



GREEN LAKE COUNTY

571 County Road A, Green Lake, WI 54941

Original Post Date: 07/09/2025

Amended Post Date:

The following documents are included in the packet for the Health & Human Services Committee Meeting on July 14, 2025:

- 1) Agenda
- 2) Minutes: 5/12/2025
- 3) Dementia Care Presentation
- 4) Green Lake County HHS 2025 Rates
- 5) Health Unit Report



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, July 14, 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. Public Comment
5. Minutes: 5/12/2025
6. Appearances
 - Dementia Care – Lisa Zimmerman
7. Discussion and Possible Action Regarding DPP Employer/Private Pay Fee
8. Discussion and Possible Action Regarding Medical Record Copies Fee
9. Budget Update
10. Director's Report
11. VSO Report
12. Unit Reports
13. Committee Discussion
 - Future Meeting Dates: August 11th, 2025
 - Future Agenda items for action & discussion
14. Adjourn

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Meeting ID: 285 944 756 144

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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

May 12, 2025

The meeting of the Health & Human Services Committee was called to order by Chair Joe Gonyo at 5:00 PM on Monday, May 12, 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; Shelby Jensen, ESU Unit Manager; Dawn Brantley, FRI Unit Manager; Rachel Prellwitz, Health Officer

APPROVAL OF MINUTES – 03/10/2025 MINUTES

Motion/second (Hoffmann/Hess) to approve the minutes of the 03/10/2025 minutes as presented with no additions or corrections. Motion carried with no negative vote.

APPEARANCE

- **Kyle Alt, Environmental Health Specialist – food code guidelines**

Kyle Alt, Environmental Health Specialist, outlined the various processes for licensing including pools, campgrounds, and lodging permits. He provided the guidelines for food licensing and answered questions. Alt also informed the committee that as of 04/01/2025 Green Lake County is now partnering with Marquette County under the Rural Environmental Health Alliance (REHA).

DISCUSSION AND POSSIBLE ACTION REGARDING CAPILLARY BLOOD LEAD TESTING FEE

Health Officer Rachel Prellwitz explained that the CDC recommends blood lead testing and our current partner does not come on site to perform testing. She stated that the Health Department would like to add a \$5.00 shipping fee for testing. *Motion/second (Hoffmann/Schapfel)* to approve the \$5.00 shipping fee. Motion carried with no negative vote.

DIRECTOR'S REPORT

HHS Director Jason Jerome thanked all of the unit managers for stepping up and allowing him to take on the additional duties of Interim County Administrator. Jerome outlined some current events such as ESU Worker Week, an upcoming tabletop clinic regarding measles for the Health unit, and Fox River Industries will be hosting the brat barn at Crossroads on May 23. Jerome also congratulated the Health unit on receiving a Community Service Award from Advocap.

VSO REPORT

No report

UNIT REPORTS

Discussion held regarding various unit reports.

FUTURE AGENDA ITEMS FOR ACTION AND DISCUSSION

Future Meeting Dates – June 9, 2025

Future Agenda Items: Supervisor Skivington requested that Public Comment be added to future agendas. Chair Gonyo approved.

ADJOURNMENT

Chair Gonyo adjourned the meeting at 5:33 PM.

Submitted by,

Liz Otto
County Clerk

DRAFT

What is brain health?

Brain health refers to the overall functioning of your brain. Knowing the risk factors and healthy habits that impact brain function and understanding the benefits of planning for life-long brain health helps people live well as they age.

What is dementia?

Dementia is a decline in brain function, such as thinking, remembering, and reasoning, that can affect a person's daily life and activities.

Some causes of dementia may be reversible, so it is important to request a memory screen or talk to your doctor.

When is a memory screen recommended?

- If you want to track your memory over time
- If you, your family, friends, or others are concerned about your memory
- When you, a family member, or a friend start to have trouble with daily tasks like paying bills, making meals, or keeping appointments

**Talk to your local
dementia care specialist**



Contact us:

571 County Rd A
Green Lake, WI 54941

Monday - Friday
8 a.m. - 4:30 p.m.

833-694-0192

glcdhhs@greenlakecountywi.gov
<https://www.greenlakecountywi.gov/departments/adrc/>

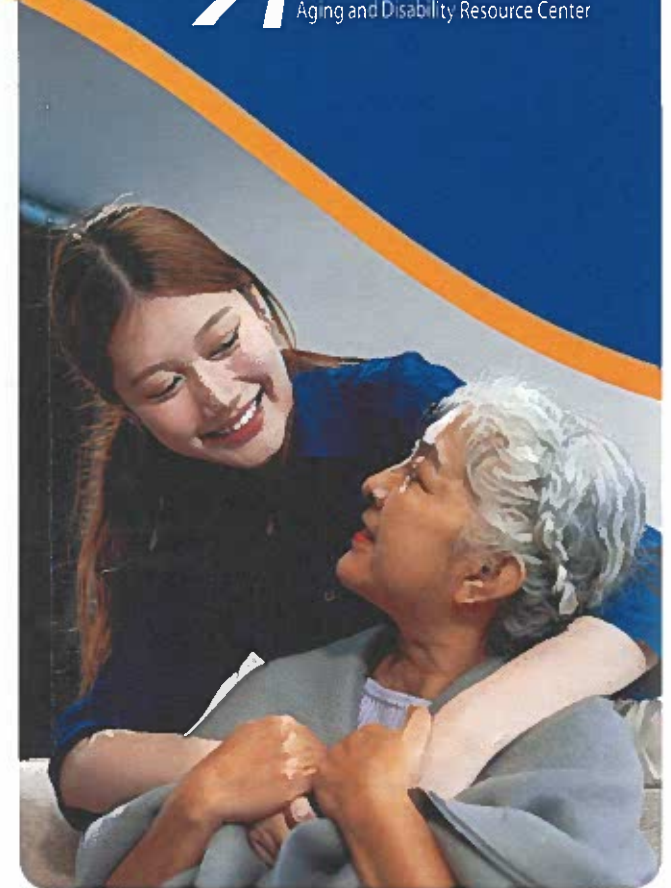


Scan me
[FindMyADRC.org](https://www.greenlakecountywi.gov/departments/adrc/)



WISCONSIN DEPARTMENT
of HEALTH SERVICES

P-03712B (03/2025)



Concerns About Memory Loss?

**What to do if you or someone you know is
experiencing confusion or memory loss**

Accommodations, materials in alternate formats, and after-hours appointments are available upon request. Hearing loops are available on site; please call to arrange for interpreters or captionists.



Tribal Memory Care Coordinator

Dementia Care Specialists

What is a dementia care specialist?

Dementia care specialists provide resources for memory screening, education, support for dementia-friendly communities, and guidance and counseling to individuals and families.

Support for families impacted by dementia

Opportunities to enroll in health programs and activities are available for you and your family caregivers.

Community support for individuals with confusion and memory loss can include support groups, community activities, memory cafes, and more. Ask about which programs are available in your area.

Independence

Dementia care specialists can help connect you with opportunities in your community to help you stay active and involved.

Where to find a dementia care specialist?

You can find dementia care specialist services at your local aging and disability resource center (ADRC) or Tribal partner agency.

ADRCs and Tribal partner agencies are available statewide and can provide you with information, assistance, and referrals to a wide variety of services.

Go to **FindMyADRC.org** or call
1-844-WIS-ADRC (1-844-947-2372).

Memory resources

Contact the ADRC or Tribal partner agency to ask about the availability of the following opportunities to the following opportunities for education and support.

- Family caregiver support
- Support groups
- Community activities
- Memory cafes
- Dementia-friendly businesses
- Dementia capable emergency response

What is Dementia?

Dementia is a word used to describe a group of symptoms that affect thinking, memory, reasoning, planning, language, and/or social skills to the point that it affects everyday life. There are many causes of dementia symptoms.

Important Things to Remember

- Dementia is not a specific disease — it is an umbrella term for a group of symptoms. Think of it like the word car — just as there are many types of cars, there are many types of dementia. The following page will illustrate this concept and discuss some of the more common types of dementia.
- Dementia is not a normal part of aging.
- Alzheimer's disease and dementia are not the same thing. Alzheimer's disease is the most common type of dementia that is not curable.
- Dementia is not just an "old person's disease." Even people in their 20's and 30's have developed some forms of dementia.
- There is more to dementia than just memory loss.

Signs and Symptoms

- Memory loss that disrupts daily life
- Challenges in planning or solving problems
- Difficulty completing familiar tasks at home, work, or at leisure
- Confusion with time or place
- Trouble understanding visual images & spatial relationships
- New problems with words in speaking and writing
- Misplacing things and losing the ability to retrace steps
- Decreased or poor judgment
- Withdrawal from work or social activities
- Changes in mood and personality

Source: www.alz.org

What is Dementia?

DEMENTIA



Alzheimer's Disease

- Younger Onset
- Normal Onset

Symptoms

- New info lost
- Recent Memory worse
- Problems finding words
- Mis-speaks
- More impulsive or indecisive
- Gets lost
- Notice changes over 6 months—1 year

Vascular (multi-infarct) Dementias

- Younger Onset
- Normal Onset

Symptoms

- Sudden Changes
- Picture varies by person
- Can have bounce back & bad days
- Judgement and behavior "not the same"
- Spotty losses
- Emotional & energy shifts

Lewy Body Dementia

Symptoms

- Movement problems -Falls
- Visual Hallucinations
- Fine motor problems—hands & Swallowing
- Episodes of rigidity & syncope
- Nightmares
- Fluctuations in abilities
- Drug responses can be extreme & strange

Frontotemporal Lobe Dementias

- Many types

Symptoms

- Frontal—impulse and behavior control loss
- says unexpected, rude, mean, odd things to others
- Dis-inhibited—food, drink, sex, emotions, actions
- Temporal—language loss
- Can't speak or get words out
- Can't understand what is said, nonsense words

Other Dementias

- ♦ Metabolic Diseases
- ♦ Vitamin Deficiency
- ♦ Depression
- ♦ Infections
- ♦ Metabolic Disease
- ♦ Malnutrition/Dehydration
- ♦ Medication/Drug Interaction

Source: Alzheimer's Association

10 Warning Signs of Alzheimer's

If you notice any of these signs, take action.

Use this form to note your concerns so you can address them with a friend, family member or doctor.

- 1. MEMORY LOSS THAT DISRUPTS DAILY LIFE.** One of the most common signs of Alzheimer's disease, especially in the early stage, is forgetting recently learned information. Others include forgetting important dates or events, asking the same question over and over again, or increasingly needing to rely on memory aids (e.g., reminder notes or electronic devices) or family members for things the person used to handle on their own.

What's a typical age-related change? Sometimes forgetting names or appointments, but remembering them later.

- 2. CHALLENGES IN PLANNING OR SOLVING PROBLEMS.** Some people living with dementia may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before.

What's a typical age-related change? Making occasional errors when managing finances or household bills.

- 3. DIFFICULTY COMPLETING FAMILIAR TASKS.** People living with Alzheimer's disease often find it hard to complete routine tasks. Sometimes they may have trouble driving to a familiar location, organizing a grocery list or remembering the rules of a favorite game.

What's a typical age-related change? Occasionally needing help to use microwave settings or to record a TV show.

- 4. CONFUSION WITH TIME OR PLACE.** People living with Alzheimer's can lose track of dates, seasons and the passage of time. They may have trouble understanding something if it is not happening immediately. Sometimes they may forget where they are or how they got there.

What's a typical age-related change? Getting confused about the day of the week, but figuring it out later.

- 5. TROUBLE UNDERSTANDING VISUAL IMAGES AND SPATIAL RELATIONSHIPS.** For some people, vision problems are a sign of Alzheimer's. They may also have problems judging distance and determining color or contrast, causing issues with driving.

What's a typical age-related change? Vision changes related to cataracts.

6. NEW PROBLEMS WITH WORDS IN SPEAKING OR WRITING. People living with Alzheimer's may have trouble following or joining a conversation. They may stop in the middle of a conversation and have no idea how to continue, or repeat themselves. They may struggle with vocabulary, have trouble naming a familiar object or use the wrong name.
What's a typical age-related change? Sometimes having trouble finding the right word.

7. MISPLACING THINGS AND LOSING THE ABILITY TO RETRACE STEPS. A person living with Alzheimer's may put things in unusual places. They may lose things and be unable to go back over their steps to find them again. He or she may accuse others of stealing, especially as the disease progresses.
What's a typical age-related change? Misplacing things from time to time and retracing steps to find them.

8. DECREASED OR POOR JUDGMENT. Individuals may experience changes in judgment or decision-making. For example, they may use poor judgment when dealing with money, or pay less attention to grooming or keeping themselves clean.
What's a typical age-related change? Making a bad decision once in a while, like neglecting to change the oil in the car.

9. WITHDRAWAL FROM WORK OR SOCIAL ACTIVITIES. A person living with Alzheimer's may experience changes in the ability to hold or follow a conversation. As a result, he or she may withdraw from hobbies, social activities or other engagements. They may have trouble keeping up with a favorite team or activity.
What's a typical age-related change? Sometimes feeling uninterested in family or social obligations.

10. CHANGES IN MOOD AND PERSONALITY. Individuals living with Alzheimer's may experience mood and personality changes. They may be easily upset at home, at work, with friends or when out of their comfort zone.
What's a typical age-related change? Developing very specific ways of doing things and becoming irritable when a routine is disrupted.

WHAT'S NEXT?

If you're concerned that you or someone you know is displaying any of these signs, take action:

Talk to someone you trust. It can be helpful to confide in a friend or family member. For tips on how to have a conversation, visit [alz.org/memoryconcerns](https://www.alz.org/memoryconcerns).

See a doctor. Get a full medical evaluation to determine if it's Alzheimer's or something else. Early diagnosis gives you a chance to plan for the future, access support services and explore medication that may address some symptoms for a time. Visit [alz.org/evaluatememory](https://www.alz.org/evaluatememory) to learn what an evaluation may include.

Get support and information. Call the **Alzheimer's Association 24/7 Helpline (800.272.3900)** or visit [alz.org/10signs](https://www.alz.org/10signs).

Note: This list is for information only and not a substitute for a consultation with a qualified medical professional.

This is an official publication of the Alzheimer's Association but may be distributed freely and without charge by unaffiliated organizations or individuals. Such distribution does not constitute an endorsement of these parties or their activities by the Alzheimer's Association.

Green Lake County Memory Cafes

A Memory Cafè is a safe, nonjudgmental, and comfortable space where caregivers and their loved ones can socialize, listen to music, play games, and enjoy other appropriate activities. It is not a place to “drop off” your loved one for a while, but a way to enjoy activities with them as a break from the normal routine that you share. Memory Cafès provide mutual support and allows for the exchange of information, which is valuable if for nothing more than to obtain information about additional resources. A Memory Cafè is meant to make connections with those who are being challenged in a similar manner as you and your loved one.

Join us for a few hours of fun, socialization, reminiscing, and refreshments at our Memory Cafe.

**** Starting Thursday, April 17 ****

Every third Thursday of each month from 10:00–11:30am

Town Square Community Center

492 Hill St, Green Lake

Handicap accessible entry through entrance off Water St.

To register, contact Lisa Zimmerman,

Dementia Care Specialist, at

920-294-4070 or

lzimmerman@greenlakecountywi.gov



GREEN LAKE COUNTY

DEPARTMENT OF HEALTH & HUMAN SERVICES

Health & Human Services
571 County Road A

Green Lake, WI 54941-8630

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2025 Rates

**Updated on 7/14/2025

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

BEHAVIORAL HEALTH CHARGES

Psychiatrist	Hourly	\$250.00
Intake/Assessment 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
Court Ordered 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

PUBLIC HEALTH CHARGES

Capillary Blood Lead Testing Fee	\$5.00
DPP Employer/Private Pay Fee	\$500.00

MEDICAL RECORD COPIES (Effective 7/1/2025 – 6/30/2026)

First 25 pages	per page	\$1.35
Pages 26 to 50	per page	\$1.01
Pages 51 to 100	per page	\$0.66
Pages 101 and above	per page	\$0.39

June DHHS Expenditure/Revenue Comparison - June 2025				
Expenditures			Revenues	
Admin				
Total Budget:	\$	731,587.46	\$	705,057.20
YTD Expenses	\$	310,961.89	YTD Revenues	\$ 665,694.20
% YTD Expenses		43%	% YTD Revenues	94%
% Should Be:		50%	% Should Be:	50%
Health				
Total Budget:	\$	505,396.12	\$	504,752.12
YTD Expenses	\$	255,523.77	YTD Revenues	\$ 309,970.52
% YTD Expenses		51%	% YTD Revenues	61%
% Should Be:		50%	% Should Be:	50%
Children & Families				
Total Budget:	\$	1,718,757.00	\$	1,698,757.00
YTD Expenses	\$	653,810.74	YTD Revenues	\$ 718,377.21
% YTD Expenses		38%	% YTD Revenues	42%
% Should Be:		50%	% Should Be:	50%
Economic Support				
Total Budget:	\$	9,141,964.88		9141964.88
YTD Expenses	\$	4,089,035.61	YTD Revenues	\$ 2,718,986.19
% YTD Expenses		45%	% YTD Revenues	336%
% Should Be:		50%	% Should Be:	50%
FRI				
Total Budget:	\$	1,498,659.84	\$	1,498,659.84
YTD Expenses	\$	706,135.86	YTD Revenues	\$ 540,204.29
% YTD Expenses		47%	% YTD Revenues	36%
% Should Be:		50%	% Should Be:	50%
Behavioral Health				
Total Budget:	\$	2,364,860.80	\$	2,364,860.80
YTD Expenses	\$	898,731.28	YTD Revenues	\$ 1,011,272.05
% YTD Expenses		38%	% YTD Revenues	43%
% Should Be:		50%	% Should Be:	50%
Child Support				
Total Budget:	\$	290,357.91	\$	290,357.91
YTD Expenses	\$	69,832.83	YTD Revenues	\$ 53,870.76
% YTD Expenses		24%	% YTD Revenues	19%
% Should Be:		50%	% Should Be:	50%
Aging				
Total Budget:	\$	1,260,809.28	\$	1,246,529.28
YTD Expenses	\$	676,365.87	YTD Revenues	\$ 641,962.28
% YTD Expenses		54%	% YTD Revenues	51%
% Should Be:		50%	% Should Be:	50%
Total DHHS				
Total Budget:	\$	17,512,393.29	\$	17,450,939.03
YTD Expenses	\$	7,660,397.85	YTD Revenues	\$ 6,660,337.50
% YTD Expenses		44%	% YTD Revenues	38%
% Should Be:		50%	% Should Be:	50%

GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

**571 County Road A
Green Lake WI 54941**

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FOX RIVER INDUSTRIES

222 Leffert St.

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

Public Health Update:

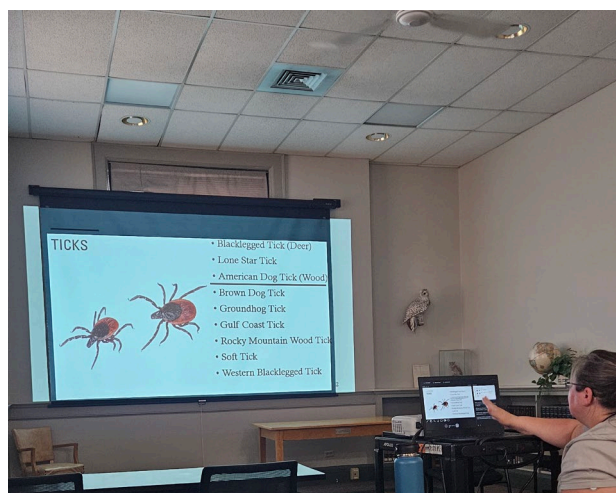
- Completed annual Vaccines For Children (VFC) re-enrollment to be able to continue to offer vaccines to children on Badgercare or without health insurance.
- Rachel and Lauren meet with Eileen from Conduent HCI on May 5th to finalize the CHIP year one summary report and year two workplan.
- Lauren and Rachel met with new WIC Director, Rebecca Schneider, from Noble Community Clinics on May 5th to discuss current workflow and partnership.
- Nancy attended the 2025 WI Cancer Collaborative Regional meeting on May 6th in Green Bay. The regional meeting offers an opportunity to connect with others doing cancer prevention and control work in our region and throughout the state.
- Held 2 scheduled vaccination clinics at Care 4 U clinic on May 6th and May 13th, promoting MMR and Tdap/Dtap vaccines for our Plain Community Members. Unfortunately, we did not have anyone show up to either clinic that was held. Flyers promoting the clinics, and importance of vaccinating, were mailed out to all Amish families in Green Lake County.
- Rachel and Lauren attended the Central WI Health Partnership (CWHP) meeting in Montello on May 7th. This partnership, through strategic planning, have decided to focus efforts on substance use prevention and peer support/recovery services.
- Rachel attended the Northeast Region WI Association of Local Health Departments and Boards (WALHDAB) on May 8th, along with Health Advisory Board member, Terri Mauel. Overview on HHS boards' roles and responsibilities provided by WALHDAB.
- Green Lake County United for Prevention Coalition updates:
 - Currently we have a workgroup to help guide the design of a coalition logo. Also has a workgroup to help guide the activities of the SOR funding workplan. One major activity being a "What we say matters" training when it comes to substance use and mental health. This will be available for community members. More information to come! The whole coalition is continuing to collect data in the form of one-on-one conversations with community members around the topic of youth substance use.
- Allison attended the School Safety Bootcamp training on May 8th. This training is the standard response protocol for K-12 schools. Train the trainer on Hold, Secure, Lockdown, Evacuate, Shelter. Alice training is being phased out and this is the standard now. Training provided on procedures for emergencies in schools, when to use to them, how to move from one of them to another. How to teach staff and students on how to use the procedures and how they keep themselves and kids safe. The

training also including information on the reunification procedure. After evacuation, the training went through the procedure of setting up a reunification center and the process of vetting parents and guardians to make sure kids are being picked up by the correct person. And also, how to handle notifying family members of an injured student/staff.

- Each year, ADVOCAP recognizes individuals and organizations that go above and beyond to support their programs and participants. Nancy Gimenez and Lauren Olson were nominated, on behalf of the team from the Green Lake County Health Department for the Community Award. Their work, particularly with the Prairie View Garden project, the support and funding associated with the garden, and restarting child lead testing at the center, is helping to remove barriers to good health for the children and families at Prairie View Head Start Center. ADVOCAP's annual meeting was held on May 8th at the Oshkosh Waterfront Hotel and Convention Center where all their awards were presented.



- Rachel attended the Community Health Action Team (CHAT) meeting on May 12th. Overview of recent CHAT retreat given with next steps in developing a curriculum for schools on youth mental health and social media reviewed.
- Allison presented at Berlin Public Library on May 13th at 5pm on Lyme Disease.



- Rachel and Lauren attended the Prevent Suicide Conference (virtually) on May 14th-16th. The conference featured content related to crisis intervention, healthcare and behavioral health providers, the education system, coalition development, lived experience, peer support, and more.
- Green Lake County staff recognized Mental Health Awareness month by wearing green on May 14th. We raise awareness to break the stigma, spark conversations, and take action to prioritize mental health and well-being for ourselves and our communities.



- Allison attended the Immunization Conference in Madison on May 14th and 15th. The conference focused on boosting vaccination confidence in uncertain times.
- Nancy attended the Healthy Aging Summit in Stevens Point on May 15th. The conference brought together professionals, volunteers, older adults, and community leaders to explore innovative approaches to aging well.
- Lauren and Lisa attended the Northeast/South Alliance for WI Youth regional meeting on May 16th in Fond du Lac. 23 coalitions presented at the Alliance for WI youth regional meeting. Each coalition presented on what they did with the Coalition Dollars for Development funding (CDD). Funding is to be used to build coalition capacity or to implement strategies to reduce community substance misuse, specifically this year, was around developing a logic model. This logic model helps to identify a problem, root cause, specific local conditions, and then strategies to address it. GLC United for Prevention chose underage drinking as their problem.



- Allison led a Measles tabletop exercise with Care 4 U clinic staff and board members, along with PH partners from Columbia and Marquette counties on May 19th at the Kingston Town Hall.



- Allison attended the Public Health Preparedness Coordinators meeting and the Fox Valley- Healthcare Emergency Readiness (HERC) member meeting on May 20th in Appleton at the Public Safety Training Center.
- GLC United for Prevention coalition meeting held on May 20th. Discussed data results of “100 Cups of Coffee”, Workgroup (logo and SOR funding) updates, and coalition leadership and structure.
- Collected water samples from 2 properties adjacent to land that will be irrigated with treated wastewater beginning in 2026 by the Green Lake Sanitary District. Samples were taken up to UW Stevens Point for analysis.
- Lisa and Lauren attended session 4 of the Alliance for WI Youth Prevention Bootcamp on May 28th.
- Health Unit staff met with Terrace Shores staff to continue planning for Community Day and Sports Camp to be held on July 17th at Princeton School on May 29th.
- DPP Update
 - Close to starting another cohort (#9), location TBD. We are still looking for a few more participants before we start.
 - We continue to look for an employer to partner with to provide the program to employees and their families. Recently reached out to Flash Trucking, awaiting their response.
 - Working on the state grant for 2025-2026, for \$25,000, but uncertain if this grant will be able to be funded through the CDC (is at risk of being cut).

Respectfully submitted,

Rachel Prellwitz, Health Officer

Behavioral Health Unit— June 2025 (May Data)

This month, our programs worked with the IT Dept to complete a Security Risk Assessment in compliance with HIPAA requirements. This assessment offers strategies to ensure that the technology our clinicians use for client communication and medical records is protected against cybersecurity risks.

Additionally, we currently receive grants for both Crisis Enhancement and State Opioid Response (SOR):

- 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, 4 stabilization stays (& transportation needed to facilitate these referrals) were funded with this grant. This grant ends in July 2025.
- 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 4 clients and uninsured inpatient costs for 1 client, and peer support for 2 clients. We have a site visit for this grant in August and are awaiting approval for our budget for year 2 of this grant.

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

Month at a Glance (April data)

<i>New Outpatient Therapy Intakes</i>	<i>10</i>
<i>New Psychiatry Admissions</i>	<i>2</i>
<i>IDP Assessments Completed</i>	<i>5</i>

Therapists continue to see high caseload volume, however wait list time for admission has remained under 30 days for the past 5 months. Structural changes in crisis have freed up therapists' time for direct therapy services. A robust internship program has also helped to ease caseloads.

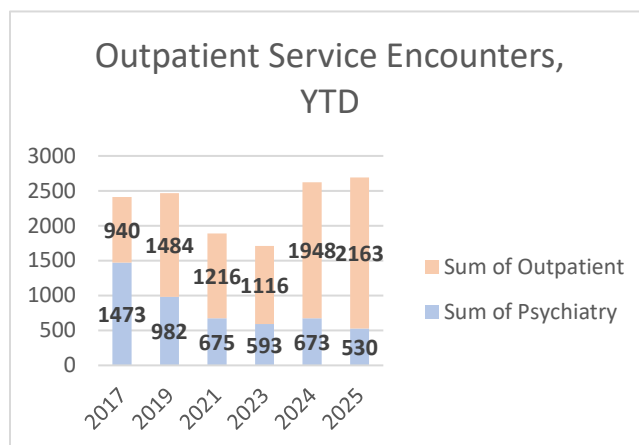


Figure 1: There was a decline in psychiatric services in 2020, following Dr. Baldomero's retirement. Dr. Baldomero provided psychiatric services for children, and we no longer have a provider who sees children. Adult psychiatric services have remained steady.

1. **Intoxicated Driver Program (IDP):** Our agency serves as an assessor facility for state-mandated IDP assessments. Individuals are either referred to traffic safety school or treatment.
 - a. This month, we provided assessments to **5** drivers.
 - b. Individuals who receive a court order for an IDP are given 30 days to complete the assessment. We currently have no waitlist for an IDP.

2. **School-based offices:** BHU has school-based offices in 3 school districts in the county to increase youth access to therapy, decrease missed school for appointments, and reduce barriers such as transportation/ missed work for parents. These offices also improve collaboration with school professionals. *These offices continue to operate at full capacity, with a waitlist for school-based services. Waitlisted students are offered services at the main office, but many are not able to utilize this due to the barriers listed above. At the Markesan site, we have more students in the elementary site transitioning to MS/HS than we have open spots at the MS/HS therapy office, so we are working on a way to remedy this for next school year. We have had requests for additional school-based service hours from two school offices as well as increased mental health consultation for Head Start sites, and a request for an additional school-based office at Princeton School.*

OUTPATIENT PROGRAM GOALS:

- Increase use of the patient portal feature of EHR
- Increase availability of evidence-based therapy models for county residents
- Decrease wait time for intakes and first follow up visit to 14 days or less
- Reduce missed visit rate to 20% or less, and no-show rate to 6% or less

Wrap-around Program Goals

- Increase program capacity for serving substance use/ dual diagnosis clients
- Improve group skill development and social engagement opportunities within Community Support Program
- Meet admission timeline requirements for CLTS programming as caseload continues to grow

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.*

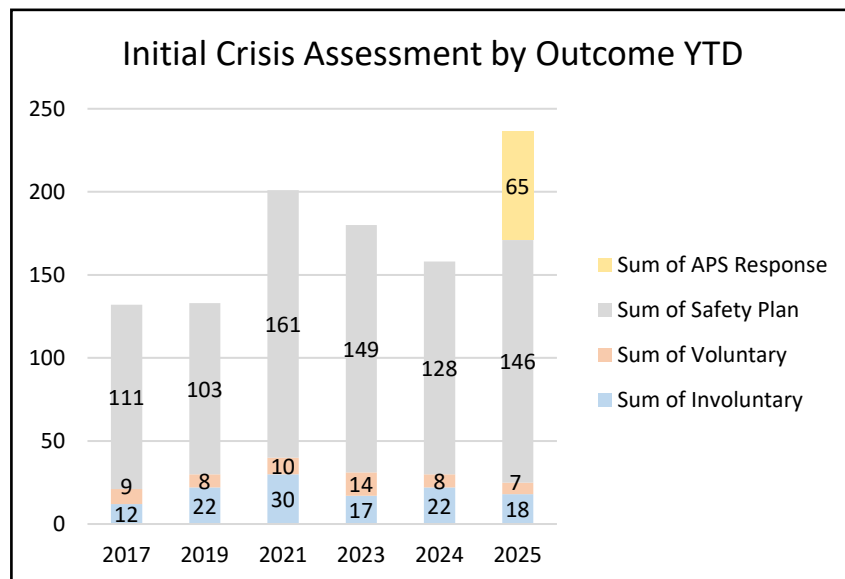
2. **Comprehensive Community Services (CCS)**— *Recovery-focused support for clients who may benefit from an intensive level of services for a shorter period of time. This program presently serves 33 individuals.*

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 22 adults.*

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 CLTS waitlist over the next 3 years. Starting in 2021, when an eligible youth is screened for services, the waiver program must open their case within 30 days. Our current program census is at 74 youth and continuing to grow.*

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

Crisis call volumes have increased over the past 5 years, a more dramatic increase this year, due to the addition of Adult Protective Services (APS) responsibilities. APS calls have now been added to monthly data that will be reported going forward. The data represent new crisis calls each month. The crisis team provides additional follow up to most contacts. This may include case management, supportive counseling, service linkage/ referral, discharge planning, court work (including civil commitment and/or guardianship), or APS investigation.



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.

Zero Suicide Initiative: Zero Suicide is a collaborative team approach to reducing fatalities due to suicide by focusing on the entire system, not just individuals who have already entered crisis services. Our team meets monthly, and sometimes jointly with teams in Waushara and Marquette counties. Accomplishments include annual awareness campaigns, QPR training, and implementation of caring contact cards sent to crisis service recipients. The team is reviewing processes for early identification, as we identify that almost all deaths by suicide and near-lethal attempts involved individuals who had no contact with crisis or DHHS prior to attempting suicide. *This month, the team kicked off the county-wide workforce survey which invites employees to share their knowledge and training needs regarding how they might respond if they encountered a person considering suicide.*

Housing Subcommittee: In Spring 2024, BHU initiated a community partnership engaging a variety of professionals as well as interested community members on the subject of homelessness and housing insecurity in Green Lake County. This began after a number of contacts to our crisis line that involved primary need being housing. The now operates as a subcommittee of the WinnebagoLand Housing Coalition with an immediate, short term focus to increase awareness and understanding of the unique issues around homelessness/ housing issues in rural communities. The group meets monthly. Accomplishments include awareness efforts such as a large town-hall style event and follow up community conversation.

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 has adopted the I-Team model, and going forward will continue to meet monthly with a focus on awareness and reduction of elder abuse. Presently, the group is focusing on broadening membership and shared understanding of existing systems.

CRISIS PROGRAM GOALS:

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

July 2025

Economic Support Unit Quarterly Report

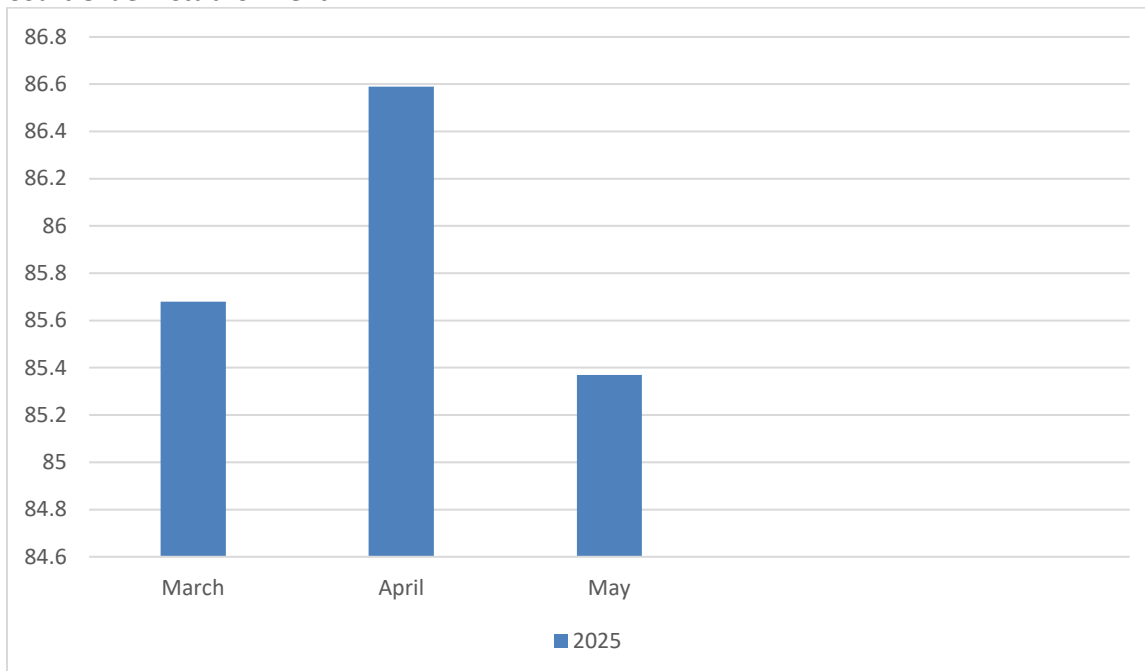
	Number of Active Cases	Applications Processed	Renewals Processed	Six Month Report Form Processed	Number of calls received in the Call Center
March	2,397	116	124	42	13,077
April	2,396	113	98	33	13,041
May	2,360	113	105	48	12,535

Child Support Unit Quarterly Report

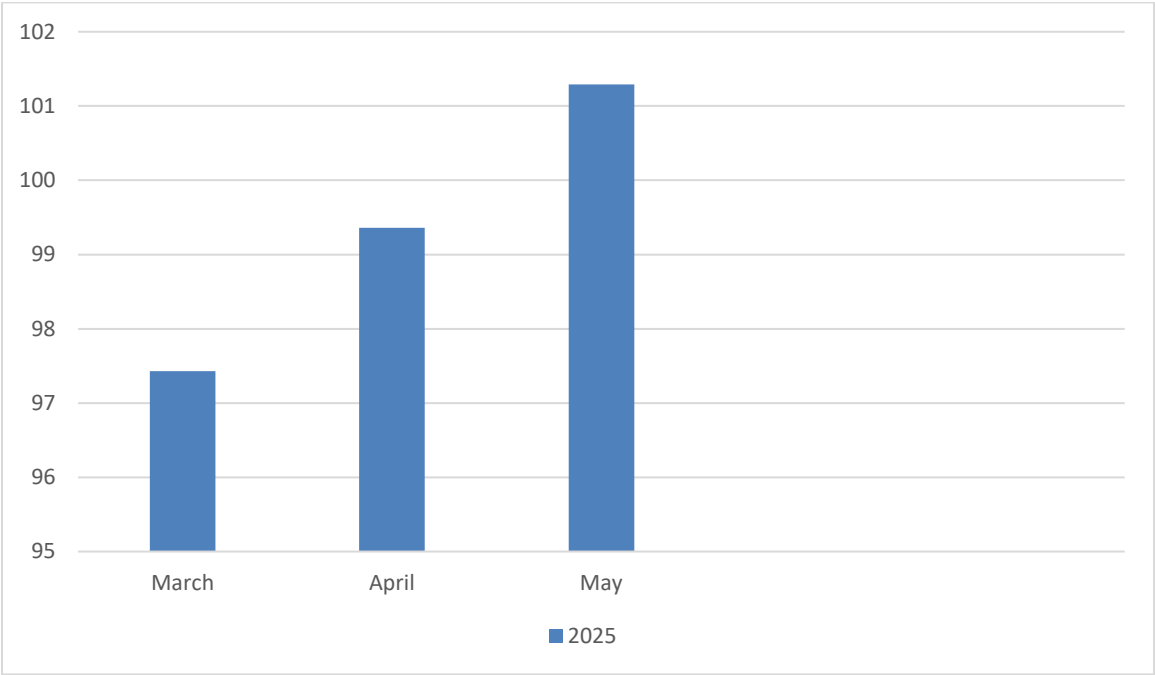
The current caseload for Child Support is 873. Up 1.1% from last quarter.

Performance Comparison by Month

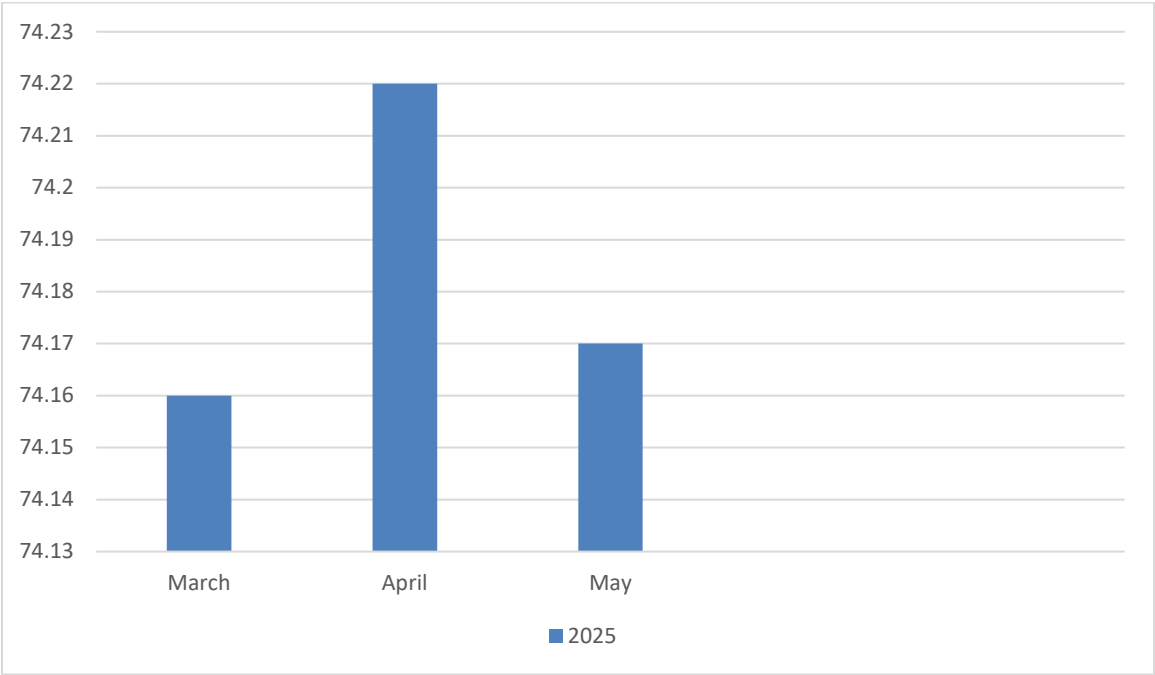
Court Order Establishment



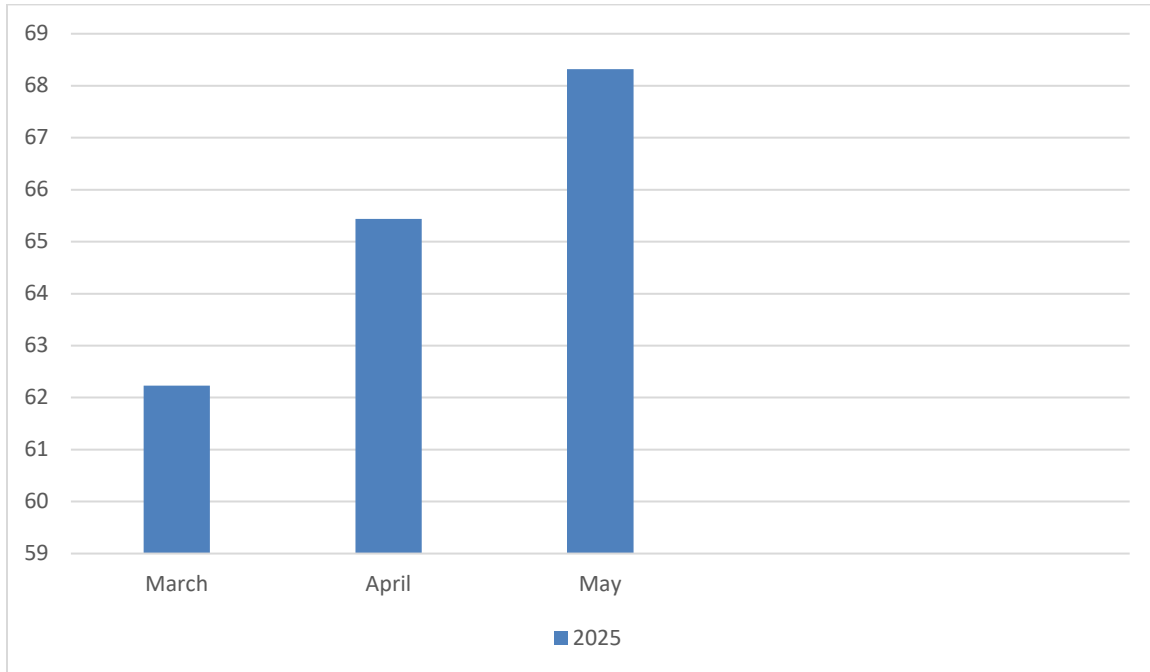
Paternity



Current Support



Arrears Collection



Shelby Jensen
Green Lake County DHHS
Economic & Child Support Unit Manager

HEALTH AND HUMAN SERVICE BOARD OF DIRECTORS MEETING UNIT UPDATE



Fox River
Industries

Fostering Relationships for Independence

HHS July 2025 Board Meeting

May 2025 Unit Update

GREEN LAKE PROGRAM UPDATES

05/2025 Program Data

<u>Census as of LAST day of Month</u>	Full time	Part time	TOTAL	Wait List	DVR/SE/CIE	Percent Prevoc in DVR/SE/CIE	Days of Service per Week	Notes
FACILITY BASED PREVOCAIONAL	8	31	39	3	12	31%	116	
COMMUNITY BASED PREVOCAIONAL		14	14	0	5	36%	26	CBPV Enrollees; does not include FBPV in community
Additional CBPV (Contracted Services/Mealsite)							18	
VOCATIONAL SERVICES TOTALS			53		17	38%	160	
SUPPORTED EMPLOYMENT	LTC: 20	DVR: 14	34	Hires: 0	Job Losses: 0			
DAY SERVICE	2	17	19	12			40	
REPRESENTATIVE PAYEE	Self Pay 20	Managed Care 60	Total 80	Changes	DEATH	DISENROLLED	LOST BENEFITS	NEW REFERRAL 2

- Exploring credential requirements for transportation services beyond our fixed route with MyChoice WI.
- Met with Berlin High School about their needs in regard to transition age youth.

OTHER UPDATES

- **Disability Services, Inc.**
- **Fox River Industries, Inc.**
Cross Roads Brat Barn Fundraiser on May 23rd – Raised \$695.00