Board of Health

Regular Meeting

Revised Agenda

335 South Broadway
De Pere, WI 54115
https://www.deperewi.gov/

Monday, August 8, 2022 | **5:15 PM** | **Council Chambers and Virtual**

Pursuant to Wisconsin Statutes 19.84, Notice is hereby given to the public that a meeting of the **Board of Health** of the City of De Pere will be held on **August 8, 2022** at **5:15 PM** in the **COUNCIL CHAMBERS, 2ND FLOOR CITY HALL, 335 S. BROADWAY STREET. DE PERE.**

The public may attend the meeting either in person in the Council Chambers or electronically/telephonically. Electronic or telephonic access to the meeting is provided below:

Computer/smart phone accessing https://www.gotomeet.me/DePere

OR

You can also dial in using your phone.
United States (Toll Free): 1 866 899 4679
United States: +1 (312) 757-3117
Access Code: 154-883-285

I.

1. Call to Order
2. Roll Call
3. Public Comment on Matters not on the Agenda. Comments made during the public comment period shall pertain only to matters under the jurisdiction of the Board of Health. DPMC Sec.6-3(f)
4. Approval of May 9, 2022 Meeting Minutes
5. Consideration and possible approval of Draft of 2023 Health Department Budget
6. Consideration and possible approval of Draft of 2023 Board of Health Budget
7. Discussion of Board of Health Responsibilities
8. Update on Healthcare Infrastructure Grant regarding Mobile Unit
9. Update on Health Department Community Outreach Activities
10. Communicable Disease report from 5/1/2022 through 8/1/2022
11. Update on COVID-19 response
12. Discussion on De Pere Health Department's response to Monkeypox infection
13. Update on the Hosting of a XRF device for Pb detection for Home Remediation
14. Discussion on 2022 Addendum to the Brown County Community Health Assessment and Improvement Plan
15. Future Agenda Items
16. Adjournment

Any person wishing to attend this meeting who, because of disability, requires special accommodations should contact the Clerk's office at 339-4050 by Noon, the previous day so that arrangements can be made.

Agenda Sent To:
Alderpersons
City Administrator
Mayor
Department Heads
TV, Newspapers & Radio Stations
Kress Family Library
De Pere Chamber of Commerce

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Approval of May 9, 2022 Meeting Minutes**

ATTACHMENTS:

- 5.9.22 BOHMinutes final1 (DOCX)

BOARD OF HEALTH MEETING
CITY OF DE PERE, WISCONSIN – May 9, 2022

The Board of Health of the City of De Pere, Wisconsin met in regular session on Monday, May 9,2022 at 5:15 p.m.

1. **Call to Order**
The meeting was called to order by Dennis Hibray at 5:15 pm.

2. Roll Call
Roll call was taken, and the following members were present: Jonathon Hansen, John Quigley, Dennis Hibray, Teresa Gulyas, Dr. Steve Stroman, and Dr. Michael McHenry. Also present were Deborah Armbruster, Trista Groth and Kelly Burke. No citizen attendees were present.

3. Public Comment on Matters not on the agenda
No public comments were made.

4. Approval of February 14, 2022, Meeting Minutes
Jonathon Hansen made a motion to approve the February 14, 2022, meeting minutes. Dr. Michael McHenry seconded the motion. Upon vote, the motion passed unanimously.

5. Discussion and Possible Action to Approve the 2022 De Pere Health Department Policies and Procedures
Deborah Armbruster explained that the Policies and Procedures have been updated, but there was a problem getting them to Dr. Stroman via e-mail. Dr. Stroman will look at them within the next week and sign them. No action is needed by the Board of Health.

6. Presentation of 2021 Annual Report of the De Pere Health Department
Deborah Armbruster asked if anyone had questions regarding the Annual Report. The Board thought the report was nicely done and easy to read. There were no questions on the content. Teresa Gulyas made a motion to accept the Annual Report as written. Dr. McHenry seconded the motion. Upon a vote, the motion passed unanimously.

7. Update on Status of 2020-2025 De Pere Health Department Strategic Plan
Deborah Armbruster explained that the Board was to look at the Strategic Plan on a yearly basis to see if there are any additions or if we are going to stay with the plan as written. Deborah Armbruster explained that a representative from DHS had worked with the Health Department staff and some Board of Health members to develop the Strategic Plan. Through the process, it was determined that the need of the health department was to make people aware of us (Health Department) and the services we offer. The Health Department needed to be more visible in the community. To achieve this, the Health Department sent out brochures of our services. Shortly after the plan was finished, Covid-19 came, which made the community aware of the Health Department because of the communication we needed to do on a regular basis. This included contact tracing, communication with businesses, and sending two letters to each household in the city.

The Health Department is now trying to resume some of our normal services. We will be at the Farmers Market in De Pere to talk about our services. We will be at the Beer Gardens to provide vaccinations and educational material. We will continue to do Picnic & Play. The Primary focus of the Strategic Plan was to have the community learn about the Health Department. Deborah Armbruster feels we are doing that but is open to any suggestions from the Board of Health.
Dr. McHenry questioned the opportunities for a more involved Board of Health. Deborah Armbruster stated that the Board members are welcome to attend the WALHDAB meetings. Not many Board members attend, but it would be an opportunity to learn what the Health Departments are doing in Northeast Wisconsin. Dennis Hibray added that it is nice to interact with other board members at the WALHDAB meeting and nice to meet the presenters. Teresa Gulyas added that she felt it was a good opportunity to learn what other health departments are doing.
Jonathon Hansen asked if there were any public events that the Board of Health could be involved in. Deborah Armbruster stated that we have an open house with the Fire Department that Board members could potentially assist at. Teresa Gulyas suggested possibly helping at a vaccine clinic passing out masks, or something similar, to be a presence at the event. Dr. McHenry stated that it might be useful to have more visibility for the Board. Deborah Armbruster suggested a virtual town hall. Teresa Gulyas suggested attending the Beer Gardens.
Dennis Hibray asked about having Board of Health members attend staff meetings. Deborah Armbruster agreed that could happen but would recommend delaying until late June.

8. Community Health Updates regarding Outreach Activities and Communicable Disease Report

Deborah Armbruster asked if there were any questions on the data. Jonathon Hansen asked if there were any initiatives that came from the health equity trainings Danielle and Deborah attended. Deborah Armbruster replied that the trainings were more focused on African American, Asian, Hispanic, and Muslim communities. De Pere doesn't have a lot of these populations, but Deborah Armbruster stated that health equity is a focus of our Community Health Assessment Plan. Deborah is also on the Diversity and Inclusiveness and Equity team in De Pere.
Dennis Hibray asked if the De Pere Health Department does all the Covid outreach for the city. Deborah Armbruster answered that we send a letter to all the positive cases and phone calls to all the high-risk cases, especially our mature adults.
Teresa Gulyas mentioned that her Covid positive family member didn't get a letter. Kelly Burke will follow up on this to see what occurred.

9. Approval of MOU Between State of WI Department of Health Services and De Pere Health Department for Hosting and XRF Device for Lead Abatement Projects

Deborah Armbruster explained that when this topic was brought up at the last meeting, we were under the assumption that in order to house the XRF, we had to be in a lead abatement program. Due to the time commitment, we were not able to agree to that. The State then informed us we were able to just house the unit (without the time commitment of the lead program). It will be stored in a locked storage cabinet in our basement storage room. Trista Groth will be getting certified to use it. Trista will also be getting DOT training to drive with it in her vehicle. Trista Groth explained that when someone requests to use

it, she will need to verify that they are certified to use it and then she will need to keep track of it. Trista Groth will be the Radiation Safety Officer. Housing the device will be a minimal time commitment.
Dr. McHenry questioned the geographical location this XRF would be used in. Trista Groth responded that anyone could borrow it, but they need to pick it up and return it the same day. Therefore, they are limited by their location.
The state has 3 or 4 other XRF's that they are trying to get placed throughout the state. Deborah Armbruster and Trista Groth both agreed that they are comfortable being responsible for the XRF device.
Dr. Michael McHenry made a motion to accept the MOU to house the XRF in De Pere. John Quigley seconded the motion. Upon vote, the motion passed.

10. Update on COVID-19

Deborah Armbruster provided a synopsis of what the Health Department has been doing to date. Dr. Stroman asked if there was any data on the number of positive home tests being reported. Debbie responded that we do not have any way to track that data. Positive cases will be severely underreported due to the home testing.
Dr. Stroman asked if we were testing wastewater. Deborah Armbruster responded that wastewater is being tested in De Pere and the levels have gone up a little bit. Deborah also stated that our Covid positive percentage is now in the "high" category at 8%.
Teresa Gulyas added that people who are vaccinated and boosted with mild symptoms may not see a reason to get tested.
Deborah Armbruster reported that vaccine clinic participation has been off and on. Per Deborah, we are anticipating vaccination clinics for the little children to begin in July. We are planning to put on a lot of vaccination clinics in August.
Jonathon Hansen inquired if the Health Department has done any outreach to encourage people to report positive cases from at home testing. Debbie responded that we have, and DHS has as well. However, we have only had a few reported.
Denis Hibray asked if the Federal Government would continue to fund the vaccine. Deborah responded that she had not heard any different. If the vaccine was no longer funded, it would have a huge impact on vaccinations. Deborah Armbruster added that we do have some money we could put toward vaccine clinics.
Dr. Michael McHenry inquired on how long the Health Department would have LTE staff available. Debbie responded that we have funding for most of our staff through December of 2024.

11. Future Agenda Items

Deborah Armbruster stated that the fire department received a grant that the health department would be involved in. The grant is in line with our Stay-at-Home Assistance program. Al Matzke is presenting it to Council. It will involve home visits to stroke patients and providing them Covid information. Jonathon Hansen replied that the Board of Health would not need to approve it since it is a grant through the Fire Department being approved by the Council. If the De Pere law department feels the Board of Health needs to approve it, we can hold a special meeting for that.

12. Adjournment

Jonathon Hansen made a motion to adjourn the meeting. Dr. Michael McHenry seconded the motion. Upon vote, the motion passed. The meeting adjourned at 5:59 pm.

Respectfully Submitted,
Kelly Burke
Health Department Administrative Assistant

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Consideration and possible approval of Draft of 2023 Health Department Budget**

ATTACHMENTS:

- #1 GENERAL GOVERNMENT (PDF)
- #6 GENERAL FUND REVENUES (PDF)
- #14 Health Department (PDF)
- 2023-7 Yr Capital Projects Worksheet (PDF)

City of De Pere
2023 General Fund
Adopted Budget

EXPENDITURES

HEALTH DEPARTMENT

Account Number			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % Of Change	
			PERSONAL SERVICES							
100	54100	110	Salaries	$ 302,976	$ 320,383	$ 135,220		$ 337,938	5.48%	
100	54100	120	Hourly Wages	46,140	47,195	20,850		50,939	7.93%	
100	54100	125	Overtime Wages	0	0	0			0.00%	
100	54100	126	Seasonal Labor	105,340	0	55,465			0.00%	J Stein WRS
100	54100	150	FICA	28,654	28,120	14,502	-	29,749	5.79%	
100	54100	151	Retirement	24,805	23,893	10,103	-	26,444	10.68%	
100	54100	152	Health, Dental, DIB, Life & Wks Cmp Ins	72,959	88,075	38,967		92,917	5.50%	
100	54100	190	Training	0	0	0		0	0.00%	
			Subtotal	**580,875**	**507,665**	**275,107**	**-**	**537,987**	**5.97%**	
			CONTRACTUAL SERVICES							
100	54100	210	Telephone	1,525	1,700	1,163	1,726	1,700	0.00%	
100	54100	212	Seminars and Conferences	1,289	1,700	352	1,302	1,700	0.00%	
100	54100	215	Consulting	0	0	0	0	0	0.00%	
100	54100	218	Cell/Radio	1,114	800	561	1,000	800	0.00%	
100	54100	240	Equipment Maintenance	1,559	800	500		800	0.00%	
			Subtotal	**5,488**	**5,000**	**2,575**	**4,028**	**5,000**	**0.00%**	
			SUPPLIES AND EXPENSE							
100	54100	310	Office Supplies	1,028	2,500	467	2,500	2,500	0.00%	
100	54100	320	Memberships/Subscriptions	925	800	300	725	800	0.00%	
100	54100	324	Medical Supplies	1,671	5,000	729	5,000	5,000	0.00%	
100	54100	330	Mileage Reimbursement	0	1,800	130	1,500	1,500	-16.67%	
100	54100	331	Transportation	299	1,500	411	1,500	1,500	0.00%	
100	54100	351	MCH Grant	1,700	8,933	166	8,933	8,933	0.00%	
100	54100	354	Childhood Lead Grant	522	1,877	47	1,877	1,877	0.00%	
100	54100	355	Immunization Outreach Grant	2,818	7,458	442	7,458	7,458	0.00%	

City of De Pere
2023 General Fund
Adopted Budget

EXPENDITURES

HEALTH DEPARTMENT

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % Of Change
100	54100	358	Preparedness Grant	57,573	34,037	32,117	34,037	34,037	0.00%
100	54100	359	Prevention Grant	0	4,294	0	4,294	4,294	0.00%
100	54100	360	Communicable Disease Grant	2,222	3,600	360	3,600	3,600	0.00%
100	54100	361	Agent Program	609	0	730	-	-	0.00%
			Subtotal	**69,367**	**71,799**	**35,899**	**71,424**	**71,499**	**-0.42%**
			CAPITAL OUTLAY						
100	54100	810	Capital Equipment	0	0	0	0	27,433	100.00%
			Subtotal	**0**	**0**	**0**	**0**	**27,433**	**100.00%**
			TOTAL	**$ 655,729**	**$ 584,464**	**$ 313,581**	**$ 75,452**	**$ 641,919**	**9.83%**

City of De Pere
2023 General Fund
Adopted Budget

REVENUES

Account Number			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % of Change
			TAXES						
100	41110		General Property	$ 8,283,993	$ 8,615,156	$ 8,615,155			0.00%
100	41130		Mobile Home Fees	6,577	6,600	2,657			0.00%
100	41150		Payments in Lieu of Taxes	8,401	21,665	1,395			0.00%
100	41200		Sales and Use	208	0	0	0	0	0.00%
100	41210		Public Accommodations	7,716	9,500	4,411			0.00%
100	41220		Retained Sales Tax	120	120	60			0.00%
100	41310		From Municipal Water Utility	494,635	515,000	250,000			0.00%
100	41320		Housing Authority	31,275	32,000	33,922			0.00%
100	41800		Interest Penalties & Taxes	484	1,400	603			0.00%
100	41810		Interest Penalties Specials & Deeds	7,778	20,000	4,000			0.00%
			Subtotal	**8,841,187**	**9,221,441**	**8,912,203**	**-**	**-**	**0.00%**
			INTERGOVERNMENTAL REVENUE						
100	43220		Mass Transit Federal Aid	0	0	0	0	0	0.00%
100	43410		State Shared Revenue	1,203,185	1,205,804	0			0.00%
100	43411		State Shared Revenue - Expenditure Restraint	239,735	208,037	0			0.00%
100	43420		State Fire Insurance	100,264	97,800	96,788			0.00%
100	43430		Other State Shared Taxes - Exempt Computer Aid	77,852	77,852	0			0.00%
100	43500		State Grants	120,683	120,683	0			0.00%
100	43505		Law Enforcement	1,430	0	(300)			0.00%
100	43507		K-9 Expenses and Donations	3,510	2,500	9,898			0.00%
100	43510		Rescue EMS Act 102	0	15,000	0			0.00%
100	43520		State Aid for Police Training	0	5,120	0			0.00%
100	43530		State Aid for Connecting Highways	74,472	74,595	37,297			0.00%
100	43531		General Transportation Aids	1,315,204	1,399,991	698,057			0.00%
100	43532		Mass Transit State Aid	274,790	274,790	137,395			0.00%
100	43540		State Recycling Grants	97,975	97,975	97,691			0.00%
100	43550		ACT 102 Ambulance Grant	0	0	0	0	0	0.00%
100	43551		Health Matching Grant	78,536	60,199	16,250	60,199	60,199	0.00%
100	43552		COVID 19 Grants	344,288	100,000	93,295	254,395	167,124	67.12%
100	43590		State Misc Grants	3,821	0	0			0.00%
100	43600		Other State Payments	409,963	0	0			0.00%
100	43605		Payment in Lieu of Tax - DNR	0	0	0	0	0	0.00%
			Subtotal	**4,345,706**	**3,740,346**	**1,186,371**	**314,594**	**227,323**	**-93.92%**
			LICENSES AND PERMITS						
100	44100		Business & Occupational Licenses	0	0	0	0	0	0.00%
100	44105		Liquor and Malt Beverage Licenses	32,798	37,800	28,198			0.00%
100	44110		Operator's Licenses	10,311	32,550	17,865			0.00%

City of De Pere
2023 General Fund
Adopted Budget

REVENUES

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % of Change
100	44115		Cigarette Licenses	2,728	2,205	2,090			0.00%
100	44121		Food & Beverage Licenses	93,883	86,415	71,860	86,806	86,806	0.45%
100	44125		Cable Television Franchise License	110,364	110,000	27,486			0.00%
100	44130		Trailer Park	0	100	0			0.00%
100	44140		Other Permits and Fees	8,910	11,550	5,049			0.00%
100	44210		Dog License	3,349	3,780	4,083			0.00%
100	44300		Building Permits	318,643	367,500	208,514			0.00%
100	44301		Commercial Permit Review	8,750	10,500	2,900			0.00%
100	44303		Flood Plain/Zoning Letters	0	630	0			0.00%
100	44305		Construction	200	157	0			0.00%
100	44307		Sanitary Sewer Excavation	12,000	14,385	3,950			0.00%
100	44910		Electrical Permits	257,484	105,000	40,202			0.00%
100	44920		Plumbing Permits	40,169	47,250	21,195			0.00%
100	44925		HVAC Permits	94,651	89,250	75,733			0.00%
100	48902		Zoning Permits and Fees	2,946	4,200	810			0.00%
100	48903		CSM Reviews	27,608	15,750	9,985			0.00%
100	48905		Bid Deposits & Refunds	0	0	0	0	0	0.00%
100	48906		Excavation Permits	21,530	26,250	12,285			0.00%
			Subtotal	**1,046,324**	**965,272**	**532,205**	**86,806**	**86,806**	**-91.01%**
			FINES AND FORFEITURES						
100	45100		City Share of Fines and Forfeitures	(6,361)	0	0			0.00%
100	45110		Court Penalties and Costs	358,780	393,750	114,686			0.00%
100	45120		Crime Prevention/Policing Share	0	0	0	0	0	0.00%
100	45130		Parking Violations	57,342	35,000	20,257			0.00%
100	45190		Other Law-Ordinance Violations	0	0	0	0	0	0.00%
			Subtotal	**409,761**	**428,750**	**134,943**	**-**	**-**	**0.00%**
			PUBLIC CHARGES FOR SERVICE						
100	46100		General Government	1,984	2,100	0			0.00%
100	46101		Clerk-Passports/Solicitors	6,036	6,510	2,022			0.00%
100	46102		Clerk's Office Admin Fees	750	1,050	1,261			0.00%
100	46110		Letters of No Specials	28,315	27,300	13,020			0.00%
100	46120		License Publication Fees	320	420	1,563			0.00%
100	46204		DMV Registration	0	0	0	0	0	0.00%
100	46205		Police CVR Fees	0	0	0	0	0	0.00%
100	46206		CVR Registrations	0	0	0	0	0	0.00%
100	46207		Police Alarm Monitoring	7,525	5,250	3,850			0.00%
100	46208		Police Department Fees	539	1,050	191			0.00%
100	46210		Background Checks	279	315	330			0.00%

City of De Pere
2023 General Fund
Adopted Budget

REVENUES

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % of Change
100	46220		Police Finger Prints	204	525	144			0.00%
100	46225		Fire Hazmat	0	0	0	0	0	0.00%
100	46298		Ambulance Fees	902,451	791,590	313,990			0.00%
100	46340		Street Department Revenue	71,014	36,750	25,184			0.00%
100	46345		Garbage & Recycling Fees	0	12,600	0			0.00%
100	46350		Snow Removal Charges	6,201	6,930	6,013			0.00%
100	46360		Parking Permits	0	0	0	0	0	0.00%
100	46406		Weed & Nuisance Control	4,077	4,200	0			0.00%
100	46421		Recycling Containers	8,503	4,200	2,360			0.00%
100	46501		Public Health Revenue	1,389	525	240	250	300	-42.86%
100	46510		Weights & Measures Fees	20,995	22,050	21,481	21,661	21,600	-2.04%
100	46521		Animal Control	50	0	0	0	0	0.00%
100	46700		Recreation Programs	338,890	406,109	215,468			0.00%
100	46721		Recreation	17,000	15,750	0			0.00%
100	46722		Concessions	43,978	40,672	20,040			0.00%
100	46723		Swimming	245,659	206,115	113,361			0.00%
100	46724		Forestry	22,822	10,395	17,280			0.00%
100	46725		Community Center	47,786	39,127	33,445			0.00%
100	46727		Programs-Financial Assistance	5,804	4,200	2,661			0.00%
100	46747		Athletic Facility Fees	24,145	123,375	9,634			0.00%
100	46747	010	Daily Boat Fees	68,325	0	40,612			0.00%
100	46747	020	Season Boat Fees	31,526	0	10,828			0.00%
100	46800		Payment In Lieu of Parkland	0	0	0			0.00%
100	47306		Ambulance Fees From Townships	206,388	216,707	112,017			0.00%
100	47401		Engineering Fees	700,000	700,000	350,000			0.00%
100	48901		Copies Maps Blueprints	363	1,155	149			0.00%
100	48908		Building Permits & Voter Report (Clerk)	0	577	0			0.00%
100	48909		Sundry	0	578	300			0.00%
100	48910		Retiree Insurance Admin Fee	287	1,050	65			0.00%
			Subtotal	**2,813,604**	**2,689,175**	**1,317,509**	**21,911**	**21,900**	**-99.19%**

INTERGOVERNMENTAL CHARGES FOR SERVICE

100	47311		Crossing Guard Hours	16,995	20,000	10,318			0.00%
100	47320		Payment for Liaison Officer	283,200	291,000	154,139			0.00%
100	47402		Data Processing Charges	15,627	16,097	8,049			0.00%
100	47405		TID 5 Admin Allocation	14,265	0	0			0.00%
100	47406		TID 6/7/8/9/10 Admin Allocation	114,128	117,548	58,774			0.00%
100	47415		Equipment Rental	30,603	31,522	14,561			0.00%
100	47432		Space Rentals	52,187	49,300	18,036			0.00%
100	48208		Brown County Nutritionist		3,150	0			0.00%

City of De Pere
2023 General Fund
Adopted Budget

REVENUES

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % of Change
			Subtotal	527,006	528,617	263,877	-	-	0.00%

City of De Pere
2023 General Fund
Adopted Budget

REVENUES

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % of Change
			MISCELLANEOUS REVENUES						
100	48100		Interest On Investments	(16,109)	100,000	(279,360)			0.00%
100	48103		Notes Receivable Interest	(14,789)	0	0	0	0	0.00%
100	48113		Interest On Personal Property Taxes	0	0	0	0	0	0.00%
100	48121		Land Contract Interest	0	0	0	0	0	0.00%
100	48200		Rents & Leases	0	0	0	0	0	0.00%
100	48201		Farm Leases	6,594	5,000	1,815			0.00%
100	48202		Brown County Fairgrounds	0	0	0	0	0	0.00%
100	48203		Residental Lease	16,311	15,000	8,423			0.00%
100	48300		Property Sales	0	1,500	0			0.00%
100	48301		Refuse Garbage Equipment & Property	17,785	15,000	2,884			0.00%
100	48303		Note Receivable Principal	0	0	0	0	0	0.00%
100	48305		Real Property	0	0	0	0	0	0.00%
100	48306		Land Contract Principal	0	0	0	0	0	0.00%
100	48309		Other	0	5,000	0			0.00%
100	48500		Donations	11,704	0	0	0	0	0.00%
100	48510		Police Programs	918	0	2,005	0	0	0.00%
100	48515		Park and Rec	5,000	0	279,686	0	0	0.00%
100	48520		Fire & Rescue	0	9,189	5,500			0.00%
			Subtotal	**27,415**	**150,689**	**20,953**	**-**	**-**	**0.00%**
			OTHER FINANCING SOURCES						
100	49100		Proceeds From Long Term Notes	0	0	0	0	0	0.00%
100	49130		Installment Contracts	0	0	0	0	0	0.00%
100	49140		State Trust Fund Loans	0	0	0	0	0	0.00%
100	49200		Transfer From Special Fund	0	250,000	125,000			0.00%
100	49222		Transfer From TID #9	0	11,400	5,700			0.00%
100	49223		Transfer From TID #6-#17	0	0	0	0	0	0.00%
100	49240		Transfer From Capital Projects Fund	1,903,602	1,050,000	525,000			0.00%
100	49260		Transfer From Enterprise Fund (Water Utility)	0	0	0	0	0	0.00%
100	49261		Transfer From Enterprise Fund (Wastewater)	0	0	0	0	0	0.00%
100	49271		Transfer From Parkland Dedication Fund	0	0	0		0	0.00%
			Subtotal	**1,903,602**	**1,311,400**	**655,700**	**-**	**-**	**0.00%**
			TOTAL GENERAL FUND REVENUES	**19,914,606**	**19,035,690**	**13,023,761**	**423,311**	**336,029**	**-98.23%**
100	49300		Fund Balances Applied	**0**	**190,573**	**0**	**0**	**0**	**0.00%**
			TOTAL GENERAL FUND REVENUES	**$ 19,914,606**	**$ 19,226,263**	**$ 13,023,761**	**$ 423,311**	**$ 336,029**	**-98.25%**

Health Department

Program Full Time Equivalents: 5.0

Program Mission:

The mission of the Health Department is to protect and promote public health across the lifespan through:education, policy development and valued services.

List of Program Service(s) Descriptions:

1) *Public Health Nursing* –Promote and protect the health of populations using knowledge from nursing, social, and public health sciences. Apply nursing and public health principles to assess, develop, implement, and evaluate care plans and health programs related to health promotion, disease prevention, and health protection services for individuals, families, and the community.
2) *Public Health Sanitarian* – Provide environmental health services to ensure the health and safety of the community. Provide weights and measures inspection services as required of municipalities by state statute.

Important Outputs:

1) *Maternal child health programming/services* – Activity funded by property tax and grant funding. Maternal child health programming is *required by state statute*. Services include but are not limited to: community planning for coordination of service delivery, education to groups and individuals regarding development and health issues, linking individuals to essential community resources and gap filling services to include home visitation. Through the Community Partnership for children, visits are offered to all families at the time of their child's birth to provide early intervention health education, referral and follow-up as needed to increase healthy outcomes, promote school readiness and assure a positive trajectory along the life course. Public Health Nurse home visits are completed based on medical provider referral, self-referral or based on nursing staff evaluation of risk factors identified at the time of birth.
2) *Community Health Assessment/Improvement Planning* – Time and effort is funded by tax levy and is *required by state statute*. Together with community partners, conduct assessment of leading health data indicators, choose priorities to focus efforts on and develop evidence-based community strategies to achieve measurable outcomes.
3) *Injury prevention education/assurance: to include child passenger safety and prevention programs for the older adult* – Activities funded by grant funding and property tax. *The assurance of injury prevention programming required by state*

statute. Strengthen community infrastructure to provide a cross-section of services based on current data. For child passenger safety: an inspection and education are provided for families of children less than eight years of age to ensure child safety while transported in a motor vehicle. Benefit to the residents is to ensure the safety of individual children and prevent injuries and fatalities. The adult prevention programs are the Stay At Home Assistance to help the older adult be able to stay in their home safely and Stepping On is a falls prevention program.

4) *Childhood and Adult Immunizations* – Activity funded by grant funding, Wisconsin Immunization Program, fee for service revenue, and property tax. Childhood immunization programming is *required by state statute*. Vaccines are available at no charge for all children through 18 years of age who do not have insurance coverage for immunizations through the Wisconsin Immunization Program or who are Medicaid eligible. Vaccine can also be provided to adults depending on the type of vaccine and eligibility. If an adult is not eligible, private pay vaccine may be available. Increased vaccination of residents (children and adults) prevents the spread of vaccine preventable diseases. The health department also assures population health by monitoring vaccine compliance for children less than 24 months of age. Families are encouraged by several methods to complete the initial vaccination series. Completion of the initial vaccine series prevents the spread of vaccine preventable diseases.
5) *Communicable Disease Investigation and Follow-up* – Activity funded by property tax and grant funding. Communicable disease programming is *required by state statute*. There are over 100 diseases that are required to be reported to local health departments by statute. Various levels of investigation and follow-up are required for each of the diseases or outbreak by the local health department to prevent the spread in our community. This output also includes tuberculosis control and prevention. Local health departments are required by state statute to provide distribution of treatment for latent TB infection and follow-up for any active TB Infections to prevent the spread in the community.
6) *Public Health Preparedness* – Activity funded by grant dollars. Programs and planning are completed each year to meet the requirements of the Department of Health Services Contract. This program benefits the community by ensuring the health department's ability to respond to urgent public health matters and be a partner in the City's Emergency Management.
7) *Resident Complaint Investigation and Resolution* – Activity funded by property tax. Human health hazards investigation and resolution *required by state statute and city ordinances*. Resident concerns/issues are received and follow-up is completed in a timely manner.
8) *Weights and Measure Inspections* – Activity funded by program revenue. State statute requires municipalities to permit and inspect all businesses for compliance with weights and measures equipment ensuring consumer protection for weights and measures devices.
9) *Establishment Licensing and Inspections (Department of Health Services and Department of Agriculture and Consumer Protection)* – Activity funded by program revenue. The agent contract for the City of De Pere provides licensing and inspections for all restaurants, temporary restaurants, hotel/motels, campgrounds, swimming pools, spas, tattoo & body

piercing, school kitchens, recreational education camp establishments and temporary/permanent retail establishments. This program provides the community with establishments that are compliant with the Wisconsin state code ensuring the health and safety of those who patronize them.

10) *Rabies Control* – Activity funded by property tax. Follow-up is completed on all reported animal bites and exposures as *required by state statute and city ordinance* for the victim of the bite and the animal who bit. Benefit to the community is the prevention of rabies infection.
11) *Childhood Lead Poisoning Prevention* – Activity funded by grant funding. Blood lead levels of children are monitored and follow-up is provided to all families of children with elevated levels as *required by state statute*. Public education on lead also provided.
12) *Public Health Education* – Activity funded by property tax and grant funding. Education is provided to residents in a variety of ways including direct mailings to households, monthly articles, city-wide newsletter contributions, up-to-date website, channel 4 contributions, educational presentations in the community, press releases, media interviews and individual education.
13) *Radon Testing Program* – Activity is funded by program revenue. Kits are provided to city residents at a nominal fee to allow residents access to test kits and education.

Expected Outcomes:

1) Avert vaccine preventable disease by assuring vaccine coverage rates are maintained and/or increased in select population cohorts.
2) Conduct surveillance, investigation and institute public health control measures for all suspect, probable and confirmed cases of communicable disease within the City of De Pere.
3) Prevent illness through the assurance of establishment compliance with food safety, environmental and hygiene standards.

2023 Performance Measures:

1) Conduct personalized reminder/recall activities for children that are behind schedule monthly provide to achieve an 80% city-wide immunization rate of 4 DtaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 4 Pneumococcal and 1 varicella for De Pere children turning 24 months. Increased efforts are and will continue to be made in order to increase our city's immunization rates.
2) Health Department nursing staff will initiate the investigation of 100% of suspect, probable and confirmed cases of illness and disease within 72 hours in accordance with state statute.

3) Conduct education and follow-up to assure that food establishments are compliant with the state/local laws.
   a. 100% of licensed establishments will be inspected at least once annually as required by the DATCP Agent Contract. Due to the unforeseen pandemic which began at the beginning of 2020, inspections were halted per the authorization of DATCAP. De Pere Health Department has been in close communication with our licensed establishments both by email and in person. Inspection efforts resumed in early 2021 however due to the back log of establishment inspections we are working on completing 100% of the inspections by end of fiscal year June 30, 2022.
   b. Re-inspections will be conducted as necessary to verify compliance.
   c. Establishment complaint investigation will be initiated within 72 hours of receipt.

2022 Performance Measurement Data (July 2021 – June 2022):

1) Conduct personalized reminder/recall activities for children that are behind schedule monthly provide to achieve an 80% city-wide immunization rate of 4 DtaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B and 1 varicella for De Pere children turning 24 months.
   a. Result: The immunization rate for this age group is at **82**% by 24 months of age. This increased rate is likely due to children receiving routine medical care after two years of the pandemic when children did not receive routine medical care. Also the health department has made significant efforts through a campaign to stress the need for childhood immunizations.
2) Health Department nursing staff will initiate the investigation of 100% of reported suspect, probable and confirmed cases of illness and disease within 72 hours in accordance with state statute.
   a. Result: Health department staff investigated all disease reports within 72 hours including our COVID-19 cases.
3) Conduct education and follow-up to assure 95% of the establishment's critical violations identified are corrected within the stated timeframe.
   a. Result: Investigations for establishment complaints were initiated within 72 hours.
   b. Result: All establishments were inspected within the fiscal year.

Significant Program Achievements:

This past budget year in many ways was a continuation of pandemic work started in 2020. 2021 saw appropriate and timely shifts in mitigation efforts as the pandemic continued to morph. COVID-19 vaccines were made available at the start of 2021 and planning for clinics began in December 2020 to make sure we were ready to give vaccine at its earliest availability. The vaccination clinics initially were hosted at the De Pere Fire Department then to the De Pere Community Center where the majority of clinics were held. There were several "pop-up" clinics also to meet the people where they are at for equitable access for all. De Pere High School, St.

Anne's church, De Pere farmers markets, the Beer Gardens and a few businesses were used as vaccination sites and the response was very positive. In December 2021 we celebrated having our **100th** COVID vaccination clinic. Contact tracing was accomplished through the work of our limited term employees primarily. The health department continued to be a significant resource for our community members and for our businesses, long-term care and assisted care facilities and for our schools. We made great efforts to ensure our community had access to the right information at the right time.

Our "regular" programming continued to be put on hold during 2021 because of COVID-19 response efforts. Therefore we utilized social, digital, news, and print media to educate our community not only for COVID mitigation but on various other topics i.e. lead toxicity, injury prevention, immunizations, family preparedness, health promotion, and wellness topics.

Our commitments to our committees and coalitions continued as much as possible. The Communicable Disease Surveillance Committee for Brown County, the Breastfeeding Coalition, Safe Kids Initiative, the Coalition for Suicide Prevention, the Brown County Falls Prevention Committee, Alcohol and Drug Coalition for Change, Lead Coalition, Northeast WI Immunization Coalition we remain active in just to name a few.

We continue to partner with the Medical College of WI and St. Norbert College on various projects as well as mentoring their students to public health. We continue to mentor nursing students from the various institutions of higher education.

The Public Health Emergency Preparedness coordination for the City of De Pere led by the De Pere Health Department has been an important partner in conjunction with Emergency Management to keep our community safe and healthy. The COVID-19 response has proven what vital role preparedness has in a crisis event. We continue to be a board member of the Northeast WI Healthcare Emergency Readiness Coalition (NEW HERC) and a board member of the Regional Northeast WI Regional Trauma Advisory Council (RTAC).

Our environmental sanitarian continues to work diligently to assure that rules and regulations are followed while being very accessible to business owners to assist with questions and/or concerns that may arise throughout the license year. The health inspector is also involved in the monitoring of all special events being held within the city.

Existing Program Standards Including Importance to Community:

The health department's 10 essential services are the model program standards set forth by the U.S. Department of Health and Human Services and Centers for Disease Control and Prevention (CDC) for local public health departments. These essential services protect and promote the health of the community thus creating a healthier place to live, work and play. The standards are outlined below:

1) Monitor health status to identify and solve community health problems (i.e. Community Health Improvement Plan, maintain, advocate for and utilize vaccine and disease registries).
    a. Community Importance
        i. Allows for a common set of measures for the community to prioritize the health issues that will be addresses through strategic planning and action, to allocate and align resources and to monitor population-based health status improvement over time.
2) Diagnose and investigate health problems and health hazards in the community (i.e. investigations of disease outbreaks, coordinate activities for fee exempt Wisconsin State Lab of Hygiene testing in accordance with standing orders and state recommendations).
    a. Community Importance
        i. Allows for trending illness/disease, identification of changes or patterns and investigation of underlying causes or factors. Ready access to this information can curtail an outbreak if a common source is identified.
3) Inform, educate, and empower people about health issues (i.e. health education and health promotion partnerships with schools, churches, and work-sites. This could include media/social media outlets).
    a. Community Importance
        i. Allows residents make better informed healthy choices throughout their lives. Health promotion activities give individuals groups and communities greater control over conditions affecting their health.
4) Mobilize community partnerships and action to identify and solve health problems (i.e. coalition activities associated with the community health improvement plan. The three health issues that the partnerships are working on currently include: alcohol, nutrition (and physical activity) and oral health).
    a. Community Importance
        i. Allows for the sharing of resources and accountability in undertaking community health improvement. Relationships among private, public and non-profit institutions allow for networking, coordination, cooperation and collaboration achieving a common purpose).
5) Develop policies and plans that support individual and community health efforts (i.e. health department policies and plans as well as community policies and plans. This could include, but is not limited to: ordinances, codes, smoke-free policies, health department strategic plan, emergency preparedness plans and community health improvement plan).
    a. Community Importance

i. Allows for an effective governmental presence at the local level. The development of policy to protect the health of the public assures public health practice aligns with the needs of the community.

6) Enforce laws and regulations that protect health and ensure safety (i.e. restaurant/hotel/tattoo inspections, health hazard enforcement, isolation /quarantine, school immunization requirements, communicable disease reporting/follow-up, etc.).
   a. Community Importance
      i. Protects the health and ensures safety for the residents and visitors.
7) Link people to needed personal health services and assure the provision of health care when otherwise unavailable (i.e. working with community partners in identifying populations with barriers to personal health services, knowing community resources and linking people to needed resources and providing "gap filling" services (as appropriate). Some gap filling services provided include: care coordination for children and youth with special health care needs, immunizations, home visitation, and car seat education/installation.
   a. Community Importance
      i. Allows for those with identified barriers, access needed community programming and health services.
8) Assure competent public and personal health care workforce (i.e. workforce certifications, licenses and education required by law/policy guidelines needed to provide public health services, provide mentoring opportunities for students/new graduates)
   a. Community Importance
      i. Allows for a competent workforce. The complexity of promoting health and preventing disease in a diverse society requires the public health workforce to continually learn and apply this new knowledge. Emerging needs are continuously changing and with that competencies and trainings will forever be evolving.
9) Evaluate effectiveness, accessibility, and quality of personal and population-based health services (i.e. at least every 3-5 years the local health department evaluates the accessibility and effectiveness of population-based health services collaboratively on a local level and state level (Community Health Improvement Plan and Healthiest Wisconsin 2020). At this time, documented progress towards goals are reviewed and discussed and revised as needed. Informal satisfaction surveys have also been implemented to improve upon gap filling personal health services provided within the local health department).
   a. Community Importance
      i. Evaluation of the accessibility/quality of services delivered allows for re-allocation of resources and re-shaping programs as needed within the health department and within the community.
10) Research for new insights and innovative solutions to health problems (i.e. linkages with UW systems that conduct research and obtain best practice and evidence-based recommendations for programming, monitor and research best practice information from other agencies and organizations on a local, state and federal level).
   a. Community Importance

i. Innovation and the implementation of research-based programming within the health department or within the community, strengthens public health practice and ultimately benefits the health of the community.

Costs and Benefits of Program and Services:

The adopted 2023 Health Department program cost is $641,919. Clinical and community preventive services provide important health benefits at a reasonable cost. Some preventive services are cost saving; others are cost-effective. (According to the Johns Hopkins Bloomberg School of Public Health every dollar spent on immunizations is projected to save $44.00. Every dollar spent on community prevention is cited to save $5.60 according to the American Public Health Association.) Investing early and wisely in both clinical and community preventive services is essential if we are to successfully address the leading causes of death and disability, namely, chronic diseases and their risk factors. Essential services ensure the public's safety. The investment in primary prevention programming and services, decreases chronic disease and increases the quality of life for those who live, work and play in the City of De Pere.

2023 Program Goals:

1) Increase vaccination rates toward the long-term goal of 90% for all children completing primary vaccination series by two years of age.
2) Monitor, prevent, suppress and control communicable diseases in accordance with federal and state recommendations/guidelines.
3) Conduct timely inspections of licensed establishments to decrease environmental public health risks.

2023 Budget Significant Expenditure Changes:

1) Salaries increased $18,519 due to projected step increases and performance awards.
2) Hourly wages increased $4,039 due to projected step increase.
3) FICA increased $1,722 due to projected step increases.
4) Retirement increased $2,824 due to projected increases.
5) Health, Dental, DIB, Life and Workers Compensation Insurance increased $5,110 due to projected increases.
6) Seminars and Conferences: Regional WALHDAB meetings $160 WALC conference $200, Environmental Health Conferences $675; Public Health Operations Conference $215, Governor's Conference for Emergency Management $950 (paid for with Preparedness Grant), Governor's Conference for Injury Prevention $520.

7) Memberships/Subscriptions: Wisconsin Public Health Association $200, Wisconsin Association of Local Health Departments and Boards (WALHDAB) $410, Wisconsin Environmental Health Association $40, and Wisconsin Association of Weights and Measures $30, Wisconsin Certified Lactation Counselors Association (WALC) $85, Association for Professionals in Infection Control $220 (paid for with Immunization Grant).
8) Mileage reimbursement has decreased due to several meetings now being held virtually.

CITY OF DE PERE SEVEN YEAR CAPITAL IMPROVEMENTS PLAN
2023 - 2029

CAPITAL PROJECTS WORKSHEET

PROPOSED BY: Debbie Armbruster, Health Director

DATE PREPARED: 07/21/2022

DESCRIPTION OF PROJECT

Addition of an enclosed office within the Health Department, flooring replacement and painting of entire department.

1. **Office addition** $ 9,492.00
2. **Flooring** $15,375.00
3. **Painting** $ 2,565.92

NEW: or REPLACEMENT:

PROJECTED COST: $27,432.92

PROPOSED METHOD OF FINANCING	$	%
GENERAL FUND		
CAPITAL IMPROVEMENTS FUND		
GENERAL OBLIGATION DEBT		
SPECIAL ASSESSMENT		
GRANTS	City of De Pere ARPA grant	
OTHER		

ADDITIONAL ANNUAL OPERATING AND MAINTENANCE COSTS (Identify)

NONE

PROJECT JUSTIFICATION

Due to the current small office for the (2) nurses and their inability to have privacy when talking on the phone and to create safe spacing between the (2) employees, another enclosed office is needed for the second nurse. The administrative assistant will then be moved to another area within the lobby to better visualize and work with clients. Painting of those areas will be needed and (the whole department has not been painted in many years) optimally the whole department to match. The carpeting in the department is very old and stained and was not replaced when the rest of the 1st floor of City Hall was replaced. Due to the type of work we do (which at times includes vomit due to upset or sick children, blood, saliva and fecal specimens obtained to send to State Lab of Hygiene, bugs to be identified when clients bring them in) flooring that can be easily cleaned is necessary.

PROJECT RANKINGS HIGH

CITY COUNCIL

STAFF RECOMMENDATION **Goal No.**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Consideration and possible approval of Draft of 2023 Board of Health Budget**

ATTACHMENTS:

- #15 Board of Health (PDF)
- #1 GENERAL GOVERNMENT BOH (PDF)

Board of Health

Program Full Time Equivalents: 0

Program Mission:

To act as a policy forming body for health department staff in efforts to protect and promote the health of City of De Pere residents.

List of Program Service(s) Descriptions:

1) *Medical Advisor* – Provides medical orders and advisement to the Health Officer and staff.
2) *Fiscal Approval* – Approve annual budget that meets the public health needs of the community at an amount acceptable to the community.
3) *Policy Development* – Review local policies and standards for public health services provided by health department staff.

Important Outputs:

1) *Approval of Health Department Policy and Procedures* – Activity funded by property tax. Policy and procedures provide for consistent services provided to the community.
2) *Approval of Annual Budget* – Activity funded by property tax. The annual budget provides for the operation of health department services. This allows the community to have input into the funding utilized to support public health programming.
3) *Advisement to Health Officer and Staff* – Activity funded by property tax. Required by state statute. Provides standing orders for medical services provided and program guidance for services to meet the community's needs.

Expected Outcomes:

1) Maintain or increase the health of community members by assuring the provision of public health services according to Wisconsin State Statute, standing orders and established department policy and procedures.
2) Maintain or increase the number of public health services provided to the community at the lowest possible cost.

2023 Performance Measures:

1) Assure annual review of health department strategic plan and updates to the agency's policy and procedures by May of each year.
2) Recommend at least 1 health policy to the City Council for consideration/adoption.

2022 Performance Measurement Data (July 2021 – June 2022):

1) Assure annual review of health department strategic plan and updates to the agency's policy and procedures by May of each year.
    a. Result: The board of health reviewed the agency's policy/procedures on 5/9/2022.
2) Recommend at least (1) health policy to the City Council for consideration/adoption.
    a. Result: The Board of Health gave their recommendation to use City ARPA funds to support mental health outreach and services. Elected officials on the Board of Health to present this recommendation to the City Council.

Significant Program Achievements:

The Board of Health has been very support of the extensive and all-encompassing COVID-19 response efforts made by the health department during this past year. They have been kept informed of the progression of the response activities.

Existing Program Standards Including Importance to Community:

1) Conduct at least quarterly meetings of the Board of Health.
    a. Community Importance.
        i. Provides opportunity for required actions of the board.
        ii. Allows opportunity for community involvement.
        iii. Required by state statute for all local health departments.

Costs and Benefits of Program and Services:

The adopted 2023 Board of Health program cost is $100. The program benefits the community by allowing for resident involvement of board members in the policy development and public health programming. In addition, the Board supports health department programming that promotes healthy lifestyles and protects health through health education, policy development and valued services.

2023 Program Objectives:

1) Develop policy and provide leadership that emphasizes public health needs and that advocates for equitable distribution of public health resources and/or environmental changes improving health and quality of life.
2) Regularly and systematically collect, assemble, analyze and make available information on the health of the community, including statistics on health status and community health needs.

2022 Budget Significant Expenditure Changes:

There are none.

City of De Pere
2023 General Fund
Adopted Budget

EXPENDITURES

BOARD OF HEALTH

Account Number PERSONAL SERVICES

			Account Title	2021 Year End Actual	2022 Adopted Budget	2022 6 mos Actual	2022 Year End Estimate	2023 Dept Head Proposed	2023 / 2022 Budget % Of Change
100	54110	124	Hourly Wages Board of Health	$ 0	$ 0	$ 0	$ 0	$ 0	0.00%
100	54110	150	FICA	0	0	0	0	0	0.00%
100	54110	190	Training	0	100	20			0.00%
			Subtotal	**0**	**100**	**20**	**100**	**100**	**0.00%**
			TOTAL	**$ 0**	**$ 100**	**$ 20**	**$ 100**	**$ 100**	**0.00%**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **August 8, 2022**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Discussion of Board of Health Responsibilities**

ATTACHMENTS:

- Responsibilities of Board Members - DHS (PDF)
- Who is Responsible - DHS Chart (PDF)

Responsibilities of Board Members

These expectations may be adapted to reflect your board's actual expectations of its members. Your board can adopt any of these and add others as needed. What is important is that all board members know what is expected of them.

Specific expectations of board of health members:

Assess

- Educate yourself on your community and its public health status. As a county resident, you are in an excellent position to know your community's problems and needs.
- Educate yourself on your board and local department's history, goals, achievements, and current situation.

Develop Policy

- Review statutes, administrative rules and local policies.
- Attend board meetings regularly and promptly.
- Review all meeting materials in advance of meeting.
- Do assigned work between meetings.
- Participate fully in open, constructive dialogue regarding local public health both in and out of meetings.
- Ask critical questions; seek clarity and implications of decisions before voting.
- Function as a policy-maker not as an administrator.
- Link the community and the local health department.
- Represent a broad cross-section of the community to the board.
- Represent public health to the community.
- Speak for the board only when delegated to do so.
- Actively participate in political activities at local, state, and national level concerning local public health.

Assure

- Keep decision-making at the primary and secondary policy levels.
- Stand behind decisions of the board and its director/health officer.
- Inform the community of public health financial backing.

- Anticipate trends likely to affect the local health department.

Board Evaluation

Boards need to rate their own performance. Did the board set a long-range work plan? How well did it do in accomplishing its objectives? What did the board do that was not listed as a target? What remains to be done? What is the new work plan?

Boards should also assess the meeting evaluations from the past year. What are common problems? Where has improvement been made? What goals should be set for next year?

How long should a person serve on a local board of health? Board members need to address this question; each board must find its own answer. Individually, members should ask themselves certain simple, but searching, questions about their continued involvement:

1. Am I still interested?
2. Do I participate actively and responsibly in board matters?
3. Do I attend the regularly scheduled board meetings?
4. Do I have confidence in the board, the administrator, and the health department staff?
5. Is my service on the board at least as satisfying and rewarding as any other service to which I might devote similar time and effort?

Boards, as a whole, need to consider how length of tenure influences board effectiveness.

Director/Health Officer Evaluation

Although not required in statute, some Boards of Health may have it written in their local policy that they are responsible for the evaluation of the city or county Health Officer. If such a policy or language is present the following may be “good business practice” to consider.

The director/health officer's job is to make the board's policies come live. Therefore, evaluating the director/health officer is also evaluating the local department and the state of public health in your agency’s jurisdiction. The city/county hires the director/health

officer (often times with input or board of health involvement) to run the health department and to achieve its public health goals. While the board should be clear about what results it wants to see in the community, it should not direct the director/health officer's day-to-day management of the local department.

Performance-based evaluation is an excellent way for boards to evaluate a director/health officer and to evaluate themselves. Such evaluations allow individuals and organizations to see how well responsibilities are being fulfilled. The board should look at each statement in the job description and indicate how the director/health officer fulfills that expectation. It is unfair to judge or rate a director/health officer on things that are not included in his or her job description. (The same goes for the board when it is evaluating itself.) Additionally, the board needs to state clearly its standard of performance for each evaluation item. A review of this type may reveal that job descriptions need to be created or updated.

Compare the director/health officer's job description and work plan to his or her accomplishments. Stick to the direct evidence and be clear about what is to be evaluated. If the board, in the absence of policy prohibiting such activities, disapproves of certain methods used to complete a task, the board has identified a policy need, not a director/health officer failing. Boards must look at outcomes of staff work, not at how staff does its work. If your county requires a standard evaluation that is not performance based, consider also evaluating your director/health officer by the performance method. Standardized forms are appropriate for most evaluation situations but may be inadequate or inappropriate for a board's evaluation of its director/health officer. Standard forms must be general enough to apply to many positions, so they may omit important or specific aspects of more complex positions.

Several things are important to stress in evaluation:

- The evaluation must correlate to the actual job.
- Specific definitions of "Superior," "Average," "Acceptable," etc., must be agreed on before the evaluation.
- Schedule the evaluation activities into the board agenda over the year.

- Summarize the evaluation in writing and provide an opportunity for the director to record his or her comments.
- Stick to job performance, not personal characteristics.

Additional responsibilities of a president or chairperson of a board of health:

- Chair all meetings.
- Facilitate discussion and decision making.
- Work with director/health officer to set agenda for meetings.
- Counsel and consult with the director/health officer.
- Speak for the board as delegated by the board.
- Represent the board to other groups.
- Consult with board members who are not fulfilling their responsibilities or who are violating law, policy, or practice.
- Initiate annual evaluation of the director/health officer.
- Initiate annual evaluation of the board.

The president or chairperson of the board must exhibit leadership ability and provide direction to the director/health officer and the health department staff. How long the chairperson should serve, is best decided by the board itself. When selecting a chairperson, the board needs to look for someone who is active and concerned with the issues of the health department. The chairperson may be called on to go to county governing bodies to support health department concerns and issues. The person selected for this leadership position should be someone who has the time, energy, and savvy to work within county government to represent the concerns of the board and the health department.

Revised 6/8/09

Wisconsin Department of Health Services
Information for Local Boards of Health

December 2013

Who is Responsible?

AREA	BOARD OF HEALTH (Policy)	DIRECTOR/HEALTH OFFICER (Operations)
Long-term goals (taking more than one year)	Approves	Recommends and provides input
Short-term goals (taking one year or less)	Monitors	Establishes and carries out
Annual report and plan	Approves	Assesses, develops, and carries out
News media releases	Adopts policy; support public health position	Approves all media releases
Day-to-day operations	No role	Makes all management decisions
Budget	Approves	Develops and recommends
Capital purchases	Approves	Prepares requests
Decisions on building renovation, leasing, expansion, etc.	Make decisions; assumes responsibility	Recommends; signs contracts after board approval
Purchases of supplies	Establishes policy and budget for supplies	Purchases according to board policy; maintains an adequate audit trail
Major repairs	Approves	Obtains estimates and prepares recommendations
Minor repairs	Establishes policy, including amount that can be spent without board approval	Authorizes repairs up to predetermined amount

AREA	BOARD OF HEALTH (Policy)	DIRECTOR/HEALTH OFFICER (Operations)
Emergency repairs	Works with administrator	Notifies board chairperson and acts with concurrence from chair
Cleaning and maintenance	No role (oversight only)	Sets up schedule
Fees	Adopts policy	Develops and sets fee schedules
Billing, credit, and collections	Adopts policy	Proposes policy and implements
Hiring of staff	Hires administrator only	Approves hiring of all subordinate staff
Staff development and assignment	No role	Establishes
Firing of staff	Fires administrator only	Approves firing of all subordinate staff
Staff grievances	Establishes a grievance committee	Follows grievance procedures
Personnel policies	Adopts	Recommends and administers
Staff salaries	Allocates budget line item for salaries; approves yearly percentage increase	Approves salaries with recommendations from supervisory staff
Staff evaluations	Evaluates administrator only	Evaluates supervisory staff

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Update on Healthcare Infrastructure Grant regarding Mobile Unit**

This grant is being used to purchase a 30 ft. recreational vehicle and make it conducive for both fire and health departments. Fire will use it as a mobile command center during a fire. The health department will use it for mobile vaccination clinics and outreach educational opportunities.

ATTACHMENTS:

- Healthcare Infrastructure Capital Grant(PDF)

GRANT AGREEMENT

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION
and
City of De Pere

HEALTHCARE INFRASTRUCTURE GRANT PROGRAM

THIS GRANT AGREEMENT is made and entered into for the period March 3, 2021 through December 31, 2024 ("Performance Period") by and between the Wisconsin Department of Administration ("Department"), representing the State of Wisconsin (collectively "State"), and City of De Pere ("Grantee").

RECITALS

WHEREAS, the Department has received funds from the United States Department of the Treasury pursuant to section 602 of the Social Security Act, as amended by section 9901 of the American Rescue Plan Act of 2021 ("ARPA") to be used for the purposes specified in the ARPA; and

WHEREAS, on August 24, 2021 Governor Tony Evers announced the launch of a Healthcare Infrastructure Capital Grant Program ("Program") providing grants to local and tribal governments or non-profit healthcare organizations to invest in capital projects that work to support increasing access to healthcare for low income, uninsured, and underserved communities and the ability to respond to future pandemics response needs; and

WHEREAS, Governor Evers instructed the Department to utilize ARPA funds for the Program and to award grants to eligible applicants for eligible activities; and

WHEREAS, on behalf of the State, the Department administers the Program through its Division of Enterprise Operations ("Division"); and

WHEREAS, Grantee is an eligible applicant for participation in the Program; and

WHEREAS, it is the intention of the parties to this Grant Agreement that all activities described herein shall be for their mutual benefit; and

WHEREAS, the State has approved a Grant Award to Grantee in the amount set forth below;

NOW, THEREFORE, in consideration of their mutual promises and benefits the parties hereto agree as set forth in the Grant Agreement Terms and Conditions on the following pages.

IN WITNESS WHEREOF, the Department and Grantee have executed this Grant Agreement as of the date this Grant Agreement is signed by both parties' authorized representatives.

City of De Pere

BY: James D. Boyd
(signature)

NAME: James D. Boyd
(print)

TITLE: MAYOR

DATE: 7-12-2022

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION

BY: _____
(signature)

NAME: _____

TITLE: _____

DATE: _____

PROJECT ID: ARPA-HCI-006

UEI #:

GRANT AGREEMENT TERMS AND CONDITIONS

ARTICLE 1. AMOUNT OF GRANT AND PURPOSE

The Department agrees to disburse to Grantee a total amount not to exceed $ 206,831 (the **"Grant Award"**) to be used by Grantee solely for the purpose of paying for Eligible Expenses as defined in Article 5. The Department's payment obligations to Grantee under this Grant Agreement shall not exceed, in the aggregate, the Grant Award. The Grant Award shall be disbursed to Grantee in periodic advance payments as set forth in Attachment A. The Department reserves the right to reduce the award amount to account for proposed expenditures that do not meet the requirements of ARPA, 2 C.F.R. Part 200 (Uniform Guidance) requirements or the intent of the Program.

ARTICLE 2. GRANT AGREEMENT DOCUMENTS

This Grant Agreement, including the documents annexed hereto as Attachments A-I, constitute the complete agreement of the parties. The Attachments are as follows:

Attachment A – Scope of Work
Attachment B – Budget
Attachment C – Semi-Annual Report and Payment Request
Attachment D – Source of Funds
Attachment E – Method of Payment
Attachment F – Federal Compliance Requirements for Use of State and Local Fiscal Recovery Funds
Attachment G – Completed Grant Application
Attachment H – Grant Announcement
Attachment I – Additional Conditions

ARTICLE 3. PERIOD OF PERFORMANCE

The Performance Period is March 3, 2021 through December 31, 2024, as defined on the first page of this Grant Agreement. Grant Award funds may only be used to pay for Eligible Expenses incurred during the Performance Period.

ARTICLE 4. AGREEMENT ADMINISTRATION

The Department employee who shall serve as the Department's primary point of contact for purposes of administration of this Grant Agreement shall be Jana Steinmetz, Administrator, Division of Enterprise Operations, or such other person as the Department shall identify to Grantee in writing.

Grantee's employee who shall serve as Grantee's primary point of contact for purposes of administration of this Grant Agreement is listed below and shall represent Grantee's interest regarding Grant Agreement performance, financial records, and related considerations. The Department shall be immediately notified in writing of any change of this designee.

Each person signing this Grant Agreement on behalf of Grantee certifies and attests that Grantee's respective Articles of Organization, Articles of Incorporation, By-Laws, Member's Agreement, Charter, Partnership Agreement, Corporate or other Resolutions, and/or other related governing documents, statutes, or ordinances give such person full and complete authority to bind Grantee, on whose behalf they are executing this document.

All correspondence, notices or requests under this Grant Agreement shall be in writing, in electronic form, to the addresses listed below:

To the Department: Jana Steinmetz
Administrator, Division of Enterprise Operations
Department of Administration
E-mail: DOAHealthcareInfrastructureGrantProgram@wisconsin.gov

To Grantee: Name:
Title:
Email:
Phone:

ARTICLE 5. SCOPE OF WORK AND ELIGIBLE EXPENSES

Grantee shall prepare and submit a Scope of Work for Grantee's project in the form of Attachment A and a Budget in the form of Attachment B. The Scope of Work shall set forth the major activities the Grantee will perform and the deliverables Grantee will provide for the project. The Budget shall set forth the amounts of the Grant Award that Grantee reasonably anticipates spending on various goods and services necessary to accomplish the tasks set forth in the Scope of Work. All amounts must be for Eligible Expenses as defined below.

"Eligible Expenses" are those reasonable expenses that are: i) directly attributable and allocable to tasks necessary to perform the activities and provide the deliverables set forth in the Scope of Work; ii) permitted by 2 C.F.R. Part 200 (Uniform Guidance); and iii) consistent with the intent and scope of the Program.

All expenses must meet the requirements of ARPA and all rules and guidance issued by the U.S. Department of Treasury or other federal agencies governing the use of ARPA funds, including 2 C.F.R. Part 200 (Uniform Guidance), and be consistent with the intent and scope of the Program. The Department reserves the right to seek reimbursement of any Grant Award funds expended on ineligible expenses. Ineligible expenses include, but are not limited to: costs incurred in submitting an application; taxes (except sales taxes on Eligible Expenses); work stipends or wage subsidies (except approved personnel expenses); funding advocacy or lobbying efforts; administrative, personnel and programmatic funding for existing operations; and other uses ineligible under ARPA or 2 C.F.R. Part 200 (Uniform Guidance).

Grantee shall hold the State harmless for any audit disallowance related to the eligibility of expenses paid for with Grant Award funds, irrespective of whether the audit is ordered by federal or state agencies or by the courts, and Grantee will be solely responsible for repaying any ineligible amounts (plus any assessed interest, costs, or fees) to the State or the federal government.

Grantee will return to the Department or its designee any funds used by Grantee to pay for ineligible expenses or amounts in excess of the Grant Award. If Grantee fails to return excess funds, the State may deduct the appropriate amount from subsequent payments due to Grantee from the State. The State also reserves the right to recover such funds by any other legal means including litigation if necessary.

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Update on Health Department Community Outreach Activities**

ATTACHMENTS:

- Health Department Outreach and Prevention (DOCX)
- Health Department Covid Response Activities may - july 2022 (DOCX)
- Health Department Trainings and Conferences may - july 2022 (DOCX)

Health Department Outreach and Prevention:

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES - May 2022			
Job/Activity	**Name**	**Date**	**Notes**
Bike Rodeo	Sara and Danielle	5/9, 5/10, 5/12, 5/18	
GrapeVine Presentation	Sara and Danielle	5/12/2022	
Monthly VFC Clinic	Sara and Danielle	5/12/2022	
Car Seat Clinic	Sara and Danielle	5/25/2022	
Kress Library Picnic and Play	Debbie Stein	5/18/2022	

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES - June 2022			
Job/Activity	**Name**	**Date**	**Notes**
Evaluator For City of Appleton TTX Exercise	Sara	6/6/2022	
Kress Library Picnic and Play	Debbie Stein	6/8/2022	
Upward Bound Presentation	Sara	6/8/2022	
Farmer's Market	Sara, Danielle, Debbie A.	6/16/2022	
VFC Monthly Clinic	Sara, Danielle, Debbie A.	6/9, 6/28	
Car Seat Clinic	Sara, Danielle,	6/15/2022	
Healthcare Infrastructure Grant Visit w/ DOA	Health Department	6/16/2022	
Fire Response at Crow's Nest	Sara, Danielle, Debbie A., Debbie S	6/29/2022	

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES - July 2022			
Job/Activity	**Name**	**Date**	**Notes**
Farmer's Market	Danielle, Trista, Sara, Debbie, Debbie S	7/7, 7/21	
Kress Library Picnic and Play	Sara, Jaimie	7/13/2022	
Car Seat Clinic	Danielle, Sara	7/13/2022	
Monthly VFC Clinic	Danielle, Sara	7/14/2022	
Little Free Library for BC Lead Coalition	Sara, Danielle	7/14, 7/21	
MCW Presentation	Debbie A	7/19/2022	
Bellin Bike Rodeo	Sara, Danielle	7/28/2022	

Health Department Covid Response Activities:

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES - May 2022			
Activity	**Name**	**Date**	**Notes**
COVID Vaccine Clinic	Health Dept Staff	5/3, 5/19, 5/24	
BCD COVID-19 Webinar	Danielle, Sara, Debbie S, Debbie A	5/4/2022	
COVID follow up planning meeting	Debbie S, Sara	5/4/2022	
Talk with your Regional Infection Preventionist Re: COVID-19 Concerns	Danielle	5/5/2022	
LTHD Antigen Test Distribution Program Webinar and Q&A	Sara, Debbie S, Debbie A, Danielle	5/6/2022	
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie S, Sara	5/16/2022	
Pfizer Medical Updates & Immunization Site Training	Danielle	5/18/2022	
Joint Webinar for Public Health and School Stakeholders	Danielle	5/18/2022	
Nurse Meeting	Debbie A, Sara, Danielle, Debbie S	5/4, 5/11, 5/25,	
PHN/ School RN Meeting	Debbie A, Sara, Danielle, Debbie S	5/5/2022	

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES - June 2022			
Activity	**Name**	**Date**	**Notes**
BCD COVID-19 Webinar Wednesday	Danielle, Debbie S, Sara	6/1/2022	
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie S, Sara	6/6/2022	
COVID Vaccine Clinic	Health Dept Staff	6/14, 6/16, 6/27	
Health Literacy & Vaccine Community Outreach- Train the Trainer Workshop	Danielle	6/14/2022	
Joint Webinar for Public Health, Health Care, and Other Stakeholders	Danielle, Sara, Debbie S	6/16/2022	
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie A	6/20/2022	
Recommendations for Pfizer-BioNTech and Moderna COVID-19 Vaccine Primary Series in Children 6 Months through 5 Years Old	Danielle, Debbie S, Sara, Debbie A	6/22/2022	
Medical Updates & Immunization Site Training for All Healthcare Providers led by Pfizer Vaccines US Medical Affairs	Danielle	6/23/2022	
Talking About the COVID-19 Vaccine in your Community	Danielle	6/23/2022	
COVID Vaccine Clinic at Beer Gardens	Health Dept Staff	6/28/2022	
Nurse Meeting	Debbie A, Sara, Danielle, Debbie S	6/1, 6/8, 6/15, 6/22, 6/29	

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES - July 2022			
Activity	**Name**	**Date**	**Notes**
COVID-19 Vaccine Clinic	Health Dept Staff	7/5, 7/12, 7/18, 7/21	
BCD COVID-19 Webinar Wednesday	Danielle, Debbie S, Debbie A, Sara	7/6/2022	
Advancing Health Equity During the COVID-19 Pandemic Forum	Danielle	7/8, 7/22	
COVID-19 Vaccine Program Updates	Danielle, Debbie S, Debbie A, Sara	7/12/2022	
Nurse Meeting	Danielle, Debbie S, Debbie A, Sara	7/13, 7/20, 7/27	
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie A	7/18/2022	
Beer Gardens Vaccine Clinic	Health Dept Staff	7/26/2022	
Recommendations for the Novavax COVID-19 Primary Series in Adults Ages 18 and Older	Danielle, Debbie S, Debbie A, Sara	7/28/2022	

Health Department Trainings and Conferences:

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE -MAY 2022			
Job/Activity	**Name**	**Date**	**Notes**
Virtual Tick Surveillance Training	Sara, Danielle, Debbie S	25-May-22	
WEDSS Help Call	Danielle, Sara	5/2, 5/16	
WPHA Conference	Danielle	5/25 - 5/26	
Strengthening Your Health Department Through Immunization and Testing Certification: A Roadmap for Best Practices and Exemplary Care	Danielle	5/11/2022	
5th Annual Older Adult Mental Health Awareness Day Symposium	Danielle	5/16/2022	
CDC: situational updates on Monkeypox in the US	Sara	5/26/2022	

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE - JUNE 2022			
Job/Activity	**Name**	**Date**	**Notes**
NEHA AEC Sessions	Trista	6/29-7/1	
Monkeypox: Updates about Clinical Diagnosis and Treatment	Danielle, Sara, Debbie	6/29/2022	
WEDSS Help Call	Danielle, Sara	6/6, 6/13, 6/20	
Digital Literacy & Vaccine Community Outreach- Train the Trainer Workshop	Danielle	6/21/2022	
Public Health Partner Update: Monkeypox in the US	Danielle, Sara, Debbie	6/30/2022	

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE - JULY 2022			
Job/Activity	**Name**	**Date**	**Notes**
Emotional CPR Intro Workshop	Danielle	7/12/2022	
Virtual Mosquito Surveillance Training	Sara, Danielle, Debbie A	7/14/2022	
WEDSS Help Call	Danielle, Sara	7/18, 7/25	
Monkeypox: What Wisconsin Clinicians Need to Know about Testing, Prevention and Treatment	Sara	7/19/2022	
NACCHO Conference in Atlanta	Danielle	7/18-7/22/22	
COCA Call - Monkeypox Outbreak Updates	Danielle, Sara, Debbie, Debbie S	7/26/2022	

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Communicable Disease report from 5/1/2022 through 8/1/2022**

ATTACHMENTS:

- Disease Incident Count May June July 2022 (PDF)
- Disease Incident Count YTD 7.31.22 (PDF)

Wisconsin Department of Health Services
Division of Public Health
PHAVR - WEDSS

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2022
Disease Group	**Disease**	**Total**
Campylobacteriosis	*Group Total:*	1
Chlamydia Trachomatis Infection	*Group Total:*	26
Coronavirus	*Group Total:*	714
	CORONAVIRUS, NOVEL 2019 (COVID-19)	714
Gonorrhea	*Group Total:*	5
Salmonellosis	*Group Total:*	3
Syphilis	*Group Total:*	3
	SYPHILIS REACTOR	1
	SYPHILIS, EARLY NON-PRIMARY, NON-SECONDARY	1
	SYPHILIS, PRIMARY	1
Tuberculosis, Latent Infection (LTBI)	*Group Total:*	2
	Period Total:	754

Default Filters: 'State' EQUAL TO 'WI'

Probable and Confirmed cases only
05/01/2022-07/31/2022

Wisconsin Department of Health Services
Division of Public Health
PHAVR - WEDSS

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2022
Disease Group	**Disease**	**Total**
Campylobacteriosis	*Group Total:*	2
Chlamydia Trachomatis Infection	*Group Total:*	63
Coronavirus	*Group Total:*	2705
	CORONAVIRUS, NOVEL 2019 (COVID-19)	2704
	MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS-C)	1
Gonorrhea	*Group Total:*	8
Hepatitis B	*Group Total:*	1
Influenza-Associated Hospitalization	*Group Total:*	3
Mycobacterial Disease (Nontuberculous)	*Group Total:*	2
Pathogenic E.coli	*Group Total:*	2
	E-COLI, ENTEROPATHOGENIC (EPEC)	1
	E-COLI, SHIGA TOXIN-PRODUCING (STEC)	1
Salmonellosis	*Group Total:*	3
Syphilis	*Group Total:*	4
	SYPHILIS REACTOR	1
	SYPHILIS, EARLY NON-PRIMARY, NON-SECONDARY	1
	SYPHILIS, PRIMARY	2
Tuberculosis, Latent Infection (LTBI)	*Group Total:*	4
	Period Total:	2797

Default Filters: 'State' EQUAL TO 'WI'

Probable and Confirmed case only

01/01/2022-07/31/2022

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **August 8, 2022**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Update on COVID-19 response**

ATTACHMENTS:

- BOH report August 2022 (003) (PDF)

COVID UPDATE 08/03/22

COVID DISEASE:

- De Pere , Brown County and the state have seen an upward trend in COVID cases
- Positivity rate for the state reflects this:
  - Lowest 2.5% in March
  - Now: 14.8%
  - Testing is up 15% in last week
- Case Count for De Pere:
  - May through July: 714 cases for average of 238 per month
  - April: 103
  - August: Averaging 12 cases per day already
- Why the increase:
  - New variant out that is very contagious
  - Vaccines helping stop serious illness and hospitalization but not as effective at stopping from getting disease from this variant
  - People are going to concerts, athletic events and other large gatherings and masking is no longer required.
- Staffing:
  - We have one LTE staff person doing follow up to high-risk individuals (as defined by DSH) which are those under 5 years and those over 65
  - All positive clients receive information in the mail (cost supported by grant)
  - One LTE staff person working in WEDSS doing staging, processing cases, cleaning up the system
  - Other Staff help as needed.

VACCINE UPDATES:

- Clinics:
  - We offer both Pfizer and Moderna specific clinics at the community center
  - Serving ages 6 months and up (both brands)
  - Also doing pop up clinics at the Beer Gardens
  - Possibly offer COVID vaccines at school based and Flu clinics
- Appointments
  - Slight downward trend at Community Center. Summer is often slower for any vaccine clinics.
  - Beer Gardens has been surprisingly successful
  - Most appointments are for the 50 and over booster
  - Demand for child age is slowly increasing, anticipate that it may increase once school is in session
  - Many are stating they are waiting for the new vaccine to come out that is more targeted to the new variant
- The state has asked LHD to promote vaccine and to continue to hold vaccine clinics
  - They encourage trying to offer clinics in unique environments
  - Promote and encourage vaccine via social media
  - Offer vaccine even if only one person requests it.

- Future Vaccine Trends:
    - Noravax, a protein based vaccine has been approved for those 18 years and older
        - We are not currently offering this vaccine. There is limited supply and demand for it
    - Moderna and Pfizer have vaccines being studied that are targeted toward this new variant
        - Anticipate this coming out this fall
    - Second Boosters for all adults will most likely be recommended this fall.
    - Janssen Vaccine
        - We have discontinued offering this vaccine due to efficacy and safety concerns
        - No other provider in area is offering this (That we are aware of)

- Current Vaccine rates by age: At least ONE dose in Brown County (we are above state ave)
    - 5-11: 29.1%
    - 12-17: 57.1%
    - 18-24: 63.9%
    - 25-34: 65.3%
    - 35-44: 72.7%
    - 45-54: 75.1%
    - 55-64: 81.3%
    - 65 plus: 89.3%

- Staffing:
    - We continue to use grant funded LTE staff as much as possible for clinics. This allows permanent staff to begin to return to "regular" HD activities.

Future Plans:

- Our first Hotwash is scheduled for late August
    - This will be with HD employees
    - More will be planned
- Pandemic Disease Response Plan
    - Will be developed for future use after hotwashes are complete

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Discussion on De Pere Health Department's response to Monkeypox infection**

At this point in time, the process for handling monkeypox cases is being developed including contact tracing, vaccine distribution and overall follow-up. The PIO group for Brown County of which we have a seat at is sending out a press release imminently and other educational pieces are being developed.

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Update on the Hosting of a XRF device for Pb detection for Home Remediation**

ATTACHMENTS:

- XRF summary for BOH meeting_Update (PDF)

INTEROFFICE MEMORANDUM

TO: DEBBIE ARMBRUSTER

FROM: TRISTA GROTH

SUBJECT: UPDATE ON THE HOUSING OF AN XRF FOR LEAD INVESTIGATIONS

DATE: 8/2/2022

As discussed in previous Board of Health meetings, the De Pere Health Department had considered housing a portable XRF device under an agreement with Wisconsin Department of Health Services (DHS) Lead Safe Homes Program (LSHP). The device was to be used by our agency and other local health agencies to assist lead investigations.

During recent communication with the LSHP, it was learned that Winnebago County Health Department recently became a program coordinator for LSHP. Under their agreement with LSHP, Winnebago County will be the agency for Northeast Wisconsin that houses the XRF. Because of the proximity of the City of De Pere and Winnebago County, there is no benefit for both agencies to house an XRF. Therefore, we will no longer be pursuing the necessary certification to house the XRF.

The Environmental Health Sanitarian and Certified Lead Risk Assessor, Trista Groth, will still take the required training to be able to transport and use the XRF for future lead investigations.

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**August 8, 2022**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Discussion on 2022 Addendum to the Brown County Community Health Assessment and Improvement Plan**

ATTACHMENTS:

- 2022 Addendum to the CHA DRAFT 4.27.22 (PDF)
- CHIP Final Summary 2022 (PDF)

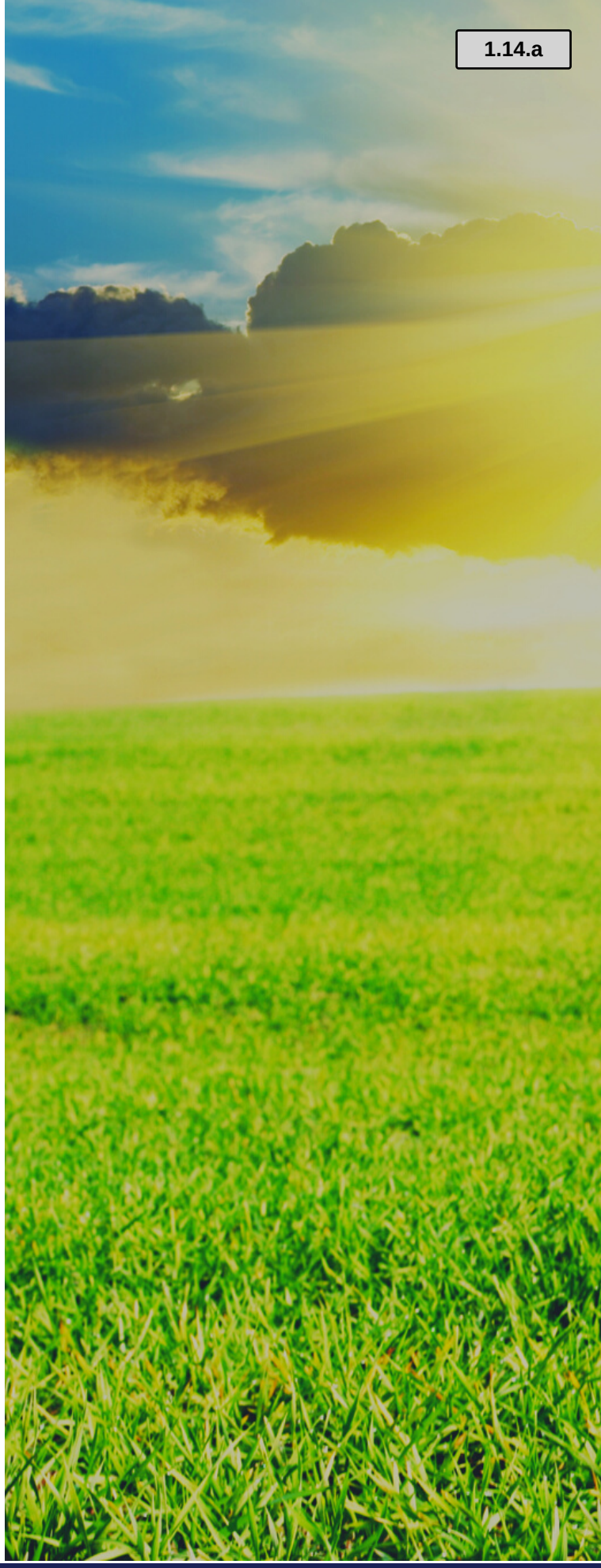
BROWN COUNTY COMMUNITY HEALTH ASSESSMENT AND IMPROVEMENT PLAN:

2022 ADDENDUM

This document provides updates to the Community Health Assessment, initially presented to the community in 2021, based on learnings from a number of sources: community member surveys, key partner surveys, and ongoing conversations with stakeholders. Additionally, the goal of this addendum is to ensure that the work of Beyond Health is closely aligned with core public health capabilities and national standards.

Key updates to the initial Community Health Assessment contained in this addendum include:

- Inclusion of a land acknowledgement, honoring the original inhabitants of this land.
- A summary of languages spoken in our community.
- Additional data on veteran populations in Brown County.
- Ties to local, state, national, and international standards for health.

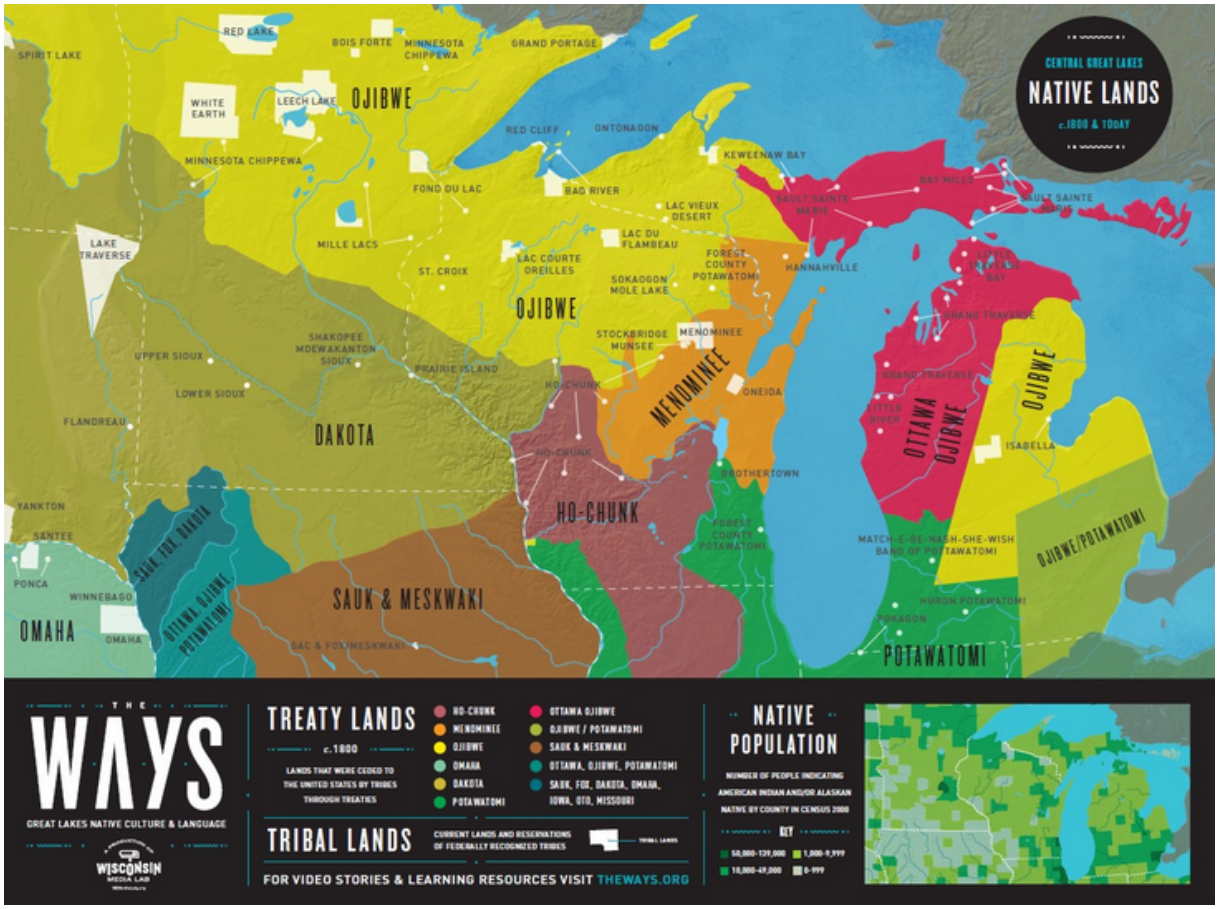


LAND ACKNOWLEDGEMENT

We want to acknowledge the ancestral homelands and traditional territories of Indigenous people who have been here since time immemorial. It is important to not only honor the original occupiers of this land, but to acknowledge the systems which caused their removal.

The area of Brown County was originally home to the Ho-Chunk, Forest County Potawatomi, and Menominee tribes, who still reside and thrive in Wisconsin. It was also the traditional territory of the Myaami and Lakota people, who now live outside of Wisconsin. The Oneida Nation Reservation is currently the closest tribal land to where we are located, however, this First Nation did not originally inhabit the area, but rather were forced to relocate to this region from the New York state area.

Within the Great Lakes region, we acknowledge and honor the Ho-Chunk, Potawatomi, and Menominee people as well as ten other First Nation communities who are a part of our community including the Oneida Nation of Wisconsin, Forest County Potawatomi, Ojibwe Nation communities, Stockbridge-Munsee Band of the Mohicans, and the Brothertown Indian Nation. These First Nations have historical and spiritual connections to the land as do all First Nations people.



MAP CREDITS: 2019 Wisconsin Educational Communications Board. "Great Lakes Native Culture & Language: THE WAYS". https://theways.org/map.html. GIS Mapping: Bobby Marshment-Howell, Producer: Finn Ryan, Design: Art & Sons, Development: Alex Kendrick, Essay: Bobbie Malone.

A special thank you to our community partners who contributed to and supported the development of this statement:

- Oneida Nation
- Menominee Nation (pending)
- Ho-Chunk Nation
- Forest County Potawatomi (pending)
- Brown County United Way
- Brown County Racial Equity Ad Hoc Committee
- NWTC

Beyond Health is committed to ongoing collaboration with the First Nations in this land to understand and advance meaningful change in our communities. This means active inclusion of Indigenous voices to develop and implement strategies which address health inequities and move towards optimal health for all.

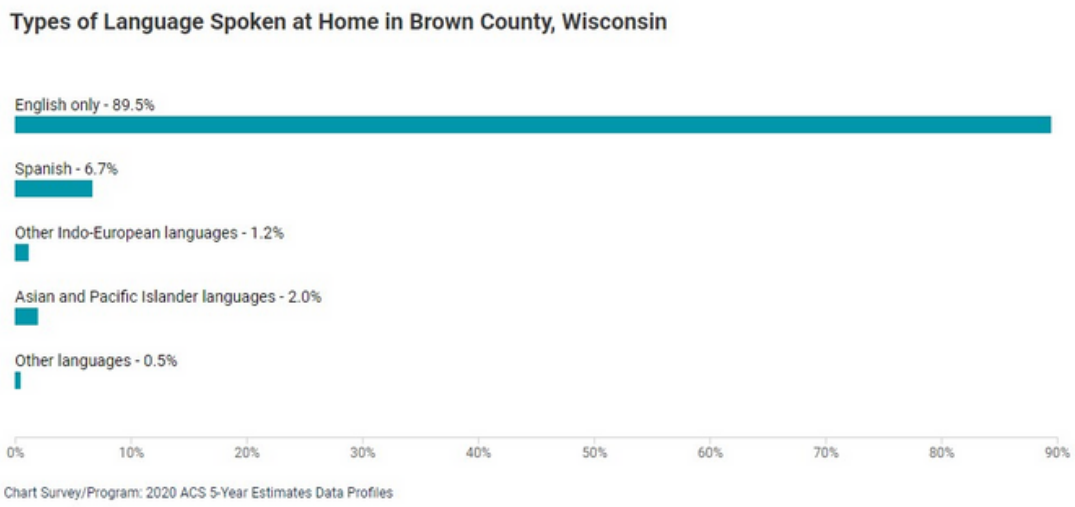
LANGUAGES SPOKEN IN BROWN COUNTY

Groups of individuals from a wide variety of backgrounds call Brown County home. In addition to the land acknowledgement included earlier in this addendum, Beyond Health also acknowledges the Indigenous languages which were spoken by the original inhabitants of this land, and the role that language plays in the preservation of culture and identity. Below is an excerpt from the Wisconsin Languages Project, highlighting the Indigenous languages spoken in Wisconsin:

> Wisconsin is rich in Indigenous languages, and three language families are represented: Algonquian, Iroquoian and Siouan. Potawatomi, Menominee, the original languages of the Stockbridge-Munsee, and Ojibwe (spoken by the Red Cliff, St. Croix, Bad River, Lac Courte Oreilles, Lac du Flambeau, and Sokaogan bands of the Lake Superior Chippewa) are all part of the Algonquian family. Oneida is an Iroquoian language, along with languages like Mohawk and Cherokee, and the Ho-Chunk language is Siouan, a family that also includes the Lakota, Dakota, and Assiniboine languages.

Source: https://wep.csumc.wisc.edu/other-languages/

Census surveys also track languages spoken in communities across the United States, and the latest survey showed that nearly 11% of families speak a language other than English in the home in Brown County, as compared to approximately 9% in Wisconsin. The table below highlights the primary modern day languages spoken in Brown County.



10.5%

Language other than English spoken at home in Brown County

8.7%

Language other than English spoken at home in Wisconsin

VETERANS IN BROWN COUNTY

Based on feedback from community surveying, Beyond Health is expanding the Community Health Assessment to include information on the veteran population in Brown County. This important population makes up 7% of the total community and face a unique set of circumstances related to health. Of note, the veteran community in Brown County is 92% male and 8% female.

Source: United States Census Bureau. https://data.census.gov/cedsci/profile?g=0500000US55009. Accessed 3.21.22

LOCAL AND STATE PRIORITIES

Beyond Health does not conduct its work in isolation. Whenever possible, the Steering Committee aligns its work with other local, state and national priorities and plans, and integrates new data sources into prioritization of efforts. Below is a list of priorities and plans which were considered when choosing health priorities and strategies with the community:

BROWN COUNTY COMPREHENSIVE COMMUNITY PLAN

A county-wide planning document to establish a shared vision for the future of the community, with intentional language focused on the health of the community. Brown County Planning Department documents, including the comprehensive plan, can be found here:

www.browncountywi.gov/departments/planning-and-land-services/planning/brown-county-plans/

LIFE STUDY 2021

Recently released, the 2021 LIFE (Leading Indicators for Excellence) Study builds on studies completed in 2011 and 2016 and provides another source of data to inform the Community Health Assessment. The LIFE Study measures 10 aspects of quality of life through surveying and community conversations. This year's report is enhanced by the launch of the Greater Green Bay Community Hub, a data storage hub for the community. Both can be found here:

www.greatergreenbaycommunityhub.org

WI PUBLIC HEALTH ASSOCIATION

A statewide public health association whose mission is "building a healthier, safer Wisconsin through policy and partnership". Current priorities can be found by visiting:

www.wpha.org/page/CurrentLegislative

THE 2020 STATE HEALTH ASSESSMENT

The WI Department of Health Services produces statewide plans to advance the health of Wisconsin. These plans are informed by state health assessments, the most recent one (see below) contains data gathered in 2019 and calls out key findings which link with local health priorities in Brown County:

https://www.dhs.wisconsin.gov/publications/p03169.pdf

NATIONAL AND GLOBAL PRIORITIES

HEALTHY PEOPLE 2030

National objectives to improve health and well-being through 2030 that are driven by data, grounded in the social determinants of health, and contain more than 300 measurements of health. Learn more at:

health.gov/healthypeople

SUSTAINABLE DEVELOPMENT GOALS

From the United Nations: "The 2030 Agenda for Sustainable Development, adopted by all United Nations Member States in 2015, provides a shared blueprint for peace and prosperity for people and the planet, now and into the future. At its heart are the 17 Sustainable Development Goals (SDGs), which are an urgent call for action by all countries - developed and developing - in a global partnership. They recognize that ending poverty and other deprivations must go hand-in-hand with strategies that improve health and education, reduce inequality, and spur economic growth – all while tackling climate change and working to preserve our oceans and forests." View full details here:

www.un.org/sustainabledevelopment/

SUSTAINABLE DEVELOPMENT GOALS

LINKING TO THE BROWN COUNTY PRIORITIES

The table below contains key priorities from the plans and frameworks described above, aligned with the Brown County health priorities.

	EQUITABLE ACCESS	SOCIAL COHESION	UNIFIED PLANNING AND POLICY
BROWN COUNTY LIFE STUDY 2021	• Room for Improvement with LGBTQ+ Inclusion • Access to Affordable, High-Quality Childcare • Implementation of Green Practices at Institutional Levels	• Providing Cultural Spaces for Everyone • Room for Improvement with Healthy Habits	• Addressing Housing Insecurity and Transportation Barriers • Year-Round Access to Recreational Opportunities, Including Those with a Disability
WPHA PRIORITIES	• Income Stability and Employment • Addressing Racism as a Public Health Crisis	• Criminal Justice Reform • Early Childhood	• Housing • Addressing Racism as a Public Health Crisis • Building PH Infrastructure through Increased and Flexible Funding
WI STATE HEALTH ASSESSMENT	• Healthy Environmental Surroundings • Economic Opportunities for All • High Quality Healthcare and Public Health	• Social and Community Connections • Healthy Environmental Surroundings	• Infrastructure • Policies that Support Equitable Health Outcomes and Opportunities to be Healthy
HEALTHY PEOPLE 2030	• Economic Stability • Neighborhood and Built Environment • Healthcare Access and Quality	• Neighborhood and Built Environment • Social and Community Context	• Healthcare Access and Quality
SUSTAINABLE DEVELOPMENT GOALS (UNITED NATIONS)	• No Poverty • Decent Work and Economic Growth • Reduced Inequalities • Gender Equality • Clean Water and Sanitation • Life on Land	• Zero Hunger • Partnerships • Life on Land	• Good Health and Well-Being • Industry, Innovation, and Infrastructure • Sustainable Cities and Communities

SUPPORT FOR THE APRIL 2022 ADDENDUM

DRAFT

This addendum to the 2021 Community Health Assessment was developed and adopted by the full Steering Committee of the Beyond Health Collaborative. Full adoption occurred at a Steering Committee meeting on Friday, May 20th at 9:30 a.m. and support was unanimous. Membership in Beyond Health steering committee at the time of adoption is listed below:

Jennifer Schnell
Advocate Aurora

Laura Hieb
Bellin Health

Jody Anderson
Bellin Health

Sharla Baenen
Bellin Health

Andrea Kressin
Brown County Public Health

Anna Nick
Brown County Public Health

Sarah Inman
Brown County United Way

Debbie Armbruster
De Pere Health Department

David Lally
Hospital Sisters Health System

Kim Franzen
N.E.W. Community Clinic

Mollie Passon
Oneida Comprehensive Health Division

Jeff Stumbras
Prevea Health

Renita Robinson
Prevea Health

Chris Culotta
WI DHS - Division of Public Health

BROWN COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

2022 to 2024

The Community Health Improvement Plan (CHIP) is a guiding document which supports active engagement by community members and organizations in improving the health of Brown County. It is intended to be a framework for measurable change, grounded in the social determinants of health with a focus on health equity throughout.

The CHIP is a document required by Wis. Stat. § 251.05(3)(c) and Wis. Admin. Code §§ DHS 140.04(1)(g)3-5. However, in Brown County, the CHIP is more than a required activity. It is a commitment by leaders within the public health system to improve the health of Brown County by advocating for and directing resources towards health priorities and advancing strategies which support the chosen priorities. For 2022 to 2024, the three chosen priorities are: **equitable access, social cohesion,** and **unified planning and policy.**

In Brown County, the Beyond Health Collaborative is the Steering Committee responsible for advancing this work. The health priorities are chosen based on feedback from community members, key community agencies, municipal and healthcare leadership, and more. The Community Health Assessment (CHA), completed in 2021 with an addendum in 2022, informed these conversations, and a summary of the priorities and strategies found in the CHIP is outlined on subsequent pages.

BEYOND HEALTH STEERING COMMITTEE MEMBERS

The Brown County Community Health Assessment and Improvement Plan processes are led by the Beyond Health Steering Committee, in partnership with Strategy Leads - the agencies who have stepped forward to lead specific strategies under each health priority. Steering Committee members provide strategic guidance and expertise as representatives of their respective agencies, and support the allocation of resources to advance the chosen health priorities and strategies as appropriate.

Jennifer Schnell
Advocate Aurora

Laura Hieb
Bellin Health

Jody Anderson
Bellin Health

Sharla Baenen
Bellin Health

Andrea Kressin
Brown County Public Health

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Chris Culotta
WI Department of Health Services - Division of Public Health

EQUITABLE ACCESS ■ SOCIAL COHESION ■ UNIFIED PLANNING AND POLICY

MEASURING SUCCESS FOR THE CHIP

In order to track progress made towards the shared goals of the CHIP, these measurable objectives will provide an overarching set of long-term goals for each of the three priorities listed below. Individual initiatives within each of the strategies will be guided by clear action plans which are carried out by community partners designated as Strategy Leads. These broad objectives guide the implementation of the Brown County CHIP.

1 EQUITABLE ACCESS

Take steps to level the playing field

OBJECTIVE 1: By December 2022, each respective Strategy Lead will conduct or share a previously completed mapping activity, gap analysis, and partner identification which will inform strategy-level initiatives for the current CHIP cycle.

OBJECTIVE 2: By December 2024, the Beyond Health Steering Committee will intentionally engage in efforts to promote equitable access to health in Brown County focused on improved economic stability, improvements in environmental health, and increased access to healthcare.

2 SOCIAL COHESION

Help people connect with each other and their community in healthy ways

OBJECTIVE 1: By December 2022, each respective Strategy Lead will conduct or share a previously completed mapping activity, gap analysis, and partner identification which will inform strategy-level initiatives for the current CHIP cycle.

OBJECTIVE 2: By December 2024, the Beyond Health Steering Committee will intentionally engage in efforts to normalize social connectedness as an essential building block to physical and mental health in Brown County by focusing on initiatives at the neighborhood level, within food systems, and around walkability and access to recreational opportunities.

3 UNIFIED PLANNING AND POLICY

Make sure policies help the entire community

OBJECTIVE 1: By December 2022, each respective Strategy Lead will conduct or share a previously completed mapping activity, gap analysis, and partner identification which will inform strategy-level initiatives for the current CHIP cycle.

OBJECTIVE 2: By December 2024, the Beyond Health Steering Committee will intentionally engage in efforts to integrate health considerations into policy and planning efforts, by focusing on larger-scale advocacy, education, and structural change opportunities including telehealth, housing, transportation, and diverse representation in decision-making spaces.

CHIP STRATEGIES: HOW DO WE MAKE AN IMPACT?

Each of the health priorities and associated objectives listed on the previous page have linked strategies to advance the important and cross-cutting work outlined. Strategies are outlined below with their respective Strategy Leads.

Strategy Leads are responsible for convening stakeholders, setting shared goals, and monitoring progress towards goals. Strategy leads ensure communication with the Beyond Health Steering Committee in a liaison capacity.

EQUITABLE ACCESS

Take steps to level the playing field

Strategy 1:
Decrease income and asset gap in Brown County

Strategy Lead:
Brown County United Way

Strategy 2:
Improve environmental quality and physical environments for all

Strategy Lead:
Brown County Public Health

Strategy 3:
Advocate for equitable access to healthcare

Strategy Lead:
Beyond Health Subcommittee, Health Systems Shared Facilitation

SOCIAL COHESION

Help people connect with each other and their community in healthy ways

Strategy 1:
Build community connections at the neighborhood level

Strategy Lead:
NeighborWorks Green Bay

Strategy 2:
Increase availability and visibility of healthy food options

Strategy Lead:
University of Wisconsin-Madison Division of Extension Brown County

Strategy 3:
Improve walkability and recreational opportunities

Strategy Lead:
Wello

UNIFIED PLANNING AND POLICY

Make sure policies help the entire community

Strategy 1:
Integrate population health into community planning efforts

Strategy Lead:
Beyond Health Subcommittee, Hospital Sisters Health System Facilitation

Strategy 2:
Safe and accessible housing and transportation options

Strategy Lead:
Blueprint Project Manager for The Taskforce

Strategy 3:
Support and create policies that decrease inequities in a coordinated and transparent way

Strategy Lead:
Health Equity Coalition

STAY CONNECTED: PROGRESS DASHBOARD FOR THE CHIP

Beyond Health recognizes the need for timely access to updates on the CHIP. With this in mind, for the first time, Beyond Health has put together an online "eCHIP" that will be updated whenever new partners join in this work, data become available, or new strategy updates are ready to be shared. This interactive dashboard, powered by Clear Impact, will give community members and stakeholders an opportunity to engage in a more meaningful way with the CHIP.

CLEAR IMPACT
reach your peak

http://

To interact with Brown County's full CHIP please visit:

https://bit.ly/39K93D6

ALIGNMENT WITH RESULTS-BASED ACCOUNTABILITY

Results-Based Accountability (RBA) is a widely used framework which uses a data-driven decision-making process to address complex social dynamics. The process allows for conversations that are simple, common sense, and use plain language to organize various types of community strategies.

Beyond Health is committed to monitoring key measures for ALL of Brown County - broken down to highlight inequities when appropriate - and supports each of the strategies as they also monitor progress made towards their own program-level goals.

GET INVOLVED!

We want to hear from you. As a Brown County community member or someone with an interest in the Brown County CHIP, your feedback helps us set priorities that reflect true needs in our community. Share your thoughts here, and we will integrate your thoughts into our planning processes as appropriate:

Click here to provide feedback through a survey.

Pulsa aquí para contestar una encuesta de retroalimentación.

Nyem qhov ntawm no los muab kev tawm tswv yi.

Want to join one of the strategy groups? Have an idea you want to take action on? Please send an email to bc_health@browncountywi.gov and a member of the Steering Committee will respond to your request.