

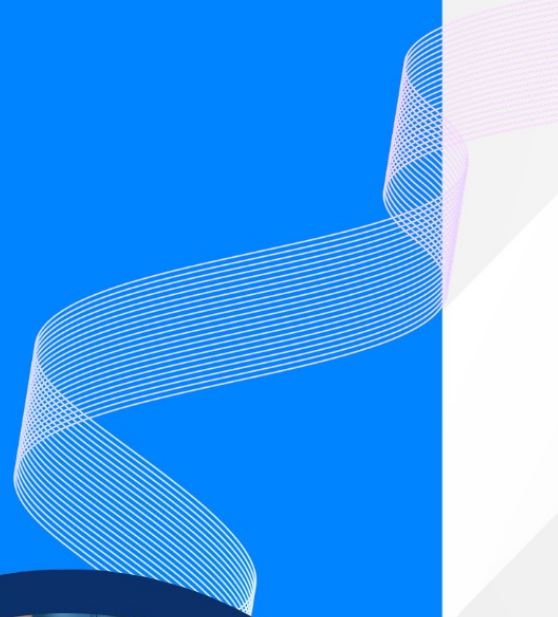


**ONEIDA COUNTY
HUMAN SERVICES**



2025 ANNUAL REPORT

Self-sufficient People living in
a safe, financially secure
environment.



Our Mission

In partnership with our community and in response to public need and legal mandates, our mission is to serve and assist Oneida County residents in ways that strengthen and preserve families, encourage personal responsibility, and foster independence. We recognize the rights of each individual. Our goal is to serve all persons with dignity, respect, and confidentiality.

Human Service Committee

Robb Jensen, Chairman

Ted Cushing
Dan Hess
Debbie Condado
Steven Schreier

Jim Winkler
Tiffany Rohan
Angie Koch
Miranda Gavrilesco

CJCC Committee

Steven Schreier, Chairman

Beth Hoerchler, Vice Chair
Josh Chiamulera
Breanna Magallones
Annette Zortman

Judge Mary Sowinski
Judge Michael Schiek
Jillian Pfeifer
Grady Hartman

Chad Lynch
Linda Conlon
Michael Tautges

ADRC Committee

Ted Cushing, Chairman

Russ Fisher, Vice Chair
Debbie Condado
Linnaea Newman
James Unger

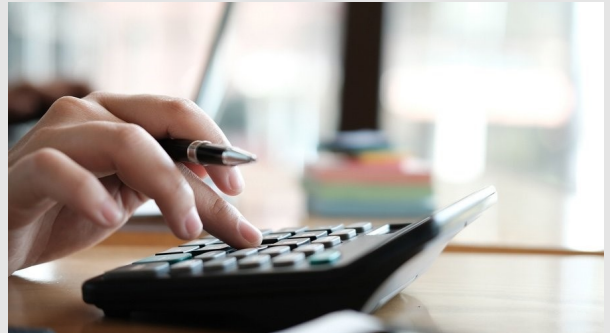
Rita Mahner
Melanie Fralick
Joan Hauer
Kathy Paul

For details regarding our programs,
please visit our updated website at
<https://humanservices.oneidacountywi.gov>
Click on the Services link.

FINANCIAL SERVICES

The Financial Services Unit provides accounting services to Human Services. In addition to responding to the needs of internal staff, the unit adapts to changing federal, state and local requirements. Areas of support include:

- Budget preparation
- Provider contract management billing
- Financial reporting to County and State
- Insurance billing
- Credentialing Providers for Service



—
2025 Budgeted Tax Levy
\$3,381,836

2025 Actual Tax Levy \$5,682,730

Deficit \$2,300,894

Human Services and ADRC experienced a deficit of \$2,300,894. The agency had significant high cost placements during the year. Out of home care costs are a large driving force to the agencies surplus or deficit.

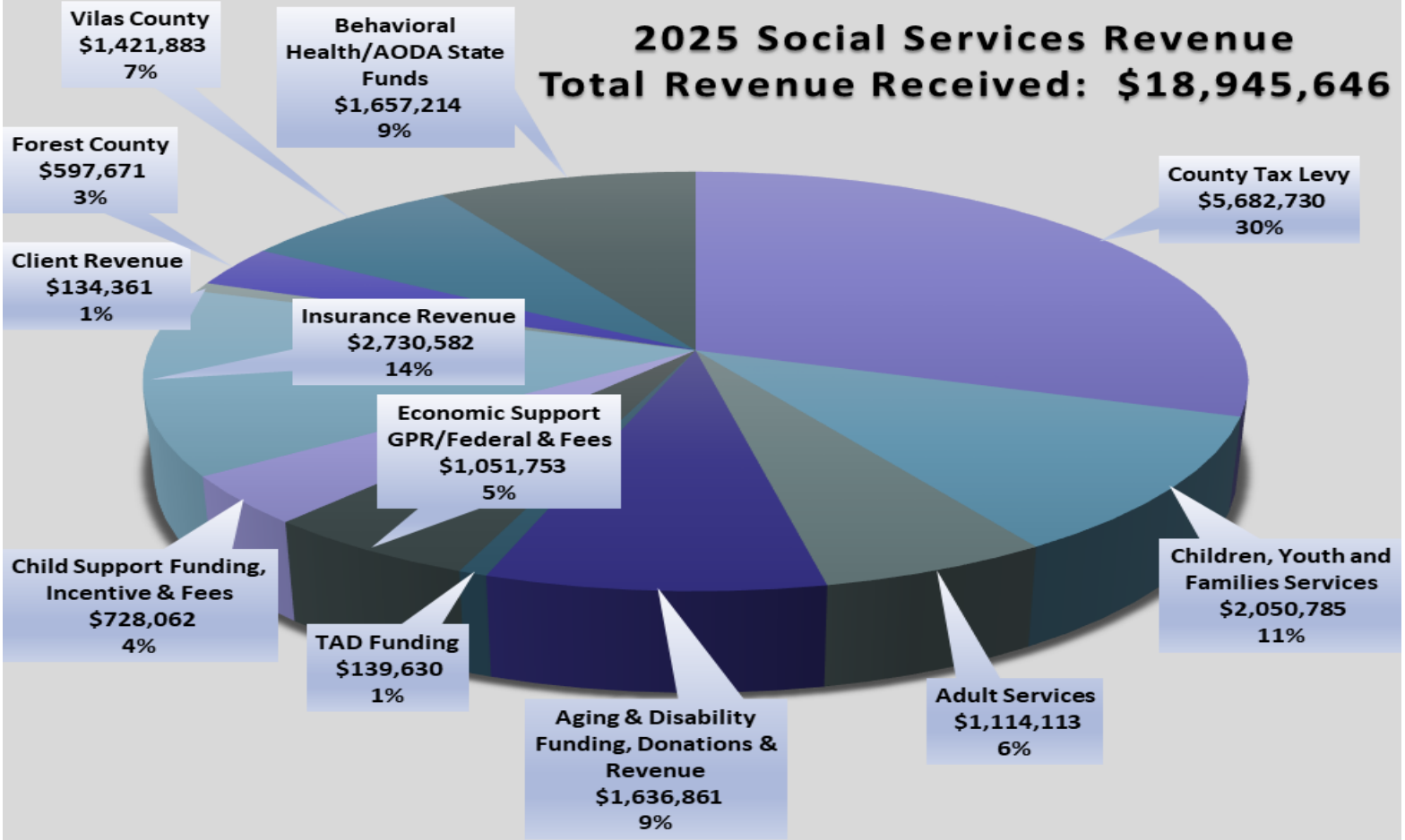
A small portion of the deficit was due to loss of insurance revenue during the transition to a Human Services Department.

In 2025, a large focus of our time was focused on the transition to a Human Service Department. This included learning new funding sources, contracting with insurance companies, credentialing providers to bill insurance and staff turnover.

Due to a record high in out of home care costs of \$3,030,827, Out of Home meetings formed. These meetings address the needs our high cost placements to ensure there are services in place when the youth returns home or to prevent youth from entering out of home care.

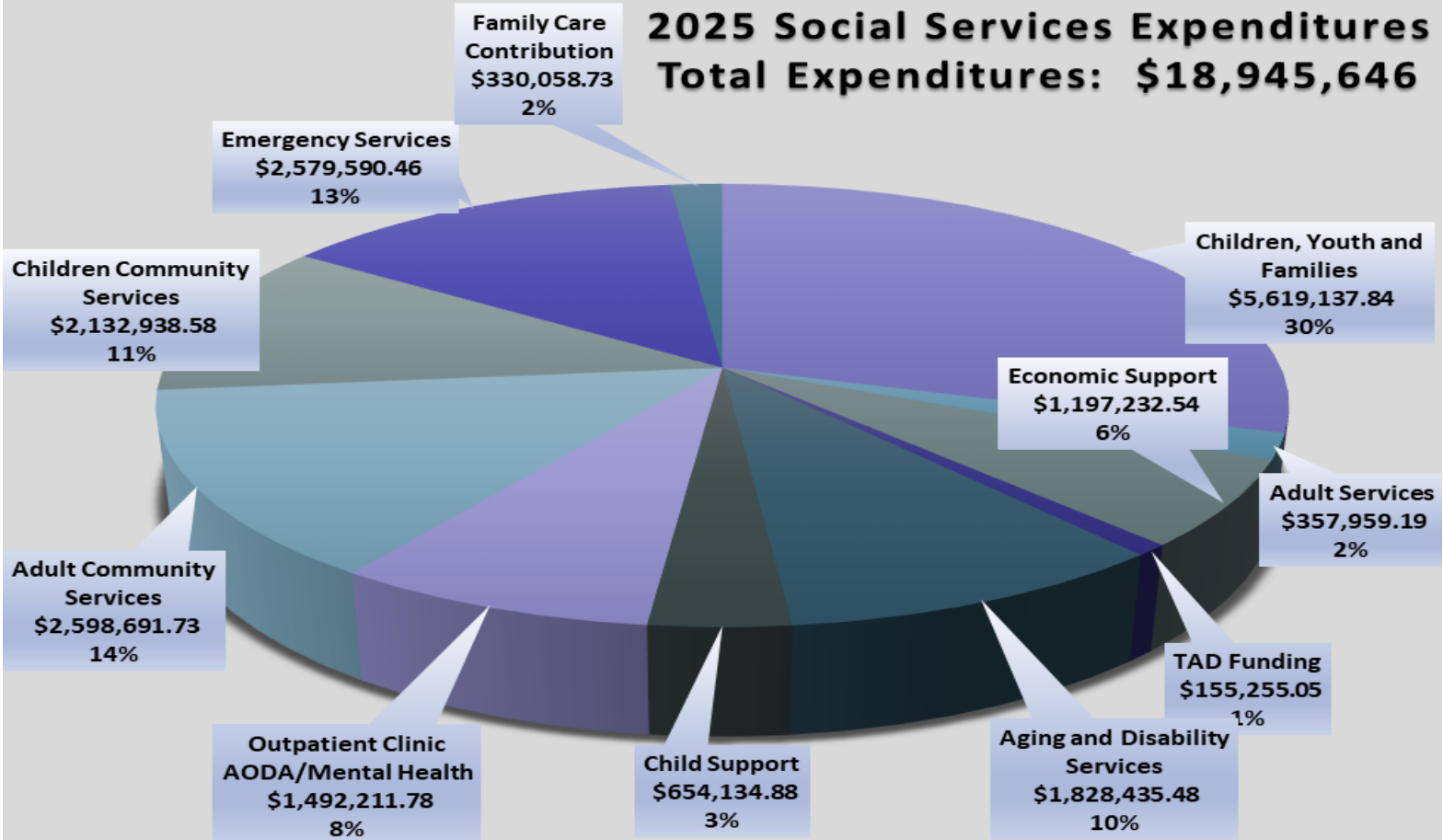
2025 Social Services Revenue

Total Revenue Received: \$18,945,646



2025 Social Services Expenditures

Total Expenditures: \$18,945,646



ADULT SERVICES



Clients Served—Adult Unit

• Supportive Home Care	8
• Elder Abuse Direct Service	9
• Elder/Adult Abuse Investigations	99
• Guardianships	13
• Protective Placements	16
• Adult Welfare Concerns	30

The ADRC/APS unit manages multiple funding sources to provide support services to members of the community. These services include respite care, supportive home care (housekeeping and chores), home delivered meals, on-site dining, access to publicly funded long term care, and long term care options counseling for any person seeking to understand what long term care will look like for them (including executing Powers of Attorney for Health Care and Finances). There are benefits specialists who assist with Social Security, Medicare, and Medicaid.

In 2025 the ADRC transitioned to a new data reporting system called PeerPlace. Unfortunately, not all data from the year was captured due to a transition period and learning curve however the ADRC was busy serving the community and expanding programs. Communication continued through the entire department to best meet the needs of those in the community. As staff learn the ways of each program within Human Services, those we serve are provided increase care and access. The staff at the ADRC continue to strive for providing ways to keep older adults in their home for as long as possible through publically funded programs and caregiver supports.



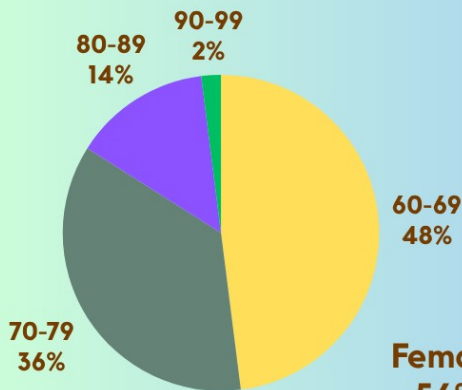
AGING & DISABILITY RESOURCE CENTER



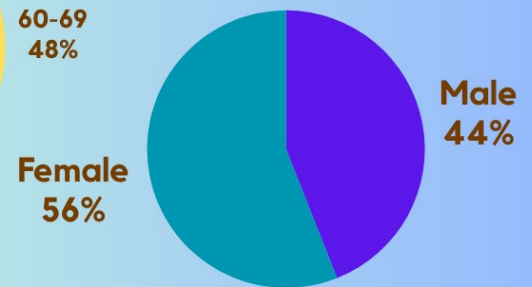
"Grow old along with me!
The best is yet to be." –
Robert Browning

Elder Benefits Specialist

0-99: Age Group
%: Percent of people served

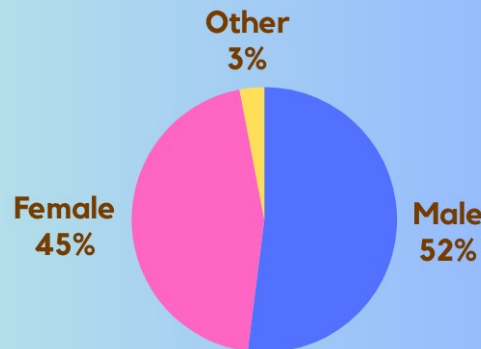
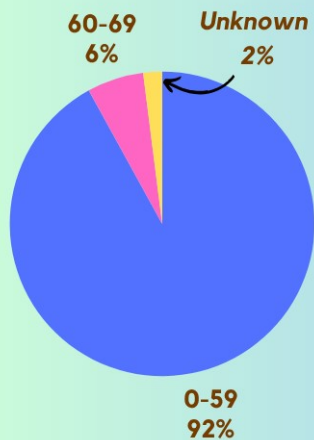


Monetary Impact: the estimated value of any benefits obtained or preserved. \$475,995



Disability Benefits Specialist

0-69: Age Group
%: Percent of people served



Monetary Impact: the estimated value of any benefits obtained or preserved. \$ 1,227,978

"My ability is stronger than my disability." —
Luke Armstrong



AGING & DISABILITY RESOURCE CENTER

Volunteer Opportunities: Over 200 volunteers make our programs possible. Volunteers help at all Dining Sites, deliver Meals on Wheels, provide transportation to appointments, assist with activities and programs. Contact our office for volunteer openings.

THANK YOU TO
OUR
WONDERFUL
VOLUNTEERS!



<i>Services to Older Adults</i>	<i>People Served</i>	<i>Units of Service</i>	
Homemaker/Chore	6	455	hours
Home Delivered Meals	359	32,201	meals
Congregate Meals	341	7,645	meals
Assisted Transportation	86	2,949.6	miles
Respite Care	26	1,210.5	hours
Home Repair	0	0	repairs
Home Safety	12	106	units
Health Promotion	94	2,052	hours
Recreation/Socialization	166	2,693	episodes
Volunteers Available (RSVP)	206	12,296	hours

CHILDREN & FAMILY SERVICES

Access - Intake

Access is the process of receiving, analyzing and documenting reports of alleged child maltreatment. The functions of Access are as follows:

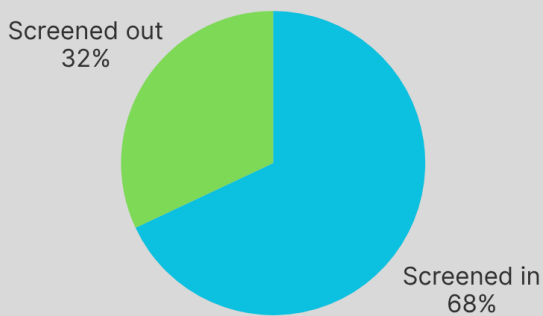
- Receive and document reports of alleged maltreatment from the community
- Identify families that the child protective services (CPS) system must respond to
- Determine the urgency of the response time
- Initiate an assessment of child safety and family strengths

Initial Assessment - Investigations

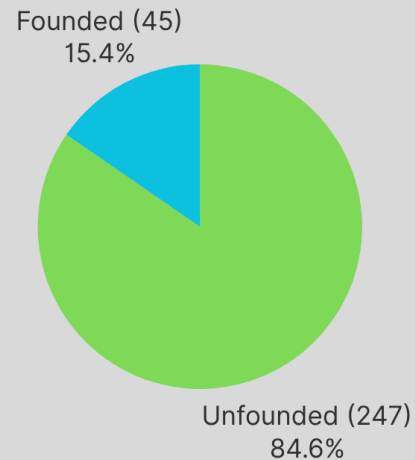
Initial assessment is the process of:

- Investigating alleged maltreatment
- Assessing the family condition to determine if the conditions and/or behaviors in the home pose a risk to a child's safety
- Determining what services may be needed to help the family enhance parental protective capacities to establish a safe environment for the child(ren)

2025 CHILDREN AND FAMILY REFERRALS



2025 INITIAL ASSESSMENTS



Clients Served Children, Juveniles and Families

- | | |
|---|-----|
| • Child Protective/Child Welfare Services | 585 |
| • Youth Justice Services | 119 |
| • Community Based Service Programs | 109 |
| • Youth Intervention Programs | 17 |
| • Out of Home Care | 74 |
| • Kinship Care | 50 |



On-going Services - Children in Need of Protection and Services (CHIPS)

Services for children and their families who come under the jurisdiction of the juvenile court because the child or unborn child is in need of protection and services which can be ordered by the court (48.13 and 48.133 Wis. State Statutes).

Services typically include:

- Assessment, diagnosis, case/treatment planning, safety planning
- Monitoring and review
- Drug Testing
- Arranging counseling and therapy services
- Arranging physical and mental health services
- Monitoring of school attendance, involvement with Individual Education Plans
- Working with families on daily living skills, including parenting, child care, and discipline techniques
- Working with families on clean safe housing, budget management
- When child safety cannot be managed in the home –out-of-home placement services
- Determining what services may be needed to help the family enhance parental protective capacities to establish a safe environment for the child(ren)
- Referrals to additional services
- Parent coaching

In-Home and/or Community Services

The Department has an array of services to offer families to maintain children safely in their homes and their communities. The following services were provided to children, youth and families in 2025:

Intensive Aftercare Program

Early Intervention Program

TSSF (Targeted Safety Support Funds)

CST (Coordinated Service Team)

Parenting Education – individual and groups

Parent Aids/Mentors

ART (Aggression Replacement Therapy)

Mentor/Tutor Program

Going Forward

Supervised Visitation

Recovery Coach

Transportation Assistance

Drug Testing

Child Care Assistance

Independent Living

BOTVIN

For details regarding these programs, please visit humanservices@oneidacountywi.gov and click on the Services link.

CHILD WELFARE

Oneida County receives Child Welfare Referrals when Child Abuse and Neglect referrals do not meet the danger threshold of abuse or neglect; however, families may still need services.

When a referral comes in, the Social Worker engages the family to see if they are in need of any services. The Agency goal is to engage these families and refer them for services before it becomes an abuse or neglect referral.

"We can't help everyone, but everyone can help someone" - Ronald Reagan



RECOVERY COACHES

The Recovery Coach Program provides voluntary, peer-based support to individuals affected by substance use and/or mental health challenges. Recovery Coaches meet individuals where they are, offering non-judgmental support focused on wellness, stability, and self-identified goals. Services are free, confidential, and available to community members involved with Human Services, the justice system, and the broader community.

As of **February**, the program transitioned fully away from AmeriCorps. All Recovery Coaches are now **county or city employees**, strengthening program continuity, professional integration, and long-term sustainability.

How the Program Works

Individuals can connect with a Recovery Coach through multiple pathways, including:

- Internal Referrals
- Self-referral by phone or in person
- Referral from agencies such as probation/parole, law enforcement, healthcare providers, and community organizations

Outreach connections facilitated through We Care Cards

When a referral comes through Human Services and substance or alcohol use is suspected or confirmed, appropriate consent and releases of information are obtained. A Recovery Coach then schedules a meet-and-greet to begin engagement.

During intake, the Recovery Coach and peer work together to complete:

- Demographic information
- Roles and expectations
- A self-directed wellness plan

A World Health Organization Quality of Life (WHOQOL) assessment

Wellness plans are person-centered and peer-driven, with no predetermined expectations or timelines. Recovery Coaches support the whole person — not just substance use — recognizing that recovery is non-linear and unique to each individual. Peers determine how often they meet with a coach and how long they wish to engage in services.

RECOVERY COACH, CONT.

We Care Cards & Community Response Team

The Recovery Coach Program remains an active partner in the **Community Response Team**, a multi-agency collaboration focused on supporting individuals experiencing substance use or mental health concerns.

Through this collaboration, **We Care Cards** continue to be distributed by law enforcement, fire departments, Human Services, and other community partners. These cards provide:

- Information about Recovery Coach services
- Local and state resources
- Crisis line information
- Overdose prevention and Narcan education

A confidential voicemail number to directly connect with a Recovery Coach

We Care Cards are distributed during community encounters, mailed to individuals with substance- or alcohol-related charges, and made available across partner agencies. This initiative continues to be an effective, low-barrier method for connecting individuals and families to support.

Expanded Partnerships & Community Engagement

Over the past year, the program has continued to expand its reach and impact:

- **Youth Services:** Partnered with **ArtStart** to provide drop-in Recovery Coach support during Teen Art Experience programming. Coaches also work with youth involved in Youth Justice and the general community.
- **Community Education & Awareness:** Hosts **monthly community events** focused on recovery awareness, stigma reduction, and creating safe, inclusive spaces for connection.

Law Enforcement Collaboration: Continues close collaboration with the **Rhinelander Police Department**, including ongoing development of **deflection training** in partnership with law enforcement and the Health Department to improve responses to substance use and mental health encounters.

Program Capacity & Leadership

The Recovery Coach Program currently consists of **three Recovery Coaches**. The program is coordinated by **Erika Kleinschmidt**, who provides leadership, oversight, collaboration with community partners, and ongoing direct support to peers.



Reflection

“Over the past year, the Recovery Coach Program has continued to grow in both capacity and community impact. Transitioning away from AmeriCorps and into county and city employment has strengthened our foundation and allowed for deeper collaboration across systems. Working alongside our community partners, law enforcement, youth programs, and most importantly the individuals we serve, has reinforced how powerful peer support can be. Supporting people to define recovery on their own terms continues to be the most meaningful part of this work, and I look forward to the continued growth and impact of this program.”

— Erika Kleinschmidt, Recovery Coach Program Coordinator



FOSTER CARE AND KINSHIP CARE

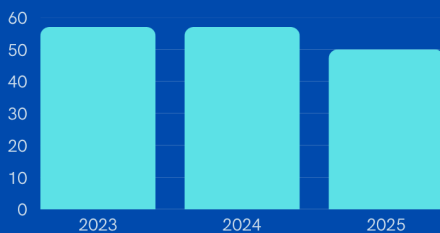
12.28%

Decrease in
children placed in Kinship
Care
from 2023 to 2025

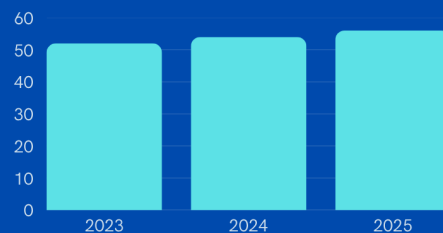
7.69%

Increase in
children placed in Foster
Care
from 2023 to 2025

CHILDREN IN KINSHIP CARE



CHILDREN IN FOSTER CARE



When a child is removed from their home and placed in out-of-home care, the preference is to place the child with a relative as this maintains the family connections and minimizes the trauma the child experiences being separated from their family. If a relative placement is not an option, the second preference is to place the child with a like-kin provider. Like-Kin is a person who has a significant emotional relationship with the child or child's family that is similar to a familial relationship. This placement option too maintains family connections for the child and reduces the trauma the child may experience when separated from their birth family. If placement with a relative or like-kin provider are not an option, the agency then looks at placing the child in a licensed non-relative foster home preferably within the same community as the child resides in order to preserve the connections the child has within the community - with their family, friends, school, etc.

YOUTH JUSTICE

Youth Justice Social Workers provide services to the court, youth, and families in cases in which the youth has committed an act that is against the law or for a behavioral issue. Our agency receives referrals from law enforcement, schools, and parents and caregivers and confers with the District Attorney's Office and/or Corporation Counsel regarding the disposition of the case. An Intake Inquiry is conducted for each case and a decision is made on how to proceed. The agency received a total of 141 youth justice referrals in 2025 with 119 delinquency, 1 JIP truancy, 21 JIP non-truancy.



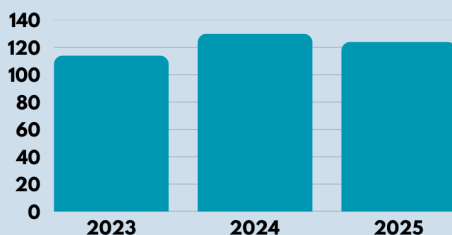
The Social Worker can recommend a number of services to the District Attorney's office to resolve the case. These include but are not limited to: payment of restitution, community service, apology letters to victims, Early Intervention Services, Parenting classes, ART (Aggression Replacement Therapy), Botvine Life Skills including Substance Abuse Prevention, Bullying Prevention Programs, Internet Safety Programs, Dating and Healthy Relationships, Truthoughts, counseling for Substance or Mental Health issues, and regular supervision appointments with the social worker to discuss progress on these recommendations.

The 2025 Youth Justice Innovation Grant allowed for Anger Replacement Therapy and Botvin Life Skills to be integrated into four local elementary schools. 119 students, were served at the Rhinelander School District.

Children and Youth in Out-of-Home

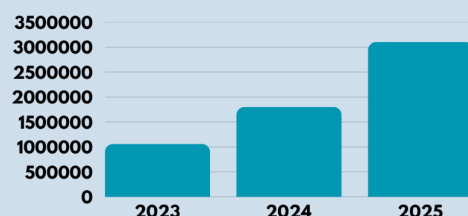
8.77% Increase in children placed from 2023-2025

YOUTH IN OUT OF HOME CARE



193% Increase in cost from 2023-2025

COST OF OUT OF HOME CARE



CRIMINAL JUSTICE COORDINATING COMMITTEE (CJCC)



The Oneida County Criminal Justice Coordinating Committee - CJCC

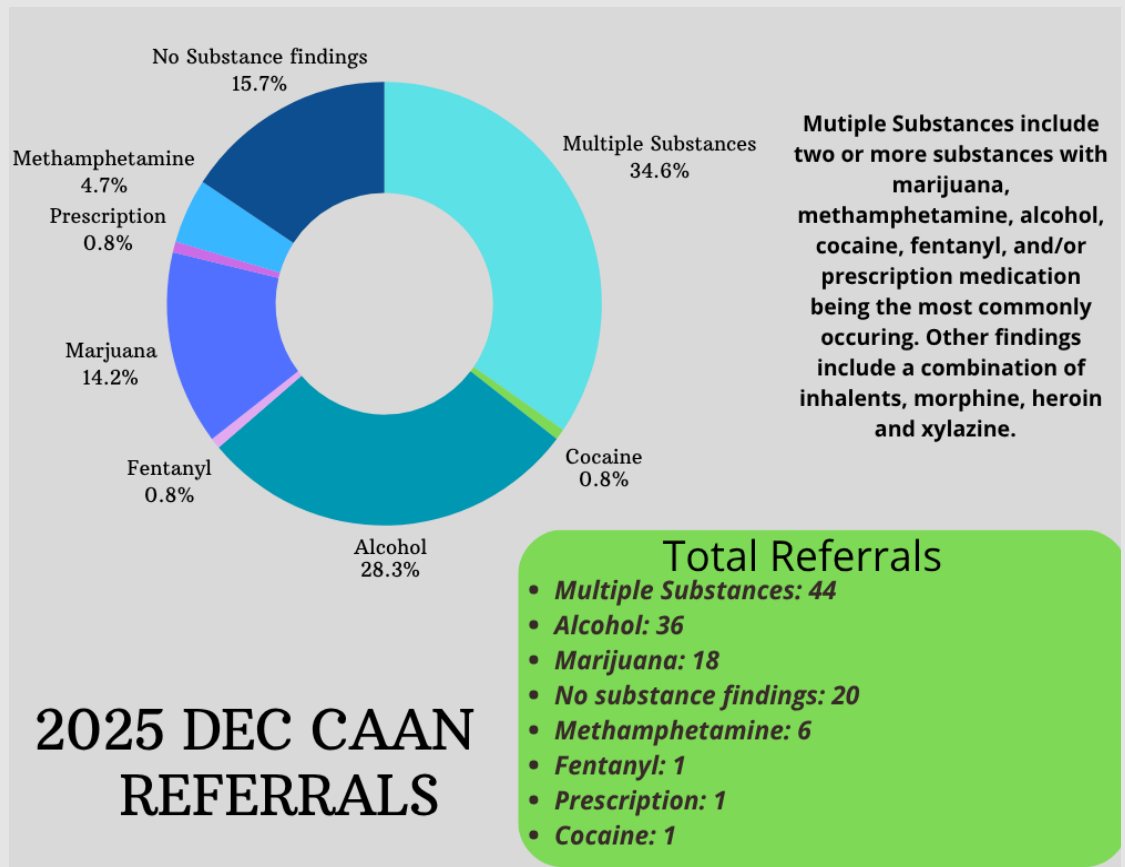
The Mission of the CJCC is to promote public safety and to provide opportunities for individuals within the criminal justice system to improve their quality of life through facilitated recovery and community integration. The Committee oversees the Treatment Alternative and Diversion (TAD) Grant. The TAD grant is used to fund our Diversion Program.

Oneida County **Diversion Program** is a voluntary program for justice-involved people living with addiction. It is a way for individuals to be deferred from the traditional criminal justice system. Program participants engage in counseling, community service and address employment, mental health, housing and chemical dependency needs. The program began taking referrals in July 2023. 15 referrals were received in 2025, 6 male and 9 females. The average age of those referred is 42.7 years old. We celebrated one successful graduation in 2025.

For more information, visit <https://cjcc.oneidacountywi.gov/>.

DRUG ENDANGERED CHILDREN (DEC)

The purpose of the DEC Team is to collaboratively intervene on behalf of children who have been exposed to drug-endangered environments and are unsafe in those environments. DEC team members will cooperate with each other so that parents/caretakers are vigorously and effectively prosecuted for child endangerment/abuse/neglect in addition to charges resulting from their illegal drug activities.



ECONOMIC SUPPORT

The Oneida County Economic Support (ES) unit is a part of the IM Central Consortium, partnering with Langlade, Marathon and Portage Counties.

The IM Central Consortium administers financial assistance programs mandated by the Federal government and State of Wisconsin. These programs include Medical Assistance, including BadgerCare Plus, Medicaid (for elderly, blind or disabled), and Family Planning Only Services. The team also determines eligibility for FoodShare, Caretaker Supplement, and Wisconsin Shares.

Oneida County Economic Support unit also determines eligibility for WHEAP (Energy Assistance) programs administrated through the State of Wisconsin, Division of Energy, Housing and Community Resources.

Economic Support Unit consists of 1 manager, 1 lead and 10 ES specialists (three that are dual trained in ES and WHEAP).

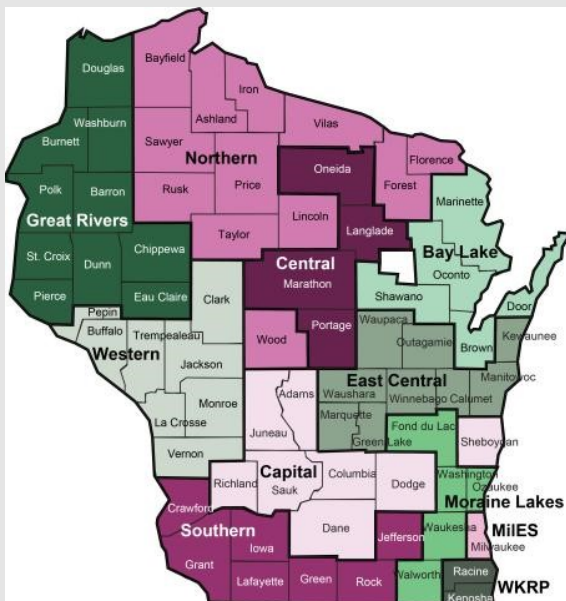
There are several ways to apply:

- **Online:** <https://access.wisconsin.gov/access/>

- **By Phone:** 888-445-1621

- **Mall a completed application to:**
Centralized Document Processing Unit
PO Box 5234
Janesville, WI 53547-5234
Or fax to 855-293-1822

- **In Person (appointment may be required)**
Oneida County Human Services/
Courthouse
1 S. Oneida Ave
Rhineland WI 54501



Consortia website -

<https://www.imcentralconsortium.org>

ECONOMIC SUPPORT



MEDICAL ASSISTANCE/BADGERCARE PLUS

Wisconsin Medicaid is a joint federal and state program that helps more than 1 million residents get:

- High-quality health care coverage
- Long-term care
- Other services that promote physical and mental health and well-being.

There are many types of Medicaid programs. Each has certain financial and non-financial requirements you must meet to enroll.

For 2025, Oneida County had a monthly average of 2,002 adults and 1,569 children receiving some form of medical assistance.

Key Changes for 2025:

- Effective February 22, 2025, current, past, and future access to health insurance no longer impact BadgerCare Plus eligibility.
- Enhancements to Administrative Renewals, allowing more cases to be automatically renewed.
- MAPP premium enhancements took place in October, 2025.
- Long term care queue was added to consortium call center to provide direct service to long term care customers.
- Effective November 1, 2025, when a member no longer meets requirements for BadgerCare Plus (or other health care category not based on disability), the member's coverage is maintained while determining if they qualify for Medicaid based on disability if any of the following are true: • The member has been determined disabled. • The member indicates they want to apply for a disability determination. • The member is enrolled in an adult long-term care program.

ECONOMIC SUPPORT

WISCONSIN FOODSHARE/SNAP

FoodShare Wisconsin, also known as SNAP (Supplemental Nutrition Assistance Program) helps people buy the food they need for good health. The goal of this program is to stop hunger. People all over Wisconsin get help with FoodShare. We help people of all ages who:

- Have low-income jobs
- Live on a small or fixed income
- Are disabled and cannot work
- Have lost their job
- Are retired



On average, 3,391 Oneida Cty residents received FoodShare benefits a month in 2025. One-third of those were children.

A grand total of \$5,781,069 in FoodShare benefits were issued to Oneida Cty residents in 2025. This is 2.21% decrease from 2024.

Key Changes for 2025:

- Unclear Information policy effective 6/23/25, intended to reduce termination of FoodShare when unrequired changes are reported.
- Break in Service policy change, prorating benefits for late Six Month Report Forms.
- FoodShare members now are able to submit late renewals in the month after the month the renewal was due, instead of having to reapply.
- FoodShare Work Requirement Exemption Modifications changes as of 11/1/25.

Those that do not meet the work requirements or have an exemption, may only be eligible for three months in a three-year period.

- Able-Bodied Adults Without Dependents (ABAWD) are subject to a work requirement if aged 18-64 years unless they qualify for an exemption.
- The ABAWD member exemption for applicants and members with a dependent child in the household is limited only to those with a dependent child aged 13 or younger in the home.
- FoodShare work requirement exemptions eliminated for members experiencing homelessness, veterans or former foster care youth.

ECONOMIC SUPPORT

WISCONSIN SHARES a.k.a. Childcare Assistance

The Wisconsin Shares Child Care Subsidy Program supports families by funding a portion of the cost of child care while the parents are working or participating in another approved activity.

In 2025, Oneida County had 35 families/50 children a month on average receiving Wisconsin Shares. A total of \$368,809.42 in benefits were disbursed in 2025.

In February 2025, the WI Shares Child Care Estimator Tool became available for use. This is a tool for parents to estimate subsidy amounts and plan for out-of-pocket child care costs.

Effective October 1, 2025, the Wisconsin Shares Subsidy Rate Increase was implemented. This Rate Increase significantly increased subsidy rates to increase maximum reimbursement rates to or above 75% of the market rates for all age groups. This increase was to align with federal regulations and actual costs.

Also effective October 1, 2025, with the WI Shares Subsidy Usage Updates parents were encouraged to use the full amount of authorized subsidy funds issued on their MyWiChildCare EBT cards to pay providers even if it exceeds the provider's billed amount. This is to better account for the actual cost of care.

The gross income limit for new applicants is 200% of the Federal Poverty Level (FPL). Financial eligibility for foster parents, subsidized guardians, interim caretakers, and relatives with court-ordered placement who receive a Kinship Care payment is based upon the child's biological or adoptive parents' income at the time the child was removed from the home.

Parents receive a part-time or full-time subsidy amount based on their average weekly child care need.

- If your child is authorized for **20 weekly hours or less**, you will receive a part-time monthly subsidy amount.
- If your child is authorized for **more than 20 weekly hours**, you will receive a full-time monthly subsidy.

Parents who have Wisconsin Shares authorizations will be able to request funds to pay registration fees up to \$125 twice in a 12-month period.



The Oneida County Childcare Coalition includes individuals representing employers, providers, parents, local government and nonprofit organizations. This coalition has been established to raise awareness on the current state of childcare in our county, interconnect the network of services available within our county for partners and childcare facilities and advocate for the childcare industry.

Visit: <https://ocwichildcare.com/>



ECONOMIC SUPPORT



The NorthCentral FSET Program (Region 6) offers voluntary employment and training services to any individuals age 16 and older receiving FoodShare benefits serving the following counties: Wood, Adams, Portage, Marathon, Langlade, Lincoln, Forest, Oneida and Vilas.

The NorthCentral FSET Program offers individualized case management, collaborating with community resources and partner employers, to assist with employment and education goal identification and achievement.

The FSET is a *free* and voluntary program that offers support for job search, interview practice, career planning and direct connection to over 100 regional employer partners. FSET education and training services include connection to local schools for basic education (such GED/HSED, English as a Second Language, Adult Basic Education courses), professional skills development including short-term skills trainings (such as Commercial Driver's License or Certified Nursing Assistant) and job retention support to maintain new employment. FSET can provide support services including transportation related needs, work-related clothing, resume development, and much more.

2025 Data for Oneida County and FSET Region 6

- **Total Customers Served**
- Average Number of Customers Served Monthly in Region 6: 833 customers
- Oneida County: 120 new customers enrolled
- Region 6: 1,830 customers enrolled in FSET
- 98% customer said they were either 'happy' or 'very happy' with their FSET enrollment experience

- **Total Entered Employments** (Customers who reported and obtained through FSET)

- Oneida County: 101 customers
- Region 6 Total: 1,192 customers

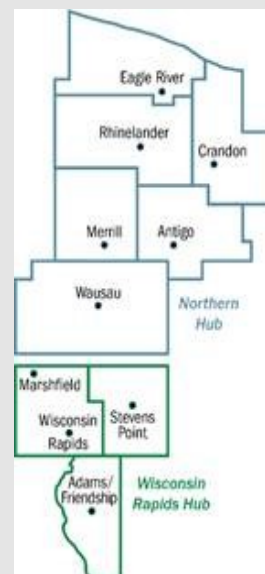
- **Average Hourly Wage for Employers**

- Oneida County: \$15.25/hour
- Region 6: \$15.95/hour

- **Total Employer Partners/Partnerships**

- Oneida County: 24 total Employer Partners

Employment



Wisconsin Home Energy Assistance Program (WHEAP)



<https://energyandhousing.wi.gov>

The Wisconsin Home Energy Assistance Program (WHEAP) provides assistance for heating costs, electric costs, and energy crisis situations. Operating with federal and state funding, the program provides assistance to households across the state to help lower the burden incurred with monthly energy costs. WHEAP benefits are not guaranteed to eligible households. When funds have been exhausted for a program year, there are no benefits issued to households regardless of eligibility.

Heating and Electric Assistance

WHEAP assistance is a one-time payment during the heating season. The funding pays a portion of the heating costs, but the payment is not intended to cover the entire cost of heating a residence. Households may be eligible to receive a payment for non-heating electric energy costs through funding provided by Wisconsin's Public Benefits.

Crisis Assistance

A household may be eligible for crisis assistance if experiencing an energy emergency. Crisis assistance is available through local WHEAP agencies that provide a 24-hour crisis phone number to help with emergencies that occur after business hours. Crisis assistance is intended to provide emergency and/or preventative services to assist eligible households experiencing an energy emergency.

Home Energy Plus (HE+) Program Services

Provides HVAC repairs and replacements, water heater repairs and replacements and water conservation measures to eligible applicants.

The following benefits were provided to Oneida County residents in fiscal year 2025:

Households Assisted	Count	Total Benefit Paid	Average Benefit
Heating Assistance	1,370	\$631,005	\$461
Non-Heating Assistance	1,463	\$285,932	\$195
Crisis Assistance	124	\$58,537	\$472
HVAC Repairs/Replacements	104	\$217,162	\$2,088
Water Conservation	41	\$87,428	\$2,132

CHILD SUPPORT

Child Support program goals, as set by the Federal Office of Child Support Enforcement, are “to assure that assistance in obtaining support (both financial and medical) is available to children through locating parents, establishing paternity and support obligations and enforcing those obligations.”

Performance

Child Support Unit caseload average	1,759
Arrears Collected	\$710,234.34
Current Support collected	\$3,518,754.77
Total Child Support collected in 2023	\$4,228,989.11

To see all of the functions the Child Support unit provides, see the [OCDSS 2025 Service Listing](#).

Child Support Program Performance

Each year, child support agencies have four performance-based goals. Meeting these goals helps maximize federal program funding. The federal fiscal year runs from October 1 through September 30.

The four areas that are measured are:

- Establishing court orders
- Establishing paternity
- Collecting current child support
- Collecting past-due child support

For fiscal year 2025, the Oneida County Child Support Agency met or exceeded federal goals in three out of the four areas. The agency:

- Established court orders in 92.54% of cases
- Established paternity in 105.78% of cases
- Collected current child support at a rate of 80.26%
- Collected past due support in 77.81% of cases

This is the first time in the agency’s history that it exceeded 80% for current child support collections, making it the highest current support collection rate ever achieved! During that time, the Oneida County Child Support Agency Collected over \$4.3 million in support for our families.



CHILDREN FIRST

Children First is an employment and training program for Non-Custodial Parents (NCPs) who have a court-ordered child support obligation. Children First is a state funded program authorized by statute. The goal of Children First is to help clients gain and retain employment while strengthening their relationship with their children.

NCP's owing support who are unemployed or underemployed, but able to work, may be court ordered to participate in the Children First program. Children First agencies provide case management and employment services to parents who are court ordered to participate in the program.

Children First case managers work with the court ordered NCP to improve their ability to make regular child support payments by improving their employability. This is completed by working with the NCP in resume development, interview skills, job search, as well as many other things including building and improving soft skills.

For a participant to satisfy Children First program requirements, they must complete one of the following within 12 months of enrollment:

- Make three consecutive monthly child support payments for the court-ordered amount (partial payments do not count);
-or-
- Successfully and fully complete all assigned Children First activities for 16 weeks within a 12-month period.

In 2025 Oneida County Children First program had:

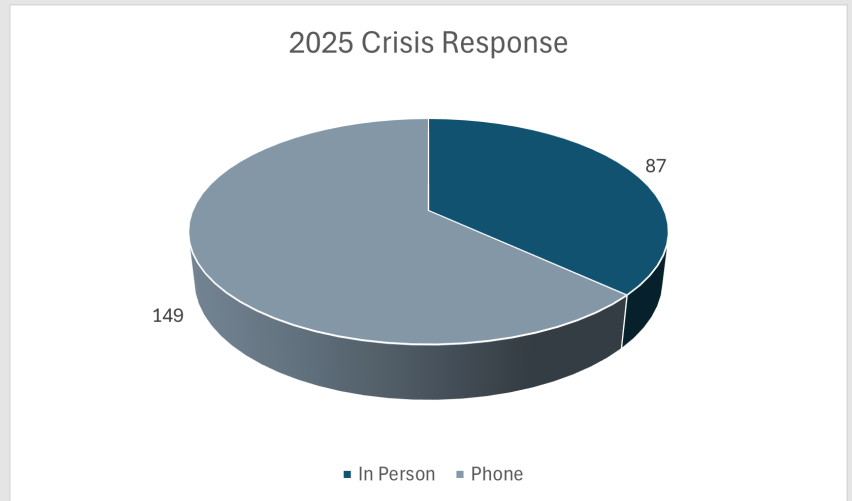
- 19 referrals were processed in 2025.
- A total of 22 (6 carried over from 2024 and 16 newly enrolled in 2025) non-custodial parents were served in 2025
- We observed an 84% enrollment rate this year, this rate reflects intentional attempts to engage customers and the collaboration between the Oneida County Children First Case Manager and Child Support.
- 50% of Children First closures were for Successful Closure
- 1 of the 14 successful closures in 2025 was for completing 16 weeks of activity while the remaining 6 successful closures were for paying 3 consecutive months of Child Support payments in full.
- Of the remaining unsuccessful closures, 2 participants disenrolled as they were no longer eligible for Children First, 2 used 12 months and did not gain employment or complete the required job searches, and 3 stopped engaging in Children First so were sent back to Oneida County Child Support in Non-Compliance.
- 8 new jobs, primarily secured in the customer service field, were obtained, with a total average wage of \$15.13



EMERGENCY SERVICES PROGRAM (ESP)

The 2025 year brought a lot of opportunity to The Emergency Services Program! We buckled down on efforts to make impactful relationships with community partners and focused even more on our person-centered approach. Our in-person crisis response has been well received by community partners and consumers. So much so, that we now have a crisis screener/facilitator located at the Vilas County Courthouse 90% of the time as well as a crisis screener/facilitator located at the Woodruff Police Department twice a week. While it took most of 2025 to figure out the ins and outs of these positions, they were successfully up and running for the 2026 year, with the Vilas location filled for almost all of 2025. The Oneida County Jail Crisis Facilitator position was created and posted in 2025 to begin in January 2026.

As the chart shows, crisis screeners are starting to dispatch, in person to calls, more regularly. We predict that these numbers will only continue to increase, especially with our staff stationed in different communities, allowing such quick in-person response. In 2024, there were zero calls mobilized out to, but in-person screening was available at the Timber Drive location.



We had 2 successful maternity leaves in 2025, with healthy babies, and the full team is back together! We are happy to report that coming in to the 2026 year, we will be fully staffed, which includes 3 crisis facilitators, a jail crisis facilitator, a hospital liaison, and manager. Alongside our staff's very busy schedule, they have carved out some time to be present for the community in some special ways. The manager has become certified in offering Postvention Suicide support. One of the crisis facilitators is heavily involved in the COPE Coalition and currently offers internal DBT Groups along side the clinical supervisor and is gearing up to offer a suicide loss support group, open to the community. Another service facilitator has been stationed in Vilas County all of 2025 which has made a huge impact on positive collaboration between multiple community partners including the local schools, jail, human services department, and more. Not to mention the expedited in-person response to local crisis calls. We have a crisis facilitator who always advocates for their client's best interest and our hospital liaison has worked with our local BHU to have a more consistent treatment team meeting, now with a virtual option. We are excited for the challenges the upcoming year will bring and finding more ways to be connected to our community members.

OUTPATIENT CLINIC

Over the past year, the Outpatient Clinic made significant strides in expanding access to care and improving service delivery for the community. A third Substance Use Disorder Counselor was added, increasing capacity to meet growing substance use treatment needs. The clinic also contracted with a new psychiatrist specializing in addiction and adolescent care, allowing services to expand to patients ages 11 and older—broadening access beyond the previous 18+ population.

A unique telehealth partnership was created with the Pauquette Center for Mental Health Therapy while a full time therapist could be hired. That position was filled and trained, and has already assumed a full caseload; successfully eliminating the previous mental health therapy waitlist. To improve client engagement and reduce no-show rates, the clinic implemented a secure texting service for appointment reminders and communication which will be utilized agency wide as needed. Finally, the Outpatient Clinic staff assisted in restarting the OWI Treatment Court program, strengthening collaboration with the justice system and enhancing treatment options for justice-involved individuals. Through a grant, two more Recovery Coaches were hired to continue prevention efforts within the community as well, those coaches will be integrated into the work at Human Services and specifically trained CCS program as a new initiative, overseen by the Peer Support Coordinator.

Appointment Data for 2025 for Oneida, Forest and Vilas Counties:

Psychiatric Evaluations: 587

Medication Management Appts: 934

OWI Assessment Appts: 306

Mental Health and Substance Use Disorder Intake Appts: 303

Substance Use Disorder Counseling Appts: 1461

Mental Health Therapy Appts: 621



BIRTH TO 3

The federally mandated, state-supervised Birth to 3 Program serves children ages 0–3 with developmental delays or disabilities. The program provides family-centered services that support children’s development while empowering families to meet their child’s unique needs.



Key services include:

- Developmental evaluations*
- Speech, occupational, and physical therapy*
- Service coordination*
- Family education and support*

Interventions are embedded within daily routines in natural environments, such as the home or childcare settings. A strong emphasis is placed on early identification, ongoing developmental monitoring, and transition planning as children near age three.

STRENGTHS

- Strong family engagement and integration of supports into daily routines*
- Highly effective multidisciplinary collaboration among therapists, service coordinators, and families*
- Success in early identification of developmental delays through strong partnerships with pediatricians and community agencies*
- Well-coordinated transitions to Early Childhood Special Education (ECSE) services*
- Dedicated staff committed to providing family-centered care and support*

OPPORTUNITIES FOR GROWTH

Community Education & Social Ownership

- Expand outreach to increase public understanding of Birth to 3 services*
- Foster a community culture that views early intervention and long-term supports as shared responsibilities*
 - Clarify messaging that emphasizes family partnership*
- Normalize the complementary use of Birth to 3 and outpatient therapies*

Birth to 3 Focus Areas

- Expand “Child Find” efforts in collaboration with schools, public health, and early childhood centers*
- Strengthen relationships with hospitals and pediatric providers to encourage timely referrals*
- Educate medical professionals and community partners on the benefits of early intervention*

CHILDREN'S LONG-TERM SUPPORT (CLTS)

The CLTS Waiver is a Medicaid Home and Community-Based Services (HCBS) program supporting children with developmental, emotional, or physical disabilities. The program funds services and supports that help children live safely and fully within their homes and communities.



Key services include:

- Daily living skills training
- Respite care
- Specialized medical and therapeutic supplies
- Home modifications and adaptive equipment
- Supportive home care and safety planning



The CLTS Waiver operates through a family-driven, person-centered approach, with individualized service plans (ISP). It is needs-based and not income-based. The program complements early intervention and school-based services, providing a comprehensive, wrap-around support system for eligible children.

STRENGTHS

- Growth in provider partnerships, expanding service access (notably through partners like Heroes Unbound)
- Creative problem-solving to address rural service barriers and workforce shortages
- Strong service coordination and relationship-building with families and providers
- Strategic use of Children's Community Options Program (CCOP) funding to address gaps and support infrastructure development

OPPORTUNITIES FOR GROWTH

Community Education & Social Ownership

- Expand outreach to increase public understanding of CLTS services
- Foster a community culture that views early intervention and long-term supports as shared responsibilities
- Clarify messaging that emphasizes family partnership

Fiscal Optimization & Revenue Strategy

- Maximize Medicaid revenue through improved billing practices and provider training
- Strategically leverage CCOP and CLTS funds to support workforce development
- Explore underutilized funding sources to ensure long-term program sustainability
- Program Integration & Capacity Building

- Develop internal training pipelines to stabilize the workforce and reduce dependence on out-of-county providers
- Enhance collaboration across programs (Birth to 3, CLTS, and school-based services) to provide cohesive, wrap-around supports



COMMUNITY SUPPORT PROGRAM (CSP)



The Community Support Program (CSP) serves individuals with chronic and persistent mental illness living successfully in the community. By participating in CSP, individuals are provided consistent support, monitoring and checking in. They learn how to advocate and communicate their wants/needs on their own behalf and their team does so with them when others are unable to understand. This program is a person centered, individualized approach with a large team of supports that include mental health technician (s), case manager, doctor, nurse, psychiatrist, natural supports, and therapist if needed. CSP is designed to be a “hospital without walls” and this is to identify support beyond formal treatment services, providing opportunities for social interaction, peer support, and mutual understanding. It exemplifies the underlying philosophy of CSP, which emphasizes holistic care and recognizes the importance of building a sense of community for individuals in the program. CSP is one of the only case management programs that an individual can be enrolled involuntarily if it is court ordered. Otherwise, this is a voluntary program that is 60% reimbursed through Medicaid and 40% reimbursed by tax levy.

This year, our CSP team became fully staffed. We were able to hire an individual for our CCS program who also had the credentials, experience, and capacities to be a CSP Professional (case manager). This individual was cross trained to provide services in both of our Case Management programs. This provides opportunities of growth and recovery through the continuum of care and recovery.

In 2025, the clinical coordinator was able to assess each member being served and identify if there would be a lesser restrictive program that could also meet their needs. Many members were found to be able to be served within the CCS program knowing that if their intensity and acuity of need increases and they qualify; they can be re-enrolled into the CSP program.

Receiving assistance through CSP reduces hospitalizations and out of home placements. CSP is a program that aims to reduce recidivism to the hospital by keeping clients in the least restrictive setting which is within their own community.

In 2025: 13 individuals were served in CSP

INTERNAL DEPARTMENT COMMITTEES

LONG RANGE PLANNING COMMITTEE

Our LRP Committee made up of agency staff meets every three months to review progress and make plans for future identified goals. 2025 was the first year of 2025-2027 Long Range Plan. Updates to the plan are reviewed annually by the Human Services Committee. Some accomplishments in 2025 were:

- Became a Human Services department.
- Developed a plan to have a Crisis Worker work within the Jail.
- Streamline processes at Timber Drive
- Created 3 LTE recovery coach positions
- Continue to provide education to staff on community resources.
- Continue to educate community partners on services available through the agency.
- Assisted in the transition of the new county payroll system.
- Updated policies and procedures



SAFETY COMMITTEE



OCHS has a Safety Committee made up of representatives from all areas of the Human Service/ADRC departments. The committee meets periodically to discuss safety concerns and potential safety issues which could arise in-office and in the field. The committee reviews issues brought to it by both management and other staff to discuss possible solutions and make recommendations to management for changes or updates to existing practices & procedures. The committee also develops strategies to communicate safety matters to all staff and promote a safe environment in the department for staff and clients. In 2025, recommendations made by the Safety Committee further developed safety training procedures for onboarding new employees, developed and updated emergency procedures for the Timber Dr. and Courthouse Locations, and retraining of all staff on accident reporting procedures.

INTERNAL DEPARTMENT COMMITTEES

VOLUNTEER COMMITTEE

Human Services Staff are dedicated to our residents on a professional and personal level. Our staff have taken advantage of volunteer opportunities and partnered with other agencies to give back to the community. Agency staff donated monthly meals to NATH. For a small donation, staff participate in Jean Day Fridays. The money collected each month is donated to a different organization or cause. In 2025, donations were made for:

- Hodag 10's—\$230.00
- Christmas donations for families—Sponsored 5 youth (\$1,651.00)
- Alzheimer's Walk—\$210.00
- Family Dome Night Event—\$319.00
- FACT Group —\$228.00
- NAMI —\$267.75
- NATH Homeless Shelter- 2 meals for residence
- Humane Society—\$152.75
- Thanksgiving baskets—\$304.00
- Food Pantry —\$250.00
- Northwoods Veterans Homestead—\$191.00

Total cash donations for the year of \$3,803.50



TRAUMA INFORMED CARE

Our mission is to build a trauma-informed agency by incorporating specific strategies across each level of the agency. Developing trauma-specific services that match clients' needs to enhance understanding of the impact of trauma on individuals, families, staff, and the community as a whole. The committee will match learned strategies to the needs and strengths of families and staff. The TIC Vision: Supporting resilient and healthy lives in the Northwood's through trusting and compassionate partnerships.

2025 Accomplishments:

- Family Night took place at the Rhinelander High School on Wednesday, April 2, 2025, due to the Dome being down at that time. The event was a great success hosting it on a Wednesday versus historically on a Friday.
- Implemented short trauma informed care training videos as part of our Agency-wide policy and training platform, The Guard, requiring workers to watch the training videos and participate in discussions during unit and all staff meetings. Training topics included the Basics of ACES and Brain Development, Understanding Vicarious Trauma/Secondary Trauma and Compassion Fatigue.
- The TIC committee publishes a monthly newsletter to Human Service staff with topics including, but not limited to dealing with Stress and Anxiety, Mental Health Awareness, Domestic Abuse Awareness, and giving back during the holidays. The newsletter also announces staff accomplishments, anniversaries, birthday and other important events.





ONEIDA COUNTY HUMAN SERVICES

Better Together

Court House

1 S. Oneida Ave
Rhineland, WI 54501
Phone: 715-362-5695
Fax: 715-362-7910
Child Support
Economic Support
Child Protective Services
Foster/Kinship Care
Youth Justice

Timber Drive

705 E. Timber Drive
Rhineland, WI 54501
Phone: 715-369-2215
Fax: 715-369-2214
Adult Community Services
Children's Community Services
Emergency Services
Outpatient Clinic



Aging & Disability Resource Center

100 W. Keenan St
Rhineland, WI 54501
Phone: 715-369-6170
Fax: 715-369-6245
Adult Protective Services
Disability Benefits
Elderly Benefits
Information & Assistance
Transportation
Volunteer Opportunities