

LONG TERM SUPPORT COMMITTEE MEETING
TUESDAY, March 3, 2015 -- 1:00 P.M.



ROCK COUNTY JOB CENTER
1900 CENTER AVENUE
JANESVILLE, WI 53546
ROOM D/E

AGENDA

1. Call to Order and Welcome Chairperson Terry Fell
2. Approval of Agenda
3. Approval of Minutes of January 6, 2015 Meeting*
4. Citizen Participation
5. Financial/Statistical Information:
 - A. Human Services
 - a. LTS Updates & Budget Status* Jennifer Thompson
 - b. CLTS Waiver Program* Julie Butz / Angela Bouton
 - B. Developmental Disabilities* John Hanewall / Joanne Jones
6. Old Business:
 - A. Elder Abuse / Adults at Risk – Update Michelle Muth
 - B. Governor's Proposed Budget Jennifer Thompson
 - C. Success Story
7. New Business
 - A. TMG Satisfaction Survey Jennifer Thompson
 - B. Elect Vice Chair Jennifer Thompson
8. Committee Member Comments
9. Future Meeting dates for 2015 –May 5, July 7, Sept. 1, and Nov. 3
10. Adjourn

* Denotes Attachment

Committee Members unable to attend, please contact Jennifer Thompson (Rock County LTS) at 741-3684

Long Term Support Update

Cases with funding 2015

Program	Total Individuals Served 2/23/15	Individuals Open 2/23/15	CBRF % as of 12/2014	Waiting List as of 2/23/15
COP Assessments	Not available	NA	NA	NA
COP Plans	Not available	NA	NA	NA
COP Services	102	102	54.9%	34
COP-W	105	105	22.1%	82*
CIP-II	257	254	34%	
NH Diversion	21	20	NA	8
CRI	8	8	NA	12
AFCSP	18	18	NA	3
BCA/Tax Levy	11	11	NA	26

- *Of the 82 people waiting for Waiver (COPW/CIPII) services, 29 people are waiting for CBRF funding.
- *Of the 82 people waiting for Waiver (COPW/CIPII) services, 15 people are currently being served by a Waiver program but need an additional service.
- Numbers above do not include an additional 34 cases currently getting screened for eligibility and an additional 10 cases waiting for State approval.

Significant Proportion report (12/31/14):

	<u>Required</u>	<u>Actual</u>
Mentally Ill	6.6%	20.6%
Physically Disabled	6.6%	30.0%
Elderly	57%	49.4%

Key:

COP= Community Options Program (100% State General Purpose Revenues)

COP-W = Community Options Program – Waiver (Medical Assistance Waiver program using State GPR to draw down Federal Revenues, unlimited slots as long as you have State or local match)

CIP-II = Community Integration Program (Medical Assistance Waiver program using State GPR to draw down Federal Revenues)

NHD = Nursing Home Diversion Program (Medical Assistance Waiver program using State GPR to draw down Federal Revenues-specifically for those in imminent risk of moving to an institution.)

CRI = Community Relocation Initiative (Medical Assistance Waiver program using State GPR to draw down Federal Revenues-specifically to move individuals out of nursing homes.)

AFCSP= Alzheimer's Family Caregiver Support Program (100% State Revenues, local annual cap of \$2,000 per person)

BCA/Tax Levy = Basic County Allocation and Tax Levy to designate services that are eligible for limited BCA and interchangeable with tax levy used for match and overmatch.

Prepared by Jennifer Thompson 2/23/15

ROCK COUNTY HUMAN SERVICES DEPARTMENT
LONG TERM SUPPORT BUDGET STATUS REPORT

01/01/14 - 12/31/14

LTS PURCHASED

Respite Care
Supportive Home Care
Housing/Energy Assistance
Adaptive Equipment
Adult Family Home
Home Delivered Meals
Protective Payments/Guardianship
Community Based Residential Facility
TOTAL LTS

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
	11	0	11
	32,945	40,140	73,085
	0	585	585
	1,209	5,112	6,321
	20,476	9,974	30,450
	3,963	3,429	7,392
	1,350	1,537	2,887
	2,162	4,291	6,453
	62,116	65,068	127,184

Alzheimers Family Caregiver Support Program

Adult Day Care
Respite Care
Supportive Home Care
Specialized Transportation
Adaptive Equipment
Outreach
Home Delivered Meals
Community Based Residential Facility
TOTAL Alzheimers Family Caregiver

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
	0	3,911	3,911
	0	5,796	5,796
	19,526	0	19,526
	0	90	90
	0	325	325
	0	2,256	2,256
	0	3,570	3,570
	0	22,265	22,265
	19,526	38,213	57,739

Community Relocation Initiative (CRI)

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care	0	4,585	4,585
Supportive Home Care	29,486	4,852	34,338
Specialized Transportation	0	905	905
Adaptive Equipment	4,681	400	5,081
Financial Management Services	0	74	74
Home Delivered Meals	8,661	3,582	12,243
Community Based Residential Facility	27,799	61,900	89,699
TOTAL CRI	70,627	76,298	146,925

Nursing Home Diversion (NHD)

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Respite Care	0	1,500	1,500
Supportive Home Care	11,633	25,405	37,038
Adaptive Equipment	3,320	1,694	5,014
Home Delivered Meals	3,076	2,316	5,392
Community Based Residential Facility	2,148	249,822	251,970
TOTAL NHD	20,177	280,737	300,914

Community Options Program (COP)

	MENTAL HEALTH	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care	2,320	0	6,545	8,865
Respite Care	1,350	0	0	1,350
Supportive Home Care	10,426	3,345	704	14,475
Housing/Energy Assistance	27,964	1,297	198	29,459
Specialized Transportation	7,378	852	1,898	10,128
PreVocational Services	11,128	0	0	11,128
Adaptive Equipment	483	123	327	933
Adult Family Home	307,612	1,023	12,726	321,361
Home Delivered Meals	2,603	231	331	3,165
Recreation/Alternative Activities	585	330	0	915
Protective Payments/Guardianship	300	413	2,360	3,073
Community Based Residential Facility	298,324	54,786	209,982	563,092
Supported Employment	2,270	0	0	2,270
TOTAL COP	672,743	62,400	235,071	970,214

COP WAIVER

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care	15,960	48,480	64,440
Respite Care	14,732	2,327	17,059
Supportive Home Care	514,364	459,865	974,229
Specialized Transportation	4,371	5,870	10,241
Pre-Vocational	13,497	0	13,497
Adaptive Equipment	56,309	45,116	101,425
Adult Family Homes	133,720	214,986	348,706
Home Delivered Meals	70,063	64,130	134,193
Community Based Residential	81,674	416,056	497,730
Counseling/Therapeutic Resources	2,675	720	3,395
Financial Management Services	222	1,036	1,258
Skilled Nursing	150	20	170
TOTAL COP WAIVER	907,737	1,258,606	2,166,343

CIP-II

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care	20,199	39,908	60,107
Respite Care	29,605	11,581	41,186
Supportive Home Care	1,014,411	971,112	1,985,523
Housing/Energy Assistance	1,132	0	1,132
Specialized Transportation	3,211	3,837	7,048
Adaptive Equipment	144,080	126,346	270,426
Adult Family Home	86,105	335,769	421,874
Home Delivered Meals	134,858	149,859	284,717
Community Based Residential Facility	470,205	1,316,623	1,786,828
Counseling/therapeutic Resource	18,766	0	18,766
Financial Management Services	2,294	1,738	4,032
Day Center Services	21,426	0	21,426
Skilled Nursing	10,868	0	10,868
TOTAL CIP-II	1,957,160	2,956,773	4,913,933

SUMMARY

	ANNUAL BUDGET	MENTAL HEALTH	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	ALL TG'S	YTD BUDGET	VARIANCE
BCA PURCHASED	141,850		62,116	65,068	127,184	141,850	14,666
TOTAL BCA TAX LEVY	141,850	0	62,116	65,068	127,184	141,850	14,666
COP							
COP CASE MANAGEMENT	923,136	672,743	62,400	235,071	970,214	923,136	(47,078)
COP PROVIDED ASSES/PLANS	71,780				62,778	71,780	9,002
COP ADMINISTRATION	77,765				71,285	77,765	6,480
COP ADMINISTRATION	74,886				74,886	74,886	0
TOTAL COP	1,147,567	672,743	62,400	235,071	1,179,163	1,147,567	(31,596)
COP-WAIVER	2,282,697		907,737	1,258,606	2,166,343	2,282,697	116,354
COP-WAIVER CASE MANAGEMENT	363,750				408,340	363,750	(44,590)
COP-WAIVER ADMINISTRATION	185,251				180,314	185,251	4,937
TOTAL COP-WAIVER	2,831,698	0	907,737	1,258,606	2,754,997	2,831,698	76,701
CIP-II	5,306,065		1,957,160	2,956,773	4,913,933	5,306,065	392,132
CIP-II CASE MANAGEMENT	887,550				973,016	887,550	(85,466)
CIP-II ADMINISTRATION	433,554				434,954	433,554	(1,400)
TOTAL CIP-II	6,627,169	0	1,957,160	2,956,773	6,321,903	6,627,169	305,266
ALZHEIMER'S	58,000	0	19,526	38,213	57,799	58,000	201
ALZHEIMER'S CASE MANAGEMENT	14,180		0		14,180	14,180	0
TOTAL CIP-II	72,180	0	0	0	0	0	0
GRAND TOTAL PURCHASED	10,820,464						

Rock County Children's Long Term Support

- We are currently serving 119 participants.
- We are in the process of opening 29 children off of the waitlist.
- There are 148 children waiting for services.
- We have developed a new survey to send out to families on the waitlist to help us determine if there are any health and safety needs of children waiting. Our goal this year is to serve those children with goods/services immediately through straight family support to alleviate any crisis/safety needs.
- We developed and will be sending out a Participant Satisfaction Survey to participants/families regarding CLTS support and service coordination and provider services.

ROCK COUNTY CHILDREN'S LONG TERM SUPPORT SERVICES

Serving children with Developmental Disabilities, Physical Disabilities, and/or Mental Health Disabilities living in Rock County

CHILD/FAMILY NEEDS SURVEY

This survey is being used as a tool to help identify current and/or future needs of the child on the CLTS waitlist. Please complete and return the survey in the envelope provided. To better serve your child, please complete this survey completely and accurately so that we can understand what needs are currently unmet. The completion of this survey does not guarantee supports/services.

Name of Child: _____ DOB: _____

Parent(s)/Caregiver: _____ Phone: (H) _____ (C) _____

Address: _____ City, State, Zip: _____

Diagnoses: _____

Do you need an interpreter? Yes or No Language: _____

Please check all that apply for your child: Private insurance Medical Assistance NONE *Katie Beckett* *Badger Care*
 SSI/SSDI *Adoption Assistance*

Does your child receive any Services listed? Please check all that apply. Home Health Medical Supplies
 Mental Health Day Services Nursing Services Occupational Therapy Physical therapy Speech & Language Therapy
 Personal Care AODA treatment Medical Equipment Autism Treatment Specialized Medical Supplies

What things does your child enjoy doing? *Include activities with other people, activities at home and activities outside of home.*

Please identify any supports that are helpful to you and/or your child:

Developmental Needs

Is your child able to communicate their basic needs? Yes or No If no, please explain _____

Is your child able to complete age appropriate tasks such as toileting, dressing, grooming, etc? Yes or No

If no, what types of activities/skills do they need assistance with? _____

Does your child require any goods/services that you do not have access to or the ability to access? Yes or No

Please Explain: _____

Behavioral Needs

How does your child's behavior impact daily life? _____

Has your child been referred to mental health services and/or receiving mental health services? If yes, please describe.

Physical Needs

Does your child have any barriers to accessing areas of your home or leaving the house? Yes or No

If yes, please explain: _____

Is your child able to bathe/toilet safely? If not, please explain _____

Are there activities your family partakes in that your child is not able to fully participate in due to their disability?

If yes, what is the activity and what is the barrier? _____

Does the care for child prohibit or minimize your ability to receive a break from care giving due to their needs? Yes or No

Please explain: _____

Have you accessed any respite services or child care other than daycare? Yes or No

If yes, what have you utilized? _____

Do any of these circumstances apply to your child:

- Substantiated abuse, neglect or exploitation of the individual in his/her current living situation
- The death of the individual's primary caregiver or the sudden inability of that caregiver/support person to provide necessary supervision or support and there is no alternative caregiver available
- The lack of appropriate residence or placement for the person due to a loss of housing
- The person has a documented terminal illness with a life expectancy of less than six months, based upon the opinion of a medical professional appropriately qualified to make such a determination
- A sudden change in the person's behavior or the discovery that the person is behaving in a manner that places self or others at substantial risk of harm
- The health and safety of the individual is in jeopardy due to the primary caregiver's physical and mental health status
- The person is at imminent risk of a more restrictive placement in an ICF-MR or nursing home or other institutional setting
- Other emergent conditions exist that place the individual at risk of harm



Please mail in the enclosed postage paid envelope by , to:
Rock County Human Services
Attention: Diana Daly
P.O. Box 1649
Janesville, WI 53547

ROCK COUNTY, WISCONSIN



Developmental Disabilities Board
P.O. Box 2133
Janesville, WI 53547-2133
(608)757-5050
Fax (608)758-8482

TO: Members of the Rock County Long Term Support Committee
FROM: John Hanewall, Director
Rock County Developmental Disabilities Board
DATE: February 23, 2015
RE: Year-End December 2014 COP Expenditures

The following are the COP expenditures and data as of December 2014:

CIP 1A/COP Match 2014 Budget	CIP 1B/COP Match 2014 Budget	COP 2014 Budget Amount
\$84,900 +	\$753,467 =	\$838,367

CIP 1A/COP Match as of December 2014: \$104,831
Number of Consumers being served in CIP 1A/COP: 3

CIP 1B/COP Match as of December 2014: \$674,274
Number of Consumers being served in CIP 1B/COP: 40

Waiting List:

Currently, there are **156** consumers on the COP waiting list. This reflects no change in the number of consumers from December 17, 2014.

Prepared by: Joanne Foss-Financial Supervisor
Rock County DD Board