



2009 ANNUAL REPORT

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From the Executive Director

As the Aging and Disability Resource Center of Central Wisconsin (ADRC-CW) enters 2010, it is a promising time for our organization. Through the hard work of the ADRC-CW staff and Board, much was accomplished in 2009 to insure that the ADRC-CW is fulfilling its mission, vision, and values; that our core services are clearly defined and fiscally solvent; and that our staff have the support and tools they need to do their jobs, all of which results in optimal services and outcomes for our customers.

The Aging and Disability Resource Center of Central Wisconsin was formed in 2006 through an Intergovernmental Agreement between our two member counties, Marathon and Wood, as authorized by Sec. 66.0301 of the Wisconsin Statutes. The ADRC-CW provides aging and disability resource center services, as directed by the state aging and disability resource center grant; and aging network services, as directed by the Older Americans Act grants, to residents throughout Marathon and Wood Counties.

Through an Ad Hoc Committee formed in 2009, an analysis was prepared regarding expansion to both Langlade and Lincoln counties, with a recommendation for expansion to these two counties sent back to the four Member County Boards. At the end of 2009, a new Intergovernmental Agreement was executed by all four county boards for ADRC-CW services to serve Langlade, Lincoln, Marathon, and Wood counties, starting November 1, 2010. I believe the ADRC-CW will be a stronger organization once the expansion is complete. Older adults and adults with disabilities will be able to receive consistent, high quality services throughout the region that can draw upon the strengths of all four counties. Shared administrative staff throughout the region insures program consistency and reduces administrative costs in order to increase resources for direct services.

Linda Weitz, Executive Director, ADRC-CW

2009 ANNUAL REPORT

Table of Contents

I. Mission, Vision, and Core Values

II. 2009 Fiscal Summary

III. Organizational Structure

Outlines the administrative structure and lists FTEs for all permanent staff
Does not include the many volunteers, casual employees, students, and senior aides who are critical to the work of the ADRC-CW

IV. Core Services

Resource Center Services
Learning and Wellness/Caregiver Support
Nutrition
Transportation (Wood County only)

V. Identified Unmet Needs

VI. Summary/Looking Ahead

2009 ANNUAL REPORT

SECTION I. MISSION, VISION, AND VALUES

MISSION: The Aging and Disability Resource Center of Central Wisconsin promotes choice and independence through personalized education, advocacy, and access to services that prevent, delay, and lessen the impacts of aging and disabilities in the lives of adults.

VISION: We are widely recognized as the preferred choice for initial contact and early access to information and resources that prevent, delay, and lessen the impacts of aging and disabilities in the lives of adults. Our regional resource center promotes easy access to innovative ADRC services so that our consumers participate in the community as they desire, and live with dignity, respect, health, and purpose.

VALUES:

- Customers are entitled to compassionate and excellent customer service.
- Integrity is the foundation of our agency.
- Employees are our most valuable assets.
- We respect diversity and appreciate the unique contributions and abilities of everyone.
- We partner with individuals and the community.
- We approach the future with innovation and creativity.

2009 ANNUAL REPORT SECTION II. FISCAL SUMMARY

2009 ADRC-CW UNAUDITED EXPENSES AND FUNDING SOURCES

	ADRC & Related	OAA & Related	Tax Levy	Other	Total
Personnel	\$ 1,400,352	\$ 794,717	\$ 377,214	\$ 557,979	\$ 3,130,262
Operating	\$ 299,434	\$ 1,009,374	\$ 196,398	\$ 260,310	\$ 1,765,516
Total	\$ 1,699,786	\$ 1,804,091	\$ 573,612	\$ 818,289	\$ 4,895,778
<i>Percent of Total</i>	<i>34.8%</i>	<i>36.8%</i>	<i>11.7%</i>	<i>16.7%</i>	

Financial Summary

The funding sources for the ADRC-CW can be divided into four major categories as outlined above. One of the largest funding sources is a grant from the Wisconsin Department of Health Services to provide the contracted aging and disability resource center services. In addition to the contracted amount from the state, the ADRC-CW also receives revenue for MA billable services. The combination of these two revenue sources, shown as "ADRC & Related" above, accounts for approximately 34.8% of the total ADRC-CW budget. The other largest finding source comes from state and federal grants through the Older Americans Act (OAA), as administered by the Greater Wisconsin Area on Aging Resources. Included in the OAA revenue are donations from participants and revenue from contracted services. The combination of OAA grants, donations, and revenue, shown as "OAA & Related" above, accounts for approximately 36.8% of the total budget. The ADRC-CW also receives county tax levy used to support administrative costs that cannot be charged to grants. Tax levy from the two counties accounts for approximately 11.7% of the total budget. The fourth source of funding comes from other grants, including the state 85.21 grant for transportation in Wood County, other smaller prevention grants, revenue from contracted services, user fees, donations, and other miscellaneous revenue, accounting for approximately 16.7% of the total budget.

2009 ANNUAL REPORT

SECTION IV. CORE SERVICES

Aging and Disability Resource Center Services

The ADRC-CW contracts with the state Department of Health Services to provide Aging and Disability Resource Center services. The contract specifies the services that must be provided, which include: Information and Assistance, Long-term Care Options Counseling, Pre-Admission Consultation, Elderly Benefits Counseling, Disability Benefits Counseling, Access to Publicly Funded Long-Term Care Programs, Access to Other Public Programs and Benefits, Short Term Service Coordination, Access to Emergency Services, Access to Adult Protective Services, Transitional Services for Students and Youth, Client Advocacy, Prevention and Early Intervention Services, Marketing, Outreach and Public Education, and Community Needs Identification. Services are provided to older adults, adults with disabilities, and adults with mental health and alcohol and drug abuse issues.

Services Provided by the Resource Specialists

In 2009, the major challenge for our Resource Center Services was the implementation of the new long-term care programs, which began in November of 2008 for Marathon County and January of 2009 for Wood County. At that time, the ADRC-CW assumed responsibility for managing the long-term care waiting lists in those two counties, determining eligibility for placement on the waiting list, and enrolling all participants in the publicly funded long-term care programs of Family Care and the IRIS waiver program.

At the time the ADRC-CW began managing the waiting lists, there were 686 older adults and adults with disabilities on the waiting list in the two counties. The first person on the Wood County waiting list had been waiting for services since 1987 and the first person on the Marathon County waiting list had been waiting for services since 1982. We have been regularly removing individuals from the waiting list at a pace directed by the state, but we continue to put new individuals on the waiting list as well. At the end of 2009, there were 568 individuals on the waiting list for both counties. The good news is that all of the individuals who were on the original waiting lists were served in the early part of 2010. Also, the current amount of time an individual waits for services has shrunk to approximately 16 to 20 months, rather than years, as it had been in the past.

In 2009, there were 508 new enrollments in either Family Care or the IRIS waiver program. Referrals came from a number of sources, many from the waiting list, but also from waiver participants who transferred from other counties, or disabled children who became eligible as they turned 18. Also, many residents of nursing homes who were eligible for services chose to enroll in Family Care or IRIS in order to leave the nursing home. Through the state's Community Relocation Initiative program, there is no waiting list for eligible nursing home participants. One trend that developed throughout 2009 was an increase in individuals choosing the IRIS program rather than the Family Care program. The eligibility for the two programs is the same. The IRIS program (Include, Respect, I Self-direct) is a program in which the individual self-directs his or her publicly funded, community-based, long-term care supports and services based upon a set budget. Referrals for the IRIS program increased throughout 2009 for a total of 53 referrals. Of the total IRIS referrals, 24 occurred in November and December of 2009.

Even though the advent of the new Family Care program in both Marathon and Wood counties dramatically increased the workload of the ADRC-CW, the majority of the individuals served in an Aging and Disability Resource Center will never need access to publicly funded long term care. A common misperception of the work of the Aging and Disability Resource Center is that most of the customers are low-income individuals. This is not true; the mission of the ADRC-CW and the model for Aging and Disability Resource Centers across the state is to serve all individuals, regardless of income. As outlined earlier in this report, the ADRC-CW provides many services to older and disabled adults. The ADRC-CW Resource Specialists served 5,082 consumers in 2009 and made 13,427 contacts. One of our services is to provide a pre-admission consultation to individuals entering either a nursing home or an assisted living facility. This provides an opportunity for the individual and their family to receive information about all of the options for services available to them. In 2009, the ADRC-CW received 2,586 referrals for pre-admission consultations.

Services Provided by the Benefit Specialists

Elderly Benefits Counseling is provided to individuals aged 60 and over and Disability Benefits Counseling is provided to individuals aged 18 through 59 with developmental disabilities, physical disabilities, mental illness and/or substance abuse disorders and for youth transitioning into the adult long-term care system. Counseling includes providing information about, and assistance in, obtaining or retaining public and private benefits for which the individual is eligible. Elderly Benefit Specialists and Disability Benefit Specialists provide this service to residents

of our two-county service area. The Elderly Benefit Specialists served 1,031 consumers in 2009 and the Disability Benefit Specialists served 411.

In 2009, the Benefits Specialists faced some workload challenges. Counseling for Medicare recipients regarding their Part D prescription drug coverage continues to be an enormous challenge. There is a specified time during the year for open enrollment into a Part D plan when all recipients must make a decision as to which of the many drug plans would serve them best. Our Elderly Benefit Specialists attempt to assist as many people as possible with this very complex task. In order to assist more people in 2009, the ADRC-CW recruited some local student volunteers to assist with this process, which was very successful.

Another challenge identified by the Disability Benefit Specialists was an increase in referrals in 2009 for individuals needing assistance with applying for disability benefits. Due to the higher unemployment rate, individuals who had previously been employed even though they had a disability were losing their jobs. Their inability to find other employment required them to seek disability benefits when they hadn't needed to in the past.

Learning and Wellness/Caregiver Support

In order for the ADRC-CW to meet its mission to “prevent, delay, and lessen the impacts of aging and disabilities in the lives of adults,” all of our core services must work together to assist our consumers in accessing the support and services needed to achieve optimal physical and emotional health. The Learning and Wellness/Caregiver Support service area provides prevention and wellness class offerings and facilitation of community wide prevention services, home repair and temporary ramp services, chore referral services, and caregiver support services.

Prevention and Wellness Services

Prevention and Wellness services focus on providing evidenced-based prevention classes through trained instructors, collaborating with community partners in promoting healthy living for older adults and adults with disabilities, and providing community education. Classes offered include Stepping On: Building Confidence and Reducing Falls, Living Well with Chronic Conditions, Arthritis Foundation Exercise Program, Yoga, Tai Chi, and Growing Stronger. Community Health Educators work with community partners and local coalitions to enhance the network of support and resources available in our communities to keep older adults and adults with disabilities healthy. In the area of falls prevention,

research shows that many falls can be prevented by better medication management. In 2009, a medication management project was begun to assist individuals to better keep track of their medications and communicate with the medical community. Partnerships were formed with several local fire departments to coordinate efforts in falls prevention and medication management.

One of the biggest challenges in 2009 in Prevention and Wellness Services was the end of two major grants that focused on prevention services. The Live Well Fall Free grant was funded by the state to develop the evidenced-based falls prevention and chronic disease self-management programs. This grant was eliminated by the state at the end of 2009. Also ending in 2009 was a three-year Community Connections to Promote Independent Living grant. As a result of the end of these two major grants, the ADRC-CW had to reduce staff from four Community Health Educators to two. A commitment to prevention services is critical to the mission of the ADRC-CW, the mission of the state ADRC network, and the mission of the Aging network. Therefore, funding was taken from several of our OAA grants and our state ADRC grant to insure this critical service continues.

In 2009, the ADRC-CW began to expand prevention and wellness services to younger adults with disabilities, rather than focusing primarily on older adults. This will continue to be a focus as we enter 2010. Also, in response to a suggestion from a consumer focus group, classes began to be offered in community settings, such as community centers and churches, in order to make offerings more accessible to our consumers.

Senior Home Repair

The senior home repair program recognizes that a small amount of in-home assistance can make a significant difference in an individual's ability to live safely in his or her own home. The program uses a pool of trained volunteers to provide assistance in the homes with small repair jobs that may impact an individual's independence. In addition, the ADRC-CW has an inventory of several sizes of temporary ramps that can be used in a home for up to six months to increase accessibility. In Wood County, a chore referral service is provided for consumers looking to pay someone for some type of service in the home. ADRC-CW staff screen and perform background checks of the potential in-home providers. All of these services together improve an individual's ability to live independently at home and improve his or her quality of life.

Changes to the home repair program in 2009 include expansion of home repair and temporary ramp services to Marathon County residents. This program has been hugely successful.

Caregiver Support Program

The Caregiver Support Program provides education, support, and access to resources to individuals providing care to an older adult or an adult with a disability. Services include an educational program for caregivers called Powerful Tools for Caregivers; support groups for caregivers, including support groups for caregivers of individuals with Alzheimer's or related dementia; information and assistance related to caregiver issues; collaborating with community partners regarding developing a network of support for caregivers; providing community education; and administering the limited financial assistance available to caregivers. The Caregiver Support Program also administers the Project Lifesaver Programs in both Marathon and Wood County, which is a program that provides a bracelet tracking system for individuals at risk of wandering away and becoming lost.

In 2009, one of the challenges for the Caregiver Support Program was a severe reduction in the amount of the state Alzheimer's Family Caregiver Support Program grant, which provides direct service funds for individuals providing care to a person with Alzheimer's or related dementia. The limitation of these funds, which can pay for such items as respite to give the caregiver a badly-needed break, was disappointing in light of the increased demand we see for caregiver assistance.

A new collaboration was developed in 2009 between the ADRC-CW and the Aspirus Memory Clinic. The Aspirus Memory Clinic targets its services to older adults in the north central Wisconsin area who are experiencing memory difficulties which may be the result of Alzheimer's disease or other forms of dementia. The clinic assesses the needs of the families and caregivers, and links them with the community support services that will help them deal with the diagnosis, and with immediate and future needs. The ADRC-CW Social Worker who provides caregiver support services attends memory clinic sessions in order to provide easy access to information on resources to the individuals and their families.

Nutrition Services

The ADRC-CW provides nutrition services to older adults throughout Marathon and Wood counties, with funding primarily from state and

federal Older Americans Act (OAA) grants. According to the OAA, the purpose of the elderly nutrition program is to:

- To reduce hunger and food insecurity
- To promote socialization of older individuals
- To promote the health and well-being of older individuals by assisting such individuals gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior

Within the ADRC-CW, the nutrition program is critical in meeting the mission of the agency. As one of the longest running and most recognized program for older adults in the area, the program reaches thousands of residents each year in providing not just a meal, but opportunities for socialization, nutrition education and health promotion, and information about other ADRC-CW services and community resources. The nutrition program includes meals provided at congregate sites, home delivered meals delivered to homebound individuals, and nutrition assessments, counseling, and education. In addition, the ADRC-CW administers the Farmer's Market Nutrition Program in Wood County, whereby eligible residents can receive a \$25 voucher to be used to purchase fresh produce at local farm stands. There were over 300 vouchers distributed in Wood County in 2009.

The ADRC-CW supports nine traditional congregate dining sites: one in Wausau at the Towers residential complex, two in Marshfield, one in Pittsville, one in Nekoosa, and four in Wisconsin Rapids. The rural areas of Marathon County are served by the Senior Nutrition Access Coupon program, or SNAC. The SNAC program is provided at seven rural Marathon County restaurants. Participants in the SNAC program can choose to dine at any of the participating SNAC restaurants, where they choose a nutritious meal that has been approved by the ADRC-CW Nutrition Program Manager. The eligibility for SNAC is the same as the traditional congregate sites.

At the beginning of 2009, due to concerns about the fiscal stability of the nutrition program, the ADRC-CW Board was reviewing different options, including securing an independent contractor to administer the program. However, with some personnel re-structuring, securing a more cost effective food vendor, and implementing some additional cost savings strategies, the nutrition program closed out 2009 in excellent financial shape and is considered fiscally sound going into 2010. Also in 2009, the SNAC program participated in an in-depth analysis by the state and is no longer considered a "pilot" program, insuring the program will be

continuing. Marathon County remains the only county in the state to be approved to provide the SNAC program.

2009 NUTRITION PROGRAM MEAL COUNT SUMMARY

	2009
Congregate	
South Wood County	17,799
North Wood County	15,427
<i>Wood County Subtotal</i>	<u>33,226</u>
Marathon County – SNAC	23,490
Marathon County – Towers/Terrace	<u>20,660</u>
<i>Marathon County Subtotal</i>	<u>44,150</u>
Congregate Total	77,376
Home Delivered Meals (HDM)	
South Wood County	16,870
North Wood/Western Marathon Cty	8,430
Marathon County	<u>44,613</u>
Home Delivered Meal (HDM) Total	69,913
Grand Total	147,289

Transportation Services - Wood County Only

The ADRC-CW provides a number of transportation services to residents of Wood County, funded by various federal, state, and county funding sources. The largest grant comes from the state-funded 85.21 specialized transportation program that serves the elderly and persons with disabilities. Only counties are eligible to apply for 85.21 funds; every county in Wisconsin provides transportation to the elderly and disabled through the 85.21-funded program. The ADRC-CW provides bus, van, and volunteer driver services to elderly and disabled riders throughout Wood County. The buses and vans are wheelchair accessible with flexible routes based upon demand. In 2009, 761 different individuals utilized transportation services from the ADRC-CW.

The ADRC-CW coordinates volunteer driver services with Wood County Department of Social Services to provide rides to medical appointments that are reimbursed through medical assistance. The ADRC-CW recruits and trains drivers and schedules and coordinates the rides.

The ADRC-CW also provides a subscription bus service for disabled individuals to attend work, training, and other community integration activities. Prior to 2009, Wood County Unified Services had paid for bus service for disabled individuals attending the Opportunity Development Center and other community-based training programs. In January of 2009, with the advent of Family Care in Wood County, these same disabled individuals began receiving funding for community services through the Family Care program. The ADRC-CW entered into a contract with the Family Care managed care organization, Community Care of Central Wisconsin, to continue to provide bus service for disabled individuals funded by Family Care. The ADRC-CW also has contracts with other Wood County service providers for bus service for their participants.

Additional services the ADRC-CW transportation program provides to the Wood County community include the AARP driver safety course and the AARP Car fit/Car care program. The ADRC-CW works with other partners in the community to increase safety in older drivers through these programs.

In 2009, the ADRC-CW received a federal New Freedom grant. The federal New Freedom program's goal is to "provide additional tools to overcome barriers for Americans with disabilities." In Wisconsin, the New Freedom funds are administered through the Department of Transportation and are used to fund mobility management projects throughout the state. Mobility management focuses on managing and delivering coordinated transportation services to older adults, people with disabilities, and individuals with lower incomes. It also focuses on coordinating transportation services and providers in order to achieve a more efficient transportation service delivery system. Through the New Freedom grant, the ADRC-CW employs a Mobility Manager, who facilitates local transportation networks and collaborations, including involvement in discussions regarding intercity transit, promoting the Ride Share program, and involvement in the Wisconsin Rural and Para transit Provider organization and Workforce solutions.

In 2009, an ADRC-CW Transportation Ad Hoc committee met to review transportation in both Marathon and Wood counties and to facilitate coordination between the two counties regarding transportation for the elderly and disabled. Those meetings were successful in identifying the complex issues involved in coordinating transportation services with the many different funding sources and administrative bodies providing oversight. Work continues in identifying unmet transportation needs in the two counties and methods to address those needs.

At the end of 2009, the Family Care managed care organization, Community Care of Central Wisconsin, enacted some policy changes that reduced the number of individuals receiving bus service from the ADRC-CW. The number of riders on the subscription bus service was significantly reduced, as was the revenue to pay for these routes. The ADRC-CW revised bus service routes as a result of this change to increase opportunities for other Wood county riders. However, this reduction in service for disabled individuals continues to be a challenge as we enter 2010.

SECTION V. IDENTIFIED UNMET NEEDS

As mentioned earlier in this report, one of the contractual requirements of the Department of Health Services for our aging and disability resource center services is to identify unmet needs in our service area. In 2009, the ADRC-CW Resource Specialists identified the following areas as inadequate to meet identified needs:

Dental Services

- Individuals covered by Medical Assistance continue to see significant shortages of dentists who are willing to serve them, resulting in many elderly and disabled individuals going without dental care, which significantly compromises their health.

Home Care Services (non-medical)

- Home care services, such as supportive home care and in-home personal care, are limited in some of the rural areas of our region, particularly in the western Marathon County area, such as Abbotsford and Spencer. Home care providers are often unable to adequately serve the rural areas due to the distance and inconsistent demand for service.

Housing Assistance

- There appears to be a shortage of affordable housing in both Marathon and Wood counties. In particular, elderly and disabled individuals who either have poor credit or a criminal history have difficulties finding housing, since they are ineligible for subsidized low-income housing.

Mental Health Services

- Access to mental health services is inconsistent throughout the service area, depending upon the need. In Marathon County, services are adequate for individuals who are eligible for the county Community Support Program or the Comprehensive Community Services program, but other individuals with less severe mental health issues may find access to services limited.

- In Wood County, access to psychiatric services is limited, as is access to mental health services for individuals with severe and persistent mental illness, partly due to the lack of a state-certified Community Support Program.

Support Services for Disabled Children Transitioning to Adulthood

- Services are limited for children with certain disabilities, including learning disabilities, who are transitioning to adulthood. These individuals may be found to be ineligible for support through Family Care or DVR, but limitations in their cognitive, emotional, or mental health functioning inhibit their ability to live and work independently. For these individuals, needed supportive services are not available.

Transportation

- Transportation services are limited in the rural areas of our region, as in most rural areas of Wisconsin. This inhibits elderly and disabled individuals' access to medical care and other needed services.
- In Marathon County, the Para transit services are curbside only, which limits access to transportation for some elderly and disabled individuals. Due to mobility concerns, some individuals require assistance going up and down steps, and/or ambulating to and from vehicles.

SECTION VI. SUMMARY/LOOKING AHEAD

The Aging and Disability Resource Center of Central Wisconsin, serving Marathon and Wood counties, provides a network of support and services in order to meet our mission of preventing, delaying, and lessening the impacts of aging and disabilities in the lives of adults. Looking ahead to 2010 and beyond, a priority will be placed on developing the foundation of the new four-county organization. The ADRC-CW will not be expanding to any other counties, so it is important to now develop a sound infrastructure that will serve the four-county organization well into the future. We must also insure that consistent, high quality services are available throughout our service region. At the same time, the ADRC-CW needs to be responsive to regional differences in service needs as identified by our consumers. Through multiple methods of input, using formal advisory committees, community coalitions, and direct feedback from our customers, the ADRC-CW must be responsive to consumer and community needs. To meet the demands of an increasing elderly and disabled population, the ADRC-CW must focus not on service provision, but rather on building a supportive community that empowers individuals with the tools necessary to experience the best quality of life.