

**Chippewa County
Health & Human Services Board
Regular Meeting
December 18, 2025
Chippewa County Courthouse, Room 302
7:45 AM**

1. Call to Order

The Chair called the meeting to order at 7:45 AM

2. Roll Call

Members Present:

Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Marcia Kyes, Harold Steele

Members Absent:

Robert Bullwinkel, MD

Others Present:

County Administrator Andy Albarado; Human Services Staff: Bobbie Jaeger, Brandi Engel, Paul Brenner, Serena Schultz, Nichole Velie, Kyra Secraw, and Sarah Zielke; Public Health Staff: Brittnay Fortuna, Audra Knowlton, Sarah McQuillan, Allie Isaacson, and Tori Lammar

3. Members of the Public Wishing to Be Heard

(Comments will be limited to 5 minutes per speaker.)

There were no members of the public wishing to be heard.

4. Consent Agenda

(Unless separation of an item is requested, all items will be adopted under one motion.)

Motion:	Approved
Result:	Passed (8 - 0)
Mover:	Harold Steele
Second:	James Ericksen
Ayes:	Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Marcia Kyes, Harold Steele
Nays:	None
Absent:	Robert Bullwinkel, MD

1. Approve the Agenda
2. Approve the Minutes - November 20, 2025
3. Schedule Next Meeting Date - January 15, 2026

5. Reports

1. Aging and Disability Resource Center Board Minutes - November 13, 2025

The November 13, 2025, Aging and Disability Resource Center Board minutes were shared with the Health & Human Services Board for informational purposes only.

2. Human Services Success Story - Children with Differing Abilities - Serena Schultz

Children's Long-Term Support (CLTS) Program Lead Worker Serena Schultz and Nichole Velie shared a success story regarding a consumer who received adaptive equipment, allowing him to hunt with his family.

They shared statistics on Down Syndrome, the effects of Down Syndrome on their consumer, and his interests. This consumer needed support to help with his vision while hunting. CLTS services include adaptive items and promote community inclusion. A purchase request was submitted for an Omega III Sight to be used with a rifle or bow while hunting. The goal was to provide the adaptive technology needed to allow him to participate in his favorite sport, hunting. The consumer has used the Omega III Sight several times, including on guided hunts, and was granted, by the USSA, a governor's tag to hunt elk in New Mexico. He had an amazing father-son experience and was successful at shooting an elk.

3. Human Services Director's Program and Financial Report - Bobbie Jaeger

Human Services Director Bobbie Jaeger presented the Human Services Program and Financial Report. Jaeger highlighted several items from her report:

- Reminders were sent to businesses that partner with the FoodShare program that they must resume accepting QUEST cards at registers.
- Congress passed a Continuing Resolution funding the SNAP program until the end of September 2026.
- Reviewed the goals of the Behavioral Health PAC, Child Welfare PAC, Income Maintenance PAC, and the Long Term Care PAC.
- Mental Wellness & Recovery Division Manager Tom Diel is retiring in January after 31 years of service. Lisa Hudson will transition to the Manager position.

A discussion was held on the accessibility of support groups and resources for children with special health care needs.

4. Public Health Director's Program and Financial Report - Brittnay Fortuna

Public Health Director Brittnay Fortuna presented the Public Health Program and Financial Report. Fortuna highlighted the following from her report:

- Administration – Staff are wrapping up flu billing, grant claims, and preparing grant budgets for the upcoming year.
- Community Health – Staff were involved in the implementation of Narrative 101 and just piloted the first Narrative 201 workshop, respiratory disease updates, informed of a pediatric child death and a positive pertussis case in Chippewa County, and Communicable Disease data.
- Environmental Health – Passed EPA/DATCP Bacteria Sampling audit, Bre updated policies and procedures, completed the Nitrate Lab audit, and will receive results within 90 days, Environmental Health numbers for the month. A discussion was held regarding Tourist Rooming House licensing and adding specific monthly facility inspections at the top of the Environmental Health web page.
- Nutrition – Congress passed a bill to end the government shutdown, including fully funding WIC for fiscal year 2026, reviewed the Farm Fresh Produce program and Farmers Market Nutrition program end-of-year statistics.
- Planning & Strategy – Continuing to move through Reaccreditation, reviewed the Domain Dashboard, CRC wrapped up accepting applications for the Essential Resource Purchase Program, Chippewa County Healthy Communities will meet in-person on February 11, Pathway to Health Action Team received money from Marshfield Clinic for food access, and Voices in Prevention Action Team received money from Marshfield Clinic for their coaster

campaign.

5. Human Services 2025-2027 Strategic Plan Updates - Bobbie Jaeger

Human Services Director Bobbie Jaeger presented updates to the 2025-2027 Strategic Plan, emphasizing the goals and progress for the divisions. A significant amount of work has been completed to date.

6. Business Items

7. Agenda Items for Future Consideration

County Administrator Andy Albarado informed the Board that they have the opportunity at any time to change the meeting time to accommodate member schedules.

8. Adjourn

The meeting adjourned at: 08:55 AM

Result:	Passed (9 - 0)
Mover:	James Ericksen
Second:	Lee Hennick
Ayes:	Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Robert Bullwinkel, MD, Marcia Kyes, Harold Steele
Absent:	

**Chippewa County
Health & Human Services Board
Regular Meeting
November 20, 2025
Chippewa County Courthouse, Room 302
7:45 AM**

1. Call to Order

The Chair called the meeting to order at 07:45 AM

2. Roll Call

Members Present:

Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Marcia Kyes, Harold Steele

Members Absent:

Robert Bullwinkel, MD

Others Present:

County Administrator Andy Albarado; Human Services Staff: Bobbie Jaeger, Brandi Engel, Paul Brenner, Sarah Zielke, Sydney Kwaliek; Public Health Staff: Brittnay Fortuna, Audra Knowlton, Sarah McQuillan, Allie Isaacson, Jenny Lenbom; UWEC Nursing Students-Team A: Riley Borka, Mya Bohman, Grace Rosenau, Bridget Meyer, Team B: Brandon Voelker, Bella Hardy, Austin Boesl, Trisha Lefebber, Instructor Cassandra Ndlovu.

3. Members of the Public Wishing to Be Heard

(Comments will be limited to 5 minutes per speaker.)

There were no members of the public wishing to be heard.

4. Consent Agenda

(Unless separation of an item is requested, all items will be adopted under one motion.)

Motion: Approved

Result: Passed (8 - 0)

Mover: Marcia Kyes

Seconder: James Meinen

Ayes: Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Marcia Kyes, Harold Steele

Nayes: None

Absent: Robert Bullwinkel, MD

1. Approve the Agenda
2. Approve the Minutes - October 16, 2025
3. Schedule Next Meeting Date - December 18, 2025

5. Reports

1. Public Health Success Story - Administration - Audra Knowlton

Administrative Assistant Audra Knowlton is the lead for the Wheelchair Loan Closet Program. She gave a brief follow-up from last month's presentation. The Wheelchair Loan Closet has had a significant impact on our community by providing temporary mobility support to Chippewa County residents. A key factor in the program's success is the personalized service each resident receives. Knowlton shared a story highlighting the personal care our residents receive, along with written feedback from several residents expressing their gratitude for the program. The program is very rewarding. Taking time to ensure residents are equipped with the correct wheelchair makes all the difference.

2. Human Services Policy, Practice, and People - Foster Care - Sydney Kwallek

Foster Care Coordinator Sydney Kwallek has been in this role for a year and a half. She reviewed the types of homes, including general foster homes, respite care, kinship homes, and child-specific foster homes. The number of current homes includes 29 foster homes, 9 respite homes, and 69 kinship homes located throughout the county. Kwallek highlighted information on licensing requirements, statistical data, and her responsibilities for home case management. Services include training and resources, a support group, a holiday party, foster care appreciation month in May, summer picnic, and kinship care appreciation month in September. Kwallek works on obtaining donations and grants to support foster care parents and children. Follow them on Facebook @ChippewaCountyFosterCare.

3. Human Services Director's Program and Financial Report – Bobbie Jaeger

Human Services Director Bobbie Jaeger presented the Human Services Program and Financial Report. Jaeger highlighted several items from her report: thanking staff celebrating November work anniversaries, ending of the government shutdown, significant increase in the Great River Income Maintenance call center volume, Children's Long Term Support (CLTS) average wait time decreased from 67 to 63 days, ADRC is busy with Medicare open enrollment, staff are meeting with residents to provide alternative health insurance options since Mayo dropped the United Health Care Advantage Plan, and Birth-to-Three completed the MetaStar annual review. Jaeger reviewed Child Protective Services data, Foster Care Drive update, Child Protective Services and Youth Justice had their Triennial visit with the State. The work that is being done is impressive. Congratulations! Youth Justice has five out-of-home placements.

There will be a change to the dashboard. Each measured area will have an arrow to indicate whether the data increased or decreased. Two sets of seats were installed in the hallway on the third floor to accommodate the long walk from the Human Services reception desk to the elevator.

4. Public Health Director's Program and Financial Report – Brittnay Fortuna

Public Health Director Brittnay Fortuna presented the Public Health Program and Financial Report. Fortuna highlighted several items from her report: Flu/COVID clinics wrapped up, administered 711 flu mist and 189 injectable doses at school districts, gave about 1,340 vaccines to the community, and Nurse Family Partnership updates.

The UW-Eau Claire Bachelor of Science in Nursing Program students focused on youth and the elderly this semester. Team A surveyed youth in middle and high schools, set up intervention tables at the schools, and provided preparedness education. Team B focused on the elderly and worked with the Aging and Disability Resource Center. They surveyed seniors in Chippewa Falls and Bloomer. They set up a table at the Bloomer Senior Center to provide preparedness education and will provide preparedness education in Chippewa Falls.

Fortuna also highlighted the Maternal and Child Health Summit, JoAnna spoke at the Youth Advisory Council, communicable disease data, welcomed Mia Lia Vang as the new Environmental Health Specialist, Bre and Reggie are working on the water lab and preparing for Nitrate certification, and Kyle recertified in Lead assessments. The SNAP benefits are loaded on cards and ready to go. Staff are working with Feed My People and local food pantries to maintain sustainability, working with partners to locate formula resources, WIC caseload continues to increase with 978 participants, Farm Fresh Produce Program update, and the Red Cross Blood Drive is on December 11. Planning and Strategy continue to work on reaccreditation, and the Children's Resource Center launched the Essential Resource Purchase Program to apply for kits to support needs.

Past Public Health Director Jen Rombalski attended training with Public Health staff and complimented the department on their work and initiatives. She now works for the State. Rombalski mentioned that the department is a leader in the state as a model for some programs and services.

5. Update on Agenda Management Software and Notifications - Brandi Engel/Audra Knowlton

Engel demonstrated the steps for Board members and the public to sign up to receive meeting notifications on the new County website.

6. Business Items

7. Agenda Items for Future Consideration

8. Adjourn

Result:	Passed (9 - 0)
Mover:	James Ericksen
Seconder:	John Halbleib
Ayes:	Kari Ives, Lee Hennick, James Ericksen, James Meinen, Dennis Bachman, John Halbleib, Robert Bullwinkel, MD, Marcia Kyes, Harold Steele
Absent:	

The meeting adjourned at: 08:45 AM

	CWDA SUCCESS STORY SERENA SCHULTZ	

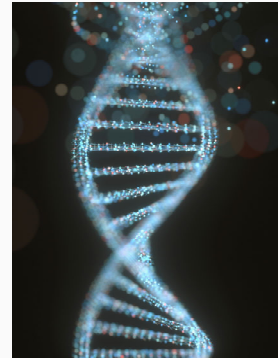
1

Children’s Long-Term Support Waiver Children's Long-Term Support (CLTS) Waiver Program makes Medicaid funding available to support children with substantial limitations due to developmental, physical, or severe emotional disabilities who are living in their home or community setting.	

2

Down Syndrome – Trisomy 21

- A genetic disorder caused by an extra (third) 21st chromosome
- No cause - mutation
- The most common chromosomal condition in the US (CDC, November 2024)
 - 1 in every 640 babies (CDC, November 2024)
 - Diagnosed before or at birth



3

Down Syndrome – Trisomy 21

- Varying severity
- Effects:
 - Lifelong intellectual disability and developmental delays
 - Other medical conditions, including heart defects, vision issues, respiratory concerns, and gastrointestinal problems



4

	Developmental delays Poor balance/coordination Speech delay High BMI – tires easily Intellectual delays – not at grade level Vision concerns – wears glasses
	Effects On My Consumer

5

	My Consumer
	-Loves being outdoors: boating, camping, fishing, hunting -Not involved in any fall or winter extra-curricular activities other than hunting -Difficulties with typical hunting gear due to vision -At the end of 2023, family requested adaptive equipment to allow consumer to fully and safely participate in the sport of hunting

6

CLTS Services

Adaptive Items

Promote
community
inclusion

- Outcome directly related to disability
- Cannot duplicate services/items
- Cost-effective
- Preferences taken into consideration

7

CLTS Purchase Request

- **Omega III Sight** – adaptive hunting accessory
- Item Description: The 5-dot independently adjustable mil dot on the Omega III Sight reticles to any yardage for quick, confident aiming. The Omega III features a precision rangefinder (500m) with integrated true distance calculator and power zoom (2X-6X). Capture the action using HD video recording with instant playback. LCD screen dimmer (no backlighting). Advanced mounting system. Omega III Sight includes 12-hr. rechargeable lithium-ion power bank, remote control, two 3V batteries, and 32GB microSD card. Length: 5.5". Weight: 13 oz.



8

	CLTS Purchase Request • Outcome: Consumer really enjoys hunting with his family; however, it is difficult for consumer to coordinate closing one eye and focusing while looking through the scope to safely aim. The Omega III Sight can be put on a bow or gun and displays the scope onto a screen so both consumer and dad/hunting guides can see as well to assist. • CLTS Service: <i>Assistive Technology</i> – “items, pieces of equipment, software…that increase, maintain, or improve functional capabilities of participants at home, work, and in the community… Allowable devices increase, maintain, or improve the child’s functional capabilities. Allowable devices and services help the participant to decrease reliance on staff; increase personal safety; enhance independence; and improve social and emotional well-being)” (4.6.2.1, CLTS Waiver Manual, Oct 2025). • Staffed and approved

9

	Since Omega III Sight was Purchased...
	• Used multiple times when hunting with dad/family – deer, turkey • Used on guided hunts through United Special Sportsman Alliance, Inc. (USSA) • USSA “is an all-volunteer 501(c)(3) non-profit wish-granting charity specializing in sending critically ill and disabled youth and disabled veterans on a free outdoor adventure of their dreams” (childswish.org) • USSA sponsored deer hunting trips and a fishing trip • Sept 2024 USSA partnered with Gresham Bear Guide Services

10



Verbal and written release of information was received to share photo

Oct 2025 USSA coordinated a trip to New Mexico

Granted a governor's tag to hunt elk – USSA granted tag

Hunted with 8 guides over a 5-day period

Have inspired guides to purchase this/similar items as well to accommodate others

Amazing father-son bonding experience; met several new friends along the way

Best thing about the trip? "Meeting all the people." Worst part? "Saying goodbye."

Will continue to utilize the Omega III Sight in future hunts

11

		
	THANK YOU	

12

Human Services Director's Report

Board Meeting Date: December 18, 2025

WCHSA Updates

Division of Children and Families (DCF) and CYF PAC

- Delayed issuance of contracts is due to late notice of federal funding awards and continuing discussions about contract language. DCF will be adding a new appendix as reference that serves as a resource list for county agencies to identify confidentiality and data security requirements, standards and safeguards currently mandated by existing county contracts, state regulations and federal requirements. This list is a reference when considering or assessing the use of artificial intelligence (AI) systems.

Division of Health Services (DHS)

- The Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) and the Wisconsin Department of Health Services (DHS) remind Wisconsin businesses who have signed up for the FoodShare program that FoodShare recipients have had funding legally loaded onto their cards and businesses cannot turn away members using QUEST cards at registers.
- On November 12, U.S. Congress passed a Continuing Resolution (CR) which the President signed into law that ended the shutdown and reopened the federal government. The Continuing Resolution (CR) funds portions of the federal government through January 30, 2026, while providing full funding for some key operations for the remainder of the federal fiscal year. Fortunately, the CR included full funding for SNAP and WIC benefits, therefore, DHS does not anticipate any further disruptions of FoodShare or WIC benefits for the remainder of the federal fiscal year (September 30th, 2026).

Behavioral Health PAC

Goals for 2026

1. Continue advocacy for full state funding of Crisis and CSP services. Carry on efforts to educate legislators about the need for full state funding and build alliances with stakeholders to support full state funding in the 2027-29 state budget.
2. Continue work with DHS to support implementation of Crisis Care Facilities, including the Medicaid benefit for services.
3. Continue work with DHS to monitor progress of federal waiver request to allow Medicaid reimbursement for mental health treatment of adults in IMD facilities.



4. Once the IMD waiver is approved, work with DHS to review Family Care MCO responsibility for IMD placement costs for persons that no longer need active treatment.
5. Work with DHS on implementation of Psychiatric Residential Treatment Facilities (PRTFs), including the licensing rules and Medicaid benefit for services. *Joint project with Children Youth and Families PAC.*
6. Work with DHS on Family Care services for persons with behavioral health needs, including more guidance for enrollment of persons with behavioral health diagnoses and clarify MCO responsibility to serve enrolled members with behavioral health conditions. *Joint project with Long Term Support PAC*
7. Continue work with DHS to analyze factors contributing to MHI rate increases and develop long term strategy to limit the impact of rate increases on counties.
8. Reach out to the Office of Insurance Commissioner to discuss private health insurance reimbursement for county behavioral health services.
9. Work with DHS and MHAP Coalition to identify data sources that can be used to analyze emergency detention trends.

Child Welfare PAC

Goals for 2026

1. Continue to discuss serving children with behavioral health needs, including greater use of Medicaid for children with complex needs. *Joint project with Behavioral Health PAC.*
2. Advocate for expansion of subsidized guardianship, including making youth justice cases eligible, in the 2027-29 state budget.
3. Advocate for an increase in Children and Families Aids (CFA) program in the 2027-29 state budget, including work with DCF to address the structural deficit in Title IV-E foster care revenue for the CFA.
4. Continue work with DCF to develop fiscal procedures to claim Title IV-E prevention service revenue for qualified services paid for by counties. Explore IV-E prevention service claiming opportunity for Motivational Interviewing.
5. Continue to monitor legislative interest in referrals to child support for out-of-home care cases.
6. Work with DCF to make recommendations for how to expand the services needed/not needed option to counties statewide.
7. Continue work with DCF to review retention of child protective service records and explore how old records could be purged.
8. Advocate for cap on the juvenile corrections rate charged to counties and reform of how juvenile correctional services are funded in the 207-29 state budget. Monitor how implementation of new Type 1 facilities will affect the juvenile corrections rate.
9. Work with DCF on use of federal Promoting Safe and Stable Families (PSSF) funding increase authorized by the Strengthening America's Children and Families Act once the additional federal funds are appropriated.
10. Continue to discuss residential provider capacity and rates, including reforming use of extraordinary child-specific rates by providers.
11. Review workload impacts of child welfare and youth justice policies to limit



Income Maintenance PAC

Goals for 2026

1. Advocate for additional state IM funding to offset the impact of the HR 1 reduction in federal SNAP administrative revenue.
2. Work with DHS to implement the HR 1 expansion of SNAP work requirements.
3. Work with DHS to reduce SNAP (FoodShare) case errors to keep the Wisconsin SNAP error rate below the 6% threshold established by the HR 1 that will trigger the state becoming responsible for a share of SNAP benefit costs.
4. Work with DHS to prepare for implementation of the HR 1 Medicaid work requirement in 2027.
5. Continue work with DHS to explore how to use new technology, including artificial intelligence tools, to better serve IM benefit recipients. Assess how new technology will affect the future of IM operations to help IM consortia do local long-term planning.
6. Negotiate the 2027 IM contract with DHS to address IM consortia concerns.
7. Advocate for additional IM Administration funding. Pursue IM Administration funding request for the 2027-29 state budget, taking IM caseload, workload and operational costs into account.
8. Continue work with DHS to make IM training for new workers more flexible for when workers can start in training cohorts and include additional content in the training.
9. Support state legislation to restore the option for persons acting responsibly to sign Medicaid applications on behalf of incapacitated persons.
10. Work with DHS to support IM consortia managers to use the IM worker productivity dashboard to better manage IM consortia operations. Recommend improvements to the IM worker productivity dashboard.
11. Support state legislation to make certain types of childcare recipients, such as foster parents, categorically eligible for Shares childcare.
12. Continue working with DCF to improve the effectiveness of the Child Care Advisory Committee so the committee has an active role in making childcare policy recommendations.
13. Work with DCF to explore how IM agencies can make greater use of the childcare parent portal for Shares childcare cases.

Long Term Care PAC

Goals for 2026

1. Make recommendations for CCOP program to use funds more effectively and reduce spending disparities across counties by providing more equitable allocations.
2. Work with DHS to make recommendations for renewal of the federal CLTS waiver, including recommendations for CLTS service rate increases and revising CLTS service categories.
3. Work with DHS to make recommendations to better support transition of youth from CLTS to adult services, including roles of CLTS agencies, income maintenance agencies for Medicaid eligibility, ADRCs for adult functional eligibility and Family Care MCOs for service continuity.
4. Continue advocacy to eliminate the CLTS MOE.
5. Continue advocacy for additional state funding for APS and building APS service capacity.
6. Continue advocacy for additional state function for ADRCs.
7. Continue advocacy for additional state funding for the Birth to 3 program.



Department and Division Updates

Department Updates

Work Anniversary CONGRATS and THANKS to the following staff for their service and dedication:

- Erika Stevens, ADRC – 9 Years
- Cassie Houlihan, WRRWC – 1 Year
- Libby Leinenkugel, ADRC – 1 Year

Division Updates

Aging & Disability Resource Center (ADRC)

- We have temporarily paused new enrollments in the Home Delivered Meals program due to reduced 2025 federal funding, fully used county levy dollars, and the end of ARPA funds. Rising costs and growing demand have outpaced available resources, making this a difficult but necessary step. Referrals will continue, with new enrollments resuming in 2026 through a prioritization process based on need. We remain committed to serving our community and are evaluating options for 2026 to maximize our reduced resources and support the most vulnerable.
- With the winter and holiday season underway, we are already seeing the expected rise in calls from families seeking information on resources. Many reach out when they notice changes in a loved one's well-being, while others call proactively out of concern for another winter at home. These conversations often require tactful guidance on self-determination and dignity of risk—skills our Options Counselors handle expertly. This year, with one Options Counselor position vacant, our team is managing a tighter workload during an already busy season, and we are actively recruiting, accepting applications through December 16.
- As we prepared our year-end transportation recap and submitted the 85.21 grant application to the DOT for 2026, ridership data shows that wheelchair-accessible rides increased 12% over 2024, while overall trips saw a modest decline. For the full year, we estimate 2,600 non-wheelchair and 500 wheelchair-accessible one-way rides, totaling over 127,000 miles driven. About 80% of these trips were for medical purposes. We continue to work closely with our transportation partners to meet the community's evolving needs.

Children, Youth & Families (CYF) Division

Birth to Three (B-3)

- Birth-to-Three saw a decrease in referrals for the month of November; the team only received twelve referrals for the entire month. The Birth-to-Three team is fully staffed at this time, but a Speech Therapist will be going on maternity leave in January 2026, which will cause an increased workload for the other team members.



Children, Youth & Families (CYF) Division

Child Protective Services (CPS)

- In November 2025, the Department received forty-nine reports alleging Child Abuse and/or Neglect; of those reports, eight met the State Statute definition to screen-in to complete an assessment or offer services.
- In November 2025, no children were removed.
- After a busy October, in November 2025, the unit did not close any children's cases or reunify any children.
- As of December 1, 2025, only eleven children are in out-of-home care!

Children, Youth & Families (CYF) Division

Children with Differing Abilities (CWDA)

- Staff continue to work on learning the changes made to Avatar and support each other through their own experiences.
- The CWDA Team completed their final session of the Strengths Finder session in November that highlighted how team members individual strengths can best be used to have a more efficient and positive team.

Children, Youth & Families (CYF) Division

Youth Justice (YJ)

- The Youth Justice team made the decision to add Moral Reconation Therapy (MRT) to the collection of skill building groups we provide to our youth. Groups will be weekly December through March.
- Case intensity is keeping all staff busy. There are many high needs youth who we are working diligently to prevent out of home placement whenever possible.

Economic Support (ES) Division

- November 1-January 15, 2026 is open enrollment for the Marketplace Insurance. Economic Support is seeing an increase in applications this month due to applications from the Marketplace being referred to local agencies for eligibility determinations.

Mental Wellness & Recovery (MWR) Division

- With great excitement the MWR Division is pleased to announce that Lisa Hudson will transition into her new role as the manager of the MWR. Lisa has been with the County for past 7 years. During this time, she's been a service facilitator for the CCS program, has clinically overseen the CSP, Crisis and CCS programs. Lisa's passion is providing high quality community mental health service. She looks for opportunities to improve efficiency in how services are provided, at the same time focusing on emotional wellness of team members.



- 2025 has been a challenging year for Adult Protective Services (APS). As the county's aging populations continue to expand, we are seeing people live longer, not always healthier. There is a trend of needing to complete urgent guardianship from local hospitals as patients seeking urgent care are determined to be incapacitated and need a legal decision maker for health care. Efforts to educate the community on being proactive to complete POA continue in partnership with the ADRC.
- On personal note, I would like to thank the Human Service Board and Leadership Team for its unwavering support to allow this division to be proactive and think outside the box when comes to developing innovative ways to address the mental health needs of our community. I am extremely grateful to be a part of this organization over the years!



2025 Monthly Fiscal Information

Through Month of: November 2025

2025 Budget (Total is \$37,539,226): \$34,410,948 **Prorated – 11 months**

Expenses Paid (Through Nov. 30): 28,001,063

Variance to Budget: \$6,409,885

Note: The November Over/(Under) amounts are an estimated annualized amount for each placement category. Prior months estimated amounts are shown to indicate if expense variances are trending up, down, or remaining the same.

2025 Kinship Placement with a Relative

Month	Kinship	Projected Cost	2025 Grant Amount*	Over/(Under)
January	80	\$351,072	\$454,500	(\$103,428)
February	77	340,536	454,500	(113,964)
March	77	347,772	454,500	(106,728)
April	75	338,960	454,500	(115,540)
May	75	335,534	454,500	(118,966)
June	75	334,152	454,500	(120,348)
July	72	334,356	454,500	(120,144)
August	74	331,860	454,500	(122,640)
September	75	329,280	454,500	(125,220)
October	76	329,876	454,500	(124,624)
November	77	330,984	454,500	(123,516)

2025 Children and Youth in Out-of-Home Placements

Month	Out of Home*	Out of Home**	Projected Cost	2025 Budget	Over/(Under)
January	29	0	\$1,365,828	\$1,046,000	\$319,828
February	31	0		1,046,000	
March	31	0	1,785,004	1,046,000	739,004
April	28	3	2,106,305	1,046,000	1,060,305
May	27	0	2,006,351	1,046,000	960,351
June	30	0	1,989,873	1,046,000	943,873
July	30	0	1,951,154	1,046,000	905,154
August	28	0	1,862,948	1,046,000	816,948
September	28	0	1,824,437	1,046,000	778,437
October	29	0	1,776,784	1,046,000	730,784
November	28	0	1,586,772	1,046,000	540,772

*Children and Youth in Placement: Foster Care, Treatment Foster Care, Group Home, Residential Care

**Additional children placed with relatives (unpaid)



2025 Adult Mental Health CBRF Out-of-Home Placements

Month	Out of Home	Projected Cost	2025 Budget	Over/(Under)
January	13	\$281,328	\$479,041	(\$197,713)
February	15	399,708	479,041	(79,333)
March	12	474,756	479,041	(4,285)
April	15	457,618	479,041	(21,423)
May	20	492,574	479,041	13,533
June	15	492,340	479,041	13,299
July	11	418,408	479,041	(60,633)
August	10	397,608	479,041	(81,433)
September	13	402,676	479,041	(76,365)
October	14	426,840	479,041	(52,201)
November	11	422,382	479,041	(56,659)

2025 Institute for Mental Disease (IMD) Placements

Month	Inpatient Days	Projected Cost*	2025 Budget	Over/(Under)
January	161	\$1,090,296	\$878,000	\$212,296
February	100	751,591	878,000	(126,409)
March	146	852,716	878,000	(24,284)
April	152	1,079,421	878,000	201,421
May	115	1,048,961	878,000	170,961
June	136	1,130,311	878,000	252,311
July	111	1,077,921	878,000	199,921
August	153	1,125,826	878,000	247,826
September	104	1,081,054	878,000	203,054
October*	122	1,051,720	878,000	173,720

*October IMD is the most recent invoice received



Note: The following reports show monthly disbursement amounts for each placement category. The month shown is the month the invoice was paid (not the month the charge was incurred).

2025 Kinship

Month	Amount Paid	Monthly Grant Amount
January	0	\$37,875
February	28,058	37,875
March	28,734	37,875
April	27,902	37,875
May	27,326	37,875
June	27,882	37,875
July	27,280	37,875
August	26,410	37,875
September	25,928	37,875
October	27,512	37,875
November	28,784	37,875
Total	\$275,816	\$416,625

2025 Children & Youth Placements

Month	Amount Paid	Monthly Budget
January	0	\$87,167
February	134,373	87,167
March	82,173	87,167
April	189,086	87,167
May	254,735	87,167
June	155,431	87,167
July	159,577	87,167
August	126,386	87,167
September	207,575	87,167
October	25,022	87,167
November	(12,047)*	87,167
Total	\$1,322,311	\$958,837

*Expense decrease in November. Allowable placement costs were claimed to the Promoting Safe and Stable Families grant.



2025 Adults in CBRF Placement

Month	Amount Paid	Monthly Budget
January	0	\$39,920
February	17,553	39,920
March	49,898	39,920
April	24,651	39,920
May	43,143	39,920
June	27,472	39,920
July	34,368	39,920
August	54,574	39,920
September	42,547	39,920
October	36,296	39,920
November	56,681	39,920
Total	\$387,183	\$439,120

2025 IMD

Month	Amount Paid	Monthly Budget
January	0	\$73,166
February	0	73,166
March	99,603	73,166
April	35,034	73,166
June	79,404	73,166
July	351,114	73,166
August	63,633	73,166
September	128,936	73,166
October	86,106	73,166
November	71,291	73,166
Total	\$915,121	\$804,826





GRC

Calls Received:

13,314↑

October



GRC Average

Speed of Answer:

2.20 Mins↑

Contract Requirement: ≤10 Minutes
October



GRC

FNS Error Rate:

5.93% ↓

State FNS Error Rate: 7.28%
Contract Requirement: Below 6%
Data current: October '24 – June '25

Crisis Reports

July-Sept.

216

YJ Referrals

September

29↑

IMD Expenditures

January-October

Children: \$96,296
Adults: \$780,137
Total: \$876,433

CPS Reports

November

49 ↓

GRC Cases

October

50,534↓

B-3 Referrals

November

13↓

Meals Served

October

3,364↑

Benefit Specialist

Monthly Contacts

October

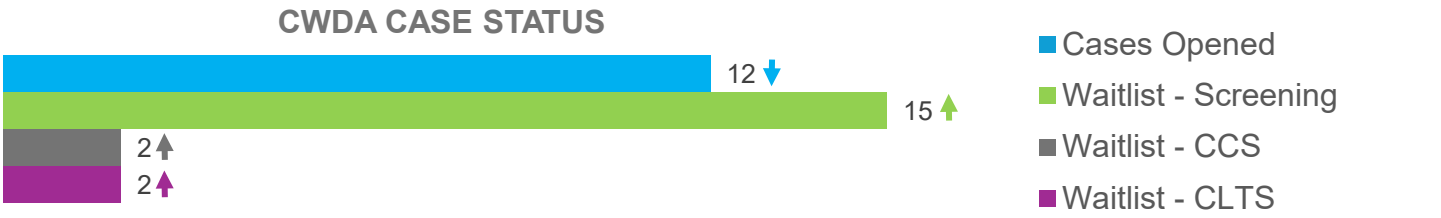
220↓

Options Counselor

Monthly Contacts

October

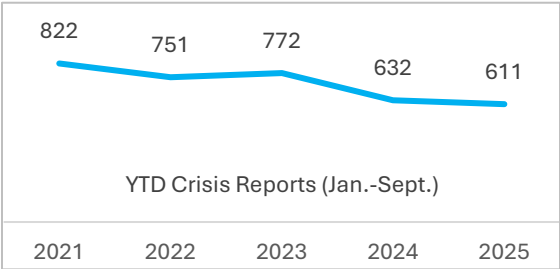
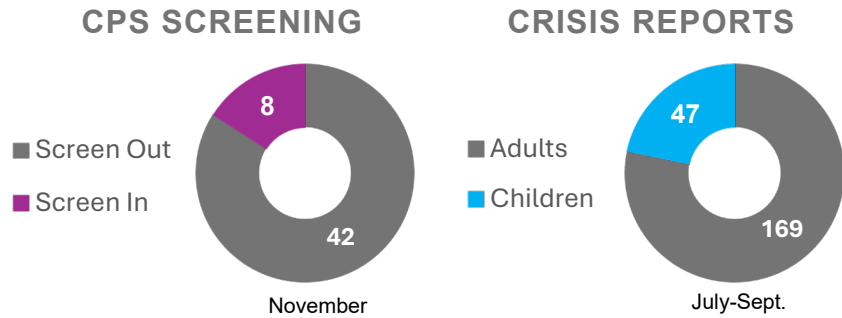
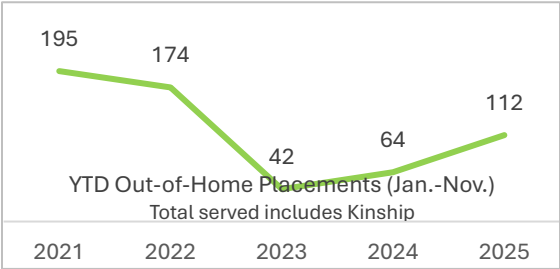
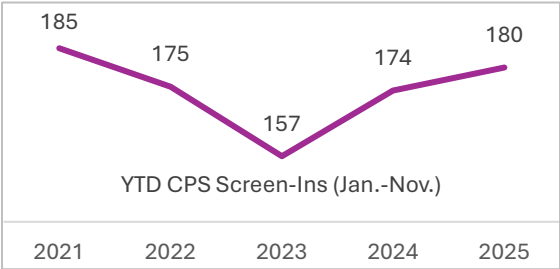
198↑



CPS Caseload	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE
IA	6	8	3	5					
Ongoing					7	5	5	4	14

WCHSA Caseload Recommendations
Initial Assessments: 11 cases per worker with no more than 6 new assessments per worker per month
Ongoing: 10 cases per worker with no more than 15 children per worker

YJ Caseload	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	0.5 LTE
Ongoing		14	11	16	5	9
Deferred Agreements	17				2	





Administration Division

As we approach year-end, the Fiscal Administration team has finalized various activities and laid the groundwork for a successful start to 2026. We are wrapping up flu billing, finalizing grant claims, completing annual reports, and preparing grant budgets for the upcoming year.

The team participated in a mindfulness teambuilding activity with Christy Langman in Bloomer. The team focused on stress-relieving tools for work and personal life, especially as we enter the holiday season. We were reminded to take some time to notice the awe around us.

Our team remains committed to supporting the community. We continue to assist with scheduling appointments, providing support with clinics, Breastfeeding Peer Counseling, wheelchair loans, water sample testing program, creating folders and agendas for the 2026 department meetings, and providing car seats and safety education to families in need.

Community Health Division

Narrative Training Leadership & Pilot Project

Our department continues to play a key leadership role in advancing narrative-based public health practice in Wisconsin. From the very beginning, we have been actively involved in the co-creation and implementation of narrative training, starting with the original Narrative 101 series and now helping to design and pilot the first-ever Narrative 201 workshop.

The Narrative 101 training emerged in response to growing polarization surrounding critical public health topics, including vaccines, harm reduction, water, and health equity. As these issues became increasingly politicized, traditional data-driven communication alone was no longer enough to reach audiences or build understanding. Narrative 101 was designed in partnership with other Local and Tribal health departments in the Western Region to introduce public health professionals to the foundational skills needed to communicate across differences, build trust, and frame complex topics in ways that reflect lived experiences and shared values.

We participated in Narrative 101 as a department, and later offered it again to our team, deepening our skills and reaffirming our belief that narrative is essential to the future of public health. This work reinforced something we know to be true: bringing people together, communicating clearly, and meeting communities where they are is more important than ever.

Building on this foundation, we again partnered with the Wisconsin DHS Office of Policy and Practice Alignment to co-create and pilot the state's first Narrative 201 workshop, a step forward that no other county in Wisconsin has yet undertaken. While Narrative 101 provided the "why" and fundamental

concepts, Narrative 201 focuses on the “how” by guiding participants through collaborative strategy sessions, power mapping exercises, and hands-on planning.

This 3-hour session blended narrative practice, health in all policies, data science, and communication strategies to support our public health staff in developing actionable plans around a focus area. For our pilot, we worked on addressing vaccine hesitancy, which sparked meaningful discussion and produced a tailored action plan grounded in trust-building, relationship development, and values-based messaging.

Participating in and helping shape this initiative has been energizing and affirming. It strengthened our commitment to open communication, community trust, and navigating uncertainty with integrity. We are proud to be at the forefront of this innovative statewide effort and look forward to continuing to advance narrative practice as a powerful tool in improving public health outcomes.

Welcome Brooke

We are pleased to welcome Brooke Krumenauer to the Community Health team as our new Public Health Nurse. Brooke joins us from the Planning and Strategy Division, where she served as the Medical Services Screener. In her new role, she will lead our Maternal Child Health program, serve as the PNCC lead, assist with immunizations and reproductive health services, and support various other department initiatives. We are thrilled to have her on board and look forward to the expertise and energy she brings to our work!

Respiratory Season Updates

October and November are primary months for providing Influenza and COVID-19 vaccinations to the community. Our outreach efforts included offering vaccinations across all public-school districts, four Long-Term Care facilities, one food pantry, Courthouse Clinics, walk-in clinics at the health department, and the Chippewa County Highway Department. Additionally, five school districts requested vaccines for their staff, in addition to the free student vaccinations.

Schools are central gathering places for large groups of children, including those with underlying health conditions that may make them more vulnerable to serious illness. Not all families have the means to pay for vaccines, so offering free flu vaccines in schools ensures that every student has access to this important preventive measure. Last year, our team trained on and implemented sensory-friendly vaccination strategies, which we continue to use in our vaccination settings. This includes providing fidget tools, colorful band-aids, background music, and allowing parents to specify on consent forms how we could best support their child's needs, helping to make the experience as positive as possible. To accommodate different preferences, we offered flu vaccines in two formats—either nasal mist or injection—giving parents the option to choose the best option for their child.

In total, we administered 130 paid COVID-19 doses and over 250 paid flu vaccines. By the end of the season, we had administered over 900 free flu vaccines to students across the school districts. This vaccination effort involves many members of our department, including those who create flyers,

schedule appointments, update our website, the fiscal staff for their billing capabilities, the administration staff for their assistance on site at clinics, and, of course, the nurses who administer the vaccines.

Communicable Disease

The Health Officer is required by Wisconsin State Statute 252.05 to report information on current communicable disease reporting and follow-up to the Health and Human Services Board. In November, we received 72 new reports: 12 confirmed (2 Chlamydia, 2 Influenza, 2 Lyme Disease, and 1 COVID-19 Associated Hospitalization); 4 probable cases (4 Lyme Laboratory Reports); and 40 that did not meet the definition of a case (9 Lead-Blood Levels-Adult, 8 Hepatitis A, and 6 Lyme Laboratory Reports). See the attached report for further breakdown by disease type.

Environmental Health Division (EH)

Our EH team is now full! We welcomed Mai Lia as our new full-time licensing inspector. She has already been out in the field, engaging with our facility owners and community. Reggie has taken over the tourist rooming house licenses and has been completing routine inspections, as well as updating operators about the new code change happening in April 2026. This month has seen an increase in new business being built or new owners taking over existing businesses. The team completed four pre-inspections, with many others being communicated with and helping get licensed.

The water lab had a busy month prepping for our EPA/ DATCP Bacteria Sampling audit, followed by our nitrate lab certification, which happened on Tuesday, December 2. Our water lab passed the bacteria EPA audit with a few things to adjust to our procedures to be more efficient and save us money. The Nitrate lab audit went well and is undergoing review with a promise to be open to doing nitrate samples by the end of February 2026- hopefully sooner!

Environmental Health by the Numbers:

- 38 Licensing inspections completed
- 6 TN facilities were visited for annual samples
- 9 TN extra samples were collected due to recurring issues within the distribution system
- 4 private bacteria samples were analyzed

Nutrition Division

Women, Infants and Children (WIC) Program

On November 14, Congress passed a bill to end the 43-day government shutdown. The bill fully funds WIC for fiscal year 2026. It also protects WIC's cash value benefit for fruits and vegetables, rejecting proposed cuts that would have reduced families' access to nutritious foods.

New Proposed Rule on Public Charge Will Not Impact Access to WIC

On November 17, the Department of Homeland Security released a notice of proposed rulemaking outlining a plan to rescind the 2022 rulemaking that clarified and narrowed the definition of public charge. A public charge determination is a component of immigration law that allows federal authorities to deny legal status to individuals who are determined to primarily rely on government assistance. Public charge is only used for applications for visas or green cards. It is not used for applications for citizenship. This is a proposed rule. No changes go into effect while DHS reviews public comments and considers the final regulation.

The National WIC Association recognizes that changes in immigration policy can create confusion or concern for families. WIC is not considered in public charge determinations, and this proposal does not affect eligibility or participation.

Farm Fresh Produce Program and Farmers Market Nutrition Program (FMNP) Redemption Report

This year presented two major challenges with our FMNP Program. Decreased funding and a delayed start to issuance affected redemption rates both locally and statewide. Due to the reduced funding, we were encouraged to issue only one \$25 FMNP booklet per family. In addition, issuance began a month later than usual, giving us just three months instead of the typical four to distribute FMNP checks. By mid-August, we determined that our remaining supply would be sufficient through the end of the issuance period, so we began offering additional booklets to participants within the same family. In contrast, last year, all eligible and interested participants received a \$40 booklet.

Chippewa County continues to exceed the State average for FMNP redemption. Redemption rates for the Farm Fresh Produce Program were significantly higher than what we typically see with FMNP, likely because we were able to issue vouchers to any interested participant and had them available as early as June. This strong participation reflects both the appreciation participants and farmers had for this new program made possible through a generous donation, as well as the ongoing need for nutritious foods for families and continued support for our local farmers.

We would like to acknowledge and sincerely thank the donor who came forward to help offset the decrease and delay in FMNP funding. This contribution allowed participants to receive an additional \$25 to shop at Chippewa County farmstands and farmers' markets. WIC families and farmers were incredibly grateful for this support. Between FMNP and the Farm Fresh Produce Program, farmers redeemed a total of \$12,224 this season, helping to fill the income gap created by the reduction in FMNP funding. Thank you for your generous gift to improve the health and well-being of our families and to support our local farmers.

	Percent of vouchers/checks redeemed	Amount of vouchers/checks redeemed
Farm Fresh Program	60%	\$5,875
2025 FMNP (Chippewa County)	50%	\$6,349
2025 FMNP (State)	45%	\$460,470
2024 FMNP (Chippewa County)	51%	\$13,416

Open Enrollment for the federal Health Insurance Marketplace is underway!



Sign up for health insurance **starting November 1**



Open Enrollment is open until January 15!

Find a health plan that works for you — get free, local help at www.coveringwi.org or call 877-942-6837.

Planning and Strategy

Accreditation

Why We Maintain Accreditation?

Chippewa County Public Health holds two important designations that reflect both our capacity and our quality. As a Level III health department, the highest designation in Wisconsin, we meet the state's standards for staffing, infrastructure, and the full range of public health services. PHAB Accreditation builds on this, much like how trauma center levels and national verification work together in hospitals. Level III demonstrates we have the capacity to serve the community; PHAB Accreditation verifies that we do this work with consistent, high-quality systems grounded in national best practices.

Together, these designations show that our department is prepared, reliable, and operating at a level residents and county leadership can trust. Accreditation also strengthens our credibility with funders and partners. Many grants prioritize accredited health departments, which keeps our county competitive for funding that directly supports programs and services. It ensures that public resources are used responsibly and that our work is aligned across all divisions.

How Accreditation Supports Chippewa County?

- Enhances emergency readiness, ensuring we can respond quickly and consistently during outbreaks, environmental events, or other emerging concerns.
- Supports clear, credible communication, providing residents with accurate and timely information they can trust.
- Improves funding competitiveness, helping the county secure state and federal resources that support public health programs.
- Strengthens coordination across divisions, reducing duplication and improving the efficiency of county operations.
- Builds a culture of accountability and continuous improvement, with staff regularly reviewing programs and using data to guide decisions.
- Deepens partnerships with health care providers, schools, human services, law enforcement, and community organizations to extend our impact.

In short, accreditation is the framework that ensures our day-to-day operations are consistent, defensible, and high quality, and that Chippewa County is well positioned for both expected and unexpected public health needs.

Our Process and How to Read the Dashboard

To manage reaccreditation effectively, we are using agile project management principles that keep the work focused and manageable. Instead of spreading effort across all standards at once, staff work in short sprints that target specific PHAB domains, allowing for deeper progress and quicker problem-solving. Evidence moves through four simple stages—Not Started, In Progress, Ready for Review, Submitted—which helps us track workload and stay aligned with PHAB milestones. The dashboard below shows where each item currently sits and provides a clear snapshot of our progress.

Chippewa County PHAB Reaccreditation Dashboard



CHIPPEWA COUNTY
Public Health

Status: On Track



Not Started

77

In Progress

6

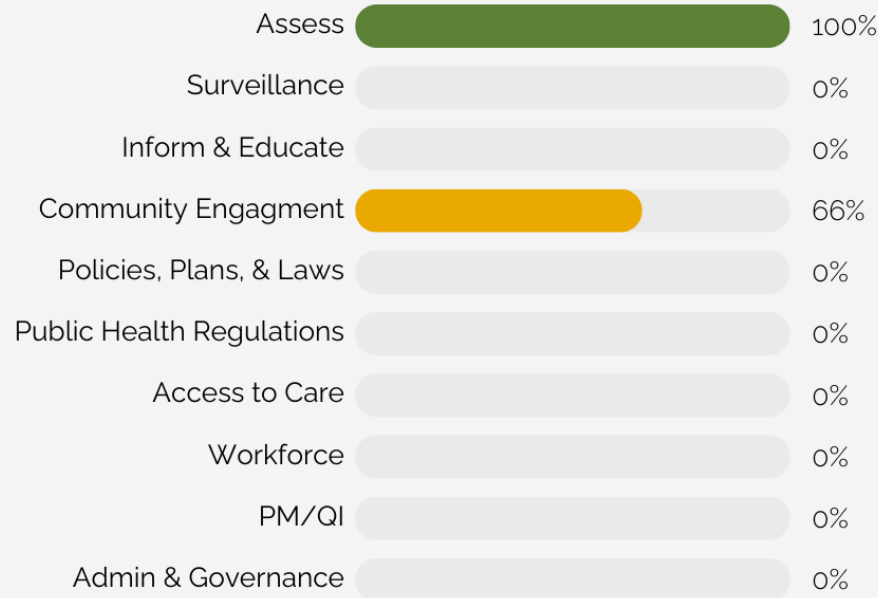
Ready for Review

7

Submitted to e-PHAB

3

Fully Prepared Evidence by Domain



Reaccreditation World Tour Map



Children's Resource Center (CRC) – West

Last month, CRC-West launched its Essential Resource Purchase Program (ERPP), a direct-support initiative designed to assist organizations and groups serving children and youth with special health care needs (CYSHCN) and their families.

The team received over 30 applications for funding, representing a high need and interest in the program. They are working this month to review applications and notify recipients.

Chippewa County Healthy Communities

As part of its role as the backbone organization for Chippewa County Healthy Communities (CCHC), the Chippewa County Department of Public Health provides coordination, facilitation, and strategic support, including the Drug-Free Communities grant. This work is led by the Planning and Strategy Division, which oversees day-to-day coalition activities and partner engagement.

Backbone staff has started planning for an annual in-person coalition meeting on February 11th, 2026, for all Chippewa County Healthy Communities (CCHC) coalition members. Further details are yet to be determined, but the meeting will take place at the Chippewa County Courthouse in Room 003. Additionally, backbone staff have been meeting with interested coalition members for 1-on-1 discussions focused on coalition involvement, organizational/personal interests, and ideas for improvement, continuing through December.

Additional Recent Highlights Include:

- **Pathway to Health (PTH) Action Team**

The group discussed the need for stronger resource navigation in Chippewa County following news that 211 Great Rivers will end services in Western Wisconsin on December 31, 2025, and agreed to continue this work as a task force. They also reviewed food access efforts, including the coalition's development of a countywide food resource handout and a comprehensive webpage on healthychippewa.org. These tools will include updated information on food pantries and community meal sites, links to food programs, current donation and volunteer needs, and a guide to help residents navigate available food resources.

- **Mental Health and Well-being (MHWB) Action Team**

MHWB did not meet in November. The group is still navigating the increased demand for QPR training requests from schools. Meetings with 988 Suicide & Crisis Lifeline are underway to coordinate additional QPR trainers for school trainings.

- **Voices in Prevention (VIP) Action Team**

Maureen Busalacchi from the Medical College of Wisconsin joined the November meeting to highlight the importance of environmental and policy strategies to address alcohol misuse, including underage drinking. VIP is planning environmental scans at upcoming festivals to assess alcohol service practices and is partnering with the Eau Claire Health Alliance to

promote alcohol-free events. The group is also awaiting funding from Marshfield Clinic Health Systems – Ladysmith to support the men's mental health and substance use prevention coaster campaign.



**Wisconsin Department of Health Services
Division of Public Health
PHA VR - WEDSS**

County Board of Health Report

Jurisdiction: Chippewa County

Received Date: 11/1/2025 to 11/30/2025

Disease	Confirmed	Probable	Suspect	Not A Case	Total
LYME LABORATORY REPORT	0	4	0	6	10
LEAD-BLOOD LEVELS - ADULT	0	0	0	9	9
HEPATITIS A	0	0	0	8	8
HEPATITIS C, CHRONIC	0	0	2	4	6
STREPTOCOCCUS PNEUMONIAE, INVASIVE DISEASE	0	0	3	1	4
PERTUSSIS (WHOOPING COUGH)	0	0	0	3	3
TUBERCULOSIS, LTBI - LABORATORY RESULTS ONLY	0	0	3	0	3
VARICELLA (CHICKENPOX)	0	0	0	3	3
ANAPLASMOSIS, A. phagocytophilum	1	0	1	0	2
CHLAMYDIA TRACHOMATIS INFECTION	2	0	0	0	2
E-COLI, ENTEROPATHOGENIC (EPEC)	0	0	2	0	2
HEPATITIS B, CHRONIC	0	0	0	2	2
INFLUENZA	2	0	0	0	2
LYME DISEASE, ERYTHEMA MIGRANS (EM) RASH	2	0	0	0	2
ARBOVIRAL ILLNESS, WEST NILE VIRUS, Unspecified	0	0	0	1	1
CAMPYLOBACTERIOSIS	1	0	0	0	1
CORONAVIRUS, NOVEL 2019 (COVID-19)	0	0	0	1	1
CORONAVIRUS, NOVEL 2019 (COVID-19) - ASSOCIATED HOSPITALIZATION	1	0	0	0	1

Disease	Confirmed	Probable	Suspect	Not A Case	Total
CRYPTOSPORIDIOSIS	1	0	0	0	1
GONORRHEA	1	0	0	0	1
HAEMOPHILUS INFLUENZAE, INVASIVE DISEASE	0	0	1	0	1
METHICILLIN- or OXICILLIN RESISTANT S. AUREUS (MRSA/ORSA)	0	0	1	0	1
PARAPERTUSSIS	0	0	0	1	1
Q FEVER, unspecified	0	0	1	0	1
SALMONELLOSIS	1	0	0	0	1
STREPTOCOCCAL DISEASE, INVASIVE, GROUP A	0	0	0	1	1
STREPTOCOCCAL DISEASE, INVASIVE, GROUP B	0	0	1	0	1
VIBRIOSIS, NON CHOLERA	0	0	1	0	1
Total	12	4	16	40	72

Default Filters: 'State' EQUAL TO 'WI'



Public Health Financial Results

November 2025

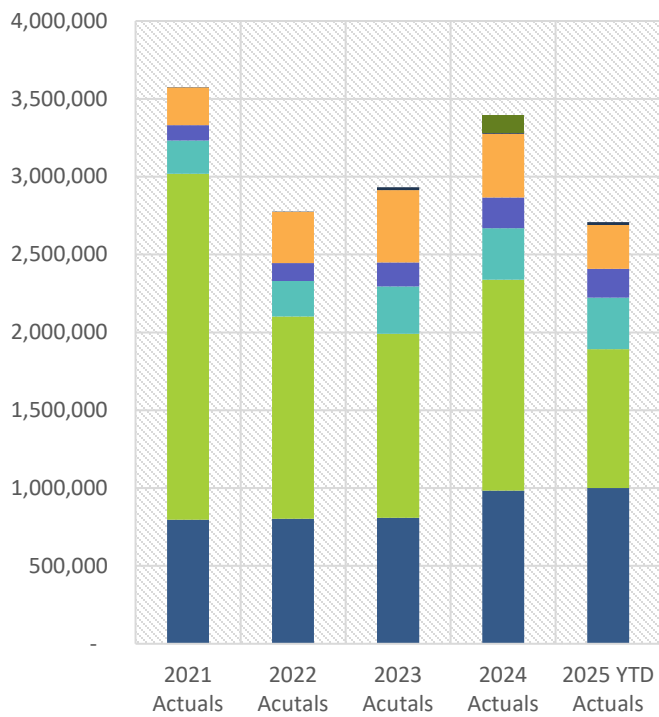
Fund	Description	Revenue			Expense		
		Budget	Actual	% Collected	Budget	Actual	% Spent
54100	Community Health	\$ (593,947.00)	\$ (558,914.55)	94.1%	\$ 593,947.00	\$ 447,025.30	75.3%
54121	Nurse Family Partnership	(123,650.00)	(92,723.18)	75.0%	123,650.00	113,864.93	92.1%
54123	Farmers Market	(3,930.00)	(1,528.49)	38.9%	3,930.00	2,899.77	73.8%
54125	Prenatal Care Coordination	(27,536.00)	(20,269.73)	73.6%	27,536.00	32,105.17	116.6%
54127	Healthy U	(31,393.00)	(23,096.61)	73.6%	31,393.00	16,817.78	53.6%
54128	Public Health Preparedness	(47,943.00)	(32,696.21)	68.2%	47,943.00	41,989.73	87.6%
54129	TN Program	(56,587.00)	(57,563.80)	101.7%	56,587.00	49,973.79	88.3%
54130	CHIP Coalition	(4,500.00)	-	0.0%	4,500.00	254.81	5.7%
54132	Drug Free Community Grant	(139,083.00)	(90,905.97)	65.4%	139,083.00	91,730.80	66.0%
54133	Iron Will Endowment Fund	(1,881.00)	(2,190.73)	116.5%	1,881.00	19.16	1.0%
54135	Bright Start River Source	(10,997.00)	(10,350.10)	94.1%	10,997.00	10,033.21	91.2%
54138	Planning & Strategy	(325,662.00)	(314,229.45)	96.5%	325,662.00	314,887.60	96.7%
54140	WIC	(433,809.00)	(394,112.27)	90.8%	433,809.00	366,065.60	84.4%
54142	Maternal & Child Health Program	(32,143.00)	(14,510.09)	45.1%	32,143.00	21,040.01	65.5%
54144	Wisconsin Wins	(5,065.00)	(4,748.48)	93.8%	5,065.00	4,619.02	91.2%
54149	Pre-Venture	(20,747.00)	(3,197.54)	15.4%	20,747.00	5,000.30	24.1%
54150	Prevention	(9,346.00)	(6,904.80)	73.9%	9,346.00	6,610.87	70.7%
54151	Equipment Loan Closet	(2,997.00)	(452.63)	15.1%	2,997.00	2,413.18	80.5%
54152	Childrens Resource Center	(242,490.00)	(183,607.22)	75.7%	242,490.00	213,271.38	88.0%
54153	WIC Endowment	-	(2,547.62)	#DIV/0!	-	1,445.48	#DIV/0!
54154	Title X Reproductive Health	(6,000.00)	(13,489.68)	224.8%	6,000.00	18,814.55	313.6%
54156	FIT WIC	(41,447.00)	(30,983.34)	74.8%	41,447.00	38,657.65	93.3%
54157	Reproductive Health	(55,193.00)	(31,142.05)	56.4%	55,193.00	34,791.54	63.0%
54158	WIC BF Peer Counseling	(19,995.00)	(18,251.45)	91.3%	19,995.00	27,400.20	137.0%
54161	Health Clinics	(32,652.00)	(31,281.23)	95.8%	32,652.00	39,507.65	121.0%
54162	COVID Vaccine	(23,032.00)	(8,615.34)	37.4%	23,032.00	7,732.81	33.6%
54163	Overdose Fatality Review	(27,347.00)	(33,844.91)	123.8%	27,347.00	38,842.68	142.0%
54164	COVID Contact Tracing	-	(16,000.00)	#DIV/0!	-	16,097.19	#DIV/0!
54165	GYT - Get Yourself Tested	(2,195.00)	(126.57)	5.8%	2,195.00	1,658.89	75.6%
54166	Water Lab	(3,627.00)	(7,177.66)		3,627.00	26,887.02	
54167	NW Coalition	-	(30,800.00)		-	28,511.93	
54168	Farm Fresh Program	-	(15,000.00)		-	6,175.02	
54171	Food Safety Recreation License	(357,141.00)	(352,523.88)		357,141.00	257,236.75	
54172	Infant Immunization Grant	(16,794.00)	(21,137.91)	125.9%	16,794.00	23,317.38	138.8%
54173	Opioid Abatement	(1,694.00)	(1,098.51)		1,694.00	2,986.50	
54174	Forward Health Outreach	(33,744.00)	(25,575.01)	75.8%	33,744.00	26,038.05	77.2%
54176	Environmental Health	(79,337.00)	(81,927.11)	103.3%	79,337.00	65,322.94	82.3%
54178	Public Health Infrastructure	(72,867.00)	(25,009.92)		72,867.00	31,194.59	
54180	DHS Agreement	(173,446.00)	(97,308.45)	56.1%	173,446.00	109,097.39	62.9%
54182	Environmental Tracking	-	(1,508.00)		-	1,908.80	
54184	Childhood Lead Poisoning Prev.	(9,927.00)	(3,835.09)	38.6%	9,927.00	4,151.71	41.8%
54186	Charity Outreach Program	(250.00)	-	0.0%	250.00	-	0.0%
54188	WI Wayfinder	(81,987.00)	(41,399.26)		81,987.00	40,406.23	
54189	Sensory Friendly Vaccination	-	-		-	-	
54190	Public Health Donation Expendi	(1,000.00)	(438.72)	43.9%	1,000.00	-	0.0%
		\$ 3,153,381.00	\$ 2,707,772.56	85.9%	\$ 3,153,381.00	\$ 2,588,626.37	82.1%



Public Health Revenue vs Expenses

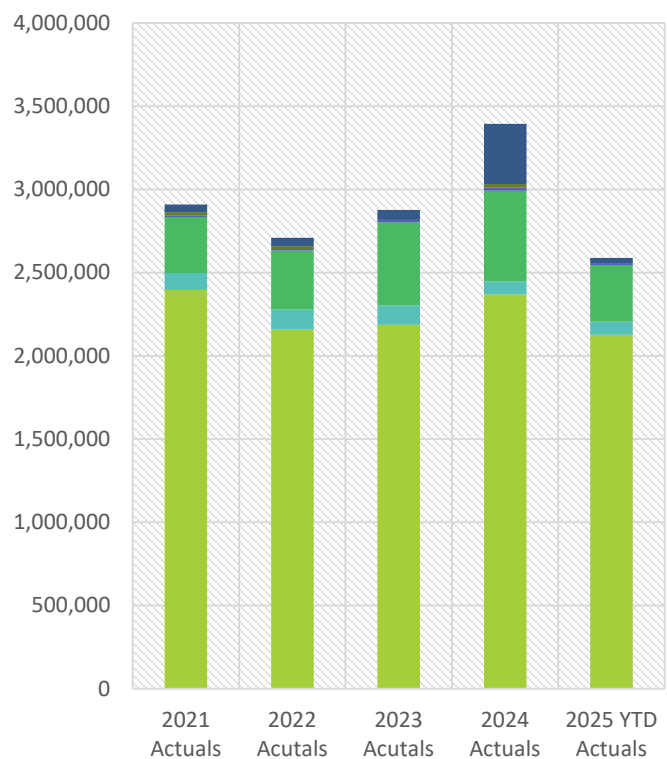
Variance Year-to-Date through November 2025

Total Revenues for All Years



- Taxes
- Intergov Grants & Aids
- Licenses & Permits
- Public Charges for Services
- Misc Revenues
- Intergov Charges for Services
- Other Financing Sources

Total Expenses for All Years



- Personal Services
- Contractual Services
- Supplies & Expense
- Capital Outlay
- Fixed Charges
- Transfer To Other Funds

Department of Human Services 2025-2027 Strategic Plan

Department/Division Goals:	1. Build a culture of community engagement 2. Utilize data-driven decision-making 3. Demonstrate fiscal responsibility 4. Build a culture of service 5. Continue to build and maintain a healthy workplace
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Leadership Team

Objective	Improve.interconnectedness.within.the.Leadership.Team
Status Update December 2025	▪ The DHS Leadership team created a schedule of program presentations that are given at leadership meetings. So far, the leadership team has heard presentations from: Economic Support, Adult Protective Services, Birth to 3, Youth Justice, Fiscal, ADRC Nutrition and Transportation, RWC Consortium, and ADRC Options Counseling. This additional time spent learning more about each program's offerings and the work they do assists leadership in building connections as co-workers and better serving consumers. ▪ The DHS director has taken the opportunity to shadow other DHS staff. This has included sitting in on crisis meetings, Youth Justice and CPS team meetings, Permanency Plan Reviews for children placed out of the home, attending court for a CPS case, attending an ADRC team meeting, Sitting in on an Options Counseling appointment, sitting in on a truancy intake, observing all reception areas, attending a youth justice court hearing, attending a Birth to 3 home visit, sitting in on an APS team meeting to name a few.
Objective	Educate.County.stakeholders.and.decision_makers.on.DHS.programs
Status Update December 2025	▪ DHS staff continue to provide the county board with success stories and program overviews. Staff have also attended informational meetings with Rogers Health and LSS as they prepare to begin service to Chippewa County.
Objective	Continue.to.increase.employee.engagement
Status Update December 2025	▪ DHS crisis team presented on their program at the DHS all staff meeting in November. ▪ DHS Director offered any staff interested one-on-one meetings in April and August. ▪ Voluntary "Coffee Chats" were scheduled for staff. These were virtual meetings where DHS staff could get together and chat about a specific theme or just say hello to get to know staff in other divisions.
Objective	Improve.outcomes.through.data_driven.decisions
Status Update December 2025	▪ Division Score cards will be reviewed at the December 11th Leadership Meeting

Aging & Disability Resource Center (ADRC)

Objective	Expand staff knowledge of community resources and ensure partners have accurate information about the ADRC
Status Update December 2025	- Staff connected directly with community partners, including the Family Health Center Benefit Navigator, Compass Independent Living, the Veteran Service Office, WestCap, the State Volunteer Ombudsman Program, and UW-Madison Extension-Human Development & Relationships program, learning more about their services, referral processes, and local trends. - Staff met with the Mental Wellness and Recovery (MWR) division to explore service areas and make connections that support cross-division collaboration. - A presentation was provided to students enrolled in the Wisconsin Area Health Education Centers program to share the role of ADRCs and how they serve the community.
Objective	Empower Chippewa County residents to easily access current information about ADRC programs, services, and events available in each community
Status Update December 2025	- Programs such as Mind Over Matter workshop in Stanley, the Brain & Body Fitness class with the Chippewa Falls YMCA - a new offering in Chippewa County, expanding SAIL (Staying Active and Independent for Life) sessions, and the fall Strong Bodies program in Bloomer have all seen strong attendance and positive responses. - Began tracking Power of Attorney Workshop attendance and survey feedback to guide future offerings. - The ADRC Resource Guide is being updated alongside the new Chippewa County website to improve usability and meet full ADA compliance; it's widely used across DHS divisions and County departments, serving as a central resource for both staff and the community. - Additional engagement efforts included the 3rd Annual Age Your Way Conference, "Facing the Wind" free movie and pizza nights at Bloomer and Chippewa Falls Libraries, and the Senior Farmer Market Voucher program, which distributed 388 vouchers through walk-in, mail, and online.
Objective	Continuously enhance a healthy work environment through engagement and operational efficiency
Status Update December 2025	Onboarding a new front desk team member provided an opportunity to clarify roles based on staff strengths and capacity, improving communication and efficiency across the office.

	▪ Team-building events, including Org Day, seasonal potlucks, flannel day, and staff games, provided opportunities for staff to connect and engage with one another outside of regular duties. ▪ Staff played a key role in quality improvement projects, including the revision of the Consumer Walk-in Form, helping make office processes smoother and more effective.
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Children, Youth, & Families: Birth to 3/Child Protective Services (B3/CPS)

Objective	Continue to educate and increase collaboration with law enforcement, schools, medical providers, daycares, and community members about programs
Status Update December 2025	▪ CPS, Law Enforcement, the District Attorney's Office, and the Corporation Counsel's Office collaborate monthly at a standing meeting on Fridays. ▪ CPS continues to present to a Criminal Justice Class at Chippewa Falls High School each semester. ▪ Birth-to-Three Staff joined a lunch and greet with Early Headstart in October 2025. ▪ The Birth-to-Three Program Coordinator joined the Early Childhood Education Panel at the Chippewa Valley Technical College in October 2025. ▪ Birth-to-Three Staff engaged in the Northern/Western Regional Birth-to-Three and Family Foundations Home Visit Partnership Roundtable Collaboration Meeting in November 2025. ▪ In early 2026, CPS and Birth-to-Three will send out information to law enforcement, schools, medical providers, daycares, and other community members to see if they are interested in either unit coming to speak to their teams about programs and services.
Objective	Increase the number of Foster Parents who are willing to take placement of teenagers and children with exceptional needs
Status Update December 2025	▪ Currently, CPS is working on supporting the three families who are willing to take placement of teenagers and children with exceptional needs so that they can be retained and not burn out. ▪ In 2026, CPS will be initiating recruitment efforts in hopes of finding more homes that are willing to take placement of teenagers and children with exceptional needs. These recruitment efforts will include informational sessions, fliers, and connecting with the community.

Children, Youth, & Families: Children with Differing Abilities/Youth Justice (CWDA/YJ)

Objective	Increase.staff.satisfaction
Status Update December 2025	▪ CWDA Workers are working very hard to get cases closed out when appropriate. ▪ We have created internal timelines. ▪ There have been trainer meetings established that are ongoing to tighten up training. ▪ We will be working with the functional screener to have them meet with new staff. ▪ Team bonding events occur at least quarterly.
Objective	Learn.more.about.other.programs.that.CWDA.works.with
Status Update December 2025	▪ CWDA had different units present to our team about what they do.
Objective	Increase.staff.fidelity.of.Youth.Assessment.and.Screening.Instrument.(YASI)
Status Update December 2025	▪ We have updated our intake form. ▪ We reserve one unit meeting per month dedicated to YASI practice, each worker taking the lead on the discussion on a rotating basis. ▪ Reminders for annual YASI booster trainings have been given.
Objective	Increase.prevention.and.diversion.of.YJ.referrals
Status Update December 2025	▪ Coordinator has been hired. ▪ A quarterly meeting schedule has been established. ▪ Trainings for Behavioral Threat Assessment and Management (BTAM) members are scheduled and two have been held already. ▪ No official community education has taken place yet. ▪ We applied for and were awarded a substantial continuation grant for 2026 for this effort. ▪ We have restructured one role within the unit to help with workload and pre-truancy intervention in Juvenile Court Intake. ▪ A needs assessment was completed at the time of the strategic plan development. Another one will be done in January 2026. ▪ We are navigating the reporting system to gather this data.
Objective	Increase.employee.engagement
Status Update December 2025	▪ Staff determined that they'd rather have an organic way of recognizing the work they do and established that recognition can come from each other and doesn't always have to come from the manager. ▪ We created a "get to know you" form and it is kept in a centralized location in the YSS O-Drive for staff to access. This assists staff receiving recognition that are meaningful to them.

Economic Support (ES)

Objective	Implement.regular.staff.camaraderie
Status Update December 2025	- Staff “get to know you” document was sent out to determine individual needs 5/25 - Emily is sending weekly emails with positive quotes - Manager is meeting with staff bi-monthly for check-ins via Teams Meetings - Bi-monthly donut talks implemented for staff to mingle in small groups
Objective	Implement.two.in_person.training.programs.for.ES.staff.annually
Status Update December 2025	In person staff meeting held in August and October
Objective	Support.telework.through.balancing.the.needs.of.the.consumer?team?and.individual.staff
Status Update December 2025	Manager sends quarterly emails to staff regarding IT issues, so far, no unmet needs have been reported.

Fiscal

Objective	Manage.Medicaid.changes.to.programs.and.technologies.to.continue.to.bill.and.receive.revenue.timely
Status Update December 2025	- The fiscal team successfully made changes to billing templates in Avatar to be able to bill CLTS Case Management to ForwardHealth, as well as establishing a process to receive reimbursement for CLTS purchases timely. - The fiscal team has training with Joxel the first week of December to learn new billing processes with the Avatar enhancement project.
Objective	Increase.employee.engagement
Status Update December 2025	- The fiscal team met to go over everyone’s roles in the AP/AR process to understand how each step impacts the next. - Several members of the fiscal team have attended training at CVTC. - Fiscal team has established times to get together for team building.
Objective	Adhere.to.billing.timelines.for.all.Medicaid.programs
Status Update December 2025	- We reduced our AR days for 2025 services from 34 in January to 26 for September (last month of contracted services billed). - We have a template for timeliness for CCS payments that is green when all our deadlines are met and will create one for the other programs.

Mental Wellness & Recovery (MWR)

Objective	Improve.outcomes.through.data_driven.decisions
Status Update December 2025	- Adult Protective Services (APS) is tracking the amount of time to complete a screen-in investigation (point of initial contact to point of supervisor signing off on report). This will help in meeting compliance concerns with new APS standards. - Comprehensive Community Services (CCS) is tracking time consumer spends on waitlist for services (point of functional screen completion to signing of admission paperwork). CCS is not allowed to have a waitlist. - Community Support Program (CSP) is tracking percentage of consumers actively engaged in wellness checks with health care providers. CSP consumers, on average, have shorter life span of 15 years. - Emergency Mental Health Services (EMHS) is tracking number of uninsured consumers. With pending loss of health care subsidies, the County may be at financial liability for cost of mental health services.
Objective	Increase.employee.engagement
Status Update December 2025	2025 Org Day completed 9/4/25 with individual recognition for each workers contribution 2026 establish a sign-up sheet for each worker to give a short 10 min presentation on topic of their own choice.
Objective	Update.RWC_Core.procedures
Status Update December 2025	- Core mental health and substance abuse manual update completed 10/26 - Core Fiscal and Medical scheduled for completion 12/1
Objective	Crosstrain.all.staff.to.complete.initial.intakes.for.Adult.Protective.Services.(APS)
Status Update December 2025	Training completed to MWR staff by August 2025. Due to inefficiencies, APS went back to performing their own intakes starting in September. APS staff cannot meet the demands of the aging population. Federal guidelines are being rolled out in 2026/27 that will place time frames and other expectations on investigations. Mikala Talbot (CPS unit) has been aiding in completing investigations. Her assistance is much appreciated.
Objective	Develop.strategies.to.improve.collaboration.with.community.partners
Status Update December 2025	- Jennifer Van Sleet is working with schools on the impact of alcohol consumption on motor skills (drunk goggles). - Lisa Hudson and David Pfeiffer have made informal connection with Rogers Hospital for purpose of future collaboration.

Western Region Recovery & Wellness Consortium (WRRWC)

Objective	Create more opportunities for team building–connectedness
Status Update December 2025	- Team Celebration took place with AVATAR Enhancement Project Go-LIVE. - The team meets once per month in person for Lead Team meetings. - Team Holiday gathering will take place at the end of December.
Objective	Revise current RWC Consortium Wide training resources to be more current and sustainable
Status Update December 2025	- Lead County met in September to start reviewing which training topics need to be updated in SharePoint. Topics were assigned out and will be revisited in 2026. This will also be included in the WRRWC Consortium Strategic Plan for 26-28. - Discussions have also begun around integrating fidelity tools for wraparound. This will also be a part of the WRRWC Consortium Strategic Plan.
Objective	Create an RWC Lead Team Onboarding Process that can be used as a resource for coverage for any level of absence needs and/or new staff
Status Update December 2025	Initial discussions were had. This item has been identified to begin in February 2026.