



Serving Calumet, Outagamie and Waupaca Counties

ADRC Consortium Advisory Committee
Meeting and Planning Session Minutes
October 16, 2008

Committee Members Present: Mary Anne Gruber, Dan Witt, Mike Hopfensberger, Marilyn Mosher, John Wollner, Ken Grode, Yvonne Ebben, Vernon Beall, Frank Schubert, Ridge Putnam, Elizabeth Tautges

Others Present: Todd Romenesko, Dennis Dornfeld, Rosemary Davis, Mary Schlautman, Tom Stratton, Donna Siedschlag, Bonne Elias Planner, Nancy Leipzig, Bob Miller, Nancy Krueger, Linda Camp, Nancy Heykes

1. The meeting was called to order at 3:00pm. Roll call and introductions were done.
2. Approval of agenda – a motion was made to amend the agenda. An item was added to recommend Bob Miller’s appointment to the ADRC Advisory Committee by the Waupaca County Board. A motion was made to accept the revised agenda by Dan Witt, seconded by Marilyn Mosher, motion approved.
3. A motion to recommend Bob Miller to be appointed to the ADRC Advisory Committee was made by Frank Schubert, seconded by Vernon Beall, motion was approved.
4. Approval of September minutes – Elizabeth Tautges questioned when the meeting started. The meeting was called to order at 3:02pm (not 5:02pm as stated in minutes). Motion made to accept the revised minutes made by Marilyn Mosher, seconded by Frank Schubert, motion approved.
5. Public participation: None
6. Communications: None
7. Planning Session – Nancy Heykes introduced herself and provided some “housekeeping” items before going into the planning process (detailed notes attached).
 - a. The large group split into four smaller groups and identified “Strengths, Weaknesses, Opportunities, Threats” facing the ADRC.
 - b. The large group identified the assets / strengths of the Advisory Committee as well as weaknesses / challenges of the Committee.
 - c. The group then compared the assets of the committee against key issues.
 - d. In three small groups, the top three strategic issues facing the ADRC in the next 2-3 years were identified.
 - e. Each person listed items activities or roles that the Committee could take on to address these strategic issues. Post-it notes were assembled in an “affinity” format. Each person received three sticky dots (yellow for staff, red for Committee members) to “vote” for those items of high priority.
 - f. Feedback on the planning session was shared by each participant. The consensus was that this was a good event. Notes will be typed up and shared with all participants. Ken, John, Marilyn and Nancy will get together in a couple of weeks to determine some next steps.
8. The next meeting will be January 8, 2009.

9. Motion to adjourn was made by Ken, seconded by John. Motion passed, meeting adjourned at 6:01pm.

SWOT Analysis of ADRC Advisory Committee October 16, 2008

Strengths of Advisory Committee (internal to the committee)	Weaknesses of Advisory Committee (internal to the committee)
<p>Enthusiasm / Willingness Participation Knowledge Diversity Experience Support Open-mindedness Commitment Attitude Positive Teaching opportunities Learning Communicating Focus Prevention Collaboration (multi-county) Representation of populations served Connection to community Capacity to expand Understanding of challenges Governmental / county support and involvement (positive experiences to date) Flexibility to change Geography Cost savings (public, government) Public "front door" to Family Care Community partnerships (e.g., Willems, Goodwill, etc.) Attendance / cooperation of committee We all have a LTC story / connection Commitment to public service</p>	<p>People don't know about us (ADRC) Role as a committee and committee member is unclear (needs clarification) Communication between decision-makers (Directors) and committee What should Project Manager go to Committee with? Target needs Funding / budget cuts Identify customer Training Time commitment Delivery of service / process of service Cultural diversity Committee turnover Organization structure Don't meet often enough Geographic distances Inconsistent meeting time / place Selection process (not weak now, but need future plan)</p>

Opportunities for Advisory Committee (external to the committee)	Threats / Challenges for Advisory Committee (external to the committee)
<p>Lack of duplication of services State / economic financial challenges ("everything's on the table") Expansion to other counties as well as partners in private industry Independence (customers benefit) Contingency planning in case funding deteriorates Advertising – hot topic, everyone has a connections We are new! Enthusiasm about ADRCs by state, feds, county, and community – implications include \$\$, state asking for ADRC input throughout expansion, growth of ADRCs Need for advocacy for our populations / funding (not enough, not coordinated) We can show that regionalization can work Family Care / LTC – we can be a leader to help launch Marketing opportunities – satisfied customers, word of mouth, experts Prevention / early intervention – more attention, interest, and opportunities to partner with private sector Education We can be a model for the state Improved access Strong aging programs Medicare interest can be a door-opener Increased unemployment rate Prevention – political leaders understand benefit and \$ savings of prevention Satisfied / knowledgeable citizens take ownership Fear of aging / disability / unknown Unprepared elders (financial / other resources) Shared Values</p>	<p>Budget cuts Family Care (uncertainty, state expectations) Qualified staff and volunteers – shortage of talent Potential lack of cooperation Chronic under funding of ADRC (state allocation formula v. contract expectations) Consistent membership / commitment Quality monitoring component Training needs (state requirements, regulatory changes) Apathy among taxpayers Fear Cost-savings expectations Lack of resources Outreach Workload / over work Politics – uncertainty How important is consortium consistency among branch locations? Sensitivity – public perception, state perception Change Demand for services (job loss, Family Care, demographics) Serving a culturally diverse population Waiting lists (expectations of no waiting list) Changes in eligibility for LTC services Statewide consistency Consortium – political support among three counties (dependence) \$ of LT Care becoming entitlement</p>

Strategic Issues for the ADRC (3 – 5 years)

Group 1

1. Building the business model to address upcoming state expectations and community needs (including \$\$, # of qualified staff, space, outcomes, responsiveness, I & A acting as “generalists” or “specialists”).
2. Increase education and build advocacy to ensure continued financial support for ADRCs.
 - a. Elected officials – local, state, federal
 - b. Other departments – county, state
 - c. Grassroots – people receiving and / or in need of service
3. Increase prevention activities – partnerships with public, private, and non-profit sectors, evidence-based activities.
4. Increase community resource capacity to provide services that are and will be needed.

Group 2

1. Prepare for the implementation of Family Care including educate community, collecting and sharing information on unmet needs.
2. Building on the collaboration of the consortium – provide our structure is working, and provide for the potential of expansion to additional counties.
3. Continuation of community involvement in prevention and overall wellness.

Group 3

1. Sustain / develop collaborative partnerships with private / non-profit corporations.
2. Educate / empower individuals / families / communities to advocate for their needs so they can be in control of their environment and their independence.
3. Evaluate the quality of the ADRC to ensure consumer fulfillment in LTC – choice and opportunities.

Brainstorming of activities or roles that the Advisory Committee could take on to address some of these strategic issues arranged by affinity and “voted” upon by each participant (red = committee member, yellow = staff):

Committee Structure

Each member acts as a representative of the entire ADRC

Increase public participation at meetings

Include prevention as an agenda item for each meeting

Set up a committee structure to keep members engaged between meetings

Committee assignments such as calling 211 as Mary Anne did last meeting

Develop a marketing or outreach committee

X
X
XXX

Educate Community

Education – community and stakeholders

Educate community at large

Volunteerism

- Support / advise ADRC staff, make suggestions for improvement
- Increase volunteer base to continue prevention programs in our communities
- Promote local business to provide incentives to volunteer for employees
- Involve religion-based orgs in recruitment of volunteers for wellness programs

XXXXXXX
X
X

Educate Committee XX

- Educate each other so we can advise better
- Staff educate (nonprofessional) committee members about the procedures from start to finish of a consumer contact
- Seek information, education, and orientation of Family Care and what that Means to committee work
- Teach new ideas
- Stay informed about Family Care
- Bring in outside speakers to keep the committee informed on current issues
- Take advantage of educational opportunities on our target populations

XXX
X

Advocacy XXX

- Prioritize the issues for ADRC development for advocacy
- Support / write letters of advocacy to legislators
- Advocacy – service gaps, needs of community, needs of consumers
- Advocacy subcommittee
- Communicate to as many persons eligible for services that they do not have to Feel alone.
- Include legislative update on monthly agendas
- Community advocacy
- Advocate and lobby fed / state / local reps
- Lobby government (local, state, fed) on budget and policy
- Lobby
- Advocate for the ADRC when the opportunity arises
- Develop a legislative call list – local, state, federal

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Unmet Needs

- Provide feedback to staff re: goals, methods, problems
- Support staff creativity to enhance prevention programs
- Identify unmet service needs
- Find ways to get input from the populations we serve
- Assist with identifying unmet needs
- Annually identify and evaluate unmet needs from consumer data
- Keep statistics on target groups to see if or where we need more focus
- Monitor reports of consumer contacts
- Use committee to contact (person to person) consumers to find out satisfaction Levels of Family Care programs
- Monitor ADRC progress in meeting goals of mission statement

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XXXXXX
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Marketing 

Encourage community participation to aid ADRC meet objectives
Provide info about community needs
Help focus the marketing effort on the real customers
Do consortium "article" to print in all three county newsletters
Better market the services of the center

 



Public relations

Grassroots efforts (churches, senior groups) members advocating and educating
Community

    

Community  

Develop community "awards" program for agencies that contribute to info or
Services to target groups
Help build community relationships
Provide recommendations on collaboration efforts in prevention
Connect with business / private contacts
Teamwork from bottom to top, go by the #s
Connection to the business community
Help the staff find advocates among community partners



Quality 

Quality oversight: customer satisfaction surveys, members call centers to check
On quality
Evaluation – feedback to staff
Quality oversight
Evaluate service by getting feedback from consumers
Evaluate "customer service" – talk to people using services

      