



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES
2020 ANNUAL REPORT**



JUNE 2021

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HEALTH AND HUMAN SERVICES-Administration

Agency Vision Statement: Quality Health and Human Services; for Everyone, by Everyone.

Agency Mission Statement: St Croix County Health and Human Services (HHS) promotes quality services and heightens safety, health, and independence for our citizens by providing a continuum of services enhanced by community collaboration.

Summary of Responsibilities:

- Administration Division-6.2 Full Time Employees (FTE's)
- Aging and Disability Resource Center Division (ADRC)-24.23 FTE's
- Behavioral Health Division (BH)-29.2 FTE's
- Children Services Division (CS)-42.95 FTE's
- Comprehensive Community Services (CCS)-29.3 FTE's
- Economic Support Division (ES)-14 FTE's
- Records Division-6 FTE'S
- Public Health Division (PH) -17.57 FTE's
- Health and Rehab Center Campus- 88.44 FTE's
 - ❖ Health and Rehab Center
 - ❖ Kitty Rhoades Memorial Memory Care Center
 - ❖ Orchard View Terrace

Program Summary: The Department of Health and Human Services (DHHS) promotes individual and family self-sufficiency by providing a coordinated continuum of services for eligible county residents. We operate in compliance with the equal opportunity policies, all applicable state and federal statutes, and regulations relating to nondiscrimination in employment and service delivery. Persons seeking or receiving services will NOT be excluded from participation, denied benefits or otherwise be subject to discrimination in any manner on the basis of race, ethnicity, gender identity, religion, age, or disability. Listed above are the divisions administered within Health and Human Services.

2019-2021 HHS Budget Revenues

HHS Revenue			
Program	2019 (Actual)	2020 Budget	2021 Budget
Administration	449,610	500,490	500,490
Behavioral Health	3,048,767	3,168,919	3,052,236
Economic Support	1,187,970	1,059,157	1,139,897
Comprehensive Community Services (CCS)	4,364,433	5,266,678	5,638,084
Children Services	2,741,526	2,895,780	2,944,241
Public Health	856,172	1,074,038	1,071,723
ADRC	1,803,845	1,742,987	1,715,607
Revenue (Grants and Collections)	\$14,452,323	\$15,708,049	\$16,062,278
Budget Tax Levy	6,482,648	6,673,880	7,094,200
Surplus Applied		434,636	418,739
Total Revenue	\$20,934,971	\$22,816,565	\$23,575,217

2019-2021 HHS Budget Expenses

HHS Expenses			
Program	2019 (Actual)	2020 Budget	2021 Budget
Administration	1,990,182	1,566,766	1,783,598
Behavioral Health	4,827,734	4,926,998	4,968,213
Economic Support	995,388	1,190,813	1,244,074
Comprehensive Community Services (CCS)	4,199,926	5,701,314	6,056,822
Children Services	5,485,063	5,426,391	5,584,928
Public Health	1,489,148	1,876,037	1,873,422
ADRC	2,034,217	2,128,246	2,064,160
Total Expenses	\$21,021,658	\$22,816,565	\$23,575,217

2019-2021 HCC Budget Revenues

Health Care Campus Revenue			
Program	2019 (Actual)	2020 Budget	2021 Budget
Health & Rehab Center	5,674,406	5,847,236	5,799,892
Kitty Rhoades Memorial Memory Care Center	301,888	989,285	989,785
Orchard View Terrace	760,777	1,830,212	1,926,260
Revenue (Grants & Local Collections)	6,737,071	8,666,733	8,715,937
Budget Tax Levy	0.00	0.00	0.00
Fund Balance Applied	0.00	(336,394)*	(133,988)*
Surplus Applied	0.00	0.00	0.00
Total Revenue	\$6,737,071	\$8,330,339	\$8,581,949

*Revenue reduction to balance budgeted revenue to expense. Represents expectation that operational revenue will exceed operational expense (Debt service and depreciation not included in operational budget).

2019-2021 HCC Budget Expenses

Health Care Campus Expenses			
Program	2019 (Actual)	2020 Budget	2021 Budget
Health & Rehab Center	5,759,996	5,528,290	5,722,476
Kitty Rhoades Memorial Memory Care Center	451,779	1,024,148	990,589
Orchard View Terrace	1,002,583	1,777,901	1,868,884
Total Expenses	\$7,214,358*	\$8,330,339	\$8,581,949

* Actual expenses for 2019 includes depreciation.

HEALTH AND HUMAN SERVICES - Records

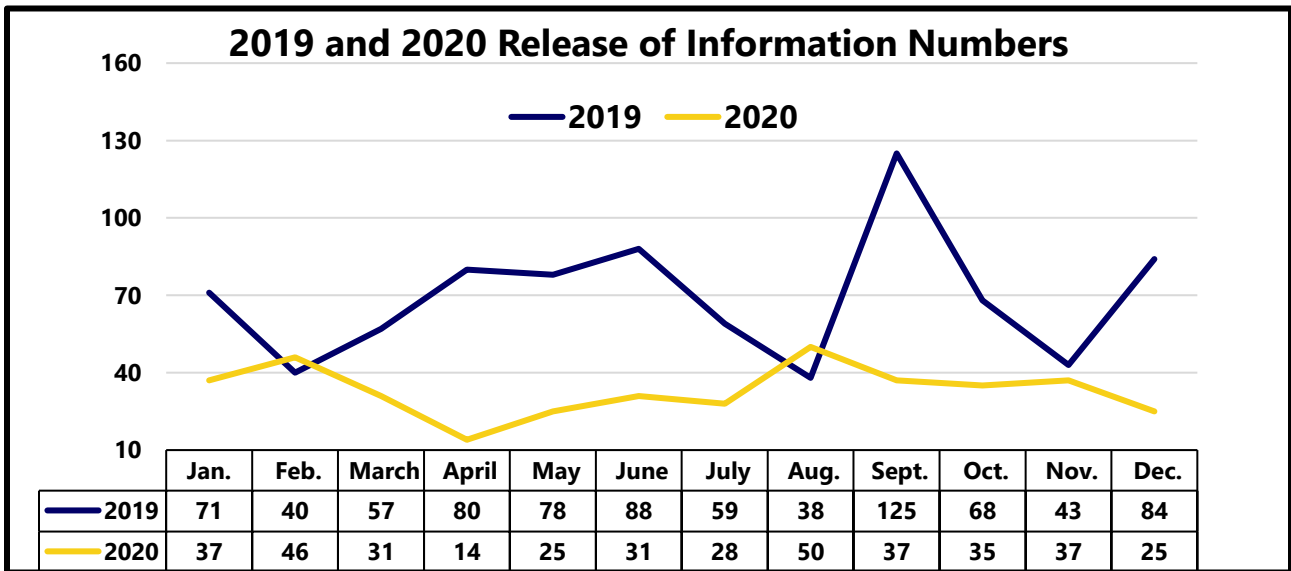
Mission Statement: The Records Division mission is to provide and maintain a high standard of medical and agency record that is an efficient, productive, and cost effective information system which is conveniently accessible to appropriate and authorized service providers and meet all applicable and administrative, legal, and regulatory requirements governing the Department of Health and Human Services.

Summary of Responsibilities: The Records Division is responsible for maintaining records in a standardized and professional manner in order to protect patient confidentiality while allowing adequate access to providers in order to promote quality patient care. Records are released in accordance with state and federal laws. The Records Division also maintains and updates the Risk Analysis and Operational Policies and Procedures as well as training all Health and Human Services

(HHS) staff on the Health Insurance Portability and Accountability Act (HIPAA) and 42 CFR, Part 2 compliance for addiction - specific services.

Program Summary:

- **File Management:** Records are released and destroyed in accordance with state and federal laws
 - ✓ Chart Creation (Paper & Electronic Health Record)
 - ✓ Quality Assurance through Auditing and Analysis
 - ✓ Record Set Management
 - ✓ Filing (Paper and Electronic Health Records)
 - ✓ Release of Information (ROI)
 - ✓ Records Retention and Records Destruction
- **Health and Human Services Staff Training and Onboarding**
- **Transcription**
- **Billing**
 - ✓ Emergency Services & Telehealth



Release of Information Yearly Totals	
2020*	396
2019	831
2018	991

* Due to COVID-19 there was a significant reduction in requests as many providers were not seeing clients

Regulations protect the Release of Information in the areas of Mental Health, Alcohol and Drug Treatment, and Child Protection. Records of this nature often require patient consent or a court order for their release. Clients, Attorney's, Courts, and other providers make the majority of requests.

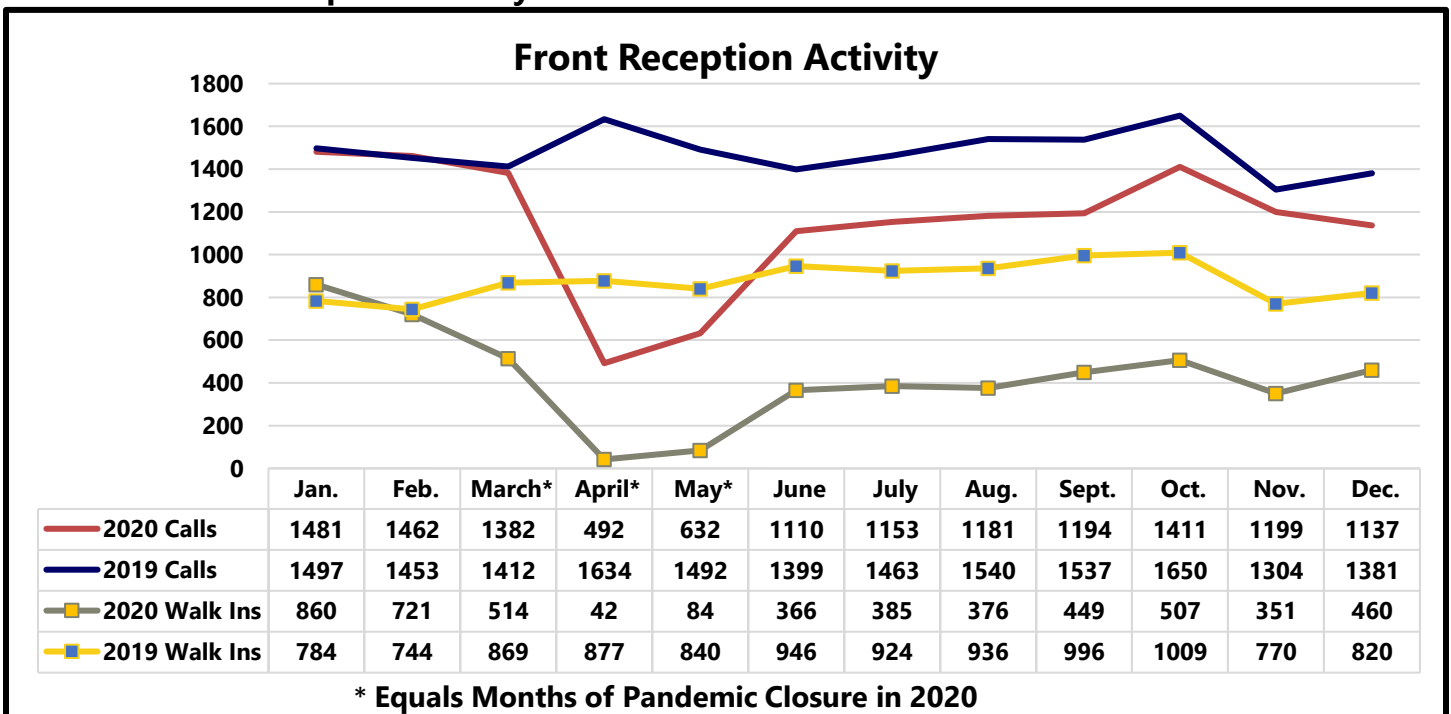
HEALTH AND HUMAN SERVICES – Office Support Staff

Mission Statement: HHS Office Support Staff will interface with consumers and staff in a positive, courteous, and timely manner while assisting/directing them to resources to help meet their needs.

Summary of Responsibilities:

- Appropriately answer and transfer phone calls, as well as distribute messages
- Monitor front lobby and assist members of the public
- Distribute and or collect consumer and staff documents/packages/mail for all divisions
- Collect payments from consumers and provide receipt
- Send faxes and distribute incoming faxes and important documents via scanning and email
- Make copies/packets/files
- Type letters, labels, and envelopes, check and monitor supplies
- Be familiar with emergency procedures
- Contact and locate staff as needed
- Accurate and timely data entry within various data bases

2019 & 2020 Reception Activity

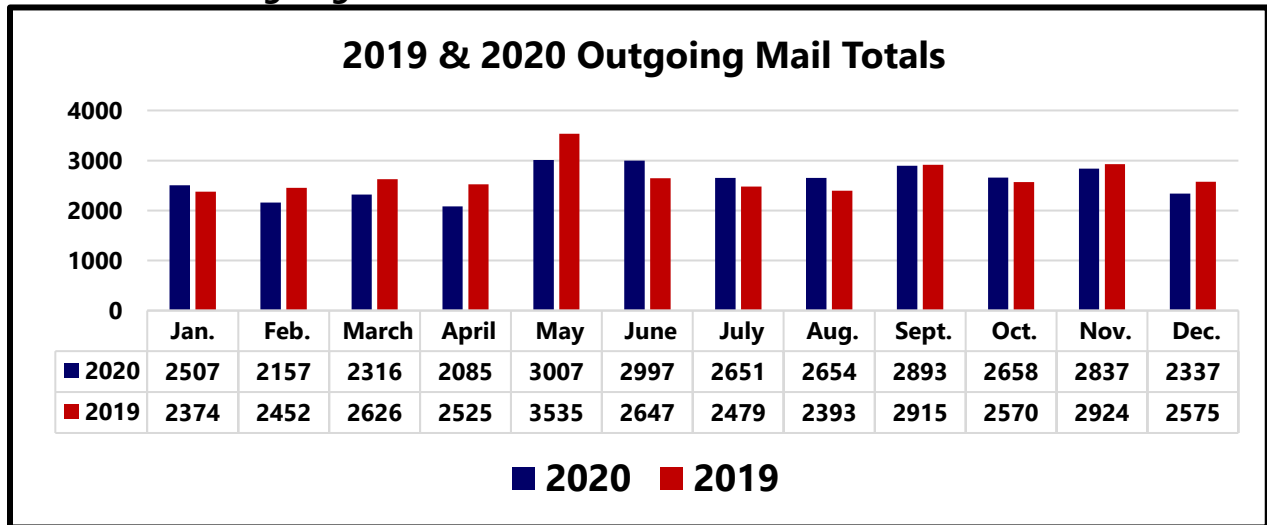


Yearly Average of Calls and Walk Ins

	2020	2019
Average Number of Calls	1153	1480
Average Number of Walk Ins	426*	876

* Due to COVID-19 the SCCSC building was closed for several months and various virtual/electronic options were utilized for engaging consumers. Therefore, we saw a significant reduction with in-person traffic in 2020

2019 & 2020 Outgoing Mail Numbers



HEALTH AND HUMAN SERVICES – Aging and Disability Resource Center (ADRC)

Mission Statement: The purpose of the Aging and Disability Resource Center Division (ADRC) is to empower and support older adults, people who have a disability and their families by serving as a central source of information, assistance, support and access to community resources.

Summary of Responsibilities: The Aging and Disability Resource Center of St. Croix County provides services to individuals over age 60 and individuals age 18-59 who have a disability, as well as their families.

Program Summary:

- **Information and Assistance:** Provides assistance to the public in planning for long and short-term care needs and provides current information about local, regional, and state resources.

Helps eligible persons enroll in long-term care programs available through the State of Wisconsin

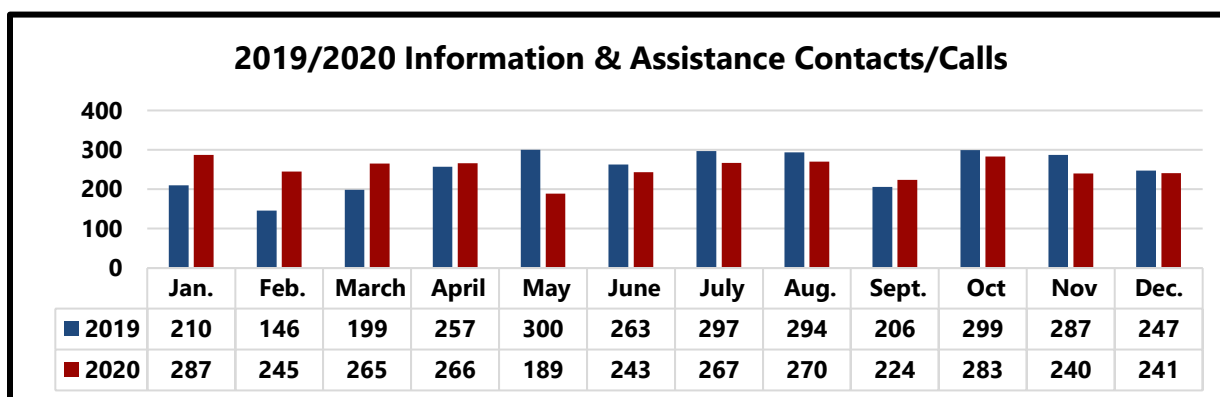
- **Elder Benefit Specialist Program:** Provides information to St. Croix County residents 60 years and older about Medicare, Medicaid, supplemental insurance and all other public benefits. The Elder Benefit Specialist provides assistance with grievances and appeals when necessary under the supervision of the Greater Wisconsin Agency on Aging Resources, Inc. Elder Law Center
- **Disability Benefit Specialist Program:** Provides services to persons ages 18 to 59 with physical disabilities, developmental disabilities, and mental illness and/or substance use disorders under the direction of the program attorneys at Disability Rights Wisconsin Coalition. Provides information about public and private benefit programs including assistance with application and appeal procedures
- **Dementia Care Specialist Program:** Supports individuals with dementia and family caregivers, and provides community education
- **Senior Nutrition Services:** Provides a nutritionally balanced hot meal and place to socialize for persons 60 and older and spouses regardless of age through the nine senior dining nutrition sites throughout St. Croix County
- **Home-Delivered Meals:** Provides a hot, nutritious meal to persons who are: age 60 and over who are unable to prepare adequate meals on their own; caregivers or spouses, and disabled co-resident of an individual aged 60 or over who receives meals
- **Specialized Van Transportation Program:** Provides transportation to persons age 60 and older and to persons with disabilities
- **Family Caregiver Support Program:** Provides information and assistance, caregiver support, education, support groups, respite care services, peer-to-peer support, and an annual Caregiver Conference
- **DayAway Club/Adult Day Respite:** Provides a 6-hour structured day with activities, morning snack, and noon meal for those who are frail or have cognitive problems related to dementia
- **Outreach Services:** Provides education and affirmation through support groups, monthly newsletter, and adaptive technology kit
- **Healthy Aging Classes:** Provides education on Living Well with Chronic Conditions and Stepping On

Prevention Services: The ADRC provides prevention services through the evidenced based Healthy Aging Programs and the Caregiver Support Program. The ADRC also provides nutritious well-balanced meals to individuals in a congregate setting or home-delivered basis to help participants stay healthy and self-sufficient:

- Stepping On- A Fall Prevention Program
- Living Well with Chronic Conditions
- DayAway Respite
- Caregiver Support

ADRC Information & Assistance (I&A) Data		
Long Term Care Programs	2020	2019
Family Care Enrollments	62	70
Include Respect I Self Direct (IRIS) Waiver Enrollments	32	18
Family Care Disenrollments	15	21
Include Respect I Self Direct (IRIS) Waiver Disenrollments	7	3
SCC Family Care Active Consumers	415	397
SCC I Respect I Self Direct (IRIS) Waiver - Active Consumers	252	244
Wait List	0	0

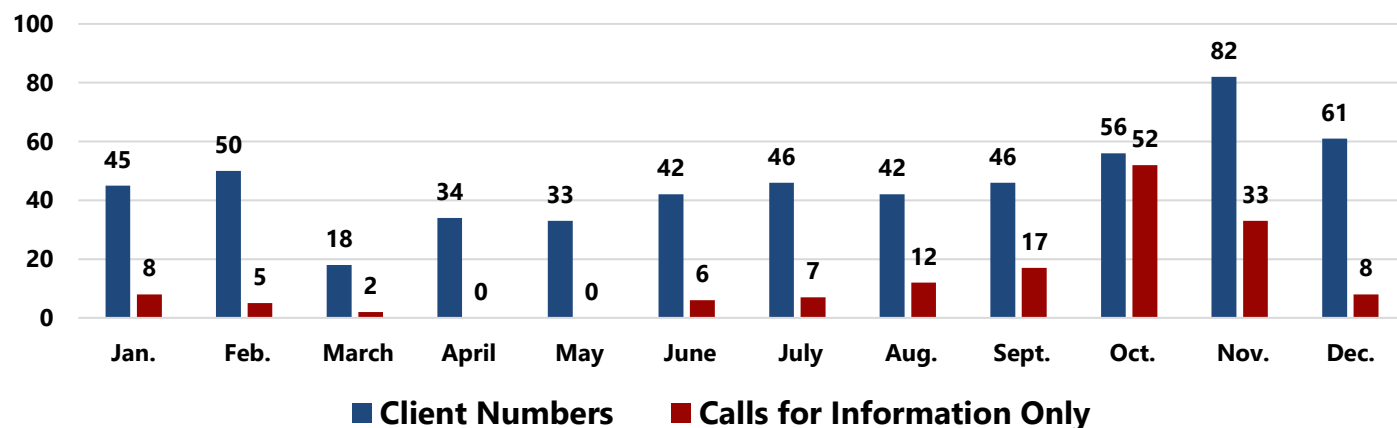
- **Family Care** is a Medicaid long-term care program for frail elders, and adults with physical, developmental, or intellectual disabilities. People in the program receive long-term care services to help them live in their own home whenever possible
- **IRIS (Include, Respect, I Self-Direct)** is a self-directed program for Wisconsin's frail elders and adults with disabilities. You have to be eligible for Medicaid to be in the IRIS program
- **Both programs have the same eligibility criteria. A person must be functionally and financially eligible before choosing to enroll. The ADRC completes these assessments and enrollments.**



A contact (call) represents a one-on-one conversation between an ADRC staff person and an individual who contacts the ADRC with a concern about him/herself or another person, or a call from an agency/provider. Calls or contacts are in person, over the phone, email, fax or written.

Total Number of I & A Contacts/Calls by Year		
2020	2019	2018
3020	3005	2406

2020 Elder Benefit Specialist Numbers



Elder Benefit Specialist (EBS) data includes consumer calls for general information and questions, which could be duplicated. A contact (call) represents a one-on-one conversation between an ADRC staff person and an individual who contacts the ADRC with a concern about him/herself or another person, or a call from an agency/provider. Calls or contacts are in person, over the phone, email, fax or written. The increase from Sept. – Nov. accounts for Medicare Part D enrollment.

Elder Benefit Specialist Data

	2020	2019
EBS Total Number of Calls	1596	965
EBS Total Client Numbers	346	401

Disability Benefit Specialist Data

	2020
DBS Total Number of Calls	913
DBS Total Client Numbers Unduplicated	202

* The tracking of DBS data was moved into a new system in 2020 so previous year comparisons are unavailable. Moving forward we should be able to track yearly data similarly.

Dementia Care Program	2020*	2019
Memory Screens	0	19
Calls/Contacts	349	458

*New Dementia Care Specialist hired in Jan. 2020 and required training. COVID- 19 safety protocols did not allow for face to face visits/screens

Health Aging Programs	2020*	2019
Stepping On – Fall Prevention	0	38

* Classes were scheduled at 3 locations, but had to be cancelled due to COVID 19 pandemic

Caregiver Support Programs	2020*	2019
Day Respite Hours*	372	2056

* Offered 3 Days a week for 6 hours a day and fluctuates based on weather and caregiver need. Due to COVID 19, closed the program mid-March of 2020

Specialized Transportation (85.21) This number includes rides by Nutrition Site transportation vans, RF Ride Share; Center for Independent Living for Western Wisconsin (CILWW), dialysis, and weekend transportation program.

Transportation Services	2020 Totals*	2019 Totals
Specialized Transportation (85.21)	9,485 Rides	25,619 Rides

*The Site Transportation available at the Senior Nutrition sites halted due to COVID 19 & only provided rides to essential medical appts.

2019-2020 Meal Site Data

2019-2020 Meal Site Data				
Site	Congregate		Home-Delivered Meals	
	2019	2020*	2019	2020
	Total # of meals	Total # of meals	Total # of meals	Total # of meals
Baldwin	3,461	750	1629	3582
Deer Park	3,458	527	678	1904
Glenwood City	3,085	830	1781	4654
Hammond	NA	NA	618	857
Hudson	4,616	1269	4146	6717
New Richmond	2,831	529	5010	7336
River Falls	399	94	2515	2870
Roberts	559	113	916	1713
Somerset	1,845	465	792	1838
Woodville	2,487	801	1967	3251
Total Meals	22,741	5517	20052	34722
Difference	-16,508		+14,670	

*In March 2020, the senior Nutrition Sites were closed due to COVID-19. The state eased the restrictions for Home-Delivered Meals, which allowed for additional participants to be added. On-site dining switched to "Grab-n-go" and was considered to be a "Home-Delivered" meal by the state.

HEALTH AND HUMAN SERVICES - Behavioral Health

Mission Statement: Provide high quality, timely substance use and mental health services to residents of St. Croix County. These services are offered in collaboration with our community in an effort to promote the health and wellbeing of individuals, families, and children.

Summary of Responsibilities: Provide county residents a comprehensive range of services for continuity of care, including: Mental Health and Substance Use Disorder (SUD) outpatient treatment, Community Support Services, Targeted Case Management, Adult Protection, and Emergency/Crisis Services. The above services include: assessment, case planning and coordination, on-going monitoring, discharge planning and referral services. Residential and inpatient care is offered through contracted facilities for consumers with mental health and Substance Use Disorder (SUD) needs, who are assessed as requiring a more intensive level of care. Outpatient treatment services are provided based on assessed client needs. Court-ordered evaluations and Intoxicated Driver Program assessments are required to be charged at full cost to the consumer and be paid in full for before scheduling.

Program Summary:

- **Substance Use Disorder (SUD) Outpatient Services:** Assessment and diagnostic services, Substance Use Disorder counseling, prevention services, crisis intervention, case management, referral and advocacy services, and discharge planning
- **SUD Intoxicated Driver Program (IDP):** Provide Intoxicated Driver Program assessments, develop and monitor driver safety plans, and provide required reports to the Department of Transportation for county residents convicted of driving while intoxicated
- **SUD Inpatient/Residential Services:** Cost associated with SUD detoxification, SUD medical inpatient and SUD residential contracted services
- **Adult Protection Services:** Provides protection and advocacy to St. Croix County residents who are elderly or adults at risk
- **Mental Health (MH) Outpatient Services:** Provide assessment and diagnostic services, psychotherapy, emergency therapy, medication management, case management, referral and advocacy services, and discharge planning
- **Behavioral Health Emergency Services:** Staff and contracted services providing emergency services to all individuals within the county. These services include, but are not limited to, mobile on-site response to provide a crisis mental health assessment, telephone crisis interventions, short-term stabilization services, and coordination of crisis placements
- **Adult Community Support Services (ACSS):** Provide assessment, diagnosis, identification of persons in need of behavioral health community support services, case management, crisis intervention, psychiatric treatment including medication supervision, counseling and psychotherapy, employment, activities of daily living, psychosocial rehabilitation, client advocacy and recreational activities

- **Institutions for Mental Disease (IMD) Relocation Services:** Contracted mental health residential services. These services are designed to serve persons with chronic mental illness in their communities to avoid institutionalization
 - **Acute Psychiatric Hospitalization:** Acute psychiatric hospitalization contracted costs and costs associated with providing acute psychiatric hospital care
 - **Mental Health Residential Services:** Contracted costs and costs associated with providing MH residential care
 - **Institutions for Mental Disease (IMD):** Contracted costs and costs associated with providing mental health/addiction care in settings with more than 16 beds. These consumers often require longer-term care in a secure and safe setting
 - **State Mental Health Institute Services:** Contract costs and costs associated with providing acute and long-term institutional care. These services are used when there are no available beds at acute psychiatric hospitals or at other IMDs
 - **Crisis Mental Health Residential Services:** Short-term/crisis residential contracted costs and costs associated with providing crisis residential care
 - **Psychiatric Services:** Psychiatrist and psychologist contracted costs
- **Prevention Services:** This Division provides a variety of preventive services utilizing the Bureau of Prevention Treatment classification of Selective, Indicated, Universal Direct or Universal Indirect

The prevention activities we offer under these classifications are defined here:

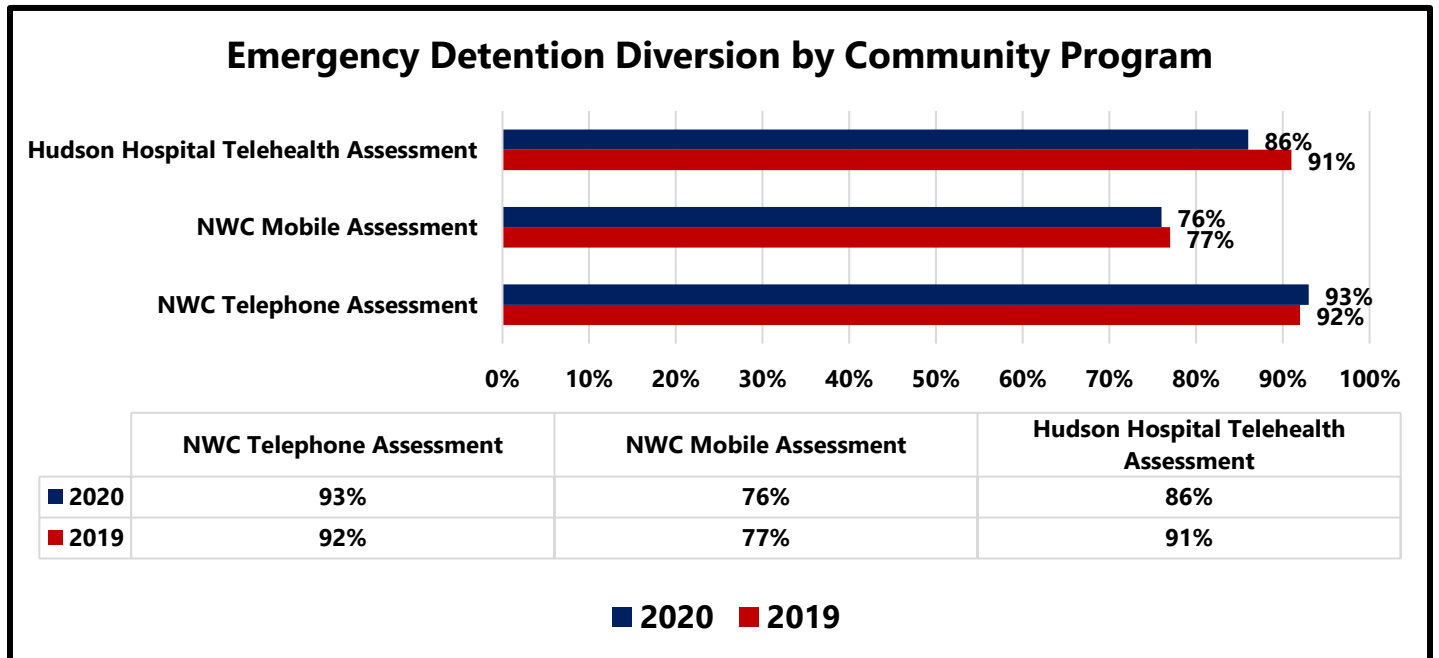
- **Selective:** Activities targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly elevated
 - Screening, Brief Intervention, and Referral to Treatment (SBIRT) - Often utilized in crisis work
 - Zero Suicide - Five staff trained. Toolkit incorporated into our Access unit and Mental Health Outpatient services
- **Indicated:** Activities targeted to individuals in high-risk environments, identified as having minimal but detectable signs or symptoms foreshadowing disorder, or having biological markers indicating predisposition for disorder but not yet meeting diagnostic criteria
- **Universal Indirect:** Interventions support population-based programs and environmental strategies. This also could include interventions involving programs and policies implemented by Public Health or related coalitions
 - Participation in St. Croix County Suicide Prevention Task Force providing Question, Persuade and Refer (QPR) trainings
 - Mental Health First Aid trainings
 - Northwoods Coalition

- *Healthier Together* SUD/MH work groups
- CJCC Substance Use, Mental Health and Domestic Violence committees

Emergency Services

St. Croix County continues to partner with community crisis services to provide 24/7 crisis coverage for consumers in need. The diversion rate from a hospital level of care to a less restrictive community intervention remained relatively consistent from 2019 to 2020. The volume of calls increased slightly (2%) from 980 calls in 2019 to 1000 calls in 2020. In looking at the emergency detention diversion rates for crisis interventions, the outcomes are also similar between 2019 and 2020

Emergency Services Hospital Diversion Rate of the Calls to Crisis Services	2020	2019
The percentage of consumers that were diverted from both voluntary and emergency detention placements to a hospital due to interventions by a crisis worker.	77%	75%



Telephone Crisis: 24/7 telephone staff available through a contract with Northwest Connections to triage and manage crises that are not life-threatening that occur in St. Croix County. These contacts result in a safety or response plan to address situation until additional professional services can be arranged.

Mobile Response: 24/7 hour staff available to assess crisis that are life-threatening to determine whether an emergency detention is necessary or whether another plan (response plan) can be developed to meeting consumer's needs.

Hudson Hospital Telehealth (Health Partners Emergency Department Telehealth): Noon to Midnight daily televideo staff available through Hudson Hospital to triage and manage behavioral health crises that are not life-threatening that present at the emergency departments of either Hudson Hospital, River Falls Area Hospital, Westfields Hospital, or Western Wisconsin Health. These contacts could result in an emergency detention, or in a safety/response plan that addresses the crisis until additional professional services can be arranged.

Emergency Detentions: The result of a law enforcement officer's determination that an individual is imminently dangerous to self or others due to a mentally illness, developmental disability and/or addiction disorder. Law enforcement must involve SCC Behavioral Health and get our authorization to place an individual in an approved treatment facility for evaluation. St. Croix County contracts with Northwest Connections and Health Partners Emergency Department Telehealth to provide assessments to help law enforcement make their determination and to authorize placements.

Outpatient Mental Health Services Waitlist

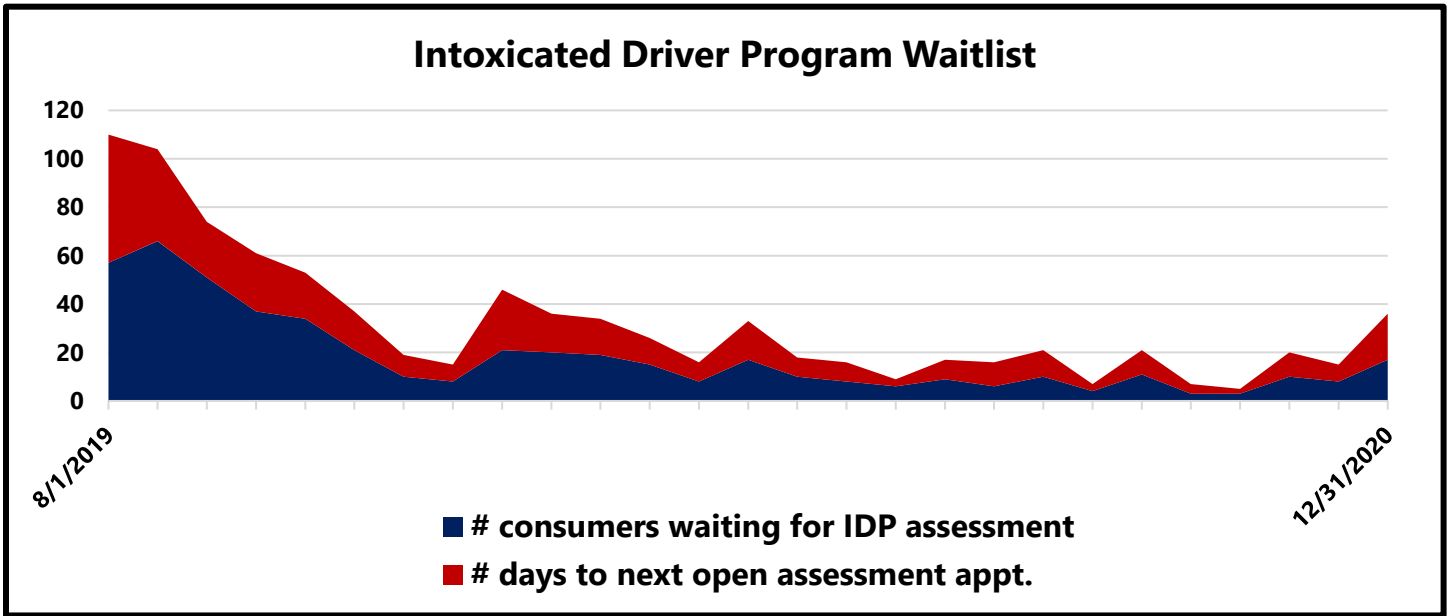
Through 2019, there had been periods of time when consumers would experience a gap between their initial Behavioral Health screening, the Mental Health assessment, and initial therapy session due to scheduling availability. Throughout 2020, most consumers have been able to schedule an initial Mental Health assessment and be scheduled with a therapist in a timely manner and there has not been a need for a waitlist

Outpatient Substance Use Disorder Waitlist

Behavioral Health Services has worked closely with other departments across St. Croix County to assure that priority is given to some specific populations. Those consumers not placed on a waitlist include: justice involved consumers involved in Treatment Court and Matrix programming, children services involved mothers and fathers, pregnant women, consumers with a history of IV substance use, and consumers assessed with a high intensity of care need. Additionally, all consumers that are placed on the Substance Use Disorder waitlist are given options for other community providers who can meet their treatment needs in an effort to improve timely access to care.

Waitlist times for the Intoxicated Driver Program drastically decreased between 2018 and 2020. Wait times were reduced from months, to less than two weeks. A snapshot over time shows that while there are ebbs and flows with both the number of consumers on the waitlist and the number of days waiting, both have reduced over time.

2020 Substance Use Disorder (SUD) Outpatient Services (OPS) - Waitlists													
Average Days on Waitlist	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Average
2020 Average	127	95	143	209	87	107	86	56	64	51	42	40	91.17
2019 Average	113	95	116	117	74	77	68	52	107	77	69	44	84.08

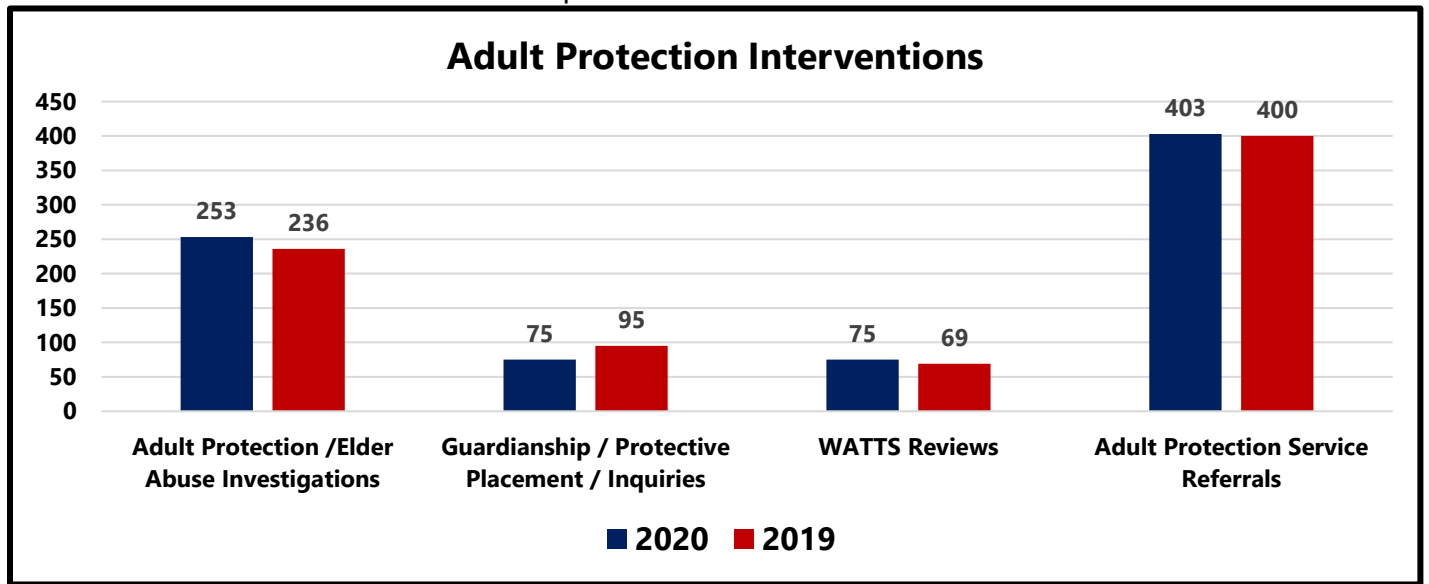


Adult Protection/Elder Abuse Interventions

There was an increase in referrals, investigations, and interventions provided to St. Croix County residents in 2020. There was also a trend for more cases surrounding financial exploitation of elderly and at-risk adults and an increase in case complexity.

Total Number	2020	2019
Adult Protection/Elder Abuse Investigations (graph below)	253	236
Adult Protection Service Referrals	403	400

Below is a breakdown of services provided in the area of Adult Protection in 2020.



Adult Community Support Services (ACSS)

Adult Community Support Services caseload has remained consistent for the past two years while the number of in-patient mental health hospitalizations for ACSS consumers has declined.

Adult Community Support Services (ACSS) Caseloads		
	Caseloads	# of hospitalizations
2020	40	10
2019	40	13

Adult Community Support Services (ACSS): Provide assessment, diagnosis, identification of persons in need of behavioral health community support services, case management, crisis intervention, psychiatric treatment including medication supervision, counseling and psychotherapy, employment, activities of daily living, psychosocial rehabilitation, client advocacy and recreations activities.

Community Support Program: (CSP) is a program within ACSS for adults living with a serious and persistent mental illness. CSP's provide coordinated professional care and treatment in the community that includes a broad range of services to meet the individual's unique personal needs, reduce symptoms, and promote recovery.

HEALTH AND HUMAN SERVICES – Children Services

Mission Statement: The mission of the Children Services Division is to utilize a community-oriented approach to assist families in remaining together while promoting health and safety for all family members.

Summary of Responsibilities: Alternate Care, Birth to Three, Child Protection Access, Initial Assessment and Ongoing Services, Children’s Long-Term Support, Coordinated Family Services, Juvenile Intake, Juvenile Supervision, Family Centered Treatment, and Targeted Case Management.

Program Summary:

- **Birth to Three:** An early intervention program for infants and toddlers ages birth to 36 months with a diagnosed disability or developmental delay of 25 percent in one or more areas of development
- **Children Services Access:** The process for receiving, analyzing, and documenting reports of alleged child maltreatment, referrals for Birth to Three, and Children’s Long-Term Support, and Comprehensive Community Services
- **Child Protection Assessment:** Daily screening meetings occur to review reports of alleged child maltreatment and determine which cases will receive a comprehensive assessment of individual and family conditions, functioning, and dynamics as well as determine which cases will be referred for ongoing services
- **Child Protection Ongoing:** Case management services provided to Children in Need of Protection and Services (CHIPS) resolved through Voluntary Service Agreements, Informal Disposition Agreements, Consent Decrees, or Adjudications
- **Resource Aide Services:** Provides parent education/training, transportation, and court-ordered supervised visitation for open ongoing CHIPS or Delinquency cases
- **Youth Justice Intake:** Receives referrals from parents, schools, child protection assessment and law enforcement concerning uncontrollability, truancy, delinquency, and child abuse/neglect matters. Analyzes the information and assesses each referral making recommendations to the District Attorney and Juvenile Court regarding a resolution for those cases
- **On-Call Services:** Responsible for providing Juvenile Intake services 24 hours a day (includes evenings, weekends, and holidays)
- **Youth Justice Ongoing:** Case management services of uncontrollable youth, truants, and delinquents via Voluntary Service Agreements, Deferred Prosecution Agreements, Consent Decrees (Juvenile Court), or Adjudications (Juvenile Court). Services provided using an evidence-based model
- **Independent Living Skills (ILS):** A federally required program which requires implementation of an assessment and specialized services for eligible youth between ages of 14 and 21 who have been placed out of the home for a minimum of 6 months

- **Community Tracking and Electronic Monitoring:** Provides evening and weekend accountability for ongoing youth justice youth
- **Alternate Care Services:** The recruitment, training, licensing/certification, and retention of St. Croix County foster homes, shelter homes, and respite homes. This also includes the use of other licensed facilities such as treatment foster homes, group homes, residential care, and corrections
- **Kinship Care:** Process applications and oversee both court-ordered and voluntary cases when relatives care for family members' children and receive a state entitlement stipend and Medicaid for the child
- **Step-parent adoption:** Complete step-parent home/adoption studies and make recommendations at the direction of the county judiciary
- **Day Care Certification:** Complete the evaluation and certification process for certified daycare homes
- **Coordinated Family Services:** A team approach to respond to children and families with multiple service needs. Each team develops an individualized plan that incorporates individual strengths and needs. Team members are comprised of family members, informal supports, service providers, school staff, and various other community members
- **Children's Long-Term Support Waivers (CLTS):** Provides Medicaid funding to support eligible children meet health and safety needs as a means for them to continue to live at home or in the community and who have substantial limitations in multiple daily activities as a result of one or more of the following disabilities: developmental disabilities, severe emotional disturbances, and physical disabilities
- **Children's Community Options Program:** Provides individual services and supports to families that include a child with severe disabilities. The program offers information and help in finding services and maximizing community resources, limited funding to buy needed services or goods that can't be bought through other sources and help in linking families with other families to strengthen natural supports
- **Target Case Management:** A Medicaid program that funds case management for children and their families to assist them in providing support and service coordination
- **Family Centered Treatment (FCT):** An evidenced-based model of intensive in-home treatment that services high-risk and high need families
- **Prevention Services:** The division provides an array of prevention services as classified within the two Public Health Models of Prevention: Targeted Population and Timing. The Targeted Population model prevention strategies are geared toward a specific population. For example, Universal prevention is offered to an entire population, regardless of risk. Selective and Indicated approaches are designed for populations possessing specified risks. They differ according to the prevalence and intensity of those risks. The Timing model has three categories, Primary, Secondary, and Tertiary. Primary Prevention focuses on reaching an entire population in order to prevent a first occurrence of child maltreatment. Secondary Prevention consists of efforts to prevent occurrence of child maltreatment among those who

are already showing signs of maltreating. Tertiary Prevention addresses situations where maltreatment has already occurred in an effort to allay its negative effects and prevent reoccurrence. The area of Selective Prevention includes the Birth to Three program, respite, and Triple P/Stepping Stones, an evidence-based parent education program. In addition, the unit contracts with the Family Resource Center St Croix Valley to provide Parents as Teachers, which is an evidence-informed home visiting and parent education program. Within the Targeted Population model, but in the area of Indicated Prevention for high risk families, Family Centered Treatment is utilized. Regarding the Timing Model, the Protective Factors Framework is utilized within all subunits of the division at the Secondary and Tertiary levels. Another targeted population model initiative that has been implemented is the Parents as Teachers curriculum, which is evidence-based parent education model for families involved with child protection

Birth to 3 Data

2020 Birth to 3 Totals		2019 Birth to 3 Totals	
Avg. Monthly Enrollment	102	Avg. Monthly Enrollment	108
Total New Referrals	161	Total New Referrals	211

Birth to 3 2020	January	Feb.	March	April	May	June	July	August	Sept.	October	Nov.	Dec.
Total Enrollment	115	106	96	95	97	99	99	103	105	103	100	102
Referrals	17	17	8	9	12	14	14	12	14	19	8	17

Family Centered Treatment Data

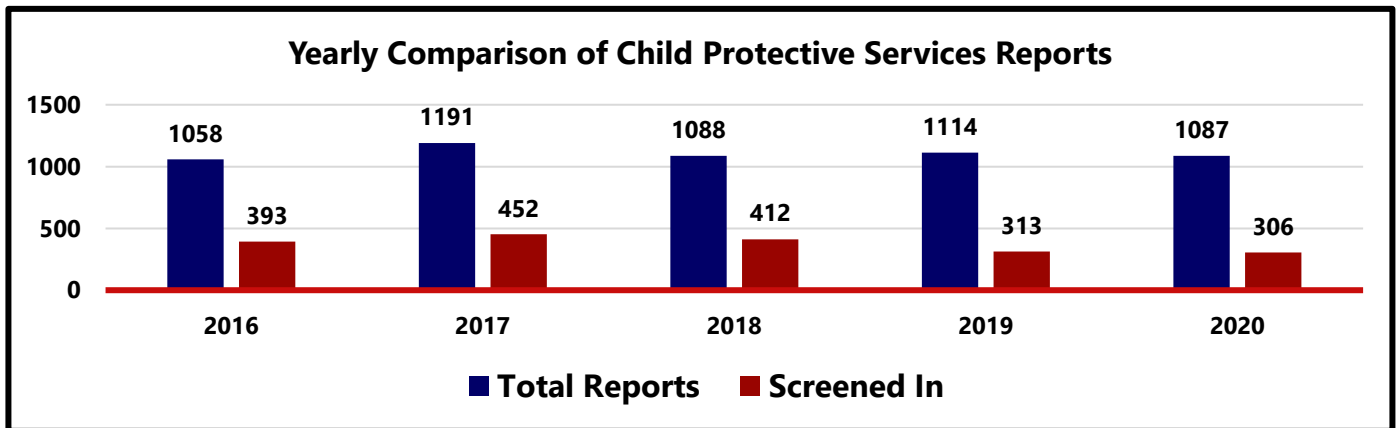
Family Centered Treatment (FCT)	2020	2019
Families Served	49	37

Youth Justice Data

2020 Youth Justice Totals		2019 Youth Justice Totals		2018 Youth Justice Totals	
Total New Referrals	173	Total New Referrals	216	Total New Referrals	255

Children Services Caseloads

	Jan	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total Admits	Total Discharges	2020 Total Youth Served
Coordinated Family Services (CFS)	105	111	112	111	106	108	106	102	97	93	93	91	40	55	145
Target Case Management (TCM)	5	5	5	4	4	3	3	3	3	3	3	2	0	3	5
Children's Long-Term Support (CLTS)	159	158	160	161	160	161	167	173	173	174	175	173	45	32	204
Referrals for CLTS Services	5	1	5	0	2	7	5	4	8	4	4	3	NA	NA	48



Types and Number of Placements

Placement	2016	2017	2018	2019	2020*
Foster Home, Non-Relative	17	21	17	32	34
Foster Home, Relative	8	23	37	20	15
Kinship	10	13	11	6	18
Residential Care Center	0	5	3	1	3
Shelter	0	5	5	7	3
Detention	1	2	1	0	2
Group Home	1	0	2	2	2
Corrections	0	0	0	1	0
Trial Reunification	0	2	1	1	5
Missing From Care	1	0	0	1	0
Totals	38	71	77	71	82

* This is a point in time each year on Dec. 31st

HEALTH AND HUMAN SERVICES – Comprehensive Community Services (CCS)

Program Summary: Comprehensive Community Services (CCS) became its own Division under HHS in 2020, adding the Division Administrator position in May. CCS is intended to assist individuals with mental health and/or substance use disorder through offering individualized recovery plans. Participants work with a dedicated team of service providers to develop a treatment and recovery plan that meets the consumer’s unique needs and goals. This community-based approach serves to promote improved overall health and life satisfaction for the individual.

Each person enrolled in CCS has an individually designed program/plan tailored to their situation. Services may include a variety of care options, such as: Mental health therapy, Substance use services, peer support, mentoring, Stress Reducing/Alternative Care such as yoga, boxing, equine therapy, meditation, expressive art, and music, or life skills training.

Future goals for CCS include increased community outreach and community awareness, process improvement to expand access to care, and quality integration/assurance reviews.

2020 CCS Enrollment

CCS enrollment 2020	Number Served (end of the month)	Number Admitted (during this month)	Number Discharged (during this month)	Number Served (end of this month)
MONTH				Y=Youth, A=Adults*
January	140	5	5	140 (Y=108 A=32)
February	140	12	8	144 (Y=114 A=30)
March	144	8	8	144 (Y=114 A=30)
April	144	2	3	143 (Y=115 A=28)
May	143	1	7	137 (Y=110 A=27)
June	137	8	5	140 (Y=113 A=27)
July	140	7	12	135 (Y=113 A=22)
August	135	3	8	130 (Y=109 A=21)
September	130	4	11	123 (Y=104 A=19)
October	123	2	7	118 (Y=100 A=18)
November	118	2	5	115 (Y=100 A=15)
December	115	4	6	113 (Y=98 a=15)

*Adult is defined at time of admission or discharge. Recipient would only be counted as an adult when 18 years of age or older. Recipients could be a child at admission but an adult at time of discharge.

CCS enrollment was impacted by the pandemic in several ways, such as reduced contracted provider capacities and school closures or reduce in-person learning.

Referral data will be tracked for 2021 as not all referrals result in enrollment into the CCS program.

HEALTH AND HUMAN SERVICES - Economic Support



Mission Statement: St. Croix County's Economic Support Division provides direct services to the most vulnerable residents of St. Croix County who meet the financial and non-financial eligibility guidelines for access to health care, food, childcare, home energy and heat resources funded through public programs.

Summary of Responsibilities: Saint Croix County is one of 10 counties to make up the Great Rivers Income Maintenance Consortium (GRC) with Barron, Burnett, Chippewa, Douglas, Dunn, Eau Claire, Pierce, Polk, and Washburn. The primary programs for Income Maintenance (IM) include: FoodShare (FS) program; Medicaid (MA) and BadgerCare Plus (BC+) programs. In addition, St. Croix County administers the SSI Caretaker Supplement program (CTS), Wisconsin Home Energy Assistance Program (WHEAP), Wisconsin Shares Child Care (CC) Subsidy, and determines financial eligibility for various long-term care programs. Lastly, Income Maintenance performs program integrity functions including benefit recovery, fraud detection and prevention.

Program Summary:

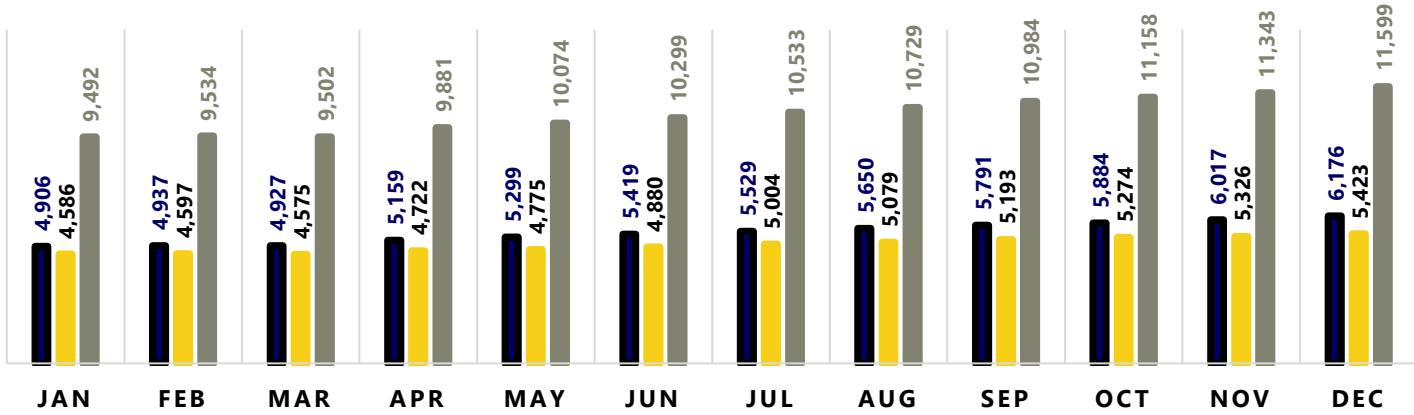
- **FoodShare (FS):** FoodShare Wisconsin was created to help stop hunger and to improve nutrition and health. FoodShare helps people with limited resources buy the food they need for good health
- **BadgerCare Plus (BC+):** BadgerCare Plus is a program for children under 19 years of age, adults without dependent children, pregnant women, and parents & caretakers in Wisconsin who need and want health insurance. BadgerCare Plus is designed for people who do not currently have access to private health insurance
- **Medicaid (MA):** Wisconsin's ForwardHealth Medicaid plans for Elderly, Blind or Disabled provide health care for those who are: age 65 or older, blind, or disabled. Clients can also enroll in a Medicare Savings Program, and Medicaid may pay their required premiums,

coinsurance, and deductibles for both Part A (hospital-related costs) and Part B (physician-related costs), depending on the program

- **Long Term Care (LTC):** Long Term Care (LTC) includes any service or support that a person needs due to age, disability or chronic illness which limits his/her ability to perform everyday tasks. LTC services are beyond, and usually in addition to Medicaid covered services and are designed to meet special needs for elderly/disabled individuals who have LTC needs. LTC programs include Institutional Medicaid, Home and Community Based Waivers (HCBW), Family Care (FC), Partnership and IRIS (Include, Respect, I Self Direct). In addition, the Children's Long-Term Support (CLTS) Waiver Program is specifically a Home and Community-Based Service (HCBS) Waiver that funds community supports and services for children who have substantial limitations in their daily activities and need support to remain in their home or community. Eligible children include those with developmental disabilities, severe emotional disturbances, and physical disabilities. Funding can be used to support a range of different services based on an assessment of the needs of the child and his or her family
- **Caretaker Supplement (CTS):** Wisconsin's Caretaker Supplement (CTS) is a cash benefit available to parents who are eligible for Supplemental Security Income (SSI) payments. Caretaker Supplement is not a Medicaid benefit; it pays cash only to eligible parents. Caretaker Supplement benefits are \$250 per month for the first eligible child and \$150 per month for each additional eligible child
- **WHEAP/LIHEAP:** The Wisconsin Home Energy Assistance Program (WHEAP) manages the subcontract for the federally funded Low-Income Home Energy Assistance Program (LIHEAP) and Public Benefits Energy Assistance Program. In addition to regular heating and electric assistance, specialized services include: emergency fuel assistance, counseling for energy conservation and energy budgets, pro-active co-payment plans, targeted outreach services, emergency furnace repair and replacement
- **Wisconsin Shares Child Care Subsidy:** This program provides financial childcare assistance to low-income parents who are working or preparing to enter the workforce. Administered by the State Department of Children and Families (DCF), the program aims to provide access to affordable, high-quality childcare and early education experiences, to enhance children's development and to support their families in work and parenting roles. In addition, state law requires counties and tribes to certify providers who receive public funding but are exempt from the licensing law. Children Services currently manages the certification piece for St. Croix County DHHS

ST. CROIX COUNTY - 2020 INCOME MAINTENANCE RECIPIENTS

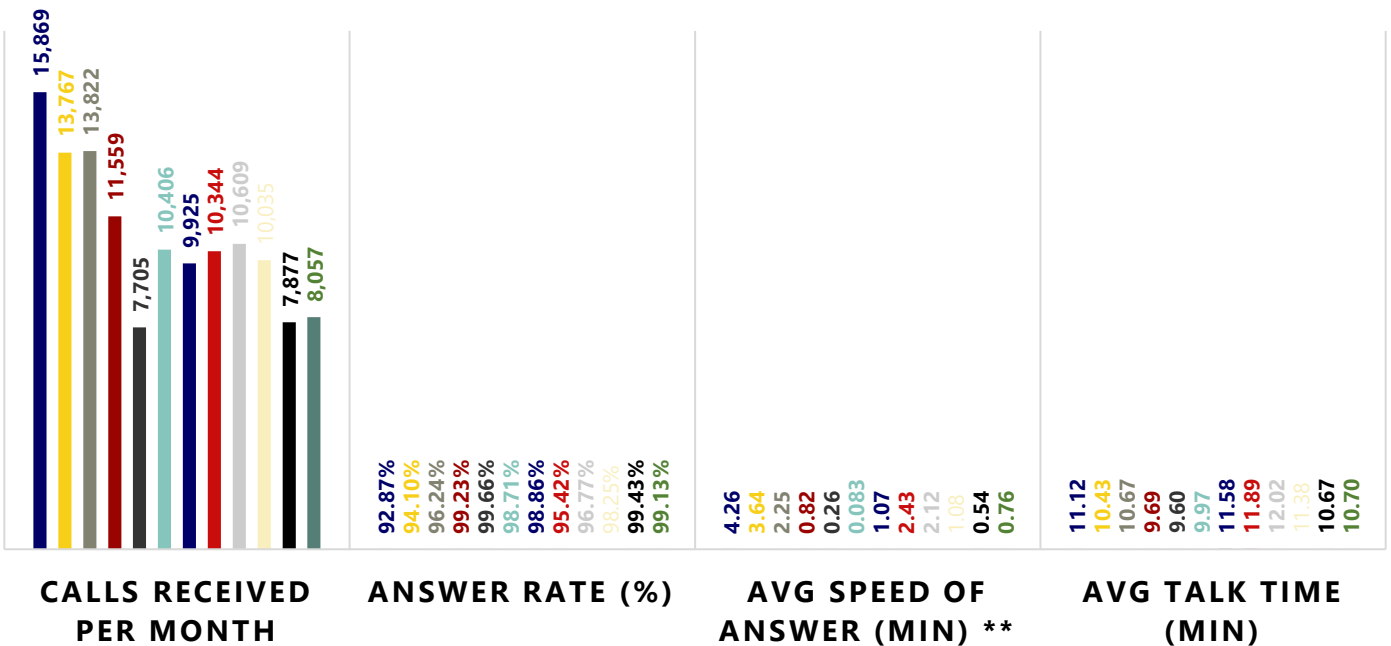
■ Adults ■ Children ■ Total



Data in graph represents number of recipients rather than number of cases and illustrates Economic Support (ES) serves approximately 12% of Saint Croix County's population using the U.S. Census Bureau census (84,347 from April 1, 2010), an increase from 11% in past years likely attributed to the COVID-19 pandemic. In the 10-county consortium, the percentage of population served ranges from 12% for St. Croix County to as high as 28% for Burnett County.

GRC - 2020 YTD CALL DATA

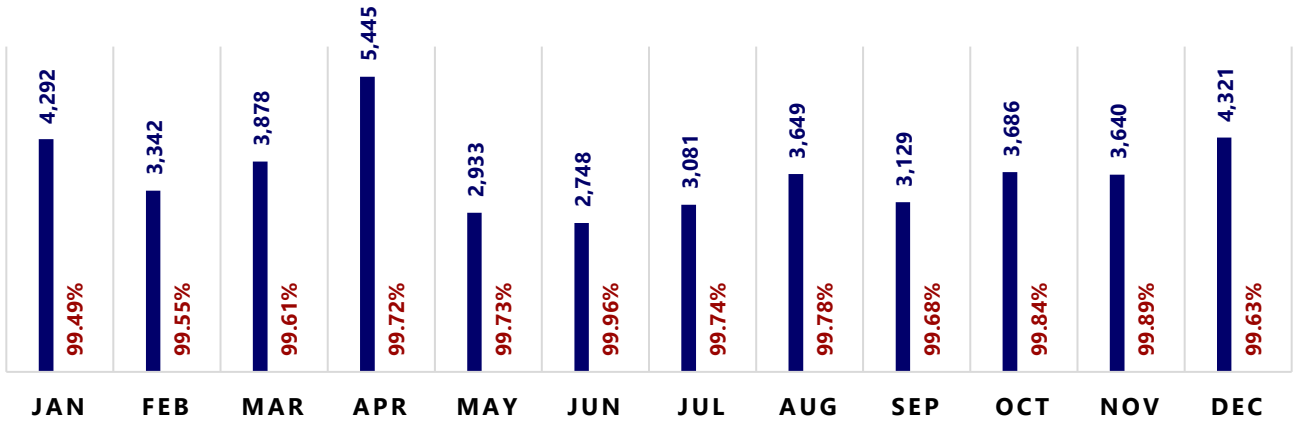
■ Jan ■ Feb ■ Mar ■ Apr ■ May ■ Jun ■ Jul ■ Aug ■ Sep ■ Oct ■ Nov ■ Dec



Data below includes applications and renewals for FoodShare and Medical Assistance, although may also include the Child Care program. The contractual requirement based on a Federal performance standard is that 95% or more applications and renewals are processed timely. Residents of St. Croix County as a member of the Great Rivers Consortium have consistently experienced processing times that have well exceeded the standard.

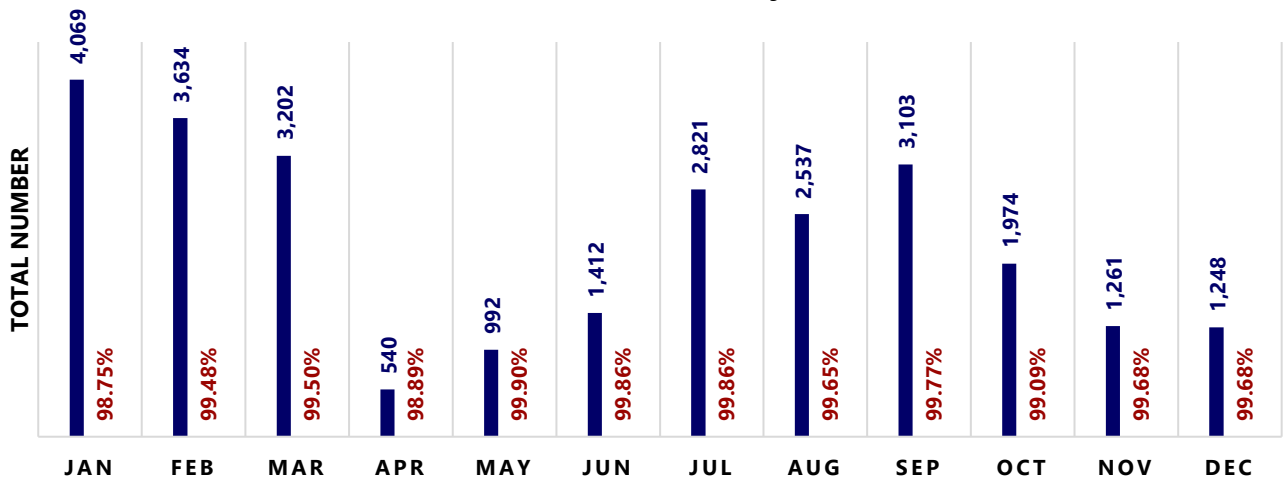
GRC - 2020 APPLICATIONS

■ Total ■ Timely

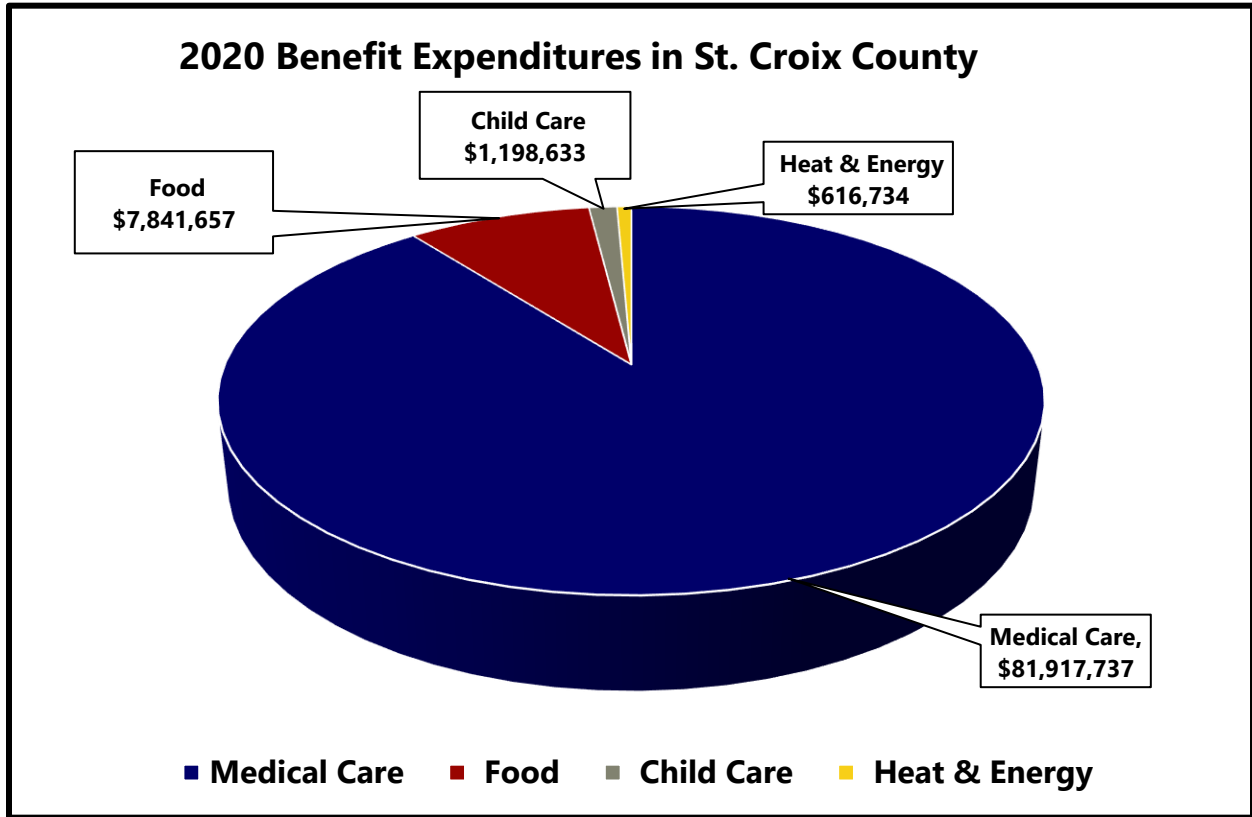


GRC - 2020 ANNUAL RENEWALS

■ Total ■ Timely



St. Croix County and Great Rivers Consortium expenditure's data below both reflect benefits administered by local staff and regional/virtual call center staff serving consumers across the 10-county consortium. The benefits generated by work completed by our division/consortium not only provide help to vulnerable and low-income residents, but also help support local and areas business, including grocery and convenient stores, hospitals and clinics, day care centers and child care providers, and electric and heat vendors.



Programs	Child Care	Heat and Energy	Food	Medical Care
2020 SCC Expenditures	\$1,198,633	\$616,734	\$7,841,657	\$81,917,737
2020 Great Rivers Consortium Expenditures	\$10,023,338	\$9,121,582	\$86,005,737	\$720,965,627

HEALTH AND HUMAN SERVICES - Public Health



Mission Statement: St. Croix County Public Health Division protects and promotes health, prevents disease and injury, and empowers communities to live healthier lifestyles.

Vision Statement: Healthy People Creating Healthy Communities.

Summary of Responsibilities: St. Croix County (SCC) - Public Health is a level III health department as defined by Wisconsin Administrative Rule Department of [Health Services \(DHS\) 140.06](#). Level designation of the health department is determined by a review of operational services by the State Department of Health Services-Division of Public Health, every five years.

2020: An Unprecedented Year for St. Croix County Public Health

2020 was a challenging year for St. Croix County residents, businesses, schools, and our Public Health Division. In January 2020, we first learned of a novel virus known as Severe Acute Respiratory Syndrome-Coronavirus (SARS-CoV-2)-the virus that causes COVID-19. Because COVID-19 was a new virus affecting the globe, mobilizing, and coordinating a national, state, and local Public Health response was put to the test. St. Croix County Public Health acted swiftly by coordinating response efforts with state and federal agencies and regional local Public Health Departments to protect the safety of St. Croix County residents. Health Officer Kelli Engen led a relatively small staff in navigating our pandemic response, which included: Coordinating and communicating testing for the virus; contact tracing and disease investigations to prevent the spread of the virus, and; working with our Public Information Officer Adam Kastonek in striving to keep the public informed of disease activity and safety guidance.

St. Croix County Public Health has experience in responding to infectious/communicable diseases, but the scale of the COVID-19 pandemic, and the “unknowns” associated with this novel virus, strained our small Public Health Department’s capacity. However, in spite of challenges, St. Croix County emerged as a regional leader in disseminating information and rising to the challenges posed by the pandemic. While vaccines were not yet available by the end of 2020, vaccine coordination began in late November and December of 2020, with the Pierce County Health Department as well as all area hospitals, clinics, and other enrolled vaccine providers in both St Croix and Pierce counties. Our Public Health Division is grateful to our partners, residents, Board members and County Administration for their ongoing support for the Public Health staff (including

Limited-Term Employees & Volunteers) that have worked, and continue to work, relentlessly to protect and promote the health of our communities. THANK YOU!

Further definitions of activities related to COVID-19 response include:

1. **Testing**= early identification of disease through testing of individuals with symptoms and their close contacts.
2. **Contact Tracing**= interviewing individuals positive for COVID-19 to identify exposure to others and recommending isolation and quarantines.
3. **Vaccination**= procuring and administering vaccines for anyone eligible in our community that want a vaccine.

The rest of this section summarizes other substantial work our Health Department does in a typical year. We have a variety of programs that serve the community in many different ways. SCC Public Health is responsible for assessing the health and safety of its jurisdiction. Public Health is structured by five main units that are responsible for public health programming, and those program summaries are found below. Program work is often done by more than one unit and are listed last under cross-unit programming.

Public Health Units:

- **Administration**
 - **Oversight and management of all units:** Leadership provides management and leadership to all staff in the public health division
 - **Public Health Accreditation:** Improves and protects the health of the public by advancing the quality and performance of the division. The following are requirements of national accreditation and are reviewed and maintained by the Core team comprised of the Health Officer, Public Health Supervisor, and other Public Health staff
 - Community Health Needs Assessment (CHNA)
 - Community Health Improvement Plan (CHIP)
 - Strategic Plan
 - Performance Management
 - Quality Improvement
 - Workforce Development Plan
 - **SCC-Health and Human Service Board Liaison:** Serves as the liaison between Public Health staff and the Health and Human Services Board
 - **Responsible for statutory and local ordinance authority:** Has the legal authority to ensure that state and local public health laws are enforced
- **Community Prevention**
 - **Child Death Review Team (CDRT):** Organized by public health this team is composed of community stakeholders to review the death of a child and young adults under 21

years old. This team is designed to prevent deaths of youth by examining circumstances around the child's death and focusing prevention efforts, so tragedy doesn't reoccur. Our county medical examiner is our biggest CDRT partner

- **Chronic Disease Prevention:** St. Croix County Public Health is a member of the Western Wisconsin Working for Tobacco-Free Living (W3TFL) Coalition. W3TFL conducts compliance checks regarding sale of tobacco to minors (WI WINS program). Public Health nurses continue to provide tobacco cessation counseling, support, and resource information to Prenatal Care Coordinator (PNCC) clients with the First Breath program, which is a smoking cessation program. A Million hearts grant was revived in 2018 and allowed one Public Health Nurse (PHN) to work with at risk populations regarding heart health
- **Community Health Improvement/Community Coalitions:** The Healthier Together Coalition between Pierce and St. Croix counties started its seventh year of partnership in 2020. The Pierce County Health Department, St. Croix Health and Human Service Department along with St. Croix Valley-United Way and hospital partners make up the Healthier Together Executive Committee. Hospitals include: Allina, River Falls Hospital, Hudson Hospital, Westfields Hospital in New Richmond, and Western Wisconsin Health in Baldwin. Many other stakeholders are involved in the Healthier Together Coalition
- **Infant safety classes:** Public Health offers an Infant safety class to Women Infant & Children (WIC) and PNCC participants 4 time a year. Operation Help, a local non-profit, provides residents of St. Croix County with financial assistance, a place for personal support, and connections to community resources to alleviate short-term economic crises and partner with public health to provide incentive gifts to those who attend. Parents who attend can choose one of the three safety incentive gifts which are a car seat, a pack and play, or Carbon Monoxide/Smoke alarm. The infant safety class is also offered to the public at Hudson Hospital and Clinics. Attendees receive the Period of Purple Crying DVD

- **Environmental Health**

- **Beach Testing:** Public Health inspects and samples public beaches for human health hazards. All public beaches are tested routinely for E. coli
- **Human Health Hazard Investigation:** Public Health investigates and uses the human health hazards ordinance to enforce compliance with conditions that can adversely affect citizens of St. Croix County
- **Lead Investigation:** Public Health does housing inspections of children with elevated blood lead levels
- **Licensing and Inspections:** Public Health has contracts with Department of Agriculture, Trade, and Consumer Protection (DATCP), Department of Safety and

Professional Services (DSPS), and the Department of Natural Resources (DNR). Contract services include licensing and inspections of restaurants, retail food establishments, hotels, bed & breakfast establishments, tattoo/body piercing establishments, recreational education camps, manufactured home parks, public swimming pools, and campgrounds

- **Radon:** Radon is the second leading cause of lung cancer and is found in Wisconsin. Public Health sells reduced cost radon test kits and maintains a list of mitigation contractors
- **Rabies Control Program:** Public Health assists law enforcement in the rabies control program by ensuring that animals that have bitten someone are properly evaluated for rabies. Follow up with bite victims is part of the rabies control program

- **Nursing**

- **Communicable Disease Prevention and Control:** Communicable diseases are entered into the Wisconsin Electronic Disease Surveillance System (WEDSS) and public health investigates and follows up on all communicable diseases per the Center for Disease Control and Prevention Program (CDC)
- **Reproductive Health Family Planning Clinic:** The clinic provides low/no cost reproductive health services. Sexually transmitted disease testing is among these services. The clinic provides services to both women and men
- **Immunization Clinic:** Public Health offers immunization clinics every Monday afternoon. We provide vaccines according to the Vaccine for Children's (VFC) program guidelines and the Adult Vaccine Program (AVP) guidelines. We also provide flu vaccine for SCC staff and two school districts in the county
- **Tb Testing Clinic:** Even though Tuberculosis cases have dropped significantly nationwide, screening for the bacteria which can cause the disease is still important. We offer Tuberculosis screenings based on a person's risk factors. For many people, a Tuberculin Skin Test (TST) is the screening method used at our clinics. We offer a single step and a two-step test, to meet requests and needs in the community. Not all people can be screened by a TST and a blood test is recommended. Our nurses evaluate clinic participants prior to screening for Tuberculosis
- **WiseWoman:** WISEWOMAN is a Center for Disease Control and Prevention (CDC) program that seeks to help women reduce the risk for heart disease and improve overall health through screening and services and 1:1 lifestyle coaching. A contract with Health Partners allows identified women to obtain additional medical care such as mammograms, and visits with a primary care provider

- **Nutrition**

- **Breast Feeding Peer Counselor:** The goal of the Breastfeeding Peer Counselor Program is to increase the rates of exclusive and sustained breastfeeding among WIC participants by providing in person and over the phone counseling, education, and support

- **Community Education with Aging and Disability Resource Center:** The Older Americans Act requires that nutrition programs comply with the most recent Dietary Guidelines for Americans, ensuring that meals planned and offered at congregate dining sites meet nutritional requirements of senior participants. Menus are analyzed and proven to meet standards by a Public Health Registered Dietitian (RD). The RD also provides nutrition education twice a year at each of the 9 county senior dining sites, however this was put on hiatus during 2020 due to the COVID-19 pandemic
 - **Farmers Market:** The WIC FMNP (Farmers' Market Nutrition Program) is a program funded through the USDA and has two primary goals. It aims to increase fruit and vegetable consumption of the WIC population and to increase use, awareness, and sales at local and statewide farmers' markets. This program helps to supply healthy food access to WIC participants by offering vouchers to purchase fresh produce at community farmers markets
 - **Fit Families:** Fit families Supplemental Nutrition Assistance Program-Education (SNAP-Ed) is a successful behavior change program that targets families of 2-4-year-old children enrolled in WIC at Fit Families Project sites, such as ours, in Wisconsin. It uses evidence-based research and promising strategies that focus on helping families eat healthier and be more active, with monthly counseling contacts and NERI (Nutrition Education Reinforcement Incentives) to motivate the children
 - **WIC (Women Infants and Children):** Public Health nutritionists provide education at the systems level and are involved in community coalitions whose mission is to increase physical activity, increase healthy food access, and work towards decreasing food insecurity for everyone living in our communities. The purpose of the Special Supplemental Nutrition Program is to promote and maintain the health and well-being of nutritionally at-risk pregnant, breastfeeding, and postpartum women, infants, and children. The WIC program provides nutrition education, breastfeeding support, food benefits, along with resource and referrals to assist in meeting the varied needs of enrolled families
- **Cross Unit Programing**
 - **Maternal Child Health:**
 1. Provides Prenatal Care Coordination (PNCC): nursing visiting program for high-risk pregnant women, including:
 - Postpartum nurse home visit
 - Breastfeeding support and education
 - Reproductive Health services including screening and treatment of sexually transmitted infections referral

- Pierce-St. Croix CARES (Creating a Responsive and Effective System for promoting and protecting our children’s wellbeing) coalition that is focused on improving the social-emotional wellbeing of children, youth, and their families.

Preparedness

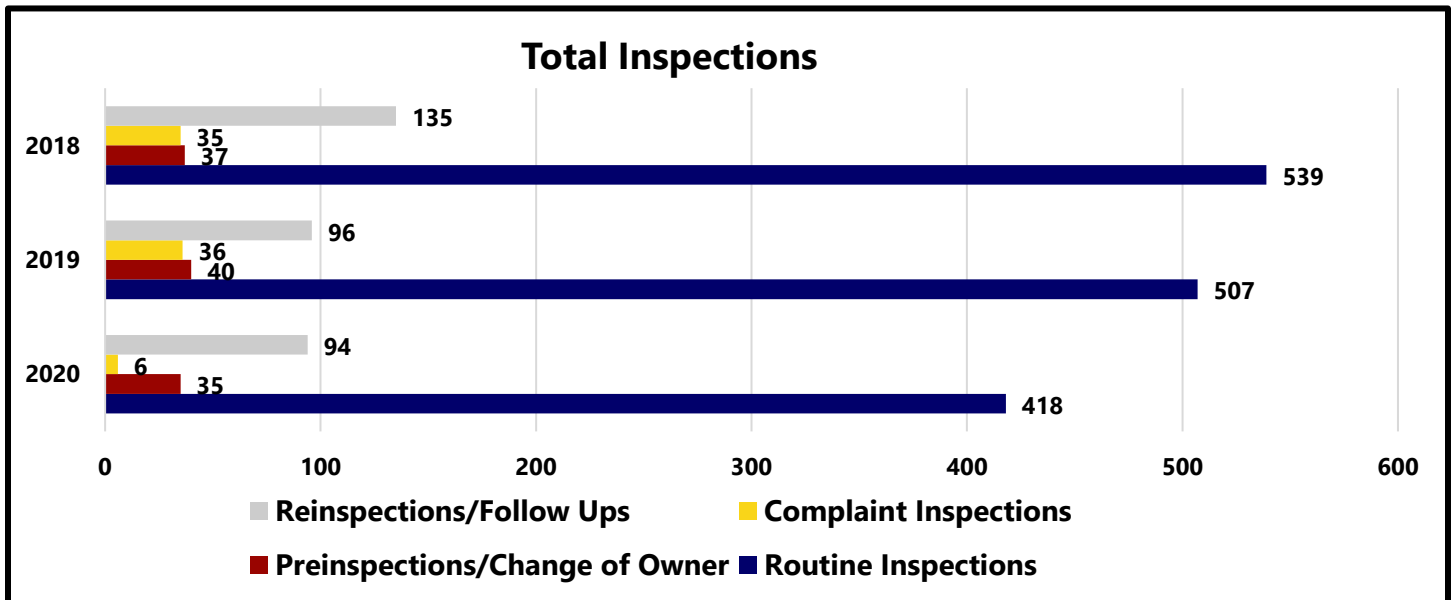
- Cities Ready Initiative
- Public Health Emergency Plan (PHEP)
- St. Croix Valley Medical Reserve Corps

Environmental Health			
	2018	2019*	2020** COVID-19
Human Health Hazard Complaints	138	83	22
Animal Bites	55	58	57

*The 2019 Human Health Hazard program data reflects changes in the data collection system and data points.

Human Health Hazard Complaints include indoor air quality concerns such as mold and radon, water quality questions, bed bugs and other types of infestation, property complaints such as the presence of unsafe structures, landlord complaints, and housing issues. The Environmental Health Specialist or other public health staff member responds to all complaints. Some complaints require investigation that may include a field visit and testing.

Animal Bites include dog, cat, and bat bites. Each case requires specialized follow-up to prevent human rabies.



Licensing and Inspections: Public Health has contracts with the Wisconsin Department of Health Services (DHS), Department of Agriculture, Trade, and Consumer Protection (DATCP), Department of Safety and Professional Services (DSPS), and the Department of Natural Resources (DNR). Contract services include licensing and inspections of restaurants, retail food establishments, hotels, bed & breakfast establishments, tattoo/body piercing establishments, recreational education camps, manufactured home parks, public swimming pools, and campgrounds.

Reproductive Health	2018	2019	2020
Unduplicated Clients	439	383	272
Client Visits	1,110	969	715
Sexually Transmitted Disease Cases	196	159	183

The decrease in the number of unduplicated clients is due in part to the Affordable Care Act (ACA) as clients with new coverage are seeking care with private providers, and the increased use of Long Acting Reversible Contraceptives (LARC) which require fewer office visits.

We continue to provide Reproductive Health services to St. Croix County residents who lack health care coverage and want quality, confidential services.

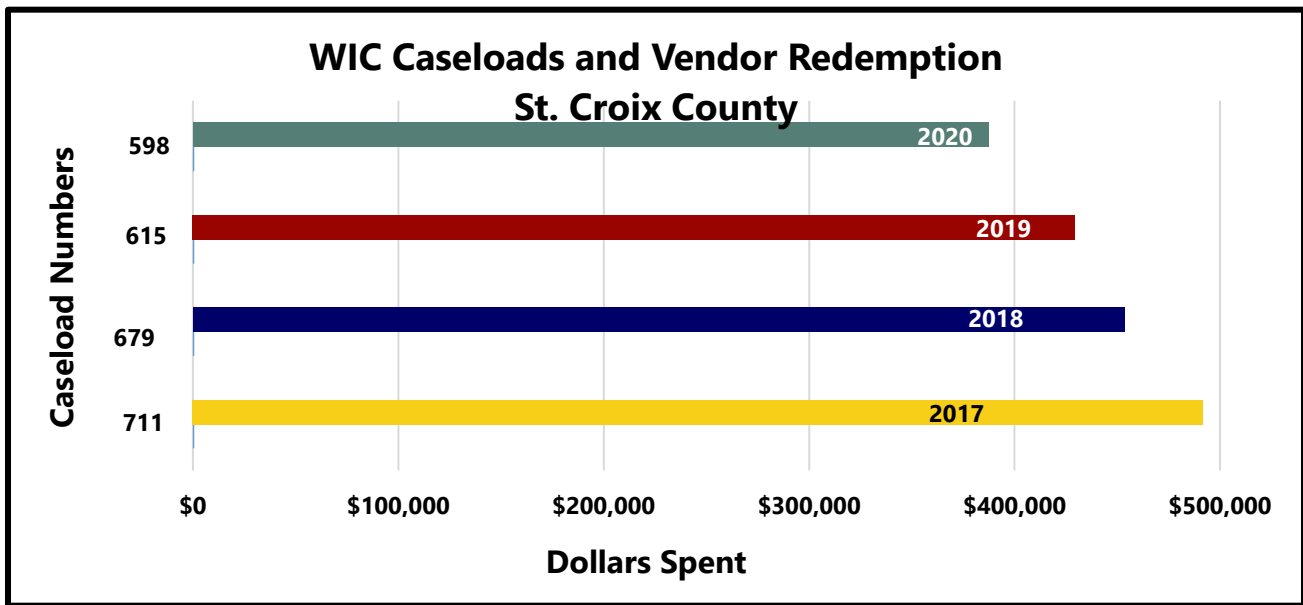
Wisconsin Department of Health Reportable Communicable Diseases (Confirmed cases by episode date) *Food or waterborne disease **Sexually transmitted disease	2018	2019	2020
TOTAL Reportable Communicable Diseases	<u>336</u>	<u>299</u>	<u>5,906</u>
Category I Disease			
COVID-19	0	1	5,619
Haemophilus influenzae, invasive disease	2	2	0
Pertussis (whooping cough)	5	4	1
Tuberculosis – Class A or B	0	1	2
TOTAL Category I Diseases	7	6	5,622
Category II Disease			
Anaplasmosis	2	2	2
Arboviral Illness (Chikungunya, Dengue, Jamestown Canyon, La Crosse Encephalitis, & Zika viruses)	1	1	0
Babesiosis	1	0	0
Blastomycosis	1	5	5

Borreliosis (other than Lyme disease)	0	0	1
Campylobacteriosis*	14	8	15
Chlamydia**	172	149	156
Coccidioidomycosis	0	1	0
Cryptosporidiosis*	5	6	5
Cyclosporiasis	4	0	1
E. coli (enteropathogenic: EPEC & enterotoxigenic: ETEC)*	4	1	1
E. coli (Shinga toxin-producing, STEC)*	5	7	4
Giardiasis*water	5	8	4
Gonorrhoea**	21	20	26
Hepatitis B, chronic	2	0	0
Hepatitis C, chronic	9	15	9
Influenza-associated hospitalization (*all 2020 cases occurred: 01/2020 - 02/2020)	25	17	17*
Legionellosis	1	2	1
Lyme disease	28	12	3
Malaria	0	0	2
Mumps	0	1	0
Mycobacterial disease (non-tuberculosis)	0	11	5
Rheumatic fever	1	0	0
Salmonellosis*	13	7	6
Shigellosis	1	3	0
Streptococcal disease (all invasive disease caused by Groups A and B Streptococci)	5	6	9
Streptococcus pneumoniae (invasive pneumococcal)	1	3	4
Syphilis**	1	2	3
Toxoplasmosis	0	1	0

Tuberculosis, latent infection (LTBI)	7	5	2
Varicella (chickenpox)	0	0	2
Vibriosis (non-cholera <i>Vibrio</i> infection)*	0	0	1
TOTAL Category II Diseases	329	293	284

Public Health is required by statute to do communicable disease surveillance and control. All of the cases listed above would have at least required a phone call and education by a public health nurse. For Chlamydia and Gonorrhea, contact investigation is required. Note the increase in Hepatitis C is likely related to Intravenous Heroin use.

Active Tuberculosis investigation and follow-up is very time and staff intensive as it includes directly observed therapy for at least 6 months. Treating people with LTBI so they do not get active disease is very cost-effective.



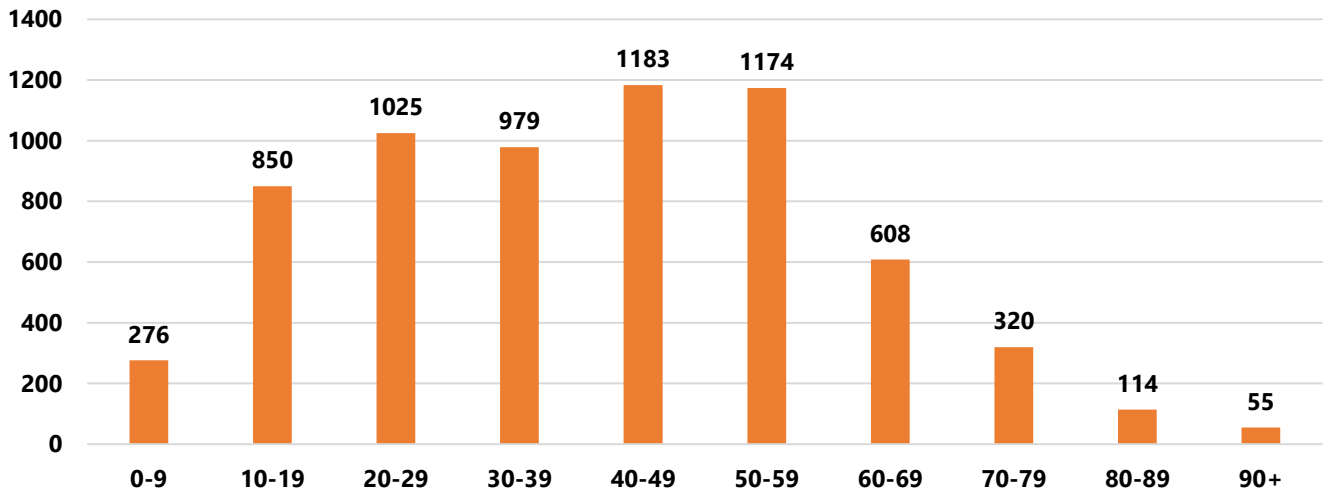
PUBLIC HEALTH'S 2020 PANDEMIC RESPONSE

COVID-19

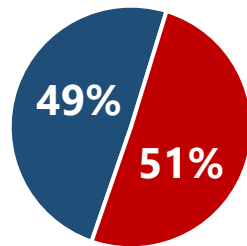
Coronavirus, Novel 2019 (COVID-19) 2020 Summary	
Total Confirmed Cases <i>Positive for COVID-19 by PCR Test</i>	5,468
Total Probable Cases <i>Positive for COVID-19 by Antigen Test</i>	1,116
Total Positive COVID-19 Cases in 2020	6,584
Total Deaths <i>with COVID-19 as cause or contributing factor</i>	48

Source of Infection <i>Self-Report</i>	
Community Acquired	35%
Household Contact	27%
Close Contact	20%
Undetermined	10%
Long-Term Care	2%
Healthcare	1%
School-Acquired	1%
Outbreak-Associated Case	1%
Domestic Travel Outside WI	1%
Other	1%

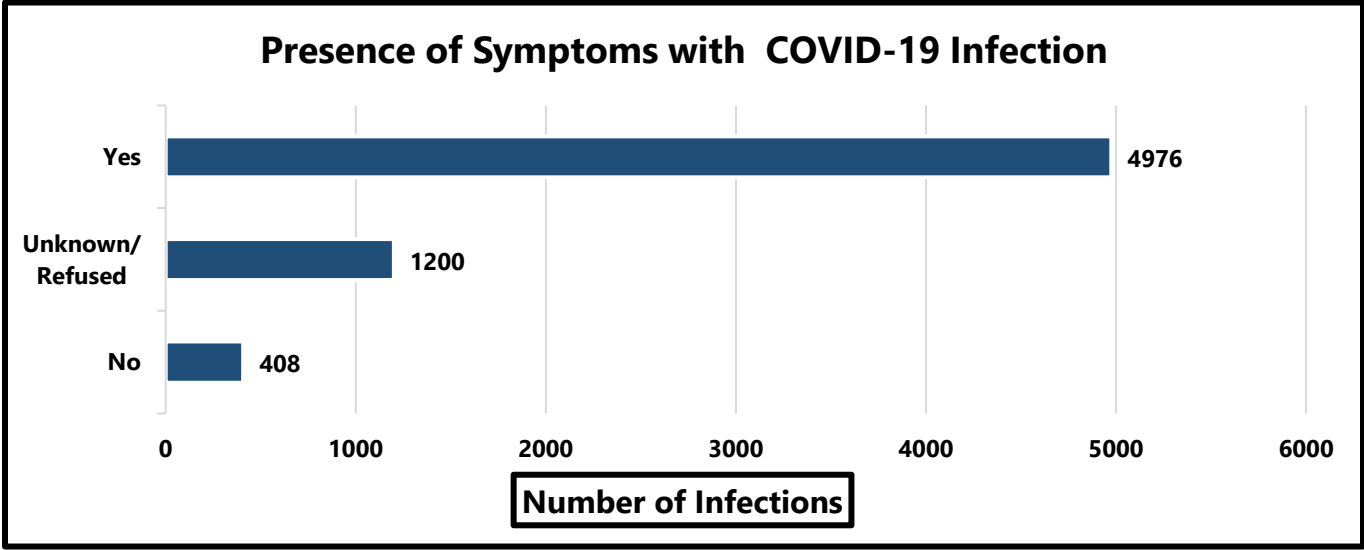
2020 COVID-19 Infections by Age Bracket



Gender Distribution of COVID-19 Infections



■ Male ■ Female



In 2014, the Public Health Accreditation Board (PHAB) designated SCC- Public Health as an accredited health department. Every five years, an accredited health department must apply for Reaccreditation. In 2019, our health department started preparing for this process, and when COVID-19 started in early 2020 our department asked PHAB for an extension of our reaccreditation application. We were granted this extension and will submit our application in May of 2021.

PHAB’s mission is:

"Improve and protect the health of the public by advancing and ultimately transforming the quality and performance of state, tribal, local and territorial public health departments. Eighty percent of the United States population is now served by a health department that meets PHAB’s national standards for delivering quality programs and services to its community. In Wisconsin the state Division of Health of Public Health, one tribal health clinic, and seventeen local health departments are accredited. St. Croix County was one of the first in this growing list.

PHAB standards and measures fall into twelve different domains. Ten of the domains align with the ten essential services of public health and the other two domains focus on management of the organization and board governance. Through accreditation and meeting the domain requirements SCC-Public continually advances its performance.

HEALTH AND HUMAN SERVICES – St. Croix County Health Care Campus

Mission Statement: “Our residents don’t live in a facility; we work in their home”.

Summary of Responsibilities: The philosophy at the St. Croix County Health Care Campus states that staff will at all times provide care and services to the residents necessary to attain the highest practical physical, mental and psychosocial well-being in accordance with the comprehensive assessment and plan of care.

The Health Care Campus: The St. Croix County Health Care Campus is dedicated to upholding high standards of quality care while providing our residents with dignity, respect, and a sense of security. Our 108-bed campus offers a variety of care options sure to meet the needs of you or your loved one. From short rehabilitation stays to making this a long-term solution for a person’s care needs, our friendly and highly skilled staff help make the transition smooth. The Health Care Campus is made up of three distinct units, each offering a different level of service to meet the needs of our residents.

In 2020, the Health Care Campus (HCC) was especially challenged with keeping residents and staff safe as the COVID-19 pandemic unfolded. The success of the HCC in preventing serious outbreaks and death due to COVID-19 is remarkable and a tribute to employee efforts to protect the residents of our facilities—who are at an especially high risk of contracting this disease. Prevention and mitigation efforts were at times stressful as HCC navigated this pandemic and adjusted to evolving guidance from the state of Wisconsin, CDC, and Public Health. Some services, such as those provided through Kitty Rhoades, were suspended due to challenges associated with keeping that population safe. Census numbers were affected generally as precautions were taken to provide adequate safeguards and distancing, while rehabilitation services were dramatically reduced.

- **Health & Rehab Center-Skilled Nursing-** Short term care is designed to help individuals recover from surgery, injury, or an illness and reclaim their independence. Our team provides all the tools necessary to get residents back to a level where they are able to return home. While long-term care provides a warm and inviting space to ensure our residents and visitors (limited due to COVID-19) feel right at home. Small neighborhoods create a family like atmosphere allowing residents to build relationships while promoting community integration and socialization. Our skilled team of Nurses and Certified Nursing Assistants are available around the clock to provide individualized care to each of our residents
- **Kitty Rhoades Memorial Memory Care Center-** Provides services to seniors with Alzheimer’s disease and is designed to work with residents with behaviors, related to their conditions, in a small memory care unit. This facility is designed to enhance the quality of

life through meaningful activities while promoting independence. Our warm, neighborly setting along with compassionate staff creates a calm and inviting environment giving our residents a sense of peace

- **Orchard View Terrace-** Combines independent living with the comfort of knowing support is available around the clock. This facility is made up of an assisted living and memory care unit allowing us to serve individuals with dementia and other forms of memory loss as well as elderly adults in need of some assistance with daily living skills. Our goal is to help the tenants and your families reach and maintain a level of independence while providing the tenants with a sense of community in our warm, home like environment
- **Outpatient and Inpatient Therapy-** Our therapy department is able to provide services to both the residents within our community and the residents in the surrounding area, providing Physical, Occupational and Speech therapy as needed. We are able to provide pool therapy that assists in building strength and relieving pain. In addition, we provide Lymphedema therapy, and Accelerated Care Plus therapy providing evidence based clinical programs in; dysphagia, fall prevention & balance, cardiopulmonary, continence improvement, Neuro Rehab, orthopedics, pain management and wound management with state-of-the-art equipment

CMS 5 Star Rating

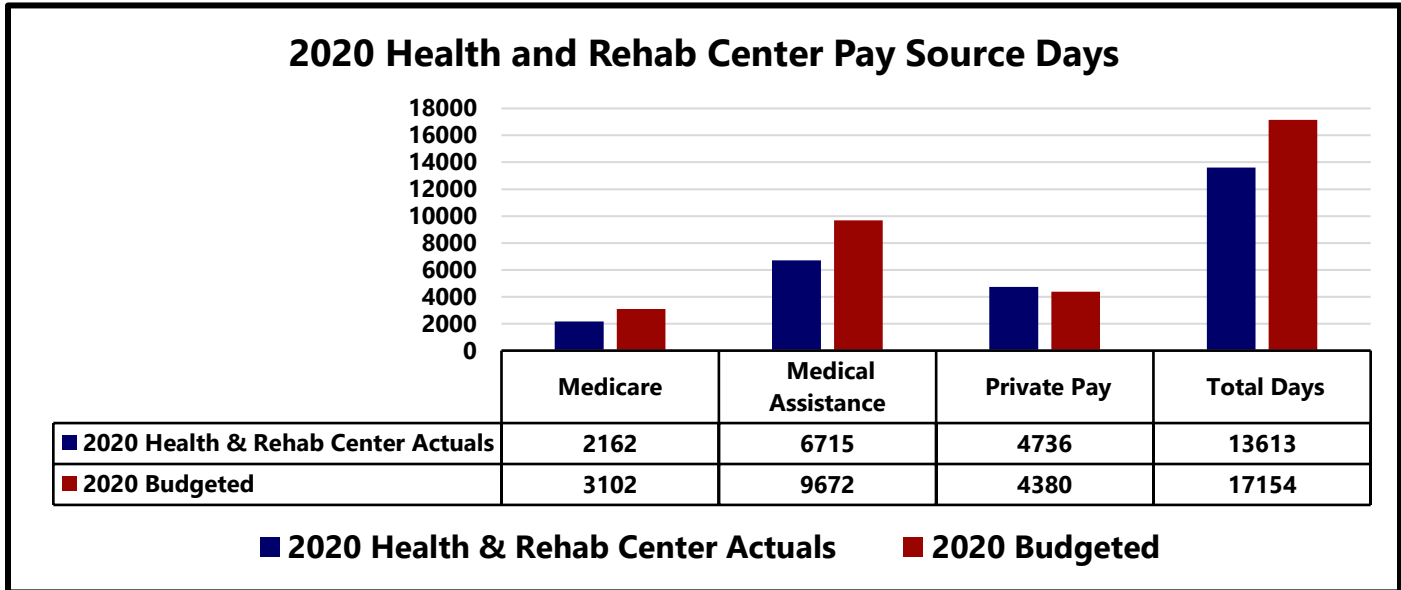
CMS 5 Star Rating	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Target Rating
2018	5	5	5	5	5
2019	5	5	5	5	5
2020	5	5	5	5	5

Skilled Nursing Census Data

Health and Rehab Center (Skilled Nursing) Data		
	*Annual Number of Admissions	Average Daily Census
2018	70	46.99
2019	86	44.32
2020	84	37

*New Admissions are labor intensive, as they require thorough review of medical records, insurance status and nursing assessments.

Budgeted Days per Facility



Facility	2020 Budgeted Days	2020 Actuals Private Pay	2020 Actuals Family Care	2019 Budgeted Days	2019 Actuals Private Pay
Kitty Rhoades Memorial Memory Care Center *	1,939	425	-	1,939	1,481
Orchard View Terrace *	7,576	5,236	2,311	7,576	4,827

Health Care Campus Outpatient Rehabilitation Statistics

	Outpatient Clients Served	*Units Billed
2017	25	1,038
2018	33	3,204
2019	31	2,756
2020	23	1,368

* Unit equals 15 min. of billable time