

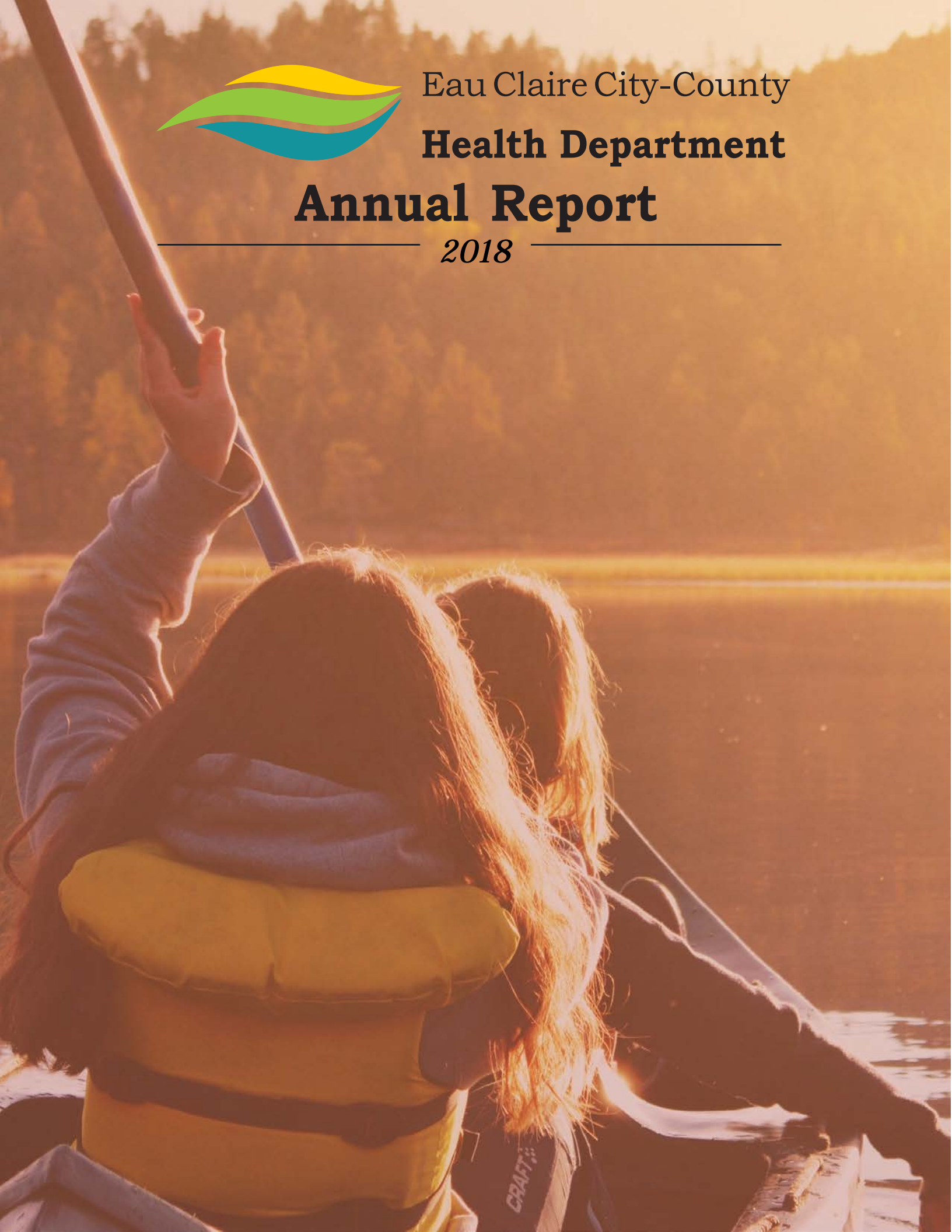


Eau Claire City-County

**Health Department**

# **Annual Report**

*2018*



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# Strategic Plan 2017-2021

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## Mission

Promoting health and safety for all Eau Claire communities

## Guiding Principles

**Prevention** - Promotion of health and prevention of disease, injury and disability is critical in saving lives and money

**Health Equity** - Everyone should have equal opportunity to be healthy

**Collaboration** - People working together provide the best solutions

**Quality** - Efficiency and effectiveness is critical in programs and services

**Data Informed** – Collection and analysis of data guides decisions

**Evidence Based** – Building and utilizing evidence and promising practices in programs and services

**Ethical Practice** – Acting with the highest standards of professional practice

## Goals

### Goal 1: Increase utilization of program and population data

Rationale – Accurate, timely and relevant data has been consistently identified as crucial to planning, decision-making and effective communication. Considerable work has been done to identify areas to improve information management and identify data to support our performance management system, our community partners and coalitions, and future priorities and planning.

### Goal 2: Invest in a strong workforce and infrastructure

Rationale – Our workforce is our greatest asset. We are committed to retaining and recruiting an expert team and providing them with the necessary tools and environment to provide service and program excellence. We will strategically prioritize resources to meet our current and future needs for training, professional development and working conditions.

### Goal 3: Engage the community in collaborative efforts to improve health and safety

Rationale – In order to address challenging community health issues we need to provide a community leadership role in mobilizing community action, particularly in priorities identified by Eau Claire Community Health Assessment. These community partnerships are critical in identifying and addressing complex health issues and building shared priorities. We will continue our existing work, along with exploring new and innovative ways, to engage with the community and policy makers to address health priorities and social determinants of health. We will specifically focus on the need to strategically address health equity concerns in our community.

### Goal 4: Develop long-term fiscal and operational strategies supporting innovation and sustainability

Rationale: In order to reach our vision and to be mission-focused in our work, we need a department that has a strong operational infrastructure. Both short and long-range fiscal and organizational planning are vital to maintaining the necessary levels of programs and services. Innovation and improvement in our internal operations (Department policies and practices) and external operations (how we provide our programs and services) will assure a strategic and strong foundation for the future. We will strive to create an environment where staff at all levels are encouraged to find creative opportunities for the department to grow.

## HEALTH DEPARTMENT DIRECTOR'S REPORT

I am pleased to share the 2018 Eau Claire City-County Health Department Annual Report – 2018 was an exciting and challenging year. This year the health department went through a reorganization designed to assure that the health department is structured to be as efficient and effective as possible now, as well as prepared for the future roles and responsibilities of local public health. Our new structure focuses on more efficient and connected population health services that have a common purpose and shared outcomes. We are focusing on outcomes so that we can make this a healthy place for everyone.

We are excited to share that in 2018 the health department met the National Public Health Accreditation standards – a rigorous peer-review process that resulted in the awarding of national accreditation status. We are one of only 15 departments in Wisconsin that have achieved this status. We could not have done that without the strong partners we have.

We also focused on a broad range of emerging and challenging public health issues in 2018. These included:

- Safe and affordable housing for all community members
- Homelessness
- Drug misuse including opioids, meth, and alcohol
- Safe water

None of these topics are easy to solve and they all take a strong collaborative approach. We anticipate that all will continue to be a focus of the work of the department along with the many other core services we provide related to maternal child health, environmental health sciences, regulation and licensing, reproductive health, community health promotion, and communicable disease.

We will continue to strive to meet the needs of all that live, work, learn, vacation, play, and spend time here. Thank you for your continued support of the work we do to promote health and safety for all communities in Eau Claire County. Let me know how we can continue to improve the work we do at the Health Department.

Please contact me at (715) 839-4721 or [Elizabeth.Giese@co.eau-claire.wi.us](mailto:Elizabeth.Giese@co.eau-claire.wi.us)

Respectfully,



*Elizabeth Giese, RN, MSP*  
**Director/Health Officer ECCCHD**

## BOARD OF HEALTH

As of December 31, 2018

Merey Price, RN, President – Joint City County Appointment  
Elizabeth Spencer, RD, Vice President – City Appointment, Community Representative

Jennifer Eddy, MD – City Appointment  
Martha Nieman – County Board Member  
Donald Bodeau, MD – County Appointment

Blair Johnson, DDS, MS – County Appointment  
Emily Berge – City Council Member  
Kari Stroede – County Appointment

## PERSONNEL

Elizabeth Giese, RN, MSPH, Director/Health Officer  
Marisa Stanley, MPH, Assistant Director  
+Part-Time

### Operations

Tegan Ruland, Operations Division Manager  
Janice Vinopal, MBA, CMA, Budget Specialist  
+Cindy Birtzer, Office Associate  
Alicia Carlson, Office Associate  
+Joan Klimek, Medical Office Associate  
Cathi Tyynismaa, Office Associate

### Policy & Systems

Cortney Draxler, BS, CHES, Division Manager  
+TJ Atkins, Health Benefits Specialist  
Sarah Dillivan-Pospisil, MPH, CPS, SWP, C.H. Educator  
Gina Schemenauer, BS, CHES, Community Health Educator

### Clinical Services

Kris Bohlinger, Program Office Specialist  
Janel Hebert, BSN, RN, Public Health Nurse  
+Melyssa Heintz, MSN, FNP-BC, APNP, Nurse Practitioner  
Abby Hinz, BSN, RN, Public Health Nurse  
Gina Holt, Medical Office Associate  
+Bhenni Johnson, Public Health Aide

### Healthy Beginnings

ElizaBeth Draeger, RDN, CD, CBE, Division Manager  
+Jill Bauer, BSN, RN, Public Health Nurse  
+Claudia Cater, MS, RD, CD, CLE, Public Health Dietician  
+Jenny Eckardt, WIC Clerk  
+Gail Feltz, WIC Clerk  
+Rebecca Gorski, BSN, RN, Public Health Nurse  
+Alice Hampton, Bilingual Interpreter  
Hannah Harter, BSN, RN, Public Health Nurse  
+Heidi Jusula, BA, Breastfeeding Peer Counselor  
Ruth Kilness, RD, CD, CLC, Public Health Dietician  
+Rebecca Knutson, BSN, RN, Public Health Nurse  
+Maria Carmen Moran Castilla, Bilingual Interpreter  
+Jennifer Price, BSN, RN, Public Health Nurse  
Tammy Raeder, BSN, RN, Public Health Nurse  
Lori Reynolds, WIC Clerk  
+Alexis Tuma, MS, RD, CD, CLE, Public Health Dietician  
+Beverly Anna Walden, BSN, RN, Public Health Nurse

### Community Health Promotion

Denise Wirth, BSN, RN, Division Manager  
+Trish Chmelik, Program Assistant  
+Ellen Jacobs, MSN, RN, Public Health Nurse  
+Susan Krahn, MS, RD, CD, CLC, Public Health Dietician  
Peggy O'Halloran, MPH, Public Health Specialist  
Lilliam Piñero, CPS, Community Health Educator  
Brenda Scheurer, MS, Public Health Specialist  
Chelsalyn Smith, BSN, RN, Public Health Nurse  
+Deb Tackmann, BS, MEPPD, Youth Advocacy Advisor

### Communicable Disease

+Paulette Magur, BSN, RN, Division Manager  
+Kay Bogumill, BSN, RNC, Public Health Nurse  
Kelli Engen, BSN, RN, Emergency Preparedness Specialist  
Allison Gosbin, BSN, RN, Public Health Nurse  
+May Her, Bilingual Health Aide  
Jacqueline Krumenauer, BSN, RN, Public Health Nurse  
+Patricia Reis, BSN, RN, Public Health Nurse

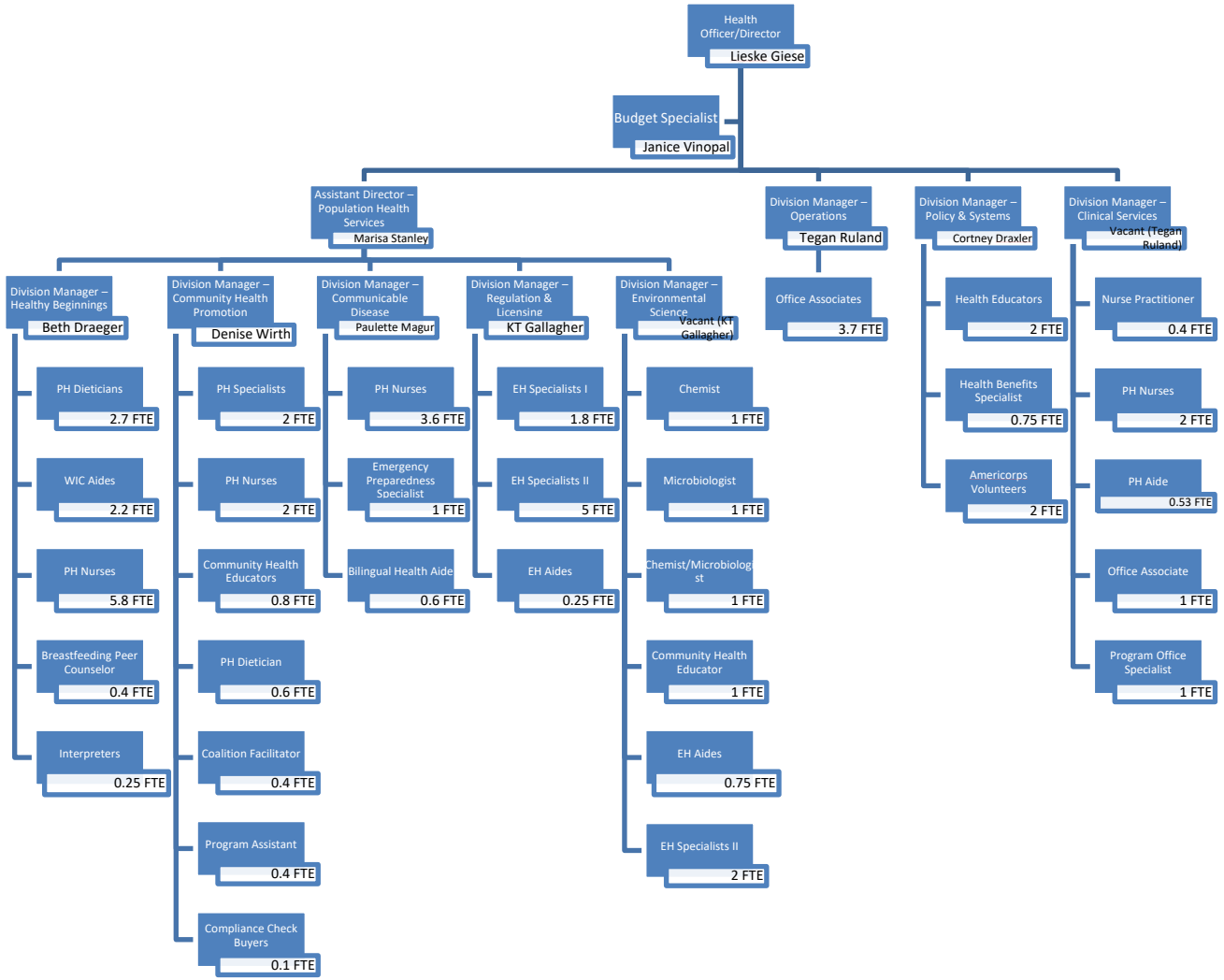
### Regulation & Licensing

Iris Casey, BS, REHS, Environmental Health Specialist  
Tristin Christopher, REHS, Environmental Health Specialist  
+Jennifer Hanson, BS, Environmental Health Specialist  
+Zoe Papalia-Beatty, Environmental Health Aide  
Elizabeth Paulson, BS, REHS, Env. Health Specialist  
Daniel Peterson, BS, RS, Environmental Health Specialist,  
Team Coordinator  
Valerie Reiter, BS, RS, Environmental Health Specialist  
Alyssa Streveler, BS, REHS, Environmental Health  
Specialist  
Tate Zurbuchen, BS, RS, Environmental Health Specialist

### Environmental Sciences

Matt Steinbach, BS, Division Manager  
Susan Arndt, AAS, MLT (ASCP), Chemist/Microbiologist  
Savannah Bergman, BS, Chemist/Microbiologist  
Audrey Boerner, MS, Public Health Specialist  
+Arianna Giorgi, Environmental Health Aide  
Ted Johnson, BS, Chemist/Microbiologist  
Phil Schumacher, BS, REHS, Env. Health Specialist  
+Andrew Wojtowicz, BS, Environmental Health Intern

# ORGANIZATIONAL CHART



## ACADEMIC HEALTH DEPARTMENT WORK

- Partnered with UWEC, Stout, UW Green Bay, Mayo Family Residency Program, Medical College of WI, Prevea, UW Madison, and many other academic and health care organizations on research studies and student experiences related to a broad range of public health topics.

### Dietetic Internship Programs

- Public Health Nutrition staff continued to serve as a public health nutrition site for accredited Dietetic Internship programs. Three masters-prepared students from the University of Wisconsin-Stout Dietetic Internship Program interned at the Department in 2018.
- The dietetic interns work closely with the public health nutritionists and the public health nutrition support staff to provide nutrition services to the community. Faculty from Dietetic Internship Programs do not accompany these interns to the Health Department so the public health nutritionists are responsible for teaching and supervising their work within the department and serving as their public health rotation preceptor.
- The dietetic interns have a 4-5 week internship rotation. They begin the rotation with observational experience of the WIC program with a public health nutritionist. This is designed to provide an opportunity to increase their understanding of the WIC program and the role public health nutritionists have within the WIC program. In the second week of their rotation, the dietetic interns begin co-counseling with the public health nutritionist and then advance to counseling independently. Additionally, during the internship rotation, dietetic interns work closely with the public health nutritionists engaging in planning, developing and delivering nutrition education in various community settings.
- Dietetic interns also gain observational experience with public health nurses and environmental health staff. Interns work with the media as well as attend meetings relevant to public health nutrition. Partnership with Dietetic Internship programs has allowed the public health nutritionists to share their nutrition expertise while giving the Health Department the opportunity to work on additional projects with student involvement.
- A Health Department registered dietitian contributes to the University of Wisconsin-Stout dietetics program by offering presentations to undergraduate courses. In 2018, one presentation was given in the Community Nutrition and two nutrition presentations were given to the University of Wisconsin Eau Claire Doctor of Nursing Practice program. Additionally, a registered dietitian sits on the University's Nutritional Sciences graduate program advisory committee, dietetic internship program advisory committee and serves as a field experience supervisor.
- In 2018, a Health Department registered dietitian mentored a Wisconsin Area Health Education Center intern while working on public health nutrition and food security initiatives. This included the creation of a farmers' market that is located outside the WIC Clinic entrance.

### UWEC and Other Nursing Education Program Collaborations

- Partnerships with nursing education are expanding to meet the changing needs of students and to build the public health workforce. Public health nurses continue to provide clinical practicum experiences to medical students and baccalaureate, masters and doctoral preparing nursing students from University of Wisconsin-Eau Claire, University of Wisconsin-Green Bay, Viterbo University, University of Wisconsin-Oshkosh, and University of Wisconsin-Madison.
- In 2018, 18 nursing students and 1 medical student worked side by side with public health nurses on real-world projects that provided broad-based experiences in promoting population health. Throughout the year students collaborated with public health nurses on a variety of projects and clinical experiences. Project activities included the following:



- During Spring 2018, there were two groups of four nursing students from UWEC, and two students from UWO. One group of UWEC nursing students worked with Amped Health to finalize and collect responses on Adolescent Friendly Health Care Survey with Eau Claire County providers. They worked with the ECASD Life Without Limits program and provided education sessions for the students. The second group of UWEC students collaborated with the Dementia Care Specialist from the Eau Claire Aging and Disability Resource center. They created a video and interviewed 3 family caregivers who had cared for or are currently caring for a spouse with dementia. They focused on some of the signs/symptoms, coping with the diagnosis, and shared advice for other family caregivers. The students also created the words for a brain display board. The two UWO students collaborated on immunization outreach at the Farm Show. One student worked on an immunization presentation in collaboration with the ADRC. The other student completed a staff breastfeeding knowledge assessment and then presented education to staff based on the survey.
- Over the summer, there were two students from Viterbo and 1 student from UW Oshkosh. The two Viterbo students had shadow/observation based clinical experiences. The UWO student worked on an Emergency Preparedness project focused on creating educational materials and researching at-risk populations.
- In Fall 2018, there were two groups of nursing students from UWEC, and one student from UWO. One group of four UWEC students partnered with ECASD Life Without Limits program to provide a rich educational experience. The students taught about accessing health care through the transition from adolescence to adulthood which included teaching the PATCH for the Classroom (highlighting their rights, responsibilities and relationships in health care), a pharmacy tour and scavenger hunt, and clinic tours at both Prevea and the Eau Claire Family Planning Clinic. They also drafted a newsletter to be used by the Amped Health program to send quarterly updates to local adolescent health providers. The second group of three UWEC students collaborated with the Dementia Care Specialist from the Eau Claire Aging and Disability Resource center. For their project they interviewed 8 healthcare providers across 3 different health systems in Eau Claire. The intent of the interview was to gather information regarding healthcare providers knowledge gap of the importance of early Dementia diagnosis, and how to provide referrals to community resources. Based on the data collected the students identified four main themes and recommendations. They presented this to the Dementia Coalition subcommittee and at a community presentation. The UW-Oshkosh student's project was based on the Safe Sleep Program. The student researched Safe Sleep programs in other counties, researched best practices, and reviewed current programming and paperwork. He presented his findings and recommendations on the Safe Sleep Program. In addition, the student assisted with writing a press release and filming a video about safe traveling and safe sleep.
- Through the year, Public Health Nurses and nursing faculty collaborated throughout the year to serve the needs of students. Public Health Nurses participated in various meetings with nursing schools and presented in class to nursing students. Along with the students, nursing faculty members participate in community service projects and offer their expertise on topics such as research, evidence-based practice and literature resources. Collaboration with our nurse colleagues in education is a vital component of public health nursing as a learning profession.

## ACCREDITATION

In 2018 the Health Department met the National Public Health Accreditation standards – a rigorous peer-review process that resulted in the awarding of national accreditation status. We are currently one of only 15 departments in Wisconsin that have achieved this status. This honor could not have happened without the daily efforts of an amazing staff, the leadership of the Board of Health, and partnerships that exist with countless partners across the community and state. All Eau Claire residents should be proud that they live in a community that has a nationally accredited Health Department and that we continue to strive to meet the needs of all that live, work, learn, vacation, play, and spend time here.

## ADOLESCENT HEALTH

### Positive Youth Development (PYD)

In 2018, 249 youth participated in evidenced based education programs at 8 different community-based organizations and schools. The programs implemented include the Safe Dates (teen dating violence prevention), HIP Teens and Street Smarts (both on sexual health risk reduction). Since 2016, the Health Department has partnered with local schools and community-based organizations through the Positive Youth Development grant. The Positive Youth Development grant has funded our adolescent health program, Amped Health, in providing educational opportunities to young people, health care providers and families. Amped Health engaged a group of young people from North High School in advocacy projects focusing on awareness around sexual violence, consent, healthy relationships, and sexual health. This included hosting tables during their school lunches during Teen Dating Violence Prevention Month and Sexual Assault Awareness Month. Amped Health partnered with the UW- Eau Claire Nursing Program to provide education to both young people and adolescent health care providers using the Providers And Teens Communicating for Health (PATCH) Program curriculum. The PATCH Program focuses on helping young people, their families and their health care providers navigate the transition to adult health care. This program emphasizes on knowing young people's health care rights and responsibilities as well as the importance of building a good relationship with your health care provider.

## AIR QUALITY PROTECTION/ NOISE COMPLAINTS

The purpose of the air quality protection program is to reduce the incidence of illness and death from diseases related to or aggravated by exposure to air contaminants and assure air quality that is aesthetically acceptable and enjoyable in Eau Claire County. This is accomplished by investigating air pollution complaints and enforce local air quality regulations which includes investigating and responding to concerns related to ambient air quality. The Department is responsible for enforcement of the County Air Pollution Ordinance, which adopts the Department of Natural Resources regulations by reference. The Department also provides assistance to the City with the enforcement.

### Noise

Noise investigations of commercial or public properties are periodically conducted by the department at the request of a complainant.

### Incinerator Licensing and Inspection

The county regulations require licensing of all incinerators. These are licensed and inspected by the Health Department for operational and maintenance violations.

| <b>Air Pollution Inspections and Investigations</b> |      |      |      |
|---|------|------|------|
|   | 2018 | 2017 | 2016 |
| Asbestos-related Consultations                      | 10   | 13   | 11   |
| Asbestos-related Investigations                     | 0    | 1    | 1    |
| Mold-related Consultations                          | 2    | 24   | 42   |
| Mold-related Investigations                         | 2    | 8    | 21   |
| Indoor Air Consultations - Other                    | 7    | 16   | 25   |
| Indoor Air Investigations - Other                   | 6    | 11   | 11   |
| Ambient Air Consultations                           | 6    | 8    | 25   |
| Ambient Air Investigations                          | 15   | 1    | 13   |

#### Indoor Air Pollution

Residences and public buildings or places of employment are investigated for the presence of carbon monoxide, carbon dioxide, soot, mold, mercury, sewer gas, fumes, odors or other indoor air pollutants as a result of complaints received.

### **ALCOHOL AND OTHER DRUG USE PREVENTION**

#### Alliance for Substance Abuse Prevention in Eau Claire County

The Alliance for Substance Abuse Prevention (Alliance) works to improve the lives of children, youth and adults by mobilizing communities to prevent and treat alcohol, tobacco and other drug abuse in Eau Claire County. Coalition membership includes a representation of 16 sectors across our community. The Alliance, formed in 2002, has the following prevention priorities: underage drinking, tobacco use, other drug use (prescription drug misuse and marijuana use) and early intervention and treatment. Four grant sources support the Alliance in reducing alcohol and other drug use among youth in Eau Claire County and building its capacity to do so. These include 2 federal grants- Drug Free Communities, and Partnerships For Success, and 2 state grants focusing on compliance checks-WI Wins and Prevention. The Health Department serves as the grant fiscal agents.

- Youth Advocates –SADD (Students Against Destructive Decisions) members from each high school are selected to represent their group on the Eau Claire County Youth Advisory Board (YAB). YAB, coordinated by the Alliance Youth Advisor, meets to assess training needs, plan the annual SADD training and develop ways to convey prevention messages to their peers. YAB plans activisms (activities done by youth prevention activists) for their school SADD groups to conduct.
- The Parents Who Host Lose the Most campaign was conducted for the 9<sup>th</sup> year throughout Eau Claire County to relay why underage drinking is a serious health, safety and legal issue.
- Provided significant support to the schools in regard to the e-cigarettes/vaping issues. The result was a new policy being adopted by the Eau Claire Areas School District and a Vaping Subcommittee was formed.

- SADD training with 50 students and advisors attending the annual event sponsored by the Alliance in October 2018. There were 8 guest speakers and workshops for students to choose to attend. Students were empowered with the knowledge and skills they need to become advocates for change. Topics included: healthy lungs, healthy relationships, prescription drugs, advocacy 101, mental health, AOTD and the law. Youth learned from speakers about how availability, acceptance and attractiveness contribute to the problems of underage drinking and prescription drug misuse. They also developed skills on how to get messages to their peers through activism.
- Educational papers were developed to assist in informing the public about marijuana decriminalization efforts. “Potential Implications of Legalization of Marijuana in Wisconsin” and “Alliance Marijuana Priority Paper”.
- A 3-year term Collaborative Agreement between Healthy Communities and the Alliance for Substance Abuse Prevention has been signed given that Substance Misuse is in the top 3 health priorities determined by this year’s Community Health Assessment.

Alcohol Compliance Checks were initiated by the Eau Claire City-County Health Department in 2004 in accordance with Wisconsin laws prohibiting the sale of alcoholic beverages to underage people. In partnership with our six law enforcement agencies, trained teams of four (2 adults and 2 buyers) investigate establishments that hold a license to sell or serve alcohol in Eau Claire County. Underage buyers are 18-20 years old for alcohol compliance checks (CCs). Checks are conducted randomly throughout the year. In 2018, 88.7% of the establishments checked did not sell alcohol to an underage buyer, complying with the law. This is funded through the Department of Health Services Prevention Grant.

Community Festivals Program – The Eau Claire City-County Health Department first conducted compliance checks at Country Jam in 2006 and the initial compliance check rate was only 33%. The Alliance has worked with Country Jam organizers along with the Sheriff’s Department to decrease youth access to alcohol at the event over the past seven years. Ten changes have been made to improve the policy and practices around underage drinking prevention. Expanded education of staff and volunteers, increased signage, improved processes and new policies adopted by Country Jam have had significant impact in preventing sales to underage buyers. In 2018, there was one sale to an underage buyer, therefore a 95% compliance check rate.

Tobacco Compliance Checks were initiated by the Eau Claire City-County Health Department in 2002 in accordance with Wisconsin laws prohibiting the sale of tobacco products to underage people. In partnership with our six law enforcement agencies, trained teams of four (2 adults and 2 buyers) investigate establishments that hold a license to sell tobacco products in Eau Claire County. Underage buyers are 16-17 years old who try to purchase tobacco products. Checks are conducted randomly throughout the year through the Wisconsin Wins Program. In 2018, 90% of the establishments checked did not sell tobacco to an underage buyer, complying with the law. Media outreach and public outreach activities were also done including newsletter articles, press releases, media interviews, thank you’s to compliant establishments and educational information to noncompliant establishments.

### Opioid Misuse Prevention

Overdose Fatality Review Team- In 2018, Eau Claire and Dunn County was awarded a dual county grant under the Prescription Drug Overdose Prevention project from state DPH and DOJ to establish collaborative overdose fatality review teams across Wisconsin to identify overdose risk factors and missed opportunities for prevention through an award from the Centers for Disease Control and Prevention. Members of the team consist of representatives across the counties, including law enforcement, Western Region Drug Task Force, medical examiners, health care providers, Department of Corrections, and other community stakeholders. The team meets every other month.

PFS grant-A one year, \$50,000 grant was awarded to the Eau Claire City-County Health Department as the fiscal agent for the Alliance for Substance Abuse Prevention. This is the second year we have received this grant. The Wisconsin Department of Health Services applied for and received this competitive Strategic Prevention Framework funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) to prevent prescription drug misuse. The grant began on 10/1/17 and ended 9/30/18. The overall target of this initiative is to build and sustain substance abuse prevention coalitions and decrease prescription drug misuse and abuse among persons aged 12-25. The overall target of this initiative is to build and sustain substance abuse prevention coalitions and decrease prescription drug misuse and abuse among persons aged 12-25. Eau Claire County was identified as a community of high need through an extensive analysis of available data, by the state of Wisconsin. Based on the analysis, substance abuse prevention coalitions in 14 counties were eligible to apply for funding to support strategies for reducing prescription drug abuse. This grant will build on the Alliance's current DFC action plan which focuses on reducing alcohol use and prescription drug misuse. In addition, the work plan of this grant includes:

- Implementation of Dose of Reality materials through a community education and/or media campaign.
- Supporting prescription (Rx) drug security, collection and disposal.
- Working with and providing resources to support law enforcement Drug Recognition Expert (DRE) training.
- The Prescription Drug Take Back initiative collected 3,300 pounds of unused or expired medication in Eau Claire County.

|   |
|---|
| <b>CERTIFIED PUBLIC HEALTH LABORATORY</b> |
|---|

The Certified Public Health laboratory is comprised of a microbiological and chemistry division that conduct analyses on a variety of substances (e.g., water, dairy products, food, utensils) that affect public health. Sampling and analysis are conducted to ensure sample acceptability and compliance with environmental standards for public health and welfare. The Health Department laboratory services not only Eau Claire County, but also many surrounding counties, as well many public and private businesses (e.g., well drilling companies, Health Departments). Eau Claire County sampling results and program-related laboratory activities have been inserted into the following sections of this report wherever applicable and appropriate:

- Food Protection
- Housing (Lead Prevention)
- Drinking Water Protection
- Private Onsite Wastewater Disposal
- Rodent, Insect, Rabies and Vector Control
- Environmental and Recreational Sanitation data contained in this section of the report is cumulative data for all laboratory services, both local (Eau Claire County) and non-local.

| <b>Total Laboratory Samples and Analyses</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Microbiological Examinations                 | 14,499      | 13,974      | 18,875      |
| Total Chemical Samples                       | 1,396       | 1,972       | 2,364       |
| -Total Chemical Analyses                     | 5,075       | 8,581       | 11,351      |
| <b>Total Analyses:</b>                       | 20,970      | 24,527      | 30,226      |

Colilert/Colisure

These test methods are used for the simultaneous detection and confirmation of total coliform bacteria and *E. coli* in drinking water. All non-coliforms are suppressed giving faster and more specific results in 22 hours or less with Colilert. Colisure is a test suitable for water samples containing high iron content and suppresses all non-coliforms, giving results in 24 – 48 hours.

Pseudalert

This test method was started in 2012 and is used for the detection of *Pseudomonas aeruginosa* in therapy pools and whirlpools. It provides results in 24-28 hours.

Food Testing

See Laboratory Food and Beverage Sampling Program

Chemistry Division

The laboratory receives samples such as water, soil, paint, and swabs in response to customer requests and to support environmental health field investigations.

Organic Chemical Testing

Samples are analyzed for up to 59 separate volatile organic chemicals (VOC's) using the laboratory's gas chromatograph/mass spectrometer (GC/MS). As a component of the City of Eau Claire's post-closure commitments, the Department routinely tests for these chemicals in samples collected from private wells near the former city landfill in the Town of Union.

Heavy Metal Analysis

Testing for a variety of heavy metals is conducted utilizing the laboratory's atomic absorption spectrophotometer (AAS). Examples of heavy metals tested on this instrument are lead, copper, chromium, arsenic, cadmium, iron and zinc. Samples types tested include drinking water from municipalities, private wells, dust swabs, and paint.

Nitrate Samples

Drinking water samples (public and private) are tested in the chemistry lab to determine nitrate-nitrogen levels. A nitrate reading exceeding 10 ppm can be potentially dangerous to newborn infants, pregnant women and cattle.

## **CHA/CHIP**

The Community Health Assessment for Eau Claire County was collaboratively completed with the Health Department, 3 health care institutions, and United Way in June of 2018. Mental Health, Substance Use, Alcohol Misuse, Chronic Disease and Obesity were named the top health priorities after reviewing feedback from the community health survey, community conversations, coalition meeting, and a comprehensive data collection.

Eau Claire Healthy Communities released its Community Health Improvement Plan (CHIP). The plan was created by a diverse coalition of residents, community organizations, schools, health care providers, businesses, faith communities and government agencies. The CHIP is a plan to help residents, organizations, and stakeholders work together to prevent health issues identified by the community in the assessment process that happened this spring.

## **CHILD DEATH REVIEW TEAM**

The Community Health Promotion and Healthy Beginnings Division Managers participate in the countywide Child Death Review Team. With the goal of preventing future deaths, Eau Claire County team members from health, human services, law enforcement and higher education organizations met quarterly to (a) review deaths of persons under age 24 years, (b) uncover risk factors and circumstances influencing the death and (c) assure targeted prevention activities. The Eau Claire County Child Death Review Team was established in 2011 by Eau Claire County Department of Human Services in conjunction with the Children's Health Alliance. In 2018, the team reviewed 19 children's deaths in Eau Claire County. The Water Safety Task Force has continued working on education and prevention efforts related to drowning in Eau Claire County. The Safe Sleep Task Force for Eau Claire County has trained community agencies on safe sleep best practice recommendations and distributed play yards. In 2018, 18 play yards (Pack 'n Plays) were also distributed to families who do not have a safe sleep option.

## **CHRONIC DISEASE PREVENTION**

Utilizing public health strategies and partnerships, staff taught Chronic Disease Self Management Program workshops to working-age and rural populations in Eau Claire County in partnership with the Healthy Communities Chronic Disease Action Team, the Aging and Disability Resource Center, Mayo Clinic Health System and the YMCA.

In 2018, ECCCHD was asked to partner with the Wisconsin DHS on a grant from the CDC to implement and evaluate evidence-based strategies to prevent and control diabetes and cardiovascular disease (CVD) in high-burden populations. Efforts began in 2018 to develop partnerships and 2019 workplan. One of the key components of this grant will be to focus on health equity and populations that are at greater risk of diabetes and cardiovascular disease in Eau Claire County.

## **COMMUNICABLE DISEASE**

Reportable communicable diseases increased by 22 percent in Eau Claire County in 2018. They went from 1137 cases reported in 2017 to 1389 cases reported in 2018. The Health Department follows-up on reportable diseases to help decrease the spread of illness and keep our community healthy.

### Communicable Disease Case Reports

|   | <b>2018<br/>TOTAL</b> | <b>2017<br/>TOTAL</b> |
|---|-----------------------|-----------------------|
| Arboviral Disease   | 2                     | 12                    |
| Babesiosis  | 3                     | 6                     |
| Blastomycosis   | 0                     | 0                     |
| Campylobacter   | 48                    | 40                    |
| Chlamydia   | 513                   | 507                   |
| Cryptosporidium   | 30                    | 20                    |
| Cyclosporiasis  | 18                    | 1                     |
| E. Coli pathogenic Shiga toxin-producing/Enteropathogenic*/Enterotoxigenic/Enteroinvasive | 22/94/13/2            | 17/80/9/1             |
| Ehrlichiosis-Anaplasmosis Phagocytophilum/Chaffeensis/Muris/Undetermined                  | 14/5/1/5              | 25/4/0/4              |
| Giardia   | 15                    | 14                    |
| Gonorrhea   | 169                   | 64                    |
| Haemophilus Influenzae  | 3                     | 2                     |
| Hepatitis A – acute   | 0                     | 1                     |
| Hepatitis B – acute/chronic /unknown  | 0/6/2                 | 0/5/0                 |
| Hepatitis C – acute/chronic   | 1/65                  | 1/38                  |
| Histoplasmosis  | 0                     | 3                     |
| Influenza, Seasonal (Hospitalized Cases)  | 138                   | 89                    |
| Kawasaki Disease  | 1                     | 1                     |
| Legionella  | 1                     | 0                     |
| Lyme Disease  | 62                    | 62                    |
| Malaria   | 1                     | 0                     |
| Measles   | 0                     | 0                     |
| Meningococcal Disease   | 0                     | 0                     |
| Mumps   | 0                     | 0                     |
| Mycobacterial Disease (Non-Tuberculosis)  | 18                    | 19                    |
| Parapertussis   | 0                     | 2                     |
| Pertussis (Whooping Cough)  | 8                     | 7                     |
| Salmonella  | 19                    | 22                    |
| Shigella  | 3                     | 4                     |
| Streptococcal Invasive Disease Group A/<br>Group B/Other                                  | 7/18/0                | 2/12/4                |
| Streptococcus Pneumoniae Invasive Disease   | 12                    | 4                     |
| Syphilis  | 8                     | 11                    |
| Transmissible Spongiform Encephalopathy   | 0                     | 1                     |
| Tuberculosis  | 2                     | 0                     |
| Tuberculosis Latent   | 34                    | *                     |
| Varicella (Chickenpox)  | 6                     | 8                     |
| Vibriosis   | 1                     | 2                     |
| VRSA/VISA   | 1                     | 0                     |
| Yersiniosis   | 5                     | 1                     |



### Community Surveillance

An absenteeism surveillance program is conducted by the City-County Health Department each year to monitor for upper respiratory influenza-like activity as well as gastrointestinal illnesses. Absentee checks begin in October and end in May of each year.

E-mails are sent to the schools on Wednesday mornings for Tuesday absentees. The absentees to be reported include half and full day illnesses only. Absentees for doctor appointments, deer hunting, field trips, etc., are not counted. After the numbers are collected, the absentees are recorded, and absentee rates are calculated.

The schools surveyed in 2017-2018 were Sherman, Roosevelt, Meadowview, Sam Davey, Northwoods and Lakeshore Elementary Schools; South, DeLong, and Northstar Middle Schools; Memorial, Regis and North High Schools. Altoona, Augusta and Fall Creek reported absentees to the Health Department for all grades.

#### **AVERAGE MONTHLY ABSENTEE RATES FOR STUDENTS October 2017 through May 2018**

| <b>Enrollment</b> | <b>OCT</b> | <b>NOV.</b> | <b>DEC.</b> | <b>JAN.</b> | <b>FEB.</b> | <b>MAR</b> | <b>APR</b> | <b>MAY</b> | <b>TOTAL</b> |
|-------------------|------------|-------------|-------------|-------------|-------------|------------|------------|------------|--------------|
| Elementary 3573   | 1.40       | 1.98        | 2.48        | 3.63        | 3.94        | 2.84       | 1.81       | 1.44       | 2.44         |
| Middle 3145       | 1.54       | 2.98        | 2.92        | 3.17        | 3.29        | 2.53       | 1.92       | 2.20       | 2.56         |
| High 4114         | 2.21       | 2.63        | 3.22        | 3.37        | 3.53        | 3.53       | 2.36       | 2.30       | 2.85         |

The peak of absenteeism during the 2017-2018 school year was in the week of February 6, 2018 in all schools surveyed. The absenteeism survey proves to be helpful in determining when to acquire nose and throat cultures to isolate and identify the type of "flu-like" illnesses circulating in the Eau Claire community. This information combined with data collected from Urgent Care Centers and Hospital Emergency Department proves useful also to medical clinics and nursing homes so proper precautions can be followed with patients to reduce further spread.

Reproductive Health Program

In 2018, the reproductive health needs of 644 women and men were met by the Family Planning Clinic. Goals of the clinic are to reduce unintended pregnancies and decrease sexually transmitted infections in the Eau Claire area. 148 pregnancy tests and 850 STI (chlamydia, gonorrhea, herpes or syphilis) tests were done in 2018. Some of the additionally activities done by clinic staff include:

- The Family Planning Clinic was designated an Adolescent Champion for its work to ensure it was a safe, confidential and adolescent friendly space.
- Participated in the statewide Get Yourself Tested (GYT) campaign to increase awareness and testing for sexually transmitted infections (STIs).
- AMPED Health Advocates, a youth advocacy and advisory group, was developed to assist with advising our adolescent health programming as well as build their health advocacy skills.
- Janel Hebert, Public Health Nurse was elected president of the Wisconsin Family Planning and Reproductive Health Association (WFPRHA).
- Received multiple Health Care Education and Training (HCET) grants allowing us to focus on increasing colposcopy services, creating an adolescent friendly environment and improving technology in the clinic.
- Regional HIV Partner Service providers followed up on 21 cases in our 14 county jurisdiction. We partnered with ARCW to increase HIV awareness during multiple events throughout the year, including for National HIV Awareness Day and World AIDS Day.
- Syphilis testing almost doubled from 2017 to 2018. 32 patients were tested in 2018 and we were able to treat many people that may not have other easy access to treatment.

HIV Testing & Counseling Services

Nurses offer HIV testing and counseling as a service of the Reproductive Health Clinic.

**HIV Testing Services: 2018**

| Type of Service               | Number Served |
|-------------------------------|---------------|
| Pre/Post-test Counseling      | 59            |
| Total # of HIV Tests Provided | 59            |

**HIV Partner Services 2018**

| Total Cases Assigned in the 14-county coverage area |   |
|---|---|
| Eau Claire  | 5 |
| Dunn  | 2 |
| Polk  | 0 |
| Barron  | 2 |
| Clark   | 2 |
| St. Croix   | 1 |
| Pierce  | 3 |
| Douglas   | 1 |
| Bayfield  | 0 |
| Burnett   | 0 |
| Chippewa  | 0 |
| Pepin   | 0 |
| Rusk  | 0 |
| Washburn  | 0 |

**STI SCREENING SUMMARY: 2018**

|                  | Male | Female | 2018 Total | 2017 Total | 2016 Totals |
|------------------|------|--------|------------|------------|-------------|
| <b>Gonorrhea</b> |      |        |            |            |             |
| # Screened       | 152  | 185    | <b>337</b> | 158        | 77          |
| # Positive       | 15   | 14     | <b>29</b>  | 19         | 4           |
| <b>Chlamydia</b> |      |        |            |            |             |
| # Screened       | 207  | 368    | <b>575</b> | 562        | 356         |
| # Positive       | 33   | 38     | <b>71</b>  | 67         | 52          |

**NUMBER OF EAU CLAIRE CO. STI CASES BY TYPE, AGE AND GENDER: 2018**

| Age          | Gonorrhea |        | Chlamydia |        |             |
|--------------|-----------|--------|-----------|--------|-------------|
|              | Male      | Female | Male      | Female | Transgender |
| Less than 10 | 1         | 0      | 0         | 0      | 0           |
| 10-14 years  | 1         | 0      | 1         | 2      | 0           |
| 15-19 years  | 7         | 13     | 22        | 95     | 0           |
| 20-24 years  | 17        | 21     | 60        | 154    | 1           |
| 25-29 years  | 22        | 19     | 27        | 58     | 0           |
| 30-34 years  | 16        | 12     | 13        | 22     | 0           |
| 35 and older | 19        | 22     | 27        | 31     | 0           |
|              | 83        | 87     | 150       | 362    | 1           |

## Tuberculin Skin Testing

| <b>TUBERCULIN SKIN TESTING FOR COMMUNITY RESIDENTS</b> |            |
|--|------------|
| <b>JANUARY – DECEMBER 2018</b>                         |            |
| Number of Tests with Negative Results, 0mm             | 484        |
| Number of Tests with Positive Results, 1-9mm           | 1          |
| Number of Tests with Positive Results 10 or over       | 3          |
| Number of Tests Not Read                               | 2          |
| <b>TOTAL Tests Administered</b>                        | <b>490</b> |

### **COMMUNICATIONS**

- Reached over 1900 likes on Facebook
- Utilized broad range of social media modalities to connect with diverse community populations including new uses of FaceBook Live and YouTube videos.
- Did 102 interviews with media sources, sent out 60 press releases, were quoted in or wrote 75 print articles, and had 279 posts on Facebook.
- During National Public Health Week (April 2nd-6th) Health Department Staff celebrated the work that happens every day in the department to create a healthier Eau Claire. The theme this year was “Changing our Future together” and emphasized all the partners that contribute to public health work. Staff also enjoyed trying out new Facebook live videos! Live interviews were done daily on Facebook related to daily themes. The top video had over 800 impressions.

### **COMMUNITY LEADERSHIP**

- Provided leadership in development of Public Excessive Intoxication ordinance to assure healthy and safe communities.
- Supported collaborative work led by national consultant to engage a broad range of stakeholders to develop a plan to address homelessness in Eau Claire.
- Provided extensive leadership and multi-county collaboration in regional public health initiatives related to HIV, mental health, community nutrition, suicide prevention, water health/safety, cancer and diabetes prevention/control, family planning, and more.
- A team from Eau Claire was selected as one of nine teams nationally to receive travel assistance to attend the 2018 Step It Up!: Action Institute to Increase Walking and Walkability. Audrey Boerner was one of the team members. The purpose of the conference was to prepare interdisciplinary teams to pursue sustainable and long-lasting changes that increase walking and walkability. They brought the knowledge gained back to the action team and work on putting forward an action plan to improve walkability in Eau Claire.
- Received Gold Level Healthy Communities designation in the inaugural year for this program.

### Invest Health

- Participated in the national Invest Health efforts for peer-learning related to place-based health strategies with 4 other cities. In May and June, these "peer exchanges" took place.
- The first exchange opportunity centered around food and food access. Staff and local partners visited St. Paul MN and Grand Rapids MI to learn from those teams about commercial kitchens, urban farms, and the role of health systems in food access. We also hosted teams from both cities and highlighted FNV, Feed My People, Fight Against Hunger Coalition, Market Match, and Forage.
- For the 2nd exchange opportunity we partnered with Missoula and Iowa City regarding affordable housing, active transportation, and community health mapping. We met with community leaders, community partners, and local government officials to learn more about housing, health, and transportation strategies in Missoula, MT. Both Missoula and Iowa City were very interested in learning more about our housing and rental registration programs.

### BRAIN Team

The Brain Research Awareness and Integration Network (BRAIN) Team offered its annual BRAIN Conference in April. A public health division manager co-chairs the BRAIN team and provided conference planning leadership. The conference entitled "Resilience Champions: Responding to the Complexity of Families" focused on what it takes to build resilient individuals and families, looking at addiction and intergenerational trauma, mindfulness and compassion fatigue. Over 200 participants from various professions, including home visitors, head start staff, teachers, public health nurses, social workers, health care clinicians, law enforcement, etc., were in attendance. Proceeds were donated to the Family Resource Center for Eau Claire County and the BRAIN Team for continued parenting education.

|  |
|--|
| <b>DRINKING WATER REGULATION PROGRAM</b> |
|--|

The purpose of the drinking water regulation program is to assure that the public is provided a safe water supply that is protected from organic and inorganic chemical contamination and waterborne communicable diseases.

This includes

- promoting the testing of private water wells for contaminants
- reviewing and issuing well permits to assure proper location of new wells
- requiring abandonment of unused wells
- conducting inspections of existing wells to assess their risk of being or becoming contaminated
- providing consultation and work with the public to prevent and correct contamination of their well
- testing for contaminants such as fecal coliform bacteria, organic chemicals, nitrates, and metals such as lead, arsenic and copper
- conducting epidemiological investigations of suspected and confirmed waterborne illness cases and outbreaks
- serving as a technical resource for the County Groundwater Advisory Committee, assisting with the identification and implementation of groundwater protection initiatives.

Municipal Drinking Water Supplies

The Health Department collects municipal water samples to test for coliform bacteria and residual chlorine from Altoona, Augusta, Fairchild and Fall Creek. These samples are collected twice a month from various locations in each municipality as required by the safe drinking water law.

| <b>Eau Claire County Bacteriological Tests of Municipal Water</b> |            |             |             |             |
|---|------------|-------------|-------------|-------------|
|   |            | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Distribution Systems  | Negative   | 175         | 171         | 169         |
|   | Positive   | 0           | 1           | 0           |
|   | % Positive | 0.0%        | 0.6%        | 0.0%        |
| Wells   | Negative   | 53          | 56          | 57          |
|   | Positive   | 2           | 0           | 0           |
|   | % Positive | 3.8%        | 0.00%       | 0.0%        |
| Residual Chlorine Samples   |            | 187         | 196         | 196         |
| Residual Chlorine Tests   |            |             |             |             |
| Free Available  |            |             |             |             |
| Combined Available  |            | 561         | 586         | 587         |
| Total Residual  |            |             |             |             |

Private Drinking Water Supplies

The Eau Claire County Sanitary Code requires that all premises intended for human occupancy shall be provided with an adequate supply of water that is safe and acceptable to drink. Water samples are collected upon request and wells are evaluated at the time of the sampling. Recommendations are made by environmental health specialists to correct unsafe water supplies.

As a result of Eau Claire’s geology, private wells consistently struggle to get safe water without treatment or modification. Safe water remains a focus of the lab and inspection team.

| <b>Eau Claire County Private Well Coliform Tests</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Negative   | 418         | 455         | 506         |
| Positive   | 83          | 105         | 118         |
| % Positive   | 16%         | 23%         | 19%         |

| <b>Eau Claire County Private Well E Coli Tests</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Negative   | 496         | 105         | 115         |
| Positive   | 5           | 0           | 3           |
| % Positive   | 1%          | 0%          | 3%          |

| <b>Eau Claire County Private Well Nitrate Samples Analyzed</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples not Exceeding Standard                           | 313         | 441         | 462         |
| Total Samples Exceeding Standard                               | 28          | 41          | 35          |
| % Exceeding Standard   | 8.2%        | 9.3%        | 7%          |

### Newborn Infants Program

A grant for the testing of private water supplies serving families with newborn infants for arsenic, fluoride, lead, and copper was discontinued by the State Division of Public Health in 2012. However, the Department has continued to offer free testing for these contaminants, as well as bacteria and nitrate, to expectant families and those with newborn infants whose households are serviced by private wells in Eau Claire County.

| <b>Newborn Infants Program</b> |             |     |             |     |             |     |
|--------------------------------|-------------|-----|-------------|-----|-------------|-----|
|                                | <b>2018</b> |     | <b>2017</b> |     | <b>2016</b> |     |
| Letters Sent to Families       | 162         |     | 156         |     | 184         |     |
| Families Participating (%)     | 49          | 30% | 38          | 23% | 43          | 23% |

Follow up action by department staff was initiated whenever a test result showed contamination beyond the maximum contaminant level (MCL) set forth in the Wisconsin Safe Drinking Water Code. A summary of the newborn water testing results is shown in the following table.

| <b>Newborn Water Testing Results</b> |                          |                          |
|--------------------------------------|--------------------------|--------------------------|
| <b>Parameter Tested</b>              | <b>Number of Samples</b> | <b>Number of Samples</b> |
|                                      | <b>2018</b>              | <b>Exceeding MCL</b>     |
| Copper                               | 41                       | 7                        |
| Lead                                 | 41                       | 1                        |
| Total Coliform (bacteria)            | 47                       | 7                        |
| Nitrate                              | 46                       | 7                        |
| Fluoride                             | 40                       | 0                        |

### Wisconsin Well Code

The Health Department administers portions of the Wisconsin Well Code through the Wisconsin Department of Natural Resources County Well Delegation program. The Health Department participates in Delegation Levels 1 and 5 and has also had a Level 3 County Delegation agreement with the DNR since 1989. Level 1 is concerned with private well location and includes issuing permits and inspecting new wells for proper separation distance from contamination sources, adequate casing height and proper seals. Level 5 involves abandonment of wells either taken out of service or not in use. Wells not abandoned, or abandoned improperly, can provide a direct conduit to the groundwater from the ground surface and potentially pollute the groundwater.

The Level 3 agreement gives the Health Department authority to administer the portions of the Wisconsin well code that govern existing private wells and Transient Non-Community water systems. Transient non-community water systems are individual water supply systems that serve facilities such as restaurants, motels, campgrounds and service stations. Transient non-community systems must be sampled for bacteria and nitrate annually and must undergo a comprehensive inspection once every 5 years. Action is initiated when problems with water safety or the condition of the system are encountered. Facilities with bacteriologically unsafe results are required to discontinue use of their water for drinking and food preparation until corrective actions were taken and follow-up samples test safe.

The department's lab also receives samples from new wells and well water after the pump is installed to ensure the supply is safe for consumption.

| <b>New Well Samples - Laboratory Analyses</b> |             |             |             |
|---|-------------|-------------|-------------|
| <b>Coliform Tests</b>                         |             |             |             |
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples                                 | 72          | 76          | 77          |
| Positive                                      | 19          | 9           | 5           |
| % Positive                                    | 26%         | 12%         | 6%          |
| <b>Nitrate Tests</b>                          |             |             |             |
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples                                 | 72          | 73          | 75          |
| # Exceeding Standard                          | 6           | 6           | 4           |
| % Exceeding Standard                          | 8%          | 8%          | 5%          |

| <b>Pump Work Samples - Laboratory Analyses</b> |             |             |             |
|--|-------------|-------------|-------------|
| <b>Coliform Tests</b>                          |             |             |             |
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples                                  | 279         | 258         | 287         |
| Positive                                       | 49          | 46          | 57          |
| % Positive                                     | 18%         | 18%         | 20%         |
| <b>Nitrate Tests</b>                           |             |             |             |
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples                                  | 223         | 215         | 249         |
| # Exceeding Standard                           | 26          | 31          | 40          |
| % Exceeding Standard                           | 12%         | 14%         | 16%         |
| <b>Arsenic Tests</b>                           |             |             |             |
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples                                  | 221         | 213         | 247         |
| # Exceeding Standard                           | 2           | 1           | 3           |
| % Exceeding Standard                           | 0.9%        | 0.5%        | 1%          |

| <b>Well Location Permit Program Activity Summary</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Consultations - (Levels 1, 3 & 5 combined)           | 304         | 218         | 170         |
| Total no. Permits Issued                             | 151         | 143         | 131         |
| -New Well Permits Issued                             | 117         | 126         | 98          |
| -Replacement Well Permits Issued                     | 32          | 15          | 31          |
| -Reconstruction Permits                              | 2           | 2           | 2           |
| Completed Inspections                                | 182         | 156         | 152         |
| Installations – Non-complying                        | 1           | 1           | 0           |
| Wells Requiring Abandonment                          | 30          | 15          | 29          |
| Orders Issued  | 29          | 15          | 28          |
| Completed Well Abandonments (City and County)        | 17          | 32          | 16          |



| <b>Level 3 - Inspection of Existing Systems Activity Summary</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Consultations (existing private and transient non-community)     | 159         | 133         | 148         |
| Inspections/Investigations – Private                             | 9           | 6           | 17          |
| Inspections – Non-community                                      | 21          | 25          | 29          |
| Orders/Directives Issued   | 4           | 2           | 2           |

| <b>Transient Non-Community Well Bacteria Tests</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Coliform Negative                                  | 134         | 132         | 102         |
| Coliform Positive                                  | 23          | 15          | 15          |
| % Coliform Positive                                | 15%         | 11%         | 13%         |
| E Coli Positive                                    | 0           | 0           | 1           |
| % E Coli Positive                                  | 0%          | 0%          | 1%          |

| <b>Transient Non-Community Well Nitrate Tests</b> |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples not Exceeding Standard              | 90          | 90          | 85          |
| Total Samples Exceeding Standard                  | 5           | 5           | 5           |
| % Exceeding Standard                              | 6%          | 6%          | 6%          |

| <b>Other Community Well Coliform Tests</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Negative                                   | 61          | 83          | 78          |
| Positive                                   | 0           | 2           | 1           |
| % Positive                                 | 2%          | 2%          | 1%          |

| <b>Other Community Well E Coli Tests</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Negative                                 | 61          | 86          | 79          |
| Positive                                 | 0           | 0           | 0           |
| % Positive                               | 0%          | 0%          | 0%          |

| <b>Other Community Well Nitrate Tests</b> |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Samples not Exceeding Standard      | 4           | 8           | 10          |
| Total Samples Exceeding Standard          | 0           | 0           | 0           |
| % Exceeding Standard                      | 0%          | 0%          | 0%          |

## Groundwater Surveillance and Testing

Groundwater contamination is a continuing concern to area residents. Health Department staff participates as a technical resource, for the Eau Claire County Board-appointed Groundwater Advisory Committee. The committee developed a groundwater management plan for Eau Claire County, published in 1994 and adopted by the County Board 1995. In 2018, Health Department staff assisted with the update to this plan, entitled *State of the Groundwater in Eau Claire County, Wisconsin – 2018*. Activities associated with the development of this plan included the inventory of potential pollution sources; assessment of vulnerabilities through the review of maps depicting groundwater depth and flow, directions, soil attenuation and depth to bedrock; developing a summary of existing groundwater management controls; and identifying priority recommendations related to groundwater protection, enhancement and education in Eau Claire County. In 1999, revision of the county subdivision ordinance was conducted, focusing on reducing the impact of up-gradient contamination sources on private wells within proposed subdivisions and the impact of sanitary systems within the subdivision on wells. A groundwater protection section was included in the County Subdivision Ordinance, which was adopted by the County Board in December 1999.

A wellhead protection ordinance for municipal water supplies was adopted by Eau Claire County in 2001. For this ordinance to take effect in a municipality, that local governmental entity must adopt its own wellhead protection ordinance to control activities within the recharge area within its boundaries and request the County Planning and Development Department to create a Groundwater Protection District for the recharge area outside the municipal boundaries. The Eau Claire County Groundwater Committee promoted and authorized expenditures to identify recharge areas for each municipal well and inventory potential contamination sources in the identified areas. Fairchild, Augusta, Altoona, and Fall Creek have now adopted this ordinance.

## **EAU CLAIRE HEALTHY COMMUNITIES**

The Policy and Systems team provided leadership and support to the Healthy Communities Council and action teams: sharing health data, prioritizing health needs, compiling and analyzing data for the community health improvement plan, developing action teams goals and objectives, researching evidence-based strategies and best practices, providing tools and facilitation skills to advance the planning process, completing the annual report and writing grants.

Staff provided leadership for the *Eau Claire Healthy Communities Celebration and Healthy Eau Claire Legislative Events*. On April 25, 2018, upwards of 75 community members came together to celebrate the accomplishments of Eau Claire Healthy Communities. Attendees were able to connect with action teams and other community members before participating in a health equity workshop presented by Sweta Shrethsa and Victoria Faust from the University of Wisconsin Population Health Institute's MATCH program.

Kathy Mitchell received the *Healthy Communities Individual Champion* award for her drive to better the health and well-being of Eau Claire County. Kathy has contributed significantly to policy changes and advocated for evidence-based practices—such as the Cannery District Health Impact Assessment (HIA)—in the city's development projects to best improve the health outcomes of residents. Kathy has been a consistently strong advocate for population health improvement through sustainable practices.

The West Central Wisconsin Regional Planning Commission (WCWRPC) was honored as the *Healthy Communities Organization Champion* for their passion and dedication to improve the environment of our communities.

Healthy Communities and the Board of Health made it a priority to have a continued focus on advocacy and policy work through the creation of the Healthy Eau Claire Legislative Task Force. On April 25<sup>th</sup>, 2018 the task

force held the 5<sup>th</sup> annual Healthy Eau Claire Legislative event where participants discussed what we - policymakers and community organizations - could do to focus on prevention efforts. About 30 legislators, community leaders, Board of Health, and Healthy Communities members gathered to discuss how legislative leaders and community organizations can prevent poor health outcomes through their work. Prevention is a challenging topic to discuss in a short time, but attendees were productive at brainstorming solutions. It was a great conversation that will help continue to build relationships with legislators.

## EAU CLAIRE HEALTHY COMMUNITIES ACTION TEAMS

In addition to the support the Policy and Systems team provides, other designated Health Department staff served on Healthy Communities Action Teams providing planning input, technical support and public health tools to assure successful strategic planning, implementation and outcome evaluation for the following teams:

Oral Health Action Team coordinated continuing education for dental hygienists about current standards of care for pregnant patients. The action team worked with Chippewa Valley Technical College Dental Hygienist program. Results of the pre-event survey showed a need to further educate dental hygienists on oral care during pregnancy. In the pre-survey, nearly 80% had a belief/policy that said it is safe to treat a pregnant woman throughout her pregnancy (which is true!); however, over half said x-rays are a limitation on treatment of pregnant women (which is not true!). The team hosted second inter-professional event for local primary care providers, pediatricians, and dentists in February. The goals were to increase medical and dental provider awareness and knowledge of importance of dental care for pregnant women and infants and continue conversation about creating a referral network between the professions. In addition, they co-hosted a continuing education event, “Dose of Reality,” with the Alliance for Substance Abuse Prevention in March. Experts taught twenty-five local oral health and primary care providers how they can help prevent drug misuse during routine oral care.

Healthy Relationships Action Team as the advisory team for the Positive Youth Development Grant, facilitated the evidence-based “Safe Dates” curriculum. In 2018, they facilitated Safe Dates with the Boys & Girls Club, Augusta High School, Fall Creek High School, Marriage and Family Services, Juvenile Detention Center, and the SPARKS Program. A total of 240 youth attended at least one session of the Safe Dates program. The team also promoted a “Consent Is...” campaign in some of the local high schools. The campaign included an activity where “Consent Is...” word bubbles are filled in by students. This activity helps students recognize what consent is to them and to others. In addition, they participated in the Healthy Wisconsin Leadership Institute’s 3-year COACH Program (Collaborating, Organizing and Advocating for Community Health) for its second year. In 2018, the team received coaching and technical assistance around identifying team roles, creating timelines, completing a root cause analysis with a health equity lens, engaging stakeholders, and strategic messaging.

Mental Health Action Team provided QPR (Question – Persuade – Refer) suicide prevention training for youth and adults. In 2018, our QPR suicide prevention training facilitators trained 159 adults and 973 adolescents, including students from Memorial, North, and Regis high schools, as well as Fall Creek 8th grade and high school health classes. They hosted the second annual Flash Mob for Mental Health Awareness Month in May. The event had live music and dancing and was well attended. At one point, over two dozen Mental Health Action Team and community members were dancing to The Greatest Showman’s “This is Me.” The event was a great success this year as evidenced by many honks, thumbs-ups, waves and stoplight-waiters dancing in their seats.

High-Risk Drinking Prevention Action Team helped to pass the Public Excessive Intoxication Ordinance. Participated in the Neighborhood Safety and Relations Task Force reviewing alcohol misuse and potential solutions to improve the public good. Testified before City Council in support of the ordinance which unanimously passed in October of 2018. They worked to increased awareness around high-risk drinking prevention. Presented at an Eau Claire Chamber Worksite Wellness Learning Circle in partnership with the Chronic Disease Prevention Action Team. The action team also provided strong media messaging during Alcohol Awareness Month (April), which included a TV interview on WEAU.

Chronic Disease Prevention Action Team received resources to continue the FNV campaign. FNV uses the power of marketing to promote fruits and veggies in the same way big brands market their products. In 2018, new messaging supporting farmer's markets were featured on billboards, buses, and social media. They evaluated and expanded the Corner-Store (C-store) project and evaluated success with 2016-2017 partners. They also expanded the initiative to increase community access to healthy foods in additional rural areas. They attended the Walkability Action Institute in Decatur, Ga. A six-person Eau Claire team was selected as one of nine teams nationally to attend. The team developed a plan to create sustainable changes to increase walking and walkability. The team hosted the Chippewa Valley Wavemaker Rally, along with Eat Well Dunn County and Challenge Chippewa. Nadja Berneche, Healthy Comprehensive Plan Director at Terra Soma, LLC, presented on building relationships and networks to improve healthy food access, and how small changes can have big impacts. Attendees discussed how to collectively improve the food environment.

## **HEALTH EQUITY**

UW-Population Health MATCH program staff provided training for staff on common language for health equity, essential components of a health equity approach and the Health Departments role in addressing it. It also set the stage for the Bay Area Regional Health Inequities Initiative (BARHII) assessment, which is the self-assessment all Health Department completed related to health equity issues.

## **HOUSING AND PROPERTY MAINTENANCE & HYGIENE**

The purpose of the housing program is to assure that the public is provided housing that is safe and adequate for the protection of the public's health, safety and general welfare. This is accomplished by enforcing the City of Eau Claire, Altoona, Augusta, Fall Creek, Fairchild, Town of Seymour, and Town of Union Housing Maintenance and Occupancy Codes and provisions of the County Sanitary Code that address health hazards created by unsanitary or unsafe housing conditions.

### Housing Code Enforcement

The Housing Maintenance and Occupancy Code is an Eau Claire City Ordinance and has also been adopted by Altoona, Augusta, Fall Creek, Fairchild, and the Townships of Seymour and Union. It is used as an enforcement tool for inspections of properties on a complaint basis and for the Eau Claire City Housing Inspection Program. The code is also used as a guideline on inspections for City Housing Assistance Programs, the County Department of Human Services (referrals regarding sanitary conditions and neglect cases), and for inspections of houses in areas of the county which do not have a housing code. Follow-up inspections and re-inspections are conducted to achieve compliance with the code.

### Human Services Investigations

Joint investigations are conducted in conjunction with the Eau Claire County Department of Human Services. These investigations are often more complex, dealing with such issues as unsanitary living conditions, health and safety concerns for children and elderly persons, economic problems as well as housing code violations. Resolution of these cases often involves working with landlords, family members and staff from both agencies.

### Interagency Agreement for the Investigation of Dangerous Living Conditions

Dangerous living conditions are those in the home environment which are hazardous, unsanitary or situations where the competency of an individual is such that occupants' lives are seriously threatened. An interagency agreement for the investigation of dangerous living conditions was signed by seven City of Eau Claire and County agencies in 1993. The agencies signing the agreement are the City Police Department, City Fire Department, City Community Development Department, City Attorney's Office, County Department of Human Services, Corporation Counsel's Office and the City-County Health Department. The purpose of the interagency agreement is to establish a protocol and team for appropriate city and county agencies to collectively address those problems in a timely and coordinated manner. This team approach has proven beneficial to solving multi-disciplinary and complex housing related problems.

### Eau Claire City Housing Inspection Program (ECCHIP)

This program involves a systematic housing inspection effort to all residential homes in the City of Eau Claire. Exterior conditions of individual properties within the city are surveyed block by block to determine properties needing a complete inspection. An exterior housing survey was conducted during 2015 to re-evaluate housing conditions within the previous Community Development Block Grant target area. Each dwelling was rated according to the number of structural defect points (areas of deterioration) noted on the exterior of that property. We have completed inspections of the homes identified on the 2015 survey that were prioritized for an inspection. In 2018, the survey was conducted in the Northeast section of the city. A total of 5,719 parcels were surveyed.

The program design continues to be effective in identification of the more significantly deteriorated dwellings in Eau Claire by using an objective means to assess the property conditions. The inspections have identified many significant interior health and safety hazards, have improved block conditions due to exterior maintenance and have helped to eliminate insect and rodent harborages by enforcement of proper garbage storage and disposal. A continued policy to first notify the owner of a property of a pending inspection and then to establish a joint inspection appointment is felt to be a major factor in the small number of Housing Advisory Board appeals. Conducting inspections with the property owner present reduces confusion of required corrections and also increases effective use of staff time. Issuing citations in instances of non-compliance is done in an effort to achieve improved compliance within reasonable time periods.

| <b>Intensified Housing Code Compliance Program – Field Activity Summary</b>  |   | <b>2018</b>                           | <b>2017</b> | <b>2016</b> |     |
|--|---|---------------------------------------|-------------|-------------|-----|
| <b>A. CDBG Funds:</b> Primarily used to cover 50%-80% of the 1.0 FTE dedicated to the program plus mileage/supplies/etc. |   | \$85,400                              | \$95,400    | \$71,200    |     |
| <b>B. Inspections:</b>   |   |                                       |             |             |     |
|  | 1. Dwellings Inspected  | 219                                   | 103         | 128         |     |
|  | a. Renter-occupied  | 290                                   | 88          | 113         |     |
|  |   | b. Owner-occupied                     | 63          | 12          | 14  |
|  |   | c. Owner and renter occupied          | 10          | 3           | 1   |
|  | 2. Dwelling Units contained in dwellings                                  | 363                                   | 111         | 162         |     |
|  | 3. Total Inspections  | 1,265                                 | 537         | 508         |     |
|  | a. Initial Inspections  | 363                                   | 103         | 128         |     |
|  |   | b. Reinspections to assess compliance | 902         | 434         | 380 |
|  | 4. Complain Investigations (specific problems – not complete inspections) | 65                                    | 47          | 20          |     |
|  | <b>C. Enforcement Actions:</b>  |                                       |             |             |     |
|  | 1. Compliance Orders Issued   | 194                                   | 109         | 65          |     |
|  | 2. Citations Issued   | 61                                    | 52          | 31          |     |
|  | 3. Housing Advisory Board Hearings  | 1                                     | 0           | 1           |     |
|  | 4. Inspection Warrants  | 1                                     | 1           | 1           |     |
|  | 5. Dwelling Units placarded as unfit for habitation                       | 20                                    | 8           | 2           |     |
| <b>D. Total Program Inspections (1980-2018):</b>   |   |                                       |             |             |     |
|  | 1. Total Number Inspected   | 4940                                  | 4577        | 4474        |     |
|  | 2. Houses Brought into Compliance   | 4581                                  | 4387        | 4278        |     |
|  | 3. Houses in Process  | 359                                   | 190         | 196         |     |

| <b>Housing Activities Summary (*Includes IHCCP)</b> |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Complaint Inspections/Investigations                | 221         | 229         | 186         |
| Complaint Reinspections                             | 421         | 402         | 336         |
| IHCCP Inspections and Investigations                | 363         | 103         | 128         |
| IHCCP Reinspections                                 | 902         | 434         | 380         |
| Housing Advisory Board Meetings*                    | 1           | 1           | 1           |
| Dwelling Units Placarded as Unfit *for Occupancy    | 34          | 46          | 16          |
| Total Housing Consultations*                        | 2397        | 1428        | 1335        |
| Citations Issued *                                  | 86          | 66          | 44          |
| Total Inspections and Reinspections*                | 1421        | 1168        | 1101        |

Rental Registration (New in 2018)

A part of the updated code is a new requirement for rental property owners which is rental registration. The registration requires that all property owners with one or more rental housing units in the City of Eau Claire to register their properties with the Health Department. This is done by completing a registration form and submitting a fee of \$5 per property. The purpose of the rental registration is to build stronger communication between the city and landlords.

| <b>Rental Registration</b>        |                              |       |
|-----------------------------------|------------------------------|-------|
| <b>A. Registration Compliance</b> |                              |       |
|                                   | 1. Dwellings Registered      | 3642  |
|                                   | 2. Dwelling Units Registered | 10347 |
| <b>B. Enforcement Actions:</b>    |                              |       |
|                                   | 1. Citations Issued          | 18    |

Manufactured Home Communities

Manufactured Home Communities in Eau Claire County are licensed and inspected as an agent of the Wisconsin Department of Safety and Professional Services and the Board of Health Manufactured Home Community regulation. Additional investigations of problems or violations are also conducted on a complaint basis. Manufactured Home Communities served by drinking water wells are required by the safe drinking water regulations to have their water tested by a certified laboratory on a monthly basis, these results are reported in the Drinking Water and Certified Laboratory sections of this report.

| <b>Manufactured Home Communities</b>           |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Licensed Establishments        | 17          | 17          | 17          |
| Total Number of Licensed Sites                 | 1477        | 1477        | 1477        |
| Routine Inspections                            | 17          | 17          | 17          |
| Reinspections                                  | 1           | 7           | 11          |
| Investigations                                 | 1           | 9           | 15          |
| <b>Total Inspections (includes all types):</b> | 19          | 33          | 43          |

### Radon

The Eau Claire City-County Health Department administers the US EPA Radon Grant to operate the West Central Radon Information Center. This Center services Buffalo, Chippewa, Clark, Eau Claire, Jackson, Trempealeau and Pepin counties. The Center provides assistance and resources to these Health Departments and the public in order to provide education around the importance of testing for radon in owner-occupied homes. The only way to know if radon is present in the home is to test for it. Education on the effects of radon and the importance of testing are done throughout the year through press releases, booths at community events and community presentations. Short and long-term kits are sold or distributed at no-cost, along with information on testing and how to mitigate high radon levels over 4.0 picocuries/liter (pCi/L).

Data collected from radon testing in Eau Claire County dates back to 1988. The below table indicates the percentages of homes tested which are below the EPA recommended standard of 4.0 pCi/L, and those which are above. Homes with exceeding levels were given recommendations for further testing or mitigation depending upon the level of radon in their home.

| <b>Home Radon Levels</b>                          |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| % of radon levels less than 4.0 pCi/L             | 33%         | 59%         | 63%         |
| % of radon levels greater than or equal to 4pCi/L | 67%         | 41%         | 37%         |

Even though there are statistics for radon levels locally in the County, there is no way to predict what the level of radon will be in a home. The only way to know is to test. Mapping of results obtained thus far has identified some areas that appear to be at higher risk. A GIS map of both the City and County of Eau Claire has been developed. Furthermore, the department provides both short-term and long-term radon test kits for a fee. Homeowners who wish to test their own homes can purchase these kits at the Eau Claire City-County Health Department office located in the County Courthouse.



| <b>Radon Home Test Kits Sold/Analyzed</b> |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Long Term Kit Sales                       | 5           | 6           | 5           |
| Short Term Kits Sales                     | 358         | 243         | 278         |
| % of Short Term Kits Analyzed             | 47%         | 87%         | 76%         |
| <b>Total Kits:</b>                        | <b>363</b>  | <b>249</b>  | <b>283</b>  |

**HUMAN HEALTH HAZARDS AND SOLID WASTE PROGRAM**

Human Health Hazard/Public Health Nuisance Complaints

Wisconsin Statute 254 defines human health hazard as a substance, activity or condition that is known to have the potential to cause acute or chronic illness or death if exposure to the substance, activity or condition is not abated. Wisconsin Statute 251.05 requires the local Health Department to investigate and abate human health hazards. Additionally, Eau Claire County Ordinance s. 8.12.075 and City of Eau Claire Ordinance chapter 9.36 and s. 8.32.230 outline local guidelines for the prevention and regulation of human health hazards and public nuisances. Several of these situations also align with the growing number of human services referral, hoarding, and dangerous living condition investigations reported in the Housing section of this report.

Solid Waste

The Health Department is responsible for the enforcement of city and county ordinances relating to proper storage, collection and disposal of solid wastes. The below table (Solid Waste Activities) summarizes the solid waste complaints received and investigated. Substantiated complaints relating to improper storage, collection or disposal of refuse on private and public property are issued orders and are followed up with enforcement actions to achieve compliance.

Garbage Truck Licensing and Inspection

All garbage trucks that operate in the city of Eau Claire are licensed. An Environmental Health Specialist conducts annual inspections on each truck to ensure they are up to code.

| <b>Solid Waste Inspections</b>          |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Garbage Truck Haulers                   | 7           | 7           | 7           |
| Garbage Trucks (licensed)               | 99          | 94          | 97          |
| Garbage Truck Inspections/Reinspections | 99          | 94          | 96          |
| Garbage Truck Investigations            | 2           | 0           | 2           |
| Solid Waste Inspections/Investigations  | 203         | 195         | 285         |
| Solid Waste Reinspections               | 245         | 243         | 214         |
| Landfill Inspections                    | 4           | 4           | 4           |
| <b>Total Inspections (all types):</b>   | <b>553</b>  | <b>536</b>  | <b>601</b>  |

Seven-Mile Creek Landfill

The Health Department holds a seat on the Seven-Mile Landfill Standing Committee which meets quarterly to review, discuss and monitor the construction and operation of the facility. An Environmental Health Specialist conducts quarterly inspections and a report is provided to and discussed at the committee meetings.

### University Move-Out Events

The “Pack It up, Pass It On” student move out event was developed to deal with the large amount of refuse left curbside by college students during the spring move out. The event brings together charitable organizations and a garbage company in one convenient location for students. The two charitable organizations are the Family Promise of the Chippewa Valley and Hope Gospel Mission. The two organizations collected 4.5 truckloads of usable items in 2018. We also partner with Boxx Sanitation to collect garbage and items that cannot be donated at the event. In 2018, they collected 12.64 tons of garbage that did not have to be picked up at the curb.

## IMMUNIZATION PROGRAM

### NUMBER IMMUNIZED AT HEALTH DEPARTMENT CLINICS BY LOCATION January through December 2018

| Eau Claire Health Dept. Clinics | Augusta | Special Clinics (Adolescent Clinics) | Chippewa Valley Free Clinic | Total       |
|---------------------------------|---------|--------------------------------------|-----------------------------|-------------|
| 315                             | 265     | 834                                  | 63                          | <b>1477</b> |

### DOSES OF VACCINE ADMINISTERED IN CLINICS: 2018

| Vaccine  | Total Doses               |
|--|---------------------------|
| DTaP = Diphtheria, Tetanus, Acellular, Pertussis (Whooping Cough)                                      | 92                        |
| DTaP/Polio/HB = Combined Diphtheria, Tetanus, Acellular Pertussis, Polio, Hepatitis B                  | 20                        |
| DTaP/Hib/Polio=Combined Diphtheria, Tetanus, Acellular Pertussis, Haemophilus, Influenza type B, Polio | 65                        |
| DTap/Polio = Combined Diphtheria, Tetanus, Acellular Pertussis, Polio                                  | 24                        |
| HA = Hepatitis A   | 40                        |
| HB = Hepatitis B   | Total 40 (25 by contract) |
| Hep A/Hep B = Hepatitis A /and Hepatitis B   | 0                         |
| Hib = Haemophilus influenza type B   | 25                        |
| HPV = Human papillomavirus   | 48                        |
| Influenza Vaccine  | 983                       |
| IPV = Poliomyelitis (Inactivated Polio Vaccine)  | 13                        |
| MCV <sub>4</sub> = Meningococcal Conjugate Vaccine   | 31                        |
| MMR = Measles, Mumps, Rubella (German Measles)   | 79                        |
| MenB = Meningococcal Group B   | 7                         |
| PCV <sub>13</sub> = Pneumococcal Conjugate Vaccine   | 90                        |
| Pneumonia (PPSV23) = Pneumococcal Polysaccharide Vaccine   | 11                        |
| Rota Teq = Rotavirus Vaccine   | 16                        |
| Td = Tetanus, Diphtheria (adult)   | 119                       |
| Tdap = Combined Tetanus, Diphtheria and Acellular Pertussis  | 185                       |
| Varicella = Chicken Pox  | 70                        |
| <b>Total</b>   | <b>1962</b>               |

The number of doses exceeds the number of attendees because some receive more than one dose.

### Chippewa Valley Free Clinic Satellite Adult Immunization Clinic

To increase adult immunization rates, the nursing staff supervises operation of a satellite adult immunization program at the Chippewa Valley Free Clinic. In 2018, the clinic administered 63 vaccinations to 48 adults and children who would not otherwise have had access to immunization.

### Influenza Immunizations

The 2018 quadrivalent vaccine strains administered were A/Michigan/45//2015 (H1N1) pdm09-like, A/Hong Kong/4801/2014 (H3N2)-like virus, B/Brisbane/60/2008-like (Victoria lineage), B/Phuket/3073/2013-like (Yamagata lineage). A table of the “2018 Influenza Immunization Clinics” follows:

| <b>Clinic Location</b>                 | <b>Total Immunizations</b> |
|--|----------------------------|
| Juvenile Detention Center              | 1                          |
| Chippewa Valley Free Clinic            | 29                         |
| Augusta Senior Ctr.                    | 33                         |
| Fairchild                              | 5                          |
| School Clinics                         | 658                        |
| Indoor Sports Center                   | 176                        |
| Health Department Immunization Clinics | 88                         |
| Homebound                              | 0                          |
| <b>TOTAL ADMINISTERED</b>              | <b>990</b>                 |

The Health Department again also facilitated the work of local health care providers on the “Get the Shot” committee, coordinating influenza immunization efforts in the community.

School Immunizations

**SUMMARY OF IMMUNIZATION STATUS OF KINDERGARTEN CHILDREN  
BY SCHOOL AS REPORTED BY THE SCHOOL PRINCIPAL, FALL 2018**

| School                   | Kindergarten<br>Enrollment | Immunizations<br>Complete # | Immunizations<br>Complete % | Immunizations |                    | Waiver | No<br>Record<br>On File |
|--------------------------|----------------------------|-----------------------------|-----------------------------|---------------|--------------------|--------|-------------------------|
|                          |                            |                             |                             | In<br>Process | Behind<br>Schedule |        |                         |
| Altoona                  | 115                        | 108                         | 94%                         | 0             | 0                  | 7      | 0                       |
| Augusta                  | 43                         | 42                          | 98%                         | 1             | 0                  | 0      | 0                       |
| Crestview<br>Academy     | 22                         | 16                          | 73%                         | 0             | 2                  | 4      | 0                       |
| Fall Creek               | 46                         | 39                          | 85%                         | 3             | 1                  | 3      | 0                       |
| Flynn                    | 59                         | 55                          | 93%                         | 0             | 0                  | 4      | 0                       |
| Immaculate<br>Conception | 39                         | 33                          | 85%                         | 1             | 0                  | 5      | 0                       |
| Lakeshore                | 78                         | 64                          | 82%                         | 0             | 0                  | 13     | 1                       |
| Locust Lane              | 46                         | 42                          | 91%                         | 0             | 0                  | 4      | 0                       |
| Longfellow               | 46                         | 37                          | 80%                         | 0             | 5                  | 2      | 2                       |
| Manz                     | 63                         | 55                          | 87%                         | 0             | 4                  | 2      | 2                       |
| Meadowview               | 66                         | 62                          | 94%                         | 0             | 0                  | 4      | 0                       |
| Messiah<br>Lutheran      | 12                         | 8                           | 67%                         | 0             | 0                  | 4      | 0                       |
| Montessori<br>Charter    | 47                         | 33                          | 70%                         | 0             | 1                  | 13     | 0                       |
| Northwoods               | 64                         | 59                          | 92%                         | 0             | 0                  | 5      | 0                       |
| Putnam Heights           | 75                         | 70                          | 93%                         | 0             | 1                  | 4      | 0                       |
| Robbins                  | 85                         | 78                          | 92%                         | 0             | 0                  | 7      | 0                       |
| Roosevelt                | 48                         | 46                          | 96%                         | 0             | 0                  | 2      | 0                       |
| St. James the<br>Greater | 15                         | 13                          | 87%                         | 0             | 0                  | 2      | 0                       |

| School                  | Kindergarten | Immunizations | Immunizations | Immunizations |    | Waiver | No Record |
|-------------------------|--------------|---------------|---------------|---------------|----|--------|-----------|
|                         |              |               |               |               |    |        |           |
| St. Mark's Lutheran     | 12           | 11            | 92%           | 0             | 0  | 1      | 0         |
| St. Mary's Grade School | 18           | 12            | 67%           | 0             | 0  | 6      | 0         |
| Sam Davey               | 57           | 57            | 100%          | 0             | 0  | 0      | 0         |
| Sherman                 | 80           | 66            | 83%           | 0             | 10 | 2      | 2         |
| <b>Total</b>            | 1136         | 1006          | 89%           | 5             | 24 | 94     | 7         |

### LEAD POISONING PREVENTION

The goal of the lead poisoning prevention program is to protect children in Eau Claire County from lead poisoning. This is accomplished by testing children served by WIC, conducting lead hazard assessments of homes where children with lead poisoning reside, and assuring that children with elevated blood lead levels receive ongoing medical follow-up and testing as recommended.

#### WIC Blood Lead Screening

Blood lead screening was offered to children at ages one and two years in the WIC Program. A total of 706 children received blood lead screening from their physician or the WIC Program. 461 (65%) of the screenings were completed in the WIC Program during 2018.

#### General Environmental Lead Investigations

Environmental Health Specialists receive special training and certification for lead investigation and enforcement. An X-ray Fluorescence (XRF) lead paint analyzer is used during the home evaluations to determine the presence and quantity of lead in a painted or varnished surface. Environmental health staff investigate and provide consultation and literature on how to safely eliminate lead hazards within or outside the home.

| XRF Lead Investigations |      |      |
|-------------------------|------|------|
| 2018                    | 2017 | 2016 |
| 6                       | 4    | 7    |

#### Elevated Blood-Lead Investigations

Public Health nurses provide case management and teaching to the families of children with elevated blood lead levels. In 2013, the Centers for Disease Control recommendation changed from 15 micrograms per deciliter to 5 micrograms per deciliter. Depending upon the findings of case management, children may be referred to Environmental Health staff for investigation and evaluation of the home environment. Lead abatement orders are issued during these investigations if significant lead hazards are identified.

| <b>Elevated Blood-Lead Investigations</b>            |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Public Health Nurse-Childhood Lead Cases             | 12          | 6           | 14          |
| Referrals to Environmental Health (Home Evaluations) | 6           | 5           | 7           |
| Lead Abatement Orders                                | 2           | 2           | 2           |

Environmental samples are also obtained to help determine the source of the lead in the children’s bodies. These environmental samples include paint chips, soil and surface wipes. In 2014, the department entered into an agreement to contract investigation services to Buffalo county.

| <b>Lead Samples Collected</b> |             |             |
|-------------------------------|-------------|-------------|
| <b>2018</b>                   | <b>2017</b> | <b>2016</b> |
| 20                            | 11          | 5           |

## MENTAL HEALTH

### Mental Health Matters

In July 2017, community partners in both Chippewa and Eau Claire counties received funding from the Advancing a Healthier Wisconsin Endowment for a local grant entitled *Mental Health Matters: Promoting Resilience for Chippewa Valley Youth*. The Health Department serves as the fiscal agent for this five-year grant that brings community partners together to move beyond single-focus interventions driven by individual agencies, to strategic transformation of policy and systems changes. The community coalition aims to both decrease rates of youth depression and increase resiliency. In doing so, they expect long-term decreases in adolescent substance abuse, reduced rates of self-harm and suicide, improved school attendance, and improved data regarding protective factors, such as social support for adolescents.

The specific goals of the grant are to:

1. Increase the capacity of the youth-serving workforce across sectors to build protective factors and resilience for Eau Claire and Chippewa county youth. In 2018, 373 youth-serving professionals from eight organizations participated in workshops focusing on Adverse Childhood Experiences (ACEs) and Resilience. 92% of attendees increased awareness of protective factors that build resilience and support youth mental health and 80% increased ideas for specific actions to take in their work to help youth build resilience.
2. Build staff skills to contribute to positive school climates and youth social-emotional skills. In 2018, 30 school staff participated in a six-session session course on mindfulness. Pre-post survey results showed 91% of staff agreed that mindfulness helped them cope with stressful situations. Staff reported positive coping and decreased stress for both themselves and their students. “I believe my mindfulness practice has impacted my students because it has made me not jump to conclusions and helped me think through situations more thoroughly for better outcomes.”

Create policy and change practice to improve youth mental health and resilience through use of a systematic, sustainable approach to data-driven decision-making. In 2018, plans were developed to partner with schools in Chippewa and Eau Claire counties to administer the Youth Risk Behavior Survey (YRBS).

## Suicide Prevention

- Served leadership roles in various community suicide prevention initiatives including Question Persuade Refer Training, Prevent Suicide Chippewa Valley and Suicide Death Review team.
- In 2016 the Eau Claire County Suicide Death Review Team was established to review suicide cases looking for ways to prevent these from occurring, make system changes, and collect local data. Members of the team consist of representatives from Health Department, county and state human services, city and county police, university suicidologist, county corporation counsel, medical examiner, crisis response unit, hospital behavioral health representatives, private behavioral health clinic, school district, veterans office, corrections and free clinic family practice physician. The team meets every quarterly.
- 1,132 people were trained in QPR, including 973 adolescents. Question, Persuade and Refer is an evidenced based suicide prevention training. QPR for adults was initiated county wide in 2015 by Mental Health Action Team. In 2016, because of DPH MCH funding, adolescent QPR was initiated.
- The Board of Health passed a National Suicide Prevention Awareness Month Proclamation Resolution which was acknowledged at City Council and County Board.
- The Health Department served on the Prevent Suicide Wisconsin Steering Committee. This team worked on updating the Healthy Wisconsin 2020 Suicide Prevention Strategy and reviewed information for the Wisconsin 2018 Burden of Suicide Report.

## **NURSE HOME VISITING SERVICES**

### Newborn Heart, Hearing and Blood Screening

A public health nurse continued newborn hearing and heart screening via blood oxygen sensor for newborns delivered at home and not otherwise screened, such as rural Amish. The instruments and training are provided by the Newborn Hearing Screening and the Wisconsin SHINE (Screening Hearts In NEwborns) projects of the Wisconsin Department of Health Services. 47 Newborn Hearing Screenings were completed, and 83 blood specimens were collected for newborn screening throughout the year. 100% of the specimens were received by the State Lab of Hygiene within the target 4 days after collection. These services meet an otherwise unmet need for families that lack other access to recommended newborn screening.

### Prenatal Care Coordination Benefit Services

The Health Department continues as a Medicaid-certified provider of the Prenatal Care Coordination benefit services. Through this benefit services are provided to pregnant women at high risk for adverse pregnancy outcomes and their newborns during the first two months of life. There are two programs that the Health Department offers that utilize this benefit, Healthy Beginnings+ and Nurse Family Partnership. Dietitians and nurses provided 308 risk assessments to determine program eligibility.

### Nurse-Family Partnership®

Nurse-Family Partnership®, a maternal and child health program, helps low-income, first-time moms with the support they need to become confident parents and strong women, and ultimately, give their babies the best possible start in life. Public health nurses are the backbone of Nurse-Family Partnership’s success. Because of their specialized knowledge, the nurses who deliver this program establish trusted relationships with young, at-risk mothers by providing home visits that are designed around three goals: a healthy pregnancy and delivery, baby’s good health and development, and the woman’s vision and goals for her future. We are in a consortium (Western Wisconsin Nurse-Family Partnership Consortium) which includes Chippewa, Dunn and Eau Claire Counties. Collaboration is an important part of the success of Nurse-Family Partnership in each of the counties. Women voluntarily enroll as early as possible and one of our trusted, respected, and compassionate public health nurses visits her from pregnancy until her baby turns 2-years old. Nurse-Family Partnership changes the lives of our most vulnerable citizens, and thereby creates a better, safer, and stronger community, not just for today but for generations to come.

In 2018, 3.8 public health nurses served 91 women and 72 babies in Eau Claire with more than 1,211 visits. On top of that, we enrolled our first multiparous women in the program, with the goal to replicate outcomes found with primiparous women.

Western Wisconsin Nurse-Family Partnership Consortium participated in Phase 1 of a mental health pilot, which provided access to new mental health provider tools to be used with clients.

- Breastfeeding initiation rate (EC & Chippewa): 89%
- Client Retention in pregnancy (EC & Chippewa): 78%
- Babies born at a Healthy weight (more than 2500grams/5.5#) (EC & Chippewa): 81%
- Age of clients served (EC & Chippewa): 68% range from 15-24 years

| <b>Race: (EC &amp; Chippewa)</b> | <b>2018</b> |
|----------------------------------|-------------|
| Black/African American           | 7%          |
| White                            | 79%         |
| American Indian/Alaska Native    | 0%          |
| Asian/Pacific Islander           | 5%          |
| Multiracial                      | 12%         |
| Declined/Missing Data            | 7%          |

| <b>Ethnicity: (EC &amp; Chippewa)</b> | <b>2018</b> |
|---------------------------------------|-------------|
| Non-Hispanic                          | 89%         |
| Hispanic                              | 9%          |
| Declined/Missing Data                 | 2%          |

Other opportunities with NFP arose in 2018. A Public Health Nurse is a member of the Nurse-Family Partnership Innovation Action Committee and provides input to this national committee around improving and innovating the Nurse-Family Partnership program. A nurse home visitor and one of her families were featured in an outreach video for the Children’s Museum highlighting their partnership. We also worked with our AmeriCorps member to film a Nurse-Family Partnership client recruitment video to be shown to eligible pregnant women in the WIC clinic.



### My Baby and Me Program

The public health nursing staff participates in My Baby and Me program, which is a program offered through the Wisconsin Women's Health Foundation. Through My Baby and Me, 22 women enrolled in Prenatal Care Coordination/Nurse-Family Partnership were screened for alcohol use during pregnancy. Of those 22 clients, 5 clients were referred to My Baby and Me and received individual counseling sessions, support, and resources in order to remain alcohol-free throughout their pregnancy.

### **PRIVATE ONSITE WASTEWATER DISPOSAL PROGRAM**

A POWTS is also known as a sanitary or septic system. Its function is to collect household wastewater in a septic tank where biological processes digest solids and physical processes remove fats, oils, greases and indigestible solids. Effluent (wastewater) exits the tank through a filter that removes suspended solids to an absorption system where it is discharged to the soil where microorganisms are removed and the clarified effluent percolates back into the groundwater. Some properties lack the necessary physical characteristics to allow for this type of system, therefore, on a case-by-case basis, are approved to have a holding tank installed.

The purpose of the private onsite wastewater disposal program is to assure the proper treatment and disposal of wastewater from residences or buildings that require private onsite waste disposal and to prevent human health hazards, water pollution, drinking water contamination and the spread of communicable diseases.

Program staff administer this portion of the County Sanitary Code by reviewing plans and issuing permits for construction of private onsite wastewater and treatment systems (POWTS), conducting inspections for all newly installed POWTS, enforcing corrective action at failing systems, reviewing Wisconsin Fund applications from county residents for state funding to replace their failing sewage systems, as well as administering and enforcing state required maintenance program for all POWTS installed in Eau Claire County and/or within the city limits of Eau Claire.

### Construction of New/Replacement Systems

The Eau Claire County Sanitary Ordinance designates that the Health Department review "Soil and Site Evaluation" reports, plans for proposed private on-site wastewater treatment systems (POWTS) and issue permits for POWTS construction. Inspection and approval by the Health Department is required prior to backfilling or use. The Health Department applied for and received approval to review plans for mounds, at-grade and in-ground pressure sewage systems in 2001. Previously the plans for these systems had to be submitted to the State Department of Commerce for review. As an agent for the Department of Commerce, the Health Department can provide quick service for the public.

### Wisconsin Fund

Eau Claire County began participating in the Wisconsin Fund Program in January of 1991. This program, which is funded by the State, provides grant dollars to repair failing sanitary systems. The objective of the program is to protect surface water and groundwater from sewage waste contamination.

| <b>Wisconsin Fund</b>                     |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Applications Processed                    | 1           | 2           | 4           |
| Yearly Grant Dollar Allotment             | \$7,000     | \$12,200    | \$11,136    |
| Total Systems Repaired (Since 1991)       | 519         | 518         | 516         |
| Total Grant Dollars Allotted (Since 1991) | \$1,615,503 | \$1,601,503 | \$1,589,303 |

Audits/Evaluations

An annual audit of the POWTS program was conducted to check for compliance with the provisions of Wisconsin Administrative Code SPS 383, regulating POWTS design, construction and maintenance. The audit critiqued administrative procedures, sanitary permit data, POWTS maintenance and permit application reviews. The audit concluded that the program complied with statutory requirements.

| <b>Activity Summary – On-Site Waste Disposal Program</b>             |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| <b>Permits Issued and Plan Review</b>                                |             |             |             |
| Plan Approvals for At-Grades, Mounds, and In-Ground Pressure Systems | 95          | 87          | 82          |
| Commercial Conventional Plan Approvals                               | 2           | 3           | 2           |
| State Sanitary Permits Issued  | 199         | 217         | 190         |
| County Privy Permits Issued  | 4           | 6           | 2           |
| County Reconnection Permits Issued                                   | 12          | 8           | 10          |
| <b>System Installations</b>  |             |             |             |
| Non-Pressure Inground – New  | 42          | 67          | 54          |
| Non-Pressure Inground – Replacement                                  | 41          | 50          | 43          |
| At-Grades – New  | 15          | 15          | 10          |
| At-Grades – Replacement  | 1           | 5           | 4           |
| Mounds – New   | 55          | 45          | 39          |
| Mounds – Replacement   | 17          | 23          | 21          |
| In-Ground Pressure – Other New                                       | 0           | 0           | 0           |
| In-Ground Pressure – Replacement                                     | 1           | 2           | 0           |
| Holding Tanks – New  | 3           | 5           | 1           |
| Holding Tanks – Replacement  | 0           | 1           | 2           |
| <b>TOTAL SYSTEMS INSTALLED</b>                                       | <b>175</b>  | <b>191</b>  | <b>174</b>  |
| <b>Other POWTS Activities</b>  |             |             |             |
| POWTS Inspections  | 378         | 405         | 438         |
| Reconnection/Privy Inspections                                       | 6           | 4           | 10          |
| Soil On-site Inspections   | 32          | 40          | 50          |
| Sewage System Complaint Inspections                                  | 23          | 21          | 7           |
| Legal Orders   | 14          | 10          | 4           |
| Wisconsin Fund Grants  | 2           | 1           | 4           |
| Plat and Certified Survey Map Approvals                              | 46          | 57          | 44          |
| Consultations  | 1186        | 1280        | 1612        |

POWTS Maintenance Program

This program has been developed in order to maintain compliance with laws requiring the Health Department to obtain and keep records of the maintenance of different types of POWTS. The Wisconsin State Legislature adopted Act 347 on April 14, 2006. This legislation created s.145.20(5) stats., which establishes the requirements for a private sewage system maintenance program. Wisconsin Administrative Code SPS 383.52 applies the maintenance program to all private sewage systems. These state laws require the maintenance program to be administered by the local governmental unit responsible for the regulation of private sewage systems. This governmental unit is the Health Department in Eau Claire County. In 2018, the Eau Claire County Sanitary Code was revised to comply with new state laws regarding private onsite wastewater treatment systems (POWTS).

Section 8.12.220 of the Eau Claire County Health and Safety Ordinance requires that all POWTS be subject to a maintenance program. Wisconsin Administrative Code SPS 383 requires that the local ‘governmental’ unit, in this case the Health Department, notify all property owners of the POWTS maintenance requirements and follow up with non-compliance. The program is responsible for the implementation and monitoring of all POWTS installed in Eau Claire County as well as developing and/or providing maintenance and operation information for property owners. Funding for the program is generated through a special charge for the private treatment system, labeled SC Sewage, on the property tax bill. The creation of a new position whose responsibility includes the POWTS Maintenance Program has allowed allocation of more time to enforcement efforts.

| <b>POWTS Maintenance Program Activities</b>                        |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Program Consultations (In-Office)                            | 376         | 942         | 957         |
| Consultations/System Verifications (On-Site Visits)                | 1           | 34          | 29          |
| Compliance Investigations (On-Site Visits)                         | 379         | 355         | 351         |
| Batch Mailings (informational and maintenance notices)             | 26          | 26          | 26          |
| Total maintenance reminder/warning notices sent (All system types) | 5,070       | 4667        | 4721        |

Septic Tank Maintenance

SPS 383 requires homeowners to maintain their septic systems by regularly having maintenance performed. Every three years homeowners are sent a notice from the Health Department to achieve compliance. These notices are signed by a licensed Master Plumber or certified septic tank pumper and returned to the Health Department.

| <b>Septic Tanks</b> |             |     |             |     |             |     |
|---------------------|-------------|-----|-------------|-----|-------------|-----|
|                     | <b>2018</b> |     | <b>2017</b> |     | <b>2016</b> |     |
| Reports Due         | 3256        |     | 2813        |     | 2905        |     |
| Reports Filed (%)   | 2988        | 92% | 2594        | 92% | 2698        | 93% |

Holding Tank Maintenance

Eau Claire County Sanitary Ordinance 8.12.240 requires holding tank owners to submit quarterly pumping reports that specify the amounts pumped, the dates of pumping, the name of the pumper, and the disposal location.

| <b>Holding Tanks</b>           |             |     |             |     |             |     |
|--------------------------------|-------------|-----|-------------|-----|-------------|-----|
|                                | <b>2017</b> |     | <b>2017</b> |     | <b>2016</b> |     |
| Total Holding Tanks            | 293         |     | 291         |     | 288         |     |
| Compliant System Reporting (%) | 263         | 90% | 258         | 89% | 248         | 86% |

Pretreatment Unit Maintenance

Owners of sanitary systems that include a pretreatment component are required to provide annual reports of inspection by a licensed maintainer. Follow-up with non-reporting property owners is ongoing. Prior to 2008, notification and follow-up activity had been limited.

| <b>Pretreatment Units</b> |             |     |             |     |             |     |
|---------------------------|-------------|-----|-------------|-----|-------------|-----|
|                           | <b>2018</b> |     | <b>2017</b> |     | <b>2016</b> |     |
| Total Pretreatment Units  | 37          |     | 36          |     | 36          |     |
| Reports filed (%)         | 29          | 78% | 28          | 78% | 26          | 72% |

**PUBLIC FACILITIES REGULATION**

The State, County and City of Eau Claire have adopted rules which establish minimum sanitary standards for the operation of various facilities that serve the public. Below are the various types of facilities regulated and inspected under these City and County regulations:

Body Art Facilities:

Body art facilities located in both the city of Eau Claire as well as Eau Claire County are licensed and inspected by the Health Department. These facilities are inspected at least annually. The Department of Safety and Professional Services (DSPS) is the state agency that regulates body art facilities and the Health Department acts as an agent of DSPS to license the facilities in Eau Claire County. As an agent of DSPS, the department enforces state code SPS 221, as well as Chapter 6 of the Board of Health Regulations that address Body Art Establishments.

| <b>Body Art Facilities</b> |             |             |
|----------------------------|-------------|-------------|
| <b>2018</b>                | <b>2017</b> | <b>2016</b> |
| 24                         | 18          | 17          |

Body art establishments are required to use sterile equipment on each customer, and they are required to test their sterilization equipment at least monthly. An alternative to using equipment that must be sterilized is using all single use, disposable equipment. This requires a variance from DSPS but allows an establishment to be able to be 100% disposable and not to have to sterilize equipment between customers.

One option for testing sterilization equipment is using the local Health Department laboratory. Establishments can submit the spore tests to the lab for testing, verifying that their sterilization procedures are adequate. Private testing facilities may also be used, and records are verified at routine inspections.

| <b>Spore Ampule Tests</b> |       |       |             |       |       |             |       |       |
|---------------------------|-------|-------|-------------|-------|-------|-------------|-------|-------|
| <b>2018</b>               |       |       | <b>2017</b> |       |       | <b>2016</b> |       |       |
| Sat                       | Unsat | Total | Sat         | Unsat | Total | Sat         | Unsat | Total |
| 26                        | 0     | 26    | 37          | 0     | 37    | 57          | 0     | 57    |

Food Inspection Program

Our Department of Agriculture (DATCP) agent agreement requires annual inspection of all licensed establishments. Our inspection frequency is based on complexity of the establishment. Food establishments that do more complex processes like cooling or having a buffet are inspected more often. We do risk-based inspections that focuses on the violations that are most likely to make people sick and work with operators to correct issues. Reinspections are conducted if serious violations are not corrected at the initial inspection. Inspection fees or other enforcement tools may be used if violations remain uncorrected.

Education of food service staff is an important part of being in compliance with the Wisconsin Food Code. In most establishments it is required that one employee be a certified food manager and pass an approved test proving they are familiar with food safety rules. Education is a large part of our inspections because we want to make sure employees understand and are following food safety rules. We use demonstrations, handouts, and examples to train staff during inspections.

Restaurants

As an agent of DATCP, our department conducts inspections of licensed food establishments such as restaurants, temporary restaurants, and food trucks. Staff routinely inspect restaurants based on a set inspection frequency. Moderate and high complexity restaurants are inspected twice per year, while low complexity restaurants are inspected once. Inspections are also conducted of temporary restaurants operating at special events in Eau Claire County. Most special events happen in the summer and some examples are: Taste of the Valley, Country Jam, farmers markets, weekly music events, and many more. Temporary restaurants are inspected for compliance with the Wisconsin Food Code and an emphasis is placed on correcting violations onsite. Food trucks have become more popular in our area over the past few years. All food trucks that operate in Eau Claire County are inspected by the Health Department at least once per year. You might see a food truck at a special event like Food Truck Friday, set up outside of a local business, or parked on a street.

| <b>Restaurant/Tavern/Temporary Food/Vending Licenses and Inspections</b> |             |             |              |
|--|-------------|-------------|--------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b>  |
| Total Number of Licensed Restaurants/Taverns                             | 331         | 318         | 378          |
| Routine Inspections - Restaurant/Tavern                                  | 768         | 553         | 608          |
| Reinspections - Restaurant/Tavern  | 157         | 129         | 216          |
| Complaints - Restaurant/Tavern   | 41          | 49          | 52           |
| Temporary Restaurant Licenses Issued                                     | 42          | 88          | 65           |
| Temporary Restaurant Inspections (inc. reinspections)                    | 160         | 153         | 133          |
| <b>Total Number of Inspections (all types):</b>                          | <b>971</b>  | <b>934</b>  | <b>1,085</b> |
| <b>Total Number of Licensed Facilities (all types):</b>                  | <b>373</b>  | <b>406</b>  | <b>444</b>   |

#### Retail Food

As an agent of the Wisconsin Department of Agriculture, our department also conducts inspections of licensed retail food establishments such as grocery stores, convenience stores, coffee shops, etc. These establishments are inspected at least one time per year and more often if they are more complex such as a grocery store with a full deli. Reinspections are conducted if violations cannot be corrected onsite at the initial inspections. Our laboratory does specific sampling in deli and meat departments of retail food establishments. See “Laboratory Food and Beverage Sampling Program” for more information.

| <b>Retail Food Licenses and Inspections</b>     |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Active Licenses                 | 161         | 152         | 151         |
| Active Processing Licenses                      | 133         | 125         | 126         |
| Active Non-Processing Licenses                  | 28          | 27          | 25          |
| Routine Inspections                             | 130         | 123         | 169         |
| Reinspections & Second Reinspections            | 30          | 40          | 37          |
| Pre-inspections (New/change of owner)           | 21          | 27          | 13          |
| Retail Food Complaints                          | 7           | 11          | 64          |
| <b>Total Number of Inspections (all types):</b> | <b>181</b>  | <b>201</b>  | <b>270</b>  |

Foodborne Illness Risk Factors and Good Retail Practices Violations Summary

The Health Department strives for continued improvement of violations within licensed facilities. Unfortunately, restaurant and tavern staff turnover and management changes can result in a continuous cycle of repeat violations. Some activities our department has developed to reduce the number of priority violations include numerous educational and enforcement activities such as an annual newsletter, refrigeration temperature logs, risk control plans, enforcement letters, reinspection fee's, and citations.

| <b>Foodborne Illness Risk Factors Violations Summary</b> |                          |             |             |
|--|--------------------------|-------------|-------------|
|  | <b>Violation Numbers</b> |             |             |
| <b>Violation Category</b>                                | <b>2018</b>              | <b>2017</b> | <b>2016</b> |
| Demonstration of Knowledge                               | 69                       | 86          | 93          |
| Employee Health  | 1                        | 4           | 17          |
| Good Hygienic Practices                                  | 14                       | 10          | 22          |
| Preventing Contamination from Hands                      | 222                      | 192         | 285         |
| Approved Source  | 8                        | 16          | 20          |
| Protecting from Contamination                            | 249                      | 252         | 362         |
| Time/Temperature Control                                 | 371                      | 319         | 533         |
| Consumer Advisory  | 8                        | 17          | 16          |
| Highly Susceptible Populations                           | 0                        | 0           | 1           |
| Chemicals  | 68                       | 101         | 157         |
| Conformance with Approved Procedures                     | 14                       | 8           | 11          |
| <b>Total Violations:</b>                                 | 2118                     | 1913        | 2670        |
| <b>Total Inspections:</b>                                | 866                      | 768         | 956         |
| <b>Average Violations/Inspection:</b>                    | 2.45                     | 2.49        | 2.79        |

| <b>Good Retail Practices Violations Summary (does not include retail inspections)</b> |                          |             |             |
|---|--------------------------|-------------|-------------|
|   | <b>Violation Numbers</b> |             |             |
| <b>Violation Category</b>   | <b>2018</b>              | <b>2017</b> | <b>2016</b> |
| Safe Food and Water   | 0                        | 0           | 0           |
| Food Temperature Control  | 146                      | 176         | 772         |
| Food Protection   | 180                      | 155         | 429         |
| Proper Use of Utensils  | 37                       | 51          | 384         |
| Utensils and Equipment  | 440                      | 464         | 1643        |
| Physical Facilities   | 291                      | 405         | 2328        |
| <b>Total Violations:</b>  | 1094                     | 1251        | 5556        |

School Food Program

The Child Nutrition Reauthorization Act of 1998 requires annual mandatory health inspections of all school food service facilities participating in the National School Lunch and/or Breakfast Programs. Inspections are conducted at public and private elementary, middle and high schools in Eau Claire County twice a year. Private wells and septic systems are also inspected for rural schools.

| <b>School Food Service</b>                      |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Schools                         | 28          | 32          | 34          |
| Routine Inspections                             | 56          | 64          | 68          |
| Reinspections                                   | 0           | 0           | 2           |
| Investigations                                  | 0           | 0           | 0           |
| <b>Total Number of Inspections (all types):</b> | 56          | 64          | 70          |



### Laboratory Food and Beverage Sampling Program

Food samples and food preparation surface swabs are periodically collected from food/beverage service establishments within the City of Eau Claire and the county for laboratory analysis using standard plate count (SPC) and coliform testing. The results are used to help identify possible sanitation deficiencies in these establishments. If results indicate sanitation deficiencies, an Environmental Health Specialist works with the establishment and the operators to identify problems and to correct any deficiencies.

Bacteria standards have been adopted as part of state and local regulations for ice cream products, milk products, ground meat and ice. These products are sampled and tested on a periodic basis to assess compliance with these standards. Failure to meet the bacteria standards can result in an order from the Health Department that requires sale of the product to be discontinued. Establishments with deficiencies receive evaluations and recommendations by Health Department environmental health specialists regarding storage, handling, temperature maintenance, cleaning, sanitizing and rotation of products exceeding bacteria standards. Bacteria standards have not been adopted for restaurant foods, cold cuts, sandwiches, deli products, sodas or food/preparation surface swabs. Bacteria counts for these products are used as a guideline to indicate possible sanitary deficiencies. Environmental health staff will conduct on-site evaluations where test results indicate sanitary deficiencies may exist.

In addition to sampling and analyzing food samples in our local certified public health laboratory, the department also collects retail food equipment swab samples under the DATCP Agent Agreement. These samples are shipped to the Bureau of Laboratory Services in Madison, Wisconsin and are routinely tested for the presence of *Listeria monocytogenes*.

| <b>Sample Type: Cold Cut, Retail Deli Foods and Sandwiches</b> |                        |                    |                             |
|--|------------------------|--------------------|-----------------------------|
| <b>Coliform Guideline (500 CFU)</b>                            |                        |                    |                             |
| <b>Year</b>  | <b>Total # Samples</b> | <b># Exceeding</b> | <b>% Exceeding Standard</b> |
| <b>2018</b>  | 18                     | 0                  | 0.00%                       |
| <b>2017</b>  | 4                      | 0                  | 0.00%                       |
| <b>2016</b>  | 35                     | 1                  | 2.86%                       |

| <b>Sample Type: Hamburger Samples</b> |                                     |                |                      |                                      |             |                         |
|---------------------------------------|-------------------------------------|----------------|----------------------|--------------------------------------|-------------|-------------------------|
|                                       | <b>SPC Standard (4,000,000 CFU)</b> |                |                      | <b>Coliform Standard (2,000 CFU)</b> |             |                         |
| <b>Year</b>                           | Total #<br>Samples                  | #<br>Exceeding | % Exceeding Standard | Total #<br>Samples                   | # Exceeding | % Exceeding<br>Standard |
| <b>2018</b>                           | 13                                  | 0              | 0.00%                | 13                                   | 1           | 7.69%                   |
| <b>2017</b>                           | 16                                  | 2              | 12.50%               | 16                                   | 3           | 18.75%                  |
| <b>2016</b>                           | 31                                  | 2              | 6.45%                | 31                                   | 4           | 12.90%                  |

| <b>Sample Type: Food/Preparation Surface Swabs</b> |                                |                |                      |                                    |             |                         |
|--|--------------------------------|----------------|----------------------|------------------------------------|-------------|-------------------------|
|  | <b>SPC Guideline (100 CFU)</b> |                |                      | <b>Coliform Guideline (10 CFU)</b> |             |                         |
| <b>Year</b>  | Total #<br>Samples             | #<br>Exceeding | % Exceeding Standard | Total #<br>Samples                 | # Exceeding | % Exceeding<br>Standard |
| <b>2018</b>  | 663                            | 90             | 13.57%               | 663                                | 26          | 3.92%                   |
| <b>2017</b>  | 597                            | 160            | 26.81%               | 589                                | 46          | 7.81%                   |
| <b>2016</b>  | 399                            | 78             | 19.55%               | 387                                | 21          | 5.43%                   |

| <b>Sample Type: Milk Dispensers</b> |                                  |                |                      |                                   |             |                         |
|-------------------------------------|----------------------------------|----------------|----------------------|-----------------------------------|-------------|-------------------------|
|                                     | <b>SPC Standard (20,000 CFU)</b> |                |                      | <b>Coliform Standard (10 CFU)</b> |             |                         |
| <b>Year</b>                         | Total #<br>Samples               | #<br>Exceeding | % Exceeding Standard | Total #<br>Samples                | # Exceeding | % Exceeding<br>Standard |
| <b>2018</b>                         | 26                               | 2              | 7.69%                | 26                                | 1           | 3.84%                   |
| <b>2017</b>                         | 28                               | 1              | 3.58%                | 28                                | 1           | 3.58%                   |
| <b>2016</b>                         | 31                               | 1              | 3.23%                | 31                                | 1           | 3.23%                   |

**Sample Type: Frozen Yogurt, Soft Freeze, Ice Cream, and Premixes**

|             | <b>SPC Standard (100,000 CFU)</b> |             |                      | <b>Coliform Standard (50 CFU)</b> |             |                      |
|-------------|-----------------------------------|-------------|----------------------|-----------------------------------|-------------|----------------------|
| <b>Year</b> | Total # Samples                   | # Exceeding | % Exceeding Standard | Total # Samples                   | # Exceeding | % Exceeding Standard |
| <b>2018</b> | 387                               | 27          | 6.97%                | 466                               | 81          | 17.38%               |
| <b>2017</b> | 373                               | 25          | 6.71%                | 443                               | 40          | 9.03%                |
| <b>2016</b> | 418                               | 38          | 9.09%                | 518                               | 75          | 14.48%               |

**Sample Type: Pasteurized Milk (Retail Stores)**

|             | <b>SPC Standard (20,000 CFU)</b> |             |                      | <b>Coliform Standard (10 CFU)</b> |             |                      |
|-------------|----------------------------------|-------------|----------------------|-----------------------------------|-------------|----------------------|
| <b>Year</b> | Total # Samples                  | # Exceeding | % Exceeding Standard | Total # Samples                   | # Exceeding | % Exceeding Standard |
| <b>2018</b> | 163                              | 1           | 0.63%                | 163                               | 0           | 0.00%                |
| <b>2017</b> | 243                              | 14          | 5.77%                | 242                               | 4           | 1.66%                |
| <b>2016</b> | 174                              | 4           | 2.30%                | 174                               | 1           | 0.57%                |

**Sample Type: Retail Bottled Water**

|             |                 | <b>Colilert/Colisure (Present/Absent)</b> |           |
|-------------|-----------------|---|-----------|
| <b>Year</b> | Total # Samples | # Present                                 | % Present |
| <b>2018</b> | 9               | 0   | 0.00%     |
| <b>2017</b> | 7               | 0   | 0.00%     |
| <b>2016</b> | 6               | 0   | 0.00%     |

| <b>Sample Type: Cottage Cheese, Dips, Sour Cream<br/>(Cultured)</b> |                            |                                   |                             |
|---|----------------------------|-----------------------------------|-----------------------------|
|   |                            | <b>Coliform Standard (10 CFU)</b> |                             |
| <b>Year</b>   | <b>Total #<br/>Samples</b> | <b>#<br/>Exceeding</b>            | <b>% Exceeding Standard</b> |
| <b>2018</b>   | 8                          | 0                                 | 0.00%                       |
| <b>2017</b>   | 1                          | 0                                 | 0.00%                       |
| <b>2016</b>   | 16                         | 0                                 | 0.00%                       |

*\*Note:* The percent of samples exceeding bacteria standards or guidelines in the following tables can be biased to a higher percent by the number of repeat samples tested to achieve correction of a specific problem. All samples are measured in colony-forming units (CFU).

Lodging

As an agent of the state (Department of Agriculture, Trade, and Consumer Protection), the Health Department licenses and inspects all lodging facilities in Eau Claire County. Types of lodging facilities include hotels, motels, tourist rooming houses, and bed and breakfast establishments. The Health Department enforces rules and regulations set forth by ATCP 72 and 73, as well as Board of Health Chapter 2. Lodging facilities are inspected at least annually for general safety and sanitation, as well as for any additional licensable activities that may occur there, such as food service and swimming pools.

| <b>Lodging</b>                          |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Licensed Establishments | 55          | 54          | 48          |
| Routine Inspections/Preinspections      | 52          | 43          | 55          |
| Reinspections                           | 9           | 11          | 21          |
| Complaints                              | 8           | 10          | 8           |
| Consultations                           | 3           | 20          | 22          |
| Total Inspections (includes all types): | 69          | 64          | 84          |

### Parks and Campgrounds

Campgrounds and recreational and educational camps in Eau Claire County are licensed and inspected by the Health Department. All public parks, campgrounds, beaches and recreational areas are inspected before the season gets underway. The department also licenses and inspects special event campgrounds. Water samples are collected from wells at all public parks and campgrounds and tested in the Health Department Laboratory for bacteria and nitrates.

| <b>Campgrounds and Recreational Camps</b>      |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Campgrounds                    | 21          | 13          | 13          |
| Total Number of Educational Camps              | 2           | 2           | 2           |
| Special Event Campground Inspections           | 7           | 5           | 7           |
| Routine Inspections                            | 23          | 18          | 16          |
| Reinspections                                  | 0           | 1           | 1           |
| Investigations                                 | 0           | 1           | 0           |
| Consultations                                  | 12          | 8           | 11          |
| <b>Total Inspections (includes all types):</b> | <b>30</b>   | <b>24</b>   | <b>24</b>   |

### Swimming Pools

Monthly water quality and cleanliness inspections were made at all swimming pools including public pools, schools, motels, private clubs, and apartment and condominium complexes. Inspections, reinspections and investigations are conducted with regard to pool equipment and any significant water quality problems.

| <b>Swimming Pools/Water Attractions</b>        |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Number of Licensed Features              | 60          | 57          | 56          |
| Routine Inspections                            | 57          | 56          | 65          |
| Reinspections                                  | 37          | 23          | 14          |
| Complaints                                     | 0           | 23          | 26          |
| Consultations                                  | 31          | 23          | 16          |
| <b>Total Inspections (includes all types):</b> | <b>94</b>   | <b>102</b>  | <b>105</b>  |

Beaches – Water Quality

Weekly water quality and cleanliness inspections are made at Big Falls, Lake Altoona, Riverview Park, Coon Fork, and Lake Eau Claire from May through August. Other popular swimming locations, such as beaches along the Eau Claire River and Half Moon Beach are also sampled on a weekly basis for *E. coli*, a species of bacteria that research suggests is a strong indicator of the risk for adverse health effects resulting from ingestion of water. A level of 235 *E. coli* bacteria warrants more frequent monitoring, whereas, beaches are officially closed whenever *E. coli* levels reach 1000 *E. coli* bacteria per 100 ml of water.

| <b>Beach Closures</b> |             |             |             |
|-----------------------|-------------|-------------|-------------|
|                       | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Big Falls             | 0           | 5           | 4           |
| Lake Altoona          | 3           | 3           | 4           |
| Riverview Park        | 0           | 3           | 0           |
| Half Moon Lake        | 2           | 4           | 1           |
| Coon Fork             | 1           | 2           | 0           |
| Lake Eau Claire       | 0           | 2           | 2           |
| <b>Total Closures</b> | <b>6</b>    | <b>19</b>   | <b>11</b>   |

In 2016, the Health Department began conducting surveillance for blue-green algal blooms as a component of the beach monitoring program. In 2018, and following refinement of protocols and procedure, the Department began issuing special advisories at beaches whenever *chlorophyll-a* levels reached a level that research has shown to correlate with a high risk for adverse health effects. In 2018, 5 unique advisories were issued at 3 locations along the Eau Claire River (3 times Lake Altoona, and once each at Lake Eau Claire, and Big Falls swimming area) for a total of 91 beach days. The shortest bloom occurred at Big Falls and lasted 3 days, while Lake Eau Claire had a bloom that lasted for 46 consecutive days.

Swimming Pools and Beach Laboratory Sampling

Eau Claire City and County whirlpools and therapy pools are sampled monthly. Beaches are sampled weekly during the summer months for water quality and cleanliness. The following table summarizes the recreational water samples analyzed by the laboratory for Eau Claire County. Additionally, samples are analyzed for beaches in Chippewa, and Clark Counties. Out-of-county data is contained in the “Certified Public Health Laboratory” section of this report.

| <b>Recreation Water Samples – Bacteriological Summary</b> |                            |             |             |             |
|---|----------------------------|-------------|-------------|-------------|
|   |                            | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Pools   | Pseudomonas Satisfactory   | 215         | 237         | 228         |
|   | Pseudomonas Unsatisfactory | 11          | 5           | 7           |
|   | %Unsatisfactory            | 5%          | 2%          | 3%          |
| Beaches   | E Coli Satisfactory        | 384         | 292         | 426         |
|   | E Coli Unsatisfactory      | 75          | 89          | 100         |
|   | % Unsatisfactory           | 16%         | 23%         | 19%         |

## **PUBLIC HEALTH NUTRITION PROGRAM**

### Healthy Food Marketing Collaborative

With leadership from a public health nutritionist and health educator, Eau Claire Healthy Communities partnered with neighboring Dunn and Chippewa counties (collectively known as the Chippewa Valley) on a tri-county coalition called the “Healthy Food Marketing Collaborative.” The group recognized the counties have obesity as a common health priority and residents frequently cross county borders to shop.

In 2018, the Healthy Food Marketing Collaborative received DHS Healthy Retail funding and partnered with 9 small stores located in areas of low access to healthy, affordable food. Partnering stores adopted high-level/best-practice strategies to increase sales of fruits and vegetables.

The Healthy Food Marketing Collaborative continued to support the FNV (fruit and vegetable) Wisconsin social marketing campaign. FNV targeted low-income millennials (ages 18-34) with messages to change attitudes towards healthy eating. FNV reached over 24,000 people in Eau Claire County through billboards, bus wraps, and social media messages. A public health nutritionist participated in presentations about the campaign and healthy retail initiatives to public health and nutrition professionals at two state conferences in 2018.

### healthTIDE

The Chippewa Valley was selected as a host community for a 2018 healthTIDE regional rally. In partnership with Eau Claire Healthy Communities, Eat Well Dunn County, and Challenge Chippewa coalitions, staff members coordinated a gathering of over 60 individuals from across the Chippewa Valley to network, learn, and build capacity to collectively improve healthy food environments, food systems and food access.

## **PUBLIC HEALTH EMERGENCY PREPAREDNESS**

The Health Department collaborated with a broad range of county and state partners to assure that Eau Claire is prepared to respond to public health emergencies. In 2018, federal public health emergency preparedness dollars supported emergency planning and exercising.

Accomplishments for 2018 included:

- Held five meetings of the Public Health Emergency Preparedness Committee for Eau Claire to plan for and respond to public health emergencies.
- Appointed as new member of the County Local Emergency Preparedness Committee.
- Partnered with Eau Claire County Emergency Management and UWEC to coordinate a mass clinic exercise with student nurses to increase future workforce preparedness with emergency preparedness and UWEC staff.
- Provided public health emergency response to a water main break emergency that caused sewage and water back up in approximately 60 homes in the City of Eau Claire.
- Followed up on 7 environmental and 19 communicable disease public health emergencies.
- Member and participant of the Northwest Wisconsin Healthcare Emergency Readiness Coalition, meetings and exercises.
- Exercised Eau Claire County’s Mass Clinic Plans by holding 8 community flu clinics, 6 at area schools and one at the Indoor Sports Center, one of our designated Point of Dispensing (POD) sites. A total of 834 flu shots were administered to adolescents and adults during this exercise.

## **QUALITY IMPROVEMENT**

In addition to implementing and assisting with internal QI projects, the QI team works with the Workforce Development team to provide training as needed to both the QI Core Team and other staff. To meet the need of additional QI training for all staff the team contracted with the Public Health Foundation to provide 2 half-day trainings for staff. Jack Moran from the Public Health Foundation was in Eau Claire for the training October 31<sup>st</sup>, 2018. Jack has 30 years of quality improvement expertise in developing quality improvement tools and training programs as well as implementing and evaluating quality improvement programs. One training session was around QI 101. The other focused on how to select strong AIM statements and how to support QI within the department. The team also worked to sustain efforts related to QI committee and instituting performance improvement across department.

## **RADIATION PROTECTION**

A Radiological Incident Response Plan has been developed by the State of Wisconsin to handle all radioactive emergencies at nuclear power plants in or near Wisconsin. The State of Wisconsin conducts the following activities: developing/conducting training statewide, local and utility emergency responders; procedure development; exercise scenario development; and participation in scheduled nuclear plant emergency preparedness exercises evaluated by the Federal Emergency Management Agency (FEMA). The state developed radiological emergency response teams statewide, consisting of field team members in various locations throughout Wisconsin.

The local radiological emergency response team consists of three Environmental Health Specialists. This team participated in a radiological response exercise at the Prairie Island Nuclear Power Plant in 2018. Wisconsin State Field Team Training took place on May 9-10, 2018 in River Falls, WI. This training maintains a statewide radiological field team presence and to exercise the State's radiological emergency response plan. Additionally, the Civil Support Team (CST), consisting of Army and Air National Guard personnel and area HazMat teams all train together at these exercises.

## **SAFE SLEEP**

- The Safe Sleep Program distributed 18 Portable PlayYards/Pack n'Plays™ to promote safe sleeping environments for families in Eau Claire County
- Safe Sleep –Created a video about traveling safely that combined safe sleep and car seat safety messaging. Continue to do regular social media outreach with safe sleep messaging. Generous Jurors grant was awarded to this program in 2018 which will be used to continue funding pack n plays and education for families in Eau Claire County.



|                              |
|------------------------------|
| <b>SCHOOL HEALTH PROGRAM</b> |
|------------------------------|

Public Health Nurses continued to provide public health services for students and staff in 38 public, private and parochial schools in Eau Claire County. Public health responsibilities include the following:

- Consultation, health counseling and referral for students in need of department services, including public health nursing home visiting and clinic services, Prenatal Care Coordination and WIC.
- Consultation about communicable disease and policy for excluding ill children.
- Surveillance of student and staff illness absentee rates and follow-up of rates outside normal threshold.
- Consultation regarding student immunizations/compliance with Wisconsin Student Immunization Law.
- Organize health screening activities, train volunteers and school staff to conduct hearing, vision screening programs; and partner with school nurses to provide follow-up on significant findings.
- Organize fluoride mouth rinse programs in 2 participating schools- Altoona and Augusta.
- Conduct population health initiatives in partnership with school nurses and staff to promote positive health impacts for school-aged children in Eau Claire County, such as QPR and Safe Dates.
- Conducted Influenza Clinics in 6 schools in Eau Claire County.

Vision Screening Program: 2017-18 School Year

Health Department and volunteers screened school children in kindergarten, second and fourth grades in Eau Claire county schools using Prevent Blindness guidelines. Children who did not pass the initial screening were rescreened. If they did not pass the second screening, children were referred to have their child's eyes examined by a doctor.

**School-Based Vision Screening: 2017-18**

| 2017-2018                                |       |
|--|-------|
| Total Enrolled in Grades Screened        | 3,053 |
| Total Number Screened                    | 2,957 |
| Total Number Rescreened                  | 170   |
| Total Number Referred for Eye Exam       | 137   |
| Total Number Obtaining Corrective Lenses | 65    |

Hearing Screening Program: 2017-18 School Year

Hearing screening was provided in Eau Claire city and county schools for children in kindergarten and first grade. The initial screening was done by UWEC Audiology students and volunteers recruited by the school health chairmen. Children with deviations from normal were retested by trained technicians. After the second testing, audiograms indicating apparent hearing problems were evaluated and recommendations were made for further testing or medical evaluation. Children needing a medical examination were referred to their primary physician.

**Hearing Screening**

| 2017-2018  |       |
|--|-------|
| Total Enrolled in Grades Screened                                | 1,941 |
| Number of Children Screened, Includes New Students in all Grades | 1,866 |
| Number Rescreened by Technician                                  | 353   |
| Number Referred for Further Evaluation                           | 33    |
| Treatment Recommended  | 13    |

Fluoride Mouthrinse Program

Augusta and Altoona public schools continued to participate in the fluoride mouth rinse program this year. The purpose of the program is to reduce dental caries by topical application of fluoride. The Health Department provides the fluoride and other supplies funded by a grant from the Division of Public Health. School personnel and parent volunteers administer the mouth rinse in consultation with the public health nurse serving the school.

**Fluoride Mouth Rinse Program Participation: 2018**

| School                               | # of children                           |
|--------------------------------------|---|
| Augusta Elementary School            | 130 children in grade 1 through grade 5 |
| Pedersen Elementary School – Altoona | 344 children in grade 1 through grade 3 |

## STRATEGIC PLAN

In 2018, we started the year with 17 of the 120 activities in our 2017-2021 Strategic Plan completed. By the end of the year we had 38 activities completed. Additionally, we modified how we tracked progress on activities. The categories of “past due started” for the projects that are underway but past the listed completion date and “past due not started” for the projects that are past the completion date and not started. The additional categories will allow us to track progress on activities better.

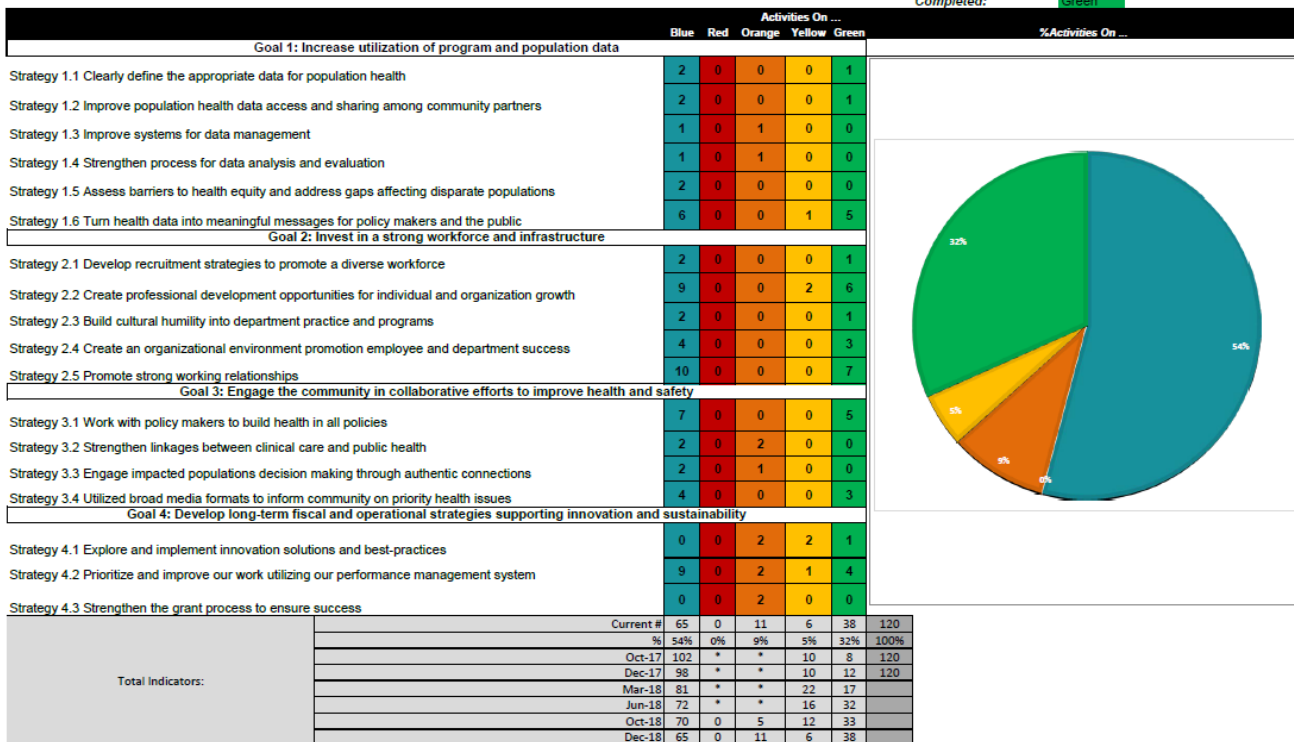


### Eau Claire City-County Health Department 2017-2021 Strategic Plan Dashboard

*Mission:* Keeping people in all Eau Claire City/County communities safe and healthy

*Dept Director:* Lieske Giese  
*Report Date:* Monday, December 3, 2018

*Upcoming:* Blue  
*Past Due Not Started:* Red  
*Past Due Started:* Orange  
*In-Process:* Yellow  
*Completed:* Green



Special thanks to Columbus Ohio Public Health for the original creation of this tool and to Wood County Health Department

## VECTOR CONTROL PROGRAM

The goal of the vector control program is to assure that the public is protected from the spread of vector-borne diseases and assure that rabies does not occur in humans, dogs, cats or ferrets within Eau Claire County. This is accomplished by providing consultation and information to the public on eliminating or controlling rodents, insects and other animals capable of causing or transmitting disease to humans. The Health Department partners with the Eau Claire City Police Department and County Humane Association to enforce city and county regulations on reported animal bites and pet quarantines. Advise the public and health care clinicians on appropriate measures to take when an individual is bitten by a domestic pet or a wild animal, and the appropriate preventive measures when following up on potential rabies cases. In cooperation with Eau Claire County veterinarians, conduct countywide rabies vaccination clinics for dogs, cats and ferrets every other year.

### West Nile Virus Surveillance

Mosquito control is an important and basic public health function. The rapid spread of West Nile Virus (WNV) across the United States in the last ten years demonstrates the continuing need for mosquito control activities. Standing water is the primary source for breeding mosquitoes, specifically the *culex* species which is most likely to transmit WNV to humans. The Eau Claire City-County Health Department has worked on various educational, surveillance and control activities to help control the spread of WNV.

Surveillance/Investigation – Environmental Health staff investigate complaints regarding mosquito-breeding areas or other high-risk locations and annually deploy and process traps within the City of Eau Claire to monitor the distribution of *culex sp.* and other species within the city.

| <b>Mosquito Traps Deployed</b> |             |             |
|--------------------------------|-------------|-------------|
| <b>2018</b>                    | <b>2017</b> | <b>2016</b> |
| 40                             | 13          | 65          |

Testing – Eau Claire County and statewide surveillance activities begin in May of each year. Each county is allowed to ship select birds for testing to the USDA Wildlife Service. If a positive bird is identified, the county must discontinue shipping. A press release is issued to educate the public.

### Bed Bugs

The Health Department responds to bed bug infestation complaints in private homes, rentals, and public establishments. Even though bed bugs are not known to transmit disease, they are considered a pest of public health significance. The bites of bed bugs can cause severe allergic reactions, as with any other type of sensitivity to bug bites, as well as emotional distress to affected persons. Bed bugs are difficult to control due to their habits and resistance to pesticides. Therefore, when Health Department staff encounter an infestation, the services of a professional pest control operator are strongly recommended, along with other advice regarding prevention and control measures. There is no official tracking or reporting of infestations, but anecdotal evidence indicates the number of infestations is increasing and the State Health Department expects this trend to continue.

### Tick Surveillance

In 2018, 83 sampling events were conducted for deer ticks at urban & rural parks. Each collected deer tick will be tested for the bacteria that causes Lyme disease. These data are utilized to monitor trends in infection rate and evaluate the area parks for their risk of human exposure to infected ticks.

| <b>Tick Dragging Events</b> |             |             |
|-----------------------------|-------------|-------------|
| <b>2018</b>                 | <b>2017</b> | <b>2016</b> |
| 83                          | 29          | 27          |

The Health Department also maintains a partnership with Beaver Creek Reserve and City Parks and Recreation to expand education and outreach concerning Lyme disease awareness and prevention. Additionally, staff assisted the University of Wisconsin-Madison's Midwest Center of Excellence for Vector-borne Disease with a new tick sampling and exposure research project that they initiated within the City of Eau Claire in 2018, mainly by organizing volunteers and through promotion at outreach events.

### Rabies Control

The Health Department is approved by the Department of Agriculture, Trade and Consumer Protection to administer a local rabies control program as required by Wis. Stats. 95.21(9)(b), and further outlined in Wis. Adm. Code ATCP 13.

Animal Bites/Exposures

People reported bitten by or exposed to animals and animals reported bitten or exposed to a wild animal:

| <b>Bites/ Exposures</b>                 |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Dog Bites                               | 86          | 93          | 85          |
| Cat Bites                               | 32          | 34          | 50          |
| Ferret Bites                            | 0           | 0           | 0           |
| Miscellaneous                           | 25          | 29          | 32          |
| <b>Total Reported Bites/ Exposures:</b> | 143         | 156         | 167         |

Rabies Post-exposure prophylaxis (PEP)

PEP is initiated when people are exposed to animals/specimens that were either:

- Positive for rabies
- Too decomposed for testing
- Not available for testing
- Had Equivocal results

| <b>Post-Exposure Prophylaxis Initiated</b> |             |             |             |             |
|--|-------------|-------------|-------------|-------------|
| <b>2018</b>                                | <b>2017</b> | <b>2016</b> | <b>2015</b> | <b>2014</b> |
| 8  | 17          | 19          | 32          | 23          |

Animal Rabies Immunization Information

During bite investigations, the current immunization status of the animal(s) involved in incidents are reviewed and recorded. These findings are used to help determine animal quarantine orders as well as animal and human treatment options.

| <b>Current Immunization Status – Current (animals involved in incidents)</b> |             |             |             |
|--|-------------|-------------|-------------|
|  | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Dogs   | 70%         | 73%         | 79%         |
| Cats   | 34%         | 21%         | 30%         |

### Quarantine Information

Those animals with current rabies vaccination and that do not exhibit symptoms of rabies may be quarantined (confined) at home, but are required to be examined by a licensed veterinarian within 24 hours of receiving a quarantine notice and again on the 10<sup>th</sup> day after the date of the bite. A cooperative effort exists between the Municipal Police, the County Humane Officers and the Department to carry out this program.

Domestic pets exposed to wild animals that tested positive for rabies or wild animals that are not available for testing require special quarantine.

Immunized pets are placed under a 60-day quarantine.

Unimmunized pets are either euthanized or put into a 180-day quarantine.

| <b>Quarantine Information</b>               |             |             |             |
|---|-------------|-------------|-------------|
|   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Veterinarian/Home Quarantines (Unimmunized) | 40          | 28          | 38          |
| Veterinarian/Home Quarantines (Immunized)   | 65          | 68          | 72          |

### Rabies Testing Information

The Wisconsin State Laboratory of Hygiene (WSLH) conducted testing for the rabies virus on animals/specimens shipped to the WSLH as follows:

| <b>Rabies Testing Information</b> |             |             |             |
|-----------------------------------|-------------|-------------|-------------|
|                                   | <b>2018</b> | <b>2017</b> | <b>2016</b> |
| Total Animals Sent to WSLH        | 33          | 42          | 56          |
| Total Testing Positive for Rabies | 2           | 0           | 1           |

## **WIC PROGRAM**

An Eau Claire City or County woman, infant or child who meets the income eligibility requirements of the WIC Program is seen at a WIC clinic in Eau Claire or Augusta. Applicants are screened to determine if they have a health or nutritional need which will qualify them for the program. Height, weight and hemoglobin are measured for each potential participant along with an assessment of dietary and other health risks.

WIC provides supplemental nutritious foods, nutrition education and counseling that are based on assessment findings as well as needs verbalized by participants. Along with nutrition education, WIC participants are able to purchase specific foods that are designed to supplement their diets with nutrients that benefit WIC's target population. Participants utilize the WIC EBT system to make their purchases. This is an electronic system that replaces paper food checks or vouchers with a card for food benefit issuance and redemption at authorized WIC grocery stores.

WIC foods include infant cereal, iron-fortified adult cereal, vitamin-C rich fruit or vegetable juice, eggs, milk, cheese, yogurt, peanut butter, dried and canned beans/peas, canned fish, soy based beverages, fruits and vegetables, baby foods, whole wheat bread and other whole grain options.

WIC recognizes and promotes breastfeeding as the optimal source of nutrition for infants. For women who do not fully breastfeed, WIC provides iron fortified infant formula. Special infant formulas and medical foods may be provided when prescribed by a physician for a specified medical condition. In 2018, WIC received state recognition for our services and infrastructure that support participation and successful outcomes. WIC also restructured the WIC Clinic flow to implement client “rooming in”, resulting in an increase in client satisfaction.

- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program) in Eau Claire County was funded to serve 1,712 participants per month during 2018. An average of 1,567 participants was served each month during 2018.
- The Eau Claire City-County WIC Program serves pregnant, breastfeeding and postpartum women, infants and children up to the age of five years. A total of 2,583 individuals participated in the WIC Program during this past year. Please see the following chart for WIC participation during 2018. The WIC Program serves as an adjunct to health care during critical times of growth and development by providing participants with nutritious supplemental foods, nutrition and health education, and referrals to area physicians, public health nurses and other community services.

### WIC PARTICIPATION DURING 2018

| Participant Type                               | Number | % of Caseload |
|--|--------|---------------|
| Pregnant Women                                 | 144    | 6%            |
| Breastfeeding Women                            | 220    | 9%            |
| Postpartum Women                               | 355    | 14%           |
| Infants  | 543    | 21%           |
| Children                                       |        |               |
| Age 1 – 355                                    |        |               |
| Age 2 – 306                                    |        |               |
| Age 3 – 303                                    |        |               |
| Age 4 – 457                                    | 1,321  | 50%           |
| Yearly Total = 2,583 unduplicated participants |        |               |

### WIC PARTICIPATION DURING 2018

| Race                              | % of Caseload |
|-----------------------------------|---------------|
| Asian                             | 16%           |
| Black                             | 9%            |
| American Indian/Alaskan Native    | 2%            |
| Native Hawaiian/Pacific Islander  | 1%            |
| White                             | 72%           |
| Total                             | 100%          |
| Ethnicity                         | % of Caseload |
| Hispanic or Latino Origin (a)     | 7%            |
| Not Hispanic or Latino Origin (a) | 93%           |
| Total                             | 100%          |

(a) Hispanics may be of any race, so also are included in applicable race categories.

### Farmers' Market Nutrition Program

The WIC Farmers' Market Nutrition Program continued in Eau Claire County during the summer of 2018. This program provides participants in the WIC Program with vouchers to purchase fresh fruits, vegetables and herbs at authorized Farmers' Markets and Farm Stands throughout Wisconsin. The goal of the WIC Farmers' Market Nutrition Program is to provide fresh, unprepared, locally grown fruits and vegetables to WIC participants and to expand the awareness, use of and sales at farmers' markets. Participants receive a list of locations, dates and times that local area Farmers' Markets and Farm Stands will be open. Participants receive a list of locations, dates and times that local area Farmers' Markets and Farm Stands will be open. Markets in Eau Claire County included Phoenix Park, Festival Foods and Gordy's County Market. Farm Stands in Eau Claire County included Hillview Farm, McIlquham Orchard, Avenue Orchard, and Fall Creek Farm Stand. Each WIC family received \$25.00 in market vouchers for the summer which they could use to purchase fruits, vegetables or herbs at authorized Farmers' Markets or Farm Stands. A total of 890 families received these coupons through the WIC Program during the summer of 2018.

An exciting accomplishment was the opening of an on-site farmers' market, located at an entrance of the Eau Claire County Government Center closest to our WIC clinic. The market was a pilot aimed at increasing accessibility to locally grown, fresh fruits and vegetables for families using the WIC Farmers' Market Nutrition Program, but also reached all government center employees and neighborhood residents.

### Farmers' Market Nutrition Education Project – Veggin' Out

The City-County Health Department's WIC nutrition program continued its successful Veggin' Out cooking demonstrations at area farmers' markets. Education targeted WIC families but was open to all community visitors to the farmers' markets located in Phoenix Park and at Festival Foods. In 2018, UW-Stout field experience students in the UW-Stout Dietetics program staffed the demonstration tables and offered healthy food samples, recipes and other nutrition education. The team of five students had over 3,700 contacts with community members, educating on choosing and storing fresh produce. This is planned to continue as an annual offering.

### Nutrition Education

WIC participants are certified for period of up to one year. Individual nutrition counseling is provided by a public health nutritionist who is a Registered Dietitian Nutritionist at each appointment. Nutrition counseling is based on the participant's needs and includes anticipatory counseling as needed. Participants are also offered and encouraged to engage in nutrition education opportunities during their certification period. Public health nutritionists offer a variety of nutrition education opportunities for learning throughout their certification period that meet their needs and interests. The types of opportunities offered in 2018 included:

- One-on-one sessions with a registered dietitian
- WICHealth.org: Self-paced online learning modules with a variety of infant, child, maternal, and family health and nutrition topics
- Head Start Family Cooking Events: A fun evening of reading and cooking offered to all families in our community
- Veggin' Out at the Farmers Market: Interactive cooking demonstrations where clients receive food samples, recipes, and tips for shopping at a farmers' market
- Breastfeeding classes

In partnership with the Eau Claire Area School District Head Start Program, public health dietitians and WIC screeners provided nutrition screening and education for over 124 low-income children enrolled in the Head Start program.



### Fit Families

Fit Families is a successful behavior change program targeting primarily low-income families of 2-4 year old children. Three registered dietitian nutritionists (RDNs) are 'Fit Families Coaches' and engaged in monthly coaching with 55 families to support them in making healthy changes in fruit/vegetable consumption, sweetened beverage consumption, screen time, and physical activity. In addition to individual approaches, Fit Families incorporates organizational, community, and public health approaches to create healthy supportive environments. A RDN/public health nutritionist working with Fit Families in Eau Claire integrates key messages with community partnerships and began developing a worksite wellness policy for ECCCHD.to help achieve healthy supportive environments.

### WIC Grocery Stores and Pharmacies

Eau Claire grocery stores and pharmacies continue to be an important partner in the WIC Program, as they redeem drafts and electronic benefits according to state and federal regulations. A total of \$1,186,779 was redeemed in Eau Claire County during 2018 with eWIC benefits. Please see the following chart for food dollars redeemed at area grocery stores and pharmacies. The WIC Program appreciates the continued support of the area vendors. The combination of nutritious supplemental foods and nutrition education within the WIC Program continues to have a positive impact on the health of children.

### **WIC FOOD DOLLARS REDEEMED AT VENDORS IN EAU CLAIRE COUNTY January 1 – December 31, 2018**

| <b>Vendor Name</b>                                     | <b>Dollars Redeemed</b> |
|--|-------------------------|
| Ameriental Food Store                                  | \$ 26,216               |
| Festival Foods, Birch Street                           | \$ 76,127               |
| Festival Foods, Mall Drive                             | \$ 93,778               |
| Festival Foods, N. Clairemont Ave                      | \$ 102,441              |
| Gordy's County Market, W. Clairemont Ave (Closed 2017) | \$ 11,169               |
| Great Lakes Fresh Market, Augusta                      | \$ 14,192               |
| Target   | \$ 64,160               |
| Walgreens – Clairemont Avenue                          | \$ 8,288                |
| Walgreens – Hastings Way                               | \$ 19,108               |
| Walmart  | \$481,416               |
| Woodman's Food Market                                  | \$289,884               |
| <b>TOTAL</b>   | <b>\$1,186,779</b>      |

## WIC Outreach

Health Educators continue to work with the WIC Director to promote the WIC Program throughout Eau Claire County. The following avenues were utilized in 2018 for WIC outreach:

- Distributed outreach materials to: Eau Claire Area School Districts and Early Learning Programs; healthcare systems; and to local businesses, non-profits and organizations located in Eau Claire, Altoona, Fall Creek, Augusta and Fairchild.
- Participated in community outreach events such as: Baby Bonanza at the L.E. Phillips Memorial Public Library, Breakfast in the Valley, Altoona Childhood Development Days and Phoenix Park Music Night.
- Coordinated print ads in EC4T Newsletter, Family Times, Chippewa Valley Family, Senior Review, City of Eau Claire Newsletter, Leader Telegram Supplement and Child Care Directory.
- Coordinated regular Facebook posts promoting the WIC program and breastfeeding.

## **WIC PROJECTS**

### Breastfeeding Education and Support

The American Academy of Pediatrics has identified breastfeeding as the ideal method of feeding and nurturing infants; and has recognized breastfeeding as primary in achieving optimal infant and child health, growth and development. The WIC Program continues to promote breastfeeding as best for baby, best for mom. In its sixth year, the Breastfeeding Peer Counselor program continues to reach women with relevant breastfeeding information and support. In 2018, 261 women had contact with the Peer Counselor. All of the registered dietitians have received certifications in breastfeeding (Certified Breastfeeding Educator, Certified Lactation Counselor, Certified Lactation Educator). All WIC staff (registered dietitians and support staff) are aware that they each have an important role in promoting, protecting and supporting breastfeeding.

#### “Feeding Your New Baby: A Very Personal Choice” Class

The WIC Breastfeeding Peer Counselor and Breastfeeding Coordinator developed this class for pregnant women to prepare for baby’s arrival. The class encourages breastfeeding through education and connection with resources for support. In 2018, 68 pregnant WIC participants plus their support people attended the class. Promotion efforts include flyers at medical clinics, mailed invitations to women due to deliver soon, telephone calls, referrals by staff working in the Nurse-Family Partnership Program, and notices published in the Family Times and Volume One. Class participants report increased knowledge and increased likelihood they will breastfeed following the class.

#### Coffective

Coffective is an initiative in which hospitals and the WIC Program work together to achieve the shared goal of helping every new mom and baby get off to a good start. Coffective aims to improve breastfeeding rates by achieving three main goals:

1. Preparing WIC mothers to receive evidence-based care by providing consistent messaging prenatally.
2. Implementing evidence-based practices in the hospital.
3. Increasing utilization of community support services such as WIC.

WIC and health care providers participating in Coffective use pictures as tools to help teach and prepare a mother and her family for baby’s arrival. Expecting families can download a Mobile App to help prepare for the hospital, build their care team and communicate their wishes. All education materials and training are based on the Baby Friendly Hospital Initiative. Coffective enhances continuity of care for WIC moms, provides on-going breastfeeding support, connects mothers to resources in the community, and helps each mom meet her own breastfeeding goals.

### Healthy Beginnings + (Prenatal Care Coordination)

Prenatal Care Coordination (PNCC) is a Medicaid and BadgerCare Plus benefit that helps pregnant women get the support and services they need to have a healthy baby. The purpose of the Medicaid Prenatal Care Coordination program is to provide access to medical, social, educational, and other services to pregnant women who are considered high risk for adverse pregnancy outcomes. The components of this benefit are outreach, assessment, care plan development, ongoing care coordination and monitoring, and health education and nutrition counseling. Some key outcome indicators include: Tobacco Exposure, Alcohol Use, Breastfeeding, Safe Infant Sleep Practices, Perinatal Depression, Family Planning, and Involved Father. All pregnant women certified for the WIC Program (who are eligible for Medical Assistance) are assessed for enrollment into the Healthy Beginnings (Prenatal Care Coordination Program). Based upon the needs identified, women are then offered the option to enrolling in this home visiting program. Women who enroll receive nursing services in the home and nutrition counseling in the WIC office. The public health dietitians completed a total of 302 risk assessments as well as 64 follow-up nutrition therapy sessions in 2018.

### Kids Ride Safe Project

The WIC program continued the Kids Ride Safe project for a ninth year. In 2018, 28 seats were distributed to families in need who would otherwise be unable to access car seats for the safety of their infants.

### First Breath Program

The public health nursing staff participates in the First Breath program, which is through the Wisconsin Women's Health Foundation. All WIC Dietitians were trained to offer and administer the First Breath program to WIC families with the overall goal of helping pregnant women, new moms and their families quit smoking. Staff enrolled 18 clients in the program, offering resources and support to help women remain tobacco-free during pregnancy.

### Oral Health Screenings

WIC staff partnered with NorthLakes Clinic to have a dental hygienist at WIC clinics doing oral health screenings, offering fluoride varnishes and assisting WIC families with establishing a dental home. In 2018, NorthLakes staff completed 373 of fluoride varnishes for WIC children and assisted 283 of WIC families in establishing a dental home.

**WISCONSIN WELL WOMEN PROGRAM (WWWP)**

The CDC, National Breast and Cervical Cancer Early Detection Program (NBCCEDP), provides funding for the WWWP. The Wisconsin Department of Health and Family Services, Division of Public Health administers the WWWP. As of July 1, 2015, the Eau Claire City-County Health Department has been contracted to be a multi-jurisdiction coordinating agency for 8 counties: Eau Claire, Chippewa, Dunn, Jackson, Pepin, Pierce, St. Croix and Trempealeau.

WWWP pays for specified screenings, diagnostic tests and patient education services related to some of the most common health concerns of women, breast and cervical cancer. Eligibility standards focus on women age 45-64 years, who have no or limited health insurance benefits and meet income guidelines (at or below 250% of federal poverty level). Women ages 35-44 years with breast symptoms may also qualify for breast screenings. The public health nurse coordinator provides public education, distributes outreach materials to medical providers and to women, works with providers to meet program guidelines and provides educational materials to women enrolled in the program. Case management services include helping women access providers, educating on services offered, monitoring normal/abnormal screening results and referring to community resources. Women diagnosed with breast or cervical cancer are assisted with obtaining treatment services. Fluctuating eligibility and covered services for the Affordable Care Act, Badger Care and private insurance continue to impact the number of women served by this program. Women express a great gratitude for the availability of these needed services.

**WWWP SCREENING ACTIVITY: 2017 - 18**

|  | 7/1/2017-6/30/2018<br>8 Covered Counties |
|--|--|
| Total Enrolled   | 32                                       |
| Total Cervical Cancer Screenings                       | 11                                       |
| Total Breast Cancer Screenings                         | 24                                       |
| Total Mammograms                                       | 24                                       |
| Total Mammograms aged 50-64 yrs.                       | 13                                       |
| Percentage of Mammograms aged 50-64 yrs.<br>(goal 75%) | 54%                                      |

**FINANCIAL SUMMARY REPORT**

**2018 HEALTH DEPARTMENT BUDGET (Unaudited)**

|  | <b>2017<br/>Budget</b> | <b>2017<br/>Actual</b> | <b>2018<br/>Budget</b> | <b>2018<br/>Actual</b> | <b>Percent<br/>Change</b> |
|--|------------------------|------------------------|------------------------|------------------------|---------------------------|
| <b>Expenses:</b>                         |                        |                        |                        |                        |                           |
| Personnel                                | 5,054,800              | 4,814,772              | 5,269,400              | 5,059,132              | 5.08%                     |
| Contractual Services                     | 519,900                | 506,353                | 571,500                | 535,205                | 5.70%                     |
| Utilities                                | 32,400                 | 37,036                 | 39,500                 | 37,387                 | 0.95%                     |
| Fixed Charges                            | 22,800                 | 15,148                 | -26,000                | 13,358                 | -11.82%                   |
| Supplies                                 | 255,700                | 251,727                | 265,400                | 237,178                | -5.78%                    |
| Other Payments                           | 0                      | 934                    | 6400                   | 2,250                  | 0.00%                     |
| WRS Loan                                 | 29,500                 | 29,503                 | 60,000                 | 28,725                 | -2.64%                    |
| Capital Purchases                        | 57,000                 | 55,342                 | 28,800                 | 175,788                | 217.64%                   |
| <b>Total Expenses</b>                    | <b>5,972,100</b>       | <b>5,710,815</b>       | <b>6,215,000</b>       | <b>6,089,023</b>       | <b>6.62%</b>              |
|  |                        |                        |                        |                        |                           |
| <b>Revenues:</b>                         |                        |                        |                        |                        |                           |
| City Taxes                               | 1,786,000              | 1,785,667              | 1,824,900              | 1,824,900              | 2.20%                     |
| County Taxes                             | 1,157,100              | 1,157,115              | 1,200,500              | 1,200,468              | 3.75%                     |
| Sewage System Maintenance Fees           | 93,700                 | 93,250                 | 95,000                 | 96,595                 | 3.59%                     |
| WRS Loan                                 | 29,500                 | 29,503                 | 28,800                 | 28,775                 | -2.47%                    |
| Intergovernmental- Grants                | 1,246,400              | 1,334,986              | 1,140,000              | 1,159,100              | -13.18%                   |
| License & Permits                        | 618,900                | 662,541                | 695,400                | 700,393                | 5.71%                     |
| Charges for Services                     | 153,400                | 129,317                | 265,000                | 194,039                | 50.05%                    |
| Charges for services - Intergovernmental | 306,600                | 330,119                | 306,000                | 297,651                | -9.84%                    |
| Miscellaneous                            | 488,300                | 478,666                | 370,700                | 394,867                | -17.51%                   |
| Other Finance Source – CDBG              | 92,200                 | 92,194                 | 97,100                 | 97,166                 | 5.39%                     |
| Other Budgeted Receipts – Fund Balance   | 0                      | -382,543               | 191,600                | 95,069                 | 124.85%                   |
| <b>Total Revenues</b>                    | <b>5,972,100</b>       | <b>5,710,815</b>       | <b>6,215,000</b>       | <b>6,089,023</b>       | <b>6.62%</b>              |
| Employees FTEs-Dept.                     | 37.53                  | 33.95                  | 36.58                  | 37.37                  | 10.07%                    |
| Employees FTEs-Grants                    | 21.74                  | 21.17                  | 21.03                  | 19.25                  | -9.07%                    |
| <b>Total</b>                             | <b>59.27</b>           | <b>55.12</b>           | <b>57.61</b>           | <b>56.62</b>           | <b>2.72%</b>              |

**PERFORMANCE MEASURES**

| <b>#1 HEALTHY HOMES AND PLACES</b>  |   | Budget<br>\$604,371     | Levy<br>\$318,455  |                    | FTEs<br>5.72       |                    |                    |
|---|---|-------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| <p>The Healthy Homes and Places Program is designed to create safe environments in our community where people can live, work, and play. This program consists of services that include inspections, complaint investigations, and outreach initiatives to respond to and reduce harm from risks ranging from lead, radon and mold to natural disasters and environmental emergencies. Place plays a vital role in our health.</p> |   |                         |                    |                    |                    |                    |                    |
| <b>OUTPUTS</b>  |   |                         |                    |                    |                    |                    |                    |
| <i>(YTD column = Jan-Jun results)</i>   | <b><u>2013</u></b>  | <b><u>2014</u></b>      | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |                    |
| # of radon consultations/calls  | 334   | 250                     | 214                | 293                | 354                | 112                |                    |
| # of housing consultations/calls  | 2306  | 1902                    | 1567               | 1335               | 1353               | 2325               |                    |
| # of Housing complaint inspections:   | 903   | 456                     | 619                | 522                | 276                | 283                |                    |
| # of health department initiated inspections:   | 377   | 279                     | 687                | 508                | 537                | 1,265              |                    |
| # of Mobile Home Park inspections:  | 33  | 17                      | 17                 | 28                 | 17                 | 19                 |                    |
| # of investigations/inspections/consults with body art facilities   | New measure 2014  | 63                      | 68                 | 52                 | 40                 | 41                 |                    |
| # of investigations/inspections/consults with campgrounds   | New measure 2014  | 45                      | 47                 | 47                 | 47                 | 45                 |                    |
| # of blood lead screening tests done  | 728   | 589                     | 612                | 490                | 505                | 461                |                    |
| # of radon test completed   | 151   | 150                     | 226                | 212                | 243                | 172                |                    |
| # of responses to public health threats (environmental)   | New measure 2016  | New measure 2016        | New measure 2016   | 9                  | 19                 | 7                  |                    |
| # of residences placarded as unfit for habitation   | 26  | 26                      | 20                 | 32                 | 24                 | 34                 |                    |
| # of press releases, print articles, interviews on Healthy Homes and Places   | New measure 2016  | New measure 2016        | New measure 2016   | 4                  | 3,6,15             | 8,6,8              |                    |
| # of Facebook posts on Healthy Homes and Places   | New measure 2016  | New measure 2016        | New measure 2016   | 36                 | 24                 | 18                 |                    |
| # of interdisciplinary meetings to resolve human health hazard  | 4   | 3                       | 3                  | 4                  | 13                 | 5                  |                    |
| <b><u>Performance Goal</u></b>  | <b><u>Outcome Measures</u></b>  | <b><u>Benchmark</u></b> | <b><u>2014</u></b> | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |
| Decrease injury/hospitalization related to environmental factors  | % of housing complaints investigated  | 100%                    | 100%               | 100%               | 100%               | 100%               | 100%               |
|   | % of children with >5 mcg/dl bl lead that was brought below 5 within 6 months | 100%                    | New measure 2016   | New measure 2016   | 0%                 | 80%                | 71%                |
|   | % of licensed facilities inspected  | 100%                    | 100%               | 100%               | 100%               | 100%               | 100%               |
|   | % of placarded occupied households are resolved                               | 75%                     | New measure 2016   | New measure 2016   | 19%                | 57%                | 56%                |

|  |      |                  |                  |      |      |      |
|--|------|------------------|------------------|------|------|------|
| % of total housing inspections with violations in 3 or less categories | 80%  | New measure 2016 | New measure 2016 | 68%  | 74%  | 80%  |
| % of unsafe radon test that are provided education                     | 100% | 100%             | 100%             | 100% | 100% | 100% |

|                               |                       |                       |  |               |  |  |
|-------------------------------|-----------------------|-----------------------|--|---------------|--|--|
| <b>#2 SAFE FOOD AND WATER</b> | Budget<br>\$1,206,926 | Levy<br>\$<br>453,954 |  | FTEs<br>11.33 |  |  |
|-------------------------------|-----------------------|-----------------------|--|---------------|--|--|

The Safe Food and Water program assures that residents and travelers will have their health protected when using recreational facilities and restaurants in our community. Services include investigating complaints, inspecting all facilities that provide food and water to the public, testing of private drinking water, and assisting the public in reducing risks of food and waterborne illness. This is important because safe food and water are integral to our health.

**OUTPUTS**

| <i>(YTD column = Jan-Jun results)</i>                                       | <u>2013</u>  | <u>2014</u>             | <u>2015</u>        | <u>2016</u>        | <u>2017</u>        | <u>2018</u>        |                    |
|---|--|-------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| # of Restaurant/Tavern inspections:   | 810  | 708                     | 948                | 1009               | 893                | 971                |                    |
| # of Retail Food inspections:   | 182  | 270                     | 319                | 270                | 256                | 288                |                    |
| # of School inspections:  | 67   | 68                      | 64                 | 70                 | 53                 | 56                 |                    |
| # food samples analyzed:  | New measure 2016   | New measure 2016        | New measure 2016   | 1299               | 2014               | 1366               |                    |
| # of Foodborne Illness Investigations:                                      | 12   | 9                       | 2                  | 20                 | 21                 | 15                 |                    |
| # of private onsite wastewater disposal inspections/consultations:          | 2321   | 1165                    | 2469               | 1612               | 2065               | 1821               |                    |
| # of water samples processed/analyzed                                       | 2290   | 1642                    | 3663               | 3344               | 3199               | 3267               |                    |
| # of recreational water (beaches) investigations/inspections/consultations  | 498  | 320                     | 436                | 526                | 292                | 469                |                    |
| # of Facebook posts on Safe Food and Water                                  | New measure 2016   | New measure 2016        | New measure 2016   | 49                 | 44                 | 22                 |                    |
| # of press releases, print articles, interviews on Safe Food and Water      | New measure 2016   | New measure 2016        | New measure 2016   | 7                  | 4,10,9             | 5,4,11             |                    |
| <b><u>Performance Goal</u></b>  | <b><u>Outcome Measures</u></b>   | <b><u>Benchmark</u></b> | <b><u>2014</u></b> | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |
| Decrease incidence of food and water borne disease outbreaks and fatalities | % of owners with unhealthy well samples results who receive education and technical assistance | 100%                    | 100%               | 100%               | 100%               | 100%               | 100%               |
|   | % of public wells with uncorrected deficiencies  | 0%                      | 0%                 | 0%                 | 0%                 | 0%                 | 0%                 |

|  |   |     |                  |                  |     |     |     |
|--|---|-----|------------------|------------------|-----|-----|-----|
|  | % of recreational water inspections with 2 or less violations         | 90% | New measure 2016 | New measure 2016 | 71% | 51% | 38% |
|  | 90% of CDC risk factor violations corrected at the time of inspection | 90% | New measure 2016 | New measure 2016 | 68% | 81% | 79% |

|  |                       |                      |  |               |  |  |
|--|-----------------------|----------------------|--|---------------|--|--|
| <b>#3 HEALTHY GROWTH AND DEVELOPMENT</b> | Budget<br>\$1,900,872 | Levy<br>\$ 1,218,629 |  | FTEs<br>20.96 |  |  |
|--|-----------------------|----------------------|--|---------------|--|--|

The Healthy Growth and Development program ensures that kids and families have the best health outcomes possible through policies and programs addressing reproductive, prenatal, and family health. Services include home visitation, family planning, WIC, school/community partner collaboration, and other programs. This work is important because healthy growth and development is the foundation for later academic achievement, economic productivity, and responsible citizenship.

**OUTPUTS**

| <i>(YTD column = Jan-Jun results)</i>  | <b>2013</b>                                  | <b>2014</b>      | <b>2015</b>      | <b>2016</b>      | <b>2017</b> | <b>2018</b> |             |
|--|--|------------------|------------------|------------------|-------------|-------------|-------------|
| # of clients\visits receiving reproductive health/contraception services:        | 938  | 891              | 992              | 936              | 636/1030    | 632/1026    |             |
| # of WIC clients   | 3419   | 3271             | 3114             | 2928             | 2727        | 2582        |             |
| # of NFP clients\visits  | New measure 2016                             | New measure 2016 | New measure 2016 | 30/243           | 63/722      | 161/1211    |             |
| # of MCH clients\visits  | 1712 visits                                  | 1882 visits      | 1373 visits      | 425/992          | 367/821     | 285/648     |             |
| # of Healthy Beginnings plus clients\visits                                      | 396/965                                      | 156/376          | 134/379          | 156/523          | 86/284      | 10/36       |             |
| # of pregnancy tests administered  | 263  | 188              | 171              | 155              | 214         | 147         |             |
| # of child vision/hearing screening completed                                    | 5937   | 6195             | 5892             | 4735             | 6011        | 4823        |             |
| # of adolescents trained in evidence based program                               | New measure 2016                             | New measure 2016 | New measure 2016 | 50               | 192         | 249         |             |
| # of people/agencies who received Safe Sleep training                            | New measure 2016                             | New measure 2016 | New measure 2016 | 17               | 48/2        | 18          |             |
| # of Facebook post on Healthy Growth and Development                             | New measure 2016                             | New measure 2016 | New measure 2016 | 86               | 82          | 46          |             |
| # of press releases, print article, interviews on Healthy Growth and Development | New measure 2016                             | New measure 2016 | New measure 2016 | 23               | 4,10,9      | 8,3,8       |             |
| # of collaborative community meetings on Healthy Growth and Development          | New measure 2016                             | New measure 2016 | New measure 2016 | 41               | 117         | 107         |             |
| <b>Performance Goal</b>  | <b>Outcome Measures</b>                      | <b>Benchmark</b> | <b>2014</b>      | <b>2015</b>      | <b>2016</b> | <b>2017</b> | <b>2018</b> |
| Decrease unplanned pregnancies   | % negative pregnancy tests who receive birth | 95%              | New measure 2016 | New measure 2016 | 65%         | 66.3%       | 58.9%       |



|   |  |     |                  |                  |     |       |       |
|---|--|-----|------------------|------------------|-----|-------|-------|
|   | control method   |     |                  |                  |     |       |       |
| Increase healthy birth outcomes                       | % of Women who had a positive pregnancy test in FPC referred to WIC/PNCC | 80% | New measure 2016 | New measure 2016 | 59% | 72.2% | 73.9% |
|   | %WIC clients enrolled in 1st trimester                                   | 39% | 38%              | 33%              | 33% | 30%   | 29%   |
| Increase early childhood health/healthy start to life | % of WIC breastfeeding incidence   | 73% | 77%              | 78%              | 79% | 79%   | 76%   |
|   | % of WIC clients received recommended nutrition education contact        | 60% | 45%              | 51%              | 57% | 63%   | 65%   |
|   | % of clients with medical home in first trimester                        | 83% | 79%              | 73%              | 83% | 80%   | 73%   |

|                                |                      |                    |  |              |  |  |
|--------------------------------|----------------------|--------------------|--|--------------|--|--|
| <b>#4 COMMUNICABLE DISEASE</b> | Budget<br>\$ 873,341 | Levy<br>\$ 345,542 |  | FTEs<br>8.17 |  |  |
|--------------------------------|----------------------|--------------------|--|--------------|--|--|

The Communicable Disease program is focused on preventing diseases that spread from person to person, animal to person, and environment to person. These services include community and healthcare provider education, preventive medicine distribution, vaccination, disease testing, environmental monitoring and disease outbreak investigation and prevention. This program is important in decreasing illness and death rates in our community.

| <b>OUTPUTS</b>   |                    |                    |                    |                    |                    |                    |
|--|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| <i>(YTD column = Jan-Jun results)</i>                          | <b><u>2013</u></b> | <b><u>2014</u></b> | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |
| # of animal bite reports received:                             | 192                | 166                | 156                | 167                | 156                | 143                |
| # of immunizations administered during the year:               | 887                | 1,556              | 1,466              | 1570               | 1523               | 1950               |
| # of seasonal flu shots administered during the year:          | 457                | 982                | 1,027              | 739                | 664                | 982                |
| # of outbreaks in nursing homes reported                       | New measure 2016   | New measure 2016   | New measure 2016   | 11                 | 10                 | 12                 |
| # of clients screened for sexually transmitted infection:      | 550                | 452                | 657                | 489                | 558                | 799                |
| # of newly diagnosed cases chlamydia                           | New measure 2016   | New measure 2016   | New measure 2016   | 512                | 507                | 513                |
| # of communicable disease reports                              | New measure 2016   | New measure 2016   | New measure 2016   | 935                | 1137               | 1389               |
| # of HIV Partner Service client referrals                      | New measure 2016   | New measure 2016   | New measure 2016   | 10                 | 17                 | 17                 |
| # of responses to public health threats (communicable disease) | New measure 2016   | New measure 2016   | New measure 2016   | 11                 | 29                 | 19                 |
| # of Facebook posts on communicable diseases                   | New measure 2016   | New measure 2016   | New measure 2016   | 46                 | 60                 | 36                 |

|   |   |                         |                    |                    |                    |                    |                    |
|---|---|-------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| # of press releases, print articles, interviews stories on communicable disease |   | New measure 2016        | New measure 2016   | New measure 2016   | 55                 | 12,22,31           | 16,13,20           |
| <b><u>Performance Goal</u></b>  | <b><u>Outcome Measures</u></b>  | <b><u>Benchmark</u></b> | <b><u>2014</u></b> | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |
| Decrease vaccine preventable diseases   | % of 2 year olds who received the recommended vaccinations  | 85%                     | 77%                | 79%                | 77%                | 77%                | 75%                |
|   | % of adolescents 11-26 who received the HPV vaccination   | 35%                     | New measure 2016   | New measure 2016   | 30%                | 36%                | 37%                |
|   | % of school age children fully immunized  | 95%                     | 92%                | 87%                | 92%                | 87%                | 87%                |
|   | % of those greater than 6 months old vaccinated for influenza   | 40%                     | New measure 2016   | New measure 2016   | 30%                | 29%                | 31%                |
| Decrease reportable communicable diseases                                       | % animal bites receiving follow up  | 100%                    | 100%               | 100%               | 100%               | 100%               | 100%               |
|   | % of communicable disease investigations completed  | 100%                    | 100%               | 100%               | 100%               | 100%               | 100%               |
|   | % staff trained in public health emergency Incident Command System  | 100%                    | New measure 2016   | New measure 2016   | 66%                | 63%                | 62%                |
| Decrease STIs and communicable diseases   | % of females aged 15 to 24 years who in the past 12 months tested positive for Chlamydia trachomatis infections | 7%                      | New measure 2017   | New measure 2017   | New measure 2017   | 1.20%              | 1.6%               |
|   | % STIs receiving treatment  | 98%                     | New measure 2016   | New measure 2016   | 100%               | 99%                | 99%                |

| <b>#5 CHRONIC DISEASE PREVENTION</b>   |   | Budget<br>\$ 422,236 | Levy<br>\$ 343,317 |                  | FTEs<br>5.08 |             |             |
|--|---|----------------------|--------------------|------------------|--------------|-------------|-------------|
| <p>The Chronic Disease Prevention Program consists of programs and policy work to prevent or reduce the effects of chronic diseases such as diabetes, heart disease, and lung cancer. These services include nutrition education and cancer screening. Additional work in this program includes policy and organizational changes to increase access to healthy foods and create a healthy built environment for all. This program is important because chronic disease is one of the leading causes of death in our community - chronic disease/obesity have been identified as a priority in the two most recent community health assessments.</p> |   |                      |                    |                  |              |             |             |
| <b>OUTPUTS</b>   |   |                      |                    |                  |              |             |             |
| <i>(YTD column = Jan-Jun results)</i>  |   | <b>2013</b>          | <b>2014</b>        | <b>2015</b>      | <b>2016</b>  | <b>2017</b> | <b>2018</b> |
| # of participants in Living Well with Chronic Disease program  |   | New measure 2016     | New measure 2016   | New measure 2016 | 19           | 17          | 9           |
| # of WIC Farmers Market packages given   |   | 1215                 | 1193               | 1087             | 1053         | 963         | 890         |
| # of Wisconsin Well Women Clients screened   |   | New measure 2016     | New measure 2016   | New measure 2016 | 33           | 32          | 19          |
| # of Facebook posts on Chronic Disease Prevention  |   | New measure 2016     | New measure 2016   | New measure 2016 | 53           | 20          | 28          |
| # of press release, print articles, interviews on Chronic Disease Prevention   |   | New measure 2016     | New measure 2016   | New measure 2016 | 30           | 9,18,10     | 8,26,14     |
| # of collaborative community meetings on Chronic Disease Prevention  |   | 8CD/11OH             | 12CD/8OH           | 12CD/11OH        | 12CD/11OH    | 28          | 22          |
| <b>Performance Goal</b>  | <b>Outcome Measures</b>   | <b>Benchmark</b>     | <b>2014</b>        | <b>2015</b>      | <b>2016</b>  | <b>2017</b> | <b>2018</b> |
| Decrease obesity   | % of WIC farmers market vouchers redeemed                       | 43%                  | 50%                | 43%              | 41%          | 43%         | 47%         |
|  | % of WIC children at a healthy weight                           | 65%                  | 64%                | 66%              | 65%          | 64%         | 61%         |
| Decrease chronic disease and cancers   | % of WWWP eligible women received screening for cervical cancer | 50%                  | New measure 2016   | New measure 2016 | 16%          | 33%         | 6%          |
|  | % of WWWP eligible women 50-64 who received mammograms          | 75%                  | New measure 2016   | New measure 2016 | 43%          | 62%         | 65%         |
| Increase physical activity   | % of WIC children with less than 2 hours of screen time daily   | 75%                  | 65%                | 69%              | 60%          | 58%         | 70%         |

|   |                      |                    |  |              |  |  |
|---|----------------------|--------------------|--|--------------|--|--|
| <b>#6 Healthy Living and Prevention</b> | Budget<br>\$ 376,064 | Levy<br>\$ 192,303 |  | FTEs<br>5.87 |  |  |
|---|----------------------|--------------------|--|--------------|--|--|

The Healthy Living and Prevention Program works to develop a community that fosters the promotion and awareness of mental well-being and addresses the inappropriate consumption and negative health effects of alcohol, tobacco, and other drugs. Services include youth programming, policy change, compliance checks, community collaboration and education. This program is important to improving the lives of children, youth, and adults by mobilizing communities to prevent mental illness and substance abuse. Both mental health and substance misuse have been identified in our community health assessment as top needs in our community.

**OUTPUTS**

| <i>(YTD column = Jan-Jun results)</i>  | <b><u>2013</u></b>  | <b><u>2014</u></b>      | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |                    |
|--|---|-------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| # of youth involved with Life of an Athlete/ SADD                              | 62  | 80                      | 160                | 44                 | 50                 | 49                 |                    |
| # of adults/adolescents trained in QPR   | New measure 2016  | New measure 2016        | New measure 2016   | 659/265            | 557/542            | 159/973            |                    |
| # of alcohol compliance checks   | 91  | 56                      | 80                 | 83                 | 42                 | 62                 |                    |
| # of tobacco compliance checks   | 36  | 62                      | 59                 | 62                 | 62                 | 63                 |                    |
| # referrals to 1st Breath  | New measure 2016  | New measure 2016        | New measure 2016   | 21                 | 27                 | 18                 |                    |
| # of Facebook posts on Mental Health/Substance use                             | New measure 2016  | New measure 2016        | New measure 2016   | 97                 | 171                | 68                 |                    |
| # of press releases, print articles, interviews on Mental Health/Substance use | New measure 2016  | New measure 2016        | New measure 2016   | 25                 | 15,40,36           | 15,23,41           |                    |
| # of collaborative community meetings focused on mental health                 | 7   | 10                      | 11                 | 27                 | 27                 | 82                 |                    |
| # of collaborative community meetings focused on alcohol misuse prevention     | New measure 2016  | New measure 2016        | New measure 2016   | 16                 | 16                 | 26                 |                    |
| <b><u>Performance Goal</u></b>   | <b><u>Outcome Measures</u></b>  | <b><u>Benchmark</u></b> | <b><u>2014</u></b> | <b><u>2015</u></b> | <b><u>2016</u></b> | <b><u>2017</u></b> | <b><u>2018</u></b> |
| Decrease underage retail access to alcohol and tobacco products                | % of licensed establishments who don't sell to minors during tobacco compliance     | 100%                    | 90%                | 90%                | 90%                | 93.5%              | 90.0%              |
|  | % of licensed establishments who don't sell alcohol to underagers during compliance | 100%                    | 84%                | 75%                | 90%                | 95.2%              | 88.7%              |
| Decrease misuse of tobacco, alcohol and other substances                       | % of births where mother reports smoking during pregnancy                           | 10%                     | 17%                | 16%                | 16%                | 14%                | 14%                |
|  | % of adults reporting binge or heavy drinking                                       | 20%                     | 24%                | 24%                | 25%                | 27%                | 25%                |

|                        |  |     |                  |                  |     |       |       |
|------------------------|--|-----|------------------|------------------|-----|-------|-------|
|                        | % of youth after SADD training who can name the 4 A's that contribute to underage drinking and/or drug use.                  | 90% | New measure 2016 | New measure 2016 | 87% | 100%  | 100%  |
| Decrease suicide rates | % of adults who "strongly agree" or "agree" that they are able to help prevent suicide in their community after QPR training | 90% | New measure 2016 | New measure 2016 | 84% | 90.6% | 92.1% |
|                        | % of youth after QPR program who feel "quite a bit prepared" or "very prepared" to ask the suicide question if needed        | 80% | New measure 2016 | New measure 2016 | 86% | 83.4% | 83.1% |



Eau Claire City-County  
**Health Department**

720 Second Avenue  
Eau Claire, WI 54703  
[www.echealthdepartment.org](http://www.echealthdepartment.org)  
(715) 839-4718