NOTICE OF INTENT TO SUBMIT AN APPLICATION

Completion of this form is voluntary; however, the information requested would be helpful for the Department of Health Services.

1. APPLICANT INFORMATION

<table>
<thead>
<tr>
<th>Name – Applicant Information</th>
<th>Date of Request</th>
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<tbody>
<tr>
<td>Aging and Disability Resource Center (ADRC)</td>
<td>4/2/2012</td>
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<tr>
<td>The ADRC of Dane County</td>
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</tbody>
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2. CONTACT PERSON

<table>
<thead>
<tr>
<th>Name – Contact Person</th>
<th>Title</th>
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<tbody>
<tr>
<td>Jean Kuehn</td>
<td>Planning and Evaluations Manager</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name – Organization</th>
<th>Address (Street, City, State, Zip)</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dane County Department of Human Services</td>
<td>1202 Northport Drive</td>
<td>(608) 242-6418</td>
</tr>
</tbody>
</table>

3. COUNTIES TO BE INCLUDED IN ADRC SERVICE AREA

<table>
<thead>
<tr>
<th>At ADRC Start Up</th>
<th>Date of Anticipated ADRC Start</th>
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<tbody>
<tr>
<td>Dane County</td>
<td>10/1/2012</td>
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<table>
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<tr>
<th>At Full Implementation</th>
<th>Dane County</th>
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4. MCO INFORMATION

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<tr>
<th>Is one or more MCO(s) being planned for start up in the ADRC service area?</th>
<th>Yes—answer questions 1-4 below</th>
<th>No—Go to section 5</th>
</tr>
</thead>
</table>

1. What is the anticipated MCO application submittal date? 

2. What is the anticipated start date for the MCO? 

3. What counties are expected to be in the MCO at startup? 

4. What counties are expected to be in the MCO at full implementation? 

5. COUNTY BOARD SUPPORT

<table>
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<th>Is there a county board resolution supporting:</th>
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<tr>
<td>Development of the ADRC?</td>
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<td>Development of the MCO?</td>
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APPLICATION FOR AGING AND DISABILITY RESOURCE CENTER

Completion of this form is voluntary; however, the information requested is required as part of the ADRC application process.

PART I – APPLICANT INFORMATION

Name – Aging and Disability Resource Center (ADRC)  
The ADRC of Dane County  

Date of Application: 4/2/2012

Name – Applicant  
Dane County Department of Human Services

Name – Contact Person  
Jean Kuehn

Telephone Number: (608) 242-6418

Address (Street, City, State, Zip)  
1202 Northport Drive

E-mail Address  
kuehn@countyofdane.com

Counties to be Included in ADRC Service Area  
Date of Anticipated ADRC Start: 10/1/2012

At ADRC Start Up  
Dane County

At Full Implementation  
Dane County

Is one or more MCO(s) being planned for start up in the ADRC service area?  
☒ Yes—answer questions 1-4 below  ☐ No—Go to next section

1. What is the anticipated MCO application submittal date?  

2. What is the anticipated start date for the MCO?  

3. What counties are expected to be in the MCO at startup?  

4. What counties are expected to be in the MCO at full implementation?  

5. Is there a county board resolution supporting development of the MCO?  
☒ Yes  ☐ No

SUBMITTED BY

Name – Authorized Representative  
Lynn Green

Title  
Director

Name – Organization  
Dane County Department of Human Services

Telephone Number: (608) 242-6200

E-mail address  
green@countyofdane.com

SIGNATURE – Authorized Representative  
[Signature]

Date Signed: 4-2-12

Attach the following to the completed application form:

A. County Board and/or Tribal Government Resolution(s) Authorizing the ADRC Application
B. Letters of support from the commission(s) on aging and local long-term care committee(s) or long-term care council(s)
C. Organization Chart
D. Designation of Confidential and Proprietary Information
E. Other attachments (optional)
Dane County Department of Human Services

Dane County Department of Human Services’ Application

To Contract as an

Aging and Disability Resource Center

Submitted to the Wisconsin Department of Health and Family Services

April 2, 2012
Part II: Executive Summary

Dane County first began to develop an Aging and Disability Resource Center as part of a Long Term Care planning grant awarded in February 2006. As defined in our initial planning process, the mission of the ADRC is to support seniors, adults with disabilities, their families and caregivers by providing useful information, assistance and education on community services and long term care options and by serving as the single entry point for publicly funded long term care services while at all times respecting the rights, dignity and preferences of the individual. The Aging and Disability Resource Center of Dane County will serve all of Dane County.

Dane County has been exploring possible sites for the location of the ADRC. At the time of this application we have identified a preferred location within the Northside TownCenter, a shopping center located at the corner of Northport Drive and Sherman Avenue in Madison, though we have not as yet entered into a lease agreement. Organizationally, the ADRC will be a unit within the Adult Community Services Division of the Department of Human Services. The Area Agency on Aging of Dane County will be co-located with the ADRC. Collaboration between the ADRC and AAA is expected to yield many benefits.

During the current ADRC planning process, Dane County formed a Stakeholder Advisory Group to provide feedback on the ADRC application and more importantly to provide input and advice to the Department as it begins planning for the implementation of the ADRC. Our target date for opening the ADRC is October 1, 2012. We will transition from the Stakeholder Advisory Group to a Governing Board. The Governing Board will serve in an advisory capacity to the ADRC. The board will consist of 11 members, 6 of whom will be consumer representatives and will include 1 County Board Supervisor.

The ADRC Director, Assistant Director, Supervisors, I&A Specialist and staff support positions will all be employees of Dane County. Currently Dane County contracts with Purchase of Service Agencies for Elderly Benefit Specialist (EBS) and Disability Benefit
Specialist (DBS) services. We are considering whether in 2013 these positions will be county employees or contract positions. Regardless of the employment relationship, EBS and DBS staff will be physically located within the ADRC and supervised by the ADRC.

Dane County continues to operate the Medicaid Waiver programs. The ADRC will be located within the same division as our Long-Term Care and Aging programs. Having these programs located within the same division means they will operate under the leadership of one division administrator, which is a strength of this model. Although Family Care is not currently an option in Dane County the Partnership Program is available. Dane County Human Services has a well-established relationship with Care Wisconsin and has developed a process for referrals with that program. The ADRC of Dane County will continue that relationship.

Establishing an ADRC will enable our residents to have a centralized point for information and assistance on a wide range of adult services, especially long-term support services. Dane County has been interested in developing an ADRC for some time. We are pleased that the State has decided to continue expansion of this initiative without the ties to the Family Care program.
Part III: Project Proposal

III-A.1 Service Area: The ADRC of Dane County will serve all of Dane County. There are no current plans to expand to other counties. The ADRC will serve older adults and adults with developmental disabilities and physical disabilities. For other groups not listed, referrals and information to other resources will be offered.

III-A.2 Governing Board: A governing board of 11 members will be formed to serve in an advisory capacity concerning the operations of the ADRC. Board membership will include 6 consumer representatives (3 representing older adults; 2 representing developmentally disabled adults and 1 representing adults with physical disabilities) and a county board supervisor. The remaining 4 board members, not yet specified, will need to present no conflict of interest with providers. Overall board composition will reflect the ethnic and economic diversity of our community.

Members will serve staggered three-year terms and will be appointed by the County Executive and approved by the County Board of Supervisors. Initial term lengths for appointees will vary between 1 -3 year appointments. All subsequent appointments will be for terms of 3 years. Members may serve until a replacement has been confirmed. The board will meet at least monthly in the first year of operation.

The governing board will be accountable for the mission, goals, policies and procedures of the ADRC, assure input from consumers, service providers and constituents, assure that all target populations are adequately served and that all service objectives are met. The board will identify unmet needs and develop strategies to address them, provide feedback to ADRC staff, and communicate with county elected officials regarding ADRC accomplishments, needs and issues.

III-A.3 Organizational Structure: At the time of this application Family Care is not a long-term care option in Dane County and the county is not planning for any particular model of Family Care at present. The ADRC will have its own board, managers, staff
and budget. The ADRC will have a single, qualified director with authority over the ADRC staff and subcontractors. The ADRC Director will report to the Adult Community Services (ACS) Division Administrator. The ACS Division consists of 7 sections or units: 1) The Aging Unit administering the Older Americans Act services and operating the AAA responsibilities; 2) The Long Term Support Unit serving frail elderly and people with physical disabilities through the Community Options Program and the Medicaid Waivers; 3) The Developmental Disabilities Unit for adults and children who meet state and federal definitions of developmental disabilities; 4) The Mental Health Unit serving people with severe and persistent mental illness through the mental health system, including Community Support Programs and crisis services. 5) Alternative Sanctions Unit that provides an array of substance abuse services and community support intervention services. 6) The Transportation Unit that plans, coordinates and evaluates all transportation services within the Department of Human Services. 7) The Adult Protective Services Unit that provides court-ordered guardianships and protective services. The ADRC will become another section within the Adult Services Division.

Dane County will provide support services such as accounting, audit, purchasing and payroll, financial, information systems support, personnel and legal services through its existing infrastructure.

**III-A.4 Director:** The director will have lead responsibility for ADRC operations, staff performance, supervision and the quality of ADRC services. The director will have authority over budget development, policies and personnel, subject to the standard oversight and approval processes of Dane County Department of Human Services and Dane County elected officials.

The director will report to the ACS Division manager and will also be responsible for keeping the governing board informed, receiving their advice and direction on ADRC matters. Duties of the director include: ensuring the ADRC meets its obligations under its contract with the State of Wisconsin, maintaining regular contact with Purchase of Service (POS) contractors in regard to authorizing services, managing service demand
and service availability to meet the needs of the elderly and adults with disabilities. The
director will be instrumental in operationalizing the center’s vision with ADRC staff and
its governing board. The director will respond to general information demands including
public presentations about the services of the ADRC in Dane County.

The preliminary plan is that the director will supervise the assistant director and
administrative staff including benefit specialists, clerical and IT support staff and that the
assistant director will supervise the I & A supervisors. Actual supervisory
responsibilities will be based on the skills and experience of the individuals hired.

The ADRC director will possess at a minimum, a Bachelors degree in health or human
services or a closely related field and have at least two years of professional work
experience in a relevant field and experience supervising staff. A Master’s degree and
more extensive professional work experience are preferred.

III-A.5. Staff Training and Qualifications: In addition to the director, ADRC staffing will
include an assistant director position, Information and Assistance (I&A) supervisors, I&A
staff, benefits specialists, clerical and IT support staff. Current Department staff will be
eligible to apply for positions in the ADRC. We will also seek external candidates as
appropriate. We feel a mix of existing staff, with experience in long-term care programs
and working with the consumer populations that will be served in the ADRC, along with
some newly hired staff will give the ADRC firm footing from the start without
compromising the quality of existing programs.

The assistant director position will report to the director. I&A supervisors will report
directly to the assistant director who will provide functional supervision including work
assignments, arranging training and overseeing performance of these staff positions.
The assistant director will work with the director in developing program plans and policy,
keeping the director informed of progress in achieving goals and identifying problems as
they arise. Along with the director, the assistant director will conduct outreach sessions
with discharge planners at local hospitals, service providers, local nursing homes, local
outreach agencies and contract agencies providing them with information about the role and responsibilities of the ADRC. The ADRC will play a significant role in the community; educating individuals regarding long-term care services.

The assistant director will possess at a minimum, a Bachelors degree preferably in a health or human services related field and have at least two years of professional work experience in a relevant field and experience supervising staff.

When fully staffed the ADRC will have 3 staff teams each consisting of 10 – 11 I&A staff and one supervisor. Supervisor positions will provide direct oversight to I&A staff and will be responsible for conducting performance evaluations, training and directing staff. Supervisors must be well informed of resources available to individuals served by the ADRC in order to identify service gaps.

ADRC supervisors will possess at a minimum, a Bachelors degree preferably in a health or human services related field or license to practice as registered nurse in Wisconsin and at least 2 years of experience working with at least one of the client populations of an ADRC.

The ADRC will meet state contract requirements for AIRS certified staff. I&A staff will be certified to administer the Long Term Care Functional Screen within 3 months of being hired by the ADRC. All I&A staff will be trained on the use of the resource and client tracking system of SAMS, including how to search for services, retrieve information, and document customer contacts. Staff will be trained on all ADRC policies and will follow procedures as set forth by policies. Everyone will know how to document follow-up contacts and activities in SAMS. All staff will be required to attend the initial and ongoing trainings required by the Department of Health Services (DHS). The ADRC will send representatives to all conferences and on-line trainings offered by DHS. All staff will possess the ability to effectively communicate with a wide variety of persons and maintain confidentiality. Staff will access internal training resources presented by Economic Assistance, Adult Protective Services, Elder Abuse and Adults at Risk, as
well as crisis intervention training from a contracted service provider. ADRC staff will need to be familiar with and able to identify persons in need of protection. Adult Protective Services will continue to be an independent unit with the ACS Division. Those services will not be folded into the ADRC.

I&A staff will possess at a minimum, a Bachelors degree in a health or human services related field or license to practice as registered nurse in Wisconsin and at least one year of experience working with at least one of the client populations of an ADRC.

The benefits specialists will possess at a minimum, a Bachelors degree in a health or human services related field or license to practice as registered nurse in Wisconsin and at least one year of experience working with at least one of the client populations of an ADRC.

All ADRC staff will be oriented to: the mission of the ADRC and its policies and procedures, the populations served by the ADRC and their needs, how to recognize and handle emergencies, cultural competency, conflicts of interest, and special job responsibilities related to individual staff.

All staff that will have phone contact with the public will have expertise in phone etiquette and foster excellent communication skills, listening skills, knowledge and ability to connect callers to appropriate staff; ability to recognize and handle special hearing needs, and ability to recognize and handle emergencies.

We anticipate that staff capacity will ramp up over time as the community becomes more familiar with the services an ADRC provides. Our experience during implementation may affect staffing patterns as we discover our areas of highest utilization and are able to more clearly identify service gaps.

III-A.6. Location/Physical Plant: Dane County is currently researching location sites for the ADRC. We estimate the need for 15,000 sq. ft. of office space in a first floor
setting. The space will include some private offices for those staff that will be meeting confidentially with clients in the office as well as cubicle workspace. The location should also include some extra office space to give the center room to grow. Our vision also includes a reception or waiting area that will be large enough to display resource material and include a computer for public use. This would allow people to work on program applications, complete job searches, and access online resources, etc.

Further selection criteria for choosing a location include the following characteristics:

- Storefront / business zoning, commercial
- Good bus service
- Good physical appearance (looks nice)
- Some private office space
- Sufficient space for easy traffic flow internally
- Non-threatening environment- welcoming
- Easy to reach off the beltline or other main highway
- Centrally located in the county – for consumer and staff driving needs (Madison/Monona/Fitchburg/Middleton)
- A place where people go (e.g. shopping mall)
- Clean and maintained
- Visible and easy to find landmark
- Flexible internal space
- Environmentally friendly
- Plentiful free parking
- Ability to add external signage to the building

III A.7. Accessibility and Cultural Competence: Dane County Department of Human Services is committed to ensuring that services and information are made available to all customers including those with limited English proficiency and individuals who may have physical, hearing, speech, visual, or cognitive impairments, which require special accommodations. The location of the ADRC will be compliant with the American Disability Act (ADA) for easy access.
For non-English speaking or limited English speaking customers we will use Language Line or interpreters may be used when advance notice is given for interviews, short-term care coordination and other functions of the ADRC. The documents used by the ADRC are available in Hmong and Spanish. Documents can also be translated into other languages as needed for customers.

Sign Language Interpreting – Again, with advance notice interpreters will be contacted for providing sign language services for interviews, short-term care coordination and other services provided by the ADRC. Wisconsin Relay will be employed as needed.

All staff will receive training in working with culturally diverse populations. Consumers will have the option to meet with ADRC staff in the office or in their homes or other locations. With consumer approval, every effort will be made to meet with family members, friends, and others who know the consumer.

III-A.8 Management Information Systems and Reporting: The ADRC will use SAMS database to track all client data. SAMS IR will house the internal resource database and client tracking function, making it easy for all I&A staff to locate and identify resources. A resource database will also be available on the ADRC website. Dane County is currently exploring a partnership with United Way 211 for a comprehensive community-wide database.

Information Management will link the ADRC’s phone and computer resources so that all information pertinent to the ADRC will be available. All staff will have computer access, laptops will be available for out-of-office use and the office will have the technology available for virtual meetings. HIPAA compliance and electronic data security will be observed.
**III-A.9 Complaints and Grievances:** A clear and accessible complaints and grievance process is essential to maintaining service quality and accountability. The ADRC of Dane County will model its complaints and grievance process after the process currently in place at Dane County Department of Human Services. The process will encourage the resolution of complaints through informal discussions with direct service staff and their supervisors, while offering a formal, multi-level process in which complaints and grievances are reviewed by the ADRC Director, the ACS Division Administrator, and/or State of Wisconsin Department of Health Services’ Office of Administrative Hearings.

Informal internal complaint and grievance resolution must be completed within 10 business days of the time the complaint or grievance was received. The formal internal complaint and grievance resolution will include a decision from the ADRC’s top level management and will be completed within 15 business days of the time the complaint or grievance was received.

The ADRC will also provide access to formal external complaint and grievance resolution through the Wisconsin Department of Health Services for any grievance before, during or after the use of the ADRC’s internal complaint process.

ADRC staff will receive training on recognizing complaints, explaining the complaint/grievance process to consumers and facilitating the filing of a complaint. A written brochure for consumers will be developed describing client rights and responsibilities, the complaint/grievance process and timelines, and external advocacy resources. This brochure will be conspicuously posted in the ADRC office and will be referenced in the ADRC of Dane County’s general literature. Data regarding complaints will be shared with the ADRC Governing Board.

**III-A.10 Collaboration with Local Agencies and Stakeholders:**
In December 2006, the ADRC Planning Subcommittee formalized the application process for consumer representation on the committee. Consumers and guardians
representing people with physical disabilities, developmental disabilities and the elderly participated on the ADRC Subcommittee as well as representatives from the provider community, advocates and staff from Dane and Rock counties. The subcommittee was co-chaired by the Long Term Support Community Services Manager and the Area Agency on Aging Manager (County Aging Unit Director). Some of these individuals may be potential members of the ADRC governing board or may be part of an agency with which the ADRC develops a Memorandum of Understanding.

More than 50 meetings were held during this planning process including town hall meetings that provided further opportunity for consumer and community education and input. The end result of the subcommittee’s work was a draft application that is being used as the framework for this application.

Although Family Care is not available in this county there is a Partnership program operating in Dane County. A staff person from that organization did participate in the ADRC Subcommittee. The ADRC will provide information about the Partnership program as well as the Medicaid Waiver programs for persons in need of long-term care services.

Now that ADRC funding is available for non-Family Care counties, Department staff have formed a committee to complete the application. We anticipate existing county staff will be incorporated into the ADRC. Presentations on ADRC planning and the current timeline have been made to ACS Division staff, consumer groups and some of our community partners.

A Public Input Subcommittee of DCDHS staff has formed and is tasked with developing ways to gather input from stakeholders and share information as broadly as possible. We have developed an Aging and Disability Resource Center planning webpage that includes information on the planning process, educational information, and questions to elicit input from stakeholders as well as an opportunity to comment or ask questions.
An ADRC Stakeholder Advisory Committee was formed in January 2012 to serve as a mechanism for Dane County to share information with stakeholders; provide another venue for stakeholder input on the application and especially on implementation; enlist assistance in identifying issues and needs; and, increase transparency during the planning process. Members will include community partners who will interface with the ADRC.

III-B. Provision of ADRC Services

III-B.1 Marketing, Outreach and Public Education:
People need to know about the services available through the ADRC and how to access those resources to meet their needs in the community. The ADRC will use the state endorsed ADRC logo on its letterhead and printed materials to ensure “brand” identification statewide. Promotional material such as refrigerator magnets and other SWAG (stuff we all get) will be considered as the budget allows.

It is the intent of the ADRC to work with existing community groups and organizations to promote the existence of the ADRC. As much as possible, free or low cost resources will be used for distributing information at nutrition sites, disability conferences, family workshops and clinics. The ADRC Director and Assistant Director will be available to attend various community events and social meetings to provide information on the role and services of the ADRC.

Several other no cost strategies are expected to be included in marketing efforts. Press releases will be used to announce the start-up of the ADRC and highlight special events. We will develop an informational or educational column about the ADRC that can be included in newsletters. Social media will be used when possible to promote the
ADRC. Word of mouth will be promoted through staff membership in multiple community committee affiliations. ADRC staff will attend hospital discharge planner meetings, nursing home social worker meetings, aging network meetings, Developmental Disabilities (DD) Coalition meetings, area high schools, physical disability advocacy groups and United Way committee meetings to promote ADRC services.

ADRC brochures and other written materials are available in Hmong and Spanish, as well as other languages as requested. A sign language interpreter will be assigned when staff are speaking to deaf and hard-of-hearing audiences. Advertising efforts will be made to target consumer family members, friends and others in order to get information out about the services available through the ADRC.

Efforts will be made to solicit community feedback from the various stakeholders including members of the target populations regarding service needs and problems accessing community services including the use of surveys if needed. We will establish a plan for outreach activities and measure our progress accordingly. Data through the SAMS database will be tracked to ensure that we are reaching target groups and that the referrals represent the community demographics. We will also rely on our relationships with our Purchase of Service (POS) agencies under Memorandum of Understanding (MOU) and other community partners, to provide feedback regarding the performance of the ADRC.

III-B.2 Information and Assistance:

Information and assistance will be provided to all consumer populations served by the ADRC and their families, friends, caregivers, advocates and others who ask for assistance on their behalf. Health care providers and other service providers may access the ADRC to find help for their consumers. I&A Specialists will handle telephone calls. All ADRC staff are expected to be trained professionals in their respective disciplines. I&A staff will identify the issue(s) leading to the inquiry, establish rapport with the inquirer, determine the nature of the situation, and evaluate the
knowledge and capacities of the inquirer to determine how to approach providing information.

All resources and programs will be assembled into one database. This database will be updated with new resources as they are identified and will be reviewed at a minimum annually. I&A staff will be able to provide information and assistance in the following areas at a minimum:

- Living arrangements related to long-term care
- Disability and long term care related services (in-home supports, care coordination, respite, equipment, etc)
- Paying for long-term care services
- Health (health promotion, prevention, recuperative care, disease, conditions, etc.)
- Adult protective services, abuse, neglect, domestic violence and financial exploitation
- Mental health services and supports
- Employment, training and vocational rehabilitation
- Financial and other basic needs (e.g. benefits, Medicaid, Medicare, health insurance, food, shelter, paying for medical care and medications, etc.)
- Transportation
- Home maintenance (chore services, yard work, home safety)
- Legal issues (e.g., tax laws, power of attorney, guardianship, consumer rights, advocacy, etc)
- Education, recreation, life enhancement, volunteerism

The ADRC is accessed through a single point of entry. The ADRC will have a local phone number as well as a toll-free number; both will be advertised to the public. The office hours for business are from 7:45 a.m. to 4:30 p.m., Monday through Friday. People who call the ADRC after hours will hear a recorded message stating that the office is closed, information on ADRC office hours and steps for leaving a message. Our goal is to answer all calls when they come in. At a minimum, ADRC staff shall
respond to initial inquiries and requests for information and assistance within one business day and schedule an appointment or home visit when necessary. The ADRC website will also link to our resource database and will be easy for the consumer to access. Home visits will be conducted within one week following the consumer’s initial contact. I&A staff will also follow-up with people to find out how well the referral or proposed solution worked for them and to see if any additional information or service is needed.

Customer Service Strategy: I&A Specialists will be available to take phone calls and walk-in customers. Staff will provide phone coverage in shifts so that I&A specialists will have an opportunity to complete the follow up (call back, mail requested information or conduct a home visit) on calls taken or meetings that took place during their phone shift. A receptionist will be available at the front desk to welcome walk-ins, to cover the phone if all I&A staff are assisting with callers or in meetings and schedule meetings with the I&A Specialist. A computer will be available in the lobby area for public use to access the ADRC resource directory on line, complete program applications, conduct job searches, etc. Informational materials will also be available. Our goal will be to have as few handoffs as possible.

I&A staff will answer the phones and take the necessary personal information to screen and assess the need of the caller. If staff is able to meet the person’s need during this initial contact by providing routine information or a referral, this information will be entered into the SAMS database. When making a referral staff will always offer to make an introduction to the provider on behalf of the consumer. Should that consumer call or return to the ADRC at a later date, the individual will be asked if she or he would like to speak to the same I&A Specialist who provided previous assistance. If staff is unable to meet the callers’ needs with requested information or a referral to another entity staff will make an appointment for a home visit. I&A specialists will complete a long-term care functional screen on a consumer when requested. The benefit specialist will also be available to make appointments to visit individuals in their homes or at the ADRC office.
Through its day-to-day operations the ADRC will reflect the basic principles of Information and Referral (I&R Bill of Rights)\(^1\). The ADRC will:

- Maintain accurate, comprehensive, unbiased information about the health and human services available in the community;
- Provide confidential and/or anonymous access to information;
- Provide assessment and assistance based on the consumer’s need(s);
- Provide barrier-free access to information;
- Recognize the consumer’s right to self-determination;
- Provide an appropriate level of support in obtaining services;
- Assure that consumer’s are empowered to the extent possible; and,
- Assure that consumers have the opportunity to access the most appropriate service available in the system.

For emergency or crisis services, ADRC staff will provide the caller with several options: phone 9-1-1, contact the county’s provider, Journey Mental Health Center’s Emergency Services Unit and for abuse or neglected elders or an at risk adult contact the Human Services office. The ADRC also plans to work with the United Way’s 2-1-1 information and referral system. All ADRC activities and information will be entered into SAMS software as well as other county databases.

Dane County is fortunate in that this is a very resource rich community. Once the ADRC is fully operational we intend to explore ways to partner with the University of Wisconsin, area hospitals and other community agencies to provide opportunities for health education and screenings as well as staff training. We will develop MOU’s with county contracted providers for consumers and families to access the ADRC services through senior centers, nutrition sites, volunteer programs, Access to Independence, the DD provider network or other community programs to ensure there is no wrong door for entry to the ADRC.

\(^1\) Standards for Professional Information and Referral, 6\(^{th}\) edition. AIRS Standards Committee
III-B.3 Long Term Care Options Counseling:
The ADRC will offer long-term care options counseling in the following situations while always recognizing that participation in counseling is optional.

- When an individual, or person acting on his or her behalf, requests or indicates an interest in receiving information or advice concerning long term care options.
- When the ADRC determines that the individual might benefit from receiving long-term care options counseling.
- When an individual is referred to the ADRC by a hospital, nursing home, assisted living facility, agency responsible for administering the long-term care waiver, or other similar source.

I&A staff trained to do options counseling will be available to meet face-to-face with consumers and their families. Options counseling is an interactive decision-support process that allows staff to evaluate people’s strengths and preferences and weigh their options, rather than simply providing a list of service providers or programs people can choose from. This is an extension of I&A as it will expand upon information and assistance by offering different alternatives for a person who may be dealing with major life decisions.

Options counseling will cover the following:

- The individual’s personal history, preferred living arrangement and lifestyle, and goals for the future; functional limitations and capacities; financial situation; and other information needed in order to identify and evaluate available options.
- The full range and cost of long-term care options available to the individual such as home care, community services, Waiver services, Partnership Program, nursing home and Medicaid card services.
- The sources and methods of both public and private payment for long-term care services and the functional and financial criteria for receiving Waiver or Partnership Program services.
- How Estate Recovery and Spousal Impoverishment regulations affect the various living arrangement and programs, and
- Factors that the individual might want to consider when choosing among the various long-term care programs and benefits.

Staff will be trained to explain the opportunities and methods for maximizing independence and self-reliance, including the utilization of supports from family, friends, and community. Staff will be knowledgeable about the information on the sources and methods of public and private payment for long term care services that are available throughout the county, such as Medicaid Waivers, Partnership Program, Medicaid card services and other programs for which the person may be eligible. Staff must be able to explain the functional and financial criteria for receiving publicly funded long-term care services and for participating in the Medicaid fee-for-service system. Staff will be able to estimate whether the individual might be functionally and/or financially eligible for Medicaid and other long term care programs, and will complete a Long-Term Care Functional Screen (LTC-FS) when appropriate or when one is requested.

The ADRC will provide long-term care options counseling at a time, date, and location convenient for the individual, including but not limited to, the individual's home or apartment. Options counseling may involve one or more face-to-face meetings with the individual, unless the individual prefers it be done by telephone, mail, e-mail, or other means. Counseling may be provided to or include the individual's family, friends or other representatives acting on the individual's behalf. Every effort will be made to provide this counseling within 10 business days of the referral.

The ADRC will assure that information provided in long-term care options counseling will be timely, accurate, thorough, unbiased, and appropriate to the individual's situation. Long-term care options counseling will be tailored to the needs of the individual and will not attempt to persuade the individual to choose to participate in any particular long term-care setting, program, or service.
III-B.4 Elderly Benefits Counseling:
The Elderly Benefits Specialist (EBS) serves as the frontline, primary service provider of information, assistance and counseling to persons 60 and older concerning government entitlement programs and private insurance policies. In Dane County currently, an average of 300 clients are served annually. Assistance includes information about eligibility, assistance in making application for services and appealing denials and terminations. The EBS promotes and preserves the consumer’s independence and financial security. This includes giving information on consumer rights, complaint, grievance and appeals processes related to Medicare, managed care, private health insurance and Medicaid.

Dane County currently has 2.0 FTE Elderly Benefit Specialists who work for a contracted provider. Dane County is considering whether in 2013 these positions will be county employees or contracted positions. In either case, these positions will be physically located in the ADRC office, integrated with other ADRC services and supervised by the ADRC.

The EBS serves seniors and their families as well as supports other professionals through phone calls, home visits, office appointments, walk-ins and at various scheduled outreach sessions at Aging Focal Points, senior centers, housing units, and community groups. Public presentations, which remain a vital part of the EBS’ job, occur at hospitals, clinics, university sponsored events and county sponsored events.

The EBS provides the following services for person’s age 60 and older:
- Provide accurate and current information on a comprehensive array of private and government benefits and programs;
- Provide information and technical assistance about how to access such benefits and information regarding the responsibilities of program participants;
- Assist potential applicants for private and government benefits, including Medicaid, benefits administered by the Social Security Administration, FoodShare, Partnership, etc., to locate and gather verifying data, both financial and non-financial;
- Provide information on consumer rights, complaint, grievance and appeals processes;
- Provide advice and assistance in preparing and filing complaints, grievances and appeals at the local and state levels, and beyond;
- Make appropriate referrals for employment-related counseling and services;
- Initiate investigations to gather needed factual information to pursue advocacy duties;
- Provide representation, as needed and appropriate for older people in administrative hearings and other formal or informal grievance steps;
- Do not disclose information about a client without the informed consent of the client, unless required by law;
- Provide consumer and volunteer training and technical assistance to develop self and family advocacy;
- Negotiate on behalf of individuals with long-term care agencies and programs, service providers or the state regarding disputes over long-term care services; and,
- Identify and document concerns and problems of older people and related system-level issues and present that information to appropriate entities, including county government, the Department of Health Services, and the Wisconsin Council on Long-Term Care.

The EBS and the Disability Benefits Specialist (DBS) will work together to provide benefit program information and counseling to the public. The EBS and DBS will collaborate to provide services to clients who are between 55 and 65 years of age who may have questions about retirement benefits or disability benefits. The EBS’ have an in depth knowledge of all programs and work closely with the resources provided in the “Elder Rights & Benefits Manual.”

The work of the EBS will be defined by collaboration and coordination with most of the staff of the ADRC including outside staff members (i.e., elder abuse, APS, Veteran’s Services, Economic Assistance and Aging Focal Point staff).
III-B. 5 Disability Benefits Counseling

Dane County currently has 2.0 FTE Disability Benefit Specialists who are county funded and work for a contracted provider. These positions serve people who have mental health needs and/or are homeless. This program will continue in 2013 as a county funded service and will not be located at the ADRC. Dane County plans to have 4.0 FTE Disability Benefit Specialists located in the ADRC and integrated with other ADRC services. Dane County is considering whether these positions will be county employees or contracted positions.

The ADRC will supervise the Disability Benefit Specialists located at the ADRC. The DBS will work closely with the I&A specialists. Co-location at the ADRC will provide opportunities for case consultation, problem-solving, and improved customer service. The DBS role crosses into a number of ADRC core services or functions:

- Benefits Counseling (including employment-related)
- Consultation/technical assistance (to community partners as well as within the ADRC)
- Consumer Advocacy
- Assistance with applications, appeals and denials
- Education/Prevention

The DBS participate in training as staff members of the ADRC and will also provide training to other ADRC staff regarding DBS services. The DBS will participate in outreach efforts to promote DBS services as well as educating the community regarding the benefits system. The DBS will provide the following services:

- Provide accurate and current information on private and government benefits and programs;
- Provide information and technical assistance on how to access these benefits;
- Provide information on consumer rights, complaint, grievance, and appeal processes;
- Provide advice and assistance in preparing and filing complaints, grievances, and appeals at the local and state levels;
- Make referrals for employment and other disability-related counseling and services;
- Provide representation as needed in administrative hearings along with other grievance steps; and,
- Consult with and attend all training events provided under contract by DHS to determine appropriate interpretation of law and action to assist in resolution of concerns.

The DBS and EBS will work together to provide benefit program information and counseling to the public. The EBS and DBS will collaborate to provide services to clients who are between 55 and 65 years of age who may have questions about retirement benefits or disability benefits.

The Disability Benefit Counseling services are a unique and critical service of the ADRC. Information regarding Disability Benefit Counseling services will be part of the ADRC’s marketing materials. In addition, a detailed brochure specific to DBS services will be developed.

**III-B. 6 Access to Publicly Funded Long-term Care Programs: Functional Screen, Financial Eligibility Determination and Enrollment-Related Functions**

The ADRC will be the entry point for publicly funded long-term care services. I&A Specialists will ensure that individuals who contact or are referred to the ADRC and appear to need or be eligible to receive publicly funded long-term care services are informed about and are assisted in accessing these services. The I&A Specialist will determine functional eligibility and facilitate the financial eligibility or other benefits determination process. All I&A staff will be trained and certified to complete the functional screen. Every attempt will be made to have the I&A staff who took the original referral follow through with the consumer until services are completed.
The I&A Specialist will offer the Long-Term Care Functional Screen (LTC-FS) when an individual expresses interest in applying for publicly funded long-term care or someone acting on another’s behalf makes a request, or when ADRC staff determine that an individual might benefit from the screen. A certified ADRC screener will administer the initial functional screen to determine an individual’s functional eligibility for COP or Medicaid Waivers. This shall be done, if possible, within 14 days of the person’s request or acceptance of the offer of a screen. The screen establishes a level of care. ADRC staff will send a notification letter to people who are found to be functionally ineligible for publicly funded long-term care, and inform them of their appeal rights.

Individuals found to be functionally eligible for COP or the Waiver programs will also be screened for COP financial eligibility before a referral to long-term care services can be made. Individuals must be functionally and financially eligible before a referral can be made for publicly funded long-term care services. Dane County has waiting lists for long-term care services at present. A referral from the ADRC will result in individuals being added to the COP/Waivers wait list. Individuals may also be referred to the Social Security Office or Income Maintenance (IM) to access other benefits for which they may be eligible while they wait for long-term care services. Currently Dane County is planning for co-location of 2.0 FTE IM staff from our Economic Assistance and Work Services Division in the ADRC. The IM staff are county funded. A focus on customer service in the ADRC is a factor in our planning to co-locate IM staff who are EBD (Elderly, Blind, Disabled) Specialists in the ADRC.

The ADRC will maintain an accurate, complete, and up-to-date list of all staff that administers the LTC-FS. All screeners will have successfully completed the on-line screener-training course and be certified as a functional screener by the Department before completing any screens. The ADRC will notify the Department within 1 business day of a screener’s involuntary termination and within 3 business days of the departure or reassignment of a screener to ensure the screener’s security access is deactivated.
The ADRC will have policies and procedures in place to ensure the consistency, accuracy, and timeliness of the functional screen. A supervisor(s) will assume the role of “Screen Liaison” as required in the State contract to assure screen quality. Those functions will include:

- Serving as a contact person for communications with the Department on screen quality, training and technical issues, and implement screen quality requirements, and provide guidance to other screeners on the ADRC staff.

- Training, mentoring and monitoring new screeners. Ensuring that all screeners participate in Department required training on the screen; and, ensuring that each screener is able to receive communications from the Department's functional screen list serve.

- Ensuring that all screeners follow the most current version of the instructions for the functional screen provided by the Department.

- Consulting with the Department or its designee about cases where there are unexpected results or it is unusually difficult to complete an accurate screen or to interpret all or part of the completed screen.

- Ensuring that all certified screeners participate in continuing-skills testing required by the Department. The ADRC will plan and carry out remedial action and re-testing if necessary if results indicate a screen is below the standards set by the Department.

- Reviewing a random sample of completed screens at least once a year to determine whether they are accurate, complete and timely and that the results are reasonable based on the person’s condition.

- Review and respond to any quality assurance issues detected by the Department and implement any improvement projects or correction plans required by the
Department to ensure the accuracy and thoroughness of the screens performed by ADRC staff.

As a unit within the Adult Community Services Division, the ADRC will work closely with Long Term Support and Developmental Disabilities on notification of persons relocating from nursing homes, admissions to Clearview or other brain injury rehab facilities, Family Care Transfers from other counties, etc. Good communication will ensure streamlined and barrier-free processes. The ADRC will ensure that forms are properly completed, information is correct and documentation complete. Routine meetings will be established between the ADRC, Waiver program staff, APS, Income Maintenance staff and other program areas as needed to review processes to ensure that systems in place are effective and as efficient as possible.

III-B. 7 Enrollment and Disenrollment Counseling
Family Care is not a long-term care program option here though the Partnership program operates in Dane County. The ADRC will inform individuals about both publicly funded long-term care programs (Medicaid Waivers and Partnership). The ADRC will complete the LTC-FS for individuals interested in long-term care programs operated by the county. Individuals who are eligible for Medicaid Waiver services will be referred to the appropriate service (Long Term Support, Funding Coordination Program or Developmental Disabilities Services) unit and placed on the wait list for services. In the absence of a waiting list, those individuals will be referred for enrollment to the Waiver program.

Individuals may apply directly to the Partnership Program operated by Care Wisconsin. Care Wisconsin completes the LTC-FS for its program applicants and is responsible for the enrollment process for the Partnership Program in Dane County.

III-B. 8 Access to Mental Health and Substance Abuse Services
The ADRC will provide information and assistance, benefit counseling, and referral to emergency services to persons with mental illnesses and/or substance use disorders. Staff will receive basic training on mental health and substance use disorders including
how to recognize when emergency intervention is warranted. The ADRC phone system will allow for warm transfers (connecting to another agency while the caller remains on the line) to the Journey Mental Health Center’s Emergency Services Unit Crisis Line when appropriate.

Disability Benefit Specialist services will be available to all ADRC consumers, regardless of disability type. Dane County is fortunate to have a Community Benefit Specialist (CBS) program already in place for mental health consumers. This program, contracted through Employment Resources Inc, is available to Dane County residents with primary mental health diagnoses and provides intensive outreach and assistance surrounding disability benefits. As can be expected, demand for these services consistently exceeds capacity and the waitlist is managed on a priority level basis. It is expected that the CBS program will partner with the ADRC benefit specialists to ensure that mental health consumers receive the most appropriate level of service available and that benefit specialist resources are used efficiently.

Information and referral for the mental health system is currently contracted through Recovery Dane. Recovery Dane maintains an extensive database of services available to people experiencing mental health and substance use issues and assists with referrals to these services. Recovery Dane will be expected to collaborate with ADRC Information and Referral Specialists who encounter people in need of behavioral health services. Representatives from Recovery Dane have been included in the ADRC Stakeholder Advisory Committee to facilitate this collaboration. Information and referral for substance abuse services is not centralized. There are different entry points for information targeted to specific populations. ADRC staff will collaborate with the substance abuse provider network and will be aware of the referral points for different target populations.

Dane County is in the process of developing a new program in 2012 to improve front-end access to behavioral health services. This initiative is currently in the planning phase, with a Request for Proposals in development. It is expected that this program
will work closely with the ADRC to ensure that mental health and substance abuse needs are addressed.

The ADRC will not provide any behavioral health services directly, but rather work within the contracted mental health and substance abuse service systems to connect eligible consumers with needed support.

III-B 9. Access to SSI, SSI-E, Medicaid and FoodShare and Other Public Programs and Benefits

When a consumer contacts the ADRC and appears to be eligible to receive public benefits, staff may do a benefits check-up to determine eligibility. ADRC staff will be responsible for completing SSI-E applications for eligible individuals. Staff may assist with an ACCESS application, assisting the individual in gathering the financial information necessary to process the application. Staff may also do a direct referral to the agency that could assist (i.e., Income Maintenance for Medicaid, and FoodShare; the Social Security office for Title 19, Medicare, SSI, Social Security, and SSDI; the Veteran Services office; Housing Authorities for both Madison and Dane County; the Area Agency on Aging for Older Americans Act programs; and Independent Living Center services offered by Access to Independence, etc.)

Memorandums of Understanding will be developed that establish the referral processes between the ADRC and the agencies routinely receiving its referrals. MOUs will serve to formalize the processes in place to ensure consumers are served in a timely fashion as well as to resolve any conflicts that may arise.

Dane County’s current plans include co-location of 2.0 FTE Income Maintenance (IM) workers within the ADRC. These positions are EBD specialists and are not funded by the ADRC. Having this expertise close at hand in the ADRC will improve customer responsiveness and be a significant resource in answering questions raised by I&A specialists.
III-B. 10 Short-Term Care Coordination
The ADRC will provide short-term care coordination to assist with arranging services. The care coordination will be provided in conjunction with information and assistance, outreach and options counseling through the ADRC. Referrals will be made to community providers when additional assistance is needed. Short-term care coordination will be limited to no more than 90 days. The ADRC policies and procedures will provide criteria to guide staff in identifying appropriate customers who may benefit from short-term care coordination and in determining when it should end.

III-B. 11 Access to Emergency Services
ADRC staff are trained to recognize when the need arises to contact emergency services and are familiar with the resources to make appropriate referrals, it may be a contact to Adult Protective Services, the on-call crisis worker, or other emergency services in the community. During business hours, staff may assist in making the call to the on-call crisis worker for the consumer.

After hours callers will hear a recording which states the office is closed, explains ADRC office hours, and provides the following options:

- If this is a life-threatening emergency, please call 9-1-1.
- If this is a mental health emergency, please contact the Journey Mental Health Center’s Emergency Services Unit at 280-2600.
- To report suspected abuse or neglect of an at-risk adult or older person, which will be received on the next regular business day, please call 261-9933.
- To leave a message for the ADRC of Dane County, please do so after the beep.
- There is also an established protocol for those infrequent situations in which the DCDHS after hours child welfare phone line receives a call regarding adult services.

III-B. 12 Access to Elder Adults/Adults-at-Risk and Adult Protective Services
Adult Protective Services, Adults-at-Risk and Elder Abuse services will not be administered by the ADRC. Currently Elder Abuse services are located in the Area
Agency on Aging and Adult Protective Services is a unit within the ACS Division. Because these services are frequently involuntary and represent a social control role, we believe they are contrary to the ADRC goal of offering a warm, welcoming environment. Dane County is considering a reorganization of these services, combining Elder Abuse, Adults-at-Risk and the APS Unit, which will increase the size of the unit and necessitate the addition of a Supervisor. Locating these services together will provide more support for staff and provide greater opportunities for consistency, efficiency and developing best practice in service delivery. It is anticipated that the reorganization will be in effect no later than the end of the first quarter of 2013.

ADRC staff will be knowledgeable of the warning signs and indicators related to individuals at-risk. ADRC staff will be prepared to identify persons who may be at risk of abuse or neglect and will link them to the responsible entities:

- Abuse and neglect services
- Assistance in obtaining physical custodial care, housing, medical care, medications and food
- Voluntary or court-ordered protective services under ch.55, Wis. Stats., when needed to protect an individual or protect others from the individual
- Law enforcement, domestic violence, mental health services, and emergency detention under ch.51, Wis. Stats. when needed
- Guardianship
- Watts reviews
- Representative payee
- Domestic violence services involving vulnerable adults
- Sexual assault services involving vulnerable adults

Dane County will use a “no wrong door” approach to accessing protective services. Any individual or agency can make a protective services referral by calling either the ADRC or the intake line for protective services. If the call is made to the ADRC, ADRC staff will discern the nature of the problem and refer the caller through a warm transfer,
connecting the caller to the most appropriate response agency while the caller remains on the line. It is anticipated that the ADRC’s role in these situations will end when the protective services referral is made, unless the consumer is already an ADRC client or, as a result of the protective services referral, the protective services agency refers the consumer for ADRC services. After hours emergency callers will be directed to call 9-1-1 or the Emergency Services Unit at Journey Mental Health Center.

It will be the responsibility of the county’s protective services agency to negotiate relationships/MOU’s with law enforcement, hospital emergency rooms, domestic violence agencies, managed care organizations and other entities that serve older adults and people with disabilities. In most cases, this will be a continuation of existing relationships and understandings.

III-B.13 Transitional Services
Dane County has a well-established and well-regarded transition policy serving young adults with developmental disabilities transitioning from high school to adult long-term care services. The ADRC will build on that model to assist young adults transitioning from school to connect with available programs or benefits. The ADRC will do community outreach to ensure young adults with developmental disabilities or physical disabilities know about transition services offered through the ADRC. Experienced I&A staff knowledgeable of this process will be responsible for transition related activities such as outreach to schools, parent groups, Family Support and Resource Center (FSRC), rural schools’ transition advisory groups, DVR, etc. The ADRC will take on the task of sending letters to area schools asking them to identify students nearing age 18 who they feel may be eligible for long-term care services. The DD services unit has used this model for many years to facilitate early identification of potential long-term care participants. Transitioning from school to adult services can be a very confusing and overwhelming experience for many individuals and families. A coordinated approach of working closely with schools and other community partners has proven to be an effective and efficient model. Early identification of potential enrollees has enabled DD services staff, school staff and families time to plan for the future.
Transition Coordinators will have expertise in Developmental Disabilities and will be responsible for completing the LTC-FS for those young adults (when age appropriate) the schools and FSRC identify as likely to be program eligible. All other transitioning youth and their families who contact the ADRC for services will receive assistance from I&A staff who make that first contact. Youth age 17 ½ or older are eligible for the LTC-FS and will be offered the screen if it appears they are eligible or if they specifically request the screen. Youth who do not appear eligible for publicly funded long-term care will be referred to other programs or benefits counseling. (See Attachment E Flow Chart).

**III-B 14 Prevention and Early Intervention**

Long Term Care (LTC) options counseling will include information on prevention and early intervention services available through the ADRC and the community. Staff will be knowledgeable about community resources and will also be alert to potential risk factors for a person's situation, identify opportunities for prevention and early intervention, and can assist in helping to link consumers to these resources. The ADRC plans to partner with agencies involved with community prevention and education such as Safe Communities, the City-County Public Health Department, the University of Wisconsin, Waisman Center Outreach, United Way, area hospitals, etc.

The Area Agency on Aging of Dane County currently is involved in administering, coordinating, contracting for, and partnering in a number of Prevention and Early Intervention activities. These activities include:

- **Nutrition:** Congregate and Home Delivered meals are provided throughout Dane County for individuals age 60 and over through contracts with 16 different agencies and seven food providers. The Nutrition Program in Dane County is visible and trusted as a result of its adherence to consistency of standards.

- **Senior Farmers Market Program:** (SFMP) This program directly results in older adults purchasing and consuming fresh fruits and vegetables at seasonal Farmers Markets. Nutrition Education is an integral part of Older Americans Act
Nutrition Programs and the SFMP.

- **Living Well with Chronic Conditions**: This six-week evidence-based workshop developed by Stanford University helps people with chronic conditions learn and practice ways to better manage these conditions by choosing tools that will work for them and putting them into action.

- **National Family Caregiver Support Program**: Family caregivers and other informal support providers receive support and assistance in their care giving roles by receiving information and assistance in accessing services, respite and supplemental services, and training and support.

- **Falls Prevention**: Evidence-based workshops, classes, and programs are available throughout Dane County with the goal of preventing costly and debilitating falls in older adults (Stepping On, No Falls, etc.).

- **Medication Management**: Several pilot programs and a partnership with United Way and Aging Focal Points to prevent adverse drug events and medication related falls.

- **Case Management**: Through contracts with Dane County and local (city, municipal) dollars, case managers located in Focal Point agencies are performing prevention and early intervention activities everyday.

Unmet needs will be tracked through the ADRC calls and contacts, through the collaborative efforts of the various prevention programs already underway, and through the work of the ADRC governing board.

**III-B 15 Client Advocacy**

The ADRC will develop or utilize information provided by the Department regarding the rights that an individual has for various long-term care services, benefits, self-advocacy, and independent advocacy services. The ADRC will link individuals to appropriate advocacy resources such as EBS, DBS, Board on Aging & Long-Term Care Ombudsman, federally designated protection and advocacy organizations (Disability Rights Wisconsin), mental health and AODA advocates, volunteer and peer support, or other organizations that provide advocacy when appropriate and available.
The ADRC will ensure that individuals receive appropriate advocacy and representation, especially in cases involving eligibility for programs or services provided by the county, the Area Agency on Aging of Dane County and the ADRC in order to avoid a conflict of interest. The ADRC will develop a complaint and grievance process for informal and formal complaints, including access to the State Fair Hearings process.

Working with its advisory committee during development and later its governance board, the ADRC will develop a list of unmet needs in the community and advocate when appropriate for system change to address identified gaps in the long-term care system.

III-B 16 Community Needs Identification
The ADRC recognizes that one of its key roles is to identify unmet needs in the community and assist the community to prioritize its resources. The ADRC’s initial plan will be to reach out to existing community groups (collaborative partners, service providers, advocacy groups, etc.) to hold a series of listening sessions. The focus of these sessions will be to educate the community on the function and role of the ADRC and solicit information on perceived needs for education, prevention and system advocacy. The ADRC will also seek input from its Stakeholder Advisory Committee during ADRC development and its Governance Board on an ongoing basis. The ADRC will work with the Area Agency on Aging to identify unserved or underserved populations and the types of services that are in short supply.

The information gathered during these sessions will be compiled. ADRC staff will develop a list that will be shared with ADRC Governance Board and county officials. Working with its board the ADRC will develop priorities and a plan of action. The ADRC will use this information to target outreach; select topics for education and prevention efforts; and focus systems’ advocacy efforts. (See Attachment F Flow Chart.)
### III-D. Timeline

<table>
<thead>
<tr>
<th>Key Tasks / Milestones In ADRC Implementation</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appoint ADRC governing board</td>
<td>August 1, 2012</td>
</tr>
<tr>
<td>Create ADRC organization</td>
<td>June, 2012</td>
</tr>
<tr>
<td>Hire ADRC director</td>
<td>August 1, 2012</td>
</tr>
<tr>
<td>Obtain physical space for ADRC</td>
<td></td>
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<tr>
<td>* Main office</td>
<td>Lease approved June, 2012</td>
</tr>
<tr>
<td>* Main office set up and ready for occupancy</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>* AAA office move in date</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>* Additional or branch offices, if any</td>
<td>Do not apply</td>
</tr>
<tr>
<td>ADRC telephone system in place</td>
<td>August 31, 2012</td>
</tr>
<tr>
<td>I&amp;A / resource database and client tracking systems in place</td>
<td>September 7, 2012</td>
</tr>
<tr>
<td>Identify current staff transferring to ADRC</td>
<td>August 1, 2012</td>
</tr>
<tr>
<td>Hire new I&amp;A / options counseling staff &amp; transfer current staff</td>
<td>First cohort starts late Sept, 2012</td>
</tr>
<tr>
<td>Train I&amp;A / options counseling staff</td>
<td>Sept ’12 - ongoing</td>
</tr>
<tr>
<td>Obtain AIRS certification for I&amp;A specialist</td>
<td>June 30, 2012</td>
</tr>
<tr>
<td>Provide EBS services at ADRC (transfer position(s) to ADRC or MOU)</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>Hire DBS</td>
<td>February 1, 2013</td>
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<tr>
<td>Train DBS</td>
<td>Feb ’13 - ongoing</td>
</tr>
<tr>
<td>Develop required policies and procedures</td>
<td></td>
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<tr>
<td>*LTC Access Plan and related MOUs</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Functional screen quality procedures (where there is an MCO)</td>
<td>Do not apply</td>
</tr>
<tr>
<td>*Goals for marketing and volume of customer contacts</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*I&amp;A follow up policy</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Mental health and substance abuse services access plan</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Policies, procedures and MOUs for accessing Medicaid, Social Security, SSI, SSDI, Veteran’s benefits, FoodShare and other programs/services</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Conflict of interest policy</td>
<td>September 1, 2012</td>
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<tr>
<td>Activity</td>
<td>Target Date</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>*Short term care coordination protocols</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Complaint and grievance procedure</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>*Process for identifying unmet needs</td>
<td>September 1, 2012</td>
</tr>
<tr>
<td>Publicize opening of ADRC</td>
<td>September 2012 - ongoing</td>
</tr>
<tr>
<td>Other pre-opening activities (list)</td>
<td></td>
</tr>
<tr>
<td>*Develop MOUs with referral partners</td>
<td>September, 2012</td>
</tr>
<tr>
<td>*Develop MOU with Resource Database Partner and begin gathering and entering data</td>
<td>September, 2012</td>
</tr>
</tbody>
</table>

**Key Tasks / Milestones In ADRC Implementation**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Begin serving target populations</td>
<td></td>
</tr>
<tr>
<td>*Elderly</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>*Physical disabilities</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>*Developmental disabilities</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>*Mental illness/substance use disorders</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>*Youth transitioning to adult system</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>Begin offering I&amp;A/options counseling and related services</td>
<td>October 1, 2012</td>
</tr>
<tr>
<td>Begin offering disability benefits counseling</td>
<td>February 15, 2013</td>
</tr>
<tr>
<td>Provide information about ADRC transition services to young adults with disabilities, school districts, and human service agencies.</td>
<td>October, 2012</td>
</tr>
<tr>
<td>Transfer or hire, train and certify functional screeners</td>
<td>Late Sept., 2012</td>
</tr>
<tr>
<td>Begin offering the LTC functional screen</td>
<td>October, 2012</td>
</tr>
<tr>
<td>Begin functional eligibility determination for Waiver waiting lists</td>
<td>October, 2012</td>
</tr>
<tr>
<td>*For Waiver participants converting to managed care</td>
<td>Does not apply</td>
</tr>
<tr>
<td>*For people on the wait list entering managed care</td>
<td>Does not apply</td>
</tr>
<tr>
<td>*For new LTC applicants</td>
<td>October, 2012</td>
</tr>
<tr>
<td>MCO(s) start date(s)</td>
<td>Does not apply</td>
</tr>
<tr>
<td>Achieve full implementation of all ADRC requirements</td>
<td>March, 2013</td>
</tr>
<tr>
<td>Other (list below)</td>
<td></td>
</tr>
</tbody>
</table>
III-E. ADRC Annual Budget

DEPARTMENT OF HEALTH SERVICES
STATE OF WISCONSIN
Division of Long Term Care
F-00052A (11/2009)

AGING AND DISABILITY RESOURCE CENTER (ADRC) ANNUAL BUDGET

Completion of this form is voluntary; however, the information requested is required as part of the ADRC application process.

Line Item Budget: Include the following information

<table>
<thead>
<tr>
<th>ADRC Grant Funding</th>
<th>MA Match Funding</th>
<th>Other Funding 1 (identify below)</th>
<th>Other Funding 2 (identify below)</th>
<th>Grand Total</th>
</tr>
</thead>
</table>

**ADRC Program Personnel**

<table>
<thead>
<tr>
<th>Item</th>
<th>ADRC Grant Funding</th>
<th>MA Match Funding</th>
<th>Other Funding 1 (identify below)</th>
<th>Other Funding 2 (identify below)</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
<td>2,338,780</td>
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<td>2,338,780</td>
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<tr>
<td>Fringe</td>
<td>1,088,255</td>
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<td>1,088,255</td>
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<tr>
<td><strong>Subtotal</strong></td>
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<td><strong>0</strong></td>
<td><strong>3,427,035</strong></td>
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**Direct Expenses**

<table>
<thead>
<tr>
<th>Item</th>
<th>ADRC Grant Funding</th>
<th>MA Match Funding</th>
<th>Other Funding 1 (identify below)</th>
<th>Other Funding 2 (identify below)</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
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<tr>
<td>Training</td>
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<tr>
<td>Printing</td>
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<td>Postage</td>
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<td>Computer &amp; related, IT, SAMS</td>
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<tr>
<td>Equipment Maintenance</td>
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<td>Certifications/Professional Dues</td>
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<td>Translation Services</td>
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<td>Outreach/Marketing</td>
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<tr>
<td>Committee Costs</td>
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<td>Yellow Page Advertising</td>
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<tr>
<td>After Hours Costs</td>
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<td><strong>0</strong></td>
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<td><strong>Subtotal</strong></td>
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**Indirect Expenses**

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<thead>
<tr>
<th>Item</th>
<th>ADRC Grant Funding</th>
<th>MA Match Funding</th>
<th>Other Funding 1 (identify below)</th>
<th>Other Funding 2 (identify below)</th>
<th>Grand Total</th>
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</thead>
<tbody>
<tr>
<td>Administration/AMSO</td>
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<td><strong>0</strong></td>
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### Subcontracts

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<tr>
<th>Description</th>
<th>Amount 1</th>
<th>Amount 2</th>
<th>Amount 3</th>
<th>Amount 4</th>
<th>Total</th>
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</thead>
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<td>ADRC Contract Staff</td>
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</table>

Other Funding 1: 

Other Funding 2: 

**NOTE:** Insert additional lines as needed. Complete and/or add lines in Direct Expenses as appropriate.

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Up costs:</td>
</tr>
<tr>
<td>Total Start up and 2012 Costs</td>
</tr>
</tbody>
</table>

37
ADRC BUDGET: PERSONNEL WORKSHEET

Completion of this form is voluntary; however, the information requested is required as part of the ADRC application process.

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Name - Staff (First name and last initial)</th>
<th>All Functions* (ADRC and other) performed by this person (see example below)</th>
<th>Total FTE for this person</th>
<th>Annual Salary per person (not fringe)</th>
<th>Percent FTE funded by ADRC** (all funds)</th>
<th>Percent FTE funded by other source (list sources)</th>
<th>Annual Fringe Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director and Supervisors Section</td>
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<tr>
<td>ADRC Director</td>
<td>ADRC Director</td>
<td>Lead Manager for ADRC operations.</td>
<td>1</td>
<td>$90,000</td>
<td>100%</td>
<td></td>
<td>$29,680</td>
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<tr>
<td>Ass't ADRC Director</td>
<td>Ass't ADRC Director</td>
<td>Supports ADRC Director; is assigned primary responsibility for certain ADRC functions.</td>
<td>1</td>
<td>$66,610</td>
<td>100%</td>
<td></td>
<td>$42,320</td>
</tr>
<tr>
<td>SocWk Supervsrs 2012</td>
<td>SocWk Supervsrs 2012</td>
<td>Supervises 10-11 I &amp; A Specialists; and is assigned other management duties.</td>
<td>1</td>
<td>$66,610</td>
<td>100%</td>
<td></td>
<td>$42,320</td>
</tr>
<tr>
<td>SocWk Supervsrs 2012</td>
<td>SocWk Supervsrs 2012</td>
<td>Supervises 10-11 I &amp; A Specialists; and is assigned other management duties.</td>
<td>1</td>
<td>$66,610</td>
<td>100%</td>
<td></td>
<td>$42,320</td>
</tr>
<tr>
<td>SocWk Supervsrs 2012</td>
<td>SocWk Supervsrs 2012</td>
<td>Supervises 10-11 I &amp; A Specialists; and is assigned other management duties.</td>
<td>1</td>
<td>$66,610</td>
<td>100%</td>
<td></td>
<td>$42,320</td>
</tr>
<tr>
<td>IT Specialist</td>
<td>IT Specialist</td>
<td>Manages computer system, IP phones, hardware &amp; software</td>
<td>0.5</td>
<td>$36,490</td>
<td>100%</td>
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<td>$8,630</td>
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<tr>
<td>Other Staff Section</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Workers Entry</td>
<td>Social Workers Entry</td>
<td>I &amp; A , options counseling, LTCFS, brief care mgmt, etc.</td>
<td>1</td>
<td>44,950</td>
<td>100%</td>
<td></td>
<td>$21,680</td>
</tr>
<tr>
<td>----------------------</td>
<td>----------------------</td>
<td>----------------------</td>
<td>----------------------</td>
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<td>----------------------</td>
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</tr>
<tr>
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<td>44,950</td>
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<td>$21,680</td>
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<td></td>
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<td>$21,680</td>
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<td></td>
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<td></td>
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<td></td>
<td></td>
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</tr>
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<td>1</td>
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<td>100%</td>
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<td></td>
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</tr>
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<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
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<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
<td></td>
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</tr>
<tr>
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<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
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</tr>
<tr>
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<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
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<tr>
<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
<td>1</td>
<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Social Workers Entry</td>
<td>Social Workers Entry</td>
<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
<td>1</td>
<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
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<tr>
<td>Social Workers Entry</td>
<td>Social Workers Entry</td>
<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
<td>1</td>
<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
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<td>Social Workers Entry</td>
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<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
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</tr>
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<td>Social Workers Entry</td>
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<td>1</td>
<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
</tr>
<tr>
<td>Social Workers Entry</td>
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<td>I &amp; A, options counseling, LTCFS, brief care mgmt, etc.</td>
<td>1</td>
<td>44,950</td>
<td>100%</td>
<td>$21,680</td>
<td></td>
</tr>
<tr>
<td>Social Workers Existing Average</td>
<td>Social Workers Existing Average</td>
<td>I &amp; A, options counseling, LTCFS, and duties requiring higher skill level such as community education, lead worker, and special projects.</td>
<td>1</td>
<td>66,610</td>
<td>100%</td>
<td>$27,140</td>
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<tr>
<td>Social Workers Existing Average</td>
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<td>I &amp; A, options counseling, LTCFS, and duties requiring higher skill level such as community education, lead worker, and special projects.</td>
<td>1</td>
<td>66,610</td>
<td>100%</td>
<td>$27,140</td>
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</tr>
<tr>
<td>Social Workers Existing Average</td>
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<td>1</td>
<td>66,610</td>
<td>100%</td>
<td>$27,140</td>
<td></td>
</tr>
<tr>
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<td>66,610</td>
<td>100%</td>
<td>$27,140</td>
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<tr>
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<td>1</td>
<td>66,610</td>
<td>100%</td>
<td>$27,140</td>
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<td>higher skill level such as</td>
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<td>higher skill level such as</td>
<td>higher skill level such as</td>
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<tr>
<td>community education, lead</td>
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<td>worker, and special projects.</td>
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<tr>
<td>1 66,610 100% $27,140</td>
<td>1 66,610 100% $27,140</td>
<td>1 66,610 100% $27,140</td>
<td>1 66,610 100% $27,140</td>
<td>1 66,610 100% $27,140</td>
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<tr>
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<tr>
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<td></td>
<td></td>
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<tr>
<td>Clerk Typist I-II</td>
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**TOTALS:** 54.5  2,338,780  1,088,255  3,427,035
ADRC BUDGET: SUBCONTRACT WORKSHEET

Completion of this form is voluntary; however, the information requested is required as part of the ADRC application process, when appropriate.

<table>
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<tr>
<th>Name - Contractor</th>
<th>Contracted Work</th>
<th>Name - Staff *</th>
<th>FTE</th>
<th>Cost</th>
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<td>TBD</td>
<td>Disability Ben Specs</td>
<td></td>
<td>4</td>
<td>260,000</td>
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</table>

* List if contracted work is performed by an ADRC staff member; one staff member per line.

**EXAMPLE**
If subcontract is for marketing, you would not fill in staff name; however, if subcontract is for DBS, you would fill in name and FTE.

Discussion: Dane County has not determined if it will directly employ or contract for Disability Benefit Specialist and Elderly Benefit Specialist positions. This application shows DBS services as contracted and EBS services as county staff, but the final decisions have not been made. There are not-for-profit agencies in Dane County that have considerable DBS and/or EBS knowledge and experience. If the decision was to contract for DBS or EBS, provide selection would occur via either an RFP process or a sole source process.
Part IV: Attachments

A. County Board Resolution Authorizing the ADRC Application
B. Letter of Support from the Area Agency on Aging of Dane County
   Letter of Support from Dane County’s Long Term Support Committee
C. Organizational Chart
D. Designation of Proprietary Information
E. Transitional Services Flow Chart
F. Customer Service Flow Chart
G. Director Position Description
Attachment A

Res. 279, 2011-12

Authorizing Application to Wisconsin Department of Health Services
for Funds to Operate an Aging and Disability Resource Center
DCDHS - ACS Division

Aging and Disability Resource Centers (ADRC) currently exist in more than 55 Wisconsin counties. The mission of ADRCs is to support older adults and adults with disabilities and their families and caregivers by providing useful information, assistance and education on community services and long term care options. The goals of an ADRC include, but are not limited to:

- Welcome the whole community to an attractive, accessible, non-threatening facility.
- Serve individuals regardless of their income, health condition and long term care needs.
- Provide outreach and services to young people (age 17½ years) with disabilities as they transition from the school system to adult services.
- Provide reliable and objective information about a broad range of community resources of interest to older adults and people with disabilities.
- Enable people to make informed, cost-effective decisions about long term care.
- Delay or prevent the need for long term care services and/or public funding for them.
- Provide information and assistance to promote health and independence.
- Serve as the single entry point for publicly funded long term care.
- Identify people at risk and with needs and connect them to needed services.
- Help adults access needed services through advocacy and assistance.

Historically, ADRC funding was not available for a county until Family Care began. Beginning with the current State biennial budget, ADRC funding is no longer tied to Family Care. The Wisconsin Department of Health Services (WDHS) has encouraged Dane County to apply for ADRC funding. Annual State and Federal funding of $4,076,206 is available to Dane County for ADRC operations. There is no requirement for Dane County to provide matching funds.

DCDHS staff have studied this matter, including drafting budget scenarios and have found that $4,076,206 is sufficient to operate the ADRC and offer quality services. No county GPR will be required. Based on Dane County’s population, the ADRC will need to have about 46.5 staff positions to meet its contractual obligations with WDHS. These will primarily be newly created county positions; a few positions may be filled through contracts with purchase of service agencies. Per a State of Wisconsin requirement, the Area Agency on Aging of Dane County, which is part of DCDHS, will be co-located and work collaboratively with the ADRC. The ADRC will be located in a to be determined commercially zoned location and will likely have characteristics similar to the Job Center and the DCDHS South Madison Office: on a major street, on a bus line, plenty of free parking, first floor office, accessible, etc. Facility renovations and other start-up costs will be covered by keeping initial operating costs low by opening the ADRC with only partial staffing and gradually increasing staff over the first several months. This method for covering ADRC start-up costs has been used successfully by many other counties.
The timeline for ADRC development is as follows:

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2012</td>
<td>Submit ADRC Application to WDHS</td>
</tr>
<tr>
<td>March – April 2012</td>
<td>WDHS reviews application, requires revisions, eventually approves</td>
</tr>
<tr>
<td>March 2012</td>
<td>ADRC location identified; lease term and conditions negotiated</td>
</tr>
<tr>
<td>April 2012</td>
<td>Resolution for ADRC Lease introduced</td>
</tr>
<tr>
<td>April – May 2012</td>
<td>Resolution accepting ADRC Funds and authorizing new positions introduced</td>
</tr>
<tr>
<td>July – August 2012</td>
<td>Leasing, funding and new position resolutions approved; facility renovations and staff recruitment begin</td>
</tr>
<tr>
<td>August 2012</td>
<td>ADRC Director hired</td>
</tr>
<tr>
<td>August – September 2012</td>
<td>Staff necessary for October opening are hired and trained</td>
</tr>
<tr>
<td>October 2012</td>
<td>ADRC opens</td>
</tr>
<tr>
<td>October 2012 – March 2013</td>
<td>ADRC gradually adds staff as calls and referrals increase</td>
</tr>
</tbody>
</table>

A County Board resolution approving submission of the ADRC application is a required component of all applications for ADRC funding.

**NOW, THEREFORE, BE IT RESOLVED,** that the Dane County Board of Supervisors supports the development of an Aging and Disability Resource Center to be operated by the Department of Human Services with a projected opening date of October 2012;

**BE IT FURTHER RESOLVED** that the Department of Human Services is authorized to submit an application to the Wisconsin Department of Health Services for funding for an Aging and Disability Resource Center.

Primary Sponsor:

_______________________________________
_______________________________________
_______________________________________

*This resolution passed by unanimous approval of the Dane County Board of Supervisors at its meeting on March 29, 2012*
Attachment B

Letters of Support
19 March 2012

Janice Smith  
Wisconsin Department of Health Services  
Bureau of Aging and Disability Resources  
1 W. Wilson Street  
Madison, Wisconsin 53703  

RE: Letter of Support for Dane County Aging and Disability Resource Center (ADRC)

Dear Ms. Smith:

This letter is in support of a Dane County Aging and Disability Resource Center (ADRC). It is strongly supported by the Area Agency on Aging (AAA) Board. The ADRC will provide a one stop shop for senior adults in Dane County making it easier for them to secure the services that are provided by various public and private agencies. Additionally, the ADRC will be located with the AAA making the latter’s advocacy for seniors stronger and more efficient.

The expected growth in the senior adult population over the next few years calls for the County to give greater importance and visibility to services for seniors. The ADRC is one step in this direction. Our Legislative/Advocacy Committee also recommended organizing the ADRC as a separate division within the Department of Human Services; this was unanimously supported at the Board’s 7 December 2011 meeting. This recommendation was not accepted by DCDHS at this time.

The AAA Board is very supportive of a Dane County ADRC and looks forward to its proposed opening in October 2012.

Sincerely,

Ashok Bhargava, Ph.D.  
Chair  
Area Agency on Aging Board of Directors
March 27, 2012

Janice Smith
Wisconsin Department of Health Services
Bureau of Aging and Disability Resources
1 W. Wilson Street
Madison, WI 53703

Dear Ms. Smith:

The Dane County Long Term Support Committee has followed developments regarding Family Care and Aging and Disability Resource Centers for many years. While we continue to have concerns about the impact Family Care would have on Dane County taxpayers and current COP/CIP consumers, we wholeheartedly support establishing an ADRC in Dane County. We have received periodic ADRC updates since Dane County submitted its letter of intent in October, 2011, and received a full ADRC presentation at a joint meeting with the Health and Human Needs Committee and Area Agency on Aging Board on March 13, 2012. We are pleased with the collaborative approach on ADRC development which includes a WDHS staff person consulting with DCDHS staff on the application, having an active Stakeholder Advisory Committee, visiting other ADRCs and reviewing a previously submitted application. We are optimistic that the site selection process will result in a wonderful, welcoming facility. Dane County prides itself in building consumer oriented programs that embrace RESPECT values and believe the ADRC will continue that tradition. On March 26, 2012, the Long Term Support Committee unanimously passed a motion endorsing Dane County’s ADRC application, and we hope that WDHS will approve the application in a timely manner.

Sincerely,

[Signature]

Kathleen Nichols, Chair
Long Term Support Committee
DANE COUNTY DEPARTMENT OF HUMAN SERVICES
ADRC ORGANIZATIONAL CHART

ADRC DIRECTOR

ASSISTANT DIRECTOR

Supervisor

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

I & A Specialist

Supervisor

I & A Specialist

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Supervisor

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I & A Specialist

I & A Specialist

I & A Specialist

Elderly (2)
Disability (4)
Benefits Specialist

Receptionist

Clerical

Clerical

IT Specialist
Attachment D

No designation of confidential and proprietary information within this application
Attachment E

Transition Services
Flow Chart
ADRC TRANSITION COORDINATOR(S) and I&A SPECIALISTS will counsel young adults (17 ½ -21) on programs and resources - including Social Security, Guardianship, Post-Secondary Education, Housing, Transportation, and so on.

For those young adults (17 ½ -21) who are eligible for LTC waiver funding they will be informed of those services and requirements related to transition.
Attachment F

Customer Service

Flow Chart
Phone Call or Walk-In To ADRC

I & A Specialist Screening/Assessment

Information & Assistance

Referral

LTS Eligibility Determination

Gather/Review Documentation

Not Eligible

Complete LTC Functional Screen

DD/NPO

PD - CLA

Elders - SMO

MH/AODA - FCP

Warm Transfer

DD/PD Grads (see Transition Flowchart)

Consult with ADRC Liaison to determine if crisis criteria met

Options Counseling and Short Term Care Coordination are available to ADRC participants at any time

I&A Specialist ADRC Liaison work with Waitlist entity to develop plan

Quality Assurance Follow-Up Call
Attachment G

AGING AND DISABILITY RESOURCE CENTER MANAGER

DEFINITION

Under the supervision of the Adult Community Services Manager, this position is responsible for the Operation of the Aging and Disability Resource Center of Dane County (ADRC). The position is responsible for the development, administration and operations of all programs provided by or through the ADRC. These programs address needs of older adults and adults with disabilities and include, but are not limited to, information and assistance, benefit specialist services, long-term care options counseling, young adult transition services, and prevention and health promotion services.

EXAMPLE OF DUTIES

Directs the preparation of the annual budget; assures fiscal compliance with the approved budget; oversees the development of short and long-term ADRC goals and plans; develops and maintains systems for tracking program outcomes; assures county compliance with the contract with the Wisconsin Department of Health Services for ADRC services; assures the ADRC provides services in a manner consistent with its adopted mission; works with the ADRC Advisory Board, county policy makers and others to develop appropriate policies and procedures; prepares reports and makes presentations regarding ADRC services and operations; negotiates contracts with Purchase of Services agencies and assesses contract performance; prepares grant applications; supervises staff; conducts regular staff performance reviews; works cooperatively with community agencies and organizations to serve the needs of ADRC target populations; collects and disseminates information on service gaps and the needs of older adults and people with disabilities and shares that information with community leaders and policy makers; works collaboratively with the Area Agency on Aging of Dane County on programs and issues related to older adults; and develops and implements marketing and public education strategies regarding the ADRC.

EMPLOYMENT STANDARDS

Education and Experience: A combination of training and experience equivalent to a Bachelor’s degree in a human service field (post graduate degree preferred), and an understanding of the aging and disability service networks, service delivery methods, and best practices which is gained through at least three years of work experience in an aging and/or disability related professional position.

Knowledge, Skills and Abilities: A thorough and working knowledge of the rules and regulations pertaining to ADRC operations, of the needs of older adults and people with disabilities, and of the Dane County service provider networks for older adults and people with disabilities; ability to develop effective working relationships with individuals and with governmental, public and private agencies; knowledge and skills in budgeting and contracting; staff supervision skills; effective oral and written communication skills; ability to plan, set goals and work toward achieving those goals; and ability to analyze problems and create solutions.

SPECIAL REQUIREMENTS: Valid Wisconsin Driver’s license (or eligibility for) and access to personal transportation.