

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Governor's Task Force on Caregiving		Attending: Lisa Pugh, John Sauer, Sen. Patty Schachtner, Sen. Kathy Bernier, Rep. Deb Koste, Rep. Chuck Wichgers, Stephanie Birmingham, Beth Swedeen, Jane Mahoney, Helen Marks Dicks, Delores Sallis, Irma Perez, Elsa Diaz Bautista, Laverne Jaros, Jason Endres, William Crowley, Anne Rabin, Mo Thao-Lee, Margie Steinhoff, Jane Bushnell, Adien Igoni, Ted Behncke, Todd Costello, Michael Pochowski, Lisa Schneider, Michael Lauer, Carol Bogda, Susan Rosa, Sharon Cornell State Staff: Beth Wikler, Lynn Gall, Faith Russell, Andrew Evenson, Carrie Molke Other: Anna Lezotte, Anne Gryphan, Monical Sundal, Michael Blumenfeld, Bret Beighley, Tricia Lazare, Maria Konecla, Adien Pjoni, Kristin Litzelman, Sarah Barry
Date: 10/25/2019	Time Started: 10:00 a.m. Time Ended: 3:00 p.m.	
Location: Dane County- UW Extension School 5201 Fen Oak Drive, Suite 138		Presiding Officer: Carrie Molke, Director, DHS Bureau of Aging and Disability Resources

Minutes

**Governor's Task Force on Caregiving
Meeting Minutes
October 25, 2019
Dane County- UW Extension School
5201 Fen Oak Drive, Suite 138**

- I. **Welcome and motion to approve 9/25/19 meeting minutes**
First: Lisa Schneider
Second: Kathy Bernier
Passed unanimously
- II. **Presentation - Direct Support Workforce: Promising Practices**
(PowerPoint attached) By Barbara Kleist and Stephen Campbell
 - Request for updated completion statistics for the WisCaregivers Career Program: DHS to obtain updated figures for the Task Force.
 - Task Force members should submit follow-up questions for presenters to DHS.
- III. **Presentation - Wisconsin Family and Caregiver Support Alliance Survey Findings and Discussion** *(Dr. Kristin Litzelman)*
 - The survey contains more data than being shown.
 - Was suggested that we need to understand where caregivers are finding information. Need to do more than leave pamphlets in health care settings. Schools too.
 - It was noted that not all caregivers would go to ADRCs; Parents in need of children's services usually go to a children's long term supports program at a county, and people 18 and older to ADRCs.

- Older adults are not identifying as caregivers; just identify as being good family members, spouses. If you ask them if they need caregiver help, they don't know how to respond. Need to find way to reframe the term "caregiver" for this group.
- Question asked if there is a significant difference in the age of caregivers who are caring for children v adults. Do we have a technology problem? (shortage/access barriers)
- Important to look through an equity lens, rural vs. urban, etc.
- Are caregiver needs assessments are done in the different programs? In own experience, most programs focus on the eligibility and care of the program participant/person who needs care. There is less emphasis on what the family needs to provide in the way of support.
- For some people and communities, it is hard to trust people to come into one's house. Care recipients need consistency and the right fit in their caregiver.
- Some caregivers are losing income as they provide this care. Families can lose access to housing assistance, which is a totally separate program with a very low level of income. These people are hiring people at very low wages who also need assistance. It keeps the cycle of public dependency and low wages in place.
- It is hard to hire a good respite provider. Can't get them to accept low wage jobs because they don't want to trade public housing/health care/Foodshare benefits for a job that does not provide health insurance or a living wage.
- A public health model makes so much sense. This is a public health issue.
- Doctors need to be trained in connecting their patients to non-medical community resources outside of their health care system.

IV. Task Force on Caregiving Website

- Consider different options about how to deal with public comments. Want to have an open, easily accessible, publicized website that can support public comments that Task Force members will be able to read.
- Task Force members would like guidance from DHS about how to document correspondence and contacts from interested citizens. What are the protocols for responding to these letters/notes?

V. Workgroup Organization

- Lisa Pugh and Todd Costello will manage workgroup assignments
- Require regular participation in workgroups - half-day, twice a month
- Keep workgroup size manageable
- Allow for cross-pollination of ideas between groups

Workgroup assignments as of 10/25/19

FAMILY CAREGIVING

1. Sen. Bernier
2. Carol Bogda
3. Rep. Kolste
4. Jane Mahoney
5. Helen Marks Dicks
6. Irma Perez
7. Susan Rosa

DIRECT CARE WORKFORCE

1. Ted Behncke
2. Stephanie Birmingham
3. Jane Bushnell
4. William Crowley
5. Jason Endres
6. Adien Igoni
7. LaVerne Jaros
8. Michael Lauer
9. Michael Pochowski
10. Anne Rabin
11. Delores Sallis
12. John Sauer
13. Sen. Schachtner
14. Margie Steinhoff
15. Beth Swedeen
16. Mo Thao-Lee
17. Rep. Wichgers

CAREGIVER REGISTRY

1. Lisa Schneider
2. Other members TBD

- Concern that 17 people is too many to operate efficiently. Allow members to self-select which Direct Care Workforce sub-group/s they will participate in:
 - Recruitment and retention
 - Wages and benefits
 - Susan Rosa is interested in visiting the direct/paid workforce issues as they relate to family caregivers.
- Todd Costello reviewed a preliminary workgroup tool and discussed its possible use. He welcomes suggestions to improve it.
- Can research be done by legislative staff or the Legislative Reference Bureau (LRB)?
- Suggestion to review the last 4-6 state budgets to track investments that Wisconsin has made in caregiving services and caregiving workforce development.

- In 2006 there were 10,000 people in Family Care. Now there are 53,000. It was suggested that the Task Force look at those numbers in context of what this means for caregivers.
- Consider population changes in comparison to dollar amount increases. Population and age demographics, including the number of children in foster care, out of home placements due to methamphetamine addiction, etc. More children born into a lot of different categories and experiencing childhood traumas that require caregiving. We also have a growing aging population.
- Can't assume that government funding is the only way to fund caregiving. There are large numbers of people who aren't receiving supports from anywhere. The Task Force and workgroups can't just be a discussion of Medicaid rates.
- The Task Force needs to look at relevant data sources when making decisions about services for underserved populations.

VI. World Café - Small group exercise – See Attachment

VII. Closing remarks - The next meeting is November 18, 2019. It will include a presentation on family caregiving from AARP, explain Wisconsin's Open Meetings Law, and provide information requested during today's meeting. The hope is that workgroups can hold their first meetings in the afternoon.

VIII. Public Comments

- a. Anna Lezotte, Madison home care business and member of the Wisconsin chapter of the home care association of America: Please pay attention when doing state comparisons: Consider what the expectations are in different states. Arizona, for example, does not license home care providers, while in NY they are required to be licensed.

Co-Chair Lisa Pugh reminded members that the work being done is important and that many other people relying on the Task Force to do its best. Attendance has been wonderful so far. Thank you for coming in person!

IX. Adjourned at 3:00 p.m.

Attachment: Notes from World Café discussion