

CHIPPEWA COUNTY
DEPARTMENT OF HUMAN SERVICES
2011 Performance Report



MESSAGE FROM
LARRY WINTER, DIRECTOR

Harvey MacKay, author and columnist, states, "Sometimes the only way to get 20/20 vision is to look through the eyes of the consumer." Each year Chippewa County Department of Human Services offers the opportunity for citizens to participate in a "Day in the Life." This allows citizens to interact with consumers and hear from them about the impact services have on their lives. Our 2011 performance report also allows the reader to hear directly from consumers and see how they have achieved positive outcomes. The consumers that partake in these activities take the risk of telling their story in order for citizens to see the positive impact their taxpayer dollars have. Our department is making an effort to engage with consumers and community members in order to discover what will enhance the lives of the people we serve. This information will assist the Health and Human Services Board toward policy development and strategic planning. Then we will deploy the time, talent, and resources of our staff in order to empower children, youth, and adults toward a lifestyle of their choosing. The result – Chippewa County is a healthy place where individuals want to live, work, raise a family, visit, and retire.

COUNTY STRATEGIC GOALS

Our department accomplishments during 2011, in addition to continued planning and goal setting, complement the strategic goals and objectives of the Chippewa County Board of Supervisors:

- Coordinate and collaborate with other government entities at all levels to ensure effective and efficient government services.
- Strive to enhance our internal operations to better address future needs.
- Address the fiscal challenges of Chippewa County government while providing the right mix and level of public service.
- Provide a safe, healthy, and prosperous environment for Chippewa County employees, clientele, and citizens.

ORGANIZATIONAL STRATEGIC INITIATIVES FOR 2010 TO 2012

1	STRATEGIC INITIATIVE Define safety, functional skills, quality of life, and types of consumers the organization will serve.
2	STRATEGIC INITIATIVE Increase intra/inter-departmental, regional, and community participation in meeting needs of consumers.
3	STRATEGIC INITIATIVE Maximize all available sources of revenue.
4	STRATEGIC INITIATIVE Promote a healthy work environment.
5	STRATEGIC INITIATIVE Engage in continuous quality improvement in all programs within the organization.

This 2011 Annual Performance Report serves three purposes. First, it reviews the department's performance in 2011; second, it is a tool that informs citizens in Chippewa County about the inner workings of the Department of Human Services; and third, it informs taxpayers how we invest their financial resources in order to create opportunities for individuals facing challenges to attain positive outcomes in their lives.

Larry Winter




PHILOSOPHY & PRACTICE

RESULTS THAT LAST

How do human services contribute toward assisting and influencing consumers to maintain or create a healthy lifestyle?

1	FIRST , we must implement objective evaluation systems that tell our citizens, community, and consumers where we need to invest the resources of human services; and we must set priorities.
2	SECOND , we must implement strategies to ensure that every consumer receives a consistent experience.
3	THIRD , we must implement programs that allow consumers to open doors toward effectively accelerating their progress and achieving results.

HOW WILL HUMAN SERVICES ASSIST AND EMPOWER CONSUMERS TOWARD MAINTAINING OR CREATING A HEALTHY LIFESTYLE?

-  **By delivering outcome-informed services . . .**
producing results that reflect the values of citizens in Chippewa County.
-  **By making a distinct impact . . .**
through the eyes of the consumer and citizens of Chippewa County.
-  **By strategically allocating resources . . .**
creating a healthy place where individuals want to live, work, raise a family, visit, and retire in Chippewa County.



VISION

Through community partnerships and collaboration, Chippewa County Human Services will be considered a leader and innovator – creating opportunities and changing lives.



MISSION

Our mission is to assist, empower, and build upon the strengths of children, youth, and adults facing challenges to achieve positive outcomes.



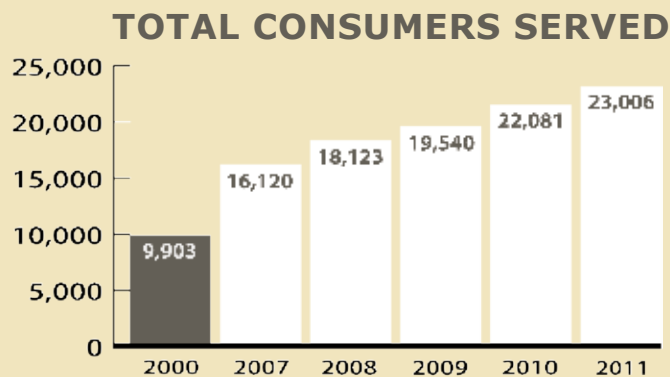
VALUES

Accountability
Collaboration
Commitment
Continuous Quality Improvement
Respect
Teamwork

CONSUMERS AND PROGRAMS / SERVICES (2007 - 2011)

PROGRAMS / SERVICES	2000	2007	2008	2009	2010	2011
Adult Protective Services (CMHRS)		29	36	43	65	50
Birth to 3 Program (CWDA)	59	221	188	189	174	178
Children and Families Services (CYF)	1,692	1,170	940	1,195	1,374	1,407
Children's Crisis Services (CWDA)						120
Children's Waiver Services (CWDA)		60	67	73	95	97
Community Options Program (CMHRS)					4	5
Community Recovery Services (CMHRS)						4
Community Support Program (CMHRS)	40	61	46	56	50	45
Crisis Services (CMHRS)		397	430	489	682	756
Emergency Detentions / Petitions (CMHRS)	265	154	169	133	138	121
Family Support Program (CWDA)	34	34	32	32	36	32
Food Share Program (ES)	618	1,755	2,056	2,420	2,938	3,168
Juvenile Justice Services (CYF)	205	125	141	108	88	108
Medical Assistance Program (ES)	5,542	9,247	10,777	11,333	13,290	13,098
New Guardianship / Protective Placement Services (CMHRS)		25	35	33	32	39
Outpatient Mental Health Services (CMHRS)	640	556	551	390	57	5
Protective Placement Reviews (CMHRS)		132	134	109	116	104
Substance Abuse Services (CMHRS)			85	291	126	292
Wisconsin Home Energy Assistance Program - WHEAP (ES)	808	2,144	2,428	2,641	2,813	3,377
Discontinued Program in 2010		4	8	5	3	
TOTAL	9,903	16,120	18,123	19,540	22,081	23,006

CMHRS = Community Mental Health & Recovery Services Division. ES = Economic Support Division. CWDA = Children with Differing Abilities Division.
CYF = Children, Youth & Families Services Unit. YSS = Youth Support & Services Unit.



PARTNERING & COLLABORATING WITH THE COMMUNITY

We recognize the following Chippewa Valley entities we have partnered with throughout 2011. Thank you for your service and support.

A & J Mobility	Human Services Board
American Sign Language Interpreters	Integrated Project Solutions
Applied Behavioral Intervention Services (ABIS)	J and B Medical
Arbor Place Inc.	Kids USA
Aurora Community Services	L.E. Phillips Libertas Center
Autism Society – Chippewa Valley Chapter	Lifenet Inc.
Beyond Abilities	Local and County Law Enforcement
Brotoloc	Lutheran Social Services (LSS)
Burzynski Adult Family Home	Maple Street Adult Family Home
Callier Clinic	Marriage & Family Health Services
Carroll's Friendship Farm	Marshfield Clinic
Catalyst for Change Consultants	Mayo Clinic Health System
Center for Independent Living	Musical Medicine
CESA 10	Nature's Edge
Child Abuse and Neglect Committee	New Hope Community Based Residential Facility (CBRF)
Children with Differing Abilities Advisory Committee	Northwest Counseling & Guidance Center
Children's Service Society of Wisconsin	Northwest Regional Detention Center
Chippewa Area Recovery Resource (CARR)	Open Door Clinic
Chippewa County Corporation Counsel	Phoenix Alternatives
Chippewa County Aging & Disability Resource Center (ADRC)	Pine Ridge Adult Family Home
Chippewa County Department of Public Health	Positive Alternatives
Chippewa County Housing Authority	PRIDE Program, UW-Eau Claire Department of Kinesiology
Chippewa County Jail	Rachel's Place Early Learning Center
Chippewa County Job Center	Reaching Your Potential
Chippewa County Mental Health & Substance Abuse Recovery and Coordinating Committee	Reliant Rehab
Chippewa County Parks & Rec	ResCare Homecare
Chippewa County Schools	River Source Family Center
Chippewa County Veterans Office	Rosebud and Friends
Chippewa County Workforce Resource	Rutledge Charities
Chippewa Health Improvement Partnership (CHIP)	Sacred Heart Behavioral Health
Chippewa River Industries (CRI)	Sober Living Rentals
Chippewa Valley Family YMCA	Social Security Administration Eau Claire Office
Clinicare Corporation	Soft Landings
Community Counseling Services	Special Friends
Community Health Partnership (CHP)	SPOTS House – St. Joseph's Hospital
Coordinated Community Response to Domestic Violence and Sexual Assault	St. Joseph's Hospital
Department of Corrections	Starting Points
Dove Health Care	Think and Say Tutoring
Eau Claire County Human Services	Thunder Creek Adult Family Home
Eau Claire Schools	Trinity Equestrian
Educational Solutions	United Cerebral Palsy (UCP)
Fahrman Center	UW-Stout Vocational Rehabilitation Institute
Family Support Center	Western Regional Center for Children and Youth with Special Health Care Needs
Fuhrer Psychological Services	Western Region Recovery and Wellness Consortium
Gemini Cares	Wisconsin Early Autism Project (WEAP)
Grace Adult Day Services	Wisconsin VA/Veterans Assistance Center
The Healing Place	Women's Way
Heinz Psychological Services	

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Mark Nelson, Manager

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Children & Families Services Unit

Michelle Brown, Manager
Ann Holm, Lead Worker

Youth Support & Services Unit

Michelle Brown, Manager
Rose Baier, Lead Worker

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CHILDREN WITH DIFFERING ABILITIES DIVISION

In 2011 the Children with Differing Abilities Division (CWDAD) continued to provide services to children with mental health, physical, and developmental disabilities. Services were provided via our stalwart programs such as Children's Waiver, Birth to 3, Family Support, and Foster Care, along with the addition of linkage and follow-up services for those children who have experienced a crisis. The success of our division also rests in part on the providers we work with. Over the past year, we worked hard to maintain relationships with our providers as well as cultivate new relationships. In 2011, we also developed "outcome-based contracts" and pay for performance incentives with providers. These, along with additional internal processes,

are all part of our continuous quality improvement program designed to help ensure families are experiencing the outcomes they desire while ensuring we are being good stewards of the funding that we have been entrusted with.

POLICY INITIATIVES, UPDATES, AND CHANGES

FEDERAL | STATE | LOCAL

1. Birth to 3 continued transition to the Primary Coach Approach to Teaming.
2. Crisis stabilization placements for children were authorized by the State of Wisconsin. This has provided an additional tool for children in need of crisis stabilization services.
3. On November 1, 2011, Chippewa County transitioned to the Third Party Administrator system for the payment of services for children receiving waiver services. This was a federal mandate that needed to be fully operational by the end of 2011.

ACHIEVEMENTS

- **Redesign of the Single Point of Entry.** In an effort to continually improve services to the children and families of our County, Chippewa County Department of Human Services partnered with Chippewa County Department of Public Health. This partnership created a single point of entry for all children with special needs. Beginning March 1, 2011, all referrals for children who have special needs are made to the Western Regional Center for Children and Youth with Special Health Care Needs.

- **Improvements and updates made to the Community Resource Guide.**

This was a collaborative effort involving key stakeholders in the community.

- **Creation of a quarterly newsletter.**

The newsletter highlights available services, providers, consumer stories, upcoming events, as well as any new initiatives or policies on the horizon. The publication is for consumers and providers alike, as well as those in the community wanting more information on our services and programs.

- **Children's linkage and follow-up services.**

These were transitioned from the Community Mental Health and Recovery Services Division to CWDAD. This transition, which took place in March 2011, has allowed us to more effectively target those children who potentially qualify and benefit from ongoing services.

- **Foster care efficiencies continue with Eau Claire County.**

Chippewa County contracted with Eau Claire County Department of Human Services for the recruitment, licensing, re-licensing, and ongoing training of "general" licensed Chippewa County foster homes. This creates efficiencies through the regionalization model.

- **Participation in a suicide prevention coalition that was comprised of key stakeholders in the community.**

CWDA also contributed funding for a suicide prevention advertisement, which was shown in our local movie theatre.

PROGRAMS & SERVICES

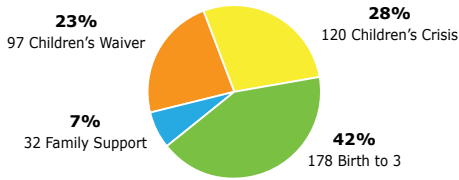
- Children's Foster Care
- Children's Long Term Support Waivers – Physical, Developmental, and Mental Health Disabilities; Autism
- Early Intervention Services for Children from Birth to 3 with Developmental Needs
- Family Support Program
- Independent Living Services
- Children's Crisis Services

2012 GOALS/DIVISION SCORECARD:

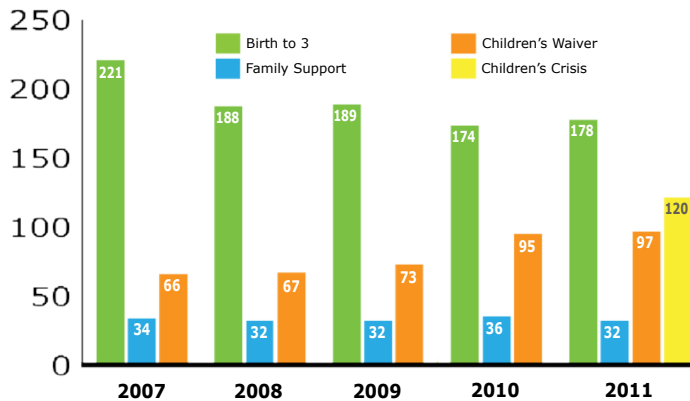
- Increase revenue generated by consumers to \$5,000.
- Increase billable hours (to 623 hours).
- Achieve budget goal of \$2,465,672.
- Conduct consumer satisfaction survey.
- Serve children and youth in the community whenever possible.
- Improve compliance rate on case reviews.
- A maximum of one 'find' of non-compliance per review in Birth to 3.
- Increase use of family-centered teaming approach.
- Improve outcomes of families, which will be measured via use of Child and Adolescent Needs and Strengths (CANS) Assessment.
- Increase division communication survey score (employee satisfaction) to 5.0.

SPECIAL NEEDS CHILDREN

CHILDREN SERVED IN 2011

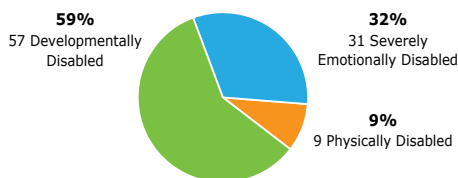


CHILDREN SERVED BY PROGRAM 2007 - 2011

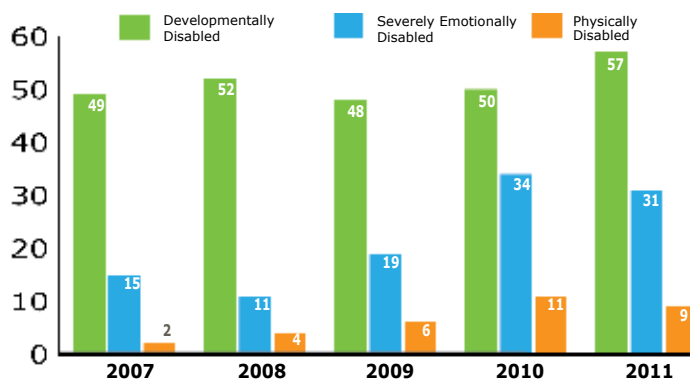


CHILDREN'S WAIVER BY DISABILITY

CHILDREN SERVED IN 2011



CHILDREN SERVED BY DISABILITY 2007 - 2011



Amoche Sesker

Matt is a young man who graduated from Chippewa Falls High School in May 2011, moved to Menomonie, and obtained employment at the Walmart Distribution Center – all in one month's time. This might sound like any high school graduate's dream; however, Matt's road to success was not that simple.

Matt began exhibiting behavioral/mental health issues at the age of four, which ultimately led to multiple hospitalizations. Matt's mother Vicki struggled with his behaviors. Later, Matt was also diagnosed with learning/cognitive disabilities. This all combined to make a perfect storm as he struggled through life. At home, Matt's behaviors escalated to the point where police intervention was required.

Vicki ultimately sought assistance from the Chippewa County Department of Human Services. Matt was determined eligible for Children's Long Term Support services. As a result of the goals developed in conjunction with Matt and his mother, services such as daily living skills were put in place to help him achieve these outcomes. Matt also helped develop his own crisis plan. The Chippewa Falls Middle and High School were instrumental in supporting Matt through their special education programming.

During his high school years, there was a noticeable positive change. Matt began to put forth effort in all areas of his life. He started utilizing the resources in place including his respite parents, teachers, and social workers when he became upset. As he progressed, Matt unwittingly became a role model for others. Matt said, "It was time to put my foot down. I didn't want to end up in prison or jail." During his senior year, Matt was referred to Project Search, a partnership between the Chippewa Falls High School and Walmart. This involved actually working at the Walmart Distribution Center. Matt was recently hired on as a full-time employee of Walmart.

Matt is currently living with his respite parents in Menomonie, Wisconsin. Matt's respite father commented, "Matt wanted to succeed and that is what he did." Matt was also excited to report he obtained a credit card with a \$100 limit so he can start building his credit rating. He also recently received his driver's permit, which has allowed him to increase his independence. Vicki is very pleased with her son and his accomplishments. Matt is also proud of himself and knows he can do anything he sets his mind to do. ■

COMMUNITY MENTAL HEALTH & RECOVERY SERVICES DIVISION

POLICY INITIATIVES, UPDATES, AND CHANGES

FEDERAL | STATE | LOCAL

There is a change underway in how mental health and substance abuse services will be provided in the distant future with a focus on evidence-based and best practices, the integration of mental health and substance abuse with primary care, and a shift from traditional medical models of care to outcome-based recovery models. Community Mental Health & Recovery Services Division (CMHRSD) is guided by the following priorities:

1. The Substance Abuse and Mental Health Services Administration's (SAMHSA) eight Strategic

Initiatives will guide work from 2011 to 2014.

2. Wisconsin's desire for a system of care that provides shared mental health and substance abuse services between counties and local providers.
3. Federal requirement to have electronic health records.
4. Wisconsin's Community Support Program (CSP) definition of evidence-based practice for co-occurring disorder (mental health/substance abuse) is: *Dual diagnosis treatments combine or integrate mental health and substance abuse interventions at the level of the clinical encounter. Hence, integrated treatment means that the same clinicians or teams of clinicians, working in one setting, provide appropriate mental health and substance abuse interventions in a coordinated fashion.*
5. Polysubstance abuse (defined as three or more substances over a period of 12 months). Treatment often involves legal and medical issues as well as treating underlying mental illness. Setbacks and relapses are common, which can be frustrating to the consumer as well as those around him. Consumers are often seen in crisis by our staff with no support system left.
6. Emergency Mental Health incidents continue to grow, decreasing staff's ability to spend time with consumers in CSP.
7. Key to any recovery model is peer support. The peer support movement in mental health continues to grow within our region of the state.

ACHIEVEMENTS

- **Recovery House.** Collaborating with Chippewa County Housing Authority to develop a supportive living environment for individuals in recovery.
- **Aurora Residential Services broke ground on construction of a multi-county Crisis Stabilization Center.** The center, located in Chippewa County, provides short-term mental health services to manage individuals who are experiencing a mental health crisis.
- **Individual Placement and Support (IPS) model in CSP.** Under contract, Chippewa River Industries (CRI) began implementing the IPS mode of supported employment. The model emphasizes rapid job search and ongoing support leading to competitive employment. In 2011, 26 percent of our CSP consumers were involved with supported employment assistance.
- **Ninety-one percent are satisfied.** While a number of CSP consumers are court ordered, 91 percent felt satisfied with their level of involvement in creating their recovery plan and identified they were provided assistance in a respectful and confidential manner.
- **CMHRSD a leader in the Western Region Recovery Wellness Consortium.** This resulted in an opportunity for Center for Independent Living to facilitate Peer Specialist Training for up to 20 interested consumers within the Western Region.
- **Nearly 13 percent drop in Emergency Detentions (EDs).** This drop indicates that crisis staff and/or law enforcement officers are effective in creating safety plans for individuals to remain in the community when linked to natural and community supports.

PROGRAMS & SERVICES

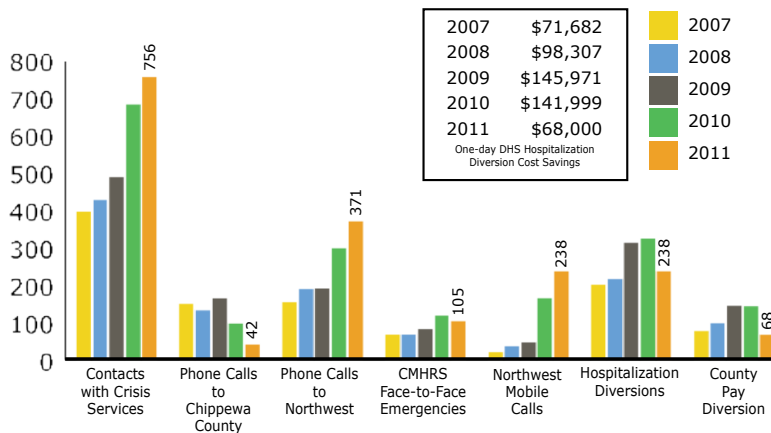
- Adult Family Home
- Adult Protective Services
- Chapter 51 Case Management & Residential Services – Adults
- Community Support Program (CSP) for the Chronically Mentally Ill
- Community Options Program – Adults
- Guardianships / Protective Placement
- Indigent Medication Program
- Mental Health Emergency Services
- Mental Health Inpatient Services Acute and Long Term Care
- Mental Health Crisis Services to Chippewa County Jail
- Outpatient Mental Health Services
- Outpatient Substance Abuse Services
- Protective Placement Reviews
- Work Related Services

ACHIEVEMENTS *CONTINUED*

- **Daily supportive contacts and medication supervision.** These contacts reduce the need for long-term placements.
- **Adult Protective Services I-Team.** The I-Team meets quarterly and focuses on financial abuse.
- **CMHRSD received a \$1,250 Prevent Suicide grant.** This grant helps to increase suicide awareness to the general public. Community members formed Prevent Suicide in Chippewa County.
- **Consumers completed treatment.** Fifty-five percent of the consumers referred successfully completed treatment through Lutheran Social Services (LSS). They were sober at the time of discharge and had a detailed continuing care plan and a stated intention to remain sober. Twenty-one percent of consumers referred started an intensive outpatient program and were referred on to inpatient treatment.
- **State approval.** CMHRSD received state approval on four consumer enrollments into Community Recovery Services (CRS). CRS provides Medicaid funding for Community Living Supportive Services to help consumers in recovery from serious mental illness.
- **State Council visits Chippewa County.** The Wisconsin Council on Mental Health (WCMH) visited Chippewa County. WCMH advises the Governor, Wisconsin Legislature, and the State Department of Health & Family Services.

Susan Klinger, LCSW

EMERGENCY CRISIS SERVICES SUMMARY



2012 GOALS / DIVISION SCORECARD:

- Create a healthy work environment.
- Increase Medicaid revenue through the Community Recovery Services (CRS) program.
- Achieve a high level of consumer satisfaction.
- Research and plan to implement new software system within the division.
- Increase prevention and early intervention efforts.
- Chippewa County CMHRS will be a leader in the Western Region Recovery & Wellness Consortium.

POSITIVE OUTCOME

In May 2007, shortly after the birth of her child, Sally stopped taking her medications and was hospitalized. She was referred to Community Mental Health and Recovery Services. Crisis Stabilization Services were offered including morning medication management, psychotherapy, substance abuse treatment, and symptom management. She continued to struggle with suicidal ideations.

In August 2008, Sally was enrolled in a program for persons with serious mental illness, the Community Support Program. She tried independent living on several occasions, but this was unsuccessful due to ongoing safety risks resulting from her mental health and substance abuse issues. In 2010, due to additional stressors in her life, Sally had a severe suicide attempt while trying once again to live at home.

She was placed in out-of-home care under a commitment order. Sally was enrolled into the Community Recovery Services program, a Medicaid billable program that provides Community Living Skills, Supported Employment, and Peer Support Services. Sally was also enrolled in the Community Options Program. These programs provided funding that helped offset her cost of placement. In 2010, programming for evening medication management was added to morning medication management in order to assist Sally with reminders to take medications. Sally has worked closely with Chippewa Area Recovery Resource (CARR) since 2010. Sally has gained an understanding of the negative affect substance abuse has on her mental health and helped her gain the skills to live a chemical free lifestyle.

In August 2011, after significant success in her recovery, she moved into her own apartment. She began utilizing supportive employment services under contract with Chippewa River Industries as part of the Community Support Program. Sally began working competitively cleaning rooms at a local hotel. She also enrolled in the Chippewa Valley Technical College and began her first courses.

She has been free of hospitalizations since 2010. Through her own determination and with the support of Community Mental Health and Recovery Services, Sally has gained the self-confidence and stability to accomplish many goals that had seemed impossible just a few years ago. ■

ECONOMIC SUPPORT DIVISION

POLICY INITIATIVES, UPDATES, AND CHANGES FEDERAL | STATE | LOCAL

On March 1, 2011, Governor Scott Walker introduced his 2011-2013 state Biennial Budget that proposed centralization and privatization of the Income Maintenance (IM) Programs administered by the Economic Support (ES) Division. As a result, the focus of the ES Division Manager and staff dramatically shifted.

PROGRAMS & SERVICES

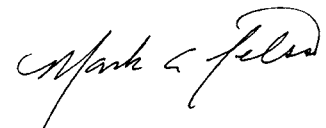
- Income Maintenance
 - BadgerCare
 - BadgerCare Plus
 - Food Share
 - Nursing Home
 - Family Care
- Wheels for Work
- Wisconsin Home Energy Assistance (WHEAP) Program
- Wisconsin Shares Child Care

ACHIEVEMENTS

- **Alternative to centralization.**
Educating state legislative members on the dire effect centralizing services would have on the consumers of Chippewa County became imperative. Fortunately after much communication by a number of individuals and organizations, an alternative to centralization was eventually approved that kept services at a regional and local level.
- **Ten multi-county consortia formed.**
The final budget required all counties (other than Milwaukee County) to form ten multi-county consortia, no later than October 1, 2011, for purposes of administering IM programs beginning January 1, 2012.
- **Budget specified responsibilities.**
The budget specified that each county have the following responsibilities: call/change center functions, application processing and eligibility determinations, ongoing case management, and reception services.

- **Great Rivers Consortium created.** To meet these requirements, the creation and operational organization of the Great Rivers Consortium was initiated and accomplished through a cooperative effort of staff, management, and directors across ten counties in the Northwest Wisconsin region. This was a daunting task, yet achieved within a very narrow time frame, especially in light of the continuing demand for services during the current economic times. One should note that educating legislators and forming the consortium does in fact fall under two of our strategic initiatives:

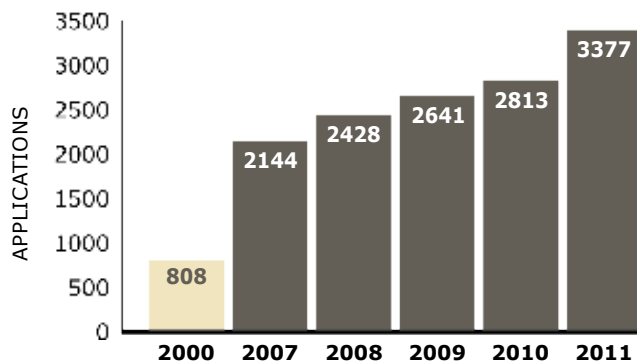
1. Educate and raise public awareness
2. Improve efficiency



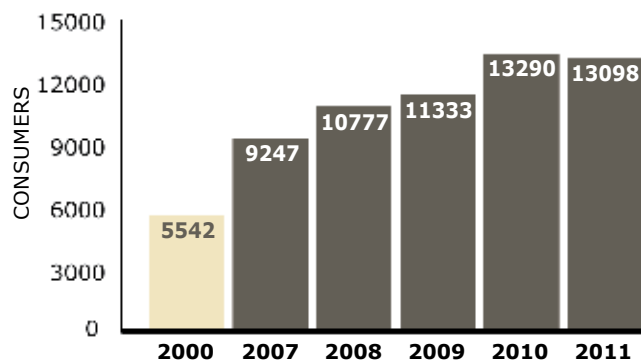
2012 GOALS / DIVISION SCORECARD:

- Complete a demographic study on program usage throughout county.
- Implement one quality improvement activity within Economic Support Division.
- Continue developing Great Rivers Consortium.
- Increase score on the Economic Support Communication Survey (employee satisfaction) from 6.26 to 6.50.

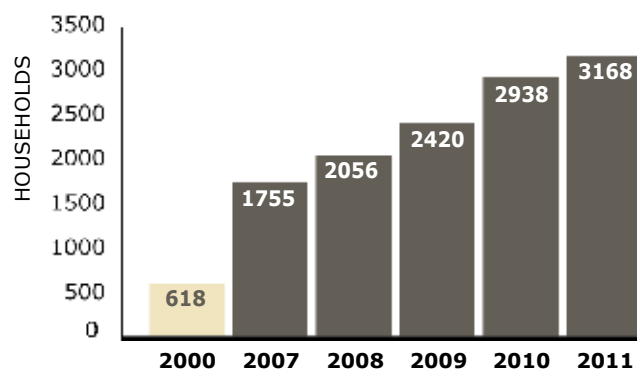
WISCONSIN HOME ENERGY ASSISTANCE PROGRAM (WHEAP) APPLICATIONS 2007-2011



MEDICAL ASSISTANCE RECIPIENTS 2007-2011



FOOD SHARE CASES 2007-2011



POSITIVE OUTCOME

Lindsey and family began receiving Economic Support Services in 2009 when her husband (like many others) began experiencing employment layoffs. The family originally applied for BadgerCare Plus when she was pregnant with her first child and often states they would have not been able to afford having a second child if it were not for BadgerCare Plus. Although her husband is now employed full-time at a more stable position; unfortunately (like many others), his employer does not offer health insurance and the family continues to have only BadgerCare Plus to offset medical costs for the family. Although they now have to pay a monthly premium for their BadgerCare coverage, they consider it a small price to pay for having coverage. Lindsey would like to express her gratitude to Chippewa County and the state of Wisconsin for having programs that are set up to help families in need of assistance. ■



CHILDREN, YOUTH & FAMILIES DIVISION

PROGRAMS & SERVICES

YOUTH SUPPORT & SERVICES UNIT

- Community Service Program
- Delinquency Ongoing Services
- Prime For Life Prevention Program
- Restitution
- Strengthening Families Prevention Program
- Child & Family Specialist

PROGRAMS & SERVICES

CHILDREN & FAMILY SERVICES UNIT

- Child & Family Specialist
- Child Protective Services
 - Access
 - Initial Assessment
 - Ongoing Services
- Kinship Care Program
- Strengthening Families Prevention Program
- Safe and Stable Families

POLICY INITIATIVES, UPDATES, AND CHANGES

FEDERAL | STATE | LOCAL

Throughout 2011, the newly created Children, Youth and Families Services Division (CYFSD) continued to blend its two units, the Youth Support and Services (YSS) Unit, working with juveniles and their families, and the Children and Families Services (CFS) Unit, working with children in need of protection or services and their families. Both units were involved in new initiatives in 2011 that helped guide our practice and change some of our traditional interactions with families.

Within the division we continue to educate ourselves on evidence-based practice and using data to guide our decision making processes. Requests for proposals were awarded in 2010 that resulted in new programs and services being offered to our families in 2011. Data is being gathered in each of these areas in order to ensure that the programming is having the desired impact on our community and to brainstorm solutions in cases where programming does not appear to be meeting desired outcomes.

The federal government continues to set benchmarks in child welfare, outlining best practice and expectations to be met by states and subsequently counties. In Chippewa County we consistently meet these benchmarks and continually monitor our practice in order to ensure we continue to do so.

ACHIEVEMENTS

■ **County Data Leadership Initiative.** In 2011, Chippewa County CYFSD applied for and received a grant for the County Data Leadership Initiative, which is intended to enhance the ability of counties to use child welfare data to guide decision making. The first year of the grant involved intensive technical assistance and training

along with completion and approval of a performance plan specific to Chippewa County. The County chose five initiatives to track data related to federal benchmarks and outcome measures. The grant will continue into 2012 with extensions possible, depending on future allocation of funds.

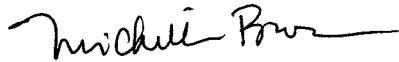
■ **Coordinated Service Teams.** We were able to devote one staff in the CFS unit to implementing Coordinated Services Teams (CST) at the end of 2011. CST allows for a team, made up of formal and informal supports identified by the family, to gather around the family and support their efforts toward healthier functioning. Three families were served from September to December 2011.

■ **"Day in the Life" event.** We participated in a "Day in the Life" event for journalists, Human Services and County Board, and other elected officials. The CYFSD had several participants who went on home visits and attended team meetings with social workers. "Day in the Life" gave participants the opportunity to meet with children and families and to observe firsthand the services provided by CYFSD. Families were able to share their stories with journalists, board members, and other elected officials.

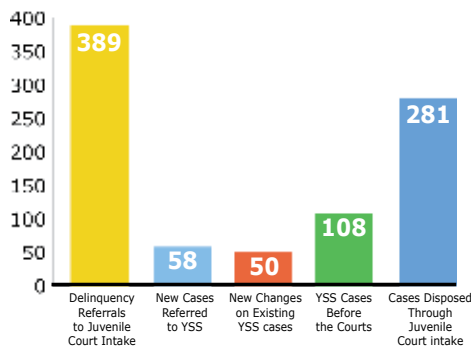
■ **Alternative Response.** The CFS Unit prepared for the implementation of Alternative Response (AR) in Child Welfare in January 2012. The Unit attended AR trainings and an AR community forum. The manager and lead worker for the Unit attended training on implementing change and have met with several agencies and law enforcement to discuss AR.

ACHIEVEMENTS *CONTINUED*

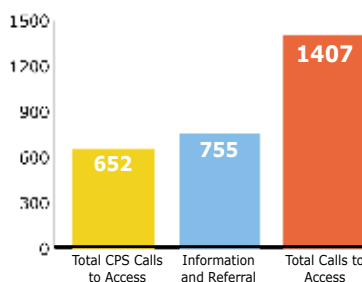
- **CFS creates peer review.** The CFS Unit created a peer review procedure to review forensic interviews in child abuse cases. The purpose of the peer reviews are to provide strong forensic interviews to the District Attorney's (DA's) Office in order to support criminal convictions and improve interviewing techniques of children. The procedure was developed with the Child Advocacy Center, local law enforcement agencies, and the DA's Office.
- **YSS Unit proposals for cognitive program.** The YSS Unit requested proposals for a cognitive intervention program, which will serve moderate to high risk youth. The Juvenile Cognitive Intervention Program (JCIP) was selected based on the research demonstrating positive outcomes for this program. An intensive four-day training was conducted for group leaders, with groups anticipated to begin in 2012.
- **Prevention programs provided.** Several prevention programs were provided in 2011 including Prime for Life, Strengthening Families, and Safe and Stable Families. Data is being collected from these programs to determine outcome measures and necessity of services in various areas throughout the County.



FAMILIES SERVED IN YSS 2011



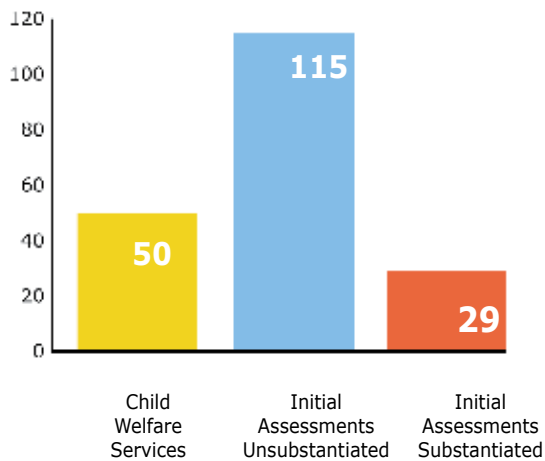
CALLS TO ACCESS IN CFS 2011



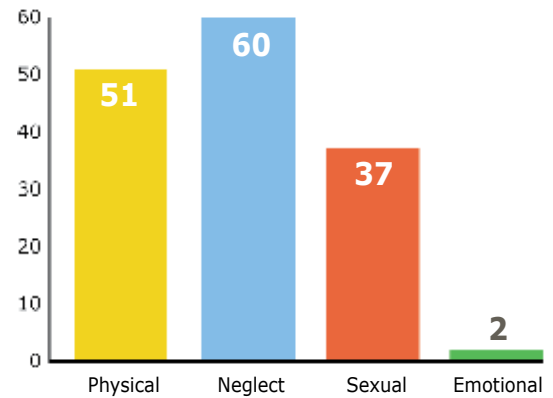
The following letter was written by a mother whose daughter (Melanie) was placed on supervision after acting out in the community and committing several delinquent acts. Very clearly the young lady's behaviors were the result of traumas she had recently experienced.

I would like to express my thanks to Chippewa County Department of Human Services. For three years, your staff has assisted my family. After a break-in to our home and the loss of our house, cars, and our pride and moving to a new town that was foreign to my family, Melanie went off the deep end. I was able to pull her back with a program, but the second hit to our family was directed straight at her. Melanie endured the pain physically and mentally of being raped. I thought we were going to lose her altogether and she may die with the consequences of this bad experience in her life. She came back to me a skeleton emotionally. Melanie was seeking out drugs, stealing and promiscuity for comfort and instant gratification like a pacifier for a baby. She went from being a straight A student to not caring whether she went to school or not. Our family landed in the hands of a very special social worker due to my daughter finally getting in trouble with the law for stealing. Your services helped me get my daughter through the darkest of times and helped her turn her life around by showing her a steady path while she endured the rockiest of climbing. Melanie tried to commit suicide two times during this dark time. She didn't care about herself anymore and was not grounded at all in her thinking. With the path your social worker provided, she rebounded by leaps and bounds. Melanie got her life back on track relying on the support of your services as she stood again. She ended up graduating high school four months earlier than the rest of her class at our local Technical College and is registered to start college in September 2012 to be a dental hygienist. We are forever grateful to your staff and everybody that supports your social workers. You molded Melanie into the honorable young lady I always knew she would be. You helped save my daughter's life and future. Thank you for going up and above your jobs and truly caring about the children and adolescents you facilitate. ■

CASES ASSIGNED in CFS



SCREENED IN CFS CASES BY MALTREATMENT



2012 GOALS/DIVISION SCORECARD:

- Continue to create and maintain a healthy work environment.
- Stay within budget in all programs and increase revenue brought into the Department.
- Decrease client grievances.
- Continue to serve youth and children in the community.
- Increase prevention and early intervention efforts.
- Prevent out-of-home placements when safety can be assured in the home.
- Use risk assessment tools to determine appropriateness of referrals for services.

POSITIVE OUTCOME

The following was written by a teenage girl regarding her experience with foster care and adoption.

I remember sitting across the table from the school guidance counselor and my foster mom, talking about options. I was mad at everybody, blaming every wrong choice I had ever made and every bad situation I had been in on somebody else. Looking back at myself then, I realize that all of the things I thought I needed, I didn't need. I needed a family. I needed to be loved. I needed to not be moved again.

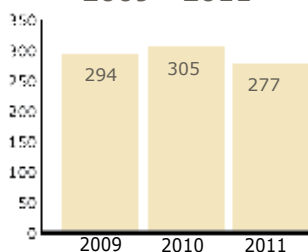
Being adopted is one of the hardest things I have ever done. From watching my mom tell the judge she couldn't take care of me at the Termination of Parental Rights (TPR) hearing to the late night talks with my foster parents because I was scared of the roller coaster of emotions that comes with this new life. In the end though, I know it's all been worth it. I got the best family in the world...and I think they got the best daughter too. ■



CHILDREN WITH DIFFERING ABILITIES DIVISION:

The following graph shows the Children with Special Needs Referrals 2009 - 2011.

CHILDREN WITH SPECIAL NEEDS REFERRALS 2009 - 2011

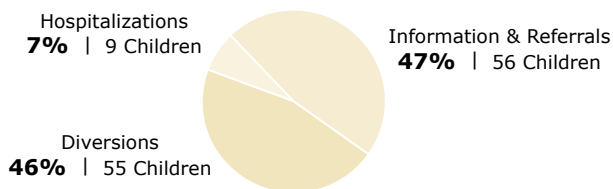


The single point of entry system was redesigned in 2011 with the new model being a collaboration with the Chippewa County Department of Public Health. Referrals in 2011 were lower than the two previous years, primarily in the Birth to Three program.



The following pie chart illustrates the breakdown of diversions, hospitalizations, and other outcomes for Children's Crisis Services.

CHILDREN'S CRISIS SERVICES OUTCOMES 2011

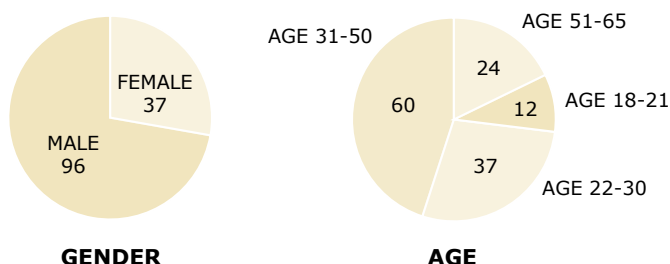


Chippewa County Department of Human Services collaborates with Northwest Connections for the provision of Crisis Services for Children. Services provided by Northwest include both phone and mobile crisis. Both functions are performed by specially trained staff who are available 24 hours a day, 7 days a week. When warranted, the mobile crisis will respond to the site of the crisis. As of March 7, 2011, linkage and follow-up services were transferred from the Chippewa County Community Mental Health and Recovery Services to the Children with Differing Abilities Division. When safe and appropriate, the goal is to avoid hospitalization. In 2011, there were 55 hospital diversions compared to 9 hospitalizations. The majority of children remained in the community and were offered information and referrals.

COMMUNITY MENTAL HEALTH & RECOVERY SERVICES DIVISION:

A total of 133 clients were served under the 2011 contract with Lutheran Social Services (LSS) for the Chippewa Area Recovery Resource (CARR) program. The following pie charts illustrate the breakdown of the 133 clients by gender and age.

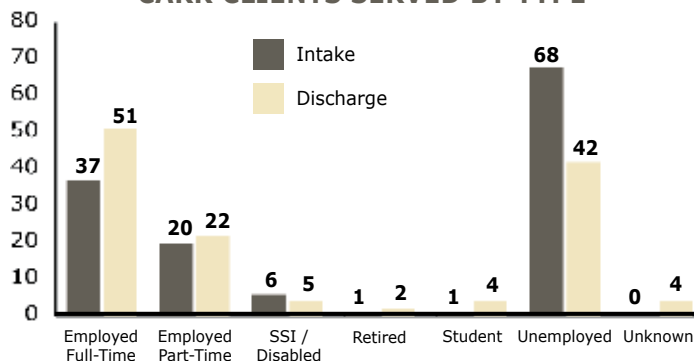
CARR CLIENTS SERVED BY AGE AND GENDER



NOTE: Based on 133 clients.

Clients in need of primary outpatient treatment for addictions were involved in groups three times weekly, and then were referred to CARR Continuing Care group that meets once weekly. All clients were assessed utilizing standard Alcohol and Other Drug Abuse (AODA) assessment tools and the required Wisconsin Uniform Placement Criteria (WI UPC), and had access to individual and family sessions as needed. One of our main goals, in addition to increased length of sobriety, is assisting and encouraging clients to obtain paid employment. The following chart delineates our success in this area.

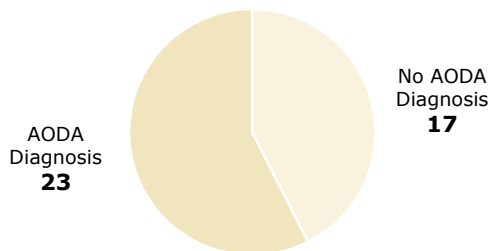
CARR CLIENTS SERVED BY TYPE





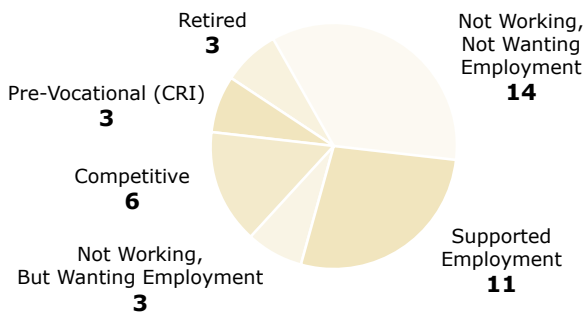
COMMUNITY MENTAL HEALTH & RECOVERY SERVICES DIVISION *CONTINUED*

CSP CONSUMERS WITH SUBSTANCE ABUSE DIAGNOSIS



NOTE: Number of all 40 active Community Support Program (CSP) consumers. AODA stands for Alcohol and Other Drug Abuse.

CSP CONSUMERS EMPLOYMENT STATUS

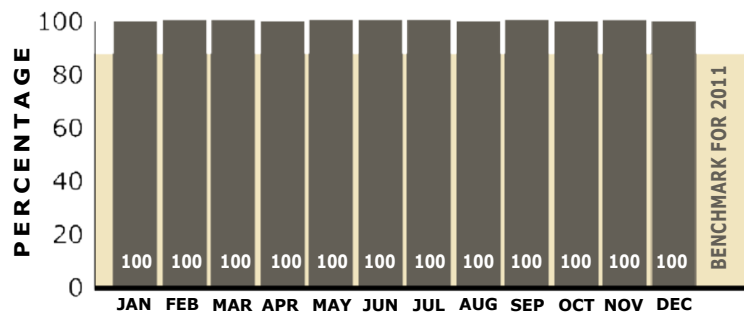


NOTE: Number of all 40 Community Support Program (CSP) consumers who were employed.

CHILDREN, YOUTH & FAMILIES DIVISION:

As part of Child Welfare Reform, the federal government continues to track outcomes related to child welfare services. The monthly face-to-face contact with all children placed in out-of-home care is intended to ensure safety of children in out-of-home placements as well as maintain momentum toward permanency. For the federal fiscal year 2010-2011, the benchmark is set at 90 percent of children or youth in placement that will be seen by their worker each month. The Children, Youth and Families Division has maintained monthly face-to-face contact with 100 percent of the children and youth in placement since November 2010. The division remains committed to exceeding this benchmark.

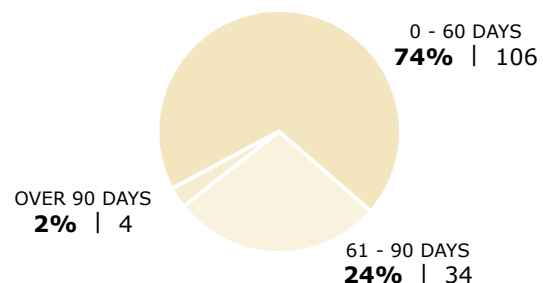
FACE-TO-FACE CONTACTS 2011



CHILDREN & FAMILIES SERVICES UNIT

As a measure to help ensure that the health and welfare of children is addressed in a timely manner, the Children and Families Services (CFS) Unit shall complete an initial assessment (IA) within 60 days of receiving the original access report. In some instances, particularly in those cases where there is no jurisdiction for court involvement and there may be an unmet need requiring continued resources, workers have the ability to request a 30-day extension. Therefore, all initial assessments should be approved no later than 90 days from the date the original report was received. While Chippewa County has not met 100 percent on this measurement, we continue to examine our practice and have established a new procedure to ensure meeting this benchmark in the future.

COMPLETED INITIAL ASSESSMENTS (IA)



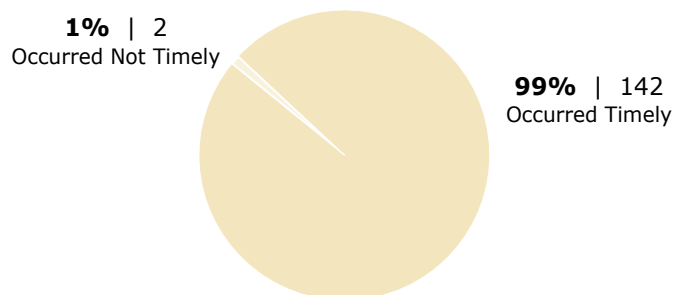
NOTE: Out of 144 total occurrences.

CHILDREN & FAMILIES SERVICES UNIT

CONTINUED

Another federal benchmark is the response time in which the Children and Families Services (CFS) Unit first meets with a family face-to-face in response to an allegation of abuse or neglect. When an access report is screened in, a response time is indicated based on safety factors identified in the report. The sought after benchmark is 100 percent timeliness in meeting the initial face-to-face contact; however, due to the nature of making unannounced visits, this can be challenging. Chippewa County continues to meet the benchmark in all screened in calls where an impending danger threat has been identified. We continue to review ways to change our practice and improve this benchmark.

RESPONSE TIME 2011

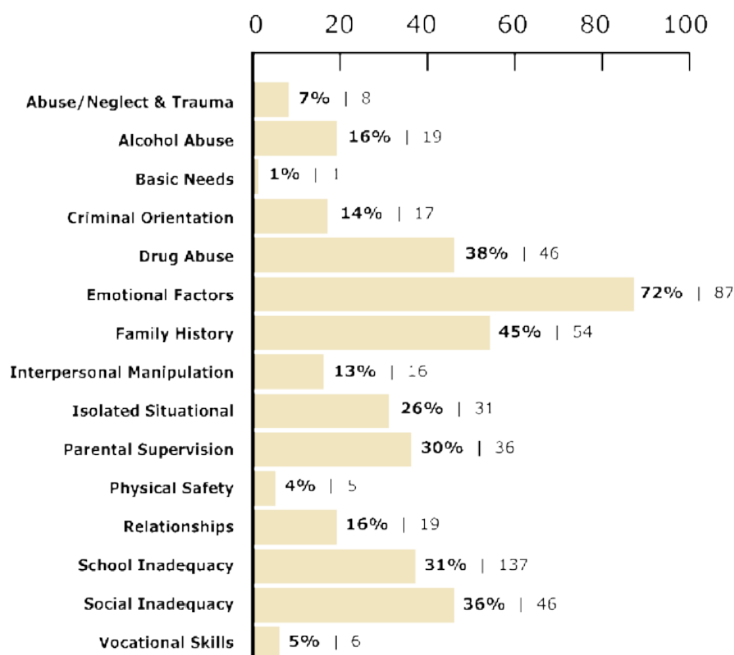


NOTE: Out of 144 total occurrences.

YOUTH SUPPORT & SERVICES UNIT

In 2010, the Youth Support and Services (YSS) Unit began implementation of the Juvenile Assessment and Intervention System (JAIS), an assessment tool designed to give workers information about the youth they are working with in order to better provide services and resources to the family. The JAIS risk assessment separates results into the service areas identified in the bar chart below. Out of 120 assessments completed, the majority of youth showed needs in the area of Emotional Factors, which affect their functioning and decision making. The next highest area is Family History. The assessment asks several questions in various ways to discern what factors influence decisions. Breaking down the service areas into categories can be very helpful in determining what types of programs to invest our resources in.

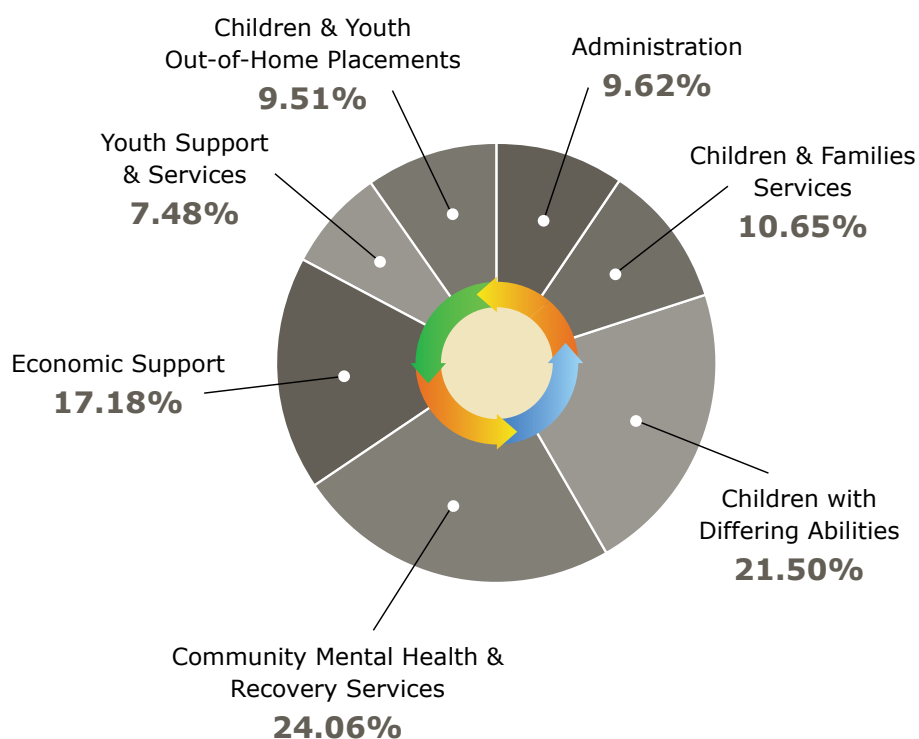
RESULTS OF THE JUVENILE ASSESSMENT AND INTERVENTION SYSTEM (JAIS) RISK ASSESSMENT 2011





2011 FISCAL REPORT

EXPENSE	\$10,044,032
REVENUE	\$10,705,942
SURPLUS	\$661,910



EXPENSES

Administration	\$965,786
Children & Families Services	\$1,069,702
Children with Differing Abilities	\$2,159,006
Community Mental Health & Recovery Services	\$2,416,192
Economic Support	\$1,726,045
Youth Support & Services	\$751,568
Children & Youth Out-of-Home Placements	\$955,733

CHALLENGES AHEAD

- Continuing community outreach long after the initial implementation phase when new initiatives that affect community and service partners have been put into practice.
- Informing Chippewa County citizens about the value of human services, and the contribution consumers make because of receiving services.
- Counteracting adult substance abuse as a driving force in placement costs.
- Handling the anticipated increase in polysubstance abuse.
- Promoting and implementing the mental health recovery model.
- Maintaining and creating uniformity and standardization across the 10-county Great Rivers Consortium.
- Managing the outcome of the 2013-2015 State of Wisconsin biennial budget.
- Creating and sustaining strong partnerships within Chippewa County. As implementing evidence-based and best practices is an evolving process, this is essential in order to achieve outcomes that support and change consumer lives.

EXISTING BARRIERS THAT REQUIRE ATTENTION IN CHIPPEWA COUNTY

- Lack of adequate employment opportunities for individuals in Chippewa County impacting family functionality.
- Citizens willing to be tolerant and offer support to struggling individuals and families.
- Citizen apathy toward the excessive use and abuse of alcohol and drugs.
- Citizen perspective that a community member seeking assistance for human services is a weakness.
- Citizen understanding of the value of human services and its positive impact in communities.
- Systems imposing their own agenda rather than listening to what an individual or family needs.
- Adequate resources to prevent the need for adult protection and elder abuse intervention services.
- Gaps in the continuity of care after a mental health crisis lead to an ongoing need for emergency mental health services.

BOARD MEMBERS



TOP (l to r): Don Hable, John C. 'Jack' Halbleib, and Evelyn Maloney.
MIDDLE: Larry Marquardt, Dave Martineau, and Christine Maslonkowski.
BOTTOM: Gary Misfeldt, Paul Michels, and Hunter Oemig.

LEADERSHIP TEAM



FRONT (l to r): Ann Holm, Mark Nelson, Michelle Brown, Sue Klinger, Tom Diel, and Rose Baier.
BACK: Melissa Christopherson, Linda Hebert, Mary Zachau, Larry Winter, Pauline Spiegel, and Tim Easker.



“ Chippewa County Department of Human Services
has over 60 employees ready to serve consumers
and efficiently utilize the resources we receive from taxpayers.
Our mission and values reflect our commitment
to providing a fair and respectful experience
for all individuals we interact with. ”

Larry Winter, Director



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