GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

571 County Road A

Green Lake WI 54941 VOICE: 920-294-4070 FAX: 920-294-4139

Email:glcdhhs@greenlakecountywi.gov



FOX RIVER INDUSTRIES

222 Leffert St. PO Box 69 Berlin WI 54923-0069 VOICE: 920-361-3484

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Post Date

1/4/2024

The following documents are included in the packet for the Health and Human Service Committee Meeting held on Monday January 8, 2024

- January 8, 2024 Health and Human Services Committee Agenda
- November 13, 2023 Health and Human Services Committee Draft Minutes
- Public Health November Unit Report
- Children and Families November Unit Report
- Fox River Industries November Unit Report
- Behavioral Health November Unit Report
- Aging/ADRC November Unit Report
- DHHS Expenditure/Revenue Comparison November



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Health & Human Services Committee Meeting Notice

Date: January 8, 2024 Time 5:00 PM

Green Lake County Government Center
571 County Rd A, COUNTY BOARD Room #0902 Green Lake WI

<u>AGENDA</u>

Committee Members

Joe Gonyo,
Harley Reabe,
Brian Floeter
Joanne Guden
Christine Schapfel
Richard Trochinski
Vacant
Nancy Hoffmann
Vacant

Kayla Yonke, Secretary

Kindly arrange to be present, if unable to do so, please notify our office. Sincerely, Kayla Yonke Financial/Business Manager

Virtual attendance at meetings is optional. If technical difficulties arise, there may be instances when remote access may be compromised. If there is a quorum attending in person, the meeting will proceed as scheduled.

- Call to Order
- 2. Certification of Open Meeting Law
- 3. Pledge of Allegiance
- 4. Minutes (11/13/2023)
- 5. Appearances
- 6. Director's Report
- 7. VSO Report
- 8. Unit Reports
- 9. Personnel Updates
- 10. Committee Discussion
 - Future DHHS Meeting Date (February 12, 2024)
 - Future Agenda items for action & discussion
- 11. Adjourn

This meeting will be conducted through in person attendance or audio/visual communication. Remote access can be obtained through the following link:

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting Meeting ID: 298 291 229 825

Passcode: GHmqRM

Download Teams | Join on the web

Or call in (audio only)

<u>+1 920-659-4195,,692144563#</u> United States, Green Bay

Phone Conference ID: 692 144 563#

Find a local number | Reset PIN

Please accept at your earliest convenience. Thank you!

Learn More | Help | Meeting options | Legal

Health and Human Services Board

November 13, 2023

The regular meeting of the Health and Human Services Board Meeting was called to order by Chair Gonyo at 5:00 PM on Monday November 13, 2023, in the County Board Room, Green Lake County Government Center, Green Lake WI. The meeting was held in person and via Teams. The requirements of the open meeting law were certified as being met. The Pledge of Allegiance was recited.

Present: Harley Reabe, Christine Schapfel, Nancy Hoffmann, Richard Trochinski, Joanne Guden, Joe Gonyo, and Brian Floeter

Absent: None

Other Present: Jason Jerome, HHS Director, Kayla Yonke, HHS Admin, Jon Vandeyacht, VSO Director, Danielle Viau, Children and Families Unit, Kate Meyer Behavioral Health, Lisa Schiessl Children and Families Unit Manager, Ryan Bamberg Aging and ADRC Unit Manager, Tony Daley, Berlin Journal.

Minutes of 9/11/2023

Motion/second (Trochinski/Guden) to approve the minutes of the September 11, 2023, meeting as presented with no corrections or changes. All Ayes, Motion carried.

Appearances

Birth-to-three/CLTS presentation Slideshow was placed on file.

Director's Report

- 2024 Budget process is awaiting approval at the county board meeting.
- On target for meeting the 2023 budget
- Wellness fair on October 31st. 60 employees attended.
- On call Crisis Services are continuing to approve as the Crisis therapist was approved in the 2023 budget and has now taken a lead crisis role.

VSO Report

Vandeyacht reported:

- Looking for a service commissioner
- Looking for a volunteer driver to drive disabled veterans to appointments.
- Claims are slowing down some.
- VSO has identified 7 meals to be given for thanksgiving.
- 2023 outreach is wrapping up. The outreach for 2023 have made a noticeable impact.
- Veterans day was positive. Their was more community participation which was good to see.

Advisory Committee Reports:

- Family Resource Council draft minutes were placed on file
- Aging Advisory meeting draft minutes were placed on file.
- Health Advisory Committee draft minutes were placed on file.
- Transportation Advisory Committee draft minutes were placed on file.

<u>Unit Reports – September Reports</u>

Economic Support and Child Support – Report was placed on file.

Behavioral Health Unit (BHU) – Report was reviewed and placed on file.

Public Health (PH) and Environmental Health–Report was reviewed and placed on file.

Fox River Industries – Report was reviewed and placed on file.

DHHS Expenditure/Revenue Comparison – October 2023 was reviewed and placed on file.

Children and Families Unit (CFU) - report was reviewed and placed on file.

Transportation 5-year plan

motion/second (Guden/Trochinski) to approve the aging 5 year transportation plan as presented. All Ayes, Motion carried. Discussion Followed.

85.21 2024 Grant

Motion/second (Reabe/Guden) to approve the 85.21 2024 grant application as presented. All Ayes, Motion carried. Discussion Followed.

2024 Rates

Motion/second (Floeter/Reabe) to approve the 2024 rates as presented. All Ayes Motion Carried. Discussion Followed.

Personnel Updates

Jerome reported staff updates:

- Kristin Biesenthal is Green Lake Counties new Elder Benefit Specialist
- Amy Burdick is the new Markesan Meal Site Manager
- Currently recruiting a Princeton/Green Lake Meal Site Manager.

Committee Discussion

Future meeting date: December 11, 2023, at 5:00pm

Future Agenda Items: N/A

<u>Adjourn</u>

Gonyo adjourned the meeting at 6:08PM

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November 2023 Health Unit Monthly Report to the Health & Human Services Board

Public Health Update:

• The Diabetes Wellness Event was held on November 1st at Grace Lutheran Church in Berlin. This event was held in collaboration with the Berlin Lions Club and Thedacare. There were over 70 participants who attended to visit and learn from multiple vendors, enjoy light refreshments and enjoy keynote speaker, Pharmacist Dr. Daniel Cunningham. PHN Allison Krause was also in attendance providing Flu shots.











- The Berlin Community Health Action Team, or CHAT, plunge was held on November 2nd. The plunge brought together numerous community partners to dive deeper into the topic of Youth Mental Health and Social Media. Rachel and Lauren attended this event, along with the Debrief on Monday November 6th. Potential solutions, interventions, etc. will be the work of the CHAT team in the new year.
- Work continues, in collaboration with HCl Conduent, to finalize our Community Health Improvement Plan (CHIP).
- Zero Suicide Team meeting held on November 8th with Marquette and Waushara County staff joining in discussions of developing a Tri-County Zero Suicide Initiative.
- Immunization Update- Allison
 - Flu Shot location/number provided:
 - November 1- Diabetes Wellness Event- 22
 - November 7- Berlin Senior Center- 12
- Throughout the month of November, UW-Oshkosh Senior I nursing students presented "Lunch 'n Learns" on various health topics for HHS staff.
- Joined annual meeting with Treasurer's Office staff and all municipalities to promote CodeRED emergency alert enrollment. CodeRED enrollment instructions to be included in all property tax bills.
- Lauren Olson and Allison Krause began 4-week tobacco prevention classes for 5th and 7th graders at All Saints School in Berlin on November 13th. This course is specific to vaping use prevention.
- Nancy attended ICS 300 training at Sunnyview Expo center in Oshkosh November 14th 16th. This course focused on using the Incident Command System (ICS) during Public Health Emergencies.
- Staff attended Amish Community Event on November 16th at the Kingston Town Hall. Staff from the La Farge Clinic for Children with Special Needs presented on resources available to our Amish community.
- Allison attended bi-monthly Fox Valley Healthcare Emergency Readiness Coalition (HERC) member meeting on November 21st. Regional exercise being planned for April 2024.

- The East Central Alliance for Nicotine Prevention is reapplying for the Vaping Prevention and Treatment Initiatives funding through the WI Department of Health Services Tobacco Prevention and Control Program. The coalition is writing for funding to support hosting vaping prevention and intervention workshops to invite partners in our four counties, host Earth Day tobacco prevention events again and increase from 3 to 8, to enhance our own GLC Destructive Decisions curriculum, an alternative to suspension when a youth is caught vaping, and to host another safe vape disposal for the schools, law enforcement and for community members.
- The Green Lake County Health Department applied a for State Opioid Response (SOR) grant through Alliance for WI Youth. The funding would support community outreach of the Dose of Reality and Real Talks campaigns, supporting the law enforcement offices that have permanent drug drop boxes and additional funding to support bringing a speaker/presentation to our 4 school districts on youth substance use prevention and mental health.

Respectfully submitted,

Rachel Prellwitz, Health Officer

CHILDREN & FAMILY SERVICES UNIT – November 30, 2023

The children and family unit are fully staffed.

Out-of-Home Care – as of 11/30/2023

There are levels to Out of Home Care. Those levels are as follows:

- -Court Ordered Relative Care
- -Level 1 Foster Care- specific child license or relative license
- -Level 2 Foster Care-general foster care with no prior relationship
- -Level 3 Treatment Foster Care-private agencies
- -Level 4 Specialized Treatment, Group Home
- -Level 5 Exceptional Treatment, Residential Care Centers

Green Lake County has the following in each form of placement:

Ct. Ordered Relative Care- 1

Level 1-1

Level 2-2

Level 3- 2, these children do not have high needs, but no county foster homes were available for placement.

Level 4-0

Level 5-0

Total Placements = 6

We had one new removal in November and this young child is currenlty placed in a licenseed foster home in Green Lake County.

Voluntary Kinship Care (\$300.00 month per child)

Twelve (12) children are in this form of kinship care. They must have a yearly review.

Subsidized Guardianship — Is considered a permanent placement for the children and the county must review the home and placement one time per year.

Six (6) subsidized guardianships.

ACCESS REPORTS

Child Protective Services –

January – 26; 6 screened in; 20 screened out.

February-29; 7 screened in, 22 screened out.

March-23; 3 screened in, 20 screened out.

April-21; 3 screened in, 18 screened out.

May – 17; 5 screened in, 12 screened out.

June- 12, 5 screened in, 7 screened out.

July- 14, 4 screened in, 10 screened out.

August- 16, 3 screened in, 13 screened out.

September- 19, 5 screened in, 14 screened out

October- 24, 3 screened in, 21 screened out

November- 17, 7 screened in, 10 screened out

YTD: 51 screened in

Child Services/Welfare –

January -4; 2 screened in; 2 screened out.
February-5; 4 screened in; 1 screened out.
March-4; 1 screened in; 3 screened out.
April -6; 2 screened in; 4 screened out.
May- 0 services report
June- 10; 5 screened in, 5 screened out.
July- 4; 2 screened in, 2 screened out.
August-5; 5 screened in, 0 screened out.
September 9, 8creened in, 1 screened out.
October 3, 0 screened in, 3 screened out
November-2, 2 screened in, 0 screened out

YTD: 31 screened in

Youth Justice –

January – 5

February-5

March-9

April-10

May- 5

June- 2

July-1

August-1

September-4

October -2

November-6

YTD: 50 referrals

Youth Justice Staff and Wraparound Staff met with each school and with all School Resource Officers to inform them of the groups and wrap programs that the county has to offer. Staff will continue to meet with schools on teams and then quarterly with all School Resource Officers.

The following groups will be available throughout the school year:

Aggression Replacement Training (ART)
Showing up, Truancy Curriculum
Drug, Alcohol, Vaping Curriculum
Teen Social Media and Sexting Intervention Program
Teens In Action
Wraparound

Birth to Three/C-COP/CLTS

Birth to Three had seven (7) new children referred to the program in the month of November. No new Individualized Family Service Plans (IFSP) were developed. There were eleven (11) open children in the program in the month of November that had active IFSP's. Children's Community Options program has one (1) child enrolled. Children's Long-Term Support Waiver (CLTS) children are presently also being carried by the Birth to Three program coordinator; Ten (10) cases have been assigned.

Fox River Industries



222 Leffert Street, P.O. Box 69 Berlin, WI 54923-0069

January Board Meeting Unit Update

Phone: (920) 361-3484

Fax: (920) 361-1195

Fox River Industries November Services

Day Service & Rec & Leisure Program

• Waitlist: 9 added current individuals who would like additional hours bringing total to 13.

Facility Based Prevocational Services

- Waitlist: 15
- 10.5 days of programming reduced due to disenrollments (relocation, medical, more hours in other service, etc.)

Community Based Prevocational Services

- Waitlist: NA
- Working with Inclusa and Lakeland Care district to include service to existing contracts, including rate negotiations.

Supported Employment

- DVR 20 being served
- Long Term Care being served 18
- No new hires
- No waitlist in place
- One staff vacancy

Representative Payee Services

October 31, 2023 – active beneficiaries currently serving: 75

Transportation

• Reduced routes by one due to the reduction in those served in prevocational for the time being. It is expected that this will be temporary as route needs change frequently.

*An indicator of success we are tracking is the percent of individuals in our **PREVOCATIONAL SERVICES** engaged at any point in the **COMMUNITY EMPLOYMENT** process (applied for DVR, working with Supported Employment, in a stable job; not including GSE).

| 2023 Quarter | | | | | | | Comments |
|--------------|---------|-----|----------|-----|-----------|-----|----------|
| 1 | January | 28% | February | 29% | March | 35% | |
| 2 | April | 36% | May | 32% | June | 33% | |
| 3 | July | 33% | August | 39% | September | 37% | |
| 4 | October | 37% | November | 32% | December | | |

OTHER UPDATES

Disability Services

- Received word that a new vehicle and operating grant will be awarded for cycle 48 after a successful grant application. Due to increased competitiveness the match owed was increased from 20% to 30%.
- Next meeting April 15, 2023.

Fox River Industries, Inc.

- President Malchetske met with outside council secured by administration office.
- Next meeting April 15, 2023.
- Corn orders by Fleet Farm have resumed.

Green Lake County Staff Updates

- Terminated employment with one program aide. Plan to replace in the New Year along with the current vacancy in supported employment.
- Coordinators attended the Disability Support Provider Network Conference in Stevens Point November 1 & 2nd.

Respectfully submitted by, Dawn Brantley, Unit Manager

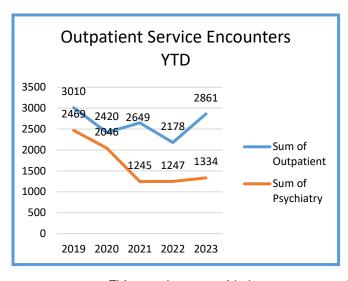
Behavioral Health Unit— November 2023

Behavioral Health Unit staff continue to see caseload volumes at full capacity across many of our programs however we have now been able to hire all open positions. Behavioral Health is currently recruiting a crisis case manager/ substance use treatment specialist.

Outpatient Mental Health (MH) & Substance Abuse (SUD) Programs-

Month at a Glance

| New Outpatient Therapy Intakes | 12 |
|--------------------------------|----|
| New Psychiatry Admissions | 1 |
| IDP Assessments Completed | 9 |



November 2023: Clinicians continue to have full caseloads, however, as all therapy positions within the clinic are now full, we have seen modest improvement in our wait time (average wait for an assessment is currently 32 days, average wait from intake to 1st treatment session is 25 days)—target would be 14 days or less. There is a decline in psychiatric services after 2020 shown in this chart as a result of the retirement of Dr. Baldomero, child psychiatrist.

- 1. **Intoxicated Driver Program:** Our agency serves as an assessor facility for state-mandated intoxicated driver assessments. Individuals are either referred to traffic safety school or treatment for their Driver Safety Plan.
- a. This month, we provided assessments to 9 drivers.
- b. To ensure that individuals convicted of an OWI are able to receive the assessment in a timely manner in accordance with their court order, 3 additional clinicians have completed the required training to provide this service.
- 2. School-based offices: Behavioral Health has school-based offices in 3 school districts in the county which helps increase access for students to MH services, decrease missed school for appointments, and reduce barriers such as transportation/ missed work for parents. These offices also improve collaboration with school professionals, enhancing the quality of care for youth outside of the therapy room as well.
 - a. Two offices have full caseloads, while the Markesan office can continue to take new referrals.

Outpatient Clinic program goals:

- b. Increase use of the patient portal feature of EHR
- c. Continue to increase availability of evidence-based therapy models for county residents
- d. Decrease wait time for intakes and first follow up visit closer to the 14 day target
- e. Collect and analyze date related to "failed appointment" rate to reduce missed visits

Wrap-Around Services- BHU provides three tiers of wrap-around services, allowing us to match individuals with a program that meets the level of need based on their unique situation.

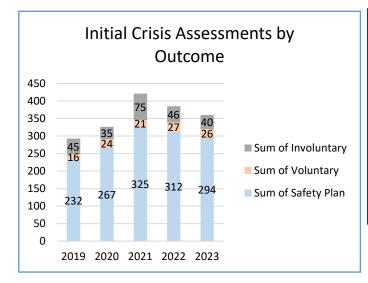
- 1. <u>Targeted Case Management (TCM)</u>— Less intensive case management for clients. *This program* expanded to include adult clients in summer 2018. It presently serves 16 individuals.
- 2. Comprehensive Community Services (CCS)—Recovery-focused support for clients who may benefit from an intensive level of services for a shorter period of time. This program presently serves 28 individuals. The CCS program hosted a training for individuals filling the Mental Health Professional/ Substance Use Professional role throughout the region.
- 3. Community Support Program (CSP)- Intensive community-based support for individuals with chronic mental illness. This support is intended to be long-term and supports clients to maintain psychiatric stability in the community and to reduce hospitalizations. This program presently serves 18 adults. CSP has begun to re-integrate social skill development and wellness groups into the program. Community Support had a successful site survey in October 2023.
- 4. Children's Long Term Support Waiver (CLTS)—Medicaid waiver program provides funding for families of children with long-term disabilities (developmental, physical, and/or severe emotional disturbance) to access services such as respite care and service coordination which are otherwise not covered by Medicaid insurance. In 2018, Wisconsin announced the dissolution of the local waitlist and then subsequently the transition to a state-wide waiting list model and subsequently dissolved the state waiting list. Starting in 2021, youth who are screened eligible for CLTS services will automatically be placed into "enrollable" status with the expectation that the waiver agency will then open them within the allotted 30 days. In late 2021, we hired our first full-time CLTS case manager to attempt to meet the increasing need. Our current program census is at 60 youth and continuing to grow.

Wrap around program goals:

- Increase representation for individuals with substance use or co-occurring MH/Substance use needs within the CCS program
- Increase availability of supervisory support for service facilitators by increasing presence of MH/Substance use professional role at team meetings during first 90 days post-admission
- c. Improve group skill development and social engagement opportunities within Community Support Program

<u>Crisis Services</u>- Crisis services are available 24/7 including weekends/ holidays for psychiatric and substance use disorder emergencies

November 2023: Year-to-Date, we have seen consistently elevated rates of crisis contacts over the past several years as compared to the prior 5 year period, however hospitalizations have decreased this year compared with the past 2 years. The data represent new crisis calls each month. The crisis team provides additional follow up to clients after initial contacts. Internally, staff have worked to centralize follow up contacts with a core group of staff specializing in behavioral health crisis. This differs case-by-case, however crisis follow up can last anywhere from 30 days to 6 months. We believe that the data indicating reduced hospitalization are at least in part due to the improvements made to our follow up protocol.



Crisis Program Goals

- Follow up contact with every client receiving crisis services
- Follow up within 72 hours for each client discharging from a county-facilitated psychiatric inpatient stay.
- Increase visibility of mobile crisis response and crisis debriefing services.
- 100% of Behavioral Health staff trained in lethal means reduction counseling and treatment approaches for suicidality

Zero Suicide Initiative: Our Zero Suicide collaborative team continues to meet monthly to review the learning collaborative training and the results of our workforce

survey. Past team accomplishments include a suicide prevention awareness campaign and QPR training and the implementation of caring contact cards sent to each recipient of crisis services. Currently, the team is focusing on improving orientation within Health & Human Services to help ensure that new and existing staff are aware of issues related to suicide prevention and crisis services. A crisis staff met with each unit of HHS throughout the months of September and October to launch this information

Aging / ADRC October

ADRC – local ADRC can help decide if someone is eligible for publicly funded long-term care. In addition, the ADRC will provide:

Information about Wisconsin's long-term care programs and help with local resources.

Information on living options, the kind of help you or your loved one needs, where to receive care, and how to pay for it.

One-on-one counseling to determine the best options based on personal needs, values, and preference

- o Received Calls 213
- o 112 calls about Public Benefits Long Term Care Programs
- 157 calls have called before
- o 163 Age 60 or older

Disability Benefit Specialist- Disability benefit specialists are available to help adults ages 18 to 59 who have a disability. Elder benefit specialists are on-hand to help adults over age 60 who have a disability. Specialists can answer your questions related to benefits, such as:

FoodShare Medicaid Medicare Private health insurance Social Security

- o 3 New Consumers
 - 100% referrals about Income Benefits
 - 0% referrals about Health Insurance

Elder Benefit Specialist- Elder benefit specialists are on-hand to help adults over age 60 who have a disability. Specialists can answer your questions related to benefits, such as:

FoodShare
Medicaid
Medicare
Private health insurance
Social Security

 Unable to receive reports as Aging Unit is in transition period since having resignation on Aug 18th. Data will resume for December 2023.

Food Pantry -

272- Total Households

582- Total People served

- a. 193-Seniors
- b. 258-Adults under 60
- c. 131-Children

Adult Protective Services - Adult protective services help elder adults and adults at risk who have been abused, neglected, or financially exploited.

11 New Referrals

Nutrition Program (3 sites Berlin, Markesan, Green Lake)— Senior dining centers (congregate) give older adults a place to enjoy a fresh, healthy meal with others. Centers offer a space for community, friendship, and a place to receive resources / education. Home-delivered meals are for older adults who must stay at home or have limited ability to leave the home. It may be hard to travel due to health or other reason.

- Home Delivered Meals 1755
- Congregate 467
- Carry Out 184

Caregiver Support Programs- 3 programs (National Family Caregiver Support Program, Alzheimer's Family and Caregiver Support Program and Title IIIB). The purpose of the National Family Caregiver Support Program (NFCSP) is to assist families and other informal caregivers in caring for loved ones at home for as long as possible. Research shows that caregivers experience high levels of emotional, physical, and financial stress which often leads to diminished health of the caregiver.

Alzheimer's Family and Caregiver Support program is available to individuals with a diagnosis of Alzheimer's disease or other dementia and their caregiver when the person with dementia

Title IIIB These funds are for legal services, access assistance and in-home services.

- National Family Caregiver Support Program 2 New Referral
- Alzheimer's Family and Caregiver Support Program 1 New Referral
- Title IIIB 0 new referrals

*Services were put on hold for April and most of May as the Aging Programs waited for GWAAR to provide updated Budgets to make sure the Aging Program knew how much funding was being received. Services are back to being provided.

Dementia Care Specialist – Provide free information and support to adults with dementia and caregivers. Help create places where people with Dementia can remain active and safe.

Powerful Tools for Caregivers class in Poysippi Nov 2nd and 9th

- Joint visit with Behavioral Health 11/13
- Powerful Tools for Caregivers class in Green Lake 11/15, 11/22
- Consultation appointment 11/20
- Time Slips meeting (Evidence based class for dementia care)

| | DHHS Expendit | ture/Revenue (| Comparison - N | ov 2023 | |
|---------------------|----------------------|----------------|---|----------|--------------|
| | Expenditures | | - | Revenues | |
| Admin | | | | | |
| Total Budget: | \$ | 771,784.38 | | \$ | 762,801.00 |
| YTD Expenses | \$ | 646,152.59 | YTD Revenues | \$ | 758,987.92 |
| % YTD Expenses | | 84% | % YTD Revenues | | 100% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Health | | | | | |
| Total Budget: | \$ | 805,306.00 | | \$ | 805,306.00 |
| YTD Expenses | \$ | 597,743.77 | YTD Revenues | \$ \$ | 580,606.35 |
| % YTD Expenses | · | 74% | % YTD Revenues | · | 72% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Children & Families | | | | | |
| Total Budget: | \$ | 1,747,741.00 | | \$ | 1,747,741.00 |
| YTD Expenses | \$ | 1,257,463.11 | YTD Revenues | \$ | 1,632,491.57 |
| % YTD Expenses | · | 72% | % YTD Revenues | • | 93% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Economic Support | | | | | |
| Total Budget: | \$ | 381,581.00 | | \$ | 381,581.00 |
| YTD Expenses | \$ | 401,810.40 | YTD Revenues | \$ \$ | 293,393.76 |
| % YTD Expenses | * | 105% | % YTD Revenues | T . | 77% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| FRI | | | | | |
| Total Budget: | \$ | 1,361,620.00 | | Ś | 1,361,620.00 |
| YTD Expenses | \$ | 1,211,679.85 | YTD Revenues | \$ \$ | 1,180,804.48 |
| % YTD Expenses | , | 89% | % YTD Revenues | , | 87% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Behavioral Health | | | | | |
| Total Budget: | \$ | 2,198,251.00 | | \$ | 2,198,251.00 |
| YTD Expenses | \$ | 1,909,135.46 | YTD Revenues | \$ | 1,247,370.36 |
| % YTD Expenses | T | 87% | % YTD Revenues | T | 57% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Child Support | | | 7 | | |
| Total Budget: | \$ | 257,051.00 | | \$ | 257,051.00 |
| YTD Expenses | \$ | 150,649.00 | YTD Revenues | \$ | 222,065.94 |
| % YTD Expenses | * | 59% | % YTD Revenues | Ψ | 86% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Aging | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| Total Budget: | \$ | 2,149,373.00 | | \$ | 2,151,771.00 |
| YTD Expenses | \$ | 1,761,616.18 | YTD Revenues | \$ \$ | 1,733,910.87 |
| % YTD Expenses | | 82% | % YTD Revenues | | 81% |
| % Should Be: | | 92% | % Should Be: | | 92% |
| Total DHHS | | | | | |
| Total Bud | dget: \$ | 9,672,707.38 | | \$ | 9,666,122.00 |
| YTD Expenses | \$ | 7,936,250.36 | YTD Revenues | \$ | 7,649,631.25 |
| % YTD Expenses | | 82% | % YTD Revenues | | 79% |
| % Should Be: | | 92% | % Should Be: | | 92% |

\$ (286,619.11)

Additional Anticipated Expenses -137100.0

Additional Anticipated Revenues 587580.25