

## NOTICE OF MEETING

### SHEBOYGAN COUNTY HEALTH & HUMAN SERVICES COMMITTEE

**October 5, 2021 – 8:30 AM**

Administration Building – Room 302  
508 New York Avenue  
Sheboygan, WI 53081

Remote Access:

(312)-626-6799

Meeting ID: 880 9228 0452

Passcode: 093923

<https://us06web.zoom.us/j/88092280452?pwd=MzJlRy9hLzVpSHhNTFVMQ2Fla01wZz09>

### AGENDA

Call to Order and Introductions

Certification of Compliance with Open Meeting Law

Approval of Minutes: Health and Human Services Committee Meeting – September 21, 2021

Announcements and Correspondence

Public Comment: Public may speak up to three minutes each on topics relevant to the agenda.

Health and Human Services Director Report — Matt Strittmater

Public Health Manager — Starr Grossman  
Covid Update

Assistant Veterans Service Officer — Craig Stewart  
Quarterly Update

ADRC and Operations Manager — Michelle Acevedo  
Senior Nutrition Program Update

Accounting Manager — Tara Duwe  
Budget Adjustments

Child and Family Services Manager — Scott Shackelford  
Consideration of Vacant Position Request — Human Services Professional/Juvenile Court

Health and Human Services Director — Matt Strittmater  
Consideration of Vacant Position Request — WIC Program Supervisor

Approval of Vouchers — September 12 through September 25

Approval of Attendance at Other Meetings

Adjourn – Next scheduled meeting October 19, 2021 at 8:30 AM

Wendy Gorges  
Recording Secretary

William Goehring  
Committee Secretary

Wearing a mask will strongly be encouraged. Room 302 has a capacity limit of 21 individuals using the current CDC guidance on COVID-19 social distancing. If the room exceeds capacity, individuals may be asked to leave and participate remotely or adjourn the meeting and reschedule for another time. A majority of the members of the County Board of Supervisors, or of any of its committees, may be present at this meeting to listen, observe, and participate. If a majority of any such body is present, their presence constitutes a "meeting" under the Open Meeting Law as interpreted in *State ex rel. Badke v. Greendale Village Board*, 173 Wis. 2d 553 (1993), even though the visiting body will take no action at this meeting. Wis. Stat. § 19.84 requires that each meeting of a governmental body be preceded by a public notice setting forth the time, date, place, and subject matter of the meeting. This notice and agenda are made in fulfillment of this obligation. Electronic versions of this notice and agenda may hyperlink to documents being circulated to members in anticipation of the meeting and are accessible to the public for viewing. Additions, subtractions, or modifications of the hyperlinked materials do not constitute an amendment to the meeting agenda unless expressly set forth in an amended notice and agenda. Members of the public are encouraged to check from time to time before the meeting to see whether the hyperlinked content has been changed from what was originally posted. Persons with disabilities needing assistance to attend or participate are asked to notify the Health & Human Services Department at 920-459-4326 prior to the meeting to arrange for accommodations.

## SHEBOYGAN COUNTY HEALTH & HUMAN SERVICES COMMITTEE MINUTES

Administration Building, Room 302  
508 New York Avenue  
Sheboygan, WI

**September 21, 2021**

**Called to Order: 8:30 AM**

**Adjourned: 9:14 AM**

MEMBERS PRESENT: Supervisor Brian Hoffmann, Supervisor Curt Brauer,  
(in person) Supervisor Bill Goehring, Supervisor Marilyn Montemayor

MEMBERS PRESENT: Supervisor Vicky Schneider, Supervisor Wendy Schobert  
(via Zoom) Citizen Members: Larry Samet, Diane Oppeneer, Jeanne Kliejunas

STAFF PRESENT: Matthew Strittmater, Wendy Gorges  
(in person)

STAFF PRESENT: Jackie Moglowsky, Tim Gessler, Scott Shackelford, Tara Duwe,  
(via Zoom) Starrlene Grossman, Michelle Acevedo

Chairperson Hoffmann called the meeting to order at 8:30 AM and certified compliance with the open meeting law. The meeting notice was posted at 10:48 AM on September 17, 2021.

Supervisor Brauer moved to approve the minutes of September 7, 2021, seconded by Supervisor Goehring. Motion carried.

Public Comment: Suzanne Speltz spoke relating to COVID.

Health and Human Services Director Report — Matt Strittmater

- American Rescue Plan Act (ARPA) – Six task force groups have begun to meet.
- Staff attrition has been looked at.
- Employee Appreciation Lunch for approximately 177 HHS employees was held last week.
- HHS Budget was approved by the Finance Committee.

Public Health Manager — Starr Grossman

- Covid Update
- Consideration of Public Health Limited Term Employee Proposal  
Supervisor Brauer moved to approve the proposal, seconded by Supervisor Montemayor.  
Motion carried.

Child and Family Services Manager — Scott Shackelford

Discussion of Leave of Absence Request

Approval of Vouchers — August 29 through September 11, 2021

Supervisor Brauer moved to approve the vouchers, seconded by Supervisor Schobert.  
Motion carried.

Approval of Attendance at Other Meetings

Supervisor Hoffmann: 09/01 Finance Committee, Veterans Service Commission  
09/08 Finance Committee

Supervisor Montemayor moved to approve the attendance of the meetings for Supervisor Hoffmann, seconded by Jeanne Kliejunas. Motion carried.

Adjourn

Supervisor Brauer moved to adjourn the meeting, seconded by Supervisor Goehring. Motion carried. Meeting adjourned at 9:14 AM.

The next scheduled meeting will be held October 5, 2021 at 8:30 AM.

Wendy Gorges  
Recording Secretary

William Goehring  
Committee Secretary



WISCONSIN

# ***Sheboygan County Veterans Service Office***

**Todd A Richter**  
*Veterans Service Officer*

**Craig Stewart**  
*Assistant Veterans Service Officer*

**Jonathan Belval**  
*Veterans Benefit Specialist*

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October 5, 2021

## **Announcements/correspondence & events attended**

- July
  - Road America information table
  - Veterans Commission Meeting
  - Sheboygan Area Veterans Treatment Court
  - Kettle Moraine Correctional Institution – Meet with Incarcerated Veterans
  - Attended Marine Corps League Meeting
  - Meet with Partners for Community Development
  -
- August
  - Veterans Commission Meeting
  - Sheboygan Area Veterans Treatment Court
  - UW Green Bay, Sheboygan campus meet with Campus Executive Officer
  - Meet with Manitowoc County Veterans Service Officer
  - Meet with City of Sheboygan Mayor and Shoreline Metro Director
  - Kettle Moraine Correctional Institution – Meet with Incarcerated Veterans
  - Attended Heroes Café at Festival Foods
  - Attended VA Care Giver Support Summit
- September
  - Meet with Disabled Veterans Outreach Program Coordinator – WI Dept. of Workforce Development
  - Sheboygan County Fair information Table
  - Meet with local Audiologist Dr. Haasch
  - Attended UW Green Bay, Sheboygan Veterans Lounge Café
  - Kettle Moraine Correctional Institution – Meet with Incarcerated Veterans

## **Veterans Service Office Activity**

- April, May, June
  - Walk-ins – 113
  - Appointments – 144

## **Veterans Commission**

- 5 Applications

## **Sheboygan Area Veterans Treatment Court**

- 7 veterans currently sentenced to SAVTC
- 4 referral packets pending

SERVING THOSE WHO SERVED SINCE 1935

## Dining Center Days of Service Change Form

In accordance with the *Manual of Policies and Procedures and Technical Assistance for the Wisconsin Aging Network*, Sections **8.4**, nutrition programs will notify the Area Agency on Aging (AAA) before changing a dining center's days of service.

**Instructions:** Please complete this form with as much detail as possible and submit to your local AAA for review and approval **60 days** before the effective date of days of service change, if feasible. If days of service will change for multiple dining centers, please complete one form for each dining center.

**County/Tribal Aging Unit and/or ADRC:** ADRC of Sheboygan County

**Nutrition Director:** Linda Spitzer

**Phone Number:** 920-467-4193      **Email:** linda.spitzer@sheboygancounty.com

Please answer the following questions:

1. Name of dining center: Adell Dining site
2. Please check one:
  - Increasing day(s) and time(s) of service
  - Decreasing days(s) and time(s) of service
3. Effective date of change in days of service: 1/1/2022
4. Communities affected: Village of Adell and surrounding area
5. Reasons for the change in days of service (be specific): Total Dining Site Manager positions reduced from 3.5 Full Time to 2.5 Full Time staff and the site can no longer be staffed with a full-time Dining Site Manager. Historically, over the past 10 years the Adell Congregate Dining site has had very low participation levels when compared to the other dining sites in the county. Further, the Home-delivered Meals offered out of this site will be replaced by the Meals On Wheels program--with participants who are eligible receiving funding through the ADRC of Sheboygan County Nutrition program.
6. Day(s) and time(s) the dining center currently operates: Mondays-Fridays 11am-1pm Home-delivered Meals program and the Congregate Dining program--Congregate Dining on hold due to COVID-19, but Curbside Pickup is being offered at this time.
7. Which day(s) and time(s) will the dining center be open if this change is approved? Home-delivered Meals will be replaced by Meals on Wheels for eligible individuals on approximately 1/1/2022 depending on that agency's ability to meet the needs of participants. The Congregate Dining program will be available at the Adell Dining site two days per week--likely on Tuesdays and Thursdays from 11am-1pm as of 1/1/2022 if Sheboygan County is at a low to medium risk level for COVID-19 precautions. If at a high, very high, or extremely high risk level in Sheboygan County for COVID-19 then the Congregate Dining program will be suspended and Curbside Meal Pick Up will be offered if needed to meet the needs of the participants at that dining site.
8. Average number of participants who currently attend each day: 6

9. Are home-delivered meals packaged and/or distributed at this location?  Yes  No

If yes, how many each day (on average)? 35-40

10. How did participants at the dining center provide input related to this decision? (be specific)  
Unable to determine fully at this time since the Congregate Dining program has been suspended since March 2020 due to COVID-19 precautions, and Curbside Pickup participation is very low at the Adell Dining site--with approximately 1-6 participants per day.

11. How did the nutrition advisory council participate in this decision? (be specific and attach meeting minutes)  
Discussion at Project Council meeting and explanation provided regarding reasons for site closure. Also, discussion provided regarding some alternative options for participating in the Nutrition Program at other sites or through Meals on Wheels if eligible. Also, discussed possibility of developing a restaurant-based program in the Adell area if restaurants are interested in participating in this program with the ADRC of Sheboygan County.

12. How will the changes be communicated to eligible participants? Information will be distributed in newsletter articles and sending letters and/or flyers to current Curbside and HDMs dining participants.

13. Date approved by the board or governing body (please attach meeting minutes): \_\_\_\_\_

If day(s) and time(s) of service are being **decreased**, please answer the following questions before signing the form and submitting to the AAA:

1. Percentage of current participants at high nutrition risk:

Senior dining 20%

Home-delivered (if applicable) 20%

2. Percentage of current participants who are:

Living alone: 43%

Part of a minority racial/ethnic group: 0%

Living in rural areas: 93%

Below the Federal Poverty Level (FPL): 6%

3. Other targeted populations that may be affected (if any): n/a

4. If home-delivered meals are packaged and/or distributed at the dining center, how will the nutrition program ensure that home-delivered meal participants will continue to receive the meals they need on days the dining center is not open? Meals on Wheels will be offered 5 days per week instead of HDMs program for eligible individuals.

5. Are there other dining options in the communities affected that provide affordable meals in a social setting on days when the dining center is closed? In Plymouth at the Intergenerational Center for those who can travel.

6. How many additional miles (on average) will affected participants need to travel to get to an alternate dining center on days the dining center is closed? 10 miles
7. Explain how the nutrition program will assist current participants in getting to another dining center on days the dining center is closed. If such assistance will not be provided, describe how the nutrition program will otherwise assist in meeting their nutritional and social needs. Shoreline Metro if available, Volunteer drivers if available, or referrals to the Handy Helper program for transportation.
8. Total cost per meal at this dining center (use meal cost tool to calculate): 10.36
9. Anticipated cost savings as a result of this request:

Older Americans Act/Title III (Federal/State): \$51,162.58 approximate savings % of C-1 Budget: 8.34 %

Local: \$5,517.82 % of C-1 Budget: 8.34 %

10. If the request is approved, how will this funding be used to support the nutrition program? To provide funding for eligible participants on the Meals on Wheels program, to sustain Congregate Dining at the Adell site, and to develop a restaurant-model dining program in the Adell area if possible.
11. How was input related to this decision solicited from senior dining participants, their representatives, and/or other older adults in the community? Have participants been asked for ideas for alternatives to decreasing day(s) and time(s) of service? (be specific)  
Information was gathered through the annual senior survey, during Project Council meetings, and opportunities to provide feedback during public meetings. Participants from nearby Dining sites have already been asking the ADRC of Sheboygan County if they can attend at the Adell Dining site once it reopens if there is volunteer transportation available. Yes, feedback was received from volunteers/participants--If Seniors begin participating at the Adell Dining site in greater numbers then the days per week may be increased accordingly to meet the needs of the participants. .
12. If this request is approved, how will you solicit input from program participants about how the changes have impacted them? (quality of the food, their access to nutritious meals, etc.) Yearly nutrition surveys, Senior Surveys for the Aging Plan, participation at Committee Meetings and Public Hearings.
13. Additional comments related to this request: \_\_\_\_\_

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Nutrition Director)

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Aging Unit Director, if different)



**TO BE COMPLETED BY THE AREA AGENCY ON AGING**

Approved

Declined

Comments:

Printed Name:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Dining Center Days of Service Change Form

In accordance with the *Manual of Policies and Procedures and Technical Assistance for the Wisconsin Aging Network*, Sections **8.4**, nutrition programs will notify the Area Agency on Aging (AAA) before changing a dining center's days of service.

**Instructions:** Please complete this form with as much detail as possible and submit to your local AAA for review and approval **60 days** before the effective date of days of service change, if feasible. If days of service will change for multiple dining centers, please complete one form for each dining center.

**County/Tribal Aging Unit and/or ADRC:** ADRC of Sheboygan County

**Nutrition Director:** Linda Spitzer

**Phone Number:** 920-467-4193      **Email:** linda.spitzer@sheboygancounty.com

Please answer the following questions:

1. Name of dining center: Howards Grove Dining site
2. Please check one:  
 Increasing day(s) and time(s) of service  
 Decreasing days(s) and time(s) of service
3. Effective date of change in days of service: November 4, 2021
4. Communities affected: Howards Grove and the nearby area or towns
5. Reasons for the change in days of service (be specific): Due to closure of the Sheboygan Falls Dining site we are adding another day to the Howards Grove Dining site.
6. Day(s) and time(s) the dining center currently operates: Currently, services at this site have been suspended due to COVID-19 precautions, but was open once per week. The Howards Groce site will reopen on 11/4/21 for the Congregate Dining program two days per week-likely on Tuesdays and Thursday-if at a low-medium COVID-19 risk level. If at a high, very high or extremely high level then Curbside pickup service will be offered instead of the congregate dining option.
7. Which day(s) and time(s) will the dining center be open if this change is approved? Tuesdays and Thursdays from 11am-1pm.
8. Average number of participants who currently attend each day: 15-20
9. Are home-delivered meals packaged and/or distributed at this location?     Yes       No  
If yes, how many each day (on average)? \_\_\_\_\_
10. How did participants at the dining center provide input related to this decision? (be specific)  
Unable to determine since services have been suspended at this site since March 2020.

11. How did the nutrition advisory council participate in this decision? (be specific and attach meeting minutes)  
Discussion at Project Council meeting and explanation provided regarding reasons for increasing services at the Howards Grove site related to Sheboygan Falls site closure.
12. How will the changes be communicated to eligible participants? Information will be distributed in newsletter articles and sending flyers to current dining participants if needed.
13. Date approved by the board or governing body (please attach meeting minutes): \_\_\_\_\_

If day(s) and time(s) of service are being **decreased**, please answer the following questions before signing the form and submitting to the AAA:

1. Percentage of current participants at high nutrition risk:  
Senior dining 10%  
Home-delivered (if applicable) n/a%
2. Percentage of current participants who are:  
Living alone: 63%  
Part of a minority racial/ethnic group: 0%  
Living in rural areas: 81%  
Below the Federal Poverty Level (FPL): 6%
3. Other targeted populations that may be affected (if any): n/a
4. If home-delivered meals are packaged and/or distributed at the dining center, how will the nutrition program ensure that home-delivered meal participants will continue to receive the meals they need on days the dining center is not open? n/a
5. Are there other dining options in the communities affected that provide affordable meals in a social setting on days when the dining center is closed? yes, there are several Congregate Dining sites throughout Sheboygan County that are open on days that the Howards Grove site is closed.
6. How many additional miles (on average) will affected participants need to travel to get to an alternate dining center on days the dining center is closed? 5
7. Explain how the nutrition program will assist current participants in getting to another dining center on days the dining center is closed. If such assistance will not be provided, describe how the nutrition program will otherwise assist in meeting their nutritional and social needs. Shoreline Metro if available, Volunteer drivers if available, or referrals to the Handy Helper program for transportation.
8. Total cost per meal at this dining center (use meal cost tool to calculate): 10.36
9. Anticipated cost savings as a result of this request:

Older Americans Act/Title III (Federal/State): \$3 days less at Sheboygan Falls Dining site--\$75,243.87  
% of C-1 Budget: Total budget savings 12.3%

Local: \$3 days less at Sheboygan Falls Site--\$8,276.73 % of C-1 Budget: 12.3%

10. If the request is approved, how will this funding be used to support the nutrition program? To provide Congregate Meals at the Howards Grove dining site two days per week, and to use towards developing the restaurant-based program if local restaurants are willing to participate.
11. How was input related to this decision solicited from senior dining participants, their representatives, and/or other older adults in the community? Have participants been asked for ideas for alternatives to decreasing day(s) and time(s) of service? (be specific)  
Senior survey, annual nutrition survey, public meetings, HHS Committee Meetings, ADRC Advisory Committee meetings, and Project Council meetings. Plan was discussed and opportunities for participants to provide feedback was provided.
12. If this request is approved, how will you solicit input from program participants about how the changes have impacted them? (quality of the food, their access to nutritious meals, etc.) Yearly nutrition surveys, Senior Surveys for the Aging Plan, participation at Committee Meetings and Public Hearings.
13. Additional comments related to this request: \_\_\_\_\_

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Nutrition Director)

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Aging Unit Director, if different)

**TO BE COMPLETED BY THE AREA AGENCY ON AGING**

Approved

Declined

Comments:

Printed Name:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Dining Center Days of Service Change Form

In accordance with the *Manual of Policies and Procedures and Technical Assistance for the Wisconsin Aging Network*, Sections **8.4**, nutrition programs will notify the Area Agency on Aging (AAA) before changing a dining center's days of service.

**Instructions:** Please complete this form with as much detail as possible and submit to your local AAA for review and approval **60 days** before the effective date of days of service change, if feasible. If days of service will change for multiple dining centers, please complete one form for each dining center.

**County/Tribal Aging Unit and/or ADRC:** ADRC of Sheboygan County

**Nutrition Director:** Linda Spitzer

**Phone Number:** 920-467-4193      **Email:** linda.spitzer@sheboygancounty.com

Please answer the following questions:

1. Name of dining center: Plymouth Senior Dining Site
2. Please check one:  
 Increasing day(s) and time(s) of service  
 Decreasing days(s) and time(s) of service
3. Effective date of change in days of service: 1/1/2022
4. Communities affected: Plymouth and surrounding rural area
5. Reasons for the change in days of service (be specific): Transitioning from Congregate-based dining program to a Restaurant-based dining program in partnership with the Pick A Deli, which is a restaurant located within Generations Intergenerational Center that will allow participants more variety/food choices than the congregate model.
6. Day(s) and time(s) the dining center currently operates: Currently, the Congregate-based dining program has been suspended due to COVID-19 since March 2020, but it was open Mondays-Fridays 10:30am-1:00pm
7. Which day(s) and time(s) will the dining center be open if this change is approved? Mondays, Wednesdays, and Fridays 11am-1:00pm
8. Average number of participants who currently attend each day: \_\_\_\_\_
9. Are home-delivered meals packaged and/or distributed at this location?     Yes       No  
If yes, how many each day (on average)? \_\_\_\_\_
10. How did participants at the dining center provide input related to this decision? (be specific)  
Unable to determine since services have been suspended at this site since March 2020, but there are participatns from the Plymouth Dining site who participate in the Project Council.

11. How did the nutrition advisory council participate in this decision? (be specific and attach meeting minutes)  
Discussion at Project Council meeting and explanations regarding reasons for site changes were provided.
12. How will the changes be communicated to eligible participants? Information will be distributed in newsletter articles and sending flyers and/or letters to current dining participants if needed.
13. Date approved by the board or governing body (please attach meeting minutes): \_\_\_\_\_

If day(s) and time(s) of service are being **decreased**, please answer the following questions before signing the form and submitting to the AAA:

1. Percentage of current participants at high nutrition risk:  
Senior dining 11%  
Home-delivered (if applicable) n/a%
2. Percentage of current participants who are:  
Living alone: 44%  
Part of a minority racial/ethnic group: 0.5%  
Living in rural areas: 79%  
Below the Federal Poverty Level (FPL): 6%
3. Other targeted populations that may be affected (if any): n/a
4. If home-delivered meals are packaged and/or distributed at the dining center, how will the nutrition program ensure that home-delivered meal participants will continue to receive the meals they need on days the dining center is not open? n/a
5. Are there other dining options in the communities affected that provide affordable meals in a social setting on days when the dining center is closed? Once the Adell Dining Site reopens for congregate dining two days per week on Tuesdays and Thursdays then participants can attend at that site if they are able to travel to that site
6. How many additional miles (on average) will affected participants need to travel to get to an alternate dining center on days the dining center is closed? 10
7. Explain how the nutrition program will assist current participants in getting to another dining center on days the dining center is closed. If such assistance will not be provided, describe how the nutrition program will otherwise assist in meeting their nutritional and social needs. Shoreline Metro if available, volunteers drivers if available, or referrals to Handy Helpers program for transportation
8. Total cost per meal at this dining center (use meal cost tool to calculate): \$10.36
9. Anticipated cost savings as a result of this request:

Older Americans Act/Title III (Federal/State): \$2 days per week total program costs \$50,162.58  
% of C-1 Budget: 8.34%

Local: \$2 days per week total program costs \$5,517.82 % of C-1 Budget: 8.34%

10. If the request is approved, how will this funding be used to support the nutrition program? Funding will be used towards developing the restaurant-based program if other local restaurants are willing to participate and sustaining services at this site.

11. How was input related to this decision solicited from senior dining participants, their representatives, and/or other older adults in the community? Have participants been asked for ideas for alternatives to decreasing day(s) and time(s) of service? (be specific)  
Senior survey, annual nutrition survey, public meetings, HHS Committee Meetings, ADRC Advisory Committee meetings, and Project Council meetings. Plan was discussed and opportunities for participants to provide feedback was provided.

12. If this request is approved, how will you solicit input from program participants about how the changes have impacted them? (quality of the food, their access to nutritious meals, etc.) Yearly nutrition surveys, Senior Surveys for the Aging Plan, participation at HHS Committee Meetings and ADRC Advisory Committee Meetings, and at Public Hearings.

13. Additional comments related to this request: \_\_\_\_\_

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Nutrition Director)

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Aging Unit Director, if different)

**TO BE COMPLETED BY THE AREA AGENCY ON AGING**

Approved

Declined

Comments:

Printed Name:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Dining Center Closure Approval Form

In accordance with the *Manual of Policies and Procedures and Technical Assistance for the Wisconsin Aging Network*, Sections **8.4**, nutrition programs will notify the Area Agency on Aging (AAA) before permanently closing a dining center or temporarily closing a dining center longer than one week.

**Instructions:** Please complete this form with as much detail as possible and submit to your local AAA for review and approval **60 days** before the effective date of closure, if feasible. If multiple dining centers will be closed, please complete one form for each dining center.

County/Tribal Aging Unit and/or ADRC: ADRC of Sheboygan County

Nutrition Director: Linda Spitzer

Phone Number: 920-467-4193 Email: linda.spitzer@sheboygancounty.com

Please answer the following questions:

1. Name of dining center: Sheboygan Falls

2. Please check one:

Permanent closure

Temporary closure (longer than one week) Expected length of closure: \_\_\_\_\_

3. Date of closure: 11/1/2021

4. Communities affected: Sheboygan Falls area

5. Reasons for the closure (be specific): Total Dining Site Manager positions reduced from 3.5 Full Time to 2.5 Full Time staff and the site can no longer be staffed with a full-time Dining Site Manager. Historically, over the past 10 years the Sheboygan Falls Dining site has had very low participation levels when compared to the other dining sites in the county. Further, the site is needed to house the Economic Support Division staff in 2022.

6. Day(s) and time(s) the dining center currently operates: Mondays-Fridays 11:00-1:00pm

7. Average number of participants who currently attend each day: 6

8. Are home-delivered meals packaged and/or distributed at this location?  Yes  No

If yes, how many each day (on average)? \_\_\_\_\_

9. Percentage of current participants at high nutrition risk:

Senior dining 20%

Home-delivered (if applicable) n/a%

10. Percentage of current participants who are:

Living alone: 53%



Part of a minority racial/ethnic group: 2%

Living in rural areas: 65%

Below the Federal Poverty Level (FPL): 6%

11. Other targeted populations that may be affected by the closure (if any): n/a

12. How did participants at the dining center provide input related to this decision? (be specific)

Unable to determine. Sheboygan Falls Congregate Dining program has been on hold due to COVID-19 precautions since March 2020.

13. How did the nutrition advisory council participate in this decision? (be specific and attach meeting minutes)

Discussion at Project Council meeting and explanation provided regarding reasons for site closure. Also, discussion provided regarding some alternative options for participating in the Nutrition Program at other sites or through Meals on Wheels if eligible. Also, discussed possibility of developing a restaurant-based program in Sheboygan Falls if restaurants are interested in participating in this program with the ADRC of Sheboygan County.

14. For affected participants at high nutrition risk, explain accommodations that will be made to meet their nutritional needs. (be specific) Participants will be encouraged to attend at another dining site or through the Meals on Wheels program if eligible. Congregate Dining will start being offered at Howards Grove Dining site two days per week if the congregate dining sites are able to reopen under a low-medium COVID risk level.

15. Explain how the nutrition program will assist current participants in getting to another dining center. If such assistance will not be provided, describe how the nutrition program will otherwise assist in meeting their nutritional and social needs. Shoreline Metro if available, Volunteer drivers if available, or referrals to the Handy Helper program for transportation.

16. Programs/activities currently being held/offered at the dining center (Is there a plan for continuing to offer programs and activities in the community?): Will be offered at Howards Grove dining site two days per week, and if a restaurant-model program is developed at a restaurant in Sheboygan Falls.

17. Total cost per meal at this dining center (use meal cost tool to calculate): \$10.36

18. Funding allocated to this dining center:

Older Americans Act/Title III (Federal/State): \$125,406.45 % of C-1 Budget: 20.85%

Local: \$13,794.55 % of C-1 Budget: 20.85%

19. If the dining center closes, how will this funding be used to support the nutrition program? Funding will be needed to increase services at the Howards Grove dining site from 1 day per week to 2 days per week, and to develop a restaurant-model dining program in the Sheboygan Falls area.

20. Date approved by the board or governing body (please attach meeting minutes): \_\_\_\_\_

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Nutrition Director)

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_

(County/Tribal Aging Unit Director, if different)

**TO BE COMPLETED BY THE AREA AGENCY ON AGING**

Approved

Declined

Comments:

Printed Name:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



# Sheboygan County VACANT POSITION REQUEST

(To be completed for all vacant positions)

WISCONSIN

Date: 9/30/2021

To: Health & Human Services Committee Members

From: Scott Shackelford

**Position Request:**

Position: Human Service Professional - Juvenile Court

Reason for Vacancy: Resignation

**Justification:**

The Human Services Professional – Juvenile Court position is a mandated service under Chapter 938 of Wisconsin Statutes related to intake juvenile justice case management. The primary job duties include assessment of youth referred for delinquent acts, advocacy for services including collaboration with the courts, law enforcement, district attorney, and support services. This position provides intake services for delinquency, juvenile in need of protection and service, and truancy referrals. If the position is filled with an internal candidate, the request is to backfill the vacant position.

**Staffing Consideration:**

Department has considered all alternate options as it relates to overall staff needs? Yes  No

**Budget Consideration:**

Is this position within the Department's annual operation budget? Yes  No

If not, please state the amount over budget as well as the proposed source of funds: [Click here to enter text.](#)

**Costs:**

The annual costs associated with the position (current year's wage & benefit rates):

Wages	Benefits	Total
\$52,130-\$81,553	\$32,666	\$84,796-\$114,219

(Note: Costs for health and dental benefits should be net costs, after subtracting revenue from employee contributions.)

County Administrator/Department Head Signature  Date: 9-30-21

Human Resources Director Signature  Date: 09/30/2021

Liaison Committee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources Committee Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Form Process:**

1. County Administrator/Department Head completes VPR.
2. County Administrator/Department Head refers to Human Resources Director for approval.
3. County Administrator/Department Head presents VPR to Liaison Committee for approval/signature.
4. County Administrator/Department Head forwards VPR to HR for Human Resources Committee approval/signature (Salaried Positions Only.)
5. HR begins recruitment process.



# Sheboygan County VACANT POSITION REQUEST

(To be completed for all vacant positions)

WISCONSIN

**Date:** 9/29/2021  
**To:** Health & Human Services Committee Members  
**From:** Matt Strittmater

**Position Request:**

**Position:** WIC Program Supervisor  
**Reason for Vacancy:** Retirement

**Justification:**

Current staff member retiring on December 17, 2021. This position is essential to organizing the work of our WIC program and acting as the co-chair for our Sheboygan County Activity and Nutrition coalitions. The goal of DPH is to have someone hired by November 17th to ensure robust onboarding of a new supervisor and ensure a smooth transition for staff.

Permission is requested to backfill should this position be filled by an internal candidate.

**Staffing Consideration:**

Department has considered all alternate options as it relates to overall staff needs? Yes  No

**Budget Consideration:**

Is this position within the Department's annual operation budget? Yes  No

If not, please state the amount over budget as well as the proposed source of funds: Click here to enter text.

**Costs:**

**The annual costs associated with the position (current year's wage & benefit rates):**

Wages	Benefits	Total
62,238-95,460	33,750-38,960	95,988-134,420

(Note: Costs for health and dental benefits should be net costs, after subtracting revenue from employee contributions.)

County Administrator/Department Head Signature  Date: 9-29-21

Human Resources Director Signature  Date: 09/30/2021

Liaison Committee Signature \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources Committee Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Form Process:**

1. County Administrator/Department Head completes VPR.
2. County Administrator/Department Head refers to Human Resources Director for approval.
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