

COUNTY OF MILWAUKEE
Inter-Office Communication

Date: April 21, 2023
To: Marcelia Nicholson, Chairwoman, Milwaukee County Board of Supervisors
From: Shakita LaGrant-McClain, Director, Department of Health and Human Services
Subject: Department of Health and Human Services 2022 Annual Report
File Type: Informational Report

This informational report provides a report on how the Department of Health and Human Services set and achieved its 2022 goals as well as communicates its strategic plan.

POLICY

This report aligns to Chapter 108: Achieving Racial Equity & Health.

Milwaukee County Code of General Ordinances:	Chapter 108: Achieving Racial Equity & Health
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BACKGROUND

[File 22-104](#) amends Chapter 108 to require that “annually, by April 30 of each year or sooner, each Milwaukee County department leader and/or their designee(s) shall provide a written and oral report outlining their year-end results to a Milwaukee County Board of Supervisors committee. The reports shall, at a minimum:

- (a) Indicate the year-end goals the department set in the prior year
- (b) Share the rationale and relevance of the department’s performance metrics (i.e. explaining why they are “SMART” goals (specific, measurable, achievable, realistic, timely, and extending) and how they align to the county’s racial equity strategy, if applicable)
- (c) Report the department’s year-end results relating to the goals it had set, and
- (d) Provide a thorough analysis clearly articulating why goals were significantly exceeded, met, or not met.
- (e) Explain the department’s progress in creating a departmental-level strategic plan that aligns to the countywide strategic plan and provide an update about future plans to revise and enhance the departmental-level plan in the year ahead.”

ALIGNMENT TO STRATEGIC PLAN

- 1A: Reflect the full diversity of the County at every level of County government
- 1B: Create and nurture an inclusive culture across County government
- 1C: Increase the number of County contracts awarded to minority and women-owned businesses
- 2A: Determine what, where, and how we deliver services to advance health equity
- 2B: Break down silos across County government to maximize access to and quality of services offered
- 2C: Apply a racial equity lens to all decisions
- 3A: Invest “upstream” to address root causes of health disparities
- 3B: Enhance the County’s fiscal health and sustainability
- 3C: Dismantle barriers to diverse and inclusive communities

Alignment to the above strategic objectives is articulated in response to the questions below.

BODY

1. What were the top 3 goals of your department/office 2022? Please explain why they are “SMARTIE” goals (specific, measurable, achievable, realistic, timely, inclusive, and equitable) and how they align to the county’s racial equity strategy.
 - GOAL1: Racial Equity – Build on past efforts to grow Racial Equity knowledge and skill among staff, implement changes to policies and practices in alignment with Racial Equity, take steps to ensure DHHS has a diverse and inclusive workforce, and incorporate Racial Equity in collective impact efforts.
 - GOAL 2: No Wrong Door / Integrated Services and Care – Improve availability and access to services, take tangible steps to increase level of integration among Children & Family and Adult systems of care, improve physical access to services by placing facilities closer to vulnerable populations.
 - GOAL 3: Population Health and System Change – Increase funding and investment in prevention, increase partnership within human services systems to address health outcomes, prevention, structural racism, and make investments in parts of community where vulnerable residents reside.
 - GOAL 4: Infrastructure Supports – Secure and invest resources to grow DHHS capabilities in monitoring and evaluation, community involvement, technology,

fund development, training, and staff supports; execute organizational development efforts to continue to align organization with vision for the future.

Note that the above goals are not mutually exclusively, but intentionally build off each other. In fact, DHHS's approach to all goals is informed by Racial Equity: we consider it in the context of Integrated Services and Care, of Population Health, and of Infrastructure development. Similarly, the department's ability to achieve goals within Racial Equity, Integrated Services & Care, and Population Health are predicated on building key capabilities and infrastructure to support the work.

2. To what extent were these goals accomplished in 2022? Please explain.

GOAL 1: Racial Equity

2022 Goal: Build on past efforts to grow Racial Equity knowledge and skill among staff, implement changes to policies and practices in alignment with Racial Equity, take steps to ensure DHHS has a diverse and inclusive workforce, and incorporate Racial Equity in collective impact efforts.

Summary: DHHS was successful in continuing to increase knowledge and skills in Racial Equity, in implementation of policy changes across a variety of internal policies, and in making equitable choices about placement of DHHS services and investments.

Details:

Increasing Racial Equity Knowledge and Use of Tools

- In 2022, DHHS invested in an all-staff Racial Equity training named the “*Creating Equity Series*” that aimed to improve awareness and understanding of Racial Equity over the course of 15 months of training and hands-on coaching by UBUNTU Research and Evaluation.
- The effort involved monthly all-staff meetings, paired with monthly coaching for cohorts of leaders; this encouraged leaders and staff to put into practice what they were learning, unlearning, and relearning in the context of the training.
- Two-thirds of the way through the training, leadership conducted a point-in-time pulse survey of staff and found that nearly half (49%) of direct service staff reported changing their day-to-day practices as a result of the training.

Implementation of Racial Equity in Policy and Practices Across Service Areas

- DHHS staff across Service Areas applied their Racial Equity learnings by investing in changes to practices related to recruiting and retaining staff, to participant access, and to a variety of other policies. For example, modifications were made to hiring practices to make interviews more equitable,

to job descriptions certain positions allowed for substitution of experience for certain educational requirements, etc. These topics are a source of continued conversation among leaders and staff.

- An example of equitable practices is the increased implementation of programs that employ “Peers” or “Credible Messengers” through contracted partners to serve participants. In the area of Behavioral Health, Peers are specially-trained and certified individuals who have lived experience in mental health or substance use who work as part of the clinical team to build relationships and support participants. In the area of Youth Justice, a new area using the model, Credible Messengers are specially-trained individuals who have lived experience with the justice system who provide mentorship and help young people establish meaningful relationships with adults that can help guide them in making better choices. These models serve as examples of addressing equity for residents who otherwise face barriers to employment, while serving participants of programs in an effective manner.
- Another tangible example of Racial Equity in practice is Milwaukee County Area Agency on Aging's (AAA) new Dine Out program that expanded in 2022 and garnered awards and local media recognition. This program expansion added local minority owned restaurants to enhance the list of Senior Dining offerings. Diners were able to choose from delicious and culturally-diverse options while supporting minority-owned restaurants such as Daddy’s Soul Food & Grille, Orenda Café, and Antiqua Latin Inspired Kitchen. A successful outreach campaign to promote the Dine Out Program reached more than 10,000 residents and resulted in 1,000 new referrals. The program received media coverage in multiple outlets, including in the Journal Sentinel.

Continued Implementation of Racial Equity Recommendations in Contracting

- In 2021, DHHS engaged Cairo Communications, led by Dr. Deborah Blanks and Dr. David Pate, to conduct a Racial Equity assessment of DHHS’s process for contracting for services. This work led to a publicly-released report on the topic that outlined a variety of recommendations for changes to practices.
- In 2022, the team continued to make changes with the goals of reflecting the full diversity of the county at every level of DHHS contracting and dismantling barriers to diverse and inclusive contracting with BIPOC community partners. Outcomes/process improvements this year include:
 - 45% of contracted organizations were minority owned or minority led; a 12.5% increase over the prior year
 - 50% – approximate reduction in number of forms and submissions required to participate in an RFP process
 - \$100 -> \$150 – increased compensation for RFP panel members (a practice that began in 2021)

- In addition, a variety of efforts took place to provide technical assistance to smaller providers that may not be familiar with county RFP processes.

Placing Resources Closer to Vulnerable Populations and Investment Around Coggs

- DHHS has intentionally moved resources to and made investments in areas of the County where large parts of DHHS's participants reside, including investments in and around the Marcia P. Coggs building, in the new Mental Health Emergency Center, the Milwaukee County Mental Health Clinic in Shafi Plaza, the Behavioral Health Access Clinic North (located within Milwaukee Health Services, Inc.)
 - *Coggs Building* – In 2022, the County Board voted unanimously to approve \$32 million in American Rescue Plan Act (ARPA) funds to build a new Marcia P. Coggs Health & Human Services Building next to the current building within the King Park Neighborhood, a trusted location where health and human services have been delivered for more than 50 years.
 - *Housing around Coggs* – Housing Services continues to advance racial equity by winning a \$7.5 million competitive state Neighborhood Investment Fund Grant that will help build up to 120 new single-family homes in the neighborhood surrounding the Coggs building focused on minority home ownership and help with the revitalization of King Park.
 - *Mental Health Emergency Center, Milwaukee County Mental Health Clinic, Access Clinic North* – more discussion of these services is below.

GOAL 2: No Wrong Door / Integrated Services and Care

2022 Goal: Improve availability and access to services, take tangible steps to increase level of integration among Children & Family and Adult systems of care, improve physical access to services by placing facilities closer to vulnerable populations.

Summary: DHHS has continued to see increased use of key programs due to improved accessibility, has continued to move services physically closer to participants, and to integrate its internal processes across systems of care; ability to deliver on access has been hampered by challenges in staffing and by lagging funding for contracted providers who have faced high inflation in 2022.

Details:

Increased Utilization of Key Programs

DHHS has continued to increase accessibility for its programs, leading to more residents being served across a number of programs:

- *Children's Disabilities* – Children's Long-term Support (CLTS) and Children's Community Options Program (CCOP) enrollment *increased more than 40% over the past few years*, with current enrollment at approximately 2,200 children and youth. Over 3,000 children were referred to the Birth to 3 Program this year, a *10% increase since the start of the pandemic* in 2020.
- *Adult Protective Services* – received 1,766 referrals in 2022, with over 90% of referrals deemed appropriate for assignment. In addition to referrals, APS has supported more than 400 annual protective placement reviews.
- *Veterans* – the Milwaukee County Veterans' Service Office (MCVSO) serviced more than 3,500 Veterans, dependents, and survivors who came to the office seeking assistance for various services such as disability compensation claims, pension applications, burial claims and assistance, educational claims, WDVA state aid grants, eviction assistance services, energy assistance, and a host of other services. In 2022, the Office partnered with the Marquette volunteer legal clinic provided pro-bono legal service to over 100 veterans and family members.

Transitions Leading to Placement of Services Closer to Need

- A major transition within Behavioral Health Services came to fruition in 2022; with it, a number of services moved from Wauwatosa to geography that is closer to residents that utilize the County's Behavioral Health programs:
 - In 2022, Behavioral Health Services reached a significant milestone in the redesign of the behavioral health system with the closure of the Mental Health Complex after more than 40 years, along with the transformation of bringing services into neighborhoods.
 - The change involved the opening of the new Mental Health Emergency Center in fall of 2022. MHEC is a joint venture partnership between the County and the four major health systems (Advocate Aurora, Ascension, Froedtert, Children's Hospital of Wisconsin); the new program is located behind the Marcia P. Coggs building and replaces BHS's long-running psychiatric emergency room (PCS) that had resided in Wauwatosa.
 - Other community-based services where residents can get connected moved from Wauwatosa to locations like the of Federally Qualified Health Centers. In November, Behavioral Health Services (BHS) Access Clinic North opened, marking the opening of a third Access Clinic in two short years. Access Clinics are in communities where the need is great.
 - Another service transition presented an opportunity to make behavioral health services more accessible for youth and young adults (5-23). This year, BHS opened the Milwaukee County Mental Health Clinic in Shafi Plaza, 1919 W. North Ave., Milwaukee 53205. This new central location, in the 53205-zip code, is in an area with the greatest unmet needs and

- has a significant prevalence to where many families, who are enrolled in programming, reside.
- In the Children, Youth and Families Services, plans are moving forward to develop a Secure Residential Care Center for Children and Youth (SRCCCY), to ensure youth in the youth justice system remain close to home and in the department's care.

System of Care Implementation

- DHHS has continued implementation of its Systems of Care, centering processes to improve access for children and families and for adults.
- The department's programs targeting youths have continued to improve access by operating an integrated phone line and intake process, and by pursuing other process improvement projects; one outcome of the work has been an increase in dual-enrollees across disabilities and mental health:
 - Children's Long Term Support (CLTS) and Comprehensive Community Services (CCS) dual enrollment has increased throughout 2022 due to intentional efforts across DHHS, now serving over 100 youths.
- Within areas serving adults, a number of changes launched in 2022 within the Aging and Disabilities Services (ADS), as well as new cross-departmental partnerships taking shape:
 - On January 1, the Aging Resource Center and the Disability Resource Center integrated into one Aging & Disability Resource Center (ADRC). This process was years in the making and came to fruition with the hard work and dedication of the Aging and Disabilities staff. With the integration and implementation of No Wrong Door, ADS is now serving clients as one service area from 18 years old to end of life.
 - The Housing Services area has partnered with Aging and Disabilities, Youth Behavioral Health and others to place Housing navigators in these areas to ensure housing access for participants.

Challenges to Delivering Access

- While DHHS has taken strides in decreasing barriers to access, bringing services closer to need, and improving internal processes, challenges related to workforce create headwinds to these efforts.
- Like many organizations, and health care and human services organizations in particular, DHHS has experienced challenges with recruiting into entry level positions; the department carries a higher vacancy rate in Human Service Worker and Crisis Clinician positions; the department is exploring opportunities to modify job descriptions, service models, retention and recruitment practices to ameliorate this challenge.

- Similar to DHHS, the department's contracted providers are having challenges recruiting staff; this is particularly challenged by DHHS's limited ability to increase contracted providers' rates to keep up with the high level of inflation. DHHS is advocating for improved reimbursement for services in the next State budget.

GOAL 3: Population Health and System Change

2022 Goal: Increase funding and investment in prevention, increase partnership within human services systems to address health outcomes, prevention, structural racism, and make investments in parts of community where vulnerable residents reside.

Summary: DHHS is delivering on system-changing transformations across Behavioral Health and Youth Justice that have been years and decades in the making, has invested millions in prevention and health promotion, and has done so by partnering effectively across key service systems. Future risks include funding sustainability for ARPA-funded projects.

Details:

System-Changing Transformations Coming to Fruition

A number of transformative changes that have been planned for 5 to 20 years have been in the process of coming to fruition in 2022; among those are the Behavioral Health transformation and tangible progress toward a new youth justice program; both of these have come together through a high level of partnership with systems and the community.

- *Behavioral Health System Transformation* – In 2022, Behavioral Health Services reached a significant milestone in the redesign of the behavioral health system with the closure of the Mental Health Complex after more than 40 years, along with the transformation of bringing services into neighborhoods.
 - The transformation moved inpatient services to a partner hospital, Granite Hills, in West Allis, while moving other clinical services to be closer to those in need, co-located with community resources.
 - It moved psychiatric emergency services to the space behind the Marcia P. Coggs building through the opening of the new Mental Health Emergency Center in fall 2022; the MHEC is a joint venture partnership between the County and the four major health systems (Advocate Aurora, Ascension, Froedtert, Children's Hospital of Wisconsin).
 - The change allows BHS leaders to focus on its community-based services that have been expanding for the last several decades.

- *Progress on Local Youth Justice Program* – In the works for more than 5 years, plans are now in motion to develop a Secure Residential Care Center for Children and Youth (SRCCCY), to ensure youth in the youth justice system remain close to home and in the department’s care.
 - By developing a SRCCCY in Milwaukee County, young people will be closer to home and in the care of DHHS’s Children, Youth, and Family Services (CYFS) rather than being sent to state-run Lincoln Hills and Copper Lake facilities that are hours away from the youths’ supports.
 - The SRCCCY will build a system of care that expands the current detention center, smartly addressing current reality, and allowing CYFS to have oversight of interventions and care. An additional benefit is proximity to community partners supporting youths.
 - These plans have been developed in partnership with justice system stakeholders, community and advisory group members.

Increased Prevention Programming, Including with ARPA Funds

DHHS has made significant investments in prevention programs in 2022, many using American Rescue Act (ARPA) funds and several through moving other funds upstream.

- *Credible Messengers* – Within its youth justice work, DHHS has invested in the development of the Credible Messenger Program. The program is a key strategy that provides mentorship and helps young people establish meaningful relationships with adults that can help guide them in making better choices. Credible Messenger is designed to align with evidence that supports pathways to desistance. Key activities allow for identity development, social development, and allow participants to identify strengths to want to desist from crime. The Program served 105 youths so far and will be extended in 2023 using ARPA funds.
- *Youth Stabilization* – Children’s Community Mental Health Services and Wraparound Milwaukee has opened a new Girls Youth Crisis Stabilization Facility (YCSF), “Masana,” in partnership with Lad Lake Inc. This facility is a four-bed unit offering support to female youth ages 13 to 17 years who are experiencing a mental health crisis by providing short-term crisis stabilization and treatment services. The use of this service prevents unnecessary hospitalization and utilization of higher intensity services or more restrictive settings.

The department is administering almost 20 projects funded by the County’s American Rescue Act (ARPA) allocation; almost all of the projects involve prevention or social determinant of health supports, rather than crisis or treatment:

- *Housing Projects Related to Eviction Prevention:*
 - Milwaukee County has distributed \$65.4 million in ERA2 funds since

June 2020 through a partnership with Community Advocates. To date, the program has prevented evictions for 12,000 unique households.

- Eviction Free MKE launched in September 2021. The program provides free extended legal representation for every Milwaukee County household under 200% of the poverty guideline. It served 3,044 households as of September 2022. It represented about 1 in every 4 eviction cases filed in Milwaukee County. Prior to the launch of Eviction Free MKE, less than 3% of tenants had legal representation in their eviction filing.
- *Affordable Housing Investment*
 - Housing Services continues to advance racial equity by winning a \$7.5 million competitive state Neighborhood Investment Fund Grant that will help build up to 120 brand-new single-family homes in the neighborhood surrounding the Coggs building focused on minority home ownership and help with the revitalization of King Park.
 - With the goal of easing segregation in Milwaukee County, Housing Services also struck agreements to invest significant funds in quality, affordable multifamily rental homes in Milwaukee County suburban communities.
 - These investments are in alignment with collective impact efforts that include the Community Development Alliance, housing Continuum of Care partners, and philanthropic partners.

Primary Prevention / Health Promotion

Through a variety of funding sources, DHHS and the County Executive have invested in several high-visibility health promotion efforts related to health:

- *Community Health and Healing* – County Executive David Crowley and DHHS partnered with departments across the county in a series of five events in the spring and summer of 2022, the “Community Health & Healing Series,” to normalize conversations around mental wellness, bring awareness to available resources, and eliminate barriers to services. The result was strong community engagement and connecting residents to resources in neighborhoods deeply affected by the pandemic and increased violence. A media campaign drove awareness of the events and increased awareness of issues facing the community.
- *Better Ways to Cope* – Milwaukee County Behavioral Health Services executed a yearlong awareness campaign to address substance use disorder called “Better Ways To Cope.” This multi-faceted campaign drove awareness around County-supported resources and community partners for substance abuse treatment and prevention. The campaign was anchored by a website, betterwaystocope.org, with comprehensive information about how people can get connected to resources. Messages were featured on radio, transit,

billboards, and social media. Compelling radio and video spots were created through an ongoing “Mental Health Minute” feature with behavioral health professionals.

- *Grab & Go Events* – Children’s Community Mental Health Services and Wraparound Milwaukee continue to offer the ever-growing and popular Grab & Go events in partnership with Owen’s Place, a drop-in resource center operated in conjunction with St. Charles Youth & Family Services. Grab & Go events were hosted the last Wednesday of each month from March through October 2022 to support over 700 people in our community.
- *Aging and Disabilities Events* – The Aging and Disabilities Resource Center has been increasing education and outreach to the Milwaukee County community and have reached more than 33,000 individuals with information about Aging and Disabilities Services —a 42% increase over last year.

Concerns About Sustainability of Prevention Programs

- Given that a large portion of prevention programs DHHS developed in 2022 have been funded by one-time ARPA funds, there are concerns about the department’s ability to sustain programs beyond 2024-26. Plans are in place to measure outcomes of these programs, communicate about their successes, and identify potential funding sources – from State funding to reimbursement to philanthropy.

GOAL 4: Infrastructure Supports

2022 Goal: Secure and invest resources to grow DHHS capabilities in monitoring and evaluation, community involvement, technology, fund development, training, and staff supports; execute organizational development efforts to continue to align organization with vision for the future.

Summary: DHHS successfully secured funding for measurement and evaluation function expansion, technology implementation, workforce development, and support of dozens of ARPA projects. It has successfully integrated training functions and executed several organizational development projects with program areas. Continued emphasis will be required on fund development and further staff support through change.

Details:

Investments in Measurement and Evaluation, Technology, Community Involvement

- *Measurement and Evaluation* – the measurement and evaluation function are critical in ensuring that DHHS is tracking its progress toward its goals,

evaluating and improving quality of its programs, and making the case for investment in programs that improve health outcomes. In late 2021, DHHS filled a newly-created Enterprise Quality Director position whose role is to uplift and align Quality work across the department. The Director has rolled out new concepts and practices and is building out the team to align the function to support DHHS's goals.

- *Technology and Informatics* – in 2022, DHHS has consolidated its work in technology and informatics and has aligned on and funded a path to consolidating its case management systems around one platform; these changes will support the department's "No Wrong Door" operating goals and will improve quality and accessibility of the data available for decision makers.
- *Community Involvement* – DHHS has continued to advance community outreach in 2022, while piloting new methods of community input into decision-making:
 - Aging and Disabilities Services participated in more than 400 outreach events this year, connecting with 40,000 people.
 - Re-granting processes – DHHS has piloted a variety of re-granting processes that invite community voice into decision-making. The *Better Ways to Cope* campaign related to substance use is one such example. The program features a targeted allocation of financial resources to local partner agencies providing services in substance use. These sub-grants greatly expand the reach of the campaign and focus on community-based processes, providing ongoing networking activities and technical assistance, investing in alternative activities, and education and information dissemination.

Support of ARPA Projects and Building Fund Development Capability

- Starting in 2021 and into 2022, the County implemented a process for collecting and selecting projects that would be funded with one-time American Rescue Act (ARPA) funds. DHHS is in the process of administering nearly 20 ARPA funded projects, many of which were proposed by the staff and several by community organizations.
- In order to design, contract, launch and administer this many new programs, DHHS has developed new processes and hired administrative staff related to fiscal, contracts, quality, and project management to ensure success.
- The goal is to build on skills developed with ARPA for the purposes of future fund development and grant management. DHHS's ambition is to grow the number of grants the department receives, with an eye toward prevention, innovation, and technical assistance. Continued investment will be required to pursue such funding in the future.

Organizational and Workforce Development

- DHHS has continued to invest in its workforce through a variety of methods, including cohorts of individual coaching, group coaching for new teams, change management capability development, as well as a focus on staff supports.
 - The department has begun to consolidate its training organization that has resided in different Service Areas in order to build out capabilities and supports, as well as growing its internship / fellowship programs.
 - As the Department continues to move toward its stated goals, a number of programs have gone through organizational development efforts to ensure alignment of their processes and organizational charts with DHHS's future, while creating new opportunities and career paths for staff.
 - As DHHS looks ahead, there will continue to be a great need for staff supports, given the amount of change and the amount of new work the Department is undertaking; challenges are heightened also with community-wide staff shortages that increase staff workloads. The Department is exploring opportunities to ameliorate these challenges.
3. What factors *enabled* progress toward accomplishing these goals?
- *Consistent vision and advocacy for Racial Equity and health* – County leadership has remained consistent in its goals of health outcomes and focus on Racial Equity, which has allowed for long-term planning and implementation. Furthermore, the County Executive's consistent and powerful public messaging on Racial Equity supports DHHS in advocating on the topic internally and with its partners.
 - *Mission-aligned and passionate staff* – DHHS leaders are humbled by the passion of their staff for serving the most vulnerable residents in the County, and for their alignment to the mission and vision of racial equity and health. This alignment aids in generating new ideas and in making changes that are aligned with the department's mission and vision.
 - *Partnerships with human services agencies and system partners* – though DHHS is a major provider of services and funding in the Milwaukee County human services system, leaders know that moving the needle on health will require partnership; the department has developed strong partnerships with the City, the State, health care, system partners, as well as its contracted providers. These partnerships are critical to the department's goals of improving participant health and the overall health of the community.
 - *One-time funds for prevention and innovation* – as mentioned throughout the document, the opportunity for DHHS to apply for one-time ARPA funds has allowed the department to invest in prevention, to pilot new ideas that may bear fruit in the future, and to build infrastructure.
4. What factors *hindered* progress toward accomplishing these goals?
- *Staff shortages and changes in work force* – like many employers, particularly in the health care and human services fields, DHHS and its contracted agencies have

been challenged to staff its programs fully; this has hindered the department's ability to be responsive and to launch new programs; it has also increased workloads for staff, leading to potential of burnout; leaders continue to develop recruiting strategies and consider how to support staff in this time.

- *Community health since COVID* – there is a recognition that many markers of community health, and public safety, mental health, education in particular, have declined since the beginning of the pandemic; these effects create considerable barriers to health of participants and the community as a whole.
 - *Funding and sustainability concerns* – while one-time ARPA funds created incredible opportunity for programs and innovation, there are concerns about sustainability of these programs beyond 2024-26, particularly in the context of shrinking County tax levy; DHHS continued to measure, community, and advocate for funding for promising programs.
 - *Funding rates and inflation* – Given that inflation in 2022 has been significantly higher than that of the previous decade, a number of DHHS programs suffer from lagging funding levels; this has been particularly challenging for DHHS's contracted providers for whom DHHS has limited funds to raise rates; several provider network partners have expressed strain in attempting to sustain their work and several have either failed or walked away from programs.
5. Aside from financial resources, what help does your department/office need in identifying and achieving your strategic goals?
- Partnership with the CEX office on population health advocacy – DHHS will be looking for the County Executive to continue to advocate for health equity, to align departments around health goals, and to build executive-level partnerships with key institutions that affect community health.
 - Partnership with the County on gathering Technical Assistance to build up infrastructure supports, in particular in areas of Racial Equity, Technology, Data Science, Community Involvement.
 - Advocacy to overcome administrative barriers to equitable policies and practices that sometimes present themselves either in ordinance or in long-standing practices.
6. What is the status of your department/office in developing its strategic plan?
- In November 2021, DHHS shared its bold vision for the 2025 Future State in the [2020-2025 DHHS Strategic Plan: Creating Healthy Communities.](#)
 - Given the Department is half-way through Plan implementation, the team is conducting an in-depth assessment of progress this year to inform future implementation

FISCAL EFFECT

The report is informational only and there is no fiscal impact.

VIRTUAL MEETING INVITES

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PREPARED BY:

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APPROVED BY:

Shakita LaGrant-McClain

Shakita LaGrant-McClain, Director, Department of Health and Human Services

ATTACHMENTS:

Power Point Presentation

DHHS 2022 Annual Plan document: [website link](#)

DHHS Strategic Plan document: [website link](#)

cc: County Executive David Crowley
Sup. Shawn Rolland, Chair, Health Equity, Human Needs & Strategic Planning Committee
Mary Jo Meyers, Chief of Staff, County Executive's Office
Kelly Bablitch, Chief of Staff, Milwaukee County Board of Supervisors
Janelle M. Jensen, Legislative Services Division Manager, Office of the County
Steve Cady, Research Director, Comptroller's Office
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