

**GREEN LAKE COUNTY**  
**DEPARTMENT OF HEALTH & HUMAN SERVICES**

**HEALTH & HUMAN SERVICES**

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**2016 ANNUAL REPORT**

To: The Honorable Board of Supervisors of Green Lake County  
Green Lake County Health & Human Services Board

Ladies and Gentlemen of the County Board and Health & Human Services Board Members:

We respectfully submit for your consideration the 2016 Annual Report for the Department of Health & Humans Services (DHHS).

Attached you will find unit specific reports outlining services provided by the Department. Each unit has provided an excellent overview of their respective unit responsibilities, services provided and related data. Since it is not possible to include everything accomplished in this type of report, I would encourage each of you to visit Health & Human Services in Green Lake and Fox River Industries in Berlin for a tour and more detailed review of the services provided and programs available.

2016 was a year of change and growth for Green Lake County Health & Human Services. Through these changes and staff turnover Green Lake staff have worked extremely hard to continue and provide quality services to the residents of Green Lake County.

In January 2016 Paul Vander Sande became the Behavioral Health Unit Manager. He along with the other Unit Managers, Betty Bradley, Shelby Jensen, Kathy Munsey, Ed Schuh and Sue Sleezer along with Directors Linda Van Ness and as of September 1 2016 Jason Jerome saw this Department through the changes and turnover. 2016 ended on a positive note and management and staff expect more of the same in 2017.

As a rural county, Green Lake County continues to struggle with access and availability. Green Lake County has continued our involvement in the Central Wisconsin Healthcare Partnership (CWHP) consisting of Adams, Green Lake, Juneau, Marquette, Waupaca and Waushara counties. The CWHP pools together resources as we strive to work together to provide needed and helpful services to the people of our counties more efficiently.

In 2013 Governor Walker created an initiative to expand mental health services and funding for counties wishing to collaborate. In 2014 Green Lake County, along with the counties of Adams, Juneau, Marquette, Waupaca and Waushara applied as a consortium to provide Comprehensive Community Services (CCS). In 2016 all counties in this consortium now provide CCS services as both Marquette and Waupaca became certified. We have continued to partner with these counties, while also expanding our CCS program.

Additional initiatives/projects implemented in 2016 include but not limited to:

- The Child Support Unit, at the time a stand-alone unit in the County, came under Health & Human Services in the Economic Support Unit. More detail will be provided in the Economic Support section of this annual review.
- Staff have worked with our auditors Schenk to completely re-write our fiscal policies and procedures. We are now in line with new Uniform Grant Guidance procedures.
- Staff have worked diligently to implement Netsmart's MyAvatar paperless electronic records and billing software.
- Administrative staff are in the process of updating the intake flow process to better serve those needing services from the Department. With the changes we are trying to make the process as efficient as possible. These changes will also help us capture more information on the front end to help ensure more revenues for services are captured.
- As a Department, in the area of Child Welfare, we have successfully implemented grant initiatives and continued programs which have included: Alternative Response (AR); Safe and Stable Families (SSF); Coordinated Services Teams (CST); Post- Reunification (PR); Intensive in-Home Safety Services (IHSS); Family Find; and the Community Response Program (CRP). In 2016, the agency successfully applied for and was granted a three-year funding from the Child Abuse and Neglect Prevention Board. Under this initiative, our agency will act as the lead over a four county consortium comprised of Adams, Green Lake, Marquette and Waushara Counties. The total grant award over the three year period is \$350,000.
- Nichol Grathen from the Behavioral Health Unit wrote for and received the Treatment Alternative & Diversion Court (TAD) grant. The grant is for \$134,490 for the year of 2017 to cover planning and early implementation. The program has a three-phase structure which supports collaboration between treatment responses and sanctions designed to enhance accountability for criminally involved adults with substance use disorders. We specifically target high and medium risk individuals with high needs related to treatment and community resources.

We anticipate that individuals would be in the program for between 16-18 months for full completion with service intensity decreasing as they reach the later phases.

The basic plans for grant money are to cover costs of hiring a part time coordinator for the treatment court, supporting inpatient treatment for offenders with this higher level of treatment need, providing random and frequent drug testing for participants, and offering small incentives and positive reinforcement. Some of the money would also be used for training and continuing education for staff required under the grant and may be available for miscellaneous program costs.

There has been significant change and staff turnover in Health and Human Services. Our ability to continue and provide quality services to the residents of Green Lake County is a tribute to the Health & Human Services Board, County Board and a very talented and dedicated staff of professionals.

We look forward to the challenges ahead and the opportunity to continue to provide services which best meet the needs of Green Lake County.

Respectfully Submitted,

Jason Jerome  
Director

## **2016 Annual Report**

### **Administrative Unit**

The administrative Unit consists of the Director, Administrative Assistant, Account Clerk Specialist, Accounting Specialist, three Receptionist/Data Entry Specialist, a Secretary and newly added in 2016 a Billing Specialist. These staff perform a variety of functions for the Department including, but not limited to, information and referral of the general public to appropriate staff; billing for services provided and collecting payments from consumers and third party payers, reporting expenditures to the State for reimbursement; inputting client notes, court reports, state reports and general correspondence; inputting and transmitting a variety of data to the State via several reporting systems; maintaining management of the closed client files, contract files, and personnel records. Staff within the Unit also maintain and record meeting minutes for the Health & Human Services Board and the various sub-committees.

In 2016 we have seen some staff turnover. Changes in 2016 include Director, Accounting specialist, two Receptionists/Data Entry Specialists, and a Billing Specialist position was created. The MyAvatar electronic record keeping and billing software program has been live since April 2015. 2016 saw the Department successfully using the system to bill and receive payment for services provided. The Administrative Unit along with other Units of the Department continue to receive assistance from Netsmart to fully implement the software. Administrative support staff have worked diligently and together through the staff turnover to make great strides in implementing and utilizing the software, as well as creating much more efficient workflow procedures to capture all necessary information at intake to help ensure we capture all revenues for the service provided.

As shown on the enclosed chart, public usage of services provided at the Health & Human Services center totaled 37, 774 contacts (28,015 phone contacts and 9759 walk-ins) in 2016. This is an increase from 36, 736 contacts (29,213 phone contacts and 7523 walk-ins) in 2015. Not reflected in the chart is the number of individuals/families utilizing the food pantry and directly accessing the Aging Disability Resource Center or calls routed to the Call Center for Economic Support Services. These numbers will be accounted for in the Aging/Long-Term Care and Economic Support/Child Support Unit reports.

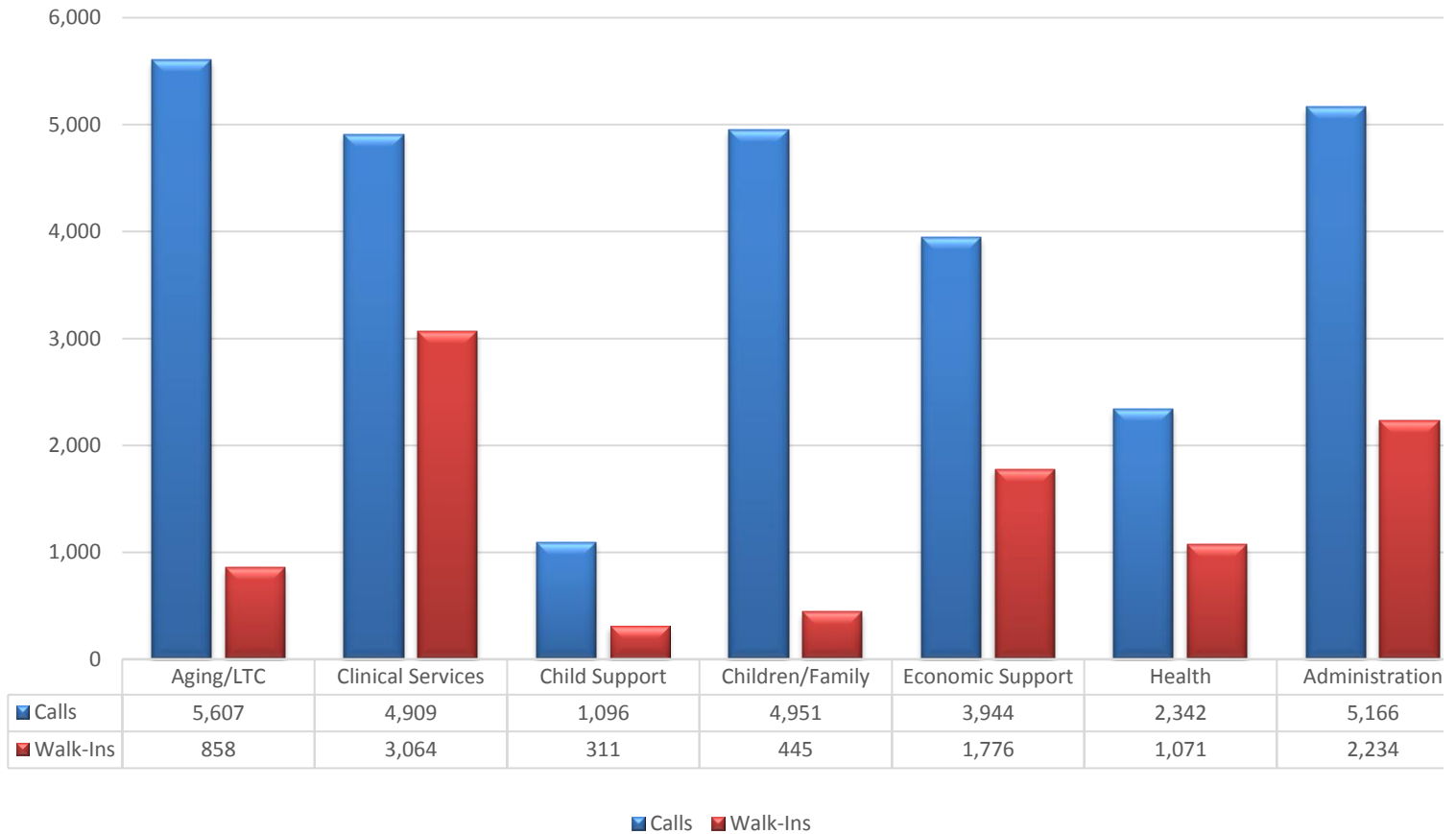
The Administrative Support staff continue to adapt to the various demands placed onto them to help ensure consumers have access to needed services. The staff is friendly, knowledgeable and work extremely well together. Administrative Support staff is often the face of the agency as they are the first people consumers and constituents have contact with. The current Administrative Unit staff ensures that this first contact is always a positive one.

Respectfully Submitted,

Jason Jerome

Director

## Agency Activity 2016



**2016 Annual Report**  
**Aging and Long Term Care Unit**

The Aging / Long Term Support Unit provides services to Elderly and Disabled residents of Green Lake County. The staff are divided into program areas largely defined by funding source, however, the programs overlap in many areas, and the combined unit is able to maximize these resources to the advantage of all of the people we serve.

There were 11 staff in the Aging and Long Term Care Unit during 2016 including the Unit Manager, two Resource Specialist Social Workers, the Adult Protective Services Worker, three Meal Site Managers, the Nutrition/Volunteer Coordinator, the Elderly Benefit Specialist, the Disability Benefit Specialist, and the Aging Disability Resource Center Coordinator.

**Aging and Disability Resource Center**

Green Lake County operates the Aging and Disability Resource Center (ADRC) in a consortium with Adams, Marquette and Waushara Counties. The consortium is funded by the State to provide a single point of entry to Long Term Care Services and Information and Assistance for residents of the four counties. Aging and Disability Resource Centers are the first place to go to get accurate, unbiased information on all aspects of life relating to aging or living with a disability. The ADRC provides information on a broad range of programs and services, helps people understand the various long-term care options available to them, helps people apply for programs and benefits, and serves as the access point for publicly funded long-term care. Green Lake County continues to employ the ADRC Director, who works with the multi-county committee, that contracts with the state to assure ADRC service provision. Additional ADRC staff are employed by each county and duties are shared across county lines.

**DISABILITY BENEFIT SPECIALIST**

The Disability Benefit Specialist (DBS) position provides assistance for people ages 18 to 59 who have any kind of disability, in applying for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). The DBS assists people with Medicare, to find the best Medicare Part D prescription drug plans for their individual needs.

In 2016 a 138 new cases were opened, 115 cases were closed, 50 cases were carried over and 220 cases were served. A conservative estimate of the economic impact of the DBS program in Green Lake County for 2016 shows that is brought in over \$1,207,000.00 to the local economy. The DBS carries an average caseload of 73 cases at any one time.

	2016	2015
<b>New Cases Opened</b>	138	131
<b>Cases Closed</b>	115	108
<b>Cases Carried Over</b>	50	55
<b>Total Served</b>	220	210
<b>Approximate Dollars for Clients</b>	\$1,207,000.00	Over 1 million dollars
<b>Average Caseload</b>	73	60

## HEALTH PROMOTION PROGRAMS

The ADRC offers community health and disease prevention education programs, with an emphasis on falls prevention and chronic disease self-management. In 2016, 3 classes were held in Green Lake County. Twenty-seven individuals participated in workshops offered through the Health Promotion Programs. The workshops offered were Healthy Living with Diabetes and Stepping On.

## AGING PROGRAMS

The County Aging Unit is the Agency designated by the County Board and authorized by the Older Americans Act to continue to develop, support, assist, and evaluate County-based programs for older adults (over age 60) with the purpose of fostering independence and enhancing the quality of life for older adults in the county.

All Federal money from the Older Americans Act, Title III, is distributed to the state, which gives it to the regional Area Agency on Aging and then to the Counties. The amount each County receives is determined by a set formula. Included in the formula is the number of elderly, low-income elderly and isolated elderly individuals within the County.

Federal Title III-B money is used for various service programs such as elderly health screening, transportation, the elderly benefit specialist, and program development for Senior Centers. Matching local funds and required In-Kind assistance provides the rest of the resources for the Aging programs. In 2016, volunteers provided 838.5 hours equal to **\$7,789.887** In-Kind match for Title III-B programs. (2015 - 688.5 hours equal to \$11,539.57) Federal Title III C-1 & 2 must be used for elderly nutrition. See below for more information on the elderly nutrition and matching In-Kind amounts.

### CONGREGATE NUTRITION PROGRAM (C-1)

The Nutrition Program assists older individuals to live independently by promoting better health through improved nutrition. It reduces the isolation of older individuals through nutrition related and supportive services. It prevents malnutrition and promotes good health through nutrition education, screening and intervention. The Aging Unit Nutrition/Volunteer Coordinator is trained as a certified ServSafe Professional Food Manager/Nutrition Director and oversees both the Congregate and Homebound Meal Programs.

In 2016, 6914 meals were served at three Mealsites: Berlin Senior Center, Dartford Bay Apartments - Green Lake, and Grand River Apartments - Markesan. Volunteers play a vital role in all our C-1 programs; twenty-five **(25)** volunteers donated approximately 1,720 hours in the Nutrition Program. These hours equal **\$12,774.00** in In-Kind Dollars. In-Kind includes activities such as setting tables, serving food, clean-up tasks, and doing paperwork and are a requirement of the Older Americans Act to earn funds for the meal programs. Donations at **\$4.00** per meal received in this program were **\$19,960.00.\***

	2016	2015
Meals served at mealsites	6914	7083
Volunteer hours	1720	1725
In-Kind Dollars	\$12,774.00	\$12,508.06
Congregate Meal Donation Dollars	\$19,960.00	\$23,650.14
Homebound meals delivered	14,743	14,221
Homebound meal donation dollars	60,456.00	62,721.87

#### **HOMEBOUND MEAL PROGRAM (C-2)**

In 2016, 14,743 meals were served throughout the County to persons who are unable to go to the meal sites for health related reasons. Requests for Homebound meals come from hospital discharge planners, meal site managers, units of Health and Human Services, doctors, and families and enable the older person to remain in his or her own home as long as possible. Requests are referred to the Nutrition Coordinator who meets with each new enrollee to conduct a thorough nutritional assessment; these are updated annually. The meal delivery program is also a part of a support system that checks on the elder person four to five days per week depending on their location. Drivers are trained to watch for changing needs and to alert Nutrition Coordinator as necessary.

Donations at **\$4.00** per meal received in this Program in 2016 were **\$60,456.00.\***

\* Subject to Audit

#### **TITLE III-D PROGRAM**

In 2016, this program funded two Healthy Eating for Successful Living for older Adults classes. Twenty-four seniors attended and enjoyed the classes.

#### **TRANSPORTATION**

One of the greatest needs for the elderly and/or handicapped person is transportation. The Aging Unit receives and administers the 85.21 State Grant monies, \$81,740.00 in 2016. Service priorities are MEDICAL TRIPS, NUTRITION-RELATED ACTIVITIES, WORK-RELATED ACTIVITIES, and SOCIAL ACTIVITIES. Handicapped and older adults were provided 12,359 trips in 2016 with 85.21 funding.

	2016	2015
85.21 State Grant funds received	\$81,740.00	\$81,740.00
Number of trips	12,359	26,262

#### **TEFAP - (THE EMERGENCY FOOD ASSISTANCE PROGRAM)**

The Food Pantry is operated by the Aging/Long Term Care Unit of the Department of Health and Human Services and is available to any indigent person/family in an emergency. The Food Pantry is funded by TEFAP and private donations from fundraisers and local donors.

The Emergency Food Assistance Program/Food Pantry operates the first, second, and fourth Thursdays each month, and the third Tuesday evening. The Food Pantry currently has 31 volunteers who staff the days the food pantry is open and pick up donations.



Eligible residents of the County may attend once each month. Throughout 2016, the Food Pantry served an average of 215 households, and 473 individuals per month. Each household was provided an average of 73 pounds of food for a month.

<b>Food Pantry</b>	<b>2016</b>	<b>2015</b>
Average households served monthly	215	259
Average number of individuals	473	535

#### **ELDER ABUSE AND NEGLECT PROGRAM**

The County Aging and Long Term Care Unit has been designated as the lead Agency in the Elderly Abuse Reporting System. Services provided to elders in crisis include Relocation and Shelter costs, Medical care, Legal Services, Supportive Homecare, Guardianship evaluations, and Outreach. These services are offered to older adults to help them resolve abusive or neglectful situations. The Adult Protective Services Social Worker investigates abuse and neglect referrals.

There were a total of nineteen **Elder Abuse** investigations in 2016, with three Elder Abuse cases substantiated. The remaining cases were either unsubstantiated (7) or unable to be substantiated (9) for a variety of reasons. The most frequent concern was self-neglect, followed by material / financial abuse.

In 2007, a parallel system for Abuse and Neglect investigation and reporting for **Vulnerable Adults** was instituted by state law. The Adult Protective Services worker is the lead for this system also. The reporting requirements are very similar to the Elder Abuse system. In 2016, there were 12 **reports** of abuse to **Vulnerable Adults**; 4 were substantiated, 1 unsubstantiated, and 7 unable to substantiate.

	<b>2016</b>	<b>2015</b>
Elder Abuse Investigations	19	27
Elder Abuse Cases Substantiated	3	10
Vulnerable Adults Abuse Reports	12	4
Vulnerable Adult Abuse substantiated	4	2

#### **ADULT PROTECTIVE SERVICES/GUARDIANSHIPS**

The Adult Protective Services Social Worker performed **six** guardianship studies for adults in 2016. (2015 - 12) These consisted of Temporary, Permanent and Successor Guardianships. In addition, thirty-nine Protective Placement reviews were completed. (2015 - 37) All reviews require a brief summary hearing on each of these placements to ensure that the continuation of the placement is appropriate, least restrictive and most integrated into the community. The Adult Protective Services worker submits a report to the court and attends each review hearing. Placements are monitored in nursing homes, Community Based residential Facilities (CBRF), State Centers for the Developmentally Disabled, Adult Family homes, and private homes or apartments. In addition, Power of Attorney documents and advanced planning information is regularly requested and assistance provided as needed.

### **ELDERLY BENEFIT SPECIALIST PROGRAM**

The Elderly Benefit Specialist coordinates information and counseling regarding the public benefit program to individuals **sixty** years of age and older. The Elderly Benefit Specialist assists people age sixty and over to apply for Social Security, Social Security Disability, Medicare, Medicare Part D, Medical Assistance, and Senior Care.

In 2016, there were 209 Open Cases, and 101 hours of training. Through these efforts, the Elderly Benefits Specialists' program saved Green Lake County elderly clients over \$2,240,000.00.

There were 1407 Information and Referral inquiries to the Aging Unit and 268 hours of Outreach Services and 36 hours of presentations at the various Senior Centers and meal sites.

	<b>2016</b>	<b>2015</b>
Elderly Benefit Specialist open cases	209	382
Hours of training	101	92
Dollars saved for elderly clients	Over \$2,240,000.00	Over \$2,382,891.00
Information and Referral Inquiries	1,407	1473
Outreach Service Hours	268	204.5
Senior Center presentation hours	36	29

### **FAMILY CAREGIVER PROGRAM**

Under the Federal Family Caregiver Grant, the Volunteer Coordinator identifies and meets with caregivers who are elderly, including grandparents who are raising grandchildren. A monthly support group, training, loan library, respite care, and information and assistance are available for caregivers. We served thirty - two caregivers in 2016 through this program. (2015 - 15 caregivers served)

### **OTHER PROGRAMS**

The Senior Sentinel is a bi-monthly newsletter published by the Aging Unit and delivered to over **950** households in the County. The articles that appear in this publication help elders keep up-to-date with current information about our services and programs. The UW Extension Office and the Nutrition program provide healthy recipes and health tips. The publication contains current information concerning County, State and Federal programs that affect Senior Citizens in Green Lake County.

Each year in August, the Aging Unit sponsors a countywide Senior Picnic. In 2016, **165** elders from throughout the County, along with 10 staff and volunteers, attended the County Senior Picnic at St John the Baptist Catholic School Gym in Princeton. (2015 - 180 in attendance)

#### **ALZHEIMER'S FAMILY CAREGIVERS SUPPORT PROGRAM**

During 2016, we received **\$5434.00** in Alzheimer's Family Caregivers Support Program (AFCSP) funds. These funds provided a variety of services to **three** individuals who suffer from Alzheimer's disease. (2015 - \$5434.00 for two individuals).

#### **SUPPORTIVE HOME CARE**

Throughout the year, one **(1)** individuals received Supportive Home Care (SHC) funded services, including housecleaning, yard work, meal preparation and assistance with laundry, lifeline, etc. (2015 - 2 individuals)

## **2016 Annual Report Behavioral Health (Clinical Services) Unit**

2016 was a year of transition for the Behavioral Health Unit. All the staff of the Behavioral Health Unit did a stellar job at meeting the mental health needs of Green Lake County.

The Behavioral Health Unit construct for 2016 was: a unit manager, 5 counselors, one mental health case manager for the CCS, CSP and CLTS programs, one CSP case manager for CSP, one CSP facilitator, one crisis case worker, two part-time psychiatrists (child and adult specialties) one psychiatric nurse, and a part time psychologist who provides clinical supervision. All of the counselors have Master's Degrees in a Mental Health related field and bring a variety of strength based skill sets to our service array. Each person brings a wealth of knowledge in the mental health field and a renewed excitement towards providing services to the consumers we serve in Green Lake County.

As a team we are also joining the shift in updating the units name to the Behavioral Health Unit to reflect what the state of Wisconsin has encourage over the last several decades. This alignment with state and national practices helps affirm the unit's focus on health and recovery support for consumers.

As a unit, we continued to provide community outreach training, mobile crisis intervention services, and growth within program service arrays throughout the year. We also continue to be committed to consumer participation within programs, and providing health and wellness recovery groups as a source of mental health treatment. The clinicians and psychiatric nurse have been cross-trained to work in several of the unit programs including the 24/7 on-call mobile crisis intervention services program. Our unit focuses on providing professional and ethical services when engaging consumers in all Behavioral Health programs.

### **Crisis Intervention**

Dr. Kent Berney (Forensic Licensed Psychologist) joined the behavioral health unit team in November 2015. Dr. Berney brings a plethora of experience including former Director of Psychology at Winnebago Health Institute, supervisor for the Forensic Psychiatric Residents at UW-Madison Medical School and a professional demeanor that allows staff to learn and professionally from his supervision. During the year of 2016, our unit served **423** crisis calls. (2015 – 337) There is an excellent commitment by the behavioral health unit's staff to provide community based crisis services. This partnership includes collaboration between Behavioral Health Unit crisis staff, schools, hospitals, and law enforcement professionals in Green Lake County.

The following is a summary of crisis intervention services:

- 0 adults were diverted from psychiatric facility to a diversion facility (2015 – 0)
- 329 adults were served through crisis diversions to the community (2015 – 260)

- 47 adults were placed on an emergency detention/psychiatrically hospitalized (2 of those were detox) (2015 – 36)
- 48 adults utilized our services after crises (2015 – 30)

As a state certified crisis intervention provider, the behavioral health unit continues to collaborate with, schools, local law enforcement, and area hospitals to provide the most appropriate level of community based crisis treatment. The unit crisis workers have the ability to provide crisis counseling on a walk-in basis or go mobile to the most appropriate location to provide crisis assessment, safety planning and response (e.g. Emergency Rooms) 24/7. The current emphasis is on providing a comprehensive assessment and response plan by the on-call crisis worker when determining safety of individuals when being called by law enforcement.

Seven clinical staff rotate handling crisis calls during and after business hours. When a counselor meets in-person with a consumer in crisis they are able to engage the person on what resources/supports they are most in need of to create a safe crisis response plan in the least restrictive environment. This collaborative effort between multiple systems allows a partnership to provide Green Lake County residents with the most appropriate level of care, in the safest situation in the least restrictive setting. When determined that most appropriate level of care is a psychiatric hospitalization, an emergency detention is initiated by the crisis worker and law enforcement.

We also contract with a crisis diversion facility, Summit House in Oshkosh, WI for the few that need safety supervision, but do not need hospitalization. We have also established a relationship with Berry House in Fond du Lac, WI as a community based diversion option for residents in need of structured transitional supports and supervision around mental health needs upon discharge from a psychiatric facility.

### **Outpatient Counseling**

During 2016, 297 clients were served in the outpatient AODA program, the outpatient Mental Health Unit served 464 clients. The Community Comprehensive Service Program Served 90 Consumers, the Community Support Program served 9 consumers and the children's long term support waivers program served 9 consumers. Green Lake County Behavioral Health Unit has served approximately 4% of the population of Green Lake County increased by 1% since 2015.

Dr. Shirley Dawson, MD is currently serving as Green Lake County's Medical Director and also sees consumers for psychiatric services. She is currently seeing consumers two days a week to meet the needs of our residents and as well as providing supervision for both our Mental Health and our AODA Counselors. Dr. Baldomero, MD continues to provide child psychiatric services one day every other week.

The Behavioral Health Unit is no longer certified by the State of Wisconsin as a TeleHealth provider

Combined our psychiatrists provided services to over 212 clients in 2016. (2015 – 280) Doctors are able to see clients within 2 months from request for services and often times sooner as scheduling space opens up. Appointments with a therapist that are non-emergencies are -2-3 weeks out. Emergencies are seen immediately on a walk-in basis for needed services 24 hours a day, 7 days a week. Intake counselors are available to speak with anyone on a walk-in basis to our unit as a crisis intervention session or simply to support a consumer in filling out intake paperwork to see a counselor, or as a support to talk with consumers on various resources throughout the county and how to access needed services.

Our unit takes a whole system approach in serving residents in Green Lake County and we understand how each aspect of a person's life can affect quality of life in others (e.g. mental health, financial, housing concerns, childcare, employment, etc.).

### **Community Support Program (CSP)**

The CSP provides intense community services to people with severe and persistent mental illness. Staff provides counseling, support, transportation, case management, representative payee, medication management, crisis services and more. Without this community based mental health service, it would be difficult for many individuals to remain at home and in their communities.

### **Comprehensive Community Services (CCS)**

The Comprehensive Community Services program is a strength-based consumer driven psychosocial rehabilitation recovery program that is community based. This program utilizes the consumers identified strengths to support of their goal directed recovery process. This is a Medicaid funded program which requires each individual enrolled in the program to have Medicaid, and a Diagnosis (mental health diagnosis, substance abuse e.g depression, bi-polar etc.), be motivated to work on self-identified recovery goals, and utilize a collaborative team based model which emphasizes natural supports in recovery.

This client-centered approach provides consumers the opportunity to select who will be on their recovery team, which can be composed of family, friends, staff persons or other natural community supports. Included in this team are the person's mental health professional and a service facilitator. CCS works closely with the Children & Family Unit to help provide services to keep children in their homes instead of foster care placement and to help return a child back to their home with the proper supports. This program also created a strong connection with schools as teams that serve child partner with schools in providing needed supports toward goals.

The program model provides an excellent opportunity for Green Lake residents to experience a collaborative community based approach to mental health recovery. We have built the number of counselor that can provider for this program through functional screening and service facilitation.

We also have a full time mental health case manager that is experienced and dedicated to serving CCS consumers. Following our commitment to consumer driven care this year saw the development of consumer inclusion in program development. A consumer subcommittee was developed to provide direct program feedback to the program.

We are also currently in a Regional CCS Consortium that has been approved by the state of Wisconsin. The Regional CCS Central Wisconsin Health Partnership (CWHP) includes six surrounding counties working together. Due to approval of our certified region medically necessary services are approved to be reimbursed at a rate of 100% for the services we provide CCS consumers. The Regional CCS Consortium meets as a subcommittee on a monthly basis.

### **Aftercare Coordination Program**

As the behavioral health unit continues to provide crisis prevention/intervention services for county residents, it also continues to provide crisis linkage and follow-up post psychiatric hospitalization. Starting at the end of 2012 there is a designated staff member to provide coordinated linkage and follow-up for each individual that is placed by the court system on a 90 day settlement or 6 month commitment order for mental health or AODA treatment. This focus is of critical importance to our unit as the individuals being severed by the aftercare coordinator have entered our unit due to reported harm to themselves (e.g. reported suicide threats or attempts, substance abuse, or inability to care for themselves due to mental health etc.) or harm to others. Helping them stabilize and re-enter their communities with their highest level of functioning of great importance to our providers.

### **Drug Court Program—Treatment Component**

The Drug Court Treatment Program of Green Lake County Behavioral Health was awarded a \$100,000.00 federal grant due to the hard work of Nichol Grathen, our dual diagnosis counselor. The program will start in January of 2017. The positions involved are a program administrator and treatment providers. These treatment providers maintain responsibility for assessing treatment needs for individuals referred to the Drug Court Program. That provider then follows the individual through the treatment court providing clinical therapy, participating in treatment court reviews, and staffing. Treatment providers also add clinical perspective and addiction & recovery education to the Drug Court team as they develop program policies and cross-system responses to participant needs. These treatment providers maintain current knowledge of level-of-care assessment and are able to make referrals for individuals who need a higher level of care at any point during their participation. Drug court team, in addition to treatment providers, includes representatives from Probation & Parole, peer specialist, District Attorney and public defender, law enforcement, correctional facility, and a specialized Drug Court Judge.

### **Recovering Together—Women's' Group**

The Green Lake County AODA program is beginning a gender-specific AODA recovery program that addresses the unique therapy needs of women. The program relies on a relational-cultural model that incorporates mindfulness practices and trauma-informed treatment modalities. The group will serve 6-10 women at a time.

### **Children's' Long Term Support Waiver**

The Children's Long Term Support Waiver (CLTS) is a Medicaid Waiver program for children with developmental or physical disabilities or Severe Emotional Disturbances (SED). Children qualify for the waiver through Medicaid eligibility and use of a functional screen. The families then meet with a caseworker to develop a person-centered ISP that draws on the strengths and needs of the child and their family to identify specific complementary supports that would not be otherwise covered by Medicaid. Examples of such supports include: Autism/ Behavioral in-home treatment, accessible home modifications, sensory supplies/ therapeutic aids, respite care-ongoing and specialized, and support & service coordination.

### **CART—Tricounty Child Abduction Response Team**

Green Lake County DHHS is a partner stakeholder in the development of the tri-county Child Abduction Response Team (CART) serving Green Lake, Marquette, and Waushara County. The CART is in development stages during 2015 and the entire tri-county team participated in a national certification training focused on coordinating timely and effective interdisciplinary responses to missing child situations. The Behavioral Health Unit designates one therapist as a clinic representative to be present in these trainings and to support appropriate responses of clinical crisis staff should this type of a crisis arise.

### **School Office**

In November, the Behavioral Health Unit was approved by the state to have a satellite office at Berlin Middle School. The office is certified by the state for 2 days a week up to 16 hours a week. We believe this will make a major impact by addressing the need for mental health counseling in the Berlin School Community. If this project continues to be successful, we will be considering opening up more offices in other schools.



### **On the Same Page Training and Discussion.**

In November 2016, the clinic staff organized and facilitated a discussion and training bringing together medical professionals, public health workers, emergency room staff, law enforcement, mental health and substance abuse treatment staff, school professionals, and the recovery community to address issues related to crisis, state statutes and working together. There were over 60 people in attendance. Green Lake County Behavioral Health Unit continues to build bridges and reestablish positive working relationships with law enforcement in our county.

### **Behavior Health Unit 2017 program development areas:**

Wellness and Recovery Support Group

Aftercare Wellness and Recovery Support Group Berlin Area

Central Wisconsin Health Partnership

Wellness Coalition Mental Health and Substance Abuse

Heroin Awareness Campaign

Dementia Capable Systems

Crisis Diversion Center Development

Interagency Meetings

Development of the Drug Court Program

School Transformation Advisory Committee

Head Start Committee, Consultation Partnership

AWARE Mental Health Work Group

Aviator/Netsmart Medical Records Implementation

**2016 Annual Report  
Children & Family Services Unit**

2016 was a year that there were several staff changes. The Unit is comprised of the Unit Manager, the Initial Assessment Worker (Child Abuse/Neglect Investigations), and the Juvenile Court Intake Worker, three (3) Dispositional Social Workers, a Medical Assistance Targeted Case Management Social Worker, the Community Response Social Worker, an In-Home Therapist and Coordinated Services Team worker. The In-Home Therapist was promoted to the Agency Director; the Community Response Social Worker was promoted to replace the In-Home position; a new Community Response Worker was hired; the Initial Assessment Worker resigned her position and a new Initial Assessment Worker was hired.

In the spring semester of 2016, one (1) undergraduate field placement students were with the agency. The undergraduate was from (1) from Marian College. The agency later hired this intern to fill the Initial Assessment vacancy. In the fall semester of 2016, one (1) undergraduate field intern was with the agency from the University of Wisconsin - Oshkosh.

The Children & Family Services Unit is responsible for the provision of a number of programs and services available to individuals and families in the community. The following is a brief summary highlighting activities in 2016.

The Unit staff continued to engage in several newer initiatives that started in prior years: the Permanency Roundtables; the Community Response/Quad Counties Family Resource Network (CRP); Alternative Response (AR); and the Intensive Safety Services program (IHSS) and Post Reunification (PR) Services.

**Access**

The ACCESS staff for the Unit received referrals that were logged into the eWISACWIS system. These numbers include the Juvenile Court Intake referrals, Community Response, Child Abuse/Neglect Reports, and Child Welfare Intakes and other Service requests. The total of all Access reports was 433. Of these, the Unit received a total of 282 reports of Child Abuse/Neglect. 88 were screened in for a response from the Initial Assessment Worker. 194 reports were screened out. The screened in reports had a total number of 119 children that were identified as potentially being child victims. The total victims in all reports was 410. The screened in reports by maltreatment type were: 39-Physical Abuse; 59-Neglect; 24-Sexual Abuse; 0-Emotional Abuse and 7 - Unborn Child Abuse. 151 Service Reports were received. Of these, 128 were screened in. These were comprised of 66 Child Welfare Reports, 49 Juvenile Justice Reports, 10 Kinship Care applications, 2 for court ordered study, 1 adoption related, and 1 re-open closed case and 1 for drug affected Infants.

	<b>2016</b>	<b>2015</b>
Number of Access Reports	433	425
Child Abuse/Neglect Reports	282	245
Number Screened in	88	79
Number Screened out	194	166
Types of maltreatment		
Physical Abuse	39	36
Neglect	59	73
Sexual Abuse	24	35
Emotional Abuse	0	5
Unborn Child Abuse	7	0

	2016	2015
Service Reports Received	151 (128 screened in)	180 (142 screened in)
Child Welfare Reports	66	75
Juvenile Justice Reports	48	59
Kinship Care Applications	10	5
Court Ordered Study	2	1
Adoption Related	1	1
Re-open closed care	1	1
Drug Affected infants	1	2

### **Juvenile Court - Delinquency**

In 2016, Juvenile Court Intake received fifty-three (53) new referrals. This is down by 5 referrals from 2015. Thirty-six (36) Delinquency and Juvenile in Need of Protection & Services petitions were filed.

Green Lake County staff has noticed the same trend that has been experienced State-wide which is that fewer juveniles are being referred to the Court Intake offices. State statistics indicate a downward trend in the number of youth in detention as well as in the Institutions which led to the closing of Ethan Allen and Southern Oaks in 2011.

No (0) new youth were placed in the Severe Juvenile Offender Program in 2015. No adult court waivers were filed. Two (2) youth were placed at Rawhide Boys Ranch in 2016. One youth participated in the About Face Program and the other in the Residential Care Program. One of these youth was later transferred to Treatment Foster Care, and the other to the community.

Two (2) summer groups were held in 2016. This year, two (2) staff from the Green Lake County DHHS collaborated to facilitate the Boys group. The youth that engaged in the Summer Youth Program participated in Equine Therapy through Mihala's Hope. There were five (5) males that participated and completed the group. Additionally they participated in group therapy activities which focused on prevention, group process, and problem-solving as well as social skill development. The group was 9 weeks in duration. A girls group, "Like a girl" was facilitated by three staff for the first time in 2016. Twenty (20) girls participated in this activity.

The Intensive Supervision worker for the unit facilitated a court ordered groups on "Teens in Action". Twelve (12) youth participated in this curriculum both in group and one-to-one. (2015 - 20 youth)

Juvenile Court staff is on-call twenty-four hours per day for the purpose of Juvenile Intake/Detention, Child Abuse/Neglect and Emergency Assistance.

### **Electronic Monitoring/GPS Monitoring**

Eleven (11) youth were on monitors in 2016. Four (4) of the youth were female; Seven (7) of the youth were male. The agency began to use the EM in lieu of out-of home placements. The Agency has loaned two (2) monitors to Marquette County who in turn reimburses Green Lake County for their use. (2015 - 7 youth - all male)

### **Mediation**

In the second half of 2013, the Green Lake County DHHS staff began Court Mediation services for the Family Court. This service has continued in 2016 for the Court. Initially, the duties were split between one staff in the Behavioral Health Unit and the Juvenile Court Intake Worker. However due to the extended leave of the Behavioral Health Manager all the mediations were completed by the Juvenile Intake Worker in 2016. Thirty-two (32) mediations were completed in 2016. (2015 - 30)

### **Child Abuse/Neglect/Child Welfare**

As the State has been preparing for the Federal Review, a number of new policies were in-acted in 2016. As stated earlier, Seventy-nine (79) Initial Assessments were conducted. By years end, thirteen (13) Child in Need of Protection and Services Petitions were filed. (2015 - 79 initial assessments with 31 petitions filed)

Due to the rise of prescription drug abuse, opiate/heroin addictions on the rise, two (2) adult females were placed in Community Based Residential Facilities until the children were born. Of the 245 Child Abuse/Neglect referral received by the agency a number of them were under the Drug Effectuated Children (DEC) protocol.

**Seven (7) of the children in Voluntary Kinship Care are placed with their relatives due to drug issues related to the parent(s). Seventeen (17) of the children placed in court-ordered relative care, foster care and subsidized guardianship are out of their parental homes due to drug related issues by the parent(s). One (1) youth in treatment foster care is placed due to drug related issues by the child and the parent(s).**

### **Parenting**

The Family Training program provided services to nineteen (19) families with a total of forty-two (42) children in 2016. Of these children, ten (10) were in out of home placements. They provided both parent training and education, parent aide services and in-home therapy. In 2015, the Crisis Intervention slots were continued. These slots are primarily utilized in an effort to return children to their parental homes post removal or prevent the removal in an emergency situation.

In addition to the parent training contracted through Family Training Program, an agency staff (Dispositional Worker) worked with eleven (11) families on an individual basis. Additionally agency staff co-facilitated two (2) Strengthening Families groups in the spring 2016 & fall 2017. Six(6) families participated in Strengthening Families. The agency contracted with Lutheran Social Services for parent training for one (1) family with two (2) parents and ten (10) children. Progressive Parenting LLC also provided parent-mentoring services in addition to Comprehensive Community Services team facilitation. Nineteen (19) families were served in-home by this agency. In addition, one (1) group was conducted with three (3) families in participation.

### **In-Home Therapy/Targeted Case Management/Comprehensive Community Services**

The In-Home therapist has taken a lead role in the development of the Targeted Case Management (TCM) program. Whenever possible, TCM is billed to help recover the cost of the services provided. The In-Home therapist is cross-trained to facilitate Comprehensive Community Services (CCS) teams as well as perform Children's Functional Assessments. The In-home team is augmented by a TCM case manager as well as other mental health professionals. At year end, seventy-three (73) cases of TCM were authorized for billing. (2015 - 24 cases)

Three (3)staff in the Unit perform service facilitation on Comprehensive Community Services Cases in addition to contract providers. The Unit referred twenty-seven (27) individuals that were served the CCS program in 2016. (This number is a separate statistic from those facilitated for by/for the Behavioral Health Unit.)

### **Foster Care/Kinship Care**

Foster Care, Kinship Care, Group Homes and Residential Care facilities are used for children who are unable to reside in the home of their parents or guardians. The State changed how foster homes are now licensed and have set up Levels of Care as well as an evaluation tool for the Level of Need. All the unit staff is certified to perform the Child and Adolescent Needs and Strengths Assessment (CANS). In 2016, Nineteen (19) children were in foster care. Additionally, two (2) youth were in residential treatment; two (2) youth were in treatment foster care; three (3) children were in relative homes that did not convert into foster care placements; fourteen (14) children were in Voluntary Kinship Care; two (2) children were under a subsidized guardianships. Two (2) children were subject to Termination of Parental Rights; One (1) child was placed into subsidized guardianship; One (1) child was placed into relative guardianship; Three (3) children are pending on Termination of Parental Rights petitions.

In 2015, two (2) youth were in residential treatment; two (2) youth were in treatment foster care; seventeen (17) children were in foster care; twenty (20) children were in court-ordered relative care; six (6) children were in Kinship Care; One (1) child was under a subsidized guardianship. Four (4) children were subject to Termination of Parental Rights petitions.

### **Courtesy Supervision**

Courtesy Supervision for both Child in Need of Protection and Services as well as Juvenile Justice Cases was performed for other Wisconsin Counties including Portage, Fond du Lac, Winnebago County and Rusk County. The Unit also provided courtesy supervision for an out of home placement for the State of Washington. In addition to courtesy supervision, home checks to confirm safe environment (CSE) for other counties.

### **Community Response Grant**

Our agency continued to lead a Quad County consortium which developed/facilitated the Family Resource Center/Community Response grant. A three year grant cycle ended in June, 2016. 89 referrals were made to the program. (2015 - 130 referrals) The program services Green Lake, Waushara, Marquette and Adams County. Our agency successfully applied for and received a three year grant once again in 2016. The new grant began in October, 2016. The first year of the grant is \$100,000. In year two and year three will receive \$125,000 per annum.

### **Contractual Services**

The Unit In-Home Therapist also served families through Mental Health Crisis planning and services. This worker worked in conjunction with an Independent Contractor, Wellhoefer Counseling to provide in-home therapy services to youth and their families and KD Counseling Services.

The Lutheran Social Services agency was awarded grant funds through an Intensive Safety Services program funded by the State from 2012 to 2016. This program has served two (2) families in Green Lake County. The Dodge Consortium decided to not reapply for funding in 2017. Green Lake County applied for this funding and as needed will be able to access slots in the next year. The program is designed to prevent the removal of children from their home.

### **Mentoring**

Our agency sub-contracted with Community Options, Inc to take over the management of the mentoring program in 2010. That agency has continued to provide mentors to our children/youth. In 2016, twenty (20) children were served; this consisted of eight (8) females and twelve (12) males. (2015 - 20 children were served)

### **Coordinated Services Program**

After a successful grant application, Green Lake County began the Coordinated Services Initiative in April 2014. The target population for this grant is children and families with multiple needs who are served in the Child Welfare/Juvenile Justice system, Mental Health and AODA service system. Seventeen (17) teams were open in 2016. (2015 - 15 teams) Outreach has been done to other agency staff, schools, inter-agency groups and the Boys and Girls Club.

### **Prevention/Education**

Children & Family Services Unit staff have presented public presentations in the community on agency services and programs as well as training topics to groups. Presentations have been on the topic of child abuse and neglect, shaken baby syndrome and community service as well as the Community Response Program. Staff has also been involved on committees on the local level such as the Family Resource Council, the ADVOCAP/Headstart Policy Council, and the WCSHA Children & Families Sub-Committee. Unit staff has participated on the SART (Sexual Abuse Response Team), CART (Child Abduction Response Team, Child Death Review Team, and the Drug Endangered Children team.

Agency staff coordinated a 5 K (CAP Run) with other community partners in the month of April, 2016 to promote child abuse and neglect awareness. One Hundred Ten (110) adults and forty (40) children participated in this event.

In from October to December 2016, Unit staff coordinated the annual Angel Tree Christmas giving program along with other community partners. One hundred twenty-two (122) families were served for a total of two hundred eighty-four (284) children.

### **Licensing**

The Green Lake County foster care coordinator actively converted a number of relative placements to licensed level two foster homes in 2016 as well as continued the licensing process on non-relative caregivers. Our agency had fifteen (15) level II foster homes in 2016. Two (2) of these licenses were studies conducted for neighboring counties due to conflict of interests. One (1) additional home was licensed for the State of Washington through the inter-state compact agreement. Four (4) additional homes are certified for respite care.

2015 there were eleven (11) licensed level II foster homes. At the year's end, the agency had one (1) active level I licensed home. Three (3) additional homes are certified for respite care.

Respectfully submitted,

Susan Sleezer  
Children & Family Services Unit Manager

## **2016 ANNUAL REPORT** **CHILD SUPPORT UNIT**

*~Protecting Children, Strengthening Families, Building Communities~*

The Wisconsin Child Support Program helps parents get court orders for financial and medical support for their children. It also enforces these support orders when needed, and makes sure that all money collected is paid out correctly.

Two Child Support workers, ¼ time Receptionist, and a Unit Manager make up the Child Support Unit for Green Lake County. This Unit though on a 'learning curve' is performing above performance standards.

Presently, the Child Support Unit has 1036 cases. This number includes 109 Non-IVD cases. These cases have not applied for our services. The agency still has the responsibility to work the cases. An example of work that is required would be sending out wage assignments. The work we complete on these cases does not affect the Performance Standards.

### **2016 Green Lake Child Support Performance**

Green Lake County continues to meet the Performance Standards set forth by the State.

Green Lake County has 819 cases with a child support order, which is 91.59% of our cases.

Green Lake County has a paternity establishment rate of over 100%.

Green Lake County has collected over 80% of current child support ordered monthly in 2016.

Green Lake County was successful in collecting an arrears payment on 80.70% of cases court ordered to pay arrears. This performance measure is difficult to meet by several counties in Wisconsin and Nationwide.

### **Looking to 2017**

Child Support is mandatory for E-Filing with the Circuit Court. We go "live" with E-Filing, February 17, 2017.

Currently, all Child Support cases files are paper and stored in file cabinets. All open files will be scanned into Laserfiche, an electronic case file system.

Submitted by:           Shelby Jensen  
Economic & Child Support Unit Manager

## **2016 ANNUAL REPORT** **ECONOMIC SUPPORT UNIT**

*~ Providing and Coordinating Resources to Strengthen Families ~*

Access to resources and quality customer service are the main focus of the Economic Support Unit. Our goal is to provide accurate, timely, and effective financial and case management support services for all our customers.

Six Economic Support workers and a Unit Manager make up the Economic Support Unit for Green Lake County. The expertise in our unit goes back to January 2001 to current.

Presently, our Economic Support Unit is serving over 1990 Green Lake County households. Customers may be receiving assistance from Medicaid, BadgerCare Plus, Family Care, FoodShare, Wisconsin Shares, and Energy Assistance. This is a 1.5% caseload increase from last year. This is a continuous trend we have seen for the last five years.

### **ECONOMIC SUPPORT PROGRAMS**

*~ The Economic Support Programs serve to provide financial stability for low income households and those experiencing a financial loss~*

The Economic Support services are necessary to meet an emergency need such as homelessness or medical needs. Each program serves a specific population and has different income guidelines and requirements. The self-sufficiency of Green Lake County households and individuals is the program goal. The number of customers requesting financial assistance from Economic Support Programs continues to grow each year. Requests for the programs continue to grow due to the current economic conditions.

#### **Caseload Growth**

2011	1593 households receiving assistance
2012	1828 households receiving assistance
2013	1883 households receiving assistance
2014	1947 households receiving assistance
2015	1970 households receiving assistance
2016	1998 households receiving assistance

Requests for program assistance are made by contacting Green Lake County Health & Human Services and speaking to the intake worker or by coming into the agency. Customers may also use the ACCESS website at [www.access.wi.gov](http://www.access.wi.gov) to learn about the programs, apply and update their status online. Customers also have the option of calling our Call Center at 1-888-256-4563 to request program assistance.

The 2012 Mandate required counties to form consortia. A total of 10 consortia were formed in Wisconsin. Green Lake County joined 9 other counties to form East Central Income Maintenance Partnership (ECIMP). This “partnership” in less than six months created a Call Center (CCA) that was to handle all incoming Income Maintenance calls within the 10 counties.

January 1<sup>st</sup>, 2016 Sheboygan County decided to elect to leave ECIMP to join another Consortia.

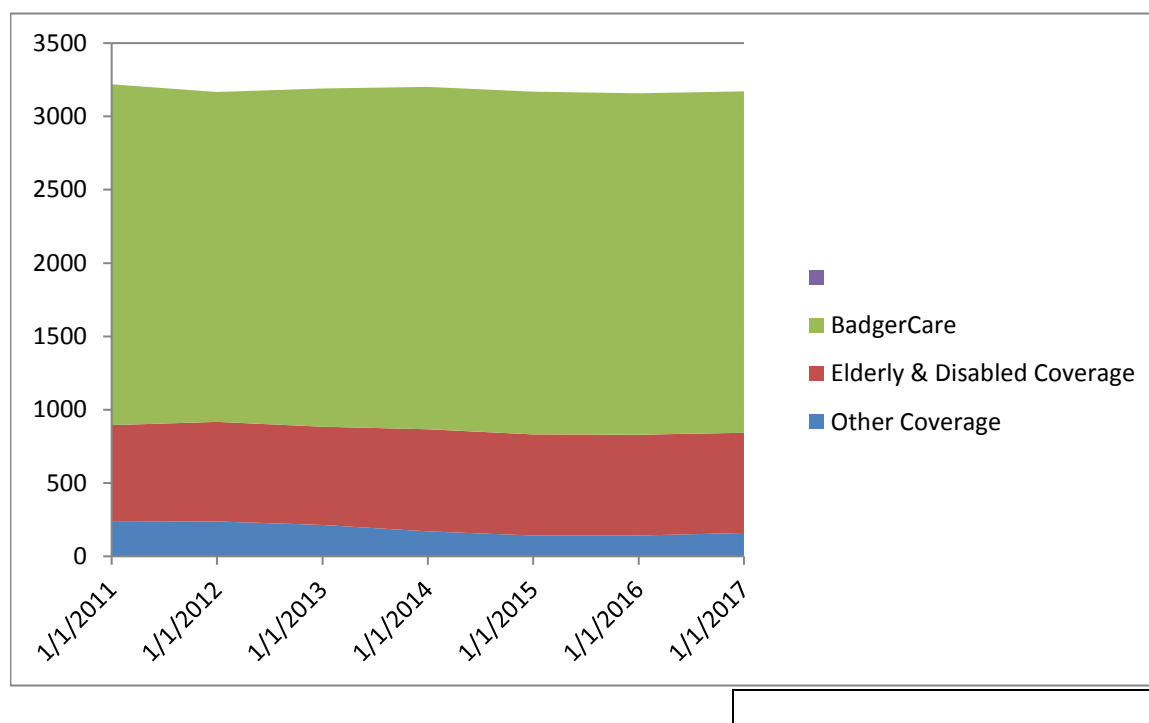
Each county is responsible for “staffing” the CCA. Green Lake County staffs CCA with 1.4 FTE. This FTE count has increased again this year with the increase of caseload for Green Lake County. ECIMP’s CCA took 21,961 calls in the month of December. The number of calls received in CCA has increased. However, with the increase in call volume, Green Lake County and ECIMP have maintained and exceeded the required performance standards.



**Medical Assistance** is a State and Federally funded program that provides low income customers comprehensive, affordable healthcare. Numerous individual programs are included under the umbrella of Medical Assistance including: BadgerCare, Medicaid Purchase Plan, Family Planning Waiver, Medicare Beneficiary and Family Care. Each Program has its own specific non-financial criteria for eligibility. Some eligible customers pay a monthly premium for their Medicaid coverage. Most Medical Assistance customers must participate in a HMO.

The following chart shows the number of participants certified by Green Lake County and the coverage type for each year.

**Members Certified by County/Tribe and Coverage Type Each Year**



**FoodShare-** is a Federal Program that provides a monthly FoodShare allotment to low income customers. Eligibility is based upon income, household composition and allowable expenses. The eligible customer receives a QUEST card that is used to purchase food. April 1, 2015, able-bodied adults without dependents (ABAWD) were required to meet a work requirement to be eligible for FoodShare. To meet this requirement the FoodShare Employment and Training program (FSET) is available. This program is administered by Forward Services Corporation. If recipients of FoodShare fail to comply with the work requirement for three months they will be found ineligible for FoodShare for three years. FoodShare participation decreased slightly in 2016. The FoodShare average caseload in 2016 for Green Lake County was 1015 households (2,035 participants).

The Calendar year-to-date monthly average FoodShare benefit for Green Lake County was \$202,509. The total FoodShare benefit given in 2016 excluding December was \$2,227,595. (2015 Foodshare total - \$2,353,048.)

**Wisconsin Shares-Child Care-** is a program that provides child care subsidies for low income working families to assist in their payment of child care expenses. The subsidy payment is made to the child care provider, with the family responsible for the co-payments. In 2016, the monthly average of families receiving assistance was 30 households / 55 children. This is a 40% decrease of children receiving this benefit in Green Lake County. The decline in assistance is a Statewide.

**Energy Assistance-** is a program that provides a one time payment during the heating season to low income customers who need help paying their heating costs. The energy payment is made directly to the fuel supplier. In 2016, 785 households applied, 706 approved, and \$412,912 was the total paid out in Energy Assistance. (\$351,080 in Energy Assistance, \$37,438 in Crisis Assistance, and \$24,393 in Heating Unit Activity) The number of applications and the applications that received benefits decreased by 3% in 2016. However, the amount of benefit increased 9% in 2016. The reason for caseload decrease is uncertain. I speculate that the warmer winter months contributed to the decrease as well as the willingness for utility companies to work with customers on overdue accounts.

### **WISCONSIN WORKS (W-2)**

*~The W-2 program focuses upon alleviating the specific employment barriers a family member may have~*

In 2013 the W2 contract was awarded to Forward Service Corporation (FSC). FSC is co-located in the Advocap building with the Job Center. The W-2 program focuses upon alleviating the specific employment barriers a family member may have by providing intensive case management and service coordination. The W-2 program determines how a customer's strengths can be enhanced, employment obtained and maintained with an emphasis on stabilizing the household income and guiding the family to self-sufficiency. W2 participants typically receive other services or participate in other programs with Green Lake County.

In 2016 FSC provided W-2 services to 41 participants. (2015 – 72 participants)

Emergency Assistance- is a limited program designed to meet the immediate needs of an eligible family facing current emergency due to fire, flood, homelessness or impending homelessness. This program is a sub-program of W2. This program will be handled by FSC as with all other W2 services.

Submitted by: Shelby Jensen  
Economic & Child Support Unit Manager

## **2016 ANNUAL REPORT - FOX RIVER INDUSTRIES**

### **Overall Services Provided:**

Fox River Industries (FRI), an agency of Green Lake County DHHS located in Berlin, Wisconsin, provides a variety of services to individuals residing in and around Green Lake County. The goal of FRI is to enhance consumers' lives by providing high quality services on a daily basis in our Prevocational, Adult Day Services, Supported Employment, Protective Payee, and Transportation Services units. While the primary target population is adults with developmental disabilities, FRI also serves individuals with chronic mental illness and young adults transitioning into community jobs. These services are provided to enable these individuals to optimize their abilities and to live and work in the least restrictive setting possible.

In 2008, Green Lake County transitioned to Family Care, contracting primarily with Care Wisconsin of Madison. Following is a description of services provided through Fox River Industries.

### **Supported Employment Program:**

The FRI Supported Employment (SE) program serves individuals who experience barriers to obtaining and maintaining community employment. This department consists of a 40 hour/week SE Coordinator and a 35 hour/week Job Coach, as well as part time help from other FRI departments as needed to maintain effective community job supports. Starting January 2017, FRI has hired an additional 35 hour/week staff member to split time between SE (Job Coach) and Day Services (Program Aide). Supported Employment services include functional assessments, work trials, job development, job placement, and ongoing support/training for the duration of the individual's employment. In most cases, the Division of Vocational Rehabilitation (DVR) funds the initial supported employment services with FRI SE providing the long term supports necessary for each individual to maintain employment. Ongoing supports for Family Care members are funded through the Care Management Organization.

As political pressure to reduce center based employment services continues to escalate, the demand for community based jobs, and the SE services needed to match qualified employees with these jobs, continues to grow at an increasing rate. In 2016, 42 consumers held 55 integrated community jobs at 33 different employers, 19 consumers are currently receiving job development services. The waiting list for DVR services at FRI is currently at 6. Long-term supports such as job coaching, employer relations dialogue and skill building often continue indefinitely for individuals receiving SE services, even after initial DVR funding is exhausted. SE is projected to be a high growth department at FRI in the coming years.

<b>Supported Employment</b>	<b>2016</b>	<b>2015</b>
Number of Consumers	42	36
Integrated Community Jobs	55	45
Different Employers	33	29
Number of Consumers receiving job development services	19	19
DVR waiting list	6	5

### **Prevocational Services Program:**

The FRI Prevocational Services program provides opportunities for individuals with barriers to employment or limited employment experiences to learn job readiness skills and other related social skills to enhance their ability to obtain and maintain employment in the future. Skills focused on include following directions, maintaining attention to task, accepting constructive advice from supervisors, practicing appropriate workplace behavior, dressing appropriately for the workplace, etc.

A wage study is completed annually to determine consumer wages based on the same kind of work done by a non-disabled employee with at least one year of experience. This method ensures that the consumers receive a fair wage and insures that rates are comparable to local industry. Federal and State special commensurate wage certificates are issued as a result of these wage studies, with each license expiring in alternating 2 year cycles, at which time FRI reapplies for another two-year term.

Currently there are approximately 53 consumers receiving pre-vocational services in the workshop: 35 full-time, 15 part-time, and three seasonal. We currently have 3 Production Aide positions running 3 consumer groups, with the Lead Bus Driver helping out as production needs dictate. We also have a Production Supervisor and a Material Handler rounding out our production staff.

2015 there were approximately 51 consumers receiving pre-vocational services in the workshop: 32 full-time, 16 part-time, and three seasonal.

The workshop continues to have three main sources of revenue: Alliance Laundry Systems, Wilson-Hurd, and cob corn squirrel feed sales. In addition, we perform smaller packaging/assembly/sewing jobs on a repeating basis for JP Luther and assembly and packaging for Generac Mobile Products (formerly Magnum Power Products). FRI continues to sell corn to Fleet Farm, Havegard, Javic Wholesale (for Steins Garden and Gift), Wisconsin Garden and Pet Supply, Berlin Kitz, & Pfeil Hardware, Reinders, and several smaller outlets in the Green Lake County area. Squirrel corn business was once again very strong in 2016 with sales of approximately \$187,000. (2015 - \$172,000) In our pressroom we continue to print for many of the Green Lake County offices, and other smaller jobs in the community.

In 2015, Fox River Industries negotiated a rate for a new service, Community-based Prevocational Services, with Care Wisconsin. This service features a 10-week curriculum with a 4:1 ratio, with 4 hours of classroom time each week. Programming occurs mostly in community based settings, and focuses on skills designed specifically to allow participants to explore community employment options. The desired outcome for FRI is to generate interest in community employment for participants in this program. FRI then will support these individuals in seeking a DVR referral at this time. Center-based and Community-based Prevocational Services are reimbursable for Family Care members through Care Wisconsin. In 2016, FRI ran spring and summer Community-based Prevocational Services classes, as well as two 4 week curriculums in "Skills to Pay the Bills", which is a similar program coordinated with and funded through DVR.

On July 22, 2014, the Workforce Innovation and Opportunity Act, commonly referred to as WIOA, was signed into federal law. This legislation, which went into effect on July 22, 2016, focuses on transitioning students and young adults (up to age 25), with a strong emphasis on community employment placement for everyone. The overall effect of WIOA will be to reduce incoming consumer numbers in Center-based Prevocational Services, while proportionately increasing demand for these same consumers in SE Services. The goal is an integrated community-based employment outcome for every consumer interested in community employment, with job coaching and other SE services provided as needed. Going forward, FRI will continue to gradually shift resources from production (Center-based Prevocational Services) to SE services as programming demands shift and participant needs/desires change.

### **Adult Day Services Program:**

Adult Day Services programming at FRI promotes community inclusion and independence for adults with disabilities. Our goal is to assist those we serve in acquiring, maintaining, and improving the skills needed for individuals to live in a community setting.

FRI currently provides a variety of health, social, and support services to program participants in a protective setting as we attempt to meet the specific needs of each individual we serve. These services include education, therapy, exercise and recreation. Specific skill areas currently being emphasized through classes include Social Appropriateness, Cooking and Nutrition, Money Skills, Academic Skills (such as numbers and letters identification), Community Appropriateness Skills, and Safety Skills.

Activities of daily living are a big component of the day services program. Therapy and exercise programs are necessary fundamentals to maintain consumers' quality of life. The exercise program, provided to a majority of our consumers, includes weight lifting, aerobics, and endurance training. This service also encompasses personal care needs.

Community inclusion is a key element in Adult Day Services programming. Examples of outings include trips to the zoo, parks, retail stores, athletic events, and libraries, along with weekly bowling and swimming trips. Volunteering is also highly valued in our program as a form of community inclusion. Day Services program participants currently volunteer at Theda Care, several local area libraries, and the animal shelter in Green Lake.

Three Certified Nursing Assistants, a Teacher, and a Services Coordinator currently staff our Day Services Program. Day Services programming is currently provided to approximately 45 consumers on a part-time basis, and 4 additional full-time Day Services consumers between the hours of 9:00 AM and 3:30 PM Monday through Friday. Adult Day Services are billable for Family Care members. (2015 – approximately 45 consumers)

### **Transportation Services:**

Disabilities Services, Inc. (DSI), a private non-profit corporation created to support DD services, has been working with Green Lake County to provide vehicles for the developmentally disabled and elderly residents of Green Lake County and the surrounding area since 1978 by writing annual section 5310 grants as vehicle needs dictate. These 5310 federal grants cover 80% of the cost of the vehicles, with the funding designated to the states (in our case through WisDOT), with DSI/Green Lake County paying the remaining local match of 20%. Over the years, DSI has been awarded over 32 vehicles at a worth of well over \$1,000,000. Current vehicles are primarily used by Fox River Industries, but DSI also writes the 5310 grant for Southern Green Lake County Senior Transport and City of Berlin Senior Center, each of whom also provides transportation services for elderly and disabled passengers who otherwise have no access to affordable transportation services for medical, educational, or social functions. These two entities pay their own 20% local match.

In 2016, DSI applied for 2 vehicles under the 5310 vehicle grant program. This application was successful, and DSI was awarded two 8/1 diesel mini-buses which will be delivered in late 2017. These vehicles each have a value of \$62,000.

Also in 2016, DSI applied for and was awarded a 5310 grant for Operating Project expenses in the amount of \$47,493. This grant opportunity became available under section 5310 in 2014 and can be used to supplement 85.21 operating expense dollars for qualifying elderly and disabled transportation service programs. This is the third year DSI has applied successfully for this grant. As in previous years, this award will arrive quarterly in 2017 to offset qualifying transportation expenses as they occur during the year.

Our FRI fleet currently serves individuals living in Green Lake, Fond du lac, and Waushara counties. Transportation service expenses are included in the Prevocational and Adult Day Services Family Care billing rates. Transportation is billed as a fee for service for non-Family Care program participants.

### **Protective Payee Services:**

In 2009 FRI added protective payee services to the list of services provided. This collective account, administered and run through FRI, continues to grow. It currently serves 94 consumers and receives frequent new referrals. This program employs one full-time individual and is supported with assistance from other department staff as needed. Protective Payee services are billable partially through Care Wisconsin (Family Care members only), with the remaining members self-paying for services. (2015 – 90 consumers)

### **Summary**

Fox River Industries, through the various services it provides, touches the lives about 200 individuals in Green Lake County and the surrounding area on a daily basis. In addition to the 57 folks in participating in Prevocational and Adult Day Services, FRI serves over 40 consumers at jobs in various communities, about 94 consumers in the Representative Payee program, additional students referred to our Community-Based Prevocational and “Skills to Pay the Bills” classes, and other production employees (often at-risk populations) as seasonal work demands permit. We have a dedicated, caring staff, and we are proud of our excellent reputation for outstanding service.



# 2016 Health Unit Annual Report

## **Mission:**

*The mission of the Green Lake County Health Department is to promote and protect health and prevent disease.*

## **Vision:**

*We will become the leader in Public Health in Green Lake County promoting healthy people, thriving communities, and safe environments.*

## **Core Values:**

- *Prevention*
- *Professionalism*
- *Evidence-based Practices*
- *Collaboration*
- *Good Stewardship of All Resources*
- *Responsive*
- *Performance Improvement*
- *Health Equity*



**Health Unit Staff:** From left, Tracy Soda, PHN, Melanie Simpkins, RN, MPH, Health Educator and Accreditation Coordinator, Shari Krause, Public Health Program Specialist, Jeri Loewe, PHN, Kari Schneider, PHN, Kathy Munsey, RN, Health Officer, Renee Peters, Birth-3/Children's Community Options Program, Ashley Rondorf, Environmental Health Specialist



**Public Health**  
Prevent. Promote. Protect.



## Executive Summary

In 2016, one of our biggest accomplishments was to complete a Community Health Assessment (CHA) with five other counties, including Adams, Marquette, Juneau, Waupaca and Waushara. These six counties have been partnering as the Central Wisconsin Healthcare Partnership (CWHHP) since 2011 and decided to complete the CHA as a group since we share so many similarities. All six counties chose priority areas of mental health and substance abuse. Green Lake County also chose a third priority –chronic disease. Data was collected, focus groups and key informant interviews were conducted, and the community felt these three areas need work. The Green Lake County Wellness Coalition changed from three Action Teams to two. They now are Mental Health/Substance Abuse Action Team and the Chronic Disease Action Team. These teams looked at gaps in current services and will be looking at evidence-based programs to address these priority areas in the Community Health Improvement Plan (CHIP), which will be completed in 2017. We were very excited to collaborate with Theda Care to create a Community Health Action Team who will be looking specifically at “Kids in Crisis” in the upcoming year. This group will be involving several community members to try to affect the issues our children face such as abuse, drug issues in their homes, incarcerated parents, bullying, divorce and more. Please take time to read the entire Community Health Assessment, which can be viewed by visiting [www.co.green-lake.wi.us](http://www.co.green-lake.wi.us) and clicking on the Health Unit link under departments.

In 2016, we also experienced reorganization of our staff due to the resignation of Jeri Loewe, Public Health Nurse (PHN) in July. Due to a shortage of Public Health Nurses, we hired Julia McCarroll who has her Master’s Degree as a Community Health Educator. This has been an excellent fit since we provide so much community education. In addition to Julia, staff members include Kathy Munsey, Health Officer, PHN’s Tracy Soda and Kari Schneider, Renee Peters who coordinates the Birth to 3 and Children’s Community Options program, Melanie Simpkins, Health Educator, Ashley Rondorf, Environmental Health Specialist and Shari Krause, Public Health Program Specialist. The Health Advisory Board members include chairperson, Jeanne Lyke M.D., Katherine Vergos, Tammy Bending, Jean Kessler, Pat Brandstetter, Harley Reabe, Nancy Hoffman and Kathy Munsey. The board was instrumental in passing a countywide policy to add E-cigarettes to the countywide smoking ban. They also passed a new communications policy, a resolution for the state to provide local funding for communicable disease and passed an amendment to update the Food Safety Regulation and licensing resolution.

Our unit continues to work towards accreditation, which is a goal for all health departments by 2020. This process makes us much more accountable for performance excellence since we have programmatic goals and policies to guide us. Staff have been trained in quality improvement and they implement program changes if deficiencies are noted. This process also mirrors the 140 Review, which is the state accreditation process that we are evaluated with every 5 years.



## Our 2015 Programs and Services

### Disease Control and Prevention

Public Health is required by statute to follow up on acute and communicable diseases. Using the WI Electronic Disease Surveillance System (WEDSS) we are able to monitor trends and track outbreaks as they occur. Below are some of the diseases we followed in 2016, along with previous year comparables.

Frequency of Reported Diseases in Green Lake County	2013	2014	2015	2016
Arbovirus (West Nile Virus)				1
Blastomycosis	-	1	-	-
Brucellosis	1	-	-	-
Campylobacteriosis	4	6	2	13
Chlamydia	41	42	47	43
Cryptosporidiosis	1	2	2	7
E-Coli	-	-	3	2
Ehrlichiosis	1	1	5	3
Giardiasis	2	3	-	5
Gonorrhea	-	2	2	1
Ebola Monitored Traveler	-	1	1	-
Histoplasmosis	-	-	-	1
Hepatitis B	3	-	1	2
Hepatitis C	13	12	16	15
Influenza (hospitalized)	7	9	6	2
Legionellosis	-	1	-	-
Lyme Disease	39	28	20	14
Measles (Rubeola)	-	-	1	-
Mycobacterium (non-tuberculosis)	2	-	5	1
Pertussis (whooping cough)	10	2	-	2
Q Fever	-	1	-	-
Salmonellosis	7	4	5	5
Shigellosis	-	1	-	-
Invasive Strep Disease	1	2	4	8
Syphilis	-	-	1	-
Tuberculosis	-	-	-	1
Latent TB infection	-	3	1	2
Varicella	2	3	2	1
Vibriosis (Non Cholera)	-	-	-	1
TOTAL	134	124	124	130

Tracy Soda, PHN, training County Staff on Blood Borne Pathogens.



### Public Health Preparedness

We are an active member in the Region 6 Healthcare

Coalition and attend monthly meetings in addition to being active partners in the Local

Emergency

Planning

Committee. We

participated in

several exercises

working closely

with Gary Podoll,

Emergency

Management

Director, local law

enforcement, our

coroner, fire departments,

hospitals, nursing homes, Red Cross and

surrounding counties to test our ability to handle a

variety of public health issues including: Ebola,

flooding, tornadoes and much more. We also work

with the Northeast WI Public Health Preparedness

Partnership and because of that, we were able to

write for scholarships to attend the national

Preparedness Summit in Dallas. At the summit, we

were able to get training on everything from active

shooter to Zika Virus, responding to surges of

pediatric patients, disaster mental health and

building resilient communities. We also were able

to be a part of opening our Emergency Operations

Center to assist WI Task Force I Search and Rescue

Team as they trained in our county in September

with 80 members of their team for 3 days after a

simulated tornado with several victims hit the

Green Lake area.

Kathy Munsey, Tracy Soda, and Mark & Gary Podoll at 2016 Governor's Conference on Preparedness.



PHN donning and doffing PPE during an exercise.



## Immunizations for Children and Adults

We continue to have monthly immunization clinics in Green Lake. However, we have decided that due to extremely low turnout at Care 4U clinic in Dalton, we will be eliminating that clinic in 2017. Tracy Soda is part of a workgroup with several counties and the State Immunization Program to develop a statewide, standardized tracking form for immunizations for the Amish children in schools. We currently have eight Amish schools, which due to the lack of immunization compliance would be a concern in the event we have a vaccine-preventable disease outbreak.

The Affordable Care Act requires anyone with insurance to see their primary care physician for immunizations, which does create a hardship in rural counties due to lack of access. We have seen our compliance numbers go from close to 90% to less than 70% for our two-year-old cohort. According to the new rules, we can only immunize those who are uninsured or have Medical Assistance. We continued to have flu clinics in all communities in the fall as usual. Overall, 1046 vaccines were given in 2016, including flu shots, compared to 1447 vaccines administered in 2015.

## Childhood Lead Testing

**There is no safe level of lead in the human body;** even very low levels of lead exposure can negatively affect health throughout the lifespan.

Children with a lead level of 5 or greater are provided with follow-up and consultation by a Public Health Nurse. Follow-up may include phone calls, home visits, consultation with the primary health care provider and a home lead risk assessment by the Health Department's Environmental Health Specialist. In 2016, 181 blood lead tests were completed, 13 had a level over 5, compared to 16 in 2015. Kari Schneider, Public Health Nurse and Ashley Rondorf, Environmental Health Specialist have done the follow-up with families in their homes if a child tests high with risk factors.

### 2016 Blood Lead Testing

Total Number of Tests:	181
Children <5 ug/dl =	151
Children >5 ug/dl =	13
Children >10 ug/dl =	1
Home assessments =	3

## Mother, Child and Family

**There were 213 births in Green Lake County in 2016 up from 180 births in 2015.** We had 1 birth to a girl under age 18, compared to 1 last year. We also had 13 babies that were considered “low birth weight” (weighing less than 5lbs, 8oz), compared to 11 last year. In 2016, the percentage of women who smoked during pregnancy was 24% which is up from 2015 when it had been 18.8% (28% in 2014, 25% in 2013). Eight of the 52 women who reported smoking during their pregnancy had low birth weight babies. Nine infants were transferred to Neonatal Intensive Care Units. This is an area that we continue to target by offering the First Breath program, a smoking cessation program for pregnant women at our WIC clinics.

We continue to utilize the “**Life Course Model**” as promoted by the Family Resource Council through our Maternal Child Health grant. Through the Healthy Babies Coalition which is a partnership with Green Lake, Marquette and Waushara Counties, we sponsored training to educate local providers and families on the Life Course Model and ACE's (Adverse Childhood Experiences) Over 100 people attended the conference in April. As part of our MCH grant, we also worked with two day cares to make them “Breastfeeding Friendly”. This designation can be given once they completed training for all staff as well as designating a breastfeeding room for moms. Berlin Community Day Care and Community Options Day Care in Green Lake worked with our staff to receive the designation. Breastfeeding is proven to improve the mental health of infants and that is why we have prioritized it as part of our overall Maternal Child Health goals.



## Nutrition WIC

### **WIC is the Special Supplemental Nutrition Program for Women, Infants, and Children.**

WIC helps income-eligible pregnant and breastfeeding women, those who recently had a baby, and infants and children up to five years of age who are at health risk due to inadequate nutrition.

Green Lake County served over 250 clients in 2016. In addition, breastfeeding education was available to all WIC clients. WIC provides a breastfeeding peer mentor, which is an invaluable resource to new mothers. The State of WI contracts with Family Health La Clinica in Wautoma to provide WIC services to Green Lake, Marquette and Waushara counties. Last summer, they started using electronic benefit cards instead of the paper vouchers. This has added an extra educational component to the program, but increased convenience for the client.

Kari Schneider and Shari Krause attend all WIC clinics to provide immunizations, information, assist with signing families up for dental and immunization follow-up appointments as well as try and decrease smoking rates of moms by enrolling them in the First Breath Program, which all staff have been trained on.

## Birth to 3

**Birth to 3** is Wisconsin's early intervention program for families of infants and toddlers with developmental delays and disabilities. The Green Lake County Health Unit has been designated by the county board to be the administrative agency in our county for this mandated program. The county is required to maintain a base level of funding for this program. Some families do have a cost share for services depending on their income. Medicaid and Private Insurance are billed for services when available and with parental permission.

In 2016, 51 new children were referred to the program compared to 40 in 2015. Referrals came

from a number of sources including: physician, family member, social worker, and school district. Sixteen of those children received services through an Individualized Family Service Plan. Twenty-two children were found to be developing within age appropriate levels through a screening or did not meet eligibility through an evaluation. Twelve families did not follow through with a screen or evaluation/were not interested. One child moved to another county shortly after referral. These children along with those who had previously been in the program brought the total number of children served to 34 in 2016. In addition to those with significant developmental delays, there were several children with specific diagnoses including: DiGeorge Syndrome, Down Syndrome, William's Syndrome, significant prematurity, Maroteaux-Lamy Syndrome, cerebral palsy, and delays related to non-accidental injury.

Renee Peters is the Program and Service Coordinator/Educator. Contracted service providers included Jenny Hoffman and Sara McNamara, Occupational Therapists from Rehab Resources in Beaver Dam. Kristen Mertens provides Speech and Language therapy and comes from Theda Care in Berlin. Jody Streeter is the Physical Therapist from Walk of Ages in Oakfield.

**Child Find** is an important component of Birth to 3, as we want to assure that all children that may be eligible for services are referred in a timely fashion. In **2016** our outreach consisted of:

**Spring Child Development Days** – We participated in our area school districts Child Development Day by providing an informational display with brochures and providing assistance as requested.

**Brochures** – Brochures are available at our county WIC clinics as well as in the lobby of Health and Human Services and in the Public Health Unit. Brochures are also included in the New Parent Packet shared by our Public Health Nurses.



**Interagency Agreements** – Agreements are in place with each county school district and UMOS (United Migrant Opportunity Services, Inc.) and Advocap-Head Start.

Renee also collaborates as a committee member of the Head Start Advisory Committee, Green Lake County Family Resource Council and Healthy Babies Coalition of Green Lake, Marquette and Waushara Counties.

### Children’s Community Options Program (CCOP)

This program, formerly known as Family Support Program provides each county with a yearly allocation to support families who care for their disabled children in the home. The Program recognizes that meeting the needs of children who have severe disabilities may place hardships on a family’s emotional, physical and financial resources. The Coordinator for the Family Support Program is Renee Peters.

In 2016, 8 children had a CCOP plan written for a variety of goods and services. The Program was able to fund respite, conferences related to a diagnosis, in-home parental support/consultation, home modifications, individualized recreational opportunities, therapeutic/sensory materials, and medical supplies not covered by insurance.

### Tobacco Control and Prevention

Green Lake County continues as a member of the “Five Counties for Tobacco Free Living,” a coalition that includes the counties of Fond du Lac, Marquette, Waushara and Washington, however, the tobacco compliance checks are now being done by Fond du Lac County. In 2016, 2 retailers sold to minors, compared to 7 in 2015. We are definitely seeing an increase in E-cigarette sales and usage.

### Teeth Healthy Lives Program

The Dental clinic served 8 adults and 70 children. Seventeen were referred for additional services. We had previously provided services to the migrant

daycare, but that was taken over by another agency so we had fewer children than in 2015. Clinics are held 1- 2 times a month at our agency as well as summer outreach sites at the Boys & Girls Club and at Head Start in Markesan. Clients need to be on Medical Assistance or Badger Care.

### Food Safety & Recreational Licensing Program

The Tri-County Health Consortium, consisting of Ashley Rondorf, Environmental Health Specialist (EHS) Green Lake, Ann Robbe, EHS for Marquette County and Mary Robl, Registered Sanitarian, Program Director from Waushara County Health Department. They are responsible for maintaining the Food Safety and Recreational

Licensing Program. As agents of the state, this program licenses and inspects food facilities, swimming pools, hotel/motels, school food programs, campgrounds, kennels, recreational education camps, tattoo, body piercing, and bed and breakfast establishments. During 2016 there were approximately 800 inspections performed in the Tri-County area. The 3 inspectors support each other to ensure that facilities are in compliance with applicable regulations to promote health and safety for consumers.

Facility Type	Number of Inspections 2016	Total Number of Facilities
Restaurants and Retail Food	113	139
Campgrounds	12	13
Swimming Pools	19	21
Hotel/Motels/TRH	85*	117
Summer Camps	3	3
Tattoo Shop	0	0
Total—including pre-inspections & complaints	232	290

\*TRH’s Tourist Rooming Housing only need to be inspected every other year per state directive.



## Environmental Health

Tri-County also deals with a wide variety of environmental issues that arise within the consortium. Investigations into nuisance

complaints, housing issues, water quality issues and animal bites are some of the problems encountered. The

Environmental Health division of the Health Department is responsible for enforcing the Health

and Sanitation chapter of the Green Lake County

ordinance to ensure that citizens are not

exposed to hazardous conditions that could affect their health.



Placards placed by Health Unit on meth house in Berlin

## Environmental Issues Addressed

Animal Bites—38  
Well Water Concerns—11  
Housing Inspection Cases—34  
Meth House Placards--2  
Nuisance/Other—6  
Radon Test Kits Given Out--41



Employees check out health related booths at the 2016 Worksite Wellness Health Fair.

2016 Public Health Program Contacts	Totals
Accreditation	137
Adult Health	198
Birth to 3	640
Children's Community Options	66
Bioterrorism/Preparedness	68
Coalition for Wellness & Needs Assess.	455
Dental	142
Immunization	1856
Lead Tests & Follow-up	14
Maternal Child Health	2458
Public Health	1088
Worksite Wellness	874
Other	88
<b>TOTAL</b>	<b>8084</b>
<b>PRESENTATIONS/EDUCATION CONTACTS</b>	
Blood Borne Path Training	78
Berlin School Wellness	44
Employee Wellness Fair	35
Healthy Babies Coalition Conference	100
Heroin Summit	200
Lunch and Learns	128
Safety and Wellness to TRIAD	35
Preparedness for Tornado Exercise	112
Diabetes Education	226
Provider/Partner Meeting on Lyme	18
Parenting Class & Breastfeeding	28
Nutrition Presentations	381
Women's Health Events	200
Economic Development	169
Worksite Wellness Outreach	10,206
MCH Life Course	95
Amish Culture and Safety	24
Other	19
<b>Total</b>	<b>12,098</b>

## Worksite Wellness/Employee Health Program

Melanie Simpkins, RN, MPH coordinates the employee wellness program using funds provided by Group Health Trust. In 2016, we had over 25 outreach activities including a health fair, individual health screenings, lunch and learns, Healthy Monday Tips, challenges, walking contests and more. 35 employees participated in 5 or more events. Seventy completed their annual physicals.

Over \$5000 was given back to employees in the form of prizes, gift cards, gas cards and cash when they participated. We are very grateful to GHT for providing the funds to help keep our employees happier and healthier with the activities we share.

### The Green Lake County Wellness Coalition (GLCWC)

worked on a number of initiatives working to impact chronic disease and mental health and substance abuse by providing education to the community on the benefits of healthy eating, healthy relationships and getting adequate exercise. The “Real Happy Hour” program was presented at numerous community events to get families to work on all 3 of those activities to reconnect and improve physical and mental health within families. Once the new Community Health Assessment was completed with new priorities, the group decided to reduce the action teams to two instead of three. There’s now a

Mental

Health/Substance

Abuse Action

Team and a

Chronic Disease

Action Team.

Partners within

the coalition

addressed access

to mental health

services by hiring

new staff and having

them work in at least

one school district.

Berlin School

District continues to train on Mental Health First Aid and have developed a website to assist families with mental health and behavioral issues. It provides extensive resources to families. Other initiatives included providing all city clerks were given educational packets to share with non-profits who apply for liquor licenses on safe serving and checking ID’s to deter underage drinkers. The Parents Who Host Lose the Most campaign was initiated in all four school districts. Senior nutrition

classes were held and members helped to form a Community Health Action Team (CHAT) with the help of Theda

Care and Kaye

Thompson

who

coordinates

this initiative.

The CHAT is

working on

“Kids in

Crisis” as a

“PLUNGE”

activity to educate

our community on

the difficulties our children are experiencing and in

2017, we will work to address the issues.



**Julia McCarroll, Health Educator, our newest employee, promoting the importance of good nutrition.**

Julia McCarroll is a member of the Berlin School Wellness Coalition and works with them to improve physical activity opportunities for the children as well as improve the environment. We will be working to have a presence on all 4 district committees.

Our efforts paid off since we improved in the County Health Rankings from ranking 62<sup>nd</sup> out of 72 counties in 2014 to 53<sup>rd</sup> in 2015 to 25<sup>th</sup> in 2016!

The Green Lake County Wellness Coalition meets monthly and is open to anyone interested in improving the health of Green Lake County. Additional information is on our website: [www.glcwc.org](http://www.glcwc.org).



**Kathy Munsey, along with other local partners gave a presentation on drug abuse at Our Day event to help combat the heroin problem in Green Lake County**

Submitted by Kathy Munsey, RN

Green Lake County Health Officer