HUMAN SERVICES BOARD MEETING COUNTY OF EAU CLAIRE Eau Claire, WI 54703 NOTICE OF PUBLIC MEETING

In accordance with the provisions of Chapter 297, State of Wisconsin, Laws of 1973, notice is hereby given of the following public meeting: The Human Services Board will meet on Monday, April 24, 2017 at 5 p.m. at 721 Oxford Avenue, Room 2064, Eau Claire WI 54703. Items of business to be discussed or acted upon at this meeting are listed below:

- 1. Welcome & Call to Order by Colleen Bates, Chair
- 2. Approval of the April 24, 2017 meeting agenda Page 3
- 3. Review/Approval of March 27, 2017 Human Services Bd meeting minutes Jackie Krumenauer Pgs4-6
- 4. Public Input Page 7
- 5. Approval/Accept/Denial of February 2017 Financial Statements including Alternate Care report Vickie Gardner, Fiscal Services Manager Pgs 8-14
- 6. Director's Report Diane Cable Pgs 15-39
 - -Agency wide unit updates
 - -2018 Capital Request(s)
 - -Dept of Human Services Public Hearing/Focus group
 - -2016 Annual report
 - -Living Wage Ordinance update
- 7. Personnel Update Jackie Krumenauer Pgs 40-41
- 8. Adjourn

2017 Meetings:

a.m./p.m. by

May 22, June 26, July 24, Aug 28, Sept 18, Oct 23, Nov 27 and Dec 18

(Typically the fourth Monday of the month unless otherwise noted.)

This meeting shall be an OPEN session. Meeting notice posted this day of , 2017,

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 839-4710, (FAX) 839-1669 or 839-4735, tty: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

PUBLIC INPUT GUIDELINES

A period of public input shall be included at the regular meetings of the Human Services Board at which time the Board may receive information from the public subject to the Rules of General Application as adopted by the Board and County Resolution No. 16-17/053 as it applies to standing committees.

Rules of General Application

- 1. Time Limit The comment period would last up to 15 minutes total and up to 3 minutes per individual with the ability of the chair to extend the time limit by his or chair discretion;
- 2. Identification each speaker should identify himself or herself by name and residence, tell the Board what item or items they wish to address, and proceed to address them;
- 3. Written testimony during the public input time, any person may provide written material to the Board, provided they furnish sufficient copies so that there will be one for each Board member and one for the Department;
- 4. Subject matter the topic or topics must be directly related to the agenda of the regular meeting or shall refer to the policies adopted or proposed by the Board. Public comment is not an open forum for general discussion of values, politics, religion or philosophy. It is also not a forum for electioneering or the praise or criticism of individuals in or out of government;
- 5. Unless the topic addressed is on the agenda for that meeting, neither the Chair, any other Board member, nor any staff member should respond to public input except as follows:
 - a. To acknowledge the contribution;
 - b. To determine that the issue will or will not be placed on a future agenda for discussion or action; and,
 - c. To refer the speaker to the Department for attention to the issue;
 - d. Neither the Chair, any other Board member, any staff member should engage in discussion or exchange with the speakers except for clarification of the issue. If the Chair, any other Board member, or any staff member wishes to follow up directly with the speaker on the matter, that may be done outside of the meeting;
- 6. This "public input" agenda item does not limit the Chair or Board from inviting or permitting comment from any person on a topic then properly before the Board.

3/25/03 12/6/16 updated

Action Required

Meeting Date: April 24, 2017		Info	rmation-D	Piscussion
Agenda Item No. 2		Dire	ection to S	taff
Department: Human Services	х	App	oroval-Der	nial
Subject: Approval of the April 24, 2017		Rec	quires Rec	commendation to:
Meeting agenda			County E	Board
·		Committee on Human Resource		ee on Human Resources
		Form: Ordinance		Ordinance
		Resolution		Resolution
		Report		Report
			Other Ac	tion:

At this time, we will approve today's agenda.

Action Required

Meeting Date: April 24, 2017		Info	rmation-D	scussion
Agenda Item No. 3		Dire	ection to St	aff
Department: Human Services	х	Арр	roval-Den	al
Subject: Approval of the March 27, 2017		Rec	quires Rec	ommendation to:
Meeting minutes – Jackie Krumenauer			County B	oard
			Committe	ee on Human Resources
			Form:	Ordinance
				Resolution
				Report
			Other Act	ion:

At this time, we will approve the meeting minutes dated March 27, 2017.

MINUTES OF THE HUMAN SERVICES BOARD MEETING March 27, 2017

Room 2064 5 p.m.

PRESENT:

Colleen Bates, Dianne Robertson, Lorraine Henning

Paul Maulucci, Mark Olson, Nick Smiar, David Mortimer,

Sandra McKinney

EXCUSED:

Kim Cronk, Rick Kayser

STAFF:

Diane Cable, Tom Wirth, Vickie Gardner, Bill Stein, Jackie Krumenauer

Colleen Bates called the meeting to order at 5 p.m.

<u>Approval of the March 27, 2017 Meeting agenda</u> — Dianne Robertson made a motion to approve the agenda. Second by Lorraine Henning. The motion carried unanimously and today's agenda was approved.

Approval of the February 27, 2017 Meeting Minutes - Mark Olson made a motion to approve the meeting minutes from February 27, 2017. Second by Paul Maulucci. The motion carried unanimously and the meeting minutes dated February 27, 2017 were approved.

<u>Public Input</u> - Per Board operating procedures, a period of public input was held. A motion was made by David Mortimer to close the public input session. Second by Dianne Robertson. The motion carried unanimously.

Comprehensive Community Services (CCS) Program Update — Bill Stein, Program Supervisor, was present at the meeting to report on the enrollment status of CCS as of March 27, 2017. Currently there are 52 open CCS cases. There are 14 staff in this program. Discussion about referrals to CCS. A suggestion was made we prepare a resolution to present to the state for equity of services for people beyond MA. Discussion about waiting lists. Board requested a report either next month or May about Children's Long Term Support program numbers. There is a great need for foster homes as a result of the increase in meth cases. Diane reported the CCS Program has recently been recertified until 3/2018.

<u>Approval/Denial Personnel Requests</u> — Diane prepared and distributed the requests for three new CCS Service Facilitators, one new Mental Health Professional and two new AODA Case Managers. As the program continues to receive referrals and cases, the need for more staff grows. The positions are fully funded with federal dollars no new tax levy dollars are needed. Mark Olson made a motion to approve all six positions as presented. Second by Paul Maulucci. The motion carried unanimously and all six positions were approved. The next steps are CoHR on April 14 and County Board on April 18.

Board members raised concerns about space at DHS. Diane assured members we were working on this topic with Maintenance and IS county departments. DHS has the support of County Administration in all areas concerning space such as mobility of employees in the future, docking stations, expansion to third floor and possible future offices on first floor. The 2018 Budget may include long range space costs.

<u>Appointment of Human Services Board Representative to the Birth to Three Advisory Committee</u> – Diane is working with the Program Supervisor to see if there are ways to change the dates of the meetings so Dianne Robertson can remain as a DHS Bd rep on committee.

 Also Diane will follow up with Keith about the CSAL appt (out of county resident)

Woodland Enhanced Health Services (WEHS) Commission Alternative Representative — Colleen confirmed with Gregg Moore, County Board of Supervisors Chair that it is ok for Eau Claire County to have two representatives on WEHS. Only one vote per county. The next meeting is August 24.

Approval/Accept/Denial of January 2017 Financial Report — Vickie Gardner, Fiscal Services Manager, reviewed the financial reports. Out of home placements due to the increased use of meth in the county continue to drive the alternate care budget higher. The Board members requested education on meth and how affects are costing the county. A brief 15 min presentation program update with materials provided ahead of time could provide the Board members with a better understanding. A representative from JONAH organization could be a resource for this presentation. The Board liked the new program expenditure summary format. Nick Smiar made a motion to accept the financial reports as presented. Second by Dianne Robertson. The motion carried unanimously.

Director's Report – Diane Cable

- Agency wide unit updates including a video prepared by DHS staff in recognition of Social Work month.
- Dept. of Human Services/Children's Court Services Integration project Kick off meeting held on March 9 with the next meetings on Organizational Effectiveness meeting April 26 and 27.
- Legislative Update
 - Human Services Day at the Capitol April 5, 2017 Final details provided in Human Services Board packet.
 - O WCHSA Spring Conference May 2-5, 2017 If you are interested in attending, please let Diane know.

Personnel update by Jackie.

The meeting adjourned at 6:50 p.m.

The next regular Human Services Board meeting will be Monday, April 24, 2017 at 5 p.m. in Room 2064.

Action Required

Meeting Date: April 24, 2017	х	Info	rmation-D	iscussion
Agenda Item No. 4		Dire	ection to S	taff
Department: Human Services		App	oroval-Den	ial
Subject: Public Input		Red	quires Rec	ommendation to:
			County E	Board
		Committee on Human Resource		ee on Human Resources
			Form:	Ordinance
				Resolution
				Report
			Other Ac	tion:

At this time, we will receive input from the public.

Action Required

Meeting Date: April 24, 2017		Info	rmation-Di	scussion
Agenda Item No. 5		Dire	ection to St	aff
Department: Human Services	х	Арр	roval-Deni	al-Accept
Subject: Approval/Accept/Denial of February		Rec	quires Reco	ommendation to:
2017 Financial Statements including		, .	County B	oard
Alternate Care Report – Vickie Gardner, Fiscal			Committe	e on Human Resources
Services Manager			Form:	Ordinance
				Resolution
				Report
			Other Act	ion:

Enclosed please find the February 2017 Financial statements including the Alternate Care report.

DHS 2016 Financial Overview

Contributing factors which favorably impacted financial outcomes:

- Received \$112,000 of non-lapsing funds from 2014/2015.
- Addition of CCS Program
- Other Revenue Sources were higher than anticipated
 - Tax Intercept
 - o Prior year collections (Out of home care/Chapter 51's, etc.)
- Health Insurance Savings for 2016 Approximately \$100,000
- Personnel Higher savings than anticipated for various vacancies
- WIMCR Received \$67,000 more than budgeted for.

Contributing factors which negatively impacted financial outcomes:

- Higher level of Winnebago Clients:
 - o Number Clients and Total Expenses year over year

2015	2016	% Increase
32	54	40%
\$248,691	\$419,406	40%

- Higher level of DD (Northern) Center Clients:
 - o Number Clients and Total Expenses year over year

H	2015	2016	% Increase
	0	1	100%
H	\$0	\$132,242	100%

- Higher level of Alternate care Clients:
 - o Number of Clients & Total Expenses year over year

	2015	2016	% Increase
	224	292	23%
Ш	\$3,663,422	\$4,259,675	13%

Eau Claire County
Department of Human Services
Final Financial Statement for the Period
January 1, 2016 through December 31, 2016

Expense	YTD Net Budget	YTD Actual Transactions	Net Variance Excess (Deficient)
Overhead Personnel Services & Supplies Purchased Services BCA - (Basic County Allocation) Payback Juvenile Corrections	448,062.00 10,993,125.00 290,807.00 9,510,775.00 1,139,854.00	476,609.32 10,169,734.81 367,787.95 11,005,954.21 1,139,854.00 396,872.00	(28,547.32) 823,390.19 (76,980.95) (1,495,179.21)
Total	22,512,623.00	23,556,812.29	(1,044,189.29)
Revenue Levy Non-Lapsing Funds (2014 & 2015) State/Federal Medical Assistance Energy Assistance IDP - (Intoxicated Driver Program) Charges & Fees	YTD Net Budget 8,033,538.00 12,303,378.00 1,318,207.00 165,144.00 130,000.00 266,656.00 295,700.00	YTD Actual Transactions 8,032,738.00 112,000.00 12,871,395.90 1,404,401.16 186,704.72 93,923.75 571,593.49 660,521.45	Net Variance Excess (Deficient) (800.00) 112,000.00 568,017.90 86,194.16 21,560.72 (36,076.25) 304,937.49
Total	22,512,623.00	23,933,278.47	1,420,655.47

376,466.18

Excess (Deficiency) of Revenue over Expenditures

Eau Claire County DHS Board Meeting Held on 4/24/17

February 2017 Financial Overview

Contributing factors which could favorably impact financial outcomes:

- Anticipate the ramping up of CCS MA Revenue as we continue to add staff
- Personnel costs are lower due to various vacancies

Contributing factors which could negatively impact financial outcomes:

- Higher level of Winnebago Clients:
 - o Number Clients and Total Expenses year over year

M	2016	2017	% Increase
2	5	10	50%
E	\$29,001	\$133,839	78%

- Higher level of Northern (DD) Center Clients:
 - Number Clients and Total Expenses year over year

	2016	2017	% Increase
E	0	1	100%
	\$0	\$3,548	100%

- Higher level of Alternate care Clients:
 - o Number of Clients & Total Expenses year over year

H	2016	2017	% Increase
	116	147	21%
	\$638,574	\$847,801	24%

Eau Claire County
Department of Human Services
Financial Statement for the Period
January 1, 2017 through February 28, 2017

Expense	YTD Net Budget	YTD Actual Transactions	Net Variance Excess (Deficient)
Overhead Personnel Services & Supplies Purchased Services BCA Payback Juvenile Corrections	90,164.67 1,963,176.83 48,104.00 1,736,279.83 189,975.67 41,666.67	80,727.63 1,733,747.36 64,308.08 1,994,543.01 189,975.67 34,456.00	9,437.04 229,429.47 (16,204.08) (258,263.18) 0.00 7,210.67
Total	4,069,367.67	4,097,757.75	(28,390.08)
Revenue			
Tax Levy State/Federal State/Federal State/Federal State/Federal Amedical Assistance Energy Assistance 18,333.33 Charges & Fees Charges & Fees 64,546.83 Other Total Excess (Deficiency) of Revenue over Expanditures	1,316,256.33 2,050,758.33 507,975.83 28,216.67 18,333.33 64,546.83 83,280.33 4,069,367.67	1,316,256.33 2,185,526.18 334,857.57 32,448.97 5,350.46 39,881.01 44,320.58	0.00 134,767.84 (173,118.26) 4,232.30 (12,982.87) (24,665.82) (38,959.75) (110,726.56)
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Eau Claire County DEPARTMENT OF HUMAN SERVICES

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Eau Claire WI 54702-0840
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www.co.eau-claire.wi.us
Diane Cable, Director



ALTERNATE CARE REPORT For the Two Months Ending February 2017 4/4/2017

Level of Care	Number of New Placements <u>Feb-17</u>	Number of Clients <u>Feb-17</u>	Number of Days <u>Feb-17</u>	Number of New Placements <u>YTD</u>	Number of Clients YTD	Number of <u>Days YTD</u>	Average Cost <u>per day</u>
Foster Care	6	02	0.446				*not adjusted for revenue
	O	93	2,446	11	98	5,188	\$46
Therapeutic Foster Care	1	27	695	6	31	1,565	\$96
Group Home	1	3	53	2	5	142	\$185
Residential Care Center	3	20	438	9	22	963	\$398
Corrections:							4570
Corrections-Institution	0	4	112	0	4	230	\$186
Corrective Group Home	0	0	0	0	0	0	4
180 Day Program	0	0	0	0	0	0	
Corrections AfterCare	0	0	0	0	1	9	\$0
Corrective Sanctions	0	0	0	0	0	0	*-
Correction Res. Care Ctr.	0	0	0	0	0	0	
Corrections TFC*	0	0	0	0	0	0	
Corrections SPRITE	0	0	0	0	0	0	
TOTAL	11	147	3,744	28	161	8,097	

Level of Care	Adjusted <u>Budget</u>	YTD Expense	Percent <u>Used</u>	Revenue <u>Budget</u>	YTD <u>Revenue</u>	Percent <u>Collected</u>	Projected Annualized <u>Net Expense</u>
Foster Care	690,913	236,729	34.26%	131,849	18,210	13.81%	\$1,311,114
Therapeutic Foster Care	1,047,943	150,537	14.36%	39,426	6,452	16.36%	\$864,510
Group Home	190,166	26,251	13.80%	4,861	7,512	154.54%	\$112,434
Residential Care Center	1,357,071	383,028	28.22%	33,095	10,743	32,46%	\$2,233,710
Corrections:				-	,		4-,-00,710
Corrections-Institution	\$253,150	42,856		\$0	\$0		
Corrections AfterCare					**		
180 Day Program	\$3,150	8,400					
Corrective Group Home		-					
Corrective Sanctions		_					
Correction Res. Care Ctr.		-					
Corrections TFC*		\$0					
Corrections SPRITE		\$0					
Corrections Totals:	256,300	51,256	20.00%	-			\$307,536
TOTAL	3,542,393	847,801	23.93%	209,231	42,917	20.51%	\$4,829,304

Net Budget	Net Estimated 2017 Exp.	Year End Estimate Overspent
\$3,330,012	\$4,829,304	(\$1,499,292)

At current usage DHS estimated alternate care spending for 2016 to be: *TFC = Therapeutic Foster Care

Percentage of Yr. through 12/31/2017

16.67%

			i ii	Fall Claire County	into:			,		
			Departm YTD Prograi Thru	Department of Human Services Program Expenditures Summa Thru February 28, 2017	epartment of Human Services Program Expenditures Summary Thru February 28, 2017					
And the state of t										
		Mor	Monthly			YTD				
	Budgeted	Schape 2	Actua	_[Budgeted		Actua		Appropriate	Tag.
				% of Expenses					The state of the s	
<u>Program</u>	Expenses Targe	Targeted %	Expenses	Utilized	<u>Expenses</u> Ta	Targeted %	Expenses	expenses Utilized	Expenses	<u>%</u> Annualized
1. Community Care & Treatment of Children										
who are Abused or Neglected State	\$415,067 8.3%	TO STATE OF THE PARTY OF THE PA	\$533,895	10.7%	\$830,133 ***********************************	16.7%	\$995,864 \$395,864	20.0%	\$6,406,739	128.6%
Ķ	\$648,509	8.3%	\$916,165	11.8%	\$1,297,019	16.7%	\$1,496,975	19.2%	\$10,993,980	141.3%
	\$179,054 \$3%	8.3%	\$116,938	5.4%	\$358,108	16.7%	\$202,015	9.4%	\$1,403,255	65,3%
\$599550600000VGUSCOOOL	\$237,183	8.3%	\$199,743			16.7%	\$456,982	16.1%	\$2 396 921	Ac No
5. Alcohol & Other Drug Abuse	, t						1977年の「大学の教育を受ける」とは、「大学の教育を表現している」という。	HAMPAN AND AND AND AND AND AND AND AND AND A	Public Control State Control	27.10
Katalan Carlos	SCOTOS	% 	\$33,856	4.0%	\$142,070	16.7%	\$66,342	7.8%	\$406,273	47.7%
Harmon des et principales (1987)	\$72,161 8.3%	Street Commonweal	\$32,821	3.8% %3.50 %	\$144,322	16.7%	\$100,217	11.6%	\$393,856	45.5%
7. Financial & Economic Assistance	\$316,687	8.3%	\$257,580	6.8%	\$633,375	16.7%	3589,386	15.5%	83.090.960	2 2 %
Total	\$1,939,696	8.3%	\$2,090,999	8.0%	\$3,879,392	16.7%	\$3,907,782	16.8%	\$25,091,984	107.8%

Action Required

Meeting Date: April 24, 2017	х	Info	rmation-Di	scussion
Agenda Item No. 6			ection to St	aff
Department: Human Services	,	Арр	oroval-Deni	al-Accept
Subject: Director's Report – Diane Cable		Red	quires Reco	ommendation to:
			County Bo	pard
		Committee on Human Resources		
			Form:	Ordinance
				Resolution
				Report
			Other Act	ion:

Director's Report

- -Agency wide unit update (enclosed)
 -2018 Capital Request(s)
 -Dept of Human Services Public Hearing/Focus group
 -2016 Annual report (enclosed)
 -Living Wage ordinance update

EAU CLAIRE COUNTY HUMAN SERVICES Department Report April 2017

DIRECTOR'S REPORT - Diane Cable

Hello. April is Child Abuse Prevention Month, Administrative Professional Day, Economic Support Specialists & Case Managers week and National Volunteer week!

The Department has been assessing its space and ways to increase our effectiveness. We address our approach to our space through three values:

- The space is welcoming and meets the needs of those we serve
- The space is supportive to the needs of our staff as they provide the variety array of services
- The space is flexible to respond to our changing needs

During this past month we shifted several offices to create new spaces as we bring on new positions. We are also consulting with the company contracted by the County – Venture, regarding our space utilization.

Early in April a team from Eau Claire County attended Human Services Day at the Capitol in Madison. We met with our area legislators and/or their staff on the issues related to Human Services in the Governor's proposed budget. Our meetings and conversations went well and we were able to present the issues as it affects Eau Claire County.

BEHAVIORAL HEALTH SERVICES

Crisis Services - Nancy Shilts

During the past month Intensive Case Management, (ICM) merged with crisis services to now form the Crisis Team and enhance crisis mental health service available in Eau Claire County. This group is responsible for the following:

- Mobile response for adults and children mental health crisis during the hours of 8am and 4pm
- Provide Linkage and Follow-Up to adults and children who are not open to the Department
- Provide voluntary short term case management and stabilization
- Provide ongoing monitoring of Civil Commitments for adults and children
- Complete all necessary court reports and related activities

Adult Protective Services -Nancy Shilts

During the past month Adult Protective Services, (APS) has continued to pursue guardianships and protective placements as well as following up on 19 alleged cases of abuse and or neglect.

APS continues to collaborate with numerous community partners to identify and enhance services to ensure the safety of vulnerable adults and elderly in Eau Claire County.

Community Support Program - Nancy Shilts

During the past month the Community Support Program, CSP, continues to work effectively in the community offering emotional, social, medical, and psychological assistance for severely mentally ill

adults. They continue to provide support in a recovery oriented and community based outpatient program for Eau Claire County.

Comprehensive Community Services Program (CCS) - Bill Stein

The CCS program continues to expand both with participants and staff. We are grateful for the support and recognition of importance of the program by the County Board, as we continue to develop.

Itoloniais I I D	Enrolled/Pending	Total Referrals since program inception
83	32	175

Treatment Courts- Melissa Ives

Janet Weix was selected as the new Mental Health Court/Veterans Treatment Court Coordinator. Janet transitioned to the treatment courts from juvenile justice within DHS. Previously she worked as a social worker at the Stanley Correctional Institution and as a case manager for Community Health Partnership. She officially began her new position on April 3 and replaced Sheila Malec, who left for a new position in Minnesota.

The Veterans Treatment Court currently serves five (5) participants, is awaiting admission of a sixth and is screening two others for eligibility. That court continues to grow following its reorganization in 2015. The Treatment Alternatives and Diversion (TAD) Grant pays for services that cannot be accessed through the VA is the sole funding source in that court for veterans who do not qualify for VA health benefits.

The state Department of Justice will be hosting a second "treatment court standards" training in June for newer treatment court team members. This is important due to the number of team member (judge, coordinator, prosecutor, public defender, DOC agent, treatment provider, etc.) transitions that have occurred since the first training in 2015.

Like many programs around the state, Eau Claire County treatment court staff are examining program phase structure in light of guidance released last year by the National Drug Court Institute. This guidance recommends five (5) phases and outlines basic expectations for advancement to each phase prior to program graduation. The hope is that the new structure will produce better outcomes by ensuring more consistent and reasonable expectations for participants in each of the four (4) courts while ensuring teams address certain key elements in each phase.

Several treatment court participants are now dually enrolled in the Comprehensive Community Services (CCS) program. Formal discussions are scheduled to determine the best way for the two programs to communicate and coordinate service delivery for these participants.

FAMILY SERVICES

Programming

As a participant in the Wisconsin Trauma Project though the Department of Children and Families (DCF), the Department will be rolling out the first Trauma-Informed Parenting (TIP) Workshop in May. Department staff members are currently identifying parents, foster parents, relative caregivers and other professionals to participate in the workshop. The workshop will take place on May 4th, 11th, 18th and 23rd. The workshop will consist of a total of sixteen hours. Additional TIP Workshops will take place in the fall and winter of this year.

Personnel

CPS Initial Assessment

Tracy Hartman started on April 3, 2017. She comes to the team with a great deal of professional social work experience working within various child welfare positions.

Jenny Blaeser ended her employment with Eau Claire County on April 6, 2017. We are currently recruiting for this vacant position.

Ongoing Child Protective Services

Krystle Zakrzewski has accepted a Social Work position in Ongoing CPS with a start date of May 1st. Krystle has been working as a Social Worker at the Rutledge Home in Chippewa Falls.

Youth Services

Interviews to fill the vacant Social Worker position are currently taking place. It is hoped that a candidate will be identified and a job offer made in the next couple weeks.

Integrated Services (CLTS, B-3, Alternate Care & CST)

No personnel changes to Integrated Services. However, a contract with New Visions Treatment Foster Homes is in the beginning stages of development to assist alternate care in licensing foster homes.

Serving

CPS Initial Assessment - Tasha Alexander

Reports received during the Month of March show a slight decrease in the total overall number for the month, however an increase in the number of families screened in for Initial Assessment.

Access Reports	Screened In	Screened Out
97	34	63

Ongoing Child Protective Services-Terri Bohl

AODA struggles continue to be the main case planning component in Ongoing CPS cases.

Cases: Family/Child	Out of Home Care
93/177	71 families with a child in OHC

Youth Services-Carol Pulkrabek

The Department continues to have three (3) youth committed to the Department of Corrections: one (1) youth remains at Mendota Juvenile Treatment Center (MJTC); one (1) at Copper Lake School for Girls and the third youth was recently released from MJTC and returned home under Corrective Sanctions.

Cases: Family/Youth	Out of Home Care
116/148	39 families with a youth in OHC

Integrated Services (CLTS, B-3, Alternate Care & CST)-Kerri Swoboda

	,
Cases: CLTS & CCOP	Waitlist
128 families	20 -waitlist
	9 - waiting eligibility determination

Alternate Care (Kinship and Foster Care)

Alternate Care continues to experience challenges in meeting the number of children needing alternate placement. The budget for Kinship Care was completed which will only allow the Department to serve 93 of the 96 children needing voluntary kinship care, requiring a waitlist to be developed.

Coordinated Service Team Program

Coordinated Services Team Program is currently serving 22 teams; 46 youth. The average age of youth being served is 9.8, which has decreased. Serving a younger population has allowed additional opportunity for early intervention and diversion from court involvement in the Juvenile Justice/Youth Service and Child Protection Service systems. CST has received 25 referrals since November 2016 and ten (10) of these cases were diversions from court or CPS involvement. Of the 25 referrals noted, nine (9) are currently on the wait list to receive services.

Birth to Three Program

The Birth to Three Program continues to receive approximately 35-40 referrals per month to be evaluated for services.

FISCAL SERVICES- Vickie Gardner

The Fiscal Unit has hired one of the two vacant Fiscal Associate II positions. Chelsey Mayer began on 4/17/17 filling the Accounts Receivable role within the unit. A new candidate search began on 4/14/17 for the remaining open Accounts Payable position. Re-evaluation of duties within all fiscal positions is occurring to better align each position based on responsibilities and need.

Unit priorities include

- Completing 2016 year-end processing
- Submission of various year-end financial reports
- Training of the Fiscal Associate III on CCS billing responsibilities
- Continued preparation and approval of provider contracts
- Beginning the process of creating contract administrators and program contacts in conjunction with the preparation of provider contracts for 2018 incorporating contract outcomes/expectations. Continuing preparations for yearly audit
- Evaluating the department's Petty Cash process

We are assessing fiscally related services/processes that may occur in other areas of the department to be shifted into fiscal services.

ORGANIZATIONAL SUPPORT SERVICES-Sue Schleppenbach

We are getting closer to begin scanning of client files into Avatar. At this time, we have developed a process of document flow beginning when the document enters Human Services to when it is scanned into our electronic record system -Avatar. We are also beginning to put together data for our wall organizational chart.

It has been approximately one month since we dismantled our call handler. Calls are now being answered by the receptionist. This new process is going well and callers are happy that their calls are being answered by a live person.

ECONOMIC SUPPORT SERVICES - Linda Struck

The Economic Support Services Unit (ESU) provides a variety of financial supports and services to families and individuals. The programs include Child Care, Health Care (HC), and Food Share (FS). Eau Claire County is the Lead Agency of the Great Rivers Income Maintenance Consortium (GRC). Counties included in the Great Rivers Consortium include Burnett, Barron, Chippewa, Douglas, Dunn, Eau Claire, Polk, Pierce, St. Croix, and Washburn.

Recipient (FoodShare-HealthCare)/Household Summary (Child Care)

	Adults (HC-FS)	Children (HC-FS)	Total (HC-FS)	With FoodShare	Without FoodShare	Child Care Assistance Households
Eau Claire County	10,815	7,742	18,557	10,153	8,862	489
Great Rivers	49,442	37,965	87,407	46,020	41,387	1,812

Additional GRC Stats for March:

- 4,213 applications were processed
- 16,278 calls were received in our call center
- Average Speed of answer was 2.97 minutes
- \$4,613923 were issued in FS benefits
- \$178,519 in overpayments were established

HUMAN SERVICES DEPARTMENT

The Human Services Department as organized under Wisconsin Statute 46, provides state and federally mandated human services to the most vulnerable and needy citizens of Eau Claire County. The Human Services Department provides services from the perspective of Wellness and Recovery and Administrative:

WELLNESS & RECOVERY	ADMINISTRATIVE
Family Services –	Fiscal Services
Child Protective Services	
Juvenile Justice & Youth Services	
Children's Long Term Care Services	
Birth to 3 Services	
Coordinated Services Team (CST)	
Alternate Care Services	
Behavioral Health Services-	Organizational Support Services
Adult Protective Services	
Crisis Services	
Community Support Program	
Economic Support Services-	
Great Rivers Consortium Administrative Lead	
Fraud Recovery	
Child Care Services	

2016 Accomplishments

Our accomplishments fell primarily two areas:

New Director - New Leadership for the Department

- Enhance and strengthen internal and external relationships and partnerships
- o Development of Management /Leadership group as a Team
- Enhanced engagement with the CJCC and the Stepping Up Initiative
- County Board adopts resolution to integrate Children's Court Services Department with Human Services

Department Reorganization

- o Establish a new Organizational Model: Wellness and Recovery and Administrative Services, including the creation of the Behavioral Health Services Division
- Develop infrastructure to support delivery of mental health and substance abuse services

Alignment with Strategic Plan

Ensure Financial Stability.	Innovate and adapt.	Improve Collaboration
Improved workflows to capture available	Initiate Telecommute Policy for the Fraud	Enhanced engagement with the CJCC and
revenues	Recovery Investigators who serve the 10	partners. Work on development of data
	County Great Rivers Consortium	sharing process.
Implementation and Certification of	Re-Structure of Organizational Model to	Collaborative process to passage of
Comprehensive Community Services	encompass Behavioral Health Services	resolution for Children's Court Service
Program: Allowing for 100%	_	Department Integration with Human
reimbursement of Medicaid costs		Services Department
Establish documentation and billing of	Implementation of Services to improve	Provider Collaboration: Held
the Crisis Program Services in the	outcomes for Children, Youth and	Contract/provider meetings to review
Electronic Health Record System- Avatar	Families: Strengthening Families	contracts, services, and Living Wage
·	Program, MST – Multi Systemic	Ordinance.
	Therapy, and recipient of Trauma	
	Informed Grant from the Department of	
	Children and Families	
	Implementation of a 4-Bed Adult Mental	,
	Health Crisis Group Home	

2017 Future Opportunities

Moving into 2017 brings the initiation of several projects and the navigation of challenges to enhance our response of services to our citizens. The work in Human Services continues to grow in complexity. We continue to see a rise in referrals in child protective services, crisis services, psychiatry needs, and alternate care. Individuals with substance abuse and mental health issues have a significant need in our community. Our citizens, who we encounter, have multiple and complex needs - mental health and substance abuse and the basic needs of housing, transportation, and nutrition. Some of the individuals we serve are involved with multiple systems: criminal justice system, school systems, hospital systems, to name a few. Funding and resources to respond to the growing needs takes creativity and partnerships. It is imperative that we collaborate across systems in providing services, strengthen and enhance our operational infrastructure, and find ways to be responsive earlier as we work with children, youth, families and individuals.

As we enhance our services, through the continued development of the Comprehensive Community Services Program, we are assessing our processes and work flows to be efficient and effective. We are assessing the utilization of our agency space and to determine ways to use space and technology for providing effective services.

Initiatives for 2017:

• Organizational Effectiveness Project: Goal to become a Trauma Informed Organization through the Integration process of the Children's Court Services Department with Human Services

- Trauma Informed Project: Education and Training for Foster Parents. Evidenced Based Training for Community Mental Health Clinicians.
- Enhance internal systems: implement scanning to electronic health record system (EHR), implement 100% time reporting, develop reports from EHR to support operations
- Assess and develop work space options for Department Operations
- Enhance crisis services program.
- Review and Update Department Policies
- Establish Supervisory Lead support line for staff across the Great Rivers Consortium (GRC)
- Establish Portal to engage electronically with our Contract Providers
- Establish practice and services to reduce alternate care, hospitalizations, and improve outcomes for children, families and individuals

Performance management document for the 2016 annual report						
#1 Community Care & Treatment of Children who are	Budget	Levy FTE's				
abused or neglected including Alternate Care Licensing	\$4,375,240	\$2,789,955 24.72				

Child Protective Services (CPS) is a specialized field of the Child Welfare System. CPS intervention is warranted whenever there is a report that a child may be unsafe, abused or neglected, or be at risk of abuse or neglect. The purpose of the CPS system is to identify and alter family conditions that make children unsafe or place them at risk for abuse or neglect. This program area consists of recruitment development licensing and training of foster care kinship care child care and adult family home providers. The Dept. relies on these services to help meet the needs of children, youth and adults who require an alternate living environment.

OUTPUTS						
CPS:	2013	2014	<u>2015</u>	<u>2016</u>		
CPS Reports Received:	1331	1388	1242	1408		
CPS Reports Screened in for Investigation:	377	404	391	438		
Number of Reports Screened in the Same Day:	49	58	62	71		
Number of Child Welfare Reports Screened In:	74	80	65	71		
Number of families referred to ongoing: new data element 7/2016				72		
Foster Care Licensing:	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>		
Number of people attending monthly foster care informational meeting:	38	77	85	78		
PACE (Partners in Alternate Care Education) Training participants:	0	0	0	N/A		
PACE training graduates licensed by Eau Claire County:	0	0	0	N/A_		
Number of licensed Eau Claire County foster/respite homes:	59	70	88	112		
Number of licensed Chippewa County foster/respite homes:	40	46	47	74		
Kinship Care:	<u>2013</u>	2014	<u>2015</u>	<u>2016</u>		
Kinship Child slots allocated by the State:	96.2	92.4	101_	105		
Average # of children served monthly:	88.5	86.3	93.4	93		
Average number of children o waiting list monthly:	0	0	6	0		

Average number of Kinsh	ip provider homes:	67.3	63.6	62.9	59
Performance Goal	Outcome Measures	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
To effectively identify conditions that make children unsafe or that put children at risk of abuse or neglect.	76.2% or more children will be reunified within 0 to 12 months in accordance with the Child and Family Service Review National Standards.	76.2%	58.4%	71.2 %	66.7%
To provide services to families to ensure that children are safe and protected.	8.6% or fewer children will reenter foster care within 12 months of a prior foster care episode.	. 8.6%	18.10%	30.80	12.71%
	Children will have a median length of stay in out of home placement of 24 months or fewer in accordance with the Child and Family Service Review National Standards.	<25 months	12.75 mos.	19.6	12.9
To support parents/caregivers in making necessary changes to ensure that their children are safe and protected.	86.7% or more of all children in out of home placement for less than 12 months from the time of the latest removal will have no more than two placement settings.	86.7%	88.16%	92.13	91.10%
Foster Care Licensing: Follow state guidelines to determine that county licensed foster care homes provide safe, quality care to client.	100% of foster homes licensed by Eau Claire County DHS, requesting license renewal, completed the licensing renewal process within 45 days of their annual due date each year.	100%	90%	83%	75%
Kinship Care: Comply with state administrative code Chapter HFS 58 in the provision of kinship care.	100% of Kinship homes had a completed annual reassessment per Wisconsin Chapter HFS 58 within 30 days of renewal due date.	100%	97%	98%	98%
	ent of Adults & Children with ental Illness	Budget \$6,191,663	Levy \$1,877,122		FTE's 26.98

Case management and treatment programs serving both adults and children with a primary diagnosis of mental illness aimed at reducing symptoms and maximizing community, educational and vocational participation. Includes: CCS, CSP, CST Program, Medication Management, Crisis Mental Health, Mental Health Court, Intensive Case Management.

Services and resources provided to children and adults who cannot be maintained and treated in a community based setting. Institutonal care provided to children includes Lincoln Hills, Southeran Oaks, Winnebago MH Institute IMD) and residential care centers (RCC) Institutional care provided to adults includes TCCHCC, Mendota and Winnebago Mental Health Institutes IMDs) and local general hospitals.

OUTPUTS					
Coordinated Services Team (CST):	2013	<u>2014</u> .	<u>2015</u>	<u>2016</u>	
Number of CST	164	242	254	239	
participants:	101	2.2			
Average age of CST	12.5	12.4	11.3	12.4	
participants:				· · · · · · · · · · · · · · · · · · ·	
Community Support	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	
Program: Number of clients					
served in CSP:	143	136	144	142	
Number of CSP Inpatient psychiatric days:	299	265	273	279	
Average length of	6.5	0.46	10.5	7.34	
inpatient stay:	6.5	9.46	10.5	7.34	
Intensive Case	2013	2014	2015	2016	
Management:					
Number of clients	152	149	133	148	
served:	83	81	75	62	
Number of civil mental health commitments:					
Average length of civil mental health commitments:	5.3 mos.	7.3 mos.	6.8	7.2	
Number of crisis plans completed and entered in the mental					
health crisis system				·	
within 30 days after Chapter 51 Civil Commitment final					
hearing: Crisis Mental Health			-04-	2016	
Services:	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	
Number of phone assessments completed	278	333	1653	2079	
Number of diversions from hospitalization related to phone	124	155	1296	1632	
assessments:	134	155	1290	1032	
Number of mobile crisis assessments completed:	274	333	186	385	
Number of diversions from hospitalization related to mobile			90	177	
assessments:					
Percentage of diversions from hospitalization related to	48.2%	47.8%	78.4%	78.5%	
phone assessments:					
Percentage of diversions from hospitalizations related to					
mobile crisis	98.6%	100.0%	48.4%	54.0%	
assessments:	90.070	100.070	70.770	2016	
Comprehensive Community Services (CCS)*					
CCS Program Referrals				91	
Received:				47	
CCS Program	1	İ	1	۱ ''	

Admissions:					
CCS Program					6
Discharges:					.6
CCS Program Open					41
Cases:					41
* New program in 2016 -	Outcomes measurements being				
developed					
Mental Health Court:		2013	<u>2014</u>	<u>2015</u>	<u>2016</u>
Number of referrals			38	26	23
screened:			30	20	
Number admitted:		15	10	9	11
Number served:		21	21	22	18
Incarcerated days saved:				770	60
Medication		2013	2014	2015	2016
Management:					
Number of clients served	in program:	251	104	75	42
2-1-1 Services		<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Number of total calls to G	Freat Rivers 2-1-1 from Eau Claire				·
County			3585	4570	2458
Number of respondents w	ho participated in the automatic				
call back survey			160	204	455
Institutional Care:	•	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Number of days in Winne		20	269	397	587
Number of days in Tremp	ealeau County Health Care Center				
IMD:		1,285	2,573	2,068	2,013
		Benchm	-011	2015	<u>2016</u>
Performance Goal	Outcome Measures	ark	2014		
Coordinated Services	85% of youth served within CST	85%	94%	90%	90%
Team: Youth and	remained in their familial home				
families with serious	or placement with a relative.				
and multiple psycho-					
social issues will be					
safely maintained within					
their community					
through coordination of					
services and supports. Youth & Families with	85% of team members will	N/A	N/A	94%	100%
serious and multiple	"somewhat agree" or "strongly	11/12	T 11 7 T	5.70	
psycho-social issues will	agree" that they feel they are				
1 + -	equal partners with all team				
be safely maintained	members as reported by the				
within their community	Family Team Meting Review				
through the coordination	_				
of services and supports	survey.			I	1

	85% of families will "somewhat agree" or "strongly agree" that they developed trusting relationships with team members as reported by the Family Closure survey.	N/A	N/A	100%	100%
,	55% of youth services will show an improvement in their Level of Need score on the CANS in the following domains from initial intake to closure:				
	1. School Domain	N/A	N/A	44.4%	44.6%
	2. Behavioral/Emotional Needs Domain	N/A	N/A	55.6%	39.9%
	3. Child/Youth Risk Behaviors Domain	N/A	N/A	40.7%	40.0%
	4. Caregiver Domain	N/A	N/A	40.7%	36.0%
	CST generated at least \$30,000 in	\$27,000	\$41,520	\$127,061	N/A
	Targeted Case Management or				
	waiver revenues annually. 2016-				
	thru 3/16 No longer track				
		!			
		Benchm		2015	2016
Performance Goal	Outcome Measures	<u>ark</u>	<u>2014</u>	2015	2016
Community Support	65% of participants in the		2014 81%	2015 92%	<u>2016</u> 85%
Community Support Program: To enable	65% of participants in the Community Support Program	<u>ark</u>			
Community Support Program: To enable adults with serious	65% of participants in the Community Support Program lived independently in the	<u>ark</u>			
Community Support Program: To enable adults with serious mental illness to live	65% of participants in the Community Support Program	<u>ark</u>			
Community Support Program: To enable adults with serious mental illness to live successfully in the	65% of participants in the Community Support Program lived independently in the	<u>ark</u>			
Community Support Program: To enable adults with serious mental illness to live	65% of participants in the Community Support Program lived independently in the	<u>ark</u>			
Community Support Program: To enable adults with serious mental illness to live successfully in the	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program	<u>ark</u> 65%	81%	92%	85%
Community Support Program: To enable adults with serious mental illness to live successfully in the	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for	<u>ark</u> 65%	81%	92%	85%
Community Support Program: To enable adults with serious mental illness to live successfully in the	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the	<u>ark</u> 65%	81%	92%	85%
Community Support Program: To enable adults with serious mental illness to live successfully in the community.	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year.	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil	<u>ark</u> 65%	81%	92%	85%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case Management:	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil mental health commitments will	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case Management: Empower adults on civil	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil mental health commitments will fulfill legal orders within 6	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case Management: Empower adults on civil commitments to fulfill legal orders and ensure a support system is	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil mental health commitments will fulfill legal orders within 6 months of their Chapter 51	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case Management: Empower adults on civil commitments to fulfill legal orders and ensure a support system is established for the adult	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil mental health commitments will fulfill legal orders within 6 months of their Chapter 51	<u>ark</u> 65% 75%	81%	92%	78%
Community Support Program: To enable adults with serious mental illness to live successfully in the community. Intensive Case Management: Empower adults on civil commitments to fulfill legal orders and ensure a support system is	65% of participants in the Community Support Program lived independently in the community. 75% of participants in the Community Support Program were not hospitalized for psychiatric purposes during the year. 50% of adults on initial civil mental health commitments will fulfill legal orders within 6 months of their Chapter 51	<u>ark</u> 65% 75%	81%	92%	78%

	80% of adults on civil commitments will have a crisis plan completed and entered into the mental health crisis system within 30 days after their final hearing.	100%	100%	78%	87%
Crisis Mental Health Services: Will ensure individuals utilizing Crisis Services are able to remain safely in the community in the least restrictive setting in accordance with the guidelines set forth in DHS34.	The total number of emergency detentions is reduced to less than the previous three year average.	293	292	247	344
D11034.	50% of individuals receiving face to face mobile assessments will be diverted from hospitalization.	50.0%	47.8%	48.4%	54.0%
Mental Health Court: Reduce further involvement in the criminal justice system for treatment court participants. Provide evidence-based services that promote the success of the program and all participants	In program recidivism rate for all treatment court participants should not exceed 15% * graduates from annual cohourt only.	<15%	1%	40%	
participants	Percent of graduates receiving a new charge (resulting in criminal conviction) within 3 yrs of graduation should not exceed 25%* **includes only graduates from 3 yrs prior to yr listed	<25%	0%	0.00%	0.0%
Provide evidence-based services that promote the success of the program and all	Graduation rate should reach or exceed 60% # graduates/(#graduates+#terminations)	<60%	37.5%	35.7%	27.3%
participants	Average length of stay for all treatment court graduates should be at least 365 days	>365	660.70	716.20	621.70

	100% of participants report satisfaction with the program	100%	N/A	100%	100%
Improve social functioning of treatment court participants upon graduation	100% of participants who were unemployed at time of program entry and are able to work report an improvement in employment status at time of graduation.	100%	0%	0%	0%
	100 % of participants who had unstable housing at time of program entry report an improvement in housing at time of graduation	100%	-	-	100%
2-1-1 Services: To ensure all Eau Claire County residents are generally satisfied with the Great Rivers 2-1-1	80% of individuals participating in an automated call back survey will report overall satisfaction with the service provided.	80%	82%	92%	87%
Information and Referral Center program and satisfied with the services of the	95% of the respondents will report being treated with respect and professionalism.	95%	97%	100%	97%
information and referral specialist.	90% of respondents will report their question was answered by the information referral specialist.	90%	92%	98%	89%
	Would you recommend to friends & family?	90%	93%	97%	99%

Institutional Care: To	55% of alternate care client	55%	78%	65%	86%
provide effective	placements in Corrections and				
clinical institutional care	Residential Care Centers (RCC)				
to adults, youth, and	had a duration of placement less				
children deemed to be a	than the 2006 average (RCC=337				
danger to themselves or	days, Corrections=286 days) for			,	
others through the	the respective level of care as	-			
Chapter 51 Civil	calculated in the monthly				
Commitment process or	alternate care fiscal report.				
WI Children's (Chapter	NOTE: As long as we contract				
48) and Juvenile	w/DOJ for case management, we		İ		
(Chapter 938) Codes,	have little control over correction				
until such time they are	kids.				
deemed appropriate for					
discharge to a lesser					
restrictive setting.	75% of participants successfully discharged from an institutional facility were not readmitted within 6 months of discharge date.	75%	94%	90%	95%
Program #3: Communi	ty Care & Treatment of Children	Budget	Levy		FTE's
who are Develop	mentally Disabled (DD) or mentally Delayed	\$1,709,481	\$403,991		7.43

This program area includes case management and direct services to children who are developmentally . disabled or developmentally delayed. Services include the Birth to Three Program, the Family Support Program, and Children's Long Term Support Medical Assistance Waivers.

OUTPUTS						
Birth to Three	2013	2014	<u>2015</u>	<u>2016</u>		
Program:	268	268	255	272		
Number of Birth to Three children served:	200	200	233			
Number of Birth to Three referrals requiring eligibility	281	259	228	239		
assessment:						
Family Support	2013	<u>2014</u>	<u>2015</u>	<u>2016</u>		
Program:	1.50	105	107	NT/A		
Number of Family Support children served during the year:	152	125	127	N/A		
Number of Family Support children receiving autism	39	27	22	N/A		
services:				14/22		
Number of Family Support children receiving new personal	5	5	8	N/A		
care services:		2011	2015			
Children's Long Term Support MA Waivers (CLTS):	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>		
Number of CLTS Waiver clients served during the year:	176	169	176	298		
	Benchm					
Performance Goal Outcome Measures	ark	<u>2014</u>	<u>2015</u>	<u>2016</u>		

Birth to Three: Enable youth to receive intervention services and equipment to facilitate them functioning at their optimal level within their familial home whenever possible.	100% of all children exiting Part C received timely transition planning to support the child's transition to preschool and other appropriate community service by their third birthday including: notification to lead educational agency, if child potentially eligible for Part B, per state	100%	100%	100%	100%
-	standard. 80% of children receiving Birth to 3 services will demonstrate positive social interaction skills, improved acquisition of knowledge and skills, or show improved use of appropriate behaviors to meet their needs as a result of receiving Birth to 3 services.	80%	100%	95%	95%
Family Support Enable children and their families to receive intervention services and equipment to facilitate them functioning at their optimal level within their familial home whenever possible.	100% of children in program resided in the home of their family or legal guardian.	100%	100%	100%	N/A
Children's Long Term Support MA Waiver: Provide support and necessary services to children and the families of children with physical disabilities, developmental disabilities, autism spectrum disorders, or severe emotional disturbances (SED).	100% of children participating in program had a yearly functional eligibility review completed.	100%	95%	95%	95%

100% of all children exiting the	100%	100%	100%	100%
CLTS Waiver program were referred to the Aging and Disability Resource Center at 17 years 9 months of age, to determine eligibility for programs and funding for adult long-term support services.				·
	Dudget	Tayay		FTE's
Program #4: Residential & Community Care & Treatment of Youth Offenders	Budget \$3,531,830	Levy \$1,713,710		14.21

Mandated services for youth offenders as defined under the Juvenile Justice Code (Chapter 938). The legislative intent is to promote a juvenile justice system capable of dealing with the problem of juvenile delinquency, a system which will protect the community, impose accountability for violations of law and equip juvenile offenders with the needed competencies to live responsibly and productively in the community.

Services & resources provided to children and adults who cannot be maintained and treated in a community based setting. Institutional care provided to children includes Lincoln Hills, Southern Oaks, Winnebago MH Institute (IMD) and residential care centers (RCC). Institutional care provided to adults includes TCHCC, Mendota and Winnebago MH Institutes (IMD's) and local general hospitals.

This program area provides a continuum of services to youth and their families, ranging from informal case management interventions to commitment to the Wisconsin Department of Corrections (DOC). Social Work interventions are at the core of this work, simultaneously ensuring community safety, and accountability and rehabilitation for youth & their families. The youth served within this program area are experiencing critical bio-psycho-social developmental phases requiring individualized assessment, case planning and dispositional interventions with a variety of community based service options.

Coordinated Services Team Program is an intensive community based interventions available to youth and families experiencing delinquency episodes when more traditional case management interventions have not yielded productive outcomes.

OUTPUTS				
	2013	2014	<u>2015</u>	<u>2016</u>
Residential Care:				
Number of days in Residential Care Center:	4,363	4,520	3,154	3,595
Number of clients in Residential Care Center:	25	30	26	37
Average cost of Residential Care Center per day:	\$327	\$357	\$419	\$529
Average days in Residential Care Center placement:	175	151	121	97
Number of days in Department of Corrections (DOC):	203	811	965	1424
Number of clients in				
DOC:	5	6	6	· 8
Average days in DOC				
placement:	107	135	161	178
Average cost of DOC				
per day:	\$300	\$297	\$361	\$279

Performance Goal	Outcome Measures	Benchmark	<u>2014</u>	2015	<u>2016</u>
Youth offenders will be	75% or more youth in out of	75%	75%	75%	86.0%
maintained within their	home placement were returned to				
community through	their home within 12 months in				
coordination of services	accordance with the Child and				
and supports to ensure	Family Service Review National				
their own safety and the	Standards.				
safety of the					
community.					
	85% of youth offenders served remained in their familial home or were placed with a relative.	85%	87%	83%	75%
[] - 그 : 사용하는 💙 - 그림에 다른 사용 시민 - 그리는 그 나는 경험을 받았다.	ity Care & Treatment of Adults cohol and Other Drug Abuse	Budget	Levy		FTE's
	Problems	\$1,001,075	\$233,880		5,00

This program provides information and referral, education, prevention, assessment, early intervention and treatment services for adults, youth and families where there is a primary alcohol and other drug abuse (AODA) problem. The program consists of three areas of focus: AODA Case Management, Adult Drug,

AIM Court and the Chippewa Valley Veterans Court.

OUTPUTS				
AODA Case Management:	<u>2013</u>	2014	<u>2015</u>	<u>2016</u>
Total clients served:	35	58	60	49
Number of individuals discharged from AODA intensive case management: Number of individuals self-reporting involvement in AA,			60	49
NA or another pro-social group:			28	N/A
Adult Drug Court: Number of referrals	<u>2013</u>	2014	2015	<u>2016</u>
screened:	_	83	53	45
Number admitted:	26	28	23	14
Number served:	35	61	48	44
Incarceration days saved:	-	-	1,385	1,276
AIM Court:	2013	2014	<u>2015</u>	<u>2016</u>
Number of referrals screened:	30	24	38	26
Number admitted:	16	12	15	15
Number served:	26	37	38	31
Incarceration days saved:	-	939	1,251	1,104

,,					
Veterans Court:					
Number of referrals					
screened:		_	5	9	6
Number admitted:		11	0	2	2
Number served:		21	10	7	5
Incarceration days					
saved:		-	188	60	N/A*
					•
*no graduates in 2016					
Performance Goal	Outcome Measures	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
Drug Court: Reduce	In-Program Recidivism Rate for	≤ 15%	0%	0%	9%
further involvement in	all treatment court participants				
the criminal justice	should not exceed 15% *2016				
system for treatment	graduates	/ 250/	8%	71.4%	26.7%
court participants	Percent of graduates receiving a	≤ 25%	870	/1.470	20.770
	new charge (resulting in criminal conviction) within 3 years of				
	graduation should not exceed	:			
	25%*				·
	*Includes only graduates from 3				
	years prior to the year listed				
Provide evidence-based	Graduation Rate should reach or	≥ 60%	32%	40%	44%
services that promote	exceed 60% #Graduates /				
the success of the	(#Graduates+#Terminations)				
program and all					
participants		> 365 Days	444.6	648.8	571.1
	Average Length of Stay for all	> 303 Days	Days	Days	days
	treatment court graduates should		Dujo		
	be at least 12 months				
	100% of treatment court	100%	N/A	96.6%	100%
	participants report satisfaction				
	with the program				
Improve social	1000/ 0 111	100%	-	-	100%
functioning of treatment	100% of participants who were				
court participants upon	unemployed at time of program				
graduation	entry and are able to work report				
	an improvement in employment status at time of graduation				
	Status at time of graduation				

	100% of participants who had unstable housing at time of program entry report an improvement in housing at time of graduation	100%	-		75%
AIM Court: Reduce further invovlement in the criminal justice system for treatment court participants	In-Program Recidivism Rate for all treatment court participants should not exceed 15%	≤15%	8%	8%	22%
	Percent of graduates receiving a new charge (resulting in criminal conviction) within 3 years of graduation should not exceed 25%* *Includes only graduates from 3	≤25%	22%	75.0%	42.90%
Provide evidence-based services that promote the success of the program and all	years prior to the year listed Graduation Rate should reach or exceed 60% #Graduates / (#Graduates+#Terminations)	≥ 60%	81%	63%	60%
participants	Average Length of Stay for all treatment court graduates should be at least 12 months	> 365 Days	516.5 Days	408.6 Days	469.8 days
	100% of treatment court participants report satisfaction with the program	100%	N/A	100%	100%
Improve social functioning of treatment court participants upon graduation	100% of participants who were unemployed at time of program entry and are able to work report an improvement in employment status at time of graduation	100%	100%	100%	100%
	100% of participants who had unstable housing at time of program entry report an improvement in housing at time of graduation	100%	100%	100%	89.0%

Veterans Court: Reduce further involvement in the criminal justice system for treatment court	In-Program Recidivism Rate for all treatment court participants should not exceed 15%	≤ 15%	25%	0%	N/A
participants	Percent of graduates receiving a new charge (resulting in criminal conviction) within 3 years of graduation should not exceed 25%*	≤ 25%	N/A	33.3%	28.6%
	*Includes graduates from 3 years prior to the year listed				
Provide evidence-based services that promote the success of the program and all	Graduation Rate should reach or exceed 60% #Graduates / (#Graduates+#Terminations)	≥ 60%	80%	25%	N/A*
participants	Average Length of Stay for all treatment court graduates should be at least 12 months	> 365 Days	549.5 Days	483.0 Days	N/A*
	100% of treatment court participants report satisfaction with the program *No 2016 graduates	100%	N/A	100	100%
Improve social functioning of treatment court participants upon graduation	100% of participants who were unemployed at time of program entry and are able to work report an improvement in employment status at time of graduation	100%	-	-	N/A*
	100% of participants who had unstable housing at time of program entry report an improvement in housing at time of graduation *No 2016 graduates	100%	-	-	N/A*
Risk for Abuse, Neg	of Vulnerable Adults who are at lect, or Exploitation including of Adult Family Homes	Budget \$762,648	Levy \$317,331		FTE's 6.77

Under the scope of Wisconsin Statutes Chapter 55 (Protective Services System) and Wisconsin Statutes Chapter 46.90 (Elder Abuse Reporting System), DHS is the lead agency for Adult Protective Services in Eau Claire County. This includes our designation as the county's "Adult At Risk" agency. In this program area we provide services to ensure the protection of vulnerable populations, enabling them to live in the least restrictive setting consistent with their needs.

restrictive setting consiste	OUTPUTS				
		2013	<u>2014</u>	<u>2015</u>	<u>2016</u>
Number of Adult and			_	0.0	110
Elders at Risk reports:		97	96	90	110
Number of Adults and Eld	lers at Risk reports investigated:			26	110
Number of investigated re	ports substantiated:			11	46
Number of Adults and Elosubstantiated within	lers at Risk investigated and			11	64
a calendar year:		0	1	11	1
Adult Family Home Certification:		2	1	0	1
Performance Goal	Outcome Measures	Benchmark	<u>2014</u>	<u>2015</u>	<u>2016</u>
Ensure protective services are provided to vulnerable and elder adults to live in the least restrictive setting possible for their success, per the State's focus of least restrictive placements.	85% of substantiated reports of abuse, neglect, and exploitation have no substantiated follow up reports related to the initial substantiation as verified per WITs.	85%	85%	74%	
	& Economic Assistance, Fraud	Budget	Levy		FTE's
Investigation & Reco	very, Resource Development & ertification	\$3,800,832	\$725,110		46.02

The Economic Support Unit provides eligible Great Rivers Income Maintenance Consortium residents (Barron, Burnett, Chippewa, Douglas, Dunn, Eau Claire, Pierce, Polk, St. Croix, Washburn) access to health care, food, childcare, and home energy and heating resources through public programs including Medical Assistance (including Badger Care Plus, Family Planning Waiver, Community Waiver, Institutional and Medicare Beneficiary Programs) Food Share (SNAP) and Wisconsin Home Energy Program. The fraud investigation and recovery program provides program integrity to the Econ Assistance programs in the GRC by investigating suspected fraud and recovery in substantiated cases.

OUTPUTS						
GRC:	2013	<u>2014</u>	<u>2015</u>	<u>2016</u>		
Number of cases currently open in Eau Claire County:	12,172	12,721	12,064	12,050		
Number of cases currently open in Great Rivers Consortium:			56,560	54,766		
Number of Great Rivers applications processed annually:			49,384	50,872		

Number of Calls in the Gr	reat Rivers Call Center annually:			136,815	185,585
Child Care		2013	2014	2015	2016
Certification:	Care home visits per year:	119	74	47	39
	providers at any given time:	44	37	38	24
Total number of denials s	suspensions, or revocations:	5	0	2	.0
Total number of trainings	offered to Certified Child Care				
providers:	offered to continue chira com	4	5	7	20
Fraud Investigations:		2013	2014	<u>2015</u>	<u>2016</u>
	ion-Investigations for GRC:	156	382	1750	2121
Number of cases currently				\$56,560	\$54,766
Total amount of overpayn		409,793	801,106	931,255	1,388,775
Total amount of future say				\$384,840	\$488,737
Recovered monies (For For the counties get back 15% of dollars paid back):	ood Share-Health Care Programs,			\$76,973	\$24,717
pard back).		Bench			
Performance Goal	Outcome Measures	<u>mark</u>	2014	2015	2016
GRC: Provide quality access to healthcare, food, home energy and heating resources and child care for Great Rivers Consortium residents.	95% of Income Maintenance (Food Share-Healthcare) applications are processed within 30 days.	95%	98.0%	98.4%	98.6%
residents.	Call Center Average Speed of answer will be less than 12 minutes	12 min		6.6	502
Child Care Certification: Provides training and monitoring for Eau Claire and Chippewa County certified child care	Conduct 6 attendance record audits on license family centers per year to monitor compliance with Child Care subsidy program.	6	14	15	

Fraud: Provide quality	Fraud-Benefit Recovery Team	\$12.00	\$18.13	\$22.93	\$16.54
fraud investigations,	will maintain and/or exceed a				
program integrity, and	benefit savings to cost ratio of				
benefit recovery	\$12 (total GRC Overpayments +				
services to Great Rivers	total future savings/state funding				
Consortium (GRC)	allocation)				
residents.					

Action Required

Meeting Date: April 24, 2017	х	Information-Discussion		
Agenda Item No. 7		Dire	ection to St	aff
Department: Human Services		Арр	oroval-Deni	al-Accept
Subject: Personnel Update – Jackie Krumenauer		Requires Recommendation to:		
		County Board		
			Committe	e on Human Resources
			Form:	Ordinance .
				Resolution
				Report
		Other Action:		

Enclosed please find the latest vacancy report for Human Services Department.

Eau Claire County Department of Human Services Recruitment Status - 4/24/17

Position Title	Unit	Status	Reason
iscal Associate II's (1)	Fiscal	Open recruitment	Promotion
Social Worker (KMc)	Behavioral Health	Open recruitment	Retirement
Social Worker (JW)	FSU - YS	2nd interviews being scheduled Transfer to another unit	Transfer to another unit
social Worker (JB)	FSU - IA	Open recruitment	resignation

New for 2017 in Budget

Economic Support Specialist	ESS	On hold	New for 2017
Behavioral Health Administrator	Behavioral Health	Continuous	New for 2017
Family Services Administrator	FSU	Continuous	New for 2017
Social Worker Manager	Behavioral Health	Continuous	New for 2017
CCS Service Facilitator(1)	Behavioral Health	Interviews scheduled	New for 2017

New for 2017 (not in Budget)*

CCS Service Facilitators (3)	Behavioral Health	Recruitment meeting	New for 2017
CCS Mental Health Professional (1)	Behavioral Health	Recruitment meeting	New for 2017
CCS AODA Case Manager (2)	Behavioral Health	Recruitment meeting	New for 2017
*Unanimously approved by the HS Boa	the HS Board on 3/27/17 CoHR & Co Bd on 4/18	n Bd on 4/18	