



RACIAL EQUITY BUDGET TOOL

Date Submitted: 7/15/20

Department: Department of Health and Human Services (DHHS)

Please note: each response field below has a 2,500 character limit.

STRATEGIC OBJECTIVE CATEGORY 1: DIVERSE & INCLUSIVE WORKFORCE

What activities are you doing to attract and retain a diverse and inclusive workforce in your department? What are the associated costs of these activities?

The Department of Health & Human Services employees account for 19 percent (approximately 800) of all county employees. And a larger percentage of Blacks and African Americans are employed within DHHS than the percentage overall in Milwaukee County. Likewise, there is also a larger percentage of Hispanic/Latinx employees within DHHS than the percentage in Milwaukee County. And even though DHHS is undertaking a number of initiatives to cultivate a diverse and inclusive workforce and increase our percentage of employees of color, there is still much work to be done. Based on a recent survey of 2019 Milwaukee County payroll data, the Comptroller's Audit Services Division identified the racial composition for DHHS/BHD's workforce (See charts at end of document)

According to the chart, though minorities account for about 55 percent of the overall workforce, this doesn't translate to management and leadership positions in DHHS. Workforce demographics analyzed by DHHS in 2018 found that while minorities comprised the majority of the workforce, they only reflected 19 percent of total managerial and 33 percent of leadership positions. The department has pursued several opportunities to improve the diversity of its workforce and leadership. DHHS continues to make efforts to increase diversity (i.e. racial, gender, etc.) of our employees. For example, a few of our divisions have hired young people of color with Public Allies which provides leadership opportunities to individuals for the development of their careers. Each Ally costs about \$3,000 per three months. DHHS has also established activities to enhance the culture of DHHS. Through a contract with Dr. Ramel Smith, DHHS has facilitated sessions with staff to address their concerns around racial and social justice. The Division of Youth & Family Services is currently establishing a contract with an organization that will train staff in Dialectical Behavior Therapy (DBT) as well as assist the division in recruiting people of color who are seeking master's degrees in counseling or are already working in the community to train them in DBT.

Efforts around staff retention include establishing workgroups such as Do the Right Thing, DSD's Employee Engagement Group - Love, Peace & Happiness and training and deployment of Racial Equity Ambassadors. We also strive to ensure diverse interview panels as well as include questions around racial equity.



How do you use professional development and advancement opportunities to advance equity in your department's workforce? What resources are used to support these opportunities for professional development and advancement?

We are undertaking a process to review all org charts with the intention to ensure that each position has a clear promotional track up to the Director's Office. We are working with managers on messaging what necessary steps each staff member can take to get the skills necessary for career advancement. We are making every effort to be intentional when posting for positions to ensure opportunities for internal candidates available. The Disabilities Services Division has experienced success in this area and recently promoted seven individuals of color to supervisory positions. In addition, several DHHS employees participated in the Leadership Excellence Program in 2020. Further, staff is encouraged to take additional trainings through LMS or outside training that promotes professional development. Some divisions have also encouraged cross trainings to help staff learn other job skills in order to advance to other positions within the department.



STRATEGIC OBJECTIVE CATEGORY 2: PEOPLE-FOCUSED DESIGN

How and when have service users, particularly users of color, and other key stakeholders been engaged to inform decisions about your requested budget (Who was involved, what was the forum, what were the results)?

Recently, DHHS established Civic Response Teams to ensure that people who are most impacted by COVID-19 have resources to meet their needs. Non-profits, governmental entities and DHHS have actively participated in these discussions. In addition, the Aging & Disability Resource Center (reflects 20% African American members) and the Combined Community Services Board (CCSB) host listening sessions and DHHS staff regularly report to these boards with updates on programs and services.

For 2020, engagement sessions were planned but due to COVID-19, these were canceled. By late 2020, however, we hope to host a participatory decision-making process around the spending plan for the \$1 million being earmarked in 2021 to support community-based initiatives to reduce youth incarceration. A panel of system-involved families, staff, judges and other stakeholders will identify a specific problem affecting the youth justice in Milwaukee County. DHHS will then solicit RFP responses intending to solve the identified problem. The panel will reconvene to review RFP responses and determine which project(s) for which to move forward.



What are the multi-lingual needs of your department's service users? How do you use your budget to meet these language needs?

DHHS utilizes both inhouse and contracted providers to support the multi-lingual service needs of the department. We have about 13 bilingual FTEs providing direct services to our customers. DHHS has an interpreter service provider which costs about \$10,000 annually. This primarily supports the Disability Resource Center and other programs within DSD. We also contract with minority service vendors such as Alianza Latina Aplicando Soluciones (Latina, \$30,000) and Hmong American Friendship Association (\$25,000) to support the DRC's outreach and marketing efforts and provide access to long-term care services for individuals with disabilities in the various ethnic communities. However, we often struggle to adequately fund all non-English speaking service needs. We have all documents, pamphlets and signage available in several languages. Many of our grant and Medicaid-funded services do not separately fund translation services. We rely on a very low number of bilingual clinicians to meet many of our non-English language needs. Finally, DHHS uses Telecommunications Relay Service for consumers calling who are deaf or speech impaired. We have Hearing Loop technology for in-person office visits for consumers who use hearing aids.

STRATEGIC OBJECTIVE CATEGORY 3: EMPLOYEE PERSPECTIVE

Our employees can be a great resource for innovation and knowing what is working well and what needs work. Have you engaged a diverse group of frontline employees to inform decisions about your proposed budget changes? If yes, how was input solicited, who was involved, and what were the results?

Staff at all levels are included in strategic planning to guide long-term departmental goals and direction. In early 2020, DHHS also conducted a racial equity readiness assessment and held listening sessions for staff. This provided a unique opportunity to expand engagement efforts with our employees.

In terms of the budget process itself, DHHS is working toward implementing a participatory budgeting process to include staff input as well as community input. DHHS has invested a significant amount of time and resources to engage its workforce and solicit feedback on a number of issues. We need to devote more time to soliciting employee feedback around the budget.



STRATEGIC OBJECTIVE CATEGORY 4: IMPROVED PERFORMANCE & EQUITABLE PRACTICE

Describe ways in which racial and economic data was used to prioritize resource distribution. (Data can include sources found in the resources section of this tool, department collected data, or any other relevant data from other sources.)

Overall, DHHS participants include approximately 75 percent people of color. This is disproportionately higher than the Milwaukee County as a whole. For this reason, DHHS prioritized changes that would not impact services in arriving at the \$1.3 million tax levy cut. The \$1 million community investment in DYFS is expected to serve 90 to 95 percent people of color while minimizing youth incarceration. If we had additional local funding, we would put more resources into workforce development (with a focus on diversity), translation services, and primary prevention services. In 2018, DHHS served 84,778 individuals throughout its divisions and energy assistance. The breakdown for participants is as follows:

- DYFS: 1,452 (2%)
- BHD (excluding Wraparound Milwaukee): 13,017 (15%)
- DSD: 5,843 (7%)
- Housing Division: 2,385 (3%)
- Wraparound: 1,306 (2%)
- Energy Assistance: 60,775 (72%)

Data Snapshot:

Males received the majority of services provided by BHD (61 percent) and Wraparound (65 percent) while DYFS' participant population was 79 percent male. Housing and DSD each served over 50% females in their programs with Housing being slightly over 66 percent.

The racial breakdown for participants is as follows with all other groups being at less than 1%:



Division	African American	White	Latino
DYFS 2018	77%	13%	9%
DSD 2018	68%	28%	0%
Housing 2019	69%	30%	0%
BHD 2018 (ex. Wrap)	49%	33%	7%
Wraparound 2018	64%	14%	14%

What are the positive or negative racial equity implications of your proposed budget changes? For reference departments may refer to the "Form 1 – Major Changes" tab of your Supplemental Forms 2021 spreadsheet. Any change with identified impacts should be described.

Due to its 2021 tax levy target, DHHS is unable to reinvest all of the \$2.9 million in tax levy savings from Lincoln Hills into diversion/community services due to its budget target:

Only \$1 million of \$2.9 million in savings preserved

Funds will be used for Credible Messengers, an Achievement Center, and other programs aimed at reducing recidivism, competency building, youth engagement, and community capacity building.

Impact: This reduction according to the target will have a long-standing impact on our capacity to disinvest from incarceration and reinvest in effective community-based services. This, in turn, may result in diminished opportunities to reduce racial disparities within the youth justice system, especially related to incarceration. Youth Aids reinvestment is the only available resource for this reinvestment, and if it is used to offset operational costs historically covered by tax levy the county will forego significant opportunities for justice system reform.

Other impacts include an additional \$900,000 redirected into contract expansion. This reflects funding of about \$200,000 for emergency placements and Support Home Care and about \$700,000 for out-of-home care for DYFS youth. For 2021, an increase of \$187,000 is included for adults-at-risk in need of emergency placement and for Supportive Home Care which assists people with disabilities with their daily living needs affording them the independence to remain in their own homes. This change will have a positive impact on racial equity as about 68 percent of DSD's customers are people of color.

Over the past few years, out-of-home care costs for DYFS youth have been increasing, and the \$700,000 in funding will help address the budget gap for these services. While the ideal situation is for a youth to be placed at home, in their community, some of these out-of-home care services are court-ordered and this funding is needed to align the budget with actual costs. The \$700,000 increase for DYFS youth is offset by \$240,000 in decreased enrollments in Wrap.

What are the expected benefits and potential unintended consequences to disadvantaged communities of your proposed budget changes?

a. What analysis did you do to determine the expected benefits and potential unintended consequences?

DHHS collects demographic data across all levels of care and has used that to inform decisions. Additionally, public feedback is collected in relation to the budget and on specific topics during various times of year. This is helpful in identifying blind spots of gaps in care that we may not be aware of.

b. What will your department do to mitigate unintended consequences resulting from your proposed budget changes?

As stated in question 4, we know that we serve a substantially higher percentage of people of color in Milwaukee County than the population as a whole. Our top priority in this budget was in maintaining all current services as any service cut may have unintended consequences on racial equity in Milwaukee County. The largest unintended consequence in this budget is the inability to fully reinvest the \$2.9 million in savings from the anticipated decline in the Average Daily Population (ADP) of youth at Lincoln Hills and Copper Lake Schools. By preserving these funds, we could make greater strides in our goal to make Milwaukee County the healthiest county in Wisconsin by putting an even greater emphasis on reducing recidivism, competency building, youth engagement, and community capacity building.



Responses	%
American Indian/Alaskan	1%
Asian	2%
Black	42%
Hispanic	8%
Two or More Races	2%
White	45%
	100%

