

BOARD OF SUPERVISORS

Brown County



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HUMAN SERVICES COMMITTEE

Erik Hoyer, Chair
Patrick Evans, Vice Chair
Joan Brusky, Thomas De Wane, Aaron Linssen

HUMAN SERVICES COMMITTEE

Wednesday, March 27, 2019

6:00 pm

Room 200, Northern Building
305 E. Walnut Street, Green Bay

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 February 27, 2019.

Comments from the Public

1. Review Minutes of:
 - a. Aging & Disability Resource Center Executive/Finance Committee (June 22, 2017).
 - b. Aging & Disability Resource Center Board Meeting (February 28, 2019).
 - c. Board of Health (November 13, 2018 and January 15, 2019).
 - d. Human Services Board (February 14, 2019).

Communications

2. Communication from Supervisor Ballard re: For the Brown County Board of Health to cease sharing demographic and personal information of residents with drug companies and other third parties for the purpose of sending out notifications of missed vaccinations. Instead, this essential educational program should be operated in-house and a budget adjustment of \$2,500 would be needed. Doing this in-house is consistent with other health departments in the state; allows the program to continue at a low cost; and respects the privacy rights of the citizenry.
Motion at February meeting: To hold 30 days to receive additional information from the Health Department.

Wind Turbine Update

3. Receive new information – Standing Item.

Veterans Services

4. Budget Adjustment Request (19-027): Any increase in expense's with an offsetting increase in revenue.

Board of Health

5. Draft and enact a policy relative to incidents of contamination by any government agency or detection of contamination in exceedance of State Statutes because we find the situation with the Port authority delay unacceptable. *See Item 6 in 1/15/19 Board of Health Minutes.*

Health & Human Services Department

6. Budget Adjustment Request (18-148): Any increase in expenses with an offsetting increase in revenue.
7. Budget Adjustment Request (18-149): Any increase in expenses with an offsetting increase in revenue.
8. Resolution Regarding Table of Organization Change Health and Human Services Department – Community Services Addition of One CLTS Social Worker/Case Manager.
9. Executive Director’s Report.
10. Financial Report for Community Treatment Center and Community Services.
11. Statistical Reports.
 - a. Monthly CTC Data.
 - i. Bay Haven Crisis Diversion.
 - (1) Corrected January 2019 Statistics.
 - (2) February 2019 Statistics.
 - ii. Nicolet Psychiatric Center.
 - iii. CTC Double Shifts.
 - b. Child Protection – Child Abuse/Neglect Report.
 - c. Monthly Contract Update.
12. Request for New Non-Continuous and Contract Providers and New Provider Contracts.

Aging & Disability Resource Center – No items.

Syble Hopp – No items.

Other

13. Audit of bills.
14. Such other Matters as Authorized by Law.
15. Adjourn.

Erik Hoyer, 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 on Wednesday, February 27, 2019 in Room 200 of the Northern Building, 305 E. Walnut Street, Green Bay, WI.

Present: Chair Hoyer, Supervisor Evans, Supervisor Brusky, Supervisor Linssen, Supervisor De Wane
Also Present: Supervisor Borchardt, Supervisor Ballard, Community Treatment Center Administrator Ed Sommers, Director of Nursing Samantha Behling, Health and Human Services Director Erik Pritzl, Community Services Administrator Jenny Hoffman, Finance Manager Eric Johnson, Public Health Officer Anna Destree, Nurse Manager Ann Steinburger, Judge Zuidmulder, TAD/CJCC Court Supervisor Mark Vanden Hoogen, CVSO Joe Aulik, other interested parties.

I. Call Meeting to Order.

The meeting was called to order by Chair Hoyer at 6:00 pm.

II. Approve/Modify Agenda.

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to approve. Vote taken.
MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of January 23, 2018.

Motion made by Supervisor Brusky, seconded by Supervisor De Wane to approve. Vote taken.
MOTION CARRIED UNANIMOUSLY

Comments from the Public - None.

1. Review Minutes of:

- a. Aging & Disability Resource Center (December 13, 2018).
- b. Children With Disabilities Education Board (January 15, 2019).
- c. Criminal Justice Coordinating Board (January 15, 2019).
- d. Human Services Board (January 10, 2019).
- e. Veterans' Recognition Subcommittee (January 15, 2019).

Motion made by Supervisor Linssen, seconded by Supervisor Brusky to suspend the rules to take Items 1 a-e together. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Motion made by Supervisor Linssen, seconded by Supervisor Brusky to approve Item 1 a-e. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Treatment Courts

2. Treatment Court Update from Judge Zuidmulder.

Judge Zuidmulder provided two handouts, copies of which are attached. He thanked the Committee for allowing him to speak and informed that there are currently 99 participants in the various treatment courts and he expects that number to increase to 115 – 125 by the end of the year.

Judge Zuidmulder presides over both the Mental Health Court and the NEW Veterans Treatment Court. He directed the Committee's attention to the last page of the first handout and indicated

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that law enforcement officers have the ability to print out every police contact with anyone as well as every police call to every residence. As shown on the handout, prior to participants being involved in treatment courts, there were 4,118 police calls/contacts and jail placements of 1,702 days. After becoming involved in the treatment courts, the police calls/contacts were reduced to 364 and jail days placements were reduced to 177. These figures are a dramatic example of how the treatment courts have freed up law enforcement to respond to emergencies and protect our families and the treatment courts have also had a significant contribution to reducing the jail population.

Judge Zuidmulder continued that when the Veterans Court started, it was taking both high risk/high need individuals and well as low risk/low need individuals. Evidence based research says that minor offenders should not be mixed with major offenders and Judge Zuidmulder then made the decision that the Veterans Court will be for those with high risks and high needs. However, the veterans community has the motto "no veteran left behind" and in trying to be responsive to all veterans issues, he has offered to find some time to do a second track which will be designed for low risk/low need veterans who would likely react positively to being brought before a judge and held accountable for their behaviors and commended on the progress they are making. This second track model is going to be studied and Judge Zuidmulder will keep the Committee advised. The second track would not have any impact on the county services because the participants would not be involved with a case manager; they would have a probation agent they report to. There would not be the intensive oversight that is necessary with the high risk/high need individuals.

Supervisor Evans supports the treatment courts and feels they are a complete success and he enjoys attending the graduations. He questioned information in the handout and regarding the reduced number of post participation jail placements of 177. TAD/CJCC Coordinator Mark Vanden Hoogen explained that that number reflects the number of instances, not the number of individuals. Evans asked if there are instances of treatment court participants graduating but still having to serve jail time. Judge Zuidmulder said when someone comes into the treatment courts on a felony, they would have three years' probation and a condition of probation would be that they successfully complete the treatment court which may be done in 14 – 18 months. That would mean they would still have another 18 months of probation so these numbers can reflect a probation hold, not necessarily a new crime. Evans suggested next time statistics are presented, they be cleaned up a little bit so as not to be deceiving.

Evans asked how the judges feel about the treatment courts. Judge Zuidmulder responded that it is really a calling and there are four judges in Brown County who are willing to take on the treatment courts. Judge Zuidmulder said he is committed to the treatment courts due to the length of service he has had and having tried everything else and finding people recycling through the system over and over. When asked if there was anything he would like to change about the treatment courts, Judge Zuidmulder said they try to continue to be updated with what the national experience is and if there are things that have been tested and found to be effective, they consider those modifications. Judge Zuidmulder has been pretty firm on the standards and adhering to them which makes it a little more burdensome for the judges in some ways, but he feels that is necessary to do what needs to be done to be effective.

Judge Zuidmulder also noted that when he took over the Veterans Court, it did not have a case manager. That was about the same time the OWI Treatment Court was being created and there was a case manager for that court, but the OWI court was not up and running so that case manager was working in the Veterans Court. It is now likely that the treatment courts will soon need another case manager. Judge Zuidmulder will keep the Committee updated on this, but he expects that he will be back sometime in the next year to ask for another case manager.

Supervisor Brusky said Brown County and, in particular Judge Zuidmulder has done a spectacular job with the treatment courts and she thanked him for that. Judge Zuidmulder responded that he gets a great deal out of working with the treatment courts and it has been very rewarding for him. He intends to continue to be involved as long as he can.

Judge Zuidmulder noted there is an 80% recidivism rate in the regular system, but only about 30 – 35% failure in the treatment court system. It is important to understand that by the time someone is 25 or 30 years old and in the criminal justice system, that person has likely suffered various traumas and abuses and many other things that we do not understand and the treatment courts work to transform that person and have them shed all those negative life experiences to get them to understand they need to be in the mainstream. The success in this with the treatment courts is quite humbling. Judge Zuidmulder also noted, however, that when someone does fail the treatment courts, he is generally satisfied that systemically everything that could have been done has been offered and the person is just determined to continue to pursue a criminal course of behavior. His responsibility to the community is public safety and when someone demonstrates that they are a danger to the community or is adversely affecting the quality of life in the community and is unresponsive to all the reaching out, those are the people Judge Zuidmulder feels need to be diverted to the other system.

Supervisor Linssen asked if the statistics regarding law enforcement contacts are normalized over a certain period of time. Vanden Hoogen responded that the data is pulled from a database going back to 2008. Linssen noted the stated decrease of 90%, but if 90% of that time was prior to the treatment court, it would not be any decrease. If someone committed 9 crimes over the 9 years before treatment courts, and then they go through treatment court and commit another crime in the year they are out of treatment court, it is really not a decrease. Linssen would be more interested in seeing police calls or contacts per five years before going into the treatment court and then per five years after treatment court. Judge Zuidmulder and Vanden Hoogen indicated they could provide that information. Judge Zuidmulder is confident in the numbers and noted that he frequently hears from the mental health officers with the Green Bay Police Department that police calls have been reduced greatly when someone begins treatment court. Anecdotally Linssen knows the treatment courts work, but reiterated that he would like to see statistics for a more standardized timeframe.

Brusky asked if Brown County has the most treatment courts in the state. Judge Zuidmulder said Brown County either has the most or is tied for the most and it was noted that Brown County has one of only five heroin courts in the entire country.

Supervisor Borchardt added that the treatment courts in Brown County are looked on very highly across the entire state and there are a lot of counties looking at what we have been doing. Judge Zuidmulder informed he has been asked by the Governor to participate on a committee regarding criminal justice and he was informed the reason he was asked is because Brown County is considered to be the crown jewel when it comes to treatment courts.

No action taken.

Communications

3. **Communication from Supervisor Ballard re: For the Brown County Board of Health to cease sharing demographic and personal information of residents with drug companies and other third parties for the purpose of sending out notifications of missed vaccinations. Instead, this essential educational program should be operated in-house and a budget adjustment of \$2,500 would be needed. Doing this in house is consistent with other health departments in the state; allows the program to continue at a low cost; and respects the privacy rights of the citizenry. Motion at January meeting: To put this item on the next Human Services Committee meeting agenda.**

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Supervisor Ballard informed he brought this forward because he had received a robocall from a Colorado number as well as a postcard in the mail reminding him to have his child vaccinated when they fell a little behind due to the child being sick at the time the vaccination was due. Ballard talked about this with the Health and Human Services Director and was informed that the County partners with a drug company who the County gives information too and then the drug company sends out the postcards. Ballard questions how many postcards may be being sent out to people who are actually up to date on immunizations, but he also questions what shared information could be used for by the drug company. He talked to several colleagues about this and was informed that those colleagues who are in health roles in various capacities have decided not to use this system. Ballard feels the program is good because it is important to have the children in the County vaccinated, but he is uncomfortable with the County sharing demographic information with a third party outside the County where the citizens have no opportunity to opt out.

Ballard continued that he has been able to ascertain that when the County provided reminders on their own, the cost to do so was approximately \$2500 per year which included labor and postage and he would like to know if that number is still accurate and he would also like a budget adjustment to go back to doing this in-house.

Evans asked how long the Health Department has been using the outside service to send out the notifications. Public Health Officer Anna Destree introduced Nurse Manager Ann Steinberger. Destree said there is a requirement in public health to do a recall and reminder system as part of the contract for the immunization objective from the State for which they get State funding. All health departments have this requirement. A part of the contract requirement lays out ways to provide the reminders, including a call reminder program. The Health Department provided these reminders on their own prior to the use of the current system which they started using in July 2017. Steinberger informed they have utilized the system in the past for the 11 and 12 year old recalls as well. Destree provided several handouts, copies of which are attached.

Evans asked why the Health Department moved to the current system rather than continuing to do it in-house. Steinberger responded that prior to using the current system, the Health Department was doing benchmarks only three times and the immunization rates at that time were 76% of children appropriately immunized by age 2. Prior to that they were doing it at two different times plus at 24 months but they were not getting the children immunized before age 2 under that system. There are a number of companies that utilize a reminder recall system and the Health Department came across this service provided by Pfizer. Part of the contract with Pfizer includes a very significant HIPAA/confidentiality process that was reviewed by both Corporation Counsel and the HIPAA committee and neither felt there are any issues with this; it is no different than a hospital or clinic getting the names of children in the County and sending out notifications.

Evans asked if the Health Department is supportive of Ballard's communication to take this program back in-house or if they are happy with the way it is now. Destree responded that she understands Ballard's concern, but with current staff capacity, they would need to have another person to be able to do it. Current staff is already tied very tightly to other projects and initiatives and they would not be able to add this task to someone.

Linssen asked how much the County gets for the program. Destree responded that they get \$55,271 from the State for the immunization objective, which this initiative falls under. The County does not pay anything to Pfizer for this program. Linssen said nothing is free and somewhere someone has to be paying for this. Evans asked what specifically is sent to Pfizer. Steinberger said they send the child's name and address. There is a reminder that the child is due or may be due for an important immunization that is sent before a child reaches 12 months of age. The benchmarks are run and if a child is due the next month for an immunization, that information is provided.

Linssen again asked who is paying for this program. Destree responded that the program is free and there is no cost to the County for this. Linssen said nothing is free; someone has to be paying for postage and things like that. He understands that there may not be a direct cost to the County, but the County is essentially selling our information to Pfizer for a price. Destree responded that a lot of what public health does is advocate for vaccines and this program is one way the County does that. She said there are also other programs that have companies that the County works with to help get materials out to the public to increase awareness of vaccinations and benchmarks in the community. Linssen said just because this does not affect the County's budget line does not mean that the data is not of value and he is curious as to how much is being paid to run the program and where the money is coming from. If it is some sort of tax write off for Pfizer it may not be as concerning versus if there is some financial benefit that they see in the data that they are willing to provide the service free of charge. The key is someone is making money off of anything that is free or they would not be providing the program. Destree said the answer Pfizer has given is that their goal is to increase immunization benchmarks in the communities they work with.

Health and Human Services Director Erik Pritzl said it is hard to ascribe motives to a company in this situation. He said companies sometimes do things as good will or for community benefit and, for example, HSHS has a community benefit fund and it could be argued that we all pay for that fund through our payment of medical services which then goes back into the community in the form of grants and other objectives that help the community. He is not aware that Pfizer has publicly stated how this immunization reminder program is funded, but there could be motives such as Pfizer believes they should be a leading corporation in vaccine compliance and trying to establish a good brand name for the health department who may buy other pharmaceuticals. Linssen noted that corporations have a fiduciary duty to make profits so there has to be some sort of profit being made on this one way or another.

Supervisor Evans noted there are good corporate citizens and there are examples of this here in Green Bay such as the KI Convention Center and Shopko Hall. Pfizer will obviously make some money off this potentially, but the benefit to the people in Brown County has to be acknowledged. Linssen said his concern is selling the data, but both Evans and Destree said the County is not selling data. Supervisor De Wane added that he does not think the County has a right to go to Pfizer and ask for their financial data. Linssen feels the County does have this right and that the citizens deserve that.

Destree talked about the benefit the County has seen since this program was implemented in 2017. She noted that Brown County has a significant population of 2 year olds and the increase in benchmarks from 76% to 80% is pretty significant and that is attributed to this program. Next year this is projected to increase to 83%. Without this program, the County would struggle to get up to 83%. Linssen said without this program from Pfizer, the County could pay to do this themselves but Destree pointed out that that would only be possible if there was staff available.

Hoyer asked about the timeline regarding making a patient aware of upcoming immunizations. Steinberger said they typically start the benchmarks when a child is 7 months old. If the child has received their 2, 4 and 6 month shots on schedule, they do not get a reminder, but if they are more than a month late, the reminder gets sent out. It is important to send the reminder out right away because the child would be due for more immunizations at 12 months and there needs to be at least 6 month spacing between the last dose. Hoyer noted that when a child gets one immunization late, the rest of the immunizations schedule is pushed back and then the parents are getting multiple calls and reminders which can freak parents out. Immunizations are a good thing and every clinic and hospital wants to boost the numbers as this is such a large initiative in healthcare. Steinberger said they pull the benchmarks at 7 months, 9 months, 12 months, 16 months and 21 months.

Destree referenced the current measles outbreak as an example of how important immunizations and programs like this are. This is another tool to try to get people protected.

Hoyer asked if Pfizer provides feedback as to how many calls are made or how many postcards are sent out. Destree said this information is set forth on the attachments; in 2018 3775 went out. There are a number of other counties in Wisconsin who use this program as set forth on the attachment and Destree noted there are also some states where the state immunization programs use this program for the entire state.

Linssen reiterated his concerns with regard to data privacy of the citizenry and he would like to know who is all getting what information, how many instances of that information are they getting, and how much is the County actually saving by using the program versus the county doing it themselves. He views this as the County selling data to the company to provide a service for free. He would also like any information available for the funding source for the program and whether it is coming from a foundation and what the objections and mission statement of the company is.

Destree said part of public health is assurance and what they have found with this program is someone who is willing to assist the Health Department with a key program to be sure the notices are sent out in an appropriate way and they take advantage of that service. Linssen feels this is irrelevant as the question is not if the County should do anything, it is if the County should be doing it themselves.

Evans noted that in a search of Pfizer, he found a number of other reminder postcard programs and recall programs they run for a number of circumstances other than immunizations. He appreciates Linssen's concerns with data privacy, but these programs are going on throughout the country. He understands that some people do not like big companies and may not like that they are making money. Evans feels, however, that most people who get the reminders probably appreciate them. Pfizer is not soliciting anything through the program. He is not concerned of a data breach of Pfizer contacts and feels the money the County would need to do this program in-house could be better spent in other ways. Ballard questioned if it was appropriate to sell out the citizenry by giving out their data so we do not have to do the work ourselves. Evans said he will not support doing this in-house.

Linssen said no one is questioning whether the program is valuable, but he feels this is not something we can just gloss over. There have been valid arguments raised that we should look at what is going on behind the scenes. Destree clarified that the County does not send anything directly to Pfizer; it is all through TeleVox. Linssen feels at a minimum we owe the citizens the obligation of how the program is funded before we give away the information.

Linssen feels before any decision is made, we need to do our due diligence and get more information from the Health Department. The primary concern is how much data is going out and to which organizations the data is going to and what is the amount of savings the County is seeing by providing the information and having Pfizer run the program for us. He would also like to know what types of organizations are getting the data. Linssen said he is not implying that we should not have these services for our citizens, he just questions if this is something we should be doing in-house instead. Ballard agreed that the program is valuable, but from a marketing standpoint, you want to drive someone to action and if this is done in-house that could be addressed.

Motion made by Supervisor Linssen, seconded by Supervisor De Wane to hold for 30 days to receive additional information from the Health Department. Vote taken. Ayes: Linssen, Hoyer, De Wane Nay: Brusky, Evans MOTION CARRIED 3 to 2

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Evans asked that any information provided to Linssen by the Health Department also be provided to the remainder of the Committee.

Wind Turbine Update

4. **Receive new information – Standing Item.**

No new information was presented.

Motion made by Supervisor De Wane, seconded by Supervisor Evans to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Veterans Services

5. **2018 to 2019 Carryover Funds.**

Joe Aulik introduced himself to the Committee. He is the newly hired CVSO and said he is glad to be with Brown County. He spoke briefly about Veterans Court and said that mental health, suicide and traumatic brain injuries continue to be the main concerns with veterans coming out of the most recent conflicts. He reminded that we have now been at war for 29 years.

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

Health & Human Services Department

6. **2018 to 2019 Carryover Funds.**

Pritzl informed these carryover funds represent a small amount of money left from the electronic health record implementation and will be used for system enhancements and improvements or modules that may need to be purchased.

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

7. **Executive Director's Report.**

Pritzl referred to his Director's Report in the agenda packet and highlighted several items. With regard to the Health Department move, Pritzl informed the move has started and will be concluded by March 12 and everything will be back open to the public both at the Sophie Beaumont Building as well as at the Duck Creek office.

Pritzl also touched on Food Share and wanted to be sure that everyone understood that with the recent government shutdown, everyone will have their benefits issued on March 1 instead of on the normal staggered basis. This is due to the time that has elapsed for some people during the shutdown. The benefits will return to the normal staggered system in April.

Pritzl also talked about the new Department of Children and Families Secretary who he had an opportunity to meet in January. The new Secretary will be visiting Brown County in the near future to learn about the County's facilities and operations.

With regard to Criminal Justice Services, Pritzl informed the search for the manager is ongoing. Human Services is also continuing to work with Family Services on the Day Report Center transition. He noted Family Services is focusing on referrals for those who can complete supervision prior to the changeover to the County in July.

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Pritzl also spoke of the downward trends of emergency detentions for children and adolescents as well as adults. Overall, there has been a 12% decrease in emergency detentions which is positive as it saves law enforcement time, court time and transportation time as well as the time people are in custody and being moved around from facilities to court. He noted there have also been a lot more voluntary services at the CTC which has been helpful.

Linssen asked how staff is handling the move of the Health Department. Pritzl said there have been some challenges because any move disrupts daily activities. The Public Health Division has done an amazing job of planning and communicating with staff to keep them informed of changes. People in existing units at Sophie have been moved and they are adjusting.

With regard to the Day Report Center, Brusky asked if there will be a gap in services between the time Family Services stops taking referrals and when the County starts taking referrals. Pritzl said the County intends to start taking referrals on July 1, but there could be a gap. A lot of this depends on staffing and whether any of the current Family Services employees leave early for different jobs or possibly apply for the County positions. The intention is to get the manager of the program area hired first and then start filling the staff positions. In the event there is a gap in taking in referrals, those people would go to jail which could increase the jail population.

Brusky also asked about Human Services Day at the Capitol scheduled for April 2. She would like to talk about who is planning on attending and informed that she will be attending. Pritzl said he is planning on attending as well as is Jenny Hoffman and possibly other staff members. More details regarding this can be worked out as the date gets closer.

Evans asked for an update regarding the secure juvenile detention situation. Pritzl responded that it will likely be delayed. He does not think the State will stop looking at this and the two issues that are consistently brought up is the timeline of trying to get this done by January, 2021 and the funding; there is not enough money and the timeline is too short. Pritzl said none of the current County facilities will work so we would be looking at an addition of some sort or a separate building. As the legislation is presented, the County would be reimbursed by the State for a lot of the construction costs. Pritzl said the counties talking about doing this are Dane, Racine, Milwaukee and Fond du Lac, so there is not much north of the Fox Valley. Geographically Brown County is in a great position and there is good history between Health and Human Services and the Sheriff's Office with working on secure detention and alternative programs.

Evans asked what Pritzl attributes the reduction in EM1s to. Pritzl said the mental health officers and the consistency in those positions with the Green Bay Police Department have been helpful in addition to the mental health initiatives such as mobile crisis expansion and residential treatment for substance abuse. There are a lot of factors that play into the reduction and Pritzl said the spirit of cooperation of all the different agencies that touch these people has been very helpful. It has been a collaborative effort to provide the services that are needed without having the emergency detention.

Motion made by Supervisor De Wane, seconded by Supervisor Brusky to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

8. Financial Report for Community Treatment Center and Community Services.

Finance Manager Eric Johnson informed this is just a projection that shows some of the impacts of some of the larger dollar amount items; not final figures.

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

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9. **Statistical Reports.**
- a. **Monthly CTC Data.**
 - i. **Bay Haven Crisis Diversion.**
 - ii. **Nicolet Psychiatric Center.**
 - iii. **CTC Double Shifts.**
 - b. **Child Protection – Child Abuse/Neglect Report.**
 - c. **Monthly Contract Update.**

Motion made by Supervisor Linssen, seconded by Supervisor De Wane to suspend the rules to take Items 9 a, ai, aii, aiii, b & c together. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Linssen, seconded by Supervisor De Wane to receive and place on file Items 9 a, ai, aii, aiii, b & c. Vote taken. MOTION CARRIED UNANIMOUSLY

10. **Request for New Non-Continuous and Contract Providers and New Provider Contracts.**

Motion made by Supervisor De Wane, seconded by Supervisor Brusky to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

Aging & Disability Resource Center – No items.
Syble Hopp – No items.

Other

11. **Audit of bills.**

Motion made by Supervisor Brusky, seconded by Supervisor De Wane to acknowledge receipt of the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

12. **Such other Matters as Authorized by Law.**

Linssen noted that no new information has been brought forward in recent months regarding wind turbines and suggested that Item be removed from the agenda. It was noted that the Health Board has this as a standing item. After a brief discussion, Hoyer informed he will take this into consideration.

13. **Adjourn.**

Motion made by Supervisor Brusky, seconded by Supervisor Evans to adjourn at 7:24 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Therese Giannunzio
Administrative Specialist

**PROCEEDINGS OF THE AGING & DISABILITY RESOURCE CENTER EXECUTIVE/
FINANCE COMMITTEE MEETING** **June 22, 2017**

PRESENT: Larry Epstein, Patricia Finder-Stone, Beverly Bartlett, Beth Relich, Randy Johnson

EXCUSED: None

ALSO PRESENT: Devon Christianson, Debra Bowers, Laurie Ropson, Kristin Willems, Diana Brown, Denise Misovec, Mary Schlautman, Sandy Groeschel

The meeting was called to order by Chairperson Epstein at 8:30 a.m.

PLEDGE OF ALLEGIANCE

ADOPTION OF THE AGENDA:

Ms. Finder-Stone/Ms. Relich moved to adopt the agenda. **MOTION CARRIED.**

COMMENTS FROM THE PUBLIC:

No public comments

APPROVAL OF THE MINUTES OF MEETING OF June 30, 2016:

Ms. Relich/Ms. Bartlett moved to approve the minutes of the Executive & Finance Committee meeting of June 30, 2016. **MOTION CARRIED.**

FINANCE 101-2018: EDUCATIONAL OVERVIEW OF ADRC FUNDING SOURCES AND BUDGET INITIATIVES

Ms. Christianson reviewed the "Finance 101" PowerPoint presentation to explain the ADRC history and complex funding streams from Federal, State and County governments. Ms. Christianson also shared the ADRC 3-5 Year Plan 2018 - 2023 handout and also reviewed the handout for the annual SWOT Analysis used for 2018 budget planning. Ms. Christianson also mentioned direction from the ACL to be creative in finding new ways to bring in dollars in order to sustain the business. The opening of the ADRC Grounded Café' is an example of this. Ms. Christianson shared some increases in contract costs for 2018 that have been included in the draft budget, including an increase of twelve cents per meal, and an increase for the rent of the Pulaski and De Pere locations. Ms. Christianson shared that some of the cuts that were anticipated to occur for 2018 did not come to fruition. This includes the Older Americans Act reallocation that was to happen in 2018 which would have resulted in a 5% decrease in funding. However, when the state submitted the plan to the federal government, there were questions that needed to be answered in order to implement the changes in 2018. The ADRC will face the cuts associated with reallocation in 2019. Ms. Christianson listed the unknown decisions, yet to be made that will affect the ADRC budget in 2018 to include: The Dementia Care Specialist position, the Nursing Home Relocation program, and the Title V employment program for seniors. The ADRC currently has 11 workers working through the Title V Employment program which equates to over \$100,000.00 in employment value to the ADRC. Currently this program is not included in the federal budget. The ADRC is focusing on advocacy efforts and is reaching out to legislators to educate them on the importance of keeping this program. Additionally the state, federal and county board budgets are not yet final for 2018.

Ms. Christianson reported that her goal is to keep funding to Curative Connections steady dependent upon Brown County Levy dollars received and possible federal funding domestic

1a

cuts, which are still unknown. Ms. Brown from Curative Connections commented that it was good news that the anticipated funding from the ADRC will remain the same in 2018. Ms. Brown shared some scenarios that have assisted them this year including that Family Care providers agreed to pay an increase for the Adult Day Care programs resulting in a projected \$65,000.00 increase to Curative. Ms. Brown is happy to report that the Family Care companies are also beginning to see the benefit in these programs and therefore Curative is seeing a slight increase in participation as a result. Ms. Brown thanked the ADRC for funding that assists in offsetting the private pay rates. Ms. Brown shared that there is a projected deficit for the 2018 budget, but it is lower than the deficit in 2017.

NOMINATION & APPROVAL OF POTENTIAL BOARD MEMBER:

Ms. Christianson thanked Amy Payne from the Gathering Place for applying to be a member of the ADRC Board of Directors representing the mental health population. Ms. Christianson stated she feels fortunate to recommend her as a potential board member.

Ms. Payne introduced herself stating she is grateful to be considered for the Board of Directors. Ms. Payne is Certified Peer Specialist and is passionate about promoting mental wellness and works to break the stigma of mental illness by teaching classes and conducting support groups.

Ms. Relich/Ms. Finder-Stone moved to approve the nomination of Amy Payne to the ADRC Board of Directors.

DRAFT BUDGET DISCUSSION AND APPROVAL:

Ms. Christianson shared changes she is recommending for the 2018 budget that include changing the STD payout to staff out on short term disability to 50% of their income from 75% to order align with the Brown County STD plan.

a) Denmark Advisory Council Meeting

Ms. Christianson referred to the Denmark Organization and History handout. In June the rural program coordinator in Denmark resigned. It has been a challenge for years to balance being good stewards of funding and finding services that are most value added for Denmark. Ms. Christianson highlighted the dollars invested in the Denmark area. Back in 2014 Mr. Siusarek spent 20 hours per week at this location doing outreach to find ways to increase participation in programming and congregate meals. Ms. Christianson shared that the ADRC is serving just two congregate meals each day. There are 15 people receiving home-bound meals in Denmark. Ms. Christianson met with the Denmark senior advisory board in June and found that they very clearly valued having a free space to play cards with someone to answer the phone and to have coffee. They also shared that they do not value the congregate meals but do appreciate the home-delivered meals. Ms. Christianson is not certain at this point on the clear path forward. She is asking to start a process of engaging with the town and village and their business association to discuss further. Mr. Randy Johnson has agreed to participate with Ms. Christianson in these discussions. Ms. Christianson would like an additional board member to be included in these discussions and planning as well. The discussions so far have caused a bit of a stir in Denmark. Their concern is that Brown County may remove these services. Ms. Christianson assured the board that her communication so far has always been that she would like to learn and is not intended to convey that the Denmark location is being shut down. She assured the Village that the home delivered meal program would continue. Ms. Christianson has updated Supervisor Campbell of these events. Ms. Christianson will temporarily have a temp employee in place to continue meals and services as they have previously while alternatives are

investigated. Ms. Christianson shared that they have included funding to maintain the Denmark location for the 2018 budget year.

b) Nutrition re-organization

Ms. Christianson shared with changes in personnel in Green Bay, Denmark, and De Pere there will be continued efforts to review best practices and to look for additional efficiencies in all the nutrition programs in 2018.

c) In-Home Worker Program

Ms. Schlautman reviewed the In-Home Worker program. There are 3 arms of this program where local workers are hired privately by ADRC customers to assist in completing chore services, home-making, and personal care services. The workers are not employed or supervised by the ADRC but are vetted by the ADRC through criminal background checks, reference checks and an orientation meeting prior to being placed on the registry. Holly Lorenz runs this program and is retiring in July 2017. The chore and home-making services are most frequently requested. Ms. Schlautman reassigned the task of matching workers to customers for the chore services only back to the Information and Assistance department. So far this has been manageable for the I&A department to support. Additionally, a transition team has been created to analyze the work and the need for this service and to make recommendations on how best to proceed with the program. As a result the transition team is recommending the elimination of the In-Home Worker position and redistributing the work to other areas of the agency to include the support team, the caregiver support specialist and the Information and Assistance department. There will be continued oversight of the program by Ms. Schlautman to mediate any issues that arise. Ms. Schlautman proposes to keep the chore and home-maker services portion of the program and to eliminate the personal-care services part of the program. The requests coming in for personal-care work is becoming increasingly specific and technical. Some examples of these requests are insulin injections, home dialysis support and catheter support etc. The ADRC does not seek out skills or training for these workers and there is a risk associated. Ms. Schlautman called other agencies to inquire about their process and she found that they had discontinued the program. The personal care services part of the program carries the most liability for the agency, the customer and the worker. In addition along with the roll out of family care, there has been an increase in personal care provider agencies in the area that have not been available before. Ms. Schlautman also would like to keep the transition team intact to re-evaluate the program for the remainder of 2017. Additional recommendations may be made to the ADRC Board of Directors at that time. Additional discussion ensued.

Ms. Bowers then covered the preliminary 2018 budget summary and pointed out the increases and decreases from 2017 to 2018. Ms. Bowers anticipated and included a 3% Brown County Levy reduction into the budget as advised by the County Admin. Also, there is an additional reduction tied to the 85.21 program that is removed and transferring back to Brown County to administer. Ms. Bowers also pointed out the Grounded Café revenue and expenses included in the budget are guessed estimates for 2018. Ms. Bowers also shared that there is no other remarkable changes included in the 2018 budget that have not already been discussed.

Ms. Relich/ Ms. Bartlett moved to approve the re-organization of the ADRC Nutrition program and In-Home Worker Program and to accept the current draft budget as presented. **MOTION CARRIED**

1a

ANNOUNCEMENTS:

Mr. Epstein shared that he will presenting at the ADRC state conference in September. The topic is on the importance of building character, values and virtue in our young population in order to have more personal accountability to make for a great society. Ms. Bartlett thanked Mr. Epstein for the program that he presented at the ADRC as she participated and really enjoyed the experience.

Ms. Finder-Stone shared that she participated in an outstanding program on ethics. The presenter was the former CFO of Enron.

Ms. Christianson was happy to announce that Barb Michaels, the ADRC Prevention Coordinator, was nominated and chosen to receive the "Above and Beyond Award" from WIHA which was presented at the Healthy Aging Base Camp convention on June 21, 2017.

ADJOURN:

Ms. Payne/Ms. Relich moved to adjourn the meeting. **MOTION CARRIED.**

The meeting adjourned at 10:30 a.m.

Respectfully submitted,

**Kristin Willems,
Administrative Specialist**

1a

PROCEEDINGS OF THE AGING & DISABILITY RESOURCE CENTER OF BROWN COUNTY BOARD MEETING

February 28, 2019

PRESENT: Patricia Finder-Stone, Bev Bartlett, Deborah Lundberg, Megan Borchardt Tom Smith, Sam Warpinski, Dennis Rader, Randy Johnson

EXCUSED: Arlie Doxtater, Eileen Littig, Mary Johnson, Linda Mamrosh, Mary Derginer, Amy Payne

ALSO PRESENT: Laurie Ropson, Devon Christianson, Christel Giesen, Debra Bowers, Kristin Willems, Tina Brunner, Jeremy Slusarek, Sherry Piatti, Donovan Miller, Spencer Smet, Allyson Crass, Margaret Miller, Mary Ann Kanugh, Debbie Delveaux, Aurora Zimmerman, Catherine Ramsdell

The meeting was called to order by Chairperson Finder-Stone at 8:30 a.m.

PLEDGE OF ALLEGIANCE:

INTRODUCTIONS: New ADRC Office Assistant Spencer Smet was introduced to the Board

ADOPTIONS OF AGENDA:

Ms. Bartlett/Mr. Smith moved to adopt the agenda. **MOTION CARRIED.**

APPROVAL OF MINUTES OF REGULAR MEETING OF January 24, 2019:

Supervisor Borchardt/Ms. Lundberg moved to approve the minutes for the January 24, 2019 Meeting. **MOTION CARRIED.**

COMMENTS FROM THE PUBLIC:

Chairperson Finder-Stone recognized Catherine Ramsdell, 2233 Samatha St #54, De Pere, WI 54115. Public Comment was given including:

- Number of programs leaving ADRC
- Meal program and diabetic needs

BINGO Request:

Chairperson Finder-Stone recognized Margaret Miller, 830 Winford Ave, Green Bay, WI 54303. Public comment was given. Ms. Miller expressed concern over the cancellation of the BINGO program at the ADRC. Ms. Miller raised questions in regard to ADRC BINGO:

- Locations for BINGO and challenge in getting to other locations
- High BINGO attendance in comparison to other ADRC programs
- ADRC web pictures of BINGO players
- Lack of ADRC advertisement of programs
- Why can't BINGO programming return to ADRC?

Chairperson Finder-Stone recognized Catherine Ramsdell, 2233 Samantha St #54 De Pere, WI 54115 Public comment was given. Ms. Ramsdell expressed concern over the cancellation of the BINGO program at the ADRC.

FINANCE REPORT:

A. REVIEW AND APPROVAL OF JANUARY 2019 FINANCE REPORT:

Ms. Bowers referred to the January 2019 Financial Highlights and ADRC Summary Report to demonstrate the preliminary expenses and revenues for January.

Mr. Johnson/Mr. Smith moved to approve the January 2019 Finance Report. **MOTION CARRIED.**

B. REVIEW OF RESTRICTED DONATIONS:

There were no restricted donations received in January 2019.

DIRECTORS REPORT:

A. MISSION/VISION WORK UPDATE:

1b

Ms. Christianson referred to the proposed plan outline for updating the ADRC Mission/Vision. Ms. Christianson explained there has not been an update in a number of years. Ms. Christianson feels there is an opportunity to make changes that will resonate more with customers and with staff. Ms. Christianson explained that she has enlisted the help of Ryan Gracyalny, Utech Group, to support this work with the agency. Ms. Christianson explained the Board is invited to the all-staff meeting on March 26th when the agency and the board will begin working on this. Ms. Christianson anticipates that the process will take until the end of 2019 to be complete and is looking forward to participation in this project from ADRC staff, management and board members.

Mr. Smith/Supervisor Borchardt moved to approve the project to update the ADRC Mission/Vision statement. **MOTION CARRIED.**

B. LOAN CLOSET GRANT:

Ms. Christianson explained that community partners have begun meeting to discuss possibilities for a community based loan closet. Ms. Christianson said that a planning grant became available through the Greater Green Bay Community Foundation and that the loan closet project may be a good fit for receiving this grant. ADRC staff and Sue Premo from Options for Independent Living collaborated to put the grant request together. If awarded the group may hire a consultant to assist in writing a business plan, conduct a feasibility study to help get the task force ready to submit an implementation grant for a community loan closet in 2020. Additional conversation ensued.

C. GOALS & OBJECTIVES:

Ms. Christianson referred to the 2019 Committee Goals and Objectives. Each year all committees are evaluated to decide if they are still needed and annual goals are created. Ms. Christianson's intention is to keep the Board updated on these goals each year. Ms. Christianson explained that board members are always welcome at the committees and may ask for updates from any of these committees as well.

D. THANK YOU – OFFICE OF THE BLIND

Each year through the budget process the board approves a grant for specialized equipment for customer of the Office of the Blind and Visually Impaired. The ADRC receives a "Thank You" each year for this.

STAFF REPORT: TINA BRUNNER BENEFIT SPECIALIST COORDINATOR:

Ms. Brunner referred to the Power Point handout which includes the unit mission and several success stories from 2018. Ms. Brunner shared information regarding her staff and volunteers and what roles they are responsible for. The team tagline is "The Red Tape Cutters". They connect people to benefits for Medicare, Medicaid, Social Security, Disability, and Health Insurance. They also advocate for customers in these programs. Ms. Brunner shared 2019 initiatives and challenges. Ms. Finder-Stone and Ms. Christianson thanked Ms. Brunner and her team for their contributions to ADRC customers.

LEGISLATIVE UPDATES:

Ms. Christianson shared that the ADRC will have buses available for attendees to Advocacy Day in Madison on May 14, 2019. Disability Advocacy day is on March 20, 2019.

ANNOUNCEMENTS:

Supervisor Borchardt & Mr. Rader shared that former ADRC board member Melanie Maczka was recognized for Excellence in Non-Profit leadership at the Annual United Way breakfast.

Ms. Christianson informed the board that there will be a press event regarding Older Americans Month on May 1st, 2019 at the ADRC. All are welcome to attend.

NEXT MEETING – ADRC- 300 S. Adams St. March 28, 2019 at 8:30 AM.

ADJOURN:

Mr. Johnson/Mr. Smith moved to adjourn the meeting. **MOTION CARRIED.**

The meeting adjourned at 10:28 a.m.

Respectfully Submitted,
Kristin Willems,
Administrative Services Coordinator

1b

PROCEEDINGS OF THE BOARD OF HEALTH MEETING
TUESDAY, NOVEMBER 13, 2018
5:00 PM

Present: Richard Schadewald, James Crawford, Karen Sanchez, Cheryl Weber, Susan Molenaar, Joe Van Deurzen

Excused: Jay Tibbetts

Others Present: Supervisor Joan Brusky, Erik Pritzl, Anna Destree, Ann Steinberger, Zach Kroening, Andrea Kressin, Christine Davidson, Chris Culotta, Janet Kazmierczak, Tami Radwill, Executive Director of Prevent Blindness Wisconsin, Barbara Vanden Boogart, William Acker

1. Call to Order, Welcome, Introductions

Chairman Richard Schadewald called the meeting to order.

2. Approval / Modification of the Agenda

Motion to modify agenda to add Human Services Director's Report to follow Public Health Legislation

MOTION: To approve modified agenda.

Van Deurzen / Crawford

MOTION CARRIED

3. Approval of Minutes of Meeting of October 9, 2018.

MOTION: To approve the minutes from October 9, 2018.

Van Deurzen / Weber

MOTION CARRIED.

4. Hearing and Vision Presentation

Andrea Kressin handed out a presentation document entitled "Hearing and Vision Program Presentation." Andrea stated staffing changes led us to evaluate the program in order to meet commitments with the schools. In Public Health we are being asked to look at what types of changes will have the largest impact in our community. We are also looking to build up community partnerships and make sure services are still provided. We wanted to screen the same grades, which is in line with the American Academy of Pediatrics best practices. We also wanted to make sure that the same amount of children were still being screened. We recognize that screening tools are just that. It is not a full diagnosis from an eye doctor or medical professional. We want to make sure they are connected with a medical care provider for their eyes.

The changes made to the program are for 4 and 5K students we are screening using a Spot photorefractor; 1st, 3rd and 5th grades we are using the chart method. The Tumbling E's vision chart is no longer being used (1st, 3rd, 5th grades). Instead, we are aligning with best practice and using the Sloan chart as the screening tool for these ages. Other procedural changes for chart screening include using the Happy Feet, as recommended by Prevent Blindness, as well as occluder paddles versus paper cups. Andrea stated in the past we had the three dedicated staff to the Hearing and Vision Program. We made it a team effort, divided schools among all the health aides, and have addressed staffing storages.

Andrea stated our next step is participating in a vision workgroup with community partners. One of the goals of that workgroup is to look at the next steps part of screening. If we know parents are not following up, having their children seeing a medical professional, and how can we reduce barriers so kids can get access to the care that they need in terms of their vision. Andrea stated we would add a health educator into the mix in order to be able to build up community partnerships, utilize other resources that are out there, to engage in quality improvement activities and to analyze statistics.

Tami Radwill stated she has been with Prevent Blindness for 16 years and Prevent Blindness has been around since 1958. Tami stated Brown County has been a long time partner who screens 16,000-18,000 kids every year. Tami stated Wisconsin is one of ten states that do not have a law that requires vision screenings. She commends Brown County for providing this screening for families. Tami stated Prevent Blindness' protocol is set by the National Center for Children's Vision and Eye Health. A national expert panel makes recommendations based on research studies and best practice. Tami stated about 2 years ago the papers were published and some of the changes came about. What used to be acceptable practice was the Lea wall

chart but is now the Lea flipbook and the photo screeners have come out. Tami stated the wall charts are the best practice and they will be the best practice because the other tools keep changing, and while those tools are acceptable practice, they do not stick around long enough to become best practice because the next generation is coming down the pike. Brown County is using the SPOT, which she states is 4th generation of the tools. Those tools never hit best practice. Tami stated the SPOT is the right tool to be using on 3, 4k and 5k kids. After that, the protocol set through the studies is the Snellen Sloan chart. Tami stated the Tumbling E chart was gone since about 2004. The reason is because it placed too many other demands on the kids, having to know which direction and other types of coordination and then it becomes more than a vision screening. Tami indicated we are following Bright Futures and Brown County is screening the grades Prevent Blindness recommends. The occluder paddles are best practice as well. The happy feet keeps the kids still and at the right distance. Tami sat on the Healthy Children Committee Taskforce who wrote the Blueprint for the State and they are the voice of vision and it is three, four and 5 year olds. The books are best practice. Any of the photorefractors are acceptable practice. Tami states they are the vision piece of that State document. She also sat on the School Age Taskforce Committee years ago through Prevent Blindness to talk about what a screening look should like at schools. They set that protocol and there is a position statement through Prevent Blindness as well. A screening is a screening and if they do not pass the screening, we want to get them to an eye care provider. Tami stated they had a grant through the Healthy Wisconsin Partnership with the Medical College and they have added curriculum for the classroom to educate the students and teacher and parent resources.

Chris Culotta, Northeast Region Director for Wisconsin Department of Health Services, Division of Public Health, and Office of Policy Practice Alignment indicated in Wisconsin, there are 86 Health Departments. In the Northeast Region, he works with 17 counties, 19 local health departments and 3 tribes. Chris stated the State is pushing for modernization. Next year the State will conduct a 140 review, which looks at the core public health functions and essential services. Chris stated Brown County is doing a great job with their Beyond Health Steering Committee. That committee talks about system level changes, and talks about the health of community and then creates a Community Health Improvement Plan, which is a system level approach. Chris applauds Brown County for looking at the program and asking how we can modernize for the citizens.

Chery Weber stated we have a .68 employee on this project. Andrea stated prior to the resignations there were three staff dedicated to the hearing and vision program, two nurses at .68 FTE and one Health Aide at .6. Andrea stated we are looking to consolidate the two vacant positions and have a full time educator and having the current nurse maintain her position at .68.

Joe Van Deurzen asked if we could bring in other people to help with screening since we are short staffed. Andrea indicated the current model is to utilize our staff and when possible to use volunteers. It is something that we are exploring as far as partnerships but the vast majority of the screenings are being done by our own staff. Andrea indicated one of the goals of the educator is to identify opportunities in the community regarding volunteers. Susan Molenaar asked what happens after a child fails a screening. Chris Davidson states it varies depending on the child. She reaches out to schools and parents. The bulk of the students get a letter sent home. She tracks the letters and results that come back. The goal is to connect those kids with a medical provider. Jim Crawford asked how many do we screen and how many do not pass. Chris indicated 12,000 screened, 2,700 referred, 718 saw a medical provider. Chris indicated that last year we were using a combination of the Tumbling E chart and photorefractor. The chart is being used on the older students and the photorefractor is being use on 4k and 5k.

Joan Brusky asked what happens after the 6th grade level. Andrea stated that if a parent to teacher identifies a student, we would screen any age by request. Richard Schadewald asked if we keep cumulative records on kids. Chris indicated she does try. Tami indicated there are tools created by Prevent Blindness for this.

5. Public Health Legislation – Standing Item

Anna handed out the 2019-2020 Legislative Priorities that include 1) building and retaining public health infrastructure through public health funding 2) infusing health and equity in all policies and 3) improving public health workforce succession planning to support consistent and efficient delivery of services. Jim Crawford asked if Winnebago institution was our main facility. Erik Pritzl stated we are in a great position in Brown County because typically about 95% of our admissions stay in Brown County. Either we only use Winnebago as a last option because of capacity issue or there is legitimate treatment needs that we cannot meet in our facilities.

6. Health Officer Report

Human Services Director Erik Pritzl stated the legislative priorities connect within the Health and Human Services Budget overall. Erik stated he is proposing for 2019 to create a new division within Health and Human Services, which is the Criminal Justice Division under Community Services. This will hold together all current treatment court resources operating in Brown County; Heroin Court, Drug Court, Mental Health Court, and Veteran's Court and OWI courts. A jail re-entry position has been added. Erik stated they have mental health officer clinician teams. They will pair a clinician with two mental health officers to go jointly in terms of making efforts to connect with people in either outreach or follow up from a crisis. They would also have the crisis assessment centers, which will look at efficacies and streamlining operations with mental health response. This would build onto the Community Treatment Center to have crisis assessment take place there with some limited medical screening.

Erik indicated trauma informed care was another budget initiative. Funding is set aside in 2019 to transform the organization into trauma informed care. One of the problems was staff to manage it. Erik indicated next year there is money for a consultant to handle that and also for a physical environment.

7. Nursing Unit Update

Ann Steinberger stated they did several clinics including; Heritage Hill flu clinic, serving 161 individuals; one at our office, serving 51, and one at the Kroc Center, serving 171 individuals. Ann stated they have a nurse position open and are in the process of hiring. Ann stated they are renegotiating the State contract for immunizations. They are going to continue with immunizing the children before the age of two with the primary services. This year they are currently at 81% and their goal is 83% of 2 year olds are immunized before age two with the primary series. Ann stated regarding lead, they are providing more comprehensive nurse follow up for lead levels that are five and above. Through the Lead Coalition they worked with the State for a provider tool kit, they customized it to Brown County, and it was distributed to local pedestrians in the area. Karen asked about adult immunization program and if it is only for residents of Brown County. Ann stated adults have to meet the State guidelines otherwise; they have to go to a provider. Jim asked about Acute Flaccid Myelitis. Ann handed out a fact sheet and stated there are no confirmed cases in Brown County. She states the diagnosis has to come from CDC. They still do not know what is causing this. The majority is occurring in children. Since 2014, there have been 404 confirmed cases. In 2018, there are 80 confirmed cases in 25 states. Cases are reported directly to the State and they inform us if we have anyone in our jurisdiction under investigation.

8. Environmental Unit Update

Zach Kroening stated we are starting interviews for our open sanitarian position. In the 2019, we will be adding an Environmental Technician, which will tackle the increase in the short-term rental tourist rooming house inspections. He hopes to have this filled in January 2019. Zach states they are forming a food safety advisory group whose goal would be to develop and maintain a strong line of communication between the Environmental Division and licensed operators as well as seek input on building a comprehensive, fair and consistent food inspection-licensing program. Zach stated they are creating an online application process for all licensed food establishments to apply for a seat on the committee and hope to have it completed by April 2019. Mr. Schadewald stated there is a software program, which will give them a list of the tourist rooming houses in Brown County. Zach estimated around 250 tourist rooming houses will need to be inspected.

9. Community Engagement Unit Update

Andrea stated our Maternal Child Health contract is being negotiated and hopes to have final updates by the end of this week and will update next board meeting. Andrea stated we are looking forward to hiring the Planner position which passed through budget with support from leadership. Andrea also indicated we are in the process of transitioning a hearing and vision nurse position to an educator.

10. Health officer remaining report

Anna stated our move date is February 28. We will close down the office except for emergency services. The first of March is unpack and settle day. March 4th public health opens at both locations. ICS structure has been working very well and it has helped us to streamline communication. Anna handed out the 2017 Annual Report and the 2019 Preparedness Calendar for the 200th birthday. One of the calendars made it into the time capsule at the Neville Public Museum.

10

11. Receive new information on wind turbines – Standing Item

Bill Acker handed out a document entitled "*Mason County wind-farm lawsuit against Consumers Energy settled for 17 of 19 plaintiffs.*" By John S. Hausman from www.mlive.com. Bill stated the terms of the settlement are confidential. Bill Acker also presented a court case document from State of Michigan, County of Mason, Kim Vannortwick, etal vs. Consumers Energy Company, Case No. 13-87-cz, Complaint and Demand for Jury Trial. He also handed out a document from www.michigancapitolconfidential.com entitled "*One Lawsuit Settled, But No Truce in Wind Energy Debate,*" by Jack Spencer, dated January 31, 2015. He also handed out a document entitled "*Brown County Board of Health Meeting Tuesday November 13 2018.*" He also handed out a document called "*Adverse Health Effects from Wind Turbines Commonly Called Wind Turbine Syndrome*", by William G. Acker dated November 13, 2018. Bill Acker stated this document lists many of the adverse health effects that are experienced from wind turbines as well as the adverse effects on animals.

Bill stated we do not have definitive health tests showing the wind turbines cause these health syndromes. This definitive proof is found in many cases of health problems, not just in the United States but also around the world. A good example is cigarette smoke causes lung cancer. That has never been medically proven that it causes health problems in humans. It has been proven in mice but has never been medically proven in humans. The reason why it is so highly supported in the United States is the preponderance of evidence. He states another example of this is the Monsanto Round Up case. It has never been medically proven that Round Up causes cancer. It has been indicated as a probable cancer-causing agent. They do the tests on mice and that makes it probable. The reason Bill gives these examples is it correlates well with what we are experiencing with respect to wind turbines. We may never get the medical evidence we would like but in his opinion, there is already a preponderance of the evidence.

12. Correspondences

None.

13. Comments from the Public

Barb Vanden Boogart commented on rudeness and animosity at this meeting. She stated they take a great deal of time and effort to look into things and protect the community. She states they are working hard to protect them.

14. All Other Business Authorized by Law

15. Adjournment / Next Meeting Schedule (January 8, 2019)

PROCEEDINGS OF THE BOARD OF HEALTH MEETING
TUESDAY, JANUARY 15, 2019
5:00 PM

Present: Richard Schadewald, Cheryl Weber, Susan Molenaar, Jay Tibbetts, Cynthia Brown Sullivan

Excused: Karen Sanchez

Others Present: Steve Deslauriers, Barbara Vanden Boogart, William Acker, Erik Pritzl, Anna Destree, Ann Steinberger, Zach Kroening, and Andrea Kressin

1. Call to Order, Welcome, Introductions

Chairman Richard Schadewald called the meeting to order. Mr. Schadewald welcomed new Board member Cynthia Brown Sullivan. Cynthia stated she is a physician and lives in Ledgeview.

2. Annual Election of Board of Health Chairperson, Vice Chairperson per Chapter 35.01(5) of the Brown County Code of Ordinances

NOMINATION: Richard Schadewald for Chairperson. Tibbetts / Molenaar

MOTION: To elect Richard Schadewald as Chairperson by unanimous consent. Tibbetts / Sullivan

MOTION CARRIED

NOMINATION: To elect Jay Tibbetts as Vice-Chairperson. Schadewald / Molenaar

MOTION: To elect Jay Tibbetts as vice-chairperson by unanimous consent. Schadewald / Weber

MOTION CARRIED

3. Approval / Modification of the Agenda

MOTION: To modify and approve the agenda by moving Correspondence after Approval of Minutes of November 13, 2018. Tibbetts / Molenaar

MOTION CARRIED

4. Approval of Minutes of Meeting of November 13, 2018.

MOTION: To approve the minutes from November 13, 2018. Weber / Molenaar

MOTION CARRIED.

5. Correspondences

Submission of January 14, 2019, email from Joe Van Deurzen to Troy Streckenbach resigning from the Board of Health. Placed on file.

6. Communication Plan for Groundwater Exceedance

District 20 County Supervisor Steve Deslauriers stated this agenda item was referred from the Human Services Committee and it centers on the future proposed landfill site in Southern Brown County in the Town of Holland. At that site there are baseline monitoring wells where the county is testing to get a baseline of the environmental condition of that site prior to the construction of the land fill. He stated he would give a brief background of what happened and why he is here, what his concerns are, and why he is

asking for action from the Board of Health. Mr. Deslauriers stated back in December a round of testing was done on the baseline monitoring wells at the dumpsite, which included over 20 wells that were tested back in December of 2017. He stated TCE (trichloroethylene) and methylene chloride were found in those wells. Port and Resource Recovery's contractor, who did the testing, tried to figure out what happened and proceeded with two further rounds of testing; one in December 2017, one in February 2018, and one in April 2018. Mr. Deslauriers stated he heard nothing about the contamination of those 20 plus wells until the Director's Report at the Planning Development and Transportation (PD&T) meeting. At that meeting, Mr. Deslauriers asked if any of the neighbors had been contacted and was told it was just trace amounts. After that meeting, he was given a report that showed the levels of contamination, the extent of the contamination, and that no source was identified. Mr. Deslauriers submitted an untitled document summarizing the test results. He stated there were 152 statutory exceedances in over 20 wells. He stated they ranged from very small exceedances to over 160 times the state preventative action limit, which requires action be taken at that point. He stated no communication outside of Port and Resource Recovery up to that July PD&T meeting had taken place; a full 7 months after the known contamination took place. The three tests showed not a decreasing level but in his estimation, an increase in level and this was not relayed to the residents.

He ultimately contacted Director Pritzl on August 3rd and Erik Pritzl then communicated to our Health Officer, Anna Destree. Three days later, which he thought was an appropriate action, they contacted the DNR, who manages these events. Mr. Deslauriers continued with his fact finding and emailing back and forth to the DNR. He stated the summary from the DNR reported was how Port and Resource Recovery handled it once the DNR was involved was appropriate. He stated they never spoke to the appropriateness of the delay in communication. Mr. Deslauriers stated the cause of the contamination was bailers, devices they use to pull samples from the wells; specifically the adhesive used in those bailers appeared to be the cause of the TCE and methylene chloride. His concern is that they did not know the cause until September of the following year, a full 10 months after the known contamination, and 11 months from the contamination event. Since then he has been stating informally at every PD&T meeting that Director Haen attends, that he did not think the action taken was appropriate, and asked how to do you do this different if this exact event were to happen tomorrow.

Mr. Deslauriers stated he put in a communication to the County Board to make this a formal process because of difficulty making any movement while it was privately being considered in PD&T. Mr. Deslauriers stated at the August meeting the question was asked by the Human Services members to Health Officer Destree, "Would you have liked to be notified earlier?" The response was, "I would have preferred to have been notified earlier." Mr. Deslauriers stated he made the motion to refer to Corporation Counsel to give direction what he thought was appropriate actions for future events. The response given was to ask Port and Resource Recovery Director Dean Haen to follow the recommended communication guidelines specified by Corporation Counsel in his 11-27-18 email to Supervision Schadewald and Mr. Deslauriers which stated, "To notify the Wisconsin DNR within 60 days whenever we have a sample that attains or exceeds a ground water standard and especially to follow any and all Wisconsin DNR recommendations concerning this issue." Mr. Deslauriers stated Director Haen's communication for future well contamination events at three separate PD&T meetings would not follow this Corporation Counsel guidance. Mr. Deslauriers is looking for action by the Board of Health to say that this is not acceptable. He agrees with the logic and the pattern of investigation but what he does not agree with is keeping it quiet and only involving the DNR when someone else asks questions.

Mr. Schadewald stated he encouraged the Board of Health to do due diligence but to then talk to Anna and Erik to see what would be best for the Board of Health to recommend. Jay Tibbetts asked Anna how she would have acted when this was first discovered. Anna stated she would have made the recommendation to contact the DNR. Anna stated her question would be "is the DNR involved yet because the DNR is

ultimately the responding agency.” Mr. Deslauriers said the contaminate turned out to be something introduced with the bailers in the wells. It was not an environmental contaminant.

Mr. Schadewald asked Anna if we had a policy in Brown County. Anna stated she is not aware of a County policy. Anna stated they are starting to have conversations that if something happens out of the ordinary, how we update each other so we are aware of what is going on and that the proper agency is notified.

Cheryl asked if the DNR had any requirements. Steve Deslauriers indicated he could supply DHS Chapter 140. He states the language is clear but he thinks Corporation Counsel is on the middle ground by saying that it may not be specifically required because it is not an actual landfill yet. He recommends 60 days, which 60 days mirrors what is in DHS Chapter 140 for ground water protection.

Mr. Schadewald asked for the future should Brown County departments that have any discovery of contamination have a policy that they report it to the Health Department. Mr. Schadewald asked if Erik had a plan for that. Erik states it seems reasonable that we would want the departments involved with different angles of concern to be communicating. Mr. Pritzl stated they were trying to figure out the point source and they are looking at those wells. He stated we are thinking bigger issues and thinking how the DNR is involved and then start advising us of who can we notify and when and what are the concerns. He stated it makes sense that we are communicating and bringing all those resources to bear. Mr. Schadewald asked if we had a policy now. Erik indicated that we do not. Mr. Deslauriers indicated Troy signed a policy this month that particularly addresses this and only goes to the Risk Manager, which is one-step too short.

Mr. Schadewald said that if the Board of Health feels this is enough of a concern that we would make a motion.

MOTION: That the Human Services Committee draft and enact a policy relative to incidents of contamination by any government agency or detection of contamination in exceedance of State Statues because we find the situation with the Port authority delay unacceptable.

Schadewald / Tibbetts

MOTION CARRIED.

7. Nursing Unit Update

Ann Steinberger indicated influenza has been relatively mild this flu season. Ann stated there have been many GI outbreaks in long-term care facilities and it is the community. Our Public Health Nurse position is filled and the nurse started the end of December. We have one nurse who will be retiring.

Ann stated we received notification of funding from the State for CD funding. That funding cycle stated July 1st and goes through June 30th. We have a few months to figure out what we are going to do to increase awareness about communicable disease.

Before Christmas, we had a campaign where nurses went to certain bars and put up posters, two of which are on record. These ads targeted establishments where families would not go. There was an article in the Press Gazette regarding the campaign and it was shared nationally.

Ann indicated that the medical college reached out to us. They have a research project to get parental perceptions of the health education their child is receiving in school. We are collaborating with them to promote their survey. They hope to have 200 complete the survey. Cheryl asked if the survey was targeting the parents and Ann indicated it was. Anna stated what they believe to be true is that the parents would like more education but they hypothesize that the school thinks the parents do not. What they think they will learn from the study is that the parents actually want more education on it and that is what they are

looking to find out. Anna stated, in other words, does the parent perception match to school perception right now.

Ann stated we had a case of meningitis. It was a cooperative effort with De Pere. All contacts were treated and no additional cases. She stated in 2018 we investigated 10 cases of people where providers thought that the person had TB disease.

Ann stated we were contacted by the Department of Health Services and Zach was contacted by the Department of Agriculture, because one of our cases of Shiga-toxin e. coli matched several other people in the State. It turns out there are about 14 people nationwide that are potentially related to this. Zach's team investigated and they collected information from the possible areas and then handed that over to Department of Agriculture for follow-up and now we are waiting. Anna stated our teams over Thanksgiving went through the ground turkey recall. Because of the work the Nursing and Environmental teams did, there was a nationwide recall on turkey. Whether it is a current threat or not, we can look at processes and provide education.

Ann stated she was asked to share information at the January Human Services Committee about our reminder and recall system that we are using for individuals whom either are behind in immunization or are due for an immunization. Currently we are using a response that is available from Pfizer. Ann stated we are required under our grant to do a reminder recall system. We do a report and our health aides confirm details according to the Immunization Registry. The reports are sent to this HIPAA compliance, Televox, to send out letters. Anna took this procedure to our internal HIPAA committee and corporation counsel and they indicated we were not violating any HIPAA laws

8. Environmental Unit Update

Zach Kroening stated we are in the process of gathering information and looking at taking on transient non-community well water program through the DNR. We would be testing for chloroform bacteria, ecoli and nitrates. Our vacant sanitarian position was filled in mid-December so we are fully staffed for Sanitarians. The next step we will be interviewing for the Environmental Technician position who will inspect the tourist rooming houses. The Room Tax Commission wanted to find which places in Brown County are not licensed They purchased this STR Helper which tracks down the tourist rooming houses.

9. Community Engagement Unit Update

Andrea Kressin stated an offer was made for the Public Health Planner position and we are finalizing details. This person will guide us through the accreditation process. We are in the committee process in terms of hearing and vision. We proposed a position change to hire an educator to support the Hearing and Vision Program to work in partnership with the nurse who is currently coordinating efforts along with health aide support. A new grant opportunity is related to a chronic disease prevention grant that the State of Wisconsin approached Brown County because of some outreach that our Community Engagement team had been doing in terms of diabetes awareness and prevention with at risk populations in our community. Casa Alba, NEW Community Clinic, ADRC, and others have been having conversations around diabetes management and awareness and the State applied to the CDC for funding to support some of these initiatives because of the work we were already doing. We are putting together an 18-month action plan that will wrap up in mid-year 2020. The focus will be on diabetes and cardio-vascular disease prevention and early detection and management.

10. Health Officer's Report

Anna stated Erik Pritzl would talk more about case management resource. Erik stated there were questions about case management resources and what the department does for mental health, substance use, or disability. Erik submitted a Case Management Services Overview, which describes what we do. He stated it

10

describes the programs that we offer based on regulations or a partnership with the State. It talks about eligibility briefly and then funding. All these programs depend on medical assistance eligibility so we can be reimbursed for the service.

Anna stated we are in the final stretch of the move. Ann pointed out the great work that is being done by staff. The incident command system is used to management emergency events. We can use this as an example of how we respond as an agency to planning an event.

Anna stated the Beyond Health group is working and doing a charter on what are the roles of the Steering committee. We have had two planning sessions. She thought it was important to note that they are going through that process.

Anna stated we are looking at updating Public Health Ordinances and recognize that they are outdated. Chapter 37 needs to be updated to include current code reference. We are working with Corporation Counsel as part of our accreditation process to update other policies and ordinances.

We will be evaluating our home visitation program and look towards Nurse Family Partnership. At the March 12th meeting, we will give a presentation on how we intend to evaluate the home visitation program. It is a community program and we will get feedback from partners and community members.

11. Public Health Legislation – Standing Item

12. Receive New Information on Wind Turbines – Standing Item

William Acker submitted "*Wind Turbine Hosts Clive & Trina Gare Hosted 19 Wind Turbines on Their Land and Became Ill upon Start-up,*" by William Acker dated January 15, 2019, which states wind turbines in Australia were hosted by the Gare Family. Because of the 2010 installation, the Gare's became ill. They reported their experiences to the Senate Select Committee and risked losing their compensation for hosting the wind turbines by speaking to them. He states this disproves the "green eyed monster of jealousy" theory. Mr. Acker also submitted an article printed from <https://stopthesethings.com> entitled "*SA Farmer Paid \$1 Million to Host 19 Turbines Tell Senate they 'Would Never Do it Again' due to 'Unbearable' Sleep-Destroying Noise,*" which is about Clive and Trina Gare.

Mr. Acker presented his document "*Jay Tibbetts Visit to Dave Enz Home June 8, 2016,*" prepared by William Acker dated January 15, 2019, which describes Jay Tibbetts experiencing a condition called Fight or Flight Response. Mr. Acker read this document to the Board and it is on file.

Mr. Acker also submitted "*Future Renewable Electricity Production from 2017 to 2050 for the USA & the Impact on Wisconsin,*" by William Acker dated January 15, 2019, which is on file and talks about solar energy increasing over the 17 years, from 2017 to 2050, by 28.8% per year, but wind turbines over that same period of time will experience an increase of 2.27% per year.

Barbara Vanden Boogart stated in the affidavits that people never experienced the Fight or Flight Response prior to the wind turbines being installed. She stated not only did Dr. Tibbetts experience this but three teachers have experienced this as well. There have been four county supervisors that have experienced symptoms because of their exposure in the project as well as an attorney. It is not just people that live there that have symptoms but visitors as well.

13. Comments from the Public
None.

14. All Other Business Authorized by Law

Dr. Tibbetts would like a rural representative on the Board of Health.

Mr. Schadewald will send a thank you to Joe Van Deurzen for his years of service.

15. Adjournment / Next Meeting Schedule (March 19th, 2019)

Motion to adjourn at 6:40PM

Brown-Sullivan / Molenaar

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, February 14, 2019 at Health & Human Services; Sophie Beaumont Building; Boardroom A; 111 N. Jefferson Street; Green Bay, WI 54301

Present: Supervisor Tom Lund, Chair
Jesse Brunette, Susan Hyland, Vice Chair Paula Laundrie, Supervisor Alex Tran

Excused: JoAnn Grashberger, Craig Huxford, Supervisor Aaron Linssen

Also Present: Erik Pritzl, Executive Director
Jenny Hoffman, Community Services Administrator
Eric Johnson, Finance Manager
Ed Somers, Hospital & Nursing Home Administrator
Six Social Worker students from University of Wisconsin-GB
One Social Worker student from Concordia College

1. **Call Meeting to Order:**
The meeting was called to order by Supervisor Lund at 5:37 pm.
2. **Approve / Modify Agenda:**
LAUNDRIE / TRAN moved to approve the February 14, 2019 Agenda.
The motion passed unanimously.
3. **Approve Minutes of January 10, 2019 Human Services Board Meeting:**
HYLAND / BRUNETTE moved to approve the minutes dated January 10, 2019.
The motion passed unanimously.
4. **Executive Director's Report:**
Erik Pritzl distributed his February 2019 Executive Director Report.

Sophie Beaumont Building Moves and Updates

To prepare for Public Health's arrival, the Mezzanine level has been cleared of Youth Justice and Child and Adolescent Behavioral Health Unit (CABHU) staff, and they have moved to the first floor. Facilities is fixing, painting, and installing desk space for Public Health to move in at the end of February, to be open for services on March 4. Public Health will also have clinic space on the first floor.

LAUNDRIE: Can we get a tour at some point?

PRITZL: When we get the Mezzanine done, and have it cleaned up. Maybe at the March (Human Services Board) Meeting, we can do a walk through and you can see how we are using the space now.

Food Share Benefits

Benefits for February were issued on January 20. All benefits for March will be issued on March 1, even though they are usually distributed sometime between the 2nd and 15th of the month. The State made the decision to issue all on the 1st to minimize the stress and strain on people. As long as there are no further shutdowns at the Federal level, everything should continue as normal. They are working on contingency plans if there would be a problem.

New Department of Children and Families (DCF) Secretary

There is a new Department of Children and Families Secretary – Ms. Emilie Amundson. She comes to DCF from the Department of Public Instruction. She has brought some team members from that area, plus new team members will be added. DCF is doing some restructuring and filling positions. Pritzl was able to meet her and ask about the \$30M per year for Child Welfare Services. She was aware this money was being asked for, but it is too early for her to say whether she supports it or not.

Secure Residential Care Center for Children and Youth (SRCCCY)

We have talked with Sherriff's office staff to discuss what it means to current operations. Rules are being written that can impact current programing like our LAUNCH Program which is an alternative to corrections. We are looking at what opportunities are there for Brown County. Right now in the State, there aren't many counties looking at SRCCCYs. Dane, Racine and Milwaukee Counties, are looking at these, but are not looking to serve populations outside of their own counties. Racine is the only one talking about beds being available for other Counties. Fond du Lac has explored it, and Brown County is continuing to explore it. We just received the Rule and we continue to pull it apart. There is a requirement to create a Grant Committee, and applications to construct were to be submitted by March 31; however, no committee has been established, and no committee members identified. Pritzl does not believe this will happen by March 31, and thinks the deadline will get pushed back because everything is to be completed by January 1, 2021. There are funding issues – only \$40M statewide for all new County facilities, and we have heard estimates of \$25M, with one county stating their facility would need \$40M. There is a lot of work to be done, but we remain involved to see if it is something Brown County would like to do.

Criminal Justice Services

We have posted the Criminal Justice Manager position through tomorrow (February 15). We want to be sure we get a good pool of applicants. We did a first round of interviews last week. This position is to get all operations moved to us as well as the Day Center starting July 1, 2019.

Emergency Detentions

Both children and adult emergency detentions were down in 2018. We are seeing levels that may be indicating a downward trend.

2018 Mental Health Initiative Service Numbers

Mobile crisis statistics – we are seeing people within under 30 minutes which is a performance standard. 35 individuals were served for detox services; 2 people had repeat admissions; 53 people served through contracted residential treatment. 4 different providers were used so we could better match a consumer with a provider. The Day Report served an average of 138 people per month, and 170 people completed supervision.

LAUNDRIE: Is the mobile crisis – the average of 156 in-person – that does not include Family Services Crisis Center, that's a separate entity, correct?

PRITZL: This is the Crisis Center and this is the mobile portion.

LAUNDRIE: And police?

PRITZL: No, this is just Family Services Crisis Center.

TRAN: Concerning the (Public Health) move to Duck Creek — are we providing any services out there for the community because there are no bus routes out there.

PRITZL: The units out there are Environmental units — the Environmental Lab, Sanitarians and Preparedness staff.

TRAN: Classes out there?

PRITZL: They have talked about the opportunity to potentially have public meetings in the meeting room out there. They've discussed having Serve Safe classes there for food servers, but they are not scheduled at this time. The public services like immunizations or communicable diseases are here (Sophie). What is out there are mostly services that are environmental in nature, and services where our staff are going out to the locations — like our Sanitarians that do the inspections; they are in the field more. People may come and drop off water samples, but that is the extent of it.

TRAN: Good, because Howard is not going to put in a bus line.

LAUNDRIE / TRAN moved to receive and place on file the Executive Director's Report for February 2019. Motion carried unanimously.

5. **CTC Administrator Report including NPC Monthly Report:**

Ed Somers, Hospital & Nursing Home Administrator, referred to his February report included in the Agenda Packet.

Somers took time to thank the CTC staff during the brutal weather the last couple weeks. The staff was very good about showing up, some had to extend their shifts; they did a great job and are very dedicated.

Patient Care Issues

CTC is updating the process for those who show up at front door to voluntarily present for services by shortening the process, make sure they do not have to wait long and we take care of their needs. We are continuing to work on ligature assessments, and new beds have arrived to help reduce these risks. We are securing the beds to the floor, and donating current beds to Diversion.

Contracted Service Issues

We are having issues with Aramark doing laundry and having it come back with bleach spots.

Patient Complaints

We are changing how we do our grievance procedure. We have decided to separate them into service complaints and true civil rights grievances. By code we are required to have the board meet on the civil rights grievances. As an example, someone wants to complain about our smoking policy, and they will grab the civil rights grievance policy form, and fill it out. So instead of convening the committee to discuss that, we will separate those out. The QAPI committee will still hear about the complaints, but will not need to convene.

Federal/State Regulatory Concerns

We filed two reports with the Office of Caregiver Quality regarding complaints about caregivers on Nicolet Psychiatric Center and Bayshore Village. Neither complaint was substantiated, however, the reports were filed per code requirements.

We were cited for a past non-compliance complaint — a patient at the nursing home, made accusations that we could not substantiate so we did not file a report. Then, later she made continued accusations, and this time named a person, so we filed a report. We received a citation because we did not file based on the first complaint she made without naming a person.

Other Business

We received notification that Bay Haven will not need to undergo the heightened scrutiny standard and is not subject to the home and community based settings rule. Federal government said County nursing homes that have assisted living can't accept Family Care dollars because they don't meet the home and community based setting by virtue of being on County grounds; that makes them an institution. So unless you go through heightened scrutiny

to show that our building is homelike, we cannot accept Family Care dollars. We are a different type of entity because we are a crisis stabilization unit, they went through our data, and said we do not have to go through the standard, so we can still get Family Care dollars. This is a big deal because quite a few of our clients are funded through Family Care, and they can continue to utilize the services.

Smart Goals for 2019

One of our Smart Goals is to provide detox services in conjunction with crisis stabilization services. So Somers is going to Madison with Samantha Behling (Director of Nursing: Nursing Home) and Mandy Woodward (Director of Nursing: Nicolet Psychiatric Center and CBRF) in March to look at costs of operation and architecture changes to the unit.

LAUNDRIE / HYLAND moved to receive and place on file the CTC Administrator Report including the NPC Monthly Report for February 2019. Motion carried unanimously.

6. Financial Report for Community Treatment Center and Community Services:
Eric Johnson, Finance Manager, distributed the February Financial report.

Johnson explained he didn't have a true financial statement for December and the end-of-year, so he did an estimated projection. It is not final, but it shows the major things discussed previously.

Community Services:

In the December 2018 financials that impact the year overall, there is an \$800k favorable adjustment better than budgeted for WIMCR and CCS cost report settlement. We were expecting a settlement, but not as favorable as received. Also \$600k just arrived which is an income maintenance RMS — random moment study — prior year settlement. Every few years, the State settles up with the Federal government regarding RMS and the impact for Community Services will be \$600k favorable. The December numbers also include a \$453k transfer from CTC to Community Services to reverse the same amount 2015 transfer of Community Services to CTC. Those items together create, in December, a \$1.6M favorable bottom line which will offset a similar unfavorable earlier in the year. If all goes well, it will show a \$68k favorable for the whole year.

Community Treatment Center:

The most important item is to recognize a budget adjustment that was planned to match the non-cash pension adjustments. We had actual expense of \$543k, with no budget to match, causing personnel costs to show we were over \$500k. This budget adjustment will correct this to show we were actually \$44k favorable for controllable operating personnel costs. Personnel costs are final. December shows the transfer of funds from CTC to Community Services showing a \$776k unfavorable, but leaves a year-to-date amount of \$500k compared to budget adjusted to \$1.2M unfavorable, which is depreciation and the pension adjustment. Both are non-cash issues which allows us to budget in the negative that does not require funding to support the expenses; they are accounting expenses. The end result is \$650k better than budget.

HYLAND / TRAN moved to receive and place on file the Financial Report for Community Treatment Center and Community Services. Motion passed unanimously.

7. Statistical Reports: a, b & c

Statistical Reports a and c were included within the Agenda Packet. Report b was distributed this evening to the Board.

TRAN: The voluntary mental illness statistics for BayHaven, why is it so high? The year-to-date for 2018 is the same as January of this year.

PRITZL: January is 24. The year-to-date are going to be the same as January (numbers) because it is just one month.

TRAN: So these are not new cases?

SOMERS: The same time period in 2018 was 24.

PRITZL: It just happened to match. The average daily census was 4.2 for 2018 year-to-date; this year is 7.0. What that tells you is we had the same number admissions of 24, but they stayed longer because the average daily census is higher. You can see that in the Average Length of Stay where in 2019 it was 15 days, but in 2018 it was 4 days. People are staying longer at Bay Haven.

LUND: Which isn't a bad thing.

PRITZL: Regarding 7b, the (CPS) handout tonight which is very different. We have been working on this; I wanted to walk through it. The bottom section explains what a CPS report is, what response time means, etc. The same information (is presented) like you have always been given in two tables on the page, it has been re-packaged as charts.

LAUNDRIE: It is cleaner.

PRITZL: It gives you a visual. It still has the same data table in terms of 2018 compared to 2019. You are seeing just an isolated data set of 2 years so I would caution you before you make any decisions based on trends. "Oh, it looks like CPS referrals are down and we are doing better." Yes, January is down; we will see what February looks like. We will still do year-to-date, cumulative, so it is the same as the tables you used to see. We just decided to put it as charts.

Service requests (on the right) is a newer piece that you have not seen. Service requests are referrals that we receive that aren't meeting the standard of child abuse/neglect allegation or safety concern. They are an indication that a family needs a service of some sort and there is a concern before it reaches that level (abuse/neglect) that we intervene.

The Response Time is so you can see a breakout of how our cases are screened and assigned with response times. The green part is 5 business days, means you have to get out within 5 business days...

LUND: So that means 88% of the...

PRITZL: These are numbers. Of the 120 screened-in reports above, this is how fast we had to respond. So if you have 21 "same-day" that means if you have an average of 20 business days in a month, every day we are going out on a same-day on a case. I wouldn't say it works out that way though, some days it is 4 people went out on cases, and then you might have 3 days with no one going out on a case same-day as an urgent response. It all depends on the day.

LUND: It depends on the situation.

PRITZL: Correct. So every time we screen a report, we have to decide how fast we respond. If there is a present-danger threat, injury, risk with maltreatment in the home right now, incapacitated parents... we going out right away usually with law enforcement to make some decisions. So that gives you the Response Time picture.

And then regarding Allegations, we gave you a breakout of that, those are numbers, not percentages.

LUND: So some of those responses... law enforcement is called in, kids are there, parents are being hauled away, somebody has to take care of those kids right away. So you are

going to be called out right then. That would account for the 21 that would be situations like that.

PRITZL: We are responding right away to make those safety decisions – it could be relatives, could be a foster home; it depends on the situation and the resources, but those decisions are made right away.

HYLAND: I really like this (the new CPS report). It is a very good visual.

PRITZL: The allegations of maltreatments are there (on the report) too. Those are numbers, not percentages. If you had a calculator, and went through and totaled them, you'd say it doesn't equal 120, it equals more than that. That's because you can have more than one allegation on a referral; you could have physical abuse and sexual abuse – two allegations, but one report.

TRAN: Do the kids make the allegations? Who is making the allegations?

PRITZL: Whoever is reporting to us.

LUND: Some are teachers, anyone within the school system is a mandated reporter, and if they see anything like strange bruises or something on a kid, then they report.

LAUNDRIE: It is interesting to see the unborn child abuse. Tiny (number), but I am happy to see that. Would that be drinking?

HYLAND: I noticed that too... it caught my eye. I was a little surprised.

LUND: Drinking or drugs...substance use, typically.

PRITZL: We wanted to give you something different; same information you have always received – actually more – presented a different way.

TRAN: Regarding report 7c, some areas are highlighted blue – the font is blue, why? Is it done for a reason?

PRITZL: I am looking at the pattern. I will ask our contract person why they were colored that way because these are all normal contracts that we have had. I don't want to venture a guess as to why without talking to her.

HYLAND / BRUNETTE moved to receive the reports and place on file. Motion passed unanimously.

8. **Request for New Non-Continuous Provider & New Provider Contract:**
Please refer to the Agenda Packet which includes this information for February.

LAUNDRIE / HYLAND moved to receive and place on file the New Non-Continuous Provider and New Provider Contract Report. Motion passed.

9. **Communication Regarding Human Services Board Attendance.**
Vice Chair Paula Laundrie requested this item be added to the agenda.

Laundrie asked if there are any bylaws or suggestions so we don't continue to run into issues reaching quorum; for example, she asked if more people can be appointed to this Board.

LUND: We are missing one (board member). We need one more appointed.

LAUNDRIE: Being on this board for 15+ years, we have not run into this problem (not having quorum) as much as we have the last couple years. If you are appointed to this Board by Brown County, we owe it to the citizens to attend as much as possible. I don't

know if anyone else feels the same way. We all have things come up. I had a friend pass away this afternoon...

HYLAND: And you are here. I think your point is well taken. When I miss, it is for travel. Do you think it is pertinent if you are going to be a Board Member that you attend a certain percentage or number of meetings?

LUND: We need to look at members that are missing months on end, and whether they want to be on it. It is a sensitive subject.

TRAN: Can we expand the Board to include more members so we are not having this issue?

LUND: It shouldn't be hard to get 5 out of 9 to attend. We also need to look at the Officers again, because we have not voted on that in a long time.

LAUNDRIE: One is the Secretary that has not been here.

PRITZL: Is that all written out?

LUND: There are rules.

PRITZL: And they are in, where?

LUND: They are under State statutes.

PRITZL: The Board composition is all there. As to this Board being created, there is a County ordinance that creates the Human Services Board.

LUND: We were talking about the ad hoc committees at the Executive Committee, in that every two years you are to reaffirm and have officer votes.

PRITZL: This is actually a statutorily-required board.

LUND: Yes, by the State of Wisconsin.

PRITZL: So this Board is going to exist no matter what. If I may, on the attendance piece... I think, what is challenging from my perspective, if we ask people if they want to continue (on the Board), they indicate they want to continue. But without some attendance requirement, which I have been on some boards or committees that state you must attend 50% of the meetings. I don't know if you'd ever want to go in that direction, but you would have to look at the County ordinance that created this Board and then potentially put it in...

LUND: Let's look at the ordinance, and review with Corp Counsel where we are going to be at with this. Didn't we have 3 cancelled meetings last year? 3 out of 12 meetings cancelled – that's 25% of your meetings cancelled. That's a lot if you ask me.

LAUNDRIE: I agree.

BRUNETTE: Short of a policy change, I would ask the County Executive (Troy Streckenbach) to let people know as they are appointed on this Board, we are going to require attendance and to set that expectation. If they are not willing to make that commitment, this is probably not the committee for them. I think there are a lot of people in the community, if they knew there was an opening on this committee, they would love to begin their service in government and take it very seriously. Not that everyone here doesn't... I'm not saying that.

LUND: I understand what you are saying, Jesse. I think some have health concerns or other things that they cannot make it, but I think we need to have better attendance. We should be able to come up with 6 people out of 9. I would take this communication and refer to the Administration to figure it out; to (County Executive) Troy and myself.

LAUNDRIE / TRAN made the motion to refer this communication to Administration. Motion passed unanimously.

10. Other Matters:

Supervisors Lund and Tran thanked the students from University of Wisconsin-Green Bay and Concordia College for attending this evening's Human Services Board meeting.

Realizing their attendance was due to a homework assignment,

TRAN / BRUNETTE moved to suspend the rules to open the floor to interested parties to speak and ask questions. Motion passed unanimously.

Supervisor Lund recognized University of Wisconsin-Green Bay student, Paige Osmunson.

Ms. Osmunson said she and the other students attended the meeting to look at the structure, commitment and impact the Human Services Board does for the community.

LAUNDRIE: Very timely.

LUND: Paula (Laundrie) and I have been on this Board for 15 years. We have done a lot with Child Protection. We make recommendations to the County Board as to spending on certain things and certain needs the County has to have. I would say, Child Protection is one of the number one issues; it's number one, really, in the whole state of Wisconsin.

PRITZL: That's true. It's the priority.

Hearing no other questions, Supervisor Lund called for a motion to return to regular order.

TRAN / HYLAND made the motion to return to regular order. Motion passed unanimously.

11. Adjourn Business Meeting:

LAUNDRIE / HYLAND moved to adjourn. Motion passed unanimously.

Supervisor Tom Lund adjourned the meeting at 6:21 p.m.

Next Meeting: Thursday, March 14, 2019 at 5:15 p.m.
Sophie Beaumont Building
Boardroom A
111 N. Jefferson St.
Green Bay, WI 54301

Respectfully Submitted,
Catherine Foss
Office Manager

10

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: February 14, 2019

Re: Executive Director's Report

Sophie Beaumont Building Moves and Updates

All Health & Human Services staff members from Youth Justice and the Child and Adolescent Behavioral Health Unit have moved from the Mezzanine level to the 1st floor of the Sophie Beaumont Building. The Mezzanine level is now being prepped for Public Health staff members to move in at the end of February, with Public Health being ready for the public on March 4th.

Food Share Benefits

At the last meeting we discussed concerns related to the partial Federal government shutdown related to Food Share benefits. February benefits were issued and available to participants on January 20th. This is early for all recipients, and would have followed some benefits that were available less than a week earlier. The department recently was made aware that March benefits will be made available to all participants on March 1st. Normally, benefits would have been issued between March 2nd and March 15th. A decision was made at the state level to issue all benefits earlier in the month to reduce strain on participants.

New Department of Children and Families (DCF) Secretary

I had the opportunity in January to meet with the new DCF Secretary, Emilie Amundson, along with other directors from large counties. Some of this time was spent providing an overview of the department and discussing the county advocacy efforts for additional funding (\$30M) to support child welfare services.

Secure Residential Care Center for Children and Youth (SRCCCY)

The Wisconsin Department of Corrections drafted the emergency rule (DOC 347) related to the program and facility requirements for SRCCCY's. Health and Human Services staff and Sheriff's Office staff have been reviewing the requirements to determine the impact on existing programs as well as potential options for Brown County related to this new facility type. The

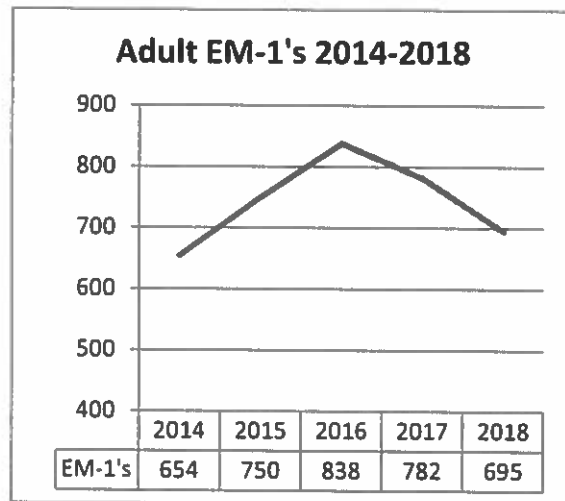
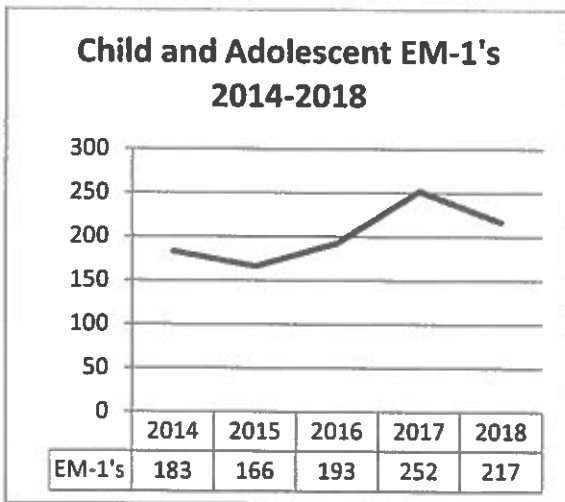
original timeline for this change in youth corrections required counties to submit a proposal for grant funding by March 31, 2019 to a newly formed state grant committee. However, committee members have not been identified, and the grant application requirements are not available as of this date.

Criminal Justice Services

The position for the Criminal Justice Services Manager remains open for applicants through February 15th, and a first round of interviews of qualified initial applicants was completed recently. The position remains open for applications to ensure a qualified pool is available. The existing treatment court services staff continue to provide services under the structure in place in 2018, and the Day Report Center is continuing operations under Family Services for participants screened and accepted as of the end of December, 2018. In some situations new referrals are being accepted provided the participant is likely to complete services by the end of June as this is the identified time frame for county staff to provide services.

Emergency Detentions

Emergency mental health detentions (EM-1's) for both children and adults were lower in 2018 compared to 2017. This information is presented in the charts that follow



2018 Mental Health Initiative Service Numbers

This is a brief summary of the number of people served in each component of the initiative. Final invoices and authorizations are being processed for 2018, and it is possible these numbers could increase.

Mobile Crisis Services:

- An average of 156 in-person mobile crisis contacts occurred monthly
- Contacts occurred within 30 minutes an average of 80% of the time

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Detoxification Services:

- 35 individuals received detoxification services in 2018
- 2 people had repeated admissions

Residential Treatment Services

- 53 people served through contracted providers
- 4 different residential treatment providers were used to match consumer needs

Day Report Center:

- 170 people successfully completed their terms of supervision
- An average of 138 people participated in Day Report Center services per month

BROWN COUNTY HEALTH & HUMAN SERVICES

Brown County Community Treatment Center
3150 Gershwin Drive
Green Bay, WI 54305-2188



Ed Somers, Hospital & Nursing Home Administrator

Phone (920) 391-4701 Fax (920) 391-4872

February CTC Monthly Report

1. **Patient Care Issues**- We have updated our process for individuals voluntarily presenting for service at CTC. Work continues on ligature risk assessment, new beds to help reduce these risks have arrived and installation has begun.
2. **Contracted Services Issues** – We are working with Aramark to resolve some laundry issues at CTC.
3. **Summary of patient complaints**- There was one grievance filed in the month of January that related to a client's personality conflict with a staff member. The grievance was investigated and reviewed without substantiation of a rights violation.
4. **Federal/State Regulatory Concerns**- Two reports were filed with the Office of Caregiver Quality regarding complaints about caregivers on Nicolet Psychiatric Center and Bayshore Village. Neither complaint could be substantiated, however the reports were filed per code requirements.
5. **Approval of Medical Staff appointments**- There were no medical staff appointments approved in January.
6. **Other Business**- Received official notification that Bay Haven will not need to undergo the heightened scrutiny standard and is not subject to the home and community based settings rule. We will continue to be allowed to receive Family Care funding for crisis stabilization services.

Respectfully submitted by: Ed Somers



Community Treatment Center

Summary Through 12/31/18
** PROJECTION - NOT FINAL **

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
Fund 630 - Community Treatment Center									
REVENUE									
Property taxes	3,199,210.00	.00	3,199,210.00	266,600.87	.00	3,199,210.00	.00	100	3,001,525.00
Intergov Revenue	4,054,366.00	.00	4,054,366.00	372,247.67	.00	4,683,455.96	(909,089.96)	116	3,856,830.27
Public Charges	3,855,542.00	.00	3,855,542.00	374,951.70	.00	4,606,493.89	(920,951.89)	119	3,632,639.42
Miscellaneous Revenue	1,824,401.00	3,191.00	1,827,592.00	108,458.73	.00	1,483,070.11	344,521.89	81	2,064,573.19
Other Financing Sources	.00	58,565.00	58,565.00	.00	.00	58,565.00	.00	100	34,113.00
REVENUE TOTALS	\$12,933,519.00	\$61,756.00	\$12,995,275.00	\$1,122,258.97	\$0.00	\$14,030,794.96	(\$1,485,519.96)	108%	\$12,589,680.88
EXPENSE									
Personnel Costs	9,221,503.00	593,529.00	9,815,032.00	1,003,243.26	.00	9,770,607.26	44,424.74	100	9,702,711.61 (1)
Operating Expenses	4,336,323.00	11,227.00	4,347,550.00	895,320.19	.00	4,789,941.68	(442,391.68)	110	4,373,956.15 (2)
Outlay	25,100.00	.00	25,100.00	.00	.00	1,305.58	23,794.42	5	36,538.62
EXPENSE TOTALS	\$13,582,926.00	\$604,756.00	\$14,187,682.00	\$1,898,563.45	\$0.00	\$14,561,854.52	(\$374,172.52)	103%	\$14,113,206.38
Grand Totals									
REVENUE TOTALS	12,933,519.00	61,756.00	12,995,275.00	1,122,258.97	.00	14,030,794.96	(1,485,519.96)	108%	12,589,680.88
EXPENSE TOTALS	13,582,926.00	604,756.00	14,187,682.00	1,898,563.45	.00	14,561,854.52	(374,172.52)	103%	14,113,206.38
Grand Totals	(\$649,407.00)	(\$543,000.00)	(\$1,192,407.00)	(\$776,304.48)	\$0.00	(\$543,000.00)	(\$649,407.00)		(\$1,523,525.50)

NOTES:

- (1) Personnel Costs includes proposed Budget Adjustment of \$543,000 to match actual non-cash Pension Adjustment expense recorded in 2018.
- (2) December includes \$453,000 proposed transfer to CS to reverse a transfer for the same amount from CS to CTC in 2015.

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Community Services

Summary Through 12/31/18

** PROJECTION - NOT FINAL **

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
Fund 201 - Community Services									
REVENUE									
Property Taxes	16,172,778.00	.00	16,172,778.00	1,347,731.50	.00	16,172,778.00	.00	100	15,543,199.00
Intergov Revenue	33,121,654.00	(62,397.00)	33,059,257.00	4,394,982.71	.00	33,820,254.26	(760,997.26)	102	33,564,472.37 (1)
Public Charges	1,883,072.00	275,000.00	2,158,072.00	156,506.10	.00	2,072,965.59	85,106.41	96	2,057,908.64
Miscellaneous Revenue	167,000.00	(10,020.00)	156,980.00	14,911.34	.00	189,885.22	(32,905.22)	121	155,963.53
Other Financing Sources	.00	276,882.00	276,882.00	525,948.23	.00	793,018.61	(516,136.61)	286	1,354,313.00 (2)
REVENUE TOTALS	\$51,344,504.00	\$479,465.00	\$51,823,969.00	\$6,440,079.88	\$0.00	\$53,048,901.68	(\$1,224,932.68)	102%	\$52,675,856.54
EXPENSE									
Personnel Costs	19,274,128.00	282,800.00	19,556,928.00	1,733,841.76	.00	19,716,450.24	(159,522.24)	101	18,865,682.71
Operating Expenses	32,046,376.00	189,257.00	32,235,633.00	3,081,608.34	(.50)	33,233,551.28	(997,918.28)	103	34,104,353.03
Outlay	24,000.00	7,408.00	31,408.00	.00	.00	30,537.03	870.97	97	47,380.60
EXPENSE TOTALS	\$51,344,504.00	\$479,465.00	\$51,823,969.00	\$4,815,450.10	(\$0.50)	\$52,980,538.55	(\$1,156,569.55)	102%	\$53,017,416.34
Grand Totals									
REVENUE TOTALS	51,344,504.00	479,465.00	51,823,969.00	6,440,079.88	.00	53,048,901.68	(1,224,932.68)	102%	52,675,856.54
EXPENSE TOTALS	51,344,504.00	479,465.00	51,823,969.00	4,815,450.10	(.50)	52,980,538.55	(1,156,569.55)	102%	53,017,416.34
Grand Totals	\$0.00	\$0.00	\$0.00	\$1,624,629.78	\$0.50	\$68,363.13	(\$68,363.13)		(\$341,559.80)

NOTES:

(1) December includes \$800,000 favorable adjustment for WIMCR/CCS 2017 cost report settlement and \$600,000 favorable IM RMS prior year settlement.

(2) December includes \$453,000 proposed transfer from CTC to reverse a transfer for the same amount from CS to CTC in 2015.

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**BROWN COUNTY COMMUNITY TREATMENT CENTER
JANUARY 2019 BAY HAVEN STATISTICS**

	JANUARY	YTD 2019	YTD 2018		JANUARY	YTD 2019	YTD 2018
ADMISSIONS							
Voluntary - Mental Illness	24	24	24	AVERAGE DAILY CENSUS	7.0	7.0	4.2
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	INPATIENT SERVICE DAYS	217	217	131
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	BED OCCUPANCY	44%	44%	28%
Other - EPP	0	0	2				
TOTAL	24	24	26	DISCHARGES	21	21	24
READMIT WITHIN 30 DAYS				DISCHARGE DAYS	319	319	89
Readmit within 30 days	1	1	1				
				AVERAGE LENGTH OF STAY	15	15	4
IN/OUT	3	3	4				
ADMISSIONS BY COUNTY				AVERAGE LOS BY COUNTY			
Brown	21	21	23	Brown	22	22	5
Door	1	1	1	Door	10	10	4
Kewaunee	1	1	0	Kewaunee	2	2	0
Oconto	1	1	1	Oconto	2	2	2
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	0	1	Shawano	0	0	7
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	0	0	Outagamie	0	0	0
Manitowoc	0	0	0	Manitowoc	0	0	0
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	0	0	Other	1	1	4
TOTAL	24	24	26	TOTAL	15	15	5

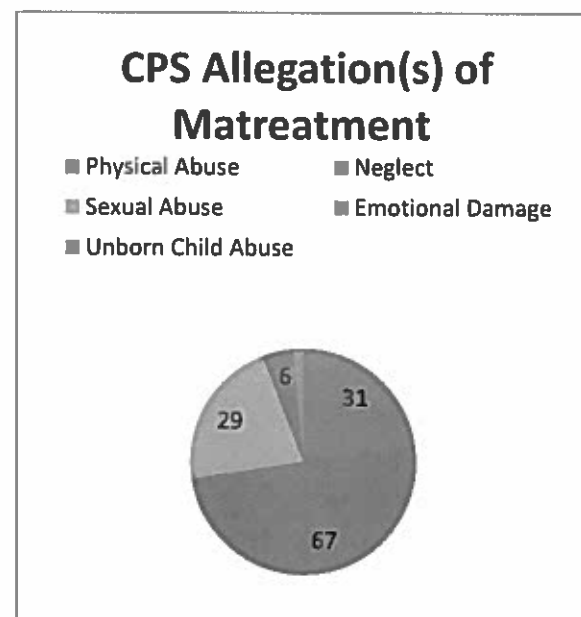
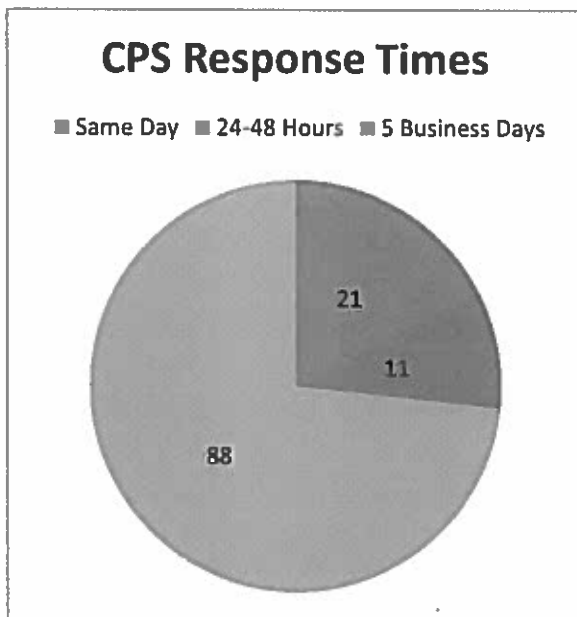
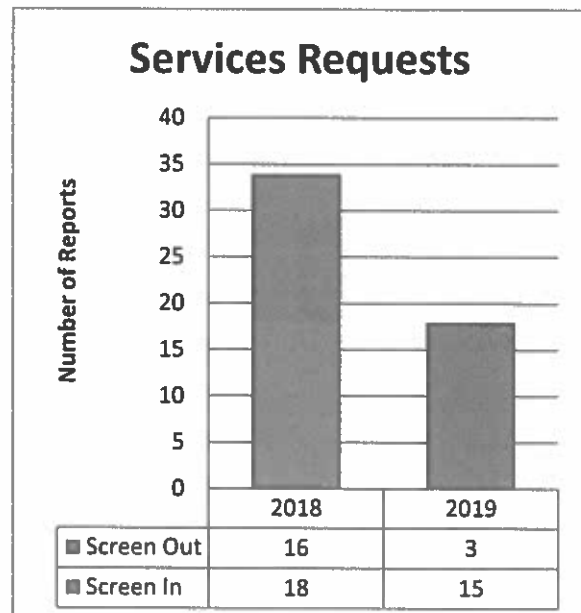
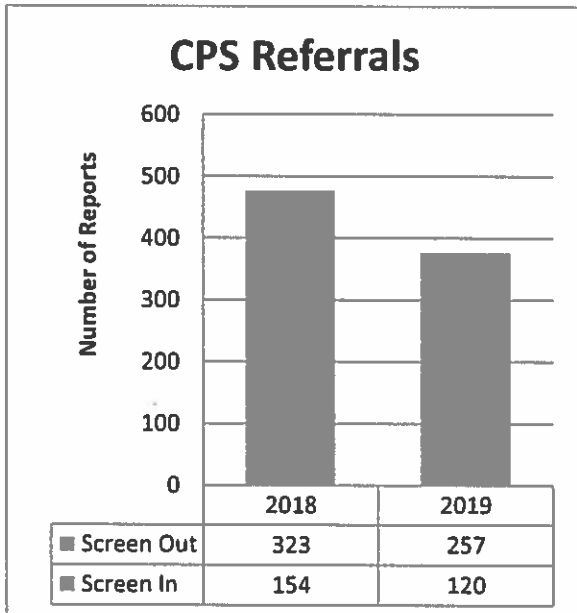
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**BROWN COUNTY COMMUNITY TREATMENT CENTER
JANUARY 2019 NICOLET PSYCHIATRIC CENTER STATISTICS**

	JANUARY	YTD 2019	YTD 2018		JANUARY	YTD 2019	YTD 2018
ADMISSIONS							
Voluntary - Mental Illness	15	15	11	AVERAGE DAILY CENSUS	13.2	13.2	11.9
Emergency Detention - Mental Illness	36	36	46				
Return from Conditional Release	7	7	8	INPATIENT SERVICE DAYS	408	408	368
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	1	1	0	BED OCCUPANCY	82%	82%	74%
Other	0	0	0				
TOTAL	59	59	65	DISCHARGES	57	57	69
READMIT WITHIN 30 DAYS				DISCHARGE DAYS	321	321	362
Readmit within 30 days	6	6	5				
				AVERAGE LENGTH OF STAY	6	6	5
IN/OUT	4	4	1				
ADMISSIONS BY COUNTY				AVERAGE LOS BY COUNTY			
Brown	49	49	53	Brown	7	7	6
Door	1	1	2	Door	20	20	4
Kewaunee	0	0	0	Kewaunee	0	0	0
Oconto	2	2	5	Oconto	5	5	4
Marinette	0	0	2	Marinette	0	0	5
Shawano	2	2	0	Shawano	5	5	0
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	2	2	2	Outagamie	3	3	3
Manitowoc	0	0	0	Manitowoc	0	0	4
Winnebago	0	0	0	Winnebago	0	0	0
Other	3	3	1	Other	3	3	8
TOTAL	59	59	65	TOTAL	6	6	5

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Child Protection Statistics: January, 2019



CPS Referrals and Services Requests: Reports regarding concerns for children are categorized in two ways: Child Protective Services (CPS) Referral and Services Request. This data illustrates the comparison between 2018 and 2019 in each category. If screened in, each require the attention of child protection staff to a varying degree.

CPS Response Times: When a case is screened in as a Child Protective Services Referral it is assigned a response time. Each of these time frames indicate when a worker is to make face to face contact with children and their parents in order to assess for child safety.

CPS Allegation(s) of Maltreatment: Each CPS report includes alleged maltreatment. It is not uncommon to identify more than one at the point of the referral; therefore the numbers identified above equate to more than the total number of screened in cases per month.

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
101 Mobility (Mobility 101 in Avatar) of Northeast WI	Medical/therapeutic supplies and equipment and home modifications	Children	CLTS and C-COP	11/26/18	\$50,000
Acceptational Minds LLC	Living skills for autistic and/or behaviorally-challenged children and their families	Children	CLTS, CABHU, JJ	11/27/18	\$600,000
A & J Vans Inc.	Vehicle modifications for families with disabled children	Families of disabled children	CLTS, C-COP	11/26/18	\$65,000
Adams L AFH	3-4 bed traditional adult family home	MH/AODA	Behavioral Health, CMHP	11/19/18	\$90,000
ADL Monitoring Solutions (formerly WI Lock and Load Electronic Monitoring)	UA observed collection and transport for veterans treatment court	AODA adults	Treatment Courts	11/19/18	\$20,000
Advocates for Healthy Transitional Living LLC	Treatment foster care placing agency and respite care	High behavioral needs children	CABHU, CPS, CLTS	12/4/18	\$930,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children	CLTS	11/26/18	\$60,000
Anna's Healthcare	CBRF (assisted living)	MH/AODA	Behavioral Health, CMHP	11/19/18	\$100,000
ASPIRO Inc.	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	BT3, CMHP, CLTS	11/26/18	\$695,000
Assisted Living by Hillcrest (Allouez Parkside Village #1 and #2)	CBRF (assisted living) for APS use	At-risk adults	APS	12/10/18	\$75,000
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	CPS, CABHU	11/26/18	\$10,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	Behavioral Health	11/19/18	\$250,000
Berry House (Robert E. Berry House)	CBRF (assisted living) that takes individuals with backgrounds in violent crimes	MH	Behavioral Health	1/17/19	\$75,000
Better Days Mentoring	Youth mentoring services, daily living skills	Youth	CPS, JJ, CLTS	12/4/18	\$275,000
Boll Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	Behavioral Health, CMHP	11/19/18	\$500,000
Boys' Town (Nebraska) - THEIR CONTRACT, NOT OURS	Care of an extremely high needs CPS child that we cannot find placement for in WI (was placed in New Mexico prior)	Specific CPS Child	CPS	N/A	N/A
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$500,000
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used VERY sparingly)	PD with MH Issues	Behavioral Health, CMHP	11/19/18	\$35,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	CPS, CMHP	11/26/18	\$160,000

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**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Centerpiece LLC	Social learning groups for children with social communication challenges	Children	CLTS	11/26/18	\$17,500
CP Center	Respite and daily living skills	Children with disabilities	CLTS, C-COP, BT3	11/27/18	\$75,000
Childrens Service Society	Treatment foster care placing agency	Children	CLTS	11/26/18	\$10,000
Chileda Institute	Children high-needs residential care center (RCC)	High behavioral needs children	CPS	11/26/18	\$175,000
Cisler Construction	Home remodeling/modifications	Families of long-term care children	CLTS	11/26/18	\$50,000
Clarity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	CMHP	11/19/18	\$10,000
Comfort Keepers	Supportive home care services	At-risk adults	APS	11/19/18	\$20,000
Communication Pathways LLC	Social learning groups for children with social communication challenges	Children	CLTS, C-COP	11/26/18	\$50,000
Compass Development	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$62,000
Curative Connections	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	Behavioral Health, CMHP, CABHU, CLTS	11/19/18	\$420,000
Curo Care LLC	Corporate adult family homes (assisted living)	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$200,000
Deer Path Assisted Living Inc.	CBRF, corporate adult family homes (assisted living)	MH/AODA	Behavioral Health, CMHP	11/19/18	\$120,000
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	Behavioral Health	11/26/18	\$285,000
Dynamic Family Solutions	Family counseling/treatment programs	Families of juvenile offenders	JJ	11/26/18	\$30,000
Encompass Child Care	Child day care	Children	CPS	12/4/18	\$50,000
Engberg AFH	1-2 bed traditional adult family home	MH	Behavioral Health, CMHP	11/19/18	\$22,000
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with disabilities	CLTS, C-COP	11/26/18	\$50,000
Expressive Therapies LLC	Music therapy for children	Children	CLTS	11/27/18	\$28,000

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**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	Behavioral Health, CABHU, APS, CPS, CMHP	12/20/18	\$3,000,000
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile offenders	JJ, CSP	11/26/18	\$290,000
Family Works Programs, Inc.	Treatment foster care placing agency	Children	CPS, JJ	11/26/18	\$25,000
Foundations Health and Wholeness, Inc.	Treatment foster care placing agency and CCS Services	Children and adults	CPS, CABHU, Behavioral Health	11/29/18	\$200,000
Friendship House	Group home for juvenile offenders	Juvenile offenders	JJ	11/26/18	\$100,000
The Gathering Place	CCS peer support services	MH/AODA	Behavioral Health	11/19/18	\$25,000
Golden House	Domestic abuse services	Adults in need	CPS, APS	to Molly 11/29/18	\$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	Behavioral Health, CMHP	11/26/18	\$24,000
Goodwill Industries	Prevocational services	PD with MH issues	CMHP	11/19/18	\$2,500
Green Bay Area Builders	Home remodeling/modifications	Families of long-term care children	CLTS	11/26/18	\$50,000
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc	CPS case children and adults	CPS	N/A	N/A
Greenfield Rehabilitation Agency, Inc.	Birth to 3 services	Children with disabilities	BT3	11/26/18	\$510,000
GT Mobility & Services	Vehicle modifications for families with disabled children	Families of disabled children	CLTS, C-COP	12/10/18	\$95,000
Helping Hands Caregivers	Supportive home care	PD with MH issues	CMHP	12/4/18	\$10,000
Home Instead Senior Care	Supportive home care	PD with MH issues	CMHP	11/19/18	\$8,000
Homes for Independent Living	CBRF (assisted living)	MH	Behavioral Health	11/19/18	\$200,000
HME Home Medical	Medical and therapeutic supplies and equipment	Children	CLTS and C-COP	11/27/18	\$55,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	Behavioral Health	11/19/18	\$75,000
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	CLTS and C-COP	11/27/18	\$50,000

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**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$95,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	Behavioral Health, CABHU, JJ, CPS, CMHP, CLTS	1/3/19	\$1,850,000
Jackie Nitschke Center Inc.	AODA residential and intensive outpatient services	AODA adults and youth	Behavioral Health, CABHU	11/26/18	\$150,000
Jacobs Fence	Fence building and repair	Families of long-term care children	CLTS	11/27/18	\$90,000
KCC Fiscal Agent Services	Payor of client-hired personal care workers		CLTS, CMHP	11/27/18	\$950,000
KUEHG - Kindercare	Child day care	Children	CPS	11/27/18	\$85,000
Kismet Advocacy	Mentoring, living skills for autistic and/or behaviorally-challenged children and their families	Children	CLTS, CABHU, JJ	11/27/18	\$280,000
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	Behavioral Health	11/19/18	\$30,000
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	JJ, CPS	11/26/18	\$150,000
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	Behavioral Health	11/19/18	\$905,000
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	CPS, JJ	12/17/18	\$615,000
Macht Village Programs Inc. (MVP)	Respite care, counseling, daily living skills, treatment foster care child placing agency	High behavioral needs children	CABHU, CLTS, CPS, JJ	11/26/18	\$700,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$55,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	Behavioral Health	12/10/18	\$60,000
Meridian Senior Living (Birch Creek and Bishop's Court)	CBRF (assisted living) for APS use	At-risk adults	APS	11/19/18	\$60,000
Milestones Behavioral Pediatrics	Social learning groups for children with social communication challenges	Children	CLTS	11/27/18	\$20,000
Moon Beach Camp	Summer camp for children with autism	Children with long-term care needs	CLTS	12/10/18	\$20,000

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**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Mooring Programs Inc.	AODA residential services	AODA adults	Behavioral Health	11/26/18	\$100,000
My Brother's Keeper	Male Mentoring Program	Juvenile males	JJ	11/26/18	\$10,000
Mystic Meadows LLC	Corporate AFH (assisted living)	MH/AODA	Behavioral Health, CMHP	11/19/18	\$300,000
NEW Community Shelter Inc.	Homeless sheltering services	MH	Behavioral Health	11/19/18	\$40,000
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	CPS, JJ	12/20/18	\$125,000
Nova Counseling Services Inc.	AODA residential services	AODA adults	Behavioral Health	11/26/18	\$50,000
Nurses PRN Home Care	Skilled nursing services	Children	CPS, CLTS	11/26/18	\$45,000
Oconomowoc Development Training Center	Residential care center (RCC) for juvenile offenders	Juvenile offenders	JJ	12/20/18	\$175,000
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	Behavioral Health	11/26/18	\$35,000
Options for Independent Living Inc.	CCS peer support services, home modification assessments	MH/AODA	Behavioral Health, CLTS	11/19/18	\$10,000
Options Treatment Program	AODA treatment, CCS services	AODA youth and adults	JJ, Drug Court	11/26/18	\$40,000
Paragon Industries	Daily respite care	Children with long-term care needs	CLTS	11/27/18	\$250,000
Parmentier AFH	3-4 bed traditional adult family home	MH	Behavioral Health, CMHP	11/19/18	\$44,500
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	Behavioral Health	11/29/18	\$375,000
Pillar and Vine, Inc.	Treatment foster care placing agency	Children	CPS/JJ	11/26/18	\$25,000
Prevea Health WorkMed	Drug screenings	CPS parents, AODA, JJ youth	Behavioral Health, CABHU, JJ, CP, ES	11/26/18	\$55,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health, CMHP	11/19/18	\$275,000

10

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	11/19/18	\$120,000
Psychological Consultants of Green Bay Ravenwood Behavioral Health	Psychological assessments to determine competency Nursing home for high-needs MH clients	Elderly, DD High-needs MH	APS Behavioral Health	11/19/18 11/26/18	\$25,000 \$100,000
Rawhide, Inc.	Residential care center (RCC) for juvenile offenders	Juvenile offenders	JJ	11/26/18	\$500,000
Rehabilitation House	Transitional CBRF (assisted living) for co-occurring AODA/MH	MH/AODA	Behavioral Health	11/19/18	\$60,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	Behavioral Health, CMHP	11/19/18	\$200,000
Saint A	Treatment foster care placing agency	Children	CPS	11/26/18	\$30,000
Social Thinkers	Social learning groups for children with social communication challenges	Children	CLTS	11/27/18	\$22,500
Smith Receiving Home	Receiving home for emergency placements	Children in need	CPS	12/4/18	N/A
Szerkins Receiving Home	Receiving home for emergency placements	Children in need	CPS	12/4/18	N/A
Spectrum Behavioral Health	CCS services	Children	CLTS, CABHU	11/19/18	\$100,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	BT3	11/26/18	\$250,000
Tellurian	Residential detox	AODA	Behavioral Health	11/26/18	\$55,000
Tomorrow's Children Inc.	Children high-needs residential care center (RCC)	High behavioral needs children	CABHU	11/26/18	\$100,000
Treatment Providers LLC (Dr. Fatoki)	Medication Assisted Treatment (MAT) for opioid abuse treatment	AODA	AODA	11/19/18	\$60,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	Behavioral Health	11/19/18	\$1,400,000
United Translators	Interpreter/translation services	Non-english speaking	APS, CPS	11/19/18	\$10,000
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	CPS	12/4/18	N/A

101

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 2/7/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Contract Sent	Updated Not-to-Exceed Amount
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health	12/13/18	\$1,400,000
Walking and Wheeling	Medical/therapeutic supplies and equipment and home modifications	Children	CLTS and C-COP	12/10/18	\$85,000
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	Behavioral Health	11/19/18	\$200,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	CABHU, JJ	11/26/18	\$26,000
Wisconsin Lock and Load Transport	Provides secure transportation to/from GB to other state facilities	MH, JJ	Behavioral Health, JJ	11/19/18	\$42,000
TOTAL					\$23,802,086

1d

**Brown County Health and Human Services
New Non-Contracted and Contracted Providers
February 7, 2019**

REQUEST FOR NON-CONTRACTED PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Individual	Supplies reimbursement for foster CPS child	\$10,000	12/15/18
Individual	Ongoing respite for a CPS child	\$10,000	12/19/18
Individual	Ongoing respite for a CPS child	\$10,000	12/19/18
Individual	Ongoing respite for a CPS child	\$10,000	12/20/18
Individual	Ongoing respite for a CPS child	\$10,000	12/27/18
Master's Driving School	Driving assessment for disabled CLTS child	\$10,000	12/28/18
Individual	One-time respite for CPS child	\$10,000	1/10/19
Individual	Supplies reimbursement for foster CPS child	\$10,000	1/14/19
Lochman Enterprises	Rent payment for CPS family	\$10,000	1/15/19
Vantage Point Properties	Rent payment for CPS family	\$10,000	1/15/19
Schomaker Properties	Rent payment for CPS family	\$10,000	1/22/19
Step Ahead Childcare	Day care for CPS children	\$10,000	1/22/19
Individual	Ongoing respite for a CPS child	\$10,000	1/29/19
Individual	Ongoing respite for a CPS child	\$10,000	1/29/19
Individual	Ongoing respite for a CPS child	\$10,000	1/29/19

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE
Berry House	CBRF (assisted living) that takes individuals with violent crimes	Mental Health	\$75,000	1/1/19

1d

BOARD OF SUPERVISORS

Brown County



**BROWN COUNTY
BOARD OF SUPERVISORS
GREEN BAY, WISCONSIN**

Meeting Date: 12/19/18

Committee: Human Services Committee

Motion from the Floor/Late Communication

I make the following motion/late communication:

For the Brown County Board of Health to cease sharing demographic and personal information of residents with drug companies and other third parties for the purpose of sending out notifications of missed vaccinations. Instead, this essential educational program should be operated in house and a budget adjustment of \$2,500 would be needed. Doing this in house is consistent with other health departments in the state; allows the program to continue at a low cost; and respects the privacy rights of the citizenry

Signed: _____

District No. 15

(Please deliver to County Clerk after motion is made for recording into minutes.)



2

BUDGET ADJUSTMENT REQUEST

<u>Category</u>	<u>Approval Level</u>
<input type="checkbox"/> 1 Reallocation from one account to another in the same level of appropriation	Dept Head
<input type="checkbox"/> 2 Reallocation due to a technical correction that could include: <ul style="list-style-type: none"> • Reallocation to another account strictly for tracking or accounting purposes • Allocation of budgeted prior year grant not completed in the prior year 	Director of Admin
<input type="checkbox"/> 3 Any change in any item within the Oulay account which does not require the reallocation of funds from another level of appropriation	County Exec
<input type="checkbox"/> 4 Any change in appropriation from an official action taken by the County Board (i.e., resolution, ordinance change, etc.)	County Exec
<input type="checkbox"/> 5 a) Reallocation of <u>up to 10%</u> of the originally appropriated funds between any levels of appropriation (based on lesser of originally appropriated amounts).	Admin Comm
<input type="checkbox"/> 5 b) Reallocation of <u>more than 10%</u> of the funds originally appropriated between any of the levels of appropriation.	Oversight Comm 2/3 County Board
<input type="checkbox"/> 6 Reallocation between two or more departments, regardless of amount	Oversight Comm 2/3 County Board
<input checked="" type="checkbox"/> 7 Any increase in expenses with an offsetting increase in revenue	Oversight Comm 2/3 County Board
<input type="checkbox"/> 8 Any allocation from a department's fund balance	Oversight Comm 2/3 County Board
<input type="checkbox"/> 9 Any allocation from the County's General Fund (<i>requires separate Resolution</i>) <i>After County Board approval of the resolution, a Category 4 budget adjustment must be prepared.</i>	Oversight Comm Admin Committee 2/3 County Board

Justification for Budget Change:

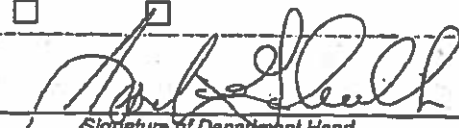
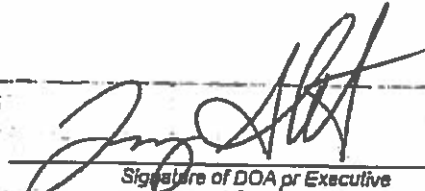
The Veterans Department sold a vehicle in early 2019 for \$1,425. This budget adjustment is to increase the travel and training budget funded by the sale of that vehicle. The vehicle was 2012 Dodge Neon, 139,000 miles, constantly needing repairs and was not cost effective to retain it. The money will be used to provide VA Accreditation training for employees to maintain VA Accreditation and travel cost for increased outreach to all 32 Veterans Service Organization and stakeholders in Brown County.

Fiscal Impact: \$1,425

**Enter \$0 if reclassifying previously budgeted funds. Enter actual dollar amount if new revenue or expense.*

<u>Increase</u>	<u>Decrease</u>	<u>Account #</u>	<u>Account Title</u>	<u>Amount</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.084.001.4190	Capital asset disposal gain	\$1,425
<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.084.001.5340	Travel and Training	\$1,425
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

DWD
3/4/19

 Signature of Department Head	AUTHORIZATIONS	 Signature of DOA or Executive
Department: <u>Veterans</u>		Date: <u>3/11/19</u>
Date: <u>2/28/19</u>		

BUDGET ADJUSTMENT REQUEST

- | <u>Category</u> | <u>Approval Level</u> |
|---|---|
| <input type="checkbox"/> 1 Reallocation from one account to another in the same level of appropriation | Dept Head |
| <input type="checkbox"/> 2 Reallocation due to a technical correction that could include: <ul style="list-style-type: none"> • Reallocation to another account strictly for tracking or accounting purposes • Allocation of budgeted prior year grant not completed in the prior year | Director of Admin |
| <input type="checkbox"/> 3 Any change in any item within the Outlay account which does not require the reallocation of funds from another level of appropriation | County Exec |
| <input type="checkbox"/> 4 Any change in appropriation from an official action taken by the County Board (i.e., resolution, ordinance change, etc.) | County Exec |
| <input type="checkbox"/> 5 a) Reallocation of <u>up to 10%</u> of the originally appropriated funds between any levels of appropriation (based on lesser of originally appropriated amounts). | Admin Comm |
| <input type="checkbox"/> 5 b) Reallocation of <u>more than 10%</u> of the funds originally appropriated between any of the levels of appropriation. | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 6 Reallocation between two or more departments, regardless of amount | Oversight Comm
2/3 County Board |
| <input checked="" type="checkbox"/> 7 Any increase in expenses with an offsetting increase in revenue | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 8 Any allocation from a department's fund balance | Oversight Comm
2/3 County Board |
| <input type="checkbox"/> 9 Any allocation from the County's General Fund (<i>requires separate Resolution</i>)
<i>After County Board approval of the resolution, a Category 4 budget adjustment must be prepared.</i> | Oversight Comm
Admin Committee
2/3 County Board |

Justification for Budget Change:

2018 Budget Adjustment

This budget adjustment is to recognize higher than anticipated Temporary help nursing agency costs for CTC Nursing Home operations. This additional cost was offset by increased revenues due to higher than anticipated Medicaid rates which cover most residents of the Nursing Home.

Fiscal Impact*: \$25,000

**Enter \$0 if reclassifying previously budgeted funds. Enter actual dollar amount if new revenue or expense.*

<u>Increase</u>	<u>Decrease</u>	<u>Account #</u>	<u>Account Title</u>	<u>Amount</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	630.056.052.001.5706	Temporary replacement help	\$25,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	630.056.052.4700.002	Intergovt charges State	\$25,000
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

Erik Piel

 Signature of Department Head
 Department: Health & Human Services
 Date: 3/12/19

AUTHORIZATIONS

[Signature]

 Signature of DOA or Executive
 Date: 3/15/19

18-149

BUDGET ADJUSTMENT REQUEST

Category

Approval Level

- 1 Reallocation from one account to another in the same level of appropriation Dept Head
- 2 Reallocation due to a technical correction that could include:
 - Reallocation to another account strictly for tracking or accounting purposes
 - Allocation of budgeted prior year grant not completed in the prior yearDirector of Admin
- 3 Any change in any item within the Outlay account which does not require the reallocation of funds from another level of appropriation County Exec
- 4 Any change in appropriation from an official action taken by the County Board (i.e., resolution, ordinance change, etc.) County Exec
- 5 a) Reallocation of up to 10% of the originally appropriated funds between any levels of appropriation (based on lesser of originally appropriated amounts). Admin Comm
- 5 b) Reallocation of more than 10% of the funds originally appropriated between any of the levels of appropriation. Oversight Comm
2/3 County Board
- 6 Reallocation between two or more departments, regardless of amount Oversight Comm
2/3 County Board
- 7 Any increase in expenses with an offsetting increase in revenue Oversight Comm ^{an}
2/3 County Board
- 8 Any allocation from a department's fund balance Oversight Comm
2/3 County Board
- 9 Any allocation from the County's General Fund (*requires separate Resolution*)
After County Board approval of the resolution, a Category 4 budget adjustment must be prepared. Oversight Comm
Admin Committee
2/3 County Board

Justification for Budget Change:

Σ. 9 ✓

2018 Budget Adjustment

This budget adjustment is to recognize higher than anticipated Purchased Services costs for Community Services in the areas of Juvenile Justice (JJ) and Child Protective Services (CPS) due to an increased need for Residential Care Center (RCC) placements, and Wrap Around services not covered by state or federal funding. Also, an increase in JJ and CPS salaries due to additional staff time needed for case management in these areas. These increases in cost are offset by increased revenues from prior year CCS and Income Maintenance RMS (Random Moment Study) settlements which were not anticipated in budget projections.

BC

Fiscal Impact*: \$1,600,000

**Enter \$0 if reclassifying previously budgeted funds. Enter actual dollar amount if new revenue or expense.*

Increase	Decrease	Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.140.142.7000	Purchased services (Juvenile Justice)	\$1,100,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.140.144.7000	Purchased services (Child Protection)	\$400,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.140.144.5100	Regular earnings (Juvenile Justice)	\$40,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.140.144.5103	Premium (Child Protection)	\$60,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.110.200.4302.0914CCS	State grant and aid Prior year revenue	\$1,000,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	201.076.110.200.4302.0914IM	State grant and aid Prior year revenue	\$600,000

Eric Prof

AUTHORIZATIONS

[Signature]

Signature of Department Head

Signature of DOA or Executive

Department: Health & Human Services

Date: 3/15/19

Date: 3/13/19

April 17, 2019

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

Ladies and Gentlemen:

RESOLUTION REGARDING TABLE OF ORGANIZATION CHANGE
HEALTH AND HUMAN SERVICES DEPARTMENT – COMMUNITY SERVICES
ADDITION OF ONE CLTS SOCIAL WORKER/CASE MANAGER

WHEREAS, the Children’s Long Term Support unit (CLTS) of the Brown County Health and Human Services Department – Community Services Division (the Department) provides assistance for families to keep their child with a disability at home; and

WHEREAS, the Department desires to add one (1.00) FTE Social Worker/Case Manager Position to its Table of Organization in order to provide mandated services to clients that are coming off a secondary waitlist established by the Wisconsin Department of Health Services (DHS); and

WHEREAS, there are sufficient funds available from DHS to add this position; and

WHEREAS, Human Resources, in conjunction with the Department, recommends the following changes to the Department’s Table of Organization: the addition of a (1.00) FTE Social Worker/Case Manager position in pay grade I of the Classification and Compensation Plan.

NOW, THEREFORE, BE IT RESOLVED by the Brown County Board of Supervisors, that the following changes to the Health and Human Services Department – Community Services Division Table of Organization are hereby approved, as stated in the Budget Impact section of this Resolution and as follows: Add (1.00) FTE Social Worker/Case Manager position in pay grade I of the Classification and Compensation Plan; and

BE IT FURTHER RESOLVED, that, should the funding for this Position end, said Position will end and be eliminated from the Department’s Table of Organization.

8

Budget Impact:
Health and Human Services – Community Services

Partial Budget Impact (5/01/19 – 12/31/19)	FTE	Addition /Deletion	Salary	Fringe	Total
Social Worker/Case Manager (CLTS) \$23.70/hr Position # TBD Hours: 1,957.50	1.0	Addition	\$31,226	\$13,943	\$45,169
Reimbursement from State of Wisconsin DHS					\$(45,169)
Partial Budget Impact					\$0

Annualized Budget Impact	FTE	Addition /Deletion	Salary	Fringe	Total
Social Worker/Case Manager (CLTS) \$23.70/hr Position # TBD Hours: 1,957.50	1.0	Addition	\$46,393	\$20,715	\$67,108
Reimbursement from State of Wisconsin DHS					\$(67,108)
Annualized Budget Impact (net impact of position changes)					\$0

Fiscal Note: This resolution does not require an appropriation from the General Fund. The position will be funded through reimbursement from the Wisconsin Department of Health Services.

Respectfully submitted,
HUMAN SERVICES COMMITTEE
EXECUTIVE COMMITTEE

Approved By:

TROY STRECKENBACH
COUNTY EXECUTIVE

Date Signed: _____

19-027R
Authored by Human Resources
Approved by Corporation Counsel's Office

8

BOARD OF SUPERVISORS ROLL CALL # _____

Motion made by Supervisor _____

Seconded by Supervisor _____

SUPERVISORS	DIST. #	AYES	NAYS	ABSTAIN	EXCUSED
SIEBER	1				
DE WANE	2				
NICHOLSON	3				
HOYER	4				
GRUSZYNSKI	5				
LEFEBVRE	6				
ERICKSON	7				
BORCHARDT	8				
EVANS	9				
VANDER LEEST	10				
BUCKLEY	11				
LANDWEHR	12				
DANTINNE, JR	13				

SUPERVISORS	DIST. #	AYES	NAYS	ABSTAIN	EXCUSED
BRUSKY	14				
BALLARD	15				
KASTER	16				
VAN DYCK	17				
LINSSEN	18				
KNEISZEL	19				
DESLAURIERS	20				
TRAN	21				
MOYNIHAN, JR.	22				
SUENNEN	23				
SCHADEWALD	24				
LUND	25				
DENEYS	26				

Total Votes Cast _____

Motion: Adopted _____ Defeated _____ Tabled _____

HUMAN RESOURCES



305 E. WALNUT STREET
P.O. BOX 23600
GREEN BAY, WI 54305-3600

RESOLUTION/ORDINANCE SUBMISSION TO COUNTY BOARD

DATE: 3-1-2019
REQUEST TO: Human Services, Executive, and County Board
MEETING DATE: 3/27/19, 4/8/19 and 4/17/19, respectively
REQUEST FROM: Erik Pritzl
Director, Health and Human Services

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

TITLE: RESOLUTION REGARDING TABLE OF ORGANIZATION CHANGE HEALTH AND HUMAN SERVICES DEPARTMENT - COMMUNITY SERVICES ADDITION OF ONE CLTS SOCIAL WORKER/CASE MANAGER

ISSUE/BACKGROUND INFORMATION:

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-Community Services. The addition of this position is necessary to provide services to clients mandated to be served that are coming off a secondary waitlist established by Wisconsin Department of Health Services (DHS) 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 funds available as part of the administrative costs allocated to Brown County Department of Health & Human Services.

ACTION REQUESTED:

Add 1.0 Social Worker/Case Manager

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? \$(0)
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? Reimbursement from the Children's Long Term Support Administrative funds (state 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: March 14, 2019

Re: Executive Director's Report

Sophie Beaumont Building Moves and Updates

The moves of all staff members in Health & Human Services have been completed, and now the focus will be on assessing operations in the new spaces and making improvements based on experience. The Public Health Division Community Engagement and Nursing units are located at the Sophie Beaumont Building, and the Environmental Unit and Environmental Lab are located at the Duck Creek Center in Howard. The physical moves went well, and the Facilities staff did a great job making these go smoothly. Many staff were involved with the coordination of the moves, and a special acknowledgement should be made to the Office Managers involved, Cathy Foss and Patti Zich who took the lead on the Community Services and Public Health areas respectively.

Organizational Effectiveness

The department is supporting the use of a process called Organizational Effectiveness (OE) to help us define what our future looks like for recruitment and retention in Child Protective Services. Organizational Effectiveness is an improvement process supported by the Wisconsin Department of Children and Families with the Wisconsin Child Welfare Professional Development System. Not only will they be guiding us through the process, but they will be trying to model and teach us the process so that we can sustain it. This process will take place over the course of 7 days between April 4th and July 9th, and involve a team of Social Workers/Case Managers, Supervisors and myself.

New Department of Children and Families (DCF) Secretary

The DCF Secretary, Emilie Amundson, came to Brown County Health & Human Services for an on-site visit on February 28th. Secretary Amundson spent time meeting with Child Protective Services staff members at Sophie Beaumont, followed by visits to Shelter Care and the Brown County secure detention facility. I was impressed by how readily staff members engaged with

the secretary, and how much their passion and commitment for their work with children and families showed. We are fortunate to have such dedicated staff in the department.

Secure Residential Care Center for Children and Youth (SRCCCY)

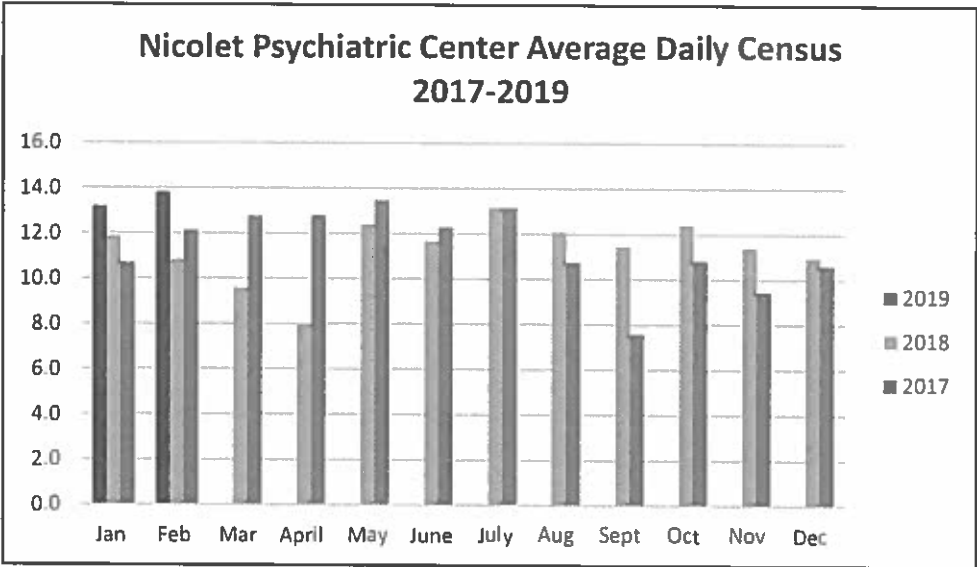
We continue to assess this service area as a future direction for Brown County. Some developments at the state level are related to Governor Evers’ proposed budget. The proposed budget included increasing funding for SRCCCY’s to \$100 million, moving the date to submit grant proposals to July 1, 2019. The start date for operating an SRCCCY had been January 1, 2021, and the proposed budget removes that date and instead allows for the movement of youth to new facilities as soon as they are available.

Emergency Detentions

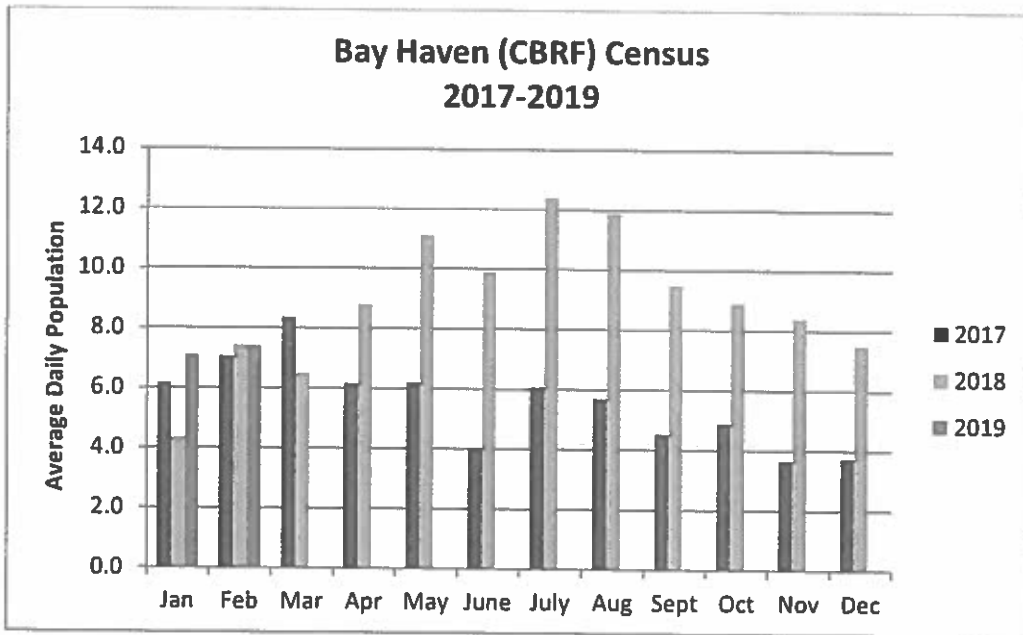
Emergency mental health detentions (EM-1’s) for children and adolescents are trending lower during the first two months of 2019. There were 26 detentions involving children and adolescents during the first 2 months of 2019, compared to 46 during the same period in 2018. Adults have not shown the same trend, with 118 detentions during the first 2 months of 2019, compared to 104 during the same period in 2018. Local inpatient capacity has been more of a challenge during the first part of 2019, and census has been higher in the Community Treatment Center units as well as community providers.

Community Treatment Center

Census at our Community Treatment Center units has been higher in 2019 compared to 2018. Three years of average daily census at the Nicolet Psychiatric Center (NPC) are presented visually in the chart below.



Bay Haven (CBRF) has been relatively consistent the first two months of 2019, with January showing a higher average daily population than the prior year.



The overall census in crisis stabilization placements (Bay Haven and Diversion) has been higher in 2019 compared to 2018.

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 Pritzi, Executive Director

To: Human Services Board and Human Services Committee

Date: March 14, 2019

Subject: YTD 2/23/18 Personnel Costs for Community Treatment Center and Community Services

Community Treatment Center

Personnel costs YTD as of the pay period ending 2/23/19 for the Community Treatment Center show payroll and fringe benefit expenses at 15.3% of the annual budget compared to a benchmark of 14.8% after 54 of 365 days for the year. This represents an unfavorable dollar variance of approximately \$48,000 for just under two months.

The largest reason for this variance is that the budget adjustment for 2.25% annual wage adjustment effective 1/1/19 has not yet been recognized in the accounting system. This increase in the budget will reduce the YTD variance noted above by approximately \$26,000. The remaining variance is due primarily to higher than budgeted CBRF staffing needs along with higher premium pay for the Hospital and Nursing Home including overtime and shift differentials. Fringe benefits are also higher than benchmark at 15.4% of the annual budget.

Average daily census compared to budget for February YTD is as follows:

	<u>Actual</u>	<u>Budget</u>
Bayshore Village	59.6	61.3
Nicolet Psychiatric Center	13.5	10.7
Bay Haven CBRF	7.2	7.9

Community Services

Personnel costs for Community Services YTD as of pay period ending 2/23/19 show personnel costs at 15.2% of the annual budget, which represents an unfavorable variance of approximately \$73,000 YTD. Approximately \$54,000 of this variance is due to the 2.25% wage increase not yet recognized in the budget. High premium pay in Child Protective Services and Shelter Care along with a higher rate of fringe benefit costs are other primary factors contributing to the remaining variance.

Respectfully Submitted,

Eric Johnson
Finance Manager



Community Treatment Center Personnel Costs

Fiscal Year to Date 02/23/19

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Fund 630 - Community Treatment Center									
5100	Regular earnings	6,496,413.00	.00	6,496,413.00	378,018.93	877,750.17	5,618,662.83	14.9%	5,776,497.14
5102	Paid leave earnings	.00	.00	.00	34,339.23	86,567.13	(86,567.13)		734,492.74
5109	Salaries reimbursement	.00	.00	.00	.00	1,912.32	(1,912.32)		(54,882.99)
5103	Premium	257,970.00	.00	257,970.00	27,871.40	68,574.82	189,395.18	27.3%	508,518.24
5110	Fringe benefits	2,397,354.00	.00	2,397,354.00	151,718.57	365,586.61	2,031,767.39	15.4%	2,441,024.76
5198	Fringe benefits - Budget only	(17,634.00)	.00	(17,634.00)	.00	.00	(17,634.00)		.00
Totals		\$9,134,103.00	\$0.00	\$9,134,103.00	\$591,948.13	\$1,400,391.05	\$7,733,711.95	15.3%	\$9,405,649.89

Maximum Monthly Payment Schedule for CY 2018

(7/14/17)

GROSS MONTHLY INCOME		PERSONS LIVING IN FAMILY										DHS 1
from	to	1	2	3	4	5	6	7	8	9	10	
1,201	1,225	* 0	0	0	0	0	0	0	0	0	0	0
1,226	1,250	0	0	0	0	0	0	0	0	0	0	0
1,251	1,275	0	0	0	0	0	0	0	0	0	0	0
1,276	1,300	0	0	0	0	0	0	0	0	0	0	0
1,301	1,325	0	0	0	0	0	0	0	0	0	0	0
1,326	1,350	0	0	0	0	0	0	0	0	0	0	0
1,351	1,375	0	0	0	0	0	0	0	0	0	0	0
1,376	1,400	0	0	0	0	0	0	0	0	0	0	0
1,401	1,425	0	0	0	0	0	0	0	0	0	0	0
1,426	1,450	0	0	0	0	0	0	0	0	0	0	0
1,451	1,475	0	0	0	0	0	0	0	0	0	0	0
1,476	1,500	0	0	0	0	0	0	0	0	0	0	0
1,501	1,525	0	0	0	0	0	0	0	0	0	0	0
1,526	1,550	0	0	0	0	0	0	0	0	0	0	0
1,551	1,575	0	0	0	0	0	0	0	0	0	0	0
1,576	1,600	0	0	0	0	0	0	0	0	0	0	0
1,601	1,625	0	0	0	0	0	0	0	0	0	0	0
1,626	1,650	0	0	0	0	0	0	0	0	0	0	0
1,651	1,675	0	0	0	0	0	0	0	0	0	0	0
1,676	1,700	0	0	0	0	0	0	0	0	0	0	0
1,701	1,725	8	0	0	0	0	0	0	0	0	0	0
1,726	1,750	15	0	0	0	0	0	0	0	0	0	0
1,751	1,775	22	0	0	0	0	0	0	0	0	0	0
1,776	1,800	29	0	0	0	0	0	0	0	0	0	0
1,801	1,825	36	0	0	0	0	0	0	0	0	0	0
1,826	1,850	43	0	0	0	0	0	0	0	0	0	0
1,851	1,875	50	0	0	0	0	0	0	0	0	0	0
1,876	1,900	57	0	0	0	0	0	0	0	0	0	0
1,901	1,925	64	0	0	0	0	0	0	0	0	0	0
1,926	1,950	71	0	0	0	0	0	0	0	0	0	0
1,951	1,975	78	0	0	0	0	0	0	0	0	0	0
1,976	2,000	85	0	0	0	0	0	0	0	0	0	0
2,001	2,025	92	0	0	0	0	0	0	0	0	0	0
2,026	2,050	99	0	0	0	0	0	0	0	0	0	0
2,051	2,075	106	0	0	0	0	0	0	0	0	0	0
2,076	2,100	113	0	0	0	0	0	0	0	0	0	0

page 1 of 4 * Note: Brown County has historically charged \$15/month as minimum payment for services at CTC.

10

Maximum Monthly Payment Schedule for CY 2018

(7/14/17)

GROSS MONTHLY INCOME		PERSONS LIVING IN FAMILY										DHS 1
		1	2	3	4	5	6	7	8	9	10	
2,101	2,125	120	0	0	0	0	0	0	0	0	0	0
2,126	2,150	127	0	0	0	0	0	0	0	0	0	0
2,151	2,175	134	0	0	0	0	0	0	0	0	0	0
2,176	2,200	141	0	0	0	0	0	0	0	0	0	0
2,201	2,225	148	3	0	0	0	0	0	0	0	0	0
2,226	2,250	153	10	0	0	0	0	0	0	0	0	0
2,251	2,275	154	17	0	0	0	0	0	0	0	0	0
2,276	2,300	156	24	0	0	0	0	0	0	0	0	0
2,301	2,325	158	31	0	0	0	0	0	0	0	0	0
2,326	2,350	160	38	0	0	0	0	0	0	0	0	0
2,351	2,375	161	45	0	0	0	0	0	0	0	0	0
2,376	2,400	163	52	0	0	0	0	0	0	0	0	0
2,401	2,425	165	59	0	0	0	0	0	0	0	0	0
2,426	2,450	167	66	0	0	0	0	0	0	0	0	0
2,451	2,475	168	73	0	0	0	0	0	0	0	0	0
2,476	2,500	170	80	0	0	0	0	0	0	0	0	0
2,501	2,525	172	87	0	0	0	0	0	0	0	0	0
2,526	2,550	174	94	0	0	0	0	0	0	0	0	0
2,551	2,575	175	101	0	0	0	0	0	0	0	0	0
2,576	2,600	177	108	0	0	0	0	0	0	0	0	0
2,601	2,625	179	115	0	0	0	0	0	0	0	0	0
2,626	2,650	181	122	0	0	0	0	0	0	0	0	0
2,651	2,675	182	129	0	0	0	0	0	0	0	0	0
2,676	2,700	184	136	0	0	0	0	0	0	0	0	0
2,701	2,725	186	143	0	0	0	0	0	0	0	0	0
2,726	2,750	188	150	6	0	0	0	0	0	0	0	0
2,751	2,775	189	153	13	0	0	0	0	0	0	0	0
2,776	2,800	191	155	20	0	0	0	0	0	0	0	0
2,801	2,825	193	157	27	0	0	0	0	0	0	0	0
2,826	2,850	195	158	34	0	0	0	0	0	0	0	0
2,851	2,875	196	160	41	0	0	0	0	0	0	0	0
2,876	2,900	198	162	48	0	0	0	0	0	0	0	0
2,901	2,925	200	164	55	0	0	0	0	0	0	0	0
2,926	2,950	202	165	62	0	0	0	0	0	0	0	0
2,951	2,975	203	167	69	0	0	0	0	0	0	0	0
2,976	3,000	205	169	76	0	0	0	0	0	0	0	0

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Community Services Personnel Costs

Fiscal Year to Date 02/23/19

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year Total
Fund 203 - Community Services									
5100	Regular earnings	14,163,768.00	.00	14,163,768.00	746,056.71	1,868,715.89	12,295,052.11	15.1%	12,154,622.59
5102	Paid leave earnings	.00	.00	.00	124,783.53	254,776.27	(254,776.27)		1,667,352.32
5109	Salaries reimbursement	.00	.00	.00	.00	10,099.62	(10,099.62)		(34,955.15)
5103	Premium	66,723.00	.00	66,723.00	9,056.10	18,597.75	48,125.25	43.0%	279,324.40
5110	Fringe benefits	5,960,640.00	.00	5,960,640.00	362,821.13	899,719.24	5,060,920.76	15.3%	5,645,339.96
5198	Fringe benefits - Budget only	(68,259.00)	.00	(68,259.00)	.00	.00	(68,259.00)		.00
Totals		\$20,122,872.00	\$0.00	\$20,122,872.00	\$1,242,717.47	\$3,051,908.77	\$17,070,963.23	15.2%	\$19,716,450.24

**BROWN COUNTY COMMUNITY TREATMENT CENTER
JANUARY 2019 BAY HAVEN STATISTICS**

	JANUARY	YTD 2019	YTD 2018		JANUARY	YTD 2019	YTD 2018
ADMISSIONS							
Voluntary - Mental Illness	24	24	24	AVERAGE DAILY CENSUS	7.0	7.0	4.2
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	INPATIENT SERVICE DAYS	217	217	131
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	BED OCCUPANCY	47%	47%	28%
Other - EPP	0	0	2				
TOTAL	24	24	26	DISCHARGES	21	21	24
READMIT WITHIN 30 DAYS				DISCHARGE DAYS	319	319	89
Readmit within 30 days	1	1	1				
				AVERAGE LENGTH OF STAY	15	15	4
IN/OUT	3	3	4				
				AVERAGE LOS BY COUNTY			
ADMISSIONS BY COUNTY							
Brown	21	21	23	Brown	22	22	5
Door	1	1	1	Door	10	10	4
Kewaunee	1	1	0	Kewaunee	2	2	0
Oconto	1	1	1	Oconto	2	2	2
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	0	1	Shawano	0	0	7
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	0	0	Outagamie	0	0	0
Manitowoc	0	0	0	Manitowoc	0	0	0
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	0	0	Other	1	1	4
TOTAL	24	24	26	TOTAL	15	15	5

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**BROWN COUNTY COMMUNITY TREATMENT CENTER
FEBRUARY 2019 BAY HAVEN STATISTICS**

	FEBRUARY	YTD 2019	YTD 2018		FEBRUARY	YTD 2019	YTD 2018
ADMISSIONS							
Voluntary - Mental Illness	23	47	48	AVERAGE DAILY CENSUS	7.3	7.2	5.7
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	INPATIENT SERVICE DAYS	205	422	339
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	BED OCCUPANCY	49%	48%	38%
Other - EPP	0	0	3				
TOTAL	23	47	51	DISCHARGES	27	48	46
READMIT WITHIN 30 DAYS				DISCHARGE DAYS	474	793	231
Readmit within 30 days	3	4	2				
				AVERAGE LENGTH OF STAY	18	17	5
IN/OUT	2	5	4				
ADMISSIONS BY COUNTY				AVERAGE LOS BY COUNTY			
Brown	19	40	46	Brown	16	19	7
Door	1	2	1	Door	18	14	2
Kewaunee	0	1	0	Kewaunee	0	1	0
Oconto	0	1	2	Oconto	0	1	2
Marinette	0	0	0	Marinette	0	0	0
Shawano	2	2	1	Shawano	11	5.5	4
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	0	1	Outagamie	0	0	2
Manitowoc	1	1	0	Manitowoc	2	1	0
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	0	0	Other	0	0.5	8
TOTAL	23	47	51	TOTAL	18	17	5

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**BROWN COUNTY COMMUNITY TREATMENT CENTER
FEBRUARY 2019 NICOLET PSYCHIATRIC CENTER STATISTICS**

	FEBRUARY	YTD 2019	YTD 2018		FEBRUARY	YTD 2019	YTD 2018
ADMISSIONS							
Voluntary - Mental Illness	17	32	24	AVERAGE DAILY CENSUS	13.8	13.5	11.4
Emergency Detention - Mental Illness	26	62	75				
Return from Conditional Release	4	11	14	INPATIENT SERVICE DAYS	387	795	672
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	1	2	1	BED OCCUPANCY	86%	84%	71%
Other	0	0	0				
TOTAL	48	107	114	DISCHARGES	47	104	119
READMIT WITHIN 30 DAYS				DISCHARGE DAYS	284	605	706
Readmit within 30 days	2	8	9				
				AVERAGE LENGTH OF STAY	6	6	6
IN/OUT	3	7	2				
ADMISSIONS BY COUNTY				AVERAGE LOS BY COUNTY			
Brown	46	95	91	Brown	9	8	7
Door	0	1	4	Door	0	10	5
Kewaunee	0	0	0	Kewaunee	0	0	0
Oconto	0	2	6	Oconto	0	2.5	9
Marinette	0	0	3	Marinette	0	0	6
Shawano	0	2	1	Shawano	2	3.5	1
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	1	1	0	Menominee	2	1	0
Outagamie	1	3	4	Outagamie	19	11	6
Manitowoc	0	0	3	Manitowoc	0	0	5
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	3	2	Other	0	1.5	7
TOTAL	48	107	114	TOTAL	6	6	6

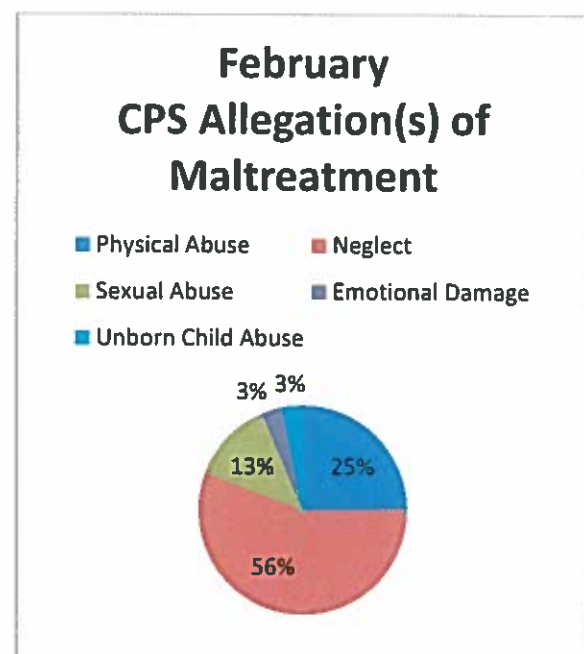
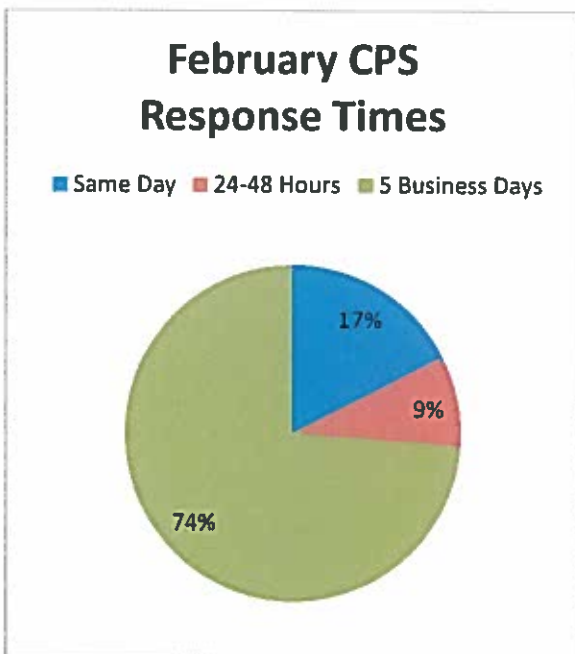
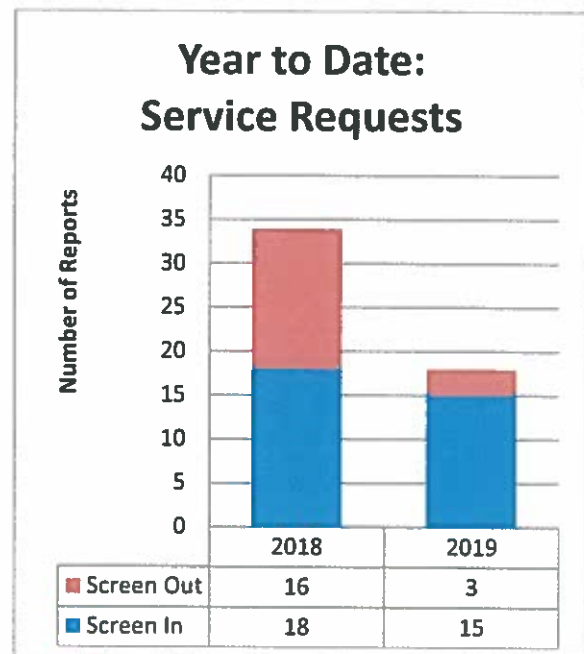
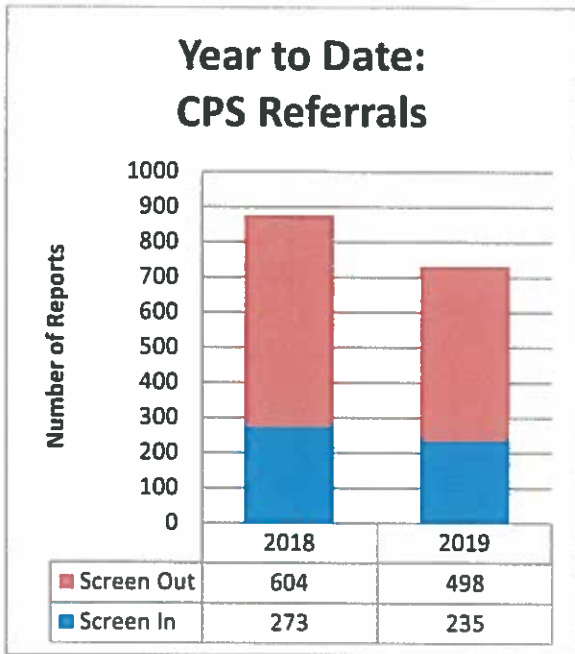
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CTC Double Shifts Worked — February 1-28, 2019

Employee Name	Classification	Date(s)	shifts worked
Begalke, John	CNA	February 1	NOC / AM
		February 3, 7, 10, 21, 23, 24	PM / NOC
Chang, Chue	CNA	February 3	AM / PM
Deprey, Jenny	CNA	February 13, 14, 24	AM / PM
Dessart, Keri	CNA	February 9	AM / PM
Elsner, Deb	CNA	February 25	AM / PM
Goggins, Laura	RN	February 23, 24	AM / PM
Hanson, Ian	CNA	February 1	PM / NOC
		February 10, 23	AM / PM
Joachim, Bob	CNA	February 10, 14, 24	AM / PM
Mendez, Estrella	CNA	February 7	AM / PM
Molina, Brandon	CNA	February 3, 23	AM / PM
Odegard, Elizabeth	CNA	February 2	PM / NOC
Parent, Alana	CNA	February 2, 3	AM / PM
Radeva, GiGi	CNA	February 12	AM / PM
Seidl, Chelsea	CNA	February 2, 7	AM / PM
Spencer, Brenda	LPN	February 9, 10, 18	AM / PM
Terrien, Angela	RN	February 7	PM / NOC
VonBerlichingen, Annelise	CNA	February 12, 24	PM / NOC

11 a iii

Child Protection Statistics: February, 2019



The beginning of 2018 brought an unprecedented surge in cases, particularly those that were screened in for a same day response. Although 2019, has begun slightly slower, cases continue to be complex and challenging.

In regard to types of maltreatment, allegations of neglect tend to be categorized into drug endangered children, unmet medical needs of the child, domestic violence, dirty home conditions, children unsupervised and unmanaged mental health concerns of the parent or child.

CPS supervisors continue to recruit and train new staff members. In the month of February, the new supervisor joined the team and there were 12 team members actively in training status.

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 3/5/2019**

Provider	Services(s) Description	Target Client	Program Unit(s)	Updated Not-to-Exceed Amount
101 Mobility (Mobility 101 in Avatar) of Northeast WI	Medical/therapeutic supplies and equipment and home modifications	Children	CLTS and C-COP	\$50,000
Acceptional Minds LLC	Living skills for autistic and/or behaviorally-challenged children and their families	Children	CLTS, CABHU, JJ	\$600,000
A & J Vans Inc.	Vehicle modifications for families with disabled children	Families of disabled children	CLTS, C-COP	\$65,000
Adams LAFH	3-4 bed traditional adult family home	MH/AODA	Behavioral Health, CMHP	\$90,000
ADL Monitoring Solutions (formerly WI Lock and Load Electronic Monitoring)	UA observed collection and transport for veterans treatment court	AODA adults	Treatment Courts	\$20,000
Advocates for Healthy Transitional Living LLC	Treatment foster care placing agency and respite care	High behavioral needs children	CABHU, CPS, CLTS	\$930,000
Affinity Health (St. Elizabeth Hospital & Affinity Medical Group)	Inpatient detox services	MH/AODA	Behavioral Health	\$25,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children	CLTS	\$60,000
Anna's Healthcare	CBRF (assisted living)	MH/AODA	Behavioral Health, CMHP	\$100,000
ASPIRO Inc.	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	BT3, CMHP, CLTS	\$695,000
Assisted Living by Hillcrest (Alouez Parkside Village #1 and #2)	CBRF (assisted living) for APS use	At-risk adults	APS	\$75,000
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	CPS, CABHU	\$10,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	Behavioral Health	\$250,000
Berry House (Robert E. Berry House)	CBRF (assisted living) that takes individuals with backgrounds in violent crimes	MH	Behavioral Health	\$75,000
Better Days Mentoring	Youth mentoring services, daily living skills	Youth	CPS, JJ, CLTS	\$275,000
Boil Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	Behavioral Health, CMHP	\$500,000
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	Behavioral Health, CMHP	\$500,000
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used VERY sparingly)	PD with MH issues	Behavioral Health, CMHP	\$35,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	CPS, CMHP	\$160,000
Centerpiece LLC	Social learning groups for children with social communication challenges	Children	CLTS	\$17,500
CP Center	Respite and daily living skills	Children with disabilities	CLTS, C-COP, BT3	\$75,000
Childrens Service Society	Treatment foster care placing agency	Children	CLTS	\$10,000
Chilada Institute	Children high-needs residential care center (RCC)	High behavioral needs children	CPS	\$175,000

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 3/5/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Updated Not-to-Exceed Amount
Cisler Construction	Home remodeling/modifications	Families of long-term care children	CLTS	\$50,000
Clarity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	CMHP	\$10,000
Communication Pathways LLC	Social learning groups for children with social communication challenges	Children	CLTS, C-COP	\$50,000
Compass Development	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	\$62,000
Curative Connections	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	Behavioral Health, CMHP, CABHU, CLTS	\$420,000
Curo Care LLC	Corporate adult family homes (assisted living)	PD with MH issues	Behavioral Health, CMHP	\$200,000
Deer Path Assisted Living Inc.	CBRF, corporate adult family homes (assisted living)	MH/AODA	Behavioral Health, CMHP	\$120,000
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	Behavioral Health	\$285,000
Dynamic Family Solutions	Family counseling/treatment programs	Families of juvenile offenders	JJ	\$30,000
Encompass Child Care	Child day care	Children	CPS	\$50,000
Engberg AFH	1-2 bed traditional adult family home	MH	Behavioral Health, CMHP	\$22,000
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with disabilities	CLTS, C-COP	\$50,000
Expressive Therapies LLC	Music therapy for children	Children	CLTS	\$28,000
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	Behavioral Health, CABHU, APS, CPS, CMHP	\$3,000,000
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile offenders	JJ, CSP	\$290,000
Family Works Programs, Inc.	Treatment foster care placing agency	Children	CPS, JJ	\$25,000
Foundations Health and Wholeness, Inc.	Treatment foster care placing agency and CCS Services	Children and adults	CPS, CABHU, Behavioral Health	\$200,000
Friendship House	Group home for juvenile offenders	Juvenile offenders	JJ	\$100,000
The Gathering Place	CCS peer support services	MH/AODA	Behavioral Health	\$25,000
Golden House	Domestic abuse services	Adults in need	CPS, APS	\$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	Behavioral Health, CMHP	\$24,000
Goodwill Industries	Prevocational services	PD with MH issues	CMHP	\$2,500
Green Bay Area Builders	Home remodeling/modifications	Families of long-term care children	CLTS	\$50,000
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc.	CPS case children and adults	CPS	N/A

11C

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 3/5/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Updated Not-to-Exceed Amount
Greenfield Rehabilitation Agency, Inc.	Birth to 3 services	Children with disabilities	BT3	\$510,000
GT Mobility & Services	Vehicle modifications for families with disabled children	Families of disabled children	CLTS, C-COP	\$95,000
Helping Hands Caregivers	Supportive home care	PD with MH issues	CMHP	\$10,000
Home Instead Senior Care	Supportive home care	PD with MH issues	CMHP	\$8,000
Homes for Independent Living	CBRF (assisted living)	MH	Behavioral Health	\$200,000
HME Home Medical	Medical and therapeutic supplies and equipment	Children	CLTS and C-COP	\$55,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	Behavioral Health	\$65,000
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	CLTS and C-COP	\$50,000
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	Behavioral Health, CMHP	\$95,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	Behavioral Health, CABHU, JJ, CPS, CMHP, CLTS	\$1,850,000
Jackie Nitschke Center Inc.	AODA residential and intensive outpatient services	AODA adults and youth	Behavioral Health, CABHU	\$150,000
Jacobs Fence	Fence building and repair	Families of long-term care children	CLTS	\$90,000
KCC Fiscal Agent Services	Payor of client-hired personal care workers		CLTS, CMHP	\$950,000
KUEHG - Kindercare	Child day care	Children	CPS	\$85,000
Kismet Advocacy	Mentoring, living skills for autistic and/or behaviorally-challenged children and their families	Children	CLTS, CABHU, JJ	\$280,000
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	Behavioral Health	\$30,000
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	JJ, CPS	\$150,000
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	Behavioral Health	\$905,000
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	CPS, JJ	\$615,000
Macht Village Programs Inc. (MVP)	Respite care, counseling, daily living skills, treatment foster care child placing agency	High behavioral needs children	CABHU, CLTS, CPS, JJ	\$700,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	\$55,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	Behavioral Health	\$60,000
Meridian Senior Living (Birch Creek and Bishop's Court)	CBRF (assisted living) for APS use	At-risk adults	APS	\$60,000
Milestones Behavioral Pediatrics	Social learning groups for children with social communication challenges	Children	CLTS	\$20,000
Moon Beach Camp	Summer camp for children with autism	Children with long-term care needs	CLTS	\$20,000
Mooring Programs Inc.	AODA residential services	AODA adults	Behavioral Health	\$100,000
My Brother's Keeper	Male Mentoring Program	Juvenile males	JJ	\$10,000

HC

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 3/5/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Updated Not-to-Exceed Amount
Mystic Meadows LLC	Corporate AFH (assisted living)	MH/AODA	Behavioral Health, CMHP	\$320,000
NEW Community Shelter Inc.	Homeless sheltering services	MH	Behavioral Health	\$40,000
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	CPS, JJ	\$125,000
Nova Counseling Services Inc.	AODA residential services	AODA adults	Behavioral Health	\$50,000
Nurses PRN Home Care	Skilled nursing services	Children	CPS, CLTS	\$45,000
Oconomoc Development Training Center	Residential care center (RCC) for juvenile offenders	Juvenile offenders	JJ	\$175,000
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	Behavioral Health	\$35,000
Options for Independent Living Inc.	CCS peer support services, home modification assessments	MH/AODA	Behavioral Health, CLTS	\$10,000
Options Treatment Program	AODA treatment, CCS services	AODA youth and adults	JJ, Drug Court	\$40,000
Paragon Industries	Daily respite care	Children with long-term care needs	CLTS	\$250,000
Parmentier AFH	3-4 bed traditional adult family home	MH	Behavioral Health, CMHP	\$44,500
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	Behavioral Health	\$375,000
Pillar and Vine, Inc.	Treatment foster care placing agency	Children	CPS/JJ	\$25,000
Prevea Health WorkMed	Drug screenings	CPS parents, AODA, JJ youth	Behavioral Health, CABHU, JJ, CP, ES	\$55,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health, CMHP	\$275,000
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	Behavioral Health, CMHP	\$120,000
Psychological Consultants of Green Bay	Psychological assessments to determine competency	Elderly, DD	APS	\$25,000
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	Behavioral Health	\$100,000
Rawhide, Inc.	Residential care center (RCC) for juvenile offenders	Juvenile offenders	JJ	\$500,000
Rehabilitation House	Transitional CBRF (assisted living) for co-occurring AODA/MH	MH/AODA	Behavioral Health	\$60,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	Behavioral Health, CMHP	\$200,000
Saint A	Treatment foster care placing agency	Children	CPS	\$30,000
Social Thinkers	Social learning groups for children with social communication challenges	Children	CLTS	\$22,500
Smith Receiving Home	Receiving home for emergency placements	Children in need	CPS	N/A
Szerkins Receiving Home	Receiving home for emergency placements	Children in need	CPS	N/A
Spectrum Behavioral Health	CCS services	Children	CLTS, CABHU	\$100,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	BT3	\$250,000
Tellurian	Residential detox	AODA	Behavioral Health	\$55,000
Tomorrow's Children Inc.	Children high-needs residential care center (RCC)	High behavioral needs children	CABHU	\$100,000

HC

**HEALTH AND HUMAN SERVICES
2019 PROVIDER CONTRACT LIST - 3/5/2019**

Provider	Service(s) Description	Target Client	Program Unit(s)	Updated/Not-to-Exceed Amount
Treatment Providers LLC (Dr. Fatoki)	Medication Assisted Treatment (MAT) for opioid abuse treatment	AODA	AODA	\$60,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	Behavioral Health	\$1,400,000
United Translators	Interpreter/translation services	Non-english speaking	APS, CPS	\$10,000
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	CPS	N/A
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	Behavioral Health	\$1,400,000
Walking and Wheeling	Medical/therapeutic supplies and equipment and home modifications	Children	CLTS and C-COP	\$85,000
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	Behavioral Health	\$200,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	CABHU, JJ	\$26,000
Wisconsin Lock and Load Transport	Provides secure transportation to/from GB to other state facilities	MH, JJ	Behavioral Health, JJ	\$42,000

11c

**Brown County Health and Human Services
New Non-Contracted and Contracted Providers
March 4, 2019**

REQUEST FOR NON-CONTRACTED PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Individual	Respite for a CPS child	\$10,000	2/7/19
Individual	Respite for a CPS child	\$10,000	2/7/19
Individual	Respite for a CPS child	\$10,000	2/18/19
Intensive Therapeutics	Therapeutic camp for a CLTS child	\$10,000	3/1/19

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE