Board of Health

Regular Meeting

Agenda

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

Monday, June 21, 2021 **5:00 PM** **De Pere City Hall Riverview Room**

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 **June 21, 2021** at **5:00 PM** in the **De Pere City Hall Riverview Room, 335 S. Broadway, De Pere, WI 54115.**

I.

1. Call to Order
2. Roll Call
3. Introduction of newly assigned Board of Health members, Jonathon Hansen and John Quigley
4. Public Comment Period
5. Hearing on the City of De Pere Determination of Dangerous Animal Order- 645 S. Huron St. issued by De Pere Health Director, Deborah Armbruster on 06/03/2021

   PLEASE TAKE NOTICE, that pursuant to Wis. Stats. §19.85(1)(a), the Board may convene in closed session for the purpose of deliberating concerning a case which was the subject of any judicial or quasi-judicial trial or hearing before that governmental body.
   The Board may then reconvene in open session to take action on any matter discussed in closed session or for such other purposes as are allowed by law.
6. Hearing on the City of De Pere Determination of Dangerous Animal Order - 324 N. Sixth St. issued by De Pere Health Director, Deborah Armbruster on 06/03/2021

   PLEASE TAKE NOTICE, that pursuant to Wis. Stats. §19.85(1)(a), the Board may convene in closed session for the purpose of deliberating concerning a case which was the subject of any judicial or quasi-judicial trial or hearing before that governmental body.
   The Board may then reconvene in open session to take action on any matter discussed in closed session or for such other purposes as are allowed by law.
7. Approval of March 15, 2021 meeting minutes
8. Communicable Disease report
9. Update on Agent Program
10. Update on Covid-19 response
11. Discuss need for change in Board of Health Meeting Times
12. 2021 Review of Policies & Procedures by Dr. Stroman, Medical Advisor
13. Discontinuation of blood pressure clinics
14. Presentation of 2020 Annual Report

15. Alcohol and drug legislation presented by Teresa Gulyas

16. Future Agenda Items

17. 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:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Introduction of newly assigned Board of Health members, Jonathon Hansen and John Quigley**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Hearing on the City of De Pere Determination of Dangerous Animal Order- 645 S. Huron St. issued by De Pere Health Director, Deborah Armbruster on 06/03/2021**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Hearing on the City of De Pere Determination of Dangerous Animal Order - 324 N. Sixth St. issued by De Pere Health Director, Deborah Armbruster on 06/03/2021**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Approval of March 15, 2021 meeting minutes**

ATTACHMENTS:

- 3.15.21 BOH Minutes(PDF)

BOARD OF HEALTH MEETING
CITY OF DE PERE, WISCONSIN – March 15, 2021

The Board of Health of the City of De Pere, Wisconsin met in regular (virtual) session on Monday, March 15, 2021 at 5:00 p.m.

1. **Call to Order**

After some technical difficulties, the meeting was called to order by Dennis Hibray at 5:10 pm.

2. Roll Call

Roll call was taken and the following members were present: Casey Nelson, Kelly Ruh, Dennis Hibray, Teresa Gulyas and Dr. Michael McHenry. Also present were Deborah Armbruster and Kelly Burke.

3. Approval of January 18, 2021 Meeting Minutes

Dr. Michael McHenry made a motion to approve the January 18, 2021 meeting minutes. Casey Nelson seconded the motion. Upon vote, the motion passed unanimously.

4. Update on Covid-19 Response

Deborah Armbruster reported that the number of Covid tests in Wisconsin is down. The number of Covid-19 cases is also down. However, the Health Department does get notifications from the school nurses almost daily regarding positive cases and the classes they are quarantining. The school nurses are also helping with contact tracing of their positive cases.

Deborah Armbruster stated that per the Department of Health Services (DHS) website, the disease activity is still high. Brown County's percent of positives is 3.5%. Wisconsin as a whole has a 2.2% positivity rate. Hospital capacity is at 72%.

To date, the De Pere Health Department has vaccinated De Pere's Fire/EMS personnel, Police, Public Health, and many people in the community age 65 and up. In addition, DPHD (De Pere Health Department) is now vaccinating educators and restaurant/food employees. We (DPHD) are following DHS (Wisconsin Department of Health Services) guidelines to determine who the essential workers are and when they qualify for vaccination. We have developed an attestation form for individuals to sign to verify they meet the DHS vaccination criteria. We have had 20 vaccination clinics since January. We have used all Moderna vaccine, except once when we had Pfizer.

Deborah Armbruster reported that the state has asked Public Health to submit numbers of how many educators they have in their district and indicate to the state who will be vaccinating them. The state has allocated vaccine to the vaccinators for the educators. Deborah Armbruster spoke with the De Pere school administrators and gathered the educator numbers. We divided them between Bellin and Prevea to be the vaccinators. These health systems have set aside appointment times just for the educators.

Bellin is opening up a vaccination site at Lambeau Field in conjunction with the Green Bay Packers. Brown County Public Health will be helping to obtain vaccine and their nurses will be helping to vaccinate at Lambeau Field.

Vaccine in our area has not been readily available. Area health systems are receiving 30% of their capacity. The health systems' didn't receive the allocations of vaccine they requested. DHS says that vaccine availability should double beginning in April. We know Wisconsin will be getting some Johnson & Johnson, but we don't know who will receive it.

The DPHD vaccination clinics are going smoothly. We have De Pere EMS at the vaccine clinics at all times. We vaccinate anyone, regardless of residency.

The DPHD has hired 3 nurses as Limited Term Employees. This is being paid for out of our Covid-19 grants. We have hired 2 people for staging, contact tracing and clinic scheduling.

We (DPHD) have put some security measures in place to protect our vaccine. We have started locking our refrigerator and freezer. We also lock the exam room and have a security film on the windows so people can't see in.

We have not had any problems with people who do not agree with the vaccine. We have vaccine clinics scheduled through May. We will continue vaccinations as long as we can. Beginning March 29th individuals with certain medical conditions will be eligible, including being overweight with a BMI of 25 or greater. This could be up to 80% of our population. Hopefully, May 1st it will open up to everyone.

Theresa Gulyas asked if people could schedule appointments now for 3-29 eligibility. Debbie answered that beginning on March 24th people will be able to schedule online and pick their own appointment time.

Dennis asked what our daily capacity was for vaccinations. Debbie responded that we can do 100 doses comfortably. We currently do 2 to 3 vaccination clinics a week. Per Debbie, we are gap filling; our intention is to vaccinate those who can't travel to UWGB or Lambeau Field.

Dr McHenry asked if the health department was having any leftover vaccine. Debbie replied that we rarely get cancellations or no-shows, but when we do we call the people on our waitlist to fill it. We have had some people come in to our clinics late in the day and ask if we had vaccine.

Dennis Hibray asked if the interest in the vaccine was waning. Debbie replied that interest is waning slightly for the 65 and older age group as many of them have been vaccinated, but after the 29th, when new groups are eligible, there should be a lot of people wanting it.

Casey Nelson asked if we do any side effect tracking after giving the vaccine. Debbie responded that we strongly encourage the people to enroll in V-Safe through the CDC to record side effects. Debbie added that we have noticed that more mature adults have fewer side effects than our younger recipients. We have had one anaphylactic reaction who fully recovered.

Dennis Hibray asked who does the follow-up on positive cases. Debbie answered that the follow-up is shared between the State and our department, depending upon our staffing availability now that we are doing vaccination clinics.

5. <u>Communicable Disease report</u>

Deborah Armbruster asked if anyone had questions about the Communicable Disease report. No one had any questions.

6. Update on the Agent program

Deborah Armbruster explained that we were anticipating Trista Groth being standardized by the State last year. We asked the State about it recently and we are hoping that the standardization will happen in fall. Trista is doing great and is confident in what she is doing. Debbie will inform the Board when she has a date for standardization. Dennis Hibray asked if this affects our Agent Program status? Debbie replied that she did ask, and our Agent Status is not affected.

Debbie reported that Trista is communicating with the De Pere Businesses to help mitigate Covid-19 infection. Just last week Trista sent information out to food handlers and restaurant employees encouraging them to get vaccinated.

7. 2021 review of policies and procedures postponed

Deborah Armbruster explained that we have worked on the Policies and Procedures, but they are not completed. We wanted to be thorough in our review of these policies and intend to have them done in May.

8. Annual Report postponed

Deborah Armbruster reported that due to all the Covid-19 efforts, we were not able to get the Annual Report completed yet. We have mainly worked on Covid response all year, so this year's Annual Report may not be as comprehensive as in the past.

9. DHS Grants awarded to the De Pere Health Department

1. **Awardance of DPH Contract No.43561-6**
2. **Awardance of DPH Contract No.43561-5 to the Health Department**
3. **Awardance of DPH Contract No.43561-4 to the Health Department**
4. **Awardance of 2021 DPH Consolidated Contract No.47645**

Deborah Armbruster wanted to inform everyone where we stood with our Grants. Last year, when the consolidated grants were renewed, the state let us use much of the money for Covid response. This year, we have 4 grant contracts and are anticipating another $300,000 for Covid response. This grant money pays for our supplies, equipment, and limited term employees. The State does provide some free PPE. The State has been generous in helping meet our needs. We have had enough funds to accomplish what we need to do.

Dennis Hibray asked if the Health Department was doing any tobacco control programs? Debbie answered that we are part of the drug alliance, so we do some tobacco control through that, but we do not receive funding for tobacco control.

Dennis Hibray asked if our other pots of money have been re-designated to Covid (MCH, Lead, and Communicable Disease)? Debbie responded that the only grant that was not flexible for Covid response was Lead.

Dennis clarified that the $258,000 for Covid is currently being used for running the clinics and paying the additional staff and that we are expecting approximately another $300,000? Debbie confirmed that was correct. She clarified that much of the funding runs through 2022 which is needed if booster vaccinations will be required for variants in the future.

10. Future Agenda Items

Deborah Armbruster explained that the Board of Health needs to discuss meeting dates as there is a conflict in the council chambers with our current meeting times. Debbie asked if the BOH wanted to do virtual meetings, in person, or a hybrid. Debbie needs to speak with Larry Delo regarding the situation. Debbie believes we can still do virtual meetings because we have the ability to record virtual meetings. If we want to meet in person in the Council Chambers, we would need to reschedule our dates and times. Debbie will confirm this information and communicate with the Board of Health via e-mail to decide what to do for our next meeting.

Casey Nelson thanked the members of the Board, especially the citizen members, since this is his last meeting. He also thanked the Health Department staff and admired the way they handled this past year. Dennis Hibray and Debbie Armbruster thanked Casey for his service on this Board.

Teresa Gulyas reported that in addition to "Cocktails to Go" there is alcohol legislation regarding delivering packaged goods from restaurants and stores to homes. Also, the Governor proposed to add legalizing marijuana (recreational and medicinal) in the next budget. Teresa believes these will be three huge Public Health issues to deal with. Per Teresa, the carry out law may still be in Committee at this time. Teresa stated there was concern about the legislation related to alcohol because of the serious drinking problems in Wisconsin.

11. Adjournment

Teresa Gulyas made a motion to adjourn the meeting. Dr. Michael McHenry seconded the motion. Upon vote, the motion passed. The meeting was adjourned at 6:02 pm.

Respectfully Submitted,
Kelly Burke
Health Department Administrative Assistant

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **June 21, 2021**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Communicable Disease report**

ATTACHMENTS:

- 2019 CD Case Count (PDF)
- 2020 CD Case Count (PDF)
- 2021 YTD CD Case Count June (PDF)

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

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2019
Disease Group	**Disease**	**Total**
Campylobacteriosis (Campylobacter Infection)	*Group Total:*	6
Carbapenem-Reistant Enterobacteriaceae	*Group Total:*	1
Chlamydia Trachomatis Infection	*Group Total:*	79
Ehrlichiosis / Anaplasmosis	*Group Total:*	1
Giardiasis	*Group Total:*	3
Gonorrhea	*Group Total:*	9
Hepatitis B	*Group Total:*	1
Hepatitis C	*Group Total:*	4
Influenza	*Group Total:*	7
Invasive Streptococcal Disease (Groups A And B)	*Group Total:*	7
Lyme Disease	*Group Total:*	16
Meningitis, Other Bacterial	*Group Total:*	1
Mycobacterial Disease (Nontuberculous)	*Group Total:*	4
Not Reportable	*Group Total:*	1
Pathogenic E.coli	*Group Total:*	10
Plesiomonas Infection	*Group Total:*	1
Salmonellosis	*Group Total:*	2
Streptococcus Pneumoniae Invasive Disease	*Group Total:*	3
Tuberculosis, Latent Infection (LTBI)	*Group Total:*	2
Yersiniosis	*Group Total:*	1
	Period Total:	159

Default Filters: 'State' EQUAL TO 'WI'

This report includes all confirmed AND probable De Pere cases per WEDSS:
Date Range 1/1/2019 to 12/31/2019

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

Disease Incidents by Episode Date

Jurisdiction: De Pere

Disease Group	Disease	2020 Total
Campylobacteriosis (Campylobacter Infection)	*Group Total:*	1
Carbon Monoxide Poisoning	*Group Total:*	1
Chlamydia Trachomatis Infection	*Group Total:*	77
Coronavirus	*Group Total:*	2288
Ehrlichiosis / Anaplasmosis	*Group Total:*	1
Giardiasis	*Group Total:*	1
Gonorrhea	*Group Total:*	16
Haemophilus Influenzae Invasive Disease	*Group Total:*	1
Hepatitis C	*Group Total:*	4
Influenza	*Group Total:*	12
Invasive Streptococcal Disease (Groups A And B)	*Group Total:*	3
Lyme Disease	*Group Total:*	8
Mumps	*Group Total:*	1
Pathogenic E.coli	*Group Total:*	1
Salmonellosis	*Group Total:*	2
Streptococcus Pneumoniae Invasive Disease	*Group Total:*	1
Syphilis	*Group Total:*	1
Tuberculosis, Latent Infection (LTBI)	*Group Total:*	4
	Period Total:	2423

Default Filters: 'State' EQUAL TO 'WI'

This report includes all confirmed AND probable De Pere cases per WEDSS:
Date Range 1/1/2020 to 12/31/2020

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

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2021
Disease Group	**Disease**	**Total**
Campylobacteriosis (Campylobacter Infection)	*Group Total:*	2
Chlamydia Trachomatis Infection	*Group Total:*	44
Coronavirus	*Group Total:*	708
Gonorrhea	*Group Total:*	9
Hepatitis C	*Group Total:*	1
Invasive Streptococcal Disease (Groups A And B)	*Group Total:*	2
Legionellosis	*Group Total:*	1
Mycobacterial Disease (Nontuberculous)	*Group Total:*	2
Pathogenic E.coli	*Group Total:*	1
Salmonellosis	*Group Total:*	1
Syphilis	*Group Total:*	1
Yersiniosis	*Group Total:*	1
	Period Total:	773

Default Filters: 'State' EQUAL TO 'WI'

This report includes all confirmed AND probable De Pere cases per WEDSS:
Date Range 1/1/2021 to 6/14/2021

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Update on Agent Program**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Update on Covid-19 response**

The Board of Health has been sent a daily report on COVID-19 statistics for the City of De Pere along with the Common Council. The Council no longer will be receiving them. How would the Board of Health like to proceed with this report.

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **June 21, 2021**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Discuss need for change in Board of Health Meeting Times**

City of De Pere Administration requests all board meetings to be held in the Council Chambers to facilitate meetings to be video taped for the public's viewing.

ATTACHMENTS:

- Memo boh 6.15.21 (DOC)

Public Health
Prevent. Promote. Protect.

Memo

To: Board of Health

From: Debbie Armbruster, Health Director/Health Officer

Date: 6-14-20212021

Re: Available meeting times for meetings in the Council Chambers

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I wanted to send this to the Board of Health members as city administration has asked that the Board of Health convene in the Council Chambers so the meeting can be seen by the public. Unfortunately our 3rd Monday of the month is already taken. I am sending the days of the month that are available so board members can look at their schedules ahead of our upcoming meeting.

The days available are as follows:

1st or 2nd Mondays from 5-7pm (another meeting is scheduled for 7:30pm)

2nd, 3rd, 4th Wednesdays at 5pm

1st, 2nd, 4th Thursdays at 5pm

Thank you,

Debbie Armbruster

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**2021 Review of Policies & Procedures by Dr. Stroman, Medical Advisor**

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **June 21, 2021**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Discontinuation of blood pressure clinics**

5 years ago we were doing weekly blood pressure clinics. Due to lack of attendance and attendance by the same individuals only we gradually over the years cut the clinics down to once monthly. Blood pressure clinics continued to be attended by the same individuals, rarely a new client and all were receiving regular medical care by their providers. Our last blood pressure clinic was March 11, 2000 when COVID-19 response started. We have been asked once since then to take a blood pressure on a community member of which we did in the health department when they came in. As we are making plans to resume our public health services, we do not plan on continuing blood pressure clinics and rather devote our efforts to other necessary services.

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: **June 21, 2021**

DEPARTMENT: **Health Department**

FROM: **Deborah Armbruster**

SUBJECT: **Presentation of 2020 Annual Report**

ATTACHMENTS:

- 2020 Annual Report FINAL (PDF)

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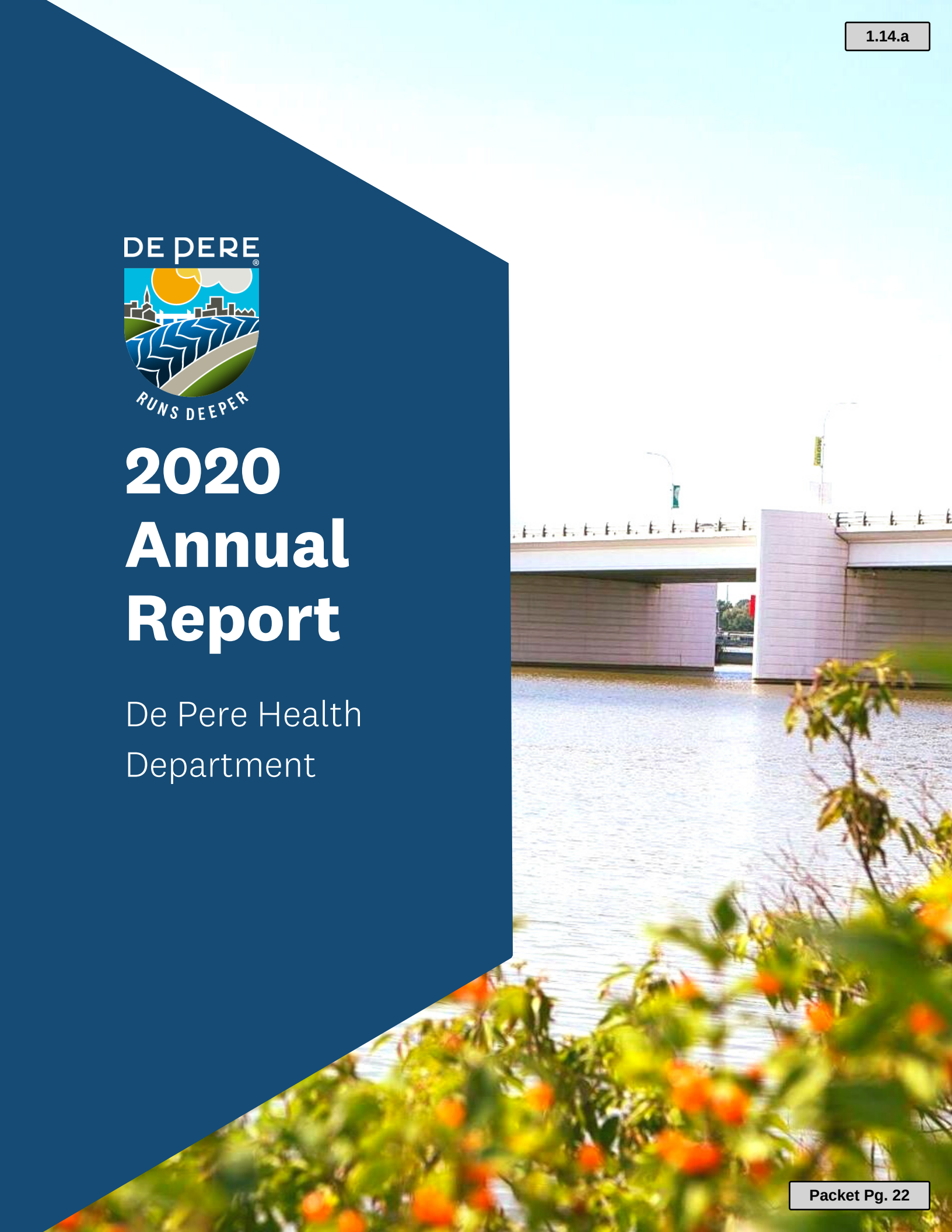
2020 Annual Report

De Pere Health Department



A Message from the Director

A YEAR LIKE NO OTHER

I am pleased to present the 2020 De Pere Health Department Annual Report. 2020 was certainly a year like no other, especially for public health. Our exceptional staff, supportive Board of Health and dedicated Medical Advisor deserve the acknowledgement of providing outstanding service to our community during the COVID-19 pandemic. It was “unchartered waters” for the world, but we remained steadfast in our work. We learned early on this was not going to be easy, and we remained committed to serving and protecting our community.

Through the strong partnerships we have with the De Pere Common Council, City Administration, the City of De Pere Fire and Police Departments, Regional and State Public Health professionals, Brown County Health and Human Services, Brown County Emergency Management, Brown County United Way, Aging and Disabilities Resource Center, Beyond Health Steering Committee, as well as our medical community, schools, local businesses, and non-profit organizations, we were able to direct our efforts from normal programming to pandemic response “on a dime” with their understanding and support.

The support I speak of also was given to us by our multiple grantors as they allowed us to use grant monies towards our COVID-19 response, understanding that we could not work on our grant initiatives during this time. In addition, we received generous grants from state and federal funding for COVID-19 response efforts so we could obtain necessary supplies and hire limited term employees to assist us with our work.

I am eternally grateful for the staff I have and the support from our City, which was exceptional this past year. The 2020 Annual Report is reflective of the unprecedented year we had and will give a comprehensive picture of the work we accomplished. We are eager for 2021 with the promise of COVID-19 vaccine to protect our society from the devastating effects of the pandemic and the anticipation of being able to pivot from response efforts to our important public health services and programming.

Thank you,
Deborah E. Armbruster, BSN, RN

ABOUT DE PERE HEALTH DEPARTMENT

Mission

De Pere Health Department provides community leadership to promote and protect the health of De Pere residents through prevention, education, and quality services.

Vision

De Pere, a community where all people can live well and flourish together.

Values

- Collaboration & Partnership
- Commitment & Dedication
- Community & Public Service
- Integrity

ESSENTIAL SERVICES

#1 Monitor health status to identify and solve community health problems

#2 Diagnose and investigate health problems and health hazards in the community

#3 Inform, educate, and empower people about health issues

#4 Mobilize community partnerships and action to identify and solve health problems

#5 Develop policies and plans that support individual and community health efforts

#6 Enforce laws and regulations that protect health and ensure safety

#7 Link people to needed personal health services

#8 Assure a competent public and personal health care workforce

#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health services

#10 Research new insights and innovative solutions to health problems

DE PERE BOARD OF HEALTH

2020 Members

Dennis Hibray, Chair - Citizen Member

Casey Nelson - Alderperson

Dr. Michael McHenry - Citizen Member

Kelly Ruh – Alderperson

Teresa Gulyas RN, MSN, MEd– Citizen Member

Dr. Steve Stroman – Medical Advisor

HEALTH DEPARTMENT STAFF

Health Officer/Director

Deborah Armbruster, BSN, RN

Public Health Nurse

Erin Bongers, BSN, RN (to July 2020)
Sara Lornson, BSN, RN
Danielle Jauquet, BSN, RN (August 2020 to present)

Environmental Health Sanitarian

Trista Groth, RS

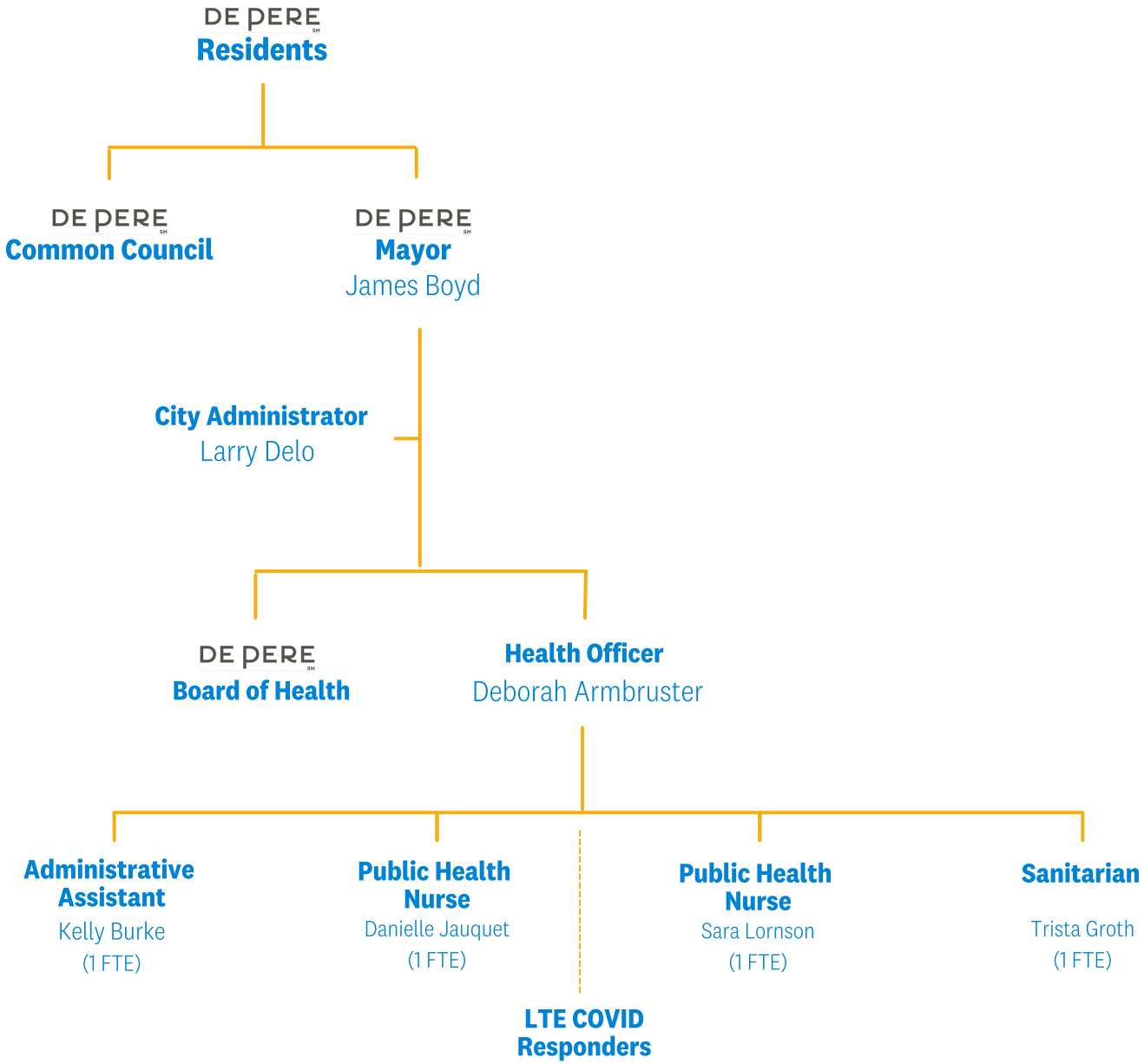
Administrative Assistant

Kelly Burke, BA

LTE COVID Response

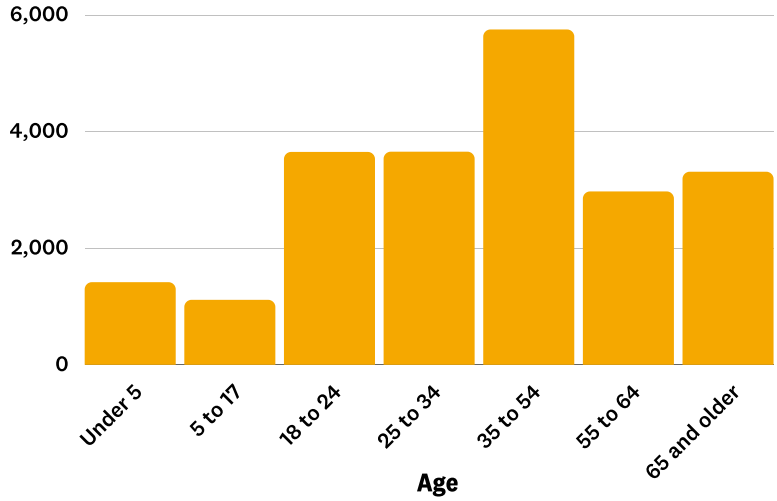
Debbie Stein
Emma Kane
Jaime Stein
Roseann Dichraff
Mac Kenzie Broeren
Colleen Messner

ORGANIZATION AT A GLANCE



DEMOGRAPHICS

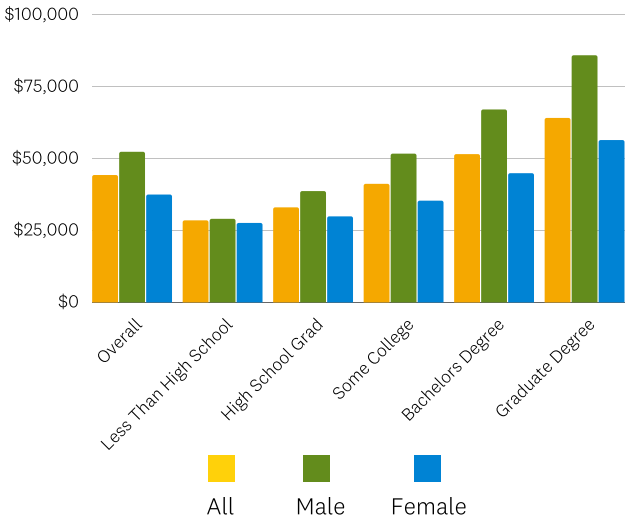
TOTAL POPULATION

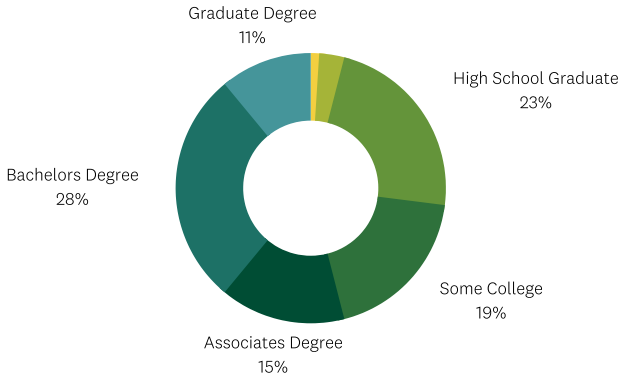


POPULATION BY RACE

White	91.15%	Black or African American	0.63%
Asian	3.20%	Some Other Race	0.35%
Two or More Races	2.53%	Native Hawaiian/ Pacific Islander	0.02%
American Indian/ Alaskan Native	2.12%		

EDUCATION AND INCOME





Pandemic Response: COVID-19

PREVENT. PROMOTE. PROTECT.

Never has the mission of public health - to prevent, promote, and protect - been more on display than in the year 2020. We do our best work behind the scenes, preventing problems before they arise. But the COVID-19 pandemic threw our work directly into the spotlight.

Protecting the health of everyone in the City of De Pere is not new to us. From our beginning, we have provided health services, education, and policies to protect our community. While we are well versed in our mission, the COVID-19 pandemic challenged us to rethink, reimagine, and redistribute our resources in ways we never could have imagined.

We developed and strengthened partnerships across the city. We responded to rapidly changing information with evidence-based systems and policies. Ultimately, we established a united front against one of the biggest health threats our community has faced. We remain grateful to many partners who came together to combat this pandemic.

In the pages that follow, we outline some of the major COVID-19 initiatives of our public health work this year. We hope this snapshot provides context to the many happenings over the last year.

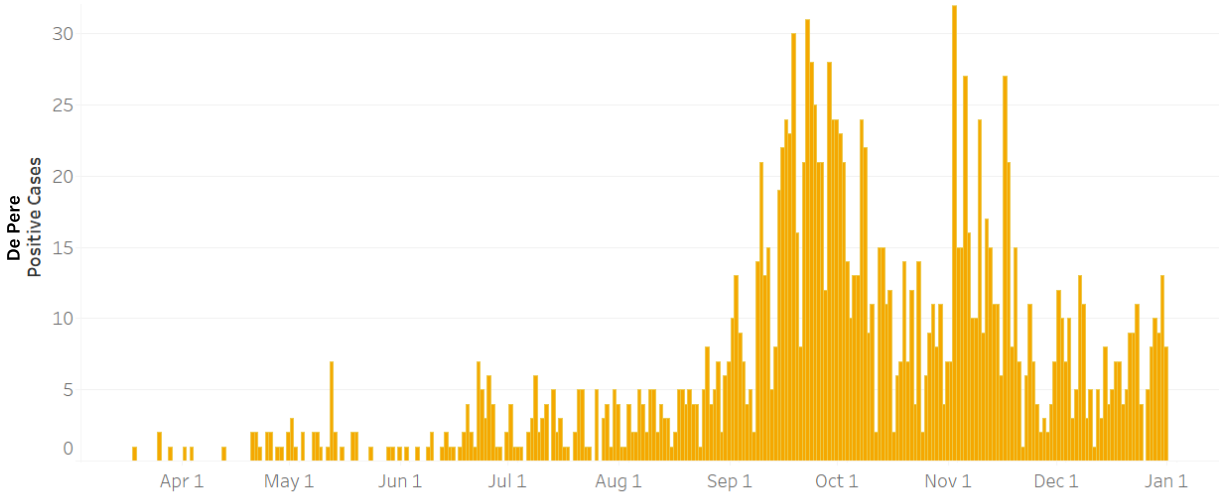
2020 COVID RESPONSE AT A GLANCE

COVID CASES 2208

Confirmed & Probable:

Confirmed Cases:
(+) PCR/NAA/RNA test

Probable Cases:
(+) Antigen/Rapid Test



DPHD Man-Hours 6135.25

Planning	**347.25**
Testing	**171.50**
Contact Tracing	**1156.00**
General COVID Work	**4135.50**
Other	**325.00**

Timeline of Events ..... Appendix 1

For a complete timeline of 2020 COVID-19 Response events, please see Appendix 1

EMERGENCY OPERATIONS

Purpose

The Emergency Operations Center (EOC) serves to supplement and assist State and local efforts to improve local capabilities to respond to emergencies, give strategic direction, and make operational decisions for the jurisdiction. The EOC in Brown County was located in Green Bay on the second floor of the Brown County jail and was made up of: the 3 health departments in Brown County including the health officers, Police, Sheriff and Fire departments, Human Services, Emergency Management among others. The Brown County EOC opened for COVID-19 response on March 14, 2020.

In response to local, state, and global health declarations that served to mitigate the spread of the novel coronavirus, SARS-CoV-2 (COVID-19) in late 2019 and early 2020, the North East Wisconsin Healthcare Emergency Readiness Coalition (NEW HERC) began coordinated regional response efforts on March 10, 2020. A coalition, which was made up of hospital executives, physicians, clinics, public health, emergency management, and others, created a regional response plan that included weekly meetings between partners over the course of 20 weeks.

Key Outcomes

- Development of testing sites
- Development of contact tracing guidelines
- Development of quarantine and isolation (Q/ISO) guidelines
- Establishment of working relationship between PH/HC systems and HERC

Partners

- See Appendix 2 for full list of NEW HERC partners

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#1 Monitor health status to identify and solve community health problems

LOCAL SURVEILLANCE

Purpose

The purpose of local surveillance is to measure and monitor disease activity, minimize spread, and predict future infections during a pandemic. Surveillance allows for crucial interventions such as contact tracing, information sharing, and planning. It also increases the understanding of factors contributing to disease spread and allows for specific and targeted intervention.

Key Metrics

- Confirmed cases
- Probable cases
- Negative cases
- Contact investigations
- Demographics
- Deaths
- Hospitalizations
- Active outbreaks

Data Sources

- Wisconsin Electronic Disease Surveillance System (WEDSS)
- Healthcare systems
- Long Term Care Facilities
- Other local Public Health agencies
- Schools and Daycares

Surveillance Execution

Data from WEDSS, including test results, case contacts, and lab reports were analyzed daily to inform daily case count reports. Daily reports were sent to key community partners and made available to the public via DPHD website and social media platforms.

As of December 31, 2020 the City of De Pere reported 2208 positive COVID-19 cases, 19 deaths, and 2053 recoveries from illness among residents.

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#1 Monitor health status to identify and solve community health problems
#4 Mobilize community partnerships and action to identify and solve problems

COMMUNITY TESTING

Purpose

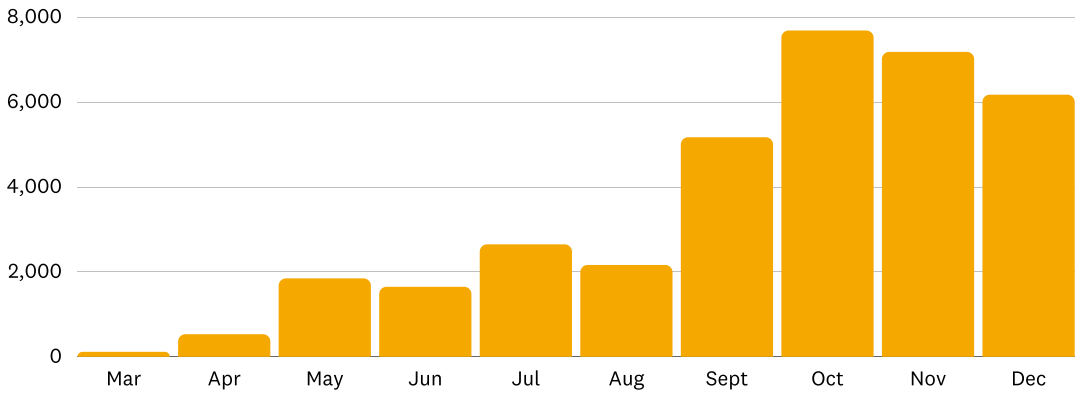
Testing is used to identify individuals that have been infected with a virus or disease. Sustainable testing capacity during a communicable disease outbreak, especially a pandemic, is essential to identify cases in order to mitigate disease spread within communities through isolation, quarantine, and treatment.

Key Partners

- Wisconsin State Laboratory of Hygiene
- Prevea Health
- Bellin Health
- Advocate Aurora
- HSHS
- De Pere Fire Department
- St. Norbert College (SNC)
- Brown County Public Health
- Wisconsin National Guard (WING)
- Long-Term Care/Assisted Living/Group Home Facilities

De Pere Testing - Total Tests per Month

De Pere Residents March 3 - December 31, 2020



PUBLIC HEALTH ESSENTIAL SERVICES MET:

#1 Monitor health status to identify and solve community health problems
#2 Diagnose and investigate health problems and health hazards in the community
#4 Mobilize community partnerships and action to identify and solve problems

ISOLATION AND QUARANTINE

Purpose

Isolation of confirmed or probable infectious disease cases is imperative to contain an outbreak. This is true for common diseases but is critically important during a pandemic caused by a novel pathogen. Isolation and quarantine are key tools in curbing the spread of infectious disease by limiting movement and contact with others once a confirmed or possible case of a disease has been identified. In coordination with Brown County partners, DPHD established an Isolation and Quarantine site open to any Brown County resident in need and assisted in making other isolation and quarantine plans with key local partners.

Isolation

- the act of separating an individual infected with disease from others to stop the spread of disease

Quarantine

- separating an individual who has been exposed to disease from others to stop the potential spread of disease

Key Outcomes

- Development of nursing home plans for ISO/Q and return to home
- Development of school plans for ISO/Q
- Development of business plans for ISO/Q
- PPE procurement for Long Term Care Facilities and schools

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#4 Mobilize community partnerships and action to identify and solve problems
#6 Enforce laws and regulations that protect health and ensure safety

COMMUNITY MITIGATION

Purpose

Efforts to minimize risk, and reduce morbidity and mortality are central to a successful and comprehensive pandemic response. In addition to testing, isolation, and quarantine, we utilized a number of other community mitigation strategies.

Community Restrictions

Community-wide restrictions decrease disease spread by limiting interactions among residents. When required, all orders are issued by the City of De Pere in coordination with the Health Officer and City legal department.

- May 2020: City of De Pere "Safer at Home" Order in place to reduce community spread, increase PPE supply, and implement community testing strategies.
- August 2020 - Spring 2021: City of De Pere "Mask Mandate" in place to align with available science regarding preventing the spread of COVID-19.

Education & Outreach

In a novel pandemic, knowledge and information change rapidly. It is imperative to stay on top of evidence-based guidelines to best serve and protect our community. DPHD made every effort to continuously provide up-to-date education and outreach to all of our partners and residents.

- Developed policies and procedures with City Administration to keep the City running
- Worked with EMS to initiate PPE use requirements, equipment set up practices, and case identification measures (before testing made widely available)
- Established city-wide reopening metrics for community businesses, schools, and Long-Term Care Facilities (LTCF)
- Utilized social, digital, news, and print media to encourage residents to stop the spread with evidence-based practices: masking, social distancing, contact tracing

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#3 Inform, educate, and empower people about health issues
#4 Mobilize community partnerships and action to identify and solve problems
#6 Enforce laws and regulations that protect health and ensure safety

CONTACT TRACING

Purpose

Contact tracing is an evidence-based method to slow the spread of communicable disease. It is the process of identifying individuals exposed to a disease and providing the recommendations and resources needed to prevent exposing others. DPHD regularly uses contact tracing for a variety of diseases, such as meningitis and sexually transmitted infections (STIs).

In March 2020, all public health staff were reassigned to respond to COVID-19. They were trained to complete positive case investigations and contact tracing. Additional De Pere city staff were also utilized to support COVID-19 efforts.

Process

- Case Identification: positive disease notification received via WEDSS.
- Case Investigation: Public Health staff contacts patients with an identified disease to ensure disease status is known, and help them recall everyone with whom they have had close contact within the infectious period.
- Close Contact Tracing: Public Health staff begin by notifying exposed individuals (contacts) of their potential exposure to the positive case as rapidly and sensitively as possible. The infected patient's identity is not revealed.
- Close Contact Support: Contacts are provided with disease specific education, information, and support to help them understand their risk, how to prevent the spread of disease to others, and how to monitor themselves for illness. If contacts need to be tested, information on how to access testing is provided.
- Close Contact Self-Quarantine: Contacts are encouraged to adhere to specific guidelines and health practices

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#2 Diagnose and investigate health problems and health hazards in the community
#6 Enforce laws and regulations that protect health and ensure safety
#7 Link people to needed personal health services
#8 Assure competent public and personal health care workforce

CONTACT TRACING

The number of calls to infected residents and their contacts rose exponentially as the virus spread. As of December 31, 2020 DPHD staff made multiple calls to each of the 2208 positive cases, with interviews lasting 10-30 minutes each. This activity consumed the bulk of public health staff attention in 2020.

Due to overwhelming number of cases across state and locally, DHS increased their contact tracing team capacity to help with local response. In addition, DPHD hired three LTE Responders to assist with these efforts.

Disease Investigations

2217

Outbreak Investigations

62

Case Letters

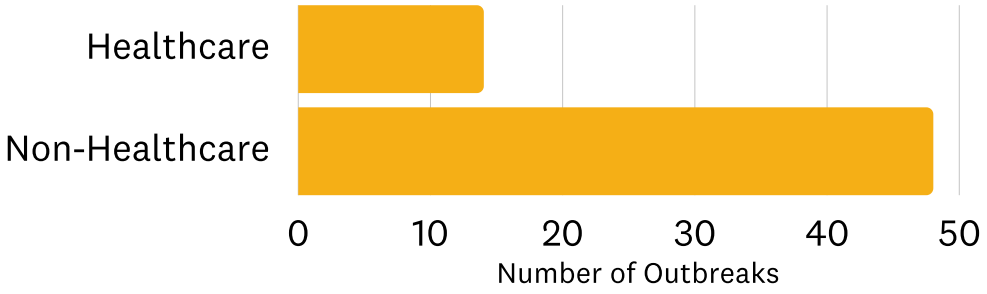
1447

Outbreaks

Outbreaks are a sudden increase of disease incidence. Public health disease investigators provide education on outbreak management to affected facilities, businesses, and organizations. If additional contact tracing support is needed, other public health staff or temporary contact tracers are assigned to the outbreak to assist. An outbreak of COVID-19 is considered: one confirmed case in a healthcare or LTCF, or two confirmed cases in other settings.

De Pere COVID-19 Outbreaks

March - December 2020



STAKEHOLDER ENGAGEMENT

Purpose

Concise, accurate communication with the public is essential during a crisis. During a communicable disease pandemic, face-to-face contact is limited. The media and social network platforms are the primary sources for information distribution.

Press Releases	News Interviews	Facebook Posts	Situation Reports
7	4	253	278

Key Partners

Strong partnerships were essential to a uniform and united response to protect the De Pere community. DPHD is grateful and indebted to these relationships and looks forward to all we will accomplish in the future as a result of our working together through this pandemic.

- De Pere Schools
  - De Pere Unified School District
  - West De Pere School District
  - Syble Hopp School
  - Our Lady of Lourdes
  - Notre Dame
- St. Norbert College (SNC)
- St. Norbert Abbey
- Brown County Public Health
- Oneida Public Health
- De Pere Fire Department
- City of De Pere Departments & Staff
- Healthcare Systems
  - Aurora
  - Bellin
  - Prevea/HSHS
- De Pere Long Term Care/Assisted Living
  - Rennes Health & Rehab Center
  - Renaissance
  - Residence by Rennes

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#4 Mobilize community partnerships and action to identify and solve problems
#7 Link people to needed personal health services

VACCINATION PREPARATIONS

Purpose

Mass vaccination remains the end-goal for the COVID-19 pandemic. Vaccinating everyone quickly and efficiently requires planning and preparation that DPHD is uniquely qualified for as a result of years of practice with flu clinics and emergency preparedness grants. Successful mass vaccination includes convenient and accessible locations, properly trained workforce, strong community partnerships as well as coordinated and consistent vaccine supply.

With Emergency Use Authorization (EUA) granted for two vaccines in December 2020, DPHD initiated mass vaccination plans and began preparations to vaccinate the most vulnerable De Pere residents against COVID-19.

Timeline

September 2020: Mass Vaccination Plan completed
December 2020: EUA granted for two COVID-19 Vaccines
December 1, 2020: De Pere Health Department Tier 1A Vaccination Plan drafted, targeting EMS and School Nurses
December 28, 2020: DPHD receives new freezer to properly store vaccine onsite.

Key Partners

- Prevea Health
- Bellin Health
- De Pere Fire Department
- St. Norbert College (SNC)
- Brown County Public Health
- Oneida Public Health
- NEW HERC
- WI DHS

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#4 Mobilize community partnerships and action to identify and solve problems
#7 Link people to needed personal health services

KEY CHALLENGES & LESSONS LEARNED

Any time you're navigating uncharted waters, you will be faced with many obstacles. While daunting at the time, we believe the challenges presented to us over the last year will provide us many opportunities for growth. Below, we highlight some of our biggest challenges in response to COVID-19, and lessons we've already begun to learn.

Challenges

The novel nature of the virus made for many unknowns that hindered planning and response efforts, especially early on.

- Initially, there was little information on how the virus spread, which greatly affected mitigation efforts.
- Information changed rapidly, sometimes hourly, making it difficult to stay on top of evidence-based information and communicate effectively.
- CDC and WI DHS were not always in alignment on recommendations, or a lag in local uptake of federal guidelines created confusion for the community.

Limited resources including staff time, PPE, and training.

- Limited funding for public health infrastructure over time, has restricted the workforce and the resources necessary for a comprehensive emergency response.
- DPHD needed to quickly expand the employee base to meet all of the needs of the community.

The virus, its response, and health became political, which created division within the community.

- Division at all levels of government affected how public health was received across the community making it difficult to bridge gaps, create unity, and act effectively at the local level.

The prolonged nature of this threat tested systems, structures, and patience of everyone.

KEY CHALLENGES & LESSONS LEARNED

We've learned a lot since March 2020, and we will continue to learn from our response to the COVID 19 pandemic. Below, we begin to reflect on some key lessons that will undoubtedly shape our work moving forward.

Lessons Learned

Partnerships are key to building trust, sustaining efforts, and achieving outcomes.

- Our partners relied on us just as much as we relied on them. Without strong connections with our community before and during the pandemic, we could not have done our work effectively.

We must take care of our workforce as equally as we take care of our community.

- Public Health professionals are helpers by nature. We are willing to go above and beyond to ensure the health and safety of our community. However, in order to take care of others, we must also take care of ourselves. We've learned that we need to make self-care a priority in order to do our best work.

Having the right people in place with the right mindset, flexibility, and desire for growth is invaluable.

- We were able to adapt and respond quickly to ever-changing events because of the resilience and flexibility of our staff and partners.

Documentation is critical.

- Early on, we began documenting our response with daily SITREPs and partners' notification messaging. This communication became critical to an evidence-based response and aided in making important decisions throughout the year.

Public Health Services

EMERGENCY PREPAREDNESS

- Bleeding Control Training
- Bloodborne Pathogen Training
- Emergency Management Support
- Respirator Fit Testing

ENVIRONMENTAL HEALTH

- Food & Recreational Businesses – Licensing and Regulation
- Health Hazards and Nuisance Response
- Animal Bites – Rabies Prevention
- Radon Testing & Education
- Weights & Measures

FAMILY HEALTH

- Blood Pressure Screenings
- Childhood Lead Poisoning Prevention
- Communicable Disease Follow Up
- Home Visitation & Lactation Counseling
- Immunization

INJURY PREVENTION

- Bicycle Safety
- Child Passenger Safety
- Fall Prevention/Stepping On
- Maternal and Child Health
- Safe Sleep
- Suicide Prevention

EMERGENCY PREPAREDNESS

Purpose

Through Public Health Emergency Preparedness (PHEP) DPHD works to increase the capacity of the community to effectively respond to public health emergencies through assessment, planning, training, collaboration, and community education.

DPHD focuses on ensuring families, schools, and businesses are well prepared to handle emergencies that threaten health and safety. Practices and procedures put into place over the last two years since DPHD secured its own Preparedness Coordinator significantly helped our COVID response efforts.

Six Domains of Preparedness

- Community Resilience: preparing for and recovering from emergencies
- Incident Management: coordinating an effective response
- Information Management: providing information to take action
- Countermeasures and Mitigation: getting medicine and supplies where needed
- Surge Management: expanding medical serves to handle large events
- Biosurveillance: investigating and identifying health threats

Bleeding Control

Bleeding Control Kits are designed to provide essential equipment that empowers the general public to take action as immediate responders in stopping life threatening bleeding. Health and Fire Department staff trained community responders at local churches, schools, and various city departments in bleeding control.

- 4 trainings held; 105 people trained
- 35 Bleeding Control Kits placed with local organizations

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#2 Diagnose and investigate health problems and health hazards in the community
#6 Enforce laws and regulations that protect health and ensure safety

ENVIRONMENTAL HEALTH

Purpose

The Environmental Health program protects health and safety through regulatory activities in restaurants and retail food establishments, public swimming pools, lodging facilities, tattoo/body piercing establishments, and facilities with weights and measures devices. In addition, during the COVID pandemic the environmental health assisted De Pere establishments with safe COVID operating and re-opening practices, outbreak response, and mask compliance follow up.

Inspections

- 155 Routine and Pre-Inspections conducted in license year 2019-2020
  - 114 Inspections for calendar year 2020
- 95% of facilities inspected
  - 9 facilities unable to be inspected; closed for COVID

Human Health Hazard/Nuisance Response

- 26 Total Complaints
  - Noise, mold, rats, trash/junk

Animal Bites – Rabies Prevention

- 27 Bites
  - 26 Dog; 1 Cat
- 1 Dangerous Animal Determination [De Pere Municipal Code Section 86-4(c)]

Weights & Measures

- 7 Inspections
  - 6 gas stations; 1 retail price verification

Radon Testing & Education

- 14 radon test kits distributed
- Education provided via social media and visual display at City Hall

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#2 Diagnose and investigate health problems and health hazards in the community
#6 Enforce laws and regulations that protect health and ensure safety

FAMILY HEALTH

Purpose

Family Health Services provided by the De Pere Health Department support the health and wellbeing of everyone who lives, works, and plays in De Pere.

Blood Pressure Screens

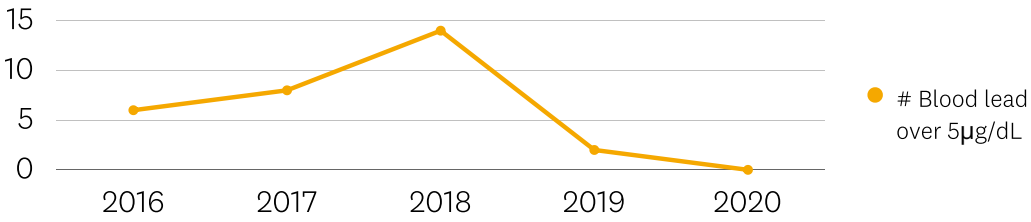
- 3 Clinics
- 31 people screened

Immunizations

- Vaccines for Children: 14
- Vaccines for Adults: 9
- 241 total influenza vaccinations

Lead Poisoning Prevention

- 334 Blood Level Level Screens
- 0 children with blood lead level over 5µg/dL; no investigations



Library Picnic & Play

- 15 caregivers attended
- 30 children attended

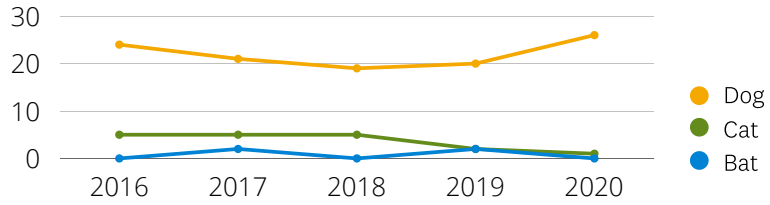
PUBLIC HEALTH ESSENTIAL SERVICES MET:

#3 Inform, educate, and empower people about health issues

COMMUNICABLE DISEASE

CD Follow Up

- Acute Gastroenteritis Outbreaks
  - 1 (Norovirus)
- Acute Respiratory Illness (non-COVID)
  - 0
- Animal Bites



2020 Confirmed and Probable CD Investigations

Disease	Total
Chlamydia Trachomatis	77
Coronavirus	2208
Ehrlichiosis / Anaplasmosis	1
Giardiasis	1
Gonorrhea	16
Haemophilus Influenzae Invasive Disease	1
Hepatitis C	3
Invasive Streptococcal Disease (A And B)	3
Lyme Disease	5
Mumps	1
Salmonellosis	2
Streptococcus Pneumoniae Invasive Disease	2
Syphilis	1
Latent Tuberculosis	4
	2325

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#2 Diagnose and investigate health problems and health hazards in the community

INJURY PREVENTION

Purpose

As a function of our work within the Maternal and Child Health (MCH) program, injury prevention programs seek to stop harm before it happens. Knowing most injury can be prevented with the right systems and structures in place, DPHD invests time, energy, and resources to ensure we are capable of providing necessary education and resources to the community.

Child Passenger Safety

- 4 Clinics
  - 11 Car Seats Installed
  - 100% of parents able to verbalize knowledge of, and demonstrate proper car seat installation technique

Suicide Prevention

- 1 QPR (Question, Persuade, Refer) Training
- 30 Gatekeepers Trained

GrapeVine Adult Health Education

- 1 Session
- 16 Participants

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#3 Inform, educate, and empower people about health issues

Community Health Improvement Process

BEYOND HEALTH

The Brown County Community Health Needs Assessment was conducted on October 17, 2017. This event brought together 120 community stakeholders who reviewed and discussed community health data based on the health focus areas cited in Healthiest Wisconsin 2020. Three health priorities were chosen: Obesity, Mental Health, and Drugs and Alcohol.

The 2018-2020 Community Health Improvement Plan (guided by leaders from Beyond Health) has three action groups which help set health goals for our community and detail the steps that will be taken to accomplish those goals.

HEALTH PRIORITIES

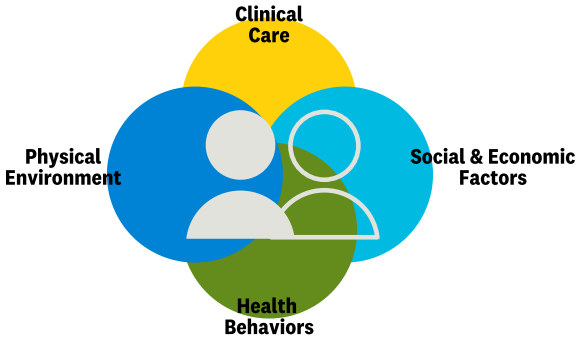
COMMUNITY HEALTH

Purpose

Every three years, Beyond Health completes an assessment of overall health and chooses three top health priorities to address. Community feedback is essential for success in our Community Health Improvement Plan (CHIP).

What determines health?

We know that our health is determined by more than just our choices as an individual. Because of this, we can't simply look at health outcomes when gauging and working to better the health of the community. We must look at the REASONS why gaps in health exist.



2020 Health Priorities

The proposed 2020 Community Health Priorities seek to understand WHY health gaps in health exist in our community.

1. Equitable Access - Take steps to level the playing field and build trust by calling out discrimination and racism and focusing on marginalized voices in the community
2. Social Cohesion - Help people connect with each other and their community in healthy ways
3. Unified Planning and Policy - Make sure health, equity, and inclusivity are on the top of our minds whenever we create policies and plans for our community

PUBLIC HEALTH ESSENTIAL SERVICES MET:

#1 Monitor health status to identify and solve community health problems

2020 Financial Statement

FINANCIAL TARGETS

	Budget	6 Month Actual	Year End Estimate
Revenue	$552,767	$239,680	$534,592
Expenditures	$552,767	$239,680	$534,592

REVENUE BREAKDOWN

	Budget	6 Month Actual	Year End Estimate
Public Health	$3,000	$190	$500
Licensing/Permits	$80,000	$33,490	$76,919
Health Grants	$68,166	$31,925	$70,187
Weights/Measures	$19,000	$17,113	$21,564
City Tax Levy	$382,601	$156,962*	$365,422

*$290,574 in COVID-19 grant dollars significantly offset the need to use tax levy in 2020.

EXPENSE BREAKDOWN

	Budget	6 Month Actual	Year End Estimate
Personnel	$471,499	$219,180	$484,688
Contractual	$5,000	$3,519	$4,760
Supplies	$76,268	$16,981	$45,144
Capital	$0	$0	$0

TOTALS

	Budget	6 Month Actual	Year End Estimate
	$552,767	$239,680	[illegible]

Appendix 1: COVID Response Timeline

March 2020

- First confirmed case of COVID-19 in De Pere.
- City of De Pere declares a state of emergency. Non-essential services are temporarily suspended and city facilities are closed to the public.
- Emergency Operations Center (EOC) for De Pere opens in the Health Department.
- Wisconsin “Safer at Home" order in place
- Health Officer begins assisting Human Resources in City COVID-19 response; developing policies and procedures.

April 2020

- DPHD nurses train additional Health Department Staff, St. Norbert College Health Services Staff, City of De Pere Staff, Medical College of Wisconsin (MCW) Students, and Syble Hopp School Nurse how to do contact tracing.
- DPHD nurses begin working every weekend to follow up with positive cases and contacts in a timely manner.
- Health Officer participates in a regional Facebook Live campaign sharing crucial facts and information on testing.
- DPHD receives additional COVID-19 Public Health Emergency Preparedness (PHEP) funding through WI Department of Health Services (DHS) and CDC to help with local COVID-19 response efforts.
- Education and outreach on COVID-19 mitigation strategies is provided to local group homes, local/ area business, food establishments, long term care facilities, faith-based organizations, and childcare centers.
- DPHD secures testing supplies through Wisconsin State Lab of Hygiene (WSLH) and Prevea Health, and begins COVID-19 testing in De Pere long term care facilities with the assistance of De Pere Fire Department.
- Health Officer transitions from position as Incident Command for De Pere Health Department to the Brown County EOC.

May 2020

- Due to large outbreaks within Brown County, DPHD nurses begin assisting Brown County Public Health with case follow up and contact tracing efforts.
- Local businesses begin asking for guidance on isolation and quarantine as well as safe operating practices.
- DPHD nurses share guidance on COVID-19 mitigation with childcare centers within City of De Pere and Brown County.
- COVID-19 outbreaks in both De Pere and Brown County businesses continue to rise.
- Facility-wide testing continues at long-term care facilities.
- DPHD assists St. Norbert Abbey with procurement of PPE and testing supplies.
- DPHD begins meeting with all of the school districts within Brown County to discuss summer school and fall re-opening plans.
- Health Officer continues in role as Incident Command for De Pere at the Brown County EOC, which moves to Brown County Emergency Management.
- The City of De Pere puts into effect “Safer at Home” order prompting numerous calls to the Health Department from the community seeking clarification.
- PPE and testing supplies become limited. EMS, healthcare systems and schools raise concerns about procuring PPE.
- Brown County EOC begins working with the State Emergency Operations Center (SEOC) to secure PPE for our NEW HERC region.

June 2020

- DPHD Staff meet virtually with all school district nurses to discuss COVID-19 needs and response efforts in schools.
- Businesses continue to seek resources on COVID-19 mitigation strategies.
- DPHD receives additional COVID-19 grant funding through WI DHS and CDC “CARES Act” to assist with COVID-19 response.
- DPHD works with De Pere Fire Department (DPFD) to provide on-site COVID-19 testing to local group homes and long-term care facilities.
- DPHD hires COVID Response Coordinator, the department's first LTE employee, that is funded entirely through COVID grants.
- Health Officer transitions out of role as Brown County Incident Command back to De Pere Health Department.

July 2020

- DPHD assists St. Norbert College with their first COVID-19 case on campus.
- Due to increased cases, DPHD nurses continue to work every weekend and holidays.
- Rennes Health and Rehab begins testing staff and residents every 2 weeks with continued support from DPHD.
- Renaissance Assisted Living begins routine testing of staff and residents.
- DPHD begins interviewing for open Public Health Nurse position.

August 2020

- Governor Ever's passes a state-wide mask mandate, effective 8-1-2020.
- The City of De Pere also passes an ordinance mandating masks that begins 8-4-2020.
- DPHD staff continue to meet with De Pere Schools regarding summer school and reopening plans for fall.
- DPHD fields an influx of phone calls from concerned community members regarding school re-opening plans.
- DHS and Department of Public Instruction (DPI) provide official guidance on school re-opening, but do not include metrics for school closures due to outbreak.
- DPHD works with SNC on their first case of the school year, which quickly becomes an outbreak.
- A new Public Health Nurse is hired at DPHD.

September 2020

- DPHD COVID-19 Pandemic Response Plan completed.
- Final draft of DPHD Testing Strategy Plan submitted to the state.
- DPHD staff begin working with local schools on outbreaks and contact tracing efforts.
- DPHD staff virtually meet weekly with all school nurses from De Pere Schools.
- The City of De Pere reports its first COVID-19 death.
- Increased case activity causes Rennes Health & Rehab and Renaissance Assisted Living Facility to lock down.
- Local and regional hospitals begin to see an increase in hospitalization and raise concerns about surge capacity, staffing, and PPE.

September 2020 (con't)

- WI DHS releases a new data dashboard and COVID-19 mitigation strategies based on activity levels.
- DPHD begins sending letters to individuals that test positive within the City of De Pere to provide education, guidance, and information on isolation and quarantine.
- DPHD begins to utilize the State Contact Tracing Team (CTT) to assist with positive case follow up and contact tracing.

October 2020

- DPHD increases efforts to provide trusted information to residents on strategies to decrease risk of contracting and spreading the virus. All residents receive a letter in the mail from DPHD and an electronic billboard is utilized to encourage everyone to do their part to "Stop the Spread."
- DPHD hires another grant-funded LTE position to assist with COVID response efforts.
- The number of positive COVID cases in De Pere and surrounding jurisdictions exceeds the capacity of both DPHD and WI DHS. The state CTT is >10 days behind on contacting cases and decides to move to calling the most recent cases first rather than the oldest cases. This means there are cases that were already past their infectious period and closed by the state without contact tracing. This is in order to focus on cases that will have the biggest public health impact and to attempt to decrease the backlog of cases throughout our region. All De Pere cases are mailed a letter from DPHD with information regarding their positive test and what to do about their close contacts along with DHS COVID-19 factsheets and resources.
- An outbreak at Homes for Independent Living at Fox Run leads to all-resident testing.
- DPHD advises against in-person learning. De Pere schools operate independently throughout the fall and continue to work with DPHD to implement ever changing guidelines
- DPHD makes data reporting in our situation report more efficient, clear, and consistent. SITREPs now include county hospital data, and WI DHS COVID-19 Disease Activity Dashboard.

October 2020 (con't)

- City of De Pere, along with the City of Green Bay, advise against in person trick or treating in a press release.
- DPHD and DPFD host mass flu-vaccination clinics at the De Pere Community Center.
- DPHD partners with BCPH and Oneida Public Health to address record number of positive cases in Brown County by issuing a second Public Health Emergency COVID-19 Alert.

November 2020

- Due to the record spike in COVID-19 cases, and continued response efforts, Governor Ever's issues Executive Order #94
- DHS Adds "Critically High" Category to Disease Activity Dashboard Showing Impact of COVID-19.
- DPHD hires another grant-funded LTE position to assist with COVID response efforts.
- Governor Evers extends mask mandate and state of emergency until mid-January. City of De Pere continues to have mask mandate.
- DPHD participates as a panelist in the "Faces of COVID" media briefing and shares experience as a PHN/contact tracer throughout the COVID pandemic with PBS Interview.
- DPHD and DPFD host successful "drive thru" flu clinic in preparation for COVID vaccination.

December 2020

- DHS launches new map visualizations providing additional geographic breakdowns for COVID cases and deaths. New geographies include municipalities, zip codes, and school district boundaries.
- CDC and WI DHS continue to recommend a 14-day quarantine after close contact with a positive COVID-19 case (and after travel). The incubation period for COVID remains 14 days. HOWEVER, two alternative options for quarantine are made available based on when people are most likely to develop disease in order to ease the burden that an extended quarantine creates.

December 2020 (con't)

- DHS releases Health Alert Network #23 adopting the updated CDC guidance on options to reduce quarantine for individuals exposed to COVID-19. The changes go into effect December 7, 2020
- Emergency Use Authorization (EUA) in granted by FDA on December 11, 2020 to the Pfizer COVID-19 vaccine.
- The Advisory Committee on Immunization Practices (ACIP) votes on 12/12/2020 to recommend the use of the vaccine and the director of the Centers for Disease Control and Prevention (CDC) accepts those recommendations for persons aged 16 years and older.
- Vaccine shipments begin to arrive in Wisconsin on 12/14/2020 at designated regional hubs. Prioritization is given to hospitals and clinics as initial vaccination sites so as to reach front-line healthcare workers, as recommended both by ACIP and the State Disaster Medical Advisory Committee.
- DPHD begins actively planning for vaccine clinics to start in January 2021.
- FDA gives temporary approval to use every full dose obtainable (6 or possibly 7 doses vs. expected 5) from each COVID-19 vaccine vial. However, since these are preservative free vials, liquid CANNOT be pooled from multiple vials to create one dose.
- Emergency Use Authorization (EUA) is granted by FDA on December 18, 2020 to the Moderna COVID-19 vaccine.
- Shipments of the Moderna vaccine are expected to arrive in Wisconsin beginning December 22 with the expectation that vaccine supply will increase substantially in 2021.
- WI Exposure Notification, a new mobile app to assist in notifying contacts of people who've tested positive for COVID-19, goes live.
- DHS releases two data visualizations for COVID-19 vaccines on a dedicated COVID-19 Vaccine Data webpage. The visualizations allow Wisconsinites to broadly view the Wisconsin COVID-19 Vaccine Program as it moves through Phase 1a of rollout and beyond.
- DPHD enters full mass vaccination preparation mode and takes shipment of a dedicated freezer to store vaccine to administer at mass vaccination clinics in 2021.
- A sense of hope, and cautious optimism, begins to emerge.

Appendix 2: NEW HERC Partners

Federal

- Assistant Secretary for Preparedness and Response (ASPR)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Federal Emergency Management Agency (FEMA)

State

- Wisconsin Department of Health Services (DHS)
- Wisconsin Division of Public Health (DPH)
- Wisconsin Division of Quality Assurance (DQA)
- Wisconsin Emergency Management (WEM)
- Wisconsin Hospital Association (WHA)
- Office of Preparedness and Emergency Health Care (OPEHC)

Regional

- North Central Wisconsin Healthcare Readiness Coalition
- NEW HERC board
  - Steven Pelch – Coordinator – Supporting the Wisconsin Office of Preparedness and Emergency Health Care
  - Genevieve Willemon – President
  - Bill Manis – Vice President
  - Eric Braun – Secretary
  - Kevin Siehr – Treasurer
  - Stephanie School – Hospital Representative
  - Sara Lornson – Public Health Representative
  - Nancy Bohrman – Long Term Care Representative
  - Debbie Holschbach – EMS Representative
  - Lauri Maki – Emergency Management Representative
  - Chris Hohol – Fire Representative
  - Kaylynn Gresham – Oneida Nation Representative
  - Brian Kohlmeier – Law Enforcement Representative
- Regional Trauma Advisory Council (RTAC)
- Wisconsin Association of Local Health Departments and Boards (WALHDAB)

Public Health

- Brown County Public Health
- De Pere Health Department
- Door County Public Health
- Florence County Health Department
- Kewaunee county Public Health Department
- Manitowoc County Public Health
- Marinette County Public Health
- Oconto County Public Health

Hospitals

- Aurora Bay Area Medical Center
- Aurora Baycare Medical Center
- Aurora Medical Center Manitowoc
- Bellin Memorial Hospital
- Bellin Health Oconto Hospital
- Door County Medical Center
- Holy Family Memorial Hospital
- St. Clare Memorial Hospital
- St. Mary's Hospital Medical Center
- St. Vincent Hospital

CMS – Home Health Agencies

- Bellin Home Health Care
- Door county Memorial Home Health
- Dickinson Home Health
- Evergreen at Home – Home Health
- Homecare Advantage
- Interm Healthcare of Northeast WI
- Marquardt Home Health
- PRN Home Health and Therapy
- Recover Health
- Woodland Village Home Health

CMS – Long Term Care

- Algoma Medical Center
- Anna John Resident Centered Care Community
- Atrium Post Acute Care of Kewaunee
- Atrium Post Acute Care of Oconto Falls
- Atrium Post Acute Care of Two Rivers
- Bornemann Senior Communities
- Brown County Treatment Center Bayshore Village
- Crossroads Care Center of East Green Bay
- Crossroads Care Center of West Green Bay
- Door County Memorial Hospital Skilled Nursing
- Edenbrook
- Golden Living Center- Florence Golden Living Center – Village Gardens
- Good Samaritan Society – Scandia Village
- Grancare Nursing Center
- Luther Home
- Manitowoc Health Care Center
- Maple Ridge Rehabilitation and Care Center
- Maryhill Manor
- NEWCare
- Odd Fellow Home
- Parkview Manor Health Rehabilitation Center
- Rennes Health and Rehabilitation Center – East
- Rennes Health and Rehabilitation Center – West
- Rennes Health and Rehabilitation Center – De Pere
- Rivers Bend Health and Rehabilitation
- Shady Lane Nursing Care Center
- St. Mary's home for the Aged
- The Bay at Oconto Health and Rehabilitation Center
- The Bay at North Ridge Health and Rehabilitation Center
- The Bay at Suring Health and Rehabilitation Center
- Woodland of Gillett
- Woodside Lutheran Home

CMS – Hospice

- Aseracare
- Aurora at Home
- Compassus – Green Bay
- Heartland Home Health and Hospice
- Holy Family Memorial Hospice
- Homecare Health Services Hospice
- Hometown Hospice and Homecare
- Le Royer Hospice
- Serenity Hospice Care
- Southerncare Green Bay
- St. Paul Hospice Services
- Thedacare At Home
- Unity Limited Partnership
- UP Health System Home Care and Hospice

Emergency Management

- Brown County
- Door County
- Florence County
- Kewaunee County
- Manitowoc County
- Marinette County
- Oconto County
- Oneida Nation Emergency Management

EMS

- Algoma Fire and Rescue
- Ashwaubenon Public Safety
- Bay Area Medical EMS
- Brazeau Ambulance
- Coleman Area Rescue Squad
- Community Ambulance Services
- County Rescue Services Inc
- Crivitz Rescue Squad
- De Pere Fire Rescue
- Door County Emergency Medical Services
- Emergency Rescue Squad
- Florence County Rescue Squad
- Florence County Rescue Squad DBA AHRS
- Gillett Area Ambulance Services
- Goodman-Armstrong Rescue Squad
- Green Bay Metro Fire Department
- Kewaunee Area Ambulance Service
- Long Lake Fire Department EMS
- Lang Lake – Tipler Rescue Squad
- Luxemburg Emergency and Rescue Association
- Manitowoc Fire and Rescue
- Mishicot Area Ambulance Service
- Mountain Ambulance Service
- Niagara Area Emergency Unit
- Oconto Falls Area Joint Ambulance
- Oconto Fire Rescue
- Para Tran Ambulance
- Pembine – Dunbar – Beecher Rescue Squad
- Silver Cliff Rescue Squad
- Twin Bridge Rescue Squad
- Two Rivers Fire Department
- Valders Fire Department Ambulance Service
- Wausaukee Rescue Squad

Other Partners

- City of De Pere
- Oneida Nation
- City of Ashwaubenon
- Brown County Sheriff's Office
- Brown County Highway Department
- Green Bay Police Department
- Green Bay Metro Fire Department
- Suamico Fire Department
- Howard Fire Department
- Bellevue Fire Department
- County Rescue EMS
- NEW Ambulance
- Bare Area EMS
- Brown County Human Services
- Community Treatment Center
- Aging and Disability Resource Center
- NEW Community Clinic
- Family Services NEW
- United Way of Brown County
- NEW Zoo and Adventure Park
- UW Green Bay
- St. Norbert College
- Green Bay Diocese
- CASA Alba
- Community Service AG
- New CAP
- Red Cross
- Salvation Army
- Prevea
- ARES EM Coordinator
- Wisconsin National Guard
- Wisconsin Department of Health Services
- Mabas Division 112 EC IMT

City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE:	**June 21, 2021**
DEPARTMENT:	**Health Department**
FROM:	**Deborah Armbruster**
SUBJECT:	**Alcohol and drug legislation presented by Teresa Gulyas**