



Milwaukee County Area Agency on Aging

2022-2024 Area Aging Plan Process Tracker

Version 1.0
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Area Aging Plan Process Tracker

Developing the process by which the Area Agency on Aging develops its required three (3) year Area Plan is an important step toward developing a plan that meets the needs and improves the lives of the more than 185,000 older adults residing in Milwaukee County. The Milwaukee County Department of Health and Human Services – Division on Aging has been designated by the State of Wisconsin as the Area Agency on Aging for Milwaukee County, as well as serving as Milwaukee County’s aging unit. This area plan will serve as the combined Aging Plan for Milwaukee County.

Overview

The Older Americans Act requires Area Agencies on Aging to develop, implement, and monitor multi-year Area Aging Plans as directed by the State Office on Aging.

The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community based systems in, or serving, each community in the planning and service area. These systems shall be designed to assist older persons in leading independent, meaningful, and dignified lives in their own homes and communities as long as possible. 45 CFR 1321.53

Area Aging Plan Process Steps

Identify Needs, Service Requests, and Responses

It is important to involve older adults and caregivers in the development of the AAA/aging unit plan. A cornerstone of the OAA is that older adults have full participation in the planning and operation of community-based services. The Milwaukee County AAA will use a variety of methods to gather input prior to writing the plan.

Outreach efforts shall place special emphasis on reaching older individuals with the greatest economic or social needs with particular attention to low income minority individuals, including outreach to identify older American Indians in the planning and service area.

Constituent Group		Population
American Indian/Native American		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Black/African American		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Hispanic/Latinx		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Southeast Asian		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Refugee - Recent Arrival		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
HCBS Long Term Care Recipient		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Low-Income		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Residents Age 85+		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Senior Programming Participant		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Aging Services Providers		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Legal Services Providers		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Educational Services Provider		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Constituent Group		Population
Older Adults 60+		[Number]
Summary		
[]		
Contact Group	Survey Method	Closing date
[Name]	[Name]	[Date]

Evaluate

Evaluate the Plan for opportunity fit. Review the Plan Survey to ensure that what is requested is within the parameters of what you are willing to provide.

Evaluation: Is project a fit for our agency?					
NAME OF PROGRAM	DESCRIPTION	Allowable?	Funding Source/s	Provided?	Requested?
Congregate Meals Gaylyn Reske					
Home Delivered Meals Gaylyn Reske					
Senior Ctr Programs Jill Knight					
Adult Day Care Jill Knight					
Volunteer Opportunities Jill Knight					
Vocational Preparation Dan Idzikowski					
Education Opportunities Dan Idzikowski					
Intergenerational Opport Rebecca Schmitt					
Health Promotion Rebecca Schmitt					
Mental Health Services ?					
Consumer Protection Dinah LaCaze					
Civic Engagement Dan Idzikowski					
Transportation Coord Dan Idzikowski/TC					

Transportation Services Dan Idzikowski					
Elder Benefit Services Dan Idzikowski					
Legal Services Dan Idzikowski					
Information & Referral Kayla Steinke					
Interagency Serv Coord Jon Janowski					
Public Aging Education Rebecca Schmitt					
Outreach Services Rebecca Schmitt					
Public Policy Advo/Train Dan Idzikowski					
Elder Abuse System Dinah LaCaze					
Long Term Support Serv Rachel Kaehny-Frank					
Alzheimer's Family Caregiver Support Jill Knight					
Nat'l Fam Caregiver Supt Jill Knight					
Dementia Care Specialist Rachael Kaehny-Frank					
In Home Support Servs Rachael Kaehny-Frank					
Short Term ServiceCoord Rachael Kaehny-Frank					
Options Counseling Rachel Kaehny-Frank					

LTC Assessment/ Screen Rachael Kaehny-Frank					
Preadmission Counseling & Nursing Hm Relocation Rachael Kaehny-Frank					
Disability Benefits Counsl Karin Bachman					
Emergency Preparedness & Response Jon Janowski					
<i>Insert Below Other Programming Ideas as Provided in Feedback from the Community</i>					
NAME OF PROGRAM	DESCRIPTION	Allow able?	Funding Source/s	Provi ded?	Other Agency

Review

[Review the responses in detail to ensure that the AAA identifies all internal parties who must assist in creating the Area Aging Plan document.]

Subject matter expert group
Aging Unit Director
Other contributing groups
[See list of Internal Staff assigned to programs]

Subject matter expert group
Milwaukee County Board Liaison
Other contributing groups
[Milwaukee County Board] – Must Vote on Plan Approval Prior to Final Submission to State

Subject matter expert group
Commission on Aging Chair
Other contributing groups
Commission on Aging – Must Vote on Plan Approval Prior to Submission to County Board

Subject matter expert group
Aging Advisory Council Chair
Other contributing groups
Aging Advisory Council – Must advise the AAA on development of the plan, hold hearings and solicit feedback, and vote on the Plan prior to submission to the Commission on Aging

Subject matter expert group
Nutrition Council, Wellness and Service Delivery Committees
Other contributing groups
Provide feedback on current programming and input on service delivery improvements.

Aging Plan Development

[Assign roles and responsibilities for appropriate sections of the Plan. Assign a Plan response project manager to oversee the assignment process and to coordinate steps moving forward.]

Project manager		
Daniel Idzikowski		
Executive Summary		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Organization and Structure of AAA & Staff		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Membership of the County Board, Commission on Aging, and Aging Advisory Council		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Affirmative Action Plan		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Context: Population Demographics		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Context: Aging Network & Current Services		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Public Input: Community Survey		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Public Input: Public Hearings		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Public Input: Commission Consultation		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Public Input: Inter-Agency / Vendor Consultation		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Public Input: Mailing, Website, List Generation, Virtual Access, Compilation & Information Technology		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer

		requirements.]
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Goals for the Plan Period: Advocacy Related Activities		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Elder Nutrition Program		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Services in Support of Caregivers		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Services to People with Dementia		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Elder Justice		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Senior Centers		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Transportation		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Other Local Priorities		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Other Local Priorities		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Goals for the Plan Period: Special Projects		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Coordination with the ADRC & Indian Tribes		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Budget – General & Summary, Expenditure Categories, Transfer Requests & Match Requirements		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Budget by Title: IIIB, IIIC-1, IIIC-2, IIID, IIIE, AFCSP, EBS, Elder Abuse, SCSP, Other		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Compliance with Laws and Regulations / Required Assurances		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Draft, Revision & Appendices		
Name	Role	Responsibilities
[Name]	[Technical lead]	[Manage technical staff to ensure that all components satisfy customer requirements.]

Timeline



Develop an Area Aging Plan for 2022-24 to provide comprehensive coordinated services to older adult



Four Components for a Successful Area Aging Plan

Public Input by Older Adult Residents & Aging Advisory Council



Population Research & Data Analysis



SMART Goals & Components of Wellness



Community Approval & Presentation



Due Date (all components): December 10, 2021



Complete by <i>Each BOLD word represents a page in your Research Report and Board.</i>		
<input type="checkbox"/>	February 10th	Meet with Advisory Council, Review Framework, Assign Lead Consultation Roles, Identify Outreach Groups
<input type="checkbox"/>	March 10th	Finalize Aging Community Needs Survey Instrument
<input type="checkbox"/>	April 10th	Disseminate Community Needs Survey to constituent groups
<input type="checkbox"/>	May 10th	Present Initial Draft of Data & Structural elements of Plan to Aging Advisory Council
<input type="checkbox"/>	June 10th	Analyze Feedback, Review Wellness Components, Draft Initial Goals & Present to Aging Advisory Council
<input type="checkbox"/>	August 10th	Present Initial Draft to Commission on Aging & Conduct Public Hearings on Draft Aging Plan
<input type="checkbox"/>	September 10th	Draft all necessary Budget & Expenditure Sections, Submit Plan to DHS for Review
<input type="checkbox"/>	October 10th	Revise & Submit Final Draft Plan to Aging Advisory Council
<input type="checkbox"/>	November 10th	Submit Final Revised Plan to the Commission on Aging and the County Board
<input type="checkbox"/>	December 10th	Submit Final Approved Plan to Wisconsin DHS – Office on Aging

Respond

[During the survey period, respond to any issues on which the public requests clarification. Be sure to answer all questions posed.]

Questions from the prospect	Subject matter expert (SME) assigned to answer	SME answer (to be incorporated into the next response)
	[Name]	

[Keep track of all meetings that are held to review and discuss the Feedback. Provide the public with any responses or presentations that they require.]

Meeting date	Meeting time	Meeting attendees
[Date]	[Time]	[Names]
Meeting location/Modality	Number of copies of Plan required	Presenters
[Location]	[7]	[Names]

[Develop Goals and Hold Hearings on Draft Aging Plan.]

Hearing Dates	Plan Goal Feedback	Revisions Necessary

[Develop Budget in Concert with Plan Goals & Statutory Requirements.]

Draft Budgets	Budget Feedback	Revisions Necessary

Agree

[Draft the Final Plan and Submit for Approval]

Final Plan Approval	Responsible	
	[Name]	[Names]
	Signatures needed on Area Plan	Date Obtained
	[Names]	