# COUNTY OF MILWAUKEE Inter-office Memorandum

DATE:	December 27, 2019
то:	Theodore Lipscomb, Sr., Chairman, Milwaukee County Board of Supervisors
FROM:	Mary Jo Meyers, Director, Department of Health and Human Services Prepared by David Muhammad, Deputy Director, DHHS
SUBJECT:	A report from the Director, Department of Health and Human Services, providing a plan for capital project WS12601 – DHHS Relocation and requesting release of capital funding from contingency

### **Background**

The 2020 DHHS Adopted Capital Budget includes \$660,000 for planning and design for capital project WS12601 – DHHS Relocation. These funds are currently held in an allocated contingency account. To access the funding, the 2020 Budget directs DHHS to provide a written plan to the County Board detailing the scope and redeployment of staff to a new location. Per the 2020 Budget, the funds may be released upon approval by the County Board after the report is reviewed.

#### **Discussion**

Over the last several months, DHHS leadership and the Department of Administrative Services -Facilities Management Division have been meeting to establish a plan to relocate employees from the Marcia P. Coggs Human Services Center, Vel Phillips Youth and Family Justice Center, and the Behavioral Health Division (BHD) Mental Health Complex. DHHS is actively pursuing this relocation for several reasons:

- 1) Integration of employees from different locations is critical to the implementation of the "No Wrong Door" approach for enhanced customer service.
- Closure of BHD's inpatient hospital and eventual sale of the Behavioral Health Mental Health Complex require the establishment of a new office location for remaining employees.
- The lack of accessibility and ADA compliance of the Coggs Center impede access for both participants with disabilities seeking services from DHHS as well as employees with disabilities.

#### DHHS's Future State

As part of our overall strategic planning process, DHHS sought input on the top issues affecting Milwaukee County residents from key stakeholders, sector leaders, and secondary research. The information and data gathered were also incorporated into the planning efforts around a new building. Racism, Poverty, Economic Opportunity, Housing Instability, Public Safety, Substance Abuse, and Mental Health were all identified as critical issues that DHHS could systemically impact. As we undergo significant transformation of our service delivery model, our facilities footprint is on course to change dramatically within the next two years. Factors such as the closure of the Behavioral Health Mental Health Complex and the County's Youth Justice reform efforts placed a level of urgency to act regarding facilities and the DHHS Future State.

To be more participant-focused, DHHS plans to organize itself across two systems of care that will work across the life span: one for children and their families and one for adults that focuses primarily on income and economic stability to promote health and well-being, linked by cross-cutting services including housing, behavioral health and disability services. To this end, we feel it is imperative that the workforce be housed together. Research supports that the co-location of employees not only improves their overall job satisfaction but also improves the outputs which ultimately means better results for those we serve.

In order to affect best outcomes for Milwaukee County's residents, DHHS is looking to pursue two broad organizational strategies:

- **Strategy #1:** Participant-Focused Strategy ensures the participant is at the center, with one warm front door, an integrated Department that addresses root causes and brings to the table the right thing, at the right place, at the right time and in the right way;
- **Strategy #2:** Population Health Strategy recognizes DHHS's potential role in moving systems towards becoming the healthiest county, and involves convening stakeholders to make changes to systems it operates in including systems that address social determinants

With the integration of Children and Family System of Care at the core of our facilities planning project, intake and assessment become a central point to ensure there is no wrong door. This means internal coordination between divisions at the "front door" through a DHHS intake and enrollment team, system navigators and peer supports, and our Crisis Response Teams. This type of assessment is already taking place with our Mobile Crisis Teams in BHD and Housing Division and would be an integral part of a new administrative location.

# Integration of Human Service Functions & Facility Needs

Community Access to Recovery Services (CARS) and Wraparound have the greatest reach into the community and the largest provider networks. Many staff utilize office and conference space

in our main BHD offices and are often housed within our partner agency locations. Ideally, a new space would serve as an enterprise-wide base of operations and place us near many of our contracted providers. In addition, DHHS is working towards a restructured Contract Administration; one where the focus is beyond compliance, promotes community engagement and outreach to improve the equity of contract distribution, and provides agencies the needed technical assistance to remain viable. Quality Assurance staff would be in proximity to the Director's Administration and operate alongside Contracts and Provider Relations.

The planning for a new location is being driven by our overall approach to an improved future state. We believe that DHHS is the central component of Milwaukee's social service fabric. As such, we intend to leverage our position as convener and thought partner with the public and private sector. As we integrate and expand our community-based footprint, our facility needs require us to locate geographically close to our community network of resource and providers as well as intergovernmental partners.

#### Limitations of Marcia P. Coggs Human Services Center

The lack of accessibility at the Coggs Center has been a long-standing concern. While geographically ideal based upon participant and contractor demographics, the building's layout and design cause difficulty for persons with disabilities and the elderly who may have to stand for long periods in lines or use the elevators for service.

In an April 2019 report prepared by Quorum Architects, Inc., DSD leadership stated, "We are in need of ample secured parking with pass required, appropriate lighting, security monitoring, ample disabled parking for internal staff and disabled visitors, vast visitor parking, assigned parking, close for public and/or disabled persons access to the building, specifically an ADA environment for program participants and the general public with disabilities would be most appropriate for our clientele." This is highlighted for disabled persons who use wheel chairs, "We need large working elevators to transport disabled patrons or only one level for participants assistance for the population we serve," stated one supervisor.

Currently, the Coggs building relies on the service elevator ramp for wheelchair-bound persons and this is the elevator used during fire emergencies as well.

#### Enhanced Community Presence

Though details are still being framed out, BHD's Mobile Crisis and Clinic Programs will likely be embedded in the community and are not part of the overall scope for the new building for the time being. DHHS Leadership is mapping variations in division service-delivery to ensure silos are removed and customer experience is improved. The goal is to have a single front door. However, a key observation from the mapping process is that the "access" step needs to be flexible to accommodate the various ways a person may be connected to DHHS care. One of our guiding principles will be that individuals and families are able to obtain a full range of care through a variety of community-based points of service. The "access" step (i.e. referral, intake, etc.) must also be flexible to accommodate variations in customer needs (severity, number of needs, etc.) to provide individualized care in a way that will lead to the best outcomes.

# DHHS Workforce Today

Milwaukee County consists of approximately 4,140 employees and DHHS employees account for about 21 percent of the county's workforce (total 882 active employees as of December 2019). This includes employees in Administration, Disabilities Services, Youth and Family Services, Housing, Department on Aging and the Behavioral Health Division including Wraparound.

As DHHS continues its progress toward identifying a new location for its employees, the demographics of its workforce is an important facet of this planning effort. The profile of our workforce will be used to guide decision making around location and characteristics of a new location. Currently, the data snapshot below reflects demographics of DHHS and BHD employees only. The demographics for Aging employees will also be added in the near future.

# 1) <u>Gender:</u>

a) 72% are female; 28% are male

# 2) <u>Race:</u>

- a) About 42% of DHHS staff are African American; 46% are White, 6% are Latino, 3% are Asian, and the remainder are less than 1%
  - i) Staff in a managerial position are 77% White, 14% African American, 5% Asian, and 5% unknown
  - ii) Staff in leadership/administrative positions are 67% White, 22% African American, 11% Latino
- b) A larger percentage of African Americans are staff within DHHS than the percentage overall in Milwaukee County. Likewise, a larger percentage of Latino are staff within DHHS than the percentage in Milwaukee County. This is more comparable to the DHHS participant demographics than the overall county (Future State Initiative Demographics Report, July 2019).

# 3) <u>Age:</u>

- a) 63% of employees are 40 years old and older; 37% are 39 years old and younger
- b) Over half (52%) of employees are between the ages of 40 to 60 years old
- c) Four staff are 70 or older

### 4) Location of Employees:

- a) 84% of employees reside within Milwaukee County; 15% reside outside of the county, but within the State of Wisconsin; less than 1% reside in another state (5 staff reside in Illinois).
- b) DHHS employees reside in 10 counties in Wisconsin.
- c) Employees that reside in Wisconsin, span across 57 cities and 86 zip codes.
  - i) Top five cities where staff reside: 1. Milwaukee = 57% 2. Wauwatosa = 7%
    3. = West Allis = 3% 4. Greenfield = 3% 5. Brown Deer = 2%
  - ii) Top five zip codes where staff reside are: 1. 53218 = 7% 2. 53216 = 6% 3. 53209 = 6% 4. 53223 = 5% 5. 53225 = 4%

### Profile of a New Space

Through ongoing planning efforts over the last several months with the Facilities Management Division of DAS, DHHS has established the following parameters around a new space.

- 400-450 Total Employees, including:
  - Director's Office
  - BHD Administration
  - Support Services<sup>1</sup>
  - Disabilities Services
  - Youth & Family Services (community services only)
  - Department on Aging
  - BHD Community Access to Recovery Services
  - Wraparound
  - Housing
- Location City of Milwaukee
- Size approximately 65,000 square feet
- High priority for both building accessibility & ADA compliance as well as accessibility through an enhanced community presence

1This category includes DHHS & BHD Fiscal, Contract Administration, Energy, Quality Assurance, Psychiatry/Psychology Administration.

To further emphasize the "No wrong door" customer service approach, DHHS staff has included relocating the Housing Division. DHHS Housing Division is currently in its seventh year of a 10-year lease for office space located at 600 W. Walnut St. in Milwaukee. Currently, the timing of

the completion of this lease and schedule for the relocation are not compatible and will need to be assessed as the project moves forward.

Facility scenario planning with DHHS, DAS-Facilities Management and Economic Developmentstaff resulted in three potential scenarios as summarized below:

- Scenario 1: lease approximately 65,000 square feet of space in one facility to house DHHS youth and adult services, relocate Housing Division to Coggs
- Scenario 2: lease approximately 65,000 square feet of space in one facility to house DHHS youth and adult services, relocate Housing Division to different leased space
- Scenario 3: lease approximately 14,000 square feet of space in one facility to house DHHS youth services administration, and approximately 51,000 square feet of space in a separate nearby facility to house adult services administration, and relocate Housing Division to different leased space

		Scenario 1		Scenario 2		Scenario 3	
		Estimated	Estimated	Estimated	Estimated	Estimated	Estimated
Phase	Groups	Sq Ft	Cost	Sq Ft	Cost	Sq Ft	Cost
Phase 1	DSD Youth	14,000	\$1,803,248	14,000	\$1,803,248	14,000	\$1,690,072
	Wrap admin						
	DYFS						
Phase 2A	Contracts/Provider	- 51,000	\$5,593,679	51,000	\$5,593,679	51,000	\$5,793,856
	Network						
	QA/QI						
	Fiscal						
	Mobile Crisis Team						
	Director's Office						
	Disability Resource						
	Center						
Phase 2B	BHD Admin, CARS						
	DSD Adult						
	Dept. on Aging						
	staff						
Housing	Housing staff	6,484	\$820,309	6,000	\$715,521	6,000	\$767,978
	Totals	71,484	\$8,217,236	71,000	\$8,112,448	71,000	\$8,251,906

# Timeline

Depending on availability of funding and tenant improvement requirements, employee relocations may be completed in phases as shown above. All employees are anticipated to be relocated by the end of 2021. The high level schedule below provides an estimated timeframe for key benchmarks and is subject to change.

Task	Estimated Completion		
Site search	July 2020		
Design of tenant improvements	November 2020		
Build-out of tenant	July 2021		
improvements			
Relocation of staff	End of 2021		

#### Next Steps

Pending approval of the release of capital funding from the allocated contingency account, the next steps anticipated in the facility planning efforts consist of a) retaining a design consultant to initiate planning, programming and conceptual design of the proposed new location and b) retaining a real estate consultant to assist with identifying available relocation sites and negotiating lease terms that meet the design requirements. DAS-Economic Development staff will manage the work of the real estate consultant, and DAS-FMD Facilities Planning and Development staff will manage the work of the design consultant.

#### **Recommendation**

It is recommended that the Milwaukee County Board of Supervisors authorize the Office of the Comptroller and the Department of Administrative Services Performance, Strategy and Budget to establish an appropriation transfer to release \$660,000 in funding from the allocated contingency for capital project WS12601 – DHHS Relocation to fund additional planning, design and real estate services to support the relocation of DHHS and Department on Aging staff.

#### **Fiscal Effect**

An appropriation of \$660,000 is budgeted in the 2020 Adopted Capital Budget to begin planning and design for new leased location(s). There is no additional tax levy impact associated with this request. Costs for the build out of leased space(s) as well as the ongoing operating impact of lease costs will be determined during the planning phase. A fiscal note form is attached.

Mary Jo Meyers, Director

cc: County Executive Chris Abele Raisa Koltun, County Executive's Office County Supervisor James "Luigi" Schmitt County Supervisor Supreme Moore-Omokunde Teig Whaley-Smith, Director, DAS Joseph Lamers, Director – Office of Performance, Strategy & Budget Steve Cady, Research Director, Comptroller's Office Pam Matthews, Fiscal & Management Analyst, DAS Lottie Maxwell-Mitchell, Research & Policy Analyst, Comptroller's Office