



GREEN LAKE COUNTY

571 County Road A, Green Lake, WI 54941

Original Post Date: 5/7/2025

Amended Post Date:

The following documents are included in the packet for the Health & Human Services Committee Meeting on May 12, 2025:

- 1) Agenda
- 2) Minutes: 3/10/2025
- 3) Unit Reports



GREEN LAKE COUNTY OFFICE OF THE COUNTY CLERK

Elizabeth Otto
County Clerk

Office: 920-294-4005
FAX: 920-294-4009

Health & Human Services Committee Meeting Notice

Date: Monday, May 12, 2025 Time: 5:00 PM
The Green Lake County Government Center, County Board Room
571 County Road A, Green Lake WI

AGENDA

Committee Members

Joe Gonyo – Chair
*Mike Skivington – Vice
Chair*
Brian Floeter
Christine Schapfel
Mary Hess
Nancy Hoffmann
Vacant
Vacant
Vacant

Elizabeth Otto, Secretary

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.

This agenda gives notice of a meeting of the Health & Human Services Committee. It is possible that individual members of other governing bodies of Green Lake County government may attend this meeting for informative purposes. Members of the Green Lake County Board of Supervisors or its committees may be present for informative purposes but will not take any formal action. A majority or a negative quorum of the members of the Green Lake County Board of Supervisors and/or any of its committees may be present at this meeting. See State ex rel. Badke v. Vill. Bd. of Vill. of Greendale, 173 Wis.2d 553, 578, 494 N.W. 2d 408 (1993).

1. Call to Order
2. Certification of Open Meeting Law
3. Pledge of Allegiance
4. Minutes: 3/10/2025
5. Appearances
 - Kyle Alt, Environmental Health Specialist – food code guidelines
6. Discussion and possible action regarding Capillary Blood Lead Testing fee
7. Director's Report
8. VSO Report
9. Unit Reports
10. Committee Discussion
 - Future Meeting Dates: June 9, 2025
 - Future Agenda items for action & discussion
11. Adjourn

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For organizers: [Meeting options](#) | [Reset dial-in PIN](#)

Please accept at your earliest convenience. Thank you!

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Kindly arrange to be present, if unable to do so, please notify our office.
Elizabeth Otto, County Clerk

Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date of the meeting.

HEALTH & HUMAN SERVICES COMMITTEE MEETING

March 10, 2025

The meeting of the Health & Human Services Committee was called to order by Chair Joe Gonyo at 5:00 PM on Monday, March 10, 2025 in person and via remote access at the Government Center, 571 County Road A, Green Lake, WI. The requirements of the open meeting law were certified as being met. The pledge of allegiance was recited.

Present: Joe Gonyo
Mary Hess
Nancy Hoffmann
Mike Skivington
Christine Schapfel

Absent: Brian Floeter

Other County Employees Present: Liz Otto, County Clerk; Jason Jerome, HHS Director; Kayla Yonke, HHS Financial Manager; Ryan Bamberg, Aging Unit Manager (Remote); Shelby Jensen, ESU Unit Manager; Lisa Schiessl, C&F Unit Manager; Dawn Brantley, FRI Unit Manager; Jon Vandeyacht, Veterans Service Officer; Rachel Prellwitz, Health Officer

APPROVAL OF MINUTES – 02/10/2025 MINUTES

Motion/second (Hoffmann/Schapfel) to approve the minutes of the 02/10/2025 minutes as presented with one wording change. Motion carried with no negative vote.

ORDINANCE

- **Amending Green Lake County Chapter 148. Food Safety and Recreational Licensing Program**

Health Officer Rachel Prellwitz stated that the ordinance amendment is needed due to the approved change moving from the former consortium to the Rural Environmental Health Alliance. Marquette County has already passed this and taken out duplicate wording and provided language cleanup. Discussion held. A request will be made for the Environmental Health Specialist to appear at a future meeting to explain the current guidelines.

Motion/second (Skivington/Hess) to approve the ordinance and forward to County Board for final approval. Motion carried with no negative vote.

DISCUSSION AND POSSIBLE ACTION ON PURCHASE OF REPLACEMENT BOX TRUCK FOR FOX RIVER INDUSTRIES

FRI unit manager Dawn Brantley provided 3 quotes for a replacement box truck at FRI and explained the need for this vehicle in the future. Discussion held. *Motion/second (Hoffmann/Skivington)* to approve the purchase of a truck not to exceed \$50,000. Motion carried with no negative vote.

DIRECTOR'S REPORT

HHS Director Jason Jerome provided an update on the refrigerated van and stated that the plug in option is being provided. Jerome also provided a verbal overview of the annual report.

VSO REPORT

Veterans Service Officer Jon Vandeyacht stated that he is starting to plan for Student Government Day in April. His office is also starting an outreach program in April.

UNIT REPORTS

Discussion and questions regarding the Behavioral Health unit outpatient services.

ANNUAL REPORT

Motion/second (Schapfel/Skivington) to accept the HHS annual report as presented in the packet. Motion carried with no negative vote.

FUTURE AGENDA ITEMS FOR ACTION AND DISCUSSION

Future Meeting Dates – April 14, 2025

Future Agenda Items:

ADJOURNMENT

Chair Gonyo adjourned the meeting at 5:57 pm.

Submitted by,

Liz Otto
County Clerk

DRAFT

HEALTH AND HUMAN SERVICE BOARD OF DIRECTORS MEETING UNIT UPDATE



Fox River
Industries

Fostering Relationships for Independence

HHS May 2025 Board Meeting March 2025 Unit Update

MARCH IS DISABILITY AWARENESS MONTH IS DISABILITY AWARENESS MONTH

03/2025 Program Data

Census as of LAST day of Month	Full time	Part time	TOTAL	Wait List	DVR/SE/CIE	Percent Prevoc in DVR/SE/CIE	Days of Service per Week	Notes
FACILITY BASED PREVOCATIONAL	9	30	39	4	13	33%	119	1 on medical leave
COMMUNITY BASED PREVOCATIONAL		15	15	0	6	40%	27	CBPV Enrollees; does not include FBPV in community
<i>Additional CBPV (Contracted Services/MealSite)</i>								
VOCATIONAL SERVICES TOTALS			54		19	38%	166	
SUPPORTED EMPLOYMENT	LTC: 19	DVR: 14	33	Hires 1	Job Losses 1			
DAY SERVICE	2	21	23	13			66	increased days of service for 2 participants, enrolled one participant
REPRESENTATIVE PAYEE	Self Pay	Managed Care	Total	Changes				
	20	55	75	DEATH DISENROLLED LOST BENEFITS 0 NEW REFERRAL				

GREEN LAKE PROGRAM UPDATES

- Completed System Upgrades on FRI department computers
- Completed the Direct Care Workforce Annual Survey
- Completed the Adult Longterm Care Waiver Provider Enrollment, a requirement with Medicaid through the Forward Health Portal in order to continue to draw down reimbursement for services provided in Non-residential Home and Community Based Settings which includes Adult Day Services and Prevocational Services
- Received approval from HHS Board to take truck purchase proposal to finance with a \$50,000 max expenditure.
 - Put a 1,000 deposit down on the preferred vehicle.
- Held an Advocacy Day event after the scheduled event at the state capital was transitioned to virtual.
- Received approval from HHS Finance Committee to purchase box truck.

OTHER UPDATES

Disability Services, Inc.

- Next Board of Directors meeting is scheduled for April 15, 2025.
- Discovered the attempted theft of a catalytic converter off of a minibus. Reported to local authorities.

Fox River Industries, Inc.

- Next Board of Directors meeting is scheduled for April 15, 2025.
- Submitted Subminimum Wage 14c renewal.
- Held WIOA interviews with the University of WI Milwaukee as well as assisted all facility based prevocational program participants with the creation of emails per the requirements of WIOA.
- Fundraising Events:
 - We will be holding our first annual rummage sale on April 24 and 25
 - Come see us at the Berlin Farmers Market where we will be selling popcorn and other crafts made by participants.
 - We will be serving up food at Cross Roads Market on May 23rd and the recipient of the Rooster Round up later in the year.
- Purchased a second commercial shredder after going into partnership with Sondolle automotive to shred their documents.

Respectfully submitted
Dawn Brantley

CHILDREN & FAMILY SERVICES UNIT – March 31, 2025

The children and family unit consists of the Unit Manager and 11 staff. The unit is fully staffed and working hard to provide services to all our families in the community. The unit has one master's level intern, she began with us in September of 2024 and will remain until May of 2025.

Unit Manager, Lisa Schiessl, is writing for two grants, Coordinated Services Team Initiatives Supplemental Funding Grant and the Green Lake Area Special Needs Grant to help support the needs of the children and families in Green Lake County.

CPS staff attended the 2025 Regional Training for the Multidisciplinary Team that was put on by the Department of Justice, Children's Justice Act. This was in conjunction with our DA, Corporation Counsel and local law enforcements.

Out-of-Home Care – as of 03/31/2025

There have been no removals of children in March 2025. The placements in the past month have remained the same.

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- 3

Level 1- 0

Level 2- 3

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 = **9, 1 child is currently in secure detention.**

Voluntary Kinship Care (\$375.00 month per child)

Thirteen (13) 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.

Seven (7) subsidized guardianships.

ACCESS REPORTS

Child Protective Services –

January – 10 reports, 1 screened in, 9 screened out

February- 13, 3 screened in, 10 screened out.

March- 18, 6 screened in, 12 screened out

YTD: Total reports 41

10 reports total screened in

Child Services/Welfare –

January – 2; 1 screened in; 1 screened out.

February- 1; 1 screened in

March- 6, 0 screened in, 6 screened out

YTD: Total Service Reports-9

2 total screened in

Youth Justice –

January – 5

February-2

March- 2

YTD: 9 referrals

The YJ staff have begun a Vaping Group in Berlin, and it will run for 6 weeks, there are 3 youth in this group due to being caught vaping.

The YJ staff is working hard on setting up the Boys Summer Group as well as the other Girls Groups that will be held.

Birth to Three/C-COP/CLTS

**Birth to Three had (6) six new children referred to the program in the month of March. Two (2) new Individualized Family Service Plans (IFSP's) were developed. There were Eighteen (18) open children in the program in the month of February that had active IFSP's.

Children's Community Options program (CCOP) 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; Eleven (11) cases have been assigned.

Behavioral Health Unit— April 2025 (March data)

This Spring, Behavioral Health Unit has continued the transition of Adult Protective Services (APS) into our umbrella, a process that started in January 2025. We are currently receiving grants for both Crisis Enhancement (focused on improving mobile crisis response in rural areas) and State Opioid Response (SOR) focused on improving treatment access for individuals at risk for overdose from opioid or stimulant-related disorders.

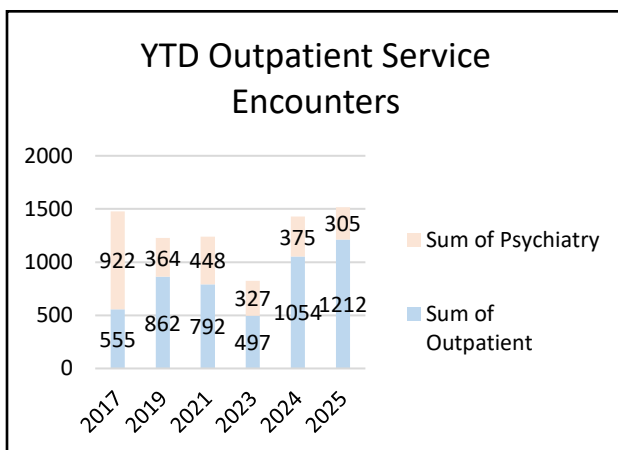
- The **Crisis Enhancement Grant** is supporting the transition to the inclusion of a case manager who is able to follow both crisis and Adult Protection related concerns. Funds are able to additionally support use of regional crisis stabilization centers for teens and adults (Matz Center and Calm Harbor). To date, 2 stabilization stays (& transportation needed to facilitate these referrals) were funded with this grant.
- The **State Opioid Response (SOR-4)** funding is used to support unmet treatment needs for individuals with opioid and stimulant use disorders. To date funding has provided support with case management and recovery housing for 3 clients and uninsured inpatient costs for 1 client.

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

Month at a Glance (March data)

<i>New Outpatient Therapy Intakes</i>	<i>7</i>
<i>New Psychiatry Admissions</i>	<i>1</i>
<i>IDP Assessments Completed</i>	<i>6</i>

March 2025:



Behavioral Health Unit staff have continued to see high caseload volume across all programs, however our waiting list time for a new admission has remained under 30 days for the past 4 months. We believe that this is largely due to the increased capacity for crisis services to provide case management and follow up, freeing therapy staff to spend more time providing direct therapy services on their caseload rather than providing support and back up for crisis. Additionally, a robust internship program has added some clinical appointment times and helps to ease caseloads & wait time during the academic year when students are present.

There has been an increase in outpatient therapy services, but an overall decline in psychiatric services since 2020— this is a direct result of the retirement of Dr. Baldomero, child psychiatrist. Following Dr. Baldomero’s retirement, our department no longer provides child psychiatry. Adult psychiatric referrals and services have

remained relatively consistent. 2023 is an outlier year for outpatient therapy services as in January and February 2023, we had a vacant full time therapist position.

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.
 - a. This month, we provided assessments to **6** drivers.
 - b. Individuals who receive a court order for an IDP are given 30 days to complete the assessment. We are currently able to accommodate this window with no waiting list.
2. **School-based offices:** BHU has school-based offices in 3 school districts in the county to increase access to therapy for students, 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. ***Two of our school offices have room for new admissions, while both Markesan offices (MS/HS and Elementary) are at capacity. This month, the clinician working at the elementary school began piloting an Emotion Regulation group for 4th grade students—the group has been well-received and allows for 5-6 students to participate at a time.***

Outpatient Clinic program goals:

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

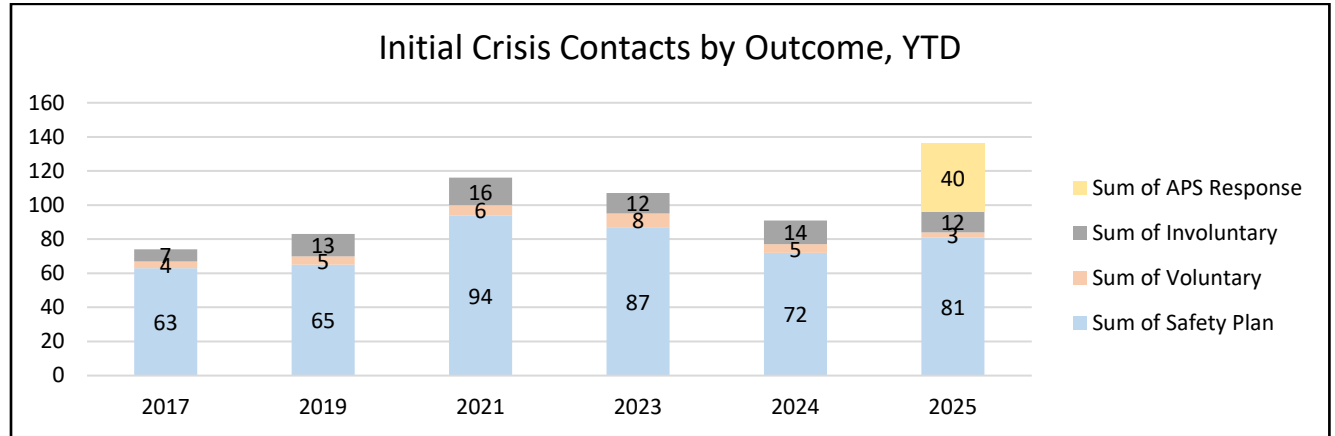
Wrap-Around Services- *BHU provides three tiers of wrap-around services, allowing us to match individuals with a program that meets the level of need based on their unique situation.*

1. **Targeted Case Management (TCM)**— *Less intensive case management for clients. **This program expanded to include adult clients in summer 2018. It presently serves 17 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 38 individuals.***
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 24 adults. CSP has begun to re-integrate social skill development and wellness groups into the program.***
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, transition to a state-wide waiting list model, and subsequently dissolved the state waiting list. Starting in 2021, youth screen 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. **Our current program census is at 75 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
- Improve group skill development and social engagement opportunities within Community Support Program

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



March 2025: Our crisis call volumes have continued see increases over the past 5 years. Subjectively, we are also noting an increase in crisis calls that involve the use of lethal means or are near-lethal encounters (those requiring life-saving medical intervention).

Despite rising call volume, hospitalizations have remained relatively consistent over the past several years, even decreasing around 3-4% since 2020. The data represent new crisis calls each month. The crisis team provides additional follow up to clients after initial contacts.

As anticipated, the total call volume has increased substantially this year, chiefly due to the addition of Adult Protective Services (APS) responsibilities. This has been added to the monthly data that will be reported going forward. APS responses may include everything from an investigation to voluntary protective services in the community to full guardianship including emergency protective placement. In March, one contact resulted in an emergency protective placement while three others resulted in petitions for non-emergency guardianships.

Crisis Program Goals

- Follow up contact with every client receiving crisis services
- Follow up within 48 hours for each client discharging from a county-facilitated psychiatric inpatient stay.
- Increase visibility of mobile crisis response and crisis debriefing services.

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. The team continues to review processes for early identification and referral, as we continue to identify that almost all deaths by suicide and near-lethal attempts have involved individuals who had not had any contact with crisis or Health & Human Services at all prior to the suicide/ attempt.

The team continues to look at ways to support staff working with clients in potentially high-risk situations. We further explored opportunities for outreach and post-vention strategies including working with youth who have been bystanders during a crisis incident as well as the COMET program which is designed to provide mental health education to rural communities and specifically targeted towards agricultural workers. The team is beginning to plan this year’s Mental Health Awareness campaign for May.

Housing Subcommittee: In Spring 2024, the Behavioral Health Unit sought to initiate a community partnership that includes a variety of professionals as well as interested community members to engage on the subject of homelessness and housing insecurity in Green Lake County. This began after a number of contacts to our behavioral health crisis line that involved individuals presenting with their primary need being that they had no place to go in the winter months. The committee has since worked as a subcommittee of the greater WinnebagoLand Housing Coalition with an immediate, short term focus to increase awareness and understanding of the unique needs around support for homelessness/ housing issues in rural communities where homelessness may be less visible and there are no emergency shelters available. The group meets monthly, and hosted a town hall-style meeting to provide education about the scope of housing and homelessness concerns as well as currently existing resources in early February which had over 60 community members and professionals in attendance. *A follow up community solution-oriented discussion is being planned for April 30th in Ripon. There is additional discussion about replicating a similar event specific to Green Lake County.*

Dementia Council/ I-Team: In preparation for the transition of Adult Protection (APS) responsibilities to the crisis unit, the crisis team initiated a community Dementia Council. This group meets monthly and has heard a variety of presentations around available resources as well as working to identify and understand the gaps in resources for those impacted by dementia. In March, the group elected to adopt the Interdisciplinary (I-Team) and will be referred to solely as "I-Team" on future reports.

GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

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FOX RIVER INDUSTRIES

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March 2025 Health Unit Monthly Report to the Health & Human Services Board

Public Health Update:

- Allison held 2 CPR recertification classes this month with a total of 12 participants.
- Rachel attended a Transient Non-Community (TNC) Program training on March 5th with staff from Marquette County and Kyle Alt, provided by the DNR. A transient non-community water system (TN or TNCWS) is a public water system that provides water in a place such as a gas station or campground where people do not remain for long periods of time. This is a new program that the Rural Environmental Health Alliance (REHA) will be providing as a contracted inspector with the DNR. Contracted county staff perform the required sampling for public water system owners, collecting samples to test for coliform bacteria, nitrates and nitrites.
- Applied for the Green Lake Basic Needs grant through the Oshkosh Area Community Foundation in the amount of \$5,000.00 to support oral health efforts in Green Lake County. Summary for the grant application: Green Lake County Health Department is partnering with Church Health Services to provide oral health care for those on Medicaid, or without dental insurance, and are less than 200% of the federal poverty level. Green Lake County would help to cover the cost of dental exams & cleaning (\$40) and bite-wing x-rays (\$40) for 60 clients who have financial constraints and are unable to pay the dental fees if they don't have Medicaid dental insurance.
- Green Lake County United for Prevention coalition meeting held on March 10th. Revealed official name chosen by coalition members: Green Lake County United for Prevention, Vision: Green Lake County fosters a thriving and safe drug free community. This meeting focused on community mapping and data gathering. Workgroup to form to design a logo for the new coalition.
- Nancy attended WI's stroke coalition spring meeting on March 11th.
- Lauren and Rachel met with Thedacare staff to discuss their Community Health Needs Assessment (CHNA) and provide feedback and comparison to our Community Health Assessment (CHA) on March 11th. Potential to partner with Thedacare on their next CHNA which happens every 3 years. Our CHA is done every 5 years.
- HHS Board and County Board approved Ordinance no. 05-2025, Amending GLC Chapter 148. Food Safety and Recreational Licensing Program on March 10th and 18th respectively. The official transition to the Rural Environmental Health Alliance will commence on July 1st with Marquette County. Communications to all operators will be going out on April 1st to help with the transition. Rachel continues to meet weekly with Marquette County staff.
- Rachel attended the Northeast Region WALHDAB meeting on March 13th. Presentations on H5N1 updates and collaborations were given by DHS, UW-Extension and Department of Agriculture, Trade and Consumer Protection (DATCP) staff.

- Lauren and Allison gave a Vaping Prevention Presentation to 7th grade students at Princeton School District on March 13th. They also gave a presentation to the HS Healthcare Careers class to high school students on the same date.



- Education provided to Care 4 U clinic staff to prepare them for potential measles cases and testing/treating/reporting protocols. No cases as of April 1st reported in WI. Outbreaks/cases of measles currently being reported in Alaska, California, Florida, Georgia, Kansas, Kentucky, Maryland, Michigan, Minnesota, New Jersey, New Mexico, New York City, New York State, Ohio, Pennsylvania, Rhode Island, Tennessee, Texas, Vermont, and Washington.
- Nancy attended Advocap's Policy Council meeting on March 17th.
- Allison attended the Public Health Emergency Preparedness (PHEP) Coordinators meeting and Fox Valley Healthcare Emergency Readiness Coalition (FV-HERC) meeting on March 18th.
- Lauren and Rachel attended the Tri-County Zero Suicide meeting with staff from Green Lake and Waushara Counties on March 20th. Discussed upcoming promotion of MH awareness month activities in May and other Zero Suicide initiatives.
- Lauren attended the East Central Nicotine Prevention Coalition quarter 3 meeting on March 20th.
- Rachel attended the Dementia Council meeting with other HHS staff and community members. Discussed combining Dementia Council with i-Team committee/coalition to align meeting formats and combine efforts.
- Nancy gave presentation to the Committee on Aging at the Berlin Senior Center on March 25th. The presentation was on our Diabetes Prevention Program.

- Lisa and Lauren attended the Alliance for WI Youth (AWY) Opioid Prevention Bootcamp, session 2 on March 26th from 10am to 3pm. This bootcamp is a required activity for a grant we received from AWY.
- Allison, Nancy and Rachel went to Prairie View Headstart on March 27th to perform blood lead testing on 2 students. We are partnering with Headstart to increase accessibility to blood lead testing as the new recommendation from CDC is for all children to have at least one blood lead test performed before the age of 5.



- Quarterly strategic plan check-in and educational session held on March 31st for all HHS staff. This quarter's educational topic was analyzing quantitative and qualitative data.



Respectfully submitted,

Rachel Prellwitz, Health Officer

Aging / ADRC March

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

- Received Calls 75

Age		
	Under 60	9
	60 - 74	22
	75 - 84	15
	85+	7
	Date of Birth Missing	22

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

- New Client Tracking Database implemented – Reports not available yet

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

- New Client Tracking Database implemented – Reports not available yet

Food Pantry –

- Total Households = 217
- Total People served = 471
- a. -Seniors = 184
- b. -Adults under 60 = 186
- c. -Children = 101

Nutrition Program (3 sites Berlin, Markesan, Princeton)– 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 – 1632
- Congregate – 464
- Carry Out – 29

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 – 2 New Referral
- Title IIIB – 0 new referrals

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.

No activities planned. DCS services remain to be most beneficial as 1 on 1 sessions. DCS Staff continue to work with professionals to educate professionals such as Sheriff’s Office, Hospitals, and other professionals on Dementia and related resources.

April DHHS Expenditure/Revenue Comparison

	<u>Expenditures</u>		<u>Revenues</u>	
Admin				
Total Budget:	\$	705,057.20		\$ 705,057.20
YTD Expenses	\$	135,143.49	YTD Revenues	\$ 665,694.20
% YTD Expenses		19%	% YTD Revenues	94%
% Should Be:		33%	% Should Be:	33%
Health				
Total Budget:	\$	504,752.12		\$ 504,752.12
YTD Expenses	\$	102,333.85	YTD Revenues	\$ 280,216.64
% YTD Expenses		20%	% YTD Revenues	56%
% Should Be:		33%	% Should Be:	33%
Children & Families				
Total Budget:	\$	1,718,757.00		\$ 1,698,757.00
YTD Expenses	\$	321,125.97	YTD Revenues	\$ 513,212.22
% YTD Expenses		19%	% YTD Revenues	30%
% Should Be:		33%	% Should Be:	33%
Economic Support				
Total Budget:	\$	9,141,964.88		\$ 9,141,964.88
YTD Expenses	\$	3,010,114.11	YTD Revenues	\$ 1,734,011.13
% YTD Expenses		33%	% YTD Revenues	19%
% Should Be:		33%	% Should Be:	33%
FRI				
Total Budget:	\$	1,498,659.84		\$ 1,498,659.84
YTD Expenses	\$	317,910.39	YTD Revenues	\$ 412,229.89
% YTD Expenses		21%	% YTD Revenues	28%
% Should Be:		33%	% Should Be:	33%
Behavioral Health				
Total Budget:	\$	2,364,860.00		\$ 2,364,860.80
YTD Expenses	\$	407,731.15	YTD Revenues	\$ 718,779.33
% YTD Expenses		17%	% YTD Revenues	30%
% Should Be:		33%	% Should Be:	33%
Child Support				
Total Budget:	\$	290,357.91		\$ 290,357.91
YTD Expenses	\$	29,099.55	YTD Revenues	\$ 80,594.48
% YTD Expenses		10%	% YTD Revenues	28%
% Should Be:		33%	% Should Be:	33%
Aging				
Total Budget:	\$	1,260,809.28		\$ 1,246,529.28
YTD Expenses	\$	439,966.54	YTD Revenues	\$ 391,403.78
% YTD Expenses		35%	% YTD Revenues	31%
% Should Be:		33%	% Should Be:	33%
Total DHHS				
Total Budget:	\$	17,485,218.23		\$ 17,450,939.03
YTD Expenses	\$	4,763,425.05	YTD Revenues	\$ 4,796,141.67
% YTD Expenses		27%	% YTD Revenues	27%
% Should Be:		33%	% Should Be:	33%

GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES
571 County Road A
Green Lake, WI 54941-8630
PHONE: 920-294-4070
FAX: 920-294-4139
EMAIL: glcdhhs@greenlakecountywi.gov



FOX RIVER INDUSTRIES
222 Leffert St.; PO Box 69
Berlin, WI 54923-0069
PHONE: 920-361-3484
FAX: 920-361-1195
EMAIL: fri@greenlakecountywi.gov

2025 Rates CHILDREN & FAMILY CHARGES

Juvenile Supervision	Monthly	\$ 25.00
Electronic Monitoring	Daily	\$ 5.50
Drug Screen		\$ varies
Victim/Witness Surcharge		\$ 20.00
Shelter Care	Daily	\$175.00
Background Check-Private Agency		\$ 20.00
Custody Studies		\$400.00

MENTAL HEALTH CHARGES

Psychiatrist	Hourly	\$250.00
Psychological Intake Session	90 Min.	\$210.00
Individual Counseling	20-30 Min.	\$ 70.00
Individual Counseling	45-50 Min.	\$140.00
Individual Counseling	75-80 Min.	\$210.00
Family Counseling	Hourly	\$140.00
Groups	Hourly	\$ 35.00

AODA CHARGES

AODA Assessment	90 Min.	\$210.00
Individual Session/AODA	30 Min.	\$ 70.00
Individual Session/AODA	60 Min.	\$140.00
Individual Session/AODA	90 Min.	\$210.00
Groups	Hourly	\$ 35.00
Court Ordered AODA Assessment		\$250.00
Intoxicated Driver Assessment		\$275.00
Amended Driver Safety Plan		\$ 65.00
DSP Compliance Forms		\$ 30.00

VACCINATIONS (ADULT)

Influenza – High-Dose Trivalent	\$ 84.00
Influenza-Quadrivalent	\$ 40.00
Hepatitis A Vaccine	\$ 70.00
Hepatitis B Vaccine (3 Shot Series)	\$165.00
Capillary Blood Lead Testing Fee	\$ 5.00

MEDICAL RECORD COPIES (Effective 7/1/2024 – 6/30/2025)

First 25 pages	per Page	\$ 1.40
Pages 26 to 50	per Page	\$ 1.04
Pages 51 to 100	per Page	\$ 0.68
Pages 101 and above	per Page	\$ 0.40