

2018 Annual Report



# Mission

Promoting, protecting, and preserving health through partnerships with people and communities

# **Vision**

Everyone living better, longer

# **Guiding Values**

- We work to ensure health equity
- We promote trauma informed practices internally and externally
- We use collaborative processes to achieve our vision and mission
- We lead the community in the use of evidence based public health practices
  - We improve programming through quality improvement
  - We provide an environment of professional growth and satisfaction

# **Programs**

- Communicable Disease
   Prevention and Control
- Rabies Prevention
- Immunizations
- Birth to Three Program
- Maternal Child Health
- Women, Infants and Children (WIC)
- Reproductive Health Services

- Environmental Health Services
- Community Health Promotion
- Domestic Violence Victim Advocacy
- Refugee Health Services
- Emergency Preparedness
- Fluoride Rinse Program
- Car Seat Program
- Community Sharps Disposal

# 2018 Public Health Staff

#### **DHHS Director**

Stacey Frolik

# **Public Health Program Manager**

Laura Sauve

# **Nursing Staff**

Becky Tollers Brianna Olson Beth Wood Kathy German-Olson

## **Environmental Health**

Travis Peterson Mackenzie Cole Jena Florczak

#### **Administrative Staff**

Ann Whittington/Taylor Myers (12/2018)
Sue Pruzek

# Women Infants & Children (WIC)

Marla Prytz, Director
Nichole Thompson
Amber Fiera- Lactation Peer Educator

# **Birth to Three**

Heather Boos Brenda Baribeau

# **Public Health Specialist**

Jeanine Schultz/Sarah Turner (10/2018)

# **Domestic Violence Victim Advocate** *Kristy Moran*



Public Health Staff Celebrate National Influenza Vaccination Week



Dr. Amy Muminovic, Mayo Clinic Health System-Northland, became public health's medical advisor in July. Our former medical advisor, Dr. Catherine Soderquist, retired.

The 2018 Public Health Annual report is organized using the 10 essential public health services plus management and governance. These areas align with the 12 domains the Public Health Accreditation Board endorses. The essential public health services are recognized as public health services that all communities should provide.

# **Essential Service #1: Monitor Health**

Monitor health status to identify and solve community health problems

**2018 Community Health Assessment:** Public Health, along with community partners and residents completed our Community Health Assessment in 2018. A community meeting was held on September 26, 2018 with the community identifying its top three health priorities: Substance Use, Mental Health & Chronic Disease. Public Health continues to collaborate with our health care providers, community organizations, and individuals to improve conditions surrounding these issues. This collaborative process is named *Thrive Barron County: Growing Together in Health*.



# **Barron County's Top 3 Health Priorities**



Substance Use



**Mental Health** 



Chronic Disease Prevention and Management

A variety of methods were used to gather quantitative and qualitative data to identify our health priorities including a comprehensive secondary data collection, a community health survey, key informant interviews, focus groups, and a community meeting.

# **Essential Service #2: INVESTIGATE**

Diagnose and investigate health problems and health hazards in the community

Barron County Public Health investigates health and environmental hazards every day. Public health uses the Wisconsin Electronic Disease Surveillance System (WEDSS). This system allows public health to obtain suspect and confirmed diseases via an electronic database. We also partner with community members, schools, and long term care facilities to share concerns about suspect and known communicable disease cases and outbreaks.

# 2018 Communicable Disease Trends



The 2017-2018 influenza season was one of the worst since 2009. The Wisconsin rate
of influenza vaccination during the 2017-18 influenza season was 37%; This is below
the Healthy People 2020 goal of 70% vaccination rate for influenza.



• Cases of Gonorrhea almost doubled from 2017 to 2018. Sexually transmitted infections affect all Barron County age groups however, 15 to 24 year olds continue to see the most cases.



 Cases of Lyme disease decreased from 59 to 17. This is the lowest number we have seen in many years. Public Health increased its Lyme disease education outreach and prevention activities in 2018.

# 2018 Confirmed and Probable Communicable Diseases

Disease	2014 Data	2015 Data	2016 Data	2017 Data	2018 Data
Tick Borne Illness					
Lyme Disease	59	72	34	59	18
Ehrlichiosis/Anaplasmosis	22	25	27	25	10
Babesiosis	1	3	3	4	3
Rocky Mountain Spotted Fever	0	0	0	0	1
Disease	2014 Data	2015 Data	2016 Data	2017 Data	2018 Data
Other Communicable Diseases					
Blastomycosis	0	0	0	0	1
Campylobacter	11	9	13	20	23
Carbopenemase-producing carbapenem-resistant Enterobacteriaceae (CP-CRE) Became reportable on 7/1/18	-	-	-	-	1
Disease	2014 Data	2015 Data	2016 Data	2017 Data	2018 Data

Carbon Monoxide Poisoning Became reportable on 7/1/18	-	-	-	-	1
Cryptosporidiosis	7	8	12	9	17
Cyclosporiasis	0	0	0	1	2
E-Coli Shiga Toxin Producing (STEC)	1	4	7	3	10
E-Coli Enteropathogenic (EPEC)	0	0	6	3	12
E-Coli Enterotoxigenic (ETEC)	0	0	0	6	3
Giardiasis	7	4	16	4	5
Hepatitis C Classification changed in 2016	19	22	1- acute 18- chronic	2-acute 14-chronic	1-acute 16-chronic
Hepatitis E	0	0	0	0	1
Legionellosis	0	0	0	3	1
Malaria	1	0	1	0	1
Methemoglobinemia	0	0	0	0	1
Methicillin- or Oxicillin Resistant S. Aureus (MRSA/ORSA)	0	0	0	1	1
Mycobacterial Disease (Non- Tuberculosis)	10	6	3	7	6
Parapertusis	1	0	0	2	1
Plesiomonas Shigelliodes	0	0	2	0	0
Salmonella	3	8	11	9	8
Shigellosis	3	1	1	0	1
Streptococcal Disease, Invasive Group A and Group B	7	8	7	3	8
Latent Tuberculosis Infections Became reportable on 7/1/18	63	63	29	45	31
Toxoplasmosis	0	1	0	0	0
Tuberculosis	0	1	1	0	2
West Nile Virus	4 suspect	20 suspect	0	1	0
Zika Virus Disease	0	0	1	0	0
Sexually Transmitted Infections	2014 Data	2015 Data	2016 Data	2017 Data	2018 Data
Chlamydia Trachomatis	128	138	137	116	126
Syphilis	1-Late Latent	0	0	1- Late Latent 1-Secondary	1-Primary 1-Late Latent 1-Early non primary/ non secondary
Gonorrhea	3	6	4	13	25

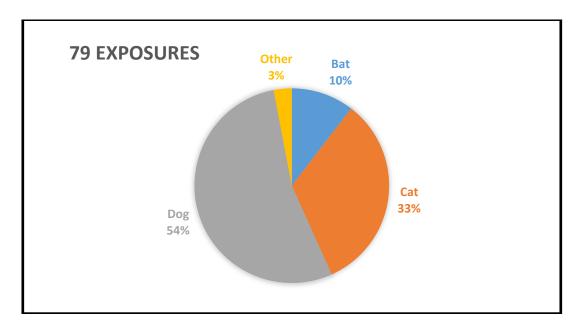
Disease	2014	2015	2016	2017	2018
Disease	Data	Data	Data	Data	Data
Vaccine Preventable Diseases					
Pertussis	2	4	6	12	10
Varicella	3	7	7	4	2
Streptococcus Pneumoniae	5	1	5	10	5
Haemophilus Influenzae	1	2	2	2	2
Hepatitis B	2	3	1	2-Acute	5-Chronic
Influenza Associated Hospitalizations	19	31	21	55	77

**Human Health Hazard Control:** Public health investigates complaints subject to the provision of the County Human Health Hazard ordinance. Goals are to protect the health of the public from illness and disease caused by human health hazards.



- 18 Health hazard complaints investigated in 2018
  - o Investigations included housing, hoarding, unsanitary conditions, junk/garbage/vehicles, water supply/wells, septic issues, vermin and animals.

**Rabies Prevention:** Public Health works with area hospitals, veterinarians, and our animal control officer to investigate and monitor animal contacts that could transmit rabies.



# **Essential Service #3: INFORM AND EDUCATE**

Inform, educate, and empower people about health issues

Barron County Public Health Programs use traditional and modern methods to communicate with residents including newspaper articles, school presentations, health fairs, brochures, posters, websites, Facebook, closed circuit TV in the waiting room, and e-mails. Below are examples of how public health used multiple messaging techniques in 2018 to educate residents about Lyme and other tick-borne disease prevention.

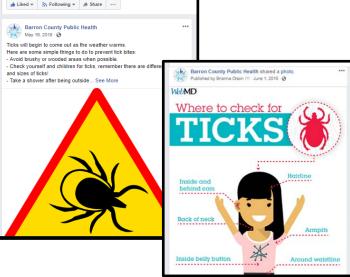
Bug spray, tweezers, and education were provided to community members at the 2018 Barron County Fair.



Help to prevent tick borne diseases in Barron County

The news of rathers were not the house were not the first of the county of

Tick prevention Facebook posts from May and June 2018.



trails, and outdoor recreation sites.

# Essential Service #4: COMMUNITY ENGAGEMENT

Mobilize community partnerships and action to identify and solve health problems

## **Partnerships**

Barron County Public Health programs partner with multiple groups and organizations to share resources and address community health issues.



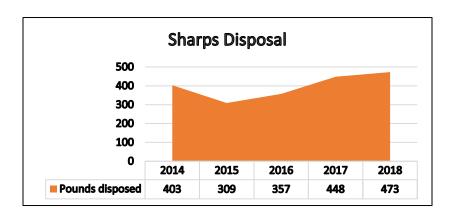
## **Thrive Barron County**

Thrive Barron County is a unique partnership that has been collaborating on health solutions since 2011. Thrive focuses on the top health concerns identified by the community through the Community Health Assessment. Our current priorities are: Substance Use, Mental Health, and Chronic Disease Prevention & Management.

## **Sharps Disposal**

Public health works with area pharmacies to offer residents safe, coordinated disposal of needles, lancets, and other bio-hazardous sharps. Pick up your red container today!





The Barron County Community Coalition; Where Community & Collaboration Grow is a network of businesses, organizations and community members working together to create healthier and safer communities in Barron County. The Coalition implements the Drug Free Communities Grant and facilitates the substance use initiatives from the Community Health Improvement Plan. Barron County Public Health provides resources and staff time to implement coalition objectives. Highlights of 2018 include the Youth Challenge where youth created media campaigns to combat electronic cigarette use in area schools- "Escape the Vape" and obtaining the Comprehensive Addiction & Recovery Act grant to reduce youth methamphetamine use.





Community Connections to Prosperity is a coalition working to create an understanding of how poverty impacts our community. Public Health is an active member of the coalition. A highlight of 2018 includes combining our Thrive Mental Health Action Team with the Community Connections to Prosperity team working to address mental health needs. Together we obtained a 2018 "ABC's for Healthy Communities" grant. The grant increases the capacity of existing organizations and volunteers to recognize and intervene in mental health situations. In training professionals, lay people, and volunteers we increase the capacity of the community to intervene in mental health situations and decrease mental health stigma.

#### Western Wisconsin Public Health Readiness Consortia (WWPHRC)

The Western Wisconsin Public Health Readiness Consortia is a regional consortia consisting of 13 local public health agencies and 1 tribal health agency. The purpose of the consortia is to work together to develop local capacity to effectively respond to all types of health emergencies including bioterrorism, infectious disease outbreaks, and natural disasters.





# **Essential Service #5: POLICIES AND PLANS**

Develop policies and plans that support individual and community health efforts

# 2016-2018 Community Health Improvement Plan

- 1) Substance Use
- 2) Mental Health
- 3) Chronic Disease Prevention & Management

# **Substance Use**



Public Health continues to work with partners and the Barron County Community Coalition to reduce youth substance use, decrease methamphetamine use, and reduce youth and adult tobacco use in Barron County. A sample of 2018 activities included the kNOw Meth Awareness Day, Kick Butts Day, "Escape the Vape" youth challenge, and success seeking grants to impact substance use including the Comprehensive Addiction & Recovery Act Grant and Brighter Futures Initiative.

# **Mental Health**



QPR stands for Question, Persuade, and Refer. People trained in Question, Persuade, Refer learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help. Through a grant from Marshfield Clinic, we were able to train 12 Question, Persuade Refer facilitators.

Youth Mental Health First Aide was provided to 48 community members who work with youth. Youth Mental Health First Aid USA is an 8 hour public education program which introduces participants to the unique risk factors and warning signs of mental health problems in adolescents, builds understanding of the importance of early intervention, and teaches individuals how to help an adolescent in crisis or experiencing a mental health challenge.

# **Chronic Disease Prevention & Management**



In spring each year Cumberland Healthcare, Lakeview Medical Center and Mayo Clinic Health System work together with Public Health to offer free "Know Your Numbers" events. In 2018 the events provided free biometric screenings to 666 community members.

**Strategic Plan:** Public health is implementing its 2017-2021 Strategic Plan which was created in 2016. Overall strategic plan goals: 1) Improve communication 2) Increase collaboration 3) Workforce development 4) Strengthen fiscal & program development

**Voluntary Public Health Accreditation**: Public health accreditation is a voluntary process that confirms health departments have met nationally adopted standards for services. Barron County Public Health Programs is actively working to meet accreditation standards. Documentation was submitted to the Public Health Accreditation Board and a site visit occurred on December 6 & 7, 2018. Barron County expects to hear the results of this assessment in spring 2019.

# **Essential Service #6: PUBLIC HEALTH LAWS**

Enforce laws and regulations that protect health and ensure safety

Wisconsin state statutes and county ordinances are written to protect the public. Public health professionals are tasked to enforce laws that protect the public's health.

**DNR Well Water Program:** Public health is an agent for the Department of Natural Resources to inspect and sample transient non-community wells. The program requires annual testing for bacteria and nitrates for any well that has public access to water for at least 25 people a day and 60 days of the year.

#### **Outcomes:**

- All 147 Transient non-community wells were sampled.
- 39 Sanitary survey well inspections were completed

# Department of Ag, Trade & Consumer Protection & Department of Safety & Professional Services Agent Program: Barron County is an agent for the Department of Ag,

Trade & Consumer Protection to license and inspect retail food outlets, restaurants, hotels, motels, swimming pools, campgrounds, bed and breakfasts, tourist rooming houses, and the Department of Safety and Professional Services to license and inspect tattoo and body piercing establishments. Eleven facility complaints were investigated in 2018.





**WI Wins**: uses positive reinforcement to reduce illegal tobacco sales to minors. It congratulates local clerks who do not sell tobacco to youth, while educating those who would. In 2018 youth volunteers used their legal identification to attempt to purchase nicotine products. We found that retailers asked for identification but failed to accurately check the identification and illegally sold to minors.



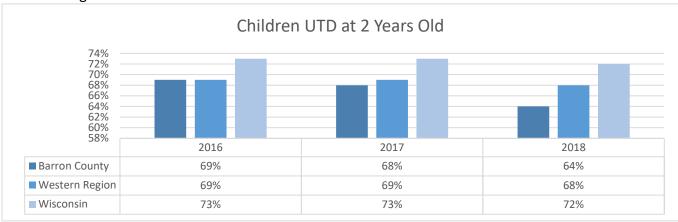
Alcohol Age Compliance Checks: 2018 showed an improvement in retailers passing alcohol age compliance checks



# **Essential Service #7: ACCESS TO CARE**

Promote strategies to improve access to health care services

**Immunization Program:** Immunizations are one of the most important public health victories. According to World Health Organization estimates, vaccinations save the lives of more than 3 million people worldwide each year and prevents millions of others from suffering from diseases and permanent disabilities. Barron County's rate for having children up to date with vaccinations by 2 years old is decreasing.



**School Immunization Clinics:** Influenza vaccinations are offered free of charge at each school during a 30 day period in October and November each year. These clinics are an important component of influenza prevention and are an important emergency preparedness practice activity. The events allow public health to practice mass distribution in preparation for a public health emergency.

2018 School Based Influenza Vaccination Clinics					
	2018 2018 Total 2018 Percent 2017 Percent				
	Number	School	Vaccinated by	Vaccinated by	
	Vaccinated Enrollment PH PH				
TOTAL	946	7259	13%	13%	

**Healthy Beginnings +:** Services for Medicaid eligible pregnant women with high risk for adverse pregnancy outcomes. Healthy Beginnings + provides services to reduce medical and non-medical factors that contribute to the psychosocial, behavioral, environmental and nutritional factors of high risk pregnant women. 24 pregnant women received case management services through the program in 2018.



# **Reproductive Health Services:**

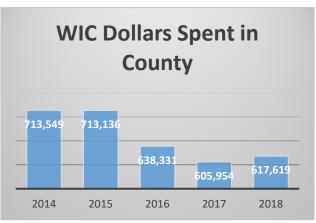
The reproductive health program works to decrease the number of unintended pregnancies and sexually transmitted infections through reproductive health education and direct services. We provide low or no cost sexually transmitted infection testing, reproductive health clinical services, and we assist community members in signing up for Medicaid programs, including Family Planning Only Services. In 2018 we provided care for 214 women and 125 men.

**Birth to 3 Program:** The Birth to 3 Program is Wisconsin's early intervention program for infants and toddlers with developmental delays or disabilities and their families. A federal law, The Individuals with Disabilities Education Act, provides a framework for a comprehensive program for coordinating developmental, health and social services within the family's community. The Wisconsin Department of Health Services oversees the Birth to 3 Program in Wisconsin.

Year	# Referred in 2018	# Enrolled in 2018	# Referred to schools for continued services at age 3	Total Families Served throughout 2018
2018	137	47	44	126
2017	147	72	26	133
2016	151	50	21	88
2015	118	38	22	99
2014	159	60	27	109

WIC (Women, Infants, & Children): WIC provides food and nutrition information to help keep pregnant and breastfeeding women, infants and children less than 5 years of age healthy and strong. It is vital to know that WIC approved food are healthy and nutritious and approved by the United States Department of Agriculture (USDA). WIC funding puts in excess of half a million dollars of funding into the Barron County economy. WIC also receives a grant, "Fit Families", which works with 25 families to provide enhanced services to reduce childhood obesity. WIC has a Farmer's Market Program to provide funds for families to spend on fresh Wisconsin produce at local Farmer's Markets each summer.







# **End Domestic Abuse Barron County (EDABC)**

The End Domestic Abuse Barron County works to support system-wide efforts to prevent domestic abuse and provide services to victims of domestic violence. The mission of the group is to reduce violence within the community by reducing it within the family. Barron County Dept. of Health and Human Services employs a domestic violence abuse victim advocate. This position was housed within the public health unit throughout 2018. Starting January 1, 2019 Embrace, a local nonprofit specializing in domestic and sexual violence prevention, will begin providing advocacy services for Barron County residents.

# **Essential Service #8: WORKFORCE**

Assure competent public and personal health care workforce



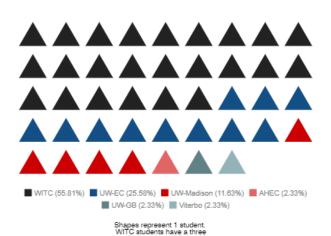
# 2018 New Public Health Nurse of the Year

Brianna Olson, Barron County Public Health Nurse, received the 2018 Lillian Wald New Public Health Nurse of the Year Award at the Wisconsin Public Health Association annual conference on Aug 1.

# **Epidemiology in Action 2018**

Beth Wood was one of seven Wisconsin Public Health Staff selected to attend Epidemiology in Action 2018, June 4-15, 2018 at the Emory University – Rollins School of Public Health in Atlanta, GA. A scholarship paid for her expenses.

Students at Barron County Public Health





# 2018 Students

Public health works closely colleges and universities to provide observation and project based learning for nursing, medical and other health profession students. In 2018 we hosted students from Wisconsin Indianhead Technical College (WITC), UW Eau Claire, Area Health Education Center (AHEC), UW Green Bay, UW Madison, and Viterbo University Exposure to public health programs often leads to future careers in public health.

# Essential Service #9: PERFORMANCE MANAGEMENT AND QUALITY IMPROVEMENT

Evaluate effectiveness, accessibility, and quality of personal and population-based health services

Performance management and quality improvement plans and practices allow public health to set and monitor goals and provides a framework to use continuous quality improvement to improve health.

# **Performance Management**

Public Health identifies goals for each program, monitors progress toward these goals each quarter, and reports results to our Health & Human Services Board. If we are falling more than 20% behind a goal we implement a quality improvement project to improve our outcomes.

# **Quality Improvement**

The public health improvement team created a "Mountain Climber" display in 2018 to help staff see progress toward improvement goals.

# **Completed Projects:**

- Environmental health re-inspection tracking
- Develop environmental health intern work plan
- System for updating Department of Natural Resources transient non-community well list
- Website access to reproductive health forms
- Handicap accessible bathrooms on the 3<sup>rd</sup> floor
- Better exit signage
- Electronic reproductive health inventory system
- ID use for tobacco compliance checks

## Other QI Projects Carrying Over to 2019:

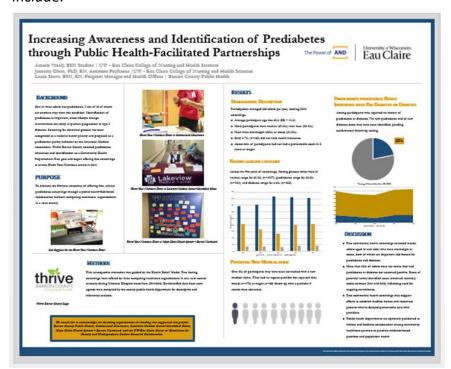
- Move Medicaid billing from the fiscal unit to public health using our electronic medical record
- Paperless charting
- Improve privacy at Rice Lake WIC clinic
- Increase the number of 2 year olds up to date on vaccinations



# Essential Service # 10: Evidence based practices

Research for new insights and innovative solutions to health problems

Evidence-based public health practice is using the best data and evidence to create or choose, implement and study approaches we use to improve health. Examples of evidence based practices include:



# Academic Poster Presentation

Amaris Vesley, UW-Eau Claire
BSN Student, Dr. Jeanette Olsen,
UW-Eau Claire Professor and
Laura Sauve, Barron County
Health Officer partnered to
share information on Barron
County's successful prediabetes
awareness and identification
efforts at the 2018 Wisconsin
Public Health in Practice
Conference.



The Diabetes Prevention Program is a proven program that helps participants reduce their risk of developing type 2 diabetes by 58%. Public Health works with the State of Wisconsin and receives chronic disease funding to support area Diabetes Prevention Programs. In 2018 Marshfield Medical Center- Rice Lake and Cumberland Healthcare became CDC recognized providers and were approved to bill the Centers for Medicare & Medicaid Services for the program leading to sustainability.

#### 2018 New Evidence Based Programs Initiated: QPR and Mental Health First Aid

Public Health worked with Community Connections for Prosperity Coalition to obtain grant funding to bring Question, Persuade, Refer (QPR) and Mental Health First Aid programs to Barron County. Question Persuade, Refer is a short suicide prevention program which trains community members to recognize the signs someone may be considering suicide, how to talk to them about what they see, and how to help them access professional care. Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.

# **MANAGEMENT & GOVERNANCE**

Maintain administrative and management capacity & maintain capacity to engage the public health governing entity

## **Policy Work**

Public health programs continually update policies and procedures that reflect the work of public health employees. In 2018 the Health & Human Services Board, with public health staff, created or updated and approved 12 public health policies and procedures.

2018 Policy Work			
Blood Pressure Screening-Update	Car Seat Safety & Inspection- Update		
Standing Orders: Chlamydia, Gonorrhea and	Environmental Health Re-Inspection- New		
Trichomoniasis Treatment- Update			
FDA Data Sharing Policy- New	HIV Testing & Counseling- Update		
After Hours Access- Update	Radon Testing- Update		
Refugee Health Screening- Update	Release of Immunization Record –Update		
Sharps Collection & Disposal-Update	Vaccine Management-Update		

## **Barron County Health & Human Services Board**

The Barron County Health & Human Services Board is made up of elected members and appointed community members. The Board meets on the 4<sup>th</sup> Monday of each month at 9:30 am in the Barron County Government Center.

#### 2018 Board Members:

Karolyn Bartlett- Chair, County Board Representative

Andrew Mommsen- Vice Chair, County Board Representative

Ron Fladten- County Board Representative

Robert Heil- Citizen Member

Lisa Janty- Citizen Member

Toniann Knutson- Citizen Member

Lynn Kolpack- Citizen Member

Carol Moen- County Board Representative

Dr. Amy Muminovic- Citizen Member

Mary Nedland- Citizen Member

Eric Pannier- County Board Representative

Dr. Catherine Soderquist- Citizen Member

Oscar Skoug- County Board Representative

For questions or comments on the Public Health Programs Report please contact Laura Sauve, Public Health Program Manager at 715-537-6109 or laura.sauve@co.barron.wi.us

# BEHAVIORAL HEALTH SERVICES UNIT

# **Barron Area Recovery Center (BARC)**

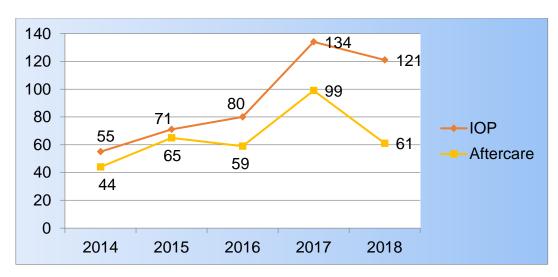
The Barron Area Recovery Center (BARC) is a state certified program that provides outpatient substance abuse services to Barron County residents. Barron County added gender-specific IOP and Aftercare services in October 2018. Barron County is one of a small group of counties to offer this programming.

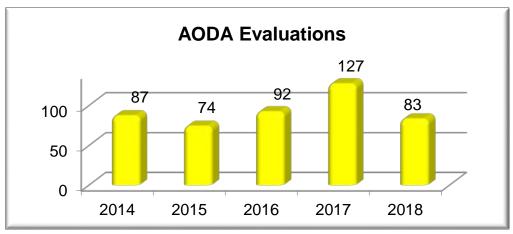


Dan McNamara

Ron Lessard

Amelia Eckes





# **Drug and Alcohol Court (DAC)**

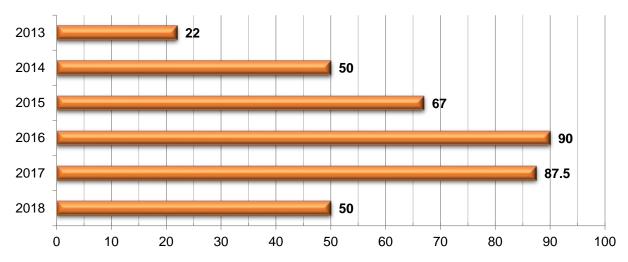
The Barron County Drug and Alcohol Court is specifically designated and staffed to handle cases involving drug offenders through an intensive, judicially monitored program of drug treatment, rehabilitative services, and strict community supervision.

The program consists of a multi-disciplinary team which includes a judge, a law enforcement representative, a public defender, a district attorney representative, a substance abuse counselor, a BCDAC coordinator/case manager, a Department of Corrections officer and a Department of Health and Human Services social worker.

The program follows the treatment court standards developed by the Wisconsin Association of Treatment Court Professionals which incorporated components of The National Association of Drug Court Professionals best practice standards. The program uses evidence-based practice approaches and is a multi-phased treatment process.

BCDAC Participants				
Year	Total Participants	Total graduates	Total Terminations	
2006-2016	97	42	43	
2015	11	3	8	
2016	15	5	6	
2017	16	5	8	
2018	22	6	7	

# % of DAC participants with meth as primary drug of choice



Expected outcomes of graduation from the BCDAC program are abstinence from substance use, increased employment, decreased recidivism rates, increased housing stability, decreased criminal justice involvement, improved family functioning and social connectedness.

# Barron, Eau Claire & St. Croix (BESt) Comprehensive Community Services

Barron County left the WRRWC Consortium, applied for, and received, its own CCS Certification. Barron County transitioned to a shared services model with Eau Claire and St. Croix Counties. We are now part of the BESt CCS Program.



Penny Dunlavey

Terry Holmstrom

Drew Schultz

Jeni Olson

AJ Simon

Dawn Cornelissen

CCS is available to consumers with mental health or substance use issues across the lifespan. Flexible and individualized services are available to Barron County residents which facilitates psycho-social rehabilitation and recovery. The program provides for individuals with more needs the traditional outpatient services, but lower intensity than Community Support Programs.

CCS Enrollments		
2016	24	
2017	29	
2018	34	

# **CCS Recovery Concepts**

- > Active Consumer participation in recovery plan
- > Consumer control of rights, goals, and decisions
- Manage mental health and substance use symptoms
- Successful independent community living

# **CCS Program Services**

- > Case management and service facilitation
- > Skill development and enhancement
- Communication and interpersonal skills training
- Peer Support
- Employment training
- > Therapy
- AODA services
- > Recovery education and illness management

# Crisis Follow-up & Linkage

Barron County provides emergency mental health services and follow-up case management through a state certified program. Services are provided to persons experiencing a mental health crisis, or are in a situation that could potentially turn into a mental health crisis without services. The program includes 24 hour telephone crisis support, mobile support and crisis walk-in services during office hours.

Program staff also provide follow-up case management services to citizens that are placed on a civil commitment and would benefit from additional supports.

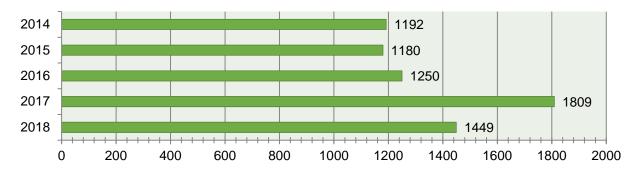


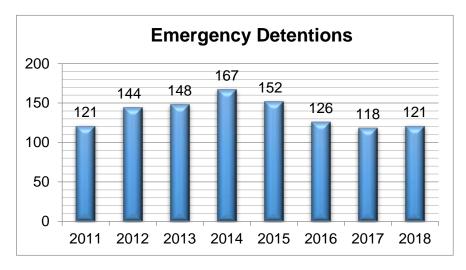
Paula Platzek

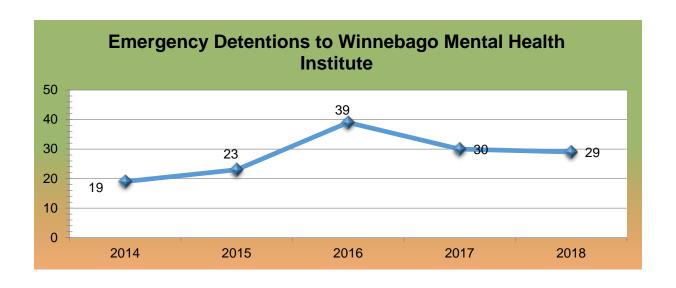
AJ Simon

Allissa Grewe

# **Total # of Crisis Calls**







# Community Support Program (CSP)

Barron County's CSP is a state-certified, individualized, treatment program for persons living with severe and persistent mental illness. The CSP team includes a psychiatrist, a psychiatric nurse practitioner, a registered nurse, a licensed practical nurse, and three clinicians.



Amelia Eckes Allissa Grewe Kelsey Husby Jeremy Nevin Hannah Thalacker Jena Florczak

The goal of the program is to support people by enhancing their skills and resources so that they can build an independent life and live in the least restrictive setting possible.

CSP participants by year:			
2015	57		
2016	56		
2017	51		
2018	47		

	CSP Admits	Successful Discharges
2017	9	9
2018	8	9

Services offered: psychiatric assessment and monitoring, medication administration and management, symptom monitoring, supportive psychotherapy, independent living skills training, case management, mental health therapy, vocational and educational supports, and crisis intervention.

Participants who used medication management service	Male	Female
2017	22	14
2018	23	14

In 2018, CSP made telehealth psychiatry available to participants. The three most prevalent diagnoses of participants are schizophrenia, schizoaffective disorder, and bi-polar disorder.

CSP participant ages					
2016 2017 2018					
18-20	1	1	0		
21-64	51	47	44		
65-74	4	4	3		
75+	0	0	0		

Substance Use Patterns	Tobacco	Alcohol	Meth &/or Other drugs
2016	35	22	15
2017	35	13	22
2018	28	8	9

# **Administrative Assistants**



Alison Seemann

Anne Andrea

# YOUTH AND FAMILIES UNIT

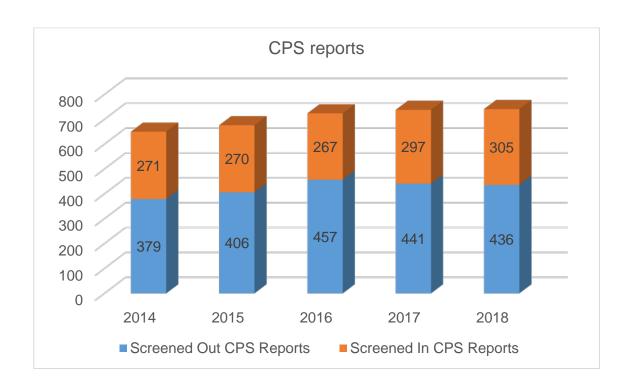


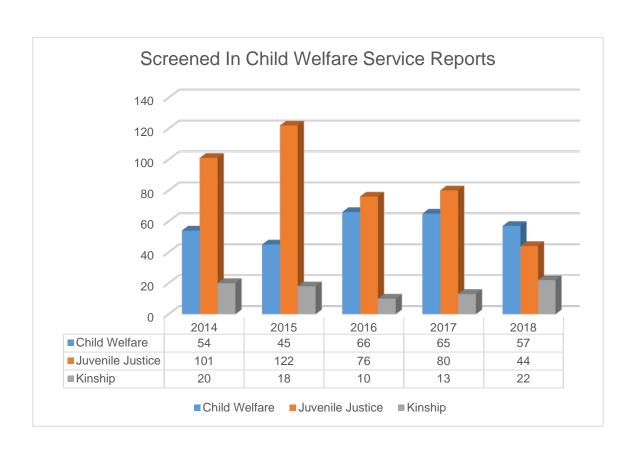
Karla Broten and Mary Olsen supervise the Youth and Families Unit, supervising 24 workers, with a wide variety of job responsibilities. In 2019, Laura Doebereiner became the Child Protection Services (CPS) Lead Worker who also supports the CPS workers. The Youth and Families Unit receives reports/requests for a variety of services and allegations of abuse or neglect for children and adults. One of the Barron County DHHS Youth and Families Unit's functions is to work with children and families who have either been victims of physical, emotional, sexual abuse or neglect or are at risk of being abused or neglected. Social workers respond to reports of abuse or neglect, complete an assessment, make recommendations to the Court and provide ongoing case management services to families. The Youth and Families Unit also responds to Adult Protection Services (APS) cases to ensure the safety of vulnerable and at risk adults in our county. Additionally, there are programs in the unit that are voluntary in nature, and work to support vulnerable children in our community through supportive services. These programs include: Children's Long Term Support (CLTS), Children's Community Options Program (CCOP), and functional screening for Comprehensive Community Services (CCS) programs. Additionally, prevention efforts are being made in our community through the implementation of the Brighter Futures Initiative.

## **Access**



Barron County employs 3 FTE to fulfill the role of Access. Critical information is gathered during the calls that determine if a case will be referred for a CPS or APS assessment. Additionally, the access workers make recommendations of resources that are available in the community or for other voluntary programs that may benefit their family.



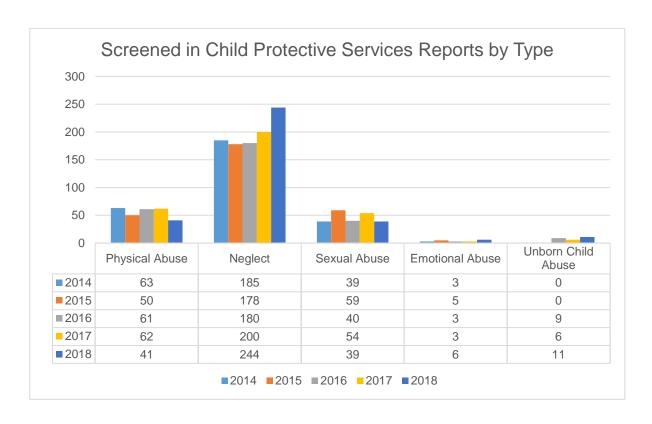


## **Initial Assessment**



Barron County employs 5 FTE social workers who perform the function of Initial Assessment. Initial Assessments are open for 60 days, meaning that is the timeframe workers have to gather information from the child, parents, and collateral contacts to determine whether or not the family will require further intervention to assure their children are safe. The primary responsibility of CPS during the initial assessment process is to assess safety concerns of children, identify children who are in need of protection or services, and refer families to local resources that will help support their children.

As you can see, although the number of calls coming into our agency has increased over the last five years, the number of initial assessments has remained steady. The intensity of cases that are being assessed has also increased. Many of the families we work with struggle with addiction issues as well as mental health concerns. Generational poverty and domestic violence are often present in the families we are engaging with. The increase in neglect cases during the past 5 years is correlated with the increase in methamphetamine use/addiction in Barron County. There has been a 31% increase in "screened in" neglect cases in the past 5 years.

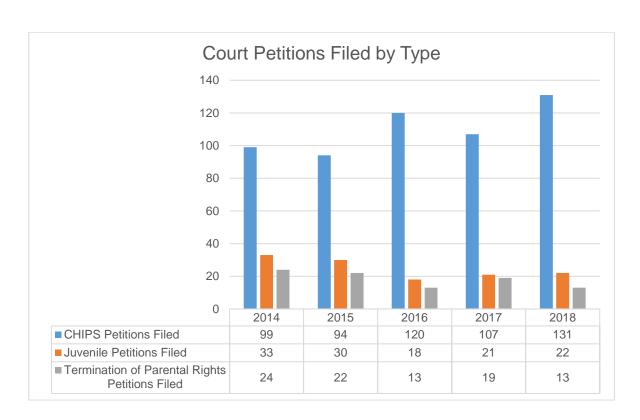


# **Ongoing Child Protection**



Barron County employs 7 FTE social workers who perform the function of ongoing services. The ongoing team works with families who are under a Child in Need of Protection or Services (CHIPS) court order, Juvenile in need of Protection or Services (JIPS) court order, or delinquency court order. Ongoing workers work with families who have children on a court order and assist families in meeting the conditions of those orders. The worker's partner with a variety of agencies and informal supports to best meet the children's needs and assure their safety.

The Department has seen a 32% increase in CHIPS filings over the past 5 years, which again largely can be attributed to the methamphetamine problem in our region. Another important part of the ongoing caseworker's job is working with children who are placed out of their parent's care. The Department has seen an increase in out of home care numbers over the past 5 years, which again can be attributed to the methamphetamine use/addiction problem in Barron County.

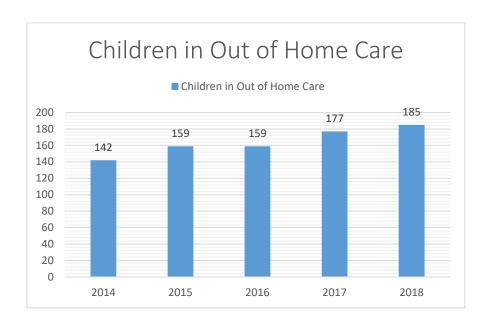


# **Out of Home Care**



Barron County employs 2 FTE foster care coordinators. Foster care coordinators gather information, interview prospective foster parents, and determine whether or not they will become Barron County licensed homes. Recruitment has always been a challenge. Foster parents give a lot of themselves and their personal lives to provide care to children who often are being removed from a home where abuse or neglect was occurring. Additionally, foster care coordinators support relative care providers. Relative care providers take in their relatives (grandchildren, nieces, nephews, etc.) often unexpectedly and often require support in accessing resources to be able to meet the needs of children who are newly in their care. The decision for a family member to become licensed is often driven by the ability to qualify for more assistance and an increase in payment. Several family members in our community raise their loved ones that do not become licensed. This is referred to as Voluntary Kinship.

As mentioned previously, the methamphetamine problem in Barron County has significantly impacted the number of children being placed in foster care. There has been a 30% increase in children in out of home care during the past 5 years. Unfortunately, this means that some children are in out of home care for months before permanence or reunification can occur.



# **Brighter Futures Initiative**



Barron County applied for and was chosen to be a part of the Wisconsin Trauma Project pilot program in 2011. It was during this process that the county entered into what could arguably be one of the most fulfilling and important ventures to date. Due to the success of training local clinicians in trauma focused cognitive behavioral therapy (TFCBT), educating parents, caregivers, staff, and school partners on how we intervene with children and youth who have experienced trauma, and how we partner with our community stakeholders on becoming a trauma-informed community, the decision was made to apply for the Brighter Futures Initiative (BFI) grant monies to emulate the Wisconsin Trauma Project.

Since receiving the BFI monies, Barron County has been able to continue expanding the Wisconsin Trauma Project. During 2018, the BFI began the process of educating families by learning the Strengthening Families Program: For Parents and Youth 10-14 curriculum. The Strengthening Families Program: For Parents and Youth Ages 10-14 is an evidence based group parenting and youth skills program that aims to promote good parenting skills and positive family relationships, reduce aggressive hostile behavior and substance abuse in adolescence, and improve family relationships through weekly parent effectiveness training and child skills-building, followed by a family session. We will be holding 3-4 Strengthening Families classes in 2019. Our first program was held at the Barron Riverview Middle School, February 19 through April 2, 2019, with 8 families graduating. We are working out the details for Cumberland to host in 2019. Rice Lake will be hosting from October 01 through November 12, 2019. Rice Lake would like to host this once a semester starting in the 2019-2020 school year.

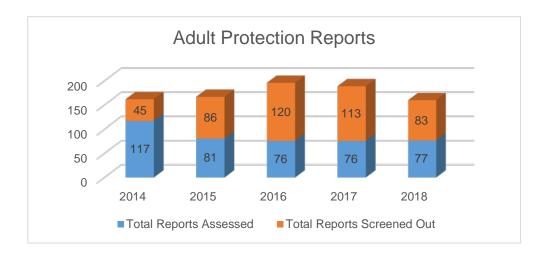
BFI will also be implementing Botvin LifeSkills Training (LST) to area middle school students. LST is a universal prevention program targeting the use of tobacco, alcohol, marijuana and violence. The primary goal is to prevent youth from engaging in behaviors that will put their health and well-being at risk. The program strives to improve personal management skills, interpersonal skills, and social resistance skills. These skills increase the protective factors that result in delayed initiation of illegal substances, decreased use of substances, and decreased aggressive behaviors. LST cuts youth tobacco use by up to 87%, alcohol use by 75%, and marijuana use by 75%. When LST is delivered in combination with SFP 10-14, youth had significantly lower methamphetamine use at 5 ½ years past 12th grade. Members of the Barron Middle School Boys & Girls Club will receive the foundation level LST training starting March 4, 2019. The Rice Lake Middle School Boys & Girls Club will start LST June 10, 2019. Barron Middle School, Cumberland Middle School, and Prairie Farm Middle School are currently working on how to implement the program into their curriculum for the 2019-2020 school year.

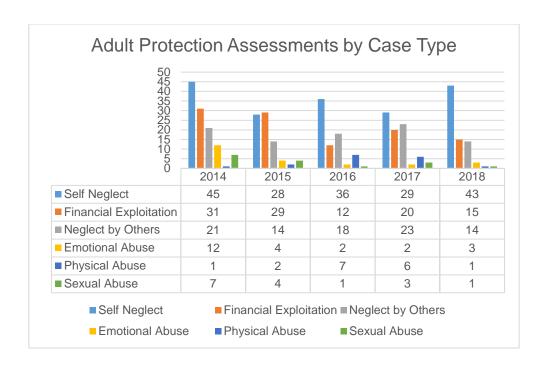
# **Adult Protection**



Adult Protection Services are primarily completed by 2 workers trained in adult protection procedures. The most common forms of abuse investigated by the agency were, again, those of self-neglect and caregiver neglect. Other forms of abuse include physical, emotional, and sexual abuse, as well as financial exploitation, or any combination of the above. The adult protection worker often connects the individual with community resources, including the Aging and Disability Resource Center, Office on Aging, local community/senior centers, and medical or psychiatric services. In some circumstances, however, it is discovered that the adult at risk or elder is unable to care for themselves and is in need of guardianship and/or protective placement (placement at a facility that can meet their needs, typically at a nursing home, assisted living facility, community based residential facility, or adult family home). If the individual is in need of guardianship, the adult protection worker either assists the family with the process or petitions the Court to initiate proceedings.

In addition to adult protection investigations, the adult protection workers also complete guardianships, protective placements, and annual reviews of protective placements (Watts Reviews).





# CHILDREN'S SERVICES

Barron County has several programs for youth with special health care, developmental and mental health related needs. These programs assist the youth and their families on a voluntary level to help support the youth and his or her caregivers to better meet the youth's identified needs. Over the past few years Barron County has seen an increase in the need for services and supports for children with significant mental health needs.



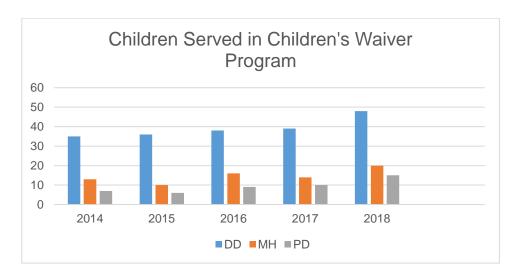


Wisconsin's Children's Long-Term Support (CLTS) waivers make Medicaid funding available to support children who are living at home or in the community and who have substantial limitations due to developmental, emotional, and/or physical disabilities. Funding may be used to support a range of different services that are identified based on an assessment of the child's specific needs and identified goals.

All children or young adults must meet the basic requirements listed below for CLTS Waiver eligibility. To participate in the CLTS Waivers, the child must:

- be under 22 years of age;
- be eligible for Wisconsin Medicaid
- be a United States citizen or have acceptable immigration status
- be a Wisconsin resident
- not have income in their name in excess of the current Medicaid standards
- live at home or in a foster care setting
- have a level of care need that is typically provided in an institutional setting such as a hospital, a nursing home, or an institution for people with developmental disabilities
- be able to receive safe and appropriate care at home and/or in the community that does not have a cost to the Wisconsin Medicaid Program that exceeds the cost Medicaid would pay if the child were in an institution.

In 2017, Governor Walker included funding in the 2017-2019 Biennial Budget to eliminate the wait list for the CLTS program across the state by the end of 2018. In September 2017, each county submitted a plan to eliminate the county's waitlist by December 2018. At that time, Barron County reported 45 children were on the waitlist for CLTS. Starting in October 2017, staff began making contact with 3 to 4 families each month to determine if the child continued to have ongoing needs, was still functionally eligible, and enrolled them into CLTS services when appropriate. Barron County is on track to eliminate our waitlist.



# **Children's Community Options Program**

The Children's Community Options Program (CCOP), formally known as the Family Support Program is a state-funded program. Counties receive limited funding for this program; therefore, eligibility does not guarantee a family will receive services. To be eligible, the child must meet functional eligibility requirements including: the child has a severe disability that is a physical, mental, or emotional limitation which seriously restricts the child's ability to carry out basic daily living activities such as self-care, learning, communication, mobility and self-direction. Although family income is not a basis for eligibility, cost-sharing may be required on a sliding fee scale. CCOP funds are meant to be more flexible than children's waiver funding. Barron County focuses the use of CCOP funds for health and safety related items and services, respite, and other unique needs related to the child's disability, either a one-time need or items/services not covered by waiver or CCS funding. CCOP funding can also be used to fund case management time for completing functional screens to determine program eligibility. Counties are required to have an Advisory Board composed of county staff, parent/guardian representation and others that work with children. The Advisory Board serves as the consumer voice and provides some input regarding how CCOP is administered in Barron County.

# **Coordinated Services Teams**

Coordinated Services Teams (CST) is a grant-funded initiative designed to develop a comprehensive. individualized system of care for children with complex behavioral health needs. CST is a group that includes family members, service providers, school staff and others that work to develop and carry out a coordinated services plan for the child. This model of care is often referred to as a wraparound approach bringing the family and their formal and informal supports together to assist the youth and/or family. The result is a more self-directed plan of care that addresses the needs of the child and family with community-based supports, which allows the child to live in their home and community while working up to their potential. The Barron County CST program has an active coordinating committee that assists with planning and implementation of the goals in CST. In 2017, the coordinating committee planned its second annual luncheon fundraiser to raise money for incentives for youth and families in CST to celebrate and reward youth for their successes. The event was again a huge success generating \$594 for the incentive fund, with an additional \$600 raised earlier in the year from various donations; \$1194 total was raised for incentives. The CST program coordinator facilitates the majority of county CST cases, but also provides support to individuals from partnering agencies who are trained in the CST model to facilitate teams in the school or community on a more informal basis. In 2018, CST served 10 families.

# **Administrative Assistants**



All of our programs are supported by three full-time support staff that assist workers in the completion of many tasks.

# **ECONOMIC SUPPORT/INCOME MAINTENANCE UNIT**

Economic Support/Income Maintenance provides financial assistance to low-income individuals so that they can move toward self-sufficiency. These programs include: FoodShare, Medicaid, Childcare Assistance, Energy Assistance.



# **Economic Support Program Manager**

Bonnie Roemhild

#### **Lead Economic Support Workers**

Candi Gillett Dayna Stellrecht

# **Economic Support Workers**

Brian Webb

Heather Salquist

Katie Glaser

Kayla Gander

Kristi Blodgett

Mee Vana

Rachael Schuman

Sandy Nielsen

Scott Venegas

Tammy Anderson

Taylor Bever

#### **Energy Assistance Workers**

Cheryl Bussewitz Linda Olson – LTE

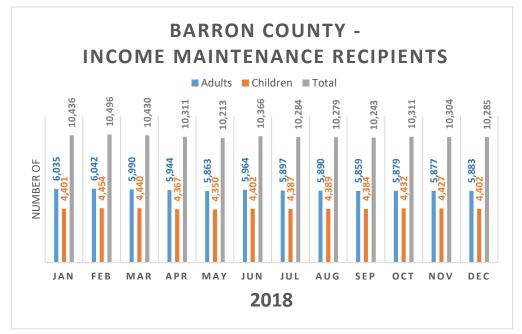
#### Reception

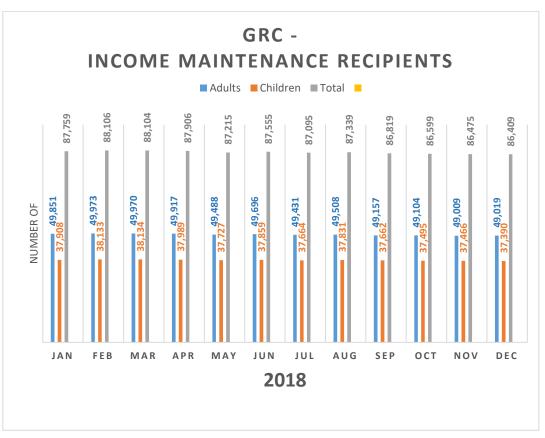
Lisa Long

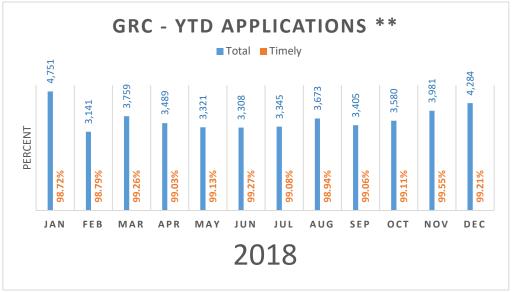
Mary Hover

# FoodShare/Medicaid

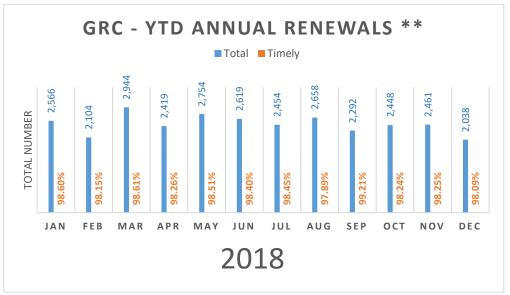
Income Maintenance Recipients are considered those who received FoodShare and/or Medicaid benefits. FoodShare Wisconsin helps low-income families and individuals to buy nutritious food. Medicaid is the largest source of funding for medical and health-related services for people with low income in the United States. Medicaid includes BadgerCare, Family Planning Only Services, Elderly and Disabled MA, Long-Term Care MA, Community Waivers (Family Care & IRIS), Medicare Premium Assistance. Medicaid eligibility is based on income and for some programs assets.







\*\*denotes contractual requirement--in this instance standard of 95% for timely processing



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# **Child Care Assistance**

The Child Care Assistance Program helps low-income families pay for child care while working or attending school or training. Each parent in the household needs to be in an approved activity in order to qualify for Child Care Assistance.

2018 CHILDCARE NUMBERS		
Total Families Served	159	
Total Children	253	
Total Issuance	\$382,534.05	
Average Paid Per Child	\$1,511.99	

# **Caretaker Supplement**

Wisconsin's Caretaker Supplement (CTS) is a cash benefit available to parents who are eligible for Supplemental Security Income (SSI) payments. CTS benefits are \$250/month for the first eligible child and \$150/month for each additional eligible child. If it is a two-parent household, both parents need to be receiving SSI in order to qualify. On average, Barron County has five open CTS cases each month.

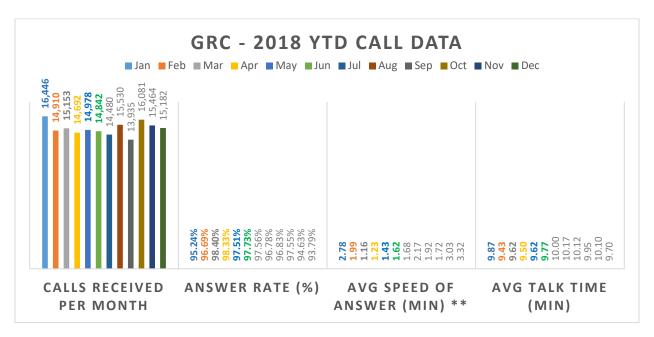
# **Energy Assistance**

The Wisconsin Home Energy Assistance Program (WHEAP) provides assistance for heating costs, electric costs, and energy crisis situations. Operating with federal and state funding, the program provides assistance to approximately 225,000 Wisconsin households annually. All household members and their income need to be included on the same application, which is different than most other Public Assistance benefit programs.

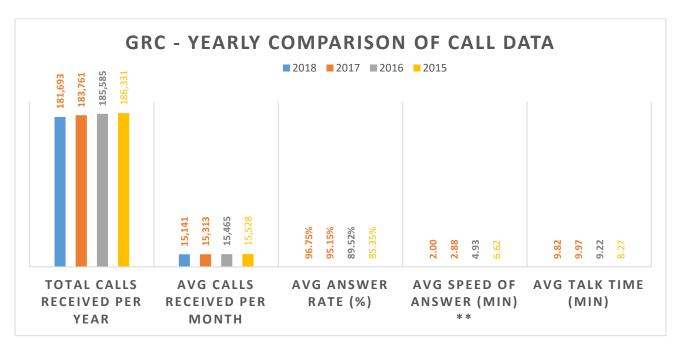
#### DEPARTMENT OF ADMINISTRATION DIVISION OF ENERGY WISCONSIN HOME ENERGY ASSISTANCE PROGRAM (WHEAP) PAYMENTS AND SERVICES FISCAL YEAR 2018 County/Tribe Barron 10/1/2017-9/30/2018 Period Count Expenditures Average Benefit Total Households Applied for Energy Assistance 1,621 Total Households Paid Energy Assistance 1,656 \$940,657 Total Households Paid LIHEAP Funded Benefits 1,630 \$627,509 \$385 Total Households Paid Public Benefit Funded Benefits 1,650 \$190 \$313.148 Total Households Paid Crisis Assistance 327 \$126,781 Total Households Paid LIHEAP Funded Crisis Applications 220 \$76,896 \$350 122 \$409 Total Households Paid Public Benefit Funded Crisis Applications \$49,885 Total Households Receiving Non Payment Additional Services 0 \$0 \$0 Total Households Paid Non-WHEAP Additional Services 0 \$0 \$0 Total Heating Unit Repairs Paid 11 \$3,535 \$321 Total Heating Unit Replacements Paid 23 \$105,855 \$4,602 Total Heating Unit Paid Assessment Only 0 \$0 \$0 Total Heating Unit Activity Paid 34 \$109,390

# **Call Center**

The Great Rivers Call Center continues to be an important part of the Economic Support/Income Maintenance operations. Economic Support workers from the ten counties that make up the Great Rivers Consortium, Barron, Burnett, Chippewa, Douglas, Dunn, Eau Claire, Pierce, Polk, St. Croix and Washburn, spend half of their workday assisting our consumers who are calling the call center.



<sup>\*\*</sup>denotes contractual requirement--in this instance monthly speed of answer cannot exceed 10 mins



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In Conclusion

and

Looking Forward ....

As with previous years, this report serves two primary purposes. The first purpose is an opportunity to educate the public regarding the services DHHS provides as well as the number of county residents we reach. The second purpose is to highlight all of the great work that is done on a daily basis by a knowledgeable and hardworking team of employees who truly put making Barron County a great place to live in the forefront of their everyday practice.

I would describe 2018 as a year of growth within our Department. We focused on program improvement and enhancement in many of our units. This had us challenging each other and ourselves in ways we have not recently done. The Public Health Accreditation process as well as the re-structuring of our Comprehensive Community Services program were two major areas of focus. We have very tangible evidence that the changes we made have allowed us to serve our community better.

Community relations and collaboration in Barron County is top notch and an integral part of our successful functioning. We continue to strive to further develop our relationships with health care partners, schools, the justice system and law enforcement as well as the faith community. These relationships and partnerships is what connects us all, to support healthy and safe living in our communities.

The end of 2018 had our community celebrating the huge success of Chris Kroeze on The Voice. Early January of 2019 set the stage to what will be a great year ahead with the coming home of Jayme Closs!

We are Barron County Proud...

Stacey Frolik

You Should Be Too!