



# POLK COUNTY, WISCONSIN

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## AGENDA AND NOTICE OF MEETING

HEALTH AND HUMAN SERVICES BOARD

Government Center

Conference Room A & B

Balsam Lake, WI 54810

10:00 a.m. Tuesday July 14<sup>th</sup>, 2015

**Purpose:** Review and Action on selected items as listed below  
**Documents:** Minutes of May 12<sup>th</sup>, 2015, monthly and quarterly reports

ITEM	LEAD PERSON
Call to order	Committee Chair
Approval of agenda Approval of minutes for May 12 <sup>th</sup> , 2015	
Public comment	
New business	
1. The Center for Medicare and Medicaid services rating	Director of GAM/ Dana Reese
2. Family Support program evaluation	Director of Human Services/ Gene Phillips
3. Progress on agency 2013-16 strategic plan 4. Results from 2014-15 customer satisfaction survey 5. Update on SHOW project in Polk county 6. Legislative Event New Richmond Monday 7/20/15 7. Department 2014 Annual Report	Director of Public Health/ Gretchen Sampson
Future agenda items- Next meeting August 11 <sup>th</sup> , 2015, Program evaluation for July and Audit report (s)	Committee members
Adjourn	

This meeting is open to the public according to Wisconsin State Statute 19.83. Persons with disabilities wishing to attend and/or participate are asked to notify the County Clerk's office (715-485-9226) at least 24 hours in advance of the scheduled meeting time so all reasonable accommodations can be made. Requests are confidential



**MINUTES**

**Health and Human Services Board**

Government Center, Conference Room A & B

Balsam Lake, WI 54810

10:00 Tuesday, May 12<sup>th</sup>, 2015

**Meeting called to order by Committee Chair, Pat Schmidt @ 10:01 AM.**

**Members present**

Attendee Name	Title	Status
Pat Schmidt	Chair	Present
Marvin Caspersen	Vice Chair	Present
John Bonneprise	Supervisor	Present
Dean Johansen	Supervisor	Absent
Joe Demulling	Supervisor	Present
William Alleva	Citizen	Present
Dr. David Markert	Citizen	Present
Pamela DeShaw	Citizen	Absent
Dr. Arne Lagus	Citizen	Present

Also present Tammy Peterson, Executive Secretary, Bonnie Leonard, Public Health Supervisor and Gretchen Sampson, Director of Public Health

**Approval of Agenda-** Chair called for a motion to approve agenda; **Motion** (Caspersen/Bonneprise) to approve agenda. Motion carried.

**Approval of Minutes-** Chair called for a motion to approve the minutes of the April 14<sup>th</sup>, 2015 meeting. **Motion** (Alleva/Demulling) to approve the minutes. Motion carried.

**Public Comment** - None

**New Business**

Chair Pat Schmidt asked if anyone had questions contained in the monthly reports, none asked.

Director of Public Health, Gretchen Sampson discussed the regional legislative quarterly meeting that was held in New Richmond last month. Next meeting is scheduled on July 20<sup>th</sup> in New Richmond.

Director Gretchen Sampson provided handouts and gave evaluation on General Public Health. There were several things covered in the handout such as: purpose of programs, goals, objectives, funds, measures and services, annually number served, staff, and challenges.

Ms. Sampson distributed a fact sheet and spoke on the Avian Flu situation in Wisconsin and also gave updates on Amery fluoride and PNCC audit.

**Future Agenda Items** – Next meeting is June 9<sup>th</sup>, 2015. The audit reports and Human Services program evaluation.

**Adjourn – Motion** (Bonneprise/Demulling) to adjourn. Meeting adjourned 12:04 p.m.



## Monthly Report, April 2015

### Long Term Care / Overall Nursing Facility

#### Current

- 94% occupancy rate of 114 total skilled nursing care beds.
- We are currently hiring for part time CNAs for our Afternoon/PM shift which is 2:30pm-10:30pm. We are also currently recruiting high school students to fill positions in housekeeping and dietary. We have a program through Clayton, Clear Lake and Amery Schools to employ students in these departments. Due to upcoming graduations we hope to fill these vacancies with new students/employees.
- Cosmetic updates throughout the building continue. The activity room was recently painted and updated.
- The Golden Age Manor Infection Preventionist Nurse attended a 2 day seminar on infection control practices including what to do in the case of influenza outbreaks, handwashing, etc.
- Golden Age Manor has been granted a variance to conduct pre-employment physicals in house with an RN for new employees. This will save the facility money as well as make hiring new employees easier to coordinate. Previously they would have an appointment at Amery Hospital & Clinics for these physicals.

### Short Term Rehabilitation- Medicare Part A

#### Current

- 222 days of Medicare Part A or Medicare Advantage Plan residents, averaging 7.4 residents per day. This is our highest payer type and we budgeted for 2015 to have approximately 208 days a month.

### Dementia Care

#### Current

- We currently have one open bed in Judy's cottage. Judy's cottage is a 17 bed secured unit primarily for resident's with Alzheimer's disease and other types of dementia.



## Monthly Report, May 2015

### Long Term Care / Overall Nursing Facility

#### Current

- 92.5% occupancy rate of 114 total skilled nursing care beds.
- We are currently hiring for one part time Activity Aide position as well as one part time Dietary Aide position.
- The West Wing roofing project is currently underway and approximately ½ of the way completed.
- Fire safety and Fire extinguisher demonstration training will be conducted with all staff during the month of June.

### Short Term Rehabilitation- Medicare Part A

#### Current

- 211 days of Medicare Part A or Medicare Advantage Plan residents, averaging 6.8 residents per day. This is our highest payer type and we budgeted for 2015 to have approximately 208 days a month.

### Dementia Care

#### Current

- We currently have one open bed in Judy's cottage. Judy's cottage is a 17 bed secured unit primarily for resident's with Alzheimer's disease and other types of dementia.
- One Activity Aide who primarily works in Judy's cottage attended a 2 day conference about dementia which was hosted by the Alzheimer's Association. She will now present/share what she learned with her department.



## Monthly Report, June 2015

### Long Term Care / Overall Nursing Facility

#### Current

- 94.8% occupancy rate of 114 total skilled nursing care beds.
- We are currently hiring for Certified Nursing Aide positions with anticipation of some of our college staff going back to school in the fall. We are also currently hiring for one part time Dietary Aide position.
- The West Wing roofing project has been completed, awaiting a few fixes on punch list. With a lot of rain the last month we have had no leaks in the areas of our new roofs.
- The front main parking lot and the rear employee parking lot will be chip sealed at the end of July to fix cracks and uneven spots in these parking lots making them safer for foot traffic.

### Short Term Rehabilitation- Medicare Part A

#### Current

- 122 days of Medicare Part A or Medicare Advantage Plan residents, averaging 4.1 residents per day. This is our highest payer type and we budgeted for 2015 to have approximately 208 days a month.

### Dementia Care

#### Current

- We currently have no open beds in Judy's cottage. Judy's cottage is a 17 bed secured unit primarily for resident's with Alzheimer's disease and other types of dementia.

## Polk County Health Department

### Monthly Update for Board of Health & Human Services –May, 2015 (Data is from March, 2015)

#### General Public Health Program Activities

1. **Community Health Improvement Planning (CHIP)** – The Obesity Prevention and Mental Health workgroups met in April. The Wisconsin Partnership Program grant to implement a countywide Harvest of the Month program was submitted on April 10. The Mental Health Task Force of Polk County is hoping to secure a Bremer Foundation grant to implement a depression screening program for 9<sup>th</sup> graders in the St. Croix Falls School District.
2. **Communicable Disease Surveillance, Control and Follow-up** – No current outbreaks in Polk County. Barron and Chippewa counties are dealing with avian flu in several turkey flocks.
3. **Department Strategic Plan** – Our annual assessment of the agency QI culture was analyzed. We have improved our score over last year so progress is being made on institutionalizing quality improvement in the agency.

#### Specific Public Health Programs

**Family Health Benefits Counseling** - In March, our staff enrolled 32 persons in the Marketplace and BadgerCare programs and interacted with 109 client contacts about health care financing options.

**Immunizations** – We are having our State site visit on June 11.

**Jail Health** – The jail nurse had 135 sick call visits with inmates in March. Med management continues to require significant nursing time. Our current doctor is on leave of absence from SCRMC but will continue to function as our jail medical advisor.

**Environmental Health/Agent Program** – Twelve (12) facility inspections were conducted in March under the Agent program. DNR well water testing is beginning in May.

#### Public Health Preparedness Consortium

- Highly Pathogenic Avian Influenza (HPAI) has been detected and confirmed in five turkey flocks (as of 5/6/15) within Barron Co. The Barron Co. Department of Human Services, a member of WWPHRC, has received assistance from federal and state resources, as well as WWPHRC, to coordinate public health's response (i.e., monitoring of identified workers and dissemination of public information). Although highly lethal to poultry, there has been no human illness associated with this outbreak thus far.
- Jaime Weness, Director, attended the Preparedness Summit 2015 in Atlanta, GA. The Summit is the first and longest running national conference on public health preparedness. Ms. Weness was able to gain insight, information and test new tools that will be implemented in local response plans.
- Ms. Weness held webinars throughout the month of April for WWPHRC members. The purpose of the webinars was to further educate local planners on target capabilities, consortium-

developed tools and plans, and educate planners further on public health's role in the capabilities of Community Recover, Mass Care, and Fatality Management.

- Ms. Weness provided a "Local Planner 101" session to planners from the WWPBHC membership. Planners in attendance represented a wide range of local planner experience, from one month on the job to ten-plus years. The session covered areas of federal and state law in preparedness, the spectrum of response from federal to local levels, funding, capabilities, and local work in planning. Facilitated discussion allowed experienced planners to discuss their roles with new planners.

**Wisconsin Hospital Emergency Preparedness Program (WHEPP)** – Sampson attended the May 8<sup>d</sup> regional coalition planning committee meeting in Rice Lake. The group continues to plan for the transition to healthcare coalitions. Sampson is on the interview panel on May 18<sup>th</sup> in Eau Claire that will select a regional coordinator for coalition leadership. All new hires will be contracted by DHS and start July 1, 2015. WHEPP is giving stipends to member agencies for their work in Ebola planning and exercising. This has required significant work in our fiscal agent role but it is going well.

**Reproductive Health** – We served 81 unduplicated clients in February. Visits are 365 YTD compared to 407 in 2014.

**WIC** – We served 727 program participants in March. Food dollars spent in Polk were \$44,246 compared to 39,248 in 2014. YTD food dollars in Polk are \$125,945 compared to \$117,475 in 2014.

**Prenatal Care Coordination (PNCC)** – There were 19 admissions in the month of March. Twelve (12) women were discharged from the program. We sent copies of 20 client records to DHS last week as part of the program audit. Staff spent numerous hours getting records prepared for this process. Overall the records looked good in terms of documentation matching billing requirements. As with any audit, there will likely be some areas noted by the State that will require tweaking of our internal processes.

**Birth to 3-** We enrolled 1 new child; staff provided 31 service coordination visits and 96 contract therapy visits in March.

**Multi-Jurisdiction Tobacco Coalition (MJC)** - The MJC recently participated in the Legislative Event in New Richmond. Information was shared on the CDC's news release on the rise of e-cigarette use among youth. For more information on this topic please visit <http://www.cdc.gov/media/releases/2015/p0416-e-cigarette-use.html>. The MJC continues to educate communities about e-cigarette and the potential public health issues associated with them. We are also targeting work on multi-unit smoke-free housing. We have had several inquiries from Housing Authorities in our 5-county area wanting guidance from the MJC on moving this forward. Shortly we will also be beginning our first round of tobacco compliance checks for 2015. For updates on MJC work visit our newsletter page of our Western Wisconsin Working for Tobacco-Free Living (W3TFL) website at <http://www.w3tfl.org/w3tfl-newsletters/>. These newsletters are done monthly. We also have a W3TFL Facebook page <https://www.facebook.com/W3TFL>.

**Well Woman Program (WWWP)** – We are beginning the transition period for this program. Our new staff attended program training in Madison with the Division of Public Health. Appointments with our partner agencies have been set up for May and June to begin transitioning client records and establishing relationships with the new provider network.

**Director's Update**

1. We will be participating in the Polk county Emergency Management mass care/sheltering tabletop exercise Tuesday afternoon with a variety of partners.
2. I have been invited to participate in a national think tank on challenges small health departments face in the accreditation process. This will be at the PHAB headquarters in Virginia in June.
3. We will be conducting a retreat for the Public Health Nursing section to do strategic planning with this unit. We anticipate significant staff turnover in the next 5 years due to retirements.
4. I attended an excellent training in Wausau last week on strategies to implement policy change in your community around alcohol.

## **Polk County Health Department**

**Monthly Update for Board of Health & Human Services –June, 2015 (Data is from April, 2015)**

### **General Public Health Program Activities**

- 4. Community Health Improvement Planning (CHIP)** – We are in the process of completing an “Annual CHIP Update Report to the Community” to give to key stakeholders as well as the general public. Our health focus area workgroups continue meet and are making progress on strategies identified in the CHIP. We will discuss the activities of the unhealthy alcohol use workgroup at the Board meeting next month which include some policy level work. We are starting to plan to do the next Community Health Needs Assessment as it has been 3 years since our last one.
- 5. Communicable Disease Surveillance, Control and Follow-up** – No current outbreaks in Polk County. We have had a couple cases of Shigella in May which is a nasty diarrheal illness.
- 6. Department Strategic Plan** – We have completed a customer satisfaction survey of clients in some of our MCH programs. Results are positive and the report will be finalized for the next Board meeting. The Workforce Development Team continues to work to address the results of the county employee engagement survey. The Real Colors training recently held and the new employee recognition tree are results of that planning. In addition, they will be rolling out monthly Lunch and Learns sessions. The first one is on Monday, June 8<sup>th</sup> and will feature the PBS Frontline special on Ebola – it is riveting and very good!

### **Specific Public Health Programs**

**Family Health Benefits Counseling** - In April, our staff enrolled 36 persons in the Marketplace and BadgerCare programs and interacted with 168 client contacts about health care financing options.

**Immunizations** – We are having our State site visit on June 11.

**Jail Health** – The jail nurse had 136 sick call visits with inmates in April. Med management continues to require significant nursing time. The Sherriff reported to me that he received a copy of their 2015 Jail Inspection and just wanted to pass on the following taken directly from the report: “The jail continues to benefit from an excellent healthcare program. RN Donna Johnson is doing an excellent job coordinating onsite services as well as working with offsite providers, the oversight physician, and Qualified Mental Health Providers as needed for mental health services. Full compliance was noted in the healthcare area.” Kudos to our jail nurse Donna Johnson!

**Environmental Health/Agent Program** – Eighteen (18) facility inspections were conducted in April under the Agent program. DNR well water testing is well underway and began in May.

### **Public Health Preparedness Consortium**

- Provided information sharing and coordination assistance to Barron Co. Public Health and State Div. of Public Health in their response efforts related to the positive identification of Highly Pathogenic Avian Influenza (HPAI) in five commercial turkey flocks in Barron Co.
- Oversaw the compilation and final submission of public health After Action Reports (AARs) for the region following the Ebola Tabletop Exercise in February.
- Facilitated completion of Capability Planning Guide (CPG) surveys for WWPHRC members. Completion of CPG surveys is a PHEP grant requirement and identifies planning, training, equipment and skill gaps to be addressed in the future.
- Continued active involvement in regional Healthcare Coalition development. Active in planning for the Northwest Wisconsin Healthcare Coalition (NWWIHCC) Conference to be held June 11, 2015 at WITC Rice Lake.

**Wisconsin Hospital Emergency Preparedness Program (WHEPP)** – Sampson is attending the June 5<sup>th</sup> regional coalition planning committee meeting in Rice Lake. The group continues to prepare for the transition to healthcare coalitions. Sampson was on the interview panel on May 18<sup>th</sup> in Eau Claire that recommended the new regional coordinator for coalition leadership as well as the new regional trauma advisory council coordinator. All new hires will be contracted by DHS and start July 1, 2015. WHEPP is giving stipends to the Region 1 local health departments for surface pro tablet computer purchases so that portable access to the WiTRAC system can be assured. This has required significant work in our fiscal agent role. I requested to DHS that our fiscal agent fee be increased (doubled) due to the additional workload and my request was granted. It pays to ask!

**Reproductive Health** – We served 49 unduplicated clients in April with 124 visits. Visits are 489 YTD compared to 549 in 2014. We are seeing a considerable impact of the Affordable Care Act on this program and are evaluating staffing patterns to adjust to this impact. In May, Reproductive Health Services continued efforts to offer STI education, assessment, testing and treatment to those persons presenting for basic reproductive health services. Two outreach presentations were done at Polk County Human Services for AODA groups. These outreach presentations focused on prevention of sexually transmitted infection and getting tested. One outreach presentation was done at St Croix Falls High School for the freshman health education class. That outreach focused on reproductive health care, healthy relationships, and prevention of unintended pregnancy and sexually transmitted infection. Reproductive Health continues to monitor and audit charting as part of grant requirements. For program performance management as of May 31, 2015, the program is on target to meet outcome measures.

**WIC** – We served 719 program participants in April. Food dollars spent in Polk were \$39,407 compared to \$41,041 in 2014. Staff are being trained on eWIC in June which will feature electronic food purchase cards instead of paper vouchers for WIC clients to use in grocery stores. The statewide rollout is being phased in to the various regions in the state – it has gone very well in other parts of the state already in full implementation.

**Prenatal Care Coordination (PNCC)** – There were 11 admissions in the month of April with 118 visits to program participants. Twenty two (22) women were discharged from the program. We have not yet heard any feedback from our Medicaid audit process for this program.

**Birth to 3-** We enrolled 4 new children; staff provided 33 service coordination visits. Data is not yet available for contract therapy visits in April.

**Multi-Jurisdiction Tobacco Coalition (MJC)** - The MJC presented 3 presentations in the past month at wellness events about “other” tobacco products and electronic cigarettes. The communities we serve, along with employers, are very interested in this information. We also continue to target strategies on smoke-free multi-unit housing. A housing authority in our MJC recently strengthened their tobacco-free policy to include electronic cigarettes. It was great to work with them and be a resource for the information they requested. Youth Risk Behavior Survey Data for 2015 is available. In regard to tobacco use, it shows us that we are seeing a similar trend with Polk County youth as with youth at the national level – smoking numbers are going down, but the use of e-cigarettes is rising quickly. For updates on MJC work visit our newsletter page of our Western Wisconsin Working for Tobacco-Free Living (W3TFL) website at <http://www.w3tfl.org/w3tfl-newsletters/>. These newsletters are done monthly. We also have a W3TFL Facebook page <https://www.facebook.com/W3TFL>.

**Well Woman Program (WWWP)** – We are continuing the transition period for this program. Our new staff is meeting with our partner agencies to begin transitioning client records and establishing relationships with the new provider network.

### **Director’s Update**

5. We have an Area Health Education Center (AHEC) intern starting on Monday. She will be here for 8 weeks to have exposure to work in a local health department. Her project will be to develop a process for inmates to be connected to health care coverage upon discharge from the jail.
6. I attended an excellent annual meeting of the Wisconsin Public Health Association (WPHA) and the Wisconsin Association of Local Health Departments and Boards (WALHDAB) in the Dells in May. There were speakers on: a) the response in West, Texas after the fertilizer plant explosion. This happened 2 days after the Boston bombings so at first there were concerns of terrorism; b) the communication response from CDC to the Ebola crisis. This was fascinating as the speaker headed up the social media response including all of CDC’s communication on Facebook, Twitter, Instagram, and numerous other social media sites. It made me realize that we need to do a much better job of using social media to reach various population segments with public health messages, and c. use of data in community health improvement processes, especially when communicating to the public; and c) the Ebola outbreak in the Texas hospital was addressed by the Director of the Community Preparedness Section from the Texas Department of State Health Services. He talked about their response and lessons learned. It was fascinating!!!
7. I participated via interview with the county consultant firm exploring increased efficiencies in health and human services in Polk County. I will be interested in hearing the results of this study.
8. I am on vacation the week of June 29<sup>th</sup> but will be periodically checking emails.

I look forward to our next Board meeting on July 14. I hope you all are having a great summer so far – we could use a little more heat for my liking but it beats snow!!!

## Polk County Health Department

### Monthly Update for Board of Health & Human Services –July, 2015 (Data is from May, 2015)

#### General Public Health Program Activities

7. **Community Health Improvement Planning (CHIP)** – the “Annual CHIP Update Report to the Community” has been drafted and reviewed by our hospital partners for additional input. The plan is to finalize it and give to key stakeholders as well as the general public. Our health focus area workgroups continue meet and are making progress on strategies identified in the CHIP. We will discuss the activities of the unhealthy alcohol use workgroup at the August Board meeting. We are starting to plan next Community Health Needs Assessment process and will meet with our hospital partners on July 13 to finalize our strategy.
8. **Communicable Disease Surveillance, Control and Follow-up** – No current outbreaks in Polk County. We are seeing tickborne activity especially Erlichiosis/Anaplasmosis with 17 cases reported to date. Lyme disease incidence is less at 8 cases reported through June.
9. **Department Strategic Plan** – Progress report will be shared at July board meeting.

#### Specific Public Health Programs

**Family Health Benefits Counseling** - In May, our staff enrolled 32 persons in the Marketplace and BadgerCare programs and interacted with 93 client contacts about health care financing options.

**Immunization** – Our State site visit was conducted on June 11 and our program found to be in good order. There were no recommendations for major improvements.

**Jail Health** – The jail nurse had 126 sick call visits with inmates in May. Med management continues to require significant nursing time.

**Environmental Health/Agent Program** – Fifty six (56) were conducted in May under the Agent program. DNR well water testing is well underway and 120 tests were conducted in May.

#### Public Health Preparedness Consortium

- PHEP Budget Period 3 ended June 30<sup>th</sup>. In-person and phone-based technical assistance was provided to member agencies as they worked to complete contract requirements.
- Hosted web-based group meetings to assist members in completing Capability Planning Guide (CPG) surveys. CPG surveys are required to be completed per PHEP contract. Group completion of surveys allows for information sharing and provision of technical assistance across member agencies.
- Participated in the Pierce Co./St. Croix Co. Point of Dispensing (POD) exercise in River Falls. Pierce Co, a WWPHRC member, is part of the Cities Readiness Initiative (CRI) Minneapolis region. CRI jurisdictions receive federal grant monies to prepare and respond to anthrax attacks. PODs provide a way of quickly and efficiently dispensing medications

(countermeasures) to a population. Attendees at the exercise included local, regional, state and federal representatives.

- Attended and assisted in coordinating the Northwest Wisconsin Health Care Coalition (NWWiHCC) Conference on June 11<sup>th</sup>. Over 85 people from the region attended the conference. Evaluations indicated the conference was well-received and helped people to learn more about the HCC.

**Wisconsin Hospital Emergency Preparedness Program (WHEPP)** – After this report, I will now refer to WHEPP as the Northwest Wisconsin Health Care Coalition (NWWiHCC). A new coordinator has been hired and will be a DHS contractor. Her name is Aimee Wollman Nesseth and she is a former Mayo health system employee. The new NWWiHCC Trauma Coordinator is Judy Jones and the new regional Medical Advisor is Dr. Paul Krantz – they too are DHS contractors. Polk County Health Department will continue as the fiscal agent for NWWiHCC and will primarily manage the expense reimbursement of these contractors and board members. Health Departments are required to be active members of the new regional health care coalitions as part of their public health preparedness contract objectives.

**Reproductive Health** – We served 47 unduplicated clients in May with 137 visits. Unduplicated client count is 363 YTD compared to 355 in 2014.

**WIC** – We served 710 program participants in May. Food dollars spent in Polk were \$39,385 compared to \$388,872 in 2014. Staff were trained on eWIC in June which feature electronic food purchase cards instead of paper vouchers for WIC clients to use in grocery stores. Our program began the eWIC rollout in June with minor glitches. It has gone well for the most part.

**Prenatal Care Coordination (PNCC)** – There were 16 admissions in the month of May with 115 visits to program participants. Seven (7) women were discharged from the program. We still have not yet heard any feedback from our Medicaid audit process for this program.

**Birth to 3-** We enrolled 4 new children; staff provided 33 service coordination visits. We had 90 contract therapy visits in May. We had a state staff participate in the annual program self assessment on June 18. They were pleased on the progress we are making with our transition to the primary coaching model of service delivery.

**Multi-Jurisdiction Tobacco Coalition (MJC)** - Staff has started compliance checks in the MJC area. In Polk County we have conducted 25 checks with 5 sales. We will be doing a total of 57 checks in Polk County in 2015. We continue to assist organizations with electronic cigarette policies and multi-unit Housing facilities with policies for going smoke-free. This month, on July 5<sup>th</sup>, we are celebrating the 5<sup>th</sup> anniversary of smoke-free workplaces in WI. This has definitely been a great accomplishment for the health of our State. For updates on MJC work visit our newsletter page of our Western Wisconsin Working for Tobacco-Free Living (W3TFL) website at <http://www.w3tfl.org/w3tfl-newsletters/>. These newsletters are done monthly. We also have a W3TFL Facebook page <https://www.facebook.com/W3TFL>

**Well Woman Program (WWWP)** – We have completed the client record transfer from all our partner counties and are now inputting them into an electronic database and making contact with women who are due for care. We will be working next to establish personal relationships with the new provider network representatives.

### **Director's Update**

9. We responded to a very short turnaround grant opportunity around dementia friendly communities. We received \$2000 from DHS to review the state toolkit and provide feedback, to participate in an interview with state health department staff about what the role of local health departments could be in building dementia friendly communities and interviewing at least 2 professionals who work in the dementia field about their perspectives on the role of local health departments. Our report to DHS is due July 15.
10. The 2014 agency annual report will be distributed at the July board meeting. We can discuss it at the August meeting.  
Our second annual report to the Public Health Accreditation Board (PHAB) is due the end of the month. I will share it with you next month.

**POLK COUNTY DEPARTMENT OF HUMAN SERVICES**

Government Center, 100 Polk County Plaza #50, Balsam Lake, WI 54810 (715) 485-8400

March, 2015

**Behavioral Health Outpatient**

People are assisted in living a productive life by Mental Health and Substance Abuse assessment and therapy. Clinical supervision is provided, as well as direct Psychiatric services and medication management. Individual and group therapy is utilized. Collaboration with private and other public services is a major component of operations.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Psychiatry/Medication Management		234	310	318
Outpatient Recipients		248	275	344

*Estimated Percentage of Adults with Behavioral Health Disorders in the United States  
NACO (National Association of Counties) April, 2015*

	<i>General Public</i>	<i>State Prisons</i>	<i>Jails</i>	<i>Probation &amp; Parole</i>
<i>Serious Mental Disorders</i>	5.4%	16%	17%	7-9%
<i>Substance Abuse Disorders</i>	16%	53%	68%	35-40%
<i>Primary Substance Abuse with Mental Disorder</i>	25%	59%	72%	49%
<i>Primary Mental Disorder with Substance Abuse</i>	14.4%	59.7%	33.3%	21%

**Behavioral Health Adult Protection**

Reports of adult abuse or neglect are investigated. Long term services provide support for adults challenged in living in the community. Institutional placement review, Payee, and Guardianship assistance is provided. Emergency services are available 24 hours a day.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Reports		20	20	25
Investigations		4	6	8
Emergency Detentions		5	9	10
In-Home Support Recipients		160	203	248
Out-of-Home Placements		20	20	26

**Children and Family Protection**

Reports of children in unhealthy or unsafe conditions are investigated. When appropriate, action is taken, and children may be removed from the home until safe conditions are assured. Supportive services are provided to assist families in assuring the health and safety of the children. Families with a child with severe needs may also receive services.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Reports		70	76	86
Investigations		14	17	18
In-Home Support Recipients		108	112	102
Out-of-Home Placements		38	22	26

**Children and Family Treatment**

Children and Youth that have mental health, substance abuse problems, and/or have delinquency behaviors are treated by the Department if age 17 or under. Services are with the family and in the community, or in treatment facilities. Safety of the individual, the family, and the community is of high priority.

<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Intakes	11	15	12
In-Home Support Recipients	54	58	65
Out-of Home Placements	9	8	11

*The Department is still seeking mentors, in particular adult males, but would like to talk to anyone that is interested. Approval has been given to carry over some unspent grant funding for this important support to youth. There are several kids who could use a role model to be with them in healthy, pro-social activities. It can make a difference. It is not necessary to be "talented" in any area. Just be positive and show up knowing the kids can supply the energy. The usual age is 10 to 17 with training and support by a Social Worker. Anyone interest in knowing more about mentoring , call Chad at (715) 485-8416.*

**Economic Support**

Economic Support helps families in need become self-sufficient by determining eligibility for programs to assist through difficult times and by referral to other resources. Referrals are to a wide variety of job related and/or assistance programs.

<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Food Share Recipients	4,564	5,209	5,323
Medical Assistance	7,957	8,202	8,456
Child Care Assistance	98	131	143
WHEAP (WI Heating & Energy Assistance)	1,753	1,472	1,751

*A proclamation by the Governor declared Economic Support Specialist and Case Manager week. This is a good time to review recent history and how Economic Support has shown the high productivity of public employees. It had been determined that the work currently done by County employees in every County in Economic Support would be transferred to the private sector. A private provider had been operating statewide for a few years and the transfer was almost ordered by the state. However, study of work being done proved that County Employees were producing significantly more than the private provider. In addition, the accuracy of the work by the County far surpassed that of the private provider. There was still some consideration of making the transfer, but then came the final measure. The County was less expensive. So, more work, better quality, and greater cost effectiveness was shown--not by opinion, public pressure, or politics, but by cold, hard facts. All public employees, and certainly the public, owe a thank you to Economic Support for proving the worth of the public employee.*

**General Operations**

Approximate totals: budget, \$8.8 million; County funds, 3.6 million; number staff, 70; number of revenue sources, 40; number of vendors, 122; funds expended through Departmental authorizations, about 50 million. Qualified personnel provide emergency response 24 hours a day, with specific services listed above in direct service categories.

<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
After-hours Emergency Service Contacts	136	138	133

**POLK COUNTY DEPARTMENT OF HUMAN SERVICES**

Government Center, 100 Polk County Plaza #50, Balsam Lake, WI 54810 (715) 485-8400

April, 2015

**Behavioral Health Outpatient**

People are assisted in living a productive life by Mental Health and Substance Abuse assessment and therapy. Clinical supervision is provided, as well as direct Psychiatric services and medication management. Individual and group therapy is utilized. Collaboration with private and other public services is a major component of operations.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Psychiatry/Medication Management		231	310	318
Outpatient Recipients		284	275	344

*The future of Family Care Organizations (Community Care Connections of Wisconsin) and IRIS in our area, is still uncertain in the State budget proposal. The Governor's initial proposal transferred operations to state wide private organizations; opponents have argued to leave the system as it now exists; and possible compromises are many. Reasons given for changes in the programs are that they absorb 40% of Medicaid funding in the state and the number of participants has quadrupled in less than 10 years. Changes would impact the Department because the participants in the program are individuals receiving Long Term Support Services and the provision of the services to these people, many of whom receive services through the County also, has a impact upon our services.*

**Behavioral Health Adult Protection**

Reports of adult abuse or neglect are investigated. Long term services provide support for adults challenged in living in the community. Institutional placement review, Payee, and Guardianship assistance is provided. Emergency services are available 24 hours a day.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Reports		19	20	25
Investigations		4	6	8
Emergency Detentions		6	9	10
In-Home Support Recipients		159	203	248
Out-of-Home Placements		20	20	26

**Children and Family Protection**

Reports of children in unhealthy or unsafe conditions are investigated. When appropriate, action is taken, and children may be removed from the home until safe conditions are assured. Supportive services are provided to assist families in assuring the health and safety of the children. Families with a child with severe needs may also receive services.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Reports		73	76	86
Investigations		15	17	18
In-Home Support Recipients		108	112	102
Out-of-Home Placements		39	22	26

**Children and Family Treatment**

Children and Youth that have mental health, substance abuse problems, and/or have delinquency behaviors are treated by the Department if age 17 or under. Services are with the family and in the community, or in treatment facilities. Safety of the individual, the family, and the community is of high priority.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Intakes		13	15	12
In-Home Support Recipients		55	58	65
Out-of Home Placements		8	8	11

**Economic Support**

Economic Support helps families in need become self-sufficient by determining eligibility for programs to assist through difficult times and by referral to other resources. Referrals are to a wide variety of job related and/or assistance programs.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
Food Share Recipients		4,559	5,209	5,323
Medical Assistance		7,975	8,202	8,456
Child Care Assistance		98	131	143
WHEAP (WI Heating & Energy Assistance)		1,785	1,472	1,751

*A requirement that the State study a merger of Income Maintenance programs and Aging and Disability Resource Centers was added to the State budget proposal. In our area, this would involve the Great Rivers Consortium, in which Polk County participates for Economic Support, including Income Maintenance services, and the County County based ADRC. This study would be designed to be completed by April 1, 2016. This addition to the budget has not been explained; however, most studies ordered in this manner are summarized in the budget and the State has to then develop the actual plan.*

**General Operations**

Approximate totals: budget, \$8.8 million; County funds, 3.6 million; number staff, 70; number of revenue sources, 40; number of vendors, 122; funds expended through Departmental authorizations, about 50 million. Qualified personnel provide emergency response 24 hours a day, with specific services listed above in direct service categories.

	<u>monthly average</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
After-hours Emergency Service Contacts		140	138	133



## MINUTES

**Health and Human Services Board**  
Government Center, Conference Room A & B  
Balsam Lake, WI 54810  
10:00 Tuesday, July 14, 2015

**Meeting called to order by Committee Chair, Pat Schmidt @ 10:02 AM.**  
**Members present**

Attendee Name	Title	Status
Pat Schmidt	Chair	Present
Marvin Caspersen	Vice Chair	Present
John Bonneprise	Supervisor	Present
Dean Johansen	Supervisor	Present
Joe Demulling	Supervisor	Absent
William Alleva	Citizen	Present
Dr. David Markert	Citizen	Present
Pamela DeShaw	Citizen	Present
Dr. Arne Lagus	Citizen	Present

Also present Tammy Peterson, Executive Secretary, Dana Reese, Director of Golden Age Manor, Gene Phillips, Director of Human Services and Gretchen Sampson, Director of Public Health.

**Approval of Agenda-** Chair called for a motion to approve agenda; **Motion** (Caspersen/Bonneprise) to approve agenda. Motion carried.

**Approval of Minutes-** Chair called for a motion to approve the minutes of the May 12<sup>th</sup>, 2015 meeting. **Motion** (Markert/ Alleva) to approve the minutes. Motion carried.

**Public Comment** - None

### **New Business**

Director of Golden Age Manor, Dana Reese discussed and answered questions on the Medicare and Medicaid services rating.

Director of Human Services, Gene Phillips distributed notes for discussion on the evaluation on the Family Support program. Discussion included programs, type of services, monthly average, accomplishments, challenges and budget.

Director of Public Health, Gretchen Sampson provided handouts and covered several topics such as: midyear progress on the 2013-2016 strategic plans, results from the 2014-2015 customer satisfaction survey, update on SHOW project, and 2014 annual report.

Ms. Sampson stated the legislative event will be held on Monday, July 20<sup>th</sup> in New Richmond.

**Future Agenda Items** – Next meeting August 11<sup>th</sup>, 2015, Public Health will choose the next program evaluation, budget, staffing issues and audit report.

**Adjourn – Motion** (Bonneprise/Markert) to adjourn. Meeting adjourned 11:54 a.m.