



Board of Health

Regular Meeting

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

Revised Agenda

Monday, May 9, 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 **May 9, 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](tel:18668994679)

United States: [+1 \(312\) 757-3117](tel:+13127573117)

Access Code: 154-883-285

I.

1. Call to Order
2. Roll Call
3. Public Comment on Matters not on the Agenda
4. Approval of February 14, 2022 meeting minutes
5. Discussion and Possible Action to Approve the 2022 De Pere Health Department Policies and Procedures
6. Presentation of 2021 Annual Report of the De Pere Health Department
7. Update on Status of 2020-2025 De Pere Health Department Strategic Plan
8. Community Health Updates regarding Outreach Activities and Communicable Disease Report
9. Approval of MOU Between State of WI Department of Health Services and De Pere Health Department for Hosting an XRF Device for Lead Abatement Projects*
10. Update on COVID-19
11. Future Agenda Items
12. 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:

Alderspersons

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: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Approval of February 14, 2022 meeting minutes

ATTACHMENTS:

- 2.14.22 BOHMinutes final1 (PDF)

**BOARD OF HEALTH MEETING
CITY OF DE PERE, WISCONSIN – February 14, 2022**

The Board of Health of the City of De Pere, Wisconsin met in regular session on Monday, February 14, 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 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 November 8, 2021, Meeting Minutes

Jonathon Hansen made a motion to approve the November 8, 2021, meeting minutes. Teresa Gulyas seconded the motion. Upon vote, the motion passed unanimously.

5. Election of Vice-President of Board of Health

Deborah Armbruster explained that the City Assistant Attorney recommended that the Board of Health have a President and Vice President. Dr. Michael McHenry suggested that the Vice President be someone who would be on the Board longer term and asked what the turnover was for Alderman. Jonathon Hansen explained that every year the Alderman are assigned to committees, and some may move from one committee to a new committee. Others will stay with the same committee. Dr. McHenry suggested that the citizen members may be more consistent for the position. Teresa Gulyas volunteered for the position. Dr. Michael McHenry made a motion that Teresa Gulyas become Vice President of the Board of Health for the city of De Pere. Dr. Stroman seconded the motion. Upon vote, the motion passed unanimously.

6. Summary of De Pere Health Department Grants as of 1/1/2022

Deborah Armbruster stated that the grant dollar amounts are listed in the meeting packet. In the packet, she indicated the change in grant allocations and wrote a brief summary of what the COVID-19 grants may be used for. Dr. McHenry questioned the COVID-19 grant periods and asked if the grant amounts were appropriate. Deborah responded that the department staff reviews the grants monthly, and we determine the monthly amount which can be applied to the grant based on the remaining time frame of the grant. Deborah added that if an expense may apply to more than one grant, it is applied to the grant that expires the soonest. Some of the Health Department Covid grants go until 2024 and they are exceptionally large amounts. Much of the grant money is spent on staffing of Limited Term Employees. Deborah Armbruster reported that the Health Department has saved the City of De Pere over \$290,000 in tax levy by applying full time staff salaries to the new COVID grants. In 2021, the Health Department was reimbursed \$320,000 from Covid

grants for all COVID expenses including supplies, LTE salaries, and regular staff salaries. John Quigley asked if the Health Department ARPA grant could be used for the community to get better access to mental health services. Deborah Armbruster responded that the Health Department ARPA funds are currently not intended for this purpose. The Board decided to discuss this in an upcoming agenda item later in the meeting.

7. Covid-19 Updates

Deborah Armbruster reported that in 2021, the Health Department held one hundred Covid vaccination clinics. The Health Department gave out almost five thousand Covid vaccines. Deborah Armbruster reported that Pfizer (12 and up) and Moderna have FDA approval. The CDC is recommending the MRNA vaccines over Johnson & Johnson, but the De Pere Health Department still gives Johnson & Johnson to those who want it. Deborah informed the Board that people may mix and match vaccines now. The booster may be a different brand than the original series. Pfizer was submitting data for approval for 6 months to 4-year-olds but retracted the submission to research if a third dose is necessary. Deborah Armbruster reported that the CDC is classifying people as being up to date when they have had a booster. There is talk about combining Covid and flu in an annual vaccine. Deborah stated that immunity wanes 4 months after the vaccine, so we do not know how many boosters will be needed in the future. The DPHD plan is continue clinics 2-3 times per week. Deborah referred to the packet which shows the rise in Covid cases when Omicron initially hit. Currently, there is a sharp decrease in the cases. This may be due to home testing, which is not reported. Wastewater reports are a better indicator in this instance and, currently, wastewater reports show the virus is waning. Dennis Hibray inquired on how the mask distribution went. Deborah Armbruster responded that the cars were already lined up when she arrived at the event at 3:35 pm and the masks (1760 of them) were gone in less than an hour. Deborah ordered an additional 2500 masks from the state. The Health Department will distribute these at St. Anne's church on February 24th.

8. Update on Resuming De Pere Health Department Public Health Services

Deborah Armbruster reported that Wisconsin Department of Health (DHS) Services recommends not diving into old programming right away. Public Health 3.0 is focused on doing more population-based services rather than individual services. This is what DHS is promoting going forward. Deborah Armbruster stated that the Health Department will be resuming falls prevention, Grapevine, and car seat installations. Deborah Armbruster is going to take direction from DHS on how to proceed in the future.

9. Discussion and Action on DPHD Hosting XRF Device for Lead-Safe Homes Program (Lead testing)

Deborah Armbruster reported that Trista Groth was asked by Jeff from the State to house the XRF machine at the De Pere Health Department for use in NE Wisconsin. Deborah Armbruster stated that if we agreed, we would house the device and Trista would be certified for it. We would then lend it to other departments as needed. After further discussion with the state, this process is more involved than originally anticipated, so Deborah Armbruster stated that we will probably no longer pursue this. The current Memorandum of Understanding would require up to 20 hours per week of Trista's time,

which is not feasible. Jonathon Hansen made a motion to table this item until the next meeting. Dr. McHenry seconded the motion. Upon vote, the motion passed.

10. 2021 Communicable Disease report

Deborah Armbruster stated that the disease report was included in the packet. There were no questions on the number of cases.

11. Discussion Regarding Mental Health Concerns Within our Community (Continued from 11/08/2021 meeting)

Deborah Armbruster reported that she investigated area mental health services. Bellin Health has staff at their clinics to address mental health needs. Prevea has practitioners that will take patients. The health systems are trying to hire more staff to help people to get non-critical care faster. The Office of Children's Mental Health is focusing on child well-being and the schools are also working hard to address mental health issues.

Teresa Gulyas reported that she had reached out to the Mental Health Taskforce to offer to assist however needed. Teresa was informed that the Mental Health Taskforce is currently transitioning to Connections for Mental Wellness. Teresa is already on two of the Connections taskforces. Teresa reported that she will follow up again in a week or so.

Teresa Gulyas expressed a concern she witnessed at a local psychiatric hospital in which a man was concerned about his son who had mental health issues. The man was asking for help and was told by the receptionist that he needed to call for an appointment. Teresa was concerned that the receptionist could not assist in the triaging the man. Teresa will follow up on this concern also.

Deborah Armbruster reported that the NEW Community Clinic does have psych residents who come there to assist the NEWCC patients. Jonathon Hansen asked if the health department ARPA grant covered working on mental health resources. Deborah replied that she did not believe so but would look into it. John Quigley would like to use part of the city ARPA funds to assist in getting mental health resources into the community and making them available to people before they reach a critical status.

12. Future Agenda Items

Deborah Armbruster will present the 2021 annual report at the next meeting. The Health Department will have updated policies and procedures for the next meeting. Deborah Armbruster will talk about the status of the health department strategic plan at the next meeting so we can assess if we want to keep our current trajectory or alter the strategic plan. Debbie explained that a focus of our strategic plan was to advertise to the community the services of the health department, and Covid did increase the Health Department visibility in the community.

Dennis Hibray added that the Board will also address the XRF status at the next meeting. John Quigley commented that the state would have less workload if someone in NE Wisconsin houses the XRF. Therefore, the funding for housing it (up to 20 hours a week) may possibly be part of the memorandum of understanding. Debbie agrees and will look into it. Deborah Armbruster reported that Trista Groth will be getting certified to use the XRF whether De Pere houses the unit or not.

13. Adjournment

Jonathon Hansen made a motion to adjourn the meeting. John Quigley seconded the motion. Upon vote, the motion passes. The meeting adjourned at 6:17 pm.

Respectfully Submitted,
Kelly Burke
Health Department Administrative Assistant



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Discussion and Possible Action to Approve the 2022 De Pere Health Department Policies and Procedures



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Presentation of 2021 Annual Report of the De Pere Health Department

ATTACHMENTS:

- 2021 Annual Report_final version (PDF)



2021 Annual Report

De Pere
Health Department



A Message from the Director

The Unprecedented Journey continues...



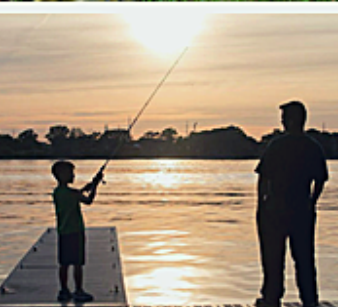
It is my privilege to present the 2021 De Pere Health Department Annual Report. 2021 has been another year of unprecedented challenges due to the COVID-19 pandemic. The staff of the City of De Pere Health Department has shown our community what a strong, committed and dedicated team they are. Our extremely supportive Board of Health and our esteemed Medical Advisor have continued to provide their unwavering commitment to the health department staff and the community of De Pere. Thank you for your service!



The ongoing pandemic has been a test of our strength and endurance but we have preserved knowing that we were working with federal and state experts at the Center for Disease Control and WI Department of Health Services to provide up-to-dated guidance and mitigation strategies towards this COVID-19 response effort.



We continue to rely significantly on our partnerships with the De Pere Common Council, City Administration, 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, De Pere schools, local businesses and non-profit organizations for their ongoing support and understanding as we have needed to devote all our efforts on the COVID-19 response. A special acknowledgement goes out to our health systems: Advocate Aurora, Bellin Health and Prevea Health for their leadership and collaboration during these response efforts.



We have been given generous financial support from grantors with federal and state funding allotted to COVID-19 response. This has allowed us to minimize our tax levy support with staff salaries largely paid by COVID-19 grants. It has also allowed us to keep the additional staff we hired for our pandemic work. Additionally, many of our grantors not focused on the pandemic still allowed us to direct some of their funding towards our COVID-19 response.



The respect and gratitude I have for my staff cannot be defined with words, they are truly the best there is!

I believe you will find this 2021 Annual Report similar to 2020's Annual Report as COVID-19 response efforts have been our primary focus once again.

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

2021 Members

Teresa Gulyas RN, MSN, MEd- Citizen Member

Jonathan Hanson - Alderperson

Dennis Hibray, Chair - Citizen Member

Dr. Michael McHenry - Citizen Member

John Quigley – Alderperson

Dr. Steve Stroman – Medical Advisor



Health Department Staff

Health Officer/Director

Deborah Armbruster, BSN, RN

Public Health Nurse

Sara Lornson, BSN, RN

Danielle Jauquet, BSN, RN

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

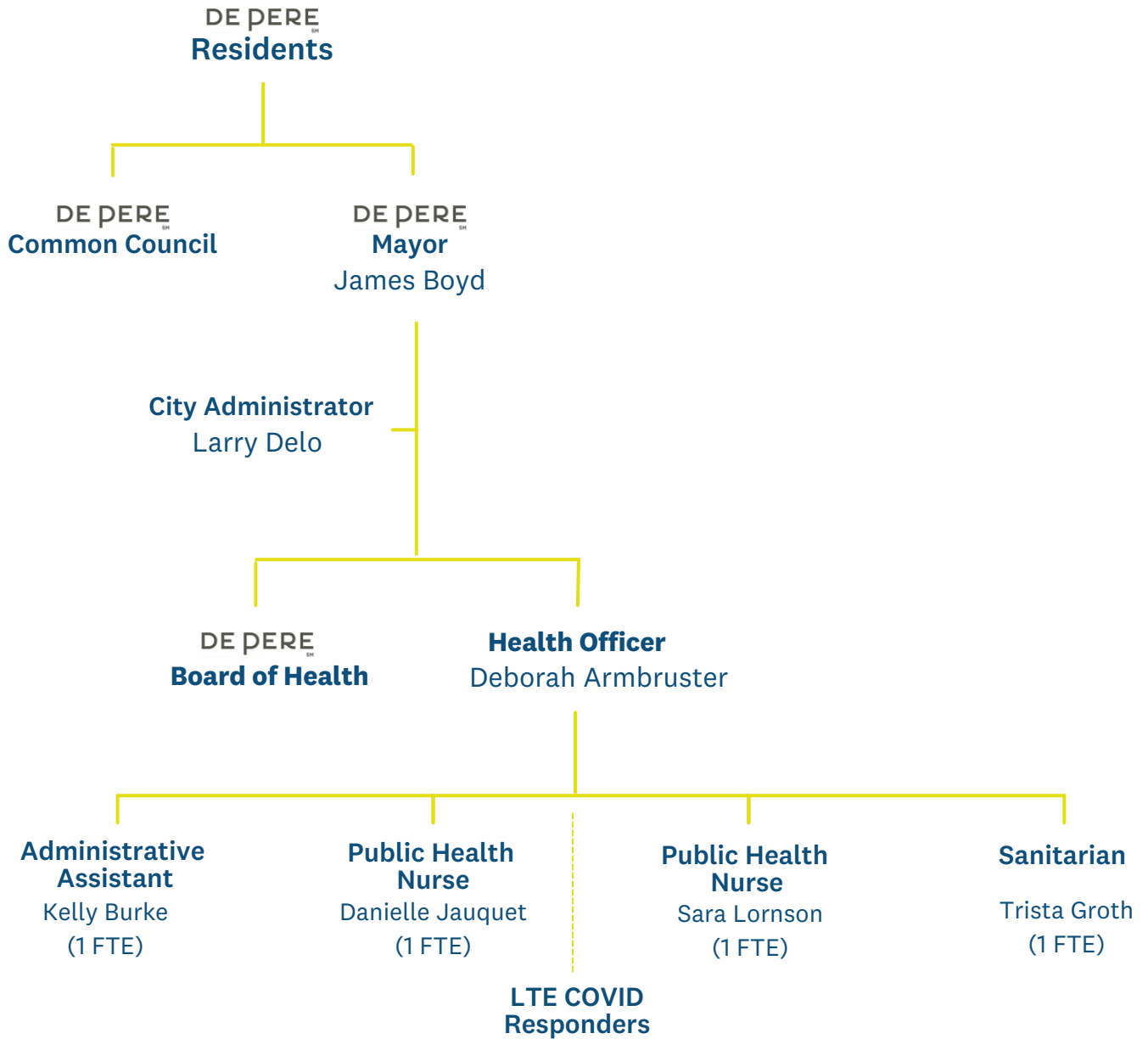
Colleen Messner

Marcia Shefchik

Maura Reed



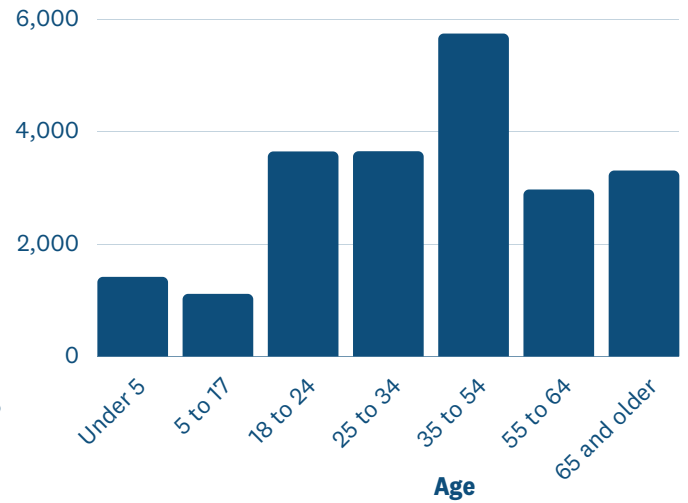
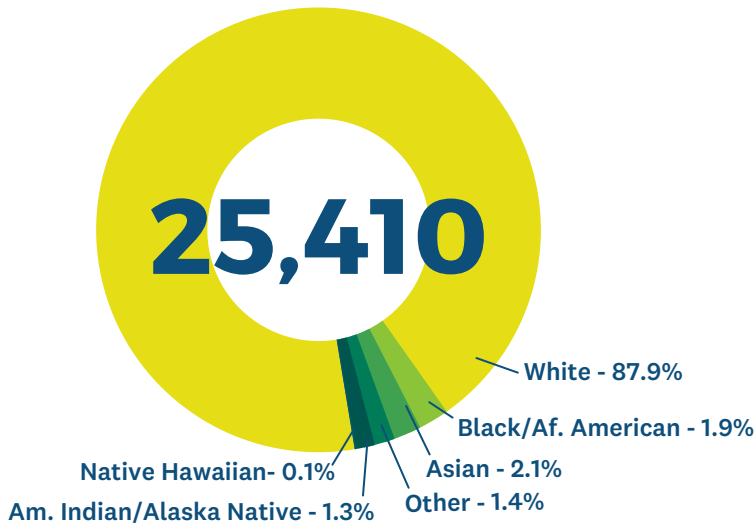
Organization at a Glance



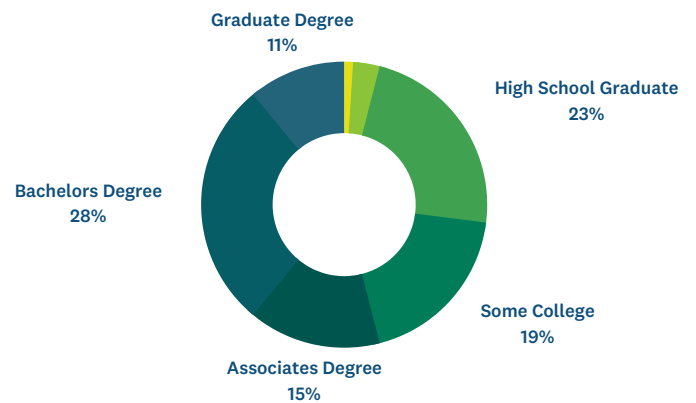
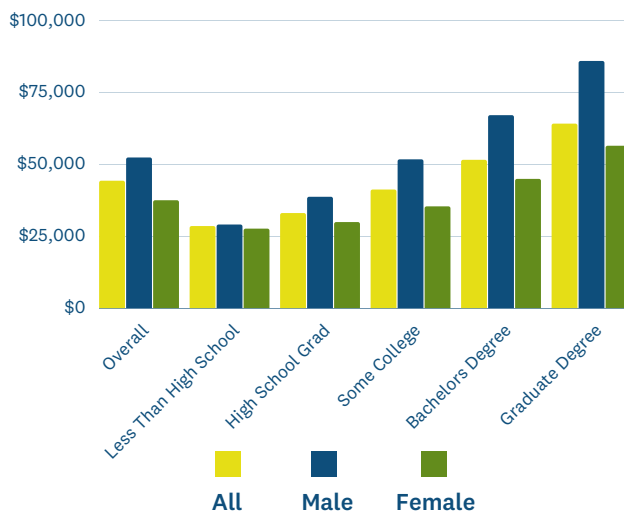
Demographics



Total Population



Education and Income



2.6%

Unemployment rate

6.6%

Overall poverty rate

62%

Home ownership rate

COVID-19 Response

Community Mitigation | Contact Tracing | Vaccination



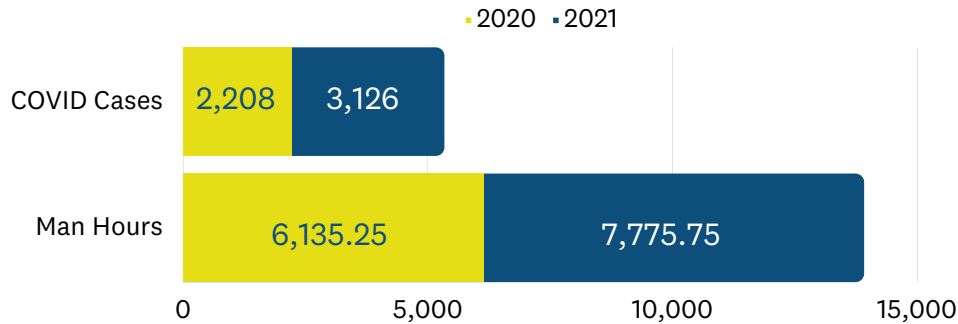
COVID Response

2021 at a glance



COVID Cases

3,126



DPHD Man-Hours

7,775.75

General COVID Work	259.00
Vaccination	250.50
Contact Tracing	6,588.00
ARPA	259.00
ELC Cares	180.00
Public Health Workforce	2.00

Timeline of Events

Appendix 1

3,126

Confirmed and Probable
COVID cases in De Pere

4,829

COVID Vaccines given
in De Pere

40,019

COVID tests taken by
De Pere residents



Community Mitigation

Purpose

Protecting the health of our community is our number one goal. In the face of an ongoing pandemic, we continued to implement efforts to minimize risk, ease the burden, and slow the spread of coronavirus in De Pere. 2021 saw appropriate and timely shifts in mitigation efforts as the pandemic continued to morph.

Community Ordinance

Health related ordinances help decrease disease spread. When required, all orders are issued by the City of De Pere in coordination with the Health Officer and City legal department.

- August 2020 - May 5, 2021: City of De Pere "Mask Mandate" in place to align with available science regarding preventing the spread of COVID-19.

Education & Outreach

We continued to better understand this novel virus as the year went on. 2021 saw increases in our ability to respond to and cope with the ever-present threat. Relying heavily on our expertise and experience, DPHD continued efforts to ensure our community had access to the right information at the right time.

- Updated policies and procedures with City Administration to keep the City open and functioning
- Utilized social, digital, news, and print media to encourage residents to stop the spread with evidence-based practices

Press
Releases

5

News
Interviews

3

Social Media
Posts

109

Household
Mailings

3

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
- #7 Link people to needed personal health services



Contact Tracing

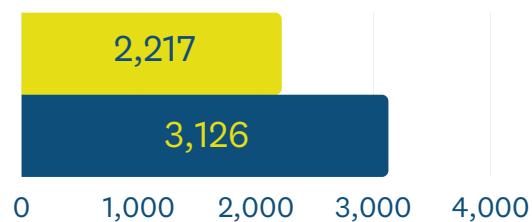
Purpose

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

Contact Tracing continued throughout 2021. Staff made multiple calls to each positive case through September 2021 when the department began utilizing online contact tracing technology via Jotform. Once implemented, contact tracers were able to send an email with isolation, quarantine, and contact tracing resources to residents in addition to making phone calls.

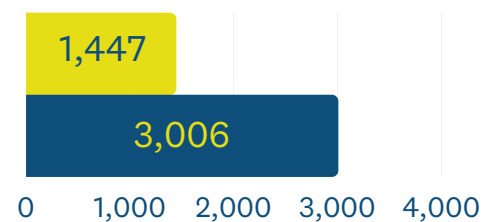
Disease Investigations

2020 2021



Case Letters

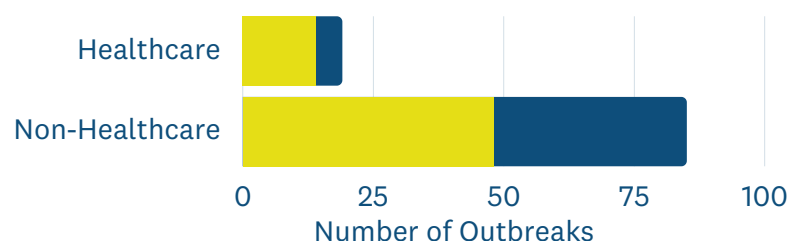
2020 2021



De Pere COVID-19 Outbreaks

March 2020 - December 2021

2020 2021



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



Vaccination

Purpose

Vaccination remains the end-goal for the COVID-19 pandemic. 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 in 2021.

Milestones

September 2020: Mass Vaccination Plan completed

December 2020: EUA granted for two COVID-19 Vaccines

December 2020: De Pere Health Department Vaccination Plan drafted, targeting EMS and school staff.

January 7, 2021: DPHD hosts first vaccination clinic at Fire Station #1 for EMS, Public Health, and school staff

June 1, 2021: DPHD hosts first adolescent vaccine clinic at De Pere High School.

October 23, 2021: DPHD hosts drive through COVID and flu clinic at St. Anne's Church.

December 15, 2021: DPHD hosts 100th vaccination clinic at De Pere Community Center for all eligible clients.

Vaccine Clinics
Hosted

100

Adult Vaccines
Given

4,616

Peds Vaccines
Given

213

Total Vaccines
Given

4,829

Key Partners

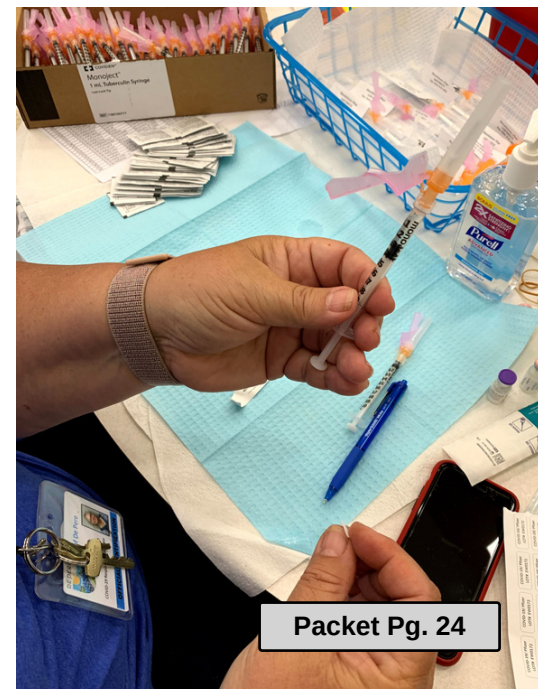
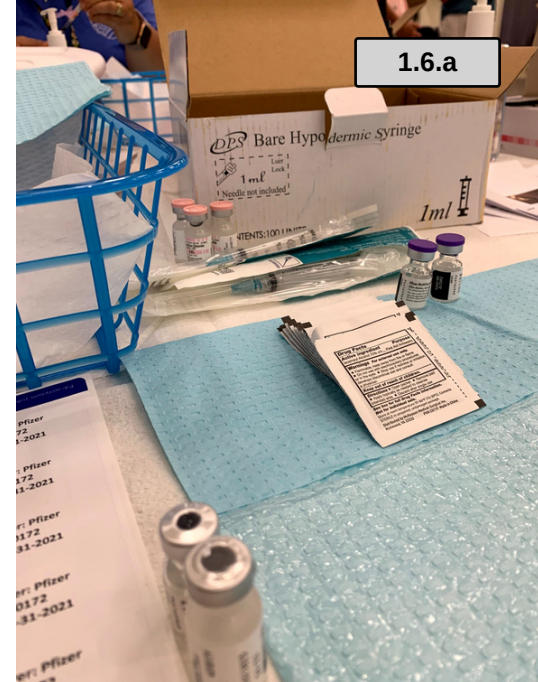
- De Pere Fire Department
- De Pere Community Center
- Definitely De Pere
- Seroogy's
- ComedyCity Theatre De Pere
- Unified School District of De Pere
- St. Anne's Episcopal Church
- Syble Hopp School
- Brown County Public Health
- Oneida Nation Health Department
- WI DHS
- Prevea Health
- Bellin Health

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

Amid the uncertainty and ever-changing pandemic, one thing remained constant - challenges would arise and force us to rethink, replan and redo our work. These obstacles would also become the source of key learnings and innovation that has helped propel our work forward.

Challenges

Rapidly changing information hindered our planning and response efforts, as well as our credibility with the community.

- Information changed rapidly, sometimes hourly, making it difficult to stay on top of evidence-based information and communicate effectively.
- Printed materials were next to impossible to create or maintain, creating extra challenges in providing resources to the community, non-digitally.
- Changing guidelines created hurdles in keeping staff properly trained.

Limited resources including staff time, vaccine, training, and technology.

- Demand for information about and appointments for vaccines initially outpaced DPHDs staffing and supply capabilities. With no control over the amount or type of vaccine we received, it was difficult to plan appropriately for clinics.
- Staffing both vaccination clinics and contact tracing proved difficult with limited workforce.
- Limited funding for public health infrastructure over time, has restricted the workforce and the resources necessary for a comprehensive long term response.

Misinformation created division within the community and fueled distrust making it difficult to do our job.

- Rapidly changing information, rumors, and general pandemic fatigue and frustration made it difficult to promote mitigation efforts like masking, vaccination and contact tracing.
- Staff grew tired from increased workloads and efforts to combat mistrust and misinformation.



Lessons Learned

Lessons Learned

Partnerships remain invaluable to sustaining response efforts.

- We could not have done all that we did in 2021 without unwavering support from our partners across the City and region. They were the backbone of our success.

Creativity goes a long way!

- Rethinking how, where, when and what we do was crucial to meeting the changing needs of our pandemic response. Flexible thinking, and teamwork helped us envision new ways of offering services, through Beer Gardens and Farmers Markets among others, to meet people where they were at.

What we do with information may be more important than how much information we have.

- Even though information changed quickly, we learned in was important for us to concisely share what we knew, when we knew it. Acknowledging changes rather than waiting for certainty helped us build trust.

We offer valuable, wanted services to our community.

- Overall we had excellent support from the De Pere community that allowed us to make a positive difference even in the face of continued adversity.



In their own words...

DPHD staff share their experiences over the last year.

2021 forced me to work outside my comfort zone..

"My job is normally very black and white, and measurable. I am not comfortable with the gray areas of public health and especially with Covid.

During this past year, I wore many hats and learned to change direction at a moment's notice. But because of that, I learned the ability to be more patient and learned empathy; that is not something that comes easily to me."

At times I felt lost... we were left slightly blindsided.

"This year has been a challenge mainly due to the ever changing data and progression of variants. At times I felt lost as guidelines were changing rapidly and I wasn't always very confident that I was up to date with the current data. We often received information at the same time as the public, so we were left slightly blindsided. This year was very busy. From managing the incoming phone calls and mailings to positive cases to ensuring our expenses and grants are accurately reported, it was overwhelming at times.

On the bright side, we made some great strides organizationally. We were able to develop a decent system for online scheduling and case reporting. We also have great LTE staff, which reduced the department stress level greatly. Plus, we had a few months in summer where Covid cases were minimal and we could start to think about our normal programming, which was a welcome relief."

.. At times felt like that hard work wasn't helping.

"I love working in public health because of the variety, the interaction with my community, and the opportunity to make a difference. COVID, of course, has altered my day-to-day work significantly and has at times felt like that hard work wasn't helping. It is challenging to recognize those elements that I love in the COVID work I am currently doing in addition to finding balance with other important public health work and life outside of work. Despite the difficulties of 2021, I also had successes and moments of hope. I learned from the good and the bad experiences which makes me more prepared for the continued response to this pandemic."

.. Sometimes feels like we take two steps forward and one step back.

"The biggest surprise (and obstacle) has been realizing the divide among people. There are so many people who support efforts to end COVID and take it seriously but there are more people who object to it than I imagined. And even though the positive feedback does outweigh the criticism, it's been getting more difficult as the year goes on to focus on the good- especially since it sometimes feels like we take two steps forward and one step back in the fight to end COVID.

I find it inspiring how the staff here face this every day but still make every effort to help people. They're still offering education and vaccination clinics, organizing mask distributions, and staying up to date on the ever-changing COVID protocols and recommendations. They're far more patient with it all than I am but I try to follow their example."

Public Health Services

Environmental Health | Health Services
Community Initiatives | Emergency Preparedness





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 and outbreak response.

Inspections

- 114 Routine and Pre-Inspections (PIs) conducted
 - 150 (routine and PIs) for calendar year 2021
- 60% of facilities inspected

In 2021, there were almost 3 times the number of PIs as “normal” year.

Human Health Hazard/Nuisance Response

- 20 Total Complaints
 - Noise, mold, trash/junk unsanitary conditions

Animal Bites – Rabies Prevention

- 24 Dog Bites
- 2 Dangerous Animal Determinations
[De Pere Municipal Code Section 86-4(c)]

Weights & Measures

- 13 Inspections
 - 6 gas stations; 164 devices
 - 9 retail stores; 91 scales

Radon Testing & Education

- 13 radon test kits distributed
- Education provided via social media and visual display at City Hall
- Feature story on WBAY January 2021

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



Health Services

Purpose

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

Immunizations

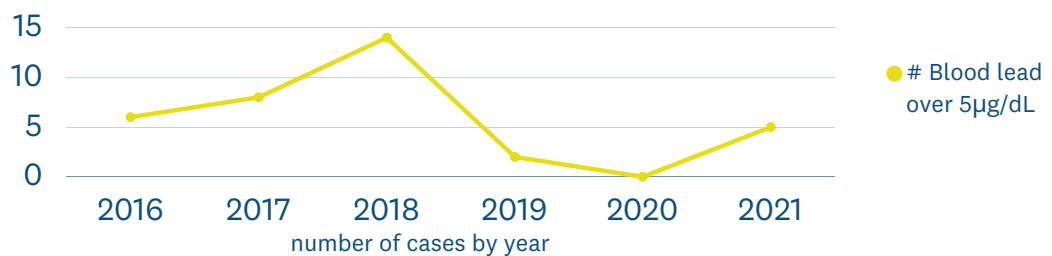
- Vaccines for Children: 203
- Vaccines for Adults: 58
- 234 total influenza vaccinations

2021 Immunizations

Disease	Total
DTP/aP	1
DTP/aP - Polio	2
HepA	3
HPV	3
Meningo	1
MMR	2
Pertussis/Tdap - Td	13
Pneumococcal	1
Varicella	2

Lead Poisoning Prevention

- 393 Blood Level Level Screens
- 4 children with blood lead level over 5µg/dL
 - 5-9 mcg/dl – venous – (3)
 - >20mcg/dl – venous – (1)
 - Follow up initiated with 4 cases,
 - 3 remain under investigation
 - 1 refused





Communicable Disease Follow Up

2021 Confirmed and Probable CD Investigations

Disease	Total
Campylobacteriosis	6
Chlamydia Trachomatis	94
Coccidioidomycosis	1
Coronavirus	3197
Cryptosporidiosis	2
Cyclosporiasis	2
Ehrlichiosis / Anaplasmosis	3
Giardiasis	2
Gonorrhea	22
Haemophilus Influenzae Invasive Disease	2
Hepatitis C	2
Invasive Streptococcal Disease (A and B)	3
Legionellosis	2
Meningitis	1
Mycobacterial Disease (Nontuberculous)	5
Pathogenic E.coli	4
Plesiomonas Infection	1
Salmonellosis	2
Streptococcus Pneumoniae Invasive Disease	1
Syphilis	1
Latent Tuberculosis	4
Varicella	2
Yersiniosis	2
	3362

Public Health Essential Services Met:

- #2 Diagnose and investigate health problems and health hazards in the community
- #3 Inform, educate, and empower people about health issues



Emergency Preparedness

Purpose

Through Public Health Emergency Preparedness (PHEP) De Pere Health Department works to increase the capacity of the community to effectively respond to public health emergencies through assessment, planning, training, collaboration, and community education. Our focus remains on ensuring families, schools, and businesses are well prepared to handle emergencies

2021 Preparedness Capability Focus Areas

- Community Preparedness
- Community Recovery
- Emergency Operations Coordination
- Information Sharing
- Medical Countermeasure Dispensing and Administration
- Public Health Surveillance and Epidemiologic Investigation
- Responder Safety and Health
- Volunteer Management

2021 Deliverables

- Active membership within NEW Healthcare Emergency Readiness Coalition
 - Conducted hazard vulnerability assessment, developed continuity of operations plan, conducted Homeland Security Exercise and Evaluation Program (HSEEP) After Action Report/Improvement Plan for COVID-19 response
- Maintained up to date emergency contact information, training records, and communications plans for staff, community and volunteers
- Continued to follow epidemiological investigation and reporting protocols
- Collaborated to reduce access barriers to vaccination to achieve mass vaccination and minimize waste
- Identified responder health and wellness needs to ensure proper mental health and healthcare supports are in place

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



Community Initiatives

Purpose

Community Initiatives supported by the De Pere Health Department engage the health and wellbeing of everyone who lives, works, and plays in De Pere. In a typical year, DPHD is engaged in initiatives around: Child Passenger Safety, Falls and Injury Prevention, Suicide Prevention, and GrapeVine Adult Health Education. While the COVID-19 pandemic may have necessitated a pause in these activities in 2021, DPHD is excited and grateful to resume them in 2022.



Public Health Essential Services Met:

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



Health Priorities

Purpose

Every three years, The Beyond Health Steering Committee, including representation from local public health agencies, area health systems, and community agencies, completes an assessment of overall health and chooses three top health priorities to address. This process helps ensure issues important to our community are quickly identified and addressed by working together toward common goals.

2020 Health Priorities

In an effort to understand WHY health gaps in health exist in our community, the following priorities were identified:

Equitable Access - Take steps to level the playing field

- Strategy 1: Decrease income and asset gap in Brown County
- Strategy 2: Improve environmental quality and physical environments
- Strategy 3: Advocate for equitable access to healthcare

Social Cohesion - Help people connect with each other and their community

- Strategy 1: Build community and civic connections at neighborhood level
- Strategy 2: Increase availability and visibility of healthy food options
- Strategy 3: Improve walkability and recreational opportunities

Unified Planning and Policy - Make sure policies help the entire community

- Strategy 1: Integrate population health into community planning efforts
- Strategy 2: Safe, accessible housing and transportation options
- Strategy 3: Policies that decrease inequities in a coordinated and transparent way

Public Health Essential Services Met:

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

Financial Report



Targets

	Budget	6 Month Actual	Year End Estimate
Revenue	\$568,032	\$281,641	\$585,665
Expenditures	\$568,032	\$281,641	\$585,665

Revenue Breakdown

	Budget	6 Month Actual	Year End Estimate
Public Health	\$500	\$280	\$400
Licensing/Permits	\$80,000	\$73,678	\$82,079
Health Grants	\$70,187	\$35,304	\$60,199
Weights/Measures	\$21,564	\$18,736	\$20,859
City Tax Levy	\$395,781	\$153,643*	\$422,128

*\$320,121 was reimbursed by COVID-19 grants to offset tax levy.

Expense Breakdown

	Budget	6 Month Actual	Year End Estimate
Personnel	\$486,744	\$255,869	\$511,412
Contractual	\$5,000	\$1,363	\$4,282
Supplies	\$76,288	\$24,409	\$69,971
Capital	\$0	\$0	\$0

Totals

	Budget	6 Month Actual	Year End Estimate
	\$568,032	\$281,641	\$585,665

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 Evers passes a state-wide mask mandate, effective 8-1-2020.
- The City of De Pere also passes an ordinance mandating masks that begins August 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 DPFH 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 Evers 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 DPFH 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) is 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.



January 2021

- De Pere Health Department hosts 1st Moderna COVID vaccination clinic at De Pere Fire Station #1 on January 7, 2021 for Tier 1A eligible persons.
- Tier 1B eligible persons begin receiving vaccinations January 25, 2021
- 6 total vaccination clinics are hosted by DPHD with assistance from: De Pere Fire, St. Norbert Abbey, De Pere schools, and De Pere Community Center for Tier 1A/B eligible persons (frontline healthcare workers, police, fire, nursing home residents and staff, and people over 65).
- Adolescent vaccination trials begin in US.
- Vaccine manufactures discuss booster shots in response to emerging variants.

February 2021

- De Pere Health Department hosts 9 COVID vaccination clinics.
- Second dose Moderna vaccination appointments begin for those 3 weeks out from their first dose.
- DPHD hosts first Pfizer vaccination clinic on February 10, 2021.
- WI Department of Health services announces additional groups will become eligible for vaccination beginning March 1.
- Number of people vaccinated outweighs the number of people infected, as the US reaches 26.5 million vaccinations administered in early February.
- 50 Million COVID-19 Vaccine Doses Administered in the US by end of February.
- Emergency Use Authorization is granted to Johnson & Johnson 1 dose vaccine.

March 2021

- Educators, child care, Medicaid eligible, some public facing essential workers, non-frontline essential health care workers, staff and residents in congregate living facilities become eligible for vaccination on March 1.
- March 11 marks the one-year anniversary since the World Health Organization declared COVID-19 a global pandemic.
- People ages 16 to 64 with high-risk medical conditions become eligible for vaccination on March 22, 2021.
- DPHS hosts 12 COVID vaccination clinics for all eligible persons.
- CDC adjusts guidance on safe activities for fully vaccinated individuals, allowing fully vaccinated people to meet in person without masks.
- J&J vaccines begin to arrive in Wisconsin and DPHD hosts first J&J clinic on March 31, 2021.
- US administers 100 millionth vaccine on March 19, 2021.



March 2021 con't

- Real-world data show Pfizer/BioNTech and Moderna are 90% effective in preventing COVID-19 infection, helping ease vaccine hesitancy for many.

April 2021

- De Pere Health Department hosts 14 COVID vaccination clinics.
- All adults become eligible for vaccination on April 19, 2021.
- City of De Pere officials begin conversations about lifting Emergency Order and mask requirements.
- CDC adjusts travel guidelines for fully vaccinated individuals, allowing for domestic travel with masking.
- Extra doses are allowed from Moderna vaccine vials, allowing for 15 doses over 10.
- COVID vaccine deemed safe and effective in for pregnant and breastfeeding women.
- J&J vaccine is paused due to 6 cases of cerebral venous sinus thrombosis, from April 13 - April 23.
- 50% of all US adults receive at least 1 vaccine dose by mid-month.
- COVID cases continue to fall.

May 2021

- DPHS hosts 9 COVID vaccination clinics for all eligible persons utilizing Moderna, Pfizer and J&J vaccines.
- De Pere Emergency Order and mask requirements expire on May 5, 2021.
- Emergency Use Authorization is granted to Pfizer vaccine for adolescents aged 12 through 15.
- Significant reduction in the number of COVID cases continues.

June 2021

- DPHS hosts 11 COVID vaccination clinics for all eligible persons (12 and older) utilizing Moderna, Pfizer and J&J vaccines.
- Delta variant emerges as dominant strain in the US.
- Cases remain low in De Pere, reaching some of the lowest numbers since the start of the pandemic.
- DPHD begins conversations of re-starting "normal" programming.



July 2021

- DPHD begins hosting community vaccination clinics at the De Pere Farmers' Market and Beer Gardens in partnership with Definitely De Pere, Seroogy's and Comedy City De Pere.
- Case counts remain low through first half of July, and begin a gradual uptick after July 15, 2021.

August 2021

- DPHD hosts 4 COVID vaccination clinics.
- DPHD continues hosting community vaccination clinics at the De Pere Farmers' Market and Beer Gardens.
- De Pere and Brown County re-enter "high transmission" status as Delta variant takes strong hold.
- DPHD brings on two additional contact tracers to ease workload from increasing cases.
- CDC again recommends universal masking for everyone (including fully vaccinated individuals) in the face of the Delta variant surge.
- Booster shots are now recommended for immunocompromised individuals
- Full authorization is granted to Pfizer vaccines for people 16 and older. Many organizations begin mandating vaccination for employees.

September 2021

- DPHD hosts 5 COVID vaccination clinics.
- DPHD continues hosting community vaccination clinics at the De Pere Farmers' Market and Beer Gardens.
- Booster shots are authorized for Pfizer vaccine recipients.
- Cases continues to increase as school resumes and activities move indoors.

October 2021

- DPHD hosts 5 COVID vaccination clinics and begins offering booster shots.
- Booster mixing and matching is approved, allowing eligible people to receive a third, or second dose of any mRNA vaccine regardless of first series brand.
- Emergency Use Authorization is granted to the Pfizer vaccine for those aged 5 to 11 on October 29, 2021.
- De Pere daily case counts re-enter triple digits.



November 2021

- DPHD hosts 5 COVID vaccination clinics.
- FDA grants authorization for all adults to receive a booster shot 6 months after their primary series.
- First report of Omiron variant by South African surveillance officials.
- Daily case counts reach over 400 by end of November 2021.

December 2021

- De Pere Heath Department hosts 100th vaccination clinic on December 15, 2021, just one year after the US vaccine rollout began.



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Update on Status of 2020-2025 De Pere Health Department Strategic Plan

ATTACHMENTS:

- De Pere Strategic Planning final 11.13.19 (PDF)



Public Health
Prevent. Promote. Protect.

De Pere Health Department

Strategic Plan

2020-2025



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Letter from the Health Director



October 2019

Dear Colleagues,

The City of De Pere Health Department's Strategic Plan is an internal, working document to describe our strategies for improving the health and well-being of City of De Pere residents and visitors.

The strategic planning process was both engaging and insightful as it allowed staff and stakeholders to set the department's future together. During this process, it became evident that we all play a critical role in the nurturing, strengthening and sustaining of quality public health services. This agency roadmap will allow staff and Board of Health members to move forward together in accomplishing our mission and vision while supporting the department's values in the best interest of the public's health.

We as a team of public health professionals are up to the challenge of implementing this next five year plan!

Sincerely,

Deborah E. Armbruster BSN RN
Health Director/Health Officer

Vision, Mission and Core Values

Our Vision

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

Our Mission

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

Our Core Values

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

Section 1: Vision, Mission and Core Values

Our Vision

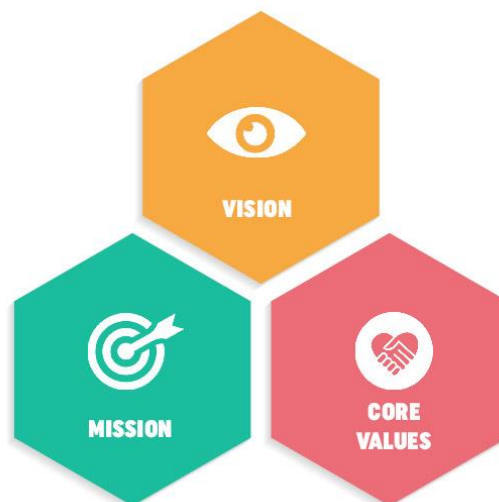
De Pere, a community where all people can live well and flourish together.

Our Mission

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

Our Core Values

1. **Collaboration & Partnership:** We will partner with various community stakeholders as a means to improve health outcomes.
2. **Commitment & Dedication:** We are committed to promoting prevention through education and the services we provide. We are dedicated to the health and wellness of our community.
3. **Community & Public Service:** We strive to connect and empower our community through the services and support we provide.
4. **Integrity:** We consistently and willingly adhere to upholding a standard of conduct and care that exemplifies respect of others, honesty, and integrity in all that we do.



Section 2: Purpose and Use of a Strategic Plan

A strategic plan indicates an agency's current position and the directions the agency can follow to achieve its goals. The plan also provides criteria for monitoring the progress and outcome of the plan. A strategic plan can make decision-making and change easier for an organization, as it defines the organization's identity and goals while providing clear direction for achieving these goals. However, because an organization needs to remain nimble and adapt to changing environments and needs, the strategic plan must also remain flexible and continuous.

Public Health Accreditation Board (PHAB) Standard 5.3

Strategic planning is a process for defining and determining an organization's roles, priorities, and direction over three to five years. A strategic plan sets forth what an organization plans to achieve, how it will achieve it, and how it will know if it has achieved it. The strategic plan provides a guide for making decisions on allocating resources and on taking action to pursue strategies and priorities. A health department's strategic plan focuses on the entire health department. Health department programs may have program-specific strategic plans that complement and support the health department's organizational strategic plan. (PHAB Standards and Measures, Version 1.0)

For a health department to be eligible for PHAB accreditation, they must first complete the following three prerequisites:

1. Community Health Assessment (CHA)
2. Community Health Improvement Plan (CHIP)
3. Agency Strategic Plan.

The prerequisites for accreditation lay the groundwork for everything a health department does and provides a foundation for meeting the PHAB standards and measures.

Section 3: Summary of SWOC

A SWOC (Strengths, Weaknesses, Opportunities, Challenges) analysis provides programs and organizations with a clear, easy-to-read map of internal and external factors that may help or harm a project. This is accomplished by listing and organizing a project's strengths, weaknesses, opportunities, and challenges. SWOC can clearly show a program its chances for success, given present environmental factors.

On 6-10-2019 a meeting was held with DPHD staff to complete a SWOC analysis. We initially started with a general list.

The general list is as follows:



Strengths

Inclusion of Staff in Decisions
 Increased knowledge and ownership of Public Health Emergency Preparedness
 Stand-alone health department
 Team steps up to continue moving work forward
 Representation at the County level even having a small staff
 Name recognition and efforts to continue building it
 Good work environment including flexibility to meet the needs of the department and our community
 Strong partnerships in the City as well as with community partners
 Give optimal services to the community with having a limited staff
 Staff are immensely talented and knowledgeable
 The Stay At Home Assistance program
 Environmental Health program
 Good customer service
 The department is accessible to the community
 Continued marketing of the health department
 Social Media website
 Increased services and programs
 Increased financial resources with the successful attainment of various grants

Weaknesses

Small staff

Financial constraints

Knowledge “silos”

Lack of knowledge sharing of information received at seminars/conferences

Part-time staff

Maternal Child Health program that is not evidenced-based

Computer programs not communicating among each other

Community is not aware of all that the health department provides

Opportunities

A more involved Board of Health

Increase the Stay at Home Assistance program

Increase education of what the Environmental Health program does for the city staff and the community

Increase awareness of what the health department does

Knowledge sharing

Look for financial sustainability

City growth of the young and of older adults

Increased awareness of opportunities to emerging issues and how to include health in these issues

Infusing health in community development and decisions

Increase routine inspection consistent enforcement

Look for other financial resources

Challenges

Limited funds

Hearing that grants are either decreasing or being cut all together

Political uncertainty

Health insurance changes with the Affordable Care Act and with insurance companies

FOLLOWING THE SWOC ANALYSIS, THESE ARE THE THEMES:

Financial / Resources

Strengths

- Increase financial resources (grants)

Weaknesses

- Small staff
- Financial constraints
- Part-time staff

Opportunities

- Looking for financial sustainability

Challenges

- Limited funds
- Hearing that grants are decreased or cut

Programs

Strengths

- Giving optimal services to the community with limited staff
- Stay at Home Assistance
- PHEP (Public Health Emergency Preparedness)
- Environmental Health
- Increased services and programs

Weaknesses

- MCH (Maternal Child Health) program that is not evidenced based

Opportunities

- Increase Stay at Home Assistance Program
- Increase education of what environmental health does for city staff and the community
- Increase routine inspection and consistent enforcement

Challenges

- None Identified for the program's theme

Partnerships

Strengths

- Partnerships strong in the city as well as community partners
- Representation at the county level – even with small staff

Weaknesses

- None identified

Opportunities

- Increase Stay at Home Assistance Program

Challenges

- None identified for this partnership's theme

Staff/ Health Department Team

Strengths

- Staff are immensely talented and knowledgeable
- Good customer service
- Accessible
- Inclusion of staff in decisions
- Increased knowledge and ownership of PHEP
- Stand-alone health department
- Good work environment and flexibility

Weaknesses

- Knowledge silos
- Lack of knowledge sharing

Opportunities

- Knowledge sharing

Challenges

- None identified for the team's theme

Marketing / Visibility

Strengths

- Marketing of the health department
- Social media/website
- Name recognition and efforts to build

Weaknesses

- None identified

Opportunities

- Increase education of what Environmental Health does for city staff and the community
- Increase awareness of what the health department does
- Infusing health in community development and decisions

Challenges

- Lack of experience in how to increase marketing

Outliers

Strengths

- None identified

Weaknesses

- Computer programs not communicating

Opportunities

- More involved Board of Health
- City growth (young and older adults)
- Increased awareness of opportunities to emerging issues and how to include health

Challenges

- Political uncertainty
- Health insurance changes, ACA, insurance companies

Section 4: Strategic Planning Process and Participants

In order to provide further insight and structure to the process, the strategic plan takes into account and further supports the health priorities that were identified by our CHIP.

The **purpose** of the De Pere Health Department Strategic Plan is to:

1. Provide a common understanding of the department's direction by clearly established goals, strategies and objectives that are in line with the department's mission.
2. Effectively communicate goals, strategies and objectives to staff, policy makers, partners and the community.
3. Provide a mechanism in which progress can be measured and documented.
4. Provide a more focused, organized approach.

The following is a timeline of the agency activities that occurred related to the Strategic Planning process.

- Prior to the first planning meeting an environmental scan of De Pere was done by the health director using various data sources including data obtained from the De Pere Development Services dept., We Are De Pere Community Profile report, U.S. Census Bureau, 2019 County Health Rankings, WI Public Health Profile for the City of De Pere, the De Pere School District Advisory Committee report, and the CHA and CHIP processes. Also a survey went out to stakeholders with eight questions in regards to how they view the De Pere Health Department including strengths, weaknesses, challenges etc.
- The first meeting was held on **4/29/2019** at which time discussion was held regarding the framework and purpose of having a strategic plan. The 2014-2019 Strategic Plan reviewed and updated as to what has been accomplished. Formal and informal organizational mandates discussed. Who internal stakeholders are determined i.e. staff, Board of Health, City Administrator, Mayor, Legal Counsel, Development Services, Fire dept., Law Enforcement, Medical College of WI, St. Norbert College. Values,

Mission and Vision statements reviewed and staff generated ideas for revising these statements. The environmental scan was presented. The value of doing a SWOC analysis and what it consists of discussed. Prior to the second planning meeting, staff will work on the values, mission and vision statements to discuss.

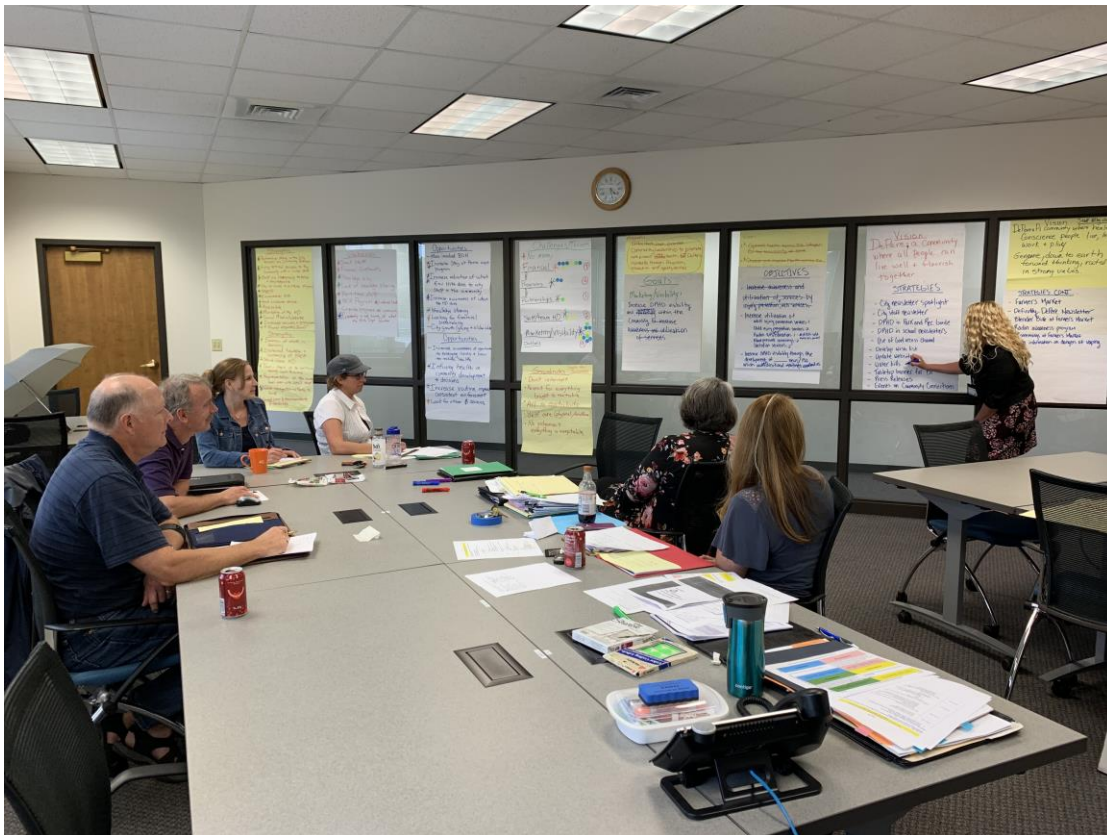
- The second meeting was held on **6/10/2019** at which time the stakeholder analysis and formal and informal organizational mandates were reviewed. The staff led the discussion on the values, mission and vision statements and at this meeting the staff voted to accept and finalize these statements. The environmental scan was also reviewed. A SWOC (Strengths, Weaknesses, Opportunities and Challenges) analysis was completed by staff. Major themes and priorities discussed. An overview of key components of a strategic plan discussed along with the development of a work plan.
- The third meeting was held on **8/26/2019**. Two Board of Health members attended this meeting so a review of work accomplished at the first two meetings discussed. The mission, values and vision statements were finalized. Themes and priorities were chosen and the development of the work plan initiated including goals, objectives and strategies. Using information and data from the two SWOT analyses, community health profiles, current health trends, CHA and CHIP processes, along with other sources, the MCPH staff emerged with four goals.
- The fourth meeting was held on **10/21/2019**. The group went over what we want the goals to be for the next five years.

Goal 1 Marketing and Visibility: Increase De Pere Health Department's visibility and awareness within the community.

Goal 2 Financial Resources: Increase financial and other resources to meet the current and emerging needs in the community.

The future of De Pere Health Department was discussed and this is what the group would like to see:

- Flourishing programs and staff having grown in strength and numbers
 - Stronger response to public health emergencies
 - Meet the emerging needs of the community
 - Staff is engaged, flexible, nimble and focused
 - The community knows what the health department does and what it offers
 - The health department being present and engaged at community events and coalitions
 - Community donors for financial needs of the department
 - De Pere Health Department being looked at as a valued resource and able to provide a plethora of services
- On **11/13/2019** the strategic plan document was completed.
 - On **11/18/2019** the Strategic Plan document was released to De Pere's Board of Health and the De Pere Health Department staff.



Health Department staff and board members working together to make the Strategic Plan meaningful and attainable

Section 5: Strategic Plan Oversight / Putting Plan into Action

The City of De Pere Health Department's Strategic Plan will be monitored by the Health Director along with the health department staff on a monthly basis at department meetings. The Health Director will act as a liaison to report progress to the Board of Health. The strategic plan and its progress will be included in the City of De Pere Health Department's Annual Report.

In addition, the Community Health Assessment and Community Health Improvement Plan committee (Beyond Health) partner's work has a critical impact on the health department's statutory responsibilities around population health improvement.

This linkage will allow for critical communication to occur between the internal (City of De Pere Strategic Plan) and external (Brown County/De Pere Health Improvement Plan) work plans.

The De Pere Health Department would like to recognize the assistance, professional guidance and support to those who dutifully supported this process and this plan's development. Additionally, the agency would like to thank the staff for their commitment to improving the public's health through the participation in the organization's Strategic Planning process and the ongoing commitment to achieve the health department's mission.

Strategic Planning Team:

Deborah Armbruster, Health Director
 Erin Bongers, Public Health Nurse
 Kelly Burke, Support Staff
 Patricia Finder-Stone, RN/Board of Health
 Trista Groth, Sanitarian
 Dennis Hibray, Board of Health Chair
 Ryan Jennings, Board of Health
 Sara Lornson, Public Health Nurse
 Janet Kazmierczak, DPH NE Region Office
 Mike Walsh, Mayor

Facilitating Team:

Chris Culotta, DPH NE Regional Director
 Janet Kazmierczak, DPH NE Region Office
 Christie Reese, DPH NE Region Office

Section 6: Maintaining Flexibility

Writing the strategic plan is a milestone not an end post. Build in time for on-going review of the strategic plan in regards to progress with the goals and objectives and periodic reviews of the SWOT/SWOC data. With the ever-changing environment filled with new opportunities and emerging threats, maintaining flexibility to adapt to the changing environment is important. The plan should be revised and updated as needed. It is not a static document.

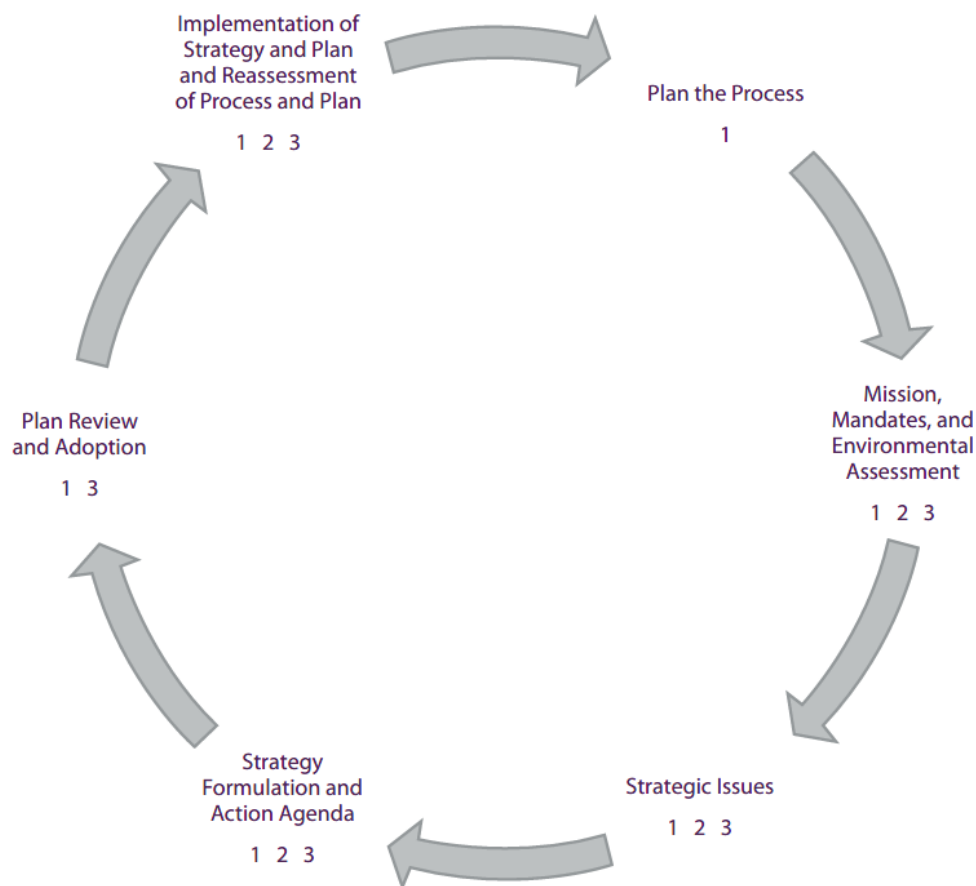
Reflect back to the strategic planning cycle offered by Bryson and Alston:

The stages where stakeholder analysis, vision formulation and goal definition could occur are noted by 1, 2 or 3.

1 – Perform Stakeholder Analysis

2 – Formulate Vision

3 – Define Goals



(Bryson & Alston 2005)

Section 7: Plan of Work Grid

Strategic Priority & Goal	Objective	Action/Activity (strategy)	Target dates
Goal 1: Increase DPHD visibility and awareness with the community.	Increase utilization of -adult injury prevention services. -Child injury prevention services -radon kits/ tick kit education -blood pressure screenings -lactation services	a. City newsletter spotlight b. City staff newsletter c. DPHD in Park and Rec Guide d. DPHD in school newsletters e. Use of Government Access Channel f. Develop wish list g. Update website h. Water bills i. Tabletop banner for blood pressure clinic j. Press releases to increase awareness of the Health Department k. Farmer's Market l. Definitely De Pere Newsletter	Adult Injury Prevention services and Radon/ tick kit education – 2020 Child Injury Prevention services, lactation services and blood pressure screenings - 2021
	Increase DPHD awareness and visibility through the development of monthly news/PH articles and # of educational opportunities.	m. Blender Bike at Farmer's Market n. Radon awareness program o. BP screenings at Farmer's Market p. Provide information on dangers of vaping q. Continued awareness of how to infuse health in what's emerging in the community r. Identify community events to exploit opportunity	
Goal 2: Increase financial and other resources to meet the current and emerging needs in the community.	Increase donations (in-kind, monetary, partnerships, joint marketing, volunteers)	a.Track donations/worth (value of in-kind to share) b.Make needs known (public meetings) c. Internal marketing (City Council – Powerpoint & presentations along with data and qualitative stories i.e. mass clinics, helmets) d. Tracking scheduling challenges e.Encourage contributions of local community donors	Tracking and assessing gaps throughout 2020 and 2021 to indicate the needs of the department
	Increase financial opportunities	a.Grants b.Scholarships c.Shared funding sources d.Identify 2 financial opportunities without stressing current resources	Over the next 5 years (2020 – 2025)

Section 8: Volunteer / In Kind Spreadsheet

[illegible]

**City of De Pere, Wisconsin****Request For Board of Health Action**

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Community Health Updates regarding Outreach Activities and Communicable Disease Report

ATTACHMENTS:

- Disease Incident Count Feb Mar Apr 2022 (PDF)
- Disease Incident Count YTD 4.30.22 (PDF)
- De Pere Health Department Covid response activities (PDF)
- De Pere Health Department outreach and prevention (PDF)
- De Pere Health Department trainings (PDF)



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

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2022
Disease Group	Disease	Total
Campylobacteriosis (Campylobacter Infection)	<i>Group Total:</i>	1
	CAMPYLOBACTERIOSIS	1
Chlamydia Trachomatis Infection	<i>Group Total:</i>	18
	CHLAMYDIA TRACHOMATIS INFECTION	18
Coronavirus	<i>Group Total:</i>	310
	CORONAVIRUS, NOVEL 2019 (COVID-19)	309
	MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS- C)	1
Gonorrhea	<i>Group Total:</i>	2
	GONORRHEA	2
Hepatitis B	<i>Group Total:</i>	1
	HEPATITIS B, CHRONIC	1
Influenza	<i>Group Total:</i>	2
	INFLUENZA-ASSOCIATED HOSPITALIZATION	2
Mycobacterial Disease (Nontuberculous)	<i>Group Total:</i>	2
	MYCOBACTERIAL DISEASE (NON- TUBERCULOUS)	2
Pathogenic E.coli	<i>Group Total:</i>	2
	E-COLI, ENTEROPATHOGENIC (EPEC)	1
	E-COLI, SHIGA TOXIN- PRODUCING (STEC)	1
Syphilis	<i>Group Total:</i>	1
	SYPHILIS, PRIMARY	1
	<i>Period Total:</i>	339

Default Filters: 'State' EQUAL TO 'WI'

2/1/2022-4/30-2022

Probable and Confirmed



**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 (Campylobacter Infection)	Group Total:	1
	CAMPYLOBACTERIOSIS	1
Chlamydia Trachomatis Infection	Group Total:	31
	CHLAMYDIA TRACHOMATIS INFECTION	31
Coronavirus	Group Total:	1978
	CORONAVIRUS, NOVEL 2019 (COVID-19)	1977
	MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS- C)	1
Gonorrhea	Group Total:	3
	GONORRHEA	3
Hepatitis B	Group Total:	1
Influenza	Group Total:	3
	INFLUENZA-ASSOCIATED HOSPITALIZATION	3
Mycobacterial Disease (Nontuberculous)	Group Total:	2
	MYCOBACTERIAL DISEASE (NON- TUBERCULOUS)	2
Pathogenic E.coli	Group Total:	2
	E-COLI, ENTEROPATHOGENIC (EPEC)	1
	E-COLI, SHIGA TOXIN- PRODUCING (STEC)	1
Syphilis	Group Total:	1
	SYPHILIS, PRIMARY	1
Tuberculosis, Latent Infection (LTBI)	Group Total:	1
	TUBERCULOSIS, LATENT INFECTION (LTBI)	1
Period Total:		2023

Default Filters: 'State' EQUAL TO 'WI'

1/1/2022-4/30/2022

Probable and Confirmed

De Pere Health Department Covid Response Activities

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES - February 2022			
Activity	Name	Date	Notes
COVID Vaccine Clinic	DPHD Staff	2/3, 2/17	
Media Briefing to Update the Status of COVID-19 in Wisconsin	DPHD Staff	2/3/2022	
Overview of Updated COVID-19 Guidance for Operating Early Care and Education/Child Care Programs	Danielle	2/3/2022	
COVID-19 Webinar for Health Care Providers: COVID-19 Updates	Debbie, Danielle	2/4/2022	
[NCI] LHO COVID-19 Calls with Traci DeSalvo	Debbie	2/7, 2/14, 2/21, 2/28	
COVID-19 Vaccine Program Updates	Debbie S, Danielle, Debbie, Sara	2/8/2022	
Advancing Health Equity During the COVID-19 Pandemic Forum	Danielle	2/11, 2/25	
Pfizer COVID-19 Vaccine Medical Updates and Immunization Site Training Sessions	Danielle	2/16, 2/23	
Updates on COVID-19 Vaccines and Therapeutics	Danielle	2/18/2022	
Joint Webinar for Public Health and School Stakeholders:	Debbie S, Danielle, Debbie, Sara	2/23/2022	
Updated Guidance for Clinicians on COVID-19 Vaccines	Danielle, Sara, Debbie	2/24/2022	
COVID-19 Infection Prevention Observations from the Field	Danielle	2/24/2022	

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES - March 2022			
Activity	Name	Date	Notes
COVID Clinic	DPHD Staff	3/3, 3/15, 3/17, 3/22, 3/28	
Advancing Health Equity During the COVID-19 Pandemic Forum	Debbie, Danielle,	3/4, 3/11, 3/18, 3/25	
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie	3/7, 3/14, 3/21, 3/28	
COVID-19 Vaccine Program Updates	Debbie, Danielle, Debbie S, Sara	3/8, 3/22	
Regional COVID Discussion - 2022 (series updated)	Debbie	3/17/2022	
PHN/School RN Meeting	Danielle, Debbie, Debbie S, Sara	3/17/2022	
Nurse Meeting	Danielle, Debbie, Debbie S, Sara	3/23, 3/30	

DE PERE HEALTH DEPARTMENT COVID RESPONSE ACTIVITIES -April 2022			
Activity	Name	Date	Notes
[NCI] LHO COVID-19 Call with Traci DeSalvo	Debbie S, Danielle, Debbie A, Sara	4/4, 4/11, 4/18, 4/25	
COVID Webinar	Debbie S	4/6/2022	
PHN/School RN Meeting	Danielle, Debbie	4/7, 4/21	
Pfizer Vaccine Webinar	Debbie S	4/7, 4/28	
Advancing Health Equity During the COVID-19	Danielle	4/8/2022	
COVID Vaccine Clinic	DPHD Staff	4/12, 4/21	
Nurse Meeting	Debbie, Debbie S, Danielle, Sara	4/13, 4/20, 4/27	
Communicating Through COVID-19 and Beyond: Impact and Insights from the Field of Public Health	Debbie, Debbie S, Danielle, Sara	4/13/2022	
Misinformation as a risk factor during the COVID-19 pandemic	Sara	4/26/2022	
St. Norbert Abbey Booster Clinic	Debbie S, Jaimie, Colleen	4/26/2022	

De Pere Health Department Outreach and Prevention Activities

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES - February 2022			
Job/Activity	Name	Date	Notes
VFC Clinic	Danielle, Sara, Debbie	2/10/2022	
Community N95 Mask Distribution	Debbie, Debbie S, Jaimie	2/10/2022	
VFC Clinic	Danielle, Sara, Debbie	2/22/2022	
De Pere Men's Club Public Health Presentation	Danielle, Sara, Debbie	2/22/2022	
Community N95 Mask Distribution	Danielle, Debbie, Debbie S, Jaimie	2/24/2022	
New 2 Public Health Promo Video	Sara	2/14/2022	
Library Picnic and Play	Sara	2/16/2022	
Fit Testing Fire Dept	Sara	2/28/2022	
Photo op for Stay at home with assistance program	Debbie, Danielle	2/9/2022	

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES - March 2022			
Job/Activity	Name	Date	Notes
Car Seat Clinic @ Center for Childhood Safety	Danielle	3/2/2022	
VFC Clinic	Danielle, Sara, Debbie	3/10/2022	
Car Seat Clinic @ DP Fire	Danielle, Sara	3/16/2022	
VFC Clinic	Danielle, Sara, Debbie	3/22/2022	
Evaluator for Extreme Weather Exercise w/ NEW HERC	Sara	3/2/2022	
Library Picnic and Play	Sara	3/16/2022	

DE PERE HEALTH DEPARTMENT OUTREACH AND PREVENTION ACTIVITIES -April 2022			
Job/Activity	Name	Date	Notes
VFC Clinic	Danielle, Sara, Debbie	4/14, 4/26	
Car Seat Clinic	Danielle, Sara	4/27/2022	
Library Picnic and Play	Sara	4/20/2022	

De Pere Health Department Trainings/Conferences

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE - FEBRUARY 2022

Job/Activity	Name	Date	Notes
Operations Conference	Debbie A	2/16/2022	

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE - MARCH 2022

Job/Activity	Name	Date	Notes
WI Emergency Management	Sara, Danielle	3/8-3/9/22	
WI Tuberculosis Summit	Sara, Danielle	3/15/22, 3/22/22, 3/29/22	
QPR Training	Danielle	3/15/2022	
WALC Conference (lactation)	Sara	3/4/2022	

DE PERE HEALTH DEPARTMENT TRAININGS/CONFERENCES/CE - APRIL 2022

Job/Activity	Name	Date	Notes
2022 Preparedness Summit	Debbie, Sara	4/2-4/6/2022	
2022 WI Health Literacy Summit	Danielle, Emma	4/4-4/6/2022	
WI Tuberculosis Summit	Sara, Danielle	4/5/22, 4/12/22, 4/19/22, 4/26/22	
Prevent Suicide Conference	Danielle	4/21-4/22/22	
NEW HERC High Consequence Infectious Disease Surge Workshop	Sara, Danielle	4/26/2022	
CPO Class	Trista	4/7-4/8/2022	



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Approval of MOU Between State of WI Department of Health Services and De Pere Health Department for Hosting an XRF Device for Lead Abatement Projects*

ATTACHMENTS:

- LSHP_MOU_De Pere HD_XRF Hosting (DRAFT) (PDF)



Memorandum of Understanding (MOU)
between the
State of Wisconsin Department of Health Services (DHS) Lead-Safe Homes Program (LSHP)
and
De Pere Health Department
for
Locally Hosting an X-Ray Fluorescence (XRF) Device for Lead Abatement Projects

DHS MOU No.:

MOU Amount, If Applicable: N/A

MOU Term Period:

State of Wisconsin Department of Health Services (DHS) Lead-Safe Homes Program (LSHP):

MOU Administrator: Seung Heon (Sean) Rhee

Telephone: 608-709-6243

Email: seungheon.rhee@dhs.wisconsin.gov

De Pere Health Department:**MOU Administrator:****Telephone:****Email:**

State of Wisconsin Department of Health Services (DHS) Lead-Safe Homes Program (LSHP) and De Pere Health Department acknowledge that they have read the Memorandum of Understanding (MOU) and any attached documents, understand them and agree to be bound by their terms and conditions. Further, LSHP and De Pere Health Department agree that the MOU and any exhibits and documents incorporated herein by reference are the complete and exclusive statement of agreement between the parties relating to the subject matter of the MOU and supersede all proposals, letters of intent or prior agreements, oral or written and all other communications and representations between the parties relating to the subject matter of the MOU. LSHP reserves the rights to reject or cancel MOUs based on documents that have been altered. This MOU becomes null and void if the time between the earlier dated signature and the later dated signature exceeds sixty (60) days, unless waived by LSHP.

Entity Name: Wi Department of Health ServicesEntity Name: De Pere Health Department

Authorized Representative

Authorized Representative

Name: _____

Name: _____

Title: _____

Title: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

1. PURPOSE AND SCOPE

The following is a **Memorandum of Understanding (MOU)** between State of Wisconsin Department of Health Services (DHS) Lead-Safe Homes Program (LSHP) and De Pere Health Department for the purpose of:

Locally hosting an X-Ray Fluorescence (XRF) device in the De Pere area to make it available to Lead-Safe Homes Program partners and Local Health Department staff for lead risk assessment and clearance activities.

Details on the radioactive material and XRF device:

- Device Type: **Viken Pb200i Lead Paint Analyzer (formerly named Heuresis Corporation Model Pb200i XRF Analyzer)**
- Device Serial #:
- Radioactive Material: **Cobalt-57**
- Chemical and/or physical form: **Sealed source registered either with NRC under 10 CFR 32.210 or with an Agreement State.**

1.1 Scope of Work

1.1.1 LSHP responsibilities:

- Reimburse De Pere Health Department for the cost of any licenses required and/or change any existing license to locally host the XRF device.
- Reimburse De Pere Health Department for the cost of leak testing the XRF device.
- Reimburse De Pere Health Department for the cost of resourcing the XRF device including the shipping cost of the XRF device for resourcing.
- Reimburse De Pere Health Department for the cost of any other maintenance that is required for the XRF device because of an issue that develops during usage and hosting period.
- Provide a list of LSHP partners and Local Health Departments with contact information to De Pere Health Department who are pre-authorized to utilize the XRF device in the local area of De Pere and surrounding counties. For those who are not on this pre-authorized list, De Pere Health Department will request prior approval from LSHP before granting access to the XRF device.
- Communicate to LSHP partners and Local Health Departments of the availability to utilize the XRF device in De Pere and surrounding counties. Also, provide instructions that utilization requests will require a written request with a minimum of three (3) business days in advance, where for urgent requests, De Pere Health Department will make best effort to make the XRF device available.

1.1.2 De Pere Health Department responsibilities:

- Follow all DHS rules and license conditions for hosting XRF device (WISREG 1556 Vol. 1 P-45025: <https://www.dhs.wisconsin.gov/publications/p4/p45025.pdf>).
- Assign a radiation safety officer who will be responsible for the XRF device.
- Communicate utilization process and expectations to LSHP partners and Local Health Departments before providing access to the XRF device.
- The radiation safety officer is responsible for:
 - Complete and submit, along with a copy of this signed MOU, the license application DPH Form F-45006 (05/10) (<https://www.dhs.wisconsin.gov/forms/f4/f45006.pdf>) to the Radiation Protection Section.
 - Keep all licenses up to date.
 - Store the XRF device in a secure location. Only authorized personnel should have access to this area and there should be at least one physical barrier (locked door or cabinet).

- Allow inspections and/or audits by the DHS Radioactive Materials Program.
- Take immediate corrective action to resolve all findings or compliance problems identified by DHS.
- Maintain and keep up-to-date all required records.
- Keep a log of when and where the XRF device is being used and by whom. Provide a quarterly update to LSHP of this log.
- Ensure only properly trained individuals transport or operate the XRF device.
- Conduct leak testing at least every twelve (12) months.
- Conduct an internal audit at least every twelve (12) months (see WISREG 1556 Vol. 1 P-45025 Appendix F).
- Conduct and document inventory inspections of all XRF device equipment every six (6) months.
- Make all necessary arrangements to send the XRF device to Viken Detection for resourcing when necessary.
- Follow all requirements for shipping radioactive materials, including ensuring staff receive U.S. Department of Transportation Hazmat Transportation Training at least every three (3) years and maintaining a UN2911 label on the transportation case.
- Alert LSHP about any problems that arise with the XRF device, or any issues with groups using the XRF device. (For example: not returned in timely manner; returned with an issue not related to normal wear and tear; and/or, used more than once/month.)
- Report any changes in the radiation safety officer staffing to LSHP.
- Return the XRF device to LSHP at the end of the MOU period.
- Submit itemized invoices, with documentation of costs, to LSHP: (by email) DHSLeadSafe@dhs.wisconsin.gov; (by mail) LSHP, 1 West Wilson Street, Room 145, Madison, WI 53703; or, (by fax) 608-223-7702.
- Applicable rules that need to be followed include:
 - Wisconsin Chapter DHS 157 – Radiation Protection Regulatory Guide May, 2010 – Guidance for Portable Gauges or ORF Devices (WISREG 1556 Vol. 1 P-45025): <https://www.dhs.wisconsin.gov/publications/p4/p45025.pdf>
 - Wisconsin Chapter DHS 157 – Radiation Protection: https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/157.pdf
 - Training Requirements for XRF Users (DHS P-02264 11/2018): <https://www.dhs.wisconsin.gov/publications/p02264.pdf>
 - U.S. Department of Transportation Hazmat Transport Training Requirements: <http://dothazmat.vividlms.com/>

2. ACCOUNTABILITY

The contact person(s) and their titles from each agency responsible for monitoring and resolving issues in the MOU.

LSHP Contact Person: Brian Higby
 Title: Lead Environmental Health Specialist
 Phone Number: 608-590-3780
 Email Address: brian.higby@dhs.wisconsin.gov

De Pere Health Department Contact Person: Trista Groth
 Title:
 Phone Number:
 Email Address: tgroth@deperewi.gov

3. REVIEW CYCLE PERIOD

3.1 Length: The agreement will be reviewed every six (6) months.

3.2 Target Review Date, if applicable: 07/01/2022

MOU DRAFT

4. TERMINATION WITH NOTICE

Either party can terminate this MOU with a 30-calendar-day notice. Other technical assistance or projects identified by either party during the MOU will be negotiated and further specified as modifications to this MOU. These modifications will be written and signed by the proper representatives of each agency and identify the exact nature of the assistance to be provided. Fiscal specifications, if any, need to be identified. These agreements will be attached as modifications or as clarifications to this MOU.

MOU DRAFT



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: May 9, 2022

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Update on COVID-19

ATTACHMENTS:

- BOH report May 2022(PDF)

COVID UPDATE 5/4/22**COVID DISEASE:**

- De Pere and Brown County experienced a marked downward trend in disease in Spring (as did the US with the decrease in Omicron cases)
- Recently the case count is moving upward here and throughout the US
- Positivity rate for the state reflects this:
 - Lowest 2.5% in March
 - Now: 9.5%
- Case Count for De Pere:
 - January: 1750
 - February: 223
 - March: 33
 - April: 103
 - May: 22 cases thru May 3rd (if continues trend will be over 200 cases in May)
- Why the increase:
 - Less masking
 - New Omicron sub variants that are spread very easily
 - More group activities: Concerts, baseball games, travel, etc.
 - Vaccine rates have plateaued.
 - Those eligible for boosters are not acquiring them at a high rate
- 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:

- We continue to offer COVID vaccine clinics 2-3 times per month at the community center
- Appointments are steady
 - Decrease in number of young children (age 5-11)
 - Boosters, especially for those 50 years and older are in demand
 - Not a lot of first dose demand
- 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
- We will offer vaccine at the Beer Gardens again this summer and be open to other opportunities
- Future Vaccine Trends:
 - Moderna has submitted for approval for those 6 months thru 5 years
 - Being reviewed in June
 - Probably not in our clinics until July or August IF approved

- Moderna has a bivalent vaccine they state has good results in study
 - This will not be out until at least fall
- Pfizer is planning on submitting for approval for those 6 months to 5 years (they have a vaccine for 5 years thru 11 years)
 - Plan on submitting for approval in July
- It is unknown what boosters will be recommended when.
 - There is discussion on the 5–11-year-olds getting boosted
- Pediatric Vaccination rates remain low
- Current Vaccine rates by age: COMPLETE SERIES IN WISCONSIN
 - 5-11: 24.8%
 - 12-17: 58.2%
 - 18-24: 54.8%
 - 25-34: 59.8%
 - 35-44: 69.9%
 - 45-54: 68.9%
 - 55-64: 75.6%
 - 65 plus: 82.5%
- The booster rate for those eligible drops of significantly, especially in the younger ages
- Janssen Vaccine:
 - mRNA vaccine continues to be recommended over this vaccine
 - Based on a comprehensive review of existing data, ACIP concluded that because of both higher vaccine effectiveness of mRNA COVID-19 vaccines and more serious rare safety issues associated with the Janssen vaccine, the benefit-risk balance for mRNA COVID-19 vaccines is more favorable than that for Janssen COVID-19
 - We do continue to offer Janssen vaccine based off of recommendations from the CDC and DHS (as some people will only get this vaccine). However, we provide written information on why mRNA vaccines are recommended. We do have clients change their mind and get the mRNA after reading the information.
- 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.

PREPARING FOR THE FUTURE:

- Hot Washes:
 - Planning on holding meetings with target audiences to review our COVID response, these include:
 - HD staff,
 - City Staff (specific staff to be determined)
 - Community Partners
 - This information will be used to evaluate our response and develop a plan that can be a “blueprint” for response for future pandemics
 - This activity is grant funded and will occur over the next 6-9 months