

Eau Claire County
Human Services Board

Date: June 6, 2022

Time: 5:30 PM

Location: Department of Human Services, Eau Claire County Government Center
721 Oxford Ave., suite 1001
Ground floor, room G034
Eau Claire, WI 54703

Those wishing to make public comments can submit their name and address no later than 30 minutes prior to the meeting to bridget.kinderman@co.eau-claire.wi.us, or attend the meeting in person. Comments are limited to three minutes; you will be called on during the public comment section of the meeting.

1. Welcome and Call to Order
2. Roll Call
3. Confirmation of Meeting Notice
4. Public Comment
5. Review of Meeting Minutes from May 2nd—Action/Accept/Denial/Revise
6. Director’s Report—Discussion
 - Department Report
 - Public Hearing
7. Orientation: Process for Involvement in Programs and Services- Discussion
8. Crisis Services – National Emergency Number 988--Discussion
9. Review of December 2021 Preliminary Financials – Discussion
10. Review of March 2022 Financials—Action/Accept/Denial/Revise
11. July Human Services Board Meeting Date – Discussion
12. Announcements-Discussion
13. Future Agenda Items
 - Prevention Services
14. Adjourn

Next Human Services Board meeting is tentatively scheduled for July 2022

Prepared by Bridget Kinderman – Department of Human Services

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters, remote access, or other auxiliary aids. Contact the clerk of the committee or Administration for assistance (715-839-5106). For additional information on ADA requests, contact the County ADA Coordinator at 839-6945, (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.



MINUTES
Eau Claire County
Human Services Board
Monday, May 2, 2022, at 5PM

Present:

- Supervisor Kimberly Cronk,
- Supervisor John Folstad,
- Supervisor David Hirsch,
- Supervisor Connie Russell,
- Supervisor Katherine Schneider,
- Citizen Member Jim Catlin,
- Citizen Member Kathleen Clark,
- Citizen Member Lorraine Henning,
- Citizen Member Paul Maulucci

Others:

- Department of Human Services (DHS) Operations Administrator Bridget Kinderman—Committee Clerk
- DHS Director Diane Cable,
- DHS Deputy Director Ron Schmidt,
- DHS Family Services Administrator Terri Bohl,
- DHS Behavioral Health Administrator Luke Fedie,
- DHS Fiscal Administrator Vickie Gardner,
- DHS Economic Support Consortium Administrator Kathy Welke

Call to Order

Pro-Tem Schneider called the meeting to order at 5:00 pm.

Roll Call

The Committee Clerk called the roll, and it is noted above under present.

Confirmation of Meeting Notice

The Pro-Tem Schneider asked if the meeting had been noticed, and the Committee Clerk said that it had been.

Public Comment

The Pro-Tem Schneider asked if any public comment had been received, and the Committee Clerk said that none had been received. Supervisor Cronk moved to close comment, and Supervisor Hirsch seconded the motion. The motion was unanimously approved.

Election of Human Services Board Chair, Vice Chair, and Clerk

Election of Human Services Board Chair: Supervisor Hirsch nominated Supervisor Schneider as Chair and Supervisor Cronk seconded the nomination. Citizen member Maulucci motioned to close voting and Citizen member Henning seconded. Supervisor Schneider was unanimously voted in as Chair.

Election of Human Services Board Vice-Chair: Discussion occurred regarding if Vice-Chair is to be a County Board member. Eau Claire County Corporation Counsel's opinion is that the Vice-Chair is a County Board member. Chair Schneider nominated Supervisor Cronk and Citizen member Maulucci seconded this nomination. Citizen member Catlin nominated Supervisor Folstad and Supervisor Hirsch seconded. Supervisor Folstad nominated Citizen member Catlin and this nomination was not seconded. Supervisor Cronk received six votes and Supervisor Folstad received two votes. Supervisor Cronk accepted the Vice Chair position.

Committee Clerk: Chair Schneider asked current committee clerk Bridget Kinderman if she would accept the position and Kinderman did accept. The committee clerk position falls within the capacity of the Operations Administrator position.

Review/Approval of Committee Minutes

The Board reviewed meeting minutes from March 28, 2022. Citizen member Maulucci moved to approve the minutes, as written, and Citizen member Henning seconded the motion. Minutes were approved by majority vote. Supervisor Folstad abstained. Supervisor Vue was not present.

Overview of Human Services Department and Board; Roles and Responsibilities

DHS Director Cable discussed the various units and programming within DHS. Explanation of the how and why DHS operated, and mandated statutes were provided. The link for "Speak Your Peace" will be sent to committee members.

Citizen Board Members orientation to Human Services Board

It was discussed and decided that new board members would pair with a citizen member. The citizen member would be a primary contact for the board member paired with them.

Review of December 2021 Preliminary Financials

Fiscal Manager Gardner reviewed December 2021 Preliminary Financials.

Review of February 2022 Financials

Fiscal Manager Gardner reviewed February 2022 Preliminary Financials. Citizen member Maulucci moved to accept the report and Citizen member Clark seconded the motion. The report was accepted. Supervisor Vue and Hirsch were not present.

Future Agenda Items

Crisis/suicide hotline #988

Prevention Services within DHS

Adjourn

The meeting was adjourned at 7:25pm

Respectfully submitted by,

Bridget Kinderman

EAU CLAIRE COUNTY HUMAN SERVICES
 Director – Diane Cable
 Department Report – Division & Unit Updates
 June 6, 2022

AGENCY UPDATE (DIANE CABLE)

The Department continues to focus on key areas that impact the community and operations:

Homelessness and Housing: This area affects about 80% of the individuals the Department serves. We are involved with community partners and key stakeholders to provide support and work towards improved housing stability.

Race, Equity, Diversity, and Inclusivity: We held our first strategic session with invited community members and professionals for input and discussion on the work of the Youth Justice Race, Equity and Diversity Project (RED-Grant). Members of this group have agreed to continue to come together to provide guidance and recommendations.

Workforce and Wellbeing work: We are initiating a Wellbeing Project, creating a staff Wellbeing Team to enhance and sustain a culture of Agency Wellbeing.

Waitlists: We continue to address program waitlists, while the waitlists, continue to grow in some program areas. Our hope is that the filling of vacant positions, will decrease/eliminate waitlists.

FAMILY SERVICES UPDATE (TERRI BOHL)

June Division Overview: The Family Services team has been struggling to serve children with complex needs with appropriate services and out of home care settings. Currently, we have several youths who need a new placement, but we are unable to identify an appropriate resource. The Department of Children and Families has been gathering data and discussing possible strategies to improve resources for children as many counties are struggling to find placement providers. Another area of attention for the Family Services Division is the Centralized Access Team who continues to have issue with capacity. The team has experienced recent turnover and increased referrals. The Department is assessing the workload within Centralized Area and discussing ideas for additional support to that team.

June Staffing Update: The Division has experienced some internal movement over the last few months. Austin Martin and Samantha Loew joined the Youth Services team on 5/23/22. Austin previously worked at JDC and Samantha is a recent graduate of UW-Madison with a Master’s in social work. Current vacancies include an Intensive Permanency Services Social Worker, Initial Assessment Social Worker, Centralized Access Social Worker, and three part-time JDC positions. Interviews have recently concluded for the three vacant Social Work positions and candidates will be onboarded in late June or early July.

UNIT UPDATES:

- **Centralized Access (Tasha Alexander):**

Centralized Access (Tasha Alexander)	Dec	Jan '22	Feb	Mar	April
Child Protective Services reports received	122	115	127	127	122
% Child Protective Services reports screened In	24%	36%	21%	26%	28%
Child Protective Services reports screened In	29	41	27	33	34
Child Welfare Service reports received	16	17	13	15	7
Child Welfare Service reports screened In	11	15	12	13	6
% Child Welfare Service reports screened In	69%	88%	92%	87%	86%

Key Issues: Although this unit has capacity issues, it continues to strive and meet the needs of incoming calls, reports, and referrals for services to be delivered in a timely fashion.

Staffing Updates: A current team member will make an internal transition to crisis; this vacant position will be filled by an internal transition by a team member from the CCS unit. These transitions will occur in June and July.

- **CPS Initial Assessment (Tasha Alexander):**

CPS Initial Assessment	Dec	Jan '22	Feb	Mar	April
Initial assessments completed	30	31	23	40	14
Assessments resulting in substantiation	3	9	5	8	5
% of assessments resulting in substantiation	10%	29%	22%	20%	36%
Assessments completed involving child remaining in home	29	22	22	39	2
% of assessments completed involving child remaining in home	97%	71%	96%	98%	86%
Assessments resulting in services opening within department	2	4	2	5	3
% of assessments resulting in services opening within department	7%	13%	9%	13%	21%

Staffing Updates: With a staff member transitioning to the Systems of Care position, this vacant IA position will be filled by an external candidate who is familiar with the county because she had been intern within Family Services.

- **Ongoing (Courtney Wick):**

Ongoing Child Protective Services	Dec	Jan '22	Feb	Mar	April
Children served in Ongoing Child Protective Services	193	159	169	182	179
Families served in Ongoing Child Protective Services	103	81	94	102	98
Children served in home	86	69	69	76	74
Children enrolled in Targeted Safety Support	34	23	26	22	16

Staffing Updates: This unit is fully staffed

- **Youth Services (Hannah Keller):**

Youth Services	Dec	Jan '22	Feb	Mar	April
Youth served in Youth Services Program	107	*	115	114	108
Youth being served in their home	82	*	88	85	83
Families served in Youth Services Program	97	*	102	100	93

Staffing Updates: The two vacant Youth Services positions have been filled and the unit has been fully staffed since mid-May.

- **Intensive Permanency Services (Melissa Christopherson):**

Intensive Permanency	Dec	Jan '22	Feb	Mar	April
Youth receiving Intensive Permanency Services	16	16	14	15	15

Staffing Updates: The vacant IPS position will be filled in July by an external candidate.

- **Alternate Care (Melissa Christopherson):**

Alternate Care	Dec	Jan '22	Feb	Mar	April
Children in out-of-home care	122	119	121	125	132
Median length of stay in months for children discharged in month	13.9	12.45	11.00	14.0	*

- **Birth-to-Three (Melissa Christopherson):**

Birth-to-Three	Dec	Jan '22	Feb	Mar	April
Children being served	143	140	145	119	119

Staffing Updates: The vacant Birth-to-Three position has an identified candidate, no start date has been identified.

- **Juvenile Detention Center (Rob Fadness, Michael Ludgatis):**

Juvenile Detention Center (Rob Fadness, Michael Ludgatis)	Dec	Jan '22	Feb	Mar	April
Total admissions number youth	27	20	26	30	37
Total admissions number days	396	348	392	432	408
Eau Claire County admissions - number youth	9	3	4	6	5
Eau Claire County admissions - number days	65	20	12	28	18
Short-term admissions - number youth	22	15	21	25	30
Short-term admissions - number days	241	193	252	277	254
Eau Claire County short-term admissions - number youth	9	3	4	6	5
Eau Claire County short-term admissions - number days	65	20	12	28	18
180 program admissions - number youth	5	5	5	5	7
180 program admissions - number days	155	155	140	155	154
Average daily population youth per day	12.8	11.2	13.6	13.9	13.6
Occupancy rate	56%	48.40%	59%	61%	59%
Climate survey - staff	80%	78%	90%	89%	76%
Climate survey - safety	71%	77%	72%	75%	78%
Climate survey - cleanliness	86%	94%	100%	87%	87%
Climate survey - overall	85%	100%	91%	90%	88%

Key Issues: The population of the detention center for the month of April was 13.6 youth per day: 8.4 youth in secure detention and 5.1 youth in the 180 Program. The normal rated capacity of the facility is 23 youth.

COVID precautions, including a five-day quarantine for new admissions and a reduced capacity of 16 youth remain in place. As local COVID numbers decline, the question of whether to continue pandemic restrictions should be addressed. COVID precautions are an imposition to residents, staff, and facility operations and should be reviewed.

Daily education programming provided by the Eau Claire Area School District continues through the first week in June. After a one-year absence, summer school will begin in mid-June and run through the end of August.

Programming conducted by the UWEC music program has returned. Weekly music instruction, including 1:1 guitar lessons are conducted for residents having an interest.

Finally, maintaining a full staff is an ongoing concern, but despite these challenges our staff do a great job of maintaining the safety and security of all residents.

Staffing Updates: The JDC Supervisor position was filled by an internal candidate. This position along with an additional

(male) full time position which became vacant due to the employee transition to a social work position within Youth Services, have been filled by two (male) internal parttime employees. The two vacant parttime positions will be recruited for.

BEHAVIORAL HEALTH UPDATE (LUKE FEDIE)

June Division Overview: The Division continues to work on its goal of providing mental health services to strengthen individuals and families in the community, with a focus on providing services to people who are enrolled in another Human Services program. The effort to collaborate and support internal referrals is reflected in the Clinic’s focus on adding in-home therapy services for families served by the Family Services Division. Additionally, Behavioral Health remains focused on responding to its referral lists, and onboarding new staff.

June Staffing Update: The Behavioral Health Division is happy to share it is close to being fully staffed. Hiring has been a significant focus, particularly to fill positions created in the 2022 budget and vacancies created by internal transfers. Behavioral Health, along with the entire Department, is focused on retaining staff by ensuring staff are satisfied in their positions. This effort includes bringing people back into the building as restrictions lift, and different teams are trying different strategies to build connections within their teams, such as potlucks, office days, and more. **7**

UNIT UPDATES:

- **Clinic (Jen Coyne):**

Clinic	Dec	Jan '22	Feb	Mar	April
Clients in Med Management	270	267	269	271	224
Clients in Therapy	155	124	151	158	153
Referrals	7	17	24	11	13
Med management waitlist	1	5	5	6	3
Therapy waitlist	59	4	4	4	4

Key Issues:

- We are getting ready to start MRT (Moral Reconciliation Therapy) group in August. This is an evidence-based group for people in the criminal justice system because we are partnering with teams throughout the Department, we will be able to provide gender-specific groups with 2 facilitators each, one from the clinic and the other from other teams in the agency.
- We are also in the process of developing a protocol when clients/patients escalate when in session. This will likely include another person knocking on the door and asking if everything is ok.
- Mackenzie Deffenbaugh and Brianna Albers presented their trauma-informed training and Jenny Hlava herGBTLQIA+ training to The Great Rivers Consortium. We look forward to offering continued trainings to the agency at large.
- Our new therapist, Tanya Riggs, will start taking clients in June and we’ve already assigned her 3 for that month.
- We are in the process of identifying dates in which to set up clinic “Lunch and Learns” for the department.
- We have opened an hour a week to the agency for consultation with Angela Trapani and Cara Helmer. This is a time specifically for staff too come and discuss difficult cases.
- Angela Trapani has set aside one hour a week for crisis patients or for patients who are discharging from long-term care and need medications.

Staffing Updates: The clinic will be recruiting for a therapist to fill vacancy beginning June.

- **Treatment Court (Brianna Albers):**

Treatment Court	Dec	Jan '22	Feb	Mar	April
Current caseload	29	23	23	24	24
Branch 1 - AIM	8	7	7	8	7
Branch 3 - Mental Health Court	10	7	7	8	6
Branch 5 - Drug Court	8	6	6	5	6
Vet Court	3	3	3	3	3
Referrals	8	7	2	6	10

Staffing Update: Treatment Courts remain fully staffed

- **Community Support Program (Jocelyn Lingel-Kufner):**

Community Support Program	Dec	Jan '22	Feb	Mar	April
Number participants	103	104	105	105	103
New admissions	2	1	1	1	0
Referral list	20	15	9	11	19

Key Issues: CSP recently added a contracted Vocational Rehabilitation individual to the team, it has been going great so far. Eau Claire CSP team strives to follow the ACT(Assertive Community Treatment) treatment model. ACT is an evidence-based practice that uses a multidisciplinary team to provide comprehensive services to address the needs of persons with serious behavioral health issues and other co-morbid disorders. In June the supervisor will be trained as a reviewer of the ACT model and will participate in reviewing 2 other CSP programs in the State. Then Eau Claire County CSP will participate in an ACT review that is planned for late July to measure our compliance with the ACT model of treatment.

Staffing Updates: CSP has been fully staffed since Mid-April.

- **Crisis Services (Santana Stauty, Becky Stendahl):**

Crisis Services (Santana Stauty, Becky Stendahl)	Dec.	Jan '22	Feb	Mar	April
Crisis contacts	230	239	222	279	256
Emergency detentions	8	22	22	24	26
Clients placed in local hospitals	10	10	9	14	17
Clients placed in Winnebago	*	*	*	*	9
Face-to-face assessments completed	14	18	13	20	7
Jail re-entry new clients	6	*	16	9	22
Jail re-entry total clients	*	*	*	*	35

Key Issues: Crisis has been developing and creating the crisis liaison position to better collaborate with local law enforcement. There has been an influx with mental health cases coming into Eau Claire County, due to the knowledge that Eau Claire County has mental health services.

Staffing Updates: A new crisis social worker began at the beginning of May, and crisis is still in the process of hiring the crisis liaison for Eau Claire Police Department.

- **Adult Protective Services (Nancy Weltzin):**

Adult Protective Services (Nancy Weltzin)	Dec	Jan '22	Feb	Mar	April
Investigations requests	33	47	45	39	58
Investigations screened out	3	4	6	6	8
% Investigations screened out	9%	9%	13%	15%	13%
Investigations concluded	16	19	16	15	19
Investigations substantiated	6	2	4	6	14
% Investigations substantiated	38%	11%	25%	22%	74%
Allegation of self-neglect	36%	19%	38%	21%	20%
Allegation of neglect	15%	26%	20%	18%	11%
Allegation of financial abuse	21%	30%	29%	31%	7%
Requests for guardianship	15%	20%	24%	18%	8%

Key Issues: APS continues to face challenges of finding Adult Family Homes and community -based residential facility placements.

Staffing Updates: APS has been fully staffed since mid-May.

- **Comprehensive Community Services (Cinthia Wiebusch, Jess Buckli):**

Comprehensive Community Services	Dec	Jan '22	Feb	Mar	April
Current case count	195	193	195	194	194
Referrals	18	21	25	41	33
External referrals	16	18	23	30	29
Internal referrals	2	3	2	11	4
Admissions	10	14	12	17	5
Discharges	12	17	10	20	16
Adults waiting for CCS services	7	7	16	29	23
Youth waiting for CCS services	14	9	13	11	12

Key Issues:

- CCS program experienced internal staff transitions to include transfers to other divisions and promotions. These changes impacted the program's ability to admit participants. Three caseloads were redistributed among service facilitators that have also impacted the program.
- CCS Enhancement group continues to work together to ensure efficiency and effectiveness in the program internally and externally. The group also promotes job satisfaction. Four group subsets are: CCS Newsletter, Internal Quality Assurance, Team Building and Office Space.
- The first CCS Newsletter was sent out in March and second one will be sent out mid-June. These newsletters intent to promote provider-program relationships.
- CCS Annual survey was submitted to the State.

Staffing Updates: The CCS Program continues to interview for the following positions: 4 Service Facilitators. Have identified two potential candidates and will be reposting for the two vacancies. The Program is also hiring 1 Substance Use Professional, 1 Mental Health Professional. A CCS Supervisor has been identified.

- **Children's Long-Term Support (Ron Schmidt - Temp):**

Children's Long-Term Support	Dec	Jan '22	Feb	Mar	April
Current enrollment	244	243	264	259	258
Current waitlist	147	174	177	196	212

Key Issues: We should see significant movement with the waitlist due to staff returning from FMLA and with the onboarding of three new staff in May.

Staffing Updates: Recruiting will begin for the two vacant CLTS social worker positions, and two workers return from FMLA in June.

ECONOMIC SUPPORT UPDATE (KATHY WELKE, JANE OLSON, CINDY DRURY, JEN DAHL)

June Division Overview: Wisconsin did not receive a notice from the Federal Government on 5/15 stating that the PHE was going to end on 7/15. Because there was not a 60-day notice provided on 5/15 Wisconsin is now planning for a 10/15 end date to the PHE and will await notification on 8/15 to confirm this.

June Staffing Update: ESS currently has three vacancies and recruitment has begun to fill these vacancies.

Economic Support	Dec	Jan '22	Feb	Mar	April
Calls received	10,953	13,763	10,691	11,945	10,846
Applications processed	3,726	3,799	3,111	3,135	2,723
Renewals processed	2,460	2,772	2,350	2,417	1,899
All cases	66,740	66,716	67,106	67,191	67,503
Cases in Eau Claire County	14,502	14,510	14,038	14,109	14,804
Active Child Care cases	1,235	1,243	1,182	1,158	1,154
Active Eau Claire Child Care cases	340	343	333	325	326

Human Services Programs and Services- Process and Oversight

Presentation to Human Services Board – June 2022

Diane Cable, MSW

Director



Process Overview





Referral Process



Referral Source


- External & Internal, Court Ordered or Voluntary
-

Referral for Services – Family Services

Program Area	External	Internal	Court Ordered	Voluntary
Child Welfare – Initial Assessment/Ongoing Child Protective Services	Yes	Yes	Yes	Yes
Youth Justice- Intake/Ongoing	Yes	Yes	Yes	Yes
Intensive Permanency Services	No	Yes	No	Yes
Birth to 3	Yes	Yes	No	Yes
Coordinate Services Team	Yes	Yes	Yes	Yes
Juvenile Detention	Yes	Yes	Yes	No

Program Area	External	Internal	Court Ordered	Voluntary
Adult Protective Services- APS	Yes	Yes	Yes	Yes
Community Support Program- CSP	Yes	Yes	Yes	Yes
Community Comprehensive Support- CCS	Yes	Yes	No	Yes
Children's Long-Term Support- CLTS	Yes	Yes	No	Yes
Crisis	Yes	Yes	Yes	Yes
Behavioral Health Out-Patient Clinic	Yes	Yes	Yes	Yes
Treatment Courts	Yes	Yes	Yes	No

Referral for Services- Behavioral Health



Assessment Process



Referral

- External & Internal, Court Ordered or Voluntary

Assessment

- Social Worker, Clinical, Tools, Standards

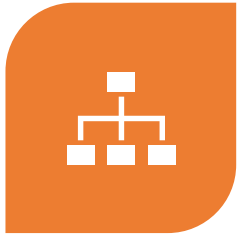
Service/Need - Process



Participant Voice



Approval of Services



SUPERVISORY



FISCAL
OVERSIGHT



CONTRACTED
SERVICES

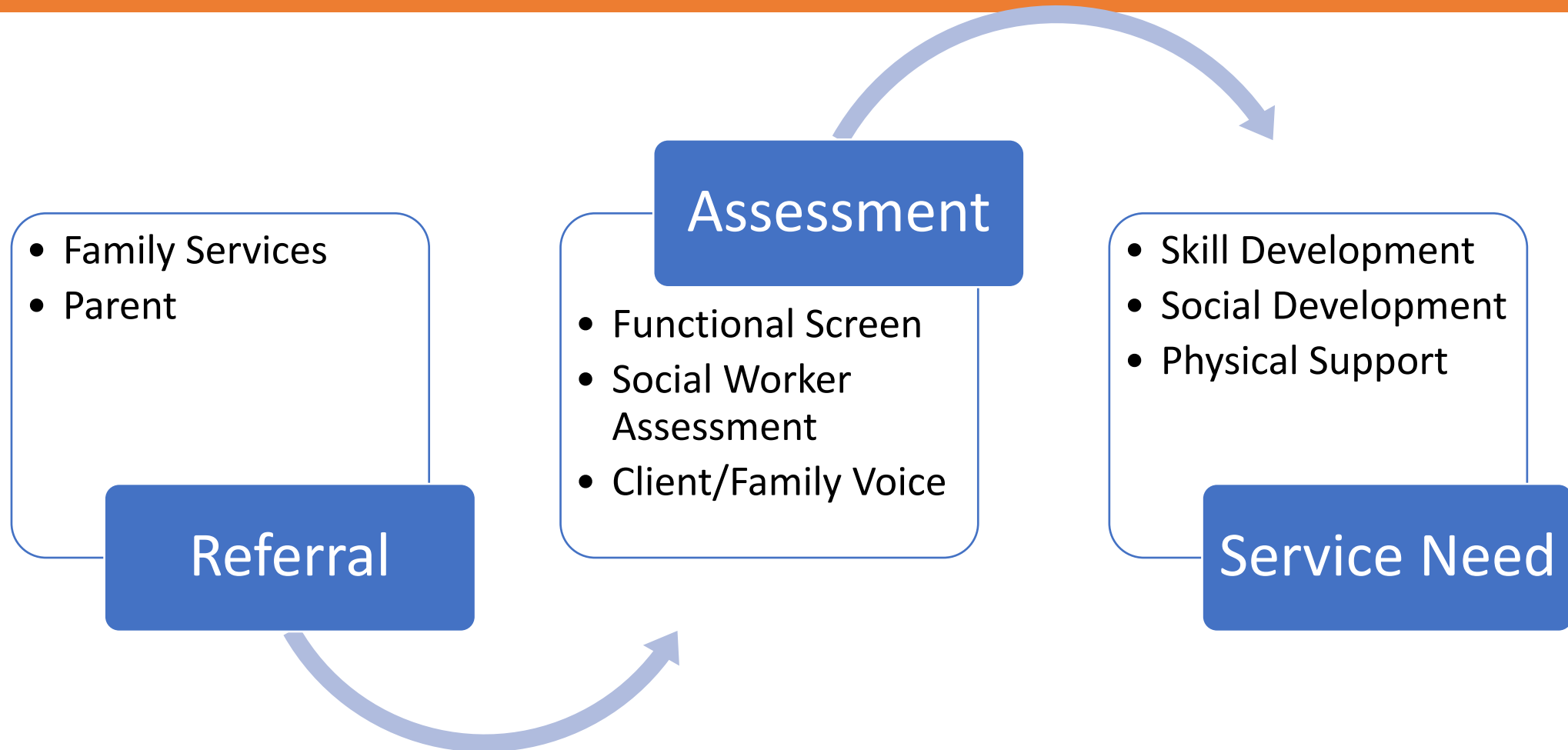


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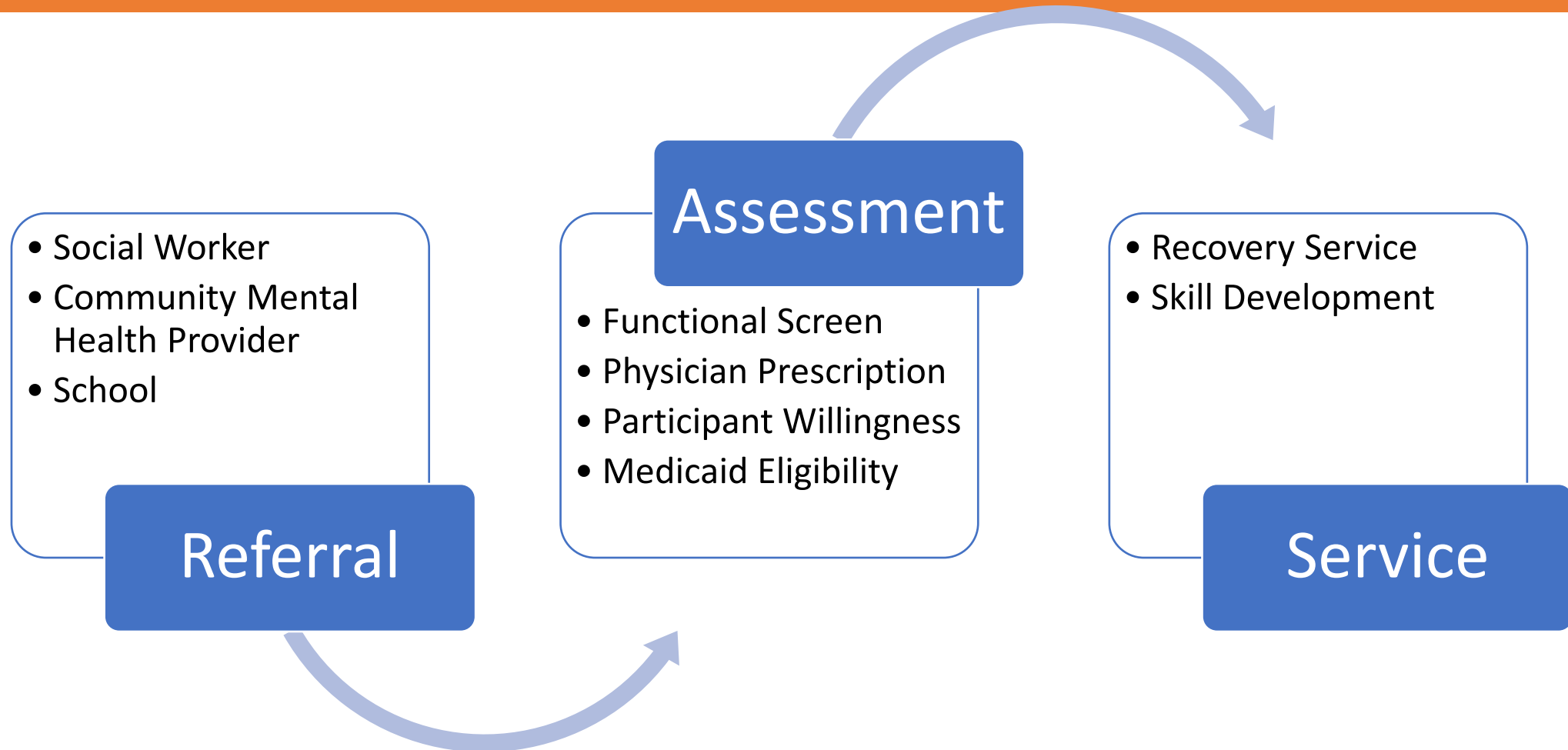


STATE
APPROVAL

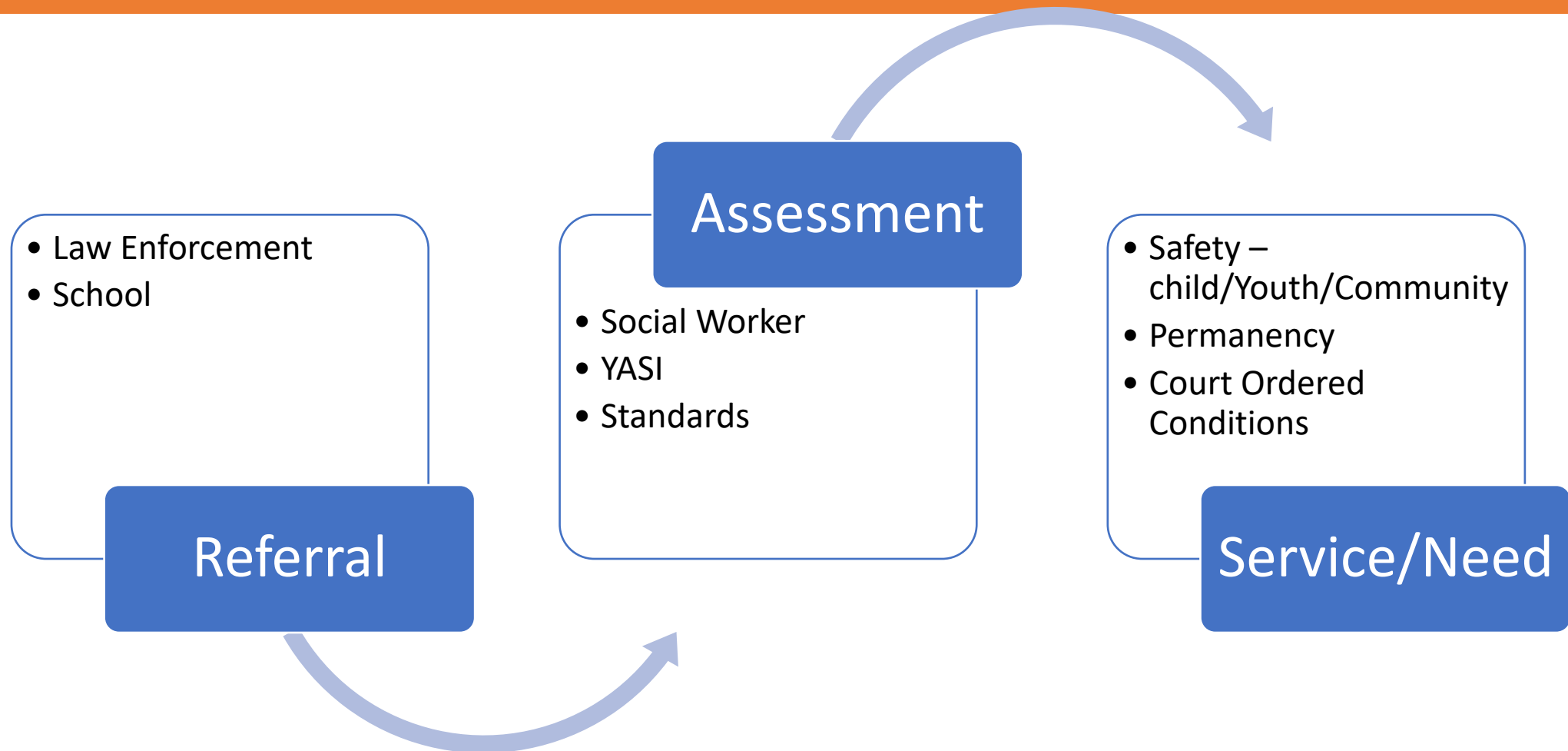
Example – Children’s Long-Term Support



Example – Comprehensive Community Services



Example – Youth Services/CPS





Questions?

**MANDATES AFFECTING
COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES**

1. **Youth Services** - Counties are mandated to provide services to rehabilitate juvenile delinquents and provide protection for the community from juvenile crime with no increase in state funding. Wisconsin State Statute Chapter 938 (Juvenile Justice Code) provides the mandate and related guidance for these services. Counties are required to pay for the cost of children placed by the court in state operated correctional facilities. In the past, state aids have not covered cost increases in state facilities. The cost of care in these facilities is increasing. The state requires counties to pay these additional costs and provides little or no annual increase in the Youth Aids allocation.

2. **Child Welfare Services** - Counties are mandated by the state to carry out state responsibilities to protect children from abuse and neglect. Wisconsin State Statute Chapter 48, known as the Children's Code, covers the related mandates and guidance for Counties. This requires conducting child abuse investigations in the manner and timelines prescribed by the state, placing and paying for children in foster care or institutional settings and providing services to the child and family to reunite them if possible and, if not, filing for Court Termination of Parental Rights within the timelines set by the federal government. . Counties experience annual fluctuations in the number of child abuse and neglect cases presented to them. Thus placement and other related costs can be unpredictable. Overall, the counties have seen a gradual trend towards increased numbers and severity/complexity of abuse and neglect cases.

The State requires additional plans to obtain funding through Promoting Safe and Stable families, Targeted Support Safety Program, Title IV-E reimbursement, Community Intervention Program and other targeted funding opportunities. Discussions have started regarding how to fold these sources into funding allocations without all the plan writing.

- 2019 Update – the State budget Increased the Children and Family Aids (CFA) in CY 20 by \$24,125,000 and \$25,500,000 in CY 21. Three funding formulas have been proposed to allocate this funding:

- 1 – Allocation according to the current funding formula,
- 2 – Allocation according to the current funding formula with a minimum of \$100,000 base to each County, and
- 3 – Funding based on a poverty driven formula. A statewide workgroup has been formed to determine the future allocation of this funding source.

2021 – No change in funding formula has been determined.

3. **Long Term Support Services** - Counties are required to provide services for persons with disabilities or the elderly in lieu of institutional care. Over the past 15 years, Wisconsin has been implementing a program called Family Care; a managed care approach to meeting the long term care needs of elderly and disabled across the state. As the program developed, various regions created new managed care organizations (MCO's) that ultimately assumed state contracts for serving 'members' with long term care needs. Over time, counties required financial share of local tax levy earmarked to support Family Care was incrementally decreased to a base level of support (determined by state formula). Counties

have taken a new role as the front door for entry into the LTC system. Counties now operate Aging and Disability Resource Centers as 'one stop shops' for those seeking information and services associated with long term care needs and provide Children's Long Term Support Waiver services for children under State Statute 46.995. There is a new Maintenance of Effort (MOE) for counties going forward to help eliminate waiting lists for children in this service area. As of 2021, children remain on the wait list. The State fund a structured enrollment number each month to eliminate the wait list.

4. ***Birth to Three*** - In Wisconsin, each of the 72 counties are responsible for providing Birth to 3 services as outlined in the [Individuals with Disabilities Education Act \(IDEA\)](#) 2004, a federal law that governs how states and public agencies provide early intervention, special education, and related services to children with disabilities. The Wisconsin administrative code ([DHS 90](#)) is designed to match the federal guidance. Birth to Three is a program that the state agreed to accept from the federal government that, once agreed to by the state, became a mandate for counties to provide. The Wisconsin State budget 2020/2021 included a \$2.25 million one time increase to the base in SFY 2020.
5. ***Aging Services*** - These programs are to ensure that all older individuals, regardless of income, have access to information, services and opportunities available within the county and that services and resources of the county are designed to reach those in greatest social and economic need. Many services are provided or accessed under the umbrella of the Aging and Disabilities Resource Centers. Examples of services provided and purchased in this program area are Elderly Benefit Specialist, Congregate and Home Delivered meals, Transportation and Family Caregiver Support (all under Title III of the federal social security act). Additionally, Counties are responsible to review and investigate all claims of abuse or neglect against vulnerable populations Adult Protective Services Wis. Stat. §§ 46.90(2), 55.043(1d), 46.90(3) and 55.043(1g) There are substantial variations between Counties associated with the 'levels' of 'mandated' services being provided. Some county officials have chosen to support these services at levels beyond minimum required mandates. Counties currently fund both direct and indirect costs associated with these purchased services.
6. ***Mental Health and Substance Abuse Services*** - Counties are mandated to provide services to persons with mental illness or alcohol or other drug abuse as defined by State Statute Chapter 51, known as the Mental Health Act. Counties have some flexibility to determine the type and levels of service but if the appropriate service is not provided to people, the risk to the county is that the person might end up in a hospital with very high costs to the counties. Counties provide specialized treatment services through outpatient clinics, Community Support Programs, Targeted Case Management and Comprehensive Community Services. Medical Assistance is supposed to reimburse counties for the cost of service to eligible people. Right now those Medical Assistance rates are 70% of actual county costs. The State reimburses counties in CCS consortia 100% of costs up to State rates. Medical Assistance rates are nowhere near the deficit amount and will not cover inflationary increases. The Affordable Care Act increased coverage to those, citizens who were previously uninsured or under-insured Counties shifted strategies associated with accepting new patients with insurance and developed provider relationships with new payers. This service area falls under the "Shield Law". State law indicates we provide these services within Federal, State and County funding limits. Medicaid provides funding for Certified Crisis program with increases addressed in the State budget for 2020/2021 when

performed with a regional approach. This funding increases the reimbursement up to 100%.

7. **Economic Support Services** - The Economic Support unit provides mandated state and federal public assistance programs from three state departments; DHS, DCF, DOA. The WI Department of Health Services contract mandates the "Income Maintenance" programs to provide appropriate nutrition and health care benefits for eligible low income persons. These programs include FoodShare (SNAP), Medicaid (BadgerCare) and Caretaker Supplement (CTS). The Department of Children and Families contract requires county administration of WI Shares Child Care subsidy assistance as well as Child Care Provider Certification/Regulation. These DHS/DCF services are mandated to be provided in a multi-county regional Income Maintenance Consortia. Variables on fiscal agent and other regional contracts among counties determine how the services are provided and funded within a region. The Department of Administration contract mandates the "Energy Assistance" program known as WHEAP (WI Home Energy Assistance Program) to provide critical energy and housing benefits for eligible low income households. This contract must be administered by the county however services/benefits may be operated under sub-contracts.

Although all direct benefits issued to individuals are funded entirely by federal/state resources, none of these program operational/services expenses are fully funded by state contract dollars and require county tax levy contributions to support the program.

8. **Child Support Services** - This federally mandated program must be operated by county government under a contract with the WI Department of Children and Family. Mandated services include both case management and financial management services. Required case management services include; locating the other parent and their financial resources; scheduling genetic tests for the child and the potential father(s) of the child, preparing the papers and taking the case to court to legally identify the father and set up a support order, ensuring that one or both parents provide health insurance for the child(ren), using all available and appropriate enforcement tools to collect support owed, reviewing/changing support orders, and ending the support order, when necessary. Required financial management services are; entering the information about the court case and support orders into the Wisconsin data management system, working with employers to withhold income for support payments, processing payments, collecting, recording and sending payments, collecting, recording and sending fees, providing different ways to pay for customers; providing payment information; and correcting/reconciling errors on account balances.

Although the mandated program is funded by state and federal resources, the contract allocations have never fully covered administrative costs and require county tax levy contributions to support the program.

9. **Health Division** - Wisconsin State Public Health Statutes which mandate services include chapters 250 (Health, Administration and Supervision), 251 (Local Health Officials), 252 (Communicable Diseases), 253 (Maternal and Child Health), 254 (Environmental Health), and 255 (Chronic Disease and Injuries). Additionally, there are a host of licensing codes associated with the above statutes that Health Departments must work to assure community compliance. Finally, the Public Health Departments in Wisconsin are guided by

Department of Health Services Administrative rule 140 “Required Services for Local Health Departments” (LHD). Prevention, early intervention and education are some of the primary mandates for LHD. Funding for services comes from local tax levy (over 50%), state grants, fee for service collections and targeted grants. In 2020 funding for COVID came from the CARES act.



WISCONSIN
COUNTIES
ASSOCIATION

County Human Services Departments and Boards

Eau Claire County Human Services Board

1-4-21



County Creation

Functions of Counties

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Functions of Wisconsin's Counties

- ▶ Chapter 59, Wisconsin Statutes

- ▶ State laws pertaining to county government
- ▶ Describes a wide variety of duties and permissive authority the legislature has assigned to counties and their officers
 - ▶ It is up to the individual county board to determine how to use the powers delegated by the legislature

- ▶ Agents of the state

- ▶ Required to carry out and enforce certain state laws

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Wisconsin's 72 Counties

- Serving and protecting local interests
- Agents of state government
 - Counties administer a host of state programs:
 - Health and human services
 - State court system
 - Environmental regulation

Court Cases Describing the State-County Relationship

- ▶ “This court recently affirmed the principle that counties are creatures of the Legislature and their powers must be exercised within the scope of authority ceded to them by the state...In governmental matters, the county is simply the arm of the state; the state may direct its action as it deems best and the county cannot complain or refuse to obey...The county exists in large measure to help handle the state’s burden of political organization and civil administration...But as a creature of the state, it is not permitted to ‘censor or supervise’ the activities of its creator.”

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The State-County Relationship

- ▶ Who decides the services?
- ▶ Who provides the services?
- ▶ Who funds the services?

- ▶ Many county officials argue the significant role placed on them by the state is not matched with state support or necessary autonomy
 - ▶ Unfunded or underfunded mandates



Human/Social Services Departments

Mandates

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Social v. Human Services

- ▶ Wis. Stat. 46.22 – County Department of Social Services
 - ▶ Child welfare, youth justice, economic support
 - ▶ Typically accompanied by a Department of Community Programs under Wis. Stat. 51.42
- ▶ Wis. Stat. 46.23 – County Department of Human Services
 - ▶ More comprehensive than a social services department
 - ▶ Provide services in an integrated and efficient manner



Human Services - Defined

- ▶ *The total range of services to people including, but not limited to, health care, mental illness treatment, developmental disabilities services, income maintenance, probation, extended supervision and parole services, alcohol and drug abuse services, services to children, youth and aging, family counseling, special education services, and manpower services*



Programs Provided by County Health and Human Services Departments


- Children and Families
 - Child Protective Services
- Behavioral Health
 - Mental Health
 - Alcohol and Drug Abuse
- Youth Justice
- Long-Term Support
 - Children and Adults with Disabilities
- Economic Support
- Others
 - Nursing Homes
 - Aging/ADRC
 - Public Health
 - Child Support
 - Veterans



Statutory Mandates



- ▶ Human services departments are subjected to:
 - ▶ Federal law
 - ▶ State statutes
 - ▶ Administrative rules
 - ▶ Memo series

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Statutory Mandates – General Examples

- Sign contracts
- Formation of human/social services departments
- Primary responsibility for the provision of services



Mandates

- 46.031 (1)(a) Each county department under 46.215, 46.22, 46,23, 51.42 or 51.437 shall submit to the department by December 31 annually its final budget for services directly provided or purchased.
- 46.031 (2g) ...the county board of supervisors in a county with a single-county department or the county boards of supervisors in counties with a multicounty department shall approve the contract before January 1 of the year in which it takes effect...




Mandates

- 51.42 (1)(b) *County liability*. The county board of supervisors... has the primary responsibility for the well-being, treatment and care of the mentally ill, developmentally disabled, alcoholic and other drug dependent citizens residing within its county and for ensuring that those individuals in need of such emergency services found within its county receive immediate emergency services... **This primary responsibility is limited to the programs, services and resources that the county board of supervisors... is reasonably able to provide within the limits of available state and federal funds and of county funds required to be appropriated to match state funds.**

Chapter 51 - Mental Health Act

- ▶ 51.42(3)(ar)4 Wisconsin Statutes:
Within the limits of available state and federal funds and of county funds required to be appropriated to match state funds, provide for the program needs of persons suffering from mental disabilities, including mental illness, developmental disabilities, alcoholism or drug abuse, by offering the following services...

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Spending on Human Services Programs

- State provides mandate and designates responsibility to counties to provide services
- State says only need to provide services to extent state, federal and matching funds are available
- Therefore, do counties need to spend hundreds of millions in property and sales tax revenue on human services programs?
- What about services not listed in statute e.g., prevention programming?



Board Roles and Responsibilities

The Human Services Board



Human Services Board

- ▶ Wis. Stat. 59.23 (4)
 - ▶ Composition
 - ▶ Appointment
 - ▶ Terms
- ▶ Wis. Stat. 59.23 (5m)
 - ▶ Powers and Duties



Human Services Board

- ▶ Powers and Duties
 - ▶ Appoint committees of residents to advise board
 - ▶ Recommend program priorities and policies; identify unmet needs; prepare short-term and long-term plans and budgets
 - ▶ Prepare a proposed budget for submission to the county administrator
 - ▶ Advise human services director regarding purchasing and providing services and the selection of vendors
 - ▶ Develop board operating procedures
 - ▶ Comply with state requirements
 - ▶ Assist in arranging cooperative working agreements with persons providing health, education, vocational, or welfare services

Human Services Board – Roles and Responsibilities

- Same concepts as apply to the county board

County Board Functions

- Collaboratively oversee county operations
 - Set expectations, evaluate progress
- Regulate within statutory authority
- Involve, represent, and be accountable to the public
- Cooperate with other governments
- Focus on the long term, rather than the short term
 - Establish the county's vision

Board Member Functions

- ▶ A supervisor's authority is collective, rather than individual
- ▶ "Supervisor" is a historical, not a descriptive, term
- ▶ Do "supervisors" actually "supervise" anything?

Board Member Functions

- ▶ Supervisors serve primarily a legislative function
 - ▶ Differs from the commission form of county government
- ▶ The legislative function means policymaking through:
 - ▶ Law making (ordinances and resolutions)
 - ▶ Budgetary approval
 - ▶ Cooperative decision-making

How the Board Makes Policy

- Plans
- Budgets
- Ordinances and Resolutions

Committee Functions

- ▶ Perform preliminary work on policies before taken up by the full board
- ▶ Collaborative policy oversight for departments and offices
- ▶ Review and make budget recommendations
- ▶ Draft ordinances and resolutions
- ▶ Access staff expertise
- ▶ Focus on policy development

Committee Chair

- ▶ Leadership role for matters under the committee's jurisdiction
- ▶ Authority to:
 - ▶ Set the agenda
 - ▶ Preside at meetings
 - ▶ Make reports and recommendations on the committee's behalf

In Summary

- ▶ The board's primary function is to ENACT POLICY!

Policy v. Administrative/Operations

- ▶ Policy (Board) = What and Why
- ▶ Administration/Operations (Staff) = How, When, and Where
- ▶ OAG: The decision to enter into a public works contract is policy; BUT, the administration of the contract terms is a management function

Policy v. Administration/Operations

- ▶ Policy
 - ▶ What: Will we fund new highway equipment?
 - ▶ Why: Is it a necessary service to our citizens?
- ▶ Administration/Operations
 - ▶ How: How will we plow the roads?
 - ▶ When: When will we start repairs?
 - ▶ Where: Where will we fill potholes?

Policy (Board)

- ▶ Related to overall mission and purpose
- ▶ Requires vision
- ▶ Longer term
- ▶ Addresses key issues
- ▶ Strategy development

Operations (Staff)

- ▶ Implementation of policies and strategies
- ▶ Shorter term
- ▶ Day to day operations
- ▶ Related to smaller functions
- ▶ Addresses department or individual issues
- ▶ Requires attention to detail
- ▶ Requires specialized training

Staff v. Board

➤ Staff

- Education
- Experience
- Background checked
- Bonded
- Professionally current
- Professional associations

➤ Board

- Elected by people
- Local connection

Leadership Roles

- ▶ Department heads have a leadership role within their departments subject to the policies and procedures set by the county executive, administrator, and/or the board of supervisors
- ▶ Individual supervisors have no management or leadership role outside of the board, as well as committees or commissions on which a supervisor sits
- ▶ An individual supervisor's authority is collective as a member of the board



➤ <https://www.youtube.com/watch?v=8WcqGMzy1s0>

Working Together as a Goal

- ▶ Between County Board Members and the Administrative Team
 - ▶ Know your job and try not to interfere with that of the administration
 - ▶ Devote the time needed to do a good job; read the background materials the administration prepares
 - ▶ Admit what you do not know
 - ▶ Do not jump to conclusions; instead, hear and weigh all the facts

Working Together as a Goal

- ▶ Between County Board Members and the Administrative Team
 - ▶ Do not make promises outside board meetings, not only for legal reasons, but also out of respect for the ethics of the situation and regard for the other board members, the administration and employees
 - ▶ Listen to what your constitutional officers and employees have to offer and let them know you are listening

Working Together as a Goal

- ▶ Between County Board Members and the Administrative Team
 - ▶ If someone complains to you about a member of the administration, listen but do not automatically agree. Being supportive of the administration shows that you have confidence in yourself and in the county management team. If the complaint is serious, ask the person to put it in writing and ask the board as a whole to analyze it in light of the appropriate committee structure.

Working Together as a Goal

- ▶ Staff has an obligation to remain “politically neutral” – they should never take a position based on politics
- ▶ Supervisors should not assume staff are “taking a side” if the answer they receive on a professional question is not what they hoped for

Key Points to Remember

- ▶ Individual county supervisors have no management or leadership role outside of county committees or commissions – do not micromanage
- ▶ County administration and department heads are to implement the policies and procedures of the board
- ▶ Micromanaging stifles productivity of county operations
- ▶ The board & administrative team working cohesively & cooperatively provides the best chance of success in meeting the needs of county residents



Discussion/Questions

SUMMARY OF REVENUE SOURCES IN THE DEPARTMENT OF HUMAN SERVICES

Economic Support Administration Funding

The Income Maintenance (IM) funding allocation from the Department of Health Services is for department costs to administer the Medicaid (BadgerCare) Food Share (SNAP) and Caretaker Supplement (CTS) benefits as well as designated funds for program integrity (Fraud). This funding does not include the actual member benefits as those are paid directly by the State. The allocation to the county is a combination of federal and state resources. Costs that exceed the contract are funded at 50% Federal match. Beginning in 2016 enhanced federal funding increased the match to 60% - 65% for allowable Medicaid Services. These are not part of the IM contract and are not guaranteed beyond 2021. There is a direct relation to the amount of county levy and the potential funds issued with the enhanced federal funding. Since 2019, additional federal Random Moment Sampling (RMS) funds have been distributed. DHS has retained some of that funding for improvement initiatives and passed some along to the consortia. RMS funding is not guaranteed each year. Significant county funding supports IM. IM is administered through Consortia and funding agreements/MOU's are individualized by consortia.

Refunds/Collections on Economic Support Services

The State Collections Unit collects all overpayments established by the counties for IM program benefit errors. The counties are reimbursed 15% on actual re-payments from collections. This funding is distributed through the consortia and is passed to counties based on individual agreements.

Medicaid Estate Collections

Medicaid Estate Collections earn the county 5% of the recoveries made under the recovery program because of the agency's efforts to collect voluntary recoveries, or liens against homes and estates. This is added to the Income Maintenance administration county allocation of the state/county contract and are again distributed based on the consortia model.

Day Care Certification and Administration

The Child Care contract with the Department of Children and Families has three funding areas supported by both federal and state resources.

Child Care Certification is used to regulate in home day care, including background checks, home visits and administrative work. Counties are able to charge a fee for this service. The amount of funding is dependent on the number of certified providers in your county and is sum certain.

Child Care Administration is used to administer the Child Care (CC) subsidy program, Wisconsin Shares. The funding is based on the number of CC cases from prior years. Although the allocations are sum certain there has been a reallocation of funds at the end of the contract. This "de-ob / re-ob" process is not guaranteed each year and is only able to be achieved when other counties underspend their contract allocation. Although DCF has been predicting since 2017 there will not be enough reallocation funding available to make all Counties "whole", this continues to occur in the most recent contract year. Child Care benefits are made directly by the State and not included in the county allocations.

The final allocation category is Child Care Fraud funding and is sum certain. This allocation is used to prevent and investigate childcare fraud by consumers and providers.

Any cost overruns in any of the three allocation categories are county tax levy.

Wisconsin Home Energy Assistance Program (WHEAP) Administration

The Department of Administration issues contracts to local counties for the administration of this “energy assistance” program. The program is funded via both state and federal resources as well state energy providers via consumer’s contributions (Public Benefits). Yearly service/administration allocations are sum certain. Actual benefits paid to or on behalf of eligible households are issued by DOA. This program be subcontracted out. The county incurs some administrative costs to oversee the program when services are subcontracted.

Child Support

The contract Child Support services is with the Department of Children and Families. The Child Support program is funded by a number of state and federal sources. The yearly base allocation is awarded based upon caseload size and the agencies prior performance in federal standards. Expenses over the allocation can be matched at 66% Federal Match funding. The Child Support program also collects revenues from the collection of Medical Support Liability, reimbursement of genetic lab fees, service of process fees and other fees. Additional non-IV-D revenue may include a fee for printed payment histories, certified payment histories, sending of income withholding orders, and crediting account for direct payments and is each County’s decision. There could be other services counties decide to charge for non-IV-D cases only.

Community Aids

This is the basic allocation of funds for county human services departments. It is used as a general, non-earmarked allocation to be used as match on other Federal programs such as the Medical Assistance Waivers and it pays for part of the cost of programs where earmarked allocations are not adequate such as Youth Aids and Birth to Three. It is also the source of payment for some services for which there is no other source of revenue. While at one time Community Aids was intended to fund county human services at 100%, most counties are in significant overmatch.

Kinship Care

Benefits for Kinship Care are provided in a sum certain allocation which is 60% Federal and 40% State. There is a process toward the end of the year for counties who are underspending their allocation to reallocate to counties that are overspending their allocation.

The costs to administer the program are only partly reimbursed by the state with a small allocation for assessments. The administrative dollars are 100% Federal.

Coordinated Services Team (CST) Grant

This grant became available in 2014 to transition the CST initiative to a statewide program. This grant is sum certain and funds CST Service Coordination along with program related expenses. County match of 20% is required.

Youth Aids, Alcohol and Other Drug Abuse (AODA) Youth Aids

Youth Aids is a sum certain allocation used to pay for the costs of kids placed in State Correctional facilities as well as community services for delinquents.

Promoting Safe and Stable Families (PSSF)

This is a sum certain allocation which is 100% Federal funds. There are restrictions on the use of funds between family support, preservation, and reunification. This program requires Counties submit a plan.

Targeted Safety Support Program (TSSF)

This funding source requires Counties to submit a plan of spending. Use of funds are to address in home safety to avoid out of home placements. A family must have a safety plan to qualify for this funding. This is a sum certain allocation awarded from the plan.

Community Intervention Program

Community Intervention Program funding is an allocation based on the prior year's youth placements in juvenile facilities. An application must be completed each year to receive the funds. This program runs on a Federal Fiscal Year.

IV-E Legal Services, Legal Representation and eWiSACWIS Funding

This funding must be applied for, typically the application comes in September and is due the end of October. IV-E Legal Services for CHIPS and out-of-home (OOH) care are reimbursed at 27% of the total costs. IV-E reimbursement limit for Termination of Parental Rights (TPR) and Adoption activities is limited to 34% of the total costs. IV-E eWiSACWIS reimbursement for staffing and equipment is limited to 38% and changes based on RMS results. In 2020 IV-E Legal Representation for parents and children was added and is limited to 39% for TPR and 26% for out-of-home care (OHC), guardianship and Children in Need of Protection and/or Services (CHIPS).

Substance Abuse Block Grant

A sum certain allocation that is 100% federally funded; used to fund AODA treatment and prevention activities. There are funding restrictions including 20% having to be spent on prevention activities and 10% on women.

Intoxicated Driver Program Supplement

This is a funding source that is applied for each year to assist with the county deficit spending in the Intoxicated Driver Program.

Mental Health Block Grant

This is a small sum certain allocation that is 100% Federal money and is used to offset some purchased services for persons with mental illness and, if additional dollars are available, for some part of Integrated Services costs. The block grant is not a large funding source for Mental Health. Additional revenues for Mental Health also include private insurance, Medicaid and private collections.

Comprehensive Community Services (CCS)

This is a recovery centered Medicaid program serving adults and children who are functionally and diagnostically eligible. 100% funding for counties that are regionalized. The State reimburses the non-Federal portion up to State approved rates.

Crisis Intervention Services

This is a Medicaid covered program that is reimbursed by the State to cover up to 100% of the costs beginning in 2020. Counties must be part of a consortium to be eligible for the 100% funding. The definition of what is considered a consortium is loosely defined.

Additional Program Revenue through Medicaid

Federal share for the following programs are reimbursed at varying amounts dependent on your costs. You receive some of the unreimbursed back through WIMCR:

- Community Support Program (CSP),
- Outpatient Mental Health and Substance Abuse Services in the home or community for adults, and
- Targeted Case Management

Community Mental Health Grant

In 2016, the State consolidated base funding for several community mental health allocations into a single allocation for community programs under the state's community aids program. In addition, a portion of the Community Options Program (COP) funding was transferred to the newly created Community Mental Health Grant. There are twenty-two identified program areas to which we can apply these funds. The funds must be used for services to adults or children with a mental health diagnosis who have or are at risk of having a serious mental illness (SMI) or a serious emotional disorder (SED).

Birth to Three

This program is federally mandated. It is a sum certain allocation which is 100% Federal funding that offsets some of the costs of the Birth to Three Program. This program has a MOE (maintenance of effort) attached to it that must be met each year.

Children's Long Term Support Waiver

This is a Medical Assistance Waiver and serves children with physical disabilities, developmental disabilities and mental illness. This funding source was introduced in 2005. In 2016, Autism services shifted to a Medicaid card service.

Counties are working with the State to eliminate county waiting lists. According to State formulas, counties may receive additional funding for serving clients coming off of the waitlist. While counties received some Fully Funded waiver slots to serve children removed from the wait list in past years, this new initiative is developed to completely eliminate current wait lists for each county. As the children age out of those Fully Funded slots that were awarded in the past, they are being closed. As of the end of 2020 the waitlist was not eliminated, although originally projected to be done in 2018. The State fully funded all the children on the waitlist and Counties have until March to enroll them. Each month kids who have been deemed functionally eligible wait on enrollment until the beginning of the next month when 300 slots are opened to enroll. It is important to note that Counties have an MOE based on levy put in the program in 2016.

Children’s Community Options Program (CCOP)

In 2016, the mental health and substance abuse portion of COP was moved to Community Mental Health Grant. The Family Support Program was merged with the children’s portion of COP and renamed Children’s Community Options Program (CCOP). This is an entirely State funded program where we receive a sum certain allocation. We can use it for services not covered under the Waiver or as match to bring in the additional Federal funds under the Waiver programs, or for children who met the eligibility guidelines for CCOP but not the Waiver. There is a Waiver mandate requiring Waiver funding be used before any CCOP funding is utilized if a child qualifies for both programs.

Alzheimer’s Family Caregiver Support Program (AFCSP)

This is a 100% State sum certain allocation that can be used to support caregivers of persons living with Alzheimer’s disease and other dementia. This funding source can fund services for the consumer to provide relief to the caregiver.

Adult Protective Services

100% State sum certain allocation. This funding was made available after Family Care implementation for county responsibility in investigating reports of alleged abuse, neglect, or financial exploitation of vulnerable adults.

Congregate, Home Delivered Meals and Nutrition Services Incentive Program (NSIP)

Funding to provide nutrition services that assist older citizens in the county to live independently, promote better health, and reduce isolation. The funding source assists with funding for home delivered meals five days per week and different congregate meal sites. Created by the Federal Government in the Older Americans Act. Provided by State and Federal funds. NSIP provides funding for the purchase of food for use in the meal program. The funding varies from year to year.

Title IIIB - Supportive Services; Title IIID - Preventive Health; Title IIIE - Family Caregiver Support

These various funding sources are received through a contract with the Greater Wisconsin Agency on Aging Resources (GWAAR). They provide for several aging services such as fall prevention, health and nutrition education, medication management, caregiver support for those providing assistance to elderly loved ones, supportive home care, respite, chore services, and bathing services. These also are Older Americans Act revenue sources. The GWAAR contract also includes the State Senior Community Services grant used for services and support for seniors including meals.

85.21 Specialized Transportation

The 85.21 grant is received each year through application to the Department of Transportation and funds rural transit system for the county. Funding is for the Specialized Medical Vehicle system and a portion of our volunteer driver program. There is also a grant process for 5310 funding.

5310 Vehicle Grant and 5310 Operation Assistance Grant

These programs are funded in part by the Federal Transit Administration, FTA, as authorized under 49 U.S.C. > Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities and is

administered as an annual competitive application process. Local match is provided by the grantee as a cash match and/or in-kind services available to support the project.

Elderly Benefit Specialist, Disability Benefit Specialist

Funding for Benefit Specialists to offer information, advice and assistance to older or disabled individuals related to individual eligibility for public benefits and services as well as housing and other financial concerns. Provides legal advice and representation by an attorney, paralegal or law student as supervised by an attorney. The Elderly Benefit Specialist was created out of the Older Americans Act by the Federal Government.

Aging and Disability Resource Center (ADRC)

These funds provide seniors and those with disabilities a one-stop customer service center for information, advice and seamless access to opportunities and options counseling. These are sum certain funds, with a portion of expenditures matched with federal Medicaid funding to increase revenue. Some ADRC's have been awarded Dementia Care Specialist funding in addition to the ADRC dollars.

Transportation Contracts

Since the implementation of a statewide Medicaid transportation system, we have entered into contracts with nursing homes, assisted living facilities, and Managed Care Organizations for our ambulatory and non-ambulatory van service.

Wisconsin Medicaid Cost Reporting (WIMCR)

This is the process the state uses to claim the Medicaid federal match dollars for county costs for providing certain community-based Medicaid services. Through this process, counties receive a majority, but not all, of the federal gain from the WIMCR process. The county bills Medicaid through the usual fee-for-service process and is reimbursed at the basic fee-for-service Medicaid rate. Annually counties submit reports electronically showing the full cost for providing the services. Each year the state reconciles and makes an adjustment to the county to make up for the difference between the fee-for-service reimbursement and the full cost of the service.

Eau Claire County Human Services Financial Overview

For December 2021

Human Services Board Meeting

Held on 6/6/2022

The December financials indicate a deficit for the Department. The overall financial projection of the program areas are within budget.

Financial Surplus/(Deficit) Estimate: (\$153,889)

Factors to note impacting budget - favorable and unfavorable

Staff Vacancies:

 Incurring personnel cost savings

 Unable to accrue budgeted revenue due to vacant positions

Operations:

 Increase of Adult Placements

 High Cost Placements

Eau Claire County
 Department of Human Services
 Preliminary Financial Statement w/o CCS Estimated for the Period
 January 1, 2021 through December 31, 2021

Revenue	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	8,637,999	8,637,997	2	8,637,999	-
04-Intergovernment Grants and Aid (State & Federal Grants)	11,200,117	10,817,191	817,233	11,634,424	434,307
05-Intergovernmental Charges for Services (Medicaid & Other Counties)	4,832,242	4,608,847	1,587	4,610,434	(221,808)
06-Public Charges for Services (Client Contributions)	813,775	778,572	25,465	804,037	(9,738)
09-Other Revenue (TAP & Misc.)	348,142	213,011	-	213,011	(135,131)
Total Revenue	25,832,275	25,055,618	844,287	25,899,905	67,630

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	9,353,471	8,890,335	-	8,890,335	463,136
02-OT Wages	-	67,281	-	67,281	(67,281)
03-Payroll Benefits	4,311,275	3,953,802	-	3,953,802	357,473
04-Contracted Services	11,583,723	12,461,622	168,589	12,630,211	(1,046,488)
05-Supplies & Expenses	493,246	317,259	-	317,259	175,987
07-Fixed Charges (Liability Insurance)	81,997	82,292	-	82,292	(295)
09-Equipment	8,564	112,614	-	112,614	(104,050)
10-Other	-	-	-	-	-
Total Expenditures	25,832,276	25,885,206	168,589	26,053,795	(221,519)

Excess (Deficiency) of Revenue over Expenditures **(153,889)**

December 2020 Excess / (Deficiency) 367,779

Revenue Adjustments Included:

Tax Levy	2
State/Federal	817,233
MA/Other Counties	1,587
Public Charges	25,465
Other	-
	<u>\$ 844,287</u>

Expense Adjustments Included:

Overhead	-
Wages and Benefits	-
Add'l Contracted Services	7,616
Non-CCS Program Expenses	160,973
Liability & Work Comp Insurance	-
IT Equipment-Quarterly Allocation	-
	<u>\$ 168,589</u>

Eau Claire County
 Department of Human Services
 Preliminary CCS Financial Statement Estimated for the Period
 January 1, 2021 through December 31, 2021

Revenue	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	-	-	-	-	-
04-Intergovernment Grants and Aid (State & Federal Grants)	-	-	-	-	-
05-Intergovernmental Charges for Services (Medicaid & Other Counties)	7,585,590	7,834,390	(2,457,013)	5,377,377	(2,208,213)
06-Public Charges for Services (Client Contributions)	42,000	25,465	(25,465)	0	(42,000)
09-Other Revenue	-	-	-	-	-
11-Fund Balance Applied (2021 CCS Est.Gap, Rec'd 2022)	2,821,250	-	-	-	(2,821,250)
Total Revenue	10,448,840	7,859,855	(2,482,478)	5,377,377	(5,071,463)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	3,239,432	2,743,495	-	2,743,495	495,937
02-OT Wages	-	3,085	-	3,085	(3,085)
03-Payroll Benefits	1,382,855	1,054,162	-	1,054,162	328,693
04-Contracted Services	5,224,531	3,127,230	(160,973)	2,966,257	2,258,274
05-Supplies & Expenses	37,976	18,785	-	18,785	19,191
09-Equipment	-	48,870	-	48,870	(48,870)
AMSO Allocation	564,046	434,974	-	434,974	129,072
Total Expenditures	10,448,840	7,430,601	(160,973)	7,269,628	3,179,212

Excess (Deficiency) of Revenue over Expenditures **(1,892,251)**

Revenue Adjustments Included:

MA	-
CCS 2019-2020 WIMCR	(2,457,013)
Public Charges	(25,465)
	<u>\$ (2,482,478)</u>

Expense Adjustments Included:

Accrued Wages & Benefits	-
Non-CCS Program Expenses	(160,973)
Add'l CCS Expenses	-
IT Allocation	-
	<u>\$ (160,973)</u>

**DHS Child Alternate Care and Adult Institutions
For Preliminary Period Ending 12/31/2021**

Children in Foster Care (FC) /Treatment Foster Care (TFC)/Residential Care Centers (RCC)/Group Homes (GH)					
	2021				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
FC	2	73	\$ 106,731	\$ 99,304	\$ 7,427
TFC	0	11	\$ 14,702	\$ 45,391	\$ (30,689)
GH	1	3	\$ 15,750	\$ 29,909	\$ (14,159)
RCC	1	7	\$ 106,903	\$ 126,724	\$ (19,821)
December Total	4	94	\$ 244,086	\$ 301,329	\$ (57,243)
<i>2021 YTD Total</i>	<i>82</i>	<i>193</i>	<i>\$ 2,929,032</i>	<i>\$ 3,328,565</i>	<i>\$ (399,533)</i>
<i>2020 YTD Comparison</i>	<i>97</i>	<i>225</i>	<i>\$ 3,080,552</i>	<i>\$ 3,130,509</i>	<i>\$ (49,957)</i>

Juvenile Corrections (Lincoln Hills/Copper Lake)					
	2021				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
December	0	0	\$ -	\$ -	\$ -
2021 YTD Total	0	0	\$ -	\$ -	\$ -
<i>2020 YTD Comparison</i>					

Institute for Mental Disease					
	2021				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
TCHCC	2	12	\$ 17,283	\$ 89,866	\$ (72,583)
Winnebago	6	9	\$ 36,044	\$ 156,927	\$ (120,883)
Mendota	0	0	\$ 15,447	\$ -	\$ 15,447
December Total	8	21	\$ 68,775	\$ 246,793	\$ (178,018)
2021 YTD Total	74	87	\$ 825,297	\$ 1,767,987	\$ (942,690)
<i>2020 YTD Comparison</i>	<i>61</i>	<i>72</i>	<i>\$ 777,045</i>	<i>\$ 1,766,619</i>	<i>\$ (989,574)</i>

Northern/Southern Centers (Adult/Child Developmentally Disabled (DD))					
	2021				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
December	0	0	\$ -	\$ -	
2021 YTD Total	0	0	\$ -	\$ -	
<i>2020 YTD Comparison</i>					

Adult Family Homes (AFH) & Community Based Residential Facility (CBRF)					
	2021				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
AFH	0	11	\$ 29,588	\$ 196,314	\$ (166,726)
CBRF	0	18	\$ 142,799	\$ 159,522	\$ (16,724)
December Total	0	29	\$ 172,387	\$ 355,837	\$ (183,450)
2021 YTD Total	61	65	\$ 2,068,643	\$ 2,535,906	\$ (467,263)
<i>2020 YTD Comparison</i>	<i>32</i>	<i>69</i>	<i>\$ 2,135,418</i>	<i>\$ 1,944,747</i>	<i>\$ 190,671</i>

**ALTERNATE CARE REPORT
UPDATED - Month Ending December 2021**

Level of Care	November			December			YTD			Ave Cost per Day
	Placements	Clients	Days	Placements	Clients	Number of Days	Placements	Clients	Days	
Foster Care	5	80	2,257	2	73	2,193	45	140	30,927	\$42
Therapeutic Foster Care	0	13	366	0	11	319	13	25	4,863	\$137
Group Home	1	3	65	1	3	84	11	10	517	\$299
Residential Care Center	0	9	247	1	7	180	13	18	2,324	\$523
Total	6	105	2,935	4	94	2,776	82	193	38,631	

Level of Care	Expense						Revenue			
	Adjusted Budget - November	November Expense	November - Percent Used	Adjusted Budget - December	December Expense	YTD Expense	YTD Percent Used	Adjusted Budget	YTD Revenue	Percent Collected
Foster Care	\$ 1,174,041	\$ 105,408	101.6%	\$ 1,280,772	\$ 99,304	\$ 1,292,093	100.9%	\$ 347,341	\$ 330,739	95.2%
*Therapeutic Foster Care	\$ 161,724	\$ 50,659	383.8%	\$ 176,426	\$ 45,391	\$ 666,142	377.6%	\$ 3,000	\$ 32,941	1098.0%
Group Home	\$ 173,250	\$ 18,024	72.1%	\$ 189,000	\$ 29,909	\$ 154,813	81.9%	\$ 10,000	\$ 10,923	109.2%
Residential Care Center	\$ 1,175,928	\$ 112,232	92.6%	\$ 1,282,831	\$ 126,724	\$ 1,215,518	94.8%	\$ 42,000	\$ 57,762	137.5%
Total	\$ 2,684,943	\$ 286,323	112.7%	\$ 2,929,029	\$ 301,329	\$ 3,328,565	113.6%	\$ 402,341	\$ 432,365	107.5%

Notes: *Treatment Foster Care is over budget primarily due to CLTS placements. In previous years, all CLTS placement costs were expensed and budgeted under Foster Care.

**COVID payments and revenues totaled \$9,425 for 2021.

**Eau Claire County
Department of Human Services
YTD Preliminary Program Expenditures Summary
Thru December 31, 2021**

Program	Monthly				YTD				Year End	
	Budgeted		Adjusted Actual		Budgeted		Adjusted Actual		Annualized	
	Expenses	Targeted %	Expenses	% of Expenses Utilized	Expenses	Targeted %	Expenses	% of Expenses Utilized	Expenses	% Annualized
1. Community Care & Treatment of Children who are Abused or Neglected	\$569,110	8.3%	\$609,479	8.9%	\$6,829,320	100.0%	\$6,988,432	102.3%	\$6,988,432.3	102.3%
2. Community Care & Treatment of Adults & Children with BH Issues	\$1,609,925	8.3%	\$1,496,510	7.7%	\$19,319,102	100.0%	\$16,828,936	87.1%	\$16,828,936.0	87.1%
3. Community Care & Treatment of Developmentally Disabled or Delayed	\$138,553	8.3%	\$225,631	13.6%	\$1,662,631	100.0%	\$1,615,722	97.2%	\$1,615,722.0	97.2%
4. Community Care and Treatment of Youth Offenders	\$304,739	8.3%	\$361,827	9.9%	\$3,656,865	100.0%	\$3,878,691	106.1%	\$3,878,691.3	106.1%
5. Protection of Vulnerable Adults	\$94,772	8.3%	\$124,646	11.0%	\$1,137,264	100.0%	\$1,029,491	90.5%	\$1,029,490.9	90.5%
6. Financial & Economic Assistance	\$291,653	8.3%	\$229,014	6.5%	\$3,499,835	100.0%	\$2,975,134	85.0%	\$2,975,134.1	85.0%
Total	\$3,008,751	8.3%	\$3,047,107	8.4%	\$36,105,017	100.0%	\$33,316,407	92.3%	\$33,316,407	92.3%

Eau Claire County Human Services Financial Overview

For March 2022

Human Services Board Meeting

Held on 6/6/2022

The March financials indicate a deficit for the Department. The overall financial projection of the program areas are within budget. A majority of the revenues are estimated.

Financial Surplus/(Deficit) Estimate: (\$335,925)

Factors to note impacting budget - favorable and unfavorable

Staff Vacancies:

Incurring personnel cost savings

Unable to accrue budgeted revenue due to vacant positions

Operations:

High Costs Institutional Placements

High Cost Placements

Eau Claire County
 Department of Human Services
 Financial Statement w/o CCS Estimated for the Period
 January 1, 2022 through March 31, 2022

Revenue	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	2,202,048	2,202,048	(1)	2,202,048	-
04-Intergovernment Grants and Aid (State & Federal Grants)	2,752,916	945,647	1,943,482	2,889,129	136,213
05-Intergovernmental Charges for Services (Medicaid & Other Counties)	1,749,514	302,747	688,292	991,039	(758,475)
06-Public Charges for Services (Client Contributions)	243,381	106,965	90,534	197,500	(45,881)
09-Other Revenue (TAP & Misc.)	55,249	9,620	14,598	24,218	(31,030)
Total Revenue	7,003,107	3,567,027	2,736,906	6,303,934	(699,173)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	2,700,245	1,785,651	447,458	2,233,109	467,136
02-OT Wages	-	11,671	-	11,671	(11,671)
03-Payroll Benefits	1,233,034	892,100	170,805	1,062,905	170,129
04-Contracted Services	2,874,027	3,005,848	186,654	3,192,501	(318,474)
05-Supplies & Expenses	129,156	66,501	-	66,501	62,655
07-Fixed Charges (Liability Insurance)	35,069	34,568	-	34,568	502
09-Equipment	31,575	38,604	-	38,604	(7,029)
10-Other	-	-	-	-	-
Total Expenditures	7,003,107	5,834,942	804,917	6,639,859	363,248

Surplus/ (Deficiency) of Revenue over Expenditures \$ (335,925)

March 2021 Surplus / (Deficiency) \$ (269,760)

Revenue Adjustments Included:

01-Tax Levy	
04-Grants and Aid	1,943,482
05-Charges for Services	688,292
06-Public Charges	90,534
09-Other	14,598
	<u>\$ 2,736,907</u>

Expense Adjustments Included:

01-Regular Wages	447,458
02-OT Wages	
03-Payroll Benefits	170,805
04-Contracted Services	186,654
05-Supplies & Expenses	
07-Fixed Charges	-
09-Equipment	-
10-Other	
	<u>\$ 804,917</u>

Eau Claire County
 Department of Human Services
 CCS Financial Statement Estimated for the Period
 January 1, 2022 through March 31, 2022

Revenue	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	-	-	-	-	-
04-Intergovernment Grants and Aid (State & Federal Grants)	31,550	-	-	-	(31,550)
05-Intergovernmental Charges for Services (Medicaid & Other Counties)	2,623,823	2,889,348	(1,192,348)	1,697,000	(926,823)
06-Public Charges for Services (Client Contributions)	9,325	3,709	(3,709)	0	(9,325)
09-Other Revenue	-	-	-	-	-
11-Fund Balance Applied (2022 CCS Est.Reconciliation, Rec'd 2023)	174,322	-	-	-	(174,322)
Total Revenue	2,839,020	2,893,057	(1,196,057)	1,697,000	(1,142,019)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	888,248	542,291	157,158	699,450	188,798
02-OT Wages	-	539	-	539	(539)
03-Payroll Benefits	372,490	208,753	46,936	255,689	116,800
04-Contracted Services	1,410,618	529,033	181,519	710,552	700,066
05-Supplies & Expenses	18,875	5,022	-	5,022	13,853
09-Equipment	9,392	2,598	-	2,598	6,793
AMSO Allocation	139,398	127,526	-	127,526	11,872
Total Expenditures	2,839,020	1,415,764	385,613	1,801,377	1,037,643

Surplus/ (Deficiency) of Revenue over Expenditures **\$ (104,377)**

Note: Any deficit at year end will be received after Reconciliation in December 2023

Revenue Adjustments Included:

01-Tax Levy	
04-Grants and Aid	
05-Charges for Services	(1,192,348)
06-Public Charges	(3,709)
09-Other	
	\$ (1,196,057)

Expense Adjustments Included:

01-Regular Wages	157,158
02-OT Wages	
03-Payroll Benefits	46,936
04-Contracted Services	181,519
05-Supplies & Expenses	
09-Equipment	
10-Other	
	\$ 385,613

**DHS Child Alternate Care and Adult Institutions
For Period Ending 03/31/2022**

Children in Foster Care (FC) /Treatment Foster Care (TFC)/Residential Care Centers (RCC)/Group Homes (GH)					
	2022				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
FC	4	70	\$ 105,167	\$ 97,383	\$ 7,784
TFC	2	10	\$ 49,917	\$ 38,259	\$ 11,658
GH	0	2	\$ 5,750	\$ 27,614	\$ (21,864)
RCC	0	7	\$ 71,067	\$ 111,034	\$ (39,967)
March Total	6	89	\$ 231,901	\$ 274,291	\$ (42,390)
<i>2022 YTD Total</i>	<i>18</i>	<i>106</i>	<i>\$ 695,703</i>	<i>\$ 821,145</i>	<i>\$ (125,442)</i>
<i>2021 YTD Comparison</i>	<i>17</i>	<i>130</i>	<i>\$ 732,257</i>	<i>\$ 751,280</i>	<i>\$ (19,023)</i>

Juvenile Corrections (Lincoln Hills/Copper Lake)					
	2022				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
March	0	0	\$ -	\$ -	\$ -
2022 YTD Total	0	0	\$ -	\$ -	\$ -
<i>2021 YTD Comparison</i>					

Institute for Mental Disease					
	2022				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
TCHCC	2	13	\$ 25,750	\$ 119,103	\$ (93,353)
Winnebago	15	20	\$ 41,193	\$ 125,650	\$ (84,457)
Mendota	0	0	\$ 10,298	\$ -	\$ 10,298
March Total	17	33	\$ 77,241	\$ 244,753	\$ (167,512)
2022 YTD Total	35	46	\$ 231,724	\$ 643,081	\$ (411,357)
<i>2021 YTD Total</i>	<i>17</i>	<i>26</i>	<i>\$ 159,982</i>	<i>\$ 315,875</i>	<i>\$ (155,893)</i>

Northern/Southern Centers (Adult/Child Developmentally Disabled (DD))					
	2022				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
March	0	0	\$ -	\$ -	
2022 YTD Total	0	0	\$ -	\$ -	
<i>2021 YTD Comparison</i>					

Adult Family Homes (AFH) & Community Based Residential Facility (CBRF)					
	2022				
	New Placements	Clients	Budget	Expense	(Over)/Under Budget
AFH	1	14	\$ 80,795	\$ 80,359	\$ 435
CBRF	0	9	\$ 134,425	\$ 61,064	\$ 73,361
March Total	1	23	\$ 215,220	\$ 141,423	\$ 73,797
2022 YTD Total	8	25	\$ 645,659	\$ 499,981	\$ 145,677
<i>2021 YTD Total</i>	<i>33</i>	<i>36</i>	<i>\$ 470,632</i>	<i>\$ 482,150</i>	<i>\$ (11,519)</i>

**ALTERNATE CARE REPORT
Month Ending March 2022**

Level of Care	February			March			YTD			Ave Cost per Day
	Placements	Clients	Days	Placements	Clients	Number of Days	Placements	Clients	Days	
Foster Care	5	73	1,928	4	70	2,072	13	83	4,073	\$73
Therapeutic Foster Care	0	9	226	2	10	291	3	13	535	\$221
Group Home	0	2	56	0	2	62	0	3	138	\$638
Residential Care Center	0	7	196	0	7	195	2	7	356	\$887
Total	5	91	2,406	6	89	2,620	18	106	5,102	

Level of Care	Expense						Revenue			
	Adjusted Budget - February	February Expense	February - Percent Used	Adjusted Budget - March	March Expense	YTD Expense	YTD Percent Used	Adjusted Budget	YTD Revenue	Percent Collected
Foster Care	\$ 210,333	\$ 99,719	95.8%	\$ 315,500	\$ 97,383	\$ 298,785	94.7%	\$ 102,750	\$ 38,211	37.2%
*Therapeutic Foster Care	\$ 99,833	\$ 34,667	80.3%	\$ 149,750	\$ 38,259	\$ 118,380	79.1%	\$ 11,100	\$ 5,601	50.5%
Group Home	\$ 11,500	\$ 24,942	525.9%	\$ 17,250	\$ 27,614	\$ 88,088	510.7%	\$ 4,000	\$ 6,891	172.3%
Residential Care Center	\$ 142,135	\$ 113,999	144.1%	\$ 213,202	\$ 111,034	\$ 315,892	148.2%	\$ 15,661	\$ 12,328	78.7%
Total	\$ 463,801	\$ 273,327	117.9%	\$ 695,702	\$ 274,291	\$ 821,145	118.0%	\$ 133,510	\$ 63,030	47.2%

Notes:

**Eau Claire County
Department of Human Services
YTD Program Expenditures Summary
Thru March 31, 2022**

Program	Monthly				YTD				Year End	
	Budgeted		Adjusted Actual		Budgeted		Adjusted Actual		Annualized	
	Expenses	Targeted %	Expenses	% of Expenses Utilized	Expenses	Targeted %	Expenses	% of Expenses Utilized	Expenses	% Annualized
1. Community Care & Treatment of Children who are Abused or Neglected	\$562,787	8.3%	\$675,387	10.0%	\$1,688,362	25.0%	\$1,760,983	26.1%	\$7,043,930.4	104.3%
2. Community Care & Treatment of Adults & Children with BH Issues	\$1,850,485	8.3%	\$1,512,594	6.8%	\$5,551,454	25.0%	\$4,313,497	19.4%	\$17,253,986.6	77.7%
3. Community Care & Treatment of Developmentally Disabled or Delayed	\$157,514	8.3%	\$104,068	5.5%	\$472,541	25.0%	\$324,464	17.2%	\$1,297,855.2	68.7%
4. Community Care and Treatment of Youth Offenders	\$340,142	8.3%	\$357,954	8.8%	\$1,020,425	25.0%	\$989,913	24.3%	\$3,959,653.6	97.0%
5. Protection of Vulnerable Adults	\$89,498	8.3%	\$84,555	7.9%	\$268,493	25.0%	\$257,031	23.9%	\$1,028,123.5	95.7%
6. Financial & Economic Assistance	\$280,284	8.3%	\$297,967	8.9%	\$840,852	25.0%	\$795,348	23.6%	\$3,181,393.9	94.6%
Total	\$3,280,709	8.3%	\$3,032,525	7.7%	\$9,842,127	25.0%	\$8,441,236	21.4%	\$33,764,943	85.8%