ANNUAL REPORT



2005

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FOREWARD

April 2006

To the County Board of Supervisors, Health & Human Services Board members, and interested citizens:

This is the first annual report of the staff of the Health & Human Services Department. With the passage by the County Board of Supervisors of a series of enabling resolutions in January and February of 2005, and the receipt of approvals from the State Departments of Health & Family Services and Corrections and the Division of Workforce Development, the Adams County Health & Human Services Department began operations on 1 March 2005, culminating a study and planning process initiated in October 2003. The first Health & Human Services Board was appointed at the February 2005 meeting of the County Board of Supervisors and, at the first meeting, selected a core of nine staff members to provide leadership and management to the new department.

In its first nine months of operation, the new department began addressing specific goals set during the implementation planning process to accomplish the objectives established during the feasibility study phase. These objectives included:

- Improving access to services for clients, helping more clients with existing resources, and creating an atmosphere for clients where cooperation and sharing of resources is a positive.
- Providing maximum accessibility to clients in need of service by assuring that clients get to see the person they need to see as quickly as possible.
- Improving services to Adams County clients within available resources.
- · Creating seamless, coordinated services to clients, especially multi-issue clients.
- Providing a better opportunity to capitalize on the use of available resources through a fully coordinated fiscal and data management system.
- · Improving coordination and collaboration for all agencies involved in the consolidation.
- Developing an evaluation system that allows for comprehensive review of data, agency services, client services, and program effectiveness.

Among the accomplishments of the department in 2005 were: achieving a shared mission statement, implementing recommendations for governance and advisory committee structure, reorganizing into operational units and redefining staff functions in the context of the consolidated department, reviewing and streamlining overlapping and support functions, developing an integrated fiscal and accounting system, unifying the transportation systems, and coordinating existing information systems infrastructures and pooling hardware and software resources. A consolidated chart of accounts was created and a unified budget was submitted and approved for 2006.

A number of issues identified in the implementation plan remain to be addressed. Primary among these are the achievement of a unified intake/access system and the implementation of department-wide policies and procedures. With respect to the intake system, two steps toward that goal were

taken in 2005: after numerous attempts to work with local resources had not yielded progress, the department began working with a software developer to design a unified data collection system which would allow prospective clients to provide information to one source and allow that information to be disseminated to each potential service unit. In addition, job descriptions for two new positions, Intake/Access Specialists, were developed to implement the unified intake process and work with clients as they enter the service delivery system, and a resolution to create the positions was approved by the Health & Human Services Board. Work on creating department-wide policies, procedures, and work rules has begun in 2006. Finally, as anticipated throughout the consolidation process, implementing significant organizational change requires time and work both to break down old barriers and territories as well as to establish a new organizational culture and ethos.

In October 2005, the Health & Human Services Department, as well as the entire Adams County community, lost an icon, when Richard C. Holt, long-time Director of the Department of Health, Social Services, and Aging (and Deputy Director of the new department) passed away. In recognition of his 35 years of service, the County Board of Supervisors designated the department's multipurpose room as the Richard C. Holt Conference Room.

This document truly represents a joint effort of the leadership of the Health & Human Services Department. Each program report was compiled and written by the respective manager of the unit, and presents his or her perspective on their unit's place within the unified department, as well as their unit's accomplishments over the course of 2005.

In closing, the Service Evaluation Subcommittee of the Health & Human Services Board established three overall department goals for 2006: work to improve the recruitment and retention of professional staff, develop and implement a comprehensive intake/access system, and continue the integration of the operational units into an interdependent, cohesive department. The latter two issues have been noted in this section. The first issue arose, in large part, out of difficulties encountered in replacing the Clinical Services Manager position (vacant since June 2005), recruiting a part-time Registered Nurse (vacant since October 2005), and recruiting a Mental Health/AODA Counselor.

It is hoped that this Annual Report will provide a concise overview of the scope and breadth of the services offered by the Health & Human Services Department, as well as a brief explanation of the origins, mission, and future of the agency. Our staff look forward to the challenges of continued service provision in a changing environment.

Respectfully Submitted,

Eric G. Furtkamp, Ph.D., Director

HEALTH & HUMAN SERVICES BOARD

Bev Ward, Chairperson County Board Supervisor, District 11

Larry Babcock, Vice Chairperson County Board Supervisor, District 3

Joyce Kirsenlohr County Board Supervisor, District 17

Cindy Loken County Board Supervisor, District 20

Charlie Rath
County Board Supervisor, District 18

Maureen Bruce, R.N. Citizen Member

Agnes Weingarten, R.N. Citizen Member

Hany Mikhaeel, M.D. Citizen Member

Teresa Harvey-Beversdorf Citizen Member

PROGRAM REPORTS

LONG TERM SUPPORT SERVICES (Diane Osborn, Manager)

2005 LONG TERM SUPPORT SERVICES - MILESTONES AND ACCOMPLISHMENTS

The mission of Adams County Health & Human Services Long Term Support Unit is to promote, support, coordinate, and administer programs, policies, and services to residents of Adams County who are elderly, physically disabled, developmentally disabled, mentally ill, or have had a traumatic brain injury. The unit also provides Birth to Three program services, Guardianship & Protective Placement, annual reviews of protective services ("Watts" reviews), Community-Based Residential Facility (CBRF) preadmission screening, personal care program, certifies adult family homes, and serves as representative payee for Social Security clientele.

The LTS Unit Personal Care Program averaged serving 42 clients in 2005. The program provided PCW services to 23 clients in Adult Family Homes (AFHs) and/or CBRFs and 24 clients received services in their homes. In December 2005, the Unit wrote and was awarded a 2006 Community Links grant to increase the personal care services by hiring an additional part-time Registered Nurse to complete assessments and 60-day visits.

In September 2005, Governor Doyle announced the implementation of the Community Relocation Initiative. It gave people, who are elderly or physically disabled, living in nursing homes a choice to move home, in an apartment or in an assisted living setting. By the end of the year the LTS unit relocated four individuals from nursing homes back into the community. Agency staff also participated in the regional forums to discuss planning and implementation and how to best inform nursing home residents of the Community Relocation Initiative opportunity.

The Unit received funding from COP and CIP to provide training in the Children's Long Term Care Functional Screen. This eligibility determination was implemented immediately, so that any child applying for disability services is screened by a certified screener, establishing if they are eligible to be placed on the waiting list. Nineteen children with disabilities received funding for services from the Family Support Program, Children's Waiver (CLTS), and Community Integration Program (CIP 1B). The Birth to Three Program averaged 15 children who received special instruction, therapy, and service coordination.

An expanded Day Services Program, located in the Work Activity Center, began to take shape in 2005. The previous program was experiencing problems with an increasing senior citizen population along with severe developmental disabilities, whose very challenging behaviors compromised the primarily vocational setting. With those obstacles taken into consideration, LTS unit staff began redesigning the present program into one to provide a variety of social, recreational, vocational, and daily living services to adults who need help to function as independently as possible within the home and in the community. The outcome was to maintain quality of life with dignity, improve physical functioning, assist in and maintain daily living skills, develop friendships and interests, and increase involvement in the community. Activities such as bingo, bowling, exercise, crafts, community outings, special events parties, etc. were planned around a monthly calendar and implemented into a day services program. During 2005, an average of twelve clients daily attended the Adams County Adult Day Services Program. The Practical Cents Resale store also provided vocational services to people with developmental disabilities and mental illness. The store provides vocational training to thirty clients, whose average attendance is four days per week.

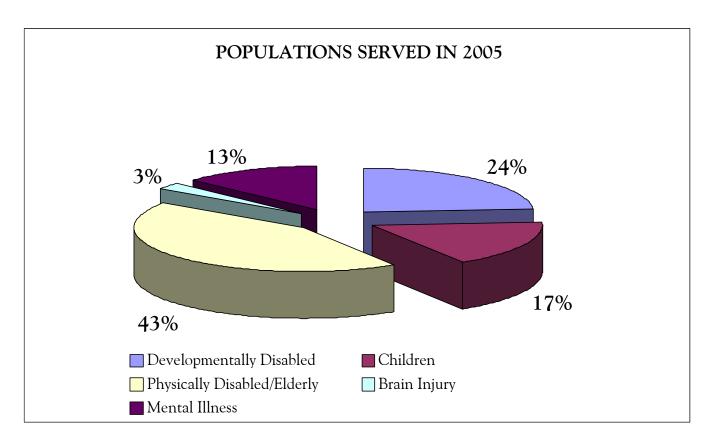
2005 LONG TERM SUPPORT SERVICES - STATISTICAL SUMMARY

During 2005, the LTS unit conducted nine guardianships, eight protective placements, and 36 annual "Watts" reviews. We certified three new Adult Family Homes and recertified five existing Adult Family Homes. A total

of 33 clients resided in AFHs and 12 in CBRFs over the past year. Ten CBRF preadmission screenings were completed by Case Managers: these screenings are required for anyone who might request public funding in the future) Representative payee services were provided to 60 clients.

Staffing for the Long Term Support Services Unit consisted of 18 employees in 2005. (Unit Manager, Clerk Typist, 6 Case Managers, a Children Services Coordinator, PCW Registered Nurse, 3 Support Specialists, 2 Case Workers, Job Coach and 2 Bus Drivers.) Gemini Employee Leasing also provided 34 full and part-time employees (Liaison Supervisor, two part-time bus drivers, 24 full /part-time PCW workers, 3 part-time Supportive Home Care Workers, a Residential Manager, and 3 Thrift Store staff). Seventy-five percent of the PCW workers are immediate family members, providing personal care to their parent, sibling, or adult child with a disability.

The LTS Unit provided services to approximately 200 clients per month (see chart below). Those services included case management, supportive home care, personal care, lifeline, daily living skills, chore service, vocational services, respite, residential placements, etc. We conducted 27 assessments and wrote 16 case plans for individuals to receive services. At the end of 2005, we had 15 elderly, 36 physically disabled, and 55 developmentally disabled on the waiting list for services.



A satisfaction survey was sent out to all clients receiving services from the Long Term Support Unit. Two hundred surveys were sent and eighty-two responses were returned. Some of the highlights:

- > 97% Are satisfied with where they live.
- ➤ 100% Are satisfied with whom they live with.
- > 98% Are satisfied with the help they receive.
- ➤ 91% Feel their life has improved as a result of the services they receive.
- ➤ 90% Feel their needs are being met.
- > 95% Are satisfied with their service providers.

2006 LONG TERM SUPPORT SERVICES - PROGRAM GOALS

- ➤ Increase personal care program participation.
- ➤ Develop Community Integration slots transferring people out of nursing homes.
- > Secure a new building for the Thrift Store.
- ➤ Increase Children's Waiver services to more children and broader range of target groups.
- ➤ Increase service providers for Birth to Three program.
- Assure that Case Management charting and billing is completed monthly.

AGING SERVICES (Carol Johnson, Aging Director)

The purpose/goal of the Aging Unit is to be a spokesperson for the interests and concerns of any Adams County resident, age 60 and older, as well as to initiate, coordinate, and administer programs that help older adults remain active, contributing citizens of this community.

This annual report shall give you a general, all around, overview of what the Aging Unit has accomplished in the year 2005.

If there are any questions or comments after reviewing this report, please contact the Aging Unit, 608-339-4251, as we are here to assist in any way possible.

The Benefit Specialist program was very busy in 2005. This program provided assistance to 660 clients and these services generated \$1,357,162.00 back to the seniors either in the form of cash or in value of benefits. 240 individuals applied for the Wisconsin Homestead Tax Credit. Numerous outreach sessions were done to educate individuals on the new Medicare Part D. These sessions were held at town halls, nutrition sites, community center, and churches just to name a few. Medicare Part D was the hot topic of the year. Because of Medicare Part D we created an excellent partnership with the Social Security Department. This is still ongoing as the enrollment deadline is May 15, 2006.

We have an individual who volunteered on Saturdays to do seniors' Income Taxes. She assisted 180 individuals with this service.

The Elder Abuse program is a successful program. The department was able to assist 62 individuals. We had three individuals who needed to be taken out of their homes and placed in some type of assisted living on a temporary basis until some planning could be done. Happy to report they are all well and safe at this time.

The partnership the unit has with Moundview Memorial Hospital has once again been a huge success. The senior population received services such as diabetic screening, cholesterol screening, informational and educational sessions just to name a few, with open arms. This is an excellent means to prevent and educate on health and wellness issues. This is done at all three sites every month. One of the successful services which is greatly used is the toenail clinic.

The volunteer drivers for the medical transportation traveled a total of 61,891 miles using 2,436.50 hours to transport the seniors to their medical appointments. This also is a service that is constantly utilized.

The unit has seen a sharp increase in the individuals participating in the nutrition program. We served a total of 41,765 meals in Adams County with the nutrition program: 61% from Adams site, 27% from Easton site, and 12% from Big Flats site. The total donations received were \$74,973.77, with 64% from Adams site, 25% from Easton site, and 11% from Big Flats site.

The first annual pig roast was a huge success, serving approximately 229 individuals at the Community Center and delivered approximately 100 meals to the homebound. Staff was all tired but the seniors and the community enjoyed it.

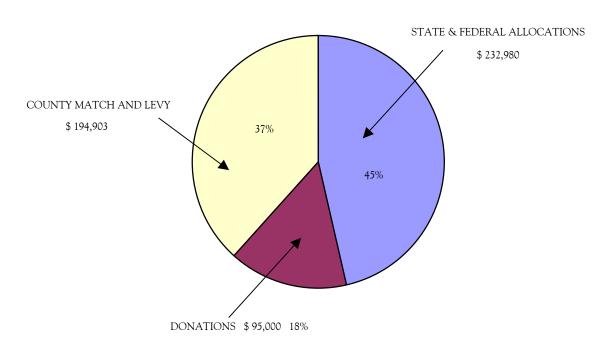
We used 717.5 hours for individuals that volunteered their time and talents to coordinate activities such as cards, bingo, crafts etc. We used 4,128 hours for individuals that volunteered with the meal in one form or another. These volunteer hours are needed to receive the grants from the State and Federal Government.

The Aging Unit provided services to 104 individuals under the Alzheimer's or Family Caregiver grant.

We developed new partnerships with Faith in Action, Memory Diagnostic Clinic and Hospice. These partners shall enhance the services offered by the Aging Unit.

2005 AGING UNIT'S REVENUES

TOTAL 2005 BUDGET \$ 507,300



2006 AGING UNIT GOALS

- ➤ With additional money from the Department of Transportation, the Aging Unit will expand the availability of transportation to needed services by providing transportation for the elderly to the Food Pantry.
- ➤ Continue the education and training with the State of the national, web-based information and referral system.
- Continue the education and training with the State on the web-based state reporting system.

YOUTH SERVICES (Mandy Stanley, Manager)

The Adams County Health and Human Services Youth Services Unit provides services to children and families involved with abuse and neglect issues, juvenile delinquency, truancy, and uncontrollability. This includes children who are placed in alternate care settings. Both Federal and State Law mandate services to these populations. The Youth Services Unit consists of 1 Unit Manager, 4 Social Workers, 1 Foster Care Coordinator, and 1 Family Based Worker.

In 2005 the Youth Services Unit averaged service to 78 families and 106 children per month. Services included investigation of abuse/neglect reports, safety services, case management, juvenile court intake, court work, termination of parental rights, juvenile supervision, out of home placements, permanency planning, independent living skills, foster home licensure, kinship care, home studies, information and referral, voluntary family based services, coordinated service teams, and parenting classes. Additionally, staff members attend various community meetings and speak to community organizations on a variety of topics effecting children and families.

17% 17% 17% CHIPS JIPS Delinquents

Youth Services Clientele

□ CHIPS: Child(ren) in need of protection and/or services refers to ongoing case management with children who have been victims of abuse, neglect or require special treatment or care which the parent(s) cannot provide.

38%

- JIPS: Juveniles in need of protection or services refers to truant or uncontrollable youth or youth under age 10 who have committed a delinquent act.
- Delinquents: Youth, age 10 to 17 who are referred to the agency for the commission of a delinquent act or acts (crime).
- Child welfare and voluntary services: Families assigned to the family based worker and coordinated service teams.
- Investigations: Assessment of reports of alleged child abuse or neglect. The agency must respond to screened in reports within 5 working days and has a maximum of 60 days to complete the investigation.

22%

■ Child Welfare/Voluntary

■ Investigations

Alternate care consists of any setting in which the child does not reside with a parent or legal guardian. These settings can include relative care, kinship care, county foster care, treatment foster care, group care, residential care, or corrections. In 2005 Adams County averaged 23 children in kinship care and 15 children in other alternate care settings.

During the year, the youth services unit became in full compliance with Federal and State timelines for the permanency of children in out of home care by processing a 6-year backlog of termination of parental rights cases. Our unit also wrote for and received an additional \$19,269 in Youth Aids funding.

In 2005, the department received funds to initiate a Coordinated Service Teams program, which involves a number of units within the Health & Human Services Department, local school district staff, law enforcement, community agencies, faith-based groups, and others assembled as a team to wrap a comprehensive set of services around children and adolescents involved in a number of service delivery systems. The goal of this program is to maximize cooperation and coordination of services across traditional agency and professional boundaries in an effort to provide the most effective services for children and their families.

2006 YOUTH SERVICES - PROGRAM GOALS

- ➤ Consider feasibility of specialization of caseloads.
- > Search for additional resources/services to families, especially for preventative measures.
- ➤ Develop a coordinated response to investigation of child abuse and neglect reports.
- Compliance with all standards in accordance with the State Program Enhancement Plan (PEP).

PUBLIC HEALTH (Linda McFarlin, R.N., M.A., Health Officer)

2005 PUBLIC HEALTH ACCOMPLISHMENTS

140 Review In September Public Health underwent their five-year review by the Wisconsin Division of Public Health. Our Public Health Department had no deficiencies and was granted a Level II status. Level II is essentially the highest level that a small health department can achieve. This status also allows public health to receive a higher level of funding through state and federal grants.

<u>Avian Influenza Preparation</u> Public Health established all of the policies and procedures needed for mass clinics should there be an influenza pandemic. This will allow for the practice tabletop and functional exercises to be performed with all of our community partners in 2006. As a part of this process the Sheriff's Department has agreed that we may utilize deputies of the Sheriff's Department to enforce quarantine requirements that may become part of the process in the event of an influenza pandemic.

<u>Blue-green algae</u> Blue-green algae elevated levels became an issue for us in the summer of 2005 on both Lake Petenwell and Castle Rock Lakes. The algae levels reached toxic levels for humans and animals and warnings were posted on the beaches and boat landings of these two lakes. These beaches will be closely monitored during the warm weather months of 2006.

<u>Mini-agent of the state</u> The three county environmental consortium of Adams, Juneau, and Sauk Health Departments signed a contract with the State of Wisconsin to provide a portion of the inspections to hotels, restaurants, campgrounds, etc. This has been very successful and the state is pleased with our performance. This will probably lead to local health departments providing more of these services in the future.

SERVICES PROVIDED IN 2005

General Public Health

- Health promotion and prevention education for the public, schools, Headstart program and daycare.
- Health Needs Assessment for Adams County due again in 2008

■ Adams County Tobacco Free Coalition – 11 tobacco objectives goals were reached.

Communicable Diseases

- Communicable Disease investigation 69 cases 89 investigations
- Sexually Transmitted Disease investigation 29 cases
- TB investigation < 5
- TB medication program 4
- TB testing 98
- AIDS/HIV partner notification − <5
- HIV counseling and testing of partners < 5
- HIV testing of partners < 5
- Rabies control: Animal bite investigation 74
- Blood Borne Pathogen program for county, municipal and school personnel 250
- Water testing for bacteria See environmental
- Head lice consultation daily task
- Epidemiology daily task

<u>Immunizations</u>

- Children's immunizations 321
- Adult Tetanus immunizations 70
- Hepatitis B shots for county, municipalities and schools − 50
- Influenza immunizations 700
- Pneumonia immunizations 30
- Reminder system for children's immunizations varies per month.

Maternal Child Health

- HealthCheck Well Child exams 55 children
- Prenatal and postpartum visits 34 families
- New baby visits 34 families
- Water testing for bacteria, nitrates and fluoride = See environmental
- WIC (Wisconsin Infants and Children's program) 1205 monthly participation in Adams & Juneau County. Financial impact of WIC to local grocers is \$469,737.
- Lead testing for children − 221
- Chair of Adams County Maternal Child Health Task Force 2 meetings
- Fluoride supplements for children 9 children received dental varnish, 88 children received supplements and 50 children received dental sealants.

School Nursing

- Adams-Friendship School District full time School year 2004-05 1,481 health concerns were addressed.
- Consultation to Head Start Program and Children's day care centers advisory committee and in-services.

Environmental

- Human health hazard investigations 578 contacts
- DNR air quality program − 15
- Water quality testing 222
- Air quality testing 41
- Asbestos inspections − 13
- Tattoo and Body Piercing establishment licensing 2 establishments
- Lead hazard/lead poisoning investigation and consultation 12

- Radon testing and consultation
- Transient non-community water program 153 establishments
- Limited agent to state 44 establishments

Emergency Government

- Preparation, policies, and education for any type of community disaster
- Member of Local Emergency Planning Committee

Three-County Public Health Consortium: Adams/Juneau/Sauk

- Environmental Health Program See environmental
- Well Woman Program 143 Adams County Women were served
- Dental Health Programs See Maternal Child Health
- Wisconsin Dells foreign workers special project No special projects in 2005

Five-County Public Health Consortium: Adams/Juneau/Sauk/Columbia & Marquette

- Bio-terrorism Preparedness and Education Program
- Bio-terrorism Policy and Prevention program

Total Contacts with Adams County residents were 19,953.

2006 PUBLIC HEALTH GOALS

- Complete an Incident Command Structure for an avian flu pandemic by March 2006.
- Conduct flu pandemic exercises with all partners by August 2006.
- ➤ Obtain signed Memoranda of Understanding with the pharmacy, school, and municipal buildings by 31 December 2006.
- Maintain all other public health programs at their current level.

CLINICAL SERVICES

OUTPATIENT MENTAL HEALTH & SUBSTANCE ABUSE CLINICS

The Mental Health and Substance Abuse Clinic provides a full range of mental health and alcohol and other drug abuse (AODA) services. The Clinic is staffed by two Mental Health Therapists (1.2 full-time equivalents), one Independent Clinical Social Worker, one Mental Health/AODA Counselor, and one Alcohol and Drug Counselor (0.8 full-time equivalent). In addition, psychiatric, psychological, and nursing (medication monitoring) services are available through consultants retained by the Department. The outpatient programs are certified by the State of Wisconsin, and services are reimbursable through Medicare, Medicaid, and many Health Maintenance Organizations and other insurance carriers. The outpatient mental health and alcohol and other drug programs remain certified under Chapters HSS 61.91 (mental health) and HSS 75 (alcohol and other drugs).

For those individuals without insurance coverage, most fees are based on the ability to pay, as determined by the application of a (state-mandated) sliding fee scale. This fee schedule does not apply in the case of court-ordered assessments and services in the areas of domestic violence (perpetrators), anger management, operating a motor vehicle while intoxicated, consumption of alcohol by minors, and when the Court determines or suspects that the use of alcohol or other drugs has contributed to the commission of a crime.

During 2005, the mental health clinic provided 2,091 hours of individual psychotherapeutic services and 151 hours of family therapy to a total of 565 clients. Of these clients, approximately 47.2% were men, and 97.2% were Caucasian. During the year, 198 new clients began to receive mental health services, and 155 completed (or withdrew from) their treatment. The mental health clinicians had a mean caseload throughout the year of

90.0 clients each (per full-time equivalent). In addition, on average, another 10.8 individuals per month were seen for one-time "interventions", and either prior to receiving ongoing therapeutic services or as a diversion from long-term treatment. The number of referrals to the Domestic Abuse Counseling and Education (DACE) program remained consistent, with 22 people receiving assessments, and 2.5 hours of individual and 262 hours of group treatment provided during the year. Appointments canceled or not kept averaged approximately 13 hours of total staff time per week. Case Management and community-based support were provided throughout the year to 36 clients, with an average monthly caseload of approximately 27.

Alcohol and other drug abuse counseling was provided to 357 clients throughout the year; the caseload for the AODA Counselor at the end of 2005 was 47. Of these clients, 63.8% were men, and 96.7% were Caucasian. In 2005, a total of 121 individuals initiated treatment, and 136 clients completed or withdrew from treatment. One-time "interventions" were provided for approximately 9.6 hours per month on average. In addition to ongoing counseling, a number of alcohol- or drug-related assessments were conducted, on referral from the Circuit Court of Adams County. A total of 261 assessments resulted from conviction for Operating While Intoxicated. Another 35 adults and 6 juveniles were referred by the Court for assessment as a corollary to other legal issues. Appointments canceled or not kept averaged approximately 4.7 hours per week. In total, 488.5 hours of individual and 199.5 hours of group alcohol and other drug abuse services were provided during the year. Case Management and community-based support were provided throughout the year to 16 clients, with an average monthly caseload of approximately 15.

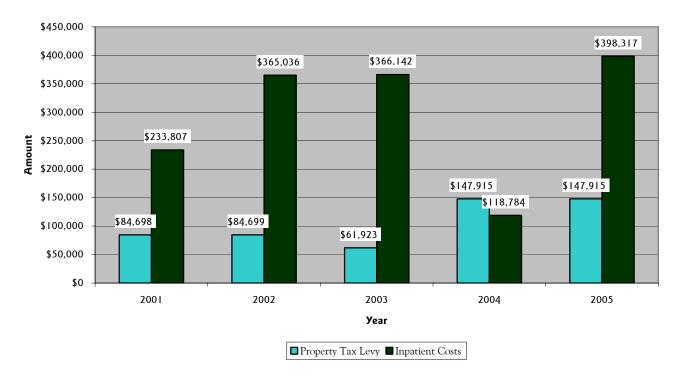
A total of 258 clients were seen by the contractual psychiatrist during the course of the year (for a total of 373.5 hours). His caseload at the end of 2005 was 256 clients. Of these clients, 49.2% were male. A total of 75 clients initiated psychiatric treatment during the year, and 55 clients ceased treatment. Due to staff shortages over the course of the year, the consulting psychologist was asked to provide direct psychotherapeutic services in addition to her ongoing assessment, testing, and clinical supervision functions. She carried a caseload of approximately 5, and completed 5 comprehensive psychological evaluations and 23 batteries of psychological tests, in addition to providing 217 hours of staff clinical supervision. The Registered Nurse continued to come to the Department on a weekly basis (under the supervision of the psychiatrist) to dispense and monitor medication for 28 clients, representing a total of 162.25 billable hours of direct service for the year.

In 2005, the Department was certified to provide (and receive insurance reimbursement for) telehealth services, where clients were seen for medication checks through the use of video cameras on site and at the office of the consulting psychiatrist. This service was initiated in order to increase the amount of psychiatrist time available to Adams County, as well as to provide a more cost-efficient service delivery system. The use of telehealth allowed the Department to provide two additional days of consultations per month, and reduced the waiting time for appointments from in excess of three months to approximately one month.

INPATIENT TREATMENT

The Department, as required under Chapter 51 (Wisconsin Statutes), also obtained and funded inpatient psychiatric, detoxification, and halfway house treatment for a total 83 County residents. Of these individuals, 60 were served in one of the County's contracted inpatient psychiatric facilities (following emergency detention under §51.15, Wisconsin Statutes); the mean length of stay in those environments was 9.2 days. Two individuals with mental illness resided in adult family homes or CBRFs for most of the year. A total of 23 individuals were taken into custody for detoxification (under §51.45, Wisconsin Statutes). This group was served in either area hospitals or in inpatient psychiatric facilities; the mean length of stay for inpatient detoxification was 1.7 days. Finally, the Department placed 2 individuals in halfway houses for AODA recovery, for a total of 60 days (representing a mean of 30 days).

Tax Levy and Inpatient Costs by Year



The chart above illustrates the relationship between inpatient hospitalization costs annually and the total property tax levy (allocated over the five year period totally to inpatient costs).

CRISIS INTERVENTION

The Department, as is required of all Counties, must make provision for trained personnel to be available at all times for crisis intervention and emergency psychological services. In Adams County, this responsibility is shared by the Mental Health Professionals employed by the Department (Counselors, Therapists, Social Workers, and two Bachelor's level Case Managers). During the year, a total of 302 requests were received. Of these calls, 63.6% were for mental health issues (crises or requests for information and/or referrals), 26.5% were alcohol or drug related, and 9.9% concerned requests for protective services (guardianships, individuals allegedly unable to care for themselves, etc.) or were made by clients receiving protective services. The Department remained certified under Chapter HFS 34, Wisconsin Administrative Code, Mental Health Emergency Care Program (Subchapter II) to provide basic emergency services (not eligible under Subchapter III for Medical Assistance or other third party reimbursement).

2006 CLINICAL SERVICES - PROGRAM GOALS

- Continue to expand peer-to-peer support opportunities for individuals with severe emotional disorders through participation and sponsorship of activities at the Friendship Connection.
- ➤ Continue to increase the proportion of clients completing and benefiting from outpatient substance abuse services.
- > Continue outreach and prevention efforts to reach children and adolescents in need of outpatient mental health and/or substance abuse services.
- Continue to increase the proportion of clients reporting satisfaction with the services they receive.

ECONOMIC SUPPORT (Sandra Wormet, Manager)

Through state contract the Economic Support Unit is responsible to determine the initial eligibility and the periodical renewal of eligibility through case management for the administration of numerous federal, state, and county Income Maintenance Programs. Listing some of the most common programs:

FoodShare
Medical Assistance / Badger Care
Medical Assistance Transportation
Wisconsin Shares Child Care
General Relief
Fraud/Program Integrity
Caretaker Supplement
Wisconsin Home Energy Assistance Program
Wisconsin Funeral and Cemetery Aids Program
Wisconsin Works

Anyone has the right to apply for all programs and be treated with respect. The Economic Support's vision is to create an atmosphere in which service delivery is effective, seamless, and need fulfilling where the customers are served in a way which enhances their lifestyle so that they may see satisfactory results now and later in life. We have a commitment to human dignity based on respect, honesty and integrity through actions for improving social conditions.

In the current economic climate it is important to continually explore creative approaches to efficient delivery of the Economic Support Services. With this in mind we have worked toward no boundary lines between our county ES Unit and bordering counties in the PAW (Portage-Adams-Wood County W-2) Consortium. With this collaborative approach we are leading to the providing of better customer service due to the geographical layout of our county. When needed, appointments were offered to the working clients during noon hour, phone reviews were scheduled, and mail-in-reviews were completed on some cases. We continued to network with other community-based organizations such as UW Extension, Central Wisconsin Community Action Council, Family Planning, Adams County Sheriff's Department, Habitat for Humanity, Salvation Army, Catholic Charities, Hope House, St. Vincent DePaul, Adams-Friendship Area Schools, and Probation and Parole. Often we are able to pool resources with other organizations to help an individual or family with some form of assistance when our own resources are not substantial enough or the need does not fit the criteria for our programs.

As the caseloads continue to grow each year, the Economic Support Unit determined eligibility and processed 1,649 new Food Share and Medical Assistance applications in 2005, and 3,692 review applications. Economic Support Specialists case managed 1,734 unduplicated cases serving 3,680 participants. The total Food Share Benefits dispersed to Adams County recipients totaled \$1,399,271, issued through the state's Client Assistance for Re-employment and Economic Support (CARES).

FoodShare helps individuals and families with little or no income to buy food. FoodShare benefits come on a debit card known as the QUEST Card. This allows clients to access their benefits through swipe card point-of-sale terminals at stores taking part in FoodShare Wisconsin. Transitional FoodShare extends the FoodShare benefits for five months to households leaving Wisconsin Works providing a safety net to families who lose their Wisconsin Works cash assistance.

Medical Assistance is the state/federal program that helps low income people pay their medical bills. A person is eligible if she/he meets all non-financial and financial requirements. BadgerCare provides access to health care for uninsured, low-income families with children who do not have access to health insurance and with income up to 185% of the FPL, who are not eligible for MA. Some families pay a premium for coverage. The MA Transportation Program's purpose is to assure an individual or family access to medical services if the individual or family is eligible. Coordination between a volunteer driver and the MA Recipient is done through the Transportation Coordinator, 6,007 trips were authorized to required medical services in 2005.

Families are eligible for Child Care subsidies if they are low-income and requiring Child Care to obtain or retain employment, a teen parent in school, or working families needing training to improve employment status. Economic Support Specialists determined eligibility and authorized Child Care for an average of 50 families per month expending \$221,154 to Certified and Licensed Child Care Providers.

Each Agency administering public assistance programs is responsible for providing program integrity for the programs administered. Economic Support conducts fraud prevention and fraud administrative functions to comply with the State/County Contract. In 2005, 28 Front End Verification cases and 2 Fraud cases were handled.

Caretaker Supplement is an additional amount added to the monthly State SSI cash benefit of a recipient who is the custodial parent of one or more qualified dependent children. Eligibility determinations are made by Economic Support Specialists.

General Relief Program, the county funded program, is flexible with minimal financial assistance to meet basic needs on a temporary basis for individuals whose needs cannot be met in any other way. This program can also be referred to as the Interim Assistance Program as it can provide basics for an indigent individual who is in the process of applying for SSI or SSDI. Unduplicated cases receiving basic and medical benefits for 2005 totaled 36.

The Sharing Program was something new for 2005. Funding for the program came from grocery receipts collected from employees and turned into the IGA for their 1% of the total receipts Share Program. This is a very limited account set up to help individuals with small needs such as haircuts, personal items, laundry soap, quarters for the Laundromat, and etc., a small boost when needed in a crisis situation, when no other resource is available.

All Economic Support Staff completed their CARES Worker Web on line training. Staff was way ahead of their anticipated goals in transitioning cases from the mainframe to the worker web. We received praise from the state for being the only county fully transitioned prior to the state doing the mandatory automatic transition.

Wisconsin Home Energy Assistance Program (WHEAP) administers the federally funded LIHEAP and Public Benefits Energy Assistance Program. The program assists eligible individuals and families with heating and electric, can include emergency fuel assistance, counseling for energy conservation and budgets, emergency furnace repair and replacement. Although the county is the coordinator of the program, administration of the program is contracted out to CWCAC. WHEAP applications taken in 2005 totaled 2,066 with \$631,895 in energy assistance paid to vendors on behalf of the eligible applicants.

The PAW Consortium won the Right of First Selection for the 2006-2007 Contract Period in administering the W-2 Program. The PAW W-2 Consortium built in much efficiency to run a cost effective program and yet removed some bureaucratic barriers for the benefit of the participants. County lines were eliminated so that par-

ticipants could receive services from whichever Job Center they lived closest to. The state has used our consortium as a model for other counties forming consortiums. The PAW (Portage, Adams and Wood Counties) W-2 Consortium has received \$637,985 less to spend on services in 2006 and 2007. Immediate workforce attachment is a goal of the W-2 program. Our benefit allocation (W-2 cash payments) received a minimal reduction but without sufficient services it is reasonable to assume the benefit caseload will only increase.

An additional \$1,998 was received for our county through the Wisconsin Employment Transportation Assistance Program (WETAP) grant application submitted for additional funding for the Job Access Loan Program. This is a two-year grant. The seven county Consortium consists of Adams, Columbia, Dodge, Green Lake, Marquette, Sauk, and Waushara Counties.

Several meetings were held to plan the 2005 Job Fair at the High School in April. The Job Fair attracted 500 job seekers who registered and met with the 28 employers who participated. Our Job Center has access to a "Resource Room" for the Employment and Training Services offered by WIA's partner programs and organizations for the general public. With funding cuts the Job Center was only able to offer services three days a week. In 2005 there was a total of 1,127 individuals using the touch-screen JobNets.

2006 ECONOMIC SUPPORT SERVICES GOALS

- > Continue to serve eligible Adams County Residents with Economic Support Services
- Continue our 0 Error Rate in Food Share issuance.
- Combine the Customer Satisfaction Surveys of the various Units into one Survey for the Agency.
- ➤ Set up the Electronic Case File Structure for the Economic Support Unit to scan open case folders and sub folders into the State System.

FINANCIAL REPORT

Wendy Pierce, Manager

The Financial Reports that follows summarize Department resources and expenditures. Data is presented in numeric format and in bar graphs. Total expenditures for 2005 were \$7,578,802.57; total revenues, including County tax levy, were \$7,432,442.62. Some adjustments to these figures are expected as a result of reconciliation of the State/County contract and the County audit.

2005 REVENUES & EXPENDITURES

(changes expected upon final audit)

REVENUES	ACTUAL	BUDGET	VARIANCE
State & Federal Aid	\$4,037,398.53	\$3,982,911.00	\$54,487.53
Other Resources	\$1,993,440.28	\$2,094,766.00	-\$101,325.72
County Tax Levy	\$1,401,603.81	\$1,411,706.00	-\$10,102.19
**Total Revenue	\$7,432,442.62	\$7,489,383.00	-\$56,940.38

^{**}Revenue does not reflect \$143,284.00 expected as a result of annual State (Medicaid) Waiver reconciliation.

EXPENDITURES	ACTUAL	BUDGET	VARIANCE
Public Health	\$339,041.27	\$314,710.00	-\$24,331.27°
Prenatal Care	\$12,991.29	\$13,000.00	\$8.71
PH Grant Services	\$116,132.64	\$83,548.00	-\$32,584.64 [®]
Outpatient Clinic	\$1,183,461.65	\$1,289,290.00	\$105,828.35
Hospitalizations	\$398,316.95	\$243,120.00	-\$155,196.95
LTS/Waiver Services	\$2,748,659.50	\$2,777,862.20	\$29,202.70
Social Services	\$452,675.46	\$460,409.00	\$7,733.54
Income Maintenance	\$402,552.55	\$382,048.00	-\$20,504.55
W-2 – Child Care	\$12,984.89	\$42,250.00	\$29,265.11
Energy Assistance	\$85,416.57	\$180,207.00	\$94,790.43
Fraud Investigations	\$12,000.00	\$13,000.00	\$1,000.00
Funeral/Cemetery	\$34,937.19	\$30,551.00	-\$4,386.19
General Assistance	\$42,616.97	\$40,000.00	-\$2,616.97
MA Transportation	\$175,693.28	\$88,300.00	-\$87,393.28°
s. 85.21 Transportation	\$66,297.91	\$60,878.80	-\$5,419.11
Children & Family Services	\$260,770.78	\$277,394.00	\$16,623.22
Title IV-E Services	\$122,193.94	\$118,844.00	-\$3,349.94 [®]
Kinship Services	\$72,695.34	\$86,066.00	\$13,370.66
Child Care Institutions	\$373,495.43	\$225,000.00	-\$148,495.43
Foster Care	\$111,749.70	\$243,150.00	\$131,400.30
Independent Living	\$22,806.01	\$24,101.00	\$1,294.99
Aging	\$222,213.76	\$227,491.00	\$5,277.24
Alzheimer Services	\$10,861.00	\$8,133.00	-\$2,728.00
Elder Abuse	\$11,999.33	\$10,288.00	-\$1,711.33

EXPENDITURES	ACTUAL	BUDGET	VARIANCE
Benefit Specialist	\$40,537.44	\$31,037.00	-\$9,500.44 [®]
Nutrition Sites	\$148,453.59	\$134,691.00	-\$13,762.59
Homebound Services	\$74,797.08	\$67,205.00	-\$7,592.08
Family Care Services	\$19,745.05	\$14,162.00	-\$5,583.05
Health & Wellness Services	\$2,706.00	\$2,647.00	-\$59.00
*Total Expenditure	\$7,578,802.57	\$7,489,383.00	-\$89,419.57

^{*}Budget does not reflect increased expenditures due to changes in State/County Contract revenues.

NOTES: ① Matching Revenue also exceeded budget projection.

- ② This service is sum sufficient. State reimburses 100% of expenses reported.
- ③ Additional State funds received to assist Medicare Part D startup.

SUMMARY	ACTUAL	OUT OF HOME CARE	VARIANCE
Revenue	\$7,432,442.62	MH/AODA Hospitalization	-\$155,196.95
Expenditures	\$7,578,802.57	Child Care Institutions	-\$148,495.43
**LTS Reconciliation	\$143,284.00	Foster Care	\$131,400.30
Net Deficit	-\$3,075.95	Total Out of Home Care Costs	-\$172,292.08

^{**}The Revenue does not reflect \$143,284.00 expected from the State Waiver reconciliation.

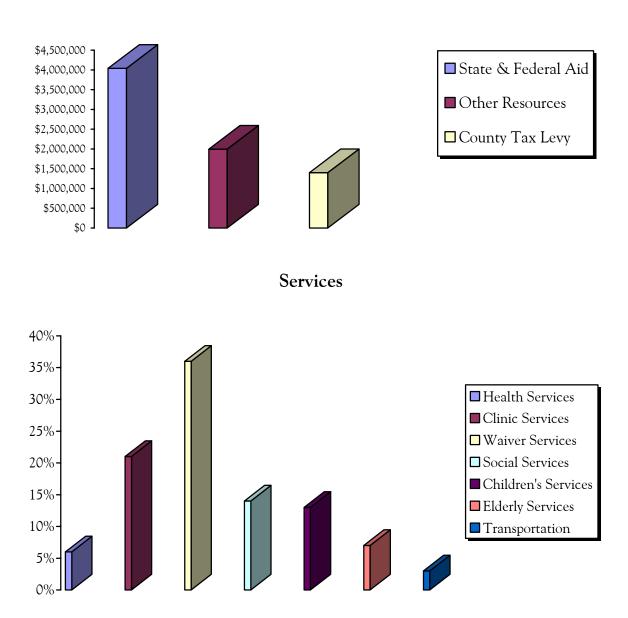
The actual costs less revenue for Health & Human Services show a \$3,075.95 deficit.

Emergency detention (crisis and court-ordered mental health/AODA hospitalizations) costs went over budget, as did (court-ordered) care in Juvenile Corrections facilities, while the Foster Care costs came in under. This left a deficit of \$172,292.08 in out of home care. All but 2% of these costs (Net Deficit, above) was covered within the budget.

DEDICATED ACCOUNTS	&	NON-LAPSING FUNDS
Consolidation Expense		\$5,714.48
Building Improvement		\$158,501.00
Restitution		\$1,928.75
COP Risk Reserve		\$44,169.71
Senior Home Repair		\$7,229.00

THRIFT STORE – PRACTICAL CENTS	EXPENDITURES
Salaries	\$138,000.27
Client Payroll	\$50,361.42
Client Payroll Taxes	\$4,930.12
Rent/Lease	\$17,000.00
Operating Expenses	\$27,167.68
Total Direct Expenses 2005	\$237,459.49
	REVENUES
Sales	\$159,714.05
LTS Waiver-reimbursed Services	\$117,317.35
Total Revenue 2005	\$277,031.40
Thrift Store Net Profit 2005	\$39,571.91

Revenue



2006 FISCAL & SUPPORT GOALS

- ➤ Incorporate the intake workers, relieving reception staff from responsibilities better handled by professionals.
- Cross-train the four receptionists fully so that they can fill in any post at either front office.
- Look into job training in phone etiquette, dealing with difficult customers, and office professionalism.
- > Streamline the voucher system, creating a procedure that will assure efficiency, create better tracking of the budget, and help the reporting processes.
- Streamline the deposit system, maintaining one routing system for all the money taken in by the department, assuring better tracking and accurate coding, which will in turn improve budget maintenance.
- Train more staff in data entry for the voucher system

HEALTH & HUMAN SERVICES DEPARTMENT STAFF ROSTER (December 2005)

Aging Services Staff

Carol Johnson Aging Unit Director Rita Riedel **Nutrition Director** Jill Helgeson Benefit Specialist Mary Deane Benefit Specialist Diane Schmidt Cook - Adams Site Peggy Hargett Senior Center Aide Chris Lange Cook/Site Manager JoEllen Foster Cook/Site Manager

Gene Raatz Elderly Transportation Worker

Clinical Services Staff

Tom Charles, Ph.D., I.C.S.W.

Lee Ann Bock, M.A.

Linda Noble, CADC III

Mental Health Therapist

Alcohol & Drug Counselor

Shereen LeRoy, B.S. Case Manager

Jackie Schwingel Clinical Records Technician

Julie Paepke Support Specialist

Vacant Mental Health/AODA Counselor

Vacant Clinical Services Manager

Consultants/Contracted Staff

Randy Cullen, M.D. Psychiatrist/Medical Director

Kaye Eckert, Psy.D. Psychologist
Jan Cole, R.N. Registered Nurse

Claudia Manning, M.S.E. Mental Health Therapist

Economic Support Services Staff

Sandra K. Wormet
Linda S. Gilman
Economic Support Services/Wisconsin Works Program Manager
Economic Support Specialist – Family FoodShare, MA, Child Care
Rachel L. Babcock
Economic Support Specialist – Family FoodShare, MA, Child Care
Economic Support Specialist – Family FoodShare, MA, Child Care

Patricia A. Zant Economic Support Specialist – Elderly, Blind, Disabled, N.Home, FS & MA
David L. Sabin Economic Support Specialist – General Relief, Prescreens for various services

Doris M. Gullickson Transportation Coordinator

Public Health Staff

Linda L. McFarlin, R.N., M.A.

Lisa Krizan, R.N., B.S.N.

Lorie Tomsyck, R.N.

Christine Saloun, R.N., B.S.N.

Debra Dunn-Ryan, L.P.N.

Kathleen Challoner

Health Officer

Public Health Nurse

Public Health Nurse

School Nursing

Secretary/Bookkeeper

Carrie Allard WIC/Public Health Technician

Consultants/Contracted Staff

Joe Lally Registered Sanitarian

Kathy Nelson, R.D. WIC

Jodie Fields, R.N.

Jennifer Froh, Health Educator
Kathleen Mintari, R.N.

Renee Bertotto, R.D.H.

Audra Wilhorn

Well Woman
Well Woman
Tobacco Control
Dental Sealants
Dental Sealants

Long Term Support Services Staff

Diane F. Osborn, B.S. Long Term Support Services Manager

Marcy Johns, B.S.S.W. Case Manager Carolyn Pierre, B.A. Case Manager Jill Weber, B.S. Case Manager Social Worker Beverly Morrow, C.S.W. Judith Kaye, C.S.W. Social Worker Lisa Etheridge, B.A. Case Manager Connie Rogney, B.S. Case Manager Jill Zaucha, B.S. Case Manager

Candy Schraufnagel, B.A. Children's Services Coordinator

Karen Lindner, R.N., M.S. Registered Nurse Vacant Registered Nurse

Tara Kircher, B.S. Long Term Support Generalist

Kristi Breszee Clerk-Typist

Norma Osterloh Training Specialist – Day Services Program
LouAnn Hippe Case Worker – Day Services Program
Norma Cekan Case Worker – Community-Based Support

Roberta Ritchhart Training Specialist — Thrift Store

Betty Meinhardt Job Coach Gary Silka Bus Driver Ed Robinson Bus Driver

Consultants/Contracted Staff

Sherry Manning Thrift Store Manager (Gemini)
Karen Amell Thrift Store Worker (Gemini)
Denise Straka Thrift Store Worker (Gemini)

Leigh Ann Systma Supported Apartment Manager (Gemini)

Jim Letcher Bus Driver (Gemini) Jim Boyle Bus Driver (Gemini)

Youth Services Staff

Mandy Stanley, C.S.W. Youth Services Manager

Erin Schiferl, C.S.W.

Kris Senn, C.S.W.

Emma Williams, C.S.W.

Corey Anfinson, M.S.

Social Worker

Social Worker

Social Worker

Tracy Sipla, M.S.S.W. Foster Care Coordinator
Michele Hyler Family Based Service Aide

Vacant Intake/Access Specialist Vacant Intake/Access Specialist

Support Services Staff

Wendy L. Pierce Fiscal & Support Services Manager

Kathy Williams Clerk/Bookkeeper

Penny Maleski Accounts Receivable/Billing Specialist

Rushell Moyer Clerk/Receptionist
Tammy Pieper Clerk/Receptionist
Deb Roberts Clerk/Receptionist
Renee Julseth Clerk/Receptionist

Eric G. Furtkamp, Ph.D. Director

PURCHASE OF SERVICE CONTRACTS AND LEASES – 2005

Location Service Purchased Vendor Wisconsin Rapids **CBRF** Applewood Homes CBRF Wausau Aspirus (Wausau Hospital) Inpatient MH/AODA Grand Marsh Adult Family Home Bellon Adult Family Home Bertotto RDH, Renee Friendship Dental Sealant Better Days Hillsboro Therapeutic Resources Big Flats Nutrition Site lease Big Flats Town Hall Fond du Lac **AODA Halfway House** Blandine House Boscobel Inpatient MH/AODA Boscobel Area Health Care **Bridges For Youth** Friendship Community Intervention Wisconsin Dells Energy Assistance, Food Pantry Central Wisconsin Community Action Council Child Care Resource And Referral Of Cent. Wis. Wisconsin Rapids Day Care Certification Cole R.N., Jeannette Arkdale Medication Checks Home-Delivered Meals Columbia County Commission On Aging Portage Middleton Treatment Foster Care Community Care Resources Elkhorn Adult Family Home Community Living Arrangements Bancroft Adult Family Home Cozy Acres Adult Family Home Supportive Home Care Watertown Creative Community Living Services Madison **Psychiatry** Cullen M.D., Randy Daney Adult Family Home Arkdale Adult Family Home Dungarvin, Wisconsin Wisconsin Rapids Residential Support Easton Town Hall Easton Nutrition Site lease Nekoosa Eckert Psy.D., Kaye Psychology Adams Fosnow Adult Family Home Adult Family Home Franciscan-Skemp Community Programs LaCrosse MH/AODA Halfway House Fond du Lac **AODA Halfway House** Friends Of Women In Recovery Friendship **Janitorial** Gary's Cleaning Service Gemini Employee Leasing Slinger Various Legal (CHIPS and JIPS) Goerke, Kenneth, Attorney At Law Adams Grossbier Adult Family Home Grand Marsh Adult Family Home Adams Adult Family Home Hams Adult Family Home Adams Adult Family Home Hollyhome Adult Family Home Baraboo Home Instead Senior Care Supportive Home Care Lancaster Supportive Home Care Homeward Bound Homme Youth & Family Programs Wittenberg Child Caring Institution Thrift Store lease Horicon Horicon State Bank Green Bay In-Home Counseling Innovative Counseling Center Madison In-Home Counseling Integrated Development Services, Inc. Adams Adult Family Home Johnson, Flora Adult Family Home Krueger Adult Family Home Adams Adult Family Home Adams Adult Family Home Krusel Adult Family Home

VendorLocationService PurchasedL.E. Phillips, Libertas CenterChippewa FallsInpatient AODA

Leisure Living CBRF Coloma CBRF Liberty Manor CBRF Adams CBRF

Marquette Co. Commission On Aging Montello Home-Delivered Meals Matekel Family Group Home Hillpoint Children's Group Home Mercy Assisted Care Janesville Child Caring Institution

Miller & Miller

Mintari R.N., Kathleen

Moundview Memorial Hospital & Clinics

Friendship

Inpatient & Therapies

Moundview Supportive Home Care Agency Friendship Supportive Home Care/Lifeline

North Central Health Care Facility Wausau Inpatient MH

Northland Community Services Westfield In-Home Psychotherapy Northland Home Health Westfield Supportive Home Care

Northstar Services, Inc. Friendship Day Services

Northwest Passage, Ltd.

Northwoods Youth Camp

Norwood Health Center

Novak Adult Family Home

Frederic

Rhinelander

Marshfield

Inpatient MH

Wisconsin Dells

Adult Family Home

O'Brien & Associates

Oconomowoc Dev. Training Center

PATH (Professional Assn. Of Treatment Homes)

Petrie Adult Family Home

Pinelane Adult Family Home

Holmen

Fraud Investigations

Child Caring Institution

Treatment Foster Care

Adult Family Home

Adult Family Home

Middleton

Adult Family Home

Rake's Adult Family Home
Rawhide Boys Ranch
REM II
Riggs Adult Family Home
New London
Friendship
Necedah
Adult Family Home
Adult Family Home
Adult Family Home

Shutter Adult Family Home
St. Agnes Hospital
St. Clare Hospital (SSM, Inc.)
Adams
Fond du Lac
Inpatient MH/AODA
Baraboo
Inpatient AODA

Tomorrow's Children Waupaca Child Caring Institution
Vandenbergh Adult Family Home Adams Adult Family Home
Von Behren Adult Family Home Richland Center Adult Family Home
Ward, Lori Adult Family Home Friendship Adult Family Home

Waushara County Commission On Aging Wautoma Home-Delivered Meals

Wilhorn, Audra Friendship Dental Sealant

Wisnewski Group Home Mosinee Children's Group Home

Woodgreen Estates Richland Center MH Group Home

Work Plus Madison Supported Employment

HEALTH & HUMAN SERVICES DEPARTMENT TABLE OF FUNCTIONS & PROGRAMS

Health & Human Services Board

Director

PUBLIC HEALTH

Public Health Nursing Communicable Diseases **Immunizations** Maternal Child Health WIC Program School Nursing Environmental Health Well Woman Program Agriculture Advisory Dental Health Foreign Workers Disaster Preparedness Bioterrorism Emerg. Management Tobacco Control Blood borne Pathogen Mini Agent Community Health Needs Assessment County Assurance of Services Disease Surveillance Family Planning Guidance to child. prog. Billing/Data Entry Clinical Records

FISCAL & SUPPORT SERVICES

Reception/Scheduling Clerical Support Office Support Inventory

Accounts Payable
Accounts Receivable
Voucher Preparation
Bookkeeping
Billing
Collections
Supplies
Client Payroll

Data Entry Computer Support Web Page Maintenance

State Service Reporting State Fiscal Reporting Contract Management

AGING & LONG TERM SUPPORT

Senior Center Meal Sites Meals on Wheels Benefit Specialist Elder Abuse Investig. Health & Wellness Family Caregiver Prog. Alzheimer's Caregiver Senior Care Senior Home Repair Volunteer Services Outreach/Call Pal Peer Support Information & Referral Transportation (§85.21) Case Management Community Support Personal Care Program Adult Day Services Thrift Shop Supported Employment Residential Placement AFH Certification Adult Protective Serv. Rep. Payee (Soc. Sec.) Supportive Home Care

CHILDREN & FAMILY SERVICES

Child Protective Services
Juvenile Justice
JIPS/Truancy
Kinship Care
Child Foster Care
Out of Home Placement
Foster Care Licensing
Family Based Services
Coordinated Support
Teams Program

Central Intake

Mental Health Clinic
AODA Clinic
Crisis Services
Inpatient Treatment
Residential Placement
Case Management
Community Support
Psychiatric Services
Psychological Services
Nursing (Medication
Management)

Clinical Records

ECONOMIC SUPPORT/ WISCONSIN WORKS

Income Maintenance Prescreening & Resourcing Eligibility & Monitoring Emergency Assistance Medical Assistance BadgerCare Food Stamps Day Care Wisconsin Works (W-2) WHEAP (contracted) Case Management Medical Assistance BadgerCare Food Stamps Day Care Wisconsin Works (W-2) FS Employment Training **Job Center Partner** General Relief MA-GR Burial Fraud Investigation Third Party Liability Benefit Recovery Emergency Management Rep. Payee (Social Sec.) Transportation (MA) Transportation Coordination