



OFFICE OF THE COUNTY EXECUTIVE

Milwaukee County

CHRIS ABELE COUNTY EXECUTIVE

1

Date: January 9, 2013
To: Marina Dimitrijevic, Chairwoman, County Board of Supervisors
From: Chris Abele, County Executive
Subject: Appointment to the Combined Community Services Board

Pursuant to the provisions set forth in Wisconsin State Statute 51.42, Milwaukee County General Ordinance 93.02 and subject to confirmation by your honorable body, I am hereby appointing Duncan Shroust to serve on the Combined Community Services Board. Duncan Shroust's term will expire on February 1, 2016.

Attached is a copy of his resume for your review.

Your consideration and confirmation will be appreciated.

A handwritten signature in black ink, appearing to read "Chris Abele".

Chris Abele
Milwaukee County Executive

cc: Supervisor Peggy Romo West, Chair, Health and Human Needs Committee
Kelly Bablitch, Chief of Staff, County Board
Hector Colon, Director, Health and Human Services
Jennifer Collins, Research Analyst, County Board
Jodi Mapp, Committee Clerk, County Board
Janice Weeden, Disabilities Services Division
Duncan Shroust

Resume

Duncan M. Shrout

2007 N. 69th St.
Wauwatosa, WI 53213
(414) 778-1131
dshrout@wi.rr.com

EMPLOYMENT

Retired.....November, 2011 – Present

IMPACT Alcohol and Other Drug Abuse Services, Inc.

IMPACT is a non-profit corporation serving over 145,000 people a year with an annual budget of \$3.9 million dollars. This is the agency formed from the merger of the Milwaukee Council on Drug Abuse and the Milwaukee Council on Alcoholism in 1992.

Vice President for Government Affairs and Public Policy..... 1993 – October 2011

Created and developed this position to expand IMPACT’s relationship with local, state, and federal elected and appointed government representatives. This position was responsible for the development and initial implementation of all local, state and federally government funded programs at IMPACT.

Director Drug-Free Communities Project..... 2003-2008

Created and developed this position to implement the Drug-Free Communities Milwaukee project.

Milwaukee Council on Drug Abuse, Inc.

The Milwaukee Council on Drug Abuse, Inc. was a non-profit corporation which served over 25,000 people a year with a budget of \$625,000.00. (In 1992, the Milwaukee Council on Drug Abuse merged with the Milwaukee Council on Alcoholism creating IMPACT Alcohol and Other Drug abuse Services, Inc.)

Executive Director..... 1978 - 1992

Served as the staff person to the board of directors, supervised staff team, developed annual agency budget, raised annual and longer term funding, and monitored agency services. Created teams of board members, program volunteers, and staff members to develop a long-range agency plan, develop programs, and monitor outcomes. This resulted in agency budget expansion from \$100,000.00 to \$650,000.00 in ten years

Ozaukee County Comprehensive Services

Mental Health, Alcohol and other Drug Abuse Services Coordinator 1974 - 1978

Prepared and implemented annual service plan and budget for service areas. This resulted in county residents receiving increasingly responsive and cost effective services. This position reported to the Ozaukee County Board of Supervisors, and community groups.

State of Wisconsin Department of Health and Social Services

The Department had statutory responsibility for the supervision of adult and juvenile offenders.

Social Worker, (Probation and Parole Agent) 1969 - 1974
Supervised correctional clients with lengthy histories of substance abuse.

EDUCATION

Certificate in Urban Ministry	Cardinal Stritch University
Master of Science, Social Work	University of Wisconsin - Milwaukee
Bachelor of Arts, Sociology	Marquette University

ADVISORY COMMITTEES and BOARDS OF DIRECTORS

The Benedict Center for Criminal Justice—Member, Board of Directors, 1986–1994

Mental Health Consultant Group, Milwaukee County Mental Health Center, Member, 1987-1988

Wisconsin Association on Alcohol and Other Drug Abuse, Inc.—Member, Board of Directors, 1988-1992

State Council on Alcohol and other Drug Abuse Planning and Funding Committee-Member, 1988-Present

Milwaukee Inncity Congregations Allied for Hope-Member, 1999 - 2009

Community Care Organization—Board of Directors Member, 2000–2004

Medical College of Wisconsin Institutional Review Board Member, 2003–2005

Cardinal Stritch University Urban Ministry Advisory Board Member, 2003-Present

Open Gate, Inc.—Member Board of Directors, 2004-2008

Community Meal Program-St. Benedict the Moor Congregation Meal Ministry Council Member, 2007-Present

State Council on Alcohol and other Drug Abuse - Member, 2008 – Present
Vice Chair, 2011 - Present

DATE: January 7, 2013

TO: Marina Dimitrijevic, Chairwoman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by James Mathy, Administrator, Housing Division

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Authorization for the Housing Division to Enter into a Purchase of Service Contract with Milwaukee Center for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways to Permanent Housing program

Issue

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. Per Section 46.09, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the Housing Division to enter into a purchase of service (POS) contract with Milwaukee Center for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways to Permanent Housing program. This program will assist individuals with transitioning into permanent housing from Community Based Residential Facilities (CBRF) and those who are homeless and in need of service linkages. The program will be able to operate starting in March 2013.

Discussion

The structure and function of the Pathways to Permanent Housing program represents a new direction for transitional housing within the Department of Health and Human Services. Pathways will not function simply as a housing facility. Rather, through intensive care management and the presence of a robust level of peer specialist resources and expertise, residents will be assisted from the day of their arrival to move through the transitional housing setting into safe, affordable and permanent housing.

The recommendation for the Pathways to Permanent Housing program came out of the Community Linkages Committee of the Mental Health Redesign effort. Community Linkages looked at the HSRI recommendation of transitioning individuals from CBRFs into less restrictive settings and continuing to expand Milwaukee County's permanent supportive housing supply. The goal of the Pathways program is to offer consumers an additional transitional housing choice that does not currently exist in the Milwaukee County system. For those currently living in a CBRF, this would be a housing option for consumers where they could save a considerable amount of their own funds while working on goals from day one to move into permanent supportive housing. Currently, individuals living in CBRFs supported by Milwaukee County must contribute a majority of their SSI income for their living expenses. The fees for the Pathways program will be \$375, which is approximately half of what consumers living in CBRFs currently pay. This amount will include all rent and meals.

In order to ensure a safe and successful transition for consumers as they move from a CBRF to a more independent setting, person-centered decision making will be the foundation of this transition. Participation is strictly voluntary and all consumers have the final decision in his or her transition plan.

The current utilization review (U/R) team for the CBRFs meets every six months to review comprehensive individual service plans. This meeting will now include assessing a consumer's readiness to transition from a CBRF to a more independent setting. The U/R team currently consists of representatives from the CBRFs, SAIL staff, Division of Housing staff and some of the Community Support Program staff. The Behavioral Health Division (BHD) and Division of Housing are recommending adding a representative from Disability Rights Wisconsin to the U/R panel to actively participate in the discussion on the transition from CBRF to a more independent setting. Consumers can voice their desire to transition to a more independent setting to their CBRF resident care staff or case manager. In addition, the resident care staff or case manager can also recommend to the U/R panel consumers that may benefit from a more independent living setting. When appropriate, coordination with the client's legal representative will occur acknowledging their involvement in, understanding of, and agreement with the transition plan. At a minimum, consumers will have six months from last hospitalization and have shown increased independence in their activities of daily living as documented on his or her individual service plan.

All consumers considering participation in the transition from a CBRF to a more independent setting will be offered a tour of the proposed Pathways program and have an opportunity to meet the staff, ask questions and air concerns prior to the move. All consumers will also be offered a partial transition or trial period at Pathways to ensure a gradual transition based on the consumer's need to establish a successful placement. During the partial transition all clients will be connected with a certified peer specialist (CPS) to use as a support. CPS' will also be on-site at Pathways.

The comprehensive individual service plan created at the CBRF will follow the client to Pathways. The plan, however, will be further developed based on activities that are available at Pathways to strengthen activities of daily living, education, employment and include a plan for further independence. For consumers requiring assistance with medication management, coordination with community case management and/or nursing agencies linkages with organizations such as Affiliated Home Health and Visiting Nurses Association will occur. Clients also requiring additional rehabilitation services will be connected to Column Rehab Services, a vendor through BHD.

The length of stay at Pathways will be based on consumer need. Consumers who do transition to Pathways will be reviewed by the U/R panel to allow for continuity of residential care and for adjustments in intensity as needed. Consumers that may have difficulty transitioning from the CBRF to Pathways will be allowed to return to the CBRF; and, for clients that have shown success at Pathways will have activities in place to allow for a more independent placement.

Pathways will also have the ability to serve individuals who are either homeless or at risk of becoming homeless. For those without the ability to pay, the Housing Division will secure funds to assist. Another major initiative through the Community Linkages Committee was the recommendation of a new Community Intervention Specialist position in the Housing Division. This position will assist the Milwaukee County Jail, homeless shelters and the private hospital system with discharge planning into appropriate housing options. The Pathways program will be a significant resource for individuals who are discharged without a proper housing plan.

Pathways will be operated at the previous location of Community Advocates Autumn West and Milwaukee County's Transitional Housing Program. This building is owned by the Council for the Spanish Speaking and has been a great provider of housing for consumers. The building can house 27 program participants.

MCFI was chosen for this purchase of service contract through a competitive Request for Proposal (RFP) process. MCFI has been in existence since 1938. The organization focuses its efforts and resources on its mission: to assist individuals and families facing barriers to their success due to disabilities to reach their highest levels of independence in the community. MCFI now touches the lives of more than 50,000 families each year with an array of programs addressing all disabilities across the lifespan, including effective early intervention, education, therapies, employment services, long-term care, financial services and behavioral health programs, providing pathways to dignity and self-sufficiency. MCFI's programs have been used as a model by service providers across the country, and the agency has just received renewed three-year accreditation from the Commission for the Accreditation of Rehabilitation Facilities (CARF). The agency collaborates actively with other community agencies and resources, and works closely with academic institutions and health care providers to identify more effective methods of treatment and, ultimately, to reduce the costs of, and the need for, long-term care.

MCFI has experience as a CBRF provider and as a provider of permanent supportive housing making them an ideal service partner for the Pathways Program. MCFI will also be partnering with Our Space to provide on-site peer support services. Our space has been a main provider of peer support services in supportive housing since the Housing Division was created in 2008.

Staff will be present on-site 24 hours a day. Program staff will include an Operations Manager, Case Coordinator, a Lead Peer Specialist, several peer specialists and resident managers. MCFI staff will immediately begin to work with each resident to identify their personal strengths and goals. These goals may be employment, development of independent living skills and personal recovery goals that will ultimately help them to achieve stable and permanent housing. Services that are not directly available on-site will be accessed through referrals. Staff will work with each resident, facility staff, case managers and peer specialists to identify and set up these services. Vocational skills and referrals for benefits counseling will also be critical to the success of Pathways, as residents will need to achieve sufficient income or employment to attain a permanent rental or other stable housing situation.

Funding for the Pathways program will come from rental income from occupants, funds previously dedicated to the Transitional Housing Program and BHD funds previously used for CBRF beds. Approximately ten individuals will be targeted to transition out of a BHD funded CBRF slot. The CBRF providers can then fill those ten vacancies with individuals enrolled in Family Care.

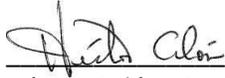
Recommendation

It is recommended that the County Board of Supervisors authorize the Director, Department of Health and Human Services, or designee, to enter into purchase of service contract with Milwaukee Center for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways to Permanent Housing program for the time frame of March 1, 2013 through December 31, 2013.

Fiscal Effect

Through rental income and the transfer of CBRF and Transitional Housing Program funds, there are sufficient funds to support the Pathways to Permanent Housing program beginning in March 2013. A fiscal note form is attached.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablitch, County Board
Pat Farley, Director – DAS
Craig Kammholz – Fiscal & Budget Administrator - DAS
CJ Pahl, Assistant Fiscal and Budget Administrator – DAS
Antionette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Analyst
Jodi Mapp, Committee Clerk

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4 (ITEM) Report from the Director, Department of Health and Human Services, Requesting
5 Authorization for the Housing Division to Enter into a Purchase of Service Contract with Milwaukee
6 Center for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways To
7 Permanent Housing program, by recommending adoption of the following:
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10 **A RESOLUTION**

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12 WHEREAS, Per Section 46.09 of the Milwaukee County Code of General Ordinances, the Director
13 of the Department of Health and Human Services (DHHS) is requesting authorization for the Housing
14 Division to enter into a purchase of service (POS) contract with Milwaukee Center for Independence
15 (MCFI) for \$500,000 to provide supportive services for the Pathways to Permanent Housing program;
16 and
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18 WHEREAS, this program will assist individuals with transitioning into permanent housing from
19 Community Based Residential facilities and those who are homeless and in need of service linkages; and
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21 WHEREAS, the structure and function of the Pathways To Permanent Housing program
22 represents a new direction for transitional housing within the Department of Health and Human
23 Services by providing intensive care management and a robust level of peer specialist resources and
24 expertise, so residents will be assisted from the day of their arrival to move through the transitional
25 housing setting into safe, affordable and permanent housing; and
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27 WHEREAS, the recommendation for the Pathways To Permanent Housing program came out of
28 the Community Linkages Committee of the Mental Health Redesign effort; and
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30 WHEREAS, funding for the Pathways program will come from rental income from occupants,
31 funds previously dedicated to the Transitional Housing Program and BHD funds previously used for CBRF
32 beds; and
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34 WHEREAS, there is no budgetary impact associated with this request, as funding for this
35 contract is included in the 2013 Budget; now, therefore,
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37 BE IT RESOLVED, that the Director of the Department of Health and Human Services, or his
38 designee, is hereby authorized to enter into a 2013 purchase of service contract with Milwaukee Center
39 for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways To Permanent
40 Housing program for the time frame of March 1, 2013 through December 31, 2013.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 1/7/13

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Authorization for the Housing Division to Enter into a Purchase of Service Contract with Milwaukee Center for Independence (MCFI) for \$500,000 to provide supportive services for the Pathways to Permanent Housing program

FISCAL EFFECT:

- | | |
|--|--|
| <input type="checkbox"/> No Direct County Fiscal Impact
<input type="checkbox"/> Existing Staff Time Required
<input checked="" type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input checked="" type="checkbox"/> Absorbed Within Agency's Budget
<input type="checkbox"/> Not Absorbed Within Agency's Budget

<input type="checkbox"/> Decrease Operating Expenditures

<input type="checkbox"/> Increase Operating Revenues

<input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures

<input type="checkbox"/> Decrease Capital Expenditures

<input type="checkbox"/> Increase Capital Revenues

<input type="checkbox"/> Decrease Capital Revenues

<input type="checkbox"/> Use of contingent funds |
|--|--|

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	\$0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. Per Section 46.09, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the Housing Division to enter into a purchase of service (POS) contract with Milwaukee Center For Independence (MCFI) for \$500,000 to provide supportive services for the Pathways To Permanent Housing program from March 1, 2013 through December 31, 2013.

B. Funding for the Pathways program will come from rental income from occupants, funds previously dedicated to the Transitional Housing Program and BHD funds previously used for CBRF beds (see detail below). Approximately ten individuals will be targeted to transition out of a BHD funded CBRF slot. The CBRF providers can then fill those ten vacancies with individuals enrolled in Family Care.

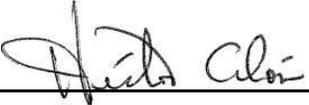
Transition Housing Program (THP)	72,500
Scripts Rental funds for THP	50,000
CBRF funds from SAIL	276,250
Rental Income (\$375/mo)	101,250
	500,000

C. See Section B above. This program will continue in the future and the funding mentioned above is sustainable in future years.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

D. It is assumed that all 27 beds will produce rental income for 10 months of 2013 and that 10 CBRF clients will transition to this program. BHD and the Housing Division feels these are conservative assumptions but this program is a consumer driven choice so funding may fluctuate. No other assumptions are made.

Department/Prepared By Alexandra Kotze, Fiscal and Policy Administrator - DHHS

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
Inter-Office Communication

DATE: January 7, 2013

TO: Supervisor Marina Dimitrijevic, Chairperson – Milwaukee County Board

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by B. Thomas Wanta, Administrator, Delinquency and Court Services Division

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Support from the County Board to implement system reform strategies within the Milwaukee County juvenile justice system through participation in the Annie E. Casey Foundation Juvenile Detention Alternatives Initiative

Issue

DHHS recently reported to the Board on various efforts to engage in data-driven decision-making and juvenile justice system reform strategies. DHHS is now returning to the Board to request a Resolution in support of the overall principle of safely reducing reliance on confinement of youth while maintaining or improving public safety and to support DCSD's participation in the Juvenile Detention Alternatives Initiative (JDAI), including receiving technical assistance from the Annie E. Casey Foundation to implement system reform strategies.

Discussion

The Juvenile Detention Alternatives Initiative (JDAI) is a national juvenile detention reform effort that has been implemented in over 150 jurisdictions in 32 states. JDAI has successfully reduced the number of youth in confinement while maintaining or improving public safety in other states across the country. Milwaukee County was chosen by the Annie E. Casey Foundation to participate in JDAI as one of three Wisconsin counties, along with Manitowoc and Racine Counties, as part of a statewide roll-out through the Wisconsin Office of Justice Assistance. Through this program, DCSD would receive technical assistance from the Annie E. Casey Foundation designed to:

- Reduce reliance on confinement
- Improve public safety
- Utilize best practice programs
- Save taxpayers' dollars
- Reduce racial disparities & bias
- Stimulate overall juvenile justice reforms

As reported to the Board over the last several months, the Department of Health and Human Services (DHHS) - DCSD is taking steps towards data-driven decision-making, including the adoption of a new validated risk and needs assessment instrument. A June 2011 report by the Public Policy Forum, *Milwaukee County Detainee Populations at Historic Lows: Why is it happening and what does it mean*, documented the decline in the secure juvenile detention center population in Milwaukee County and

urged consideration of the effectiveness of justice system policies and programming that may have contributed to the decline. In addition, a July 2012 report by the Public Policy Forum, *Milwaukee County Juvenile Recidivism – Metrics and Trends*, encouraged continued progress by DCSD in data collection methodologies and standardization across programs to help articulate system performance and improve services provided to Milwaukee County youth. Most recently, in October 2012 the Milwaukee County Board authorized acceptance of grant funds (File No. 12-831) from the U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention for the Delinquency and Court Services Division (DCSD) to serve as a demonstration site for the Juvenile Justice Reform and Reinvestment Demonstration Program. This grant will allow DCSD to implement and evaluate a systematic protocol of evidence-based and cost-measurement tools with the goal of better juvenile justice outcomes and cost-savings at the local level.

DCSD is now coming to the Board to ask for support in these efforts. Participation in JDAI will complement and enhance existing system improvement efforts. Successful participation in JDAI requires the commitment of a broad range of system and community stakeholders. A local governance structure for JDAI will be established, to include an Advisory Board comprising key system and community stakeholders to guide the initiative, and sub-committees to study specific topics and make recommendations on system reform strategies. DHHS is asking for support of the Board because the assistance offered through the JDAI program will enhance the overall system in Milwaukee County and will greatly benefit DCSD.

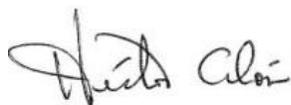
Fiscal Effect

The program is entirely provided by the Annie E Casey Foundation. There is no tax levy effect. A fiscal note form is attached.

Recommendation

It is recommended that the Milwaukee County Board of Supervisors supports the overall principle of safely reducing reliance on confinement of youth while maintaining or improving public safety and Milwaukee County's participation in the Juvenile Detention Alternatives Initiative to receive technical assistance from the Annie E. Casey Foundation to implement system reform strategies, as detailed in the attached resolution.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablich, County Board
Patrick Farley, Director, DAS
Craig Kammholtz, Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS

Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

A RESOLUTION

In support of efforts to implement system reform strategies within the Milwaukee County juvenile justice system through participation in the Annie E. Casey Foundation Juvenile Detention Alternatives Initiative, by recommending adoption of the following:

WHEREAS, the Juvenile Detention Alternatives Initiative (JDAI) is a national juvenile detention reform effort that has been implemented in over 150 jurisdictions in 32 states; and

WHEREAS, JDAI has successfully reduced the number of youth in confinement while maintaining or improving public safety in other states across the country; and

WHEREAS, Milwaukee County was chosen by the Annie E. Casey Foundation to participate in JDAI as one of three Wisconsin counties, along with Manitowoc and Racine Counties, as part of a statewide roll-out through the Wisconsin Office of Justice Assistance; and

WHEREAS, the Department of Health and Human Services, Delinquency and Court Services Division (DCSD) is taking steps towards data-driven decision-making, including the adoption of a new validated risk and needs assessment instrument; and

WHEREAS, a June 2011 report by the Public Policy Forum, *Milwaukee County Detainee Populations at Historic Lows: Why is it happening and what does it mean*, documented the decline in the secure juvenile detention center population in Milwaukee County and urged consideration of the effectiveness of justice system policies and programming that may have contributed to the decline; and

WHEREAS, a July 2012 report by the Public Policy Forum, *Milwaukee County Juvenile Recidivism – Metrics and Trends*, encouraged continued progress by DCSD in data collection methodologies and standardization across programs to help articulate system performance and improve services provided to Milwaukee County youth; and

WHEREAS, the Milwaukee County Board authorized acceptance of grant funds in October 2012 (File No. 12-831) from the U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention for DCSD to serve as a demonstration site for the Juvenile Justice Reform and Reinvestment Demonstration Program, designed to implement and evaluate a systematic protocol of evidence-based and cost-measurement tools with the goal of better juvenile justice outcomes and cost-savings at the local level; and

WHEREAS, participation in JDAI will complement and enhance existing system improvement efforts; and

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WHEREAS, DCSD will receive technical assistance from the Annie E. Casey Foundation designed to:

- Reduce reliance on confinement
- Improve public safety
- Utilize best practice programs
- Save taxpayers' dollars
- Reduce racial disparities & bias
- Stimulate overall juvenile justice reforms

WHEREAS, successful participation in JDAI requires the commitment of a broad range of system and community stakeholders; and

WHEREAS, a local governance structure for JDAI will be established, to include an Advisory Board comprising key system and community stakeholders to guide the initiative, and sub-committees to study specific topics and make recommendations on system reform strategies; now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors supports the overall principle of safely reducing reliance on confinement of youth while maintaining or improving public safety; and

BE IT FURTHER RESOLVED, that the Milwaukee County Board of Supervisors supports Milwaukee County's participation in the Juvenile Detention Alternatives Initiative to receive technical assistance from the Annie E. Casey Foundation to implement system reform strategies.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 1/7/13

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Support from the County Board to implement system reform strategies within the Milwaukee County juvenile justice system through participation in the Annie E. Casey Foundation Juvenile Detention Alternatives Initiative

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input checked="" type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A.) Approval of the request would permit the DHHS- Delinquency and Court Services Division (DCSD) to participate in the Juvenile Detention Alternatives Initiative (JDAI) to receive technical assistance from the Annie E. Casey Foundation to implement system reform strategies and demonstrate overall support for the overall principle of safely reducing reliance on confinement of youth while maintaining or improving public safety.

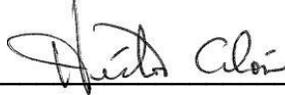
B.) The JDAI program is offered by the Annie E. Casey Foundation to selected counties. The County has no fiscal responsibility and only needs to commit staff time and resources.

C.) There is no budgetary impact associated with this request as it is fully funded by the Annie E. Casey Foundation.

D. There are no assumptions made.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

Department/Prepared By Alex Kotze, Budget Manager, DHHS

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

COUNTY OF MILWAUKEE
Inter-Office Communication

DATE: December 31, 2012

TO: Supervisor Marina Dimitrijevic, Chairwoman – Milwaukee Co. Board of Supervisors

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by: Tom Wanta, Administrator - Delinquency & Court Services Division

SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to enter into a State/County contract for Community Youth and Family Aids for 2013 and to accept \$34,976,408 for State Corrections Charges and Community Based Services

ISSUE

Section 301.031 of the Wisconsin Statutes requires counties to execute an annual contract with the state Department of Corrections (DOC) for the “Community Youth and Family Aids Program.” This program provides State funding for County services to juvenile offenders as mandated by State and/or Federal law.

County ordinances require that departments obtain authorization from the County Board in order to execute contracts. The Director, Department of Health and Human Services (DHHS), is therefore requesting authorization to sign the 2013 contract with the state DOC for the provision of juvenile justice services mandated by State law. The County cannot receive 2013 revenue from the State until this contract is signed.

BACKGROUND

The Community Youth and Family Aids Program, commonly referred to as “Youth Aids,” is the State’s primary means of providing counties with direct assistance to fund the cost of services to juvenile delinquents. This revenue is used exclusively to fund costs in the DHHS Delinquency and Court Services Division (DCSD). Counties supplement their juvenile justice funding needs with Basic Community Aids, property tax levy and various grant revenues to fund the overall costs of the juvenile justice system.

On December 17, 2012, DHHS received the actual 2013 contract from DOC for Youth Aids. The State’s 2013 contract will provide Milwaukee County with \$34,976,408 of Youth Aids funding (excluding the DHHS estimate of Corrective Sanctions funding - see Attachment 1, pg. 1 of 1).

Youth Aids Revenue

The State contract allocation consists of three components: 1) the annual state budget amount allocated by several formulae; 2) any surplus amount from “over-charging” counties during the prior state fiscal year for the cost of state Juvenile Institutions compared to DOC’s actual costs; and 3) an allocation for the Corrective Sanctions program. The actual 2013 State funding for Corrective Sanctions will not be determined until January 2013, based on actual usage of the program by each county during 2012.

The attached exhibit lists the Youth Aids funding from 2010 through 2013. The Base Funding amount is based on the separate allocations contained in s. 301.26, Wis. Stats. Beginning with 2009, DOC no longer provided the same level of detail regarding the allocations and instead provides just the Base Allocation and AODA funding. The Base Allocation now includes the separate allocations mentioned above.

The 2013 allocations are as follows:

- The Original Base Allocation which is based on the initial formula for allocations to counties when Youth Aids was created in 1979; and now includes:
 - a. Prior Year Refund revenue. Statutes require that DOC provide a refund to counties if the amount paid by counties under the statutory daily rates is greater than DOC’s actual costs in the preceding State fiscal year. The refund would be based on each county’s proportionate share of the days of care provided by DOC.
 - b. The 1999 Act 9 supplemental funding is allocated based on three factors: a) a county’s proportion of the statewide juvenile population for the most recent year available; b) a county’s proportion of statewide Part 1 juvenile arrests under the uniform crime reporting system of the Office of Justice Assistance for the most recent three year period available; and c) a county’s proportion of statewide juveniles placed in a juvenile correctional institution, a secure child caring institution or secure group home for the most recent three-year period available;
 - c. The 2001 Act 16 supplemental funding is allocated based on the same three factors above, but with an “override” provision that no county receives less than 93% nor more than 115% of the amount it would have received if the juvenile placement factor (item “c” above) were the sole factor used to determine county allocations;
 - d. The 2007 Act 20 supplemental funding is allocated based on each county’s proportion of the number of juveniles statewide who are placed in a juvenile

correctional facility during the most recent three-year period for which that information is available;

- Alcohol & Other Drug Abuse (AODA) funding is allocated based on each county's Youth Aids spending on community services (defined as the amount of Youth Aids left after state charges); and
- Corrective Sanctions funding is allocated following the close of the calendar year, based on each county's usage of the 136 total slots authorized by statute.

The DOC 2013 allocation for Milwaukee County of \$34,976,408 (excluding Corrective Sanctions) represents a revenue increase for DHHS of \$1,716,332, compared to the 2012 Contract (including the adjustment from the State based on the 2011-2013 State Budget) of \$33,260,076. The 2013 DHHS Budget included an estimate of \$33,359,413 in Youth Aids revenue (excluding Corrective Sanctions), which results in a budgeted revenue surplus of \$1,616,995 for DHHS in 2013.

DHHS will continue to monitor the State budget, which may change significantly for the State budget year beginning July 1, 2013, the Average Daily Population (ADP) and make projections based on historical data to determine if the initial projected surplus will materialize in 2013. If in fact the surplus does materialize, DHHS will return to the Board to report the revenue surplus as required.

Recommendation

It is recommended that the County Board of Supervisors authorize the Director of DHHS, or his designee, to execute the 2013 State/County contract following Department review for Community Youth and Family Aids, and any addenda to that contract.

Fiscal Impact

The 2013 state contract provides \$1,616,995 more revenue than was anticipated in the 2013 Budget (excluding Corrective Sanctions). A fiscal note form is attached.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, Legislative Affairs Director – County Executive’s Office
Kelly Bablich, County Board Chief of Staff
Pat Farley, DAS Director
Craig Kammholz, Fiscal and Budget Administrator – DAS
CJ Pahl, Assistant Fiscal and Budget Administrator – DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

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5 (ITEM) From the Director, Department of Health and Human Services, requesting
6 authorization to enter into a State/County contract for Community Youth and Family
7 Aids for 2013, by recommending adoption of the following:
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A RESOLUTION

11 WHEREAS, Section 301.031 of the Wisconsin Statutes requires counties to
12 execute an annual contract with the State Department of Corrections (DOC) for the
13 "Community Youth and Family Aids Program," and County Ordinances require that
14 departments obtain authorization from the County Board in order to execute contracts;
15 and
16

17 WHEREAS, the Director, Department of Health and Human Services (DHHS), is
18 requesting authorization to sign the 2013 contract with the State DOC for the provision
19 of juvenile justice services mandated by State law, and the County cannot receive 2013
20 revenue from the State until this contract is signed; and
21

22 WHEREAS, the State's 2013 contract will provide Milwaukee County with
23 \$34,976,408 of Youth Aids funding (excluding Corrective Sanctions); now, therefore,
24

25 BE IT RESOLVED, that the Director, Department of Health and Human Services,
26 or his designee, is hereby authorized to enter into a contract with the State Department
27 of Corrections covering Community Youth and Family Aids for the period of January 1
28 through December 31, 2013, and any addendum thereto.
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MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 12/28/12

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to enter into a State/County contract for Community Youth and Family Aids for 2013 and to accept \$34,976,408 for State Corrections Charges and Community Based Services

FISCAL EFFECT:

- | | |
|--|--|
| <input type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input checked="" type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure		0
	Revenue	\$1,616,995	0
	Net Cost	\$1,616,995	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. Section 301.031 of the Wisconsin Statutes requires counties to execute an annual contract with the State Department of Corrections (DOC) for the "Community Youth and Family Aids Program." This program provides State funding for County services to juvenile offenders as mandated by State and/or Federal law. County ordinances require that departments obtain authorization from the County Board in order to execute contracts. The Director, Department of Health and Human Services (DHHS), is therefore requesting authorization to sign the 2013 contract with the State DOC for the provision of juvenile justice services mandated by state law.

B. The 2013 Contract provides \$34,976,408, which is \$1,616,995 more revenue than budgeted in 2013 for Youth Aids revenue for State Charges and County community-based programs. DHHS will continue to monitor the State budget, which will likely change as of July 1, 2013, update projections based on monthly State Juvenile Corrections Charges and revise estimates if necessary. DHHS will also return to the Board with a revenue surplus report if needed.

C. See Section B above

D. No assumptions. Data based on State contract.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

Department/Prepared By Alexandra Kotze, Fiscal and Policy Administrator - DHHS

Authorized Signature



Did DAS-Fiscal Staff Review? Yes No

Community Youth and Family Aids 2012 State Funding Notice vs 2012 Adopted Budget

State Contract Revenue Source	2010 State Contract	2011 State Contract	2012 State Notice	2013 Adopted Budget	2013 State Notice	Difference State Notice vs 2013 Budget	Comments About State Amount
Base Funding	\$37,319,022	\$37,692,906	\$32,940,876	\$36,585,461	\$34,610,227	(\$1,975,234)	Constant Original Base funding (1979 formula)
Youth Aids AODA	\$310,593	\$310,593	\$319,200	\$310,593	\$366,181	\$55,588	County Community spending % of Statewide - last 3 years
Sub-Total Youth Aids Revenue excl CS	\$37,629,615	\$38,003,499	\$33,260,076	\$36,896,054	\$34,976,408	(\$1,919,646)	
2011-2013 State Budget Adjustment		(\$1,817,989)	\$0	(\$3,536,641)	\$0	\$3,536,641	
Sub-Total Youth Aids Including 2011-2013 State Budget	\$37,629,615	\$36,185,510	\$33,260,076	\$33,359,413	\$34,976,408	\$1,616,995	Final State Allocation; Corr Sanctions added year-end
YA Corrective Sanctions (CS)-Budget	\$1,142,701	\$1,142,701	\$1,230,037	\$1,130,700	\$1,130,700	\$0	
Total Youth Aids Revenue incl CS	\$38,772,316	\$37,328,211	\$34,490,113	\$34,490,113	\$36,107,108	\$1,616,995	Youth Aids for State Charges & Community Programs

COUNTY OF MILWAUKEE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
INTER-OFFICE COMMUNICATION

DATE: January 24, 2013

TO: Supervisor Marina Dimitrijevic, Chairwoman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by: B. Thomas Wanta, Administrator, Delinquency and Court Services Division

SUBJECT: **Report from the Director, Department of Health and Human Services, requesting authorization to enter into a 2013 Professional Services Contract with Community Advocates for the Youth Sports Authority Program within the Delinquency and Court Services Division**

Issue

In accordance with section 56.30 of the Milwaukee County Ordinances, the Director, Department of Health and Human Services (DHHS), is requesting approval to enter into a professional service contract with Community Advocates to serve as the fiscal agent for the Youth Sports Authority (YSA) Program in the Delinquency and Court Services Division (DCSD) for 2013.

Fiscal agent and administrative services in previous years were provided by Jewish Family Services. In December 2012, DHHS was notified that Jewish Family Services was no longer interested in providing this service. DHHS then approached other providers and is now returning to the Board to seek permission to enter into a 2013 contract.

Background

The 2013 Budget includes an allocation of \$100,000 to support the Youth Sports Authority (YSA) program. The current contract limits the allowable fiscal agent and administrative costs to \$8,000.

As reported in the October 2012 board report detailing the 2012 Fall award allocations recommended by the YSA Board, the fiscal agent and administrative services have been provided by a number of agencies over the years as a result of either voluntary stoppage or agency merger. Given the reasonable allowable fiscal agent and administrative costs contained in the proposed contract, past funding uncertainty, timing, and to ensure timeliness of Spring activities, the Department is recommending a waiver of Section 56.30 of the County Ordinances

that would normally require the solicitation for RFPs. The Department is in the process of requesting a waiver of the DBE goal due to the organization being a non-profit.

DCSD recommends that the professional service contract with Community Advocates be entered into for one year in the amount of \$100,000 for the period of 1/1/2013 – 12/31/2013. The fiscal agent and administrative cost limit would be pro-rated to an amount not to exceed \$8,000. This is the same amount as in 2012. DHHS will look at letting an RFP in 2013 for these services.

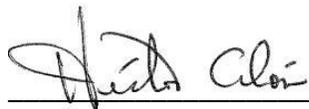
Fiscal Effect

Funds for this contract are included in the 2013 Budget for DCSD therefore there is no tax levy effect.

Recommendation

It is recommended that the County Board of Supervisors authorize the Director, Department of Health and Human Services, or his designee, to enter into a Professional Service Contract with Community Advocates for \$100,000 to oversee the Youth Sports Authority program for the time frame of January 1, 2013 through December 31, 2013.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablich, Chief of Staff, County Board
Patrick Farley, Director, DAS
Craig Kammholz, Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, County Board Analyst

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(ITEM) From the Director, Department of Health and Human Services, requesting authorization to enter into a 2013 Professional Services Contract with Community Advocates for the Youth Sports Authority Program within the Delinquency and Court Services Division, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 56.30 of the Milwaukee County Code of General Ordinances, the Director of the Department of Health and Human Services (DHHS) has requested authorization to enter into a 2013 Professional Service Contract with Community Advocates for the Youth Sports Authority program within the Delinquency and Court Services Division (DCSD); and

WHEREAS, the fiscal agent and administrative services for the Youth Sports Authority have been provided by a number of agencies over the years as a result of either voluntary stoppage or agency merger; and

WHEREAS, fiscal agent and administrative services in recent years have been provided by Jewish Family Services; and

WHEREAS, DCSD was notified in late December 2012 that Jewish Family Services was no longer interested in providing this service; and

WHEREAS, DCSD then approached other providers and is now returning to the Board to seek permission to enter into a 2013 contract; and

WHEREAS, DCSD's 2013 Budget includes an allocation of \$100,000 to support the Youth Sports Authority program; and

WHEREAS, DCSD has identified Community Advocates to be the administrator of this program; and

WHEREAS, the fiscal agent and administrative cost limit is pro-rated to an amount not to exceed \$8,000.; now, therefore,

BE IT RESOLVED, that the Director, Department of Health and Human Services, or his designee, is hereby authorized to enter into a Professional Service contract with Community Advocates for \$100,000 for the period January 1, 2013 through December 31, 2013 for the Youth Sports Authority.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 1/22/13

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services (DHHS), requesting authorization to enter into a 2013 Professional Service Contract with Community Advocates for \$100,000 for the Youth Sports Authority within the Delinquency and Court Services Division (DCSD)

FISCAL EFFECT:

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|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. The Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into a 2013 Professional Service Contract with Community Advocates within the Delinquency and Court Services Division (DCSD) for the Youth Sports Authority.

Approval of this request will allow the Director of DHHS to execute a Professional Service contract with Community Advocates to manage the Youth Sports Authority funding for the period January 1, 2013 through December 31, 2013. The fiscal agent and administrative cost limit is pro-rated to an amount not to exceed \$8,000.

B. Total 2013 expenditures included in this request are \$100,000.

C. There is no tax levy impact associated with approval of this request in 2013 as funds sufficient to cover associated expenditures are included as part of DCSD's 2013 Budget.

D. No assumptions are made.

Department/Prepared By Thomas F. Lewandowski, Fiscal & Management Analyst

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

Did CDPB Staff Review? Yes No Not Required

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

COUNTY OF MILWAUKEE
Department of Health and Human Services
INTER-OFFICE COMMUNICATION

8

DATE: January 15, 2013

TO: Marina Dimitrijevic, Chairwoman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by B. Thomas Wanta, Administrator/Chief Intake Officer – DCSD

SUBJECT: Informational Report from the Director, Department of Health and Human Services, Regarding Use of the Juvenile Detention Facility as a Short-Term Dispositional Placement as Allowed by State Statutes

Issue

In July 2012, the Milwaukee County Board of Supervisors authorized the implementation of a short-term secure placement program within the Milwaukee County Secure Detention Center - juvenile facility as a dispositional placement option for the circuit courts. This report provides a status update regarding the implementation of this program, known as the Milwaukee County Accountability Program (MCAP).

Background

The 2011 – 2013 State Budget (Act 32) contains statutory language changes that would allow a juvenile court the ability to place a youth in a local secure detention facility for a period of up to 180 days, if authorized by a county board of supervisors. In July 2012, the Milwaukee County Board of Supervisors adopted a resolution (File No. 12-564) approving the use of the Secure Detention Center as a post-dispositional placement for a period not to exceed 180 days pursuant to Wisconsin State statute 938.06(5).

The Department of Health and Human Services, Delinquency and Court Services Division, has since proceeded with implementation of the Milwaukee County Accountability Program (MCAP) as an alternative to State Juvenile Corrections. MCAP provides an opportunity for certain youth to remain close to home instead of being sent to a Juvenile Correctional Institution located in Irma, WI, a 4-hour drive from Milwaukee. This initiative has the potential to save funds in the future by avoiding costly State Corrections placements. The division anticipates a reduction in the cost of Juvenile Correctional Institution placements by \$180,000 in 2013 compared to 2011.

Discussion

In preparation for the implementation of MCAP, the Delinquency and Court Services Division Administrator met with representatives from key stakeholder groups in August 2012, including the Public Defender's office, District Attorney's office, and the judiciary, to educate them about the availability of the MCAP and to discuss the program and referral process. Furthermore,

Presiding Judge, M. Joseph Donald issued a directive (Children's 12-05) on October 2, 2012, ordering that the Children's Court judiciary can order juveniles into the MCAP program on a one year order which uses the Detention Center as a post-dispositional placement option and that the participating juveniles shall have a court review set on the assigned Branch's calendar every 60 days post disposition for the first six months of the order.

The target group is youth (males) who are at risk for State Juvenile Corrections placement. This includes youth currently on court ordered supervision that are at risk for State Juvenile Corrections placement due to violating the conditions of court-ordered supervision or because of a new offense. Youth not currently under supervision who are at risk for State Juvenile Corrections placement for a pending offense may also be considered.

Twelve youth, which is the capacity of the secure placement phase are currently in the MCAP program. The first youth is scheduled for release in mid-March (passes to begin in mid-February).

Youth are initially placed in the Secure Detention Center in a MCAP dedicated pod for up to 5 months followed by a period of aftercare in the community under probation supervision. The youth and his parent/guardian are asked to sign a MCAP agreement consenting to the program requirements.

A Human Service Worker Supervisor has been assigned to oversee the smooth operation of this program. Staffing will take place two times a month to discuss youth's progress in the program.

The key components of the MCAP program are as follows:

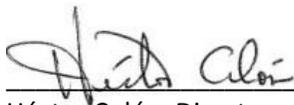
- Education – Wauwatosa Public Schools provides classes in reading & English, math, social studies, science, physical education/health and art. Credit recovery will be available to certain participants through completing virtual courses on the computer. These courses, if not completed, may be continued upon release at Running Rebels Community Organization. Credits earned are transferable to the child's local school district. The school provides weekly progress reports to the probation officer.
- Juvenile Cognitive Intervention Programming (JCIP) – Running Rebels Community Organization runs groups each week-day morning for one hour in the secure detention facility. JCIP is continued with the Running Rebels monitors in the community upon the youth's release. These groups are designed to help youth change their thought process in order to make better choices.
- Targeted Monitoring – Participants are assigned to a monitor from Running Rebels Community Organization. The monitor provides weekly reports to the probation officer.

- Family Counseling – All MCAP participants are expected to participate in weekly counseling sessions using providers in Children’s Court Services Network. These sessions include parents/guardians when possible.
- AODA Education & Counseling - Alcohol & drug abuse counseling is provided monthly by La Causa, Inc. to help participants understand the effects of substance abuse.
- Restorative Justice – Groups will be provided to help youth build a sense of community within the program, examine their behavior, and learn new skills. Detention staff and other providers will be trained in the first quarter of 2013 in an established Restorative Justice curriculum.
- Electronic Monitoring – GPS monitoring will be required during home passes (month 4) and upon initial release to the community. The division is in the process of entering into an agreement with JusticePoint to provide these services. Training will be provided in February 2013.
- 72-Hour Hold – Youth on aftercare status will be subject to holds in secure detention for investigation of any alleged violations of the rules of their supervision.

The division continues to monitor implementation of the program and make adjustments as necessary. Additional program components are being explored as needs are identified for future implementation.

Recommendation

This is an informational report. No action is necessary.



Héctor Colón, Director
Department of Health and Human Services

- cc:
- County Executive Chris Abele
 - Raisa Koltun, County Executive’s Office
 - Kelly Bablich, County Board
 - Patrick Farley, Director, DAS
 - Craig Kammholtz, Fiscal & Budget Administrator, DAS
 - CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
 - Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
 - Jennifer Collins, Analyst, County Board Staff
 - Jodi Mapp, Committee Clerk, County Board Staff

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
Inter-Office Communication

DATE: January 7, 2013

TO: Supervisor Marina Dimitrijevic, Chairwoman – Milwaukee County Board

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Authorization to Amend the Professional Services Contract with the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research (CABHR) for Evaluation Services

Issue

Section 56.30 of the Milwaukee County Code of General Ordinances requires County Board approval for Professional Services Contracts of \$50,000 or greater. Per Section 56.30, the Director of the Department of Health and Human Services (DHHS) is requesting authorization to amend the professional services contract of the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research (CABHR) to establish this contract from January 1, 2013 through December 31, 2013 for evaluation services for the Adult Drug Treatment Court grant.

Discussion

BHD was awarded a federal Substance Abuse and Mental Health Services Administration (SAMHSA) grant in 2008 to create an Adult Drug Treatment Court (ADTC) in Milwaukee County to serve non-violent offenders with substance use disorders. This court is administered in collaboration between the Milwaukee County Circuit Court and BHD serving approximately 80 individuals on an annual basis. In October 2012, BHD received a continuation grant award from SAMHSA to expand the ADTC to serve Veterans including National Guard and Reservists as participants. ADTC 2.0 will increase the current capacity of the drug court to 100 individuals annually and place special emphasis on serving Veterans with enhanced trauma informed screening/assessment protocols for all participants. In addition, the continuation of medication assisted treatment through the use of injectable Naltrexone or Vivitrol will be made available to all participants who choose this therapy.

As the program moves into the final years of funding from this grant, it is imperative that the evaluation component required of the grant has an intensified focus on process improvement and outcome evaluation so that the program can move toward sustainability for the future. It is recommended that the evaluation services be contracted to the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research as it is the established evaluation provider for the ADTC and has been providing specialized evaluation services since the drug court's inception.

The evaluation component is fully funded and budgeted within the SAMHSA grant. The contract for evaluation services with the provider for the first ADTC grant cycle ended on September 30, 2012. As evaluation is a required component of the grant, it is being requested that this contract be approved for the existing evaluation vendor. This would ensure that there is no disruption in the evaluation services of this program.

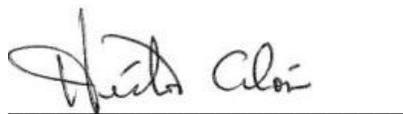
Fiscal Effect

The revenue received through the SAMHSA grant will cover the full cost of the evaluation services. There is no tax levy effect. A fiscal note form is attached.

Recommendation

It is recommended that the Milwaukee County Board of Supervisors authorize the Director, DHHS, or his designee, to enter into a professional services contract with the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research for the time period of January 1, 2013 through December 31, 2013 in the amount of \$65,000.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablich, County Board
Patrick Farley, Director, DAS
Craig Kammholtz, Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

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4 (ITEM) Report from the Director, Department of Health and Human Services, Requesting
5 Authorization to Amend the Professional Services Contract with the University of Wisconsin –
6 Milwaukee Center for Applied Behavioral Health Research (CABHR) for evaluation services by
7 recommending adoption of the following:
8

9
10 **A RESOLUTION**

11
12 WHEREAS, per Section 56.30 of the Milwaukee County Code of General Ordinances, the
13 Director of the Department of Health and Human Services (DHHS) is requesting authorization to
14 amend a 2013 professional services contract with the University of Wisconsin – Milwaukee
15 Center for Applied Behavioral Health Research (CABHR) for evaluation services; and
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17 WHEREAS, BHD was awarded a federal Substance Abuse and Mental Health Services
18 Administration (SAMHSA) grant in 2008 to create an Adult Drug Treatment Court (ADTC) in
19 Milwaukee County;
20

21 WHEREAS, the ADTC is administered in collaboration with the Milwaukee County Circuit
22 Court and BHD and serves approximately 80 non-violent offenders with substance use disorders
23 annually; and
24

25 WHEREAS, in October 2012, BHD received a continuation grant award from SAMHSA to
26 expand the ADTC to serve Veterans including National Guard and Reservists, increasing the
27 current capacity of the drug court to 100 individuals annually; and
28

29 WHEREAS, as the program moves into the final years of grant funding, it is imperative
30 that the evaluation component has an intensified focus on process improvement and outcome
31 evaluation so that the program can move toward sustainability for the future; and
32

33 WHEREAS, It is recommended that the evaluation services be contracted to the
34 University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research as it is the
35 established evaluation provider for the ADTC and has been providing specialized evaluation
36 services since the drug court’s inception; and
37

38 WHEREAS, there is no budgetary impact associated with this request as revenue
39 received through the SAMHSA grant will cover the full cost of the evaluation service; now,
40 therefore,
41

42 BE IT RESOLVED, that the Director of the Department of Health and Human Services, or
43 his designee, is hereby authorized to enter into a 2013 professional services contract with the
44 University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research (CABHR)

45 for evaluation services in the amount of \$65,000, for the period January 1, 2013 through
46 December 31, 2013.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 1/7/13

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Authorization to Amend the Professional Services Contract with the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research (CABHR) for Evaluation Services

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A.) Approval of the request would permit the DHHS-Behavioral Health Division to amend a 2013 professional services contract for evaluation services with the University of Wisconsin – Milwaukee Center for Applied Behavioral Health Research (CABHR).

In October 2012, BHD was awarded a continuation grant from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to expand the Adult Treatment Court (ADTC) to serve Veterans including National Guard and Reservists.

B.) The requested professional services contract amendment anticipates expenditures of \$65,000 with the University of Wisconsin-CABHR.

C.) There is no budgetary impact associated with this request as revenue received through the SAMHSA grant will cover the full cost of the evaluation service.

D. There are no assumptions made.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

Department/Prepared By Clare O'Brien, Budget Analyst for DHHS

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: January 24, 2013

TO: Supervisor Marina Dimitrijevic, Chairperson – Milwaukee County Board

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: Report, from the Director, Department of Health and Human Services, Requesting Authorization to enter into a 2013 Purchase of Service Contract with M&S Clinical Services for the Families Moving Forward Coalition

Issue

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. No contract or contract adjustment shall take effect until approved by resolution of the County Board. Per Section 46.09, the Director of the Department of Health and Human Services (DHHS) is requesting authorization to execute a 2013 purchase of service contract with M&S Clinical Services to function as the fiscal agent for the Families Moving Forward Coalition from February 1, 2013 through December 31, 2013.

Discussion

For people of color seeking behavioral health services, the quality of the services they receive may be negatively affected by the lack of cultural sensitivity in service delivery. The 2003 President's New Freedom Commission report indicates that because of the lack of cultural sensitivity, people of color may not seek services in the formal system, cannot access treatment, drop out of care, are misdiagnosed, or seek care only when their illness is at an advanced stage. The Mental Health Redesign and Implementation Task Force has placed great emphasis on the environment needed for effective service delivery and denoted, "Therapeutic and welcoming environments in which individuals receive care that is timely, accessible, culturally competent, person-centered, co-occurring, and trauma-informed should characterize the system." The Families Moving Forward Coalition has presented a comprehensive proposal to the Behavioral Health Division (BHD) for the use of the Community Reinvestment funds specifically addressing the needs of African American consumers and families through the delivery of six behavioral health preventative interventions strategies. Families Moving Forward is a community of concerned service providers that are dedicated to the empowerment of families and individuals by providing collaborative strength based services designed to improve their quality of life. Families Moving Forward (FMF) will ensure that consumers receive holistic enhanced quality care from our agencies using a collaborative network that will result in a healthier Milwaukee.

BHD is requesting that \$178,100 be allocated to M&S Clinical Services, serving as the fiscal agent for the various FMF members, as noted below, to provide the following services and programs to the Milwaukee community:

1. INFANT MENTAL HEALTH

Empathetic Counseling is proposing a partnership with the Wisconsin Alliance for Infant Mental Health to disseminate information to new parents regarding the social and emotional development of infants and young children. The goal of infant mental health is for infants and young children to reach their fullest potential through nurturing and consistent relationships within the context of family, community, and their culture.

2. MENTORING PROGRAM FOR CHILDREN

WINGS International, Inc. (Working to Inspire, Nurture, and Grow for Service) provides supportive housing, violence prevention, and educational assistance for children who wish to earn their high school diploma. *WINGS International* is proposing an eight-week mentoring program for children ages 12 to 17 serving 50 children who are residing in their supported housing units. There will also be planned multi-cultural activities, emphasis on self-esteem, prevention of sexually transmitted disease, and HIV/AIDS prevention.

3. HEPATITIS C SCREENING AND AWARENESS PROGRAM

M&S Clinical Services in partnership with the Medical College of Wisconsin is proposing the development of a preventative health program to reduce the spread of Hepatitis C in the African American community. African Americans are twice as likely to be infected as Caucasians. The target areas for service delivery will be churches and other faith based institutions to offer the information and provide linkages to community health services for psycho-educational programs conducted by medical students.

4. THE SELF-REFLECTION PROGRAM

Urban DE Version, Inc., is proposing a violence prevention program by building emotional intelligence. The Self-Reflection Program will consist of self-awareness and regulation activities to promote mental wellness through positive social outlets, resources, and relationships. The evidence based Wise Guys and Master Game curricula will be used as for personal development and serve as the building blocks for emotional intelligence.

5. F.U.T.U.R.E., INC.

Fathers Uniquely Thriving to Understand Responsibility and Education (FUTURE) Inc., is proposing to provide mentoring and supportive services to fathers between the ages of 18 – 25 who are currently on probation or parole so that they will become financial, emotional, and nurturing resources to their children. One of the primary goals of FUTURE is to enable young fathers to see the importance of the emotional needs of their children through attachment and bonding activities. There will be strong linkages to employment, housing, and behavioral health resources.

6. PREVENTING ABUSE/NEGLECT AND FAMILY VIOLENCE

West Care Wisconsin Harambee Community Center is proposing a 12-week violence prevention program that will serve 40 families and strive for whole family participation. There will be three program stages that include: health inner life, communication, and social skills; understanding children's emotional needs and appropriate responses; and, prevention of family and partner violence through conflict management and resolution strategies.

BHD did not conduct an RFP and is recommending this contract be awarded as a sole source to the Families Moving Forward Coalition, through M&S Clinical Services, due to their expertise and experience working in the African American community in relation to mental health services. All services will be provided to consumers and community members in 2013.

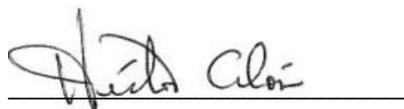
Fiscal Effect

Total funds of \$178,100 for this program will be allocated from the overall purchase of service funds in the 2013 budget and will likely include some funding from the Mental Health Community Investment initiative. This is one-time funding and results in no net tax levy impact in 2013. A fiscal note form is attached.

Recommendation

It is recommended that the Milwaukee County Board of Supervisors authorize the Director, DHHS, or his designee, to issue a purchase of service contract to M&S Clinical Services to act as the fiscal agent and lead organizing agency for the Families Moving Forward Coalition for \$178,100 for the time period of February 1, 2013 through December 31, 2013.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablitch, County Board
Pat Farley, Director – DAS
Craig Kammholz – Fiscal & Budget Administrator - DAS
CJ Pahl, Assistant Fiscal and Budget Administrator – DAS

Antionette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Analyst
Jodi Mapp, Committee Clerk

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(ITEM *) Report from the Director, Department of Health and Human Services, requesting authorization to enter into a 2013 purchase of service contract in the Behavioral Health Division with M&S Clinical Services to function as the fiscal agent for the Families Moving Forward Coalition, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 46.09 of the Milwaukee County Code of General Ordinances, the Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into a 2013 purchase of service contract with M&S Clinical Services to function as the fiscal agent for the Families Moving Forward Coalition; and

WHEREAS, the Families Moving Forward Coalition is a community of concerned service providers that are dedicated to the empowerment of families and individuals by providing collaborative strength based services designed to improve their quality of life; and

WHEREAS, approval of this request will allow the Behavioral Health Division to use 2013 purchase of service and Mental Health Community Investment funds to address the specific needs of African American consumers and families through the delivery of six behavioral health preventative interventions strategies, including:

- 1. Infant Mental Health
- 2. Mentoring Program for Children
- 3. Hepatitis C Screening & Awareness
- 4. Self-Reflection Program
- 5. Mentoring Program for Fathers
- 6. Preventing Abuse/Neglect & Family Violence; and

WHEREAS, total expenditures included in this request are \$178,100; and

WHEREAS, there is no tax levy impact associated with approval of this request as funds sufficient to cover associated expenditures are allocated from the Behavioral Health Division's 2013 Budget; now, therefore,

BE IT RESOLVED, that the Director of the Department of Health and Human Services, or his designee, is authorized to enter into a purchase of service contract with M&S Clinical Services for \$178,100 to function as the fiscal agent for the Families Moving Forward Coalition for the time period of February 1, 2013 through December 31, 2013.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: January 24, 2013

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, Requesting Authorization to Enter Into a Purchase of Service Contract in the Behavioral Health Division with M&S Clinical Services for the Families Moving Forward Coalition

FISCAL EFFECT:

- No Direct County Fiscal Impact
 - Existing Staff Time Required
- Increase Operating Expenditures
(If checked, check one of two boxes below)
 - Absorbed Within Agency's Budget
 - Not Absorbed Within Agency's Budget
- Decrease Operating Expenditures
- Increase Operating Revenues
- Decrease Operating Revenues
- Increase Capital Expenditures
- Decrease Capital Expenditures
- Increase Capital Revenues
- Decrease Capital Revenues
- Use of contingent funds

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated.¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. The Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into a purchase of service contract in the Behavioral Health Division (BHD) with M&S Clinical Services to function as the fiscal agent for the Families Moving Forward Coalition for the period February 1, 2013 through December 31, 2013.

Approval of this request will allow the Behavioral Health Division to use 2013 purchase of service and Mental Health Community Investment funds to address the specific needs of African American consumers and families through the delivery of six behavioral health preventative interventions strategies:

1. Infant Mental Health
2. Mentoring Program for Children
3. Hepatitis C Screening & Awareness
4. Self-Reflection Program
5. Mentoring Program for Fathers
6. Preventing Abuse/Neglect & Family Violence.

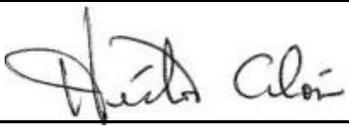
B. Total expenditures included in this request are \$178,100. BHD has identified existing purchase of service funds within the Community Services Branch and some funds from the Mental Health Community Investment initiative to fund this contract.

C. There is no tax levy impact associated with approval of this request as funds sufficient to cover associated expenditures are allocated from the Behavioral Health Division's 2013 Budget in objects 8164 and 8124.

D. No assumptions are made.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

Department/Prepared By Thomas F. Lewandowski, Fiscal & Management Analyst

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

Did CDPB Staff Review? Yes No Not Required

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: December 28, 2012

TO: Supervisor Marina Dimitrijevic, Chairwoman – Milwaukee County Board

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: **Report, from the Director of Health and Human Services, Requesting Authorization to Create a Trust Fund for the Behavioral Health Division’s Wraparound Milwaukee Program**

Issue

The establishment of a Trust Fund requires approval of the County Board per Resolution File No. 86-779 (a)(a), therefore the Director, Department of Health and Human Service (DHHS), is requesting approval to create a trust fund to be utilized for the receipt and disbursement of funds associated with the Behavioral Health Division’s (BHD) Wraparound Milwaukee Program (Wraparound).

In addition, Chapter 15.18 of the County’s General Ordinances governing departmental bank accounts must be revised to authorize the Director, DHHS, to establish the required accounts and to disburse funds from these accounts.

Background

BHD’s Child and Adolescent Community Services functions as a purchaser, provider and manager for the mental health services system for Milwaukee County youth and some young adults through the Wraparound Milwaukee Program and the Family Intervention and Support Services (FISS) Program. The Wraparound Milwaukee Program functions as a unique managed care entity under a contract and federal 1915(a) agreement with Medicaid for youth with serious emotional disturbance (SED) in Milwaukee County. Services are targeted to children and young adults up to age 24 with severe emotional and mental health needs, involved with two or more child or adult serving systems and who are at risk of residential treatment or other institutional settings.

Wraparound Milwaukee consists of five programs with different target groups of SED youth: Regular Wraparound – Child Welfare or Delinquency and Court Services referred youth who are court ordered into Wraparound; REACH – typically referrals are made through the school

systems and are for non-court involved SED youth; FOCUS – collaborative program with Delinquency and Court Services for SED youth at risk of juvenile correctional placement; Re-Entry Program - for SED youth transitioning out of the Department of Corrections and Healthy Transitions Program (Project O'YEAH) – for youth, age 16 to 24 with SED who need help obtaining mental health services, housing, employment, education, etc. as they transition to adulthood. There are currently approximately 1,000 slots available on a daily basis for Wraparound.

Wraparound currently receives a monthly capitated rate for each child enrolled in the program. This capitated rate is revised based on actuarial studies conducted at the discretion of the State. Based on correspondence from the State (see Attachment 1 and Attachment 2) and meetings with the Milwaukee County Comptroller, it has been determined that any excess funds received by Milwaukee County related to the Wraparound program must be spent on services for those clients and cannot be dropped to the County's bottom line. In 2012, Wrap is anticipating a significant surplus primarily due to clients in the newly developed and expanded REACH and Project O'Yeah (Healthy Transitions) programs are using less behavioral care and services than anticipated. Therefore, based on current 2012 projections, BHD is requesting that \$2.5 million in surplus capitated rate revenues be put into a trust fund for the Wraparound program to be used in the future for Wraparound clients. This trust fund will provide assurance to the policy makers and taxpayers of Milwaukee County that, even as capitated rates may change, the Wraparound program will be fully funded and not necessitate tax levy, barring any unforeseen major changes.

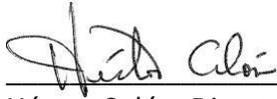
Fiscal Effect

The \$2.5 million that is recommended to be moved into the trust fund for Wraparound has not been anticipated in any BHD quarterly reports for 2012. Therefore there is no tax levy impact associated with this request. Establishing this trust fund will ensure that the financial stability of the Wraparound program is maintained in the future.

Recommendation

It is recommended that the Milwaukee County Board of Supervisors authorize the Director, DHHS, or his designee, to work with the Comptroller's Office to create a trust fund and change related Ordinances as detailed on the attached Resolution for the purposes of receiving and disbursing revenues received from the State for the Wraparound Milwaukee program. Approval of this recommendation will enable the Behavioral Health Division to comply with the requirements of CMS and the State in relation to the Wraparound Milwaukee program.

Respectfully Submitted,



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablich, County Board
Patrick Farley, Director, DAS
Craig Kammholtz, Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

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2 From the Director, Department of Health and Human Services, requesting authorization to
3 create a trust fund for the Behavioral Health Division's Wraparound Milwaukee Program, and to
4 have such funds separately banked from the County Treasurer, by recommending adoption of
5 the following:

6
7 A RESOLUTION

8
9 WHEREAS, Director, Department of Health and Human Service, has requested approval to
10 create a trust fund to be utilized for the receipt and disbursement of funds associated with the
11 Behavioral Health Division's Wraparound Milwaukee Program; and

12
13 WHEREAS, establishment of a Trust Fund requires approval of the County Board per
14 Resolution File No. 86-779 (a)(a); and

15
16 WHEREAS, the Wraparound Milwaukee Program functions as a unique managed care entity
17 under a contract and federal 1915(a) agreement with Medicaid for youth with serious emotional
18 disturbance (SED) in Milwaukee County; and

19
20 WHEREAS, services are targeted to children and young adults up to age 24 with severe
21 emotional and mental health needs, involved with two or more child or adult serving systems
22 and who are at risk of residential treatment or other institutional settings; and

23
24 WHEREAS, Wraparound currently receives a monthly capitated rate for each child enrolled
25 in the program and this capitated rate is revised based on actuarial studies conducted at the
26 discretion of the State; and

27
28 WHEREAS, based on correspondence from the State (see Attachment 1 and Attachment 2)
29 and meetings with the Milwaukee County Comptroller, it has been determined that any excess
30 funds received by Milwaukee County related to the Wraparound program must be spent on
31 services for those clients and cannot be dropped to the County's bottom line; and

32
33 WHEREAS, based on current 2012 projections, BHD is requesting that \$2.5 million in surplus
34 capitated rate revenues be put into a trust fund for the Wraparound program to be used in the
35 future for Wraparound clients; and

36
37 WHEREAS, this trust fund will provide assurance to the policy makers and taxpayers of
38 Milwaukee County that, even as capitated rates may change, the Wraparound program will be
39 fully funded and not necessitate tax levy, barring any unforeseen major changes; and

40
41 WHEREAS, Chapter 15.18 of the County's General Ordinances governing departmental bank
42 accounts must be revised to authorize the Director, Department of Health and Human Service to
43 establish the required accounts and to disburse funds from these accounts; now, therefore,
44

45 BE IT RESOLVED, that the Milwaukee County Board of Supervisors authorizes the
46 Comptroller, to create a trust fund for the purposes of receiving and disbursing revenues
47 received from the State for purposes of the Wraparound Milwaukee Program, and
48

49 BE IT FURTHER RESOLVED, the disbursement of such funds is subject alone to the rules of a cash
50 disbursement procedure prepared by the Department of Health and Human Services and
51 provided to Comptroller, and
52

53 BE IT FURTHER RESOLVED, that the Milwaukee County Board of Supervisors does hereby
54 adopt the following ordinance:
55

56 AN ORDINANCE

57 To amend Section 15.18 of the General Ordinances of Milwaukee County relating to
58 disbursement by other than the County Treasurer of other than department imprest funds.
59

60 The County Board of Supervisors of the County of Milwaukee does ordain as follows:
61

62 Section 1. Section 15.18 of the General Ordinances of Milwaukee County is amended by
63 adding the following:
64

65 Department and Account	Checks Signed By
66 (16)DHHS – Behavioral Health	Director, Department of Health and
67 Division – Wraparound Milwaukee	Human Services or Designee
68 Program	
69	

70 SECTION 2: This ordinance shall become effective upon passage and publication.
71
72

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 1/7/13

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report, from the Director of Health and Human Services, Requesting Authorization to Create a Trust Fund for the Behavioral Health Division’s Wraparound Milwaukee Program

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency’s Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency’s Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure		0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. ¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. The establishment of a Trust Fund requires approval of the County Board per Resolution File No. 86-779 (a)(a), therefore the Director, Department of Health and Human Service (DHHS), is requesting approval to create a trust fund to be utilized for the receipt and disbursement of funds associated with the Behavioral Health Division's (BHD) Wraparound Milwaukee Program (Wraparound).

In addition, Chapter 15.18 of the County's General Ordinances governing departmental bank accounts must be revised to authorize the Director, DHHS, to establish the required accounts and to disburse funds from these accounts.

B. Based on correspondence from the State (see Attachment 1 and Attachment 2) and meetings with the Milwaukee County Comptroller, it has been determined that any excess funds received by Milwaukee County related to the Wraparound program must be spent on services for those clients and cannot be dropped to the County's bottom line. In 2012, Wrap is anticipating a significant surplus primarily due to clients in the newly developed and expanded REACH and Project O'Yeah (Healthy Transitions) programs are using less behavioral care and services than anticipated.

The \$2.5 million that is recommended to be moved into the trust fund for Wraparound has not been anticipated in any BHD quarterly reports for 2012. Therefore there is no tax levy impact associated with this request. Establishing this trust fund will ensure that the financial stability of the Wraparound program is maintained in the future.

C. See Section B above

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

D. No assumptions.

Department/Prepared By Alexandra Kotze, Fiscal and Policy Administrator - DHHS

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

Department of Health & Human Services
Centers for Medicare & Medicaid Services
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519



September 7, 2012

Mr. Brett Davis
Medicaid Director
Division of Health Care Access and Accountability
1 West Wilson Street
P.O. Box 309
Madison, Wisconsin 53701

Dear Mr. Davis:

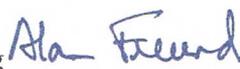
This letter is in response to the Wisconsin Department of Health and Family Services' (DHS) request for the Centers for Medicare & Medicaid Services (CMS) review and approval of managed care contracts for the Wraparound Milwaukee and Children Come First programs. These programs operate under §1915(a) authority.

The DHS contracts with Milwaukee County Human Services and Dane County Human Services for services to Medicaid recipients in the Wraparound Milwaukee and Children Come First programs. The contracts are effective from September 1, 2011 to June 30, 2013 and the capitation rates are effective from September 1, 2011 to June 30, 2012.

Since the State administers these programs through risk-based contracts with public entities, CMS requests the State provide the Regional Office with a written assurance that any funds paid to these counties primarily benefits Medicaid beneficiaries. Please note that receipt of this written assurance is a condition of approval for these PIHP contracts. Upon receipt of the written assurance, CMS' review of these contracts and capitation rates will be complete and they will be deemed compliant with the Federal contracting requirements, including the capitation rate-setting requirements, found at §42 CFR Part 438.

If you have any questions or comments related to this approval, please contact Maria Chickering at (312) 886-0326 or by email at maria.chickering@cms.hhs.gov.

Sincerely,

Acting 
Verlon Johnson
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

cc: Curtis Cunningham, Wisconsin Department of Health Services

ATTESTATION

I, Bruce Kamradt, hereby attest and affirm that any funds paid to the Milwaukee County Wraparound Milwaukee program through this contract with the State of Wisconsin Department of Health Services for services to Medicaid recipients primarily benefit these Medicaid recipients. I furthermore understand that since the State administers these programs through risk-based contracts with public entities, CMS requests the State provide the Regional Office with this written assurance that any funds paid to these counties primarily benefit Medicaid beneficiaries.

Bruce Kamradt
(Signature)

Oct 12, 2012
(Date)

Bruce Kamradt,
(Print Name and Title)
Project Director

10-12-12
(Print Date)

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: January 23, 2013

TO: Supervisor Peggy Romo-West, Chairwoman, Committee on Health and Human Needs

FROM: Héctor Colón, Director, Department of Health and Human Services
*Prepared by Paula Lucey, Administrator, Behavioral Health Division, on behalf of the
Mental Health Redesign and Implementation Task Force*

**SUBJECT: An informational report on the activities and action plans of the Mental Health
Redesign and Implementation Task Force**

Issue

In April 2011, the County Board of Supervisors passed a resolution (File No. 11-173) supporting efforts to redesign the Milwaukee County mental health system and creating a Mental Health Redesign and Implementation Task Force (Redesign Task Force) to provide the Board with data-driven implementation and planning initiatives based on the recommendations of various public and private entities.

As requested by the Committee on Health and Human Needs in September 2012, the Department of Health and Human Services (DHHS) and the Behavioral Health Division (BHD) are submitting a report on the implementation plan for the Redesign Task Force, developed in collaboration with community stakeholders and the contracted technical assistance providers.

Background

The Redesign Task Force was authorized in April 2011 in response to various public and private reports on how to modernize and improve the mental health system in Milwaukee County. The County Executive and Board of Supervisors charged DHHS with assembling a group of public and private sector stakeholders – including consumers, providers, advocates and administrators – with instructions to evaluate and prioritize the various recommendations to improve the Milwaukee County mental health system and to develop an implementation plan for those recommendations.

The Redesign Task Force began its work in July 2011 under the leadership of Pete Carlson, Vice President and CAO of Aurora Psychiatric Hospital and Aurora Behavioral Health Services, and Paula Lucey, BHD Administrator. Five Action Teams were charged with addressing key areas of the redesign and how to prioritize and advance select recommendations within those key areas – Person-Centered Care, Continuum of Care, Community Linkages, Workforce, and Quality.

In January 2012, responding to a directive from the New Behavioral Health Facility Study Committee (File No. 11-516), a presentation was made to the Committee on Health and Human Needs outlining the recommendations of the Redesign Task Force. Each Action Team presented the key recommendations from their area. A comprehensive presentation was also made at a public summit in February 2012, where consultants from the Human Service Research Institute (HSRI) provided feedback and guidance to the stakeholders in the redesign and implementation process.

In March 2012, BHD leadership, the Redesign Task Force, and its Executive Committee resolved to seek technical assistance for the process of implementing the affirmed recommendations. An RFP was developed in April and issued in May. Responses were received and evaluated in June, and the County Board of Supervisors passed a resolution authorizing the DHHS Director to execute a professional service agreement with ZiaPartners, Inc. The contract began September 1, 2012, and the consultants have worked with leaders from DHHS, BHD, and the Redesign Task Force and Action Teams since that time.

In December 2012, the DHHS Director and BHD Administrator presented an informational report to the Committee on Health and Human Needs on the progress and activities of the Redesign Task Force, including an action-oriented and flexible framework for planning, tracking, and recording progress on all redesign implementation activities, including those already accomplished or underway. The implementation activities were thereafter to be framed as “SMART goals” – i.e. **S**pecific, **M**easurable, **A**ttainable, **R**ealistic, and **T**imebound – to promote greater accountability and clearer reporting. The present work of the Redesign Task Force and Action Teams is aimed at finalizing those “SMART goals” for the March 2013 meeting cycle, even as implementation efforts toward those goals is ongoing.

The Chairwoman of the Committee on Health and Human Needs Committee has requested monthly informational reporting on the activities of the Redesign Task Force.

Discussion

The January 2013 meeting of the Redesign Task Force took place at St. Charles Youth and Family Services and was attended by 19 members, along with the contracted technical assistance team and 14 other visitors and staff. The Redesign Task Force was honored to welcome Supervisor Russell Stamper among the guests at the meeting.

The primary focus of the meeting was a discussion and collaborative revision of the “SMART goals” draft document and the feedback that had emerged from each Action Team in response to that draft, within their respective scopes of work. Following the meeting, the Redesign Task Force members were prompted for further critical review of the SMART goals via an online survey, to ensure consensus and adherence of the product to the affirmed recommendations and to the principles of person-centered recovery and community integration for persons with mental illness or co-occurring disorders. An additional round of Action Team meetings will also refine the goals in advance of the next Redesign Task Force meeting on February 6.

In addition to SMART goal development and revision, the Co-Chairs of each Action Team (AT) reported on the other areas of focus from their respective meetings in December and January.

- **Quality AT:** The group welcomed Serge Blasberg (NAMI PeerLink & Grand Avenue Club) as a new Co-Chair to join Henry Kunath (Phoenix Care Systems). The team is working closely with Dr. Andrew Keller – one of the subcontracted technical assistance consultants – and his colleagues at TriWest Group to develop a community data dashboard, incorporating input previously requested from Redesign Task Force members. Mr. Kunath also raised awareness about the culture of data and the challenges of developing trust among stakeholders in terms of sharing and utilizing data for the best of the system as a whole. Mr. Blasberg reiterated the importance of focusing on recovery, defined by SAMHSA as “a process of change through which individuals improve their health and wellness, live a selfdirected life, and strive to reach their full potential.”
- **Community Linkages AT:** Co-Chair Kristina Finnel (Mental Health America) reported that the team heard from Tom Reed (Public Defender’s Office) about ongoing efforts by the Community Justice Council to create a data link between criminal justice and mental health systems, which aligns very nicely with a redesign initiative represented in one of the SMART goals. Regarding

employment for persons with mental illness. BHD hosted a two-day seminar on Dartmouth University's evidence-based supported employment model, Individual Placement and Support, and the Community Linkages and Workforce ATs co-hosted a meeting of nearly 40 community agencies, employers, peers, and other stakeholders focusing on employment-related issues for persons with mental illness. Co-Chair Jim Mathy (DHHS Housing Division) reported on the development of a step-down level of housing from a CBRF, a project outlined in the approved plan for the \$1.1M remainder from the Community Investment funds and consistent with AT recommendations. The team is looking at existing waiting lists to identify and quantify community needs, and Mr. Mathy acknowledged potential challenges upcoming related to limited availability of rental assistance vouchers.

- Person-Centered Care AT: Excellent turnout at the January meeting included MC3 Steering Committee members and representatives from Families Moving Forward, who provided valuable input related to culturally sensitive services and supports. Similar outreach and diverse participation is a continuing priority for other ATs. The team is very interested in public education and stigma reduction and proposes that County Supervisors might host information sessions within their districts, potentially assisted by Tonya Simpson from DHHS. The team might also build off of ongoing stigma reduction efforts by Rogers InHealth. Co-Chair Peter Hoeffel (NAMI) noted that research has shown that stigma reduction needs to involve people with the actual lived experience of mental illness, or else it can inadvertently increase stigma.
- Continuum of Care AT: Co-Chair Mary Neubauer (Community Advocates) reviewed some emerging positive data related to PCS activity and reductions in waitlist numbers that had been shared by BHD staff at the team's meeting. The team is conducting an informal gap analysis survey to support ongoing efforts to create a comprehensive system map and identify strengths and weaknesses therein. It was suggested that the team might make recommendations to guide the proper allocation of roughly \$400K (included in the spending plan for the \$1.1M Community Investment remainder) earmarked for case management.
- Workforce AT: Co-Chair Scott Gelzer (Faye McBeath Foundation) reported that the team is currently focused on Peer Specialists. Baseline data is needed to determine specific and measurable goals for enhancing utilization of peer support. In consultation with community partners, BHD staff is developing a Peer Specialist Pipeline program with \$200K earmarked in the plan for the \$1.1M Community Investment remainder. The demand for training and continuing education for Certified Peer Specialists continues to exceed the supply. Redesign Task Force Co-Chair Pete Carlson (Aurora Behavioral Health) shared positive news that Aurora Psychiatric Hospital signed a contract to hire a Certified Peer Specialist.

The Redesign Task Force heard and unanimously approved a motion by Mr. Gelzer for the establishment of a Resource Strategy Team with the following goals: 1) Map the existing funding "model" used for mental health in Milwaukee County, for both acute care and community services; 2) Identify effective service funding models used in other communities that support community-focused ReDesign; 3) Identify role(s) and opportunities for private funding in mental health services; and 4) Recommend sustainable funding strategies to underwrite the redesigned mental health service system. This new team will be chartered and populated in the coming weeks.

The BHD Community Services Branch reported on public presentations at BHD by 16 different provider organizations on quality improvement projects that they had completed over the past several months. Each organization assembled a storyboard depicting its change process, outcomes, and lessons learned.

Upcoming Activities

Further feedback on the SMART Goals will be collected through a survey of Redesign Task Force members and subsequent meetings of the five Action Teams. SMART Goals will be finalized in conjunction with the implementation plan to be submitted to the Committee on Health and Human Needs for the March meeting cycle.

The new Resource Strategy Team will be chartered and convened in February.

The Community Linkages Action Team will pursue collaboration with the Community Justice Council on the matter of intersystem data linkage.

The Community Linkages and Workforce Action Teams will continue their collaborative efforts toward improving employment opportunities for people in recovery.

The Workforce Action Team will reach out to stakeholders for baseline data to guide goal-setting related to expanding utilization of Certified Peer Specialists. The BHD Community Services Branch will provide additional opportunities for Peer Specialist education.

The Continuum of Care Action Team will consider the matter of how best to utilize one-time funding earmarked for case management.

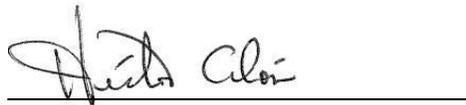
The Continuum of Care Action Team will analyze the results of its gap analysis survey and utilize the findings to contribute to a comprehensive system map, in collaboration with the Quality Action Team and Dr. Keller (TriWest Group).

The Quality Action Team will work with Dr. Keller to develop a community data dashboard to monitor quality measures and trends throughout the system.

The Redesign Task Force will meet on Wednesday, February 6, from 3:00 to 5:00. Interested parties should contact David Johnson for more information (414-257-5255 or david.johnson@milwcnty.com).

Recommendation

This is an informational report. No action is necessary.



Héctor Colón, Director
Department of Health and Human Services

cc: County Executive Chris Abele
Raisa Koltun, County Executive's Office
Kelly Bablich, Chief of Staff, County Board
Patrick Farley, Director, DAS
Craig Kammholz, Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
Antionette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, County Board Analyst