

# COUNTY OF RACINE HEALTH AND HUMAN DEVELOPMENT COMMITTEE & HUMAN SERVICES BOARD

Health and Human Development Committee

Supervisor Robert N. Miller, Chairman
Supervisor Scott Maier, Vice Chairman
Supervisor Eric Hopkins, Secretary
Supervisor Fabi Maldonado
Supervisor Jody Spencer
Supervisor Marcus West

Jamillah Jallow, Youth in Governance Representative
Margarita Reyes-Pena, Youth in Governance Representative

**Human Services Board** 

Rajeeyah McWhorter, Citizen Member Supervisor Scott Maier Q.A. Shakoor, II, Citizen Member Supervisor Don Trottier Rhonda Zuck, Citizen Member

# NOTICE OF JOINT MEETING OF THE HEALTH AND HUMAN DEVELOPMENT COMMITTEE & HUMAN SERVICES BOARD

DATE:

Monday, January 9, 2023

TIME:

5:00 p.m.

PLACE:

Ives Grove Office Complex – Auditorium

14200 Washington Avenue Sturtevant, WI 53177

\*\*\* THIS LOCATION IS HANDICAP ACCESSIBLE. If you have special needs please contact the Racine County Human Services Department, 1717 Taylor Avenue, Racine, Wisconsin, (262) 638-6646 or for hearing impaired for TTY, TTD/Relay Service 711 or 1-800-947-3529. \*\*\*

# **AGENDA**

- 1. Call to Order/Roll Call
- 2. Chairman Comments -- Youth In Governance Statement
- 3. Public Comments
- 4. Approval of Minutes from the November 28, 2022, Joint Meeting of the Racine County Health and Human Development Committee & Human Services Board **ACTION**
- 5. Medical Examiner and Chief Deputy Medical Examiner Introductions -- Kristin Latus
- 6. Youth Development and Care Center Architectural Design Update -- Jonathan Delagrave, Hope Otto
- 7. Wisconsin Department of Veterans Affairs Grant -- Hope Otto INFORMATION ONLY
- 8. DHS Five Year Grant Public Health Infrastructure Funding -- Hope Otto ACTION BY HHD COMM ONLY
- 9. Acceptance of Grant for Expansion of Community Based Services to Support Children with High Acuity Needs in Out-of-Home Care -- Hope Otto **ACTION BY HHD COMMITTEE ONLY**
- 10. Youth & Family Restructuring Resolution -- Hope Otto ACTION BY HHD COMM ONLY
- 11. University of Cincinnati Core Youth Training -- Hope Otto ACTION BY HHD COMM ONLY
- 12. Correspondence and Other Business
- 13. Next Meeting Date -- February 13, 2023 Ives Grove Office Complex
- 14. Adjournment

Robert N. Miller, Chairman Health and Human Development Committee

NOTE: If members anticipate needing additional information, please contact Hope Otto or Human Services staff by Monday before noon.

|   |   | X Resolution Request                                   |
|---|---|--|
| YEAR  | 2023  | Ordinance Request                                      |
|   |   | Report Request   |
|   |   |  |
| Requestor/Originator:   | Human Services Department - Hope Otto       |  |
| q soron on ginatori   | Tiopo Otto                                  |  |
| Person knowledgeable ab   | out the request who will appear and pres    | sent   |
| before the Commit   | ttee and County Board (2nd Reading)         | Hope Otto/Edward Kamin                                 |
|   | n attendance the item may be held over.     |  |
| Door the Ores to F  | ivo know of this warrant                    | Vos  |
| Does the County Execut  | tive know of this request:                  | Yes  |
|   |   |  |
| If related to a position o  | r position change, Does the Human Reso      | sources Director know of this request:                 |
|   |   |  |
| Does this request propo   | ose the expenditure, receipt or transfer of | of any funds? Yes                                      |
|   |   | is not created by Finance, send to Finance & Budg      |
| Manager before it goes  |   |  |
| 5 : it good   |   |  |
| •   | 10mm - 1                                    |  |
| Committee/Individua   | I Sponsoring: Finance & Human Res           | esources Committee                                     |
| Dete Orie 11 11   | <b>.</b>                                    | uphy Poord   |
| Date Considered by  |   | ounty Board  |
| Committee:  | 1/4/2023 Meeting to be                      | pe Introduced: 1/10/2023                               |
| i   |   | <b>┌</b> ────────────────────────────────────          |
| 1st Reading:  | 1st & 2nd Reading                           |  |
| <b>5</b>  | `   |  |
| * If annlicable includ  | le a nargaranh in the memo evale            | aining why 1st and 2nd reading is requir               |
| n applicable, includ  | ae a paragrapii iii uie iiieiiio expla      | anning with 13t and zild reading is requir             |
|   |   |  |
| Name at the second seco  | ains and co-ID a classes                    |  |
| Signature of Committee Ch   | nairperson/Designee:                        |  |
| SUGGESTED TITLE OF  | F RESOLUTION/ORDINANCE/REP                  | PORT:  |
| , JOSEPHE HILL O  |   |  |
| Accentance of a Wisco   | onsin Department of Veterans Affairs Gr     | Grant in the amount of \$19,178 and transfer with      |
| the Veterans Services   |   |  |
| the veteralis services  | ZOZJ Duuget.                                |  |
| ***************************************   |   |  |
|   |   |  |
| TJ. ITP - Order   |   |  |
| Списточникования на принципалний |   |  |
|   |   | ked to take action on (ex: Authorize, Approve). If the |
| action includes a transfer  | this must be included in the title.         |  |
| SUBJECT MATTER:   |   |  |
| CODULO I WITH LEIV.   | ₹   |  |

The attached memo describes in detail the nature of resolution /ordinance /report and any specific facts which you want included in resolution/ordinance/report must be attached.

If requesting a multi year contract a copy of the contract or draft contract must be attached

Any request which requires the expenditure or transfer of funds must be accompanied by a fiscal note that shows the specific amount being transferred and the account number from which these funds will be taken and to which they will be transferred.

# FISCAL NOTE RESOLUTION NO:

|   |                   | EXHIBIT "A"        |                    | 1        | Fiscal Year:                | 2023                         |
|---|-------------------|--------------------|--------------------|----------|-----------------------------|------------------------------|
| ACCOUNT NAME  | ACCOUNT<br>NUMBER | CURRENT<br>BUDGET  | CURRENT<br>BALANCE | TRANSFER | BUDGET<br>AFTER<br>TRANSFER | BALANCE<br>AFTER<br>TRANSFER |
| VETERANS SERVICE OFFICE<br>VETERANS GRANTS-NL                               | 15501000.307175   | 0                  | 0                  | (19,178) | (19,178)                    | (19,178)                     |
|   | TOTAL SOURCES     |                    |                    | (19,178) |                             |                              |
| MATERIALS   | 15501000.453000   | 0                  | 0                  | 19,178   | 19,178                      | 19,178                       |
|   | TOTAL USES        |                    |                    | 19,178   |                             |                              |
|   |                   |                    |                    | 0        |                             |                              |
|   | FINANCE COMMITT   | EE RECOMMEND       | ATION              |          |                             |                              |
| After reviewing the Resolution/Ord<br>Committee recommends FORAG<br>REASONS |                   | supplied, your Fin | ance               |          |                             |                              |
| FOR   |                   |                    |                    | AGAINST  |                             |                              |
|   |                   |                    |                    |          |                             |                              |
| <del></del> ,   |                   |                    |                    |          |                             |                              |
|   |                   |                    | •                  |          |                             |                              |
|   |                   |                    |                    |          |                             |                              |

Click to go to agenda



Human Services Department 1717 Taylor Avenue Racine, WI 53403 Phone: 262-638-6646 Fax: 262-638-6669 racinecounty.com/humanservices

December 20, 2022

TO:

Don Trottier

Chairman, Finance Committee

FROM:

Hope Otto

**Human Services Director** 

RE:

Wisconsin Dept of Veterans Affairs Grant

The Racine County Veterans Services Office (CVSO) has been awarded a grant from the Wisconsin Dept of Veterans affairs (WDVA) in the amount of \$19,178. These funds are to be used for the improvement of services to former military personnel and the Racine CVSO is to deliver those services.

The grants have been awarded to counties that meet the required statutory standards and employ a County Veterans Services officer. These funds will be used for outreach and enhancement of the services currently provided to veterans The funds are Federal ARPA funds and must be expended by December 31<sup>st</sup>, 2024.

To be eligible for these funds, a signed MOU needs to be submitted to the WDVA by January 16, 2023. To accommodate that deadline, it is necessary to bring this request to the County Board for first and second reading.

Sincerely

Hope Otto

| YEAR   | 2023  | X   | Resolution Request Ordinance Request     |
|--|---|---|--|
|  |   |   | Report Request                           |
| Requestor/Originator:  | Human Services Department - Hop   | e Otto                                    |  |
| ,  |   |   |  |
| before the Commit  | out the request who will appear a<br>tee and County Board (2nd Readi<br>n attendance the item may be helo | ing)                                      | Hope Otto                                |
| Does the County Execut   | tive know of this request:  | Yes                                       | •  |
| If related to a position o   | r position change, Does the Hum   | ıan Resources Direct                      | tor know of this request:                |
|  | •   | -   | Yes by Finance, send to Finance & Budget |
| Committee/Individual   | Sponsoring: Finance & Hui   | man Resources Comm                        | nittee                                   |
| Date Considered by Committee:  |   | e of County Board<br>ng to be Introduced: | 1/24/2023                                |
| 1st Reading:   | x 1st & 2nd   | Reading:                                  | ]*                                       |
| * If applicable, includ  | e a paragraph in the memo   | explaining why 1                          | 1st and 2nd reading is required.         |
|  |   | -   |  |
| signature of Committee Ch  | airperson/Designee:   |   |  |
|  | F RESOLUTION/ORDINANC   | E/REPORT:                                 |  |
| Bricker (ED-100 FEB HOR BANK COMPONENCE MARKET COMPONENCE AND STATE OF THE PROPERTY OF THE PRO |   |   |  |
| Authorize acceptance<br>Services   | of a Public Health Infrastructure   | e Grant with State o                      | f Wisconsin-Department of Health         |
|  |   |   |  |
|  |   |   |  |

The suggested title should contain what the Committee is being asked to take action on (ex: Authorize, Approve) . If the action includes a transfer this must be included in the title.

# **SUBJECT MATTER:**

The attached memo describes in detail the nature of resolution /ordinance /report and any specific facts which you want included in resolution/ordinance/report must be attached.

If requesting a multi year contract a copy of the contract or draft contract must be attached

Any request which requires the expenditure or transfer of funds must be accompanied by a fiscal note that shows the specific amount being transferred and the account number from which these funds will be taken and to which they will be transferred.

EXHIBIT "A"

Fiscal Year:

2023

| ACCOUNT NAME                  | ACCOUNT<br>NUMBER | CURRENT<br>BUDGET | CURRENT<br>BALANCE | TRANSFER  | BUDGET<br>AFTER<br>TRANSFER | BALANCE<br>AFTER<br>TRANSFER |
|-------------------------------|-------------------|-------------------|--------------------|-----------|-----------------------------|------------------------------|
| PUBLIC HEALTH BUDGET PAGE 346 |                   |                   |                    |           |                             |                              |
| PH INFRASTRUCTURE REVENUE     | 4421725.304000    | (1,840,576)       | 0                  | (318,250) | (2,158,826)                 | (318,250)                    |
|                               | TOTAL SOURCES     |                   |                    | (318,250) |                             |                              |
| PUBIC HEALTH BUDGET PAGE 345  |                   |                   |                    |           |                             |                              |
| WAGES                         | 4421720.401000    | 2,233,840         |                    | 250,000   | 2,483,840                   | 250,000                      |
| WORKER'S COMP                 | 4421720.402210    | 22,339            |                    | 2,500     | 24,839                      | 2,500                        |
| SOCIAL SECURITY               | 4421720.402220    | 170,893           |                    | 19,125    | 190,018                     | 19,125                       |
| RETIREMENT                    | 4421720.402230    | 145,193           |                    | 16,250    | 161,443                     | 16,250                       |
| DISABILITY INSURANCE          | 4421720.402240    | 22,339            |                    | 2,500     | 24,839                      | 2,500                        |
| LIFE INSURANCE                | 4421720.402270    | 11,129            |                    | 1,245     | 12,374                      | 1,245                        |
| LEGAL FEES AND 65.90(6) FUND  | 4421720.436000    | 37,972            |                    | 4,250     | 42,222                      | 4,250                        |
| TRAINING                      | 4421725.438500    | 49,849            |                    | 22,380    | 72,229                      | 22,380                       |
|                               | TOTAL USES        |                   |                    | 318,250   |                             |                              |
|                               |                   |                   |                    | 0         |                             |                              |

THIS GRANT IS UP TO A FIVE YEAR PERIOD BEGINNING 12/2022

### FINANCE COMMITTEE RECOMMENDATION

| FOR          | AGAINST |
|--------------|---------|
|              |         |
| <del>`</del> |         |
|              |         |
|              |         |
|              |         |
|              |         |
|              |         |



Racine County Public Health Division

9531 Rayne Rd., Suite V Sturtevant, WI 53177 262-898-4460 fax: 262-898-4490

web: www.racinecounty.com

January 5, 2023

TO:

Supervisor Scott Maier

Chairman, Health and Human Development Committee

FROM:

Jeffrey Langlieb

Health Officer

RE:

Public Health Infrastructure Grant Funding-Racine County Award

On November 29, 2022, the United States Centers for Disease Control and Prevention (CDC) announced \$3 Billion in funding to state, local and territorial jurisdictions through a Public Health Infrastructure Grant. Wisconsin Department of Health Services (DHS) was awarded approximately \$55 Million dollars over five years to support two strategy areas: workforce and public health foundational capabilities, with approximately 40% of that funding passed to local public health departments. On December 21, 2022, Racine County Public Health Division (RCPH) was notified of an initial allocation in the amount of \$318,250 will be awarded to support these strategies. This funding, if accepted by Racine County, will be a one-time award for RCPH to be spent for a period of up to five years beginning December 1, 2022. A full scope of work and deliverables will be forthcoming by DHS. Additional funding over the five-year grant period to support other strategic objectives of this grant may be allocated to RCPH; however, DHS has not provided details as to the amount or timing of this additional funding.

The long-term goal of this funding is to ensure Wisconsin's public health needs are met by increasing the public health workforce and equipping it with the skills needed to strengthen the capacity of state, local and tribal health departments to implement the foundational public health capabilities. At the local level, this translates into ensuring these capabilities are maximized to support public health programs, initiatives, and engagement in policy development.

Public health services at the local level can be broken down into five foundational areas: Communicable Disease Control; Chronic Disease & Injury Prevention; Environmental Public Health; Maternal, Child and Family Health; Access to Care & Linkages with Clinical Care. These five areas represent the governmental public health responsibilities and are supported by the ten foundational capabilities: Assessment & Surveillance; Policy Development & Support; Community Partnership Development; Accountability & Performance Management; Equity; Emergency Preparedness & Response; Organizational Competencies; Communications. The funding awarded with this grant works to ensure RCPH's workforce has the skills, tools, and abilities to realize the full potential of these capabilities and achieve optimal health and well being for Racine County residents. Thank you for your consideration.

| YEAR                             | 2023  | X  | Ordinance Request  |
|----------------------------------|---|--|--|
|                                  |   |  | Report Request   |
|                                  |   |  |  |
| Requestor/Originator:            | Human Services Department - Hop   | e Otto                                   |  |
| before the Commit                | out the request who will appear a<br>ttee and County Board (2nd Readi<br>n attendance the item may be hel | ing)                                     | Hope Otto  |
| Does the County Execu            | tive know of this request:  | Yes                                      | _  |
| If related to a position o       | or position change, Does the Hum  | nan Resources Direc                      | ctor know of this request:                               |
|                                  |   | -  | Yes by Finance, send to Finance & Budget                 |
| Committee/Individua              | Il Sponsoring: Finance & Hu   | man Resources Com                        | mittee   |
| Date Considered by<br>Committee: |   | e of County Board<br>ng to be Introduced | :1/24/2023   |
| 1st Reading:                     | x 1st & 2nd   | Reading:                                 | *  |
| * If applicable, includ          | de a paragraph in the memo  | explaining why                           | 1st and 2nd reading is required.                         |
| Signature of Committee Ch        | nairperson/Designee:  |  |  |
| SUGGESTED TITLE O                | F RESOLUTION/ORDINANC   | E/REPORT:                                |  |
|                                  | e of a State of Wisconsin DCF 2-y<br>rvices to support children with h                                    |  | ount of \$120,758 for the exapnsion of out-of home care. |
| Long-project                     |   |  |  |

The suggested title should contain what the Committee is being asked to take action on (ex: Authorize, Approve). If the action includes a transfer this must be included in the title.

#### **SUBJECT MATTER:**

The attached memo describes in detail the nature of resolution /ordinance /report and any specific facts which you want included in resolution/ordinance/report must be attached.

If requesting a multi year contract a copy of the contract or draft contract must be attached

Any request which requires the expenditure or transfer of funds must be accompanied by a fiscal note that shows the specific amount being transferred and the account number from which these funds will be taken and to which they will be transferred.

#### FISCAL NOTE RESOLUTION NO:

EXHIBIT "A"

2023

Fiscal Year:

0

BUDGET BALANCE **CURRENT CURRENT** TRANSFER **AFTER AFTER ACCOUNT** NUMBER **BUDGET BALANCE TRANSFER** TRANSFER ACCOUNT NAME **HUMAN SERVICES BUDGET PAGE 289** (161,258) (120,758)4206700.301500 (40,500)0 (120,758)**GRANT REVENUE** (120,758) **TOTAL SOURCES HUMAN SERVICES BUDGET PAGE 289** 130,908 120,758 **TRAINING** 4206990.438500 10,150 120,758 120,758 **TOTAL USES** 

THE GRANT PERIOD IS 1/1/23-12/31/24. THE GRANT IS TO COVER STAFFING, RESPITE CARE, AND TRAINING CURRICULUM. A BUDGET TRANSFER WILL BE DONE AS NECESSARY TO COVER THE APPROPRIATE COSTS.

#### FINANCE COMMITTEE RECOMMENDATION

| FOR |       | AGAINST |
|-----|-------|---------|
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Human Services Department 1717 Taylor Avenue Racine, WI 53403 Phone: 262-638-6646 Fax: 262-638-6669 racinecounty.com/humanservices

January 6, 2023

FROM:

TO: Chairman, Finance Committee

Hope Otto

Human Services Director

RE: Acceptance of DCF Grant

This resolution is requesting the acceptance of a DCF grant award in the amount of \$120,758 for the expansion of community-based services to support children with high acuity needs in out-of-home care. This grant seeks to strengthen the Human Services Department's ability to recruit and license treatment foster homes and support parents and relative care providers with in-home therapeutic services and respite care. The goal is to increase community placement options for youth with high acuity needs and provide impactful in-home support to children who are at most risk of entering out-of-home placements.

Sincerely,

Hope Otto, Director Racine County Human Services Department

Phone: 608-422-7000 Fax: 608-422-7163



December 13, 2022

Dear Expansion of Community-Based Services Grant Awardee,

Thank you for submitting a grant application for the Expansion of Community Based Services to Support Children with High Acuity Needs in Out-of-Home Care. This letter is to inform you of the amount you were awarded to administer the approved activities for calendar years 2023 and 2024.

Twenty-eight (28) agencies applied, and we were able to award 10 grants with the available funding. The grantees were selected according to the evaluation criteria, based on their submitted applications. Please note that, due to the number of grants received and the limited funds available, the total approved grant amount that an agency applied, and the activities approved, may have been modified from the original amount and activities requested.

| Agency             | Activity   | Amount       |
|--------------------|--|--------------|
| Racine County Huma | n Services Department                                    |              |
|                    | Licensed Home Marketing                                  |              |
|                    | In-Home Therapeutic Staffing Services                    |              |
|                    | Respite Care Funding                                     |              |
|                    | Active Parenting Training/Curriculum/Kits                |              |
|                    | Your Journey Together Series Training and Curriculum Kit |              |
|                    | Total Award Amount                                       | \$120,758.00 |

The Department will be in contact with you for contract routing and signatures. A separate SPARC line will be established for the grant reimbursement. Contracts will be effective for calendar year 2023 (January 1, 2023, through December 31, 2023) with a one-year renewal option for calendar year 2024 (January 1, 2023, through December 31, 2024). All reimbursements will be based on expenses reported to DCF through the SPARC system. Agencies should retain their own documentation of costs of approved qualifying expenses for their local audit purposes.

Your agency shall report 100% of your costs on the SPARC Expenditure Report Line 3146.

Should you have any questions related to this grant, please contact Jennifer Sailer, PPA in the Out-of-Home Care Section, at <a href="https://doi.org/10.1007/journal.com/">DCFDSPGeneralFosterCare@wisconsin.gov</a>.

Sincerely,

Wendy Henderson
Division Administrator
Division of Safety and Permanence

cc:

Emily Erickson, DCF Shannon Braden, DCF Jennifer Sailer, DCF Britny Smuk, DCF

| YEAR                          | 2023   |                                    | X          | Resolution Request<br>Ordinance Request<br>Report Request |             |
|-------------------------------|--|------------------------------------|------------|---|-------------|
| Requestor/Originator:         | Human Services Department - I  | Hope Otto                          |            |   | _           |
| before the Commi              | oout the request who will appe<br>ttee and County Board (2nd Re<br>in attendance the item may be | eading)                            |            | Hope Otto   |             |
|                               | tive know of this request:   | Yes                                | š          |   |             |
| If related to a position o    | or position change, Does the H   | Human Resource                     | es Directo | or know of this request:                                  | Yes         |
|                               | ose the expenditure, receipt or<br>A fiscal note is required. If Fis<br>to Committee.            | <del>-</del>                       |            |   | e & Budget  |
| Committee/Individua           | Il Sponsoring: Finance &   | Human Resourc                      | es Comm    | ittee   | _           |
| Date Considered by Committee: |  | Date of County leeting to be Intro |            | 1/24/202  | <u>3</u>    |
| 1st Reading:                  | x 1st & 2  | 2nd Reading:                       |            | *   |             |
| * If applicable, includ       | de a paragraph in the men  | mo explainin                       | g why 1    | st and 2nd reading is                                     | required.   |
| SUGGESTED TITLE O             | F RESOLUTION/ORDINA  | NCE/REPOR                          | Г:         |   |             |
| •                             | e of Youth & Family Division in nd creating a new position, N                                    | _                                  |            |   | g a new     |
| The suggested title shoul     | ld contain what the Committee is   | being asked to t                   | ake actior | n on (ex: Authorize, Approve                              | e) . If the |

The suggested title should contain what the Committee is being asked to take action on (ex: Authorize, Approve). If the action includes a transfer this must be included in the title.

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EXHIBIT "A"

Fiscal Year:

2023

| ACCOUNT NAME                   | ACCOUNT<br>NUMBER | CURRENT<br>BUDGET                       | CURRENT<br>BALANCE | TRANSFER  | BUDGET<br>AFTER<br>TRANSFER | BALANCE<br>AFTER<br>TRANSFER |
|--------------------------------|-------------------|---|--------------------|-----------|-----------------------------|------------------------------|
| HUMAN SERVICES BUDGET PAGE 289 |                   |   |                    |           |                             |                              |
| BCA RESIDENTIAL RCC            | 4206700.404500    | 3,842,264                               | 0                  | (5,092)   | 3,837,172                   | 0                            |
| YA SHELTER CARE                | 4205700.413050    | 120,000                                 |                    | (83,245)  | 36,755                      | 0                            |
| NEW GRANT                      | 4206700.301500    | 40,500                                  | 0                  | (17,250)  | 23,250                      | 0                            |
|                                | TOTAL SOURCES     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,                  | (105,587) | ,                           |                              |
| HUMAN SERVICES BUDGET PAGE 289 |                   |   |                    |           |                             |                              |
| WAGES                          | 4206990.401000    | 2,476,627                               |                    | 18,879    | 2,495,506                   | 0                            |
| WORKER'S COMP                  | 4206990.402210    | 24,768                                  |                    | 189       | 24,957                      | 0                            |
| SOCIAL SECURITY                | 4206990.402220    | 189,464                                 |                    | 1,444     | 190,908                     | 0                            |
| RETIREMENT                     | 4206990.402230    | 160,981                                 |                    | 1,227     | 162,208                     | 0                            |
| DISABILITY INSURANCE           | 4206990.402240    | 24,768                                  |                    | 189       | 24,957                      | 0                            |
| LIFE INSURANCE                 | 4206990.402270    | 12,327                                  |                    | 94        | 12,421                      | 0                            |
| LEGAL FEES AND 65.90(6) FUND   | 4206990.436000    | 42,113                                  |                    | 320       | 42,433                      | 0                            |
| WAGES                          | 4205999.401000    | 1,897,217                               |                    | 58,510    | 1,955,727                   | 0                            |
| WORKER'S COMP                  | 4205999.402210    | 18,972                                  |                    | 585       | 19,557                      | 0                            |
| SOCIAL SECURITY                | 4205999.402220    | 145,135                                 |                    | 4,476     | 149,611                     | 0                            |
| RETIREMENT                     | 4205999.402230    | 123,320                                 |                    | 3,803     | 127,123                     | 0                            |
| DISABILITY INSURANCE           | 4205999.402240    | 18,972                                  |                    | 585       | 19,557                      | 0                            |
| GROUP INSURANCE                | 4205999.402260    | 616,000                                 |                    | 14,000    | 630,000                     | 0                            |
| LIFE INSURANCE                 | 4205999.402270    | 9,449                                   |                    | 291       | 9,740                       | 0                            |
| LEGAL FEES AND 65.90(6) FUND   | 4205999.436000    | 32,253                                  |                    | 995       | 33,248                      | 0                            |
|                                | TOTAL USES        |   |                    | 105,587   |                             |                              |
|                                |                   |   |                    | 0         |                             |                              |
|                                |                   |   | :                  |           |                             |                              |

#### FINANCE COMMITTEE RECOMMENDATION

| FOR |   | AGAINST |
|-----|---|---------|
|     |   |         |
|     | • |         |
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# FISCAL NOTE RESOLUTION NO:

EXHIBIT "B"

Fiscal Year:

2023

| FTE            | POSITION             | GRADE                | WAGES     | FRINGES   | CONTRACT | TOTAL      |
|----------------|----------------------|----------------------|-----------|-----------|----------|------------|
|                | Position will be e   | ffective February 1, | 2023      |           |          |            |
| HUMAN SERVICE  | S                    |                      |           |           |          |            |
| -1.000 FACILIT | Y SUPPORT SPECIALIST | N060                 | (49,516)  | (23,085)  |          | (72,601)   |
| -2.000 Y&F CAS | SE MANAGER           | N125                 | (108,178) | (47,850)  |          | (156,028)  |
| 1.000 SOCIAL   | WORK SUPERVISOR      | E060                 | 59,553    | 24,928    |          | 84,481     |
| 2.000 Y&F SO   | CIAL WORKER          | N126                 | 117,020   | 49,470    |          | 166,490    |
| 1.000 YOUTH    | CARE COUNSELOR       | N126                 | 58,510    | 24,735    |          | 83,245     |
| 1.000          | Total for HUI        | MAN SERVICES         | 77,389.00 | 28,198.00 | -        | 105,587.00 |



Human Services Department 1717 Taylor Avenue Racine, WI 53403 Phone: 262-638-6646 Fax: 262-638-6669 racinecounty.com/humanservices

January 6, 2023

TO:

Chairman, Finance Committee

FROM:

Hope Otto

**Human Services Director** 

RE:

Youth & Family Restructuring

This resolution is requesting a restructure of our Youth Justice treatment team both in and out of correctional settings. Our intent is to hire a master's level or certified social work supervisor and two licensed or certified social workers to oversee and directly support and service children and foster parents in level 3 foster homes as required by State regulations. To support this, it is necessary to reclass current vacant positions (Facility Support Specialist to E60 Social Work Supervisor and 2 Youth & Family Case Managers to N126 Youth & Family Social Workers). Lastly, one Youth Care Counselor position (N126) must be created to comprehensively and regulatorily meet the needs of the Youth Care Center.

Proactively addressing the needs of youth, I am requesting for licensed social work staff to provide the needed services and support to level 3 foster homes and the children placed in these homes. Our community is in great need for community-based placement options for youth with complex needs. Additional support is also needed to build the infrastructure and implementation of mental health services to be in compliance with Department of Corrections regulations for the Youth Care Center. These functions can be performed by the same credentialed individuals.

Racine County utilizes an in-home licensure model to not only control expenses and unnecessary overhead, but ensure quality services are rendered. Level 3 foster homes are known as treatment foster homes. To receive licensure as a level 3 foster home, foster parents undergo additional and more extensive training to meet the higher level of need that children entering these homes require. State regulations require the Youth & Family Division to provide services and support to children in level 3 foster home and these services and supports must be provided by licensed or certified staff.

Re-classing these positions will build the infrastructure for mental health services. It allows for the Youth & Family Division to enhance a strong foster care team, meet statutory requirements, and support high-needs children in foster care and allows the Juvenile Detention Center to better service youth and meet regulatory requirements.

Sincerely,

Hope Otto, Director Racine County Human Services Department

|  |  |   | Х                       | Resolution Request             | i       |
|--|--|---|-------------------------|--------------------------------|---------|
| YEAR   | 2023   |   |                         | Ordinance Request              |         |
|  |  |   |                         | Report Request                 |         |
|  |  |   |                         |                                |         |
| Requestor/Originator:  | Human Services Departme  | ent - Hope Otto                                     |                         |                                |         |
|  |  | <u> </u>  |                         |                                |         |
|  | out the request who will a   |   |                         |                                |         |
|  | ttee and County Board (2r  |   |                         | Hope Otto                      |         |
| If a person is not i   | in attendance the item ma  | y be held over.                                     |                         |                                |         |
| Does the County Execu  | itive know of this request:  | Yes   | S                       |                                |         |
| •  | •  |   |                         | •                              |         |
| If related to a nocition of  | or position change, Does   | the Human Resourc                                   | es Direct               | or know of this request:       |         |
| η τοιαίσα το α μυσιτιστί (   | or position change, Dues   | ano maman nesoult                                   | .55 211661              | - Mion of and request          |         |
| <b>.</b>   |  |   |                         | V                              |         |
|  | ose the expenditure, recei   |   |                         |                                | Dudent  |
|  |  | ıт ніscal Note is not                               | created b               | y Finance, send to Finance & I | Buaget  |
| Manager before it goes   | to committee.  |   |                         |                                |         |
|  |  |   |                         |                                |         |
| Committee/Individua  | al Sponsoring: Finar   | nce & Human Resourc                                 | ces Comm                | ittee                          |         |
|  |  |   |                         | ·                              |         |
|  |  |   |                         |                                |         |
| Date Considered by   | 4/40/0000  | Date of County                                      |                         | 4/04/0000                      |         |
| Date Considered by<br>Committee:   | 1/18/2023  | Date of County Meeting to be Intr                   |                         | 1/24/2023                      |         |
| •  | 1/18/2023  | •   |                         |                                |         |
| •  |  | •   |                         | 1/24/2023                      |         |
| Committee:   |  | Meeting to be Intr                                  |                         |                                |         |
| Committee:  1st Reading:   | x 1s   | Meeting to be Intrest & 2nd Reading:                | roduced:                | *                              | guired. |
| Committee:  1st Reading:   | x 1s   | Meeting to be Intrest & 2nd Reading:                | roduced:                |                                | ղuired. |
| Committee:  1st Reading:   | x 1s   | Meeting to be Intrest & 2nd Reading:                | roduced:                | *                              | quired. |
| Committee:  1st Reading:  * If applicable, include   | x 1s   | Meeting to be Intrest & 2nd Reading:                | roduced:                | *                              | ղuired. |
| Committee:  1st Reading:   | x 1s   | Meeting to be Intrest & 2nd Reading:                | roduced:                | *                              | quired. |
| Committee:  1st Reading:  * If applicable, includes  Signature of Committee Ch   | x 1s   | Meeting to be Intrest & 2nd Reading: memo explainin | oduced:                 | *                              | quired. |
| Committee:  1st Reading:  * If applicable, includes  Signature of Committee Ch   | x 1s  de a paragraph in the  nairperson/Designee:  | Meeting to be Intrest & 2nd Reading: memo explainin | oduced:                 | *                              | quired. |
| Committee:  1st Reading:  * If applicable, includes the signature of Committee Characters of Character | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD                            | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | *                              |         |
| Committee:  1st Reading:  * If applicable, includes the signature of Committee Characters of Character | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD  rough the Correction Inst | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | * st and 2nd reading is red    |         |
| Committee:  1st Reading:  * If applicable, included in the committee of Committee Characters of Ch | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD  rough the Correction Inst | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | * st and 2nd reading is red    |         |
| Committee:  1st Reading:  * If applicable, included in the committee of Committee Characters of Ch | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD  rough the Correction Inst | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | * st and 2nd reading is red    |         |
| Committee:  1st Reading:  * If applicable, included in the committee of Committee Characters of Ch | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD  rough the Correction Inst | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | * st and 2nd reading is red    |         |
| Committee:  1st Reading:  * If applicable, included in the signature of Committee Character of Chara | x 1s  de a paragraph in the  nairperson/Designee:  F RESOLUTION/ORD  rough the Correction Inst | Meeting to be Intrest & 2nd Reading: memo explainin | roduced:  ing why 1  T: | * st and 2nd reading is red    |         |

The suggested title should contain what the Committee is being asked to take action on (ex: Authorize, Approve) . If the action includes a transfer this must be included in the title.

#### SUBJECT MATTER:

The attached memo describes in detail the nature of resolution /ordinance /report and any specific facts which you want included in resolution/ordinance/report must be attached.

If requesting a multi year contract a copy of the contract or draft contract must be attached

Any request which requires the expenditure or transfer of funds must be accompanied by a fiscal note that shows the specific amount being transferred and the account number from which these funds will be taken and to which they will be transferred.

EXHIBIT "A"

Fiscal Year:

2023

| ACCOUNT<br>NUMBER | CURRENT<br>BUDGET                                     | CURRENT<br>BALANCE   | TRANSFER  | BUDGET<br>AFTER<br>TRANSFER  | BALANCE<br>AFTER<br>TRANSFER  |
|-------------------|---|--|---|--|---|
| 4205300.404500    | 326,008   | 0  | (27,000)  | 299,008  | (27,000)  |
| TOTAL SOURCES     |   | •  | (27,000)  |  |   |
| 4205990.438500    | 25,000  |  | 27,000  | 52,000   | 27,000  |
| TOTAL USES        |   |  | 27,000  |  |   |
|                   |   |  | 0   |  |   |
|                   | NUMBER  4205300.404500  TOTAL SOURCES  4205990.438500 | NUMBER         BUDGET           4205300.404500         326,008           TOTAL SOURCES           4205990.438500         25,000 | NUMBER         BUDGET         BALANCE           4205300.404500         326,008         0           TOTAL SOURCES         25,000 | NUMBER         BUDGET         BALANCE           4205300.404500         326,008         0         (27,000)           TOTAL SOURCES         (27,000)         27,000           4205990.438500         25,000         27,000 | ACCOUNT NUMBER         CURRENT BUDGET         CURRENT BALANCE         TRANSFER TRANSFER         AFTER TRANSFER           4205300.404500         326,008         0         (27,000)         299,008           TOTAL SOURCES         (27,000)         27,000         52,000 |

# FINANCE COMMITTEE RECOMMENDATION

| FOR | AGAINST |
|-----|---------|
|     |         |
|     |         |
|     |         |
|     |         |
|     |         |
|     |         |
|     |         |
|     |         |



Human Services Department 1717 Taylor Avenue Racine, WI 53403 Phone: 262-638-6646 Fax: 262-638-6669 racinecounty.com/humanservices

January 6, 2023

TO:

Chairman, Finance Committee

FROM:

Hope Otto

**Human Services Director** 

RE:

**ACE Programming** 

This resolution is requesting the expenditure of \$27,000 to engage with the Correction Institute at the University of Cincinnati to enhance programming for youth within the ACE Program at the Juvenile Detention Center. The University of Cincinnati would provide use and training of their new evidence-informed cognitive behavioral curriculum for youth in a correctional setting. The curriculum provides for a thorough intervention that broadly targets youth's criminogenic risks and needs. This curriculum relies on a cognitive-behavioral approach to teach individuals strategies to manage risk factors in a way that is developmentally appropriate for youth. The program places heavy emphasis on skill building activities to assist with cognitive, social, emotional, and coping skill development.

The curriculum is evidence-informed and capable of favorably changing offending behavior. It will be integrated with current programming and will provide a more dynamic, comprehensive, and modern treatment approach for youth. It will also create a solid foundation for the intensive programming within the Youth Care Center.

Sincerely,

Hope Otto, Director Racine County Human Services Department