Agenda Eau Claire County Aging & Disability Resource Center Board Monday, November 12, 2018, 3:30 pm. Rooms 1301/1302 Courthouse, 721 Oxford Avenue, Eau Claire WI 54703

1.Call to Order

- 2. Introductions
- 3. Public Comment
- 4. Review ADRC Board meeting Minutes October 10, 2018 / Discussion Action Handout 1
- 5. Chair-Vice Chair Report Handout #2

6. Director Report

- Recruitment and transition
- o 3rd Quarter Report Handout #3
- 7. Introduce Options Counselor Supervisor (Lisa Riley)
- 8. 2019 proposed performance management changes / Discussion Action Handout #4
- 9. Transportation
 - Vehicle Modification grant program / Discussion Action Handout #5
 - 0 85.21 grant application / Discussion Action Handout #6
 - Other items
- 10. Nutrition
- 11. Advocacy Handout #7
- 12. Upcoming events Handout #8
- 13. Future agenda items ADRC Board: Monday, December 10, 2018, 1:30 pm, Director interviews
- 14. Adjourn

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 715-839-4710, (FAX) 715-839-1669, tty: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

Handout #1

Eau Claire County

Aging & Disability Resource Center Board and Sub Committee on Older Americans Wednesday, October 10, 2018, LE Phillips Senior Center, 1616 Bellinger Street, Eau Claire WI 54703, following the Eau Claire County Aging Plan 2019-2021 and Wisconsin Department of Transportation 2019 Specialized Transportation Grant, 4:00 pm.

Members present:

Carl Anton, Kimberly Cronk, Sandra McKinney, Sue Miller, Ruth Adix, Jason Endres, Katherine Schneider, Stella Pagonis, Barb Baumgartner, Heather Garber, Kenneth King,

Others present: Jennifer Speckien, Rebecca Hinzmann, Emily Gilbertson, Marlene Rud

ADRC Board Chair Schneider called to order at 4:45 pm.

Introduction of ADRC Board, Sub Committee and staff.

Public comment.

Stella Pagonis, Finance Committee member, Budget and Finance Committee voted unanimously to restore the ADRC Prevention Program Coordinator position and funding for the Nutrition van. Ruth Adix gave updates on September 20 Who Will Care for You event that upcoming event in November. Katherine distributed a flyer on upcoming What Kindergartners and Canines Know.

ADRC Sub Committee, August 8, 2018 meeting minutes. Sub Committee, Chair Miller called for motion to approve. Carl Anton moved to approve. Motion carried.

ADRC Board September 13, 2018 meeting minutes. ADRC Board, Chair Schneider called for motion to approve. Motion by Jason Endres, second by Sandra McKinney. Motion carried.

Directors Report. Jennifer Speckien reviewed Grandparents and Others as Parents (GAP) support group is meeting again. Thank you to Finance Committee for restoring funding for the ADRC Prevention Program position and Nutrition van. Fundraiser coordinated by Group Health Cooperative raised over \$5,000 for Fall Creek kitchen items. Discussed possible ADRC relocation to Altoona and clarification on status.

Chair Report. Katherine Schneider thanked Jennifer and the ADRC staff for working through the budget, possible move and Fall Creek kitchen options. Katherine thanked the ADRC Board for their work as well.

No Vice Chair Report.

2019-2021 Aging Plan. ADRC Sub Committee Chair, Miller called for any further questions or concerns on plan. Motion by Stella Pagonis, second by Carl Anton to endorse the plan. Motion carried.

ADRC Board Chair, Schneider called for any further questions or concerns on the plan. Motion by Sue Miller, second by Carl Anton to endorse plan. Motion carried.

2019-2023 Transportation Coordination Plan. Emily Gilbertson noted and explained the coordination plan, and difference from 85.21 application grant. Motion by Jason Endres, second by Sue Miller to approve plan. Motion carried.

Nutrition Advisory Council. Jennifer Speckien reviewed that in order for Eau Claire County's nutrition program to be in compliance with the Wisconsin Aging Network Policy and Procedure manual, a Nutrition Advisory Council needs to be established. The current advisory council is the Subcommittee On Older Americans Act program. ADRC Board and Subcommittee members discussed repeal and recreate proposal. ADRC Board Chair, Schneider called for a motion. Motion by Kim Cronk, second by Carl Anton to approve. Motion carried. ADRC Subcommittee Chair Miller called for a motion. Motion by Barb Baumgartner, second by Ken King to approve. Motion carried.

Kitchen Expansion. Jennifer reviewed that no firm proposal received from Feed My People at this time. Discussed two Fall Creek Kitchen proposals to resolve the kitchen capacity issues. ADRC Board and Subcommittee members discussed proposals. ADRC Subcommittee Chair, Miller moved to approve Option 1. Second by Barb Baumgartner. Motion carried. ADRC Board Chair Schneider called for a motion. Motion by Sandra McKinney, second by Kim Cronk to approve Option 1. Motion carried.

Future meetings: ADRC Board, November 12, 3:30 pm. ADRC Subcommittee, December 12, 4:00 pm.

Meeting adjourned at 5:45 pm

Respectfully Submitted

Marlene Rud, Clerk Aging & Disability Resource Center Board Sub Committee on Older Americans

Chairperson

Handout #2

ADRC Director Finalists – Potential Interview Questions

- Tell us about an unmet need you identified and worked to fill in a previous job.
- Tell us about an ethical dilemma you encountered in your work and how you went about resolving it.
- How do you work with an advisory board like ours?
- What would you guess are three words that people who work for you would use to describe what kind of boss you are?
- Tell us about something you tried to do in a previous position that didn't work and what you did then.
- Tell us about a success at work that you're particularly proud of.

#1 Information & Counseling

This program provides a central source of information about a broad range of community resources and benefits of interest to people age 60+ and adults with disabilities of all incomes and their caregivers. ADRC customers are helped to understand the various short and long term care options and benefits available, use their personal resources wisely, and delay or reduce the demand for public funding for services.

| | OUTPUTS | | | | |
|---|--|-------------------------|---------------------|---------------------|----------------------------------|
| | (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Information & assistance contacts: | | 12,294 | 17,271 | 16,632 | 13,112 |
| Options Counseling Referrals | | 1182 | 1396 | 1,485 | 1256 |
| Disability Benefit Specialist Referrals | | | 326 | 469 | 328 |
| Elder Benefit Specialist Referrals | | | 656 | 933 | 684 |
| Medicare Annual Open Enrollment Referrals (Octob | er 15 - December 7) | 313 | 265 | 199 | tbd |
| Nursing Home Resident Contacts | | 205 | 171 | 129 | 126 |
| Total Number of Volunteers | | | 5 | 6 | 3 |
| Hours Donated by Volunteers | | 399 | 167 | 104 | 75 |
| Unduplicated number of people receiving assistance: | | 5,085 | 5,999 | 5,487 | 4,248 |
| Contacts for assistance ages 60+ (standard is 1,344): | | 8,646 | 12,858 | 12,405 | 10,087 |
| Contacts for assistance ages 18-59 (standard is 768): | | 3,648 | 4,413 | 4,227 | 3,115 |
| Performance Goal To provide ADRC customers with reliable and objective information so that they can access services and make informed choices about their short and long-term care options. | Outcome Measures 90% of individuals completing satisfaction survey will report the ADRC met or exceeded their expectations for assistance. | <u>Benchmark</u> 90% | <u>2016</u> 100% | <u>2017</u> 100% | <u>YTD</u> <u>2018</u> 97% |
| To provide nursing home residents with the information and assistance they need to safely relocate back into the community | We will assist a minimum of 27 nursing home residents in successfully relocating | 27 | 55 | 32 | 31 |

| | back into the community | | | | |
|--|---|------------------|-------------|-------------|-----------|
| | annually. | | | | |
| | | | | | |
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| | | | | | |
| ± | 2 Nutrition | | | | |
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| | | | | | |
| This program includes Meals on Wheels delivered th | hroughout the county. Senior | dining sites | located at | the Augu | sta |
| Senior Center, LE Phillips Senior Center, and St. Jol | hn's Apartments are included | . Additional | services tl | nat suppor | rt |
| nutrition are also a part of this program area such as | the liquid supplement progra | m and volun | teer drive | rs for Mea | als on |
| Wheels. | | | | | |
| | | | | | |
| | OUTPUTS | | | | |
| | (YTD column = Jan-Sept | | | | YTD |
| | (11D column – Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | 2018 |
| Congregate meals served: | | 9,200 | 8,850 | 8,572 | 6,729 |
| Meals on Wheels delivered: | | 69,544 | 68,785 | 65,834 | 50,543 |
| People served: | | 1,365 | 1,411 | 1,071 | 977 |
| Cases of Liquid Supplements distributed: | | 1,214 | 1,384 | 1,374 | 978 |
| Nutrition Risk Screens completed: | | 688 | 636 | 442 | 423 |
| Total number of volunteers: | | | 192 | 203 | 222 |
| Hours donated by volunteers: | | 13,605 | 12,934 | 12,640 | 10,282 |
| | | | | | YTD |
| Performance Goal | Outcome Measures | Benchmark | 2016 | 2017 | 2018 |
| To make high quality Nutrition Program services | 85% of program | 85% | 96% | 93% | tbd |
| available to eligible individuals, countywide. | participants responding | | | | |
| | to semiannual satisfaction surveys will | | | | |
| | indicate overall program | | | | |
| | satisfaction as good to | | | | |
| | excellent. | | | | |
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| | | | | | <u> </u> |
| | T | | | | |
| #3 | Fransportation | | | | |
| | | | | | |
| | | | | | |
| The county partners with the City of Fau Claire to p | | 1 (0) | | | 1. : 1:4: |

The county partners with the City of Eau Claire to provide transportation for people age 60+ and adults with disabilities who do not have access to transportation. Rides are provided for medical, nutritional, social, and employment purposes. The program is funded with a WI Department of Transportation grant and levy match.

| | OUTPUTS | | | | |
|---|--|------------------|-------------|-------------|--------------------|
| | (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Total number of para-transit trips | | 20,365 | 25,121 | 19,173 | 12,801 |
| Total number of after-hours trips on Saturday evening | g & Sundays | 2,582 | 3,720 | 3,034 | 2,214 |
| Total number of out of county trips | | 213 | 315 | 100 | 151 |
| Total number of rides for people age 60+ | | 6,969 | 10,997 | 10,696 | 6,535 |
| Total number of rides for people with disabilities | | 16,201 | 17,987 | 11,611 | 8,631 |
| Total number of volunteers | | | | | |
| Total number of hours donated by volunteers | | | | | |
| | | | | | |
| Performance Goal | <u>Outcome Measures</u> | <u>Benchmark</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| To ensure individuals using Specialized Transportation are satisfied with the service. | 90% of users responding to semi annual surveys will indicate they are satisfied to very satisfied with Specialized Transportation services. | 90% | 94% | 92% | 97% |

#4 Prevention & Health Promotion

This program includes a variety of prevention and health promotions programs. Evidenced-based prevention classes such as Stepping On, Living Well with Chronic Conditions, Living Well with Diabetes, Strong Bones, Powerful Tools for Caregivers and Healthy Eating for Successful Living are a part of this program area. Other prevention programs and promotion activities include: in home fall prevention screening and education, memory screening and referral, adaptive equipment loans, respite, and other supportive services such as in-home care or adult day services.

| OUTPUTS | | | | |
|--|-------------|-------------|-------------|--------------------|
| (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Total Prevention & Health Promotion Classes Offered: | | 35 | 38 | 32 |
| Total Number of Participants in Prevention & Health Promotion Classes: | 370 | 428 | 651 | 742 |
| Memory Screens Completed: | 133 | 44 | 69 | 69 |
| Adaptive Equipment Loans: | 237 | 281 | 331 | 230 |
| Total number of volunteers | | 16 | 13 | 14 |
| Hours donated by Volunteers | 491 | 622 | 808 | 445 |
| Individuals receiving supportive and/or respite services: | 61 | 47 | 44 | 36 |
| 1. Older Americans Act funded | 26 | 19 | 14 | 19 |

| 2. Alzheimer Family Caregiver Support Program | n funded | 27 | 14 | 15 | 14 |
|--|--|------------------|-------------|-------------|--------------------|
| 3. Tax Levy Funded | | 8 | 14 | 15 | 3 |
| | | | | | |
| Performance Goal | Outcome Measures | <u>Benchmark</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| To provide classes, risk screenings, counseling and education to ADRC customers in order to promote healthy practices and increased quality of life. | 95% of individuals responding to post class surveys will indicate the information and education provided met or exceeded their expectations. | 95% | 100% | 98% | 100% |
| | 90% of memory screens indicating risk will be referred to the participant's physician. | 90% | 80% | 44% | 15% |
| | 95% of adaptive equipment loans will be returned within 90 days. | 95% | 100% | 95% | 95% |

#5 Outreach & Public Education

This program promotes awareness of ADRC programs and issues relating to aging and disability including: staff presentations, website, Facebook page, newsletter, resource directory, posters, ads, mailings, news releases, health fairs, and a wide variety of other educational activities. It also includes education presentations such as Medicare & You, Owning Your Future, Final Affairs, The Caregiver Town hall Meeting and more.

| | OUTPUTS | | | | |
|---|------------------------------------|-------------|-------------|-------------|--------------------|
| | (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Staff presentations and educational outreach: | | 184 | 194 | 177 | 175 |
| Number of people attending presentations: | | 9,557 | 6,585 | 11,680 | 13,781 |
| Newsletters distributed: | | 26,151 | 28,690 | 30,017 | 22,520 |
| ADRC website hits: | | 26,030 | 27,657 | 27,599 | 14,295 |
| ADRC Facebook page likes: | | 336 | 426 | 529 | 617 |
| Total number of volunteers | | | 20 | 6 | 9 |
| Total number of hours donated by volunteers | | | 191 | 181 | 117 |
| | | | | | |
| Performance Goal | <u>Outcome Measures</u> | Benchmark | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |

| | | To provide a variety of educational opportunities and informational materials to ADRC customers and professionals who work with ADRC customers. | 95% of all scheduled presentations and events will not be canceled due to low participation. | 95% | 99% | 100% | 100% |
|--|--|--|---|-----|-----|------|------|
|--|--|--|---|-----|-----|------|------|

#6 Public Long-Term Care Programs

This program includes administering the Adult Long Term Care Functional Screen for people age 65+ and adults with physical and developmental disabilities to determine their functional eligibility for publicly funded long-term care programs: Include, Respect, I Self Direct (IRIS) and Family Care.

| | OUTPUTS | | | | |
|--|--|-------------|-------------|-------------|--------------------|
| | (YTD column= Jan- Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Total Family Care Enrollments | | 172 | 248 | 170 | 144 |
| 1. Inclusa | | 172 | 170 | 104 | 72 |
| 2. Care Wisconsin | | N/A | 32 | 66 | 72 |
| Total IRIS Enrollments | | 44 | 46 | 52 | 62 |
| Medical Assistance Applications the ADRC Assiste | d With | 155 | 202 | 197 | 138 |
| | | | | | |
| Performance Goal | <u>Outcome Measures</u> | Benchmark | 2016 | <u>2017</u> | <u>YTD</u> 2018 |
| To provide functional eligibility determination in an accurate and timely manner. | 100% of ADRC staff certified to conduct the functional screen will successfully complete Continued Skills Testing to maintain their certification. | 100% | 100% | 100% | 100% |
| | | | | | |

#1 ADRC

This program provides a central source of information about a broad range of community resources and benefits of interest to people age 60+ and adults with disabilities of all incomes and their caregivers. ADRC customers are helped to understand the various short- and long-term care options and benefits available, use their personal resources wisely, and delay or reduce the demand for public funding for services. Services in this program area are funded by the State ADRC funding, Money Follows the Person funding and Dementia Care Specialist funding.

| OUTPUTS | | | | |
|---|---|--|---|--|
| (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| (YTD column = Jan-Sept results)201520162017& assistance contacts:12,29417,27116,632iseling Referrals118213961,485nefit Specialist Referrals205171129Care Enrollments172248170wrollments172248170wrollments444652stance Applications the ADRC Assisted With155202197tions and educational outreach:184194177cople attending presentations:9,5576,58511,680number of people receiving assistance:5,0855,9995,487assistance ages 60+ (standard is 1,344):8,64612,85812,405assistance ages 18-59 (standard is 768):3,6484,4134,227Performance GoalOutcome Measures ompletingBenchmark20162017DRC customers with reliable and ormation so that they can access90% of individuals completing90%100%100% | 16,632 | 13,112 | | |
| | 1182 | 1396 | 1,485 | 1256 |
| | | 326 | 469 | 328 |
| | 205 | 171 | 129 | 126 |
| | 172 | 248 | 170 | 144 |
| | 44 | 46 | 52 | 62 |
| isted With | 155 | 202 | 197 | 138 |
| | 184 | 194 | 177 | 175 |
| | 9,557 | 6,585 | 11,680 | 13,781 |
| nce: | 5,085 | 5,999 | 5,487 | 4,248 |
| | 8,646 | 12,858 | 12,405 | 10,087 |
| 68): | 3,648 | 4,413 | 4,227 | 3,115 |
| Outcome Measures | Benchmark | 2016 | 2017 | <u>YTD</u> 2018 |
| | 90% | 100% | 100% | 97% |
| | (YTD column = Jan-Sept results) isted With isted With isted With isted With <u>Outcome Measures</u> 90% of individuals completing satisfaction survey will report the ADRC met or exceeded their expectations for | (YTD column = Jan-Sept results)2015 12,29412,29411822051724444isted With1551849,5579,5575,08544):8,64668):3,64890% of individuals completing satisfaction survey will report the ADRC met or exceeded their expectations for90% | (YTD column = Jan-Sept results) 2015 2016 12,294 17,271 1182 1396 205 171 172 248 44 46 isted With 155 202 184 194 9,557 6,585 nce: 5,085 5,999 44): 8,646 12,858 68): 3,648 4,413 Outcome Measures 90% of individuals 90% 100% completing 90% 100% satisfaction survey will report the ADRC 90% met or exceeded their expectations for 100% | (YTD column = Jan-Sept results)201520162017 $12,294$ $17,271$ $16,632$ 1182 1396 $1,485$ 326 469 205 171 129 172 248 170 44 46 52 isted With 155 202 197 184 194 177 $9,557$ $6,585$ $11,680$ nce: $5,085$ $5,999$ $5,487$ $44)$: $8,646$ $12,858$ $12,405$ $68)$: $3,648$ $4,413$ $4,227$ Outcome Measures Benchmark 90% of individuals completing satisfaction survey will report the ADRC met or exceeded their expectations for 90% |

This program includes Meals on Wheels delivered throughout the county. Senior dining sites located at the Augusta Senior Center, LE Phillips Senior Center, and St. John's Apartments are included. Additional services that support

nutrition are also a part of this program area such as the liquid supplement program and volunteer drivers for Meals on Wheels. Services in this program area are funding by Older Americans Act Title III C1 & C2, other nutrition related funding sources, participant donations and revenue generated from catering.

| | OUTPUTS | | | | |
|--|---|------------------|-------------|-------------|--------------------|
| | (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Congregate meals served: | | 9,200 | 8,850 | 8,572 | 6,72 |
| Meals on Wheels delivered: | | 69,544 | 68,785 | 65,834 | 50,54 |
| People served: | | 1,365 | 1,411 | 1,071 | 97 |
| Catering Meals Provided (Revenue Generating | ;) | | | | |
| | | | | | |
| Performance Goal | Outcome Measures | <u>Benchmark</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| To make high quality Nutrition Program services available to eligible individuals, countywide. | 85% of program participants responding to semiannual satisfaction surveys will indicate overall program satisfaction as good to excellent. | 85% | 96% | 93% | tbd |

#3 Aging Programs

This program area includes all Aging Programs besides nutrition. This includes evidenced based health promotion and prevention programs, the Elder Benefit Specialist program, volunteer coordination, caregiver support programs including the National Family Caregiver Support Program and the Alzheimer's Family Caregiver Support Program. Services in this program area are funded through contracts with the Greater Wisconsin Agency on Aging Resources as well as other donations and contributions.

| OUTPUTS | | | | |
|--|-------------|-------------|-------------|--------------------|
| (YTD column = Jan-Sept results) | <u>2015</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| Total Prevention & Health Promotion Classes Offered: | | 35 | 38 | 32 |
| Total Number of Participants in Prevention & Health Promotion Classes: | 370 | 428 | 651 | 742 |
| Elder Benefit Specialist Referrals | | 656 | 933 | 684 |
| Medicare Annual Open Enrollment Referrals (October 15 - December 7) | 313 | 265 | 199 | tbd |
| Adaptive Equipment Loans: | 237 | 281 | 331 | 230 |
| Total number of volunteers | | 233 | 228 | 248 |

| Hours donated by Volunteers | | 13605 | 13914 | 13733 | 10919 |
|---|---|---|--|---|---|
| Monetary Value of Volunteers (2018 rate is \$24 | | \$313,867 | \$327,814 | \$335,085 | \$269,590 |
| Individuals receiving supportive and/or respite s | ervices: | 61 | 47 | 44 | 36 |
| Performance Goal | Outcome Measures | <u>Benchmark</u> | <u>2016</u> | <u>2017</u> | <u>YTD</u> 2018 |
| To provide classes, risk screenings, counseling and education to ADRC customers in order to promote healthy practices and increased quality of life. | 95% of individuals responding to post class surveys will indicate the information and education provided met or exceeded their expectations. | 95% | 100% | 98% | 100% |
| # | 4 Transportation | | | | |
| The county partners with the City of Eau Claire who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund | are provided for medical, , with a focus on providing | nutritional, additional t | social, and e transportatio | employment on services to | purposes. the rural |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund | are provided for medical, , with a focus on providing | nutritional, additional t | social, and e transportatio | employment on services to | purposes. the rural |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van | are provided for medical, , with a focus on providing ded with a WI Department | nutritional, additional t | social, and e transportatio | employment on services to | purposes. the rural tch. |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund OUTPUTS | are provided for medical, , with a focus on providing | nutritional, additional t of Transpor | social, and e transportatic tation grant | employment on services to and levy ma <u>2017</u> | purposes. the rural tch. <u>YTD</u> <u>2018</u> |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fun OUTPUTS Total number of para-transit trips | s are provided for medical, , with a focus on providing ded with a WI Department (YTD column = Jan-Sept results) | nutritional, additional t of Transpor <u>2015</u> 20,365 | social, and e transportation tation grant <u>2016</u> 25,121 | employment on services to and levy ma <u>2017</u> 19,173 | purposes. the rural tch. <u>YTD</u> <u>2018</u> 12,80 |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund OUTPUTS Total number of para-transit trips Total number of after-hours trips on Saturday ev | s are provided for medical, , with a focus on providing ded with a WI Department (YTD column = Jan-Sept results) | nutritional, i additional t of Transpor <u>2015</u> 20,365 2,582 | social, and e transportation tation grant 2016 25,121 3,720 | employment on services to and levy ma <u>2017</u> 19,173 3,034 | purposes. the rural tch. <u>YTD</u> <u>2018</u> 12,80 2,21 |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund OUTPUTS Total number of para-transit trips Total number of after-hours trips on Saturday ev Total number of out of county trips | s are provided for medical, , with a focus on providing ded with a WI Department (YTD column = Jan-Sept results) | nutritional, additional t of Transpor <u>2015</u> 20,365 | social, and e transportation tation grant <u>2016</u> 25,121 | employment on services to and levy ma <u>2017</u> 19,173 | purposes. the rural tch. <u>YTD</u> <u>2018</u> 12,80 2,21: |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund OUTPUTS Total number of para-transit trips Total number of after-hours trips on Saturday ev | s are provided for medical, , with a focus on providing ded with a WI Department (YTD column = Jan-Sept results) | nutritional, i additional t of Transpor <u>2015</u> 20,365 2,582 | social, and e transportation tation grant 2016 25,121 3,720 | employment on services to and levy ma <u>2017</u> 19,173 3,034 | purposes. the rural tch. <u>YTD</u> <u>2018</u> 12,80 2,21 |
| who do not have access to transportation. Rides The ADRC also operates its own accessible van areas of Eau Claire County. The program is fund OUTPUTS Total number of para-transit trips Total number of after-hours trips on Saturday ev Total number of out of county trips | s are provided for medical, , with a focus on providing ded with a WI Department (YTD column = Jan-Sept results) | nutritional, i additional t of Transpor <u>2015</u> 20,365 2,582 | social, and e transportation tation grant 2016 25,121 3,720 | employment on services to and levy ma <u>2017</u> 19,173 3,034 | purposes. the rural tch. <u>YTD</u> |

Proposal to Change Performance Management

Background

All Eau Claire County departments are required to complete performance management. This is meant to inform budget decision and monitor program and service performance in an ongoing and consistent way. Program areas were established for the ADRC in 2008 and include: Information & Counseling, Nutrition, Transportation, Prevention & Health Promotion, Outreach & Marketing and Public Long-Term Care Programs.

<u>Issue</u>

Performance management is used in conjunction with the county budget process. Fiscal information and fulltime equivalents are calculate for each program area. Under the current format, some funding sources and parts of various FTEs may fall into more than one program area. This has created a significant administrative challenge during the budget process. It has also made it very difficult to monitor both fiscal performance and program performance because the manual process is so time intensive.

The ADRC has been working diligently with the Finance Department to re-align the department's account structure to allow generating fiscal reports simpler. Aligning both the account structure and the performance management structure will make monitoring performance and budgeting more streamlined.

Director's Recommendation

Adopt the proposed performance management changes to simplify the budget process and allow for more ease in ongoing monitoring of fiscal and programmatic performance. Modify program areas to the following: ADRC, Nutrition, Aging Programs and Transportation. Align data measures and FTE to these program areas *based on funding sources*.

The proposal is attached and has been completed using 2018 3rd quarter data for comparison and review purposes.

Respectfully submitted,

Jennifer Speckien

Jennifer Speckien, ADRC Director

s.85.21 Vehicle Modification Grant

Handout #5

<u>Purpose</u>

The s.85.21 vehicle modification grant is a financial resource for individuals in need of vehicle modification to maintain independence with transportation who, due to financial reasons, is unable to make these modifications otherwise. This grant is derived from s.85.21 state funding that the Aging and Disability Resource Center of Eau Claire County receives annually.

<u>Eligibility</u>

Eligible applicants must be elderly (60+ years), a disabled adults and/or a caregiver to someone elderly and/or disabled, and an Eau Claire County resident.

Eligibility Policy

Recipient shall be elderly (60+) with a need for vehicle modification for accessibility/safety purposes AND recipient shall not have financial means to purchase needed vehicle modifications.*

OR

Have a permanent disability that limits their accessibility to either drive their own vehicle or to ride in a vehicle AND recipient shall not have financial means to purchase needed vehicle modifications.*

OR

Recipient may be a primary caregiver of someone elderly and or an adult with a permanent disability that is in need of vehicle modification for accessibility/safety purposes, AND caregiver shall not have financial means to purchase needed vehicle modifications.*

*Individuals enrolled in long term care programs, receiving Medical Assistance (MA) or residing in group facilities are not eligible for the 85.21 Vehicle Modification Grant.

Funding

Grant funding is limited to \$5,000 unless a waiver request is granted.

Procedure

- 1. Complete grant application (Appendix A).
- 2. Submit with grant application the following:
 - a. Physician's referral form stating need for modification.
 - b. Two price quotes on estimated cost of modification from different established vehicle modification vendors. Modification costs shall be directly related to vehicle accessibility, not general maintenance of the vehicle.
 - c. Financial Eligibility Form (Appendix B).
 - d. Photo copy of vehicle to be modified title and registration.
 - e. In an applicant requests more than \$5,000 during a 12 month period a Funding Waiver Request form shall be submitted for review (Appendix C). Additional funds awarded shall be based on an evident emergent need and available trust fund dollars.
- 3. Grant Approval Process:

- a. Submit application and supplemental documents lists above.
- b. Application and supplemental materials shall be reviewed for approval by ADRC Assistant Director and Director.
- c. Approval/denial by the Assistant Director and Director shall be based upon the individual meeting outlined grant criteria and available trust fund dollars (applicant will be notified within 30 days of submitting application).
- d. Grant denials may be appealed through the ADRC appeal process procedure.
- e. Upon approval of grant request, the ADRC shall notify the recipient of approval, amount approved, and approved vendor.
- f. A contract shall be established between the ADRC and recipient, where terms and conditions of grant shall be reviewed, and recipient will sign contract.
- g. A Purchase Service Agreement shall be established with the chosen vendor.

Appendix A

85.21 Transportation Vehicle Modification Grant Application

Applicants must submit with the application the following:

- 1) Proof of automobile insurance
- 2) Physician referral summarizing the need for the modification
- 3) Financial Eligibility Form (Appendix B)

| Recipient Name: | Application Date: | | | | | |
|--|---|--|--|--|--|--|
| Address: | County of Residence: | | | | | |
| Recipient Date of Birth: | Make/Model/Year of Vehicle to be modified: | | | | | |
| Telephone: | Primary Caregiver Information (if vehicle is owned by the caregiver and not the recipient): | | | | | |
| Referring Physician Information: | Caregiver Name: | | | | | |
| Clinic Name: | Caregiver Telephone: | | | | | |
| Physician Name: | Is the Caregiver the Guardian: YES NO | | | | | |
| Clinic Telephone Number: | | | | | | |
| Is the applicant a Member of a Managed Care Organization ?: YES NO | | | | | | |
| Does the applicant receive Medical Assistance (MA)?: YES \square NO \square | | | | | | |
| Does the applicant reside in a long term care facility (ie nursing home, assisted living)?: YES NO | | | | | | |
| | | | | | | |

Description and Purpose of Vehicle Modification:

I have read and understand the 85.21 Vehicle Modification Grant Policy. All information I have submitted within the application is accurate to the best of my knowledge.

Applicant Signature: _____

_Date_____

Appendix B1

85.21 Transportation Vehicle Modification Grant

Financial Eligibility

| - | Caregiver Name (if vehicle is owned by the caregiver): | Date of Application: | | |
|---|--|----------------------|--|--|
| | | | | |

PART 1 - INCOME DECLARATION

For this section, use the estimated combined gross yearly income, unless otherwise indicated, for the recipient and the recipient's spouse or parent/guardian (if under 18 years old). Use figures for the current year (the year that the funds will be used). If the current year's income is too uncertain to estimate, you may use the past year's income. Indicate which is being reflected:

| Current Past |
|--------------|
|--------------|

| Income Source | Recipient | Spouse or Parent/Guardian (under 18) | | | |
|---|-----------|---|--|--|--|
| Wages, Salary, Tipis | 1. | 11. | | | |
| Interest and Dividends | 2. | 12. | | | |
| Net Business Income (or loss-deduct) | 3. | 13. | | | |
| Net Rental income (or loss – deduct) | 4. | 14. | | | |
| Net Farm Income (or loss – deduct) | 5. | 15. | | | |
| Unemployment Compensation | 6. | 16. | | | |
| Social Security | 7. | 17. | | | |
| Pensions (IRA, Keogh, VA) | 8. | 18. | | | |
| Annuities | 9. | 19. | | | |
| Other Income | 10. | 20. | | | |
| 21. Total of Lines 1 through 20: | | | | | |

ELIGIBILITY DETERMINATION (to be completed by ADRC)

Is the combined total yearly income on line 21 \$48,000 or less?

□Yes – The applicant is eligible for funding

□No – The applicant shall complete Appendix B2

ADRC Assistant Director_____ Date _____

ADRC Director ______ Date ______

Appendix B2

85.21 Transportation Vehicle Modification Grant

Financial Eligibility

Complete this section only if the combined yearly income of the recipient and his/her spouse or parent/guardian (if under 18) (line 21) exceeds \$48,000. Estimate all anticipated related expenses for the applicant and/or the caregiver, which are necessary because of the disability.

| Recipient Name: | Caregiver Name (if vehicle is owned by the caregiver and not the recipient): | Date of Application: |
|-----------------|--|----------------------|
|-----------------|--|----------------------|

Section A

| Carry forward the amount from line 21 here | | 22. |
|--|-----|-----|
| Annual out of pocket expenditures for services by | 23. | |
| physicians, dentists, and other medical professionals, | | |
| and for prescribed medications. | | |
| Annual out of pocket expenditures for health insurance | 24. | |
| premiums and long term care insurance. | | |
| Annual unreimbursed amounts paid to rent or purchase | 25. | |
| medical equipment or modifications to home or to | | |
| household vehicles to accommodate the applicant. | | |
| Annual out of pocket expenditures for transportation to | 26. | |
| access health care or social services for the applicant. | | |
| Other annual unreimbursed expenses made necessary by | 27. | |
| the applicant's care, adult day care, supportive home | | |
| care, etc. | | |
| Write T | 28. | |
| Subtract line 28 from line 2 | 29. | |

Appendix B2

85.21 Transportation Vehicle Modification Grant

Financial Eligibility

Section **B**

Is the amount on line 29 \$48,000 or less?

□Yes – The applicant is eligible for funding

□No – The applicant is not financial eligible for funding

ADRC Director _____ Date _____

Appendix C

85.21 Transportation Vehicle Modification

Funding Waiver Request

| Applicant Name | Caregiver Name (if vehicle is owned | Date of Request: | | | |
|--|--|-----------------------------------|--|--|--|
| | by the caregiver and not the | | | | |
| | recipient): | | | | |
| | | | | | |
| | | | | | |
| In the last 12 months have your been | awarded 85.21 Vehicle Modification Fu | nding? | | | |
| If so, how much? | | | | | |
| Total Cost of Vehicle Modification: | | | | | |
| What, if any, other funding sources ha | ave you applied for or researched outsic | le of the 85.21 Trust Fund Grant? | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Are there alternatives to this modifica | tion (e.g. more cost effective modificat | ions)? | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| What are the implications on the applicant if modification does not occur? | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Additional information you feel is imp | ortant in justifying additional funding: | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Appendix C

85.21 Transportation Vehicle Modification

Funding Waiver Request

| Applicant Signature: | _Date: | |
|--|--------|--|
| | | |
| | | |
| REQUEST WAIVER DECISION (to be completed by ADRC) | | |
| □Yes – The applicant will be granted \$ | - | |
| \Box No – The applicant will not be granted additional funding | | |
| If denied, why: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| ADRC Assistant Director | Date | |
| | | |
| | | |
| ADRC Director | Date | |
| | | |

2019 APPLICANT INFORMATION FORM

Handout #6

| | | | | | L | | |
|--|--|--|-----------------|-----------------|--------------------|---------------|------------|
| County of | Eau Clair | e | | | | | |
| Primary Contact for this grant program | | | | | | | |
| Name | Emily Gil | Emily Gilbertson | | | | | |
| Telephone Number | 715-839-1 | 272 | | | Ext | ension | |
| Email Address | emily.gilb | ertson@co | o.eau-claire | <u>e.wi.us</u> | | | |
| Application Preparer (if o | different than p | rimary contac | ct) | | | | |
| Name | | | | | | | |
| Organization | | | | | | | |
| Telephone Number | | | | | Ext | ension | |
| Email Address | - | | | | | | |
| Applicant Status | that the appli Private non-p | Place your initials in box to the right to certify your eligibility - You are certifying that the applicant is a county government, or an agency of the county department. Private non-profits or Aging Units organized as a non-profit under Wis. Stat. 46.82(1)(a)3, are not eligible to apply for this grant. | | | | | |
| Organization Info | Place your initials in box certifying all organization information, including, contacts and titles, have been updated in the BlackCat Online Grant Management System (GMS) and are true and correct to the best of your ability. | | | | | | |
| Federal Grant Match | Please place | an "X" next t | o any federal g | grant that will | be using §85.21 ft | inds as local | match. |
| | 5310 | | 5307 | х | 5311 | | |
| | Other (Ple | ase explain) | | | | | |
| Coordination | Please identi §85.21 proje | | | plan name, g | oal(s) and page nu | umber(s) in v | vhich your |
| Title c | Title of Coordinated Plan: Eau Claire Locally Developed Transportation Coordination Plan 2019-2024 | | | | | on | |

| The goal(s) a | | rategies from which project is included: | Goal #1, 2 and 3 |
|---------------|-------|--|--|
| • | · · / | ne Coordinated plan may be referenced: | 2 |
| Accessibility | | dicate whether or not §85.2 alk with assistance during th | 1state aid be used for the transportation of persons you cannoth walk ne calendar year. |
| YES | х | | |
| NO | | | the Americans with Disabilities Act (ADA) requirements for ween ambulatory and non-ambulatory passengers will be met.) |
| | | | |

VEHICLE INVENTORY County of Eau Claire Instructions: Please provide your entire specialized transit vehicle inventory (Include all vehicles that are used for transportation of elders, regardless of funding source). Place Enter "X" "X" in No. of to box to indicate Ambulatory / indicate vehicle Vehicle Type Wheelchair if Model Current funded vehicle Positions Mileage through Year is (Mini van, Med. Bus, etc) WisDOT leased (Ambulatory/Non-5310 or to Ambulatory) 85.21 another program party. 7,306 Mini Van 2017 2 Х

THIRD PARTY PROVIDERS

County of

Eau Claire

Instructions: Please complete the table below for any existing or anticipated third party contracts for your specialized transportation services. Upload a copy of the lease or contract to a folder in the "Resources" tab.

(If there are no projects or vehicles that are contracted or leased out, please put "None" in the first grey box.)

| Project Name | Anticipated or Known Contractor Name | Type of Agreement ("Lease" or "Contract") | Bidding Required "Yes" or "No" | Start Date (<i>MM/DD/YY</i>) | Expiration Date (<i>MM/DD/YY</i>) |
|---|---|--|---|--------------------------------------|---|
| Paratransit Program Project 1 | Abby Vans Inc. | Contract | Yes | 1/1/2019 | 12/31/2024 |
| Specialized Transportation Project 2 | Abby Vans Inc. | Contract | Yes | 1/1/2019 | 12/31/2024 |
| | | | | | |
| | | | | | |
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TRUST FUND SPENDING PLAN

| Count | f |
|--------|------|
| County | / 01 |

Eau Claire

| Expenditure Item If non-vehicle capital purchase, please provide description on second page below. | Planned year of purchase (YYYY) | Project Cost |
|--|---------------------------------------|--------------|
| Vehicle Modification Grant | 2019 | \$10,000.00 |
| Vehicle Modification Grant | 2020 | \$10,000.00 |
| Vehicle Modification Grant | 2021 | \$10,000.00 |
| Total proj | jected cost of 3-year plan | \$30,000.00 |

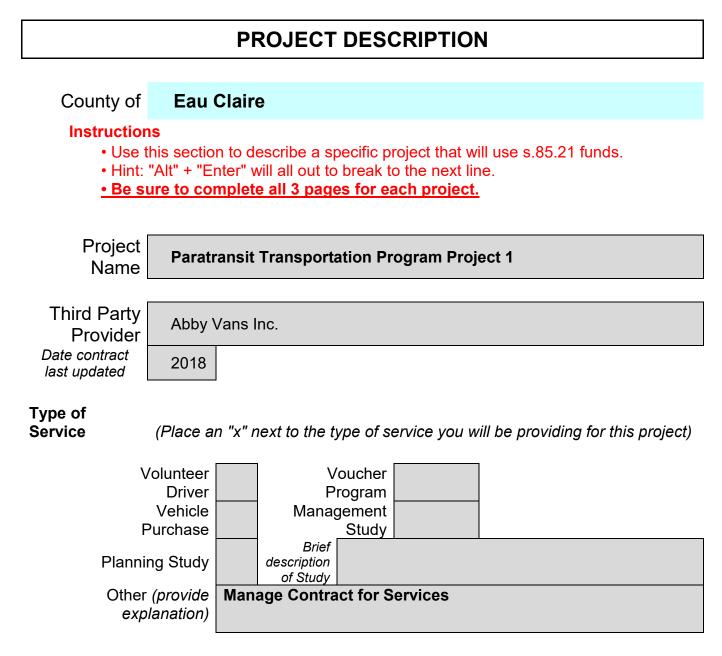
| Estimated amount state aid to be held in trust on | ¢00 606 72 |
|---|-------------|
| 12/31/2018 | \$88,606.73 |

| Will auto calculate base above | ed on year entered | Enter amount of funds the next 3 years. If | | |
|-----------------------------------|--------------------|--|----------------------------|-------------|
| Spending plan for 2019 = | \$10,000.00 | Funds added for 2019 = | Est. balance on 12/31/19 = | \$78,606.73 |
| Spending plan for 2020 = | \$10,000.00 | Funds added for 2020 = | Est. balance on 12/31/20 = | \$68,606.73 |
| Spending plan for 2021 = | \$10,000.00 | Funds added for 2021 = | Est. balance on 12/31/21 = | \$58,606.73 |

Date complete

Prepared by Emily Gilbertson

We created a new vehicle modification grant to allow for vehicle modifications to be completed on vehicles owned by older adults or adults with disabilities to maintain independence. These will be approved by the ADRC board. Each grant awarded is up to \$5,000. This was approved on 10/2/2018 by John Swissler, DOT.



General Project Summary (*Provide a brief description of this project. Use "ALT" and "Enter" to start a new paragraph.*)

The City of Eau Claire and Eau Claire County contract with Abby Vans Inc. to provide the Paratransit Transportation program. This program is for adults with disabilities as well as adults 60+ who have limiting abilities that prevent them from utilizing public transportation. This program is also for individuals meeting the same criteria who live in the rural part of the county who are unable to access public transportation. Rides through the paratransit program are for non-emergency medical, social, employment, and personal business purposes.

PROJECT DESCRIPTION, Continued

Geography of Service

(List the counties, as well as cities/areas that are serviced though this project. Use "ALT" and "Enter" to start a new line.)

The service area includes Eau Claire, Fall Creek, Augusta, Fairchild as well as surrounding parts of the county.

Service Hours (Indicate your general hours of service for this project.)

| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|---------------|--------|-------------|-------------|-----------|-------------|----------|----------|
| Start time | | 6:00 AM | 6:00 AM | 6:00 AM | 6:00 AM | 6:00 AM | 6:00 AM |
| End Time | | 10:00 PM | 10:00 PM | 10:00 PM | 10:00 PM | 10:00 PM | 6:00 PM |

| Additional description (if applicable) |
|--|
|--|

Service Requests (Briefly describe how your service is requested for this project)

Individuals interested in utilizing the paratransit program must complete an application. These applications are available at the ADRC or Eau Claire City Transit. Once completed, the application is turned into Eau Claire City Transit for review. This review can take up to 21 days. If the applications is approved the rider will be notified and can start utilizing services through Abby Vans Inc. immediately. If denied, appeal rights are found at City Transit.

Passenger Eligibility (Briefly indicate passenger eligibility requirements for this project)

This project is for adults 18-59 with a disability determination through the Social Security Administration, or other equivalent medical determination, and adults 60+ who are unable to take public transportation services through the City of Eau Claire, and those individuals meeting the above criteria who reside in the rural part of the county who do not have access to transportation services .

Passenger Revenue (Briefly describe passenger revenue requirements for this project)

Rider co-pay requirements are \$3.50 per one-way trip, or \$7 round trip.

| Enter the amou | n |
|-----------------|---|
| *When complete, | ŀ |

| Α. | §85.21 funds from annual allocation | I | Total from A. | \$146,443 |
|----|--|------------------|---------------|-----------|
| В. | §85.21 funds from trust fund | T | Total from B. | |
| C. | County Match Funds | T | Total from C. | \$29,309 |
| D. | Passenger Revenue | 1 | otal from D. | \$170,000 |
| Ε. | Older American Act (OAA) funding | ٦ | Total from E. | |
| F. | §5310 Operating or Mobility Management funds | 1 | Total from F. | |
| G. | Other funds (provide name and/or description and record tota amount in the box to the right of the description. Include sources such as other grants and/or programs.) | - | otal from G. | \$0 |
| | | Revenue Total | \$345 | 5,752 |
| | Expenditures should equal | revenue | \$ | 0 |

Enter the amount of total expenditures for this projects

*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year.

Section Description

Annual Expenditures

Annual Revenue

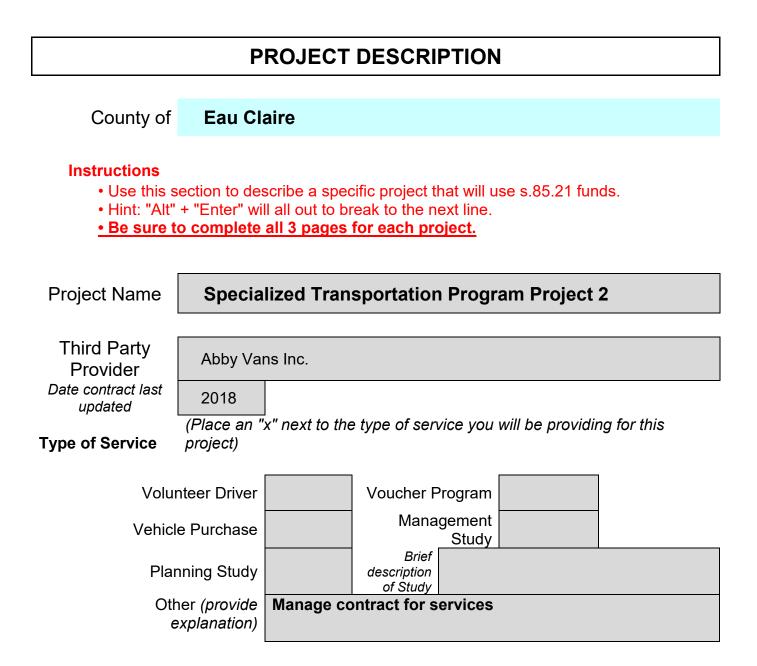
Enter the amount for **<u>each</u>** funding source that will be used to for this project. please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.

PROJECT BUDGET

Total Expenses

Amount

\$345,752



General Project Summary (*Provide a brief description of this project. Use "ALT" and "Enter" to start a new paragraph.*)

The Aging and Disability Resource of Eau Claire County contracts with Abby Vans Inc. to provide the Specialized Transportation Program for adults with disabilities and adults 60+ who do not have access to transportation services before or after regular city bus hours, on Sunday and for special trips to locations outside of Eau Claire County. These rides can be for non-emergency medical care, employment, social and other personal business.

PROJECT DESCRIPTION, Continued

Geography of Service

(List the counties, as well as cities/areas that are serviced though this project. Use "ALT" and "Enter" to start a new line.)

The service area includes Eau Claire, Fall Creek, Augusta, Fairchild as well as surrounding parts of the county. This project also allows for out of county transportation services in surrounding counties as requested. These requests are processed through the ADRC of Eau Claire County on a case by case basis.

| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------------|---------|-------------|-------------|-----------|-------------|----------|------------------------|
| Star time | 7:00 AM | 6:00 PM | 6:00 PM | 6:00 PM | 6:00 PM | 6:00 PM | 6:00 AM to 8:00 AM |
| Enc Tim | 2:00 PM | 10:00 PM | 10:00 PM | 10:00 PM | 10:00 PM | 10:00 PM | 6:00 PM to 10:00 PM |

Service Hours (Indicate your general hours of service for this project.)

Additional description (*if applicable*) Saturday specialized hours are 6:00 AM to 8:00 AM as well as 6:00 PM to 10:00 PM.

Service Requests (Briefly describe how your service is requested for this project)

All out of county rides are authorized by the ADRC of Eau Claire County on a case by case basis.

Individuals requesting Project 2 rides who are already certified through the Paratransit application process are able to schedule rides directly through Abby Vans Inc.

Individuals requesting Project 2 rides who are not already certified through the Paratransit application process must contact the ADRC of Eau Claire County to approve.

Passenger Eligibility (Briefly indicate passenger eligibility requirements for this project)

This project is for adults 18-59 with a disability determination through the Social Security Administration, or other equivalent medical determination, and adults 60+ who are unable to take public transportation services through the City of Eau Claire, and those individuals meeting the above criteria who resides in the rural part of the county who do not have access to transportation services .

Passenger Revenue (Briefly describe passenger revenue requirements for this project)

The rider co-pay is \$3 per one-way trip and \$6 round trip. If traveling outside of Eau Claire County limits, the passenger is charged \$.55 per mile outside of the county lines to their desired destination, as well as the co-pay.

| Α. | §85.21 funds from annual allocation | т | otal from A. | \$56,700 |
|----|---|-----|--------------|----------|
| В. | §85.21 funds from trust fund | т | otal from B. | |
| C. | County Match Funds | т | otal from C. | \$11,300 |
| D. | Passenger Revenue | Т | otal from D. | \$10,000 |
| E. | Older American Act (OAA) funding | т | otal from E. | |
| F. | §5310 Operating or Mobility Management funds | т | otal from F. | |
| G. | Other funds (provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.) | Т | otal from G. | \$0 |
| | Revenue To | tal | \$73 | 8,000 |
| | | | | |

Annual Expenditures

Section Description

| Enter the amount of total expenditures for this project | | |
|--|------------------|--|
| Total Ex | xpenses \$78,000 | |
| *Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year. | | |

PROJECT BUDGET

Annual Revenue

Enter the amount for **<u>each</u>** funding source that will be used to for this projects. *When complete, please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.

Expenditures should equal revenue

\$0

Amount

PROJECT DESCRIPTION

| County of | Eau Clair | е | | | |
|-------------------------------|------------------------------|----------------|---|------------------|-------------------|
| • Hint: "Alt" | + "Enter" will | all out to bre | fic project that will use eak to the next line. or each project. | s.85.21 funds. | |
| Project Name | Eau Clair | e Rural Tra | nsportation Program | I | |
| Third Party Provider | | | | | |
| Date contract last updated | | | | | |
| Type of Service | (Place an "x | " next to the | type of service you w | ill be providing | for this project) |
| Volui | nteer Driver | | Voucher Program | | |
| Vehicl | e Purchase | x | Management Study | | |
| Plar | nning Study | | Brief description of Study | | |
| | ner (provide explanation) | | | | |

General Project Summary (Provide a brief description of this project. Use "ALT" and "Enter" to start a new paragraph.)

The Aging and Disability Resource of Eau Claire County purchased an accessible van to provide scheduled social trips for adults with disabilities and adults 60+ who do not have access to transportation services in the rural part of the community. These trips include to the bank, grocery store, farmer's market, etc. This does <u>not</u> include medical trips.

PROJECT DESCRIPTION, Continued

Geography of Service

(List the counties, as well as cities/areas that are serviced though this project. Use "ALT" and "Enter" to start a new line.)

Rides are targeted for individuals residing in the rural part of Eau Claire County including but not limited to, Fairchild, Augusta, and Fall Creek.

Service Hours (Indicate your general hours of service for this project.)

| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|---------------|----------|----------|----------|-----------|----------|----------|----------|
| Start time | variable | variable | variable | variable | variable | variable | |
| End Time | variable | variable | variable | variable | variable | variable | |

Additional description *(if applicable)* Trips are scheduled per availability of driver and pre-planned schedule. These rides take place M-F, with some special trips on Sundays currently. These rides times are subject to change per trip type and ride time.

Service Requests (Briefly describe how your service is requested for this project)

All rides are approved by the van driver according to schedule. If there is interest in a trip, an individual need to contact the driver at the designated number to schedule at least 24 hours in advance. If there are rides not on the schedule, the individual will need to contact the driver to see if it is able to be accommodated and plan on schedule. Rides are subject to change. **Passenger Eligibility** (Briefly indicate passenger eligibility requirements for this project)

This project is for adults 18-59 with a disability determination through the Social Security Administration, or other equivalent medical determination, and adults 60+ who reside Eau Claire County, and preference to those in the rural part of the county.

Passenger Revenue (Briefly describe passenger revenue requirements for this project)

No co-pay is required for these rides. If passengers are interested in making a donation for the ride, they do so to the ADRC. This is voluntary and no money is collected by the driver.

39

Enter the amount of total expenditures for this project Total Expenses

*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year.

Annual Revenue

Section Description

Annual Expenditures

Enter the amount for **<u>each</u>** funding source that will be used to for this projects. *When complete, please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.

| Α. | §85.21 funds from annual allocation | Total from A. | \$36,900 | |
|----|---|---------------|----------|--|
| В. | §85.21 funds from trust fund | Total from B. | | |
| C. | County Match Funds | Total from C. | \$7,400 | |
| D. | Passenger Revenue | Total from D. | | |
| Е. | Older American Act (OAA) funding | Total from E. | | |
| F. | §5310 Operating or Mobility Management funds | Total from F. | | |
| G. | Other funds (provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.) | Total from G. | \$0 | |
| | Revenue Total | \$44,300 | | |
| | | | <u>.</u> | |
| | Expenditures should equal revenue | \$0 | | |

PROJECT BUDGET

Amount

\$44,300

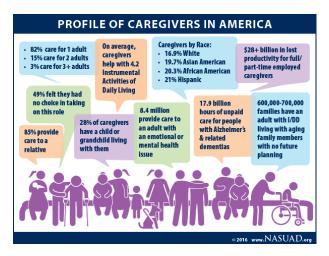
| COUNTY ELDERLY TRANSPORTATION 2019 PROJECT BUDGET SUMMARY | | | | | | | | | |
|---|---|---|--|--------|--------|--------|--------|--------|--------------|
| County of | Eau Claire | | | | | | | | |
| Project Name | Paratransit Transportation Program Project 1 | Specialized Transportation Program Project 2 | Eau Claire Rural Transportation Program | 0 | 0 | 0 | 0 | 0 | Totals |
| Project Exp | enses | | | | | | | | |
| Total Project Expenses | \$345,752.00 | \$78,000.00 | \$44,300.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$468,052.00 |
| Project Rev | venue by Fu | unding Sour | се | | | | | | |
| §85.21 Annual Allocation | \$146,443.00 | \$56,700.00 | \$36,900.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$240,043.00 |
| §85.21 Trust Fund | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| County funds | \$29,309.00 | \$11,300.00 | \$7,400.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$48,009.00 |
| Passenger Revenue | \$170,000.00 | \$10,000.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$180,000.00 |
| Older American Act (OAA) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| §5310 grant funds | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Total from other funds | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 1. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 2. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 4. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 5. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Expenses - revenue = | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

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The State of Family Caregiving in

Wisconsin and Nationally





Definitions

A **caregiver** - sometimes called an *informal caregiver* - is an unpaid individual (for example, a spouse, partner, family member, friend, or neighbor) involved in assisting others with activities of daily living and/or medical tasks.

Formal caregivers/Direct Care Workers are paid care providers providing care in one's home or in a care setting (day care, residential facility, long-term care facility). For the purposes of the present fact sheet, displayed statistics generally refer to caregivers of adults.

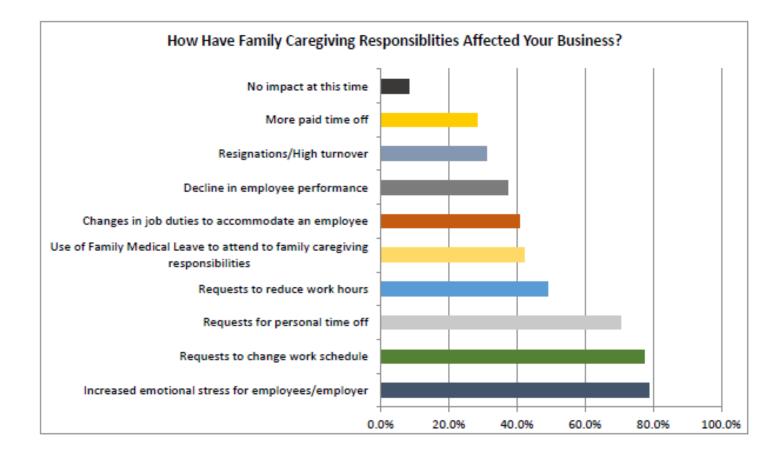
Heavy Reliance on Family Caregivers in Wisconsin

In Wisconsin a shortage of formal caregivers or direct care workers has created a crisis for people with disabilities, older adults, and their families. The need for direct care workers is projected to increase by an additional 20,000 workers by 20261. In 2016, a statewide survey of more than 500 people who rely on direct care services and their families found 85% did not have enough workers to cover all their shifts 60% said they get sick more often when they do not have enough staff₂. Families are the backbone of the caregiving industry in Wisconsin, providing an estimated 80% of all care.



Wisconsin Family and Caregiver Support Alliance Survey of Wisconsin Employers: Preliminary Summary

200 Responses; Summer/Fall 2018



November 2018

Handout #8

Eau Claire County Courthouse closed November 22 and 23, 2018

In honor of National Alzheimer's and Dementia Awareness Month, the Phoenix Park Footbridge lit purple Thursday, November 1, 2018, 5:00 am – 11:00 pm.

Night Out Evening Meal, November 13, 2018, Check in 4:30 pm, dinner 5:00 pm, LE Phillips Senior Center

Meals on Wheels will not be delivered and Senior Nutrition meal sites will be closed Thanksgiving Day, Thursday, November 22 and Friday November 23.

Healthy Eating with Diabetes, November 5 - December 10, 2018, 1:00 - 3:30 pm, UW Extension/ Agriculture Resource Center, 227 1st Street West, Altoona. No fee! Registration required at <u>www.adrcevents.org</u> or 715-839-4735.

Stand in the Light Memory Choir Concert November 15, 2018, 6:30 pm. Good Shepherd Church.

Grandparents and Others as Parents (GAP) monthly meetings first Thursday each Month, 11:00 am— 1:00 pm. River Pines Long-Term Concierge Care & Prairie Pointe Rehabilitation Suites, Altoona. Contact Robyn Lee, 715-827-1163 robynjlee@chibardun.net.

A Caregiver's Night Out November 12, 2018, 3:30-8:00 pm, The Florian Gardens, Eau Claire.

Medicare & You, Friday, November 16, 2018, 10 am, Room 1277 Courthouse, Eau Claire. Register at 715-839-4735 or <u>www.adrcevents.org</u>.

Veterans Events, Sunday, November 11, 2018. Patriotic Council Program, American Legion Post 53, 634 Water Street, Eau Claire. Program 10:00 am, lay wreath, rifle fire and Taps 11:00 am, followed by a Slum feed. Auxiliary of Post 53 & CVS pharmacy will do free flu shots for Veterans, 11:15 am - 2 pm.

Monday, November 12, 2018, Event at MN Wire, 2515 Prospect Dr, Eau Claire. Registration 10:30 am, Ceremony 11:00 am, Lunch 11:30 am. Veteran resource tables will be set up during the event.

Eau Claire Caregiver Café, November 6 and November 20, 2018, 9:30-11 am. The French Press Restaurant, 2823 London Road, Eau Claire. Respite available, contact ADRC at 715-839-4735.

Effective January 1, 2019 Eau Claire County Courthouse hours will be 8:00 am—4:30 pm



Eau Claire County Residents only. Must provide proof of residency.