## Table of Contents

2018 Child Support Annual Report ................................................................. 2
2018 Economic Support Annual Report .......................................................... 4
2018 Adult Protective Services Annual Report ............................................... 5
2018 Behavioral Health Unit Annual Report ................................................ 6
2018 Children, Youth, and Families Unit Annual Report ................................. 11
2018 Community Support Program Annual Report ....................................... 14
2018 Support Services Annual Report ........................................................... 15

## Introduction

Welcome to the Department of Human Services! It is an honor and privilege to serve the fine citizens of Juneau County.

There is no calling nobler than assisting and empowering families, children, the poor, the elderly, the disabled, and those in recovery from mental health and alcohol/drug diagnoses. I’ve been particularly impressed with the level of dedication and compassion with which our staff fulfill this calling every day.

We couldn’t do our job without the help and support of many others. Special thanks to my fellow Department Heads and staff, who make it a pleasure to work in Juneau County. Special thanks also to our supportive, knowledgeable, and wonderful Human Services Board:

### County Board Members
- Mike Kelley, Chair
- Tim Cottingham, Vice Chair
- Joe Lally
- Orville Robinson

### Community Members
- Carl Wildes
- Carrie Buss
- Peg Saylor

Please enjoy the following 2018 information and please feel free to reach out at any time with questions, concerns, or any Human Services related discussions. Thank you for the opportunity to serve you.

Sincerely,

Dawn Buchholz, MSSW CISW
Director of Juneau County Department of Human Services
The child support agency serves families that are on public assistance such as W-2, Badger Care, Child Care, Foster care, Kinship Care, and Food Share by referral from the Economic Support Unit to the Children, Youth and Families Unit. We also serve families that are not on assistance who have a divorce or maintenance case and others who visit our agency and are in need of services such as child support establishment, paternity establishment, location assistance, income withholding, and contempt collection services.

In 2018, the Juneau County Child Support Unit collected over $17 million dollars. This unit continued to perform in the top tier of the State in collections, paternity establishment and court orders established.

The child support staff has continued to present our “What’s the Rush” PowerPoint for the Mauston students and staff and the program is very well received. The students find it interesting and ask many great questions.

Previously, we only accepted checks and money orders at our agency if payers wanted to make child support payments. In January of 2016, we began accepting cash payments. This was done in an effort to increase our performance and for the convenience of our customers. In 2018, our total cash collections were approximately $60,530.34. In mid-September of 2017, we decided to accept credit cards at our agency for both customer convenience and performance improvement. In 2018, our collections from credit cards was $28,541.50. Also in 2018, our agency sent postcards, hot pink in color, to many child support payers to let them know that we are accepting credit and debit cards, cash and money orders at our agency.

Our agency also collaborates with Workforce Connections and Forward Service Corporation. Referrals are made by workers, to staff in these agencies, for non-custodial parents that are seeking employment. Both agencies help non-custodial parents find employment and provide many other program benefits.
Child support is funded based on performance. The graph above shows three out of the four Federal performance standards: current support, paternity and establishment of child support. As you can see, they all are near or above the eightieth percentile.

The above graph shows the total case load for Juneau County Child Support for 2017 and 2018. This amount continues to grow which, in turn, increases the caseload per case worker. As of December 2018, this unit had a caseload of approximately 2,054 IV-D (i.e. active, open) cases and 375 Non-IV-D (i.e. maintenance, pending) cases. Each specialist carries a caseload of approximately 685.
The unit continues to attend the required training provided by the State of Wisconsin, which is essential in keeping abreast of new policies to assist our families in collecting their child support and to meet performance standards to receive the highest level of incentive monies for Juneau County.

2018 Economic Support Annual Report

Bill Blank, Manager

Economic Support Specialists
  Diana Wood, Lead Worker
  April Lee
  Kelly Coughlin
  Rachel Mehne
  Amy Stuettgen (transferred from Support Staff)

The Economic Support Unit currently consists of the manager, a lead worker, and 4 caseload carrying workers and we continue to administer the Medicaid, FoodShare, and Wisconsin Shares Child Care programs as a partner agency in the Capital Consortium with Dane, Sauk, Columbia, Richland, Adams, Dodge and Sheboygan Counties.

Each worker spends a high percentage of their time on the call/change center and the rest of their time is dedicated to caseload management. The consortium levels the caseloads across all of the workers in the consortium and splits them into family related and elderly, blind & disabled (EBD) cases.

In 2018 our unit served a monthly average of 4300 Juneau County Medical Assistance program recipients, 2998 in family categories and 1302 in elderly, blind and disabled categories. Additionally, a monthly average of 3639 Juneau County residents received FoodShare in 2018.

The clerical unit continues to be a highly valued asset to the Economic Support unit for receptionist duties and the scanning and indexing of all client documents into the electronic case file (ECF). Their continued assistance will always be greatly appreciated.

Kelly Coughlin received the Excellence in Economic Support Award at the annual Wisconsin Social Services Association (WSSA) conference. This award honors outstanding efforts of an individual who has made a unique contribution to the field of Human Services in any of the Income Maintenance/Economic Support professions. This award shows WSSA's appreciation to an individual who demonstrated outstanding performance in executing the many complex policies and programs. Kelly has shown a professional attitude toward clients and co-workers, plus cooperation with other agencies involved in serving their clients. She received a plaque and special recognition at the WSSA Annual Conference awards banquet in June 2018.

The unit saw turnover in 2018 when Kay Willard retired from her position as Economic Support Lead Worker in July. Diana Wood was promoted to the lead worker position which in turn
opened up a position for an Economic Support Specialist. Amy Stuettgen was hired from within our agency and started in the position of Economic Support Specialist as of October 1, 2018.

**2018 Adult Protective Services Annual Report**

Supervised by: Scott Ethun, Director

**Adult Protective Services Workers:**
- Ann June (transferred to Aging and Disability Resource Center)
- Christine Brueggeman
- Jolene Marquart
- Michelle Lee (transferred to Children, Youth, and Families)

The Adult Protective Service team works in collaboration and have positive working relationships with multiple agencies such as:

- Juneau County Corporation Counsel’s Office
- Juneau County Sheriff’s Department and local Police Departments
- Juneau County Aging and Disability Resources
- Inclusa (Family Care Managed Care Organization)
- Care Wisconsin (Family Care, Managed Care Organization)
- IRIS
- Financial institutions in the area as well as throughout WI and other states
- Mile Bluff Medical Center
- Juneau County Programs: Community Support Program, Outpatient Mental Health, Economic Support, Veteran’s Office
- Wisconsin Veterans Hospitals
- Area Home Health Agencies
- Local and out of county law offices
- Central Wisconsin Community Action Council
- Local and out of county nursing homes, adult family homes, assisted living and group homes
- Social Security Administration
- Vernon Area Rehabilitation Center (VARC) and Handishop Programs
- Medical Centers in Madison, Lacrosse and Marshfield
- Law Enforcement Agencies from other counties within the state

This unit completes adult guardianship studies and reports for the Juneau County Circuit Court. Juneau County residents who meet financial eligibility and are in need of an adult guardianship have their situations reviewed by one of our Adult Protective Service workers. Specifically, they are looking to determine whether the person is competent or may be in need of a court appointed guardian as well as protective placement. Information is gathered by this unit from the individual, family members and collaterals. The assigned workers seek out evaluations from medical doctors, psychiatrists and/or psychologists to be sure the individual meets the criteria to be determined incompetent based on Wisconsin Statute. In some cases, there may be a
recommendation for a person to be protectively placed. These cases require an annual protective placement review to the court. The reports completed by the workers update the court on the appropriateness of the placement and ensure the individual is living in the least restrictive/most integrated place possible.

Over the last few years, there has been an increase in annual WATTs Review Hearings. In 2016 there were 71, 2017 there were 93, and in 2018 there were 99. Also in 2018, the APS team conducted 52 Elder Abuse investigations and 36 Adults at Risk investigations for a total of 88 investigations completed.

2018 Behavioral Health Unit Annual Report

JoAnn Geiger, LPC; Behavioral Health and Clinic Manager
Danielle Moore, LPC; Behavioral Health and Clinic Supervisor

Day Time Crisis Worker/Chapter 51 Coordinator
Natasha Jones, BS

Outpatient Therapists
Christina McCassey, LPC
Staci Glynn LPC, SAC-IT

Behavioral Health and Clinic Nurse
Lisa “Ruthie” Gregar, RN

AODA Counselors
Lynne Jindrick, SAC
Chuck Lipford, SAC (retired 3/2/18)

Dual Diagnosis Therapist
Nicole Schwier, LPC SAC-IT (began November 2018)

Comprehensive Community Services (CCS)
Erica Baldwin, BS (Service Facilitator/transitioned to CSP May 2018)
The Behavioral Health Clinic offers an array of programs and services for individuals who reside in Juneau County. Programs or services that are offered include:

- Individual, family and couples therapy
- Substance abuse counseling
- Intoxicated Driver Program (IDP)
- OWI assessments
- Psychiatric evaluation and treatment for adults
- Psychological testing/evaluations for youth and adults
- Medication management
- Crisis counseling/services/treatment
- Jail Mental Health contract
- Coordinated Services Teams (CST)
- Comprehensive Community Services (CCS) program

These services/programs are funded by medical assistance, private insurance or private pay. Juneau County Department of Human Service is certified to provide mental health and AODA services, crisis services (including mobile crisis) and CCS.

Mental Health

In 2018 the mental health services within our Behavioral Health Clinic employed two full time outpatient therapists. The third therapist had a smaller outpatient case load (approximately 10-15) and then had a case load of 7-12 for the CCS program as well. Our outpatient clinic bills private insurance, Medicaid, Medicare and takes private pay for services. In 2018 our mental health clinic did 154 mental health initial assessments, 26 initial psychiatric assessments and saw 186 individuals for therapy. Our psychiatrist saw 153 individual clients over the course of 2018.
Crisis
Agency staff continue to provide crisis services during business hours and Colleen James and her staff from Innervisions provide after hour and weekend crisis services. In 2018 there were 451 crisis contacts. We experienced 42 hospitalizations (6 were for youth under the age of 18), 367 were diverted from the hospital with an offer of clinic services and family supports. The program appears to better meet the needs of people in the community and is saving considerable dollars for all of the agencies involved.
Jail Mental Health
We also continue to provide mental health consultation for the Juneau County jail. Several individuals from the Behavioral Health Unit work with the jail to provide suicide risk assessments. Staff have become acquainted with jail staff and help enhance their skills in dealing with inmates that have mental illness or present with suicidality. In 2018, 650 jail assessments were completed, which is more than double the amount in 2017. We believe this dramatic increase is due to improved reporting from jail staff and documentation, and the increase in jail inmates, residents from other counties presenting in Juneau County and drug use.

AODA
We currently have one Alcohol and Other Drug Abuse (AODA) counselor, one dually certified counselor and five substance abuse counselors in training that provide all the outpatient services to that population. In 2018 we had 164 Intoxicated Driver Program (IDP) assessments. IDP assessments are cash only assessments and we charge $275 per assessment. This brought in revenue of $45,100. We had 12 clients go to detox in 2018. We also had three individuals go to AODA Treatment facilities. In 2018 we served 136 adults with substance use disorders for traditional outpatient AODA counseling.
CCS

In 2018 we served 63 consumers in our Comprehensive Community Support (CCS) program. We brought in over $1 million in CCS dollars for 2018 before program costs. During 2018, we have increased our number of individuals in the program. At the end of 2018 the number of actively enrolled consumers was 44.

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CST

The Coordinated Services Teams (CST) program became possible due to an allocation from the State that began in 2015. This is a shared program between Child Protective Services and Mental Health and AODA personnel. Members of these units all have the ability to refer families to the program and participate in Coordinated Services Teams. Schools, Law Enforcement and other professionals, as well as parents, also have the ability to refer to the CST program and are often participants on children and family teams.

In 2018 CST served 21 youth. Outreaching efforts with community partners has greatly improved the number of referrals for this program. In addition, 2 of the youth served were dually enrolled in the CCS program, allowing a vast increase of services being available to the families. We continue to provide services within all school districts and work collaboratively with school staff and other community partners. In 2018 we combined our CCS and CST Local Coordinating Committee. This has improved our outreach efforts and ability to share resources and knowledge with community members.
In 2018, the Children, Youth and Families team had extended periods of being short staffed due to resignations and lack of qualified applicants for open positions. The unit finally became fully staffed in December 2018. The change in unit structure done in 2016 continued to benefit clients and staff, however heavy caseloads, even with a full staff, remain.

Child Protective Services (CPS):

We have remained busy in CPS this year. We have continued to utilize various funding streams to help offset costs. The unit remains focused on moving children to permanence, preferably reunification with parents, however we also had children find permanence through Termination of Parental Rights and adoption. In 2018 we moved 30 children to permanence both through reunification and adoption. This is 12 more children than in 2017. We continue to work with families after reunification to provide services to decrease the likelihood that these families...
reenter the foster care system in the future. Juneau County CPS utilized the Post Reunification Program and the In Home Safety Services Program, made available through the State, to support families with additional services and case management.

We added an additional Family Support worker in 2018. This has allowed for the provision of more services to prevent placements and reunify families quicker. The Family Support workers provide supervision for visitations for the CPS families and children at the department and in the community as needed. The worker also provides parenting education and assistance with housing, jobs, etc. They do home visits and are an extension of case managers in supporting families.

The Juneau County Foster Care Program has been able to maintain 13 foster homes. We also licensed 4 new foster homes and 3 relative foster placements in 2018. The complexity of care required for some children has led to the need to place several children in homes out of the county or into Residential Care Centers. We had 9 children placed outside the county at the end of 2018, 6 in treatment level foster homes, 2 in group homes and 1 in a mental health facility awaiting placement in a Residential Care Center. These children have high needs with behavioral challenges. Out of county homes are often managed by agencies and are an increased cost to the County due to administrative fees. Placement in Juneau County foster homes is preferred for cost savings as well as allowing children to have more frequent contact with their families to assist with quicker reunification. The majority of our county licensed homes are full or unable to accommodate these high needs children.

There have continued to be a high number of reports being made to Child Protection Services again this year. In 2018 we received slightly less reports overall compared to 2017 but still significantly more than 2014. The most significant trends in cases continue to be ongoing drug use/abuse, mental health of parents and children being exposed to significant trauma. These trends lead to children not being able to remain safe in their homes and the department is forced to place the children outside of their homes. It is challenging to get parents to engage when they...
are often not accepting responsibility for their drug use or don't recognize their mental health issues.

**Youth Justice (YJ):**
The Juvenile Justice program continues to receive high number of referrals. The addition of another Family Support Worker has allowed us to provide services to our youth and their families. This has greatly increased positive outcomes. We continue to utilize the Community Intervention Program grant and Youth Aides funding to help offset costs. We also continue to work closely with the District Attorney Office on these cases. YJ did utilize secure detention in 2018 for short term detention stays. There were no extended stays in 2018. Youth Justice has 1 juvenile with an extended out of home placement in a group home. The State started tracking the number of referrals to YJ in July of 2018. In the second half of 2018 there were 24 referrals made with 5 resulting in some form of court orders.

**Children with Disabilities Programs (Birth to 3, Children's Long Term Support Waiver):**
The Children with Disabilities Programs are responsible for the three programs that serve Children and Youth with Disabilities in Juneau County. The programs are Birth to 3, Children’s Community Options Program and Children’s Long Term Support Waivers. It is the belief of this unit that if children can be served at younger ages we will prevent/decrease the need for services as they get older and become adults. Children served by these programs range in age from birth to age 22.

In 2018 the Children's Waiver and Community Options Programs workers were increased from one worker to two workers. This was a result of the mandate from the State that all waiting lists be eliminated and the large number of children on our waiting list. A worker was hired in March of 2018 and resigned in July 2018. A new worker started in late August 2018. The manager continued to solely implement and run the Birth to 3 program in addition to other duties during this time.

Birth to 3 is Wisconsin's early intervention program for infants and toddlers from birth up to 3 years old who have developmental delays and disabilities. The service assists families in supporting their child's development. Birth to 3 is an entitlement program meaning that eligibility is not affected by income, however some parents may need to contribute to the cost of services based on their income. Birth to 3 is a federally mandated program that is overseen by Wisconsin’s Department of Health Services and is run by counties. The Juneau County Birth to 3 program has had no findings of non-compliance for the most recent review period. In 2018 the Birth to 3 program served 54 children. In addition, 44 other children were screened but found ineligible for the program. The Birth to 3 Program remained with the Unit Manager who carried an average caseload of 35-40 families throughout the year. This includes ongoing cases and new referrals.
Children's Community Options Program (CCOP) replaced the Family Support Program in 2016. CCOP is a State funded program which provides individual services and supports to families with children who have severe disabilities. The program offers information and help finding services and maximizing community resources; it also offers limited funding to buy needed services and goods that can't be bought through other sources and links families with other families to strengthen natural supports. There is a waiting list and families are served on a first come-first served basis. There is, however, the possibility to prioritize families in crisis or families who are bringing a child home from out-of-home placement. In 2018 this program served 32 children.

Children's Long Term Support Home and Community Based waivers (CLTS), is the third program in the unit. This program is designed to serve children under the age of 22 who have long term needs. The program is intended to increase total resources available to serve participants and is supported by Federal and State dollars. This program serves children who are physically disabled, developmentally disabled, autistic and or have a severe emotional disturbance. Through the CLTS program, the cost to the County for some foster care and other services have been off set. At the end of 2018, the total number of children enrolled in the program was 39. There were still children on the waiting list and more new referrals being received. In addition to ongoing case management, the workers had to complete the assessment of any new referrals within 45 days of receipt and work on removing children from the waitlist.

2018 Community Support Program Annual Report

Mary Jo Onsager, LCSW, Manager

Case Managers:
- Ed Merz, LPC
- Kathy Hannagan, BSW
- Erin Kobylski, BSW
- Kim Reigard, MSSW
- Ruthie Gregar, RN
- Judy Bronson, MSW
- Larry Walls, LPC (splits time between CCS and CSP)
- Erica Baldwin, Criminal Justice (started May 2018, resigned June 2019)
- Tara Herritz, RN (started 2018)

Psychiatrist: Dr. Linda DiRaimondo (contracted)

In 2018, CSP served 72 consumers with a severe and persistent mental illness. Severe and persistent mental illness includes schizophrenia, bi-polar disorder, schizoaffective disorder and severe mood disorder.
The purpose of CSP is to assist the consumer to live independently and focus on their recovery. Recovery focus is person centered and each individual functions at a different level. CSP assists the consumer in reaching their own identified goals. This includes transportation, psychosocial rehabilitation, medication management, symptom management and case management. People with severe mental illness can be very costly to the County if placed in hospitals, institutions or group homes. Juneau County CSP strives to keep consumers in the least expensive and least restrictive living arrangement as possible. At present we have eight consumers in Adult Family Homes (AFH) or Community Based Residential Facilities (CBRFs) and one in Trempealeau County in a Residential Community Apartment Complex. Three of these individuals receive Family Care and their cost of care is covered 100% by this program, with the County having no financial obligation for the cost of their care. Six individuals receive Community Recovery Services (CRS) funding which funds 60% of the cost of their care. Currently seventeen other CSP consumers receive Family Care services which pays 100% of the Medicaid reimbursement rate for program services, as opposed to 60% for non-Family Care consumers. As the individual ages and their needs for medical services increase, individuals will be referred to the Aging and Disability Resource Center for possible Family Care enrollment.

CSP workers are responsible for maintaining treatment plans, monitoring symptoms and providing case management. If a consumer is hospitalized, case managers consult with the hospital and help develop discharge plans. If court proceedings are involved, the case manager is responsible to follow through with any necessary legal proceedings and consult with Corporation Counsel.

Ruthie Gregar, RN, and Tara Herritz are responsible for setting up medications for a number of consumers, along with coordinating Dr. DiRaimondo’s schedule. Case Managers also observe consumers set up medications and monitor for symptoms and side effects.

CSP continues to assist consumers to live as independently as possible and also to reduce or be aware of any additional funding to help offset County dollars. CSP uses funding sources (i.e. CRS, Mental Health Block grant, and Family Care) to reduce the County’s share in supporting this program. Consumers are encouraged to take an active role in their recovery and learn to manage their illnesses. CSP staff billed the majority of their services to Medical Assistance for reimbursement. CSP’s revenue for 2018 was $728,624.00.

2018 Support Services Annual Report

Penny Janechek, Support Services Manager (resigned in May 2019)

DHS Support Services Staff
Brittany Jacobson, Receptionist
Melanie Stickney, Receptionist (started February 2018)
Paula Forsythe, Receptionist (started November 2018)
Alison Brown, Receptionist (transferred to Intake/Records November 2018)
On December 1st, 2017, DHS went live with electronic health records. Our team entered all client data, participated in trainings, put together training guides, and transitioned all client records from paper files to electronic records. It has been an ongoing learning process with updates and fixes to keep MyEvolv running smoothly and user-friendly. As time allows, the support staff scans in paper files to help with merge of our charts to be completely electronic and to eliminate the stacks of paper charts in our storage rooms.

We had a few staff changes throughout the year and with those changes, we began training each other for backup and coverage purposes. Many duties can be done by both Reception and Intake/Records to ensure quick completion of work. Each support staff worker has a broad knowledge of all DHS programs within the agency and around our community. We like to think of ourselves as a living and growing directory.

With the move into the new building, one receptionist is located on the first floor. That has brought a few challenges with having front end coverage but the second floor support staff have created a schedule to have full coverage at the check-in windows throughout the work day. Other DHS units have been very helpful to assist when needed.

1st and 2nd Floor Reception
Brittany is located on the first floor and Melanie covered the second floor window until Paula joined our team. Receptionists handle administrative responsibilities such as (and not limited to) answering and transferring calls, scheduling and rescheduling appointments for therapists and counselors, scheduling IDP appointments and scanning, distributing incoming mail, sending and receiving fax correspondence, transcription of assessments and progress notes for the psychiatrist and psychologist, keeping program brochures up-to-date, ordering and stocking office supplies, and they also assist with staff projects such as referral folders for potential consumers.

Intake/Records
Pat has worked as the Intake and Records clerk for nearly eight years and has been through many changes within DHS. Pat has extensive knowledge on all DHS programs and other services within the community. When Alison started Intake/Records, she initiated the move for Children, Youth, and Families to become electronic, utilizing the state site eWiSACWIS and an internal program, IMS21.

Pat and Alison not only ensure client records are being kept up to date and accurate, they also receive all intake calls and in person contacts for Mental Health, AODA services, and crisis. They receive information by phone, fax, electronically, and in person regarding safety concerns of people with substance abuse or dependency and mental health concerns and get the information to the appropriate crisis staff in a timely manner.