

Scott Walker
Governor

Gary H. Hamblin
Secretary



State of Wisconsin
Department of Corrections

Division of Juvenile Corrections
3099 E. Washington Avenue
Post Office Box 8930
Madison, WI 53708-8930
Telephone (608) 240-5900
Fax (608) 240-3370

Margaret C. Carpenter
Administrator

ADMINISTRATOR'S MEMO TO COUNTIES

MEMO # 11-10

DATE: September 16, 2011
TO: County Departments of Human/Social Services Directors
FROM: Margaret C. Carpenter, Administrator
SUBJECT: Community Intervention Program SFY 2011 Evaluations

This memo is to notify you of the requirement to submit your county's evaluation of SFY 2011 funding received under the Community Intervention Program. The completed evaluation should cover services delivered and clients participating between July 1, 2010 and June 30, 2011. The evaluation must clearly state the extent to which the county's measurable objectives were met.

Reimbursement of SFY 2012 Community Intervention Program funds will be suspended for any county that does not submit a complete evaluation according to the Division's criteria by the deadline, until a satisfactory evaluation is received.

The Community Intervention Program Evaluation form is attached. The completed evaluations are **due on Friday, October 21, 2011.** The required completed evaluation can be mailed to:

Michelle Buehl, Juvenile Services Specialist
Division of Juvenile Corrections
P.O. Box 8930
Madison, WI 53708

The evaluation form may be faxed to 608-240-3371. A Word file sent via e-mail is also acceptable. You may reach Mrs. Buehl at 608-240-5914 or by e-mail at michelle.buehl@wisconsin.gov. Thank you.

Attachment: Community Intervention Program Evaluation Form – To Be Returned

cc: Gary Hamblin, Secretary, DOC
Chuck Cole, Deputy Secretary, DOC
Dennis Schuh, Executive Assistant, DOC
Silvia Jackson, Assistant Administrator, DOC/DJC
Fredie-Ellen Bove, Administrator, DCF/DSP

Diane Bloecker, Director, Child Welfare Licensing Section DCF/DSP
John Touhy, Director, Bureau of Regional Operations, DCF/DES
Patrick Cork, Director of Area Administration, DHS/OPIB
Greg Van Rybroek, Director, DHS/MJTC
DHS/DCF Area Administrators
DHS/DCF Human Service Area Coordinators
DOC/DJC Management staff
County Youth Aids contacts
Court-attached juvenile court intake offices

**Community Intervention Program Evaluation
SFY 11 -- July 1, 2010 to June 30, 2011**

County _____

Directions: Please complete both sides of this form, in sufficient detail to clearly identify your county's program goals and achievements. Additional pages may be attached as necessary. A county that funded several programs with its SFY 11 grant may consolidate all programs onto one evaluation form, or may use one form for each program.

- 1. State the target group(s), program component(s) and measurable objective(s) of your county's final approved plan. Identify which components were modifications to the original plan, if any.**

[Example: Serve 60 habitually truant youth through a Report Center. 90% of youth will have fewer than three days of unexcused school absence while in the program.]

- 2. For each objective, identify and quantify what was accomplished.**

[Example: 25 chronic offender youth at risk of out-of-home placement were given home detention with electronic monitoring. One had to be placed in a group home, and the rest remained in their own homes.]

3. **What problems were encountered in meeting the objectives?**
[Example: Lack of referrals from court intake initially caused slow start-up and difficulty in filling the parent-child education groups.]

4. **Were there more global/less measurable benefits that occurred as a result of implementing the program component(s)?**
[Example: The high school and the tribal human service agency developed a more explicit commitment to jointly intervene in truancy cases.]

5. **Additional comments:**
[Example: Outstanding balances that will not be spent by your county.]

Completed by:

Name (print)

Signature and date

Title (print)

Phone number