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# HEALTH AND HUMAN SERVICES

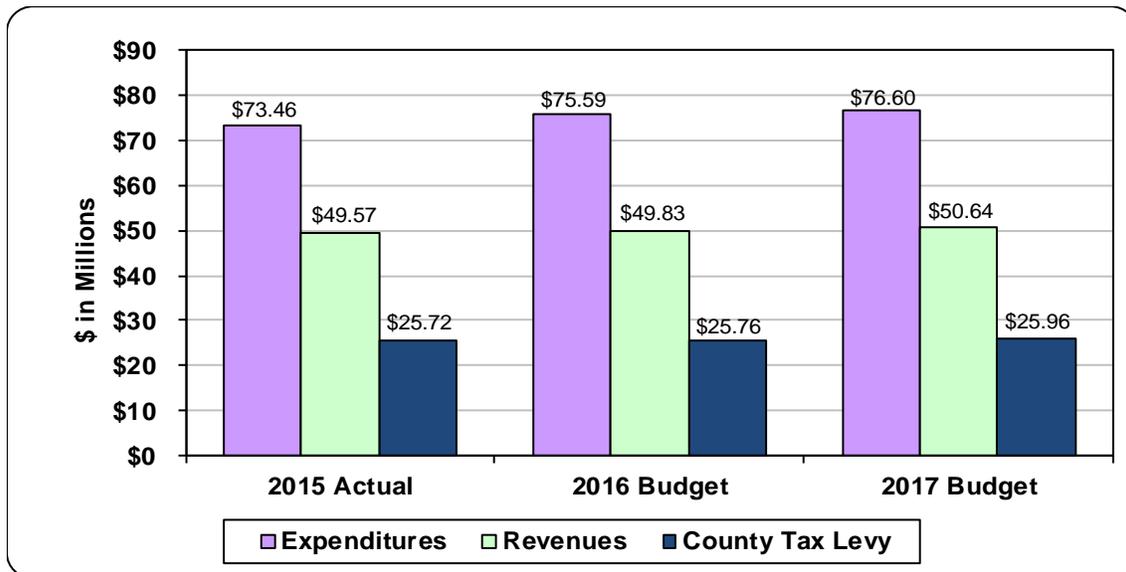
## Functional Area Budget Highlights

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The budgets within this functional area provide programs to at risk children and their families, at risk adults, the elderly, veterans, unemployed, and individuals who are mentally ill, physically or developmentally disabled, or chemically dependent. **Child Support**, under the Corporation Counsel's office, provides activities to obtain and enforce child support orders, establish paternity and certify tax refund interception on delinquent accounts. The **Department of Health and Human Services (HHS)** programs include prevention, intervention, protection, counseling, and an array of residential and community programs for children, juveniles, adults and at risk citizens. **Clinical Services** are provided in this area including outpatient mental behavioral medicine, and a psychiatric inpatient hospital. **Economic Support** includes determining eligibility for Medical Assistance, Badger Care, Foodshare and childcare payments. **Public Health** services are also provided in this area including assessments, consultation, education, preparedness and referral services to promote health and prevent disease. The **HHS Criminal Justice Collaborating Council (CJCC)** works to enhance public safety and promote the effective and efficient administration of the criminal justice system through community collaboration by ensuring offender accountability and providing rehabilitation services, while recognizing the rights and needs of the victims. The **CJCC** provides various programs to individuals with alcohol and other drug abuse, chemical dependency, mental health, or other disabilities to reduce recidivism and maintain independent living within the county. The **HHS Veterans' Services** division provides assistance to County veterans in applying for available Federal, State and County Levy benefits. The **Aging and Disability Resource Center (ADRC) division - General Fund** programs include purchased specialized transportation, adult day care programs, and a variety of contracted community supportive services to allow older adults to remain in their homes. In addition, the Adult Protective Services provides intervention for vulnerable adults to ensure their safety and well-being and protects them from exploitation and harm. Also, senior dining and home delivered meals are provided that assist older individuals to live independently. Also, the **ADRC Contract** fund provides information, referral, assistance, long-term care financial and functional eligibility, long-term care options counseling, short-term case management, elderly and disability benefits counseling, prevention, early intervention, health promotion, outreach/marketing, advocacy, and resource referrals for older adults and to individuals with disabilities age 18 and above, and their families.

Not included in this functional area are the Health and Human Services related capital projects (see Capital Projects) and purchases of vehicles and major equipment replacements (see Vehicle/Equipment Replacement Fund in Public Works Functional Area, and End User Technology Fund in General Administration Functional Area).



The 2017 expenditure budget for this functional area totals \$76,602,308, an increase of \$1,012,121 or 1.3% from the 2016 Budget. Budgeted revenues include \$521,875 of fund balance appropriations. Revenues budgeted in this functional area total \$50,643,455, an increase of \$813,429 or 1.6% from the 2016 budget. The Tax Levy necessary to fund this functional area totals \$25,958,853, an increase of \$198,692 from the 2016 Budget. Tax levy in this functional area is about 25% of the total County Tax Levy.

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**\*\* HEALTH AND HUMAN SERVICES \*\***

## Functional Area Summary by Agency

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	2015	2016	2016	2017	Change from 2016	
	Actual	Adopted	Estimate	Budget	Adopted Budget	
		Budget			\$	%
<b>* TOTAL HEALTH &amp; HUMAN SERVICES*</b>						
Revenues (a)	\$49,572,622	\$49,830,026	\$50,144,490	\$50,643,455	\$813,429	1.6%
County Tax Levy	\$25,716,440	\$25,760,161	\$25,760,161	\$25,958,853	\$198,692	0.8%
Expenditure	\$73,463,286	\$75,590,187	\$76,159,471	\$76,602,308	\$1,012,121	1.3%
Rev. Over (Under) Exp.	\$1,825,776	\$0	(\$254,820)	\$0	\$0	N/A

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**BREAKDOWN BY AGENCY****CORPORATION COUNSEL-CHILD SUPPORT**

Revenues (a)	\$2,068,472	\$2,131,542	\$2,141,662	\$2,215,716	\$84,174	3.9%
County Tax Levy	\$335,462	\$342,183	\$342,183	\$378,875	\$36,692	10.7%
Expenditure	\$2,321,278	\$2,473,725	\$2,471,830	\$2,594,591	\$120,866	4.9%
Rev. Over (Under) Exp.	\$82,656	\$0	\$12,015	\$0	\$0	N/A

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**HEALTH & HUMAN SERVICES**

Revenues (a)	\$47,504,150	\$47,698,484	\$48,002,828	\$48,427,739	\$729,255	1.5%
County Tax Levy	\$25,380,978	\$25,417,978	\$25,417,978	\$25,579,978	\$162,000	0.6%
Expenditure	\$71,142,008	\$73,116,462	\$73,687,641	\$74,007,717	\$891,255	1.2%
Rev. Over (Under) Exp.	\$1,743,120	\$0	(\$266,835)	\$0	\$0	N/A

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(a) The 2017 budget includes a total of \$95,141 of Fund Balance appropriations, which include: Health & Human Services General Funds of \$95,141. The 2016 budget includes a total of \$541,875 of Fund Balance appropriations, which include: Health & Human Services General Funds of \$541,875.

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# HEALTH AND HUMAN SERVICES

## Functional Area Budget Highlights

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- **HHS Administrative Services** Division other revenues are budgeted to increase \$161,800 to \$330,100 related to the Wisconsin Medical Assistance Cost Reporting (WIMCR) program reimbursements to reflect the current funding distribution Maintenance of Effort. Personnel cost increase of \$247,400 includes an increase in temporary extra help of 1.03 FTE to provide after-hours facility watch and building safety and for after-hours reception duties at the Health and Human Services Center and an increase of 1.26 FTE for practice management system assistance with the Core project. The increase also includes the transfer of an administrative position from Public Health.
- **HHS Intake and Shared Services** revenues and expenditures are budgeted to decrease mostly related to a \$55,000 decrease in Kinship Care benefits.
- **Economic Services Administration and Support Program** general government revenues decreases \$35,400 to \$3,493,000. Patient Protection Affordable Care Act (PPACA) program funding is decreased \$221,300 to \$138,200. As a result, 2.0 FTE Economic Support Specialist positions are sunset. This revenue reduction is offset by an increase of \$189,200 in the state base Income Maintenance Contract funding.
- **Children and Family Services** general government revenues decrease \$22,600. This includes a decrease \$37,000 related to fewer eligible children in the Post Reunification Program that helps reduce re-entry into out-of-home care placements by enhancing support services that assist the families and prevent the recurrence of abuse. This is offset by a \$21,500 increase in the IV-E Legal Reimbursement revenues. Also, Charges for Services revenues increase \$23,500, mainly due to revenue reimbursement related to a new clinical therapist position which was added to this program area in 2016 to address the need for comprehensive mental health/AODA and crisis screening, assessment and treatment for children that need ongoing child protective services (CPS). Operating expenditures are budgeted to increase by about \$317,800. This is primarily due to an increase of \$264,000 for Residential Care Center expenditures and an increase of \$57,000 for Foster Care due to the continued trend of higher out of home placement needs.
- **Children with Long Term Support Needs (CLTS) – Third Part Administrator (TPA)** pass through revenues and related expenses decrease by \$317,100 related to anticipated funding changes from the State of Wisconsin to serve children with long term support needs.
- The **Family and Juvenile Services** general government revenue funding decreases \$100,000 primarily due to a decrease in the Youth Aids allocation of \$73,000 to \$3,347,100 as the result of a declining trend in correctional placements. There is also a decrease in the Independent Living revenues of \$21,000 as the program is scheduled to transition from a County allocation to a private consortium by June 30, 2017. Operating expenditures decreases by \$224,000 to \$2,476,600 primarily due to the elimination of the contract for educational support of \$228,758.
- **Juvenile Center** operating expenditures increase about \$76,800 to \$955,800 mainly due to an increase of \$38,000 for additional short-term, temporary female secure detention costs, as well as a \$16,700 annual increase related to the shelter care contract.
- The **Aging & Disability Resource Center (ADRC) General Fund** expenditures decrease \$252,500. This includes a personnel costs decrease of \$138,700 that includes the transfer out of 2.0 FTE Clinical Therapists to Outpatient Clinical division and the transfer in of 0.40 FTE of a Senior ADRC Specialist from the ADRC-Contract Fund. Operating expenditure budget decreases \$143,400 which includes a decrease of \$132,300 in anticipation of the transfer of eligible Adult Protective Services (APS) clients to Managed Care Organization (MCO) funding. Also, a “flat rate” reimbursement payment schedule for all volunteer and corporate guardians will be implemented in 2017 resulting in a decrease of about \$83,000. In addition, payment to the Marsh Country Health Alliance for Clearview Nursing Home and facility for Individuals with Intellectual Disabilities (IID) in Dodge County mainly for the Waukesha County residents who reside at Clearview is estimated to decrease \$22,900 in 2017. This is offset by an \$93,000 increase in ADRC Community Services program expenditures which includes nutrition costs, transportation, respite care and bathing services for seniors.
- The **Aging & Disability Resource Center (ADRC) Contract Fund** revenues and expenditures increase \$10,100. Personnel cost expenditure budget decreases \$107,100 mostly related to cost savings from staff turnover and a 0.40 FTE transfer of a Senior ADRC Specialist to the ADRC-General Fund. Operating expenditures increases \$126,500 including contract services, which increases \$89,300 due to rate increases.

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# HEALTH AND HUMAN SERVICES

## Functional Area Budget Highlights

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**Mental Health Outpatient-Clinical** expenditures increase nearly \$1.2 million or 15% to \$9.1 million, mainly due to a budgeted increase in State mental health institute costs of \$861,900 to \$2.25 million, to more accurately reflect prior year experience and current year projections. In addition, contracted psychiatric services increase \$337,600 and include the addition of a new children's psychiatrist to assist with programming efforts related to the Children's CCS program. In addition, personnel costs are budgeted to increase \$169,300, and includes 2.04 FTE new temporary extra help Clinical Therapists and 2.00 FTE Clinical Therapists (transferred from the Aging and Disability Resource Center division) to assist with the implementation of 2015 State of Wisconsin Act 55, state mandated continuous crisis intervention services. This program, which was launched in mid-2016, requires assessment by HHS crisis staff to determine whether a person should be detained. These increases are partially offset by a decrease in medication costs of \$278,600 due to more clients presenting with health insurance and collaborations with the on-site pharmacy to find cost effective solutions (e.g. generic medications).

- **Mental Health Outpatient-Intensive** revenues increase \$303,500 partially due to increases in the Comprehensive Community Services (CCS) program of nearly \$177,300 to \$2.66 million. This is partly due to an increase in client program days for CCS clients, as well as an increase in revenues based on actual reimbursements for qualifying services under the new rules passed as part of the 2013-2015 WI State Budget. This increase more than offsets a decrease in Community Support Program (CSP) revenues of \$100,000 to more accurately reflect client caseloads with Medicaid reimbursement eligibility. In addition, general government revenues increase \$144,500 resulting from the combining of several grant funds between the outpatient program areas, including: The Community Options Program, Community Support Program, and other Mental Health Block grant funds. The budget also includes the transfer of a 1.00 FTE Clinical Therapist from the Mental Health Outpatient-Clinical program area to more accurately reflect the work being done in this program area.
- **Mental Health Center (MHC)** expenses increase \$199,900, largely due to a \$153,000 personnel increase reflecting the incremental shifting of several positions from the outpatient program areas to more appropriately account for the services being performed at the Mental Health Center. In addition, interdepartmental charges are budgeted to increase nearly \$133,000 to \$899,000 due to various building safety upgrades of \$100,000 and the resurfacing of seclusion rooms totaling \$40,000. The budget also includes a medication dispensing machine, totaling \$75,000, which should generate efficiencies in medication administration and distribution. These increases are partially offset by a \$140,000 decrease in medication costs based on current year estimates and collaborations with the county's onsite private pharmacy provider to drive cost-effective solutions including greater usage of generic medications. Client Fee revenues increase \$174,600 or 6.1% based on past experience and current year estimates, as well as additional revenue of about \$90,000 for clients from Jefferson County when the MHC has availability.
- **Criminal Justice Collaborating Council (CJCC)** revenues (excluding county tax levy) decrease about \$16,700, partially reflecting the difference between the end of one 5-year state Treatment Alternatives and Diversion (TAD) grant allocation in 2016, and the beginning of another 5-year allocation beginning in 2017, of \$2,900 to \$140,000. The TAD grant provides case management, drug testing, and medication-assisted treatment to participants enrolled in the drug court program. Day Report Center program revenues are also budgeted to decrease \$12,600 based on prior year actuals and current year projections. In addition, the federal Bureau of Justice Assistance Drug Court Enhancement grant is scheduled to end on September 30, 2017. However, due to program underspending, client numbers and programmatic spending are maintained at 2016 budgeted levels.
- **Public Health** Charges for Services revenues increase almost \$36,000 to \$358,900 mainly due to an increase in the Travel Immunization Clinic as a result of increased Travel Clinic usage and an overall increase in service fees.
- **Public Health Division** personnel costs are reduced by almost \$212,500 to \$2,888,300 mainly due a 2.87 FTE reduction. The reductions include the unfunding of the 1.0 FTE Health & Human Services Coordinator position and a 1.0 FTE Public Health Nurse position. The FTE reduction also includes the transfer of a 1.0 FTE Administrative Assistant position to HHS Administrative Services Admissions division.
- **Corporation Counsel-Child Support** Federal and State funded program revenues sources are budgeted to increase by \$84,200 or 4.0% to \$2.14 million. Personnel costs increases by \$121,900 mainly for a new 1.0 FTE Administrative Specialist position needed to fulfill duties created by new statewide e-filing requirements and costs to continue staff. Tax levy increases by nearly \$36,700 in this program.

**BUDGETED POSITIONS 2015-2017  
SUMMARY BY AGENCY AND FUND**

**HEALTH AND HUMAN SERVICES**

Agency	Fund	2015 Year End	2016 Adopted Budget	2016 Modified Budget	2017 Budget	16-17 Change
CORPORATION COUNSEL	Child Support	26.60	26.65	26.65	27.65	1.00
HEALTH & HUMAN SERVICES	General Fund					
	Administrative/Information Services	59.10	60.00	60.00	61.00	1.00
	Intake Support Services	66.00	70.00	70.00	68.00	(2.00)
	Children and Family Services	30.00	29.00	29.00	29.00	-
	Adolescent and Family Services	55.06	48.00	48.00	47.00	(1.00)
	Clinical Services	92.80	93.21	93.21	95.21	2.00
	Public Health	34.84	34.84	34.84	31.84	(3.00)
	Criminal Justice Collaborating Council	1.00	1.00	1.00	1.00	-
	Veterans Services	3.70	3.70	4.00	4.00	0.30
	ADRC	23.98	26.64	26.64	25.04	(1.60)
	Total H & HS General Fund	366.48	366.39	366.69	362.09	(3.30)
	Aging and Disability Resource Center	25.06	22.40	22.40	22.00	(0.40)
	<b>H&amp;HS Subtotal</b>	<b>391.54</b>	<b>388.79</b>	<b>389.09</b>	<b>384.09</b>	<b>(3.70)</b>
	TOTAL REGULAR POSITIONS	418.14	415.44	415.74	411.74	(2.70)
	TOTAL EXTRA HELP	15.72	19.38	19.38	24.59	5.21
	TOTAL OVERTIME	2.80	2.80	2.80	2.50	(0.30)
	<b>TOTAL BUDGETED POSITIONS</b>	<b>436.66</b>	<b>437.62</b>	<b>437.92</b>	<b>438.83</b>	<b>1.21</b>

**2017 BUDGET ACTIONS**

**Corporation Counsel- Child Support**

Increase: 1.00 FTE Administrative Specialist  
Increase: 0.08 FTE Extra Help  
Decrease: 0.01 FTE Overtime

**Health and Human Services -General Fund**

Sunset: 2.00 FTE Economic Support Specialist PPACA (Economic Support Services)  
Unfund: 1.00 FTE Social Worker (Family & Juvenile Services)  
Unfund: 1.00 FTE Public Health Nurse (Public Health)  
Unfund: 1.00 FTE Health & Human Services Coordinator (Public Health)  
Transfer In: 0.40 FTE Senior ADRC Specialist from ADRC Contract Fund (ADRC General Fund)  
Increase: 5.14 FTE Extra help  
Decrease: 0.29 Overtime

**Health and Human Services - Aging and Disability Resource Center Contract Fund**

Transfer Out: 0.40 FTE Senior ADRC Specialist to ADRC General Fund (ADRC Contract Fund)

**2016 CURRENT YEAR ACTIONS**

**Health and Human Services - General Fund**

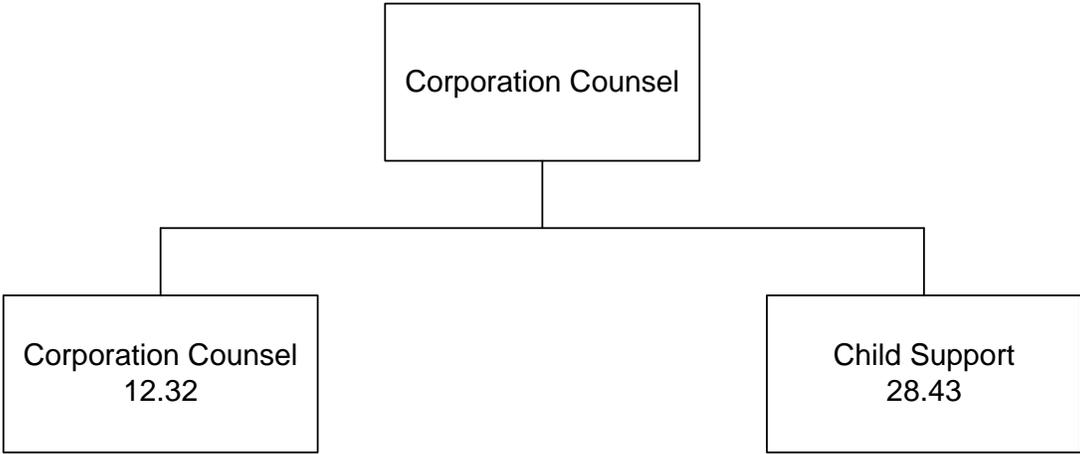
Increase: 0.30 FTE Veteran Service Aid

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# Corporation Counsel

# CORPORATION COUNSEL'S OFFICE

## FUNCTION / PROGRAM CHART



40.75 TOTAL FTE'S

1. Position counts stated in terms of budgeted full time equivalent positions (FTE) includes extra help and overtime.  
2. See Stats/Trends Section for position detail.



**Statement of Purpose**

The Child Support Division of the Corporation Counsel Office implements and administers the Child Support Enforcement Act pursuant to Title IV-D of the Federal Social Security Act and Wisconsin Statutes, under contract with the State Department of Children and Family Services. The Waukesha County Child Support Division is supported by state, federal and county funding. Child Support Services include activities to establish paternity, obtain initial court orders for child support enforcement and health insurance, enforce or modify existing orders, and collect delinquent (past due) accounts.

**Program Description**

Under the umbrella of the Corporation Counsel department, the Child Support Division provides financial, legal, case management, and clerical services for child support cases. Legal and case management activities include establishing paternity, establishing court-ordered obligations for child support and health insurance, locating absent parents, investigating delinquent child support cases, modifying support obligations as required by law, and enforcing support obligations through a variety of administrative and judicial processes for Wisconsin and interstate cases. Financial and clerical support activities include entering court order information into the Kids Information Data System (KIDS), generating and sending wage assignments to employers, conducting case audits, updating demographic information, adjusting accounts, researching suspended payments, resolving issues with the Wisconsin Support Collections Trust Fund, and answering customer service inquiries. Revenues are primarily generated from Federally-funded administrative cost reimbursements and performance-based incentive funding passed through State contract, incentives from medical support liability collections, and miscellaneous revenues from genetic test fees, client fees, copy fees, and vital statistics fees.

<b>Financial Summary</b>	2015 Actual	2016		2017 Budget	Change From 2016 Adopted Budget	
		Adopted Budget	2016 Estimate		\$	%
<b>Revenues</b>						
General Government (a)	\$2,034,926	\$2,099,842	\$2,110,762	\$2,184,016	\$84,174	4.0%
Fine/Licenses	\$0	\$0	\$0	\$0	\$0	N/A
Charges for Services	\$31,591	\$31,700	\$30,900	\$31,700	\$0	0.0%
Interdepartmental	\$1,285	\$0	\$0	\$0	\$0	N/A
Other Revenue	\$670	\$0	\$0	\$0	\$0	N/A
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
<b>County Tax Levy (Credit)</b>	<b>\$335,462</b>	<b>\$342,183</b>	<b>\$342,183</b>	<b>\$378,875</b>	<b>\$36,692</b>	<b>10.7%</b>
<b>Total Revenue Sources</b>	<b>\$2,403,934</b>	<b>\$2,473,725</b>	<b>\$2,483,845</b>	<b>\$2,594,591</b>	<b>\$120,866</b>	<b>4.9%</b>
<b>Expenditures</b>						
Personnel Costs	\$1,917,521	\$2,010,769	\$2,033,022	\$2,132,688	\$121,919	6.1%
Operating Expenses	\$235,149	\$280,921	\$268,611	\$287,157	\$6,236	2.2%
Interdept. Charges	\$168,608	\$182,035	\$170,197	\$174,746	(\$7,289)	-4.0%
Fixed Assets	\$0	\$0	\$0	\$0	\$0	N/A
<b>Total Expenditures</b>	<b>\$2,321,278</b>	<b>\$2,473,725</b>	<b>\$2,471,830</b>	<b>\$2,594,591</b>	<b>\$120,866</b>	<b>4.9%</b>
Rev. Over (Under) Exp.	\$82,656	\$0	\$12,015	\$0	\$0	N/A

**Position Summary (FTE)**

Regular Positions	26.60	26.65	26.65	27.65	1.00
Extra Help	0.97	0.65	0.65	0.73	0.08
Overtime	0.06	0.06	0.06	0.05	(0.01)
<b>Total FTEs</b>	<b>27.63</b>	<b>27.36</b>	<b>27.36</b>	<b>28.43</b>	<b>1.07</b>

(a) The General Government Revenues include State General Purposes Revenue (GPR) of \$236,487 in 2015 actual, \$236,000 in 2016 budget and \$236,000 in 2017 budget, which is eligible to be matched pursuant to the State and County Contract.



**Program Highlights**

Overall, Child Support revenues are budgeted to increase \$120,900 or 4.9% to \$2,594,600.

General Government revenues increase \$84,200 mostly related to an \$85,700 increase in matching Federal contract revenue and a medical support incentive increase of \$7,700. The increases are offset by a reduction of performance fund incentive of \$9,300 due to a change in the statewide calculation methodology.

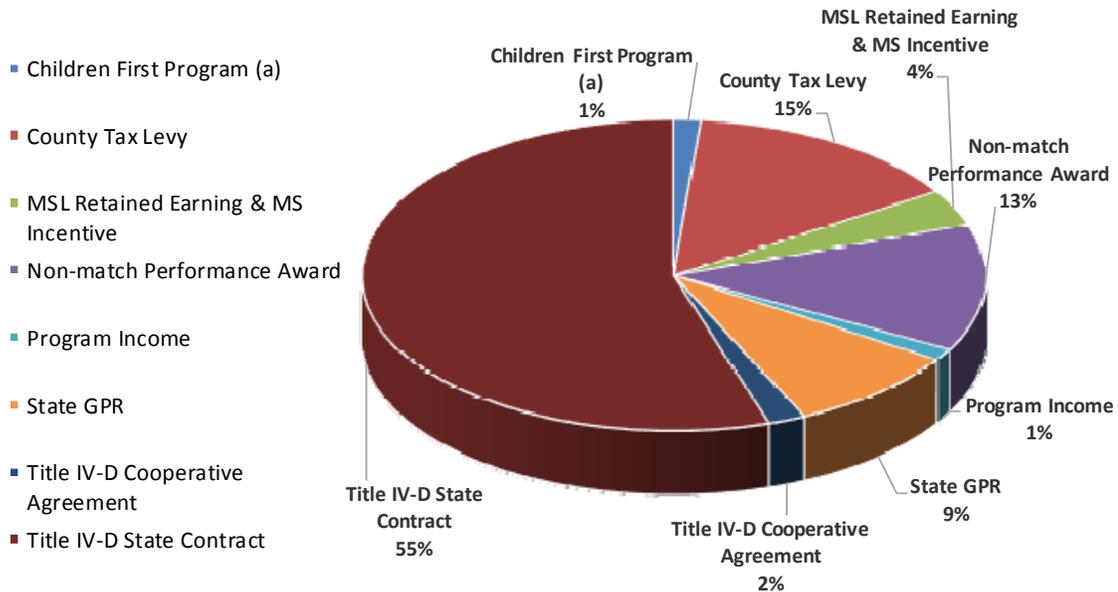
Tax levy is increased \$36,700 to \$378,900.

Total personnel costs increase \$121,900 in 2017 partly due a \$62,300 increase for the creation of a new 1.0 FTE Administrative Specialist position needed to fulfill duties created by new statewide e-filing requirements. An additional \$23,600 of the increase relates to the rotation of more experienced senior attorneys into the Child Support Division from the Corporation Counsel Office. In addition, \$27,200 of the increase relates to a rise in health insurance costs, mostly as a result of employee selections, and \$2,600 of the increase is attributed to a 0.08 FTE increase in temporary extra help.

Total operating expenses increase by \$6,200, primarily due to a \$5,000 increase for paralegal and legal expenses.

Total interdepartmental charges decrease \$7,300 mostly related to the elimination of cross charges to the Child Support Division.

**Waukesha County Child Support Program  
2017 Revenue Budget of \$2.59 Million**



The above chart represents total estimated revenue sources in the 2017 Child Support Program budget, which is primarily funded by the Federal and State Government through the Wisconsin Department of Children and Families. Included are a title IV-D State contract administrative reimbursement of \$1,426,116, State GPR of \$236,000, a non-match performance award of \$338,500, a retained earnings from Medical Support Liabilities (MSL) collection of \$94,000, and medical support incentive of \$3,000. The Children First Program is allotted \$36,400<sup>(a)</sup>. The program income of \$31,700 includes copy fees, vital statistics fees, genetic test fees, and process service fees. The 2017 budget includes Tax Levy of \$378,875.

<sup>(a)</sup> The Children First Program (CFP) is included in the Child Support Program. The program contracts with an outside vendor to assist non-custodial parents in obtaining employment and paying court-ordered child support.

Major Departmental Strategic Outcomes and Objectives for 2017

County-Wide Key Strategic Outcome: A county that assists at-risk citizens

**Objective 1:** Bring increasing economic stability to families in need and at risk by collecting consistent monthly child support in a cost-effective manner. The statewide goal for cost effectiveness is to collect at least \$5.00 for every \$1.00 expended. In 2015, Waukesha County exceed this goal by collecting approximately \$8.36 for every \$1.00 expended.

Key Outcome Indicator: In 2014, the Department of Children and Families began phasing in a new formula for fund allocation. The new formula is based upon a pay for performance approach while using the four Federal performance measures as well as a state determined fifth measure based upon federally adjusted case loads. The performance measures did not change for 2016.

The allocation for performance measure 3 (collection of current support) is based upon the county receiving approximately \$.0139 for each \$1.00 collected in current support. The allocation for performance measure 4 (arrears cases with a payment during the year) is based on the county receiving approximately \$34.72 for each case that receives a payment on arrears during the year. Counties that have shown improvement in measures 3 and 4 from the previous year will also be rewarded with a weighted share of unallocated funds.

Performance Measure:	2015 Actual	2016 Target	2016 Estimate	2017 Target
Court order rate	92.44%	>80%	>80%	>80%
Paternity establishment	109.97%	>90%	>90%	>90%
Child support collection rate	79.90%	>79.90%	>79.90%	>2016 rate
Arrears collection rate	74.87%	>74.87%	>74.87%	>2016 rate

Performance Measure #1: Court Order Rate. The Court Order Rate compares the number of cases with support orders to the total number of cases. In 2015, Waukesha County earned 100% of funding by obtaining a court order rate of 92.44%. Of the \$196,700 available to be earned on this measure, Waukesha County received the full amount.

Performance Measure #2: Paternity Establishment Rate. This measure compares the total number of non-marital children for whom paternity has been established to the total number of non-marital children. In 2015, Waukesha County earned 100% of funding by obtaining a paternity establishment rate of 109.97%. Of the \$196,700 available to be earned on this measure, Waukesha County received the full amount.

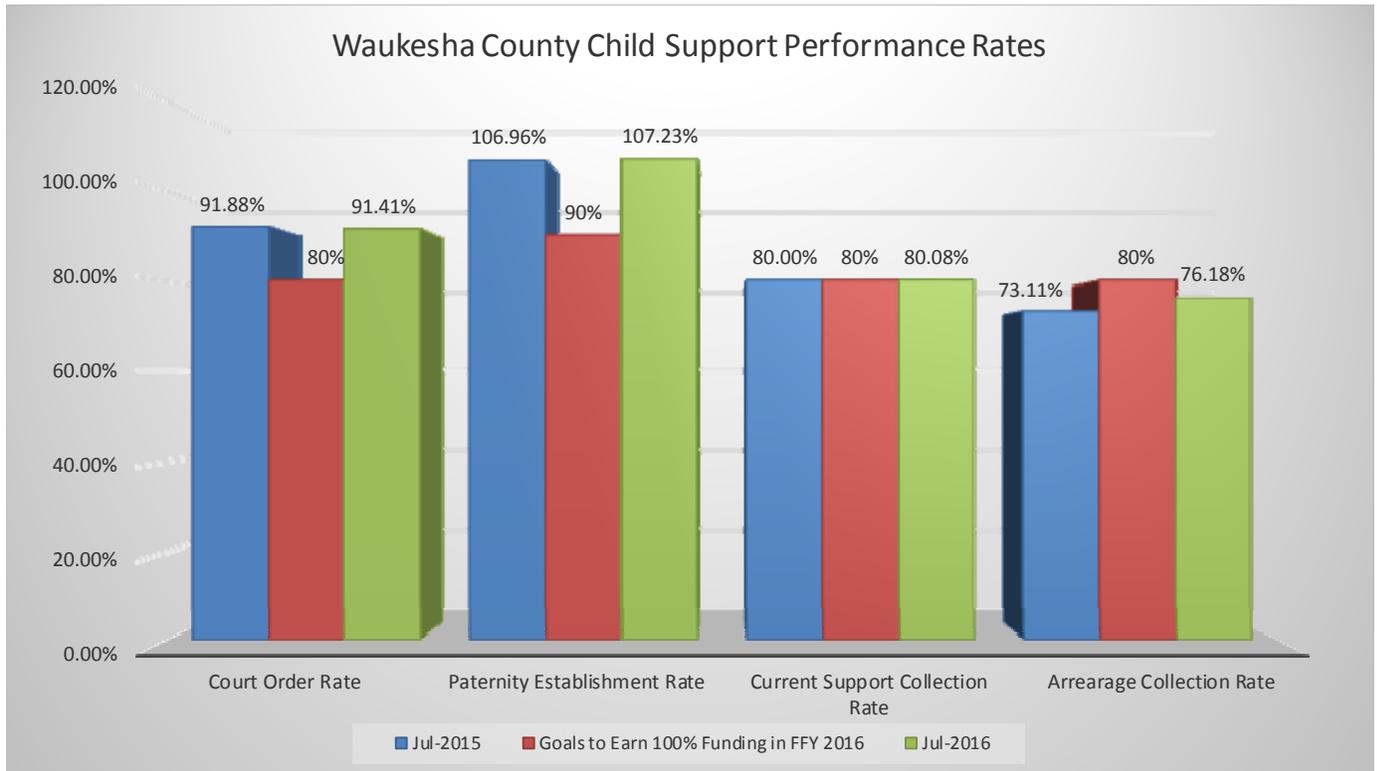
Performance Measure #3: Current Support Collection Rate. This measure is the ratio of the total dollar amount of child support due compared to the total dollar amount of child support collected. This measure is cumulative over the Federal Fiscal Year. In 2015, Waukesha County achieved a collection rate of 79.90%. To obtain 100% funding on this measure, the county would have needed to reach a collection rate of 80%. Of the \$266,800 available to be earned on this measure, Waukesha County received \$260,900.

Performance Measure #4: Arrearage Collection Rate. This measure is the percentage of cases that received a payment on past due child support during the year. In 2015, Waukesha County achieved a rate of 74.87% which exceeded the prior year's rate of 74.72%. Of a possible \$193,500 available to be earned, Waukesha County received \$180,700. To obtain 100% of funding, Waukesha County would have needed to reach a rate of 80%.

Performance Measure #5: This measure reviews the number of open cases with activity in the last two years. The allocation is based upon a formula that will be adjusted on an annual basis with the understanding that this measure may be phased out over the next several years with the funding being allocated to performance measures 3 and 4. Of the \$196,700 available to be earned on this measure, Waukesha County received the full amount.

Because of the improvement in performance measures 3 and 4, Waukesha County was awarded additional federal funding passed through the state of \$19,300.

The chart below exhibits the performance rates standing as of July 2016 compared to July 2015.



**County-Wide Key Strategic Outcome: A county that provides customers with quality programs and services.**

**Objective 2:** Maintain a high level of customer service for the citizens of Waukesha County while continually increasing communication with the public, vendors, Child Support Division staff, and other county agencies to foster an atmosphere of cooperation.

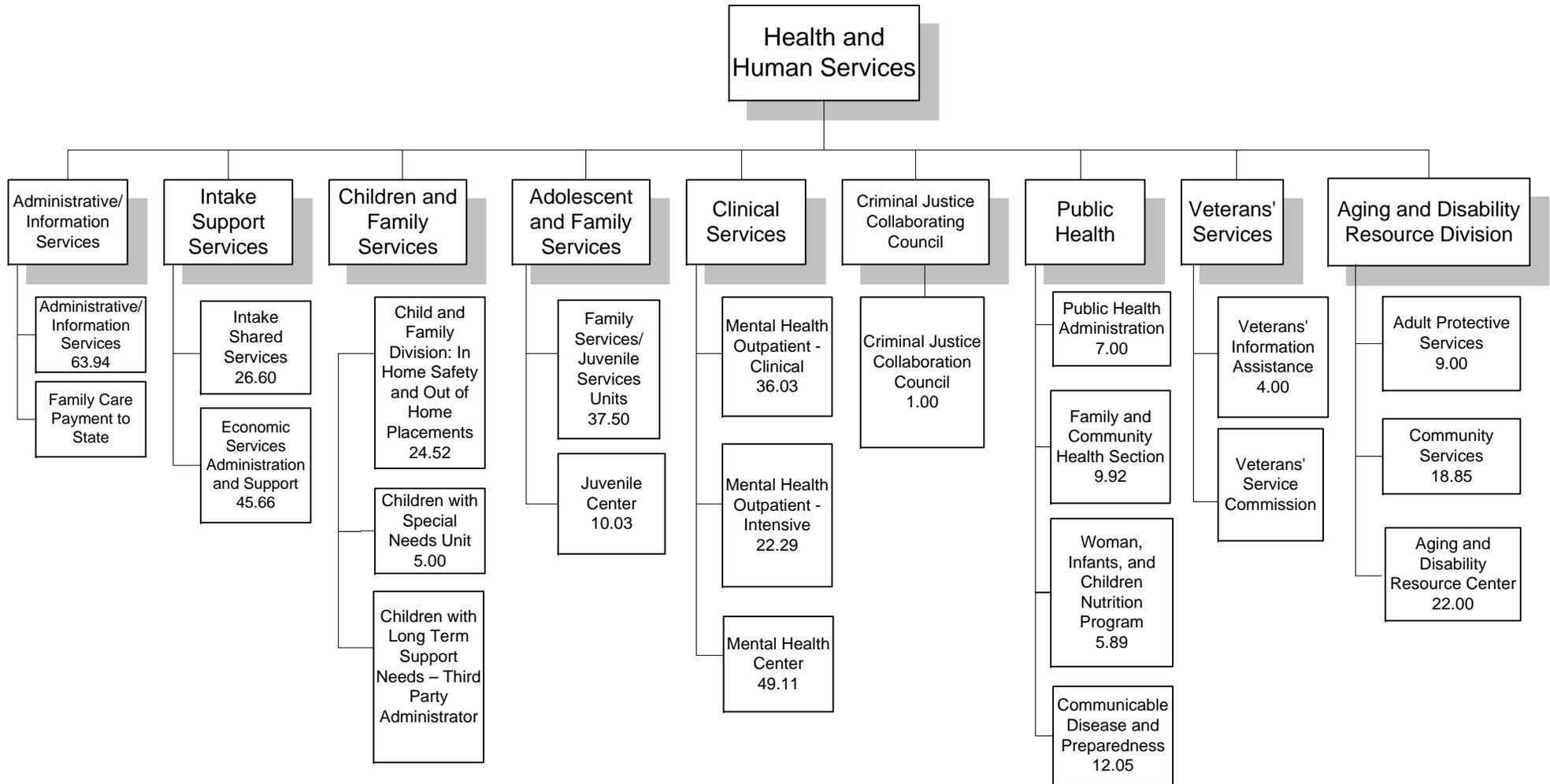
**County-Wide Key Strategic Outcome: Cost effective services delivered with competence and skill.**

**Objective 3:** Ensure that all staff members receive the most up-to-date training in their respective areas, and cross-train staff within the agency so that staff members can provide services in all areas when absences or vacancies occur within the agency.

# Health & Human Services

# HEALTH AND HUMAN SERVICES

## FUNCTION / PROGRAM CHART



410.40 TOTAL FTE'S

1. Position counts stated in terms of budgeted full time equivalent positions (FTE) includes extra help and overtime.
2. See Stats/Trends Section for position detail.

# Health and Human Services

## Statement of Purpose/Summary

### All Funds

#### Statement of Purpose:

Health and Human Services has nine divisions that are included in the General Fund. The divisions are Administrative Services, Intake Support Services, Children and Family Services, Adolescent and Family Services, Clinical Services, Public Health, Criminal Justice Collaborating Council (CJCC), Veterans' Services and Aging and Disability Resources Center (ADRC).

The Aging and Disability Resource Center (ADRC) Contract Fund is a Special Revenue Fund operation providing the public with information related to aging or living with a disability.

### Health and Human Services - All Funds Summary

Financial Summary	2015 Actual	2016 Adopted Budget	2016 Estimate	2017 Budget	Change From 2016 Adopted Budget	
					\$	%
<b><u>General Fund</u></b>						
Revenues	\$44,390,880	\$44,436,980	\$44,811,260	\$44,729,419	\$292,439	1%
Appr. Fund Balance	\$297,090	\$95,141	\$146,305	\$521,875	\$426,734	449%
County Tax Levy/(Credit)	\$25,380,978	\$25,417,978	\$25,417,978	\$25,579,978	\$162,000	1%
Expenditures	\$68,325,828	\$69,950,099	\$70,642,378	\$70,831,272	\$881,173	1%
Rev. Over (Under) Exp.	\$1,743,120	\$0	(\$266,835)	\$0	\$0	N/A
<b><u>Aging and Disability Resource Center Contract Fund</u></b>						
Revenues	\$2,816,180	\$3,166,363	\$3,045,263	\$3,176,445	\$10,082	0%
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
County Tax Levy/(Credit)	\$0	\$0	\$0	\$0	\$0	N/A
Expenditures	\$2,816,180	\$3,166,363	\$3,045,263	\$3,176,445	\$10,082	0%
Rev. Over (Under) Exp.	\$0	\$0	\$0	\$0	\$0	N/A
<b><u>All Funds</u></b>						
Revenues	\$47,207,060	\$47,603,343	\$47,856,523	\$47,905,864	\$302,521	1%
Appr. Fund Balance	\$297,090	\$95,141	\$146,305	\$521,875	\$426,734	449%
County Tax Levy/(Credit)	\$25,380,978	\$25,417,978	\$25,417,978	\$25,579,978	\$162,000	1%
Expenditures	\$71,142,008	\$73,116,462	\$73,687,641	\$74,007,717	\$891,255	1%
Rev. Over (Under) Exp.	\$1,743,120	\$0	(\$266,835)	\$0	\$0	N/A
<b><u>Position Summary (FTE)</u></b>						
Regular Positions	391.54	388.79	389.09	384.09	(4.70)	
Extra Help	14.75	18.73	18.73	23.87	5.14	
Overtime	2.74	2.74	2.74	2.45	(0.29)	
Total	409.03	410.26	410.56	410.40	0.14	

## HEALTH AND HUMAN SERVICES (All Divisions)

Financial Summary	2015 Actual	2016		2017 Budget	Change From 2016 Adopted Budget	
		Adopted Budget	2016 Estimate		\$	%
<b>Administrative/Information Services (Includes Family Care - Payments to State)</b>						
Revenues	\$11,737,100	\$11,247,810	\$11,479,650	\$11,411,673	\$163,863	1.5%
County Tax Levy	(\$2,941,469)	(\$2,583,381)	(\$2,583,381)	(\$2,413,597)	\$169,784	N/A
Expenditures	\$8,286,121	\$8,664,429	\$8,809,945	\$8,998,076	\$333,647	3.9%
Rev. Over (Under) Exp.	\$509,510	\$0	\$86,324	\$0	\$0	N/A
<b>Intake Support Services</b>						
Revenues	\$5,259,231	\$4,889,393	\$4,888,715	\$4,861,100	(\$28,293)	-0.6%
County Tax Levy	\$2,097,488	\$2,326,437	\$2,326,437	\$2,188,675	(\$137,762)	-5.9%
Expenditures	\$6,801,143	\$7,215,830	\$6,824,303	\$7,049,775	(\$166,055)	-2.3%
Rev. Over (Under) Exp.	\$555,576	\$0	\$390,849	\$0	\$0	N/A
<b>Children and Family Services</b>						
Revenues	\$7,917,515	\$8,098,867	\$7,958,082	\$7,821,366	(\$277,501)	-3.4%
County Tax Levy	\$3,829,207	\$3,528,199	\$3,528,199	\$3,819,523	\$291,324	8.3%
Expenditures	\$11,904,669	\$11,627,066	\$12,091,352	\$11,640,889	\$13,823	0.1%
Rev. Over (Under) Exp.	(\$157,947)	\$0	(\$605,071)	\$0	\$0	N/A
<b>Adolescent and Family Services</b>						
Revenues	\$4,085,463	\$4,113,235	\$4,099,975	\$4,003,559	(\$109,676)	-2.7%
County Tax Levy	\$4,352,306	\$3,966,493	\$3,966,493	\$3,978,670	\$12,177	0.3%
Expenditures	\$8,055,179	\$8,079,728	\$8,042,495	\$7,982,229	(\$97,499)	-1.2%
Rev. Over (Under) Exp.	\$382,590	\$0	\$23,973	\$0	-	N/A
<b>Clinical Services</b>						
Revenues	\$10,781,298	\$11,226,595	\$11,451,056	\$12,091,100	\$864,505	7.7%
County Tax Levy	\$11,756,698	\$11,876,420	\$11,876,420	\$12,332,155	\$455,735	3.8%
Expenditures	\$22,409,293	\$23,103,015	\$23,768,448	\$24,423,255	\$1,320,240	5.7%
Rev. Over (Under) Exp.	\$128,703	\$0	(\$440,972)	\$0	\$0	N/A
<b>Criminal Justice Collaborating Council (CJCC)</b>						
Revenues	\$361,246	\$313,681	\$300,842	\$296,950	(\$16,731)	-5.3%
County Tax Levy	\$1,025,862	\$1,055,158	\$1,055,158	\$1,077,870	\$22,712	2.2%
Expenditures	\$1,385,218	\$1,368,839	\$1,351,383	\$1,374,820	\$5,981	0.4%
Rev. Over (Under) Exp.	\$1,890	\$0	\$4,617	\$0	\$0	N/A
<b>Public Health</b>						
Revenues	\$1,036,928	\$1,165,928	\$1,239,797	\$1,183,097	\$17,169	1.5%
County Tax Levy	\$2,420,013	\$2,460,042	\$2,460,042	\$2,168,268	(\$291,774)	-11.9%
Expenditures	\$3,353,046	\$3,625,970	\$3,567,039	\$3,351,365	(\$274,605)	-7.6%
Rev. Over (Under) Exp.	\$103,895	\$0	\$132,800	\$0	\$0	N/A
<b>Veterans' Services</b>						
Revenues	\$13,598	\$13,000	\$13,000	\$13,000	\$0	0.0%
County Tax Levy	\$284,085	\$304,626	\$304,626	\$302,801	(\$1,825)	-0.6%
Expenditures	\$278,670	\$317,626	\$327,115	\$315,801	(\$1,825)	-0.6%
Rev. Over (Under) Exp.	\$19,013	\$0	(\$9,489)	\$0	\$0	N/A
<b>Aging and Disability Resource</b>						
Revenues	\$6,311,771	\$6,629,975	\$6,571,711	\$6,745,894	\$115,919	1.7%
County Tax Levy	\$2,556,788	\$2,483,984	\$2,483,984	\$2,125,613	(\$358,371)	-14.4%
Expenditures	\$8,668,669	\$9,113,959	\$8,905,561	\$8,871,507	(\$242,452)	-2.7%
Rev. Over (Under) Exp.	\$199,890	\$0	\$150,134	\$0	\$0	N/A
<b>Total All H&amp;HS Divisions</b>						
Revenues	\$47,504,150	\$47,698,484	\$48,002,828	\$48,427,739	\$729,255	1.5%
County Tax Levy	\$25,380,978	\$25,417,978	\$25,417,978	\$25,579,978	\$162,000	0.6%
Expenditures	\$71,142,008	\$73,116,462	\$73,687,641	\$74,007,717	\$891,255	1.2%
Rev. Over (Under) Exp.	\$1,743,120	\$0	(\$266,835)	\$0	\$0	N/A
<b>Position Summary All Funds (FTE)</b>						
Regular Positions	391.54	388.79	389.09	384.09	(4.70)	
Extra Help	14.75	18.73	18.73	23.87	5.14	
Overtime	2.74	2.74	2.74	2.45	(0.29)	
<b>Total</b>	<b>409.03</b>	<b>410.26</b>	<b>410.56</b>	<b>410.40</b>	<b>0.14</b>	

HEALTH AND HUMAN SERVICES POSITIONS (All Divisions)

Financial Summary	2015	2016	2016	2017	Change From 2016	
	Actual	Adopted Budget	Estimate	Budget	Adopted Budget \$	%
<b>Administrative/Information Services (Includes Family Care - Payments to State)</b>						
Regular Positions	59.10	60.00	60.00	61.00	1.00	1.7%
Extra Help	0.50	0.50	0.50	2.79	2.29	458.1%
Overtime	0.15	0.15	0.15	0.15	0.00	0.0%
Total	59.75	60.65	60.65	63.94	3.29	5.4%
<b>Intake Support Services</b>						
Regular Positions	66.00	70.00	70.00	68.00	-2.00	-2.9%
Extra Help	0.22	2.22	2.22	3.16	0.94	42.3%
Overtime	1.07	1.50	1.50	1.10	-0.40	-26.6%
Total	67.29	73.72	73.72	72.26	-1.46	-2.0%
<b>Children and Family Services</b>						
Regular Positions	30.00	29.00	29.00	29.00	0.00	0.0%
Extra Help	0.12	0.62	0.62	0.52	-0.10	-15.4%
Overtime	0.07	0.07	0.07	-	-0.07	-100.0%
Total	30.19	29.69	29.69	29.52	0.07	0.2%
<b>Adolescent and Family Services</b>						
Regular Positions	55.06	48.00	48.00	47.00	-1.00	-2.1%
Extra Help	0.35	0.35	0.35	0.35	0.00	0.0%
Overtime	0.61	0.18	0.18	0.18	0.00	0.0%
Total	56.02	48.53	48.53	47.53	-1.00	-2.1%
<b>Clinical Services</b>						
Regular Positions	92.80	93.21	93.21	95.21	2.00	2.1%
Extra Help	8.27	9.34	9.34	11.20	1.87	20.0%
Overtime	0.84	0.84	0.84	1.02	0.18	20.9%
Total	101.91	103.39	103.39	107.43	4.04	3.9%
<b>Criminal Justice Collaborating Council (CJCC)</b>						
Regular Positions	1.00	1.00	1.00	1.00	0.00	0.0%
Extra Help	-	-	-	-	0.00	N/A
Overtime	-	-	-	-	0.00	N/A
Total	1.00	1.00	1.00	1.00	0.00	0.0%
<b>Public Health</b>						
Regular Positions	34.84	34.84	34.84	31.84	-3.00	-8.6%
Extra Help	2.48	2.89	2.89	3.03	0.13	4.6%
Overtime	-	-	-	-	0.00	N/A
Total	37.32	37.73	37.73	34.87	-2.87	-7.6%
<b>Veterans' Services</b>						
Regular Positions	3.70	3.70	4.00	4.00	0.30	8.1%
Extra Help	-	-	-	-	0.00	N/A
Overtime	-	-	-	-	0.00	N/A
Total	3.70	3.70	4.00	4.00	0.30	8.1%
<b>Aging and Disability Resource</b>						
Regular Positions	49.04	49.04	49.04	47.04	-2.00	-4.1%
Extra Help	2.81	2.81	2.81	2.81	0.00	0.0%
Overtime	-	-	-	-	0.00	N/A
Total	51.85	51.85	51.85	49.85	-2.00	-3.9%
<b>Total All H&amp;HS Divisions</b>						
Regular Positions	391.54	388.79	389.09	384.09	-4.70	-1.2%
Extra Help	14.75	18.73	18.73	23.87	5.14	27.4%
Overtime	2.74	2.74	2.74	2.45	-0.29	-10.7%
Total	409.03	410.26	410.56	410.40	0.14	0.0%



### Fund Purpose

Health and Human Services has nine divisions that are included in the General Fund. The divisions are Administrative Services, Intake Support Services, Children and Family Services, Adolescent and Family Services, Clinical Services, Public Health, Criminal Justice Collaborating Council (CJCC), Veterans' Services and Aging and Disability Resource Center (ADRC).

### Health and Human Services - General Fund Summary

Financial Summary	2015	2016	2016	2017	Change From 2016	
	Actual	Adopted Budget	Estimate	Budget	Adopted Budget	
					\$	%
<b>Revenues</b>						
General Government	\$32,983,675	\$32,596,135	\$32,553,591	\$32,220,382	(\$375,753)	-1.2%
Fine/Licenses	\$349,287	\$371,112	\$357,002	\$357,002	(\$14,110)	-3.8%
Charges for Services	\$7,597,966	\$8,705,496	\$8,784,141	\$9,265,077	\$559,581	6.4%
Interdepartmental	\$2,345	\$3,415	\$30,415	\$275	(\$3,140)	-91.9%
Other Revenue	\$3,457,607	\$2,760,822	\$3,086,111	\$2,886,683	\$125,861	4.6%
Appr. Fund Balance	\$297,090	\$95,141	\$146,305	\$521,875	\$426,734	448.5%
<b>County Tax Levy</b>	<b>\$25,380,978</b>	<b>\$25,417,978</b>	<b>\$25,417,978</b>	<b>\$25,579,978</b>	<b>\$162,000</b>	<b>0.6%</b>
<b>Total Revenues Sources</b>	<b>\$70,068,948</b>	<b>\$69,950,099</b>	<b>\$70,375,543</b>	<b>\$70,831,272</b>	<b>\$881,173</b>	<b>1.3%</b>
<b>Expenditures</b>						
Personnel Costs	\$31,343,351	\$32,569,485	\$32,010,599	\$32,729,677	\$160,192	0.5%
Operating Expenses	\$33,390,076	\$33,853,189	\$35,027,935	\$34,253,751	\$400,562	1.2%
Interdept. Charges	\$3,592,401	\$3,512,425	\$3,588,844	\$3,772,844	\$260,419	7.4%
Fixed Assets	\$0	\$15,000	\$15,000	\$75,000	\$60,000	400.0%
<b>Total Expenditures</b>	<b>\$68,325,828</b>	<b>\$69,950,099</b>	<b>\$70,642,378</b>	<b>\$70,831,272</b>	<b>\$881,173</b>	<b>1.3%</b>
Rev. Over (Under) Exp.	\$1,743,120	\$0	(\$266,835)	\$0	\$0	N/A

### Position Summary (FTE)

Regular Positions	366.48	366.39	366.69	362.09	(4.30)
Extra Help	14.75	18.73	18.73	23.87	5.14
Overtime	2.74	2.74	2.74	2.45	(0.29)
<b>Total</b>	<b>383.97</b>	<b>387.86</b>	<b>388.16</b>	<b>388.40</b>	<b>0.54</b>

**Administrative Services**

**Major Departmental Strategic Outcomes and Objectives for 2017**

**Strategic Outcome: A safe county**

**Objective 1.1: Emergency Preparedness Skills of HHS Staff.**

Protect the health and safety of citizens, by effectively and efficiently responding to emergencies by annually assessing employees' emergency preparedness skills and knowledge and provide quarterly employee training to address identified gaps. Through an annual HHS Survey, 80% of employees will agree they are prepared to respond.

**Objective Owner:** Public Health, Emergency Preparedness Coordinator

**Initiative/Action:**

1. Design survey to identify gaps. Initial survey will be through SurveyMonkey and will focus on familiarity with emergency notification systems, ability to respond to an emergency within 2 hours, staff perception of educational needs to be prepared. Potential questions include:
  - a. Are you aware that all HHS employees are considered first responders for HHS in the event of an emergency?
  - b. Are you familiar with the county's emergency notification system called AlertSense (formerly known as MyState)?
  - c. Is your contact information current in AlertSense/MyState?
  - d. Do you feel you and your family are prepared in the event you need to respond to an emergency (i.e. Are arrangements in place for dependent care, food, etc.)?
  - e. Are you reasonably confident in your ability to respond to an event within approximately 2 hours, if needed?
  - f. What types of training topics would help you better prepare for or respond to an emergency?
  - g. What type of training format would you find most helpful? (For example, e-mailed articles, on-line training, e-mailed PowerPoint, in person presentations, other...)?
2. Implement survey by sending it to all HHS employees via e-mail each November.
3. Analyze survey results to identify knowledge and preparedness gaps based on survey answers and staff comments.
4. Determine training priorities based on the identified knowledge and preparedness gaps as well as feedback from staff regarding preferred training methods.
5. Identify the educational tool(s) such as e-mails, online trainings, articles, videos, in-person training courses, etc. that will assist in narrowing the identified gaps.
6. Implement the selected educational tool(s) and distribute appropriately to staff.
7. Enlist the assistance of the Division Managers to encourage or require their staff to participate or complete the educational materials.
8. Repeat the survey annually in November to gauge progress towards 80% goal.

**Performance Measure:**

<b>Measure</b>	<b>2015 Actual</b>	<b>2016 Estimate</b>	<b>2017 Goal</b>
Number of Trainings Provided in person, on-line or via email	7	10 (The increase in number of trainings was due to grant funding available in 2016)	8
Percentage of Employees Responding to the Survey	50%	53%	55%
Percentage of Employees Responding Affirmatively	73%	75%	77%

**Administrative Services (Cont.)**

**Strategic Outcome: A county that assists at-risk citizens.**

**Objective 5.6: Address the Rising Prevalence of Opioid and Heroin Addiction.**

Waukesha County will address the rising prevalence of opioid and heroin addiction through a comprehensive community approach to prevent the abuse and misuse of prescription drugs and opiates, and prevent death by heroin overdose. HHS will coordinate the effort utilizing the recommendations of the State's Heroin Workgroup and by providing leadership to implement the Five Pillars strategies.

**Objective Owner:** Heroin Task Force of HHS, Community Partners, Sheriffs, Medical Examiner, District Attorney

**Initiative/Action:**

1. Full array of accessible community-based substance abuse treatment and support services including the development of resources for opiate detox and recovery coaching.
2. Targeted marketing strategy to promote awareness of issue and treatment options.
3. Education of youth and families utilizing school-based resources.
4. Distribution of and training on the use of Narcan to reverse overdose.
5. Promotion of safe handling of prescription medications and use of medication collection sites.
6. Develop internet clearing house for prevention, education, treatment, resources and workplace tools to reduce opioid and heroin addiction.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Opioid and heroin related deaths	46	5% reduction
Implementation of Heroin Task Force Pillar Workgroups Plans	6	6
Increase in requests for information from Impact 2-1-1	5%	10%

**Strategic Outcome: A county that provides customers with quality programs and services**

**Objective 6.1: Maintain a Practice of Continuous Quality Improvement (CQI)**

Maintain a practice of continuous quality improvement through annual program evaluations utilizing evidence based standards.

**Objective Owner:** Public Health, Clinical Services, Adolescent and Family Services

**Initiative/Action (Adolescent and Family Services):**

1. Develop a system to assess policies and procedures.
2. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
3. Train staff in the 18 month Carey Group's Evidence Based Briefcase series using Unit meetings to train all staff on a monthly basis.
4. Provide pre-test and post-testing to determine level of staff understanding.

**Initiative/Action (Clinical Services):**

1. Develop training for clinical staff on the Illness Management and Recovery fidelity standards.
2. Expand and enhance training for clinical staff on Person Centered Planning.
3. Work with Quality Assurance and Performance Improvement staff to develop and monitor clinical program outcomes.
4. Develop dashboards to maximize use of EMR reports to gather program outcome data.

**Initiative/Action (Public Health):**

1. Develop a quality improvement plan.
2. Train all staff on quality improvement concepts and the Public Health Division's plan.
3. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
4. Develop a system to assess policies and procedures.
5. Develop dashboards to maximize use of EMR reports to gather program outcome data.

Administrative Services (Cont.)

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Policies and Procedures Assessed for Quality Improvement	8 for A & F 5 for PH	8 for A & F 6 for PH
Quality Improvement Projects Initiated and/or Completed	1 for A & F 1 for PH 1 for Clinical	1 for A & F 1 for PH 2 for Clinical
Pre and Post Test Improvement Ratio	75% for A & F 75% for PH	80% for A & F 80% for PH
Number of Staff Trained in CQI	60	80

**Strategic Outcome: A County that provides cost-effective services delivered with competence and skill**

**Objective 7.2: The Department will modify current business policies to better meet customer needs, reduce denied claims, and improve revenue cycle integrity**

The Department will modify current business policies by analyzing staff utilization and implementing inter-divisional initiatives to meet customer needs. The Department will utilize electronic technology to improve service delivery and maximize funding. The Department will focus on the following areas: reduction in denied claims, increase in customer satisfaction, improve revenue cycle integrity.

**Objective Owner:** Administrative Services, Department of Administration Information Technology Division, Public Health, Clinical Services

**Initiative/Action:**

1. Review the use of additional denial reason codes, analyze data, determine and implement new process for the adjudication of denied claims; measure progress.
2. Track the reason codes for the denied medical claims and use the integrated system of electronic medical records, case management and scheduling to reduce denied claims.
3. Review, analyze and enhance intake process to collect appropriate billing/claims management documentation.
4. Review scheduling practices to assure the maximization of practitioner's available time
5. Review and evaluate the implementation of an automated appointment reminder telephone call system.
6. Develop informatics data analysis of payment patterns to evaluate payer performance, analysis data to industry benchmark and implement a plan to engage our payer in resolving deviations.
7. Provide service program supervisors with denied claim information at monthly budget driver meetings.
8. Provide and support community-based staff with tools needed to expedite services delivery and billing using electronic records technology.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Reduction in Denied Claims	1%	10%
Increase in Practitioner/Client Time Through Improved Scheduling Management	1%	10%

**Administrative Services (Cont.)**

**Program Description**

Along with providing the overall direction of the HHS Department, Administrative Services is responsible for coordinating and providing operational, fiscal and management information systems support.

Major functions and responsibilities include the processing of client and provider payments, contract administration of vendor purchased services, commercial carrier contract negotiation, monitor and analyze legislative initiatives, the billing and service coding for Medicare, Medical Assistance, Commercial Insurance Carriers and responsible parties, and liaison to Human Resources. Monitor HHS compliance with the Health Insurance Portability & Accountability Act (HIPAA) Privacy Security/HITECH compliance, client medical records management. Department specific business application support, computer training and system administration, along with Department-wide data collection, analysis and reporting to various outside entities are coordinated and supported through this area.

**Strategic Outcome: A County that provides cost-effective services delivered with competence and skill**

**Objective 7.3: Build a Culture of Trauma Informed Care**

Raise awareness and increase knowledge of basic trauma principles and trauma informed care practices among Waukesha County employees in an effort to build a culture of trauma informed care. Over the next two years, the Department will increase the number of individuals trained and pilot a “Trauma Checklist” system among social workers.

**Objective Owner:** Children and Family Services, Adolescent and Family Services, Intake and Support Services, Circuit Courts

**Initiative/Action:**

1. Host Trauma Partnership meetings held bi- monthly to bring stakeholders together and provide training opportunities.
2. Develop a Trauma 101 curriculum and begin training all Waukesha County Department of Health and Human Services staff.
3. Provide trauma trainings for Judges, attorneys and other professionals who work with trauma affected individuals.
4. Provide surveys at the completion of trainings to gauge increased awareness, understanding and confidence in ability to perform their job in a trauma sensitive way following the training.
5. Implement “Trauma Checklist” system among social workers to increase staff diligence in providing Trauma Informed Care to clients.
6. Supervisors review staff checklists and discuss strengths and weaknesses; provide feedback on how worker could make more use of trauma techniques.
7. Utilized regular supervision to probe staff about trauma matters and evaluate staff skill level in this area.
8. Staff to provide evidence of increased knowledge of trauma matters by incorporating these elements into regularly scheduled casework discussions with their supervisor.
9. Develop a HHS Secondary Trauma workgroup to create policy and practice for addressing ongoing trauma reactions, serious incidents and crises involving staff.
10. The “Trauma Checklist” will be completed in all Primary CAN Investigations and case openings by the Intake and Shared Services Division.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Number of Individuals Trained	300	300
Trauma Informed Care Checklists Utilized in Case Management	30% in C & F	40% in C & F
Trauma Informed Care Checklists completed during CAN investigations or case openings	95%	95%

Administrative Services (cont.)

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>59.75</b>	<b>60.65</b>	<b>60.65</b>	<b>63.94</b>	<b>3.29</b>
General Government	\$8,707,030	\$8,539,872	\$8,539,269	\$8,553,977	\$14,105
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$23,854	\$23,000	\$23,000	\$23,000	\$0
Interdepartmental	\$0	\$0	\$27,000	\$0	\$0
Other Revenue	\$375,436	\$168,320	\$330,078	\$330,078	\$161,758
Appr. Fund Balance	\$126,162	\$12,000	\$55,685	\$0	(\$12,000)
<b>County Tax Levy (Credit)</b>	<b>(\$2,941,469)</b>	<b>(\$2,583,381)</b>	<b>(\$2,583,381)</b>	<b>(\$2,413,597)</b>	<b>\$169,784</b>
<b>Total Revenues</b>	<b>\$6,291,013</b>	<b>\$6,159,811</b>	<b>\$6,391,651</b>	<b>\$6,493,458</b>	<b>\$333,647</b>
Personnel Costs	\$4,209,770	\$4,428,536	\$4,436,575	\$4,675,895	\$247,359
Operating Expenses	\$886,350	\$895,192	\$1,042,101	\$971,121	\$75,929
Interdept. Charges	\$685,383	\$836,083	\$826,651	\$846,442	\$10,359
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$5,781,503</b>	<b>\$6,159,811</b>	<b>\$6,305,327</b>	<b>\$6,493,458</b>	<b>\$333,647</b>
Rev. Over (Under) Exp.	\$509,510	\$0	\$86,324	\$0	\$0



**Program Highlights**

General Government revenues increase by \$14,100 to about \$8,554,000. This is primarily related to an increase of \$13,100 in administrative cost recovery from the Aging and Disability Resource Center (ADRC) State Contract to \$669,800. Other funding included in general government revenue had minimal or no funding increases includes the Basic County Allocation of \$7,606,500, the Income Maintenance Allocation of \$115,000, Public Health Grants of \$77,100, and indirect Cost Recovery from ADRC Older American grants of \$64,300.

Charges for Services revenue from record copy services budgeted at \$23,000 remain unchanged from the 2016 budget.

Other revenues are budgeted to increase \$161,800 to \$330,100. This is related to the Wisconsin Medical Assistance Cost Reporting (WIMCR) program reimbursements to reflect the current funding distribution between HHS programs at the 2002 established Maintenance of Effort.

Fund Balance appropriation decrease by \$12,000 to \$0 to reflect the final planned phase-down of General Fund balance use.

Personnel costs increase by about \$247,400 to \$4,675,900. This reflects a net cost to continue for the 63.94 FTE staff. This also reflects a transfer in from the Public Health Division of 1.0 FTE of an Administrative Assistant to work in the Admissions unit, \$66,600 increase in temporary extra help which includes an increase of 1.03 FTE to provide after-hours facility watch and building safety and for after-hours reception duties at the Health and Human Services Center and an increase of 1.26 FTE for practice management system assistance with the Core project.

**Administrative Services (cont.)**

Operating expenses increase by about \$75,900 to approximately \$971,100 mainly from a \$85,200 increase in contracted services of which about \$46,000 is for contracted staffing to assist with the CORE project implementation and \$36,400 is related to the legacy system maintenance and licensure fees.

Interdepartmental charges are higher by \$10,400 to \$846,400 mainly due to increased allocations of about \$6,300 for end user technology computer charges, which partly relates to personnel changes and Workers Compensation charges of about \$8,400 due to an increase in the risk management insurance allocation.

**Family Care Payments to the State**

This program reflects the 2013 required (mandated) payment back to the State as part of the local maintenance of effort base for the State Family Care initiative, which began July of 2008 for Waukesha County.

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
General Government	\$2,504,618	\$2,504,618	\$2,504,618	\$2,504,618	\$0
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$0	\$0	\$0	\$0	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Total Revenues</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$0</b>
Personnel Costs	\$0	\$0	\$0	\$0	\$0
Operating Expenses	\$2,504,618	\$2,504,618	\$2,504,618	\$2,504,618	\$0
Interdept. Charges	\$0	\$0	\$0	\$0	\$0
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$2,504,618</b>	<b>\$0</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General Government revenues of \$2,504,618 reflect a portion of State Community Aids – Basic County Allocation (BCA) received from the State Department of Health Services. Operating expenses for 2017 include the required payment back to the State Department of Health Services to meet the scheduled county contribution. The county is now at the scheduled legislated maintenance of effort (equal to 22% of the total long-term care expenditures for the final year that the County operated this program) the same amount annually hereafter to help pay for Waukesha County residents receiving benefits from the State’s Family Care Program.

**Intake and Shared Services**

**Program Description**

Intake and Shared Services programs serve as the initial contact point for Child Welfare service referrals. Assessments are provided in the areas of child protective services; out of home placement requests; parent/teen family dysfunction; disability funding requests; and information/referral services. Short-term and supportive service includes Kinship Care assessment and funding; childcare certification; respite day care for families in crisis; home and financial management services and volunteer transportation services. The Division's purchased services include investments in prevention and early intervention services.

**Strategic Outcome: An Economically Vibrant County**

**Objective 2.2: Reducing Child Care Barriers to Employment**

Provide safe, affordable and accessible child care services to the citizens of Waukesha County in order to reduce barriers to employment.

**Objective Owner:** Intake and Support Services

**Initiative/Action:**

Provide initial startup training and resource support to small business owners in Waukesha County in order to create certified child care providers.

1. Market small business owner's quality and reliable daycare services to the community.
2. Connect working individuals with quality child care services in Waukesha County.
3. Provide resource challenged families with appropriate cost effective interventions to reduce barriers to employment.
4. Develop efficiencies for time sensitive processing of Wisconsin Shares childcare applications.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
DCF Timeliness Month to Month Report	98%	Greater than 97%
IM Project Call Center Average Speed to Answer	5 min.	Less than 8 min.

**Intake and Shared Services (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>21.63</b>	<b>26.06</b>	<b>26.06</b>	<b>26.60</b>	<b>0.54</b>
General Government	\$1,315,025	\$1,327,566	\$1,334,711	\$1,334,711	\$7,145
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$3,104	\$2,100	\$2,751	\$2,100	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$3,245	\$2,800	\$2,800	\$2,800	\$0
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$1,675,165</b>	<b>\$2,039,790</b>	<b>\$2,039,790</b>	<b>\$1,982,244</b>	<b>(\$57,546)</b>
<b>Total Revenues</b>	<b>\$2,996,539</b>	<b>\$3,372,256</b>	<b>\$3,380,052</b>	<b>\$3,321,855</b>	<b>(\$50,401)</b>
Personnel Costs	\$1,814,809	\$2,091,168	\$2,045,914	\$2,102,464	\$11,296
Operating Expenses	\$1,101,344	\$1,207,575	\$1,142,777	\$1,142,777	(\$64,798)
Interdept. Charges	\$79,257	\$73,513	\$74,255	\$76,614	\$3,101
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$2,995,410</b>	<b>\$3,372,256</b>	<b>\$3,262,946</b>	<b>\$3,321,855</b>	<b>(\$50,401)</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$1,129</b>	<b>\$0</b>	<b>\$117,106</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General Government revenues are budgeted to increase by \$7,100, mostly related to the Child Day Care Administration funds allocation increase of \$59,900 to \$266,900 and the Kinship Care Assessments increase of \$2,300 to \$49,900. This is offset by a decrease of about \$55,000 to \$536,000 for Kinship Care Base Benefits. All other General Government revenues remain the same: State Basic County Allocation budgeted at \$372,000, state funding for the Promoting Safe and Stable Family (PSSF) program budgeted at \$95,200 and the Foster Parent Training allocation of \$14,900.

Charges for Services are budgeted at \$2,100 and are unchanged in the 2017 budget. This is a fee collected from Voluntary Kinship Providers related to annual background check.

Other Revenues are budgeted to remain unchanged at about \$2,800.

Personnel costs increase by about \$11,300 to \$2,102,500. This represents the cost to continue for 26.06 FTE's and 0.94 increase in temporary extra help offset by a 0.40 FTE decrease in overtime.

Operating expenditures reflect a net decrease of \$64,800 to \$1,142,800. This reflects a \$55,000 decrease in Kinship Care base benefits to \$535,800 to align with the change in the state county contract. Also crisis respite day care is budgeted to decrease \$27,000 to \$115,600 based on trending utilization. These decreases are offset by a realignment of a contract from the Child and Family division to this division of \$21,500 as it better aligns with the Intake and Shared Service programming. This contract provides a timely and comprehensive response to child abuse allegations in a safe child-focused setting. Also, the Kinship Care assessments are increased \$2,300 to \$49,900.

Interdepartmental charges increase \$3,100 to \$77,000. This is due to a \$2,000 increase in telephone and a \$1,100 increase in the End User Technology Fees.

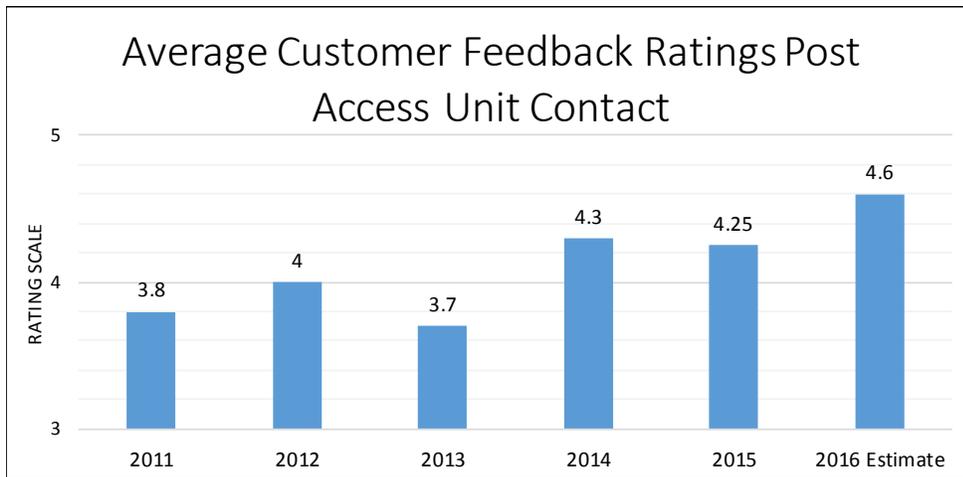
**Intake and Shared Services (cont.)**



**Program Activities**

<b>Activities-(Workload data)</b>	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
Intake (Access) # of Referrals	4,516	5,500	5,467	5,200	(300)
Child Abuse/Neglect Reports	1,662	2,000	1,896	2,000	0
Children Assessed For Abuse/Neglect	697	700	895	900	200
Home & Financial Management Cases	27	25	34	35	10
Kinship Care Assessments/Reassessments	195	200	193	193	(7)
Kinship Care Funded Placements of children (Avg. Monthly)	195	225	193	193	(32)
Kinship Care Waiting List, # of children	2	0	3	20	20
Crisis Intervention: Child Protective /Health Welfare/JCI # of contract	775	500	1,068	1,070	570
Crisis Respite Child Day Care, # of children	97	150	125	125	(25)
Family Day Care: # Certified Homes	16	40	18	25	(15)
Volunteer Transportation: Miles Driven	64,848	90,000	77,028	80,000	(10,000)

\*eWiSACWIS Dashboard Report (448/498)



A random sample of customers is mailed a survey following customer contact with Access, and includes indicators such as respect, professionalism, and pre/post opinion of the delivery service.

- Ratings Scale**
- 5 - Excellent
  - 4 - Good
  - 3 - Fair
  - 2 - Needs Improvement
  - 1 - Extremely Poor

**Economic Services Administration and Support**

**Program Description**

Waukesha County is a member of the Moraine Lakes (ML) Consortium that includes the following counties: Fond du Lac, Ozaukee, Walworth and Washington County. Fond du Lac County is the lead agency with fiscal responsibility for the ML Consortium. Waukesha County administers a variety of Economic Support (ES) programs including Medical Assistance, FoodShare (Food Stamps), Child Care, a fraud elimination program, and the Low-Income Energy Assistance Program. Program benefit services are provided either directly or through a purchase of service contract based on eligibility for applicable program offerings. Additionally, Economic Support has responsibility to work closely with the FoodShare Employment and Training (FSET) agency to ensure participants are meeting the work requirements associated with the FSET program. The remaining Patient Protection and Affordable Care Act (PPACA) sunset positions, formerly housed at the Workforce Development Center to process the additional volume of work resulting from the Affordable Care Act, are now located at the Human Services Center.

**Strategic Outcome: A county that assists at-risk citizens.**

**Objective 5.7: Provide Economic Support Services Efficiently through Moraine Lakes Consortium**

Provide Economic Support Services (FoodShare, Medical Assistance, Childcare) timely and efficiently through utilization of the Moraine Lakes Consortium call center and monthly review of measurement data obtained through the Income Maintenance Project Daily Call Statistics and Ongoing Caseload Monitoring Reports.

**Objective Owner:** Economic Support

**Initiative/Action:**

1. Review performance data monthly in the Moraine Lakes Operations team meetings and through analysis of these data reports, adjust processes and work assignments to increase call center and case processing performance.
2. Present performance data bi-monthly to the Moraine Lakes Directors and obtain feedback and approval for the implementation of new processes to assist in continuous improvement efforts.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
DCF Childcare New Authorization Timeliness Detail Report	94.2%	Greater than 90%
IM Project Call Center Statistics Report	5 minutes average speed of answer	5 minutes average speed of answer

**Economic Services Administration and Support (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>45.66</b>	<b>47.66</b>	<b>47.66</b>	<b>45.66</b>	<b>(2.00)</b>
General Government	\$3,882,962	\$3,528,427	\$3,523,374	\$3,492,989	(\$35,438)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$16,284	\$0	\$0	\$0	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$38,285	\$28,500	\$25,000	\$28,500	\$0
Appr. Fund Balance	\$326	\$0	\$79	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$422,323</b>	<b>\$286,647</b>	<b>\$286,647</b>	<b>\$206,431</b>	<b>(\$80,216)</b>
<b>Total Revenues</b>	<b>\$4,360,180</b>	<b>\$3,843,574</b>	<b>\$3,835,100</b>	<b>\$3,727,920</b>	<b>(\$115,654)</b>
Personnel Costs	\$3,028,167	\$3,252,338	\$3,014,133	\$3,139,862	(\$112,476)
Operating Expenses	\$580,214	\$394,477	\$355,286	\$394,207	(\$270)
Interdept. Charges	\$197,352	\$196,759	\$191,938	\$193,851	(\$2,908)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$3,805,733</b>	<b>\$3,843,574</b>	<b>\$3,561,357</b>	<b>\$3,727,920</b>	<b>(\$115,654)</b>

<b>Rev. Over (Under) Exp.</b>	<b>\$554,447</b>	<b>\$0</b>	<b>\$273,743</b>	<b>\$0</b>	<b>\$0</b>
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Note: The 2016 budget reduces funding to 2.0 FTE Economic Support Specialist positions. The 2016 Adopted budget included funding for 4.0 FTE Economic Support Specialist positions (10 positions were budgeted to end June 30, 2015) to assist with the Patient Protection and Affordable Care Act (PPACA). The County Board of Supervisors approved enrolled ordinance 169-094, in Feb of 2015, related to the extension of funding to maintain 8 of the Economic Support Specialist PPACA positions for 2015. These positions will sunset as the funding is reduced or terminated.



**Program Highlights**

General Government revenues decrease by about \$35,400 to \$3,493,000. This is the result of a reduction of \$221,300 in Patient Protection Affordable Care Act (PPACA) revenue as the PPACA funding is being decreased to \$138,200 and a decrease in the Fraud Consortium funding of \$12,200. It is offset by an increase of \$189,200 in the Income Maintenance Contract and the Day Care Administration Contract of \$10,200. The purpose of this State allocation is to determine child care eligibility, child care eligibility redetermination, child care authorization, provider and client fraud prevention and certification. Allocations that remain unchanged are the Low Income Energy Assistance benefit of \$321,800.

Other Revenues are budgeted to remain unchanged at about \$28,500. Waukesha County receives a percentage of collections from fraud recoveries for FoodShare, Medical Assistance and Aid for Families with Dependent Children (AFDC).

Personnel costs decrease by \$112,500 to \$3,139,900. This is related to the net cost to continue of 45.66 FTE positions and the reduction of 2.0 sunset PPACA positions as the funding continues to be reduced as prescribed by state statute.

Operating expenditures are budgeted to decrease by \$270 to \$394,300. This is a net decrease mainly due to a loss of the Fraud Consortium payments of \$34,700, and are offset by an increase of \$24,000 for small equipment which includes the purchase ergonomic work stations recommended for the call center staff and three in-house technical call center training sessions of \$15,000.

Interdepartmental charges decrease by \$2,900 to \$193,900, mostly related to a decrease in the collection fee for outstanding fraud claims by \$5,500 to more closely align with actual usage offset by an increase in the End User Technology Fees (EUTF) of \$3,170.

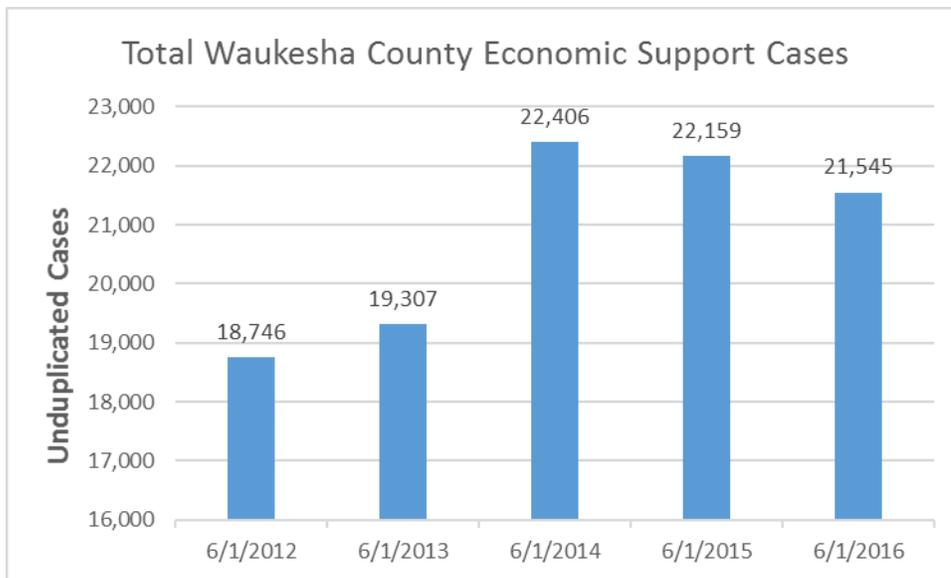
Economic Services Administration and Support (cont.)



Program Activities

Waukesha County Economic Support Caseload Data	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
Total unduplicated caseload (a)	21,858	22,700	21,900	22,000	(700)
Total Medicaid Caseload (b)	18,307	18,800	18,500	18,800	0
Total Food Share Cases (c)	9,193	10,200	9,000	9,200	(1,000)
W-2 Child Care Average Monthly Cases (d)	760	820	760	775	(45)
Call Center Average Speed of Answer (e)	5.84 minutes	5 minutes	5 minutes	5 minutes	0
Application processing Timeliness (e)	97.42%	95%	95%	95%	0

- (a) WEBI Income Maintenance Management Report – Active Case Summary;
- (b) WEBI Income Maintenance Management Report – IM Case Summary Report
- (c) WEBI Income Maintenance Management Report – IM Case Summary Report
- (d) WEBI Automated Case Directory – Child Care Case County Summary Report
- (e) State benchmarks average speed of answer is 10 minutes and application processing at 95% minimum



The increase from 6/1/2013 to 6/1/2014 was primarily due to the start of the federal market place based on the Affordable Care Act.

**Children & Family Division: In-home Safety/Out of Home Placement Services**

**Program Description**

This program area is comprised of the Child and Family Services Unit and the Permanency Services/Alternate Care Unit, which provides in-home safety services to families with a child who has been abused or neglected or are at-risk of abuse and neglect. Also, services are provided to prevent imminent placements, reunify families or establish an alternate permanent plan. Alternate Care placements include court ordered placements with relatives, foster homes, treatment foster homes, group homes, residential care centers and supervised independent living settings. Placement prevention services provide an alternative to high cost placements. Services provided to parents help prepare for family preservation, reunification or termination of parental rights and adoptions.

**Strategic Outcome: A county that assists at-risk citizens**

**Objective 5.4: Develop/Utilize Community Resources to Serve Children with Special Needs**

As a result of an increase in the complexity of the special needs of children in Waukesha County, the Department will identify, develop and/or utilize various community resources to most effectively serve and safely maintain children with chronic, disabling special needs safely in their communities. Success will be measured by parental satisfaction surveys as well as maintaining Waukesha County's low ratio of children served in out of home care settings.

**Objective Owner: Children and Family Services**

**Initiative/Action:**

1. Facilitate quarterly Special Services Advisory Committee meetings to gather community input and review resources and identified needs.
2. Develop community services in coordination with private agencies and partnering county agencies to increase the at home and community based service array.
3. Attend state, regional workgroups to advocate for funding, allocations and policies.
4. Collect and analyze data utilizing the Program Participation System to determine unmet needs and trends in target groups in order to provide feedback to community partners regarding service gaps and resource needs.
5. Determine potential community partners, identify programs and services provided by partners to match programs and services to identified needs/target groups.
6. Distribute annual parent satisfaction surveys.
7. Create and distribute resource guide to families on waiver waiting list in order to minimize crisis development.
8. Extend "child find" efforts to improve identification of children qualifying for Birth to Three services.

**Performance Measure:**

Number of Child Out-of-Home Placements as Compared to Similar Sized County Per One Thousand Residents			
County	2016 Child Population/# of kids in out of home care	2015 percent	2016 percent
Brown	62,163 / 475	0.76	.76
Kenosha	41,043 / 501	1.24	1.22
Milwaukee	234,315 / 3,333	1.47	1.42
Dane	108,126 / 727	0.64	.67
Racine	46,976 / 545	0.93	1.16
Waukesha	89,424 / 212	0.20	.23

**Children & Family Division: In-home Safety/Out of Home Placement Services (cont.)**

Measure	2016 Estimate	2017 Goal
Parent Satisfaction Rating	92.2%	95%

**Objective 5.5: Improve Trauma Assessments thus Improving Permanency Outcomes**

The Department will enhance the health, safety and wellbeing of the children and families they serve, by improving trauma assessments, teaming, and planning, thus improving permanency outcomes as evidenced by decreased time in out of home care and a reduction in system re-entries.

**Objective Owner:** Children and Family Services

**Initiative/Action:**

1. Participate in the year-long "Breakthrough Series Collaborative" to improve the use of Child and Adolescent Needs and Strengths (CANS)/Family Assessment of Needs and Strengths (FANS) with families.
2. Increase knowledge of trauma in relative caregivers, foster parents and biological parents through trainings and direct interventions.
3. Increase the knowledge of CANS/FANS assessments in relative caregivers, foster parents and biological parents through training and direct interventions.
4. Utilize the post reunification program to increase supports and services to at-risk reunified families.
5. Reassess and/or develop programs to support an improved assessment process and teaming for parents and foster parents/relative caregivers.
6. Provide increased training on teaming and CANS/FANS trauma assessments for all on-going CPS social workers.
7. Develop supervisory tools and structure to improve oversight and quality reviews of worker's practice in assessments and teaming.
8. Develop review panel for any re-entry cases to look for systemic improvements.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Positives Response Rate to CANS Survey	3.4 of 5	4.0
Minimize Time Spent in Temporary Homes	78% reunify in 12 months 100% guardianship in 24 months 55% adoption in 24 months	80% reunify in 12 months 95% guardianship in 24 months 60 % adoptions in 24 months
Increase/Maintain Stability of Placement Homes	87% 2 placements or less in 12 months 70% 2 placements or less in 13-24 months	90% 2 placements or less in 12 months 85% 2 placements or less in 13-24 months
Decrease in System Re-Entry Rates	17% re-entry rate	15% or less

**Children & Family Division: In-home Safety/Out of Home Placement Services (cont.)**

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>24.69</b>	<b>24.69</b>	<b>24.69</b>	<b>24.52</b>	<b>(0.17)</b>
General Government	\$491,333	\$512,847	\$489,089	\$491,889	(\$20,958)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$132,460	\$168,325	\$171,241	\$191,825	\$23,500
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$100,304	\$86,000	\$99,180	\$99,180	\$13,180
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$3,667,266</b>	<b>\$3,636,647</b>	<b>\$3,636,647</b>	<b>\$3,875,285</b>	<b>\$238,638</b>
<b>Total Revenues</b>	<b>\$4,391,363</b>	<b>\$4,403,819</b>	<b>\$4,396,157</b>	<b>\$4,658,179</b>	<b>\$254,360</b>
Personnel Costs	\$2,119,306	\$2,115,716	\$2,084,340	\$2,080,627	(\$35,089)
Operating Expenses	\$2,503,112	\$1,990,362	\$2,598,130	\$2,308,175	\$317,813
Interdept. Charges	\$303,678	\$297,741	\$265,855	\$269,377	(\$28,364)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$4,926,096</b>	<b>\$4,403,819</b>	<b>\$4,948,325</b>	<b>\$4,658,179</b>	<b>\$254,360</b>
<b>Rev. Over (Under) Exp.</b>	<b>(\$534,733)</b>	<b>\$0</b>	<b>(\$552,168)</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General Government revenues overall decreases by \$21,000 to \$492,000. This is mostly due to a \$37,000 decrease in Post Reunification Program revenue based on the number of eligible children participating in the program. This revenue is based on a capitated rate per eligible child. Also, funding through the Adam Walsh Fingerprint program of \$5,500 was eliminated by the State in 2016. These are partially offset by a \$21,500 increase in the IV-E Legal Reimbursement revenues.

Charges for Services revenues increase \$23,500, mainly due to revenue reimbursement related to a new clinical therapist position which was added to this program area in 2016.

Other Revenues increased by about \$13,100 to \$99,200 due to an increase in SSI/SS Collections revenue for cost of care of \$16,000, and offset by a \$3,000 decrease in General Donations revenue related to the foster family annual picnic.

Personnel costs are budgeted to decrease \$35,100 to \$2,080,600 reflecting cost savings from the turnover of positions and a 0.10 FTE or \$5,400 reduction in extra help and a 0.07 or \$6,300 reduction in overtime. This is partially offset by the cost to continue the 24.52 FTE.

Operating expenditures are budgeted to increase by about \$318,000 to \$2,308,200. The primary change is the increase of \$264,000 for Residential Care Center expenditures and \$57,000 to Foster Care due to the continued trend of higher out of home placement needs. In addition, an increase of \$20,000 is related to higher than anticipated direct costs associated with the Post Reunification Program contract services, and alternatives to placement for short term services is increased by \$11,400 to \$40,200 for continued efforts to prevent costly out of home placements. Also, these increases are partially offset by the transfer of a \$21,500 contract for Family Services to the Intake/Shared Services Division to realign the division programing and a \$10,000 decrease for respite costs to closer reflect current and prior years' experience.

Interdepartmental costs decrease by about \$28,400 mostly due to lower projected costs of interdepartmental legal services.

**Children & Family Division: In-home Safety/Out of Home Placement Services (cont.)**



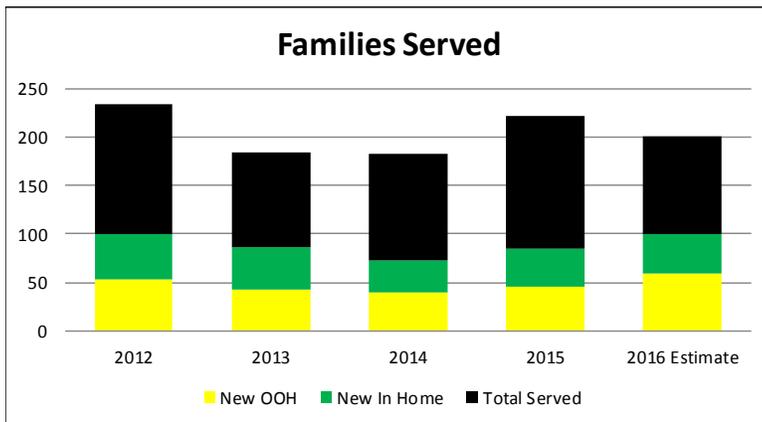
**Program Activities**

Activity	2015	2016	2016	2017	Budget
	<u>Actual</u>	<u>Budget</u>	<u>Estimate</u>	<u>Budget</u>	<u>Change</u>
<b>Total foster care</b>					
Days of Care	23,832	21,441	25,410	22,873	1,432
Foster Care expenditures	465,932	432,896	550,833	450,000	17,104
<b>Total group homes</b>					
Days of Care	153	75	366	73	(2)
Group Homes Care expenditures	28,250	15,000	60,155	15,000	0
<b>Total Residential Care Centers</b>					
Days of Care	1,437	1,210	1,736	1,455	245
Residential Care Centers expenditures	806,420	536,000	963,735	800,000	264,000
Terminations of parental rights (# of cases)	13	15	12	12	(3)

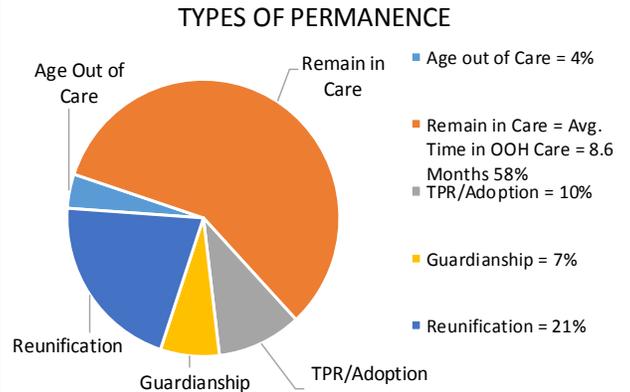
**Child and Family Unit Activity**

	2015	2016	2016	2017	Budget
	<u>Actual</u>	<u>Budget</u>	<u>Estimate</u>	<u>Budget</u>	<u>Change</u>
Total # Families Served	222	195	220	225	30
<u>Total children in:</u>					
Foster care	150	125	150	150	25
Group homes	1	1	1	1	0
Residential care	5	5	5	7	2
Number of new cases	85	95	100	100	5
In home	39	50	40	40	(10)
Out of home	46	45	60	60	15

Average length of time in out of home Care = 8.6 months



Note: New OOH = Number of New Cases Out of Home  
 New in Home = Number of New Cases In Home  
 Total served = Total # Families Served.



**Children with Special Needs Unit**

(Includes Birth to Three Program)

**Program Description**

The Children with Special Needs unit includes the following three (3) program areas: Birth to Three, Children's Long Term Support, and Children's Community Options Program. (CCOP). The Birth to Three program is a public/private partnership with Lutheran Social Services (LSS). It provides early intervention services to parents with children from birth to age three with special needs, who demonstrate at least 25% delay in one or more areas of development, or have a diagnosed condition which will likely result in developmental delays. Examples include Downs Syndrome, Autism, Spina Bifida, and Cerebral Palsy.

Another area includes the Federal/State Medicaid Home and Community Based Service Waiver for Children's Long Term Support (CLTS Waiver funding). It provides fully funded and locally-matched tax levy funding for children diagnosed with severe and chronic disabilities to purchase supports and services that enable them to remain living safely at home and in their communities.

Finally, the Children's Community Options Program (CCOP), formerly known as Family Support Program (FSP), provides fully funded State dollars to parents of children with disabilities to purchase goods or services that enable the child to remain safely living at home.

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>5.50</b>	<b>5.00</b>	<b>5.00</b>	<b>5.00</b>	<b>0.00</b>
General Government	\$2,260,490	\$2,312,215	\$2,515,878	\$2,355,778	\$43,563
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$210,924	\$203,482	\$191,775	\$191,775	(\$11,707)
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$258,563	\$265,720	\$257,707	\$257,707	(\$8,013)
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$161,941</b>	<b>(\$108,448)</b>	<b>(\$108,448)</b>	<b>(\$55,762)</b>	<b>\$52,686</b>
<b>Total Revenues</b>	<b>\$2,891,918</b>	<b>\$2,672,969</b>	<b>\$2,856,912</b>	<b>\$2,749,498</b>	<b>\$76,529</b>
Personnel Costs	\$432,256	\$409,933	\$394,879	\$404,420	(\$5,513)
Operating Expenses	\$2,039,595	\$2,220,591	\$2,472,491	\$2,301,848	\$81,257
Interdept. Charges	\$43,281	\$42,445	\$42,445	\$43,230	\$785
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$2,515,132</b>	<b>\$2,672,969</b>	<b>\$2,909,815</b>	<b>\$2,749,498</b>	<b>\$76,529</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$376,786</b>	<b>\$0</b>	<b>(\$52,903)</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

In response to a Federal mandate, many Autism Waiver Services were transitioned to Medicaid card services throughout 2016 and are no longer funded through the CLTS waiver. The exact budget implications are unknown at this time.

General Government revenues increase by \$43,600 to \$2,355,800 primarily due to an \$84,000 increase in Case Management for the CLTS program, as well as a \$46,300 transfer in of the Children's Community Option Program (COP) allocation from the Clinical division which brings the funding total to \$301,600. This is offset by an \$86,000 decrease in Indirect Cost reimbursement revenues for the CLTS program of \$1,707,700. The 2017 budget also includes the Birth to Three Program allocation of \$547,900, which is unchanged.

Charges for services decrease by \$11,700 primarily due to a change in state programming with the implementation of the Children's COP program.

**Children with Special Needs Unit (cont.)**

Other revenues decrease by about \$8,000 due to a lower volume of pass-through reimbursements of CLTS related costs authorized by Waukesha County for certain vendors unable to directly bill the CLTS third-party administrator. These revenues are directly offset by CLTS client expenses.

Personnel costs decrease by about \$5,500 to \$404,400 primarily due to employee turnover offset by cost to continue.

Operating expenditures are budgeted to increase by about \$81,300 to \$2,301,900. This is primarily due to an increase to Children's COP expenditures of \$42,000, which is offset by the increase in the revenue allocation. This is also due to an increase to Birth to Three program of \$35,000 related to programming staff needs. In addition, there is a decrease of \$8,000 for pass-through expenditures of CLTS related costs authorized by Waukesha County for certain vendors unable to directly bill the CLTS third-party administrator.

Interdepartmental costs increase by about \$800 mostly as a result of changes to the End User Technology Fees.



**Program Activities**

(Includes Birth to Three Program)

<b>Birth to Three Activity</b>	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
Total # children enrolled on Oct.1st	200	240	217	225	(15)
Total # children served in B-3	528	550	560	565	15
Total # children served in Trauma At-risk	53	45	46	45	0
Total # children served in Centralized Intake	642	700	693	700	0

Percentage of children 5 and under served in Waukesha County = 642 kids served in Centralized Intake, at risk and B-3 – Waukesha County population 5 and under = 20,409 = 3% of WC population 5 and under served (US Census Bureau).

<b>Childrens Long Term Support (CLTS) Waiver Activity</b>	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
Total # of Children Served:	568	585	570	595	10
Autism Waiver	260	250	0	0	(250)
Non-autism Waiver	186	195	450	475	280
Children's COP Program	122	140	120	120	(20)
Number of New Autism Waiver Slots	30	0	0	0	N/A
Number of Closed Autism Waiver Slots	23	*Unknown	*Unknown	0	N/A
Number of new non-autism cases	60	40	10	25	(15)
Number of closed non-autism cases	18	30	20	15	(15)
Number of kids on waiting list for Children's COP Program or waiver support	263	348	280	310	0

\*Future estimates of children served will be impacted by State mandated changes.

**Children with Long-Term Support Needs (CLTS) Third Party  
Administrator (informational only)**

**Program Description**

During 2010, the Centers for Medicare and Medicaid Services required that renewal of the Children's Long Term Support (CLTS) comply with federal regulations for implementing a standardized, statewide Medicaid Management Information System for processing provider claims and encounter level data reporting no later than December 31, 2011. The State of Wisconsin Department of Health Services selected Wisconsin Physicians Service (WPS) as the contracted vendor for the Third Party Administrator (TPA) claims implementation. All County Waiver Agencies (CWA) claims were paid through WPS, removing it from being recorded on the County financial records. Early in 2013, the State issued an opinion that payments that the TPA makes to service providers are grant expenditure and they must be treated as such in 2013 and future audits and be included on the Schedule of Expenditure of Federal and State Awards (SEFSA).

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
General Government	\$4,463,441	\$4,550,278	\$4,233,212	\$4,233,212	(\$317,066)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$0	\$0	\$0	\$0	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Total Revenues</b>	<b>\$4,463,441</b>	<b>\$4,550,278</b>	<b>\$4,233,212</b>	<b>\$4,233,212</b>	<b>(\$317,066)</b>
Personnel Costs	\$0	\$0	\$0	\$0	\$0
Operating Expenses	\$4,463,441	\$4,550,278	\$4,233,212	\$4,233,212	(\$317,066)
Interdept. Charges	\$0	\$0	\$0	\$0	\$0
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$4,463,441</b>	<b>\$4,550,278</b>	<b>\$4,233,212</b>	<b>\$4,233,212</b>	<b>(\$317,066)</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

In response to a Federal mandate many Autism Waiver Services are becoming Medicaid card services throughout 2016 and will no longer be funded through the CLTS waiver. The exact budget implications are unknown at this time.

General Government pass through revenues decrease by \$317,000 to \$4,233,200 related to the anticipated changes in the funding from the State of Wisconsin. There is no tax levy impact to this transaction as the revenue and expenses are pass through as required by the State of Wisconsin and are informational only transactions.

Operating Expenses pass through expenses decrease by \$317,000 to \$4,233,200 related to the anticipated changes in the funding from the State of Wisconsin. There is no tax levy impact to this transaction as the revenue and expenses are pass through as required by the State of Wisconsin and are informational only transactions.

## Family Services & Juvenile Services

### Program Description

Provide court intake services, court supervision and treatment to delinquent youth, as well as juveniles and children in need of protection or services. Services to these children and their families are directed at maintaining the children in their own homes and communities, reducing delinquency recidivism and promoting family and public safety. Services include intake assessments; regularly scheduled family and individual meetings; collaboration with schools and academic programs; monitoring compliance with court orders and school attendance; conflict resolution; case coordination; group counseling; and independent living training/preparation. In-home treatment team services, intensive tracking; home detention; youth accountability groups; mediation; and electronic monitoring are provided through contracts. In addition to these in-home services, monitoring and coordination of Correctional and Correctional Aftercare placements, and monitoring and coordination of Foster Care, Group Home and Residential Care Center placements of delinquent youth and juveniles in need of protection and services are provided.

**Strategic Outcome: A county that provides customers with quality programs and services**

#### **Objective 6.1: Maintain a Practice of Continuous Quality Improvement (CQI)**

Maintain a practice of continuous quality improvement through annual program evaluations utilizing evidence based standards.

**Objective Owner:** Clinical Services, Adolescent and Family Services

#### **Initiative/Action (Adolescent and Family Services):**

1. Develop a system to assess policies and procedures.
2. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
3. Train staff in the 18 month Carey Group's Evidence Based Briefcase series using Unit meetings to train all staff on a monthly basis.
4. Provide pre-test and post-testing to determine level of staff understanding.

#### **Performance Measure:**

Measure	2016 Goal	2016 Actual	2017 Goal
Policies and Procedures Assessed for Quality Improvement	3	8	8
Quality Improvement Projects Initiated and/or Completed	1	1	1
Pre and Post Test Improvement Ratio	75	75	75

**Family Services & Juvenile Services (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>39.50</b>	<b>38.50</b>	<b>38.50</b>	<b>37.50</b>	<b>(1.00)</b>
General Government	\$3,659,980	\$3,636,634	\$3,626,108	\$3,536,656	(\$99,978)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$158,116	\$149,700	\$170,362	\$158,200	\$8,500
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$53,814	\$63,000	\$54,802	\$54,802	(\$8,198)
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$2,846,571</b>	<b>\$2,530,004</b>	<b>\$2,530,004</b>	<b>\$2,457,255</b>	<b>(\$72,749)</b>
<b>Total Revenues</b>	<b>\$6,718,481</b>	<b>\$6,379,338</b>	<b>\$6,381,276</b>	<b>\$6,206,913</b>	<b>(\$172,425)</b>
Personnel Costs	\$3,561,263	\$3,538,401	\$3,551,545	\$3,475,290	(\$63,111)
Operating Expenses	\$2,444,459	\$2,700,552	\$2,523,691	\$2,476,611	(\$223,941)
Interdept. Charges	\$244,130	\$140,385	\$256,509	\$255,012	\$114,627
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$6,249,852</b>	<b>\$6,379,338</b>	<b>\$6,331,745</b>	<b>\$6,206,913</b>	<b>(\$172,425)</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$468,629</b>	<b>\$0</b>	<b>\$49,531</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General Government revenues are budgeted to decrease by nearly \$100,000 to \$3,536,700, primarily due to a decrease in the Youth Aids allocation of \$73,000 to \$3,347,100 as the result of a declining trend in correctional placements. There is also a decrease in the state's Independent Living revenues of \$21,000 as the program is scheduled to transition from a County allocation to a private consortium by June 30, 2017.

Charges for Service revenues are budgeted to increase slightly by \$8,500 to \$158,200 based on an increasing population of juveniles on supervision.

Other Revenues for SSI/SS Collections for cost of care decrease by \$8,200 based on fewer adolescents in out of home care who are receiving benefits.

Personnel costs are budgeted to decrease by about \$63,100 to \$3,475,300. This is due to unfunding a 1.0 FTE social worker and offset by the cost to continue of the 37.5 FTEs.

Operating expenditures are budgeted to decrease by \$224,000 to \$2,476,600. This is primarily due to the elimination of the contract for educational support of \$228,758. This programming will be provided by the respective school districts. A transfer of \$25,000 was made from Juvenile Corrections budget to contracted services due to a decline in Correctional placements and the need to find alternative ways to support children in their schools.

Interdepartmental charges increase by approximately \$114,600 to \$255,000 due primarily to an \$81,600 increase in Interdepartmental legal charges which includes a transfer from Administrative Services to the Adolescent and Family Services budget to more appropriately align with division usage. The Interdepartmental collections fee budget of \$32,000 was also transferred from the Juvenile Center division to be consistent with how collection fees are reflected across the programs.

**Family Services & Juvenile Services (cont.)**



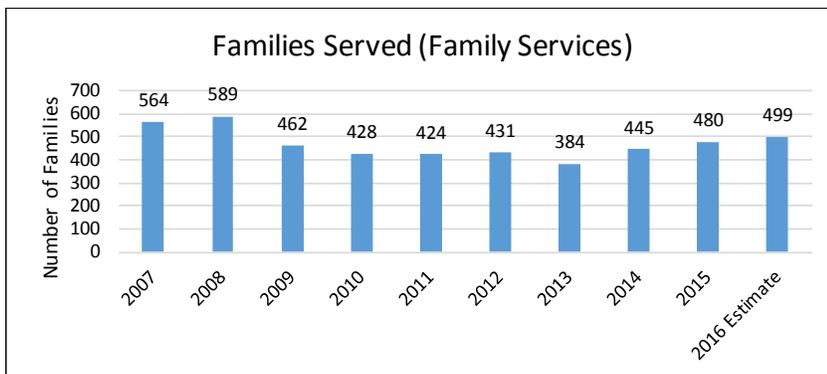
**Program Activities**

	2015 <u>Actual</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
Number of families served (Family Services) (a)	475	480	499	515	35
Number of families served (Juvenile Services)	256	245	299	305	60
Custody Intake decisions (b)	391	400	473	450	50
Court Intake Referrals (c)	513	490	664	670	180
Days of Care of juveniles in State correctional institutions	460	766	226	673	(93)
Total State charges for correctional institution placement	\$135,332	\$223,586	\$64,184	\$198,586	(25,000)

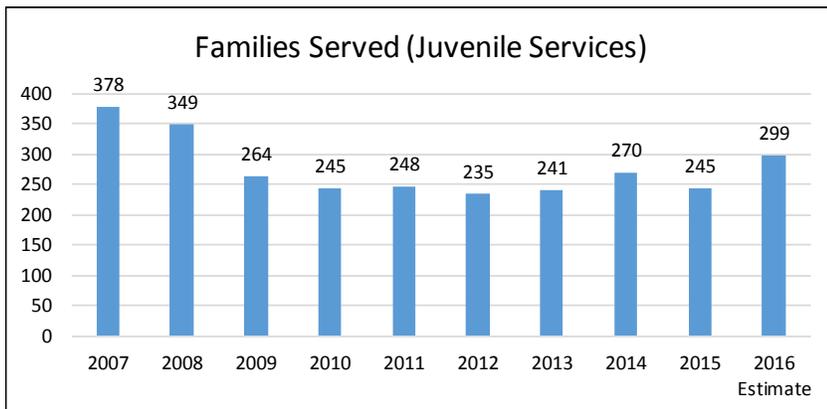
(a) An increase in the 2016 estimated number of families served in Family Services is due in part to a continued increase in the overall number of truancy referrals, including an increased number of younger children being referred.

(b) Custody Intakes have fluctuated historically and can be significantly affected by a relatively small group of youth who have repeated acting out behavior at home and/or run away from home.

(c) The 2016 increase in estimated Court Intakes reflects increased truancy intakes and increased delinquency intakes. Historically truancy referrals have fluctuated year-to-year, while delinquency referrals on a national, state and county level have generally decreased over the past 10 years.

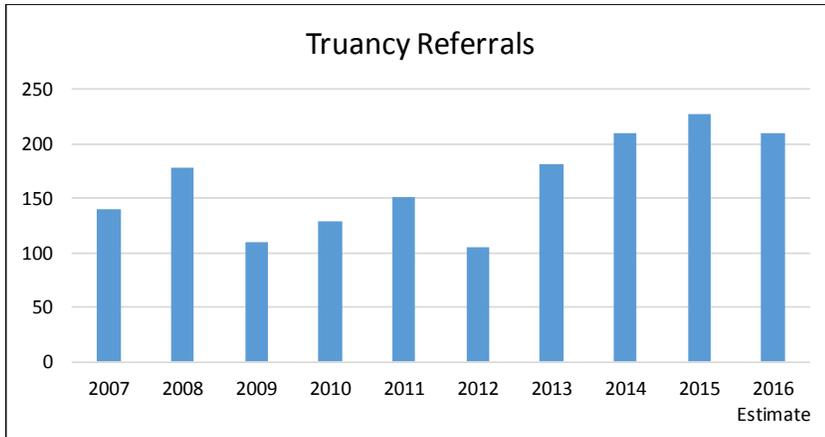


The number of families served has increased steadily since reaching a low in 2013. The increases are largely due to a high number of truancy referrals.

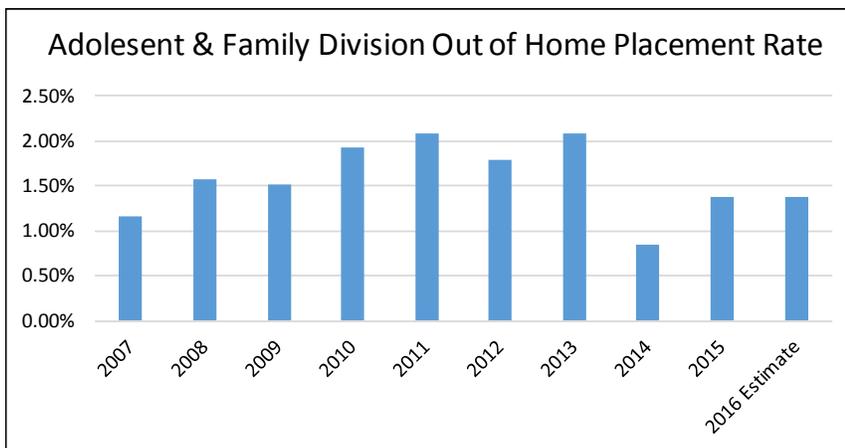


The number of families served continues to be in a relatively narrow range since 2009, at a level that is significantly lower than the period prior to that year. This lower range reflects an overall Federal and statewide trend of reduced youth delinquency referrals over the past 10 years.

**Family Services & Juvenile Services (cont.)**

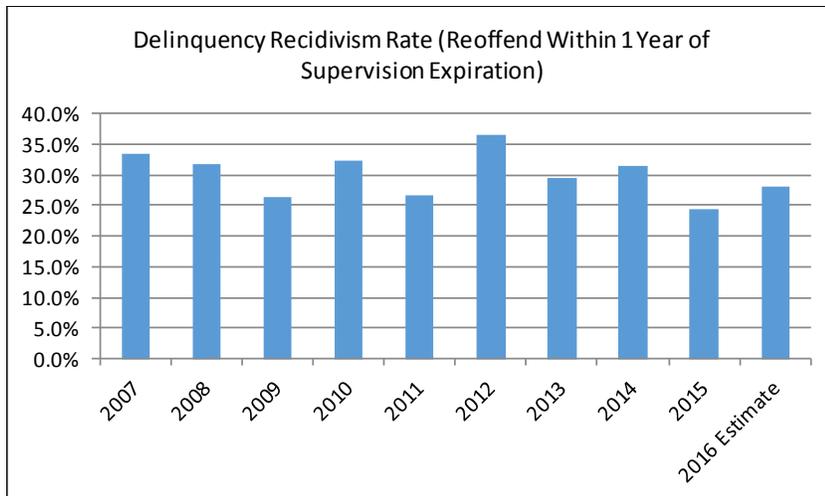


The number of truancy referrals has continued the pattern of volatility. Among the factors that can affect these numbers are the use of municipal truancy citations, which are not referred to the Department, and the use of computer-based home school programs, reducing the likelihood of truancy referrals in those cases. Over the past several years there has been a significant increase in truancy referrals for young, elementary school age children.



Through the use of a broad array of community-based services, the Division has maintained an extremely low out of home placement rate over the past 10 years. Although various reductions were required due to reduced State and Federal funding, staff and providers continue to achieve results that have generally maintained the placement rate at or below the target of 2%. Diligent efforts continue to be made to maintain young people in their homes whenever appropriate and to minimize the length of time in placement.

**Family Services & Juvenile Services (cont.)**



The recidivism rate shows the percentage of youth who reoffend within one year of the end of their Court supervision. A substantial majority of these youth do not reoffend during that time.

<b>Alternate Care Activity</b>	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
Total children in foster care	20	18	24	21	3
Days of Care	3,657	3,711	5,807	3,750	39
Foster Care expenditures	\$260,436	\$289,844	\$381,620	\$289,844	0
Total youth in group homes	2	3	1	3	0
Days of Care	110	499	366	497	(2)
Group Home expenditures	\$21,731	\$99,440	\$71,869	\$99,440	0
Total youth in Residential Care Centers	14	10	12	10	0
Days of Care	2,026	1,631	1,894	1,878	247
Residential Care Centers expenditures	\$673,298	\$653,200	\$641,956	\$653,200	0

**Juvenile Center**

**Program Description**

Provides 24-hour care and supervision to delinquent and status offender youth who are court-ordered to be held in boy's secure detention at the Juvenile Center. Physical custody determinations are provided by Juvenile Center supervisory staff. On grounds schooling is provided, as well as daily structured activities. Nursing, dietician and physician services are provided through contracts. Beginning in 2012, female secure detention services were purchased from the Washington County Juvenile Detention Facility. Effective July 1, 2015, Lad Lake, Inc. began providing male and female Shelter Care services through a contract at a licensed Residential Care Center located in Dousman, WI.

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>16.52</b>	<b>10.03</b>	<b>10.03</b>	<b>10.03</b>	<b>0.00</b>
General Government	\$54,374	\$43,901	\$43,901	\$43,901	\$0
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$159,179	\$190,000	\$174,802	\$180,000	(\$10,000)
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$0	\$30,000	\$30,000	\$30,000	\$0
<b>County Tax Levy (Credit)</b>	<b>\$1,505,735</b>	<b>\$1,436,489</b>	<b>\$1,436,489</b>	<b>\$1,521,415</b>	<b>\$84,926</b>
<b>Total Revenues</b>	<b>\$1,719,288</b>	<b>\$1,700,390</b>	<b>\$1,685,192</b>	<b>\$1,775,316</b>	<b>\$74,926</b>
Personnel Costs	\$1,175,492	\$737,049	\$748,020	\$759,651	\$22,602
Operating Expenses	\$546,681	\$878,990	\$923,860	\$955,753	\$76,763
Interdept. Charges	\$83,154	\$84,351	\$38,870	\$59,912	(\$24,439)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$1,805,327</b>	<b>\$1,700,390</b>	<b>\$1,710,750</b>	<b>\$1,775,316</b>	<b>\$74,926</b>
Rev. Over (Under) Exp.	(\$86,039)	\$0	(\$25,558)	\$0	\$0

 **Program Highlights**

General Government revenue from Basic County Allocation and Youth Aids is budgeted to remain at the 2016 budget of \$43,901.

Charges for Services decrease by \$10,000 due to collection trend from clients.

Fund Balance of \$30,000 is budgeted to cover short-term, temporary costs for female secure detention.

Personnel costs increase by about \$22,600 to \$759,700 for 10.03 FTE's due to cost to continue.

Operating expenditures are budgeted to increase by about \$77,000 to \$955,800 mainly due to an increase of about \$38,000 for additional short-term, temporary female secure detention costs, as well as \$16,700 cost of living increase related to the shelter care contract. This also includes \$20,000 for additional physical plant improvements specific to the shelter care contract, to deter youth from leaving.

Interdepartmental charges decrease \$24,500 to \$59,900, due to the transfer of the collections fee budget of \$24,000 to the Adolescent and Family Services division to be consistent with how collection fees are reflected across the programs.

Juvenile Center (cont.)

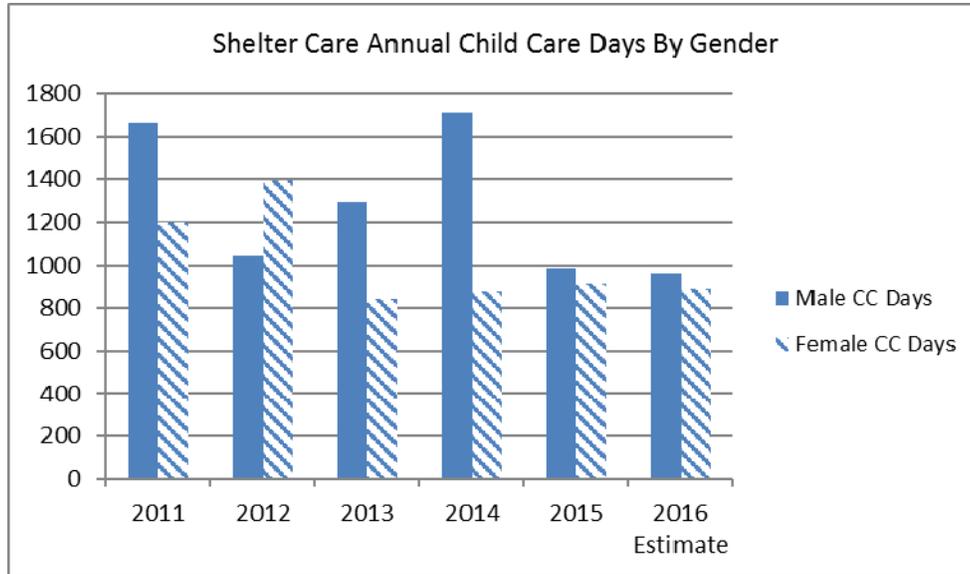


Program Activities

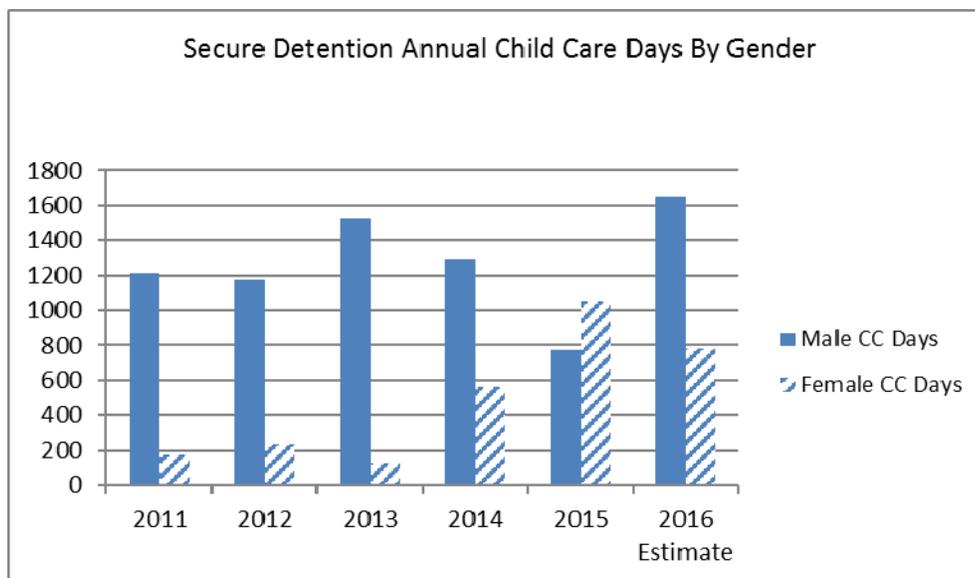
Activity (a)	2015 <u>Actual</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
<u>Non-Secure Detention/Shelter Care</u>					
# of Child Care Days – County Residents	1,843	1,800	1,848	2,096	296
# of Child Care Days – Out of County Residents	56	0	0	0	0
<b>Total # of Child Care Days</b>	<b>1,899</b>	<b>1,800</b>	<b>1,848</b>	<b>2,096</b>	<b>296</b>
Average daily population	5.2	4.9	5.0	5.7	0.80
<u>Secure Detention at Waukesha County Juvenile Center (Males Only)</u>					
# of Child Care Days – County Residents	676	800	1230	1132	332
# of Child Care Days – Out of County Residents	95	75	417	200	125
<b>Total # of Child Care Days</b>	<b>771</b>	<b>875</b>	<b>1647</b>	<b>1332</b>	<b>457</b>
Average daily population at center	2.1	2.4	4.5	3.6	1.20
<u>Contracted Secure Detention at Washington County Facility (Females Only) (b)</u>					
# of child care days purchased	1,049	324	783	640	316
Average daily population	2.9	0.9	2.1	1.8	0.90

- (a) Residents who spend a portion of a day in Shelter Care or Secure Detention are included in the # of child care days provided.  
 (b) Contract with Washington County started in 2012.

Juvenile Center (cont.)



While the number of child care days for both genders has fluctuated over this period, the total child care days for males has, with the exception of 2012, been higher than that for females.



The number of child care days has consistently been significantly higher for males than for females, with the exception of 2015. This reflects the placement by the Adult Court of two adolescent females for extended periods of time in the Washington County Secure Detention Facility.

Mental Health Outpatient-Clinical

**Program Description**

The Clinical Services Division provides behavioral medicine, treatment and support services to citizens of Waukesha County who are experiencing symptoms of mental health and substance abuse disorders. The service delivery system is consistent with State Statute Chapter 51 requirements and applicable state and federal regulations. The array of services creates a continuum of care including diagnostic services, medication management, crisis intervention, individual and group therapy, case management, independent living training, peer support, residential rehabilitation, and acute psychiatric inpatient treatment. Services are individualized to maximize each client’s independence, recovery, self-management of symptoms, and to prevent relapse.

The Mental Health Outpatient Clinic provides state certified Outpatient Mental Health Clinic, Substance Abuse Service, and Crisis Intervention Service serving children, youth, and adults. The Children’s Mental Health Outreach Service provides case management and individualized services to families with children experiencing severe emotional disorders. The staff includes the professional services of psychiatrists and an advanced practice nurse practitioner for psychotropic medication management with support services available to uninsured clients to access patient assistance programs and low-cost medication plans. Access to specialized inpatient services at the State Mental Health Institutes including geropsychiatry, child psychiatry and secure placements for adults are initiated and monitored through the outpatient clinic.

**Strategic Outcome: A county that provides customers with quality programs and services**

**Objective 6.3: Improve Service to Scheduled Treatment Sessions**

Improve service utilization, reduce wait times, and increase adherence to scheduled treatment sessions by making optimal use of the transition to electronic records in the outpatient mental health and substance abuse services clinic.

**Objective Owner:** Clinical Services

**Initiative/Action:**

1. Assess the benefits and efficacy of expanding business hours in the outpatient mental health and substance abuse services clinic.
2. Evaluate the volume of intakes and on-going individual and group treatment contacts to determine baseline measures of wait times and “no shows”.
3. Research models of improved access such as Same Day Access and Just in Time Scheduling.
4. Implement enhanced array of evidence based practices such as collaborative documentation, recovery education and group-based peer support curriculums.
5. Continue with efforts to build a workforce of dually credentialed staff trained to provide mental health, substance abuse and integrated treatment interventions.

**Performance Measure:**

Measure	2015 Actual	2016 Estimate	2017 Goal
Average # of days pending intake assessment	33	30	3
“No Show” rate	30%	32%	10%

Mental Health Outpatient-Clinical (cont.)

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>32.21</b>	<b>33.48</b>	<b>33.48</b>	<b>36.03</b>	<b>2.55</b>
General Government	\$1,027,553	\$1,044,047	\$822,811	\$822,811	(\$221,236)
Fine/Licenses	\$349,287	\$371,112	\$357,002	\$357,002	(\$14,110)
Charges for Services	\$901,924	\$756,741	\$815,903	\$963,626	\$206,885
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$1,401,960	\$1,451,888	\$1,630,351	\$1,430,344	(\$21,544)
Appr. Fund Balance	\$0	\$0	\$0	\$260,000	\$260,000
<b>County Tax Levy (Credit)</b>	<b>\$4,255,016</b>	<b>\$4,280,294</b>	<b>\$4,280,294</b>	<b>\$5,268,821</b>	<b>\$988,527</b>
<b>Total Revenues</b>	<b>\$7,935,740</b>	<b>\$7,904,082</b>	<b>\$7,906,361</b>	<b>\$9,102,604</b>	<b>\$1,198,522</b>
Personnel Costs	\$3,396,935	\$3,710,413	\$3,480,581	\$3,879,707	\$169,294
Operating Expenses (a)	\$4,289,182	\$3,885,400	\$4,961,101	\$4,885,091	\$999,691
Interdept. Charges	\$335,702	\$308,269	\$338,503	\$337,806	\$29,537
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$8,021,819</b>	<b>\$7,904,082</b>	<b>\$8,780,185</b>	<b>\$9,102,604</b>	<b>\$1,198,522</b>

Rev. Over (Under) Exp.	(\$86,079)	\$0	(\$873,824)	\$0	\$0
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(a) The 2016 operating expenses are estimated to exceed the 2016 budget related to greater than anticipated costs for placements of county residents receiving treatment at state mental health institutions.

 **Program Highlights**

General Government revenues decrease by \$221,200 to \$822,800 primarily as a result of consolidation of several state grants and allocation of the new consolidated grant to intensive outpatient services, and a result of a reduction of \$18,800 to a state grant for children with severe emotional disturbance. Other state funding remains constant: \$521,500 in AODA block grant funding, \$169,500 in Mental Health block grant funding, and \$48,900 in the State Basic County Allocation for Child Abuse and Neglect services.

Fines and License revenues reflect a decrease in the amount of \$14,100 to \$357,000 to reflect prior year activity levels of Intoxicated Driver Program surcharge revenues.

Charges for Services consist of client fee revenues, which are budgeted to increase by \$206,900 to \$963,600 based on current year estimates and additional revenue for crisis services as well as transitioning towards open access for mental health clinic services.

Other Revenues are budgeted to decrease \$21,500 related to a decrease of \$77,000 in Supplemental Security Income (SSI)/Social Security collections revenues, where the County is the protective payee for mental health clients. The decrease in revenue is partially offset by an increase of \$52,700 to \$655,200 in collections for adult and children located at the State Mental Health Institute. Wisconsin Medical Assistance Cost Reporting (WIMCR) program reimbursements increases by \$2,800 to reflect the current funding distribution between county health and human services programs at the 2002 established Maintenance of Effort.

A fund balance increase of \$260,000 provides one-time funding for increased costs for placements at state mental health institutions.

Personnel costs increase by approximately \$169,300 to \$3,879,700, mainly for the cost to continue for 36.03 FTE staff assigned to this program. The budget includes \$160,900 of funding for 2.04 FTE for temporary extra help staff, and transfers 2.00 FTE Clinical Therapists from the Aging and Disability Resource Center division, as well as 0.23 FTE Weekend Registered Nurse and 0.10 FTE Senior Clinical Psychologist from the Mental Health Center, for the purpose of implementing 24/7 crisis services mandated by the 2015 State of Wisconsin Act 55. The budget also includes the cost to continue for other extra help based on current year actuals. In addition, 1.00 FTE Clinical Therapist is transferred to the Mental Health Outpatient-Intensive program area to more accurately reflect the work performed.

Mental Health Outpatient-Clinical (cont.)

Operating Expenditures increase \$999,700 to \$4,885,100 which includes a budget increase of \$648,500 to \$1,654,800 to Adult State Mental Health Institute costs related to an increase in the number of days of care by 748 to 1,520. In addition, there is an increase of \$213,400 to \$592,100 for children placed at the State Mental Health Institutes related to an increase in the number of days of care by 211 to 486. Costs related to emergency detentions at mental health facilities may decline in future years related to 24/7 crisis intervention services, as these assessments include consideration of least restrictive alternatives. Also, contracted psychiatric services costs increase by \$337,600 due to additional psychiatric services for children and the cost to continue for existing contracted psychiatrists. Contracted AODA services increase by \$59,700 based on increased costs for residential and detoxification services. These increases are partially offset by a decrease in Mental Health and AODA related pharmaceutical costs of \$278,600 due to increased efficiencies associated with the use of a contracted, on-site pharmacy.

Interdepartmental Charges reflects a net increase of about \$29,500 to \$337,800, related to an increase in Sheriff department transportation costs of \$41,900 to \$89,000, which reflects the cost to continue as well as a projected increase in client trips based on current year estimates. These charges are partially offset by a decrease in collection activity of \$21,700 to \$78,000, as collection efforts of prior year claims begin to stabilize.



**Program Activities**

	2015	2016	2016	2017	Budget
<b>Activity – MH Outpatient Clinical</b>	Actual	Budget	Estimate	Budget	Change
Outpatient – MH - Unduplicated count	2,572	2,450	2,550	2,600	150
Outpatient – MH – Visit	16,998	17,500	17,850	18,000	500
Outpatient – AODA – Unduplicated Count	951	1,100	1050	1,050	(50)
Outpatient AODA Visits	12,811	13,000	13,650	15,110	2,110
Clients Receiving Detox	50	80	48	50	(30)
Detoxification: Days of Care	139	150	123	130	(20)
AODA Residential: Days of Care	4,414	4,500	4,291	4,500	0
State Institutes Payments: Days of Care (children)	515	275	657	486	211
State Institutes Payments: Days of Care (adults)	1,346	772	1,570	1520	748

Mental Health Outpatient-Intensive

**Program Description**

The Mental Health Outpatient Intensive program (located at the Mental Health Center) is comprised of two units. The Treatment and Support Services Unit (TSSU) provides an array of community based mental health services to residents of Waukesha County through two state certified programs, Comprehensive Community Services (CCS) and Adult Mental Health Day Treatment. The second unit is the State certified Community Support Program (CSP). Additional services are provided through Targeted Case Management and Community Recovery Services (CRS) benefits for eligible clients.

Residential Care in group homes, adult family homes and institutional settings is provided through contracts with multiple specialized programs throughout Wisconsin.

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>21.97</b>	<b>21.18</b>	<b>21.18</b>	<b>22.29</b>	<b>1.10</b>
General Government	\$567,653	\$547,838	\$692,352	\$692,352	\$144,514
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$2,552,569	\$3,915,556	\$3,974,846	\$4,063,822	\$148,266
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$759,805	\$271,883	\$292,609	\$282,609	\$10,726
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$4,150,091</b>	<b>\$3,901,189</b>	<b>\$3,901,189</b>	<b>\$3,519,525</b>	<b>(\$381,664)</b>
<b>Total Revenues</b>	<b>\$8,030,118</b>	<b>\$8,636,466</b>	<b>\$8,860,996</b>	<b>\$8,558,308</b>	<b>(\$78,158)</b>
Personnel Costs	\$1,920,445	\$1,951,224	\$2,146,996	\$2,074,626	\$123,402
Operating Expenses	\$5,876,800	\$6,455,268	\$6,181,776	\$6,249,760	(\$205,508)
Interdept. Charges	\$242,930	\$229,974	\$230,757	\$233,922	\$3,948
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$8,040,175</b>	<b>\$8,636,466</b>	<b>\$8,559,529</b>	<b>\$8,558,308</b>	<b>(\$78,158)</b>
Rev. Over (Under) Exp.	(\$10,057)	\$0	\$301,467	\$0	\$0

 **Program Highlights**

General Government revenue increases by \$144,500 to \$692,400 as a result of the consolidation of several state grants and allocation of the new consolidated grant to intensive outpatient services. The \$603,700 consolidated grant combined funds previously received through the community options program (COP) grant, the CSP waitlist grant, and the certified mental health programs grant. The allocation of Basic County Allocation for the Community Support Program funding is maintained at \$88,600.

Charges for Service revenues are budgeted to increase by about \$148,300 to \$4,063,800. This reflects a budgeted increase in client fee revenue for services billed to Medicaid for the Comprehensive Community Services (CCS) program by \$177,300 to \$2,658,000, based on an estimate of total expenses for which reimbursement will be available under the state's cost-based reimbursement model. Community Recovery Services (CRS) client fee revenue increases by \$63,100 to \$584,800 based on prior year actual revenues. The increases are partially offset by a decrease in Community Support Program (CSP) revenue by \$100,000 to \$744,300 based on lower revenue as a result of fewer clients with Medicaid eligibility.

Other Revenue increases by \$10,700 to \$282,600 to reflect the current distribution for funding received for the State of Wisconsin Medical Assistance Cost Reporting (WIMCR) cost based reimbursement program. This state funding allocation to WCDHHS is budgeted to remain at the 2002 Maintenance of Effort.

Mental Health Outpatient-Intensive (cont.)

Personnel costs are budgeted to increase by \$123,400 to \$2,074,600. Personnel costs reflect the transfer of a 1.00 FTE clinical therapist from the Mental Health Outpatient-Clinical program area as well as an increase of 0.10 FTE of extra help based on an estimate of current year actuals and the addition of extra help in the CCS program to perform quality assurance activities.

Operating expenditures are budgeted to decrease by about \$205,500 to nearly \$6,249,800. This reflects a decrease of \$105,000 in the treatment component for the CCS program and a decrease of \$271,600 in the treatment component for CRS based on lower Medicaid eligible caseloads. In addition, operating expenses decrease by \$16,300 for office equipment and \$5,500 for medication costs. These decreases are partially offset by an increase of \$99,800 for specialized residential treatment costs. In addition, contracted treatment services and support costs increase by \$89,700 due to increases in use of contracted staff whose current professional credentials have allowed for increased billing.

Interdepartmental Charges increase by \$3,900 to \$233,900 mainly due to increases in computer maintenance and information system charges.



**Program Activities**

	2015	2016	2016	2017	Budget
<b>Activity – MH Outpatient Intensive</b>	Actual	Budget	Estimate	Budget	Change
CCS (Comprehensive Community Services) Number of Clients	132	135	145	145	10
CSP (Community Support Program) Number of Clients	185	191	191	191	0
Case Management Number of Clients	76	70	70	70	0
CCS Program Days	10,573	12,155	13,559	13,559	1,404
CRS Program Days	5,460	6,588	6,113	6,113	(475)
Specialized Residential Program Days	11,467	10,788	9,679	9,679	(1,109)
Total Residential Days of Care	27,500	29,531	29,351	29,351	(180)
CCS Hours of Care	5,397	5,913	5,400	5,400	(513)
CRS Hours of Care	3,205	3,901	3,250	3,250	(651)
Total Residential Hours of Care	8,602	9,814	8,650	8,650	(1,164)

**Mental Health Center**

**Program Description**

This budget reports the financial operations of the Mental Health Center (MHC) inpatient hospital for accounting purposes and State/Federal reporting including federal/state Medicare Cost Report requirements. This program provides for all services related to admissions to the hospital for psychiatric emergency and other psychiatric hospitalizations and related support services.

The inpatient hospital program of the Mental Health Center provides 24-hour care including assessment, intervention, diagnosis and treatment for individuals with acute and chronic mental illnesses requiring diagnosis; medication monitoring and stabilization; individual, couple, and group counseling; and development of aftercare services. Alcohol detoxification management services are also provided. The facility has a capacity of 28 on two 14 bed units, and serves court-involved and voluntary patients.

**Strategic Outcome: A county that assists at-risk citizens**

**Objective 5.2: Increase and Improve Access to Suicide Prevention Resources**

Increase and improve access to suicide prevention resources by developing a community wide network focused on reducing Emergency Detentions by reassessing crisis services, implementing Question, Persuade, Refer (QPR) protocol, providing Crisis Intervention Trainings and working closely with veterans to connect them with behavioral health treatment and support services.

**Objective Owner:** Clinical Services, Veterans Affairs

**Initiative/Action (Clinical Services):**

1. Include veteran’s issues in CIT trainings.
2. Provide intra-departmental training on available crisis services.
3. Provide QPR education to youth, families and community staff.
4. Expand training on DHS 34 Crisis Intervention Services to all staff who meet qualification standards as mental health professionals.
5. Provide information on Impact-211 to all clients at intake and upon standard program or treatment review.
6. Explore enhancement of mobile crisis services to 24/7 basis to respond to the needs of subjects under consideration for emergency detention by law enforcement.
7. Collaborate with statewide initiatives using the Zero Suicide approach and bring training opportunities to service providers within Waukesha County.

**Performance Measure:**

Measure	2015 Actual	2016 Estimate	2017 Goal
Number of Chapter 51 Interventions within the Calendar Year	911	840	787

**Mental Health Center (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>47.74</b>	<b>48.72</b>	<b>48.72</b>	<b>49.11</b>	<b>0.39</b>
General Government	\$0	\$0	\$0	\$0	\$0
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$3,088,497	\$2,822,044	\$2,819,696	\$2,994,314	\$172,270
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$132,050	\$45,486	\$45,486	\$224,220	\$178,734
<b>County Tax Levy (Credit)</b>	<b>\$3,351,591</b>	<b>\$3,694,937</b>	<b>\$3,694,937</b>	<b>\$3,543,809</b>	<b>(\$151,128)</b>
<b>Total Revenues</b>	<b>\$6,572,138</b>	<b>\$6,562,467</b>	<b>\$6,560,119</b>	<b>\$6,762,343</b>	<b>\$199,876</b>
Personnel Costs	\$4,327,796	\$4,696,928	\$4,684,981	\$4,849,951	\$153,023
Operating Expenses	\$1,181,351	\$1,084,437	\$951,606	\$938,347	(\$146,090)
Interdept. Charges	\$838,152	\$766,102	\$777,147	\$899,045	\$132,943
Fixed Assets	\$0	\$15,000	\$15,000	\$75,000	\$60,000
<b>Total Expenditures</b>	<b>\$6,347,299</b>	<b>\$6,562,467</b>	<b>\$6,428,734</b>	<b>\$6,762,343</b>	<b>\$199,876</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$224,839</b>	<b>\$0</b>	<b>\$131,385</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

Charges for services increase by \$172,300 to \$2,994,300 primarily due to client fee revenues related to the 28 bed adult psychiatric hospital for the acute treatment of mental health including symptom stabilization, medication adjustment and emergency detentions (voluntary or involuntary) including Commercial Insurance, Medicare/Medicaid and self pay reimbursements based on increases in insurance and Medicaid managed care reimbursements and higher census related to contracts for services with surrounding counties.

Appropriated Fund Balance increases by \$178,700 to \$224,200 and is budgeted to cover equipment replacement and building improvement items that are needed to remain in compliance with State/Federal hospital regulations (facility is inspected annually). The 2017 fund balance appropriation is budgeted to cover the following replacement items: \$100,000 for building improvements required as a result of the recent federal compliance audit primarily related to adding a drop ceiling to the stairwell for fire safety compliance, \$75,000 for a medication dispensing machine that will improve the efficiency of medication administration and minimize costs by preventing expired usage, \$40,000 for the resurfacing of two seclusion rooms, and \$9,200 for various furniture upgrades such as mattresses and replacement chairs.

Personnel costs increase by approximately \$153,000 or 3.2% to about \$4,849,900 which includes the net cost to continue for 49.11 FTE positions. Personnel costs reflect the following changes to better reflect the actual operational and administrative time for the Mental Health Center: an increase of 0.60 FTE Psychiatrist and 0.10 FTE Senior Clinical Psychologist as well as a decrease of 0.23 FTE Weekend Registered Nurse reallocated to the Mental Health Outpatient-Clinical program to reflect adjustments to address operational efficiencies. In addition, overtime costs are increased by 0.19 FTE or \$13,000 in Overtime costs and a decrease of 0.27 FTE or \$2,000 in Extra Help costs based on an estimate of current year utilization.

Operating expenditures decrease approximately \$146,100 to \$938,300, primarily due to a \$140,000 decrease in medication costs based on current year estimates and increased usage of generic drugs as well as more payments for medications coming from third-party, private insurance. This is largely due to a more collaborative working relationship with the county's onsite, contracted pharmacy provider located at the Health and Human Services building. In addition, food service costs decrease by \$17,200 and lab service costs decrease by \$29,600 based on lower prior year actuals. This is partially offset by an increase in contracted physician and psychiatrist costs of \$59,900 based on anticipated increases in medical and psychiatric wage rates in 2017.

Interdepartmental Charges are budgeted to increase by \$132,900 to \$899,000, mainly due to an increase of \$135,000 in building maintenance costs related to \$100,000 in building code upgrades; largely for fire suppression equipment, and \$40,000 for the resurfacing of seclusion rooms. In addition, the budget includes an increase of \$5,500 or 2% in computer maintenance and replacement charges, \$2,600 in medical malpractice insurance costs, and an increase of \$4,100 for increased phone and communications charges. This is partially offset by a decrease in estimated collection services costs of \$14,600.

**Mental Health Center (cont.)**

Fixed Assets are budgeted to increase \$60,000 to \$75,000. This is related to the purchase of a medication dispensing machine, which will improve the efficiency of medication administration by minimizing manual processes currently completed by county staff, and reduce costs by preventing expired usage and more efficient inventory controls.



**Program Activities**

<b>Activity</b>	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Target</b>	<b>Budget Change</b>
Days of Care	5,973	6,500	6,000	6,600	100
Admissions	698	850	650	863	13
Discharges	697	850	650	863	13
Average Length of Stay (Days)	8.5	7.6	9.2	7.6	0

**Criminal Justice Collaborating Council (CJCC)**

**Program Description**

With the support of the Chief Judge, County Executive, and County Board, the Waukesha County Criminal Justice Collaborating Council (CJCC) was established in the fall of 2002. The Council was formed with several goals in mind including better understanding of crime and criminal justice problems, greater cooperation among agencies and units of local government, clearer objectives and priorities, more effective resource allocation, and the creation of additional criminal justice programming. The Council feels that, taken together, these results can increase public confidence in and support for criminal justice processes, and enhance system performance.

The mission of the Waukesha County CJCC is to enhance public safety and promote the effective and efficient administration of the criminal justice system through community collaboration by ensuring offender accountability and providing rehabilitative services, while recognizing the rights and needs of victims.

**Strategic Outcome: A County that Provides Customers with Quality Programs and Services**

**Objective 6.2 Create a Framework for Collaboration with Local Criminal Justice System**

Create a framework for the local criminal justice system that will result in improved system outcomes through collaborative partnerships, systematic use of research, and a shared vision of desired outcomes.

**Objective Owner:** Clinical Services – Criminal Justice Collaborating Council

**Initiative/Action:**

1. Through a partnership with the state, participate in the National Institute of Corrections (NIC) Evidence-Based Decision Making (EBDM) Initiative.
2. Create a Policy Team made up of criminal justice system stakeholders to meet monthly with the NIC consultant.
3. Develop system wide change strategies that will align local and state jurisdictions with one another and with the principles of EBDM.
4. Prepare to implement identified change strategies.

**Performance Measure:**

1. At least 80% of members attend Policy Team meetings.
2. Number of system wide change strategies identified.

<b>Measure</b>	<b>2015 Actual</b>	<b>2016 Estimate</b>	<b>2017 Goal</b>
Members Attending Policy Team Meetings	89%	83%	85%
System-wide Change Strategies Identified	6	4	4

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>	<b>0.00</b>
General Government	\$284,036	\$263,033	\$263,033	\$260,386	(\$2,647)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$48,313	\$50,648	\$37,809	\$36,564	(\$14,084)
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$28,897	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$1,025,862</b>	<b>\$1,055,158</b>	<b>\$1,055,158</b>	<b>\$1,077,870</b>	<b>\$22,712</b>
<b>Total Revenues</b>	<b>\$1,387,108</b>	<b>\$1,368,839</b>	<b>\$1,356,000</b>	<b>\$1,374,820</b>	<b>\$5,981</b>
Personnel Costs	\$108,733	\$112,887	\$112,476	\$115,760	\$2,873
Operating Expenses	\$1,259,523	\$1,237,465	\$1,220,919	\$1,241,058	\$3,593
Interdept. Charges	\$16,962	\$18,487	\$17,988	\$18,002	(\$485)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$1,385,218</b>	<b>\$1,368,839</b>	<b>\$1,351,383</b>	<b>\$1,374,820</b>	<b>\$5,981</b>
Rev. Over (Under) Exp.	\$1,890	\$0	\$4,617	\$0	\$0

### Program Highlights

General Government Revenue decreases by approximately \$2,600 to \$260,400, mainly due to the ending of the state Treatment Alternatives and Diversion (TAD) grant allocation for the funding cycle ending December 31, 2016. The budget includes \$140,000 for a new TAD grant allocation the Department of Health and Human Services has received for the funding cycle beginning January 1, 2017, a slight reduction from the current year grant level of \$142,900. The federal Bureau of Justice Assistance (BJA) Drug Court Enhancement grant will end on September 30, 2017. However, the 2017 budget maintains prior budget year BJA revenue of \$96,600, as a result of prior year underspending. General Government revenues also include, state Department of Corrections (DOC) revenue for the Community Service Options (CSO) program of \$23,800.

Charges for Services are budgeted to decrease by \$14,100 to \$36,600. This is in anticipation of reduced revenue from client fees from the Alcohol Treatment Court and Day Report Center Programs based on prior year actuals. Alcohol Treatment Court participants are charged a monthly fee using an income-based fee scale, which was implemented in June 2009 and is mandatory for all program participants. Day Report Center participants are charged a flat fee, which was implemented in October 2010 and is mandatory for all program participants based upon length of stay in the program.

Personnel costs are budgeted to increase \$2,900 to \$115,800, reflecting the cost to continue for the 1.0 FTE Coordinator position.

Operating expenditures are budgeted to increase by about \$3,600 to \$1,241,100, largely due to the cost to continue for contracted services for various CJCC programming efforts.

Interdepartmental Charges are budgeted to decrease by approximately \$500 to \$18,000, due to minor changes to various interdepartmental accounts.



## Program Activities

CJCC activities include the following programs:

### **Pretrial Screening Program**

Screens all newly booked inmates in the Waukesha County Jail, for the purpose of gathering and verifying information to prepare a screening report for the Court prior to the initial court appearance to assist in release decisions and setting appropriate bail.

### **Pretrial Supervision Program**

Provides pretrial supervision and monitoring of adults pending misdemeanor and some felony charges while awaiting trial or adjudication to assure appearances at court hearings, provide support with clients' needs to prevent recidivism, and is an alternative to pretrial incarceration, saving jail days.

### **Pretrial Intoxicated Driver Intervention Program (OWI Program)**

Provides intensive supervision to repeat drunk driving defendants shortly after arrest in an effort to get them enrolled in treatment as soon as possible during the pretrial phase, with the goal of reducing drunk driving recidivism.

### **Drug Treatment Court Program**

Utilizing a post-plea, pre-dispositional model, provides rigorous supervision, case management, and drug testing for drug dependent offenders, including intensive judicial oversight and an emphasis on treatment, in an effort to increase long-term sobriety, which will ultimately reduce crime and increase public safety. The average program length is 18 months.

### **Alcohol Treatment Court Program**

Provides intensive supervision and case management of 3rd & 4th offense drunk drivers post-conviction with intensive judicial oversight and an emphasis on treatment, in an effort to help offenders break the cycle of drunk driving, improve the chances of a sober and healthy lifestyle, and contribute to a safe community. The program length is approximately 12-18 months.

### **Community Service Options Program**

Provides support with site placement and tracking/reporting community service hours worked for adult offenders who are court ordered to complete community service as a condition of their sentence or as a condition of probation, as well as to adults confined in the Huber facility who wish to reduce their jail sentence by performing community service.

### **Day Report Center Program**

Intensive supervision and monitoring of adults post-conviction, providing an alternative to incarceration with the goals of reducing the population of the Huber facility and reducing recidivism through direct support and referrals to services throughout Waukesha County to meet clients' needs and improve lives.

### **Jail Adult Basic Education (ABE) Program**

In July 1990, Waukesha County Technical College (WCTC) and the Waukesha County Sheriff's Department began a partnership to provide adult basic education, high school completion, and employability skills to inmates at the Huber facility and, later, at the County Jail.

### **Reentry Employment Program**

Provides job readiness skills (resume development, preparation for interviews, assistance completing on-line applications, etc.) to unemployed or underemployed offenders in the Waukesha County Huber facility to help them secure and maintain employment.

The following tables show the number of clients served, successful completion rates, and jail days diverted by CJCC programs.

	Program	2015 Actual	2016 Target	2016 Estimate	2017 Target
<b># Clients Served</b>	Pretrial Screening	2,464	2,300	2,400	2,350
	Pretrial Supervision	500	N/A	514	500
	Pretrial Intoxicated Driver Intervention	850	525	800	825
	Day Report Center	276	274	272	250
	Alcohol Treatment Court	68	75	69	70
	Drug Treatment Court	83	40	73	70
	Community Service Options	670	500	550	600
	Offender Reentry Employment	217	260	228	225
	Jail ABE/GED	220	150	150	150
		<b>TOTAL CLIENTS SERVED*</b>	<b>5,348</b>	<b>4,124</b>	<b>5,056</b>

\*Not an unduplicated total, as clients can participate in multiple programs.

	Program	2015 Actual	2016 Target*	2016 Estimate	2017 Target
<b>% Successful Completions</b>	Pretrial Supervision	65%	70%	80%	75%
	Pretrial Intoxicated Driver Intervention	81%	N/A	83%	80%
	Day Report Center	71%	N/A	79%	75%
	Alcohol Treatment Court	84%	N/A	87%	85%
	Drug Treatment Court	64%	N/A	62%	65%
	Community Service Options	81%	N/A	82%	80%

\*Targets not established in 2016 for programs with "N/A" target.

	Program	2015 Actual	2016 Target	2016 Estimate	2017 Target
<b># Jail Days Diverted</b>	Pretrial Supervision	7,921	6,000	6,048	6,000
	Pretrial Intoxicated Driver Intervention	16,946	12,000	18,852	15,000
	Day Report Center	8,904	9,500	5,021	6,000
	Alcohol Treatment Court	2,124	2,500	2,428	2,500
	Community Service Options	3,285	2,900	2,544	2,500
		<b>TOTAL JAIL DAYS DIVERTED*</b>	<b>39,180</b>	<b>32,900</b>	<b>34,893</b>

\*Reflects potential good time earned by inmates.

## Program Description

### Administration Section

The Administration Section provides leadership, direction and clinical competence in the overall management of the Public Health Division's human resources, program resources, and overall budget. This section is responsible for the Division's State of Wisconsin Administrative Code 140 certification review to maintain Level II health department status. This section will prepare the Division for national accreditation, and will maintain necessary programs for accreditation, such as quality improvement and workforce development. The section works closely with the fiscal division in ensuring corporate compliance. The operation of Insight, public health's electronic medical record, will be overseen by this section.

### Family and Community Health Section

The Family and Community Health Section provides services directly to individuals, families and to the population collectively. This section provides various services to individuals from early childhood to late in life through clinic visits, home visits or community events. Child preventive health services can include childhood immunizations, lead poisoning screenings, child health checks, fluoride varnishing, and child neglect and abuse assessments. Adult health services consist of screenings and case management in areas such as: cholesterol, glucose, blood pressure, pregnancy testing, prenatal and postpartum monitoring, sexually transmitted diseases, and drug testing. This section oversees the County's Community Health Assessment and Improvement Plan and Process (CHIPP), which addresses population health through community assessments to determine leading health problems and collaborates with community partners for remediation strategies. Additionally, there is participation on numerous community collaboratives to address health equity and health disparities.

### Women, Infants, and Children (WIC)

The Women, Infants and Children (WIC) program is federally funded and provides nutrition assessments for prenatal and postpartum lactating mothers, infants under one year and children through five years of age. Nutrition recommendations are offered with corresponding electronic benefits specifically outlining food purchases that will remedy nutritional deficits.

### Communicable Disease Control and Public Health Preparedness Section

The Communicable Disease Control and Public Health Preparedness Section provides services to individuals, families and to the population collectively. This section provides communicable disease surveillance, investigations and interventions to control communicable diseases and outbreaks affecting individuals, families and businesses in Waukesha County. Communicable disease interventions include notification, education, treatment consultation and containment measures (such as work restriction, isolation or quarantine). Clinical services in this section include directly-observed treatment for Tuberculosis (TB), the Travel Immunization Clinic and the Sexually Transmitted Diseases (STD) Clinic. Partner notification for STDs and HIV are conducted routinely. Public health preparedness is a rapidly evolving component of this section that addresses preparedness strategies for quick response to a range of public health threats, both intentional and unintentional, including biological, chemical or natural disasters. Emerging diseases, are tracked closely and plans are continually refined based off of the latest information. Staff trainings and exercises are routinely conducted with key partners.

## Strategic Outcome: An Economically Vibrant County

### **Objective 2.1: Reducing Employee Absences in Hospital Health Systems**

Assist five Waukesha County hospital health systems: Froedtert & the Medical College of Wisconsin, Inc.; ProHealth Care, Inc.; Aurora Health Care, Inc.; Wheaton Franciscan Healthcare, Inc.; and Waukesha County Mental Health Center to remain economically viable in reducing employee absences due to preventable communicable diseases among hospital and clinic based employees.

**Objective Owner:** Public Health Communicable Disease Control Services

**Public Health (cont.)**

**Initiative Action:**

1. Establish a local public health and health care systems committee to address employee preventable occupationally acquired communicable diseases.
2. Provide public health consultation on employee occupational communicable disease prevention recommended standards.
3. Provide public health consultation on employee occupational communicable disease control prevention and inpatient communicable disease control according to the CDC recommended communicable disease control standards for new emerging communicable diseases. **Performance Measure:**

Measure	2016 Estimate	2017 Goal
Healthcare Systems Participation	5	5
Healthcare Systems Communicable Disease Training provided by Public Health	4	5

**Strategic Outcome: A well-planned county**

**Objective 4.1**

Every five years, the Waukesha County Community Health Improvement Plan and Process (CHIPP) steering committee will make available information on the health status of the community, along with the identification of Waukesha County’s leading health problems and health needs of the community, through a systematic collection, assembly and analysis of community health statistics. Key CHIPP steering committee stake holders of policy makers, community professionals and the general public will develop a community health improvement plan.

**Objective Owner:** CHIPP Community Steering Committee, Public Health Division

**Initiative/Action:**

1. The CHIPP co-chairs will establish a 2016-2020 Community Health Improvement Plan and Process steering committee membership and convene a CHIPP steering committee meeting to launch a new county 2016-2020 CHIPP by December 31, 2016.
2. The CHIPP steering committee will have a completed Community Health Assessment with identified leading health problems in Waukesha County by December 21, 2017.
3. The CHIPP steering committee will identify Waukesha County providers who will voluntarily take on a CHIPP initiative that will remediate one of the leading health issues in Waukesha County, by December 31, 2017.
4. The CHIPP steering committee will have completed a final 2016-2020 report informing the community on health improvements related to the CHIPP initiatives by December 31, 2020.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
CHIPP Plan and Response Team Outcomes	Launch CHIPP and convene first meeting	Completion of Community Health Assessment

Public Health (cont.)

**Strategic Outcome: A County that Provides Customers with Quality Programs and Services**

**Objective 6.1: Maintain a Practice of Continuous Quality Improvement (CQI)**

Maintain a practice of continuous quality improvement through annual program evaluations utilizing evidence based standards.

**Objective Owner:** Public Health, Clinical Services, Adolescent and Family Services

**Initiative/Action (Public Health):**

1. Develop a quality improvement plan.
2. Train all staff on quality improvement concepts and the Public Health Division's plan.
3. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
4. Develop a system to assess policies and procedures.
5. Develop dashboards to maximize use of EMR reports to gather program outcome data.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Policies and Procedures Assessed for Quality Improvement	5	6
Quality Improvement Projects Initiated and/or Completed	1	1
Pre and Post Test Improvement Ratio	75%	80%
Number of Staff Trained in CQI	30	35

**Public Health (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>37.32</b>	<b>37.73</b>	<b>37.73</b>	<b>34.87</b>	<b>(2.87)</b>
General Government	\$802,086	\$839,613	\$915,448	\$823,971	(\$15,642)
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$231,042	\$322,900	\$320,934	\$358,851	\$35,951
Interdepartmental	\$2,345	\$3,415	\$3,415	\$275	(\$3,140)
Other Revenue	\$0	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$1,455	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$2,420,013</b>	<b>\$2,460,042</b>	<b>\$2,460,042</b>	<b>\$2,168,268</b>	<b>(\$291,774)</b>
<b>Total Revenues</b>	<b>\$3,456,941</b>	<b>\$3,625,970</b>	<b>\$3,699,839</b>	<b>\$3,351,365</b>	<b>(\$274,605)</b>
Personnel Costs	\$2,906,603	\$3,100,736	\$2,984,516	\$2,888,255	(\$212,481)
Operating Expenses	\$224,682	\$285,349	\$347,745	\$230,880	(\$54,469)
Interdept. Charges	\$221,761	\$239,885	\$234,778	\$232,230	(\$7,655)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$3,353,046</b>	<b>\$3,625,970</b>	<b>\$3,567,039</b>	<b>\$3,351,365</b>	<b>(\$274,605)</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$103,895</b>	<b>\$0</b>	<b>\$132,800</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General Government revenues decreased over \$15,600 to \$824,000 mainly due to reductions in the following grants: Public Health Preparedness (BIO) - \$19,900 of which \$9,200 is due to an increase in revenue recognized in the HHS Administration Division; Cities Readiness (READY) - \$8,300 and Women Infants and Children (WIC) - \$4,800; the reductions are offset by increases due to the following: a new Adult Immunization (IMMUAD) grant - \$11,400; and an increase in the Maternal Child Health (MATERN) grant - \$3,700.

Charges for Services revenue increased almost \$36,000 to \$358,900 mainly due to an increase in the Travel Immunization Clinic as a result of increased Travel Clinic usage and an overall increase in service fees.

Interdepartmental revenues decreased over \$3,100 to \$275 due Waukesha County employees receiving services at the Waukesha Employee Health & Wellness Center.

Personnel costs are reduced by almost \$212,500 to \$2,888,300 mainly due a 2.87 FTE reduction to 34.87 FTE's. The reductions include the unfunding of 1.0 FTE Health & Human Services Coordinator position and a 1.0 FTE Public Health Nurse position. The FTE reduction also includes the transfer of a 1.0 FTE Administrative Assistant position to HHS Administrative Services Admissions Unit. These reductions are offset by a 0.13 FTE net increase in extra help positions, as well as cost to continue the remaining 34.87 FTE's.

Operating expenditures are reduced by \$54,500 to \$230,900 which includes decreases in travel of \$7,600, outside printing of \$7,500, mileage reimbursement of \$7,000, medical services of \$6,200; prescription medications of \$5,200, office supplies of \$4,500; books, publications &, subscriptions of \$3,800, and tuition & registration of \$3,700.

Interdepartmental charges decrease \$7,600 to about \$232,200 partly due to decreases in postage of \$5,300, telephone costs of \$2,800; and property insurance allocation of \$2,600. The reductions are offset by a \$3,000 increase in End User Technology Fund (EUTF) charges.

Public Health (cont.)



Program Activities

	2015 <u>Actual</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
Number of telephone calls to the Division for information/triage	8,217	8,400	8,300	8,400	0
Number of walk-in clients at the Division	3,750	4,000	3,750	3,850	(150)

Program Activities: Family and Community Health

	2015 <u>Actual</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
Number of children tested for lead poisoning	1,498	1,525	1,476	1,525	0
Number of Healthcheck examinations	2,060	2,050	1,800	1,950	(100)
Number of pregnant women PNCC screened	373	380	350	350	(30)
• Number of women enrolled	180	185	185	185	0
• Number of women who delivered full term infants of average birth weight	178	175	180	180	5
Number of children at-risk (medical/physical neglect) case managed	160	150	160	165	15
Number of children receiving fluoride varnishing	671	825	700	725	(100)
Number of chronic disease screenings	690	750	700	750	0
Number of urine drug screening for HHS clients	662	500	700	700	200
• Number of positive urine drug screening clients	321	250	350	350	100

Program Activities: (WIC)

	2015 <u>Actual (b)</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
State estimated # of eligible low income population per month for Waukesha County (a)	4,483	4,450	4,400	4,400	(50)
Total number of mothers, infants/children served per year in the WIC Program	3,298	3,375	3,150	3,150	(225)
Annual number of infants/children nutritionally deficient enrolled in the WIC program	2,400	2,425	2,300	2,300	(125)
The annual number of children with improved nutritional status after WIC program intervention	2,400	2,425	2,300	2,300	(125)
Monthly WIC enrollment of at-risk mothers, infants and children for Waukesha County	2,110	2,100	1,925	1,925	(175)

(a) Based on the 2012 US Bureau of Census, Waukesha County Poverty Estimates.

(b) From January 1, 2015 through December 21, 2015 WIC food vouchers supplemented Waukesha County retail food vendors by \$2,193,551 and local Waukesha County produce farmers by \$8,179.



**Program Activities: Communicable Disease and Preparedness**

<b>Communicable Disease Control: Level I</b>	2015 <u>Actual</u>	2016 <u>Budget</u>	2016 <u>Estimate</u>	2017 <u>Budget</u>	Budget <u>Change</u>
Number of communicable disease referrals investigated	2,414	2,500	2,550	2,600	100
Number of communicable disease cases identified	1,650	1,700	1,625	1,700	0
Number of outbreaks investigated	107	110	104	110	0
Number of TB skin tests	800	1,000	815	900	(100)
Number of vaccines administered	3,289	3,400	3,100	3,200	(200)
Number of Travel Clinic clients	255	*	269	280	*
Number screened in STD clinic	178	190	175	190	0
Number of preparedness trainings conducted	13	12	15	15	3
Percentage of staff meeting 23 preparedness competencies	88%	95%	90%	90%	(5)

\*New Activity Tracking Category

**Program Descriptions**

It is the mission of the Waukesha County Division of Veterans' Services to advocate for and assist all veterans of the U.S. Armed Services, their dependents, and survivors. The Division ensures that clients obtain all available and appropriate benefits for which they are entitled. The Division staff is committed to act in a courteous, effective, and fiscally responsible manner to maintain its reputation as one of the top veterans' service divisions in the State by providing maximum service to its clientele.

Referrals are made to other Federal, State, and local agencies for benefits from other programs. Information related to veterans' issues is collected, updated, made available on the Internet, and distributed where and when appropriate.

In addition, the County Executive, with the approval of the County Board, appoints three Veterans' Commissioners. The Commission is required to meet at least once a year, and as needed thereafter to authorize and provide the amount of funds required for needy veterans.

**Strategic Outcome: A county that assists at-risk citizens**

**Objective 5.1: Provide Support to Individuals Impacted by a Death.**

Minimize trauma and provide support to individuals impacted by a death, by coordinating with the Medical Examiner's Office and/or Waukesha County Health and Human Services to proactively outreach and offer assistance to affected individuals within an average of 5 days of referral.

**Objective Owner:** Veterans Affairs, Medical Examiners' Office

**Initiative/Action (Veterans Affairs):**

1. Immediately notify the VA Regional Office.
2. Within 2 work days send a letter of sympathy and assistance to the surviving family member or the descendant's estate.
3. Upon request for assistance we will assist survivors with obtaining any eligible veteran's benefits from the state or federal veteran programs.
4. Immediately refer survivors to HHS Divisions and other agencies that can assist them with non-VA issues.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Response time following Notification of Death	2 work days	2 work days

**Strategic Outcome: A county that assists at-risk citizens**

**Objective 5.2: Increase and Improve Access to Suicide Prevention Resources**

Increase and improve access to suicide prevention resources by developing a community wide network focused on reducing Emergency Detentions by reassessing crisis services, implementing Question, Persuade, Refer (QPR) protocol, providing Crisis Intervention Trainings and working closely with veterans to connect them with behavioral health treatment and support services.

**Objective Owner:** Clinical Services, Veterans Affairs

**Initiative/Action (Veterans Affairs):**

1. Contact the Waukesha County HHS crisis worker for assessment, and Sherriff's Office if suicide risk is high.
2. Provide Veterans Crisis Line information to local agencies, posts and veterans.
3. Make referrals to the VA Medical Center or the Milwaukee Vet Center after consulting with the veteran.
4. When notified by representatives from NAMI, the Veterans Service Office will provide benefit or referral services to the affected client.
5. When notified of a homeless veteran, the department will contact the Supportive Services for Veterans Families or the Center for Veterans Issues to screen for placement.
6. When necessary, the Veteran's Office will contact local veterans and civic organizations to provide material assistance to homeless and low income veterans.
7. The Service Officer or Aide will request that the Veterans Service Commission will convene to provide assistance when all other options have been exhausted.

**Performance Measure:**

Measure	2016 Estimate	2017 Goal
Response time following request for assistance	Within 24 hours	Within 24 hours

	2015 Actual	2016 Budget	2016 Estimate	2017 Budget	Budget Change
<b>Staffing (FTE)</b>	<b>3.70</b>	<b>3.70</b>	<b>4.00</b>	<b>4.00</b>	<b>0.30</b>
General Government	\$13,000	\$13,000	\$13,000	\$13,000	\$0
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$0	\$0	\$0	\$0	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$598	\$0	\$0	\$0	\$0
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$284,085</b>	<b>\$304,626</b>	<b>\$304,626</b>	<b>\$302,801</b>	<b>(\$1,825)</b>
<b>Total Revenues</b>	<b>\$297,683</b>	<b>\$317,626</b>	<b>\$317,626</b>	<b>\$315,801</b>	<b>(\$1,825)</b>
Personnel Costs	\$232,418	\$257,038	\$267,358	\$254,723	(\$2,315)
Operating Expenses	\$24,862	\$40,939	\$40,506	\$42,020	\$1,081
Interdept. Charges	\$21,390	\$19,649	\$19,251	\$19,058	(\$591)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$278,670</b>	<b>\$317,626</b>	<b>\$327,115</b>	<b>\$315,801</b>	<b>(\$1,825)</b>
Rev. Over (Under) Exp.	\$19,013	\$0	(\$9,489)	\$0	\$0



**Program Highlights**

General Government revenues of \$13,000 consist of a Wisconsin Department of Veterans' Affairs County Veterans' Service Office Grant from the State and remains unchanged in the 2017 budget.

Personnel Costs decrease by \$2,300 to \$254,700 due to staff turnover and cost to continue. This is offset by a 2016 ordinance action to increase by 0.30 FTE in the Veteran Service Aide position to full time.

Operating expenditures increase almost \$1,100 to \$42,000 mainly due to an increase of over \$3,200 in Promotion/PR Supplies, offset by a reduction of over \$2,000 in Outside Printing based on trend levels.

Interdepartmental Charges decrease almost \$600 to \$19,000 mainly due to reductions in Postage and the allocation of Property Insurance, offset by an increase in EUTF.

**Veterans' Services Program Units**

Financial Summary	2015	2016	2016	2017	Change From 2016	
	Actual	Adopted Budget	Estimate	Budget	Adopted Budget \$	%
<b>Information Assistance</b>						
Revenues	\$13,598	\$13,000	\$13,000	\$13,000	\$0	0.0%
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
<b>County Tax Levy</b>	<b>\$272,692</b>	<b>\$293,512</b>	<b>\$293,512</b>	<b>\$291,934</b>	<b>(\$1,578)</b>	<b>-0.5%</b>
Expenditures	\$276,498	\$306,512	\$316,402	\$304,934	(\$1,578)	-0.5%
Rev. Over (Under) Exp.	\$9,792	\$0	(\$9,890)	\$0	-	N/A
<b>Veterans' Service Commission</b>						
Revenues	\$0	\$0	\$0	\$0	\$0	N/A
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
<b>County Tax Levy</b>	<b>\$11,393</b>	<b>\$11,114</b>	<b>\$11,114</b>	<b>\$10,867</b>	<b>(\$247)</b>	<b>-2.2%</b>
Expenditures	\$2,172	\$11,114	\$10,713	\$10,867	(\$247)	-2.2%
Rev. Over (Under) Exp.	\$9,221	\$0	\$401	\$0	-	N/A
<b>Veterans' Services Division Total</b>						
Revenues	\$13,598	\$13,000	\$13,000	\$13,000	\$0	0.0%
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
<b>County Tax Levy</b>	<b>\$284,085</b>	<b>\$304,626</b>	<b>\$304,626</b>	<b>\$302,801</b>	<b>(\$1,825)</b>	<b>-0.6%</b>
Expenditures	\$278,670	\$317,626	\$327,115	\$315,801	(\$1,825)	-0.6%
Rev. Over (Under) Exp.	\$19,013	\$0	(\$9,489)	\$0	-	N/A



**Program Activities**

Activity - Output Indicators	2015	2016	2016	2017	Budget
	Actual	Budget	Estimate	Budget	Change
Total dollars to Waukesha County veterans (a)	\$260 mil	\$230 mil	\$260 mil	\$255 mil	\$25 mil
Clients interviewed and counseled (In Office)	4,052	3,700	4,000	4,000	300
Number of appearances on behalf of veterans	51	55	55	65	10
Miles traveled on veterans' affairs	2,654	3,400	3,400	3,700	300
Incoming phone calls answered	8,093	8,000	8,000	8,100	100
Contacts by E-Mail (requiring a response)	8,791	9,000	9,000	9,100	100

(a) This figure reflects the value of all Federal and State benefits awarded to county veterans. Based on the 2016 estimate data this would equate to \$854 of benefits returned for each tax levy dollar expended.

**ADRC - Adult Protective Services**

**Program Description**

Adult Protective Services (APS) is the lead-reporting agency for instances of Abuse and Neglect for Adults and Elders At-Risk in Waukesha County.

APS Provides cost effective service intervention for vulnerable adults who are not eligible for the State's Family Care Benefit to ensure their safety and well-being, protect them from exploitation and harm, and preserve their maximum level of personal independence.

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>11.00</b>	<b>11.00</b>	<b>11.00</b>	<b>9.00</b>	<b>(2.00)</b>
General Government	\$486,706	\$486,706	\$486,706	\$486,706	\$0
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$71,700	\$101,000	\$81,022	\$101,000	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$65,187	\$12,420	\$26,904	\$26,904	\$14,484
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0
<b>County Tax Levy (Credit)</b>	<b>\$1,642,023</b>	<b>\$1,491,883</b>	<b>\$1,491,883</b>	<b>\$1,069,392</b>	<b>(\$422,491)</b>
<b>Total Revenues</b>	<b>\$2,265,616</b>	<b>\$2,092,009</b>	<b>\$2,086,515</b>	<b>\$1,684,002</b>	<b>(\$408,007)</b>
Personnel Costs	\$883,138	\$918,544	\$767,061	\$750,158	(\$168,386)
Operating Expenses	\$1,060,216	\$1,014,352	\$946,361	\$777,903	(\$236,449)
Interdept. Charges	\$186,236	\$159,113	\$167,637	\$155,941	(\$3,172)
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$2,129,590</b>	<b>\$2,092,009</b>	<b>\$1,881,059</b>	<b>\$1,684,002</b>	<b>(\$408,007)</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$136,026</b>	<b>\$0</b>	<b>\$205,456</b>	<b>\$0</b>	<b>\$0</b>



**Program Highlights**

General government includes revenues from Supportive Home Care State Basic County allocation of \$259,000, and a State Basic County Allocation of \$227,700, to fund Adults-at-Risk activities and Adult Protective Services (APS). These funds remain unchanged from the 2016 budget.

Charges for services are budgeted to remain at \$101,000, for adults who are in need of guardianship services or are found to be legally incompetent and unable to safely provide for their residential care and custody needs. The Waukesha County Department of Health and Human Services (HHS) is obligated to provide services and protection. Law enforcement and APS utilize Waukesha Memorial Hospital as a placement site for emergency protective placements for both adults at risk and elder adults at risk. HHS pays for the episode and then bills the client to recapture the costs.

Other revenue is budgeted to increase approximately \$14,500 to about \$26,900 resulting from social security reimbursements for clients served by this program where Waukesha County is the protective payee.

Net personnel costs are budgeted to decrease approximately \$168,400 to about \$750,200 primarily due to the transfer of two Clinical Therapist positions to the Clinical Services Division to better align job functions with divisional service delivery.

Operating expenditures are budgeted to decrease approximately \$236,400 to \$777,900. Of this decrease, \$132,300 is attributable to the anticipated transfer of APS clients who are eligible for Managed Care Organization (MCO) funding and a reduction in contracted services expenditures. During 2017, a "flat rate" reimbursement payment schedule for all volunteer and corporate guardians will be implemented resulting in a decrease of about \$83,000 from \$174,200 in previous year's budget. In addition, due to a reduction in the number of clients receiving ongoing care at Clearview Nursing Home and Facility for Individuals with Intellectual Disabilities (IID) in Dodge County, client care costs are anticipated to decrease \$40,200. These decreases are offset by an approximate \$17,300 increase in the annual Marsh Country Health Alliance assessment fee budgeted at \$150,000.

ADRC - Adult Protective Services (cont.)

Interdepartmental charges are budgeted to decrease approximately \$3,200 to \$155,900 due to the reallocation of about \$9,800 insurance and copier replacement costs to the Aging and Disability Resource Center (ADRC) Administration program to standardize the allocation methodology of these types of costs within the HHS department. These reductions are offset by an increase in legal charges of about \$5,700.



**Program Activities**

Activity	2015 Act.	2016 Bud.	2016 Est.	2017 Bud.	Bud. Change
Average Caseload for eight Dispositional Workers	60	74	60	60	(14)
Number of Watts Court Ordered Assessment Reviews	360	375	360	350	(25)
Emergency Protective Placements	67	65	70	70	5
Chapter 51.67	52	100	60	60	(40)
Comprehensive Evals	65	75	65	65	(10)
At Risk Cases Reported in WITS*	423	250	350	325	75

\*Wisconsin Incident Tracking System

ADRC - Community Services

**Program Description**

The Community Services (CS) program provides information and assistance/case management, community support and ADRC administration. These programs encourage collaboration and coordination of resources, activities, and services. It is an entry point for accessing services and filing reports of elder abuse/neglect. Provides information, assistance and short term case management. Includes needs assessments, counseling, assistance regarding available resources and service options, and support that empowers older adults, caregivers, and the community to make informed choices. Services include a wide range of short-term and long-term supportive home care, and intervention programs for older adults and their families. These programs provide supportive services and opportunities including adult day centers, chore services, contracted community services, emergency intervention, health cost sharing, homemaker services, personal care, respite and volunteer services, evidence based prevention programs and older adult education to foster safe independent community living.

The CS program also includes Aging and Disability Resource Center’s Senior Dining and Home Delivered Meals program functions under the provisions of Title IIIC-1 and IIIC-2 Older Americans Act, as amended. The programs provide low cost nutritious meals meeting one third of the recommended dietary allowance to persons age 60 or older with emphasis placed on outreaching the targeted frail, isolated, homebound and disadvantaged older population. Older Americans Act programs are not means tested and mandates a donation based program; therefore a standard fee cannot be charged for a meal.

Home delivery provides meals and support to homebound people age 60 or older who have been assessed and meet eligibility requirements. Further assistance is provided to high-risk recipients through home visits, and supportive service intervention.

Senior Dining Center meals provide a nutritious meal with socialization, education, and health/wellness programs at community centers for people age 60 or older who are eligible under the Older Americans Act and Wisconsin Senior Dining.

In addition, the Community Services program includes contracted transportation services which provides elderly and adults with disabilities accessible specialized transportation services (Shared-Fare Taxi, Shuttle Services, and RideLine).

**7.0 Strategic Outcome: A County that Provides Cost-Effective Services Delivered with Competence and Skill**

**Objective 7.1: Aging and Disability Resource Center will Partner with Community Agencies to Improve Service Delivery**

To improve transportation services and decrease unmet needs, the ADRC will partner with community agencies to develop and implement strategies to improve service delivery in a cost-effective manner.

**Objective Owner:** Aging and Disability Resource Center, Community Partners, and Public Works

**Initiative/Action:**

1. Partner with Thriving Waukesha County Transportation Affinity Group to develop and implement “One Call, One Click” Information and Assistance Call center (based on available funding).
2. Provide outreach and educate community on ADRC Transportation services.
3. Collect, analyze and evaluate consumer data on an ongoing basis.
4. Identify future partners to meet needs.
5. Implement attainable improvements to service as identified by the ADRC, partners or consumers.

**Performance Measure:**

Measure	2016 Act	2016 Estimate	2017 Goal
One new transportation initiative	New Measure	1	1
Percentage of individuals who report increased knowledge of transportation services provided by “One Call, One Click” following community education presentations/events.	New Measure	NA	80%

**ADRC - Community Services (cont.)**

	<b>2015 Actual</b>	<b>2016 Budget</b>	<b>2016 Estimate</b>	<b>2017 Budget</b>	<b>Budget Change</b>
<b>Staffing (FTE)</b>	<b>15.79</b>	<b>18.45</b>	<b>18.45</b>	<b>18.85</b>	<b>0.40</b>
General Government	\$2,463,388	\$2,445,540	\$2,550,081	\$2,573,425	\$127,885
Fine/Licenses	\$0	\$0	\$0	\$0	\$0
Charges for Services	\$0	\$0	\$0	\$0	\$0
Interdepartmental	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$400,410	\$410,291	\$366,680	\$373,759	(\$36,532)
Appr. Fund Balance	\$8,200	\$7,655	\$15,055	\$7,655	\$0
<b>County Tax Levy (Credit)</b>	<b>\$914,765</b>	<b>\$992,101</b>	<b>\$992,101</b>	<b>\$1,056,221</b>	<b>\$64,120</b>
<b>Total Revenues</b>	<b>\$3,786,763</b>	<b>\$3,855,587</b>	<b>\$3,923,917</b>	<b>\$4,011,060</b>	<b>\$155,473</b>
Personnel Costs	\$1,226,220	\$1,248,574	\$1,291,224	\$1,278,288	\$29,714
Operating Expenses	\$2,403,646	\$2,507,344	\$2,581,755	\$2,600,370	\$93,026
Interdept. Charges	\$93,033	\$99,669	\$106,260	\$132,402	\$32,733
Fixed Assets	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$3,722,899</b>	<b>\$3,855,587</b>	<b>\$3,979,239</b>	<b>\$4,011,060</b>	<b>\$155,473</b>
<b>Rev. Over (Under) Exp.</b>	<b>\$63,864</b>	<b>\$0</b>	<b>(\$55,322)</b>	<b>\$0</b>	<b>\$0</b>

**Program Highlights**

General government revenues are budgeted to increase about \$127,900 to approximately \$2,573,400 primarily due to additional Older Americans Act grant funding, \$76,900 (including increases of Supportive Services IIIB, \$30,600; Nutrition Services IIIC1 & IIIC2, \$23,200; Nutrition Incentive Services Program (NSIP), \$15,000; Family Caregiver Support IIIE, \$8,100); Alzheimer's grant, \$30,500; State of Wisconsin Specialized Transportation Grant, \$13,800; and Other State Revenue grant, \$6,700.

Other revenue is budgeted to decrease approximately \$36,500 to about \$373,800 due to reduced nutrition program revenue from Managed Care Organization (MCO) meals of \$22,300, and client donations primarily due to nutrition services of \$14,100.

Net personnel costs increase about \$29,700 to \$1,278,300 primarily for the cost-to-continue for existing 18.45 FTE and the reallocation of 0.40 FTE Senior ADRC Specialist staff from Fund 201 ADRC Contract Program to Fund 150 ADRC Community Services Program to assist with increasing Older Americans Act grant and Alzheimer's grant programming needs.

Operating expenditures are budgeted to increase about \$93,000 to \$2,600,400 primarily due to anticipated increase in nutrition program food costs of \$47,600 to \$898,900 to serve a combined nutrition program total of 171,120, meals, an increase of about 11,600 meals from previous year's budget. Community based bath and respite care services are anticipated to increase \$39,200 and \$10,600 to \$148,200 and \$82,600, respectively. Alzheimer's grant related services are anticipated to increase \$27,400. Transportation services increase about \$16,700 to \$913,900 due to a Rideline contract vendor rate increase. These increases are partially offset by reductions in contracted staff costs, \$24,000 and adult day care service, \$18,300.

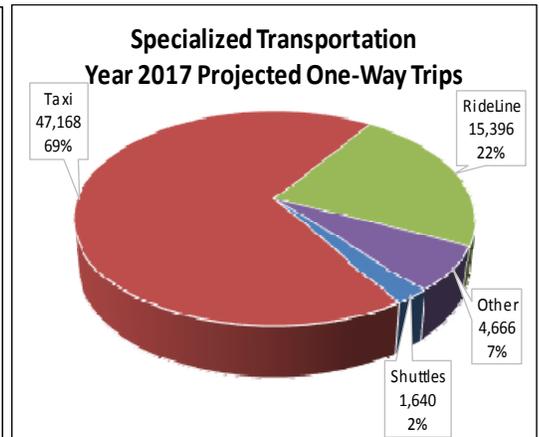
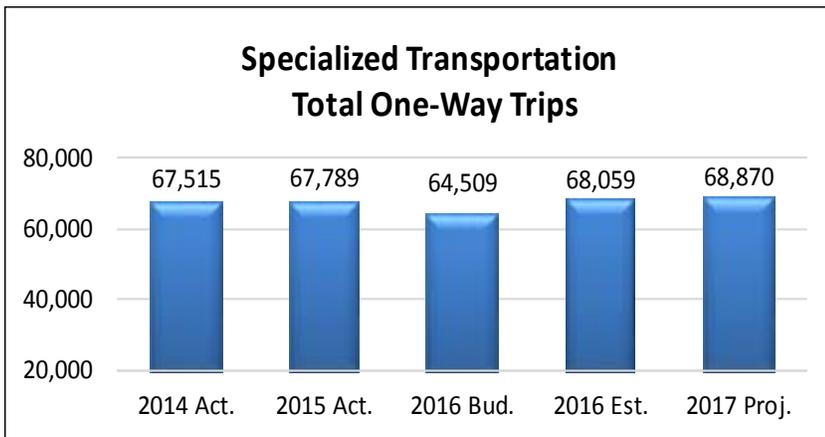
Interdepartmental charges increase by about \$32,700 to \$132,400 due to reallocation of insurance and copier replacement costs in the amount of \$15,000 from the ADRC Contract Fund and about \$9,800 from APS program to standardize the budgeting of these costs within the ADRC Division which conforms to HHS methodology. In addition, worker's compensation and telephone usage costs increase about \$5,800 and \$3,600, respectively.

ADRC – Community Services (cont.)

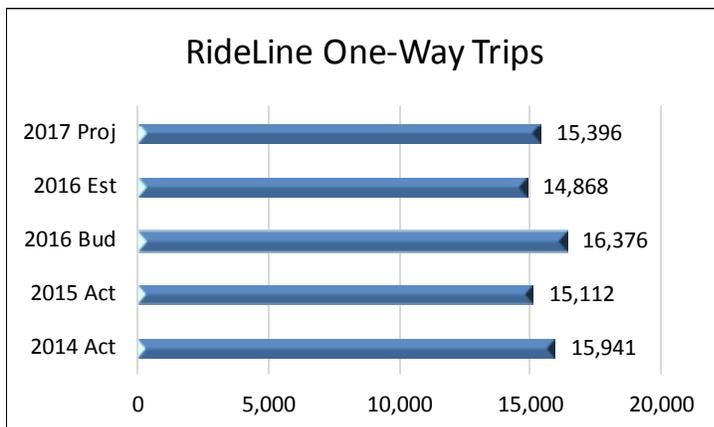


Program Activities

Specialized Transportation Net Average Cost Per One-Way Trip					
Type of Services	2014 Act.	2015 Act	2016 Bud.	2016 Est.	2017 Bud.
Shared-Fare Taxi	\$5.70	\$5.94	\$6.02	\$5.95	\$6.05
RideLine	\$33.84	\$34.24	\$36.64	\$36.05	\$37.78

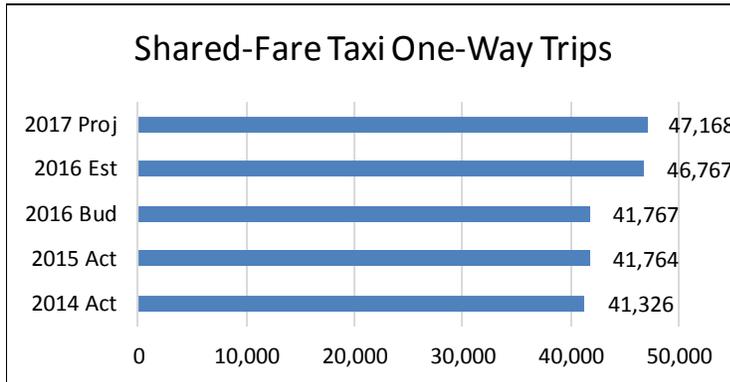


Overall, the 2017 Specialized Transportation Program budget includes an increase of 4,361 one-way trips from the 2016 budget, and a 1.2% increase of 811 one-way trips from the 2016 estimate, for a total of 68,870.



The number of one-way RideLine trips is expected to decrease from the 2016 budget level, by 980 rides.

ADRC – Community Services (cont.)



Shared-fare taxi service is expected to increase by 5,401 one-way trips from the 2016 budget level, and increase by 401 one-way trips or less than 1.0% from the 2016 estimate.

Clients Receiving Community Services				
2015 Act.	2016 Bud.	2016 Est.	2017 Budget	Change from 2016 Budget
1,516	1,350	1,350	1,350	0

Volunteer Activities	2015 Act	2016 Bud.	2016 Est.	2017 Bud.	Change from 2016 Budget
Number of Volunteers	699	800	710	725	(75)
Valuation	\$838,830	\$759,669	\$836,380	\$848,160	\$88,491
Number of Hours	35,604	32,244	35,500	36,000	3,756

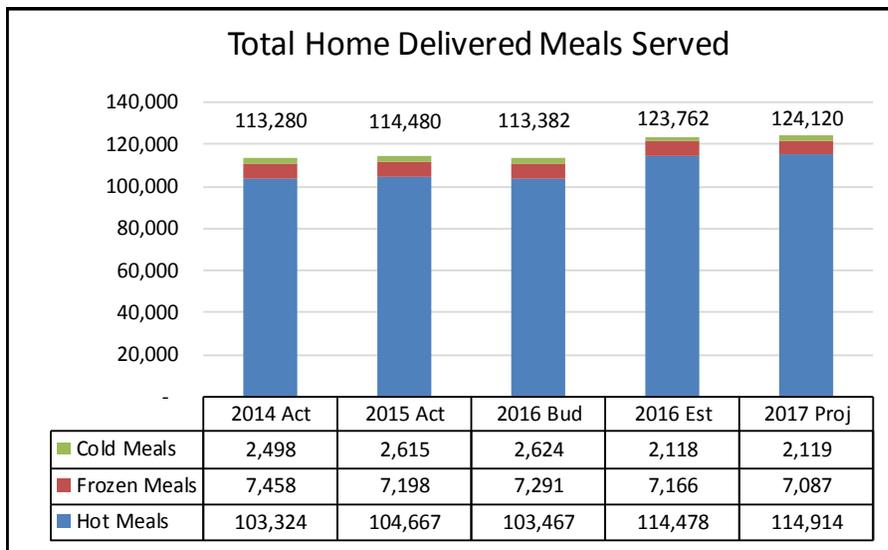
The hourly valuation for all Waukesha County volunteers was established at \$23.56 per hour as determined by The Independent Sector.

Home Delivered Meal (HDM) Participant Responses to Survey Questions				
	2015 Act.	2016 Bud.	2016 Act.	2017 Bud.
HDMs help to live independently in home (182 responses)	85.7%	85.0%	85.4%	85.0%
Feel HDMs have improved quality of life (182 responses)	93.3%	90.0%	87.9%	90.0%
Half or more daily food intake provided by meal (182 responses)	67.3%	65.0%	64.6%	65.0%

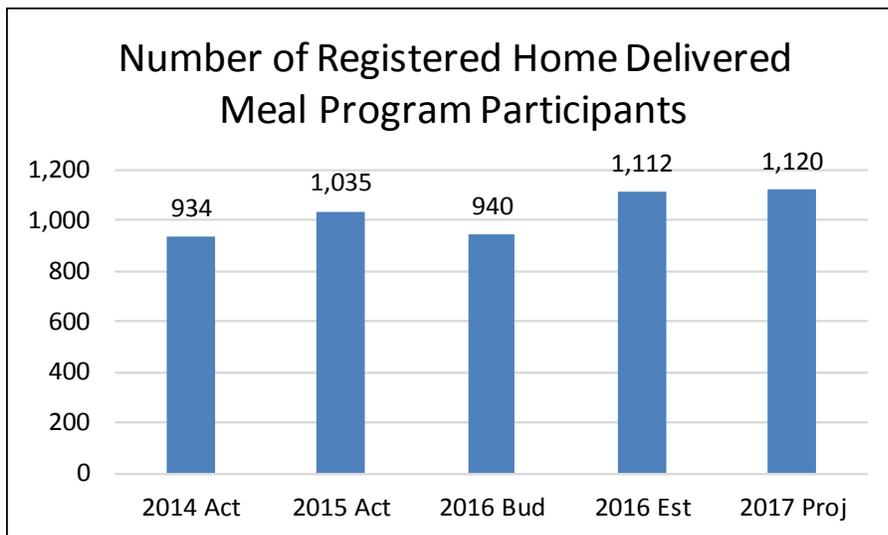
ADRC – Community Services (cont.)

Home Delivered Meal Cost Summary					
	2014 Act.	2015 Act.	2016 Bud.	2016 Est.	2017 Bud.
Gross Cost Per Meal	\$7.95	\$8.18	\$8.30	\$7.80	\$7.96
Average Client Donation Per Meal	\$2.05	\$1.87	\$1.98	\$1.69	\$1.69
Net Cost Per Meal	\$5.90	\$6.31	\$6.32	\$6.11	\$6.27

Cost per meal summary for Senior Dining and Home Delivered meals are not comparable due to program offerings.



Projected number of home delivered meals for 2017 anticipates an increase of 10,738 meals from the 2016 budgeted number of meals to be served. This projected increase in number of meals is based on actual experience for the first half of 2016.



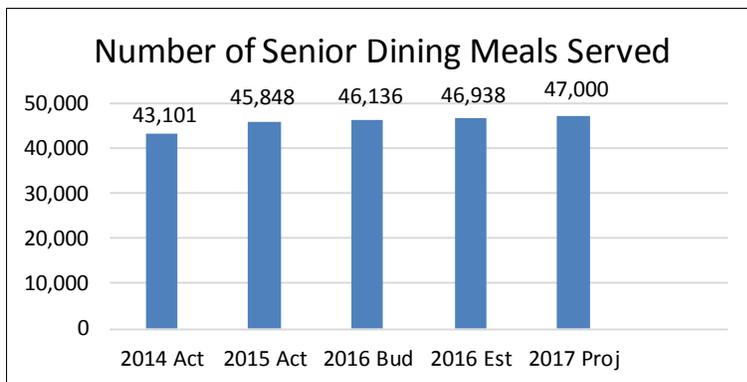
Based on actual experience in 2015 and during the first half of 2016, the number of projected home delivered meal recipients in 2017 is expected to be at 1,120. This is an increase of 180 from the 2016 budgeted level.

ADRC – Community Services (cont.)

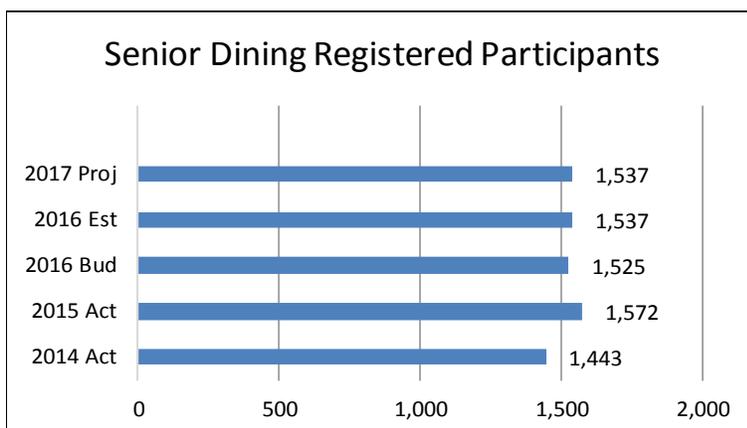
Senior Dining Center Meal Cost Summary					
	2014 Act.	2015 Act.	2016 Bud.	2016 Est.	2017 Bud.
Gross Cost Per Meal	\$10.38	\$11.02	\$11.05	\$11.43	\$11.04
Average Donation Per Meal	\$2.08	\$2.01	\$2.00	\$1.86	\$1.86
Net Cost Per Meal	\$8.30	\$9.01	\$9.05	\$9.57	\$9.18

Cost per meal summary for Home Delivered meals and Senior Dining are not comparable due to required program offerings including nutrition education and activities.

Percent of Senior Dining Participants Responding to Survey				
	2015 Act.	2016 Bud.	2016 Act.	2017 Bud.
Half or more daily food intake provided by meal (195 responses)	64.1%	60.0%	65.7%	60.0%
Improved quality of life (194 responses)	86.8%	85.0%	88.7%	85.0%



The 2017 Senior Dining Program is expected to increase by 864 meals from 2016 budget, and increase 62 meals from 2016 estimate.



Based on actual experience during 2015 and during the first half of 2016, the number of Senior Dining participants is projected at 1,537 in 2017. This is a 12 participant increase from the 2016 budgeted number of participants.



**Aging & Disability Resource Center Contract Fund**

**Program Description**

The Aging and Disability Resource Center (ADRC) Contract Fund is a Special Revenue Fund providing the public with information related to aging or living with a disability. Programs provide specialized counseling, support, and options to older adults and adults with disabilities in areas related to elder and disability rights, income maintenance, housing, surrogate decision making, consumer/financial issues, legal and benefit problems, and health care financing. Core services include: information, referral, assistance, long-term care financial and functional eligibility, long-term care options, short-term case management, elderly and disability benefits counseling, prevention, early intervention, health promotion, outreach/marketing, advocacy, and emergency referrals for older adults, individuals with disabilities age 18 and above, and their families. The ADRC honors choice, supports dignity, and maximizes independence.

**Strategic Outcome: A county that assists at-risk citizens**

**Objective 5.3: Train Businesses on Strategies to Improve Customer Service for Individuals with Dementia**

To address the need for services for individuals and families impacted by dementia, the ADRC will launch a “Dementia Friendly Community” initiative to train businesses and their employees on strategies to improve customer experience for individuals with dementia.

**Objective Owner:** Aging and Disability Resource Center

**Initiative/Action:**

1. Engage community partners to assist with initiative expansion throughout Waukesha County.
2. Disseminate business toolkit based on dementia awareness business training.
3. Identify and connect with businesses to participate in program.
4. Train business owners and employees on becoming dementia aware.
5. Market to the community “Dementia Friendly Businesses” through universal emblem, ADRC newsletter, traditional media and other mediums to be identified.
6. Develop plan to collaborate with Public Health on this initiative.
7. The ADRC will follow up six months’ post training to determine if the business continues to support dementia awareness.

**Performance Measure:**

Measure	2015 Actual	2016 Estimate	2017 Goal
Businesses trained	5	10	20
Percentage of employees indicating increased dementia awareness post training	New Measure	90%	90%

**Aging & Disability Resource Center Contract Fund (cont.)**

<b>Financial Summary</b>	2015 Actual	2016 Adopted Budget	2016 Estimate	2017 Budget	Change From 2016 Adopted Budget	
					\$	%
<b>Revenues</b>						
General Government	\$2,816,180	\$3,166,363	\$3,045,263	\$3,176,445	\$10,082	0.3%
Fine/Licenses	\$0	\$0	\$0	\$0	\$0	N/A
Charges for Services	\$0	\$0	\$0	\$0	\$0	N/A
Interdepartmental	\$0	\$0	\$0	\$0	\$0	N/A
Other Revenue	\$0	\$0	\$0	\$0	\$0	N/A
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
<b>County Tax Levy (Credit)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>N/A</b>
<b>Total Revenue Sources</b>	<b>\$2,816,180</b>	<b>\$3,166,363</b>	<b>\$3,045,263</b>	<b>\$3,176,445</b>	<b>\$10,082</b>	<b>0.3%</b>
<b>Expenditures</b>						
Personnel Costs	\$1,703,348	\$1,849,899	\$1,787,175	\$1,742,796	(\$107,103)	-5.8%
Operating Expenses	\$724,839	\$924,049	\$860,975	\$1,050,587	\$126,538	13.7%
Interdept. Charges	\$387,993	\$392,415	\$397,113	\$383,062	(\$9,353)	-2.4%
Fixed Assets	\$0	\$0	\$0	\$0	\$0	N/A
<b>Total Expenditures</b>	<b>\$2,816,180</b>	<b>\$3,166,363</b>	<b>\$3,045,263</b>	<b>\$3,176,445</b>	<b>\$10,082</b>	<b>0.3%</b>
Rev. Over (Under) Exp.	\$0	\$0	\$0	\$0	\$0	N/A

**Position Summary (FTE)**

Regular Positions	25.06	22.40	22.40	22.00	(0.40)
Extra Help	0.00	0.00	0.00	0.00	0.00
Overtime	0.00	0.00	0.00	0.00	0.00
<b>Total FTEs</b>	<b>25.06</b>	<b>22.40</b>	<b>22.40</b>	<b>22.00</b>	<b>(0.40)</b>



**Program Highlights**

General government revenue for the Aging and Disability Resource Center (ADRC) Contract fund is budgeted to increase about \$10,100 to \$3,176,400 due to program related costs-to-continue.

Net personnel costs are budgeted to decrease approximately \$107,100 to \$1,742,800 for 22.0 FTE. This decrease is primarily due to staff retirements, allowing for positions to be filled at a lower wage level, and the reallocation of 0.40 FTE Senior ADRC Specialist positions to Fund 150 Community Services Program to assist with growing Older Americans Act grant and Alzheimer's grant programming needs.

Operating expenditures increase about \$126,500 to \$1,050,600 mainly due to an \$89,300 increase in contract services related to rate increases; as well as increases for program promotion related materials of \$15,000; printing costs of \$9,700; newspaper related program advertising of \$4,200; office supplies of \$3,000; telecommunication equipment of \$1,700; and copy machine service of \$1,400

Interdepartmental charges decrease by about \$9,400 to \$383,100 primarily due to reallocation of insurance and copier replacement costs in the amount of about \$15,000 to Fund 150 ADRC Administration program to standardize the budgeting of these costs within the ADRC Division, which conforms to HHS methodology. Utilization of HHS indirect cost plan will allow for inclusion of these costs. This cost reduction is partially offset by increases in postage of \$5,400; and End User Technology Fund of \$2,500.

**Aging & Disability Resource Center Contract Fund (cont.)**



**Program Activity**

The ADRC provides customers a variety of services to help them make appropriate choices to meet their long-term care needs. Activities include information and referral, long-term care options counseling, conducting financial and functional eligibility screens, and elder and disability benefit counseling contacts.

	<b>2015 Act</b>	<b>2016 Bud.</b>	<b>2016 Est.</b>	<b>2017 Bud.</b>
Information & Assistance Contacts	21,569	20,000	31,550	31,000
Long-Term Care Options Counseling Contacts	5,423	8,000	4,000	4,000
Functional Screen Contacts	654	660	1,720	1,600
Elder Benefits Counseling Cases (a) (c) (d)	654	NA	650	650
Disability Benefits Counseling Cases (b) (c)	469	500	580	575

(a) For ages 60 and over. Includes client cases only, New Measure.

(b) For ages 18 to 59. Includes client and third party contacts.

(c) The Elder Benefit Specialist helped County residents to receive \$2,393,841 in benefits and the Disability Benefit Specialist helped County residents receive \$1,241,587 in benefits.

(d) 2016 budget tracks "contacts," therefore no statistics available.

<b>Outreach and Marketing Activities</b>					
	<b>2015 Act</b>	<b>2016 Bud.</b>	<b>2016 Est.</b>	<b>2017 Bud.</b>	<b>Change from 2016 Budget</b>
Annual Newsletter Distribution	2,400	24,000	27,000	30,000	6,000
ADRC Resource Guide	12,000	10,000	12,500	12,500	2,500
Presentation/Display Audience	4,800	2,500	4,000	4,000	1,500

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