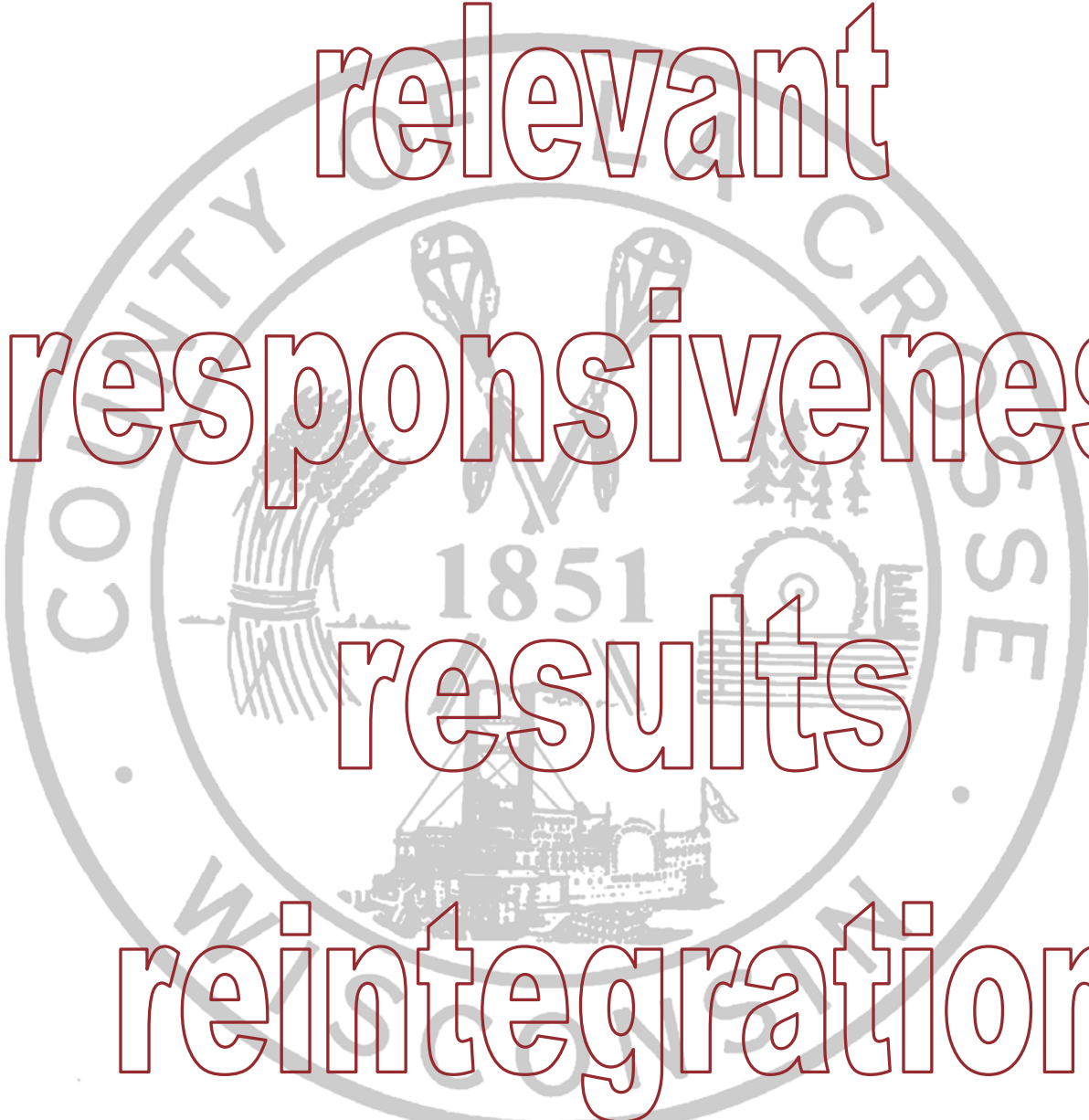


# Human Services Department

2009

## Annual Report



relevant  
responsiveness  
results  
reintegration

[www.co.la-crosse.wi.us/humanservices/](http://www.co.la-crosse.wi.us/humanservices/)

County of La Crosse,  
Wisconsin

Mission Statement  
Human Services  
Of La Crosse County

*Enhancing self-sufficiency  
and  
quality of life  
with respect  
for the dignity  
of the person served.*

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responsiveness

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# Director's Executive Summary

The full impact of the nation's economic recession was felt by all segments of the public sector in 2009. As a result of a depressed economy, human services agencies normally see a significant increase in the demand for services while at the same time experiencing severe cuts in federal, state and local funding. The term a "new normal" became the buzz word in 2009 across the nation as people began to deal with the reality of higher unemployment rates and less availability of government services due to decreased tax revenues.



The Human Services Department in La Crosse County saw the economic crisis as an opportunity to "reinvent" many aspects of our service delivery. As can be seen in this report, our Clinical Services Section had the most significant "face lift" with a great deal of public, consumer and staff input in creating the new section of "Mental Health Recovery Services." A new manager was hired for the section. Matt Strittmater started his duties as section manager in 2009. With a new organizational structure for the section, several new supervisors also came on board. The hiring of the first prescribing nurse practitioner, Deb Day, was a significant improvement in the availability of psychiatric services to the county's customers of mental health services.

Public input from many aspects of the community and the region was given with the planning and development of the mental health Crisis Assessment, Recover and Empowerment (CARE) Center. Tellurian, a company based in the Madison area, was chosen as the provider for the crisis center in 2009 and final pieces were put together to make the CARE center a reality in addressing the need for crisis psychiatric and detox services in 2010.

Please see the Mental Health Recovery Service web site at: <http://www.co.la-crosse.wi.us/HumanServices/CS/index.htm> for more information on the transformation of mental health services in the county and the development of the CARE center.

Likely no one section had greater impact from the recessed economy than Economic Support. Caseloads continued to rise in 2009 even with the State Department of Health Services taking over some of the functions of centralized eligibility. Planning began this year for a regionalized Call/Change Center in Western Wisconsin with eight counties seeking a new model of addressing caseload sizes and decreased state and federal funding. The goal is to have this regionalized Call/Change center operational in mid 2010.



The Wisconsin Works (W2) program also began to see significant changes in 2009 due in part to the economy and also with philosophical changes in the program with the new Department of Children and Families. Due to these changes, the Human Services Department began planning on how to address the staffing needs to be able to meet the program requirements of the state in outcomes expected with the W2 contract. The goal is to have discussions with the state and begin some new staffing patterns and programs in assisting people to find employment in 2010 as well as continue in meeting program outcome requirements of the state.

# Director's Executive Summary

The Economic Support Section also was involved in assisting the state determine eligibility for the expansion of the Badger Care Program for Childless Adults. The state's estimate of those who would be eligible was lower than what actually took place and counties took on extra duties to move this program forward in 2010.

For more information on the programs provided in Economic Support, please view our entire report on line or visit the web site for this section at <http://www.co.la-crosse.wi.us/HumanServices/es/index.htm>

**BADGERCARE+**



The Aging and Disability Resource Center of Western Wisconsin (ADRC-WW) began its first full year of operation as a regional Resource Center for 4 counties in the Western region - La Crosse, Monroe, Vernon and Jackson. Due to a great deal of planning and coordination, this transition to a regional operation has been a success. A great deal of thanks goes to all of the staff in each of the counties for working through the coordination which was needed in training, Information Technology, staffing, etc.

To see more information on the ADRC-WW, please visit the web site at: <http://www.co.la-crosse.wi.us/HumanServices/ADRC/index.htm>



In Family and Children's Section, the county was excited that a program called Alternative Response in child welfare was passed in the Governor's biennial budget. The Department began the process of working on a proposal to pilot the Alternative Response program in La Crosse County to begin mid year in 2010. Please visit the Family & Children's website at <http://www.co.la-crosse.wi.us/HumanServices/fc/docs/childprotection/index.htm> for more information on Alternative Response and our county's proposal.

The state Department of Children and Families began planning for the next round of Child and Family Service Reviews (CFSR) with the federal government in the Spring of 2010. La Crosse County was chosen to be one of the counties to be part of this federal review of 45 federal indicators of outcomes for children and families in the child welfare system. At the time of writing this report, La Crosse and 3 other counties in Wisconsin (Sauk, Columbia, and Milwaukee) completed their CFSR and preliminary results have been posted on the Family & Children's website at <http://www.co.la-crosse.wi.us/HumanServices/fc/docs/childprotection/index.htm>.



The Director of Human Services was asked to be involved in a review of the Juvenile Correctional Institutions in Wisconsin during the summer of 2009. The state Department of Corrections is faced with the potential of needing to close or downsize one of the JCI's in the state. They were looking for input from counties to begin this planning. La Crosse County's Juvenile Detention Facility has also seen a significant downsize in

# Director's Executive Summary

utilization over the past year, likely due to the fiscal issues counties are experiencing. The Department began the process of looking at future design and scope of our Juvenile Detention Facility. For more information on all the services provided through our Family and Children's Section please go to our web site at <http://www.co.la-crosse.wi.us/HumanServices/FC/index.htm>



In 2009, the Department merged the substance abuse services with the Justice Sanctions section, which includes the OWI and Drug Courts. One reason for doing this was to have consistency in philosophy and practice throughout the substance abuse services. The Section also planned a name change to "Chemical Health & Justice Sanctions".



The Woman's Community Based Alternative to incarceration had its first full year as well as a move to its permanent location. The transition to the new location has gone well. For more information on all the services provided through our Chemical Health & Justice Sanctions Section please go to our web site at: <http://www.co.la-crosse.wi.us/HumanServices/JS/index.htm> .

Finally, as Director of the Human Services Department for the past twelve years, I regret that I will be leaving the county in the summer of 2010 to take a position with the State of New York. I have totally enjoyed my years in this community as well as the State of Wisconsin. We have much to be proud of. I believe we have been a good example of "the best in public services" for many years. I wish you all the best in your futures.

Feel free to email us anytime at <http://www.co.la-crosse.wi.us/HumanServices/hsfeedback.htm>. Please review the entire annual report at <http://www.co.la-crosse.wi.us/HumanServices/reports.htm>.

Part of our core values is to be responsive to community needs and relevant to each of our stakeholders. We need your voice to be able to do this. We look forward to hearing from you!

Gerald Huber, Director



# Director's Executive Summary

**MENTAL HEALTH RECOVERY SERVICES Goal:** Through regular utilization reviews of all out of home placements, we plan to continue to assist the Community Support Program (CSP) to serve at least 90% of their consumers in the community in natural living environments (less that a 10% placement rate).

**PROGRESS TOWARD GOAL:** 9.7% of CSP consumers were in a residential placement as of April, 2009. 8.1% of CSP consumers were in a residential placement as of July, 2009. 8% of CSP consumers were in a residential placement as of October, 2009 even though the size of the program has increased. The Utilization Review team at the county continues to assist in determining less restrictive options when appropriate.

**ECONOMIC SUPPORT GOAL:** Meet the W-2 Performance Standards to assure we earn the Right of First Selection.

	<b>W-2 Performance Standard</b>
Entered Employment Placement Rate	35%
Wage at Employment	\$7.82
W-2 Informal Assessment Standard	95%
W-2T Formal Assessment Standard	95%
Basic Education Activities	65%
SSI SSDI Receipt 12 months	30%
SSI SSDI Receipt 24 months	45%

**Performance Measurement Data:** La Crosse County was awarded the Right of First Selection for the 2010-2011 W2 contract based on meeting benchmarks set for the above Performance Standards. La Crosse County's proposal for the 2010-2011 W2 contract has been approved by the Department of Children & Families (DCF). The county continues to meet the benchmarks set by DCF for this contract period.

**AGING & DISABILITY RESOURCE CENTER -WW GOAL:** The ADRC of WW will improve its rural outreach to include new methods in the expanded counties to reach 100 individuals in face-to-face outreach activity in the first year to inform them of services and assistance available.

**Performance Measurement Data:** This has been completed but will continue more outreach throughout the year too.

**FAMILY & CHILDREN'S GOAL:** Meet federal and state requirements of the Child & Family Service Reviews (CFSR) and the state's Quality Services Review of 2008 and report on these outcomes quarterly to the Health & Human Services Board.

**Performance Measurement Data as of September 30, 2009:**

<b>CFSR Performance Measurements</b>		
	<b>Federal Benchmark</b>	<b>La Crosse County</b>
Time to Reunification	76.2% or more	75%
Re-Entry into Out-of-Home Care	8.6% or fewer	9.09%
Placement Stability	86.7% or more	86.58%
Median Length of Stay (State standard only, not federal)	24 months or fewer	11.7
Recurrence of Maltreatment	6.1% or fewer	0%
Maltreatment in Out-of-Home Care	0.57% or fewer	0%
Time to Adoption	32% or more	100%

# Director's Executive Summary

**CHEMICAL HEALTH & JUSTICE SANCTIONS GOAL:** In 2009, each participant in the Women's Community Based Program who is referred to various aspects of treatment will complete a minimum of 50% of these program requirements.

**Progress toward Goal:** Participation in program requirements remains at almost 100%. The groups within the Women's residence are very popular and the women report learning a lot and enjoying presentations and participating. Thirty-six (36) women have participated since the residential portion of the program opened in November 2008 through September 30, 2009. Eleven (11) women completed the program between June 30, 2009 and September 2009, seven (7) successfully transitioned to the community. Four (4) of those 11 were unsuccessful. Successful completion in this quarter is 64%. As of September 30, there were 4 residents and 5 more were pending who moved in to the residence early in October.

**ADMINISTRATION GOAL:** The Department will develop policies and plans to assure compliance with the 2008 fiscal audit findings and continue "benchmarking" fiscal goals for the Department.

**Progress toward Goal 1:** Purchasing and Contracting Ordinances have changed. Internally our policy has been updated to reflect these changes. All supervisory staff have been trained on these policies. The Department has worked extremely closely with the Finance Department on responses to audit concerns within the Comprehensive Community Services (CCS) program. Through staffing decisions, the Department has emphasized Quality Control standards within CCS and other Medicaid funded programs. Audits conducted this quarter show significant gains in most areas of concern by the auditors.

Please continue to check our Department web site at the link posted below for updates on initiatives.

[Welcome to La Crosse County Human Services](#)

La Crosse County  
Human Services  
*"The Best in Public Service"*

## Contracted Services\* 2009

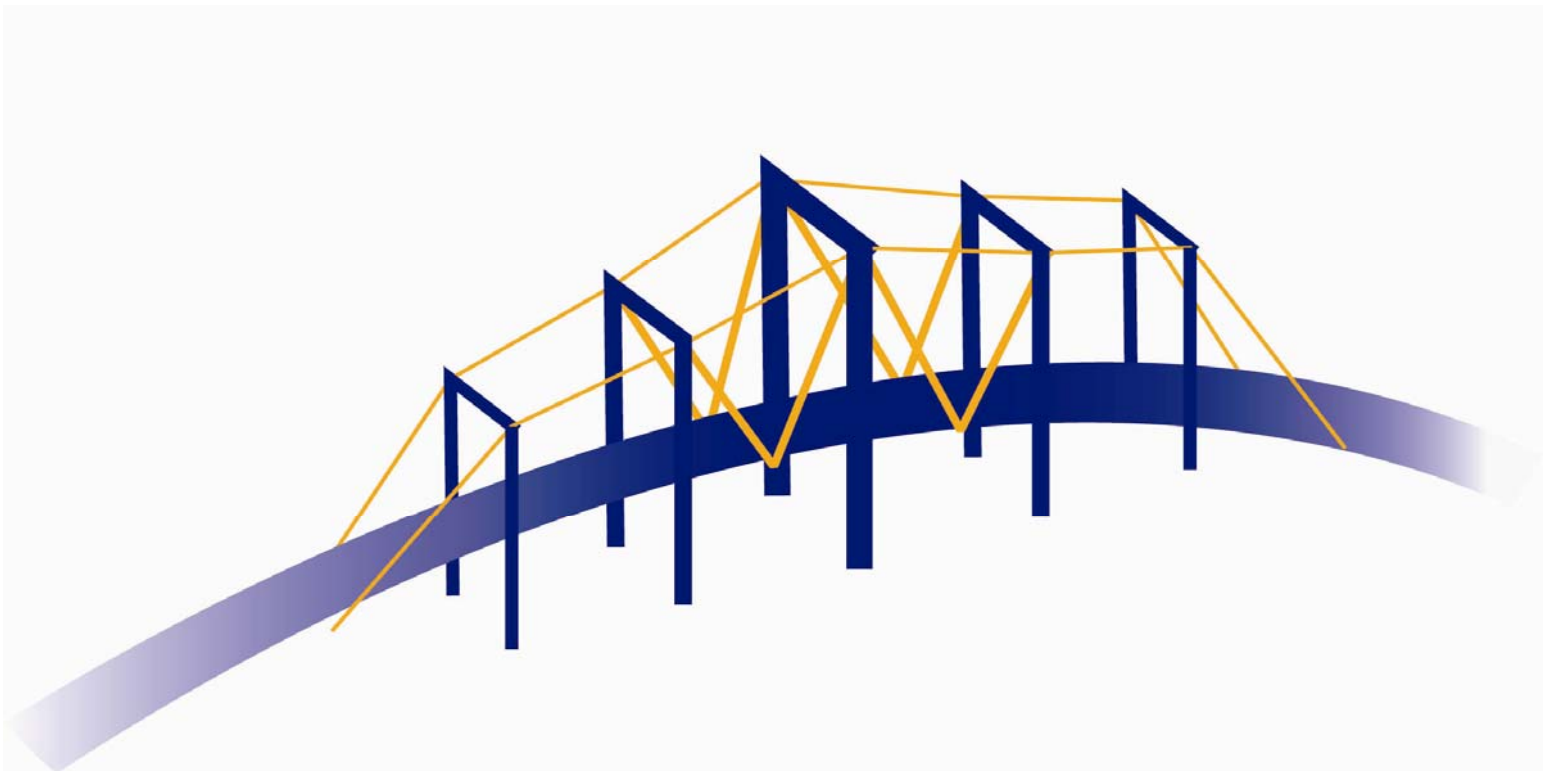
Abby Vans	Gundersen Lutheran Medical Center
Adams & Associates LLC	Hoffe Counseling
Amherst H. Wilder Foundation aka Bush Residential Services	IMED Mobility
Assisted Care, Inc	Independent Living Resources
Attic Correctional Services	Integrated Development Services
B-Care Corporation	Lily Lake Adult Family Homes aka Stateline Mental Health Care LLC
Beyond Boundaries of Autism	Lori Knapp Inc
Candlelight Vision Corp.	Lutheran Social Services of WI and Upper MI, Inc.
Caring Hearts Home Care & Transportation	Midwest Monitoring
Catholic Charities	Mille Lacs Academy
Chileda	North West Passage
City of La Crosse/MTU/First Student	Northfield Center
Clinicare Corporation	Reaching Your Potential
Cottonwood Group Homes Inc	Riverfront Inc.
Coulee Children's Center	RSVP
Coulee Council on Addictions	Salvation Army
Coulee Youth Centers	St. Clare Health Mission
Domestic Violence Intervention Project	Stein Counseling and Consulting
Elmore Academy	Teipner Treatment Homes inc
Family & Children's Center	Tomorrow's Children Inc
Family Resources	Trempealeau County Healthcare
Family Works Program Inc	Wisconsin Early Autism Project
Fly Horse Stables	Workforce Connections inc
Franciscan Skemp Healthcare	YWCA of the Coulee Region

\* Services over \$25,000

Mission Statement  
The Aging & Disability Resource Center of  
Western Wisconsin  
*La Crosse County*

Providing information and assistance in accessing benefits and services to adults and families relating to aging, disability, mental health or substance abuse.  
Promoting the rights, dignity and preferences of the individual to enhance self-sufficiency and quality of life.

Dean Ruppert, Operations Administrator



ADRC-ww

## The Aging & Disability Resource Center of Western Wisconsin

608.785.5700

800.500.3910

An Aging and Disability Resource Center of Western Wisconsin (ADRC-WW) social worker received a referral on an 84 year old gentleman who had been attending a meal site. The referring source reports this individual was attending the meal site smelling of urine and feces to the degree that no one wanted to sit next to him. Staff at the meal site did not want to alienate him because he was a regular and had been coming every day of the week. However, the meal site staff felt that others were being negatively impacted by his poor hygiene. He did have past contact with the ADRC-WW which at the time he had refused to let the ADRC-WW social worker into the home.

Because of the details of the situation, Adult Protective Services (APS) and the Health Department were also consulted and attended the appointment with the ADRC-WW social worker. The ADRC-WW social worker found the house to be in extreme clutter and dirty. The status of the home was so bad it was in jeopardy of being condemned. The Health Department informed the gentleman he would need to work with the ADRC-WW and allow someone to come into the home to clean. He did agree to the cleaning after several meetings with the social worker, only if they were present when the cleaning agency arrived. The consumer had very limited income, however was just over assets for Managed Care Organization (MCO) or IRIS (Include, Respect, I Self-Direct). He chose not to spend down at the time.

The social worker was able to arrange funding through the Aging Unit and APS to help pay for the dumpster and clean up. Initially the ADRC-WW was able to coordinate with the bank on what repairs could be done within the consumer's budget to keep the house from being condemned. In the process of cleaning, the couch and stove had to be thrown. An ADRC-WW staff member donated a couch. A stove was donated through La Crosse Needs. The stove was delivered by the Salvation Army.

The consumer was able to remain in his own home due to the collaboration of services arranged by the ADRC-WW. His home was set up so it was safe and healthy for him to stay there, which was his preference and wish. He is now quite proud of his home and very happy to still be living there.

The Aging and Disability Resource Center of Western Wisconsin provides a place for the public to get free, confidential, accurate and unbiased information on all aspects of life related to aging or living with a disability in the counties of Jackson, La Crosse, Monroe and Vernon. The ADRC-WW specializes in topics relating to aging, a developmental or physical disability and mental health or substance use issues for adults age 18 and over. Staff from the ADRC-WW can provide advocacy and information about the variety of services available in the community, assistance in applying for public benefits and screening/enrollment into the managed care organization or IRIS, a self-directed supports federal waiver.



Information and assistance provided by ADRC-WW staff is specifically tailored to each person's situation and needs. The service of providing information and assistance can be as brief as answering a one-time question or as comprehensive as assisting an individual or family through the many steps of planning for a long-term care condition over the span of the person's disabling need.

The concept of a regional ADRC is exciting as all four counties are able to offer thorough and complete information to the residents of our region. 2009 was the first full year the ADRC of Western Wisconsin was in operation as a four-county partnership. The sharing of knowledge and experience benefits all four offices by allowing quality and consistent information to help all consumers and families who approach the ADRC-WW. Consumers and families are able to go to any ADRC-WW satellite office per convenience, located in Black River Falls, La Crosse, Sparta and Viroqua.

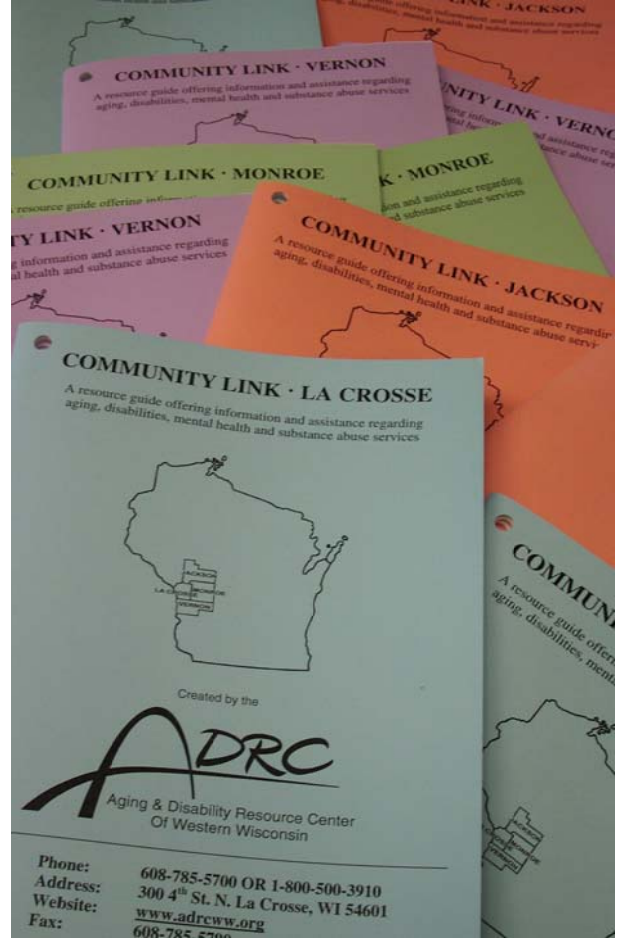




# The Aging & Disability Resource Center of Western Wisconsin

608.785.5700

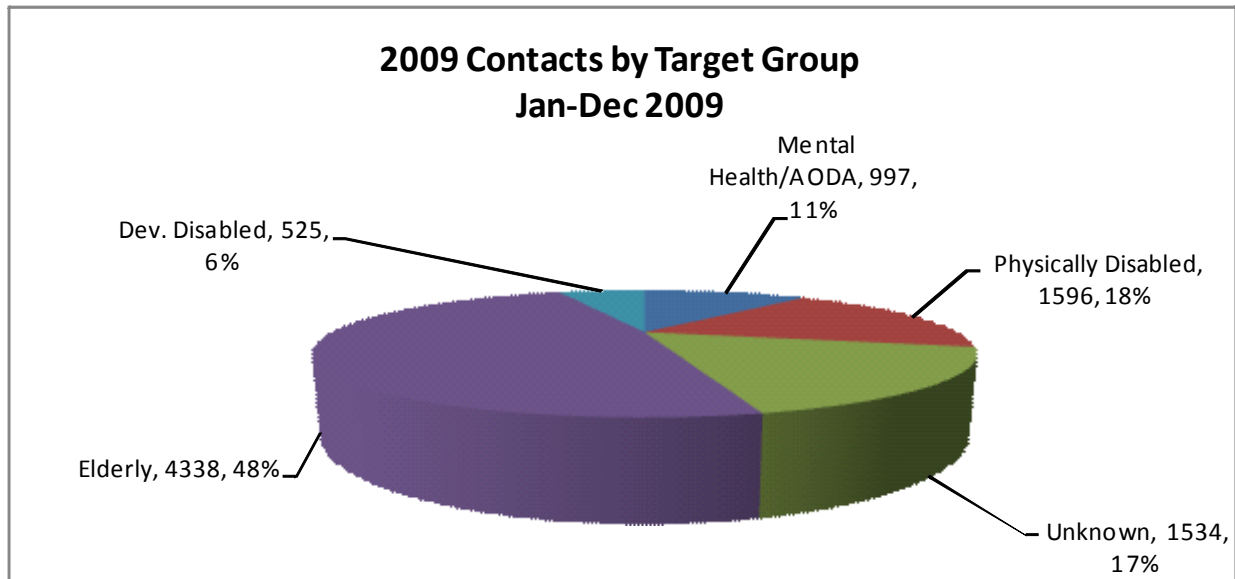
800.500.3910



The Aging and Disability Resource Center of Western Wisconsin offers the following primary services in our four county area:

- Information and Assistance
- Short Term Service Coordination
- Outreach and Public Education
- Benefits Counseling
- Elder Abuse and Adult Protective Service Work
- Prevention and Early Intervention
- Long Term Care Options Counseling
- Pre-Admissions Consultation
- Access to Publically Funded Long Term Care Programs and Services
- Community Needs Assessment Services
- Advocacy

Visit the Aging and Disability Resource Center of Western Wisconsin's WEB site at:  
<http://www.adrcww.org>



Mission Statement  
**Chemical Health & Justice Sanctions**  
*of La Crosse County*

Enhancing individual recovery and public safety  
through effective community collaboration.

Jane Klekamp, Manager



Chemical Health &  
Justice Sanctions

## 400 fourth street north . La Crosse WI 54601

"Laura" recently spent 90 days in the Women's Community Based Program (WCBP) at 127-129 South 7<sup>th</sup> Street. During that time, she was given the opportunity to participate in classes on issues ranging from health to domestic violence, substance abuse and the effects of trauma. Why was this opportunity important for Laura? The following background information gives some insight into the issues commonly faced by women in jail.

Since 2000, Laura has been incarcerated 27 times in the La Crosse County jail for a total of 453 days, equating to an annual average of 41 days. The shortest period of time she was incarcerated was 11 minutes, the longest 110 days. In 2008 she was incarcerated seven times, in 2009 she was incarcerated on seven more occasions.

Laura would indicate she has been in jail almost 30 times due to alcohol use, however, she has convictions in Wisconsin for disorderly conduct, OWI 2<sup>nd</sup> offense, and five theft related charges. While alcohol played a significant part in her life and for crimes she was convicted of committing, she also has issues with maintaining employment and having a stable residence. As with many of the women, she was involved in relationships that are unhealthy and reinforce poor choices she makes about drugs and alcohol. While she was at the WCBP, Laura received education and support for making better choices. While we don't know if Laura has learned and integrated every skill necessary for her to remain out of jail, we will continue to monitor the progress over time of all the women at the WCBP.

Laura is very positive about her future. She felt the greatest benefits of the program were "(support) meetings and volunteers in the house, along with the sober living experience". Her goal is to stay sober for her son and her job. Talking about her experience, she was pleased there has been no alcohol consumption since leaving the WCBP, even at a going away party.

In 2009, the Women's Community Based Program housed 29 women for a total of 42 stays. There were a total of 2,069 bed days saved, or 5.7 bed days were saved on a daily basis. For the 29 women who participated in the program, they had an accumulated total of 274 previous incarcerations prior to admittance in the women's program, an average of nine prior incarcerations for each participant.

### Treatment Courts and Chemical Health

The year 2009 was a significant time of change for Justice Sanctions. In July, the county substance abuse providers meshed with Justice Sanctions to become Chemical Health and Justice Sanctions. This allowed for better communication and work flow between the treatment courts, substance abuse assessors, and treatment providers which allows for improved services for clients. Previously, clients were assessed separately by Justice Sanctions staff and assessors in Clinical Services. The current model is to complete one combined assessment and treatment plan which will be utilized by the Drug Treatment Court and the OWI Treatment Court.

Along with the staff change, budgetary modifications were made, reducing the overall treatment budget. This budget modification allows staff and supervisors to become more creative when funding effective treatment for clients, focusing on outpatient treatment and outreach services.



### Sentenced Clients and Bail Monitoring

Sentenced clients and bail monitoring continue to provide the jail reduction days that are so important to the program. Staff work to provide the courts with timely and helpful information for each decision making point. The Transition from Jail to Community (TJC) Initiative is providing technical assistance to La Crosse County in reviewing and modifying the existing structure

## Chemical Health & Justice Sanctions

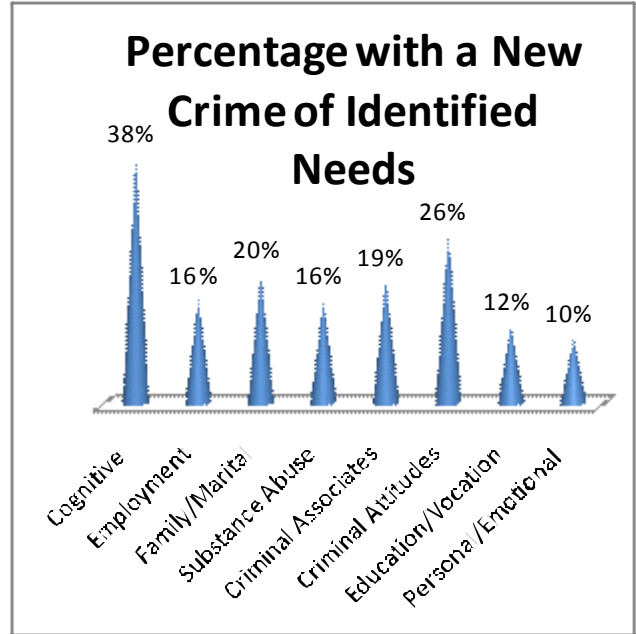
608.789.4895

### Transition from Jail to Community (TJC) Initiative

In July 2009, La Crosse County received a technical assistance grant from the Urban Institute to provide information and guidance on providing enhanced services to those leaving the jail to return to live with us in the community. The vast majority of incarcerated people are released into the community after a short period of time.



The TJC Initiative is giving La Crosse County assistance on how to provide services for people incarcerated for 10 minutes or two years. Jail staff, community agencies, county board supervisors, and Chemical Health and Justice Sanctions staff have been working together on this initiative which will be providing assistance until 2011.



### AIM (Assess, Inform, and Measure) Project

The AIM Project is supported by the Supreme Court of Wisconsin to assist counties in developing a feedback loop regarding judicial decisions. In 2009, 749 reports were entered into the State database. The following are some of the pieces of information La Crosse County has access to from the database.

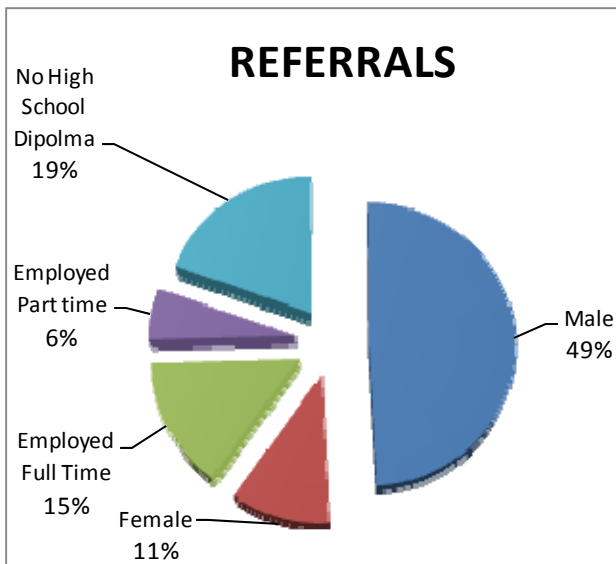
#### Referrals

- 83% or 620 were male
- 17% or 129 were female
- 24% or 181 were employed full time
- 10% or 72 were employed part time
- 32% or 239 did not have a high school diploma

#### Identified Needs Percent with a New Crime

Cognitive	38%
Employment	16%
Family/Marital	20%
Substance Abuse	16%
Criminal Associates	19%
Criminal Attitudes	26%
Education/Vocation	12%
Personal/Emotional	10%

The information above demonstrates the highest programming priority would be cognitive behavioral programming, which would focus on the cognitive, criminal associates, and criminal attitudes needs that were identified.



## 2009 Statistics

# CHEMICAL HEALTH

&

# JUSTICE SANCTIONS

# PROGRAM AREAS

BAIL MONITORING

AODA SERVICES

DRUG TESTING

TREATMENT COURTS

DOMESTIC VIOLENCE  
COURT

WOMEN'S COMMUNITY  
BASED PROGRAM

SENTENCED CLIENTS

CHEMICAL HEALTH

Bail Monitoring	2009 Annual Total
Total Participants	2053
New Screenings	668
Successful Complete	346
Unsuccessful	245
Unsuccessful-abscond	34
Unsuccessful -alcohol use	51
Unsuccessful-drug use	33
Unsuccessful-non comp	37
Unsuccessful-re offend	46
Unsuccessful-other	45
Did Not Participate	78
Pending	187
Continue to Next Month	1393
Monthly Total	43,411
Average clients/day	118.75

OWI Irresponsible Users	2009 Annual Total
Total Participants	169
Successful Completion	64
Unsuccessful	10
Did Not Participate	21
Continue to Next Month	74
Total EM Days	980
Avg bed days saved/day	2.5

Sentenced	2009 Annual Total
Total Participants	1,303
New Screenings	471
Successful Complete	320
Unsuccessful	133
Unsuccessful-abscond	29
Unsuccessful -alcohol use	17
Unsuccessful-drug use	15
Unsuccessful-non comp	27
Unsuccessful-re offend	14
Unsuccessful-other	26
Did Not Participate	21
Pending	61
Continue to Next Month	830
Monthly Total	26,047
Average clients/day	71.33

OWI Court	2009 Annual Total
Total Participants	1539
New Screenings	161
Successful Complete	79
Unsuccessful	52
Unsuccessful-abscond	13
Unsuccessful -alcohol use	0
Unsuccessful-drug use	0
Unsuccessful-non comp	2
Unsuccessful-re offend	2
Unsuccessful-other	33
Did Not Participate	9
Pending	7
Bed Days Used	3,059
Continue to Next Month	1412
Monthly Total (EM)	7,758
Stayed Days (Graduates)	10,899
Avg bed days saved/day	51

Overall Total	2009 Annual Total
Total Days saved/month	91,041
ADP-Jail Reduction	245
Total Number of Clients	6,966

Visit the Chemical Health & Justice Sanction's WEB site at:  
<http://www.co.la-crosse.wi.us/HumanServices/js/index.htm>

Mission Statement  
**Economic Support**  
*of La Crosse County*

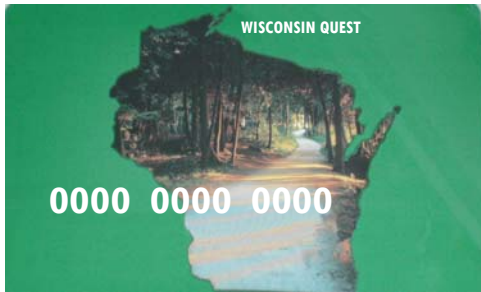
Administering public assistance programs timely and accurately, assisting individuals in the eligibility process as necessary, assisting individuals in moving toward self-sufficiency and treating all customers with dignity and respect.

Lorie Graff, Manager

Economic  
Support



300 fourth street north . La Crosse WI 54601



Michelle, a young mother, came in to seek assistance from Economic Support when she abruptly lost her full-time job. While she needed to replace her income quickly so that she could support her child, Michelle couldn't help but express her discouragement over her circumstances. She thought her job was secure and her boss had consistently praised her work. It was hard for Michelle to understand how things could change so quickly. With her recent layoff - and the slow down in the economy - Michelle not only needed assistance in finding another job, but she also needed support and motivation as she searched for another position.

The Financial and Employment Planner that Michelle met with in Economic Support offered Michelle assistance under the Wisconsin Works (W-2) program. In addition to meeting with her weekly, the worker also assisted Michelle in connecting with other community resources that could help with some of her immediate needs.

During one of the first weekly meetings, Michelle was provided financial assistance for transportation costs. It was suggested that she try the Temporary Agencies to see if they had any connections with the employer Michelle really wanted to work for. As it turned out, they did. Michelle was placed at the company where she had expressed a desire to work. She is now in a long term assignment with a good chance of being hired permanently. Michelle is very happy with her position and making a good hourly wage.



The Income Maintenance (IM) Unit performs responsibilities related to the administration of Wisconsin's IM programs which are defined as: the FoodShare Program and Medicaid. The IM Unit also administers W-2, Emergency Assistance, the Wisconsin Home Energy Assistance Program and the Child Care Subsidy Program. All of these programs are funded with federal and state dollars.

### FoodShare

FoodShare Wisconsin is a federal program for families and single people with little or no income. FoodShare benefits are received monthly and used to buy food at stores using a debit card called the Wisconsin QUEST card. FoodShare Wisconsin is a food and nutrition program designed to help create a healthier Wisconsin.



### Medicaid

Medicaid is a federal/state program that pays health care providers to deliver essential health care and long-term care services to elderly individuals, people with disabilities, low-income families with dependent children, and certain other children and pregnant women. The Medicaid programs in Wisconsin include Elderly/Disabilities Medicaid, BadgerCare Plus and Family Care.



## W-2

W-2 began in 1997 as a replacement program for Aid to Families with Dependent Children. The goal of the W-2 program is to provide necessary and appropriate services to prepare individuals to work. Individuals eligible to receive W-2 may receive cash assistance for a maximum of five years. Case management provides services to assist the individual in obtaining and maintaining self-sustaining employment.



## Wisconsin Energy Assistance Program

This is a federally funded program that provides low income households with an annual payment to assist with their energy bills. In addition, the program provides for emergency furnace repair and replacement, emergency fuel assistance, counseling for energy conservation and energy budgets and pro-active co-payment plans.



## Emergency Assistance

Emergency Assistance (EA) is designed to meet the immediate needs of eligible persons facing a current emergency. The emergency must be due to fire, flood, natural disaster, energy crisis, homelessness or impending homelessness. EA is intended to avoid destitution of a child and provide living arrangements for the child in a home.

# ECONOMIC SUPPORT PROGRAM AREAS

FOODSHARE

MEDICAID

WISCONSIN SHARES  
CHILD CARE SUBSIDY  
PROGRAM

W-2

WI ENERGY  
ASSISTANCE PROGRAM

EMERGENCY  
ASSISTANCE

Visit the Economic Support's WEB site at:  
[http://www.co.la-crosse.wi.us/  
HumanServices/ES/index.htm](http://www.co.la-crosse.wi.us/HumanServices/ES/index.htm)

Mission Statement  
**Family & Children's**  
*of La Crosse County*

Identifying and responding to safety concerns and needs of children, families and community utilizing a family's strengths and team process along with formal and informal supports to improve child, family and community quality of life.

Mary Ellen Prinsen, Manager



300 fourth street north . La Crosse WI 54601

Kate and John have five children which Kate single parents in her home along with two additional children. She expressed a sense of relief and was open to services when the Department became involved after numerous police contacts/welfare checks and referrals for reasons such as neglect, physical abuse and sexual abuse over the last two years. The condition of the home, lack of supervision, domestic situation between Kate and John, lack of follow through with recommended services as well as medical and education care for the children were all concerns.

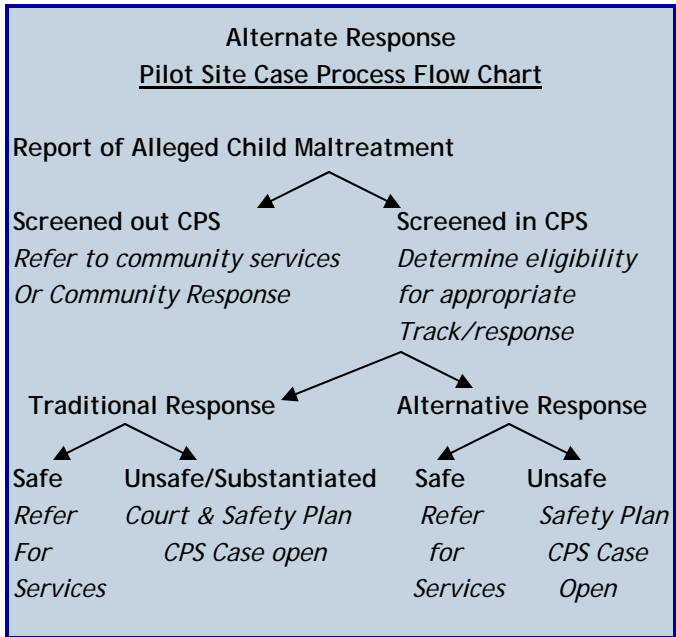
The primary focus offered to Kate by the Department was parent education and support to be better equipped to control the activities in the home, maintain a clean, stable and safe home and create consistent routine, home rules and support for the children. It was also recommended she take an active role in the medical, educational and therapeutic care of the children.

Kate has made tremendous progress towards the goals she agreed to and the court ordered conditions. The changes in her parenting and overall environment in the home have been positive. She is actively involved in all aspects of the children's lives provides adequate supervision and has successfully established routine and cohesion. She has implemented daily schedules, chores, activities, rewards and consequences for the children. More importantly, she has followed through with these things over a period of time.

Kate has been working with service providers and she is more involved in meeting her children's needs. She actively communicates with school and encourages the children to be involved in extracurricular school activities. Additionally Kate sought and secured a restraining order against John and actively pursued ongoing divorce proceedings. Doing so has empowered Kate and enabled her to focus on her children.



Family & Children's Section provides services to children and families that are encountering significant difficulty in their daily living. The section provides Child Protection Services, Juvenile Justice Services, Children's Mental Health Services, and services to children with physical, emotional and developmental disabilities. We continue to be one of the few counties in the state that has all of children's services under one umbrella. Services are provided within the context of state and federal mandates, Wisconsin Statutes, and the mission of the Department.



**Alternative Response**

La Crosse County Human Services is one of five counties chosen to pilot Alternative Response in regards to child protection cases in La Crosse County. La Crosse was awarded a grant to implement this two track system to respond to allegations of child abuse and neglect combining the existing system of traditional investigation with Alternative Response for moderate to low-risk cases.

Over the next year the unit will be participating in trainings to implement Alternative Response, working with the state Department of Children & Families to evaluate the method of implementation and gather data to evaluate effectiveness as well as continue to collaborate with the state and other pilot counties on practice issues.

## Family & Children's

608.785.6054

### La Crosse County Family and Children's Section, Comprehensive Child Protective Service System

	Assess for Services	CPS Initial Assessment and Referral	CPS Ongoing Case Management
<b>Child Welfare:</b> Referral was not alleging child abuse and/or neglect (CAN) but was a request for services or Alternative Response on select screened out cases	Refer to Community Resources: Domestic Violence Services, Family Resource Center, St. Clare's Health Mission, Place of Grace, Salvation Army, Private Mental Health Providers or AODA counselors, Children's Miracle Network, Healthy Families; Housing Programs/HUD/CAP, Food Pantries; Refer to Specific Programs: Birth to Three, Family Support, Integrated Services Program, Children with Disabilities (COP/GIP), Juvenile in Need of Protection/Services (JIPS), WIC, W-2 TAB Respite - G/L, Wrap Around funding.		
<b>Low Risk:</b> A CAN referral, unsubstantiated, not open for ongoing	All of the above services and/or programs are possible plus potential short term safety or risk management services	Alternative Response might get involved to link to community/private provider services	
<b>Moderate Risk:</b> A CAN referral may have been unsubstantiated or substantiated with protective parent	All of the above services and/or programs are possible plus potential short term safety or risk management services	Potential short term: Child At Risk Monitoring (Charm), Respite, Child Care, Kinship placement and funding, Wrap around funding during assessment phase only	
<b>Parent Requests Placement</b>	Services may already be provided by Children's Special Needs	Could be opened as a Voluntary Placement	Transferred to ongoing for 6 months of monitoring or formal CHIPS
<b>Significant Risk:</b> CAN case with injuries or safety issues, substantiated with need for control of safety issues	All of the Above ↔	All of the Above ↔	Refer to Specific Programs: In-home Family Counseling, Parent Visitation Monitor, Parent Support Worker, Transportation, Parenting groups, Alternate Care Placement, Court Services (CHIPS), Mediation
<b>High/Severe Risk:</b> CAN case with injuries, multiple uncontrolled safety issues	All of the Above ↔	All of the Above ↔	All of the Above most likely looking at long-term placement and possible alternative permanency plan.



#### Family Resource Liaison (FRL)

Family Resource Liaison receives referrals by parents, community members and local professionals to the Children with Special Needs Unit. Serving as a liaison, the FRL works to maintain and further develop a collection of resources to be shared with families and social service professionals. The initial meeting with the family is to discuss unmet needs and desired services and typically is a home visit to discuss areas of concern. Based on the needs of the children and family the FRL

will provide information and referrals to community resources and county supports. Each family can determine the length and extent of the FRL's involvement, ranging from a one-time link to resources to an on-going relationship providing support and further connection to services. In addition, the FRL is available to support families at school, medical and other relevant appointments.

These services are available for children who are La Crosse County residents and under the age of 17 years. Specific eligibility requirements can be found under each program on the Family & Children's website. The financial support for these services comes from a combination of federal, state and county sources. Additionally, strong emphasis is placed on soliciting informal community assistance to help support families. Some programs require a parental cost share for services.

## **CHILDREN'S ALTERNATE CARE & DISABILITY SERVICES PROGRAM AREAS**

ALTERNATE CARE

RESPIRE

FOSTER CARE-EMERGENCY ON CALL

FOSTER CARE TRAINING

KINSHIP

CHILD CARE PROTECTION

BIRTH TO THREE(B-3)

FAMILY SUPPORT AUTISM BENEFIT

NEURO DEVELOPMENT

MEDICAID WAIVERS

CATHOLIC CHARITIES

SUSTAINING CARE

TREATMENT FOSTER CARE

DATA RESOURCES INC/INDIVIDUAL

SERVICE AUTHORIZATION

PARTNERS IN ALTERNATE CARE

EDUCATION (PACE) - FOSTER PARENT

TRAINING



## **DELINQUENCY & JUVENILES IN PROTECTIVE SERVICES PROGRAM AREAS**

HOME DETENTION & GLOBAL POSITIONING  
SYSTEM (GPS)

ELECTRONIC MONITORING PROGRAM  
ASSESSMENT FOR JUVENILE DETENTION  
FACILITY

TRANSPORT FOR ADOLESCENT SERVICES

COMMUNITY SERVICE

RESTITUTION

RUNAWAY BRIDGE

YOUTH AIDS—AODA

FAMILY TRACKING

IN HOME DELINQUENCY

ACUTE PROTECTIVE SUPERVISION  
PROGRAM (APSP)

THINK AHEAD PROGRAM CONNECTIONS

TOUGH CHOICES

SEX OFFENDER ASSESSMENT TREATMENT

LA CROSSE COMMUNITY CONFERENCING

GIRL'S CIRCLE GROUP

RESPIRE

EXCESS ABSENCES

REALITY CHECK

DELINQUENCY PREVENTION EDUCATION

300 fourth street north . La Crosse WI 54601

**JUVENILE JUSTICE ACUTE PROTECTIVE SUPERVISION PROGRAM (APSP)**

A five year summary of the APSP found it to be successful at reducing delinquency and saving La Crosse County substantial dollars in alternate care funds. This program was implemented to service youth who are adjudicated delinquent and are considered moderate to high-risk for out-of-home care, correctional placements or unable to remain in placement within La Crosse County.

A review of the outcomes suggest both youth and community benefitted from the program. Intervention by law enforcement, social workers and the courts was reduced, which saved time and money that would be required to process these cases The community profited by having less crime (repair, restitution and taxes) as well as less victims (injury and harm).

The youth improved educationally, socially and personally. Their competency increased providing a healthier and more productive lifestyle.

***CHILD PROTECTION AND OTHER  
CHILD WELFARE SERVICES  
PROGRAM AREAS***

DOMESTIC VIOLENCE LIAISON/PROGRAMS

ADULT AODA SCREEN

W-2 LIAISON

CHILD AT RISK MONITOR (PATH)

FIT (FAMILY INTERVENTION TIME)

PARENT SUPPORT WORKER

INTENSIVE IN-HOME

FAMILY INTERACTION PROGRAM

INDEPENDENT LIVING

SERVICES TO PERSON IN TREATMENT

PARENT SUPPORT WORKER (PSW)

***CHILDREN'S MENTAL HEALTH  
& DISABILITY SERVICES  
PROGRAM AREAS***

INTEGRATED SERVICES PROGRAM

CHAPTER 51 CASES

MENTAL HEALTH CRISIS PROGRAM

COMMUNITY INTEGRATION PROGRAM

CHILDREN'S LONG TERM SUPPORT

WAIVERS

AUTISM BENEFIT PROGRAM

FAMILY RESOURCE LIAISON

SUPPORTIVE SERVICE COORDIATOR

PATH

YES YOUTH EMPOWERMENT SERVICES  
PROGRAM

MEDICAID WAIVERS

The Wisconsin Children's Code specifies legal parameters for involvement in families and jurisdiction over children alleged to be in need of protection and services (Chapter 48.13). In addition there are times that we provide services to children, youth and families on a voluntary basis when the child/youth has significant special needs. In order for a child or family to be eligible for services, there must be a concern of abuse or neglect to a child. The Statutory Definition of "abuse" can be found in Chapter 48.02. We provide services to all residents of communities, cities and towns within La Crosse County.

Visit the Family & Children's WEB site at:

[http://www.co.la-crosse.wi.us/  
HumanServices/FC/index.htm](http://www.co.la-crosse.wi.us/HumanServices/FC/index.htm)

Mission Statement  
**Mental Health Recovery Services**  
*of La Crosse County*

Collaborating with the community to ensure  
a continuum of effective Recovery orientated mental  
health services for La Crosse County residents.

Matthew Strittmater, Manager



Mental Health  
Recovery Services

## 300 fourth street north . La Crosse WI 54601

We often hear about changing lives in Human Services. Jean is a living example of this transformation. Jean is a regular consumer in our clinic and recently came to us in distress. Working as a healthcare worker herself Jean often is requested as a home health aide for individuals because of her warm personality and kindness. Jean is also a mother and grandmother and a daughter of an elderly mother. Jean successfully juggles these roles and adds to the life of all those around her.

Jean also has severe depressive episodes and anxiety. She had not seen a primary care provider in over 10 years. One day Jean revealed that she had found herself driving by the river contemplating suicide. Jean did not wish to be in the hospital. She wanted to work with a team in the community, so that is what we did. Our nursing staff set up and coordinated care with St. Clare Health Mission, the prescriber adjusted Jean's medication and our Economic Support Section provided assistance to reduce Jean's financial stress. Jean has agreed that her story can be shared not wanting others to struggle with the pain she had been feeling.



Things have improved in Jean's life. Though some struggles remain she reports she feels happy and able to meet her challenges. Jean is just one life that has been touched by MHRS this year. She has received care, samples of medication, patient assistance and now has a primary health care provider. It is caring for Jean and others like her that helps us know we are making a difference.

The Mental Health Recovery Services section is responsible for the planning, implementation, and coordination of a comprehensive array of services for persons with mental illness. In some instances these are provided by agency staff, but the majority of services are provided via contracts with a number of community agencies, such as hospitals, sheltered workshops, rehabilitation agencies, and private counseling agencies. The section also collaborates with other sections in the provision of protective services to adults who are elderly or disabled.

In both programmatic and client specific issues we utilize Recovery oriented philosophy to guide our thinking. This includes an emphasis on community versus institutional services, care and treatment in the least restrictive setting, early identification and crisis intervention, consumer empowerment, and the right of persons with disabilities to live a life experience fully integrated with others.

The MHRS section is organized into three units:

- Short Term Services / Crisis
- Outpatient Mental Health Clinic
- Case Management Programs



## Mental Health Recovery Services

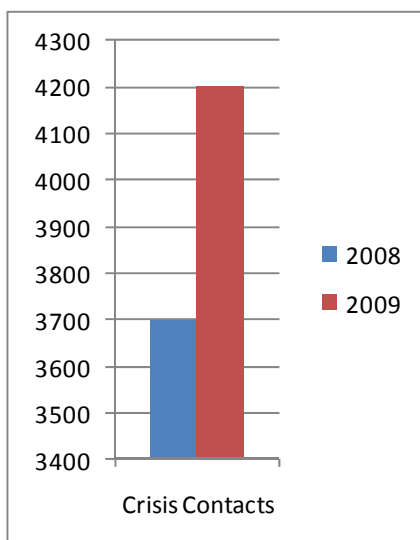
608.785.6101

### SHORT TERM SERVICES / CRISIS

#### Short Term Services

The short term unit offers up to 90 days of service to individuals who are new to the system and may not need longer term programs. They also address the various needs of other consumers that do not fit into standard programs. Other services provided by these staff include Liaison with hospital psychiatric units and Crisis Program on-call and follow-up services. These services are delivered by two social workers and a social service specialist.

**Crisis Program:** The Crisis Program is for consumers of any age range or population 24 hours a day, 7 days per week. Some of these services include telephone counseling, mobile crisis intervention, follow up counseling with linkage to resources, mental health services in the county jail, crisis stabilization at various locations and hospitalization. The program also provides on call services for the Community Support Program and Western Wisconsin Cares. There are two crisis therapists, two social workers, and a number of evening responders that deliver these services. Over 4200 face-to-face and phone contacts were made by Crisis staff in 2009.



### OUTPATIENT MENTAL HEALTH CLINIC

#### Outpatient Therapy

The section is certified to provide outpatient therapy for persons with mental health needs. The staff consists of one clinical psychologist and one therapist. In addition to assessments and therapy for consumers, these staff also provide considerable consultation for other Human Services sections and county departments.



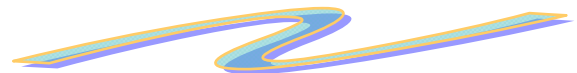
#### Mental Health Nursing

Two nurses in Mental Health Recovery Services provide assistance to prescribers in the medical management of consumers. They provide a system of monitored medication based on individual need, collaborate in the Patient Assistance Program for consumers followed by our prescribers, evaluate consumers for increased symptoms or side effects, provide physical assessments, and provide nursing expertise among the various interdisciplinary teams within the section.



#### Medication Prescription

In 2009 one part time psychiatrist and a full time advance practice nurse prescriber provided evaluation and medication management to consumers.



300 fourth street north . La Crosse WI 54601

#### CASE MANAGEMENT PROGRAMS

##### Targeted Case Management (TCM)

This is the least intense model of case management that is available for individuals that need assistance meeting the challenges presented by a mental illness. Case managers can provide or arrange for advocacy, benefits assistance, medication management, support, and connection with needed services to allow a person to reside in the community. The program served approximately 80 consumers per month in 2009.

##### Comprehensive Community Services (CCS)

CCS is a mental health recovery and empowerment based program for individuals with higher levels of need for assistance. Consumers and their natural supports are active participants in planning the supports and services needed by the consumer to move forward in their journey of recovery. County staff facilitate the planning process. The consumer's Recovery Team designs a plan of support for the consumer that draws upon psychosocial support services from a wide array of community providers. In 2009, the program served approximately 120 consumers per month.

##### Community Support Program (CSP)

This mental health program is available for individuals with the highest levels of need. This program has been contracted out to Family & Children's Center of La Crosse since the beginning of 2007. The CSP model closely follows the national Assertive Community Treatment (ACT) model. A multi-Disciplinary team coordinates and provides all needed mental health services to include: in-house psychiatry, nursing, vocational, AODA, case management, and assistance with daily living skills. The program served approximately 80 consumers per month in 2009.

Visit the Mental Health Recovery Services  
WEB site at:

<http://www.co.la-crosse.wi.us/>

# MENTAL HEALTH

# RECOVERY SERVICES

# PROGRAM AREAS

SHORT TERM SERVICES

CRISIS PROGRAM

OUTPATIENT THERAPY

MENTAL HEALTH  
NURSING

MEDICATION  
PRESCRIPTION

TARGETED CASE  
MANAGEMENT

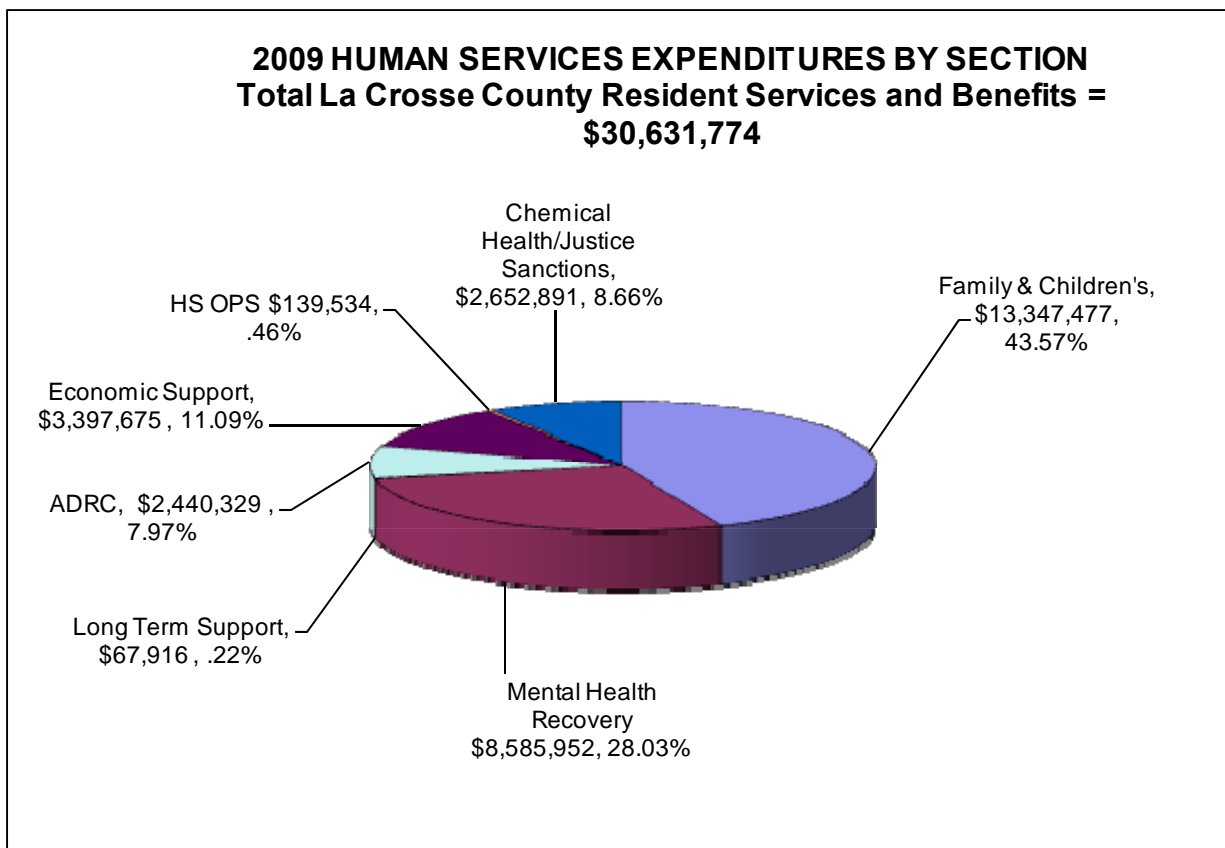
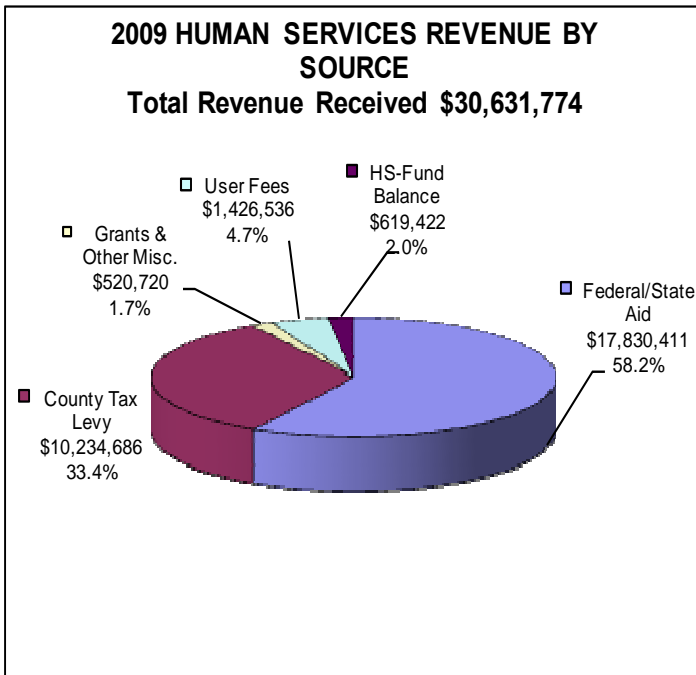
COMPREHENSIVE  
COMMUNITY SERVICES

COMMUNITY SUPPORT  
PROGRAM

# Conclusion

In the full version of our 2009 Annual Report, each Human Services Section reported on their primary services. Reflected in our Revenue and Expenditures Charts are the resources by Section for the provision of these services for La Crosse County residents. To view the full version of the 2009 Annual Report, please visit our web site at <http://www.co.la-crosse.wi.us/HumanServices/reports.htm>.

The Human Services Department is proud of its numerous accomplishments and quality services while being an excellent steward of public resources. We will need to continue our leadership in government and community/regional partnerships, built upon trust, while we enhance the self sufficiency and quality of life for those we serve.



"Unaudited"

# Conclusion

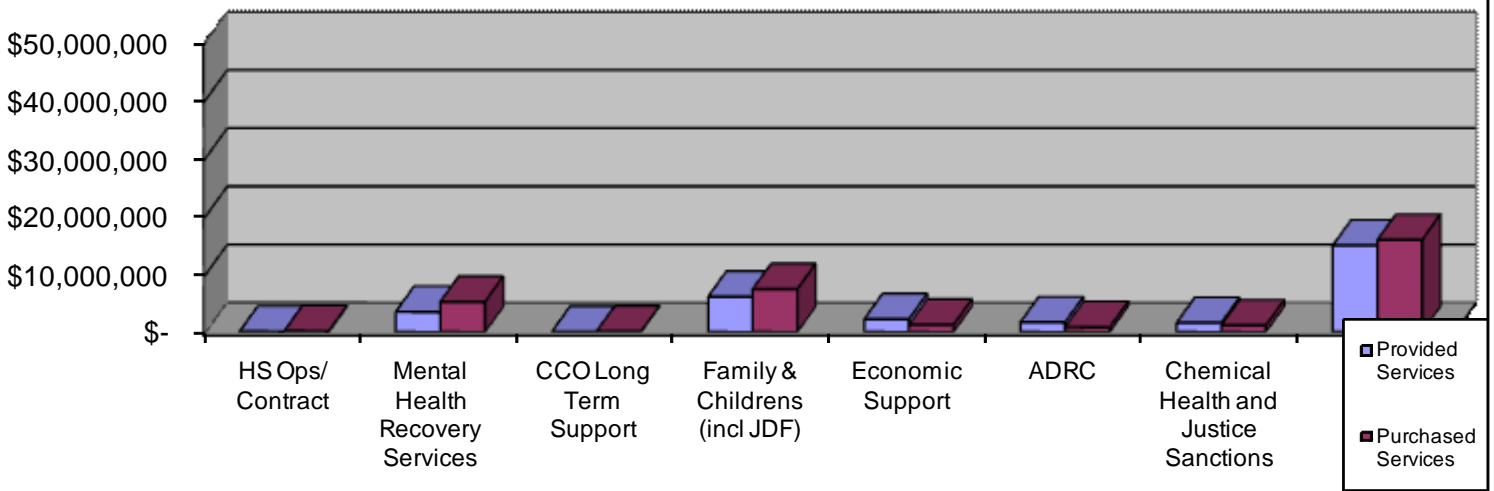
In looking at all that is accomplished through the La Crosse County Human Services Department, one can see that we have a tremendous effect not only with the people we serve, but also on the economy of La Crosse County. Since 51.6% of our services are purchased, businesses benefit from these contracts as do the persons they employ to carry out quality services for our clients.

Of course, little of what we do could occur without the resources from all levels of government, insurances, and the clients themselves. Many of these revenues are the result of federal and state mandates that our Human Services Department is required to perform for

the people we serve. By far, the greatest sources of revenue are from the federal and state levels of government. We will face increased challenges in accomplishing our mission as cuts in federal, state and local budgets occur. This will make our work of providing and purchasing of services for the most vulnerable citizens even more difficult. However, true to our mission, we will enhance self-sufficiency and quality of life with respect for the dignity of the person served.

Dean Ruppert,  
Operations Administrator

## 2009 PURCHASED VS. PROVIDED SERVICES



"Unaudited"

	HS Ops/ Contract	Mental Health Recovery Services	CCO Long Term Support	Family & Children's (incl JDF)	Economic Support	ADRC	Chemical Health & Justice Sanctions	Total
<b>Provided Services</b>	\$ 27,848	\$ 3,426,564	\$ 3,080	\$ 6,020,767	\$ 2,176,057	\$ 1,636,868	\$ 1,540,567	\$ 14,831,751
<b>Purchased Services</b>	\$ 111,685	\$ 5,159,388	\$ 64,836	\$ 7,326,710	\$ 1,221,618	\$ 803,461	\$ 1,112,324	\$ 15,800,022
	\$	\$ 8,585,952	\$ 67,916	\$ 13,347,477	\$ 3,397,675	\$ 2,440,329	\$ 2,652,891	\$ 30,631,774