



# Board of Health

## Regular Meeting

335 South Broadway  
De Pere, WI 54115  
[www.deperewi.gov](http://www.deperewi.gov)

## Agenda

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Monday, February 9, 2026

5:15 PM

Council Chambers and Virtual

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Pursuant to Wisconsin Statute 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 **February 9, 2026** at **5:15 PM** in the **COUNCIL CHAMBERS, 2ND FLOOR CITY HALL, 335 S. BROADWAY STREET. DE PERE.**

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

*This meeting may also be rebroadcast on TV throughout the week and available on demand at <https://deperewi.portal.civicclerk.com/>.*

1. Call to Order
  - a. Welcome New Board of Health Member, Julie Massey, Ed.D.
  - b. Roll Call.
  - c. Public Comment on Matters not on the Agenda. Comments made during the public comment period shall pertain only to matters under the jurisdiction of the Board of Health. §6-3(f) DPMC
  - d. Approval of the minutes of the November 10, 2025 meeting.
  - e. Nomination and Appointment of Chairperson to the Board of Health.
  - f. Consideration and Possible Action to Support Public Health Accrediting Board's Pathways Recognition Process for De Pere Health Department.
  - g. Consideration and Possible Action to Approve the 2026-2030 De Pere Health Department Strategic Plan.
  - h. Program Performance Dashboard End of Year 2025.
  - i. Communicable Disease Report End of Year 2025.
  - j. Environmental Health Report January 2026.

- k. Director's Report January 2026.
  - l. Grant Summary 2026.
  - m. Future agenda items.
2. Adjournment

Any person wishing to attend this meeting who, because of disability, requires special accommodations should contact the Health Department at 920-339-4054 by noon on the previous day so that arrangements can be made.

Agenda Sent To:

Alderspersons  
City Manager  
Mayor  
Department Heads  
TV, Newspapers & Radio Stations  
Kress Family Library  
De Pere Chamber of Commerce



**City of De Pere, Wisconsin**

**1.a**

**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Welcome New Board of Health Member, Julie Massey, Ed.D.  
**RECOMMENDED ACTION:** Information only

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**ATTACHMENTS:**  
Appointment Julie Massey

# CITY OF DE PERE

## MEMO

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To: Members of the Board of Health  
From: Chrystal Woller BSN, RN, MBA  
Meeting Date: 2/09/2026

Re: Newly appointed BOH member, Julie Massey

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Julie Massey has been recommended by the mayor and approved by the City Council (December 16, 2025) to serve on the Board of Health. Julie will be completing Dennis Hibray's term, who resigned/retired in December 2025.

Julie Massey moved to De Pere, WI with her family in the summer of 1998, and they have been delighted to call this wonderful city their home ever since! Julie, who started in ministry positions early in her career, worked in higher education for nearly three decades. At St. Norbert College, she served in various roles (campus minister, director of mission and ministry, associate vice president for mission and student affairs, interim vice president for mission and student affairs, and the president's chief of staff) before retiring from full-time work in the summer of 2024. Massey served as interim vice president at the onset of the COVID-19 pandemic and learned how critical public health efforts are to community well-being. An SNC alum, Massey earned an M.Div. from Loyola University Chicago and an Ed.D. from Boston College. She works part-time as a consultant with the Network for Vocation in Undergraduate Education. Julie and her husband Shawn are the parents of three adult daughters and grandparents to two-year-old Penelope!



# Board of Health

## Regular Meeting

### Minutes

335 South Broadway  
De Pere, WI 54115  
[www.deperewi.gov](http://www.deperewi.gov)

Monday, November 10, 2025

5:15 PM

City Hall, Council Chambers 335 S.  
Broadway, De Pere, WI 54115

#### Call to Order

1. Roll Call.

**Present:** Pamela Gantz, Teresa Gulyas, Robyn Lauritsen, Devin Perock, Dennis Hibray

**Absent:**

**Excused:**

Other attendees: Chrystal Woller, Kelly Burke, Sara Lornson, Trista Groth, Chris Culotta, and Mayor James Boyd.

Dr Schandel joined virtually.

2. Public Comment on Matters not on the Agenda. Comments made during the public comment period shall pertain only to matters under the jurisdiction of the Board of Health. §6-3(f) DPMC.

No public comments were made.

3. Approval of the August 11, 2025 Meeting Minutes.

<b>RESULT:</b>	<b>Passed</b>
<b>MOVER:</b>	Pamela Gantz
<b>SECONDER:</b>	Teresa Gulyas
<b>AYES:</b>	Pamela Gantz, Teresa Gulyas, Robyn Lauritsen, Devin Perock, Dennis Hibray
<b>NAYS:</b>	None

4. Approval of the September 29, 2025 Special Meeting Minutes.

<b>RESULT:</b>	<b>Passed</b>
<b>MOVER:</b>	Pamela Gantz
<b>SECONDER:</b>	Devin Perock
<b>AYES:</b>	Pamela Gantz, Teresa Gulyas, Robyn Lauritsen, Devin Perock, Dennis Hibray
<b>NAYS:</b>	None

5. Special Recognition of Outgoing Board of Health Member/Chairperson.

Chrystal Woller explained that Dennis Hibray has worked 50 years in public health, with 12 of them

being a member of the De Pere Board of Health. He was the Chair of the Board of Health for six years. Chrystal thanked Dennis for his time, advocacy and commitment to Public Health. Mayor James Boyd thanked Dennis Hibray for his service to the city and presented him with a plaque. Dennis explained that when he started in Public Health 50 years ago, in our region, there were 10 city health departments, but now we are down to 3 because the rest merged. De Pere used to be a level 1 health department but has gone to level 2 and recently a level 3 health department. Dennis stated that it was a pleasure to work with the city staff and see them progress throughout the years. A second recognition was given to Dennis from Paula Tran, the state Health officer. Chris Culotta presented Dennis Hibray with a certificate recognizing Dennis' 50 years of Public Health service.

6. Consideration and Possible Action on Proposed 2026 Health Department Fees.

<b>RESULT:</b>	<b>Passed</b>
<b>MOVER:</b>	Pamela Gantz
<b>SECONDER:</b>	Robyn Lauritsen
<b>AYES:</b>	Pamela Gantz, Teresa Gulyas, Robyn Lauritsen, Devin Perock, Dennis Hibray
<b>NAYS:</b>	None

Chrystal Woller explained that this year the health department received a recommendation from the finance department and from the Administration to do a 2% increase in fees. The health department increased all fees by 2% except for the lodging fees. Lodging increased more than 2% because the Department of Agriculture, Trade and Consumer Protection is revising the state code and increasing the state fees significantly. As agents of the state, we pay a portion of our fees back to the state for support given to local agents. This year we paid back 12% on their old fee schedule. Next year we are paying back 13% on their new (increased) fee schedule. Chrystal explained the health department needed to increase the lodging fees to account for the difference. Our De Pere Health Department fees are still lower than the state fees.

Dennis questioned if having 43 TRH's was due to the NFL Draft. Trista Groth responded that De Pere normally had around 23 TRH's. This went up to 59 for the NFL Draft. At license renewals, a few TRH's dropped their licensure.

Chrystal Woller added that Weights and Measures fees are not increasing, as the health department cannot bring in more money than the program costs. Chrystal also explained that some expenses are listed on our fee schedule, although they are not services we currently provide due to low demand, such as TB skin tests.

7. Program Performance Management Dashboard Quarter 3 Update.

Chrystal Woller reported that the purpose of this dashboard is to provide a framework to guide program performance management. We have benchmarks listed on the dashboard. If we are not meeting our benchmarks, we need to look at why we are not meeting them. Currently, the benchmark of concern is the flu vaccine. Despite all of our efforts to provide opportunities for people to be vaccinated, we are seeing a low uptake of the flu vaccine. The De Pere Health Department will be doing a flu clinic at the food pantry with the mobile unit next week in effort to increase flu vaccine uptake. Dennis asked if the \$25 charge for flu vaccine was in line with other health departments. Chrystal Woller responded that the \$25 fee is probably lower than

other health departments. Chrystal Woller also added that the health department doesn't bill insurance, so people have to take the extra step to submit the claim to their insurance. Teresa Gulyas questioned if the health department is able to see the overall uptake of flu vaccine in our area from the Wisconsin Immunization Registry. Chrystal responded that the overall flu vaccination numbers will be available at the end of the flu season.

8. Communicable Disease Quarter 3 Report.

Danielle Jauquet prepared this communicable disease report. Chrystal Woller mentioned that Danielle is currently at Lambeau Field distributing condoms to reduce our communicable disease numbers. Chlamydia is the highest reported communicable disease in our jurisdiction. Chrystal Woller reported that there were 36 Measles cases in the state of Wisconsin, but none in our district. Chrystal explained that the De Pere Health Department staff completed fit testing at an area clinic to protect the workers treating measles cases.

9. Environmental Health Quarter 3 Report.

Chrystal Woller stated that the enclosed report was completed by Trista Groth. Trista Groth reported that the health department partnered with Festival Foods to do a "Lets Talk Turkey" holiday food safety event. We (health department) provided free resources, including food thermometers. It's important for the community to see that regulatory agencies and the community can work together for a common goal.

Trista also reported that the city code enforcement specialist, Chris, will be assisting with Weights & Measures. Chris will eventually take over doing gas pumps. Trista is working with the IT department to get Chris the software program needed for Weights & Measures. Having Chris assist will free up some time for Trista to focus on the Agent Program. This support will be helpful both with time and the physical component of the job.

10. Director's Quarter 3 Report.

Chrystal Woller highlighted the health department's injury prevention events over the summer. The De Pere Health Department distributed over 250 bike helmets.

Chrystal discussed our upcoming senior ball, which is an intergenerational dance at St. Norbert College, connecting college students with older adults. We will send the poster to the Board of Health members to assist in promotion of this event.

Danielle Jauquet has done the mental health first aid program for community members at no charge. The health department has been receiving milk donations. We have collected 39 gallons of breast milk since becoming a milk depot.

Chrystal Woller reported that De Pere saw an increase of 33% in our maternal child health grant, likely due to becoming a level 3 health department.

Chrystal explained that the health department's strategic planning is continuing. We are working with Kim Whitmore on this.

Chrystal also reported that Wisconsin DHS is offering one-time funding of \$400,000 to regions to support a shared service model with focus on access to care. A lot of WAHLDAB meeting time is planning/preparing for this. The next WAHLDAD meeting is Thursday. Winnebago

County will be the fiscal agent for this funding. The project has not been chosen yet. Chris Culotta explained that this funding came from the Public Health Infrastructure grant. The state applied for this grant and was awarded it. Chrystal Woller also mentioned that our seasonal intern, Katie, has moved on to a new full-time position at Aurora.

11. Future agenda items.

No future agenda items.

Adjournment

<b>RESULT:</b>	<b>Passed</b>
<b>MOVER:</b>	Pamela Gantz
<b>SECONDER:</b>	Teresa Gulyas
<b>AYES:</b>	Pamela Gantz, Teresa Gulyas, Robyn Lauritsen, Devin Perock, Dennis Hibray
<b>NAYS:</b>	None

The meeting adjourned at 6:08 pm.

Respectfully submitted,

Kelly Burke  
Administrative Assistant  
De Pere Health Department



City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Nomination and Appointment of Chairperson to the Board of Health.  
**RECOMMENDED ACTION:** Consideration and approval of Board of Health Chairperson

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**ATTACHMENTS:**

Memo\_Nomination and Appointment of Chairperson to the Board of Health

# CITY OF DE PERE

## MEMO

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To: Board of Health  
From: Chrystal Woller BSN, RN, MBA, Health Director  
Meeting Date: 2/09/2026

Re: Nomination and Appointment of Chairperson to the Board of Health

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Due to the retirement of the Board of Health Chairperson in December 2025, the Board of Health membership will need to nominate and appoint a new chairperson to lead the advisory board's meetings and serve as the primary liaison for the Health Director/Health Officer to the Board of Health. This term would be effective immediately and coincide with the term set forth in his/her membership.

# CITY OF DE PERE

## MEMO

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To: Board of Health  
From: Chrystal Woller BSN, RN, MBA, Health Director  
Meeting Date: 2/09/2026

Re: Public Health Accrediting Board (PHAB) Pathways Recognition Process

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In May of 2025, the De Pere Health Department achieved level III health department status, the highest designation for local health departments in Wisconsin. In an effort to support department performance improvement efforts and strengthen public health infrastructure locally, the state of Wisconsin is incentivizing local health departments and tribal health departments to participate in the Public Health Accreditation Board's (PHAB) "Pathways Program".

With your consideration and approval, staff would like to move forward with the Pathways Recognition Program. Participation in Pathways offers several strategic benefits to include accountability and commitment to quality. An objective review of foundational capabilities helps staff identify strengths and areas for growth. Finally, engaging in this process also builds staff capacity and fosters a culture of continuous improvement.

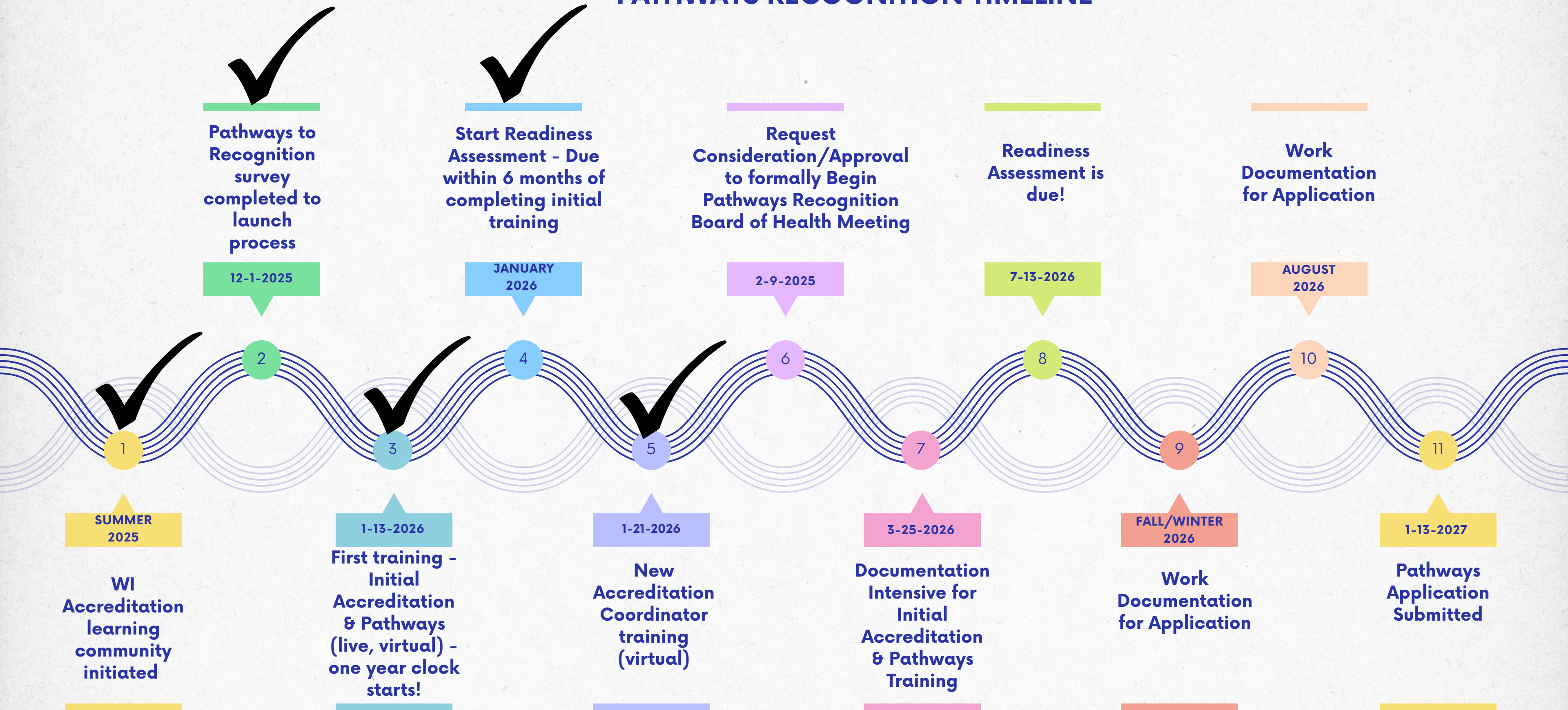
Anticipated timeframe of completion is 1/13/2027.

**Total cost for this process: \$7,399**

Covered directly by WI DHS-\$4,349 (59%)

Covered by De Pere Health Department \$3,050 (41%) Funded by the infrastructure grant

# PATHWAYS RECOGNITION TIMELINE





City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Consideration and Possible Action to Approve the 2026-2030 De Pere Health Department Strategic Plan.  
**RECOMMENDED ACTION:** Staff recommends approval

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ATTACHMENTS:  
Strategic Plan 2026, De Pere Health Department Strategic Plan Feb 2026

# CITY OF DE PERE

## MEMO

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To: Members of the Board of Health  
From: Chrystal Woller BSN, RN, MBA  
Meeting Date: 2/9/2026

Re: Strategic Plan 2026-2030

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On behalf of the entire staff team, we are excited to share the **De Pere Health Department's 2026–2030 Strategic Plan**. The De Pere Health Department (DPHD) has developed this five-year strategic plan to guide our work. This has been a journey! Between May 2025 and January 2026, DPHD partnered with Ujima United LLC to conduct a comprehensive strategic planning process. For the first time, we actively engaged community members, partner organizations, and staff through surveys and interviews, ensuring diverse voices shaped the plan. Key steps included:

- Identifying stakeholders
- Reviewing and revising the department's mission, vision, and values
- Conducting a needs assessment and environmental scan
- Reviewing data and survey results
- Identifying strategic issues and developing goals and objectives

### **Motto**

Prevent. Promote. Protect. Respond. Connect. *Care*. "The De Pere Difference"

### **Mission**

The De Pere Health Department promotes and protects health and safety, prevents illness and injury, and connects with the community to respond to needs with care and compassion. We collaborate with community members and partners to provide education, deliver trusted services that meet the needs of the community, uphold health standards, and advocate for sustainable change that strengthens the health of the community for all.

### **Vision**

"The De Pere Difference" – a caring, socially connected community where every person belongs, feels empowered, and has the knowledge and resources to live a safe, happy, and healthy life.

### **Core Values**

The De Pere Health Department **C.A.R.E.S** about the community. We value: Compassion • Accountability • Respect • Engagement • Service

The plan focuses on **three critical strategic priorities**:

1. **Community Awareness** – Enhancing understanding of "The De Pere Difference" and strengthening outreach.
2. **Data and Technology** – Building capacity for evidence-based decision-making.

3. **Youth Engagement** – Empowering youth as partners in improving community health.

These priorities align with national public health standards and position us for continuous improvement and innovation. I want to commend and thank all participants who contributed to this process:

- DPHD staff for their engagement through surveys, interviews, and planning sessions
- Community members who completed the Community Awareness Survey
- Partner organizations who provided input through the Partner Engagement Survey
- Board of Health/City Administration for the interest/engagement throughout the process

These contributions have been invaluable in shaping a plan that reflects our community's needs and aspirations.

**Next Steps:**

Upon your consideration and approval, implementation begins this year, with ongoing monitoring and report through the department's performance dashboard. The staff look forward to working together to bring this vision to life and strengthen the health of our community. Thank you for your continued support and commitment to public health.

2026-2030



# DE PERE HEALTH DEPARTMENT STRATEGIC PLAN



**Public Health**  
Prevent. Promote. Protect.

De Pere Health Department



**The 2026-2030 De Pere Health Department Strategic Plan  
was reviewed and approved by the Board of Health on:**

**Date:** \_\_\_\_\_

**Revision Date:** \_\_\_\_\_

**Revision Date:** \_\_\_\_\_

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# Overview

Between May 2025 and January 2026, the De Pere Health Department worked with consultants from Ujima United, LLC to engage in the strategic planning process. This report provides an overview of the process and the resulting strategic plan for 2026 to 2030.



## STRATEGIC PLANNING PROCESS

The purpose of the strategic planning process is to help the health department identify priorities and guide organizational decision making in order to improve their ability to support the community. The strategic planning process involves several important steps, including:

- Identify key stakeholders (June 2025)
- Define a shared mission, vision, and values (July 2025)
- Conduct a comprehensive needs assessment (July - September 2025)
  - Review of existing data
  - Community Awareness Survey
  - Partner Engagement Survey
  - Employee Engagement Survey and 1-on-1 interviews with an external consultant
- Identify strategic issues (September 2025)
- Develop goals, objectives, and activities (October – December 2025)
- Implement plan activities (2026-2030)
- Monitor and evaluate the plan (ongoing)

The strategic planning process is meant to be an ongoing cycle of continuous quality improvement. Regular monitoring and adjustments to the strategic plan will be essential to ensure continued effectiveness and adaptability to changing circumstances.



# Identifying Key Stakeholders

In June 2025, health department staff met virtually with the consultant and engaged in a stakeholder analysis activity to identify the various types of partners and stakeholder groups that should be engaged throughout the strategic planning process.

## Stakeholders were identified in the following categories:



**Community-Based Organizations**



**Elected Officials**



**Schools and Academic Partners**



**Governmental Agencies**



**Media**



**Health and Human Service Providers**



**Childcare Providers**



**Faith-Based Community Groups**



**City Departments**



**Businesses**

This activity resulted in the development of a spreadsheet listing all relevant stakeholders and the level of desired engagement. This list also will serve as an important resource for the health department as to how and when to communicate with various stakeholder groups. This list will be reviewed and updated at least annually.



# Mission, Vision and Values

In July of 2025, health department staff, the mayor, and a member of the board of health met in-person with the consultant and engaged in an activity to review the current mission, vision, and values and to update, as needed. This resulted in the adoption of the following revised mission, vision & values and the creation of a new motto for the De Pere Health Department.



## MOTTO

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Prevent. Promote. Protect. Respond. Connect. *Care.*  
"The De Pere Difference"



## MISSION

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The De Pere Health Department promotes and protects health and safety, prevents illness and injury, and connects with the community to respond to needs with care and compassion. We collaborate with community members and partners to provide education, deliver trusted services that meet the needs of the community, uphold health standards, and advocate for sustainable change that strengthens the health of the community for all.



## VISION

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The De Pere Health Department envisions “The De Pere Difference” – a caring, socially connected community where every person belongs, feels empowered, and has the knowledge and resources to live a safe, happy, and healthy life.



## VALUES

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The De Pere Health Department **CARES** about the community. We value...

### COMPASSION

We are caring, kind, and empathetic, creating a welcoming and supportive environment for all

### ACCOUNTABILITY

We uphold honesty, integrity, and transparency while advocating for ethical, inclusive practices that advance health and equity.

### RESPECT

We treat every person with dignity, fairness, and openness, honoring diverse voices and perspectives in our community.

### ENGAGEMENT

We foster strong connections through leadership, collaboration, and partnership. By engaging openly with the community, we strengthen trust, build relationships, and promote collective impact.

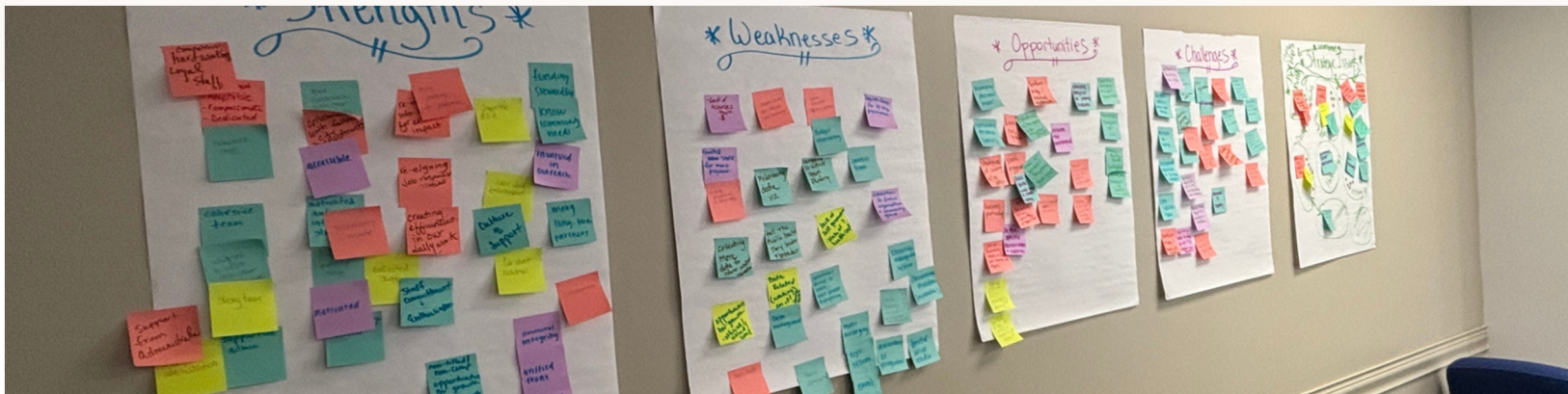
### SERVICE

We are responsible, dedicated, and committed to excellence. With a focus on continuous improvement, we use evidence-based, data-driven, and intentional approaches. We anticipate and respond to community needs with flexibility, adaptability, and resourcefulness.

# Needs Assessment

The needs assessment grounds the strategic planning process in community and organizational realities, ensuring priorities reflect identified needs, strengths, and gaps. From July to September 2025, a comprehensive needs assessment was led by the consultant and included the following activities:

- Review of existing health department data and reports
- Community Awareness Survey
- Partner Engagement Survey
- Employee Engagement Survey and 1-on-1 interviews with an external consultant



## Existing Data

**Review of existing health department data and reports included:**

- 2020-2025 Strategic Plan
- 2023 & 2024 Annual Reports
- Performance Dashboard
- 2023 Immunization Survey Results

**Key findings included:**


- According to the 2024 annual report, approximately \$421,853 in tax levy funds were invested in public health services, equating to about \$16.87 per resident. This modest investment supports a wide variety of essential services that protect health, prevent illness, and promote well-being across the community.
- Review of the health department performance dashboard showed that all program performance measures were on track to meet 2025 goals and fee revenue collected by programs exceeded targets.
- Among the 317 responses to the Immunization Survey, almost 3 out of 4 people reported their child was up-to-date on immunizations; however, only 1 in 3 was up-to-date on COVID vaccines. Half of the people who responded reported difficulty finding vaccine information and only 1% expressed cost or not having insurance as a barrier.

# Community Awareness Survey

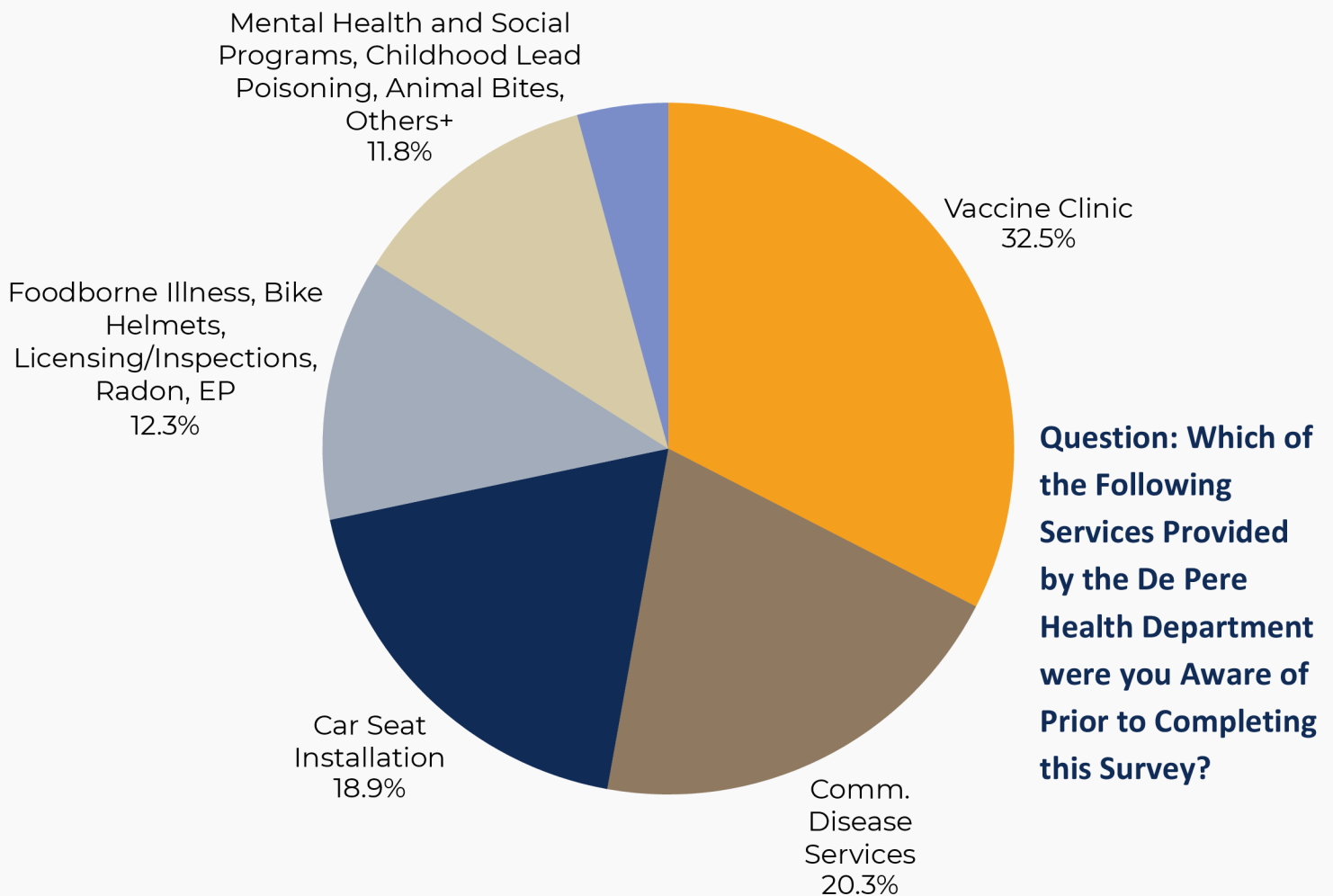
TA 10-question survey was developed by the consultant with input from health department staff and the board of health and distributed broadly throughout the community via a variety of methods, including email, social media, flyers, and outreach events.

The survey asked questions about awareness of health department services, satisfaction, and communication preferences.

A total of 113 people responded to the survey either online or via paper survey. Most respondents were middle-aged (45-64 years old) and female (81%).

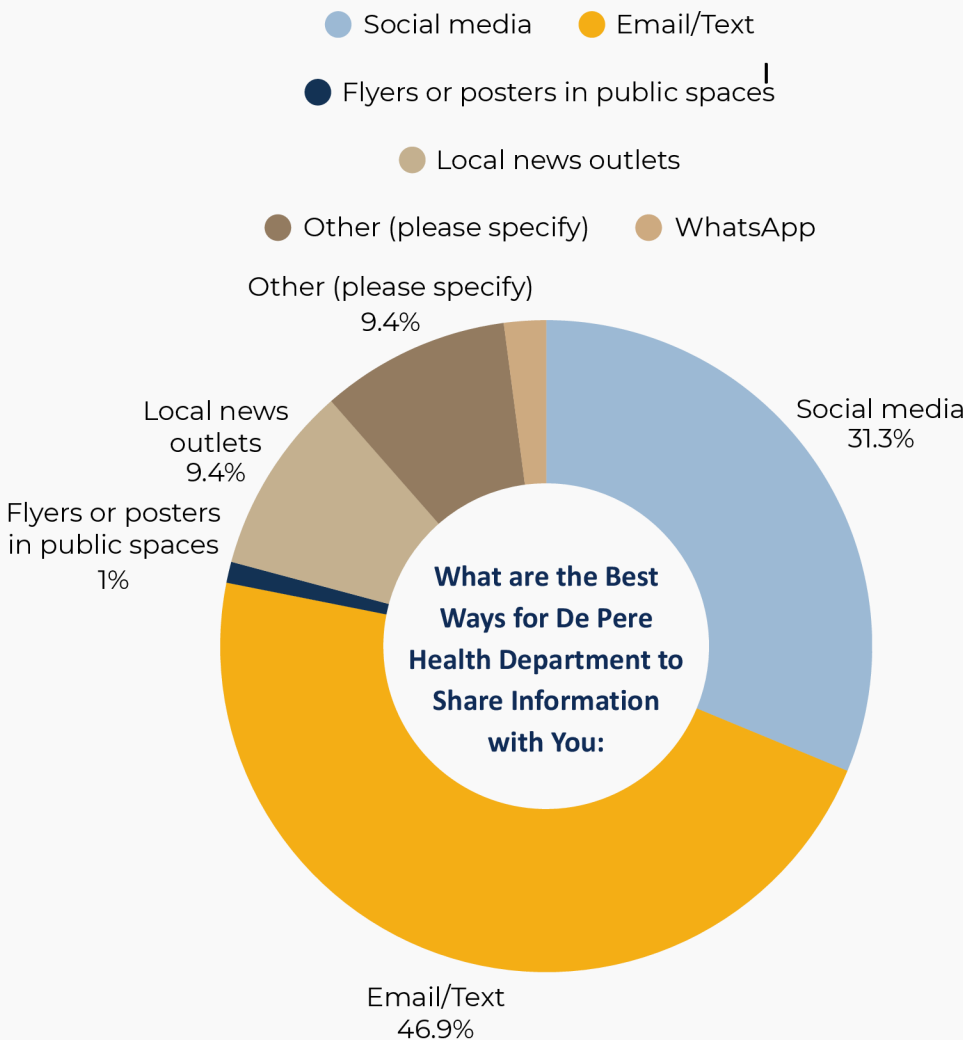
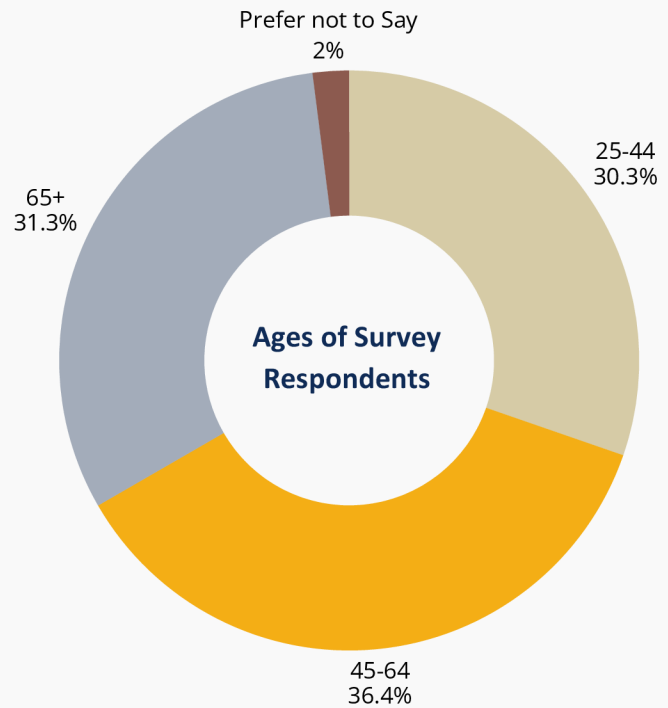


**113**  
Survey Responses



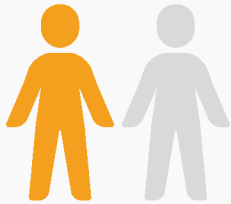
**Key findings included:**

- Approximately 4% of people who responded to the survey were “not at all familiar” with the De Pere Health Department, 41% had “heard of it, but don’t know much, 44% were “somewhat familiar” and only 11% were “very familiar”
- Out of a list of services provided by De Pere Health Department, people were most aware of immunization clinics (63%), car seat installation clinics and prenatal seatbelt checks (33%), and the radon program (26%).



- ASQ (ages and stages questionnaire) screening, beekeeping permits, Narcan Direct Program, GrapeVine (adult chronic disease prevention education program), and weights and measures (consumer protection program: licensing and inspections of scales and gas pumps) were programs that less than 1% of respondents were aware of.
- When asked to rate the performance of De Pere Health Department, most people responded “I don’t know enough to say” (48%), 26% rated the performance as “good” and 11% rated the performance as “excellent”.

# 1 in 2

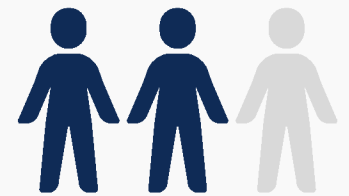


**Survey Respondents rated the Overall Performance of the De Pere Health Department as either “Excellent” or “Good”**

### Key findings continued:

- Similarly, the majority of respondents (41%) said they “don’t know” if the health department addresses the most important health needs in the community.
- Most people currently received information about public health services from social media (44%) and local news (18%).
- The majority of people stated the best way for the health department to share information is through social media (41%) and email or text alerts (33%).
- When asked what the health department could do better to serve the community, comments focused on the need for more community outreach and engagement to generate awareness with one person stating, “I had no clue everything they did”.

# About 2 out of 3



**Survey Respondents stated that they were either “Very Familiar” or “Somewhat Familiar” with the De Pere Health Department**



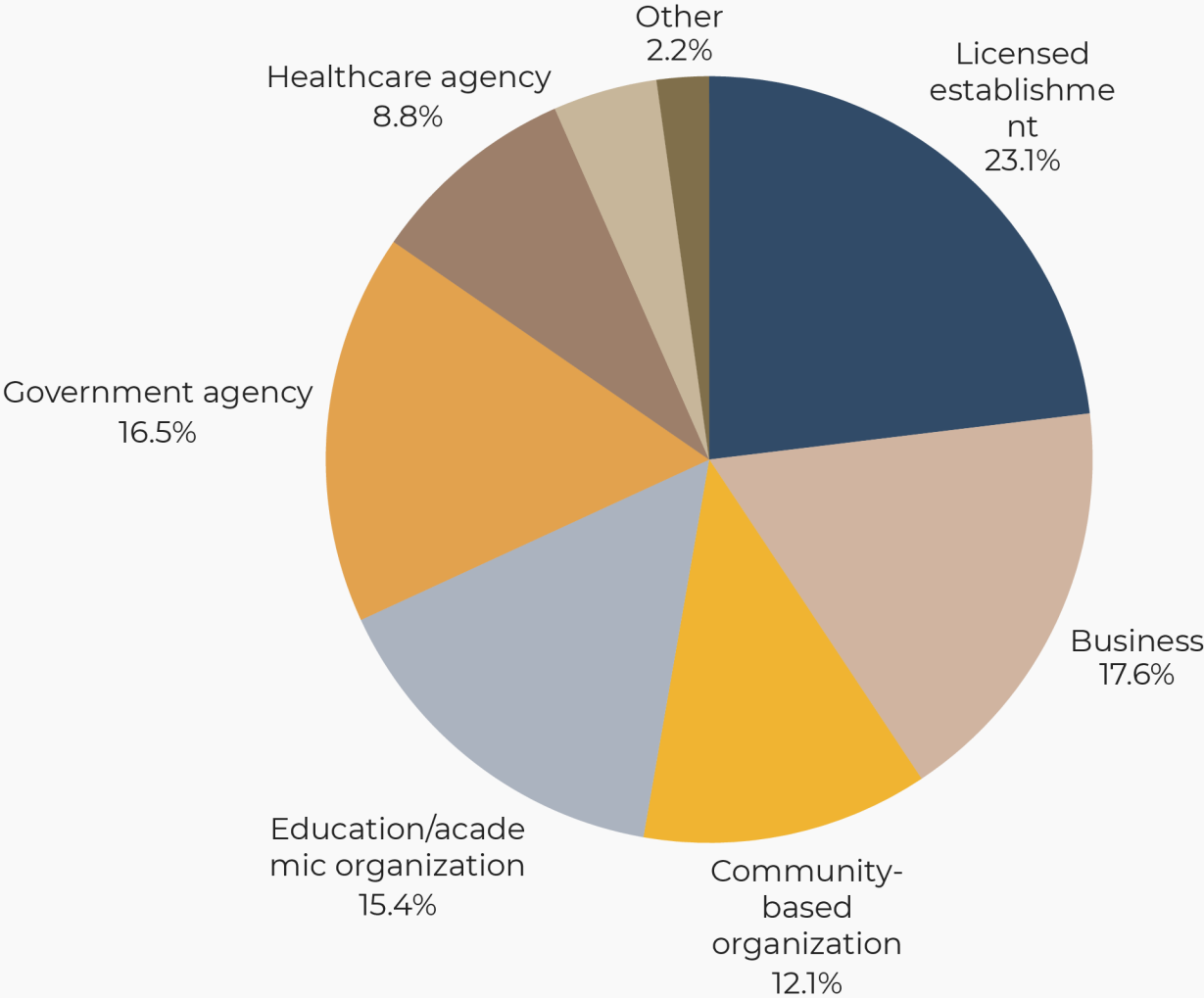
# Partner Engagement Survey

A 13-question survey was developed by the consultant with input from health department staff and the board of health and distributed broadly throughout the community via a variety of methods, including email, social media, flyers, and outreach events.

The survey invited partners to share their experiences, including the nature of their partnership, the impact of the health department’s efforts, satisfaction with collaboration, and ideas for strengthening future work.

A total of 107 partners from a wide variety of organizations responded to the survey either online or via paper survey.

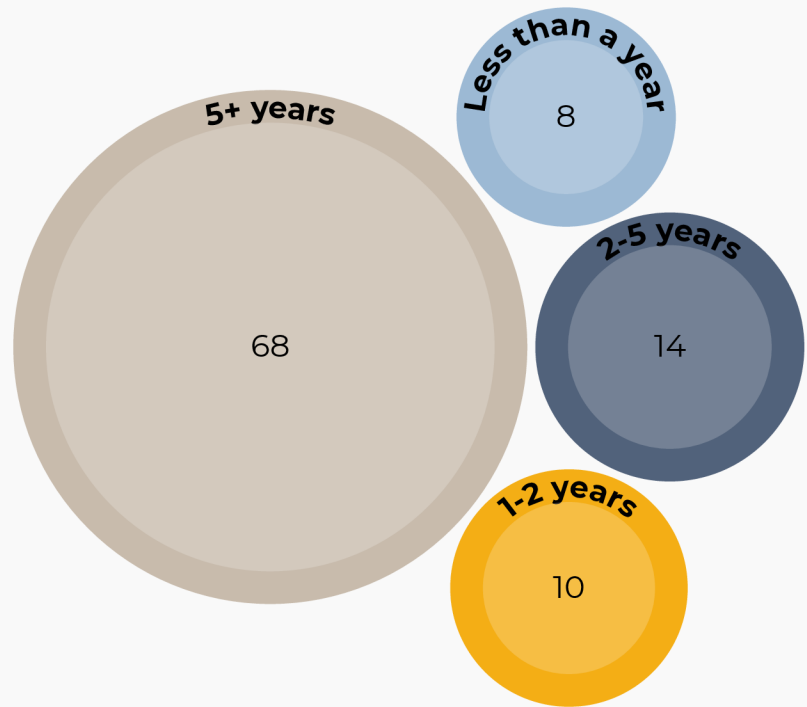
## Types of Organizations Represented Among Survey Respondents



**Key findings included:**

- Most organizations reported being a partner of De Pere Health Department for more than 5 years (68%)
- Most partners (69%) were “very satisfied” with their partnership with the health department.
- Partners reported a variety of reasons for partnering with the health department including:
  - Believe in the mission
  - To collaborate on initiatives that protect and promote community health through shared resources, expertise, and coordinated action
  - To keep in compliance with the laws (inspections)

**Years each Organization has been Partners with De Pere Health Department (Percentage)**



- Partners shared that the health department impacted the community through public health education and prevention, community health awareness, community safety and emergency preparedness, and community partnerships and collaborations, with one respondent stating, “I believe the health department has a big impact on those with the least amount of access to healthcare”.
- When asked how organizations could support the work of the health department as a partner, themes focused on partnership collaboration for events, information and knowledge sharing, ongoing support, and community engagement and outreach. Partners expressed a strong desire to continue and enhance partnerships with one respondent stating they are willing to “help in any way we can”.
- Survey respondents suggested other community partners that the health department should engage with including: historically underrepresented racial/ethnic groups, people living in poverty, youth and young adults, LGBTQIA+, and older adults.
- Most comments praised the health department for their work and expressed gratitude for their partnership, with one respondent stating, “They are an exemplar among local health departments”.

# Employee Engagement

A 20-question employee engagement survey was developed by the consultant with input from health department staff and the board of health. The survey was distributed via email to employees with an invitation to meet virtually for 1-on-1 interviews with an external consultant to discuss and expand on their survey responses.

The purpose of the survey was to gather staff feedback on workplace satisfaction, clarity of roles, organizational culture, leadership support, and alignment with the department's mission. The survey also sought input on opportunities for growth, wellbeing, internal processes, and partnerships to inform strategic planning and organizational improvement.

A total of 6 people participated, including 4 employees, 1 intern, and the health officer.



## Key findings included:

- Across all responses, employees reported being “satisfied” or “very satisfied” with their work at the De Pere Health Department.
- Multiple staff noted that their answers would have been very different two years ago, with recent leadership changes creating a much more positive culture.
- The prevailing sentiment is that people enjoy their colleagues, respect their supervisor, and feel valued as both professionals and individuals.
- Strengths identified included:
  - Exceptional culture of respect, teamwork, and support
  - Leadership that is approachable, communicative, and empowering
  - Mission-driven staff deeply committed to community health
  - Strong benefits, pay, and flexibility
  - Opportunities for growth through mentorship, trainings, and conferences
- Challenges identified included:
  - Technology and data systems need modernization
  - Limited staffing/resources for expanding programs and responsibilities
  - Need for formalized continuous quality improvement (QI) processes
  - Opportunities to expand partnerships (businesses, diverse populations, youth/families)
  - Concern about future leadership transitions and maintaining culture

## Recommendations from the Consultant:

- **PROTECT AND SUSTAIN POSITIVE CULTURE**

Formalize practices (weekly check-ins, recognition, open communication) that staff value.

- **REGULARLY REVIEW AND REFRESH MISSION STATEMENT**

Ensure staff alignment.

- **EXPAND PROFESSIONAL DEVELOPMENT**

Offer structured plans, funding, and career ladders.

- **MODERNIZE TECHNOLOGY AND PROCESSES**

Invest in data systems, streamline duplicate entry, adopt formal CQI.

- **GROW PARTNERSHIPS**

Strengthen business and culturally diverse community connections, consider advisory councils.

- **PLAN FOR FUTURE RESOURCES**

Budget for role expansion (strategist, aide), vehicles, and professional development funds.

- **SUSTAIN LEADERSHIP PRACTICES**

Build policies or frameworks that ensure strong communication and support remain in place even through leadership transitions.

# Strategic Issues

After reviewing the results of the environmental scan, staff engaged in a SWOC analysis to identify strengths, weaknesses, opportunities, and challenges. Key themes from the SWOC analysis included:



## Strengths

Internal organizational strengths that we want to maintain and leverage:

- Competent, hard-working, dedicated, motivated, and loyal staff
- Compassionate staff who care about their work and the community they serve
- Staff listen to the community and are aware of their needs
- Cohesive team that works well together and is adaptable
- Positive work culture and staff who care about each other
- Good stewards of financial resources
- Strong support from administration and board of health

## Weaknesses

Internal organizational weaknesses that we want to minimize:

- Limited number of staff and resources
- Computer programs are not integrated
- Need for better data management
- Need for better knowledge management system
- Need to document procedures for sustainability
- Need to tell the public health story louder and broader
- Need to better leverage social media and messaging to community
- Team is not very diverse
- Often work in reaction vs proactively
- Limited relationships with organizations that serve underrepresented groups





## Opportunities

External opportunities we want to invest in:

- Strong, collaborative, long-term relationships with partners
- Opportunities to expand and enhance partnerships
- Trusted by the community
- Share positive things happening with the community and other public health partners more (e.g. present at conferences, work with media to promote)
- Expand business partnerships
- Be more present in the community
- Share the public health story more broadly in new ways
- Better leverage AI and technology
- Engage more with schools, daycare, and youth groups to better reach youth
- Inform the uninformed/misinformed
- Have students and interns support projects
- Better utilize social media
- More outreach to those who work during the day when programs are typically offered

## Challenges

External challenges we want to identify and address:

- Lack of community awareness about services provided by the health department
- Decreased community trust in science, public health, and the government
- Lots of misinformation on social media
- Need city approval for enhanced social media presence
- Federal and state funding cuts
- Uncertainty of current and future public health funding
- Limited funding for proactive, preventative programs (most is reactive)
- Facing ongoing pressure to merge with other communities which could limit services provided to De Pere residents
- Limited data at the local level to inform decisions
- Concerns about being able to keep up with growing needs of growing population with the limited staff (demand may exceed supply)
- Limited diversity within the city



A facilitated discussion conducted after the SWOC Analysis led to the identification of the following strategic issues:



### Community Awareness

Enhance community awareness and understanding of the “The De Pere Difference” public health services



### Data & Technology

Enhance data and technology capacity to drive evidence-based public health action and decision making



### Youth Engagement

Empower and engage youth as active partners in improving community health and well-being

## Goals, Objectives & Activities:

Health department staff met virtually with the consultant several times between October and December 2025 to develop goals, objectives, and specific activities (referred to as strategies in this plan) for each of the strategic issues. This was an iterative process that focused on prioritizing what areas are most important to focus on based on the size, urgency, and severity of the issues and what is the most feasible way to support change given the existing resources available.

Several strategies were identified for each objective. Cross-cutting strategies that support the overall goal were also identified. For each strategy, the person or people responsible for leading the activity is listed. Additionally, the timeline for completion is also included.

This plan is meant to be flexible and may adapt over time as community needs change and new opportunities or resources become available.

# Strategic Issue: Community Awareness

## Cross-Cutting Strategy

- Explore opportunities to establish a sustainable internship position to support community outreach and awareness efforts

## Goal

Enhance community awareness and understanding of “The De Pere Difference” public health services

## Alignment with PHAB Accreditation Domains

- Domain 3: Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.
- Domain 4: Strengthen, support, and mobilize communities and partnerships to improve health
- Domain 6: Utilize legal and regulatory actions designed to improve and protect the public’s health
- Domain 7: Contribute to an effective system that enables equitable access to the individual services and care needed to be healthy

## Objectives

- Objective 1.1 Strengthen engagement with partners to help promote outreach events
- Objective 1.2 Increase social media engagement
- Objective 1.3 Increase communication channels for public health messaging in the community
- Objective 1.4 Enhance presence in - and support of – licensed establishments in the community.

# Strategic Issue: Community Awareness

<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
1.1 Strengthen engagement with partners to help promote outreach events	1.1.1 Identify and ask key partners to include information about outreach events in their newsletters, websites, and social media platforms	Program staff with support from administrative assistant	Year 1 and ongoing
	1.1.2 Develop a simple digital toolkit for outreach events (e.g., one-page flier, two social media posts, short blurb) that partners can easily share	Program staff with support from administrative assistant	Year 1 and ongoing
	1.1.3 Tag and ask partners to reshare posts to extend reach of social media	Program staff with support from administrative assistant	Year 1 and ongoing
1.2 Increase social media engagement	1.2.1 Consistently use “De Pere Difference” as a recurring theme and/or hashtag in all social media posts (#DePereDifference)	Administrative assistant with support from program staff	Year 1 and ongoing
	1.2.2 Develop a social media content calendar that includes at least 3 posts per week that are tied to seasons, awareness months, and local events	Administrative assistant with support from program staff	Year 1 and ongoing
	1.2.3 Highlight stories of impact and community connection that demonstrate the “De Pere Difference” at least quarterly	City Communications Manager	Year 1 and ongoing

# Strategic Issue: Community Awareness

<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
1.3 Increase communication channels for public health messaging in the community	1.3.1 Strengthen collaboration with the City of De Pere to include public health	Health Officer with support from program staff	Year 1 and ongoing
	1.3.2 Develop a policy to evaluate current and future outreach materials to ensure	Deputy Health Officer	Year 1
	1.3.3 Engage with community members at local community events and gatherings	Program staff	Ongoing
	1.3.4 Encourage and support staff to present at local, state, and national	Health Officer	Year 1 and ongoing
1.4 Enhance presence in – and support of – licensed establishments in the community	1.4.1 Explore the feasibility of creating a Food Safety Advisory Committee	Environmental Health Sanitarian	Year 3
	1.4.2 Distribute educational materials and helpful templates to licensed	Environmental Health Sanitarian	Year 1 and ongoing
	1.4.3 Increase awareness about unique support offered to licensed	Environmental Health Sanitarian	Year 2 and ongoing

# Strategic Issue: Data & Technology

## Goal

Enhance data and technology capacity to drive evidence-based public health action and decision-making

## Objectives

- **Objective 2.1** Strengthen internal data management systems and staff capacity
- **Objective 2.2** Improve access to accurate, timely, and meaningful local public health data
- **Objective 2.3** Increase data-driven decision-making across all public health programs

## Cross-Cutting Strategy

- Explore opportunities to enhance the local data dashboard used within the health department
- Implement Results Based Accountability (RBA) to guide planning, measuring outcomes, and improving programs
- Participate in the PHAB Pathways Recognition Program to support performance improvement efforts and strengthen infrastructure

## Alignment with PHAB Accreditation Domains

- **Domain 1:** Assess and monitor population health status, factors that influence health, and community needs and assets
- **Domain 9:** Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
- **Domain 10:** Build and maintain a strong organizational infrastructure for public health

# Strategic Issue: Data & Technology

<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
2.1 Strengthen internal data management systems and staff capacity	2.1.1 Establish standardized protocols for data collection, analysis, and data sharing	Health Officer and Deputy Health Officer	Year 1
	2.1.2 Support staff training on data-related topics (e.g., data literacy, visualization tools, ethical AI use, GIS, and evidence-based practices)	Health Officer	Year 1 and ongoing
	2.1.3 Support staff training on data-related topics, such as data literacy, visualization tools, ethical AI use, GIS, and evidence-based practices	Health Officer	Year 1 and ongoing
2.2 Improve access to accurate, timely, and meaningful local public health data	2.2.1 Create and update annually an inventory of existing local data sources (e.g. state systems, hospitals, schools, EMS, community surveys) <i>(Aligns with strategy 2.1.1)</i>	Health Officer with support from program staff	Year 1 and ongoing
	2.2.2 Establish new data-sharing agreements with city, regional, and state partners to enhance access to public health data	Health Officer with support from program staff	Year 4

# Strategic Issue: Data & Technology

<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
2.3 Increase data-driven decision-making across all public health programs	2.3.1 Develop a consistent process to regularly use data to identify and communicate community health trends and disparities (e.g., include a brief “data snapshot” in regular staff meetings)	Health Officer and Deputy Health Officer	Year 3
	2.3.2 Connect data to action by reviewing data with intentional questions that help us understand what the data is telling us about our community and what changes or actions should follow	Health Officer and Deputy Health Officer	Year 3
	2.3.3 Regularly use data to guide resource allocation, outreach strategies, and program adjustments	Health Officer and Deputy Health Officer	Year 3
	2.3.4 Document how data informs program decisions to support transparency and continuous improvement	Health Officer and Deputy Health Officer	Year 4

# Strategic Issue: Youth Engagement

## Cross-Cutting Strategy

- Explore sustainable approaches to enhance public health awareness among all students in De Pere

## Goal

Empower and engage youth as active partners in improving community health and well-being

## Alignment with PHAB Accreditation Domains

- **Domain 3:** Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.
- **Domain 4:** Strengthen, support, and mobilize communities and partnerships to improve health
- **Domain 7:** Contribute to an effective system that enables equitable access to the individual services and care needed to be healthy

## Objectives

- **Objective 3.1** Increase youth participation in public health programs and initiatives
- **Objective 3.2** Engage youth in developing and leading public health programs and initiatives
- **Objective 3.3** Create ongoing channels for youth input and collaboration

# Strategic Issue: Data & Technology

<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
3.1 Increase youth participation in public health programs and initiatives	3.1.1 Develop a plan to promote youth opportunities using youth-friendly outreach strategies, including short videos, graphics, and plain language on platforms youth already use (e.g., Instagram, TikTok, Snapchat, school newsletters)	Program staff	Year 5
	3.1.2 Identify opportunities to meet youth where they already are by partnering with local schools, after-school programs, youth sports, faith groups, and other youth-serving organizations to integrate public health activities into existing spaces	Program staff	Year 5
	3.1.3 Identify opportunities to enhance internships and volunteer opportunities for youth that incentivize participation (e.g., service-learning hours, clinical hours, work-study, certificates, stipends, gift cards, or resume-building opportunities)	Program staff	Year 5
3.2 Engage youth in developing and leading public health programs and initiatives	3.2.1 Partner with academic institutions and youth-serving organizations to identify opportunities to host youth-led public health initiatives	Program staff	Year 5
	3.2.2 Explore opportunities to pilot mini-grants or innovation challenges to support youth-led public health projects	Program staff	Year 5
	3.2.3 Establish a process for recognizing youth contributions (i.e. community awards, news features)	Program staff	Year 5

# Strategic Issue: Data & Technology

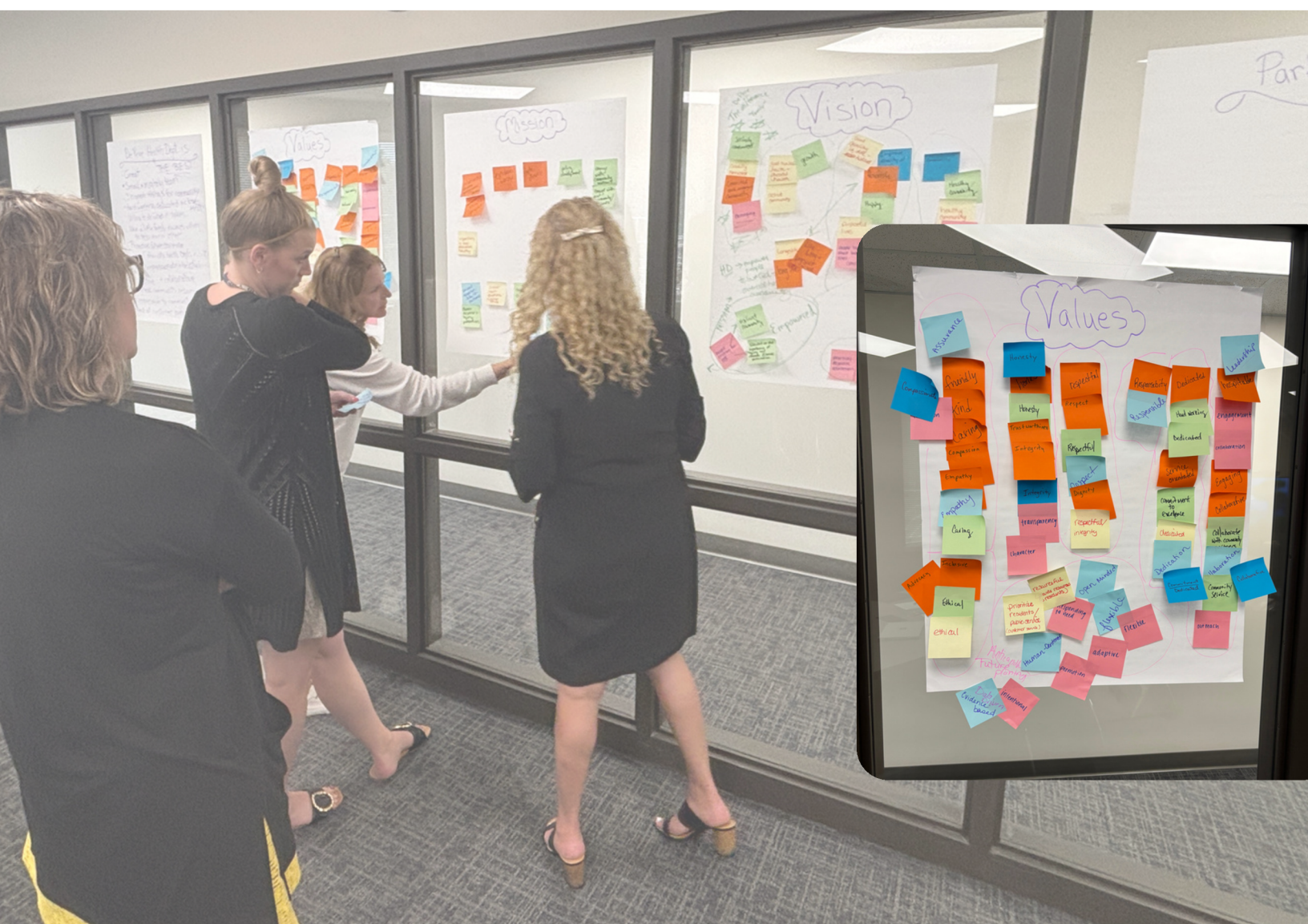
<i>Objective</i>	<i>Strategy</i>	<i>Person(s) Responsible</i>	<i>Timeline</i>
3.3 Create ongoing channels for youth input and collaboration	3.3.1 Explore opportunities to engage with the new De Pere Youth Commission (i.e. invite a youth representative to attend Board of Health meetings)	Health Officer with support from Board of Health	Year 2
	3.3.2 Explore opportunities to pilot a program that mentors and trains youth as peer leaders who engage in peer-to-peer public health education and outreach	Program staff	Year 5

# Implementation and Evaluation

This strategic plan will be implemented over the next five years through shared responsibility across staff and leadership, with a focus on actions that respond to community priorities.

Progress will be reviewed regularly using data and community feedback to understand what is working and where adjustments are needed.

Ongoing evaluation will ensure the plan remains flexible, relevant, and responsive to changing community needs, guiding continuous learning and improvement.



# Acknowledgements

This strategic plan provides a framework to guide and enhance the work of the De Pere Health Department. By focusing on community awareness, data and technology, and youth engagement, the De Pere Health Department can create a foundation for success and better serve the community's health needs.



The strategic planning process was made possible by the generous support of the public health infrastructure grant for local health departments.

The De Pere Health Department would like to express its appreciation for the contributions made by those who participated in the strategic planning process, including:

- De Pere Health Department staff who completed the Employee Engagement Survey, participated in 1-on-1 interviews conducted by an external consultant, and actively engaged in planning meetings throughout the strategic planning process
- Partner Organizations who completed the Partner Engagement Survey
- Community Members who completed the Community Awareness Survey
- City Manager, Mayor, and members of the Board of Health for their guidance, leadership, and ongoing support



**Special thanks to Ujima United, LLC consultants for facilitating the strategic planning process and developing this report.**



**Public Health**  
Prevent. Promote. Protect.

**De Pere Health Department**



City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Program Performance Dashboard End of Year 2025.  
**RECOMMENDED ACTION:** Information Only

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ATTACHMENTS:  
Dashboard memo, dashboard 2025

# CITY OF DE PERE

## MEMO

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To: Members of the Board of Health  
From: Chrystal Woller BSN, RN, MBA  
Meeting Date: 2/9/2026

Re: EOY 2025 Program PM Dashboard

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The purpose of a Performance Management and Quality Improvement System is to provide a framework to guide program performance management (PM) and quality improvement (QI) activities at the City of De Pere Health Department. Effective performance management allows for monitoring of important trends in data related to the Department's systems, services, and processes, allowing for outcomes and improvements to be made and tracked over time related to efficiency, effectiveness, and resource allocation.

The environmental sanitarian's capacity to meet the ever-growing demand for services is important to continue to monitor. The department continues to collaborate with the Code Enforcer in Developmental Services to cross train to the Weights and Measures program as well as assist with nuisance complaint enforcement. In addition, DPHD now has an agreement with Brown County Public Health to conduct inspection and licensing at the Brown County Fairgrounds, allowing time/inspections to equalize.

We also recognize the need to look for additional partners and a refreshed opportunity to promote all immunizations, to include our influenza vaccine numbers. We look forward to continuing to promote vaccination efforts with partners and will focus the program performance on coverage rates, rather than clinic numbers. Please note, we will continue to provide outreach, education and direct vaccination services with or without an appointment each month.

Dashboard data also indicated that we did not quite reach our goal for unique individuals trained in Narcan administration. The good news is that Fire/Rescue conducted this outreach/education as well, this year, so we are confident that individuals are being trained just not all by the health department. We continue to partner with Fire/Rescue to promote the "Leave Behind" Program for those who may benefit. Finally, the health department also offered this training to local businesses through the chamber this year.

We look forward to continuing to monitor and revise this dashboard allowing us to improve programs and services for our community.

## Program Performance Measures

	2025 Goal	Q1	Q2	Q3	Q4	YTD
<b>Administrative</b>						
Percent of staff who completed CPR training.	60%	0%	60%	0%	0%	60%
Percent of staff who completed professional development for at least one identified public health competency	100%	0%	40%	60%	0%	100%
Percent of policies and procedures reviewed/revised	100%	100%	n/a	n/a	n/a	100%
Percent of staff who completed the Performance Management and Quality Improvement annual training.	100%	0%	0%	20%	80%	100%
<b>Emergency Preparedness and Response</b>						
Percent of staff compliant with required Incident Command System training based on their positions.	100%	100%	100%	100%	100%	100%
Percent of staff whose profiles and emergency call ranking are reviewed for accuracy and updated in the PCA Portal.	100%	0%	100%	0%	100%	200%
Percent of Wisconsin Emergency Assistance Volunteer Registry (WEAVR) members, within our Jurisdiction, responding to an exercise/drill within 48 hours.	50%	0%	41%	0%	0%	41%

**Performance Measure - Foundational Public Health Service Areas (hyperlinked)**

	2025 Goal	Q1	Q2	Q3	Q4	YTD
<b>Communicable Disease Control</b>						
Total number of children and adults who received a flu vaccine administered by DPHD.	206	1	0	2	22	25
Percent of City of De Pere 2 year-olds who are compliant with the 4:3:3:1:4:3:1 primary vaccine series (to include late up to date. This is a point in time check each QTR).	85%	77%	83%	80%	80%	80%
Percent of animal bite incident reports addressed within 1 business day of receipt.	100%	100%	100%	100%	100%	100%
Average Communicable Disease response time (from staging to nursing assignment) within 24-72 hours in accordance with state statute disease response parameters.	72 hrs	2	5	7	6	5
<b>Chronic Disease &amp; Injury Prevention</b>						
Total number of unique individuals trained in Narcan administration.	100	0	24	23	1	48
Percent of families who state YES to improved knowledge of car seat installation technique and resources	90%	100%	100%	100%	100%	100%
Percent of eligible referrals that completed a home visit through the Steps to Safety Program (appropriate and not out of jurisdiction).	30%	N/A	N/A	N/A	N/A	N/A
Percent of participants who feel comfortable implementing at least one fall reduction measure after starting <b>Bingocize</b> . (checked answers and/or true of those who answered)	90%	100%	N/A	N/A	100%	100%
Percent of participants who rate their satisfaction with the quality of the <b>Bingocize</b> program as satisfied or very satisfied (checked of those who answered).	75%	86%	N/A	N/A	100%	86%

Environmental Public Health						
Total number of short-term radon kits distributed for home testing.	90	53	5	4	7	69
Percent of children who received follow up for blood lead levels $\geq 3.5$ mcg/dL.	100%	n/a	100%	100%	100%	100%
Percent of total DATCP/DSPS <b>facilities</b> inspected (routine inspection& pre-inspections).	100%	19%	39%	25%	17%	100%
Total number of DATCP/DSPS <b>inspections</b> conducted (this data is based on a calendar year).	256	68	112	78	52	310
Staff capacity to meet <b>inspection</b> standards by FTE status (.8 FTE=224-256 inspections)	100%	27%	44%	30%	20%	121%
Percent of complaints acknowledged within 5 business days of substantiated human health hazard complaint.	100%	100%	100%	100%	100%	100%



This includes pre-inspections as new establishments come in and change of owner. The preinspection counts as a routine inspection; therefore, denominator shifts. Schools are required to have 2 routine inspections per year



At least one inspection per establishment. This will be higher due to including pre-inspections, school second inspections, complaints (other).

<b>Maternal, Child &amp; Family Health</b>						
Total number of birth packets that are mailed to first time parents with resources and services.	<b>225</b>	58	69	79	37	243
Total number of parents that have been informed of the ASQ developmental screenings and provided free access to the assessment tool.	<b>150</b>	49	120	144	93	406
<b>Outreach and Access to &amp; Linkage with Clinical Care</b>						
Total number of health related referrals made to community agencies.	<b>30</b>	15	12	17	7	51
Total number community engagement/outreach events provided for members of the De Pere community connecting to and/or providing essential/valued services.	<b>120</b>	44	30	35	31	140

**Fee Revenue Collected by Program**

	2025 Goal	Q1	Q2	Q3	Q4	Total Revenue Collected	Percent of Goal
<b>Public Health / Environmental Health</b>							
General Public Health	\$420	\$120	\$260	\$40	\$335	\$755	180%
Food & Beverage Licenses	\$106,000	\$8,748	\$94,595	\$13,678	\$4,199	\$121,220	114%
Grants	\$112,790	\$15,112	\$17,590	\$46,096	\$31,782	\$110,580	98%
Weights & Measures	\$21,005	\$0	\$21,026	\$326	\$0	\$21,352	102%

**2025 Organizational Goals & Objectives Progress Tracker**

	Q1	Q2	Q3	Q4
<b>Priority Area 1: Workforce Development</b>				
Goal 1, Objective 1: During 2025, each staff member will have at least a quarterly one-on-one to discuss challenges, successes, and professional development goals with their supervisor.	100%	100%	100%	100%
Goal 2, Objective 1: By December 31, 2025, review and revise the 2024 Workforce Development Plan.	0%	50%	75%	85%
<b>Priority Area 2: Strategic Plan</b>				
Goal 1, Objective 1: By December 31, 2025, collaboratively plan and approve a new strategic plan.	0%	25%	50%	95%

Q1= Jan-March
Q2= April-June
Q3= July-September
Q4= October-December

## Community Engagement

Subject	Location	Date/Time
Car Seat Clinic (Rescheduled from 12/23)	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Tue 12/16/2025 9:30 AM
Car Seat Clinic 2nd Thursday PM	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Thu 12/11/2025 3:00 PM
Ornament Day @ Syble Hopp	Syble Hopp	Thu 12/4/2025 8:00 AM
Car Seat Clinic 4th Tuesday AM	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Tue 11/25/2025 9:30 AM
Senior Ball: Swinging Through the Decades	Saint Norbert College (100 Grant St, De Pere, WI 54115)	Thu 11/20/2025 12:30 PM
VFC Clinic Walk-In Wednesday (3rd)	De Pere Health Department (335 S Broadway, De Pere, WI 54115)	Wed 11/19/2025 2:30 PM
Car Seat Clinic (Reschedule)	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Tue 11/11/2025 9:30 AM
STI Workgroup at Packer Game	Stadium Distirct	Mon 11/10/2025 3:30 PM
Nutrition Bingocize Fall 2025 Session #19/20 (LAST)	De Pere Community Center (600 Grant St, De Pere, WI 54115)	Mon 11/10/2025 9:30 AM
HOLD - Let's Talk Turkey	Festival	Sat 11/8/2025 10:00 AM
Bingocize Session #18	De Pere Community Center	Wed 11/5/2025 9:30 AM
Bingocize Session #17	De Pere Community Center	Mon 11/3/2025 9:30 AM
NEW Pride- STI Workgroup and BCCFSP	Oneida Casino	Sun 11/2/2025 11:30 AM
Professional Development: Building Belonging in Our Organizations and Communities	St Norbert College (100 Grant St, De Pere, WI 54115)	Thu 10/30/2025 1:00 PM
VFC Flu and Back to School Clinic (APPOINTMENT)	De Pere Health Department; Conference Health Department	Wed 10/29/2025 2:00 PM
Bingocize Session #16	De Pere Community Center	Wed 10/29/2025 9:30 AM
Car Seat Clinic 4th Tuesday AM	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Tue 10/28/2025 9:30 AM
Bingocize Session #15	De Pere Community Center	Mon 10/27/2025 9:30 AM
Car Seat Clinic 2nd Thursday PM	De Pere Fire Rescue (400 Lewis St, De Pere, WI 54115)	Thu 10/23/2025 3:00 PM
VFC Flu and Back to School Clinic (APPOINTMENT)	De Pere Health Department; Conference Health Department	Wed 10/22/2025 2:00 PM
fox 11:lead <a href="https://fox11online.com/news/local/health-officials-issue-reminder-to-test-children-for-lead-poisoning-lead-paint-lead-pipes">https://fox11online.com/news/local/health-officials-issue-reminder-to-test-children-for-lead-poisoning-lead-paint-lead-pipes</a>	De Pere Health Department	Tue 10/21/2025 4:30 PM
Bingocize Session #14	De Pere Community Center	Mon 10/20/2025 9:30 AM
Bingocize Session #13	De Pere Community Center	Wed 10/15/2025 9:30 AM
Bingocize Session #12	De Pere Community Center	Mon 10/13/2025 9:30 AM
VFC Flu and Back to School Clinic (APPOINTMENT)	Conference Health Department	Wed 10/8/2025 2:00 PM
Bingocize Session #11	De Pere Community Center	Wed 10/8/2025 9:30 AM
Bingocize Session #10	De Pere Community Center	Mon 10/6/2025 9:30 AM
GrapeVine at Altmeyer School	Susie C Altmeyer Elementary (3001 Ryan Rd, De Pere, WI 54115)	Fri 10/3/2025 8:30 AM
Flu Clinic w/ Germ Workshop 4pm-6pm @ Mulva Cultural Center	Mulva Cultural Center (221 S Broadway, De Pere, WI 54115)	Thu 10/2/2025 3:00 PM
VFC Flu and Back to School Clinic (APPOINTMENT)	De Pere Health Department; Conference Health Department	Wed 10/1/2025 2:00 PM
Bingocize Session #9	De Pere Community Center	Wed 10/1/2025 9:30 AM



**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Communicable Disease Report End of Year 2025.  
**RECOMMENDED ACTION:** Information only

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**ATTACHMENTS:**  
Health Dept Communicable Disease Report, Year End 2025 Disease Incident Count

# CITY OF DE PERE

## MEMO

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To: Members of the Board of Health  
From: Danielle Jauquet BSN, RN, Public Health Nurse  
Date: 2/9/2026

Re: Communicable Disease Report End of Year 2025

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Communicable disease numbers for 2025 quarter 4 were less than typical years for this timeframe but more than the previous quarter (expected during respiratory illness season). Chlamydia numbers remain high/were consistent with previous quarters. There were not any reported gonorrhea cases in De Pere this quarter, which is a great improvement. There also were not any pertussis/whooping cough cases this quarter compared to 13 cases in Q4 of last year. Lyme disease cases were down this quarter (expected for this time of year).

[State data](#) indicate moderate respiratory virus activity currently with local outbreaks reported.

CD activities for Q4:

- Flu Clinics (low uptake this year)
  - Fire Open House (minimal immunizations given but LOTS of education/DPHD exposure at this event)
  - Mulva Cultural Center
  - DPHD weekly in October
  - St. Anne's/De Pere Christian Outreach Food Pantry (Mobile Unit)
- Danielle attended NEW Pride at Oneida Casino Hotel and the 11/10 Monday Night Packer Game as part of the Brown County STI Workgroup to distribute prevention items.
- Local bars and gas stations continue to participate in condom distribution and testing awareness campaigns.
- Danielle & Sara participated in the Bureau of Communicable Disease (BCD) Northeastern Regional Seminar, held in De Pere.



**Disease Incidents by Episode Date**  
**Jurisdiction: De Pere**

		2025												
Disease Group	Disease	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Adult Lead	<i>Group Total:</i>	0	1	0	0	0	0	0	0	0	0	0	0	1
Babesiosis	<i>Group Total:</i>	0	0	0	0	1	0	0	0	0	0	0	0	1
Campylobacteriosis	<i>Group Total:</i>	2	0	1	3	0	1	0	1	0	0	0	0	8
Carbapenemase producing organisms	<i>Group Total:</i>	1	0	1	0	0	0	0	0	0	0	0	0	2
Carbon Monoxide Poisoning	<i>Group Total:</i>	0	0	1	0	0	0	0	0	1	0	0	1	3
Chlamydia Trachomatis Infection	<i>Group Total:</i>	2	3	4	6	7	5	3	4	7	6	2	6	55
Coronavirus	<i>Group Total:</i>	8	8	4	1	1	1	0	4	9	4	4	8	52
	*CORONAVIRUS, NOVEL 2019 (COVID-19)	7	7	4	0	0	1	0	3	6	4	4	8	44
	CORONAVIRUS, NOVEL 2019 (COVID-19) - ASSOCIATED HOSPITALIZATION	1	1	0	1	1	0	0	1	3	0	0	0	8
Cryptosporidiosis	<i>Group Total:</i>	0	0	0	0	0	0	0	1	0	0	1	0	2
Ehrlichiosis / Anaplasmosis	<i>Group Total:</i>	0	0	0	0	2	1	1	1	0	1	0	0	6
Gonorrhea	<i>Group Total:</i>	0	0	0	0	1	0	2	1	3	0	0	0	7
Haemophilus Influenzae Invasive Disease	<i>Group Total:</i>	0	0	0	0	0	0	0	0	1	0	0	0	1
Hepatitis C	<i>Group Total:</i>	0	0	0	1	0	0	0	1	0	0	0	0	2
Influenza	<i>Group Total:</i>	52	64	31	4	0	0	1	0	0	1	0	35	188
	*INFLUENZA	46	56	28	4	0	0	1	0	0	1	0	32	168
	INFLUENZA-ASSOCIATED HOSPITALIZATION	6	8	3	0	0	0	0	0	0	0	0	3	20
Invasive Streptococcal Disease (Groups A And B)	<i>Group Total:</i>	0	0	0	0	1	0	0	0	0	0	0	0	1
Kawasaki Disease	<i>Group Total:</i>	0	0	0	1	0	0	0	0	0	0	0	0	1
Legionellosis	<i>Group Total:</i>	0	0	0	0	0	0	1	0	0	0	0	1	2
Lyme Disease	<i>Group Total:</i>	0	2	0	0	3	1	2	3	2	1	0	1	15
	LYME DISEASE, ERYTHEMA MIGRANS (EM) RASH	0	0	0	0	3	1	1	2	1	0	0	0	8

	LYME LABORATORY REPORT	0	2	0	0	0	0	1	1	1	1	0	1	7
Mycobacterial Disease (Nontuberculous)	<i>Group Total:</i>	0	0	1	0	1	0	0	0	0	1	0	0	3
Parapertussis	<i>Group Total:</i>	1	0	0	0	0	0	0	0	0	0	0	0	1
Pathogenic E.coli	<i>Group Total:</i>	1	0	1	3	0	0	0	2	2	1	0	0	10
	E-COLI, ENTEROPATHOGENIC (EPEC)	1	0	0	2	0	0	0	2	1	0	0	0	6
	E-COLI, ENTEROTOXIGENIC (ETEC)	0	0	1	1	0	0	0	0	1	0	0	0	3
	E-COLI, SHIGA TOXIN-PRODUCING (STEC)	0	0	0	0	0	0	0	0	0	1	0	0	1
Pelvic Inflammatory Disease	<i>Group Total:</i>	0	0	0	0	0	0	0	0	1	0	0	0	1
Pertussis (Whooping Cough)	<i>Group Total:</i>	0	0	0	0	0	0	1	0	0	0	0	0	1
RSV	<i>Group Total:</i>	10	12	7	3	2	1	0	0	0	1	2	4	42
	*RESPIRATORY SYNCYTIAL VIRUS (RSV)	5	11	5	1	1	1	0	0	0	1	1	2	28
	RESPIRATORY SYNCYTIAL VIRUS (RSV) - ASSOCIATED HOSPITALIZATION	5	1	2	2	1	0	0	0	0	0	1	2	14
Salmonellosis	<i>Group Total:</i>	0	0	0	0	0	0	1	0	0	0	0	0	1
Syphilis	<i>Group Total:</i>	0	0	2	0	0	0	0	0	0	0	0	0	2
Tuberculosis, Latent Infection (LTBI)	<i>Group Total:</i>	0	1	0	0	2	0	0	0	0	0	1	0	4
Vibriosis	<i>Group Total:</i>	0	0	0	2	0	0	0	0	0	0	0	0	2
Yersiniosis	<i>Group Total:</i>	0	0	0	0	1	0	0	0	0	0	0	0	1
	<i>Period Total:</i>	77	91	53	24	22	10	12	18	26	16	10	56	415

Default Filters: 'State' EQUAL TO 'WI' **Confirmed and Probable 1/1/25-12/31/25**

\*Only Flu/COVID/RSV hospitalizations are REQUIRED to be reported (these numbers do not reflect total cases)



City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Environmental Health Report January 2026.  
**RECOMMENDED ACTION:** presentation only

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ATTACHMENTS:  
Environmental Health Report

# CITY OF DE PERE

## MEMO

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To: Members of the Board of Health  
From: Trista Groth CSP, RS, Environmental Health Sanitarian  
Meeting Date: 2/9/2026

Re: Environmental Health Report January 2026

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De Pere's Development Services Department has a Home Improvement Loan program. The program intends to modernize and improve the housing stock in De Pere while maintaining affordability for homeowners and buyers. Additionally, the program includes a focus on homes with a local historic designation, which means these homes are very old and are likely to have lead-based paint. The Sanitarian met with Development Services to determine if lead abatement would be an eligible use of the loan funds. As a result of the conversation, Development Services proposed a change to the Program allowing for lead safe repairs of identified lead-based paint hazards at a low interest rate for these specific projects. Both the Finance Committee and Common Council approved of these changes. This is a significant benefit to De Pere families that don't qualify for State funds but still need or want to remove lead hazards in their home.

The Health Department is an Agent of the Department of Safety & Professional Services (DSPS) for body art, which includes tattooing and body piercing. For the body art program, HealthSpace Notes is the program used for licensing and inspection documentation. In mid-2025, DSPS collaborated with HealthSpace GovTech to transition from HealthSpace Notes to HSCloud, which went "live" in September 2025. HSCloud is the new cloud-based mobile platform. The Cloud version is much different in function than the Notes version and the learning curve has been high. The Sanitarian (and Administrative Assistant) have navigated regular webinars for training; however, much of the training has been independent navigation and self-teaching.

As mentioned in November, updates to Wis. Admin. Code. Ch. ATCP 72 Hotel, Motel, and Tourist Rooming Houses have been finalized in 2025 and became effective on January 25, 2026. These changes impact operational and compliance requirements for all hotel, motel, and tourist rooming house establishments. The Health Department is actively communicating with licensed establishments affected by this change by email and encouraged valued businesses to review the updated code, [ch. ATCP 72](#) and the [Changes to ATCP 72 Fact Sheet](#).

Respectfully submitted,

Trista Groth CSP, RS  
Environmental Health Sanitarian



City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Director's Report January 2026.  
**RECOMMENDED ACTION:** Information only

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ATTACHMENTS:  
None



City of De Pere, Wisconsin

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**Request for Board of Health Action**

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**MEETING DATE:** February 9, 2026  
**DEPARTMENT:** Health  
**FROM:** Chrystal Woller, Health Director/Officer  
**SUBJECT:** Grant Summary 2026.  
**RECOMMENDED ACTION:** Information only

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ATTACHMENTS:  
Memo\_grant status, DPHD Grant status 2026

# CITY OF DE PERE

## MEMO

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To: Board of Health  
From: Chrystal Woller BSN, RN, MBA, Health Director  
Meeting Date: 2/09/2026

Re: Grant status 2026

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Please see attached 2026 grant summary. Please note that the Public Health ARPA and the COVID Immunization Grant ended in 2025. The health department did see an increase in MCH, communicable disease and prevention funding due to the level III status obtained in 2025.

**De Pere Health Department Grants 2026**

<b>Immunization</b>	<b>7/1/2025 - 6/3/2026</b>	<b>\$8,310 decrease of \$629</b>
<b>Maternal Child Health</b>	<b>1/1/2026 – 12/31/2026</b>	<b>\$9,921 increase of \$2,508</b>
<b>Childhood Lead</b>	<b>1/1/2026– 12/31/2026</b>	<b>\$2,161, no change</b>
<b>Communicable Disease</b>	<b>7/1/2025 – 6/30/2026</b>	<b>\$3,580 increase of \$10</b>
<b>Prevention</b>	<b>10/1/2025 – 9/30/2026</b>	<b>\$4,372 increase of \$623</b>
<b>Preparedness</b>	<b>7/1/2025 – 6/30/2026</b>	<b>\$35,106, no change</b>
<b>Public Health Infrastructure</b> <b>approx. \$76,000</b>	<b>12/01/2022 – 11/30/2027</b>	<b>\$105,800 (total), carryover to 2026 is</b>