

March 2, 2023

**AGING AND DISABILITY RESOURCE CENTER OF
DOUGLAS COUNTY - ADVISORY COMMITTEE**
Wednesday, March 8, 2023, 4:15 p.m.
Government Center, Boardroom 201
1316 North 14th Street, Superior, Wisconsin
OR JOIN BY
PHONE: (US) +1 662-532-9004 PIN: 597 546 497#
OR VIDEO: <https://meet.google.com/jzm-imaf-svy>*

**Due to COVID-19 concerns, the public may attend the meeting remotely.*

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

MEMBERS: Shawna Anderson, Chair Carol Jones, Vice Chair
Rosemary Lear Tom Karas

A G E N D A

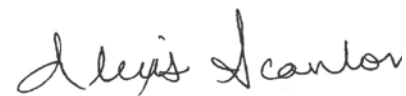
(Committee to maintain a two-hour meeting limit *or* take action to continue meeting beyond that time).

1. Roll call.
2. Approval of minutes from the September 14, 2022, meeting (attached).
3. Action item: Officer election.
4. Informational items:
 - a. Program update (attached);
 - b. Conflict of Interest policy (attached – requires signatures);
 - c. 2023 Scope of Services; and
 - d. Budget (to be distributed).
5. Future agenda items.
6. Adjournment.

cc: Kaci Lundgren Ann Doucette Shelley Nelson (Telegram) County Board Supervisors
Anna Carlson Erika Johnson 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, Superior Telegram, Superior Public Library

 3-2-23

Name Date

**AGING AND DISABILITY RESOURCE CENTER OF DOUGLAS COUNTY
ADVISORY COMMITTEE**

Wednesday, September 14, 2022, 4:15 p.m.

Government Center, Boardroom 201

1316 North 14th Street, Superior, Wisconsin

Meeting called to order by Chair Shawna Anderson.

ROLL CALL: Present – Shawna Anderson, Carol Jones, Rosemary Lear, Char Kastern, Tom Karas.
Others Present – Erika Johnson, Lexi Johnson, Julie Hudecheck, Kendra Schmidt, Committee Clerk.

APPROVAL OF MINUTES: Motion by Lear, second Jones, to approve minutes from the June 8, 2022, meeting. Motion carried.

Introductions - Char Kastern: New board member.

Introductions – Staff: Lexi Johnson – Information and Assistance Specialist and Julie Hudecheck – Information and Assistance Specialist.

Program Update: E. Johnson; included with agenda.

Budget: Budget was not provided from Finance Department, HHS Board did approve and refer budget to Administration and County Board during their board meeting. Year-to-date and 2023 projected budget will be reviewed at future meeting.

FUTURE AGENDA ITEMS: 2023 scope of service, 2023 officer election, policy updates, membership.

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

Submitted by,

Kendra Schmidt
Committee Clerk

ADRC Report 2023

Date: March 2023

Submitted by: Erika Johnson, ADRC Director

Years 2022-2023	Jan 22/23	Feb 22/23	Mar 22/23	Apr 22/23	May 22/23	June 22/23	July 22/23	Aug 22/23	Sep 22/23	Oct 22/23	Nov 22/23	Dec 22/23
Referrals by Type												
Long Term Care Functional Screen	21/13	9	14	17	10	16	17	22	8	10	15	15
Number of Clients Served	Jan 22/23	Feb 22/23	Mar 22/23	Apr 22/23	May 22/23	June 22/23	July 22/23	Aug 22/23	Sep 22/23	Oct 22/23	Nov 22/23	Dec 22/23
Elderly Benefit Specialist (EBS) (new cases) Total Cases Open	32/53 3	19	17	28	20	28	36	52	57	71	57	54
Disability Benefit Specialist (new cases) Total Cases Open	7/8 37/36	3 39	3 37	2 38	4 33	5 39	6 39	2 39	5 42	2 42	1 40	3 39
Total Number of ADRC Contacts*	452/ 485	411	476	396	422	423	400	469	497	465	440	404
Memory Screens	2/1	1	0	0	7	1	0	0	0	1	1	2
Number Served in Long Term Care Programs	Jan 22/23	Feb 22/23	Mar 22/23	Apr 22/23	May 22/23	June 22/23	July 22/23	Aug 22/23	Sep 22/23	Oct 22/23	Nov 22/23	Dec 22/23
Family Care Enrollments	9/10	8	7	5	5	7	9	6	4	8	6	6
Family Care Disenrollments	2/4	0	1	1	1	3	2	1	2	1	0	0
IRIS Enrollments	0/1	0	1	2	0	3	2	1	0	4	3	0
IRIS Disenrollments	0/3	0	0	0	0	1	2	0	0	1	1	2
Nursing Home Relocations	0/0	0	0	1	1	0	0	1	0	0	0	x
ADRC Formal Complaints	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

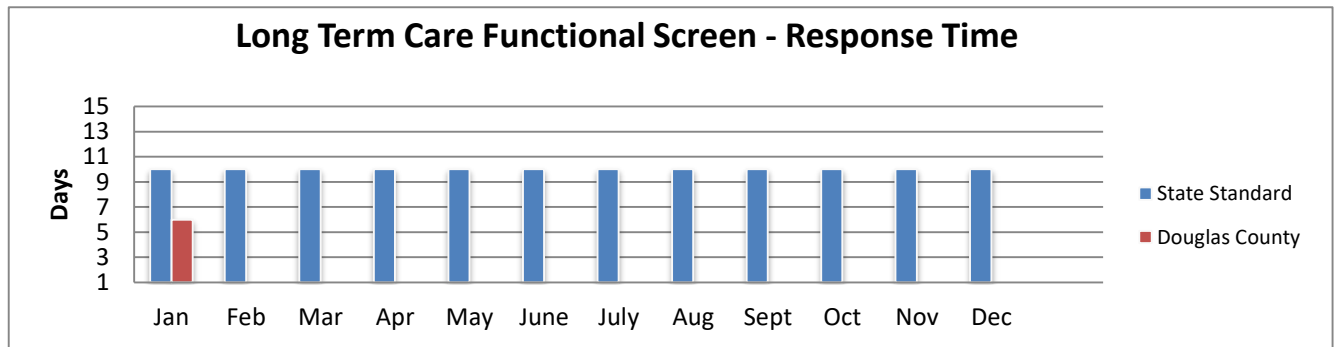
Disability Benefit Specialist (DBS) Monetary Impact

- Monetary Impact of Cases Closed:
 - January 2023 - \$147,005 (12 cases closed)

Alzheimer’s Family and Caregiver Support Program (AFCSP)

AFCSP	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Total Cases Served	10	8	8	6	8	7	14	13	9	4

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.

Children’s Long Term Support Program (CLTS)

Date	2021 Referrals	2022 Referrals	2023 Referrals	Total Enrolled to-date
12/31/22	54	62	12	135

ADRC EXPRESS



November 2022



November is National Family Caregiver Month!



This is a time to recognize and thank the many hard working and devoted people who provide care to a loved one.

We all know a caregiver – the gentleman who patiently walks with his wife whose mobility is failing; the woman who gently nudges her forgetful husband to follow her back to the car after purchasing groceries; the woman who brings her aging mother to her doctor appointments; the man who brings his kids along to do some repairs on his parent's house. They are everywhere – family, friends and neighbors who help their loved ones with the daily tasks of life, allowing them to maintain their independence, dignity and quality of life. The role of the unpaid caregiver is invaluable and yet they often don't recognize their own worth.

Let's Celebrate Caregivers this month! Here are some simple things you can do to really help a caregiver and let them know that they are important and appreciated.

1. Stop by their house and say hello. You don't have to bring anything or do anything. Stopping for a quick visit to let them know you are thinking about them can mean a lot, especially if it is hard for them to get out of the house.
2. Offer to help. Instead of telling them to call if they need something, be more persistent in offering your help. Try this. "I am going to help you. Do you want me to bring a meal or a mop?" Or ask what they need from the grocery store or when is a good time to send your teenage son over to mow/rake/shovel snow. Be specific and gently insist on helping.
3. Invite them to do something – go for a walk, coffee, a movie. Maybe they have turned you down too many times, so you stopped asking. Try asking again and offer to help find someone to be with their loved one if that is a problem. Even if they say no, being asked will help them see they are still included.

4. Invite them to do something – go for a walk, coffee, a movie. Maybe they have turned you down too many times, so you stopped asking. Try asking again and offer to help find someone to be with their loved one if that is a problem. Even if they say no, being asked will help them see they are still included.
5. Remind them of the importance of self-care, then help them seek out ways to get a break. Go with them to visit the ADRC of Douglas County to find out the various types of support that are available.
6. Attend a support group meeting with them. Sometimes it is hard to go alone, and your presence will open up this valuable resource to them. Senior Connections and the ADRC host a Caregiver Support Group once a month. Call us for more information.
7. Check in regularly. A weekly phone call to ask how things are going can alleviate feelings of loneliness and help them feel special and important. Sometimes they just need someone to listen to them, and sometimes hearing about someone else's life gives them a break.
8. If you are comfortable doing so, offer to care for their loved one for an hour or two so they can get a break.

Take some time to recognize and thank the family caregivers that you know. They deserve to be celebrated!

Article from the Greater Wisconsin Agency on Aging Resources



Upcoming Events!

Caregiver Resource Fair
Wed., Nov. 9th
3:00PM–6:00PM
Superior Public Library



Caregiver Support Group
Every 3rd Wed. of the Month
1:00PM–2:00PM
United Presbyterian Church
229 North 28th Street
Superior, WI

Contact us!

Government Center
1316 N 14th Street
Suite 327
Superior, WI 54880

adrc@douglascountywi.org
www.douglascountywi.org/ADRC



ADRC of Douglas County, WI

Main: (715) 395-1234
Toll-Free: (866) 946-2372
Fax: (715) 395-7371

December 2022

Caregiving During the Holidays

For many caregivers the holidays bring added stress. Caregivers are already busy, and there's even more to do during the holidays. It's OK to give yourself a bit of a break this year. Here are some tips to help you make it through the holiday season with more joy and less stress.



- 1.** Focus on what is most meaningful. There are many factors that can't be controlled when it comes to a loved one's health and abilities, so adjust your view of a "successful" holiday.
- 2.** Simplify your holiday activities. If going all out for the holidays will push you over the edge, remember that it doesn't have to be all or nothing.
- 3.** Start new traditions. Instead of focusing on losses and what you and/or your loved ones aren't able to do, try doing something new.
- 4.** Adjust meals-Simplify the menu, focus on the dishes that are traditional and give you that holiday feeling, split up the grocery shopping and cooking among other family members and guests, pay someone to cook meals at your house ahead of time or on the holiday, order all or part of your holiday meals to go from a local grocery store or restaurant – either fully cooked or ready for you to cook at home or eat at someone else's home or at a restaurant.
- 5.** Approach gift giving more efficiently. Try shopping online (many online stores will also wrap gifts). You might ask a friend or relative to do your shopping and wrapping for you, or you can always fall back on gift cards. Family caregivers are often financially stressed, so it might be necessary to lower your gift-giving budget this year and scale back the number of presents. Give the gift of time or attention, like scheduling outings or helping with a project.
- 6.** Anticipate holiday hot buttons-It may be best to limit your exposure to or even avoid certain places, events, conversations or people. If you can't do that, prepare yourself. Minimize the drama, and don't try to resolve problems over the holidays.

7. Mind your mindset-Try to stay mindful, concentrating on the present moment. Think about what you can accomplish instead of what isn't getting done; celebrate what your loved ones can do, rather than dwelling on what they can no longer participate in.
8. Keep self-care at the top of the list. Beware of emotional ups and downs, fatigue, foggy thinking and an inability to sit still or the opposite feeling frozen and unable to get anything done.
9. Connect with other caregivers. Other caregivers are feeling many of the same emotions you are, even when non-caregivers don't understand.
10. Ask for help. To free up your time so you can enjoy holiday activities, ask family and friends to help with direct care for your loved ones, or try community and state resources like adult day care centers, in-home or facility-based respite care, or paid home health aides/caregivers.

Information from **AARP**

Upcoming Events!

Brain Health Book Club
Every 1st Tues. of the Month
Starting January 3rd
10:30AM-12:00PM
Superior Public Library
Superior, WI



Caregiver Support Group
Every 3rd Wed. of the Month
1:00PM-2:00PM
United Presbyterian Church
229 North 28th Street
Superior, WI

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ADRC of Douglas County, WI



New Year, New You in Caregiving

Happy New Year! Do you have a New Year's resolution? The beginning of a new year creates opportunity to start a new habit or to create goals for yourself. One New Year's resolution that could be helpful this year is to focus on better self-care. Whether you are a direct caregiver for a spouse or other loved one or a long distance caregiver it is equally important to focus on your wellbeing. This can be a difficult task as you are busy just trying to get through the day. Caregiver burnout is a real thing and puts you and your loved one at risk for a crisis situation. Some signs of caregiver burnout are feeling anxious, avoiding people, feeling depressed, feeling exhausted, feeling like you are losing control of your life, lack of energy, losing interest in things you use to do, and neglecting your own health and needs. If any of these describes your current situation, then maybe it's time to prioritize your health. Did you know there are supports out there in Douglas County? The ADRC co-facilitates a monthly caregiver support group that meets in Superior and can provide peer support and resources. We, also, have a caregiver workshop call Powerful Tools for Caregivers that can provide you with the skills to help you on your caregiving journey. There are other resources and supports available. Self-care can be as easy as giving yourself more breaks, asking friend/family for support, or even giving yourself permission to have hobbies again. It can be hard reaching out for help but we are only human and can't do everything. Many caregivers have a hard time asking for help. This can lead to feeling isolated, frustrated and even depressed. Rather than struggling on your own, take advantage of local resources for caregivers. Remember, if you don't take care of yourself, you won't be able to care for anyone else.

Chelsea Thompson, Dementia Care Specialist Douglas County ADRC

Know Us Before You Need Us

If you have questions about aging or living with a disability, your local aging and disability resource center (ADRC) can help. The ADRC provides information on a variety of programs and services. That includes long-term care options. The ADRC also helps people apply for programs and benefits, including publicly funded long-term care.

The ADRC connects you with resources, including:



Adaptive equipment.
Caregiver support.
Dementia care Specialist.
Health, nutrition, and home-delivery meal programs.
Housekeeping and chore services.
Housing options.
In-home personal care and nursing.
Long-term care programs.
Medicaid, Medicare, and Social Security.
Safety updates to the home.
Transportation.
Wellness programs.
Disability Benefit Specialist/Elder Benefit Specialist



Call us today for more information!

BRAIN HEALTH BOOK CLUB
EVERY 1ST TUES. OF THE MONTH
FEBRUARY 7TH
10:30AM-12:00PM
SUPERIOR PUBLIC LIBRARY
SUPERIOR, WI



CAREGIVER SUPPORT GROUP
EVERY 3RD WED. OF THE MONTH
1:00PM-2:00PM
UNITED PRESBYTERIAN CHURCH
229 NORTH 28TH STREET
SUPERIOR, WI

Contact us!

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Conflict of Interest Policy
Last Revised: January 2023

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This policy applies to aging units, aging and disability resource centers (ADRCs) and Tribal aging and disability resource specialists (Tribal ADRS), herein referred to as “agency” or “staff.”

Purpose

The purpose of this policy is to ensure conflicts of interest are prevented, recognized, and promptly addressed so that the agencies can provide customers with objective and unbiased information about a broad range of programs and services.

Agency representatives, employees, volunteers, Commission on Aging, and ADRC governing board members must be sensitive to their own personal potential for conflicts of interest, be vigilant about the existence of conflicts of interest elsewhere, and take steps to limit, mitigate, or eliminate conflicts of interest that are discovered.

Definitions

Agency: The agency responsible for the ADRC, Aging Unit, or Tribal ADRS grant(s).

Agency Representative: Representatives include, but are not limited to, all limited-term or permanent employees of the ADRC, Aging Unit, or a Tribal ADRS (contracted or otherwise), volunteers, Commission on Aging, and ADRC governing board members.

Conflict of Interest: A conflict of interest is a situation that interferes with an agency representative'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 agency and to the public's trust in the agency as a place where people can get unbiased, professional advice and support.

Direct Service: A tangible product or specific service provided to an individual or a group in which a financial donation or payment, or other type of payment, is requested or expected. Examples of direct services include home delivered meals, congregate meals, health promotion workshops, respite services, etc.

Integrated ADRC/Aging Unit: For the purpose of this policy, integration is defined by the public's perception of the ADRC and Aging Unit as a single entity. Examples of public perception of integration could include the use of a single organization name, a common phone number, a single website or social media presence, or shared reception for both the ADRC and Aging Unit.

Potential Conflicts of Interest: Potential conflicts of interest include, but are not limited to, financial relationships. For example, secondary employment with an outside agency is a potential conflict of interest. All potential conflicts of interest should be discussed with the agency supervisor or director.

Policy

Representatives of the agency will be mindful of their duty to represent the interests of the general public as related to long-term care and therefore not represent the interest of any one group or agency. The function of the agency is to represent the interest of the customer at all times. Agencies that provide direct services to a customer, such as federally- or state-funded aging services, must ensure that customers are informed of all of the provider options in the community. For example, a customer may need nutrition services and the agency must provide all options including the elder nutrition program, mail order meals, etc.

Agency representatives will avoid potential conflicts of interest as described in this policy in order to provide impartial agency services. Agency representatives will likely encounter situations that may be a potential conflict of interest or something that is not clearly prohibited. Whenever an agency representative is concerned about a potential conflict of interest, they must discuss the situation with their agency supervisor or director. Not all situations that pose a potential conflict of interest are prohibited so long as the potential conflict can be mitigated, and mitigation efforts are documented.

Staff who are dually employed by both the agency and another employer are required to notify their agency supervisor or director in order to ensure a conflict of interest does not exist. The agency must establish a mitigation plan for any staff person that is dually employed with an entity that may have a relationship with the agency, such as a long-term care provider or health care provider. Examples of long-term care providers or health providers include, but are not limited to, managed care organizations, home health agencies, skilled nursing facilities, and assisted living facilities. The agency must make the mitigation plan available to the Department of Health Services (DHS) upon request. Mitigation plans must be reviewed and approved by the ADRC's governing board chair (or commission on aging, if applicable) and a designated county or Tribal official, such as a local corporation counsel. Staff that are dually employed by an entity that does not have a relationship with the agency do not need to complete a mitigation plan.

The following conflicts of interest are prohibited:

- Staff cannot counsel or otherwise attempt to influence customers for financial gain or other self-interests.
- Staff cannot counsel or otherwise attempt to influence customers in the interest of any provider, managed care organization (MCO), IRIS consultant agency (ICA), IRIS fiscal employer agent (FEA), or other organization.
- In accordance with the Federal Home and Community Based Services Rule § 441.730, an agency representative is not allowed to provide agency services to customers if they are:

- Related to the customer by blood or marriage or related to any paid caregiver of the customer.
- Financially responsible for the customer.
- Empowered to make financial or health-related decisions on behalf of the customer.
- Holding financial interest in any entity that is paid to provide care for the customer.
- Serving in a policy or decision-making position for any entity that provides or could provide direct services to the customer.

Agency representatives will work with their supervisor or director to ensure that another staff person provides agency services to customers in this situation.

- Elder benefit specialists and disability benefit specialists may not perform the long-term care functional screen, conduct eligibility determinations for SSI-E or other programs, or provide guardianship or adult protective services.
- Staff who also work in adult protective services may not provide enrollment counseling to any adult protective services client with whom they are working.
- Staff may not continue to provide services to customers in any situation where a mitigation plan is required but has not yet been approved by the ADRC board, commission on aging, or designated county agency for implementation.

Procedure

A perceived or potential conflict of interest may exist even if there has been no misconduct on the part of an agency representative. Perceived or potential conflicts of interest may occur in any situation that might 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.

Agencies are required to:

- Have all staff review and sign this policy on an annual basis.
- Require one of the following:

- That customers sign the Customer Service Agreement (F-02923-03a) at the onset of options counseling; or
- Include a disclosure about conflict of interest on another document that is provided to all customers who receive options counseling. For example, the disclosure could be added to a client rights document if that is provided to all ADRC customers receiving options counseling.
- Exemption: ADRCs that are not integrated with their Aging programs **and** do not provide any direct service are exempt from the disclosure statement requirement. Examples of direct services that an ADRC may provide include health promotion and prevention workshops or assistive technology loan closets.

Ensure that no revenue generated from service provision is used to support options, benefits, or enrollment or disenrollment counseling.

Director or management responsibilities

The director or designee will identify any perceived or potential conflict of interest, determine whether to address the conflict, and when required, assist the agency representative in terminating or minimizing the conflict.

Agency representative responsibilities

The agency representative will exercise sound judgment by being aware of and reporting instances of potential or present personal conflicts of interest. In addition, agency representatives are prohibited from accepting gifts, loans, or favors from individuals or providers who might stand to benefit from referrals or other actions made by the agency.

Training

All agency representatives will receive training on the agency's conflict of interest policy prior to having contact with customers. ADRC governing board members and commission on aging members will receive training before serving on the ADRC governing board or commission. This policy will be reviewed with agency representatives annually.

Disclosure

Agencies that provide options counseling to customers must use the [Customer Service Agreement Form](#) (F-03093) or include the following disclosure language in another document of the agency's choice. Only ADRCs that are not integrated with their Aging programs **and** do not provide any direct services, such as health promotion workshops or loan closets, are exempt from using the disclosure statement.

The primary purpose of the ADRC Specialist is to provide the customer with unbiased information about services that will meet their needs. This includes sharing information with customers about agencies that provide needed services. The ADRC may operate programs that provide direct services to customers.

The ADRC Specialist:

- *Cannot attempt to influence customers for financial gain or other self-interests.*
- *Cannot attempt to influence customers in the interest of any service or program provider, including the ADRC itself.*

The ADRC is prohibited from using revenue generated from direct service programs to support the ADRC Specialist program.

Federal regulation [42 CFR 438.810](#) prohibits the use of revenue generated direct service programs to be used to support ADRC Specialist services.

Assurances

Each agency representative will acknowledge, by signature, the receipt of training and the obligation to be objective and customer centered.

Reporting

Agency representatives will identify and report potential or present conflicts of interest to the director (or designee) upon hire or whenever a conflict is identified. All potential conflicts of

interest are treated as if a conflict exists until a determination is made and the potential conflict has been resolved.

Response

The director (or designee) will receive reports of possible conflicts of interest from agency representatives, employees, volunteers, Commission on Aging, and ADRC governing board members. The director (or designee) will then make a determination as to whether the situation is, in fact, a conflict of interest.

Resolution

The director (or designee) and the agency representative involved shall take immediate steps to terminate or minimize the conflict of interest. This may involve finding an alternative agency representative or source of service or terminating the relationship that has resulted in a conflict of interest.

Advocacy

The agency representative must ensure that customers receive appropriate advocacy, representation, and information, especially in regard to a customer's choice of or eligibility for program benefits or services. Therefore, agency representatives are required to provide the Customer Services Agreement to any customer who agrees to options counseling or Client Services Agreement to any customer who agrees to benefits counseling.

Conflict of Interest Policy Assurance—ADRC or Aging Unit Representative

As a representative of the Aging Unit or Aging and Disability Resource Center of _____, I have reviewed and received training on the 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 or Aging Unit, I will not sign this statement until I have spoken with the ADRC or Aging Unit 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.

I understand that prior to a customer receiving options counseling, they must either:

- a. Review and sign the [Customer Service Agreement](#) (F-03093); or
- b. Review another agency document that includes the conflict of interest disclosure. If the document does not require a customer signature, agency staff should note in client tracking that the conflict of interest disclosure was reviewed with the customer.

I understand that prior to a customer receiving any other agency service, an optional Customer Service Agreement may be obtained.

As a representative of the ADRC or Aging Unit, 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 and Aging Unit staff to be objective and customer centered.

Printed name and title:

Date of policy review:

Signature:

Date signed:

Supervisor Signature:

Date signed:

Conflict of Interest Policy Assurance—Tribal ADRS

As a representative of _____, I have reviewed and received training on the conflict of interest policy. If I do not fully understand this policy or how it is relevant to my employment or association with the Tribe, I will not sign this statement until I have spoken with the Tribal supervisor 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.

I understand that prior to a customer receiving options counseling, they must either:

- a. Review and sign the [Customer Service Agreement](#) (F-03093A); or
- b. Review another agency document that includes the conflict of interest disclosure. If the document does not require a customer signature, agency staff should note in client tracking that the conflict of interest disclosure was reviewed with the customer.

I understand that prior to a customer receiving any other agency service, an optional Customer Service Agreement may be obtained.

As a representative of the Tribe, 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 the Tribal ADRS to be objective and customer centered.

Printed name and title:

Date of policy review:

Signature:

Date signed:

Supervisor Signature:

Date signed:

Douglas County Wisconsin
Department of Health and Human Services
Through October 2022

ADRC	2021 Budget	2021 Actual	2022 Budget	2022 Actual	
Revenues					
Taxes	-	-	-	-	
Intergovernmental Revenues	(531,000)	(623,251)	(525,000)	(503,734)	95.95%
Fines, Forfeits & Penalties	-	-	-	-	
Public Charges for Services	-	-	-	-	
Intergovt. Charges for Services	-	-	-	-	
Interdepartmental Personnel	-	(8,459)	-	(7,711)	
Miscellaneous Revenues	-	-	-	(20)	
Other Financing Sources	-	-	-	-	
Revenues	<u>(531,000)</u>	<u>(631,710)</u>	<u>(525,000)</u>	<u>(511,465)</u>	97.42%
Expenses					
Personnel	434,810	415,167	441,013	356,199	80.77%
Contractual Services	13,450	16,464	13,750	16,185	117.71%
Supplies & Expense	28,610	24,271	28,310	10,792	38.12%
Fixed Charges	42,241	42,240	30,325	25,270	83.33%
Grants & Contributions	-	-	-	-	
Capital Outlay	-	-	-	-	
Department Allocation	147,745	133,568	146,457	105,525	72.05%
Expenses	<u>666,856</u>	<u>631,710</u>	<u>659,855</u>	<u>513,971</u>	77.89%
Net Cost	<u>135,856</u>	<u>1</u>	<u>134,855</u>	<u>2,507</u>	

Douglas County Wisconsin
Department of Health and Human Services
Through October 2022

Alzheimer's	2021 Budget	2021 Actual	2022 Budget	2022 Actual	
Revenues					
Taxes	-	-	-	-	
Intergovernmental Revenues	(22,300)	(23,150)	(23,150)	(15,758)	68.07%
Fines, Forfeits & Penalties	-	-	-	-	
Public Charges for Services	-	-	-	-	
Intergovt. Charges for Services	-	-	-	-	
Interdepartmental Personnel	-	-	-	-	
Miscellaneous Revenues	-	-	-	-	
Other Financing Sources	-	(60)	-	-	
Revenues	<u>(22,300)</u>	<u>(23,210)</u>	<u>(23,150)</u>	<u>(15,758)</u>	68.07%
Expenses					
Personnel	-	6,489	-	4,054	
Contractual Services	-	-	-	-	
Supplies & Expense	3,215	1,738	3,215	-	0.00%
Fixed Charges	-	-	-	-	
Grants & Contributions	19,085	21,291	19,085	11,705	61.33%
Capital Outlay	-	-	-	-	
Department Allocation	-	-	-	-	
Expenses	<u>22,300</u>	<u>29,518</u>	<u>22,300</u>	<u>15,759</u>	70.67%
Net Cost	<u>-</u>	<u>6,308</u>	<u>(850)</u>	<u>1</u>	