




**KENOSHA HUMAN
DEVELOPMENT SERVICES**
A NONPROFIT ORGANIZATION



KAUFFMAN H

"Tell me and I forget. Teach me and I may remember. Involve me and I learn."
—Benjamin Franklin



Dick Kauffman brought together the operational theories which guide our agency and created a common culture and language. He pulled together the concepts of:

- Bowen Family Systems Theory
- Erikson's Stages of Development
- Adler's Belonging Theory
- Teaching-Family Model

Dick brought these theories to life as an effort to help humanity. He taught us these philosophies to one another and the world at large.

For those of us who have the privilege of knowing him...

ANNUAL REPORT 2019



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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 & Disability Services and Children & 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 of Housing and Urban Development and Health & 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 the dedicated leaders and staff at KHDS 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



Kenosha Human Development Services, Inc. (KHDS) continues to provide superior services to consumers in a compassionate, professional, and cost-effective manner. Our commitment to the community remains strong, and our mission to ensure safe, person-centered treatment steadfast.

2019 was a year of change and growth. Shelter Care as a program closed early in the year. With significant support from the Kenosha County Division of Children & Family Services, the remaining staff retrained, retooled, and revamped the old Shelter Care into the new Kauffman House. KHDS dedicated our new program to Dick Kauffman, our long-time former Director of Residential Care, who spent his career with KHDS developing a set of philosophical assumptions that have become the cornerstone of KHDS today.

We had significant growth in several areas:

- 52% increase in the number of people screened in Coordinated Entry for community homelessness programs
- 18% increase in consumers in Comprehensive Community Service
- 32% increase in KARE Center admissions
- 18% increase in children and families served in the Children's Long-Term Support Waiver program

With the increase in participants and programming comes the need for more infrastructure. In early 2019, the KHDS Board of Directors voted to sell our existing main office buildings to the City of Kenosha and begin the process of developing a new main office building.

We have spent much of 2019 working with architects, developers, the City of Kenosha, and Kenosha County to work toward building a space. We found a space large enough to allow us to spread out from our current office and give us space to grow. We anticipate that as of mid-summer, 2020, our new home will be located at 3536 52nd Street.

None of these things would be possible without the strong leadership from our Board of Directors, dedicated senior leadership, and engaged, professional supervisors, and managers. Our staff works hard to safeguard the best quality services we deliver to our consumers, and our consumers continue to expect a positive, person-centered, compassionate approach as we work to support their needs.

2020 looks to be another year of change as we finish up a build and move into a new space. As we continue to embrace these changes, I believe that we are prepared and ready to face these opportunities head-on. KHDS is not afraid of new ideas, hard work, and prospects of developing an even better and brighter future.

Jeannine M. Field
Jeannine Field

MESSAGE FROM THE CHAIRPERSON

Mark Johnson

On behalf of the Board of Directors, it gives me great pleasure to present the Kenosha Human Development Services 2019 annual report. The past year has been one of continued growth and getting ready for exciting changes and opportunities. The downtown office buildings were sold, and we are preparing to move to a new main office location. This past year has had a feeling of continuation and anticipation for the big changes to come.

This year we are highlighting the culture of collaboration in our agency and in our community. Kenosha is unique regarding the commitment many agencies have made to work together to better serve our citizens. KHDS is a strong, mission-based agency. Grateful to share our mission with many community partners, we know these service collaborations have done much to enhance lives in our area. We thank our partners and look forward to many more years of strong, healthy, mission-driven opportunities to work together.



The KARE Center expansion fills a compelling need for services, as does the re-envisioning of Shelter Care into Kauffman House. These program expansions are indicative of our mission to always be at the frontline of service in our community. The creation of the Division for Community Recovery Services and other exciting program changes in 2019, highlight the ability of KHDS to adjust with the needs of our county stakeholders and partners.

Working together, we are stronger. We strive to be steady and stable. Our results inspire confidence.

Mark Johnson



While we are confident in our ability to meet the needs of those we serve, we know that we cannot do it without the partnerships and collaborative relationships we have with other wonderful service providers in our community. We thank the many

providers we work with on committees, coalitions, network meetings and referrals. We'd like to highlight four of our most notable collaborators and acknowledge their contributions to the work we do at Kenosha Human Development Services.

JUVENILE CRISIS and CHILD PROTECTIVE SERVICES:

"I have worked in three different counties throughout my career," says KHDS Juvenile Crisis program manager Jolene Dustman. "Kenosha has phenomenal collaboration for child welfare and mental health, and I am very proud to work in our community."

Dustman actively represents the KHDS Juvenile Crisis team with the Coordinated Response to Child Abuse and Neglect program. She participates in a daily multiagency review of all child abuse and neglect calls served by Juvenile Crisis, as well as serving on the Child Fatality Review committee and the Organizational Review committee. When things get rough for a child in Kenosha County, Dustman and the nearly two dozen collaborating agencies are on the front line to help.

Because of the active communication and collaboration among so many agencies, KHDS Juvenile Crisis is able to pull together the right resources, such as the Prevention Services Network (PSN) and Families First, to deliver the highest quality care to meet the individual needs of each family they encounter. Families struggling with poverty, addiction, or in need of different parenting skills, as well as families with children living with mental illness, all benefit from the community's coordinated services network.

In addition to the daily child safety welfare work law enforcement and other agencies tackle throughout all of Kenosha County, the team also makes time to provide advocacy and education programs, such as mandatory reporter training for professionals and a suicide prevention curriculum for seventh graders.



Juvenile Crisis is an important and valued member of the Coordinated Response to Child Abuse and Neglect Program. Juvenile Crisis works to ensure the immediate safety of children at risk of abuse or neglect. Juvenile Crisis is essential in being the first step in helping to make families in our community stronger by being able to respond quickly and provide connection to concrete resources during times of need.



—Karyn van Heijningen
Coordinated Response to Child Abuse
and Neglect Coordinator, Community
Impact Program

ADULT CRISIS and the PLEASANT PRAIRIE POLICE DEPARTMENT



The KHDS Crisis team has always enjoyed exceptional working relationships with local law enforcement agencies. By the nature of the work, field staff, and patrol officers get to know each other working together, responding to calls. But in 2019, the Pleasant Prairie Police Department chief, Dave Smetana, reached out to forge a unique, collaborative relationship to benefit village residents.

“Chief Smetana called me and explained that his officers were concerned about many of the residents they had repeated contacts with,” says KHDS Community Intervention Center (CIC) director Kari Foss. “As we talked, we began to see a new opportunity to increase the level of our collaboration.

“Chief Smetana told us his officers were concerned about how best to serve residents with challenging issues such as aging, addiction, and mental health challenges,” continues Foss. “So, we developed a new approach with PPPD to take a proactive stance toward mental health care, as well as teach law enforcement officers some high-level strategies and techniques in assisting individuals who may be facing a variety of situations.”

In addition to the officer training, Foss and Chief Smetana developed a new program where KHDS Crisis staff does ride-alongs with community service officer Kristen DeSchaaf to visit and check in with residents who have had frequent contacts. “Our society is so fragmented, and program criteria is so specific that we can easily lose touch with the core idea of social work, which is simply reaching out to an individual who is having a rough time, and meet them where they are and see how we can help,” Foss explains. “By going on visits before an individual reaches a crisis point, we can point them to services and opportunities to get a helping hand with whatever is at the core of their issue.”

This is the first time such a collaborative approach to serving residents has been implemented in the region. “Chief Smetana understands we each have our expertise and we can work together to offer aid and safety to the people in our community.”



Through the collaborative work partnership with KHDS and CIC Director, Kari Foss our agencies have worked on mental health issues to better serve our citizens, especially those experiencing a serious mental health crisis. Through this partnership, we have established a team represented by an adult crisis worker and a Pleasant Prairie Police community service officer to go into the community and meet directly with our most frequent mental health consumers. This effort will hopefully lead to the efficient and compassionate delivery of the array of services to those most in need.



—Chief David Smetana, PPPD

HOUSING SERVICES with the SHALOM CENTER and WOMEN AND CHILDREN'S HORIZONS:

Homelessness is a community-wide issue, and commands a community-wide response. KHDS Homeless Assistance Supervisor Veronica Judon has thrown her energy into developing and maintaining a coordinated and collaborative approach to the problem throughout Kenosha County. Judon represents KHDS in forging the strong working relationship among the major community organizations focused on ending homelessness. Shalom Center, Women and Children's Horizons, The Sharing Center, and KHDS work together to leverage their strengths in order to best serve people who need homeless-related services.

"Each of our agencies specializes in providing a unique service," says Judon. "We don't see each other as competition. In fact, we act as one another's resources in meeting the challenges of homelessness. We meet two times a month to share ideas, staff challenges, and work together to get people off the street, out of temporary shelter, and into permanent housing with the ongoing services they need to achieve success."

The greatest challenge is the lack of affordable housing in our communities. "We all support a vision of housing in the greater Kenosha County area," Judon adds. "We have the same basic mission. We listen to one another, and we understand that homelessness doesn't have a 'face'—anyone can experience an episode of homelessness. Our collaboration offers support to one another and the people in our programs."



The ability to partner effectively with other organizations is absolutely essential to continue building healthy communities. As community partners, we know that we can't do it alone. Effective collaboration between the Shalom Center and KHDS allows us as providers the opportunities to provide benefits to ensure better outcomes for the families and individuals whom we serve.



—Tamara Coleman
Executive Director, Shalom Center



BRIDGES COMMUNITY CENTER and NAMI – KENOSHA COUNTY

Bridges Community Center offers local programming for Kenosha County residents on both sides of the interstate. Consumers can rely on Bridges for peer support, advocacy, and empowerment for adults recovering from mental illness.

One reason Bridges is able to provide such robust services is because of the Kenosha chapter of the National Alliance on Mental Illness (NAMI). NAMI is the largest grassroots mental health organization in the country. The two organizations have enjoyed a very close working relationship, supporting each other in their respective missions.

It is not uncommon to find Bridges staff and members volunteering at NAMI fundraisers or working a combined information booth at resource fairs. “We support each other and send one another referrals,”

says Bridges Recovery Mentor Carrie Szulczewski. “If someone calls here and needs NAMI services, we send them their way. In the same way, NAMI refers many people from their support groups who might benefit from our recovery groups. We work together to support people on their recovery from mental illness. Our relationship is really good!”

NAMI also provides resources and funding support for some of the most popular Bridges programs. For instance, NAMI provided 15 bicycles and safety equipment for Bridges members last year as part of a bicycle raffle. The national organization also provides a scholarship for Bridges members to participate at the YMCA, and partners with Rogan’s Shoes to provide new shoes to any Bridges member who completes 30 walks as part of the Walkabout Rewards program.

“

“NAMI Kenosha County and Bridges Community Center have a special partnership. I think it is all about a wonderful relationship that has been nurtured over time.

NAMI’s mission is to provide support, advocacy and education to those in our community with mental health challenges and what better way to do that than with an organization of people who are living with these issues.

Supporting people at Bridges is accomplished in many ways. Our organizations co-sponsor social events such as the Annual Vigil and Summer Picnic. Bridges members are invited to the NAMI Holiday Party. The general public as well as Bridges members are invited to come to support groups at St. Paul’s Lutheran Church. We offset Bridges’ rent with a monthly stipend. NAMI sponsors specific programs for Bridges and KHDS members including: Walk about Rewards, Ride About Rewards, The

Y program, and The Fan program. There are two new programs being developed which will directly impact Bridges members and those in Kenosha living with mental illness. They include The Oral Hygiene Project and The Socks Project.

Finally, many Bridges members are also NAMI members. This is a fabulous connection because there is so much we can accomplish with a greater collective voice. An example of this collective voice happened last year. NAMI Kenosha County sponsored a group of Bridges/NAMI members to take part in “Action on the Square” Advocacy Day in Madison. During this annual event many perspectives and stories were heard by our state politicians. This kind of experience is empowering and helpful to recovery!”

”

—Lisa Zanin

President NAMI Kenosha 2019

COMMUNITY RECOVERY SERVICES

THE COMPREHENSIVE COMMUNITY SERVICES PROGRAM AVERAGED

97 CONSUMERS
PER MONTH IN
2019

Comprehensive Community Services:

People living with persistent mental illness or substance abuse disorder sometimes need additional help managing their illness and getting their recovery on track. The Comprehensive Community Service program (CCS) provides psychosocial interaction and thoughtful care management to this population. The program is person-centered, with the individual's choice of services playing an integral role in the creation of a meaningful care plan. The person works with a service facilitator to devise his or her goals and objectives and together they work through the stages of change. The plan changes as the goals are achieved and the person moves toward greater independence, learns to manage the illness and symptoms and no longer needs the program.

Community Support Services:

The Community Support program (CSP) focuses on a person's skills to help them learn how to manage their mental illness. The program uses a coordinated care approach, networking case managers, nurses, and psychiatrists into each person's plan. Per-

son-centered goals involve learning to recognize and reduce the intensity of mental health symptoms, creating and relying on a support network, peer mentoring, social skills, and daily living skills. Care plans rely on the person's strengths which are the key to the success of their recovery. Case managers look for opportunities to teach new skills every day and every new skill learned is one more self-directed step in the journey of recovery.

Partners for Autonomous Living:

Living independently while having symptoms of a mental illness can be a daunting experience. Day-to-day activities may be difficult or learning new tasks might seem impossible. Some may need assistance to learn these skills. That's where the Partners for Autonomous Living (PALS) program comes in. PALS staff help people learn those skills necessary to live in the community—how to be a good neighbor, how to budget, how to cook a meal, how to navigate a bus route—all skills one might need to remain independent. The teaching is done hand-over-hand, so program participants can learn by doing. PALS staff work closely with the case management team and is part of the participant's individualized treatment plan.

**PALS helped 51
people per month in
2019**

**The Community
Recovery Services Division
served 371 people in
2019**

HOMELESS ASSISTANCE SERVICES

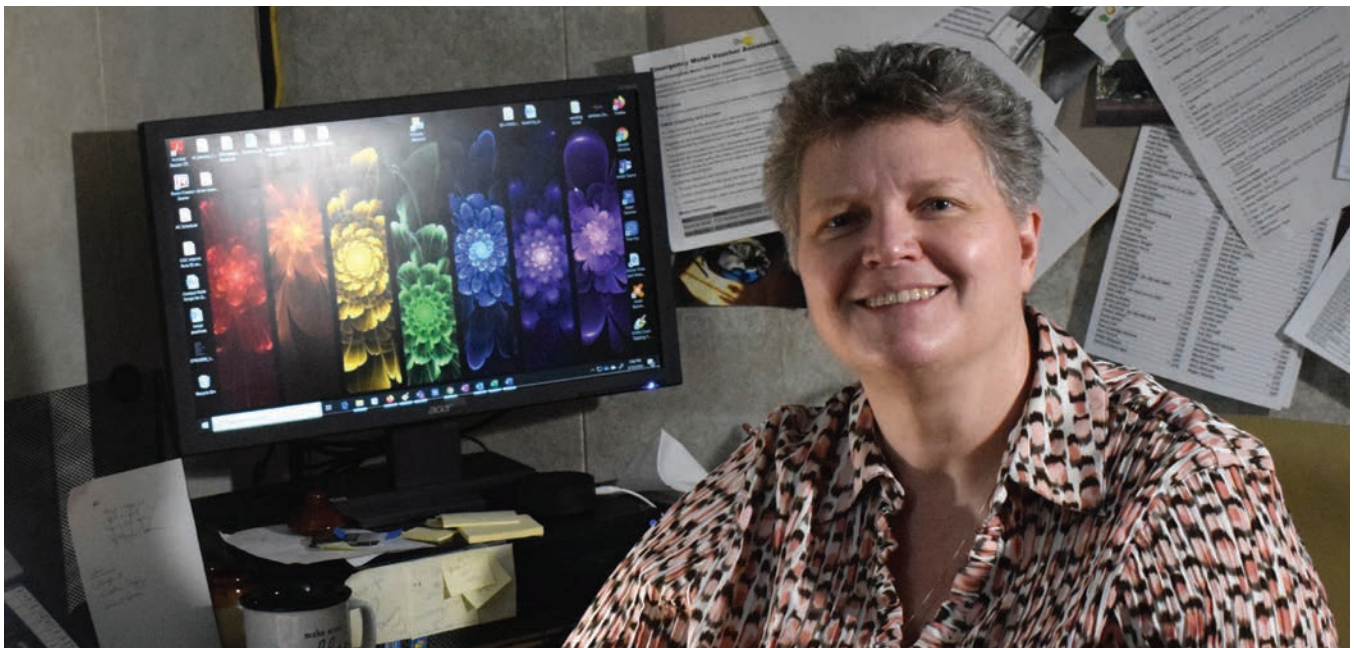
For most of us, the thought of becoming homeless is alien and something that happens to other people. For those “other people” being homeless is a harsh reality of hard nights living on the streets, in tent cities, in parks, and out of the public eye. Homelessness can often be accompanied by trauma from an abusive relationship, chronic illness, or an addiction disorder. KHDS meets individuals where they are and understands that all people have the possibility for success once the door is opened to them. KHDS follows a housing-first approach to successfully connect homeless individuals and families to housing without preconditions and barriers to entry, such as sobriety, treatment, or service participation requirements.

Coordinated Entry:

With funding through the Wisconsin Balance of State Continuum of Care, KHDS acts as the lead Homeless Coordinated Entry agency for the four collaborating agencies (KHDS, Shalom Center, Sharing Center, and Women and Children’s Horizons) to assess people for strengths and needs and connect them to the most appropriate housing and resources in the community.

Projects for Assistance in the Transition from Homelessness:

Providing outreach and case management 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 engaging with people experiencing homelessness who are living with mental illness or co-occurring substance abuse disorders. Our PATH case management service helps 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 Worker follows the individuals through those services, connecting with the service providers and assisting the individuals in navigating the service delivery system.



330 homeless clients served
through the Coordinated
Entry program in
2019

PATH assisted an average
of 15.8 homeless people
per month in
2019

MyHOME Rapid Rehousing Project:

MyHOME Rapid Rehousing Project started in 1991 to provide stable housing options in our community under the name KHDS Transitional Housing program. It was initially funded by the Family Youth Services Bureau, the United Way, The Department of Housing and Urban Development (HUD) and generous community donations. Today, KHDS participates in the statewide HUD Continuum of Care, which collaboratively and competitively writes new project and renewal grants to support itself. Today, MyHOME serves single adults experiencing homelessness with a focus on working with people living with mental health and/or substance abuse disorders. The project can house ten people at any given point in time.

KYF Rapid Rehousing Program:

KHDS considers rapid rehousing critical to a community's homeless response plan and is designed to help people find a home as quickly as possible. Helping people find stable, affordable housing options in scattered site units in the community and offering individual supportive services is the key to success. The program serves ten people at any point in time with a focus on working with people who are living with a severe and persistent mental illness.

Kenosha Permanent Housing Connections:

Homelessness can have a profound effect on living a safe and healthy life. We understand that permanent housing and other basic needs must be met before a person can focus on other pursuits and dreams.

Thanks to a HUD Continuum of Care grant in 2019, the Kenosha Permanent Housing Connections program was able to increase the number of people served from 10 to 25. This program works with those who are in the most need living with a disability and experiencing homelessness.

Emergency Homeless and Housing Grant/SHARES Funding:

The Emergency Homeless and Housing Grant (EHH) is a collaborative grant that provides funds for emergency shelter and Rapid Rehousing rental assistance for people experiencing homelessness. KHDS participates as the lead agency in this grant application with the Shalom Center and Women and Children's Horizons. EHH funds provide short-term rapid rehousing rental assistance to people who must leave emergency shelters.

2019 HOMELESS SERVICES

PERMANENT
HOUSING
CONNECTION
ASSISTED

22.2
PEOPLE
PER MONTH

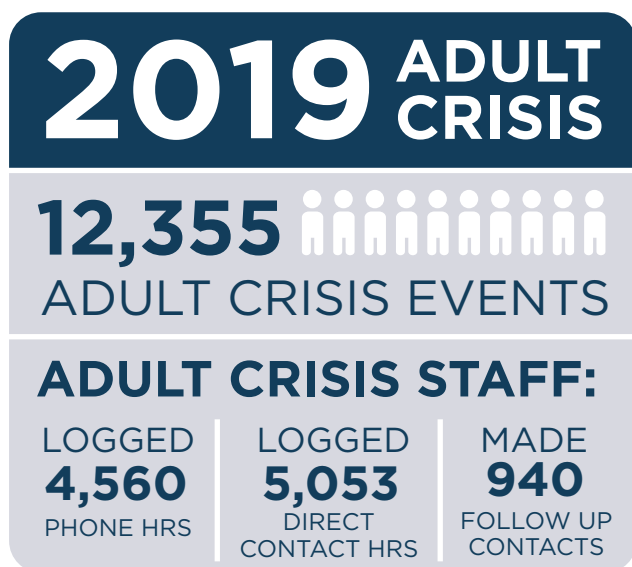
RAPID
RE-HOUSING
PROGRAMS
HELPED

15.9
CLIENTS GET
INTO HOUSING
PER MONTH

WE ADDED 10 NEW CLIENTS TO THE
EMERGENCY SOLUTIONS GRANT PROGRAM

COMMUNITY INTERVENTION CENTER:

Once the hub of KHDS mental health services, the Community Intervention Center has evolved over the years to address the changing needs of our community. As care management programs like Community Support Program (CSP) and Comprehensive Community Services Program (CCS) grow, the focus of the Community Intervention Center (CIC) has shifted to become the successful, emergency mental health crisis response system it is. From first crisis contact, to KARE Center admission, to court-related case management, the CIC staff work with law enforcement, the courts, and the individuals to make a mental health crisis just a bit less scary and ease the person into care and treatment.



Crisis Prevention Center:

For over a year now, the KHDS Crisis Prevention Center has been running smoothly, as expected. Our Crisis Prevention/Intervention Unit are uniquely cross trained to respond to both adult and juvenile crisis calls. This combined unit can address 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 reports. Crisis

services also include peer mentor support for those experiencing a substance abuse withdrawal or overdose. Our innovative use of peer mentors for additional support in a crisis offers positive role models for recovery to those in need. The Crisis Prevention team (adult and juvenile combined) responded to 17,136 crisis events in 2019.

KHDS Alcohol and Other Drug Abuse Specialist:

Providing frank, honest, caring guidance to individuals at a pivotal time in their recovery is the hallmark of our KHDS Alcohol and Other Drug Abuse (AODA) specialist's talent. Any person admitted to the KARE Center who wishes to see the AODA specialist and seek substance abuse support (for anything other than opiates) is seen within one business day. She helps the person plan for discharge, creates goals and offers referrals to ongoing treatment providers. She offers support and guidance throughout their stay, follows them after discharge, and accepts walk-in appointments for anyone seeking treatment at the Crisis Prevention Center. In 2019, the KHDS AODA specialist had contact with 318 people.

Kenosha Adult Residential Emergency Center (KARE Center):

With a long history of providing quality mental health care for those individuals who do not need or meet the hospital level of care, we were extremely excited to bring the KARE Center up to its full capacity of 16 beds this year. Dr. Matthew McCarthy and APNP Heidi Eckelberg see people who are admitted to the KARE Center to help them begin treatment. Staff there work to establish stability and help with referrals to treatment providers once the person is ready to discharge. In 2019, there were 936 admissions to the KARE Center.

2019 KARE Center admitted 936 patients, with an average stay of 4 days in
2019

KARE Center average population at KARE Center was 10.6 people per day in
2019

Court Services – Chapter 51 Case Management:

Individuals, adults or juveniles, who are causing harm to themselves or others due to a mental health crisis, may be detained to a psychiatric hospital and held there for up to 72 hours. At that time, the court will decide if the individual will require a court order for treatment. This is called a Chapter 51. KHDS Chapter 51 Case Management provides guidance and follow-up to each person for the duration of the court order. The case manager monitors the individual's progress and compliance with treatment and report's back to the court.

Based on the individual's progress and the reports to the court, the commitment order can either be dropped, if progress is made, or extended, if further monitoring is necessary.

Crisis Case Management:

Sometimes there is a waiting period from the time a person is screened for eligibility for a program and when they can actually get into a program. The wait time is caused by many factors—the need for provider signatures on paperwork, getting necessary documents from various providers, or following up with other people in the person's life. During that time, the person may need some assistance to continue to live independently and cannot wait for the actual intake. We created the KHDS Crisis Case Management unit specifically for individuals who find themselves in this situation. Able to act without the stringent mandatory forms and paperwork demanded by some formal programs, our crisis case management unit can step in and provide some intermediate case planning and follow-up to assist the individual in the community.

This helps to keep the person moving forward in recovery until a more structured, formal case management program is ready to intake

Jail Diversion Program:

Individuals living with mental illness or substance abuse disorders who have been convicted of a non-violent crime can be diverted from jail time to the Jail Diversion program. This program helps the individual learn new ways of handling day to day stress, coping skills, job seeking skills, symptom management, and more. Knowing that often straying into criminal behavior is the result of unclear thinking due to the illness or substance use, the program works to teach the person a new way. If the individual has a felony charge it can be dropped to a misdemeanor upon successfully completing this program.

2019 JUVENILE CRISIS

4,781 
JUVENILE CRISIS EVENTS

JUVENILE CRISIS STAFF:

LOGGED
8,016
PHONE HRS

LOGGED
3,101
DIRECT
CONTACT HRS

MADE
2,989
FOLLOW UP
CONTACTS

SPECIAL SERVICES:

The Special Services division of KHDS houses those programs that sprung out of necessity from other programs, such as Juvenile Crisis. As the initial crisis was met with a response, it became evident that there may be other underlying concerns that need to be met—victimization, trauma, youth in need, etc. and the responses to those needs grew into the programs making up the Special Services division.

VICTIMS OF CRIME ACT:

Being a victim of a crime, whether it is domestic violence, sexual assault, or something else—can leave a deep emotional scar that can take a lifetime to heal. The Victims of Crime Act (VOCA) program offers victims ways to start the healing process including basic support, victim compensation, and therapy. At KHDS the VOCA program includes the following services:

Family Intervention Project:

When there is an instance of domestic violence, a coordinated response takes place to offer immediate safety support, safety planning, support services, and basic child welfare assessment. The Family Intervention Project (FIP) worker collaborates with a family advocate from Women and Children's Horizons to assist victims in the quickest, safest possible way. FIP also collaborates with Legal Action of Wisconsin.

Community Support and Outreach:

Finding and identifying victims in mental health crisis, those experiencing homelessness, or living in rural areas of our county are the responsibility of our Outreach team. Referrals come from law enforcement and, sometimes from victims who were previously served in the program. For the past two years, the Outreach worker has taken her services to the Sharing Center on a weekly basis to reach out to

people living west of I-94 and facilitated two weekly survivor groups—one at Bridges Community Center for trauma victims and one at the Behavioral Health Clinic for people in controlling relationships.

VOCA Therapy:

KHDS Behavioral Health Clinic is proud to have two VOCA therapists who provide trauma recovery therapy. We also have a bilingual therapist who speaks Spanish for those people in need with limited English-speaking skills. The addition of trauma therapy to the VOCA program has been wildly successful and many victims were able to receive assistance.



Skills program had 59 youth enrolled over the course of the year in
2019

KHDS admitted 16 young people in the Supervised Independent Living program in
2019

INDEPENDENT LIVING:

In 2019, KHDS Basic Center and Street Outreach Services (both services previously housed within the Special Services Division) merged and became the KHDS Transitional Living program. This change was perfect as it kept focused with homelessness services which is the focal point behind Basic Center services. With Basic Center and Street Outreach merged, Independent Living (ILP) concentrates on three distinct programs within.

Supervised Independent Living:

KHDS ILP is one of only three supervised ILP providers in the state of Wisconsin. We serve 17-19-year-old youth living on their own as a court-ordered placement. In 2019, KHDS served 24 youth in this program.

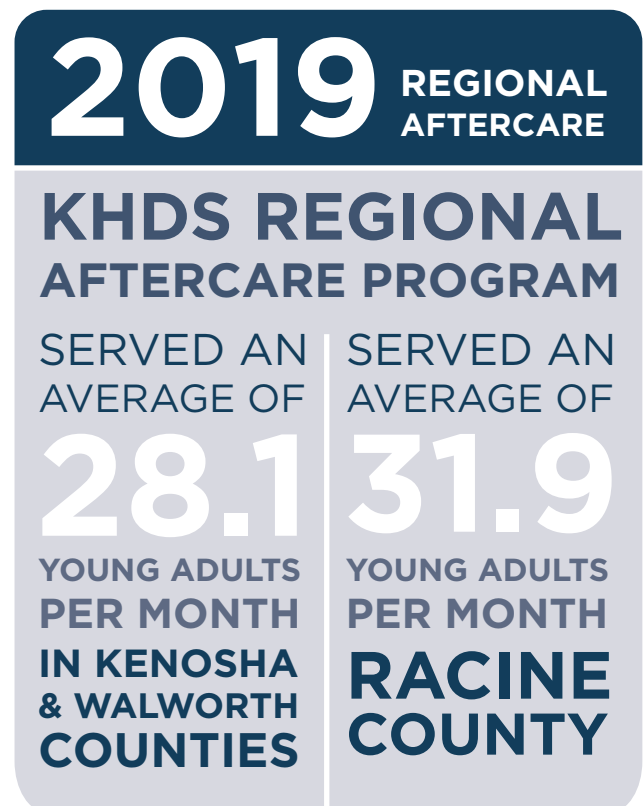
Adult Skills Program:

KHDS ILP provides skills-based teaching to youth 14-years and older placed in out-of-home care. These are skills that can help youth be ready for the time when they must leave their current living situation and live independently. In 2019, KHDS served 59 youth in this program.

Aftercare Transition Resource Coordination:

KHDS Aftercare offers voluntary programming for youth 18-21 years of age (up to 23 years if they continue to receive education/training voucher assistance) who have aged out of foster care. This includes case management for youth who receive housing vouchers for at least 18 months. In 2019, KHDS Aftercare served 81 youth.

In 2019, KHDS began providing these services for all youth aging out of foster care for Kenosha, Racine, and Walworth counties thanks to funding provided by the Transitional Resource Agency Grant for Region IV. This grant is for the next three years. The grant allowed KHDS to expand and focus our services in housing, education, health and wellness, employment, and development of permanent connections for youth as well as creating a Youth Advisory Council with an advisor to implement and coordinate Region IV's youth advisors.

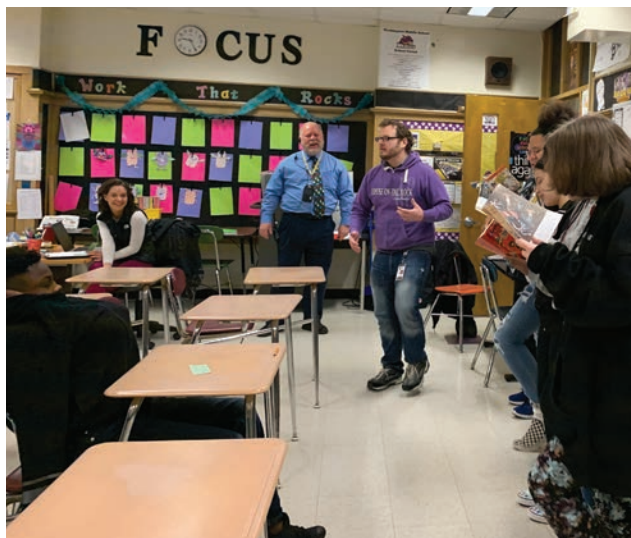


RESIDENTIAL CARE SERVICES:

KHDS was founded in 1973 to provide residential care for youth needing placement. Though our array of services has grown over the years, our dedication to provide quality residential services has remained steadfast. Of course, there have been changes. We feel the evolution of our programs has allowed us to focus on making them better but the same basic assumptions are used—everyone wants to feel safe, have a sense of belonging, and be loved. KHDS Residential Care services strives to meet those needs for those we serve.

Adult Family Home:

The KHDS Adult Family Home provides a home to four adult men living with cognitive disabilities. The program is staffed by two full-time teaching companions who reside in the home during their shift. They are assisted by two part-time teaching companions who work throughout the week. It is a family style environment for the men that includes home cooked meals, chores, daily activities, and vacations. There is structure within the home and the men work on building skills they can use in the home and in the community. The teaching companions are very dedicated to these men and consider them to be family.



2019 SPECIALIZED
FOSTER
CARE

ADMITTED
24 NEW CHILDREN
INTO SAFE HOMES

FAMILIES LOGGED
8,271 CLIENT DAYS IN
KENOSHA COUNTY

FAMILIES LOGGED
1,546 CLIENT DAYS OUTSIDE
OF KENOSHA COUNTY

Specialized Foster Care:

Recruiting and training foster families has become something of a niche for our specialized foster care team. Our program offers full training and support to those families willing to take the chance to open their homes to a child in need. As the need for foster homes rises, KHDS Specialized Foster Care has reached out to the community using advertising in the Kenosha News, Happenings Magazine, Kenosha Expo, Harbor Market and social media to recruit potential foster parents. In 2019, the Specialized Foster Care program had 26 licensed homes with another four awaiting their licensure. There were two respite homes available. 253 referrals were made to Foster Care in Kenosha County. KHDS served 49 youth in the Specialized Foster Care program.

Kauffman House admitted 76 youth
into the home for an average
stay of 12.35 days in
2019

KHDS Adult Family Home
provides teaching companions
4 men in residence in
2019

Kauffman House:

2019 was a big year of change for our Shelter Care program. The program closed early in 2019, was completely imagined and reopened as the Kauffman House, in honor of 44-year KHDS Residential services veteran Dick Kauffman. During his tenure, he and his wife were the original house parents at the shelter care home. Not only did Dick serve as Director of KHDS Residential services, he has been a long-time mentor to so many of the KHDS staff. His vision and philosophy of care forms the basis of our operational theories here at KHDS.

The new Kauffman House admits children who are in crisis and takes them in at a younger age than before. In order to make this adjustment, we retrained existing staff and hired additional professionals as we prepared for a whole new way of providing care. The program is still focused on short term care, and the teaching companions are trained in the Teaching Family model – teaching social, academic, and maintenance skills to the youth. In 2019, Kaufman House served 76 youth with an average stay of 12.35 days.



PEER SUPPORTED SERVICES:

KHDS has a proud history of championing the use of peer-to-peer support in our mental health services for many years. Long before it was the norm, we had “mental health aides” assisting in our then Supported Apartment program. More recently, we’ve expanded our Peer Support services to strengthen the way we are able to meet the needs of those we serve. Some of the ways we use Peer Support are:

CARA Grant Crisis Peer Support Specialists:

These individuals, working within our Crisis Prevention Center, respond with the crisis team directly to the emergency room when someone is experiencing a crisis involving opiate drugs or overdose. They meet with the individual and offer them support and assistance from the unique perspective of someone who has lived the experience. They also assist individuals who have been admitted into the KARE Center who may need some additional follow-up and support until the person is on the road to recovery.

Homelessness Programs Outreach Worker:

A new addition to the homelessness program is the Peer Outreach, a person with personal experience in recovery who can relate to the struggles of those entering the program for assistance. The deeper understanding of symptoms, helplessness, fears and other barriers that peer support has brought to this program has bolstered the services and energized the other workers within the program.

Community Support Program/ Comprehensive Community Services (Peer Support):

Since the beginning of the Community Support Program (CSP) at KHDS back in 2009, Peer Support services has been an integral part of the program. It

has grown exponentially since that time and the peer support specialists work in tandem with the case managers and service facilitators as important factors in the program participant’s recovery team. The peer specialists spend time with their participants and, often, can have deeper, more open conversations with them than others because of their lived experience.

Bridges Community Center:

Until last year, Bridges Community Center was its own entity and had its own Board of Directors. That Board disbanded and asked that KHDS, Bridges’ long-time fiscal manager, take on Bridges as one of its programs late in 2019. The KHDS Board voted and agreed. Bridges Community Center is a unique program where the guidelines are voted on by the members and the support groups are created and facilitated by the members. It is a recovery support center that offers over 130 groups per month and lunch for members every day. Members also have opportunities for volunteering in the community and social activities. With over 285 active members and an average of 54 people attending every day, Bridges Community Center is truly peer-to-peer support at its finest.



COMMUNITY RESOURCES:

CLTS added 97
new children with complex
needs to the program in
2019

Mental Health and Substance Abuse Resource Center:

The first stop for those in need or for someone just wanting information about what services are available in our community, the Mental Health and Substance Abuse Resource Center (MH/SA Resource Center) is unique to our area! Our friendly, knowledgeable information and referral staff assist people with navigating complicated insurance systems, screen for program eligibility, find providers who accept various insurances, and help people find help when they need it. They also bring resources to the community by participating in resource fairs and expos. The MH/SA Resource Center also offers individuals the opportunity to meet with a benefit specialist who can assist them in applying for medical assistance and guide them through the application process and all stages of approval and/or denial. The specialist can confer with legal counsel from a benefit attorney, if necessary, which helps those we serve.

Guardian Assistance Program:

Each year, legal guardians are required to file accounting paperwork with the court, and often they need help understanding and completing these forms. For years, KHDS has offered group training and private sessions to assist guardians with this task. This year the program assisted 73 guardians with their annual accounts.

Children's Long-Term Support Program:

Children with disabilities, cognitive or physical, often require additional equipment and services that may not be covered by a traditional insurance. Families of

these children rely on programs like the Children's Long-Term Support (CLTS) program to supplement the services needed to support their child in the home. Special therapies, time at respite, wheelchairs, adaptive equipment and trained care givers are just some of the things families choose on this program to make their lives a bit better. The CLTS service coordinators work with families to create plans that address the needs of each child, provide information on community services for the whole family, and advocate for the most effective services and programming. In 2019, the CLTS program provided service to 265 children.

Representative Payee Program:

Often, due to a person's illness or substance use, Social Security will determine they are unable to manage their own benefits. KHDS has a representative payee program that will work with the person to manage their Social Security benefits. The priority to make sure that basic life needs are met—food, clothing and shelter—and those bills are paid first. After that, what is left is budgeted out in weekly or monthly amounts, according to the wishes of the person, and they receive a check which they can spend as they see fit. In 2019, some of our rep payee participants began receiving their money on a debit card rather than a check. This is a change we'll be implementing in the program soon for all. The representative payee program currently serves over 650 individuals.

INTRAVENOUS DRUG USER PROGRAM:

The IV Recovery Coordinator had 63 opened cases in **2019**

Grant funded through the State of Wisconsin, the Intravenous Drug User (IVDU) program shares duties with two other agencies—Kenosha County Division of Health and Oakwood and Associates—to provide recovery services to those seeking help for opiate addiction. The KHDS recovery coordinator helps educate the community about the opioid problem by hosting community discussions three times per year, bringing together providers, families of those addicted, and those in recovery to talk about solutions and resources. The recovery coordinator is also an active part of the larger Kenosha area response to the problem and attends many area meetings and task force discussions bringing insight and ideas to the table. At KHDS, she sees those using IV drugs when

they are admitted to the KARE Center, helping them plan for recovery upon discharge and follows them for supportive services for as long as they may need it. She refers each individual to the appropriate treatment provider and helps families understand how best support their loved ones with addiction issues. The IV Recovery Coordinator had 63 opened cases in 2019.

KHDS BEHAVIORAL HEALTH CLINIC:

We formed the KHDS Behavioral Health Clinic (BHC) in response to the need for more psychiatric services in our area. We are proud to report that the BHC has been successfully treating patients since its beginning. Dr. Matt McCarthy, APNP Heidi Eckelberg, and the entire clinic team treated 636 people in 2019.

We streamlined some of the services at the Behavioral Health Clinic to match the community's needs. With declining referrals and a clear preference for in-person appointments, we chose to stop providing telepsychiatric services in 2019.

Among the many services the Behavioral Health Clinic offers is VOCA Therapy. Crime victims can come in and learn how to process their traumatic experience with trained staff. We also maintain a robust injection clinic for patients who have been prescribed long-acting psychiatric intramuscular medication but do not have a provider to administer the injection.

Looking forward, we see opportunity to continue growing our practice. The Kenosha area is still not fully served, in terms of mental health care. Our low-barrier clinic model is an asset to the community and helps us ensure professional mental health care is accessible to all who need it.



OPERATIONAL SERVICES:

Those people behind the scenes, the ones who keep everything running smoothly while the rest of us are off doing what we do, are often the unsung heroes of Kenosha Human Development Services. We know that without them we would flounder. It is never more evident when the smallest thing goes awry—a printer stops working, we run out of pens, a light goes out or a tire goes flat—that we know how much these amazing people do every day! We tip our collective hat to our:

- Operations Manager
- Data and Communication Strategist
- Receptionist
- Billing and Administrative Support Specialist
- Fiscal and Workflow Specialist
- IT Specialists
- Data Entry team
- Licensing and Quality Assurance Specialist
- Facility and Fleet team



KENOSHA HUMAN DEVELOPMENT SERVICES, INC.

BOARD OF DIRECTORS

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VICE CHAIRPERSON
Michael Pollocoff

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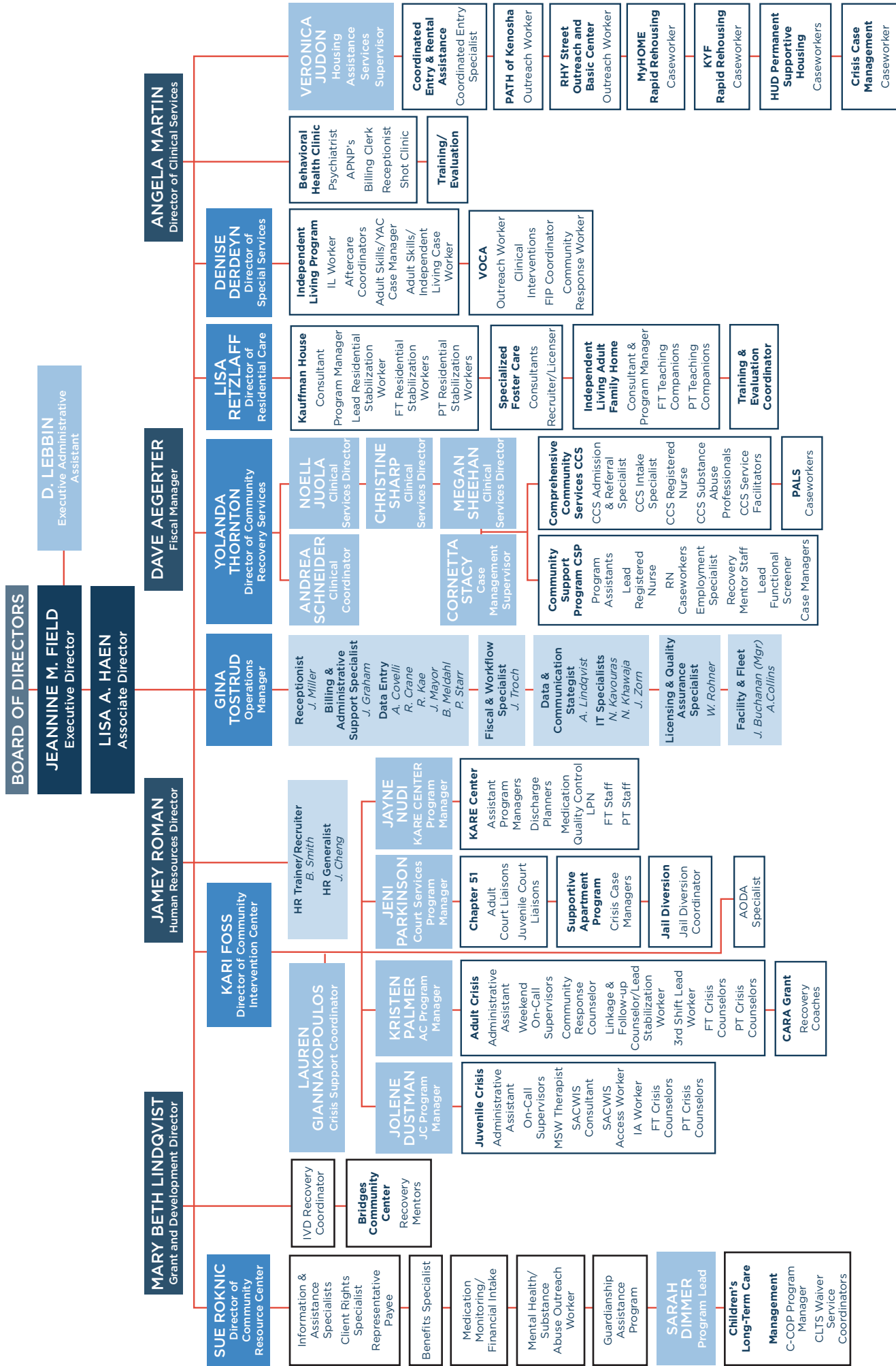
BALANCE SHEET AS OF DECEMBER 31, 2019

ASSETS		LIABILITIES & FUND BALANCE	
CURRENT ASSETS		CURRENT LIABILITIES	
CASH IN HAND	\$1,104,484	ACCOUNTS PAYABLE	\$24,162
MONEY MARKET	\$359,351	WAGES PAYABLE	\$645,702
PETTY CASH	\$825	UNITED WAY W/H PAYABLE	\$1,622
ACCOUNTS RECEIVABLE	\$905,978	ACCRUED PENSION PAYABLE	\$226,749
PREPAID EXPENSES	\$321,205	EMPLOYEE FLEX SPENDING	-\$6,624
PREPAID INSURANCE	-\$38,143	ACCRUED HEALTH, DEN, LF, INS PAYABLE	\$11,474
TOTAL CURRENT ASSETS	\$2,653,700	DEFERRED INCOME	\$1,086,396
		DAYCARE FLEX SPENDING	\$10,737
PROPERTY, PLANT & EQUIPMENT		TAX & FRINGE PAYABLE	\$46,933
LAND	\$169,650	TOTAL CURRENT LIABILITIES	\$2,047,151
FURNITURE & FIXTURES	\$506,043		
BUILDINGS	\$2,851,677	TOTAL LIABILITIES	\$2,047,151
VEHICLES	\$102,521	TEMP. RESTRICTED	\$306,550
SUBTOTAL	\$3,629,891	FUND BALANCE	\$3,273,880
LESS: ACCUM DEPRECIATION	-\$656,010		
TOTAL FIXED ASSETS	\$2,973,881	TOTAL LIABILITIES & FUND BALANCE	\$5,627,581
TOTAL ASSETS	\$5,627,581		

SPONSORS



ORGANIZATIONAL CHART





**KENOSHA HUMAN
DEVELOPMENT SERVICES**
A NONPROFIT ORGANIZATION

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.

KHDS OFFICE LINE
262-764-8555

CRISIS HOTLINE
262-657-7188

MAIN OFFICE
New address starting July 2020:
3536 52nd Street, Kenosha, WI 53144

BEHAVIORAL HEALTH CLINIC
712 55th Street, Kenosha, WI 53140

KARE CENTER / CRISIS PREVENTION CENTER
1202 60th Street, Kenosha, WI 53140

KHDS.ORG