



2023 PROPOSED BUDGET

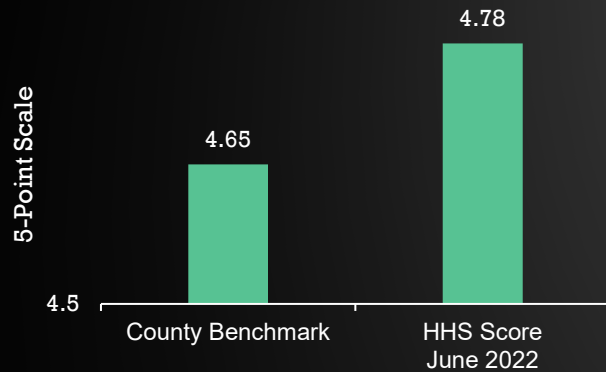
HHS STAFF PRESENTATION

STRATEGIC PLAN

Customer Service Pillar

Customer Satisfaction Strategy

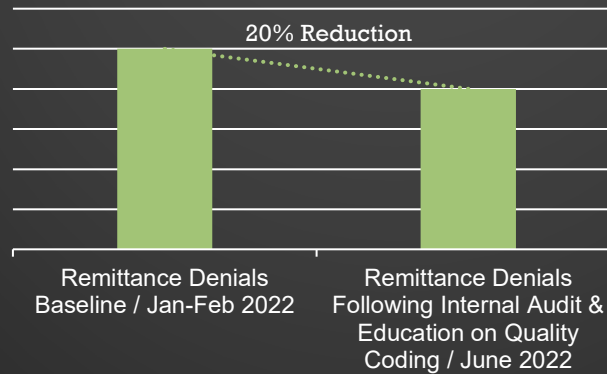
Most Recent Customer Service Survey Scores



Finance Pillar

Quality Assurance Strategy

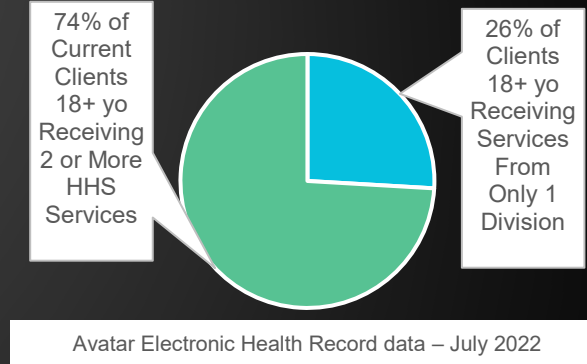
Documentation Improvements
Reduced Claims Denials



Quality Pillar

Data Access, Quality & Analytics Strategy

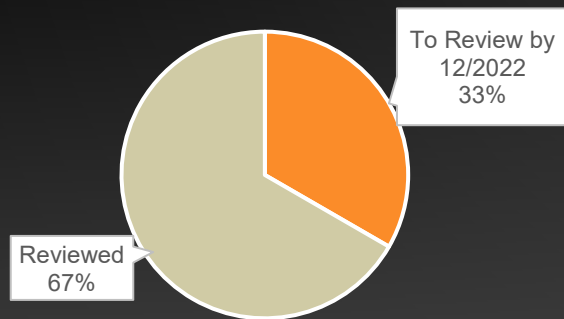
Percentage of Adults Receiving Services from more than One HHS Division



Customer Service Pillar

Outreach and Marketing Strategy

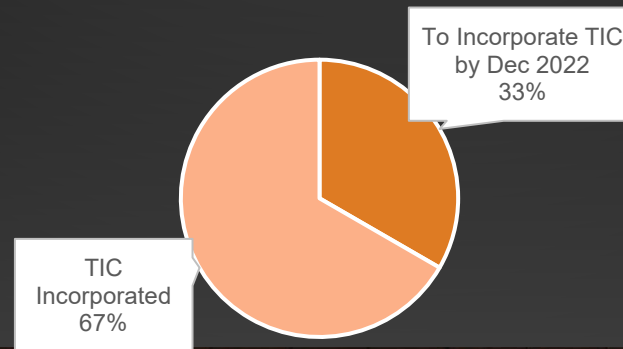
Percentage of HHS Divisions Having Marketing Collateral Reviewed with DEI Checklist



Health and Safety Pillar

Trauma Informed Care (TIC) Strategy

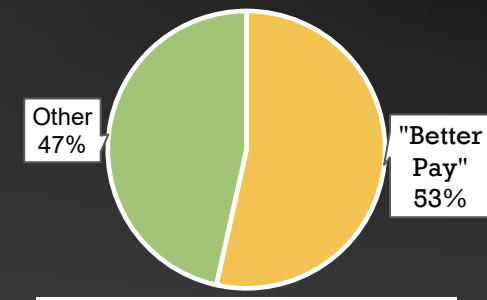
Percentage of HHS Divisions that Have Incorporated Trauma Informed Care Into Their Work



Team Pillar

Retain Strong Employees Strategy

Percentage of Exiting HHS Employees Who Self-Reported Leaving Employment for "Better Pay"



Exit Survey Data, Jan – June 2022

**THE
COMMUNITY
ADVISORY
COMMITTEES
MET ON APRIL
21ST AND
IDENTIFIED THE
FOLLOWING
COMMUNITY
NEEDS.**

Support Public Health 3.0.

Address Social Determinants of Health- Inclusion, Accessibility, Cultural Competence.

Accessibility to quality services across the life span.

Building community collaborations to address lack of affordable housing and homelessness.

Creating opportunities for preventative early intervention programs that meets Family First Prevention Services Act qualifications and standards.

Creating flexible funding for CHIP initiatives, child welfare initiatives and develop program supports through Older Americans Act funding.

Address workforce challenges.

Create an expanded model for community transportation that addresses gaps in service and accessibility.

Expand targeted mental health and substance use services.

HEALTH AND HUMAN SERVICES

ALL FUNDS SUMMARY

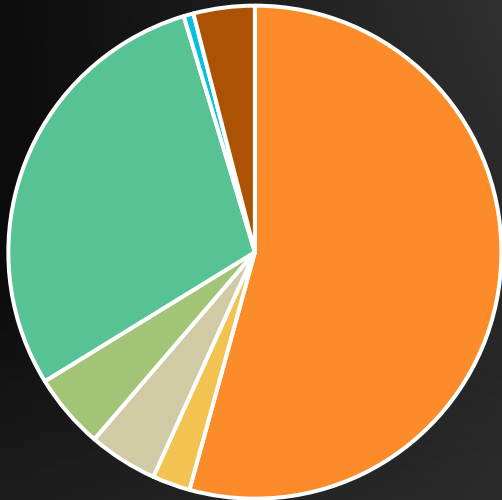
Financial Summary	2021 Actual	2022 Adopted Budget	2022 Estimate	2023 Budget	Change From 2022 Adopted Budget	
					\$	%
General Fund						
Revenues	\$59,297,669	\$57,411,879	\$58,236,230	\$65,197,738	\$7,785,859	14%
Appr. Fund Balance	\$1,163,683	\$922,189	\$1,003,653	\$414,316	(\$507,873)	-55%
County Tax Levy/(Credit)	\$23,660,389	\$26,984,374	\$26,984,374	\$27,134,374	\$150,000	1%
Expenditures	\$79,020,498	\$85,318,442	\$83,371,372	\$92,746,428	\$7,427,986	9%
Rev. Over (Under) Exp.	\$5,101,243	\$0	\$2,852,885	\$0	\$0	N/A
Aging and Disability Resource Center Contract Fund						
Revenues	\$3,425,648	\$3,777,002	\$3,567,634	\$3,825,589	\$48,587	1%
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
County Tax Levy/(Credit)	\$0	\$0	\$0	\$0	\$0	N/A
Expenditures	\$3,425,649	\$3,777,002	\$3,567,634	\$3,825,589	\$48,587	1%
Rev. Over (Under) Exp.	(\$1)	\$0	\$0	\$0	\$0	N/A
American Resuce Plan Act (ARPA) Fund						
Revenues	\$665,301	\$335,966	\$1,974,950	\$1,690,965	\$1,354,999	403%
Appr. Fund Balance	\$0	\$0	\$0	\$0	\$0	N/A
County Tax Levy/(Credit)	\$0	\$0	\$0	\$0	\$0	N/A
Expenditures	\$665,301	\$335,966	\$1,974,950	\$1,690,965	\$1,354,999	403%
Rev. Over (Under) Exp.	\$0	\$0	\$0	\$0	\$0	N/A
All Funds						
Revenues	\$63,388,618	\$61,524,847	\$63,778,814	\$70,714,292	\$9,189,445	15%
Appr. Fund Balance	\$1,163,683	\$922,189	\$1,003,653	\$414,316	(\$507,873)	-55%
County Tax Levy/(Credit)	\$23,660,389	\$26,984,374	\$26,984,374	\$27,134,374	\$150,000	1%
Expenditures	\$83,111,448	\$89,431,410	\$88,913,956	\$98,262,982	\$8,831,572	10%
Rev. Over (Under) Exp.	\$5,101,242	\$0	\$2,852,885	\$0	\$0	N/A
Position Summary (FTE)						
Regular Positions	415.96	415.71	424.71	439.96	24.25	
Extra Help	44.75	29.02	29.02	21.75	(7.27)	
Overtime	3.22	4.61	4.61	4.40	(0.21)	
Total	463.93	449.34	458.34	466.11	16.77	

2023 BUDGET FUND BALANCE ANALYSIS

Fund Balance Appropriation	Program	2020 Actual	2021 Actual	2022 Budget	2022 Estimate	2023 Request
Avatar Nx Project	Administrative Services			\$215,000	\$215,000	\$75,000
Dept-wide Initiatives for Alternative Placement Services	Administrative Services	\$50,000	\$50,000	\$50,000	\$50,000	\$25,000
Dept-wide Initiatives for Alternative Placement Services	Child & Family: In-home Safety/Out of Home Placement Services	\$150,000	\$150,000	\$0	\$0	\$0
Dept-wide Initiatives for Juvenile Correction Placement Services	Adolescent Family Services: Juvenile Services	\$0	\$0	\$0	\$0	\$214,000
One-Time Building Projects & Equipment Replacements	Mental Health Center	\$97,391	\$113,000	\$90,000	\$90,000	\$92,000
One-Time Equipment Purchases for Senior Dining	ADRC-Community Services	\$7,700	\$7,700	\$7,700	\$7,700	\$8,316
Judicial Training Activities	Criminal Justice Collaborating Council	\$10,000	\$10,000	\$0	\$0	\$0
CCS Positions Which will Receive Settlement Starting in Second Year	Adolescent & Family	\$0	\$0	\$266,530	\$266,530	\$0
CCS Positions Which will Receive Settlement Starting in Second Year	Clinical Services	\$0	\$0	\$134,000	\$134,000	\$0
CJCC Diversion Program Gap Funding	Criminal Justice Collaborating Council	\$0	\$0	\$158,959	\$158,959	\$0

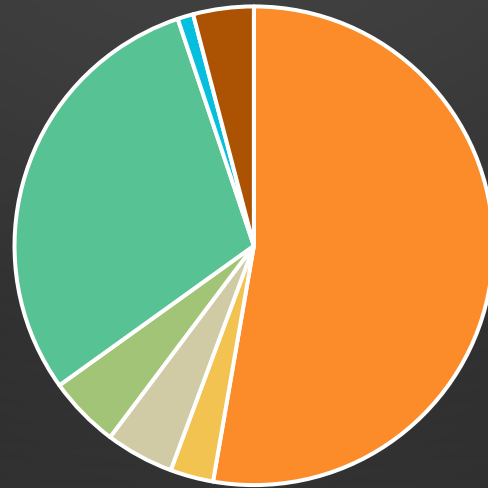
REVENUES

2021 Actual



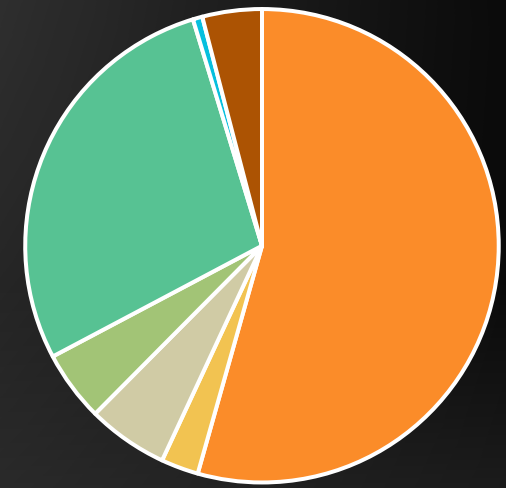
- Grant (54%)
- T-19 (5%)
- Tax Levy (29%)
- Other Revenues (4%)
- Program Fees (2%)
- Other Insurance (5%)
- Fund Balance (1%)

2022 Projected



- Grant (52%)
- T-19 (5%)
- Tax Levy (30%)
- Other Revenues (4%)
- Program Fees (3%)
- Other Insurance (5%)
- Fund Balance (1%)

2023 Proposed



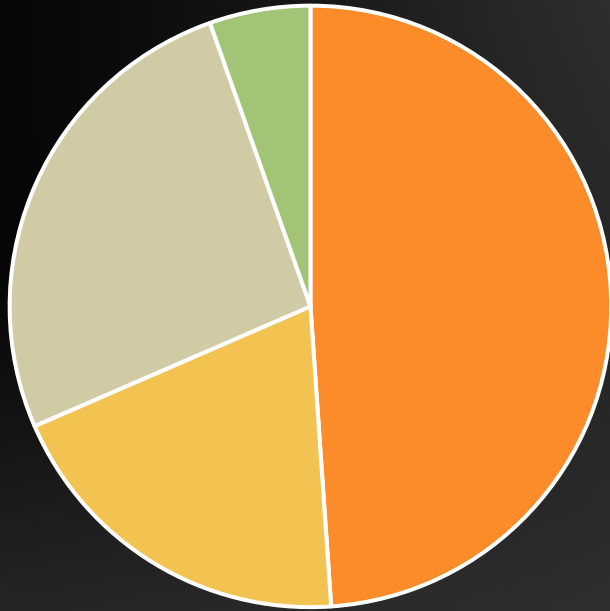
- Grant (53%)
- T-19 (6%)
- Tax Levy (28%)
- Other Revenues (4%)
- Program Fees (3%)
- Other Insurance (5%)
- Fund Balance (1%)

CHANGES IN GRANT REVENUES

Changes in Grant Revenue	Amount
Administration - Basic County Allocation	(\$19,165.00)
Resource Support - Income Maintenance	\$75,111.00
Resource Support - Fraud	\$3,042.00
Resource Support - Child Care Administration	\$7,616.00
Veteran's Services	\$1,300.00
Children's Long-Term Support (CLTS)	\$1,742,272.00
CLTS TPA Pass Thru Funding	\$2,500,000.00
Children's Birth to Three	\$11,724.00
Children's Youth Aids/YA AODA/Community Intervention	(\$23,207.00)
Children's Target Safety and Support	\$35,000.00
Children's Kinship	\$108,913.00
Children's Subsidized Guardianship	\$200,000.00
Child Welfare Grants (Caregiver Support, IV-E Legal)	\$21,340.00
ADRC Contract Fund with Federal Match	\$15,869.00
ADRC Title III-B Supportive Services w	\$26,945.00
ADRC Title III-E Caregiver Program	\$15,841.00
ADRC Title III-C1 Congregate meals	\$27,182.00
ADRC Title III-D & Nutrition Services Incentive Program	\$524.00
ADRC Specialized Transportation	\$8,755.00
ADRC 381 Alzheimers Family Caregiver Support	\$26,546.00
Criminal Justice Collaborating Council (CJCC)	(\$167.00)
Clinical - Mental Health / Mental Health Block Grant	\$36,295.00
Clinical - Mental Health / Collaborative Crisis Intervention Services for Youth	\$48,612.00
Clinical - Mental Health / Regional Crisis Stabilization Facility	\$226,490.00
Clinical - Mental Health / State Opioid Response	(\$81,861.00)
Clinical - Mental Health / Justice & Mental Health Collaboration	(\$131,931.00)
Clinical - Mental Health / Emergency COVID-19 Project	(\$968.00)
Clinical - AODA / R&B Costs for Medicaid Members	\$136,965.00
Public Health - WIC	(\$1,686.00)
Public Health - COVID Funding	(\$191,627.00)
Public Health - Other grants	(\$9,643.00)
American Rescue Plan Act Funding - ADRC	\$246,560.00
American Rescue Plan Act Funding - Public Health	\$76,148.00
American Rescue Plan Act Funding	\$658,336.00
Opioid Settlement Funding	\$609,784.00
Total Changes in Grant Revenues (Decrease) / Increase	\$6,406,915.00

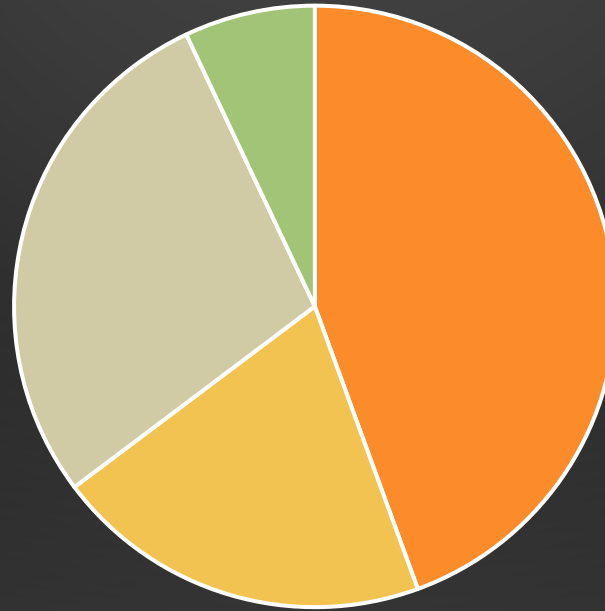
EXPENSES BY CATEGORY

2021 Actual



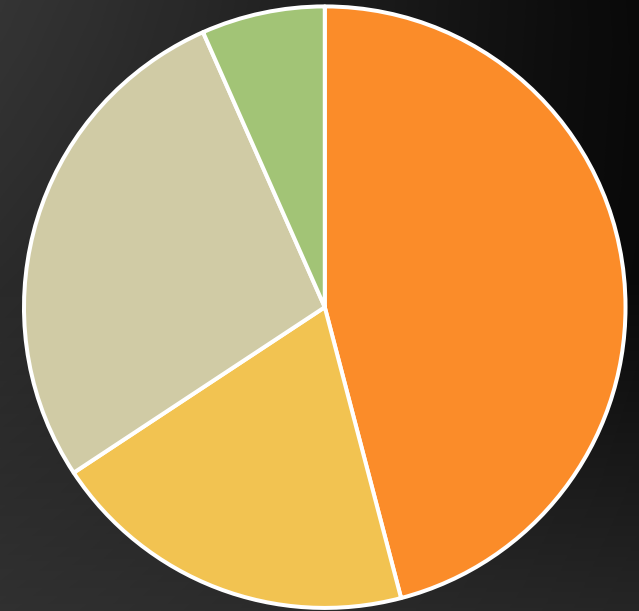
Personnel (49%) Contracts (20%)
Other Operating (26%) Inter-Departmental (5%)

2022 Projected



Personnel (45%) Contracts (20%)
Other Operating (28%) Inter-Departmental (7%)

2023 Proposed



Personnel (45%) Contracts (20%)
Other Operating (28%) Inter-Departmental (7%)

SERVICE CONTRACTS

- Due to inflation, cost to continue, and other budget drivers, the department has had to look at managing our contracts differently.
- Contract dollars in some areas will remain flat. This may result in a reduction in services as our vendor's costs continue to rise.

	Contract Type	Notes
Contract Non-Renewals		
Family Services	PCIT	40,000
	Screeener / parent aide	\$114,966
Hebron House	Donation	\$10,507
Homes for Independent Living	Mental Health Workers	\$755,000
Flat Funding		
Easter Seals	Safebabies	\$101,533
Residential Placements	Room and Board	Negotiated contracts
Contract Reduction		
Power for Change	In-home therapy	\$50,000
Increased Budget		
WCS	2%	negotiated contract \$20,400
PSG	Increase to match CLTS staff rate	12% increase
Family Services – care center	Forensic interview – 5%	\$23,082
LSS – B-3	Increase to match CLTS staff rate	Under market for speech and language
Psychiatry and Physician Contracted Services	2%	\$21,100
Wellpath	3%	Estimated based on history
State / County Contracts		
Secure detention	2%	Estimated based on history
Institutes	Assumed 3%	\$90,300

HEALTH AND HUMAN SERVICES

2023 BUDGET POSITION CHANGES

HEALTH AND HUMAN SERVICES POSITIONS (All Divisions)

Financial Summary	2021	2022	2022	2023	Change From 2022	
	Actual	Adopted Budget	Estimate	Budget	Adopted Budget \$	%
Administrative Services (Includes Economic Support Services & ARPA EH Position)						
Regular Positions	116.00	106.00	106.00	109.50	3.50	3.3%
Extra Help	4.37	6.04	6.04	7.41	1.37	22.7%
Overtime	0.85	1.19	1.19	1.21	0.02	1.7%
Total	121.22	113.23	113.23	118.12	4.89	4.3%
Intake Support Services (Note: Allocated to other Divisions in 2022)						
Regular Positions	30.00	-	-	-	0.00	N/A
Extra Help	1.00	-	-	-	0.00	N/A
Overtime	0.22	-	-	-	0.00	N/A
Total	31.22	-	-	-	0.00	N/A
Children and Family Services						
Regular Positions	33.00	58.00	58.00	58.00	0.00	0.0%
Extra Help	-	-	-	-	0.00	N/A
Overtime	-	-	-	-	0.00	N/A
Total	33.00	58.00	58.00	58.00	0.00	0.0%
Adolescent and Family Services						
Regular Positions	40.50	46.00	55.00	55.00	9.00	19.6%
Extra Help	1.15	-	-	-	0.00	N/A
Overtime	0.14	0.66	0.66	0.90	0.24	36.4%
Total	41.79	46.66	46.66	55.90	9.24	19.8%
Clinical Services						
Regular Positions	110.97	113.72	113.72	118.17	4.45	3.9%
Extra Help	10.21	10.28	10.28	5.87	-4.41	-42.9%
Overtime	2.01	2.76	2.76	2.29	-0.47	-17.0%
Total	123.19	126.76	126.76	126.33	-0.43	-0.3%
Criminal Justice Collaborating Council (CJCC)						
Regular Positions	1.00	1.00	1.00	1.00	0.00	0.0%
Extra Help	-	-	-	-	0.00	N/A
Overtime	-	-	-	-	0.00	N/A
Total	1.00	1.00	1.00	1.00	0.00	0.0%
Public Health (Includes ARPA Positions)						
Regular Positions	24.35	24.10	24.10	29.40	5.30	22.0%
Extra Help	22.12	8.54	8.54	4.36	-4.18	-48.9%
Overtime	-	-	-	-	0.00	N/A
Total	46.47	32.64	32.64	33.76	1.12	3.4%
Veterans' Services						
Regular Positions	4.00	5.00	5.00	6.00	1.00	20.0%
Extra Help	0.50	-	-	-	0.00	N/A
Overtime	-	-	-	-	0.00	N/A
Total	4.50	5.00	5.00	6.00	1.00	20.0%
Aging and Disability Resource Center (ADRC)						
Regular Positions	56.14	61.89	61.89	62.89	1.00	1.6%
Extra Help	5.40	4.16	4.16	4.11	-0.05	-1.2%
Overtime	-	-	-	-	0.00	N/A
Total	61.54	66.05	66.05	67.00	0.95	1.4%
Total All H&HS Divisions						
Regular Positions	415.96	415.71	424.71	439.96	24.25	5.8%
Extra Help	44.75	29.02	29.02	21.75	-7.27	-25.1%
Overtime	3.22	4.61	4.61	4.40	-0.21	-4.6%
Total	463.93	449.34	458.34	466.11	16.77	3.7%

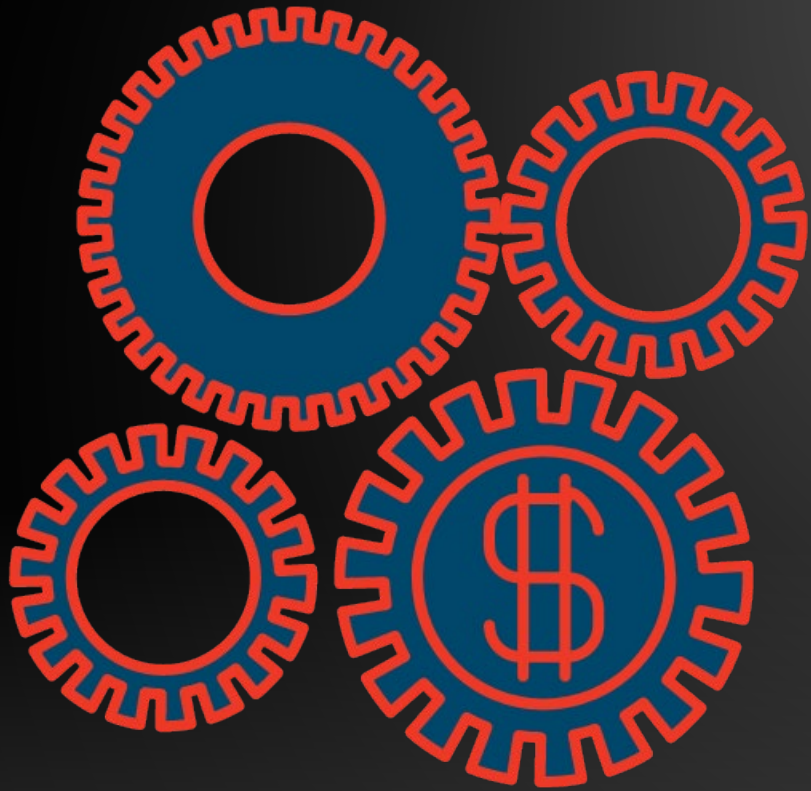
ARPA Projects

Approved in June

	<u>2022</u>	<u>2023</u>
Administration: Digitization of Paper Forms	\$53,289	\$366,000
Clinical: CJCC Pre-Trial Supervision	\$32,000	\$67,000
Mental Health Center Redesign	\$875,000	\$283,000

Approved in July

	<u>2022</u>	<u>2023</u>
Adolescent & Family: Youth Intensive Mental Health Expansion	\$347,500	\$385,900
Child & Family: Child Welfare Infrastructure Community Prevention Grants	\$154,800	\$804,289
Clinical: Crisis Services in Law Enforcement	\$123,000	\$346,499



- **Administration**
- **Program Support**
- **Information Services**
- **Economic Services (ESS)**

WISCONSIN MEDICAID COST REPORTING (WiMCR)

2023 REQUEST- \$3,510,942

(Annual Medicaid Cost Reconciliation Process)

GL Account Code	2017	2018	2019	2020	2021	2022	2023
	Actual Amount	Actual Amount	Actual Amount	Actual Amount	Actual Amount	Budget Amount	Budgeted Amount
Admin	261,180.00	261,180.00	261,180.00	261,180.00	261,180.00	261,180.00	261,180.00
Med Psych/ Outpatient/ Crisis	90,729.88	95,923.95	314,777.47	334,134.95	536,311.00	233,525.00	354,876.00
CCS	1,665,484.57	670,129.63	1,126,096.81	1,549,503.80	1,723,914.00	1,917,609.00	2,057,669.00
CRS		266,770.69	80,950.12	107,328.37	71,450.00	321,193.00	305,874.00
TCM	106,618.04	111,260.17	216,926.08	105,427.76	158,930.00	59,952.00	126,187.00
CSP	554,583.87	241,836.77	638,530.13	423,175.59	474,259.00	422,657.00	405,156.00
Total	2,678,596.36	1,647,101.21	2,204,608.45	2,780,750.47	3,226,043.00	3,216,116.00	3,510,942.00

RECRUITMENT AND RETENTION - ADMIN SERVICES

1.0 Program & Project Analyst -
Provide onboarding, off boarding,
marketing for hiring, interviewing
and other services to assure
successful and efficient
recruitment efforts.

Upgrade 1.0 Public
Communication Specialist to 1.0
Public Communication Coordinator
to assist with social media posting,
recruitment, and other Public
Health communications as
currently assigned. This position
will be transferred to Public Health.

1.0 FTE Senior Fiscal Specialist to
complete credentialling to
effectively on-board staff thus
enabling billing for services
throughout the department.

1.0 Fiscal Assistant upgraded to a
Fiscal Specialist to provide fiscal
management and social security
compliance to rep payee clients.

1.0 LTE Compliance Liaison
abolished to create a 1.0 FTE
Program & Project Analyst as the
workload has remained consistent
and is not limited in term or
duration. Position will assist with
centralizing Quality Assurance
within the Department.

ECONOMIC SUPPORT UNWINDING

- The state continues to plan for the end of the federal state of emergency related to Economic Support.
 - The intent is to provide 14 months of funding beginning when the stay is lifted (potentially August 2022).
 - Funds are proposed to be allocated as part of the general Moraine Lakes allocation.
 - ✓ If based on caseload, Waukesha would receive 40% of the allocation.
 - ✓ If based on staffing, (we are understaffed by 4 workers) we would be eligible for 30% of the allocation.
 - Projected revenues and carryover funding will be used for overtime or extra help, related to the unwinding. This work must be completed by ESS county employees.
 - Carryover funding will be spent on overtime for the unwinding.
 - ✓ This was projected in the 2022 budget but has not occurred yet.
 - ✓ Therefore, budget is consistent, and we expect the unwinding to occur in 2023.
 - ✓ 2022 = \$22,500 (October – December 2022)
 - ✓ 2023 = \$82,500 (January – November 2023)
 - ✓ Total = \$105,000

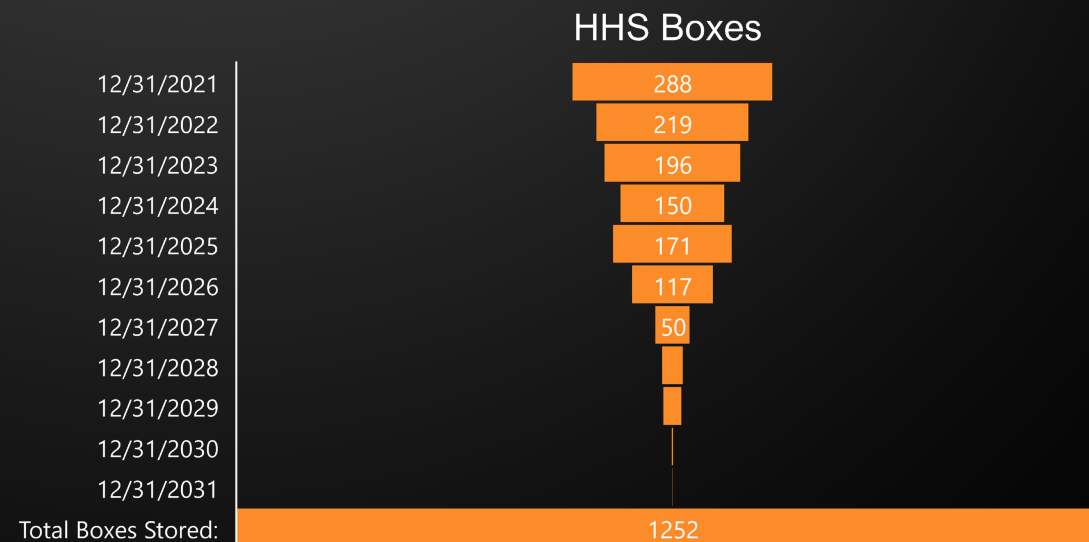
ARPA PROJECT

Digitization of Paper Forms

\$366,000 ARPA funds –
Fund 270/Capital Project

- Utilize contracted vendor to move all programs to an electronic storage environment by building over 400 forms into our electronic systems.
- Purchase batch scanning equipment and develop process to directly scan documents into one of several electronic systems used throughout HHS.

- Direct entry of current paper forms into myAvatar, myInsight and other state systems will provide the following long-term benefits:
 - ✓ Provide timely, simultaneous access by multiple internal staff to a client's record that will improve client safety, enhance quality of patient care, and improve the flow of information.
 - ✓ Provide timely, simultaneous access by administrative and other agency operations to a client's record, increasing staff productivity and efficiencies in work processes throughout the organization.
 - ✓ Ensure higher integrity of the record by improving the timeliness of filing into the record, providing electronic workflow that routes charts for dictation and reports for signatures, and allows charts to be completed remotely.
- Will reduce the amount of paper produced and overall storage needs.



ADMINISTRATIVE SERVICES INCLUDING: IT, ESS, FAMILY CARE PAYMENT TO THE STATE

Fiscal Summary

- Family Care - cost to continue budget.
- Administrative Services budget - cost to continue.
- IT-BAS replace 2 LTE positions to with 2 FTE positions:
 - ✓ Senior IT Professional
 - ✓ Information Technology Technician
- Economic Support recoveries are trending down because of reduced renewal monitoring. This is expected to continue over time.
- Transfer 0.5 FTE from Clinical Services.



VETERANS SERVICES

Veteran Service Commission

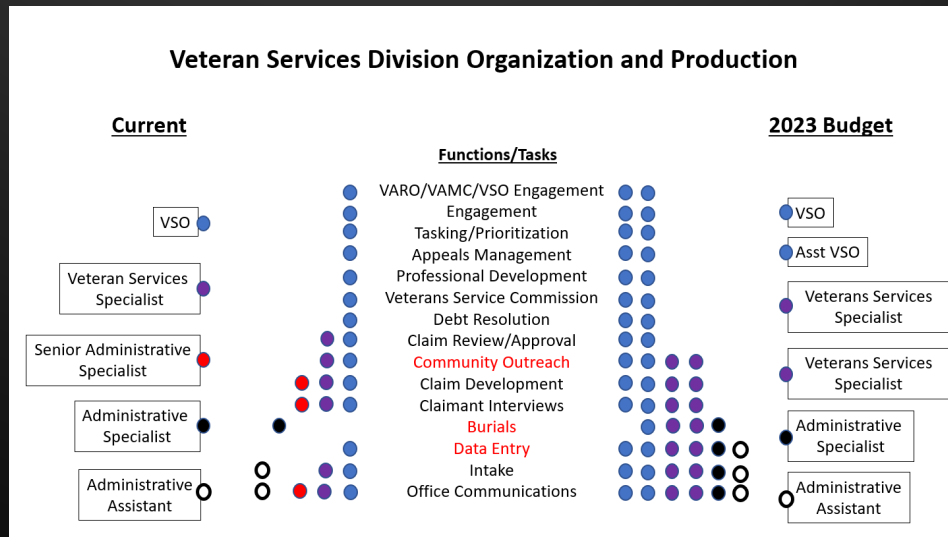
ARPA PROJECT

Veteran's Office Re-organization

\$100,436 ARPA funds in Fund 150

- Maintains 1.0 FTE Administrative Specialist in 2023 to complete the transfer of Veteran burial information from the County's legacy system to the State system.
- This Administrative Specialist position will be abolished at the completion of this project.

- Complexity of this work continues to increase.
- New legislation expanding benefit eligibility for both Vietnam and Gulf War Veterans will significantly increase workload.
- Minimal community outings during the pandemic limited the education and outreach efforts that make Veterans aware of eligible benefits.
- New structure allows for increased outreach to community Veterans, improved coverage and efficiency and better leadership succession planning.
 - ✓ Create 1.0 FTE Assistant Veteran Services Officer position to act as back-up to the County Veteran Services Officer.
 - ✓ Create 1.0 FTE Veteran Benefit Specialist.
 - ❖ These positions are experienced and trained to assist with technical Federal and State benefit applications and appeals.
 - ✓ Abolish 1.0 FTE Senior Administrative Specialist.



Our County Veterans Service Office delivers benefits to county Veterans in excess of \$177,000,000 annually.

AGING AND DISABILITY RESOURCE CENTER



TAX LEVY- ADRC

10 Year Look Back

	2014 Actual	2015 Actual	2016 Actual	2017 Actual	2018 Actual	2019 Actual	2020 Actual	2021 Actual	2022 Budget	2022 Estimate	2023 Budget
Adult Protective Services (APS)	\$1,726,786	\$1,505,998	\$1,303,497	\$923,239	\$898,437	\$820,275	\$617,794	\$790,662	\$854,091	\$797,340	\$941,600
Senior Dining	\$69	\$35,949	\$16,069	\$3,947	\$5	\$8,761	\$377	\$126	\$0	\$0	\$0
Home Delivered Meals	\$192,457	\$263,446	\$328,044	\$313,454	\$305,698	\$296,189	\$5,838	\$6,390	\$333,275	\$0	\$102,208
Total All Division	\$2,523,376	\$2,365,098	\$2,193,768	\$1,880,113	\$1,820,989	\$1,699,795	\$1,241,467	\$1,498,152	\$2,024,088	\$1,715,175	\$1,902,612

Overall, tax levy reductions have been created by:

- Reductions in expenses for Adult Protective Services (APS) placements.
- Moving information and assistance to the ADRC contract.

Tax levy has increased yearly since 2020.

\$300,000 was reallocated from Home Delivered Meals for 2023 due to available ARPA funds. This will need to be reallocated when ADRC ARPA funds end.

As with previous years, the Department strives not to have a waiting list for Home Delivered Meals. This will also need to be re-evaluated once ADRC ARPA funds end.

IMPACT OF COVID-19 ON ADRC



- American Rescue Plan Act (ARPA) dollars will be allocated in 2022 and 2023 to support the Older Americans Act Programming. This aligns with Needs Assessment request “Creating flexible funding for CHIP initiatives, child welfare initiatives and develop program supports through Older Americans Act funding”.
- Waukesha County originally budgeted half of the funding in 2022 and the other half in 2023 except for the meals program.
- Due to staffing and caregiver shortages, as well as additional funding being provided, the amounts projected and utilized have changed to support current programming.

Program Type	Initial Projected 2-Year Totals	Actual 2-Year Totals	2022 Budgeted	2022 Projected	2023 Budgeted	Use
Community Service	304,124	390,422	152,062	140,702	199,784	Offset provider hours/visit increase and short-term rate incentives for bathing and personal care. Provide additional services: Art and Music Therapy and Physical Therapy for safety evaluations. Explore “Community Health Worker“ program with a partner agency.
Health Promotion	15,300	27,596	7,650	13,798	5,722	Expansion of onsite and virtual evidence-based and community health education programs.
Caregiver Support	161,532	142,388	80,766	71,194	40,383	Offset provider hours/visit increase and short-term incentives; Caregiver Conference; explore caregiver program enhancement through a peer-to-peer program.
Congregate Meals	472,912	166,968	118,228	22,023	105,547	Restaurant choice pilot plus rebuilding sites.
Home Delivered Meals	261,948	435,602	130,974	90,196	384,804	Additional meals for high-risk consumers; reduction in tax levy in Home Delivered Meals program.

IMPACT OF COVID

CONGREGATE MEALS

2020

- 10 Congregate Centers closed in March 2020 due to COVID.
- Eligibility waived by DHS to allow anyone 60 and above to receive Home Delivered Meals.

2021

- Congregate Centers remained closed until 11/15/2021 when 4 centers reopened.

2022

- Budget estimate as of July 2022 is based on 5 open Congregate Centers.
- Staffing issues have not allowed more centers to reopen; diners have not returned as originally planned.
- Planning for at least one congregare location in a local restaurant.

2023

- Plan for additional diners to return to congregare with 6 dining centers open and at least 2 restaurant dining opportunities.
- DHS continues to allow waiver of eligibility for individuals 60 and above to receive Home Delivered Meals.

Program Activity Meal Services	2019 Actual	2020 Actual	2021 Actual	2022 Budget	2022 Estimate	2023 Budget
Home Delivered Meals						
Meals Served	126,001	167,146	125,305	142,468	130,848	132,856
Program Participants	1,106	1,130	1,086	1,160	1,131	1,160
Congregate/Senior Dining Meals						
Meals Served	39,928	9,360	2,260	41,058	21,886	32,025
Program Participants	1,429	695	289	1,200	825	1,100

ARPA PROJECT

Unite Us

\$35,000 ARPA funds in Fund 270

- Provides funds for HHS start up costs including 10 licenses for 3 years. This software will help:
 - ✓ Address social determinates of health at the county level by creating an interconnected network of health and social service providers.
 - ✓ Predict an individual's level of overall social need.
 - ✓ Efficiently enroll individuals in targeted social care services.
- HHS participation allows community partners to participate for free.

- Aligns with Needs Assessment recommendation to “support Unite Us and Epic, use technology to connect people to services and collect data to address social determinants of health.”
- Aligns stakeholders from healthcare, government, and the community around a shared goal to improve health.
- All County healthcare systems have identified implementation of Unite Us as a 2023 priority.
- Identifies and predicts social care needs in communities.
- Connects individuals to services and allows for greater collaboration and coordination of care.
- Leverages meaningful outcome data and analytics to further drive community investment.



Transportation:

IDENTIFIED IN NEEDS ASSESSMENT WITH A REQUEST TO CREATE AN EXPANDED MODEL THAT ADDRESS GAPS IN SERVICE AND ACCESSIBILITY.

Ranges are based on consumer's ability to pay.

Accessible Van Service Passenger Fares 2022			
Range	Intra-Community	Inter-Community	Out of County
A	\$3.85	\$4.90	\$7.50
B	\$4.90	\$6.45	\$10.35
C	\$5.95	\$8.00	\$13.20
D	\$7.50	\$10.10	\$16.60
E	\$8.55	\$11.15	\$17.90

2023 Budget			
Range	Intra-Community	Inter-Community	Out of County
A	\$4.75	\$6.00	\$9.20
B	\$6.00	\$7.95	\$12.75
C	\$7.35	\$9.80	\$16.20
D	\$9.20	\$12.40	\$20.40
E	\$10.55	\$13.75	\$22.00



Fares have been adjusted to better align the cost to the consumer for the accessible van service and the share fare taxi service.

- Shared fare taxi: Waukesha County provides a \$5.25 subsidy for a typical ride costing \$10.00-\$11.00.
 - ✓ The consumer then pays a minimum of \$4.75-\$5.75.
- Accessible van: Minimum payment of \$4.75 now matches minimum payment for taxi service.

AGING AND DISABILITY RESOURCE CENTER

(Adult Protective Services, Community Services and Contract Fund)

FISCAL SUMMARY

- Adult Protective Services (APS) - cost to continue budget.
- Contract Fund - Cost to continue budget. (Expenditures are budgeted only up to the available funding levels).
- Volunteer mileage for Home Delivered Meals is up \$32,347 due to longer routes and increased cost of gas causing more drivers to request reimbursement.
- Contracted WATTS court ordered assessment reviews have been reduced by \$41,500 and are now completed by ADRC staff.
- Funding for friendly visitors and peer-to-peer supports as noted in the 2022 Needs Assessment continues as previously funded.

REGULAR POSITIONS, EXTRA HELP

- 1.0 FTE HHS Coordinator – oversight of Aging Services, Nutrition, Transportation and Adult Protective Services (APS).
- 1.0 FTE Senior ADRC Specialist replaces a 1.0 FTE Human Services Support Specialist and a 0.25 LTE Social Worker.



Public Health
Prevent. Promote. Protect.

Waukesha County Public Health

PUBLIC HEALTH

CONTINUED SUPPORT OF PUBLIC HEALTH 3.0 PUBLIC HEALTH TRANSITION

2022 CREATED PH STRATEGY SECTION

- Public Health Strategy Supervisor
- Public Health Educator
- Epidemiologist
- Public Communication Specialist
- Abolished 1.0 FTE Nurse
- Unfunded 1.0 FTE Nurse



2023 INTEGRATION OF OTHER DISCIPLINES INTO PUBLIC HEALTH

- Nursing market continues to be a challenge for recruitment. 2022 Needs Assessment identified this as a community need.
- Transition 3 Public Health Nurses to Community Health Educators (Disease Investigators).
- Disease Investigator model has been used in Waukesha County since 2020.
- Multi-disciplinary model, including Disease Investigators, has proven effective in other Public Health practices.

PUBLIC HEALTH EMPLOYEE TYPE AND STRUCTURE

	2019	2020	2021	2022	2023
Public Health Officer / Manager	1	1	1	1	1
Health & Human Services Coordinator	1	1	1	1	1
Health & Human Services Preparedness Coordinator	1	1	1	1	1
Administrative Specialist	5	5	5		
Administrative Assistant	1	1			
Public Health Supervisor	2	2	2	3	3
Public Health Nurse	15	15	15	13	10
Public Health Technician	1	1	1		
WIC Program Supervisor	1	1	1	1	1
WIC Program Nutritionist	2	2	2	2	2
Registered Dietetic Technician	1	1	1	1	1
Community Health Educator		1	1	2	6
Support Staff Supervisor			1		
Epidemiologist				1	1
Public Communication Coordinator					1
Program & Project Analyst (CHIP) (ARPA)					1

ARPA PROJECT

Community Health Improvement Plan and Process (CHIPP) – Community Initiatives

\$115,426 ARPA funding in Fund 270

- 1.0 FTE Programs and Projects Analyst to develop and oversee an award process for community grants to support CHIPP initiatives. This position will sunset in mid-2024.
- Every 5 years, Public Health is required to complete a Community Health Assessment which is being done in 2022.
- Waukesha County will identify the top community health issues and develop a community health improvement plan for how to address them in 2023.
- Awards will be given in 2024 to community agencies that propose programs having a direct impact on improving these health priorities.

- Aligns with Needs Assessment request to “support projects that move the CHIPP initiatives forward” and creating flexible funding for CHIP initiatives.
- Funding will enhance the impact that CHIPP has on improving health in Waukesha County.
- This will benefit both the community and the agencies that work in these areas by funding innovative initiatives that would otherwise not be possible.
- With a focus on the impact and recovery from COVID-19, these funds would help move Waukesha County forward.



PUBLIC HEALTH

Fiscal Summary

- The lead testing program has been moved under the WIC Program.
 - ✓ Higher Reimbursement for lead testing in WIC Program.
- Reductions in revenues from reduced clinic times and home visits. \$16,400.
- In order to allow Public Health staff to focus on high-risk health needs only, we are modifying our Maternal Child Health Program to increase utilization of community partner, Safe Babies Healthy Families, who provides necessary social/emotional supports.
- Epidemiologist, Community Health Educator and Public Communications Coordinator, which were funded by ARPA in 2022, have been moved into the Public Health budget.
 - ✓ Grant funding utilized to cover the costs of these positions for 2023.
 - ✓ Retirements projected for late 2023/2024 will create 3 positions to be available for elimination in 2024.

PUBLIC HEALTH COVID FUNDING

2021-2022	Total Grant	Projected Use 21-22	2023	Budgeted Amount
Immunization: Vaccination Supplement #4 <ul style="list-style-type: none"> Immunization Coordinator Medical Director PIO Coordinator Fridge / Freezer and other supplies Health Fair with Hispanic collaboration Messaging 	\$530,700	\$88,713	<ul style="list-style-type: none"> Messaging / promotional supplies Medical Supplies Medical Director Immunization Coordinator PIO Coordinator Health Fair 	\$99,040
2021-2022	Total Grant	Projected Use 21-22	2023	Budgeted Amount
PHEP Workforce Supplement <ul style="list-style-type: none"> Fit test machine Software - Performance Management and Training platforms Organizational Effectiveness Training and strategic planning Conferences, trainings and educational materials LTE staff for preparedness plans and system change 	\$435,600	\$106,657	As funds are available <ul style="list-style-type: none"> Organizational Effectiveness Training and strategic planning Conferences, trainings and educational materials Software - Performance Management and Training platforms LTE staff for preparedness plans and system change Level 1 Disease Management Team 	\$158,750
2021-2022	Total Grant	Projected Use 21-22	2023	Budgeted Amount
Public Health - ARPA <ul style="list-style-type: none"> Contact Tracing Team (decrease from 153 staff in January 2021 to a current staff level of 10). 	\$2,580,600	\$2,171,839	<ul style="list-style-type: none"> Level 1 Disease Management Team Educational Supplies Organizational Effectiveness Training Software Licenses PIO Coordinator Preparedness Planner 	\$408,761

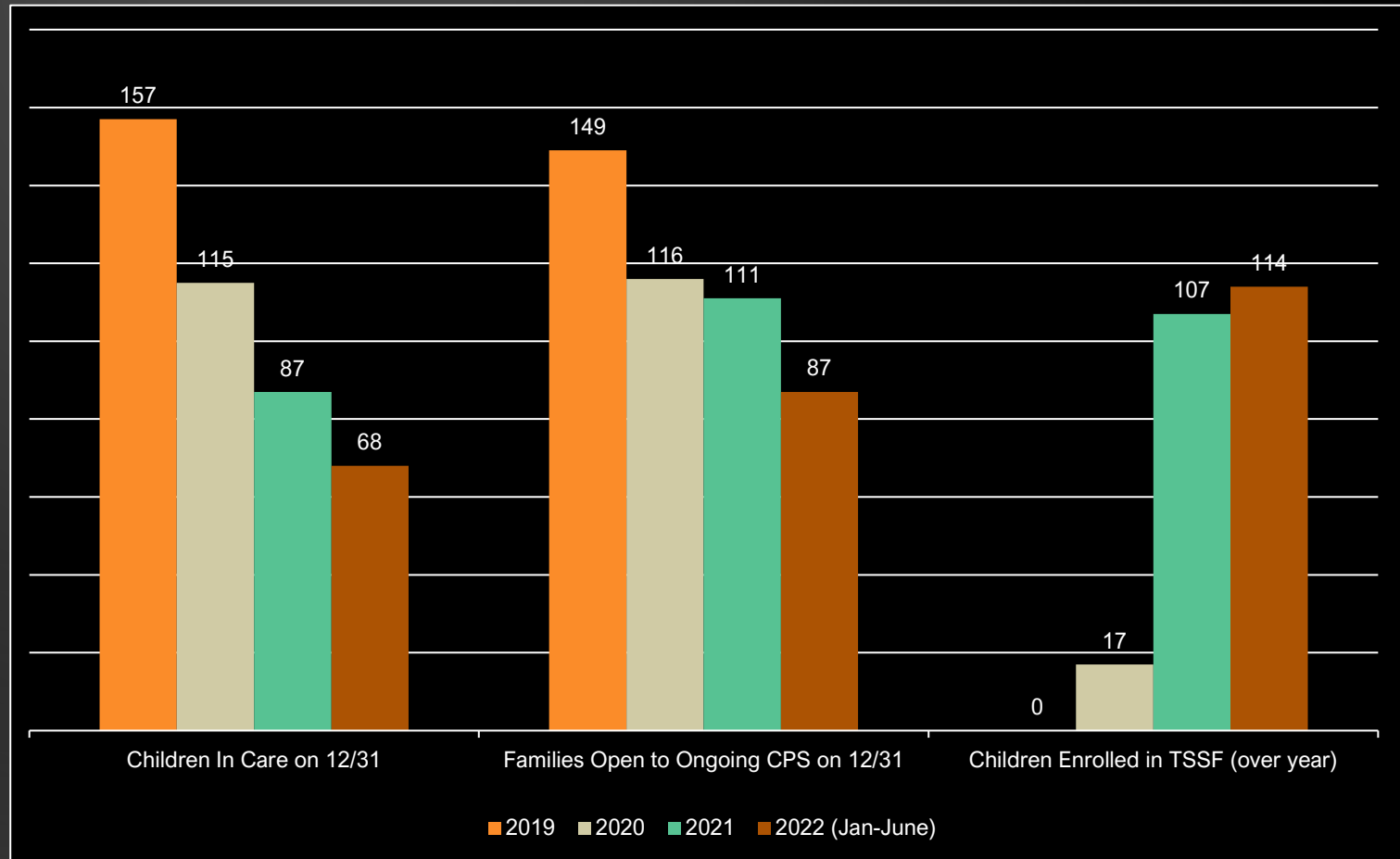


CHILDREN & FAMILY SERVICES

Children and Family Services

Decreased Out of Home Care Costs - \$135,415

- Targeted Safety Services Funds (TSSF).
 - ✓ On July 15, HHS was notified that additional funds will be added to the TSSF contract for 2023 for additional services and structural change.
- Increase in relative engagement and placement.
 - ✓ 45% of our children have been placed in the home of a relative caregiver over the past 2 years.
- Cross-divisional collaboration to better meet critical needs of complex youth and their families to prevent entry into Child Welfare.
- Leverage Comprehensive Community Support (CCS)/Children's Long-Term Support (CLTS) to support eligible children.



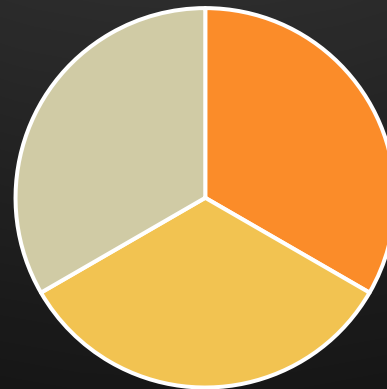
ARPA PROJECT

Building Child Welfare Infrastructure

\$804,289 ARPA funds in Fund 270

- One-time community awards to increase Family First prevention and early intervention evidence-based programs.
- One-time recruitment and start-up costs to expand local out of home care resources for youth with complex needs. This will replace the need for distant and out of state resource utilization.
- Develop a continuous quality improvement process through the implementation of a national systems review model.
- 1.0 LTE Programs and Projects Analyst and 1.0 FTE Social Worker positions will sunset at the completion of the grant distribution and quality improvement, development and training projects.

- Aligns with Needs Assessment recommendations to “create opportunities for programming that meets Family First qualifications and standards”.
- Increase community evidence-based services to reduce need for HHS involvement in low and medium risk families.
- Improve safety and stability in high-risk families and incorporate systemic improvement opportunities.
- Implementation of the System Review Model will be used by ongoing staff for continuous quality improvement.
- Keep youth with complex needs in our community, closer to their families and support systems improving the timelines for reunification.



■ Implementation ■ Continuation ■ Expansion

DCF Endorsed Evidence Based Programs

- Triple P (Expansion)
- Healthy Families America (Continuation)
- Intercept (Implementation)

CHILDREN WITH SPECIAL NEEDS UNIT (INCLUDING BIRTH TO THREE) CLTS

The state has provided sum sufficient funding for all CLTS waiver youth with the expectation that the waitlist will be abolished by April 2021.

Waukesha County continues to have 200 children on the CLTS waitlist.
(August 2022)

There are an average of 40 new referrals per month up from an average of 10 to 12 prior to waitlist elimination.

The Department has been able to recruit an additional Children's Long-Term Support (CLTS) waiver service coordination provider.

This vendor began to take new referrals in June 2022.

The Department has redesigned its service delivery to see more children by utilizing newly contracted case aides to perform administrative functions.

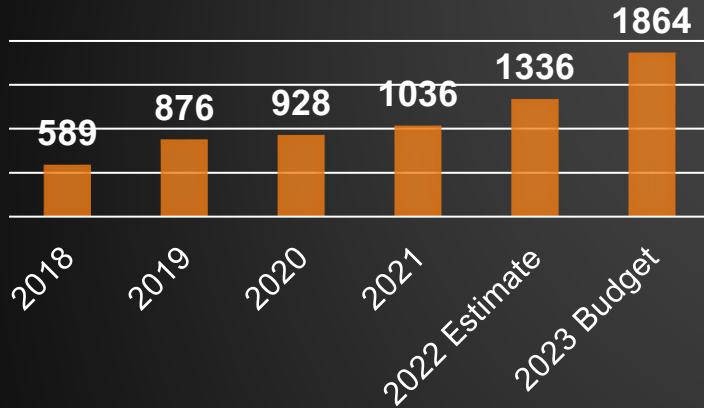
The program is an entitlement that will grow each year.

This program operates without tax levy as costs are covered by indirect and service coordination revenue from the state.

The Department has made significant adjustments to its rate to assure fiscal viability and will update the rate quarterly or as needed.

CLTS Program Growth

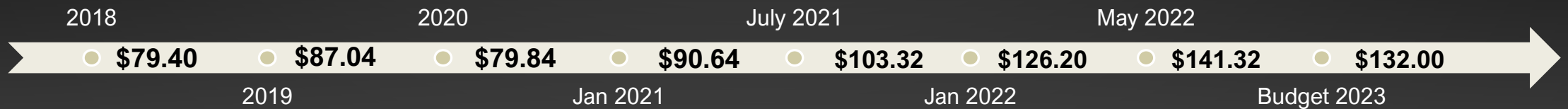
CLTS YOUTH SERVED ANNUALLY



- ✓ 216% increase in number of youth served from 2018 to 2023 projected
- ✓ Continuously reassessing service coordination rate which is impacted by staffing capacity and vacancies.
- ✓ Indirect revenue based on 7% spending of total allocation.

	2017 Final	2018 Final	2019 Final	2020 Final	2021 Final	2022 Estimate	2023 Budget
Service Coordination Revenue	\$755,615	\$1,294,121	\$1,962,252	\$1,704,218	\$2,140,476	\$3,928,333	\$5,759,171
Indirect Revenue	\$328,894	\$288,630	\$550,021	\$432,900	\$1,072,885	\$746,896	\$981,664
Program Expense	\$939,342	\$1,643,614	\$1,796,975	\$2,107,848	\$2,649,262	\$3,016,386	\$5,489,268

Service Coordination Rate Adjustments



CHILDREN AND FAMILY SERVICES

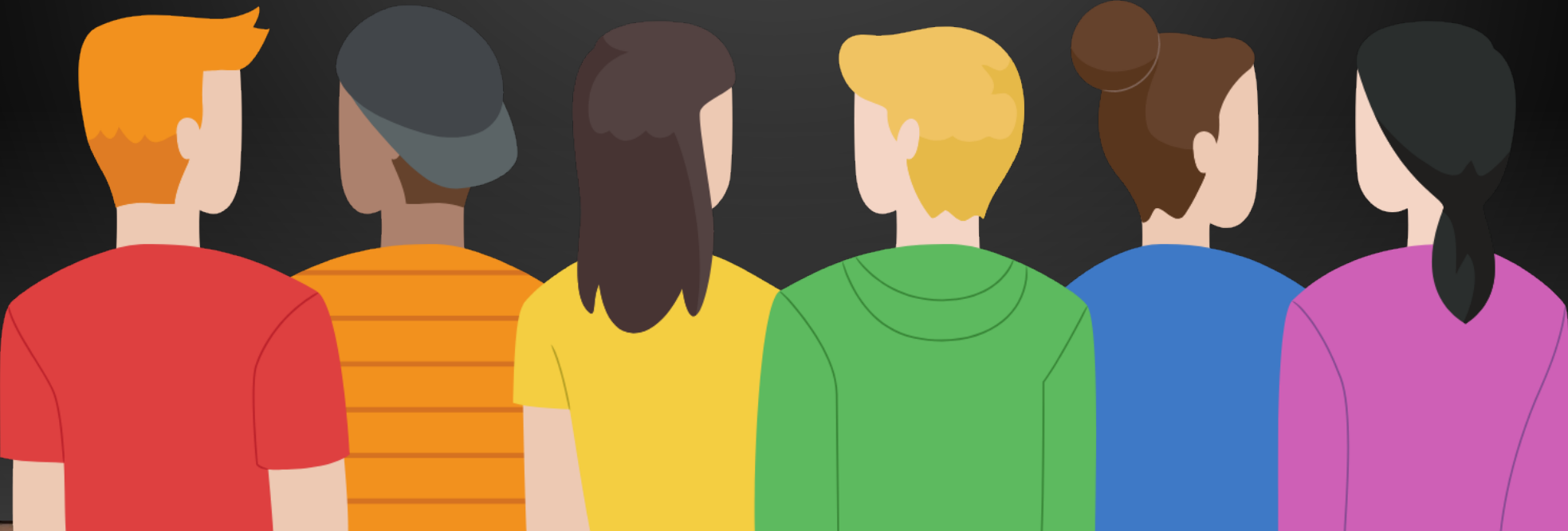
FISCAL SUMMARY

- Out of Home Care costs have decreased \$135,415.
- Elimination of \$154,966 in contracted services due to limited utilization.
- State now funds Subsidized Guardianship for approximately \$200,000 in savings.
- 2% increase of LSS contract for Birth to Three services. This is offset by an increase of \$11,700 in state revenue.
- Increase of \$99,000 of kinship benefits allocation.
- Otherwise, this is a cost to continue budget.

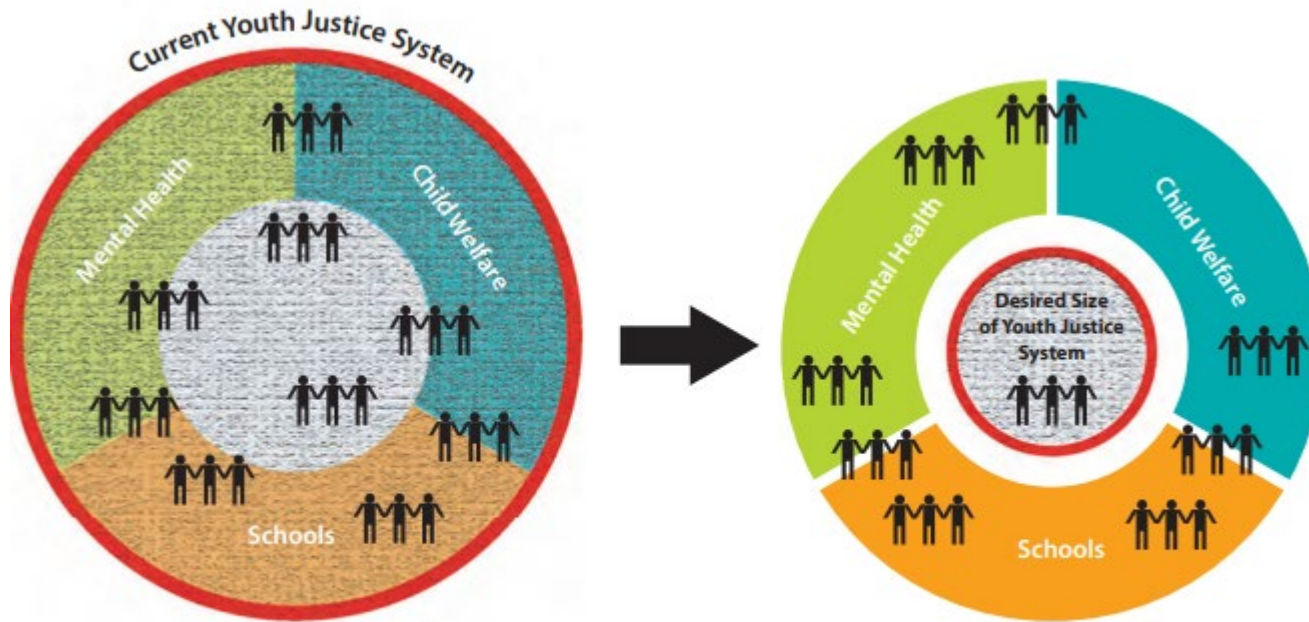
REGULAR POSITIONS, EXTRA HELP

- Abolish 1.0 Human Services Specialist.
- Create 1.0 Human Services Supervisor for the Children's Long Term Support Program (CLTS).
 - ✓ Duties include managing contracts, quality assurance, and supervising Children's Intake.

ADOLESCENT & FAMILY SERVICES



YOUTH JUSTICE REFORM



The youth justice system encompasses youth with a variety of primary needs other than delinquent behavior.

Youth are served in the appropriate system, and are not brought into the youth justice system in order to address other primary needs.

2021

- Transitioned 5 youth justice workers to create CCS.

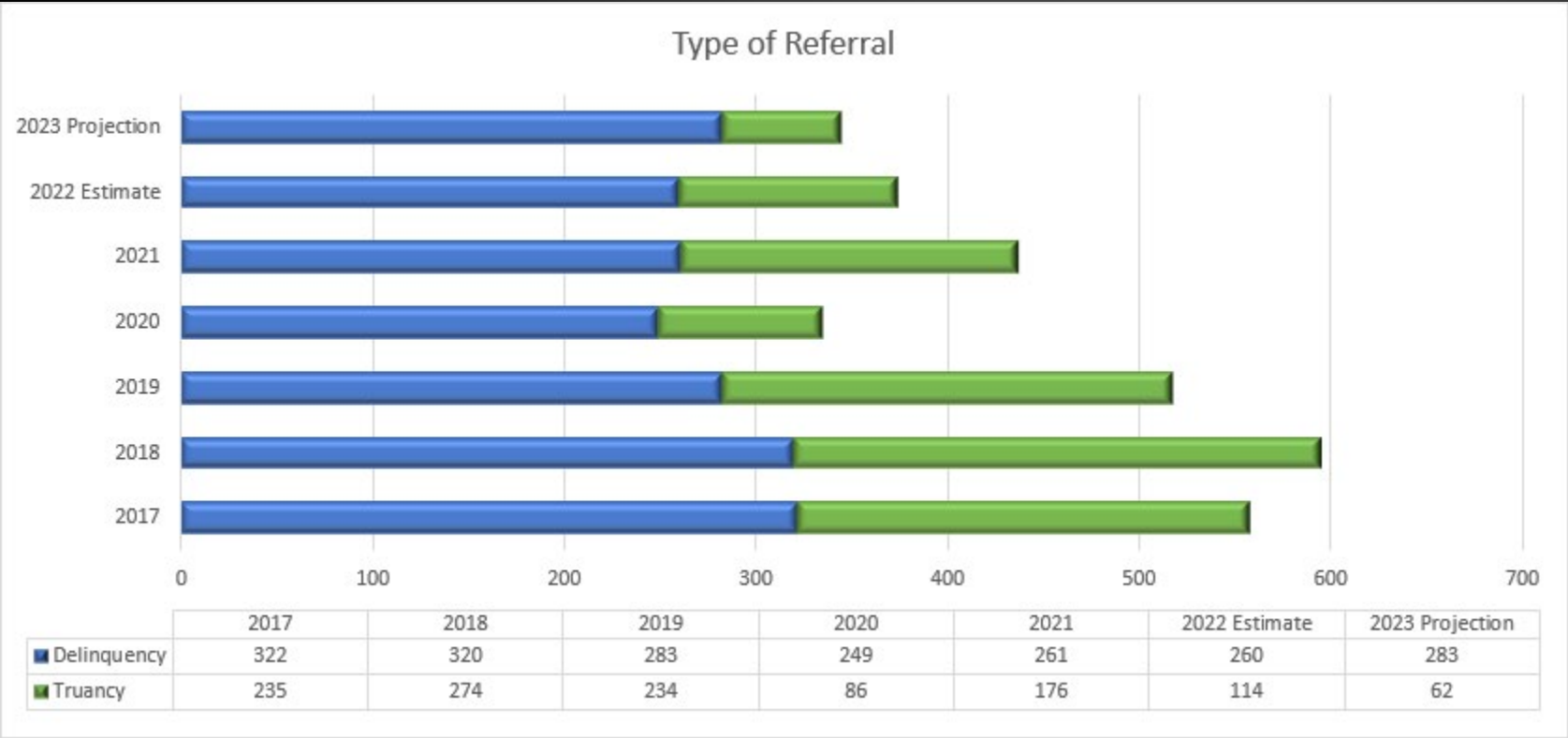
2022

- Refined truancy criteria.
- Offer appropriate system of care based on need of youth.

2023

- Transforming youth justice practice to support mental health needs of youth to address underlying factors that contribute to truancy and delinquency.

YOUTH JUSTICE REFORM



- More than half of Waukesha County Youth Justice referrals are for truancy.
- This is in direct opposition to the state philosophy that suggests that youth are not served within the Youth Justice Program unless they are a threat to the community.
- 2022-2023 working with schools and community partners to build alternative truancy response programs outside of youth justice services.

2022 data is based on YTD information that is available.

ARPA PROJECT

Expansion of Youth Comprehensive Community Services Programming

\$385,900 ARPA funds in Fund 150

- Funds will help cover expenses in 2023 that will be reimbursed in 2024 through WiMCR.
- Initial start-up costs ordained in 2022 for 10 staff, training, supplies and inter-departmental expenses.
- Cost of positions and contracted services mostly covered by Medicaid and WiMCR once fully established.

- Expansion of another Youth CCS unit doubles the number of youth that can be served in this program in 2023.
- Provides intensive community-based treatment for youth experiencing mental health or substance use issues which has been identified as a need in the 2022 Needs Assessment.
- 95% reimbursable program through state Medicaid.
- WiMCR reimbursement is always a year delayed.

	Youth Served	Medicaid Payment
2020 Actual	42	\$265,601
2021 Actual	42	\$532,940
2022 YTD Actual	45	\$188,940
2022 Projected	75	\$795,110
2023 Estimate	150	\$1,746,632

- Projecting an additional \$300,000 in WiMCR due to expansion of youth programming.

JUVENILE DETENTION / SHELTER CARE

DAYS OF CARE

	2020 Actual Days of Care	2020 Cost	2021 Actual Days of Care	2021 Cost	2022 Projected Days of Care	Estimate 2022 Cost	2023 Projected Days of Care	2023 Projection
Male Secure Detention	436	\$839,289*	302	\$797,310*	867	\$135,161	850	\$135,162
Female Secure Detention	82	\$10,800	24	\$3,150	160	\$7,080	164	\$10,000
Male Shelter Care	1114	\$1,003,818	589	\$1,058,059	1472	\$1,091,695	1126	\$1,115,028
Female Shelter Care	802		427		706		662	
Total	1916	\$1,853,907	1016	\$1,769,195	2178	\$1,233,936	1788	\$1,260,190

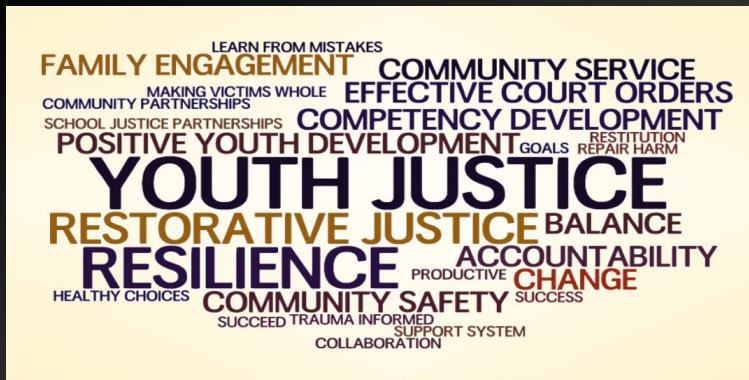
* Waukesha County Secure Detention closed on 10/01/2021. Costs for male secure prior to closure include personnel, operating expenses and inter-department of running the facility.

State-wide Changes in Secure Detention

- One additional county closed their secure detention in 2022.
- One county has reduced capacity due to staffing shortages.
- Lincoln Hills no longer takes secure detention referrals thus those youth are now utilizing local beds.
- Bed capacity remains tight throughout the state.

Juvenile Correctional Institute Costs

	5 Years								
	2017 Actual	2018 Actual	2019 Actual	2020 Actual	2021 Actual	5-Year Average	2022 Budget	2022 Estimate	2023 Budget
Juvenile Corrections Placement Costs	\$41,332	\$143,638	\$130,004	\$145,226	\$0	\$92,040	\$212,212	\$56,340	\$430,000
Days in Corrections	110	365	348	281	0	221	182	90	365
Avg. Cost Per Day	\$376	\$394	\$374	\$517	\$0	\$332	\$1,166	\$626	\$1,178



- 2023 budget is for one youth to be placed all year.
- The Department annually budgets for one youth placed for half of a year if no youth is identified as being anticipated to be in corrections.
- Fund balance has been requested to offset the cost of one out of county youth for a half of a year based on current court caseload projections.

ADOLESCENT AND FAMILY SERVICES

FISCAL SUMMARY

- Cost to continue budget outside of CCS.
- Reduced tax levy for intensive in-home provider by \$50,000.
- Increased vendor network allowing for additional Medicaid reimbursement.
- Out of Home Care costs reduced by \$84,900.
- Eliminate Fee Panel (Hardship cases).
 - ✓ This counsel was charged with evaluating if family's fee should be waived.
 - ✓ Fees will now be evaluated through the administration division based on Department overarching Ability to Pay policy.

REGULAR POSITIONS, EXTRA HELP

- Abolish 1.0 FTE Human Services Supervisor.
- Create 1.0 FTE Human Services Coordinator to:
 - ✓ Oversee Youth Justice Program.
 - ✓ Oversee Youth Justice Supervisors.
 - ✓ Assist Manager in Transforming Youth Justice practice to support the mental health needs of youth.
- Change 5.0 FTE Social Worker to 5.0 FTE Senior Mental Health Counselor in CCS Program.
 - ✓ Same pay range.
 - ✓ Expands flexibility for hiring a wider variety of professionals.
- Add 0.24 FTE afterhours overtime due to utilization.



CLINICAL SERVICES

UTILIZATION OF STATE INSTITUTES

Increase in State Institute Costs – \$870,135 Net Youth and Adult

- New private hospitals opened in 2021 in Milwaukee/Madison
- HHS contracted with Granite Hills-Milwaukee
- Start-up at hospitals has been slower than expected due to staff shortages
- Have not realized the benefit from:
 - ✓ Local control and input
 - ✓ Improved utilization review
 - ✓ Access to different facilities serving youth
- Cost for usage in 2022 has exceeded expectations

Management Efforts and the Mental Health Center

- Stabilizing staffing levels through multiple recruitment/retention strategies
 - ✓ Staffing shortages impact diversions
- Meeting with hospitals to develop strategies to reduce medical clearance requirements / timelines
- Increasing number of contracts with other counties
- Increasing payer sources including Medicaid for patients aged 21-64

Days of Care	Actual 2018	Actual 2019	Actual 2020	Actual 2021	Budget 2022	Estimate 2022	Budget 2023
Adult	1,947	1,732	1,056	1,735	1,415	1,985	1,700
Child	202	220	482	641	475	751	600

CLINICAL DIVISION

CONTRACTED PSYCHOSOCIAL REHAB HOUSING & ASSISTANCE

Residential Care

Total Cost: \$5,648,578

Grants/Other: \$214,889

Resident Contribution: \$458,954

Tax Levy: \$4,974,735

Residential Services (excluding recovery housing) reduced by \$377,933

- Reduce high-cost placements:
 - ✓ Routine staffing of high-cost placements
 - ✓ Evaluate appropriate level of care of each individual consumer
 - ✓ Move to less restrictive / independent settings, as appropriate
 - ✓ Assess for other payment sources (i.e. Family Care)
- State currently paying room and board costs for substance use placements

Level of Care	2020 Actual	2021 Actual	2022 Budget	2022 Projected	2023 Budget
Group Home & Supported Apts.	\$5,389,319	\$5,169,806	\$5,483,390	\$5,162,116	\$5,142,595
Housing Assistance	\$51,363	\$86,256	\$76,723	\$76,723	\$46,918
SU Residential Placements	\$732,706	\$207,078	\$395,293	\$313,461	\$342,960
Recovery Housing	\$0	\$6,740	\$316,105	\$116,105	\$116,105

CLINICAL DIVISION REVENUE OPTIMIZATION

Staffing Updates

- Filled open provider/clinician positions
- Will result in increased billing

Community Support Program (CSP)

- Converting from minutes to unit-based billing
- Anticipated increase of \$60,000 in annual Medicaid revenue

Credentialing

- Streamlining process to optimize billing
- Anticipated reduction in nonbillable / denied claims

Productivity Reports

- Monthly reports on provider / clinician billable visits
- Enables goal setting / employee management

ARPA PROJECT

CJCC Pre-trial Supervision

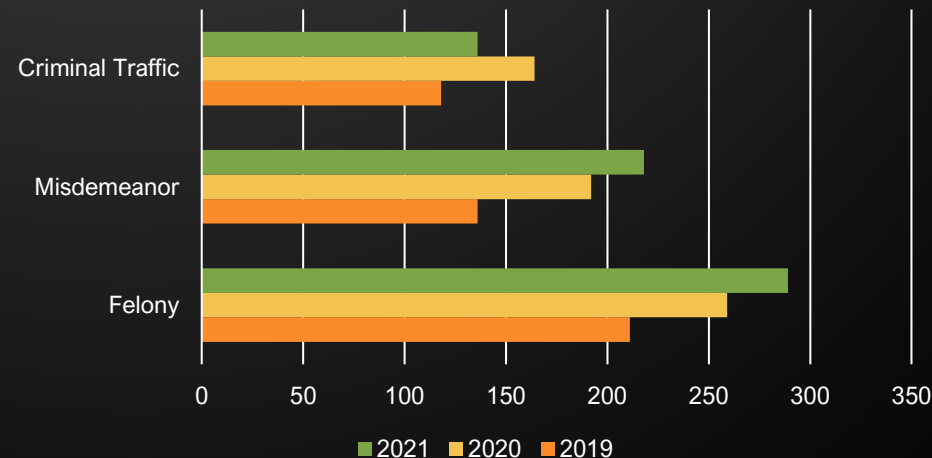
\$67,000 ARPA funds, in Fund 270

- Address backlog of cases caused by the pandemic that led to more defendants being ordered to pretrial supervision for extended periods of time.
- Add 1 FTE Contracted Case Manager to be sunsetted with the completion of the court backlog project.

- Processing delays, an increase in arrests, coupled with an increase in defendants referred for supervision, caused pretrial caseloads to burgeon and the program quickly exceeded its capacity.
- 6th Judge added to Criminal/Traffic Division will help process cases faster.
- Additional Contracted Case Manager to oversee approximately 60 additional defendants.

Total Cases Referred to DA's Office			
	2019	2020	2021
Cases	8,801	9,768	10,115

Number of Days to Case Disposition

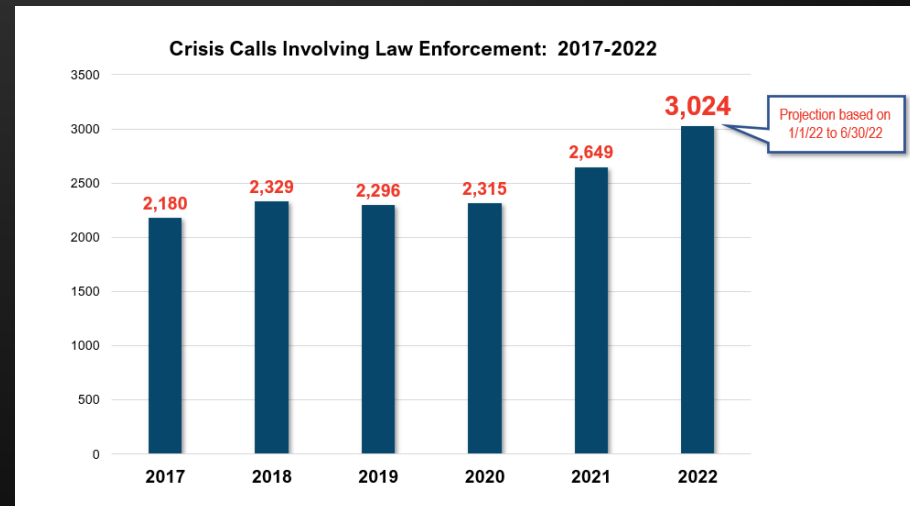


ARPA PROJECT Embedded Crisis Clinicians with Law Enforcement

\$346,499 ARPA funds in Fund 270.

- 1.0 FTE in Sheriff's Department.
- 1.0 FTE in the City of Waukesha Police Department.
- 1.0 FTE in the Waukesha County Dispatch.
- Similar to fund balance built into the 2022 budget for the expansion of Youth CCS ARPA funding will:
 - ✓ Cover uncovered costs during the first year.
 - ✓ Support start up and program development in new settings.
 - ✓ Be replaced by Medicaid, WiMCR, or Opioid Settlement Funds.
 - ✓ No tax levy is projected to be needed in the long term.
- The Department will evaluate staffing needs with redistribution of workload.

- Aligns with Needs Assessment request to “Expand targeted mental health and substance use services”.
- The majority of calls for service that require the assistance of Crisis come from the City of Waukesha Police Department or our Sheriff's Department.
- The goals for this project include reduce crisis response time, decrease the amount of time law enforcement spends on mental health calls and to provide a timelier service to those experiencing a mental health emergency.
- 77% of law enforcement-related crisis calls include a jurisdiction that is managed by Waukesha County Communications.
- By embedding a clinician at the Com Center, we will be able to meet the needs of the person experiencing a crisis at the point of contact and deploy sooner to the scene, if needed. Potentially eliminating the need for law enforcement to respond.
- Telehealth has already been going on in New Berlin, Oconomowoc and with the City of Waukesha Police Department. This funding allows for expansion.



OPIOID SETTLEMENT FUNDING REQUESTS



- Medication Assisted Treatment (MAT) in the jail: \$225,000
- CJCC – Jail Pre-Trial Diversion: \$187,889
- Supplement to cover operating expenses of Outpatient Services not paid through insurance or grants: \$80,000
- One – 90-day placement for youth at Anchorage: \$116,894

Potential Future Use of Funding

- Future funding for embedded crisis clinicians.
- Naloxone grant replacement 2026.
 - ✓ Note: Naloxone (overdose reversal drug) grant is expiring and may need backfilling in the future.
- Ongoing support of Overdose Fatality Review

OPIOID SETTLEMENT REQUEST

CJCC- PRETRIAL DIVERSION

Request for \$187,889

- Funding provides for:
 - ✓ FTE Diversion Coordinator in the DA's Office
 - ✓ FTE Diversion Case Manager (contracted)
 - ✓ Drug Testing Expenses
 - ✓ Client Transportation
- Program targets low to moderate risk defendants, primarily with opioid use disorders, and offers either pre-charge diversion or post-charge deferred prosecution agreements (DPAs) to individuals who successfully complete 6 to 12 months of monitoring and designated contract conditions.

- Program was Treatment, Alternatives and Diversion (TAD) funded from 10/18 – 2/22.
- Applied for TAD funding in September 2021- not funded (more requests for funding than were available in 2021/22)
- Waukesha County funded with one-time funds for 2022.
 - ✓ Provided time to determine the future of the program.
 - ✓ Seeking opioid settlement dollars to continue the programming once available.
 - ✓ Eligible to reapply in September 2022. – funding will be uncertain.
- Program Outcomes:
 - ✓ Total Clients Served/Contracts Entered = 138
 - ❖ Pre-Charge Diversion = 4; Post-Charge DPA = 134
 - ✓ Current Caseload = 24

Successful Completions/Unsuccessful Discharges



■ Completions ■ Discharges

Successful Completions = 59 (52%)
Unsuccessful Discharges = 55 (48%)

Successful Completion Recidivism



■ No Recidivism ■ Recidivism

Successful Completion Recidivism = 6 (10%)

OPIOID SETTLEMENT REQUEST

MEDICATION ASSISTED TREATMENT (MAT) IN THE JAIL

- Requesting \$225,000
- Expands MAT to individuals with Opioid Use Disorders booked into jail
- Allows expansion of contracted medical / BH services (Wellpath)
- Will contract with local methadone provider to deliver to jail.

- Aligns with Needs Assessment request to “Expand targeted mental health and substance use services”.
- Jail currently provides MAT only for pregnant woman.
- Precedent-setting lawsuit recently found that denial of MAT to treat Opioid Use Disorders in the jail is a violation of an inmates’ civil/ADA rights.
- The program will enable Waukesha County to expand the availability of MAT to those who fall into the following categories:
 - ✓ Individuals who were on MAT before placed in the jail.
 - ✓ Inmates in opioid withdrawal or who have an Opioid Use Disorder and would accept MAT.
- Benefits to the program:
 - ✓ Inmates who were using opioids prior to incarceration are 40-50x more likely to die from an opioid overdose after release.
 - ✓ The same group of inmates is less likely to reoffend / be reincarcerated after receiving MAT in jail.

CLINICAL SERVICES OUTPATIENT AND CJCC

FISCAL SUMMARY

- CJCC
 - ✓ Increase of \$33,034 for cost to continue for contracted day reporting services.
 - ✓ Otherwise CJCC is a flat budget request.
- Outpatient
 - ✓ Grant funds continue as awarded.
 - ✓ Reduction in outpatient revenue of \$45,000 due to projected actual revenues for chronic care management.
 - ✓ Mental Health supplemental block grant carryover through March 14, 2023.
 - ✓ Maintains funding for peer supports.
- Adult CCS revenue increases by \$420,000 due to increase in clients and days of service.

REGULAR POSITIONS, EXTRA HELP

- Transferred to Outpatient from the Mental Health Center.
 - ✓ 1.0 FTE Clinical Therapist
 - ✓ 1.0 FTE Psychiatric Technician
 - ✓ 0.2 FTE Psychometric Technician
- Creation of 1.0 FTE Human Services Supervisor funded through Regional Crisis Stabilization Fund (RCSF) Grant.

MENTAL HEALTH CENTER SUSTAINABILITY

Reduce capacity to one inpatient acute psychiatric unit with 16 beds.

- Reduction to 16 inpatient beds allows us to bill Medicaid.
- Increasing our ability to generate revenue estimate based on prior year amounts to approximately \$153,000.

Remodel one 14 bed wing into 12-room Crisis Stabilization Unit.

- Contracted provider to provide services and hold license.
- One HHS Supervisor to oversee the service provision.

Regional Crisis Stabilization facility grant- 3 years.

- Year 1: October 2021 - September 2022 (received grant in July 2022) - \$350.
- Year 2: October 2022 - September 2023 - \$226,476.
 - ✓ Cost of the Coordinator, Supervisor to oversee contract and contract for services while they build program and apply for the license.
- Year 3: October 2023 - September 2024 - \$1,284,000
- Year 4: October 2024 – September 2025 - \$1,329,000
- Grant requires 20 months of operations to be claimed.

Mental Health Center

- Hospital Staffing (local recruitment remains an issue), identified in the 2022 Needs Assessment, as of 8/1/2022:
 - ✓ 6 out of 16 Registered Nurse positions vacant (includes our full-time, part-time and weekend RN positions)
 - ✓ 6 out of 11 Psychiatric Technician positions vacant (includes full and part-time positions)
- 2023 budget includes an allocation of \$166,200 for temporary RN and Psych Technician staff:
 - ✓ These funds will enable the department to pay the difference in cost between temporary and FTE staff as needed.
 - ✓ In addition, \$62,200 has been allocated for temporary psychiatric services.
 - ✓ Retention pay adjustments for all RN/Techs within their pay ranges.
- Diversions have increased.
 - ✓ Added contracted security staff to lessen diversions.
 - ✓ Filled Clinical Director and now fully staffed in Psychiatry.

Analysis by McKinsey and Company indicated that the US workforce could be short 450,000 nurses by 2025.

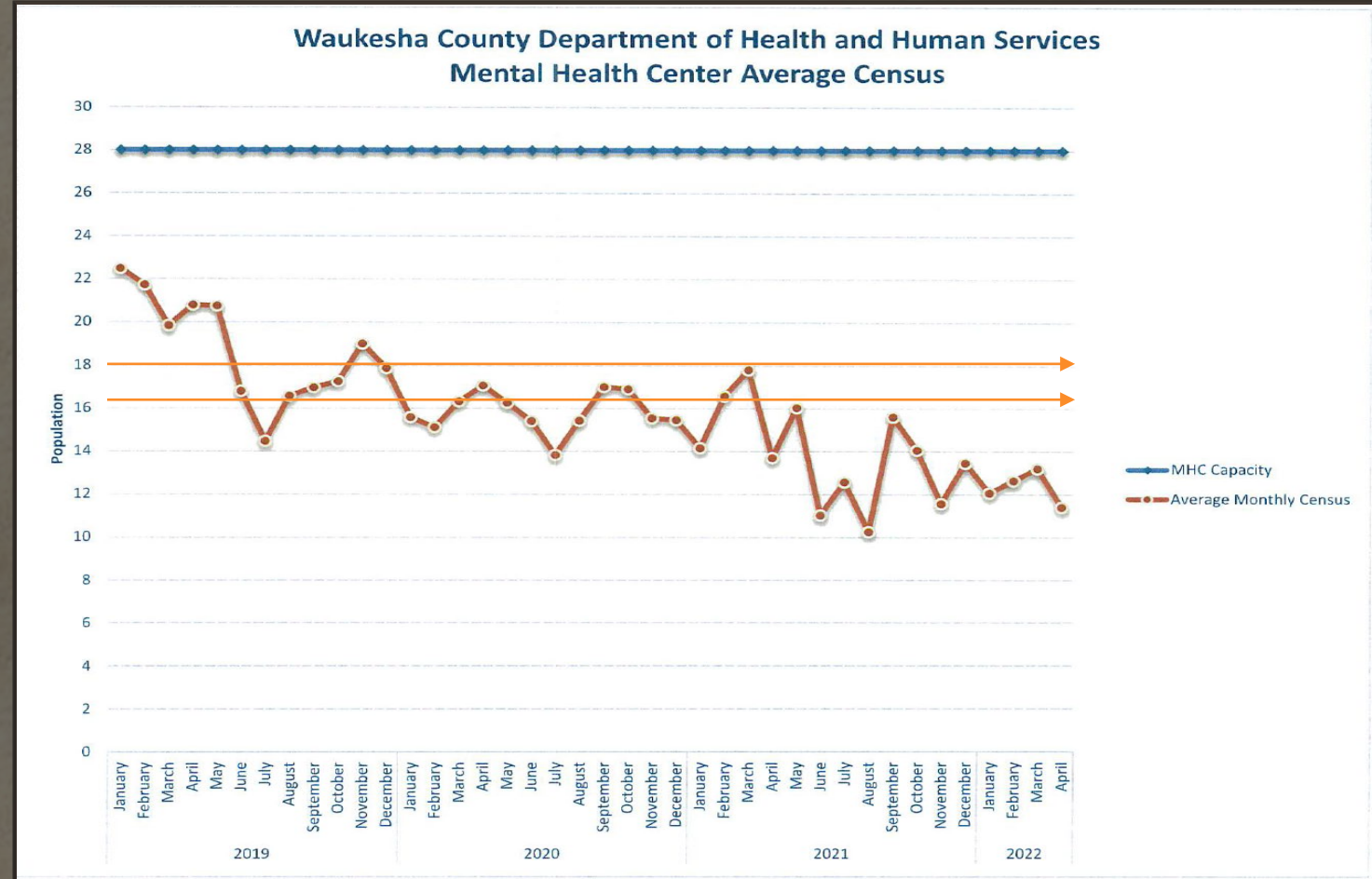
	Actual 2021	2022 (YTD 6/30/22)	Projected 2022	Budget 2023
Overflow	11	17	34	40*
Diversions (# of Days)	1,735	1,042	1,985	1,700

* Factors in potential additional overflow-related diversions that could occur when the inpatient unit construction starts.

Mental Health Center

Program Activities	Days of Care	Avg Daily Census	Staffing FTE
2022 Budgeted	6,600	18	53.47
16 Bed Capacity	4,855	13.3	39.80

Year	Admissions	Average Census
2015	NA	16.36
2016	661	17.6
2017	685	17.24
2018	661	21.07
2019	478	18.69
2020	490	15.82
2021	563	13.74
2022 (6/30/22)	290	12.10
2023 Projected	600	13.3



Capacity for 2022 was reduced from 28 beds to 22 beds. On August 1, 2022, the capacity will again be reduced to 16. During remodeling, the bed capacity will be 14 with an anticipated 13.3 average daily paid bed rate.

ONE HOSPITAL UNIT

Financial Category	Accounting Grouping	2022 Adopted Budget	2022 Estimate	2023 Projected
Expense	Interdepartmental Charges Total	\$1,130,117	\$1,116,322	\$1,178,749
	Operating Expenses Total	\$1,034,824	\$2,358,481	\$1,429,372
	Personnel Costs Total	\$5,166,708	\$3,806,371	\$4,156,816
	Expenses Total	\$7,331,649	\$7,281,174	\$6,764,937
Revenue	Charges for Services Total	\$2,942,865	\$1,920,096	\$2,231,711
	County Tax Levy	\$4,298,784	\$4,298,784	\$4,441,226
	Fund Balance	\$90,000	\$91,862	\$92,000
	Revenue Total	\$7,331,649	\$6,310,742	\$6,764,937

- August 1, 2022, we reduce our capacity in anticipation of closure of one unit in 2023.
- This has the effect of eliminating our status as an Institute for Mental Disease.
- Reducing capacity will reduce both revenues and expenses and changes diversion cost.
- Impact on the MHC budget
 - ✓ Increase in operating expenses of MHC-Inpatient \$394,548.
 - ✓ Reduction of projected charges for service revenues \$711,154.
 - ✓ Reduction of Inpatient FTE: 13.66.
 - ✓ Decrease in Personnel Costs: \$1,009,892.
 - ✓ Layoffs: 0
 - ✓ Increase in Medicaid revenue: \$158,900.
 - ✓ Reduction in unfunded hospital days of care.

PROPOSED REDUCTION IN STAFFING FOR HOSPITAL SERVICES

Job Title	2022 Budgeted FTE	16 Bed Capacity FTE	Change
Cert Occupational Therapy Assistant	2.00	2.00	-
Clinical Director	0.50	0.49	(0.01)
Clinical Services Manager	0.40	0.40	-
Clinical Therapist	3.00	2.00	(1.00)
EH-Clinical Therapist (MH Inpatient)	0.50	0.50	-
EH-Mental Health Counselor	0.08	0.08	-
EH-Occupational Health Supervisor	0.10	0.10	-
EH-Psych Tech (MH Inpatient)	2.78	0.65	(2.13)
EH-Psychiatrist (MH Inpatient)	0.20	-	(0.20)
EH-RN (MH Inpatient)	1.68	1.01	(0.67)
EH-Sr Clinical Psychologist	0.01	-	(0.01)
EH-Weekend RN (MH Inpatient)	0.50	0.50	-
EH-WIC Program Supervisor	0.15	0.15	-
Food Service Specialist	1.00	1.00	-
Mental Health Center Administrator	0.90	0.90	-
Nursing/Patient Services Coordinator	1.00	1.00	-

Job Title	2022 Budgeted FTE	16 Bed Capacity FTE	Change
Nutrition Services Assistant	1.00	1.00	-
Occupational Therapy Supervisor	1.00	1.00	-
OT-Cert Occupational Therapist	0.01	0.01	-
OT-Food Service Specialist	0.01	0.01	-
OT-Psychiatric Technician	1.03	0.75	(0.28)
OT-RN	0.07	0.07	-
OT-RN (MH Inpatient)	0.92	0.75	(0.17)
OT-Weekend RN	0.07	0.07	-
Psychiatric Nurse Practitioner	1.00	1.00	-
Psychiatric Technician	15.00	8.50	(6.50)
Psychometric Technician	0.20	-	(0.20)
Registered Nurse	13.76	11.25	(2.51)
Registered Nurse Supervisor	2.00	2.00	-
Senior Clinical Psychologist	0.50	0.50	-
Weekend Registered Nurse	2.11	2.11	-
Total FTE Count	53.48	39.80	-13.68

CLINICAL SERVICES INTENSIVE AND MHC

FISCAL SUMMARY

MH Outpatient Intensive

- Increase CSP revenue based on changes in billing process - \$60,000.
 - ✓ Billing for units rather than minutes.

Mental Health Center

- Charges for services decrease \$711,154
 - ✓ Due to a reduction of 1,745 anticipated days of care.
- General Fund allocation for facility projects reduced to \$92,000.
- Contract of \$258,100 for on-site security staff which reduces the need for one (up to 3) Psych Tech.

REGULAR POSITIONS, EXTRA HELP

MH Outpatient Intensive

- Increased staffing cost with the change from contracted providers to in house staff.

Mental Health Center

- Reduction of staff following closing of 1 unit of the psychiatric hospital.
 - ✓ Abolish 5.5 FTE Psych Tech
 - ❖ One Psych Tech will be replaced with a current COTA position to serve as the patient engagement specialist.
 - ✓ Extra Help is reduced by 3.01 FTE.
 - ✓ Unfund 2.0 FTE Registered Nurse.
 - ✓ Transfer 0.5 FTE Registered Nurse to Admin Services.
 - ✓ Transfer of 1.0 FTE Clinical Therapist (move to crisis, replace 1.0 LTE Clinical Therapist).



THANK YOU!