MEETING OF THE WINNEBAGO COUNTY DEPARTMENT OF HUMAN SERVICES BOARD

<u>Minutes</u>

DATE: Monday, March 7, 2011

TIME: 3:30 p.m.

PLACE: Human Resources Meeting Room, 112 Otter Street, Oshkosh

MEMBERS PRESENT: Jerry Finch, Jef Hall, Jim Koziczkowski, Donna Lohry, Mike Norton, Rob Paterson, Harvey Rengstorf, and Tom Widener

MEMBERS EXCUSED: Ron Kuehl

<u>STAFF PRESENT</u>: Bill Topel, Ellen Shute, Mary Krueger, Ann Kriegel, Leo Podoski, Tom Saari, Dan Hinton and Dorothy De Grace

OTHERS PRESENT: Barry Busby, Coroner; John Matz, Sheriff; Bob Poeschl & student intern, ARC of Winnebago County; Margaret Winn, Lakeside Packaging Plus, Inc.; and Debra Last

Jim Koziczkowski called the meeting to order at 3:30 p.m.

AGENDA ITEM #1: PUBLIC COMMENTS ON AGENDA ITEMS

There were no comments.

AGENDA ITEM #2: APPROVE MINUTES OF THE FEBRUARY 7, 2011 HUMAN SERVICES BOARD MEETING

Jerry Finch moved for approval of the minutes; seconded by Mike Norton. With a change to a name identified in item #7 of those minutes, the motion carried (8-0).

AGENDA ITEM #3: ACCEPT MINUTES OF THE FEBRUARY 8, 2011 SPECIALIZED TRANSPORTATION COUNCIL MEETING

Harvey Rengstorf moved for acceptance of these minutes; seconded by Jef Hall and carried (8-0).

AGENDA ITEM #4: 2010 FINANCIAL REPORTS

In referring to the final 2010 Financial Report, Ellen Shute explained the reasons for the unexpended tax levy of \$2,179,079. That amount will be returned to the General Fund. There is an approximate \$800,000 surplus from labor due to turnover, retirements, position elimination and different terms in the final Union contract that was negotiated. In the travel area we had \$31,000 unexpended levy; we had about \$533,000 unexpended levy for program expenses; and revenues from each area indicate we collected \$813,000 over the budgeted level.

Bill Topel said he informed Mark Harris that the Board requests a separate fund not be established for the savings from Family Care, but that it should be noted in a file. Bill said he was asked to inform Finance of the amount of savings from the reduction in our contribution to the state for Family Care, minus any ADRC costs or overages.

Ellen Shute said a handout had been given to Finance showing the spend-down of the county contribution on an annual basis over the five-year timeframe and it was presented to the County Board along with the resolution to enter into Family Care last year. Ellen said it appears that Finance will not associate any savings in the General Fund, but will have a file to share with the County Board. Ellen said the spend-down for the six months of 2010 was approximately \$455,000.

Ellen Shute referred to the graph of inpatient and institutional utilization and explained the outcome for 2010. For juvenile corrections we ended up with an average daily population (ADP) of 1.4, which was a significant reduction to the 8.1 ADP for last year; for residential care centers the ADP was 4.9 compared to 7.12 for 2009. In the Behavioral Health & Long Term Support Divisions specialty hospitals for adults, the ADP for 2010 was 6.6 which was the same average for 2009; the ADP for specialty hospitals for children was .2, compared to .047 for 2009.

Bill Topel explained that the Child Welfare area had a couple of exceptional cases this past month where the individuals were placed in significant programming in the community, but they won't be able to continue the treatment in the community because their problems continue to grow. If they go to an expensive placement, it will increase our costs. Bill said we recently had a case in Behavioral Health where the individual was the responsibility of the Family Care District, but ended up at WMHI for a couple of weeks for a cost to us of about \$15,000. The person has since been placed at Summit House, but the Family Care District is working to get the individual into a state operated center for the developmentally disabled, not at our expense. Bill said we will experience increases and decreases in the Behavioral Health area from time to time for situations that are out of our control, but he's hoping it won't be a trend.

AGENDA ITEM #5: ACCEPT SPECIALIZED TRANSPORTATION COUNCIL ACCOMPLISHMENTS LETTER

Harvey Rengstorf moved for acceptance of this letter as presented from the Specialized Transportation Council. The letter explains the areas where provider agencies have continued to advocate and provide transportation services primarily for the elderly, disabled and low-income residents of Winnebago County. The Council serves as a forum for transportation needs in Winnebago County. The motion was seconded by Jerry Finch and carried (8-0).

AGENDA ITEM #6: DIVISION UPDATES OF SERVICE AVAILABILITY

Division Managers gave a summary of the service delivery in their area, considering the current economic situation in the state.

<u>Child Welfare Division</u>: Leo Podoski said the status of the economy has not seemed to have had a significant impact on the number of kids that we are serving. We have seen a trend of a gradual decrease in our juvenile justice cases; although we do continue to provide community-based services to them. We continue to see a very gradual increase each year in child protective service cases.

Long Term Support Division: Mary Krueger said referrals for children with a developmental delay are made to the Access Unit, and there is typically a 24-hour business day turnaround for us to set up an appointment. The evaluation time may take longer because of the need for documentation to determine if a child is eligible for long term support services. The service plan must be completed within 45 days of initial contact. We don't have a wait list for service coordination for individuals, but we may have a wait list for funding or service providers. There is usually a month process time for a Medical Assistance waiver for children with developmental disabilities, physical disabilities or severe emotional disturbance from the time we start the application before we get approval from the state.

Mary said an adult who visits the Aging & Disability Resource Center will see an Information & Assistance specialist that day. A phone call inquiry is returned by the end of the day or the following business day. It could take up to two weeks for a one-on-one appointment. An appointment for enrollment counseling for long term care or a referral to Family Care or IRIS is done as soon as someone is approved from the wait list. Functional and financial eligibility is determined and a referral to Family Care or IRIS is usually made within a couple of days. If someone in a nursing home is financially eligible and would like to move to long term care services, we can refer them to Family Care for relocation within a 28-day period.

Mary said Adult Protective Service calls are handled immediately by the person who is on call or the back-up person if it is an emergency; other protective service calls are given a return call within a 24-hour business day. Calls for the Elderly Benefit Specialists or Disability Benefit Specialists are returned within the next business day, and an appointment is generally scheduled within a week's time. Mary said services for individuals who have been diagnosed with a dementia generally take from one to three weeks before they actually begin. The National Caregiver Support Program is for people aged 60 or over that have an unpaid informal caregiver who is eligible for respite, which could start within two weeks of a referral. Elder Abuse funding is available for people aged 60 and over, and response to such requests is immediate. Volunteer transportation through the American Red Cross for persons over age 60 or persons with a disability is provided according to availability of volunteers.

<u>Economic Support Division</u>: Ann Kriegel said we are mandated by the state to process applications for W-2 or Child Care within seven business days. We have 30 days to process applications for Medicaid and Food Share. The time could be extended if more time is needed for an applicant to submit verifications.

<u>Behavioral Health Division</u>: Tom Saari said the number of cases is relatively constant for the CSP and CCS teams. There are no wait lists for these teams. The Family Therapy team has 104 open cases and 5 individuals on a wait list. The list is reviewed weekly to prioritize who should be served next. The referrals are from Child Welfare.

Tom said there were 1,924 referrals in 2010 to the Crisis services team. Each year the number increases, with referrals coming from multiple sources. Mostly all of the consumers have Medicare or Medicaid coverage. In 2010 we provided 2,573 days of crisis services at Summit House. Our combined crisis services generated about \$300,000 in revenue in 2010. Last year the Crisis team diverted 554 potential hospital admissions to other treatment facilities, such as our Crisis Center at Summit House, Shelter Care, or back to jail or home.

Tom said our AODA counselors see about 1,300 people per year. Our wait time in Oshkosh is about one week; in Neenah it is about two weeks. Our walk-in clinic has made a significant impact in getting people in to see a psychotherapist. We had about a 43% increase in the numbers of people we are seeing because of the walk-in center. About 40% of the people that come to the walk-in clinic are scheduled for a second appointment with a therapist. There is a one week wait to see a child psychiatrist in our Neenah office, and two weeks in the Oshkosh office; for an adult the wait is about two weeks in Neenah vs. four weeks in Oshkosh. We have a shorter wait time than most of the other surrounding counties. Our full-time psychiatrists and our advanced practice nurse prescriber average 600 active open cases each.

AGENDA ITEM #7: ADRC UPDATE

Mary Krueger said the Aging & Disability Resource Center Committee chose a chair and vicechair at the last meeting. The committee is currently working on setting a date for a public forum as requested by the state for the purpose of getting feedback from people who are getting services through Family Care, IRIS or who have used the ADRC.

AGENDA ITEM #8: DIRECTOR'S REPORT

Bill Topel distributed copies of excerpts prepared by Wisconsin Counties Association of the Health & Human Services portion of the Governor's proposed biennial budget. Bill said that at the county level we believe the changes proposed for Medicaid will make it more difficult for people to get services who need them. For every dollar spent on Medicaid, the state puts in .40 cents and the feds put in .60 cents. There will be no additional Family Care projects until the Audit results are available. Enrollment for current projects will be capped on July 1, 2011 until the DHS determines that the expansion is cost-effective. The budget modifies the Income Maintenance eligibility determination system to become a state service delivered through contracted agencies. Bill said counties will be gathering information to talk to the state about the concern that counties won't be able to keep up with the workload of the proposed changes to programs. Bill reviewed some of the proposed changes for the recipients of the W-2 program. He said there will be some shifting of funding from one area to another for a lot of the categories.

Bill reminded Board members that April 6 is Human Services Day at the Capitol.

AGENDA ITEM #9: BOARD MEMBER REPORTS

Donna Lohry reported on her attendance at the WCHSA Executive Committee meeting.

PROGRAM: 24/7 SOBRIETY PROJECT FOR WINNEBAGO COUNTY

Tom Saari said the 24/7 Sobriety Project is part of the Rethink Coalition. This South Dakota model has a heavy reliance on the Sheriff's office to make it a success.

Dan Hinton explained that three years ago the Public Health Department received a Drug Free Communities Grant called "Rethink", which is a coalition building grant to help our community get similar minded groups together for healthy initiatives within Winnebago County. Several committees have been formed from this coalition. Dan and several of our staff are on some of these committees.

Barry Busby is a co-chair of the Advocacy Committee, which looks at policy initiatives. Barry said he assisted in putting together an "Ace" report on alcohol prevention for the state. One preventative measure that has been successful in South Dakota is a program that addresses drunk drivers or alcohol abusers. The program is aimed at keeping people sober from the time they are arrested to the time they would be adjudicated. They test twice a day for the consumption of alcohol at a cost of \$1 for each test, or a bracelet is available to test for alcohol consumption for a cost of \$5 a day.

Sheriff John Matz said that the 24/7 Sobriety Program in Winnebago County would require that from the time of an initial appearance for a 3^{rd} and 4^{th} drunk driving offense until the sentencing time which is typically 60 days, a person would be required to come into the Sheriff's office to give a breath sample twice a day. The program would eventually pay for itself, but we need to get up to 82 offenders on the program to pay for the day report staff that does the testing. They would also have the opportunity to be on the bracelet sensor program. If a person tests positive, the Sheriff's office would put the person on the larger intoxilizer machine and he/she could be charged with bail jumping. A judge could sentence the offender to the 24/7 program for a longer period of time. After conviction, the offenders are referred to Human Services for an assessment and driver safety plan. Sheriff Matz pointed out that the Dakota's have a 97% success rate where individuals do not offend while on the program. Their program also gets referrals for other alcohol-related crimes.

With no further business Jerry Finch moved for adjournment; seconded by Mike Norton and carried unanimously at 5:20 p.m. The next meeting of the Human Services Board will be **Monday, April 4, 2011 at 3:30 p.m. at the Neenah Human Services Building.**

Respectfully submitted by Donna Lohry, Board Secretary

/dd