



Board of Health

Regular Meeting

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

Revised Agenda

Monday, November 16, 2020

5:30 PM

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 **November 16, 2020** at **5:30 PM**.

Due to the current public health emergency, the meeting will be held electronically and the public may attend this meeting electronically or telephonically by accessing either:

Please join my meeting from your computer, tablet or smartphone.

<https://www.gotomeet.me/KevinClark3/depere2>

You can also dial in using your phone.

United States (Toll Free): [1 877 568 4106](tel:18775684106)

United States: [+1 \(571\) 317-3129](tel:+15713173129)

Access Code: 654-189-861

THIS MEETING WILL NOT BE HELD IN PERSON.

I.

1. Call to Order
2. Roll Call
3. Approval of September 21, 2020 meeting minutes
4. Update of Strategic Planning
5. Updates on COVID-19
6. Community Health Updates regarding Outreach Activities and Disease Report
7. Discussion of Board of Health expectations of communication from the Health Department
8. Public Comment on Matters not on the Agenda
9. Future Agenda Items
10. 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: November 16, 2020

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Approval of September 21, 2020 meeting minutes

ATTACHMENTS:

- 9.21.20 BOH Minutes(PDF)

**BOARD OF HEALTH MEETING
CITY OF DE PERE, WISCONSIN – September 21, 2020**

The Board of Health of the City of De Pere, Wisconsin met in regular (virtual) session in the Council Chambers at City Hall, on Monday, September 21, 2020 at 5:30 p.m.

1. Call to Order

The meeting was called to order by Dennis Hibray at 5:34 pm.

2. Roll Call

Roll call was taken and the following members were present: Casey Nelson, Kelly Ruh, Dennis Hibray, Teresa Gulyas and Dr. Michael McHenry. Also present were Dr. Steve Stroman, Kristin Johnson, Deborah Armbruster, Danielle Jauquet, Trista Groth and Kelly Burke. Officer Renon was also present. Public attendees included Seth Sheikh, Christine McMullin, Katie and Mark Bischoff.

3. Approval of March 16, 2020 Meeting Minutes

Casey Nelson made a motion, seconded by Dr. Michael McHenry to approve the minutes of the May 18, 2020 Board of Health Meeting. Upon vote, the motion passed unanimously.

4. Hearing regarding the City of De Pere Determination of Dangerous Animal Order from 08/18/2020

The Dangerous Animal Order alleges that on June 10, 2020 and August 7, 2020 a dog owned by Seth Sheikh, 1159 Coral Street, chased or approached a person in a menacing fashion or apparent attitude of attack without provocation on private or public property.

Deborah Armbruster explained that on August 18th in conjunction with the police chief, it was determined that this dog could be considered a dangerous dog due to the injuries sustained and the Dangerous Animal Order was written and served. The next day Seth Sheikh sent a letter asking the issue to be brought to the Board of Health to determine if this order needs to be set forth or if other arrangements could be made.

Officer Renon explained that on July 10th, the victim, Katie Bischoff, was outside by the north side of her house when the neighbor's dog came at her while she was facing away. The dog, Reggie, bit Katie in the back of the upper left leg. Katie yelled and used the leash to swat the dog. Katie identified the dog as a large brown and white bulldog and identified the owner's house. Officer Renon spoke with the owners, Seth and Kristen. Kristen said their 2 year old opened the door and the dog got out. By the time she got over there, the dog was running back.

Officer Renon reported that the second incident occurred on August 7th. The victim was Christine McMullin. Christine was out watering plants when she heard the jingle of the dog's collar. The dog ran up behind her and bit her. There were 2 puncture wounds on her right arm and more puncture wounds on her lower right buttocks with swelling. Christine commented that the dog is always loose. She said the dog looked similar to a pit bull and it was brown and white. It was

determined that the dog was Reggie, belonging to Seth and Kristine. Officer Renon made contact with the residence, but the owners were not home. The babysitter, Sheila, noticed the dog needed to go out and had put the collar for the electronic fence on the dog and let him out. The dog did get shocked, but ran through the fencing to the neighbor and bit her.

Katie Bischoff gave her statement of the incident on July 10th. She indicated that the prior summer the bulldog had attacked the neighbor's dog, unprovoked. The concern with this incident was that upon the door opening, the dog immediately ran straight toward her. Katie made no eye contact with the dog and had her backed turned when the dog bit her. Katie reported that they are fearful to spend time in their yard. Mark, her husband, has also had an incident with the dog approaching him, but he faced the dog with confidence and it didn't bite him. Per Mark, they also heard from a neighbor that the dog had bit someone walking by, but they were unable to obtain a name.

Christine McMullin gave an account of her incident on August 7th. She explained that at the time of the incident she was outside alone doing gardening. She heard the jingle of the collar and the next thing she knew the dog was on her back biting her right arm. She got the dog off her back and then it started biting her behind. This was unprovoked. They no longer go outside alone and always take a tool with them if needed. They do not let their grandchildren outside due to this.

Seth, the dog owner, spoke and said that the night of the second incident they went over and spoke with the boyfriend of the victim. He informed them it was just a small scratch and she (the victim) had gone to work. The police told Seth she (the victim) had gone to the hospital. Seth was confused by the discrepancy between the boyfriend and the officer.

Seth added that he also talked with Mark, the husband in the first incident, and gave him money for hospital bills. Seth had not heard of any incidents with a person walking by. Seth apologized and said the dog was in training and was doing great in his classes. They have had the dog for 5 years and have not had any incidents before this. They are installing door locks to keep the children from letting him out, but he doesn't believe his dog would do this unprovoked.

Christine McMullen, the 2nd victim, spoke again. She said she does not know who Seth spoke with but she does not have a boyfriend, she has a husband, and Seth did not talk with either one of them. Christine has medical records she can provide as proof that she has been seen by a physician multiple times. She still has a pocket of hematoma in the buttock area that is not resolving and may need a surgery. Per Christine, this is a serious incident and it cannot happen again.

Seth apologized that he may have gone to the wrong house as he went to the one right next door.

Casey Nelson asked Seth when the electric fence was installed. Seth replied it was installed after the first incident. In the second incident the shock collar was on the dog when he was let out.

Dr Mc Henry asked if the fencing was professional installed or self-installed? Seth replied it was self-installed but is working. Seth indicated that they do not have the shock setting turned up to the maximum and he can turn it up higher if he needs to.

Dennis Hibray asked where the victims live. Christine lives in the next duplex building over from the dog. Katie's yard is directly behind the owner's yard.

Terry Gulyas asked what the vet said. Seth replied that Reggie has a clean bill of health and aggression was not discussed with the vet.

Mike McHenry asked if there was any aggression towards his children. Seth replied that there was absolutely no aggression with his kids.

The Board of Health went into closed session for discussion.

After discussion, the Board determined that the allegations contained in the determination of a dangerous animal ordered on August 18th, 2020 are sustained. The Board finds that the dog owned by Seth Sheikh, known as Reggie, is dangerous. Therefore the dog must be removed from the City within 48 hours of receiving written notification of this determination. Casey Nelson made a motion to uphold the order made by the Health Director on August 18, 2020. Kelly Ruh seconded the order. Upon vote, the motion passed unanimously.

5. Introduce new full time nurse, Danielle Jauquet

Deborah Armbruster announced that Danielle Jauquet has been a public health nurse for over 4 years and has been in some managerial roles with the Brown County Health Department, leading the communicable disease surveillance teams and teaching contract tracers. The transition into her role in De Pere has been very smooth.

6. Draft of 2021 De Pere Health Department and Board of Health Budget

Deborah Armbruster asked if there were any questions regarding the Budget. Casey Nelson asked if there were concerns going into the next year. Debbie responded that we received COVID grants through December, 2020 and one extends into 2021. Word is that we (Health Department) should receive more funding in 2021 for COVID and some of our existing grants may be used for COVID response. This has allowed the Administrative Assistant to be full time as well as our second nurse to be full time. We have also hired a limited term employee for 20 hours/week. We just hired another contact tracer for 10 hours per week to assist on the weekends. Debbie does not have a concern with our funding right now. Dr. Michael McHenry made a motion to approve the draft budget. Casey Nelson seconded the motion. Upon vote, the motion passed.

7. Community Health Updates regarding Outreach Activity and Disease Report

Debbie explained that due to COVID we have done very little outreach right now. The disease incidence report is included. Debbie explained that the Health Department has extended their hours to later at night and started with Saturday hours to assist with the contact tracing. Dennis Hibray asked how the residents were responding to being contact by the Health Department. Debbie explained that the public has become more resistant and less forthcoming recently. Debbie explained that some parents send their kids to school when they should be quarantined. Dennis asked how our communication was with the school. Debbie explained that we are advisors to the school nurses and the school nurses are great. We are in constant contact with the nurses regarding positive cases and contacts. We have seen some spikes at St. Norbert and the St. Norbert nurses have been doing an excellent job handling those cases.

8. Dissolution Bridges of Fox River Consortium and future agreement with City of Menasha

The Bridges of Fox River Consortium disbanded as of July 1st. Trista is an independent agent. Trista was set to go through the standardization process in October, but the Dept. of Agriculture has ceased doing these until 2021. This will not affect our agent status. We are in process of creating an MOU with Menasha to assist each other as needed.

9. Update on the progress of State Standardization Process for Sanitarian

Trista was set to go through the standardization process in October, but the Dept. of Agriculture has ceased doing these until 2021. They are waiting for a safer time to complete this. Trista will not be standardized at this time, but this will not affect our agent program.

10. Updates on COVID-19

Deborah Armbruster reported that Hemlock school has closed for 2 weeks. De Pere Middle school may also be closing. We have weekly meetings with the Medical Providers. Dr Rai has a medical actuary who looks at the cases in the area. Per the actuary, we are between 12% and 17% positivity in the last 14 days. The Department of Health Services shows Brown County having greater cases per 100,000 people than Milwaukee.

11. Discussion on Board of Health meetings in regards to frequency and special meetings

Debbie explained that some Council members may have wanted the Board of Health to meet more often during the pandemic and to discuss and provide guidance on some issues such as the mask ordinance. Debbie asked if the Board wanted to change how we meet and when. Debbie explained that the guidance from CDC and the state has been fairly straightforward. Theresa Gulyas stated that she thought Debbie and her team were doing a great job. Dr. McHenry asked how often Debbie was in contact with the Medical Director. Dr. Stroman replied that early in the pandemic, they were together every day at the Emergency Operations Center for a period of 2 months. Dr. Stroman receives a

situation report from Debbie and the Department every day. Dr. Stroman and Debbie have met in person weekly or every other week. They have been communicating frequently. Dr. Stroman explained that we are following the lead from the CDC and State. They have been very forthcoming with plans.

Dr. McHenry suggested we continue our current meeting schedule unless we feel a special meeting is warranted. Dennis Hibray feels the daily reports are helping keep the Board of Health informed. Dennis feels we can leave it up to Debbie if she feels we need a special meeting.

12. Public Comment on Matters not on the Agenda

No comments were made

8. Future Agenda Items

Dennis Hibray stated that on his voting ballot, there was a question about whether the health officer should have the authority to issue orders such as masking, or if it should go to the County Board. Debbie explained that that only applies to Brown County, not De Pere. Casey added his understanding was it was a non-binding referendum advisory.

8. Adjournment

Casey Nelson made a motion to adjourn the meeting. Theresa Gulyas seconded the motion. Upon vote, the motion passed unanimously. The meeting adjourned at 6:42 pm.

Respectfully Submitted,
Kelly Burke
Health Department Administrative Assistant



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: November 16, 2020

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Update of Strategic Planning

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

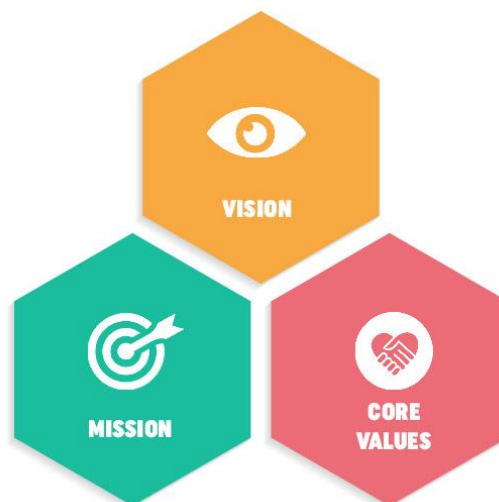
De Pere, a community where all people can live well and flourish together.

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.

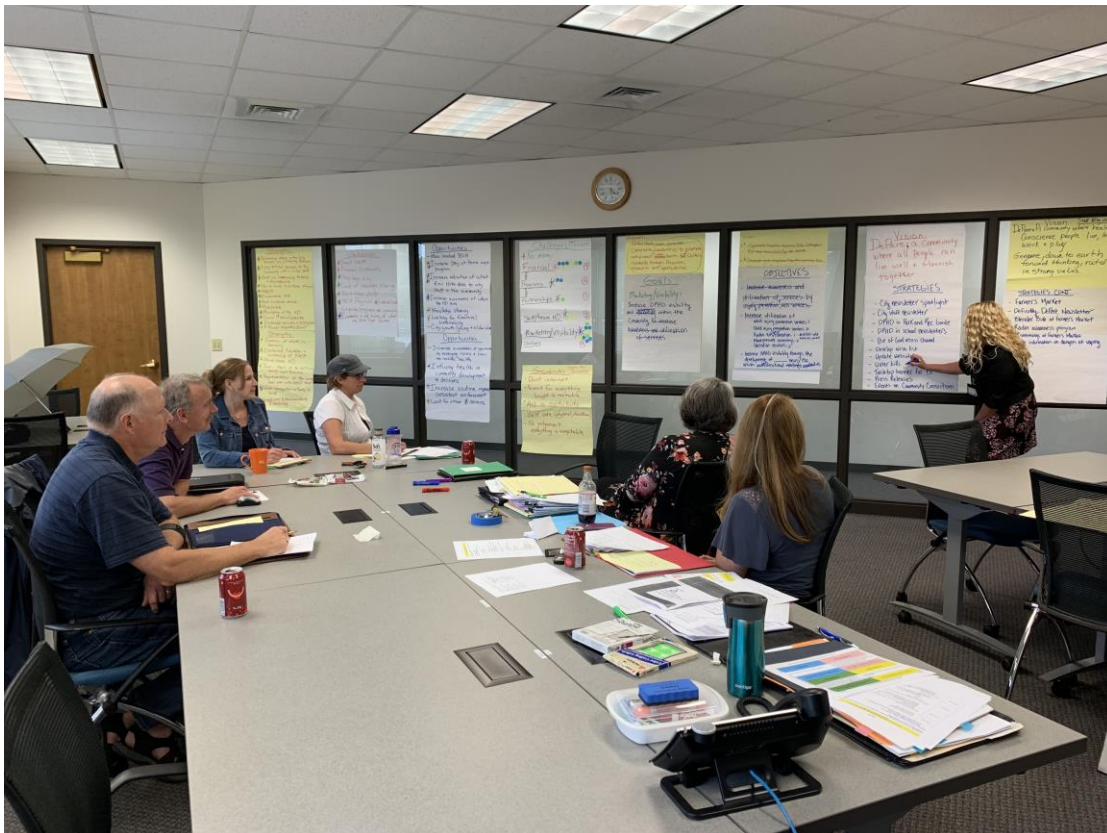
- The second meeting was held on **6/10/2019** at which time the stakeholder analysis and formal and informal organizational mandates were reviewed. The staff led the discussion on the values, mission and vision statements and at this meeting the staff voted to accept and finalize these statements. The 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.

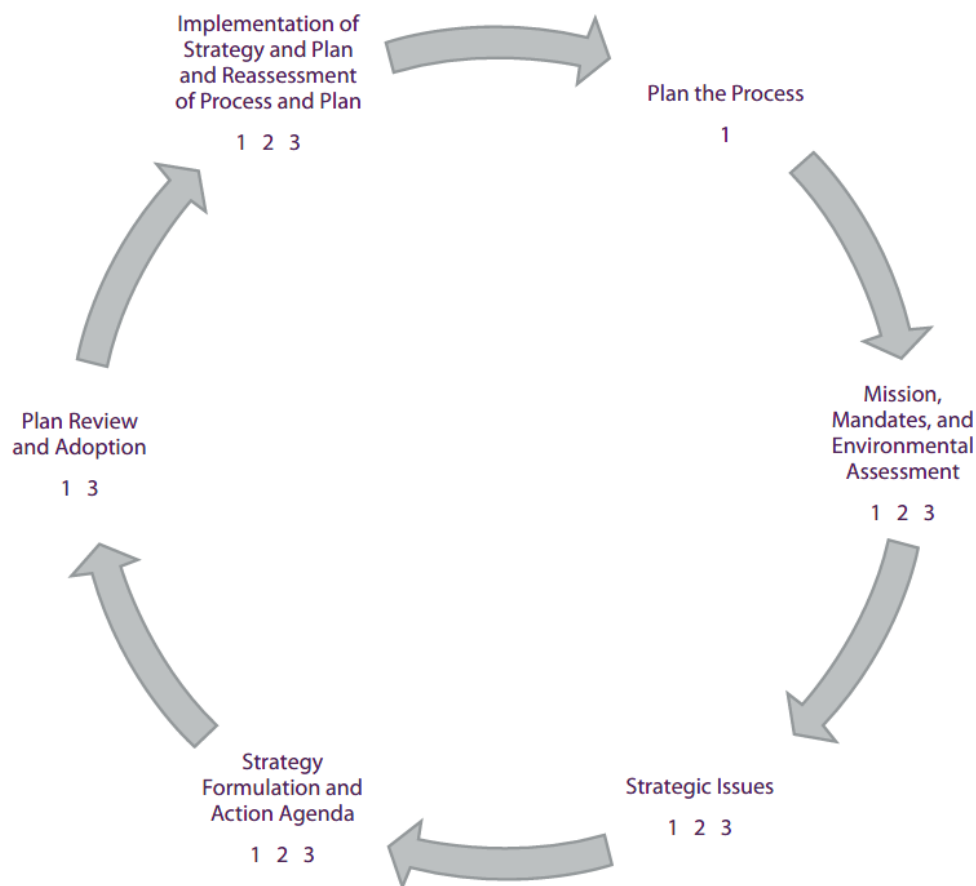
Reflect back to the strategic planning cycle offered by Bryson and Alston:

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: November 16, 2020

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Updates on COVID-19



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: November 16, 2020

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Community Health Updates regarding Outreach Activities and Disease Report

Two influenza vaccine clinics were held on October 13 and 26 at the De Pere Community Center. We are hosting a drive through influenza vaccine clinic on November 14 at De Pere Fire Station #2.

ATTACHMENTS:

- Disease Incident Count September and October 2020 (PDF)



Wisconsin Department of Health Services
Division of Public Health
PHA VR - WEDSS

Disease Incidents by Episode Date

Jurisdiction: De Pere

		2020
Disease Group	Disease	Total
Chlamydia Trachomatis Infection	Group Total:	5
COVID-19	Group Total:	1017
Gonorrhea	Group Total:	2
Hepatitis C	Group Total:	1
Pathogenic E.coli	Group Total:	1
Salmonellosis	Group Total:	1
Syphilis	Group Total:	1
	Period Total:	1028

Default Filters: 'State' EQUAL TO 'WI'



City of De Pere, Wisconsin

Request For Board of Health Action

MEETING DATE: November 16, 2020

DEPARTMENT: Health Department

FROM: Deborah Armbruster

SUBJECT: Discussion of Board of Health expectations of communication from the Health Department
