

SHEBOYGAN COUNTY

Ann M. Wondergem
Health and Human Services Director

February 23, 2009

TO: The Honorable Members of the Sheboygan County Board of Supervisors,
Mr. Michael Vandersteen, Chair and Mr. Adam Payne, County Administrator

On behalf of the Health and Human Services Committee and staff of the Department, we are pleased to submit the 2008 Annual Report. As you review the annual report, you will note the goals achieved in 2008 and new challenges that were addressed by the Department. This was only possible through the dedicated work of knowledgeable and capable staff. We also appreciate the dedication of the agencies, organizations, and individuals we contract with to provide services.

As we reflect back on 2008 and look forward to 2009, the focus continues to be on prevention, protection and support to assist individuals and families achieve health, well-being, self-sufficiency and safety. In planning for the future, there are some emerging trends that will have significant impacts on the service delivery system. A few of these major trends include:

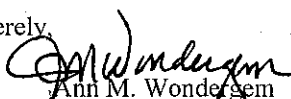
- Regionalization of programs and services including Family Care, Wisconsin Works, and Job Centers. Sheboygan County for years has participated in a number of county initiated regional projects including the Family Partnership Initiative for children and families, the regional crisis grant, the Lakeshore Wisconsin Works consortium, Falls Prevention, and the Northeast Wisconsin Training Partnership.
- An increasing need for bilingual services as more and more county residents speak Spanish, Hmong, and more recent refugees speak Burmese. Over the past 10 years, the Department has and continues to recruit staff members who are bilingual and culturally competent.
- State and Federal funding sources continue to change at a fast pace and will continue to do so with the current economic crisis. In order to keep programs and services operating effectively and efficiently, we need to spend more and more administrative time learning and implementing changes to assist us in obtaining these new revenue sources. We also need to implement new information systems that provide the support to monitor funding sources, program requirements, and outcomes.

The current economic crisis is creating an increasing demand for services.

- Economic Support has seen a 34% increase in FoodShare cases from 2008 to 2009. The overall caseload for Economic Support is up 700 cases (equivalent to a full caseload for 2 Full Time Economic Support Specialist positions). In order to meet the increasing demand for services staff are working overtime including some Saturdays. Given the current economic situation, we do not project that the workload/caseload will decrease in the near future.
- Numbers of children and families in need of services is increasing. In 2008, there were 1,286 referrals for child maltreatment, which is a 1.9% increase over 2007. Of these referrals, 7.04% more were assigned for investigation (623 for the year, involving 926 children). In Juvenile Justice, there were 992 referrals, which is a 7.47% increase from 2007. Of that number, 544 were seen by Juvenile Court Intake, which is a 24.2% increase.
- In Public Health, the number of families participating in the Women, Infant and Children program increased from 15,055 in 2007 to 15,885 in 2008. This is an increase of 830 families, or 6%. Public Health also experienced a significant increase in TB related cases.
- Due to the increased demand for mental health and substance abuse treatment, a wait list has been established for the Outpatient Clinic services. Previously, staff would triage referrals and schedule appointments out into the future. Staff continues to schedule appointments for hospital discharge, but have established a waitlist for community referrals.

Thank you for supporting Health and Human Services programs and services during 2008. We look forward to working with you during 2009.

Sincerely,


Ann M. Wondergem
Director


Marty Bonk
Manager


Dale Hippensteel
Manager


Joan Ketterman
Manager


Liz Mahloch
Manager

Telephone (920)-459-6400
or 1-(800)-596-1919
Facsimile (920) 459-4353
TTD (920) 459-3258

Health and Human Services Building
1011 North 8th Street
Sheboygan, WI 53081

humsvr@co.sheboygan.wi.us
www.co.sheboygan.wi.us

Sheboygan County Health and Human Services Department
2008 Annual Report
(Division of Community Programs and Elder Services, Division of Economic Support/Wisconsin Works,
Division of Public Health and Division of Social Services)

Mission Statement and Summary of Responsibilities

“Improve the quality of life and self-sufficiency of Sheboygan County residents.”

- Focus on the needs of individuals and families
- Treat others fairly and with respect
- Value diversity
- Demonstrate integrity and commitment in all actions
- Encourage collaboration throughout the Department and with external partners
- Recognize the importance of individuals and families in the assessment of need and plan for the delivery of services
- Provide and purchase services in the most appropriate, inclusive, and integrated manner possible
- Manage public resources responsibly

Within the Department, the four Divisions supported by the Clerical and Accounting Support Units, strive to meet the multitude of state and federally mandated purposes and provide an effective service delivery system.

- The **Division of Community Programs and Elder Services (DCP)** plans, promotes, and delivers services and programs to improve the quality of life and self-sufficiency of older adults and individuals with disabilities who are residents of Sheboygan County. The Division administers and provides oversight for state and federal programs that offer an array of services including Birth to Three, nutrition, transportation, information and assistance, mental health and substance abuse outpatient, crisis, adult protective services, inpatient and residential mental health and substance abuse services, and case management. These comprehensive services enable Sheboygan County residents to receive the supports they need to reside and participate in their community.
- The **Division of Economic Support/Wisconsin Works (W2) (DES)** provides eligibility and benefit determination and case management services to low-income individuals and families of all ages for financial assistance and employment and training programs. The primary programs administered by the Division are Medical Assistance, FoodShare Wisconsin (formerly Food Stamps), Wisconsin Home Energy Assistance, Wisconsin Shares (Child Care), Wisconsin Works, and Sheboygan County Works. These programs have varying eligibility guidelines, which are governed by Federal, State, and County regulations. Intake, assessment, program placement, case management, and benefit issuance are provided by Economic Support Specialists. Employment and training services, formal assessments, and educational resources are purchased services. These services provide a variety of supports that assist recipients to maintain or achieve their highest level of self-sufficiency.
- The **Division of Public Health (DPH)** “promotes conditions in Sheboygan County in which people can be healthy.” The Division has a wide range of statutory and community responsibilities. Communicable disease control, human hazard abatement such as methamphetamine lab contamination, childhood lead poisoning, tobacco education activities, refugee health screening, immunizations, WIC (Women, Infants, and Children) health and nutrition, facility licensing and inspections, and prenatal care coordination are examples of mandated local programming. In recent years, the Division has expanded emergency preparedness and response activities to assure rapid intervention in the event of biological, chemical, radiological, or natural disasters. This includes plan development, training, and testing of various scenarios. The need to collaborate and develop strong partnerships has never been greater and will continue.
- The **Division of Social Services (DSS)** “fosters healthy, self-reliant individuals and families through the provision and coordination of services geared toward building on individual and family strengths and meeting the family’s needs.” The Division works with families who are experiencing difficulties in the areas of child abuse or neglect and/or juvenile justice. State laws and standards of practice guide an assessment of the family’s strengths and needs, as well as ongoing services. The Division provides and purchases services to meet such needs, including local treatment programs and out-of-home placements. The primary focus of the Division is on both individual and community safety, along with permanence for children in order to lead stable and productive lives.

Goals and Objectives Achieved in 2008

Division of Community Programs and Elder Services

Division of Community Programs and Elder Services continued to meet the needs of individuals through services provided by 60 staff members, 6 Senior Aids, over 350 knowledgeable Elder Services volunteers, and 35 contract agencies. In 2008, the Division's accomplishments included:

- The successful implementation of Family Care, which will result in an entitlement to long term care services for Sheboygan County residents who are financially and functionally eligible by February 2010. In addition, 240 individuals who were on a waitlist for long term care services on November 30, 2007 have been offered services.
- The Aging and Disability Resource Center (ADRC) provided 6,711 information and assistance contacts to Sheboygan County residents and 12 community outreach presentations to assist with long term care planning. The Aging and Disability Resource Center assisted 91 elders and adults-at-risk with resolving issues of abuse or self-neglect. The Aging and Disability Resource Center also conducted outreach and information on the issue of elder and adult-at-risk abuse at the congregate senior dining sites, local financial institutions, and law enforcement agencies.
- Mental Health Crisis services (available 7 days a week 24 hours a day) responded to 4,073 contacts, with 698 of those contacts being community-based in-person assessments to determine the level of intervention needed and establishment of a safety plan.
- Development of substance abuse groups to address the needs of indigent Operating While Intoxicated (OWI) offenders to provide access to treatment.
- Initiating Recovery-Based Comprehensive Community Services with 10 consumers of mental health and/or substance abuse services.
- Providing Community Support Services (CSP) to 113 adult individuals with severe and persistent mental illness.
- Providing over 67,000 nutritious meals to adults over 60 years of age and 2,286 trips by volunteer drivers to assist individuals who are elderly or disabled attend medical appointments.
- Serving over 80 children and their families through the Children's Waiver Program and screened 316 referrals to the Birth to Three Program.

Division of Economic Support/Wisconsin Works (W-2)

The Division continued to address the needs of low-income individuals and families through services and programs provided by 26 staff. This is done in cooperation with Job Center partner agencies and Manitowoc County, our Wisconsin Works program consortium partner.

- Economic Support successfully completed the transition to Family Care. This was accomplished through working with the Department of Health and Family Services, the Aging and Disability Resource Center (ADRC), and Community Care. All former community waiver cases and additional new cases from the wait list have been certified for Family Care. Economic Support staff was stationed at the ADRC to streamline access during the transition for both customers and staff.
- Implementation of BadgerCare Plus was completed, and a much higher percentage of individuals were certified for the program than the State predicted. The Economic Support staff and customers are still working through many computer system glitches, especially in the area of BadgerCare Plus premium establishment and payment. Badger Care Plus was portrayed by the State as reducing workload issues. Based on the system glitches, the assessment of time savings has been delayed.
- The voluntary FoodShare Employment and Training Program (FSET) was implemented in cooperation with our partner agency, Manitowoc County, and our employment and training subcontractor, Arbor Education and Training. Outreach for the program was established by the end of 2008, and there has been growth in the number of individuals enrolled in the program.
- Monitoring of both the impact of policy change and performance standards within the Wisconsin Works program continues. Policy changes and economic conditions are increasing the amount of benefits issued and paid. There has been marked improvement in meeting the customer satisfaction performance standards.
- The administration of the crisis component of the Wisconsin Home Energy Assistance Program (WHEAP) was enhanced through a memorandum of understanding with Consumer Credit Counseling to provide additional counseling services to assist recipients proactively address utility payment issues.
- The Economic Support Division maintained a state FoodShare payment error rate of 0% in both active and negative cases. The Medicaid payment error rate, through the latest data available of October 2008, is .89%, well below the federal and state tolerance level of 3%.

Division of Public Health

Goals and Objectives achieved in 2008:

- Completed all objectives of the Wisconsin Department of Health Consolidated Contract.
- Completed all contractual obligations required in the State Agent Contracts for Environmental Health activities.
- Collaborated with community partners to begin implementing a strategic plan for the creation of the "Sheboygan Area Community Health Clinic."
- Completed tasks required to implement identified components of the new integrated software system (CMHC).
- Completed the activities required to pilot Wisconsin Electronic Disease Surveillance System (WEDSS), which will be fully implemented in 2009.
- Reviewed discretionary activities and developed procedures to assist clients in accessing appropriate medical resources. This resulted in more efficient use of staffing resources.
- Continued to support collaborative efforts such as the Tobacco Coalition, Safe Kids Committee, Local Emergency Planning Committee, Dental Access, Childhood Lead Prevention, and Healthy Sheboygan 2010, to name a few.
- Expanded our Public Health preparedness activities, including the creation of a Community Pandemic Advisory Committee and identifying four medical sites for distribution of anti-virals.
- Increased doses of administered vaccines from 8,444 in 2007 to 12,192 in 2008 and planned and implemented mass clinics necessary to vaccinate students who required expanded immunizations in 2008.
- Received and investigated 524 cases of communicable diseases required by law to be reported to our Department, including a number of unusual communicable diseases that were investigated in 2008, such as ehrlichiosis, babesiosis, malaria, listeriosis, and measles.
- 3 active cases of Tuberculosis were identified; 80 latent Tuberculosis cases were reported, which was 47 more than in 2007. 18 suspect cases were reported, and proper medical evaluations were completed.
- WIC (Women, Infants, and Children) Nutrition Program increased the number of families participating from 15,077 in 2007 to 15,885 in 2008. Sheboygan vendors received \$1,555,972 in revenues from WIC Healthy Food Coupons.
- A total of 14,854 clinic visits were documented in 2008 in 9 public health programs.
- Lead poisoning screens were done on 946 children and 20 homes were made lead safe in a joint effort with the City of Sheboygan.
- In collaboration with the Sheboygan Area School District and Sheboygan County Head Start, 1,812 fluoride applications and 1,716 dental sealants were applied to children.
- In a redesigned School Vision and Hearing Screening Program, 3,111 hearing screens and 7,548 vision screens were completed, resulting in 603 referrals.
- Staff completed 774 food service inspections on 12 types of facilities.
- Security documentation for food safety in 47 Sheboygan County schools was completed.
- 267 inspections were made on temporary food establishments.
- 116 pools, spas, and related facilities were inspected and monitored.
- 77 lodging and campground facilities were inspected.
- 8 tattoo facilities were inspected.
- 365 water samples from 8 Lake Michigan beaches were analyzed for water quality.
- Mandated objectives were completed, including updating various plans and completing mass clinic operation plans and local Sheboygan County Emergency Operations plans.
- Responsibilities of the Expert Pandemic Advisory Committee were identified and reviewed.
- Training and participation in emergency exercises was completed.

Division of Social Services

The Division continues to address the needs of children and families through the efforts of 39 Social Workers, 4 Social Service Aides, 1 Home Consultant, and 6 Social Work Supervisors. In addition, the Division partners with numerous community agencies providing in-home and out-of-home services. In 2008, the Division accomplishments include:

- 1286 referrals alleging child abuse or neglect were received, an increase of 1.9%. Of these 1286 referrals, 623 were assigned for an investigation and initial assessment, which is an increase of 7.04% from 2007.
- The Memorandum of Understanding (MOU) related to Child Protective Services with Law Enforcement was revised and implemented. In addition, meetings were held with officials of various law enforcement entities in Sheboygan County to review this protocol and to engage in an ongoing dialogue about our working relationships.
- At the end of December 2008, social workers in the two Child Protective Services (CPS) Ongoing Units had an average caseload of 13.4 (up from 9.5 cases in 2007).

- Terminations of Parental Rights (TPR) resulted in 11 children in Sheboygan County becoming available for adoption, which is nearly double the number of children whose parents' rights were terminated in 2007.
- During 2008, 6 new foster homes were licensed, and 22 homes were re-licensed. At the end of 2008, we had 48 licensed foster homes, compared to 49 at the end of 2007. We have 43 "regular" foster homes, 2 foster-adoption homes, and 3 licensed as relative/specific child foster homes.
- During the year, we placed 77 children in our foster homes. At the end of December, we had 38 children placed in our foster homes. 5 children were adopted by their foster parents during 2008.
- The Volunteer Coordinator continued to maintain the Department's connection with the generosity of community organizations and individuals in 2008. Over the course of 2008, 23 families and 7 children were serviced through the YMCA with reduced memberships and camp scholarships. During Easter, Thanksgiving, and Christmas, over 154 food baskets were received by families and individuals. Over 1,000 individuals received donations of food, clothing, and holiday items. Our volunteer drivers drove 15,308 miles, providing individuals with over 175 trips for various reasons. Monetary donations were used throughout the year to assist families in a variety of ways.
- Wraparound Services and Creative Resources served over 170 families. This included youth served through the Empower Program, Strength Thru Leadership Program, (Supervising Teens At Risk) STARS Program, and AmeriCorps Program, as well as mentoring, in-home therapy, tracking, and various other services.
- The Child Placement Specialist coordinated and scheduled 141 Primary Care Team meetings, serving a total of 58 families. This process has greatly benefited children in terms of harnessing family resources to achieve permanency and family cohesiveness.
- Purchased intensive in-home services were provided to 32 families through the Family Training Program and to 18 families through Parent Aide services.
- The Independent Living Skills Program, contracted through Lutheran Social Services, served 75 youth between the ages of 15 – 21 who were in foster care or court ordered Kinship Care. 39 of these were young adults between 18 – 21 who had aged out of care and continued to need help with housing, emergency supplies, education, or other forms of support.
- Education and Training Vouchers, in addition to the State Scholarships, were awarded to 2 college students in the amount of \$2,813.
- Juvenile Court Intake handled 544 of the total 992 referrals received by the agency in 2008, an increase of 24.2%. The number of total referrals was up by 7.47%. Of the total referrals, 885 (89%) were for Delinquency and 107 for Juvenile in Need of Protection and Services (JIPS) (11%). Workers already assigned to the cases in either (Sheboygan Transition through Reintegration and Involvement in Vocational Education) STRIVE or Juvenile Court Ongoing handled 417 referrals (22 less than last year). 31 referrals were forwarded to other counties for their youth arrested in Sheboygan County.
- The STRIVE workers handled 63 clients, an average monthly caseload per worker of 11. This included 50 individuals in the STRIVE program and 13 siblings, all of whom required juvenile court services during 2008 or were on social service agreements following completion of court orders. STRIVE continues to graduate students that almost certainly would not have completed their high school educations without such a program—six graduates in 2008.
- The Juvenile Court Intake Unit supervisor served as the lead person in the Division on the new agency-wide integrated software system (CMHC), and spent considerable time on this project.
- Juvenile Court Ongoing Unit caseload size continued at manageable levels (29 cases per worker). Manageable caseload size allows for more interactive and effective social work practice and contributes to meeting our goal of keeping families together instead of using costly out-of-home placement services.
- 18 juveniles (3 girls and 15 boys) were placed with the Division of Juvenile Corrections (DJC). This is 25% fewer than last year (24) and 47% less than the previous six-year average (34).
- 27 youth were placed in Residential Care Centers (RCC), 6 more than in 2007 but only 1 more than our previous 6-year average of 26. We placed 18 youth compared to 17 in 2007. Unfortunately, that is 3 more than the 6-year average (15), which represents a 17% increase. On a positive note, we ended the year with 13 kids in RCC placements, which is 2 less than our six-year average.
- 15 boys were served at Friendship House compared to 17 last year. For the first time in four years, fewer Division of Juvenile Corrections (DJC) youth were served than direct county court placements (County: 12 DJC: 3). Stellar cooperation between the professionals and families involved allowed all the boys to be served in a timely manner and no one was turned away.
- 24 children were served in Treatment Foster Homes compared to 22 in 2007 and 10 more than our six-year average (+41%). This is also 31% more than the six-year average. In recent years, we have found that highly skilled treatment foster homes are becoming more plentiful and provide excellent care for these multiple-needs children. They have shown the ability to manage and nurture children that previously required more restrictive and costly care.

- The Juvenile Restitution Program collected almost the same amount of restitution in 2008 - \$20,029 or \$211 more than in 2007. We received 166 referrals this year, 46 fewer than last year. Juveniles performed 1,988 hours of supervised work, which is only 90 hours less than last year. The Plan B – Charity Option collected \$149 in lieu of working uncompensated supervised work (\$527 less than 2007).
- The Division collected 38% of the Juvenile Supervision Fees billed to parents (2% more than 2007), which amounts to \$25,575.00.

2008 Budget – Over/Under Budget

Revenue	Budget	Actual	Variance
Property Tax	\$ 12,926,332	\$ 12,926,332	\$ -0-
State Grants	16,765,592	20,134,419	3,368,827
Licenses, Permits & Fees	240,000	252,280	12,280
Client/Client Related	4,533,314	5,430,439	897,125
Other Revenue	552,155	554,096	1,941
Total Revenue	35,017,393	39,297,566	4,280,173
Expenditures			
Personnel Related	11,763,362	11,774,466	-11,104
Purchased Services	17,552,764	20,393,399	2,840,635
Maintenance/General Operating	859,974	2,604,106	1,744,132
Employee Related Insurance	3,212,422	3,087,454	124,968
Interdepartmental	1,529,320	1,529,150	170
Other	138,000	72,000	66,000
Total Expenditures	35,055,842	39,460,575	4,404,733
Change in Fund Balance	-38,449	-163,009	124,560

Numerous changes occurred during 2008 that impacted on the Health and Human Services budget, including a delayed implementation of Family Care, cost increases in the Birth to Three program, fewer placements in the State Juvenile Correctional facilities but higher placements than budgeted in Residential Treatment Centers, an increase in TB cases requiring direct observational public health nurse oversight, and grant funds received in 2008 greater than year-end accruals. The impact on the bottom line also relates to the placement of two individuals in the State Centers for Individuals with Developmental Disability. One of the individuals was a new placement about mid-year that we were not aware of and did not budget for as part of the 2008 budget process. The other individual was to be relocated from the State Center in late 2007 so was not included in the 2008 budget. This person was first able to move to the community in November 2008. Based on this, the Department did take steps to reduce expenses where possible to mitigate this projected budget issue which was just over \$260,000.

Already in 2009, based on the current economic conditions, we are experiencing an increase in the demand for services. We are reviewing the information on the Federal Stimulus package to determine any impact on the State and, therefore, the counties. We have been in communication with the State regarding areas of concern on behalf of not only the Department and County but also on behalf of those seeking our assistance. Where possible, we have implemented wait lists for services.

Issues, Concerns or Constraints

Division of Community Programs and Elder Services

- There was increased demand for mental health and/or substance abuse treatment services in the last quarter of 2008 and continuing into 2009. Historically, 5-7 individuals would present weekly to access treatment. The number of individuals requesting mental health and/or substance abuse has increased to 20 per week. Staff resources cannot keep up with the demand, necessitating a waitlist in all areas.
- Case Management services to assist individuals with mental health needs who are currently not eligible for County services and need to access community resources has been a need identified by the Ad Hoc Committee for Behavioral Health Services.
- There is a need for child psychiatric and mental health services.

- There is a lack of stable housing options available for individuals with mental health or substance abuse needs. This impacts on their ability to manage their illness, resulting in instability and the need for higher-cost services or, at times, correctional/jail services.
- There is a continuing need to reevaluate the delivery of nutrition and transportation services to the population served by the Older Americans Act to adapt to changing demographics and changes in the state system.

Division of Economic Support/W-2

- The total caseload increased by 10.62%, or 700 cases. Since 2001, the caseload has increased by 85% or 3,800 cases. 1 Economic Support Specialist position was added to the table of organization during this period. Benefits issued were in excess of \$74.6 million dollars (with Medicaid data only available through October 2008). The concern continues to be matching staff ratios to caseload and program administrative responsibilities while maintaining compliance with state and federal quality assurance and performance standards to ensure no loss of revenue due to potential sanction.
- The current national, state, and local economic conditions are significantly impacting Economic Support service delivery. Customers are experiencing loss of employment, shortened work weeks, loss of employment benefits (health insurance), and exhaustion of unemployment compensation. They are turning in great numbers to Economic Support services to supplement whatever household income remains. We anticipate that the increase in new applications for assistance will continue through 2009 and will place an even greater strain on the service delivery system and staff resources.
- Due to economic factors and policy changes/clarifications, the Wisconsin Works Lakeshore Consortium needs to work closely with the Wisconsin Department of Children and Families to assess the allocation for Wisconsin Works benefits. Benefits being paid out to eligible Wisconsin Works program participants are likely to exceed the current Wisconsin Works allocation.

Division of Public Health

- The economic conditions, both locally and internationally, are expected to increase service requests with few additional resources.
- Shifting staff to case manage communicable diseases, particularly Tuberculosis cases, and other core public health activities.
- The actual implementation of the new integrated software system (CMHC) appears to add a significant challenge to staff due to training needs and issues like double entries.
- State budget reductions pose a serious threat to categorical programs.

Division of Social Services

- Sheboygan County continues to experience a high rate of egregious incidents in child maltreatment cases. 9 Sheboygan County egregious incidents were reported to the state during 2008. Not only are these cases difficult because of their very nature, but also because often the person responsible for the injuries is unknown. Since there is seldom an admission of guilt or witnesses willing to testify to the abusive incident, proving who abused the child becomes problematic and compromises the department's ability to protect the child from further abuse.
- Family engagement and direct time with families is critical for effective social work practice. Social workers and Supervisors frequently state that the time required for paperwork and documentation compromises the time they should be spending with families.
- The ongoing prevalence of alcohol and drug usage by juveniles and adults in Sheboygan County presents challenges for delivering both child protective and juvenile justice services.
- Juvenile gang activity in the city of Sheboygan spiked within the past six months, particularly with regard to the increase in violent assaults between rival gangs. We are working to strengthen our partnerships with local law enforcement agencies to make sure we address this problem in a coordinated manner.
- The Juvenile Court Intake Unit is challenged by a trend toward cyber-bullying and other technology-related crimes such as pornography on cell phones. Efforts need to be made to educate youth on the serious trouble they can find themselves in as a result of such activity.
- We continue to notice an increase of school use of juvenile referrals to deal with very young, difficult to manage, emotionally disturbed children (under the age of 10), in an effort to get services for families that they have been unsuccessful in getting through the mental health system or child protective services system, and for mutual sexual contact between same age peers that is not of a criminal nature.
- The state of the local, state, and national economy is likely to result in increased referrals to the Division in 2009. The stressors upon families could result in frayed emotions, shortened patience with sometimes irritating child behaviors, involvement in illegal activities to obtain income or goods, and clients who find themselves in desperate straits and believing that "the system" is not responding quickly enough to their issues. History has shown us that as the economy worsens, our workload picks up. This will place a greater demand on the service delivery system and staff resources.

Goals and Objectives for 2009

Division of Community Programs and Elder Services

- Plan for and complete the relocation of the Aging and Disability Resource Center (ADRC) to Agriculture Building.
- Incorporate the new integrated software system (CMHC) into service delivery process.
- Establish the Child and Family Resource Unit to support families as they develop self-sufficiency.
- Extend Comprehensive Community Services to children and adolescents.
- Utilize the Ad Hoc Committee for Behavioral Health Services Report in planning for service delivery and developing the 2010 budget.
- Evaluate the delivery of services through Elder Services to adapt to changing demographics and changes in the state delivery system.

Division of Economic Support/W-2

The goals listed below are designed to maximize customer satisfaction and quality outcomes.

- The economic downturn is significantly increasing the number of new requests for assistance. Continue to analyze access to services, functions assigned to staff positions, and technology to implement changes to address a workload that is in excess of our current staff resources.
- Reassign staff to different processes or functions, including scaling back the staffing located at the Aging and Disability Resource Center (ADRC) to one day per week and hiring a limited term employee for additional clerical support. Conduct an evaluation as to the effectiveness of these changes so that any recommendations resulting from the evaluation can be considered in the 2010 budget process.
- Complete the hiring process to fill the vacant Economic Support Specialist position and have that new hire complete the new worker training by September 30, 2009.
- Continue to maintain FoodShare and Medicaid payment error rates below Federal tolerance levels. Ultimate goal is 0%.
- Collaborate with the Department of Children and Families (DCF) and the Department of Health Services (DHS) in provision of distance-based new worker training to provide efficient and effective training for our new Economic Support Specialists. Sheboygan County is an independent training agency and will participate and provide feedback to the state on their new training model.
- Monitor and assess the Wisconsin Works and FoodShare Employment and Training service delivery with the change to the new contracted provider, Kaiser Group.
- Monitor and assess continuation of the Wisconsin Works Lakeshore Consortium with Manitowoc County beyond the current contract period.
- Increase average enrollment in the voluntary Food Stamp Employment and Training program by 25% in 2009.
- Continue to collaborate and integrate services with Job Center partners and community agencies in responding to the economic downturn. Participate in rapid response sessions for dislocated workers and community resource fairs.

Division of Public Health

- Meet the Consolidated Contract goals and complete required activities of the contracted categorical programs.
- Systematically review and evaluate alternate models in carrying out programs. Tools like "Value Stream Mapping" may be used.
- Continue to support and develop options for delivery of primary prevention programs in the County.
- Fully implement all available software modules from the new integrated software system (CMHC) and WEDSS (Wisconsin Electronic Disease Surveillance System).
- Have all high-level staff trained in the Wisconsin Emergency Management "E responder" software.

Division of Social Services

- Continue to provide community education to schools, law enforcement, medical personnel, and other professional groups on the problem of child abuse and neglect in Sheboygan County
- Achieve 100% compliance with the Child Protective Services Standards (CPS) and adequate documentation of activities in (Wisconsin State Automated Child Welfare Information System) e-WISACWIS to generate reports showing compliance.
- Evaluate reassignment of program responsibilities and social worker assignments throughout the Division with the advent of the Child & Family Resources Unit.
- Actively participate in the development and introduction of the Coordinated Service Team (CST) philosophy to our community partners as well as our own employees.

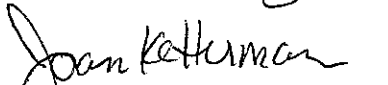
- License and maintain an adequate supply of foster homes, as well as provide regular and pertinent foster parenting training and support.
- Implement the new integrated software system (CMHC) as it pertains to juvenile justice in a manner that enhances our ability to document our work, accurately report outcomes that reflect client progress, and assess effectiveness of our juvenile justice programming.
- Engage schools and law enforcement in discussion regarding access for help with challenging behaviors, involving the new Child and Family Resource Unit if appropriate.


CLOSING:

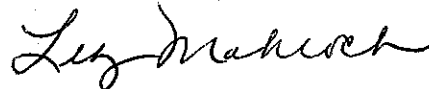
2009 will present ongoing challenges as a result of increased numbers of individuals and families seeking services, and budgeting for 2010 will present new challenges based on the current economic situation. The economic challenges will continue to impact as more individuals and families will be seeking services and assistance from the Department and there will not be an increase in financial or staff resources. There will be challenges as we are required to provide mandated services to an increasing number of residents within existing and dwindling financial resources. We are thankful for the opportunity to work with knowledgeable and dedicated staff and contract providers who take pride in delivering quality, cost-effective services to Sheboygan County residents. It has been a privilege to work with the members of the Health and Human Services Committee. It is our partnership with community agencies and organizations, with support from the Committee, that results in the effective and efficient administration of public health and human services.

Respectfully,


Ann M. Wondergem, Director


Joan Ketterman, Manager
Division of Community Programs


Dale Hippensteel, Manager
Division of Public Health


Liz Mahloch, Manager
Division of Economic Support


Marty Bonk, Manager
Division of Social Services

SHEBOYGAN COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT

Organizational Chart
4/27/2009

