

Minutes of the Combined Health and Human Services Board and Committee Meeting

Thursday, May 15, 2008

Committee Members Present: County Board Supervisors Duane Paulson (Chair), Bill Zaborowski, Janet Brandtjen, Gilbert Yerke, Kathleen Cummings, Jim Jeskewitz **Absent:** Pauline Jaske.

Board Members Present: Citizen Members Dennis Farrell (Chair), JoAnn Weidmann, Dr. Peter Parthum, Mike O'Brien, Flor Gonzalez, County Board Supervisors Duane Paulson, Jim Jeskewitz, Janel Brandtjen. **Absent:** Jim Behrend and Joe Vitale.

Others Present: Chief of Staff Lee Esler, Health and Human Services Director Peter Schuler, HHS Deputy Director Don Maurer, Long Term Care Division Manager Jack Bodien, Adolescent and Family Services Division Manager, Peter Slesar, Intake and Support Services Division Manager Antwayne Robertson, Administrative Services Division Manager Russ Kutz, Senior Financial Analyst Clara Daniels, Mental Health Center Administrator Dr. Michele Cusatis, Employment Services Manager Sue Zastrow, Senior Human Resources Analyst Renee Gage, former county board supervisors Sandy Wolff, Vera Stroud and former Health and Human Services board member Dick Wutt and his wife, Dorothy, and Director of Veterans Services John Margowski.

COMMITTEE AGENDA ITEMS

Executive Committee Report of 5-5-08

Paulson reported that they discussed the Information Management Panel which the Executive Committee took over when it was dissolved. They will review information technology every other month. Mike Biagioli gave an education presentation to the members on county technology issues. They also discussed the new ordinance process for the year. If anyone is interested, they can review the minutes which will be posted on the county's website. Paulson also noted that we have a new county board, a new board year and a new HHS Committee. Introductions followed.

Legislative Update

Paulson stated that the latest update they received was that the water compact was not passed and the budget wasn't passed.

BOARD AGENDA ITEMS

Recognition of Members who have Retired

Schuler presented plaques to Sandy Wolff, Vera Stroud and Dick Wutt and thanked them all for their many years of service. Coffee and cake was served.

Advisory Committee Reports

Farrell stated that he was meeting on May 19th with the County Executive to discuss the future of several advisory committees, namely the Developmentally Disabled Advisory Committee that would hopefully have a number of members become members of the community CMO advisory committees soon to be formed, to advise the CMO's that will be taking over Long Term Care. They also discussed the situation with the Child and Family Services Advisory Committee taking under them the Birth to Three Committee and the Family Support Committee. Farrell also noted that the Health and Human Services Board needs a liaison for the Mental Health Advisory Committee and a

chairperson for the Joint Conference Committee. If anyone is interested in filling in these vacancies, please let Farrell know.

Weidmann noted that the Wisconsin Association of Local Health Departments and Boards (WALHDAB) met this week and talked about emergency preparedness. The State emergency preparedness group has been working on ethics statements, because in an emergency, decisions have to be made promptly regarding how to prioritize and triage.

Yerke arrived at 1:30 p.m.

COMMITTEE AGENDA ITEMS

Review and Accept the 2007 Annual Report of the Veteran's Services Department

John Margowski, Director of Veterans Services, presented the 2007 Annual Report of his Department. Every county has a Veterans Service office established by State Statute. The purpose of that office is to advocate for veterans, dependents and survivors with regard to federal and state veterans benefits and entitlements. Margowski went over the statistics and figures in the report. The VA payments that were made as listed on the first page of the report are actually federal dollars paid to Waukesha County citizens. Margowski stated that nationwide, the Veterans Administration is presently 800,000 cases behind. Margowski also noted that he thinks Congress will move very rapidly this year in some areas to improve the numbers of cases behind. For example, he just saw that a new federal GI bill has passed that will greatly increase educational benefits available from the federal government for veterans. There is also a report that came out of the Senate Veterans Affairs Committee that the assembly will be looking at that tells the VA that their medical rating tables to determine disability is old and archaic and not up to modern medical practices and the VA will be forced to update especially in the area of post traumatic stress disorder. On the second page are payments made by the Wisconsin Department of Veterans Affairs.

MOTION: Cummings made a motion seconded by Jeskewitz to approve the 2007 Annual Report of the Department of Veterans' Services. The motion passed 6-0.

Ordinance 163-O-006: Reauthorize the Use of Secure and Non-Secure Detention Facilities for Short Term Detention

Peter Slesar, Manager of the Adolescent and Family Services Division, spoke briefly about the division and how it's related to the ordinance, and referenced written material that was provided for the board. The Juvenile Center is a place for those children who cannot remain in the home to stay temporarily in non-secure custody which is not a locked setting. They also have Secure Detention which is basically a jail for juveniles. Since 2004, we have had a county ordinance that authorizes the use of the Detention Center as a short term consequence for young people who have violated their court ordered supervision for those young people who were found delinquent. The code accounts for a consequence that say they can be held in secure custody for up to 72 hours without a hearing. The first component is that the offense must be an alleged delinquency (criminal law), secondly if place on electronic monitoring and confined to own home, they can violate that by leaving. The final two areas where this can apply is for someone who is on correctional aftercare (after release from correctional facility and are on aftercare status) similar to parole status for an adult. If the child violates the rules of aftercare he or she can end up in secure detention. The final area is a violation of a type II status which means that if a young person does not follow the program, he or she could end up being placed in corrections for up to 10 days per violation. The population served by this is small, but it addresses the behavior immediately. Since 2004, they have had 18 young people who have been placed under the 72 hour hold, 13 of them were only placed on

it once. The other five of them were placed on it twice and out of those five, 4 out of 5 were correctional aftercare individuals. The reason Slesar is here today is because the present ordinance has a sunset clause of June 30th 2008. This would extend that sunset until 2010. In 2004 it was used once for a total of three days, in 2005 it wasn't used at all, in 2006 it was used 11 times for a total of 30 days; and in 2007 we again used it 11 times for 32 days and to date this year we haven't used it at all. The cost referenced in the fiscal note is based upon the actual juvenile center rate. This is the rate we have because the center is operating 365 days per year and that is a fixed cost. The only real variable cost affected by this ordinance is the meals which run \$1.35 per meal. From 2004 until today, the actual meal costs for those held under this authority cost \$243.75 at today's rate. Staffing patterns are set by statute and are not impacted by this program.

MOTION: Jeskewitz made a motion seconded by Cummings to approve the ordinance.

The cost to have someone sent to Lad Lake is \$280+ per day. The current correctional rate is \$259.00/day and as of July 1st will go up to \$268.00/day which calculates to about \$100,000 per year. We have five in corrections now. We also have 5 pending right now. Slesar stated it is very difficult to predict because all it takes is one serious crime even from an individual who may not have a history with the department. The other dangerous piece is that young people tend to get in trouble together. Three of the five that are pending are friends who were involved in the thefts in the Carroll College area.

Yerke asked if this proposal was originally cleared with Corporation Counsel. Slesar noted that the Juvenile Code Chapter 938 has a provision in it that authorizes this provided the county also authorizes by means of an ordinance.

Esler will be briefing the committee on the roles of the county's boards and commissions. One of the roles of a county board is that when new legislation is passed make sure that the discretion is not abused by the managers and administrators. We are reviewing this as a board and we are looking to make sure it is not being abused and is being exercised as noted in the law. This is to enforce the accountability. Schuler stated that it was the court that asked us to do this. Without these tools, we would have to get them back into court and have a judge order it, which can delay a necessary consequence and its overall effectiveness, which is why this is an important tool. Brandjen asked if we have any parental response regarding the detention. Slesar responded by saying that some parents don't like that we do it and think we are singling out their kid. This is not a substitute for working with the family.

The motion passed 6-0.

Ordinance 163-O-007: Increase Compensation for Psychiatrists

Sue Zastrow and Renee Gage from Human Resources appeared on behalf of this ordinance. They are here today to do a salary adjustment which they normally do at the budget process. However, this year they had a psychiatrist give notice they were leaving, and recruitment has been somewhat difficult. In the process of recruiting, they became aware that our psychiatrist salaries are behind what the market is currently paying. In order to compete with the market they did a salary survey and came forward with a recommendation to change the salary of the psychiatrists. Currently the range for this classification is a 6 step range. What they have done is taken the top two steps of that range and made them the bottom two steps of the new range with four steps added to those. This will enable us to recruit at the lower end of the salary range but also have a place to move after they get on board. The second part of the ordinance is to give the current psychiatrists a one step increase over their current salary. It would place them at steps 2 or 3 of the new range. An

additional item they would like to address is the pay for performance as the psychiatrists are not included in that program and they would like to move them into the pay for performance system which would make them eligible to earn a small one time performance based financial reward after they reach the top of their range.

Yerke asked what the old first step was and Gage answered \$138,809. Zastrow noted that the last few hires, we had to start at a higher step. Maurer noted that these salaries are being recommended for increase in order to keep up with competitive rates. Maurer stated that although these dollars look significant, in terms of salaries of medical doctors with specialties, it doesn't put us anywhere near the top. When we set these salaries, we look at the revenue the doctors produce and we build that into our rate. In the area of psychiatry we recover the greatest portion of costs than any of our other staff. Based on Supervisor Cummings' question, it was clarified that the ordinance is developed in a fashion to provide that a new person coming in isn't making as much as those who are currently employed. We are not planning on adjusting the relocation allowance which is currently maxed out at \$3,500 per move.

Zastrow explained that originally we did not include the doctors in the pay for performance system, but that over the years, we realized that even with psychiatrists, some will exceed the average solid performance expectations and we'd like to provide a modest reward for such extra effort. This is a tool we could use when the doctors reach the maximum of their range to award them for exceptional performance. This is a one time payment which can be anywhere from 0 – 3% of their annual salary. Zastrow explained this is a market where fewer doctors are specializing in this field and we must have these doctors to staff our Mental Health Center.

MOTION: Jeskewitz made a motion seconded by Paulson to approve the ordinance. The motion was voted on and passed 5-1. Cummings opposed, all others voted in favor.

Esler pointed out that the Personnel Committee is the presenting committee for this ordinance and not the Health and Human Services Committee.

Staff Report on the Wisconsin Counties Human Services Association (WCHSA) Conference of May 7-9, 2008

Esler attended the WCHSA Conference as well as Don Maurer and briefly discussed the topics that were covered. The first session was a presentation by a Marathon County board supervisor discussing the role of the county board. Esler noted that from his perspective, the Health and Human Services Board is on the advocate side of life and the County Board has the responsibility to see that managers and department heads account for what they are doing. The biggest change in counties around the state is the downsizing of county boards making it difficult to structure themselves so tightly in their committees, and is also making the recruitment to human services boards more difficult from the ranks of the elected officials because they have fewer to choose from. For a human services board the statutes say that no fewer than 1/3 nor more than 2/3 of the board shall be county board supervisors.

The general session was with state officials including Karen Timberlake who is the current Secretary of the Department of Health and Family Services. They spoke of the difficulties of getting the budget repair done, how the state is cooperating with counties in long term care reform, ADRC's and other collaborative efforts. Esler asked at the session, based on all the collaborative efforts, how should counties be strategically thinking about the future. Change does not happen fast as far as the state is concerned; it is a turtle pace. Esler spoke of a radio show where legislators were committing to legislation on the radio to change the present DUI laws because of the recent

accident in Oconomowoc. They were discussing third time DUI consequences and possibly a special session of the legislature to get this going. When an issue is hot and many people get on the bandwagon, it seems they move faster. It is the responsibility of the board and committee to determine priorities and what actions to take.

Esler then gave a brief nutshell of the other two sessions – one was the strengthening families initiative of which we are one of the pilot counties involved. Maurer stated this initiative is to reach out to childcare providers so they understand they are not just providing childcare, but they are often the first line of protection for families to avoid child abuse and neglect. Because they see these kids all the time, they need to be aware of areas that need to be strengthened and work with parents on those issues before they deteriorate. Esler then attended a children with disabilities focus on some of the counties who are internally reorganizing the way they address the child disability client and restructuring their departments somewhat to put those elements that deal with those issues into a single unified organizational structure. He also went to the Aging and Disability Resource Center seminar and talked to state reps and Marathon County rep. The Marathon ADRC joined with Wood County. They created a separate Chapter 66 organization so that it is not a county operation, it's an independent operation that hires independent employees and has its own board of directors. As of that day there were 25 ADRC's on the State's directory listing, 22 of those 25 are single county, one is the Marathon/Wood County model and the other two are three county models. These three county models are not structured like the Marathon/Wood County. He did say that there is a group of two counties and two tribal organizations who have been working for 2 ½ years to create their ADRC and it looks like they will be working at it for a long time. They had an inspirational speaker on Friday morning and he characterized the elements that make up leadership and character they are humility, passion, perseverance, and courage.

Supervisor Cummings asked if there were any fiscal benefits to those counties that combined to form an ADRC. Esler said there is a multi-county incentive of \$40,000 in terms of state funding, but from what he has seen administratively it would be more aggravation than worth it. There is also a threshold – we are a large enough county which has enough local business demand for a single county run operation as compared to those that joined together which are much smaller.

Maurer added that when Karen Timberlake talked about the split and they had a representative of the future Children and Family Services Department, there were concerns expressed about the separate silos of the separate state and trying to hold them together. The other concern is don't plan on any new money. Maurer and Schuler were impressed by the new secretary, Karen Timberlake, when she visited here with Kevin Hayden. She asked many good questions and took many notes. The new Department of Children and Family Services secretary, Reggie Bicha, is a former county human services director who ran a county department so he has the experience of the local viewpoint. Karen Timberlake has also had line management experience.

JOINT AGENDA ITEMS

Measles Update (Announcement)

Schuler reported on measles. We had one confirmed measles case and two confirmed rubella cases. We had 25 suspected rubella and measles cases which means there were clinical indications that an individual was not only exposed by someone who is know to have measles, but had a high likelihood of developing symptoms or had some initial symptoms or were worth testing. We ended up doing contact follow up investigations with 400 individuals. Everyone person who had an exposure, anyone they came in contact with has to be investigated. This became a very staff consuming event. It is now winding down, but it was multi-state. Much of the measles was brought

into the country by out of country visitors. If board members know of anyone coming into the country on business or vacation, they should be encouraged to be vaccinated and board members were reminded to be personally vaccinated against any diseases they may be exposed to in other countries. The Public Health Department had to compose a strike team and had to cancel STD clinic and Chronic Disease and STD education sessions to respond to this outbreak. They are way behind in documentation. They had to put the new nurses on the strike team in order to keep the experienced nurses running the day-to-day operations. The June 17th drill for drug distribution, our preparedness exercise, had to be canceled. We had a massive media management problem that Meghan Spraegeer did a fantastic job of helping to manage; and yesterday there was a huge multi-health department feedback session involving a 12 county region to go over the outbreak and evaluate it because it has to be reported to the CDC.

Review Upcoming Meeting Schedule

Everyone received an upcoming meeting schedule. Farrell explained that some meetings are joint in order to give staff more leeway so they don't have to give reports twice. The next meeting for the board only is May 22 when the board meets with the County Executive to present the Advisory Committees' Needs Presentations. Farrell proceeded with going over the schedule. As we finish the budget some of the meetings in October, November and December may involve educational tours such as Norris Adolescent Center, ACAP, etc. Jeskewitz asked if the committee only was meeting on the 29th and Paulson responded yes.

Paulson invited committee members to attend the luncheon with County Executive Vrakas on the 22nd of May.

MOTION: Jeskewitz made a motion seconded by Cummings to approve attendance of any committee members at the May 22nd meeting. The motion passed 6-0.

Kathleen Cummings left at 3:20 p.m.

BOARD AGENDA ITEMS

Review Advisory Committee Recommendation Work Pages Review Public Hearing Input and Written Input to Department

Farrell briefly explained this process to the new members of the Board and Committee. Maurer passed out copies of the recommendation list as well as the packets from the public hearing. He explained that every year the board has looked at a summary of the suggestions made by the advisory committees of the Health and Human Services Board and then the board ranks them in the order of importance. The Board Chair then organizes before the meeting with the County Executive a summary of that discussion and a summary of the priorities as specific as they can be. The County Executive then has an advance notice of the items the Board is going to want to talk to him about. Items A-I are items that would have a financial impact. Items J-N are items that the advisory committees would like the board to support or in some cases were requests for agenda items in the future.

Committee Chair Paulson stated that the Health and Human Services Department would not be getting the \$683,132 the Advisory Committees are requesting to restore funding for prevention, early intervention and alternatives to out-of-home placement services involving children and youth which, as noted by the Child and Family Services Advisory Committee, have been reduced by that amount from 2005 – 2007. The board has to be very specific about what they ask for because in

recent years, to add new programs or restore reductions in programs, others have had to be cut. Paulson then asked about the Topic G (Provide additional dollars for suboxone treatment for opiate addiction). He stated the department was able to get funding for the psychiatrists from the medication savings, but does that mean we are OK with drug funding? Maurer stated that the Suboxone treatment is a very specific AODA treatment and that funding is completely different from the outpatient medication clinic savings. Schuler stated that without some support for the Suboxone program, we will probably have to recommend that we will not offer this service as a detox option, although it is extremely effective. The Department is working with the providers of the detox program to try to lessen the number of days they are requiring an individual to stay in the hospital. We know that the Suboxone program is successful, and Mike O'Brien gave some statistics from the Lawrence Center that proved this. However, at this time we don't know of any additional funding that could keep this program going without cutting other programs.

Farrell went over J-N, the endorsements on the recommendations list. These are items that do not have any cost associated with them. Paulson asked about the funding to enable Public Health to maintain a Level II status. Maurer stated the figure is the estimated cost to continue present services. Schuler stated there is a funding inducement to remain a Level II, but the State will cut the allocations of money from our base contract programs if we go down a level. The State could cut up to 20% of our base allocation. This still would not offset the \$100,000 the advisory committee is requesting because of such things as the childhood immunizations – the grants from the federal government have been dropping every year and if the state takes even more away, we would be even more strapped to run this program. The other part to Level II was that last year we cut almost all of the on-call nurses pay and right now we really experienced a problem during the measles outbreak because we didn't have any back-up to staff all the regular programs. Paulson stated we have to maintain Level II, not only because of the status of the county, but the reputation and functioning of the county of this size going to a lower level. Weidmann stated that even with a maintenance budget, Public Health will have difficulty remaining a Level II because there is such limited staffing available to run those programs to remain at that level. During surge activities, including the recent measles outbreak, we were not functioning as a Level II department. Parthum stated that if we are paid to run a program and don't do it, it's similar to a breach of contract. We had to shut down clinics because we didn't have the staff to keep them running during the measles outbreak. Parthum also agrees this is essential.

Schuler explained that the Criminal Justice Collaborating Council budget is under the Health and Human Services budget, but it is a stand alone budget. He also stated that the Board doesn't really have to worry about figuring out the dollar and cents part of the budget, because that will be determined by the Council, but once it comes to the Board, they have oversight over it and weigh in on what you have been done and how it is working. This item will be endorsed.

The Public Health issue will remain a priority. O'Brien spoke on behalf of "F" which is to fill an AODA counselor position which is currently "frozen" and locate the position at the Day Reporting Center to provide community integration/transition services. The position would remain in Health and Human Services but they would be assigned to work in the jail. Jeskewitz brought up Respite Care and wanted to know where that is covered in this list. Maurer stated that Respite Care falls under "A" as part of the restoration or services as well as under "B" which is the continuation of existing mental health and AODA services.

Weidmann noted that the Board prioritizes these needs from the various advisory committees to provide the Department information on what the board sees as important when we start preparing

the budget. The dollar figures on the list give everyone some idea of the cost of each of these requests.

Schuler noted that when listening to the CAFSAC Advisory Committee needs, it was emphasized that by cutting intervention funding, we will eventually break and more kids will need to be put in out of home placement and institutions which will cost much more in the long run. Given the State and Federal budget conditions and the amount of county money we have, we know we are going to have to make cuts again this year. When you look at “A” and see the amount of money needed just to restore the Child and Family programs that have already been cut over the past few years alone - \$683,132 – there’s no way under current conditions that we will likely have the remotest chance of fixing this soon. Department staff can only look at specific items within that amount (i.e. respite care) because no matter what is recommended, the fiscal realities will be challenging. Paulson said much of the loss of the \$683,132 is part of the state not increasing any of their funding since 1999. Maurer stated that since 1995, the state funding has been flat – or actually decreased if inflation were taken into account. Had they kept up with the most conservative rate of inflation, we would have in our budget \$4.4 million more dollars to work with which would have more than avoided any of the cuts over the last six years, and would have avoided consideration of new investments or even levy reduction in our areas. While the reality is that the loss of these prevention and early intervention programs will likely result in increased placement costs in the future, the state has little fiscal incentive to drive additional funding as the increased costs will fall solely on the counties.

Parthum left at 4:08 p.m.

Yerke left at 4:10 p.m.

At this point all members individually ranked the needs on the list in the order they felt were important. These numbers were then tallied and ranked in order of the highest number of votes to the lowest.

Adjournment

MOTION: Jeskewitz made a motion seconded by Paulson to adjourn the meeting of the Health and Human Services Board. All voted and the motion passed 7-0. The Board portion of the meeting adjourned at 4:15 p.m.

The Committee was then given a tour of the Health and Human Services Building. They adjourned following the tour.

Minutes recorded by Kathy Leach.

Respectfully submitted,

Approved on: _____

Kathleen M. Cummings
Secretary