

March 6, 2017

**AGING AND DISABILITY RESOURCE CENTER OF
DOUGLAS COUNTY - ADVISORY COMMITTEE**
Wednesday, March 8, 2017, 4:15 p.m.
Public Health Conference Room, Government Center Suite 327
1316 North 14th Street, Superior, Wisconsin

Please call Erika Leif (715-395-7532) or the County Clerk's Office (715-395-1569) if you are unable to attend.

MEMBERS: Jan Stevens, Chair Diane Arnold, Vice Chair Rosemary Lear
 Kathy Lisdahl Carol Jones Doreen Peterson
 Jo Dunaiski

AMENDED A G E N D A

(Committee to maintain a two-hour meeting limit or take action to continue meeting beyond that time).

1. Roll call.
2. Approval of minutes from the September 21, 2016, meeting (attached).
3. Action items:
 - a. Officer election;
 - b. Review by-laws (attached);
 - c. Conflict of interest policy (attached); and
 - d. 2017 meeting dates and times.
4. Informational items:
 - a. Budget (to be distributed);
 - b. Health and Human Services Board report (attached);
 - c. Complaints/appeals policy and grievance form (attached); and
 - d. **ADRC integration (attached).**
5. Future agenda items.
6. Adjournment.

cc: Sue Sandvick Andy Lisak Shelley Nelson (Telegram) County Board Supervisors
 Pat Schanen Erika Leif Douglas County Website

NOTE: Attachments to agenda are available in County Clerk's Office for review or copying. Action may be taken on any item listed on the agenda. The County of Douglas complies with the Americans with Disabilities Act of 1990. If you are in need of any accommodation to participate in the public meeting process, please contact the Douglas County Clerk's Office at (715) 395-1341 by 4:00 p.m. on the day prior to the scheduled meeting. Douglas County will attempt to accommodate any request, depending on the amount of notice we received.

Posted: Courthouse, Government Center, Telegram copied.



3-6-17

Name

Date

**AGING AND DISABILITY RESOURCE CENTER OF
DOUGLAS COUNTY - ADVISORY COMMITTEE
Wednesday, September 21, 2016, 4:00 p.m.,
Public Health Conference Room, Government Center Suite 327
1316 North 14th Street, Superior, Wisconsin**

Meeting called to order by Chair Jan Stevens.

ROLL CALL: Present – Jan Stevens, Rosemary Lear, Jo Dunaiski, Carol Jones. Absent – Kathy Lisdahl, Doreen Peterson, Diane Arnold. Others present – Erika Leif, Kaci Lundgren, Committee Clerk.

APPROVAL OF MINUTES: Motion by Dunaiski, second Lear, to approve the minutes from the June 22, 2016, meeting. Motion carried.

ACTION ITEM: Meeting Dates/Times: Reviewed calendars.

ACTION: Motion by Lear, second Dunaiski, to hold meetings the second Wednesday, quarterly, at 4:00 p.m. Motion carried.

INFORMATIONAL ITEMS:

Budget: Projected to be under once all revenues are received. Clarification on department allocation line item requested; to verify with Finance Department.

Director's Report: Final edits of feasibility study for integration with aging unit (Senior Connections) being done. Contract compliance with state complete. Transportation Network Team reviewing need of rural transportation and the barriers that exist.

Marketing Plan: Additional Superior Telegram marketing to occur with a weekly ad in the local TV Guide. New billboard is located on Belknap Street, and outreach is continuing.

Membership Update: Leif to visit area organizations for recruitment ideas.

FUTURE AGENDA ITEMS: Membership update; budget; director's report; marketing plan; transportation team; dementia friendly initiative; officer election. Next meeting: December 14, 2016.

ADJOURNMENT: Motion by Lear, second Jones, to adjourn. Motion carried. Meeting adjourned at 4:34 p.m.

Submitted by,

Kaci Jo Lundgren,
Committee Clerk

**AGING AND DISABILITY RESOURCE CENTER OF DOUGLAS COUNTY
ADVISORY COMMITTEE BY-LAWS**

ARTICLE I – NAME

The name of the Advisory Committee shall be called the Aging and Disability Resource Center of Douglas County Advisory Committee. It will be referred to as the Advisory Committee henceforth in the document.

ARTICLE II – PURPOSE

The Advisory Committee shall be accountable for the oversight of the Aging and Disability Resource Center of Douglas County.

ARTICLE III – DUTIES AND POWERS

The powers and duties of the Advisory Committee shall be exercised and performed in conformity with the laws, ordinances and resolutions of Douglas County. Duties of the Advisory Committee shall include the following:

- Determine structure, policies and procedures of the ADRC within the State guidelines and local governance;
- Ensure that the ADRC has a viable plan for implementation and operation;
- Oversee the implementation and operation of the ADRC collaborative;
- Identify unmet needs and develop strategies to address them;
- Ensure input from consumers, services providers and local constituents in general in the policies, practice and goals of the ADRC
- Provide financial oversight for the ADRC budget, including reviewing the budget and expenditures; and
- Ensure that the terms of the State/County ADRC Contract are fulfilled;
- Represent the interest of all target groups served by the ADRC.
- Serve as grievance committee after other local steps to resolve concerns about the ADRC have proved unsuccessful.

ARTICLE IV – MEMBERSHIP

Section I – Memberships

The Aging and Disability Resource Center of Douglas County shall have oversight by the ADRC Advisory Committee

County Appointees:

There shall be a total of one to two (1-2) persons appointed and who will represent a non-client group.

Consumer Appointees:

Five to six (5-6) members will be consumers of services, family members or guardians of adults from one of the following target groups:

Four (4) members shall represent the older persons (age 60 and above)
One (1) member shall represent the adult person with physical disabilities
One to two (1-2) members shall represent the adult person with developmental disabilities

Composition of membership shall strive to represent the ethnic, economic, and geographic diversity of Douglas County. Membership should not exceed eight (8) persons.

Term:

Members of the Advisory Committee shall serve terms as follows:

Upon a vacancy, the Advisory Committee of the ADRC shall appoint a replacement to fill the remainder of the term. The ADRC Advisory Committee will use its application process to recruit a replacement to fill the term of the vacancy. The Committee will make a recommendation. The appointment will be finalized the Douglas County Administrator.

Section II – Absences

Any member that has more than 50% or more unexcused absences in a twelve (12) month period from regular Advisory Committee meetings, shall resign his/her position on the Advisory Committee. An unexcused absence means that the absentee did not notify the Chairperson of the appointed agent that he/she would be unable to attend the meeting.

ARTICLE V – OFFICERS

Section I Officers

The Officers shall consist of a Chairperson, Vice-Chairperson and Secretary.

Section II Appointment

The Officers shall be appointed each December by the Douglas County Administrator. Each Officer shall hold his/her office until his/her successor has been duly appointed.

Section III Term of Office

The Officers shall be appointed for a term of one (1) year. Officers shall assume duties at the next Advisory Committee meeting following their appointment at the December meeting.

Section IV Vacancies

A vacancy in any office because of death, resignation, removal, disqualifications or otherwise, may be filled for the existing portion of the term by appointment of the County Administrator. The Administrator's appointment shall maintain the membership balances as specified in Article IV, Section I, "Memberships."

Section V Chairperson

The Chairperson shall of the Advisory Committee and shall preside over all Advisory Committee business. The Chairperson shall appoint all subcommittees and perform such duties as may be incidental to the office or which shall be required of the Chair at meetings or by the Committee.

The Chair shall sign all resolutions and any other documents of any kind requiring a signature on behalf of the Committee prior to sending them to the Health & Human Services Advisory Board.

Section VI Vice-Chairperson

In the absence of the Chairperson, the Vice-Chairperson shall perform all duties of the Chairperson and when so acting, shall have all powers of and be subject to all the restrictions upon the Chairperson. The Vice-Chairperson shall perform other duties that may be assigned to him/her by the Chairperson of the Advisory Committee. If both Chairperson and Vice-Chairperson are absent, the Secretary will chair the meeting.

Section VII Training

All Advisory Committee members must receive an orientation and other appropriate education and training.

ARTICLE VI – MEETINGS

Section I Meeting Place

The meeting place of the Advisory Committee shall be in the County's Government Building.

Section II Annual Meeting

An annual meeting shall be held each year in December for the purpose of reconnecting officers and transacting other business as may come before the Advisory Committee.

Section III Regular Meetings

Regular meetings of the Advisory Committee shall be held quarterly, or as needed by the Advisory Committee on a date selected by the Advisory Committee or as directed by the Chair.

Section IV Quorum and Voting Rights

- A. A member shall abstain from voting on any issue directly affecting the interest of an organization or agency in which they would personally benefit.
- B. A majority of the Advisory Committee members appointed and serving shall be required to constitute a quorum for the transaction of business at any meeting of the Committee.

Section V Manner of Acting

The act of a majority of the Advisory Committee members present at a meeting at which a quorum is present shall be the act of the Advisory Committee unless the act of a greater number is required by law or by these By-Laws. The Committee shall not engage in proxy voting.

Section VI Payment of Per Diems to Governing Board Members

The payment of meeting stipends and travel expenses will be governed by the Douglas County Board policy. Payments for Advisory Committee related expenses will be paid out of the ADRC Budget.

Section VII Posting of Public Meetings

Public posting requirements will be met for Advisory Committee meetings.

ARTICLE VII – FISCAL YEAR

The fiscal year of the Advisory Committee shall begin on the first day of January and end on the last day of December.

ARTICLE VIII – MA FUNDING GENERATED

Money generated from MA reporting that is above the budgeted amount will follow written ADRC policy.

ARTICLE VIII – AMENDMENTS TO BY-LAWS

The Advisory Board, if at least a ten (10) day notice is given to each member, may recommend that these or new By-Laws be altered, amended, repealed or created, by a 2/3 majority vote at any meeting.



Conflict of Interest Policy

Purpose:

To ensure conflicts of interest are prevented, recognized, and promptly addressed so that the Aging and Disability Resource Center (ADRC) can provide customers with objective and unbiased information about a broad range of programs and services.

Objective:

This policy has been established to ensure that options counseling, enrollment and disenrollment counseling, advocacy, benefits counseling, dementia services, and information and assistance services performed by ADRC staff, are free from bias and conflict of interest. ADRC representatives, employees, volunteers and ADRC Governing Board members shall be sensitive to their own personal potential for conflicts of interest, vigilant about the existence of conflicts of interest elsewhere, and take steps to limit, mitigate, or eliminate conflicts of interest when they are known.

Policy:

Representatives of the ADRC will be mindful of the mission to represent the interests of the public as related to long-term care and therefore not represent the interest of any one group or agency. The function of the Aging and Disability Resource Center is to represent the interest of the customer at all times.

ADRC representatives will avoid potential conflicts of interest as described in this policy and procedure in order to provide impartial information and assistance, options counseling, enrollment and disenrollment counseling, benefits counseling, dementia services and advocacy. ADRC staff shall not counsel or otherwise attempt to influence customers for financial gain or other self-interests. ADRC staff shall not counsel or otherwise attempt to influence customers in the interest of any provider, Managed Care Organization (MCO), IRIS Consultant Agency (ICA) or any other organization.

Definitions

- **Conflict of Interest.** A situation, which interferes with an ADRC employee's ability to provide objective information or act in the best interest of the customer. Avoiding conflict of interest is important to the reputation of the ADRC and to the public's trust in the ADRC as a place where people can get unbiased, professional advice.
- **Aging and Disability Resource Center Representative.** Representatives include, but are not limited to, all limited-term or permanent employees of the ADRC (contracted or otherwise), volunteers, and ADRC Governing Board Members.
- **Potential Conflicts of Interest.** Conflicts of interest are not limited to financial relationships. Some examples of situations which have the potential to result in a conflict of interest:
 - An employee who provides ADRC services has familial ties to a community resource to which a customer could be referred.

- An employee who provides ADRC services has familial ties to the customer who has called or who is the subject of a call.
- An employee who provides ADRC services has a non-familial, yet close relationship to a customer who has called or who is the subject of a call.
- The agency and/or governing board that oversees ADRC services also provides or contracts for the provision of case management services to the Managed Care Organization(s).
- Department administrators, staff or governing board members who work closely with or are members of governing boards of community organizations to which a customer may be referred.
- The organization or governing board that oversees ADRC services also owns, operates or is employed by an agency or provider to which a customer may be referred.
- An ADRC employee who owns operates or is employed by an agency or provider for which a customer may be referred.
- An ADRC employee whose conviction to personal religious or other beliefs may lead to influencing the options presented to customers. Conflicts that result from shared staff positions (such as APS, DBS, EBS), joint supervision, co-location, and the financial interest of the larger organization in which the ADRC is located.

Responsibilities:

Recognizing that the existence of a perceived or potential conflict of interest does not mean that there is misconduct on the part of the ADRC representative. It is a situation that could lead a representative to put other interests ahead of those of the customer. Mitigation measures are needed to ensure that perceived or potential conflicts of interest do not turn into actual conflicts of interest or misconduct.

Management/Director Responsibilities. The ADRC Director or designee shall be aware of, determine whether to address, and when required, assist the ADRC representative in terminating or minimizing a conflict of interest.

ADRC Representative Responsibilities. The ADRC Representative shall be aware of, exercise sound judgment, provide full disclosure, and report instances of potential or present personal conflicts of interest. In addition, ADRC representatives are prohibited from accepting gifts, loans or favors from individuals or providers who stand to benefit from referrals made by the ADRC or benefits from the ADRC in any other way. Further, ADRC Representatives cannot have a financial relationship with any MCO or ICA. This would include participating with the MCO or ICA as a contracted provider, volunteer, or board member.

Procedure:

- **Training.** All ADRC representatives will receive training on the ADRC's Conflict of Interest Policy prior to having contact with customers. ADRC Governing Board members will receive training before serving on the ADRC Governing Board. This policy will be reviewed with ADRC representatives annually.
- **Assurances.** Each ADRC representative will acknowledge, by signature, the receipt of training and the obligation to be objective, customer-centered and independent of the MCO, ICA or other providers or services to which customers could be referred.
- **Reporting.** ADRC representatives shall identify and report potential or present conflict(s) of interest to the ADRC Director (or designee) upon hire or whenever a

conflict is identified. All potential conflict(s) of interest are treated as if a conflict exists until a determination is made and the potential conflict has been resolved.

- **Response.** The ADRC Director (or designee) will receive reports of possible conflicts of interest from ADRC representatives, employees, volunteers and ADRC Board Members. The ADRC Director (or designee) will then make a determination as to whether the situation is in fact a conflict of interest.
- **Resolution.** The ADRC Director (or designee) and the ADRC representative involved shall take immediate steps to terminate or minimize the conflict of interest. This may involve finding an alternate ADRC representative, source of service, or the termination of the relationship that has resulted in a conflict of interest.
- **Advocacy.** The ADRC representative must assure that customers receive appropriate advocacy, representation and information, especially in regard to a customer's choice of or eligibility for program benefits or services.



Conflict of Interest Policy Assurance

As a representative of the Aging and Disability Resource Center of _____, I have reviewed and received training on the ADRC's Conflict of Interest Policy. If I do not fully understand this policy or how it is relevant to my employment or association with the ADRC, I will not sign this statement until I have spoken with the ADRC Director, and I understand this policy.

I acknowledge that I will be required to review the Conflict of Interest Policy on an annual basis including the circumstances that may be potential conflicts of interest and the procedures for disclosing and mitigating potential conflicts of interest.

As a representative of the ADRC, I acknowledge, by signature, that I have reviewed the Conflict of Interest Policy, received training on the Policy, and agree to comply with its provisions. I acknowledge the obligation of ADRC staff to be objective, customer-centered and independent of MCOs, ICAs and other providers or services to which customers could be referred.

Printed name and title:

Date reviewed policy:

Signature:

Date signed:

Signature:

Date signed:

Aging and Disability Resource Center of Douglas County
2017 Unmet Needs

	January	February	March	April	May	June	July	August	September	October	November	December
Funding (Long Term Care Services)	0	0										
Accessible Housing	0	0										
Assisted Living	0	0										
Dental	0	0										
Employment	0	0										
Home Care	0	0										
Home Care (non-medical)	0	0										
Housing	0	0										
Medication Management	0	0										
Mental Health Services	0	0										
Prescription Drug Assistance	0	0										
Rent/Mortgage Assistance	0	0										
Transportation	0	0										
Utility Assistance	0	0										
Other	0	0										

Unmet needs are defined as lack of or inadequate ability of the services and/or supports necessary for older people with disabilities. These are unmet needs for the community, not the customer. The presence of an unmet need may suggest a need for additional service providers or for the community to be more knowledgeable about available public policy to support increase access to services.

ADRC Report 2017

Date: February

Submitted by: Erika Leif, Director

Years 2016/2017	Dec 15/16	Jan 16/17	Feb 16/17	Mar 16/17	Apr 16/17	May 16/17	June 16/17	July 16/17	Aug 16/17	Sep 16/17	Oct 16/17	Nov 16/17	Dec 16/17
Referrals by Type													
Long Term Care Functional Screen	11/12	23/17	17/14	20/	13/	6/	8/	9/	18/	14/	14/	13/	12 /
MDSQ Referrals	3 /3	1/9	2/5	5/	4/	3/	4/	4/	1/	3/	5/	3/	3/
Number of Clients Served	Dec 15/16	Jan 16/17	Feb 16/17	Mar 16/17	Apr 16/17	May 16/17	June 16/17	July 16/17	Aug 16/17	Sep 16/17	Oct 16/17	Nov 16/17	Dec 16/17
Elderly Benefit Specialist (EBS)	x/35	70/x	40/x	48/	73/	50/	50/	40/	40/	40/	58 /	80/	35/
Disability Benefit Specialist (new cases opened)	4/9	1/4	9/5	3/	12/	3/	1/	7/	8/	9/	1/	3/	9 /
Total Number of ADRC Contacts*	331/ 290	380/ 343	343/ 298	362/	351/	309/	342/	232/	321/	263/	337/	243/	290/
Memory Screens	0/9	0/2	0/0	0/	2/	1/	0/	1/	0/	0/	0/	21/	9 /
Number Served in Long Term Care Programs	Dec 15/16	Jan 16/17	Feb 16/17	Mar 16/17	Apr 16/17	May 16/17	June 16/17	July 16/17	Aug 16/17	Sep 16/17	Oct 16/17	Nov 16/17	Dec 16/17
Family Care Enrollments	5/6	8/13	8/8	5/	12/	9/	6/	6/	8/	0/	8/	8/	6/
Family Care Disenrollments	5/7	10/3	2/7	7/	5/	8/	7/	1/	15/	5/	2/	6/	7/
IRIS Referrals	x/1	x/1	x/0	x/	x/	x/	x/	x/	x/	x/	x/	x/	1 /
IRIS Enrollments	x/x	2/2	1/3	3/	1/	2/	0/	0/	1/	1/	0/	0/	x /
IRIS Disenrollments	2/1	1/	1/	3/	1/	2/	0/	0/	1/	1/	1/	2/	1/
Nursing Home Relocations	0 /1	0 /	1 /	0 /	0 /	0 /	0 /	0 /	0/	0/	0/	0 /	0/
ADRC Formal Complaints	0/0	0/0	0/0	0/	0/	0/	0/	0/	0/	0/	0/	0/	0/

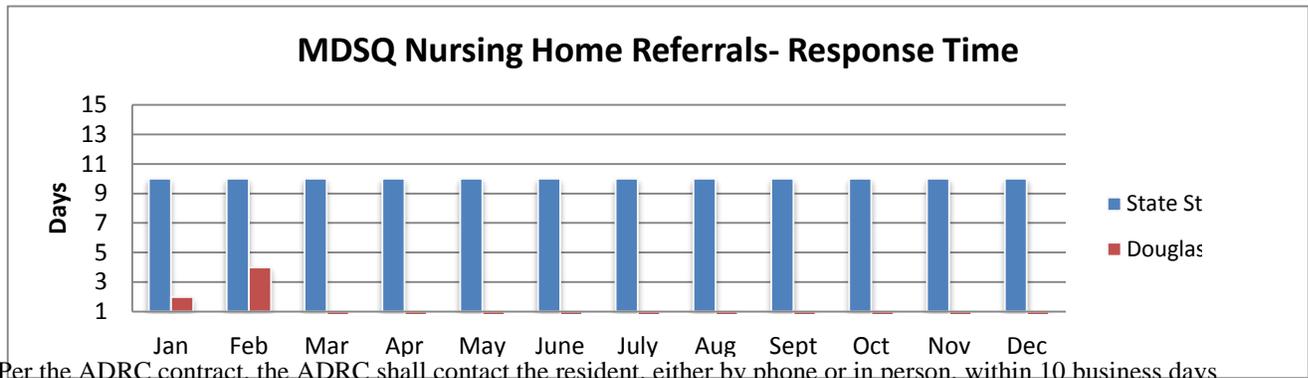
*ADRC workers are required to record all **Contacts**. A contact represents an individual one-to-one interaction (conversation) that has occurred either in person, at a home visit, ADRC walk-in, telephone, email, or written correspondence where information is exchanged. Each interaction is counted as an encounter and will demonstrate one instance of providing any ADRC activity. A Contact records the **ADRC Outcomes**. An **Outcome** is categorized into the following and must be recorded as such for reimbursement purposes: 1) Provided Information and Assistance 2) Provided Follow Up 3) Provided Options Counseling 4) Administered Long Term Care Functional Screen 5) Provided Assistance with Medicaid Application Process 6) Provided Short Term Service Coordination 7) Provided Enrollment Counseling 8) Provided Disenrollment Counseling 9) Memory Screen 10) Behavioral Mental Health Screens 11) Complaints/Advocacy 12) Community Partners 13) Referral for ADRC

Disability Benefit Specialist (DBS) Monetary Impact

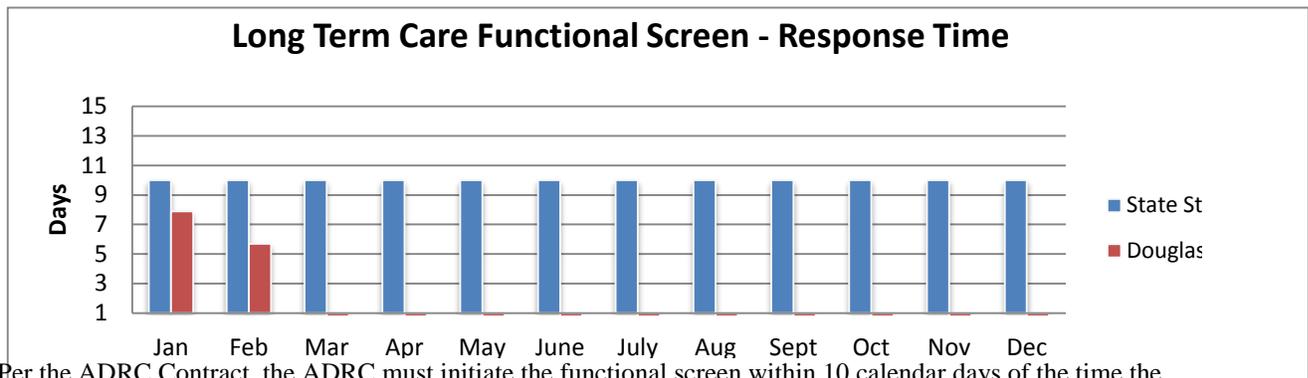
- As of February 27, 2017 –ongoing cases 43
- Monetary Impact of Cases Closed:
 - January 2017 \$0 (0 cases closed)
 - February 2017 \$25,322 (4 cases closed)

Alzheimer’s Family and Caregiver Support Program (AFCSP)

AFCSP	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Total Cases Served	15	9	12	9	7	7	10	8	8	0
Current Cases as of 2/27/17										0



Per the ADRC contract, the ADRC shall contact the resident, either by phone or in person, within 10 business days of receiving a referral.



Per the ADRC Contract, the ADRC must initiate the functional screen within 10 calendar days of the time the person requests or accepts the offer of a screen.

Health and Human Services
ADRC
February 2017

Activity	Program/ Service	Brief Description	Contact Person	Attachment
Health Fairs/Community Events/Speaking Engagements	ADRC	<ul style="list-style-type: none"> • Adult Leadership Presentation 1/10/17 – ADRC services (25 individuals) • Youth Leadership Presentation 1/18/17- ADRC services (55 individuals) 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No
Outreach/Marketing	ADRC	<ul style="list-style-type: none"> • ADRC billboard on Belknap St. and East 2nd Street • ADRC Ad in the Senior Reporter Magazine (February/March) • ADRC Ad in Senior Connections Newsletter (January/February) • ADRC Weekly Ad in Tuesday Superior Telegram (September 2016-September 2017) • ADRC Weekly Ad in Superior Telegram TV Guide (September 2016-September 2017) • WDIO TV Commercials (December 2016-December 2017) 849 spots • ADRC Caregiver Ad in Superior Telegram (February 28th) 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No
Initiatives	ADRC	<ul style="list-style-type: none"> • Caregiver Coalition – Caregiver conference planning for conference at WITC on 5/22/17. • Caregiver Coalition- Dementia friendly 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No

Health and Human Services
ADRC
February 2017

		<p>business training available for full community in spring 2017. Community research and being worked on with UWS Service Learning Students.</p> <ul style="list-style-type: none"> • Douglas County Transportation Network Team- reviewing transportation coordination plan and goals for Douglas County • Douglas County Community on Transition (CCOT) – focus on youth with disabilities transitioning to adult. Working on a roadmap for families to use as a guide for accessing services. 		
Legislative	Children’s Long Term Support Waiver	<ul style="list-style-type: none"> • 2017-2019 Biennial budget proposes funding in the amount of \$39.2 million in funding to assist in eliminating the Children’s Long Term Support Waitlist. 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No
ADRC Advisory Committee		<ul style="list-style-type: none"> • ADRC Advisory Committee Meeting 3/8/2017 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No
Children’s Community Options Program		<ul style="list-style-type: none"> • Advisory Board Meeting 3/8/2017 • Family Satisfaction Survey Sent 2/2017 	Erika Leif 715-395-7532 Erika.leif@douglascountywi.org	No



Complaint and Appeal Policy

Purpose:

To ensure the Aging and Disability Resource Center (ADRC) maintains and implements due process policies and procedures to review and resolve complaints and inform people of their appeal rights.

Objective:

This policy describes the customer's right to file a complaint, and the process for resolving customer's complaints and appeals related to the work of the Aging and Disability Resource Center. The goal of the complaint and appeal procedure is to allow customers of the ADRC to exercise their due process rights with a simple and easily understood process.

The ADRC will cooperate with any review of appeals and complaints conducted by the Wisconsin Department of Health Services or external quality review agency.

Definitions:

- 1. Complaint:** A grievance, difficulty, disagreement or dispute. An expression of dissatisfaction about a situation that the person making the complaint wants to see rectified.
- 2. Grievance:** A complaint.
- 3. Appeal:** An official written request to change the outcome of a determination related to eligibility for public benefits or the reduction, elimination or denial of services provided as part of a public benefit.
- 4. Complainant:** An ADRC customer, or person acting on the customer's behalf, expressing or filing a complaint.
- 5. Petitioner:** An ADRC customer, or person authorized to act on the customer's behalf, filing an appeal or fair hearing request.

Procedures:

Procedure for Informing and Assisting Customers in Exercising Their Rights. Any ADRC customer, or person acting on a customer's behalf, may express or file a complaint. All ADRC staff will refrain from any reprisal or threat of reprisal against any individual registering a complaint.

All customers of the ADRC will be given the complaint and appeal brochure with information on their rights, the complaint procedure, and contact information for external advocacy agencies when:

- Staff have reason to believe the person is dissatisfied with service they have received;
- An individual has been found to be at a Non-Nursing Home or Functionally Ineligible level of care on the Long Term Care Functional Screen (LTCFS);

- The person requests the information on how to file a complaint.

Staff will explain the process and provide assistance as necessary in submitting a formal complaint or appeal.

In addition to the internal ADRC complaint process, customers utilizing the ADRC will be informed they are entitled to access an external review process through either the Wisconsin Department of Health Services (DHS) or the State Fair Hearings process or both. Customers may use any or all complaint and appeal processes outlined in this policy and in any order. If a customer does not specify if their grievance is formal or informal the ADRC will consider it to be an informal complaint.

Informal Internal Complaint Process and Procedure. A customer may make an informal complaint verbally or in writing. Informal complaints may also be identified through suggestion boxes, surveys, phone calls, e-mail, etc. Any ADRC customer, or person acting on a customer's behalf, may use the informal complaint procedure. An informal complaint does not limit a customer from pursuing other complaint procedures, including legal actions.

ADRC staff who receive a complaint should encourage customers to discuss their concerns or complaints with the staff most directly involved. Customers can request that the person's supervisor be involved in this informal resolution process. Whenever possible, the ADRC will attempt to resolve any complaint at the time it is presented. The informal internal complaint process must be completed within ten business days of the date the complaint is received. Documentation of the complaint, steps taken toward resolution, and conclusions of the internal review should be completed and documented by staff in the ADRC. If the customer is not satisfied with the proposed solutions to his/her issue, the customer should be informed verbally and in writing of the formal complaint process. Assistance should be given to customers in understanding the process and in the completion of the formal complaint. Customers are not required to go through the informal process before utilizing the formal process described below. Customers have 10 days from the completion of the informal complaint process to appeal the decision and request a formal internal review.

Formal Internal Complaint Process and Procedure. Formal complaints have an expectation that management will investigate and provide a written summary of findings, propose a resolution, and take action. It is preferred that the customer, or person acting on the customer's behalf, use the attached form to make a formal complaint. Utilizing the form helps to ensure that full information is provided and makes it easier for the ADRC to resolve the customer's concerns. However, customers can also use their own format for writing their complaint or can express their concerns verbally to the ADRC Director/Manager. The form/complaint may be returned by email, mail, or delivered to the ADRC office. Customers should make their formal complaint, either verbally or in writing, to the ADRC Director/Manager within 45 days of the occurrence of the event. An extension to the 45-day time limit will be granted by the ADRC Director/Manager for a good cause, e.g. the person was not given written notification to respond within 45 days, the person was on vacation or otherwise unable to receive his/her mail/email.

The ADRC has 10 business days from the day it receives the complaint to respond.

The ADRC Director/Manager will arrange to meet with the customer, and if different, the complainant and any staff person named in the complaint. When a complaint is related to Elder Benefit Services (EBS), the ADRC Director/Manager will share a copy of the complaint with the Benefit Specialist Supervising Attorney who is responsible for the EBS' individual case handling. The ADRC Director/Manager:

1. Will identify and clarify the matter or issues and explain the process for resolving the complaint.
2. Offer the complainant assistance in putting the complaint in writing if this has not already occurred.
3. Provide a copy of the complaint to the complainant.
4. Schedule a meeting at a mutually agreed to time.
5. Attempt to resolve the complaint at the scheduled meeting.
6. If resolution in this initial meeting is not possible, conduct an inquiry into the incident or conditions that led to the complaint. This inquiry is to gather additional information with the intent of resolving the complaint.

If further inquiry/investigation is necessary, the ADRC Director/Manager's response may include interviews with relevant persons, a record review, or other efforts that are necessary to form an accurate and factual basis for the resolution of the complaint. The director will prepare a written report that summarizes the complaint, and a finding of the complaint as either founded (a violation has occurred) or unfounded (the complaint is without merit). Specifically, the written report will include:

1. A decision of either founded or unfounded.
2. The name of the contact person for the complaint;
3. The date the decision was reached;
4. A summary of the steps taken on behalf of the customer to resolve the issues;
5. Information on how the customer files for an external review by the Department or how the customer appeals the decision through the Fair Hearing process, if he/she disagrees with the decision;
6. If the complaint is founded, specific recommendations for resolving the issue. Where appropriate, the recommendations will include a time line for carrying out the changes;
7. If the complaint is unfounded, and the director/manager has identified issues that appear to affect the quality of ADRC services, suggestions for improvement;

The ADRC Director/Manager will complete his/her inquiry and the report within 15 days from the date the formal complaint was first presented. Copies of the report will be sent to the customer and complainant if different than that customer. If the ADRC Director/Manager, the customer and the complainant, agree to the facts, conclusions and recommendations of the report, the complaint is considered to be resolved. If the complainant disagrees with the facts, conclusions or recommendations, the supervisor may attempt to seek an agreeable resolution. If this is not possible, the complainant will be

informed about the Formal *External Review* Process.

External Review Process and Procedure. An External Review is a complaint made to the Wisconsin Department of Health Services with the expectation that the appropriate agency will complete a timely review, investigation and analysis of the facts in an attempt to resolve concerns and problems expressed by a complainant. The ADRC will inform customers of the external complaint resolution review process through the Wisconsin Department of Health Services at any time upon request of the customer or after the internal complaint resolution process is concluded but not resolved.

1. Complaints related to services provided by an ADRC should be made directly to the Wisconsin Department of Health Services by writing, calling, or e-mailing:

Aging and Disability Resource Center Complaints
Office for Resource Center Development
Division of Public Health
Wisconsin Department of Health Services
P.O. Box 7851
Madison WI 53707-785 1

Phone: 608.266.2536

Fax 608.267.3203

[E-mail: DHSRCteam@wisconsin.gov](mailto:DHSRCteam@wisconsin.gov) (Please indicate “ADRC of _____ Complaint” in the subject line)

2. Grievances Relating to Services provided by a Managed Care Organization or an IRIS Consultant Agency should be directed to MetaStar. MetaStar is authorized by the Department of Health Services (DHS) to review all appeals and grievances that are submitted to DHS by or on behalf of members or participants enrolled in the following programs:

- Family Care
- Family Care Partnership
- Program of All-Inclusive Care for the Elderly (PACE)
- Include, Respect, I Self-Direct (IRIS)

Acting on behalf of DHS, MetaStar reviews members’ or participants’ appeals and grievances related to each program’s covered benefits as well as appeals concerning eligibility and enrollment matters.

The ADRC will, upon request provide assistance to IRIS participants or MCO members residing in the ADRC service area in filing complaints for external review. Information on filing a complaint with MetaStar can be found at:

<http://www.metastar.com/services/external-quality-review/appeals-and-grievances/>

Appeal Process and Procedure. An appeal is an official request to change the outcome of a determination related to eligibility for public benefits or the reduction, elimination

or denial of long-term care services covered under Wisconsin Medicaid, Family Care, Partnership or IRIS. A Fair Hearing occurs before an impartial administrative law judge in which the petitioner or the petitioner's representative presents the reasons why an action or inaction by the Department, a county agency, an ADRC or an ICA or MCO in the petitioner's case should be corrected.

If a person is determined functionally ineligible for Medicaid long term care services, the ADRC staff will send the Notice of Denial of Functional Eligibility with appeal rights to the customer. If a person meets a non-nursing home level of care, the ADRC staff will send the Notice of Non-Nursing Home Level of Functional Eligibility with appeal rights to the customer. A customer may directly appeal to the Office of Hearings and Appeals within 45 calendar days after receipt of notice of a decision/adverse action or failure to act regarding the following types of appeals:

- Appeals regarding functional ineligibility determinations including a determination of a non-nursing home level of care.
- Appeals regarding financial ineligibility determinations for long term care benefits.

These requests for a Fair Hearing must be filed in writing, using one of the forms listed below, with the Division of Hearings and Appeals in the Department of Administration:

Request for Fair Hearing
c/o DOA Division of Hearings and Appeals P.O. Box 7875
Madison WI 53707.7875
Phone: 608.266.3096
608.264.9853 (TTY)
Fax 608.264.9885

Forms:

Request for a State Fair Hearing Aging and Disability Resource Center (ADRC)
<http://www.dhs.wisconsin.gov/forms/F0/f00236a.doc>

Request for a State Fair Hearing
<http://www.dhs.wisconsin.gov/forms/F0/f00236.doc>

Training. The ADRC will train staff to support customers in this process and be empathic, supportive, and professional. All staff will encourage customers to express their concerns as a way to address ongoing quality improvement within the ADRC. The ADRC will train staff on steps necessary to investigate complaints. ADRC staff will be familiar with all advocacy organizations available to members and when customers should be referred. Staff will be familiar with policies and procedures for filing a complaint to fully and adequately assist customers with their complaints. The ADRC will train staff on the Fair Hearing process.

Continuous Quality Improvement. All complaints related to the work of the ADRC will be tracked in such a way to allow systematic review of complaints. Data will be analyzed for trends and used to devise methods to improve customer service. Complaint data will be shared with staff. Board members will be included in the summary review of complaints to help them identify unmet needs within the service

area of the ADRC and to assist in identifying areas in need of quality improvement. Annually, complaint information will be shared with ORCD to identify statewide issues and quality improvement opportunities.

COMPLAINT FORM

(Page 1)

To help us ensure that we understand your complaint and can respond promptly, please complete this form and return to:

[INSERT LOCAL ADRC OF _____ CONTACT INFORMATION]

YOUR NAME:

NAME OF CUSTOMER:

(if you are filing a complaint on behalf of another individual)

YOUR ADDRESS:

Street address, apartment number (if any)

City, State, Zip Code

YOUR PHONE NUMBER:

PLEASE DESCRIBE YOUR COMPLAINT:

Please be as specific as you can. Include any names or dates as this may help resolve your complaint. You can use the back of this form or attach additional information to describe your complaint. You can also ask the ADRC for help in completing this form.

Aging and Disability Resource Center of Douglas County

**COMPLAINT FORM
(Page 1)**

To help us ensure that we understand your complaint and can respond promptly, please complete this form and return to:

**Aging & Disability Resource Center of Douglas County
1316 North 14th Street, Suite 327
Superior, WI 54880**

YOUR NAME: _____

NAME OF CUSTOMER: _____
(if you are filing a complaint on behalf of another individual)

YOUR ADDRESS: _____
Street address, apartment number (if any)

City, State, Zip Code

YOUR PHONE NUMBER: _____

PLEASE DESCRIBE YOUR COMPLAINT:

Please be as specific as you can. Include any names or dates as this may help resolve your complaint. You can use the back of this form or attach additional information to describe your complaint. You can also ask the ADRC for help in completing this form by calling 715-395-1234.

Scott Walker
Governor

Linda Seemeyer
Secretary



State of Wisconsin
Department of Health Services

DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
P O BOX 2659
MADISON WI 53701-2659

Telephone: 608-266-1251
FAX: 608-267-2832
TTY: 888-241-9432
dhs.wisconsin.gov

December 13, 2016

Ms. Dianne Jacobson, President
Aging and Disability Professionals Association of Wisconsin
100 W Keenan Street
Rhineland, WI 54501

Dear Ms. Jacobson:

I want to thank you and your members for rising to the challenge of developing recommendations for an integrated Aging and Disability Resource Center (ADRC) and Aging Unit model in Wisconsin. I commend the committee for the collaborative process that was used and for achieving consensus among a diversified set of committee members.

The Department of Health Services, Bureau of Aging and Disability Resources (BADR) serves as the State Unit on Aging. The State Unit on Aging is responsible, under s. 46.80(1)(a), "to make recommendations to appropriate agencies regarding the expansion, coordination, consolidation and reorganization of particular activities as a means of developing a more effective and efficient total program for the aging." Based on broad input, including input from your Association, it is our recommendation that agencies consider the integration of the local Aging Unit and Aging and Disability Resource Center to achieve a more effective and efficient program for older adults across Wisconsin.

From the Department's perspective, having responsibility both for Older Americans Act programs and ADRCs, there are strengths and efficiencies that come from the locally integrated program model. A "one-stop" source for information and assistance, benefits advice, and community programs that enhance social and health conditions is less confusing and more easily accessed by older people. An agency that incorporates both the aging unit and ADRC builds on common concerns about the service needs of adults of any age with disabilities and can allow both organizations to meet obligations more effectively and efficiently.

As your report points out, there isn't one clear model of integration for all counties. For this reason and because all counties are unique in structure, the Department will continue to encourage but not mandate integration. We will do this by providing technical and professional support. While resources allow, we will also provide financial support to assist with the costs of planning and transition.

Your report provides a helpful perspective for local agencies that are considering integration. As your report describes, Aging Units and ADRCs are more similar than they are different and integration brings the best of both together. We appreciate that the needs of the customer are foremost in your recommendations and that you provide an ideal set of concepts in addition to what you define as the minimum. There are many agencies that will find those useful as they strive to build a high quality program.

Your report also provides recommendations for BADR to consider. I want to respond to those recommendations and let you know the actions BADR has taken or intends to take in 2017.

1. BADR continues to find ways to streamline how local agencies work with both the Office on Aging (OoA) and Office for Resource Center Development (ORCD).
2. We have developed a team that is available for technical assistance and on-site support to any area that is considering integration. Members are from the OoA, ORCD, and the Greater Wisconsin Agency on Aging Resources (GWAAR).
3. We are considering ways to integrate the Aging Plan, ADRC contract, IT systems, Director meetings, conferences, reports, Bureau and program materials, trainings and technical assistance.
4. An integrated conference- The Aging and Disability Network Conference- will be held on September 6-8, 2017.
5. In 2017, BADR will make available funding to support agencies with one-time costs associated with integration.
6. In addition, as you recommended, BADR intends to provide organizational model examples and has also developed a self-assessment that local agencies can use to build an integrated agency. This tool incorporates the recommendations from the ADPAW committee.

We too appreciate the partnership we have with your Association and want to thank you again for your assistance in moving us forward towards a more full and coordinated system for older adults in the State.

Sincerely,



Carrie Molke, Director
Bureau of Aging and Disability Resources

Cc: Charles Warzecha, DPH Deputy Administrator
Cindy Ofstead, OoA Director
Anne Olson, ORCD Director
Bob Kellerman, GWAAR