Tuesday, May 10, 2016 8:30 a.m.

HUMAN SERVICES BOARD

Door County Government Center Chambers Room (C102), 1st floor 421 Nebraska Street, Sturgeon Bay, WI

Oversight Board for the Department of Human Services

AGENDA

HUMAN SERVICES BOARD MEETING

- 1. Call Meeting or Order
- 2. Roll Call
- 3. Adopt Agenda
- 4. Approve Minutes April 12, 2016 Human Services Board Meeting
- 5. Election of Chair and Vice-Chair of this Committee
- 6. Open Meeting Law & Responsibilities of an Oversight Committee presented by Grant Thomas
- 7. Overview of Department for New Committee Members
- 8. Correspondence
- 9. Public Comment
- 10. Program Reports
 - a. Collective Unit Report
 - b. Director's Report
- 11. Continuing /Pending Business
 - a. Family Care Updates
 - b. Resource Center Building Update
 - c. Staff Recruitment Updates
 - d. Vouchers
- 12. Topics To Be Referred to the Legislative Committee
- 13. New Business
 - a. 2015 DC Aging Unit Self-Assessment for Greater Wisconsin Agency on Aging Resources (GWAAR)
 - b. Consolidation of Donation Accounts
 - c. Four Year Coordinated Transportation Plan
 - d. FYI-Resignation Letter from Kayla O'Dell
 - e. Reguest to Refill- Children & Family Social Worker
 - f. Request to Refill/Reclassify Behavioral Health Case Manager to Psychotherapist
 - g. FYI-Completion of Introductory Period Brenda Franco
 - h. Staff Survey
 - i. Contracted Staff vs. Employee
 - i. Establish June & July Public Participation Meeting dates for 2017 Budget
- 14. Matters to be Placed on a Future Agenda or Referred to a Committee, Official or Employee
- 15. Set Next Meeting Date Tuesday, June 14, 2016
- 16. Adjourn Meeting

Deviation from the order shown may occur

Members of the Door County Board Supervisors and/or its sub-units may be in attendance at this meeting to listen and gather information. Notice is hereby given that the above meeting constitute a meeting of the Door County Board of Supervisors or one of its sub-units. However no official action will be taken except by the Administrative Services Committee.

DOOR COUNTY HUMAN SERVICES BOARD MINUTES

Tuesday, April 12, 2016

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

1. Call to Order-

Chair Mark Moeller called the April 12, 2016 meeting of the Door County Human Services Board to order at 8:30 am at the Government Center's Chamber Room.

2. Roll Call / Establishing a Quorum-

<u>Present</u>: Chairman Mark Moeller, Helen Bacon, Roy Englebert, Susan Kohout, Paul Kok, Tom Leist, Joe Miller and Robert Rau.

Excused: Wayne Kudick

<u>Staff Present</u>: Joseph Krebsbach - Director, Cori McFarlane - Deputy Director, Ken Pabich - County Administrator and Shawn Barlament - Office Manager / Recording Secretary.

Others Present: None

The Board members present established a quorum.

3. Adopt Agenda-

A motion was made by Tom Leist and seconded by Paul Kok to adopt the agenda. All were in favor.

4. Approve Minutes-

Paul Kok motioned to approve minutes from the March 8, 2016 Human Services Board meeting. This was seconded by Helen Bacon. All approved.

5. Correspondence-

None

6. Public Comment-

None

7. Program Reports-

a. Collective Unit Report

All board members agreed that they preferred the new format for program reports. And were appreciative of the successes shared in the report. They also requested that concerns be brought to their attention. Statistical information will be shared quarterly.

b. Director's Report

None

8. Continuing / Pending Business-

a. Family Care Updates

Family Care/IRIS 2.0 has had a few minor revisions. A summary of these changes is available for review online through the Wisconsin Department of Health Services, https://www.dhs.wisconsin.gov/familycareiris2/paper-changes.htm

b. Resource Center Building Updates

Three bids have been received from architectural firms and 2 bids for the role of owner representative during the building process. Recommendations will be made to the Property Committee. Potential time line would be ground breaking in November of this year and completed in the same month in 2017.

c. Staff Recruitment Updates

Mary Bittorf has accepted the position of Economic Support Specialist and will begin April 20th.

Three interviews were conducted for the Behavioral Health Manager this past Friday, April 8th. An offer will be extended.

d. Vouchers

A question was asked about a payment to Specialized Services for Personal Care Worker (PCW) services. Joe explained that although they do not provide those services any more, our PCW Nurse helps to offset mental health services for our Community Support Program and is a cost neutral expense for children and elderly as we can bill Medicaid to be reimbursed for these expenses and for those clients that are not eligible for Family Care but are for Personal Care.

9. Legislative Topics-

Chairman Moeller asked that the title of this agenda item be changed to "Topics to Be Referred to Legislative Committee" to be clear that this is a referral process rather than an action item.

Members agreed that Adult Day Care funding should be referred in order to abate residential care expenses.

10. New Business-

a. Review 2015 Annual Report

No questions asked

b. Review 2015 Fiscal Report

The fiscal report is attached to these minutes. The board thanked the department for being fiscally responsible.

c. Establish May & July Public Participation Meeting Dates for the 2017 Budget Chairman Moeller suggested that these dates be scheduled for June and July as new board members would be attending their first Human Services board meeting in April.

d. Aging & Disability Resource Center/Senior Resource Center as One Entity: Aging & Disability Resource Center (ADRC)

FYI – This has been the goal since the ADRC was moved to the Senior Resource Center.

e. State Aging & Disability Resource Center & Income Maintenance Integration Recommendations

FYI- The Wisconsin Department of Health Services is combining these to create better efficiencies.

f. Resolution No. 2016-__ Children's Community Options Program & Children's Community Options Advisory Committee

Roy Englebert moved to recommend that this resolution be forwarded to the County Board. Bob Rau seconded the motion. All were in favor.

11. <u>Matters to Be Placed on a Future Agenda or Referred to a Committee, Official or</u> Employee-

Chairman Moeller suggested that a brief overview of the department be shared at the next board meeting for the new incoming board members.

12. Next Meeting Date:

Tuesday, May 10, 2016 at 8:30am in the Chambers Room of the Government Center, 421 Nebraska Street, Sturgeon Bay.

13. Adjournment:

Bob Rau motioned and Tom Leist seconded to adjourn the meeting. The motion carried. The meeting adjourned at 10:23 am.

Respectfully submitted,

Shawn M. Barlament, Recording Secretary

DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

COMPARISON OF BUDGETED TO ACTUAL REVENUES & EXPENDITURES - PRELIMINARY 2015 - UNAUDITED Prepared April 11, 2016 by JoAnn Baumann, Door County Finance Department REVENUES

<u>REVENUES</u>										
Description	Adopted Budget	Expected Total Revenue	% of Budget Realized	Comments						
IDP Emergency Supplemental Funds	\$15,000	\$20,018		State allocation greater than what was budgeted.						
Youth Aids	\$177,712	\$218,907	123.18%	State allocation greater than what was budgeted.						
Juvenile Justice Comm. Intervention	\$0	\$425	N/A	Used portion of 15-16 allocation; balance in 2016						
COP Program	\$336,555	\$236,507	70.27%	Family Care reduced expenses and claims						
COP Risk Reserve	\$0	\$8,277	N/A	Closing Risk Reserve account to use for COP						
COP Waiver	\$320,465	\$260,923		Family Care reduced allocations, expenses and claims						
CIP 1A Program	\$292,405	\$173,224	59,24%	Family Care reduced allocations, expenses and claims						
CIP 1B Program	\$2,242,586	\$1,255,504		Family Care reduced allocations, expenses and claims						
CIP 1B-MFP	\$0	\$137,914		New allocation in 2015.						
CIP 1B-ICFMR	\$138,658	\$97,750		Family Care reduced allocations, expenses and claims						
CIP 1B-Family Care Transfers	\$144,814	\$45,242	31.24%	Family Care reduced allocations, expenses and claims						
CIP II	\$969,995	\$802,538	82.74%	Family Care reduced allocations, expenses and claims						
CIP II Community Relocation Initiative	\$323,408	\$125,124	38.69%	Family Care reduced allocations, expenses and claims						
CIP II Nursing Home Diversion	\$744,600	\$151,196	20.31%	Family Care reduced allocations, expenses and claims						
RCC Health Check	\$1,000	\$673		No add'l claims allowed for 2015-discontinued.						
Foster Parent Training	\$1,251	\$1,203	96.16%	and the Letter diocertain ded.						
Child Care	\$57,082	\$44,911	78.68%							
Income Maintenance Consortium	\$472,827	\$613,362	129.72%	Includes 2014 carryover funds						
FSET	\$0	\$12,024	N/A							
Independent Living	\$11,000	\$6,805	61.86%							
Promoting Safe & Stable Families	\$41,200	\$38,069	92.40%							
Kinship Care	\$29,190	\$44,635		State allocation greater than what was budgeted.						
Safe Havens Grant	\$139,650	\$152,974	N/A	3 wat that the badgetou.						
Adam Walsh Fingerprinting Program	\$0	\$589	N/A							
WHEAP	\$63,097	\$65,577		State allocation greater than what was budgeted.						
Mental Health Block Grant	\$7,665	\$7,265	94.78%	g. Satisfi than what was badgeted.						
AODA Block Grant	\$46,281	\$44,962	97.15%							
Birth to Three Program	\$78,856	\$78,408	99.43%							
Family Support Program	\$45,433	\$44,917	98.86%							
Initiatives for Coordinated Services	\$71,934	\$68,664	95.45%							
CLTS Waiver Program	\$424,850	\$547,668		State allocation greater than what was budgeted.						
MAPT	\$5,000	\$2,920	58.40%							

Certified Mental Health Program	\$14,160	\$15,056	106 33%	State allocation greater than what was budgeted.
CCS Revenue	\$0	\$59,817	N/A	Ctate anocation greater than what was budgeted.
CCS Coordinator Revenue	\$0	\$8,180	N/A	
Subtotal - Grants Before BCA	\$7,216,674	\$5,392,228	74.72%	
Basic County Allocation (BCA)	\$1,116,886	\$1,118,208	100.12%	
Subtotal - Grants <u>After</u> BCA	\$8,333,560	\$6,510,436	78.12%	
WIMCR	\$135,083	\$243,100	179.96%	
Collections				
Alcohol & Other Drug Abuse	\$36,400	\$15,123	41.55%	Collections for Inpatient & Outpatient Services below budget
Developmental Disabilities	\$96,000	\$101,726	105.96%	1
Mental Health	\$166,000	\$90,357		Collections for Outpatient and Case Mgmt below budget; \$25,000 budgeted revenue moved to CCS Revenue
Psychiatrist	\$98,000	\$66,877	68.24%	Collections for Outpatient below budget.
Community Support Program	\$273,000	\$270,789	99.19%	
Intoxicated Driver Program	\$89,000	\$68,037	76.45%	Collections for Inpatient, Court Fees, & Assessments below budget.
PCW Program	\$1,122,000	\$730,496	65.11%	Collections below budget - Family Care
Miscellaneous Collections	\$26,500	\$206,425	778.96%	Prior year revenues totaled \$163,847.78
Subtotal - Collections	\$1,906,900	\$1,549,830	81.27%	
County Tax Levy	\$3,317,331	\$3,317,331	100.00%	
Allowance for Indirect Costs	\$654,590	\$738,091	112.76%	
Transfers In	\$50,000	\$26,292	0.00%	
Total Revenues	\$14,397,464	\$12,385,080	86.02%	
		FXPFN	DITURES	
			DITOREO	
	Adopted	Expected Total	% of Budget	
Description	Budget	Expenditures	Used	Comments
				Includes county-allocated overhead costs; non-cash item. Also
Agency Administration	\$1,682,692	\$1,912,829		includes Family Care contribution of \$186,974.48 for 2015.
All Other DCDHS Staff Costs	\$2,929,206	\$2,558,511	87.34%	
Income Maintenance Purchased Services	\$3,117	\$172	5.52%	
Birth to Three Program	\$162,800	\$201,082	123.51%	
Developmental Disabilities Purch. Services	\$181,957	\$132,092	72.60%	
Family Support Program	\$45,433	\$40,374	88.86%	
Behavioral Health	\$383,557	\$492,685	128.45%	
AODA Block Grant	\$46,219	\$44,962	97.28%	
Initiatives for Coordinated Services	\$111,850	\$88,454	79.08%	
Community Support Program	\$204,215	\$150,324	73.61%	

Mental riealth Block Grant	\$7,665	\$7,265	94.78%	
PCW Program	\$1,186,564	\$638,382		Expenses less than budgeted because of Family Care.
CIP 1A Program	\$287,636	\$166,460	57.87%	Expenses less than budgeted because of Family Care.
CIP 1B Programs (All, Including ICFMR)	\$3,347,835	\$1,956,200	58.43%	Expenses less than budgeted because of Family Care.
CIP II	\$1,019,110	\$752,999	73.89%	Expenses less than budgeted because of Family Care.
CIP II Community Relocation Initiative	\$302,250	\$1 17,750		Expenses less than budgeted because of Family Care.
CIP II Nursing Home Diversion	\$695.888	\$142,806	20.52%	Expenses less than budgeted because of Family Care.
COP Waiver	\$299,500	\$258,856		Expenses less than budgeted because of Family Care.
CLTS Waiver Program	\$399,591	\$560,616	140.30%	— realistic root than budgeted because of ranning date:
COP Program	\$164,515	\$163,499	99.38%	"Pure COP" only; CIP/COP expenses included with CIP 1B expenses.
Supportive Home Care	\$50,000	\$33,898	67.80%	Expenses less than budgeted because of Family Care.
Alternate Care	\$493,495	\$427,838	86.70%	Expenses less than budgeted because of Family Care.
Children & Families	\$147,023	\$144,009	97.95%	
Juvenile Community Services	\$43,000	\$38,622	89.82%	
FSET	\$0	\$11,689	N/A	
WHEAP	\$62,696	\$63,090	100.63%	
Miscellaneous	\$0	\$67	N/A	
Safe Havens Grant	\$139,650	\$152,974	N/A	
ccs	\$0	\$67,842		
Total Expenditures	\$14,397,464	\$11,326,347	78.67%	
Revenues in Excess of Expenditures	\$0	\$1,058,733	- Na	
	Adopted		% of Budget	
SUMMARY - 2015 INPATIENT COSTS	Budget	Actual Results	<u>Used</u>	
Behavioral Health	\$245,000	\$434,022	177.15%	
Intoxicated Driver Program	\$20,000	\$2,888	14.44%	MAA.
Totals	\$265,000	\$436,910	164.87%	
V-0.00		-104.		
	Adopted			
SUMMARY - 2015 BUDGET VS. ACTUAL	Budget	Actual Results	Difference	
Total Revenues	\$14,397,464	\$12,385,080	(\$2,012,384)	
Total Expenditures	\$14,397,464	\$11,326,347	\$3,071,117	\(\text{\tint{\text{\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\text{\texi}\text{\tin}\tint{\text{\text{\text{\text{\text{\texi}\tint{\text{\texi}\tint{\text{\texi}\tint{\text{\texi}\tint{\text{\texi}\tint{\tex{\ti}\tint{\text{\texi}\texit{\texi{\texi{\texi{\texi{\tex{
Projected Surplus/(Deficit)	\$0	\$1,058,733	\$1,058,733	
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NOTE:			
This Comparison of Budgeted to Actual Reven	ues & Expenditures for	2015 is based on seve	eral assumptions:
1. It is based on an estimate of revenues from	state and federal source	es that will be collecte	ed from several State of Wisconsin departments,
although not all of these revenues have yet bee	en received; thus, they a	re subject to adjustme	ent, up or down
It is based on an estimate supplied by the H	uman Services Director	of inpatient expenditu	ures for 2015 that have been incurred but not yet been
paid as of the date of this report. While the Hu	man Services Director I	knows which clients ha	ave been admitted to inpatient facilities during 2015
the County is the "payer of last resort" for these	expenditures, after oth	er sources of paymen	nt (directly from the client, from private insurance, and
from Medicaid) have been exhausted. As such	ı, the Human Services [Director has estimated	what the County's remaining responsibility will be for
tnese inpatient costs.	į		
3. It is assumed that all bills for 2015 expenditu	ures, other than for inpa	tient expenditures as	described above, have been submitted to the
Department of Human Services and that these	expenditures have bee	n paid. Vendors have	been put on notice that we are closing our books for 2015
ino allowances have been made for late bills or	· bills that have been red	eived but not process	sed for payment for whatever reason
Expenditures for the CLTS Program are not	paid directly by the Der	partment of Human Se	ervices to vendors providing the services to our clients:
instead they are paid by a third-party administra	ator (TPA) with whom th	ie State contracts. An	nounts shown above for revenues and expenditures in the
ICLIS Program are based on what has been po	osted by the TPA on the	ir data warehouse wel	b site. No allowances have been made for late hills or hills
that have been received but not processed for	whatever reason by the	TPA, or not posted ye	et on the TPA's data warehouse web site.
 As stated at the beginning of this report, the 	se results are <u>prelimina</u>	<u>ry</u> and have <u>not yet be</u>	een audited by our outside auditing firm; thus,
they are subject to adjustment.			

DOOR COUNTY SENIOR RESOURCE CENTER/ADRC

COMPARISON OF BUDGETED TO ACTUAL REVENUES & EXPENDITURES - PRELIMINARY 2015 - UNAUDITED

Prepared April 11, 2016 by JoAnn Baumann, Door County Finance Department

REVENUES

	Adopted	Expected Total	% of Budget	
<u>Description</u>	Budget	<u>Revenue</u>	Realized	<u>Comments</u>
Fed USDA	\$20,711	\$22,822	110.19%	State allocation greater than what was budgeted.
St Ben Spec	\$28,215	\$47,134		Increased drawdown of Federal match not budgeted.
St Alzheimers	\$8,593	\$8,593	100.00%	
St Mls C-1	\$71,808	\$64,185	89.38%	State allocation less than what was budgeted.
St MIs C-2	\$27,105	\$23,924	88.26%	State allocation less than what was budgeted.
St 3-B	\$40,471	\$50,947	125.89%	State allocation greater than what was budgeted.
St 3-E	\$16,280	\$16,192	99.46%	
St Community Services	\$5,961	\$5,961	100.00%	
St Transportation	\$96,064	\$92,905	96.71%	State allocation less than what was budgeted.
St Aid 3-D	\$2,107	\$2,094	99.38%	
St Elder Abuse	\$13,429	\$15,629	116.38%	Additional \$2200 allocation received at year end.
OIC Med Grant (SPAP)	\$3,275	\$6,550	200.00%	Increased drawdown of Federal match not budgeted.
SHIP Grant	\$3,000	\$2,000	66.67%	State allocation less than what was budgeted.
DOT 5311	\$621,668	\$610,626	98.22%	
JARC/WETAP	\$26,456	\$18,517	69.99%	Door-Tran expenses less than budgeted.
St Aid ADRC	\$387,293	\$438,820	113.30%	\$25,000 allowed carryover from 2014 not budgeted.
St Aid APS	\$0	\$9,495	N/A	Allocation not budgeted; received near year-end; related to Family Care
Subtotal - Grants	\$1,372,436	\$1,436,394	104.66%	
Collections				
Local Collections-Meals Payments	\$33,350	\$61,764	185.20%	
Transportation Donations	\$4,500	\$4,972	110.49%	
C-1 Donations	\$45,000	\$57,408	127.57%	
C-2 Donations	\$43,500	\$38,236	87.90%	
Unspecified SRC Donations	\$1,000	\$10,313	1031.30%	Carryover from 2014 (\$23,172.69) + current year donations (\$3507.62) less balance unused transferred to 2016 (\$16,366.97)
Specified Donations-SRC	\$0	\$0	N/A	
Specified Donations-APS	\$0	\$1,515	N/A	

Activity Fees	\$8,000	\$1,173	14.66%	Only fees for exercise room or other activities the SRC charges for.
No. and Harrison Co. H. C.				Prior year revenues totaled (\$5187.20) for Sunshine House prior
Miscellaneous Collections	\$0	(\$4,627)	N/A	year reimbursements.
Subtotal - Collections	\$135,350	\$170,754	126.16%	<u></u>
County Tax Levy	\$550,094	\$550,094	100.00%	
Allowance for Indirect Costs	\$38,453	\$54,351	141.34%	
				Health insurance reduction. ADKC temporary office space, &
Transfers In	\$118,768	\$70,589	50 13%	temporary enrollment counselors, includes \$25,000 fransportation reserve moved to Fund Balance
Total Revenues	\$2,215,101	\$2,282,182	103.03%	
Total Nevendes	\$2,213,101	\$2,282,182	103.03%	
		EXPEN	DITURES	
	Adopted	Expected Total	% of Budget	
<u>Description</u>	Budget	Expenditures	Used	Comments
ADRC Program	\$425,746	\$475,977	111.80%	
				End of year expenditures include only APS donation & 85.21
A A	4704700	45.44		transfer to reserve; all other costs allocated out to programs - see
Agency Administration	\$724,739	\$5,319		NOTE below
SRC Donation Expense	\$0	\$10,313	N/A	
Congregate Meals 3C-1	\$77,484	\$190,886	246.36%	Ann a
Congregate Meals 3C-2	\$95,550	\$177,978	186.27%	
Fed Aid Title 3B	\$14,639	\$85,966	587.24%	
Cmmunity Service Program	\$7,000	\$33,037	471.96%	
Specialized Transportation	\$71,400	\$111,601	156.30%	
Alzheimers	\$8,593	\$15,467	180.00%	
3-D Preventative Health	\$2,107	\$2,327	110.44%	I
Benefit Specialist	\$26	\$62,015	238519.23%	
3-E Caregivers Supplement	\$16,280	\$26,306	161.58%	
OCI Medicare Transition Grant-SPAP	\$3,275	\$3,275	100.00%	
DOT 5311 Transportation	\$728,457	\$680,874	93.47%	
SHIP Grant	\$0	\$2,000	N/A	
Adults & Elderly	\$39,805	\$302,996	761.20%	

Total Expenditures	\$2,215,101	\$2,186,337	98.70%
Revenues in Excess of Expenditures	\$0	\$95,845	

NOTE: Staff & administration expenses for the SRC are all budgeted under Agency Administration.

During the year, these costs are moved to the applicable programs they relate to using Staff & Admin allocation accounts in order to claim all costs related to each program. As such, budgeted expenses in the individual programs would generally relate only to direct purchases and purchased service expenses, in most cases. Comparison of total expenditures is more useful than by program.

	Adopted		1
<u>SUMMARY - 2015 BUDGET VS. ACTUAL</u>	Budget	Actual Results	Difference
Total Revenues	\$2,215,101	\$2,282,182	\$67,081
Total Expenditures	\$2,215,101	\$2,186,337	\$28,764
Projected Surplus/(Deficit)	\$0	\$95,845	\$95,845
NOTE:			

This Comparison of Budgeted to Actual Revenues & Expenditures for 2015 is based on several assumptions:

- 1. It is based on an estimate of revenues from state and federal sources that will be collected from several State of Wisconsin departments, although not all of these revenues have yet been received; thus, they are subject to adjustment, up or down.
- 2. It is assumed that all bills for 2015 expenditures have been submitted to the Senior Resource Center/ADRC and that these expenditures have been paid. Vendors have been put on notice that we are closing our books for 2015. No allowances have been made for late bills or bills that have been received for payment for whatever reason.
- 3. As stated at the beginning of this report, these results are <u>preliminary</u> and have <u>not yet been audited</u> by our outside auditing firm; thus, they are subject to adjustment.



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

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Human Services Board Agency Updates – May 2016

I. Program Changes and Highlights

A. Trauma Informed Care Updates: The core team charged with implementing Trauma Informed Care as an organizational change throughout our agency attended the statewide Fostering Futures kick-off in Madison on April 5 & 6. The team is beginning to develop an implementation plan. They are meeting bi-weekly, and their first coaching call with our national consultant is in late May. An agency self-assessment is underway to measure how we are doing now and where we need to focus our efforts. The team presented an overview of the initiative at the April all agency staff meeting and developed an informational handout to distribute to community partners at the Poverty Simulation/Resource Fair.

We are more than halfway through the first series of trauma focused trainings we are providing for a combined group of birth parents, foster parents, and providers, and it is going very well. The objectives are to have the participants achieve the following: 1) Have an understanding of what Complex Traumatic Stress is, and how it can affect the typical development of children 2) Gain awareness of the types of behaviors (symptoms) commonly seen in children who have had traumatic experiences 3) Understand the need to address psychological as well as physical safety in alternative care and when planning family contacts 4) Advocate for and be able to adequately identify providers. Some very powerful learning has occurred already. Three sessions of 8 trainings are planned under the Wisconsin Trauma Project. Children and Families Manager Dori Goddard is being trained as an internal trainer so that we can continue to provide this important resource into the future.

- **B. Child Protection and Juvenile Justice:** The Child Protection and Juvenile Justice Program areas numbers are steady. We have three pending new foster parent applicants who are going through the licensing process. This would increase our foster home resources to 15. We had to take three children from three different families into custody the week of April 4th. This was not at all a typical week; it created a significant increase in placements in a very short period of time. The team is short staffed again after a recent resignation, and we will be looking for support to fill the vacancy.
- C. JAK's Place: JAK's Place, the peer run drop-in center which supports many of our Community Support Program participants and others in their mental health recovery journey, will be merging with Lakeshore CAP on July 1, 2016. NAMI Door County, Inc. will continue to assist with raising funds for JAK's Place. Lakeshore CAP has hired Jane Herlitz as the new Program Director. Members on the current JAK's/NAMI Door County board will be invited to serve on an Advisory Committee to the Lakeshore CAP Board following the merger.
- **D. Food Share Employment and Training (FSET)**: Governor Walker recently released a report on the FSET program and has also made stops in several cities in the last few weeks to announce results. The statewide report shows in the first year, nearly 12,000 participants gained employment as a result of FSET. 107,033 recipients statewide have been referred to the

program; 32,100 members have enrolled in the program. Those who are required to participate and do not meet the 80 hour work requirement or do not participate in other FSET activities to total 80 hours per month lose their food share benefits for 36 months. There are a number of exemptions, including those who receive unemployment, are in AODA treatment, are pregnant, or have a medical issue. The program is for those who are able bodied adults age 18-49. In Door County, Forward Services Corporation is the FSET program operator. Human Services Economic Support workers refer FoodShare recipients meeting the participation requirements to the program.

E. AARP Tax Volunteer Program: Yet again we experienced another very successful volunteer tax season at the ADRC/Senior Center. Our tax program consists of four to five AARP volunteer tax preparers who assist consumers from mid-February to mid-April. This year our tax preparers assisted a total of 287 consumers helping claim a combined total of \$271,000 in state/federal tax returns.

II. Noteworthy Events

- **A.** May is **ADRC Month**. In celebration, Disability Benefit Specialist Jessica Holland will be sharing her musical talents during the lunch hour on May 11 at the Senior Community Resource Center.
- **B.** May is also **Older Americans Month**. Throughout the month the Senior and Community Resource Center/ADRC will conduct activities and share information designed to highlight local programs, resources and success stories. Scheduled events include: Representative Joel Kitchens Meet and Greet May 2 at 12:15pm, Grief Support Seminar with AseraCare Hospice May 9 at 1pm, Diabetes Prevention Discussion with Public Health May 26 at 4pm. Check out the May Newsletter for more information.
- **C.** On May 17 from 10:00am to Noon the ADRC/Senior Center along with other community organizations will facilitate a Learning in Retirement (LIR) conversation about what it means to be a "**Dementia Friendly Community**." The conversation will be held at NWTC in Sturgeon Bay.
- **D.** May 1st marks the beginning of **National Mental Health Awareness Month**, which seeks to bring attention to the challenges faced by those living with mental health issues in our country. Some have estimated that as many as one out of four adults are diagnosable with mental health disorders each year, and 20% of all children will have at some point in their life a seriously debilitating mental disorder.
 - Currently, the State Legislature is considering a \$29 million initiative for mental health resources proposed in the Governor's budget. Among the mental health provisions included in the budget are a focus on children's mental health and increased counseling services for youth living with mental health challenges. In addition, a Special Speaker's Task Force on Mental Health, chaired by Representative Erik Severson, is holding hearings around the state and will be making recommendations to the Legislature regarding mental health care and services.
- **E.** The Human Services Department participates in the **Mental Health Focus Group**, which will be sponsoring a free **Spring Event** on Thursday, May 5 at Stone Harbor (6:00 7:30 p.m.). Maria Hanson, Peer Specialist Coordinator from Mendota Mental Health Institute will speak on Overcoming Trauma, Mental Illness and Addiction. Agencies will have booths set up to share information and resources.

III. High-Cost Placements & Other Fiscal Updates

- **A.** The Juvenile Justice unit successfully closed our one case that has been in a long-term corrections placement. The youth is nearing his 18th birthday and has met all of the conditions of his placement in the juvenile corrections system. He has been returned home to his father in Milwaukee and will continue working with an adult probation agent for monitoring of his conditions received through adult court. This placement has been costing the county \$8,820 a month, for a total of \$107,310 in 2015 and \$35,280 from January April 2016.
- **B.** DCHSD received \$89,896 of new Children's Long Term Support (CLTS) waiver funds to support three children on our waiting list. The Department of Health Services increased the CY2016 CLTS contracts to counties to address the overall waiting list needs of families that have been waiting a very long time for services and supports. The current waiting list for Door County is 8. Through the use of these new funds, it is highly probable more than three children will access support services, and our goal is to reduce the waiting list as low as possible. As a reminder, CLTS is for all disability populations children with mental health needs, children with physical disabilities, and children with developmental disabilities. We work to address the needs of all of these target groups. Once the contract adjustment is made, the Department has 90 days to implement new plans for the three children. We remain appreciative for the new monies and the opportunity to serve Door County children with long term support needs through the use of the CLTS program.

IV. Training & Staff Development

- A. **Person Centered Planning:** On May 23, we will be bringing in Marcie Brost, the "guru" of this movement in Wisconsin to do a 4-hour training for our staff and some of our partners and providers. Person-centered planning is a process-oriented approach to empowering people with any disability or challenge label. It focuses on the person and their needs by putting them in charge of defining the direction for their life. It provides us with a toolbox of shared language, methods and resources to tap into.
- **B.** Crisis Training Day: On May 13 Human Services crisis staff will be dedicating an entire day to internal review of crisis statutes, policies and procedures, handling of crisis cases, etc. For a portion of the day, we are inviting community partners (assistant corporation counsel, our own adult protective services, law enforcement, hospital, jail) to join us for a discussion of what's going well and opportunities for improvement, as well as general "Q & A". We will also spend time discussing Chapter 55 Emergency Protective Placements, as this has been an issue of growing concern in the community.
- C. Economic Support: Economic Support Specialist Val Bauldry attended a training in WI Dells on Monday April 18 on fraud and overpayment processes. This training was coordinated by WAPAF (WI Association for Public Assistance Fraud); trainers were from the Office of Inspector General and Department of Health Services fraud unit in Madison.

V. Agency & Community Collaboration

A. Collaboration with the Schools: As reported last month, our department facilitated bringing crisis training to the schools as part of the Collaborative Crisis Training project offered by the regional Behavioral Health Training Partnership. Trainer/consultant Jonathan Cloud presented on "Reigniting Achievement Motivational School Climate and Crisis Planning Practices" at district-wide in-services for Southern Door on April 29 and Sturgeon Bay Schools on May 6. Approximately 130 - 140 staff attended each session. A group of Sevastopol School District

personnel joined the Sturgeon Bay training and met with Human Services staff and the trainer over lunch afterwards to discuss implementation strategies for their district.

The agency remains eager to work in partnership with the school districts of Door County to increase awareness and resources supported by Wisconsin Department of Public Instruction and Office of Children on Mental Health on social emotional learning. A resource guiding our future work with the schools is The Wisconsin School Mental Health Framework http://dpi.wi.gov/sites/default/files/imce/sspw/pdf/mhframework.pdf. A system of care is a "spectrum of effective, community-based services and supports for children and youth with or at risk for mental health or other challenges and their families that is organized into a coordinated network". Door County Department of Human Services sees themselves as part of that network toward change.

- **B. Washington Island Outreach:** Deputy Director Cori McFarlane met with School Superintendent Mati Palm-Leis, Guidance Counselor Barb Krueger and Police Officer Gary Schultz on April 19 to discuss general department updates, behavioral health needs on the Island, and opportunities for collaboration. (On this same day, one of our Children and Families/Family Support Services social workers was on the Island along with a DVR counselor doing case planning with some children on their caseloads a relatively common occurrence.) The Department of Human Services is entering into an agreement with the school to offer counseling services to staff under an Employee Assistance Program type arrangement. Discussions also included potential use of telehealth to enhance crisis assessment and expand general mental health service delivery (beyond the one day per month of counseling we currently provide on the Island), training needs for school and community partners, and more. A follow-up meeting is scheduled for May 5 to include additional community partners.
- C. Dementia Focus Group: On April 14 following our regular I-Team meeting, we hosted a focus group on issues of dementia and crisis response. The discussion was facilitated by Barb Larson-Herber, a consultant working with us on our Emergency Detention Enhancement (Crisis) Grant. Individuals representing a broad range of perspectives (mental health crisis workers, ADRC Information & Assistance workers, Adult Protective Services, hospital, law enforcement, nursing homes, Family Care MCO's, EMS, home health care, UW-Extension, and more) shared their views on the strengths and gaps of our current system and priorities in terms of training needs. We will use this information to help us design one or more training events in the coming weeks as well as to inform future planning activities in this critical area. We have a small amount of funding available in the Crisis Grant to support this sort of training. Funds must be used by June 30.
- **D. Oral Health Initiative:** Several Human services staff participate in the Oral Health Initiative Committee, which meets every other month with Ministry Dental Clinic and United Way. In the past three years the group has expanded services for children and CSP adults and provided adult emergency care for extractions. The next stage of outreach will be preventative care for our seniors. The Dental Clinic is now opened 5 days a week. The clinic is seeing about 50% adults and 50% children. The wait list for adults is getting lower with the increase in provider availability. The emergency dental issue is not completely resolved, but is much improved. Clinic staff report there is a gap in the individuals who are just above the 150% of poverty line. Their income is too high, but they still may not have insurance or access to care.
- **E. Collaboration with Law Enforcement:** Director Joe Krebsbach met with the Sheriff's Department on 4/15 to discuss crisis services. They will be invited to our crisis planning day on 5/13 to continue the conversation.

F. Child Care Recruitment: In an effort to increase in-home day care providers, Economic Support staff recently attended a job fair at We Are Hope. Information was passed along to those interested on how to become an in-home certified provider. Certification is necessary to take state subsidized children into your home. ES staff also participated in the Healthy Kids Day at the YMCA and shared information on certified child care as well as other Department of Human Services programs.

VI. Sharing our Successes

- A. P. is a soon to be three-year-old little girl who has been involved with the Birth To Three Early Intervention Program since her birth. She is a very loving, spunky little lady who happens to also have Marshall Smith Syndrome (MSS). MSS is a very infrequently described syndrome, first discovered in 1971. Only about 50 children and adults with this syndrome are known in the medical literature worldwide. P. has multiple medical needs, and we've been privileged to deliver early intervention services that include all remedial therapies, service coordination and ancillary support services. P. is getting ready to transition to school. Our success story rests in our relationship with the school and family to make this a smooth transition—both internally and externally. We've worked to procure the necessary transition to special education at school as well as a smooth transition internally to our PCW RN (Gloria) and Children's Services service coordinator (Kris). This is no small task, particularly given the magnitude of issues that need to be addressed when supporting a child with these issues. A heartfelt thank you to the entire B-3 team for never losing sight of the value of team and the value of helping this family by supporting P. in a respectful, thoughtful and compassionate manner!
- **B.** One of our Family Support Services Case Managers received this heartfelt thank you note from a young lady who recently went through an incredibly difficult time in her life, "Faith, thank you for supporting me...and being with me every step of the way."
- C. J. was originally referred to our Disability Benefit Specialist Jess Holland in the fall of 2015 at age 18 as he prepared to move out of his mother's house. Although J. has a mental illness diagnoses and is diagnosed with Cerebral Palsy, he was determined to live independently. He had no income when he first came to the ADRC. Jess assisted J. with applications for Foodshare, Badgercare+, and Social Security benefits. J. had limited part-time work experience, and despite his best intentions, it was clear that his physical, cognitive, and mental limitations would most likely not be able to provide for a gainful career. Jess and J. worked together to obtain information to support his application for Social Security Disability Insurance (SSDI). With this new income from SSDI, however, J. lost his eligibility for Badgercare+. He was receiving great support from the CCS program, which requires enrollment in Medicaid. Jess and J. worked diligently to find a way to help him maintain his Medicaid eligibility so he could remain in this program. They found the Medical Assistance Purchase Plan (MAPP). MAPP requires that an individual must work at least one hour per month either for money or an inkind payment. J. identified a place he would like to work two hours a week, and together he and Jess approached the manager to find a position that would meet his unique capabilities in exchange for an in-kind payment of transportation to and from work.

When Jess first met J., he lived with his mother and had very little independence. Now, he lives in his own home with minimal in-home care, can pay his bills, has health insurance, gets support from CCS, and has a new sense of purpose through his job.



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

421 Nebraska Street Sturgeon Bay WI 54235 Main Line: 920-746-7155

Joseph Krebsbach, Direc 1st Floor Fax: 920-746-2 2nd Floor Fax: 920-746-2

dhs@co.door.wi.us

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SCHEDULE OF JOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

TO FINANCE DIRECTOR: All vouchers reviewed and approved by Board at regular meeting on the above date. You are requested to issue checks to each of the parties listed below for the amounts appearing after their respective names.

Dept Human Services DEPARTMENT

COMMITTEE CHAIR / COUNTY ADMINISTRATOR

FOSTER CARE

CHECK DATE: APRIL 29, 2016

G/L DATE: 04/2016

Batch Nbr: 258537

Vendor Name	Vendor No.	Sub Dept	Acct No. Detl	Sub Proj	Description		Amount
HELEN MAE BAHR	8485	3949	52715	1261	FEBRUARY KC BENEFIT		40.00
HELEN MAE BAHR	8485	3949	52715	1261	MARCH KC BENEFIT		232.00
HELEN MAE BAHR	8485	3949	52715	1263	FEBRUARY KC BENEFIT		40.00
HELEN MAE BAHR	8485	3949	52715	1263	MARCH KC BENEFIT		232.00
						Vendor Total:	544.00 **
OCONOMOWOC DEV TRAINING CENTER	6476	3949	52716	0535	MARCH CC INST PLACEMENT		5,968.64

Schedule Total:

\$6,512.64

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* SUMMARY * SCHEDULE OF VOUCHERS ·

Page 1 DC404RSUM

H5 April 20, 2016 - Ind Batch

Dept Human Services
DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

G/L DATE: 04/2016 Batch Nb	r: 258515			
Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
ADVOCATES FOR HEALTHY	17929	MAR 16	MAR CCS SKILL DEV	2,121.60
	15976	MAR 16	MAR SPEC EQUIPMENT	696.00
BAETEN COUNSELING	20427	APR 16	APR TWO DAY CRISIS	. 200.00
BAY COUNSELING CLINIC, LLP	21177	MAR 16	MAR CCS PSYCHOTHERAPY	1,053.00
BERRY	804	00429688 APR	APR ADV PRINT/DIG	53.55
BROTOLOC HEALTH CARE SYSTEM IN	3640	1054884 MAR	MAR CBRF 31 DAYS	5,471.50
BROWN CO COMUNITY TREATMNT CNT	16015	MAR 16	APR & DEC INPNT SRVCS	1,163.23
CELLCOM WISCONSIN RSA 10	4818	761403 APR	APR CCS&HS CELL CHARGES	652.84
DOOR COUNTY MEMORIAL HOSPITAL	· 8770	JAN-FEB 16	JAN & FEB OT&PT B-3	17,283.32
EMILY SCHWARK	20081	MAR 16	205 MAR EMPLY MILEAGE REIMB	110.70
EMPOWERMENT OPTIONS	15615	. MAR 16.	MAR AFH 31 DAYS	10,540.00
MAGDA I GUTIERREZ	2987	APR 16	APR RSP 3 NIGHTS	75.00
HELP OF DOOR COUNTY INC	13420	FEB & MAR	FEB&MAR FAMILY ACCESS	18,481.13
MARK HILL	2006	MAR 16	574 MAR EMPLY MILEAGE REIMB	309.96
HIRN MENTAL HEALTH COUNSELING	17401	APR 16	APR MH WASH.IS.OUTPT	420.00
INNOVATIVE SERVICES, INC.	5078	MAR 16	MAR CCS SKILL DEV	2,975.60
JUSTICEPOINT, INC	21360	4082016DOORCO	MAR YA ELECTRIC MONITOR	153.45
JOE KREBSBACH	6299	MAR 16	MAR MEAL & PARKING REIMB	20.52
LAKESHORE CAP OFFICE	17200	MAR 16	MAR JUV REST/COM SRVCS	2,974.95
LANGUAGE LINE SERVICES	14606	3802086 MAR	INTERPRETATION SRVCS	12.36
LIFESKILLS DEVELOPMENT CENTER	16380	JAN - APR	JAN-APR TRANSP REIMB	103.05
NAMI-DC .	15686	MAR 16	MAR PSYCH TECH 41.25 HRS	729.45

4/20/16 G/L DATE: 04/2016

Batch Nbr: 258515

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
OPTIONS LAB, INC	17788	3724	MAR DRUG SCREENS	64.00
SHERRY PESCH	3394	MAR 16	MAR DD,FC & CSP PAYEE	1,480.50
SPECIALIZED SERVICES LLC	7694	20160405 MAR	MAR CCS SKILL DEV	924.80
STAPLES ADVANTAGE	15069	3297934156/57	APR HS OFFICE SUPPLIES	161.05
TANYA KAVICKY-MELS	21550	APR 16	APR SUPPLIES EMPLY REIMB	15.41
HEIDIANN ULLMAN	242	MAR & APRIL	YA MAR & APR RSP	75.00
WE ARE HOPE, INC	19620	MAR 16	MAR WHEAP/LIHEAP PROGRAM	8,523.21
YMCA NORTHERN DOOR PROG CENTER	20082	MAY 16	MAY LIVING FAIR/RENTALS	75.00
KATHLEEN ZAK	5184	APR 16	APR GAS EMPLY REIMB	29.68

Batch Total: \$76,949.86 ***

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4/26/16

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

* SUMMARY * SCHEDULE OF VOUCHERS

Page 1 DC404RSUM

Dept Human Services
DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

G/L DATE: 04/2016

Batch Nbr: 258539

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
ADVOCATES-INDEPENDENT LIVINGII	13325	MAR 2016	MAR CM PCW CCS	7,488.83
BAY COUNSELING CLINIC, LLP	21177	MAR 2016	MAR CCS PSYCHOTH	214.20
CHILDRENS HOSPITAL OF WISCONSI	9497	FEB 2016	FEB MAR S WILSON	850.00
INNOVATIVE SERVICES, INC.	5078	MAR 2016	MAR CCS SKILL DEV	2,218.80
LIFESKILLS DEVELOPMENT CENTER	16380	MAR 2016	MACH ADDL HRS 24	888.00
PROFESSIONAL GUARDIANSHIPS INC	5008	MAR 2016	MARCH GUARDSHP	396.00
SPECIALIZED SERVICES LLC	7694	MAR 2016	MAR PCW CCS HRS	7,013.70

\$19,069.53 **** Batch Total:

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240	47				MAY 2016 - 1ST Batch Processing		\$44,204.29		various - as attache
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5/03/16

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

* SUMMARY * SCHEDULE OF VOUCHERS

May of 2016 - Let Batch

Meeting date

Dept Human Services
DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

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G/L DATE: 05/2016 Batch N	lbr: 258540			
Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
BETH CHISHOLM	2435	APR 16	APR MEALS & MILEAGE	169.00
BAETEN COUNSELING	20427	APR 2016	APR OWI ASSESSMENTS	485.00
BROWN COUNTY JAIL	15090	APR 16	2ND QTR INTERGOVT AGREEMENT	3,025.00
	20973	APR 16	APR RSP 2 NIGHTS	50.00
CORNERSTONE OF STURGEON BA	12482	APR 16	APR CBRF 30 DAYS	1,950.00
DEBRA FEHRMAN	6876	APR 16	134 APR EMPLY MILEAGE REIMB	72.36
DOOR COUNTY MEMORIAL HOSPITAL	8770	MAR 16	MAR B-3 OT/PT	9,194.60
DEB DOYLE	9479	APR 16	APR YA RSP 1 DAY	25.00
DYNAMIC FAMILY SOLUTIONS	21410	MAR 16	MAR CCS PSCHOTH 1 UNIT	102.00
FAMILY SERVICES	. 3841	MAR 16	CRISIS CTR/PAR EDU/HEALTHY FAM	11,524.59
MARK HILL	2006	APR 16	506 APR EMPLY MIL REIMB	273.24
JESSICA PURDY	21708	FEB-APR 16	FEB-APR EMPLY REIMB PARKING FEES	37.50
SALLY LAURENT	8394	MAY 16	MAY AFH 31 DAYS	900.00
LIFELINE DEPARTMENT \ DCMH	18103	APR 16	` APR HS LIFELINE	70.00
LUTHERAN SOCIAL SERVICES OF W	I 6495	FEB & MAR 16	FEB & MAR SUPERVISED VISITS	240.00
MINDI J VANDERHOOF	21686	MAR 16	TUTORING SRVCS T.D. 32 HRS	640.00
NEW PARTNERSHIP	8964	04201698 MAR	MAR INVOICE 04201698	400.00
PROFESSIONAL GUARDIANSHIPS IN	C 5008	FEB 16	FEB GUARDIANSHIP SRVCS	198.00
WENDY RAY	13022	APR 16	APR B-3 THERAPY & MILEAGE	5,003.47
MICHAEL P SAYERS PHD	8169	APR 16	APR PSYCH SRVCS	2,565.00
JEAN SEVERSON	28575	MAR & APR	330 MAR & APR EMPLY MILEAGE REIMB	178.20
STAPLES ADVANTAGE	15069	APR 16	APR HS OFFICE SUPPLIES	194.70

5/03/16 G/L DATE: 05/2016

Batch Nbr: 258540

Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
TANYA KAVICKY-MELS	21550	APR 2016	APR CONF EMPLY REIMB	46.86
JULIE TOYNE	5555	APR 16	APR B-3 THERAPY	4,775.46
	21046	APR 16	APR CHILDREN'S COP	1,485.00
WI DEPT OF JUSTICE RECORD CHEC	37970	G1141&G1993	MAR BACKGROUND CHECKS .	100.00
WISCONSIN DOCUMENT IMAGING	5999	067576/067582	APR HS LEASED COPIERS	484.56
KATHLEEN ZAK	5184	APR 2016	APR EMPLY REIMB/MEAL	14.75

Batch Total: \$44,204.29 ***

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204	23				SUBMITTED FOR PAYMENT, BATCH #258522 - 2016 SRC/ADRC vouchers to date. April processing		\$ 71,4	42.71		various - as attached
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* S U M M A R Y * SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

Abrelsec, 2nd batch, April, 2016

MEETING DATE

HS_	Resource	Center
	DEPAI	TMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

G/L DATE: 04/2016

Batch Nbr: 258522

G/L DATE: 04/2016 Batch Nk	r: 258522			
Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
AMY L KONOP	18248	18248 APR2016	24 APR MOW MILEAGE REIMB	12.96
ABBY VANS INC	16735	18573 MAR2016	D2D TAXI-MARCH 2016	54,028.70
ADVANCED DISPOSAL SERVICES	18928	18928 MAR2016	MAR DISPOSAL - SRC	185.78
BARBARA J SNOW	15999	15999 APR2016	11.20 APR EMPLY MILEAGE REIMB	6.04
BOETTCHER COMMUNICATIONS, LLC	17949	14317 SRC	D2D MARKETING	1,560.00
BROTHERS DAIRY	257	257 MAR2016	RAW FOOD	549.00
CELLCOM WISCONSIN RSA 10	4818	4818 032016	ADRC/SRC MAR CELL CHRGES	291.25
GARY HANSON	13074	13074 MAR2016	52 APR EMPLY MILEAGE REIMB	28.08
JENNIFER BENDER	20934	20934 MAR2016	43 MAR EMPLY MILEAGE REIMB	23.22
JESSICA HOLLAND	19650	19650 MAR2016	88.60 MAR/APR EMPLY MILEAGE REIMB	47.84
MARGARET B HATALA	21056	21056 APR2016	APR SUPPORT GROUP	199.61
MANNS STORE	18770	18770 MAR2016	RAW FOOD	552.90
MEAT PROCESSORS INC	6544	6544 MAR2016	107741C/RAW FOOD	156.69
REINHART FOOD SERVICE	26500	26500 MAR2016	720761/RAW FOOD	3,769.63
SHERRY PESCH	3394	3394 MAR2016	FIN MGMT-JT	41.00
SPECIALIZED SERVICES LLC	7694	1710 SRC	MAR SHC-CK	78.15
STAPLES ADVANTAGE	15069	15069 SRC0316	MAR SRC/ADRC SUPPLIES	366.75
STURGEON BAY UTILITIES	30820	30820 MAR2016	MAR SRC UTILITIES	1,302.82
SYSCO	9328	9328 MAR2016	603300103/RAW FOOD	4,871.63
ERIN SZAKALA	15638	15638 MAR2016	481 FEB/MAR EMPLY MILEAGE REIMB	259.74
TIM BURR	21689	21689 MAR2016	MAY SRC ENTERTAINMENT	150.00
T R COCHART TIRE CENTER	5725	5725 MAR2016	FLAT REPAIR SRC BUS	20.00

WIL KIL PEST CONTROL

Batch Nbr: 258522

6359

2872110 SRC

Vendor Vendor Name No. Invoice # Invoice Description Amount TIP TOP CLEANERS 10942 789081 SRC MAR LAUNDRY/KITCHEN 112.70 UNITED HOME HEALTH SERVICS, LLC 20955 20955 APR2016 APR RSP-EB 2,038.03 WARNER-WEXEL WHOLESALE & POOL 36120 36120 MAR2016 MAR NUTRITIONAL SUPPLIES 577.31 WISCONSIN PUBLIC SERVICE 11363 11363 MAR16 SRC UTILITIES 176.13

APR PEST CONTROL-SRC

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COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

* SUMMARY * SCHEDULE OF VOUCHERS

ADRC/SRC, 1st batch, MAY, 2014

MEETING DATE

HS Resource Center DEPARTMENT

*** SUMMARY FOR COMMITTEE REVIEW ONLY ***

G/L DATE: 05/2016

Batch Nbr: 258550

ANNA VANLANNEN 20950 20950 APR2016 55 APR EMPLY MILEAGE REIMB BARBARA J SNOW 15999 APR16B 22.40 APR EMPLY MILEAGE REIMB NELVIE CAULDWELL 4168 4168 APR2016 22 APR EMPLY MILEAGE REIMB CORPORATE GUARDIANS OF NEW 17122 17122 030416 MAR AND APR GUARDIANSHIP-DB 2	mount 29.70 12.08 11.90 00.00 22.03 33.34 5.94
BARBARA J SNOW 15999 15999 APR16B 22.40 APR EMPLY MILEAGE REIMB NELVIE CAULDWELL 4168 4168 APR2016 22 APR EMPLY MILEAGE REIMB CORPORATE GUARDIANS OF NEW 17122 17122 030416 MAR AND APR GUARDIANSHIP-DB 2	12.08 11.90 00.00 22.03 33.34
NELVIE CAULDWELL 4168 4168 APR2016 22 APR EMPLY MILEAGE REIMB CORPORATE GUARDIANS OF NEW 17122 17122 030416 MAR AND APR GUARDIANSHIP-DB 2	11.90 00.00 22.03 33.34
CORPORATE GUARDIANS OF NEW 17122 17122 030416 MAR AND APR GUARDIANSHIP-DB 2	00.00 22.03 33.34
DAVID C NATHICK 10202 10202 APPOINT	22.03
DAVID C NATWICK 19302 19302 APR2016 40.80 APR MOW MILEAGE REIMB	33.34
DC CLEANING & CONCIERGES LLC 21707 21707 APR2016 APR SHC-BS 8	E 04
COURTIE DEMAREST 1325 1325 APR2016 11 APR MOW MILEAGE REIMB	0.74
DOOR-TRAN 16496 16496 215 APR STAFF HOURS 6	49.00
ECONO FOODS 9674 9674 APR2016 RAW FOOD 8	30.46
GEORGE J KLEIST 17474 17474 APR2016 25.50 APR MOW MILEAGE REIMB	13.75
GREGORY W VIRLEE 19080 19080 APR2016 13 APR MOW MILEAGE REIMB	7.02
HENRY F DITTMER 17282 17282 APR2016 46.90 APR MOW MILEAGE REIMB	25.33
JOSEPH E HEILMAN 5354 5354 APR2016 35 APR MOW MILEAGE REIMB	18.90
JENNIFER BENDER 20934 20934 APR2016 32.50 APR EMPLY MILEAGE REIMB	17.55
JAMES D NEWMAN 17792 17792 APR2016 28.60 APR MOW MILEAGE REIMB	28.60
JOHN M O'GARA 18116 18116 APR2016 13.20 APR MOW MILEAGE REIMB	7.13
JAMIE STEPHAN 17906 17906 APR2016 394 APR EMPLY MEALSITE MILEAGE REIMB 2	212.76
JAMES R STIEFVATER 19378 19378 APR2016 47.80 APR MOW MILEAGE REIMB	25.81
NANCY KURSCHNER 7092 7092 APR2016 57 APR MOW MILEAGE REIMB	30.78
LIFELINE DEPARTMENT \ DCMH 18103 18103 APR2016 MAR/APR LIFELINE-LT 1	L75.00
MARGARET B HATALA 21056 20156 APR16B APR CSG 1	L96.96
N E W CURATIVE REHABILITATION 6470 6470 032016 MAR SHC-SG	84.88

WISCONSIN DOCUMENT IMAGING

Batch Nbr: 258550

5999

88313A SRC

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Vendor Name	Vendor No.	Invoice #	Invoice Description	Amount
JUDITH ORTHOBER	5668	5668 APR2016	444 APR EMPLY MILEAGE REIMB	239.76
ROBIN MARK	20044	20044 APR2016	51.10 APR EMPLY MILEAGE REIMB	27.59
STACEY VOLKMANN	14091	14091 APR2016	398 APR EMPLY MEALSITE MILEAGE REIMB-LG	214.92
STAPLES ADVANTAGE	15069	15069 042016	APR ADRC/SRC OFFICE SUPPLIES	157.69
SUNSHINE HOUSE INC	31820	31820 1Q16	1Q16 5311 PAYMENT	6,845.42
UNITED HOME HEALTH SE	RVICS, LLC 20955	20955 APR16B	APR SHC-TN	686.96
SUZANNE WAGNER	374	374 APR2016	32 APR MOW MILEAGE REIMB	17.28

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Batch Total:

\$12,813.35

1,184.81

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BUREAU OF AGING AND DISABILITY RESOURCES AGING UNIT SELF-ASSESSMENT FOR 2015

County/Tribe: Door County						
Name of Aging Unit Director: Jake Erickson						
Approved by Commission on Aging?	Yes		No		Date	On Upcoming
			Χ		Approved:	Agenda in May

Part I: Compliance With the Wisconsin Elde	rs' Act
Organization of the Aging Unit The law permits one of three organizational options. Which of the following permissible options has the county/tribe chosen?	Check One
1. The aging unit is an agency of county/tribal government with the primary purpose of administering programs for older individuals of the county/tribe.	
2. The aging unit is a unit, within a county/tribal department with the primary purpose of administering programs for older individuals of the county/tribe.	
	X
3. The aging unit is a private nonprofit corporation, as defined in s. 181.0103 (17).	
Organization of the Commission on Aging The law permits one of three options. Which of the following	Check One
permissible options has the county/tribe chosen?	CHECK OHE
1. For an aging unit that is described in (1) or (2) above, organized as a committee of the county board of supervisors/tribal council, composed of supervisors and, advised by an advisory committee, appointed by the county board/tribal council. Older individuals shall constitute at least 50% of the membership of the advisory	
committee and individuals who are elected to any office may not constitute 50% or more of the membership of the advisory committee.	
2. For an aging unit that is described in (1) or (2) above, composed of individuals of recognized ability and demonstrated interest in services for older individuals. Older individuals shall constitute at least 50% of the membership of this commission and individuals	Х
who are elected to any office may not constitute 50% or more of	

the membership of this commission.	
3. For an aging unit that is described in (3) above, the board of	
directors of the private, nonprofit corporation. Older individuals	
shall constitute at least 50% of the membership of this commission	
and individuals who are elected to any office may not constitute	
50% or more of the membership of this commission.	

Part I: Compliance With the Wisconsin Elders' Act (continued)

Needs to be completed only if there have been changes since completing your 2013-2015 plan.

Full-Time Aging Director The law requires that the aging unit have a full-time director as	Does the aging unit have a full- time aging director?	
described below. Does the county/tribe have a full-time aging director as required by law?	Yes X	
	No	
Membership of the Commission on Aging	Is the aging unit in compliance?	
Members of a county or tribal commission on aging shall serve for terms of 3 years, so arranged that as nearly as practicable,	Yes X	
the terms of one-third of the members shall expire each year and no member may serve more than 2 consecutive 3-year terms. In the case of county board members, the requirement is 3 consecutive 2-year terms.	No	

Members of the Commission on Aging (please list)					
Name of Individual	Age 60 and Older (x)	Elected Official (x)	Year first term began		
Chairperson: Charles Wagner	Yes	No	2012		
Sue Clemens	Yes	No	2014		
Christine Andersen	No	No	2012		
Michael Green	Yes	No	2013		
Judy Treptow	Yes	No	2013		
Lynn Ballendux	Yes	No	2014		
Mark Moeller – Serves as a liaison between Human Services Board and County Board, of which he is a member. Attends regularly.	No	Yes			
Roger Tepe – Deputy Director of Human Services, of which the SRC is a program unit. Attends regularly. (Retired 2/2/15)	Yes	No			
Rachelle Gramann – ADRC Director (Hired 02/01/2016)	No	No			

IMPORTANT: If the aging unit does not meet with <u>all</u> of the above, it is required to submit a corrective action plan outlining a timeline and goals, in SMART format, to GWAAR by <u>April 15, 2014</u>. The policy manual outlines such plans which must include involvement of older persons, discussion of such a plan at commission on aging/advisory committee meetings and appropriate public hearing notices, meeting notices, agendas, and minutes. Corrective action plan documents must be sent electronically to GWAAR (sarah.cowen@gwaar.org).

Part II: Activities to Help Older People Advocate for Themselves

1. What does the aging unit do to inform older people about the issues that affect their lives? A monthly newsletter is distributed both on-line and in hard copy to keep seniors up-dated with important topics affecting seniors. Contributing to our newsletter is the ADRC acting director, Help of Door County, the Caregiver Coalition as well as public health and our dietician. Radio spots on local stations helps educate seniors. In addition, we have instituted a lunch and learn program. Guest speaker have provided such topics as "Senior Fraud, and What to do About it", "Being prepared: Wills, Trusts, POAs", "Safety in the Home", "Fall Prevention", "Creative Ways of Dealing with Stress", "How to Talk to Your Doctor", "Coping with Grief during the Holidays", "Suicide Prevention", "Common Eye diseases of the Elderly", "Heart Healthy Eating", "Shopping on a Budget", "Food Safety", individual appointments with our resident nurse, dietician and rehab specialist.

Starting in 2015 the Aging Unit started a program held once a month entitled, "Ask a Dietician." During which our seniors would were provided an opportunity to ask a dietician questions regarding their diet and general nutrition. Starting in May of 2015 our Aging Unit in collaboration with Dr. Luke Staudenmaier held a series of conversations titled, "Aging Gracefully." Participants were invited to discuss the latest research regarding how nutrition relates to dementia, the process of aging and information on why people get tired. In August of 2015 Thrivent Financial came to the Senior Center and held a presentation on living financially well throughout retirement. In February of 2015 our Aging Unit held an ABC&D's of Medicare presentation. In May of 2015 our Aging Unit invited David Lenius from Lenius Insurance and Financial, Inc. to come and present to our seniors on things to know regarding insurance coverage. David also discussed general financial things to keep in mind and to be aware of, such as long term care insurance, retirement plans and the different types of life insurance policies. Towards the end of May Neighbor to Neighbor hosted a book discussion group at the Senior Center on "Still Alice." The goal of the book discussion was to get a dialogue going in the community about Alzheimer's Disease and making Door County a more dementia friendly or minded community. Neighbor to Neighbor also held a discussion group in June of 2015 titled "Necessary Conversations." The goal of this discussion group was to talk about the difficult but necessary conversation families should have between aging parents and their adult children.

2. How does the aging unit teach older people to act as advocates?

At every Senior Advisory/Nutrition Council meeting the document "Seniors Really in Charge" is read and is a constant reminder that seniors can remain in charge of their lives and decisions affecting their lives. Our social workers regularly remind our seniors that they have the ultimate choices regarding health care, living arrangements, etc. Mike Green, a retired detective from our Senior Advisory Board has given presentations regarding senior scams and what to do if faced with a scammer. Bank Mutual provided updates on identity theft, common scams and played Fraud Bingo to offer an entertaining way to talk about this important topic. Faced with the possibility of losing our meal program to a contracted program with the local jail, seniors completed a Meal Satisfaction Survey and commented on how important the meal delivery, as it stands, is to them. They also met with Rob Burke, of UW Extension, who was asked by County Board to evaluate our program. The seniors formed small groups, created petitions, flyers and spoke at board meetings to encourage the county to maintain the senior transportation.

Throughout 2015 our Aging Unit was exploring the possibility of building a new Senior Center. Apart of this process was to hire an Architect Group to come in and survey the older adults who frequent the current Senior Center and ask what they would like to see new or different. They also asked our group what they saw as the purpose for our agency. In preparation for our 2016-2018 Aging Plan, our aging group offered an opportunity for the seniors in our community to provide feedback on our programs and services. Encouraging them to get involved and voice their opinions and comments.

3. How does the aging unit advocate on behalf of the older people it serves?

Through collaboration with community organizations and agencies, the aging unit has become the voice for the seniors. We are a part of Interdisciplinary Team that meets monthly to share knowledge, resources and make recommendations to better serve our high risk seniors. The aging unit is part of the Caregiver Coalition that comes together to advocate for those caring for our seniors. The Caregiver groups provide support/information and makes recommendations on how to meet the needs of seniors and those who care for them. The aging unit works with Help of Door County, a component of which deals with elder abuse, to make seniors aware of how they can better protect themselves. Through a partnership with Ministry Door County Hospital and the Alzheimer's Associations we are able to provide memory screenings and recommendation are made by the memory specialist. We notify the emergency contact with any concerns or changes in health/behavior. We collaborate with local assisted living facilities and do follow-up visitations after placement.

Our Aging Unit is a member of the Northern Door County Health and Wellness group. This group is concerned with identifying needs of Northern Door County residents and finding ways to meet that need. Our Aging Unit is an active participant in those ongoing conversations on expanding or creating services and resources to our Northern Door residents. In 2015 our Aging Unit was asked to participate on a Senior Needs Strategic Planning committee through our local hospital, Ministry Medical Clinic. What came out of the initial meeting were three areas of need our local hospital was going to focus their attention on accomplishing. The first area was centered on creating Respite Care options for our caregivers in our community. The second

area of concern was on enhancing educational opportunities for our growing population of seniors in Door County. Lastly, the third area of focus was placing priority on recruiting a geriatrician. Three separate focus groups were formed and continue to meet. Our Aging Team staff sit on and actively participate within the Respite and Senior Education focus groups.

	Progress Notes	Check if Done			
Section 4 A-F: Statewide Focus Areas	(briefly summarize only those activities				
	completed as of Dec. of each year; explain if a goal was not accomplished)	2013	2014	2015	
	, ,	2013	2014	2013	
Focus 4-A: Development of a System of Home and Community-Based Service	?S		1		
The Aging Unit will collaborate with the Aging and Disability Resource					
Center of Door County to plan for the development of a system of Home					
and Community-Based Services throughout 2013 and will further collaborate to implement the plan throughout 2014 and 2015.					
conaborate to implement the plan throughout 2014 and 2013.	The Aging Unit and the ADRC have been working				
	closer together beginning with group and				
	individual meetings among the staff. The EBS				
	was at the SRC for Med-D and I & A workers are				
	available every Thursday for appointments and				
	to share info/resources.				
	Collaboration, joint meetings, working sessions				
	and training continue between the Aging Unit				
	staff and the staff of the ADRC.				
	The Aging Unit and ADRC are currently co-				
	located and weekly aging team meetings are				
	held on Monday mornings. The Aging Unit and				
	ADRC have implemented a Thursday afternoon				
	"Huddle" where staff get together to discuss				
Goal 1: By 6-30-13, the Aging Unit staff will be trained about the services	case updates and program news. We have				
offered through the ADRC and the procedure/protocol for making referrals to	enhanced our means of communication as a staff				
the ADRC in order for individuals to benefit from options counseling, short	in hopes of providing better services and				
term case management or other such services.	resources to our clients/consumers.	Χ	X	X	
Goal 2: By 12-31-13, the staff of the Aging Unit will offer training to the staff	Individual meetings with all staff members of the				
of the newly created ADRC regarding all of the Aging Units' programs to	Aging Unit informed the staff at ADRC of the				
develop their comprehensive knowledge base to better offer resource options	various job duties. Open communication exists	_			
to individuals seeking information and assistance.	between both units to help define roles and	Χ	X	X	

	responsibilities.			
	Training is on-going.			
	A MOU was in place with the ADRC regarding the			
	EBS services. However, the existing EBS retired in			
	June, 2013. The replacement EBS was hired			
	directly into the ADRC structure with			
	arrangements made for regular office hours at			
	the Senior Resource Center.			
	EBS is located at the Senior and Community			
	Resource Center full-time.			
	Our EBS and I&A Specialists will be completing			
	joint meal site visits to each one of our satellite			
	meal sites once a month. In Door County we			
Goal 3: By 3-1-13, a memorandum of understanding with the ADRC	have four satellite meal sites which include:			
about the services of the Elderly Benefit Specialist will be completed to	Washington Island, Baileys Harbor, Liberty			
ensure that the service is available to individuals seeking assistance from	Grove, and Forestville.			
the ADRC.		Χ	X	X
	The EBS position has been part of the ADRC since			
	9/1/13. However, we anticipate			
	integrating/combining the ADRC, APS services,			
	and the Aging Unit into a single program unit			
	during 2014.			
Goal 4: By 12-31-14, it is anticipated that the Elderly Benefit Specialist	July 8, 2014 the staff of the ADRC moved into the			
position will be integrated into the core of the ADRC staff.	Senior Center.	Χ	X	X
Goal 5: By 12-31-15, it is anticipated that the ADRC and the Sr. Resource				
Center will be co-located in the same building in order to offer easier				
access for individuals seeking the services of the ADRC.	ADRC and Senior Center co-located in July, 2014.		X	X
	Some sharing of staff time did occur during 2013			
	to address this goal. The ADRC promoted all			
	evidence base programs offered at the SRC.			
Goal 6: During 2013, 2014 and 2015, the Aging Unit will partner with the	As a joint staff we continue to offer and promote			
ADRC to provide Health Promotion Evidenced – Based Programs to	evidence based programs such as Living Well			
maintain and improve the health and well-being of Older Adults.	with Chronic disease, Powerful Tools for	Χ	X	X

	Caregivers.			
	At the end of the year 2015, the Senior			
	Center/ADRC wrote a grant proposal in			
	partnership with our local YMCA to bring the			
	Aging Mastery Program to Door County and we			
	were awarded the opportunity to do so starting			
	in the year 2016. Our aging group partnered with			
	the UW-Extension met towards the end of 2015			
	for plans to offer the StrongWomen exercise			
	class. We have a strong interest and will be			
	starting the class soon.			
	0			
Focus 4-B: Older Americans Act Programs				
The Aging Unit will collaborate with the new Aging and Disability Resource				
Center to develop and enhance awareness of Older Americans Act				
Programs through outreach to other community agencies as well as inside				
County Government in order to improve participants' access to services and				
to decrease their vulnerability.				
	Due to 2 changes in leadership at the ADRC			
	during 2013, this goal is still pending and will			
	continue into 2014.			
	Volunteer hours are currently tracked by using			
	Schedules Plus and SAMS. Utilizing these two			
Goal 1: Per the input from the Public Hearing and discussion between the	data tracking systems in conjunction with one			
Senior Services Advisory Committee and the combined Boards, the Aging	another have improved our accuracy of			
Unit will devise a method to improve the accuracy of the volunteer hours,	volunteers and where their time is spend under			
by category, in order to enhance the respect for and value of volunteers in	a certain category.			
2013.			X	X
Goal 2: The Aging Unit will partner with the Door County Volunteer				7.
Center and other organizations to increase the number of trained	Through collaboration with Door County			
volunteers in order to improve the quality and to reduce the cost of	Volunteer Center, NWTC/ Tech Connect, local			
implementing Older American Act Programs, by improving recruitment,	churches, schools, service clubs and radio spots			
training and recognition strategies throughout 2013, 2014 and 2015.	volunteer recruitment continues.	Χ	X	X
				7.
Goal 3: Per input from the Public Hearing and discussion between the	Brochures have been made available to the	Χ	X	X

Combined Boards and the Senior Services Advisory Committee, the Aging Unit staff will develop a strategy, such as a brochure about their services, to be shared with the medical community in order to assist them to make referrals on behalf of older adults by 2013.	hospital regarding all evidence based programs offered at the SRC. Through collaboration with the hospital's dietician, geriatrics specialist, stoke support facilitator, and the rehab specialist the Senior Center programs are advertised throughout the hospital and through their newsletter. Throughout 2015 our Senior Center and ADRC staff participated in the hospital's senior "Hoshin" planning meetings. These meetings were focused on determining the need of our community as it relates to the services we provide our senior residents. These meetings were held by hospital staff but had multiple interdisciplinary participation.			
Goal 4: For each year of the plan, Senior Services Advisory Committee and the Senior Services Nutrition Council will continue to have the "Common Identity for the Aging Network" as an agenda item to read during each of their meetings, in order to keep their focus on Advocacy as	Done at every meeting of the Aging Unit related	>	<	,
they make decisions about programming for Older Adults.	advisory committees. Due to a change in leadership in the Aging Unit in March, 2013, this goal is still pending and will continue in 2014. Presentation were made twice during 2013 to update and increase the understanding of the operation of the senior center. Monthly board report are given as well as board presentations and a member of County Board	Х	X	X
Goal 5: Per discussion between the Sr. Services Advisory Committee and the combined Boards of Social Services and Community Programs, they will have joint meetings two times per year, perhaps in May (Older Americans Month) and November (National Family Caregivers Month) in order to increase the involvement and understanding of Boards Members in relation to the Sr. Center, by 12-2013.	sits on our Senior Advisory Committee and reports to the Human Services Committee. Deputy Director, Roger Tepe acts as a liaison between the the SSAC and all county boards and committees. Due to the demands of Human Services Board it was decided to amend this goal			

	and proceed as indicated.			
Focus 4-C: Alzheimer's Disease				
The Aging Unit will partner with the Door County Caregiver Coalition to increase the public's awareness of the symptoms of Alzheimer's disease, caregiver needs, and the available resources to assist with care throughout 2013, 2014 and 2015.				
2010) 2011 and 2010.	Updates and new resources are continually being			
Goal 1: By 6-30 of 2013, 2014 and 2015, the Caregiver Coalition, the Door County ADRC, and the Aging Unit will update the resources regarding Alzheimer Disease and other Dementias in the Door County Resource	made available through the Door County Resource Guide. In November of 2014 the Caregiver Coalition group started holding Memory Cafés. These Memory Cafés have been very successful and continue to grow. Throughout 2015 we had a group meet regarding the Memory Café program and ways to enhance or improve those efforts. The Memory Cafés are intended to provide a support to those who are experiencing memory loss and their loved ones. The Caregiver Coalition group continues to invite members of other agencies such as the Alzheimer's Association and			
Guide for Older Adults and their Families in order to provide accurate and comprehensive information.	members of the Door County Parish Nurse Network.	Х	X	Х
Goal 2: By 6-30-13, the Aging Unit Staff will train the new Door County ADRC staff about the Alzheimer's Family and Caregiver Support Program and its' funding to increase their ability to serve persons with Dementia and their caregivers	Training was provided to ADRC staff as planned. However, due to staff changes at the ADRC, this goal is on-going in 2014. Staff of the ADRC have received on-going training.	X	X	x
Goal 3: By 12-31-14, the Caregiver Coalition and the Unit on Aging will advocate for an Alzheimer's mini unit for health classes in grades 8-10 in Door County Schools order to increase student's awareness of the characteristics of the disease and to teach them how to communicate with and have a relationship with someone with Alzheimer's disease.	In collaboration with Home Instead and Sturgeon Bay High School a Virtual Dementia Tour will be part of the Life Skills program so students can better understand the challenges of Alzheimer's disease. In the future we plan to offer this		X	x

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	program to all of our county's school district.			
	This goal is an ongoing goal as well. We hope			
	that in the year 2016 and perhaps in the			
	beginning of 2017 we have held at least one			
	aging sensitivity course in all five school districts			
	in Door County. The five different public school			
	districts include: Southern Door, Sturgeon Bay,			
	Sevastopol, Gibraltar, and Washington Island.			
	Presentations and screenings in collaboration			
	with the Alzheimer's Association were made			
	available at the SRC. The Aging Unit also readily			
	promotes similar events held at other locations.			
	Several meetings have been held with the			
	Alzheimer's Association and training with take			
	place Nov. 21 st 2014 in preparation for opening			
	Memory Cafés.			
Goal 4: The Aging Unit, the Door County Caregiver Coalition and the	The Alzheimer's Association is represented on			
ADRC will support trainings offered by the Alzheimer's Association	our Caregiver Coalition and thus information on			
through providing space and promotion of events throughout the plan	upcoming trainings is shared with the rest of our			
years, 2013, 2014 and 2015.	aging unit staff.	Х	Χ	X
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Focus 4-D: Emergency Preparedness				
During 2013, 2014 and 2015, the Aging Unit will continue to collaborate and participate with other Door County agencies to maintain and				
improve our Continuity of Operations and Continuity of Government				
Operations for Door County.				
operations for Boot County.	Lieutenant Jeff Farley at the Door County			
	Sheriff's Department, met with the aging			
	director to formulate a plan in the event of an			
	active shooter. The Aging Services Manager			
	participated in Disaster Action Team Classes.			
Goal 1: The Aging Unit staff will continue to participate in any Emergency	Meetings have been held with emergency			
Preparedness trainings or exercises that are offered by the County of Door	manager, Dan Williams, and the emergency			
throughout the years of the plan.	manual for our center is being revised.	Х	Х	X
unoughout the years of the plan.	manual for our center is being revised.	^	^	۸

	Our ADRC Director and Aging Services Manager			
	walked through our local emergency			
	preparedness material with the majority of our			
	Aging Unit staff. There were multiple meetings			
	to discuss emergency preparedness and safety.			
Goal 2: The Senior Resource Center will continue to partner with the Red				
Cross, the Public Health Department and the Door County Emergency				
Services Department to be a designated Emergency Shelter throughout the	The SRC remains a designated Emergency			
years of the plan.	Shelter.	Х	Χ	X
	Emergency Preparedness materials have been			
	distributed through the newsletter, at the SRC			
Goal 3: Emergency Preparedness materials will be distributed 2 times per year	and emergency kits were put together for			
through the Door County Senior Resource Center newsletter throughout 2013,	distribution to our homebound senior			
2014 and 2015	population.	Х	Χ	X
Goal 4: Emergency Preparedness materials will be updated for the Door				
County Resource Guide for Older Adults and their families by 6-30 of				
each year, 2013, 2014 and 2015, by the Aging unit staff.	Updates are on-going.	Χ	X	X
	The local fire chief gave a presentation on			
	"Safety at Home" at the SRC.			
	Local police officer presented "Home Safety".			
	Drills are conducted.			
	Due to staff changes, no programming was held			
Goal 5: During Fire Safety Month - September of each year of the plan, the	regarding fire safety throughout 2015. There			
Aging Unit will schedule fire drills at the meal sites and also provide a	were also no scheduled fire drills at any of the			
training event through the Sturgeon Bay Fire Department.	meal sites.	Х	X	
Goal 6: During every year of the plan, the Aging Unit will coordinate with				
"Feed My People", our local food pantry to supply extra food for our Meals	Coordination with Feed My People, took place			
on Wheels participants to have on hand, in the event of an emergency.	during the holidays to provide additional food.	Х	Χ	X
Goal 7: The Unit on Aging will partner with the Interdisciplinary Team for				
Elders and Adults at Risk of Abuse or Neglect to identify and implement a				
system for care givers to voluntarily register their loved ones to increase	This goal was put on hold until the Silver Alert			
options for safety and support during an emergency by 12-31-15.	was put into place and evaluated.			
Goal 8: The Unit on Aging will publish information about the Public	Schedules of immunizations were published in			
Health Department's scheduling of Immunization clinics and will publish	the newsletter. An influenza immunization clinic	Χ	X	X

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updated information about the particular disease(s) covered by the	was held at the SRC. Hand-outs on Emergency			
immunization in the Aging Unit Newsletter. Hand-outs on Emergency	Preparedness were made available to all seniors.			
Preparedness will be provided by the Aging Unit and Emergency Services	The Red Cross provided classes on Emergency			
and will be available at the clinics throughout the years of the Plan.	Preparedness.			
Goal 9: In the MOU with the ADRC (to be developed by May, 2013),	·			
language will be included to clarify the respective roles and				
responsibilities of the ADRC and the Aging Unit related to emergency				
preparedness for Door County's senior population.	The MOU was developed.		X	X
	•			
Focus 4-E: Evidence-Based Prevention Programming	T			
To improve the health and well-being of older adults, the Aging Unit will				
offer evidenced-based prevention programming through partnerships				
with other agencies and trained individuals, throughout 2013, 2014 and				
2015.				
	Living Well with Chronic Illness was offered once			
	and Title III-D Funds were used to train a			
	volunteer instructor to be able to offer			
Goal 1: By 12-31-13, 12-31-14, and 12-31-15, the Aging Unit will continue to	additional classes.			
offer two sessions of the Living Well with Chronic Illness classes by	Living Well and Powerful Tools for Caregivers			
collaborating with trained facilitators, using Title Ill-D funds.	have been offered.	Χ	X	X
	The Aging Unit and the ADRC participated jointly			
	in the YMCA Health Fair.			
	Joint radio spots on 2 local radio stations were			
	done. ADRC/Aging Unit held Open Houses at two			
	new satellite sites. Advertising in local papers is			
	on-going.			
	The ADRC and the Aging Unit participated			
	together in multiple outreach opportunities			
	throughout 2015. Again, both the Aging Unit and			
	the ADRC participated in the senior strategy			
	meetings at the local hospital. The Aging Unit			
Goal 2: The Aging Unit will collaborate with the Door County Aging and	and ADRC participated in both a Sturgeon Bay			
Disability Resource Center to increase participation through developing	and Northern Door County Community Health			
outreach strategies throughout the years of the plan.	Fair.	Χ	X	Χ

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	A partnership with the Arthritis Foundation has			
	allowed us to offer 2 weekly arthritis exercise			
	classes.			
	"Gentle exercise" will begin at our new satellite			
	site. Yoga is being offered as well as Zumba Gold			
	twice weekly.			
	Due to a loss in a facilitator, Yoga is no longer			
Goal 3: By 12-31-14, a new health promotion-type class will be offered by	offered at the Senior Center. However, Zumba			
the Aging Unit in collaboration with other community agencies and the	Gold and "Gentle exercise" continue to be			
Door County Aging and Disability Resource Center.	offered.	Χ	X	X
Goal 4: The Aging Unit will continue to offer two sessions of the "Powerful	Powerful Tools for Caregivers were offered twice			
Tools for Caregivers" classes, through trained providers from our local	during 2013 and 2014.			
Caregiver Coalition, to increase the skill level of caregivers while	Powerful Tools for Caregiving was offered once			
, e	during 2015.	v	X	X
decreasing their stress levels for each year of the Aging Plan.	during 2013.	Χ	/	^
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Focus 4-F: Family Caregiver Support (NFCSP) Please answer the following whe		^	X	^
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Focus 4-F: Family Caregiver Support (NFCSP) Please answer the following whe Area 1: Provide information to caregivers about available services.	re the aging unit is the direct services provider.			
Focus 4-F: Family Caregiver Support (NFCSP) Please answer the following whe Area 1: Provide information to caregivers about available services. The Aging Unit will continue to distribute a Resource Guide for Older Adv	re the aging unit is the direct services provider.			
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Disability Resource Center staff by 6-30-2013.	ADRC staff. However, staff changes at the ADRC necessitate that this goal continue into 2014.			
	The ADRC was provide information and training.			
	Ongoing education is provided to ADRC staff as			
	questions arise. Staff of the ADRC have attended			
	conferences to become better informed.			
	The ADRC is provided information regarding			
	both the AFCSP and NFCSP during Monday			
	morning all Aging Team meetings. Caregiving			
	information is provided on an ongoing basis as			
	the year progresses.			
	This goal will continue into 2015.			
	Due to staff changes this goal was never fully			
	accomplished. However, our Aging Unit has been			
	involved and participates in Ministry Door			
	County Medical Center's senior strategic			
	planning meetings. During these meetings it has			
	been discussed that medical providers need to			
	be given more information on the community			
Goal 2: The Aging Unit and the Caregiver Coalition will identify materials	resources and how they can encourage patients			
for and will offer information to medical providers and especially intake	to access certain resources that can connect			
nurses about the identification of care givers by 12-31-14.	them to appropriate and needed services.			
	The 3 rd ADRC director was recently hired, so this			
	goal will carry over into 2014.			
	The Resource Guide is available on the ADRC			
Goal 3: The Aging Unit will partner with the Door County ADRC	website. The Resource Guide and Senior			
Director to update the ADRC website to include the Resource Guide and	Newsletter is available on the county website.			
other social media options by 12-31-2013, 12-31-14 and 12-31-15.	These efforts continued throughout 2015.	Χ	Χ	X
Goal 4: The Aging Unit staff in collaboration with the Caregiver				
Coalition, and the Kinship Care Program will provide a resource guide to	Due to staff changes, this goal will continue into			
Grandparents and other relatives raising children by 8-31-13.	2014.		X	X

	Due to staff demands this goal was not reached.			
	We have a Kinship Care Resource Kit available to			
	help Grandparents and other relatives raising			
	children.			
	The Kinship Care Resource Kit was still made			
	available to Grandparents raising grandkids.			
Area 3: Provide individual counseling, organization of support groups, and t	raining to caregivers to assist in making decisions a	nd solv	ing problen	าร
relating to their caregiver roles.				
The Aging unit will continue to coordinate with the Caregiver Coalition to		nd adv	vocacy for	
caregivers to support them in their roles throughout 2013, 2014 and 2015.		· · · · · · · · · · · · · · · · · · ·		
	One session of Powerful Tools was offered in			
Goal 1: The Aging Unit will collaborate with the Caregiver Coalition to	2013, two sessions were offered in 2014.			
continue to organize and sponsor Powerful Tools classes, 2 sessions per year	One session was offered in 2015.			
throughout 2013, 2014 and 2015.			X	X
	A Caregiver luncheon was held on Nov. 5, 2013			
	and was attended by 90 participants.			
	Nov. 13, 2014 a Caregiver Luncheon was held at			
	Stone Harbor and was well attended and much			
	appreciated.			
	In November of 2015 there was a Caregiver			
	Luncheon held at Stone Harbor. The luncheon			
Goal 2: The Coalition will work together to sponsor an annual Caregiver	was well attended and appreciated by caregivers			
Recognition Luncheon during each year of the plan -2013, 2014 and 2015.	residing in our community.	Х	X	X
Goal 3: Coalition members will explore the beginning of a group to serve male				
caregivers by 12-31-14.	facilitator nor funds to pay a facilitator.			
	Family caregivers are given, on an on-going basis,			
	information to connect to a telephone support			
	group through the ADRC of Kenosha.			
Goal 4: The Caregiver Coalition will connect Family Caregivers with a	Information on a telephone caregiver support			
telephone support group such as the Telephone Group organized through the	group was provided to our ADRC staff on the			
ADRC of the Kenosha County Aging and Disability Resource Center during	tele-support group in Manitowoc through the			
1	ADDC of the Laborate and		V	

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each year of the plan (2013, 2014 and 2015).

ADRC of the Lakeshore.

Area 4: Provide respite care to enable caregivers to be temporarily relieved f	rom their caregiving responsibilities.			
The Aging Unit will continue to connect caregivers to NFCSP funding as w to increase their positive caregiving capacity throughout 2013, 2014 and 20		careg	iving stress	in order
Goal 1: Two radio spots focusing on Respite for Caregivers will be developed by the Aging Unit in collaboration with the Door County Caregiver Coalition by 12/31/13.	This goal has not been addressed. Radio spot have been done on our local radio program.		X	X
Goal 2: The Caregiver Coalition members will write at least one article focusing on Respite Care services in the Sr. Center newsletter for each year, 2013, 2014 and 2015.	An article on Respite Care services was included in the monthly SRC newsletter monthly each year.	X	X	X
Goal 3:				
The Aging Unit will continue to provide Information and Assistance to car that they perform to keep their loved one at home throughout the years of	the plan. This has been spearheaded by our APS social	n with	some of the	chores
Goal 1: Throughout the plan period (2013-2015), the Aging Director will	worker, who is also leading the Caregiver Coalition.	X	V	
recruit and monitor contracts with agencies that provide supportive services. Goal 2: The Caregiver Coalition will explore and recruit volunteer resources to assist with simple home repairs for caregivers by 12-31-14.	In progress; on-going.	X	X	X
Goal 3: Throughout each year of the plan, the Aging Unit staff and the caregiver support group facilitators will offer to arrange transportation for caregivers to attend groups, training sessions or the annual luncheon through a referral to the Sr. Center bus, to Door-Tran, the County transportation and information referral resource, or to Door2 Door Rides, our shared ride taxi service.	Staff has made transportation available as need to Caregiver functions.	х	X	x
Goal 4: Throughout each year of the plan, transportation options will be updated in the Door County Resource Guide for Older Adults and their				
Families by the Senior Center Staff.	Updated as needed.	Х	X	X
	The Coalition continues to meet regularly and			

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Caregiver Coalition Coordination:

work toward common goals to improve the

services and support for caregivers in our

The Door County Caregiver Coalition meets 6 times per year and the members represent the following organizations/agencies: Neighbor to Neighbor (volunteer caregivers and an equipment loan closet), University of Wisconsin –Extension (Family Living Agent), Ministry Door County Medical Center Memory Clinic, Washington Island Community Health Program, Door County Department of Human Services, Door County Aging Unit, Unity Hospice and Palliative Care, HELP of Door County, Door County Ministry Rehabilitation, Parish Nurses of Door County, and N.E.W. Curative Adult Day Services, ADRC of Door County, Caregivers Support Group of Door County.	community.			
	With the retirement of the Aging Unit Director as of 2/01/13, our APS social worker took over organizing and scheduling the Coalition meetings in 2013. This responsibility will continue with APS in 2014. The Coalition recruited a new member — from Unity Hospice — for 2014 and will continue to sponsor training events, host the annual caregiver appreciation luncheon and assess for gaps in services.			
Throughout the years of the plan, the Aging Unit Director will continue to organize and schedule the meetings of the Coalition six times per each year while the Coalition will continue to recruit new members, support and sponsor training events, assess for gaps in services and plan the annual caregiver recognition luncheon.	In 2015 a few new members were recruited to participate in our Caregiver Coalition meetings. Those new organizations are the following: Alzheimer's Association and Northern Door Health and Wellness group.	X	X	X

Part IV: Progress on the Aging Unit Plan for Serving Older People – National Family Caregiver Support Program
This section is not required for tribal aging units.

Caregiver Coordination: To ensure coordination of caregiver services in the county, the aging unit shall convene or be a member of a local family-caregiver coalition or coordinating committee with other local providers who currently provide support services to family caregivers. The aging unit shall coordinate activities under this program with other community agencies and voluntary organizations providing services to caregivers.

Does the aging unit facilitate a local caregiver coalition?							
X YES X or NO							
If No, please state which local agency facilitates this coalition:							
If Yes , was information provided in the 3-year plan on the coalition's members?							
X YES X or NO							
If Yes, were goals stated for 2013 to coordinate caregiver services?							
X YES X or NO							

Please provide a brief update on coalition activities conducted in 2013:

In 2/2013, the Coalition met with a representative of the newly formed group "Grandfamilies" to learn about their activities to support grandparents and other relative caregivers in Door and Kewaunee Counties. The Coalition invited this representative to become a member and committed to working together with the Grandfamilies organization to accomplish our joint mission.

On 4/04/13, the Caregiver Coalition co-sponsored (with the Helen Bader Foundation and Ministry Memory Clinic Door County) a presentation for family caregivers and local professionals entitled "How We Age in Door County". Dr. Marc Agronin, a nationally known geriatric psychiatrist, author and speaker, gave a thought-provoking presentation on the meaning of growing older. His presentation was introduced by Human Services Deputy Director Roger Tepe, who provided a local perspective on how older people are currently being supported and a vision for the future of older adult services in Door County. The entire event was preceded by a community healthy aging fair.

The Coalition began organizing a series of book discussion groups centering on the book "Still Alice" by Lisa Genova. One member organization, Neighbor-to-Neighbor, has taken the lead on this and will be hosting the discussion groups in 2014.

The Coalition hosted our annual Caregiver Appreciation Luncheon on 11/05/13. 90 people attended the free event, which included opportunities for relaxation, socialization and education. There were two presenters: Pat Scieszinski, social worker from Unity Hospice, gave a presentation entitled "Caring for the Caregiver", while Christy Wisniewski, geriatric outreach specialist with Ministry Memory Clinic, conducted a presentation on the benefit of evidence-based programs such as Powerful Tools for Caregivers, Living Well with Chronic Conditions and Stepping On.

A new Coalition member – from Unity Hospice – was recruited and joined the Coalition beginning in 2014. She and a colleague will become trained to facilitate Powerful Tools for Caregivers in 3/2014. With six trained facilitators, we plan to offer the classes three times per year instead of two.

Two sessions of the Powerful Tools for Caregivers educational series were offered by the Coalition in 2013. The class was offered in Sister Bay in May/June and in Sturgeon Bay October/November. The Coalition also explored the possibility of utilizing a new caregiver educational program, entitled "Caring for You, Caring for Me".

Please provide a brief update on coalition activities conducted in 2014:

The Caregiver Coalition continues to meet regularly (six times per year) to plan, implement and advocate for educational events, support and services to caregivers in our community. Three new Coalition members were added in 2014 – Beverly Bartlett of the Alzheimer's Association, Ali Fortney of Unity Hospice and Palliative Care and Jake Erickson of the ADRC of Door County. One long-term Coalition member, Pam Peterson, Family Living Agent with UW-Extension, resigned her position due to a move out of state. It is hoped that her replacement will be interested in joining the Coalition in 2015.

The Caregiver Support Group of Door County, initiated by the Aging Unit in 2001 and expanded over the years, continues to be professionally facilitated and offered in four locations throughout Door County. Twice monthly meetings are held in Sturgeon Bay, Sister Bay and Brussels. Meetings are held on Washington Island one time each month.

Three sessions of the educational series Powerful Tools for Caregivers were offered during 2014. The class took place in Sturgeon Bay in January/February and in Sister Bay in September/October. An additional class was offered in Sturgeon Bay in August/September but a lack of participation caused it to be cancelled. Two new individuals were trained as facilitators during 2014 and a connection was made with an additional trained facilitator. Unfortunately, one of our seasoned facilitators moved out of the area in late 2014 as well. We intend to continue to offer Powerful Tools for Caregivers three times per

year in future years.

In early 2014, the Coalition advocated for the needs of seniors and their caregivers by providing anecdotal information and feedback during an inperson survey of the Aging Unit's nutrition program.

The program was being reviewed for effectiveness and potential change. Input from Coalition members helped to ensure that the perspective of family caregivers was understood.

A series of book discussion groups, centering on the book "Still Alice" by Lisa Genova, were held in the community during 2014. Coalition member, Ann Bennett, of Neighbor-to-Neighbor, spearheaded this project. 48 community members read the book as a part of the project and 34 of these individuals participated in the discussion groups. Additional discussion groups are being planned for the winter of 2014-2015.

The Coalition began discussing the concept of Memory Cafes in early 2014. Susan McFadden initially met with Coalition members to share her knowledge of Memory Cafes. From there, additional meetings were held and community interest gauged. Coalition member, Carol Moellenberndt, Parish Nurse and facilitator of the Door County Parkinson Support Group, has taken on responsibility for spear-heading this project. Training for volunteers is scheduled for 11/21/14 and plans are in process to start a Door County Memory Café in early 2015.

The Coalition hosted its annual Caregiver Appreciation Luncheon on 11/13/14. This free event offers family caregivers an opportunity for socialization, relaxation, education and connection to community resources. Lynda Markut of the Alzheimer's Association is our speaker and her presentation is entitled "It wasn't Supposed to be This Way: Finding Meaning in Caregiving". It is anticipated that between75-100 participants will take part in this event.

	The Caregiver Coalition continued the series of book discussion groups throughout 2015, centering on the book "Still Alice" by Lisa Genova. Coalition member, Ann Bennett, of Neighbor-to-Neighbor, spearheaded this project.					
	The Coalition continued to offer monthly Memory Café events for those individuals who might be experiencing minor to moderate memory loss.					
	The Coalition hosted its annual Caregiver Appreciation Luncheon on 11/19/15. This free event offers family caregivers an opportunity for socialization, relaxation, education and connection to community resources. Joan Litwitz from the Greater Wisconsin Agency on Aging presented to our group on the Share the Care Project. We also had another guest speaker Jean Severson come and conduct a presentation on the Time Exchange Program of Door County. It is anticipated that between 75-100 participants will take part in this event.					
It is expected that each aging unit will have at least one loc	or Serving Older People – Local Priorities cal focus area/goal for each year of the plan. Please provide als accomplished in 2014.					
To promote community collaboration, the Door County Aging Unit w partner with several other related groups to promote outreach to vulnerable older adults to decrease their risk of abuse and neglect whincreasing their safety awareness, throughout 2013, 2014 and 2015.	ile This expectation was waived due to lack of					
Goal 1: By 6-1-13, the Aging Unit in conjunction with the Senior Service Advisory Committee and the Door County Interdisciplinary Team for Adults and Elders at risk of abuse or neglect will prepare a document	ees					

Please provide a brief update on coalition activities conducted in 2015: The Caregiver Coalition continues to meet regularly (six times per year) to plan, implement and advocate for educational events, support and services to

caregivers in our community.

indicating the history of reports along with a position paper shout the			
indicating the history of reports along with a position paper about the issues related to abuse and neglect of older adults in Door County.			
Goal 2: By 6-30-13, during the month (June) of World Elder Abuse			
Awareness Day, the above named groups will invite agencies and other			
entities who serve older adults in Door County, to a meeting, with an			
identified facilitator, to develop strategies to address older adults' isolation to			
decrease their risk of abuse and neglect.	N/A		
	IN/A		
Goal 3: By 12-31-13 the information generated at the meeting, will be			
presented to the Human Services Board by the Aging Unit, Advisory			
Committee and the Interdisciplinary Team to inform them of the issues that			
make older citizens vulnerable and the need for programs to decrease the reasons for their vulnerability.	.N/A		
,	I.N/A		
Goal 4: By 2-15-14, the Aging Unit will organize work groups to work on			
resource development and implementation plans, generated at the meeting, in	N1/A		
order to connect older adults to services that will decrease vulnerability.	N/A		
Goal 5: By 6-30-14, a review process will be identified by the initial			
sponsoring agencies to evaluate progress and to identify needed resource			
development to continue to increase older adults' safety awareness and this			
information will be shared in some fashion during the annual event of World	N1/A		
Elder Abuse Awareness Day (June).	N/A		
Goal 6: By 12-31-14, a new document will be created reflecting progress and			
to set priorities for the plan year of 2015 that will identify service gaps and			
target resource development objectives that are either new, need expansion or			
other revisions in order to empower older adults to protect themselves.	N/A		
	Mike Green, retired detective, gave a		
	presentation on prevention of senior scams		
Goal 7: By 6-30-15, the initial sponsoring agencies will sponsor a	and identity fraud. Pinwheels were placed		
meeting/event during the month of World Elder Abuse Awareness Day (June)	outside the Senior Center representing the		
similar to the one organized in 2013 and 2014 to continue to work to prevent	number of reports of elder abuse during		
the abuse/ neglect of vulnerable older adults.	2013-2014.	X	

Part VI: Significant Accomplishments or Issues Not Included in the Aging Unit Plan

(Unplanned accomplishments or issues that had a significant impact on the aging unit's activities during 2013. This is not meetings attended or actions that fit under plan goal objectives but may reflect noteworthy events or achievements.) This section is not required.

Significant unplanned accomplishments (briefly describe).

One of our main focusses this year was our meal program. A meal study was completed at the request of our Board. Our numbers show significant growth. We opened 2 satellite sites to provide meals and services. We extended our hours from 7:00am -6:30pm and re-opened our soup and salad bar from 3:30-6:00pm. We have expanded our frozen meal program to cover more of our rural area.

In July the ADRC joined Aging Unit. There was much preparation to make this happen. But it has been advantageous for our consumers who now have all services at a single point of entry.

We began intergenerational programs by reaching out to the local schools, Boys and Girls Club, Big Brothers & Big Sisters, Door County Young Ambassadors. Seniors are providing learning opportunities for homeschoolers; children from the Boys and Girls Club have joined the seniors for activities and presentations; high school art students entered a Mother's Day art contest judged by the seniors; a history project was completed through interviews of the seniors from local high school students. Middle school and high school bands and choirs have also performed at the Senior Center.

We experienced some staff turnover throughout 2015. Both our Aging Program Manager and ADRC Director retired towards the end of the year. We hired a new Aging Program Manager in August and more recently hired our new ADRC Director in February of 2016. As a whole our aging group (APS, ADRC, and Senior Center) was pretty busy with our County's long term care transition to FamilyCare.

The box below to be completed by GWAAR staff

Reviewed by (last name): Ellis	Date Reviewed: 4/10/15						
Aging Unit Self-Assessment Approved?	XYesNo (check one)						
If No, provide brief comment for why this self-assessment is not approved.							
Is there a need for a Corrective Action Plan?	YesXNo						
If Yes, please contact Older Americans Act Prog john.schnabl@gwaar.org	ram Manager John Schnabl at						
Letters of approval will both be emailed to the d chairperson's copy to them on behalf of GWAAR	·						
Aging Unit Self-Assessment Approval Letter ser	nt to Director?XYesNo						
Aging Unit Self-Assessment Approval Letter sent to Committee Chairperson?							
XYesNo							
Date approval letters sent: 4/14/15							



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

421 Nebraska Street Sturgeon Bay WI 54235 Main Line: 920-746-7155

Joseph Krebsbach, Director 1st Floor Fax: 920-746-2355 2nd Floor Fax: 920-746-2349

dhs@co.door.wi.us

Joseph Krebsbach 421 Nebraska St Sturgeon Bay WI 54235

RE: Kayla O'Dell

I have accepted a position with a different agency. I am grateful for my time with Door County. I am putting in my resignation and wish to have my last day as 04/29/2016.

Thank you,

William () Della

Kavla O'Dell

HUMÂN RESOURCES

APR 18 2016

TIME:

AM / PM

Request to Refill Position

Must follow the process in the Administrative Manual, Section 2.04 – Creation and Classification of Positions.

DEPT. HEAD TO COMPLETE:
Department Door County Human Services Position Title: Social Worker-Children & Families Unit
Position Status:
⊠ Full Time
Reason for Vacancy: Separation Transfer Retirement Resignation Death
Discuss turnover with the department in the previous 18-24 months: Significant
Transfer: why is the new position more attractive to employee than current one? N/A
Name of Current / Most Recent Incumbent: Kayla O'Dell
Is office space, furniture, and office equipment available?
If not, explain plan to obtain:
Reviewed, updated, and submitted to Human Resources: Job Analysis Questionnaire Job Description
Completed by: Joe Krebsbach Date 5-2-16
Financial Information:
Salary Range: Is the Position Budgeted: X Yes No
Funding Source: Levy % 85 Grant Funded % State Funding
Fiscal Impact, from Finance Department, completed and attached
HR TO COMPLETE:
EEO <u>OZ - PROFESSIONALS</u> FLSA Status <u>EXEMPT</u>
Human Resources has performed a position review? (HR initial)
The Job Analysis and Job Description have both been updated and signed? KH/KE (HR initial)
Approvals:
County Administrator Date 5-5-2016
Oversight Committee Chair Date
I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may
participate per Admin. Manual section 2.04.
participate per Admin. Manual section 2.04. I want to participate I do not wish to participate
☐ I want to participate ☐ I do not wish to participate

County of Door

Social Worker - Child & Family Services Unit -Access / Ongoing

	Child & Family	Last Revision	10/26/2015
Job Title	Social Worker - Child & Family	Last Nevision	10/20/20
	Services Unit – Access/Ongoing		00/04/0045
Department	Human Services	HR Reviewed	09/24/2015
Division	Children & Families	Employee Group	General Municipal Employee
Report To	Child and Family Services Unit	FLSA Status	Exempt
	Supervisor		
Pay Range	13	EEO Code	02 – Professionals

General Summary

This position is responsible for juvenile court intake, access/assessment, and/or ongoing services in either Child Protection and/or Juvenile Justice Cases. Workers will have a primary area of focus. However when necessary to balance workload between the various positions in the Child and Family Services Unit, the Unit Manager may adjust assignments from one area to another.

Duties and Responsibilities

Essential Job Functions

- 1. Receive and process referrals in a timely manner following all statutory requirements, timelines, State standards of practice, and county policies.
- 2. Complete all required documentation in ewisacwis as well as any necessary documentation required for the courts.
- 3. Deliver permanency efforts with each child / juvenile in placement directed toward family reconciliation, guardianship, or termination of parental rights/adoption.
- 4. Enforce compliance monitoring and follow-through on formal or informal conditions of the child/ juvenile or family.
- 5. Provide case management throughout the life of the case.
- 6. Arrange out-of-home placements for children / juveniles, as necessary, in the least restrictive setting that will meet their needs.
- 7. Provide Juvenile Court (custody intake) services on a rotating basis during evening, holiday, and weekend hours (and during regular business hours, when assigned).

Other General Job Functions

- 1. Work collaboratively with Community Partners and agencies to facilitate effective case management.
- 2. Other responsibilities may include coordinating and facilitating the Child Health Team, completing Kinship Care assessments, foster home licensing, coordinating and facilitating administrative reviews, manage the electronic monitoring program, and facilitate the BRICK program.

Requirements

Training and Experience

- 1. Graduate with a BA / BS degree (or higher) from a certified college or university program in Social Work.
- 2. <u>Certification</u> as a <u>Social Worker</u> (or higher level of Social Worker certification) with the State of Wisconsin Department of Regulation and Licensing,
- 3. Previous experience providing social / human services and supervision to children / juveniles / families preferred.

County of Door

Social Worker - Child & Family Services Unit -Access / Ongoing

Knowledge, Skills, and Abilities Required

- 1. Working knowledge of Chapter 48 and Chapter 938.
- 2. Working knowledge of child maltreatment, juveniles in need of protection or services, and delinquency.
- 3. Working knowledge of child development, including typical behaviors / parenting techniques / and disciplinary methods that are age appropriate for children and juveniles.
- 4. Working knowledge of Restorative Justice including accountability, competency building, & community protection.
- 5. Adhere to social work ethics and boundaries and exercise sound professional judgment and participate in appropriate continuing education.
- 6. Working knowledge of computer software, including but not limited to: Microsoft Office, WORD, Outlook, Excel, AS400 applications, eWiSACWIS, TCM, etc.
- 7. Working knowledge of other community resources available to provide assistance to families, if needed, but will train.
- 8. Possesses a high level of communication skills, especially in engaging clients, interviewing techniques, oral communication, and report writing. Must be able to relate to all levels of age and social strata, and be capable of making professional courtroom presentations based on fact.
- 9. Ability to use tack and courtesy in maintaining an effective working relationship with department employees, county supervisors, county officials, and general public.
- 10. Ability to read, comprehend, and communicate, both verbally and in writing as well as effectively administer by written, and verbal communications.

Physical & Working Conditions

Nearly 100% of time work is performed in a normal office setting with little or no discomfort from temperature, dust or noise. Interacting with other employees, general public, whether walking in or on the telephone may be encountered.

Over 75% of work is performed seated at a desk, working on a computer keyboard and/or telephone with about 10% of work performed standing and walking. Over 75% of the work is performed by talking, hearing, and using both far and near vision. Occasional lifting is required up to 10 lbs. (i.e. paper and equipment).

Potential for physical harm exists during home visits or when the worker is engaging hostile or emotionally irate clients. Limited office space may produce some overcrowding and may cause distraction. Lack of office privacy requires careful attention to confidentiality to safeguard client personal information.

In an effort to provide for continuity of County government and to cope with the problems of the emergency, you may be required to work during a proclaimed state of emergency, consistent with Sec 323.14 Wis. Stats. and County emergency management plans and programs.

The above is intended to describe the general content of the requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or requirements. They may be subject to change at any time due to reasonable accommodation or other reasons.

Approvals:

Jøseph A. Krebsbach, Human Services Director

Date

(2/8/15

Kelly A. Hendee, Human Resources Director

Date

Door County Huma Form #: 2015-05	n Resources	Title: Job Analysis Questionnaire
Date Created O4/2015	Date Revised 10/2015	Admin. Manual or Handbook Reference: Administrative Manual, Section 2.04 – Creation & Classification of Positions
		hild & Family Services Ongoing Services Division Children & Families
Report to: (position t		n reports to the Child and Family Services Unit Supervisor for case assignments, work monitoring, n, and general program direction.

•	
Α.	Job Summary (Purpose): Use two or three brief, specific statements to summarize the overall purpose of the job.
	The position is responsible for the delivery of ongoing services to children / juveniles and their families on eitner a voluntary basis of
	following the completion of Juvenile Court action. Services will continue until the end of Juvenile Court jurisdiction timelines OR until the
	reaches the age of majority / independent living status
	OR
	until a mutually agreed upon closure date (for voluntary child welfare cases).

B. Fundamental duties of the position

- Write one duty per numbered space.
- Rank the duties in order of importance. The most important duty should be number one. 2.
- After listing the specific duties, enter the percentage of time spent on each. 3.
- Indicate which of the items are essential, which is determined considering the following:
 - a. Does the position exist to perform this function? OR
 - b. Are there a limited number of employees who can do this duty? Particularly, to the extent that if this position did not perform this duty, it would not get done? OR
 - Does the function require highly specialized skills or expertise that most other employees do not possess? Would the person be hired specifically because of their skill or expertise in performing the function? (i.e. A draftsman is hired because of their skill in precision drawing).

If "yes" can be answered to any of the above, mark "yes" in the "essential function" column.

Indicate whether other employees in the department perform this function.

5.		% of Total	Essential		Do Others Perf the Same Dut	
Item No.	Duty	Time	Yes	No	Yes	No
1.	Complete required case documentation paperwork in e-WiSACWIS throughout the life of the case (non-placement cases) in a timely manner, as defined by statute / practice / state or local policy.	20	30		■- those with this same generic job description (applies to duties 1-10 listed below)	. 🗆
2.	Complete Permanency Plans, Permanency Plan Reviews, Administrative and Judicial	13				
	Reviews, as needed, throughout the life of the case (placement directed toward family	15				
3.	Peliver permanency entors with each child 7 javonite in pavonite i					
5.	order conditions. Complete any post- dispositional Juvenile Court work and attendant reports, such as					
	extensions revisions, revocations, etc.	10				
7	setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will meet their needs, including the required timely documentates in a setting that will be a se					
	/ or new violations and cooperate with any follow-up actions.				pa	age 1 of 7

Job Analysis Questionnaire

8.	Close the case (or refer to a community provider for non-Juvenile Court services) upon successful completion of Juvenile Court ordered conditions, OR mutually agreed upon adequate progress in voluntary case, OR the child reaching the age of majority / independent living status.	3		
a	Provide case management in all of the above activities.	0		
	When necessary to balance workload between various positions in the Child and Family Services Unit, the Unit Supervisor may assign some Intake / Access work duties to this position, besides the Ongoing Services work duties.	15		
11.	NOTE: The remaining 5% of the job duties will be assigned to the specific worker by the Unit Supervisor based on interests / skills / and workload balance from among the duties shown as items 12-17.			
12.	Complete all initial assessment / annual reassessment work to Kinship Care cases, including necessary case management and timely documentation in WiSACWIS.			m-(1 or more of the duties 12-18 may be assigned to any worker with this job)
13.	Coordinate the Administrative Review process, including timely scheduling, notification, and communication with the various panel members, mailing of meeting materials, chairing the Administrative Review meetings, timely documentation of the meeting outcomes, and recruitment / training of Administrative Review panel members.	1		
14.	Coordinate the Foster Care program, including but not limited to: recruitment, licensing, supervision, training, support and recognition of foster parents.	5		
15.	Coordinate the Electronic Monitoring program, including hook-up, disconnection, maintenance of equipment, scheduling and monitoring of clients, and any attendance recordkeeping.	1		
16.	Coordinate the BRICK program, including site visits at the prison with boys and their follow-up written reports.	1		
17.	Acts as the liaison between Social Services and the (former) Challenge School program, as it is reconstituted into a school only program for the 2008 – 2009 school year – and provide only limited services to the (former) Challenge students who were enrolled as of the 2007 – 2008 school year (and their families), until their cases would normally close in the Social Services Department. This is expected to be a time-limited , narrow scope responsibility.	0		

Supervisory Responsibility: Write the position titles of all employees who report directly to you. Also, indicate the number of employees who in turn report to them. Write "none" if this is not applicable.

Position Title			# of Employees in turn report to			Position Title		# of Employees who in turn report to them
None								
Check	below those supervisory responsi	bilitie	es that are a part of your	job:				
	Instruct / train		☐ Assign Work				Coordinate Activities	
	Review Work		☐ Maintain Stand	lards			Plan Work of Others	
	Act on Employee problems		☐ Schedule/alloc	ate pe	rsonnel		Schedule work of others	
	Select new employees							
	Transfer / promote?		(Recommend?)		(Approve?)			
	Performance Evaluations		(Recommend?)		(Conduct?)		☐ (Approve?)	
	Discipline		(Recommend?)		(Conduct?)		☐ (Approve?)	
	Discharge		(Recommend?)		(Conduct?)		☐ (Approve?)	
	Salary Increases		(Recommend?)		(Conduct?)		☐ (Approve?)	

C. Work Relationships: For any of the contacts listed below that you have regarding company business, indicate the frequency (e.g. daily, weekly, monthly, etc.) and nature or purpose (e.g. obtain /provide information, negotiate contracts, etc.) of the contact.

CONTACT	PURPOSE OF CONTACT	FREQUENCY
Employees in same or other department(s) Other division coworkers	Collaboration	Weekly – 2 times a month
Other <u>Departments</u> (list other departments) Public Health, Sheriff, Courts, Sturgeon Bay Police Department, UW-Extension	Collaboration, court work	Weekly – 2 times a month
Customers – General Public (list all) Clients, Community Events	Service Awareness	Daily – Quarterly
Suppliers/Vendors		
Community / Trade / Professional Treatment agencies, HELP of Door County, Family Services, Schools, Foster parents, Hospital	Collaboration	Daily – monthly
Federal / State Gov't =. / Regulatory		
Other (specify):		

D. Minimum Education, Experience and Certification Requirements

Education: Check the statement below which indicates the educational requirements for the job (not necessarily your educational background). If a higher degree of education is preferred, please check the appropriate column.								
If a highe	er degi	ree of educatio	n is preferre	d, please check the app ———————————————————————————————————	ropriate column.			
Requir	red	Preferred:						
			No formal	education				
			Less than	nigh school education				
			High School	ol Diploma or equivalent				
			Associate's	s degree or equivalent	Major			
			Bachelor's	degree or equivalent	Major	Social Work or related human services field		
			Graduate v	vork or advance degree	Specify	Social Work or related human services field		
			Profession	al license required (list b	pelow under certification	n)		
Experie	nce: (Check the amo	unt of experi	ence needed to perform	n this job (not the experi	ence you brought to the job)		
		No previous experience required.						
		Up to one year of experience required.						
		One to at least three years' experience required. : Preferred						
		Over three years and up to and including six years' experience required.						
		Over six years and up to and including nine years' experience required.						
		Over ten (10)	years of exp	perience required.				
		Experience in	related field	I : May substitute 1 year	Social Work Field Inter	rnship / Degree from Accredited SW Prog.		
		<u> </u>	L					
Certificat certificat			es, certificat	ions, statutory requirem	ents or registrations rec	quired for this position. Use the exact name of license,		
1. REQUIRED - Social Worker certification from the Wisconsin Bureau of Regulation and Licensing - or eligible for certification / awaiting results of testing.								
DESIRABLE - Certification as: Advanced Practice Social Worker / Independent Social Worker / or Licensed Clinical Social Worker.								
3.								
4.								
5.								
6.	Valid	State of Wisco	onsin Driver'	s License Required?	■ Yes	□ No		
	Type: ■ Regular □ CDL Endorsement Required: No							

E. Equipment and Machinery: Indicate equipment and/or machinery that is necessary to accomplish the job, and the amount of time per week which involves using each piece of equipment.

No.	Equipment Used	Freq.	Daily	Weekly	Monthly	As Needed
	No equipment used.					
	Basic office equipment					
	a. Typewriter					
	b. Computer					
	c. Copy machine					
	d. Calculator					
	e. Fax machine					
	f. Other: Scanner, paper shredder					
3.	Hand Tools					
	a. Hammers, wrenches, etc.					
ĺ	b. Electrical power tools: saws, drills, etc.					
	c. Gas power tools: weed-eater, chain-saw, etc.					
	d. Yard/Garden tools: shovel, rake, broom, etc.					
	e. Other:					
4.	Weapons					
	a. Handguns					
	b. Rifle/Shotgun					
	c. Baton					
	d. Other:					
5.	Communication Equipment:					
	a. Telephone					
	b. Cell Phone					
	c. Radio					
	d. Mobile data terminal (MDT) e. Pager					
	f. Other:					
6.	Vehicles:					
	a. Automobiles		-			
	b. Light truck (pick-up)					
	c. Heavy truck (dump truck, fire truck, etc.)					. 🗆
	d. Construction/heavy equipment (loader, tractor, etc.)					
	e. Bus					
	f. Motorcycle					
	g. Boat					
	h. Other:					
7.	Medical Apparatus/Equipment:					
	a. First aid equipment					
	b. Oxygen					
	c. Electronic monitoring equipment					
	d. Patient transport apparatus (spine board, stretcher, etc.)					
	e. Miscellaneous					
	f. Other:					
8.	Other:					

F. Physical Demands: For each of the activities, please answer the questions asked regarding the intensity, precision and frequency of the listed items.

	Not Required	Required only in unusual situations	Required for 1 hour or less per shift	Required for approx. 2 hours per shift	Required for approx. 4 hours per shift	Required for 6 or more hours per shift
Activity: Lifting						
Very light lifting: 10# max and occasional lifting of small articles						
Light lifting: 20# max			100			
Medium lifting: 50# max						
Medium lifting: 60# max						
Heavy lifting: 100# max						
Very heavy lifting: in excess of 100#						
Activity: Carrying						
Very light carrying:10# max						
Light carrying: 20# max						
Medium carrying: 50# max						
Medium carrying: 60# max	<u>*</u>					
Heavy carrying: 100# max						
Very heavy carrying: in excess of 100#	E					
Activity: Standing						
Activity: Walking						
Activity: Sitting					燕	
Activity: Stooping						
Activity: Crawling						
Activity: Running						
Activity: Swimming						
Activity: Physically controlling another person						
Activity: Climbing stairs or ladders up or down						
Climbing stairs/routine non-emergency						
Climbing stairs emergency – i.e. pursuit of suspect						
Climbing ladders – routine – i.e. changing light bulbs						
Climbing ladders – emergency – i.e. Fire truck aerial ladders						
Climbing while carrying – i.e. carrying parts, stretcher						
Activity: Reaching						
Reaching up (to high shelf)						
Reaching across (work bench)						
Reaching down (to floor)						

Condition	Rarely	Occasionally	Constantly	Seasonally
virt				
ust				
eat				*
old				-
oise				
umes				
dors				
/etness/humidity				
ibrations				
udden temp. changes				
arkness				
ealth and Safety: Check any of the following encou	ıntered on the job ar	nd note the frequency e	each is encountered	
ectrical hazards	-			
re hazards				
echanical hazards				
hemical hazards				
kplosives				
eights above 10 ft.				
odily Injury – physical attack				
oving vehicles/traffic				
ther (allergies) (Angry or upset clientele – who may present some physical danger to the worker) Additional Physical Requirements: List any addit		-		
Also list the frequency with which the activity is performable. All workers in this job description make home visits. Represent a threat of physical harm to the worker. Immediately and / or call for law enforcement assist may enter substandard housing with stairs, floors, dother unrestrained animals when working out in the that particular day.	and occasionally have When that situation is ance for their own sat oors, etc. in poor repa community. Frequence	anticipated or found, wo fety and that of the peop air which may present a cy of exposure to these s	rkers are trained to ex le they are visiting with hazard. They may als	kit the area h. Additionally, th o encounter pets
Location: Check the location where the majority of ■ Office / indoors □ Shop / warehouse ■ Vehicle ■ Outdoors ■ Other: Clients' Homes upervisor Review:				
Your signature below indicates that you have reviewe the appropriate spaces. Use extra paper if you need reviewed with you before a final position description is How many employees under your supervisor perform	to, numbering your co s prepared.	omments to match the ite	ems in question. Thes	
	ure same job describe	ed above by this employ		

. Supervisor Comments				
. Supervisor Comments Inature Approvals				

Job Analysis Questionnaire

REQUEST FOR FISCAL IMPACT INFORMATION

		RECLASSIFICATION FTE/Hours	DN		From	CHANGE FTE	E/Hours TO			
		Job Class				CHANGE JOB CL	ASS/STEP			
•		Step			From		то			
•	_	Rate								
•										
	Position Title	e /		Children	n & Fami	lies		-		
	Effective Dat	te				6 Mo				
	Departmen	nt		Human S	ervices	Sub Dept				
		2016		T		2016	1			
FTE/Hrs	@ Rate	TOTAL SALARY				TOTAL BENEFITS				OTAL SALARY
Children & Fami	lies Pay Pango 1					DENETI15				and Benefits
1.00	\$19.75	41,080				30,748	1			71,828
1.00	ψ13.73	41,000				30,740]			71,020
Current Childre	en & Families Bud	dget for 2016								
1.00	\$19.75	41,080				30,748				71,828
					*	Total Sal	- lary and Benefi	t Increase		-
FTE/Hrs	@ Rate	2016 TOTAL SALARY				2016 TOTAL BENEFITS			l l	OTAL SALARY
Children & Fami	lies Pav Range 1			PARTIES AND		DENETI15				and Benefits
1.00	\$23.24	48,339				32,121]			80,460
	¥	,				02,121	_			
Current Childre	en & Families Bu	dget for 2016					7			
1.00	\$19.75	41,080				30,748				71,828
						Total Sal	lary and Benefi	t Increase		8,632
				Dept Head Si	gnature	-1-1	- Janu	h	Fi	nance Director
					Date	5 5 201	16	_		

Disclaimer: This Fiscal Impact does not include Step 1 \$20.34, Step 2 \$20.92, Step 3 \$21.50, Step 4 \$22.08, or Step 5 \$22.66.

This Fiscal Impact is an example illustration of what the costs would be for this position/position change. It is based on estimates and assumptions provided by the Human Resources Department and/or the department in which this position works. Because these estimates and assumptions may change, or may be different than the actual circumstances at the time that this position is filled or this position change takes place, there may be a difference between the costs projected in this Fiscal Impact and the actual costs.

Request to Refill Position

Must follow the process in the Administrative Manual, Section 2.04 – Creation and Classification of Positions.

DEPT. HEAD TO COMPLETE:							
Department Door County Human Services Position Title: Behavioral Health Therapist							
Position Status:							
Full Time Part Time Limited Term Project Hours per week: 40							
Reason for Vacancy: Separation Transfer Retirement Resignation Death							
Discuss turnover with the department in the previous 18-24 months: Significant							
Transfer: why is the new position more attractive to employee than current one? Move to Management with more responsibility and pay.							
Name of Current / Most Recent Incumbent:							
Is office space, furniture, and office equipment available?							
If not, explain plan to obtain:							
Reviewed, updated, and submitted to Human Resources: Job Analysis Questionnaire Job Description							
Completed by: Joe Krebsbach Date 5-2-16							
Financial Information:							
Salary Range: Is the Position Budgeted: Yes No							
Funding Source: Levy % 80 Grant Funded % 0 Other revenue through insurance % 20							
Fiscal Impact, from Finance Department, completed and attached							
HR TO COMPLETE:							
EEO OB - PROFESSIONALS FLSA Status EXEMPT							
EEO <u>OB - PRO FRISIONALS</u> FLSA Status <u>EXEMPT</u> Whuman Resources has performed a position review? <u>FULLE</u> (HR initial)							
The Job Analysis and Job Description have both been updated and signed? (HR initial)							
) / ()							
Approvals:							
County Administrator Date 5 5 2016							
Oversight Committee Chair Date Date I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may							
participate per Admin. Manual section 2.04.							
☐ I want to participate ☐ I do not wish to participate							
Administrative Committee Chair Date							
Administrative Committee Chair Date I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.							
☐ I want to participate ☐ I do not wish to participate							

County of Door

Behavioral Health Therapist

			10/26/2015
Job Title	Behavioral Health	Last Revision	10/26/2015
JOD TIES	Therapist		
	Human Services	HR Reviewed	09/25/2015
Department			General Municipal Employee
Division	Behavioral Health	Employee Group	
Report To	Behavioral Health Program	FLSA Status	Exempt
•	Manager		
		EEO Code	02 – Professionals
Pay Range	10	LLC CC.	

General Summary

The Behavioral Health Therapist will be responsible for conducting effective and professional direct therapy for county residents affected by mental illness and/or alcohol or drug abuse or dependency.

Duties and Responsibilities

Essential Job Functions

- 1. Provide direct service therapy to clients with mental health and/or substance use disorders and their families. This will include individual, couples, family therapy, primary treatment and continued care groups, as necessary for the population of clients at any given time.
- 2. Provide Screenings, Intake, Assessment, Diagnosis, and Case Management to Door County residents with mental illness or chemical dependency issues. Complete treatment plans with clients to address those needs and work with a multidisciplinary team to provide the needed level of care.
- 3. Develop and maintain accurate case management records of assessment, treatment and current status/condition as required by state statute. Comply with DHS Chapter 35 and 75 requirements.
- 4. Provide educational information to community groups and individuals. Present training in the area of AODA and inpatient treatment to medical professionals and staff members as needed.
- 5. Assist in developing and providing ancillary groups or special services to other community programs relative to special needs populations, i.e., youth, elderly, women, minorities and others as deemed necessary.
- 6. Provide recovery services to individuals enrolled in Comprehensive Community Services, consistent with Department of Human Services Chapter 35 requirements, which may include services in the office, home or community. Participate in CCS team meetings as needed.
- 7. Service Planning and oversight of clients on mental health commitment.
- 8. Conduct necessary team/staff meetings to review services and crisis planning.

General Job Functions

- 1. Provide 24 hour on-call crisis services on a rotational schedule to include but not limited to consultation to law enforcement, hospital, and other individuals who need crisis services. Employee must remain within 50 minute response time to Door County Memorial Hospital while on crisis call. Abide by DHS Chapter 34 Requirements.
- 2. Coordinate inpatient psychiatric treatment with other staff members and community and state agencies. This includes ongoing case management of services, (follow-along and follow-up) as needed.

County of Door

Behavioral Health Therapist

- 3. Provide educational information and consultation to community groups, educational facilities, and individuals regarding department services and various issues relative to mental health, chemical addiction and emotional wellness.
- 4. Present training in the area of psychotherapy, addictions and patient treatment to community, medical professionals, and staff members as needed.
- 5. Serve as a member of a multidisciplinary agency clinical team. Participate in client staffing, offer cross-disciplinary training to staff and cooperate as a team member in the delivery of treatment to consumers with co-occurring disorders.

Requirements

Training and Experience

- 1. Graduate of a certified college with a Master's Degree in, Social Work, Counseling, Psychology, or related area.
- 2. Licensed Professional Counselor or Licensed Clinical Social Worker required and Wisconsin Certification as a Clinical Substance Abuse Counselor preferred.

Knowledge, Skills and Abilities Required

- 1. Knowledge of and experience in working with clients with Mental Health and AODA Diagnosis.
- 2. Knowledge of and experience with prevention, intervention, assessment and treatment modalities.
- 3. Ability to read, comprehend, and communicate, both verbally and in writing as well as effectively administer by written, and verbal communications.
- 4. Able to effectively conduct interviews and counseling with AODA and MH clients.
- 5. Capable of conducting successful crisis intervention assessment and disposition.
- 6. Ability to use tack and courtesy in maintaining an effective working relationship with department employees, county supervisors, county officials, and general public.
- 7. Possess emotional maturity, sound judgment and capable of working among a dynamic team of professionals.
- 8. Knowledge of basic computer operation and familiarity with word processing and data entry software.
- 9. Knowledge of DHS 34 Crisis Services and DHS 35 Comprehensive Community Services preferred but will educate.

Physical & Working Conditions

Nearly 100% of time work is performed in a normal office setting with little or no discomfort from temperature, dust or noise. Interacting with other employees, general public, whether walking in or on the telephone may be encountered.

Over 75% of work is performed seated at a desk, working on a computer keyboard and/or telephone with about 10% of work performed standing and walking. Over 75% of the work is performed by talking, hearing, and using both far and near vision. Occasional lifting is required up to 10 lbs. (i.e. paper and equipment).

In an effort to provide for continuity of County government and to cope with the problems of the emergency, you may be required to work during a proclaimed state of emergency, consistent with Sec 323.14 Wis. Stats. and County emergency management plans and programs.

County of Door Behavioral Health Therapist

The above is intended to describe the general content of the requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or requirements. They may be subject to change at any time due to reasonable accommodation or other reasons.

Approvals:	
A A A A A A A A A A A A A A A A A A A	10/26/15
Joseph A. Krebsbach, Human Services Director	Date
Love Attended	12/8/15
Kelly A. Hendee, Human Resources Director	Date

Door County Human F		Title: Job Analysis Questionnaire
	Date Revised 10/2015	Admin. Manual or Handbook Reference: Administrative Manual, Section 2.04 – Creation & Classification of Positions

Current Position Title: Behavioral Health Therapist

Human Services Department

Division Behavioral Health

Reports to the Behavioral Health Program Manager. Report to: (position title):

A. Job Summary (Purpose): Use two or three brief, specific statements to summarize the overall purpose of the job.

The Co-occurring Disorders Therapist will be responsible for conducting effective and professional direct therapy for county residents affected by mental illness and/or alcohol or drug abuse or dependency.

B. Fundamental duties of the position

Write one duty per numbered space. 1.

Rank the duties in order of importance. The most important duty should be number one. 2.

After listing the specific duties, enter the percentage of time spent on each. 3.

Indicate which of the items are essential, which is determined considering the following:

Does the position exist to perform this function? OR

- Are there a limited number of employees who can do this duty? Particularly, to the extent that if this position did not perform this
- Does the function require highly specialized skills or expertise that most other employees do not possess? Would the person be hired specifically because of their skill or expertise in performing the function? (i.e. A draftsman is hired because of their skill in precision drawing).

If "yes" can be answered to any of the above, mark "yes" in the "essential function" column.

Indicate whether other employees in the department perform this function.

5.				Essential		s Perform ne Duty?
Item No.	Duty .	Total Time	Yes	No	Yes	No
NO.	Direct outpatient clinical services - including intakes, diagnosis, individual/family/couple's	50			-	
1.	Il and group Work	25				
	Documentation of all pertinent clinical information as required by HFS guidelines. Crisis intervention response – 24 hour-direct services, recommend disposition, & follow-up	5				
ی. 	(court). Consultation/Supervision-clinical staffing, team meetings; co-workers, Psychiatrist and					
4.	Db.alasiot	5			22	
5.	Case management-phone calls, collateral contacts, monitoring commitments.	3				
6.	Collaboration with outside agencies.	2				
7.	Insurance paperwork for reimbursement.					

Supervisory Responsibility: Write the position titles of all employees who report directly to you. Also, indicate the number of employees who in turn report to them. Write "none" if this is not applicable.

Position Title	# of Employees who in turn report to them	Position Title	# of Employees who in turn report to them
None			
Check below those supervisory responsibilities that	at are a part of your job:		

82 1907	Instruct / train		☐ Assign V	Vork			Coord	inate Activities
	Review Work	■ Maintain Standards					Plan Work of Others	
	Act on Employee problems	☐ Schedule/allocate personnel					Sched	ule work of others
	Select new employees							
	Transfer / promote?		(Recommend?)		(Approve?)			
	Performance Evaluations		(Recommend?)		(Conduct?)			(Approve?)
	Discipline		(Recommend?)		(Conduct?)			(Approve?)
	Discharge		(Recommend?)		(Conduct?)			(Approve?)
	Salary Increases		(Recommend?)		(Conduct?)			(Approve?)

C. Work Relationships: For any of the contacts listed below that you have regarding company business, indicate the frequency (e.g. daily, weekly, monthly, etc.) and nature or purpose (e.g. obtain /provide information, negotiate contracts, etc.) of the contact.

CONTACT	PURPOSE OF CONTACT	FREQUENCY
Employees in same or other department(s) Behavioral Health Team, CSP Team, Social Workers/Case Mangers from all DHS divisions	Clinical supervision, coordination of care, referrals	Daily
Other <u>Departments</u> (list other departments)		
Customers – General Public (list all) Consumers seeking mental health/AODA treatment	Service delivery/treatment	Daily
Suppliers/Vendors		
Community / Trade / Professional Law enforcement, hospitals, community counseling agencies. Community groups seeking education.	Facilitation of emergency detentions, assessment of crisis cases, consultation Education	Weekly/Monthly
Federal / State Gov't =. / Regulatory DHS/Division of Mental Health & Substance Abuse Services; Division of Quality Assurance	Regulatory oversight Technical assistance	As needed
Other (specify):		

D. Minimum Education, Experience and Certification Requirements

			ment below which indicates the educational requirements for the job (not necessarily your educational background). n is preferred, please check the appropriate column.
Requi		Preferred:	тто рготопом, рюдоо отгож ито арргортило остапти.
			No formal education
			Less than high school education
			High School Diploma or equivalent
			Associate's degree or equivalent Major:
			Bachelor's degree or equivalent Major:
			Graduate work or advance degree Specify: Master's Degree in Human Services Field
			Professional license required (list below under certification)
Experie	nce: (Check the amou	unt of experience needed to perform this job (not the experience you brought to the job)
		No previous e	experience required.
		Up to one year	or of experience required.
		One to at leas	st three years' experience required.
I do		Over three ye	ars and up to and including six years' experience required.
		Over six years	s and up to and including nine years' experience required.
		Over ten (10)	years of experience required.
		Experience in	related field
		Experience in	(specify): Clinical mental health services
Certificat certificat			es, certifications, statutory requirements or registrations required for this position. Use the exact name of license,
1.	Licens	sed Clinical Soc	cial Worker/Licensed Professional Counselor
2.	30 hou	urs of continuin	g education units every two years.
3.			
4.			
5.			
6.	Valid	State of Wisco	nsin Driver's License Required? ■ Yes □ No
	Type:	■ Regula	r □ CDL Endorsement Required:

E. Equipment and Machinery: Indicate equipment and/or machinery that is necessary to accomplish the job, and the amount of time per week which involves using each piece of equipment.

No.	Equipment Used	Freq.	Daily	Weekly	Monthly	As Needed
1.	No equipment used.					
2.	Basic office equipment					
	a. Typewriter					
	b. Computer					
	c. Copy machine					
	d. Calculator					
	e. Fax machine					
	f. Other:					
3.	Hand Tools					
	a. Hammers, wrenches, etc.					
	b. Electrical power tools: saws, drills, etc.					
	c. Gas power tools: weed-eater, chain-saw, etc.					
	d. Yard/Garden tools: shovel, rake, broom, etc.					
	e. Other:					
4.	Weapons					
	a. Handguns					
	b. Rifle/Shotgun					
	c. Baton					
	d. Other:					
5.	Communication Equipment:					
	a. Telephone					
	b. Cell Phone					
	c. Radio					
	d. Mobile data terminal (MDT)					
	e. Pager					
	f. Other:					
6.	Vehicles:					
	a. Automobiles					
	b. Light truck (pick-up)					
	c. Heavy truck (dump truck, fire truck, etc.)					
	d. Construction/heavy equipment (loader, tractor, etc.)					
	e. Bus					
	f. Motorcycle					
	g. Boat					
	h. Other:					
7.	Medical Apparatus/Equipment:					
	a. First aid equipment					
	b. Oxygen					
	c. Electronic monitoring equipment					
	d. Patient transport apparatus (spine board, stretcher, etc.)					
	e. Miscellaneous					
	f. Other:					
8.	Other:					

F. Physical Demands: For each of the activities, please answer the questions asked regarding the intensity, precision and frequency of the listed items.

	Not Required	Required only in unusual situations	Required for 1 hour or less per shift	Required for approx. 2 hours per shift	Required for approx. 4 hours per shift	Required for 6 or more hours per shift
Activity: Lifting						
Very light lifting: 10# max and occasional lifting of small articles						
Light lifting: 20# max						
Medium lifting: 50# max						
Medium lifting: 60# max						
Heavy lifting: 100# max						
Very heavy lifting: in excess of 100#						
Activity: Carrying			9			
Very light carrying:10# max						
Light carrying: 20# max						
Medium carrying: 50# max						
Medium carrying: 60# max	麵					
Heavy carrying: 100# max	75					
Very heavy carrying: in excess of 100#	*					
Activity: Standing						
Activity: Walking						
Activity: Sitting						
Activity: Stooping						
Activity: Crawling						
Activity: Running						
Activity: Swimming						
Activity: Physically controlling another person						
Activity: Climbing stairs or ladders up or down						
Climbing stairs/routine non-emergency						
Climbing stairs emergency – i.e. pursuit of suspect						
Climbing ladders – routine – i.e. changing light bulbs						
Climbing ladders – emergency – i.e. Fire truck aerial ladders						
Climbing while carrying – i.e. carrying parts, stretcher	M					
Activity: Reaching						
Reaching up (to high shelf)						
Reaching across (work bench)						
Reaching down (to floor)						

G. Working Conditions – Environmental Conditions: Check any conditions encountered on an annual basis

Condition	Rarely	Occasionally	Constantly	Seasonally
Dirt				
Dust				
Heat				
Cold				
Noise				
-umes				
Odors				
Wetness/humidity				
/ibrations				
Sudden temp. changes				
Darkness				
Health and Safety: Check any of the followin	g encountered on the job ar	d note the frequency e	each is encountered	
Electrical hazards				
Fire hazards				
Mechanical hazards				
Chemical hazards				
Explosives				
- •				
leights above 10 ft.				
leights above 10 ft. lodily Injury – physical attack				
Heights above 10 ft. Bodily Injury – physical attack Moving vehicles/traffic Other (allergies) H. Additional Physical Requirements: List a Also list the frequency with which the activity	ny additional physical activitie			
Heights above 10 ft. Bodily Injury – physical attack Moving vehicles/traffic Other (allergies) H. Additional Physical Requirements: List a	ny additional physical activitie			
Heights above 10 ft. Bodily Injury – physical attack Moving vehicles/traffic Other (allergies) H. Additional Physical Requirements: List a	ny additional physical activitie			
Heights above 10 ft. Bodily Injury – physical attack Moving vehicles/traffic Other (allergies) H. Additional Physical Requirements: List a	ny additional physical activities is performed.	s, not previously listed, v		

		RECLASSIFICATION				CHANGE FTE/Hours		
		FTE/Hours			From	то		
		Job Class				CHANGE JOB CLASS/STEF		
		Step			From	то		
		Rate						
	Position Titl	e		Behavio	oral Healt	h Therapist		
	Effective Da			Bollavio	oral rican	6 Mo		
	Departme	nt		Human S	Services	Sub Dept		
			_			,	*	
FTE/Hrs	@ Rate	2016 TOTAL				2016 TOTAL		TOTAL SALARY
112/113	W Nate	SALARY				BENEFITS		and Benefits
Behavioral Healt	h Therapist Pay	Range 10 Min Step						
1.00	\$24.56	51,085				32,642		83,727
Current Behav	vioral Health Ther	apist Budget for 2016						
1.00	\$31.75	66,040				13,836		79,876
						Total Salary and B	enefit Increase	3,851
FTE/Hrs	@ Rate	2016 TOTAL SALARY				2016 TOTAL BENEFITS		TOTAL SALARY and Benefits
Behavioral Heal	th Therapist Pay	Range 10 Mid Step				DENEITIO		and benefits
1.00	\$28.89	60,091				34,345		94,436
Current Behav	ioral Health Ther	rapist Budget for 2016						
1.00	\$31.75	66,040				13,836		79,876
	,	,				Total Salary and B	enefit Increase	14,560
				Dept Head Si	gnature	Mar 2. gr 5/3/2016		Finance Director

Disclaimer: This Fiscal Impact does not include Step 1 \$25.28, Step 2 \$26.00, Step 3 \$26.72, Step 4 \$27.45, or Step 5 \$28.17.

> This Fiscal Impact is an example illustration of what the costs would be for this position/position change. It is based on estimates and assumptions provided by the Human Resources Department and/or the department in which this position works. Because these estimates and assumptions may change, or may be different than the actual circumstances at the time that this position is filled or this position change takes place, there may be a difference between the costs projected in this Fiscal Impact and the actual costs.



Door County DEPARTMENT OF HUMAN SERVICES

421 Nebraska Street Sturgeon Bay, WI 54235

Joseph Krebsbach

Program Director (920) 746-7155

Fax: (920) 746-2439

Memo

To: Human Services Board and Admin, Committee

From: Joe Krebsbach

CC:

Date: 5-2-16

Re: Change in Job Classification and request to rehire.

Jay Livingston has accepted our Behavioral Health Manager Position. Jay previously held a Behavioral Health Therapist position in the department, and we will need to replace this position. This has the potential to create additional shifts in the department. In August of 2015, the DHS Board and the Admin Committees authorized the department to fill internal hires without going back to committee. Therefore, we intend to proceed with the recruitment process to fill Jay's position. However, in relation to this transition I am also asking for approval to reclassify a position within the department.

In 2015, when DHS had vacancies in two of our Behavioral Health Therapist positions, I made a decision to change the job classification of one of these from Behavioral Health Therapist to Case Manager. This decision was made for two reasons: (1) to broaden the pool of candidates available as we were struggling to get qualified therapists, and (2) to decrease the cost for the position.

At this time, I am asking permission to change the Case Manager position back to a Behavioral Health Therapist. Since filling the position in December, we have found that the change has limited our ability to effectively provide services as well as our ability as maximize revenues.

There will be a budget impact on the department as defined in the attached Fiscal Impact statement from the Finance Office. In addition, to what is presented in those statements, Jay's move into the BH Manager is actually about \$20,000.00 less than we have budgeted for that position for year. We have funding to cover any differences for 2016, and we will budget for the adjustment, if granted, for 2017.

I look forward to explaining my request in person.



DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

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April 22, 2016

Human Services Board Chairman: Mark Moeller 421 Nebraska St. Sturgeon Bay, WI 54235

RE: Completion of Introductory Period

Employee Name: Brenda Franco

Position: AODA Counselor

Start Date: October 19, 2015

Ms. Franco has done a fine job in her role as AODA Counselor during her first six months. Her knowledge of emerging drug trends is an asset to our community. Brenda has steadily built her caseload and demonstrates excellent engagement skills in working with her clients. She has completely revised the curriculum for the Intensive Outpatient Program, ensuring all sessions utilize evidence-based approaches. She has completed the required training for DHS 34 Emergency Mental Health Services and is an active member of the on-call crisis rotation, often volunteering to take additional shifts to benefit the team. Brenda is becoming acquainted with community resources and continues to build her skills in navigating the Department's electronic record keeping system. She is a great team player, and has been a valuable addition to the Behavioral Health team.

Brenda Franco has satisfactorily completed her introductory period and successfully moved to regular status as of April 18, 2016.

Sincerely,

Cori McFarlane Deputy Director

Department of Human Services

Joi Mc Yarlane

CC: Administrative Committee Human Resources Department

