

**Meeting Notes of the Children and Families Advisory Committee and the Public Health
Advisory Committee Reports of Needs Lists to Members of the Health and Human Services
Board and Committee**

March 27, 2008

Due to the fact that there was not a quorum of Board or Committee Members these are not official minutes.

Committee Members Present: County Board Supervisors Jim Jeskewitz, Tom Schellinger and Rodell Singert. **Absent:** County Board Supervisors James Behrend, Peter Gundrum, Joe Vitale and Sandy Wolff.

Board Members Present: County Board Supervisor Jim Jeskewitz, Citizen members JoAnn Weidmann (acting as Chair) Dr. Peter Parthum, Flor Gonzalez. **Absent:** County Board Supervisors Duane Paulson, Jim Behrend, Citizen members Dennis Farrell, Mike O'Brien, and Dick Wutt.

Others Present: Health and Human Services Director Peter Schuler, Children and Family Division Manager Jesús Mireles, Adolescent and Family Division Manager Peter Slesar, Intake and Support Services Division Manager Antwayne Robertson, Child and Family Advisory Committee Chair Ron Pupp, Public Health Division Manager Dr. Nancy Healy Haney, Public Health Advisory Committee Chair Sue Konkol, Financial Analyst Bill Duckwitz, Chief of Staff Lee Esler, Epidemiologist Ben Jones, Dr. Ross Clay, Faith Holly Beal, Sara Carpenter, Diane Ripple and Steven Welch.

JoAnn Weidmann called the meeting to order at 1:15 p.m.

Introductions

Child and Family Services Advisory Committee Needs List Presentation

Ron Pupp, Chairperson of the Child and Family Services Advisory Committee started the presentation and he stated they used the strategic plan for Waukesha County to help structure their presentation. He introduced Sara Carpenter, Administrator of Wisconsin Community Services (WCS) and Diane Ripple, Director of the Employment Program at the Women's Center, and Faith Holly Beal, Family Services of Waukesha and Director of the CARE Center. Their presentation was a powerpoint presentation, a copy of which was handed out to everyone in attendance. Sara started by covering the positive outcomes in Waukesha County which are all listed in the handout. Schellinger asked why Waukesha County has the lowest out of home placement rates in Wisconsin. Sara stated it's because of the quality of the early intervention and case management services we have in this county. Juveniles and their families can be referred to a number of programs for additional support and services. Having these programs in place is really significant in reducing recidivism, which keeps juveniles out of institutions and averts the expense of \$80,000 - \$100,000/year/placement. The Intensive Tracking Program at WCS which works with youth who are at risk of out of home placements and the success rate of that program is very high. It is very intensive support to those high risk juveniles and their families to insure compliance and monitoring, including 24 hour availability for crisis intervention support ability to respond to situations which may otherwise result in police intervention or costly placements in the juvenile center. Weidmann stated that it is the perspective of all of Human Services to put a big emphasis on early and effective non-institutional intervention, which is a much less costly solution in the long run. Slesar added that the department really believes that families are the place where young people

should be and where problems can arise so working with the family members is the best way to resolve core issues rather than take them out of the home and then have to devote yet more resources to reintegration back.

Diane Ripple talked about a safe community and read over the section and statistics in the powerpoint that covered this area. Ron Pupp went over the section about the reductions in 2008. He noted that over the past several years, there has been a whittling away of some of the funding for these programs which they are addressing today. There was a chart regarding the number of youth arrested for Operating While Intoxicated and it is broken down by age and this is putting the community at risk. Sara Carpenter added that WCS operates a repeat intoxicated driver intervention program and they have seen a significant increase in young adult offenders. They have had a couple of 16 year olds on their caseloads and an increase in the 19 – 25 year olds.

Sara Carpenter went over the statistics on juvenile offenders. The 2008 budget to Wisconsin Community Services was reduced by \$20,000 in the Juvenile Restitution Community Service Program, which resulted in a reduction of service from 80 clients in 2007 to 40 in 2008. It also resulted in a loss of free labor to the community. In 2007 juveniles performed 3,118 hours of service. It was noted that this has had impact on department workers as well as each of these juveniles was on court supervision and is assigned a county social worker. These workers have a number of responsibilities including working with the young person and their family on the issues that are really driving that family in terms of problems. Without having the WCS program available for those 40 individuals that then became the responsibility for the county workers to monitor that as well as the other areas they are responsible for which has an impact on the overall services to the client. Beyond the community service itself, there were many additional positive outcomes as a result of this program as many of the youth connected up with mentors at the community service site, they develop job skills and some of them continue volunteering and enjoying the positive experience of helping people out, which brings about lasting attitudinal change and positive citizenship behaviors.

Pupp then covered the Cost Effective Services. He pointed out that one child in corrections cost the county \$96,634 per year which is based on the rate up until June 30th of this year and after that the rate will go up an additional \$8.00 per day. Pupp also talked about two programs that don't receive county funding. One is the Child Advocacy Center receive state and federal funding and a number of other grants and the STAR Runaway Program which is the only runaway program in Waukesha County. Holly-Beal talked about the C.A.R.E. Center which is a collaborative program designed at the request of the law enforcement, the county, the District Attorney's Office, Children's Hospital, Children's Service Society, Pro-Health Care, The Women's Center and Family Services in Waukesha. The program helps law enforcement and Human Services with effective child abuse investigations. They provide a child friendly environment with a dedicated child forensic interviewer that helps with the investigative process. Communities that have child advocacy centers save about \$1,000 per case. On a per-case basis, traditional investigations were 36% more expensive when all costs are factored in. She then covered the statistics. In 2007 the cost savings to the county as a whole was \$246,578.20 for child abuse investigations.

Pupp addressed the STAR program which is Waukesha County's only runaway program. It's a program designed not just to deal with the runaway, but to seek long term intervention to avoid further deterioration of the troubled youth and their family. Eighty percent of these runaways come from abusive homes. This program has been supported by state and federal funding, but that funding has seen cuts over the years. One of these cuts resulted in laying off an outreach worker.

Faith Holly-Beal spoke of the Assist At-Risk Citizens strategic initiative. She reviewed the statistics on the presentation. Some of these statistics included the number of child abuse or neglect reports, number of juveniles arrest that were drug related, and numbers of children in foster care.

In the last three years county funding for services for prevention, early intervention and alternatives to out-of-home placement has been reduced by \$683,132. They listed some of programs that have been reduced, and that in many cases agencies have tried to partially make up for that gap by taking time from working with clients to private fund raising efforts. They are asking that the \$683,132 be restored in order to keep these cost effective programs running.

Esler stated that back in the 1960's he worked 3rd shift as a dispatcher and had to babysit those runaways and juvenile abuse cases at the Police Station until morning when the juvenile officer on the day shift would take them to Milwaukee Children's Center. He stated that is was very labor intensive to him and to their police agency. He asked what is the procedure today for handling these situations? Slesar stated that it starts with law enforcement and if it becomes a matter outside of their expertise it will then be turned over to the after hours crisis worker to attempt to reunite the family. If this doesn't work we also have staff at the Juvenile Center who have custody authorization if the young person needs to be placed with a relative or emergency foster care and if neither of these is an option they will be retained at the Juvenile Center. Carpenter stated that in 2007, Wisconsin Community Services received over 2,000 after hours calls from children or parents in crisis which could have resulted in an out-of-home placement.

Public Health Advisory Committee Needs List Presentation

Sue Konkell will provide a copy of her presentation so board and committee members not present will have this information. "Health care matters to all of us some of the time, but public health matters to all of us all of the time." Public Health versus medical care – public health focuses on populations – medical care focuses on individuals, public health focuses on prevention, medicine focuses on treatment of the disease. She handed out a document that listed Wisconsin counties by population. Waukesha County is rated as the second healthiest county in the state. We are one of the lower funded health departments per capita according to a recent report in the Wisconsin Medical Journal based on information collected from the Wisconsin Department of Health and Family Services. Since we are a wealthy county a lot of our medical needs are covered by health insurance. Singert asked why if we are so healthy does the southeastern part of the state pay such high insurance premiums. Dr. Parthum stated that to get the most accurate answer would be quite complicated, but he suspects that insurance companies determine their premiums based on experience and what they pay out for services and also the charges for services as it relates to the cost of living and the population distribution. Wisconsin state funding investment in public health ranks 47th out of 50 in the nation.

Ms. Konkell then talked about the apparent assumptions made based on what public health is, what our responsibilities are, how healthy we are, and how much funding and staff we have. The assumptions appear to be that 1) the level of the health department function can continue for the same cost year after year; 2) the department looks good, but we've not been tested with a pandemic, flooding, tornado or major catastrophe; 3) that there won't be any additional demands made on the local health department; 4) that the private medical community will take up deficiencies in prevention and assessment. Prevention is the focus of public health and the treatment of the disease is what the hospitals get paid for. They don't get paid to do the prevention. They learned a new concept called community cost shifting. When public health services fail, the community pays in

other ways, i.e. higher insurance premiums to cover the cost of those who don't have any insurance. Sue then gave some statistical information from a seminar called "Health Care Reform Now", which talked about the cost of preventing disease and treating a disease.

Based on her presentation, the concerns of the Public Health Advisory Committee are: that we would remain well equipped with the knowledge and infrastructure needed to respond to a health crisis and that we be able to maintain continuity of daily functioning along with handling an outbreak or crisis. Their second concern is that the Health and Human Services Board will continue to be involved and aware of the responsibility and keeping the infrastructure adequately funded. The Advisory Committee would like to have a regular agenda item at all meetings to keep the board updated on current public health events. They are also concerned that we remain a solid Level II.

Sue gave some did you know facts. She questioned whether people are aware that at times, when the state indicates possible funding for a project, Dr. Healy Haney might have to turn down certain funds because she doesn't have the staff resources to meet the new objectives that the state is requiring. Did you know that as part of the last budget, some of the core public health staff salaries that had been levy supported were switched to grant funding and if the grants are decreased next year, it would likely require layoffs. Did you know that we are required at a Level I to have and implement a community health plan. Within the last two months, the department had to investigate 5 institutions for the norovirus outbreak thus pulling staff off of prevention programs to be following up on an outbreak. Nationally 1/3 of all teens in our country have the sexually transmitted disease, the HPV virus, which is preventable with an immunization. Dr. Parthum asked if we are offering the HPV vaccine and Dr. Healy Haney stated that yes we are and the amount of vaccines administered is going up. We are being supplied by the vaccines for the children's program, some of which is funded by the Center for Disease Control, but we can keep an administrative charge for it, but that is going up as well. The meningitis vaccine is available from public health and we were paying for it and then being reimbursed by the parents, but now it is made available under the Vaccine for Children's Program as well.

Konkel also stated that the 2008 preparedness expectations include investigators coming in to see how the money is being spent and they are expecting drills and exercises. She also stated that our epidemiologist, Ben Jones, presented a wonderful presentation on public health trends and the Advisory Committee would like the Board to see this at some time in the future. She then passed around the actual requests in typewritten form and read over those prioritized needs. She also stated that the Environmental Human Health Hazards piece is crucial to the 140 review process. She concluded that it would take \$100,318 above the 2008 budget for the 2009 estimated cost to continue.

Parthum stated that it is his understanding that the Health and Human Services Board is the Board of Health for Waukesha County. It is in the statutes and administrative code that the responsibilities of the Board of Health are written. Dr. Parthum stated that if he were not a physician familiar with public health he would find it useful to have an orientation to those responsibilities and be given a copy of the statutes. If we do that the Board would be able to do their jobs better and be able to answer questions regarding public health. He said too that as members they would be probably shocked by the amount of work there is to do.

Parthum also stated that 30 years ago, there were three first class health departments and Waukesha County was one of them. Twenty years ago this county did away with that health department and it has evolved into what it is today. At this point, the State evaluates local health departments based

on three levels, 1 being the least and three being the most developed. In his two years on this board the Public Health Department has been struggling to not fall to a Level I. In looking at the list handed out of other communities and counties in Wisconsin, a number have elevated themselves to a Level III, that are just small fractions of the size of Waukesha County or the resources. He just doesn't know what is our problem, and questioned whether we want to continue for the rest of our history to struggle to not fall to a Level I and essentially say to our County Executive that while in certain other aspects we are trying to be the leader, but not in the public health area. Singert stated that there will be a discussion about it, but what is needed in that discussion is a presentation of the facts so that the County Board can make a decision as to the creditability of going from a Level II to a Level III. We must have facts to support that change. This meeting is another step towards having discussion with the County Board and if it should occur and if it is something we want to do. Weidmann stated that if the board itself received a monthly report from the public health division, the Board of Health would have a better understanding of where we are in communicable disease control and monitoring the status of the community.

Schuler stated that the Environmental Health Division has developed an environmental health hazard proposal piece. It does not rise to the level of an ordinance, but it is a review process. It is sitting on his desk for him to unsnarl a couple pieces of it. We will get this in here in the next meeting or two. Peter was concerned that some things were over included and some were under included. He is going to work with Dale Shaver to fine tune this. Weidman would like to have the board review the new public health statutes and what changes are in there that will have an impact on us at a meeting in the near future. Schuler stated that when the Public Health Division was brought into the Human Services Department, we set a goal that this would function as the Human Services Board and the Health Board under the new human services statutes, but we wanted to have the board start to feel like a Health Board. There was a review of these statutes back then. What Schuler feels is also important is Dr. Healy Haney's balancing act between what she needs to do in her division to balance the communicable disease things happening in the county and the workload impact. The State contracted programs that we have committed to do and have received money to do are our allocation and the preparedness funding and all those requirements we must do and anything else that comes along. Over the past five years there has been a lot of balancing back and forth to cover what needs to be done. She probably has the largest increase percentage wise of raising revenue in her division for her budget than any other divisions in the department. These are fee serviceable projects. These balancing acts could also be part of the monthly report.

Schuler also stated that as a large department, to make the budget balance, we are responsible for absorbing into our budget the ongoing salary and benefit increases for all personnel plus we have the largest purchase of services budget in the county and they usually need to request an increase to maintain their service. Some will reduce their services because of a lack of funding and others have been able to maintain. While local levy increases are allocated to the department, state and federal funding is not keeping up with the local needs and challenges. We probably have the largest cost to continue gap between our funding and what it takes to continue which is where our struggle has come in over the past several years.

Rodell also thought it a good idea if each board member had the information ahead of time before they give their presentation because it would be helpful for members to understand and have questions after the presentation. He felt the needs list document should have been in the packets that were sent out ahead of time.

Jeskewitz stated there is a doctor in Wisconsin who was given a grant to do research that we are becoming too clean and we're not giving our bodies a chance to develop natural immunities. Consequently, some feel that a lot of these epidemics might be halted if we let people build up their immunities which we are not doing anymore. He asked if we were aware of this study and if we can get the results when they come out. It was a speech given by someone from the MS Society. Parthum stated that the focus of medical schools is treatment rather than prevention and its good that someone is doing a study to look at ways to prevent disease.

Rodell Singert stated that the attendance at the last few meetings has been very low on the part of the Health and Human Services Committee – in fact over the past two years that he has served on this committee.

All other agenda items will be carried over to the next meeting.

Notes recorded by Kathy Leach