

2018 Quarterly Client-Centered Case Management Report

Agency Name:

Colonial Club Senior Activity Center

Reporting Period:

Quarter 3 (July-September)

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):

Disaster recovery due to gas explosion in downtown Sun Prairie. Thankfully, those temporarily displaced have been able to return to their homes. Those who were permanently displaced also have housing that they have confirmed they are happy with. They have been provided supplies, household items, etc. for setting up their new home. All displaced older adults were provided funding for hotel stays until their housing situation resolved. Case management continues to serve these clients.

Increase in referrals for hoarding situations--some of them involving very fragile older adults.

Increase in referrals from local police in our service area often due to frailty of the older adult.

Continue to receive referrals for caregiver support (primarily spousal situations), particularly respite care and supportive home care options.

Housing - Seeking alternate housing due to increased frailty. Most of these referrals also seeking low-income housing.

Increase in requests for home delivered meals due to increased frailty.

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

We currently are working with a few clients that have hoarding concerns in their homes. Time intensive due to even more relationship building required by case manager as difficult for clients to move forward with plan to improve their environment for increased safety and well-being. Limited resources such as finances and support system to help with carrying through on agreed upon plan sometimes can be difficult in moving a plan forward. Often when client is agreeable to taking steps to improve their environment, case manager is involved on some level in this process due to the relationship with the client, which also increases time involved in these types of referrals.

Extensive Time: Developing plan of care for individuals with cognitive concerns to provide for their safety and well-being is often time-consuming, particularly if there is limited support. Extra home visits (may also include other agencies) or other contacts are often necessary. We are currently working with a number of clients in this situation.

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

2018 Quarterly Client-Centered Case Management Report

Agency Name:

DeForest Area Community & Senior Center

Reporting Period:

Quarter 3 (July-September)

Reported by:

Natalie Raemisch, MSW

Phone & Email:

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Provide comments on:

Emerging Trends (in our area during this quarter):

Family members living with the older adults in housing where they are not able to have long-term guests. The family members then get kicked out of the apartment and are homeless. The older adult is beyond crushed about the situation and try everything to help their family.

Clients switching to long-term care programs and needing to taking them off the 610.

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

Housing, housing, housing :)
Family dynamics
Medicare Part D

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

East Madison/Monona Coalition of the Elderly

Reporting Period:

Quarter 3 (July-September)

Reported by:

Sonya Lindquist

Phone & Email:

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Provide comments on:

Emerging Trends (in our area during this quarter):

During 3rd quarter of 2018, EMMCA case managers saw an increase in the number of intake calls and in the complexity of these issues. In addition several current clients had more significant issues develop during the 3rd quart of 2018. Mental Health and Housing issues have really increased. Some examples:

HOUSING ISSUES: EMMCA was contacted on 9/17 regarding a client who needed to be out of his apartment by 9/30. APS and VA asked EMMCA to help client's daughter who is appointed guardian as client has been deemed not his own decision maker. Client needs to find either AFH/CBRF however client not med compliant and facilities are currently unwilling to admit client. APS and VA do not find it necessary to compel client to take his meds. Currently client is living with his daughter as he has no where to go until he is at least agreeable to go to an AFH/CBRF. It is unlikely he will be agreeable until he is stabilized on his meds. The daughter has been left with the option to await a crisis in order to compel a response. Daughter is considering evicting her father after 30 days.

EMMCA has been contacted by several people who have been evicted. These people have called with only weeks left before they need new housing. There is little time and there are few options for housing.

HOARDING ISSUES: EMMCA client with a really bad hoarding situation, due to alcohol and mental health issues, was told that she did not pass her section 8 inspection. There were not enough APS funds left to clean up her apartment (it would have cost \$3,000). The Home Chore coordinator and Case Managers arranged a group of volunteers to clean her apartment for 2 hours. Client's apartment had cockroaches and fruit flies in the sink and fridge. There was feces and garbage with food remnants all over the floor in her apartment. Client still needs to get carpet cleaned, and there are no funds for carpet cleaning or maintaining the cleaning that has been done. Case Manager is working with the section 8 inspector on ongoing cleaning and getting the cockroaches out. Client has no money to pay for cleaning and has had past issues of not paying her rent, therefore there is concern she will get evicted and lose section 8. Case Manager is working with APS and trying to get her on CCS and prevent her from getting evicted.

Hoarding continues to be an issue with several clients and now with no APS funds available, it is likely that people will lose their housing.

IN HOME HELP NEEDS: Clients needing more help in the home but do not qualify for Partnership. Home Chore volunteer once per month not enough; need Supportive Home Care funds for those falling between the gaps.

MENTAL HEALTH NEEDS: Client referred to EMMCA from APS to provide ongoing case management. Client has severe mental health and alcohol use issues. She had not been to the doctor in several years. Case manager was trying to get client a doctor after she got MAPP through ADRC. However, client was admitted to St. Mary's and left there against medical advice. There is a warrant out for the client's arrest because she faces criminal charges for battery against her elderly mother whom she abuse while intoxicated. Client can no longer have contact with her mother. Because of her mental health and alcohol issues, she has been a problematic tenant and her lease was not renewed. Case Manager tried to get client's lease extended, but it was not. Client will likely become homeless.

Increase in severity and number of clients with mental health issues recently. Other agencies that we work with have noted this trend recently as well. Few psychiatrists or counselors are willing to take MA clients and/or new clients. Many places have wait lists of over 6 months. SSM Health had many psychiatrists leave their staff. They now have a one year wait list for a client to get started with a psychiatrist. This has left many people scrambling to get meds.

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

The above issues of housing, hoarding, mental health and alcohol were all issues that required a great deal of time and which had limited resources in 3rd quarter of 2018. Following are more examples of mental health issues and other issues of concern:

MENTAL HEALTH ISSUES: One client refuses to continue to get psychiatric medicine or counseling. She has said that she will never work with mental health organizations in Madison again.

Another client said that he fixed his own mental illness and does not need help.

Another client is connected with mental health professionals and still feels overwhelmed with her depression.

Another client suffers from delusions. Case Manager has been trying to get her to see a psychiatrist and she seems reluctant.

The lack of mental health services and the reluctance to seek mental health assistance has contributed to one client's homelessness, one client not accepting help from volunteers, ride services, or services offered by the State; and another client calling police to assist with people who are not there. This gap in mental health treatment it is a critical issue.

HOUSING ISSUES AND LACK OF MOVING SUPPORT: Client needed to move for her safety because someone in her building was threatening her. She moved upstairs away from that person, but had to do it all herself. She is not in good health and is having some health issues because of the move. EMMCA was unable to provide a group of volunteers due to timing issues. There is a lack of moving assistance in Madison/Monona.

FAMILY CARE ISSUES: Client had issues with MTM prior to going on MyChoice Family Care earlier this year. She joined MyChoice Family Care earlier this year and quickly returned to regular case management services. She felt that MyChoice was "no choice." They took away her rides and did not provide good services. Since she has been back, she has been having problems with MTM. She feels that Ridgewood transport has not provided good services and feels that she should be able to choose another transportation provider. MTM told us that per WI state policy, she does not have a right to choose her transportation company. She has been driving to her appointments but is not in good condition to drive.

BENEFITS SUPPORT: Helped clients understand benefits, apply for or renew benefits. Helped clients understand why they were denied disability and medical assistance and helping them through the appeal process. Clients need assistance for various reasons: their physical difficulties (blindness, tremors), overwhelmed by the forms, unable to comprehend the forms. Some clients are unaware benefits exist. Case managers also educate these clients.

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

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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:

Fitchburg Senior Center

Reporting Period:

Quarter 3 (July-September)

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):

Family Care clients needing higher level of assistance than what their team will provide

Need for affordable housing

More severe cases of clients with dementia

Folks asking for help with in-home chores

Late

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

Dementia diagnoses, paired with delusional behaviors and hallucinations, can severely complicate people's lives, especially those who have no family involvement. This has required collaboration with law enforcement, medical clinics and outside resources in order to best serve the client and keep them in the safest environment.

Clients who have lost income due to a medical crisis and are unable to pay rent/utilities. This requires great effort to piece-meal financial assistance in order to avoid eviction.

Working with clients who are enrolled in Family Care but do not receive an appropriate level of involvement from their team. This has required extensive hours that we are unable to bill for. The type of service we continue to provide includes access to food, follow-up on medical concerns, coordinating oxygen delivery, etc.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

McFarland Senior Outreach Services

Reporting Period:

Quarter 3 (July-September)

Reported by:

Lori Andersen

Phone & Email:

608-838-7117

Provide comments on:

Emerging Trends (in our area during this quarter):

We have had requests for additional transportation for things outside of our regularly scheduled trips to the grocery store/shopping or RSVP services.

Basically people are expecting transit services here if they moved from another area. Even clients that moved from other rural areas want door to door services for things where they just call and they get a ride the next day or same day at their specified time. There is an assumption services are the same from place to place, even county to county.

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

We continue to have people expect to get low income housing immediately. We recently had someone who called on a Friday afternoon and wanted to move into a place that evening. He is staying with someone who feels he has overstayed his welcome and he is refusing to leave. We offered help filling out applications but he dismissed us. The sheriff department has been contacted to look at if they can remove him.

We also have a client living in his truck still. As the weather gets cooler he will be in need of better quarters but he has refused our offers of help. Our police department remains involved .

We also have a person living in a storage locker, no income and under the age of 60.

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:

Middleton Senior Center

Reporting Period:

Quarter 3 (July-September)

Reported by:

Kathy Lauer & Jill Schonenberger

Phone & Email:

662-7687 klauer@cityofmiddleton.us

Provide comments on:

Emerging Trends (in our area during this quarter):

We continue to spend much time loaning equipment to many community members.

We have helped several individuals with billing and paperwork.

We helped several people looking at various transportation options.

We completed one First Responder Information form.

I have had a very large number of calls regarding turning 65 and choosing a Supplement policy, etc.

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

We also had several people looking for housing; especially subsidized or lower cost housing which is not readily available.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs: 2.00

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

0

counseled/scams

1

1st Responders Dementia Forms

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

North/Eastside Senior Coalition

Reporting Period:

Quarter 3 (July-September)

Reported by:

Jim Krueger

Phone & Email:

(608) 243-5252, Ext. 213; jkrueger@nescoinc.org

Provide comments on:

Emerging Trends (in our area during this quarter):

In quarter three NESCO has seen an increase in the need for assistance with transportation services and loan closet walking aids.

NESCO had the following intakes over the third quarter:

July 9 new intakes

August 10 new intakes

September 7 new intakes

There were 20 HDM assessment requests during the third quarter.

NESCO is currently fully staffed and the number of intakes has decreased to a manageable level. There is no wait list for case management services at this time.

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

Client issues in the third quarter that have required extensive time include challenging benefit situations, issues with applying for affordable housing, and mental health issues affecting quality of life and needing intervention.

In addition clients involved with EAN, and Spanish speaking clients have taken more of the case managers time.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

Northwest Dane Senior Services

Reporting Period:

Quarter 3 (July-September)

Reported by:

Vicki Beres

Phone & Email:

608-798-6937x3 cmnwdss@tds.net

Provide comments on:

Emerging Trends (in our area during this quarter):

FAMILY CARE/PARTNERSHIP

- Seeing an increase in number of older adults in need of family care services. Working with ADRC, joint home-visits, to facilitate paperwork and proof necessary to meet intake requirements.

HOUSING

- Seniors in rural NW Dane County continue to struggle with affordable housing options without moving to Madison. NWDane has only two apartment units owned by WI Management.
- Mazomanie and Black Earth flood victims in need of short & long term housing options. Some have moved into apartments in my service area, others are still temporarily living with family, short-term rentals or in trailers until foundational or home repair determinations are made.

UNITED WAY - MEDICATION REVIEWS

- Completed 24 reviews

SHIP (State Health Insurance Program) Assistance

- Increase in options counseling with seniors turning 65 in 2018. Assisted with Original Medicare options vs. Advantage plan options; SPAP – Senior Care & a Medicare Part D plan enrollments.
- Assisted those turning 65 with on line Social Security applications for activation of Medicare Part A & B and retirement benefits

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

HOUSING

- Assisted a client with a move from a farm (some hoarding issues) and downsizing into an apartment; this included: application process, financial piece, setting up on-line payments, transitioning to new lifestyle & staying active at senior center, hiring of Seques to complete the physical move. Continue to assist client with MA/Family care application for spouse with Dementia in assisted living (ADRC declined eligibility). Client is the community spouse; because the husband has a separate guardian and lives in a CBRF, we partnered with the bank to help with financial constraints to protect spousal assets while supporting Dementia spouse until spend down to \$2,000.
- Several 5-day quiet notice for a Dementia client

GUARDIANSHIP PROCESS FOR A SENIOR LIVING WITH DEMENTIA

- Collaborated with Crisis for an Emergency Detention, Dane County TriCare Team for guardianship (short & long-term), Stoughton Hospital staff during protective placement, ADRC for Partnership intake and Care WI for care and placement. Also partnered with current guardian, UW Hospital PCP, UW Social Worker, RISE/Corp Counsel and Guardian ad litem.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

Oregon Area Senior Center

Reporting Period:

Quarter 3 (July-September)

Reported by:

Noriko Stevenson and Carol Bausch

Phone & Email:

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Provide comments on:

Emerging Trends (in our area during this quarter):

The OASC Case Management office is seeing a rise in the number of people needing supportive home care services. This remains a continuing trend. Older adults who live independently with the need for assistance with IADLs or driving tend to lack an understanding of their own limitations. They are often resistant to receiving assistance due to confusion and forgetfulness caused by dementia. Case managers collaborate with clients' primary care physicians and family members to achieve case plan for clients to remain living safely and comfortably. A need for collateral information due to clients' lack of awareness of their own needs is an emerging trend at OASC.

Another emerging trend is the changing demographics in clientele. In this quarter, we have been serving older adults who are non-white as well as those who have immigrated from other countries. We anticipate this will be a continuing trend that we will see as Oregon area demographics change.

OASC has received more requests for RSVP transportation. These calls came from older adults who were not aware of this service before; it is an emerging trend that older adults are starting to utilize RSVP transportation services.

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

OASC spends considerable amount of time coordinating RSVP transportation. There is no local public transportation and this can be a challenge for older adults who have medical needs that require frequent visits to their doctors.

Older adults who are on Partnership are requiring more contact as Partnership agencies were not available to answer questions or coordinate services for their participants who receive services from OASC, such as home delivered meals or adult day program.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

South Madison Coalition of the Elderly

Reporting Period:

Quarter 3 (July-September)

Reported by:

Kari Davis, SMCE CM Supervisor

Phone & Email:

251-8405 x25 davis@smcelder.com

Provide comments on:

Emerging Trends (in our area during this quarter):

Our wait list for CM services remains at 2 months.

In the third quarter, we received the following:

July, we received 14 new intake referrals and 9 HDM assessments

August, we received 12 new intake referrals and 5 HDM assessments

September, we received 14 new intake referrals and 6 HDM assessments

We have 6 clients that we are connected to that are also involved with EAN. Several cases are regarding financial exploitation, one is for guardianship and one is for neglect. In one of these cases, the CM requested EAN funding for rent.

SMCE currently has two Social Work interns (they both started in September) helping with HDM assessments for South clients.

We continue to provide support and training to newer case managers/interns while trying to meet the high needs of our clients.

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) continue to be those clients with mental health, AODA, significant health, housing issues, clients also working with EAN 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.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

Southwest Dane Senior Outreach

Reporting Period:

Quarter 3 (July-September)

Reported by:

Lynn Forshaug

Phone & Email:

608-437-6902

Provide comments on:

Emerging Trends (in our area during this quarter):

We have been working with seniors to help them renew their Senior Care.

We helped a senior order a replacement cell phone, after she dropped it and the screen shattered. We took her to US Cellular and they gave us a website to go on and order a replacement cell phone for her. The senior could not have done this without our help.

We have 16 seniors getting the CAC food boxes monthly. We deliver most of these boxes, but some folks pick them up at the Center.

We have been connecting seniors with in home caregivers.

We have been working with seniors to get them set up with cleaning help through the SHC grant.

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

Lynn has been working with a lady who had been on MA for years. This senior's ex-husband just passed recently and this has put her in a new income bracket. She will be getting \$10.00 less in income than what she was getting with Social Security and both state and federal SSI. She will be losing her health coverage, but not her med coverage. We are applying for the Med B waiver and Capital Care because she can not afford a supplement insurance. She is now worried about affording dental care. She also wants to change doctors, so we made four phone calls before we could find a clinic that had openings.

Carrie spent time getting adaptive equipment to seniors needing shower benches, raised toilet seats, commodes, etc.

Carrie spent time helping a senior get his Homestead figured out. The landlord had not filled out some paperwork properly, so Carrie worked with the landlord and the senior to get it sent to Wisconsin Revenue. The senior finally received his credit.

Mary Kay has spent a week working with a senior whose health insurance coverage for oxygen has changed. Coordinating information with the senior's doctor's office and the new insurance has been challenging, when calls are not being returned on a timely basis.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

Stoughton Area Senior Center

Reporting Period:

Quarter 3 (July-September)

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):

- Housing availability (subsidized/low income and handicap adapted) continues to be an issue. We have prospects for new "affordable" senior housing going up in our area but it will not be affordable to the low-income of the seniors we work with.
- 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.
- Our community is offering a quarterly educational series and has developed purple folders with information and resources that we hope all local clinics will hand-out when they diagnose patients with dementia. These are also available at our Center for when people are ready to come in and talk about their loved ones' diagnosis; this month we handed out five.
- Marketplace subsidies for the Affordable Care Act health plans have continued to be beneficial for clients not yet Medicare eligible and making too much for Medicaid.
- We continue to value the assistance of Salvation Army and St. Vincent De Paul in their financial and in-kind assistance for people in need in our community. Small bits of financial assistance or vouchers for furniture or home supply needs greatly assist when no other resource can. Also, a local church, First Lutheran of Stoughton, continues to help our Stoughton seniors with home maintenance projects for which that they could not afford to pay or could not personally provide the labor.

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

- Two clients have made choices to give their fortunes away to kids or grandkids, not understanding that they then cannot qualify for Medicaid services without financial and time penalties for service.
- Another couple of low income clients are going without things they need, and feel they cannot ask for rent or help with household expenses from their adult kids who live with them.
- Extensive time has been spent on an apartment hoarding situation of a client who is too functionally impaired to physically address the hoarding herself. Both ADRC long-term care functional screen, Elder Abuse and our Seniors in Need program have been helpful.
- Extensive time spent helping people through the functional screen process for long-term care waiver programs via ADRC and helping get some funding for in-home assistance while waiting for decision on the screens.
- Couples dealing with chronic and progressive diseases, such as Alz/Dem. or Parkinson's. There is an extra layer of challenge when long-established patterns of relational trouble make adapting to the disease and long-range planning for the disease more difficult.
- There is a continued issue of people being reluctant to go to their doctors in relation to concern about Alzheimer's and dementia. The fear of diagnosis and denial is an ongoing issue.
- 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. Stoughton now no longer qualifies for the rural housing project.
- Housing issue/lack of affordable housing still an issue; difficult for people to find.
- 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.

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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 3 (July-September)

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):

CM has noted an increase in people looking for housing in our service area; including new community members moving in and existing community members looking to downsize or look for less expensive housing. The main senior housing apartment building in town recently changed over to a Dane County Housing complex. CM is navigating this transition along with clients who are experiencing the shift.

CM has also noted more frequent requests by individuals turning 65 or Medicare Eligible Age; helping with understanding options and navigating enrollment (as well as opting out of Part B due to current employer coverage).

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

CM has noted a recent increase in clients needing help with accessing food. CM has had more and more clients applying for FoodShare than in the past. CM has also been providing more clients with information about local food pantries. A steady need for Home Delivered Meals in all of CM's service area continues.

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2018 Quarterly Client-Centered Case Management Report

Agency Name:

Waunakee Senior Center

Reporting Period:

Quarter 3 (July-September)

Reported by:

Candice Duffek & Melissa Woznick, Case Managers

Phone & Email:

850-5877, cduffek@waunakee.com & 849-8547, mwoznick@waunakee.com

Provide comments on:

Emerging Trends (in our area during this quarter):

The most provided information/resources were the ADRC, assisted livings, cleaning services, counseling/mental health, low-cost dental, food share, grocery delivery services, energy services, home care agencies, housing, home delivered meals, lifeline services, low vision, senior center lunches/programs and transportation.

We also provided assistance with benefits to several clients this past quarter. We had over 10 Food Share new and re-newels applications. A new client will now receive \$194/month for her Food Share amount, and another client FS amount was raised to \$170 due to Case Manager having her include her medical bills in her Food Share application.

In addition to Food Share, we had a Medicare Savings Program, MAPP, and Senior Care renewals. We applied for Capital Health Care for two clients, TDS lifeline discount, and a UW-Health Community Care application.

We continue to have lead roles with the dementia friendly committee, the caregiver support group and the Parkinson's support group. This includes planning programs, getting supplies needed, promoting the memory café and PD support group. This past quarter we had 73 in attendance for our caregiver support groups, memory cafés, and PD support groups.

Because we are in the Senior Center we also deal with on-going situations with our clients who attend the Senior Center, and have many scheduled and walk-in office appointments. This past quarter we had 125 home and office appointments.

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

Home Delivery Meal Program

The Waunakee Senior Center has a large Home Delivered Meals Program, with an average of 68 meals delivered daily. It is our responsibility to approve home delivered meals and re-assess annually. During the 3rd quarter we focused on getting our MOW Re-assessments completed for the SAMS database cycle ending 9/30/18. This includes home visits, reviewing ADL'S/IADL's, completing the nutrition screening, updating basic intake, functional screen, case plan, and completing the HDM Assessments. During this quarter we completed 39 HDM Assessments and Re-Assessments.

Supportive Home Chore Program

Our agency had not been receiving funding for the SHC program, as other focal points have been. In August, we were provided with the opportunity to utilize some SHC funding by the end of the year. We spent extensive time on learning about the policies and procedures, establishing seniors that qualify, making home visits, completing the required paperwork and working with the agencies to start services. We are very happy to have this service available to seniors in our area, and have been able to get 9 clients established with the SHC program in two months. We will promote this service more in the New Year once Medicare Part D Open Enrollment is complete.

5 Day Eviction – Case Manager assisted a client with his 5-day eviction notice. This included contacts with the ADRC, WI Management, Joining Forces for Family, Tenant Resource Center, and the VA Social Worker. Case Manager advocated for client, by reviewing and questioning the amount that was reported owed, assisted with drafting a letter on behalf of the client, and coming up with an agreement to pay off past debt. Case manager contacted Joining Forces for families, to request assistance towards rent owed, and they were able to provide \$365 paid towards balance due from the Waunakee Ecumenical Board.

We are the 4th Focal Point to work with a client who moved to Waunakee recently. This client and her friend have been demanding of time, and have exhausted all resources in Dane County, or choose to not utilize resources provided. Case Manager spent 20 hours over the last quarter assisting this client.

CM Melissa worked for many hours with a senior who is on Care WI regarding our meals on wheels delivery. There were issues with our drivers being asked to help with personal care when dropping off meal. This was in addition to an issue with the Care WI member's husband. The husband was accusing one of our drivers of having a gun of his. The driver let this issue go on too long until the husband contacted him at home about the issue. CM took matter very seriously for the safety of everyone involved. CM contacted the Sheriff's dept about the issue and discovered the gun the husband reported missing or lost in Nov 2017. So this was nothing new. However the husband would not let issue go and mentioned other weapons in the home to drivers. After speaking with the county, the drivers, and director the decision was made to terminate meals on wheels immediately. CM notified the Care WI Case Manager as things were unfolding but did not get a return phone call for three days. CM had the Care WI Case Manager discuss the issues the member and husband. This member will not go hungry as she had three paid family members that were to be assisting the senior with her needs.

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

2018 Quarterly Client-Centered Case Management Report

Agency Name:

West Madison Senior Coalition

Reporting Period:

Quarter 3 (July-September)

Reported by:

Maureen Quinlan and Rachel Okerstrom

Phone & Email:

238-7368, maureenq@wmseniorcenter.org

Provide comments on:

Emerging Trends (in our area during this quarter):

Lack of affordable housing. Housing searches and general senior housing issues, including some denials of lease renewals.

Affordable in home care services. Continued requests for in home assistance for clients who need more assistance than the volunteer home chore program can provide, or are not financially eligible, but who lack the funds to pay for private-pay in home help.

Support needs around dementia or mental illness.

Seniors in need of social connections/activities.

Seniors, and more often family members of seniors, beginning to consider assisted living.

Upcoming Medicare open enrollment.

late

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

Affordable housing.

Affordable in home care.

Dementia/mental illness support needs.

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

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