

**Aging and Disability Resource Center
Door County
Three Year Aging Plan
Fiscal Years 2022–2024**



**Wisconsin Department of Health Services
Division of Public Health
Bureau of Aging and Disability Resources
Office on Aging**



ADRC Mission Statement: The Aging and Disability Resource Center of Door County offers a friendly, personal and timely approach to providing information, assistance and access to community resources. The goal is to keep the citizens of the county active and engaged in their own well-being and within their communities.

ADRC's Core Values:

- **Consumer-Driven Services:** We will support individual choice built on the strength of individuals, families and their communities.
- **Empowerment:** We will equip persons with the tools they need to make informed decisions and maintain control of their lives.
- **Respect:** We will recognize and value the unique qualities and experience of each person.
- **Inclusion:** We provide unbiased services to all races, ethnicities, gender identities, sexual orientations and religions.
- **Quality:** We will continuously strive to provide the highest quality services.
- **Collaboration:** We will promote partnerships that reach across systems and organizational boundaries.
- **Stewardship:** We will effectively & efficiently manage public and private resources.

Table of Contents

Introduction.....	Page 4
Executive Summary.....	Page 5
Context.....	Page 8
Current Landscape.....	Page 8
Population Trends.....	Page 8
Racial and Ethnicity Diversity.....	Page 10
Dementia.....	Page 10
Financial Insecurity.....	Page 11
Identified Needs.....	Page 12
Door County Aging Network.....	Page 14
Resources and Partnerships.....	Page 15
Future Implications.....	Page 16
Long Path Vision.....	Page 17
Community Involvement in the Development of the Aging Plan.....	Page 17
Public Hearing Requirements.....	Page 17
Goals for the Plan Period.....	Page 18
Coordination Between Title III and Title VI.....	Page 29
Organization, Structure and Leadership of the Aging Unit.....	Page 30
Primary Contact to Respond to Questions About the Aging Plan.....	Page 30
Organizational Chart of the Aging Unit.....	Page 31
Staff of the Aging Unit.....	Page 32
Aging Unit Coordination with ADRCs.....	Page 35
Statutory Requirements for the Structure of the Aging Unit.....	Page 36
Role of the Policy-Making Body.....	Page 37
Membership of the Policy-Making Body.....	Page 37
Role of the Advisory Committee.....	Page 38
Membership of the Advisory Committee.....	Page 38
Budget Summary.....	Page 40
Verification of Intent.....	Page 40
Assurances of Compliance with Federal and State Laws and Regulations.....	Page 41
Compliance with Federal and State Laws and Regulations for 2022-2024.....	Page 41
Appendices.....	Page 56
Attachment 1: Community Input Report - ADRC Questionnaire.....	Page 56
Attachment 2: ADRC Questionnaire.....	Page 58
Attachment 3: Community Input Report - Listening Sessions.....	Page 60

Introduction

The Aging and Disability Resource Center (ADRC) of Door County provides a centralized location and starting point for anyone seeking information and support on issues affecting older adults, adults living with a physical, developmental and intellectual disability, their caregivers and families. The information and support in connecting to community resources is unbiased and free. Services are provided over the phone, in an office visit, or in a visit to an individual's home. We also provide after-hour appointments when requested or necessary.

We support the community through our information and assistance services, long term care options counseling, benefit specialist services, family caregiver support programs, fall prevention efforts, hot and frozen home delivered meals, congregate and carryout meals located at five different meal sites throughout the county, volunteer and social opportunities and health promotion programs. Throughout all of our programs and services, our overall goal is to help empower and support individuals in remaining active participants in family and community life.

Every three years, the ADRC is required by the State of Wisconsin's Bureau of Aging and Disability Resources (BADR) to complete a strategic plan that serves as a platform to develop, improve and expand services we provide our community. This living document is known as our "Three Year Aging Plan" and the new plan will cover years 2022-2024. We are pleased to present our plan and the goals we have designated as priorities in order to help support older adults, adults living with a physical, developmental and intellectual disability, their families and caregivers living here in Door County.

Our three-year aging plan was built on public feedback from older adults and adults living with a disability and their families, input from ADRC and Nutrition Advisory Committee members, a review of the current service delivery challenges and population trends. As we look forward to the next three years in providing services this plan will provide us the direction needed to stay focused on improving the quality of life for those we serve here in our community.

Executive Summary

Throughout the past few years, prior to the COVID-19 pandemic, the Aging and Disability Resource Center (ADRC) of Door County experienced a great deal of transformation and growth. The most exciting change occurred back in January of 2018 when we moved into a brand-new building that is four times bigger than our previous one. The move to the new building has had an unbelievable impact on our entire organization and also provided an excellent opportunity to fully complete the integration process of our Aging Unit (more commonly known as the Senior Center) with the ADRC.

We are very proud of the new building and the overall enhancement that it has meant to our agency as well as our community. The additional space has allowed our ADRC the ability to meet an even greater public need than ever before. We have seen a tremendous amount of exposure and participation within all of our programs throughout our entire organization. Listed below are just some of the successes we have experienced since the move to our new building.

- **Nutrition Program:** Throughout 2017 (last year of operation in the old building), we served just over 35,000 meals. This includes our frozen, hot home delivered and congregate meals. After the move to the new building we now serve on average 10,000 more meals a year totaling about 45,000 meals annually. With the Sturgeon Bay meal site experiencing the largest increase in daily participation. On average in 2017 we were serving roughly 44 congregate meals a day at the Sturgeon Bay meal site. And since the move our average increased to roughly 80 congregate meals a day.
- **Total Activity/Program Participation:** For every activity and event that we provide at the ADRC we track participation through our Schedules Plus check-in software system. These activities, programs and events are the ones you see listed in our monthly newsletters. Before the move in 2017, we had a total number of 686 unduplicated individuals participate 12,413 times in our activities, programs and events. Throughout 2019, pre-COVID-19 pandemic, our total number of unduplicated individuals increased to 3,003 who participated 30,165 times in our activities, programs and events.
- **Volunteer Program:** On an annual basis, we track the number of volunteers who generously spend their time helping support the various programs we offer and the total number of volunteer hours. In 2017, we had 114 volunteers spend a total of 4,692 hours of their time. Throughout the last two years our volunteer program has drastically grown. In 2019, we had 193 volunteers donate a total of 7,770 hours of their time. We could not come close to providing the level of service we do on a regular basis without the amazing commitment and dedication of our volunteers.

In addition to the move, our integration efforts have been essential to streamlining our practices and improving the lines of communication between different areas within our organization. The decision to become an integrated ADRC/Aging Unit was what allowed us the opportunity to start working on becoming a much more effective organization when attempting to successfully meet our mission day in and day out. As an unforeseen benefit, the decision to integrate both agencies into one has had a profound and advantageous impact when attempting to support and provide services to our community during the COVID-19 pandemic.

COVID-19 Impact:

In March of 2020, the COVID-19 pandemic spread to Door County and has had a significant impact on our operations and in the lives of everyone living here in our community. Due to the severe and unknown nature of the virus, we were required to respond and make drastic changes to the way we deliver all of our services and supports. For most of 2020 the front doors of our building remained locked and we had cancelled or postponed the majority of our in-person activities and services. In addition, the majority of our staff were required to start working from home. This was also a difficult change that came without a moment's notice.

However, despite our doors being locked our Information and Assistance Specialists, Elderly and Disability Benefit Specialists continued to provide services and supports over the phone, email and through the use of virtual meetings. Our congregate meal program was rapidly transitioned into a carryout curbside meal program without missing a single day of meal provision. Moreover, we temporarily stopped the use of volunteers in helping us deliver Meals on Wheels and relied strictly on ADRC and DHHS staff. Also, we quickly modified the way we were providing all of our daily activities and health promotion programs from strictly in-person to mostly virtual based. These were just a few of the large-scale organizational changes we made in response to the COVID-19 pandemic to ensure the staff, volunteers and the general public were safe and healthy.

Yet, times of trouble and change often provide moments of discovery and creative 'outside of the box' ideas. With that in mind came a few brand-new programs throughout last year. The first innovative program we launched was in the summer of 2020 and it's our ADRC@Home initiative. The purpose of this program was and is to provide opportunities for people to participate in more activities and programs from the comfort of their own home and to stay connected to one another. Our ADRC@Home program really allowed us the opportunity to provide our socialization activities and programs to those unable to do much else given the dynamics of the COVID-19 pandemic. In the future, our goal is to continue to provide activities and programs virtually for people who have a difficult time getting out of the home. Furthermore, we hope to support those individuals who have a difficult time getting out in feeling more engaged with the community at large and not so socially isolated.

The second program we launched last year was our brand new Adopt-a-Grandparent program. Similar to our ADRC@ Home program, this initiative aims to foster positive,

meaningful intergenerational relationships which will help people combat loneliness, create happiness and encourage companionship. Throughout the early part of 2021, we had 46 participants sign up and get matched. To make this effort a success, we partnered with the following agencies, organizations and schools: Cardinal Ridge Residential Care, Big Brothers/Big Sisters, Pinecrest Village, Sturgeon Bay Schools, Gibraltar Schools and The Sunshine House.

Despite the initial impacts of the COVID-19 pandemic, throughout much of 2021, the development of this plan was still able to take place. We made a few adaptations and were able to continue to move forward in conducting a variety of community engagement efforts to help gather public input. These community input efforts were conducted in order to help us identify top concerns and issues affecting older adults, adults living with a physical, developmental and intellectual disability, their families and caregivers living in Door County. In an effort to do just that we distributed a community-wide questionnaire, conducted a series of small group discussions throughout the county and met with a group of in-home care providers. The following concerns rose to the top as priorities:

- Social isolation and staying connected to the community at-large
- Expanding services and programs to other areas outside of Sturgeon Bay city limits (i.e. social opportunities, home delivered meals)
- The need for more chore or in-home assistance and respite care
- Additional in-home caregiver training for both professionals and family or friends
- Physical fitness
- Fall prevention
- Transportation Access

The public input we received strongly underscores the essential importance of the services we provide older adults, adults living with a physical, intellectual and developmental disability, their families and caregivers in our community. Likewise, these findings helped us build a plan that directly addresses the above-mentioned top concerns and are identified as areas of importance in our delivery of services for the future. We have developed a number of specific goals built into the required focus areas of our plan and were intentional in the prioritization of a few local strategies to meet the unique needs of our local community.

In summary, this plan advocates for maintaining the independence, safety and overall well-being of older adults, adults living with a physical, intellectual and developmental disability, their families and caregivers through the services and programs delivered by the Aging and Disability Resource Center of Door County in conjunction with other community partners.

Context

Current Landscape:

The ADRC of Door County is physically located in, the county seat, Sturgeon Bay. Demographically, the city of Sturgeon Bay is where the largest bulk of our county's overall population lives and is home to roughly 9,600 residents. The city's population accounts for approximately 33% of the county's overall population. The remaining 67% of Door County's population is broadly spread up and down the peninsula. In other words, it is a 25-minute drive to our southern most residents and over a 45-minute drive to the northern part of the county from the city of Sturgeon Bay. This does not include Washington Island which can only be reached by ferry boat.

Because of our unique geographic landscape comprised of widely dispersed smaller communities, Door County is an intimate place to call home. Many residents who live here year-round take on a "we take care of each other" mentality. Most turn to a neighbor, their church community or family before reaching out for assistance and lean strongly on their informal supports. Our residents are fiercely independent, creative and regularly attempt to find necessary supports before reaching out beyond their informal support networks. We find this reliance on informal networks continues largely unaltered despite the greater levels of care and collaboration required by the people of Door County during the COVID-19 pandemic. There were and still are many examples of organizations, local businesses and individuals who have really stepped up and freely offered their time and talents to support Door County residents during this continued time of uncertainty.

Population Trends:

Data from the Wisconsin Department of Health Services – Division of Long-Term Care, indicated that in 2020, roughly 24% of Wisconsin residents were 60 years of age or older. This age group is projected to climb to 28% by the year 2030 and then remain fairly static over the next decade staying at around 29% by the year 2040. Clearly the state population is aging and the proportion of individuals over 60 years of age is on the rise.

What makes Door County much more unique is that we already have one of the oldest populations per capita in the state. For instance, the median age statewide is 39.5 years old and in Door County the median age is 53 years of age. That is roughly a 13-year difference. Furthermore, according to the State of Wisconsin's Department of Health Services – Division of Long-Term Care, Door County residents 60 years of age and older was roughly 41% (11,465 residents) of our population in 2020. Door County's population of residents who are 60 years of age and older will continue to rise to approximately 47% or more (12,750 residents) of the county's population by 2030. It will then remain fairly stationary throughout the next decade at roughly 46% of the overall population.

When taking an even deeper look at the demographic trends, Door County's population of individuals 85 years of age and older is expected to double by the year 2030 and continue to climb by 2040. In 2020, this population cohort is reported to be around 1,005 residents. In 2030, the population of residents 85 and older is estimated to reach roughly 1500 residents or more and then in 2040 at around 2300 residents.

What is the significance? We know that those 85 years of age and older on average have a significantly higher rate of functional and financial limitations. This age cohort often times has at least one or two severe health conditions that result in the need for more support in their home or the need for an assisted living or skilled nursing type of residence. We have never seen or experienced an older adult population this high proportionately ever before. Which means Door County as a whole will not have a choice but to focus a lot more time, energy and community-wide effort in addressing the higher demand for support for our ever-growing older adult population.

But why does Door County have a much higher older adult population compared to the majority of other counties throughout the State of Wisconsin? There are primarily two reasons.

For a little more than a decade, Door County, similar to the rest of the State of Wisconsin, has experienced the start of a significant demographic shift. The generation, more commonly referred to as "The Baby Boomers", has started to reach retirement age. The trend of those reaching retirement age and calling Door County home will likely continue to grow for the foreseeable future as the number of "Baby Boomers" continue to reach retirement age. According to the Pew Research Center, last year more individuals made the decision to retire and leave the labor force than ever before. A total of 3.2 million "Boomers" retired in 2020 which is suspected to be largely due to the COVID-19 pandemic. Until last year, the number of people entering retirement each year hovered around 2 million. The increase number of people retiring up to Door County should come as no surprise, it has been designated as one of the top destinations to call your forever home. In 2018 the magazine titled, "Where to Retire" nominated Door County as one of the top places to retire in the nation because of the coastal beauty and small-town lifestyles.

However, the growing number of "Baby Boomers" retiring and moving up to Door County is not the only reason for the total increase in our county's older adult population. On average people are also living much longer lives than ever before. This is largely attributed to the many advancements made throughout the healthcare system over the years and because of individual improvements in overall lifestyle choices such as diet and exercise. According to a U.S. Census Bureau report on life expectancy vs. healthy life expectancy at age 60 and beyond, Americans on average are living longer and healthier lives. The average life expectancy for an American is 21.4 years after the age of 60. The average healthy life expectancy (HALE) or the number of years someone will live in full health (i.e. free of disease or injury) is 16.6 years. The tendency for people to live 15, 20 or 25 years beyond retirement is projected to continue to rise and become more common place.

Racial and Ethnic Diversity:

According to the U.S. Census Bureau's 2020 Census Report, Door County's population has exceeded 30,000 residents for the first time ever. There is still a lot more data to be released in the coming months. But at first glance, Door County still remains far less diverse than many other counties or regions throughout the state. The diversity index is one way the Census Bureau measures the probability that two people chosen at random will be from a different race and/or ethnic groups. The chance of this happening statewide is 37% and in Door County the diversity index is 15.9%. The majority of Door County residents self-identify as Non-Hispanic White (91.5%). The next highest proportion of the population self-identify as Hispanic or Latinx at 3.8% of the overall population. This is a 70% increase from 2010 in the number who identify as Hispanic or Latinx. Residents who self-identify as Black/African American, Native American/Alaskan Native or Asian each accounted for 0.5% of the overall population. The largest demographic increase was found in the amount of Door County residents who identify as multiracial. In 2010, 227 residents identified themselves as multiracial which rose to 930 residents in 2020.

This past March and April, the Door County Board of Supervisors passed a resolution stating that "Diversity, Equity and Inclusion -- Racism is a Public-Health Crisis". With this resolution came the acknowledgement that Door County must be a leader throughout the community in ensuring that all residents and visitors be treated with respect and dignity and that Door County local government should play an important role in seeking out lasting change and solutions.

In years to come, Door County as a whole will continue to become a far more diverse place to live than it has ever been in the past. We will also continue to experience an ever-growing amount of diversity in those visiting Door County who want to come and experience all that are beautiful county has to offer. Therefore, it is essential for an organization such as the ADRC, who provides services to the general public regardless of race, age, ethnicity, sexual orientation, gender identity, mental or physical ability, religious beliefs and socioeconomic status, ensures that we are truly an open, inclusive and welcoming place for everybody seeking support.

Dementia:

Despite popular belief, Alzheimer's Disease and other forms of dementia is **NOT** a normal part of aging. However, age is the strongest known predictor for developing dementia or Alzheimer's Disease. At this time there is not a cure or effective treatment known to prevent Alzheimer's Disease or any other form of dementia. In the State of Wisconsin, Alzheimer's Disease and other forms of dementia are currently the 6th leading cause of death. Dementia has physical, economic and emotional impacts for more than just those living with the disease. It also impacts caregivers, friends, families and the community as a whole.

By 2040, it is anticipated that Door County's population living with some form of dementia will reach its highest amount around 1,600 households or more. The care and treatment of persons with dementia is now being described as a public health emergency. These growing numbers validate the need for Dementia Friendly Community initiatives within our community.

Without proper education, essential resources and necessary support, individuals living with dementia and their loved ones can feel helpless. Starting in 2022, we are excited to announce the addition of a brand-new position. The ADRC of Door County will add a part-time Dementia Care Specialist (DCS) to the team to help address this growing need for support. Our goal over the next three years is to provide those impacted by the disease the specialized resources and support they need to regain control.

Financial Insecurity:

Over time, tourism has become the largest source of revenue-generating business here in the county. Door County is one of six northern Wisconsin counties categorized as having a "forestry-related tourism"-based economy. Tourism and tourism-related business plays a significant role in shaping the everyday fabric of life here in Door County. According to the WI Department of Tourism, more than 3,200 jobs are directly supported by Door County's tourism industry and roughly \$85 million is generated by those employed as a result of the direct spending related to tourism a year. Because of the tourism industry in Door County we experience a significant population influx mostly between the months of May-September. On average Door County can anticipate more than 2 million visitors a year. However, there is another side of the 'Door' that often times gets overshadowed.

Despite Door County's burgeoning tourism industry, there are many older adults and adults living with a disability throughout the county who face challenging financial hardships. For many older adults and adults living with a disability here in Door County, social security or disability payments are their primary source of income. Medical expenses continue to be a rising concern and more problematic for those individuals who are living on a fixed income. Most older adults or adults living with a disability have some form of Medicare, Medicaid or other healthcare coverage to help pay for medically-related expenses such as hospitalizations, routine doctor visits and prescription drug costs. But many still encounter high out-of-pocket healthcare related costs. These expenses most often include insurance premiums, high deductibles and expenses related to medical services not covered by their current healthcare coverage like dental, mental health or long-term care.

In addition, older adults and adults living with a disability on a fixed income often experience additional or rising costs related to affordable housing, transportation options, technology needs (i.e. smartphones and phone plans) taxes and internet access. When attempting to understand the financial insecurity that exists here in Door County, the statistics reported by Door County United Way in their statewide ALICE Report is a great place to start.

ALICE stands for, “Asset Limited, Income Constrained and Employed”. The ALICE report defines households earning more than the federal poverty level but less than the basic cost of living as the “ALICE Threshold”. Many households who fall within the ALICE Threshold struggle to meet a number of basic needs such as housing, child care, food, transportation, healthcare, internet access and/or a smartphone plan.

The latest ALICE Report was released in 2018 and helps define a greater picture of the financial insecurity that exists throughout the peninsula. According to the report, around 22 percent of households in Door County fell within the ALICE Threshold which does not include the additional 9 percent who fell within the federal poverty level. The additional financial challenges caused by the COVID-19 pandemic such as increased unemployment due to economic slowdown, lack of childcare or unpaid sick leave have created additional hardships for those Door County households living within the ALICE Threshold or the federal poverty level.

Likewise, about 42 percent of Door County older adult households struggle to meet certain basic needs mentioned above. Around 35 percent of those older adult households in Door County are reported to be living within the ALICE Threshold with an additional 7 percent living within the federal poverty level. The number of households living on fixed incomes such as the two populations mentioned above here in Door County who fall within the ALICE Threshold and the federal poverty level will only continue to rise as the cost of living continues to increase.

Identified Needs:

To gain a greater understanding of the needs and services concerning older adults and adults living with a disability, we utilized a variety of methods to collect necessary input. The information collected included a blend of other organization’s efforts to complement our own and was used as motivation in writing our 2022-2024 Aging Plan. The following list is a summary of those community engagement initiatives:

- In the beginning of 2021, we worked closely alongside both the ADRC and the Nutrition Advisory Committees to develop an “ADRC Questionnaire”. Then we distributed the questionnaire throughout the county from March to May with the help of several community partners and received a total of 353 responses. We are very pleased by the result because we received more than double the amount we did the last time we distributed a questionnaire back in 2017. (Please see Attachment 1 and Attachment 2 for more details)
- Throughout June and July of this year, we held a series of community roundtable conversations. This was a collaborative effort alongside members of our ADRC and Nutrition Advisory Committees. We scheduled and held the small group community conversations in Sturgeon Bay, Washington Island, Baileys Harbor and Brussels to provide an opportunity for those who lived in various parts of our county the opportunity to participate in the development of our Aging Plan.

Around 40 people attended the roundtable discussions between the four conversations. (Please see Attachment 3 for more details)

- Lastly, we conducted a number of conversations with a good portion of the in-home care providers in Door County. These discussions aided in highlighting a number of really challenging barriers our providers are experiencing in attempting to support those living in Door County who need more help to stay healthy and independent in their home.

The results collected from the questionnaires, community conversations and interviews identified the following as primary needs in the county. These needs are in no particular or prioritized order.

- **Social Isolation and Staying Connected:** Due to physical, financial and geographical barriers, we have a growing population of older adults and adults living with a disability who feel disconnected from the rest of the community. Older adults and their caregivers reported experiencing social isolation before the COVID-19 pandemic but this issue has been greatly intensified by the necessary safety precautions in response to the pandemic.
- **Expanding Services and Programs:** Our community of older adults, adults living with disabilities, their families and caregivers would like to see more of a presence from the ADRC in other places throughout Door County outside of Sturgeon Bay. There is a fairly strong perception that the ADRC does a great job of meeting the needs in Sturgeon Bay but could improve some of their efforts in meeting the needs of those from the northern and southern portions of our county.

At the moment we have a variety of health promotion classes and workshops currently being offered through the ADRC in partnership with other key community organizations such as the Door County Medical Center, YMCA of Door County, UW-Extension and Public Health. However, most of these opportunities are offered in Sturgeon Bay. Over the next three years, we are focused on expanding the number of health promotion classes, workshops and socialization opportunities to offer throughout the county.

- **Physical Activity and Fall Prevention:** Older adults and adults living with a disability want to remain independent and in their own homes as long as possible. The ability to do so often times depends on the physical health of the individual. We have received a lot of input that older adults and adults living with a disability living in Door County would like to see more opportunities to work on improving their overall physical health through exercise programs and health education classes or workshops.

On January 1st, 2020 the ADRC and Emergency Medical Services (EMS) implemented a brand-new collaborative program focused on preventing falls for

Door County residents. When EMS responds to a fall-related call they educate the patient on who the ADRC is and what services we can provide. They will also ask the individual if they would like someone from the ADRC to follow up with them in the next day or two. Those referrals get sent to us electronically through our general ADRC email address. To date, we have received nearly 140 fall specific referrals since the beginning of last year alone.

- **Chore or In-Home Assistance/Respite Care:** The lack of in-home assistance or caregiving should be a very serious concern right now and when looking at the future of older adults and adults living with a disability here in Door County. Throughout our public input efforts, we heard from a lot of people that spoke to some real difficult challenges they were having in trying to find enough care or support in order to stay independent and safe at home. Door County is facing a grave shortage of direct care workers and those able to assist older adults or adults living with a disability around the house with chores or light housekeeping projects.
- **Caregiver Recruitment and Training:** This is an ever-growing crisis and will be one of the biggest needs our community will face for the next fifteen to twenty years. The demand for in-home care already greatly exceeds the available supply of paid caregivers. Finding caregivers in Northern Door and on Washington Island is especially difficult. Our professional caregivers do not get paid enough which leads to a labor shortage of caregivers between the spring and fall months to work in the tourism industry where individuals can earn substantially more money. We have also received feedback from family caregivers requesting opportunities to receive formal training on how to provide adequate and proper care for their loved ones.
- **Transportation Access:** During the development of this plan and through the various community input efforts, reliable and affordable transportation was noted as a barrier or challenge for older adults and adults living with a disability. Older adults and adults living with a disability rely on access to public transportation to maintain regular and daily activities of life. Prior to the COVID-19 pandemic, there was already a high demand by older adults and adults living with a disability for public transportation to access food, medical appointments, and to pick up medications. This is still believed to be an issue and perhaps now an even greater concern because of the avoidance of public transit due to fears of contracting COVID-19.

Door County Aging Network:

As mentioned previously, we have benefited in a number of ways from the integration of our Aging Unit and ADRC. From an external perspective, it is so much easier now that we are one agency for the general public to understand what services and programs the aging network here in Door County can provide. As opposed to before the move to our new building, when we tried to explain what the ADRC could provide separate from the

Aging Unit, or more commonly known as “The Senior Center”. Since we have become an integrated aging unit, we have received a lot of positive feedback from consumers and community partners regarding the integration.

Consistent with the staffing and organizational changes that were made, we also explored the make-up of our three advisory boards representing the aging population in our community. As a result, we combined our ADRC Advisory Committee with our Senior Services Advisory Committee leaving our Nutritional Advisory Council as a stand-alone group. These organizational changes were all made to create a seamless system of service delivery for older adults, adults living with a disability, their families and caregivers in Door County.

The overall management and administration of the ADRC rests under the responsibility of the Department of Health and Human Services (DHHS) for the county. Organizationally ‘housed’ under the guidance of our Department of Health and Human Services allows the ADRC to maintain strong and healthy working relationships with the other divisions within the department. These other divisions include: Adult Protective Services, Economic Support, Child Protection Services, Youth Justice, Behavioral Health, Door County Public Health, Community Support Program, Children and Families Team which includes the Childrens Long-Term Support Unit and our Coordinated Community Support Unit. These strong working relationships permit us to serve our community at a much higher level than we would be able to do independently. Once again it allows not only the ADRC but our entire Health and Human Services Department the ability to break down those organizational “silos” and work as a collective whole.

One great example of this type of elevated collaboration with another DHHS Unit was our COVID-19 vaccination outreach efforts in partnership with the Door County Public Health Division earlier this year. The ADRC was allocated additional funding to help identify and support individuals who were having a difficult time physically getting to a vaccination clinic or unable to leave their home in order to receive a vaccination. The ADRC, Door County Connect (Public Transit System), Door County Public Health and Emergency Medical Services (EMS) met to discuss strategies on how to provide COVID-19 vaccines to residents in their homes. Early on in the administration of the COVID-19 vaccinations we recognized that there were residents without access to transportation or whose medical or physical condition would make it very difficult to leave their home and travel to a vaccination clinic. Together we worked as a team and were able to help individuals’ access, coordinate and get a vaccine.

Resources and Partnerships:

Relative to our size, Door County is a resource focused community with a high number of for-profit and nonprofit organizations serving our target populations. There is also positive and far reaching collaboration between the public and private sectors. These groups share both a common interest and concern over the growth of the target population and are more than happy to sit around a solution-focused table.

As an example of this kind of collaboration, our ADRC closely partners with a variety of hospital staff in areas related to memory care, physical rehabilitation and nutrition programming. Hospital staff regularly conduct health-related presentations at our Sturgeon Bay meal site and regularly collaborate with our ADRC staff. The work with the hospital is indicative of the kind of collaboration that occurs throughout the year. Door County also has a very high level of support and collaboration that exists within our “I-Team”. The I-Team or Interdisciplinary Team includes various staff from the Department of Health and Human Services, the Door County Sheriff’s Department, Sturgeon Bay Police Department, Door County Medical Center as well as private entities.

Another essential resource we must continue to utilize and participate in, concerns the strong sense of community engagement around the county. Door County is fortunate to have a very active community of older adults willing to donate their time. Since the move to our new building, we have also seen a dramatic interest in the number of older adults who want to get involved. This is not surprising as there are many older adults living in Door County who are volunteering their time to two or more different organizations. In fact, the growing population of older adults contributing hours of volunteer time and participating in community engagement means organizations like the ADRC can continuously attempt to meet an even greater need. In addition, there is a greater opportunity to explore innovative solutions to utilize the time and talents of those reaching retirement age in ways that can also help address the additional needs and demand for services.

Future Implications:

When looking into the future and planning to create new services and programs or exploring opportunities to enhance existing ones, there are a few certainties we must keep in mind. The most significant reality our agency and community at large will continue to face over the next few decades is the rapid growth of our older adult population. Over the next two decades, 2020 to 2040, Door County’s population of individuals who are 60 years of age and older is projected to reach the highest percentage of the overall population it has ever been. In other words, nearly one out of every two people living in Door County will be 60 years of age or older. The increase in this proportion of Door County’s population also comes at a time when the total population is not increasing at the same rate. The demand for services will continue to increase while those available to meet this growing need is limited or non-existent.

The other significant challenge to the delivery of services and programs, is Door County’s geographical layout. Providing high-level services throughout the county is extremely difficult at times. Door County is 90 miles long from the southwest corner to the northeast tip when you include Washington Island. The peninsula is comprised of sporadically populated agricultural and coastal regions. Door County consists of one city (Sturgeon Bay), four villages (Egg Harbor, Ephraim, Forestville, Sister Bay) 14 towns and over 25 unincorporated communities. Washington Island is largely accessible only by ferry. Because of our geographical layout and the way our population is dispersed

widely, we have a growing older adult population that is disconnected and socially isolated. This lack of social stability and support became even more evident due to the COVID-19 pandemic.

Long Path Vision:

The ultimate goal for the ADRC of Door County, now and in the foreseeable future, is to maintain the current quality of support we provide and explore ways to circumnavigate the two previously discussed challenges that create a barrier in our ability to continue to achieve our overall mission for all older adults living here in Door County. Over the next three years, we plan to focus a fair amount of time and energy on expanding our programs and services to meet the growing needs of older adults, adults living with a disability, their families and caregivers throughout the county. In summary, this plan advocates for maintaining the independence, safety and overall well-being of older adults and adults living with a disability through the services and programs delivered by the Aging and Disability Resource Center of Door County in close partnership with community partners.

Community Involvement in the Development of the Aging Plan

This section of the plan should provide evidence of commitment by the ADRC/Aging Unit to engage with the public in the development of the aging plan. As mentioned above in the 'Context' section of this plan, throughout this past year we conducted a variety of community-wide engagement efforts. We were pleased to gather feedback from roughly 400 Door County residents regarding their top concerns affecting older adults, adults living with a disability and caregivers living here in Door County. To find more details about each community engagement effort and our key takeaways, please review attachments 1-3 at the end of this plan starting on page 56.

Public Hearing Requirements and Meeting Details

The Door County Health and Human Services Board, the ADRC Advisory Committee and the Nutrition Advisory Council plan to hold a joint public participation meeting on Monday, October 11th, 2021 at 1:30pm. The meeting will take place at the Door County Community Center/ADRC building at 916 N. 14th Avenue, Sturgeon Bay. The ADRC is wheelchair accessible and to those who need additional accommodations.

The purpose of the meeting is to gather public input on the proposed 2022-2024 Three Year Aging Plan, which focuses on the services provided by the ADRC of Door County. Those services include: information and assistance, nutrition programs, transportation, benefit counseling, caregiver support, evidence-based health promotion programs, fall prevention and services to people living with dementia.

A draft copy of the 2022-2024 Three Year Aging Plan is available for review at the ADRC in Sturgeon Bay and at all other congregate meal sites beginning Monday, September 27, 2021. We want to hear from you!

Goals for the Plan Period

Focus area: Title III-B Supportive Services – Social Isolation and Community Engagement		Due Date
<p>Goal statement: In an effort to reduce social isolation and loneliness, our goal over the next three years is to provide older adults a greater opportunity to stay connected and engaged in the community they live in. In general, we aim to accomplish this goal through the use of virtual platforms (i.e. Facebook Live and Zoom) for residents who have a harder time getting out of their homes on a consistent basis and through the coordination of more activities/programs at our satellite meal site locations.</p>		
<p>Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. Develop our own revised loneliness and isolation scale/survey and distribute to existing ADRC consumers/participants throughout 2022 in order to create a baseline to compare to. Distribute the same isolation scale/survey throughout 2023 and 2024. We will also evaluate the success of this goal by the following measures as well:</p> <ul style="list-style-type: none"> • The increase in the number of participants at our satellite meal sites and virtually • The increase in the number of evidence-based workshops, ADRC@Home opportunities, events and celebrations held virtually (via Facebook Live or ADRC Website) and at one of our satellite meal sites 		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
<p>Strategy 1: Increase the number of activities and programs that we are offering at each one of our satellite meals sites (Brussels, Baileys Harbor, Liberty Grove and Washington Island)</p>		
<p>Action step: Invite a group of individuals from each of the communities where our satellite meal sites are located and hold a town hall style conversation once a year to discuss program and activity interests.</p>	<p>Schedule and hold town hall style meeting at every meal site within first quarter of every year 2022-2024</p>	<p>Q1: 2022-2024</p>
<p>Action step: Start a volunteer group of individuals interested in helping with the coordination and scheduling of different events and programs at each meal site and meet with each group quarterly to continue to work on expanding the amount of activities and programs offered at each meal site.</p>	<p>Invite at least three individuals to join each satellite meal site volunteer group and schedule first meeting.</p>	<p>April 30th, 2022</p>
<p>Action step: Work with each volunteer group to come up with creative ways to advertise and promote the satellite meal site</p>	<p>Schedule and conduct quarterly meetings with</p>	<p>Jan. 2022-</p>

activities and programs. Include program and activity advertisements in our monthly newsletter, Facebook Page and website.	every meal site group throughout the next three years	Dec. 2024
Action step: Throughout each year of the three-year aging plan, distribute the loneliness and isolation scale/survey evaluating the impact the activities and programs have had to help reduce social isolation and loneliness.	Distribute survey throughout each year of the aging plan and evaluate the results at the end of each year during both ADRC/Nutrition Advisory Committee Meetings	Jan. 2022- Dec. 2024
Strategy 2: Provide more opportunities for virtual and at-home based activities/programs through our ADRC@Home (Virtual Community Center) program.		
Action step: Schedule a meeting with the AARP WI Chapter to learn more about their “Virtual Community Center” program and explore ways to collaborate.	Meeting scheduled and conducted with AARP WI Chapter.	June 30, 2022
Action Step: Identify and collect feedback from Door County residents (ex: Meals on Wheels participants) who have certain barriers that make it difficult to always participate in activities and programs in-person on possible event or activity interests and technology needs.	Distribute activity interest survey and create at-home interest results.	Sept. 30, 2022
Action Step: Take feedback and advice from what we learned in the AARP Virtual Community Center meeting and from the group of Door County residents and explore creative ways to create a similar virtual platform resource on our ADRC website.	Create virtual platform via ADRC website at host at least two at-home events or programs.	Dec. 31, 2022
Action step: Based on feedback, reach out to other community organizations and partners (i.e. Learning in Retirement/Peninsula Players/YMCA) with the purpose of collaborating to create more home-based opportunities for those who have a hard time attending an event or community-wide activity in-person.	Reach to at least two other community partners and host or develop at least two at-home activities.	March 31, 2023
Action Step: Recruit and train a group of volunteers willing to assist those who might need help getting started with a certain device or with the virtual ADRC@Home program.	Recruit and train at least two volunteers for ADRC@Home program.	March 31, 2023
Action Step: Create an ADRC@Home calendar of events. Promote and advertise the calendar of events in monthly newsletter, ADRC Facebook page and website.	Create and post calendar of at-home events in monthly newsletter and on website.	June 30, 2023
Action Step: Distribute the loneliness and isolation scale/survey to virtual program participants each year of the three-year aging plan, evaluating the impact the activities and programs have had to help reduce social isolation and loneliness.	Distribute survey throughout each year of the plan and create end of the year report.	Dec. 31, 2022/2023/2024

Strategy 3: Collaborate with a group of community partners to host an annual community-wide volunteer fair for Door County residents to learn more about what opportunities are available to get involved and make a difference.		
Action step: Invite and schedule monthly/bi-monthly meetings with a group of community partners to plan and organize a community-wide volunteer fair at the ADRC building in Sturgeon Bay.	Schedule and hold monthly/bi-monthly meetings	Jan. 2022- Dec. 2024
Action step: Schedule a date and time for the annual volunteer fair sometime in April during National Volunteer Week.	At the first meeting of each year following the volunteer event schedule next year's fair date and time.	May/June '22, '23 and '24
Action step: Develop a "Save the Date"/event flyer and distribute throughout the community (i.e. Peninsula Pulse, Radio and Social Media)	Every year develop event flyer and distribute at least two months in advance.	Feb-March '22, '23, '24
Action Step: Create a list of vendors/community organizations and invite them to the annual volunteer fair.	Create list and send invitations at least three or four months before the date of the event	2022-2024
Action Step: Develop an evaluation form to distribute to participants and vendors during the volunteer fair.	Develop form and distribute each year during event in April	2022-2024
Action Step: Host the community-wide volunteer fair event at the ADRC building.	Hold event	April '22-'24
Annual progress notes		

Focus area: Title III-C Nutrition Program / Person-Centered Services and Choice	Due Date
Goal statement: Currently our nutrition program provides hot home delivered meals to residents who live within or near the Sturgeon Bay, Sister Bay and Washington Island communities. Our goal over the next three years, is to provide and expand our hot/frozen home delivered meals to more residents throughout Door County.	
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. The success of this goal will be measured by a few factors. The first measurable is the increase in the number of hot/frozen home delivered meal participants living in the Northern and Southern parts of Door County. The second factor will be measured by the increase in the total amount of meals we are providing Door County residents through our hot/frozen home-delivered meal program over the next three years. By	

December 2024, our overall goal is to increase the amount of hot/frozen home-delivered meals we are providing Door County residents by 30% or nearly 7,000 hot/frozen meals.

Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)	Due Date
Strategy 1: Develop and implement at least one hot/frozen home delivered meal route at every existing satellite meal site (Brussels, Baileys Harbor and Liberty Grove).		
Action step: Create a home delivered meal route service area around each satellite meal site.	Complete hot home delivered meal routes	Nov. 30 th , 2021
Action Step: Purchase the needed equipment for each home delivered meal route (i.e. coolers, baskets, food-safe travel bags, meal packaging).	Purchase needed equipment	Dec.31 st , 2021
Action step: Recruit, background check and train the necessary amount of volunteer drivers and volunteers to help meal site coordinators package home delivered meals for each home delivered meal route.	Start recruiting in Dec. 2021 and run background checks and complete necessary training for new volunteers	Jan 31 st , 2022
Action step: Advertise the news in our monthly newsletter, ADRC Facebook page and website and send a letter to our community partners that we are expanding our home delivery meal routes to include one at each satellite meal site.	Complete and run advertisements and send community partner letters	Jan. 31 st , 2022
Action Step: Complete the necessary home delivered meal/ Meals on Wheels evaluations for participants interested in receiving a hot home delivered meal around the satellite meal sites and create actual routes.	As new referrals come in complete the necessary MOWs evaluations and place those who meet eligibility on routes.	Starting Jan. 1 st , 2022 and as needed
Action Step: Launch each home delivered meal route around the Brussels, Liberty Grove and Baileys Harbor communities.	Start delivering hot/frozen home delivered meals at each satellite meal site	Feb. 7 th , 2022
Strategy 2: Create a Door County ‘More Than a Meal’ workgroup charged with the mission to help us explore and develop a strategic plan to expand our home delivered meal program throughout the county.		
Action Step: Invite an active group of community members to join a ‘More Than a Meal’ workgroup and schedule the first meeting. Plan to meet monthly/bi-monthly.	Invite a group of at least five community members to join first meeting.	Sep. 30, 2022
Action step: Using current program and demographic data, assess the current capacity of our home delivered meal program including	Pull data and create Door County More Than a Meal report.	Dec. 31, 2022

but not limited to an in-depth look at consumer base, program reach by geographic area and operational challenges.		
Action step: Explore additional funding opportunities to support the expansion of our home delivered meal program (i.e. legacy fund development, fundraising efforts, route sponsorships or the creation of a 501©3 organization).	Create a legacy fund or separate 501©3 organization.	June 30, 2023
Action step: Develop a Door County 'More Than a Meal' strategic plan and campaign to help support the ADRC's plans for expanding our home delivered meal program throughout the county.	Finish and create a hot home delivered meals multi-year strategic expansion plan.	Dec 31, 2023
Annual progress notes		

Focus area: Title III-E Caregiver Support		Due Date
Goal statement: Over the next three years we will focus our caregiver program efforts on helping increase paid/volunteer respite care options here in Door County to help address the current shortage of in-home support.		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data.		
The success of this goal will be determined in the following ways:		
<ul style="list-style-type: none"> The completion of a community-wide resource assessment of the respite care options at the beginning of 2022 and then again at the end of 2024 resulting in an increase in the number of options and supports. The decrease in family caregivers reporting a lack of adequate respite care options throughout the next three years using our SAMS “unmet need-respite” data and caregiver needs assessments. 		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Hold an annual recruitment event to help local in-home care providers and adult day care programs find and hire more in-home care support.		
Action step: Contact the in-home/adult day care providers and schedule a meeting to discuss an annual recruitment event. Plan to meet monthly/bi-monthly to plan the annual event.	Conduct initial planning meeting and meet bi-monthly.	June 30, 2022
Action Step: Reach out to at least one other Caregiver Coalition or community-based organization who has successfully held an in-home/adult day recruitment event to learn more about how they organized such an event.	Schedule and conduct meeting.	June 30, 2022

Action Step: Contact the Door County Economic Development Corporation and schedule a time to meet with them to discuss creative ways to hold a successful employer recruitment event.	Schedule a conduct meeting.	Sept. 30, 2022
Action step: In collaboration with our Caregiver Coalition and the in-home/adult day care providers, apply for a “mini-grant” from the Respite Care Association to hold a recruitment event.	Apply for RCAW mini-grant.	2023 & 2024
Action Step: Pick a date and location for the annual recruitment event.	Choose date and time for annual recruitment event.	Q1 2023 & 2024
Action Step: Develop marketing and promotional materials to advertise in the newspapers, ADRC monthly newsletter, website and Facebook Page and over local radio stations.	Create and distribute marketing materials.	June & July '23 & '24
Action step: Hold recruitment event.	Host annual event.	Aug. '23 & '24
Strategy 2: Change policy to allow informal caregivers (i.e. family and friends) the ability to be reimbursed for providing respite care when there is a lack of paid in-home care providers.		
Action step: Reach out to at least one ADRC/Aging Unit to learn more about their informal caregiver respite care program (i.e. processes, paperwork, policies, etc.)	Schedule and conduct informal caregiver policy meeting.	March 31, 2023
Action step: Educate and inform the necessary decision makers (County Board or Health and Human Services Board members) on the lack of respite care providers and the need to reimburse informal caregivers when necessary.	Include information regarding informal caregiver policy in HHS Board Report.	June 30, 2023
Action step: Work alongside our ADRC Advisory Committee and Caregiver Coalition to develop a revised draft policy and/or procedure.	Create draft policy or procedure.	Sept. 30, 2023
Action Step: Request and advocate for a policy change to allow the reimbursement of informal caregivers when providing respite care.	Policy or procedure change.	Dec. 31, 2023
Strategy 3: Develop and implement a volunteer-based chore (i.e. housekeeping, grocery shopping, laundry, yard work, minor household tasks) program to help older adults remain independent in their own homes.		
Action step: Reach out and learn more about an existing volunteer chore program from at least one other community-based organization or ADRC throughout the state.	Schedule and conduct volunteer chore program meeting.	Sept. 30, 2023
Action step: Contact Habitat for Humanity of Door County/Options for Independent Living to discuss a possible partnership between the volunteer chore program and their home repair program.	Conduct volunteer chore program meeting with Habitat and OIL.	Sept. 30, 2023

Action step: Develop program criteria, procedures and paperwork necessary to start the volunteer chore program.	Create program criteria and necessary paperwork	Dec. 31, 2023
Action step: Advertise the new program in our ADRC newsletter, Facebook Page, website, local newspapers and over the radio. Recruit and complete background checks on volunteers who are interested in assisting older adults with chores around their homes.	Advertise new program and complete at least 5 volunteer background checks.	Dec. 31, 2023
Action step: Collaborate with churches, other community-based organizations (i.e. Boys n’ Girls Club, BBBS, schools, LIR) to recruit volunteers and identify those who might be interested and qualify.	Reach out to at least three additional community organizations about the program.	Jan 31, 2024
Action step: Launch the program.	Provide volunteer in-home chore service to at least 15 individuals.	March 31, 2024
Annual progress notes		

Focus area: Title III-D Health Promotion – “Freedom from Falls” (Fall Prevention)		Due Date
Goal statement: Year after year, falls and fall-related injuries are continually emerging as a major issue and concern for older adults living here in Door County. Over the next three years, the ADRC will work on strengthening community-wide efforts to help prevent older adults from further injury and possible hospitalization due to frequent falling or the fear of falling.		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data.		
The success of this goal will be measured in the following ways: <ul style="list-style-type: none"> In the beginning of 2022, the ADRC will work alongside Emergency Medical Services (EMS) and our local hospital to gain a clear understanding through data gathering of how many older adults suffer from falling and as a result call EMS for a lift assist and/or call for transport to the hospital due to a fall-related injury. At the end of both 2023 and 2024, the ADRC in partnership with our local Fall Prevention Coalition will once again review the fall-related data to determine the effectiveness of our local fall prevention efforts. By December 2024, the overall goal would be to see a 15% reduction in the rate of emergency room visits and EMS lift assist referrals due to falls among older adults. 		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Start a Falls Prevention Community Coalition comprised of professionals from Door County Medical Center, ADRC, YMCA, EMS, Public Health, Neighbor-to-Neighbor, Northeast Falls Alliance (RTAC), etc.		

Action step: Schedule time to shadow and join the Brown County Injury Prevention Community Coalition for one of their meetings to gain a better understanding of their membership/purpose/mission/etc.	Shadow Brown County Coalition for at least one meeting. Conduct meeting with coalition chairperson.	April 30, 2023
Action step: Invite a group of agency partners from the Door County community to the first meeting of the Door County Fall Prevention Coalition and discuss mission/purpose/creative new ideas to help reduce falls among the older adult population. Plan to meet bi-monthly.	Conduct initial meeting and schedule bi-monthly meetings for rest of the year.	June 30, 2023
Action Step: In partnership with EMS and the Door County Medical Center, pull fall-related data and create a baseline understanding of the need.	Develop and create fall-related report and promotional material.	Sept. 30, 2023
Action step: Develop a community fall prevention action plan with strategies for reducing falls and fall-related injuries.	Create local fall prevention action plan (i.e. including increased public education and evidence-based programming).	Dec. 31, 2023
Strategy 2: Develop a community-wide “Freedom from Falls” public awareness initiatives in partnership with the Door County Fall Prevention Coalition.		
Action step: Publish at least one fall prevention related article in our ADRC monthly newsletter.	Publish articles in monthly newsletter.	2023 - 2024
Action step: Develop ‘Freedom from Falls’ brochures and a fall prevention packet of resources and information that can be distributed to the general public.	Complete new brochures and fall-related prevention packet.	Dec. 31, 2022
Action step: Create a Door County ‘Freedom from Falls’ fall prevention webpage on our ADRC website.	Create webpage.	Dec. 31, 2022
Action step: Increase the amount of evidence-based fall prevention programs (i.e. Stepping On) and educational presentations offered throughout the county.	Conduct at least two fall prevention program/presentation at each meal site location.	2023 - 2024
Action step: Coordinate and plan activities, educational presentations, local media/social media campaign to raise awareness of falls for National Falls Prevention Week in September on an annual basis.	Conduct a September fall-related fall annual event each year of the plan.	'22, '23, '24
Annual progress notes		

Focus area: Diversity, Equity and Inclusion Goal	Due Date
Goal statement: The ADRC programs and activities will be welcoming and inclusive to all people living in Door County. Over the next three years, we will strive to accomplish this goal through the	

education and training of the ADRC staff, advisory committee members and the general public. In addition, we will strengthen our working relationships with agencies and community-based organizations that serve marginalized people in our community to improve access to services and programs.		
<p>Plan for measuring overall goal success – <i>How will you know that you have achieved the results you want? Use data.</i></p> <p>The success of this goal will be measured in the following ways:</p> <ul style="list-style-type: none"> • The increase in the number of participants from diverse backgrounds – use SAMS data • The annual distribution of an agency climate pre/post survey 		
Specific strategies and steps to meet your goal:	Measure (<i>How will you know the strategies and steps have been completed?</i>)	Due Date
Strategy 1: The ADRC Team and advisory committee members will increase their knowledge/awareness on issues related to diversity, equity and inclusivity.		
Action step: ADRC Team Members will complete an annual diversity, equity and inclusivity training in partnership with the Department of Health and Human Services and the Racial Equity and Diversity Department Workgroup.	Complete at least one annual DEI training with all ADRC team members.	Dec 31, '22, '23, '24
Action step: One ADRC Team Member will be designated to represent our organization/unit on the Door County DHHS Racial Equity and Diversity (READ) work-group and regularly update the team regarding any upcoming learning opportunities during our weekly team meetings.	Designate one ADRC team member to provide monthly updates on READ updates.	2022 - 2024
Action step: The ADRC Director and READ Team Member will work together to coordinate a bi-annual DEI activity or guest speaker learning opportunity related to diversity, equity and inclusion.	Complete two all ADRC trainings in each year of the aging plan.	2022 - 2024
Action Step: Distribute a pre/post agency climate survey	Distribute pre/post agency climate survey each year of the aging plan.	2022 - 2024
Strategy 2: The ADRC will provide ongoing community-wide opportunities for residents/consumers/participants to engage in an activity, educational event or program related to racial equity, diversity and/or inclusion.		
Action step: Provide and coordinate at least one monthly community-based educational opportunity related to diversity, equity and inclusion (i.e. book discussions, movie screenings, educational presentations or guest speakers).	Conduct at least one monthly DEI educational program or opportunity.	2023 - 2024
Action step: Place at least one article related to racial equity, diversity and/or inclusion in our monthly newsletter.	Place one article a month.	2023 - 2024
Strategy 3: Meet with community partners (i.e. Literacy Door County Program, Casa Alba Melanie, Food Wise, United Way, etc.) to		

discuss ways the ADRC can help support our local Hispanic older adult population.		
Action step: Reach out to at least two different community-based organizations that provide direct support to the Hispanic population living in Door County and schedule a meeting.	Conduct meetings.	May 31, 2022
Action step: Create and work with community partners to come up with culturally appropriate strategies and ideas on how the ADRC can improve our outreach and service provision to the Hispanic/Latin-X population in Door County.	Develop at least one organizational strategy for the ADRC.	Sept. 30, 2022
Action step: Develop program brochures and program materials in Spanish and distribute.	Create brochures, program materials and distribute throughout the community.	Dec. 31, 2022 / Distribute '23-'24
Annual progress notes		

Focus area: Advocacy		Due Date
Goal statement: In an effort to empower older adults to get more involved in advocating for issues regarding policies/decisions/laws that may affect their lives, the ADRC will focus our advocacy efforts over the next three years in the development of an annual advocacy training, in raising public awareness regarding issues/action items and through the promotion of other advocacy opportunities (i.e. Aging Advocacy Day).		
Plan for measuring overall goal success – How will you know that you have achieved the results you want? Use data. The success of this goal will be measured in the following ways: <ul style="list-style-type: none"> • The completion and coordination of at least one advocacy training program throughout 2022-2024. • The increase number of consumers who complete the advocacy training each year. • The increase number of consumers who attend the Aging Advocacy Day in Madison. Resulting in at least 10 advocates who attend throughout 2022-2024. 		
Specific strategies and steps to meet your goal:	Measure (How will you know the strategies and steps have been completed?)	Due Date
Strategy 1: Develop, schedule and host at least one advocacy training or educational workshop throughout 2022-2024		
Action step: Reach out to at least one ADRC/Aging Unit that has an established advocacy training and schedule a meeting to learn more	Conduct advocacy related meeting.	June 30, 2022

about what they do and how they promote advocacy involvement in their community.		
Action step: Reach out to community partners (i.e. GWAAR Advocacy Specialist, League of Women Voters) to schedule a brainstorming meeting regarding the development of an advocacy training. If needed, meet more than once.	Hold a meeting or conference phone call with at least two organizations regarding advocacy training.	Dec. 31, 2022
Action step: Develop, schedule and promote advocacy training.	Conduct advocacy training.	2023 & 2024
Action step: Distribute a pre- and post- satisfaction evaluation/survey measuring participants' knowledge growth and ask participants to share ways to improve the training.	Distribute pre/post evaluation or survey.	2023 & 2024
Strategy 2: Raise public awareness around issues, policies and/or decisions that affect older adults and encourage advocates to get more involved.		
Action step: Include local, state and federal advocacy alerts in our monthly newsletter.	Place one advocacy related article in monthly newsletter.	2023-2024
Action step: Create an Advocacy webpage on our website where we can place information on issues affecting older adults.	Create website.	Dec. 31, 2022
Action step: Promote, recruit and coordinate an opportunity for older adults to attend Aging Advocacy Day in Madison.	Coordinate and attend Aging Advocacy Day each year of aging plan.	Spring 2022-Spring 2024
Annual progress notes		

Coordination Between Title III and Title VI

The coordination of services between the county aging units, ADRCs, tribal aging units and tribal members is essential to maximize efforts toward health equity within our aging programs. Most counties in Wisconsin have tribal members within their service area. Some counties have tribal lands within the county but are not considered reservation lands. It is the expectation of the Older American Act (OAA) that every county will conduct outreach activities to inform tribal members of the supports and services available to them.

Historically, the ADRC of Door County has not conducted ongoing or specific outreach activities with nearby tribes, tribal aging units or tribal members within our service area. However, when looking into the next three years we will change this fact and work towards developing a much stronger relationship with nearby tribal aging units and any tribal members within our service area. This will be done in order to collaborate and work on providing culturally competent programs and services.

The ADRC of Door County Director will start this process within the first quarter of 2022 by reaching out to the Oneida Nation Aging and Disability Services Program Manager. The goal of this discussion or meeting will be to learn more about ways in which our organization can improve our level of outreach, service coordination and overall cultural knowledge around providing supports to tribal members of the Oneida Nation. In addition, the ADRC of Door County will look to partner with the Oneida Nation and other tribal aging units to provide at least one culturally specific development training to staff for each year of the next aging plan, 2022-2024.

Organization, Structure and Leadership of the Aging Unit

Primary Contact to Respond to Questions About the Aging Plan

Provide contact information for the primary person who will respond to questions and comments about the aging unit and three-year plan. Aging units may use their own chart but a template is provided below. Include primary contact information in the body of the aging plan.

Primary Contact to Respond to Questions About the Aging Plan Template

Name: Jake Erickson

Title: ADRC Director

County: Door

Organizational Name: Aging and Disability Resource Center (ADRC)

Address: 916 North 14th Avenue

City: Sturgeon Bay

State: Wisconsin

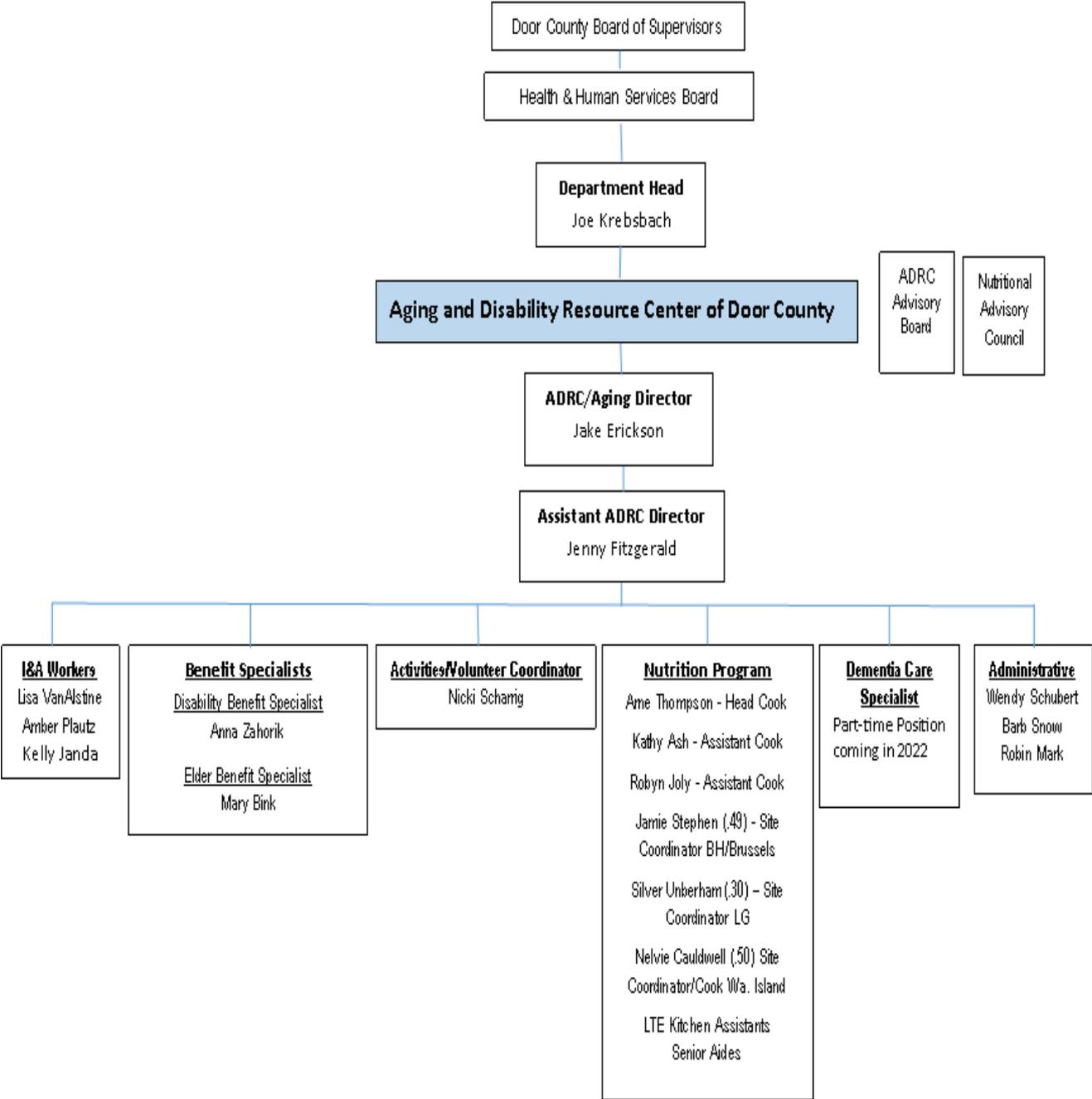
Zip Code: 54235

Email Address: jerickson@co.door.wi.us

Phone #: (920)746-2372

Organizational Chart of the Door County ADRC/Aging Unit

DOOR COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES
ADRC Organizational Chart



Staff of the Aging Unit

Provide the required information on the people employed as the aging unit director, nutrition director, program nutritionist (including under contract), lead information and assistance specialist, benefit specialist, health promotion coordinator, family caregiver coordinator, transportation coordinator, and other aging unit staff (as applicable). Use the template provided below and include in the body of the aging plan.

Staff of the Aging Unit Template

List the people employed by the aging unit. Include additional rows as needed.

<p>Name: Jake Erickson Job Title: ADRC/Aging Unit Director Telephone Number/Email Address: 920-746-2545 jerickson@co.door.wi.us</p>
<p>Brief Description of Duties: Development, administration, and operation of programs and services offered by the ADRC and the Aging Unit, in accordance with State and Federal laws, rules, and regulations. Some of the key services provided are: information and assistance, benefits counseling, long-term care options counseling as well as a full array of Older Americans' Act services in our Aging Unit. This position is also responsible for the overall coordination and integration of these program areas that serve older adult persons, persons with physical or developmental disabilities, and their families.</p>
<p>Name: Jennifer Fitzgerald Job Title: Assistant ADRC Director Telephone Number/Email Address: (920)746-2544 jfitzgerald@co.door.wi.us</p>
<p>Brief Description of Duties: Assists the ADRC/Aging Unit Director in the overall program administration for the ADRC of Door County including budget preparation, program and staff development, outreach and community collaboration. Is responsible for coordination of the Caregiver Coalition and other caregiving programs, acts as the Nutrition Director and Transportation Director.</p>
<p>Name: Nicki Scharrig Job Title: Activities & Volunteer Coordinator Telephone Number/Email Address: (920)746-7153 nscharrig@co.door.wi.us</p>
<p>Brief Description of Duties: This position works closely with the Assistant ADRC Director and will coordinate volunteers, health promotion programs, activities and various events connected to the Aging and Disability Resource Center of Door County.</p>
<p>Name: Wendy Schubert Job Title: Office Assistant Telephone Number/Email Address: 920-746-2523 wshubert@co.door.wi.us</p>
<p>Brief Description of Duties: SAMS data entry, meal counts, transportation coordination, completes various reports as well as receptionist duties.</p>
<p>Name: Arne Thompson Job Title: Cook Telephone Number/Email Address: 920-746-2372 athompson@co.door.wi.us</p>
<p>Brief Description of Duties: Prepares meals according to safe food practices.</p>
<p>Name: Robyn Joly</p>

<p>Job Title: Assistant Cook Telephone Number/Email Address: (920)746-2372 rjoly@co.door.wi.us</p>
<p>Brief Description of Duties: Assists Cook in preparing meals according to safe food practices.</p>
<p>Name: Kathy Ash Job Title: Assistant Cook Telephone Number/Email Address: (920)746-2372 kash@co.door.wi.us</p>
<p>Brief Description of Duties: Assists Cook in preparing meals according to safe food practices.</p>
<p>Name: Jamie Stephan Job Title: Nutrition Site Manager Telephone Number/Email Address: 920-746-2372 jstephan@co.door.wi.us</p>
<p>Brief Description of Duties: Delivers, serves and cleans up at Meal Sites.</p>
<p>Name: Silver Unberham Job Title: Nutrition Site Manager Telephone Number/Email Address: 920-746-2372 sunberham@co.door.wi.us</p>
<p>Brief Description of Duties: Delivers, serves and cleans up at Meal Sites.</p>
<p>Name: Nelvie Cauldwell Job Title: Nutrition Site Manager/Cook Telephone Number/Email Address: 920-847-2522 ncauldwell@co.door.wi.us</p>
<p>Brief Description of Duties: Prepares meals and manages the meal site on Washington Island.</p>
<p>Name: Robin Mark Job Title: Transportation & Accounts Specialist Telephone Number/Email Address: 920-746-2372 rmark@co.door.wi.us</p>
<p>Brief Description of Duties: Responsible for the oversight of the Door to Door Public Transportation System. In addition, the position will perform various and numerous accounting duties, related the ADRC and Aging Programs.</p>
<p>Name: Mary Bink Job Title: Elderly Benefit Specialist Telephone Number/Email Address: 920-746-2546 mbink@co.door.wi.us</p>
<p>Brief Description of Duties: Provides information, assistance and representation to county residents over 60 years and older about their public benefits and a wide variety of programs. Provides direct application assistance and acts as an advocate on their behalf.</p>
<p>Name: Anna Zahorik Job Title: Disability Benefit Specialist Telephone Number: (920)746-2368 Email Address: azahorik@co.door.wi.us</p>
<p>Brief Description of Duties: Responsible for providing information and assistance, counseling, consultation and representation to all county residents between the ages of 18 and 59, regarding public benefits and eligibility requirements of programs available to them. Services provided will meet all the State Department of Health Services' requirements as contained in the <i>Disability Benefit Specialist Program Policies and Procedures</i> and the <i>Disability Benefit Specialist Scope of Services</i> documents.</p>
<p>Name: Lisa VanAlstine Job Title: Information & Assistance Specialist Telephone Number/Email Address: 920-746-2315 lvanalstine@co.door.wi.us</p>
<p>Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community</p>

resources; informing and educating people about their options; and assisting in connecting them to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.

Name: Amber Plautz

Job Title: Information & Assistance Specialist

Telephone Number/Email Address: 920-746-2476 aplautz@co.door.wi.us

Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community resources; informing and educating people about their options; and assisting in connecting them to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.

Name: Kelly Janda

Job Title: Information and Assistance Specialist

Telephone Number/Email Address: (920)746-7154 kjanda@co.door.wi.us

Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information, referral, and assistance to a wide range of community resources; informing and educating people about their options; and assisting in connecting them to programs and services, including public and privately funded options. The Information and Assistance Specialist also provides intake, eligibility determination, and enrollment into and disenrollment from long-term managed care.

Name: Barbara Snow

Job Title: Office Assistant – Human Services – ADRC

Telephone Number/Email Address: 920-746-2544 bsnow@co.door.wi.us

Brief Description of Duties: Responsible for providing the general public, but particularly adults who are elderly, physically disabled, developmentally disabled, or with mental health or substance abuse disorders, with information and assistance about a wide variety of public and privately funded community resources, including referral to the appropriate ADRC staff person(s). Also performs a variety of receptionist / data entry / fiscal / and simple information and assistance functions

Aging Unit Coordination with Aging and Disability Resource Center (ADRC)

Since the move to the new building in 2018, the ADRC and Aging Unit (Senior Resource Center) have worked diligently towards integrating both entities as two separate divisions into one agency functioning together towards a common goal.

Our integration progress gained a lot of momentum in the summer of 2017, when we officially moved to one agency name, "Aging and Disability Resource Center (ADRC) of Door County", one agency phone number, (920)746-2372(ADRC) and one agency email ADRC@co.door.wi.us. Shortly after the changes previously mentioned, the organizational supervision of the Adult Protective Services (APS) Unit was removed from the ADRC Unit.

In August of 2017, we made the decision to restructure a few key positions within our organization to help staff and the community gravitate toward the idea of one program. We started by reclassifying our Aging Program Manager position to Assistant ADRC Director. In October of 2017, Jennifer Fitzgerald was hired as our new Assistant ADRC Director. This position was changed to directly report to the ADRC Director. To date, the Assistant ADRC Director position still oversees the day-to-day operations of our nutrition, family caregiving and health promotion programs for the ADRC of Door County.

Our process in becoming an integrated Aging Unit and ADRC took a little bit of time but continues to have a number of great impacts on the way we provide services to our community. As an organization it has allowed us the ability to become more fluid and break down the old "silos" that once existed between our two aging units. Pulling all services and programs under one organizational roof has simplified the understanding our community holds in what the ADRC can provide.

Our integration efforts are never complete as we continue to work on streamlining our practices and improving the lines of communication between different areas within our organization. However, the decision to become an integrated Aging Unit/ADRC was what allowed us the opportunity to start working on becoming the most effective organization overall.

Statutory Requirements for the Structure of the Aging Unit

[Chapter 46.82 of the Wisconsin Statutes](#) sets certain legal requirements for aging units. Consider if the county or tribe is in compliance with the law. If the aging unit is part of an ADRC the requirements of [46.82](#) still apply.

Organization: The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
(1) An agency of county/tribal government with the primary purpose of administering programs for older individuals of the county/tribe.	
(2) A unit, within a county/tribal department with the primary purpose of administering programs for older individuals of the county/tribe.	X
(3) A private, nonprofit corporation, as defined in s. 181.0103 (17).	
Organization of the Commission on Aging: The law permits one of three options. Which of the following permissible options has the county chosen?	Check One
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.	X
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.	
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.	
Full-Time Aging Director: The law requires that the aging unit have a full-time director as described below. Does the county have a full-time aging director as required by law?	Yes

Role of the Policy-Making Body

The policy-making body, also called the commission on aging, must approve the aging unit plan. Evidence of review and approval of the draft and final version of the aging unit plan must be included as part of the plan. Attach the evidence of this required involvement as an appendix to the aging plan.

Membership of the Policy-Making Body

The commission is the policy making entity for aging services (46.82 (4) (a) (1)) and an aging advisory committee is not the commission. List the membership of the aging unit’s policy-making body using the template provided below and include in the body of the aging plan. There are term limits for the membership of the policy-making body.

Official Name of the County Aging Unit’s Policy-Making Body: Health and Human Services Board

Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Megan Lundahl	No	Yes	2015
Vinni Chomeau	No	Yes	2019
Nissa Norton	No	Yes	2020
Susan Kohout	Yes	Yes	2018
James F. Heise, MD	No	No	2020
Christa Krause	No	No	2020
Mark Moeller	Yes	No	2020
Robert Nau	Yes	No	2015
Morgan Rusnak	No	Yes	2021

Role of the Advisory Committee

Where an aging unit has both an advisory committee (sometimes referred to as the advisory council) and a policy-making body, a key role of the advisory committee is to advise the policy-making body in the development of the plan and to advocate for older adults. Evidence of this involvement should be listed as an attachment in the appendices of the aging unit plan.

Membership of the Advisory Committee

An aging advisory committee is required if the commission (policy-making body) does not follow the Elders Act requirements for elected officials, older adults, and terms, or if the commission is a committee of the county board (46.82 (4) (b) (1)). If the aging unit has an advisory committee, list the membership of the advisory committee using the template provided below and include in the body of the aging plan. 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. There are no term limit requirements on advisory committees.

Membership of the Advisory Committee

Official Name of the County Aging Unit's Advisory Committee: ADRC Advisory Committee

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: Vic Verni	Yes	No	2019
Lucille Kirkegaard	Yes	No	2017
Marie Massart	No	No	2020
Melissa Wolfe	No	No	2016
Tami Leist	No	No	2015
Carol Mollenberndt	Yes	No	2017
Vinni Chomeau	No	Yes	2020
Roxanne Boren	Yes	No	2019
Sandy Brown	Yes	No	2021

Official Name of the County Aging Unit's Advisory Committee: Nutrition Advisory Council

Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: Megan Lundahl	No	Yes	2018
Roxanne Boren	Yes	No	2019
Steve Hey	Yes	No	2019
Winnie Jackson	Yes	No	2019
Nancy Tong	Yes	No	2020
Paul Zenefski	Yes	No	2020
Debbie Dahms	Yes	No	2018

The applicant certifies compliance with the following regulations:

1. Legal Authority of the Applicant

- The applicant must possess legal authority to apply for the grant.
- 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

- The applicant must assure that outreach activities are conducted to ensure the participation of eligible older persons in all funded services as required by the Bureau of Aging and Disability Resources Resource's designated Area Agency on Aging.
- The applicant must assure that each service provider trains and uses elderly persons and other volunteers and paid personnel as required by the Bureau of Aging and Disability Resources Resource's designated Area Agency on Aging.
- The applicant must assure that each service provider coordinates with other service providers, including senior centers and the nutrition program, in the planning and service area as required by the Bureau of Aging and Disability Resources Resource's designated Area Agency on Aging.
- The applicant must assure that public information activities are conducted to ensure the participation of eligible older persons in all funded services as required by the Bureau of Aging and Disability Resources Resource's designated Area Agency on Aging.

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

The applicant must assure that all service providers follow priorities set by the Bureau of Aging and Disability Resources Resource's designated Area Agency on Aging for serving older people with greatest social and economic need.

4. Advisory Role to Service Providers of Older Persons

The applicant must assure that each service provider utilizes procedures for obtaining the views of participants about the services they receive.

5. Contributions for Services

- The applicant shall assure that agencies providing services supported with Older Americans Act and state aging funds shall give older adults a free and voluntary

opportunity to 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 applicant shall provide that the methods of receiving contributions from individuals by the agencies providing services under the county/tribal plan shall be handled in a manner that assures the confidentiality of the individual's contributions.
- The applicant must assure that each service provider establishes appropriate procedures to safeguard and account for all contributions.
- The applicant must assure that 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

- The applicant shall ensure that 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 Area Agency, the county or tribal aging agency, 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 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 Area Agency to safeguard confidentiality of participant information, including those delineated in these rules.
- Appropriate precautions shall be taken to protect the safety of all files, microfiche, computer tapes and records in any location which contain sensitive information on individuals receiving services under the State or area plan. 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 Area Agency on Aging. 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 Resource's authorized Area Agencies on Aging 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 and Family Services, Division of Supportive Living, 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 Area Agency on Aging 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.

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 aging 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.

Wisconsin Statutes Chapter 46.82 Aging unit.

“Aging unit” means an aging unit director and necessary personnel, directed by a county or tribal commission on aging and organized as one of the following:

- (1) An agency of county or tribal government with the primary purpose of administering programs of services for older individuals of the county or tribe.
- (2) A unit, within a county department under s. 46.215, 46.22
- (3) or 46.23, with the primary purpose of administering programs of
- (4) services for older individuals of the county.
- (5) A private corporation that is organized under ch. 181 and
- (6) that is a nonprofit corporation, as defined in s. 181.0103 (17).

Aging Unit; Creation. A county board of supervisors of a county, the county boards of supervisors of 2 or more contiguous counties or an elected tribal governing body of a federally recognized American Indian tribe or band in this state may choose to administer, at the county or tribal level, programs for older individuals that are funded under 42 USC 3001 to 3057n, 42 USC 5001 and 42 USC 5011 (b). If this is done, the county board or boards of supervisors or tribal governing body shall establish by resolution a county or tribal aging unit to provide the services required under this section. If a county board of supervisors or a tribal governing body chooses, or the county boards of supervisors of 2 or more contiguous counties choose, not to administer the programs for older individuals, the department shall direct the Area Agency on Aging that serves the relevant area to contract with a private, nonprofit corporation to provide for the county, tribe or counties the services required under this section.

Aging Unit; Powers and Duties. In accordance with state statutes, rules promulgated by the department and relevant provisions of 42 USC 3001 to 3057n and as directed by the county or tribal commission on aging, an aging unit:

(a) *Duties.* Shall do all of the following:

1. Work to ensure that all older individuals, regardless of income, have access to information, services and opportunities available through the county or tribal aging unit and have the opportunity to contribute to the cost of services and that the services and resources of the county or tribal aging unit are designed to reach those in greatest social and economic need.
2. Plan for, receive and administer federal, state and county, city, town or village funds allocated under the state and area plan on aging to the county or tribal aging unit and any gifts, grants or payments received by the county or tribal aging unit, for the purposes for which allocated or made.
3. Provide a visible and accessible point of contact for individuals to obtain accurate and comprehensive information about public and private resources available in the community which can meet the needs of older individuals.
4. As specified under s. 46.81, provide older individuals with services of benefit specialists or appropriate referrals for assistance.
5. Organize and administer congregate programs, which shall include a nutrition program and may include one or more senior centers or adult day care or respite care programs, that enable older individuals and their families to secure a variety of services, including nutrition, daytime care, educational or volunteer opportunities, job skills preparation and information on health promotion, consumer affairs and civic participation.
6. Work to secure a countywide or tribal transportation system that makes community programs and opportunities accessible to, and meets the basic needs of, older individuals.
7. Work to ensure that programs and services for older individuals are available to homebound, disabled and non-English speaking persons, and to racial, ethnic and religious minorities.
8. Identify and publicize gaps in services needed by older individuals and provide leadership in developing services and programs, including recruitment and training of volunteers, that address those needs.
9. Work cooperatively with other organizations to enable their services to function effectively for older individuals.
10. Actively incorporate and promote the participation of older individuals in the preparation of a county or tribal comprehensive plan for aging resources that identifies needs, goals, activities and county or tribal resources for older individuals.
11. Provide information to the public about the aging experience and about resources for and within the aging population.
12. Assist in representing needs, views and concerns of older individuals in local decision making and assist older individuals in expressing their views to elected officials and providers of services.

13. If designated under s. 46.27 (3) (b) 6., administer the long-term support community options program.
14. If the department is so requested by the county board of supervisors, administer the pilot projects for home and community –based long-term support services under s. 46.271.
15. If designated under s. 46.90 (2), administer the elder abuse reporting system under s. 46.90.
16. If designated under s. 46.87 (3) (c), administer the Alzheimer’s disease family and caregiver support program under s. 46.87.
17. If designated by the county or in accordance with a contract with the department, operate the specialized transportation assistance program for a county under s. 85.21.
18. Advocate on behalf of older individuals to assist in enabling them to meet their basic needs.
19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate the resource center.
20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.284 (1) (a) 1., apply to the department to operate a care management organization under s. 46.284 and, if the department contracts with the county under s. 46.284 (2), operate the care management organization and, if appropriate, place funds in a risk reserve.

(b) Powers. May perform any other general functions necessary to administer services for older individuals.

(4) Commission on Aging.

(a) Appointment.

1. Except as provided under subd. 2., the county board of supervisors in a county that has established a single-county aging unit, the county boards of supervisors in counties that have established a multicounty aging unit or the elected tribal governing body of a federally recognized American Indian tribe or band that has established a tribal aging unit shall, before qualification under this section, appoint a governing and policy-making body to be known as the commission on aging.

2. In any county that has a county executive or county administrator and that has established a single-county aging unit, the county executive or county administrator shall appoint, subject to confirmation by the county board of supervisors, the commission on aging. A member of a commission on aging appointed under this subdivision may be removed by the county executive or county administrator for cause.

(b) Composition.

A commission on aging, appointed under par. (a) shall be one of the following:

1. For an aging unit that is described in sub. (1) (a) 1. or 2., organized as a committee of the county board of supervisors, composed of supervisors and, beginning January 1, 1993, advised by an advisory committee, appointed by the county board. 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.

2. For an aging unit that is described in sub. (1) (a) 1. or 2., 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.

3. For an aging unit that is described in sub. (1) (a) 3., 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.

(c) Terms.

Members of a county or tribal commission on aging shall serve for terms of 3 years, so arranged that, as nearly as practicable, the terms of one-third of the members shall expire each year, and no member may serve more than 2 consecutive 3-year terms. Vacancies shall be filled in the same manner as the original appointments. A county or tribal commission on aging member appointed under par. (a) 1. may be removed from office for cause by a two-thirds vote of each county board of supervisors or tribal governing body participating in the appointment, on due notice in writing and hearing of the charges against the member.

(c) Powers and duties.

A county or tribal commission on aging appointed under sub. (4) (a) shall, in addition to any other powers or duties established by state law, plan and develop administrative and program policies, in accordance with state law and within limits established by the department of health and family services, if any, for programs in the county or for the tribe or band that are funded by the federal or state government for administration by the aging unit.

Policy decisions not reserved by statute for the department of health and family services may be delegated by the secretary to the county or tribal commission on aging. The county or tribal commission on aging shall direct the aging unit with respect to the powers and duties of the aging unit under sub. (3).

(5) Aging Unit Director; Appointment. A full-time aging unit director shall be appointed on the basis of recognized and demonstrated interest in and knowledge of problems of older individuals, with due regard to training, experience, executive and administrative ability and general qualification and fitness for the performance of his or her duties, by one of the following:

(a) 1. For an aging unit that is described in sub. (1) (a) 1., except as provided in subd. 2., a county or tribal commission on aging shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each

county board of supervisors or the tribal governing body that participated in the appointment of the county or tribal commission on aging. 2. In any county that has a county executive or county administrator and that has established a single-county aging unit, the county executive or county administrator shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors that participated in the appointment of the county commission on aging.

(b) For an aging unit that is described in sub. (1) (a) 2., the director of the county department under s. 46.215, 46.22 or 46.23 of which the aging unit is a part shall make the appointment, subject to the personnel policies and procedures established by the county board of supervisors.

(d) For an aging unit that is described in sub. (1) (a) 3., the commission on aging under sub. (4) (b) 3. shall make the appointment, subject to ch. 181.

Appendices:



Attachment 1: Community Engagement Report – ADRC Questionnaire

Complete one worksheet for each separate method used to elicit input from the community. i.e. 12 interviews conducted can be compiled on one sheet. At least two methods must be used.

Your County or Tribe: Door County	Date/s of Event or Effort: March 1st – May 31st, 2021
Target audience(s): Door County Residents and Seasonal Visitors 18 years of age and older	Number of Participants/ Respondents: 353 Responses
<p>Describe the method used including partners and outreach done to solicit responses:</p> <p>The method used to gather feedback was a community-wide questionnaire/survey distributed both in paper and electronically through SurveyMonkey. The questionnaire was included in our March and April monthly newsletters, posted on our ADRC Facebook Page, shared on our ADRC website and sent to all local media outlets (newspapers/radio stations). The questionnaire was also included in the county’s newsletter that is sent to all county and city of Sturgeon Bay employees. In addition, we asked the following community partners to help us distribute the questionnaire: Learning in Retirement (LIR), PFLAG Door County, Washington Island Community Health Program (WICHP), Door County Public Transportation Department and Neighbor-to-Neighbor (Loan Closet). The community-wide questionnaire was developed by team members from the ADRC in partnership with a group of members from both the Nutrition and ADRC Advisory Committees. We are pleased at the response rate for this community-wide questionnaire compared to the 180 responses we received back in 2018.</p>	
<p>Describe how the information collected was used to develop the plan:</p> <p>The feedback gathered through the community-wide questionnaire was used to develop our goals outlined in that section of our next 2022-2024 Three-Year Aging Plan. Specifically, we used the feedback we received from the questionnaire to focus on the creation of more social opportunities for individuals to stay connected to friends, family and the community at-large, the development of a volunteer chore program and expanding the services and programs we are offering in communities outside of Sturgeon Bay.</p>	

What were the key takeaways/findings from the outreach?

The following is a summary of our findings and key takeaways:

- Of the 353 responses we received 60% were from individuals living in or around the Sturgeon Bay area, 21% were from the Northern Door County area, 11% were from the Southern Door County area and 8% were from Washington Island.
- We received the greatest response rate from the 70-79 age group at 46%. The next greatest response came from the 60-69 age group at 28% followed by the 80-89 age group at 16%. And then about 5% from the 90+ age group.
- When asked where do you gather information about Door County's programs and services (Check all that apply)? 87% stated they look to the Peninsula Pulse's publication and website. The next most popular avenue for information was Facebook at 45% and then WDOR Radio Station at 33%. We received a lot of write-in feedback from individuals who receive their information from our monthly newsletter and through word-of-mouth.
- We asked how the COVID-19 pandemic impacted folks the most and 90% selected staying connected with friends and family as the greatest impact followed by 47% of people stating regular physical fitness. 27% of respondents claimed that their mental health was also impacted by the pandemic.
- The top three most utilized ADRC programs/services: 45% of respondents received a dine-in/carryout meal, 28% of respondents received information and assistance finding resources and 25% participated in some sort of social opportunity (events, activities, trips...).
- Roughly 36% of respondents live alone and almost 98% feel they have enough support and/or resources to live safe and independent at home.
- The top three major issues facing older adults living in Door County are the following: 1.) Transportation, 2.) Loneliness/Opportunities to interact/Staying connected to friends/family, 3.) In-Home Support. Affordable Housing and Physical Fitness were also areas of concern.
- When asked, "Is Door County meeting the needs and challenges of older adults and what additional services and programs would improve the lives of older adults and adults living with a disability?" we received the most feedback around the following issues or concerns:
 1. Socialization Opportunities/Staying Connected
 2. Chore/In-Home Help/Respite Care
 3. Expanding services and programs to other areas besides Sturgeon Bay

Attachment 2: ADRC Questionnaire

Aging and Disability Resource Center (ADRC) of Door County Questionnaire

We want to hear from you!

Every three years, the Aging and Disability Resource Center (ADRC) of Door County is required by the State of Wisconsin to complete a strategic plan that serves as a platform to create, improve and expand services we provide our community. This living document is known as our "Three Year Aging Plan" and the new plan will cover 2022-2024.

Our staff and advisory committee members participate in the development of this plan, but input and feedback from you is extremely valuable.

Your response is a key element in determining how we are currently doing in serving our community, in identifying areas of program improvement and in coming up with creative ways to fill existing service gaps. It also allows an opportunity for those who are affected by or interested in an issue to be involved in decision-making.

You can also fill out the survey online: <https://www.surveymonkey.com/r/V2J9QJ3>

We hope everyone is staying safe. You are not alone!

Please do not hesitate to call us at (920)746-2372 if you need any additional support or you would like help filling out the questionnaire.

1. Where in Door County do you reside?

- Northern Door Washington Island Southern Door Sturgeon Bay

2. What age bracket are you in?

- Under 30 30-39 40-49 50-59 60-69 70-79 80-89 90+

3. Where do you gather information about Door County's programs and services? (Check all that apply)

- WDOR Radio Station/Website WBDK Radio Station/Website 106.9 Lodge Radio Station/Website
 Peninsula Pulse Newspaper/Website Facebook (i.e. Social Media) Other: _____

4. In what ways has the COVID-19 pandemic impacted your life the most? (Check the top three)

- Mental Health Access to Food/Groceries Financial Security Staying Connected to Family/Friends
 Regular Physical Activity Access to Healthcare In-Home Support Other: _____

5. What Aging and Disability Resource Center (ADRC) services have you received? (Check all that apply)

- Caregiving Support Fitness Room / Exercise Classes Information & Assistance Finding Resources
 Fall Prevention Resources Applying for FamilyCare Social Opportunities (Events, Activities, Trips...)
 Help applying for: BadgerCare, FoodShare, Social Security Programs (SSI/SSDI), Long Term Care Programs...
 Dine-in Meals / Carryout Meals Frozen / Hot Home Delivered Meals Tax Preparation
 Medicare Open Enrollment None Other: _____

6. Do you live alone?

Yes No

7. Do you have enough support and/or resources you need to live safe and independent at home?

If not, please explain why. Yes No, why: _____

8. What do you feel are the main challenges for older adults living in Door County? (Check all that apply)

- Housing Nutrition/Food Resources Finding In-Home Support Caregiver Support
- Transportation Physical Activity Dementia Opportunities to Interact with Others
- Loneliness Mental Health Staying Connected to Friends/Family Financial Security
- End of Life Preparedness Other: _____

9. What do you feel are the main challenges for adults living with a disability in Door County? (Check all that apply)

- Access to Healthcare Housing Nutrition/Food Resources Employment/Job Training
- Physical Activity Staying Connected to Friends/Family Finding In-Home Support
- Financial Security Opportunities to Interact with Others Transportation Mental Health
- Other: _____

10. Are you are interested in participating in a one-on-one follow up call or a small virtual group discussion to talk about the main issues and challenges older adults and adults living with a disability face living here in Door County? If yes, please provide us your contact information:

Name: _____ Phone Number: _____

11. Is Door County meeting the needs and challenges of older adults and adults living with a disability? What additional services and programs would improve the lives of older adults and adults living with a disability in our community? Please share your thoughts and ideas below.



Attachment 3: Community Engagement Report – Small Group Listening Sessions

Complete one worksheet for each separate method used to elicit input from the community. i.e. 12 interviews conducted can be compiled on one sheet. At least two methods must be used.

Your County or Tribe: Door County	Date/s of Event or Effort: June 22 nd , June 25 th , July 14 th and July 23 rd , 2021
Target audience(s): Door County Residents and Seasonal Visitors 60 years of age and older	Number of Participants/ Respondents: 40
Describe the method used including partners and outreach done to solicit responses:	
<p>The second method used to gather community feedback was a series of small group listening sessions. Ten questions were developed by our ADRC and Nutrition Advisory Committee members. After the ten questions were finalized, we scheduled 4 listening sessions held at the Brussels Community Center, Baileys Harbor Town Hall, Washington Island Community Center and the ADRC building in Sturgeon Bay. Each listening session was co-facilitated by the Director of the ADRC and one member from either our ADRC or Nutrition Advisory Committee. We personally invited those who expressed an interest on the questionnaire to join us for one of the small group discussions.</p>	
Describe how the information collected was used to develop the plan:	
<p>The feedback we gathered and compiled after conducting the small group listening sessions was used to develop our goals outlined in that section of our next 2022-2024 Three-Year Aging Plan. Specifically, we used the feedback we received from the small group listening sessions to focus our efforts around the following issues or concerns: social isolation and staying more connected to the community, friends and family; the expansion of our home delivered meal program at every meal site; expanding our activity/services/programs offered to other communities throughout the county; the development of a volunteer chore program and in helping increase the respite care options that exist in our community.</p>	
What were the key takeaways/findings from the outreach?	
<p>Here is a summary of the key takeaways and findings as a result of the four listening sessions.</p> <ol style="list-style-type: none"> 1. What do you like best about the community in which you live? <ul style="list-style-type: none"> • Friendly, Neighborly, Small Town Feel, Safety, Inter-generational Opportunities, Access to Great Healthcare, Philanthropy is Highly Valued, Restaurants Available, Large Variety of Activities 2. What activities in the community are making lives better for older adults? <ul style="list-style-type: none"> • YMCA, ADRC Programs and Building, Concerts, Quality Medical Facility and Hospital, Learning in Retirement, Farmer’s Markets, Door-to-Door, Door-Tran and County Transportation Program, Meals on Wheels, Number of Dedicated Community-Based Organizations for Size of County, Lots of Volunteer Opportunities, Library System 3. What are some services or ideas that make your community easier or more enjoyable for you to live in? 	

- A lot of the same answers to question #3 were also provided for question #2.
4. What do you think are the main issues, problems and challenges facing older adults in your community?
 - Transportation, loneliness and social isolation, lack of assisted living facilities and skilled nursing facilities, affordable housing, medical records are not located in central place, general public's lack of resource and program knowledge, help with chores or household tasks, falls and home accessibility, lack of in-home care and nutrition
 5. What are the biggest challenges to remaining in your home?
 - Finding help with activities of daily living and chores, transportation, help with small repairs around the house and lawn care, inability to use technology or no internet access depending on where you live, mobility or accessibility, overall health, living alone
 6. What do you think you will need in the future to help you remain as independent as possible?
 - Access to enough in-home care, contracted caregivers, household chores and people to help with home repairs, affordable assisted living, transportation, shopping and errand assistance, affordable legal help and financial assistance, meals on wheels
 7. What does healthy aging mean to you?
 - Independence, making my own decisions, not embarrassed when asking for help, staying active, being with people and staying connected to community, knowing when not to drive, access to primary and specialized care, mental health resources, remaining in my own home for as long as I can, having a place to go to ask questions and get support when needed, admitting I need help
 8. What would you like your ADRC to do to promote healthy aging in our communities?
 - More group activities, helping with transportation to activities and medical appointments, internet availability for everyone, continued outreach and community resource education, offer discussion groups/classes for broadening viewpoints and perspectives, weekly article in the Peninsula Pulse, legal assistance, Medicare assistance, advocacy help, home repair needs, helping the community understand what aging is all about, more social opportunities besides Sturgeon Bay, provide healthy meals
 9. Are you currently serving as a caregiver for a spouse, family member or friend? If yes, what resources are most important for the county to provide?
 - Providing meals, help getting time away as a caregiver, more respite care options, someone to listen to you about your day and challenges, a phone call for help if needed – not an emergency
 10. What services could the ADRC add to better serve Northern/Southern Door County and Washington Island?
 - Provide lists and contact information for part-time caregivers, serving meals on wheels or additional congregate meal days at existing meal sites, transportation, advocacy help with legal/financial/medical issues, list of people who can help around the house with repairs or chores, more outreach events to discuss community resources, more bus trips/social activities/programs, free-tax preparation, in general offer the same kind of activities/events/programs you do in Sturgeon Bay but elsewhere in the county