Minutes of the Health & Human Services Committee

Thursday, August 14, 2014

Chair Yerke called the meeting to order at 1:00 p.m.

Present: Supervisors Gilbert Yerke, Duane Paulson, Jeremy Walz, Tom Schellinger, and Bill Zaborowski. **Absent**: Christine Howard and Janel Brandtjen.

Also Present: Legislative Policy Advisor Sarah Spaeth, Health & Human Services Director Antwayne Robertson, Health & Human Services Deputy Director Laura Kleber, Human Services Supervisor Pat Mireles, Clinical Therapist Marie Anderson, Aging & Disabilities Resource Center (ADRC) Manager Luann Page, ADRC Coordinator Mary Smith, ADRC Supervisor Sue Smith, Volunteer Program Specialist Karen Straw, Shared Services Supervisor Kathy Mullooly, Matt Masterson of The *Freeman*, Adolescent & Family Services Supervisor Pete Slesar, Family Services Supervisor Ann Villeneuve, Social Workers Kelly Hesse and Cindie Remshek, and Clinical Therapist Karen Wergin. Recorded by Mary Pedersen, County Board Office.

Approve Minutes of 6-12-14
MOTION: Paulson moved, second by Zaborowski to approve the minutes of June 12. Motion carried 5-0.

Advisory Committee Reports
Yerke said the Community Development Block Grant Board and HOME Program are currently developing their five-year strategic plan. He urged Health & Human Services managers and others to participate in the online survey found on the County's website to aid in the process.

Chair's Executive Committee Report of 6-16 & 7-14
Yerke highlighted the following items discussed at the last two Executive Committee meetings.

- Approved several ordinances and appointments which have since been approved/confirmed at the County Board level.
- Heard a report on cyber security by Information Systems staff.
- Heard a report on the Clerk of Courts internal audit.
- Heard the Waukesha County Historical Museum Report on Financial Viability and Comments on the 2013 Financial Statements.

Next Meeting Date

- September 11

Future Agenda Items
Yerke said the Health & Human Services Committee is invited to attend the August 28 Health & Human Services Board meeting to hear a presentation on the heroin epidemic. The meeting will be held at 1:00 p.m. in Room 114 of the Human Services Building.

State Legislative Update
Spaeth said study committees are currently meeting which could result in legislation next year. These include processes and guidelines and/or funding for the Criminal Justice Collaborating

Council (CJCC) involving statewide treatment court coordinators and personnel, a state administered certification process for evidence based practices and standards, creating a data system, continued funding for TAD evaluation, and drug and alcohol court eligibility.

Educational Presentation on Adult Protective Services (APS) and Population
Mireles and Anderson distributed photographs of crises cases such as hoarding and general information on the APS Unit in the Health & Human Services Department. Mireles said there are currently 518 active cases in the unit which includes eight full-time social workers and two full-time licensed clinical social workers. Mireles and Anderson explained the unit in detail. APS provides voluntary and court mandated services for the elderly and adults at-risk. These are individuals with a physical or mental condition that substantially impairs a person's ability to care for their own needs and who has experienced, is currently experiencing, or is at-risk of experiencing abuse, neglect, self-neglect, or financial exploitation. If a person is competent they have the right to self-neglect, live in deplorable situations, and consent or refuse services. Competence is the decisive line in how services can be provided to a person at-risk. APS staff will conduct an assessment of the individual to determine competency. Staff must do what they can in the least restrictive way and must always balance the individual's right to self-determination with the least intervention possible while keeping the person safe. If a person is assessed to be incompetent and may be in imminent danger without intervention due to presenting risks, emergency protective placement may be pursued.

Presentation on Lean Government – Volunteer HIPAA Training Team
Smith said the Health & Human Services Department utilizes 1,400 active volunteers who work more than 3,500 hours each year. Straw advised a six-member team consisting of Health & Human Services staff decided it was important they examine the volunteer process which includes that all volunteers be required to complete annual HIPAA training. Over the years this has resulted in a lot of negative feedback from volunteers. The training was two hours long, many did not think it pertained to them, and countless hours were spent by staff to provide the required training. The team decided to change the content and make it more pertinent to the volunteer, and the number of hours staff spend on training will be reduced. The implementation of the new lean annual HIPAA training will begin in June 2015. Staff will continue to collaborate on volunteer programs yet on a more department-wide basis. They are estimating a 30-hour time savings, increased satisfaction from volunteers with a higher retention rate, and volunteers will have a more comprehensive understanding of HIPAA and the need for confidentiality.

Educational Overview of the Aging & Disabilities Resource Center (ADRC)
Page and Smith were present to give an overview of the ADRC. Page said the ADRC is for older adults and people with disabilities where they can obtain services, gain advice, etc. under one umbrella. Smith gave history on the ADRC. Waukesha became a Family Care county in 2008 and began enrolling individuals in the State's Family Care Program. Page advised the ADRC provides information and assistance, counseling on long term care options, enrollment in publicly funded long term care programs and Medicaid, economic support assistance, benefits counseling, functional screenings, intervention, and assistance to young people with disabilities after high school. Smith said four employees work the phones each day and one employee is assigned to walk-ins. Based on what each individual's needs are, they may be referred to an ADRC specialist to assess their needs. Services could include caregiver support, nutritional needs such as home delivered meals, in-home services such as bathing or homemaker, transportation, etc.

Smith indicated staff have contact with more than 1,500 individuals each month. This can include phones calls, walk-ins, and home visits. Smith said 24% of the incoming phone calls are people calling for themselves, 8% are the caregiver, 14% are an agency or another service provider, and 24% are a relative or family member who could also be a caregiver. There were more than 15,000 Rideline rides (handicap accessible) and over 46,000 shared fare taxi rides. Smith noted Rideline is encouraged over the shared fare taxi because it is much more economical. She said 26% of those who contact the ADRC are age 18 to 59 and 74% are age 60 and above. In 2013, 8% were developmentally disabled, 60% were elderly, 10% had mental health issues, and 20% had physical disabilities.

Smith said Older Americans Act funding is one funding source that provides services for individuals age 60 or above and who have the greatest needs. These are donation-based services and income is not considered. Smith said this funding allows them to provide quite a few evidence-based prevention programs such as diabetes management, chronic disease self management, caregiver support, and the fall prevention program. The ADRC partners and collaborates with many other organizations/non-profits in the community.

Page indicated that a temporary grant-funded dementia care specialist will provide training to all ADRC staff. She will also work with the APS staff and any other staff members who could benefit from her expertise. Page noted that with dementia, early intervention is key. Smith highlighted upcoming marketing activities including dementia awareness and challenges they expect due to the upcoming retirement of four long term staff members.

Smith said the ADRC also tracks unmet needs in the community. These include concerns relating to financial eligibility for the Long Term Care Program, subsidized housing, funding for assisted living, and mental health and psychiatric services. Yerke recommended the list of unmet needs be referred to Community Development Block Grant Coordinator Kristin Silva.

Educational Overview of the Adolescent & Family Services Division

Slesar was present to give an overview of the Adolescent & Family Services Division for troubled youths. Slesar gave examples which can include youths who do not abide by their parents' rules, do not go to school, or they break the law. Youths go through intake to review and assess needs. Other services may include temporary physical custody at the County's Juvenile Center and the court process may begin depending on the offense. If a youth can be returned home, the parents are able to enforce necessary rules, no court is involved, and the community is protected, the division will not become involved. If staff feel ongoing services are needed the case will go to either the Family Service or Juvenile Service units. Family conflict cases (truancy, runaway, etc.) go to Family Services and delinquency cases (criminal law violations) go to Juvenile Services. Slesar noted there is often a lot of cross-over between the two units. Staff work with families to reinforce the parental authority and the expectations of the system. Only when necessary, and only when safety is a factor, will staff refer a case to the court system. Slesar noted research has shown one area that can create more problems for youths is if they get involved in the court system. Often a deferred prosecution agreement is ordered instead. If the court does become involved staff are involved also. Purchased services include electronic monitoring/bracelets, an educational support and alternatives school, etc. The County has been able to maintain a very low out-of-home placement rate. Of the 625 families with whom they worked with last year, 13 ended up in out-of-home placement. Slesar said the last component of the division involves youths who are in need of a confined setting longer than the Juvenile Center – Lincoln Hills.

Educational Presentation on the Families Intact Treatment Team's (FITT) Work with Youth Sex Offenders
Villaneuve, Wergin, Hesse, and Remshek were present to discuss this item. Villaneuve said FITT is a specialized team in her unit that works with youth sex offenders. The unit also includes two clinical therapists who do trauma work. Wergin said FITT provides case management, court related services, counseling, and education for these youths and their families. She noted that youths in FITT are still living at home. The goal is to prevent them from committing additional delinquencies and provide them with knowledge and understanding of their actions and how they allowed themselves to act out in the manner in which they did. The majority of the kids who enter FITT do not have a history of delinquent behavior and are high achieving kids academically, etc. Research shows these youths can develop healthy and appropriate sexual relationships as young adults. For most of the families, this is their first court experience. However, these are very serious offenses and community safety and accountability are first and foremost. Remshek provided statistics and she and Hesse explained the program further. She said the county's recidivism rate tends to be lower than the national rate because of individualized treatment. Hesse discussed the HEALS (Healthy Exploration of Adolescent Life and Sexuality) Program that teaches kids who have acted out sexually about healthy relationships.

Slesar said the FITT and HEALS approach is rigorous; it holds kids accountable but also takes into consideration that developmentally, an adolescent sex offender is at a very different stage than an adult sex offender. The intervention is geared towards the fact that regardless of what happened, they are still developing and there is more opportunity to bring about positive changes. While adult sex offenders tend to target their victims, for adolescents it's more opportunistic. Slesar noted the County's judges have seen the positive results and are supportive of the program.

Educational Overview of the Public Health Division
This item was held over to the September 11 meeting.

MOTION: Paulson moved, second by Zaborowski to adjourn at 3:04 p.m. Motion carried 5-0.

Respectfully submitted,

Janel Brandtjen
Secretary