

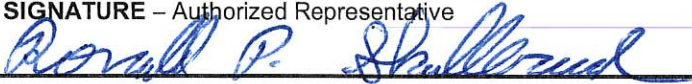
APPLICATION TO CONTRACT AS AN AGING AND DISABILITY RESOURCE CENTER (ADRC)

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

PART I – APPLICANT INFORMATION

Name – Aging and Disability Resource Center (ADRC) ADRC of the Northwoods	Date of Application 7/15/2024
Name – Applicant Forest County, Wisconsin	
Name – Contact Person Ron Skallerud	Phone Number 715 889 0475
Address (Street, City, State, Zip) 200 E. Main St., Crandon, WI 54520	
Email Address district18@co.forest.wi.us	
ADRC Service Area (Counties to be Included) Forest County, WI	Date of Anticipated ADRC Start 1/1/2025

SUBMITTED BY

Name – Authorized Representative Mr. Ron Skallerud	Title Forest County Board Chairperson
Name – Organization Forest County Board	Phone Number 715 889 0475
Email Address district18@co.forest.wi.us	
SIGNATURE – Authorized Representative 	Date Signed 7/11/24

Attach the following to the completed application form:

- A. County Board/Tribal Government Resolution(s) Authorizing the ADRC Application
- B. Letters of support
- C. Organizational Charts for the Proposed ADRC
- D. Other attachments (optional)

PART II – EXECUTIVE SUMMARY

In two pages or less, provide a summary description of the proposed ADRC, including the service area, client populations, organizational structure, office location(s), and approach to providing ADRC services. Highlight any distinctive characteristics of, or significant challenges faced by, the proposed ADRC.

The ADRC of the Northwoods began services in 2012 as a regional model. In its original form, the ADRC of the Northwoods fulfilled contracted obligations to provide services to Forest, Oneida, Taylor, and Vilas Counties, as well as the Lac du Flambeau, Forest County Potawatomi, and Sokaogon Chippewa Tribal Nations. Beginning in 2017, the original partners of the ADRC began to disengage from the regional model to establish ADRC programming focused on single counties or Tribal Nations. The Sokaogon Chippewa Tribal Nation left the ADRC of the Northwoods in March 2017. Oneida County formed their own ADRC effective March of

2018. Following these events, Vilas County and the Lac du Flambeau Tribal Nation also disengaged from the ADRC of the Northwoods.

In 2019 Forest and Taylor Counties and the Forest County Potawatomi Tribal Nations renewed their commitment to continue operations of the ADRC of the Northwoods using the long-term care district model established in 2012. Early in the calendar year 2024, Taylor County notified Forest County of their intent to disengage from the regional ADRC and the long-term care district. Forest County subsequently determined it would be in the County's best interest to disengage from the regional ADRC model. Forest County enacted a Board resolution in March of 2024 confirming this plan. Forest County submitted notice to the Potawatomi Tribal Nation of the intent to disengage from the regional ADRC and long-term care district in May of 2024.

This application is submitted to create a single-county ADRC serving the residents of Forest County. Forest County intends to incorporate the title "The ADRC of the Northwoods" for the Forest County ADRC program. This carry-over of the name/title of the ADRC is expected to support continuation of care for Forest County residents served by the ADRC. As such, in this proposal the ADRC of the Northwoods refers to the ADRC serving Forest County.

Forest County is located in northeast Wisconsin. The County is considered rural and remote. It borders Michigan's Upper Peninsula to the north, Oneida and Vilas Counties to the west, Florence and Marinette Counties to the east, and Langlade and Oconto Counties to the south. Forest County has 1,014.3 square miles of land area and is the 12th largest county in Wisconsin. Forest County has a population of 9,179 residents. The median age is 48.7 years. The percentage of residents in Forest County 65 years of age or older is 24.4%. Two Tribal Nations are located within the borders of Forest County, the Forest County Potawatomi and the Sokaogon Chippewa Nations.

The ADRC of the Northwoods will provide ADRC services in Forest County. The ADRC will remain involved in community and statewide initiatives that enhance awareness of, and access to, ADRC and other services. Feedback received from customers, local advisory committees, and governing boards will continue to guide the work of the ADRC of the Northwoods in its transitioned form.

Forest County intends to integrate the County's aging services, now provided through the Forest County Commission on Aging, with the ADRC. This integration is expected to improve coordination of services provided by the two programs. The integration will also promote collaboration among personnel in service to

Forest County residents. Another significant initiative is underway in Forest County. This is the plan to develop a Human Service Department (HSD). The HSD will integrate the services of the Forest County Department of Social Services with the services provided to Forest County residents by the existing multi-county Department of Community Programs (The Human Service Center for Forest, Oneida, & Vilas Counties). The HSD governance and management structure will be effective January 1, 2025. Forest County intends to integrate Aging/ADRC programming into the HSD structure. The HSD governance and management structure has been adopted in many counties in Wisconsin. It offers advantages to counties in the management and administration of public services. Forest County has recognized the opportunity to act on a series of events with human, social, aging, and ADRC programming to create an HSD governance structure, incorporating aging and ADRC services. While this effort to integrate county-based services creates a significant workload in 2024, it is expected to improve services overall and address gaps in programming which have been evident for Forest County residents.

The ADRC of the Northwoods will continue to serve all contractually required client groups. The ADRC will maintain its existing office and ADRC site in Crandon, WI, as well as all programming currently available to Forest County residents. The rural and remote nature of Forest County will continue to present challenges for ADRC operations. Examples of such challenges include scheduling face-to-face contacts with consumers, low population density across the County contributes to transportation challenges for potential customers and ADRC staff. Forest County is working with the Sokaogon Chippewa and Forest County Potawatomi Tribal Nations to address the changes occurring with ADRC services. The County will be working with the Tribal Nations throughout 2024 to coordinate ADRC programming such that Tribal members and Forest County residents seeking ADRC services can easily access services. The ADRC of the Northwoods, in its transitioned form, will serve any resident of Forest County regardless of Tribal affiliation. A challenge for the County and Tribal Nations will be educating the public about the services of ADRCs in Forest County and the choices of available provider agencies. There will be “no wrong door” for any resident of Forest County to initiate ADRC services in the County.

PART III – PROJECT PROPOSAL (Please note: the completed proposal should not exceed 45 pages, excluding worksheets and attachments. It may have fewer if all requirements are met.)

A. Administrative Framework Proposed (recommend 8-12 pages)

1. **Service Area**—Identify the county(s) or tribes to be served by the proposed ADRC.

The ADRC of the Northwoods, in its transitioned form, will serve Forest County. The geographic boundaries of the County define the service area.

2. **Governing Board**—Describe the proposed structure and membership of the ADRC governing board. Identify other responsibilities the board will have, if any, in addition to those related to the ADRC.

The ADRC of the Northwoods will develop a 9-member integrated ADRC/Aging advisory board comprised of representatives from Forest County to include stakeholders from each of the primary target groups. The composition of the Board is expected to be: four County Board Supervisors, one individual who represents the physically disabled, one person who represents the developmentally disabled, one person who represents people 60 years of age and older, and two Tribal members, one representing the Forest County Potawatomi Tribe and one representing the Sokaogon Chippewa Tribe. The ADRC/Aging board will be integrated with the Commission on Aging board committee and will exist within the HSD governance structure created in Forest County. Members of the ADRC/Aging board committee shall serve for 3-year staggered terms. Forest County will attempt to transition the existing board members and community representatives to the new ADRC/Aging board committee as feasible. Forest County recognizes the value of the experience of these individuals and will work to retain and renew commitments to serve on Forest County board committees.

The ADRC/Aging governing board committee will schedule meetings to satisfy the responsibilities in the contract and statutes of an ADRC governing board. The ADRC board members will be cognizant of expectation they serve free of conflicts-of-interest.

3. **Organizational Structure**—Describe how the ADRC will be organized, including areas of responsibility and reporting relationships. Please describe how the ADRC will be integrated or collaborate with aging services. What is the reporting relationship between the ADRC director and the governing body of the ADRC to other agencies of county government? If a regional ADRC is proposed, describe how authority and responsibility will be assigned. Attach a copy of the organization chart.

Describe any administrative support that will be provided to the ADRC by the county(s), tribe(s) or other entities for information systems management, financial reporting, human resources, and other administrative needs. Identify what, if any, of this administrative support will be charged to the ADRC.

The ADRC of the Northwoods will be integrated with the Aging services currently offered by the Commission on Aging in Forest County. These programs complement one another, and the integrated design is expected to increase coordination of services. As indicated, ADRC/Aging programming will be placed in the Human Service Department governance structure in Forest County. The County will designate a Manager for the ADRC and Aging services. This staff person(s) will report to the Human Service Department Director. The Manager of ADRC and Aging services will attend board committee meetings and assist the board committee in fulfilling its statutory obligations. The ADRC compiles reports and regularly makes presentations to educate the governing board committee on ADRC and Aging services, responsibilities, and roles.

The ADRC Manager will develop and guide ADRC and Aging services. The Manager is responsible for the performance of ADRC staff. For ADRC operations, personnel include ADRC Specialists (providing Information & Assistance, Options Counseling), Disability Benefit Specialist, Elderly Benefit Specialist, Dementia Care Specialist, an Administrative Assistant and fiscal support staff. The ADRC/Aging services will

be supported by the HSD structure in Forest County. The HSD structure integrates social and behavioral health services with the ADRC/Aging services. It is expected this integration will promote referrals among and between services, improved communication and support between service areas in the HSD. ADRC/Aging services will benefit from resources available within the HSD, this includes administrative supports such as financial management, human resources, risk management, and quality assurance functions.

Attachment A: ADRC/Aging Organizational Chart, HSD Organizational Chart

4. **Director**—Identify the qualifications of the person to be hired to serve as the director of the ADRC. Describe the job duties of the director and the director's authority and responsibility relative to the development of the internal operating budget, staff selection and supervision, and responsibility for the various functions of the ADRC. Please indicate if the director will have additional programmatic responsibilities. If so, indicate the percentage of the director's FTE that will be dedicated to the ADRC. Attach a copy of the director's position description, if available.

The ADRC/Aging Services Manager will be hired in the latter half of 2024. As indicated, the Manager will be responsible for all personnel assigned to work with customers of ADRC and Aging services. This includes human resource functions of hiring, training, and supervision of staff. The Manager will oversee daily operations of ADRC programming. The Manager will work with the HSD financial management staff to develop and monitor ADRC budget and fiscal performance. It is expected the ADRC Manager will be a 1.0 FTE.

Attachment B: ADRC/Aging Manager Job Description

5. **Staffing**—Describe how the ADRC will be staffed to provide the required ADRC services, including the number of full and part time positions and the functions of these positions. Identify any positions which will be shared with other entities and perform duties in addition to their ADRC responsibilities.

In addition to the 1.0 FTE ADRC/Aging Services Manager described above, the ADRC of the Northwoods will employ 1.5 FTE ADRC Specialists (providing Information & Assistance, Options Counseling) a 1.0 FTE will combine the services of the Disability Benefit Specialists and Elderly Benefit Specialist, a 0.5 FTE Dementia Care Specialist, a .25 FTE fiscal services assistant, and a 1.0 FTE administrative assistant. It is anticipated the 0.5 FTE Dementia Care Specialist will be combined with the 0.5 FTE ADRC Specialist to create a 1.0 FTE position.

6. **Location and Physical Plant**—Identify the location of the ADRC, including any branch offices, if known, and describe its characteristics, including hours of operation, physical space (staff offices, conference rooms, reception area, etc.), parking, accessibility, external appearance, signage, etc., that will be present when the ADRC is open to the public and operational. Describe how the ADRC will make itself welcoming to the public. What, if any, current county or tribal agency(s) or staff will be incorporated or co-located with the ADRC?

The ADRC of the Northwoods will maintain the office it has used in Forest County. The office location is 300 A, South Lake Avenue, Crandon, Wisconsin. The ADRC's hours of operation are 8:00 A.M. to 4:30 P.M., Monday through Friday. The ADRC offers the ability to schedule appointments and provide presentations/outreach during evenings and weekends as requested by customers and/or the community. The ADRC location allows staff to have individual offices. The ADRC has interview rooms that are easily accessible. The office has a large lobby area with brochure displays and a reception area to assist customers with questions. The ADRC has spaces available in the building which support customers and staff, including meeting rooms equipped with smartboards/presentation technology, storage rooms, and break-room areas. The location has external signage indicating the ADRC's presence. It offers clearly marked parking, an accessible entrance equipped with electric openers, a warm and welcoming environment, and accessible bathrooms.

7. **Equipment and Systems**—Describe how the requirements for a client tracking system will be met. Specify if the ADRC is planning to use WellSky software for this purpose.

Please indicate who will be designated as the client tracking lead. Please indicate who will be designated as the resource database lead. Describe plans for the ADRC's website and telephone system.

The ADRC of the Northwoods will continue to utilize the SAMS-IR database and the CITRIX database. The staff person responsible for customer tracking is the ADRC Manager with support from the administrative assistant. The staff person responsible for the resource database is ADRC Manager with support from the administrative assistant. A new telephone system was installed by Ring Central in 2018 which has proven to support reporting functions and assist in improving and maintaining responsiveness to customer needs. The ADRC of the Northwoods website is operational, it will be modified in content to address the changes in service boundaries (Forest County).

8. **Commitment to Health Equity**—Describe how the ADRC will be accessible and welcoming to people with physical or sensory disabilities, who speak little or no English, or whose culture may affect their ability to use the ADRC. Describe how the ADRC will identify and respond to inequities for accessing ADRC services.

The ADRC of the Northwoods will provide fully accessible services to clients by ensuring American Disability Act compliance and utilizing space in a comfortable, yet effective manner. Customers may access the ADRC by telephone, via the internet (computer or other smart device), face-to-face at the Crandon office, or at a location more comfortable to the customer. Customers may include family members, friends, or other advocates as desired during any interaction with the ADRC in accordance with appropriate authorization processes.

Staff of the ADRC of the Northwoods will treat all individuals who access the ADRC respectfully and will provide equal access to services and programs. For clients who require assistance with communication, the

ADRC will make translators/interpreters available. Staff can utilize other modes of communication such as the Wisconsin Relay System if requested by individuals who contact the ADRC. The ADRC has hearing loop technology available on-site, and this technology is portable and can be used in other locations.

Standard ADRC materials will be made available in alternative formats (large print, Braille, or in languages other than English) when possible, or other arrangements will be made for ensuring customers receive needed information in a method that is understandable to them. ADRC staff will be trained, knowledgeable and sensitive to racial, ethnic, socio-economic, and cultural identities in the service area and use this awareness to better serve the public. The ADRC will participate in community groups that promote inclusiveness, sensitivity, and education regarding these topics.

9. **Avoiding Conflicts of Interest**—Describe how the ADRC will ensure that all of its services are objective, unbiased, and in the best interest of the consumer. Describe how the ADRC will implement and train staff on the [Conflict of Interest](#) policy.

The ADRC of the Northwoods will provide services in a manner that is objective, unbiased, and in the best interest of the customer. The agency's policies, training, and mentoring practices encourage motivational interviewing to support customers in making choices based on their best interests. The agency works to simplify information presented to customers to promote educated decision making. The ADRC will use DHS sponsored marketing and informational materials for an objective presentation of information. The ADRC provides annual training for staff on the DHS/Office of Resource Center Development (ORCD) Conflict of Interest Policy. Staff are asked to disclose any possible conflict of interest activities so that mitigation can occur immediately.

10. **Grievances and Appeals**—Describe how the ADRC will implement and train staff on the statewide [Complaint and Grievances Regarding ADRC Services](#) policy and [Appeal Policy for Adverse Benefit Determinations](#).

The ADRC of the Northwoods utilizes the DHS/ORCD Complaint and Appeal Policy. At a minimum, staff and board/committee members are trained annually in this subject matter. The training defines complaint, appeal, and grievance policy and procedure, addresses how to support customers using the complaint and appeal process, and establishes process for resolving complaints and reporting to DHS/ORCD. The training also details reporting requirements to the ADRC board/committee.

11. **Community Needs Identification**—Describe how the ADRC will secure consumer input and other information to identify the unmet needs of consumers in its service area. Explain how the ADRC will use this information to target ADRC outreach, education, prevention, and systems advocacy efforts and share the information with others outside the ADRC.

The ADRC of the Northwoods will identify the interests and needs of the community and the target groups served by using best practice strategies such as the "Aging Difference" and "Self-Determination" initiatives. These approaches have proven effective for work with the elderly and people with disabilities. These practice approaches support engagement and responsiveness to customers served. The ADRC seeks input regarding

services by educating the board committee members, customers, staff, and the public about the ADRC role in the community and the range of responsibilities. The ADRC will document unmet individual needs in SAMS-IR and will communicate larger system unmet needs to the board/committee, local government, and social/human service providers in the area. The ADRC will identify unserved or underserved subgroups within the population and will use information proactively to encourage community and ADRC cooperation to improve services in Forest County.

12. Collaboration with Local Agencies and Stakeholders

Local Agencies—How will the ADRC partner with other county or tribal agencies and community organizations serving the target populations?

Forest County's development of a Human Service Department and placement of ADRC and Aging services within this governance structure is expected to improve collaboration among the ADRC, Aging services, social services and behavioral health services. Managers within the HSD, including the ADRC Manager, will meet regularly to address practice and promote collaboration among services areas. The Forest County ADRC expects to hold regular meetings with the two Tribal Nations in the County to coordinate ADRC programming among the three provider entities. This effort is considered essential in promoting the "no wrong door" approach which supports any resident of Forest County (Tribal or non-Tribal) in accessing ADRC services at their convenience and according to their preference. The ADRC will establish relationships with the Managed Care Organizations (MCOs) and I-Respect-I-Self-Direct (IRIS) Consultant agencies serving Forest County to promote best practice for customers referred for ongoing long term care services.

Stakeholders—Describe how consumers, advocates, service network representatives, and other stakeholders will give input in the ongoing operations of the ADRC.

The ADRC will engage the Stakeholder groups described above in periodic meetings to address services, gaps in services, and community needs for the elderly and people with disabilities. Customers will be engaged in assessments of quality of services through customer contacts and surveys processes. The ADRC will utilize other approaches for obtaining feedback about operations such as a "suggestion box", and periodic quality assurance surveys designed to gather input about programming.

13. Quality Assurance/Quality Improvement Process—Please describe how the ADRC will implement continuous quality improvement activities.

The ADRC will apply the principles of performance quality improvement to operations using DHS approved methods and documentation. The ADRC will develop and implement a quality assurance plan which will complete one focused performance improvement project each year to improve operations and/or customer satisfaction. Staff meetings will include an agenda item of quality assurance/improvement such that all ADRC staff recognize and engage in promotion of improvement processes. Supervisors will review individual cases to

provide feedback to ADRC staff on performance. Timeliness functions for engagement and screening activities of ADRC customers will be monitored for performance and, as appropriate, improvement strategies.

B. Provision of ADRC Services (recommend 15-20 pages)

1. **Marketing, Outreach, and Public Education**—Describe the marketing, outreach, and public education strategies the ADRC will employ to make ADRC services known to members of its target populations, including people who are isolated or otherwise hard to reach, and to community agencies and service providers in its service area. Identify how the ADRC will work with hospitals, nursing homes, assisted living providers, and home health care agencies to encourage appropriate and timely referrals. Describe how the ADRC will measure the success of its marketing efforts.

The ADRC of the Northwoods will employ multiple strategies to make services known to community agencies and service providers in Forest County. An annual marketing plan will identify goals for:

- Presentations to professionals and the public.
- Participation and presence at outreach fairs and local events.
- Utilization of print media and the use of other mediums based on availability and budget considerations.

Additional approaches may include television or radio advertising, billboards, and other permanently posted advertising, purchases of small promotional items (e.g., pens, mirrors, dusters, etc.) that display ADRC contact information. The plan will evaluate marketing strategies through cost-benefit analysis.

The marketing plan will address efforts to reach target populations served by the ADRC. In difficult-to-reach populations, outreach will be conducted through community resources which may be used by the targeted groups. Such resources include primary care clinics, churches, restaurants, grocery stores, gas stations, and local businesses in Forest County. Local units of government and public service staff will be contacted for outreach activities. The ADRC will promote awareness of available services through bulletin distribution, posting of materials, and direct presentations to staff.

All presentations and materials will promote services provided through the ADRC. Such communications will address the purpose and availability of the ADRC. The ADRC will highlight the collaborative nature of services between the ADRC, and local community services offered through the Human Service Department, Health Department, Managed Care Organizations, hospitals, clinics, the Salvation Army, Social Security, and other service providers. The ADRC will inform nursing homes, community-based residential facilities (CBRF), and residential care apartment complexes (RCAC) about the services of the ADRC (including offering pre-admission and relocation counseling). The ADRC will promote programming by making staff available to assist with community advisory committees.

The ADRC will track the number of contacts with people who are elderly, have physical disabilities, or intellectual disabilities, as well as those who call on their behalf. Such data analysis will ensure that the

ADRC's strategies are effective, and the contacts received are proportional to the representation of each target group in the ADRC's service area.

2. **Information and Assistance**—Describe how the ADRC will provide information and assistance (I&A) services. Include how the ADRC will meet the needs of members in each target group and coordinate with, rather than duplicate, I&A services already available in the county. Provide a list of any other organizations the ADRC will coordinate with in implementing I&A services.

The ADRC of the Northwoods will provide information and assistance (I&A) to members of target populations and their families, friends, caregivers, advocates, and others who seek assistance on their behalf. I&A will be provided in a manner convenient to the customer including, but not limited to, in-person contacts in the home, at the ADRC office by appointment, walk-in, telephone, e-mail, or through written correspondence. The ADRC will provide information that is accurate, objective, and relevant to the individual's expressed need; it shall be presented in language and formats that are easy for customers to understand. When interpreters are needed, telephone and in-person interpreters are provided by the ADRC. Hearing loop technology is also available for individuals with hearing difficulty; pocket talkers are available for office or in-home visits. Information and assistance provided by the ADRC will be unbiased and will not favor or persuade the individual to choose any specific long-term care setting, program, service, or provider.

As part of the I&A services, the ADRC will evaluate the request, provide referrals and linkages to public and private resources, provide follow-up, and advocate on the customer's behalf. At a minimum, the ADRC will provide person-centered information and assistance on the following topics:

- Adult protective services, abuse, neglect, domestic violence, and financial exploitation.
- Living arrangements related to long-term care (e.g., home care, assisted living, nursing home and other settings) as well as information for people considering a move due to health, disability or frailty.
- Long-term care related services (e.g., in-home services and support, care management, respite equipment, training, transition planning, independent living skills).
- Paying for long-term care (e.g., using private resources; purchasing long-term care insurance, or accessing public programs).
- Health and chronic conditions (e.g., rehabilitative care, home health services, medication management, communication with physicians and other health care providers, medical decisions, and Advance Directives).
- Prevention and early intervention (e.g., screening programs, falls prevention, health promotion, healthy lifestyles, management of chronic conditions, home safety, health care transitions, medication management).
- Disability conditions, services and supports.

- Aging, including normal aging, conditions associated with aging, and aging services and supports.
- Alzheimer's disease and other related dementias.
- Mental health services and support.
- Substance use services and support.
- Employment, training, and vocational rehabilitation.
- Assistance for meeting basic needs (e.g., Medicaid, Medicare, Foodshare, Energy Assistance).
- Transportation (e.g., specialized transportation, medical transportation, volunteer drivers, taxi, local transit services).
- Nutrition (e.g., congregate meals, home delivered meals, food pantries, nutrition counseling).
- Home maintenance (e.g., chore services, yard work, home safety, weatherization, home repair, ramps).
- Housing (e.g., senior housing, special needs housing, public and low-income housing, accessible and independent living options, housing counseling services).
- Legal issues (e.g., tax laws, power of attorney, guardianship, consumer rights, advocacy, discrimination, complaints and grievances).
- Education, recreation, life enhancement and volunteerism.
- Caregiving issues and services (e.g., formal, informal and long-distance caregiving; caregiver education and support, role changes associated with changing care needs and health care transitions; stress management; respite).
- Death and dying issues and supports, including hospice and palliative care.

How will I&A activities be staffed? Will the initial calls be answered by a receptionist or by an I&A professional? Will I&A staff be generalists, or will they specialize in specific target populations or services?

The ADRC will provide I&A through a receptionist model. The ADRC's toll-free telephone number is advertised. The Administrative Assistant will answer and provide a "warm transfer" of the contact to ADRC staff. The appropriate staff will be available to accept calls, meet with walk-in consumers, develop referrals, provide information and assistance and follow-up as needed.

The ADRC will offer I&A coverage of 8.5 hours daily, Monday through Friday, excluding weekends and holidays. After-hour contacts are routed to a voice mail system which is monitored by the Administrative Assistant and forwarded to the appropriate staff within 24 hours with the exclusion of weekends and holidays. After-hour emails or correspondence by mail are also managed within a 24-hour time frame.

How will the ADRC assure that staff are qualified to provide I&A services and have expertise in serving all target groups?
Please attach a copy of the I&A position description, if a draft has been developed

ADRC Specialists will receive training on all target populations the ADRC intends to serve. Specialized training on issues related to aging, physical/intellectual disabilities, mental health, substance use, and other issues listed above will be provided by regional experts. As budgets allow, the ADRC will support individual staff requests to attend training offered by state, community, and advocacy organizations that will enhance knowledge of target populations served. Information about services and programs is contained in the Forest County Resource Guide which is available to staff and the public.

3. **Long-Term Care Options Counseling**—Describe how the ADRC will provide long-term care options counseling. Describe how long-term care options counseling will be coordinated with other ADRC services.

The ADRC of the Northwoods will provide options counseling to inform customers about the possibilities available to meet long-term care needs and the factors to consider when making long-term care decisions. Options counseling is an interactive decision and support process which will be provided by ADRC staff. The service is expected to offer:

- A review of the individual's personal history, preferred lifestyle and future goals, functional limitations and capacities, and other relevant information needed to evaluate options available.
- The full range of long-term care options available to the individual including, but not limited to, home care, community services, residential care, nursing home care, post hospital care, case management services, opportunities and methods for maximizing independence and self-reliance including the utilization of supports from family, friends, and community and the self-determination approach.
- Information on public and private payment for long-term care services and functional and financial criteria for receiving Managed Care Organization or waiver services from the Medicaid fee-for-service system.
- Factors that the individual may want to consider when choosing among the various long-term care programs and benefits, including cost, quality, service limitations, resources, and desired outcomes.
- The advantages and disadvantages of options in respect to the individual's situation, values, resources and preferences.

The ADRC will provide long-term care options counseling at a time, date, and location that is convenient for the individual. This may include the individual's place of residence or temporary care setting. The ADRC will respect that the consumer sets the cadence with which he/she is comfortable in receiving the information and assistance requested. Face-to-face meetings will be provided with the individual and any others who the individual chooses to involve. Options to communicate with individuals via telephone, mail, email or other means will be offered. Options counseling may also be provided to the individual's family or other

representatives acting on the individual's behalf. Information provided by the ADRC staff will be timely, accurate, thorough, unbiased, and appropriate to the individual's situation and needs. No attempt will be made to persuade the individual to choose or participate in any long-term care setting, program or service. All interactions with individual customers regarding options counseling, including the options discussed, factors considered, unmet needs, results, and next steps will be documented in the program database.

4. **Dementia Care Specialist services**— Describe how the ADRC will provide dementia care specialist services. Describe how the ADRC will ensure staff are knowledgeable about the Dementia Care Guiding Principles. Describe how staff will be trained to conduct memory screens as appropriate.

The ADRC of the Northwoods staff will be versed in Dementia Care Guiding Principles. These principles serve as the basis for the delivery of service and support options to people and their families who are living with dementia. ADRC staff will be trained to administer memory screens and related assessments. If these assessments indicate a cognitive impairment, ADRC staff will work with the customer to obtain a release of information to contact the individual's primary care physician to promote further follow-up and evaluation. ADRC staff will participate in ongoing education and training for the subjects of dementia and memory screening. These issues will be regularly reviewed with staff at ADRC program meetings.

5. **Counseling to Caregivers**—Describe how ADRC staff will support caregivers by providing I&A and options counseling.

The ADRC of the Northwoods staff will offer counseling, support, and education to family members and caregivers. This service will occur at a location convenient for the caregiver and/or family. ADRC staff will be versed in available services and support in Forest County. ADRC staff understand caregivers may be reluctant to receive services in their home or community. Integration of Forest County's Aging Service with the ADRC will allow for collaboration to utilize the Alzheimer's Family Caregiver Support Program and National Family Caregiver Support Program resources to assist family members in need of services.

The ADRC partners with the Forest County Caregiver Coalition Group to support individuals and their caregivers. This is an opportunity for the ADRC to work together with other community organizations to support caregivers.

6. **Preadmission Consultation and Assistance with Resident Relocations**—Explain how the ADRC will provide preadmission consultation to people considering a move to a nursing home or assisted living facility. Explain how the ADRC will assist individuals who wish to relocate from a nursing home and how it will, if necessary, help those who need to relocate from a nursing or assisted living facility that is downsizing or closing.

ADRC staff will provide preadmission consultation to consumers referred by a nursing home, Community Based Residential Facility, or Residential Care Apartment Complexes. Long-term care options counseling is also provided when an individual may experience a crisis; at the time of hospitalization, or when the person has experienced the loss of a caregiver. Consultation will be targeted to the individual's needs, preferences, and their unique circumstance.

ADRC staff will offer preadmission consultation at a time and location convenient for the customer, and at the customer's request, any interested person in their support network may participate. The consultation will cover the following long term care topics:

- Full range of care settings and possible support.
- Services that could be arranged in the current home.
- The cost of options presented.
- Evaluating facility quality and appropriateness, and programs that could assist with payment for services and support if necessary.

Explanations on eligibility criteria and the limits of public funding in certain settings will also be reviewed.

The ADRC is the local contact agency for referrals from nursing homes under the Minimum Data Set (MDS) 3.0, Section Q guidelines. Internally, the ADRC has developed a process for all MDS referrals to be forwarded to an ADRC Specialist the same day the referral is received. The ADRC has a tracking system to monitor timelines. The ADRC has developed relationships with nursing homes and assisted living professionals such that referrals are made on appropriate individuals. The ADRC continues to work closely with professionals in facilities to supplement, but not replace, the role of the discharge planner. The ADRC often makes multiple contacts with individuals as they consider options to return to community living. The ADRC provides assistance regardless of whether the individual is paying privately or is potentially eligible for publicly funded programs. The ADRC assists with application for Medical Assistance and other appropriate programs when the individual is pursuing community-based care.

The ADRC has experience working with the DHS relocation teams related to facility closures in the past. The ADRC is prepared to respond to other facility closures which may occur in Forest County.

7. **Elder Benefits Counseling**—Describe how the Elder Benefit Specialist (EBS) program will be staffed and supervised, where EBS services will be provided, and how EBS services will be coordinated with I&A, DBS and other ADRC services.

The ADRC will employ an Elderly Benefit Specialist (EBS) to serve Forest County. The EBS scope of services described in the Wisconsin DHS ADRC application will be available for individuals 60 years of age and older. The ADRC will develop legal resources to provide legal consultation and case supervision for EBS staff as necessary.

The EBS staff will provide services in the ADRC office, in the homes of customers, in a hospital/nursing home, or other locations. Ease of access for the customer is considered paramount. The EBS staff are available to

participate in joint home visits with ADRC Specialists as appropriate, participating in outreach services, attending ADRC meetings, and training.

8. **Disability Benefits Counseling**—Describe the ADRC's plan to implement Disability Benefit Specialist (DBS) services, including where the DBS will be located, how the DBS will be supervised, and how the DBS will coordinate with other ADRC services. How will the ADRC assure public awareness of and access to DBS services?

A Disability Benefit Specialist (DBS) position will be established in the ADRC of the Northwoods. The DBS is expected to be a part-time position. The DBS will be supervised by the Manager of the ADRC.

The DBS will serve individuals aged 17.5 years thru 59 with developmental/intellectual or physical disabilities, mental illness and/or substance use disorders. The ADRC will meet all DHS requirements for Program Policies/Procedures and the DBS Scope of Services. The ADRC Manager will serve as a liaison with the DBS and legal resources to ensure consistent service to all customers with Intellectual Disabilities, Developmental Disabilities, Physical Disabilities or behavioral health disorders. The ADRC Manager will participate in an annual case review process. Training and benefits updates will be offered by the DBS by the ADRC Manager and staff. The DBS will work closely with the ADRC staff.

Referral to the DBS will come from customer contacts via phone calls, requests for services, walk-ins, and referrals from other ADRC staff. The DBS will be available to clients and staff for benefit-related issues. Training and in-services will be provided to assure the DBS is competent in their role. The DBS service will be advertised with other services of the ADRC at local outreach activities and in marketing materials.

9. **Access to Publicly Funded Long-term Care Programs (Family Care, Family Care-Partnership, PACE, and IRIS)**—How many ADRC staff will be trained and certified to use the Long-Term Care Functional Screen (LTCFS)? How will LTCFS be integrated with LTC options counseling and other services of the ADRC? Please indicate who will be designated as the LTCFS liaison.

Describe how the ADRC will facilitate the financial eligibility determination process, including how it will assist customers and how it will coordinate with the income maintenance unit.

How will the ADRC work with MCOs, ICAs, FEAs, and income maintenance units to assure that the eligibility and enrollment process is predictable, streamlined, and barrier-free for customers using the enrollment and disenrollment guidance?

The ADRC is the point of contact for all adult publicly funded long-term care programs. The ADRC will offer the Long-Term Care Functional Screen (LTC FS) as a function of options counseling. The ADRC will be responsible for performing the initial long-term care functional screen for all prospective managed care or IRIS enrollees. Timelines are established for initiation and completion of the LTC FS. Screens will be initiated within ten business days of the request and/or acceptance of offer for screening. Once the screenings are initiated, they will be completed within three business days. The ADRC will administer the LTC FS consistent

with the requirements in the WI LTC FS Instructions. The ADRC will have 1.5 ADRC Specialists trained and certified to perform the LTC FS.

During transition to a Family Care-Managed Care Organization, when a consumer is found eligible for nursing home level of care or non-nursing home level of care, these individuals will be placed on DHS' Program Participation System (PPS) waitlist. The ADRC will send notification letters to the consumers notifying them of eligibility and waitlist status. If the consumer is found ineligible at a non-nursing home level of care, appeal rights will be included with this notification. ADRC staff will adhere to the waitlist policy established by DHS. Once the individual moves from the waitlist to service provision, staff will ascertain Medicaid status. If needed, the ADRC will convey the level of care to income maintenance programs for the Medicaid eligibility determination.

The income maintenance (IM) program is responsible for financial eligibility determinations. The ADRC will streamline the financial application in the following ways: inform consumers of financial eligibility criteria including income and asset limits, estimate cost share, review spousal impoverishment criteria, and estate recovery rules. The ADRC will offer information regarding the process: who to contact, how to apply, and what documentation will be needed. The ADRC will determine if the customer needs assistance with the application and if so, assist throughout the entire process. The ADRC will provide IM staff with the following information: the LTC FS results; a signed Medicaid application and information relevant to financial eligibility such as proof of assets, income, employment, and life insurance values. ADRC staff will also assist the customer with completing application forms either manually or online and help schedule appointments as needed. The ADRC and IM program areas will work from the Forest County Human Service Department. This structure will support collaboration and coordination of services for customers served in both program areas.

10. Enrollment and Disenrollment Counseling—Describe how the ADRC will provide counseling to people who want to enroll in a MCO or IRIS and disenrollment counseling for those who disenroll.

The ADRC of the Northwoods staff will use the DHS Enrollment and Disenrollment Plan as the basis for all enrollment and disenrollment functions. The ADRC will use predictable and efficient enrollment and disenrollment procedures. The policies regarding enrollment are consistent with access to publicly funded long-term care programs in Wisconsin.

When a consumer is found eligible for and/or is considering enrolling in a publicly funded long-term care program the following concepts and information will be presented to support informed decision making:

- The purpose of Family Care/MCOs.

- Medicaid as a payor source and fee-for-service Medicaid.
- Self-directed support in managed care and as an independent program.

Information comparing MCO, IRIS, and private pay options will be provided. The ADRC will ensure access to information for individuals with visual impairments or other communication barriers by providing information in appropriate formats. Discussions will occur regarding the enrollment process and timing of enrollment. The ADRC will refer people who express an interest in IRIS to an IRIS Consultant agency and will provide LTC FS, Medicaid status, cost share, and other data as directed by DHS. The ADRC will obtain signed enrollment forms from individuals who decide to enroll in programs. ADRC staff will further explain cost share and payment responsibilities, estate recovery considerations, Medicaid deductible periods, etc. Enrollment counseling will educate the customer on the benefits of MCO enrollment versus Medical Assistance card services, enrolling in an SSI Managed Care Program, or utilizing community support. ADRC staff will present information in an objective manner. ADRC staff will not attempt to persuade the individual to choose one program or provider over another or withhold information about any suitable program or provider. Only WI-DHS developed informational materials will be used in enrollment counseling.

The ADRC will aid with disenrollment from a managed care organization or IRIS. The ADRC will contact the individual and/or guardian to offer disenrollment counseling and schedule a meeting within two business days of receipt of a member's request for disenrollment. Disenrollment counseling may be provided face-to-face or by telephone based upon customer's preference and will be provided within five business days of the ADRC's initial contact with the individual (timeline is dependent on counseling refusals or extensions at the client's or guardian's request). Disenrollment options counseling shall include:

- Reviewing reasons for disenrollment, including identification of any active complaint or grievance in process.
- Providing information regarding the complaint and grievance process.
- Providing information regarding services and programs available to the individual if they decide to disenroll.
- Offering options regarding another MCO or IRIS, private pay, or fee-for-service programs.
- Helping the customer understand any consequences of disenrollment based on current service plan.
- Helping the customer understand the financial implications and possible loss of Medicaid coverage if voluntary disenrollment occurs.
- Evaluating customer eligibility for another type of Medicaid.
- Explaining how to re-establish eligibility or re-enroll in the future.

- Completing a signed and dated disenrollment form including effective date of disenrollment following the agreed upon plan with the MCOs in the county with a three-day timeline to allow MCOs sufficient time to notify service providers.

Standard disenrollment forms provided by the WI-DHS will be used. The ADRC has an internal process and checklist for ADRC Specialists to use such that all areas identified above are discussed with the consumer as applicable.

- 11. Access to Other Public and Private Programs and Benefits**—Identify the key programs and agencies to which the ADRC will be making referrals, including, at a minimum, Medicaid, Medicare, SSI, SSI-E, Social Security, SSDI, FoodShare, Veteran's services mental health services, and other public and private programs and benefits. Describe how the ADRC will establish referral protocols, resolve issues of access, and follow up to ensure consumers get what they need in a timely manner. Please indicate if the ADRC will be designated to perform initial SSI-E eligibility determinations for both MCO and IRIS enrollees.

The ADRC of the Northwoods will develop protocols/MOUs to ensure efficient customer access to public programs. These procedures will detail referral processes emphasizing timeliness of referrals between agencies to meet client needs. The ADRC will make referrals as appropriate for programs administered by the Aging service (to be integrated with the ADRC), SSA (Social Security, SSDI, SSI), Veteran's services, Housing Assistance, Division of Vocational Rehabilitation services, Public Health services and those services available within Forest County's Human Service Department structure including Energy and Weatherization Assistance, Adult Protective Services, mental health and/or substance use services and other HSD programs.

When a customer contacts the ADRC and either requests, or appears to be eligible, for a public program/benefit option, the ADRC staff will assist customers to understand service options and inform them of the processes involved in accessing services. The ADRC will utilize assessment tools available to aid in determining the eligibility status of a customer. These tools may include on-line resources such as: ACCESS.gov, SSA.gov, Medicare.gov, SSI-E application and assessment tool, guides that explain eligibility rules such as the Medicaid Handbook. ADRC staff will utilize available databases (e.g. CARES and Forward Health) to identify the services a client is receiving and to assist with the options counseling process. Assessment instruments will be available for brief screening of memory, depression, substance use, and environmental falls to assist the customer in determining service needs.

The ADRC may make direct referrals to multiple agencies depending on the client's needs. ADRC staff are knowledgeable regarding aging services and frequently refer to the AFCSP, NFCSP, home-delivered meals, transportation programs, and Caregiver Support programs. The integration of ADRC and Aging services and the placement of these services in the Human Service Department is expected to increase collaboration and

coordination of services in Forest County. ADRC DBS and EBS staff assist clients with accessing any benefits-related programs that consumers are interested in pursuing.

12. Short-Term Service Coordination—Describe how the ADRC will implement and train staff on the [Short-Term Service Coordination Policy](#). (Note: this is an optional service)

The ADRC of the Northwoods will provide short-term service coordination to the extent financial and personnel resources support these functions. The ADRC will utilize the Short-Term Service Coordination Policy WI-DHS offers. All customers receiving short-term service coordination will meet one of the identified target groups.

Subject to the limitations described, short-term service coordination is provided to assist individuals and their families with complex and/or immediate needs when individuals cannot manage the situation themselves and ADRC services are insufficient to deal with the circumstance. In these instances, there is typically no identified individual to address concerns, and/or the individual cannot be enrolled in managed care. Through short-term service coordination, the ADRC shall address the immediate concerns, attempt to stabilize the individual's situation, and either enable the person to manage issues independently or connect them to needed support. Oftentimes funding such as AFCSP or NFCSP is explored during this time of short-term service coordination.

Short-term service coordination may include some or all of the following:

- Evaluation of the individual's need, resources, and ability to manage the situation.
- Planning, arranging, and coordinating multiple services, people and resources.
- Recruiting natural support and volunteers.
- Maintaining contact, reinforcement and encouragement for a period not to exceed 90 days.

ADRC staff will document basic information about the services needed, unmet needs, actions taken, and services provided, and the responsibilities of the various parties involved with the individual.

Training is provided to ADRC staff to recognize the difference between short-term service coordination and the assistance provided as part of information/assistance and options counseling. The ADRC Manager will monitor and ensure that short-term service coordination is time limited unless there is due cause for an extension.

ADRC staff will inform customers of the short-term nature of service coordination and any actions to be taken to resolve an immediate crisis. ADRC staff will have a plan for closure at the onset of service. The ADRC's goal is to appropriately refer the individual to a community provider to ensure the customer's needs are met and safety is assured prior to the end of the short-term intervention.

- 13. Access to Emergency Services**—Describe how ADRC staff will be trained to recognize and appropriately deal with emergency situations, including mental health and substance use crises; identify emergency service providers in your community with which the ADRC will coordinate. Describe how calls will be handled during and after business hours to ensure that people are connected promptly with appropriate providers of emergency services.

The ADRC of the Northwoods will be visible in Forest County, this is expected to lead to referrals for emergency services. Individuals in need of crisis services, assistance with homelessness, or other emergent needs are expected to make contact with the ADRC. These individuals may not be eligible for an ADRC targeted service but need assistance or intervention. ADRC staff will be trained to identify and address emergency situations. During work hours, staff refer individuals to local crisis services, hospital emergency rooms, law enforcement, domestic violence shelters, Salvation Army, and/or other emergency services as appropriate. After hours, the ADRC of the Northwoods' voicemail message instructs callers to contact the 911 system in case of emergency.

- 14. Access to Elder/Adults-at-Risk and Adult Protective Services**—Describe how the ADRC will identify people who may need (elder) adults-at-risk and/or adult protective services. Identify the agency(s) responsible for adults-at-risk and adult protective services in the ADRC service area, and describe how the ADRC will connect people in need with these services. In your description, include information about how the ADRC will respond to domestic violence, crises involving consumers of current long-term support programs, and contacts from law enforcement and hospital emergency rooms.

ADRC of the Northwoods staff will recognize warning signs of abuse, neglect, self-neglect or financial exploitation. Staff will identify issues that require a response from an adult protective services (APS) referral. After timely consultation with the ADRC Manager, if it is determined a need exists for a coordinated response with ADRC, APS, an MCO, and/or law enforcement, staff will coordinate these services to address the concern.

Adult Protective Services and law enforcement are easily accessible to the ADRC site. The ADRC will develop relationships with these agencies to promote collaboration of services when needed. Individuals in abusive and/or neglectful situations are often cautious about reporting these concerns, especially as family members are involved. Staff will be trained to recognize APS issues and use a sensitive approach to gather information and refer to the local APS. ADRC staff will be knowledgeable about payee, guardianship, and protective services issues. The ADRC and/or another HSD Manager will be available for consultation with APS circumstances.

- 15. Transitional Services for Students and Youth**—Describe how the ADRC will market and outreach to young people with disabilities and their families who are leaving the school system and need access to adult services. How will responsibility for this activity be assigned within the ADRC? How will school systems be informed about the ADRC and engaged in the process of providing transitional services? What other organizations will be involved?

The ADRC of the Northwoods will coordinate assistance to youth in transition through planned collaboration with schools, clinics, the children's long-term support program, and the Division of Vocational Rehabilitation. ADRC staff will participate in the local Transition Advisory Committee(s) and routinely meet with teachers, students, and parents. ADRC staff will participate in school health/wellness/outreach fairs when available to better inform school staff and others of the services available to youth and their families through the ADRC.

The ADRC will provide materials to the local DVR and support reciprocal referral making. The ADRC will make available subject-specific information on guardianship, long-term care programs, benefit specialist services, and other topics that may be of interest to youth and families.

- 16. Health Promotion, Prevention and Early Intervention Services (optional)**—Indicate whether the ADRC will develop resources and expertise regarding preventable causes of long-term illness and disability and identify risk factors and appropriate prevention and early intervention strategies for individuals using the services of the ADRC. If so, how will prevention be integrated with the other activities of the ADRC? How will the ADRC coordinate with public health agencies and community service providers to secure resources, referrals, and cooperation for effective prevention programs?

If applicable, describe how the ADRC will implement an evidence-based program to prevent or delay chronic disease and disability and reduce the need for hospital and long-term care facility admissions.

The ADRC staff will encourage and support healthy living for older people and people with disabilities as part of the holistic approach to serving people. The ADRC will partner with agencies to provide evidence-based programming related to a variety of topics such as disease management, health literacy, and early intervention to meet the needs of our target populations. ADRC staff will be familiar with the evidence-based programs available in the community and how to make an appropriate referral to local agencies.

ADRC staff will recognize potential risk factors impacting customers and identify opportunities for prevention and early intervention. The ADRC will utilize assistive technology in visits with customers as needed. The ADRC will document prevention and early intervention activities. Marketing efforts will be made to promote health, prevention and early intervention services.

The ADRC will use existing services such as the aging nutrition programs to provide nutrition education and other health-related presentations and activities through the Aging services. The ADRC will work in conjunction with the integrated aging programs to offer prevention education and services.

Communication and collaboration among agencies offering prevention and intervention services is important. Coordination of these activities will be enhanced through active participation of the ADRC. The ADRC will educate individuals and groups about the benefits of participating in available wellness opportunities provided by the ADRC and other agencies. Partner agencies are encouraged to offer activities at the ADRC location and provide feedback to the ADRC for purposes of documentation and outcomes assessment.

- 17. Customer Rights, Client Advocates, and ADRC Advocacy**—Describe how the ADRC will provide individual and systems advocacy, including provision of information about client rights, assistance in exercising those rights, and linkages with appropriate advocacy resources. Describe how the ADRC will avoid conflict of interest with MCO(s) and ICA(s) in advocating for individuals who receive services from these agencies.

The ADRC of the Northwoods will inform customers of their rights and responsibilities, including the right to ombudsman services. This information will be provided in ways the customer can understand. Brochures will be made available reviewing customer rights, responsibilities, and how to file a complaint and/or grievance.

The ADRC will provide individuals with information and assistance to access additional support in service system disputes. These referrals may include a variety of options, including disability or elder benefit specialists, Ombudsman services from both the Board on Aging and Long-Term Care and Disability Rights of Wisconsin, the Family Care/IRIS Ombudsman program, Independent Living Resources, peer support services, and others. When customers are engaged in a complaint or grievance process, ADRC staff will work to support the customer while adhering to confidentiality requirements/protocols.

ADRC staff will complete training on the difference between lobbying and education/advocacy. Lobbying is strictly prohibited. The ADRC will engage in community and individual education and advocacy on matters that affect customers of long-term care programs. By utilizing data, the ADRC will be able to identify community and system trends; and significant trends will be brought to the Board, municipality, county, state, elected officials, and/or the public's attention. The ADRC will take steps to educate the public on self-advocacy skills. Any public education by the ADRC is provided in a manner cognizant of the ADRC's need to remain a trusted, confidential, and unbiased resource.

19. Emergency Preparedness and Response—Describe the role and the plan that the ADRC will have in emergency preparedness and response in the service area. Will the ADRC have the equipment necessary to operate remotely or at an alternate work location if the need arises? If the ADRC has a continuity of operations plan, please attach a copy.

As the ADRC of the Northwoods will be positioned within the governance structure of the Forest County Human Service Department, the ADRC will participate in Forest County's Emergency Management and Preparedness Plan. The ADRC will benefit from the direct relationship to Forest County government in many ways, this is particularly evident for emergency preparedness and response. Forest County has resources including personnel, technology, office locations, and other supports the ADRC can access in the case of emergencies. Forest County has an existing emergency management plan. The ADRC will be identified as a component of Forest County government and will be included in emergency management and preparedness planning

- C. Customer Service Process**—Describe or attach a flow chart that diagrams the process by which a customer will obtain services from the ADRC. Include the following, at a minimum: 1) how a customer will receive I&A, options counseling, and benefits counseling as their primary service; and 2) how a customer will access long-term care services via the ADRC. To the extent possible, indicate how many different people the customer will have to talk to and how often the customer will be required to repeat the same information.

The customer service process is described using a “walk-in” example. Telephone contacts would be managed in the same manner. If an individual walks-in to the ADRC, the administrative assistant or receptionist will greet the customer and determine the correct ADRC staff to address the customer’s initial request. Staff available to serve the customer will include ADRC Specialist (I&A services, options counseling), the DBS/EBS or Dementia Care Specialist. The customer will be asked to describe their request one time. All long-term care services can be accessed through the ADRC via an ADRC Specialist. ADRC Specialists serve as a back-up to the administrative assistant if she is absent, or otherwise engaged.

D. Implementation Timeline

Key Tasks / Milestones in ADRC Implementation	Target Date
Appoint ADRC governing board	11/1/2024
ADRC start date	1/1/2025
ADRC director start date	12/1/2024
ADRC telephone system in place	12/1/2024
ADRC website in place	12/1/2024
I&A resources in place	12/1/2024
Client-tracking system in place	12/1/2024
Hire ADRC Specialist staff	1/1/2025
Train ADRC Specialist staff	1/1/2025
Provide EBS services at the ADRC (if applicable)	1/1/2025
Hire DBS	1/1/2025
Train DBS	1/1/2025
Begin offering DBS services	1/1/2025
Required ADRC Plans (for details, see ADRC Organizational Structures (P-03062-12))	
Develop an ADRC quality assurance and improvement plan	1/1/2025
Complete a DCS Work Plan (F-02882)	1/1/2025
Develop ADRC health promotion, prevention, and early intervention plan	1/1/2025
If regional, complete a Regional Management Plan	

- E. ADRC Annual Budget**—Including Annual Budget, Personnel Worksheet, and Subcontract Worksheet. Please complete [Annual Budget, F-00052A](#)

Attachment C: ADRC Budget and Personnel List (Excel spreadsheet provided by DHS)

Budget Narrative

NA