BOARD OF SUPERVISORS
Brown County

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HUMAN SERVICES COMMITTEE
Joan Brusky, Chair; Megan Borchardt, Vice-Chair
Pat Evans, Emily Jacobson, Tom Sieber

HUMAN SERVICES COMMITTEE VIRTUAL MEETING
THURSDAY, JULY 23, 2020
5:00 PM
SEE BELOW FOR INSTRUCTIONS TO VIRTUALLY ATTEND AND/OR TO PUBLICLY COMMENT AT THIS VIRTUAL PUBLIC MEETING

Pursuant to Sections 19.85 and 59.094, Wis. Stats, notice is hereby given to the public that a VIRTUAL MEETING of the BROWN COUNTY HUMAN SERVICES COMMITTEE will be held on THURSDAY, JULY 23, 2020 at 5:00 p.m.

The Public may **Access** this Virtual Human Services Meeting by:
1) **Calling** 1-415-655-0003; Entering the following Event Number: 161 239 1295; and Pressing #. Then, when asked for Attendee ID, Pressing # Again (to listen to meeting); or
2) **Browsing** to this Web Address on a computer or smartphone: www.browncountywi.gov/HSPublic ; and Entering the following Event Number: 161 239 1295 (to watch and listen to meeting). The Event Password should be filled in, but if needed, then Enter 0722; or
3) **Physically Going** (in-person) to the Neville Public Museum of Brown County, located at 210 Museum Place, Green Bay, WI 54303; and **Entering** the Neville Theater on the main floor (to watch and listen to meeting).

The Public may provide **Public Comments** by:
1) Emailing their Public Comments to the following email address: publiccomment@browncountywi.gov . **All Public Comments must include the following**: **a)** Full Name of Commenter; **b)** City, Village, Town or other Locality, and State, that the Commenter Resides in; **c)** What Issue the Commenter desires to Comment on; and **d)** Whether the Commenter is or is not a Lobbyist Registered with the State of Wisconsin, or Registered with any Municipality within Brown County, and if so the name of the Entity or Organization that the Commenter is Lobbying on behalf of.
2) Mailing their Public Comments, which must comply with the above four **a)** to **d)** requirements, to the following address: Brown County Board Office, P.O. Box 23600, Green Bay, WI 54305-3600. Compliant Public Comments received by email or mail on or before midnight the day prior to the Virtual Meeting will be electronically forwarded to Board Supervisors on the morning of the Virtual Meeting; or
3) **Physically Going** (in-person) to the Neville Public Museum, located at the above address, where a Brown County Technology Services Staff Member will have a microphone ready for the public to comment into during the meeting in a designated room near the Neville Theater on the main floor.

County Board Supervisors may Attend this Virtual Human Services Meeting by:
1) Utilizing WebEx via their County Issued Laptop and County Issued Headset, as instructed at Virtual Training Sessions (this provides two-way Audio and Video Access). PLEASE LOG-IN 15 MINUTES EARLY!
NOTE: County Board Supervisors may Virtually Attend this meeting in any location they desire that has sufficient internet access, and any County Board Supervisor that wishes to may bring their County Issued Laptop and County Issued Headset to Room 200 of the Brown County Northern Building, located at 305 E Walnut St, Green Bay, WI 54301, where social distancing will be practiced.

NOTICE IS HEREBY GIVEN THAT THE COMMITTEE MAY TAKE ACTION ON ANY ITEM LISTED ON THE AGENDA

I. Call Meeting to Order.
II. Approve/Modify Agenda.
III. Approve/Modify Minutes of June 24, 2020.

Comments from the Public (see above for instructions regarding how the public may provide Public Comment via email, mail, or in-person at the meeting). Compliant Public Comments received by email or mail on or before midnight the day prior to the Virtual Meeting will be electronically forwarded to Board Supervisors on the morning of the Virtual Meeting.

1. **Review Minutes of**:
   a) Human Services Board (June 11, 2020).

Communications

2. Communication from former Supervisor Tran re: Resolution to Provide Emergency Funding to Combat COVID-19 in Brown County. *May Motion: To provide $50,000 to Howe Community Resource Center to be used for COVID-19; of that $50,000, use up to 4% for administrative fee; and have Howe Resource Center provide where those funds have been utilized. June Motion: Hold for one month. Note on June County Board: There was no Corporation Counsel approved Resolution, and no Administration approved Fiscal Statement, provided to this Committee regarding this item to approve of/act on. Corporation Counsel will research whether there is authority to allow for this appropriation, and if so, will draft a Resolution consistent with the above, and will bring to the July Human Services Committee meeting for possible action.*
3. Communication from Supervisors Brusky and Lefebvre re: That the Brown County Public Health Department work with Administration in drawing up an ordinance to prevent the spread of the coronavirus through the mandatory use of face masks/face coverings in Brown County as recommended by the CDC and the Surgeon General along with other recommended corrective and preventive measures. *Referred from July County Board.*
4. Communication from Supervisors Brusky and Lefebvre re: That the Brown County Public Health Department work with Administration to draw up an ordinance requiring the mandatory wearing of face masks or face coverings in Brown County buildings and when within six feet of non-family members on Brown County property, that, when used in conjunction with other measures, would slow the spread of COVID-19 as recommended by the CDC and the US Surgeon General. *Referred from July County Board.*
5. Communication from Supervisor Schadewald re: This communication is my request for the Human Services Committee to examine the option of encouraging all "ESSENTIAL BUSINESSES" in Brown County as defined earlier this year to require masks be worn by all employees and patrons to promote public health for our citizens during this COVID-19 pandemic *Referred from July Cty Board*.

Wind Turbine Update

6. Receive new information – Standing Item.

Aging & Disability Resource Center

7. Director's Report.
   a) COVID-19 Update.

Syble Hopp

8. 2021 Capital Project 5-Year Outlook Summary – Informational.
9. Director's Report.
   a) COVID-19 Update.

Veterans

10. Director's Report.
    a) COVID-19 Update.

10b. Resolution Supporting the Commitment to Veterans Support and Outreach Act (The Act).

Health & Human Services Department

11. 2021 Capital Project 5-Year Outlook Summary – Informational.
12. Executive Director's Report.
    a) COVID-19 Update.
13. Financial Report for Community Treatment Center and Community Services.
14. Statistical Reports.
    a) Monthly CTC Data.
        i. Bay Haven Crisis Diversion.
        ii. Nicolet Psychiatric Center.
        iii. Bayshore Village (Nursing Home).
        iv. CTC Double Shifts.
    b) Child Protective Services – Child Abuse/Neglect Report.
    c) Monthly Contract Update.
15. Request for New Non-Contracted and Contracted Providers.

Other

16. Audit of bills.
17. Such other Matters as Authorized by Law.
18. Adjourn.

Joan Brusky, Chair

Notice is hereby given that action by Committee may be taken on any of the items which are described or listed in this agenda. Please take notice that it is possible additional members of the Board of Supervisors may attend this meeting, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular meeting of the **Brown County Human Services Committee** was held virtually on Wednesday, June 24, 2020.

Present: Supervisor Brusky, Supervisor Borchardt, Supervisor Evans, Supervisor Jacobson, Supervisor Sieber
Also Present: Circuit Court Judge Donald Zuidmulder, Human Services Manager Mark VandenHoogen, Health and Human Services Director Erik Pritzl, ADRC Director Devon Christianson, Syble Hopp Administrator Kim Pahlow and Business Manager Carolyn Maricque, Public Health Officer Anna Destree, Finance Manager Eric Johnson, Nursing Home & Hospital Administrator Samantha Behling, Community Services Administrator Jenny Hoffman, Children Youth & Families Manager Kevin Brennan; other interested parties.

I. **Call Meeting to Order.**

The meeting was called to order by Chair Brusky at 5:30 pm.

II. **Approve/Modify Agenda.**

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

III. **Approve/Modify Minutes of May 27, 2020.**

Motion made by Supervisor Evans, seconded by Supervisor Jacobson to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

Comments from the Public – None.

1. **Review Minutes of:**
   a. **Children with Disabilities Education Board (May 1, 2020).**

Motion made by Supervisor Sieber, seconded by Supervisor Borchardt to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

   b. **Human Services Board (March 12, 2020).**

Motion made by Supervisor Jacobson, seconded by Supervisor Borchardt to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

Treatment Courts

2. **Treatment Court Update from Judge Zuidmulder.**

Circuit Court Judge Donald Zuidmulder and Human Services Manager Mark VandenHoogen were present to provide an update regarding the Treatment Court Programs.

Zuidmulder informed he started the first Treatment Court back in 2009. They were one of the first Drug Courts in the state and now Treatment Courts were all over the state. Brown County had been particularly progressive because they had 5-Treatment Courts and they probably lead in the state in terms of the dimension and the breath of their Treatment Courts. He tried to appear at least twice and sometimes four times a year before those County Board committees had direct obligation to supervise and approve funding for the treatment courts. His position had always been that they were the leaders of the community and they had to prioritize how public dollars were spent and they had a right to know how programs were performing and evaluate them every year to make the decision they need to make.

Historical data was provided through a handout, which was provided and spoken to (attached).

Zuidmulder noted both the city and Brown County had changed their data collection systems so his prior reports would carry data that would show prior police contacts and prior calls to the residents of any participants and those numbers were kind of impressive however they don't get them now. His understanding was that these new software programs were being vetted and the agencies at this point were not sharing them because they were not completely sure as to their reliability.

Also, the active participants were partly reflective of the pandemic. As result of the pandemic they had been holding Zoom Treatment Courts. They had maintained their Case Managers and the programming as best as they could, virtual. He believed the courts could now optimally be operating at 90-125. His expectation was that the next time he met with the committee, these numbers will be close to 125.

The 81 terminations in the Drug Court was due to the length of the court and this was probably the hardest bunch of people they had in the community to be successful. Even though they had 163 terminations, at least 30% of those people contact the Treatment Courts afterwards, whether they had been to the prison or jail, and have said, while they were terminated, their time in the Treatment Courts was in fact beneficial and they valued the time they were in the Treatment Courts. Most were apologetic about how they failed. He felt that even though these were terminations, to some extent they benefitted from the programming they had.

Lastly, Zuidmulder shared a very impressive form filled out by a young woman. She set forth a journey that was exactly what they tried to do for all their mental health people. She talked about how it has transformed her and made her a stable member of our community (attached).

Responding to Evans, Zuidmulder will be back to the office July 10th, the courthouse was opening the 6th. They had 8,000 masks and a single entry point so he's expecting the direct contact. He believed Zoom basically allowed them to stay alive. It was not as effective as face to face. He believed it was the personal contact with the Judge and participants that was the real glue that made it work.

Human Services Manager Mark VandenHoogen informed there should be no additional budget requests from his division for this budget year.

Health and Human Service Director Erik Pritzl wanted to give credit to Judge Zuidmulder as well as to all the Judges. This workload went on top of other workloads. He basically carved out time to make it work and his commitment as well as the other Treatment Court Judges made it a success. Without Zuidmulder they couldn't do this. Pritzl thanked him for his time and commitment to people with mental health issues, substance use issues and veterans, etc. He was taking on a big workload with all that he did. Brusky felt they should shout from the rooftops how wonderful this was and the people involved.

Communications

3. **Communication from former Supervisor Tran re: Resolution to Provide Emergency Funding to Combat COVID-19 in Brown County.** ***Motion at May meeting: To provide $50,000 to Howe Community Resource Center to be used for COVID-19; of that $50,000, use up to 4% for administrative fee; and have Howe Resource Center provide where those funds have been utilized.***

Evans informed this was approved last month and was approved at the board under their minutes. Corporation Counsel was disputing that and Evans was in a debate with him on certain statutes, so he asked to hold for a month.

Note, this item was placed back on the agenda as the resolution had not yet been completed for approval.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to hold for one month. Vote taken. MOTION CARRIED UNANIMOUSLY.

Wind Turbine Update

4. Receive new information – Standing Item.

Aging & Disability Resource Center

5. Director's Report.

a. COVID-19 Update.

ADRC Director Devon Christianson informed that since their May meeting, their volume of contacts had continued to escalate. It was a good thing because they want to make sure people know they are open and available to them. They had done a lot of public communication. A lot of their staff was still remoting, she thanked the Brown County IT Department, they had been amazing helping with the IT Communicator on their computers so they can take live calls and video conferencing with customers if that's their preference. The one thing they hadn't done was open their doors. They were in the process of looking at working with their board about what criteria they want to use in terms of when they would start to see people face to face. DHS put out some new available data that will guide them through some of that decision making. She also had a meeting with Public Health next week to make sure they were doing this in a really safe way. Last week on their state call, announced by the demographers, that 87% of the deaths from COVID were 60 or older and had chronic conditions. That statistic keeps rising and they had an incredible responsibility to make sure they were doing this in a safe way and they were rounding the corner to that place.

Christianson informed they put together a video for their website so people can experience what it's going to look like when they walk into their building: https://www.youtube.com/watch?v=qCsaXXjA6zY&feature=youtu.be

Syble Hopp

6. Resolution Approving Tentative Levy for Syble Hopp School (Children with Disabilities Education Board – CDEB) Budget for Fiscal Year July 1, 2020 to June 30, 2021.

Syble Hopp Administrator Kim Pahlow and Business Manager Carolyn Maricque were present to speak to the annual budget. Pahlow thanked the committee for their support in last year's budget and reminded them of some of the initiatives they worked on diligently and noted they made good progress. Their strategic planning was taking a little longer than they had hoped but they did complete their parent and staff surveys that they were using to develop that plan. They also completed a facility efficiency assessment of their building, how their spaces do or do not meet their programs as well as some of the safety things they had concerns about regarding pickup, drop off and transportation. They continue to look at their curriculum adoption this year and figure out technology resources and other resources they need to go with that. They also had an initiate to continue to work on more focused behavior intervention and mental health. For their final initiative last year, their safety and security, they completely replaced their PA system so they can communicate with their classrooms if there was an emergency.

Pahlow stated for this year they were working really hard to be fiscally responsible and knew this would be a difficult time due to the COVID pandemic. Their budget looked the same as far as dollars, a little increase here and there. Maricque briefly explained some of their main differences. Overall their goal was to continue to look at their curriculum and programming and keep their students safe.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

7. Director's Report.

a. COVID-19 Update.

Pahlow informed they were in a better place than last month. It was their full intent to open in the fall with an in-person option for their families, with social distancing, the use of PPE for their staff, details they were still working on. In addition, their families will have the option to attend virtually. They were spending a lot of time trying to determine what that will look like and how to do it. They will be making calls to parents in early July to give them their plan. They had a bus company meeting today. Their PPE

was coming in at a nice pace. They need to keep talking about things like visitors to their building, etc.

Responding to Brusky, the DPI put out the 90-page guidance, it was good but told them the same things they heard all along. The samples provided didn't pertain to them, she's not sure it would work for their students and families. The best guidance was from the Brown County and De Pere Health Departments.

Veterans

8. Director's Report.

a. COVID-19 Update. No report.

Health & Human Services Department

9. Executive Director's Report.

Director Pritzl provided some updates from his Director's Report. He noted the Crisis Assessment Center work was being pushed back an additional week and they won't see completion of construction with move-in dates until March 2021.

Family Recovery Court - They had two families and now they had three.

The reopening plan for their department, the timeline was also pushed out. They won't be open to the public until July 6th. They did that to make sure they had all the necessary environmental controls as well as sanitizing and cleaning supplies. They were also looking at some staff changes to support it. They were still going to stress by appointment only services and schedule and screen as much as possible.

They had so much virtual work occurring and it had been very successful so they don't want to lose some of those things that had worked for their consumers and have helped keep people safe and healthy.

Another thing he wanted to highlight, the CTC had made a number of changes with infection control, environmental controls, and administrative controls. They have had some staff that had tested positive, they had no residents test positive. They had testing campaigns supported by the Department of Health Services and were on their second round of testing for staff, completed today. The staff that they initially saw that came back positive, they were asymptomatic staff who were tested outside of their work testing campaign so they were able to work with Public Health and provide isolation and quarantine guidance to them and cover the staff issues. They were also dealing with some staff shortages because newer situations coming forward, making sure they were using exclusion from work to keep people safe.

a. COVID-19 Update.

Pritzl informed there was a comprehensive list of all the things they have done (attached). Community Services Administrator Jenny Hoffman briefly spoke to, and highlighted, items from the report.

Hoffman noted that they attended weekly State meetings and webinars to gather updates and new information in the areas of Child Welfare, Economic Support, Comprehensive Community Services, Adult Protective Services, Children's Long Term Services, Birth to Three Services, and Outpatient Services. She wanted to acknowledge and thank managers and supervisors for all their work with the changes the state was coming out with. Destree echoed Hoffman and stated Public Health could not have done it without those assisting. It was an understatement of what they've done and it was truly appreciated.

Public Health Officer Anna Destree provided an update and some data on the Public Health side. She informed COVID wasn't over, and they wanted to get that message across. If you go out at any time, there was risk of contracting COVID. They restructured again; Brown, De Pere and Oneida were all running their own incidents and jurisdictions at this point but they still talk and will be doing a press release together in the near future. Their goals continue to be to stop or reduce the spread of COVID-19 in Brown County and to safely reopen through the use of proactive prevention efforts. They were putting together a FAQ section on their website to cover any questions that come their way for media, constituents, etc. for full transparency. It took that away from their intake and staff, so they can do other things.

Responding to Jacobson, Destree informed that once they learn of possible events their facility outreach group will reach out to the organizer and talk through it with them and provide recommendations. Whether there were mitigation strategies they could put in place, 6' distancing measures they could do, masking, etc. The ultimate recommendation was that they don't do those things but they knew life had to go on so they will communicate how to do it safely in their opinion.

Brusky questioned Destree's recommendation with regard to virtual meetings. Destree stated the ultimate recommendation was to do virtual meetings if they can. If there were times they can't, make sure to do social distancing measures, masking, hand sanitizer in place, etc. If it can be achieved virtually, that was the most optimal thing to do at this time. Brusky thanked her for that affirmation.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY.

10. **Resolution Regarding Table of Organization Change for the Health and Human Services Department – Community Services Division – Social Worker/Case Manager.**

The department is requesting changes to the Table of Organization to support the addition of a Children's Long-Term Support (CLTS) Case Manager within Health and Human Services. The addition of this position is necessary to provide services to clients mandated to be served that are coming off a waitlist established by Department of Health services requirements. This position was not sought earlier as we needed to wait to ascertain what funds are being made available through DHS. There are sufficient monies allocated to Brown County DHHS to offset the costs of the position, the funding being part of administrative costs associated with the program.

Pritzl added they had a local waitlist for children's long-term support, children that need a functional eligibility criteria through a disability. The state had an initiative that had been going on for a few years now to reduce the waitlist to zero. They do get there sometimes but then a waitlist develops because of capacity issues.

Motion made by Supervisor Evans, seconded by Supervisor Sieber to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

11. **Resolution Regarding Table of Organization Change for the Health and Human Services Department – Community Services Division – Behavioral Health Supervisor.**

The Comprehensive Community Services Program provides psychosocial rehabilitation services to children, youth and adults. Program demands and growth in the number of clients requiring services necessitates the addition of a Children's CCS Supervisor to coordinate care for children via the Sophie Beaumont location. Aside from coordinating the care of children and youth, there is also a need for oversight of children's services provided by contracted agencies engaged to provide CCS services.

Motion made by Supervisor Sieber, seconded by Supervisor Borchardt to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

12. **Financial Report for Community Treatment Center and Community Services.**

Finance Manager Eric Johnson was present to speak to this item.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY.

13. **Statistical Reports.**
    a) **Monthly CTC Data.**
        i. **Bay Haven Crisis Diversion.**
        ii. **Nicolet Psychiatric Center.**
        iii. **Bayshore Village (Nursing Home).**
        iv. **CTC Double Shifts.**

Motion made by Supervisor Evans, seconded by Supervisor Sieber to suspend the rules to take Items 13a-c. Vote taken. MOTION CARRIED UNANIMOUSLY.

b) Child Protective Services – Child Abuse/Neglect Report
c) Monthly Contract Update.

Motion made by Supervisor Evans, seconded by Supervisor Sieber to receive and place on file Items 13a-c. Vote taken. MOTION CARRIED UNANIMOUSLY.

d) Request for New Non-Contracted and Contracted Providers.

Responding to Borchardt, Pritzl didn't believe these services would be attached specifically to COVID-19. Typically in summer they would see service needs come forward. These would be providers that at the beginning of the year they didn't have a contract in place and as they had new children/families being served they would have to adapt to specific service providers for them and then they do the not to exceed amounts.

Motion made by Supervisor Sieber, seconded by Supervisor Evans to approve. Vote taken. MOTION CARRIED UNANIMOUSLY.

Other

14. Audit of bills.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to acknowledge receipt of the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

15. Such other Matters as Authorized by Law.

Brusky informed the Wisconsin Counties Association Board of Director's Chair had sent her a letter that she had been appointed to the 2020-2022 WCA Health and Human Services Steering Commission that she applied for. She's on the Judicial and Public Safety Steering Committee and she found them to be very informative and helpful. She hopes to represent Brown County well.

16. Adjourn.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to adjourn at 7:08 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Administrative Coordinator

PROCEEDINGS OF THE BROWN COUNTY HUMAN SERVICES BOARD

Pursuant to Section 19.84 Wis. Stats, a regular meeting of the **Brown County Human Services Board** was held on Thursday, June 11, 2020 at Brown County Central Library, Auditorium; 515 Pine Street; Green Bay, WI 54301

Present: Supervisor Tom Lund, Chair; Supervisor Lindsay Dorff; Michael Conley-Kuhagen; Craig Huxford; Laura McCoy

Excused: Kathryn Dykes

Also Present: Erik Pritzl; Executive Director
Jenny Hoffman; Community Services Administrator
Samantha Behling; Hospital & Nursing Home Administrator
Eric Johnson; Finance Manager
Cathy Foss, Office Manager
Anita Zipperer; member of the public

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1. **Call Meeting to Order**
The meeting was called to order by Supervisor Lund at 6:00pm.

2. **Approve / Modify Agenda**
HUXFORD / DORFF moved to approve the June 11, 2020 Agenda.
The motion passed without a negative vote.

3. **Welcome New Human Services Board Members: County Board Supervisor Lindsay Dorff and Citizen Board Member Michael Conley-Kuhagen**
Supervisor Lund welcomed the two new members.

4. **Election of Chair of Human Services Board**
HUXFORD / McCOY moved to nominate Supervisor Tom Lund as Chair of the Human Services Board. Supervisor Lund accepted the nomination. The motion passed without a negative vote.

5. **Election of Vice-Chair of Human Services Board**
Laura McCoy asked what the requirements were to serve as the Vice-Chair. Lund said anyone can serve, and if the Chair cannot make the meeting, the Vice-Chair would run the meeting.
LUND / DORFF moved to nominate Laura McCoy as the Vice-Chair of the Human Services Board. Ms. McCoy accepted the nomination. The motion passed without a negative vote.

6. **Set Date, Time, and Location for Regular Human Services Board Meetings**
Discussion surrounded whether or not future meetings could be held virtually or would take place in-person. The Brown County Board and Committees planned to be virtual in June and possibly return to in-person meetings in July. The issue during the COVID-19 pandemic is being able to social distance while meeting in-person. At this time, this Board could not return to Boardroom A of the Sophie Beaumont Building as there is not enough room to allow for social distancing. To be able to hold these meetings virtually, we would need to have training to host the meeting and have Technology Services support. We can accommodate an in-person Human Services Board meeting easily within the Auditorium of the Central Library.

   Traditionally, this Board met at 5:15pm on the second Thursday of the month. It was discussed that changing the start time to 6:00pm would be better for those with work schedules.

1a

McCOY / HUXFORD moved to schedule the Human Services Board Meetings on the second Thursday of the month, 6:00pm, temporarily in the Auditorium of Brown County Central Library; 515 Pine Street; Green Bay, WI 54301 until meetings could resume at Sophie Beaumont Building. The motion passed without a negative vote.

7. **Approve Minutes of March 12, 2020 Human Services Board Meeting**
McCOY / CONLEY-KUHAGEN moved to approve the minutes dated March 12, 2020. The motion passed without a negative vote.

8. **PUBLIC HEARING ON 2021 BUDGET – IN-PERSON PUBLIC COMMENTS**
HUXFORD / CONLEY-KUHAGEN moved to open the Public Hearing.

The Public Hearing was opened at 6:09pm. One member of the public spoke:

Anita Zipperer; 4293 Nicolet Drive; Green Bay, WI
Ms. Zipperer shared she was a former teacher in the Green Bay Public Schools. After watching the virtual townhall meeting from the City of Green Bay following the murder of Mr. George Floyd at the hands of Minneapolis, Minnesota police, she felt it was so well done and was appreciative that people of color from our community had an opportunity to speak from their hearts about what we need to do to make things better for them. She explained, one of the speakers said white people need to stop asking minorities what they can do to help; they have to go to their leaders and tell them what they want. This is why she came to speak before the Human Services Board. She asked the Board to make the future better for people of color in our community. She suggested looking at jobs programs, drug and alcohol intervention, a hand-up and not a hand-out. Ms. Zipperer stated we give and give and don't support in the meaningful ways that people of color need in order to improve themselves, their families and their communities.

She continued by saying she is proud of the Green Bay Public Schools, but they have changed greatly over the years. We need to do more work at closing the gap, and helping teachers understand how to deal with children of color from various cultural backgrounds. She believes all of our social programs need to do a better job of that. She asked the Board to consider all she mentioned as we consider the 2021 Budget, and how the decisions the Board makes about the Budget benefitting, or perhaps hurting, the people of color in Green Bay.

She concluded by appealing from her heart and committing to watching as this goes forward. She plans to look more closely at where the money goes, and what is done with it. She thanked the Board for their time and the work they do.

Seeing as there were no other members of the public present, HUXFORD / McCOY moved to close the Public Hearing at 6:15pm. The motion passed without a negative vote.

9. **Executive Director's Report**
   a. May 2020
   b. June 2020

Executive Director Erik Pritzl distributed his June's report and highlighted the following:

Crisis Assessment Center at Community Treatment Center
Some construction will begin on the Crisis Assessment Center in mid-June with foundation work, but the timeline for completion of the project has been pushed into February 2021. With all that has been going on with COVID and such, it is not really a surprise the project has been delayed. This will not change the services we currently provide.

1a

Department Re-opening Update

Currently our offices are by appointment only with the exception of Community Treatment Center and Shelter Care which are 24/7 operations serving clients on-site. Our other units are by appointment only and continue to offer virtual services whenever possible (for example: psychiatry, outpatient mental health and substance abuse, and child welfare). Also, these units have some in-person support of Adult Protective Services and Child Protective Services to respond to allegations of abuse and neglect.

We want to map out a plan to open our offices back up to some public access. Starting June 15, some supervisors and managers will return to the office. The following week, June 22, we resume being open to the public with up a partial return of staff, with no more than 50% of staff assigned to a worksite returning to that site. This would be ***up to*** 50% -- enough staff to handle the in-person service handled if someone presents at the building. Next, July 6 additional staff would return. We want to wait a period of time after our first wave of staff return, to allow the next amount back to the office. We will continue to support telework and look at it as an option for staff into July.

However, if something changes, and there is a dramatic rise in (COVID) cases, or staff absences, we will re-evaluate. As it stands now, we are looking at getting back to in-person, lobby services for the public on June 22.

We have learned much about virtual service delivery during this time. Staff are truly enjoying teleworking in so many ways. Prior to the pandemic, we had a section of staff piloting telework and it was very successful; we want to continue with a blend of situational and routine telework.

We have had great success with the virtual services partially because the State has flexed some of the rules surrounding telehealth and virtual services, and billing around these practices. It is temporary, but we expect changes, and we will need to respond accordingly. This will be another decision point if the State decides we can no longer bill for virtual services; we will need to return to in-person services.

Mental Health Officer-Clinician Team

We have an Officer-Clinician team that started in July 2019. We have a Clinician collaboratively working with Green Bay Police Department's Mental Health officers to go out on calls; either a crisis call or as follow-up. Since we started in July 2019, we've had interactions with 197 individuals; 97 in 2019 and 100 in roughly the first six months of 2020. There has been a higher volume of utilization in 2020, but then calls for service, and police calls in general decreased during the pandemic, so we didn't see the same increase over the last few months.

In 2019, 8% of the contacts with individuals resulted in Emergency Detentions, with an increase to 27% in 2020; likely due to the narrow focus of the calls. As the calls became fewer in number, but more intense in terms of service, that would potentially be the reason for that increase. Voluntary hospitalizations were 5% in 2019; 9% in 2020.

There has been a positive response from Law Enforcement on this Officer-Clinician service, and feeling it is a success.

Dorff asked if Pritzl felt the Officer-Clinician team staffing was sufficient for the demand for this service, or if as awareness of this team grows there could be increased demand for it. Pritzl said, while it is hard to say due to the last few months, he believes the team would say there is a need for more resources there. They truly appreciate the partnership and would like to see the ability to expand it. We need to look at where it makes sense – we have a team in Green Bay, but we serve Brown County as a whole. Are there numbers in other communities where we should consider this as well? We know the bulk of our work is in Green Bay; and having the dedicated mental health officers, is a great support. The team would say adding another Clinician would be appropriate.

Regarding teleworking, Lund asked if HHS would continue to keep some staff working from home as the department has office space needs; especially if they are enjoying it, and productivity is good. Community Services Administrator Jenny Hoffman replied the staff are enjoying it, productivity has been the same or better throughout, but especially in our Economic Support area.

Lund asked if the department is doing long-term planning and assessment regarding space needs. Pritzl said telework would help solve some of our space needs. Lund believes a lot of people like to work from home since they don't need to commute, the parking expense, etc.

Pritzl shared we recently moved some of the Criminal Justice Services staff into Sophie Beaumont Building from the Law Enforcement Center. To accomplish this, we needed more Economic Support staff to telework, so we had adequate space to move Criminal Justice in. We have been working on getting telework going to solve space issues long before the pandemic; it helped move is along faster.

Pritzl said we need to continue looking at telework; we have not had a lot of discussion with our Boards and Committees around this. As long as I see people are comfortable with the policy decision of embracing telework more; I think we certainly have staff, supervisors, and administrators who would support it as well. As long as we meet the need of those walking in the door. I don't want someone to walk in and not be able to have service because everyone is teleworking.

DORFF / CONLEY-KUHAGEN moved to receive and place on file the Executive Director's Reports for May and June 2020. Motion carried without a negative vote.

10. CTC Administrator Report including NPC Monthly Report

a. May 2020
b. June 2020

Samantha Behling, Hospital & Nursing Home Administrator, highlighted items from her reports.

COVID-19

Within May's report, a substantial list of administrative and environmental controls was provided in order to inform of actions taken by the facility to prevent and control the spread of COVID-19 infections, as well as, protect the health and safety of our consumers and personnel.

Since the beginning of June, along with Environmental Controls, we have completed residential testing on our Nursing Home as part of a DHS initiative. We offered COVID-19 testing to the entire resident population; we tested 59 of 62 residents and all returned as negative. In addition to resident testing, we offered voluntary testing to the workforce at CTC including facilities/maintenance workers, housekeeping, and contracted therapists and nursing staff. We ran clinics for three consecutive, 8-hour days and tested 181 healthcare employees – all employee tests from the clinics returned negative. The test kits were supplied by Department of Health Services and considered to be a reliable test as they contracted with Exact Sciences who did the testing.

To date, we have two confirmed employee tests done within the community, whether at their healthcare provider or community testing site; both employees were asymptomatic. We excluded those individuals from reporting to work; they are in two different units. We have engaged Public Health to do contact tracing; up to this point, there have not been identified high-risk co-workers, nor high-risk connections with our clients. We have followed CDC recommendations for exclusion from work and monitor everyone for symptoms.

For our residents and clients, we are testing them a minimum of twice daily with our screening procedure for symptoms including lung assessments, oxygen rates, temperature readings; and if there was a suspicion of illness, we would pay more attention and test.

Although we do have two employee confirmed cases, we feel we are monitoring, and following Public Health recommendations; also, we are in regular communication with the Division of Quality Assurance and Department of Health, and they are assisting us through this process.

Staff is universally masked at CTC. As far as patients/residents, we have a memory-care population as well as mental health population. We can encourage, and we can chart it daily, but when it comes to compliance, it is not a high compliance with our population. Things we can do if they are not masking – we can maintain social distancing, we taped off seating areas, dining rooms, removed furniture, and do a lot of education.

The Division of Quality Assurance is focusing on nursing homes, to be sure we are in compliance and doing everything we can possibly do. There are initiatives for on-site state and federal surveys – they come into a building unannounced and will survey the area and may ask for documentation and timelines. We are anticipating this, so we are paying more attention to it to avoid citation. We had a call with DQA, going over an assessment over the phone and it went really well, and by the end of the conversation they were asking us for some of our tools. In fact, one of our Directors of Nursing offered to do a Tik-Tok educational video. We are doing other survey preparedness as well, including making sure our timelines and documentation is together

Regulatory Concerns
We had an elopement from our Community Based Residential Facility (CBRF). A person was very capable, left the facility, and ended up in jail as a result. This is a state-reported event that does not result in harm.

Additionally, part of COVID reporting is entering data into various features, one being NHSN. We are struggling because we hired a Director of Nursing for the Nursing Home in March, and an Infection Preventionist two weeks ago, and this program is user-specific, so they need to be enrolled to submit our results. We are working with DHS, but have not gained access to the portal to enter our results.

Other Business
We received confirmation through the assessment tool that our Nursing Home is 5-Star Rated. This is something to be proud of as this is the highest standard. I give the credit to our staff for meeting those benchmarks.

In late 2019, we came to this Board to change one of our leadership roles to employ an Occupational Therapist. To provide an update six months into the year, the Occupational Therapist has tremendously improved our service in our mental health setting. This was the sole purpose of this position; we wanted someone dedicated to our programs, client-centered, and have a new approach, and this new hire has done that remarkedly so. This has resulted in a huge benefit for Brown County by changing the level of skill in that position. She is focused on areas of non-compliance from previous years.

McCOY / DORFF moved to receive and place on file the CTC Administrator Reports for May and June 2020. Motion carried without a negative vote.

11. Financial Report for Community Treatment Center and Community Services
a. May 2020
b. June 2020

Finance Manager Eric Johnson highlighted the following:

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Community Treatment Center

For 2019, Community Treatment Center ended the year with results showing favorable revenues, with expenses over. An overall favorable result compared to budget of approximately $382,000 despite significant pension adjustment that occurred at the end of the year.

For the first four months of 2020 for Community Treatment Center, revenues are approximately 2% ahead of annual budget. This is largely due to the Nursing Home and CBRF censuses being higher than budgeted. Last year, the hospital census was higher, but this year it is the Nursing Home and CBRF. Expenses are slightly less than budget, with a small favorable variance, due primarily to fringe benefits being lower than expected; through April, a favorable budget variance of $213,000.

Community Services

Community Services for 2019, ended the year with an overall favorable budget variance of $568,000. This is primarily because of significant favorable Wisconsin Medicaid Cost Report (WMCR) and Comprehensive Community Services (CCS) prior-year settlements that came in significantly better than expected. Expenses were somewhat over budget. Purchased services were the main reason expenses were higher; in the areas of foster care and youth offender residential placements.

April Year-to-Date Revenues are $79,000 ahead of budget; including high CCS and Children's Long Term Services (CLTS) program revenues; these correspond to higher costs. Expenses are $276,000 over budget including those higher CCS and CLTS expenses and a higher intercounty expense primarily due to Technology Services. There were significant costs associated with telework change and items from the beginning of the year. This is not a controllable expense when it comes to operations. Overall, about $200,000 – which may sound like a lot, but is only four tenths of 1% away from the annual budgeted amount.

HUXFORD / DORFF moved to receive and place on file the Financial Reports for May and June 2020. Motion carried without a negative vote.

12. **Statistical Reports a, b, & c**
    a. Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Center
        i. March 2020
        ii. April 2020
        iii. May 2020
    b. Child Protective Services — Child Abuse/Neglect Report
        i. April 2020
        ii. May 2020
    c. Monthly Contract Update
        i. May 2020
        ii. June 2020

In regard to the Child Protective Services report, Lund asked with the COVID quarantine/stay at home order, did the numbers drop off during those months? Pritzl explained that in the May report, overall referrals have decreased, the number of screened-in cases has decreased, but not in proportion to total reports. We are seeing fewer reports, but children have not been with mandated reporters -- schools, childcare providers, support services, programs, therapists, etc.

Dorff stated, as a public-school teacher going into summer it was always my biggest concern having students I was concerned about who might not having mandated reporters watching out over them. Are there any community initiatives to educate the broader community on what to do if they have concerns or who they should go to?

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Hoffman shared that Child Protective Services Supervisors reached out to the Green Bay Public Schools 3-4 weeks ago; meeting with them to keep it on their radar in the virtual classrooms. They were also working with local hospitals and clinics. It is on the forefront with them – they are concerned, they know things can happen, and want to be sure things are getting reported to us appropriately. We will continue to provide outreach.

Pritzl added the State Department of Children and Families is also trying to put out more information via social media and other platforms related to continuing to report concerns people have. Since many are following Public Health right now, we could pick up and share some of those posts on Facebook.

Lund asked if we can put things out to the media? It is important to note these are vulnerable kids and if anyone notices anything; do they know where to call? You could save somebody's life.

Hoffman stated recently on social media we had some posts related to human trafficking. One of our CPS supervisors is a lead in the region, so working with Deputy Executive Jeff Flynt, we had some posts on June 1 on the County Executive's Facebook page.

Huxford said based on his experiences years ago, he agreed with Lund's assumption on the number of reports. Due to the seclusion with COVID, and then the process of re-opening, come August or September the numbers could multiply. We need to be proactive about it.

McCoy shared that many children in the Green Bay School district have dropped away; we cannot find them, they have not responded to outreach attempts. This is an issue that keeps our administrators, teachers, and staff up at night. This is a real, big deal. Anything HHS can do to make the public more aware to watch out for signs, educate them, is well worth it.

DORFF / McCOY moved to receive and place on file all statistical reports under item #12.
Motion passed without a negative vote.

13. Request for New Non-Contracted Provider & New Provider Contract

a. May 2020
b. June 2020

HUXFORD / CONLEY-KUHAGEN moved to receive and place on file the Request for New Non-Contracted Provider & New Provider Contract Reports for May and June 2020. Motion passed without a negative vote.

14. Recognition of Former Human Services Board Member — Susan Hyland

Lund read the letter from County Executive Troy Streckenbach thanking Ms. Hyland for her over 10 years of involvement with the Human Services Board. The letter and a card will be sent to Ms. Hyland following the meeting.

Before adjournment, McCoy requested to discuss concerns with the upcoming election and voting in-person. How does it relate to Health & Human Services? What is the County's role in that?

Per Lund, it is through the Administration Committee and the County Clerk. Along with the Board of Public Health, Pritzl would advise and provide guidance.

Pritzl said during elections, the city, towns, and villages reach out to us for guidance on how to safely hold elections. The State Elections Commission has also provided a lot of guidance, and that is who we look to as well. We have not gotten a lot of information about Fall elections yet. In the Spring elections, there were additional sanitization products, personal protective equipment (PPE) that came through the Emergency Operations Center (EOC) for distribution out into the community. We were actually part of that process of making sure people had access to hand sanitizer, gloves, masks, etc. Our Public Health division was part of the conversation in getting the

1a

people the guidance they needed to make decision on how to safely hold elections. A lot of it is going to fall on how those municipalities implement the guidance, and make those decisions, look at the resources they have. In the Spring, the Wisconsin National Guard offered to assist with elections to have additional people there to queue people in lines safely and distanced. The biggest plug is to not show up in-person at the polls if possible. Pritzl expects to receive more guidance come out soon from the Election Commission, and Public Health will be busy interpreting that and to steer people toward mail-in ballots.

Lund said the website, www.myvote.wi.gov would be where you'd go to request an absentee ballot.

There is an election in August in McCoy's Assembly district, but it is November that impacts most.

15. Adjourn Meeting:
HUXFORD / CONLEY-KUHAGEN moved to adjourn. Motion passed without a negative vote.

Chair Tom Lund adjourned the meeting at 6:55pm.

Next Meeting: Thursday, July 9, 2020 at 6:00pm.
Brown County Central Library; Auditorium
515 Pine Street
Green Bay, WI 54301

Respectfully Submitted,
Catherine Foss
Office Manager

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Hemery, David P.

From: Brusky, Joan M.
Sent: Wednesday, July 15, 2020 10:35 AM
To: Hemery, David P.
Cc: Weininger, Chad J.
Subject: Please submit to County Board Chair after reviewing. Thank you.

Announcement from Supervisor Joan Brusky

To My Fellow Supervisors:

Tonight I am missing the Brown County Board of Supervisors meeting for the first time since being elected four years ago in April, 2016. I should be with you. I want to be with you. I want to join you in doing the important work we promised to do. But, instead, I am taking the advice of Brown County Public Health Officer, Anna Destree and Prevea Health President and CEO, Dr. Ashok Rai who advised us to not meet in person if we can do our good work virtually.

Like you, I have learned the hard way in the past and I can't afford to learn the hard way this time, because my life and health depends on it. We must try to learn from the many Americans who have lost their lives these past cruel months.

So I won't be attending any subsequent in-person meetings of the county board or its standing committees; not until health professionals I trust give the signal that it's truly time to open up. In the meantime, please join me in listening to the community members who are continuing to reach out to us. Teachers tell me that,"we are all afraid to go back to school." They and others are telling us that a face mask ordinance will help them.

Let's work together to help those who are afraid of masks, too. Let's work together with science and with a heart.

Joan Brusky
District 14 Brown County Supervisor

3 Communications from Joan B's

Communications

That the Brown County Public Health Department work with Administration in drawing up an ordinance to prevent the spread of the coronavirus through the mandatory use of face masks/face coverings in Brown County as recommended by the CDC and the Surgeon General along with other recommended corrective and preventive measures.
For Human Services Committee

Joan Brusky Kathy Lefebvre

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District 14 District 6

That the Brown County Public Health Department work with Administration to draw up an ordinance requiring the mandatory wearing of face masks or face coverings in Brown County buildings and when within six feet of non-family members on Brown County property, that, when used in conjunction with other measures, would slow the spread of Covid-19 as recommended by the CDC and the US Surgeon General.
For Human Services Committee

Joan Brusky Kathy Lefebvre
District 14 District 6

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Schreiber, Baili A.

From: Schadewald, Richard J.
Sent: Wednesday, July 15, 2020 1:46 PM
To: BC.County.Board.Supervisor.Communications
Subject: Communication for tonights County Board meeting

To: Human Services Committee

This communication is my request for the Human Services Committee to examine the option of encouraging all "ESSENTIAL BUSINESSES" in Brown County as defined earlier this year to require masks be worn by all employees and patrons to promote public health for our citizens during this COVID-19 pandemic.

(5)

ADRC of Brown County: Human Service Committee Report

07.21.2020

Phase Back Plan

The ADRC has been working to re-evaluate our phase back plan for re-opening the ADRC offices. Virtual programs and services have been available through the entire pandemic and will continue for several months ahead. (the phase back plan and urgent criteria are included in this report)
In July, the ADRC worked with the ADRC Board of Directors and Brown County Public Health to create criteria for phase back activities. A Phase Back 1.5 level was added to start July 9th, 2020. This new added level was approved by the ADRC Board and includes in-person appointments if a customer meets urgent priority criteria.

Moving to level 2 or 3 will be an ADRC Board decision based on state and local data on trends, trajectory, burden and infection rates. The ADRC board feels strongly that a conservative approach to reopening services is critical due to the vulnerable populations served. Each month the board will review current data and decide if moving to a different phase is warranted. 70% of ADRC continue remote work and offer virtual meetings to all customers.

Safety Video's Available:

The ADRC staff produced two video's to explain and walk through safety precautions for customers and staff. The customer video will be available online and promoted via social media. The staff welcome back video will be shown to all staff returning to the building

Customer Video: https://www.youtube.com/watch?v=qCsaXXjA6zY&feature=youtu.be

Staff Welcome Back Video: https://www.youtube.com/watch?v=7oxzPq5iCm4&feature=youtu.be

The ADRC Finance Coordinator is retiring, after 32 years, at the end of the year. This critical position requires a significant succession plan. We are recruiting now and appreciate any help from board and committee members in finding great candidates.

ADRC of Brown County Finance Coordinator

Submission Deadline: Sunday, July 26, 2020

Full-time position available to lead Agency financial functions. Directs the accounting, payroll, accounts payable, financial reporting, and budget functions of the ADRC. Responsible for agency-wide financial forecasting and recommendations, budget development and monitoring, financial accounting, and reporting. Ensures agency-wide compliance with state laws, federal regulations, agency policies and pertinent accounting standards, methods, policies, and procedures. Member of the Executive Management Team.

Bachelor's Degree in Accounting plus seven years progressively responsible accounting experience including supervisory experience in a Government and/or Not for Profit environments. Licensed Accountant or Certified Managerial Accountant. Benefits included.

Complete job descirption is available at https://adrcofbrowncounty.org/join-our-team/
Applications are accepted online only. Go to: www.governmentjobs.com/careers/browncounty Search for Finance Coordinator to apply. Applications must be completed online on or before Sunday, July 26, 2020 Midnight.

If you are a person with a disability and need accommodation at any time during the recruitment or hiring process, please contact the Brown County Human Resource with your need. (920) 448-6277 or email: bc_human_resources@browncountywi.gov
In addition to a completed application, all applicants MUST submit a resume and cover letter to be considered.

Customers have increased access to core ADRC programs and services on multiple platforms, in multiple locations of their preference in a safe environment

Where guidance is not provided by the ADRC, Brown County Policy will be followed: ***A-22***: COVID-19 Temporary Work Rules, ***A-38***: COVID-19 Leave Policy, ***A-39***: TEMPORARY WORK RULE COVID-19: Public Contact & Return to Office Work Rules (Reopening)

The phase back plan is subject to change depending on ADRC Board and Brown County public health recommendations, informed by state requirements/date . The ADRC will progress to different phases based on ADRC Board decisions. State of Wisconsin has outlined community conditions based on available data https://www.dhs.wisconsin.gov/covid-19/local.htm

Staff and Coordinators remote work or in office work will be based on the ADRC's ability to provide core services according to state and federal requirements. Shifts in workforce or need to return to the office would occur with a one week notice when possible.

Case indicators defined

Burden (case rate) and trajectory (case change) indicators are based on confirmed COVID-19 cases. The COVID-19 activity level maps burden and trajectory indicators based on whether the burden status is low, moderate, moderately high, or high and whether trajectory status is significantly shrinking, growing, or have no statistically significant change.

Burden (case rate)

Burden is the total number of cases per 100,000 Wisconsin residents in the last two weeks.

Burden Status	Value (per 100,000 Wisconsin residents in the past two weeks)
Low	Case rate is less than or equal to 10.
Moderate	Case rate is greater than 10, but less than or equal to 50.
Moderately High	Case rate is greater than 50, but less than or equal to 100.
High	Case rate is greater than 100.

Trajectory (percent case change)

Trajectory is the percent change in the last two weeks and p-value (indicates statistical significance) from a test against the percent change equal to zero.

Trajectory Status	Value (change from prior 7-day period to most recent 7-day period)
Shrinking	Percent change in cases is less than or equal to negative 10 percent, and p-value is less than 0.025.
Growing	Percent change in cases is greater than or equal to 10 percent, and p-value is less than 0.025.
No Significant Change	Any other conditions besides those that meet the "shrinking" or "growing" statuses described above.

COVID-19 activity level

COVID-19 activity level is a summary indicator based on whether the burden (case rate) status is low, moderate, moderately high, or high and whether the trajectory (case change) status is significantly shrinking, growing, or have no statistically significant change*.

**As defined in the burden and trajectory status tables above.*

Burden Status	Trajectory Status		
	Shrinking	No Significant Change	Growing
Low	Low	Low	**Medium**
Moderate	**Medium**	**Medium**	**High**
Moderately High	**Medium**	**High**	**High**
High	**High**	**High**	**High**

Last Revised: July 1, 2020

Burden (case rate), trajectory (percent case change), and activity level

Area	Count	Burden		Trajectory	Trend	Activity level	
Wisconsin	5746	99	Moderately High	49	▲	High	■
Adams	10	49	Moderate	N/A	↔	Medium	■
Ashland	0	0	Low	N/A	↔	Low	■
Barron	8	17	Moderate	N/A	↔	Medium	■
Bayfield	0	0	Low	N/A	↔	Low	■
Brown	409	160	High	65	▲	High	■
Buffalo	2	15	Moderate	N/A	↔	Medium	■
Burnett	1	6.5	Low	N/A	↔	Low	■
Calumet	23	45	Moderate	300	▲	High	■

Phase 1: Current State

Criteria: Current State Brown County at High Activity Level and Increasing Trend for community infection rates 5.28.2020

General Principles

- No office visits or home visits planned
- Building locked

Phase 1.5: Limited Public Contact

Criteria: ADRC Board Balances COVID Related Risk vs Need 7.9.2020

General Principles

People who cannot get needs met through any other means

- ***The ADRC will be receiving guidance from Brown County and State Offices that may change the timelines.***
- Strategize ways to assure customer contact will minimize risk of exposure. Assure method of contact best meets the needs and learning style of customers. Access to needed programs and benefits are a priority.
- Keep meetings small (limit the appointment to only those needed. Limit to no more than 2 customers and not having children present unless having no other childcare is an option.) and offer phone contact for collateral information or family education.
- Office Visits only.
- No in-person presentation/outreach/committee/training meetings in the community. Drop off only.
- All staff adhere to office safety protocols as outlined below.
- Building locked; non-staff entry by buzzer only.
- Screening upon entry to the building.
- Masks, gloves, and sanitization procedures followed.
- Calls answered live.
- In-person contact (for limited priority/risk customers) Criteria for Urgent Priority In-Person Contact.docx

Phase 2.: Limited but Enhanced Public Contact

Criteria: Board Direction after review of all relevant data-Date To Be Determined

General Principles

Customers Preference considered for service delivery

- All office safety protocols continue
- Office appointments for persons who are unable to easily use a virtual platform or phone services
- Home Visits, Office Visits resume for all persons who prefer this mode of service.
- No in-person presentation/outreach/committee/training meetings in the community. Drop off only.
- Building doors locked
- Office Space reconfigured: One staff per office a priority where exceptions are required distancing and/or dividers will be utilized.

Phase 3: Public Services Resume

***Criteria*: Vaccine or treatment available AND Brown County Public Health advises community immunity is adequate for gatherings of high-risk populations**

General Principles

- Walk-in traffic resumes
- Home visits and family meetings occur in office resume
- Social programs, classes and educational events resume
- Functional and nutrition screens occur in person

Program	*Phase 1* Current State	*Phase 1.5: Limited Public Contact*	*Phase 2.0: Customer Preference*	*Phase 3: Public Services Resume*
I & A **Ben Spec**	• No services available in office • Limited staff in office • WebEx/MSTeams offered to customers	• Follow in office and home visits safety guidelines for distancing, wearing masks and sanitizing • No shared offices • Office visits by appointment only or for urgent assessed priority situation	• No shared offices • Office visit and home visit occur for customers who can not easily use virtual or phone platforms	• Walk in traffic returns • Continued in office and home visit safety guidelines
Nutrition	• Staff redeployed to assist in nutrition from all units • Operations moved to 300 location	• Senior Employment workers return according to program requirements and individual needs • Staff return to regular positions • Screening and safety protocols for volunteers	• Same as phase 1.5	• Congregate returns • Home Visit return • Daily screening stops with a vaccine

Programming Grounded Cafe	• No in person social programs • Virtual programs • Carryout • Catering and Eat Street	• No in person social programs • Virtual programs	• Same as phase 1.5	• Café opens to public • Programming, education and classes resume • Virtual programs continue as an option
Prevention	• No in person prevention programs • Virtual classes offered • Coalition meetings via WebEx	• Virtual programs	• Home visits- Boost Your Balance falls screens by staff person with screening questions and advised PPE	• Home visits – Boost Your Balance falls screens resumes with volunteers • In-person classes adhering to most current safety recommendations/guidelines • Virtual programs continue as option
Support: Accounting, Support Team, Marketing, Reporting	**MKT:** Building Signage FB & Website explanations **Support Team**- Redeployed to assist with meal distribution. Critical work of online options and communications prioritized **Accounting:** Coordinator only person in office	**MKT:** Building Signage FB & Website explanations **Support Team:** stager remote and in-office work due to worksite office space and function **Accounting** staff return to the office as space allows	**Same as phase 1.5**	**MKT:** Building Signage FB & Website explanations **Support Team**: Work function and space maximized. **Accounting:** Staff in office and supporting accounts from multiple portals-maximize virtual options and reduce paperwork
Building Maintenance	When building closed – Hyper cleaning and PPE	Senior Employment Workers return	Same as phase 2	All new processes for cleaning remain as good practice for flu

	Maintenance paid staff remain in the office	Paid staff remain in the building and maintain increased cleaning measures		prevention W:\Units\Maintenance\COVID\C-19 Disinfecting and Work Chart.docx

INTERACTION WITH THE PUBLIC

Physical Modifications at ADRC Building

- Hand sanitizer stations including contactless will be available for use by customers and staff.
- Workstations are arranged to avoid employees from standing adjacent to one another or next to each other. When six feet of separation is not possible, consider spacing options that include other mitigation efforts with increased frequency of cleaning and sanitizing surfaces.
- Building locked; non-staff entry by buzzer only.
- Signs indicating a 6 ft distance will be placed on the floors where lines may naturally occur-the Welcome Center, Grounded Café etc. Practice physical distancing, except where work (i.e.: HBM) does not allow
- In Office Suite:
    - Masks required anytime outside of your individual office
    - Ask before entering individual offices if the person is okay to meet face-to-face, wear a mask and maintain distance from the doorway
    - Avoid passing staff in the hallway or go in a different direction.
    - Keep office door shut when working inside
    - Use virtual / technology in place of face-to-face meetings
- Signs will be posted on entrances that no one with a fever or symptoms of COVID-19 is permitted in the facility.
- ADRC has installed physical barriers such as partitions or plexiglass at locations where customers will register or access services.
- Traffic flow to and from the building will be managed in a one-way manner: West front entrance will be the main entrance and exit from separate doors. Directional signs will be placed and enforced. Only staff may enter or exit from south doors.
- Public computers will not be used by customers until the building is open to the public.
- Customers and staff will not be allowed to gather in the atrium or in open spaces unless there is a 6 ft distance

LIMITING EMPLOYEE TO PUBLIC INTERACTION

- Appointments will be scheduled with customers limited to the number of available interview spaces that can accommodate appropriate distancing and barriers.
- Customer meetings will be limited to no more than 5 people and required to meet in large space such as the board room or room 142 where 6 ft distance can be accomplished.
- Limit participation in meetings to essential, mandatory events approved by the Coordinator and attempt to avoid in-person meetings when practicable and appropriate. Virtual meetings will be the preferred method of meetings so all staff can participate who are working remotely.
- Phone/virtual contact will be the primary customer contact method until phase two of the phase in plan when limited in office appointments and home visits are allowed.
- Sneeze guards will be used in interview rooms when customers and staff are meeting.
- No handshaking and other unnecessary person-to-person contact in the workplace.
- Home visits will be limited to small groups (under 5 people) and Safety in the Field guidelines will be followed with every appointment.

CLEANING AND DISINFECTING

- Use disposable disinfectant wipes on commonly used surfaces (i.e. doorknobs, keyboards, remote controls, desks) on a regular and frequent basis.
- Maintenance staff will disinfect all areas such as bathrooms, common areas and shared electronic equipment routinely.
- Non-work-related packages should not be delivered to the office.
- Employees must sanitize shared phones, desks, offices, or other work tools and equipment at the start and end of each day or use.
- Restrooms and hard surfaces will be cleaned and sanitized regularly. Restrooms based on the frequency of use. Ensure adequate supply of soap and paper towels at all times.
- Implement procedures to increase frequency of cleaning and sanitizing of surfaces in the back-of-house. Avoid all food contact surfaces when using disinfectants.
- The breakroom will be used for holding food and for heating or cleaning up after a meal. Staff will not sit together during breaks.
- Check list of sanitization standards will be followed: W:\Units\Maintenance\COVID\C-19 Disinfecting and Work Chart.docx

PERSONAL PROTECTIVE EQUIPMENT (PPE)

- All employees and customers are required to wear face coverings when with others and in public areas. Coverings need to be cleaned or replaced daily. Disposable masks are provided at stations in the building.
- Gloves are provided and required for staff handling papers, or items that have come in contact with outside entities. Gloves, masks, and aprons are provided and required for staff handling food or any items brought in by customers/vendors.

DIRECTION TO EMPLOYEES

Self-Monitoring for Symptoms

- Employees that exhibit a combination of symptoms as listed at the CDC website for COVID-19, in particular a shortness of breath or coughing and a fever at or above 100.4 F should stay home from work until they are 'fever free' for 72 hours without the use of fever-reducing medicine.
- Employees that have come into contact with a confirmed case of COVID-19, employees that have been confirmed to have COVID-19, and employees that have been in contact with someone who has been quarantined for COVID-19, should notify their supervisors and Brown County Human Resources as soon as possible.
- Employees who are at work and are exhibiting symptoms such as shortness of breath, coughing and/or a fever may be assessed on a case-by-case basis by Brown County Human Resources to determine, with consultation from Public Health, whether measures such as sending such employees home until they are able to safely return to work are necessary.
- Screen and evaluate workers who have any of the symptoms that qualify them for testing. Staff and customers will be asked symptom checker questions each day. See this Brown County CoVID-19 Testing FAQ for symptom list.
- An employee who has, or is suspected of having, COVID-19 must follow the CDC guidelines to self-isolate for at least 10 days after symptoms onset. You can end isolation only after symptoms have improved and the fever has been gone for at least three consecutive days without medication.
- Case by case evaluation for quarantine or remote work will occur on a as needed basis.

Dress Code

- Business Causal attire is expected when engaging in paid work duties (unless previous approval related to role) including meeting with customers in person, virtually, or when attending online meetings.

General Guidelines

- Cover your coughs and sneezes with your sleeve or a disposable tissue and wash your hands after coughing or sneezing.
- Wash your hands often with soap and water for at least 20 seconds, especially before eating, after going to the bathroom, and after sneezing, coughing or blowing your nose. If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol. Instruction are posted in bathrooms and around the building.
- Staff are asked to consider the safety of their co-workers and customers as they make decisions that may put them at high risk outside of the office. Staff should consult their coordinator regarding plans that may put them at higher risk inside or outside the office.
- The ADRC has established a Covid Response Task Force to help mitigate questions and concerns as policy and protocols are built during this crisis. See your Coordinator for more information.

Grounded Cafe Precautions

- No buffet or self-serve options, including salad bars, condiments, etc.
- Carry out will occur until Phase three of Badger Bounce Back Plan to assure no more than 50 people are in the building at one time.
- Food Safety Manager certification is up to date for person in charge. Food handling training refresher for employees.
- Grounded staff will thoroughly detail, clean, and sanitize the entire cafe prior to resuming dine-in services and continue to do so regularly, focusing on cleaning and sanitation on high contact areas.
- Between use, staff will clean and sanitize digital ordering devices, check presenters, tabletops including condiments, and commonly touched areas, discarding single-use items.
- We will not use rolled preplaced silverware and eliminate table presets.
- Clean and sanitized condiment, utensil, and tableware stations will be provided to each newly seated customer.
- Grounded will use disposable paper menus discarding after each customer use. Otherwise, businesses (subject to this section in the order) should clean and sanitize reusable menus between each use by a patron. Non-touch menus are also acceptable. We will maximize posted menus that do not require handling.
- Floor plans for common dining areas will be reformatted to ensure that at least six feet of separation from seating to seating. Use physical barriers on booth seating when available.
- Party size will be limited to no more than six people per table.
- Where practical, we will consider a reservations-only business model or call-ahead seating.
- We will remind and enforce third-party delivery drivers and any suppliers of internal distancing requirements.
- We will use tech solutions where possible to reduce person-to-person interaction: mobile ordering, mobile access to menus to plan in advance, text on arrival for seating, and contactless payment options.
- We will not allow customers to congregate in waiting areas. We will have an order line and pick up line that provides physical distancing.
- Takeout and curbside pick-up services will be prioritized

ADRC of Brown County Criteria for Urgent Priority In-Person Contact 7.2.2020

The ADRC has an inherent responsibility to keep its staff and customers safe during this pandemic. It is important for the ADRC to take all measures to protect this vulnerable populations from the risk of serious infection and illness. It is, however, the ADRC's role to respond to urgent situations where customers need in person contact in order to prevent or delay institutionalization, protective service or significant benefit loss. This is difficult balance. The ADRC want to meet the needs of those without access to technology or phones in order to address health disparities that are apparent in low income, isolated and disconnected populations. All criteria and guidance has been reviewed and supported by the ADRC Board of Directors and Brown County Public Health. All staff and customers will be asked to practice safety measures of PPE, distancing, handwashing and masking during contacts.

In these situations, the ADRC can set up a planned appointment in person:

- Attempts to resolve urgent critical concerns virtually have been unsuccessful.
- The customer is not currently diagnosed with COVID-19, has not been exposed and is symptom free.
- Need for long term care requiring an in-person review is urgent.
- Other community resources are no available in person to resolve the issue-no case manager et..
- Customer has **no** access to a Phone, Computer, Internet Services.
- Customers is unable to navigate needed benefit or services that are critical due to sensory, cognitive or learning styles and virtual attempts have been made.

In these situations, the ADRC may consider a face to face contact that is unplanned and urgent:

- Non-contact would result in a loss of critical benefits and the customers has tried using traditional services previously.
- Customer has **no** access to a Phone, Computer, Internet Services.
- There is an immediate need for food, shelter, medical care and customers is presenting at the ADRC door.
- The customer is not currently diagnosed with COVID-19, has not been exposed and is symptom free.
- Coordinator has reviewed the case and approved the need for In-Person Contact.

Staff should consult their coordinator or Team Lead for guidance at any time to do a case consultation to review these criteria.

2021 Capital Project 5-Year Outlook Summary

Projects Proposed

As of 6/22/2020

Key for Funding Source:

ST = Sales Tax G=Grants and Aides O = Operating Revenues M = Municipal Funds P = Property Tax GF = General Fund Fund Balance TIF = TIF District S = Stadium District Sales Tax Refund CD = Charitable Donations D = Debt

2021 EXECUTIVE CAPITAL IMPROVEMENTS PROGRAM (CIP) - TO BE FUNDED BY SALES TAX

DIVISION/ DEPARTMENT	FUNDING SOURCE	DEPT PRIORITY	PROJECT DESCRIPTION	2021	2022	2023	2024	2025	TOTAL
HEALTH & HUMAN SERVICES:									
Human Services	ST	1	Crisis Assessment Center	572,559	-	-	-	-	572,559
	ST		Mental Health & SRCCCY	-	-	3,645,816	-	-	3,645,816
			Health & Human Services Sales Tax Request Total	572,559	-	3,645,816	-	-	4,218,375

2021 EXECUTIVE CAPITAL IMPROVEMENTS PROGRAM (CIP) - OTHER NON-SALES TAX & NON-BOND REQUESTS

DIVISION/ DEPARTMENT	FUNDING SOURCE	DEPT PRIORITY	PROJECT DESCRIPTION	2021	2022	2023	2024	2025	TOTAL
HEALTH & HUMAN SERVICES:									
Syble Hopp	CD	1	School Expansion	4,000,000	-	-	-	-	4,000,000
			Health & Human Services Request Total	4,000,000	-	-	-	-	4,000,000

11'8

Syble Hopp School
2020-2021
Plan for Re-Opening

Approved by BCCDEB
July 21, 2020

Key Resources and Partners in Decision Making

- Guidance from CDC, DHS, Brown and De Pere Health Departments
- School Partners (Medical Consultants, Health Departments)
- Brown County Resources (Health, Technology, Legal, Facilities, Human Resources)
- Weekly Administrator/Business Manager Meetings
- Weekly Administrator and Community Meetings (Healthcare, Business)
- Director of Special Education Meetings
- State Associations (DPI, WASBO, WASDA)
- Legal and Liability Counsel
- Parent Phone Calls (175) made by BCCDEB Administration
- Staff Survey (86 responses) and 7/20 Staff Meeting Feedback

Collective Agreements being worked on with Brown County School Administrators

- Screening Process (use of 3 questions)
- Masks (in progress)
- Transportation (maximum of one per seat with parent “opt-in” form)
- Outbreak Protocols
  - Individual basis at each school…work with local Health Departments
  - Health Department working of Flow Charts/Protocols that will be helpful
- Food Service (in progress)
- Communication – Common community message from Superintendents and potentially high profile community members.

Key Plan Considerations

- Safety of Students and Staff (#1 Priority)
- Guidance of Legal Counsel and Medical Providers/Healthcare
- Must be Flexible and Adaptable (Fluid)
  - Able to transition from one option to another
- Addresses Various Services Being Provided
  - Medically Fragile, Autism, Intellectual Disabilities
  - Various Age Groups (primary, middle, secondary)
  - Based on IEP's

Recommendation

Parent Options for Student Instruction and Services

- In-Person
- Blended (part-time in-person and part-time off-site and/or remote and join classroom at structured times via technology)
- Remote (student does everything off-site)
  - Virtual
  - Home Based

In-Person Learning

- All students are in the building
- Classrooms grouped into cohorts
- Students and staff following health safety guidelines (social distancing,
- Instruction aligned to Standards, Curriculum Maps, IEPs
  - 1:1 iPads will be used during classroom activities
  - Additional Job and Life ready materials have been purchased for Secondary level.
- Schedules revised to limit interactions between classrooms of students
  - Lunch in classroom
  - Music traveling to classrooms
  - No pool use at the beginning of the school year, if opened pool use will begin with aquatic therapy
  - No duplex overnight program
  - CBIs will be limited to outdoor opportunities initially
  - Community worksites…explore options if comfortable with staff safety protocols
- Seesaw used daily for communication with families

Blended Learning

- Students have remote and in-person learning opportunities that are determined by IEP teams
- Students and staff follow health safety guidelines
- Instruction aligned to Standards, Curriculum Maps, IEPs
  - 1:1 iPads will be used during learning opportunities
- Therapies able to be provided in 1:1 settings
- Seesaw used daily for communication with families

Remote Learning

- Students learn in the home environment as determined by IEP teams
  - Options include virtual, home based, scheduled times at school
- Instruction aligned to Standards, Curriculum Maps, IEPs
  - 1:1 iPads will be used during learning activities
  - Synchronous and asynchronous learning opportunities
  - Coaching of parent
  - Therapies provided virtually or home based
  - Materials provided directly to the home
- Seesaw used daily for communication with families

Staff Professional Learning
Planned for Week of August 10-13

- Staff, Student & Family Wellness
- Remote Instruction Tools and Resources
- Technology
- Student and Staff Safety Procedures
- Curricula and Resources

Safety Measures

- Pre-Arrival Screening
- Temperature Checks (Students = a.m./p.m.
- Temperature Scanner at entrance for adults
- Parent Education (masks, wellness, students home if not feeling well)
- Protective Gear (Ordered and Most Received)
    - Facemasks (must be worn)
    - Shields
    - Gowns
    - Gloves
    - Goggles

Safety Measures

- Masks
  - Required for adults
  - highly recommended students in classrooms, required for students when possible during transition throughout building/larger groups
  - Must consider that all of our students have special needs/disability
- Outbreak Procedures in Place (County still determining)
- No Visitors (includes volunteers, tours, etc.)
- Remain in Cohorts as much as possible
- Staff Meetings – small groups or virtually
- Transportation
  - Maximum of one student per seat (unless a family member).

Facility Considerations

- Room Identification and Changes
  - Two Isolation Rooms (current locker rooms)
  - Decrease traffic flow throughout the building
  - Room changes to decrease number of staff in room (Speech)
- Disinfecting of Building/Classrooms/Common Areas
  - Shift of responsibilities during day
  - Additional support in evenings
- HVAC/Air Exchange (Provider walk-through and recommendations)
  - Airflow/Exchange
  - Internal Rooms Air Circulation
  - Humidity Levels

Still to be Determined

- Pick Up/Drop Off Patterns and Procedures
- Visual Reminders (barriers, floor tape, signage)
- Additional leave for COVID related illness (self and family)
- Use of sensory courtyard
- Hiring of staff – what is the appropriate student to staff ratio
- Parent communication/expectations
- Back to School (Open House, Supplies)

Timeline

Staff

- Survey (June 29-July 10)
- Staff Meetings…July 20, 2020
- Professional Learning – Week of August 10-13
- Return to Work (August 25, 2020)

Parents

- Phone calls (Weeks of June 29-July 10)
- Parent Meetings (Week of August 3-6)
- School Starts (September 1)

Brown County Veterans Service Office

305 E. WALNUT STREET
P.O. BOX 23600
GREEN BAY, WISCONSIN 54305-3600 **JOSEPH AULIK**
PHONE (920) 448-4450 FAX (920) 448-4322 **VETERANS SERVICE OFFICER**

DIRECTOR'S REPORT – COUNTY VETERANS SERVICE OFFICE

7/21/2020

1. VA benefits were increased $10.2 million in 2019 to $114.3 million.

2. Economic Impact increased $19 million in 2019 to $226.3 million.

3. Retroactive Cash Payouts to veterans, survivors, and deponents in 2019 totaled $2.1 million.

4. Year-to-Date Cash Payouts to veterans, survivors, and dependents total $1.8 million.

5. Office moved to phone appointments to avoid in-person appointments due to the pandemic to keep our veteran community safe.

6. Veterans, survivors, and dependents are filing claims from the convenience of their home or other location by phone. This avoids them having to come downtown to the office and locate and pay for parking. With the electronic and mobile capabilities, we have today, access to all VA databases, and electronic submission of claims, clients are finding it easier to file for VA Benefits.

7. We have seen an uptick in the need to refer veterans and their families to counseling services as the current events are very stressful for them and we see an increased need for mental health services in the veteran community. We are working closely with our partners in the community to make sure those connections happen.

8. We have also seen an uptick in veterans filing for new mental health VA Disability claims or filing to increase their mental health VA disabilities due to the pandemic.

9. We hired Mike Keon, Veterans Benefits Specialist, to replace Laurie Eucke who, after approximately 8 years of service, provided excellent professional services to the veteran community garnering millions of dollars in VA benefits by filing Disability and Non-Service Connected Pension claims for them and navigating the complicated VA application process.

10. Year- to-date three veterans have taken their life by suicide in Brown County. In 2019 six veterans died by suicide. As a reminder, on average in Brown County six veterans die by suicide each year. In Wisconsin, on average 13 veterans die by suicide or 150 veterans annually. This has been the trend for the past 11 years. To combat this trend, we continue to aggressively market VA Benefits, via our Newsletter, Social Media, postal mailings, and other avenues.

100% Recycled Paper

August 19, 2020

TO THE HONORABLE CHAIRMAN AND MEMBERS
OF THE BROWN COUNTY BOARD OF SUPERVISORS

Ladies and Gentlemen:

RESOLUTION SUPPORTING THE
***COMMITMENT TO VETERANS SUPPORT AND OUTREACH ACT* (THE ACT)**

WHEREAS, the number of veteran suicides continues to rise nationwide, and approximately 14 out of each 20 veterans who currently die by suicide are not under United States Department of Veterans Affairs' (VA) care; and

WHEREAS, County Veterans Service Officers (CVSO) and Tribal Veteran Service Officers (TVSO) are often the first point of contact in the local community for veteran's services, and these Officers provide assistance to veterans regarding a wide range of benefits, including mental health services, service-connected disability and pension VA benefits, enrollment in VA health care, VA home loans, education benefits and available job placement assistance; and

WHEREAS, veterans are not always aware of available benefits, and CVSOs/TVSOs are often the first to inform veterans of their eligibility. CVSOs county employees are nationally accredited by the VA to prepare, present and prosecute VA claims, but currently there is no federal funding available for CVSOs; and

WHEREAS, there is legislation pending in the U.S. Congress and U.S. Senate known as the "*Commitment to Veteran Support and Outreach Act*" (the Act). The Act also includes TVSOs. The Act authorizes the Secretary of Veterans Affairs to enter into contracts with States, and/or to award grants to States to promote veterans' health and wellness, prevent suicide, improve outreach to veterans, support activities to assist in the development and submittal of claims (training), and to create new CVSO offices in states without CVSOs. If passed, the Act will authorize $50 Million annually for five years to support these initiatives, and to provide support to CVSO/TVSO offices

who currently assist veterans and their survivors with obtaining over $50 Billion in VA benefits annually.

NOW THEREFORE BE IT RESOLVED, that the Brown County Board of Supervisors hereby supports the passage of pending legislation in the United States Congress known as the "*Commitment to Veteran Support and Outreach Act*; and

BE IT FURTHER RESOLVED, that the Brown County Clerk is hereby authorized and directed to forward a copy of this resolution to all Wisconsin Counties, the Brown County Veterans Service Officer, the County Veterans Service Officer Association of Wisconsin (CVSOAWI), the State of Wisconsin Department of Veteran's Affairs (WDVA); the National Association of Counties (NACo) and the National Association of County Veterans Service Officers (NACVSO).

Fiscal Note: This resolution does not require an appropriation from the General Fund. The mailing cost to carry out this resolution is $33.15, and is within the existing 2020 Budget.

Respectfully submitted,

HUMAN SERVICES COMMITTEE

ADMINISTRATION COMMITTEE

Approved by:

_____

TROY STRECKENBACH
COUNTY EXECUTIVE

Date Signed: _____

20-066R
Authored by: Corporation Counsel
Approved by: Corporation Counsel

Brown County Veterans Service Office
305 E. WALNUT STREET
P.O. BOX 23600
GREEN BAY, WISCONSIN 54305-3600
PHONE (920) 448-4450 FAX (920) 448-4322

JOSEPH AULIK
VETERANS SERVICE OFFICER

RESOLUTION/ORDINANCE SUBMISSION TO COUNTY BOARD

DATE: 7/9/2020

REQUEST TO: Human Services Committee AND Administration Committee

MEETING DATE: 7/22/2020 AND 08-06-2020

REQUEST FROM: County Veterans Service Office
Joe Aulik, Director, County Veterans Service Office

REQUEST TYPE: ☒ New resolution ☐ Revision to resolution
☐ New ordinance ☐ Revision to ordinance

TITLE: SUPPORTING THE COMMITMENT TO VETERANS SUPPORT AND OUTREACH (CVSO) ACT

ISSUE/BACKGROUND INFORMATION:

I met with Senator Baldwin in December 2017 to propose legislation for federal funding for County Veterans Service Offices (CVSO) and Tribal Veterans Service Offices (TVSO). Senator Tammy Baldwin drafted SB 3320 and Representative Mike Levin (CA) drafted a companion bill HR 5516. This is the first federal legislation ever written of its kind to provide federal Grant funds for CVSO/TVSO offices. Funds can be used to promote health and wellness, prevent suicide, improve outreach to veterans, support activities to assist in the development and submittal of claims (training), or create new CVSO offices in states without CVSOs. The Brown County CVSO office will be able to apply for these funds to support our outreach efforts and support our annual VA Accreditation training requirements. Over 90% of federal VA claims filed are initiated from CVSO offices in the United States. **Currently we receive no federal funding to support our operations.**

ACTION REQUESTED:

Pass the resolution supporting the CVSO Act.

FISCAL IMPACT:

NOTE: *This fiscal impact portion is initially completed by requestor but verified by the DOA and updated if necessary.*

1. What is the amount of the fiscal impact? $33.15
2. Is it currently budgeted? ☒ Yes ☐ No ☐ N/A *(if $0 fiscal impact)*
    a. If yes, in which account? _____
    b. If no, how will the impact be funded? _____
    c. If funding is from an external source, is it one-time ☐ or continuous? ☐
3. Please provide supporting documentation of fiscal impact determination.

☒ **COPY OF RESOLUTION OR ORDINANCE IS ATTACHED**

BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-2188

Erik Pritzl, Executive Director

Phone (920) 448-6000 Fax (920) 448-6166

To: Human Services Board
Human Services Committee

From: Erik Pritzl, Executive Director

Date: July 9, 2020

Re: Executive Director's Report

General Updates for July:

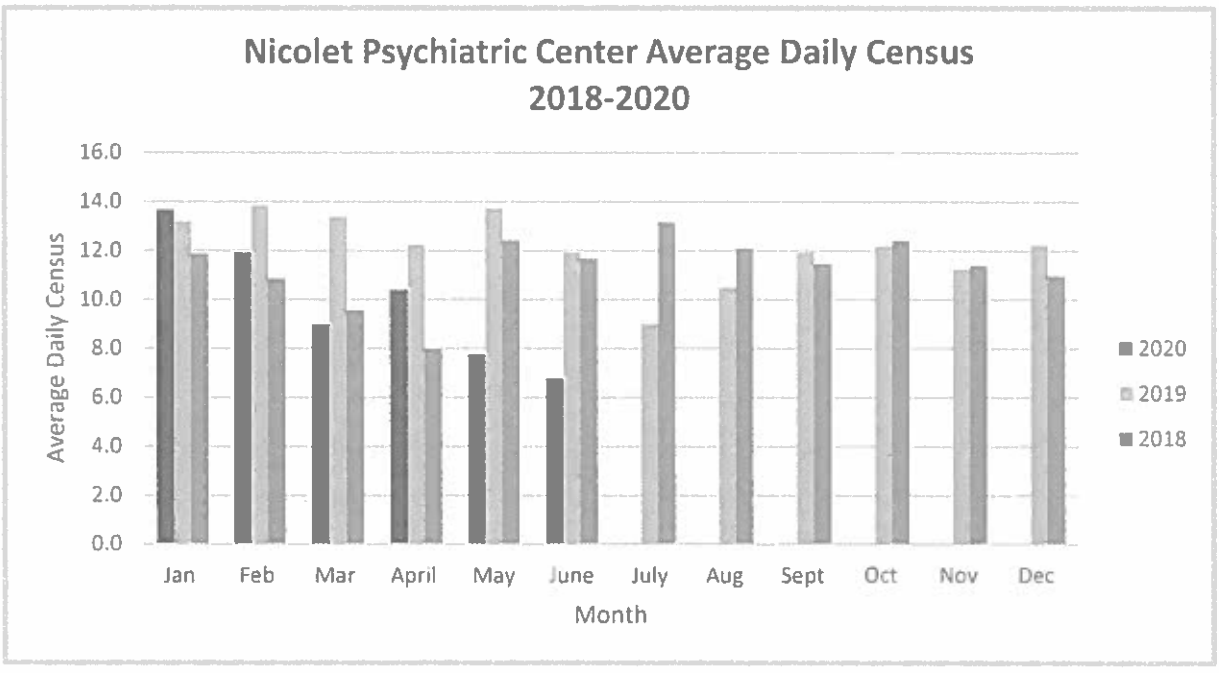
- Construction has not started at the site at the Community Treatment Center, but is expected to start soon. The project will extend into 2021, with expected completion within the first quarter. During the past few months, staff from the Community Treatment Center and Community Services divisions have been meeting to discuss the medical screening process and potential position needs to support the medical screening process at the Crisis Assessment Center. This needs to be identified for the 2021 budget.
- Planning for public access beyond appointment only to Health & Human Services buildings continues, but the date has been postponed until the trend in COVID 19 cases is showing a stable or downward direction. This will be evaluated no sooner than July 20th, and opening the buildings would take place with a minimum of one week's notice.
- Department management continues to support telework applications and is evaluating in more detail the number of staff needed on site for the mandated in-person services. This will allow the department to function with fewer staff members interacting, and assist in preventing the spread of COVID 19 among staff.
- Planning for the 2021 budget will take place in July, and meetings are scheduled with different program areas. At this time, there have not been notices or communications from state funding sources that revenues are being reduced. There are some areas for positions to be evaluated through the planning process including adding a position to support Avatar (electronic healthcare records system), and additional clinician time for law enforcement-mental health clinician teaming. Positions will need to be supported through available funding in the department, or increased revenues associated with position activity.
- For awareness, there were increases in Food Share Benefits issued related to Emergency Food Share benefits to maximum amounts for group size, and pandemic emergency benefits (for those families that receive free and reduced lunch) that were temporary.

The amount of Food Share benefits issued in Brown County went from $2.2M in January to $4.5M in May. The peak was $5.8M in April.

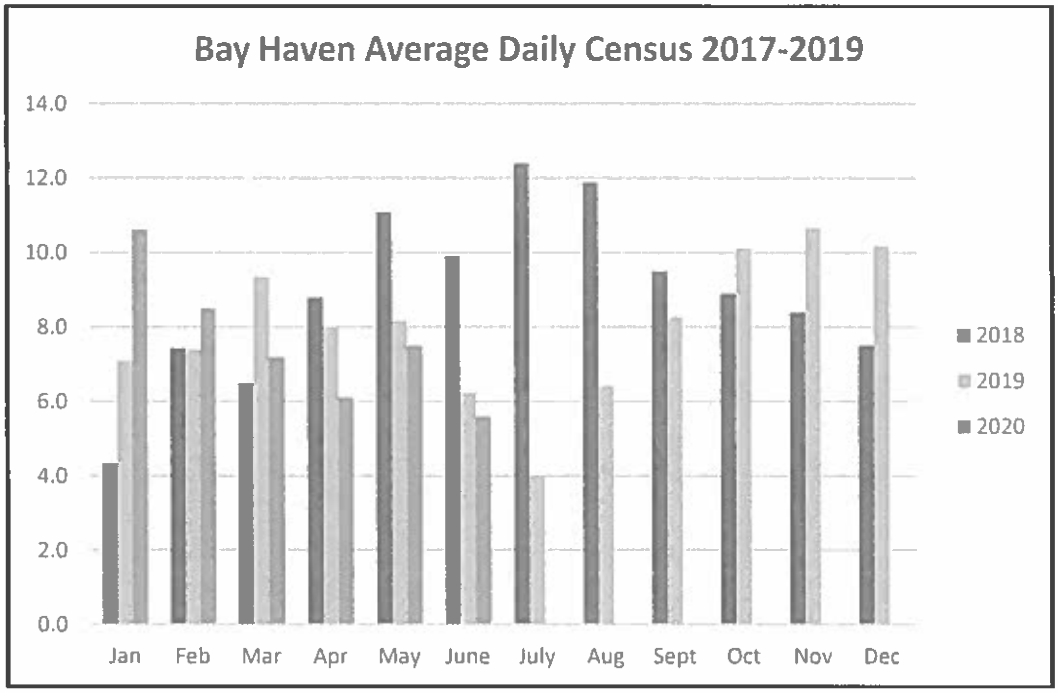
- Brown County Health & Human Services applied for a Community Partnership for Diversion from Youth Justice grant through the Wisconsin Department of Health Services. The purpose of the grant is to provide early intervention services to Brown County youth ages 12-17. Brown County is committed to providing an early youth diversion program that addresses several keys areas. Goals of the program include improving school attendance and performance, obtaining early intervention and access to mental health and AODA services, and improving healthy family engagement. Brown County HHS will be partnering with local community formal stakeholders to provide an effective community response. This grant was applied for in partnership with Rawhide to assist in program implementation and quality improvement processes to ensure program integrity and fidelity. This program will specifically service youth who are not attending school and in contact with another system (protective services or law enforcement), or youth who are truant and for whom all service options have been exhausted.

Community Treatment Center:

The average daily census at the Nicolet Psychiatric Center was higher earlier this year, but has declined during the second quarter of the year. The total number of admissions in 2020 (325) has been consistent with 2019 (320), with the average length of stay decreasing from 7 days to 6 days. Voluntary admissions are slightly higher this year compared to the prior year, and account for approximately 29% of hospital admissions. The chart below provides three years of data for comparison purposes.



The Bay Haven crisis stabilization Community Based Residential Facility (CBRF) also showed a higher average daily census in the beginning of the year but has since shown a decline in the average daily population. There have been some challenges with admissions that will be covered in the report from the Hospital & Nursing Home Administrator. The chart below shows three years of data for comparison purposes.



BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-3600

Phone (920) 448-6000 Fax (920) 448-6166

Erik Pritzl, Executive Director

To: Human Services Board and Human Services Committee

Date: July 9, 2020

Subject: 5/31/20 YTD Financial Results for Community Treatment Center and Community Services

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Community Treatment Center

Financial results through 5/31/20 for the Community Treatment Center show revenues at 43.5% of the annual budget and expenses at 42.2% compared to a benchmark of 41.7% after 5 of 12 months. This results in an overall favorable YTD budget variance of approximately $181,000.

May YTD revenue shows a favorable variance of approximately $253,000 primarily due to high census for the Bayshore Village Nursing Home in 2020 and favorable prior year rate adjustments. Expenses have an overall unfavorable variance of approximately $72,000 due primarily to high Intra-county expense for Technology Services and Temporary Help expense (nursing agency) costs. Higher agency costs are offset by lower Personnel costs due in part to open positions including numerous part-time positions which provide a significant amount of weekend coverage.

2020 YTD census compared to budget is as follows:

	Actual	Budget
Bayshore Village	62.3	60.1
Nicolet Psychiatric Center	10.6	12.5
Bay Haven CBRF	7.6	7.7

Community Services

Financial results for Community Services through 5/31/20 include revenues at 41.7% of the annual budget which matches the benchmark after 5 months, and expenses at 42.2% or 0.5% over budget for the first 5 months of the year. This resulted in an overall unfavorable budget variance of approximately $294,000 YTD for the Community Services division.

Personnel Costs show a favorable variance of just under $300,000 due largely to less than projected Fringe Benefits expense. There was also a significant transfer of labor costs in May from Community Services to the Public Health division for time spent by employees at the Community Isolation and Quarantine Sites (CIQS) for which costs will be reimbursed by the state of Wisconsin DHS. Operating Expenses, however, show a significant unfavorable variance due to high intra-county charges from Technology Services and Purchased Services which include unusually high charges for child state mental health facility stays, foster home payments, and Birth to Three program costs. Later in the year the county generally receives credits related to state mental health facility stays for children who are covered by Medicaid.

Respectfully Submitted,

Eric Johnson
Finance Manager

Community Treatment Center

Through 05/31/20 (unaudited)

Summary Income Statement

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
Fund 630 - Community Treatment Center								
REVENUE								
Property taxes	3,364,317.00	.00	3,364,317.00	280,359.75	1,401,798.75	1,962,518.25	41.7%	1,333,508.35
Intergov Revenue	4,764,300.00	.00	4,764,300.00	494,008.63	2,282,810.54	2,481,489.46	47.9%	1,782,160.87
Public Charges	4,296,105.00	.00	4,296,105.00	322,120.93	1,811,832.46	2,484,272.54	42.2%	1,998,194.09
Miscellaneous Revenue	1,330,935.00	.00	1,330,935.00	95,269.70	488,419.47	842,515.53	36.7%	590,675.52
Other Financing Sources	.00	.00	.00	.00	.00	.00	+++	122,965.00
REVENUE TOTALS	$13,755,657.00	$0.00	$13,755,657.00	$1,191,759.01	$5,984,861.22	$7,770,795.78	43.5%	$5,827,503.83
EXPENSE								
Personnel Costs	9,755,625.00	.00	9,755,625.00	831,595.40	4,021,466.79	5,734,158.21	41.2%	3,803,754.84
Operating Expenses	4,409,361.00	.00	4,409,361.00	436,363.65	2,000,463.88	2,327,505.65	45.4%	1,762,176.45
Outlay	115,000.00	.00	115,000.00	.00	.00	115,000.00	0.0%	836.32
EXPENSE TOTALS	$14,279,986.00	$0.00	$14,279,986.00	$1,267,959.05	$6,021,930.67	$8,176,663.86	42.2%	$5,566,767.61
Fund 630 - Community Treatment Center Totals								
REVENUE TOTALS	13,755,657.00	.00	13,755,657.00	1,191,759.01	5,984,861.22	7,770,795.78	43.5%	5,827,503.83
EXPENSE TOTALS	14,279,986.00	.00	14,279,986.00	1,267,959.05	6,021,930.67	8,176,663.86	42.2%	5,566,767.61
Grand Totals	($524,329.00)	$0.00	($524,329.00)	($76,200.04)	($37,069.45)	($405,868.08)		$260,736.22

Community Services

Through 05/31/20 (unaudited)

Summary Income Statement

Account Classification		Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
Fund 201 - Community Services									
REVENUE									
Property taxes		16,003,855.00	.00	16,003,855.00	1,333,654.57	6,668,272.85	9,335,582.15	41.7%	6,660,978.45
Intergov Revenue		35,130,728.00	.00	35,130,728.00	2,823,125.98	14,773,339.44	20,357,388.56	42.1%	14,131,415.02
Public Charges		2,563,164.00	.00	2,563,164.00	183,166.82	894,782.10	1,668,381.90	34.9%	951,497.37
Miscellaneous Revenue		222,035.00	.00	222,035.00	13,822.45	67,617.07	154,417.93	30.5%	11,787.31
Other Financing Sources		.00	.00	.00	101,799.39	101,799.39	(101,799.39)	+++	297,188.00
	REVENUE TOTALS	$53,919,782.00	$0.00	$53,919,782.00	$4,455,569.21	$22,505,810.85	$31,413,971.15	41.7%	$22,052,866.15
EXPENSE									
Personnel Costs		22,471,025.00	.00	22,471,025.00	1,820,853.53	9,063,261.67	13,407,763.33	40.3%	8,431,690.04
Operating Expenses		31,448,757.00	.00	31,448,757.00	2,627,512.85	13,663,103.77	17,779,875.97	43.4%	13,836,397.71
Outlay		.00	84,300.00	84,300.00	73,158.05	73,158.05	11,141.95	86.8%	.00
	EXPENSE TOTALS	$53,919,782.00	$84,300.00	$54,004,082.00	$4,521,524.43	$22,799,523.49	$31,198,781.25	42.2%	$22,268,087.75
Fund 201 - Community Services Totals									
	REVENUE TOTALS	53,919,782.00	.00	53,919,782.00	4,455,569.21	22,505,810.85	31,413,971.15	41.7%	22,052,866.15
	EXPENSE TOTALS	53,919,782.00	84,300.00	54,004,082.00	4,521,524.43	22,799,523.49	31,198,781.25	42.2%	22,268,087.75
	Grand Totals	$0.00	($84,300.00)	($84,300.00)	($65,955.22)	($293,712.64)	$215,189.90		($215,221.60)

BROWN COUNTY COMMUNITY TREATMENT CENTER JUNE 2020 BAY HAVEN STATISTICS							
	JUNE	YTD 2020	YTD 2019		JUNE	YTD 2020	YTD 2019
ADMISSIONS							
Voluntary - Mental Illness	10	122	205	**AVERAGE DAILY CENSUS**	5.6	7.3	7.7
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	**INPATIENT SERVICE DAYS**	167	1322	1389
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	**BED OCCUPANCY**	37%	49%	51%
Other - EPP	0	0	1				
TOTAL	10	122	206	**DISCHARGES**	13	128	211
READMIT WITHIN 30 DAYS				**DISCHARGE DAYS**	162	1666	1817
Readmit within 30 days	0	19	19				
				AVERAGE LENGTH OF STAY	12	13.0	9
IN/OUT	0	8	8				
ADMISSIONS BY COUNTY				**AVERAGE LOS BY COUNTY**			
Brown	9	113	182	Brown	14	15	8
Door	0	2	6	Door	0	1	4
Kewaunee	1	1	3	Kewaunee	1	1	2
Oconto	0	2	5	Oconto	0	1	12
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	0	5	Shawano	0	0	4
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	3	2	Outagamie	0	5	3
Manitowoc	0	0	1	Manitowoc	0	0	0.1
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	1	2	Other	0	0	2
TOTAL	10	122	206	**TOTAL**	12	12	8

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BROWN COUNTY COMMUNITY TREATMENT CENTER JUNE 2020 NICOLET PSYCHIATRIC CENTER STATISTICS							
	JUNE	YTD 2020	YTD 2019		JUNE	YTD 2020	YTD 2019
ADMISSIONS							
Voluntary - Mental Illness	15	93	85	**AVERAGE DAILY CENSUS**	6.8	10.0	13.0
Emergency Detention - Mental Illness	21	185	188				
Return from Conditional Release	7	43	43	**INPATIENT SERVICE DAYS**	203	1801	2359
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	2	4	**BED OCCUPANCY**	42%	62%	81%
Other	0	2	0				
TOTAL	43	325	320	**DISCHARGES**	43	330	321
READMIT WITHIN 30 DAYS				**DISCHARGE DAYS**	185	1845	2282
Readmit within 30 days	3	37	36				
				AVERAGE LENGTH OF STAY	4	6	7
IN/OUT	6	22	14				
ADMISSIONS BY COUNTY				**AVERAGE LOS BY COUNTY**			
Brown	39	288	285	Brown	5	6	8
Door	0	4	5	Door	0	2	11
Kewaunee	1	1	2	Kewaunee	3	1.5	0
Oconto	0	2	6	Oconto	0	0	16
Marinette	1	1	0	Marinette	3	2	0
Shawano	1	3	4	Shawano	1	1	2
Waupaca	0	1	0	Waupaca	0	0	0
Menominee	0	0	2	Menominee	0	0	1
Outagamie	0	3	7	Outagamie	0	1	3
Manitowoc	0	8	2	Manitowoc	0	1	1
Winnebago	0	1	0	Winnebago	0	0	0
Other	1	13	7	Other	3	3	11
TOTAL	43	325	320	**TOTAL**	4	5	7

Bayshore Village
JUNE
2020 Statistics

NURSING HOME			
ADMISSIONS	**JUNE 2020**	**Yr to Date 2020**	**Yr to Date 2019**
From Nicolet Psychiatric Center	0	0	1
From General Hospital	0	0	0
From Nursing Home	0	0	4
From Home	0	2	0
From Residential Care Facilities	0	3	1
Protective Placement	0	3	12
Other	0	0	0
Total	0	8	18
Re-admit from hospital stay (Unit chart was not closed)	0	0	0
DISCHARGES	**JUNE 2020**	**Yr to Date 2020**	**Yr to Date 2019**
To Nicolet Psychiatric Center	0	0	0
To General Hospital	0	0	0
To Nursing Home	0	0	0
To Home	0	1	0
To Alternate Care Programs	0	0	0
To Residential Care Facilities	0	4	3
Expired	1	5	9
Other	0	0	1
Total	1	10	13
Bed Occupancy Including Payable	99.3	98.8	95.2
(Bed Hold Days)			
D/C to Hospital (Unit chart not closed)	0	2	0
Total Service Days	**JUNE 2020**	**Yr to Date 2020**	**Yr to Date 2019**
SNF - (Skilled Nursing Facility)	1849	11288	11029
Paid Bed Hold Days	4	32	75
Total Payable Days	1853	11320	11104
Unpaid Bed Hold Days	0	0	0
Total	1853	11320	11104
Number days D/C to hospital (not billable)	0	0	0
Average Daily Census	**JUNE 2020**	**Yr to Date 2020**	**Yr to Date 2019**
Avg Census (Payable Days)	98.0	98.7	94.5
(total days/total beds)			
Avg Census (All Days)	98.0	98.7	94.5
(total days/total beds)			
Avg. Daily Census Bayshore Village(63 Beds)	61.8	62.2	60.1
** Nursing Home client with DD1A Level of Care			

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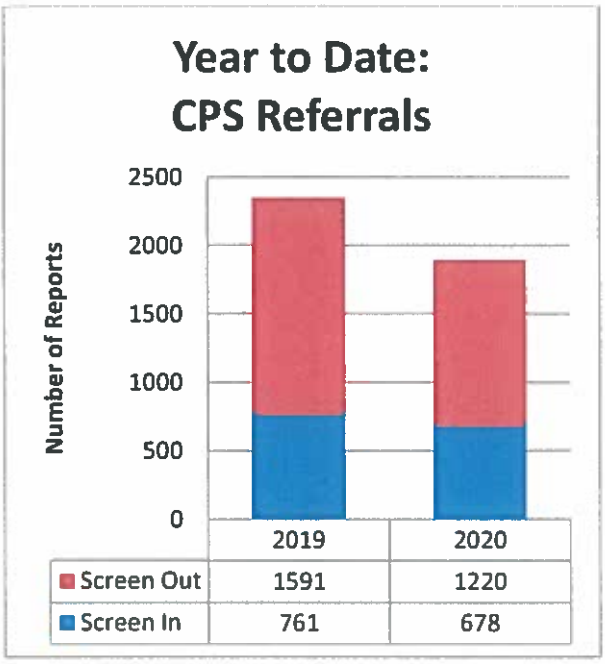
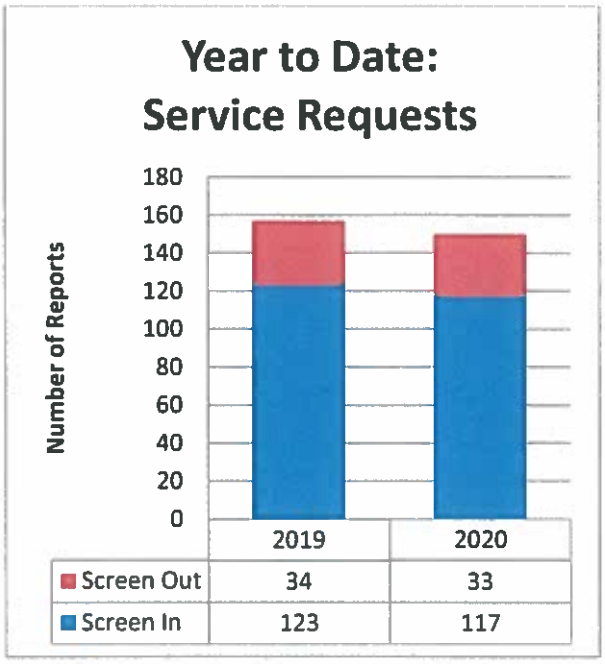
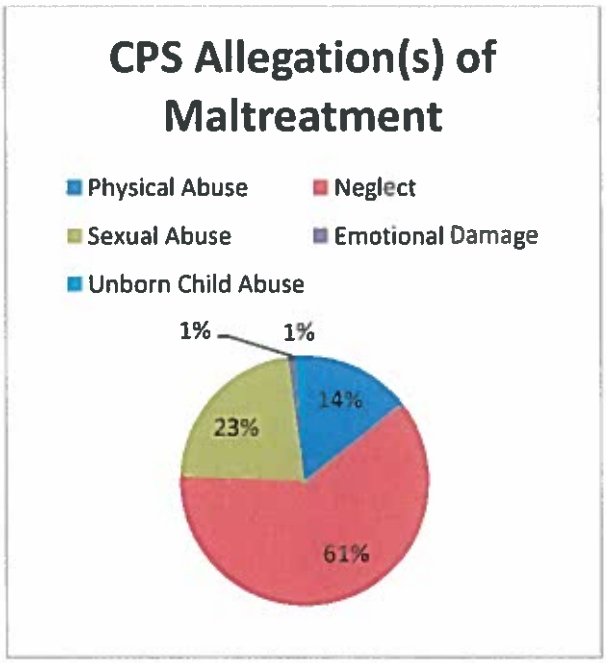
CTC Double Shifts Worked — June 1-30, 2020

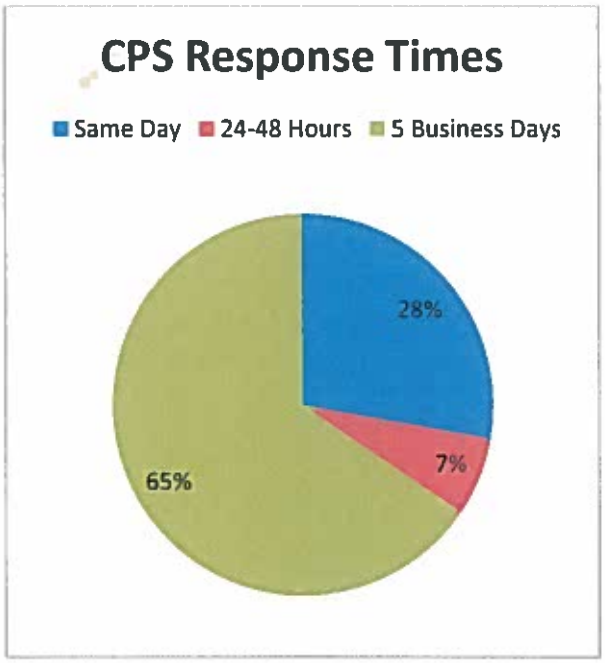
Employee Name	Classification	Date(s)	Shifts Worked
Begalke, John	CNA	June 5, 6, 7, 14, 16, 18, 19, 20, 23, 26, 27, 28, 29	PM / NOC
Harrill, Diane	CNA	June 4, 5, 6, 7, 20, 21, 22, 24, 25	PM / NOC
Harrill, Linda	CNA	June 13	AM / PM
Joachim, Bob	CNA	June 28	AM / PM
Kosterman, Kaela	CNA	June 8, 10, 11, 21	PM / NOC
Molina, Brandon	LPN	June 5	AM / PM
Spencer, Brenda	LPN	June 14, 26	AM / PM
Weso, Binnay	RN	June 23, 24	AM / PM
Winstin, Ava	CNA	June 2	PM / NOC

Child Protection Statistics: June 2020









In the month of June, select staff participated in Applied Learning Communities. These virtual seminars were facilitated by the Wisconsin Child Welfare Professional Development and introduced additional techniques to engage children and their families during the pandemic. This opportiunity offered additional resources to continue to connect with families virtually while ensuring children are safe. The child protection team continues to pivot their response in order to protect the most vulnerable in this community.

HEALTH AND HUMAN SERVICES
2020 PROVIDER CONTRACT LIST - 7/2/2020

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
101 Mobility (Mobility 101 in Avatar)	Medical/therapeutic supplies and equipment and home modifications	Children	$35,000
Acceptional Minds	Living skills for autistic and/or behaviorally-challenged children and their families	Children	$500,000
A & J Vans	Vehicle modifications for families with disabled children	Families of disabled children	$65,000
Adams L AFH	3-4 bed traditional adult family home	MH/AODA	$61,500
ADL Monitoring Solutions	UA observed collection and transport for veterans treatment court	AODA adults	$15,000
Advocates for HTL	Treatment foster care placing agency, group social/learning skills, respite care, CCS Services	High behavioral needs children	$945,000
Affinity Health (St. Elizabeth Hospital & Affinity Medical Group)	Inpatient detox services	MH/AODA	$25,000
Almost Family - **SEE ALMOST FAMILY PERSONAL CARE AS OF 5/1/20**	Children's respite and supportive home care	Children with long- term care needs	$25,000
Almost Family Personal Care LLC	Children's respite and supportive home care	Children with long- term care needs	$45,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children with long- term care needs	$60,000
Anna's House Assisted Living	CBRF (assisted living)	MH/AODA	$100,000
ASPIRO	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	$940,000
Assisted Living by Hillcrest (Allouez Parkside Village #1 and #2)	CBRF (assisted living) for APS use	At-risk adults	$75,000
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	$10,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	$250,000
Berry House (Robert E. Berry House)	CBRF (assisted living) that takes individuals with backgrounds in violent crimes	MH	$115,000
Better Days Mentoring	Youth mentoring services, daily living skills, CCS services	Youth	$750,000
Bike Hub	Specialized bicycles and/or bike modifications for children with disabilities	Children with long-term care needs	$35,000
Boll Adult Care Concepts	Corporate adult famiy home (assisted living) with CCS services for high needs behavioral health	MH/AODA	$300,000
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	$500,000
Caravel Autism Health	Social learning groups for children with social communication challenges	Children with long- term care needs	$30,000

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HEALTH AND HUMAN SERVICES
2020 PROVIDER CONTRACT LIST - 7/2/2020

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used sparingly)	PD with MH issues	$60,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	$160,000
Century Oaks	CBRF	MH/AODA	$145,000
CP Center	Respite and daily living skills	Children with long- term care needs	$65,000
Childrens Service Society	Treatment foster care placing agency	Children	$10,000
Chileda Institute	Children high-needs residential care center (RCC)	High behavioral needs children	$175,000
Cisler Construction	Home remodeling/modifications	Families of long-term care children	$50,000
Clarity Care	CBRF (assisted living) home health care	PD with MH issues	$72,000
Clinicare - Milwaukee Academy	Youth (all female) high-needs residential care center (RCC); serve sex-trafficing victims	High behavioral needs children	$145,000
Communication Pathways	Social learning groups for children with social communication challenges	Children with long- term care needs	$60,000
Compass Development	CBRF (assisted living)	PD with MH issues	$70,000
Cordoba Residence	1-2 bed corporate adult family home (AKA 'Community Care Home') specializing in 1:1 care	MH needing 1:1 care	$210,000
Curative Connections	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	$390,000
Curo Care	Corporate adult family homes (assisted living)	PD with MH issues	$200,000
Deer Path Assisted Living	CBRF, corporte adult family homes (assisted living)	MH/AODA	$145,000
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	$285,000
Dynamic Family Solutions	Family counseling/treatment programs, CCS services	Families of juvenile offenders	$20,000
Encompass Child Care	Child day care	Children	$50,000
Engberg AFH	1-2 bed traditional adult family home	MH	$22,000
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with long- term care needs	$65,000
Expressive Therapies	Music therapy for children	Children with long- term care needs	$20,000
Family Services of Northeast Wisconsin	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	$3,315,000
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile offenders	$290,000

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HEALTH AND HUMAN SERVICES
2020 PROVIDER CONTRACT LIST - 7/2/2020

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
Family Works Programs	Treatment foster care placing agency	Children	$25,000
Foundations Health and Wholeness	Treatment foster care placing agency and CCS Services	Children and adults	$150,000
Friendship House	Group home for juvenile offenders	Juvenile offenders	$100,000
The Gathering Place	CCS peer support services	MH/AODA	$32,000
Generations Community Services	CCS services	Children	$100,000
Golden House	Domestic abuse services	Adults in need	$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	$24,000
Goodwill Industries	Prevocational services	PD with MH issues	$2,500
Green Bay Area Builders	Home remodeling/modifications	Families of long-term care children	$50,000
Greenfield Rehabilitation Agency	Birth to 3 services	Children with disabilities	$410,000
Helping Hands Caregivers	Supportive home care, children's respite	PD with MH issues; children with diabilities	$25,000
Home Instead Senior Care	Supportive home care	PD with MH issues	$8,000
Homes for Independent Living	CBRF (assisted living)	MH	$200,000
Hopeful Haven	Treatment foster care placing agency	Children	$65,000
HME Home Medical	Medical and therapeutic supplies and equipment	Children	$35,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	$65,000
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	$35,000
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	$95,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	$1,765,000
Jackie Nitschke Center	AODA residential and intensive outpatient services	AODA adults and youth	$175,000
Jacobs Fence	Fence building and repair	Families of long-term care children	$90,000
KCC Fiscal Agent Services	Payor of client-hired personal care workers	Families of long-term care children	$985,000
KUEHG - Kindercare	Child day care	Children	$85,000
Kismet Advocacy	Mentoring, living skills for autistic and/or behaviorally-challenged children and their families	Children with long- term care needs	$925,000
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	$48,000
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	$150,000
Linked Living Homes - Seniors First	Home remodeling/modifications specifically for those with diabilities	Families of long-term care children	$100,000

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HEALTH AND HUMAN SERVICES
2020 PROVIDER CONTRACT LIST - 7/2/2020

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	$1,105,000
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	$500,000
Macht Village Programs (MVP)	Respite care, counseling, daily living skills, treatment foster care child placing agency	High behavioral needs children	$700,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	$55,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	$76,500
Milestones Behavioral Pediatrics	Social learning groups for children with social communication challenges	Children with long- term care needs	$20,000
MobilityWorks	Vehicle modifications for families with disabled children	Families of disabled children	$20,000
Moon Beach Camp	Summer camp for children with autism	Children with long-term care needs	$20,000
Mooring Programs (Apricity)	AODA residential services	AODA adults	$120,000
My Brother's Keeper	Male Mentoring Program	Juvenile males	$10,000
Mystic Meadows	Corporate AFH (assisted living)	MH/AODA	$320,000
NEW Community Shelter	Homeless sheltering services	MH	$40,000
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	$125,000
Nova Counseling Services	AODA residential services	AODA adults	$50,000
Nurses PRN Home Care	Skilled nursing services	Children	$45,000
ODTC - Genesee Lake School	Residential care center (RCC) for lower functioning teens	Developmentally delayed youth	$175,000
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	$35,000
Options for Independent Living	CCS peer support services, home modification assessments	MH/AODA	$10,000
Options Treatment Program	AODA treatment	AODA youth and adults	$20,000
Paragon Industries	Daily respite care	Children with long-term care needs	$285,000
Parmentier AFH	3-4 bed traditional adult family home	MH	$44,500
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	$375,000
Pillar and Vine	Treatment foster care placing agency	Children	$25,000
Prevea Health WorkMed	Drug screenings	CPS parents, AODA, JJ youth	$90,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	$250,000
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	$120,000
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	$100,000
Rawhide	Residential care center (RCC) for juvenile offenders	Juvenile offenders	$400,000

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HEALTH AND HUMAN SERVICES
2020 PROVIDER CONTRACT LIST - 7/2/2020

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
REDI Transports	Provides secure transportation to/from GB to other state facilities	MH, JJ	$65,000
Rehabilitation House	Transitional CBRF (assisted living) for co-occurring AODA/MH	MH/AODA	$60,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	$200,000
Saint A	Treatment foster care placing agency	Children	$42,000
Social Thinkers	Social learning groups for children with social communication challenges	Children with long-term care needs	$22,500
Smith Receiving Home	Receiving home for emergency placements	Children in need	N/A
Spectrum Behavioral Health	CCS services	Children	$120,000
St. Charles Youth & Family Services	Treatment foster care placing agency	Children	$30,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	$215,000
Tellurian	Residential detox	AODA	$55,000
Tim Halbrook Builders	Home remodeling/modifications	Families of long-term care children	$50,000
Tomorrow's Children	Children high-needs residential care center (RCC)	High behavioral needs children	$100,000
Treatment Providers (Dr. Fatoki)	Medication Assisted Treatment (MAT) for opiod abuse treatment	AODA	$60,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	$1,000,000
United Translators	Interpreter/translation services	Non-english speaking	$10,000
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	N/A
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	$1,400,000
Walking and Wheeling	Medical/therapeutic supplies and equipment and home modifications	Children	$50,000
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	$200,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	$26,000

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Brown County Health and Human Services
New Non-Contracted and Contracted Providers
July 2, 2020

REQUEST FOR NON-CONTRACTED PROVIDER			
PROVIDER	**SERVICE DESCRIPTION**	**NOT-TO-EXCEED AMOUNT**	**DATE**
Individual	Respite care for CPS children	$10,000	6/2/20
Individual	Respite and supportive home care for CPS family	$10,000	6/4/20
Individual	Supportive home care for CPS child in foster care	$10,000	6/4/20
Individual	Respite and supportive home care for CPS family	$10,000	6/4/20
Individual	Respite care for CPS children	$10,000	6/16/20

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	**SERVICE DESCRIPTION**	**TARGET CLIENTS**	**NOT-TO-EXCEED CONTRACT AMOUNT**	**DATE**
Century Oaks	CBRF	MH/AODA	$145,000	6/1/20
Linked Living - Seniors First Remodeling	Home modification	Families of children with disabilities	$100,000	6/1/20