



COUNTY
Richland

Discover it here! — 

Three-Year Aging Plan
2025-2027

Table of Contents

Executive summary	3-5
Context	5-9
Development of the aging plan	9-10
Community engagement	9
Partners and resources	10
Public hearings	10
Goals and strategies	10-18
Program advancement	18-19
Community engagement and public input	18
Title III and Title VI coordination	18
Aging unit integration and collaboration with the local ADRC	19
Emergency preparedness	19
Organizational structure and leadership of the aging unit	19-27
Primary contact	19
Organizational chart of the aging unit	20-22
Aging unit coordination with the aging and disability resource center	22-23
Statutory requirements for the structure of the aging unit	22-23
Policy-making body	24
Advisory committee	25
Budget summary	27-29
Verification of intent – Signatures	30
Appendices	30-43
Compliance with Federal and State Laws and Regulations - Signatures	32

Executive summary

Every three years, the Richland County Aging unit develops and submits to the Greater Wisconsin Agency on Aging Resources a “Three Year Aging Plan”. This plan is required for Richland County to receive funds under the Older Americans Act of 1965.

Furthermore, it assists the aging unit in structuring the agency’s priorities and goals for the future. This plan aims to help educate the public, stakeholders and decision-makers, provide a concise overview of the aging unit’s role within the community including mission, vision, and values. In addition, it highlights the aging unit’s long-term vision for the evolution of aging and disability programs and services on behalf of older adults and their caregivers in the community.

The Richland County Aging unit is an integrated part of the Aging and Disability Resource Center (ADRC) of Eagle Country, and is a part of Richland County Health and Human Services. It is the mission of the ADRC to be *“dedicated to working with adults and their families who are impacted by disability or aging. We will strive to enhance their self-sufficiency and quality of life by providing information, assistance, and education. In doing so, we will at all times promote the rights, dignity and preferences of the individual.”*

Richland County’s 2025-2027 Aging Plan has been developed utilizing a significant amount of input from the community to develop a plan that is truly representative of the needs of the community. To accomplish this, a series of outreach activities took place. The ADRC was able to gain public input through an array of methods including:

- Starting in late 2023, staff attended meetings and held listening sessions at senior apartment buildings, local libraries, and other groups within the community
- Input was received from the Aging/ADRC Advisory Committee (formerly known as Commission on Aging and Disability Committee)
- Input was received from the Nutrition Advisory Committee
- An online survey was developed and shared with a survey link, which allowed individuals to complete and submit the survey online. The survey was also emailed to the Care Coalition, local Managed Care Organizations, local I Team, and other individual stakeholders within the county
- A paper version of the survey was given to customers as they came into the ADRC, to all home delivered meal recipients, congregate site participants, placed on our local Facebook page and was placed in our newsletter
- One on one conversations happened between staff and local citizens regarding what they see as things needed to age well in Richland County

The input received assisted in the development of the plan, which reflects key issues for people who are aging in the county. The following sections discuss information learned through the above input mechanisms.

IIIB: Supportive Services: Local priorities were discussed with different groups throughout the county. Common themes raised were the need for increased access to meal sites and food resources, lack of caregivers, and social isolation. Individuals continue to desire services that will promote inclusiveness and opportunities to be an active part of advocacy initiatives. Over the next three years, the aging unit will work towards training individuals on how to be an effective advocate and to ensure there are opportunities for aging members of our community to take an active role in advocacy.

IIIC 1&2: Elder Nutrition Program: Individuals across the county would like to see more access to home delivered meals. Currently the program is not able to provide hot home delivered meals from border to border due to a lack of volunteers and funding. Furthermore, a common theme is there is a desire to have better access to fresh food resources. One continued concern mentioned was that there is a lack of a local grocery store and there are not enough meal sites around the county to meet the need. Over the next three years, the nutrition program will work on increasing access to home delivered meals and creating more fresh food options.

Another area of potential growth is improving the visibility of the Nutrition Program. Many stakeholders have shared that they do not know how to access information regarding the meal sites and home delivered meals. This feedback highlights that there is not enough information available regarding the meal sites, activities, and home delivered meals. The program will continue to work on increased visibility over the next three years.

IIID: Health Promotion: Conversations with community members highlighted that although the ADRC continues to partner with Symons Recreation Complex in Richland Center to provide numerous health promotion classes, there is still a need for increased programming. Over the last nine years, this partnership has blossomed from offering one Stepping On class to now offering Tai Chi, Strong Bodies, PALS, Walk With Ease and SAIL (Stay Active and Independent for Life).

Over the last three years, the ADRC has worked to offer health promotion programs through the ADRC's aging unit. Utilizing ARPA funds, the ADRC has had staff trained to offer an additional program, Bingocize, which has been very successful and added to the array of options available to aging individuals across the county. Offering evidence-based programs and surveying individuals in the county regarding ongoing needs, the aging unit has been able to gain useful information regarding adding programs. These additional programs foster not only an improvement in one's physical condition but also meet socialization needs as well.

Over the next three years, the ADRC will continue to foster a positive partnership with Symons Recreation and all of Richland County to provide more evidence-based programs and increase offerings of them across the county.

III: Caregiving: Stakeholders voiced that they are concerned about the lack of home care providers and respite services in the county. When caregiving services are needed, there are very few options available. Due to this, many people are not able to access the respite they need and are not able to attend in person support groups. Over the next three years, the aging unit will continue to work to grow a network of resources that is able to meet the needs of caregivers, including a friendly caller program and increased respite services so the caregiver can access support groups and be able to meet their own personal needs.

Advocacy: Another common theme was the lack of knowledge when there are policy changes that could affect resources in the community. Individuals stated they would like to see an increase in how changes are communicated. To strengthen communication, the ADRC will continue to increase usage of social media, radio, newspaper, newsletters, public listening sessions, etc.

Throughout the process of gaining information for the aging plan, conversations with individuals made it clear that there needs to be more emphasis on how aging members of our community can get involved in advocacy actions at the local, state and national level. Over the next three years, the aging unit will focus on connecting community members to advocacy trainings, opportunities, resources and services.

Another result of the extensive outreach for the plan is that it became clear there is a need to have programs in place to diminish loneliness and isolation. There is a need for more social connectedness throughout the county. Over the next three years, the aging unit will work on creating a friendly caller program.

Over the last three years, the ADRC has continued to foster strong relationships with individuals and entities serving those with dementia. This will be a continued focus for the county and the ADRC of Eagle Country as a region. Within the region, the population continues to age and there is an increase in people who are affected by dementia. The ADRC of Eagle Country is an ADRC region that includes Richland County, Juneau County, and Crawford County. The addition of a half-time Dementia Care Specialist has helped to increase awareness and education related to dementia. It has further ensured the increase in services and programs for individuals who have dementia and for their family and friends who are caring for them.

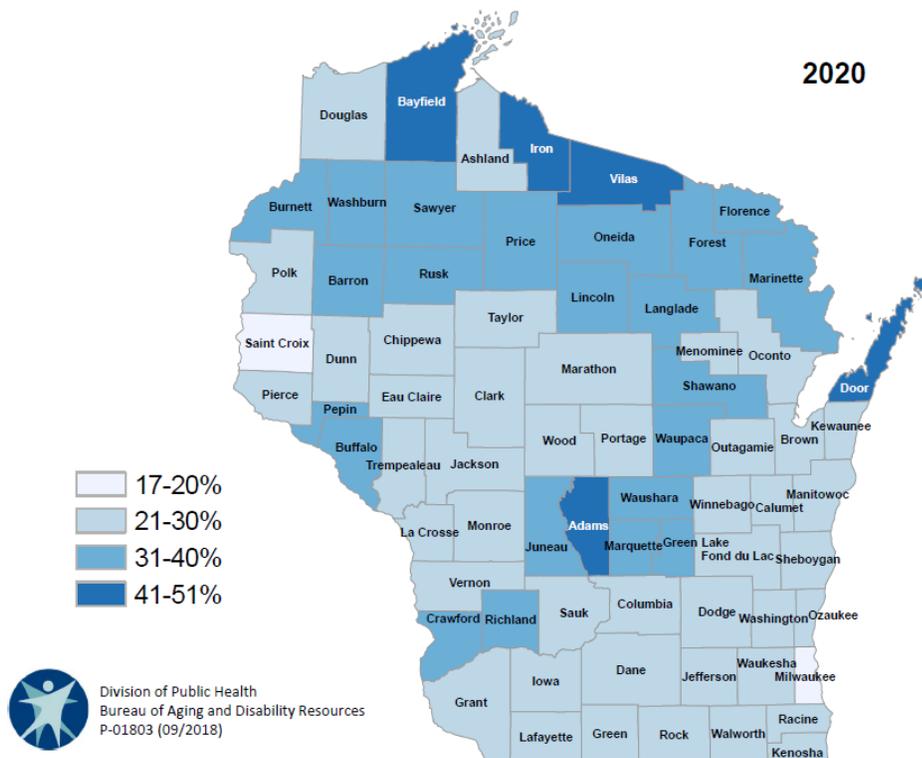
Context

Nestled in the Driftless region of Southwest Wisconsin is Richland County. Richland County is a rural county with a population of 17,226 residents. The county seat, Richland Center, is the main population center of the county with 4,958 residents. Population projections show that there will continue to be a rapid increase in individuals over 60 across the country and in our local community. In 2020, 35.4% of the county residents were over 60. The percentage of individuals over 60 is expected to increase across the state and in Richland County specifically, the percentage of those over 60 is projected to go as high as 40% by 2035. Currently, the county is seeing many elders

moving into town, but also a significant number of elders are remaining in their more rural homes. In order to be effective in meeting their needs, the ADRC/Aging Unit will need to include efficient programming for the most rural residents.

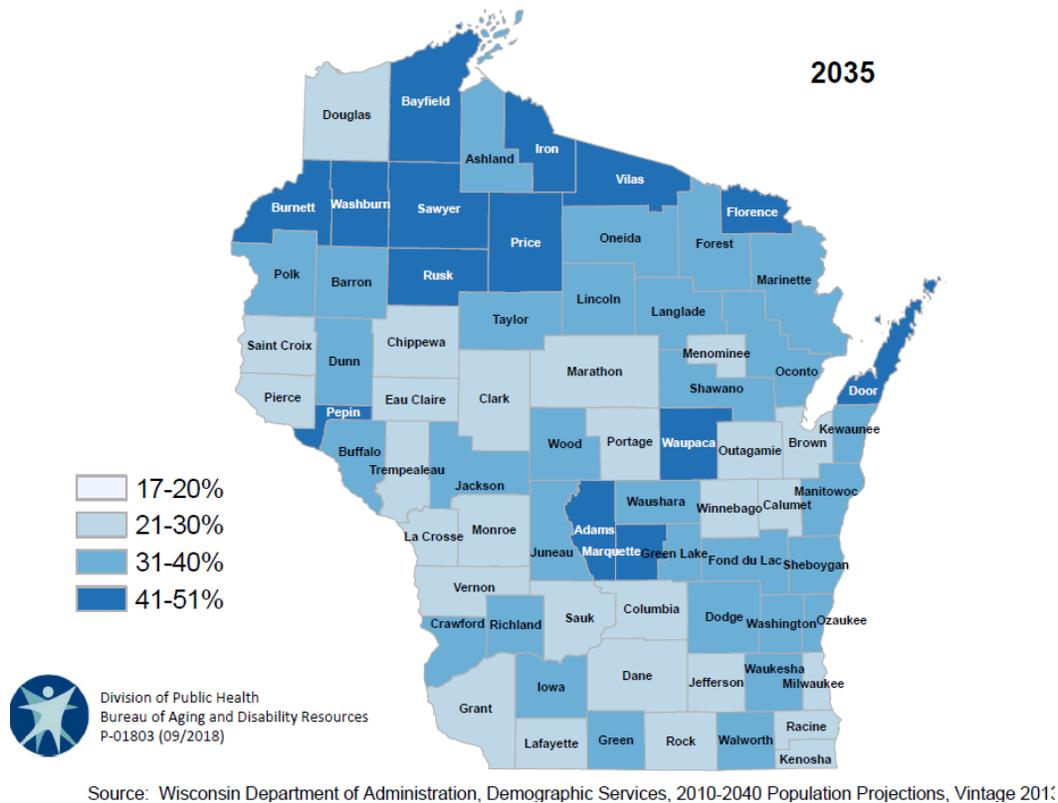
County	County, City, Town or Village	Population; total	Population; ages 60 and older
Richland County	Richland County	17,226	6,100

Percent of the Projected Population Ages 60 and Older, 2015-2040



Source: Wisconsin Department of Administration, Demographic Services, 2010-2040 Population Projections, Vintage 2013

Percent of the Projected Population Ages 60 and Older, 2015-2040



There are several assets for the county: the Richland Hospital and Clinic, Southwest Regional Partners, several large industries, returning retired residents investing in the community, active community churches and growing tourism activities. Ongoing initiatives include the Richland Center Economic Development initiative whose goal is to foster economic growth in the community that will enrich local residents, and visitors, quality of life. Richland County is a topographically diverse area, which provides many opportunities to enjoy outdoor activities including; kayaking with accessible boat landings, biking, hiking, walking, snowshoeing and snowmobiling through the beautiful settings Richland County has to offer. All of these shore up the economic base for the county. However, it is important to monitor the labor force in Richland County. As the community ages, there has already been a decline in workers, especially in the caregiving industry. Along with this, due to worker shortages in many areas, it is likely that larger industries may look to outsourcing or relocating their industry if qualified employees are not available.

The community has stepped up and continues to proactively address future increased need for health care service; Richland County has a local hospital, medical clinic, geriatric assessment center, free clinic, and fully operational ICA's and Family Care long term care systems. Unfortunately, even with a local health system in place, there are very limited resources for in-home care services.

Beyond this, local community churches, concerned citizens, and social service agencies have worked diligently over the last 18 years to address homelessness in Richland County. There continues to be some shelter opportunities for families, which includes a transitional housing program.

The increase in older adults in our community also brings opportunity for increased volunteerism. These individuals have many skills and talents, which are a positive resource for the county. Richland County has a very robust volunteer network for its transportation program but as the community ages, increased need for transportation and volunteer drivers will continue to rise.

The nutrition program also offers volunteer opportunities. It unfortunately saw a drastic drop in volunteers during the pandemic and continues to actively rebuild its volunteer base. This will be an ongoing effort over the next three years.

To gain robust community involvement in gathering information for the 2025-2027 plan, focus groups, listening sessions and a public hearing were held to gather information. Attendees were asked what they see as needs and strengths for the aging population in Richland County. Additionally, ADRC customers participated in a related, quick and easy survey asking them to list the issues older people face. Along with all of these efforts, there were numerous 1-to-1 conversations with consumers and caregivers about what they see as needs within the community.

Overall, the results of the conversations and surveys identified more assets than challenges and have been grouped into four different categories: personal assets and challenges, community assets and challenges, infrastructure assets and challenges, and lastly support services assets and challenges. The results gathered were informative and in line with previously identified trends.

Results:

- Personal assets included competence and spirituality – the challenges included fiscal problems, physical impairments, loneliness and isolation.
- Community assets were many and varied (clubs, organizations, service organizations, church, etc.) – challenges voiced were continued personal budgetary issues, even with the challenges noted they were followed by something positive or by a hopeful solution.
- Infrastructure was one category where the challenges out-numbered the assets. For those in the rural areas who are no longer driving, transportation and access to food and other support services were noted as the biggest challenges. Part of the issue is the lack of a grocery store, other than Wal-Mart in Richland County. A decline in volunteers for the transportation and nutrition programs has also caused gaps in services.
- Support services challenges also out-numbered the assets. For individuals needing in home services, there is a lack of providers available. Over the last five years, there has been a decline in in-home service providers due to a lack of

staff. Due to this, it has become increasingly more difficult for individuals to age-in-place in their own homes.

The role for the ADRC in Richland County will be to continue to provide quality aging program services, continue to lead, be involved in and supportive of community efforts to address the challenges of transportation, housing, nutrition and social connectedness.

Development of the aging plan

Community engagement

Public involvement continues to be an ongoing process in the aging unit's daily operation. Gaining consistent and continuous information from community members is the building block of ensuring the aging unit is meeting the needs of the community. As part of its daily functioning, the ADRC's aging unit has a continuous presence within the community. Along with this, the aging unit is diligent about using a variety of methods for collecting and integrating input from older adults into aging plans and program direction. The methods include:

- Listening sessions held in person and with a virtual option with the Nutrition Advisory Committee and the ADRC/Aging Advisory Committee (formerly known as the Commission on Aging and Disability committee)
- In-person listening sessions were held at local senior housing complexes and meal sites in Richland Center, Rockbridge and Cazenovia
- The ADRC continues to be a part the local I-Team, Richland County Care Coalition, Richland County Crisis Team dementia networks, transportation networks, housing networks, homelessness prevention coalition, food pantry board, and emergency preparedness
- The Aging/ADRC Advisory Committee (formerly COAD) continues to have monthly agenda items for citizen comments, senior group reports and advocacy
- Health and Community Services Committee meetings include agenda item for citizen comments
- Transportation Coordinating Committee meeting agenda continues to have items for citizen comments and transportation updates
- Attending city council meetings
- Identifying unmet needs from ADRC reporting
- Listening to customers using services
- Attending local senior meetings and meal sites
- Reading the local newspaper-in particular letters to the editor
- Discussing with staff what they see and hear from customers
- Asking customers to fill out simple planning surveys about issues facing older people and the strengths older people offer

Partners and Resources

Careful and planned outreach has been completed throughout the process and will continue through the entirety of the plan. Aging unit staff included regular agenda items on monthly committee meetings related to the development of the plan including an ask of committee members to reach out to individuals in the community for feedback related to the plan. Being integrated in the community is a crucial part of ensuring the plan is relevant to the individuals served.

Public hearings

As stated above, the ADRC held numerous focus groups and listening sessions to gain useful information for the creation of the plan. The ADRC also held a formal public listening session to gain feedback on the draft aging plan. This public hearing gave an additional opportunity to collect feedback and comments to make changes prior to the final plan being approved by the policy-making body.

To ensure that the public had the opportunity to attend the public hearing, notification was placed on the ADRC's web page, in the local newspaper for two weeks, on the agency's Facebook page and in the local newsletter.

The public hearing was held on September 25, 2024 to gain final input from the community regarding the draft aging plan. Comments regarding the draft plan were mainly centered around the context and executive summary. Individuals were supportive of the plan as a whole including the stated goals.

Goals and strategies

IIIB Goal

Older Americans Act program area <input checked="" type="checkbox"/> Title III-B Supportive Services <input type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program <input type="checkbox"/> Title III-D Evidence-Based Health Promotion <input type="checkbox"/> Title III-E Caregiver Supports
Ageing Network value <input type="checkbox"/> Person centeredness <input checked="" type="checkbox"/> Equity <input checked="" type="checkbox"/> Advocacy
Goal statement: Goal: Older adults will have access to training and educational opportunity to assist with becoming effective advocates.

Plan or strategy:

- Conduct outreach to older adults to increase access to unbiased information on important issues regarding elders.
- Provide annual advocacy training for the members of the governing board.
- Collaborate with local police department to provide older adult fraud prevention presentations.
- Staff and Committee members will recruit individuals to attend advocacy opportunities
- Coordinate a group of individuals to go to Aging Advocacy Day.

Documenting efforts and tools:

Documenting **how much** has been done:

- Baseline data will be created with the number of trainings offered and number of attendees
- Data will be collected at the end of each year to measure effectiveness of strategies

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

- Attendance will be tracked for Aging Advocacy Day and all other presentations. At least two aging individuals will attend each advocacy opportunity.

Assessing whether anyone is **better off**:

- A survey will be created and disseminated to gauge if people feel empowered and if efforts were valuable.
- Training events completed with post evaluations forms at the end of each will be used to measure effectiveness.

OPTIONAL: Notes on considerations for framing goals

1. Why are we choosing this to focus our efforts on?
When individuals who are aging in our community are actively engaged in advocacy they are able to help guide the services that most appropriate for them.
2. Why do we believe this particular effort will make things better?
Being engaged in advocacy will help increase better health outcomes, encourage changes in policy, which will help ensure services, and funding are available.
3. How do we think this leads to people being better off?
Individuals will have information to help them make educated choices.

- 4. How will we know that when we are done with this effort?
Advocacy is an ongoing need. There has been a lack of involvement in Richland County. When there is a robust number of people engaging.
- 5. How will we know whether anyone is better off because of this effort?
When there are changes in policy and programs to assist in educating the community regarding scams, financial exploitation and available resources. A survey will be completing at the beginning of the plan period and at the end to show progress.

C1 Goal

<p>Older Americans Act program area</p> <p><input type="checkbox"/> Title III-B Supportive Services</p> <p><input checked="" type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program</p> <p><input type="checkbox"/> Title III-D Evidence-Based Health Promotion</p> <p><input type="checkbox"/> Title III-E Caregiver Supports</p>
<p>Ageing Network value</p> <p><input checked="" type="checkbox"/> Person centeredness</p> <p><input checked="" type="checkbox"/> Equity</p> <p><input type="checkbox"/> Advocacy</p>
<p>Goal statement:</p> <p>The nutrition program will establish partnerships with community gardens or small farms. Included in these partnerships, the program will engage seniors in gardening and related activities which will help to provide nutritious, locally sourced produce to include in meals. The activities will further foster intergenerational connections and community spirit.</p> <p>Objectives:</p> <ul style="list-style-type: none"> ➤ Create and maintain ongoing partnerships with community gardens or farms. ➤ Work with local partner to create a curriculum for gardening and cooking activities. ➤ Set up a menu incorporating fresh produce from the gardens. ➤ Measure and assess the impact on nutrition, well-being and community engagement.
<p>Plan or strategy:</p> <p>The program will identify suitable partners, existing community spaces for gardens/farms ensuring the consideration of accessibility for seniors and resources</p>

available. As part of the plan, the program will partner with local senior centers, community organizations and schools for resources and support.

Documenting efforts and tools:

Community Gardens/Farms:

- Work with local partners to establish donations and in-kind volunteers to ensure the sustainability of the program.
- Plan the layout and type of produce to grow.
- Include raised beds or accessible gardening options for seniors.
- Integrate tools and equipment suitable for various physical abilities.

Activities:

- Work with partners to offer gardening activities, workshops and events.
- Provide educational information on nutrition and cooking.

Meal Program:

- Design a menu incorporating the produce grown.

Implementation:

Recruitment and Training:

- Work with partners to recruit volunteers, including seniors and other community members.
- Partners will provide training on gardening, nutrition and food safety.

Establishment:

- Identify space and local partner
- Volunteers will begin planting and setting up gardens/farms.

Meal Preparation:

- Work with caterer to integrate fresh produce into menu.
- Start serving meals using produce from the garden.
- Gather feedback from participants to refine and improve the program.

Documenting efforts and tools:

Documenting **how much** has been done:

The program will track progress:

- Monitor garden growth, activity participation and meal satisfaction
- Create a survey to collect data on socialization impacts and health and well-being of participants at the beginning of the project and at the end of the plan period
- Adjust the program based on feedback and evaluation results

Sustainability and Growth:

- Seek grants, donations and sponsorships to support the initiative
- Explore possibilities for expanding the program to other meal sites
- Continue building relationships with local organizations and stakeholders
- Promote the program to attract more participants and supporters
- Create a list of meal site participants and log participation
- Ensure activities are designed to be accessible and enjoyable for people of all ages and physical abilities

- Education: Include educational components on sustainable farming practices and healthy eating habits

Notes on considerations for framing goals

1. Why are we choosing this to focus our efforts on?
This initiative not only supports healthy living but also strengthens community ties and empowers older individuals through active involvement and meaningful contributions.
2. Why do we believe this particular effort will make things better?
Increasing education of the consumption of fresh produce while bridging the gap through an intergenerational effort is a healthy way to help the older population find purpose and decrease loneliness and isolation while also increasing the nutrient density of meals.
3. How do we think this leads to people being better off?
This initiative will increase consumption of healthy produce, increase education and decrease isolation and loneliness.
4. How will we know that when we are done with this effort?
Through surveys that will be disseminated throughout the process of the initiative.
5. How will we know whether anyone is better off because of this effort?
Evaluation of the survey responses tracked participation at the meal sites.

C-2 Goal

Older Americans Act program area

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

Ageing Network value

- Person centeredness
- Equity
- Advocacy

Goal statement:

Increase the service area providing Home Delivered meals to ensure that qualifying individuals in the most rural parts of the county, with the greatest need have the opportunity for nutritious, hot meals.

Due to the lack of volunteers, the program has not been able to offer hot meals to individuals who do not live within 5 miles of a designated meal site. This means that the majority of the county is not able to receive hot meals. Through this initiative, the program will provide increased food security for older, qualified individuals who are living throughout the county.

Plan or strategy:

Increase efforts in recruiting volunteers throughout the county promoting the need to ensure food security in the county.

- The nutrition program will utilize the meal prioritization tool to evaluate individuals' needs for home delivered meals.
- The program will increase the current mileage requirement of being within five miles of a meal site to seven miles.
- Home Delivered meals will be offered out of the Rockbridge meal site, beginning with one hot meal per week and increasing to three hot meals per week by the end of the plan period.
- Ongoing work with the Nutrition Advisory Council to assist in completing outreach to gain more volunteers to meet increased needs will be done
- The program will increase its base of volunteers in order to deliver meals and ensure the program is able to fundamentally and fiscally meet the need

Documenting efforts and tools:

Documenting **how much** has been done:

- Data entered into Peer Place will reflect the change in the number of Home Delivered meals being provided.

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

- Program staff will meet twice yearly to re-evaluate the progress.
- Nutrition Satisfaction surveys will be completed at the start of the effort and at the end of each year to provide feedback regarding satisfaction and progress towards goal

Assessing whether anyone is **better off**:

- Ongoing In conversations with Home Delivered Meal participants will help to assess if the increased service provision is helpful.
- A survey will be completed and evaluated to assess the outcomes of the effort

Notes on considerations for framing goals

1. Why are we choosing this to focus our efforts on?
Large parts of Richland county do not have access to home delivered meals. There is a lack of a grocery store other than Walmart in the county, which leads to food insecurity. This initiative will help increase food security to the most rural parts of the county and individuals with the greatest need.

- 2. Why do we believe this particular effort will make things better?
Food security is extremely important for maintaining health and helping individuals continue age in place and remain their own homes.
- 3. How do we think this leads to people being better off?
We will be able to serve more aging individuals nutritious food and provide interaction and safety checks. The combination of these services will improve health outcomes.
- 4. How will we know that when we are done with this effort?
When we are able to meet the nutritional needs for eligible older individuals living throughout Richland county.
- 5. How will we know whether anyone is better off because of this effort?
Eligible individuals will receive hot meals delivered. Surveys will be completed yearly to gauge the success of the effort.

IIID Goal

<p>Older Americans Act program area</p> <p><input type="checkbox"/> Title III-B Supportive Services</p> <p><input type="checkbox"/> Title III-C1 and/or III-C2 Nutrition Program</p> <p><input checked="" type="checkbox"/> Title III-D Evidence-Based Health Promotion</p> <p><input type="checkbox"/> Title III-E Caregiver Supports</p>
<p>Aging Network value</p> <p><input checked="" type="checkbox"/> Person centeredness</p> <p><input checked="" type="checkbox"/> Equity</p> <p><input type="checkbox"/> Advocacy</p>
<p>Goal statement: OAA Title III-D Social Isolation and Loneliness</p> <p>To provide equitable access to evidence-based programs, fostering a sense of belonging, and mitigating the negative effects from social isolation and loneliness.</p> <p>Through comprehensive initiatives, the ADRC/Aging Unit of Richland County aims to create a community where older adults feel connected, supported, and empowered to prioritize their well-being. By increasing the implementation of evidence-based health promotion programs and social isolation and loneliness initiatives, we hope to foster meaningful connections to enhance both the physical and mental health outcomes for older adults, ultimately fostering a healthier and more vibrant community.</p>

Plan or strategy:

Continue the ongoing partnership with Symons Recreation Complex to provide robust health promotion programming. As part of this the unit will assess Richland County’s ability to provide increased health promotion programming with its current system. Identify and train new health promotion class instructors to ensure the current and future demand for programming can be met. Implement expanded evidence-based programming and add social isolation and loneliness questions to the Peer Place registration form to measure impact.

Documenting efforts and tools:

Documenting **how much** has been done:

- Gather baseline data including number of current classes held in the last year and number of individuals over 60 served
- Implement survey to gather interest in programs

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

- Capture the number/description of classes provided.
- Once a new instructor (or more) has been found, decide on programs to be offered and initiate training.
- Once a program (or two) has been decided on, track participation.

Assessing whether anyone is **better off**:

- Gather baseline data.
- Increase in program options = increase in improved health outcomes, social connectedness and person-centered services.
- Information gathered from surveys and/or follow-up calls will offer qualitative data, “Did you find improved health outcomes and social connectedness?”

Title III E Goal

Older Americans Act program area

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

Aging Network value

- Person centeredness
- Equity
- Advocacy

Goal statement:

During aging plan outreach, the community stated a need for friendly callers to reach out to people who are isolated in the community. Creating a volunteer friendly caller program will decrease caregiver stress by increasing support and address social isolation in the rural communities across Richland County, which will decrease social isolation and improve health outcomes.

Plan or strategy:

- Research other friendly caller programs
- Create policies/procedures for implementation of program including vetting of volunteers and training of volunteers
- Create a marketing initiative to recruit individuals to provide friendly caller services.
- Implement a list of vetted individuals willing to call aging individuals who are home bound.
- Complete outreach to the community via three modes of information to let individuals know the service is available.

Documenting efforts and tools:

Documenting **how much** has been done:

- Gather baseline data
- Implement local survey

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

- Document benchmarks for the effort including number of volunteers, participants and outcomes

Assessing whether anyone is **better off**:

- Gather data through a survey and compare to initial baseline data, including a caregiver survey question asking, "Did the caregiver find relief from strain and did the friendly caller provide the level of support needed?"
- Reach out to each participant and all friendly callers to gauge satisfaction with the program

Program advancement**Community engagement and public input**

Describe the aging unit's approach to enhance the amount and quality of community engagement and public input into aging plan and program development, in an ongoing effort to increase and improve interaction with community members about aging programs and services.

Title III and Title VI coordination

In an effort to ensure coordination between the ADRC and the Ho-Chunk Nation, the ADRC will have contact with the tribe at least, two times a year to learn what each program can provide to each other. This includes information regarding nutrition options, health promotion options, transportation options and more. The ADRC will request and share information in the Family and Friends newsletter programs that Ho-Chunk Nation is offering for tribal members.

Aging unit integration and collaboration with the local aging and disability resource center

The Richland County Aging unit is an integrated part of the Aging and Disability Resource Center of Eagle Country – Richland County, and is a unit within Richland County Health and Human Services. It is the mission of the ADRC to be *“dedicated to working with adults and their families who are impacted by disability or aging. We will strive to enhance their self-sufficiency and quality of life by providing information, assistance, and education. In doing so, we will at all times promote the rights, dignity and preferences of the individual.”*

Emergency preparedness

The ADRC/Aging unit is an active part of the planning and implementation of emergency preparedness. Throughout the years, Richland County has experienced large amounts of flooding and severe weather resulting in the need to support community members. This along with the activation of providing services during the COVID pandemic has ensured the unit, and the county as a whole, is well prepared for a variety of emergencies. Aging unit involvement includes being a part of the EOC (Emergency Operations Command) meetings and the organization and support of emergency local shelters in cases of flooding or natural disasters. The aging unit further provides transportation to the community in cases when evacuation is necessary, and provides for nutritional needs for individuals over 60.

Organizational structure and leadership of the aging unit

Primary contact

Primary contact to respond to questions about the aging plan

Name: Roxanne Klubertanz-Gerber

Title: ADRC Manager

County: Richland

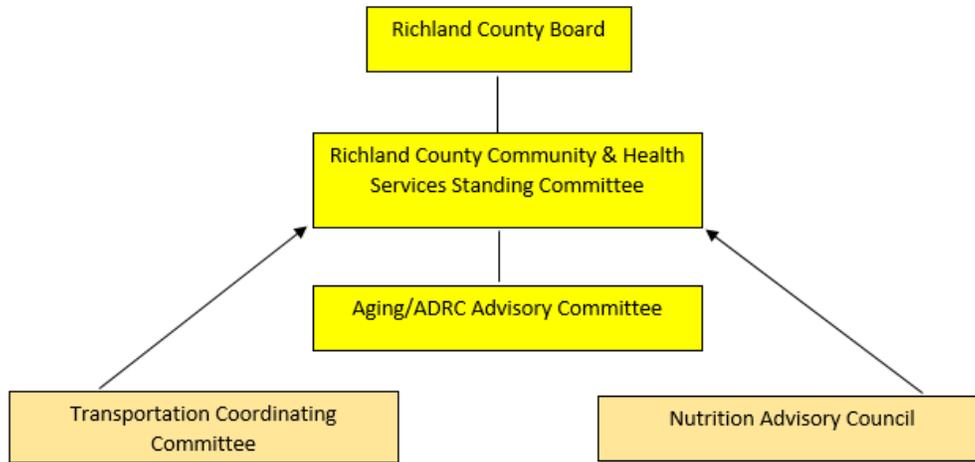
Organizational Name: ADRC of Eagle Country – Richland County

Address: 221 West Seminary Street

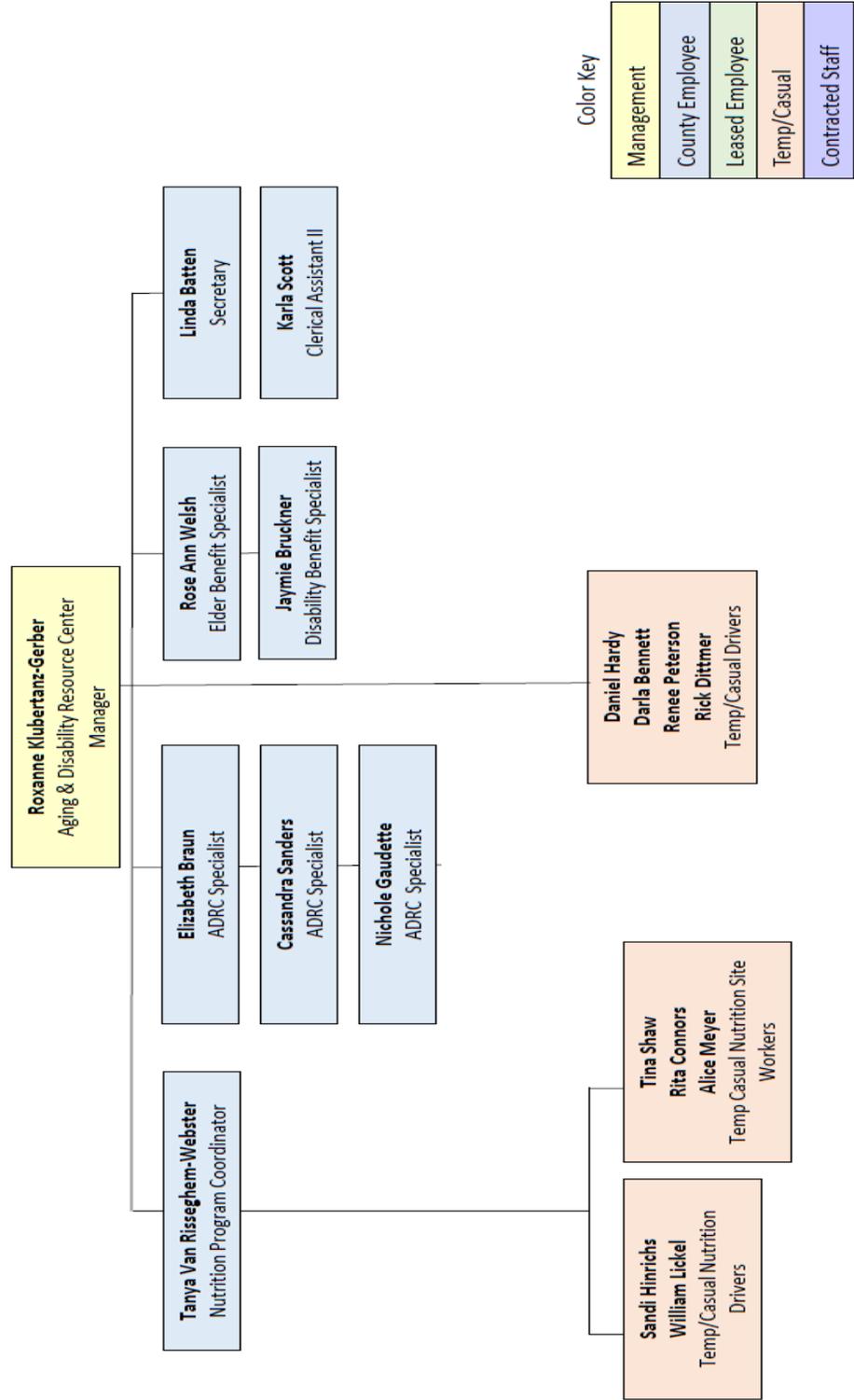
City: Richland Center State: WI Zip Code: 53581

Email Address: roxanne.klubertanz@co.richland.wi.us Phone: 608-647-4616

Richland County Committee Structure



Richland County Health & Human Services
 Aging & Disability Resource Center
 Organizational Chart



Staff of the Aging Unit

<p>Name: Roxanne Klubertanz-Gerber Job Title: Manager, ADRC of Eagle Country – Richland Center Office Telephone Number/Email Address: 221 West Seminary Street Richland Center, WI 53581 608-647-4616 roxanne.klubertanz@co.richland.wi.us</p>
<p>Brief Description of Duties: Oversight and management of the ADRC, which includes ADRC services, transportation, nutrition and aging program services.</p>
<p>Name: Karla Scott Job Title: Administrative Secretary Telephone Number/Email Address: 608-647-4616 karla.scott@co.richland.wi.us</p>
<p>Brief Description of Duties: Provide administrative support, manage resource material library, responsible for various tracking/reporting systems, provide walk-in and phone reception.</p>
<p>Name: Rose Ann Welsh Job Title: Elder Benefit Specialist Telephone Number/Email Address: 608-647-4616 rose.welsh@co.richland.wi.us</p>
<p>Brief Description of Duties: Provide Elder Benefit Specialist program services as required by program mandates. Information and assistance is mostly provided by ADRC Specialists, which allows the EBS to focus on those services that can only be done by EBS.</p>
<p>Name: Jaymie Bruckner Job Title: Disability Benefit Specialist Telephone Number/Email Address/email Address: 608-647-4616 jaymie.bruckner@co.richland.wi.us</p>
<p>Brief Description of Duties: Provide Disability Benefit Specialist program services as required by program mandates.</p>
<p>Name: Cassandra Sanders, Nichole Gaudette, Elizabeth Braun Job Title: ADRC Specialist Telephone Number/Email Address 608-647-4616</p>

cassie.sanders@co.richland.wi.us ; nichole.gaudette@co.richland.wi.us ;
elizabeth.braun@co.richland.wi.us

Brief Description of Duties:

All are generalist ADRC Specialists and provide the required ADRC services. Cassandra Sanders is assigned to supporting disabled youth transition into the adult service world from children's waiver service programs. Nichole Gaudette co-facilitates the Caregiver Support Group and all ADRC Specialists assist with outreach and health promotion programming.

Name: Linda Batten

Job title: Secretary/Transportation Coordinator

Telephone Number/Email address:

608-647-4616

linda.batten@co.richland.wi.us

Brief Description of Duties:

Provides advanced secretarial duties as needed; coordinates county van drivers and volunteer drivers to provide medical transportation under the Driver Escort program and the Richland Public Transportation program.

Name: Tanya Webster

Job title: Nutrition Program Coordinator

Telephone Number/Email address:

608-647-4616

tanya.webster@co.richland.wi.us

Brief Description of Job Duties:

Performs day-to-day operations of the Senior Nutrition Program which includes development of employee trainings, both local and regional. Position further completes volunteer recruitment of home delivered meal drivers, menu development, development of food safety education, and various other duties in accordance with policies and procedures listed in Chapter 8 "Nutrition Program Operations" of Wisconsin Aging Network Manual of Policies, Procedures & Technical Assistance, Federal and State laws, and Richland County Policies.

Name: Cindy Bromeland

Job Title: Adult Protective Services Worker

Telephone Number:

608-647-8821

cindy.bromeland@co.richland.wi.us

Brief Description of Duties:

Responds to reports of elder/adult abuse, determines level of risk and puts in place plans and procedures to assure safety. Supervision of the APS worker is completed through Behavioral Health Services, a unit within Health and Human Services.

Aging unit coordination with the Aging and Disability Resource Center (ADRC)

The Aging and Disability Resource Center of Eagle Country – Richland County Office is a unit housed within Richland County Health and Human Services, which provides ADRC services and administers Aging programs. The adult/elder abuse protection services is managed through the Behavioral Health department, which is also housed within Richland County Health and Human Services. In order to facilitate good communication with this program the APS Social Worker attends meetings with the ADRC twice per month. The ADRC Manager also attends APS supervision meetings with the Behavioral Health Manager.

Fiscal reporting for Adult Protective Services EAN funds is completed by the ADRC Manager who is supervised by the director of Health and Human Services and supervises all above positions. Fiscally, the ADRC manager submits reports to the area agency on aging.

As a unit within Health and Human Service, the ADRC's governing committee is the Community and Health Services Standing Committee. At the unit level, three bodies advise the ADRC: the Transportation Coordinating Committee (TCC), Nutrition Advisory Committee (NAC) and the Aging/ADRC Advisory Committee (formerly known as the Commission on Aging and Disability, COAD). These bodies are highly respected therefore their recommendations for motions are regularly approved by the Community and Health Services Standing Committee, which in turn increases approval from the County Administrator and the County Board of Supervisors.

The ADRC Unit is also one of three satellite offices that make up the ADRC of Eagle Country region. Together the region constitutes three counties collaborating to provide uniform, high quality ADRC and aging services across southwest Wisconsin.

The mission statement for the ADRC unit and the Aging/ADRC Advisory Committee is: The Aging and Disability Resource Center is dedicated to working with adults and their families who are impacted by disability or aging. We will strive to enhance their self-sufficiency and quality of life by providing information, assistance and education. In doing so, we will at all times promote the rights, dignity and preferences of the individual. By integrating mission into the organizational structure and day-to-day activities of the Aging and Disability Resource Center the following goals are achieved:

- People are able to easily locate and access services.
- People are informed about programs and services.
- People receive advocacy and support when needed.
- People experience better health and improved quality of life.
- Elderly citizens recognize the Aging and Disability Resource Center will provided support and services required under the Older American's Act of 1965.
- The Aging and Disability Resource Center is recognized by the community as a place to obtain information and assistance on a wide variety of topics.

Contact: Aging and Disability Resource Center of Eagle Country- Richland County office, 221 West Seminary Street; Richland Center, WI 53581; 608-647-4616; 877-794-2372

Statutory requirements for the structure of the aging unit

The aging unit of Richland County is fully integrated with the ADRC of Eagle Country's Richland County office which is a unit within Richland County Health and Human Services.

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

Membership of the Policy-Making Body Template

Official Name of the County Aging Unit's Policy-Making Body:

The Community and Health Services Standing Committee is the policy-making entity for aging services and an aging advisory committee is not the commission. Chapter 46.82 of the Wisconsin Statutes sets certain legal requirements for aging units.

Community and Health Services Standing Committee

Name	Age 60 and Older	Elected Official	Year First Term Began
Chairperson: Ingrid Glasbrenner		x	4-2024
Vice Chair- Marty Brewer	x	x	4-2024
Michelle Harwick		x	4-2024
Sandra Kramer	x	x	4/2024
Daniel McGuire	x	x	4/2024
Cindy Chicker	x		4-2024
Mary Miller	x	x	4-2024
Jerel Beres	x		4-2024
Francis Braithwaite	x		4-2024

Role of the Advisory Committee

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

Membership of the Advisory Committee

Listed below are the members of the Aging/ADRC Advisory committee. An aging advisory committee is required if the commission (policymaking body) does not follow the Elders Act requirements for elected officials, older adults and terms or if the commission (i.e. policy-making body) is a committee of the county board.

Chapter 46.82 of the Wisconsin Statutes requires that the membership of the aging advisory committee (where applicable) must consist of at least 50% older people, and individuals who are elected to office may not constitute 50% or more of the membership.

Official Name of the County Aging Unit’s Advisory Committee:

Aging/ADRC Advisory Committee

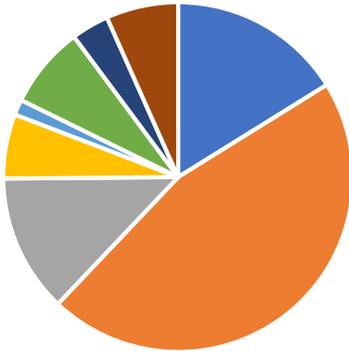
Name	Age 60 and Older	Elected Official	Start of Service
Chairperson: David Scribbins			4/2024
Linda Symons	X		4/2024
Kevin Koester	X		4/2024
Terry Berg	X		4/2024
Larry Engel	X		3/2024
Marty Brewer		X	4/2024

Budget summary

The ADRC’s aging unit is required to submit an annual budget to GWAAR using a budget worksheet approved by the Bureau of Aging and Disability Resources. The ADRC works diligently to ensure that Older American Act funds are utilized in a way that ensures services are provided in the areas of most need.

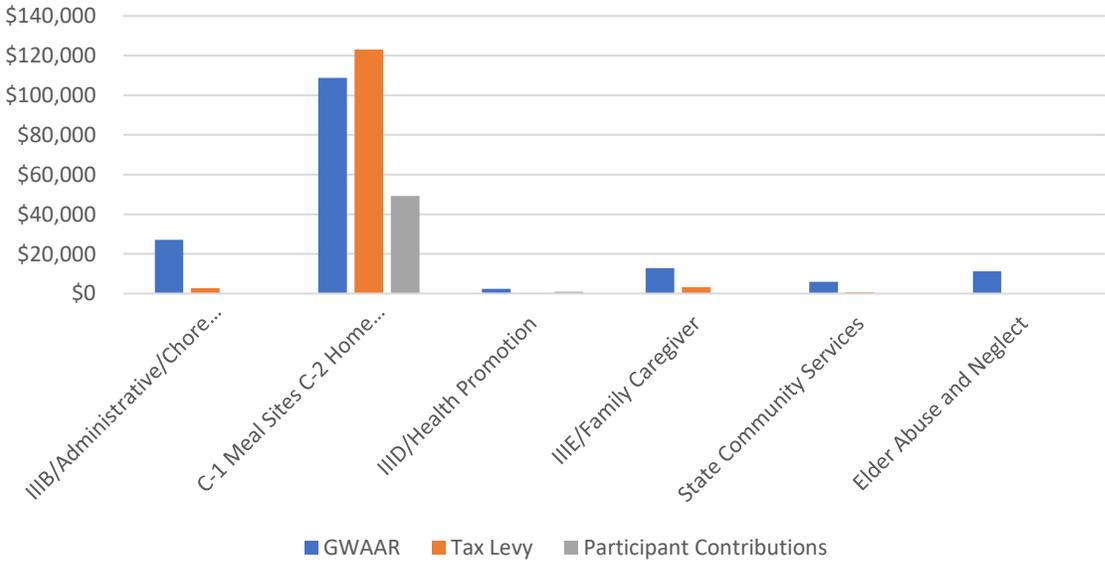
The ADRC continues to see increased needs in funding across all aging programs. Currently the nutrition program requires increased tax levy to be able to provide basic services to individuals who qualify in the county.

Older Americans Act Funding Usage



- IIIB/Program Administration and Chore Service
- C-1/Meal Sites
- C-2/Home Delivered Meals
- NSIP/Nutrition
- IIID/Health Promotion
- IIIE/National Family Caregiver
- Senior Community Services
- Elder Abuse

Program Income/Tax Levy



	Title III Federal Contract Expenses	Other Federal Contract Expenses	Cash Match Expenses	Other Federal Expenses	Other State Expenses	Other Local Expenses	Program Income Expenses	Total Cash Expenses	In-Kind Match Allocations	Grand Total
Supportive Services	\$ 24,492.00	\$ 7,000.00	\$ 3,420.00	\$ -	\$ -	\$ -	\$ -	\$ 34,912.00	\$ 4,100.00	\$ 39,012.00
Congregate Nutrition Services	\$ 66,199.00	\$ 5,224.00	\$ 61,000.00	\$ -	\$ -	\$ -	\$ 23,825.00	\$ 156,248.00	\$ 65,412.00	\$ 221,660.00
Home Delivered Nutrition Services	\$ 48,356.00	\$ 5,224.00	\$ 63,000.00	\$ -	\$ -	\$ -	\$ 23,825.00	\$ 140,405.00	\$ 27,120.00	\$ 167,525.00
Health Promotion Services	\$ 2,603.00	\$ 3,172.00	\$ 578.00	\$ -	\$ -	\$ -	\$ -	\$ 6,353.00	\$ 675.00	\$ 7,028.00
Caregiver Services - 60+	\$ 11,987.00	\$ 750.00	\$ 3,036.00	\$ -	\$ -	\$ -	\$ -	\$ 15,773.00	\$ 5,305.00	\$ 21,078.00
Caregiver Services - Underage	\$ 750.00	\$ -	\$ 188.00	\$ -	\$ -	\$ -	\$ -	\$ 938.00	\$ -	\$ 938.00
Legal Services (EBS)	\$ 100.00	\$ -	\$ 650.00	\$ -	\$ 5,843.00	\$ -	\$ -	\$ 6,593.00	\$ -	\$ 6,593.00
Alzheimer's	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Elder Abuse	\$ -	\$ -	\$ -	\$ -	\$ 11,233.00	\$ -	\$ -	\$ 11,233.00	\$ -	\$ 11,233.00
Grand Total	\$ 154,487.00	\$ 21,370.00	\$ 131,872.00	\$ -	\$ 17,076.00	\$ -	\$ 47,650.00	\$ 372,455.00	\$ 102,612.00	\$ 475,067.00

Verification of intent

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

Signed verification of intent

The person(s) authorized to sign the final plan on behalf of the Aging/ADRC Advisory Committee and the county board must sign and indicate their title. This approval must occur before the final plan is submitted to the area agency on aging for approval.

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

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

David Scribbins 9/30/24
Signature/Title of Chairperson of the Aging/ADRC Advisory Committee Date

Lucy Blasch 10/31/24
Signature/Title of Authorized Community & Health Services Representative Date

[Signature] 10/29/24
Signature/Title of the Authorized County Board Representative Date

Carole Ren 10-29-24
Signature of the County Administrator Date

Appendices

The following required appendices are being included with the 2025-2027 Richland County Three Year Aging Plan: assurance of compliance with federal and state laws and regulations, community engagement reports and public hearing reports.

A signed copy of this statement must accompany the plan. The plan must be signed by the designated authority to enter into a legally binding contract. Most often this is the county board chairperson. The assurances agreed to by this signature page must accompany the plan when submitted to the AAA and BADR.

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

Compliance with Federal and State Laws and Regulations for 2025-2027.

On behalf of Richland County, we certify

The ADRC of Eagle Country-Richland County office, Richland County Aging Unit Assurances of Compliance with Federal and State Laws and Regulations

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

The structure of AAAs in Wisconsin are as follows:

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

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

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

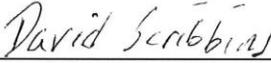
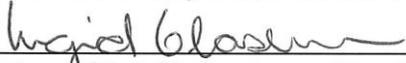
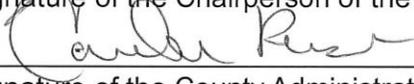
The assurances need not be included with copies of the plan distributed to the public.

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

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

On behalf of Richland County, we certify the

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

 _____ Signature of the Chairperson of the Aging/ADRC Advisory Committee/ formerly known as the Commission on Aging	9/30/24 _____ Date
 _____ Signature of the Chairperson of the Community and Health Services Standing Committee	10/31/24 _____ Date
 _____ Signature of the Chairperson of the County Board Representative	10/29/24 _____ Date
 _____ Signature of the County Administrator	10-29-24 _____ Date

Wisconsin Elders Act

If the applicant is an aging unit, the aging unit must comply with the provisions of the Wisconsin Elders Act.

Wisconsin Statutes Chapter 46.82 Aging unit.

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

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

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

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

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

1. Work to ensure that all older individuals, regardless of income, have access to information, services and opportunities available through the county or tribal aging unit and have the opportunity to contribute to the cost of services and that the services and resources of the county or tribal aging unit are designed to reach those in greatest social and economic need.
2. Plan for, receive and administer federal, state and county, city, town or village funds allocated under the state and area plan on aging to the county or tribal aging unit and any gifts, grants or payments received by the county or tribal aging unit, for the purposes for which allocated or made.
3. Provide a visible and accessible point of contact for individuals to obtain accurate and comprehensive information about public and private resources available in the community which can meet the needs of older individuals.
4. As specified under s. 46.81, provide older individuals with services of benefit specialists or appropriate referrals for assistance.
5. Organize and administer congregate programs, which shall include a nutrition program and may include one or more senior centers or adult day care or respite care programs, that enable older individuals and their families to secure a variety of services,

including nutrition, daytime care, educational or volunteer opportunities, job skills preparation and information on health promotion, consumer affairs and civic participation.

6. Work to secure a countywide or tribal transportation system that makes community programs and opportunities accessible to, and meets the basic needs of, older individuals.

7. Work to ensure that programs and services for older individuals are available to homebound, disabled and non-English speaking persons, and to racial, ethnic and religious minorities.

8. Identify and publicize gaps in services needed by older individuals and provide leadership in developing services and programs, including recruitment and training of volunteers, that address those needs.

9. Work cooperatively with other organizations to enable their services to function effectively for older individuals.

10. Actively incorporate and promote the participation of older individuals in the preparation of a county or tribal comprehensive plan for aging resources that identifies needs, goals, activities and county or tribal resources for older individuals.

11. Provide information to the public about the aging experience and about resources for and within the aging population.

12. Assist in representing needs, views and concerns of older individuals in local decision making and assist older individuals in expressing their views to elected officials and providers of services.

13. If designated under s. 46.27 (3) (b) 6., administer the long-term support community options program.

14. If the department is so requested by the county board of supervisors, administer the pilot projects for home and community –based long-term support services under s. 46.271.

15. If designated under s. 46.90 (2), administer the elder abuse reporting system under s. 46.90.

16. If designated under s. 46.87 (3) (c), administer the Alzheimer's disease family and caregiver support program under s.46.87.

17. If designated by the county or in accordance with a contract with the department, operate the specialized transportation assistance program for a county under s. 85.21.

18. Advocate on behalf of older individuals to assist in enabling them to meet their basic needs.

19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate the resource center.

20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized under s. 46.284 (1) (a) 1., apply to the department to operate a care management organization under s. 46.284 and, if the department contracts with the county under s. 46.284 (2), operate the care management organization and, if appropriate, place funds in a risk reserve.

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

(4) Commission on Aging.

(a) Appointment.

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

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

(b) Composition.

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

1. For an aging unit that is described in sub. (1) (a) 1. or 2., organized as a committee of the county board of supervisors, composed of supervisors and, beginning January 1, 1993, advised by an advisory committee, appointed by the county board. Older individuals shall constitute at least 50% of the membership of the advisory committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.

2. For an aging unit that is described in sub. (1) (a) 1. or 2., composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.

3. For an aging unit that is described in sub. (1) (a) 3., the board of directors of the private, nonprofit corporation. Older individuals shall constitute at least 50% of the membership of this commission and individuals who are elected to any office may not constitute 50% or more of the membership of this commission.

(c) Terms.

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

(c) Powers and duties.

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

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

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

(a) 1. For an aging unit that is described in sub. (1) (a) 1., except as provided in subd. 2., a county or tribal commission on aging shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors or the tribal governing body that participated in the appointment of the county or tribal commission on aging. 2. In any county that has a county executive or county administrator and that has established a single-county aging unit, the county executive or county administrator shall make the appointment, subject to the approval of and to the personnel policies and procedures established by each county board of supervisors that participated in the appointment of the county commission on aging.

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

county board of supervisors.

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

Community engagement reports

A total of nine varying community engagements were completed to gain information for the plan. Engagements varied from attending local meal sites, visiting local senior apartments, attending local senior citizen group meeting, online and paper surveys, one on one conversations and a public hearing.

Community Engagement Report: Local Senior Apartments

County: Richland	Date/s of Events or Efforts: 2/6/2024, 2/13/2024
Target audience: Individuals over 60 and caregivers	Number of participants: 16

<p>Describe the method used including partners and outreach done to solicit responses:</p> <p>Listening session held at Richland Hills, Park Apartments and Ridgeview Commons apartment buildings. Flyers given to apartment building residents. Outreach to managers of apartments for events as well.</p>
<p>Describe how the information collected was used to develop the plan:</p> <p>Feedback was used to determine what the biggest needs are in the county. Utilized information obtained in conversations with residents for the development of the plan and goals.</p>
<p>What were the key takeaways/findings from the outreach?</p> <p>Met with residents and discussed what they saw as needs to age well in Richland County. Residents were very engaged in discussions related to in home services, socialization, exercise options, home delivered meals, transportation, lack of a local grocery store and concerns about increasing expenses.</p>

Community Engagement Report: Aging/ADRC Advisory Committee Members

County: Richland	Date/s of Events or Efforts: 1/10/2024
Target audience: Aging/ADRC Advisory Committee	Number of participants: 8

Describe the method used including partners and outreach done to solicit responses:

Worked with committee to create survey for the 2025-2027 plan. Committee members discussed proposed questions. Also requested committee members to reach out to a minimum of 3 community members for input for the plan.

Describe how the information collected was used to develop the plan:

The survey that was created and the feedback received from the community directly impacted the draft goals.

What were the key takeaways/findings from the outreach?

Having newer committee members gave perspective on how well they understand our programs and their requirements. New committee members gave fresh perspectives regarding their outreach for the plan.

Community Engagement Report: Richland County Meal Sites

County: Richland	Date/s of Events or Efforts: 2/14/2024, 3/6/2024, 3/11/2024
Target audience: Individuals over 60	Number of participants: 39

Describe the method used including partners and outreach done to solicit responses:

Listening sessions held at each meal site. A separate survey was created and given to meal participants. Outreach was completed through providing surveys to meal site and HDM participants.

Describe how the information collected was used to develop the plan:

Feedback was used in the development of the plan and goals. The listening sessions also provided an opportunity to share resources and get feedback from participants.

What were the key takeaways/findings from the outreach?

Participants gave constructive feedback regarding requests for meals, quality of meals, and what is needed to increase satisfaction and meet the needs of participants. Participants discussed needing more access to home delivered meals outside of the normal delivery area.

Community Engagement Report: Richland Center Area Senior Citizens Group

County: Richland	Date/s of Events or Efforts: 2/15/2024
Target audience: Individuals over 60	Number of participants: 17

Describe the method used including partners and outreach done to solicit responses:

Focus group held at monthly meeting of Richland Area Senior Citizens group. Outreach was completed through the president of the group and by event flyers at the Senior Center and Richland Center Meal Site.

Describe how the information collected was used to develop the plan:

Robust conversations and information gained regarding needs of the county was directly used in the development of the plan and goals.

What were the key takeaways/findings from the outreach?

Met with the Senior Citizens group who were very engaged in discussions related to in home services, lack of caregivers, socialization and home delivered meals. Members were interested in learning more about local volunteer opportunities and the programs provided through the ADRC. Utilized information in the creation of proposed goals.

Community Engagement Effort: Survey

County: Richland	Date/s of Events or Efforts: 1/15/2024-4/30/2024
Target audience: Individuals over 60	Number of participants: 107

Describe the method used including partners and outreach done to solicit responses:

Survey was created and distributed in paper version, placed in the local newsletter, in the Aging office, placed online on the county website, placed online on the Regional ADRC website and on Facebook. All home delivered meal participants received a paper survey and surveys were available at each of the county's three meal sites.

Describe how the information collected was used to develop the plan:

Surveys were reviewed, compiled, and shared with Aging/ADRC Advisory Committee members and Nutrition Advisory Council members. Goals for the plan were created after reviewing the needs that were listed as the most significant.

What were the key takeaways/findings from the outreach?

Surveys indicated the same takeaways as other outreach methods. Transportation, nutrition, caregivers and socialization rose to the top as the most significant needs. There was also comments regarding growing concerns about the ability to afford to live in their own homes due to rising inflation.

Public Hearing

A public hearing was held on Wednesday, September 25, 2024 to gain input for the plan. The public hearing was advertised for two weeks in the local paper, was on the county website, Facebook, agency newsletter and was posted at the meal sites.

Public Hearing Report

Date of Hearing: 9/25/2026	County or Tribe: Richland
Location of Hearing: Community Services Building	Accessibility of Hearing: X Location was convenient, accessible & large enough X Provisions were made for hearing/visual impairments X Provisions were made for those who do not speak English X Hearings were held in several locations (at least one in each county your agency serves) X Hearing was not held with board/committee meetings
Address of Hearing: 221 West Seminary Street, Richland Center WI	
Number of Attendees: 5	
Public Notice: X Official public notification began at least 2 weeks prior? Date: <u>9/10/2024</u> X Notice must be posted in a local/online newspaper, nutrition sites and senior centers plus at least one more avenue X *Print/online newspaper _____ X *Nutrition sites X *Senior centers X Newsletter, radio, TV, social media <input type="checkbox"/> Sent to partner agencies/individuals <input type="checkbox"/> Other _____ X Notifications include X Date X Time X Location X Subject of hearing X Location and hours that the plan is available for examination Where appropriate, notice was made available in languages other than English X A copy of the notice is included with this report	

Summary of Comments:

The public hearing was called to order on September 25, 2024 at 1:00 pm. Five individuals attended the public hearing and had reviewed the draft Three Year Aging plan. Comments regarding the plan included:

- Question regarding the nutrition goals. Reviewed two goals are included. One for the C1- Congregate Meal program to work on creating a community garden and utilizing food grown to introduce more fresh produce into meals. The second goal is to increase the availability of Home Delivered Meals in the county.
- One comment inquired about the lay out of the context and gave suggestions on reformatting.
- One comment was made that the plan shows a great deal of effort was put into gaining information from community members on what they would like to see happen over the next three years. Individual stated “it is evident that community input has been integrated into the plan.”

Changes made to your plan as a result of the input received:

- Changed formatting of the executive summary portion.

**2025-2027 RICHLAND COUNTY
AGING PLAN PUBLIC HEARING**

There will be a public hearing to review the 2025-2027 Richland County Three Year Aging Plan at 1:00pm, Wednesday, September 25, 2024, in Conference Room A and B at the Richland County Community Services Building, 221 West Seminary Street, Richland Center. Individuals may also attend virtually via Zoom through the following link: <https://us06web.zoom.us/j/87511822048> Meeting JD: 875 1182 2048 Passcode: 834337 Dial by your location: 1 (309) 205-3325 US

The purpose of this public hearing is to provide an opportunity for citizens in Richland County to review, comment and provide input for the 2025-2027 Richland County Aging Plan. Citizen comments are valuable to the construction of the final document that will direct the focus of the Aging and Disability Resource Center over the next three years.

Written comments may be sent to the Aging and Disability Resource Center of Eagle Country-Richland County office, Attn: Roxanne Klubertanz-Gerber, 221 W. Seminary St., Richland Center, WI 53581 through September 18, 2024. For more information, contact Roxanne Klubertanz-Gerber at the ADRC at (608) 647-4616.

Transportation will be available if needed. Contact Linda Batten at (608) 647-4616 to setup no later than September 23, 2024.

(Pub. 09/12/24, 09/19/24) WNAXLP



2025–2027 RICHLAND COUNTY AGING PLAN PUBLIC HEARING

There will be a public hearing to review the 2025–2027 Richland County Three Year Aging Plan at 1:00 pm, Wednesday, September 25, 2024, in Conference Room A and B at the Richland County Community Services Building, 221 West Seminary Street, Richland Center. Individuals may also attend virtually via Zoom through the following link:

*<https://us06web.zoom.us/j/87511822048> **Meeting ID:** 875 1182 2048*

***Passcode:** 834337 Dial by your location: 1 (309) 205-3325 US*

The purpose of this public hearing is to provide an opportunity for citizens in Richland County to review, comment and provide input for the 2025–2027 Richland County Aging Plan. Citizen comments are valuable to the construction of the final document that will direct the focus of the Aging and Disability Resource Center over the next three years.

Written comments may be sent to the Aging and Disability Resource Center of Eagle Country–Richland County office, Attn: Roxanne Klubertanz–Gerber, 221 W. Seminary St., Richland Center, WI 53581 through September 18, 2024. For more information, contact Roxanne Klubertanz–Gerber at the ADRC at (608) 647-4616.

Transportation will be available if needed. Contact Linda Batten at (608) 647-4616 to set-up no later than September 23, 2024.

