

**2022  
Annual Report**



*Promoting the Health, Well-Being, and Self Sufficiency  
For All People of Richland County*



## Richland County Health & Human Services

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*Tricia Clement, Director*

### **To: Honorable Richland County Board Supervisors and Citizens of Richland County**

On behalf of the Health and Human Services/Veterans Standing Committee and agency staff, I am pleased to present the 2022 Annual Report. This document contains program and statistical information related to services; listings of our associated committees, boards, and contract providers; and financial data related to our budget.

2022 brought changes to Health and Human Services with the departure of Director Tracy Thorsen in May. She had served as the director since December of 2018. Roxanne Klubertanz-Gerber served as the interim Director until July when I took on that role. Budget and long-range planning were the primary focus in the second half of the year due to the financial challenges the county is facing. This allowed me to learn very quickly the programs, grants, and budget of the Department.

2022 saw significant staff changes at HHS. The Behavioral Health Unit saw the majority of the unit leave including Behavioral Health Manager, Myranda Culver. This led to some structural changes to how services were provided; including contracting out some of the service facilitation duties in the CCS program and updating the job description for the service facilitators. Child and Family Services saw the opposite of the Behavioral Health Unit. They were able to fill many of their open positions and gained stability as a unit in 2022.

The Public Health Emergency was in effect for all of 2022. We began to live in a new normal as protective factors related to COVID became more readily available. The need to mask all the time decreased and we laxed mandatory safety protocols.

Since starting in July, I have come to find that the staff at HHS are a group of talented, dedicated, and positive group of people. They have stepped up when there are staff shortages and are always willing to help and support each other. They remained focused on the Mission Statement of HHS which is to Promote the Health, Well-Being, and Self Sufficiency for All People of Richland County.

As you review this report, I hope you won't hesitate to reach out with your questions. This, as well as past reports, program information, staff contacts, and meeting minutes, are available on our website at [www.co.richland.wi.us](http://www.co.richland.wi.us).

Respectfully,

Tricia Clements, Director  
Richland County Health and Human Services



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## MISSION STATEMENT

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# PROMOTE THE HEALTH, WELL-BEING, AND SELF SUFFICIENCY FOR ALL PEOPLE OF RICHLAND COUNTY

In carrying out the mission of the agency, all staff and programs shall:

- Treat others fairly and with respect in a friendly, courteous, responsive and confidential manner.
- Demonstrate integrity and commitment in all actions.
- Create an environment of hope and positive expectation.
- Recognize and respect the uniqueness of individuals and families, as well as foster collaborative decision-making.
- Value diversity.
- Provide individualized services in the least intrusive and least restrictive manner possible.
- Promote collaboration within the agency and with community partners.
- Provide quality services through continuous improvement and outcome measurement.
- Manage public resources responsibly.



## BOARDS & COMMITTEES

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### **Richland County Health and Human Services & Veterans Standing Committee**

Ingrid Glasbrenner, Chair

Kerry Severson, Vice Chair  
Cindy Chicker, Secretary  
Timothy Gottschall  
Danielle Rudersdorf  
Donald Seep

Ken Rynes  
Lee Van Landuyt  
Dr. Jerel Berres  
Francis Braithwaite  
Sherry Hillesheim

*\* The Health and Human Services Board transitioned to the Health and Human Services & Veterans Standing Committee in April 2022.*

### **Commission on Aging & Disability Board**

David Scribbins, Chair

Virginia Wiedenfeld  
Carolyn Denman  
Sandra Kramer  
Larry Engel  
Julie Cervantes

Angela Metz  
Julie Fleming  
Jodi Hines  
Linda Symons  
Danielle Rudersdorf

### **Comprehensive Community Services (CCS) Coordination Committee**

Joy Burnham  
Faye Burghagen  
Van Nelson  
Edie Arneson (*until Nov. 2022*)  
Heidi Pendleton (*as of Oct. 2022*)  
Dr. Jerel Berres (*as of May 2022*)

Ashley Furgeson  
Myranda Culver (*until Sept. 2022*)  
Mary Chris Walling  
Teresa Nundahl (*as of Oct. 2022*)  
Charlie Hillman (*as of Dec. 2022*)

**Coordinated Services Team (CST)  
Coordinating Committee**

Shari Johnson	Cindy Chicker
Amanda Miller	Cindy Robinson
Betsy Wiedenfeld	Myranda Culver ( <i>until Sept. 2022</i> )
Marjorie Fillyaw	Faith Peckham
Stacy Smith	Stephanie Ronnfeldt ( <i>until Oct. 2022</i> )
Cheryl Hoppe ( <i>until Oct. 2022</i> )	Laurie Couey
Jinitta Larson	Rose Kohout
Teresa Nundahl ( <i>as of Oct. 2022</i> )	Allicia Woodhouse ( <i>as of Oct. 2022</i> )
Briana Turk	

**Nutrition Advisory Council**

Don P. Roseberry, Chair

Danielle Rudersdorf	Sue Roseberry
Christine Storer	Janet Jasper

**Mississippi Valley Health Services Commission**

Dr. Jerel Berres	Kerry Severson ( <i>as of April 2022</i> )
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**Transportation Coordinating Committee**

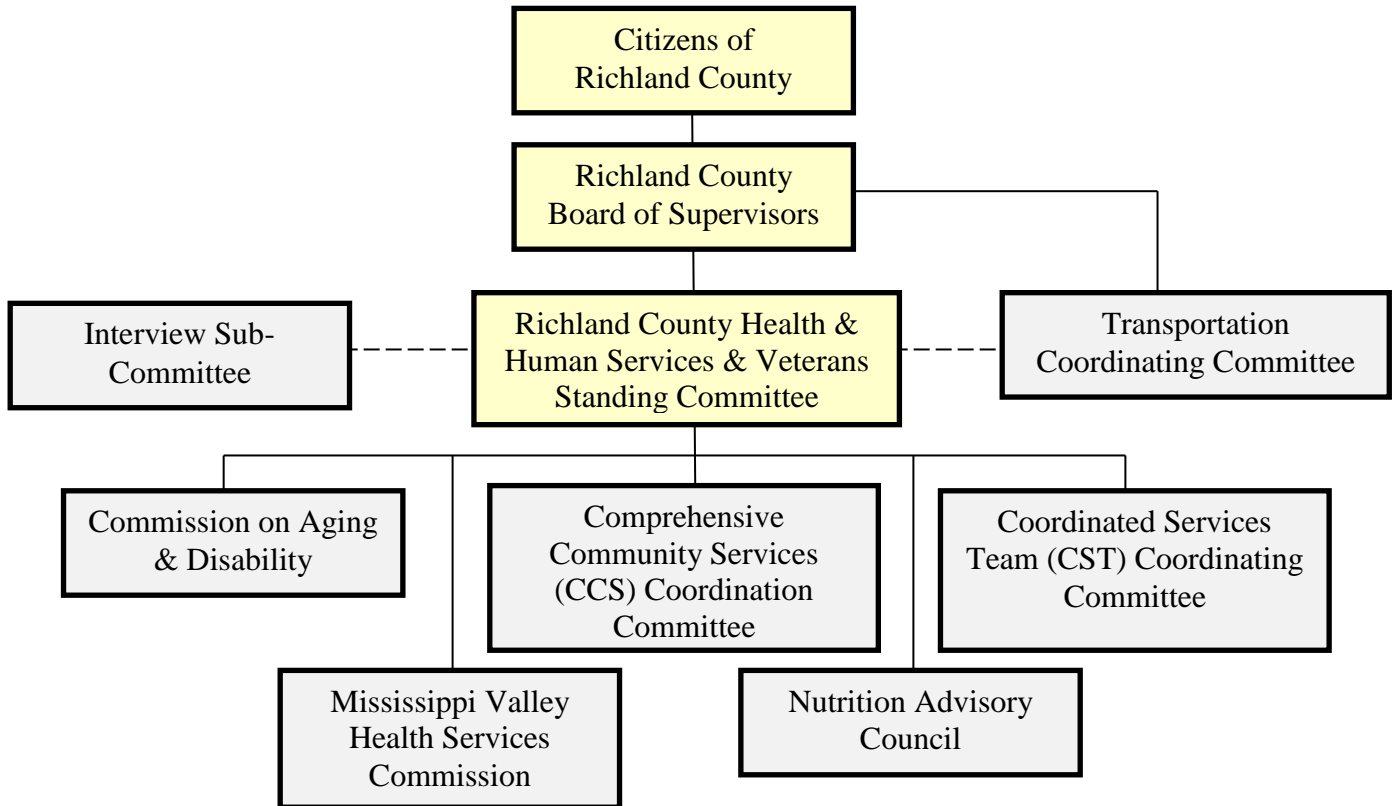
Sandra Kramer, Chair

Donald Seep	Jesse Nelson
Sandra McKittrick	Richard McKee
Robert Shiere	Darin Steinmetz
Aaron Gray	Linda Symons
Cindy Riley	Danielle Rudersdorf



# BOARD ORGANIZATIONAL STRUCTURE

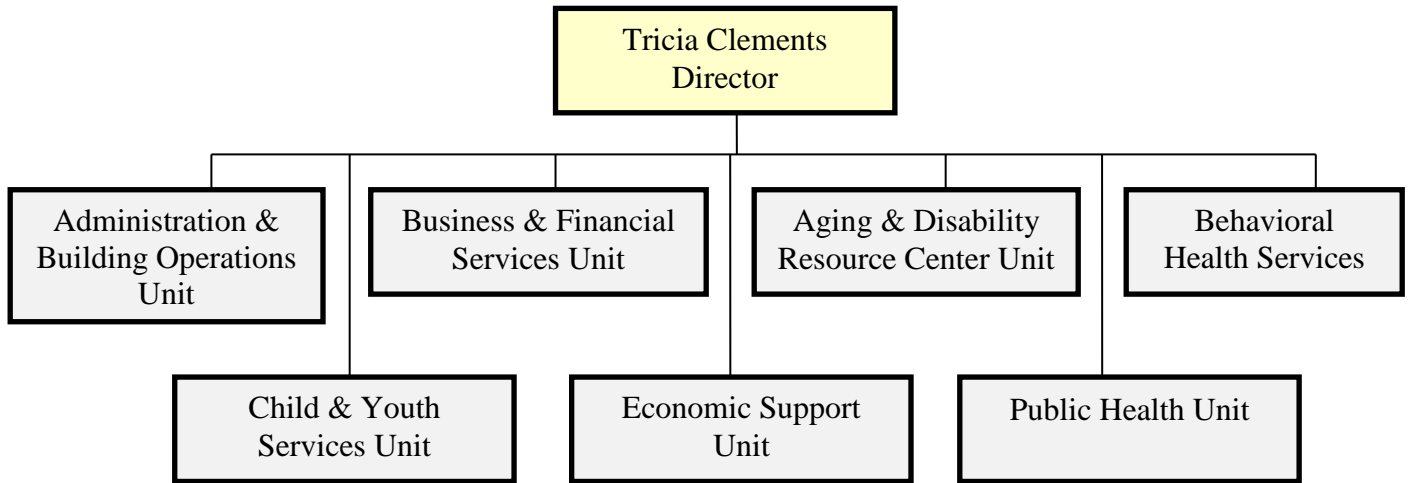
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## UNIT ORGANIZATIONAL STRUCTURE

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# PUBLIC HEALTH UNIT

## Mission Statement

The Public Health Units mission is to promote health and improve the quality of life for Richland County residents through the provision of a variety of Public Health Programs based on primary prevention, early intervention, and health promotion.

## PROGRAMS AND SERVICES

### Communicable Disease

Immunizations  
Investigation and Follow Up  
Tuberculosis Prevention and Control  
TB Dispensary  
Rabies Prevention and Control

### General Public Health Programs

Loan Closet  
Wisconsin Partnership Program Grant  
Wisconsin Well Woman Program  
Tobacco Control/Wisconsin WINS  
School Health  
Richland Community Free Clinic

### Nutrition

Senior Congregate & Home Delivered Meals

### Maternal Child Health Programs

MCH Systems Initiative  
Prenatal Care Coordination

### Environmental Health

Private Well Water Testing  
Radon  
Childhood Lead Poisoning Prevention  
Human Health Hazards

### Preparedness & Response

Preparedness & Response Highlights



## The Year 2022 in Review

The year 2022 started off with a continuation of the pandemic response with a sharp increase in COVID cases in January. The main concern was the Omnicron variant, producing some of the highest case counts and hospitalizations. In March, the B.A.2 variant was circulating and by May, the US had surpassed one million total COVID deaths.

COVID testing continued to be provided by Emergency Management and Public Health Nurses at the Richland County Fairgrounds until being transitioned to the UW Platteville parking lot through the summer of 2022. Community testing ended at the beginning of September of 2022. Quarantine guidance orders changed from a full 10-day order to a modified 5-day quarantine. With more persons vaccinated, the need for masks and PPE was reduced, although masks were still encouraged, especially in areas of high transmission, healthcare facilities, and for those that were immunocompromised.



## VACCINES

Vaccines continued to be offered at RCHHS by public health nurses and the administration of these vaccines were moved from the main conference room area to the public health clinic area to free up needed space for regular agency operations due to a general decline in the number of people scheduled for the vaccine. The Bivalent COVID booster vaccine became available in the fall of 2022 and Richland County Public Health nurses started administering this in October of 2022.

Mass Vaccine Flu Clinics were provided in the fall of 2022 with public health providing 236 total flu shots to children in the Richland County School districts including Richland Center, Weston, Ithaca, and St. Mary's. Public Health continued to provide Vaccines for Children (VFC) flu shots to school-aged children on a walk-in and appointment basis at the HHS building after the conclusion of the Mass Vaccine Clinics.

Purchased flu vaccine was also available and provided to adults at Richland County Public Health on a walk-in or appointment basis through the end of 2022 and continued into the 2023 influenza season.

## COMMUNICABLE DISEASE



**Immunization:** Life-saving vaccinations have had an impact on everyone in the nation. Today there are vaccines to protect us from 17 infectious diseases that were once common in the United States and immunizations are one of the most successful and cost effective Public Health strategies in history.

The provision of immunizations may seem to be a simple process, but at every step--from manufacture to administration, there are systems in place to assure that safe, effective vaccines are accessible and available to the public.

Effective immunization programs require infrastructure at the federal, state, and local level—both in the private and public sector, to assess the impact of immunizations through disease surveillance, assure that providers have the most up-to-date information and guidance related to vaccine storage and administration, to provide credible evidence based information to consumers, and to assure a high standard of vaccination practice. Systems must also be in place regarding outbreak investigation and control, and the monitoring of vaccine coverage, effectiveness, and safety.

Once a vaccine is licensed in the United States, Public Health experts review epidemiologic data to ensure that vaccines are working properly and safely. The Vaccine Adverse Event Reporting System (VAERS) is a national database that collects information about adverse events that occur in U.S. licensed vaccines. If a problem is identified, Public Health will issue measures to respond.

Vaccines must be stored at correct temperatures and handled safely to ensure the best protection. Technical assistance is provided by the Wisconsin Division of Public Health Immunization Program to support vaccination programs in the state. Clinical site visits are conducted to assure appropriate vaccine storage and handling practices and that policies and procedures are accurate and current.

Richland County's Immunization Program follows the State of Wisconsin Immunization Program Policies and Procedures, and immunizations are provided under standing orders from the Medical Director. 2022 saw the transition of our former medical director, Dr. Thomas Richardson who retired to Dr. Neil Bard, who assumed the role of Medical Director for Richland County Public Health.

The United States will continue to face issues in immunizations and emerging infectious disease, and the Public Health system must be able to respond with

modern technology and skilled professionals to control and prevent infectious disease.

Currently Richland County Health and Human Services Public Health provides immunizations under the Vaccines for Children Program for children who are Medicaid eligible, uninsured, America Indian, or an Alaska Native. Additionally, we provide influenza immunization each fall and provide adult tetanus and hepatitis vaccines.

**Immunization Statistics:**

Immunization	2014	2015	2016	2017	2018	2019	2020	2021	2022
Covid Pfizer Bivalent 12+	-	-	-	-	-	-	-	-	299
Covid Pfizer 5-11yrs	-	-	-	-	-	-	-	-	17
Covide Pfizer 12+	-	-	-	-	-	-	-	-	315
Covid Pfizer 6mo – 4yrs	-	-	-	-	-	-	-	-	8
Covid Pfizer Bivalent Booster	-	-	-	-	-	-	-	-	6
DtaP	12	13	12	15	17	12	1	9	4
Hepatitis A	39	36	23	11	10	15	1	0	7
Hepatitis B	13	9	6	11	6	7	5	1	6
Adult Hepatitis B	12	11	13	33	19	0	1	0	0
Hib	1	7	6	4	2	1	0	1	1
Influenza	1036	978	659	643	762	726	603	336	534
MMR	23	23	13	11	15	19	2	2	2
Pneumonia	26	3	0	0	0	0	0	0	0
Polio	24	9	9	7	12	14	4	5	2
Prevnar	16	15	7	9	5	5	2	3	3
Td	2	1	6	15	14	21	3	3	6
Varicella	24	20	11	11	14	12	4	4	5
Menactra	24	53	11	3	3	11	0	0	0
Td-Pertussis (Tdap)	70	61	31	23	24	25	8	8	11
COVID-19	-	-	-	-	-	-	-	4,537	719
HPV (Gardisil)	26	22	19	9	4	9	0	1	1
Rota Teq	8	4	2	1	1	2	0	2	0
Twinrix (HepA-B)	2	0	0	0	0	0	0	0	0
DTPaP-Hib-Polio (Pentacel)	14	10	8	11	6	7	4	3	2
DTPaP-Polio (KINRIX)	n/a	n/a	3	0	0	0	0	0	0
Proquad (MMRV)	-	-	-	-	-	-	-	5	1
<b>TOTAL</b>	<b>1372</b>	<b>1275</b>	<b>839</b>	<b>819</b>	<b>914</b>	<b>886</b>	<b>638</b>	<b>4,920</b>	<b>1,949</b>

**Communicable Disease Investigation and Follow Up:** In Wisconsin reportable diseases are divided into three categories. Category I diseases are considered to be of urgent Public Health importance and are to be reported immediately to local Public Health by telephone or fax; Category II diseases must be reported to local Public Health either electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), or by mail or fax within 72 hours of the identification of a case or suspected case; and Category III disease (HIV and AIDS) is to be reported to the state epidemiologist within 72 hours of identification of a case or suspected case.

Specific infection control measures such as isolation, quarantine, and personal protection are common methods utilized to prevent the spread of communicable disease. Public Health Nurses provide investigation and follow up on communicable disease reports on Richland County residents.

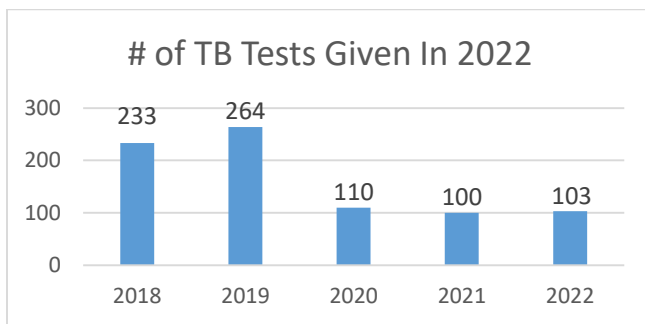
**Communicable Disease Statistics:**

Reportable Disease	2015	2016	2017	2018	2019	2020	2021	2022
Active Tuberculosis	0	0	0	0	0	0	0	0
Arbovirus Illness	1	3	1	2	0	0	0	0
Babesiosis	1	2	0	1	2	1	0	3
Blastomycosis	2	1	1	0	0	0	1	0
Brucellosis	0	0	0	0	0	0	0	0
Campylobacter	10	24	15	9	14	8	4	8
Carbon Monoxide Poisoning	-	-	-	1	5	4	11	7
Carbapenemase-Producing Carbapenem-Resistant Enterobacteriaceae	-	-	-	1	1	0	2	1
Chlamydia	24	29	38	57	31	35	49	38
Coronavirus, Novel 2019	-	-	-	-	-	8,962	7,550	5785
Coronavirus, Novel 2019 Reinfection	-	-	-	-	-	1	16	0
Cryptosporidium	2	2	13	2	10	1	3	4
E.Coli	2	2	1	5	3	2	3	2
Ehrlichiosis/Anaplasmosis	2	13	12	15	14	8	9	14
Giardia	1	3	0	0	2	0	1	1
Gonorrhea	5	0	4	10	9	12	12	9
Hepatitis A	3	1	1	1	2	1	0	1
Hepatitis B	6	2	6	3	5	1	3	56
Hepatitis C	12	13	19	12	16	7	12	10
Herpes	0	0	0	0	0	0	0	0
Histoplasmosis	1	0	1	0	0	0	1	1

Influenza Hospitalizations	15	4	26	41	10	24	25	33
Influenza Laboratory Report	-	-	-	-	-	3	1	8
Invasive Haemophilus Influenza	0	0	0	0	1	0	0	2
LaCrosse Encephalitis	0	0	0	1	0	0	0	0
Legionella	1	0	0	0	0	0	0	0
Listeriosis	0	0	0	0	0	0	1	0
Lyme Disease Erythema Migrans (EM) Rash	67	73	117	77	79	44	40	6
Lyme Laboratory Report	-	-	-	-	-	-	44	121
Measles	2	1	1	1	2	0	1	0
Meningitis (Bacterial)	0	2	1	1	0	0	1	1
Meningitis (Viral)	0	0	0	0	0	0	0	0
Metal Poisoning, Nonlead	-	-	-	-	2	0	0	0
Methicillin Oxacillin resistant Staphylococcus Aureus (MRSA/ORSA)	-	-	-	11	2	6	6	6
Multisystem Inflammatory Syndrome in Children	-	-	-	-	-	-	1	0
Mumps	1	1	2	3	2	2	0	1
Mycobacterial Disease	2	2	0	2	0	1	4	3
Norovirus Infection	-	-	-	3	0	0	1	0
Orthopox Virus Impox	-	-	-	-	-	-	-	1
Parapertussis	-	-	-	-	-	-	6	1
Pertussis	23	24	30	19	11	2	7	3
Poliomyelitis	-	-	-	-	-	1	0	1
Rubella	-	-	-	-	-	-	1	0
Salmonella	3	3	2	5	6	2	5	7
Shigella	1	0	0	0	3	0	0	0
Streptococcus Disease Invasive Group A	-	-	-	-	4	1	0	0
Streptococcus Disease Invasive Group B	-	-	-	1	0	5	2	2
Streptococcal Infection, Other Invasive	-	-	-	-	-	1	0	0
Streptococcus Pneumoniae	2	1	0	4	3	1	2	3
Staphylococcus Aureus	-	-	-	5	6	8	3	0
Syphilis	2	1	0	2	4	2	2	1
Syphilis Reactor	-	-	-	-	-	-	4	0
Tuberculosis	-	-	-	-	-	4	2	0
Q Fever	1	0	2	3	1	0	2	0
Toxoplasmosis	1	0	1	4	0	0	2	1

Toxic Shock Syndrome	0	0	0	0	0	0	0	0
Transmissible Spongiform Encephalopathy (TSE)	-	-	-	-	-	1	0	1
Tuberculosis Class A or B	-	-	-	-	-	-	-	1
Tuberculosis/Latent Infection (LTBI)	1	3	0	3	3	1	3	2
Tuberculosis LTBI – Laboratory Results Only	-	-	-	-	-	-	2	1
Tularemia	-	-	-	-	-	0	0	0
Vancomycin – Intermediate Staphylococcus Aureus (VISA)	-	-	-	-	-	-	2	0
West Nile	2	0	0	0	0	0	0	0
Varicella	5	4	1	4	5	1	3	1
Psittacosis	1	0	0	2	0	0	0	0
Rocky Mt. Spotted Fever	2	1	0	0	0	0	0	0

**TB Skin Tests:** Public Health provides a comprehensive tuberculosis (TB) prevention and control program including TB skin testing. TB skin tests are most often completed as a pre-employment requirement, but may be requested or recommended as follow-up to a potential exposure. The Mantoux Tuberculin Skin Test is the worldwide standard used to screen for tuberculosis, and Public Health uses the Mantoux method for tuberculosis screening. In 2022, 103 skin tests were provided by Public Health.



**TB Dispensary:** The TB Dispensary Program reimburses local health departments for certain medical services provided to TB cases, suspects, contacts, and Latent TB Infections (LTBIs). The goal of the program is to assure health care service to patients/clients in Richland County that have been

diagnosed with TB infection or disease, regardless of ability to pay. The Wisconsin Department of Health and Human Services Tuberculosis Program provides oversight and consultation to local health departments in the management of confirmed or suspected TB and LTBI cases.

TB Dispensary services provided by Public Health include Tuberculin skin testing; medication for treatment of disease and TB infection; directly observed therapy; TB contact investigation; and TB case management. In addition, Public Health has MOUs with the Richland Medical Center and the Richland Hospital for the provision

of certain clinically indicated services that Public Health does not provide, and reimburses the Medical Center and the Hospital at the current Medicaid rate.

In 2022, the WI DHS TB dispensary program was accessed twice for dispensing of medications in Richland County. Richland County Public Health nursing staff provided direct observation therapy (DOT) medication services and home visits to 2 LTBI patients over the course of the year to successfully treat LTBI infection.

**Rabies Prevention and Control:** Public Health works with the Richland County Sheriff's Department, the Richland Center Police Department, the Richland County District Attorney and the Corporation Counsel to assure that procedures outlined in the Rabies Prevention and Control Policy are followed when there is an animal bite to a human. Wisconsin Rabies Control Law requires that a dog or cat which has bitten a human must be delivered to a veterinarian for initial examination within 24 hours of the bite or receiving notice of the bite. The animal must be quarantined for no less than 10 days. If the animal's rabies vaccination is current, the animal may be quarantined on the premises of the owner following the initial examination of the veterinarian. The animal must be brought back to the veterinarian on the last day of the 10-day period and on one intervening day (the animal must be examined three times in the 10-day period). Once the quarantine period is complete, the veterinarian signs the release from quarantine.

When Public Health receives a bite order from Law Enforcement, a Public Health Nurse contacts both the animal owner to assure the owner understands the requirements for quarantine and vaccination of the biting animal and the victim to assure understanding of potential consequences of an animal bite and the importance of medical attention after an animal bite. Once the quarantine is complete or a rabies test result is obtained, Public Health contacts the person who was bitten to report the outcome. Public Health Nurses provided follow up on a total of 52 cases for rabies control in 2022; 40 of those cases were reported animal bites; of those animal bites reported, 8 specimens were submitted for rabies testing.

Of note, in February of 2022, two Public Health Staff Nurses completed the Rabies Control Program course offered by the Wisconsin Department of Agriculture, Trade, and Consumer Protection and successfully passed the Rabies Control Program Trained Observer test, resulting in certification. In 2022, public health nurses authorized fee exempt testing for 21 specimens, which were primarily bats, but also included cats, a dog, and a raccoon. These specimens were submitted to the Wisconsin State lab of Hygiene, or WSLH; there were no positive rabies cases that resulted from those tests.



## MATERNAL CHILD HEALTH PROGRAMS

**Maternal Child Health (MCH) Systems Initiative:** The Wisconsin Healthiest Families statewide initiative focuses on improving systems to address family supports, child development, mental health, and safety and injury prevention. Maternal Child Health home visits were provided by Public Health nurses to new parents who request a visit or when referred by a health care provider. In 2022, there were 8 MCH referrals received by Richland County Public Health from area healthcare providers; 2 clients accepted home visits from public health nurse and 2 clients agreed to follow up phone calls and were provided resources, including birth packets, connections to SWCAP WIC program, mental health services, and follow up with primary care.

**Prenatal Care Coordination:** Public Health Nurses provide prenatal case management services including a range of support services and care coordination for high-risk Medicaid/ Healthy Start/Badger Care eligible pregnant women.

**Fluoride:** Oral Fluoride is made available for children whose water supply has been proven to be deficient in Fluoride. Water sample test kits are available to residents for testing of private wells. If the water is found to be deficient in Fluoride, supplemental Fluoride can be purchased at a nominal cost.

## GENERAL PUBLIC HEALTH PROGRAMS



**Loan Closet:** The Loan Closet provides durable medical equipment for short-term use by Richland County residents. A deposit is required (which provides for repair and/or replacement of equipment), but is returned if the equipment is returned within one month.

**Wisconsin Well Woman Program:** The goals of the Well Woman Program

(WWWP) are to improve access to preventive health services for low-income, uninsured, or underinsured women and to eliminate preventable death and disability from breast and cervical cancer, particularly among medically underserved women.

In Wisconsin one of the changes brought about by the Affordable Care Act included regionalization of the WWWP. Since 2015, the coordination of WWWP services for Richland County women has been provided out of Juneau County.

The program provides:

- reimbursement for health screenings, diagnosis, and assessment for breast and cervical cancer
- tracking and follow up of women screened
- developing a provider network in which women can receive WWWP services
- Information, education and outreach programs to address known health risks
- Case management

Since 2020, Ana Karina Burton, a patient navigator working at the University of Wisconsin Hospital and Clinics, has attended the Richland Community Free Clinic monthly to consult with patients regarding their eligibility for WWWP and to assist them with enrolling in the program.

**Richland Community Free Clinic:** The Free Clinic provides primary health care to people and is staffed by medical professionals and community volunteers. The Affordable Care Act has allowed many Free Clinic clients to access health insurance, and seek health care through the regular healthcare system, but there is still a need for the Free Clinic for those who do not qualify for coverage.

Public Health provides assistance at the Richland Community Free Clinic each Tuesday morning at the Richland Hospital Clinic. The Public Health Nurse (PHN) assists with eligibility determination and provides information on needed services for the patient and his/her family such as housing, food resources, and fuel and financial assistance. Referrals are made to family planning, WWWP, WIC, Head Start, Clinical Services, the ADRC, and other agencies as needed. Influenza, Tetanus, and HPV vaccines are provided on site. There continues to be a great need for dental and vision care for the uninsured.

There were approximately 346 clinic visits on 48 (7.2/day) clinic days in 2022; the clinic was cancelled for 3 weeks in the summer because of staffing issues and during December holidays.

# ENVIRONMENTAL HEALTH

Richland County continues to be part of a five county consortium to provide environmental health services. The Grant County Health Department is the lead agency for the Environmental Health Consortia and employs the Registered Sanitarian who acts as the Environmental Health Coordinator for the five counties. The Environmental Health Coordinator assists with investigation and follow up of human health hazard complaints and coordinates environmental health programs in Grant, Iowa, Lafayette, Vernon and Richland Counties.



## **2022 Environmental Health Statistics:**

Home Visits	30	Contacts (EH Consultant)	217
Lead	3	Lead	13
Radon	0	Radon	19
Water	0	Water	11
Asbestos	0	Asbestos	17
Solid Waste	6	Solid Waste	45
Housing	19	Housing	45
Indoor Air	0	Indoor Air	32
Sewage	0	Sewage	17
Animal/Vector	0	Animal/Vector	18
Hazard	0		
Fit Testing	2		

**Private Well Water Testing:** Water sampling kits are available free of charge for testing private wells for bacteria, nitrates, fluoride, and metals for families with new babies. Water test kits are also available fee-for-service for anyone who wants to test their private well water supply – Public Health has the test kits and the fees are sent directly to the Wisconsin State Laboratory of Hygiene with the sample. The Environmental Health Coordinator is available for consultation for problems related to water quality.

**Radon:** Radon is a radioactive gas that comes from the natural decay of uranium, which is found in nearly all soils. Radon typically moves up through the ground to the air above and seeps into homes through cracks and other holes in the foundation. Radon gas can be trapped inside the home where it can build up. Free radon test kits are available through Public Health each year and making repairs to eliminate radon gas can be simple and affordable. For the year 2022, Richland County distributed 30 radon test kits and 20 were returned for testing. This would result in a 67% return rate. 5 kits had results between 4-8 pCi/L and 5 kits had measured above 8 pCi/L.

**Childhood Lead Poisoning Prevention:** Lead exposure in young children can cause reduced IQ and attention span, learning disabilities, developmental delays, and many other health and behavioral issues. Most exposures occur in homes built before 1978, largely due to chipping and peeling lead based paint and the dust created when lead based paint is disturbed (for example during renovation). Preventing exposure requires preventing children from coming into contact with lead hazards by identifying and repairing the hazards.

Children are screened by collection of a capillary blood sample which is sent to the State Laboratory of Hygiene for analysis. Elevations are confirmed by venous samples and Public Health Nurses and the Environmental Health Coordinator make home visits to provide education and assessment of the child's environment for lead hazards. Property owners are responsible to comply with lead hazard reduction measures ordered by Public Health. Unfortunately, the effects of elevated blood lead levels may not be noticeable until the child experiences difficulty in school. Lead poisoning screening and prevention activities provide essential tools to identify risk and eliminate exposure. **80** Richland County children were screened in 2022 by their healthcare providers.

**Human Health Hazards:** Generally, human health hazards are defined as substances, activities, or conditions that are known to have the potential to cause acute or chronic illness, to endanger life, to cause or spread infectious disease, or to harm the health of the public. According to Wisconsin State Statute 254.59(1) the local Health Officer is responsible for ordering the abatement or removal of any human health hazard found within the jurisdiction of the local health department. Public Health follows up on reports of potential human health hazards in order to protect the health of the public and/or the environment. There were **30** complaints reported in 2022 that required investigation through our environmental health program.


## **PREPAREDNESS AND RESPONSE**

In 2022, there was a continuation of testing the Emergency Preparedness Capabilities due to ongoing COVID testing, COVID vaccinations, and coordination of services. Richland County Public Health is a member of the Region #5 South Central Wisconsin Healthcare Emergency Readiness Coalition (SCWIHERC) which participates in trainings & education pertaining to preparedness & response services and capabilities.

## NUTRITION

Senior Dining



Fellowship, Food  Fun

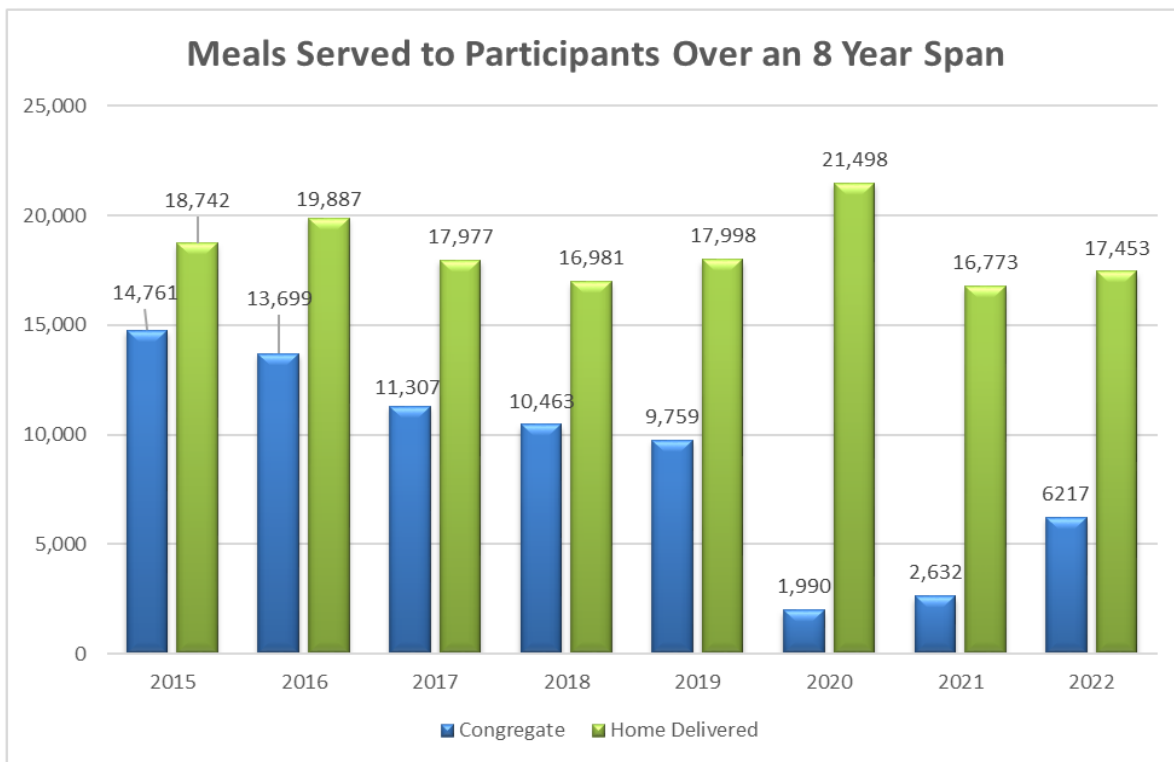
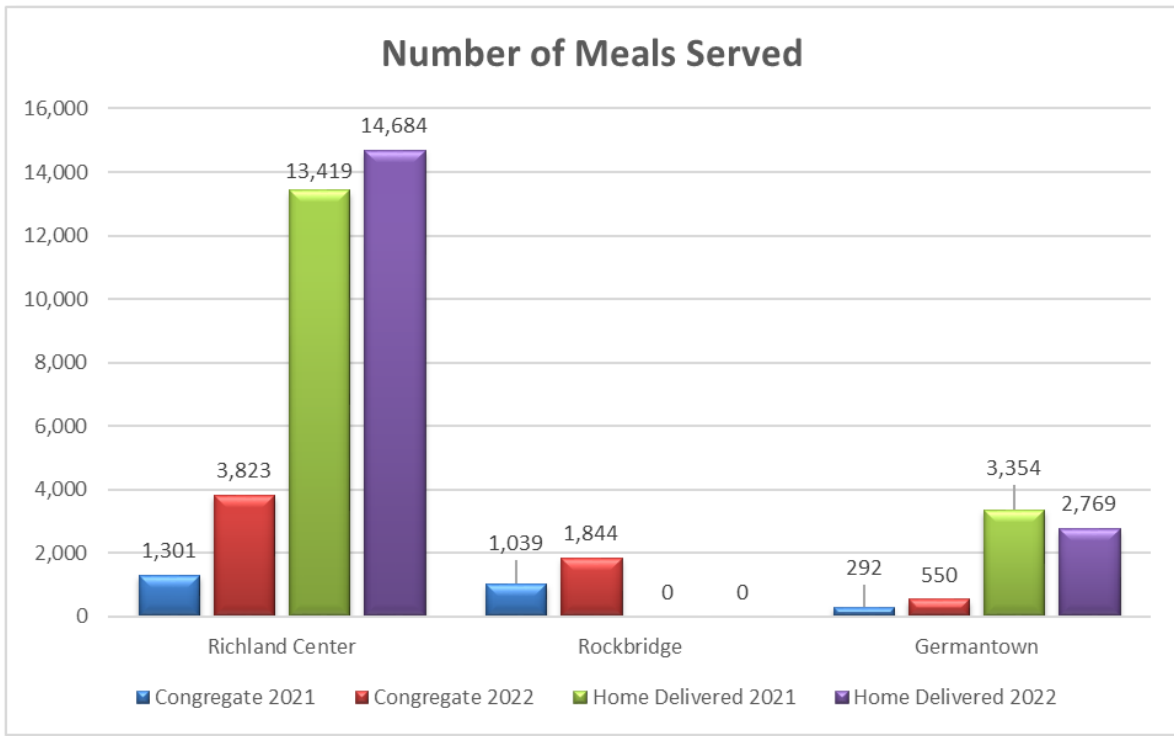
**2022 NUTRITION REPORT:** Richland County's Senior Nutrition Program has provided healthy, delicious meals to area seniors since 1977. Goals of the senior nutrition program are to reduce hunger and food insecurity, promote socialization of older individuals and promote the health and well-being of older individuals. Richland County's Senior Nutrition Program focuses on these goals by:

- Promoting good health behaviors through nutrition education, nutrition screening and intervention services
- Assisting individuals to gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions from poor nutritional health or sedentary behavior
- Providing 1/3 of the daily food requirement for seniors of a wholesome, safe, nutritionally balanced meal through the promotion of high food safety and sanitation standards
- Targeting older adults who have the greatest economic or social need
- Promoting social interaction through both Dining Centers and the Home Delivered Meal settings enabling people to feel cared for, valued, and part of a network which helps combat stress and improve overall sense of well-being and increasing social connectedness

Richland County has three active meal sites and delivers meals to homebound individuals from two of those three sites. Volunteers are priceless, lending their time, compassion, and dedication to making a difference in our communities through the Richland County Nutrition Program and Meals on Wheels Richland County. Volunteers supplement paid staff by assisting at all of the meals sites as well as delivering Meals on Wheels to homebound individuals within our local communities.

The Richland County Senior Nutrition Program has suffered many changes over the past several years. We have seen closures due to COVID and then reopened meal sites in 2021. Slowly the meal sites have had increases in attendance however locations such as Rockbridge still haven't reached the attendance levels prior to the COVID pandemic. We continued to do our best to meet the needs of our Older Adult population being that of age 60 and beyond.

## Nutrition Statistics

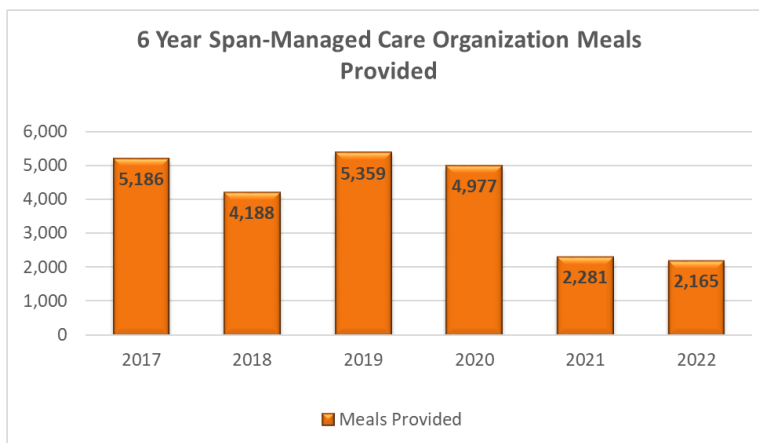


In 2022 Richland County Senior Nutrition Program provided a total of 23,628 meals compared to 2021 which was 19,405. That is an increase of 4,223 meals, ~18%.

The breakdown for each meal site:

- Richland Center provided 18,507 meals
- Rockbridge location provided 1,844 meals
- Germantown provided 3,319 meals.

Of the total meals served, the request for meals from Managed Care Organizations (MCOs) requested 2,165 meals in 2022 which is a decrease of ~5% equating to 116 meals compared to the prior year 2021. We continued to see a loss of individuals due to Long Term Care Facilities and/or death. We also seen a decrease due to cost increase and contract changes, as MCO's are required the full cost of meals.



For the 2022 year, the 3 meal sites operated as they were before as far as congregate dining with the additional Grab N' Go program still operating at the Richland Center Site. We were able to deliver Meals on Wheels M-W-F's from the Richland Center location.

We were not able to provide hot Meals on Wheels services 5 days a week as we have had to continue building volunteer capacity. During 2022 we provided approximately 60-80 hot home delivered meals each M-W-F with more referrals continuing to be received. We offered frozen meals for individuals who were in need of meals 5-7 days per week. We have some individuals who prefer just the frozen meals. Richland Center location does have good attendance for Grab N' Go and the Dining Center which averaged 10 for Grab N' Go and 15-20 for Congregate daily.

Cazenovia's meal site located at St. Anthony's school continued to have good attendance. A few less home delivered due to some going to long term care facilities or loss of life. The 2022 numbers were 20-25 on Wednesdays and 10 home delivered on the days that the delivery is offered.

Rockbridge meal site located at the Bethlehem Church has had a lot of changes over the past two years as far as new ownership of the existing building and the Church completing a lot of remodeling with more changes to come. We struggled to bring numbers up to pre-pandemic attendance. In 2022 we were able to move back to 3 days per week at the Rockbridge location. Rockbridge has seen changes in attendance and has not returned to pre-COVID numbers. The building itself has

been refreshed and the kitchen has been completed to make it more user friendly. The Senior Nutrition Program benefits from continuing to partner with Bethlehem Lutheran Church to provide further services at that location. We look forward to working together and bridging the gap between the younger and older generation. The building is operating as a children's learning center, a church and Community Center. We invite you to visit the Rockbridge location to see the bright new atmosphere.

As previously stated, we continue to need more volunteers in order to function at full capacity and provide hot meals 5 days per week at the Richland Center location. We are always seeking volunteers at each location to also help at the meal sites with serving, kitchen duties and packaging. Our priority is to provide delivery of nutritious meals to homebound seniors in our community and provision of meals at each of the dining center locations.

**Volunteers:** Volunteers donated **2,961 hours of service** total with volunteer drivers and those helping at the congregate meal sites for the 2022 year. Volunteer drivers used their own vehicles and gas to deliver noon meals to homebound seniors.

**National Nutrition Month:** March is National Nutrition Month®, an annual nutrition education and information campaign created by the Academy of Nutrition and Dietetics celebrated each year during the month of March. The campaign focuses attention on the importance of making informed food choices and developing sound eating and physical activity habits. The 2022 year's theme for National Nutrition Month®, which supports the philosophy that there is no one-size-fits-all approach to nutrition and health, was Celebrate a World of Flavors. The focus was on healthful eating and exploring ways to enjoy foods and flavors that are native to other cultures. The objectives were:

1. List habits that promote healthful eating.
2. Explain ways to eat a variety of nutritious foods.
3. Describe how to "Celebrate a World of Flavors" when planning meals and snacks.

**Senior Farmers' Market:** June through September 2022, the Senior Farmers' Market Nutrition Program (SFMNP) vouchers offered low-income older residents an opportunity to purchase fresh, locally-grown fruits, vegetables and herbs from certified farmers. We had 139 sets of vouchers, which was 15 sets more than the previous year. Each valued at \$25.00 – making \$3,475.00 go back to local farmers within Wisconsin and providing Wisconsin grown fresh fruits, vegetables and herbs to our seniors. In addition to offering nutritious foods, the SFMNP also supports



the local economy by supporting local farmers' markets. As with previous years, we continued our partnership with others providing information regarding programs available to individuals by working closely with the Benefits Specialist of the ADRC, Second Harvest local representative, and the Local Farmers' Market Coordinator. We strategically provide information that focuses on the area of fresh fruits, vegetables and herbs.

**Regional Site Manager Training:** In November, the required regional site manager training was held with mandatory training being offered and completed by staff. This virtual live training was sponsored by the Bureau of Aging and Disability Resources, Greater Wisconsin Agency on Aging Resources, Wisconsin Association of Nutrition Directors.

# ADMINISTRATION & BUILDING OPERATIONS UNIT AND BUSINESS & FINANCIAL SERVICES UNIT

## Mission Statement

The Administrative Units of Richland County Health and Human Services continually strive to enhance the provision of accurate and considerate support in a confidential and timely manner to agency staff and clients.

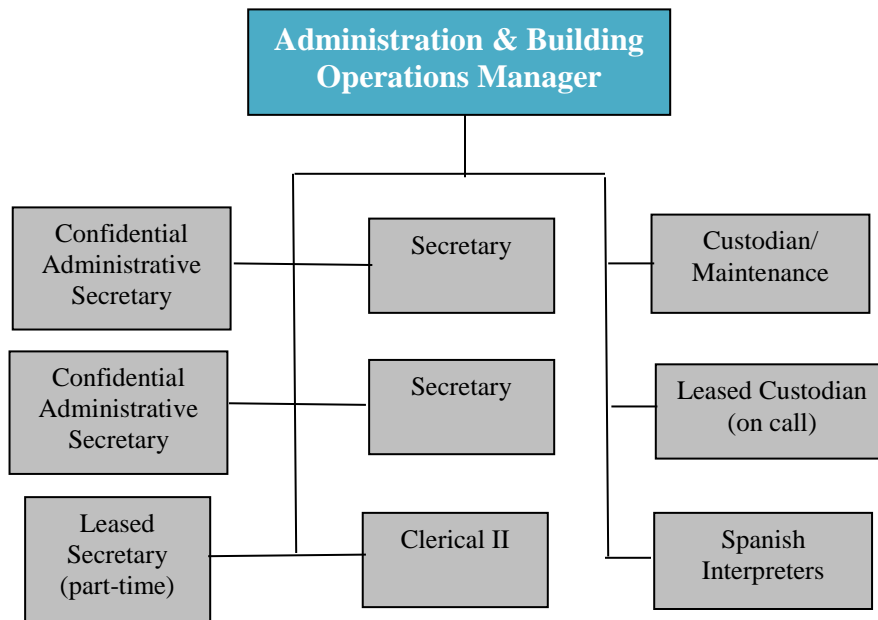
The Administration & Building Operations Unit and the Business & Financial Services Unit support all the units and staff within Health and Human Services. Some of the areas of responsibility are listed below:

Accounts Payable  
Accounts Receivable  
Annual Budget Preparation  
Board & Committee Support  
Claims Processing  
Cleaning & Building Maintenance  
Client Record Keeping  
Clients Rights & Complaints  
Community Aids Reporting System  
Contracts Management  
Emergency Management  
Fiscal Reporting  
Grant and Program Claiming

Human Resources  
Office Management  
Outpatient Mental Health Clinic Billing  
Payroll  
Program Participation System  
Public Health Immunization Clinics  
Public Information  
Reception and Information  
Representative Payee Services  
Social Media – HHS Facebook Page

# ADMINISTRATION & BUILDING OPERATIONS

In 2022, the Administration & Building Operations Unit performed responsibilities under the following organizational structure:



The Administration & Building Operations Unit is in place to provide support to the entire agency regardless of program. The unit staff wholeheartedly embrace the mission of striving to support agency staff and clients in an accurate, timely and considerate manner. The agency thanks each of them for their dedication to the important customer service role they hold.

Here are just a few of the accomplishments of the Administration & Building Operations Unit in 2022:

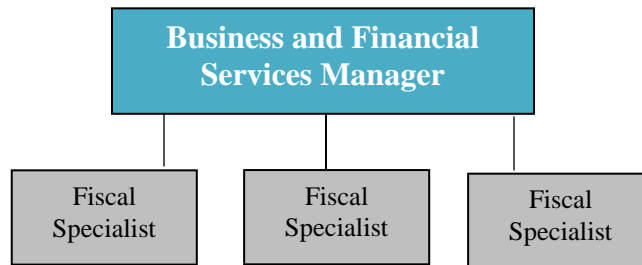
- While the Public Health Pandemic Emergency Response activities began to wind down in 2022, Administrative staff continued to help with a variety of duties. These duties included coordinating and supporting in-house COVID-19 vaccination clinics as well supplying information to the public through a variety of print and online media options. Additionally, they were key in ensuring that the most up-to-date local information regarding this clinic and others as well as testing sites was shared with callers/visitors.

- The successful use of DocuSign in 2021 resulted in its continued use in 2022 to securely process nearly 100 annual provider contracts for 2022 totaling over \$7m. DocuSign saves on paper and postage costs, improves the turnaround time, and expands the overall efficiency of the contracting process.
- Agency policies have been uploaded to HHS Workplace and are now available in an online format that is accessible to all employees of HHS.

Here are just a few goals for Administration & Building Operations Unit in 2023:

- Expand the use of DocuSign to provide efficiencies in other areas of Administration including but not limited to Human Resources paperwork.
- While some Human Resources functions in 2023 will be centralized at the county level, we will continue to spend a portion of 2023 improving processes that remain within the unit such as internal payroll, time-tracking, and onboarding to name a few.
- Participate in the roll-out of the new Engage module of the Behavioral Health Services Electronic Health Record (EHR) system Kareo to improve efficiencies related to Main Front Desk support and document storage/filing.
- Continue cross-training staff to ensure the ongoing completion of tasks if turnover occurs and which is a best practice to allow for coverage when staff are absent.

# BUSINESS & FINANCIAL SERVICES



To highlight the work they do, accomplishments in 2022 included:

- Unit staff remained committed to maximizing revenues by building tracking and monitoring systems into billing practices for the plethora of Behavioral Health programs as well as putting those processes in writing.
- Continued to cross-train each other to prevent lapses in completing the work required to accomplish the mission. This cross-training was possible because of the efforts made to put not only billing processes in writing but for other tasks as well. Tasks such as provider credentialing and bank statement reconciliation to name a few.
- In partnership with Administrative staff, achieved success in WIMCR reporting that guaranteed a positive revenue adjustment.

There is no doubt that the accomplishments of 2022 will continue as the unit sets the following goals for 2023:

- While significant strides were made to fully implement paperless EHR billing in order to complete more real-time billing in 2022, this will continue as a goal into 2023 as well as continued study of the EHR program and how we can use it for other operational efficiencies.
- Improve our financial interviewing process that increases our capture of insurance information before a client is seen allowing us to gather proper authorizations prior to a client's appointment.
- In addition to billing practices, improve other programmatic claiming processes along with how reporting requirements are met.
- Continue to cross-train in the department as well as ensure fiscal staff remain proficient by attending training as needed.

# AGING AND DISABILITY RESOURCE CENTER OF EAGLE COUNTRY – RICHLAND CENTER

## Mission Statement

In the Aging and Disability Resource Center we are dedicated to working with adults and their families who are impacted by disability or aging. We will strive to enhance their self-sufficiency and quality of life by providing information, assistance and education. In doing so we will at all times promote the rights, dignity and preferences of the individual.

We also uphold the provisions under the Older Americans Act of 1965 to enable Richland County elderly residents to lead dignified and healthful lives by providing a staff and volunteer network that seeks to provide timely, friendly assistance to the elderly as they cope with various health issues and difficulties in living independently.

## OVERVIEW

The Aging and Disability Resource Center (ADRC) is the local office of the ADRC of Eagle Country serving Crawford, Richland, and Juneau Counties. The ADRC provides information and assistance services designed to inform and connect county residents to programming, services, and public benefits. The ADRC serves:

- Adults who are elderly
- Adults with physical and/or developmental disabilities
- Adults with substance abuse issues
- Adults with mental health issues
- Youth with disabilities transitioning from children to adult services

The ADRC's Elder Benefit Specialist and the Disability Benefit Specialist provide benefits-related counseling and services to the elderly, as well as adults with disabilities between the ages of 18 and 59 years.

Through the ADRC, customers can also access health-related information and services that focus on early intervention/prevention. Staff also provide intake and eligibility determination for the publicly-funded long-term care programs called IRIS (Include, Respect, I Self-Direct) and Family Care. The ADRC also provides low vision support services and transportation assistance services. In 2022, the Richland Center Office of the ADRC of Eagle Country processed over 14,208 incoming contacts (phone calls or walk-in customers).

# KEY AREAS OF ACTIVITY

## INFORMATION, REFERRAL, ASSISTANCE AND OPTIONS COUNSELING

Services in this key area range from providing simple information, to providing short-term case management. These services are often provided by phone or by making home visits, when more in-depth counseling is needed to discuss all care and service options or to address more complex situations and assist customers with accessing programs and services.

In 2022, the Information and Assistance staff (I&A) received 4,497 contacts from customers. Contacts are defined as first-time customers, as well as repeat customers who contact the ADRC for assistance with a new issue or need.

### **2022 Information & Assistance Customers**

Of the self-identified:

66% were elderly (60 years and older);

16% were customers with physical disabilities;

6% were customers with developmental disabilities;

14% were customers with mental health or substance use disorders; and

6% were customers with Alzheimer's/irreversible dementia.

*Customers are not required to provide identifying information unless it is necessary.  
Remaining anonymous is respected.*

In 2022, I&A staff responded to 4,497 requests, concerns or needs that generated the provision of information, referral, assistance, options counseling, short-term case management, or early intervention/prevention services.

Consistent with previous years, about 78% of the needs expressed fell into 5 broad categories: financial assistance and support; long term care programs; home health/home supportive care; housing/residential needs; and transportation. While many customers simply need information, others need various kinds of assistance to connect to programs or services. Staff provide a wide range of assistance which can include: contacting a service provider on the customer's behalf; helping the customer complete an application; advocating on behalf of a customer to help solve a problem related to accessing a program or service; providing in-depth counseling about long-term care options; and providing short-term case management to assist a customer with multiple or complex needs.

## **PUBLICLY FUNDED LONG-TERM CARE PROGRAMS**

The ADRC is the intake point for State Long-Term Care Programs. In Richland County, those programs are Family Care and IRIS.

Eligibility determination and enrollment into both Family Care and IRIS is a complex process that occurs through the coordinated efforts of Economic Support, the Family Care Organization or IRIS Independent Consultant Agency and the Aging and Disability Resource Center. It is the Information and Assistance staff who guide customers through the eligibility determination and enrollment process, including:

- conducting the Long-Term Care Functional Screen to determine functional eligibility;
- working with the Economic Support Unit to facilitate financial eligibility;
- providing enrollment counseling and answering questions about Family Care and IRIS;
- completing Family Care enrollments or making referrals to the IRIS Independent Consultant Agency;
- helping to transition customers into Family Care or IRIS; and
- providing advocacy for customers who are having issues or concerns with their chosen long-term care program after enrollment.

In 2022, staff completed 89 Functional Screens and enrolled 66 customers into long-term care publicly funded programming.

## **DISABILITY BENEFIT SPECIALIST**

Disability Benefit Specialist services are available to Richland County residents ages 18 through 59 years with physical disabilities, developmental disabilities, and/or disabilities due to mental illness and/or substance abuse disorders. The Disability Benefit Specialist provides information on public and private benefits, assists with applications, appeals, and advocacy. Typical areas of assistance include programs, such as Social Security Disability Income (SSDI), Supplemental Security Income (SSI), Medical Assistance, and Medicare Part D. The Disability Benefit Specialist also works closely with other ADRC staff to provide referrals for community resources and services, options counseling, and information and assistance related to the long-term care benefit. The Disability Benefit Specialist position consults with a Technical Advisor who is an attorney at Disability Rights Wisconsin.



In 2022, the Disability Benefit Specialist program assisted 199 Richland County residents in receiving over **\$409,615.00** in Federal, State or private benefits for which they qualified. Due to the COVID pandemic and an increase in the amount of time that it takes to get a Disability determination, this was significantly less in 2020, 2021 and 2022 compared to other years.

Since the Disability Benefit Specialist Program began in Richland County in 2002, the total financial impact for residents of Richland County amounts to over \$17,266,990. These are positive results, not only for those who successfully obtained benefits but also for the entire community, as these individuals are now able to purchase goods and services, such as housing, food, clothing and medical treatment.

### **ELDER BENEFIT SPECIALIST**

Through the Elder Benefit Specialist Program, Richland County residents age 60 or older can receive free advocacy and assistance with issues related to public and private benefits to which they are entitled due to age, disability, or financial factors. In order to ensure high-quality advocacy and representation of program participants, the Elder Benefit Specialist receives in-depth, on-going legal training and supervision from attorneys through the Greater Wisconsin Agency on Aging Resources.

The Elder Benefit Specialist works closely with Information and Assistance Specialists to provide referrals for community resources and services, options counseling, and information and assistance related to long-term care services. The Elder Benefit Specialist provides information on program eligibility criteria, assistance applying for benefits, appealing benefit denials or incorrect benefit amounts, and also offers representation in the areas of consumer debt, landlord/tenant law, and private insurance. In an effort to address the growing need for pre-retirement information and assistance, 10 Medicare workshops were offered. In 2022, 55 people attended to learn how to navigate all the Medicare Programs, and an additional 312 seniors received other assistance.

In 2022, the Elder Benefit Specialist Program provided a savings to 333 Richland County residents totaling **\$1,569,862** in Federal, State, and other funding based on the type of program.

These savings benefit the community as elders use the funds locally to purchase food, clothes, medication and pay for housing.

## **EARLY INTERVENTION/PREVENTION SERVICES**

In partnership with the Symons Recreation Center, the ADRC provided the funding and technical support to hold Tai Chi, Strong Bodies, PALS (Physical Activity for Lifelong Success) and SAIL classes which are evidence based programs that significantly reduce falls for seniors. A total of 93 seniors participated in the classes.

In 2022, the ADRC provided a virtual Powerful Tools for Caregivers class in partnership with the Regional Dementia Care Specialist.

## **TRANSITION SERVICES FOR YOUTH**

Transition services for youth involve developing collaborative relationships with area schools and community agencies in order to assist young adults/students who have physical or developmental disabilities, have mental health or substance abuse disorders and are in need of long-term care. Transition services assist students and their families in accessing information, options counseling, and connections to needed services.

An Information and Assistant Specialist is assigned to each client to take the lead in developing and promoting transition services. Transition activities in the 2021-2022 school year included:

- Ongoing provision of information and assistance to teachers (who are making requests on behalf of the students) via email, telephone, and in-person meetings.
- Provision of specialized options counseling to youth and their families when transitioning from children's disability services to disability services and benefits.
- Leadership and participation in monthly County Communities on Transitioning (CCOT) meetings. The Council members include high school teachers, representatives of community organizations, such as Vocational Rehabilitation and Independent Living Services, Southwest Technical College, CESA #3, and staff from other areas of Health and Human Services, such as Children with Disabilities staff.
- Ongoing outreach to all area schools.

## **ALZHEIMER'S FAMILY CAREGIVER SUPPORT PROGRAM (AFCSP)**

The Alzheimer's Family Caregiver Support Program was established by the Legislature in 1985 under Wisconsin Statutes and is implemented in accordance with administrative rule HFS 68. The program funding supports the entire family of a person with irreversible dementia so that caregivers can continue to provide home and community-based care. There is required financial eligibility determination and a maximum household ability to pay determination.

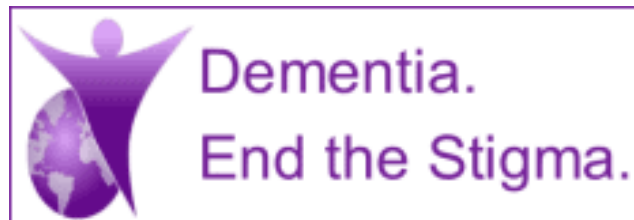
In 2022, Richland County Health and Human Services received \$6,098. The funding was used to provide information, assistance and supportive services to Richland County families, and conduct outreach and education to the community.



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## **DEMENTIA CARE SPECIALIST**

The Dementia Care Specialist (DCS) is a person employed by the Aging & Disability Resource Center (ADRC) of Eagle Country's Regional office who is responsible for assisting individuals and families living with dementia to continue to be active in their community and remain in their homes for as long as they are able. The DCS also ensures the ADRC staff are knowledgeable about dementia and are prepared to meet the needs of the people they serve in a supportive, helpful manner.



The ADRC of Eagle Country serving Richland, Crawford and Juneau Counties employs 1 ½ Regional Dementia Care Specialists which means each county has a half-time DCS. In 2022 the DCS provided numerous services in partnership with local ADRC staff in Richland County. Below are some of the highlights from the variety of programs:

**Individual consultations** Individuals and their families plan for their future by providing information on what to expect, decisions they may want to consider in advance and resources available to support individuals living with these changes. In 2022, 44 contacts were made, including 25 individual caregivers and their families.

**Dementia Live** - The Dementia Live™ experience gives participants an idea of what it is like to have dementia. This is done by altering their senses and providing them with tasks to do in a controlled setting. In just 15 minutes participants gain greater awareness and understanding of the daily struggles affecting persons with dementia. In 2022 Dementia Live was provided to local banks, HHS staff and individual families.

**Dementia Friendly training for businesses** was provided to 14 local bank employees in May. Dementia Live was offered to 9 individuals, including caregivers, in November.

#### **Education –**

- “Powerful Tools for Caregivers” class was held in November with 4 family caregivers in attendance.
- “Savvy Caregiver” was offered as an in-depth educational online class, attended by 6 family caregivers. Several area caregivers expressed gratitude to be able to take this class without having to leave their person with dementia at home alone
- “Caregiver Bootcamp” event was offered to family caregivers as an all-day series of education sessions that focused on education about the dementia disease as well as self-care.
- Education on Brain Health, caregiving issues, as well as education on the dementia disease, was conducted along with interviews on the WRCO radio Morning Show.
- Richland Active Seniors Citizens group of 20 senior citizens received a Brain Health presentation upon request.

#### **Caregiver Support Groups-**

- Monday Coffee Connect caregiver support group, provided weekly online for the entire year, served caregivers across a 10 county region.
- In-person support group, revived after the pandemic, served local caregivers.

**Memory Screens** were conducted with **15** individuals that expressed interest and met with the DCS to hear about Brain Health education. Upon request results were sent to their doctor for a baseline in their medical record. Many expressed interest

after the presentation of the play "Fortune Cookie" (see below), as well as a Memory Screen event at the local library.

### **Special Events-**

- The play "Grandpa and Lucy" (adapted from a children's book) was presented as education to kids and families about how to respond to family members with dementia to an intergenerational audience of 30 kids and adults at a local library.
- The play "Fortune Cookie" was presented, highlighting concerns that seniors have about memory issues and brain health, with 66 people in attendance.
- Community Access TV interview, highlighting Dementia education and DCS services was videotaped and put on our regional Eagle Country website.

**Coalitions-** Richland CARE Coalition continued to meet on projects to improve the health of the Richland County community. A Job Fair was held to local employers of professional caregivers, and the DCS networked with attendees on the availability of DCS services.

The DCS also participates in county I-Team meetings with other organizations, addressing the issues of elder abuse in all its form, along with Adult Protective Services. There has been a recent gradual increase in financial abuse via scams, and so the DCS offers to train local banks to be Dementia Capable to address that issue.

In order to increase the impact of efforts to address issues of those with memory issues, the DCS met with staff from local like-minded agencies, such as the local Adult Day Center and the Geriatric Assessment Clinic. The regional ADRC of Eagle Country also held a Summit with its partners in the Alzheimer's Association and Alzheimer's & Dementia Alliance of Wisconsin, with 20 professionals in attendance.

In order to make the county "Dementia Capable" the DCS also trained 17 ADRC Aging staff and volunteers in the Transportation Program in April, to recognize and respond to people with dementia in an appropriate and positive manner.

# **THE RICHLAND COUNTY TRANSPORTATION PROGRAM**

The Richland County Transportation Program had been returning to pre COVID service levels. The focus in 2022 returned to include medically necessary, food security, social recreation, personal business and quality of life trips. The transportation program has four main services it provides including the driver escort program, public bus routes, public bus grocery routes, and on-demand wheelchair transportation to medical appointments. The public bus routes are designed to provide transportation to rural residents and bordering communities in an effort to connect them with Richland Center and surrounding counties. The Driver Escort Program provides door-to-door transportation service to the elderly and disabled residents of Richland County to medical appointments within an 85-mile radius.

## **Richland County Public Transportation & Lift Vehicle Transportation**

The Richland County Public Transportation program bus routes travel along the major roads through the county Monday through Friday.

Additionally, Richland County residents were able to coordinate wheelchair transportation to medical appointments within 85 miles of Richland County.

In 2022, the Richland County Public Transportation and Lift Vehicle Transportation programs had four temporary casual drivers providing a total of 1097 trips, traveling 28,479 miles.

## **The Richland County Driver Escort Program**



In 2022, the Driver Escort Program had 20 volunteer drivers providing a total of 3,152 one-way trips traveling 123,140 miles. Volunteer drivers donated a total of 4,808 hours of their time.

The program is primarily funded through the s.85.21 Department of Transportation grant for Specialized Transportation which requires a 20% county tax levy match to receive the funding. In addition, the transportation program receives reimbursement through Includa, My Choice WI and co-pays collected from passengers.

### **NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM (NFCSP)**

The National Family Caregivers Support Program was established as an amendment to the Older Americans Act in 2000. Funding support in 2022 totaled \$12,636 to provide five basic components under the program:

- Information to caregivers about available services
- Assistance in gaining access to support services
- Individual counseling, advice on organization of support groups, and caregiver training
- Respite care
- Supplemental services to complement the care provided by caregivers



Use of these funds is less restrictive with minimal guidelines that allow for more generalized family caregiver support. Possible uses include support services for grandparents and other relative caregivers of children 18 and under, older individuals providing care to persons with developmental disabilities, and family caregivers of elderly persons aged 60 and over. In 2022, funds supported 24 local families, provided information and assistance through the ADRC, and subsidized transportation needs for caregiver families.

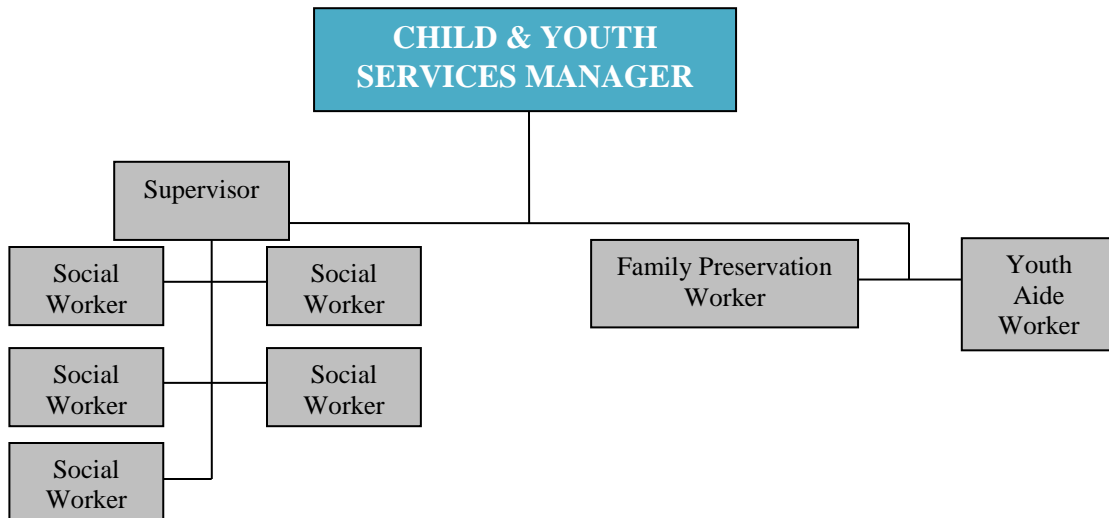
# CHILD & YOUTH SERVICES UNIT

Richland County Children's Services works with local children ranging in age from birth to at least eighteen years of age, in some circumstances it may be longer. We interact and support families through four individual program initiatives, all mandated through the State departments of Children & Families, Health Services, and Corrections.

Those four programs are as follows:

- Child Protective Services
- Youth Justice
- Foster Care and Kinship Care
- Independent Living

The Child and Youth Services Unit (CYS) is structurally organized as follows according to the programs outlined above:





## CHILD PROTECTIVE SERVICES

Children's Protective Services (CPS) is a key component of the Child Welfare system in Richland County. CPS involvement is warranted when there is a referral indicating a child may be unsafe, abused or neglected, or at risk of maltreatment. CPS identifies and addresses underlying family conditions that make children unsafe or at risk of maltreatment and implements a variety of safety plans with families in attempts of mitigating concerns by the least restrictive means possible.



### Child Welfare Model for Practice:

1. **Trust** – CPS workers approach complex family situations with honesty and integrity to support positive change.
2. **Engagement** – CPS established relationships with families through collaboration, empathy and partnership. The voices of families are included and welcomed in planning.
3. **Accountability** – We are accountable for the children, youth, and families in our community and are responsible for providing trauma-informed, culturally sensitive services. It is our job to learn, self-correct, innovate, and work towards positive outcomes.
4. **Trauma-Informed Practices** – CPS workers understand the impact of trauma on children and families and recognizes that practice is most effective when trauma is considered.
5. **Respect** – We acknowledge the worth, ideas and experience of every person and family system.
6. **Culturally Responsible** – We seek to reduce all biases and disparities at the individual, agency, and system level and treat clients with fairness and equity and serve them within the context of their identity, family, community, tribe, history, culture and traditions.
7. **Workforce Support** – The system promotes teaming amongst workers, supports professional development and seeks to ensure the safety of all workers and provides support to address secondary trauma.
8. **Family Centered** – Workers engage with families with a strengths-based perspective, supports teaming and advocate for appropriate services and supports to meet the needs of families, youth, and caregivers. Families and youth are the drivers for change and are empowered to make decisions with the recognition that they are the experts on their needs.

CPS workers in Richland County are required to follow strict laws and standards when determining if CPS intervention is warranted

2022 CPS Reports	
Reports Received	273
Alleged Victims	449
Initial Assessments	62
Child Welfare Reports	87
Child Welfare Cases Opened	70

## YOUTH JUSTICE (JUVENILE JUSTICE)

Youth Justice (also known as Juvenile Justice) is the second component of the local Child Welfare system, which serves children who are 17 years of age or younger, who have been alleged to have violated laws. The focus of interventions is to interrupt destructive, delinquent behavior and also prevent youth from ending up in the adult prison system in the future. Services traditionally provided include: processing juvenile referrals, making recommendations to the court, case management and service coordination, collection and distribution of restitution, electronic monitoring, and reunification for youth who have been placed out of the home.

**In 2022, there were 16 Youth Justice Referrals, 7 cases ended up with Supervision and Services, 2 cases are still pending in the court process.**

There is a new vision for Youth Justice being implemented at the state level which encompasses a vision for accountability of youth rather than on punishment. This movement stems from recent research that indicates traditional sanctions such as sending youth to secure detention, often increases recidivism and pulls them deeper into the system. Under the new vision, the needs of victims are taken into account and clearly addressed, and stakeholders such as social workers and judges share an understanding of accountability that truly allows youth to take account for, and learn from their mistakes. Accountability for youth includes: repairing harm, opportunity to learn and grow, engagement in the process rather than simply the outcome, building youth support systems. As part of this program Child and Youth Services staff have begun to be trained in an evidence based assessment and planning tool (YASI- Youth Assessment Screening Instrument). The department is further working with ADA Amy Forehand and Judge Lisa McDougal with the Public Defender's office to develop a protocol and procedure to utilize this tool to assess recidivism risk of youth and develop case planning that addresses specific identified needs of the youth involved in the Youth Justice System.

## **YES (Youth Empowerment Services)**

One particular effort in Richland County to support youth and provide restorative justice opportunities is our YES program. YES provides youth with opportunities to develop life skills and supportive relationships with peers and adults. Participating youth share their collective energy and creativity in completing projects that benefit our community and explore topics such as self-esteem, citizenship, and cooperation.

## **FOSTER CARE and KINSHIP CARE**

CPS tries to keep families together whenever possible and works hard to make in-home safety plans. When it is not possible to do so however, children need sensitive and caring alternate caregivers to support the family through transitions, separations and reunifications. The CPS unit in Richland County licenses level 1 and level 2 foster homes and supports an array of relative or kinships homes. We support these alternate caregivers with the training and support from our Foster and Kinship Coordinator.



Richland County receives a small stipend to help youth who age out of care to achieve independence post 18 years. In 2015, the state began assuming responsibilities for this activity statewide by regions. In 2016, Richland County relinquished activity and funding to the State and no longer provides this service locally. Our regional services are delivered out of Platteville through a private partnership contracted by the state.

# BEHAVIORAL HEALTH UNIT

## Mission Statement

*To individuals and families...*

Behavioral Health Services strives to improve the emotional well-being of individuals and families based upon their identified wants and needs by providing accessible, quality assessment, treatment, rehabilitation, education, and support in areas of mental health and addiction recovery.

*To the community...*

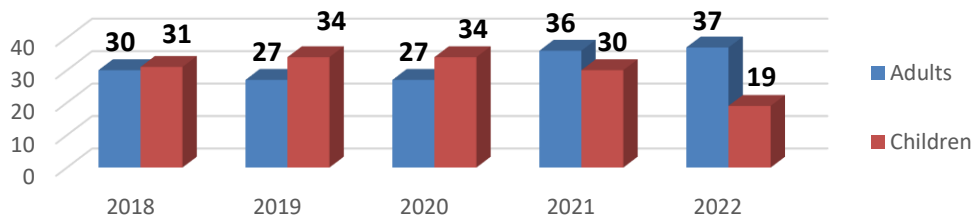
Behavioral Health Services endeavors to serve as a resource to the community on mental health and addiction in the areas of education, intervention, and treatment in order to promote an environment that is supportive to individuals seeking and obtaining assistance.

## Overview

Behavioral Health Services provides a continuum of services to Richland County residents that range from brief crisis intervention to intensive long-term treatment services. Behavioral Health Services helps individuals and families who are experiencing acute emotional crises, addiction, short-term mental health issues, or persistent mental illnesses and substance use disorders.

### Comprehensive Community Services (CCS)

Comprehensive Community Services (CCS) is a fully funded program by Medicaid that helps individuals of all ages with Medicaid live their best life by providing supports that address their unique needs related to mental health and substance use. CCS is intended to assist individuals who are in need of care outside of inpatient settings, but who may have ongoing needs that, if left unaddressed, could result in hospitalizations during times of crisis. In 2022, 37 adults and 19 children were served through the CCS program.



## Children’s Long-Term Support (CLTS) Program

Children’s Long-Term Support (CLTS) program helps children with disabilities and their families through supports and services that help children grow and live their best lives in their home and community. Richland County is mandated to provide CLTS services and cannot have a waitlist. Medicaid reimburses the county for the case management of the children enrolled in CLTS, covers the services needed and the items that are needed.

In 2022, the program served a total of **62** children in both the Waiver and CCOP programs.

### Birth to 3

Birth to 3 is an early intervention special education program that helps children under the age of 3 who have delays or disabilities. Richland County is mandated to provide Birth to 3 services and provide match funds in order to receive State funds. Richland County has 3 staff that cover both Birth to 3 and CLTS.



In 2022, the Birth to Three Program received **43** referrals and served **51** children. The county has continued to extend its child find efforts in partnership with the local school districts, hospitals and community.

### Coordinated Services Team (CST)

Coordinated Services Team (CST) is for children who are involved in multiple systems of care such as mental health, substance use, child welfare, juvenile justice, special education or developmental disabilities. The goal of the team is to set up a 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 community.

While CST is not a mandated service, Richland County provides a 20% match and has one designated staff member to support this program. In 2022, 19 children were enrolled in the program.

## Adult Protective Services (APS)

Adult Protective Services (APS) helps elderly adults and adults at risk who have been abused, neglected, or financially exploited. Richland County is mandated to provide APS Services and has 1 staff member designated for this purpose. Richland County receives a limited amount of State funding to provide specific services and assistance to persons age 60 and over who meet abuse and neglect criteria outlined by the state. In 2022, this role was being filled by a psychiatric RN and there were a total of 85 Adult at Risk and Elder Abuse Reports.

	<b>59 or Under</b>	<b>Over 60</b>
<b>Total Number of Reports</b>	33	52
Self-Neglect	4	19
Financial Exploitation	2	13
Neglect by Other(s)	4	6
Physical Abuse	2	0
Sexual Abuse	0	0
Emotional Abuse	7	6
Other	14	8

The role of APS in court actions involving guardianships and the protective services process is another way that HHS assures the health, safety and protection of our most vulnerable citizen's rights. Working closely with the Richland County Corporation Counsel, APS assists individuals and guardians through the guardianship process. Court action can include creating guardianship of estate and person, protective services and placement of an individual, creating successor guardianships, terminating guardians of person and estate, emergency protective placement, and change of venue. It is the responsibility of the APS Program to complete a comprehensive study for all persons protectively placed to assure individuals are placed in the least restrictive and most integrated setting, as well as conduct annual reviews.



## Crisis Services

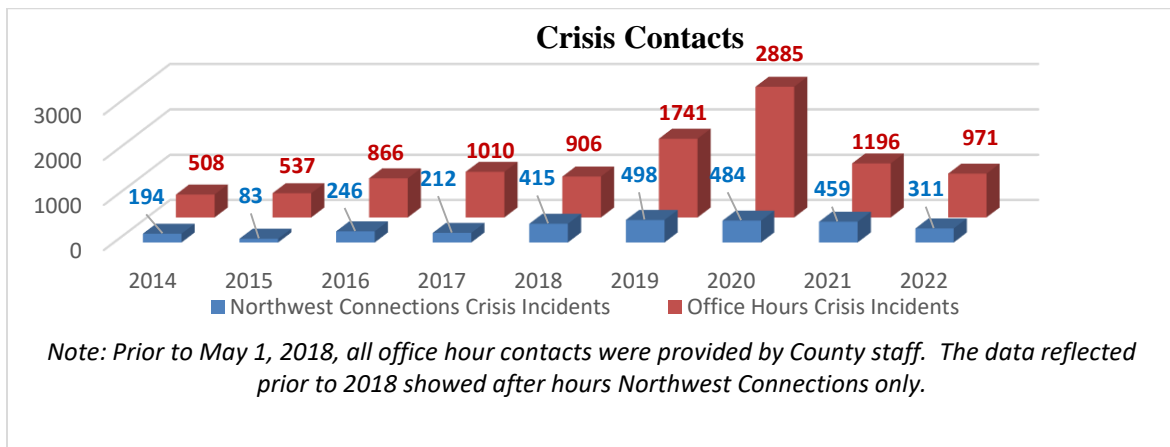
Crisis services are set up to give someone to talk to, to provide a response to them and to help find a place to go to if needed to ensure safety of themselves from themselves. Crisis Services are required as Health & Human Services is Chapter 34 certified, and Richland County is required to match \$21,903 in levy.

Every county in Wisconsin is required to provide emergency mental health and substance abuse services. These services allow the county to intervene prior to someone needing to be hospitalized. In 2022, Health and Human Services provided Crisis services to a total of **266** individuals. The types of services that may be provided include:

- Evaluation, crisis counseling and mental health care to persons experiencing emotional distress, suicidal ideation or mental health crisis.
- Response to outpatient emergencies related to substance abuse including the provision for examination of a person’s need for detox.
- Arranging for emergency hospitalization and detox when appropriate.

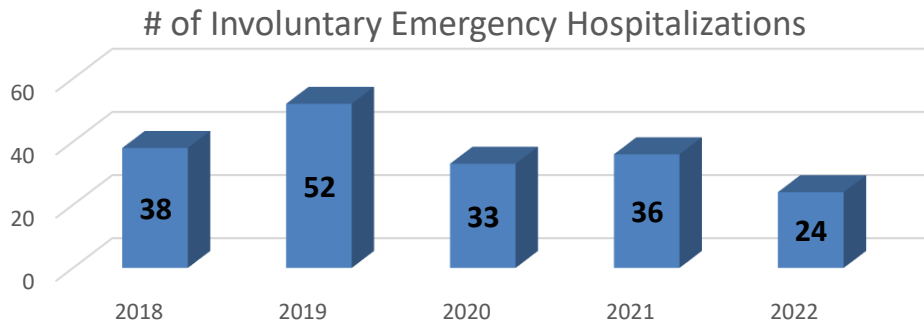
Behavioral Health Services professional staff provided walk-in crisis services, and mobile response to crises during the regular business hours of Health and Human Services. During non-business hours, Northwest Connections is a contracted service that responds to crises in Richland County. Northwest Connections handled **311** crisis contacts. Behavioral Health staff completed a total of **971** daytime crisis contacts, with a total of **1282** crisis contacts altogether in 2022. The total number of crisis contacts includes all crisis assessments and follow up contacts completed by staff.

During 2022 a staff member also provided services through a contract with the Richland School District. The staff provided mental health therapy and crisis services to children in the district.



## Emergency Detention

An emergency detention occurs when an individual is taken into custody after it has been determined that they pose a risk to themselves or others. The individual is transported, sometimes by law enforcement, to a designated medical or treatment facility where they may remain in custody for up to 72 hours. During this time an assessment is completed to determine the individual's needs and whether additional involuntary treatment is required.



Recommendations are provided to the Richland County Corporation Counsel and the Department of Health and Human Services, resulting in one of three possible outcomes:

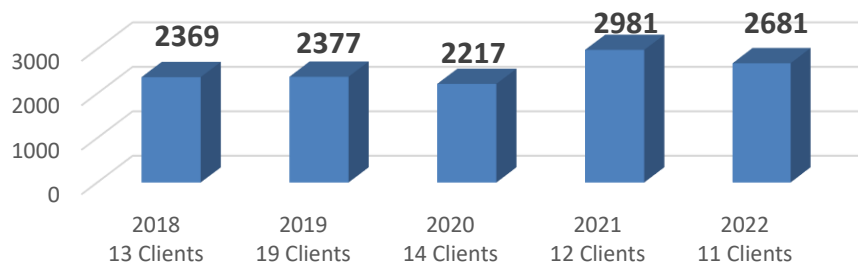
- **Discharge from the treatment facility** occurs if it has been determined that the individual is stable and safe to return to the community and has voluntarily agreed to any required follow up treatment.
- **Voluntary inpatient hospitalization** occurs if it has been determined the individual is not ready for discharge, and the individual voluntarily remains in the medical or treatment facility for further assessment or treatment.
- **Court intervention** occurs when if it has been determined additional assessment or treatment is needed and the individual is unwilling to comply.



## MENTAL HEALTH RESIDENTIAL SERVICES

Mental Health residential services are provided when individuals require supervised living services in order to cope with their mental health symptoms. These services are provided in Adult Family Homes (AFH) or Community-Based Residential Facilities (CBRF). Some individuals need temporary residential services to assist with successfully transitioning from an inpatient psychiatric hospital stay back to living independently in their own homes. Others require long-term placements in order to remain in the community and avoid institutionalization. In addition to residential services, individuals receive other community treatment so that they may reach their highest possible level of functioning. **11** individuals received residential services in 2022.

Number of Days in Mental Health Residential Placements



## Mental Health Outpatient Clinic

Richland County has an outpatient mental health clinic that provides mental health therapy, psychological assessments, psychiatric care from a psychiatrist and starting next year from a psychiatric nurse practitioner. Richland County receives a mental health block grant from the state to cover the cost of the clinic and has 4 staff assigned for these services.

During 2022, Behavioral Health Services provided psychotherapy to **47** individuals. Psychiatric care and medication management was provided to **57** individuals and **16** psychological evaluations were completed.

## Treatment Court

Treatment court is funded through the Treatment Alternatives and Diversion Program (TAD.) Treatment court is for non-violent adult offenders for whom substance abuse was a contributing factor in their criminal activity. Richland County has a required 25% match of total expenses and has 1 staff member designated for the program.

**Sobriety Treatment Court** serves Richland County residents that have 3 or more OWI convictions and who suffer from alcohol dependence issues. Some other alcohol related convictions may also be considered. This is a 5 phase, 14-month minimum program. The program works cooperatively with multiple agencies to ensure accountability and to offer rehabilitation services.

**Drug Treatment Court** is a treatment-based alternative to jail, prison, and the standard probation model. The goal of Richland County Drug Treatment Court is to enhance public safety, persevere families, and improve the lives of all Richland County Residents. These goals are accomplished by providing integrated supervision and evidence-based treatment to moderate or high risk clientele. This program serves Richland County residents that have drug-related convictions and are diagnosed with a moderate to severe substance use diagnosis. This is a 5 phase, 14-month minimum program. Honorable Judge Lisa McDougal presides over Richland County Drug Court.

## Substance Abuse Treatment Services:

Through the State Opioid Response (SOR) grant, Richland County has a substance abuse counselor on staff. In addition to funding the counselor position, the SOR grant may also be used to fund treatment, community education, and prevention.

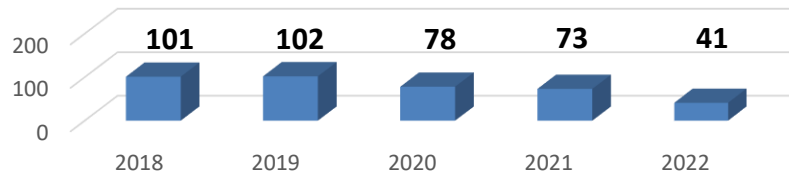
Substance abuse counseling is a specialized treatment focused on assisting individuals to stop or minimize the negative effect of addiction on their lives. In 2022, the Behavioral Health Services substance abuse counselor provided assessment, referral, and treatment to 24 adults and teens struggling with substance use disorders.

In addition to individual outpatient counseling, group programs were also provided utilizing the evidence-based curriculum called PRIME for Life. Research conducted on these programs demonstrated effectiveness in helping participants reduce or eliminate high-risk substance use.

## INTOXICATED DRIVERS PROGRAM

In addition to fines and criminal penalties, when an individual is convicted of operating a motor vehicle while intoxicated, state law mandates that he or she be ordered to complete an Intoxicated Drivers Program (IDP) Assessment. The IDP assessor conducts a specific type of assessment for this program, and based upon the results, the offender is referred to the appropriate education or treatment program.

**Number of IDP Clients**



## CHOICES

Choices is an educational program that is offered as an alternative sentence by the court to violators of the underage drinking laws of Wisconsin. Underage offenders may face a fine, loss of driver's license, and as a result of the conviction, increased insurance rates. The Choices option allows a first offender the opportunity to keep his or her driver's license and avoid a conviction record. The program uses the evidence-based PRIME for Life curriculum which has been shown to improve low risk decision making among participants.

## DETOX SERVICES

Detox refers to the process the body goes through to rid itself from alcohol. Detox services are mandated services that the county must provide per state statute 51.40 and state statute 51.45. This can be very dangerous for individuals who heavily abuse alcohol. Richland County had contracts with a number of providers for certified detox programs.

# ECONOMIC SUPPORT UNIT

## Mission Statement

The Richland County Health and Human Services Economic Support Unit believes that all persons requesting our assistance have the right to be treated with respect, dignity and confidentiality.

Our Mission is to provide all individuals within the Capital Consortium access to services needed to achieve economic stability within the programs we administer, including referrals to other appropriate agencies.

## Capital Consortium Member for Income Maintenance

### PROGRAMS ADMINISTERED

Badger Care Plus  
Caretaker Supplement  
Wisconsin Share/Child Care Subsidy  
FoodShare  
Day Care Certification

Fraud and Front-End Investigations  
Marketplace Assistance  
Medical Assistance  
WI Home Energy Assistance

## The Role of the Economic Support Unit

To emphasize the Economic Support Unit Mission, Economic Support Specialists (ESS) and support staff provided services needed to achieve economic independence to almost **26.9%** of Richland County Residents, including referrals to the appropriate agencies. In 2022, as they do every year, the ESS and support staff provided this service by treating all persons with respect, dignity and confidentiality. Economic Support's vision is to create an atmosphere in which service delivery is effective, seamless, and need fulfilling. The goal is to serve customers in a way which enhances their lifestyle so that they may see satisfactory results now and later in life. This was never more important than in 2022 due to the negative economic impact on so many families due to the COVID-19 Public Health Emergency.

In 2022, ESS and support staff processed changes on a daily basis by navigating a variety of computer systems in order to verify information while at the same time providing excellent customer service as Call Center Agents. In addition to client contacts, they continue to interpret program policy and in 2022 continue to administer a significant number of policy changes or clarifications including several

significant system enhancement projects. The majority of these changes were the result of the COVID-19 Public Health Emergency to ensure families and individuals remained eligible for programs. Call Center Agents remained proficient in applying these policies while also managing approximately 850 cases per family worker and 860 cases per EBD worker. These significantly high caseloads remain manageable with the assistance of the Capital Consortium which we joined in 2012.

In addition to their regular daily tasks, each Economic Support Specialist takes one to two days each month to be the contact person for our unit for the agency staff, county staff, and the community.

## **The Role of the Capital Consortium**

2022 was Richland County's eleventh year as part of the Capital Consortium for Income Maintenance programs. In the current economic climate it is important to continually explore creative approaches to efficiently deliver Economic Support Services. Throughout the years, there has been continuous communication, coordination and cooperation on a daily basis between Adams, Columbia, Dane, Dodge, Juneau, Richland, Sauk, and Sheboygan counties to ensure that the assistance provided remains consistent and in keeping with the Economic Support Mission. The ability to share the work across these eight counties through this continued partnership provides for the sought out increased efficiencies and better customer service for the citizens of Richland County.

A key component of this relationship was the creation of the Capital Call Center. Our participants and new applicants call a toll free number and speak to someone immediately with questions (general or case specific), to report changes, to complete renewals or to apply for benefits. In 2022, each ESS dedicated over three-fourths of each work day to the Call Center. In 2022, the Capital Call Center accepted 242,477 phone calls. As a consortium we exceeded the State Performance Standard requirement of 85% as a Call Center by answering 87.29% of the calls offered. Richland County ESS are an integral part of the call center and accepted almost 26,000 of those calls making a significant contribution to achieving excellent performance. Richland County's answer rate was 97.6% for 2022. Richland County ESS have a goal to accept 8.21% of the answered calls that come into the call center. Richland ESS exceeded that goal and accepted 10.7% of the total answered calls on the call center for 2022.

In addition to call center standards, the State also sets a Performance Standard benchmark that requires 95% of all applications for BadgerCare Plus, Medicaid, and FoodShare to be processed timely. In 2022, the consortium processed 67,351 applications with a timely processing rate of 97.5%. Of those, Richland County ESS processed 5,596 applications and had a timely processing rate of 97.2%.

## MEDICAID

### (BADGER CARE PLUS)

BadgerCare Plus (BC+) and Family Planning Services (FPOS) are State/Federal programs that provide health coverage for Wisconsin families as well as single individuals. The persons listed below could be eligible if they meet all other BC+ non-financial and financial requirements. In 2020, if found eligible, but circumstances changed, coverage was not allowed to be terminated due to the COVID-19 Public Health Emergency. This continued through 2022. Potential BC+/FPOS members include:

- Children under 19 years of age;
- Pregnant women;
- Parents and caretakers of children under 19;
- Young adults leaving out of home care (such as foster care);
- Parents and caretaker relatives whose children have been removed from the home and placed in out of home care;
- Documented and undocumented immigrants who are children, parents or caretakers, and who are ineligible for BC+ solely due to their immigration status may be eligible for coverage for BC+ Emergency Services;
- Documented and undocumented immigrants who are pregnant and ineligible for BC+ solely due to their immigration status may be eligible for the BC+ Prenatal Program;
- Women ages 15-45 may be eligible for limited benefits under the BC+ Family Planning Services program (FPOS);
- Single individuals between the ages of 19 and 64 who are not pregnant; single is defined as not caring for a child under age 19 who is living with him/her.

### (MEDICAL ASSISTANCE PROGRAM)

Medicaid, also known as Medical Assistance, MA, and Title 19, is a State- and Federally- funded program that helps low-income people, including residents who are elderly, blind, or disabled (EBD), pay their medical bills. A person may be eligible if he or she meets all non-financial and financial requirements. In 2022, if found eligible but circumstances changed coverage was not allowed to be terminated due to the COVID-19 Public Health Emergency. If eligible, they may fit into one (or more) of the sub-programs listed below:

- SSI-related Medicaid
- Medicaid Purchase Plan (MAPP)
- Institutional Long Term Care
- Home & Community Based Waivers Long Term Care
- Family Care Long Term Care
- Katie Beckett
- Tuberculosis-related
- Medicare Premium Assistance (QMB, SLMB, SLMB+, QDWI)
- Emergency Medicaid
- SeniorCare

**In 2022, as many as 15,000 individuals were enrolled in BC+ & MA by Richland County Economic Support Specialists in a given month. Of those 15,000 individuals, 4,756 were Richland County residents.**

**In the 2021 calendar year, the most recent data available, Medicaid expenditures paid on behalf of Richland County residents (including EBD & Long Term Care programs) totaled \$38,387,662.**

### **CARETAKER SUPPLEMENT (CTS)**

Wisconsin's Caretaker Supplement (CTS) is a cash benefit available to parents who are eligible for Supplemental Security Income (SSI) payments. CTS is not a Medicaid benefit; it pays cash only to eligible parents. CTS benefits are \$250 per month for the first eligible child and \$150 per month for each additional eligible child. Parents who receive SSI who are living with and caring for their minor children apply for CTS at their local human services or social services agency. The children must meet income and asset requirements to be eligible and the children must not be on SSI themselves.

**In 2022, 13 children received \$33,750 in assistance.**

### **WISCONSIN SHARES/CHILD CARE SUBSIDY**

Wisconsin Shares Child Care Subsidy supports low-income working families by subsidizing a portion of the cost of quality child care while the parents or caregivers are working or participating in another approved activity.



Steps toward receiving day care assistance are:

- 1) You must complete an application including a required appointment (phone or face-to-face) with an Economic Support Specialist.
- 2) You must be income eligible.
- 3) You must be in an approved activity such as working, or
- 4) You may receive child care assistance for up to 24 months while attending a course of study at a technical college if the agency determines the course would facilitate employment.
- 5) You must use a County certified or State licensed provider who is also Youngstar approved.
- 6) You may be required to pay a "parent's share" to the provider based on your income and the number of children in care.

Like FoodShare, families have the ability to pay for child care using approved Wisconsin Shares Child Care Subsidy funds utilizing an EBT card. If eligible for assistance and an authorization, funds are deposited directly to the EBT card on a monthly basis. This method gives parents the responsibility of paying the provider which in turn assists them in developing a relationship with their child care provider.

**In 2022,  
\$35,129.11 was paid to providers on behalf of families.**

### DAY CARE CERTIFICATION

Staff in the Economic Support Unit are also responsible for certifying Day Care facilities. Richland County ended 2022 with one certified provider. To be certified, a provider must have a home visit, submit to a background check, and comply with other qualifying requirements. Once certified, a provider must complete a bi-annual renewal as well. Packets are available for providers wishing to become certified. To address the need for providers in Richland County, the Richland Area Childcare Task Force was established. The Economic Support Manager is a member of this taskforce. In 2022, Richland Area Child Care Taskforce was awarded funding from the Dream Up! Child Care Supply-Building Grant Program. The end of 2022 saw the task force in the beginning stages of the strategic planning phase.

### FOODSHARE

A Recipe for Good Health

FoodShare Wisconsin, administered by the United State Department of Agriculture, helps people with little or no income to buy food. Recipients are people of all ages who may have a job but the wages are low, are living on a fixed income, have lost their job, are retired, or are disabled and are not able to work. FoodShare Wisconsin was created to help stop hunger and to improve nutrition and health for those with limited means.



Clients are able to establish a filing date by applying online, calling the Capital Consortium Call Center or by stopping by the agency and signing a paper request. This is followed up by a required interview (phone or face-to-face). They are asked about their income and household composition among other questions. If found to be eligible, a client receives a Quest (EBT) Card (similar to a debit card) on which their monthly benefits are deposited. The participant uses a PIN number to access those benefits.



A notable event in 2022 was the continuation of COVID-19 Public Health Emergency. Individuals and families in Richland County received additional FoodShare benefits in every month of the year. Families that received free and reduced lunches through their school districts also found extra benefits on their EBT card in some of those months.

**In 2022, Richland County had 3,248 unduplicated FoodShare recipients. Benefits paid totaled \$6,708,279.**  
*This compares to 3,369 unduplicated recipients in 2021, and \$6,768,267 in total benefits paid.*

## FRAUD & FRONT-END INVESTIGATIONS

In 2022, Richland County joined other Capital Consortium counties, Adams, Juneau and Sauk, in sub-contracting the Fraud and Front-End Investigations with Dane County to create a consistent and timely approach to the programs. Dane County has full-time staff and resources dedicated to this department. All potential fraud is investigated and, if appropriate, overpayment, repayment, and/or sanctions are established. There could even be referrals made to the district attorney for prosecution. In 2022, no significant fraud was discovered being committed by Richland County residents. This is, in part, due to the significant effort put into front-end prevention to avoid errors in benefits from the onset by confirming and verifying questionable application information before issuance.

## MARKETPLACE ASSISTANCE

In 2022, our unit continued with efforts to provide families and individuals with assistance as they navigated the health insurance requirements associated with the Affordable Care Act. The Patient Protection and Affordable Care Act, as of January 1, 2014, required all individuals be insured. With this requirement, insurance was made available through the Federally-facilitated Marketplace during an Open-enrollment period.

To help the Richland County community through this process, in 2014, Richland County Health and Human Services became a *Certified Application Counselor Organization*. This designation allows our agency to certify staff and volunteers as individual *Certified Application Counselors (CACs)*. With a CAC on staff, and through a collaboration with community partners, Richland County Health and Human Services provides assistance on an "as needed" basis.

Our CAC Staff person was not utilized in over five years. Due to the lack of need for the CAC at our agency, the staff member did not renew certification for the 2023 fiscal year. Economic Support Specialists are able to refer anyone interested in the is service to other community CACs.

## WISCONSIN HOME ENERGY ASSISTANCE PROGRAM (WHEAP)

The Wisconsin Home Energy Assistance Program (WHEAP) administers the Federally- funded Low Income Home Energy Assistance Program (LIHEAP) and Public Benefits Energy Assistance Program. WHEAP and its related services help almost 200,000 Wisconsin households annually. In addition to regular heating and electric assistance, specialized services include:

- Emergency fuel assistance;
- Pro-active co-payment plans;
- Targeted outreach services;
- Emergency furnace repair & replacement;
- Provide information on the weatherization program

**In Federal Fiscal Year 2022, 794 households received Energy Assistance in Richland County for a total of \$504,916.**

*In 2021, 763 households received Energy Assistance for a total of \$480,335.*

**In Federal Fiscal Year 2022, 289 households received Crisis Assistance totaling \$195,482.**

*In 2021, 397 households which received Crisis Assistance for a total of \$354,246.*

**In Federal Fiscal Year 2022, 23 households received Furnace Repair/Replacement Assistance totaling \$52,920.**

*In 2021, 32 households received Furnace Repair/Replacement Assistance for a total of \$69,708.*

Richland County administered WHEAP for Federal Fiscal Year (FFY) 2022. Due to the decrease in funding, Richland County could no longer support a worker to administer this program, beginning with FFY 2023. ESI has taken over administering this program for the residents of Richland County.

### Websites of Interest

Access: [www.access.wisconsin.gov](http://www.access.wisconsin.gov)

Department of Health Services: <http://dhs.wisconsin.gov/>

Nutrition/Hunger Program: <http://dhs.wisconsin.gov/programs/nutrition.htm>

Wisconsin Department of Workforce Development:

<http://www.dwd.state.wi.us/default.htm>

Wisconsin Department of Children & Families: <http://dcf.wisconsin.gov/>

Wisconsin Home Energy Assistance Program: <http://www.homeenergyplus.wi.gov>

# FISCAL

(Un-audited Figures)

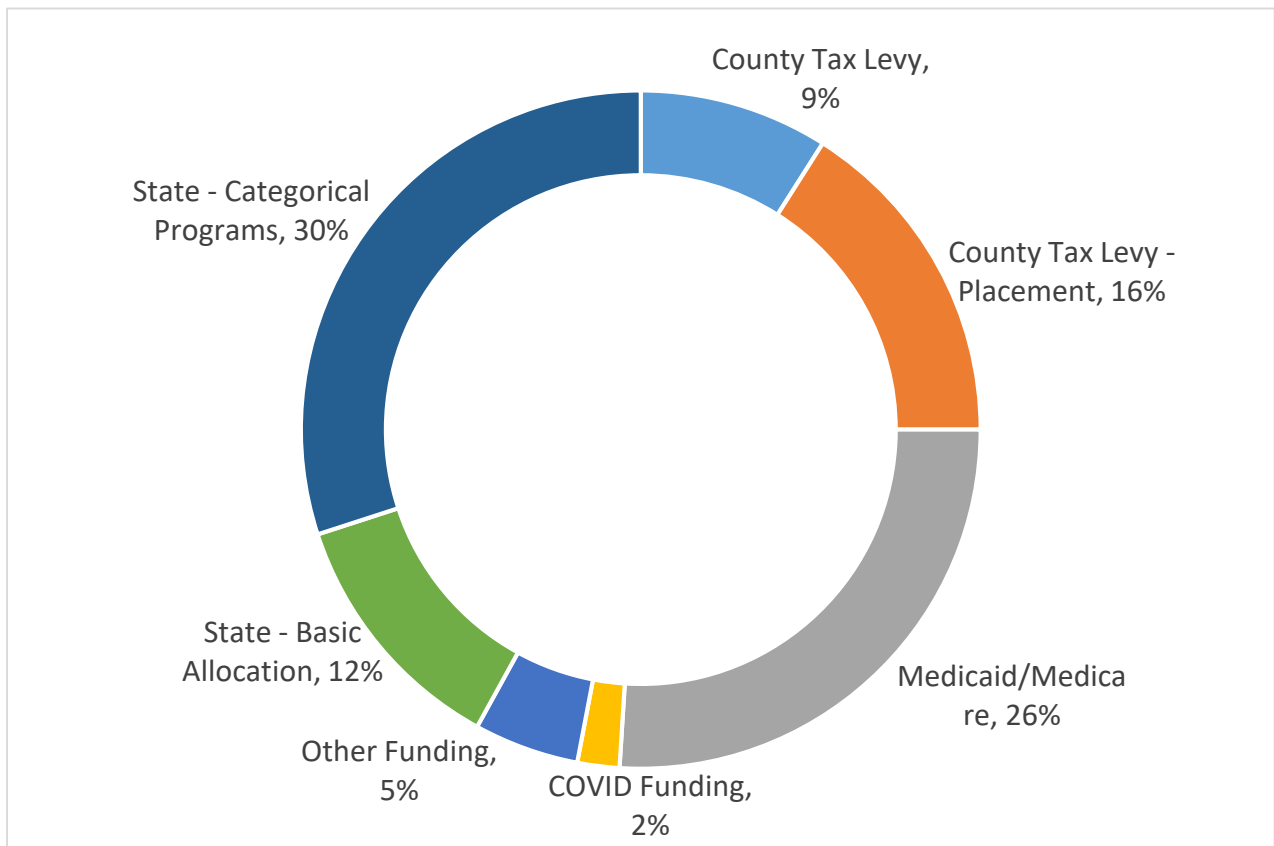
## Financial Statement (Revenue Minus Expenses)

Total Actual Revenue 2022	\$9,609,819
Total Agency Expenses	-\$7,223,316
Total Placement Expenses	-\$1,544,768
Balance	\$841,735

(Continue for further detail on revenue and expenses.)

# RICHLAND COUNTY HEALTH AND HUMAN SERVICES

## Revenue Sources

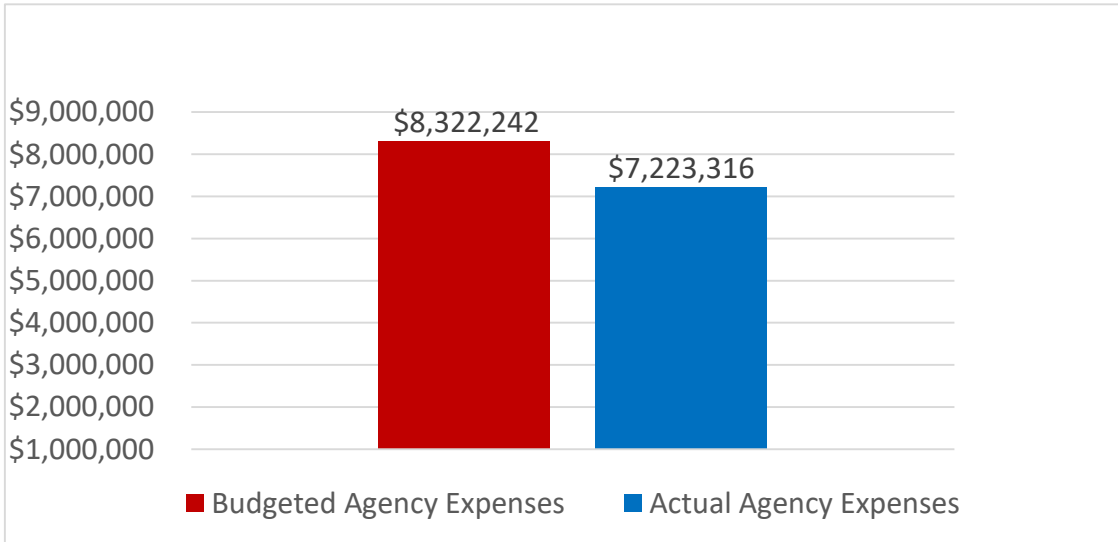


## Revenue Sources for Agency and Placement Expenses

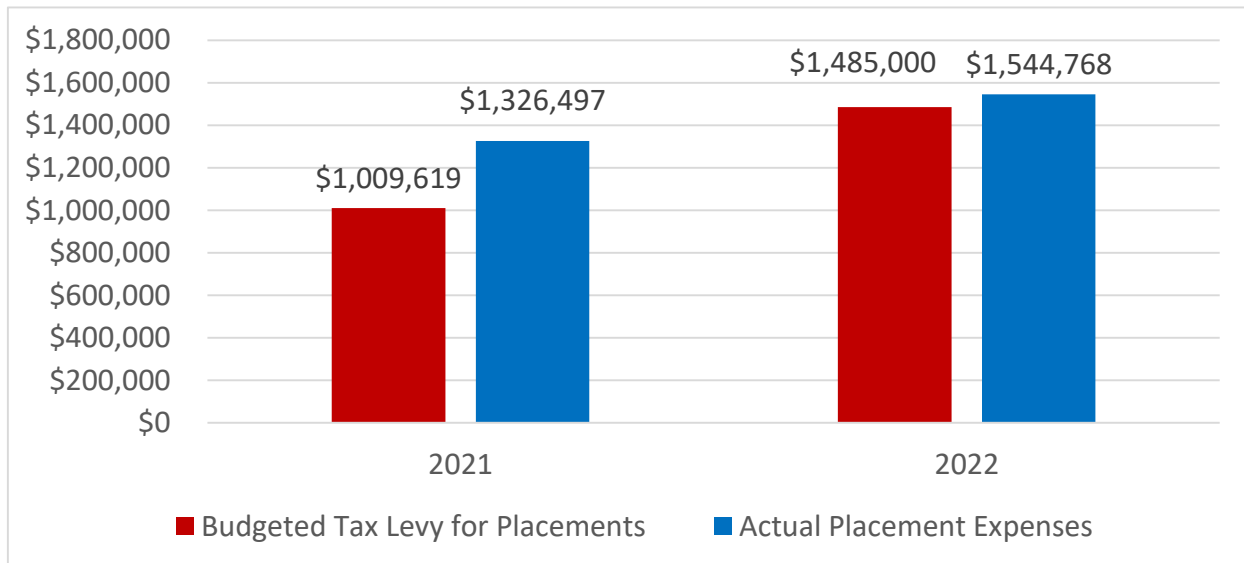
County Tax Levy	\$904,346
County Tax Levy - Placement	\$1,485,000
Medicaid/Medicare (including WIMCR)	\$2,528,738
COVID Funding	\$231,892
Other Funding	\$433,319
State - Basic Allocation	\$1,118,386
State Categorical Programs	\$2,908,138
<b>Total Actual Revenue 2022</b>	<b>\$9,609,819</b>

# RICHLAND COUNTY HEALTH AND HUMAN SERVICES

## 2022 Agency Expenses



## Placement Expenses



# APPENDIX

# Richland County Health and Human Services

## 2022 Health & Human Services Contracts (Over \$10,000)\*

A&J Vans dba A&J Mobility	\$22,475	Kareo	\$20,846
All Star Elevator, LLC	\$28,500	KNH, LLC	\$54,254
Annika Mersmann	\$11,186	Logan James Herr Foundation, Inc.	\$34,005
Children's Hospital of WI	\$155,404	M Squared NC, LLC dba Action Fence	\$28,782
Chileda Institute	\$248,123	Memorial Hospital of Boscoble, Inc.	\$13,208
Community Care Resources	\$94,008	Northwest Counseling & Guidance Clinic	\$83,293
Cornerstone Foundation	\$144,137	Premier Financial Mngmt Services	\$161,531
Coulee Region Psychiatric Services	\$26,713	RTP(WI),S.C.	\$75,721
Diane's Adult Family Home	\$78,159	Rural Wisconsin Health Cooperative	\$49,792
Driftless Counseling, LLC	\$722,554	Shay Rehabilitation & Psych Services	\$203,386
Evergreen Manor, Inc.	\$52,422	SW WI Workforce Development Board	\$404,474
Family Services of NE WI	\$21,808	St. Joseph's Health Services, Inc.	\$50,318
Fitness Choices	\$29,742	Tellurian, Inc.	\$45,000
Forward Home For Boys	\$97,061	The Richland Hospital, Inc.	\$22,475
Impact Community Planning Group	\$24,675	TLC Home Care, LLC	\$73,007
Jean Warrior, Ph.D.	\$12,701	VARC, Inc.	\$10,082
Jessica Leinberger Counseling	\$38,290	Vista Care Wisconsin	\$804,726

\* Listings do not include expenses paid to other Richland County Departments or State Institutions where contracts are not required.

## Community Services Building 221 West Seminary Street Richland Center, WI 53581

Administrative Services Unit  
Child & Youth Services Unit  
Public Health Unit

Behavioral Health Services Unit  
Economic Support Unit

(608) 647-8821  
Fax: (608) 647-6611

Aging & Disability Resource Center of Eagle Country – Richland Center Office

(608) 647-4616 or 1 (877) 794-2372  
Fax: (608) 647-6611