Agency Name:

Colonial Club Senior Activity Center

Reporting Period:

Quarter 4 (October-December)

Reported by:

Gail Brooks, Case Management Coordinator

Phone & Email:

608-837-4611 / gbrooks@colonialclub.org

Provide comments on:

Emerging Trends (in our area during this quarter):

Increase in referrals regarding need for in-home care due to increased frailty. A number of the referrals also included providing overview of long-term care supportive options available; some with joint visits with ADRC I&A Specialists.

Also seeing an increase in referrals for our "younger" senior adults (under age 70) who often have complex history they bring with them—which can include mental health concerns.

Medicare Annual Open Enrollment - Although noted that this year there was an increase in individuals staying with the same Medicare D plan for 2019 once review of options completed, there was also an increase in complex situations such as: 1) Employer coverage ending so seeking both supplemental healthcare coverage and prescription coverage (more steps needed to get supplemental in place with employer coverage); 2) Assisting clients with assessing whether they want to remain with former employer retiree benefits; 3) A handful of clients who had SeniorCare only as creditable coverage due to minimal to no medications enrolling into Medicare D plans (additional steps necessary for proving they had creditable coverage); 4) Digging in to see if other options were available for clients with Medicare D who had very expensive medications that might help them avoid or delay coverage gap (i.e. pharmaceutical assistance programs, SeniorCare, Re-tiering requests, discount program via GoodRx). Also, majority of referrals were screened for MSP, LIS and SeniorCare.

Client Issues (that require extensive time or for whom resources are limited or
unavailable):
Extensive time: This quarter assisting clients with cognitive concerns who are at risk to remain safe in their own homes.
Extensive time: Younger senior adults with complex histories often involving mental health concerns which may include substance use disorders. Attempt to address safety concerns; encouragement to seek counsel and/or seek treatment. More face to face contacts often necessary.
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs: 5.00
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
Number of First Responders Dementia Forms completed   2.00

E-mail completed report by <u>10 April 2018</u>, <u>10 July 2018</u>, <u>10 October 2018</u>, and <u>10 January 2019</u> to: aaa@countyofdane.com

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Agency Name:
DeForest Area Community & Senior Center
Reporting Period:
Quarter 4 (October-December)
Reported by:
Natalie Raemisch, MSW
Phone & Email:
(608) 846-9469
Provide comments on:
Emerging Trends (in our area during this quarter):
Clients needing transportation coordination. Transportation not reliable (DR medical rides). Clients needing help understanding/navigating the Consortium. Hospice referrals.

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

Agency Name:

East Madison/Monona Coalition of the Elderly

Reporting Period:

Quarter 4 (October-December)

Reported by:

Sonya Lindquist

Phone & Email:

608-223-3100 SonyaL@emmca.org

Provide comments on:

Emerging Trends (in our area during this quarter):

During 4th quarter of 2018, EMMCA case managers again have dealt with many complex client issues. Clients with Mental Health and AODA issues again have taken a great deal of time for EMMCA case managers. These clients often refuse mental health or substance abuse counseling, making them difficult to assist.

Case manager time in 4th quarter 2018 was dominated by EMMCA case managers work with Medicare Part D sign-ups.

The totals for EMMCA's work with Part D are as follows:

# of Plan finders Conducted 76 # of Enrollments 53 # of Seniors Helped 76 Total Amount of Money Saved \$26,578

The other issue that was "emerging" for EMMCA was the upcoming/now active merger of EMMCA with NESCO, South and West. This has taken time for staff to make happen. In addition, it was and continues to be a source of questions and concern for some of our senior clients. NewBridge staff are working to communicate with clients to help them with this transition.

On behalf of the EMMCA case managers and myself, I would like to thank Dane County for their support of EMMCA's case management program - through financial support, through training and through personal support of EMMCA staff. It has been a privilege to serve East Madison/Monona seniors through the EMMCA case management program.

## <u>Client Issues</u> (that require extensive time or for whom resources are limited or unavailable):

Mental Health, AODA, housing and transportation were all issues that required a great deal of time and which had limited resources in 4th quarter of 2018. Following are examples of these issues for EMMCA's clients:

- 1. Clients with mental health issues and/or AODA issues.
- 1.a. In 4th quarter we had several experiences with Mental Health/AODA issues that had an impact on the client's housing. (For example one client was evicted due to their mental health/AODA issues and another client nearly lost their housing because of their mental health/AODA issues. EMMCA case managers were able to get funding for a deep cleaning which has helped this client in the short term and kept the client from being evicted.)
- 1.b. Clients with mental health issues are often are very isolated due to the stress they have placed on their support systems. This erosion of their support systems compounds their issues.
- 1.c. The severity of the mental health issue is often more complex than what a case manager not specialized in mental health is able to manage. Some of these clients are verbally abusive to their EMMCA case manager.
- 2. Transportation continues to be an issue.
- 2.a. One client needs dialysis three times per week. This client cannot get all three rides through the transportation center; one ride comes from the transportation center, one ride comes from RSVP and one comes from the Time Bank. This is a lot for a client who is sick to coordinate and this brings about increased stress.
- 2.c. Another client lives just outside the Para Transit border and can only use Transit Solutions which limits where this client can go. This is very isolating.
- 3. Housing issues with seniors wanting to move into the East Madison and Monona area.
- 3.a. The wait lists for subsidized senior housing in our area is 8 months to 2.5 years.
- 3.b. One EMMCA client was approved for a Dane County Section 8 Voucher in November 2018. The client is disabled and low income. This client currently lives in a Madison apartment that she has been living in for eight years and that is set up for her particular needs. Unfortunately, this apartment is one street outside of the Dane County boundary of the Section 8 Voucher program. Therefore her Dane County Section 8 Voucher will not cover her current city of Madison apartment. The client is required to move into a qualifying apartment within three or four months of this Dane County Section 8 voucher being issues. The client wants to remain on the east side as she has lived on the east side for many years and is familiar with this area, but the long wait list in the area make this impossible. The client is currently on a wait list for a section 8 apartment in Sun Prairie. This was the shortest wait list the client could find. Moving out of her apartment and out of the area she is familiar with will be a hardship for this client because of her disability and her limited income. Staying in her current apartment and paying the market rate also will be a financial hardship for her because of her limited income. The client and her EMMCA case manager requested a "crossover" so that the client could use her Dane County Section 8 Voucher in Madison. This cross over was denied and they went to Dane County Housing Authority to appeal this, but were denied because there were no openings in "crossover" spots.
- 4. EMMCA case managers continued to help clients stay connected to benefits, apply for energy assistance and other resources to help make ends meet.

Number of conts	acts with seniors e	nrolled in Family Care, I	RIS & Partnership
Programs: 1.00			
	ors leaving Family gement Program:	Care, IRIS or Partnersh 0.00	ip Programs and returning to
Number of indiv	iduals counseled r	egarding reporting & rep	pairing finances after a scam
0.00			
Number of First	Responders Deme	entia Forms completed	0.00

Agency Name:	
Fitchburg Senior Center	
Reporting Period:	
Quarter 4 (October-December)	
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):	
Increase in more severe/persistent mental illness	
Need for affordable housing	
Medicare Part D planfinders	
Client interactions with law enforcement	
<b>f</b>	- 1

late 1/14/19

unavallable):
Mental illness, often times including delusions and hallucinations, can greatly complicate people's lives. This has often required collaboration with law enforcement, as the clients are calling 911 to report incidents they feel are "real". We have become more involved with our police department's Community Intervention Team officers, who have specialized training in mental health and community policing.
Helping clients navigate the complex picture of "affordable" housing in Dane County can be time-consuming. Due to lack of resources, clients often have to remain in a living situation that is not ideal, thus exacerbating their financial difficulties.
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
Number of First Responders Dementia Forms completed 2.00

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

Agency Name:

McFarland Senior Outreach Services

Reporting Period:

Quarter 4 (October-December)

Reported by:

Lori Andersen

Phone & Email:

608-838-7117

#### Provide comments on:

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

We saw a lot of caregiver stress leading up to the holidays for a variety of reasons. Most of the families were ones we have had contact with on a regular basis but thinking about the holidays being a joyous time but handling caregiver needs made it more challenging. We utilize and have utilized caregiver respite for the through caring for the caregiver or Alzheimers funds. Seems those funds always are strained the most at end of year so resources are limited, or not available.

Saw people for Medicare D/ Seniorcare renewals. No real concerns over years past.

Began evaluating clients for Supportive Home Care. From our initial group over half either passed away or did not utilize the services.

We had a number of clients pass away during the holidays- some that we have been involved with for over 10 years. We continue to work with Hospice quite closely.

Transferred Rutland case management clients to Oregon.

Planned for additional routes and clients for HDM and for medical rides beginning January 1st..

Our volunteer driver coordinator for medical rides has resigned, now placing that responsibility with the case managers. We will be hiring for the case manager position after the new year. Part of the responsibilities will be as a volunteer coordinator for the department and village as a whole. Case management hours will be around 16 hours out of 24 hours.

Drivers remain quite limited for volunteer drivers for our medical and HDM drivers despite
recruitment efforts on ours and RSVP's part.
Caring for the Caregiver funds were not available for the latter part of the year to assist if there were caregiver needs.
We continue to work with our police department on the Are you ok? program to meet the needs of clients with mental health needs. We have had some recent successes with our assigned officer getting a client to her doctor appointment and communicating with her family, something Outreach alone has been unable to do. This has taken intensive intervention on both departments part but more so the police department.
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs: 0.00
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
Number of First Responders Dementia Forms completed 0.00

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

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Agency Name:	
Middleton Senior Center	
Reporting Period:	
Quarter 4 (October-December)	
Reported by:	
Kathy Lauer & Jill Schonenberger	
Phone & Email:	
662-7687 klauer@cityofmiddleton.u	us
Provide comments on:	
Emerging Trends (in our area during this	quarter):
We worked with 2 individuals who were homeless other assistance. We also had someone else tell individual did not want any assistance from us where the worked with 2 individual did not want any assistance from us where the worked with 2 individuals who were homeless of the worked with 2 individuals who were how	
We worked with 3 individuals who are dealing wit serious mental health issues.	th severe depression and 4 other dealing with
	and the second s

late submission

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

In the past we have worked with several individuals with dementia. The number of caregivers reaching out for services for their loved one with dementia is definitely increasing. We do have a group for people with early memory loss but we have had to start a wait list for this program.

We have at the very least 3 individuals during this quarter who need assistance with cleaning or personal cares, but they are unable to pay for these services. Because of our limited funds for the Supportive Home Chore Program, we have not been able to offer them any assistance with these things.

Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs:  $_{6.00}$ 

Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program: 1.00

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Agency Name:
North/Eastside Senior Coalition
Reporting Period:
Quarter 4 (October-December)
Reported by:
Susy Cranley
Phone & Email:
243-5252 scranley@nescoinc.org
Provide comments on:
Emerging Trends (in our area during this quarter):
Frequent requests for information and assistance were for Part-D medical insurance, Caring for the Caregiver funds, affordable housing, transportation, Medicaid renewal assistance, Medicare supplemental insurance, isolation, and in-home chore assistance.

late

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

Our Case Managers have continued to receive referrals for complex cases with seniors struggling with issues such as hoarding, dementia, mental health issues, low cost housing, and medical care insurance coverage. Assistance for clients who are home-bound and isolated due complicated medical issues also continue to require extensive time for our Case Managers. Unfortunately, resources are also limited in this area for our low income clients, but the Caring for the Caregiver Grant has offered short term assistance and respite for these clients. NESCO currently has no wait list for Case Management services.

# contacts 1
# lewing 0
# scams 1
# forms 0

E-mail completed report by <u>10 April 2017</u>, <u>10 July 2017</u>, <u>10 October 2017</u>, and <u>10 January 2018</u> to: aaa@countyofdane.com

Agency Name:

Northwest Dane Senior Services

Reporting Period:

Quarter 4 (October-December)

Reported by:

Vicki Beres

Phone & Email:

608-798-6937 x3; cmnwdss@tds.net

#### Provide comments on:

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

#### MEDICARE

>Medicare Part D open enrollment (Oct 15-Dec 7) - 80 Plan finders conducted, 32 PDP Plan changes completed and 73 helped overall. Assisted 3 seniors call Medicare to discript from a PDP plan "to maintain other creditable coverage" with Senior Care only, or for Veterans now eligible to obtain prescriptions from the VA.

>Seniors who became Medicare eligible (65) during Med-D open enrollment and leaving a Market Place plan; we had to do enrollments on the PDP website since start date was not 1/1/19.

Increase in seniors going into Donut Hole in 2018 & 2019 (due to medication and health changes), struggling to pay for medications (some not yet eligible for Senior Care or at a income level where a SPAP will not help; or needing diabetic supplies).

#### SHIP

>counseling conducted for those newly eligible for Medicare (turning 65); or losing coverage with spouse's employer insurance, COBRA and State plans.

#### COUNTY/STATE PROGRAMS: SHC, FC/PARTNERSHIP

Increase in seniors, families and adults with disabilities needing help navigating paperwork and requirements for: Supportive Home Chore program; obtaining a medical diagnosis (functional - lack of executive function) and financial eligibility criteria when meeting with and navigating ADRC Partnership/Family Care intake, paperwork and overall evaluation process.

#### HOUSING

Increase need for subsidized housing; flood victims needing temporary housing (few subjet opportunities and many did not want to sign year-long lease) as well as a few clients with a change in financial circumstances, (due to death of spouse or roommate) where were unable to continue to live in current situation (home or apartment). <u>Client Issues</u> (that require extensive time or for whom resources are limited or unavailable):

>>Disabled female client (not yet 65) with multiple needs: financial and medical issues/challenges; client needs personal cares and assistance in the home, but turned down Partnership due to cost share amount due; relies a lot on friends to do things for her. Client is not willing to face reality of disabilities/limitations and starting to wear-thin helpful resources. In addition, the client's 100 year old mother (former roommate) has been in/out of SNF and hospital due to falls. I tried advising the client (daughter) to help with multiple issues and occasions regarding concerns for her100 year old mother, who was accepted into My My Choice in April of 2018. The 100 year old mother continued to have a multitude of issues, for which I became involved to help the daughter's stress including living arrangement challenges (wanting to live at home), health challenges, falls and quality care when at SNF, plus billing issues with My Choice. I advised daughter to call Ombudsman on several occasions RE: SNF & My Choice billing issues. Client unable to handle both of their life events and multi-complex issues and was having a difficult time dealing with the fact that mom would not be returning home in order to help with financial challenges in the home. In the meantime, mom has passed, client now needing assistance with Estate Administration.
>>Female senior client (Medicald recipient moved from CA to WI) moved in with son & daughter-in-law a year ago; assisted with new PCP, up-coming memory screening and involvement at NWDSS services. Client has Bipolar, OCD and Diabetic concerns that the family cannot manage in addition to raising a young family. Currently assisting family and acting as lialson with hospital for diagnosis to support functional screen for Partnership/FC and senior client move into subsidized housing.
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership
Programs: 9.00
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 scan
Number of First Responders Dementia Forms completed 2 on

Agency Name:

Oregon Area Senior Center

Reporting Period:

Quarter 4 (October-December)

Reported by:

Carol Bausch and Noriko Stevenson

Phone & Email:

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

Provide comments on:

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

As Oregon's elderly population grows and diversifies, we are seeing clients from more diverse backgrounds coming in for services. We are still primarily a rural white population, however we are seeing changes in our service population, including more members of racial and ethnic minorities, more immigrants, and more people who identify as LGBTQ.

Another ongoing and ever emerging trend is the need for affordable housing.

We are doing more work with POA documents. OASC is seeing more people regarding their POA status and finding that many do not know whether the document they have is activated or how such documents become activated. Staff spends a fair amount of time trying to determine activation status, to ensure that the appropriate person is signing release of information forms, etc.

As this quarter took place during the Medicare Part D open enrollment period, case managers were able to make many new contacts. Our statistics for Medicare Part D are as follows: OASC helped 48 seniors and ran 31 plan finders. OASC does not enroll anyone, so 0 enrolled. Amount saved for seniors was \$10,670.00

ınavailable):
Housing search and housing re-certifications are time consuming. The re-certifications are time consuming, but the case management office is a resource for helping with this process. The housing search takes extensive time with very few options available, both for local housing and for anybody else who might provide any support in the search process.
Transportation continues to be a challenge for older adults in the area. With only RSVP and the rides covered through the Dane County grants, there is very little transportation available to seniors. We find that seniors tend to continue to drive beyond the time they should stop simply because they have so few options. Arranging transportation is time-consuming for the staff. Following up with seniors who feel they must continue to drive in order to remain in the community is often frustrating because the alternatives generally do not exist for them.
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 1.00

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

Agency Name:

South Madison Coalition of the Elderly

Reporting Period:

Quarter 4 (October-December)

Reported by:

Kari Davis, CM Supervisor

Phone & Email:

KariD@newbridgemadison.org

Provide comments on:

Emerging Trends (in our area during this quarter):

In the forth quarter, we received the following:

October, we received 13 new intake referrals

November, we received 17 new intake referrals

December, we received 3 new intake referrals

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.

(late\_)

uňavailable):
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.
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership
Programs: 3.00
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
Number of First Responders Dementia Forms completed 0.00

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

Agency Name:

Stoughton Area Senior Center

Reporting Period:

Quarter 4 (October-December)

-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):

- Continued concerns with people with mental health diagnoses not accessing the mental health support needed and tending to isolate and become sicker as a result.
- 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.
- 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 have enjoyed a good alliance with the UW Madison non-profit service Covering Wisconsin which offers excellent education and enrollment help.
- 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.

## <u>Client Issues</u> (that require extensive time or for whom resources are limited or unavailable):

and an analytic year.
<ul> <li>A client got a loan from Check Advance for \$690 to pay for Christmas presents and groceries. Loan carried a 374% interest rate and after 12 months would have cost client \$2200 on mostly interest payments alone. Seniors in Need fund helped client pay most of the loan back. People do not understand the pitfalls of predatory lending and what how exorbitant costs can be over a 12-month period of time.</li> <li>Two clients have made choices to give their fortunes away to kids or grandkids, not understanding that they then cannot qualify for Medicaid services</li> </ul>
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 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.
• 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.
<ul> <li>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 assist and are finding support for people with very limited monthly income, who are in need of housing repairs. Staff are finding that community agencies that assist people with very limited monthly income, who are in need of housing repairs. Staff are finding that community agencies that</li> </ul>
housing project Housing issue/lack of affordable housing still an issue, difficult for people to find.
• The Student Senate along with St. Ann's church helped coordinate and deliver Santa for Seniors gifts to the seniors in our community that do not have a lot of support during the holidays or are in a financial hardship. They donated gifts to over 30 seniors.
Dealing with substance abuse in the senior population, especially during the holiday season.
<ul> <li>We continue to struggle with slippery sidewalks and driveways during the winter months but are running into the "liability concern" of who can assist our seniors with shoveling to help prevent falls.</li> </ul>
· ·
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership
Programs: 27.00
Number of seniors leaving Family Care, IRIS or Partnership Programs and returning to our Case Management Program: 0.00
our Case Management Program: 0.00

Number of First Responders Dementia Forms completed 2.00

3.00

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

Agency Name:		
Sugar River Senior Center		
Reporting Period:		
Quarter 4 (October-December)		
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 had more interaction with disabled individuals ages 50-60 coming into the Sugar River Senior Center for assistance. CM has in some cases only been able to help one spouse in a married couple situation because the other spouse is not technically age or disability eligible.		
CM continues to observe 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.		
•		

Client Issues (that require extensive time or for whom resources are limited or unavailable): CM has dealt with many issues regarding past Energy Assistance participants not getting their annual renewal paperwork in the mail. CM has had to call Energy Assistance to follow up with almost every client who participated in the program last year to initiate the paperwork be mailed or to complete a phone interview. CM has observed clients undergoing some stress trying to figure out how to keep up with the gas and electric bills while their applications are being processed for this heating season. CM notes the Sugar River Senior Center has had the opportunity this year to host two different outreaches so those you can't travel far have the ability to apply for Energy Assistance as a new participant. The first outreach in October didn't have a very good turnout, but the outreach in November had three new participants. 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 Number of individuals counseled regarding reporting & repairing finances after a scam

E-mail completed report by 10 April 2018, 10 July 2018, 10 October 2018, and 10 January 2019 to: aaa@countyofdane.com

10.00

Number of First Responders Dementia Forms completed

1.00

	0.01
Agency Name:	
Southwest Dane Senior Outreach	
Reporting Period:	
Quarter 4 (October-December)	
Reported by:	
Lynn Forshaug	_
Phone & Email:	
608-437-6902	
	_
Provide comments on:	
Emerging Trends (in our area during this quarter):	
Mary Kay was busy helping seniors to look into different Medicare D plans from October through December. Most of them chose to stay with the plan they had.  We were working with seniors to make appointments for Energy Assistance. The seniors did not receive letters from Energy Assistance this year to renew or remind them, so we had to give them reminders or make appointments for them. Many seniors were upset that they couldn't talk to someone in person at Energy Assistance, they were suppose to leave a messages there.	

Client Issues (that require extensive time or for whom resources are limited or unavailable):	4
Lynn spent a lot of time working with seniors in a subsidized housing complex who had a bedbug issue. Lynn contacted many cleaning companies to see if they would come to this specific senior apartment to declutter, before the Pest Control company could come in to spray. I met a cleaning company at this senior's apartment to see what needed to be done and get an estimate of the cost to clean. This senior wanted nothing to do with this company and was determined not part with anything! I finally found a storage unit in town, where she agreed to put her items for a few month. The apartment has now been sprayed for bugs and hopefully bug-free.	st
We have also been working with a lady who has a hoarding problem. This was not discovered un after a breast cancer and broken hip diagnosis. A friend of hers and her doctor were able to talk her into going to an assisted living after her hip replacement, for a clean healing environment.	itil
Mary Kay has been working with a senior with the start of dementia. This senior's family would like to be more involved but the senior doesn't want them involved. The senior still wants to make the decisions and she is not making good choices at this time. She is spending a lot of money on dentures and hearing aids that aren't fitting properly. A Physical Therapist was making home visits to this senior's condo and reported that the senior was leaving the oven on in the community roon and forgetting to take items out of her own oven on time. Mary Kay has spent a lot of time talking with the grandson and ex-daughter in-law who is now the POA for Health.	s n
Mary Kay has spent many hours working with a senior who has a big debt in credit cards due to a son who used his mom's credit card. He has now passed and she has been paying on this for a few years. Mary Kay is working with legal advisers, on how to stop paying on this debt, since Soc Security is her only income. This was a suggestion from the Adult Protected Service staff that can out here for a visit.	cial
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 our Case Management Program: 0.00	to
Number of individuals counseled regarding reporting & repairing finances after a sca	am

0.00

Number of First Responders Dementia Forms completed

0.00

Agency Name:

Waunakee Senior Center

Reporting Period:

Quarter 4 (October-December)

Reported by:

Melissa Woznick & Candice Duffek, Case Managers

Phone & Email:

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#### Provide comments on:

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

Continued increase in need for meals on wheels. More seniors home from rehab and hospital stays and need meals for a period of time.

We provided information to seniors/families for Home Care Agencies, Adult Day Care Centers, transportation options, supplement insurance resources, senior housing and energy assistance.

We together met with 188 seniors for individual reviews for Medicare Part D. Also helped several seniors with SeniorCare Renewal applications during this same time.

Assisted several seniors whom needed assistance right away with food by linking them up to the local food pantry and applying for foodshare. In all cases each senior received foodshare benefit within 10 days of applying.

#### **Energy Services**

We already spend a significant amount of time during this quarter assisting clients with Energy Services (first time appointments and renewals). This year has been difficult to get through on the Energy Services line (2 hour waits), or clients were not getting return calls, when leaving messages. There has also been confusion with the renewal application process (the renewal applications were typically mailed in September, and this year it was November). Case Managers time increased significantly with coordinating their clients appointments, filling out renewal applications, and making calls on their behalf.

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

During a call to a client, he reported to his CM that he had a leaking bathroom faucet that had caused an increase in his Utility Bill. He had paid ½ of a large amount to his Utility provider to avoid his disconnection. This sent him in a tailspin of many outstanding bills. When the CM made a home visit she was able to see his uncleanly home, refrigerator that was not working, and get a sense of what his outstanding bills were. CM was able to find a plumber immediately to fix his leak, to stop the high Utility costs. CM scheduled and went with him to Energy Assistance appointment. Started him on Supportive Home Chore services. Applied for and received financial assistance from Elder Abuse Assistance Funds, Ecumenical board, and a local resource to pay for a month of his outstanding Medicare supplement plan, outstanding PERS bill, the remainder of what he owed on his utility bill, purchase a new refrigerator, and paid for his plumbing bill. Almost 20 hours was spent in a 2 month period, and the CM provided a total of \$2384 with assistance.

Assisted a senior with housing issues. He came to the top of a waiting list for subsidized housing but did not know what to do from there. CM contacted management of the property to see what needed to be done. CM helped the senior by making many phone calls and gathering documents to submit to management. The senior needed a social security card, checking acct statement, records from the farm etc... CM only had 7 business days to do this and was able to get it submitted. Senior is currently waiting to hear back about the apartment unit.

Limited resources for a senior that needed medications but could not afford the full cost. He had no drug coverage. CM contacted a few agencies/churches but no funds available to assist. CM did get him enrolled in Medicaid and Linet but it took two weeks to do so. Senior was then able to get medications.

Number of contacts with seniors en	nrolled in Family Care, IRIS & Partnership
Programs: <sub>14.00</sub>	
Number of seniors leaving Family Cour Case Management Program:	Care, IRIS or Partnership Programs and returning to 0.00
Number of individuals counseled re 1.00	egarding reporting & repairing finances after a scam
Number of First Responders Deme	entia Forms completed 1.00

Agency Name:	
West Madison Senior Coalition	
Reporting Period:	
Quarter 4 (October-December)	
Reported by:	
Maureen Quinlan, Rachel Okerstrom	
Phone & Email:	
238-7368, maureenq@newbridgem രപ്ദരം , org	
	atha mangig palabahan
Provide comments on:	
Emerging Trends (in our area during this quarter):	
Medicare part D open enrollment.	, , , , , , , , , , , , , , , , , , , ,
Transitions to long term care programs.	
Lack of affordable housing:	
Support needs around dementia or mental illness.	
Affordable in-home care services.	

Client Issues (that require extensive time or for whom resources are limited or
unavailable):
Lack of affordable housing.
Supports around dementia or mental illness.
Number of contacts with seniors enrolled in Family Care, IRIS & Partnership Programs: 1.00
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 1.00