

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular meeting of the **Brown County Human Services Committee** was held virtually on Wednesday, August 26, 2020.

Present: Supervisor Brusky, Supervisor Borchardt, Supervisor Evans, Supervisor Sieber, Supervisor Jacobson
Also Present: Health and Human Services Director Erik Pritzl, ADRC Director Devon Christianson, Syble Hopp Administrator Kim Pahlow, County Veteran Service Officer Joe Aulik, Public Health Officer Anna Destree, Director of Administration Chad Weininger, HS Finance Manager Eric Johnson, Director of Community Programs Jenny Hoffman, Nursing Home Administrator Samantha Behling, Mark Seidl; Supervisors Kaster, Schadewald and Lefebvre; other interested parties.

I. **Call Meeting to Order.**

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

II. **Approve/Modify Agenda.**

Motion made by Supervisor Borchardt, seconded by Supervisor Evans to modify the agenda to take Item 4 after Item 1. Vote taken. **MOTION CARRIED UNANIMOUSLY.**

III. **Approve/Modify Minutes of July 23, 2020.**

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

Comments from the Public – None.

1. **Review Minutes of:**

- a. Aging & Disability Resource Center of Brown County Board (April 23 & May 28, 2020).
- b. Aging & Disability Resource Center of Brown County Exec & Finance Committee (May 21, 2020).
- c. Board of Health Meeting (May 12 & June 9, 2020).
- d. Children with Disabilities Education Board (July 21, 2020).
- e. Criminal Justice Coordinating Board (August 4, 2020)
- f. Human Services Board (July 9, 2020).
- g. Veterans' Recognition Subcommittee (July 21 & August 18, 2020).

Motion made by Supervisor Evans, seconded by Supervisor Sieber to suspend the rules to take Items 1a-g. Vote taken. **MOTION CARRIED UNANIMOUSLY.**

Motion made by Supervisor Evans, seconded by Supervisor Sieber to receive and place on file Items 1a-g. Vote taken. **MOTION CARRIED UNANIMOUSLY.**

Although shown in proper format here, Item 4 was taken at this time.

Communications

2. **Communication from former Supervisor Tran re: Resolution to Provide Emergency Funding to Combat COVID-19 in Brown County. *May Motion: To provide \$50,000 to Howe Community Resource Center to be used for COVID-19; of that \$50,000, use up to 4% for administrative fee; and have Howe Resource Center provide where those funds have been utilized. June Motion: Hold for one month. Note on June County Board: There was no Corporation Counsel approved Resolution, and no Administration approved Fiscal Statement, provided to this Committee regarding this item to approve of/act on. Corporation Counsel will research whether there is authority to allow for this appropriation, and if so,***

*will draft a Resolution consistent with the above, and will bring to the July Human Services Committee meeting for possible action. **July Motion: Hold until next regular meeting.***

Health and Human Services Director Erik Pritzl believed there was a prior communication sent to committee members on this matter from Corporation Counsel.

Evans informed Corporation Counsel Hemery stated they couldn't give any funds but Evans was still looking to see if there was any other way, even under CARES that they could come up it. They had a difference of opinion and had been going back and forth on it. The committee and County Board passed this but Hemery stated no because of an AG opinion. They could take the item off but he's disappointed it wasn't going anywhere. Borchardt agreed with Evans, to receive the item but needed to find a way.

Responding to Lefebvre, Weininger stated the question wasn't about funding, it was regarding the authority. It was Corporation Counsel's opinion they didn't have the authority to make this direct payment, it dealt with the type of funds. The county had to be authorized to make the expenditure. It was not illegal to give Howe Community Resource Center funds, it was the purpose of the intended funds. If they found something that was covered, they could direct those funds to them. They should really talk with Corporation Counsel to figure out what was mandated, non-mandated, what they had legal authority or not to do. Evans felt they needed to clarify what they were asking with the current AG opinion. He felt it was a little broad based in preventing them from how he reads it.

Pritzl noted they had to be careful with some of those funding sources because of sub-award issues. They had to make sure anything they do falls within program rules. If they use a different funding source, it could introduce some more flexibility to that process. Reiterating what Weininger said, it was not so much a budgetary issue, they would need to make sure this was legally something that can be done.

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

- 3. Communication from Supervisor Emily Jacobson re: To have the county declare October 15, 2020 as "Pregnancy and Infant Loss Remembrance Day". Pregnancy and Infant Loss Remembrance Day is a day of remembrance for Pregnancy loss and infant death, which includes, however is not limited to, miscarriage, stillbirth, SIDS, and the death of a newborn.**

Jacobson informed this was a national thing and she felt they should bring it to light. There were a lot of activities around the county during this time and she would like to bring it to the county level and have it acknowledged.

Evans questioned if this included abortion. Jacobson stated it technically was not in the definition of it and believed it was about verbiage. Lefebvre believed it could be because abortions were elective.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to refer to Corporation Counsel to work with Supervisor Jacobson to draft a resolution declaring October 15, 2020 as "Pregnancy and Infant Loss Remembrance Day" and bring to the September County Board. Vote taken. MOTION CARRIED UNANIMOUSLY.

- 4. Communication from Supervisor Kaster re: I am requesting the following Brown County issues license fees be reduced by 50% for the 2020-2021 period (as per 2020 Brown County Budget Book; Rates and Fees).**

Director of Administration Chad Weininger referred to a handout re: Fee Reduction (attached) and informed this ran through Public Health who reported to Health and Human Services. The cost of the decrease in fees of 50% would be \$278,148.50 which was lower than his estimate because the number of licensees decreased from 2019-20. Due to budget constraints, they didn't believe that Public Health would have the funds necessary to forgo this revenue. It would need to go to the Administration Committee to be taken from the General Fund or Contingency Fund. After reviewing Public Health's numbers over the last quarter, it looks like they should have enough in 2020 to cover this revenue shortfall, the lapse was in 2020 but also in 2021. Therefore it would not need to go to Administration

Committee if they so choose tonight.

Health and Human Services Director Erik Pritzl stated they would be able to absorb that loss in this budget period. They would have to look at a couple different options in terms of how they recognize that, in terms of accounting or reduction of fee. Basically the fiscal amount seemed to be manageable within this period.

Responding to Brusky, Pritzl informed they weren't giving up anything at this point. They were in a position right now with all the resources dedicated to COVID-19, and the alternative funding sources that were in place, that they didn't expect when this budget was created, that they could address the loss of revenue through their budgeted funds for 2020. Weinger interjected that in November, the Roads to Recovery funding ends. Depending on if there were additional costs, this would help offset that. He's not saying it was likely to happen, but it could potentially happen, although they did have other funding sources for that. There could be, potentially, a shortfall where Public Health may have to do some additional things. Unfortunately the state money might not be available so they would have to use funds from their budget, then the contingency and general fund. But from where they were, they had done a really good job of managing COVID internally so he wasn't that worried but he wanted to make sure they were aware of that potential possibility.

Motion made by Supervisor Sieber, seconded by Supervisor Borchardt to refer to Corporation Counsel to draft a resolution to reduce the fees by 50% for the 2020-2021 period and forward to County Board. Vote taken. MOTION CARRIED UNANIMOUSLY.

Back to Item 2 at this time.

5. **Communication from Supervisor Lefebvre re: I am asking the Human Service/County Board adopt the following NACO resolution the Executive Committee passed, urging the Federal Government to -**
- Declare Racism a National Public Health Crisis -**
- 1- **Assert that racism is a public health crisis affecting our entire country.**
 - 2- **Leverage a racial equity lens in evaluating federal policy.**
 - 3- **Develop relevant policies aimed at improving health and economic opportunity in communities of color and;**
 - 4- **Support local, state and federal initiatives that advance social justice.**

Lefebvre added it was declared that the issue was communities of color are disproportionately impacted by the multitude of social economic and public health challenges facing counties across the country and disproportionately is rooted in individual systematic and institutional racism. She stated this has been in the news that this affects people of color much more and a lot of it was a health issues. Their access to health in a lot of these communities is not very well documented. As the National Association of Counties has passed this resolution, she felt the county should sign on to this and it should be sent to the federal government.

Evans acknowledged that there was racism in the country, he felt they could all understand that but to send this on, they had to look at what they were doing here first. Were there any health agencies denying care to minorities, he didn't think so. Were any stores denying healthy food to minorities? No. Was the government or Brown County denying WIC or EBT food assistance to minorities? No. Were gyms and workout centers denying access to minorities? No. Are parks denying access to people? No, that wasn't happening either. Schools don't deny minorities to health class, they do a fantastic job. They give out food and help to kids of families of minorities and they did an excellent job.

He saw Dr. Ashok Rai from Prevea promoting something the city council brought forward and he questioned what Prevea was doing wrong, where he felt it needed to be fixed nationwide? They hired minority positions. Did Children's Hospital deny minorities? Does Ronald Mc Donald House deny families of color, he didn't think so. If racism was a national public health crisis then the providers really needed to step up and they didn't need government to be telling them what they should be doing. However, Evans can tell you that they are not racist, they are taking care of everybody.

Wisconsin had the WI Department of Workforce Development for civil rights. Wisconsin had 25,327

attorneys who belonged to the WI Bar Association and they hadn't had any cases of discrimination based on healthcare under Sec. 1983. In the State of Wisconsin there had only been 70 housing discriminations in the last statistics in 2017.

In a Men's Health article, it talked about race, racism and black men's health. They interviewed a black doctor who stated, "We've seen how COVID disproportionately affects the Black community. Adding to that, there's been a persistent disparity between the number of Black doctors and patients. If you go all the way back to the 1970s, the number of Black male applicants to medical school has only declined, despite the growing patient population of minorities from low socioeconomic backgrounds. That speaks volumes—and it creates issues." Evans was not denying it but didn't know what our government can do about it. It goes on to say, "What we have come to find is that these individuals are more vulnerable to health-care-related problems. One, they may not have health insurance altogether." Evans responded there was the Affordable Care Act that the Obama Administration put forth and was in law. "Two, they tend not to see a health-care provider until the last minute, because they try to deal with it themselves." Evans stated he didn't know how making racism a national public health crisis identifies or fixes that problem. There had to be some personal responsibility. "And three, their lack of health literacy can make it hard for them to understand what their physician is saying." That was the physician's job. What it gets into was a social justice cause which is defined as the view that everyone deserves equal economic, political and social rights and opportunities, social justice encompasses economic justice. He believed this absolutely, however, in 2020 he is more confused than ever on what social justice is because now it seems to mean something different to everyone and every organization had a different understanding or definition of social justice.

With regard to the communication, they were going to say racism was a public health crisis. Leverage a racial equity lens in evaluating federal policy, he questioned what that even means? Develop relevant policies. He was sure policies were in place already in the healthcare industry, if not that was an industry problem. Healthcare workers take oaths to help everybody. They had hospitals that were nonprofit that were losing money that took care of all sorts of people. Support local, state and federal initiatives that advance social justice, social justice in today's world, he had no idea what that means.

Evans was not going to support this, this was another 2020 social justice cause that they want to put through that makes everyone feel good that's not going to do anything.

Lefebvre stated a lot of these people do not have the education or have the whereabouts to get the education to become nurses and doctors, it costs money. A lot of people of color live in very poor areas and come from poor families and have no way of getting any funding or know how to get funding, many of them. It costs a lot to be a doctor. Her nephew became a dentist, he had to go to 4-years of regular college, had to pay a couple thousand to apply to a dental school to get in. He had to pay for the time he went to dental school, which cost \$50,000. In Green Bay, a lot of poor people live downtown and there was nothing there. Green Bay was finally going to put a grocery store in and she prays it is reasonably priced. They had Save-a-Lot but not until a new owner took over, it was an awful store. The fruits, vegetables, and meat were high priced and a lot of it was in bad shape and it was sitting there because people couldn't afford it. All the junk food was cheap. She's heard stories where people living in the inner-city areas, they go to the grocery stores and feed their families junk food. A lot of these people do not have access to good food. Festival was very expensive. The most reasonable grocery store was Woodman's but how do they get to Howard? A lot of these people can't even afford transportation. That's just in our own community. Thinking about Milwaukee, it's one of the worst and there was real disparity in the health and these people were not getting what they need. She thought they should sign on just in support saying they do believe this, that there is a problem.

Sieber suggested holding this until they have a chance to get a copy of a resolution to review, for more clarity. Lefebvre will get the resolution and will forward it on.

Borchardt noted there were two dozen other counties in the State of Wisconsin that signed onto this including Milwaukee County, which came from their County Executive's office. Brusky stated Kenosha passed a resolution on this in July, passed 18 to 1. She agreed with Lefebvre about the educational aspects as well as cultural. It was a longstanding thing that was hard to figure out how to do, it's been 100s of years in the making and it was very worthwhile.

Motion made by Supervisor Sieber, seconded by Supervisor Borchardt to hold until September Human Services Committee meeting. Vote taken. MOTION CARRIED UNANIMOUSLY.

Wind Turbine Update

- 6. Receive new information – Standing Item.**

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

Resolutions & Ordinances

- 7. Resolution Adopting Brown County's 2021 Five-Year Capital Improvement Plan.**

Weininger informed this already went to their committee, nothing has changed. It was procedural and sent back to committees for formal approval.

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

Veterans

- 8. Budget Adjustment Request (20-057): Any increase in expenses with an offsetting increase in revenue.**

Veterans Service Officer Joe Aulik spoke to this. Their office received two donations and one grant to be used to market VA Benefit programs, provide emergency services to veterans, and support office services to veterans, dependents, and their survivors.

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

- 9. Director's Report.**
a. COVID-19 Update.

A written Director's Report was provided (attached), Aulik briefly spoke to it.

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

Aging & Disability Resource Center

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

ADRC Director Devon Christianson informed they were still in a Phase 1.5, which meant their doors were not open to the public because they were a large gathering space but their board did move to allow them to be able to see more emergent situations one-on-one, so they had a skeleton crew in the office. They had never really stopped doing phone and virtual meetings with customers and had gotten more skillful at doing WebEx or TEAM meetings with families and caregivers. There has been some really nice learnings from this and moving forward, even when doors are open, they are going to continue to press virtual meetings as an option for people. It really benefitted people who aren't living in the community. They were also able to provide almost all of their prevention and wellness programming online so people who had transportation barriers or really had been isolated and unable to get in are able to participate in many of their classes and events online. They had their calendar of all their virtual stuff and programming online and available to click and register right on it. They were doing a lot more videos, taping prevention programs and actions so people can watch. They put a lot of energy in helping to train people on technology and doing one-on-one appointments to teach them how to use the equipment as well, if they have it at home.

They did a survey to find out that at least for their homebound individuals, over 50% of an older population actually had access to technology, either computers or phones and they were very pleased

that they are still able to reach quite a few people.

In their home delivered meal area, referring to their polling data, in looking at what they did last year compared to this year, they were serving 23% more customers this year than last. Because they only have carryout, on average, they had served 77% of all of their nutrition programs for homebound last year and now they were at 92%. While they can provide more services, it required a lot more drivers. They were packing up to 600 meals a day, which was much more involved. They had 200 volunteer drivers and they were absolutely amazing. With the average age of 75, they were in constant flux of registering people to be drivers because they want to keep them safe. They do contactless but face-to-face drop-off of these meals, they had no heightened protocols around it and their volunteers are needing to rotate through if they have any symptoms. They were always looking for drivers. What they were seeing through survey and conversations was that there were greater food insecurity for people as time goes on and a much greater increase of isolation and loneliness.

They were working with the medical college with some intern students, pre-med, that will help with a matching program to match homebound people with other homebound people to be able to call and support each other, either through phone or virtual calls.

They had a state call today, many of the folks at the state level were starting to use the words burnout and COVID fatigue. With their population, and heightened isolation occurring, people were beginning to wear down as time goes so they were trying to be very aware and alert to that and talking to each person they have contact with on ways they could intervene.

She really appreciated the discussion around the health equity issue and racism. Her board will be talking about this tomorrow morning. A group of non-profits in the organization came together and presented and did some public input to the Policy and Protection Committee at the city about why racism was such an incredible issue for them in this community. Evans brought up some very valuable concerns that people are thinking about. She would like the ADRC as an organization to challenge themselves about their own policy and lens and how they contribute to social determinants of health. Only 20% of healthcare was delivered by health professionals. 80% of all other healthcare was provided in homes and outside of a medical setting, that's where they can have influence and really create impact as an ADRC. The real issue for them was the life expectancy and disparity in life between an educated white person and a person with limited education who was African American was close to 16-years. If they ask themselves, that minority population by 2040 was going to be the majority population and the life expectancy was low and the health disparities were great, the cost to their systems were going to be immense. What can they do now to help attack those issues of social determinants of health and as they influence people of color so they change that trajectory because they won't be able to afford that in the long range. COVID has pulled back the covers of what this means in terms of older black people are diagnosed nine times more and die at 10 times the rate of whites. They had work to do and what was right about this was it was messy and it's not immediate and it was going to take a lot of them banded together, it can't just be the county's response, it had to be all nonprofits as well.

Evans questioned what the ADRC was doing to address racism as a health issue? Christianson responded that one of the things she'll be asking the board about was regarding the Wisconsin Public Health Association asking organizations to consider signing a declaration. There was a list of activities that they would do. Evans questioned what they had done to combat it? Christianson stated one thing she had done was partner with other organizations who were also wanting to come together and set a strategy. They were meeting together and talking about what they can do as nonprofits to change the public narrative. She was bringing it to her board, every time she brings a policy forward they were going to look through the lens of racism in a policy that her board might pass. She commits to that. She had 2-3 additional all agency meetings to train staff around insight and acknowledgement about implicate bias and understanding what they can do as an organization to have the most involved staff persons who are aware of this. They are going to have them on committees in the community. They have about 3 minority staff and 2-bilingual Hispanic staff. They made a really concerted effort in recruitment for employees in any of the openings they had. She wants the board to hold her to it so they keep doing these efforts and are part of the solution.

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

Syble Hopp

11. Director's Report.

a. COVID-19 Update.

Syble Hopp Administrator Kim Pahlow informed they were back to school to some degree. They welcomed their new employees on Monday, teachers and therapists on Tuesday and today a full house of instructional aides and support staff. They decided at their board meeting to delay their start of in-person school. They held a number of parent meetings to inform them of their decision and answer questions. They based that decision on a Harvard study, some information from the World Health Organization, consulting with their medical consultant and the De Pere Health Department. They wanted to take the next 17-days before their next board meeting to see what happens when all the schools in their area open up. They were concerned with the capacity of a number of organizations they would need support from, it was a lot of students coming back to school at one time. Over 60% of their students have a health condition that put them at high risk so they decided it was wise to wait and open up a little later. Their goal at their September 15th board meeting was to come back and have this discussion again, monitor what's happening in the county, as schools open up, and look at the metrics of where they were. They had a great week back with staff and were trying to figure out and work through the potential of staff having symptoms of COVID, etc.

Brusky stated it was a sensible idea to delay, she supported their decision. She asked Pahlow to elaborate on the program Seesaw. Pahlow informed it was a system used in many school districts that allowed them to put lessons into the platform to communicate with parents. They decided that all teachers would be using that platform so they were consistent and parents know how to use it. It was a great communication tool.

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

Health & Human Services Department

12. Executive Director's Report.

a. COVID-19 Update.

In addition to Health and Human Services Director Erik Pritzl's report in the packet, he briefly provided an update on the Secure Residential Care Center for Children and Youth, the SRCCY that replacement youth center from Lincoln Hills Copper Lake which the state operates for youth corrections. The 24-bed secure residential care center is longer-term placements and a 32 bed secure detention center is shorter-term placements. They did respond to the Department of Corrections (DOC) to let them know they were still considering this a viable project but had to receive an agreement that met the standards outlined through the County Board resolution last October. They don't have an agreement right now in terms of those grant funds that they can present to the County Board. Pritzl knows there are other counties involved and was seeing how their decisions were changing the overall picture in terms of youth corrections. If they only have two facilities, that's not going to meet what was outlined by the study committee in terms of demand. They also had other pieces they needed to iron out. The DOC indicated they were willing to go over their concerns, he was waiting for them to reach back out to him to get something scheduled. Before they commit a lot of county resources, they want to make sure they understand where they were headed with the state.

Responding to Lefebvre, Pritzl informed they received some concerns from members of the public related to the fair and they quickly forwarded them to De Pere Public Health for their review. It was within their jurisdiction and they worked with the fair in terms of those operations.

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

13. Resolution Regarding Table of Organization Change for the Health and Human Services Department – Community Services Division – Social Worker/Case Managers for CLTS Unit.

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

14. Resolution Regarding Table of Organization Change for the Health and Human Services Department - Community Services Division – Social Worker/Case Managers for CPS Unit.

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

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

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

16. Statistical Reports.

- a) Monthly CTC Data.
i. Bay Haven Crisis Diversion.
ii. Nicolet Psychiatric Center.
iii. Bayshore Village (Nursing Home).
b) Child Protective Services – Child Abuse/Neglect Report.
c) Monthly Contract Update.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to take Items 16a-c together. Vote taken. MOTION CARRIED UNANIMOUSLY.

Motion made by Supervisor Borchardt, seconded by Supervisor Sieber to receive and place on file Items 16a-c. Vote taken. MOTION CARRIED UNANIMOUSLY.

17. Request for New Non-Contracted and Contracted Providers.

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

Other

18. Audit of bills.

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

19. Such other Matters as Authorized by Law.

Brusky briefly spoke to dates and times for upcoming meetings, including budget.

20. Adjourn.

Motion made by Supervisor Sieber seconded by Supervisor Borchardt to adjourn at 7:23 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Administrative Coordinator

Health & Human Services -- Public Health

	Unit	2020 Rate/Fee	Proposed New Rate/Fee	Total Number of Renewals mailed	Total number of new permitted licenses since April 1st, 2020	Pending 2020- 2021 Licenses	Establishment that closed - 4.1.2020- 8.21.2020
Soft Drink Stand, Frozen Confection Tavern	License	148.00	74.50	0	0	0	0
Additional Tavern Area	License	148.00	74.50	330	9	15	10
Restaurant:	License	38.00	19.00	129	9	5	1
Temporary Restaurant	License	181.00	95.50	103	2	1	0
Prepackaged Food Only	License	162.00	81.00	67	4	4	3
Food Preparation On Site (Risk Categories):							
Simple with Gross Sales Under \$50K	License	499.00	249.50	9	1	1	0
Simple with Gross Sales \$50K to \$200K	License	464.00	282.00	1	0	0	0
Simple with Gross Sales Over \$200K	License	626.00	318.00	1	0	0	0
Moderate with Gross Sales Under \$100K	License	682.00	341.00	119	2	5	3
Moderate with Gross Sales \$100K to \$400K	License	744.00	372.00	131	0	2	2
Moderate with Gross Sales Over \$400K	License	804.00	402.00	108	1	6	3
Complex with Gross Sales Under \$150K	License	855.00	427.50	14	2	3	0
Complex with Gross Sales \$150K to \$600K	License	918.00	459.00	55	1	3	4
Complex with Gross Sales Over \$600K	License	675.00	487.50	134	2	6	5
Additional Food Preparation Area (within Establishment)	License	106.00	53.00	129	4	4	1

The cost of the decrease in fees of 50% would be \$278,148.50 (lower than my estimate because the number of licensees decreased from 2019-20).

Brown County Veterans Service Office

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PHONE (920) 448-4450 FAX (920) 448-4322

JOSEPH AULIK
VETERANS SERVICE OFFICER

DIRECTOR'S REPORT – COUNTY VETERANS SERVICE OFFICE

8/24/2020

1. VA benefits were increased \$10.2 million in 2019 to \$114.3 million. Economic Impact increased \$19 million in 2019 to \$226.3 million. Retroactive Cash Payouts to veterans, survivors, and deponents in 2019 totaled \$2.1 million.
2. Year-to-Date Retroactive Cash Payouts to veterans, survivors, and dependents total \$2.7 million. This is an increase of \$900,000, up from \$1.8 million, as reported on 7/21/20.
3. We had a couple of large retroactive cash payments in the past month for VA claims, \$180,000, \$163,000, and \$50,000 just to name a few. The more experience and training that staff receives over time, the more claims we will continue to win for veterans and their dependents because they become more skilled and knowledgeable at what they do. We not only have to quality check out work but the work the VA because there is a 75% error rate with VA claims.
4. Office continues to utilize phone appointments to avoid in-person appointments due to the pandemic to keep our veteran community safe. Over 99% of what we do can be addressed over the phone now because of our electronic capabilities and electronic claims submission and accessing various VA databases.
5. We have one employee out on extended medical leave. This has added additional stress on the entire TEAM. That employee's caseload of 100 veterans and dependents had to be picked up by myself and my Assistance. We have just now started to advertise for a Limited Term Employee (LTE) to, at a minimum, handle the phone volume. The challenge lies in the fact that it is difficult to bring someone on board without the specialized VA knowledge that is now required to handle the phone inquiries and triage those inquires and correctly process those calls.
6. Due to the loss of the one employee we had to postpone our mailing outreach program and out billboard advertising program to not overwhelm the TEAM and out step our capabilities. We must guard against burn out and mental fatigue in this career field as I have seen it happen several times over the past 21 years. Prior to postponing our mailing program, we did have a veteran call from our mailing, and we determined he was eligible for the Veterans and Survivors WI Property Tax Program and he received a refund of \$24,000 on his taxes.
7. Year- to-date three veterans have taken their life by suicide in Brown County. In 2019 six veterans died by suicide. As a reminder, on average in Brown County six veterans die by suicide each year. In Wisconsin, on average 13 veterans die by suicide each month or 150 veterans annually. This has been the trend for the past 11 years. To combat this trend, we continue to aggressively market VA Benefits, via our Newsletter and Social Media.