Children's Service Society of Wisconsin

Annual Report 2019



Children's Service Society of Wisconsin

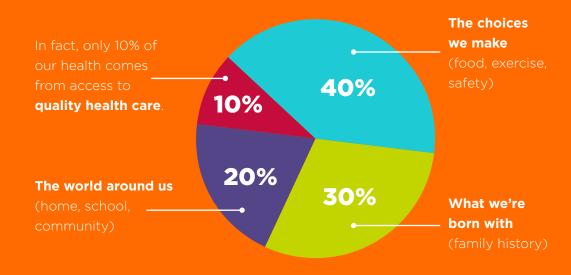
For more than 125 years Children's Service Society of Wisconsin (CSSW) has changed the lives of children and families through effective, empowering programming that strives to build, sustain and enhance a nurturing environment for Wisconsin's children and youth. CSSW has evolved to become the largest not-for-profit, nonsectarian provider of community-based child and family services and child welfare services in the state. Our work is a key part of advancing Children's Wisconsin's vision for our state's children to be the healthiest in the nation.

CSSW's service providers positively impacted the lives of nearly 15,000 children and families in 2019 through our core service areas: community education and injury prevention, mental and behavioral health, family preservation and support, child welfare, and child advocacy and protection.

Our services, combined with the medical expertise of Children's Wisconsin, bring child health and welfare together to transform the health and well-being of children, families and communities — because kids deserve the best.

Did you know?

Staying healthy is mostly about what happens outside the doctor's office.





Statewide Presence

Antigo

N4013 US Hwy. 45 Antigo, WI 54409 (715) 627-1414

Baraboo

626 14th St., Suite A Baraboo, WI 53913 (608) 356-3019

Black River Falls

W11109 Rogers Rd. Black River Falls, WI 54615 (715) 284-3001

Burlington

c/o Love, Inc. 480 South Pine St. Burlington, WI 53105 (262) 763-6226

Eau Claire

2004 Highland Ave., Suite M Eau Claire, WI 54701 (715) 835-5915

Elkhorn

W4063 Hwy. NN Elkhorn, WI 53121 (262) 741-1440 (262) 743-2221

Janesville

32 E. Racine St., Suite 190 Janesville, WI 53545 (608) 314-9006

Kenosha

8207 22nd Ave., Suite 155 Kenosha, WI 53143 (262) 652-5522

Kenosha

6809 122nd Ave. Kenosha, WI 53142 (262) 653-2266

Madison

1716 Fordem Ave. Madison, WI 53704 (608) 221-3511

Marshfield

725 S. Central Ave. Marshfield, WI 54449 (715) 387-2729

Merrill

712 East 2nd St. Merrill, WI 54452 (715) 539-9228

Milwaukee - 76th Street

Fair Park Business Center 620 S. 76th Str., Suite 120 Milwaukee, WI 53214 (414) 453-1400

Milwaukee -

Ascension Lutheran

1300 S. Layton Blvd., Room S-301 Milwaukee, WI 53215 (414) 294-3849

Milwaukee - Sojourner

Family Peace Center

619 West Walnut St. Milwaukee, WI 53212

Milwaukee Visitation Center

6737 W. Washington St., Suite 3115 Milwaukee, WI 53214 Reception A: (414) 337-4492

Reception B: (414) 337-4493

Neenah

325 N. Commercial St., Suite 400 Neenah, WI 54956 (920) 969-7955

Racine

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Rhinelander

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Stevens Point

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Stratford

Chamber of Commerce Bldg. 300 Larch St. Stratford, WI 54484

Wausau

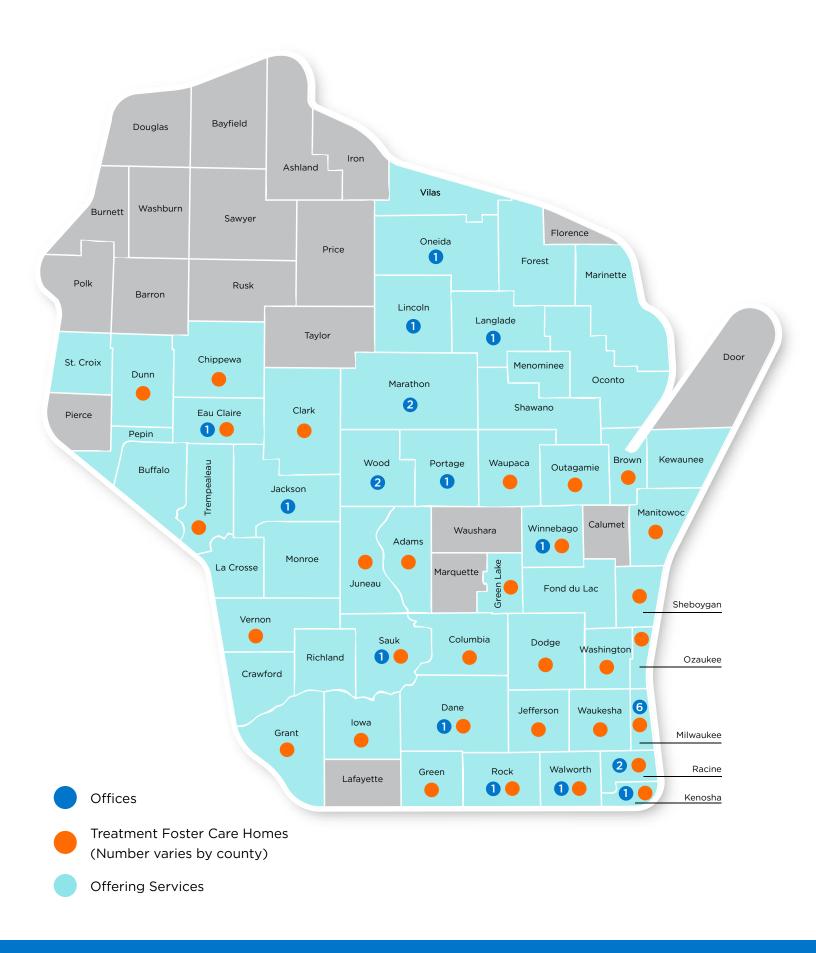
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Wauwatosa

Woodlake III-Business & Tech. Ctr. 10200 W. Innovation Drive, Suite 350 Wauwatosa, WI 53226 (414) 337-1298

Wisconsin Rapids

320 W. Grand Ave., Suite 205 Wisconsin Rapids, WI 54495 (715) 421-2730





2019 Financial Results (pre-audit)

Operating Revenue

Other	\$128,079
Purchase of Service	\$33,669,619
Fundraising	\$1,786,474
United Way	\$1,579,525
Service Fees	\$2,418,824

Total Operating Revenue \$39,582,521

Operating Expenses

Community Education and Injury Prevention	\$1,285,779
Mental and Behavioral Health	\$4,595,315
Family Preservation and Support	\$6,212,310
Child Welfare	\$27,976,908
Child Advocacy and Protection	\$1,513,264
Institute for Child and Family Well-being	\$708,902
Other	\$470,249
Total Operating Expenses \$42,762,727	
Income (Loss) From Operations \$(3,180,206)	
Net Nonoperating Gain (Loss) \$(45,008)	

Excess (Deficit) of Revenue Over Expenses **\$(3,225,214)**

By the numbers

Project Ujima _____ Families and Volunteer Respite____ 79 Mental and Behavioral Health Includes individual counseling, psychological testing, group counseling and school-based mental health Family Preservation and Support Community Response _____ 92 Home Visiting (early childhood services) ______740 Family Support, SEFEL, Early Childhood Connector Zone, Education and Employment Specialist programs, and Youth Innovations ____ 181 Family Resource Centers (including group-based programming and Triple P) _____ 4598 **Child Welfare**

Family Case Management ______ 1769 Intensive In-Home______ 164 Project Home _____ 86 1172 Public Adoption _____ Treatment and Regular Foster Care ______ 238 Supervised Visitation and Visitation Centers ______ 507

Community Education and Injury Prevention

Includes services provided at Child Advocacy Centers





Community Education and Injury Prevention

Factors outside the doctor's office impact a child's health — from home, school and neighborhood environments to choices about food, exercise and safety. That's why Children's Wisconsin embraces opportunities to reach and support families outside of medical settings. Community health and education programs and services strive to improve the health of children, families and communities.

Volunteer Respite provides a much-needed break for families caring for medically fragile children. These caregivers are under tremendous daily stress as they juggle complex medical interventions and advocating for their child with other demands of life. Through regularly scheduled events that include a full day of fun activities for children with special needs, the Volunteer Respite program gives parents or caregivers an opportunity to recharge and refresh, ultimately strengthening the entire family.

Project Ujima aims to stop the cycle of community violence by supporting youth and families on their journey of healing and recovery. When patients are admitted to Children's emergency room for an injury due to violence, program staff are swiftly engaged to support the youth and their families through this traumatic experience. This voluntary, family-centered program offers a wide variety of services and resources, including crisis intervention and case management, mentoring, and mental health and medical services over approximately 18 months. This transformative program has been shown to increase participants' resilience and reduce their risk of reengaging in violence.





Counseling — Mental and Behavioral Health

Our vision is that every child and teenager in Wisconsin will receive the right support for their mental and behavioral health, at the right time, in order to grow up healthy and thrive. Achieving this vision depends on investment in three priority areas:

- 1. Early detection, prevention and education
- 2. Access
- 3. Reducing stigma

In our Community Services Division, we worked hard to prioritize and expedite our vision goals because our kids cannot wait any longer. In July 2019, we launched our **Therapist Training Program,** bringing on five therapists to receive intensive education and on-the-job learning to become eligible for their therapy license in 18 months. This program, which will add five to 10 new trainees a year, creates additional access now and in the future for children and families as we grow highly competent, trauma-informed therapists.

We also launched our **Early Childhood Mental Health program** in 2019, adding specialty therapists trained in infant and early mental health to some of our outpatient programs. This program is designed to detect and prevent early mental health issues. Our specialty therapists educate families and caregivers on the first five years of a child's life and development, focusing on healthy bonding and social-emotional development that can set the stage early for a lifetime of well-being.

In addition, our **School-Based Mental Health Program** grew significantly in 2019. We added 23 new schools providing mental health services, bringing our total to 51 schools across the state and providing access to mental health care for an additional 415 Wisconsin children. Often children feel more comfortable seeking these services at the familiar and trusted environment of school. By having the therapist become part of the school team, we hope to reduce the stigma around seeking mental health services and improve children's access to timely care.



The Therapist Fellowship Training Program 2019 Cohort completed

285 hours of training.

These therapists in training saw 145 clients during 722 sessions of therapy.





Family Preservation and Support

Our statewide family preservation and support programs promote safe and stable families in a variety of ways. Our **Home Visiting** programs work individually with pregnant and parenting women and families by providing information, resources, support and education. We follow evidence-based models like Healthy Families America, Parents as Teachers and Nurturing Parent.

Partnering with the Black Child Development Institute of Milwaukee, we established a Community Action Network that includes Health Start grant partners, community stakeholders and **Healthy Start** program participants working to create community-level change on health disparities for African Americans in Milwaukee County. Healthy Start is a federal grant-funded program aimed at eliminating health inequities for African American women and children with the goals of reducing infant mortality, increasing access to early prenatal care and removing barriers to health care access. The program uses maternal health navigators to support Milwaukee County families by promoting and enhancing physical and behavioral health, helping address basic needs and providing community resources for concerns like family violence.

Our **Family Resource Centers** provide parents and caregivers with empowering information and support programs — all free of charge to families — to promote the healthy growth and development of children and strengthen family relationships. All Family Resource Centers facilitate parent education classes that follow evidence-based models such as ACT Raising Safe Kids or Nurturing Parent. Our Play and Learn classes follow the Wisconsin Model Early Learning Standards. Most centers also offer parenting phone support, delivering tailored and confidential parenting information and resources to callers over the phone.

Kiara's Story

As a new mom at 17, Kiara was very nervous about caring for her baby, Angel, and initially relied heavily on her own mother for help with basic childcare tasks like burping and bathing. But that changed when Kiara enrolled in our Healthy Families Home Visiting program. With the partnership of our home visitor, Kiara eventually became more comfortable caring for Angel and more confident in her own ability to be a safe and loving parent. Kiara was eager to learn, and educational videos, facilitated exercises and practice helped her feel more knowledgeable and prepared for motherhood. By the end of the program, Kiara was confident in herself and ready to care for Angel without her mother's help.

Her newfound confidence is paying off in other ways, too. Kiara is succeeding academically, is enrolled in some advanced placement (AP) courses and was awarded a college scholarship. After high school, she hopes to become a licensed paramedic. She's already on her way: She was recently accepted into college.

Photos provided by the family



By the time Skyler was 4 years old, he had already experienced a great deal of trauma in his brief life, including witnessing severe domestic violence. But his journey toward healing began when he was placed at a Children's Wisconsin treatment foster home with the Lloyd family.

Through a great deal of love and patience by his treatment foster parents, along with therapy and psychiatric services from Children's Wisconsin, Skyler grew and healed. It wasn't always easy, but with the support of the Lloyds and Children's specialists, Skyler continued to make progress. Eventually it became apparent that Skyler's birth parents would not be able to make the changes needed to safely care for him. The Lloyds stepped forward to adopt Skyler, and he was adopted on National Adoption Day in November, exactly four years after being placed in his now permanent home.

Skyler is a great example of what can be accomplished when teams work together to deliver the best care for kids. From the doctors who provide primary care to the social workers, therapists and psychiatrists who support mental and behavioral health, Children's helped one boy heal and realize his dream of a forever home.

Child Welfare

Children's is committed to ensuring that every child has a safe and stable home. To advance that goal, we provide an array of child welfare services in Milwaukee County under a state contract administered by the Division of Milwaukee Child Protective Services. Our primary charge is to ensure child safety, permanency and well-being. Our child welfare services are guided by our family-centered practice: Our priority is to keep families intact and maintain family connections.

Our **Intensive In-Home** (IIH) program partners with families to ensure child safety in the home while simultaneously providing services to enhance parents' protective capacities. Families in our **Family Case Management** (FCM) program are served under the jurisdiction of the Milwaukee County Children's Court, with the goal of reunifying families as quickly and safely as possible. When children need to be placed in out-of-home care, our foster care licensing and placement program matches children to caregivers equipped to meet their needs. Our Family Support program works closely with our IIH and FCM programs to support in-home safety plans and timely reunification of parents and children when separated. Our trauma-informed, evidence-based services focus on safety measures, parenting education, mentoring and strengthening family interactions.

Our statewide **Treatment Foster Care Program,** which provides home-based care for children and adolescents who have experienced significant trauma in their lives, is designed to address the comprehensive well-being needs of children. In 2019 Children's Wisconsin became a certified provider of the evidence-based model Together Facing the Challenge (TFC). This model offers classroom and individual curriculum, home-based tools, and ongoing coaching and support.

Through our contract with the Wisconsin Department of Children and Families, Children's offers **Public Adoptions** programming to 18 Wisconsin counties. The primary goal of our adoption program is to provide all foster children who are in need of a permanent home with an adoptive family that will offer them:

- The rights and protections that are derived from a legal parent-child relationship
- The opportunity to experience the emotional security, growth and development resulting from sound family relationships
- The social status and identity derived from being part of a family entity
- The protection, nurturing and care necessary for physical growth, development and well-being



42 families

never experienced a separation and completed our intensive in-home services.



197 families

reunified after receiving support from our family case management and support services.

(B's Story

CB's life got off to a difficult start. Her mother was diagnosed with cancer during pregnancy, and in utero CB was exposed to chemotherapy and radiation, along with other treatment medications. Her mother passed away shortly after CB's birth. Considered "medically fragile," CB weighed just 1.72 lbs at birth and spent four months in the Neonatal Intensive Care Unit.

After she was discharged from the hospital, CB briefly went to live with her maternal grandmother because her father was unable to care for her medical needs at that time. To help with her growth, CB was placed on a feeding tube, and she had to take a number of medications for her continued gastrointestinal and breathing issues. Her immune system was so weak that daycare was not a possibility.



Unable to stay with her grandmother, CB moved into foster care and was eventually placed into the treatment foster care home of Jean and Chad Glidden just before her 2nd birthday. The Gliddens received specialized medical training to be prepared for CB's many needs. They committed to frequent tube feedings, a multitude of ongoing medical appointments and sleepless nights. They were informed that it was likely CB would never walk, talk or eat on her own.

Despite the challenges, CB was an active and happy toddler, with a smile that could light up a room. She communicated through American Sign Language and limited vocalizations.

At her first foster home, CB did not have much interaction and rarely left the house, but she made great strides in the enriching environment of the Gliddens' home. She began to eat pureed foods and no longer required a feeding tube. Despite the earlier predictions, she started speaking in sentences and walking. At the encouragement of her social worker, CB went camping, attended church and even went swimming. The gains CB made during her time with the Gliddens were extraordinary.

However, what was even more extraordinary was the partnership parenting that occurred between the Gliddens and CB's birth father. The Gliddens worked diligently to incorporate CB's father into her life. CB's father attended her medical appointments and had frequent visits with CB through the Children's Wisconsin Family Support program. CB's father was strongly engaged with visitation and family support services and describes his family support worker as professional, pleasant and nonjudgmental. Outside of visits, the Gliddens sent updates to CB's father via text, video and phone calls. The Gliddens received permission for CB to attend their church and CB's father requested CB become baptized at the Gliddens' church. He asked Chad and Jean to become CB's godparents at the baptism.

As in most cases, the primary goal for CB was reunification with her father. CB's father met all of his goals and was reunited with CB after her five-month stay in the Gliddens' home. CB's father describes the Gliddens as amazing foster parents who did not judge him, were always willing to go the extra mile to help him stay connected to his daughter, and who partnered with him and made it as easy as possible for him to get his child back.

While it was difficult for Jean and Chad to say goodbye to CB, they are thankful for the positive relationship they continue to maintain with CB's father. They remain a part of CB's life and are respite providers for CB twice a month. Jean and Chad state: "It is always good to see how happy CB is when Dad picks her up after a weekend of respite in our home." And CB is fortunate to have another loving home away from home.

Child Advocacy and Protection Program

Children's Wisconsin is a national leader in child abuse pediatrics and child advocacy. The Child Advocacy and Protection Services (CAPS) program is the nation's largest hospital-based network of Child Advocacy Centers. All seven centers are accredited by the National Children's Alliance.

Our CAPS program is a team of medical professionals, forensics interviewers, advocate case managers and therapists who work together to ensure that the evaluation of an abuse allegation minimizes the re-traumatization of a child. We collaborate closely with law enforcement and Child Protective Services to ensure, as often as possible, that a child only has to be seen and tell their story once. Our advocacy work helps to start the healing process for children and their caregivers.

The CAPS program partnered with the Child and Family Counseling program to fully or partially fund 11 therapists across our program through Victims of Crime Act (VOCA) grant funding. Timely therapy services foster healing by minimizing potential trauma to children. Without effective therapeutic intervention, many traumatized children will suffer ongoing or long-term adverse social, emotional, developmental and health outcomes that may affect them throughout their lifetimes.

By 2019 the CAPS program received VOCA funding to support 11 advocate case managers across our program. Advocacy and support for caregivers and youth is essential to reducing trauma and improving outcomes for children and family members.



The four siblings who came to the Wausau Child Advocacy Center had painful accounts of sexual and physical abuse, and it was critical to capture their experiences in the right way. Children's forensic interviewers are experts at conducting these fact-finding sessions in a developmentally and culturally sensitive, legally sound and neutral manner to minimize trauma, reduce re-victimization and improve prosecution outcomes.

Forensic interview recordings are an extremely valuable tool for the investigation and prosecution of abuse and neglect cases. Because the siblings had endured significant trauma, not only from the abuse itself but also from sharing their personal statements during the forensic interview, the prosecutor did not want to put the siblings through a criminal trial. Instead, the judge and the prosecutor used the victim statements and information gathered during the detailed forensic interviews to provide support and justification for sentencing of the maltreater. Additionally, the judge noted that the quality of a thorough interview of every child with the same forensic interviewer left out any suspicion that these children could have formed their statements together and "made it up."

Child model in photo of forensic interview room with Alicia Resch, Children's Wisconsin forensic interviewer.





Institute for Child and Family Well-Being

2019 Annual Report

The Institute for Child and Family Well-Being (ICFW) is a unique community-university partnership between Children's Wisconsin and the Helen Bader School of Social Welfare at the University of Wisconsin-Milwaukee. Its mission is to improve the lives of children and families with complex challenges by implementing effective programs, conducting cutting-edge research, engaging communities and promoting systems change.

The Trauma and Recovery Project

The Trauma and Recovery Project is a five-year initiative that is increasing access to evidence-based mental health services in southeast Wisconsin by leveraging partnerships between the IFCW and Wisconsin's Department of Children and Families, Office of Children's Mental Health and Professional Development System. Funded by the Substance Abuse and Mental Health Services Administration, the project has three aims:

- Expand the number of clinicians who are trained to deliver trauma-responsive treatments such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Parent-Child Interaction Therapy (PCIT)
- Improve the identification and treatment of trauma and mental health symptoms by routinely implementing validated screening and assessment tools
- Increase public and professional awareness of trauma and mental health services in the region by distributing information through multidisciplinary trainings, conference presentations, fact sheets and issue briefs

Progress toward the first three aims will help to fulfill the project's ultimate goal of helping trauma-exposed children and families access evidence-based mental health services. In the past year alone, clinicians at the Center of Excellence have served nearly 400 children, and we expect to provide TF-CBT or PCIT to more than 2,000 children by the end of the five-year project. In the first two years, more than 100 clinicians in Milwaukee and Racine have already received training in these treatment approaches.

"We were able to build a stronger, positive relationship with our child. We also learned specific strategies and techniques to use to help our little one be more confident and secure. In addition, we learned specific and focused language to use with our little friend in order to decrease confusion and better describe behavior expectations.

Our experience was fantastic. We can't say enough positive things about Meghan, our therapist. I truly believe any therapy or learning opportunity is only as strong as the person leading it. Meghan's direct, precise, positive feedback provided us with the opportunity to grow and parent our little friend more effectively."

Carrie Sgarlata, foster parent, on her experience with Parent-Child Interaction Therapy



Moving from policy to system change...

A nurturing environment is central to supporting the well-being of children, families and communities. In 2019, the ICFW actively collaborated with a wide range of systems to support changes that promote healing and resilience through community engagement, research and evidence-informed approaches. To better reflect both our ongoing efforts of the ICFW and the central role systems play in supporting well-being, the ICFW updated our mission statement to reflect our commitment to translational efforts in research, practice and systems change. We hope the updated mission statement better reflects the ICFW's work and highlights the need to advance change at a systems level to address complex, deeply rooted challenges that communities face.

Systems change only occurs though collaboration. In 2019 the ICFW:

- Started a project with Children's Home and Society of America and the Center for the Developing Child at Harvard through their Frontiers of Innovation program focused on enhancing executive functioning skills
- Co-led a learning community on evaluation and measurement with Children's Home and Society of America
- Had active leadership roles within Scaling Wellness in Milwaukee's policy, education and awareness, and research and best practice action teams
- Collaborated with the **Department for Children and Families** on supporting recently trained clinicians in TF-CBT
- Worked with the Office of Children's Mental Health on bringing innovative approaches to systems change efforts and the inclusion of people with lived/living experiences

A central ICFW strategy is to share research, insights and how they might contribute to systems change. In 2019 our team:

- Published nine articles in peer-reviewed journals and developed two ICFW issue briefs
- Delivered 23 presentations to more than 1,400 professionals for internal, local and national audiences
- Enhanced our focus on communicating insights and ideas through social media and the re-launching our quarterly newsletter

Sincerely,



Gabriel McGaughey, MSSW Co-director gmcgaughey@chw.org



Josh Mersky, PhD Co-director mersky@uwm.edu



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