Greater Wisconsin Agency on Aging Resources
2019-2021 Plan on Aging
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1. Verification of Intent

This plan represents the intent of the Area Agency on Aging to assure that older people have the opportunity to realize their full potential and to participate in all areas of community life.

On behalf of the Greater Wisconsin Agency on Aging Resources, we certify that these organizations have reviewed the plan, and have authorized us to submit this plan which outlines activities to be undertaken on behalf of older people during 2019-2021.

We assure that the activities identified in this plan will be carried out to the best of the ability of the Area Agency on Aging.

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

Larry Jepsen, GWAAR Board Chairperson
12-7-18

Barbara Robinson, GWAAR Advisory Council Chairperson
11-30-18
2. Executive Summary

Readers of this plan will develop a clear view of the structure of the Greater Wisconsin Agency on Aging (GWAAR), the context in which it works, and its program goals over the next three years.

GWAAR is a catalyst for innovation and best practices through supportive relationships with our main customers, Wisconsin’s local aging units, which helps them achieve continuous program improvement at the local level. While requirements direct GWAAR to focus program goals around advocacy, elder nutrition, caregiver services, services for people with dementia, healthy aging, and elder justice, this plan goes beyond that. Local priorities are also noted, including goals around business development; communication with the aging network; the Elder Benefit Specialist Program; data reporting; transportation; self-directed volunteer teams; older adult isolation and loneliness; and trainings for Title III programs.

GWAAR’s Advisory Council is charged with the creation and oversight of this three-year plan, which was generated organically through a variety of channels. As part of the plan development, Advisory Council members conducted numerous face-to-face interviews of Aging Unit staff and community partners. Survey responses from Aging Unit directors also provided input on goal content, and GWAAR staff contributed insight to the process based on ongoing conversations and observations of aging programs under their authority. Lastly, GWAAR conducted two public hearings with aging units, seeking input and comments on plan goals.

With this plan, we recognize two long-time, actively involved Advisory Council members who will be leaving GWAAR after many years of service; Barbara Robinson, Council Chair from Brown County, Wisconsin, and Stan Hensley from Dunn County, Wisconsin. Barbara has spent her entire working career in the field of aging, working at local and state levels to improve programs and the lives of older persons in Wisconsin. She has always been a friend and advisor to me. Stan took his work on the council very seriously and he is a champion of GWAAR. He never let us forget about the older persons in rural Wisconsin who are caregivers or those being cared for, especially those affected by dementia. I am going to miss their thoughtful and lively
contributions at Council meetings and aging network trainings. Thank you, Barbara and Stan, for your years of advice.

3. Organization and Structure of the Area Agency on Aging

Section 3-A: Mission Statement & Description of the Area Agency on Aging

The Greater Wisconsin Agency on Aging Resources, Inc., is a nonprofit agency committed to supporting the successful delivery of aging programs and services in 70 counties and 11 tribes in Wisconsin. We provide lead aging agencies in our service area with training, technical assistance, and advocacy to ensure the availability and quality of programs and services to meet the changing needs of older people in Wisconsin.

The mission of the Greater Wisconsin Agency on Aging Resources is to deliver innovative support to lead aging agencies as we work together to promote, protect, and enhance the well-being of older people in Wisconsin.

Main Office:
1414 MacArthur Road, Suite A
Madison, WI 53714
P: 608-243-5670 | F: 866-813-0974

Brookfield Office:
125 N. Executive Drive, Suite 207
Brookfield, WI 53005
F: 262-785-2580

Green Bay Office:
201 West Walnut Street, Suite 204
Green Bay, WI 54303

Hours of Operation: Monday through Friday, 8:00 a.m. until 4:30 p.m.—except on the following holidays: New Year’s Day, Martin Luther King, Jr., Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, day after Thanksgiving, and Christmas. There is an answering machine available for messages after hours.

E-mail: info@gwaar.org

Website: www.gwaar.org
Section 3-B: Organizational Chart of the Area Agency on Aging

Greater Wisconsin Agency on Aging Resources’ Organizational Structure

Board of Directors (11 members)

- Executive Director (Advocacy Leader) (1 FTE)
  - Advisory Council (10 members)

Business Development Coordinator (1 FTE)
- Operations Coordinator (1 FTE)

Fiscal Manager (1 FTE)
- Personnel
- Finance
- IT

Accountant (1 FTE)

Older Americans Act Programs & Special Projects Manager (1 FTE)
- Older Americans Act (OAA) Dept.
  - OAA Consultants (7 FTE)
    - Nutrition
    - Designated leads for:
      - Data Management
      - Elder Abuse
      - Emergency Preparedness
      - Health Promotion
      - Legal Services
      - NFCSP/AFCS Programs
      - Senior Centers
      - Transportation
      - Volunteerism
    - WISE Program Coordinators (2 FTE)

- Special Projects Dept.
  - Communications Coordinator (1 FTE)
  - Special Project (1 FTE)
  - Medicare Outreach Specialist (1 FTE)
  - MIPPA/SHIP Outreach (1 FTE)
  - Veterans Services (3 FTE)

Legal Services Manager (1 FTE)
- Elder Law & Advocacy Center Dept.
  - Elder Benefit Specialist (3 FTE)
  - Supervising Attorneys
  - Guardianship Support (1 FTE)
  - Center Managing Attorney
  - Model Approaches to (1 FTE)
  - Legal Services Special Project
  - Legal Program Assistant (1 FTE)

Contracted Agency
- Great Lakes Inter-Tribal Council’s Tribal Technical Assistance Center

11/2018
Section 3-C: Statutory Requirements for Structure of Aging Units

This section is only required for an Area Agency on Aging that also serves as a county aging unit.

Section 3-D: Membership of the Board of Directors/Policy-Making Body

This requirement only applies for an Area Agency on Aging that also serves as a county aging unit.

Chapter 46.82 of the Wisconsin Statutes sets certain legal requirements for aging units. “Members of a county/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.” In the case of county board/tribal council members the requirement is 3 consecutive 2-year terms. This requirement only applies for an Area Agency on Aging that also serves as a county aging unit. List the members of the board of directors/policy-making body.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age 60 and Older?</th>
<th>Elected Official?</th>
<th>First Term Began</th>
<th>Second Term Expires</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chairperson: Larry Jepsen</td>
<td>Y</td>
<td>Y</td>
<td>June 2013</td>
<td>June 2019</td>
</tr>
<tr>
<td>Vice-Chairperson: Lane Delaney</td>
<td>Y</td>
<td>N</td>
<td>June 2016</td>
<td>June 2022</td>
</tr>
<tr>
<td>Treasurer/Secretary: Erv Teichmiller</td>
<td>Y</td>
<td>Y</td>
<td>June 2016</td>
<td>June 2022</td>
</tr>
<tr>
<td>Miki Bix</td>
<td>Y</td>
<td>N</td>
<td>June 2016</td>
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<tr>
<td>Herb Hanson</td>
<td>Y</td>
<td>Y</td>
<td>June 2013</td>
<td>June 2019</td>
</tr>
<tr>
<td>Wes Martin, Jr.</td>
<td>Y</td>
<td>N</td>
<td>June 2015</td>
<td>June 2021</td>
</tr>
<tr>
<td>Mary Pierce</td>
<td>Y</td>
<td>N</td>
<td>June 2015</td>
<td>June 2021</td>
</tr>
<tr>
<td>Ryales Herschel</td>
<td>Y</td>
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<td>June 2016</td>
<td>June 2022</td>
</tr>
<tr>
<td>Va Thao</td>
<td>N</td>
<td>N</td>
<td>June 2017</td>
<td>June 2023</td>
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</tbody>
</table>
Section 3-E: Membership of the Advisory Council/Advisory Committee

*This requirement only applies for an Area Agency on Aging that also serves as a county aging unit.*

Chapter 46.82 of the Wisconsin Statutes requires that the membership of the aging advisory committee (where applicable) must consist of at least 50% older people, and individuals who are elected to office may not constitute 50% or more of the membership. List the members of the advisory council.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age 60 and Older?</th>
<th>Elected Official?</th>
<th>First Term Began</th>
<th>Term Expires</th>
</tr>
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<tbody>
<tr>
<td><strong>Chairperson:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Barbara Robinson</td>
<td>Y</td>
<td>N</td>
<td>May 2012</td>
<td>Dec. 2018</td>
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<tr>
<td><strong>Vice-Chairperson:</strong></td>
<td></td>
<td></td>
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<tr>
<td>Rob Wilkinson</td>
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<td>Jane Deau</td>
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<td>Beth Esser</td>
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<tr>
<td>Nancy Gagnon</td>
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<tr>
<td>Kathy Gauger</td>
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<tr>
<td>Stan Hensley</td>
<td>Y</td>
<td>N</td>
<td>April 2011</td>
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<td>Marie Lewis</td>
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<tr>
<td>Dave Lowe</td>
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<tr>
<td>Lane Delaney</td>
<td>Y</td>
<td>N</td>
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<td>Aug. 2024</td>
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</table>
Section 3-F: Staff of the Area Agency on Aging

This requirement only applies for an Area Agency on Aging that also serves as a county aging unit.

Section 3-G: Affirmative Action Plan

Statement of Commitment of Affirmative Action and Equal Employment

By submission of this plan the AAA signifies its commitment to employment practices based solely on the work-related abilities and qualifications of employees and job applicants. Staff are assigned and promoted without regard to race, color, religion, sex, age, handicap or national origin. In addition, the AAA is committed to taking affirmative action in the hiring and upgrading of minority, female, disabled and older people.

<table>
<thead>
<tr>
<th>Policies</th>
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<th>No</th>
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<tr>
<td>Does the Board annually review and update the affirmative action plan?</td>
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<td>✓</td>
</tr>
<tr>
<td>Does the Board annually review employment practices to eliminate discriminatory elements?</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Are written procedures for handling discrimination complaints developed, posted, and used?</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Has the affirmative action plan been explained or discussed with all staff?</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Is the affirmative action plan posted and available for review by members of the public?</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

Person responsible for the affirmative action plan: Christine Huberty

Analysis of current staff: As of October 2, 2018, the GWAAR staff of 32 is composed of 6 men and 26 women. 25% percent are over the age of 55. In addition to regular staff, GWAAR administers the Wisconsin Senior Employment program with 79 enrollees – all of whom are 55 or older and low income; there are 28 men and 51 women. Forty-two percent are non-white and 62% are disabled.

Analysis of recent efforts: Christine Huberty assumed Affirmative Action compliance duties at the beginning of 2018 and is working to ensure that all prior goals have been met or are in the process of being met, as well as creating new goals for 2019-2021.

Affirmative action & equal opportunity goals:

1. Make every effort to confirm that GWAAR staff and members of the public have easy access to and understand the affirmative action plan
2. Continue recruitment efforts to attract qualified professionals representing racial and ethnic minorities, older women, and persons with disabilities
3. Encourage staff and clients to develop outreach through target population organizations in order to increase training, services, and program participation of underrepresented groups
Planned activities for 2019-2021 on affirmative action & equal opportunity:

- Ensure that the Board reviews and updates the affirmative action plan annually
- Ensure that the affirmative action plan is explained to all staff annually
- At its fall or winter meeting, the Board will discuss additional affirmative action & equal opportunity activities for 2019-2021
- Identify organizations and associations to assist broadening recruitment in target population areas
- Standardize and clarify orderly recruitment and hiring procedures for all managers
- Refine discrimination and harassment procedures

Policies for Compliance

- The Board of Directors reviews and approves the GWAAR affirmative action plan annually – usually at its fall or winter meeting.
- The GWAAR affirmative action plan is available to the public via the GWAAR Website.
- The GWAAR affirmative action plan is available to all staff via the public drive on the GWAAR network.
- Procedures for discrimination and harassment complaints are posted for staff via the public drive on the GWAAR network.
4. Context

The AAA/aging unit plan context sets the stage for the plan and describes the issues to be addressed in the rest of the document. The context conveys a clear understanding of the current and future service and support needs of the older residents, and the issues, challenges and opportunities facing the AAA.

The AAA plan context answers these questions:

➢ **Who are the current and future older persons?**

According to the U.S. Census Bureau and Wisconsin Department of Administration, Wisconsin’s population aged 65 and older is projected to increase from 780,000 residents in 2010 to over 1.5 million by 2040. Those 65 and older currently comprise almost one in six individuals in Wisconsin and this ratio will rise to almost one in four by 2040. In Wisconsin, the population is rapidly aging in rural areas, and is most pronounced in the northern half of the state. The increase is projected to occur at an above average rate in this portion of the state. By 2040, 18 counties in Wisconsin are projected to have at least 33% of their total population ages 65 and older. Three of these counties are estimated to reach 40%. These counties have moderate to high rates of poverty, based on U.S. Department of Agriculture data, as well as a higher level of health concerns per County Health Rankings. This rapidly aging population in Wisconsin is a result of the large Baby Boom population, current lower birth rates, increased life expectancy, and low net migration.

Wisconsin’s population will continue to become older; assuming longevity continues to rise. Although Wisconsin’s total population is expected to grow by 14 percent over the 2010-2040 (30 year) period according to the UW-Madison Applied Population Laboratory projection, the change will be much greater in certain age groups and lower in others. Shifts in the age distribution will be heavily concentrated in the older adult age group. For example, growth in the 65-84 age group will increase by 90% and the 85+ age group is projected to increase by 139% in 2040.

Geographically, Wisconsin’s population is dispersed across a mix of metropolitan and non-metropolitan counties with both urban and rural areas. Most of the state’s counties are non-metropolitan, lacking a large urban center and not being adjacent to a larger more densely populated metropolitan area.

Wisconsin’s racial and ethnic composition includes a lower proportion of non-white, non-Hispanic representative to national averages. This is especially true of its older population. In 2016, according to the U.S. Census’ Population Estimates Program, 93 percent of Wisconsin’s population ages 65 and older identified as white, non-Hispanic compared to 77 percent nationally. In addition, most of the state’s Hispanic and non-white populations live in the state’s metropolitan areas. The majority of the state’s Native American population reside in the northern counties. Wisconsin is home to 11 tribes with a total of more than 6,000 members age 60 or older.

The largest non-white racial population among those ages 65 and older is Black or African American, with 28,000 residents making up three percent of the total 65 or older population. The Hispanic or Latino population (of any race) was the second largest at 1.7% or 16,000
residents. (U.S. Census, Population Estimates Program, July 2000 and July 2016) Similar to their white counterparts, non-white and Hispanic older adults are increasing at a rapid rate.

Poverty continues to be a concern among Wisconsin residents 65 or older. According to the U.S. Census’ American Community Survey (one-year data), 7.6 percent of those age 65 or older (68,500 people) had income below the poverty line in 2016, up from 7.1 percent in 2012. Although poverty levels varied county by county, the highest poverty rates occurred mainly in rural counties in the northwest and southwest corners of the state. The lowest poverty rates were in metropolitan counties and some rural counties in central and north central Wisconsin.

➢ What needs have been identified?
GWAAR Advisory members met individually with Aging Unit directors and staff as well as local partners of the Aging Unit to gain insight on the needs of older people in Wisconsin. Additionally, Aging Directors were surveyed to get their perspective on identified needs in their county/tribe. As expected, there was a wide variety of needs identified, but the following areas were a consistent theme across the state: mental health (loneliness and isolation), affordable and accessible housing, access to food, increased transportation, advocacy training, more services/resources to help people stay in their homes, more home care workers, help with dementia care and financial security.

➢ How is the aging network organized to support older persons in the county?
Wisconsin supports older persons with OAA and State funded programs by delivering services on a county/tribal level. This unique approach is not only responsive to individual and community needs but also empowers older people to make informed decisions. By delivering programs and services through county and tribal aging units (often integrated into Aging and Disability Resource Centers), resources and services for older people are readily accessible. Localizing resources also gives older persons more opportunities to participate in the creation and delivery of Older Americans Act and other services provided by the local aging units. Requirements about the make-up of advisory and governing bodies puts older people in significant roles in the planning and oversight of the Aging Units. In this way, the needs and ideas for programs and resources are in the hands of the people who are impacted by these decisions.

➢ How are older persons supported by the AAA/aging unit and ADRC through programs and services?
The aging network in Wisconsin uses a combination of skilled options counseling and a broad array of home- and community-based services to help older adults age-in-place, prevent or delay long term care placement and conserve spending of personal resources. While options counseling and direct services are delivered through aging units at the county and tribal level, GWAAR supports the aging units in a variety of ways to ensure older people are receiving the resources and services they need. GWAAR’s role in the network is to
• provide education, tools, encouragement, oversight and support to aging units
• bring information from across the state and from nation-wide research to local aging units

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• assist in the development of programs to better serve people at the county/tribal level by answering questions and problem solving using information and training received from a wider view/context
• listen to challenges, problems, goals and ideas of aging units and respond using knowledge, training and partnerships with the larger community
• connect aging units who can support each other with similar projects/needs

➢ What are the critical issues/trends and future implications?
While there are many critical issues that come into play as the new plan period begins, the following have been identified as the most prominent:
• Increasing aging population – especially in the 85+ category
• Growing number of older adults facing cognitive impairment and dementia thus increasing the demand for caregivers and need for family support
• Shortage of caregivers, both family and professional, to care for the increasing number of people needing assistance
• Need to expand services and programs with limited resources
• Urgency to advocate for policies that support older people
• Growing need to gather data to show the positive impact aging programs have on people and communities
• Increasing need for aging units to create community partners to provide services

Furthermore, according to the National Council on Aging, approximately 80% of older adults have at least one chronic condition, and 77% have at least two. Chronic diseases account for 75% of the money our nation spends on health care, yet only 1% of health dollars are spent on public health efforts to improve overall health. We have a rapidly increasing aging population, and older adults are living longer with their chronic conditions which puts a strain on the resources of not only GWAAR but the aging unit’s themselves. The challenge for GWAAR is to provide technical assistance to 70 county aging units and 11 tribes on high-level evidence-based programming to empower older adults to live healthier lives.

➢ What are the challenges for the AAA/aging unit?
GWAAR’s challenge is to provide the needed support to county and tribal aging units while confronting the many critical issues facing Wisconsin’s Aging Network. We are challenged to
• serve an increasing number of older people with budgets that remain stagnant
• to offer training and technical assistance to 70 counties and 11 tribes, each with varying size, population, location and demographics
• understand the uniqueness of each aging unit, offering flexibility while still holding them accountable to meet the standards of the Older Americans Act
• advocate for legislation that will improve programs for older people and fight against policies that undermine the work of the aging network
• collect data, not only to show how many people are touched by OAA programs, but also how program outcomes benefit individuals and communities
The overall challenge GWAAR faces is to deliver innovative support to lead aging agencies as we all work together to promote, protect, and enhance the well-being of older people in Wisconsin.

➢ **What are the resources and partnerships? (Describe how resources are shared and how partners interact to meet the needs of older adults.)**

Partnerships play a large role the success of the aging network. GWAAR works closely with the State Office on Aging, the other two AAA’s, and the Tribal Technical Assistance Center to advocate for aging programs and services. Other partners include the Office for Resource Center Development, Wisconsin Institute for Healthy Aging, Veterans Administration, AARP and various statewide coalitions.

Partnerships at a local level are also very important and GWAAR assists as needed in the formation and growth of caregiver coalitions, I-Teams and health-based coalitions. Other partnerships include county and tribal aging units, aging and disability resource centers, health and human services, senior centers, local providers (medical/health, faith communities, senior living), UW-Extension, universities and technical colleges, transportation groups, managed care organizations, etc. Combining the expertise of all these partners ensures the older people of the state have the services and resources needed to age healthfully.
## 5. Public Involvement in the Development of the Area Plan

### Public Input Report #1

<table>
<thead>
<tr>
<th>GWAAR</th>
<th>Your Name and Email: Jane Mahoney <a href="mailto:jane.mahoney@gwaar.org">jane.mahoney@gwaar.org</a></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Public Input:</strong></td>
<td></td>
</tr>
<tr>
<td>___ Community Forum or Listening Session</td>
<td></td>
</tr>
<tr>
<td>___ Focus Group Discussions</td>
<td></td>
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<td>X Structured Interviews (with individuals)</td>
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<tr>
<td>___ Paper or Internet Survey</td>
<td></td>
</tr>
<tr>
<td>___ Other (please describe): ___________________________________________</td>
<td></td>
</tr>
</tbody>
</table>

| **Date/s of Event or Effort:** |
| GWAAR Advisory Committee members conducted live interviews across the state with Aging Unit directors/staff and community partners between 1/26/18 and 3/26/18. |
| Summary of this project can be found here: [https://prezi.com/view/m0Ilufq5uSvuO9DElGqU/](https://prezi.com/view/m0Ilufq5uSvuO9DElGqU/) |

| **Number of Participants or Respondents:** |
| 16 interviews were conducted by 7 different advisory members, covering 11 county aging units, 3 tribal aging units and 3 partner agencies. |

| **Key Issues Discussed:** |
| **Interview Questions for Aging Directors and/or Aging Unit Staff** |
| - What are some things that GWAAR offers that you find particularly helpful? |
| - How could GWAAR improve the support offered to your agency that helps you serve older people better? |
| - Do you have suggestions for programs or improvements in these focus areas: Caregiving, Dementia and Evidence Based prevention? |
| - Do you have suggestions for new areas that GWAAR could assist with? |
| - What do the older people in your community need that GWAAR could help you provide? |
| - Do you have any other suggestions of things that could/should be addressed in GWAARs three-year plan? |

| **Interview Questions for Partnering Agencies** |
| - How do you work with the local Aging Unit/ADRC and are you familiar with their services? Are there improvements that could be made? |
| - Do you have suggestions or ideas about new areas that should be addressed? |
| - What contributions have you seen GWAAR provide as a participant in your group/committee? |
| - What are the unmet needs of the older people you serve? |
| - What kinds of support could GWAAR supply that might help better your agency needs? |
| - Do you have any other suggestions of things that could/should be addressed in GWAAR’s three-year plan? |

| **Key Takeaways/Findings:** |
| Here is a short summary of what we learned. |
| **Things that are working:** |
| - GWAAR staff provides good technical assistance |
| - ACE meetings |
- website
- online trainings, webinars and statewide calls
- legal services and guardianship support center
- support with transportation
- support with data entry (SAMS)

**Suggestions for improvement:**
- increase training options - videoconference, online
- more orientation training for new directors and all staff
- more fiscal training for AU directors/fiscal staff
- integrate reporting requirements with ADRC
- ensure information on website is up to date
- better integration with State and WIHA
- offer templates for RFPs and other things
- more funding for prevention programs, home delivered meals, elder benefit specialists

**Suggested areas to focus on:**
- volunteer programs
- business development
- advocacy
- more choices for healthy aging classes/education
- grandparents and relative caregiver (GRC) support
- housing and transitions to supported care
- transportation and safe driving classes
- statewide marketing
- nutrition
- opioid abuse
- hearing loss
- medication management
- mental health

**What partner agencies had to say:**
- need for social outlets for older people
- mental/behavioral health
- improve sharing of information between healthcare and ADRCs/aging units
- more caregiver support - respite, training
- need more transportation
- provide resource materials to their agencies
- assist with partnerships between healthcare and aging units
- need programs for oral health/dental care
- nutrition and wellness
- use lunch-n-learns to train healthcare staff
- long-term dementia services

**Any Planned Response?**
We will address as many of the suggestions as we can within the goals of the Area Agency on Aging Plan.
### Public Input Report #2

<table>
<thead>
<tr>
<th>GWAAR</th>
<th>Your Name and Email: Jane Mahoney <a href="mailto:jane.mahoney@gwaar.org">jane.mahoney@gwaar.org</a></th>
</tr>
</thead>
</table>

**Type of Public Input:**
- Community Forum or Listening Session
- Focus Group Discussions
- Structured Interviews (with individuals)
- Paper or Internet Survey
- Paper or Internet Survey
- Other (please describe): 

**Date/s of Event or Effort:**
January 18 to April 2, 2018

**Number of Participants or Respondents:**
28 people responded

**Key Issues Discussed:**
A Survey Monkey link was emailed to all Tribal and County Aging Unit directors with 2 reminders to complete. The following questions were asked.

1. What are some things that GWAAR offers that you find particularly helpful?
2. How could GWAAR improve the support offered to your agency?
3. Do you have suggestions for new areas that GWAAR could assist with?
4. What do the older people in your community need that GWAAR could help you provide?
5. Do you have suggestions for any other things that could/should be addressed in GWAAR’s 3-year plan?
6. Please share a service your agency provides that you are particularly proud of.

**Key Takeaways/Findings:**

### ADVOCACY
- Training for advocacy - get more people to advocate in political arena.
- More information out about budget/legislative issues sent to local newspapers
- Templates for putting together a Senior Statesman or local advocacy group
- Help develop more county wide advocates

### NUTRITION PROGRAMS
- Need for homebound meals is increasing, yet the pressure to do congregate is going to be an outcome measure - when it may not be the need.
- Need to revitalize the nutrition program—focus on the baby boomers who have different outlooks than the previous generation, especially their mobility. Appreciate what GWAAR is starting to do here-need more of this.
- Template for creating RFP with nutrition vendors
- Older people need better access to food/nutrition
- Creative ways to provide nutrition with less tax levy

### CAREGIVING/DEMENTIA
- Help with GRC programs - Intergenerational activities
- Help developing a Chore Service Program, and help with shopping
- TA with using a voucher system to alleviate concern over liability
- Need more paid caregivers and additional day services
- New programs around dementia care
HEALTHY AGING

- Marketing tools/strategies for recruiting participants in Evidence based programs
- More coordination in how we outreach to networks like parish nurses and their association instead of just a local contact
- When should prevention programs be “sunsetted”? Could this be a goal—not just doing more but when to stop programs that are old
- Health Literacy
- Med management and label simplification - how to set up pill boxes

VOLUNTEER PROGRAM

- Volunteer leader training
- Coordinated volunteer network for transportation, meals, companionship
- Help with setting up a volunteer program

MENTAL HEALTH

- People need help with loneliness/isolation, grief counseling, AODA and other mental health issues
- Help finding and joining social networks for those new to the community

SAMS

- More canned reports that would give quarterly summary in SAMS to help us with data and reports
- Share SAMS with DBS/EBS/ADRC/Aging-so much wasted time trying to tell our story with data.
- We double and triple touch data for evidenced based programs. Quality Improvement needed.

TRANSPORTATION

- Marketing tool/strategies for recruiting and training volunteer drivers
- More available for socialization, not just medical
- More transportation needed in rural areas and during off hours
- Safe Driving - how to determine when you shouldn't drive anymore

BUSINESS DEVELOPMENT

- Help us work with MCOs and IRIS – help create contracts, setting rates, etc.
- Show us tangible, results-specific projects being outlined

HOUSING

- More housing is needed in general, but also specific to those with moderate to higher incomes as well as low income
- Look into ways to make residences safer through home repairs and training.
- Housing for homeless elders
### MARKETING ASSISTANCE AND WEBSITE

- Have a professional's section for program manuals and forms
- More social media involvement
- Develop power point presentations on various topics – like templates - for anyone to use
- More statewide marketing or promotional materials to make sure people know about our programs

### TRAINING

- More training on all the Title III programs and have them web-based for all new staff to view and for refreshers –Fiscal training/reports
- More training state-wide on APS issues and TA on supported decision-making and working with I-Teams on this topic
- More in-depth training for new directors – offer video-conferencing to save travel
- Help us understand how Fiscal and SAMS are related and “Federal draw-down policy”
- EBS program – better training about the EBS program to current aging directors
- Training on board development and training of board members
- Regional program area training in specialty areas like: transportation, business acumen, nutrition et… so staff have access as well as directors-make it regional.
- More training on local partnership building and collaborating with community action programs, independent living centers, healthcare and other local stakeholders.

### NEW AREAS OR IDEAS TO INCLUDE IN THE PLAN

- Help us address ageism
- Modernize services/programs to meet the needs of traditionalists as well as new boomers
- Help with coordination and sharing between aging units - enhance opportunities to share best practices in a shared location where other counties could grab the tools or share resources. Or a Listserv…
- More outreach/training about guardianships and POAs both for staff and the public.
- Work with supporting/encouraging Community Center concepts.
- Require service providers to address rural needs in their plans – ensure services/programs are available in small, rural communities

### Any Planned Response?

Results were discussed at our OAA meeting. We addressed as many comments/suggestions as possible when creating goals for our 3-year plan.
6. Goals for the Plan Period

This section of the plan should address Advocacy-Related Activities, the Elder Nutrition Program, Services to Support Caregivers, Services for People with Dementia, Healthy Aging, Elder Justice and Local Priorities. Measurable goals should be written for each area listed below. At least one goal should be identified for each year of the plan.

Advocacy-Related Activities

To ensure older adults and their caregivers have access to information about how specific state and federal policy proposals affect them and which policymakers to contact to share their thoughts about specific proposals, GWAAR’s Advocacy and Public Policy Coordinator and Communications Coordinator will develop a media strategy to distribute state and/or federal aging policy information to at least six local news media sources geographically spread throughout the state, including rural areas with local newspapers, and two social media outlets by September 30, 2019.

To support aging unit/ADRC directors in the recruitment and training of 25 local aging advocates, GWAAR’s Advocacy and Public Policy Coordinator and advocacy volunteer team will update the Advocacy Toolkit documents currently found on GWAAR’s website and the local Senior Statesmanship (POWER)/Advocacy Committee materials and will work with GWAAR’s Communication Coordinator to get all updated material uploaded to the Advocacy Toolkit page on GWAAR’s website by March 31, 2020.

In order to assist aging units to increase awareness of aging issues at the county government level, GWAAR’s Advocacy and Public Policy Coordinator will share samples and templates of draft resolutions on specific aging policy issues with aging unit directors. Aging unit directors will be encouraged to adapt the draft resolutions for use in their counties/tribes to be acted upon by their governing boards and forwarded to their county boards for action. Ten Wisconsin counties will create and pass resolutions which will be posted on the GWAAR website by December 31, 2020.

To increase the comfort level of aging advocates and Aging Unit/ADRC staff in engaging with policy makers and enhance their knowledge of state and federal budget and policy issues and process, as evidenced by a pre- and post-test demonstrating that at least 80% of participants indicate their comfort level and knowledge is increased as a result of the training, GWAAR’s Advocacy and Public Policy Coordinator and advocacy volunteer team will provide 6 regional/state train-the-trainer sessions on timely policy issues and effective action steps for engaging with policy makers by December 31, 2021.

Elder Nutrition Program

The GWAAR Nutrition Team will develop quality metrics for counties/tribes participating in the Sustainable Kitchens Start Up Kit group to be used to measure improvement in overall food service cost and quality by December 31, 2019.
To actively address the crisis of malnutrition in older adults living in the community, the GWAAR Nutrition Team will utilize the Collective Impact model to create a state-wide Malnutrition work group to further define and implement at least 3 national strategy initiatives. Including, but not limited to, advocacy, awareness, and education. These strategies will be shared with the Elderly Nutrition Program Network by December 31, 2020.

To assure Elderly Nutrition Programs have a comprehensive emergency preparedness plan, the GWAAR Nutrition Team will partner with two counties/tribes to create a Home Delivered Meal Emergency Preparedness Plan Document specific for their nutrition program by December 31, 2021 that will be used as a template for other programs.

**Services in Support of Caregivers**

To increase support to grandparents and relative caregivers (GRC) across the state, GWAAR’s Caregiver Specialist will complete a course in Grandfamilies Leadership and use materials and knowledge gained to assist 4 AUs in developing a GRC program by December 31, 2019.

To provide more help with housekeeping and chore services to caregivers, GWAAR’s Caregiver Specialist will create a program guide for Aging Units to use to set up a Chore Service Program, with at least 5 Aging Units creating the program by December 31, 2020.

To increase the understanding of the challenges faced by employed caregivers, the GWAAR Caregiver Specialist, in coordination with the Wisconsin Family and Caregiver Support Alliance, will provide presentations about ways employers can support working caregivers to large businesses, chambers of commerce and statewide associations, totallying at least 4 presentations by December 31, 2021.

**Services for People With Dementia**

To increase the understanding of dementia across the state, GWAAR’s Caregiver Specialist will assist the WAI Dementia Resource Network in disseminating the Dementia Friends (DF) program across the state by becoming a DF Master Champion and training 6 DF Champions by December 31, 2019.

To educate people about brain health, GWAARs Caregiver Specialist and Health Promotion Specialist will research healthy brain programs and disseminate information about at least one program that 5 Aging Units will use by Dec 2020.

In order to increase respite care availability to family caregivers caring for someone with dementia, GWAAR’s Caregiver Specialist will work with WI Respite Care Association (RCA) to add dementia care training (utilizing existing trainings) as an option for private care providers who are utilizing the RCA registry. GWAAR CG Specialist will distribute information about the registry to AUs statewide with a minimum of 10 AUs accessing the registry by Dec. 2021.
Healthy Aging

In order for new aging unit directors and health promotion coordinators to be well educated on Title III Part D requirements and resources available to them, GWAAR health promotion staff will create a standardized Title III Part D orientation webinar and 100% of new aging unit directors and health promotion staff will attend by December 31, 2019.

To increase the number of high-level evidence-based health promotion programs at aging units and tribes, GWAAR health promotion staff will contact all aging units who have not spent 50% of their Title IIID dollars by July 2019 to ensure that 90% of aging units and tribes spend 100% of their Title IIID dollars by December 31, 2020.

In order to increase the number of high-level evidence-based workshop options for Aging Units to participate in, GWAAR staff will investigate high-level evidence-based healthy aging workshops available throughout the country and communicate these options to the aging units which will result in a minimum of ten new high-level evidence-based classes to be offered throughout the state by December 31, 2021.

Elder Justice

In order to reach underserved populations with state funded domestic abuse grants, GWAAR will require 5 awards each year be directed towards the following populations:

- 2019: victims who identify as LGBTQ+
- 2020: victims who are of an ethnic minority population
- 2021: victims who are male

To increase the skill set of APS workers, GWAAR program staff will collaborate with state and regional partners in scheduling two trainings including Vicarious Trauma: an ‘occupational hazard’ and The Opioid Epidemic and Older Adults by December 2020. Post-training surveys will indicate a least an 80% increase in attendees’ level of knowledge in these areas.

Program staff will work with the WI Attorney General’s Elder Abuse Task Force to develop an application process and award 11 grants to eligible county Elder Abuse Interdisciplinary Teams to engage forensic accountants, law enforcement, prosecutors, and others to move financial abuse cases through the court system. Completion date: June 2020.

Local Priorities

To help Aging Units create and maintain successful business initiatives, GWAARs Business Development Coordinator will facilitate and document business initiatives that result in the generation of a 7% increase in revenue, for 20% of aging network partners by December 31, 2019.
In order to improve communications with Aging Units, the Communications Coordinator will develop and submit a comprehensive improvement plan to the Executive Director and Special Projects Manager by November 30, 2019.

In order to expand the outreach of the Senior Medicare Patrol program, the SMP staff will recruit and train 30 volunteers from at least 20 different counties or tribes to distribute information, staff various exhibits and give presentations about SMP by 12/31/19.

In order to increase awareness of the Senior Medicare Patrol (SMP) program across the state, SMP staff will send SMP brochures and other materials to all Aging Units/ADRCs to share with staff and consumers by March 31, 2019 which will result in a 25% increase in the number of calls to the Senior Medicare Patrol Helpline from the first quarter to the last quarter of 2019.

To improve communication and assist new local aging unit directors to better understand the respective dual supervision roles under the EBS program, the ELAC staff will partner with DHS to create a webinar or presentation at an in-person training (such as an ADRC connect meeting) by December 31, 2019. Our goal is that at least 33% of the aging unit directors will participate in this training within the first year.

To increase the understanding of the correlation between SAMS and fiscal, the data management specialist will hold quarterly webinars with Aging Units to discuss and address issues regarding SAMS data accurately correlating with fiscal data, with pre-post-test score improving by at least 20% for each webinar by September 30th, 2019.

To ensure transportation coordinators, mobility managers and aging staff are aware of transportation programs and grants and to encourage coordination and disseminate best practices, GWAAR will co-host 3 regional roundtables on transportation programs by the end of 2019. At least one person from each county and tribe will attend.

To create a better understanding of how to help older adults with mental health challenges, Mental Health First Aid for Older Adults will be made available in at least one county/tribe each year of the plan.

The five See a Need, Take the Lead projects through the contract with the Self Directed Volunteer Network will wrap up in 2019. A summary of these projects will be written by Dec. 2019 to generate interest for starting new projects. This will result in recruiting 3 new projects in the aging network by June 2020.

To expand programs that address issues related to isolation and loneliness of older adults, GWAAR staff will create a program guide for a friendly visitor/caller program which will be utilized by at least 5 Aging Units by December 31, 2020.

To make it easier for Aging Unit directors and their staff to access information about the OAA programs, online trainings for Title III programs will be made available in a single location on the GWAAR website in a by June, 2021.
7. Special Projects

The purpose of this section is to present an overview of the special projects the AAA intends to fund. Attach a separate page for each project.

<table>
<thead>
<tr>
<th>Name of the Project</th>
<th>Wisconsin Guardianship Support Center</th>
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</thead>
<tbody>
<tr>
<td>Rationale for the Project</td>
<td>Provides information and assistance on issues related to guardianship, protective placement, and advance directives.</td>
</tr>
<tr>
<td>Standard Service Title</td>
<td></td>
</tr>
<tr>
<td>Standard Service Number</td>
<td></td>
</tr>
<tr>
<td>Agency Providing Service</td>
<td>GWAAR</td>
</tr>
<tr>
<td>Contact Information</td>
<td>Jessica Trudell, 608-243-5683, <a href="mailto:Jessica.trudell@gwaar.org">Jessica.trudell@gwaar.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of the Project</th>
<th>Veteran-Directed Home- &amp; Community-Based Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rationale for the Project</td>
<td>The Wisconsin Veteran Self-Directed Program allows eligible veterans and their families choose the services and supports they need to safely and successfully live at home.</td>
</tr>
<tr>
<td>Standard Service Title</td>
<td></td>
</tr>
<tr>
<td>Standard Service Number</td>
<td></td>
</tr>
<tr>
<td>Agency Providing Service</td>
<td>GWAAR</td>
</tr>
<tr>
<td>Contact Information</td>
<td>Lisa Drouin, 262-785-2565, <a href="mailto:lisa.drouin@gwaar.org">lisa.drouin@gwaar.org</a></td>
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<table>
<thead>
<tr>
<th>Name of the Project</th>
<th>Wisconsin Senior Employment Program (WISE)</th>
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<tbody>
<tr>
<td>Rationale for the Project</td>
<td>People low income and 55 and older can learn new skills by placing them in training positions.</td>
</tr>
<tr>
<td>Standard Service Title</td>
<td></td>
</tr>
<tr>
<td>Standard Service Number</td>
<td></td>
</tr>
<tr>
<td>Agency Providing Service</td>
<td>GWAAR</td>
</tr>
<tr>
<td>Contact Information</td>
<td>Darice Hannon, <a href="mailto:darice.hannon@gwaar.org">darice.hannon@gwaar.org</a>, 608-220-1011 and Paul Koenig, <a href="mailto:paul.koenig@gwaar.org">paul.koenig@gwaar.org</a>, 608-228-8093</td>
</tr>
</tbody>
</table>
Name of the Project: Wisconsin Senior Medicare Patrol (SMP)

Rationale for the Project: Senior Medicare Patrols (SMPs) empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors, and abuse through outreach, counseling, and education.

Standard Service Title:  

Standard Service Number: 

Agency Providing Service: GWAAR  

Contact Information: Ingrid Kundinger, Ingrid.kundinger@gwaar.org, 608-243-2885  

8. Direct Services Waiver

The OAA requires the AAA to seek a waiver from the Bureau of Aging and Disability Resources if the AAA wishes to provide a service directly.

If the AAA is seeking a waiver to provide a service or services directly it must submit a page with the information requested for Special Projects for each service it seeks to provide directly.

GWAAR already has a waiver to provide legal backup services for EBS program.

9. Coordination Between Area Agencies on Aging & Disability Resource Centers

Briefly describe the arrangements that exist between the AAA and the ADRCs that serve your area. Describe how they will collaborate and/or coordinate with the Office for Resource Center Development and the ADRCs in carrying out the goals included in this plan. This may include but is not limited to planning, program activities and referrals to and from the ADRCs. The description should also include collaboration activities to support the required focus areas of AAA/aging unit plans.

GWAAR will continue to work with ORCD and the State Office on Aging to work with aging units and ADRC’s that aren’t integrated but are interested in integrating. We will utilize the best practices and our integration checklist to make sure that we form new integrated agencies that best serve the people in their community.

In 2019 GWAAR will once again collaborate with ORCD and State Office on Aging to hold one joint ACE/ADRC Connect meeting.

GWAAR will continue to meet with ORCD and Office on Aging staff once a month so that each of us has knowledge of what the other is doing. These meetings also allow us to share updates on
10. Coordination Between Titles III & VI

The Older Americans Act (Sec. 306 (a)) requires aging agencies, to the maximum extent practicable, to coordinate services the agency provides under Titles VI and Title III.

If the AAA/aging unit includes part or all of a federally recognized tribe or is home to a concentration of tribal members, describe how the AAA/aging unit and the Tribal Aging Unit will work together to coordinate and ensure the provision of services to tribal elders. Provide a narrative describing collaboration efforts and goals for each year of the plan.

GWAAR will support coordination, collaboration and communications between the Tribal Aging Units and County Aging Units by consulting with the Great Lake Inter-Tribal Council (GLITC) Tribal Technical Assistance Center (TTAC) Director when planning ACE meetings to ensure that the agenda will be of interest to both Tribal and County Aging Unit directors by December 31, 2019. As a result, there will be an increase in attendance of Tribal Directors from 2018.

To ensure AFCSP funds are being fully utilized by the Tribes, GWAAR Caregiver Coordinator will work with GLITC and Tribal Aging Directors to compile best practices for Tribes to use AFCSP and present it via webinar by September 31, 2019 which will result in less than 15% unspent Tribal AFCSP funds in 2020.

To increase understanding about the unique culture of the Native American Tribes in Wisconsin, the TTAC and GWAAR will collaborate to offer 3 trainings for the Aging Network about Native American Culture in various formats which could include a presentation at an ACE meeting, webinars or in-person trainings by December 31, 2021, with a pre- post-test indicating 75% of participants increased their knowledge.

11. Targeted Populations

Serving Low-Income Minority Older Individuals

Section 306 of the Older Americans Act requires that the area plan include specific goals for providing services to low-income minority individuals and include proposed methods of carrying out the preference in the AAA plan. Describe the measurable goals the AAA will work on during 2019-2021 to serve low-income minority individuals. Attach additional pages as necessary.

In order to decide whether or not GWAAR should build capacity around housing issues, we will complete an internal needs and capacity assessment dedicated to this issue by December 31, 2019.

In order to increase outreach to low-income minorities to educate them about Medicare Savings Programs, Extra Help and SeniorCare, the GWAAR Medicare Outreach Coordinator will provide
training on specific outreach activities and materials that target low-income minorities at all new EBS trainings by December 2020.

To enhance elder benefit specialists’ knowledge of other cultures, backgrounds, and socio-economic status, the Benefit Specialist Supervising Attorneys will provide two regional presentations per year (at the mandatory EBS meetings) and three newsletter articles per year on race, ethnicity, disability, and related diversity topics by December 2021.

**Serving Older Individuals in Rural Areas**

*Section 306 of the Older Americans Act requires that the area plan include specific goals for providing services to individuals residing in rural areas and include proposed methods of carrying out the preference in the AAA plan. Please describe the measurable goals for this section.*

Upon successful “award” by an anonymous funding source and oversight from the National Council on Aging (NCOA), GWAAR’s Health Promotion staff will serve as Wisconsin’s primary lead to assist in the sustainment and distribution of the Aging Mastery Program (AMP) through the development of partnerships to provide the 10-week AMP program to 1,700 older adults in small towns or rural areas across Wisconsin, 850 caregivers will receive the AMP for Caregivers class and 850 will receive Aging Mastery Kits by December, 2019.

The volunteer driving training toolkit will be updated on the website March 2020. Recruitment materials will be added to this section to assist aging units with the recruitment of new volunteer or community drivers for their programs in rural areas. Recruitment materials will be used by at least 5 programs throughout the state in their recruitment efforts.

In order to provide an aging perspective to the Connected/Autonomous Vehicle workgroup, GWAAR will partner to co-host at least 4 community conversations in rural areas about autonomous vehicles by Dec. 2021. Perceptions about autonomous vehicles will be recorded and will inform the CAV workgroup and roll-out of automated vehicle technology in the state.

**12. Budgets**

In preparing these budgets the AAA/aging unit may assume the same allocations from the Bureau of Aging and Disability Resources received in the final 2018 award. The actual allocations may differ. Round all figures to the nearest whole dollar.

**The budget for the first year of the plan must be submitted on the Excel worksheet labeled “2019 AAA/Aging Unit Budget.”**

**13. 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 with the State of Wisconsin Department of Health Services.*
The assurances agreed to by this signature page must accompany the plan when submitted to the State of Wisconsin-Bureau of Aging and Disability Resources-Office on Aging.

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

On behalf of the Area Agency on Aging, we certify

Greater Wisconsin Agency on Aging Resources

(Give the full name of the Area Agency on Aging)

has reviewed the appendix to the area plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 2016-2018. We assure that the activities identified in this plan will be carried out to the best of the ability of the Area Agency on Aging in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2016-2018.

Larry Jepsen, GWAAR Board Chairperson

Date

Barbara Robinson, GWAAR Advisory Council Chairperson

Date
Public Hearing 1

<table>
<thead>
<tr>
<th>Greater Wisconsin Agency on Aging Resources</th>
<th>Date of Hearing:</th>
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<tr>
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<td>which was more face to face</td>
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<table>
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<tbody>
<tr>
<td>Lussier Heritage Center – Madison</td>
<td>56</td>
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**Summary of Comments:**

**Advocacy** – Q. Will the senior statesman be offered again?  
A. Janet will offer tools to reinstate the county program at the local level.

**Nutrition** – Q. Regarding the 2021 goal, Rob asked if the the 2 counties been picked out? He recommends using counties that have current emergency situations  
A. Good idea – will look into that when choosing.

**Health Promotion** – Angie noted that the III-D Orientation Webinar will be moved up to 2019 in response to a request on the survey monkey

**Elder Justice** – Q. Alice from DHS suggested to offer the trainings to all aging unit staff 2020 not just DOJ support for 2021 goal  
A. Will look into that

**SAMS** - Sara K. commented about the importance of the SAMS/Fiscal correlation and how the feds are really looking at this to see what the unit cost per services are.

Bonnie (Outagamie) commented that while it takes a lot of work to monitor it is beneficial to do and as a tax payer can see the value of this

**Mental Health** – Q. Will the friendly visitor/caller volunteers be trained in mental health issues?  
**Answer** – not necessarily, but it sure could be that way. The plan is to offer different ways/ideas for offering this program.

Q. Is the main focus of this goal isolation and loneliness?  
A. Yes – not really addressing mental health as much as loneliness.

Bob talked about a past program that was focused on peer counseling which was more face to face – we might need to work on more than just this friendly caller program.

John talked about the need to narrow down the focus since there are so many different types of issues in regard to mental health. Many agreed that mental health is a great need that must be addressed.

**How was draft plan altered as a result?**  
Added an additional goal to address mental health.
**Public Hearing 2**

<table>
<thead>
<tr>
<th>Greater Wisconsin Agency on Aging Resources</th>
<th>Date of Hearing:</th>
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<tbody>
<tr>
<td></td>
<td>October 25, 2018</td>
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<table>
<thead>
<tr>
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<tr>
<td>7100 Stone Ridge Dr, Weston, WI 54476</td>
<td>46</td>
</tr>
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</table>
Summary of Comments:

Advocacy – Comment: In addition to news media, it’s important to focus on local county boards and local legislators. They also need to be informed about aging policy issues. Strategy will be important. Encourage aging units to inform important aging policy issues to their local legislators and other important agencies/possible partners.

Comment: Aging units really appreciate Janet Zander getting out and doing local training. Also, is there any way to put a measure on Aging Advocacy Day and find a way to increase participation? It’s an extremely effective tool for getting the attention of legislators.
A: No goal to increase participation, but of course, that is the hope.

Nutrition – Q. Haven’t goals 1 and 2 already been done?
A. SK Start Up Kits have been introduced, but we need the measures and metrics. The malnutrition workgroup has had some meetings, but only discussion, but no actions taken yet.

Caregiver – Q. Will there be a collaboration with other departments like law enforcement?
A. Yes, we will be collaborating with other county departments and people from different agencies will be involved.

Comment: Caregivers are not only dealing with the elderly and dementia. We see people who are caregivers of cancer and health issue and those grieving. The caregiver issue is widening.

Healthy Aging – Q. Why is GWAAR satisfied with only 90% of counties/tribes spending all funds? There should be a stronger effort made to make sure all funds are spent and people have access to funds and programs.
A. We didn’t want to set a goal that wouldn’t be attainable; however GWAAR is always striving to ensure aging units are spending their funds efficiently and in a timely manner.

Elder justice – Comment: GWAAR should include education of district attorneys. The opioid epidemic is huge and needs attention. There is more to the drug epidemic than just opioids; there are other drugs as well, including alcohol and recreational drugs. The drug generation of the past are now becoming our elderly population.
A. It is the responsibility of the state attorney generals’ office to train DAs and that office has recently been awarded a significant grant to do that. The GWAAR training will be specifically on opioid abuse by older adults and will focus on educating the over 250 APS county/tribal APS social workers statewide who conduct in-home elder abuse investigations.

SAMS – Comment: Make sure to have someone from fiscal involved.
A. Fiscal and the state will indeed be heavily involved also. We need to make sure reports are accurate and prove that dollars are being used correctly.

Legal Services – Q. When providing articles on race, ethnicity, disability and related diversity are you talking about articles that AUs can use for their newsletters or just to educate AU staff?
A. Will be for both.

How was draft plan altered as a result?
Added an advocacy goal to address the suggestion to focus on local county boards.

Public Hearing 3

<table>
<thead>
<tr>
<th>Greater Wisconsin Agency on Aging Resources</th>
<th>Dates: Survey Monkey open 9/21/18 – 11/2/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location: Survey Monkey sent out to all AU Directors, GWAAR Advisory Members and Staff with instructions to</td>
<td>Number of Attendees: 49 have looked at and/or commented on</td>
</tr>
</tbody>
</table>
**Summary of Comments:**

### ADVOCACY GOAL FEEDBACK
- Several favorable comments about liking these goals
- More emphasis on getting information to northern rural areas about state/federal aging policies and laws is needed.
- What can we expect in a media strategy?
- Will there be a Senior Statesman training that the updated materials will be used for? If the goal is to update the material by March 31st, 2020, when will the 25 advocates be trained by?

### NUTRITION GOAL FEEDBACK
- Lots of comments and positive feedback on the malnutrition goal. Interested in seeing state strategies to use in local materials.
- One person thinks the malnutrition goal is far too “big”
- Will there be an initiative to specifically address identified malnutrition causes, i.e., financial hardship, lack of transportation, lack of actual food sources or resources be considered as a goal? Identification of the problem is a great start, education is great, but if we don't recognize and address some of the grass route problems that exist, awareness is fruitless. Also, should this issue be addressed at the legislative level? (Beth Esser)
- Question on how the quality metrics are measurable. How will we know these are actually measuring what we want?

### CAREGIVER SUPPORT GOAL FEEDBACK
- Bayfield County would be interested in being one of the 4 counties to receive assistance in developing a GRC program.
- Questions about the goal also addressing the issue of inadequate resource of chore service providers for caregivers and those individuals living alone in need of only chore service to remain in their home? And also how to fund a chore service.
- Some question about whether or not 4 businesses in the whole state is worthwhile. Suggestion to reach Chambers of Commerce, the WCA conference, HR Directors association, or any number of other conferences that reach many businesses and provide increased visibility for Aging Units/ADRC’s across the state.

### DEMENTIA GOAL FEEDBACK
- How will you coordinate your last goal (adding dementia training to RCA registry) with local efforts &/or programs that already exist?
- Suggestion to incorporate healthy brain programs to include the Healthy Brain Curriculum to Schools in say 4 Districts? (Just as an example) or program for local churches or other community organizations
- Positive comments about Dementia Friends and Healthy Brain Programs
HEALTHY AGING GOAL FEEDBACK

- Suggestion to focus on Aging Units that do not have dementia care specialists.

- We don't really have issues spending our existing dollars. Additional dollars would be more helpful, what are you doing to secure those?

- I like the webinar idea. As a newer ADRC/Aging director, there is so much to learn with all of the programs it would be very helpful to have the education provided right away about what is available. And could still watch it when questions come up.

- The challenge has been to gain enough participants to hold classes. Assistance exploring efforts to do this would be helpful.

- Excellent—could the training on Title III be moved to 2020?

- Like the health promotion training for existing and new employees

- Goal #2 is so important! I will be very happy to have additional high evidence-based classes to consider bringing to our community.

- Second goal... I think it might be helpful to set a target for number of new EB programs. I think it would be good to limit it to three new programs. Any more than that and the value is watered down and more importantly hard for one HP specialist to manage with the other programs out there.

ELDER JUSTICE GOAL FEEDBACK

- I love the Vicarious Trauma goal. It is not a talked about topic and I think there are many that do not know this can happen.

- Bayfield County is very interested in partnering on these goals. APS is located within the Aging and Disability Services Unit.

- Elder Abuse is so under reported, should a goal be increase education to the general public of resources available?

- Second goal - be sure to invite more than just APS staff since many ADRC staff are the ones making referrals to APS.

LOCAL GOAL FEEDBACK

- We are trying to increase our volunteer base/coordination and these goals would be helpful in showing the importance to our community

- I still feel like ORCD is not totally on board and undercuts these efforts with continuous comments. There are several ADRC/Aging Units that are terrified to delve into this very far.

- The goal around SAMS is great. I do not believe we are trained nearly well enough in the system. An initial training would be great in addition to the quarterly meeting.

- See a Need, Take the Lead project summary Dec 2019. Will be great to share the results.

- Look forward to the transportation round tables as well as the SAMS/fiscal webinars.

- I would like to see greater emphasis on the loneliness and social isolation issue and I am not
sure a friendly visitor/caller program is the answer...mainly because it's another volunteer recruiting thing and in small counties that responsibility falls on staff already trying to recruit for other things.

- Last goal...here's a radical thought. New directors have so much to learn and honestly it is mind boggling especially if they are also an ADRC director/supervisor. I think it would be great to have a once a month, one hour webinar on one program/funder. It would be just the basics. There is always a desire to give new people two day trainings and honestly after the second hour the information is wasted. It's like our customers...we too need to be dosed with information.

**TITLE VI COORDINATION GOAL FEEDBACK**

- I don't know that much about the needs of tribes, nor the cultural differences so education is important

**SERVING LOW-INCOME MINORITIES GOAL FEEDBACK**

- Housing continues to be a topic of concern. Any effort to explore options will be helpful.
- I think these are good

**SERVING INDIVIDUALS IN RURAL AREAS GOAL FEEDBACK**

- We have a need to support all our volunteers. Great idea
- Transportation came back as our number 1 need in our surveys and focus groups. It isn't just about volunteer drivers, it's also about access to public transportation in rural areas.
- AMP- This is a wonderful program. I look forward to seeing how you are going to help this spread across the state.

**How was draft plan altered as a result?**

- Caregiver - Included “chambers of commerce and statewide associations” to the goal about employed caregivers.
- Dementia – Added “utilizing existing trainings” to the last goal.
- Heathy Aging – Moved the Title III-D orientation webinar goal to be completed in 2019.

Public Hearing Announcement:
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October 1, 2018

Jeffrey M. Thomas
Notary Public, Wisconsin

My Commission expires

Aug 30, 2022
Public Hearing

How Can GWAAR Best Serve You and Your Communities?

We’ve completed a draft of our 2019-2021 Area Plan and we’d like your input!

Our two public hearings will be held at 10:00 a.m.

Wednesday, October 17, 2018, Lussier Family Heritage Center
3101 Lake Farm Road, Madison, WI and

Thursday, October 25, 2018, Fairfield Inn & Suites
7100 Stoneridge Drive, Weston, WI

Please plan to share feedback about our draft plan. You can request the plan by contacting us at info@gwaar.org or (608) 243-5670 or view it on our website.

Deadline for written comments October 12, 2018. Please send comments to:

Greater Wisconsin Agency on Aging Resources, Inc.
1414 MacArthur Road, Suite A, Madison, WI 53714