

WCHSA
4/1/99

March 12, 1999

**LONG TERM CARE REDESIGN: AN ALTERNATIVE MODEL
TO TRY IN THE PILOT PHASE**

The Wisconsin Department of Health & Family Services has begun the process of piloting one model of LTC Redesign: a risk-based managed care approach which will require special federal approval and will offer the private sector an opportunity to compete against county governments for the right to run the LTC System at the local level. Statewide disability and aging organizations have joined with the Wisconsin Counties Association to develop an Alternative Model, which we believe should also be piloted in multiple counties. Then there should be an independent evaluation of all the pilots, before the legislature makes a binding decision on which model to implement statewide.

The Alternative Model is simple – it's based on the premise that we can achieve the LTC reforms we all want by building on the current system, which would be preferable to blowing up the current system and starting over. The Alternative Model aims to achieve the same goals the Department has identified: simplify the system, pool the funding streams, include all the populations that need long term care, end waiting lists and the institutional bias of the current system, and provide consumers more choice.

The big difference between the two approaches is in how to achieve these goals. The Alternative Model would continue the 100 year tradition of county-based human services in Wisconsin, enabling consumers and families to continue their existing relations with county workers and with local elected officials who oversee the system. This model would also expand and consolidate the Community Options Program with other effective existing community programs, rather than eliminate good programs simply because they are underfunded.

Key Features of the Alternative Model:

- Existing Medicaid waivers programs (e.g., COP and CIP) would be consolidated and expanded to serve people on waiting lists, with rates increased to cover actual costs. Statutory responsibility of counties (as in Chapter 51 for people with developmental disabilities) would be broadened to include elderly people and people with physical disabilities.
- As in Oregon's LTC Reform, a) Wisconsin would need no additional federal waivers beyond the standard Home and Community Based Waiver we already have, and b) Wisconsin would assure the same eligibility and entitlement for community-based long term care as for nursing home care.
- The Alternative Model will cost no more than the Department's model, and counties would continue to invest local tax dollars in the system. The core funding is the same federal-state matching funds for both models, eligibility is the same, and neither model proposes a more expensive package of individualized services than the other.
- The Alternative Model includes many of the features of the DHFS model: pre-admission screening for institutions; Resource Centers; a consumer-directed support option; outcome-based quality assurance; continuity of service; independent advocacy; and an opportunity for people currently in institutions to move out and receive community services.

RESOLUTION

Resolution No. 99-017

(14)

Regarding Direct State Contracts With Wisconsin Tribes For Child Welfare Services Including Out-Of-Home Placements

WHEREAS, the State of Wisconsin provides significant funding contracts with Wisconsin Tribes for many human services programs, including, but not limited to, health (e.g., CDC Breast/Cervical Cancer, immunizations, Medical Relief Block Grant, Medical Eligibility Outreach), Kinship Care (benefits and assessments), family services (e.g. youth activities, domestic violence services, and families preservation activities), and economic support (e.g., TANF or W-2, Low Income Energy Assistance Program, Food Stamps, and Medical Assistance).

WHEREAS, the State of Wisconsin piloted (June 1996 – September 1998) a child welfare project with Red Cliff that included funding for staff and out-of-home placements for children.

WHEREAS, State staff admitted that the end of the pilot was due in part to non-communication between the contracting parties.

WHEREAS, very significant funding contracts existing between the State and Tribes for many years indicates that the State is satisfied that the Tribes can manage fiscal and program responsibilities.

WHEREAS, the Wisconsin Tribes and Counties have successful interactions, like County to County, when both entities have contracts with the State for their respective residents.

WHEREAS, child welfare funding between the State and Tribes exists in part through consolidated family services contracts and out-of-home placements for children and are an important service that must be an allowable cost for Tribes.

THEREFORE, BE IT RESOLVED THAT, the Bayfield County Board of Supervisors encourages and supports State contracts with Tribes that include out-of-home placement costs.

BE IT FURTHER RESOLVED THAT, copies of this Resolution be provided to Bayfield County's legislators, Wisconsin Counties Association, and Governor Thompson.

Dated this 25th day of January 1999.

Wendy J. Hiller

Philip C. Gordon

Roy Setyan

John J. Blahnik

STATE OF WISCONSIN }
COUNTY OF BAYFIELD }

I, THOMAS J. GORDON, Bayfield
County Clerk, DO HEREBY CERTIFY that the
 foregoing is a true and correct copy of

Vol. 19, Pg. 81
adopted by the County Board of Supervisors
at their meeting held March 30, 1999

Thomas J. Gordon

BAYFIELD COUNTY

Courthouse

117 E. 5th St.

Washburn, WI 54891

Telephone (715) 373-6100 Fax (715) 373-6153

Position Statement: Forestry Mill Tax

The State of Wisconsin has collected a two-tenths of a mill tax on all real property in Wisconsin since 1927 in accordance with the State Constitution. This money has been earmarked for the development, management, and protection of the public forests, and has provided for the establishment of an outstanding system of public forests and forest management that is nationally recognized.

This money has been used to support the tree nurseries, forest fire control on public and private lands, aids to townships and counties with forest crop lands, and loans to county forests for forest management projects. These forests provide tremendous environmental, recreation, economic and social benefits to the State of Wisconsin and entire midwestern US. Considering that 93% of Wisconsin's forest are in public and non-industrial ownership, the industrialized and urbanized areas of the state benefit greatly from these forests as well.

One of the major reasons that the forests of the state are so outstanding is the stable funding source which the mill tax has historically provided. The ongoing management of forests is a long term program which needs continued stable funding if we are to provide these same forest benefits for future generations.

Bayfield County is therefore strongly opposed to any legislation or other efforts which aim to eliminate or weaken the forestry mill tax from its present form.

Position Statement: State Nursery System

The state nursery system has provided the seed and seedlings necessary for the reforestation needs of Wisconsin since efforts were first made to recover the areas heavily deforested by logging and fire at the turn of the century.

The state nurseries are vital to the public forests and small private landowners who would be seriously impacted by privatization. Currently the state nursery system provides seedlings at cost. A recent analysis of alternative private sources revealed that the cost of seedlings for reforestation efforts in Bayfield County would quadruple at the minimum, and could be increased by a factor of 10. To bring this down to the local level, that would increase the average annual seedling costs for the Bayfield County Forest from approximately \$10,000 through state nursery sources to \$40,000 to \$100,000. That would require a tax increase of from \$2.00 to \$6.25 for every man, woman and child in our county.

This examination also indicated a serious shortage of seedlings and tree seed in the private sector to meet current needs. According to state nursery management reports, no past contracts with private nurseries have ever been successfully completed, and no jack pine seed is currently available through the private sector to meet pine barrens management requirements. Currently pine barrens are estimated to cover 2% of their previous extent in Wisconsin, making it the second rarest habitat in the state. In the Bayfield County barrens management plan we routinely chain scarify and direct seed from 200 to 500 acres annually.

Bayfield County would like to see state nurseries protected from efforts to privatize the production of seedlings for private and public sources in Wisconsin, and increased funding from the mill tax to allow the growth necessary to meet the needs of the expanding forests of the state.

RESOLUTION BY THE BAYFIELD COUNTY BOARD OF SUPERVISORS
RESOLUTION # _____

Subject: Forestry Mill Tax

Resolution offered by Supervisors of the **FORESTRY COMMITTEE**.

Resolved by the Board of Supervisors of Bayfield County, Wisconsin:

WHEREAS, the State of Wisconsin annually collects a two-tenths of a mill tax on all real property in Wisconsin, with this money being earmarked for the development, management, and protection of the public forests in the State of Wisconsin, and

WHEREAS, this tax is provided for in the State Constitution and has been collected by the State of Wisconsin since 1927, and

WHEREAS, this money has provided for the establishment of a system of public forests and forest management that is nationally recognized as outstanding, and

WHEREAS, this money has been used to support the tree nurseries, forest fire control on public and private lands, aids to townships and counties with forest crop lands, and loans to county forests for forest-management projects, and

WHEREAS, these forests provide tremendous environmental, recreation, economic and social benefits to the entire State of Wisconsin, and

WHEREAS, 93% of Wisconsin's forest are in public and non-industrial ownership, and the industrialized and urbanized areas of the state benefit greatly from these forests, and the mill tax allows these areas to contribute their appropriate share to the support of the forests, and

WHEREAS, the management of forests is a long term program which needs a long term stable funding source,

THEREFORE BE IT RESOLVED THAT, the Bayfield County Board of Supervisors goes on record opposing any legislation or other effort which aims to

eliminate or weaken the forestry mill tax from its present form, and

BE IT FURTHER SOLVED THAT, a copy of this resolution be forwarded to
the Governor, our District Legislators, the Wisconsin County Forests Association,
Wisconsin Counties Association, and the Wisconsin Towns Association.

Dated this ____th day of April, 1999.

Offered and passage moved by _____ Supervisor

Second by _____ Supervisor

_____ Ayes

_____ Nays

_____ Absent

_____ Adopted

by the County Board of Supervisors this _____ day of April, 1999.

Defeated

Tom Gordon, County Clerk

Neil Paulson, County Board Chairman

_____ Supervisor,	_____ Supervisor,	_____ Supervisor,
_____ Supervisor,	_____ Supervisor,	_____ Supervisor,
_____ Supervisor,	_____ Supervisor,	_____ Supervisor,
_____ Supervisor,	_____ Supervisor,	_____ Supervisor,



BAYFIELD COUNTY ZONING DEPARTMENT

Telephone (715) 373-6138
(715) 373-6139

Bayfield County Courthouse
Post Office Box 58
117 East Sixth Street
WASHBURN, WISCONSIN 54891

April 12, 1999

Mr. Neil R. Paulson
County Board Chairman
P.O. Box 36
Drummond, WI 54832

Dear Mr. Paulson:

This letter is in response to your questions regarding Planning and Zoning Department concerns for the upcoming W.C.A meeting.

Developmental issues have been ever increasing on lakeshore and off water parcels due to a prosperous economy and escalating real estate values. State mandates for shoreland and wetland zoning, flood plain and sanitary regulations are ever increasing.

Planning and Zoning budgets and personnel levels have not been able to keep up with building pressures and are receiving no state financial help, yet are required to implement enforcement of these mandates.

Some relief has come through D.N.R. Grants for Land Use Planning and Water Quality Protection. However, acquiring these takes time and effort, both of which are limited by the daily operations of Department functions.

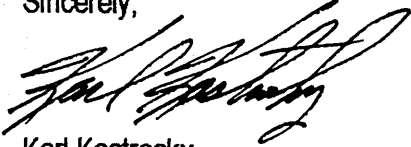
Bayfield County has removed itself from the Wisconsin Fund Grant Program, which supplies Grant Reimbursement for replacement of failing private sewer systems. This was due to the lack of human resources and funds to administer the program in the prescribed manner to meet state requirements. Now a new sanitary code is close to being approved and implemented.

Questions have been raised by the County Board as to what the \$75.00 State Sanitary Fee is for, specifically what the Department of Commerce does with these funds.

The Department's requested action to alleviate any future problems would be to have a financial assistance plan before any more state mandates are placed on County Government. The County's ability to effectively manage the sanitary requirements is marginal at this time. By utilizing part of the \$75.00 State Sanitary Fee for County use, funds would be distributed more evenly and efficiently. The Department currently sends approximately \$22,000.00 annually to the Department of Commerce.

Thank you for listening to our concerns, and hopefully the outcome of suggestions from the W.C.A. Conference will be beneficial to the citizens of Bayfield County.

Sincerely,

A handwritten signature in black ink, appearing to read 'Karl Kastrosky', written in a cursive style.

Karl Kastrosky
Interim Zoning Administrator

KLKjc

TOBACCO SETTLEMENT MONIES

Issue

Tobacco-related diseases account for 17 percent of all deaths in Wisconsin; in Bayfield County 18 percent of all deaths are related to tobacco. In Wisconsin 37 percent of children 14 to 17 years old and 40 percent of pregnant women are current smokers. Caring for sick smokers cost over \$1.5 billion last year, that's \$267 for every man, woman, and child in Wisconsin.

Bayfield County is a large rural community that receives little or no support for anti-tobacco work. A federal study found smoking among middle school children in Florida dropped by 20 percent the year the state mounted an aggressive anti-smoking campaign. It is expected similar results will be seen if a comprehensive program were funded in Bayfield County.

Out of the \$338 million of tobacco settlement money that is available in the biennium budget, Governor Thompson has designated only 1 percent for smoking prevention and cessation.

Requested Action

1. Allocate tobacco settlement dollars for Tobacco Prevention. Wisconsin should follow the National Centers for Disease Control guidelines and direct between \$50 million and \$80 million in proven efforts:
 - A. Counter advertising to de-glamorize tobacco use.
 - B. Grant funding for community-based initiatives that will spur efforts in schools, health departments, and community service organizations.
 - C. Tobacco-related research and evaluation to ensure the dollars are being used to support programs that are effective and science-based.
 - D. Cessation services to provide accessible and affordable programs to help tobacco users become free from nicotine addiction.
 - E. Activities which prevent children from ever starting smoking or using tobacco products.
2. Place Tobacco Settlement monies in a trust fund to ensure the dollars are committed to prevention activities. The long-term benefit will be real tax saving from reduced health care cost associated with tobacco use.

Fiscal Impact

Ten dollars per person for tobacco prevention activities

The state can not afford to skimp on prevention. If it does it will squander the opportunity of a lifetime.

The Health Trust Fund proposal is endorsed by the TRUST Campaign, which represents the following organizations: American Cancer Society, American Heart Association, American Lung Association, State Medical Society of Wisconsin, Tobacco Free Wisconsin Coalition, Wisconsin Nurses Association, Wisconsin Public Health Association, Wisconsin Academy of Physicians Assistants, Wisconsin Education Association Council, Wisconsin Association of Local Health Departments and Boards, Consortium for Primary Care in Wisconsin and Aurora Health Care.

Medical Care of Inmates

County jails are responsible for providing appropriate medical care to inmates. There is case law which supports the concept of the sheriff determining what is appropriate care. In the case of Bayfield County, there is no one on staff with the medical training to feel comfortable determining what is appropriate care. This means that in most cases the inmate is taken to a physician when the inmate requests medical attention.

The Bayfield County jail has been utilizing local physicians to see to the medical needs of the inmates. The inmates are transported to the doctor's office for examination. The jail must then rely on the doctor's assessment of the medical problem and follow the doctor's recommendation. In cases where the inmate has financial resources the doctor and the inmate are told the inmate will be responsible for the costs of medical care. In cases where the inmate is unable to pay, the county is required by statute to pay the costs. There are statutory provisions which allow the county to collect from the inmate's estate. This requires court action. In reality most medical costs for inmates while in custody have been paid by the county. Every attempt is made to keep the costs at a minimum. Weekly free clinics are used when possible, prescriptions are filled to only the amount of time the inmate will be in custody, the inmate canteen accounts are charged when applicable, and MA rates are requested.

The jail administration is convinced that on many occasions medications are prescribed that are not necessary. Psychotropic medications are being prescribed by general practitioners. These medications do not seem to be part of any formal treatment plan. There is no continued treatment after the inmate is released.

The jail administration has one suggestion which could help relieve the burden to the county for medical costs and liability. The suggestion would be to hire or contract with a physician's assistant. This person would be in a better position to determine what is appropriate medical care and could prescribe medications when necessary.

The present Bayfield County jail budget includes \$4,000 for inmate health care plus \$1200 of the canteen account that is dedicated to inmate medical aids such as cold medications, aspirins etc. which are dispensed without prescription in the jail facility. This total of \$5200 dollars is spent annually. This does not include mental health assessments, psychotropic medications or placements in mental health facilities. The total costs for all these services ranges from \$20,000 to \$25,000 annually. Most of the costs for mental illness related types of services have presently been paid by the Department of Community Programs.

Testimony before the Joint Finance Committee
4-14-99

My name is Peter Kilde. I am the executive director of West CAP, a Community Action Agency serving seven counties in west central Wisconsin, including this one. I also currently serve as the President of the Wisconsin Community Action Program Association generally known as WISCAP. I am here today to testify in support of the Individual Development Account (IDA) initiative in the governor's budget, and to support Senator Shibilski's proposed amendment to increase the state's TANF funds budgeted for this IDA initiative from \$1.3 Million to \$3.8 Million.

In addition to thanking Senator Shibilski for his strong support of this program, I wish to thank Governor Thompson for including this innovative program in his proposed biennial budget. I also wish to give special acknowledgment to Senator Roessler who asked the governor to include the IDA initiative in his budget and who continues to champion this great idea.

Despite Wisconsin's strong economy and aggressive welfare reform efforts, the economic position and the prospects for long term self-sufficiency for most low-income families remain weak, precarious, and tentative. Many formerly welfare-dependent persons are now employed, but in lower paying jobs. Their continued employment and job security is vulnerable to even the most minor downturns and subtle changes in the economy, and they remain apart from the economic mainstream.

IDAs are a new strategy that creates opportunity for savings, investment, and asset building that can enhance and compliment the existing employment and income strategies of W-2. The combined strategy can lead to the successful long-term self-sufficiency for low-income families. The opportunity to establish and own a savings account, own a home, or start a small business or to earn a college degree gives hope to a low-income person. The opportunity to save and accumulate money, even small amounts, enables a person to imagine a future that is better than the present. The purchase of a first home or a chance to start a small business gives a person and a family a stake in their neighborhood and community.

What is being proposed is a statewide demonstration to be carried out through Wisconsin's network of 16 Community Action Agencies (CAAs) and managed by WISCAP. While we are aware that other agencies may be interested in operating an IDA program in Wisconsin, I submit that the designation of WISCAP and its Community Action Agency network to implement this statewide initiative is good public policy for the following three reasons.

1. To ensure fair and equal access to this asset-building opportunity for our low-income citizens, Wisconsin needs an effective statewide delivery system. WISCAP has the capacity, the experience and the will to implement this program on a statewide basis. All of WISCAP's 16-member Community Actions Agencies along with UMOS, the United Migrant Opportunity Services, have unanimously

committed their agencies to the coordinated, cooperative and mutually supportive implementation of this program across the state. Furthermore, building on the first IDA demonstration by ADVOCAP in Fond du Lac, the state's second IDA program was launched by the Community Action Coalition in Madison, and the first hand expertise gained from these demonstrations will guide the rest of the program.


2. WISCAP's proposes to match the state funds with \$500,000 of federal funds through the Assets for Independence Act by application to the federal Office of Community Services. This application will be submitted in a few days. CAAs are also committed to raising an additional \$1,000,000 for this program, effectively building on the state's \$3.8 Million in TANF funds to bring the statewide IDA program funding up to \$5.3 million over the next two years. With this funding, WISCAP will be able to establish 2,400 IDAs across Wisconsin. This will be a very significant program, the only statewide IDA demonstration in America, and a program that will enhance Wisconsin's national reputation as an innovator in welfare reform and as a leader in public policy.
3. IDAs are uniquely suited to the mission, function and history of Community Action Agencies. For over 30 years, Wisconsin's CAAs have been working toward the elimination of poverty and the promotion of self-sufficiency for our low-income citizens. CAAs administer a variety of housing and home ownership programs, and since 1991, WISCAP, through its member agencies, has run Wisconsin's highly successful Job and Business Development program for low-income entrepreneurs. These low-income housing and business development programs are a perfect match to the goals and purpose of IDAs, and, along with the other reasons I have noted, make Community Action Agencies the right choice for implementing this statewide IDA program.

Thank you.

Peter H. Kilde
Executive Director, West CAP, 715-265-4271
President, WISCAP, 608-244-4422

April 14, 1999

Written testimony submitted to the Joint Finance Committee
as part of the Spring, 1999 Budget Hearings

From: Dianne Rhein, Regional Planner 
AgeAdvantAge Area Agency on Aging
2427 N.Hillcrest Parkway, Suite 205
Altoona WI 54720

I have had the privilege of working within Wisconsin's Aging Network since 1981. I have served as an Area Agency on Aging staff person since 1992. AgeAdvantage assists seniors to live healthful lives in dignity and respect in the least restrictive environment. Our Area Agency on Aging serves as a resource to offices on aging in 24 counties and the Ho Chunk Nation in Southern and western Wisconsin.

As you go forward with your challenging responsibilities related to the state budget, I would ask that you consider the following:

Wisconsin has consistently been a visionary leader in the United States in the development and provision of services to older persons. Planning for the re-design of the state's long term care system to allow for greater consumer choice and, hopefully, to enable available funds to serve the growing numbers of older adults who will need assistance in the all-to-near future, has been all-encompassing and well-conceived.

I would urge the Joint Finance Committee to recommend implementing all the care management pilots currently in the budget proposal. Then, let us learn from them and continue working to craft an outstanding program for long term care restructuring.

To allow older people to have quality care choices when they need long term care services, we need to have an adequate workforce of well-paid and well-trained workers both in home care & community care settings and in institutional settings. Without immediate attention to these issues, particularly the pay issues, we are in jeopardy of the service structure collapsing from worker shortages and poor quality care.

Finally, core in-home services for frail older persons are not adequately funded to meet current, much less anticipated, future needs. Increased state funding for elderly nutrition home-delivered meals and elderly and disabled transportation would greatly enhance the lives of these elders who have helped make Wisconsin such a great state.

Thank you for considering my recommendations.

Charting the Journey Out of Poverty* - Current Problems

EDUCATION

- Lack of education limits wages
- Need to finish higher education to be out of welfare system permanently
- Told by divorce court judges to quit school
- Need more information on financial aid programs
- Illiteracy
- Language barriers

CHILD SUPPORT

- Do not receive
- Payments are too low
- Have to make frequent calls to child support agency to get results

HEALTH INSURANCE

- No health insurance
- Insurance costs are high
- No money to pay for medications (especially for anti-depressants)

DISABILITIES - WOMEN

- Unable to work because of disabilities
- Facing discrimination or harassment from employers due to disabilities
- Disabilities are difficult to diagnose

DISABILITIES OF CHILDREN/ OTHER FAMILY MEMBERS

- Losing jobs because of child's disabilities and getting called too often at work
- Some disabled children need 24-hour care
- Multiple disabilities within the family/household
- Need to care for other family member with disability

CHILD CARE

- Cannot find quality, reliable and affordable child care
- County is recommending drug addicts, physical and sexual abusers as child care providers
- Child care needed for disabled children, especially older children

- Inflexible child care facilities
- ◊ have to pay to keep space even when not used for that day
- ◊ need flexible hours for child care so that mother can work second shift
- Problems with subsidized child care
- ◊ difficult to get subsidized care
- ◊ no subsidized care for children over 10, yet social services says they can't be left alone for more than 1 hour
- ◊ subsidized care not paid for by county even when promised
- ◊ co-pay is too high

SELF/FAMILY

- Depression and low self-esteem
- Domestic violence or relationship problems
- Child abuse by former or current spouse/partner
- ◊ fathers abusing children during visitation
- ◊ got divorced because fathers were abusing children

TRANSPORTATION

- Inadequate public transportation
- ◊ no public transportation in rural areas
- ◊ work and appointments are missed because of lack of public transportation
- ◊ when public transportation is available, have to transfer between several different buses to get children to child care and then go to work
- ◊ public transportation not accessible for persons with disabilities
- Vehicles too expensive to maintain
- Depend on family members and friends for transportation
- Need reliable cars
- Need transportation to get children to/from school and extracurricular activities

DIFFICULTIES WITH W-2

- Education
- ◊ told by W-2 caseworkers to quit school and get job

* Preliminary results from 149 in-depth interviews of women in 8 Wisconsin Communities

Charting the Journey Out of Poverty* - Current Problems

- ◇ can't finish school because of W-2
- ◇ trying to meet work requirements of W-2 and still finish school is very difficult
- ◇ women are not getting any public assistance in order to finish school
- ◇ belief in education as a way out of poverty but must postpone it because of W-2
- ◇ women having to quit school and start paying back student loans even if unable to complete degree because of W-2 requirements
- ◇ work study not considered work under W-2
- Lack of information
 - ◇ need to know rights
 - ◇ need information about programs and services available
- Humiliation of system
 - ◇ treated poorly when using food stamps
 - ◇ abused by caseworkers and system
- No time for children now because of W-2 requirements
- Some feel that worrying about money will drive them to alcohol or drugs

HOUSING

- High cost
- Families living in sub-standard conditions (broken windows, doors, plumbing, et cetera)
- Subsidized housing
 - ◇ long waiting lists for housing assistance
 - ◇ need for subsidized housing
- Homelessness
 - ◇ families living in cars
 - ◇ moving from house to one room boarding house
 - ◇ families are doubling up

JOBS AND WAGES

- Need for jobs that pay self-supporting wages
- Need for jobs in smaller communities
- Need flexible work hours to be available for children before/after school
- Discrimination makes it difficult to get/keep employment

* Preliminary results from 149 in-depth interviews of women in 8 Wisconsin Communities

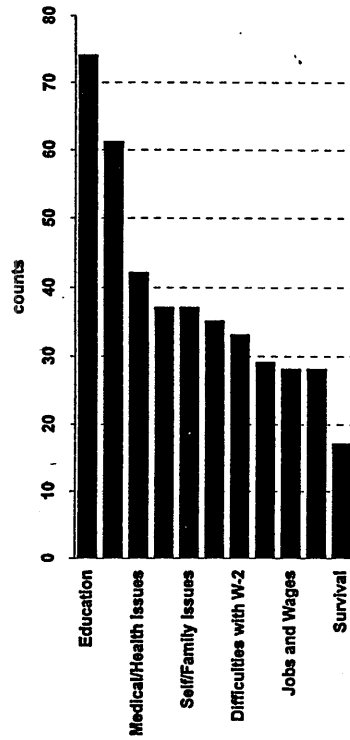
NOT ENOUGH RESOURCES

- Worried about money for food and shelter
- Access to assistance was helpful but not enough
- Spending all money on child care
- Not enough food
- Inadequate clothing

SURVIVAL

- Some felt they were falling through the cracks
- Concerns about being sanctioned under W-2
- Knowing how to survive
 - ◇ some have lived in poverty all their lives and know how to make ends meet
 - ◇ burn wood with fuel oil for heat
 - ◇ have gardens to grow for
 - ◇ butcher own cows for meat
 - ◇ buy in bulk

CURRENT PROBLEMS



for more information contact:

Victoria Hansen 715-425-2762

Ruth Kalms 715-425-0498

SUSTAINING A FAMILY

A single parent with two children (one in day care and one in school) can't sustain her family on minimum wage. She must earn at least \$9.00 an hour.

\$5.15 per hour for 40 hour/week

\$9.00 per hour for 40 hour/week

Gross	Monthly Income
deductions	\$824.00
Social Security	(\$51.08)
Medicare	(\$11.96)
Federal Taxes	\$0.00
State Taxes	(\$22.80)
Net Pay	\$738.16

Gross	Monthly Income
deductions	\$1,440.00
Social Security	(\$89.28)
Medicare	(\$20.88)
Federal Taxes	(\$96.00)
State Taxes	(\$68.40)
Net Pay	\$1,165.44

Net Pay	1 Bedroom	2 Bedrooms	3 Bedrooms
	\$738.16	\$738.16	\$738.16
Housing Cost	(\$486.00)	(\$621.00)	(\$841.00)
Child Care	(\$338.00)	(\$338.00)	(\$338.00)
Money for Food & All Other Expenses	(\$85.84)	(\$220.84)	(\$440.84)

Net Pay	1 Bedroom	2 Bedrooms	3 Bedrooms
	\$1,165.44	\$1,165.44	\$1,165.44
Housing Cost	(\$486.00)	(\$621.00)	(\$841.00)
Child Care	(\$338.00)	(\$338.00)	(\$338.00)
Money for Food & All Other Expenses	\$341.44	\$206.44	(\$13.56)

data sources:

- housing costs - Federal Fair Market Survey, reported by City of River Falls Housing Authority
- housing costs include utilities but no subsidies
- Social Security - 6.2% of gross wages
- Medicare - 1.45% of gross wages
- child care - Project Childcare, cost in River Falls for a single child age 2-1/2 years old

Charting the Journey Out of Poverty* - Assists and Changes Needed

ASSISTS

What participants found helpful (assists)

- PUBLIC ASSISTANCE**
- medical assistance (MA)
- food stamps
- low-income housing
- welfare (old system)
- WIC
- SSI
- Job Centers helping to find jobs (now, new system)
- free breakfast and lunch for children (school program)
- caseworker
- energy assistance

PARTICIPANT DOES FOR SELF

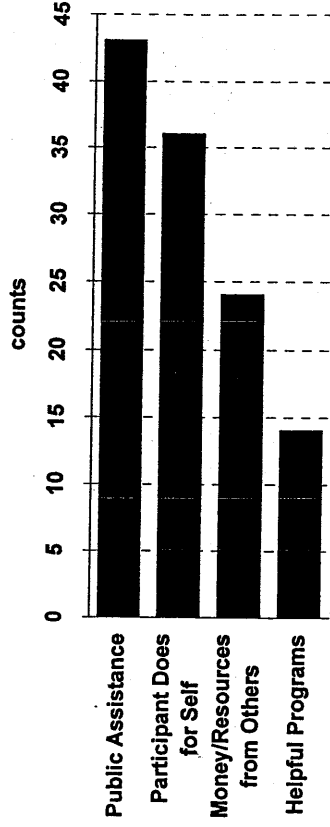
- inner strength/confidence/determination
- getting education
- getting married

MONEY & RESOURCES FROM OTHERS

- help from friends or family — money, child care
- child support
- living with boyfriend/sharing expenses
- alimony

HELPFUL PROGRAMS AND BENEFITS

- health insurance from employer
- student loans (covers living expenses)
- Salvation Army
- YMCA program scholarships for child care
- domestic violence shelters & transitional housing programs
- Head Start



What policy makers need to know

PROBLEMS WITH SYSTEM

- one size does not fit all
 - ◇ need to personalize and individualize program
 - ◇ people who really need help are not getting services
- old system gave women a fighting chance and hope for the future
 - ◇ now women cannot afford to leave an abusive relationship
 - ◇ problems with those delivering the system
 - ◇ emphasis on case reduction instead of needs of family
 - ◇ caseworkers need training to minimize errors
 - ◇ negative attitudes of caseworkers
 - ◇ caseworkers do not seem to know what the rules/eligibility requirements are
 - ◇ caseworkers withholding information
 - ◇ caseworkers are lying
 - ◇ the sanctioning procedures and reasons are not explained
 - ◇ is not working the way the State says it is
 - ◇ child care funding next to impossible to successfully access
 - ◇ co-payment for child care is too high
 - ◇ benefits are terminated even when having only a part-time job

* Preliminary results from 149 in-depth interviews of women in 8 Wisconsin Communities

Charting the Journey Out of Poverty* - Assists and Changes Needed

- speed of changes
 - ◊ need more gradual transition
- program needs to focus on fathers, too, not just mothers

EDUCATION

- women need education to become self-sufficient
- need resources until finished with school (cash benefits, food stamps, medical, child care, et cetera)
- education is what gets women off welfare permanently
- need basic skills training
- need to learn English
- allow hours toward education to be considered job training/work experience

MEDICAL

- health problems and no health insurance
- rural doctors and dentists not taking medical assistance
- need universal health care
- disabilities prevent some women from working even part-time

JOBS AND WAGES

- women want to work but need some resources (child care, health care, et cetera) to do it
- minimum wage workers cannot afford to take time off work to sign up for benefits (process is too lengthy)
- need at least a 4 year degree to earn self-sufficiency income
- support needed while women transition from not working to full-time work
- need more family supporting jobs

CHILD SUPPORT

- agencies are not helpful

CHILD CARE

- needed for children up to age 12 and all disabled children regardless of age
- flexible policies at child care centers, e.g. cannot afford to pay for day a child is not there just to "hold the slot"
- allow access to child care for women going to school
- need 24-hour child care centers for shift workers

TRANSPORTATION

- rural communities need public transportation system

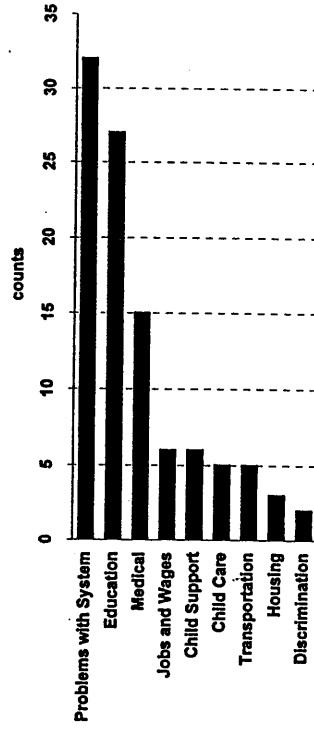
HOUSING

- need more low-income housing

DISCRIMINATION

- women should not be punished for choosing not to get married
- should be allowed to get a 4-year degree

WHAT POLICY MAKERS SHOULD KNOW



for more information contact:

Victoria Hansen

715-425-2762

Ruth Kalms

715-425-0498

* Preliminary results from 149 in-depth interviews of women in 8 Wisconsin Communities

Women and Poverty Public Education Initiative: Charting the Journey out of Poverty*

Fact Sheet: Background Factors

Childhood

Physical abuse

- Grew up in homes where physical abuse was present

Lack of support

- Death of parent or other situation where family was unable to provide financial or emotional support lead young girls to turn to boyfriends/peers for support, resulting in:
 - Pregnancy
 - Drug/alcohol abuse
 - Poor performance in school

Poverty

- Mother left alcoholic and/or abusive father when children were young, resulting in them growing up in poverty

Poor school performance

- Stemming from:
 - Education not valued for female children in home
 - Female children taught to be "proper wives and mothers", often being told they would never amount to anything else.
 - Did not get attention or recognition they needed because of:
 - Possible learning disabilities
 - Being a minority

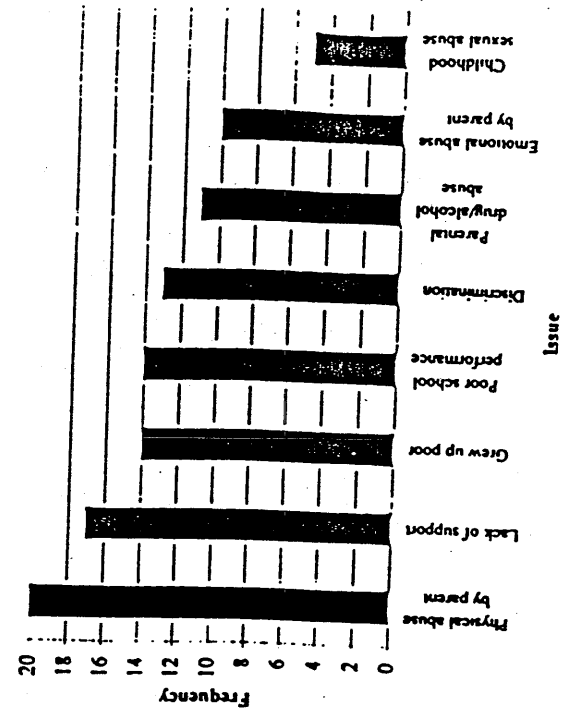
Discrimination

- Families had racist attitudes towards one of her parents

Other abuse

- Grew up in homes where drugs/alcohol were abused
- Grew up in homes where emotional abuse was present
- Childhood sexual abuse led young girls to attempt to escape the family by getting pregnant

BACKGROUND FACTORS: CHILDHOOD



*Preliminary results from 149 in-depth interviews of women in 8 Wisconsin communities.

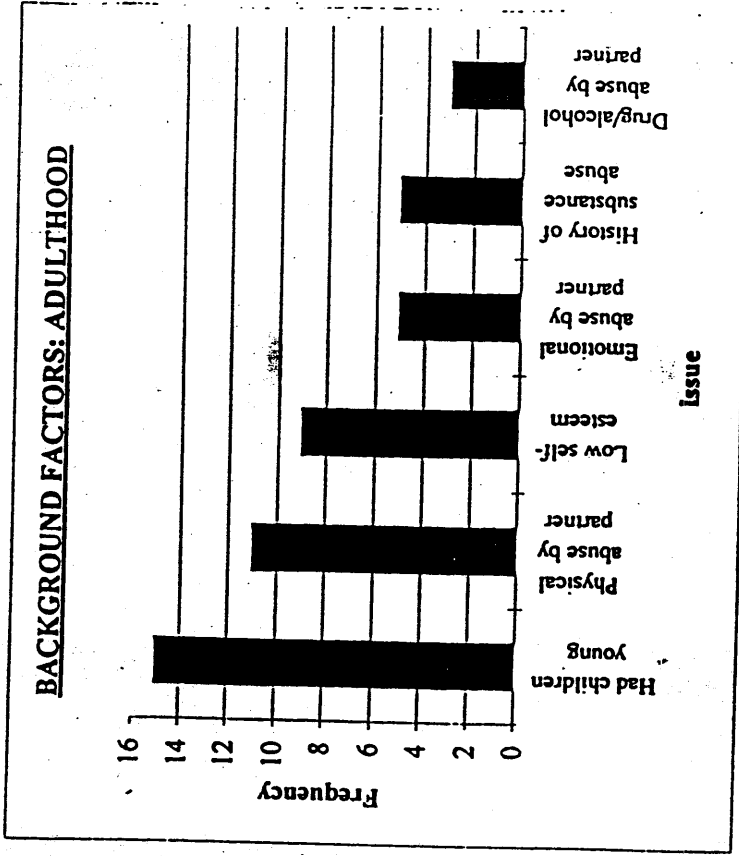
Adulthood

Where abuse was present in the home, girl children were more likely to:

- Have children early in life, often with men who were also abusive and/or had addiction problems.
- Grow up to marry or have children with men who were physically abusive.
- Suffer low self-esteem, depression, and thoughts of suicide. These issues with self-esteem influenced many of their decisions as adults.
- Grow up to marry or have children with men who abused drugs/alcohol.

Women who had other difficult childhood experiences were more likely to:

- Grow up to marry or have children with men who were emotionally abusive.
- Have a history of substance abuse



for more information contact:

VICTORIA HANSEN 715-425-2762

or RUTH KALMS 715-425-0498

SHORELINE MANOR, INC.

A Community Based Residential Facility funded in part by Racine County
1403 West 6th Street • Racine, Wisconsin 53404
Phone: 414-637-1440 ~ Fax: 414-637-1761

April 8, 1999

TO: The Joint Finance Committee of the Wisconsin State Legislature

FROM: Consumers of Mental Health Services at Shoreline Manor

Please accept this letter as a petition and formal request to be heard. We are tax paying citizens and voters of Racine County. We reside at Shoreline Manor, a Community Based Residential Facility in Racine. Shoreline Manor receives much of its funding from the Community Aids portion of the state budget. Community Aids is the primary source of funding for people like us, recovering from mental illness. For much of our adult lives many of us have suffered from serious brain disorders, but we are human beings, and Shoreline Manor is our home. Prior to coming here we often found ourselves going in and out of hospitals, being homeless, or living in unhealthy situations. What is the cost of even one hospitalization? Often more than it costs to keep one person at Shoreline Manor for a whole year. Aside from severe brain disorders such as Schizophrenia, Bipolar Disorder, Depression, and Borderline Personality Disorder, to name a few, many of us also have a number of serious physical conditions for which we need the assistance of the staff to keep us healthy. Some of these physical illnesses are: Parkinson's disease, alcohol or drug dependence, Lymphoma, end stage renal disease, diabetes, chronic obstructive pulmonary disease, seizure disorder, osteo-arthritis, degenerative joint disease, and Graves disease. With the support of the staff we have gotten through a successful cornea transplant, hysterectomy, cataract surgery, hip replacement and various other illnesses and injuries too numerous to mention here. Shoreline Manor assists us with the care and support necessary to stay healthy, out of costly institutions, hospitals or nursing facilities. This is a stable loving environment in which we can experience the caring support of the staff to help us meet our goals. You have already made significant cuts to Community Aids in Racine County, seriously impairing the ability of programs like Shoreline Manor to care for the sick and disabled. If the Community Aids Funding is reduced further, and Shoreline Manor can no longer provide this service, where will we go?

Please restore the cuts to Community Aids. We depend on the services funded by Community Aids dollars to survive, and to function in a community setting such as Shoreline Manor.

Sincerely Yours,

The Undersigned Residents of Shoreline Manor

LOUIE NORUP	Gary Harvey	Walter Doherty
J. Luba	Knight	Delores [unclear]
Ryan [unclear]	Walt [unclear]	John Albert Brown
Jim Garrison	Allyson Bailey	Carolyn Bailey
Rose Nalbadia	Rennia Smith	E. Kemke
Vincent Gault	Gorema Jones	Arthur [unclear]
Charles Wilson	Brenda Conley	Flora [unclear]
Lois Robine	Ebenezer Anderson	Ken Larson
M. Zilber	Frank [unclear]	Bob Braden
Bill Jones	James H. Chambers	JOHN [unclear]
Mary Spencer	Diane L. Bwem	Debra Detayle
Kim [unclear]	walter J. Swiri	Judy [unclear]
Kim Valot	Spj [unclear]	JOAN M. Wells
Alan Nicholas Pablak	Patricia [unclear]	Helen Stone
Mary Martinez	Antony Tockler	Eugene Klulite
Sue [unclear]	Alice Aiello	Mr. Ronald [unclear]

Comments for the Hearing on the 2000-01 Budget

Community Aids Funding has been the primary way Racine County and other Wisconsin Counties have received needed state funding to pay for Human/Social Service Programs since 1979. A Community Aids formula based on need, ability to pay and an urban-rural factor is used to distribute millions of dollars of State funding each year to support programs the benefit Developmentally Disabled, Elderly, low income families, the Mentally ill, Alcohol and Drug Dependent persons, victims of child abuse and neglect, etc. The funds are used locally to pay for services such as: Work related and day services, community living/support services, crisis child care, community residential and treatment services, specialized transportation, inpatient and institutional care, community prevention and many more.

Unfortunately, the State of Wisconsin has not maintained its commitment to adequately fund Community Aids. Counties across the State have been forced to use County property tax dollars each year to provide for their most vulnerable citizens since 1988. Increased demand for service and insufficient State funding has caused the amount Wisconsin Counties are supplementing Community Aids to grow from approximately \$50 million in 1986 to almost \$250 million in 1997. In Racine County, this shortfall represented a reduction of \$550,000. In Community Aids Funding since 1996 which represents a significantly larger loss of actual purchasing power when inflation is taken into account.

The last six years have been especially difficult because Community Aids dollars from the state were not just held constant, they were decreased! In addition to the programs or service Racine County had to eliminate in 1999 due to the 2.9% cut in Community Aids Funding, the County has been forced to establish waiting lists for various programs. At the present time there are 66 developmentally disabled persons waiting for vocational programs, 24 citizens waiting for Alcohol/Drug Abuse Residential Treatment, 106 children waiting for the Family Support Program, 21 individuals waiting for funding for specific service through the Community Integration Program (CIP) or the Community Options Program (COP).

This is unfortunate because the Racine County Human Services Board had worked hard to minimize waiting lists and the Community Aids funding cuts were announced after the 1999 Racine County Budget had been adopted. Furthermore, this segment of the population appears to have been forgotten and neglected by the lawmakers in Madison. The proposed State Budget for 2000-01 does not provide any increases in Community Aids Funds. These waiting lists are only going to grow larger with more programs/services being eliminated if the Governor's proposed budget is passed.

As a Racine County Board Supervisor, Secretary of the Racine County Human Services Board, and most importantly the parent of a developmentally disabled child, I implore the Joint Finance Committee to restore the 2.9% cut in Community Aids funds and provide for an annual increase based upon the rate of inflation.

Specifically, I ask State Representative Cloyd Porter and Senator Kim Plache to take a leadership role and bring this message back that our most defenseless citizens deserve funding and support. Sometimes I wonder if this segment of our society gets ignored because their disabilities prevent them from actively participating in the democratic process and voting. Be assured, they have friends and relatives who will be watching to see that these critical Community Aids funds are restored. I would hope that you would concur that helping the neediest in our society is more important than building prisons!

In your heart, I know that you will not turn your back on them. Thank you.

Kenneth A. Vetovec
716 Hiialeah Drive
Racine, WI 53402-2158
414-639-5153

ALSO

JOSEPH BELONTE

AND

JACK DONOVAN

1101 SUNNYSLOPE

RACINE, WI

RACINE
HUMAN
SERVICES
BOARD
MEMBERS

We, as Foster Parents and Adult Care Providers and clients of these programs, are against the Governor's Proposal to cut or freeze human service revenues. We recommend, as consumers of community programs and as citizens of Racine County, that revenues be increased to make community programs even more effective.

<u>Name</u>	<u>Address</u>
<u>Naureen Upchurch</u>	<u>537 Admiralty Dr</u>
<u>Florine Lewis</u>	<u>145 Ohio St.</u>
<u>Su B. (Sonia Tellez)</u>	<u>404 N. Memorial St., Racine, WI</u>
<u>Janet Patterson</u>	<u>260 Jones St Racine, WI</u>
<u>Margaret Morrison</u>	<u>1226 Center SP</u>
<u>Marcela Kelly</u>	<u>1333 Oakes rd #1</u>
<u>Georgia Cotton</u>	<u>2322 Monroe ave</u>
<u>Est. L. John</u>	<u>Bessie John 4909 Regal Ct</u>
<u>Fran Wender</u>	<u>7321 Cliffside Dr</u>
<u>DAWN BURKE</u>	<u>6725 SPRUCE LN. - WATERFORD</u>
<u>Curtney Lewis</u>	<u>6018 22nd ave KENOSHA</u>
<u>Amy E. Evans</u>	<u>3232 S. Illinois Ave Milwaukee</u>
<u>Lisa Miller</u>	<u>4615 36th AVE #4 Kenosha</u>
<u>Michelle Warren</u>	<u>525 Walnut St. Burlington</u>
<u>Pamela Londas</u>	<u>3511 28th ave Kenosha</u>

SHORELINE MANOR, INC.

A Community Based Residential Facility funded in part by Racine County

April 8, 1999

The Joint Finance Committee of the Wisconsin State Legislature
Public Hearing at Case High School
Racine, Wisconsin

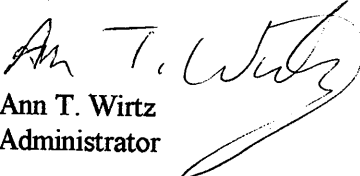
Dear Honorable Members of the Joint Finance Committee:

I am writing on behalf of Shoreline Manor, a Community Based Residential Facility with a capacity of 60 adult residents. Shoreline Manor receives much of its funding from the Community Aids portion of the state budget. The proposed reductions in Community Aids Funding of 22% would severely limit the ability of Shoreline Manor to provide care and support for the severely disabled individuals placed at the facility by the Racine County Human Services Department.

Community Aids is the primary source of funding for people recovering from mental illness, yet this funding has been stagnant for the past five years, and there was a 2.9% reduction last year. At the same time that you are proposing these cuts, demand for services is increasing in Racine County, with 200 new people joining the system during the past two years. Who are these people? They are mothers, fathers, grandmothers, brothers, sisters, aunts and uncles. They have held occupations in industry, service, health and education. They have been students and homemakers. They have also experienced multiple hospitalizations, homelessness, and addictions. Shoreline Manor is providing them with a stable caring environment in which their many needs can be met and they can begin to recover to the greatest extent possible. You have already made significant cuts to Community Aids in Racine County, impairing our ability to care for the sick and disabled of this community. What will happen to these people if services such as those provided by Shoreline Manor are no longer available? What would you do if this were happening to a member of your own family? I believe you would advocate on their behalf as we are doing here today and demand that the present level of funding to Community Aids be increased above the 1998 level. Thank-you.

I would also like to address the issue of Long Term Care Redesign. Shoreline Manor supports the need to remove Long Term Care Redesign from the rest of the Governor's budget. We agree that citizens with long term care needs have a right to ease of access to the system. A "one-stop shopping" concept sounds great in theory. In practice, to replace the present system with an HMO model is frightening to providers like us who have had success with the present system locally controlled by Racine County. Why not build on what does work instead of scrapping the entire system? By removing Long Term Care Redesign from the present budget we would have more time for study and comment through debates and hearings. With a change as massive as this is intended to be, and with so many implications for providers, we deserve to have the opportunity to debate all aspects of the proposed Long Term Care Redesign. Thank-you.

Sincerely Yours,


Ann T. Wirtz
Administrator

1403 WEST SIXTH STREET, RACINE WISCONSIN 53404
Phone 414-637-1440 -- Fax 414-637-1761

April 5, 1999

Senator Kim Plache
PO Box 7882, Rm. 305
Madison, Wisconsin 53707-7882

Dear Senator Plache:

My name is Kay Johnson, and I am currently employed by a social service agency called Professional Services Group. This agency is one of many which will be directly effected by further budgetary elimination's to Community Aids Funding. Our agency works with families which are at risk of being separated due to issues or neglect, abuse, alcohol and other drug abuse, etc. Without programs such as ours, children are at a greater risk of being removed from the home, and families are denied the to opportunity to leave behind various avenues of dysfunction which prohibit them from existing as a whole and healthy family unit.

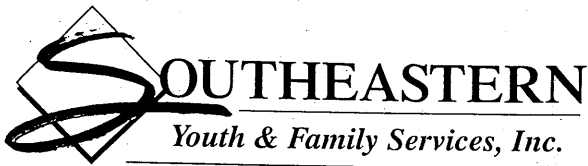
Further decreases to this funding source in the 2000-2001 State budget will be a great disservice to the families which Professional Services Group are able to assist. The families which we serve benefit greatly from the early intervention and preventative programs which this agency and many like it are able to provide. We work at preserving the family unit. A loss of funding to Community Aids will not be cost effective in the long run, simply because without intervention and preservation programs such as ours, families will become more dysfunctional and will need to be in the child welfare system for longer periods of time, thus causing a greater need of tax dollars to assist them in reaching the ultimate goal of operating as a complete family system. Please do whatever you can to assist the families in which we serve from suffering further loss of services due to additional reductions to the Community Aids Funding.

Sincerely,



Kay Johnson, B.S.W.

cc: Robert Wirch
Mary Lazich
Robert Turner
John Lehman
Bonnie Ladwig
Cloyd Porter
Scott Gunderson



8008 West Capitol Dr. • Milwaukee, WI 53222 • (414) 464-1800 • FAX (414) 464-1804

April 6, 1999

Representative Cloyd Porter
P.O. Box 8953
Madison, WI 53708

Dear Representative Cloyd Porter,

On behalf of children and families served by our agency and as Executive Director, we strongly urge your support of action to restore Community aids funding to Milwaukee County. While all other counties will face a reasonable and equitable cut of 2.9% in Community Aids, Milwaukee County's share are to be decreased by 13% (equalling \$2.9 million) from current levels.

Our agency staff and board members feel the stress created out of the continuous changes brought on by service delivery reorganization. Other programs experience this same difficulty but can tell you better the direct impact on treatment and care for individuals. We feel the State Legislature, through action by the Joint Finance Committee, should use \$2.9 million from its emergency contingency fund to solve this critical problem. We urge you to support action that would correct this inequity. Thank you.

Sincerely,

A handwritten signature in cursive script that reads 'John H. Molenaar'.

John H Molenaar
8008 W Capitol
Milwaukee, WI 53222
1-414-464-1800

home: N78 W 14942 Pueblo
Menomonee Falls, WI 53051

P:\state\ltr99.wps

MEMORANDUM

TO: Honorable Members of the Joint Committee on Finance

FROM: Leroy Bley, Ozaukee County Board Chair

DATE: April 8, 1999

SUBJECT: 1999-2001 State Budget

Thank you for the opportunity to submit comments regarding the proposed state budget. This budget, as proposed, could have serious financial implications for Ozaukee County property taxpayers. There are three main issues that I would like to briefly comment on: community aids, youth aids and courts.

Community Aids

Ozaukee County, along with every other county in the state, suffered two Community Aids cuts in calendar year 1999, due to cuts in the Social Services Block Grant (SSBG). In total, these cuts amount to over \$90,000 for Ozaukee County alone. Unfortunately, the proposed budget provides no relief to counties for these SSBG cuts, yet counties will still be serving the same clientele. In 1997, Ozaukee County provided over \$2.7 million in county overmatch to supplement state and federal community aids funding. While the state mandates that counties provide services to individuals with physical and mental disabilities, abused and neglected children and the aging, the state does not provide sufficient funding to cover county costs. I respectfully request that this committee take action to: 1) fully fund the 3.4% federal cuts passed on to the counties by the state of Wisconsin, 2) provide annual increases of at least 3% to the community aids appropriation, 3) delete the statutory requirement for performance measures and the corresponding withholding of \$9 million.

Youth Aids

Ozaukee County is also mandated by the state to provide juvenile correctional and prevention services. The state pays for a portion of the services provided by counties under the youth aids program. As is the case with community aids, Ozaukee County provides funding to supplement the state youth aids appropriation. In 1997, the state's youth aids appropriation funded less than 50% of juvenile delinquency services provided statewide. Ozaukee County spent close to half a million dollars in 1997 on youth aids related expenditures and amount increases annually. To ease the burden juvenile correctional services places on Ozaukee County, I ask that you undertake the following

MEMORANDUM

To: Senator Kim Plache
Representative Cloyd Porter

From: Barbara Chaussee

Subject: Budget Allocations [AGAINST]

Date: April 7, 1999

As a Racine County resident, I want you to know that I am deeply mortified about the Governor's proposed biennial budget which drastically slashes funds for community services, specifically the Community Aids, and undermines Youth Aids services. More needs to be done to enhance preventative services for our youth - not less. It appears the basic philosophy is to mandate more and fund less. As dedicated and creative as human services staff are, they cannot work miracles while their foundation is being eroded.

Please use whatever resources you have to correct this serious undermining of community services. Thank you.

Barb Chaussee
2314 Geneva ST.
Racine, WI 53402

MEMORANDUM

To: Senator Kim Plache
Representative Cloyd Porter

From: Barbara Chaussee

Subject: Budget Allocations [AGAINST]

Date: April 7, 1999

As a Racine County resident, I want you to know that I am deeply mortified about the Governor's proposed biennial budget which drastically slashes funds for community services, specifically the Community Aids, and undermines Youth Aids services. More needs to be done to enhance preventative services for our youth - not less. It appears the basic philosophy is to mandate more and fund less. As dedicated and creative as human services staff are, they cannot work miracles while their foundation is being eroded.

Please use whatever resources you have to correct this serious undermining of community services. Thank you.

Barb Chaussee
2314 Geneva St.
Racine, WI 53402

Beverly Biedron-Turner
3110-15th Street
Kenosha, WI 53144

April 5, 1999

TO WHOM IT MAY CONCERN:

I am aware that funding may be in jeopardy for "at risk" youth. I believe that it is essential to maintain funding for prevention, intervention, and community-based programs. This will be cost effective in the long run. It not only helps the taxpayers of this community, but it helps the youth and families being served. This is definitely a "win/win" situation.

As the parent of a youth who is not at risk, I also benefit from the services community-based programming provides. My child, a new high school student this year, was threatened and approached with violence. Workers in place at the high school level through community-based programming were there to help diffuse the situation. Help was available for all youth involved as a result of having a county funded program in place at the high school level. Again, we witness a "win/win" situation.

As parents, citizens and leaders of the community, how could we be willing to make such cuts?

I ask that you reconsider your position and increase funding in the targeted areas of need.

Sincerely,

Beverly Biedron - Turner

Beverly Biedron-Turner

To: Senator Kimberly M. Plache

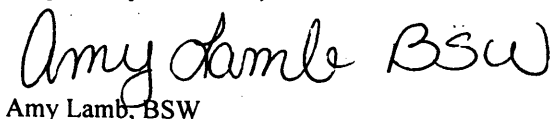
From: Amy Lamb, Assistant Supervisor of Family Strengths/ Parent Mentoring Program

My name is Amy Lamb. I am currently working at Professional Services Group and Community Impact Programs as the Assistant Supervisor of the Family Strengths/ Parent Mentoring Program.

I am writing to you about the Governor's budget proposal for 2000 -01. The proposal now does not restore the previous 2.9% cut nor does it provide an increase in Community Aides funding above the 1998 level. This proposed minimal increase in the Youth Aid funding will be offset by increases in the cost of State Juvenile Correctional Institutions, Title 19/Medical Assistance providers will only see a maximum of 1% increase and the planned roll out of the Family Care Plan will further reduce Community Aids Funding by 22%.

In the Family Strengths/ Parent Mentoring program our goal is to keep families together and reunify them. We help keep children out of foster care and help them move out of foster care faster. Which is saving all of us money. With the current proposal programs like this and many others will be cut or eliminated. Many of these programs are preventive and early intervention services. It is very obvious just by watching the news that the Corrections system is not the answer for many people. This can be seen by the fact that new adult prisons are being built constantly. The population in the adult system is only going up and will continue steadily if not faster if the prevention and intervention programs are cut and eliminated. Why not give our youth a fair chance and keep these programs that help around for them. It can only help our future not hurt.

Respectfully Submitted,


Amy Lamb, BSW

Family Strengths/ Parent Mentoring Assistant Supervisor

MILWAUKEE HUMAN SERVICES COALITION

4906 W. FOND DU LAC AVE.

MILWAUKEE, WI 53216

414-449-4777

Position Statement

The 2.9 Million Dollar Cuts in Community Aids for Milwaukee

The organizations making up the Milwaukee Human Services Coalition believe that the \$2,900,000 cut in Community Aids for 1999 will have a severe impact on the Milwaukee community which continues to struggle to provide support and service to persons and families in need. Elderly, people with disabilities, children, homeless families and others in crisis need every dollar of support which community aids provides.

This is a community crisis which must be addressed immediately. Without any relief from the State of Wisconsin, the community will experience 15% across the board cuts in emergency services, day services, AODA treatment, mental health programs and programs which help people with disabilities, including children, live independently in the community.

For example, 428 persons with mental health issues will not receive outpatient treatment; 550 persons with AODA treatment needs will be denied help; 25 developmentally disabled adults will be denied residential services; 92 children will not be provided day treatment services and 280 children will go without temporary shelter; 128 children in the Birth to Three program will be suspended; and 2080 shelter nights for families will be eliminated.

Communities across Wisconsin are experiencing a 2.9% cut in Community Aids for 1999, while the Milwaukee community is experiencing the equivalent of a 13% cut. Milwaukee County has made repeated attempts to have the Department of Health and Family Services address this issue and has not received a satisfactory response. This inequity must be addressed by the Wisconsin State Legislature because of its public concern for the welfare of the Milwaukee community.

To deal with the short term crisis, we request that the Wisconsin State Legislature, through the Joint Finance Committee, use 2.9 million dollars in its emergency contingency fund to solve this major problem; and we request that this be done during the month of March in order to prevent Milwaukee County from having to make cuts in support and services which are already in place for 1999.

To deal with the long term issue, we request that the Wisconsin State Legislature establish a work group to address some of the issues relating to public policies associated with Community Aids funding for Wisconsin communities. The Federal cuts which have been taking place during the last ten years have resulted in dramatic cuts in needed community services for all people in need. We believe that we need a new Wisconsin policy which can address the issue of Federal cuts within the Community Aids program and its impact on local communities.

Without action on these two issues, the future of the Milwaukee and other Wisconsin communities, in providing necessary support and services for individuals and families in need, is bleak.

February 11, 1999

Third Draft



Wisconsin Council 40
AFSCME, AFL-CIO

8033 Excelsior Drive, Suite B
Madison, Wisconsin 53717-1903
Phone: 608 836-4040
Fax: 608 836-4444

Michael Murphy
President
Robert W. Lyons
Executive Director

Testimony of John Maglio, Staff Representative
AFSCME Council 40
Joint Committee on Finance Budget Hearing
Thursday, April 8, 1999 -- Racine, Wisconsin

Hello. My name is John Maglio and I represent AFSCME Council 40 members who work for local units of government in Racine, Kenosha, and Waukesha counties. I'm here to urge your support for an increase in two very important appropriations that provide critical services to the most vulnerable citizens in our communities: Youth Aids and Basic Community Aids. I would also like to address our concerns with the Governor's Family Care proposal.

Many of the programs funded by Youth Aids and Community Aids are mandated by the state. The shortage of funds has caused the costs for these mandated services to be shifted to the local county tax levy. This pressure on the levy results in waiting lists for non-mandated programs as well as cuts in other important services that counties provide.

The shift from state to county funding of Youth Aids services has been quite dramatic. In 1982, the Youth Aids appropriation funded 92 percent of all county costs for serving juveniles. By 1997, it only paid for 45 percent of the costs, \$82.3 million. Counties now contribute more than the state--around \$100 million per year, primarily from property taxes to fund the other 55 percent of costs associated with the services.



in the public service



We would urge this committee to consider the following measures to rectify the Youth Aids funding dilemma:

1. Increase the Youth Aids appropriation over the 1998-99 base by 5 percent in each year of the biennium. The Governor's budget provides a 2% increase in the appropriation each year of the biennium.
2. In the statutes, re-link juvenile corrections rate increases with the requirement that the state increase the Youth Aids appropriation to cover the rate increases.
3. Update the current formula and hold harmless those counties that lose funding under the update.

We are equally concerned with the pressures present in our programs that are funded by the Basic Community Aids allocation. Community Aids provides counties with funding to partially pay for mandated services to abused and neglected children and their families, adults with serious and persistent mental illness, older adults, and adults and children with developmental disabilities.

The funds for Community Aids have been frozen or decreased the past two budget biennia. Increased client populations and increasing costs for services have pressured counties to provide significant "overmatch" to the funding pot. In 1997, 252.6 million county tax dollars matched and overmatched the Community Aids allocation from the state. That amount is greater than the \$175 million state GPR appropriation.

The Governor's budget reduces the Community Aids appropriation by 2.5% and 1.8%, respectively, in each year of the biennium. It also transfers \$14.3 million over the biennium into Family Care and proposes withholding \$9 million over the biennium to distribute to counties based on performance requirements. It also proposes to reduce each county's appropriation by an amount to be determined by the Department of Health & Family Services when a county is

providing services funded by Community Aids to a consumer with a disability who will received services under the proposed MA purchase plan.

These recommendations will seriously undermine the services counties are providing to their citizens. We urge this committee to halt the continual degradation of the Community Aids appropriation by supporting the following:

1. Increase the Community Aids appropriation by at least 3% in each year of the biennium.
2. Delete the statutory requirement for withholding \$9 million of the Community Aids allocation and the performance measures.
3. Delete the statutory authority to transfer Community Aids into Family Care based on a flat percentage. A fairer measure to place Community Aids funds into Family Care would be for the department to negotiate with each individual pilot county to determine the proportion of Community Aids currently funding the types of services to be offered in Family Care.
4. Delete the statutory requirement to reduce a county's Community Aids allocation if a former recipient of services funded by the allocation is a participant in a MA purchase plan.

Many counties are reaching or have reached the tax levy limit ceiling, and with little or no property growth cannot continue to levy additional taxes to cover these increased costs. Yet the demand to provide services continues to grow.

Finally, while AFSCME has generally supported the concept of Family Care, we would recommend several changes to the program as proposed in the Governor's budget:

1. We would recommend that more than one model be piloted. Testing only the model in the Governor's proposal assumes this to be the only model that may meet the goals that you, and the Governor, have for this system of care. A non-risk based model, which would be based upon what the counties are currently doing that works, would not require the creation of duplicative bureaucracies such as the Family Care Districts.
2. We strongly oppose the statutory changes being proposed. These are not necessary for the pilot proposals to operate. Making the significant statutory changes the Department is proposing seems to be saying that it does not matter what information the pilots produce—we know what we want.

Thank you for allowing me to appear before your committee.

*Questions regarding this testimony should be directed to:
Jennifer Grondin
AFSCME Legislative Council
(608) 836-6666*

This picture was drawn by John, age 5. John participated in the I AM Special Program. The words are his own.

- ▶ Children of alcoholics are more at risk for alcoholism and other drug abuse than children of non-alcoholics.

This is my
mom.
of the
bar.



Sometimes
I pretend that
soda is beer
and I'm drunk!

ALCOHOL & OTHER DRUGS COUNCIL OF KENOSHA COUNTY
Impact of Community Aids Funding on Program Services
Joint Finance Committee Budget Hearing
April 8, 1999

Executive Summary

Community Aids funds a number of programs at the Alcohol & Other Drugs Council. For example, \$35,000 from the Kenosha County Division of Disability Services supports I AM SPECIAL, BABES, FAST, and Community Awareness; \$31,000 from the Division of Children & Family Services funds the Children's Safe House and the Voices for Children CASA Program.

I AM SPECIAL is a six-week support group program for children, aged five through 12, whose parents are recovering and/or have identified substance abuse problems in their lives.

BABES (Beginning Alcohol and Addictions Basic Education Studies) Program is designed to help children, aged three through eight, develop positive living skills.

FAST (Families & Schools Together) is a curriculum-based prevention and early intervention program designed to help parents 1) work more harmoniously with school staff to ensure a successful educational experience for their child and 2) develop and enhance positive parenting skills.

Community Awareness Services are based on the concept that prevention is an active, on-going, community-wide process of creating conditions and personal attributes that promote the well-being of people.

The **Children's Safe House** is a group foster home with a capacity of eight (8) beds and provides services designed to assist families in crises, prevent the abuse and neglect of children, and increase family stability.

Voices for Children CASA (Court Appointed Special Advocate) Program provides services to children under the age of 12 who are adjudicated to be in need of protection and services due to abuse and neglect.

Evaluation of these programs indicates that they make a difference in people's lives and these programs are not provided elsewhere in the community. **The Board of Directors of the Alcohol & Other Drugs Council urges the State Legislature to increase the Community Aids appropriation in the 1999-2000 biennial budget by at least 3% in each year of the biennium.**

ALCOHOL & OTHER DRUGS COUNCIL OF KENOSHA COUNTY
Impact of Community Aids Funding on Program Services

Community Aids supports a number of programs at the Alcohol & Other Drugs Council. For example, \$35,000 from the Kenosha County Division of Disability Services funds I AM SPECIAL, BABES, FAST, and Community Awareness; \$31,000 from the Division of Children & Family Services funds the Children's Safe House and the Voices for Children CASA Program.

I AM SPECIAL is a six-week support group program for children, aged five through 12, whose parents are recovering or have identified substance abuse problems in their lives. The purpose of the program is to help children learn 1) more about alcohol and other drugs and their effects on families, and 2) how to deal with their feelings regarding alcohol and other drugs in positive ways. In 1998, almost 50% of the children served in the program were living in a home where one parent was actively using/abusing drugs.

- ★ 100% of the children participating in the 1998 program were able to:
 - ▶ State the difference between legal, illegal and prescription drugs;
 - ▶ State three negative ways alcohol and other drugs impact their life;
 - ▶ State three ways they can deal with their anger without hurting themselves or others;
 - ▶ Identify three resources that they can go to if they are in trouble or need support.

BABES (Beginning Alcohol and Addictions Basic Education Studies) Program is designed to help children, aged three through eight, develop positive living skills. The overall objectives of the program are to 1) promote the importance of the value of self worth; 2) encourage youth to maintain good personal health; 3) educate youth on alcohol and other drug addictions; and, 4) promote a healthy, drug-free lifestyle. In 1998, 34 BABES presentations were provided to 628 children at 18 different sites throughout Kenosha County. Fifty-eight percent (58%) of the children attended schools in the western part of the County.

- ★ In the program evaluation, teachers commented that BABES was a positive, beneficial program with important messages for children to learn. As one teacher said, "It is important for children to know the facts early."

FAST (Families & Schools Together) is a curriculum-based prevention and early intervention program designed to help parents 1) work more harmoniously with school staff to ensure a successful educational experience for their child and 2) develop and enhance positive parenting skills. In 1998, 76 families participated in seven 12-week FAST sessions at four sites. Program evaluation results show that:

- ★ 100% of the participating teachers reported a reduction in at least one negative behavior in students participating in the FAST Program;
- ★ 91% of participating parents reported that participation in the program strengthened their relationship with their child;
- ★ 80% of participating parents reported that they had improved their parenting skills while participating in the program.

Community Awareness Services are based on the idea that prevention is an active, ongoing, community-wide process of creating conditions and personal attributes that promote the well-being of people. Services are designed to educate the public on the positive factors that result in healthy lifestyles, as well as the negative consequences of substance abuse.

- ★ Council staff responds to almost 500 individual requests for information each year. The most common requests are for information on substance abuse, self-help group meetings, and parenting classes.
- ★ More than 1,500 people visit the Council booth at the Kenosha County Fair.
- ★ Special awareness campaigns include the Holiday Drunk Driving Campaign, Safe Snowmobiling, and Safe Boating.
- ★ Each year, the Alcohol and Other Drugs Council provides 20 - 25 presentations on various substance abuse issues to approximately 2,000 people in Kenosha County.
- ★ Each year, the Council distributes over 10,000 pieces of literature relating to alcohol and other drug abuse.
- ★ More than 150 videos are available to the community through a lending library.
- ★ The Council also maintains a Web Page which provides substance abuse information and links to other informational websites.

The **Children's Safe House** is a freestanding facility at 1630 - 56th Street in Kenosha, WI.

The State of Wisconsin licenses the large two-story house as a group foster home with a capacity of eight (8) beds. The facility has seven bedrooms with cribs and single beds, a large play area, a living and dining area and a well-equipped kitchen. A small wing attached to the house provides a conference/education room, and three offices, two of which are suitable for counseling. Services offered at the Safe House are designed to help families in crises, prevent the abuse and neglect of children, and increase family stability.

In 1998, the total unduplicated number of children served at the Safe House was 278. Of this number, 218 children received child care services with 139 children utilizing 3,319 days of long term child care (average of 23.9 days per child) and 159 children utilizing 4,721 hours of short term child care (average of 29.7 hours per child). One hundred three (103) children from 52 families received 2,836 hours of Family Support Services including youth activities and support, in home support, and participation at the Parent Training Center. One hundred forty-one (141) parents attended the Parenting Classes. Of these 114 (81%) completed the entire 10-week series. Twenty-six parents (18%) voluntarily attended and completed more than one series. Twenty-two of these parents had originally been court-ordered to attend the classes. Evaluation of Children's Safe House services show that:

- ★ None of the families utilizing the Crisis Nursery at the CSH received any substantiated reports of child abuse and neglect.
- ★ Of the 33 children served in the Youth Outreach Program, only one had contact with the police; that child was kept out of detention by intensifying outreach services.
- ★ 98% of the parents participating in the Parenting Classes report that they feel more confident in their parenting skills; 92% report that their relationship with their child has improved.
- ★ The Safe House takes care of drug affected babies who may be hard to place in foster care because of the physical and psychological effects of the drugs. The average stay at the Children's Safe House for these children in 1998 was 120 days.
- ★ The Safe House is large enough to accommodate siblings. In 1998, there were six groups of two-siblings and five groups of three or more placed at the Safe House. Research shows that siblings support each other in their adjustment to trauma and loss.

Voices for Children CASA (Court Appointed Special Advocate) Program provides services to children under the age of 12 who are adjudicated to be in need of protection and services due to abuse and neglect. Through the Project, the Juvenile Court Judge appoints highly trained volunteer advocates to carefully monitor and advocate for the best interests of the child in assigned abuse and neglect cases. The CASA Program was developed following the tragic death of toddler Drake London. Highlights of the Program in 1998 include:

- ★ Two CASA volunteers were trained and assigned cases in October.
- ★ A total of 7 children from 3 families were served by these volunteers.
- ★ The volunteers spent 54 hours providing home visits, collateral contacts, contacts with the assigned social worker, and appearing in juvenile court.
- ★ None of the children served by the CASA program have received any further substantiated reports of child abuse and neglect while participating in the program.
- ★ Eight (8) additional volunteers have been recruited and are currently being trained.

Recommendation

These programs work. They help families and are not provided elsewhere in the community. **Please increase the Community Aids appropriation by at least 3% in each year of the biennium to ensure the continuation of these important services.**

April 6, 1999

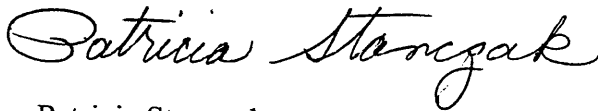
To Whom It May Concern:

My name is Patricia Stanczak and I am writing this statement as a Court Appointed Special Advocate volunteer for abused and neglected children. I am writing to ask you to please continue or increase funding for the Alcohol and Drug Council, of which CASA is a part. I contribute not only my time but my mileage, since I feel that the Council needs every penny it has to use on its many programs.

As a volunteer for well over a year, I see the good we are doing by making weekly home visits with abused and neglected children and their parents. Due to the extreme overload of cases that social workers handle, it is physically impossible for them to go to each house each week to make sure the children are all right. The CASA worker, with a limit of one or two cases, is able to make those weekly visits and observe what is going on in the home. Anything that might concern the Social Worker is immediately reported.

I understand that Social Services has many cases in which they would like us to get involved but, at this time, we only have two volunteers limited to one or two cases each. We need funding to continue our one-year-old program and to train many new volunteers. Many children have died or been severely injured because they have been returned to their homes and no one has been able to keep a close eye on what is going on. That is what we do.

Sincerely,

A handwritten signature in cursive script that reads "Patricia Stanczak". The signature is written in dark ink and is positioned above the typed name and address.

Patricia Stanczak
8640 111th Avenue
Pleasant Prairie, WI 53158

April 7, 1999

State Budget Hearing

To Whom It May Concern:

I am writing this letter as a 19 year Child Protective Worker who has extensively worked with numerous services in the Kenosha County Community. In particular, my purpose is to relate my praise for the Safehouse Programs and hope to ensure ongoing funding for it's invaluable community services. The Facility and its' Outreach Youth Programs provide professional, caring and in-dept services for the children and families of Kenosha County.

The Safehouse Facility temporarily houses up to 8 children in need of alternate placement. The Director, Jean Ptaska and her staff are extremely caring professionals who go out of their way to cooperate and coordinate with department workers and other systems they work with. The Facility provides a warm, comfortable environment for the children placed there. They are astute to the children's abilities, emotions and needs. Their ability to work with parents and families is commendable.

Their Outreach Programs of Parenting Classes, Day Care, and Youth Activities are some of the best in this community. The Youth Activity Program provides the younger children we services with positive role modeling and positive structure activities. Most of the children in this program come from dysfunctional families and have extensive emotional and behavioral problems which prohibits them from engaging in other Community Youth Groups. If not for this program these children would have no ability to experience the activities, and the team and group concepts these programs provide. One of the activities is a summer baseball team. Last summer, having 2 children on the team I attended one of the games. It was obvious these children had little talent and no experience on how to be part of team or a team player. I observed the staff diligently handling the children, their outbursts and inabilities, in a positive, nurturing way impressing the concept of fair team play.

Once again, I cannot stress enough the need to continue funding for these invaluable services in our community.

Thank you for giving me the opportunity to address this issue.

Sincerely,




Mrs. Kathleen Fliess, Child Protective Worker
Division of Child and Family Services

WALWORTH COUNTY
DEPARTMENT OF HEALTH AND HUMAN SERVICES

W3955 Highway NN, P.O. Box 1006, Elkhorn, Wisconsin 53121-1006
414-741-3300 1-800-365-1587 TTY 414-741-3272 FAX 414-741-3320

MEMO

TO: Members of the Joint Finance Committee

FROM: Thomas K. Mackesey, Director 
Walworth County Department of Health & Human Services

RE: State Budget

DATE: April 8, 1999

As you deliberate on the budget which is presently before you, I would ask you to give special consideration to your partner in providing essential health and human services to citizens of Wisconsin. The partnership the counties of Wisconsin have had with the State over the last ten years has suffered from the inadequacy of sufficient funding to carry on the increased demands at the local level. While some of these demands resulted from State mandates, others were simply the result of societal changes and problems which have resulted in increased use of local services which we are simply unable to provide without substantial increases in funding.

Since the State has been unable to assist counties in meeting these needs, we have had to request additional funds from our county taxpayers in order to keep services at a level which we feel we must retain. The State has exacerbated this problem by raising the rates it charges counties for essential supportive services such as mental health in-patient days at our state institutes and correctional charges from our youth correctional facilities. These charges, over the past 5 years, have increased in one case 27% and another 50%. This shortfall needed to be covered by the county, and in my situation I am fortunate to have supportive a county board who has stood behind essential services that our department must provide.

Walworth County has, in the past 10 years, integrated, modernized and, in many situations, privatized its operations. We have eliminated administrative overhead from 5 previously separate departments and developed one responsive, technology-assisted health and human services department. We have, meanwhile, made a county investment in prevention projects such as family preservation, Early Intervention programs for families, and alcohol and drug programs in our county correctional facilities. We have 4 model communities working under our Family Preservation program who are making significant progress dealing with the problems of our youth and families at the local level, and are seeing that these efforts will reduce the long-term reliance on the county for assistance. However, these efforts will probably be jeopardized

if limits are put on our county, which may end up forcing these programs to die while we pay the ever-increasing bills which our state facilities will pass on to us, with no limits on their ability to do so.

Any effort you can make to infuse a better sense of equity and fairness into our partnership arrangement will eventually end up assisting those for whom you are setting public policy. Many of the responsibilities that we now carry out at the county level are shared responsibilities that at one time were all state responsibilities. If we could, in good faith, share our support of those services and develop a better financial partnership, we would do a much better job of serving our citizens.

Thank you for taking the time to listen. If there is any way in which I can provide information to help you deal with the difficulties regarding this budget, I would be happy to provide same.

TKM:vm

The state budget in its present form promises a 295 million dollar tax cut without promising to pay for state mandated services. The most distressing underfunding in my opinion occurs in the Youth Aids appropriation which impacts on counties' budgets in three ways: first it fails to reasonably increase state funding for mandated services dictated by courts; second, it increases institutional rate costs; and last and most important, it effectively stifles the ability of counties to develop prevention programs. Kenosha County in 1998 was allotted 3.0 million dollars for juvenile placement costs but we spent 4.1 million.

Meanwhile shared revenues decrease, counties are under a tax cap, and the state curbs the ability of counties to raise revenues by such devices as computer tax exemption and increasing the amount of money retained by the state for administering the county sales tax program OVER AND ABOVE the already inflated cost. I am already hearing outrage about an increase in taxing Social Security income.

Other people will, I am sure, inform you as to how cuts in Community Aids will impact some of our most vulnerable citizens; they will remind you of local Transportation needs and problems; they may even remind you that the courts collect a lot of money and a great deal of it -- three million dollars, I am told -- stays in Madison. Kenosha County contributes 2,195,720 dollars alone.

I urge you members of the Legislature's Joint Finance Committee to work with the counties for the benefit of all of the citizens of Wisconsin and concentrate on our mutual welfare rather than promote a show-off tax cut which will wreak havoc in local budgets.

Presented to the Legislature's Joint Finance Committee at a Public Hearing in Racine on April 8, 1999 by Anne C. Bergo, County Board Supervisor, Kenosha, Wisconsin.

Racine Council

on Alcohol and Other Drug Abuse, Inc.

818 - 6th Street • Racine, Wisconsin 53403

Phone: (414) 632-6200 • Fax: (414) 632-2141

TO: Joint Finance Committee

FROM: John Kidd, Aftercare Coordinator
JK AC

DATE: 4/8/99

RE: Cuts in Community Aids

I am the coordinator for the Aftercare Program funded by the Racine County Human Services Department. I work with people in early recovery and as well as women and men who are in homeless shelters hoping to turn their lives around. They are in desperate need of alcohol and other drug abuse services, including relapse prevention.

Some of my clients recently learned that cuts in community aids would likely result in less service for people with substance abuse issues. Although they could not be here today, they wrote letters about how this program has helped them and can continue to help them.

Please take time to read the attached letters. It is vital that we retain services for this population. If we are to be effective in reducing alcohol/drug problems, we need to support the entire continuum of care: prevention, early intervention, treatment, and relapse prevention.

Research shows that as more people move from addiction to recovery, the community benefits through a lower crime rate, less health problems, reduced violence, fewer incidences of domestic and child abuse, and more positive contributing members of society.

