	Number of Participants or Respondents: 137
Key Issues Discussed: Home delivered meal participants were sent a survey requesting input on the types of services they desire and/or would like to see in Oneida County.	

Key Takeaways/Findings:

Survey respondents identified the following top needs:

- Help with home repairs and upkeep
- Transportation alternatives
- Help with social isolation
- Home health options
- Affordable housing options
- Ways to keep fit and healthy

Planned Response:

The County Aging Unit will continue to advertise available services and programs to older adults and endeavor to expand chore services in Oneida County.

The CAU will advocate for funding to expand affordable housing options for older adults. Transportation options will be addressed through the Oneida Vilas Transit Commission and ADRC Committee. The ADRC will investigate the feasibility of developing a Transportation Coordinating Committee to address transportation needs across the county.

The RSVP program will work to develop a “Kindness Calls” volunteer opportunity to address social isolation.

The ADRC will work with the UW-Extension and Wisconsin Healthy Institute on Aging to promote and deliver health promotion activities.

Public Hearing Requirements

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

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

Goals for the Plan Period

Focus area: Title III B Supportive Services	
Goal statement: To administer a homemaker/chore program to provide in-home support to older adults in Oneida County.	
Plan for measuring overall goal success – Provide homemaker/chore services to at least 10 residents by December 2024.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Develop budget.	
Action step: Determine available funding.	Budget will be developed and approved by Committee of Jurisdiction, County Board, and GWAAR.
Strategy 2: Develop policies and procedures to guide program.	
Action step: Write homemaker/chore handbook for use by staff.	Handbook will be written and presented to staff.
Strategy 3: Implement program for 2022 – 2024.	
Action step: Advertise program in monthly newsletter.	Write introductory article and publish in January 2022 newsletter.
Action step: Include program in resource guide and on ADRC website.	Update and publish resource guide and website
Annual progress notes	

Focus area: Title III C Nutrition and Consumer Choice	
Goal statement: Develop a My Meal My Way demonstration to increase consumer choice in the Elder Nutrition Program.	
Plan for measuring overall goal success – Increase congregate dining participation by 10% over 2019 by December 2024 (from 236 participants to 260) for the Rhinelander site.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Identify venue to provide My Meal My Way.	
Action step: Meet with vendor to discuss potential participation and menu.	Meetings with Lynn’s Catering will be held to discuss possibility of program and menu options.
Action step: Discuss program implementation with GWAAR nutrition rep.	Meet with Lori Fernandez to review program.
Strategy 2: Develop policies and procedures to guide program.	
Action step: Write policies and procedures to guide program.	Handbook will be written and presented to staff.
Strategy 3: Hire site manager.	
Action step: Advertise for site manager.	Publish job ads per HR protocol.
Action step: Interview, hire, and orient site manager.	Offer made and accepted.
Strategy 3: Advertise My Meal My Way option.	
Action Step: Write introductory article in monthly newsletter, update website, and issue press releases.	Publication announcing My Meal My Way
Strategy 4: Evaluate My Meal My Way	
Action Step: Determine number of new diners.	Use SAMS data to identify current and new diners

	participating in My Meal My Way.
Action Step: Survey diners as to their satisfaction with My Meal My Way.	Survey distributed and results compiled and reported.
Strategy 5: Investigate feasibility of expansion.	
Action Step: Calculate cost of My Meal My Way and compare to cost of traditional congregate dining program.	Cost comparison completed
Action Step: Calculate feasibility of continuing My meal my way and expansion.	Draft budget completed.
Annual progress notes	

Focus area: Title III D Health Promotion	
Goal statement: Develop a health promotion delivery system in order to provide consistent and ongoing health promotion offerings for Oneida County residents to increase participation by 10% over 2019 (from 85 participants to 94).	
Plan for measuring overall goal success – Provision of at least two Healthy Living series, one Stepping On class, one PALS class, and four Strong Bodies courses in each of the three year plan period.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Develop agreement with UW Extension to manage and deliver health promotion programming.	
Action step: Meet with UW Extension representatives to discuss details of agreement, including payment.	Meeting will result in framework for contract/agreement.
Action step: Draft agreement/contract for review by both parties.	Draft contract reviewed and approved by corporation counsels.
Action Step: Ratify agreement/contract.	Signatures of responsible parties obtained.
Strategy 2: Create health promotion programming work group for promotion of programs and expansion of opportunities.	

Action step: Invite providers for meeting to discuss strategies.	Strategies will be documented and a plan developed.
Action step: Workgroup will meet quarterly to review plan and hone strategies.	Documentation of meetings.
Strategy 3: Evaluate successes and failures of new delivery model.	
Action step: Review survey data provided by health promotion participants.	Compilation and comparison of surveys.
Annual progress notes	

Focus area: Title III E Family Caregiver Support	
Goal statement: Start and maintain a caregiver support group to meet monthly and serve 10 individuals over the triennium.	
Plan for measuring overall goal success – Average attendance of at least three individual caregivers at monthly meetings.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Recruit support group leader/champion.	
Action step: Advertise availability of leader/champion role to ADRC staff.	Documentation of advertisement.
Action step: Identify leader/champion.	Update job description to include support group leadership.
Action Step: Develop schedule of topics/presentations for support group.	List of monthly topics
Strategy 2: Implement support group.	
Action step: Schedule support group meetings on ADRC calendar.	Meetings are committed to the ADRC calendar

Action step: Advertise support group in monthly newsletter, on ADRC website, through public service announcements, and through direct mailings.	Publication and mailing.
Strategy 3: Evaluate support group and perceived efficacy by participants.	
Action step: Survey participants and review.	Compilation of survey
Annual progress notes	

Focus area: Community Engagement	
Goal statement: Include one article bi-monthly addressing Older Americans Act program areas and write one letter to the editor annually highlighting Older Americans Act Programs.	
Plan for measuring overall goal success – Publication of articles and letter.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Determine article topics.	
Action step: Commit topics to writing and develop a calendar.	Creation of list and calendar
Action step: Write articles for inclusion in newsletter.	Written articles
Action Step: Publish articles in newsletter.	Published articles
Strategy 2: Write letter to the editor for Older Americans month.	
Action step: Write a letter highlighting value of older adults and services available through the OAA.	Letter written and sent.
Strategy 3: Survey community on an annual basis as to their knowledge of, and preferences for, services to older adults.	
Action step: Develop or identify survey.	

Action step: Administer survey.	
Action step: Compile survey results and report to committee, community.	
Annual progress notes	

Focus area: Health Equity	
Goal statement: Identify or develop and deliver three (3) educational programs addressing the effects of unconscious bias in health care, social determinants of health outcomes, and the impacts of ethnicity and race in Alzheimer’s Disease to at least ten (10) persons per program to increase knowledge of health equity in Oneida County.	
Plan for measuring overall goal success – Delivery of programs with expected attendance.	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Identify content experts on unconscious bias in health care and provide at least one presentation.	
Action step: Engage with Nicolet College and Oneida County Public Health to help identify content experts and provide presentations.	Contact made by 12/31/2022, presentation completed by 12/31/2024.
Strategy 2: Provide information and training on the health impacts of Social Isolation and Loneliness to Oneida County Residents.	
Action step: Join the Coalition to end Social Isolation and Loneliness (DHS) to receive information on the coalitions work.	The ADRC will have at least one staff member as part of the coalition by 12/31/2022
Action step: Provide updates/information in the ADRC newsletter bi-annually on Social Isolation and Loneliness.	Six newsletter articles completed by 12/31/2024
Annual progress notes	

Focus area: Knowledge and Skills related to Advocacy	
Goal statement: Collaborate with the ADRC of Vilas County to provide Advocacy 101 training by December 2022 for at least ten (10) older adults and provide opportunities and resources to help them become effective advocates.	
Plan for measuring overall goal success –The number of trained advocates will be increased by at least 10 people	
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)
Strategy 1: Offer training on the legislative process to increase the effectiveness of advocates at the local level.	
Action step: Contact GWAAR to secure a trainer and schedule an Advocacy 101 training.	Training date established on calendar
Action step: Identify individuals who are interested in advocating for issues affecting older adults and adults with disabilities.	Recruit ten people to participate in the Advocacy 101 Training
Strategy 2: Identify opportunities for newly trained advocates to put their skills to work.	
Action step: Include advocacy information and resources in the Aging Unit Newsletter – legislator contact information, tips for meeting with your legislator, issue education	Aging Unit newsletter will contain an advocacy section
Action step: Notify advocates of talking points of issues at hand	Establish a mailing/emailing list of advocates
Action step: Create a “How To” tip sheet to aid individuals in advocacy efforts.	Tip sheet created
Strategy 3: To improve education and awareness of issues facing older adults and adults with disabilities have 2 individuals/board members along with one staff member to participate in the State Advocacy Day.	
Action step: Identify individuals interested in attending State Advocacy Day and help with registration if needed	Three individuals identified
Action step: Have attendees report to the ADRC Committee on their experience at the State Advocacy Day	Individuals attend meeting and give report
Annual progress notes	

Coordination Between Title III and Title VI

Not applicable.

Organization, Structure and Leadership of the Aging Unit

The Aging & Disability Resource Center (ADRC) of Oneida County is an integrated with the County Unit on Aging. The ADRC is a unit within the Department of Social Services. The ADRC has the ADRC Committee acting as the Commission on Aging and ADRC Policy Board. The ADRC Committee is comprised of four county supervisors and five citizen members. County supervisors may serve up to three two-year terms and citizen members may serve up to two three-year terms.

The Aging Director (ADRC Manager) is responsible for the Title III program areas as well as the Alzheimer's Family Caregiver Support Program under the direction of the DSS Director.

Primary Contact to Respond to Questions About the Aging Plan Template

Name: Joel Gottsacker

Title: ADRC Manager; Assistant Director, Department of Social Services

County: Oneida County

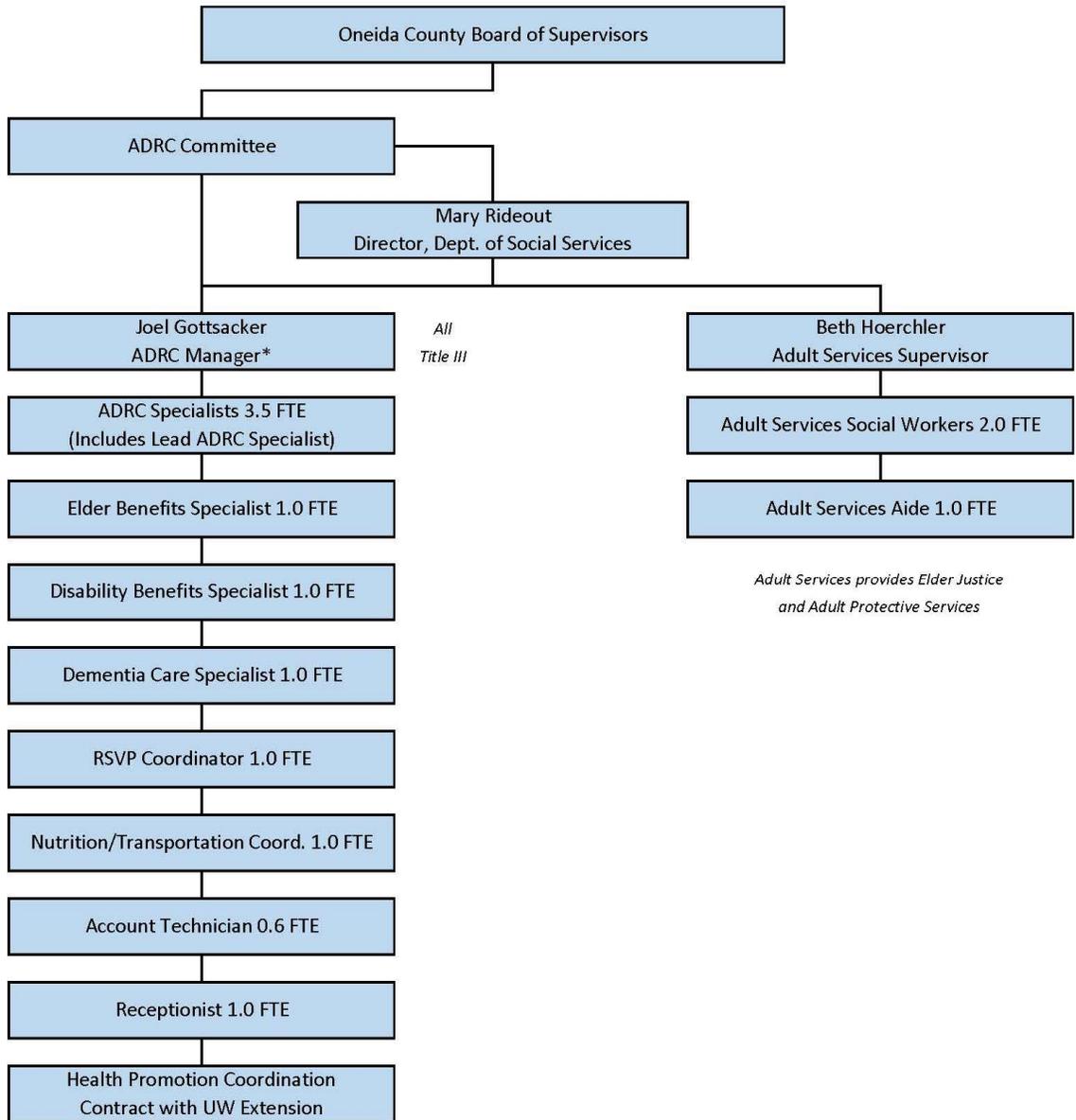
Organizational Name: ADRC of Oneida County

Address: 100 W. Keenan Street

City: Rhinelander State: WI Zip Code: 54501

Email Address: jgottsacker@co.oneida.wi.us Phone # 715-369-6305

ADRC of Oneida County
Organizational Chart



*Aging Unit/ADRC Director

Staff of the Aging Unit

<p>Name: Joel Gottsacker Job Title: ADRC Manager Telephone Number/email Address: 715-369-6305 jgottsacker@co.oneida.wi.us</p>
<p>Brief Description of Duties: Oversees the operations of the ADRC.</p>
<p>Name: Mary Rideout Job Title: Director, Department of Social Services Telephone Number/email Address: 715-362-5695 mary@dss.co.oneida.wi.us</p>
<p>Brief Description of Duties: Oversees the operations of the Department of Social Services and ADRC.</p>
<p>Name: Beth Hoerchler Job Title: Supervisor, Adult Services, Department of Social Services Telephone Number/email Address: 715-362-5695 beth@dss.co.oneida.wi.us</p>
<p>Brief Description of Duties: Oversees elder justice, adult protective services, guardianships and protective services.</p>
<p>Name: Heather Beach Job Title: Nutrition/Transportation Coordinator Telephone Number/email Address: 715-369-6302 hbeach@co.oneida.wi.us</p>
<p>Brief Description of Duties: Manages nutrition program to include new registrations, ordering of supplies, coordinating site managers, etc. Manages volunteer escort transportation program, secures drivers to provide rides to older adults for medical and nutrition purposes.</p>
<p>Name: Traci Caswell Job Title: Lead ADRC Specialist Telephone Number/email Address: 715-369-6274 tcaswell@co.oneida.wi.us</p>
<p>Brief Description of Duties: Provides information and assistance to Oneida County residents, acts as lead for family caregiver support programs.</p>
<p>Name: Maria Cox Job Title: Account Technician Telephone Number/email Address: 715-369-6303 mcox@co.oneida.wi.us</p>
<p>Brief Description of Duties: Oversees accounting of the ADRC.</p>
<p>Name: Jeff Dunbar Job Title: Social Worker Telephone Number/email Address: 715-362-5695 jeff@dss.co.oneida.wi.us</p>
<p>Brief Description of Duties: Provides APS and Elder Justice Services</p>
<p>Name: Elizabeth Erickson Job Title: Disability Benefits Specialist Telephone Number/email Address: 715-369-6278 eerickson@co.oneida.wi.us</p>

Brief Description of Duties: Provides assistance to Oneida County residents to navigate programs and services for persons with disabilities.
Name: Laura Javenkoski Job Title: ADRC Specialist Telephone Number/email Address: 715-369-6275 ljavenkoski@co.oneida.wi.us
Brief Description of Duties: Provides information and assistance to Oneida County residents, acts as lead for dementia care.
Name: Carrie Mikalauski Job Title: Adult Services Aide Telephone Number/email Address: 715-362-5695 carrie@dss.co.oneida.wi.us
Brief Description of Duties: Provides clerical and organizational support for Adult Protective Services workers.
Name: Jennifer Sackett Job Title: ADRC Specialist Telephone Number/email Address: 715-369-6276 jsackett@co.oneida.wi.us
Brief Description of Duties: Provides information and assistance to Oneida County residents, acts as lead for evidence-based programs.
Name: Kristen Schiek Job Title: Elder Benefits Specialist Telephone Number/email Address: 715-369-6306 kschiek@co.oneida.wi.us
Brief Description of Duties: Provides assistance to Oneida County residents to navigate programs and services for older adults.
Name: Shelley Steingraeber Job Title: Receptionist Telephone Number/email Address: 715-369-6170 ssteingrae@co.oneida.wi.us
Brief Description of Duties: Answers telephone and transfers callers, greets visitors
Name: Jean Sutherland-Kreger Job Title: Social Worker Telephone Number/email Address: 715-362-5695 jean@dss.co.oneida.wi.us
Brief Description of Duties: Provides APS and Elder Justice Services
Name: Vacant Job Title: Dementia Care Specialist Telephone Number/email Address:
Brief Description of Duties: Provides education to community and individuals on dementias, treatment, and options.

Aging Unit Coordination with ADRCs

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

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.	X
(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.	X
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 No

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: ADRC Committee

Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Steven Schreier		X	2018
Ted Cushing	X	X	2020
Russ Fisher		X	2020
Joan Hauer	X		2020
Rita Mahner	X		2021
Monica Pritchard	X		2021
Robert Thome, Jr.	X	X	2020
Nancy Watry	X		2019
James Unger	X		2021

Role of the Advisory Committee

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

Membership of the Advisory Committee

An aging advisory committee is required if the commission (policy-making body) does not follow the Elders Act requirements for elected officials, older adults, and terms, or if the commission is a committee of the county board (46.82 (4) (b) (1)). If the aging unit has an advisory committee, list the membership of the advisory committee using the template provided below and include in the body of the aging plan. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee. There are no term limit requirements on advisory committees.

Membership of the Advisory Committee Template

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

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: NA			

ADRC of Oneida County Budget Summary (2020 budget totals are used below)

	Title III Budget	Cash Match Budget	In-Kind Match Budget	Other Federal Budget	Other State Budget	Other Local Budget	Program Income	Total Budget
<p>Title III-B: Supportive Services Services funded include legal services, in-home services, administration, respite, transportation, health promotion, home safety and repair, and other services intended to keep older people living independently in the community.</p>	53,895	137,670					1,000	192,565
<p>Title III-C: Nutrition Services The purposes of the Elderly Nutrition Program are to reduce hunger and food insecurity, promote socialization of older individuals, and promote the health and well-being of older individuals. Services funded include congregate meals, home delivered meals, nutrition counseling, and nutrition education. Title III-C1 covers congregate meals. Title III-C2 covers home delivered meals</p>	178,515	7,331	104,258	33,562			137,000	460,666
<p>Title III-D: Disease Prevention & Health Promotion Services These funds must be spent on high-level evidence-based health promotion programs to improve health and well-being and reduce disease and injury.</p>	4,694	3,000						7,694
<p>Title III-E: National Family Caregiver Support Program Title III-E provides services for family and unpaid caregivers. Services funded include support groups, classes, information and assistance, respite, home care, assistive devices and other services and resources to help caregivers care for themselves and their loved ones.</p>	25,143	8,381						33,524
<p>Alzheimer's Family and Caregiver Support Program AFCSP funds are used to help individuals purchase goods and services related to caring for someone with Alzheimer's disease or other dementia. Funds can also be used to expand or develop new services related to Alzheimer's Disease as well as community outreach and education.</p>					21,998			21,998
<p>Elder Benefit Specialist Program This program provides broad access to public benefits, entitlements, and legal rights for older persons. Elder Benefit Specialists offer information, advice, and assistance to older adults related to public benefits and services, health care financing, insurance, housing, and other financial and consumer concerns.</p>		3,135		14,394	36,109	25,036	500	79,174
<p>State Senior Community Services This program provides state funds to supplement services funded with III-B, III-C, and III-D (except Administration).</p>		2,326			6,292			8,618

Verification of Intent

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

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

Verification of Intent Template

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

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

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

Steven Schreier, ADRC Committee Chair Date

David Hintz, Oneida County Board Chair Date

Assurances of Compliance with Federal and State Laws and Regulations

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

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

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

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

On behalf of the county, we certify

ADRC of Oneida County

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.

Steven Schreier, ADRC Committee Chair

Date

David Hintz, Oneida County Board Chair

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

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

Attach other documents that support the aging unit plan.