AGING AND DISABILITY RESOURCE CENTER OF WESTERN WISCONSIN

ADVISORY COMMITTEE MEETING

Date: October 2, 2012

Time: 1:00-3:00pm

Place: Vernon County Courthouse

Staff/Guests Present Daniel Beyerl-Chair Peggy Herbeck **Cheryl Neubauer** Jill Kaphengst Pam Eitland Jo Ann Nickelatti Margaret Rewald-Vice Chair Beth Smetana Jim Rice Jean Klousia **Dorothy Will** Linda Lazer **Richard Yarrington** Roberta Decorah Alice Olson Kelly Tourdot Jennifer Salisbury

Call to Order:

The meeting was called to order by Daniel Beyerl, Chair, at 1:00pm.

Review of Meeting Minutes:

Input was requested by Daniel Beyerl as to any corrections or changes in the attached meeting minutes. There were no corrections or changes that needed to be made. Jo Ann Nickelatti approved and Maggie Rewald seconded.

Partner County Updates:

Jean Klousia introduced Jennifer Salisbury new Social Worker in the ADRC-WW working in Vernon County. She was previously working as a Disability Benefit Specialist in Sauk County. The number of referrals not as numerous as in previous quarters but they are more complex in nature. People are calling with more issues and social workers are working on cases for a longer period of time and making multiple visits. Many referrals are made by concerned family members, friends or community agencies and when the social worker initially visits the person being referred, they say they don't need anything. As soon as the social worker reassures the person that they aren't trying to sell them anything and just there to talk about options, their guard tends to go down. Many times it can take several home visits for people to come to the realization that they may need some assistance in their home.

Alice Olson put together an informational handout (distributed to group), for an outreach that was conducted at Assisted Living and Community Based Residential Facility (CBRF). The handout addresses the opportunity for people to contact the ADRC-WW if they are looking at alternative housing arrangements so they have a true understanding of the wide variety of housing options and the financial impact their choice may have.

Alice also provided a consumer success story which involved an elderly gentleman who moved to Vernon County to retire. After having a seizure while driving, his health deteriorated and he began to need more assistance at home. A counselor recommended he call the ADRC to discuss options. Alice provided private pay options as his income was \$1,500/mo. This amount is over the financial eligibility to enroll in a long term care program without a substantial cost share. Due to bills, he couldn't afford to private pay for the services he needed. Alice assisted him in applying for the Medicaid Purchase Plan (MAPP) which would eliminate a cost share so he could enroll in Family Care. MAPP has higher financial eligibility criteria as the person has to be employed in some capacity to receive this type of Medicaid. By enrolling in Family Care, he is now receiving the services necessary to remain living in the home safely.

Alice provided another success story that involved five or six visits to a farmer and his wife before they would accept assistance. The farmer had a dementia diagnosis which caused an increased need for assistance. His wife was his care provider and was starting to develop caregiver burnout but she wanted her husband to remain living in the home. They rented the farm land out to pay for the taxes and they had minimal social security and struggled to make ends meet. A friend called the ADRC-WW and Alice paid a visit. Being proud people, they did not want "welfare". Their family lived out of town and the wife did not want someone they didn't know to come in to their home. Alice referred the couple to the Aging unit and Pat Peterson from Aging was able to provide them with 20 hours of Caregiver support funding and Home delivered meals. A neighbor was able to get paid to provide respite for the wife to get a needed break. After they used the 20 hours of support, Pat called Alice back and she went out to visit the couple again. This time they were more interested in assistance as they experienced what help in the home could do for them. After several more trips they finally decided to enroll him in the IRIS program. The wife became a paid caretaker and the neighbor, a paid respite provider. The farmer was able to receive the needed services through the IRIS program to remain living in their home which was the wife's initial outcome.

Jackson County Director, Beth Smetana, read a report written by Erica Larsen as she was unable to attend today's meeting. "Referrals have been up this month and there has been a steady amount of walk-in foot-traffic into the Jackson County ADRC office. There has been an increasing amount of very intricate, complex, time consuming referrals."

"There have been a few operational changes within the ADRC over the past 3 months. Due to a State and local shift of focus onto providing evidenced based programming, our Jackson ADRC-SW staff is no longer assisting with Salvation Army or Goodwill requests and the responsibility has been shifted to the Public Health Department. This shift has allowed ADRC staff more time focusing on referrals, outreach, documentation, and getting trained for 2012 and 2013 evidenced based programming initiatives. Also, to allow social work staff more flexibility in their day-to-day schedule, the ADRC-WW Jackson Office is open for walk-in service Monday through Friday from 9:00am – 3:00pm (yet if there is an emergency, someone would be able to assist). This change has shown to have no conflict with the community are our local office is able to serve anyone in need."

"During that past quarter, Jackson social work staff has been trained in evidenced based programming – including Living Well with Chronic Conditions and the Arthritis Foundation's Exercise Program. It is important to note that both of these evidenced based program trainings for ADRC staff were funded through Aging dollars as both ADRC and Aging staff will work collaboratively to provide these programs in Jackson. There is a buzz throughout the community about these initiatives as the ADRC and Aging

staff are starting to get an influx of calls from individuals already interested in signing up. An outreach to medical professionals will be performed by Erica Larsen in the fall of 2012 to alert medical professionals about these programs offered locally on a donation basis."

Kelly Tourdot, Social Worker from the ADRC-WW Monroe County, was representing Sue Rettler as she was not able to attend. Kelly stated they have 98 cases open in Monroe County and they are busy with referrals. They just completed outreaches to both Nursing Homes and Assisted Living facilities which were well attended.

Peggy Herbeck provided an update on the ADRC-WW La Crosse office. They recently had three Social Worker's and one Call Center staff person leave the section but all positions are filled now and training is taking place. Some of this training will be held jointly as Vernon County also has a new Social Worker. Peggy discussed the "Aging in Place" outreach she presented at where they had "Certified Aging in Place Specialists" who look at the construction of homes and offer suggestions to make them more accessible as people age. This may be a beneficial service that could be offered to the public in the future. All of the ADRC-WW Counties have now been working with Western Region Economic Assistance (WREA) for nine months now and most of the major bugs have been worked out. There are some regional meetings to see how things are working out between Economic Support and the ADRC'S.

The Social Worker's and Supervisor's from all four Counties are coming together monthly in La Crosse from 9-12pm to receive the same training and information across Counties. We want people to walk in to any of the four Counties and receive the same information. Kelly Tourdot said that the meetings have been very positive.

ADRC-WW Statistics:

Cheryl discussed the number of phone calls to the Call Center this last quarter has increased but the number of referrals that move on to be assigned to a staff person has remained the same (see handout). Information was provided on the numerous outreaches in the community done by staff in each county.

Peggy provided enrollment data now that there is open enrollment for Long Term Care Programs (LTC) (see handout). Enrollment in a LTC program tends average 50 referrals per month. Next quarter Peggy will add the number of disenrollments from the LTC programs so a net gain for these programs can be seen.

Peggy provided the met/unmet needs information for Audra as she was unable to attend. She explained that the information gathered is based on what the Social Worker feels the consumers needs were and if they felt they met these needs or not. Most of the unmet needs were due to the consumer not showing up for a scheduled appointment or not being able to contact them after the referral was initially called in.

<u>Update on Process Improvement Teams:</u>

Peggy provided the results of the Central Enrollment PI team she facilitated. Central enrollment involves pushing a button on the Program Participation Screen (PPS) to enroll a person who has Medicaid (MA). This role is performed by Economic Support when the person does not have MA prior to enrolling in a LTC program. Previously this central enrollment function was performed by a La Crosse supervisor but now with extensive training and the development of a process, all of the Social workers can complete

this task. The Social workers are doing well with this new process and it has freed up some of the supervisors time.

Jean provided the results of the Packet PI team she facilitated. She was surprised to see the amount and the variety of paperwork in a packet from County to County. No two Counties were the same. The team met 3 times for 3.5 hours each time and was comprised of someone from each County. They all looked at what was needed or not from each County packet. They also organized the packets and paperwork in a way that made sense to the Social workers that use them. La Crosse clerical staff will be putting the together the packets for consistency and the Disability Benefits Specialist packets will be put together by Vernon County clerical staff. Each County will put together their own auxiliary packet with information that the Social workers don't always use but may be needed in certain situations.

Kelly provided information on the Enrollment Process PI team for Sue. After completion of the PI team, there were still a few updates made to the process due to some changes in the way the ADRC accesses Economic Support. The process is now complete and the list is in the packets. Social workers from each County were doing things differently even though they thought they were all doing it the same way. The previous enrollment process might not have been the same, but the end result of enrollment into a LTC program was.

ADRC-WW Committee Membership:

Peggy read an e-mail from Diana Adamski (see handout) regarding the Governing Board contract regarding membership. Denise Lorenz, the second DD representative, has resigned as she is no longer working in the area of developmental disabilities. Erica Larson from Jackson County is actively recruiting someone to represent to tribe. Roberta Decorah said she has the name of someone but it hasn't gone through the process yet. She hopes the person will be at the next Advisory Board meeting. Peggy will send Denise a certificate of recognition for her work on this board.

Ho-Chunk Nation Aging and Disability Resource Specialist (ADRS)

Roberta Decorah is the ADRS for the Ho-Chunk Nation. She began her position on May 4, 2012. Her role is to engage tribal members seeking services. She is going out to tribes and meeting with the elderly and developmentally disabled population. The main issue in the Ho-Chunk nation at this time is diabetes and the secondly, heart disease. Prevention services and chronic disease management services are needed. Dr. Thundercloud, from Ho-Chunk Nation Health Services, is working on these issues. Elders refuse to go to nursing homes as they think they will never come out. In looking at marketing to the people of the Ho-Chunk Nation, Ho-Chunk words in the materials will increase the likelihood that it will be read. Roberta is working with individuals to try to wrap services around the persons needs. There are lots of services available for people; they just need to be willing to accept them. There are services through the tribe to help with Independent Living; transitioning from adolescence to adulthood. Roberta is a part of the Division of Supportive Services and a tribal picnic was held where she sat down and engaged in a conversation with the elders to find common ground. Once a rapport is established, she can begin to talk about services. Roberta spends one day a week in Black River Falls and two days a week in the Wisconsin Dells. When working with individuals under the age of 60, she feels the living arrangements are not adequate and an unmet need is a ramp on homes.

A few challenges she sees are trying to identify internal resources and the best way to utilize services. She is working with both ADRC-WW and ADRC of Southwest Wisconsin to get people's needs met in those communities. Daniel asked are there Ho-Chunk services overlap with County services? Roberta believes there is a wide array of services to benefit tribal members and does believe there is also some

overlap of various programs. Tribal member's think of LTC, and they think of assets, and a home being an asset. They don't want to leave their home, so family members come in to help. There needs to be education on financial qualifications for LTC programs. In 2015 the number of tribal elders will double. The number of elders over the age of 70 is not large due to early death. Educational materials on diabetes are need for the younger tribal members as they are more frequently becoming blind due to the untreated disease.

Peggy said that Roberta did a nice job laying the groundwork for the ADRC Social workers to feel comfortable working with the tribal members and will assist the process by having the member sign the needed release of information forms upfront which will help facilitate the process.

Reducing Hospital Admissions

Peggy briefly spoke about the regional meeting that will be held October 19th in Viroqua to discuss the Medicare initiative to decrease the hospital readmission rate. Medicare has implemented a policy that if someone is readmitted to the hospital for the same conditions within 30 days, they will not be paid. Medication reconciliation is the component this group will explore. It has been found that people who are discharged from the hospital go home with a multitude of medications and they aren't always taking them as prescribed for many reasons. Discussion ensued around the table regarding people being discharged from the hospital before they are ready to go home because Medicare stops paying.

Committee Member Involvement and Feedback

Jo Ann Nickelatti attended the Wisconsin Counties Association meeting in La Crosse. Jim Rice also attended and went to a meeting which provided an update on the MCO, ADRC and IRIS. The presenters did a good job providing information. Jim asked about the Eau Claire region and questioned why the Managed Care Consortium was folding. He said no one at the meeting could say anything about it. Pam Eitland explained that the State put out feelers to the other MCO's to see if there was interest in taking over the Consortium. The State will meet with the group to see if they can meet the needs of the consumers and if not, then they may ask other Consortiums to help out.

Dorothy said when she went to the Long Term Care Committee meeting that Eau Claire and Chippewa Counties were not happy about the reimbursement rate as they felt they didn't receive enough money to pay for the needed services in the community.

Upcoming Meetings/Topics

Next meeting will be help on December 11, 2012 from 1:00-3:00pm at Monroe County Human Services in Sparta.

Adjournment at 3:10pm.

Minutes may be approved, amended or corrected at the next advisory board meeting.

Respectfully submitted by:

Cheryl Neubauer