

BOARD OF HEALTH AGENDA

October 28, 2020 5:15 PM

Virtual Meeting Via Webex

Board of Health 2020-2024 Goals:

*Maintain Health Department's fiscal stability
Support and advocate for public health priorities
Review new and changing community/Health Dept priorities
Ongoing Board of Health improvements*

Health Department Mission:

Promoting health and safety for all Eau Claire communities

Health Department Vision:

ECCCHD will be a leader in assuring healthy people in healthy communities

Location: Remote Meeting via Webex Events

Dial In: +1-415-655-0001

Access Code: 145 030 3642

**please remain muted when not speaking*

For those wishing to make public comment regarding an agenda item, you must e-mail Gina Holt at gina.holt@co.eau-claire.wi.us at least 90 minutes prior to the start of the meeting. Your email will be shared with the Board of Health in advance of the meeting. If you also wish to speak regarding your email you will be called on during the public comment section.

1. Call to Order, Roll Call, Welcome Guests. Order of the Agenda. Request to pull items from Consent Agenda-5 minutes
2. Public Comment-The Board of Health and Eau Claire City-County Health Department welcome you. Statements pertinent to agenda items may be made by attendees during the public comment section. We do ask that statements are limited to three minutes per person. Written comments may also be provided. – 15 minutes
3. Update COVID-19 Situation Report – 15 minutes
4. Consent Agenda (Action Required-approved for full content)-5 minutes
 - a. Approval of minutes from September 23, 2020 meeting-enclosed
 - b. Approve Strategic Prevention Framework Partnerships for Success (PFS15) grant-enclosed
 - c. Approve Diabetes and Heart Disease Prevention Grant-enclosed
5. Business Item (Action Required)-35 minutes
 - a. Receive Quarterly Financial Update-enclosed
 - b. Review and receive COVID-19 Prevention and Control Order 10/2/2020 and COVID-19 Public Health Expectations 10/16/2020-enclosed
 - c. Approve DHS Overdose to Action Community Prevention Grant-enclosed
 - d. Approve Nurse Family Partnership Family Foundations policy draft-enclosed
 - e. Approve Nurse Family Partnership Family Foundations funding -enclosed
 - f. Approve Employee Quarantine and Isolation Sick Leave Policy-will be coming prior to meeting

PLEASE NOTE: Due to requirements contained in the Wisconsin Open Meetings Law, only those matters placed on this agenda may be considered by the Board of Health at this meeting. If any member of the public desires that the Board of Health consider a matter not included on this agenda, he or she should contact a Board of Health Member or the Health Department Director to have the matter considered for placement on a future Board of Health agenda. Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 839-4710, (FAX) 839-4854, (TDD) 839-4735 or by writing to the ADA Coordinator, Personnel Department, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

- g. Approve fee deviation strategy related to influenza vaccination-enclosed
- 6. Other information items from staff for the Board-*15 minutes*
 - a. Director/Health Officer Report-enclosed
 - b. Correspondence/Media-enclosed
 - c. Service Recognition-enclosed
 - Ted Johnson, Chemist -Retirement
 - d. 2021 ECCCHD Budget update -enclosed
 - e. Single Audit Report-enclosed
 - f. Eau Claire Healthy Communities Update-enclosed
 - g. Strategic Plan Update-enclosed
- 7. Board member informational items-*10 minutes*
 - a. Board of Health Advocacy/Policy –
 - WPHA/WALHDAB Legislative update-verbal
 - Other
 - b. November work session planning-verbal
- 8. Requests from Board members for future agenda items to be given consideration-*5 minutes*
- 9. Next business meeting – November 11, 2020; 5:15 p.m.
- 10. Adjourn

**September 23, 2020 Board of Health Meeting
Virtual Meeting**

The Board of Health convened in open session at 5:18 pm
The meeting was called to order by Mery Price

**Board Members Present
Quorum is reached**

Liz Spencer
Emily Berge
Jennifer Eddy
Martha Nieman
Terry Miskulin
Mery Price
Don Bodeau
Mark Kaeding

Staff Members Present:

Lieske Giese
Marissa Stanley
Janice Vinopal
Tegan Ruland
Gina Holt (recorder)

Order of Agenda Request to pull items from Consent Agenda

- None Requested

Welcoming of newest Board of Health Member Mark Kaeding

Public Comment:

- None made

Consent Agenda

- a. Approval of minutes from September 14, 2020 meeting-add Steve Nick as an additional panelist
- b. Approval of minutes from August 26, 2020 meeting

Motion to approve Consent Agenda: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

Business Item

- a. Review and receive COVID-19 Prevention and Control Orders – 09/03/2020 and 9/18/2020
 - Measures are updated weekly and are available on the website.
 - The Website and weekly situation report continue to be important resources.
 - The exponential increase in cases is a reality here as well as across the state.
 - Wisconsin is considered a hot spot in the nation right now.
 - We are considered high risk according to the Harvard model.
 - Our public health response is significantly challenged right now due to increasing numbers.
 - We are averaging about 200-300 positive COVID-19 tests per week in Eau Claire County.
 - State order for face masks has been extended.
 - September 3rd order had no changes, it remained the same as the previous order.
 - September 18th order had a minor language change on page 3 second bullet down.
 - BOH discussion: The BOH reviewed the orders presented and asked questions accordingly.

- Board members express their gratitude to Health Department employees for the hard work that everyone is doing during this difficult time.

Motion to Review and receive COVID-19 Prevention and Control Orders – 9/3/20 and 9/18/20 as presented by Health Department staff: Liz Spencer

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

Other policy and informational items from staff for the Board

- a. Director/Health Officer Report
 - Report is discussed
- b. Correspondence/Media
 - No discussion
- c. 2021 Budget Update
 - Board members will receive copies of what is submitted to the City/County.
 - Equalized value discussion for tax levy.
 - Group Health, rather than the 3% increase we were anticipating is giving a 1% decrease in health insurance costs.
 - There will be a lot of fluctuation in the 2021 budget due to COVID 19.

Board member informational items

- a. Board of Health Advocacy/Policy –
 - WPHA/WALHDAB Legislative Priorities -opportunities to support the important work to support Communicable Disease. There has been some federal action taken by the PA committee to support strong strategy at a national level. APHA has asked for support and funding at a national level.

Meeting dates for November 11th and December 9th are discussed with the board.

Requests from Board members for future agenda items to be given consideration

- a. None made

Next scheduled BOH meeting is October 28, 2020 at 5:15 p.m. being held via WebEx
Merrey Price adjourned the meeting at 6:18 p.m.

Board of Health Meeting- 10/28/2020

Agenda Item 4.b

Strategic Prevention Framework Partnerships for Success (PFS15)

A \$15,000 grant was awarded to the Eau Claire City-County Health Department as the fiscal agent for the Alliance for Substance Abuse Prevention. The Substance Abuse and Mental Health Services (SAMSHA) has provided each sub-state grantee monies to close out Year 5 PFS15 grant activities for the next 12 months. This no cost extension (year 6) resulted from carryover funding from Year 5. This is the sixth year we have received this grant and the final year of grant funding. 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 runs from 10/1/19 and ends 9/29/21. The overall target of this initiative is to decrease prescription drug misuse and abuse among persons aged 12-25 through increased awareness and education along with decreased access to prescription drugs.

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.

Eau Claire County Youth and Adult data indicate –

- Prescription drug misuse is seen as a problem by more than half of all Eau Claire County adults (Community Perceptions Survey)
- Prescription drug misuse is significantly more acceptable by peers as youth move through high school (Pride)

This grant will build on the Alliance's current drug free communities grant action plan which focuses on reducing alcohol use and prescription drug misuse in youth. In addition, the work plan of this grant includes:

- Implementation of Dose of Reality campaign materials through a community education and/or media campaign.
- Supporting prescription (Rx) drug security, collection and disposal.

Budget Implication: PFS funding will support Health Educator time to coordinate this grant as well as marketing and supplies.

Staff Recommendation: Approve acceptance of the PFS15 grant award for FY 9/29/21 of \$15,000 for the Alliance for Substance Abuse Prevention.

Prepared by Denise Wirth, Community Health Promotion Division Manager



**Fact Sheet –10/28/2020 Board of Health Meeting****Agenda Item 4.c****Diabetes & Heart Disease Prevention Grant (1815)**

In September of 2018, ECCCHD was asked by the Wisconsin Department of Health Services to partner on a grant from the Centers for Disease Control and Prevention for the Prevention and Management of Diabetes and Heart Disease and Stroke. The grant works to implement and evaluate a set of evidence-based strategies to prevent and control diabetes and cardiovascular disease (CVD) in high-burden populations. By implementing both diabetes and CVD strategies in the same high burden areas/communities, the work is mutually reinforcing and coordinated to accelerate progress toward outcomes.

This is important to Eau Claire because 1 in 13 adults have been diagnosed with diabetes and the top cause of death in Eau Claire County in 2016 was disease of the heart.

This is the third year of 5 possible years, with this grant period being from July 1, 2020 to June 30th, 2021. The second year of the grant was spent doing outreach including a chronic disease booth at the farmers market and bringing awareness to the community through social media and print articles on prevention and control around diabetes and cardiovascular disease.

Grant outcomes are to improve care and management of people with diabetes and hypertension. One of the key components of this grant is to focus on health equity by providing information in plain language and reaching populations that are at greater risk of diabetes and cardiovascular disease in Eau Claire County, such as those who live in the rural part of our community. This aligns with the Chronic Disease Action Team work and they will play a large role in community discussions and moving this work forward.

This aligns with ECCCHD strategic plan priorities for 2017 - 2021 including: Increasing utilization of program and population data, investing in a strong workforce and infrastructure, engaging the community in collaborative efforts to improve health and safety, and developing long-term fiscal and operational strategies supporting innovation and sustainability.

Budget Implication: \$40,000 will be used to support staff time to fulfill grant responsibilities.

Staff recommendation: BOH accept \$40,000 from Wisconsin Department of Health Services for Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke.

Submitted by Denise Wirth, Community Health Promotion Division

Fact Sheet – 10/28/2020 Board of Health Meeting
Agenda Item 5.a
Quarter 3, 2020 Financial Summary

Balance Sheet

- Cash is down from Q.2. This is expected as we are waiting for Routes to Recovery money which now has arrived. We have received \$683k+ in October which is the payment through July so that will show up next quarter. We are optimistic that more of our COVID costs will be paid for through that program.
- Prepayments is mainly the Health Insurance payment and the actual amount should be approximately \$104K per month however the entries in our accounting system have not been posted by the City Accounting Department therefore do not show up. This also affects the Accounts Payable account which is also overstated until the Prepayments are posted.
- Deferred Inflows and Accounts Receivable fluctuate together. When we invoice customers, those accounts increase. When we receive payments, they decrease. There is no concern at this point as we are monitoring outstanding receivables and it is normal for them to fluctuate throughout the year due to timing.
- The Fund Balance amount of \$1,462,594 is now set and will remain that balance through year end. All 2019 accounts have now been finalized.
- The Fund Balance Control Accounts line is the net of the revenues and expense as of September 2020.

Revenue and Expense Report

Revenue

- Intergovernmental revenue appears to be behind because revenue generally arrives a month or two after it is billed. We also have not recorded any Routes to Recovery dollars at this point which will show up next quarter.
- License and Permit Revenue continues to trickle in. We extended the deadline, discounted their fees and several facilities have closed or decreased in sales so we do expect that revenue to come in under budget.
- Charges for Services-Intergovernmental includes taxes from the County, Medicaid reimbursements and other revenue billed to the state and counties. Generally, that revenue arrives a month or two after it is earned.
- Miscellaneous Revenue includes non-governmental grants. Revenue generally arrives a month after it is earned.
- The entire 2020 tax allocation from the City has been received.
- Other budgeted receipts include what we initially believed we would need to use from fund balance. This number will be adjusted throughout the year as we receive additional revenue or save money through vacancies or other cost saving measures. We do anticipate revenue to be up due to the resources being expended on COVID 19 activities and the funding available. We are unsure of the total impact currently.

Expense

- 18.8 of the 26 payrolls budgeted (72%) have been recorded. Although we are in-line with the adopted budget at this point we expect to exceed our budget in 2020 due to the hiring of staff for COVID response as well as other unbudgeted grants which have now started up.
- We continue work on a 2020 budget projection which is a big task this year as previously mentioned.

Financial Statement explanations

Notes / what's included

Balance Sheet Categories

Assets

Cash and Investments	Cash accounts - including petty cash
Accounts Receivables	Receivables
Due from other governments	Receivables from federal, state, local governments and school districts
Taxes Receivable	Amounts on the Tax Roles not yet received (Septic Maintenance, Reinspection Fees etc.)
Prepayments	Payments made in advance, e.g., health and life insurance
Inventories	Currently this includes radon test kits
L-T Receivables	Allowance for uncollectable accounts (clinic)

Liabilities

Accounts Payable	Payments owed for products and services received
Accrued Liabilities	Includes Accrued Payroll Expenses at Year End
Deposits	Grants not totally spent out (we may have to return)
Due to other governments	Sales tax payable, state license fees, county rent
Deferred Inflows	Amounts billed but not yet received; now also includes advance on contracts

Fund Balances

Fund Balance	Comprised of restricted amounts and non-spendable pre-payments and inventories
Control Accounts	Net of revenue and expense control accounts for current year

Revenues and Expense Categories

Revenues

Intergovernmental	Federal, state and other aid/grants
Licenses & Permits	License & permit revenue; e.g., lodging, restaurant, sanitary
Charges for Services	Fees for services rendered; e.g., water testing, vaccinations, inspection fees
Charges for Services - Intergovernmental	Services to governments; e.g., Eau Claire County tax levy, Medicaid payments, school districts
Misc revenue	Grants from non-government agencies, e.g., Security Health, United Way
Other Financing Sources	Tax Levy from the City of Eau Claire, Transfers from Community Development Block Grant - intensified housing
Other Budgeted Receipts	Fund balance use

Expenses

Personnel	Wages, payroll taxes and benefits
Contractual Services	Postage, computer service charges, rent, equipment leases, advertising, auditing, etc.
Utilities	Phones & garbage
Fixed Charges	Licenses & permits, workers compensation and property & liability insurance
Supplies	Office, lab, medical, etc.
Contributions & Other Payments	Miscellaneous payments made to outside organizations and consultants
Capital Purchases	Long term purchases - over \$5,000 each
Other Financing Uses	Transfers to debt service - in 2008, debt was issued to pay off the unfunded pension. This is the Health Department portion of the yearly amount. Obligation is expected to be paid off 4/1/2028.
Other Disbursements	Budgeted Excess of Revenue over Expenses which would go into Fund Balance

**Eau Claire City-County Health Department
Balance Sheet
As of September 30, 2020**

		Changes	
		Change from Prior Quarter	Change from Prior Yr
Assets			
Cash and Investments <i>(Cash in bank , petty cash, gift cards)</i>	\$ 1,612,933	\$ (678,531)	\$ (441,020)
Accounts Receivables <i>(Bills outstanding non government)</i>	\$ 195,009	\$ (117,162)	\$ 73,091
Due from other governments <i>(Bills outstanding government)</i>	\$ 163,815	\$ -	\$ 70,493
Prepayments <i>(Payments made in advance i.e. health, life insurance)</i>	\$ 625,486	\$ 314,401	\$ 534,546
Inventories <i>(Radon Kits)</i>	\$ 5,196	\$ 1,332	\$ 1,477
Allowance for Doubtful Accts <i>(Estimate of uncollectables)</i>	\$ (150)	\$ -	\$ 4,777
Total Assets	\$ 2,602,289	\$ (479,960)	\$ 243,364
Liabilities			
Accounts Payable <i>(Amts owed incl. payroll taxes, health, life)</i>	\$ 785,325	\$ 494,397	\$ 544,964
Accrued Liabilities <i>(Accrued Payroll done at year end)</i>	\$ -	\$ -	\$ (103)
Due to other governments <i>(Sales tax, state license fees, rent to County)</i>	\$ 21,040	\$ (16,567)	\$ 191
Deferred Inflows <i>(Amt. Billed-not received, advance on contracts)</i>	\$ 358,618	\$ (117,150)	\$ 147,868
Total Liabilities	\$ 1,164,983	\$ 360,680	\$ 692,920
Fund Balances			
Fund Balance <i>(Restricted, non-spendable prepayments, inventories)</i>	\$ 1,462,594	\$ -	\$ 121,663
Control Accounts <i>(Current year revenue over (under) expense)</i>	\$ (25,288)	\$ (840,640)	\$ (571,219)
Total Fund Balances	\$ 1,437,306	\$ (840,640)	\$ (449,556)
Total Liabilities and Fund Balances	\$ 2,602,289	\$ (479,960)	\$ 243,364

	<u>12/31/2019</u>	\$
<i>Non-Spendable Pre Payment</i>	\$ 97,896	-
<i>Non-Spendable Inventory</i>	\$ 988	
<i>Restricted to Particular Projects</i>	\$ 37,584	
<i>Restricted - Capital Purchases</i>	\$ 360,660	
<i>Restrctied - Working Capital</i>	\$ 955,466	
<i>Restricted - Special Projects</i>	\$ 10,000	
Fund Balance at 12/31/17	\$ 1,462,594	

**Eau Claire City-County Health Department
Revenue and Expense Statement
As of September 30, 2020**

Revenues	Adoped Budget	YTD Actual	% of Revised Bdgt	Change from Prior Quarter	Change from Prior Yr
Intergovernmental <i>(Federal and state grants)</i>	\$ 1,686,000	\$ 1,149,619	68.2%	\$ 726,421	\$ 374,647
Licenses & Permits <i>(Lodging, restaurant, sanitary etc.)</i>	\$ 729,000	\$ 454,985	62.4%	\$ 131,371	\$ (199,038)
Charges for Services <i>(Water tests, vaccinations inspections etc.)</i>	\$ 177,000	\$ 99,970	56.5%	\$ 27,417	\$ (66,954)
Charges for Services - Intergov. <i>(Medicaid, schools, County tax)</i>	\$ 1,622,000	\$ 1,033,629	63.7%	\$ 342,893	\$ (113,959)
Misc revenue <i>(Gifts, reimbursements, non-governmental grants)</i>	\$ 303,100	\$ 225,089	74.3%	\$ 45,799	\$ 32,343
Other Financing Sources <i>(Taxes from City, CDBG revenue)</i>	\$ 2,020,500	\$ 1,973,471	97.7%	\$ 8,424	\$ 7,393
Other Budgeted Receipts <i>(Budget only-use of fund balance)</i>	\$ 222,100	\$ -	0.0%	-	\$ -
Total Revenues	\$ 6,759,700	\$ 4,936,763	73.0%	\$ 1,282,325	\$ 34,432
Expenses					
Personnel <i>(Payroll, benefits, auto allowance)</i>	\$ 5,891,200	\$ 4,252,232	72.2%	\$ 1,783,766	\$ 516,765
Contractual Services <i>(Postage, computer service, rent, advertising, audit, etc.)</i>	\$ 448,600	\$ 427,605	95.3%	\$ 201,845	\$ 62,378
Utilities <i>(Phones, garbage)</i>	\$ 34,700	\$ 35,931	103.5%	\$ 16,737	\$ 8,104
Fixed Charges <i>(License & Permits, Workers Comp)</i>	\$ 16,200	\$ 15,043	92.9%	\$ 3,345	\$ 2,298
Supplies <i>(Office, lab, medical, equipment, gift cards, etc.)</i>	\$ 229,900	\$ 152,233	66.2%	\$ 64,890	\$ (5,262)
Contributions & Other Payments <i>(Payments to other organizations)</i>	\$ -	-	0.0%	-	\$ (150)
Capital Purchases <i>(Long term purchases over \$5,000)</i>	\$ 112,500	\$ 52,425	46.6%	\$ 52,383	\$ 22,202
Other Financing Uses <i>(Debt service for debt on unfunded pension)</i>	\$ 26,600	\$ 26,582	99.9%	\$ (1)	\$ (684)
Total Expenses	\$ 6,759,700	\$ 4,962,051	73.4%	\$ 2,122,965	\$ 605,651
Net Revenue Over / (Under) Expenses	\$ -	\$ (25,288)		\$ (840,640)	\$ (571,219)



Fact Sheet 10/28/2020 Board of Health Meeting

Agenda Item 5.a

Review and receive COVID-19 Prevention and Control Order for 10/02/2020 and COVID-19 Prevention and Control Expectations for 10/16/2020

Following the end of the State of Wisconsin COVID-19 Safer at Home Order, the Eau Claire City-County Health Department drafted and signed a local Public Health Emergency Order based on local and state COVID-19 data and public health best practice for the prevention and control of a communicable disease pandemic under the authority of State Statute 252. This original local order has been subsequently updated based on the current data and continues to provide guidance and mandates during this active pandemic. The BOH, as the policy body for the health department, has received updates on the original Order and subsequent revisions at each monthly Board of Health meeting.

The Order has been based on metrics that are tracked and posted weekly <https://coronavirus-and-covid-19-information-hub-eccounty.hub.arcgis.com/pages/local-statistics> and decisions to make changes/adjustments to the Order have been framed by the Responding Together Eau Claire COVID-19 Plan <https://www.eauclairewi.gov/Home/ShowDocument?id=32685>.

The Board of Health through State Statute and local ordinance has policy authority for the department, oversees operations of the department, and has control over the appointment of the Health Officer. In a Public Health Emergency the BOH is responsible for review of the action of the Health Officer including oversight of the Public Health Emergency Order and now Public Health Expectations.

On 10/02/2020 the COVID-19 Prevention and Control Order was updated with minimal changes. This Order is attached for your review and receipt.

On 10/16/2020 the Order was transitioned to a COVID-19 Public Health Expectations document per City and County legal following the decision of the Eau Claire City Council to delay a vote on the Communicable Disease Authorizing Ordinance that framed how local orders were to be written and enforced. The Expectations document has been communicated to the residents, businesses, and community partners in Eau Claire County as a critical frame for having success with slowing the spread of COVID-19. Legal has indicated that it is not currently enforceable in at least the City of Eau Claire. The health department is working with legal counsel on options for next steps related to this issue.

Staff Recommendation: Review and Receive the most current COVID-19 Public Health Order and Public Health Expectations for COVID-19.

EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT COVID-19 PREVENTION AND CONTROL ORDER
EFFECTIVE OCTOBER 2, 2020

WHEREAS, on December 2019, a novel strain of the coronavirus was detected, a virus that causes a disease now named COVID-19, and it has spread throughout the world, including every state in the United States;

WHEREAS, on January 30, 2020, the World Health Organization declared COVID-19 to be a Public Health Emergency of International Concern;

WHEREAS, on March 13, 2020, the President proclaimed a National Emergency in response to COVID-19;

WHEREAS, millions of people around the world have tested positive for COVID-19, including over 7.2 million people in the United States, and nearly 130,000 people in Wisconsin;

WHEREAS, as a novel disease with no certain immunity and no vaccination currently available all of the population is at risk;

WHEREAS, physical contact and close proximity to other individuals may cause the spread of COVID-19, thereby endangering the public and placing undue strain on the healthcare system; and

WHEREAS, “physical distancing”, meaning a distance of six (6) feet is maintained between all individuals, is a public health tool that may be used to limit the spread of disease;

WHEREAS, it is essential to use all available tools as is reasonable and necessary to stop the transmission of COVID-19;

WHEREAS, COVID-19 is present throughout Wisconsin, including in Eau Claire County with 2,016 people testing positive and seven deaths as of the date of this order;

WHEREAS, a large percentage of the Eau Claire County population has one or more of the risk-factors that increase the likelihood of hospitalization or death if infected including factors related to age and chronic health conditions;

WHEREAS, Wisconsin State Law provides broad authority and power for local health officials to prevent, control, and suppress COVID-19;

WHEREAS, Wis. Stat. § 252.03(1) provides that every local health officer “*shall* promptly take *all* measures necessary to prevent, suppress and control communicable diseases”;

WHEREAS, Wis. Stat. § 252.03(2) provides that local health officers “*may* do what is reasonable and necessary for prevention and suppression of disease”;

WHEREAS, Wis. Stat. § 252.03(2) also provides that local health officers “may forbid public gatherings when deemed necessary to control outbreaks or epidemics”;

WHEREAS, a coordinated approach across political boundaries is needed to combat COVID-19, and people and businesses in Eau Claire County will benefit from a unified, consistent, evidence-based approach;

WHEREAS, the State of Wisconsin Orders were working to control the spread of disease across the state including in Eau Claire County;

WHEREAS, as required by Wis. Stat. § 252.03(1), the Eau Claire City-County Health Department investigated the circumstances of COVID-19 appearing locally and made a full report to the Eau Claire City-County Board of Health on April 22, 2020 and at all subsequent Board of Health meetings, and the Wisconsin Department of Health Services via required electronic disease reporting;

WHEREAS, the Wisconsin Department of Health Services provides communicable disease prevention and control and social distancing guidelines informed by Wisconsin public health experts and consistent with recommendations by the President and the U.S. Centers for Disease Control;

WHEREAS, based on the specific circumstances in Eau Claire County and my investigation of COVID-19 in Eau Claire County I have determined that this order is necessary to prevent the spread of, suppress, and control COVID-19 in Eau Claire County;

WHEREAS, this order is intended to replace and update the **EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT COVID-19 PREVENTION AND CONTROL ORDER** effective September 18, 2020 in order to best address the local conditions of COVID-19 in Eau Claire County;

WHEREAS, the Responding Together Eau Claire COVID-19 Progress Plan outlines the mitigation strategies and progression of these strategies necessary for the control of rapid spread of disease.

NOW THEREFORE, I, Elizabeth Giese, director and health officer for Eau Claire County including the City of Eau Claire, by the authority vested in me by the Laws of the State, including but not limited to Section 252.03 of the Wisconsin Statutes, order the following:

- 1 Stay at home or place of residence.** All individuals present within the Eau Claire County are strongly encouraged to stay at home or at their place of residence, minimize travel out of this County, and keep the circle of connections minimal to decrease the spread of disease. To the extent individuals are using shared or outdoor spaces other than their home or residence, they must at all times as reasonably possible maintain physical distancing of at least six (6) feet from any other person except that they do not need to maintain social distancing between individuals residing in a single living unit or household. If a resident travels outside their community and engages in activities that compromise physical distancing the resident should limit contact with non-household members for 14 days and monitor symptoms closely.

Individuals whose homes or residences are unsafe or become unsafe, such as victims of domestic violence, are urged to leave their home and stay at a safe alternative location.

For purposes of this Order, homes or residences include hotels, motels, shared rental units, dormitories, shelters, and similar facilities.

- 2 Public spaces both indoors and outdoors and public buildings.**

Requirements.

All public space and public buildings, which shall include those buildings open to the public, shall meet the following public health and safety practices to prevent the spread of COVID-19:

- Comply with Physical Distancing Requirements of 6 feet between all individuals on the premises including but not limited to employees, customers, and members of the public and limit the number on the premises, both indoors and outdoors to meet this physical distance requirement, except for those contacts that are brief and incidental in nature. This shall not be construed to require physical distancing between individuals from the same household.
- Consider prohibiting or not participating in activities that, by their very nature, encourage violation of Physical Distancing Requirements.
- Increase standards of facility cleaning and disinfection to limit worker and patron exposure to COVID-19, as well as adopting protocols to clean and disinfect in the event of a positive COVID-19 case in the workplace.

- Adopt policies to actively screen and prevent workers from entering the premises if they display COVID-19-like symptoms or have had contact with a person with a confirmed diagnosis of COVID-19 and consider policies that require face mask use by all workers.
- Adopt policies to actively screen and prevent customers, visitors, guests from entering the premises if they display COVID-19-like symptoms or have had contact with a person with a confirmed diagnosis of COVID-19 and consider policies that require face mask use by all customers, visitors, and guests.
- Reduce occupancy to 50% of posted occupancy.
- Establish lines to regulate entry in and exit, as well as other congregating locations, with markings for individuals to enable them to stand at least six feet apart from one another while waiting. Stores should also use alternatives to lines, including allowing customers to wait in their cars for a text message or phone call and scheduling pick-ups or entries to the store.
- Cooperate with Public Health investigations related to COVID-19 confirmed or suspected cases related to the business operations, including excluding employees based on public health recommendations and assisting public health with identifying and contacting contacts of cases.

One-on-One Personal Services Additional Requirements.

The following requirements shall, in addition to those above, apply to those one-on-one personal services that by their very nature cannot maintain six (6) foot physical distancing. This shall not provide an exception to those activities which may be performed without violating six (6) feet of physical distancing:

- Limit the number of clients in a facility at one time such that every client or household unit is provided with six (6) feet of physical distancing. There must be a minimum of six (6) feet of physical distancing between each work station.
- Obtain full contact information for all clients (to include full name, address, e-mail address, and phone number) with which the provider has had close contact so as to assist in any necessary contact tracing.
- Sanitize all chairs, equipment and tools between each client.
- Clients must wear face coverings when feasible based on the service being performed.
- Providers must wear a cloth face covering at all times when in close contact and the wearing of a face shield is recommended.
- Review symptoms of COVID-19 verbally with staff each day. Any staff experiencing symptoms shall be sent home and is encouraged to contact their health care provider for testing for

COVID-19.

- Review symptoms of COVID-19 verbally with all clients prior to service. If a client is experiencing any symptoms, decline service and recommend the client contact their health care provider for testing for COVID-19.
- Maintain compliance with all relevant regulatory or licensing requirements in addition the additional requirements provided herein.
- Consider the following recommendations:
 - Limit the number of clients each provider is in close contact with (to be defined as within six (6) feet) to no more than twenty (20) people per day.
 - Appointments should be scheduled in advance with no walk-in service provided.

Waiting areas should be closed; clients should wait in vehicles or outdoors while maintaining six (6) feet of physical distancing for their appointment.

Busing Requirements.

Mass transportation, such as buses and commercial vans are, by their nature, locations where individuals are likely to and by necessity are within six (6) feet of each other. When, in these forms of transportation, physical distance of six (6) feet cannot be maintained between all individuals, a capacity of 50% shall be observed in addition to the following requirements:

- Cloth face coverings shall be worn, unless medically unsafe to do so.
- Buses with set riders, such as those on a school bus route, shall have assigned seats and daily attendance shall be taken.
- Operators of mass transportation shall actively communicate with or screen riders regarding COVID-19-like symptoms prior to boarding.

Recommendations.

All public space and public buildings, which shall include those buildings open to the public, shall review and apply, as much as possible, the following public health and safety practices to prevent the spread of COVID-19:

- To the greatest extent feasible, use technology to avoid meeting in person, including virtual meetings, teleconference, and remote work.
- Review the Wisconsin Economic Development Corporation guidelines on safe business practices, available here: <https://wedc.org/reopen-guidelines/> and other applicable State of Wisconsin regulatory, industry-specific guidance.
- Consider establishing curbside pick-up to reduce in- store traffic and mitigate outdoor lines.

- Cease door-to-door solicitation.
- For any business without a posted occupancy, consider reducing occupancy by 50%.
- Restrict the number of workers present on premises to no more than is strictly necessary to perform operations and to ensure health and safety.
- Cease any self-service operations of any type of food or beverage.
- Except for raw agricultural commodities, prohibit customers from self-dispensing all unpackaged food.
- Review the Wisconsin Interscholastic Athletic Association (WIAA) guidelines for all sport activities, available here: [LINK](#).

The above requirements and recommendations of this paragraph 2 shall not apply to those interactions or spacing limitations that must occur for health and safety reasons.

3. **Public Gatherings.** Public gatherings are those planned events in a public space or public building, which shall include those buildings open to the public. Public gatherings are further defined as occurring with a number of people in attendance in a defined location for a prolonged period of time that could strain the planning and response resources, including public health and community health care resources, of the community hosting the event, such as a concert, festival, conference, or sporting event.

Any public gathering of more than 10 people is strongly discouraged.

Public gatherings of more than 100 people in an indoor space and public gatherings of more than 250 people in an outdoor space are prohibited in order to prevent the spread of COVID-19. This prohibition shall not apply to political assemblies, religious gatherings, or other Constitutionally protected public gatherings.

All public gatherings permitted by this order, regardless of size, shall comply with all physical distancing and related requirements found in paragraph 2 above. Gatherings of any kind outside of a household unit shall exercise physical distancing and comply with all other requirements found in paragraph 2 above. Assigned or fixed seating is strongly encouraged.

Organizers of public gatherings permitted by this order shall document contact information of

attendees for contact tracing purposes, to include each attendee's name, address, e-mail address, and phone number. Organizers shall actively screen and prevent attendance of individuals, including staff, volunteers, and attendees, who have symptoms of COVID-19.

Any private gathering is encouraged to follow all requirements of this section and paragraph 2 above, including maintaining 6 feet of distance between all individuals not from the same household.

4. **Follow DHS and CDC guidelines.** When taking any action permitted under this Order, all individuals, organizations, government bodies, and any other permitted group of individuals shall, to the extent possible, follow:

DHS guidelines located here: <https://www.dhs.wisconsin.gov/covid-19/index.htm>; and

CDC guidelines located here: <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html>.

All businesses shall comply with DHS guidelines for businesses located here: <https://www.dhs.wisconsin.gov/covid-19/employers.htm>.

5. **Elderly people and those who are vulnerable as a result of underlying health conditions should take additional precautions.** People at high risk of severe illness from COVID-19 and people who are sick are urged to stay in their home or residence to the extent possible except as necessary to seek medical care.

6. **Prevention of Disease Recommendations.** For purposes of this Order, all residents are strongly encouraged to follow these guidelines including:

- a. Staying home when sick with any symptoms of COVID-19;
- b. Maintaining distancing of six (6) feet between people;
- c. Washing hands with soap and water for at least 20 seconds as frequently as possible or using hand sanitizer;
- d. Wearing a cloth face covering when physical distancing of six (6) feet cannot be maintained, including at entrances and exits to buildings, on public transit, and at store checkouts;
- e. Covering coughs or sneezes (into the sleeve or elbow, not hands);
- f. Regularly cleaning high-touch surfaces;

- g. Not shaking hands; and
 - h. Following all other public health recommendations issued by DHS and the U.S. Centers for Disease Control.
7. **Enforcement.** This Order is enforceable by any local law enforcement official. Violations may result in the issuance of citations. Nothing in this Order prevents DHS and local health officials from issuing and enforcing isolation and quarantine orders pursuant to Wis. Stat. ch. 252 and local ordinances.
 8. **Severability.** If any provision of this Order or its application to any person or circumstance is held to be invalid, then the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.
 9. **Duration.** This Order shall become effective on October 2nd, 2020 at 12:00am. This Order shall terminate on October 16th, 2020. It is anticipated that this order will be extended, unless metrics indicate loosening or restricting is necessary. Local metrics can be found at <https://www.eauclairewi.gov/Home/ShowDocument?id=32627>.

Any superseding or subsequent order shall be based upon public health best practices, review of all available data including the metrics at the link above, and may include the following indicia: downward trajectory of positive tests as a percent of total tests within a 14-day period; treatment of all patients without crisis care; community testing of all symptomatic individuals, individuals involved in an outbreak, and individuals living and working in congregate settings.



10/01/2020

Elizabeth Giese

Date

Eau Claire City-County Health Department

EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT
COVID-19 PREVENTION AND CONTROL COMMUNITY EXPECTATIONS
EFFECTIVE OCTOBER 15, 2020

WHEREAS, on December 2019, a novel strain of the coronavirus was detected, a virus that causes a disease now named COVID-19, and it has spread throughout the world, including every state in the United States;

WHEREAS, on January 30, 2020, the World Health Organization declared COVID-19 to be a Public Health Emergency of International Concern;

WHEREAS, on March 13, 2020, the President proclaimed a National Emergency in response to COVID-19;

WHEREAS, millions of people around the world have tested positive for COVID-19, including over 7.8 million people in the United States, and more than 162,000 people in Wisconsin which has recently been named a national “hot-spot” for rapid spread;

WHEREAS, as a novel disease with no certain immunity and no vaccination currently available, all of the population is at risk;

WHEREAS, physical contact and close proximity to other individuals may cause the rapid spread of COVID-19, thereby endangering the public and placing undue strain on the healthcare system; and

WHEREAS, it is essential to use all available tools as is reasonable and necessary to stop the transmission of COVID-19;

WHEREAS, COVID-19 is present throughout Wisconsin, including in Eau Claire County with 2,508 people testing positive and 9 deaths as of October 15th, 2020;

WHEREAS, every region of the State is in high activity level for COVID-19 with Eau Claire County being in very high activity level, and hospitalization of COVID positive people in the region increasing;

WHEREAS, Wisconsin State Law provides broad authority and power for local health officials to prevent, control, and suppress COVID-19;

WHEREAS, Wis. Stat. § 252.03 provides that every local health officer “*shall* promptly take *all* measures necessary to prevent, suppress and control communicable diseases”; and “*may* do what is reasonable and necessary for prevention and suppression of disease”; and “may forbid public gatherings when deemed necessary to control outbreaks or epidemics”;

WHEREAS, as required by Wis. Stat. § 252.03, the Eau Claire City-County Health Department investigated the circumstances of COVID-19 appearing locally and made a full report to the Eau Claire City-County Board of Health on April 22, 2020 and at all subsequent Board of Health meetings, and the Wisconsin Department of Health Services via required electronic disease reporting;

WHEREAS, the Wisconsin Department of Health Services State Epidemiologist and leadership provides communicable disease prevention and control and social distancing expectations informed by Wisconsin public health experts and the U.S. Centers for Disease Control;

WHEREAS, the Responding Together Eau Claire COVID-19 Progress Plan outlines the mitigation strategies and progression of these strategies necessary for the control of rapid spread of disease.

WHEREAS, based on the specific circumstances in Eau Claire County and my investigation of COVID-19 in Eau Claire County I have determined that these community-wide expectations are necessary to prevent the spread of, suppress, and control COVID-19 in Eau Claire County;

WHEREAS, these expectations are intended to replace the **EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT COVID-19 PREVENTION AND CONTROL ORDER** effective October 2nd, 2020 in order to best address the local conditions of COVID-19 in Eau Claire County;

NOW THEREFORE, I, Elizabeth Giese, director and health officer for all of Eau Claire County by the authority vested in me by the Laws of the State, including but not limited to Section 252.03 of the Wisconsin Statutes, state the following:

- 1 Individual Expectations.** All individuals are expected to meet the following public health and safety practices to prevent the spread of COVID-19. These health and safety practices are the best ways to prevent spread of COVID-19.

- Maintain physical distance of at least six (6) feet from individuals not residing in your household.
- Wear properly fitting face coverings whenever in a room or other enclosed space with individuals that are not within their household, unless face covering will be medically compromising.
- Avoid gatherings of 10 or more individuals. Know the names and contact information for any individuals you are choosing to spend time with.
- Stay home when sick with symptoms consistent with COVID-19 and get tested.
- Cooperate with any public health investigation as a COVID-19 case or close contact including isolation and quarantine when appropriate
- Minimize travel outside of your home or place of residence as much as feasible. If you travel and engage in activities that compromise physical distance, limit contact with non-household members (especially those that may be at elevated risk for severe symptoms if they become infected) for 14 days after travel and monitor symptoms closely.
- Follow all public health orders or recommendations issued by the Wisconsin Department of Health Services.

2. Expectations for Indoor and Outdoor Public Spaces and Buildings. All public spaces and public buildings, including but not limited to schools and childcare, athletic spaces, businesses, government, and service providers, are expected to meet the following public health and safety practices to prevent the spread of COVID-19.

- Implement measures to assure 6 feet can be maintained between individuals on the premises including but not limited to employees, students, customers, and members of the public.
- Limit the number of people on the premises, both indoors and outdoors to meet this 6 feet physical distance expectation. This includes maintaining at least 6 feet of distance between households/parties in spaces with fixed seating (e.g. dining tables, bars, waiting areas, workstations, desks etc.) This shall not be construed to expect physical distancing between individuals from the same household.
- Reduce overall occupancy by 50%.
- Implement policies to assure the use of face coverings by employees, students, customers and

visitors in indoor spaces and buildings, other enclosed spaces, and in outdoor situations in which physical distancing cannot be maintained.

- Establish policies to support that any activity that, by its very nature, promotes prolonged close contact (e.g. dancing, close contact sports, some types of performances) not be held due to the inability to assure that 6 feet distance is maintained and the higher risk of COVID-19 spread. If held, it is expected that these activities be specifically organized in a way and with a deliberate design that decreases risks. Additionally, strategies are expected to be in place that assure a rapid response (contact tracing, testing, isolation, quarantine, messaging) for potential outbreaks which are more likely to happen in these activities.
- Increase standards of facility cleaning and disinfection to limit worker and patron exposure to COVID-19, as well as adopting protocols to clean and disinfect in the event of a positive COVID-19 case in the workplace.
- Adopt policies to actively screen and prevent workers, students, customers, visitors, and guests from entering the premises if they display COVID-19-like symptoms or have had contact with a person with a confirmed diagnosis of COVID-19.
- Establish lines to regulate entry and exit, as well as other congregating locations, with markings for individuals to enable them to stand at least six feet apart from one another while waiting. Stores and other service providers should also use alternatives to lines, including allowing customers to wait in their cars for a text message or phone call and scheduling pick-ups or scheduled entries into the store.
- Cooperate with public health investigations related to COVID-19 confirmed or suspected cases related to the entity or business operations, including excluding employees, students, others based on public health recommendations and assisting public health with identifying and contacting contacts of cases.
- To the greatest extent feasible, use technology to avoid meeting in person, including virtual meetings, teleconference, and remote work.
- Review and, as much as possible, adhere to the Wisconsin Economic Development Corporation guidelines on safe business practices, available here: <https://wedc.org/reopen-guidelines/> and other applicable State of Wisconsin regulatory, industry-specific guidance.

3. Additional Expectations for One-on-One Personal Services. Services that may require closer than 6 feet of contact are expected to meet all of paragraph 2 above as well as the following.

- Obtain full contact information for all clients (to include full name, address, e-mail address, and phone number) with which the provider has had close contact so as to assist in any necessary contact tracing.
- Have providers wear a face shield in addition to face coverings.
- Implement measures to maximize distance and minimize duration of contact among clients in waiting rooms and workstations.

4. Additional expectations for Mass Transportation. Operators of mass transportation are expected to meet paragraph 2 above and when 6 feet of physical distance cannot be maintained are additionally expected to do the following:

- Buses with set riders, such as those on a school bus route, are expected to have assigned seats and daily attendance taken.
- Operators of mass transportation are expected to actively screen riders regarding COVID-19-like symptoms prior to boarding.

5. Additional Expectations for Gatherings. Gatherings are defined as planned or spontaneous events that occur with a number of people in attendance in a defined location for a prolonged period of time. Examples may include such events as a concert, festival, conference, sporting event, celebration, or other public or private social event. Large events are not recommended for any reason.

- Any public or private gathering is expected to be less than 25 people.
- The indoor gathering of more than one household for socialization purposes is strongly discouraged.
- Constitutionally protected gatherings are encouraged to follow all COVID-19 physical distancing and face covering prevention strategies.
- Assigned or fixed seating in accordance with 6 feet physical distancing is strongly encouraged during any gathering.

- Organizers of gatherings are expected to document contact information of attendees for contact tracing purposes, to include each attendee’s name, address, e-mail address, and phone number.
- Organizers of gatherings are expected to actively screen and prevent attendance of individuals, including staff, volunteers, and attendees, who have symptoms of COVID-19.

6 Follow Other Applicable Guidelines. All individuals, organizations, schools, businesses, government bodies, and any other group are expected to follow:

- DHS guidelines located here: <https://www.dhs.wisconsin.gov/covid-19/index.htm> and <https://www.dhs.wisconsin.gov/covid-19/employers.htm>;
- CDC guidelines located here: <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html>.
- Wisconsin Economic Development Corporation guidelines on safe business practices, available here: <https://wedc.org/reopen-guidelines/>;
- Other applicable State of Wisconsin regulatory and/or industry-specific guidance.

7. Elderly people and those who are vulnerable as a result of underlying health conditions should take additional precautions. People at high risk of severe illness from COVID-19 are urged to stay in their home or residence to the extent possible except as necessary to meet basic needs and seek medical care.

8 Duration. These expectations are effective immediately and shall remain in effect until superseding guidance is issued based on public health science and available data. Data shall be regularly examined to ensure the most salient recommendations are available to the public.



10/15/2020

Elizabeth Giese

Date

Eau Claire City-County Health Department

**Fact Sheet –Board of Health Meeting 10/28/2020****Agenda Item 5.c****Overdose to Action Community Prevention Grant**

A \$85,000 grant was awarded to the Eau Claire City-County Health Department by the Wisconsin Department of Health Services, Division of Public Health (DPH) for the Overdose to Action Community Prevention Grant (OD2A) to build capacity in the Eau Claire community to prevent opioid overdoses. The OD2A is funded by the Centers for Disease Control and Prevention. The goal of this funding opportunity is to strengthen and enhance the capacity of communities. Emphasis will be placed on promoting strategies and activities that build local capacity to prevent morbidity and mortality associated with opioid overdoses. These include strategies that prevent opioid overuse, misuse, use disorder, overdose, and opioid-related harms. Year One was for \$28,333 and ran May 1, 2020 to August 31, 2020. Year Two is for \$85,000 started 9/1/2020- 8/31/2021.

This grant provides ECCCHD the opportunity to improve community understanding of opioid data, resources, and services to document the local context of the opioid epidemic, and to use data to inform action in the community. Through the work of the Overdose Fatality Review Team (OFRT) created in 2019, the ECCCHD and its partners have identified a need for improved understanding of the data available and data gaps related to opioid use and overdose in Eau Claire County. This project will also allow us to address the CDC strategy outcome of empowering individuals to make safer choices through enhancing community education for the public and partners. We will also partner with the Boys and Girls Clubs of the Greater Chippewa Valley (BGCCV) to empower individuals to make safer choices through educational programming to decrease initiation of opioid use and misuse. Lastly, this project will allow us to address CDC strategy outcome, increased awareness, through expanding and enhancing current local education around safe medication storage, and safe disposal stigma allowing us to continue our work after the PFS- Prescription Drug Takeback funding is done in September 2020.

Budget Implication: \$85,000 for Year Two starts September 1, 2020 to August 31, 2021 and Year Three September 1, 2021-August 31, 2022. Funding for both those years will support staffing, training, purchasing a data analysis tool and stipends to BGCCV and Wisconsin Health Literacy.

Staff Recommendation: Approve acceptance of the DHS Overdose to Action Community Prevention Grant award for \$85,000/year for the next 2 years starting 9/1/2020- 8/31/2022.

Prepared by Denise Wirth, Community Health Promotion Division Manager

Fact Sheet 10/28/2020 Board of Health Meeting**Agenda Item 5.d****Nurse-Family Partnership Flex Fund Policy**

One of the requirements of the Family Foundations Home Visitation grant is to establish a Flex Fund for use with enrolled families. This fund is established to help the family and Nurse Home Visitor with service enhancements or minor emergencies for which there exists no other means to secure payment for tangible goods or services that are needed immediately for family safety and functioning. Examples of this might be costs of parenting classes, transportation to classes, infant cribs, car batteries, minor home repairs, etc. Uses of the fund must be in accordance with the Nurse-Family Partnership Flex Fund Policy (attached).

Per the flex fund policy, Nurse Home Visitors will assess a family's level of commitment to a goal and demonstrate investment of time and/or resources before funds are committed. Families will explore other options before receiving support through Flex Fund dollars. If funds are granted for emergency needs, Nurse Home Visitors will help families create a plan or budget so that the emergency does not recur.

For purposes of the Flex Fund, the program year runs from October 1 through September 30. Funds are not required to be used with each family but cannot be rolled over from year to year if left unused. A family must be enrolled and active to be eligible. The Family Foundations Home Visitation grant specifies that there be a total of \$250 available per family per year and that 50% of the Flex Fund is an expected and allowable grant expense. The remaining 50% will be made up of tax levy dollars.

Budget Implication:

Our maximum caseload for current Nurse Home Visitors is 85 families in Eau Claire County. The maximum total Flex Fund amount would be \$21,250, of which \$10,625 would be covered by the Family Foundations Home Visitation grant. The maximum amount coming from tax levy would be \$10,625. The new Family Foundations Home Visitation grant partially covers the salaries of our Nurse Home Visitors which were previously covered by tax levy. This savings in tax levy will cover the maximum tax amount of flex funds coming from tax levy.

Staff recommendation:

Approve the Nurse-Family Partnership Flex Fund Policy and funding.

Prepared by Beth Draeger, Healthy Beginnings Division Manager



Western Wisconsin Nurse-Family Partnership Consortium

POLICY TITLE: Nurse-Family Partnership Flex Funds
EFFECTIVE DATE:
DATE REVIEWED/REVISED:

Purpose Statement:

To assist enrolled Nurse-Family Partnership (NFP) clients with current needs and development of budgeting skills.

Policy:

Flex Funds are available to all families enrolled in the Nurse-Family Partnership Program and will be consistently utilized to meet family safety and self-sufficiency needs that cannot be met by other means. This includes but is not limited to food, clothing, baby supplies, rent, bills, car payments, etc.

Definitions:

NFP: Nurse-Family Partnership
NHV: Nurse Home Visitors

References:

NFP Flex Fund Tracking Log
Flex Fund Agreement
Flex Fund Receipt Letter

Approved By:

Health Director: _____

Board of Health Chair: _____

Medical Advisor: _____





Western Wisconsin Nurse-Family Partnership Consortium

PROCEDURE TITLE: Nurse-Family Partnership Flex Fund

EFFECTIVE DATE:

DATE REVIEWED/REVISED:

Purpose Statement:

- To assist NFP clients with current needs and development of budgeting skills.
- The Family Foundations Home Visitation Grant provides \$125 per NFP enrolled family with the requirement that this amount is equally matched by the local agency implementing the NFP program.
- All enrolled NFP clients have a maximum of \$250 per grant year (Oct 1-Sept 30).

Steps Involved in Activity:

1. All NFP staff will be trained in this policy.
2. All enrolled NFP clients must complete **three visits** before their nurse home visitor (NHV) discusses available Flex Funds.
3. Flex Funds cannot be used to purchase alcohol, tobacco, or firearms. Each client will sign a Flex Fund Agreement. The agreement will be given to the Support Specialist who will track on the Flex Fund Tracking Log and then scan in the client's chart.
4. NHVs will determine if the use of Flex Funds is needed to provide a family with a good or service.
5. All enrolled NFP clients **must have at least one recent visit and/or three months of consecutive visits to show fidelity to the program models and thus, receive their Flex Funds.**
6. All Flex Funds requests shall be documented in an email to the NFP Administrator and/or NFP Supervisor for approval then entered in the Flex Fund Tracking Log.

All Flex Funds requests must be approved by the NFP Administrator and/or NFP Supervisor and can be denied at any time. All requests will be reviewed on a case-by-case basis.

7. The Flex Fund Tracking Log will include the spending by date, client name, cost, item given and other comments or details appropriate to the transaction.
8. Once approved, the NHV can utilize the funds for their intended purpose by:
 - Using a procurement card or
 - Submitting a request to have a check cut by the City





Western Wisconsin Nurse-Family Partnership Consortium

9. When using a procurement card, the NHV will obtain receipts for all purchases and submit by following the ECCCHD Procurement Card Process.
 - **Indicate the client number on the Procurement card statement under “Vendor Description”. Use the following Org Code: 260-2083; Object Code: 6716; Project #: 25212.**
10. The NHV can go shopping with the client to obtain tax-free items utilizing a procurement card.
11. When submitting a request to have a check cut, we will need the following:
 - Requests need to be submitted by Wednesday to have the check cut on Friday. For emergencies, please see NFP Administrator or NFP Supervisor.
 - Send the following in an email with FLEX FUNDS REQUEST in the subject line to the NFP Administrator and NFP Supervisor:
 - Who check will be made out to (vendor)
 - Address
 - Amount
 - Client number
 - Org Code: 260-2083; Object Code: 6716; Project #: 25212
 - Date needed
 - Attach completed Flex Fund Receipt Letter.
 - NFP Administrator/NFP Supervisor will forward the email to Budget Specialist/ Office Associate/Program Specialist.
 - Budget Specialist/Office Associate/Program Specialist will verify if a W-9 is on file for the vendor. If no W-9 exists, administrative staff would work with NFP Administrator to obtain a signed W-9 through email preferably. If there is no W-9 on file, a check cannot be cut until a W-9 is on file.
 - Checks can be picked up on Friday afternoon. Person picking up the checks will deliver to NFP Administrator/NFP Supervisor. The check and memo will be sent out by the NFP Administrator/NFP Supervisor.
12. Documentation will be made in “Flex Funds Tracking” by the NFP Administrator/NFP Supervisor.
13. The NHV will document in client's chart in Nightingale Notes.





Western Wisconsin Nurse-Family Partnership Consortium

Forms:

- NFP Flex Fund Tracking Log
- Flex Fund Agreement
- Flex Fund Receipt Letter

Approved By:

Health Director: _____

Board of Health Chair: _____

Medical Advisor: _____



**Fact Sheet – 10/28/2020 Board of Health Meeting****Agenda Item 5.e****Wisconsin Family Foundations Comprehensive Home Visitation Program Grant**

Eau Claire, Chippewa, and Dunn Health Departments have received notification that the Western Wisconsin Nurse-Family Partnership (NFP) Consortium will continue to receive Wisconsin Family Foundations Comprehensive Home Visitation Program (FFHV) funding. This funding will help fund a portion of associated program costs for the NFP Program. The NFP Program is a national evidence-based home visitation program for low-income first-time pregnant women and their children and has been in existence in the Chippewa Valley since 2015. This grant opportunity will allow us to continue with program work as well as continue participation in the pilot project bringing this evidence-based program to multiparous women. The FFHV provides funding to agencies working on one of four intensive, evidence-based programs (such as NFP) to improve outcomes in six focus areas:

- Improved maternal and child health
- Prevention of child injuries, child abuse, neglect and maltreatment
- Increased school readiness and achievement
- Reduced domestic violence
- Improved family economic self-sufficiency
- Greater coordination and referrals for other community resources and support

All of these focus areas are in alignment with the goals of the NFP Program. The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant offered through the federal Maternal Child Health Bureau provides the majority of FFHV funding. A portion of funding for FFHV comes from the Temporary Assistance for Needy Families grant (TANF) and General Purpose Revenue from the State of Wisconsin. There are currently 22 agencies and tribes that receive this funding in Wisconsin through a competitive grant process.

Our Consortium will receive \$400,000 in the second year of the 3-year grant cycle and the ECCCHD will serve as the fiscal agent. The funding will be used to cover Consortium costs that all three agencies incur such as data support, program/nurse consultation fees and the remaining will be split between the three counties. The estimated amount that the ECCCHD will receive for home visiting services is \$257,000. Funds will be used to cover a portion of program costs, including staff training and development, program administration, client support materials, and some staff time.

Budget Implication:

Approximately \$257,000 for administration and delivery of the NFP Program at the ECCCHD.

Staff recommendation:

Accept Wisconsin Family Foundations Comprehensive Home Visitation Program funding in the amount of \$400,000 from October 1, 2020 through September 30, 2020 to continue providing the Nurse-Family Partnership program for the Chippewa Valley in partnership with Chippewa County Department of Public Health and the Dunn County Health Department.

Prepared by Beth Draeger, Healthy Beginnings Division

**Fact Sheet – 10/28/2020 Board of Health Meeting****Agenda Item 5.f****Emergency Paid Sick Leave (EPSLA)**

In April, we brought information regarding human resource changes due to the COVID-19 public health emergency to the Board of Health. Included was information regarding flexible leave policies in the event of a quarantine or isolation situation of an employee or qualifying family member. Attached is an addition to these policies regarding a one-time allotment of emergency paid sick leave (EPSLA) outside of an employee's existing bank to cover certain isolation or quarantine events.

Health Department employees are exempt from the Families First Coronavirus Response Act legislation. However, we recognize that health department employees may still need to isolate or quarantine due to exposure to COVID-19. To reduce the impact of this for employees, any leave-eligible employee who is advised by their health department or health care provider that they must quarantine or isolate due to illness, exposure to illness or a qualifying family member's illness, and who is unable to work from home, will have up to 2 weeks (by FTE) of sick leave available to cover that time outside of their normal sick leave banks. This proposal will be retroactive to cover those employees that had a qualifying event beginning April 1, 2020 or later.

This will not apply to situations where an employee has or does voluntarily elect to travel or participate in an event that then requires a self-quarantine per our travel guidelines. In those cases, employees will continue to be permitted to work virtually or to utilize vacation, compensatory time, or floating holidays during their absence.

Budget Implication: Undetermined. Up to two weeks of paid time per benefit-eligible employee that is isolated or quarantined.

Staff recommendation: Approve the Emergency Paid Sick Leave Policy as drafted.

Prepared by Tegan Ruland, Operations



Category: Temporary

Subject: Emergency Paid Sick Leave (EPSLA) Policy

Date: October 1, 2020, Effective as of April 1, 2020

Purpose:

In response to the public health crisis created by the pandemic spread of COVID-19, the Health Department desires to provide and maintain a safe and healthy workplace, complying with applicable laws. The Health Department wishes to recognize the dedication of those employees whose positions have been exempted from the Federal Families First Coronavirus Response Act (FFCRA) and are deemed essential for COVID-19 response. All health department employees occupy these positions that are essential to carry out their duties to serve the public and, at times, may be at a higher risk for exposure.

Policy Statement:

- I. The Health Department has implemented a Temporary Emergency Paid Sick Leave (EPSLA) program for COVID-19 related needs for benefit-eligible full-time and benefit-eligible part-time employees exempted from FFCRA provisions. Such leave will provide up to a total of 80 hours of additional paid sick leave for full-time employees (pro-rated for regular part-time employees) who have been employed at least 30 days who are unable to work (or telework) and are experiencing any of the following conditions:
 - a. The employee tests positive for COVID-19;
 - b. The employee has been ordered or directed to self-quarantine or isolate by a doctor due to COVID-19 contact or symptoms; or
 - c. The employee has been directed by a public health department to self-quarantine or isolate due to exposure to COVID-19.
- II. Paid leave is not available if the employee is able to work remotely and that work has been approved by the employee's supervisor. Once EPSLA hours have been exhausted and, if the employee is still unable to return to work, the employee may use their accrued leave balances. In those situations where employees have no option other than to use leave without pay (LWOP), benefits will not be prorated.
- III. Employees may be eligible for regular FMLA leave if the employee has a COVID-19 diagnosis and meets the normal requirements for FMLA leave. An employee who is not ill but merely quarantined because of coming into contact with COVID-19 is not eligible for regular FMLA leave. Any EPSLA leave taken due to a COVID-19 diagnosis will run concurrently with any regular FMLA leave.
- IV. EPSLA leave provides a one-time total of 80 hours (pro-rated for part-time employees) for use until December 31, 2020, or until the end of the determined COVID-19 public health emergency. EPSLA leave does not provide 80 hours for each condition. Hours will be paid at the current rate of pay. Use of EPSLA time will not be considered hours worked when determining an employee's eligibility for compensatory or overtime pay.

This temporary policy is not intended to replace any existing ECCCHD leave or paid time off policies.

Requesting Emergency Paid Sick Leave (EPSLA)

Employees may request this leave either orally or in writing. Documentation of the reason for the leave will be required and may include a medical note, an email, or letter from a health care provider or public health agency.

Expiration

The EPSLA program expires on December 31, 2020 or the end of the determined COVID-19 public health emergency.

Fact Sheet – 10/28/2020 Board of Health Meeting**Agenda Item 5.g****Influenza (Flu) Shot Fee Waiver**

Preventing influenza in the community is a core public health service. Influenza and SARS-CoV-2 viruses are expected to circulate at the same time during the upcoming 2020- 2021 influenza season. The best way to prevent influenza is to get a flu shot. It will be even more important for the public to get a flu shot during the 2020-21 season to help differentiate between influenza and COVID-19 since many of their symptoms are similar.

We are using our flu vaccination clinics to prepare for mass vaccination once COVID-19 vaccine is available. We have changed the model for our flu vaccination clinics for the 2020-21 flu season to test drive through vaccination clinics which is the model we hope to use for COVID-19 vaccination. Please see attached flyer for details of the flu vaccination drive through clinics. Vaccine provided by the Vaccine for Children (VFC) Program funding will be offered to any child 6 months through 18 years at no charge regardless of insurance coverage at these clinics.

Every year the health department purchases influenza vaccine to administer to adults for a fee at our mass clinics and in our regular health department immunization clinics. The 2020-21 Board of Health approved fee for a flu shot is \$40.00. This year, we propose waiving the fee for flu vaccine for adults requesting vaccination at our drive through flu vaccination clinics to increase influenza vaccination rates, test our mass vaccination plans, and hopefully reduce the spread of influenza in our community.

The fee waiver would only be for the drive through clinic events. Outside of those events, adults with insurance will be referred to their normal healthcare provider or pharmacy for vaccination or offered flu vaccine at our regular health department immunization clinics for \$40.00. We will bill Medicare for those with that coverage. The average Medicare reimbursement rate is around \$30.00 per dose. Any un or under-insured adults presenting at our normal health department vaccination clinics will be vaccinated at no charge.

Additionally, the Wisconsin Immunization Program provided funding for additional flu vaccine to administer people experiencing homelessness in the old Shopko building on Wednesday, October 28. We anticipate immunizing 60 people at this walk-in clinic.

Budget Implications:

The health department purchased 100 doses of influenza vaccine for the 2020-21 season a total purchase cost of \$1648.49

Staff Recommendations:

Waive the BOH fee for adult influenza vaccine for those presenting at the drive through flu vaccination clinics and who are un/under-insured presenting at our health department immunization clinics.

Prepared By Paulette Magur, Communicable Disease Division Manager

Get your **Flu Shot!**

Drive-Thru Flu Shot Clinics

WHO Open to all Children (ages 6 months - 18 yrs)
(whether they have insurance or not)

*We encourage individuals to visit their healthcare provider and pharmacies for flu shots as well!

COST FREE! (while supplies last)

**WHEN/
WHERE**

Saturday, October 24, 2020, 10am-3pm
Augusta Senior and Community Center
616 W. Washington Street, Augusta, WI 54722

Saturday, November 7, 2020, 10am-3pm
Indoor Sports Center (Soccer Park Parking Lot)
3456 Craig Rd, Eau Claire, WI 54701

**TIPS FOR
FASTER
SERVICE**

- Print, fill out, and bring the consent form with you.
Find it here: <http://bit.ly/FluShotEC>
- Wear a sleeveless shirt.

SCAN ME



! If any of the statements below applies to you, we **cannot** give you a flu shot.

- If you or anyone in your household is under quarantine or isolation due to COVID-19.
- If you or anyone in your household is experiencing any of the following symptoms: Headache, fever, cough, chills, shortness of breath, vomiting, diarrhea, nausea, fatigue, loss of taste or smell, sore throat, congestion, or runny nose.
- If your child is uncooperative, due to safety reasons.

Questions? Call us at 715-839-4718³⁴
or visit flushot.echealthdepartment.org

Board of Health Meeting 10/28/2020

Agenda Item 6.a

Eau Claire City-County Health Department Report to the Board of Health

Staff Updates:

Cathi Tynnismaa, Office Associate, is moving and has resigned from her current role with the Health Department. She has been a wonderful asset for the last three years and will be missed. We are thankful that we will still be able to work with her as she will move into a temporary Disease Investigator role which can be done remotely. We wish her well in her new endeavors!

Amanda Porter joined the Department on October 19 as an Office Associate, filling the role that will be vacated by Cathi. We are excited to have her joining us and to have the opportunity to train with Cathi before her departure. Amanda has a background as an Office Manager and in Accounts Receivable/Payable positions. We are excited to have her join our team!



Kate Kensmoe has joined the Community Health Promotion Team as a full time Community Health Educator working in the alcohol and other drug abuse prevention programs. She has been with ECCCHD since January of this year as she worked in Policy and Systems Division as a preceptor with Cortney Draxler as part of her bachelor's degree. Kate graduated from UW La Crosse with a Public Health- Community Health Education degree in May 2020. She has continued working at the department as an LTE Project Specialist supporting COVID-19 response and chronic disease prevention.

Joe Kalscheur will be transitioning to a new role with the Department. He will be taking over the Emergency Preparedness position replacing Natasha. Natasha will continue working with us for a few months from her home in Virginia in order to orient Joe to his new position and work on some COVID related grant items.

Brenda Scheurer, Project Director of the Mental Health Matters grant, completed a six-week project management training course. The skills she learned in the course enhanced her 15 years of experience in leading grant-funded projects. She later sat for a certification exam covering the following project management domains: initiating, planning, executing, monitoring and controlling, and closing. She passed the exam, earning the globally recognized PMP (Project Manager Professional) designation offered by the Project Management Institute.

Altoona City Vaping Work Plan

Emily Carlson, Youth Advocacy Advisor, was asked to attend Altoona's September 24th City Council meeting where Mike Golat, City Administrator, presented the Altoona City Vaping Work Plan. This plan was developed out of planning that had been done with ECCCHD and leaders from the Altoona community for the purpose of collaboration around vaping cessation and prevention. Those involved were Mike Golat- City Administrator, Heidi Eliopoulos – Superintendent of Altoona Schools, Kelly Bakken – Altoona Chief of Police, Joyce Orth – Communications Coordinator for Altoona Schools, Roy Atkinson – Management Analyst, and Denise Wirth-Community Health Promotion Manager, Alison Harder- Alliance Facilitator, and Emily Carlson, Youth Advocacy Advisor from the Health Department. During the planning meetings the Health Department staff provided support to the work group with strategies including policy, youth engagement and media campaigns, of which the attached workplan was created.

During the city council meeting, Mike Golat presented the work plan to the Council and Emily Carlson answered council's questions around the work plan representing the Health Department perspective. The council was pleased to hear that the last time WI Wins compliance checks were done in the county, we were

100% compliance. Some of the members of council expressed thanks for the support and collaboration from the Health Department and the work plan was passed unanimously. See attached work plan and WI Wins informational sheet.

Opioid Program

Alison Harder and Sarah Dillivan-Pospisil conducted a Narcan training for 12 staff at Vantage Point Clinic & Assessment Center on Wednesday, September 9. The training was conducted virtually due to the COVID-19 pandemic. Narcan is an opioid antagonist, meaning it can restore breathing in a person experiencing an opioid overdose. The Eau Claire City-County Health Department is able to distribute this nasal-spray formulation of Narcan as a participant in the WI DHS Narcan Direct Program. Sarah was able to talk about prescription drug misuse and offer lock boxes and Deterra bags which were also distributed to the clinic.

The Strategic Prevention Framework Partnerships for Success (PFS) grant continued to provide outreach on medication safety. Funds were used to purchase 200 lockbags that were donated to the Eau Claire Backpack Program hosted by The Community Table.

The project identified three objectives:

1. Provide Eau Claire's homeless population with items for the day-to-day life.
2. Encourage dignity and worth of individual receiving backpacks.
3. Allow for open conversation with patrons at The Community Table about their needs.

Sixty-eight additional lockboxes were purchased due to increased need. Outreach boxes were filled with - lockboxes, lockbags, magnets, handouts, and doodle notebooks which were distributed throughout the county.



The Community Table and Boys and Girls Clubs of the Greater Chippewa valley each received a \$500 incentive for participating in an online training to increase the awareness of prescription opioid misuse and heroin use. The hour-long training included four modules: The Opioid Epidemic, The Science of Opioids, The Reality of Opioids, and The Power of Prevention. Learn more at Operation Prevention, <https://www.operationprevention.com/workplace>

Five billboards were installed in the City of Eau Claire to promote medication safety.

Locations include: Water St at 7th Ave, 3015 London Rd, 1740 Brackett Ave, Madison St at Germania, 631 East Madison St



To Agenda>>

MEMORANDUM

TO: Altoona City Council

FROM: Michael Golat, City Administrator

SUBJECT: Summary of **THURSDAY, SEPTEMBER 24, 2020** Council Meeting Items

Provided below for your consideration is a summary of the **THURSDAY, SEPTEMBER 24, 2020** Council Meeting agenda items.

(IX) NEW BUSINESS

ITEM 9 - Presentation by Staff regarding Smoking Cessation Campaign with possible action to follow.

As you are aware, during discussion in June regarding issuance of tobacco sales licenses, Council directed staff to develop a plan for reducing tobacco and vaping product use in Altoona. City Administration and the Police Chief have been working with the Altoona School District and the Eau Claire City/County Health department to develop such a plan. The plan includes several elements that we are seeking input from Council prior to proceeding.

Below is a list of initiatives we would like to pursue:

1. Update City's smoking ordinance consistent with Health Department recommendations and best management practices.
2. Update City ordinance to include an explicitly smoking and vaping prohibition on school property for all. Likely consolidating chapters 8.06 and 9.24.
3. Research options for prohibiting smoking in parks, portions of parks or at city-sponsored events in city parks.
4. Develop a joint marketing approach/plan--apply for grants to support the campaign.
5. Work towards installation of vape detectors at the school.
6. Update school policies related to smoking and vaping.
7. Engage student groups at the middle school level to discourage smoking and vaping.

Staff will present the plan and request input from Council on direction or any other ideas.



WISCONSIN WINS

HELPS KEEP OUR KIDS TOBACCO-FREE

Wisconsin Wins is dedicated to keeping tobacco out of the hands of youth and stopping tobacco addiction before it ever starts.



Nearly 9 out of 10 daily smokers tried their first cigarette **before the age of 18.***

Statewide Approach

The Wisconsin Wins program uses a strategic approach to achieve success.



Community Partnerships

Working with law enforcement and businesses to make our communities healthier.



Retailer Training

Providing free online training to retailers so they can prevent underage tobacco sales and avoid costly fines.



Compliance Checks

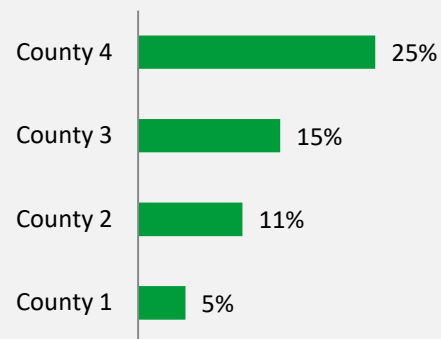
Congratulating retailers and employees who protect minors from the unhealthy effects and reminds retailers who sell tobacco of the law and possible consequences.

Local Look

Replace text with an introduction to the points below.

- Replace text with local information on number of retailers who have taken the smokecheck.org training
- Replace text with local information on number of public outreach/retailer education activities conducted
- Replace text with discussion of trend data and identify areas of weakness/opportunities for growth
- Replace text with local information on community partnerships, such as law enforcement

Sales to minors by county



In 2002, 34% of Wisconsin retailers sold tobacco products to minors. Today, that number is in the single digits. **Wisconsin Wins works!**



Board of Health Meeting 10/28/2020

Agenda Item 5.b

September 2020 Media Contacts

INTERVIEW

9/2/2020	Title: LIVE: Incident update for September 2, 2020 Link: https://www.facebook.com/eauclairehealth/videos/350631909405626/	Topic: Communicable Disease Staff: Lieske Giese
9/3/2020	Title: EC County reminding residents with well water to test yearly Link: https://wqow.com/2020/09/03/ec-county-reminding-residents-with-well-water-to-test-yearly/	Topic: Safe Food and Water Staff: Audrey Boerner
9/9/2020	Title: Over half of September COVID cases tied to uwec Link: https://wqow.com/2020/09/09/over-half-of-september-covid-19-cases-tied-to-uwec/	Topic: Communicable Disease Staff: Lieske Giese
9/9/2020	Title: LIVE: Incident update for September 9, 2020 Link: https://www.facebook.com/eauclairehealth/videos/408783700104144/	Topic: Communicable Disease Staff: Lieske Giese
9/16/2020	Title: Students push for all in-person learning Link: https://www.weau.com/2020/09/16/students-make-push-for-all-in-person-learning/	Topic: Communicable Disease Staff: Audrey Boerner
9/16/2020	Title: Wisconsin Counties top the nation in fastest-rising cases: NYT Link: https://www.leadertelegram.com/covid-19/wisconsin-counties-top-the-nation-in-fastest-rising-cases-nyt/article_3b9f5ccc-359b-5171-8412-7a7158326d34.html	Topic: Communicable Disease Staff: Audrey Boerner
9/17/2020	Title: New PSA campaign focuses on returning to school Link: https://www.weau.com/2020/09/17/new-psa-campaign-focuses-on-returning-to-school/	Topic: Communicable Disease Staff: Audrey Boerner
9/17/2020	Title: LIVE: Incident Update for September 17, 2020 Link: https://www.facebook.com/eauclairehealth/videos/651812942205770/	Topic: Communicable Disease Staff: Lieske Giese
9/24/2020	Title: LIVE: Updates for September 24, 2020 Link: https://www.facebook.com/eauclairehealth/videos/728758137707442/	Topic: Communicable Disease Staff: Lieske Giese

PRINT ARTICLE

9/1/2020 Title: Flu Topic: Communicable Disease
Staff: Allison Gosbin

Link: [Not Available](#)

9/1/2020 Title: Fit Family Newsletter Topic: Chronic Disease
Prevention
Staff: Alexis Tuma

Link: [Not Available](#)

9/1/2020 Title: Fit Families newsletter Topic: Chronic Disease
Prevention
Staff: Alexis Tuma

Link: [Not Available](#)



Eau Claire City-County
Health Department

Service Recognition Certificate

In appreciation of your 22 years of dedicated service and expertise in the public health laboratory, as well as your continued support to countless other Health Department programs and services.

This certificate is presented to

Theodore "Ted" Johnson

CHEMIST

Signature Director/Health Officer

Date

Signature President, Board of Health

Date

Informational Item – 10/28/2020 Board of Health Meeting
2021 Budget Update
Agenda Item 6.d

The 2021 budget process is progressing. In September, the City, County and Health Department finance staff and leadership met to discuss 2021 budget and tax levy. We continue to work through issues with the City and the County. A meeting to more carefully look at COVID 19 and update revenue and expenses will be happening soon with the City and County. Overall there remains quite a bit of uncertainty about the impact of COVID in 2021.

This year the Health Department did not meet with the County Finance and Budget Committee as in years past. The County Administrator had developed a new process for these meetings and we will be working with them to determine how the Health Department budget is best reviewed by these county board members. We did provide them with documentation. The documents provided to the county at this point are attached. More information on the County is at: <https://www.co.eau-claire.wi.us/Home/ShowDocument?id=38126>.

There are 4 meetings with the City Council related to the City Operational Budget process some of which have already occurred. Attached are the materials that the City Council received from the Health Department. There is no specific time we are given to present our budget, but we will attend all work session meetings in case there are any questions. More information about the City is at: <https://www.eauclairewi.gov/home/showdocument?id=33594>

Since these submissions to the City and County, tax levy calculations were updated following the release of equalized values. This resulted in requests for the Health Department currently in front of the City and the County of \$1,283,090 from the County and \$1,955,400 from the City for a total of \$3,238,490. This is a total increase from 2020 of \$76,690.

Eau Claire City-County Health Department - 2021 Budget

Department Mission

The mission of the Eau Claire City-County Health Department is to promote health and safety for all Eau Claire communities. The health department's work is guided by seven overarching principles:

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

Strategic Goals - The 2017-2021 health department strategic plan goals are to:

- Increase utilization of program and population data
- Invest in a strong workforce and infrastructure
- Engage in community collaborative efforts to improve health and safety
- Develop long-term fiscal and operational strategies supporting innovation and sustainability

Programs & Services

- **Healthy Homes and Places** - Creating safe environments; consists of services including inspections, investigations and outreach related to lead, radon, mold, natural disasters, environmental emergencies, etc.
- **Safe Food and Water** - Assuring health protection in recreational facilities and restaurants. Includes investigation and inspection of food and water provided to the public, testing of private drinking water, assisting the public in reducing risks of food and waterborne illness.
- **Healthy Growth and Development** - Ensuring kids and families have the best health outcomes possible through policies and programs addressing reproductive, prenatal, and family health. Includes home visitation, family planning, WIC, school/community partner collaboration, etc.
- **Communicable Disease** - Preventing diseases that spread from person to person, animal to person, and environment to person. Includes education, preventive medicine distribution, vaccination, disease testing, environmental monitoring and disease outbreak investigation and prevention.
- **Chronic Disease** - Programs and policy work to prevent or reduce the effects of chronic diseases such as diabetes, heart disease, and lung cancer. Includes education, screening, policy and organizational changes. Chronic disease/obesity have been identified as a priority in the two most recent community health assessments.
- **Mental Health Alcohol and Tobacco** - Developing a community fostering mental well-being, addressing inappropriate consumption/negative health effects of alcohol, tobacco, and other drugs. Includes youth programming, policy change, compliance checks, community collaboration and education. Mental health and substance misuse have been identified in our community health assessment as top needs in our community.

Strategic Direction and Priority Issues

One of the Health Department's guiding principles is Prevention. This is core to all the work we do. If we prevent disease, disability, and early death, we save lives and money. The Department continues to focus on supporting the work that the County does in key areas by encouraging primary prevention rather than just treatment and intervention after problems happen.

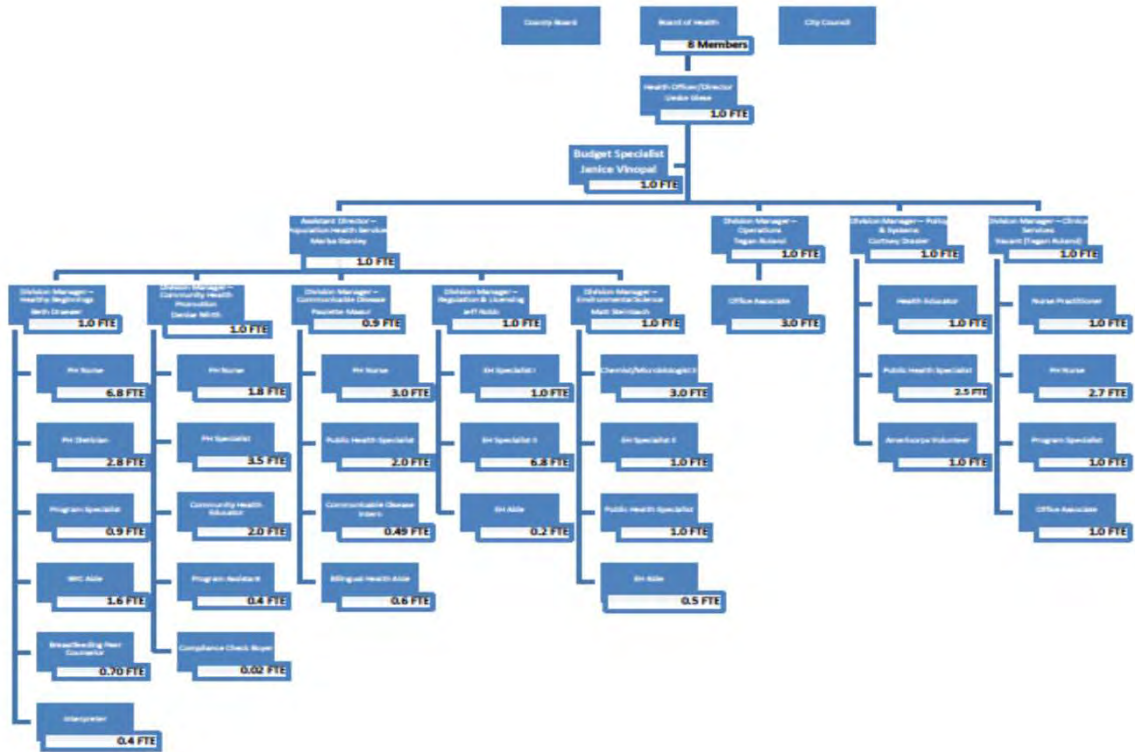
The **County Strategic Plan** identifies **Funding and Provision of Services** as 2 Strategic Goals. The Health Department's experience with and focus on providing evidence-based programs that address root causes rather than symptoms is a key advantage to this county. We unfortunately do not have the staff capacity to take full advantage of the opportunity to prevent negative outcomes. Below are a few examples of the Health Department priorities that align with the County focus. Most of these priorities receive no sustainable core funding beyond tax levy. When needs increase and tax levy funding is relatively flat we lose opportunities for the cost savings that prevention can bring. We do support some priorities with a combination of fees, competitive grants, and donations and have a vigorous process for costing our services and finding creative revenue sources when possible. Prevention funding is an ongoing challenge as the results are seen many years in the future. We also will have ongoing challenges connected to responding to COVID-19 and the potential for mass vaccination. We are anticipating this as a key public health activity in 2021. Other priorities include:

- **Partnerships** – the department “sets the table” for conversations around broad health topics including mental health, substance misuse, obesity, environmental health, communicable disease, healthy families. This is challenging and time-intensive work. It does result in shared priorities and action that have the ability to impact outcomes.
- **Health Equity** – we have continued to commit to serving the whole county population, particularly those that have unequal health outcomes because of issues such as poverty, race, age, language, or sexual orientation.
- **Primary Prevention with Young Families** – we continue to work to serve pregnant women and young families through the national evidence-based Nurse Family Partnership program which has longitudinal outcomes related to issues such as incarceration, poverty, education, drug use, and child abuse/neglect. With limited funding we have not been able to get to full caseload and serve all at-risk families but we have prioritized this program where possible and have to limit broad-based maternal child health efforts.
- **Environmental protection** – we continue to focus on high-quality environmental services related to lab testing, inspections, and vectors. Protecting the population by preventing those things that impact our food, water, air, housing, and more makes a difference in the health of all people.
- **Complex Health challenges** – the work we do includes considerable increases in statutorily required communicable disease and environmental health threat investigation, growing obesity and mental health issues, devastating alcohol, opioid, and methamphetamine use/misuse, significant challenges for young families living in poverty, and emerging issues related to the connection of housing to health. No increases in staff mean services are limited in these growing areas.

Trends and Issues on the Horizon

- We increasingly have to rely on competitive, time-limited grants to fund core services. Wisconsin is almost last in the nation for state funding for state mandated public health programs. We have been successful writing grants but there is an enormous negative long-term consequence for sustainability of services.
- Health challenges in our community continue to be more complex with no simple program or policy solutions. The health department is increasingly asked to engage in “root-cause” issues such as homelessness, poverty, incarceration, housing, mental health, and lack of access to care. These issues have an opportunity for prevention but take complex and strategic long-term action.
- The county population continues to change with resulting impact on prevention needs. Of note is our growing older adult population as well as our growing population with racial and economic disparities in health outcomes.
- Employment and retention of qualified staff continues to be a considerable challenge with competitive market for nurses, lab professionals, and others. A high level of education and experience is needed for the complex professional jobs at the health department.
- The health department has had the considerable challenge of leading COVID-19 pandemic response in 2020 and will continue to be engaged in response efforts in 2021. This will include planning and implementation of mass vaccination when a vaccine becomes available. Uncertain needs and uncertain funding will remain a challenge in 2021 related to this public health emergency.

Organizational Chart



Program Financials - See Budget Detail Tab

EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT

REVENUE

	Actual 2019	Adopted 2020	Prelim 2021	2020-21 Change	2020-2021 % Change	% of Budget
Tax Levy City	\$ 1,887,100	\$ 1,918,600	\$ 1,952,200	\$ 33,600	1.8%	25.7%
Tax Levy County	\$ 1,214,200	\$ 1,243,200	\$ 1,265,000	\$ 21,800	1.8%	16.6%
Unfunded Pension City	\$ 16,900	\$ 16,500	\$ 16,100	\$ (400)	-2.4%	0.2%
Unfunded Pension County	\$ 10,323	\$ 10,100	\$ 9,800	\$ (300)	-3.0%	0.1%
Total Taxes	\$ 3,128,523	\$ 3,188,400	\$ 3,243,100	\$ 54,700	1.7%	42.6%
Intergovernmental Revenue	\$ 1,431,062	\$ 1,686,000	\$ 2,439,200	\$ 753,200	44.7%	32.1%
Licenses and Permits	\$ 704,557	\$ 729,000	\$ 694,200	\$ (34,800)	-4.8%	9.1%
Charges for Services	\$ 236,710	\$ 177,000	\$ 157,000	\$ (20,000)	-11.3%	2.1%
Charges for Services Intergovernmental	\$ 386,572	\$ 454,100	\$ 407,300	\$ (46,800)	-10.3%	5.4%
Misc Revenue	\$ 337,190	\$ 303,100	\$ 406,800	\$ 103,700	34.2%	5.3%
Use of Fund Balance	\$ (121,663)	\$ 222,100	\$ 258,000	\$ 35,900	16.2%	3.4%
TOTAL REVENUE	\$ 6,102,950	\$ 6,759,700	\$ 7,605,600	\$ 845,900	12.5%	100.0%

EXPENSE

Personnel	\$ 5,217,547	\$ 5,891,200	\$ 6,300,900	\$ 409,700	7.0%	82.8%
Contractual	\$ 486,748	\$ 448,600	\$ 819,200	\$ 370,600	82.6%	10.8%
Utilities	\$ 36,655	\$ 34,700	\$ 35,300	\$ 600	1.7%	0.5%
Fixed Charges	\$ 12,745	\$ 16,200	\$ 20,000	\$ 3,800	23.5%	0.3%
Supplies	\$ 217,985	\$ 229,900	\$ 241,700	\$ 11,800	5.1%	3.2%
Capital Purchases	\$ 104,004	\$ 112,500	\$ 162,500	\$ 50,000	44.4%	2.1%
Debt Service	\$ 27,266	\$ 26,600	\$ 26,000	\$ (600)	-2.3%	0.3%
TOTAL EXPENSE	\$ 6,102,950	\$ 6,759,700	\$ 7,605,600	\$ 845,900	12.5%	100.0%

#1 HEALTHY HOMES AND PLACES

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.

OUTPUTS

<i>*inspections include pre-inspections, routine inspections, re-inspections, second inspections, onsite visits, and complaint investigations unless otherwise noted.</i>		<u>2019</u>
# of radon consultations/calls		171
# of housing consultations/calls		2418
# of Housing complaint inspections:		208
# of health department initiated inspections and reinspections:		1054
# of Mobile Home Park inspections:		17
# of body art inspections:		30
# of campground inspections including special event campgrounds:		21
# of blood lead screening tests done		430
# of radon tests completed		200
# of responses to public health threats (environmental)		15
# of residences placarded as unfit for habitation		49
# of press releases, print articles, interviews on Healthy Homes and Places		5,5,7
# of Facebook posts on Healthy Homes and Places		33
# of interdisciplinary meetings to resolve human health hazard		6
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>2019</u>
Decrease injury/hospitalization related to environmental factors	% of housing complaints investigated	100%
	% of children with >5 mcg/dl bl lead that was brought below 5 within 6 months	25%
	% of licensed facilities inspected	100%
	% of placarded households resolved	61%
	% of total full housing inspections with violations in 3 or less categories	24%
	% of unsafe radon test that are provided education	100%

#2 SAFE FOOD AND WATER

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>*inspections includes pre-inspections, routine inspections, re-inspections, second inspections, onsite visits, compliant investigations (not foodborne illness complaints or schools inspections.</i>		<u>2019</u>
# of Restaurant inspections:		939
# of Retail Food inspections:		311
# of School inspections:		65
# food service samples (food products, swabs, utensils, etc) analyzed:		1216
# of Foodborne Illness Investigations:		27
# of private onsite wastewater treatment systems inspections/consultations:		1781
# of water samples (ground and surface) processed/analyzed		3219
# of recreational water (pools and beaches) investigations/inspections/consultations		1365
# of well locations permits issued (new and replacement):		124
# of Facebook posts on Safe Food and Water		24
# of press releases, print articles, interviews on Safe Food and Water		3,10,1
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>2019</u>
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%
	% of public wells with uncorrected deficiencies	1%
	% of recreational water inspections with 2 or less violations	
	90% of restaurant priority violations corrected at the time of inspection or first reinspection	

#3 HEALTHY GROWTH AND DEVELOPMENT

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

		2019
# of clients\visits receiving reproductive health/contraception services:		626/1129
# of WIC clients		2310
# of Nurse Family Partnership clients		200
# of Nurse Family Partnership visits		1520
# of MCH clients\visits		227/509
# of pregnancy tests administered		75
# of child vision/hearing screening completed		4716
# of adolescents trained in evidence based program		213
# of people/agencies who received Safe Sleep training (education and supplies)		18
# of Facebook post on Healthy Growth and Development		36
# of press releases, print article, interviews on Healthy Growth and Development		4,3,1
# of collaborative community meetings on Healthy Growth and Development		71
Performance Goal	Outcome Measures	2019
Decrease unplanned pregnancies	% negative pregnancy tests who receive birth control method	62.5%
Increase healthy birth outcomes	% of Women who had a positive pregnancy test in FPC referred to WIC/PNCC	60%
	%WIC clients enrolled in 1st trimester	33%
Increase early childhood health/healthy start to life	% of WIC breastfeeding incidence	79%
	% of WIC clients received recommended nutrition education contact	67%
	% of clients with medical home in first trimester	81%

#4 COMMUNICABLE DISEASE

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.

OUTPUTS

		<u>2019</u>
# of animal bite/exposures reports received:		161
# of immunizations administered during the year:		2165
# of seasonal flu shots administered during the year:		1031
# of outbreaks in nursing homes reported		10
# of clients screened for sexually transmitted infection:		727
# of newly diagnosed cases chlamydia		468
# of communicable disease reports		1183
# of HIV Partner Service client referrals		16
# of responses to public health threats (communicable disease)		17
# of Facebook posts on communicable diseases		31
# of press releases, print articles, interviews stories on communicable disease		13,19,30
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>2019</u>
Decrease vaccine preventable diseases	% of 2 year olds who received the recommended vaccinations	78%
	% of adolescents 11-26 who received the HPV vaccination	39%
	% of school age children fully immunized	91%
	% of those greater than 6 months old vaccinated for influenza	31%
Decrease reportable communicable diseases	% animal bites/exposures receiving follow up	100%
	% of communicable disease investigations completed	100%
	% staff trained in public health emergency Incident Command System	60%
Decrease STIs and communicable diseases	% STIs receiving treatment	99%

#5 CHRONIC DISEASE PREVENTION

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.

OUTPUTS

		<u>2019</u>
# of Farmers' Market Nutrition Education contacts		2863
# of Wisconsin Well Women Program (WWWP) Clients cases		26
# of Facebook posts on Chronic Disease Prevention		39
# of press release, print articles, interviews on Chronic Disease Prevention		14,39,23
# of collaborative community meetings on Chronic Disease Prevention		24
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>2019</u>
Decrease obesity	% of WIC farmers market vouchers redeemed	48%
	% of WIC children at a healthy weight	65%
	% of adults (age 20 and older) that report a BMI greater than or equal to 30	28%
Decrease chronic disease and cancers	% of WWWP eligible women received screening for cervical cancer through WWWP	42%
	% of WWWP eligible women 50-64 who received mammograms through WWWP	64%
	% of adults who are diagnosed with diabetes	8%
	Coronary heart disease hospitalization rate per 1,000 population	2.5
	Cerebrovascular disease hospitalizations rate per 1,000 population	2.3
Increase physical activity	% of WIC children with less than 2 hours of screen time daily	67%
	% of adults (age 20 and older) reporting no leisure-time physical activity	16%
	% of population with adequate access to locations for physical activity	83%
Increase access to healthy foods	% of population who lack adequate access to food	12%
	% of population who are low-income and do not live close to a grocery store	6%

#6 Healthy Living and Prevention

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

		<u>2019</u>
# of youth involved with Life of an Athlete/ SADD		41
# of trainings related to mental health:		
QPR		220/1036
ACEs/ Resiliency		544
Mindfulness		30
# of alcohol compliance checks		63
# of tobacco compliance checks		38
# referrals to 1st Breath		18
# of Facebook posts on Mental Health/Substance use		69
# of press releases, print articles, interviews on Mental Health/Substance use		21,18,34
# of collaborative community meetings focused on mental health		60
# of collaborative community meetings focused on alcohol misuse prevention		23
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>2019</u>
Decrease underage retail access to alcohol and tobacco products	% of licensed establishments who don't sell to minors during tobacco compliance	95%
	% of licensed establishments who don't sell alcohol to underagers during compliance	85%
Decrease misuse of tobacco, alcohol and other substances	% of births where mother reports smoking during pregnancy	14%
	% of adults reporting binge or heavy drinking	25%
	% of youth after SADD training who feel confident to create an accurate and valid activism targeted at youth risk behavior	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	95%
	% of youth after QPR program who feel "quite a bit prepared" or "very prepared" to ask the suicide question if needed	81%

City of Eau Claire 2021 Proposed Operating Budget



The mission of the City-County Health Department is promoting health and safety for all Eau Claire communities. To accomplish this mission, the Department provides a wide array of public health services through programs and policies that assure a safe and healthy environment, prevent disease and disability, and promote positive health practices. The Department collaborates closely with community partners to identify and respond to diseases and conditions that are preventable. Also provided are a broad array of programs and services mandated by state statute and local ordinance.

Communicable disease response efforts related to COVID-19 have been a priority for 2020 and will continue into 2021. These efforts are being coordinated through the incident command structure currently in place. Objectives:

- containment and mitigation of community spread of COVID-19;
- coordinated strategies to facilitate a safe and effective social and economic reopening and recovery;
- providing relevant, accurate information and resources to the general public, specialty populations, and key partners; and
- facilitating and supporting the development and implementation of community-wide health care surge and response plans and actions in coordination with local health care providers and state and federal agencies.

The health department accomplishes this work with a staff of 70 permanent employees (57.5 FTE). Tax levy from the City and County support less than half of the staff with the remainder of funding coming from fees and grants. Tax levy changes have not matched increases in staff costs, so fees and grants have been used to attempt to maintain and grow needed services.

2017-2021 Health Department Strategic Priorities:

- Increase utilization of program and population data.
- Engage the community in collaborative efforts.
- Invest in a strong workforce and infrastructure.
- Develop long-term fiscal and operational strategies.



The Eau Claire City-County Health Department promotes health and safety for all Eau Claire communities.



City of Eau Claire 2021 Proposed Operating Budget

City-County Health Dept.: Operations Division

Objective: Providing cross-departmental policy and technical assistance for all administrative functions including human resources, budget and finance, purchasing, data management, customer service, public information, training, and IT.

Outputs/Outcomes

- Supporting COVID-19 response efforts broadly for the Department and by providing leadership, drafting local orders, responding to public inquiries, and working with other government agencies and community partners.
- Opened an emergency operations center in response to COVID-19 with the Health Department Director acting as Incident Commander. Health department employees filled numerous roles within the Incident Command Structure.
- Developed and implemented a new Coronavirus webpage to assure public access to the most up-to-date information and data.
- Increased social media/local media presence related to communicable disease updates and data.
- Maintained national accreditation by the Public Health Accreditation Board to ensure we are providing the most efficient, effective, and targeted services to the residents of Eau Claire.
- Continued to institute StrengthsFinder assessment with all new and existing staff to assure agency focuses on building on employee's strengths.
- Met all fiscal requirements of multiple public and private funders with complex funding requirements and dates.
- Reviewed and updated over 240 health department related fees.
- Assured health care cost savings for employee health insurance through prevention and early intervention efforts.
- Updated workspaces for several areas of the department to improved efficiency and meet employee needs.
- Supported successful visits to County courthouse for thousands of residents and visitors entering the ground floor of the courthouse and needing directions and assistance.

City-County Health Dept.: Policy and Systems Division

Objective: Advancing policy and systems change across the department and community through health education, outreach, social marketing, grant writing, strategic planning, quality improvement and performance management, policy change, and advocacy.

Outputs/Outcomes

- Supporting COVID-19 response efforts broadly for the Department and by providing leadership, responding to public inquiries, working with other government agencies and community partners, disease investigation and contact tracing, and developing resource materials.
- Advanced the Eau Claire Healthy Communities Community Health Improvement Plan (CHIP) which focuses on key priorities of Mental Health, Substance Use, Alcohol Misuse, Chronic Disease and Obesity. The plan was created by a diverse coalition of residents, community organizations, schools, health care providers, businesses, faith communities and government agencies to prevent negative health outcomes and impact community system change.
- Promoted health in all policies by providing technical assistance to elected officials, department staff, board of health, and others on policy changes to improve health including keeping of poultry, bees, and public excessive intoxication ordinances.
- Provided public health and community partnership expertise to local work being done on housing, homelessness, and poverty as determinants of health

City-County Health Dept.: Clinical Services Division

Objective: Supporting quality primary prevention services for individuals through promoting reproductive health and facilitating safe, effective and successful family planning methods, reducing unintended pregnancies and decreasing sexually transmitted infections (STI).

Outputs/Outcomes

- Supporting COVID-19 response efforts through changes in clinical service provision, responding to public inquiries, and disease investigation and contact tracing.
- 626 women and men received reproductive health/family planning services during more than 1000 clinic visits. The clinic protects and promotes reproductive health for men and women through services including family planning education and methods, sexually transmitted infection (STI) testing and treatment, and reproductive cancer screening.
- 75 pregnancy tests administered with appropriate referral and interventions provided by nursing staff.
- Providing education, testing and treatment at McKinley Charter School and other schools in county.
- Collaborated with Vivent to increase HIV awareness and prevention outreach.
- 765 STI tests provided to individuals who may not have otherwise been tested.
- Implementing a shared services model for nurse practitioner services with four surrounding counties.

City of Eau Claire 2021 Proposed Operating Budget

City-County Health Dept.: Communicable Disease Division

Objective: Preventing and controlling communicable disease and preparing for/responding to outbreaks and public health emergencies.

Outputs/Outcomes

- Supporting COVID-19 response efforts by providing leadership, responding to public inquiries, conducting disease investigation and contact tracing, and working with other government agencies and community partners.
- Recruited over 25 new LTE positions to assist in disease investigation and contact tracing.
- 1389 **1120** communicable disease reports received follow up, **including two unusual mosquito-borne disease cases**. The health department follows-up on reportable diseases to help decrease the spread of illness and keep our community healthy and meet state statutes.
- 2178 immunizations given to infants, children and adults to assure protection against multiple communicable diseases.
- Partnered with schools, healthcare, and community providers to provide more than 900 influenza immunizations at mass immunization clinics for adolescents and adults including new clinic at the Indoor Sports Center.
- All local schools reported weekly illnesses data which was compiled and analyzed for syndromic disease surveillance to identify patterns of disease early.

City-County Health Dept.: Community Health Promotion Division

Objective: Improving health related to identified community health priorities including mental health, alcohol misuse, tobacco, chronic disease, obesity, nutrition, and access to care through individual and community services.

Outputs/Outcomes

- Supporting COVID-19 response efforts by responding to public inquiries, disease investigation and contact tracing, and working with other government agencies and community partners.
- Provided leadership for complex isolation and quarantine issues for populations experiencing homelessness.
- Enforcement in the community of tobacco and alcohol policy/statutes through compliance checks at local points of sale throughout City of Eau Claire and Eau Claire County.
- 1,256 youth & adults received Suicide Prevention Training- Question, Persuade, and Respond.
- 4,716 vision and hearing screenings in county schools.
- Collected 5,963 pounds of unused or expired medication in Eau Claire County through the Prescription Drug Take Back initiative – almost double the amount in 2018.

City-County Health Dept.: Healthy Beginnings Division

Objective: Creating a healthy start for all families from pregnancy through early childhood with individual and community services such as assuring prenatal care, providing breastfeeding support and education, increasing parenting skills, providing intensive nursing care coordination for high-risk families, and promoting healthy nutrition.

Outputs/Outcomes

- Supporting COVID-19 response efforts by responding to public inquiries, disease investigation and contact tracing, and working with other government agencies and community partners.
- Provided leadership for community phone bank to manage public coronavirus questions and concerns.
- Implemented new technologies to continue to serve families through a virtual environment.
- Implemented the Fit Families program with 55 WIC families to improve their physical activity.
- Provided nutrition screening and education in partnership with the Eau Claire Area School District to care providers for over 108 low-income children enrolled in the Head Start program.
- Served 2,310 mothers, infants and children in the Women, Infant, and Children's (WIC) program to support healthy pregnancy and early childhood growth and development.
- Provided 112 high risk pregnant women with intensive home visitation services including more than 1500 visits through the evidence-based Nurse Family Partnership (NFP) program.
- Assisted 245 women participating in the WIC program initiate and continue breastfeeding through the program's WIC Breastfeeding Peer Counselor.
- Received Generous Jurors Grant for Safe Sleep program and distributed 20 portable pack n' plays to promote safe sleeping environments.
- Added 5 new grocery stores in Eau Claire County that accept WIC benefits.
- Coordinated community events to support healthy families through WIC, Family Resource Center, the Northwestern Breastfeeding Network, Feed my people, and United Way.

City of Eau Claire 2021 Proposed Operating Budget

City-County Health Dept.: Regulation and Licensing Division

Objective: Assuring safe and healthy regulated entities and preventing disease and injury through regular inspection, education, sample testing, enforcement, and response in homes, businesses, and the community.

Outputs/Outcomes

- Supporting COVID-19 response efforts by providing leadership in communications with licensed business to ensure compliance with local and state orders, responding to public inquiries, disease investigation and contact tracing, and working with licensed businesses to ensure safe operations in the community.
- Completed 939 inspections at restaurants and 311 inspections at retail food stores for health and safety of food served and sold.
- Supported safer and healthier housing in Eau Claire through 2,418 phone consultations and 1,054 inspections related to housing.
- Completed external housing survey on eastside of City which included rating 3,422 buildings for potential need to conduct health and safety inspection.
- Conducted hoarding cases and dangerous living situation investigations in cooperation with law enforcement, human services and housing agencies. 49 residences were placarded as unsafe.
- Provided regional Radon Information center services and distributed 261 radon test kits.

City-County Health Dept.: Environmental Science

Objective: Protecting from disease and assuring healthy environments and identifying and responding to environmental threats related to air, water, food, rodents/inspects, radiation, and more.

Outputs

- Supporting COVID-19 response efforts by responding to public inquiries, disease investigation and contact tracing, and working with licensed businesses to ensure safe operations in the community.
- Conducted weekly testing of beaches for bacteria and surveillance for harmful algae blooms to ensure public safety. A total of 474 samples were collected and analyzed from local beaches. Beaches were closed on 11 occasions for a total of 78 days for elevated bacteria.
- Completed 21 mosquito sampling events to contribute to regional West Nile virus surveillance.
- Conducted 35 sampling events for deer ticks at urban & rural parks. Each collected deer tick is 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. Education and outreach provided at City parks on prevention.
- Tested 1,216 food service samples for bacteriological contamination in the public health laboratory.
- Performed 3,462 laboratory analyses on drinking water samples from Eau Claire County.
- Followed up on 161 animal bites/exposures to assure protection against rabies.
- Collectively issued 191 permits (state or county) for the installation, replacement, and reconnection Private Onsite Wastewater Treatment Systems (POWTS) in Eau Claire County.
- Issued 124 private well location permits under the State of Wisconsin's County Well Delegation Program.

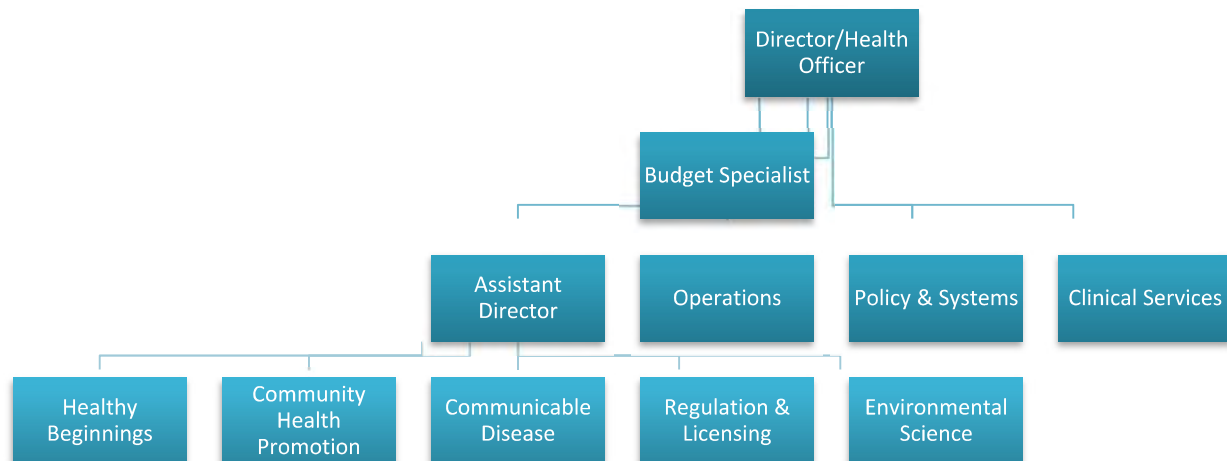
City of Eau Claire 2021 Proposed Operating Budget

Positions at the Eau Claire City-County Health Department:

Health Dept	2019	2020	2021
Authorized Full Time			
Director/Health Officer	1	1	1
Assistant Health Dept	1	1	1
Managers/Supervisors	6.9	6.9	6.9
Budget Specialist	1	1	1
Public Health Nurse	13.7	12.4	15.3
Public Health Dietician	3.4	3.4	3.7
Environmental Health	8.8	8.8	8.8
Chemist/Microbiologist	3	3	3
Community Health Educator	2	3	3
Health Benefits Specialist	0.75	0	0
Public Health Specialist	5	7	9
Administrative Support	9.7	9.3	9.39
Bilingual Support	0.7	0.7	1
Total FTE	57.0	57.5	63.09 *

* Increase in fte in 2021 is grant related

Eau Claire City-County Health Department Organization Chart:





City of Eau Claire 2021 Proposed Operating Budget

City-County Health Department Budget Summary

	2019 Actual	2020 Adopted	2020 6 Month Actual	2020 Projection	2021 Proposed
Revenue s & Other Financing Sources:					
Intergovernmental	\$ 1,431,062	\$ 1,686,000	\$ 467,645	\$ 1,900,000	\$ 2,439,100
Licenses & Permits	704,557	729,000	321,615	600,000	694,700
Fines & Forfeitures	1,300	-	-	-	-
Charges For Services	235,410	177,000	72,553	160,000	156,500
Charges For Services - Intergovernmental	1,520,499	1,622,000	690,736	1,622,000	1,614,690
Miscellaneous	336,929	303,100	179,290	303,100	406,600
Other Financing Sources	<u>1,994,857</u>	<u>2,020,500</u>	<u>1,969,930</u>	<u>2,020,500</u>	<u>2,053,800</u>
Revenue s & Other Financing Sources: Total	<u>6,224,613</u>	<u>6,537,600</u>	<u>3,701,769</u>	<u>6,605,600</u>	<u>7,365,390</u>
Expenditures & Other Financing Uses:					
Personnel Services	5,217,547	5,891,200	2,474,916	5,685,700	6,271,500
Contractual Services	486,598	448,600	255,764	500,000	821,300
Utilities	36,655	34,700	23,310	34,700	35,400
Fixed Charges	12,745	16,200	12,897	16,200	20,000
Materials & Supplies	217,985	229,900	95,366	229,900	241,700
Contributions & Other Payments	150	-	-	-	-
Capital Purchases	104,004	112,500	42	112,500	162,500
Other Financing Uses	<u>27,266</u>	<u>26,600</u>	<u>26,583</u>	<u>26,600</u>	<u>26,000</u>
Expenditures & Other Financing Uses: Total	<u>6,102,950</u>	<u>6,759,700</u>	<u>2,888,878</u>	<u>6,605,600</u>	<u>7,578,400</u>
Excess (Deficiency) of Sources over Uses	<u>\$ 121,663</u>	<u>\$ (222,100)</u>	<u>\$ 812,891</u>	<u>\$ -</u>	<u>\$ (213,010)</u>
Available Fund Balance:					
Nonspendable:					
Prepayments	\$ 97,896			\$ 97,896	\$ 97,896
Inventory	987			987	987
Total Nonspendable	<u>98,883</u>			<u>98,883</u>	<u>98,883</u>
Restricted:					
Health Department	<u>1,363,712</u>			<u>1,363,712</u>	<u>1,150,702</u>
Total Restricted	<u>1,363,712</u>			<u>1,363,712</u>	<u>1,150,702</u>
Ending Balance	<u><u>\$ 1,462,595</u></u>			<u><u>\$ 1,462,595</u></u>	<u><u>\$ 1,249,585</u></u>

Fact Sheet – 10/28/2020 Board of Health Meeting**Agenda Item 6.e****Single Audit – Report on Federal and State Awards**

In addition to the audit of the City of Eau Claire’s CAFR (Comprehensive Annual Financial Report) which is typically published in June of each year and approved by the BOH in July (this year there was a slight delay due to COVID and therefore was approved by the BOH in August), the City is required to complete a Single Audit of Federal and State Awards. This is a more comprehensive look at our governmental grants and the internal controls that are in place. Because the Health Department has so many Federal and State Awards, we are a large part of this audit process. This report is typically issued in September each year. The 2019 Single Audit was completed, and the auditors found that the City (Health Department) has complied in all material respects with compliance requirements that could have a direct and material effect on each of its major federal and state programs for the year ended 2019. The results of their tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Prepared by Janice Vinopal, Budget Specialist

CITY OF EAU CLAIRE, WISCONSIN
FEDERAL AND STATE SINGLE AUDIT REPORTS
YEAR ENDED DECEMBER 31, 2019

**CITY OF EAU CLAIRE, WISCONSIN
TABLE OF CONTENTS
YEAR ENDED DECEMBER 31, 2019**

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS	1
SCHEDULE OF STATE FINANCIAL ASSISTANCE	3
DHS COST REIMBURSEMENT AWARD SCHEDULES	4
NOTES TO SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS, STATE FINANCIAL ASSISTANCE AND DHS COST REIMBURSEMENT AWARD SCHEDULES	10
INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH <i>GOVERNMENT AUDITING STANDARDS</i>	12
INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM, REPORT ON INTERNAL CONTROL OVER COMPLIANCE, AND REPORT ON THE SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS AND STATE FINANCIAL ASSISTANCE REQUIRED BY THE <i>UNIFORM GUIDANCE AND STATE SINGLE AUDIT GUIDELINES</i>	14
SCHEDULE OF FINDINGS AND QUESTIONED COSTS	17

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED DECEMBER 31, 2019**

Federal Grantor / Program or Cluster Title	Federal CFDA #	Pass-Through Entity	Pass-Through Entity Identifying Number	Revenue							Federal Expenditures	Amounts Provided to Subrecipients
				(Accrued) Deferred Beginning Balance	Adjustments	Cash Received (Returned)	Accrued (Deferred) Ending Balance	Changes in Unavailable Revenue	Total Revenues			
U.S. Department of Agriculture												
WIC Special Supplemental Nutrition Program for Women, Infants, and Children	10.557	DHS	154710, 154760	\$ (98,616)	\$ -	\$ 412,310	107,790	\$ -	\$ 421,484	\$ 421,484	\$ -	
SNAP Cluster												
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	10.561	DHS	154661	(1,391)	-	15,981	925	(350)	15,165	15,515	-	
WIC Infrastructure	10.578	N/A	N/A	-	-	10,250	-	-	10,250	10,250	-	
Cooperative Forestry Assistance	10.664	N/A	N/A	-	-	1,135	-	-	1,135	1,135	-	
Total U.S. Department of Agriculture				(100,007)	-	439,676	108,715	(350)	448,034	448,384	-	
U.S. Department of Commerce												
Economic Development Cluster												
Economic Adjustment Assistance	11.307	N/A	N/A	-	-	-	-	-	-	455,399	-	
U.S. Department of Housing and Urban Development												
CDBG - Entitlement Grants Cluster												
Community Development Block Grants/Entitlement Grants	14.218	N/A	N/A	(104,096)	-	898,767	49,113	-	843,784	843,784	498,588	
Home Investment Partnerships Program	14.239	N/A	N/A	(82,178)	-	236,318	130,626	-	284,766	284,766	54,229	
Total U.S. Department of Housing and Urban Development				(186,274)	-	1,135,085	179,739	-	1,128,550	1,128,550	552,817	
U.S. Department of Justice												
Bulletproof Vest Partnership Program (2018 Program)	16.607	N/A	N/A	(624)	-	4,368	-	624	4,368	3,744	-	
Public Safety Partnership and Community Policing Grants	16.710	DOJ	10134	(2,000)	-	2,441	946	-	1,387	1,387	-	
Public Safety Partnership and Community Policing Grants	16.710	DOJ	10135	(7,042)	-	11,380	2,606	1,208	8,152	6,944	-	
Total Public Safety Partnership and Community Policing Grants				(9,042)	-	13,821	3,552	1,208	9,539	8,331	-	
Edward Byrne Memorial Justice Assistance	16.738	DOJ	10136	-	-	-	4,536	-	4,536	4,536	-	
Edward Byrne Memorial Justice Assistance	16.738	DOJ	2019-DJ-BX-0748	-	-	5,630	5,703	-	11,333	11,333	-	
Edward Byrne Memorial Justice Assistance	16.738	DOJ	2018-DJ-BX-0918	-	-	12,491	-	-	12,491	12,491	-	
Edward Byrne Memorial Justice Assistance	16.738	DOJ	2017-DJ-BX-0627	(12,033)	-	12,104	-	12,033	12,104	71	-	
Total Edward Byrne Memorial Justice Assistance				(12,033)	-	30,225	10,239	12,033	40,464	28,431	-	
Total U.S. Department of Justice				(21,699)	-	48,414	13,791	13,865	54,371	40,506	-	
U.S. Department of Transportation												
Highway Planning and Construction Cluster												
Recreational Trails Program	20.219	DNR	RTP-883-17N	(26,687)	-	26,687	953	25,734	26,687	953	-	
Metropolitan Transportation Planning and State and Metropolitan Planning and Research	20.505	DOT	N/A	-	-	-	50,677	-	50,677	50,677	-	
Federal Transit Cluster - Major Federal Program												
Federal Transit Formula Grants	20.507	N/A	N/A	(513,279)	-	1,722,446	596,214	-	1,805,381	1,805,381	-	
Heavy Duty Bus Replacement	20.526	DOT	N/A	-	-	1,299,118	-	-	1,299,118	1,299,118	-	
Total Federal Transit Cluster - Major Federal Program				(513,279)	-	3,021,564	596,214	-	3,104,499	3,104,499	-	
Highway Safety Cluster												
National Priority Safety Programs	20.616	DOT	0956-25-72	-	-	3,969	-	-	3,969	3,969	-	
Total U.S. Department of Transportation				(539,966)	-	3,052,220	647,844	25,734	3,185,832	3,160,098	-	
U.S. Department of Administration												
State Energy Program-Energy Innovation Grant Program	81.041	PSC WI	9709-FG-2018	-	-	-	129,040	(129,040)	-	129,040	-	
Environmental Protection Agency												
State Indoor Radon Grants	66.032	DHS	150321	(5,492)	-	13,644	2,707	-	10,859	10,859	-	

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED DECEMBER 31, 2019

Federal Grantor / Program or Cluster Title	Federal CFDA #	Pass-Through Entity	Pass-Through Entity Identifying Number	Revenue							Federal Expenditures	Amounts Provided to Subrecipients
				(Accrued) Deferred Beginning Balance	Adjustments	Cash Received (Returned)	Accrued (Deferred) Ending Balance	Changes in Unavailable Revenue	Total Revenues			
U.S. Department of Health and Human Services												
Public Health Emergency Preparedness	93.069	DHS	155050, 155015	\$ 4,862	\$ -	\$ 113,987	\$ (1,464)	\$ 3,380	\$ 120,765	\$ 117,385	\$ -	
Environmental Public Health and Emergency Response	93.070	DHS	155078	(5,495)	-	10,000	-	-	4,505	4,505	-	
Food and Drug Administration - Research	93.103	AFDO	25130	(2,806)	-	2,806	5,400	(1,228)	4,172	5,400	-	
Injury Prevention and Control Research and State and Community Based Programs	93.136	DHS	155080	(17,655)	-	53,467	11,635	(2,476)	44,971	47,447	-	
Injury Prevention and Control Research and State and Community Based Programs	93.136	DOJ	25202	(848)	116	32,858	3,912	(3,912)	32,126	36,038	-	
Total Injury Prevention and Control Research and State and Community Based Program				(18,503)	116	86,325	15,547	(6,388)	77,097	83,485	-	
Title 10 Services	93.217	DHS	150328	-	-	26,814	46,528	(744)	72,598	73,342	-	
State Capacity Building	93.240	DHS	150328	(1,116)	1,116	9,000	-	-	9,000	7,884	-	
Substance Abuse and Mental Health Services												
Projects of Regional and National Significance	93.243	MCRF	25179	(10,344)	-	50,408	8,499	(8,499)	40,064	48,563	-	
Consolidated Contracts - IMM	93.268	DHS	150328	-	-	16,489	5,624	-	22,113	22,113	-	
Drug-Free Communities Support Program Grants	93.276	DHS	25046	(6,692)	-	100,422	-	-	93,730	93,730	-	
Public Health Crisis Response	93.354	DHS	25046	-	-	18,000	-	-	18,000	18,000	-	
Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke	93.426	DHS	150426, 150429	(1,289)	1,289	134,427	66,736	(59,700)	141,463	199,874	-	
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	93.898	DHS	157120	-	-	3,833	-	-	3,833	3,833	-	
Preventative Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	93.758	DHS	155800, 25197	-	-	5,000	-	-	5,000	5,000	-	
Medicaid Cluster												
Medical Assistance Program	93.778	DHS	159320, 159322	-	-	3,084	-	-	3,084	3,084	-	
HIV Pre PS & Linkage	93.940	DHS	59320, 159321, 159322	-	-	19,139	5,671	-	24,810	24,810	-	
Consolidated Contracts - PHHS	93.991	DHS	159220	(2,116)	-	16,631	4,944	(1,558)	17,901	19,459	-	
Maternal and Child Health Services Block Grant to the States	93.994	DHS	59320, 159321, 159322	(15,657)	-	60,673	2,928	-	47,944	47,944	-	
Total U.S. Department of Health and Human Services				(59,156)	2,521	677,038	160,413	(74,737)	706,079	778,411	-	
Total Federal Awards				\$ (912,594)	\$ 2,521	\$ 5,366,077	\$ 1,242,249	\$ (164,528)	\$ 5,533,725	\$ 6,151,247	\$ 552,817	

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF STATE FINANCIAL ASSISTANCE
YEAR ENDED DECEMBER 31, 2019**

State Grantor/ Pass-Through Grantor/ Program or Cluster Title	State ID Number	Revenue							State Expenditures
		(Accrued) Deferred Beginning Balance	Adjustments	Cash Received (Returned)	Accrued (Deferred) Ending Balance	Changes in Unavailable Revenue	Total Revenues		
STATE AWARDS									
Wisconsin Department of Natural Resources									
Aquatic Invasive Species Control	370.678	\$ (72,807)	\$ -	\$ 96,932	\$ 0	\$ 12,876	\$ 37,001	\$ 24,125	
Urban Wildlife Damage Abatement Program (15077-Urban Geese)	370.580	(4,609)	-	5,000	-	4,609	5,000	391	
Urban Wildlife Damage Abatement Program (15083-Deer & Geese)	370.580	-	-	-	2,106	(2,106)	-	2,106	
Lake Management Planning - Large Scale and Small Scale Grants (2019)	370.663	-	-	47,927	1,663	(1,663)	47,927	49,590	
Lake Management Planning - Large Scale and Small Scale Grants (2017)	370.663	(42,392)	-	82,843	-	1,941	42,392	40,451	
Total Wisconsin Department of Natural Resources		<u>(119,808)</u>	<u>-</u>	<u>232,702</u>	<u>3,769</u>	<u>15,657</u>	<u>132,320</u>	<u>116,663</u>	
Wisconsin Department of Transportation									
Transit Operating Aids - 2019	395.104	-	-	1,329,289	-	-	1,329,289	1,329,289	
Transit Operating Aids - 2017	395.104	(143,357)	3,680	-	139,677	-	-	-	
Transit Operating Aids - 2016	395.104	(131,290)	-	131,290	-	-	-	-	
Paratransit Aids - 2019	395.104	-	-	62,450	-	-	62,450	62,450	
Total Transit Operating Aids		<u>(274,647)</u>	<u>3,680</u>	<u>1,523,029</u>	<u>139,677</u>	<u>-</u>	<u>1,391,739</u>	<u>1,391,739</u>	
Total Wisconsin Department of Transportation		<u>(274,647)</u>	<u>3,680</u>	<u>1,523,029</u>	<u>139,677</u>	<u>-</u>	<u>1,391,739</u>	<u>1,391,739</u>	
Wisconsin Department of Health Services									
Telephonic Assisted CPR Supported Awards	N/A	-	-	12,000	-	-	12,000	12,000	
Fluoride Rinse Program	435.151735	(972)	-	2,419	72	-	1,519	1,519	
WIC - Farmers Market	435.154720	(128)	-	3,107	-	-	2,979	2,979	
Communicable Disease	435.155800	-	-	7,000	-	-	7,000	7,000	
HIV Prevention Partner Services	435.155957	(9,761)	-	48,479	11,472	-	50,190	50,190	
Consolidated Contracts-Well Women GPR	435.157010	(7,822)	-	73,165	9,304	-	74,647	74,647	
Consolidate Contracts-CHHD LD	435.157720	(2,854)	-	12,030	619	-	9,795	9,795	
WH/FP RH	435.159317	-	-	99,050	-	-	99,050	99,050	
Reproductive Health	435.159321	(12,725)	-	12,725	-	-	-	-	
Consolidated Contracts-MCH	435.159322	-	-	3,084	-	-	3,084	3,084	
NP Wins	435.181004	(99)	-	1,904	228	(25)	2,008	2,033	
Total Wisconsin Department of Health Services		<u>(34,361)</u>	<u>-</u>	<u>274,963</u>	<u>21,695</u>	<u>(25)</u>	<u>262,272</u>	<u>262,297</u>	
Wisconsin Department of Military Affairs									
Computer and HazMat Response Equipment Grant (2018)	465.308	(8,077)	-	8,077	-	-	-	-	
Computer and HazMat Response Equipment Grant (2019)	465.308	-	-	-	7,475	-	7,475	7,475	
Regional Emergency Response/WHMRS Equipment Grant	465.313	-	-	512	-	-	512	512	
Regional Emergency Response Teams	465.306	(28,989)	-	115,954	28,990	-	115,955	115,955	
Total Wisconsin Department of Military Affairs		<u>(37,066)</u>	<u>-</u>	<u>124,543</u>	<u>36,465</u>	<u>-</u>	<u>123,942</u>	<u>123,942</u>	
Total State Financial Assistance		<u>\$ (465,882)</u>	<u>\$ 3,680</u>	<u>\$ 2,155,237</u>	<u>\$ 201,606</u>	<u>\$ 15,632</u>	<u>\$ 1,910,273</u>	<u>\$ 1,894,641</u>	

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 154720	CARS Profile 154740	CARS Profile 154746	CARS Profile 154760	CARS Profile 154710	CARS Profile 159220	CARS Profile 159220
	WIC - Farmers Market	WIC - Infrastructure	WIC - Outreach	WIC - Peer Counseling	WIC	Prevention	Prevention
Award Amount:	\$ 2,979	\$ 10,250	\$ 8,810	\$ 17,333	\$ 392,697	\$ 16,631	\$ 15,920
Award Period:	1/1/19 - 12/31/19	1/1/19 - 9/30/19	1/1/19 - 12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	10/1/17 - 8/31/19	10/1/18 - 9/30/19
Period of Award within Audit Period	1/1/19 - 12/31/19	1/1/19 - 9/30/19	1/1/19 - 12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19 - 8/31/19	9/1/19 - 8/31/19
A. Expenditures Reported to DHS for Payment	\$ 3,189	\$ 10,250	\$ 8,810	\$ 17,333	\$ 392,702	\$ 14,654	\$ 3,386
B. Total Costs of Award							
1. Employee Salaries and Wages	2,117	-	-	16,461	253,099	10,341	3,198
2. Employee Fringe Benefits	791	-	-	-	81,649	2,516	1,281
3. Payroll Taxes	137	-	-	1,259	18,282	749	221
4. Rent of Occupancy	-	-	-	-	19,614	-	-
5. Professional Services	-	-	-	-	-	-	-
6. Employee Travel	-	-	-	-	4,969	397	203
7. Conferences, Meetings or Education	-	-	8,810	-	-	70	17
8. Employee Licenses and Dues	-	-	-	-	-	-	-
9. Supplies	144	-	-	-	10,678	434	22
10. Telephone	-	-	-	-	3,016	-	-
11. Equipment	-	10,250	-	-	633	-	-
12. Depreciation	-	-	-	-	-	-	-
13. Utilities	-	-	-	-	-	-	-
14. Bad Debts	-	-	-	-	-	-	-
15. Postage and Shipping	-	-	-	-	1,096	149	2
16. Insurance	-	-	-	-	-	-	-
17. Interest	-	-	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-	-	-
19. Advertising and Marketing	-	-	-	-	-	-	-
20. Other	-	-	-	-	15	-	-
Total Operating Costs of Award	3,189	10,250	8,810	17,720	393,051	14,656	4,944
C. Less Disallowed Costs	-	-	-	-	-	-	-
Offsets to Costs							
E. Net Allowable Operating Costs Before Profit	-	-	-	-	-	-	-
F. Add Allowable Profit	-	-	-	-	-	-	-
G. Total Allowable Costs	\$ 3,189	\$ 10,250	\$ 8,810	\$ 17,720	\$ 393,051	\$ 14,656	\$ 4,944

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 181004	CARS Profile 181004	CARS Profile 155015	CARS Profile 155015	CARS Profile 155050	CARS Profile 155957	CARS Profile 157720
Award Amount:	WI WINS \$ 1,314	WI WINS \$ 4,088	Bio-Terrorism \$ 60,019	Bio-Terrorism \$ 52,060	PHEP Mini Grant \$ 28,000	HIV Prevention \$ 75,000	Childhood Lead \$ 9,795
Award Period:	1/1/19 - 6/30/19	7/1/19 - 6/30/20	7/1/18 - 6/30/19	7/1/19 - 6/30/20	7/1/18 - 6/30/19	1/1/19 - 12/31/19	1/1/19-12/31/19
Period of Award within Audit Period	1/1/19 - 6/30/19	7/1/19 -12/31/19	1/1/19 - 6/30/19	7/1/19 - 12/31/19	1/1/19 - 6/30/19	1/1/19 - 12/31/19	1/1/19-12/31/19
A. Expenditures Reported to DHS for Payment	\$ 1,635	\$ 694	\$ 54,060	\$ 39,533	\$ 28,000	\$ 75,069	\$ 10,551
B. Total Costs of Award							
1. Employee Salaries and Wages	1,444	624	29,704	29,246	6,000	48,603	4,977
2. Employee Fringe Benefits	61	31	10,645	6,102	424	20,356	1,736
3. Payroll Taxes	111	48	2,265	2,157	300	3,359	372
4. Rent of Occupancy	-	-	340	340	-	396	-
5. Professional Services	-	-	-	-	-	-	-
6. Employee Travel	1	-	-	91	1,661	632	-
7. Conferences, Meetings or Education	18	-	-	537	19,615	874	-
8. Employee Licenses and Dues	-	-	-	-	-	-	-
9. Supplies	-	-	8,002	270	-	1,125	3,513
10. Telephone	-	-	641	943	-	136	-
11. Equipment	-	-	503	-	-	-	-
12. Depreciation	-	-	-	-	-	-	-
13. Utilities	-	-	-	-	-	-	-
14. Bad Debts	-	-	-	-	-	-	-
15. Postage and Shipping	-	16	-	-	-	2	-
16. Insurance	-	-	-	-	-	-	-
17. Interest	-	-	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-	-	-
19. Advertising and Marketing	-	-	1,262	5	-	-	-
20. Other	-	-	50	-	-	-	-
Total Operating Costs of Award	1,635	719	53,412	39,691	28,000	75,483	10,598
C. Less Disallowed Costs	-	-	-	-	-	-	-
Offsets to Costs	-	-	-	-	-	-	-
E. Net Allowable Operating Costs Before Profit	-	-	-	-	-	-	-
F. Add Allowable Profit	-	-	-	-	-	-	-
G. Total Allowable Costs	\$ 1,635	\$ 719	\$ 53,412	\$ 39,691	\$ 28,000	\$ 75,483	\$ 10,598

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 155020	CARS Profile 159320	CARS Profile 159322	CARS Profile 150321	CARS Profile 151735	CARS Profile 154661	CARS Profile 154661
	Immunization	MCH	Repro Health	EPA Indoor Radon Services	Oral Health Mounthrise	Snap Ed	Snap Ed
Award Amount:	\$ 22,113	\$ 47,944	\$ 6,168	\$ 10,859	\$ 1,519	\$ 15,981	\$ 16,301
Award Period:	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	10/1/18 - 9/30/19	10/1/19-9/30/20
Period of Award within Audit Period	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19-12/31/19	1/1/19 - 9/30/19	10/1/19-12/31/19
A. Expenditures Reported to DHS for Payment	\$ 22,128	\$ 48,591	\$ 6,168	\$ 10,874	\$ 1,527	\$ 14,590	\$ 575
B. Total Costs of Award							
1. Employee Salaries and Wages	15,063	31,164	-	5,904	460	9,209	-
2. Employee Fringe Benefits	4,096	13,776	-	2,795	163	2,345	558
3. Payroll Taxes	1,120	2,087	-	413	34	672	35
4. Rent of Occupancy	-	680	-	-	-	-	44
5. Professional Services	-	-	-	-	-	-	-
6. Employee Travel	-	-	-	5	-	-	-
7. Conferences, Meetings or Education	-	310	-	556	-	-	-
8. Employee Licenses and Dues	-	-	-	-	-	-	-
9. Supplies	758	120	6,168	444	870	2,486	-
10. Telephone	-	220	-	-	-	-	288
11. Equipment	-	-	-	-	-	-	-
12. Depreciation	-	-	-	-	-	-	-
13. Utilities	-	-	-	-	-	-	-
14. Bad Debts	-	-	-	-	-	-	-
15. Postage and Shipping	1,306	295	-	53	-	-	-
16. Insurance	-	-	-	-	-	-	-
17. Interest	-	-	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-	-	-
19. Advertising and Marketing	-	-	-	704	-	-	-
20. Other	-	-	-	-	-	-	-
Total Operating Costs of Award	22,343	48,652	6,168	10,874	1,527	14,712	925
C. Less Disallowed Costs	-	-	-	-	-	-	-
Offsets to Costs	-	-	-	-	-	-	-
E. Net Allowable Operating Costs Before Profit	-	-	-	-	-	-	-
F. Add Allowable Profit	-	-	-	-	-	-	-
G. Total Allowable Costs	\$ 22,343	\$ 48,652	\$ 6,168	\$ 10,874	\$ 1,527	\$ 14,712	\$ 925

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 157010 Well Woman Program	CARS Profile 157010 Well Woman Program	CARS Profile 157120 Well Woman Program Fed	CARS Profile 155078 Env Ph Tracking Network	CARS Profile 150328 ATSDR Appletree	CARS Profile 150426 Diabities	CARS Profile 150427 Diabities
Award Amount:	\$ 65,250	\$ 65,250	\$ 3,833	\$ 10,000	\$ 9,000	\$ 15,013	\$ 15,013
Award Period:	7/1/18-6/30/19	7/1/19-6/30/20	7/1/18-6/30/19	8/1/18-7/31/19	12/1/18-3/31/19	10/1/18-6/30/19	10/1/18-6/30/19
Period of Award within Audit Period	<u>1/1/19-6/30/19</u>	<u>7/1/19-12/31/19</u>	<u>1/1/19-6/30/19</u>	<u>1/1/19-7/31/19</u>	<u>1/1/19-3/31/19</u>	<u>1/1/19 - 6/30/19</u>	<u>1/1/19 - 6/30/19</u>
A. Expenditures Reported to DHS for Payment	<u>\$ 44,473</u>	<u>\$ 29,965</u>	<u>\$ 3,833</u>	<u>\$ 4,524</u>	<u>\$ 7,992</u>	<u>\$ 14,117</u>	<u>\$ 15,024</u>
B. Total Costs of Award							
1. Employee Salaries and Wages	28,016	19,090	-	3,124	3,480	11,000	11,408
2. Employee Fringe Benefits	11,136	8,065	-	856	1,584	2,368	2,620
3. Payroll Taxes	1,994	1,336	-	229	243	749	800
4. Rent of Occupancy	-	-	-	-	-	-	-
5. Professional Services	-	-	-	-	-	-	-
6. Employee Travel	-	405	-	-	-	-	142
7. Conferences, Meetings or Education	1,926	129	-	37	-	-	-
8. Employee Licenses and Dues	-	-	-	-	-	-	-
9. Supplies	696	78	-	216	444	-	54
10. Telephone	375	371	-	-	-	-	-
11. Equipment	-	-	-	-	-	-	-
12. Depreciation	-	-	-	-	-	-	-
13. Utilities	-	-	-	-	-	-	-
14. Bad Debts	-	-	-	-	-	-	-
15. Postage and Shipping	49	101	-	-	121	-	-
16. Insurance	-	-	-	-	-	-	-
17. Interest	-	-	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-	-	-
19. Advertising and Marketing	281	390	3,833	62	20	-	-
20. Other	-	-	-	-	2,100	-	-
Total Operating Costs of Award	<u>44,473</u>	<u>29,965</u>	<u>3,833</u>	<u>4,524</u>	<u>7,992</u>	<u>14,117</u>	<u>15,024</u>
C. Less Disallowed Costs	-	-	-	-	-	-	-
Offsets to Costs	-	-	-	-	-	-	-
E. Net Allowable Operating Costs Before Profit	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
F. Add Allowable Profit	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
G. Total Allowable Costs	<u>\$ 44,473</u>	<u>\$ 29,965</u>	<u>\$ 3,833</u>	<u>\$ 4,524</u>	<u>\$ 7,992</u>	<u>\$ 14,117</u>	<u>\$ 15,024</u>

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 150426	CARS Profile 150427	CARS Profile 150429	CARS Profile 150429	CARS Profile 155080	CARS Profile 155800	CARS Profile 159322
	Diabities	Diabities	Diabetes & Cardiovascular	Diabetes & Cardiovascular	Rape Prev and Education	Comm Disease Ctrl & Prev	WH/FP RH 20.435
Award Amount:	\$ 20,000	\$ 20,000	\$ 230,149	\$ 230,480	\$ 50,000	\$ 7,000	\$ 6,168
Award Period:	7/1/19-6/30/20	7/1/19-6/30/20	10/1/18-9/30/19	10/1/18-9/30/20	2/1/19 - 1/31/20	7/1/18-6/30/19	1/1/19-12/31/19
Period of Award within Audit Period	7/1/19-12/31/19	7/1/19-12/31/19	1/1/19 - 9/30/19	10/1/19-12/31/19	2/1/19 - 12/31/19	1/1/19-6/30/19	1/1/19-12/31/19
A. Expenditures Reported to DHS for Payment	\$ 20,000	\$ 2,122	\$ 89,315	\$ -	\$ 44,971	\$ 7,017	\$ 6,168
B. Total Costs of Award							
1. Employee Salaries and Wages	13,637	1,500	64,778	44,199	25,888	5,471	-
2. Employee Fringe Benefits	4,879	955	13,295	11,403	11,674	1,132	-
3. Payroll Taxes	849	115	4,864	3,282	1,768	414	-
4. Rent of Occupancy	-	-	-	-	-	-	-
5. Professional Services	-	-	-	-	-	-	-
6. Employee Travel	-	-	459	6	-	-	-
7. Conferences, Meetings or Education	309	-	1,098	100	600	-	-
8. Employee Licenses and Dues	-	-	-	-	944	-	-
9. Supplies	194	-	186	14	6,527	-	6,168
10. Telephone	-	-	320	248	-	-	-
11. Equipment	-	-	3,922	-	-	-	-
12. Depreciation	-	-	-	-	-	-	-
13. Utilities	-	-	-	-	-	-	-
14. Bad Debts	-	-	-	-	-	-	-
15. Postage and Shipping	-	-	-	-	46	-	-
16. Insurance	-	-	-	-	-	-	-
17. Interest	-	-	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-	-	-
19. Advertising and Marketing	132	-	-	-	-	-	-
20. Other	-	-	-	-	-	-	-
Total Operating Costs of Award	20,000	2,570	88,922	59,252	47,447	7,017	6,168
C. Less Disallowed Costs	-	-	-	-	-	-	-
Offsets to Costs	-	-	-	-	-	-	-
E. Net Allowable Operating Costs Before Profit	-	-	-	-	-	-	-
F. Add Allowable Profit	-	-	-	-	-	-	-
G. Total Allowable Costs	\$ 20,000	\$ 2,570	\$ 88,922	\$ 59,252	\$ 47,447	\$ 7,017	\$ 6,168

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

DHS Identification Numbers:	CARS Profile 159317 WH/FP RH 253.07	CARS Profile 159328 Title X Serv	CARS Profile 159328 Title X Serv	CARS Profile 155129 Public Health Crisis Response	CARS Profile 155131 Public Health Opioc Response
Award Amount:	\$ 99,050	\$ 25,000	\$ 129,272	\$ 8,301	\$ 9,699
Award Period:	1/1/19-12/31/19	9/1/18-3/31/19	4/1/19-3/31/20	10/1/19-9/30/20	2/1/19-1/31/20
Period of Award within Audit Period	1/1/19-12/31/19	1/1/19-3/31/19	4/1/19-12/31/19	10/1/19-12/31/19	2/1/19-12/31/19
A. Expenditures Reported to DHS for Payment	\$ 99,050	\$ 25,000	\$ 47,598	\$ 8,301	\$ 9,993
B. Total Costs of Award					
1. Employee Salaries and Wages	47,437	-	45,000	7,000	4,150
2. Employee Fringe Benefits	39,153	-	342	811	952
3. Payroll Taxes	3,564	-	3,000	490	357
4. Rent of Occupancy	-	-	-	-	-
5. Professional Services	-	25,000	-	-	-
6. Employee Travel	425	-	-	-	40
7. Conferences, Meetings or Education	-	-	-	-	4,451
8. Employee Licenses and Dues	-	-	-	-	-
9. Supplies	8,291	-	-	-	-
10. Telephone	180	-	-	-	-
11. Equipment	-	-	-	-	-
12. Depreciation	-	-	-	-	-
13. Utilities	-	-	-	-	-
14. Bad Debts	-	-	-	-	-
15. Postage and Shipping	-	-	-	-	-
16. Insurance	-	-	-	-	-
17. Interest	-	-	-	-	-
18. Bank Fees and Charges	-	-	-	-	-
19. Advertising and Marketing	-	-	-	-	40
20. Other	-	-	-	-	-
Total Operating Costs of Award	99,050	25,000	48,342	8,301	9,990
C. Less Disallowed Costs	-	-	-	-	-
Offsets to Costs	-	-	-	-	-
E. Net Allowable Operating Costs Before Profit	-	-	-	-	-
F. Add Allowable Profit	-	-	-	-	-
G. Total Allowable Costs	\$ 99,050	\$ 25,000	\$ 48,342	\$ 8,301	\$ 9,990

See accompanying Notes to Schedules of Expenditures of Federal Awards and State Financial Assistance and DHS Cost Reimbursement Award Schedules

**CITY OF EAU CLAIRE, WISCONSIN
NOTES TO SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS,
STATE FINANCIAL ASSISTANCE, AND DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

NOTE 1 BASIS OF PRESENTATION

The accompanying schedules of expenditures of federal awards and state financial assistance include the federal and state award activity of the City of Eau Claire under programs of the federal and state government for the year ended December 31, 2019. The information in these schedules are presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) and the State Single Audit Guidelines. Because the schedules present only a selected portion of the operations of the City of Eau Claire, it is not intended to and does not present the financial position, changes in net position or cash flows of the City of Eau Claire.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the schedules are reported on the accrual or modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in either the Uniform Guidance or the Office of Management and Budget Circular A-87, *Cost Principles for State, Local, and Indian Tribal Governments*, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the schedules represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years. Pass-through entity identifying numbers are presented where available.

The underlying accounting records for some grant programs are maintained on the modified accrual basis of accounting. Under the modified accrual basis, revenues are recorded when susceptible to accrual, i.e., both measurable and available. Available means collectible within the current period or soon enough thereafter to be used to pay liabilities of the current period. Expenditures are recorded when the liability is incurred. The accounting records for other grant programs are maintained on the accrual basis, i.e., when the revenue has been earned and the liability is incurred.

NOTE 3 CARS REPORT DATES

The schedules of expenditures of federal awards and state financial assistance include adjustments through the February 3, 2020 (expected payment date) Community Aids Reporting System (CARS) reports.

NOTE 4 INDIRECT COST RATE

The City of Eau Claire has elected to use the 10% de minimis indirect cost rate of the Uniform Guidance.

**CITY OF EAU CLAIRE, WISCONSIN
NOTES TO SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS,
STATE FINANCIAL ASSISTANCE, AND DHS COST REIMBURSEMENT AWARD SCHEDULES
YEAR ENDED DECEMBER 31, 2019**

NOTE 5 LOAN AND LOAN GUARANTEE PROGRAMS

The loan program listed below is administered by the City of Eau Claire, and balances and transactions relating to this program are included in the City of Eau Claire's basic financial statements. The amount shown on the schedule of expenditures of federal awards for CFDA number 11.307 is calculated as described in the compliance supplement.

Balance of loans outstanding at December 31, 2019	\$	328,294
Cash and Investments balance at December 31, 2019		360,841
Administrative expenses paid out of income during the year		864
		689,999
Federal share of the fund		66%
 Total	 \$	 455,399

The balance of loans outstanding at December 31, 2019 was \$328,294.

NOTE 6 ADJUSTMENTS COLUMN

The adjustments column presents differences between estimated accrued/deferred ending balances as of December 31, 2018 and actual reimbursements received by the grantee in 2019.

NOTE 7 PASS-THROUGH GRANTORS

Federal funds have been passed through the following grantors:

- DHS Wisconsin Department of Health Services
- DNR Wisconsin Department of Natural Resources
- DOJ Wisconsin Department of Justice
- DOT Wisconsin Department of Transportation
- MCRF Marshfield Clinic Research Foundation
- WI PSC Wisconsin Public Service Commission
- AFDO Association of Food and Drug Officials



INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the City Council
City of Eau Claire, Wisconsin

We have audited, in accordance with auditing standards generally accepted in the United States of America and standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund and the aggregate remaining fund information of City of Eau Claire, Wisconsin (City) as of and for the year ended December 31, 2019, and the related notes to the financial statements, which collectively comprise the City's basic financial statements and have issued our report thereon dated July 28, 2020.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the City's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the City's internal control. Accordingly, we do not express an opinion on the effectiveness of the City's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the City's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit the attention by those charged with governance.

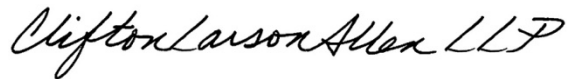
Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the City’s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our test disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the result of that testing, and not to provide an opinion on the effectiveness of the City’s internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the City’s internal control and compliance. Accordingly, this communication is not suitable for any other purpose.



CliftonLarsonAllen LLP

Eau Claire, Wisconsin
July 28, 2020



INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM, REPORT ON INTERNAL CONTROL OVER COMPLIANCE, AND REPORT ON THE SCHEDULES OF EXPENDITURES OF FEDERAL AWARDS AND STATE FINANCIAL ASSISTANCE AND DHS COST REIMBURSEMENT AWARD SCHEDULES REQUIRED BY THE *UNIFORM GUIDANCE AND STATE SINGLE AUDIT GUIDELINES*

To the City Council
City of Eau Claire, Wisconsin

Report on Compliance for Each Major Federal and State Program

We have audited City of Eau Claire, Wisconsin's (City) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the City's major federal programs for the year ended December 31, 2019. We have also audited the City's compliance with types of compliance requirements described in the *State Single Audit Guidelines*, issued by the Wisconsin Department of Administration that are applicable to each of its major state programs (including federal programs required to be tested as major state programs) for the same period. The City's major federal programs and major state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal and state statutes, regulations, and the terms and conditions of its federal and state awards applicable to its federal and state programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of the City's major federal and state programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance); and the *State Single Audit Guidelines*, issued by the Wisconsin Department of Administration. Those standards, the Uniform Guidance and State guidelines require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal or state program occurred. An audit includes examining, on a test basis, evidence about the City's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal and state program. However, our audit does not provide a legal determination on the City's compliance.

Opinion on Each Major Federal and Major State Program

In our opinion, the City complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal and major state programs for the year ended December 31, 2019.

Report on Internal Control Over Compliance

Management of the City is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit, we considered the City's internal control over compliance with the requirements that could have a direct and material effect on a major federal or state program to determine the auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with the Uniform Guidance and *State Single Audit Guidelines*, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the City's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal or state program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or state program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Purpose of this Report

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the result of that testing based on the requirements of the Uniform Guidance and *State Single Audit Guidelines*. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards, Schedule of State Financial Assistance and DHS Cost Reimbursement Schedules Required by the Uniform Guidance and the *State Single Audit Guidelines*

We have audited the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of City of Eau Claire as of and for the year ended December 31, 2019, and the related notes to the financial statements, which collectively comprise City of Eau Claire's basic financial statements. We issued our report thereon dated July 28, 2020, which contained unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards, schedule of state financial assistance and DHS cost reimbursement award schedules are presented for purposes of additional analysis as required by the *Uniform Guidance* and *State Single Audit Guidelines*, respectively, and are not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditure of federal awards, schedule of state financial assistance and DHS cost reimbursement schedules are fairly stated in all material respects in relation to the basic financial statements as a whole.



CliftonLarsonAllen LLP

Eau Claire, Wisconsin
September 24, 2020

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
YEAR ENDED DECEMBER 31, 2019**

Section I – Summary of Auditors’ Results

Financial Statements

1. Type of auditor’s report issued: Unmodified
2. Internal control over financial reporting:
- Material weakness(es) identified? Yes No
 - Were significant deficiency(ies) identified not considered to be a material weakness(es)? Yes None Reported
3. Noncompliance material to basic financial statements noted? Yes No

Federal Awards

1. Internal control over compliance:
- Material weakness(es) identified? Yes No
 - Were significant deficiency(ies) identified not considered to be a material weakness(es)? Yes None Reported
2. Type of auditor’s report issued on compliance for major programs: Unmodified
3. Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a) Yes No

Identification of major federal programs:

CFDA Number(s)	Name of Federal Program or Cluster
20.FTC	Federal Transit Cluster

Dollar threshold used to determine between type A and type B programs: \$ 750,000

Auditee qualify as low-risk auditee? Yes No

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF FINDINGS AND QUESTIONED COSTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2019**

Section I – Summary of Auditors’ Results (Continued)

State Awards

1. Internal control over compliance:

- Material weakness(es) identified? Yes X No
- Were significant deficiency(ies) identified not considered to be a material weakness(es)? Yes X None Reported

2. Type of auditor’s report issued on compliance for major programs: Unmodified

3. Any audit findings disclosed that are required to be reported in accordance with the *State Single Audit Guidelines*? Yes X No

Identification of major state programs:

CFDA Number(s)

395.104

Name of State Program or Cluster

Transit Operating Aids

Dollar threshold used to determine between type A and type B programs:

\$ 250,000

Auditee qualify as low-risk auditee?

 X Yes No

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF FINDINGS AND QUESTIONED COSTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2019**

Section II – Findings Related to the Financial Statements

None.

Section III – Findings Related to Major Federal Award Programs

None.

Section IV – Findings Related to Major State Financial Assistance Programs

None.

**CITY OF EAU CLAIRE, WISCONSIN
SCHEDULE OF FINDINGS AND QUESTIONED COSTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2019**

Section V – Other Issues

- | | |
|--|----|
| <p>1. Do the auditors' report or the notes to the financial statements include disclosure with regard to substantial doubt as to the auditee's ability to continue as a going concern?</p> | No |
| <p>2. Does the auditors' report show audit issues (i.e., material noncompliance, nonmaterial noncompliance, questioned costs, material weaknesses, significant deficiencies, management letter comments, excess revenue or excess reserve) related to grants or contracts with funding agencies that require audits to be in accordance with the <i>State Single Audit Guidelines</i>:</p> | |
| Public Service Commission | No |
| Department of Military Affairs | No |
| Department of Natural Resources | No |
| Department of Transportation | No |
| Department of Health Services | No |
| <p>3. Was a management letter or other document conveying audit comments issued as a result of this audit?</p> | No |



- | | |
|---|------------------------------------|
| <p>4. Name and signature of Principal</p> | <p>Brock Geyen, CPA, Principal</p> |
| <p>5. Date of Report</p> | <p>September 24, 2020</p> |



Fact Sheet 10/28/2020–Board of Health Meeting**Agenda Item 6.f****Eau Claire Healthy Communities Update**

Some Action Teams have moved to web-based meetings and other teams have chosen to cancel meetings. All Action Teams are working on posts for social media. As a reminder, please “like” the [Eau Claire Healthy Communities Facebook page](#) and share with others. We have begun posting more regularly on the Facebook page and would like to have more followers. A short survey was sent out to all members in October to see how/if their roles have shifted since COVID-19 and how we can better engage them in coalition work. The results will be used to help keep Healthy Communities ‘moving’ virtually while we are still in this pandemic.

Eau Claire Healthy Communities is working on the third shared Community Health Assessment with a core group of Eau Claire and Chippewa County partners. The partners previously completed a shared community health assessment in 2015 and 2018. Project partners include: Chippewa County Department of Public Health, Chippewa Health Improvement Partnership, Eau Claire City-County Health Department, Eau Claire Healthy Communities, Marshfield Clinic Health System, Mayo Clinic Health, HSHS Sacred Heart Hospital, HSHS St. Joseph’s Hospital, and United Way of the Greater Chippewa Valley. The purpose of the assessment is to evaluate and prioritize the health concerns in the county and mobilize the community in working towards health outcomes. As a result of the assessment process, collaborative interventions can be implemented to align with the identified health priorities. The assessment documents the variety of data collection methods used to discern more clearly the issues facing the community. These methods included: a community health survey, community conversations, coalition meetings, and comprehensive secondary data collection. The first step in data collection will be a community survey. The survey is schedule to come out in November 2020. More information will be shared when available.

Healthy Communities Council – Met virtually in September to get an update of what has changed with everyone since COVID-19. Health Department provided a COVID-19 update.

Healthy Relationship Promotion Action Team - HRPAT has been working to convert the Safe Dates program so that it can be taught virtually. The team has also been working on the strategic plan to move forward with work on the Sexual Violence Prevention grant, including how to engage boy’s and men’s groups in prevention efforts.

High-Risk Drinking Prevention Action Team- Met a couple times to continue discussion on best practices and policies to prevent high-risk drinking. In October, action team members were encouraged to attend the virtual Alcohol Policy Summit to learn about the local policies and practices that prevent and reduce underage and adult binge drinking.

Mental Health Action Team- Has been meeting monthly to plan social media. These posts have been shared on the Healthy Communities Facebook page. Please feel free to share/like them!

Chronic Disease Prevention Action Team - Has not been meeting. Plans to meet in November.

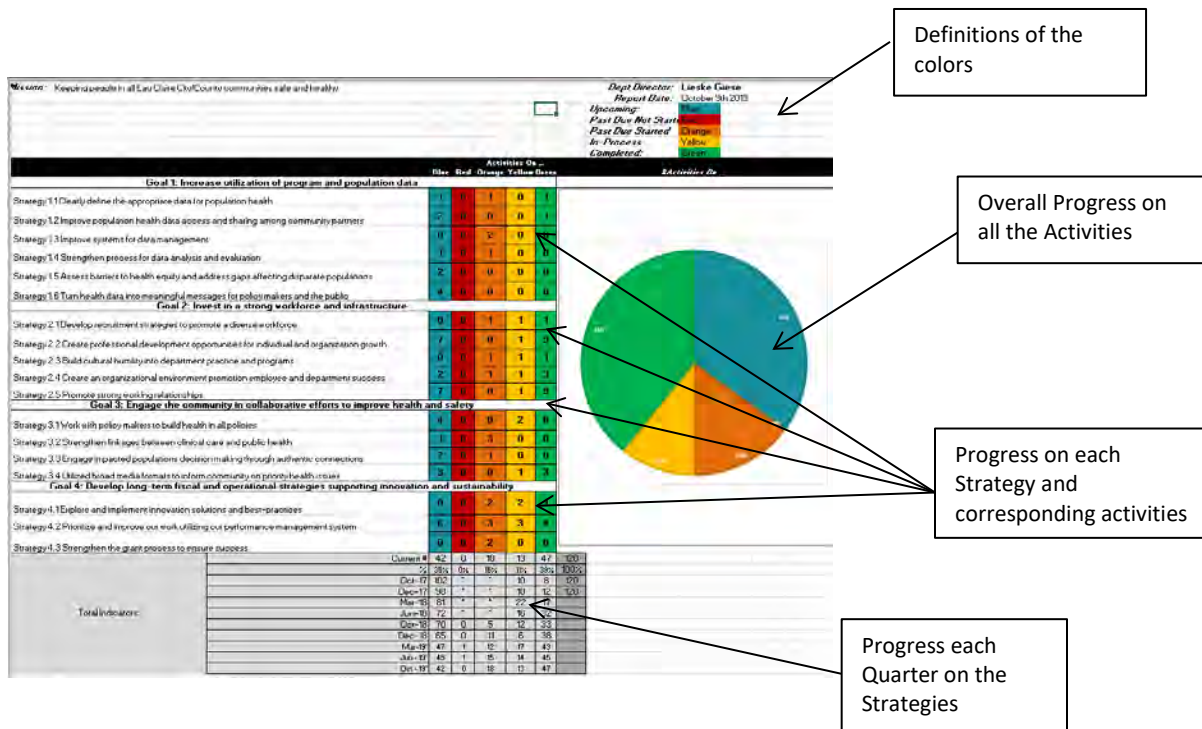
Oral Health Promotion Action Team- Has not been meeting. Plans to meet at the beginning of 2021.

Board of Health Meeting 10/28/2020

Agenda Item 6.g Strategic Plan

Attached is the 2017-2021 Strategic Plan with specific activities identified. The activities are used for tracking progress on all the strategic plan and updating the dashboard. See below for a reminder on format.

With just over 1 year left in the Strategic Plan more than 50% of the activities are completed and 26% more are in progress. Health Department focus in 2020 has primarily on COVID-19 response. Health Department focus for the remainder of 2020 and in 2021 on Strategic Plan will be around data, including COVID-19 data, and health equity.

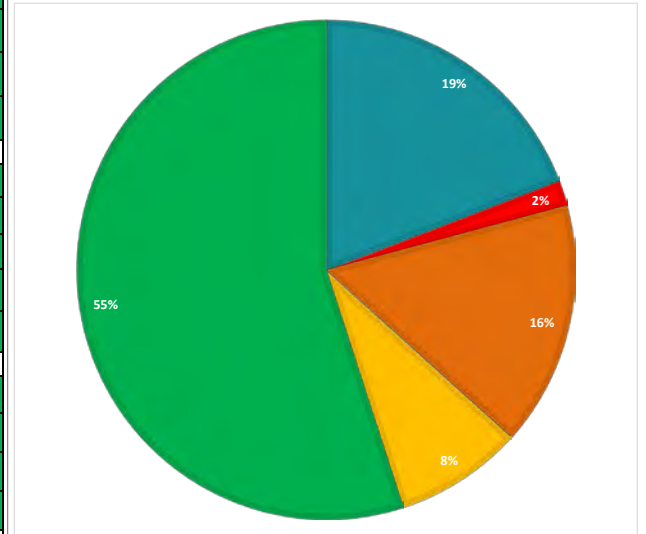


Mission: Keeping people in all Eau Claire City/County communities safe and healthy

Dept Director: Lieske Giese
Report Date: October 21 2020

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

	Activities On ...					%Activities On ...
	Blue	Red	Orange	Yellow	Green	
Goal 1: Increase utilization of program and population data						
Strategy 1.1 Clearly define the appropriate data for population health	0	0	1	0	2	
Strategy 1.2 Improve population health data access and sharing among community partners	2	0	0	0	1	
Strategy 1.3 Improve systems for data management	0	0	1	0	1	
Strategy 1.4 Strengthen process for data analysis and evaluation	0	0	2	0	0	
Strategy 1.5 Assess barriers to health equity and address gaps affecting disparate populations	1	1	0	0	0	
Strategy 1.6 Turn health data into meaningful messages for policy makers and the public	2	0	0	0	10	
Goal 2: Invest in a strong workforce and infrastructure						
Strategy 2.1 Develop recruitment strategies to promote a diverse workforce	0	0	2	0	1	
Strategy 2.2 Create professional development opportunities for individual and organization growth	5	0	0	1	11	
Strategy 2.3 Build cultural humility into department practice and programs	0	0	2	0	1	
Strategy 2.4 Create an organizational environment promotion employee and department success	1	0	0	1	5	
Strategy 2.5 Promote strong working relationships	4	0	0	1	12	
Goal 3: Engage the community in collaborative efforts to improve health and safety						
Strategy 3.1 Work with policy makers to build health in all policies	2	0	1	1	8	
Strategy 3.2 Strengthen linkages between clinical care and public health	1	0	3	0	0	
Strategy 3.3 Engage impacted populations decision making through authentic connections	1	1	1	0	0	
Strategy 3.4 Utilized broad media formats to inform community on priority health issues	1	0	0	1	5	
Goal 4: Develop long-term fiscal and operational strategies supporting innovation and sustainability						
Strategy 4.1 Explore and implement innovation solutions and best-practices	0	0	1	2	2	
Strategy 4.2 Prioritize and improve our work utilizing our performance management system	3	0	3	3	7	
Strategy 4.3 Strengthen the grant process to ensure success	0	0	2	0	0	



Total Indicators:	Current #	23	2	19	10	66	120
	%	19%	2%	16%	8%	55%	100%
	Oct-17	102	*	*	10	8	120
	Dec-17	98	*	*	10	12	120
	Mar-18	81	*	*	22	17	
	Jun-18	72	*	*	16	32	
	Oct-18	70	0	5	12	33	
	Dec-18	65	0	11	6	38	
	Mar-19'	47	1	12	17	43	
	Jun - 19'	45	1	15	14	45	
	Oct - 19'	42	0	18	13	47	
	Dec - 19'	40	1	16	7	56	
	July- 20'	29	2	19	10	60	

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

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
	1.1 Clearly define the appropriate data for population health surveillance and community health improvement	By 12/30/17 develop internal work group focused on population data with broad department representation.	MT					X	The Data Team met in July and meets monthly
		By 3/30/19 analyze and prioritize population data for surveillance and community health improvement.	MT			X			The Data Team is learning about different engagement and prioritizing methods from the Data Across Sectors for Health (DASH) mentorship grant
		By 9/30/20 develop plan for ongoing surveillance and community data collection.	MT					X	COVID metrics are pulled weekly and shared
	1.2 Improve population health data access and sharing among community partners	By 5/30/18 collaborate with key community partners to develop and disseminate Community Health Assessment.	CHA Staff					X	CHA was completed in June 2018
		By 12/31/20 provide key population health measures for Eau Claire Healthy Communities priority areas on their website as dashboard.	Gina S/CHA Mgr	X					
		By 12/30/21 develop plan for and pilot the merging of 1 local clinical/hospital data point for population health surveillance.	ECHC Assessment Workgroup	X					
	1.3 Improve systems for data management	By 7/31/18 identify and analyze internal health department program data management systems including strengths, weaknesses, opportunities and challenges.	MT/Data Workgroup					X	Data Team has a start of an inventory of internal data and SWOC on existing data.
		By 12/30/18 create and implement work plan to address gaps and challenges identified in analysis.	Data Workgroup			X			Data team has created a data training plan for staff.
	1.4 Strengthen process for data analysis and evaluation	By 12/31/18 assess current processes used in programs for ongoing data analysis and evaluation.	Data Workgroup/MT			X			Data Team has a start of an inventory of existing programs
		By 12/31/19 develop and implement plan for regular use of outcome and process data for program evaluation.	MT/Data Workgroup			X			A sub group of the data team has been started to look at how we use data.

Goal	Strategy	Activities	Lead						Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
Goal 1: Increase utilization of program and population data	1.5 Assess barriers to health equity and address gaps affecting disparate populations	By 06/30/20 review data and partner with stakeholders to prioritize key populations with disparate health outcomes.	ECHC Assessment Workgroup		X					
		By 3/31/21 develop plan to address health equity barrier impacting at least one specific population group.	Cortney D/ECHC	X						
	1.6 Turn health data into meaningful messages for policy makers and the public	By 12/31/17 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/9/17 and released to community partners	
		By 12/31/18 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/8/18 and released to community partners	
		By 12/31/19 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/11/19 and released to community partners	
		By 12/31/20 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X		
		By 12/31/21 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC	X						
		By 12/31/2017 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2016 Annual Summary Report released on 4/3/2017	
		By 12/31/2018 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2017 Annual Report Summary released on 3/28/18	
		By 12/31/2019 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2018 Annual Report Summary released in April 2019.	
		By 12/31/2020 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2019 Annual Report Summary completed in June 2020	

Goal	Strategy	Activities	Lead	Progress Status					Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
		By 12/31/2021 produce the HD summary report which creatively presents key health data.	Policy & Systems	X						
		By 6/30/18 standardize the practice of including local data in all appropriate press releases and media contacts.	Communication Team					X	Created a new press release template with instructions to include data.	
		By 6/30/19 research and implement one new method for messaging health data to the public.	Communication Team					X	Data team created a template form for creating graphs.	
				5	1	3	0	11	Total	

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
GOAL 2 - Invest in a strong workforce and infrastructure	2.1 Develop recruitment strategies to promote a diverse workforce	By 6/30/2018 develop and implement a process for recruitment that defines and promotes diversity across the workforce.	Workforce Development Team					X	Completed. We will continue to improve process moving forward. We are using multiple recruitment forums and wrote into position descriptions
		By 6/30/19 Develop an organizational mentorship program as part of the orientation process.	Workforce Development Team			X			Group meetings held and process development started. Nursing has mentorship now built in.
		By 6/30/20 develop and implement a plan for coordination of interns/student experiences across the department to build future workforce.	Workforce Development Team			X			Group meetings held and process development started. New process is in place and continuing to look at process improvement
	2.2 Create professional development opportunities for individual and organizational growth	By 12/31/17 provide/assure at least one staff development opportunity related to strategic plan goals	Workforce Development Team					X	MLK Day 1/16/17 provided training on both PH finance and Grant Writing as part of training day to meet needs identified in 07/2016 PH Competency survey
		By 12/31/18 provide/assure at least one staff development opportunity related to strategic plan goals	Workforce Development Team					X	MLK Day 1/15/18 provided diversity basics training
		By 12/31/19 provide/assure at least one staff development opportunity related to strategic plan goals	Workforce Development Team					X	MLK Day trainings held 1/21/19 included training related to strategic plan goals of outreach and communication.
		By 12/31/20 provide/assure at least one staff development opportunity related to strategic plan goals	Workforce Development Team					X	MLK Day trainings included orientation and overview of SharePoint related to the communication goals of the strategic plan
		By 12/31/21 provide/assure at least one staff development opportunity related to strategic plan goals	Workforce Development Team	X					
		By 12/31/17 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team					X	Reviewed workforce plan but didn't have representation from all divisions. 3 divisions were present
		By 12/31/18 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team					X	Workforce Team has been created with representative from all divisions
		By 12/31/19 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team					X	Plan updated and there is current representation across all divisions.
		By 12/31/20 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team	X					
		By 12/31/21 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team	X					
		By 12/31/2019 develop and implement plan for identifying and addressing longer term (5+ year) professional development goals of staff.	Workforce Development Team				X		Knowledge journal is being shared with staff.

Goal	Strategy	Activities	Lead						Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
Goal 2: Invest in a strong workforce and infrastructure		By 12/31/17 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	CO/AB - SOPHIA, CO/RM Natl substance abuse, LG - NALBOH, AH/JH - U of MI Adolescent Health Initiative 4/24-25, SB - APHL, AB/LG - INVEST	
		By 12/31/18 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	Atlanta Walkability Institute, National WIC conference, INVEST Health and NFP training	
		By 12/31/19 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	National WIC conference, ASCCP, Design Thinking Training, NFP training and NFP RHA	
		By 12/31/20 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	Staff attended virtual CADCA meeting/training	
		By 12/31/21 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT	X						
		By 12/31/18 develop and implement a specific plan for leadership and management development across organization.	MT	X						
	2.3 Build cultural humility into department practice and programs	By 12/31/18 assess departmental status related to existing understanding and implementation of cultural competence and humility in practice/programs.	Workforce Development Team						X	A video was shown at all staff meeting. In fall of 2018 staff completed competency assessment including cultural competencies elements.
		By 06/30/19 develop and implement a process to build program and staff strength in cultural competence and humility.	Workforce Development Team			X				Orientation process will include cultural competency training options and building into all staff meetings.
		By 12/31/19 create employee orientation for new and existing employees on cultural humility	Tegan			X				The orientation process will incorporate this training.
	2.4 Create an organizational environment promoting employee and department success	By 6/31/18 assess and develop plan/policy related to health department space focused on meeting multiple working styles.	Handbook Committee						X	Have worked with Staples on designs options and implementation in process
		By 12/31/17 evaluate the technology needs of department and implement appropriate improvements.	Tegan						X	Tegan has an up-to-date list of existing technology and gaps identified. In 2017, a new FPC database was implemented to assist in data tracking. Also, EH developed a new web-based registration system.
		By 12/31/18 evaluate the technology needs of department and implement appropriate improvements.	Tegan						X	There is an updated equipment list and equipment is ordered as needed.
		By 12/31/19 evaluate the technology needs of department and implement appropriate improvements.	Tegan						X	Tech needs are identified and processed accordingly. We added for GIS capable laptops and AV equipment and updated tech for remote meetings. Continuing to work on SharePoint

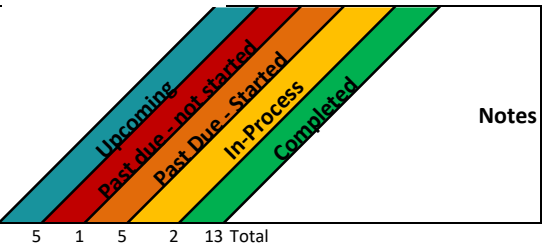
Goal	Strategy	Activities	Lead						Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
		By 12/31/20 evaluate the technology needs of department and implement appropriate improvements.	Tegan					X	Laptops have been deployed to staff and VPN connectivity has been enabled allowing staff to telecommute. Additionally staff have access to Skype, Teams and Webex platforms to hold virtual meetings.	
		By 12/31/21 evaluate the technology needs of department and implement appropriate improvements.	Tegan	X						
		By 2/01/19 develop procedure and implement central "intranet" for the Health Department	Tegan				X		A SharePoint site is in draft form.	
	2.5 Promote strong working relationships		By 12/31/17 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	4/22/17 - Supported Earth Day clean up efforts by organizing a group to participate 8/10/17 - Coordinated summer picnic at Mt. Simon Park 9/15/17 - Organized Day of Caring Event at Community Gardens
			By 12/31/18 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	January Christmas party, Accreditation celebration, 4/21/18 Amazing Eau Claire clean-up and there was a staff picnic in August
			By 12/31/19 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	Christmas party was held in January and an staff picnic on June 20th.
			By 12/31/20 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections				X		Christmas party was held in January
			By 12/31/21 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections	X					
			By 12/31/17 complete at least 5 employee wellness activities.	Wellness Committee					X	4 Lunch 'n Learns have been held covering Wellness topics; Weekly yoga breaks were offered in March and April; Wellness Walk held in July
			By 12/31/18 complete at least 5 employee wellness activities.	Wellness Committee					X	3 wellness competitions, 4 Lunch 'n Learns and 2 fitness classes have been offered
			By 12/31/19 complete at least 5 employee wellness activities.	Wellness Committee					X	1 wellness competition has been offered and 5 community events/challenges have been promoted.
			By 12/31/20 complete at least 5 employee wellness activities.	Wellness Committee					X	2 wellness challenges and 6 other wellness activities have been offered, including The Weekly – a weekly newsletter sent to employees
			By 12/31/21 complete at least 5 employee wellness activities.	Wellness Committee	X					

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
		By 12/31/18 distribute and analyze employee engagement survey.	Wellness Committee/IDT/Handbook Committee				X		Survey was sent out in June and committees are reviewing results.
		By 12/31/20 distribute and analyze employee engagement survey.	IDT	X					
		By 12/31/17 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT				X		QI Team reviews PM/SP to improve results as part of plan, SPITfires has multiple SP goals in progress, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/18 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT				X		Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, SPITfires has multiple SP goals in progress, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/19 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT				X		Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, communication team, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/20 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT				X		Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, communication team, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/21 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT	X					
				10	0	4	3	30	Total

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
Goal 3: Engage the community	3.1 Work with policy makers to build health in all policies	By 12/31/17 contribute public health input in to at least one non-health focused policy conversation at the township, city, or county level.	MT				X		HIA in Cannery district
		By 12/31/18 contribute public health input in to at least one non-health focused policy conversation at the township, city, or county level.	MT				X		City Council sidewalk discussion, bus fares, housing and ground water
		By 12/31/19 contribute public health input in to at least one non-health focused policy conversation at the township, city, or county level.	MT				X		Lead service lines
		By 12/31/20 contribute public health input in to at least one non-health focused policy conversation at the township, city, or county level.	MT				X		County Comprehensive Plan revision and landfill discussions
		By 12/31/21 contribute public health input in to at least one non-health focused policy conversation at the township, city, or county level.	MT	X					
		By 12/31/19 develop and implement department health in all policy definition and plan.	Cortney/Lieske				X		Reviewing existing definitions of health in all policies as well as how other departments are implementing.
		By 12/31/18 review and prioritize health department role in implementation of city of Eau Claire Health Chapter	MT				X		Review of Health Chapter was completed by key staff.
		By 12/31/17 hold collaborative legislature event with a focus on community health priorities	Cortney/ECHC				X		Legislative event 4/27/17 focus on mental health and 12/15/17 legislative event on opioid use
		By 12/31/18 hold collaborative legislature event with a focus on community health priorities	Cortney/ECHC				X		Legislative event held on 4/26/2018 with a focus on all top health priorities
		By 12/31/19 hold collaborative legislature event with a focus on community health priorities	Cortney/ECHC				X		Legislative event in April was postponed. Held Winter event on 1/6/2020.
		By 12/31/20 hold collaborative legislature event with a focus on community health priorities	Cortney/ECHC			X			April Legislative Event was postponed
		By 12/31/21 hold collaborative legislature event with a focus on community health priorities	Cortney/ECHC	X					
		By 12/31/18 research and analyze best practices for linkages between primary care/healthcare and public health.	Marisa/Lieske			X			UWEC students completed an initial literature review on linkages between healthcare and public health.

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
in collaborative efforts to improve health and safety	3.2 Strengthen linkages between clinical care and public health	By 06/30/19 develop and implement process for public health updates to clinical providers.	Communicable Disease Division			X			Date was previously entered as 6/30/18 in error and was changed to 6/30/19; will occur after research/analysis is complete
		By 12/31/18 analyze and respond to key clinical gaps in existing collaborative coalitions.	ECHC and MT			X			Healthy Communities has analyzed attendance at Council and Action Team meetings and is identifying organizational gaps.
		By 12/31/20 identify and implement at least one best practice that improves the acceptability or accessibility of health department clinical services for identified at-risk populations and share with community clinical partners	HBC and ECHC	X					
	3.3 Engage impacted populations in decision making through authentic connections	By 12/31/19 create standard engagement expectations and toolkit for engaging and building impacted communities into decision making.	Policy & Systems Division		X				
		By 12/31/18 health department programs/services will identify key populations experiencing health inequities. (overlap with 1.5)	MT/Program leads			X			staff completed the BARHII survey
		By 12/31/20 engage broad representation of community members in review of data and discussion of solutions related to social determinants of health.	Policy & Systems Division	X					
	3.4 Utilize broad media formats to inform community on priority health issues	By 12/31/18 either explore and utilize one additional social media platform or capitalize on an existing underutilized platform	Communication Team					X	Research has begun on Snapchat/Instagram. Linked our Facebook to Volume One's feed. Video use on YouTube. Posting more with Facebook live
		By 12/31/20 either explore and utilize one additional social media platform or capitalize on an existing underutilized platform	Communication Team					X	Livestreaming Webex to Facebook has been a new tool that is regularly used.
		By 12/31/17 assure that information related to community health priorities is provided on all existing media platforms	Communication Team					X	
		By 12/31/18 assure that information related to community health priorities is provided on all existing media platforms	Communication Team					X	
		By 12/31/19 assure that information related to community health priorities is provided on all existing media platforms	Communication Team					X	
		By 12/31/20 assure that information related to community health priorities is provided on all existing media platforms	Communication Team			X			
		By 12/31/21 assure that information related to community health priorities is provided on all existing media platforms	Communication Team	X					

Goal	Strategy	Activities	Lead	Notes



Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
	4.1 Explore and implement innovative solutions and best-practices	By 12/31/2018 successfully complete work to be nationally accredited and build plan for ongoing accreditation success.	Accreditation Core Team					X	Application submitted April 2017, Site Visit November 2017, Accredited Feb 2018
		By 12/31/21 explore and implement 3 best practices around innovative fiscal strategies	Janice/MT				X		Exploration and implementation of online rental registration program
		By 12/31/21 explore and implement 3 best practices around innovative operational strategies	Tegan/MT				X		Exploring SharePoint and a project management scheduling tool
		By 12/31/18, implement 3rd party reimbursement options for clinical services.	Janice/Tegan/Clinic Leadership			X			HER implemented Jan 2020 to create private billing options. EHR in place with third party billing in place. Currently exploring insurance contract options
		By 5/31/18, explore a staff incentive program for identification and implementation of innovative ideas.	Handbook Committee/Workforce Development Committee					X	We are eligible to apply for the county innovative idea program and will continue to look at other options
		By 12/31/17 Engage staff quarterly in Performance Management plan reviews and updates.	MT			X			Not institutionalized in all staff, but has occurred. Also happening at divisional staff meetings.
		By 12/31/18 Engage staff quarterly in Performance Management plan reviews and updates.	MT					X	Quarterly an agenda item at division meetings and quarterly new numbers are posted.

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
Goal 4: Develop long-term fiscal and operational strategies supporting innovation and sustainability	4.2 Prioritize and improve our work utilizing our performance management system	By 12/31/19 Engage staff quarterly in Performance Management plan reviews and updates.	MT					X	Quarterly an agenda item at division meetings and quarterly new numbers are posted.
		By 12/31/20 Engage staff quarterly in Performance Management plan reviews and updates.	MT				X		
		By 12/31/21 Engage staff quarterly in Performance Management plan reviews and updates.	MT	X					
		By 12/31/17 Update and publicly share quarterly Performance Management dashboard of measures	MT			X			Has been shared at all staff meetings; working on institutionalizing
		By 12/31/18 Update and publicly share quarterly Performance Management dashboard of measures	MT					X	Comes with the BOH update that goes out to staff and include the measures/plan. Quarterly new numbers are posted
		By 12/31/19 Update and publicly share quarterly Performance Management dashboard of measures	MT					X	Comes with the BOH update that goes out to staff and include the measures/plan. Quarterly new numbers are posted
		By 12/31/20 Update and publicly share quarterly Performance Management dashboard of measures	MT					X	
		By 12/31/21 Update and publicly share quarterly Performance Management dashboard of measures	MT	X					
		By 12/31/17 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team						X

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
		By 12/31/18 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	QI project completed around community engagement techniques.
		By 12/31/19 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	QI project completed around the 2 year old vaccination rate
		By 12/31/20 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team				X		Multiple process maps have been created to document new or changes to existing processes due to COVID-19
		By 12/31/21 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team	X					
		By 06/30/2019 develop and implement departmental guidance tool linking performance measures, strategic plan priorities and community health priorities to decision-making about existing and future programs/services. (overlap with 1.4)	MT			X			Tool developed at time we were looking at new PM buckets - need to implement.
	4.3 Strengthen the grant process to ensure success	By 6/30/18 collect and centralize resources/templates available for grant writing.	Grant Team			X			Checklist in process; documents saved for use in grant applications
		By 12/31/18 strengthen the interdepartmental core grant team to analyze and identify support efforts needed in the department for grant/funding identification and application.	Grant Team			X			
				3	0	6	5	9	Total