



*Meeting Notice*

**Board of Commission Meeting**

**Thursday February 21, 2019**

**Social Development Commission  
1730 W. North Avenue – Board Room**

**Milwaukee, WI 53205**

**5:30pm**

**If you are unable to attend this meeting, please call Abra Fortson @ 414-906-2720.**

\*NOTICE is hereby given that the Commission may convene in closed session to consider item (s) above pursuant to Section 19.85 (1) (b), (c), (e), (f), and (g) Wisconsin statutes, and may reconvene in open session to take action on items discussed.



**Board of Commission Meeting**  
**February 21, 2019 – 5:30pm**  
**SDC 1730 W. North Avenue Board Room**  
**Milwaukee, WI 53205**

Agenda

- |   |        |                         |
|---|--------|-------------------------|
| 1. Call to Order  |        | Board Chair, S. Findley |
| 2. Roll Call  |        |                         |
| 3. Compliance with the Open Meetings Law                                |        |                         |
| 4. Public Comments  |        |                         |
| 5. Adoption of the February 21, 2019 Agenda                             |        | Action                  |
| 6. Adoption of the February 21, 2019 <b>Consent Agenda</b>              |        | Action                  |
| 7. Adoption of the Board of Commission January 17, 2019 meeting minutes |        | Action                  |
| 8. SDC Chairperson Report   |        | Action                  |
| 9. SDC CEO Report   |        | Action                  |
| 10. SD Foundation Report  | Action |                         |
| 11. SD Properties Report  | Action |                         |
| 12. Financial Update  | Inform | ation                   |
| <b>13. Committee Reports</b>  |        |                         |
| <b>A.</b> Executive Committee   | Action |                         |
| <b>B.</b> Program Planning Public Policy                                |        |                         |
| SDC Briefing Papers:  |        |                         |
| BP2392  |        | BP2395                  |
| <hr style="width: 20%; margin-left: 0;"/>                               |        |                         |
| BP2393  |        | BP2396                  |
| BP2394  |        |                         |

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<b>SDC Information Only</b>	Information
<ul style="list-style-type: none"> <li>• BP2397</li> <li>• BP2398</li> </ul>	
<b>SD Foundation Briefing Paper</b>	Information
<ul style="list-style-type: none"> <li>• None</li> </ul>	
<b>SD Foundation Briefing Paper Information Only</b>	Information
<ul style="list-style-type: none"> <li>• BP2399</li> <li>• BP2400</li> </ul>	
<b>14. Legal Report</b>	Action
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<b>15. New Business</b>	Information Action
<b>16. Old Business</b>	Action
<b>17. Adjourn</b>	Action

# Announcements

# Consent Agenda

*(Note: Board members may request the removal of items from the consent agenda; the item will then be placed on the regular agenda for discussion and action by the Board of Commission.)*

## **SDC Board of Commissioners Meeting January 17, 2019**

- **Call to order by Board Chair Stephanie Findley 5:43 pm**
- **Roll Call** confirmed quorum

### **Commissioners Present:**

Chair Findley, Treasurer Daniel Gomez, Member-at-large Alma Ramirez, Donna Brown-Martin, Terese Caro, Elmer Moore Jr. Nikki Purvis, Dr. Regina Smith, Sara Van Winkle, Lelah Huntley, George Matthews, Craig Sanders

### **Commissioners Excused:**

Vincent Bobot, ViAnna Jordan, Dr. Gary Williams

### **Commissioners Absent:**

None

Legal Counsel, Attorney James Hall

### **Staff Present:**

CEO George Hinton, HR Pam Johnson, Finance Patrick Kirsenlohr, Quality Assurance Manager Ofelia Mondragon, Planning Barbara McKillop.

- **Compliance with Open Meetings Law:** Confirmed by Barbara McKillop
- **Public Comments** None
- **Adoption of the January 17, 2019 Agenda**
  - Motion by Commissioner Smith
  - 2<sup>nd</sup> by Commissioner Matthews
  - Motion Carried
- **Adoption of the January 17, 2019 Consent Agenda**
  - Motion by Commissioner Smith
  - 2<sup>nd</sup> by Commissioner Matthews
  - Motion Carried
- **Adoption of the Board of Commission December 18 meeting minutes**
  - Motion by Commissioner Matthews
  - 2<sup>nd</sup> by Commissioner Ramirez
  - Motion Carried
- **SDC Chair Report**
  - Reminder to Commissioners to attend Strategic Planning Retreat at the Boerner Botanical Gardens.
  - City of Milwaukee Common Council approved SDC By-law changes

- Milwaukee County Judicial Committee will also review and move on request. Commissioner Brown-Martin and George Hinton will attend meeting to respond to questions.
  - Request to pay Attorney Hall an equivalent of 5 hours of consultant time to attend Strategic Planning Retreat. Motion by Commission Holley, 2<sup>nd</sup> by Commissioner Cara. Motion carried.
- **CEO Report**
    - Mr. Hinton was invited to speak at the National Christian Foundation on January 29. Important development of partnership with the NCF to support SDC as it develops its strategic goals.
    - SDC is waiting for contract with the City of Milwaukee to operate the Lead (Pb) program.
    - SDC is also waiting for contract with the City to oversee the NSP area 18.
- **SD Foundation update:** No Representative present
- **SD Properties:** None
- **Financial Report**
    - SDC is on-track with 2018 funds. Finance Director, Patrick Kirslenlohr shared financial statements from Jan-September 2018.
    - SDC debt payment schedule is on-track
    - SD Properties payments are on schedule
    - Commissioner Findley asked what the “other” category referred to: Mr. Kirslenlohr responded that these are the funds that are transferred from SD Foundation to SDC
    - SDC upgraded a new payroll system. This should help with tracking performance measures.
    - SDC also upgraded its Raiser’s Edge system to Raiser’s Edge NXT. LaToya Jones, Foundation Manager is currently attending training,
- **Committee Reports**
    - **Program Planning and Public Policy:** No Quorum
      - Quality Assurance Manager, Ofelia Mondragon presented a 2019 timeline for meeting reports from program managers. Timeline includes ROMA training which will be required of Board Commissioners.
      - President Findley asked that Commissioners have access to Customer Satisfaction and Risk Assessments at the Strategic Planning retreat.
      - Goal to reach \$1,000,000 of new funding was met for 2018. Barbara McKillop will forward a summary of new funding which includes grants, sponsorships, and other contributions.
- **Legal Report**
    - Proposed By-Laws. Commissioners will vote to amend after it has passed as an ordinance by the Milwaukee County Committee.

- Change in the voting process for new Commissioners will include town-hall type meetings instead of polling sites in each district. Instead, meetings will allow an opportunity for candidates to introduce themselves and respond to questions. Voting would take place at the end of the meeting. Attorney Hall would like to incorporate more staggered terms.
- **Other**
  - Commissioner Findley cited attendance at board and committee meetings as an issue. Absence and lack of full quorums at committee meetings prevents the Commissioners from governing the agency.
  - Attendance issues will be discussed further at the Strategic Planning retreat.
  - Requested an opportunity to review and update the Conflict of Interest Forms.

**Adjourn:** Commissioner Findley 6:25pm. A motion was made by Commissioner Smith, 2<sup>nd</sup> by Commissioner Matthews. The motion carried.

Meeting minutes respectfully submitted by:

Barbara McKillop





**Board of Commissioners Meeting  
Chairperson's Report  
Stephanie D. Findley  
February 21, 2019**



**Board of Commissioners Meeting  
Chief Executive Officer Report  
George P. Hinton  
February 21, 2019**

# Wisconsin Community Action Program Association



## WISCAP 2019-2020 Legislative Agenda

*WISCAP is a statewide association of Wisconsin's 16 Community Action Agencies and two single purpose agencies working to fight poverty in Wisconsin. WISCAP and its members are committed to creating economic opportunity and supporting community-based solutions to poverty. As a leader in efforts to address poverty in Wisconsin, we keenly understand the need for policies that enable economic equality and that provide pathways for the Community Action Network to address needs of Wisconsinites with low income. The following set of policies represent WISCAP's- in partnership with other stakeholders- priorities for the coming legislative session.*

### Comprehensive Measures to Fight Poverty

**Introduction and Passage of an Omnibus Anti-Poverty Bill.** WISCAP will work with members of the Wisconsin State Senate and Assembly to introduce a legislative package designed to provide transformational investments that reduce poverty and fundamentally improve people's economic circumstances. This bill will further the goal of addressing the systemic barriers to achieving economic stability by providing housing, health, job training, and income supports.

**Wisconsin CSBG Supplement.** WISCAP will work with members of the Wisconsin State Senate and Assembly for the passage of legislation to create a state supplement to the Community Services Block Grant (CSBG) program.

**Community Services Block Grant Act Reauthorization Act.** WISCAP will work with our national partners at the Community Action Partnership and the National Community Action Foundation to ensure passage of federal CSBG reauthorization.

### Access to Housing and Shelter

**Increased funding to Department of Administration Critical Assistance Program (DOA).** WISCAP calls for an increase in this emergency rent/eviction prevention fund from \$280,000 to \$560,000.

**Increased funding to Department of Administration State Shelter Subsidy Grant Program (SSGP)** WISCAP calls for an increase in this emergency shelter grant from \$1.13 million to \$2 million.

**Interagency Council on Homelessness (ICH).** As a member of the Implementation Task Force, WISCAP will represent the interest of its member agencies by participating in the state ICH, advocating for comprehensive solutions to homelessness and all populations which experience it.

**Passage of the Federal Homeless Children and Youth Act (HCYA).** WISCAP supports this bi-partisan legislation to align HUD homeless assistance eligibility criteria with criteria used by most other federal agencies and programs.

# Wisconsin Community Action Program Association



## Addressing Barriers to Employment

**Expansion of the Job and Business Development Program (DWD).** WISCAP calls for an increased appropriation from \$200,600 to a minimum of \$500,000.

**Expansion of Skills Enhancement Program (DCF)** WISCAP calls for an increased appropriation from \$250,00 to a minimum of \$500,000.

**Expand the availability and affordability of transportation,** including greater support to car purchase programs like Jump Start and Work-n-Wheels.

**Expand the availability and affordability of quality child care.** WISCAP also supports efforts to increase the child care supplement for families with low income.

## Access to Health Supports

**Community Action Opioid Response Act.** WISCAP will work with our national partners at the Community Action Partnership and the National Community Action Foundation to ensure passage of federal legislation to better coordinate community action agency resources and opioid response services.

**WISCAP supports efforts to expand primary care availability and promote the expansion of mental health treatment** availability and accessibility, substance abuse treatment availability and accessibility, and suicide prevention efforts and technical assistance for farmers who are struggling.

*For more information, contact Brad Paul, [bpaul@wiscap.org](mailto:bpaul@wiscap.org), (608) 244-0466*

**SD Foundation President**  
**Al Smith**  
**February 21, 2019**



Social Development  
**FOUNDATION**

*SDC Board of Commissions Meeting*

*SD Properties Report*

*Vincent Bobot*

*February 21, 2019*



**Social Development Commission**

*Pathways from poverty to success*

# SDC Budget

# Committee Reports





**February 2019 Briefing Papers for Action/Information**

BP	Funder	Services/Program	Request	Refunding/New
<b>Action Items</b>				
BP2392	Wisconsin Department of Justice	Alcohol and Other Substance Abuse (AODA)	\$281,600	Refunding
BP2393	City of Milwaukee- Community Development Grant Administration	NSP 18	\$100,000	New
BP2394	Employ Milwaukee	ChefStart	\$75,000	New
BP2395	JAMS Foundation	Youth Services	\$40,000	New
BP2396	Wisconsin Apprenticeship Advisory Committee	ChefStart- Pre-Apprenticeship certification	\$0	New
<b>Total</b>			<b>\$496,600.00</b>	
<b>Information only</b>				
BP2397	Milwaukee County	Families Moving Forward	\$12,000	Refunding
BP2398	ECO	Facilities	\$3,480	New
<b>Total</b>			<b>\$15,480.00</b>	

**Requests through the Social Development Foundation**

BP	Funder	Services/Program	Request	Refunding/ New
<b>Action Items</b>				
<b>Total</b>			<b>0</b>	
<b>Information Only</b>				
BP2399	Dollar General	Education –Youth Build	\$15,000	New
BP2400	Home Depot	Residential Services/WX	\$5,000	New
<b>Total</b>			<b>\$20,000.00</b>	

2019 Grants Status- To date

Agent	Total # of requests	Total \$ requested	Total # awarded	*Total amount awarded	*New awarded	Total pending	Amount pending	Total denied	Amount denied
Agency-wide	11	\$562,800	1	\$3,480	1	9	\$559,320	0	0
SDF only	2	\$20,000	0	0	0	2	\$20,000	0	0

# There's a Dental Access Crisis in Wisconsin: Dental Therapists Can Help



## What's the Problem? Too Many Lack Dental Care

- **Rural residents:** 1.2 million people live in areas –mostly rural--with dentist shortages. The federal government reports shortages in 64 of 72 counties.<sup>i</sup>
- **Medicaid Enrollees:** More than 1 million Wisconsinites get dental care through Medicaid but only 37% of the state's dentists accept Medicaid.<sup>ii</sup> Wisconsin ranks among the bottom of all states in Medicaid children who saw a dentist in 2017 – only 43%.<sup>iii</sup>
- **Elderly:** Nearly half of all nursing home residents have untreated decay.<sup>iv</sup>



## What Happens When People Can't Access Needed Care?

- Pain, low school achievement, poor work performance, late detection of oral cancers, tooth loss, lowered self-esteem and poor job prospects.
- Untreated dental decay can lead to abscesses, blood infections, and even death.
- Last-resort care at emergency rooms, costing Wisconsin tens of millions annually.<sup>v</sup>

## What's a Dental Therapist?

- Another member of the dental team, similar to a physician's assistant in medicine, always working under a dentist's supervision.
- Provides basic care that includes preparing and filling cavities and performing simple extractions; trained to provide about ¼ of the procedures a dentist can perform.

## How Can Dental Therapists Help with the Access Crisis?

- **Fix Untreated Decay:** Hundreds of thousands of Wisconsinites have untreated decay, yet under state law, only dentists can prepare and fill cavities. Dental therapists will dramatically increase the number of trained professionals able to deliver basic dental care under a dentist's supervision.
- **Reach More Communities:** Rural clinics, nursing homes, schools, programs for people with disabilities – DTs could go where dentists are scarce and in more convenient locations for patients. DTs earn significantly less than dentists so it's more affordable for practices to send them to underserved areas.
- **Treat More Medicaid Patients:** Dentists report that low payment rates keep them from accepting Medicaid. DTs' lower wages make it less expensive for practices to treat patients, and more feasible for dentists to accept Medicaid.



## How will dental therapists be trained?

- By programs that must meet national standards developed by the Commission on Dental Accreditation (CODA) – the accrediting body housed within the American Dental Association – recognized as setting the nationally accepted level of safety and quality for all dental education programs.

## How will dental therapists be supervised?

- Dental therapists will not work independently; the dentist remains the head of the dental team. DTs will be employed by practices and supervised by dentists.
- DTs could practice without a dentist present if their supervising dentist allows, seeking guidance, when necessary, and sharing patient information via telehealth technology.
- Under general supervision, DTs could be sent to underserved locations or extend office hours to weekends and evenings without the added cost of having a dentist present.



## Minnesota's Track Record: Just the Facts

**Critics claim** that Minnesota DTs have not increased access, **but research shows** that where practices employ DTs...

- Underserved patients have reduced travel and wait times for care.
- Private practices are serving more Medicaid patients AND turning a profit.
- Public clinics are using labor cost savings to serve more patients.

**Critics claim** that DTs are not serving rural areas **but data confirm** that...

- DTs' rural presence is in proportion to the state population: 45% of Minnesotans work outside of the twin cities area, where 41% of DTs are employed.<sup>vi</sup>
- The Twin Cities area also has dentist shortage areas. DTs are treating many of the low-income underserved in these areas.

**Critics claim** that raising Medicaid payment rates alone would solve Wisconsin's access crisis, **but common sense recognizes** that ...

- Raising Medicaid rates to perpetuate a system where only dentists – the highest paid members of the dental team – provide basic, routine care is **NOT an efficient use of tax dollars**.
- Labor costs are the highest overhead expense for most dental practices. Using competent, lower-cost providers to deliver routine restorative care can stretch tax dollars to serve more Medicaid patients.

<sup>i</sup> U.S. Department of Health and Human Services, Data as September 30, 2018.

[https://ersrs.hrsa.gov/ReportServer/HGDW\\_Reports/BCD\\_HPSA/BCD\\_HPSA\\_SCR50\\_Qtr\\_Smry\\_HTML&rc:Toolbar=false](https://ersrs.hrsa.gov/ReportServer/HGDW_Reports/BCD_HPSA/BCD_HPSA_SCR50_Qtr_Smry_HTML&rc:Toolbar=false).

<sup>ii</sup> Centers for Medicare and Medicaid Services, 2018 Eligibility Determinations and Enrollment Data. <https://data.medicare.gov/Enrollment/2018-08-Updated-applications-eligibility-determina/npsp-q5vz>. Also Wisconsin Department of Health Services, Medicaid Plan for Monitoring Access to Care, 9/30/2016, Available at <https://www.dhs.wisconsin.gov/publications/p01565.pdf>

<sup>iii</sup> U.S. DHHS, CMS, Annual EPSDT Participation Report, Fiscal Year: 2017, <https://www.medicare.gov/medicaid/benefits/epsdt/index.html>

<sup>iv</sup> Wisconsin Department of Health Services, "Wisconsin's Healthy Smiles Survey: The Oral Health of Older Adults(2016 survey), available at <https://www.dhs.wisconsin.gov/publications/p01121.pdf>

<sup>v</sup> "Summary of Emergency Room Department Data Evaluating the Use of the ER for Preventable Dental Care Based on the Primary Diagnosis, 2016" a data sheet provided by the Wisconsin Hospital Association to the Pew Charitable Trusts on December 14, 2017.

<sup>vi</sup> Minnesota Department of Health/Minnesota Board of Dentistry, "Dental Therapy in Minnesota: Issue Brief," 2018.



7

**Wisconsin Senate Committee on Public Benefits, Licensing and State-Federal Relations**  
**Senator Chris Kepenga, Chair**  
**Wisconsin Assembly Committee on Health**  
**Representative Joe Sanfelippo, Chair**

**Support for SB 784 / AB 945 – Licensure of Dental Therapists**



**Ascension**



Leading experts agree and data shows that nationally Wisconsin ranks last in access to dental care. The connection between oral health and overall health is well documented and advocates agree SB 784 / AB 945 would directly impact access to care in our state. There are numerous documented cases across the country of patients dying, including 12-year-old Diamonte Driver in Maryland, because of preventable dental infections going untreated, and spreading to their brains or other organs. We do not want to see this in Wisconsin

The authorization of dental therapists in Wisconsin is an important step to improve access to dental care. There is no one silver bullet that will fix this problem. However, our neighbors in Minnesota have allowed dental therapists to practice and have well documented the success this change has made.

There are several important aspects of this legislation that should be understood.

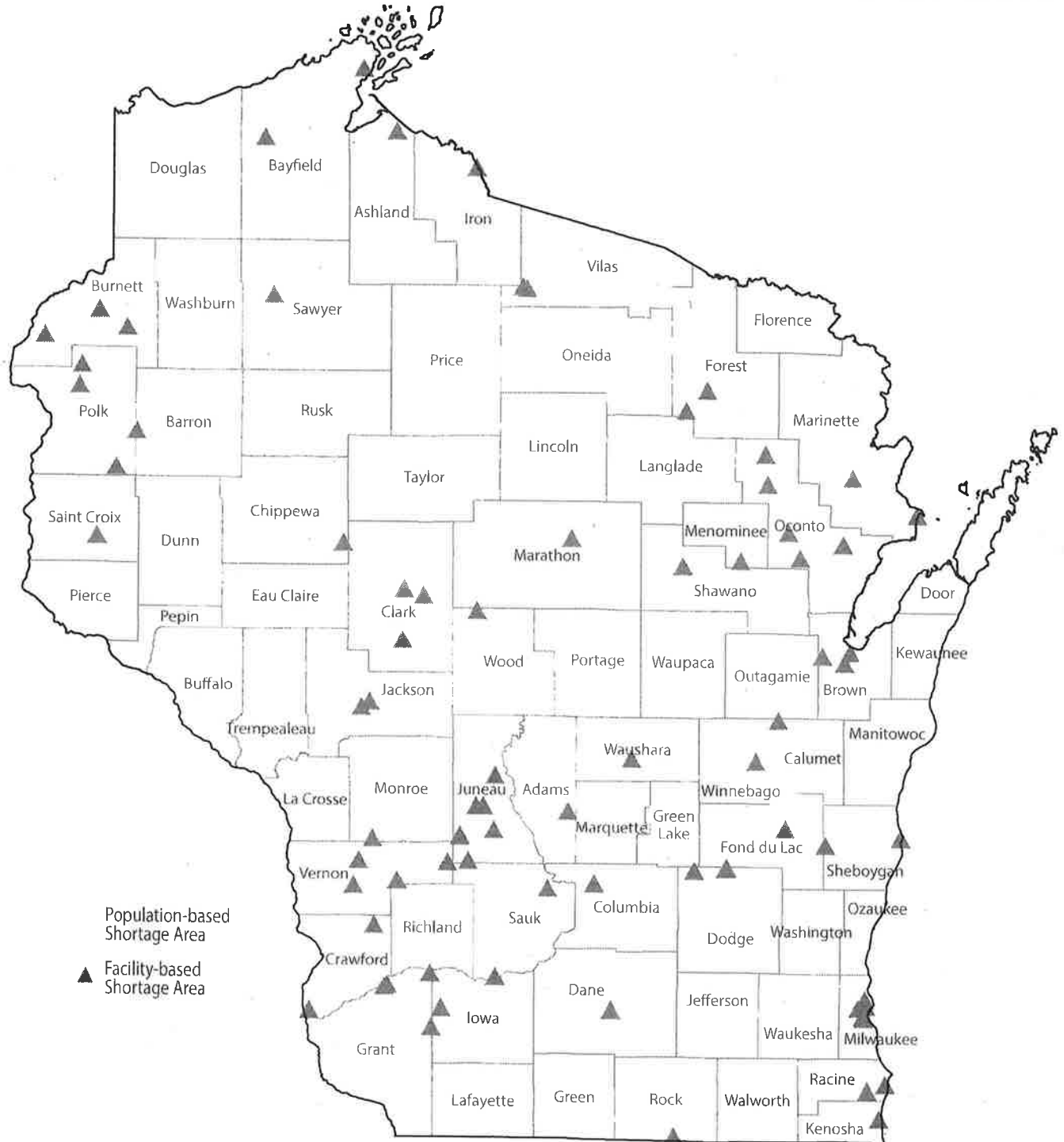
1) Dental therapists are intended to be a member of the dental team and not work independent of a dentist. SB 784 / AB 945 requires a licensed dental therapist to enter into a collaborative management agreement with a licensed dentist. This allows the therapist and dentist to collaborate on treatment planning and the provision of care. Therapists may work under general supervision which would allow a therapist to provide care when the dentist is not physically present. However, the care would all be authorized by the dentist with whom the collaborative management agreement is with. This model is working well in Minnesota with nearly 80 licensed therapists practicing across the state since the first dental therapist graduates in 2011 became licensed.

2) Dental therapists are well trained and educated. The Council on Dental Accreditation (CODA) adopted standards for dental therapy education in 2016. CODA is the same body that accredits dental and dental hygiene schools across the country. CODA ensures dental therapy training programs educate their graduates to meet a level of competency in the services which they will be providing. The University Of Minnesota School Of Dentistry not only supports dental therapists in their state but trains them right alongside future dentists and dental hygienists.

3) Wisconsin currently has 1.5 million residents who live in dental shortage areas. In 2016, 50 percent of dental therapists worked in the populous Twin Cities area, a decrease from 73 percent in 2013. Further, dental therapists are distributed more closely to the Minnesota population than dentists; 63 percent of dentists (compared to 50 percent of dental therapists) are in the Twin Cities.

4) Dental therapists, similar to a physician assistant on a medical team, provide cost-effective preventive and routine restorative care. Dentists in Minnesota who have hired dental therapists are seeing more patients and increased revenue. A 2014 report released by the Minnesota Board of Dentistry and Department of Health shared in addition to more patients

# Health Professional Shortage Areas *Dental Health Care*



To determine if a specific location has a HPSA designation,  
visit [HPSA Find](#).

# Legal Counsel

# New Business

# Old Business