

Washburn County



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Tom Mackie, Chair

Health & Human Services Board

Health and Human Services Department

2012 ANNUAL REPORT

MISSION: PROMOTING A SAFE AND HEALTHY COMMUNITY

~We provide timely and accessible services

~We honor individual rights and differences

~We are committed to excellence

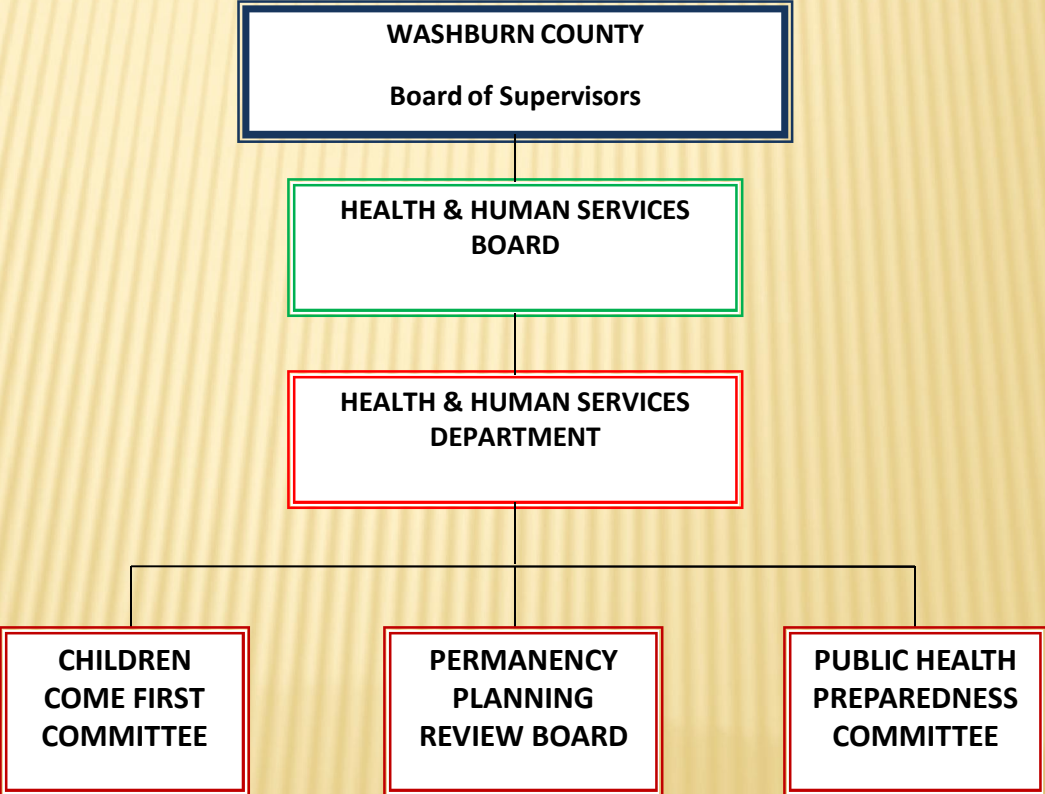
~We assess community needs

~We utilize well-trained and empathetic staff

~We maximize our resources

~We value teamwork and collaboration

HEALTH & HUMAN SERVICES GOVERNANCE STRUCTURE 2012



WASHBURN COUNTY HEALTH & HUMAN SERVICES BOARD 2011 – 2012

The Washburn County Health & Human Services Department is governed by the Health & Human Services Board, which consists of the following elected officials and community members:

County Board Supervisors:

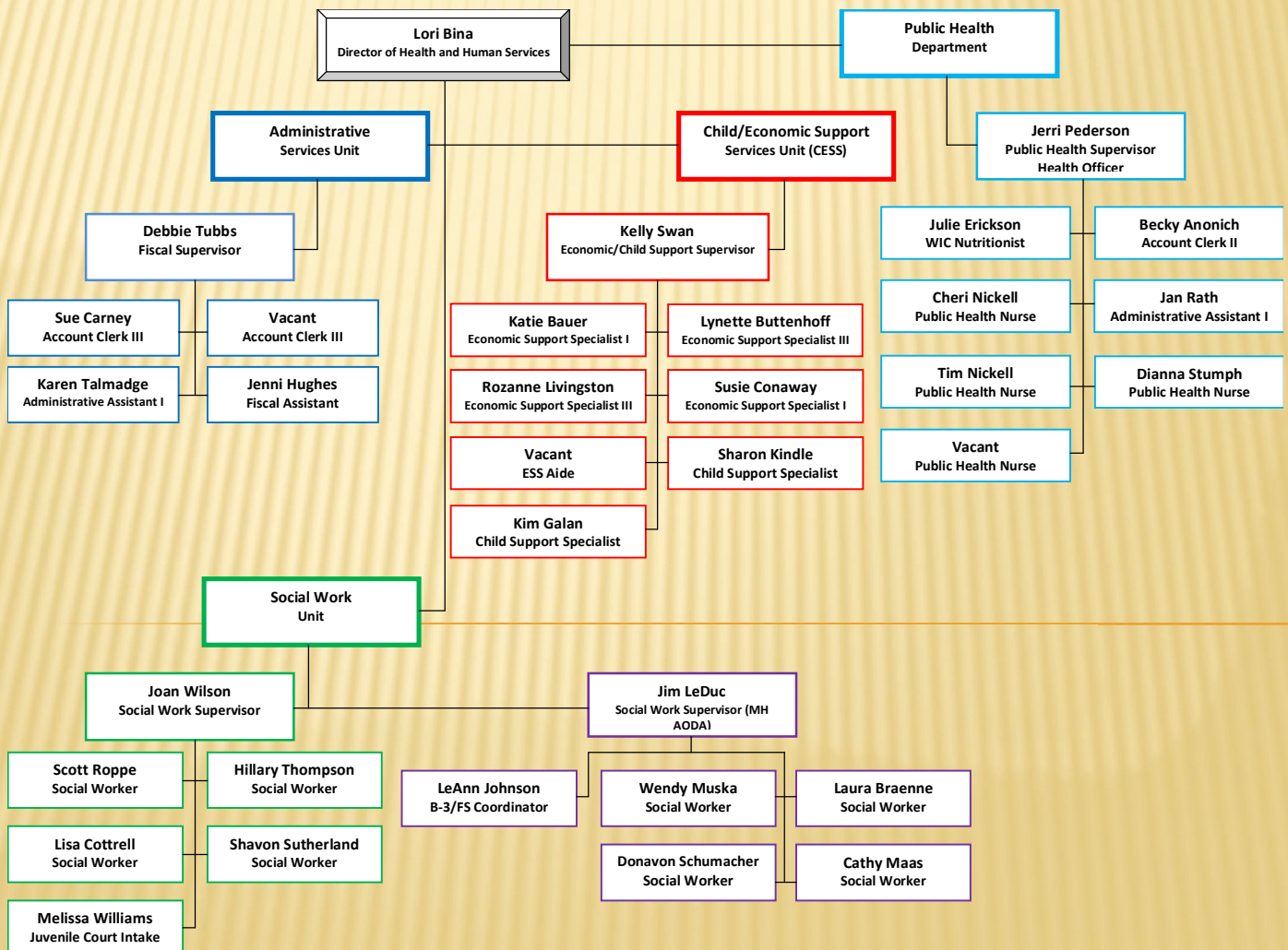
Thomas Mackie	Michael Don+Quinton
James Dohm	Robert Washkuhn
Larry Ford	Nell Lee
David Wilson	Andrew Eiche

Citizens:

Jean Serum
Bette Colville
Janice Tripp
Liane Wilkinson

The Board has primary responsibility for the oversight of the provision of a full range of comprehensive services by the Health & Human Services Department (HHSD), a legal entity established by state law.

WASHBURN COUNTY HEALTH & HUMAN SERVICES DEPARTMENT



FINANCIAL REPORT

2012 GROSS EXPENDITURES BY DEPARTMENT

PUBLIC HEALTH	16.5%	\$ 829,603
HUMAN SERVICES	66.2%	\$ 3,359,539
ECONOMIC SUPPORT	10.3%	\$ 527,078
<u>CHILD SUPPORT</u>	<u>7.0%</u>	<u>\$ 357,185</u>
TOTAL	100%	\$5,073,405

2012 SOURCES OF REVENUE

INTERGOVERNMENTAL	46.2%	\$2,344,489
TAX LEVY	31.2%	\$1,583,160
<u>DEPARTMENT (PUBLIC CHARGES)</u>	<u>22.6%</u>	<u>\$1,145,756</u>
TOTAL	100%	\$5,073,405

ECONOMIC SUPPORT SERVICES (ESS)

The Economic Support Services Section (ESS) provides a variety of financial supports and services to families and individuals. The programs include Child Care, Medicaid, Food Share and Energy Assistance. The ESS staff is located in the Ed Elliott building and provides assistance to families, adults and the elderly.

CHILD CARE

Staff certifies in-home family child care providers and provides financial assistance for families to aid in paying for the costs of child day care.

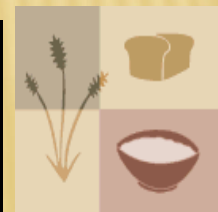


# of Families served	96
# of Children served	168
Total Payments	\$261,677

FOOD SHARE (FOOD STAMPS)

Food Share assists low-income families and individuals to buy food. The ES staff works with unemployed and underemployed Food Share recipients to assist them. The majority of the individuals served by Food Share are the elderly, the disabled and children. A total of \$3,762,127 in Food Share was issued for Washburn County in 2012. Up \$302,037 from 2011.

# of Cases Average/Month	1330
# of Adults/Year (unduplicated)	2620
# of Children/Year (unduplicated)	1624



MEDICAID/BADGERCARE

Medicaid is available to assist participants with the cost of health care. Medicaid is available to a variety of people, as shown in this table:

Category:	Avg. # Recipients/Month
BadgerCare Plus	3162
Elderly & Disabled*	960
Other**	270
Average per Month	4393



* EBD total includes: SSI, SSI related, Institutionalized, Waiver and MAPP.

**Other includes: MA Beneficiary, Well Woman, Foster Care, FPW, BC+ Basic . Waiting list.

ENERGY ASSISTANCE



Energy Assistance (EA) generally provides a one-time payment, based on family size, income and fuel usage, to assist with the cost of home heating. It can also provide crisis assistance and furnace repair and replacement.

Report based on FFY 12 – (10/1/11 – 9/30/12)

Regular EA Applications	1263
Households paid	1209
Amount paid	\$707,139
Average Payment	\$585
Total Persons (regular)	2787
Elderly Recipients	546
Disabled Recipients	504
Children 5 & younger	300
Crisis EA Households Paid	193
Elderly Recipients	77
Disabled Recipients	92
Children 5 & Younger	37
Crisis Payments/EA & Proactive*	\$75,947
Furnace Repair/Replacement	\$45,545
Households	27

*includes both Emergency Asst and Pro-active assistance

MISSION STATEMENT

The Washburn County Child Support Agency is the local agency designed to administer the child support program, which is a county effort in conjunction with the State and Federal government to collect child support from non-custodial parents.

This effort ensures that parents support their children financially and to foster family responsibility.

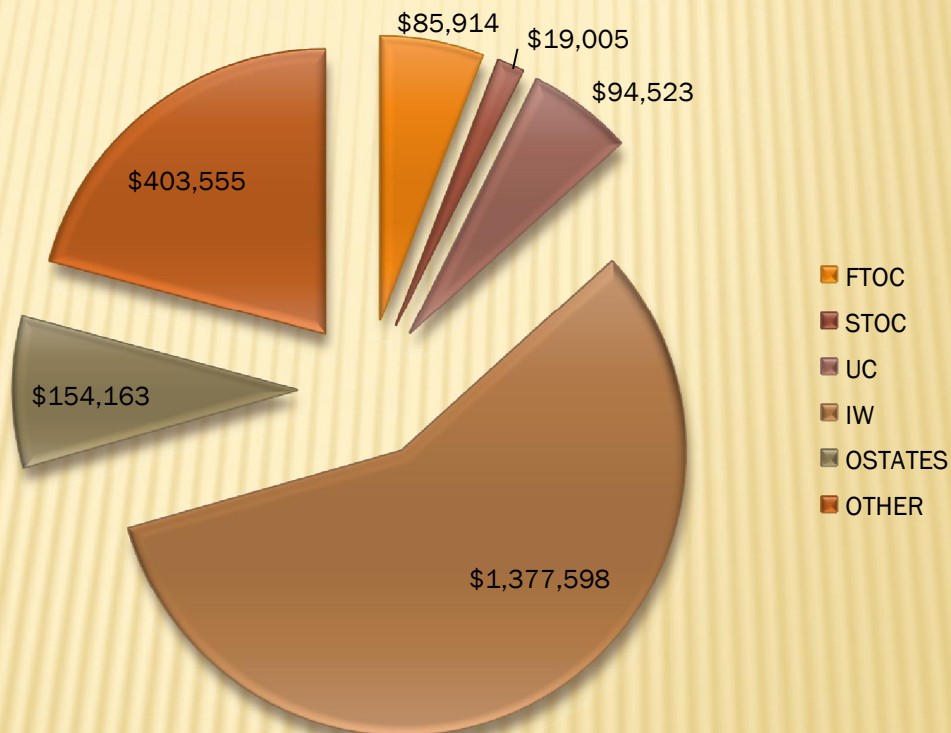
The program is provided for in Title IV-D of the Social Security Act, enacted in 1975, and in the laws of all 50 states. The Federal requirements of the State and local child support agencies are contained in the Code of Federal Regulations.



CHILD SUPPORT

	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Totals
FTOC	\$ 1,958	\$ 18,580	\$ 22,212	\$ 10,826	\$ 17,719	\$ 6,470	\$ -	\$ 3,162	\$ 4,522	\$ -	\$ 466	\$ -	\$ 85,914
STOC	\$ 796	\$ 5,218	\$ 5,526	\$ 5,276	\$ 964	\$ 879	\$ 140	\$ -	\$ -	\$ 206	\$ -	\$ -	\$ 19,005
UC	\$ 15,914	\$ 13,401	\$ 12,336	\$ 11,684	\$ 5,756	\$ 5,003	\$ 4,566	\$ 4,267	\$ 4,348	\$ 5,579	\$ 4,994	\$ 6,675	\$ 94,523
IW	\$ 102,078	\$ 104,925	\$ 119,563	\$ 115,330	\$ 117,230	\$ 117,051	\$ 116,795	\$ 115,375	\$ 111,203	\$ 122,472	\$ 124,532	\$ 111,043	\$ 1,377,598
OSTATES	\$ 14,758	\$ 16,077	\$ 14,571	\$ 11,212	\$ 16,179	\$ 12,254	\$ 12,593	\$ 12,573	\$ 12,025	\$ 11,031	\$ 10,053	\$ 10,837	\$ 154,163
OTHER	\$ 34,859	\$ 34,204	\$ 30,767	\$ 34,424	\$ 26,516	\$ 37,719	\$ 44,115	\$ 33,962	\$ 28,725	\$ 30,314	\$ 36,962	\$ 30,988	\$ 403,555
Totals	\$ 170,363	\$ 192,405	\$ 204,975	\$ 188,753	\$ 184,364	\$ 179,376	\$ 178,209	\$ 169,340	\$ 160,823	\$ 169,602	\$ 177,007	\$ 159,542	\$ 2,134,757

2012 Child Support Collections/Source



FTOC	Federal Tax Intercept
STOC	State Tax Intercept
UC	Unemployment Compensation
IW	Income Withholding
OSTATES	\$ coming in from other states on our behalf
OTHER	liens, account seizures, sale of property, payer paid

Social Work Unit Mission Statement

“Enhancing self-sufficiency and quality of life while preserving the dignity of children, individuals, and families.”

FAMILY SUPPORT PROGRAM (FSP)

Family support provides individualized supports to families with a severely disabled child. The program offers limited funding, information and support to families to maximize their child's abilities and to keep them safely in the home. In 2012 we received \$17,000 and were able to assist 21 families in our county. We work with the Children's Long Term Waiver caseworker to coordinate the programs for families.

Birth – 3

Birth-3 is a Federally Mandated program to provide Early Intervention services to parents and children in their homes or other natural environment. These services are family centered and may include, but are not limited to; service coordination, physical therapy, occupational therapy, speech therapy, nutritional education, parent education & special education. We work with a team of providers in designing a program that both meets the requirements of the State's program & is suited to the unique needs of each family.

In 2012 we met with 48 families in the County. The data is as follows:

“The child was screened/evaluated and met eligibility for the program 70%

“The family did not want a screening done, no services here provided 18%

“The child was screened/evaluated and did not meet eligibility 12%

The length of time for a family's involvement can range from 1-2 months to a total of 3 years, depending on the child.

ADULT PROTECTIVE SERVICES (APS)

APS includes: Investigation and assessment of referrals alleging the abuse or neglect of vulnerable adults, including the elderly; guardianship proceedings (including annual reviews) when there is an issue of protection; and protective services or placements that require a Court Order to implement. In 2012 we investigated 40 referrals involving the elderly (16 were substantiated) and provided case management to 33 of the referrals. We also investigated 15 referrals involving vulnerable adults (4 were substantiated) and provided case management to 10 of the referrals. Overall we had 4 short-term community based placements involving the above population. Lastly we initiated 17 guardianships and conducted 24 annual reviews.

ADULT PROTECTIVE SERVICES

<u>SERVICE</u>	<u># OF CLIENTS</u>
INVESTIGATIONS (age 60+)	40
SUBSTANTIATED	16
SHORT TERM CASE MANAGEMENT	33
INVESTIGATIONS (AGE 18-59)	15
SUBSTANTIATED	4
SHORT TERM CASE MANAGEMENT	10
CBRF/AFH PLACEMENTS	4
GUARDIANSHIPS	17
WATTS REVIEWS	24

AODA & MENTAL HEALTH

Alcohol and Other Drug Abuse (AODA) services are primarily on a contracted basis with private providers. The majority of this population is served through traditional individual and group outpatient counseling and the County assisted 42 individuals in this service area. We also placed 2 individuals in a residential treatment facility, 1 individual in a detoxification facility and provided case management services to 7 individuals. It should be noted that the vast majority of individuals experiencing difficulties with AODA also suffer from mental health disorders and are typically counted as a mental health client if they have a dual diagnosis.

Most Mental Health services are provided on a contracted basis except for information & referrals, day time mobile crisis intervention and case management. In 2012, Washburn County had 41 Emergency Detentions (involuntary psychiatric hospitalization involving law enforcement). 37 individuals received county case management services on a court ordered, voluntary or a combination of both basis. Another 18 individuals received intensive case management services through our Community Support Program. We had 3 individuals in long term Community Based Residential Facilities (CBRF) and 4 individuals in short term CBRF placements and did not utilize any respite services. We had one individual in an Institute for Mental Disease (IMD) placements for the first month of 2012. For individuals who do not have health insurance and no other means to pay, the County provided 55 individuals with psychiatry services, 15 individuals with psychiatric nursing (indigent medication program) and 40 individuals with outpatient mental health therapy. Lastly, we served 24 families in our therapeutic wraparound programs (Children Come First/CST), most with at least one identified child diagnosed with a Severe Emotional Disturbance (SED).

<u>SERVICE</u>	<u>AODA</u>	<u># OF CLIENTS</u>
AODA RESIDENTIAL TREATMENT		2
INPATIENT		1
CASE MANAGEMENT		7
OUTPATIENT COUNSELING		42
DRUG & ALCOHOL COURT		8

(Dual diagnosed clients typically fall under Mental Health)

<u>SERVICE</u>	<u>MENTAL HEALTH</u>	<u># OF CLIENTS</u>
CBRF		7
INPATIENT		4
INSTITUTIONAL		1
CASE MANAGEMENT		37
PSYCHIATRY		55
PSYCH NURSING		15
OUTPATIENT THERAPY		40
COMMUNITY SUPPORT PROGRAM		18
CHILDREN COME FIRST/CST		24
EMERGENCY DETENTIONS		41

FAMILY SERVICES

Programs under Family Services include services to children and their families that are experiencing issues in their lives which impact daily functioning. These issues may be delinquency, abuse, neglect, or a need for special services that the parent/guardian may not be able to provide. The focus is to assist families to become self sufficient in an environment that provides for safety.

CHILD PROTECTION

When a Child Protective Services Referral is received, the information is reviewed to determine the appropriate response. Initial responses may include referrals to community based services or a more in depth family assessment where family conditions, circumstances and behaviors are assessed to determine if families need agency intervention in order to keep their children safe. Services if needed are coordinated with the family and other agencies focusing on protection of the child and enhancing the ability of the family to function as a responsible nurturing unit. Services may be voluntary or court ordered.

Referrals received in 2012:

83 Child Protective Service (CPS) Referrals received
44 Screened in for investigation

Reports Investigated/Assessed in 2012:

Type of Report	Number of Incidents	# of Children	Number of Substantiated Referrals	# of Children with a Substantiation
Physical Abuse	9	9	1	1
Neglect	19	30	6	10
Sexual Abuse	17	18	6	7
Emotional Abuse	5	7	1	3
Other	3	3	1	1
TOTALS	53	67	15	22

14 CHIPS (Child in need of protection and/or services) Petitions were filed in Children's Court

CHILD WELFARE

Some families are referred for situations where there may be concerns that do not require a child protection response. These Child Welfare Referrals are reviewed to determine the best response. Services are often preventative and may be provided by the agency or referred to community resources.

91 Services Reports were received 30 were opened for assessments.

OUT OF HOME CARE

Placements outside of the home are utilized when children/juveniles are not able to live in their own home because they are unsafe, have special care or treatment needs, or other circumstances exist that they are unable to remain in their home. Generally, placement in out-of-home care is temporary and intended to give families time to make necessary changes so that the child can live safely in his or her home. Most children in foster care return home to their families.

Court Ordered Placements:

19 Children were served in out of home care in 34 different placements.

This table lists the number of utilizations at the different levels of care:

Relative Care	7	Group Care	5
County Foster Care	3	Residential Care Centers	7
Treatment Foster Care	4	Secure Detention	6
Other: hospital	1	Juvenile Corrections	1



Voluntary Kinship Care:

Kinship Care is an early intervention program. The purpose of this program is to provide support when a child is unable to live in their own home and lives with a relative. The relative must meet certification requirements. Without the support and assistance of this program, children may otherwise be subject to abuse and/or neglect and fall under jurisdiction of Children's Court.

14 Children were served in Kinship Care by 11 Kinship providers.

Foster Home Licensure:

The agency is responsible to recruit and license foster families. 3 new homes were licensed in 2012. As of 12/31/12 there were 12 County Foster Homes, 3 are for relative children only.

CHILDREN'S LONG TERM SUPPORT (CLTS) SERVICES

Children with disabilities that occur during their developmental period frequently have severe impairments that are likely to continue indefinitely. These children and their families often require lifelong services, individualized supports, and other forms of assistance. Community based waiver programs help families support and maintain their children with developmental disabilities, physical disabilities, severe emotional disturbances or autism in their own homes. Services are individually designed to help support the child and family and to promote health, safety, participation and independence in the home and community.

17 Children were served under Children's waiver.

JUVENILE COURT INTAKE

Referrals are made to Juvenile Court Intake when a youth has been involved in breaking the law (delinquency), is truant from home or school, or is in need of protection or services. The goal of Juvenile Court Intake Services is to address the behavior by holding the juvenile accountable and equip the youth with competencies to live responsibly and productively while protecting the public. Services are provided to the youth and family.

81	Youth Referred	119	Total Offenses
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#	<u>Ages:</u>	#	<u>Sex:</u>
5	Under 10	21	Female
32	10-12	60	Male
29	13-15		
15	16-17		

#	<u>Dispositions:</u>
35	Deferred Prosecution
15	Formal Delinquency Petitions
12	Counsel and Release with conditions
5	Counsel and Release
14	Other

#	<u>Offenses:</u>	#	<u>Offenses:</u>
37	Disorderly Conduct	4	Drug Charges
14	Criminal Damage to Property	4	Obstruction
14	Theft	3	Burglary
10	Party to the Crime	2	Battery to police officer
9	Criminal Trespass	1	Threats to injure
8	School Truancy	1	Harassment
5	Battery	1	Battery to prisoner
5	Sex Offenses	1	Unlawful use of computer

2012 Agency Achievements

- ✓ Worked with ES staff to successfully transition Child Care Certification to the Social Work Unit effective 1/1/2013
- ✓ Birth to Three collaboration with Lakeland Family Resource Center for KIPS (Keys to Interactive Parenting Scale) implementation and community education on Bullying, Autism and Sensory Integration
- ✓ Applied for and received \$17,218.28 in Youth Aids Emergency Funds
- ✓ Successfully completed a state audit of the Children's Long Term Support Waiver program and no disallowances or deficiencies were found
- ✓ Received a grant in the amount of \$10,970 to equip a child forensic video recording interview room
- ✓ Formed a Prescription Drug Abuse Committee to address issues including community education
- ✓ Provided two community education presentation focused on prescription drug abuse and synthetic drugs
- ✓ Expanded the DEC (Drug Endangered Children's Team) to a Multidisciplinary Team which includes other forms of child abuse
- ✓ Collaborated with Washburn County Sheriff's Department on the Project Lifesaver Program for children with special needs
- ✓ Achieved TPA submission of CLTS authorizations and remittance advice retrieval
- ✓ Design of L300 worksheet for state year-end reconciliation
- ✓ Utilization of the CLTS/WPS Data Warehouse for information retrieval and reports

2012 Agency Achievements continued

- ✓ Transitioned from HSRS to PPS for Mental Health and AODA programs
- ✓ Designed clientele report to replicate HSRS Table 7 for unduplicated client counts for year-end reconciliation and state reports 942 and HSRR
- ✓ Purged 2500 charts from basement storage and organized storage room
- ✓ Assisted with clearing out old supplies/equipment for renovation of basement space/offices
- ✓ Department is cross-trained for Fiscal Assistant duties during employee leave
- ✓ Hired front desk receptionist at Human Services
- ✓ Training of new receptionist at Human Services
- ✓ Front desk staff is doing scanning for Economic Support and Child Support
- ✓ Increased support system for both county staff/consortia staff and management team
- ✓ Streamlined consortium-wide processes i.e. BC premium team, priority service team
- ✓ Eliminated large paper files . implemented the CSA scanning system
- ✓ Increased arrears collections by over 2% from FFY 2011
- ✓ Collaborated with medical providers, schools and neighboring Health Departments to respond to a Pertussis (Whooping Cough) outbreak.
- ✓ Expanded the Car Seat Safety Coalition into a Child Safety Coalition (Keeping Kids Safe in Washburn County), and collaborated with community partners to provide safety education on a variety of topics in a variety of venues. The partnership form developed for coalition use was touted as best practice model by the WI MCH program
- ✓ Completed the first child death review in Washburn County, as the lead agency for the Child Death Review (CDR) Team

2012 Agency Achievements continued

- ✓ Completed an all-hazards assessment along with other emergency response partners to determine the top potential hazards in Washburn County. Future emergency response planning will focus around this analysis
- ✓ Successfully completed all the requirements for the contracted state Public Health grants awarded in 2012
- ✓ Forward Health Community Access Point Grant continues through 6/2013. Reapplication submitted for another 1 year contract to support BadgerCare+ enrollment at Health Department
- ✓ Two Public Health Nurses completed on-line post graduate credits toward Reproductive Health Nurse Certification
- ✓ Supported the successful Moratorium on Environmental Chapter 30 in 2013 due to increased abatement costs to county, increased safety concerns of staff and the recent decrease in Public Health Nurse staffing

Department Goals for 2013

- Maximize efficiencies within each unit of the department
- Review agency and unit goals/mission/vision statements
- Implementation of Patient Protection and Affordable Care Act (PPACA)
- Remain Fiscally sound

Unit Goals for 2013

Health

“To transition the “recommendations” of the CDR team into “initiatives” led by the child safety coalition, using best practice guidelines

“To continue to work with partners in developing all-hazards emergency plans, especially as it relates to sheltering. FAST (Functional Assessment Service Team) training for staff

“To continue surveillance of communicable disease; this is especially important given the potential for a new pandemic with the novel H7N9 influenza virus

Child Support

“Case Bank Piloting and Results

Economic Support

“ES Consortia Restructure

“Health Care Exchange

Administrative Services

“Assist with implementation of New World Financial system

“Design and streamline accounting procedures to accommodate new financial system

Social Work Unit

“Implement a tool for juvenile assessments and case plans

“Continue collaboration for successful implementation of Lakeland Family Kinship

“Develop written protocol for Child Forensic Interview Room

“Increase knowledge and compliance in the Child Care Certification Program

“Increase knowledge and application of the revised Ongoing Standards for Child Welfare, Child Protection and Juvenile Justice cases

“Increase vocational opportunities for chronically mentally ill clients

