

ANNUAL REPORT 2017



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Kenosha Human Development Services (KHDS) works to help all people in the community lead healthy, productive lives. We are a nonprofit agency that seeks to ensure that all people—especially those with the fewest resources—have access to the opportunities and support they need to succeed in life. The major funding for our services comes from the Kenosha County Department of Human Services and its Divisions of Aging and Disability Services and Children and Family Services. We have a long, positive partnership with Kenosha County that has been essential in building a network of supportive community social services. The United Way of Kenosha County, the State of Wisconsin, the City of Kenosha and the United States Departments for Housing and Urban Development and Health and Human Services also provide significant agency revenue. People and businesses in the community also make donations that are greatly appreciated. It is a credit to KHDS's dedicated leaders and staff that we have earned the confidence of our funders and the community. We are grateful to be able to use donations of money and household goods to add positively to the quality of life in Kenosha.

EXECUTIVE DIRECTOR'S REPORT

Jeannine Field

My first eight months as Executive Director of Kenosha Human Development Services (KHDS) have been filled with rewards and challenges. The transition is eased by our supportive and committed Board of Directors and the compassionate, hardworking staff who stay focused on providing quality social services to our community. I have the privilege of working alongside a talented group of leaders and the former Director, Byron Wright. I am grateful to work in such a mission-driven agency.

During this past year, KHDS has seen tremendous growth and ambitious program development. For instance:

- We have added ten units of Permanent Supportive Housing (PSH) for chronically homeless people with ongoing mental health and substance abuse issues, as well as successfully attained 15 more units to be filled in 2018.
- Comprehensive Community Services (CCS), our psychosocial rehabilitation program, has grown by 33%, and we anticipate an additional 35% in 2018.
- We will double our Children's Long-Term Support (CLTS) Waiver program to serve over 300 families with children with disabilities and autism by the end of 2018.
- Crisis programs experienced a 12% increase in all contacts from 2016 to 2017, completing over 25,000 interactions.
- We have acquired, remodeled and are opening the Crisis Prevention Center and an expanded, 18-bed KARE Center.

The last, of course, is the most visible and highly anticipated addition to KHDS. The new Crisis Prevention Center will house our crisis hotline, mobile



response workers, and many of our stabilization services. We anticipate that it will become a model of crisis services for the state.

The improved KARE Center facility allows KHDS to move from the current 11-bed home built in 1865 into a newly renovated, accessible 18-bed program. We appreciate the generosity of St Matthew's Episcopal Church for their partnership since 1992, helping us provide first the Homeless Youth Program and then the KARE Center in 2001. We are thankful to the City of Kenosha and Kenosha County for making the new facility possible.

As the dedication plaque on the new building shows, it took many people's time, hard work, and commitment to get this project off the ground. Thank you Ron Frederick and Jack Rose for advocating for decades to increase services in our community. Mayor John Antaramian and County Executive Jim Kreuser negotiated acquiring the facility and the means to remodel. Partners in Design and Riley Construction are part of the amazing team and worked many hours to finalize this project. KHDS owes you each a debt of gratitude.

It was an ambitious start to my tenure as the Executive Director. I am looking at 2018 as a time to keep moving forward. We will continue to build on the legacy of our predecessors. Together with all of our talented, dedicated, and growing staff, KHDS is and will continue to be a strong asset to the Kenosha community.

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Jeannine Field

FOCUSING ON PEOPLE

MESSAGE FROM THE CHAIRPERSON

Mark Johnson

I am honored to serve another year as chairperson for Kenosha Human Development Services (KHDS) Board of Directors. The high level of professional staff at KHDS makes the position of chairperson easy to navigate. KHDS continues to be an asset to the community as we maintain and develop innovative programs to serve people in need. Our priority is teaching program participants essential life skills for living productive, independent lives. I applaud the entire staff for their hard work and dedication to serving people and our community.

KHDS continues to expand and improve its services. In a partnership with the City of Kenosha and Kenosha County and with the efforts of Jack Rose of NAMI and Ron Frederick, the former Director of Kenosha County's Disability Services, our new Crisis Prevention Center and KARE Center will move to a beautiful, newly remodeled facility. This effort is a direct result of the 2016 Mental Health Study commissioned by Kenosha County and led by LaVerne Jaros, Director of the Kenosha County Division of Disability and Aging Services.

The Crisis Prevention Center allows KHDS to have a 24-hour location that provides emergency mental health services. Both adults in crisis and children and families in need of assistance will be able to access a crisis worker in the new facility. As we are continuing to provide an immediate mobile response to crisis situations, we see that families are often looking for someone to talk with, and a place to be able to go to get help. The Crisis Prevention Center and the KARE Center will become a hub for all of these crisis services.

The past year has been a significant transition year for KHDS with Byron Wright's retirement and Jeannine Field's appointment as Executive Director. This transition is the most significant decision the KHDS Board made last year. We are pleased to have Jeannine, and we know she will leverage her considerable skills in all areas of non-profit business management to the benefit of KHDS and our community.

Finally, I see that KHDS is a strong organization that fosters a mission-based sense of service. Our emphasis on support, service and teaching are values that have madeKHDS as uccessful agency, and I am confident that Jeannine will successfully carry this mission into the future. On behalf of the Board of Directors, I thank all the staff for their challenging and successful efforts to improve the lives of so many people.

Mark Johnson



FOCUS ON: MATT S.

Matt was married for several years and had three children. He worked at Laminated Products and West Vaco for over 12 years, and then the bottom dropped out. Losing his job was the first step in a long line of obstacles leading to a decline in his sobriety and mental wellness.

"I had a couple of nervous breakdowns and ended up living off my 401K. When that was gone, I was broke and ended up homeless for a while," he says. Matt had a couple of voluntary admissions to St. Luke's Medical Center Psychiatric Unit, trying to get a handle on what was happening to him. "For one month," Matt says, "I slept behind the Simmons Library in downtown Kenosha. The groundskeeper would bring me a sandwich, chips and a soda every day. I'd hang out in the library all day until it closed, and then I'd go outside behind the building again. People would always bring me things—sometimes food. Once someone brought me a blanket."

Matt doesn't know how it happened ("I think my mother did it, making a lot of phone calls!"), but he finally got on Social Security Disability. He was diagnosed with Schizoaffective Disorder and has a lot of anxiety and depression. After one of his hospital stays, he began receiving Supported Apartment Program services from KHDS. Through that program, Matt was able to get his own apartment and get off the streets. "I was doing really good. Jayne Nudi was my case worker, and she got me a place," Matt says.

Matt then decided to move to Rhinelander, Wisconsin —a decision that didn't work out so well. He did not have the same level of support there, and soon his symptoms increased and his illness began to take

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control of his life once again. "When I got back to Kenosha, I was in bad shape. I got sent to Winnebago for two weeks and then to the KARE Center. I started working with Randy Reed, and he got me back in the program here. I got into a nice rooming house where I live now. I love it there. This June will be my two-year anniversary of being there!"

Because of Matt's diagnosis, one of his goals is to be involved and to avoid isolation. Comprehensive Community Services (CCS) helps him by offering a variety of mental health groups and activities throughout the week that he can choose from.

"It gets me out of the house. I go to two or three groups a week. I live very close, so it's easy to get to. And that's not all. My payee is here, so I can pick up my check every week—just like having a pay day. They handle my medication, so I don't have to worry about getting to the pharmacy. My case manager is very supportive. I have to have some teeth pulled, and she is going to go with me so we are sure about what aftercare is needed. That's supportive!"

When asked what he would tell someone who is experiencing what he experienced before coming to the CCS program, Matt simply states, "I don't know what I would do without this program. I'm so thankful to be where I am—to have this stability. I feel like I won the lottery. For the last couple of years, I feel stronger and stable. Not one day goes by that I don't think about how lucky I am and how thankful I am."

> "I don't know what I would do without this program."



FOCUSING ON PEOPLE



"KHDS supports us in every possible way...we have never felt alone in this journey."

FOCUS ON: FOSTER PARENTS: KAT AND KEN KORP

While living in Illinois, Kat Korp was already involved as a foster parent. Later, when the Korps moved to Wisconsin, they became active with a program called Teen Reach Adventure Camp (TRAC). TRAC is a camp program for foster kids ages 12-15. While spending time volunteering with TRAC and getting to know those kids, Ken started to feel the desire to do more for children in foster care. Thus the Korps began their journey with Kenosha Human Development Services (KHDS) and became licensed foster parents in May of 2017. The Korps say the best experience they've had so far has been "the support from KHDS and watching our first foster son flourish and grow under our guidance and care." They say that KHDS supports them "in every possible way—training, advice, lending an ear when we need to vent or just talk. We have never felt alone in this journey."

Their greatest challenge has been "facing the effects of trauma that these kids endure and wishing you could fix it all." But even knowing that they cannot wish the trauma away, Kat and Ken would never change a thing about their experience. To anyone thinking about possibly becoming a foster parent, the Korps enthusiastically say, "DO IT! It's probably one of the most difficult things you'll ever do, but it's worth so much more than the toughest day. The benefits and rewards you see with these kiddos will outweigh any difficulty you face."

"We wish we would have done this 20 years ago! Being a foster family doesn't mean you're perfect and doesn't require perfection, just the desire to be a soft place for these kids to land and the ability to love them even in hard places."

IN 2017 KHDS 21 LICENSED HAD 21 FOSTER HOMES and provided care for 40 CHILDREN

FOCUS ON: EMPLOYEE: GINA TOSTRUD

Gina started out at Kenosha Human Development Services (KHDS) working part time typing crisis cases and entering data for the Community Intervention Center. That was over 32 years ago, she says, "After about a year, I went full time and added creating forms and running reports to my job."

When the executive secretary, Carrie Volkman, moved to another state, Gina took her place, working for then Executive Director George Schwartz. Gina was also the secretary to everyone else in the building! She was tasked with licensing, completing applications for grants, ordering supplies and basically being the "go-to" person in the office. All employees knew that Gina could answer any question. After George retired, Gina was executive secretary to Byron Wright, who took George's place as Executive Director. "Along the way," Gina explains, "my role changed to Operations Manager and eventually to Business Manager. I am now working with Jeannine Field, our current Executive Director. I'm hoping we retire together!"

Gina says her biggest challenge throughout her time at KHDS was taking over for Carrie Volkman. Ms. Volkman was "the" secretary. At that time, KHDS only needed one person to answer the phone and when people called they expected to hear her cheerful voice. She was well loved by all and knew just about everything regarding the agency and how it all worked. "She was a tough act to follow!" Gina says.

The best part for Gina has been all the friendships she has made over the years. "It brings a smile to my face when I think of everyone I've met here at KHDS who has made an impact on my life in some way. I'm not sure many people can say that about where they work!"



"These people are my second family!"

In her 32+ years at KHDS, Gina has seen a lot of changes. People and programs have come and gone. But by far the biggest change, in her opinion, has been technology. She says, "Even though I still use my trusty typewriter here and there, it was what I used for a lot of my work! I remember when we upgraded to the "memory" typewriter—I thought it was so cool! Jeannine has, without a doubt, brought us to a completely new level of technology."

For the immediate future of KHDS, Gina would like to see the agency "slow down" just a bit. She says, "This past year has been non-stop! It would be nice to have the majority of employees working in one building. We are definitely growing out of our current location."

No matter how large KHDS may grow, there is one thing that holds true. Gina says it best, "[We are . . .] family. It may sound like a cliché, but these people are my second family! They are as thoughtful and compassionate with their coworkers as they are to the people we help. I am proud to work for KHDS. It is a unique place to work!"



KHDS SERVICES

KHDS ALCOHOL AND OTHER DRUG ABUSE (AODA) SPECIALIST

Any individual who is admitted to the KARE Center for social detox from alcohol or drugs, other than opiates, is seen by our AODA Specialist. She helps the person understand the symptoms of detox. The AODA Specialist informs the KARE Center staff of signs to watch for that indicate the participant needs medical attention. The AODA Specialist helps the person plan for recovery treatment by providing options and making referrals to available community resources. She offers support and guidance to the individual throughout their stay. The AODA Specialist also accepts appointments in the main office for people seeking support in their recovery, and is available to work with their families.

"[What's important is . . .] helping people realize they are the experts in their recovery, while providing the resources and support for them to obtain it "

> -Katrina Ware CSAC, ICS, DOT, SAP

KHDS BEHAVIORAL HEALTH CLINIC

KHDS formed the Behavioral Health Clinic in response to the declining psychiatric services available to those most in need in our community. Often our programs work with those who have the least-the least insurance, the least income, the least insight into their illness, and the least control over their own emotions and behaviors. All of this can make it difficult for people to find treatment providers in the community. The clinic is staffed by Dr. Matt McCarthy, APN Ilya Ray and three Victim of Crime Act (VOCA) therapists. Additionally we offer an injection clinic for those individuals who have been prescribed long-lasting psychiatric intramuscular medication but do not have a provider to administer the shot.

In 2017, KHDS received a partner grant from Aurora Health Care to license a telehealth service. We are hiring two APNPs to provide telepsychiatry services. One will provide 20 hours of adult psychiatry, and the other will provide 20 hours of child psychiatry.

TREATMENT COURT

The Treatment Court is a comprehensive treatment program designed to assist nonviolent, adult offenders who have been diagnosed with a mental illness and/or a substance abuse disorder. The goals of the program are to help the individual achieve educational and/or employment goals, find stable housing, improve personal relationships and decrease involvement with law enforcement. All participants in the program are in psychiatric care, receive outpatient counseling and have case management services (usually through KHDS CSP or CCS). Participants also attend community support groups and are required

"We have all heard Treatment Court (originally Drug Court) was like "probation on steroids." But it is so much more than a tougher form of probation. It's about the participant being supported while living in the community. Not only are participants supervised by probation and parole, they are given many services and opportunities that people on basic probation do not normally receive. Not only do they have treatment available, both AODA and mental health, participants have a Recovery Coach who can help them with community support meetings and learning to live life in recovery. Many of Treatment Court participants are placed into CCS or CSP, which adds another layer of support and services. The coordinator of the Treatment Court Program is also available to support participants and help them attain these services. Overall, the coordinator works to ensure the participants have what they need to achieve their goals."

> -Stephanie Karls Treatment Court Coordinator

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2017 THE KHDS BEHAVIORAL CLINIC

SERVED 452 PATIENTS.

2017

15 PEOPLE WERE ACCEPTED INTO TREATMENT COURT. SIX OF THE PARTICIPANTS SUCCESSFULLY GRADUATED!

to undergo random urinalysis drug testing. All participants report to the court, which consists of the judge and the Behavioral Health Treatment Court team. Participation in Treatment Court is rigorous, and individuals are held accountable for both their time and actions while in the program. Positive behavior and healthy progress in recovery is rewarded, and graduations are celebrated!



266 ADULTS PARTICIPATED IN THE KHDS COMPREHENSIVE COMMUNITY SERVICES PROGRAM.

COMPREHENSIVE COMMUNITY SERVICES (CCS)

Comprehensive Community Services (CCS) is a state-certified program that provides psychosocial rehabilitation to people living with a serious and persistent mental illness and/or drug or alcohol dependency. A CCS participant works with the CCS Service Facilitator to create a personal working service plan of meaningful goals and objectives and to choose the services that will best assist them in achieving those goals and working through the stages of change. The CCS service plan changes as the goals are met and the participant moves towards independence, learning to manage their illness or addiction independently.

COMMUNITY SUPPORT PROGRAM (CSP)

The Community Support Program (CSP) works with people with severe and persistent mental illness in the community by utilizing a network of coordinated care and treatment services. Individualized goals revolve around learning to recognize and reduce the intensity of mental health symptoms and creating and relying on a support network, peer mentoring, social skills, and daily living skills. The participants' strengths are key to their success, and the CSP case manager draws on those strengths to create the Individualized Service Plan. Every participant's needs are unique and are met by a team of professionals using a broad array of wrap-around services. Every need presents a new opportunity for the participant to learn a new skill, and every new skill learned is one more self-directed step in the journey of recovery.

2017 169 ADULTS PARTICIPATED IN THE KHDS COMMUNITY SUPPORT PROGRAM.

"The CCS Program is important because it assists individuals in obtaining and maintaining recovery. We strive to recognize both the needs and strengths of participants in the program as a means of helping them achieve strength-based recovery while also providing them a place where they can feel a sense of acceptance and community."

> -**Noell Juola** CCS Supervisor

"I have to say that seeing someone find a glimmer of hope for a better future and then walking beside them while they accomplish their goals, no matter how big or small, is one of the best things about this program. To see someone who feels worthless finally begin to realize that they matter, deserve a good life, and deserve to be listened to and heard—well, life doesn't get any better than that!"

> -**Linda Cooklin** CCS Service Facilitator

"I love being the face of the CCS Program, the first person our participants see before starting their journey toward recovery. I can connect, build rapport, and offer kindness and support to participants who are scared or unsure of themselves and their recovery. Most of all, I enjoy hearing the participants' stories and gaining a stronger understanding of what it means to live with a mental illness."

> -Ashley Tisch CCS Intake Assessment Specialist

2017 87 ADULTS RECEIVED PALS SERVICES IN THEIR HOMES.

PARTNERS FOR AUTONOMOUS LIVING (PALS)

Participants in CSP who are living independently, maybe even for the first time, often need some additional assistance in learning the skills necessary to maintain their apartments, to navigate the community using public transportation, to budget for and plan their grocery shopping, and other daily skills. PALS staff go into the home and teach these skills, hand over hand, helping the participants to live their best lives. Sometimes participants have spent extended time in an inpatient or institutional setting and need to regain confidence in their abilities. PALS staff are there to help them relearn and embrace the nuances of daily life while managing their illness and symptoms. PALS works closely with case management and is part of the participants' Individualized Treatment Plans.

COMMUNITY INTERVENTION CENTER (CIC)

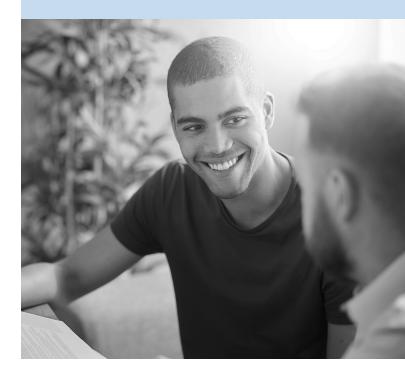
The Community Intervention Center is the gateway to recovery resources for Kenosha County residents. Since 1984, through the good work of our staff and the strong leadership of the Kenosha County Division of Aging and Disabilities, the CIC has addressed the mental health and substance abuse needs of thousands of people. The programs of the CIC guide individuals from the first crisis incident, to their deepest treatment need, to ongoing case management and beyond. Our dedicated staff are knowledgeable in assisting those in need with local resources, treatment options, housing needs, and more. Though the array of services has changed over the years, the CIC has maintained its individualized

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"I personally think that PALS is an awesome program, as it empowers participants to learn and implement skills they may not have realized they needed. I think it is important to celebrate success, starting with basic, everyday tasks that some may take for granted. Everyone has value and everyone can achieve their goals. This program allows participants to identify and achieve their goals."

> -Shelly Erickson PALS Program Staff



and goal-oriented approach. The Community Intervention Center—the staff and all its many programs are here for you!



A PHONE CALL TO THE MENTAL HEALTH AND SUBSTANCE ABUSE RESOURCE CENTER CAN GET YOU THE ANSWER YOU NEED!

COMMUNITY MENTAL HEALTH AND SUBSTANCE ABUSE RESOURCE CENTER

We officially separated the growing Community Resource Center and the Community Intervention Center into their own divisions in 2017. Although our crisis services are the front line of most of the service intake to KHDS, the Community Resource Center runs parallel to that by addressing the needs for those who call or stop in for information and assistance. The Community Resource Center provides an array of services to the people of Kenosha.



2017 8,776 CONTACTS TO THE ADULT CRISIS UNIT AND 2,469 FOLLOW-UP CONTACTS.

"Providing my own experience, strength and hope to those in crisis also allows me to maintain a sense of my own healthy living skills. We all may experience crisis at one point or another. We all may reach a point where we need help, but we deserve to be treated with dignity and respect."

-**Gregory Fields** Adult Crisis Counselor

"I really like the fact that I am doing something to help someone be the best they can be. I feel good knowing I can help someone who might not be able to advocate for themselves during their time of crisis. It is rewarding knowing I had something to do with this!"

-**Cheryl Nunn** Adult Crisis Counselor

"When I began my time with Adult Crisis as an intern, I was awestruck by not only the amount but the type of calls in which workers were dispatched. Our workers are on the front line of the most difficult situations happening in our communities. Our days are never the same; we are constantly problem solving in the moment. determining how to best assist each individual during their time of need. I am proud of the way our team members interact with other programs and workers at KHDS to provide the best service to the individual. One of the most rewarding parts of working for Adult Crisis for me is that we are meeting with people on the worst day of their life. We are their beacon of hope in a seemingly hopeless circumstance. I have a personal connection to the mental health community, and those who have been stigmatized deserve the dignity and respect that our workers extend to them."

> -Kristen Palmer Adult Crisis Program Manager

2017 4,640 CONTACTS TO THE JUVENILE CRISIS UNIT AND 9,243 FOLLOW-UP CONTACTS.

CRISIS PREVENTION/ INTERVENTION

We offer crisis intervention, both in-person and phone service, 24 hours a day, seven days a week, 365 days a year. There is never an automated answering machine or voice message answering our phone. Our well-trained dedicated crisis staff provide face-toface interventions and/or phone counseling in crisis situations. Historically, our crisis unit has been divided into two parts—Adult and Juvenile Crisis. In 2017, those divisions merged to create a unique, cross-trained Crisis Prevention/Intervention Unit. This combined unit can address the emergent mental health and substance abuse needs of individuals and families in Kenosha county. KHDS provides after-hours Child Protective Services, Child Protective Initial Assessments and Child Welfare Services Reports.

A new Community Response Counselor has enhanced and strengthened the relationship our Crisis Prevention/Intervention Unit has with local law enforcement and local hospital emergency rooms. The CR Counselor responds directly to assistance calls from police and sheriff's departments, going into the community to assist officers when they are dealing with individuals in crisis. The CR Counselor then provides follow-up and referral to individuals to ensure the crises have been diffused and effective services are received.

We have also added several new Comprehensive Addiction and Recovery Act (CARA) Grant Recovery Coaches to the Crisis Prevention/Intervention Unit. These dedicated individuals, all of whom are in recovery, work with our crisis team to better address the needs of those in our community who have overdosed or are abusing opiates. These coaches respond to the local emergency rooms at the time of the call to meet with the person in crisis and offer support, information and treatment options.

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2017

THE RESOURCE CENTER RECEIVED 2,447 CALLS AND COMPLETED 139 MH SCREENS FOR ELIGIBILITY. 151 PEOPLE WERE ASSISTED BY THE BENEFIT SPECIALIST IN 2017.

Finding available resources in our community and understanding how to access those resources can be a daunting task. The Mental Health and Substance Abuse Resource Center assists individuals in finding resources that meet their needs. The staff is trained to provide information and assistance related to mental health and substance abuse in Kenosha County, including help with enrolling in Marketplace insurance and obtaining BadgerCare. The Mental Health and Substance Abuse Resource Center also offers a certified benefits specialist who assists individuals in accessing Medicaid insurance coverage. Staff are also trained to utilize the Mental Health and Substance Abuse Screen, which determines eligibility for the Community Support Program and Comprehensive Community Services.

"I enjoy the diverse clientele that I have the opportunity to work with. One of the most rewarding parts of my job is having the time to connect with individuals, find out what their needs are, and then, together, devise a plan to ensure they are connected to the appropriate resources."

-Sherri Hammermiller Information and Assistance Specialist

"What I enjoy most about working in the Mental Health Resource Center is being able to be a one-stop shop for the community. We are able to provide individuals with a variety of resources that most have no idea existed. What I find to be most rewarding is when an individual comes to the office frustrated but leaves in better spirits because of the assistance I was able to provide them."

-Anquinette Ferguson



THERE ARE CURRENTLY 681 PEOPLE BEING SERVED BY THE REPRESENTATIVE PAYEE PROGRAM.

2017

199 CHILDREN ENROLLED IN THE CHILDREN'S LONG-TERM SUPPORT WAIVER AND 83 CHILDREN WERE ON THE WAIT LIST.

REPRESENTATIVE PAYEE PROGRAM

When the Social Security Administration determines that a beneficiary is not capable of adequately managing their money, they will require a representative payee to step in to help. The Mental Health and Substance Abuse Resource Center has a Representative Payee Program that helps these individuals pay their bills and budget their money and make sure they have food, clothing and housing. By helping people meet these basic needs, the Representative Payee Program can ensure that these individuals achieve a decent standard of living. The program is authorized to assist those with Social Security, Supplemental Security Income or Social Security Disability Income. Each year the Representative Payee Program must report to the Social Security Administration exactly how the individual's money was spent and/or saved. Anyone in need of a representative payee should first start by contacting the Social Security office in Kenosha

> "The payee program can be very stressful at times. Clients are not always happy with the decisions we have to make. But it puts sunshine in my day when a client says, 'Thanks for helping me, or 'You do a good job.'" —Cathy Lewis Representative Payee

> > "Without the Representative Payee Program, we would likely see many more homeless individuals."

> > > -**Sue Hanson** Representative Payee

GUARDIAN ASSISTANCE PROGRAM

Every year guardians are required to report to the court an annual accounting of their wards' assets and income. The KHDS Guardian Assistance Program holds training classes and offers private appointments to help guardians with the required court paperwork. In 2017, three training sessions were held at KHDS, and nine guardians attended. There were also 76 private appointments.



"Best job ever! I get to work with families and their children who have surpassed so many challenges and who are the most amazing, brave and strong people I have ever met. It is a JOY to be able to provide my families the support and assistance they need to help their children reach their full potential."

> -Kim Nelson Children's Waiver Case Manager

CHILDREN'S LONG-TERM SUPPORT WAIVER (CLTS)

The Children's Long-Term Support Waiver (CLTS) is a state and federally funded program that supports children with severe physical, cognitive and emotional disabilities. The services and equipment these children require to live safely in their family home is often extremely costly. Without the adequate funding support, it would be impossible for many families to care for their children with special needs. This program provides these funds. The CLTS Service Coordinators work with the families to create dynamic care plans that address the needs of the children, provide information on community services for the whole family and advocate for effective services and programming.

CHILDREN'S COMMUNITY OPTIONS PROGRAM (CCOP)

CCOP is a program that supplies funds to families caring for children with severe physical and cognitive disabilities who are living at home. These funds can be used while the family is waiting to be enrolled in the more robust Children's Waiver Program. Some of the services CCOP provides include home modification, respite care and medical supplies. Most of the families in the CCOP receive the funds for a one-time purchase that helps them better care for their children at home.

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"I enjoy working alongside our families, solving problems, providing support and watching them grow. Working with a family that has a child with a severe disability, you find out quickly all the different obstacles they have, and I feel honored that they allow me to help them with their needs."

-Ben Lake CCOP Case Manager

"The programs in this area serve a wide variety of people and needs, including age-groups from two years to the elderly, all disability groups and their family members, people of low socioeconomic means and the general public. The tasks the staff perform are just as varied and interesting as the people they meet! The staff adjusts as the job requires and are not afraid to dig in and do something new or share their knowledge with the rest of Kenosha!"

> -Sue Roknic Community Resource Center Director



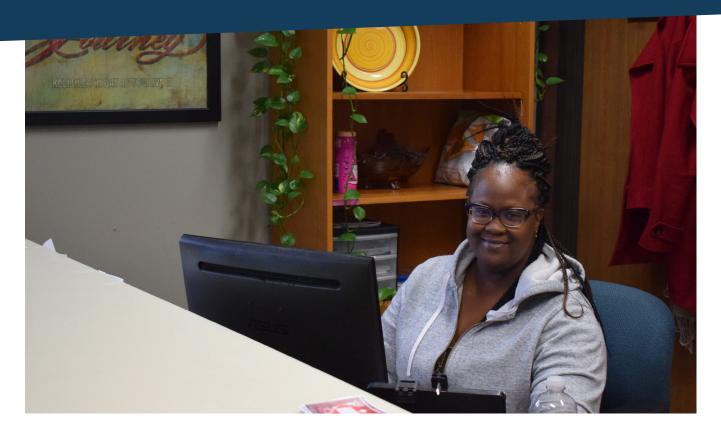
188 ADULTS WERE MONITORED ON A CHAPTER 51 ORDER, 161 ADULTS WERE MONITORED ON SETTLEMENT AGREEMENTS, 9 CHILDREN WERE MONITORED ON A CHAPTER 51 ORDER AND 34 CHILDREN WERE MONITORED ON SETTLEMENT AGREEMENTS.

ADULT AND JUVENILE COURT LIAISONS

The Adult and Juvenile Court Liaison Program serves individuals who have been detained to a mental health facility and have been adjudged in need of either a Chapter 51 Civil Commitment Order or a 90-day Settlement Agreement. At the time of detention, the court has determined that these individuals pose a risk to themselves or others. The Court Liaisons work with program participants for the duration of the court order, following their progress, assisting them in finding appropriate community providers, accessing insurance, referring to long-term case management if needed, and other needs. All progress, or lack thereof, is reported to the court. The commitment order can either be dropped or extended, if necessary. "I have been the Juvenile Crisis Chapter 51 Liaison for over 10 years. It's rewarding to work with a young person and their family from the point of a chapter situation, through the agreements resulting from court involvement and while they are getting connected with mental health service providers and other community supports. I also appreciate the collaboration with the Juvenile Crisis team."

> -Hillary Schellinger Juvenile Court Liaison





FRONT-END OPERATIONAL SERVICES We Can't Do It Without You!

Nothing gets done around KHDS without those hard-working people who keep the whole place running and humming like a well-oiled machine! They say it takes a village to raise a child. Well, it takes so much more than that to keep us moving forward, day to day. Our programs, employees, and program participants all benefit from the good work of people like our Operations Manager, who runs reports, handles our billing and can answer any question that comes up! Our Receptionists answer our phones with a smile and instinctively know which extension needs connecting. Our Administrative Assistants complete reports and documents and meet every deadline, while our Data Entry Team types away daily to ensure all case notes are entered in a timely manner. As the agency grows, our Employment Recruiter keeps an eye out for new hires, and our Fiscal and Workflow Specialist makes sure everyone is paid and the work is done in the most sensible way. "Work smarter, not harder" is

often heard around KHDS! The Data and Communication Strategist keeps KHDS on the cutting edge of technology and provides technology training, while our IT and Operations Specialist assists employees with questions about their devices. Finally, our Maintenance Team holds it all together by addressing any repair needs that crop up. All of these wonderful people work quietly behind the scenes at KHDS, but their work is eminently important to the services we provide to our program participants. The whole team contributes immeasurably to the mission of this agency, and we wouldn't be able to do it without them!

"Technology is everywhere in our organization, from the phones, to the computers, to the copier/printers. Having these tools every day to complete the amazing work that this organization does within the community we serve is important. Being able to provide resources in real time can make a difference to someone in need when it matters most."

-Margaret Troch



KHDS SERVED 21 MOMS AND 31 CHILDREN, 21 SINGLE YOUNG ADULTS AND 12 SINGLE ADULTS LIVING WITH PERSISTENT MENTAL HEALTH ISSUES IN SCATTERED-SITE HOUSING IN THE COMMUNITY.

2017 26 SINGLE ADULTS, 26 CHILDREN AND 18 MOTHERS WERE PROVIDED RAPID REHOUSING SERVICES.

HOMELESS ASSISTANCE SERVICES

TRANSITIONAL HOUSING

KHDS Transitional Housing Services was started in 1991 to provide stable housing options in our community. It was initially funded by the Family Youth Services Bureau, the United Way, Housing and Urban Development (HUD) and generous community donations. Today, KHDS participates in the statewide Continuum of Care, which collaboratively and competitively writes new project and renewal grants to support itself. KHDS Transitional Housing Services serves three target populations: young adults ages 18-24, young people with children and adults living with mental health and/ or substance abuse disorders. We believe helping people obtain and maintain permanent housing allows them to achieve greater self-determination and to increase their personal life skills and income. Transitional Housing Services provides hands-on support, rental assistance, individual treatment plans, access to community resources, life skills training, parenting education and support system development.

KHDS RAPID REHOUSING

HUD considers rapid rehousing critical to a community's homeless response plan. 2017 was an important year for the homeless in Kenosha. One local low-barrier shelter closed while another opened a larger, better equipped facility. Utilizing HUD funding, KHDS designed a Rapid Rehousing Program that sought to reduce the length of time a person is homeless. Helping people find stable, affordable housing options in scattered sites and offering individual supportive services is the key to success.



KENOSHA PERMANENT HOUSING CONNECTIONS

Working on mental health or substance abuse recovery is difficult enough without having to worry about finding shelter every night. Chronic homelessness not only affects an individual living with a disability, but influences the community. Kenosha Permanent Housing Connections is a program funded by a HUD Continuum of Care grant that allowed KHDS to lease 10 units for single individuals who are experiencing chronic homelessness for a variety of reasons. This program works with those in the most need who are living with a disability and have experienced homelessness.

Thanks to the hard work and diligence of our Associate Director, Lisa Haen, KHDS was awarded 15 additional units to serve even more people in our community.

"I get to hear their story, and help connect them to services in the community which help aid their transition into permanent housing. We help an individual or family leave homelessness and move to permanent housing and provide any other support to help them maintain their home."

> -**Rebecca Pritzl** Coordinated Entry Specialist

2017

10 CHRONICALLY HOMELESS INDIVIDUALS FOUND PERMANENT HOUSING THROUGH THIS PROGRAM.

PROJECTS FOR ASSISTANCE IN THE TRANSITION FROM HOMELESSNESS (PATH)

Providing outreach to homeless individuals is the first step in getting them the services they need to eventually end the cycle of homelessness. The PATH program provides that outreach, going into the community and connecting with homeless people who are living with mental illness and/or substance abuse disorders. Our PATH Outreach Workers help connect individuals to housing, resources and mental health and substance abuse services available through the KHDS Mental Health and Substance Abuse Resource Center. The PATH Outreach Workers follow the individuals through those services, connecting with the service providers and assisting the individuals in navigating the service delivery system.

COORDINATED ENTRY AND RENTAL ASSISTANCE

Individuals and families experiencing homelessness may find housing and connect to community resources through the Coordinated Entry Program. With funding through the Wisconsin Balance of State Continuum of Care, KHDS acts as the entry point for the three collaborating agencies (KHDS, Shalom Center and Women and Children's Horizons) to assess people for eligibility and direct them to the most appropriate resources to meet their needs.

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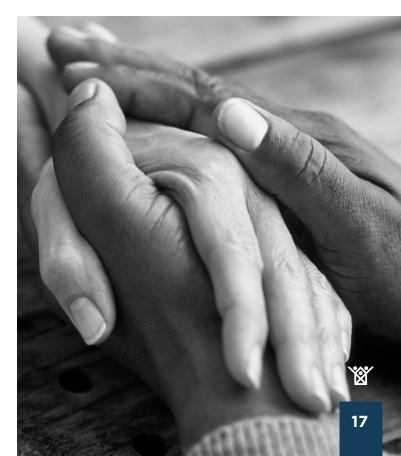
2017 127 ADULTS WERE ASSISTED IN THE PATH PROGRAM.

"[What's important is . . .] being able to make a profound difference in someone's housing situation by assisting them in satisfying their basic need of having a place to live."

-Veronica Judon Housing Assistance Services Supervisor

EMERGENCY SOLUTIONS GRANT/SHARES FUNDING

The Emergency Solutions Grant (ESG) is a collaborative grant that provides funds for emergency shelter and rental assistance for people experiencing homelessness. KHDS participates as the legal agency in this grant application with the Shalom Center, Women and Children's Horizons and Legal Action. ESG funds provide short-term rental assistance to people who have to leave emergency shelters. SHARES funding, provided by Kenosha County, is for single individuals who are homeless or at risk of homelessness.





INTRAVENOUS DRUG USE PROGRAM

The Intravenous Drug Use Program was created through a grant from the State of Wisconsin in conjunction with Kenosha County Division of Aging and Disability Services (KC-DADS), the Kenosha County Health Department and Oakwood and Associates. KHDS is contracted with KC-DADS to intake, follow and refer those in the community in need of services due to their IV opiate addiction. The KHDS Recovery Coordinator sees people who have come through our adult crisis process seeking help with their addiction. They may utilize the KARE Center for social detoxification and, at that time, will be assessed and referred for follow-up care and treatment. The KHDS Recovery Coordinator also facilitates support groups at the KARE Center, at Bridges Community Center and at the KHDS main office. The Recovery Coordinator also networks with other providers and does outreach to the recovery community. Three times each year, the Recovery Coordinator hosts an open discussion on heroin use in our community. These discussions are open to the public.

KENOSHA ADULT RESIDENTIAL EMERGENCY CENTER (KARE CENTER)

Perhaps the biggest change at KHDS in 2017 was the acquisition of the building located at 1202 60th Street which, through the generosity of the city of Kenosha and the combined partnership of the city and county governments, has become the new KHDS Crisis Prevention Center and, at the opposite end, the new KARE Center.

The KARE Center has a long history of providing community mental health and social detoxification services for those individuals who do not need or meet a hospital level of care. Licensed for up to 18 residents, the KARE Center is equipped to provide trained, caring mental health professionals to address their needs.

Our IVDU Recovery Coordinator and AODA Specialist see those people who are admitted for drug or alcohol detox, and Dr. Matt McCarthy and APN IIya Ray see people at the KARE Center who are in need of psychiatric care but who have not yet been able

"What I feel is important about my program is that it is a free resource in the community for those struggling with addiction. I pride myself on treating the individuals I meet with respect and empathy. I've been told many times that the folks I meet with feel heard and understood. I enjoy being a light in the storms of their lives."

> -Patti Hansen IVDU Recovery Coordinator

"[I like . . .] the fact that we are able to use not only KHDS but so many agencies to help our participants get the services they need. Seeing an individual go through different challenges and then seeing positive changes and outcomes for that person four days after detoxing so badly they actually thought they were dying is remarkable. Our staff is awesome with our participants, and we all work so hard on their behalf."

> -Jayne Nudi KARE Center House Manager

NEW LOCATION FOR KARE CENTER AND NEW, 24-HOUR CRISIS PREVENTION CENTER

Saturday, February 17, 2018

1202 60th Street, Kenosha, Wisconsin Ribbon cutting ceremony

to find a community provider. The shared location of the KARE Center and the Crisis Prevention Center means that crisis workers are available immediately should a resident express suicidal ideation or need that level of support.

The KARE Center is not a locked facility or a hospital-like setting. It has always been important that the KARE Center feel homelike and comfortable. Those who have visited the KARE Center have been

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amazed at how comfortable and relaxed the atmosphere is. The staff monitors medications and helps with crisis planning. They assist residents in accessing other community resources as needed and link them to their other services, such as case management, probation and parole, and outpatient counseling. KARE Center services, like Crisis Prevention/ Intervention, are available 365 days a year and accessible by contacting the Crisis Unit.

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THERE WERE 116 PLACEMENTS AT SHELTER CARE. 75% WERE DISCHARGED TO A LESS RESTRICTIVE PLACEMENT AND 59% WERE RETURNED TO THEIR HOMES.

RESIDENTIAL CARE

KHDS began its long legacy of community service by responding to the need for a caring, safe environment where youth can feel they belong and learn the skills to become contributing, valuable members of our community. Our residential care services use the Teaching Family Model to inspire both youth and adults and to give them the best tools for life. Residential Care Services consists of the following:

SHELTER CARE

An 8-bed juvenile crisis shelter for boys and girls ages 12 to 17. Time spent at Shelter Care gives the youth and their families time to work out issues and develop skills needed to better handle issues that arise in the future. Court services may also use this time to determine the best placement for the youth in our community. A youth entering Shelter Care can stay there up to 60 days.



2017 KHDS HAD 21 LICENSED FOSTER HOMES PROVIDING CARE FOR 40 CHILDREN.

SPECIALIZED FOSTER CARE

Trained foster parents make a commitment to accept troubled children into their homes, providing them with a safe, nurturing environment and persevere in teaching them skills for daily life. They are the heart of this program. Foster parents also work cooperatively with the children's families to achieve the best possible relationship.

Foster Care consultants support the foster parents through preservice training, regular in-home meetings to review ongoing treatment plans, problem solving, and skill development. Foster parents support one another and learn from one another at a regular monthly meeting.

Foster Care, Shelter Care and the Independent Living Adult Family Home are accredited Sponsor Sites of the Teaching Family Association. We've met nationalized standards for excellence in training, consultation, evaluation, and support administration—all to better provide service to foster children and their families.

INDEPENDENT LIVING ADULT FAMILY HOME

Located in what was previously known as Phoenix House, the Independent Living Adult Family Home (ILAFH) is the home of four adult men diagnosed with cognitive disabilities. Two of the four have been with KHDS for years, originally living in the old Harborside Group Home, located on Simmons Island near the lighthouse. When that closed, they moved into a new program called Community Supported Living Arrangements (CSLA) and had their own apartments with roommates and live-in staff for several years. Then, as the men aged and funding sources changed, they moved into the home where they now reside. Some of the faces have changed"As we all work together we use positive, professional relationships, teach skills, and help residents understand how the skills they learn will benefit them wherever they go."

> -Angela Martin Clinical Director

one of the roommates has moved on and one has passed away—and staff has come and gone, but the four men who live at ILAFH now consider themselves family. And so do we!

The guys focus on learning to be as independent as possible, preparing their meals, cleaning their home and having fun! The Teaching Companions are livein and part-time staff who support the guys in the home, at work, with their friends and families or wherever they need to be. They are always out and about in the community, and every activity is another opportunity for them to learn new skills.

SPECIAL SERVICES VICTIM OF CRIME ACT (VOCA)

The victim-focused services at KHDS have both expanded and coalesced. We added a pair of trauma-focused therapists, La Shanda Tolefree and Kristin Stensgard, to close one of the universally identified gaps in victim services

KHDS provides community-wide VOCA support, with availability to victims in crisis and families experiencing domestic violence and child abuse. This includes partnerships with Women and Children's Horizons and Legal Action of Wisconsin. Home visits immediately after an incident of abuse have provided welcome and timely safety interventions for survivors. The agency's array of services available to people living with mental illness (who are more vulnerable to victimization) includes a group at Bridges for those recovering from trauma. The intersection of crisis intervention, child welfare, clinical, resource center and ongoing mental health services makes KHDS a uniquely complete provider of options for victims.

> "VOCA is an incredible program that is available to help the most vulnerable people in our area with mental health concerns. It especially helps people who, in most cases, would otherwise not have an opportunity for mental health services. Clients are treated with care, concern and unconditional positive regard, while being empowered to make positive changes to improve their lives."

-**Lisa Rios** VOCA Therapist

"What I love most about the VOCA Therapy Program is having a platform to provide compassion, encouragement and a safe space to those who are hurting and in need of support. There is such an immense need for trauma therapy in our community, and that has certainly been proven within our first year. I absolutely love what I do and enjoy coming in every day, watching the growth in our patients and knowing we are helping make a difference in the lives of others."

> -Kristen Stensgard VOCA Therapist

BASIC CENTER SERVICES

KHDS has provided Basic Center Services for 34 years. Basic Center Services, funded by a grant from the Family and Youth Services Bureau, strengthen community-based programs and meet the immediate needs of runaway and homeless youth and their families. For the past two years, Basic Center Services. Street Outreach and Juvenile Crisis Programs have seamlessly combined to provide crisis stabilization and the traditional 24-hour access to runaway and homeless youth. We partner with middle schools and high schools to help us identify atrisk youth who don't garner a lot of attention, and we augment group sessions held at the schools with our long-running Teen Talk events on Wednesday nights at KHDS. Topics frequently include family trauma, mental health concerns and poverty.

The mural pictured below was completed by the group along with the Creative Arts Association. It can be seen at Dakini Healing Arts in downtown Kenosha. The partnership with downtown businesses opens areas of creativity and healing that youth enthusiastically embrace.



INDEPENDENT LIVING

The Independent Living Program teaches skills that youth need in order to live an autonomous life. The child welfare community has elevated the importance of skill-based services for young adults who are about to age out of other care programs.

Expanding the traditional Aftercare programs to young adults until the age of 23 has proven revolutionary. We have strengthened participants' chances of success by simply providing access to continued support as they need it. Because of private foundational support, our Independent Living Program was able to provide significant rental, utility, transportation, food and educational assistance in 2017.

SUPPORTED APARTMENT PROGRAM

The Supported Apartment Program (SAP) is a shortterm, crisis stabilization program available to adults with a mental health and/or substance abuse diagnosis. The program assists these individuals in transitioning to a level of less restriction or helps them learn skills in order to maintain their current level of independence. The SAP staff teaches participants to manage and monitor their symptoms and medications and to live fulfilling, productive lives in the community. Participants receive case management, mentorship, crisis planning, access to community resources and mental health/substance abuse education and support with an emphasis on recovery. In 2017, the SAP Program assisted 58 individuals. There are currently 21 people being assisted by this program.

"We are a team trained to assist people in crisis. We take referrals from different departments, KARE Center, hospitals, Chapter 51 workers, and many more. We advocate for and assist people with different needs. For example, we help people find a family doctor, a mental health provider, a therapist, a safe place to live, and so on. We feel proud to be part of the KHDS Supported Apartment Program because we can make a difference in our community."

-Mary Granado

Supported Apartment Program worker

"The reason I enjoy my work is because I'm allowed freedom of expression. I like to be honest, creative and direct with others. I enjoy this through a constant connection with our participants, professionals at KHDS, and the respect I am given with my family at KHDS."

> -Randy Reed Supported Apartment Program worker

TRAINING AND EVALUATION

The basis of the work we do at KHDS and the philosophy driving our mission is our belief that people behave and react the way they do because they lack skills to do anything else. To that end, all our employees, regardless of program or target group, receive Teaching Family Model training provided by our Training and Evaluation team. KHDS is a nationally accredited Teaching Family Association (TFA) trainer and member. Our TFA team trains not only our staff and foster parents but other agencies and schools as well. Our Lead Trainer has spent countless hours adapting the model so it can be used across disabilities. It has proven to be extremely effective with children, and adults living with mental illness and adults living with cognitive disabilities.

Training helps everyone develop the skills they need to do the work they do effectively. It also ensures that our team is up to date with best practice care standards. Practitioners are given tools to better recognize an individual's behaviors from a clinical perspective and can then teach the skills the person needs to be successful. Participants are more likely to respond positively and make progress in their treatment when this happens. Though supporting the individual's success and the practitioner's success is important, training also serves as a way to develop a common language and approach that unifies programs and teaching styles among practitioners and promotes communication throughout all programs toward common goals and quality care.

Evaluation is an important aspect of quality assurance. Being accountable for using the tools learned in training supports quality programs and provides opportunity to hear from participants and other community resources to further develop programs that are helpful, supportive and effective to all involved. Evaluation enhances professional development of staff and promotes fidelity to best practice standards within the organization.

"Developing presentations and training is my small way of making the world a little kinder and more understanding. When I can help others recognize the humanness and value within, I feel I have said what participants could not make others understand. My hope is that our child and adult participants are treated with the respect and compassion they deserve. Evaluation is an opportunity to help practitioners see all they've accomplished to better the lives of others who need their help. When suggestions are offered, it is only to help them become more successful at helping others while taking care of themselves."

> -Ann Ouradnik Coordinator of Training and Evaluation

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KENOSHA HUMAN DEVELOPMENT SERVICES, INC. **BOARD OF DIRECTORS**

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Danielle Geary

Ted McMahon John Milisauskas Tom Reiherzer Lt. Joseph Riesselmann Heather Spencer

BALANCE SHEET AS OF DECEMBER 31, 2017

ASSETS

CURRENT ASSETS	
CASH IN THE BANK - REG	\$1,097,778
MONEY MARKET & CD	\$620,983
ACCOUNTS RECEIVABLE - NET	\$733,663
PREPAID THP	\$4,650
PREPAID EXPENSES	\$268,227
TOTAL CURRENT ASSETS	\$2,725,301

PROPERTY, PLANT & EQUIPMENT				
LAND	\$104,250			
FURNITURE & FIXTURES	\$471,276			
BUILDINGS	\$1,302,769			
VEHICLES	\$136,464			
SUBTOTAL	\$2,014,760			
LESS: ACCUM DEPRECIATION	\$1,157,183			
PROP, PLANT & EQUIP - NET	\$857,576			

LIABILITIES & FUND BALANCE

CURRENT LIABILITIES	
CONTRACT ADJUSTMENT	\$90,153
ACCOUNTS PAYABLE	\$8,814
WAGES PAYABLE	\$498,338
ACCRUED EXPENSES	\$197,868
DEFERRED INCOME	\$195,194
ACCRUED PAY & FRINGE	\$36,115
TOTAL CURRENT LIABILITIES	\$1,026,480

LONG-TERM LIABILITIES	
MORTGAGES PAYABLE	\$387,985
TOTAL LONG-TERM LIABILITIES	\$387,985
TOTAL LIABILITIES	\$1,414,465
TEMP. RESTRICTED FUNDS	\$116,973
FUND BALANCE	\$2,051,441

TOTAL LIABILITIES & FUND BALANCE \$3,582,880

SPONSORS



TOTAL ASSETS



\$3,582,880









	ſ	DENISE DERDEYN Director of Special Services	Independent Living Program IL Worker	Support Worker VOCA Outreach
				VERONICA JUDON Housing Assistance Services Supervisor
	DAVE AEGERTER Fiscal Manager	LISA RETZLAFF Director of Residential Care	Shelter Care Consultant Program Manager	Full-Time Teaching Parent Part-Time Teaching Parent
	ANGELA MARTIN Director of Clinical Services			BRENDA STALLBAUM BHC Clinical Manager
	ANGELA Director of C		VICKI SMITH Lead Clinical Supervisor	NOELL JUOLA Clinical Services
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	Associa	ā	5	JENI PARKINSON Court Services Program
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	JAMEY ROMAN Human Resources Director			JOLENE DUSTMAN Juvenile Crisis Program
	MARY BETH LINDQVIST Grant and Development Director	SUE ROKNIC Director of Community Resource Center	Information & Assistance Specialist Client Rights Specialist	Representative Payee Benefit Specialist
	MARY Grant an	GINA TOSTRUD Operations Manager	Receptionist Billing & Administrative Support Specialist	Data Entry Recruiter

ROGRAM

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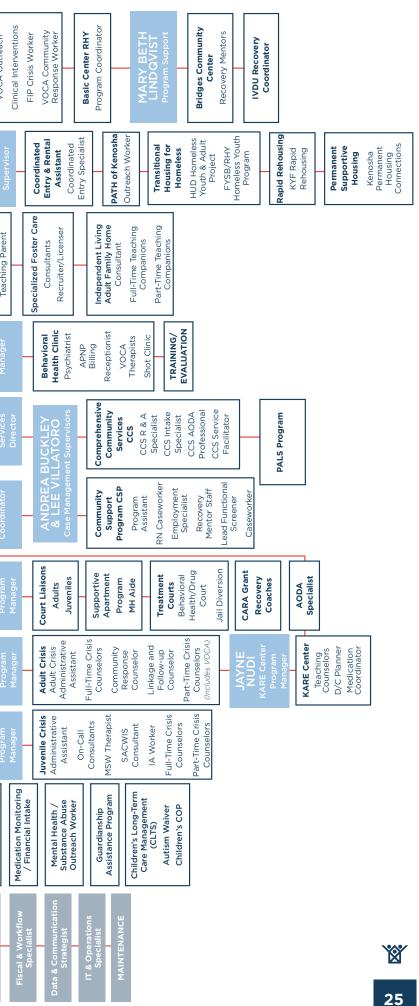
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We are a nonprofit organization that works to help all people in the community lead healthy, productive lives. We seek to ensure that all people—especially those with the fewest resources—have access to the opportunities and support they need to succeed in life.

NEW KHDS OFFICE LINE 262-764-8555

SAME CRISIS HOTLINE 262-657-7188

5407 8th Avenue, Kenosha, WI 53140

KHDS.ORG