

# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Colonial Club Senior Activity Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Gail Brooks, Case Management Coordinator

Phone & Email:

608-837-4611 ext. 127 / gbrooks@colonialclub.org

Provide comments on:

**Emerging Trends** (in our area during this quarter):

Referrals for 2 homeless older adults. One now has housing in place. Once again had to move out of desired area to find available subsidized housing.

Housing - Need for alternate independent housing due to: 1) Increased frailty, thus having increased ability to safely manage where currently living. Usually involves homes with stairs or other reasons why no longer senior friendly. 2) Unable to continue to afford current rent. 3) Non-renewal of leases (one is 87 years old having to find affordable housing after living in housing for 30+ years). 4) More people moving into our service area.

More complex caregiving situations where sudden changes in health of care recipient leads to immediate need for assistance. We are seeing an increase in working spouses and/or children trying to fill in the gap while plan is developed and put in place. They are having to take off extensive amount of time from work. A number of these referrals have also involved working with ADRC to get Partnership program in place to help pay for adult day services, in-home care and assisted living.

Also complex caregiving referrals regarding spouses trying to care for each other and both are in need of support and assistance.

Seeing an increase in referrals from complex case management programs for individuals with a lot complex medical and safety concerns via area clinics and home health agencies such as SSM Health Dean and UW Health.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Limited resources and extensive time as a result: Affordable and/or subsidized housing available in our service area. Although there may be some availability outside City of Sun Prairie, some of the surrounding communities do not have a grocery store or other helpful services that would benefit older adults.

Extensive time assisting homeless older adults to find housing, even short-term as they share they do not feel safe going to a shelter. There often are medical concerns and need for obtaining medical care and medications. Had very good success partnering with Community Action Coalition to find long-term subsidized housing for one of our clients.

Extensive time, particularly in the beginning, when developing a plan of care for complex caregiving situations due to immediate safety concerns that need to be addressed. Often working with multiple individuals who have limited availability to get together or help due to work, family and other obligations. Also can be time-consuming when working with multiple individuals (often family members) who have very differing opinions regarding the needs for the care recipient(s).

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

**E-mail completed report by 10 April 2018, 10 July 2018, 10 October 2018, and 10 January 2019 to: [aaa@countyofdane.com](mailto:aaa@countyofdane.com)**

# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

DeForest Area Community & Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Natalie Raemisch

Phone & Email:

846-9469 nraemisch@deforestcenter.org

Provide comments on:

**Emerging Trends** (in our area during this quarter):

People looking for DME equipment. Hospital discharges needing HDM and services. People with memory loss. Their families needing guidance and not understanding the limitations their loved one has. Taxes, taxes, taxes! People come to us with incorrect insurance combinations and insurance they do not need.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Need dental care. Limited income means no savings for dental costs and dental insurance cost is too high.  
People needing HUD housing with increasing waitlists.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

East Madison/Monona Coalition of the Elderly

Reporting Period:

Quarter 1 (January-March)

Reported by:

Sonya Lindquist

Phone & Email:

608-223-3103 SonyaL@emmca.org

Provide comments on:

**Emerging Trends** (in our area during this quarter):

Issues that were new to EMMCA or to our service area in the first quarter of 2018 were:

1. EMMCA's lead case manager resigned to move with family to Illinois. During first quarter of 2018 the case managers did warm transfers of critical clients from the lead case manager to other case managers. During second quarter EMMCA is transitioning to a new lead case manager (who is a former EMMCA case manager).
2. EMMCA has been involved in the roll out of the database to all of the other Madison Coalitions. This has involved the lead case manager's time with training and trouble-shooting and also time spent with making upgrades and improvements to the database.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Significant EMMCA client issues in the 1st quarter of 2018:

- 1) Clients with dementia who are having difficulty securing food, ordering and taking their medications, scheduling and remembering doctor's appointments, scheduling and remembering transportation to doctor's appointments, and remembering to pay for bills. There has been virtually no family support for these clients, so the brunt of the leg work has been on case management and community members.
- 2) Financial Support-Rep Payee. Difficulty setting client up with a rep payee. Communicating with the client, the family supports, the bank and the rep payee was time consuming and involved a good deal of work to ensure the client was ready and able to make this transition.
- 3) Social Isolation. Few resources for friendly visiting there is a need for more social contact with individuals who have few natural supports. More transportation to activities is needed.
- 4) Transportation. Madison seniors cannot get transportation directly to the Monona Senior Center.
- 5) Advocacy for individual clients who have issues with quality of service at a hospital or at their apartment.
- 6) Mental Health/AODA issues. Providing support for clients with Mental Health and/or AODA issues. Clients may no longer have natural supports or formal supports to work with. In some cases resources are available for the clients, but the client chooses not to use them. This complicates the case manager's work.
- 7) Affordable In Home Care or Supportive Home Care. There is not enough affordable in home care for cleaning or help with Activities of Daily Living. Setting up and maintaining In Home Care or Supportive Home Care also is complicated by clients who have conflicts with these caregivers.
- 8) Housing issues:
  - 8a) Homelessness and lack of affordable housing. Seniors who want to move into affordable housing from another housing situation or from a homeless situation are limited by the lack of available resources.
  - 8b) Affording Energy Services. This quarter, several clients have discussed their high energy bills with case managers. Case managers have signed up about 4 seniors for energy assistance and crisis assistance through the Wisconsin Heating Energy and Assistance Program to help offset those costs.
  - 8c) Hoarding. Several clients have hoarding issues. It is difficult to find resources to help them with cleaning and organizing.
  - 8d) Moving issues. The expense of moving is overwhelming for many seniors. For example one senior, who recently moved into a new apartment, was sleeping in her recliner because she could not afford to buy a bed and did not have the finances or the means to transport the bed she did have that was in a storage locker to her new apartment.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

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Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Fitchburg Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Sarah Folkers & Amy Jordan

Phone & Email:

270-4290 sarah.folkers@fitchburgwi.gov amy.jordan@fitchburgwi.gov

Provide comments on:

**Emerging Trends** (in our area during this quarter):

Hoarding - clients who have neglected to keep their apartments clean and who then find themselves in crisis (either medical or housing crises)

Transportation - we are limited in how many rides we can provide to each client through RSVP due to the large number of requests we receive every month, which poses a problem for those clients who have multiple appointments such as therapy, wound care, and cancer treatments

Lease non-renewals - we have experienced an increase in clients who are being non-renewed

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

When a client who has no family in the area is hospitalized and (sometimes) sent to a SNF for rehab, it can be time-consuming. They need someone to check their mail, bring them items from home, and ensure their bills get paid while they are away from home.

When a client is non-renewed, it can be time-consuming as they then contact us for housing options. It is especially difficult when the person needs subsidized housing, as we are all aware of the significant lack in Dane County.

Hoarding situations can be time-consuming, and there are limited resources to help people in these situations. Unless the client has their own finances or they have family able to help, it can be extremely difficult to help these clients get cleaned up.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam:

Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

McFarland Senior Outreach Services

Reporting Period:

Quarter 1 (January-March)

Reported by:

Lori Andersen

Phone & Email:

608-838-7117 lori.andersen@mcfarland.wi.us

Provide comments on:

**Emerging Trends** (in our area during this quarter):

We have seen more need working with caregivers. It has always been an integral part of what we do but it is getting to be a lot more involvement with the caregivers sometimes than with the client themselves. This is definitely true with when working with families affected by dementia but we have been seeing partner situations in which one spouse is caring for an individual with serious, sometimes terminal chronic illnesses. We have utilized the caregiver resources and the ADRC along with referral for palliative or hospice care when appropriate but usually this is after we have long established a relationship with them.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

We have seen more clients that are totally estranged from family making us their primary support. At other times the family is so dysfunctional that it requires legal and police interventions. We had two separate women who took out restraining orders on their adult children due to their mental health status impacting them. There was no other support from family members on these as both families were either embroiled in the problem or had dysfunctional responses to the behavior putting the parents at further risk. It also placed the case manager in a adversarial role.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

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Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Middleton Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Kathy Lauer & Jill Shonenberger

Phone & Email:

831-2373 klauer@cityofmiddleton.us; jshonenberger@cityofmiddleton.us

Provide comments on:

**Emerging Trends** (in our area during this quarter):

We saw many, many loan closet requests.

We are also saw many people looking for assistance as they turn 65 and have to sign up for Medicare etc.

We are talking with many individuals and families who are dealing with dementia and memory loss.

We are talking to numerous people looking for apartments in our area.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Available lower cost apartments is something that is very difficult to find without a long wait.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

North/Eastside Senior Coalition

Reporting Period:

Quarter 1 (January-March)

Reported by:

Susy Cranley

Phone & Email:

608-243-5252 ext. 212 Scranley@charter.net

Provide comments on:

**Emerging Trends** (in our area during this quarter):

Frequent requests for information and assistance were for affordable housing, Medicare Assistance Programs and Foodshare renewals, in-home chore assistance, dementia care and Caring for the Caregiver funds.

*late*

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Our Case managers have received referrals for complex cases of seniors with mental illness and seniors struggling to find resources for financial/retirement planning, transportation, and homelessness. Assistance for clients who are home-bound and isolated due to complicated medical issues (such as diabetes), and the need for Dementia care and respite also continue to require extensive time for our Case Managers. Seniors also continue to need assistance with Medical appointment coordination and rides. There is currently no wait list for NESCO Case Management.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Northwest Dane Senior Services

Reporting Period:

Quarter 1 (January-March)

Reported by:

Vicki Beres, Case Manager

Phone & Email:

608-798-6937x-223; cmnwdss@tds.net

Provide comments on:

## **Emerging Trends** (in our area during this quarter):

### **Tax Preparation & Homestead Credit Assistance:**

--NWDSS (in conjunction with AARP Free Tax Aide) provided tax prep and homestead credit assistance to area/rural residence. Our site served 31 participants (please note, this service was available to all ages; 28 of which were seniors over age 60).

### **In-Home Care:**

--We continue to see older adults/seniors in our community struggle to stay in their homes due to several factors:

1. ADLs do not meet SNF level of care for Partnership enrollment
  - 1a. Family Care is currently not a option due to wait list
2. Partnership financial eligibility may be a few hundred dollars over the limit, but also lack the funds necessary to pay for care on a long-term basis
4. Many in-home agencies do not serve rural NW Dane County (even though they say they serve all of Dane County)
5. In-home agencies are challenged with staff turn-over, leading to inconsistent care of the senior. This leads to a burden on family/friends; often the agency is dismissed by the family.

### **Dementia:**

--We are seeing a increase in seniors diagnosed, a need for Adult Day Programming, in-home support and services.

--Those currently living alone with Dementia that may not yet have been diagnosed and have no family/friends to support their need for a diagnosis, in-home care, POA agents, Rep Payee etc.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

MADA & MAPP (loss of SLMB benefits):

--complicated matters related to application(s), proof needed and timeliness of application process both at CPDU & Disability Determination Bureau.

Senior living with a diagnosis of Dementia Unspecified:

--no family (limited friendships), POA-H agents have withdrawn, which has proven a challenge for health providers for cataract surgery administration; Elder abuse involved on/off over the years; refuses to eat properly or take medications for health conditions; has had a revoked DL on/off; refuses to work with Rep Payee; found to be functionally ineligible for Partnership.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs: 4.00

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program: 0.00

Number of individuals counseled regarding reporting & repairing finances after a scam 2.00

Number of First Responders Dementia Forms completed 0.00

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Oregon Area Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Carol Bausch

Phone & Email:

608-835-5801 cbausch@vil.oregon.wi.us

Provide comments on:

**Emerging Trends** (in our area during this quarter):

The Oregon Case Management office is seeing a rise in the number of people needing case management services who are on Medical Assistance. They arrive at the office with complex needs and they usually have few resources to meet those needs. Often they do not know what benefits they have and are looking for clarification, but sometimes they want help with renewal of benefits. Other needs include housing issues, transportation and assistance contacting care providers.

Another trend has been families wanting to work on transitioning their loved ones with dementia, either into a day program or into another living environment with the help of Oregon Case Managers to ensure it happens smoothly.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Securing low rent housing in Oregon has been an issue. Due to the destruction of one of the low income rental places, the folks living there are seeking other housing options in our area. However it is difficult to find options as Oregon has very little to offer. People who had been living in this complex may have jobs, doctors etc. in this community and don't want to have to leave. Some of them have no transportation options beyond their feet or a bicycle, so moving farther away would be hugely disruptive to their lives.

Also, securing additional resources for clients with incomes just above the poverty level takes extensive time. We have folks that have incomes just dollars above qualifying for benefits, therefore we need to be creative to find supports to help maintain their independence in community living.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

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Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

South Madison Coalition of the Elderly

Reporting Period:

Quarter 1 (January-March)

Reported by:

Kari Davis, Case Manager Supervisor

Phone & Email:

251-8405 x25, davis@smcelder.com

Provide comments on:

**Emerging Trends** (in our area during this quarter):

In the first quarter of 2018 we had 21 new intakes and 10 HDM intakes. January had 5 intakes and 3 HDMs, February had 7 intakes and 2 HDMs and March had 9 intakes and 5 HDMs.

Our wait list for case management services has increased to 8 weeks. The wait list increase is due to having a new case manager and our agency transitioning out of a long term care program and merging with the 3 other Madison focal points. As we transition from LTC and into a new agency in 2019 there are staff that have been with SMCE but need retraining in the General case management program.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

The client's that are taking up a significant amount of case management time (10 or more hours of CM time in a month) are those with mental health, AODA, significant health, housing issues and those cases where guardianship or LTC referrals are needed. We are always trying to make appropriate referrals to mental health CM programs and the ADRC for LTC assessments. Our focal point service area continues to focus on diversity and poverty and thus work with many older adults with complex case management needs.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Southwest Dane Senior Outreach

Reporting Period:

Quarter 1 (January-March)

Reported by:

Lynn Forshaug

Phone & Email:

608-437-6902

Provide comments on:

**Emerging Trends** (in our area during this quarter):

We have been connecting seniors and their families with private caregivers. We have been lending out lots of adaptive equipment to seniors who are having surgery. Some seniors who have not participated in our meal programs for awhile are coming in for our congregate meals and getting signed up again for our home-delivered meals. We have also been connecting seniors with Energy Assistance, who are needing some extra help with paying their heat bills.

Carrie has signed on a few more Case Management clients since January.

Lynn has helped some seniors renew their SOS, Food Share and Senior Care plans.

We deliver 18 CAC Food boxes monthly to seniors who qualify.

Carrie has been working with a client and and this client's housing management to improve her personal cares and living conditions.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

Carrie continues to spend lots of time working with seniors who have been scammed either by strangers and or family members to get their finances back on track. It has been a nightmare getting all their information together, like credit cards, banks, vendors the seniors work with, etc.

Carrie has also been working with families, caregivers, medical personnel, etc. of clients with dementia and getting services for them.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

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Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Stoughton Area Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Hollee Camacho

Phone & Email:

(608) 873-8585, hcamacho@ci.stoughton.wi.us

Provide comments on:

**Emerging Trends** (in our area during this quarter):

- The new smoking ban in buildings has been both positive for non-smoking seniors and concerning for the smokers.
- There have been complaints from homeless consumers calling us for resources and not being able to access the Dane Co. Emergency Housing information when they need it.
- Some seniors not addressing health issues because they are uninsured (under Medicare age/no disability determination) or reluctant to go the doctor. The reluctance seems to include a mistrust of clinical health professionals, not wanting to report health changes because they fear that their doctor may tell them they should no longer be living independently. Some seniors are using alternative supplements/medicine as a replacement for actual medical care due to being uninsured.
- Housing availability (subsidized/low income and handicap adapted) continues to be an issue.
- Dealing with several individuals with severe dementia, and needing to collaborate with multiple family members and area businesses and organizations to ensure client safety.
- Clients with multiple medical problems who are not always compliant with their care needs. Lack of good fall prevention strategies or poor nutrition leading to serious medical events or falls.
- Many wheelchairs and bath bench loan closet rentals

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

- Several clients with diagnosis of Alzheimer's/Dementia and their caregivers are overwhelmed, very stressed. Caregivers can sometimes seem "frozen", so overwhelmed that they are not readily accepting help such as respite, information and assistance on resources, etc. They are finding long-term planning difficult. Often times, people are waiting to ask for help until they are beyond the breaking point and they or their loved one gets sick.
- Housing issue/lack of affordable housing still an issue; difficult for people to find.
- Untreated AODA and mental health issues that interfere with clients ability to make good decisions is still a concern. Clients are often not willing or able to participate in complete sharing of information/history.
- Low income clients consistently making bad financial decisions and not wanting to change behavior. In turn they may communicate to the community that we were not helpful.
- A client with dementia is struggling with the transition to CareWI; calling us multiple times a day and not recollecting her visit or contacts with CareWI staff.
- Difficulty finding support for people with very limited monthly income, who are in need of housing repairs. Staff are finding that community agencies that assist with repairs have long waiting lists, grant money has been used, and/or the person does not qualify.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam:

Number of First Responders Dementia Forms completed

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Sugar River Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Tressa Proctor, CM

Phone & Email:

(608) 424-6007 / tressa.srseniorcenter@outlook.com

Provide comments on:

**Emerging Trends** (in our area during this quarter):

As to be expected, CM experienced an increase in individuals looking for tax preparation and filing resources. CM worked with a client that required extra time and resource connection due to owning and operating a dairy farm. This client's husband suddenly passed away last winter. CM was largely in contact with a representative from the Wisconsin US Dept of Agriculture - Farm Service Agency (USDA-FSA).

Another trend this quarter; CM is providing more in-depth assistance to current clients that are being affected by the Family Care/IRIS/Partnership transition. This assistance has involved phone calls and emails to other professionals mostly while with a client to gather more information about their current transition status. CM has one client in particular that was receiving Supportive Home Care funding and CM/client are still working on determining what the status of this participant's file is.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

CM has had a couple clients recently with serious, untreated tooth/mouth issues; one client is 68 and a veteran and other is 92 and not a veteran. CM has spent an extensive amount of time working with the VA and writing a medical grant for needy veterans through the VA system. CM and client were informed they were number #2 to gain approval for this grant in this particular VSO's (Veteran Service Officer) almost 18 year career. This client has happily had their teeth fixed. Due to the cost of dental care both clients have put themselves in risky situations regarding their health. Most recently, the ongoing refusal to get infected teeth pulled in combination with rapidly declining health, very frequent calls to local EMS, various well-checks from Dane County Sheriff, and the initiation of an EAN report, eventually landed CM's 92 year client in the hospital.

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# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

Waunakee Senior Center

Reporting Period:

Quarter 1 (January-March)

Reported by:

Candice Duffek & Melissa Woznick, Case Managers

Phone & Email:

850-5877, cduffek@waunakee.com

Provide comments on:

## Emerging Trends (in our area during this quarter):

Home Delivered Meals - The main emerging trend we had this past quarter, was an increase in Home Delivered Meals. We completed 24 new Home Delivered Meals assessments (15 in the Dane, Springfield, Westport area).

AARP Tax Clinic - assisting several clients with their taxes. This included printing rent certificates for Homestead credit, telephone calls with clients regarding their appointments, assisted in completing tax paperwork, helping clients gather needed documentation for their appointments, and coordinating transportation for clients. One client completed Homestead taxes for her first time, after CM has been encouraging her for 2 years - she received \$292 in Homestead tax credit.

Alzheimer's and Dementia Resources - this includes information on consultations, education, support groups, Memory Cafe, memory clinics, and we made referrals for the Music and Memory program.

Energy Services - continue to promote this program with clients, assist them by calling and scheduling appointments, and gathering needed documentation for appointments.

Food Share - we had many new and renewal Food Share applications. One client is new to Dane County, and will receive \$89/month in Food Share. Another client, had a \$40 increased due to CM making sure her increased health insurance was counted, and letting client know she can apply her eye glasses, dental, and medications costs towards her Food Share.

Grants - we implemented the new Dane County Caring for the Caregiver Grant process, and provided this information to over five caregivers. We also made referrals to caregivers for AFCSP funding - which has utilized to pay for adult day care and in-home care/companionship services.

Transportation Resources - we have had a significant increase in client's needing weekly on-going transportation.

Overall the most requested and provided information/resources were; Alzheimer's and Dementia, cleaning services, elder law attorneys/free legal wills clinic, energy assistance, food pantry, food share, home care agencies, PERS/Lifeline, respite, senior housing, senior center lunches/programs, taxes, and transportation.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

**Transportation -**

1. Limited transportation options for seniors who are wheelchair bound that are not on MA to doctor appointment or errands. These seniors are too high income for MA but not enough income to pay \$160+ for a ride to an appointment. We have seen more isolation with clients in this situation - as they end up not going to doctor appointments or other errands due to budget. \*This past quarter we have been able to arrange TSI transportation for a client, whom is wheel chair bound from Danie, to go to the grocery store.

2. We have spent a lot of time coordinating transportation. This includes clients who ride TSI for senior center lunch/activities and RSVP rides. This past quarter we have had several new weekly on-going RSVP transportation. These rides have been for blood transfusions, chemotherapy, medical procedures, adult day care, and spouses to visit their loved one in Assisted Livings.

With all the new HDM meal requests - we have have spent a lot of time on making phone calls, home visits, completing required CM paperwork and HDM assessments, opening cases, documenting, and coordinating services.

Balancing time with 24 new clients this quarter, and keeping up with current clients needs (hospital/SNF admissions, death of a spouse, renewals for programs due, and other on-going coordination of services).

We have spent more time with caregivers (spouses and children) of clients seeking support and information to help them. We have discussed services and resources for clients whom have dementia, mental health issues, and physical changes/falls. These families require frequent follow up to see if they made decisions based on the information we provided such as trying in-home respite, adult day care, or other suggestions/services we have made to make life easier for them.

There has been an increase in calls about landlord tenant issues (i.e. non renewals, lease violations and no hot water-maintenance issues). This has taken a lot of our time assisting clients with these significant issues that affect their lives.

Cleaning Services - We have been receiving more calls from people looking for cleaning agencies, and have a very limited list of available agencies that we are aware of. No resources for cleaning services for those with limited income has been a challenge.

Significant amount of time (over 20 hours) of Case Management was provided to one client, who was in a crisis situation. She was asked to leave a SNF due to behavior at the end of February, was not accepted into a local SNF, and went back home. She had frequent EMS calls, ER rooms visits (no admissions), refused home health services, and declined Assisted Living placement. Client ended up with no support (her daughter, distance herself, out of frustration of non-compliance). Client had significant mental health issues, and CM spent an entire day at PCP appointment, and waiting with her in ER until she was admitted to Psychiatric Unit. She was discharged after a few days, and CM continues to be very involved with client on a daily basis.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

**E-mail completed report by 10 April 2018, 10 July 2018, 10 October 2018, and 10 January 2019 to: [aaa@countyofdane.com](mailto:aaa@countyofdane.com)**

# 2018 Quarterly Client-Centered Case Management Report

Agency Name:

West Madison Senior Coalition

Reporting Period:

Quarter 1 (January-March)

Reported by:

Maureen Quinlan, Joel Collins, Rachel Okerstrom

Phone & Email:

608-238-7368

Provide comments on:

**Emerging Trends** (in our area during this quarter):

CM requests by clients over 240% FPL limit. Referrals made to SMCE for private CM. Some reluctance in clients to utilize private CM services.

Tax filing questions.

General Medicare assistance.

CMs continue to be involved with clients who need more in-home help than the agency based volunteer home chore service can provide, or are not financially eligible, but who lack the funds for private-pay in home help.

Continued questions from clients and family members regarding long term care planning.

**Client Issues** (that require extensive time or for whom resources are limited or unavailable):

CMs continue to assist clients in trying to find affordable/disabled/low income housing in safe areas.

Affordable in home care.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program:

Number of individuals counseled regarding reporting & repairing finances after a scam

Number of First Responders Dementia Forms completed

**E-mail completed report by 10 April 2018, 10 July 2018, 10 October 2018, and 10 January 2019 to: [aaa@countyofdane.com](mailto:aaa@countyofdane.com)**