

ROCK COUNTY LONG TERM SUPPORT COMMITTEE

Tuesday, September 6, 2016
Rock County Job Center, Room D/E

Call to Order and Introductions: Chairperson Fell called the meeting of the Long Term Support Committee to order at 1:05 p.m. After introductions, Chairperson Fell thanked everyone for coming.

Committee Members Present: Terry Fell, Terry Thomas, Julie Butz, Stephanie Guetschow, John Hanewall, Pat Hubbard, Mary Jane Patch, and Jennifer Thompson

Committee Members Absent: Nancy Arnold, Kim Burkhalter, Donna Cavey, Anne Weirich, and Ann Henning

Staff Members Present: Jennifer Anselmi, Jenny Dopkins and Gay McRoberts.

Others Present: Sue Prostko, Rock Haven Administrator

Approval of Agenda: Ms. Patch moved to approve the agenda, seconded by Ms. Butz. APPROVED.

Approval of Minutes: Ms. Hubbard moved to approve minutes, seconded by Ms. Patch. APPROVED.

Citizen Participation: None.

Financial/Statistical Information:

Human Services

• LTS Updates

The Long Term Support division is down to 3 case managers. As caseloads dwindle with Family Care transition continuing, staff are leaving to other positions. One more leaves Friday and another one leaves September 30th. Caseloads rose as high as 80 per staff early in the transitioning versus the normal average of 40. There are few remaining open cases, with October 13th the last day for all to enroll by the November 1st deadline. Remaining staff continue to work with providers to pay invoices that come in.

• CLTS Waiver Program Updates:

All children's services providers are now located in-house versus contracting out or having other agencies provide services. The 10 CLTS case managers should all be transitioned by the end of October. These will cover the Autism, DD, SED, and physically disabled target groups, with an average of 22-26 cases each. The report on funds separates funding for the autism group to capture whatever Lutheran Social Services spends this year, which becomes what is allocated for next year.

CLTS currently serves 153 children, with 179 on a waiting list for services. Some of these must transition to Family Care once they turn 18 if eligible for Family Care. Others may stay with CLTS until age 22. Ms. Butz reports efforts to get the Birth to Three Children's COP Committee running by November 30th, working with the Coordinated Services Team Coordinating Committee and CLTS COP Committee.

Developmental Disabilities

All DD Board clients have been enrolled by the September 13 deadline, except one. The DD Board department has also downsized. John Weber moves to a program analyst position, and another employee moves to another location in October, leaving only the clerk typist, a financial person and Mr. Hanewall. They will continue to monitor the Birth to Three program and the corporate guardianship process through 2016. At some time in 2017, there will no longer be a DD Board.

The COP funds were used differently this year due to the transition to Family Care. After numerous discussions, it was determined the COP funding for 2016 would be best used as an overmatch rather than toward specific clients' needs to best maximize revenue through the transition. For the first six months of 2016, DD Board spent \$419,183, leaving a balance of \$419,184 of the budgeted \$838,367 for the year.

Old Business:

Family Care Transition Update

To date, 882 people have enrolled, short of our State-set goal of 918. Some of those not enrolled were due to passing away, entering a nursing home or moving out of state. The State dictates the number from each target group that can be removed from waiting lists as we continue the enrollment process. In November, we are allowed to start with 43, 10 from the physically disabled (PD) target group, 13 from frail elderly (FE), and 20 from DD. After December 1st, we can enroll 10 PD, 13 FE, and 19 DD from the waiting list. Beginning in January, the figure becomes 3 – 6 per target group until June of 2019, allowing Family Care time to financially sustain itself. For LTS clients, 3 years is a long waiting time. ADRC staff are being asked to help those on the waiting list by providing options counseling on resources. In that 3 years, they may pass away, enter nursing homes or find other resources. Also, whoever is on the ADRC queue will move into this waitlist process. Once we reach the 3 year ‘titlement’ for Family Care, any new clients eligible for services will be enrolled without a waiting list.

Ms. Patch voiced concern that she has already been reassigned a new case manager and learned CCCW is merging with another organization. There’s also confusion about pharmacy bills, with a difference in coding for MA under Waiver versus Family Care. Ms. Patch wanted it known that the transition did not go as smoothly as hoped. Mr. Thomas thanked participants for communicating these issues, as he serves on a transition board for CCCW and will share comments. He also acknowledged they have merged with two other firms.

Adult Protective Services Update

LTS Division is dissolving, but Rock County still has a duty to investigate elder abuse and neglect allegations. Effective September 12th, Ms. Anselmi assumes supervision of an APS unit. This will include Ms. Muth, continuing her role; Ms. Stevenson, predominantly investigating DD adult reports; Ms. Katie Springer, returning from maternity leave to a new position of APS investigator with an emphasis on WATTS annual reviews for those protectively placed; and Ms. Jenny Dopkins, the Court Services Officer for adults at risk with no assets or means to pursue guardianship. She also works to find placement for those detained under the Chapter 51/Chapter 55 conversion. The four workers will be cross-trained to cover absences or busy periods, and will be housed at the Health Care Center building.

New Business

Rock Haven Admissions

Ms. Protko began by explaining that the nursing home is a 128 bed skilled nursing facility that is usually 98% occupied. It is not the Rock County facility in the sense that it once was, where we admitted anyone, as we no longer are licensed as ICFMR and must meet the same State regulations as those on Ch. 51/55. We once were the last resort for all State counties, but now must be able to meet the client’s needs before offering admission. There are only three nursing homes the State commission regulates, Clearview, LaCrosse, and one other. Nursing homes are more regulated than nuclear fission. Meds on as needed basis need the family or guardian approval, and clients on psychotropic meds should be followed by a psychiatrist, which is difficult to get on staff.

Transfers to the nursing home come from hospital referrals first, private homes last, and rarely from another nursing home, as the client is deemed to be in a safe environment. They must also be Rock County residents. Staff at Rock Haven are not dementia specialists. Rock Haven is approved for DD clients for specialized rehabilitation services. The average client is 80 years old. If they admitted someone with a behavioral history, they have to consider the safety of the current residents as well as needs of that client. There’s an age criteria of over 55 years old; those under that would require special programming. County ordinances prohibit smoking on the premises, so smokers aren’t admitted. Even with a background on the client’s history, bed availability can determine considering an admission.

Rock Haven is different from private nursing homes in that they can carry clients financially longer than others while the client goes through the court process for guardianship and awaits medical assistance approval. Medical Assistance reimbursement to the Home is at \$176/day for services with costs over \$300/day. They are trying to get group homes with trained staff for behaviorally challenged clients. Rock

County has CBRF facilities with trained dementia specialists, but isn't MA reimbursed for those unable to afford the care, which is costly when staff are needed for aggressive clients.

The committee again stressed a need for good communication. If Ms. Dopkins needs to find a placement, and Rock Haven appears to be an option (all requirements met and a bed available), she should be able to present the facts to Ms. Prostko. Ms. Prostko invited her to send an email on a case she has.

2015 TMG Review Results*

The TMG survey for 2015 was conducted, and was satisfactory with exception of being disallowed \$515 for a problem that couldn't be fixed. The 2016 Participant Satisfaction Survey Results are distributed showing a comparison to last year and statewide. All areas rated between a low of 1 to a high of 5 were 4.5 or above.

Adult Protective Services Funding

Funding for the APS is up by \$50,000 to \$230,000 for staff and client services. This is more funding than expected to allow us to serve the adults at risk as well as the elderly. It may be prorated for this year, but is still a good amount.

Committee Member Comments:

Ms. Thompson agreed that it was good having Ms. Prostko here. While it doesn't solve our issues, it helps to have a better understanding.

CLTS COP Committee:

Ms. Butz will have more information on the CLTS COP committee at the November meeting.

Future Meeting Date:

The next meeting date is the last one, November 1, 2016, to be held in Room K. Call Ms. Thompson at 741-3684 (or email Ms. McRoberts) if unable to attend a meeting, to ensure we have a quorum. The committee suggested keeping this date as a closure date for the committee, with munchies provided.

Adjourn:

Motion to adjourn made by Mr. Hanewall, seconded by Mr. Thomas. APPROVED. Meeting adjourned at 2:30 p.m.

Respectfully submitted,

Gay McRoberts, Administrative Assistant

NOT OFFICIAL UNTIL APPROVED BY COMMITTEE