



# **Forest County Aging Plan FY 2025–2027**

## Table of Contents

EXECUTIVE SUMMARY

CONTEXT

DEVELOPMENT OF THE AGING PLAN

- COMMUNITY ENGAGEMENT
- PARTNERS AND RESOURCES
- PUBLIC HEARING

GOALS AND STRATEGIES

PROGRAM ADVANCEMENT

- COMMUNITY ENGAGEMENT AND PUBLIC INPUT
- TITLE III AND TITLE IV COORDINATION
- AGING UNIT INTEGRATION AND COLLABORATION WITH THE LOCAL AGING AND DISABILITY RESOURCE CENTER
- EMERGENCY PREPAREDNESS

ORGANIZATIONAL STRUCTURE AND LEADERSHIP OF THE AGING UNIT

- PRIMARY CONTACT
- ORGANIZATIONAL CHART OF THE AGING UNIT
- AGING UNIT COORDINATION WITH THE AGING AND DISABILITY RESOURCE CENTER
- STATUTORY REQUIREMENTS FOR THE STRUCTURE OF THE AGING UNIT
- POLICY-MAKING BODY
- ADVISORY COMMITTEE

BUDGET SUMMARY

VERIFICATION OF INTENT

APPENDICES

## EXECUTIVE SUMMARY

The ADRC of the Northwoods, an integrated ADRC and aging unit, plays a crucial role in Forest County by aligning with the mission of the Older American Act to “link individuals to needed services.” Through this commitment, the ADRC of the Northwoods empowers individuals to make informed choices by providing streamlined access to services and benefits as outlined in the Aging Plan for 2025-2027. This strategic framework emphasizes the long-term vision of aging and disabled programs. By adhering to the principles of the Older Americans Act and the objectives of the Aging Plan, the ADRC of the Northwoods is dedicated to ensuring that all community members have the resources and support necessary to thrive as they age.

Community engagement plays a vital role in the success of the aging plan by ensuring that programs and initiatives aimed at enhancing the well-being of older adults in Forest County are not only effective but also sustainable in the long run.

As one method of community engagement, Forest County Commission on Aging distributed surveys to gather valuable insight for the Aging Plan. These surveys were disseminated to various services, including meals services, transportation, caretaker programs, evidence-based health programs, and other services. The findings from the surveys revealed key areas within the Aging plan for 2025-2027

- Meal Services: Survey data emphasizes the importance of nutritional support for older adults through meal assistance.
- Diverse Participation: Participants engaged in various services beyond meals showcasing diverse needs like transportation and caregiver programs.
- Support for Caregivers: Recognition of AFCSP and NFCSP underscores the vital role of caregivers in supporting aging individuals.
- Individual Preferences: Responses indicating “other” services stress the need for tailored and personalized support.
- Potential Areas for Growth: Opportunities exist to expand awareness and accessibility of services like Farmers Market Coupons and Stockboxes.

In addition to surveys, stakeholder’s meetings have played a crucial role in shaping our approach with the Aging Plan. The insights gathered from these meeting have further informed our understanding of keys areas that are as follows:

- Comprehensive Approach: Holistic care is crucial to effectively meet the diverse needs of the aging population.
- Interconnected Services: Stakeholders highlight the importance of seamless coordination for comprehensive care.
- Person-Centered Care: Emphasis on unique needs and preference of older adults including personal hygiene and hospice care.

- Advocacy and Policy Implications: Discussion on Medicare, Medicaid, and nursing facilities underscore the need for policy enhancements.
- Addressing Social Isolation: Initiatives like Visiting Angels aim to combat social isolation among older adults.
- COA/ADRC Merger: Transparency and alignment post-merger enhance service delivery and community support.
- Transportation Accomplishments: Notable achievements in transportation services highlight the importance of reliable options.

Moving forward, we are dedicated to enhancing community engagement by actively seeking input from diverse groups, including both of our County's Native American tribes, senior centers, local organizations, and faith-based communities. By incorporating their perspectives and feedback into the Aging Plan, we will implement inclusive decision-making processes that prioritize the well-being, dignity, and independence of all individuals. Our focus in sustainable and collaborative services will ensure the Aging Plan effectively meets the evolving needs of our aging population.

## CONTEXT

Forest County is a rural county that spans 1,014.3 square miles of land with small towns and villages scattered throughout the region and ranking the 12<sup>th</sup> largest county in Wisconsin. Located in the northern region of Wisconsin, "Forest County has a population of 9179 residents as per the 2020 census. The county seat is situated in Crandon. Established in 1885, Forest County takes its name from the forested terrain that defines its boundaries. Known for its extensive array of lakes, forests, and outdoor recreational options, the county offers a haven for outdoor enthusiasts. The Chequamegon-Nicolet National Forest covers a significant portion of the county, adding to its natural appeal. With a predominantly rural landscape, Forest County's economy is centered around forestry and tourism, making them the primary industries in the area.

The demographic data for Forest County paints a clear picture of an aging population facing unique challenges due to limited resources typical of rural areas. \*The county's median age of 48.7, significantly higher than the state average of 40.4, points to an older population profile. Notably, 14.5% of residents are aged 65 to 74, 6.9% are 75 to 84, and 3.0% are 85 years or older, indicating a significant presence of older adults in Forest County.

This demographic data highlights the presence of an aging population facing challenges associated with limited resources often known in rural counties. This profile suggests that the aging population in Forest County may require specialized services and support tailored to their unique needs as they navigate the challenges of aging in a rural setting with limited resources.

^Looking ahead to 2030 and 2040, projections show a substantial increase in the older population, with estimates suggesting 4295 residents aged 55 and older, 3665 residents aged

60 and older, 2925 residents aged 65 and older, and 360 residents aged 85 and above by 2030. By 2040, these numbers are expected to rise to 4400, 3725, 3010, and 490, respectively. This growth underscores the pressing need for expanded and tailored aging services to meet the evolving needs of the aging population in Forest County.

Additionally, the county is home to a diverse group of older residents from various racial and ethnic backgrounds. Among this older population, ^24.8% of males aged 65 and older live alone, while 25.2% of females in the same age group live alone. Data collected in 2022 also shows that there are 2175 residents aged 65 and older that identify as White/Caucasian, 3 as Black/African American, 120 as Native American/Alaska Native, 5 as Asian, and 2 as Hawaiian/Pacific Islander.

The data provided highlights some key challenges faced by the aging population in Forest County. The high percentage of older residents living alone, particularly among females, suggests potential social isolation and lack of support systems for these individuals. This can have negative impacts on their mental and emotional well-being. Additionally, the presence of a diverse group of older residents from various racial and ethnic backgrounds underscores the need for culturally sensitive and inclusive services to address the unique needs and preferences of these individuals. It is important for resources and support systems to be accessible and tailored to the specific cultural backgrounds of the aging population in order to ensure equitable access to services.

Next it is essential to consider the economic challenges faced by older residents. The data on poverty levels among residents aged 65 and older reveals significant disparities: ^9% are living at 100% poverty level, 21.2% are at 150% poverty level, 31.8% at 185% poverty level, 34.4% at 200% poverty level, and 55.9% at 300% poverty level. These figures underscore the financial struggles experienced by a substantial portion of the aging population and highlight the urgent need for targeted intervention and support to address these economic disparities and improve the overall well-being of older adults in the community.

Older adults in Forest County face challenges such as limited access to food pantries, making food insecurity worse. Shopping at major stores requires at least a 30-minute drive, which is difficult for seniors with limited mobility. There is also a lack of transportation for essential errands adding to the difficulties for the aging population in Forest County. It is worth noting that Forest County Potawatomi does offer free transportation within the county, which needs to be advocated more to help address some of these challenges. Hospitals are far away, requiring a 30-minute commute, making it hard for seniors to get healthcare. Finding qualified respite care workers is extremely difficult, making our current caregivers feeling stressed and burned out. Lastly, there are not enough volunteers for critical services, putting a strain on support for older adults in need.

Given the rural nature of Forest County and the limited resources available to seniors, strategic planning and resource allocation are crucial to address the growing demand for aging services.

By leveraging the demographic data and understanding the projected increase in specific age groups within the older population, aging units can develop targeted initiatives that cater to the unique needs of older adults in the county. This proactive approach aims to bridge the resource gap, promote equity, and enhance the quality of life for older residents in Forest County.

\*Population/demographic information is from the United States Census Bureau, 2022 American Community Survey 5 Year Estimates [Forest County, Wisconsin - Census Bureau Profile](#)

^Population/demographic information is from Wisconsin Department of Health Services, January 11, 2024 <https://www.dhs.wisconsin.gov/aging/demographics.htm>

“Population/demographic information is from North Central Wisconsin Regional Planning Commission January 8, 2021 [Forest County | North Central Wisconsin Regional Planning Commission \(ncwrpc.org\)](#)

## **DEVELOPMENT OF THE AGING PLAN**

### **Community Engagement:**

The insights and feedback gathered from distributing surveys to meal sites, stakeholder meetings, Stockbox distributions, and committee meetings, as well as the participation of a diverse group of stakeholders have played a significant role in shaping the goals and strategies outlined in the aging plan. By including county employees, committee members, meal site managers, Forest County Potawatomi and Sokaogon/Chippewa staff, ADRC representatives, nursing home employees and aging unit staff in the engagement process, the aging unit was able to capture a wide range of perspectives and priorities related to senior services and care.

The data collected from these engagement activities will be utilized to inform the development of specific goals and initiatives within the aging plan. By analyzing the feedback received from the surveys and stakeholder’s meetings, the aging unit can identify key priorities, challenges, and opportunities that need to be addressed to better meet the needs of older adults in Forest County. This data-driven approach ensures that the goals and strategies outlined in the plan are based on the voices and experiences of the community members and stakeholders who are directly impacted by senior services.

Moving forward, the results of the community engagement activities will continue to guide the implementation and evaluation of the aging plan. By integrating the insights and perspectives gathered from these engagement efforts, the aging unit can ensure that its programs and services are relevant and aligned with the needs of the aging population of Forest County. This collaborative approach to community engagement will enable the aging unit to develop goals and strategies that are truly reflective of the community’s values, preferences, and priorities.

*Please see Appendix A for Community Engagement Reports.*

**Public Hearings:**

## Goals Aging Plans for 2025–2027

### Goal Writing for Title III-B Supportive Services

**Older Americans Act program area** (Select a program area if applicable.)

- ☒ Title III-B Supportive Services
- ☐ Title III-C1 and/or III-C2 Nutrition Program
- ☐ Title III-D Evidence-Based Health Promotion
- ☐ Title III-E Caregiver Supports

**Aging Network value** (Select a value if applicable.)

- ☐ Person centeredness
- ☐ Equity
- ☒ Advocacy

**Goal statement:** *To increase advocacy for elderly and disabled transportation, as recommended in the transportation assessment, by working with stakeholders to improve accessibility and mobility options for seniors and individuals with disabilities.*

**Plan or strategy:**

- *Use the transportation assessment findings to guide advocacy efforts for elderly and disabled transportation.*
- *Collaborate with stakeholders to develop targeted advocacy strategies based on the assessment results.*
- *Advocate for policy changes and resources to improve transportation access, referencing the assessment data to support the advocacy efforts. This shall be done through town hall meetings, county government officials, and state-level advocacy days.*
- *Engage with local media to raise awareness of transportation challenges for seniors and individuals with disabilities.*
- *Host educational events with community organizations.*
- *Use social media and online campaigns to expand advocacy reach and engage community support.*



## **Documenting efforts and tools:**

### **Documenting how much has been done:**

- *Keep a detailed record of activities conducted, such as the number of advocacy events, workshops, and meetings held.*
- *Measure community engagement through metrics such as event attendances, social media reach, and online campaign interactions.*
- *Collect feedback and testimonials from seniors, individuals with disabilities, caregivers, and other community members to assess the effectiveness of advocacy efforts in improving transportation access.*
- *Periodically review and analyze the data collected to evaluate the impact of advocacy strategies and identify areas for further improvement.*
- **Documenting how well it has been done:**
- *Evaluate outcomes based on goals.*
- *Collect feedback from stakeholders.*
- *Monitor performance indicators.*
- *Compare results to initial assessment.*

### **Assessing whether anyone is better off:**

- *Gather feedback through surveys or interviews.*
- *Track indicators like improved access and mobility.*
- *Use individual stories and data to show impact.*
- *Measure benefits, such as increased service usage.*
- *Review feedback to assess well-being outcomes.*

### **OPTIONAL: Notes on considerations for framing goals**

1. Why are we choosing this thing to focus our efforts on?
2. Why do we believe this particular effort will make things better?
3. How do we think this leads to people being better off?
4. How will we know that when we're done with this effort?
5. How will we know whether anyone is better off because of this effort?

### Goal Writing for Title III-C1 and/or III-C2 Nutrition Program

<b>Older Americans Act program area</b> (Select a program area if applicable.)  <input type="checkbox"/> Title III-B Supportive Services <input checked="" type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program  <input type="checkbox"/> Title III-D Evidence-Based Health Promotion  <input type="checkbox"/> Title III-E Caregiver Supports
<b>Aging Network value</b> (Select a value if applicable.)  <input checked="" type="checkbox"/> Person centeredness  <input type="checkbox"/> Equity  <input type="checkbox"/> Advocacy
<b>Goal statement:</b> <i>Maintain person-centered nutrition programs for seniors with a focus on individual preferences, community engagement, and a supportive environment, while upholding sustainability to ensure the continued provision of quality care and services.</i>
<b>Plan or strategy:</b> <ul style="list-style-type: none"><li>• <i>Develop individualized nutrition plans based on seniors' preferences, dietary requirements, and cultural preferences.</i></li><li>• <i>Implement cost-effective strategies like portion control, donation programs, volunteer support, meal distribution and route optimization, meal planning guidelines on estimating meal quantities based on pre orders, and investment in durable and reusable containers.</i></li><li>• <i>Regularly seek feedback from seniors, caregivers, and staff to assess satisfaction levels, identify areas for improvement, and ensure that services remain person-centered and sustainable.</i></li><li>• <i>Provide training to staff and volunteers on person-centered care principles, cultural sensitivity, and sustainable practices to ensure consistent delivery of high quality and respectful services.</i></li><li>• <i>Explore alternative funding sources, such as grants, donations, or community partnerships, to diversify revenue streams and ensure the long-term financial sustainability of the nutrition programs.</i></li></ul>

**Documenting efforts and tools:**

**Documenting how much has been done:**

- *Keep track of the number of seniors served and sustainable practices used.*
- *Get feedback from seniors and staff on care and sustainability efforts.*
- *Record activities promoting individual preference and practices.*
- *Keep a log of seniors receiving personalized nutrition plans and meal options.*

**Documenting how well it has been done:**

- *Evaluate outcomes through surveys and health assessments.*
- *Measure performance indicators like client satisfaction and cost savings.*
- *Seek feedback for continuous improvement.*
- *Report findings and achievements to stakeholders.*

**Assessing whether anyone is better off:**

- *Measure how individual needs are met in terms of health and well-being.*
- *Evaluate the programs' practices and cost-effectiveness.*
- *Monitor satisfaction with personalized care efforts through surveys and individual conversations.*

**OPTIONAL: Notes on considerations for framing goals**

6. Why are we choosing this thing to focus our efforts on?
7. Why do we believe this particular effort will make things better?
8. How do we think this leads to people being better off?
9. How will we know that when we're done with this effort?
10. How will we know whether anyone is better off because of this effort?

**Goal for Title III-D Evidence-Based Health Promotion**

**Older Americans Act program area** (Select a program area if applicable.)

☐ Title III-B Supportive Services

☐ Title III-C1 and/or III-C2 Nutrition Program

☒ Title III-D Evidence-Based Health Promotion

☐ Title III-E Caregiver Supports

**Aging Network value** (Select a value if applicable.)

☒ Person centeredness

☒ Equity

☒ Advocacy

**Goal statement:** *Our objective is to bring StrongBodies and Bingocize programs to neighboring communities, providing personalized and engaging exercise opportunities that prioritize individual well-being and empowerment for older adults.*

**Plan or strategy:**

- *Collaborate with community centers, senior organizations, and local businesses to host program sessions in different areas of the county.*
- *Host events and demonstrations to showcase the programs and encourage participation in differing neighborhoods.*
- *Develop a virtual program. Then allow participants to choose between in-person or virtual program options based on their comfort and accessibility.*
- *Involve older adults in designing community events and outreach efforts.*
- *Offer flexible participation options, such as varied class times or location, to accommodate the diverse schedules and preferences of older adults in each community.*
- *Have our volunteers' leaders for Bingocize and StrongBodies visit Forest County Potawatomi and Sokaogon/Chippewa to interact with community members, showcase the programs, and possibly establish separate classes within tribal communities.*

**Documenting efforts and tools:**

**Documenting how much has been done:**

- *Records will be kept of outreach efforts, programs sessions, and community feedback.*
- *Collect feedback from participants.*

- *Monitor metrics such as the number of programs launched and community engagement levels.*

**Documenting how well it has been done:**

- *Establish performance indicators such as participation rates, community engagement levels, participant satisfaction, and health outcomes to measure success.*
- *Gather testimonials and success stories from participants, community members, and stakeholders to showcase the impact of the programs.*
- *Analyze data collected from surveys, feedback forms, and program evaluations to identify strengths, weaknesses, and areas for improvement.*
- *Compare the actual outcome of the program expansion against the initially set goal for each community.*

**Assessing whether anyone is better off:**

- *Conduct assessments before and after participation and expansion.*
- *Track individual progress and health metrics.*
- *Gather feedback and success stories.*
- *Analyze data to measure positive outcomes.*

**OPTIONAL: Notes on considerations for framing goals**

11. Why are we choosing this thing to focus our efforts on?
12. Why do we believe this particular effort will make things better?
13. How do we think this leads to people being better off?
14. How will we know that when we're done with this effort?
15. How will we know whether anyone is better off because of this effort?

**Goal for Title III-E Caregiver Supports**

**Older Americans Act program area** (Select a program area if applicable.)

☐ Title III-B Supportive Services

☐ Title III-C1 and/or III-C2 Nutrition Program

☐ Title III-D Evidence-Based Health Promotion

☒ Title III-E Caregiver Supports

**Aging Network value** (Select a value if applicable.)

☐ Person centeredness

☐ Equity

☒ Advocacy

*Goal statement: Recruit and train caregivers to participate in the Title III-E program, advocating for the value and dignity of Forest County's senior population on behalf of the ADRC of the Northwoods.*

**Plan or strategy:**

- *Utilize a mix of traditional and digital channels, including social media platforms, community bulletin boards, local newspapers, and relevant websites to promote caregiver opportunities.*
- *ADRC of the Northwoods shall collaborate with other community partners to broaden the recruitment reach.*
- *Leverage existing networks and relationships to identify potential caregivers and encourage referrals from trusted sources.*
- *Create informative recruitment materials that highlight the benefits of becoming a caregiver, such as flexible schedules, training opportunities, and the rewarding nature of caregiving.*
- *Organize recruitment events such as job fairs or caregiver-specific workshops in collaboration with local partners to showcase the caregiving opportunities within the program.*

**Documenting efforts and tools:**

**Documenting how much has been done:**

- *ADRC of the Northwoods will keep detailed records of the recruitment strategies implemented, including the timeline of activities, outreach methods used, and outcomes achieved. Any modifications made to the recruitment plans will be noted based on feedback or performance data.*
- *ADRC of the Northwoods shall conduct ongoing meetings with Nicolet Staffing as we do have a contract with them to handle the caretaker program fiscally. This collaboration will assist in the financial expertise efficiency, strategic planning, and resource optimization.*

Documenting **how well** it has been done:

- Track the number of caregivers recruited through traditional and digital channels to see which methods are the most effective.
- Evaluate the feedback from recruitment events to understand how well they attracted potential caregivers.
- Collaboration with our team members and other networks to conduct joint evaluations of caregiver recruitment. We will share best practices and identify opportunities for collaboration.
- Organize a focus group with seniors, potential caregivers, and community members to gather perspectives on the effectiveness of the caregiver recruitment strategies.

Assessing whether anyone is **better off**:

- Conduct surveys and interviews with caregivers.
- Conduct meetings with Nicolet Staffing.
- Gather feedback from stakeholders, including seniors, caregivers, and healthcare professionals.

**OPTIONAL: Notes on considerations for framing goals**

16. Why are we choosing this thing to focus our efforts on?
17. Why do we believe this particular effort will make things better?

18. How do we think this leads to people being better off?
19. How will we know that when we're done with this effort?
20. How will we know whether anyone is better off because of this effort?

### Goal for Title III-E Caregiver Supports

**Older Americans Act program area** (Select a program area if applicable.)

- ☐ Title III-B Supportive Services
- ☐ Title III-C1 and/or III-C2 Nutrition Program
- ☐ Title III-D Evidence-Based Health Promotion
- ☒ Title III-E Caregiver Supports

**Aging Network value** (Select a value if applicable.)

- ☐ Person centeredness
- ☒ Equity
- ☐ Advocacy

*Goal statement: Provide respite care services for caregivers, particularly those not covered by Medicare and Medicaid, to alleviate the shortage of resources in this area and ensure equitable access to support for all caregivers.*

**Plan or strategy:**

- *Conduct an assessment to identify disparities in access to respite care services among caregivers, particularly those not covered by Medicare or Medicaid.*
- *Implement targeted programs to Forest County Potawatomi and Sokaogon/Chippewa and inclusive to meet the diverse needs of caregivers from various backgrounds.*
- *Implement outreach programs to reach underserved communities, such as Alvin, and provide information about available respite care services for caregivers without insurance coverage.*



- *Recruit and train volunteers from the community to provide respite care services to caregivers in need.*
- *Seek out grants and funding opportunities that support respite care services.*
- *Partner with local community organizations, nonprofits, healthcare providers and government agencies to pool resources, share expertise, and establish a collaborative network to deliver respite services in the county.*

**Documenting efforts and tools:**

**Documenting how much has been done:**

- *Collect feedback on satisfaction levels from caregivers, including those of different cultures, and socioeconomic statuses.*
- *Engage stakeholders in ongoing discussions and actions to promote equity and inclusivity in caregiver support.*
- *Track the demographics and backgrounds of caregivers utilizing the services.*

**Documenting how well it has been done:**

- *Document and share case studies or success stories of caregivers who have benefited from the respite services. Incorporate feedback on fairness and inclusivity.*
- *Track utilization rates of services.*

**Assessing whether anyone is better off:**

- *Conduct pre- and post- assessments of caregivers' well-being, stress levels, and overall quality of life before they start utilizing their respite services and after they have been receiving the services.*
- *Conduct follow-up assessments with caregivers at regular intervals to track their progress. Make sure that these services are effectively meeting the diverse needs of all caregivers.*

**OPTIONAL: Notes on considerations for framing goals**

21. Why are we choosing this thing to focus our efforts on?
22. Why do we believe this particular effort will make things better?

23. How do we think this leads to people being better off?
24. How will we know that when we're done with this effort?
25. How will we know whether anyone is better off because of this effort?

## **PROGRAM ADVANCEMENT:**

### **Community Engagement and Public Input:**

As part of the aging plan for Title III, a collaborative event will be hosted by the ADRC of the Northwoods, an integrated ADRC and Aging Unit, to address community questions and concerns. This event aims to provide a platform for older adults, caregivers, and stakeholders to share feedback, ask questions, and express concerns about aging services and programs and its merger. We will have discussions and presentations to engage everyone and address their needs. By working together as a unified department, we can make sure that we cover all of the community's needs and improve aging services as the two departments merge together.

### **Title III and Title VI Coordination:**

The ADRC of the Northwoods, an integrated ADRC and Aging Unit, will schedule quarterly meetings with Forest County Potawatomi and Sokaogon/Chippewa tribes in order to establish an enhanced collaboration with Title VI in the near future, integrating Native American perspective and services. This consolidation will bring together the expertise, resources, and culturally relevant services of both units to better serve the needs of older adults in the community, including Native American elders. By joining forces, the unified aging units will be better positioned to coordinate and deliver comprehensive care, support, and programs that respect and honor Native American traditions and values. Looking ahead, this partnership will create an integrated approach to aging services that celebrates the Native American heritage.

An integrated meeting to discuss Title III and Title VI coordination was planned and attended on August 5<sup>th</sup>, 2024 with Forest County Commission on Aging, ADRC of the Northwoods, and Forest County Potawatomi. Sokaogon/Chippewa had been invited but was unable to attend. Several key issues were identified.

Forest County Potawatomi predominantly focuses their services on their own elders, resulting in limited inclusivity in external services. Despite this, opportunities for collaboration were discussed, including hosting Bingocize with Forest County's leader leading the classes. Forest County Potawatomi expressed their willingness to help promote Forest County's route transportation program and medical transportation services beyond the county's borders. In addition, plans were made to introduce the ADRC's initiatives such as memory cafes, the Bridges and the Buddies program to Forest County Potawatomi and Sokaogon/Chippewa.

Financially, Forest County Potawatomi benefits from having a grant writing team that collaborates with various grant finders, a resource that the county currently lacks. While collaboration on meal services may pose a challenge due to Forest County Potawatomi's

existing contracts with a service provider, stakeholders unanimously agreed on the importance of holding regular quarterly meetings to enhance transparency and understanding of the services offered by each entity. As a result, the next meeting is scheduled within a month to address forthcoming changes within the county structure and to further improve transparency and collaboration among all stakeholders.

In conclusion, the stakeholders meeting involving the Aging Department, ADRC and Forest County Potawatomi highlighted key issues and opportunities for collaboration in promoting services for the elderly. Despite challenges such as limited inclusivity and potential hurdles in meal service collaboration, the shared commitment to transparency and mutual understanding bodes well for future partnerships. The forthcoming quarterly meetings and the planned initiative to introduce Forest County programs to the tribal community signifies a positive step towards fostering inclusive, supportive, and cooperative relationships that benefit all parties involved in elder care services.

#### **Aging Unit Integration and Collaboration with the Local Aging and Disability Resource Center:**

New organizational charts will be created to outline the structure post-merger, and a plan will be developed to transition employees from both aging units into their new roles within the merged entity. County Board Supervisors and key players from both entities will oversee training, job realignment strategies, and communication plans to ensure employee engagement and retention. By initiating early discussions and establishing a collaborative foundation, the aging units focus is to enhance the quality and scope of services provided to older adults and individuals with disabilities.

The merger of Forest County Commission on Aging and Aging and Disability Resource Center is scheduled to take place by January 1, 2025. To ensure a smooth transition and alignment of both departments, proactive measures will be implemented, including organizing joint planning meetings with key stakeholders to identify collaboration opportunities, establish effective communication channels, and develop a shared vision for integrated services. For transparency, purposes, the merged aging units will be hosting a meeting with the senior population to openly discuss the newly merged facility, address any concerns, and provide information on the benefits they can expect, such as increased access to healthcare services, expanded outreach activities, and the enhancement of social support programs. In addition to the meeting, an open house will be held to give the senior population an opportunity to familiarize themselves with the new organizational structure of the merged facility and meet key staff members.

#### **Emergency Preparedness:**

The Forest County Commission on Aging has been actively engaging with the County's Emergency Management Director through collaborated meetings. Notably, on December 19, 2023, we held a safety training day featuring the Emergency Management Director and the Dementia Care Specialist from the Aging and Disability Resource Center. This session focused

on discussing resources, funding, and "Files for Life"—a program designed to help emergency responders access vital information quickly.

Additionally, in September 2023, we developed a Memorandum of Understanding to ensure that transportation services are available for individuals in need during emergencies. Currently, the Forest County Health Department and the Commission on Aging Department are collaborating to distribute COVID-19 tests to seniors throughout the county.

As a part of 2025-2027 Aging Plan, Forest County Health Department has implemented a mobile trailer to provide convenient access to immunizations, vaccinations, and crisis interventions for the citizens of Forest County. This initiative aims to ensure that all residents, especially the aging populations, have easy access to essential healthcare services and resources, promoting overall well-being and safety within the community. The mobile trailer serves as a valuable resource in times of need, offering crucial support and assistance to residents during emergency situations and health crises.

Looking ahead, the ADRC of the Northwoods, an integrated ADRC and Aging Unit, are committed to proactive measures. This includes ongoing training, drills, and collaboration with our partners to ensure that we are prepared and resilient. We are dedicated to applying the lessons we have learned and strengthening our partnerships to improve our emergency response efforts.

#### ORGANIZATIONAL STRUCTURE AND LEADERSHP OF THE AGING UNIT

##### **Primary Contact to Respond to Questions About the Aging Plan**

**Name:** Kathy Fohrman

**Title:** Director

**County:** Forest County

**Organizational Name:** Commission on Aging

**Address:** 200 E. Madison Street

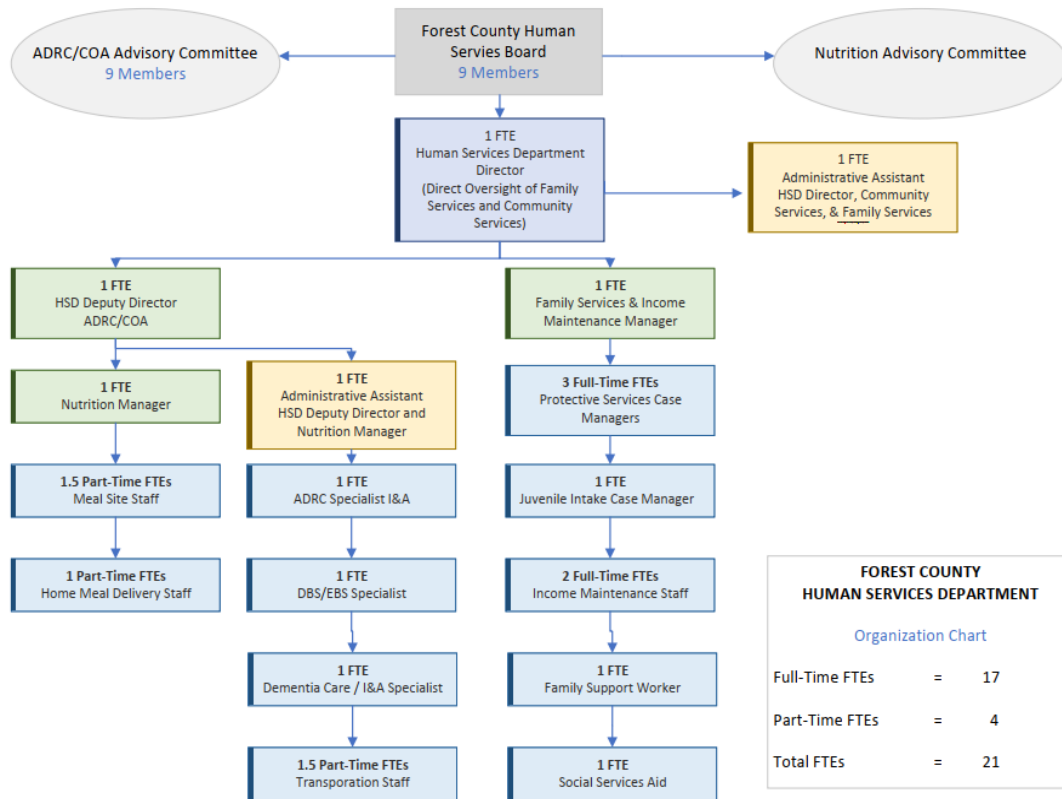
**City:** Crandon

**State:** WI

**Zip Code:** 54520

**Email Address:** [officeonaging@co.forest.wi.us](mailto:officeonaging@co.forest.wi.us) **Phone:** 715-478-3256

## Organizational Chart of the Aging Unit:



## **Aging Unit Coordination with Aging and Disability Resource Center:**

### **Pre-Merger Phase:**

In the pre-merger phase, Forest County Commission on Aging and Aging and Disability Resource Center will align with the newly established Transition Committee to facilitate the integration of both entities. This committee, comprised of board members and staff will assess strengths, weaknesses, and opportunities to guide the merger process. Board members on the committee will provide direction, oversee the transition, and ensure stakeholder interests are considered. Staff members will actively participate in cross-functional teams, share expertise, and prepare for the integration of services. By leveraging the Transition Committee, the pre-merger phase will benefit from established processes, communication channels, and collaboration. This shall set the stage for a smooth and successful merger.

### **Post-Merger Phase:**

In the post-merger phase of the newly developed entity, the focus will shift towards integrating the functions of the newly formed entity into a unified organization. Board members and staff from both entities will work together to streamline process, clarify roles and responsibilities, and ensure a smooth transition to the new organizational structure. As the integration progresses, the need for the transition committee will diminish as the functions it once served become integrated into the day-to-day operations of the merged entity. Board members and staff will continue to collaborate closely to address any remaining post-merger issues, optimize service delivery, and align the organization with its strategic goals.

### **Statutory Requirements for the Structure of the Aging Unit:**

This section refers to requirements in [Chapter 46.82 of the Wisconsin Statutes](#). Consider if the aging unit is in compliance with the law. If the aging unit is integrated with the local ADRC, the requirements of [Chapter 46.82](#) still apply.

State law does not permit a waiver of the requirements in this section. If a real or potential violation of the requirements of [Chapter 46.82](#) exists, contact GWAAR for assistance in arranging a corrective action plan. Failure to do so could result in non-approval of the plan and suspension of funding.

<b>Organizational structure:</b> Choose the option that represents the organizational structure of the aging unit.	<b>Check one</b>
(1) An agency of county/tribal government with the primary purpose of administering programs for older individuals of the county/tribe.	<input type="checkbox"/>
(2) A unit, within a county/tribal department with the primary purpose of administering programs for older individuals of the county/tribe.	<input checked="" type="checkbox"/>
(3) A private, nonprofit corporation, as defined in s. 181.0103 (17).	<input type="checkbox"/>
<b>Composition of the policy-making body:</b> Choose the option that represents the composition of the policy-making body.	<b>Check one</b>
For an aging unit that is described in (1) or (2) above, organized as a committee of the county board of supervisors/tribal council, composed of supervisors and, advised by an advisory committee, appointed by the county board/tribal council. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.	<input type="checkbox"/>
For an aging unit that is described in (1) or (2) above, composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	<input checked="" type="checkbox"/>
For an aging unit that is described in (3) above, the board of directors of the private, nonprofit corporation. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.	<input type="checkbox"/>
<b>Full-time aging director:</b> The law requires that the aging unit have a full-time aging director.	<b>Check one</b>
The aging unit has a full-time aging director as required by law.	<input checked="" type="checkbox"/>
The aging unit does not have a full-time aging director as required by law.	<input type="checkbox"/>

### **Policy-Making Body**

The policy-making body, also called the Commission on Aging, must approve the aging unit's plan. Evidence of review and approval of the draft and final version of the aging plan must be included as part of the plan. Attach evidence of this required involvement as an appendix to the aging plan. This may include descriptions of events, activities, or notes from meetings that provide evidence of involvement.

The Commission is the policy making entity for aging services (46.82 (4) (a) (1)) and an aging advisory committee is not the commission. There are term limits for the membership of the policy-making body.

List the official name of the policy-making body and chairperson in this section of the aging plan.

Official Name of the Policy-Making Body: Forest County Commission on Aging

Chairperson of the Policy-Making Body: Mike Miller

**Advisory Committee:**

An advisory committee, sometimes referred to as the advisory council, is required if the policy-making body does not follow the Wisconsin Elders Act requirements for elected officials, older adults, and terms, or if the policy-making body is a committee of the County Board (46.82 (4) (b) (1)).

When an aging unit has both an advisory committee and a policy-making body, a key role of the advisory committee is to advise the policy-making body in the development of the aging plan and to advocate for older adults. Attach evidence of this involvement as an appendix to the aging plan. This may include descriptions of events, activities, or notes from meetings that provide evidence of involvement.

Chapter 46.82 (4) (b) (1) of the Wisconsin Statutes requires that the membership of the aging advisory committee (where applicable) must consist of at least 50% older people, and individuals who are elected to office may not constitute 50% or more of the membership. There are no term limit requirements for the membership of advisory committees.

Some aging units have combined their aging advisory committees and ADRC boards. This is acceptable if the county follows the membership requirements of the advisory committee 46.82(4) (b) (1) and the ADRC scope of services. Seek additional guidance from GWAAR regarding combined ADRC boards and advisory committees if desired.

The nutrition advisory council, which is a requirement of the OAA for the Elder Nutrition Program, is a separate body from the advisory committee required by Chapter 46.82.

List the official name of the advisory committee and chairperson in this section of the aging plan.

Official name of the advisory committee: \_\_\_\_\_

Chairperson of the advisory committee: \_\_\_\_\_

**BUDGET SUMMARY:**

Aging units are required to submit an annual budget to GWAAR using a budget worksheet approved by the Bureau of Aging and Disability Resources. Final budgets for CY 2025 are to be submitted with the aging plan on November 8, 2024. Due dates for annual aging unit budgets



for CY 2026 and 2027 will be determined in cooperation with GWAAR and BADR and communicated with aging units when the dates are set.

The budget worksheet is separate from the budget summary section of the aging plan. Aging units are required to copy the budget summary table from the budget worksheet and insert it into the aging plan. The budget summary must be clearly posted on a public webpage for review following final approval by the tribal governing body.

In addition to the budget summary table, aging units may choose to add pie charts or graphs to highlight how funds are spent for services and supports for tribal elders and caregivers. This is an opportunity to show the public how Title III funds are spent including the proportions of local, state, and federal dollars.

#### **VERIFICATION OF INTENT**

The purpose of the verification of intent is to show that county government has approved the plan. It further signifies the commitment of county government to carry out the plan. Copies of approval documents must be available in the offices of the aging unit. Use the template provided below and insert a signed copy of it in the aging plan.

## **Assurances of Compliance with Federal and State Laws and Regulations**

The assurances below often refer to requirements of area agencies on aging (AAAs) and is absent of references to aging units. Wisconsin's structure of AAAs and local county and tribal aging units differs from other states but is recognized in state statute 46.82 and by the federal Administration for Community Living. Therefore, AAAs and county and tribal aging units are required to provide assurances of compliance with federal and state laws in the delivery of Older Americans Act programs and supports.

The structure of AAAs in Wisconsin are as follows:

1. An agency designated as the AAA must subcontract with counties, tribal nations, or providers to carry out Older Americans Act programs. The AAA, in a binding contract with the state, and counties and tribal nations, in a binding contract with the AAA, must support and comply with requirements under the Older Americans Act (Public Law 89-73) [As Amended Through P.L. 116-131, Enacted March 25, 2020] Reference: 45 CFR Part 1321 – Grants to State and Community Programs on Aging as updated in March 2024.
2. A county designated as the AAA must designate a department of local government as the aging unit. The AAA and the county aging unit are bound by a binding contract with the state and must support and comply with requirements under the Older Americans Act (Public Law 89-73) [As Amended Through P.L. 116-131, Enacted March 25, 2020] Reference: 45 CFR Part 1321 – Grants to State and Community Programs on Aging as updated in March 2024.

AAAs and aging units are subject to the requirements in the Wisconsin Elders Act 235, often referenced in [Chapter 46.82](#) of Wisconsin Statutes. Please note: Chapter 46.82 has been updated to reflect changes in programs originally referenced in the Act when passed in 1991.

A signed copy of this statement must accompany the plan. The plan must be signed by the person with the designated authority to enter into a legally binding contract. Most often this is the county board chairperson or tribal governing board chairperson. The assurances agreed to by this signature page must accompany the plan when submitted to the AAA or Bureau of Aging and Disability Resources.

The assurances need not be included with copies of the plan distributed to the public.

Use the template provided below and include as an appendix to the aging plan.

## Compliance with Federal and State Laws and Regulations for 2025–2027

On behalf of the county or tribal nation, we certify

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(Give the full name of the county or tribal aging unit)

has reviewed the appendix to the county or tribal aging plan entitled Assurances of Compliance with Federal and State Laws and Regulations for 2025–2027. We assure that the activities identified in this plan will be carried out to the best of the ability of the county or tribal nation in compliance with the federal and state laws and regulations listed in the Assurances of Compliance with Federal and State Laws and Regulations for 2025–2027.

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Signature and Title of the Chairperson of the Commission on Aging

Date

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Signature and Title of the Authorized County or Tribal Board Representative

Date

The applicant certifies compliance with the following regulations:

1. Legal Authority of the Applicant

- The applicant must possess legal authority to apply for Older Americans Act grant funds.
- A resolution, motion or similar action must be duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein.
- This resolution, motion or similar action must direct and authorize the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.

2. Outreach, Training, Coordination & Public Information

As required by the Bureau of Aging and Disability Resources, designated AAAs and aging units must assure:

- Outreach activities are conducted to ensure the participation of eligible older persons in all funded services.
- Each service provider trains and uses older persons and other volunteers and paid personnel.
- Each service provider coordinates with other service providers, including senior centers and the nutrition program, in the planning and service area.
- Public information activities are conducted to ensure the participation of eligible older persons in all funded services.

3. Preference for Older People with Greatest Social and Economic Need

All service providers follow priorities set by the Bureau of Aging and Disability Resources for serving older people with greatest social and economic need.

4. Advisory Role to Service Providers of Older Persons

Each service provider utilizes procedures for obtaining the views of participants about the services they receive.

5. Contributions for Services

- Agencies providing services supported with Older Americans Act and state aging funds shall give older adults the opportunity to voluntarily contribute to the costs of services consistent with the Older Americans Act regulations.
- Each older recipient shall determine what he/she is able to contribute toward the cost of the service. No older adult shall be denied a service because he/she will not or cannot contribute to the cost of such service.

- The methods of receiving contributions from individuals by the agencies providing services under the county or tribal plan shall be handled in a manner that assures the confidentiality of the individual's contributions.
- Each service provider establishes appropriate procedures to safeguard and account for all contributions.
- Each service provider considers and reports the contributions made by older people as program income. All program income must be used to expand the size or scope of the funded program that generated the income. Nutrition service providers must use all contributions to expand the nutrition services. Program income must be spent within the contract period that it is generated.

## 6. Confidentiality

- No information about or obtained from an individual and in possession of an agency providing services to such individual under the county, tribal or area plan, shall be disclosed in a form identifiable with the individual, unless the individual provides his/her written informed consent to such disclosure.
- Lists of older adults compiled in establishing and maintaining information and referral sources shall be used solely for the purpose of providing social services and only with the informed consent of each person on the list.
- In order that the privacy of each participant in aging programs is in no way abridged, the confidentiality of all participant data gathered and maintained by the state agency, the AAA, the county or tribal aging unit, and any other agency, organization, or individual providing services under the state, area, county, or tribal plan, shall be safeguarded by specific policies.
- Each participant from whom personal information is obtained shall be made aware of his or her rights to:
  - (a) Have full access to any information about one's self which is being kept on file;
  - (b) Be informed about the uses made of the information about him or her, including the identity of all persons and agencies involved and any known consequences for providing such data; and,
  - (c) Be able to contest the accuracy, completeness, pertinence, and necessity of information being retained about one's self and be assured that such information, when incorrect, will be corrected or amended on request.
- All information gathered and maintained on participants under the area, county or tribal plan shall be accurate, complete, and timely and shall be legitimately necessary for determining an individual's need and/or eligibility for services and other benefits.
- No information about, or obtained from, an individual participant shall be disclosed in any form identifiable with the individual to any person outside the agency or program involved without the informed consent of the participant or his/her legal representative, except:
  - (a) By court order; or,
  - (b) When securing client-requested services, benefits, or rights.

- The lists of older persons receiving services under any programs funded through the state agency shall be used solely for the purpose of providing said services and can only be released with the informed consent of each individual on the list.
- All paid and volunteer staff members providing services or conducting other activities under the area plan and aging unit shall be informed of and agree to:
  - (a) Their responsibility to maintain the confidentiality of any client-related information learned through the execution of their duties. Such information shall not be discussed except in a professional setting as required for the delivery of service or the conduct of other essential activities under the area plan; and,
  - (b) All policies and procedures adopted by the state and AAA to safeguard confidentiality of participant information, including those delineated in these rules.
- Appropriate precautions shall be taken to protect the safety of all files and records in any format or location which contain sensitive information on individuals receiving services under the state, area plan, and aging unit. This includes but is not limited to assuring registration forms containing personal information are stored in a secure, locked drawer when not in use.

## 7. Records and Reports

- The applicant shall keep records and make reports in such form and requiring such information as may be required by the Bureau of Aging and Disability Resources and in accordance with guidelines issued solely by the Bureau of Aging and Disability Resources and the Administration on Aging.
- The applicant shall maintain accounts and documents which will enable an accurate review to be made at any time of the status of all funds which it has been granted by the Bureau of Aging and Disability Resources through its designated AAA. This includes both the disposition of all monies received and the nature of all charges claimed against such funds.

## 8. Licensure and Standards Requirements

- The applicant shall assure that where state or local public jurisdiction requires licensure for the provision of services, agencies providing services under the county, tribal, or area plan shall be licensed or shall meet the requirements for licensure.
- The applicant is cognizant of and must agree to operate the program fully in conformance with all applicable state and local standards, including the fire, health, safety and sanitation standards, prescribed in law or regulation.

## 9. Civil Rights

- The applicant shall comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with that act, no person shall on the basis of race, color, or national origin, be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any program or activity under this plan.

- All grants, sub-grants, contracts or other agents receiving funds under this plan are subject to compliance with the regulation stated in 9 above.
- The applicant shall develop and continue to maintain written procedures which specify how the agency will conduct the activities under its plan to assure compliance with Title VI of the Civil Rights Act.
- The applicant shall comply with Title VI of the Civil Rights Act (42 USC 2000d) prohibiting employment discrimination where (1) the primary purpose of a grant is to provide employment or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the service funded by the grant.
- All recipients of funds through the county, tribal, or area plan shall operate each program or activity so that, when viewed in its entirety, the program or activity is accessible to and usable by handicapped adults as required in the Architectural Barriers Act of 1968.

#### 10. Uniform Relocation Assistance and Real Property Acquisition Act of 1970

The applicant shall comply with requirements of the provisions of the Uniform Relocation and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of federal and federally assisted programs.

#### 11. Political Activity of Employees

The applicant shall comply with the provisions of the Hatch Act (5 U.S.C. Sections 7321-7326), which limit the political activity of employees who work in federally funded programs. [Information about the Hatch Act is available from the U.S. Office of Special Counsel at <http://www.osc.gov/>]

#### 12. Fair Labor Standards Act

The applicant shall comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (Title 29, United States Code, Section 201-219), as they apply to hospital and educational institution employees of state and local governments.

#### 13. Private Gain

The applicant shall establish safeguards to prohibit employees from using their positions for a purpose that is or appears to be motivated by a desire for private gain for themselves or others (particularly those with whom they have family, business or other ties).

#### 14. Assessment and Examination of Records

- The applicant shall give the federal agencies, state agencies, and the Bureau of Aging and Disability Resources' authorized AAAs access to and the right to examine all records, books, papers or documents related to the grant.
- The applicant must agree to cooperate and assist in any efforts undertaken by the grantor agency, or the Administration on Aging, to evaluate the effectiveness, feasibility, and costs of the project.
- The applicant must agree to conduct regular on-site assessments of each service provider receiving funds through a contract with the applicant under the county or tribal plan.

#### 15. Maintenance of Non-Federal Funding

- The applicant assures that the aging unit, and each service provider, shall not use Older Americans Act or state aging funds to supplant other federal, state or local funds.
- The applicant must assure that each service provider must continue or initiate efforts to obtain funds from private sources and other public organizations for each service funded under the county or tribal plan.

#### 16. Regulations of Grantor Agency

The applicant shall comply with all requirements imposed by the Department of Health Services, Division of Public Health, Bureau of Aging and Disability Resources concerning special requirements of federal and state law, program and fiscal requirements, and other administrative requirements.

#### 17. Older Americans Act

Aging units, through binding agreement/contract with an AAA must support and comply with following requirements under the Older Americans Act (Public Law 89-73) [As Amended Through P.L. 116-131, Enacted March 25, 2020]  
Reference: 45 CFR Part 1321 – Grants to State and Community Programs on Aging as updated in March 2024.

##### Sec. 306. (a)

(1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older



individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;

(2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the Area Agency on Aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(3)(A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and (B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;

(4)(A)(i)(I) provide assurances that the Area Agency on Aging will—

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) provide assurances that the Area Agency on Aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the Area Agency on Aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each Area Agency on Aging shall--

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the Area Agency on Aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each Area Agency on Aging shall provide assurances that the Area Agency on Aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and

(4)(C) Each area agency on agency shall provide assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each Area Agency on Aging shall provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision

of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:

in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the Area Agency on Aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(6)(G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;

(6)(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and

(9)(A) the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title; and (Ombudsman programs and services are provided by the Board on Aging and Long Term Care)

(10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;

(11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including-

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the Area Agency on Aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13) provide assurances that the Area Agency on Aging will

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(B) disclose to the Assistant Secretary and the State agency-

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the Area Agency on Aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used-

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;

(17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery.

#### Wisconsin Elders Act

If the applicant is an aging unit, the aging unit must comply with the provisions of the Wisconsin Elders Act, the title given to [Chapter 46.82](#) of the Wisconsin Statute

**Signed verification of intent**

The person(s) authorized to sign the final plan on behalf of the Commission on Aging and the County Board must sign and indicate their title. This approval must occur before the final plan is submitted to the area agency on aging for approval.

In the case of multi-county aging units, the verification page must be signed by the representatives, board chairpersons, and Commission on Aging Chairpersons, of all participating counties.

We verify that all information contained in this plan is correct.

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Signature and Title of the Chairperson of the Commission on Aging	Date
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Signature and Title of the Authorized County Board Representative	Date
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**APPENDICES**

1. Community Engagement Reports
2. Public Hearing Notice
3. Public Hearing Reports
4. Copy of Public Hearing Notice in Forest Republican
5. Commission on Aging Minutes Approving the Aging Plan
6. Resolution from Forest County Board of Supervisors Approving the Aging Plan

## Community Engagement Report

<b>Your County or Tribe:</b> <b>Forest County</b>	<b>Date/s of Event or Effort:</b> <b>Stakeholder Meeting</b>
<b>Target audience(s):</b> <b>Seniors, 55+ years of age, disabled, caregivers, &amp; community professionals</b>	<b>Number of Participants/ Respondents:</b> <b>11</b>
<b>Describe the method used including partners and outreach done to solicit responses:</b> <i>Kathy Fohrman, Director with the Commission on Aging, facilitated the meeting to ensure that all participants had the opportunity to share their perspectives and to keep the discussion focused and constructive. During a collaborative brainstorming session, all stakeholders were encouraged by the facilitator to contribute their ideas and recommendations for the aging plan. This led to the creation of solutions that may cater to the needs of the aging population. Subsequent meetings are scheduled to further build on these ideas.</i>	
<b>Describe how the information collected was used to develop the plan:</b> <i>Throughout the stakeholders' meeting, key needs were identified and the county's top priorities were discussed. The collected information will be used to allocate resources effectively. Stakeholders were provided with survey data to guide their contributions to the aging plan, fostering collaboration and shared ownership. A decision was made to continue future meetings to work toward achieving outcomes.</i>	
<b>What were the key takeaways/findings from the outreach?</b>  <u>Comprehensive Approach:</u> <i>Due to the wide array of topics we covered—including transportation, hospice care, personal hygiene, nursing facilities, loneliness, Medicare/Medicaid, household chore assistance, health services, and volunteer programs—we were able to underscore the significance of adopting a holistic approach to meet the diverse needs of the aging population.</i>  <u>Interconnectedness of Services:</u> <i>Stakeholders engaged in a lively discussion about numerous services and programs available for the aging population, demonstrating interconnectedness. The importance of collaboration to ensure seniors receive comprehensive care was emphasized.</i>  <u>Person-Centered Care:</u> <i>This meeting underscored the significance of person-centered care, focusing on the unique needs and preferences of older adults. Topics such as personal hygiene, hospice care, and volunteer programs were discussed to enhance our understanding of promoting dignity, autonomy, and well-being among older adults.</i>  <u>Advocacy and Policy Implications:</u> <i>We briefly covered Medicare/Medicaid, nursing facilities, and health services. Stakeholders are eager to raise awareness and advocate for improvements in policies, funding, and programs related to these aspects of aging care in upcoming meetings.</i>	

Addressing Social Isolation: *This topic was highly significant for our stakeholders. We explored programs like Visiting Angels to emphasize the importance of combating social isolation and fostering social connections among older adults, thereby promoting mental well-being.*

COA/ADRC: *Stakeholders were briefed on the merger of the ADRC and Commission on Aging, which aims to enhance transparency and accountability in service delivery. It is crucial for stakeholders to stay informed about organizational changes, service improvements, and performance outcomes to ensure the merged entity remains responsive to community needs and accountable to stakeholders. This awareness will contribute to improving the well-being and quality of life for older adults.*

Transportation Accomplishments: *By offering free rides within the county, Forest County Potawatomi has made significant strides in enhancing local transportation accessibility. Meanwhile, Forest County Commission on Aging's extension of social and medical transportation services beyond the county has enhanced collaborative efforts. These accomplishments could greatly improve transportation services, making sure residents can easily access transportation wherever they need to go. However, a goal for these accomplishments could be to expand service coverage and increase frequency. This involves raising awareness and encouraging more residents to use these transportation options which can improve their mobility and overall quality of life.*



## Community Engagement Report

<b>Your County or Tribe:</b> <b>Forest County</b>	<b>Date/s of Event or Effort:</b> <b>Surveys</b>
<b>Target audience(s):</b> <b>Seniors, 55+ years of age, disabled, caregivers, &amp; community professionals</b>	<b>Number of Participants/ Respondents:</b> <b>45</b>
<b>Describe the method used including partners and outreach done to solicit responses:</b>  <i>Forest County Office on Aging distributed surveys to meal sites, stockbox distributions, vendor fairs, and community businesses as ways to involve partners and individuals to gather responses effectively. By using these surveys, Forest County Commission on Aging is effectively partnering with area agencies and aging individuals to ensure that the aging plan is inclusive, responsive, and effective in addressing the diverse needs of older adults and promoting healthy aging in the community.</i>	
<b>Describe how the information collected was used to develop the plan:</b>  <i>The surveys that the Forest County Commission completed for the aging plan and its information that was collected will be a valuable tool in several issues of development of an aging plan. They include a true needs assessment, identification of trends and patterns, setting goals and objectives, development of strategies and interventions, allocation of resources, and monitoring and properly evaluating outcomes. This shall ensure that the Aging plan is responsive, effective, and aligned with the actual needs of the community we aim to serve.</i>	
<b>What were the key takeaways/findings from the outreach?</b>  <u><i>A Little Aging Unit Trivia</i></u>  <input type="checkbox"/> <i>Office on Aging and Nutrition Services: There is a clear understanding that the Office on Aging oversees multiple nutrition sites and serves a significant number of meals annually.</i> <input type="checkbox"/> <i>Committee Requirements: Most respondents recognize or believe in the requirement for committee members to be aged 60 or older.</i> <input type="checkbox"/> <i>Donations and Funding: There is strong support for the role of participant donations in funding both meals and transportation services.</i> <input type="checkbox"/> <i>Transportation Services: The majority acknowledges the provision of transportation services by the Office on Aging.</i>	

### What you Want Us to Know

#### *Aging Services that are being used by Participants:*

*The survey data reveals a diverse range of participation in aging services, reflecting varied needs and interests among older adults. The emphasis on nutrition, transportation, community engagement, caregiver support, and health promotion suggest a holistic approach to addressing the well-being of the elderly.*

#### Meals:

*The survey of 45 participants provided insights into perceptions and recommendations regarding aging services, particularly focused on meal programs. The majority of respondents (73.3%) expressed satisfaction with the meals provided, with varied opinions on portion sizes and specific preferences for menu items noted. Participants generally viewed the nutrition site staff positively (73.9%), highlighting their friendliness and helpfulness. Recommendations for improvements included offering more fresh fruits and vegetables, expanding soup options, and ensuring meals cater to diabetic-friendly diets. These findings emphasize the importance of responsive service delivery and dietary diversity in enhancing participant satisfaction with aging services.*

#### Transportation:

*The data suggests that while a majority of the surveyed respondents did not require transportation services, there exists a notable subset that either lacks awareness of available options or is dissatisfied with them. This finding underscores the importance of improving outreach and communication about transportation services to ensure all potential users are informed. Overall, the survey shows that people have different needs and preferences for transportation services, suggesting opportunities to improve how accessible and satisfying these services are for older adults.*

#### New and Updates:

*Overall, the survey data reveals a spectrum of opinions and concerns among participants regarding the integration of COA and ADRC in Forest County. While some express optimism about improved service coordination and efficiency, others harbor concerns about potential drawbacks such as reduced service options and communication challenges. The data underscores the importance of clear communication, transparency, and active stakeholder involvement in ensuring the integration meets the diverse needs and expectations of older adults in the community. Addressing these concerns proactively can help mitigate potential challenges and foster a more unified and effective approach to aging services in Forest County.*

#### Senior Services and General Information:

*The survey data indicates a diverse set of needs and viewpoints among seniors regarding services and their perception within the county structure:*

- *Service Needs: There is a clear demand for expanded services in areas such as activities, emergency preparedness, transportation, and advocacy. Specific suggestions highlight a desire for both social engagement opportunities and practical support services.*

- *County Engagement: The responses on knowing County Supervisors and perceptions of respect within the county structure show a mixed level of engagement and satisfaction with representation. This suggests potential areas for improved communication and outreach to better serve and engage the senior population.*
- *Overall Satisfaction: While a majority feel that seniors are respected and valued, a notable minority expressed concerns about respect and representation. This indicates a need for ongoing dialogue and efforts to ensure inclusivity and responsiveness in county services and policies.*

*In conclusion, meeting identified service needs and improving communication and engagement with seniors could enhance satisfaction and better meet community expectations. Establishing regular feedback channels and inclusive decision-making processes will be essential for effectively addressing the diverse needs of seniors.*

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