

**BOARD OF HEALTH AGENDA
December 9, 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: 145 561 0731

**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.

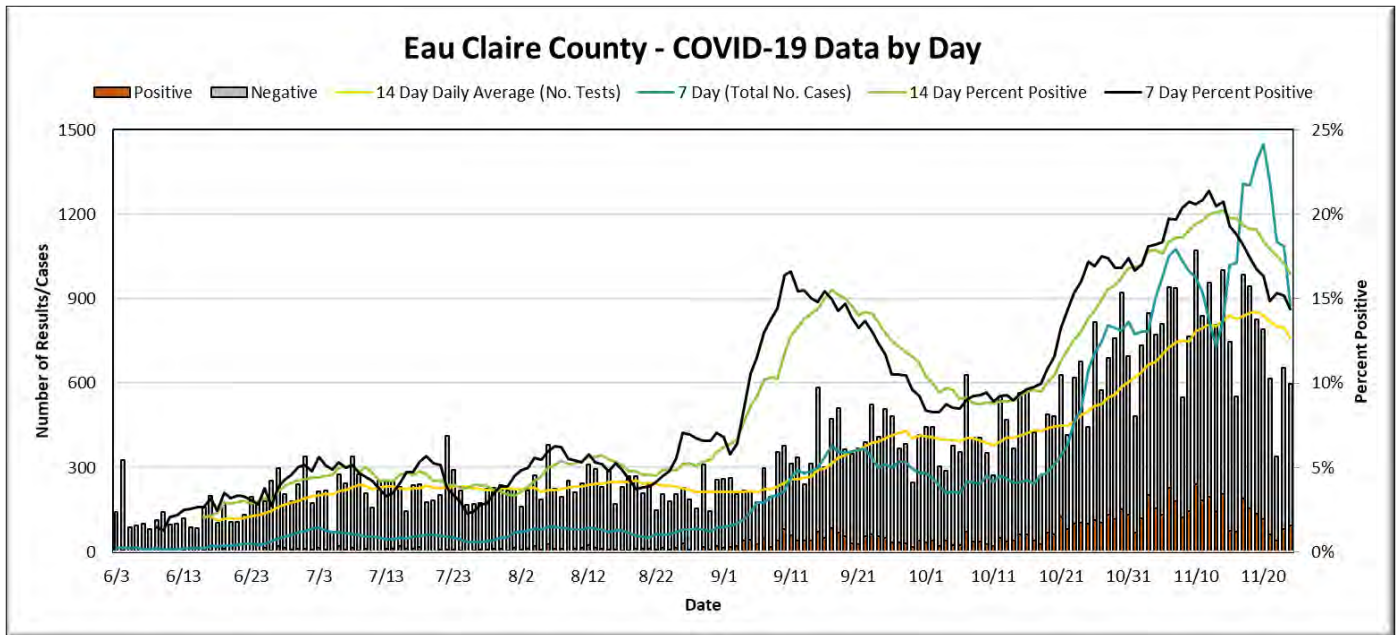
1. Call to Order. Welcome Guests. Order of the Agenda. Request to pull items from Consent Agenda - 2 minutes
2. Public Comment-*The Board of Health and Eau Claire City-County Health Department welcome you. Statements pertinent to agenda items may be made by attendees during the public comment section. We do ask that statements are limited to three minutes per person. Written comments may also be provided.* -15 minutes
3. Update COVID-19-15 minutes
4. Consent Agenda (Action Required-approved for full content)-5 minutes
 - a. Approval of minutes from October 28, 2020 meeting-enclosed
 - b. Approval of minutes from November 11, 2020 meeting-enclosed
 - c. Approval of Northwoods Coalition mini grant-enclosed
5. Business Item (Action Required)- 35 minutes
 - a. Review and receive COVID-19 Public Health Expectations-enclosed
 - b. Approval of 2021 Budget-will be sent prior to meeting
 - c. Election of Board of Health President & Vice President -verbal
 - d. Review and approval of temporary PH emergency compensation policy-will be sent prior to meeting
 - e. Review and approval of Updated Board of Health Priorities and Activities (2020-2024)- enclosed

6. Other information items from staff for the Board-*15 minutes*
 - a. Director/Health Officer Report -enclosed
 - b. Correspondence/Media – (October and November)-enclosed
 - c. Retirement Recognition-enclosed
 - May Her-Public Health Aide– Bilingual
7. Board member informational items-*10 minutes*
 - Public Health Policy/Advocacy-enclosed
 - WPHA/WALHDAB Legislative Priorities & Coronavirus Relief
 - November work session – overview
 - Board membership update – City appointment
<https://www.cognitofrms.com/CityOfEauClaire/CitizenResourceBankForm>
 - Review and finalize draft of 2021 Board of Health calendar-enclosed
8. Closed session –Motion to adjourn into closed session pursuant to Wisconsin Statutes 19.85(1)(c) for the purpose of considering employment, promotion, compensation or performance evaluation of any public employee over which the governmental body has jurisdiction or exercises responsibility. To wit: Performance evaluation of Health Department Director, an employee over whom the Board of Health has supervisory control. *40 minutes*
9. Reconvene in Open Session
10. Approve Directors Compensation – 10 minutes
11. Requests from Board members for future agenda items to be given consideration - *5 minutes*
12. Next business meeting – January 27, 2021 5:15 p.m.
13. Adjourn

COVID-19 State and Local Case Summary

Data as reported to DHS by 9:00 PM on 11/24/2020						
<i>*unless otherwise noted, change calculated from previous week (may include jurisdiction corrections)</i>						
County/ State	Total Cases	Change from Previous Day	Change from Previous Week	7 Day Cumulative Positivity Rate [^]	Cases per 100k People	Deaths
Eau Claire	7,479	+143 <i>(+1.9%)</i>	+877 <i>(+13.3%)</i>	14.4% <i>(-4.5)</i>	7,268.7 <i>(+852.3)</i>	56 <i>(+10/+21.7%)</i>
Buffalo	756	+15 <i>(+2.0%)</i>	+133 <i>(+21.3%)</i>	13.6% <i>(-5.5)</i>	5,596.3 <i>(+984.6)</i>	4 <i>(No Change)</i>
Chippewa	4,455	+79 <i>(+1.8%)</i>	+658 <i>(+17.3%)</i>	15.2% <i>(-2.2)</i>	6,937.1 <i>(+1,024.6)</i>	48 <i>(+6/+14.3%)</i>
Clark	2,056	+52 <i>(+2.6%)</i>	+268 <i>(+15.0%)</i>	18.1% <i>(-2.5)</i>	5,918.1 <i>(+771.4)</i>	36 <i>(+6/+20.0%)</i>
Dunn	2,651	+157 <i>(+6.3%)</i>	+490 <i>(+22.7%)</i>	15.0% <i>(-3.9)</i>	5,920.5 <i>(+1,094.4)</i>	12 <i>(+7/+140.0%)</i>
Jackson	1,606	+10 <i>(+0.6%)</i>	+244 <i>(+17.9%)</i>	21.6% <i>(-4.7)</i>	7,779.5 <i>(+1,181.9)</i>	4 <i>(No Change)</i>
Pepin	452	+10 <i>(+2.3%)</i>	+71 <i>(+18.6%)</i>	16.1% <i>(-8.9)</i>	6,150.5 <i>(+966.1)</i>	2 <i>(No Change)</i>
Trempealeau	2,276	+36 <i>(+1.6%)</i>	+313 <i>(+15.9%)</i>	17.4% <i>(-4.6)</i>	7,759.4 <i>(+1,067.1)</i>	15 <i>(+7/+87.5%)</i>
Wisconsin	369,442	+5,469 <i>(+1.50%)</i>	+37,605 <i>(+11.33%)</i>	12.6% <i>(-3.7)</i>	6,390.6 <i>(+788.7)</i>	3,178 <i>(+385/+13.78%)</i>

[^]This rate is calculated 'by test'. This means that if one person is tested multiple times, each of those test results are counted in the denominator of total tests.



Additional Data: [EC County](#) [WI County-Level](#) [Wisconsin](#) [U.S.](#)

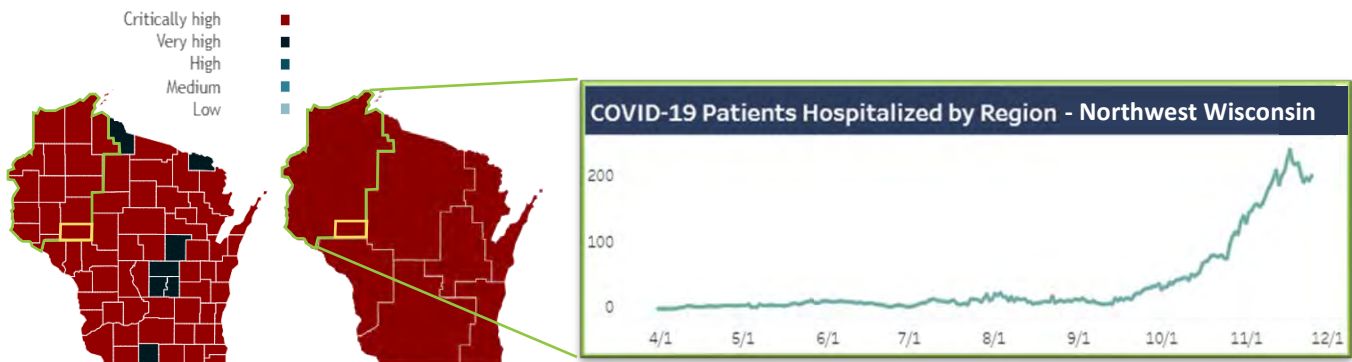
Eau Claire County Weekly Metrics Summary

(Unless otherwise noted, metrics were calculated using data reported by WI DHS during 14-days ending 11/24/2020 and compared to the 14-days ending on 11/17/2020)

● Good
 ■ Proceed with Caution
 ● Metric is Concerning
 — Status Not Classified
 ↓/↑ Metric Improved
 ↓/↑ Metric Declined

Metric Description	Value	Change	Metric Status
Percent Positive Tests <i>(7-days ending 11/24)</i>	14.4%	↓4.5	●
Change in New Cases <i>(within last 14 days)</i> 2,187 Total: 877 in final 7 days/1,310 in first 7 days	2,187 Total (877/1,310)	↓33.1%	●
Case Activity Level <i>(State Calculated)</i>	Critically High (Shrinking)	Activity: NC Trajectory: ↓	---
New Outbreaks	16	↓4	●
Community Spread	36%	↑3	●
COVID-Like Illness Activity Level <i>(State Measure)</i>	High (Shrinking)	Activity: NC Trajectory: NC	---
Tests Conducted <i>(# of tests/100k people/day)</i>	740	↓47	---
COVID-19 Inpatients <i>(NW Region as of 11/25)</i>	201 (No Sign. Change)	Number: ↓39 Trajectory: ↓	---
COVID-19 Inpatients in ICU <i>(NW Region as of 11/25)</i>	24 (No Sign. Change)	Number: ↑4 Trajectory: NC	---
Percent of Inpatient Hospital Beds Used <i>(past 14 Days)</i>	87%	↓2	■
Percent of Inpatient ICU Beds Used <i>(past 14 Days)</i>	89%	↓1	■
Case Contact Timeliness <i>(in 24 hrs.)</i>	45.3%	↓0.4	●
Contact Tracing <i>(in 48 hrs.)</i>	Currently not being conducted due to prioritization of contacting cases only		
Disease Investigation Capacity	High Risk Cases Only	No Change	●

COVID-19 Activity Level by County and Region and Northwest WI Hospitalization Data



Source: Wisconsin Department of Health Services [COVID-19 Activity Page](#)

Data and Metric Narrative

The situation remains critical in Eau Claire County and all regions of Wisconsin. However, several of the local data and metrics showed some improvement this week. The number of cases confirmed over the past 14-days remained critically high at 2,187 cases (**rate of 156.2 per day**). This rate remains more than 6 times greater than the “Very High” case burden (25.75 cases per day as pro-rated for the county population) and twice the “Critically High” case burden (73.6 cases per day as pro-rated for the county population) as determined by Wisconsin DHS. However, the case rates were lower across the most recent 7-days (33% decrease over previous 7-days). As stated previously, the goal is to have rates not exceeding 10 cases per day, as higher rates have resulted in a compromised ability to thoroughly interview cases and to speak with close contacts which negatively impacts the ability to slow disease spread. The testing positivity rate and the number of new outbreaks also improved this week, although these, and all other metrics remain at concerning levels.

As mentioned above, Eau Claire County remains classified as having “Critically High” COVID-19 activity, while the trajectory is “Shrinking” this week. All surrounding counties remain classified as having “Critically High” activity, but for the first time in several weeks, none of these counties are labeled as having a “Growing” trajectory. In fact, only 3 counties in Wisconsin have a “Growing” classification. Additional information about COVID-19 activity by county and region can be viewed at the newly updated [DHS Activity Level webpage](#), including data illustrations that are also shown on the bottom of page 2 of this report.

Regarding the case contact and contact tracing metrics, the Health Department continues to prioritize reaching and interviewing higher risk cases, relying on alternative strategies to reach close contacts. At the current rate of cases, very few close contacts of cases were attempted to be reached by Health Department disease investigators. As a result, the contact tracing measure has very limited value beyond being a clear indicator that our core public health strategies are not possible given the unprecedented volume of cases. The public health capacity metric is red again this week, as the current caseload limits disease investigators to prioritizing cases that are identified as high-risk for severe illness or having high potential for large outbreaks. Of significance to the community is that if the public health response is in red, we can expect more disease spread to occur resulting in eventual higher case numbers, higher hospitalizations, and higher deaths. The core public health strategies of disease investigation and contact tracing are foundational in our ability to slow spread.

For the first time in many weeks, statewide and regional hospitalizations did not rise, although they remain at critical levels. Multiple health care facilities in the region continue to state that they are experiencing a critical shortage of staffing. These data and anecdotal evidence, including media statements from local facilities that 100% bed capacity has been reached, suggest that local and regional health care capacity remains at a critical level.

Unfortunately, the number of deaths continues to increase even though cases and hospitalizations have perceptibly flattened. At the state level, there was a daily average of more than 50 COVID-19 deaths that occurred across the past 14-days. Nearly 60% of Wisconsin’s total COVID-19 deaths have occurred in the past 60-days with that percentage being over 89% across the past 30-days locally (Eau Claire and 7 surrounding counties).

The Health Department continues to implore the community to follow the measures that we know work to slow the spread of disease – keeping social circles small, staying home when sick, maintaining physical distance of 6

feet, washing hands frequently, and wearing cloth face coverings whenever in public or around people not from your household. This continues to be as important as it has ever been.

It also remains critical that people who have tested positive or have been notified that they are close contact answer the phone from public health staff to talk through the requirement to isolate or quarantine. It is also critical that those that have tested positive and those that are close contacts go to our [website](#) to review new information there about what to do next. Isolation and quarantine are difficult but necessary. Slowing the spread of disease is critical for keeping businesses, schools, and all other shared priorities open and thriving.

Additional Metrics:	WI Activity Level by County/Region	EC County Metrics - Summary
	WI Hospital Capabilities	EC County Metrics - Detailed
	WI Facility-Level Investigations	EC County Exposures & Investigations

Eau Claire County COVID-19 Prevention and Control Community Expectations

The Eau Claire County COVID-19 Prevention and Control Community Expectations remain as issued on 11/13/2020. No changes were made to these expectations since the last Situation Report was finalized. Additional information about the updated Expectations can be found [here](#). The Health Department continues to follow up on all complaints related to non-adherence to these basic community expectations. This week we began sending documentation of this non-adherence to entities and individuals in the community who are risking continued disease spread. Our goal continues to be that community stakeholders understand and follow basic expectations to protect themselves and community members they serve. Documented concerns can be shared with the COVID call center or [email](#).

Additional Information:	Current Expectations	UWEC Dashboard	Respond Together EC
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Other Eau Claire County Incident Command Updates

**Remains unchanged since last report*

Respond Together Eau Claire Plan Revised

The Respond Together Eau Claire COVID-19 Mitigation Plan, which was originally released in July, was revised this week. This document was revised to include new and modified metrics that have been incorporated since the original document was released and to better align with the transition made from local health orders to community expectations. This document provides insight into the data that is being used to track disease spread, health care, and public health capacity, and illustrates the additional layers of mitigation actions that are needed to reduce spread. Those layers include core public health principles which are likely to remain important until COVID-19 activity is very low. Additional layers of mitigation discussed in the plan include the local Community Expectations, Statewide orders/advisories, and the best practices guidance that has been developed for specific industry sectors. These guidelines will change based on the status of disease spread and capacity metrics. This document is intended to be a guide for those who want to mitigate COVID-19 risk for themselves as an individual, for their business, their school, or other setting. The revised plan can be viewed [here](#).

Modified Operations at Testing Sites This Week

Due to the Thanksgiving Holiday, several of the local testing sites will not be offering testing during their normal days of operation at various points throughout the weekend. Testing will not be available at Mayo Clinic Health System or Prevea Health on Thanksgiving (11/26), while the Wisconsin National Guard Community Testing Site in Eau Claire will not be operating on Friday (11/27) or Saturday (11/28). Standard dates and hours of operation for the various testing opportunities in Eau Claire County can be viewed later in these updates.

New State Public Health Emergency Declared and Emergency Order Issued

On Friday November 19th, Wisconsin Governor Tony Evers declared a new public health emergency in Wisconsin citing the compromised status of hospital capacity throughout Wisconsin. The declaration (Executive Order #95) can be viewed [here](#). In addition to the new public health emergency, the Governor also issued a new statewide face covering mandate, as outlined in [Emergency Order #1](#). The Face Covering Mandate FAQ can be viewed [here](#). Both orders were effective immediately with an effective duration of 60 days or until a subsequent superseding order is issued. Read the full press release [here](#).

Awaiting Ruling from Wisconsin Supreme Court on Emergency Orders

On Monday November 16th, the Wisconsin Supreme Court heard a case against the statewide face covering mandate or [Emergency Order #1](#), which is currently in place statewide through November 21st. This case is centered around the argument that Wisconsin Governor Tony Evers lacks the authority to issue successive Emergency Orders for the same Public Health Emergency. On October 12th, a Polk County Circuit Judge ruled that Wisconsin Governor Tony Evers retained this authority, there upholding the Governor's ability to impose the face covering mandate. At the time of completion of this report, the Supreme Court had not yet issued a ruling for this case.


Additional developments regarding this and other applicable orders will be provided as they are available.

***On-Line Resources for Cases and Close Contacts**

The Health Department disease investigators are working diligently as they attempt to make contact with new cases and close contacts (when possible) that are determined to be at elevated risk for severe illness or present an increased potential for a concerning outbreak (schools, congregate living setting, etc.). Unfortunately, the current volume of cases makes even this level of case follow-up incredibly difficult. As a result, disease investigators have been forced to prioritize investigation work even further, meaning close contacts and even some cases may not be contacted by phone by a disease investigator. If you are notified by a testing site/provider that you have tested positive for COVID-19 or have been notified that you are a close contact to a case and have not yet heard from the Health Department, please visit the Eau Claire County COVID-19 Information Hub to understand the public health expectations related to isolation and quarantine. There are now 2 links on the page entitled "[I Tested Positive](#)" and "[I am a Close Contact](#)," which walk through these expectations. If there are further questions, the Department encourages cases and close contacts to call the COVID-19 Call Center at (715) 831-7425.

***Numerous Testing Options Available in Eau Claire County**

COVID-19 Testing Sites in Eau Claire County




Please get tested if:

- You have any symptoms of COVID-19
- You have had close contact (within 6 feet for a total of 15 minutes or more) with someone with confirmed COVID-19 (asked to quarantine)

Please stay home until you receive your test results.

COVID-19 Symptoms:

- Fever or chills
- Cough
- Shortness of breath
- Difficulty breathing
- Fatigue
- Muscle or body aches
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Headache
- Diarrhea
- New loss of taste or smell

Testing Locations	SUN	MON	TUES	WED	THURS	FRI	SAT	Details
National Guard Community Site 6697 US Hwy 12 West Eau Claire, WI 54703		11am-7pm				CLOSED 11/27 & 11/28	11am-7pm	Register on the day of your test here: https://register.covidconnect.wi.gov/ or register in person when you arrive or register by scanning:  <hr/> Call (844) 342-6276 to schedule an appointment <hr/> Call your primary care provider/clinic or (715) 838-5025 to be screened <hr/> Make an appointment through myprevea.com
National Guard Community Site 616 W. Washington Ave Augusta, WI 54722				2-7pm				
Marshfield Clinic Health System 2310 Craig Rd Eau Claire, WI 54701	9am-1pm	9am-5pm	9am-5pm	9am-5pm	9am-5pm	9am-5pm	9am-1pm	
Mayo Clinic Health System 2712 Stein Blvd Eau Claire, WI 54701	Availability Varies	9am-4pm	9am-4pm	9am-4pm	CLOSED 11/26	9am-4pm	8am-12pm	
Prevea Health 950 West Clairemont Ave Eau Claire, WI 54701	8am-12pm	8am-4pm	8am-4pm	8am-4pm	CLOSED 11/26	8am-4pm	8am-12pm	

Additionally, the University of Wisconsin – Eau Claire recently announced a new community testing initiative being implemented through a partnership between the University of Wisconsin System and the U.S. Department of Health and Human Services. This initiative will bring approximately 15,000 antigen tests for **asymptomatic** testing to the University of Wisconsin’s Eau Claire and Barron County campuses for faculty, staff, and students as well as providing a community testing site in Eau Claire for the general public. This community antigen testing site will operate at the Eau Claire Memorial High School parking lot in Eau Claire from 12:00 – 8:00 pm on Saturdays, Sundays, and Wednesdays through mid-December. This testing site is best suited for people over the age of 5 who **do not** currently have COVID-19 symptoms. This testing may be especially appropriate for people who attend, live, or work in a group setting (school, daycare, shelter, group home), interact with vulnerable populations, travel frequently, or have been in close contact with someone with COVID-19. The benefit of antigen testing is that you can get a rapid result, but in some situations, people may need to confirm with a different type of test. A flyer for the antigen testing site can be viewed [here](#). **Anyone experiencing symptoms of COVID-19 should not visit this site, and instead pursue a testing option from the table above.**

More details about these and other testing options are available at the [Symptoms and Testing page](#) of the Eau Claire COVID-19 Information Hub and the Wisconsin DHS [Community Testing Page](#).

***COVID-19 Potential Community Exposures and Public Health Investigations**

As a reminder, Eau Claire City-County Health Department alerts the public of [potential COVID-19 exposure](#) at local establishments whenever a positive individual is known to have visited a location and have been in prolonged close contact with persons that they are unable to identify. Any future public notifications will be posted on the above web page along with a weekly summary of the active and total Public Health Investigations in Eau Claire County related to COVID-19.

As a reminder, due to the extreme volume of cases, our disease investigators remain limited in their ability to thoroughly interview cases and identify and contact their close contacts. As a result of the modified public health practices, potential community exposures are less likely to be revealed during case follow-up. **At the current rate of community spread, anyone who is engaging in activities requiring close contact with other individuals that they do not know should assume that these activities come with an elevated risk of exposure.** We strongly encourage community members to limit close contact with non-household members.

***COVID-19 Call Center**

The number for the COVID call center is (715) 831-7425 with hours 8:30am – 4:30pm Monday through Friday. Callers may leave a message and a return phone call will occur within the same business day.

***Reminder to Sign up for Situation Report e-notifications:**

If you would like to receive direct notification whenever new reports are added, please sign up for an automated email notification at: <https://www.eauclairewi.gov/our-city/sign-up-for-e-notifications>. To successfully register for these updates, you must provide your name and email address and subscribe to “COVID-19 Situation Report.”

***Current Incident Objectives**

Objective #1: Contain and mitigate community spread of COVID-19

Objective #2: Coordinate strategies to facilitate a safe and effective social and economic reopening and recovery

Objective #3: Provide relevant, accurate information and resources to the general public, specialty populations, and key partners

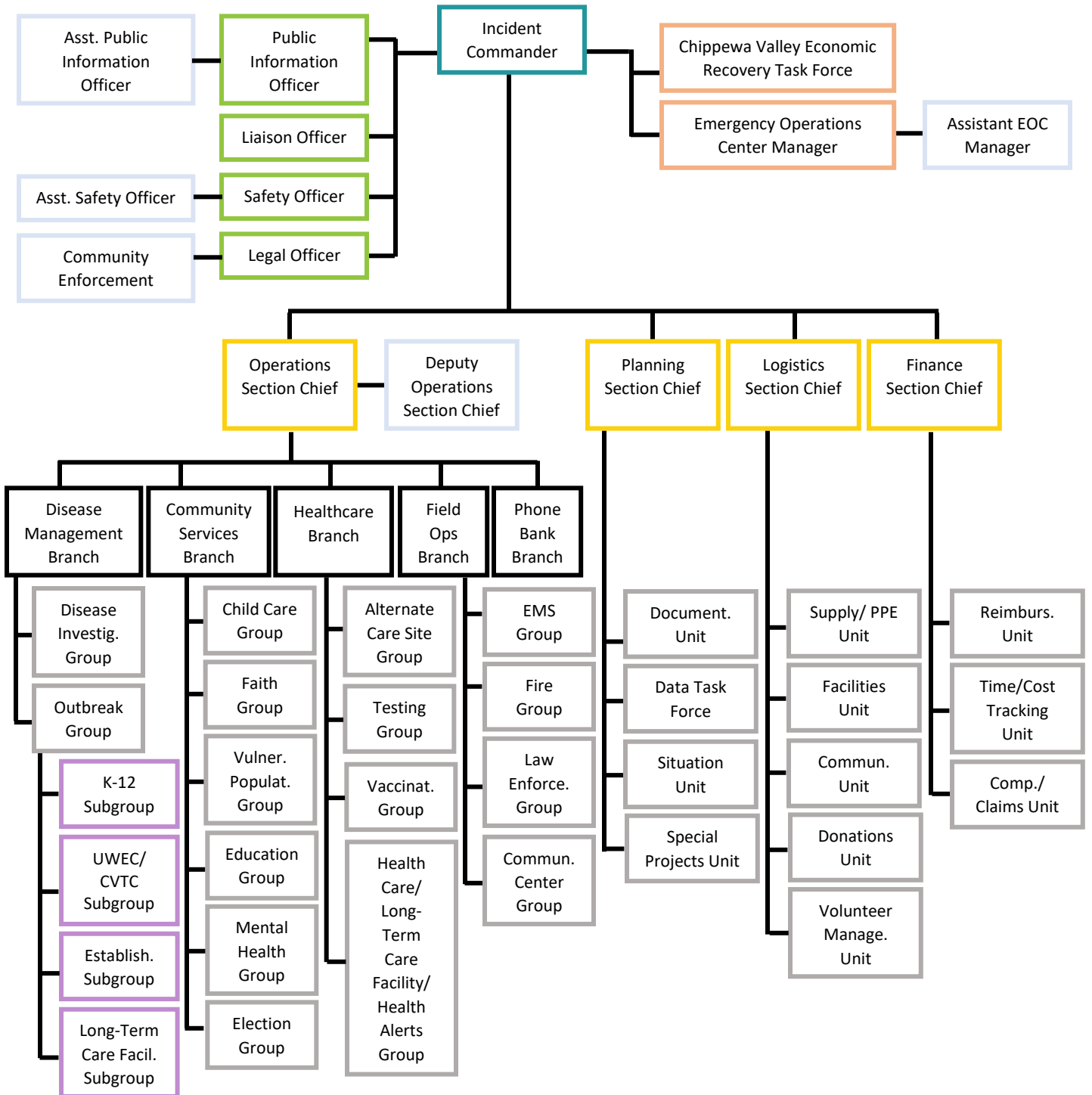
Objective #4: Facilitate and support the Development and implementation of community-wide health care surge and response plans and actions in coordination with local health care providers and state and federal agencies

Objective #5: Sustain and adapt operation of the Emergency Operations Center and incident command elements

Current Duration of Operational Period

9 Days - Wednesday 9:00 am – Friday 8:59 am

***Current Organizational Structure**



Other Pertinent Links and Resources

** Remains unchanged since last report*

- ❖ Influenza Vaccine Resources
 - [Influenza Vaccine Resources](#) now available in English, Hindi, Hmong, Spanish, and Somali
 - [What You Need to Know about the Flu](#), an ASL video with closed captioning from the Office of Deaf and Hard of Hearing
 - [#LetsTalkFlu PSA](#)
- ❖ COVID-19 Vaccine Resources
 - [DHS COVID-19 Vaccine page](#)
 - [Children's Hospital of Philadelphia](#), COVID-19 Vaccine Q&A
 - [CDC COVID-19 Vaccine page](#)
 - CDC: [Facts about COVID-19 Vaccines](#)
 - SDMAC: [11/24/2020 Meeting Information](#)
- ❖ [DHS Facebook Live](#) event on Monday focused on mental health and resiliency
- ❖ [DWD Partners with IKEA US Community Foundation to Fund Workforce Equity Grant Program](#)
 - [Applications are due January 18, 2021](#)
 - [Workforce Equity Grant Program Brochure](#)
- ❖ [Gov. Evers Announces Wisconsin has Shipped One Millionth N95 Mask through State Distribution System](#)
- ❖ [DPI message to superintendents](#) related to special education services during COVID-19
- ❖ [Different, Safe Holidays 2020](#) one-pagers from Wisconsin Office of Children's Mental Health
 - [Things to Do in Your Home and Safely Outside Your Home](#)
 - [Special Days - Feeling Connected](#)
 - [Gift and Art Activities](#)
- ❖ [Gov. Evers Provides Update on the Investment of Nearly \\$2 Billion in Wisconsin Communities in Response to COVID-19 Pandemic](#)
- ❖ [Gov. Evers Invests \\$120 Million to Support Small Businesses as COVID-19 Cases Surge](#)
- ❖ [Gov. Evers Announces \\$6.6 Million for Organizations Providing Out-of-School Care for Kids During Pandemic](#)
- ❖ [Guidelines for the Prevention, Investigation, and Control of COVID-19 Outbreaks in K-12 Schools in Wisconsin](#) and the [Executive Summary for the Guidelines](#) are now available in English, Chinese Mandarin, Hindi, Hmong, Somali, and Spanish
- ❖ The Legislative Fiscal Bureau has released a [memo](#) summarizing Governor Evers' COVID-19 pandemic proposal ([LRB-6522](#))
- ❖ Resources regarding antibody testing:
 - FAQs about antibody testing on the [DHS COVID-19 Testing page](#)
 - [HAN #7: Antibody Testing for SARS-CoV-2 in Wisconsin: Recommendations and Reporting Requirements](#)

- ❖ [CMS Urging Nursing Homes to Follow Established COVID Guidelines This Holiday Season](#)
- ❖ New and Updated from CDC:
 - [Prioritizing Case Investigations and Contact Tracing for COVID-19 in High Burden Jurisdictions](#)
 - [Prioritizing COVID-19 Contact Tracing Mathematical Modeling Methods and Findings](#)
 - [Scientific Brief: Community Use of Cloth Masks to Control the Spread of SARS-CoV-2](#)
 - [MMWR Early Release: Trends in County-Level COVID-19 Incidence in Counties With and Without a Mask Mandate--Kansas, June 1-August 23,2020](#)
 - COVID-19 incidence decreased in 24 counties with mask mandates but continued to increase in 81 counties without mask mandates.
 - [MMWR Early Release: COVID-19 Outbreak Associated with a 10-Day Motorcycle Rally in a Neighboring State--Minnesota, August-September 2020](#)
 - 51 cases among Minnesota residents who attended the event and 35 cases among close contacts were identified. Genomic sequencing supported the associations with the motorcycle rally.
 - [Celebrating Thanksgiving](#), [How to Select, Wear, and Clean Your Mask](#), and [Holiday Celebrations and Small Gatherings](#) pages have been updated for upcoming holidays
 - Additional [Social Media Resources](#) for the holidays are now available
 - [Transcript for CDC Telebriefing on the COVID-19 Outbreak](#)
 - [MMWR: Characterization of COVID-19 in Assisted Living Facilities--39 States, October 2020](#)
 - [MMWR: COVID-19 Outbreak--New York City, February 29-June 1, 2020](#)

Additional Links and Resources:

[*EC County COVID-19 Information Hub*](#)

[*Eau Claire Chamber of Commerce COVID-19 Website*](#)

[*Wisconsin Economic Development Corporation \(WEDC\)*](#)

[*Personal Protective Equipment \(PPE\) Guidance*](#)

[*Wisconsin Department of Health Service \(WI DHS\) COVID-19 website*](#)

[*Health Care Providers webpage*](#)

[*Centers for Disease Control and Prevention \(CDC\) COVID-19 website*](#)

[*CDC Health Alert Network \(HAN\)*](#)

Next Scheduled Situation Report Date: Friday December 4th, 2020

Respond Together Eau Claire

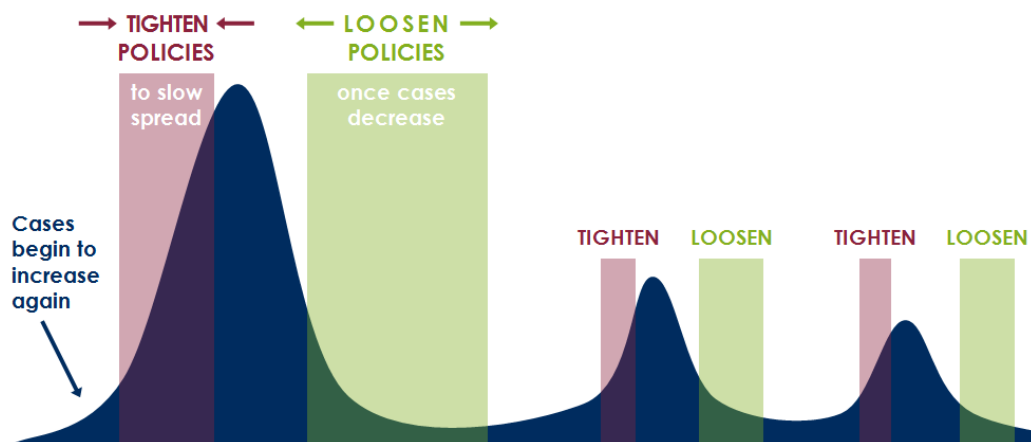
COVID-19 Mitigation Plan

Revised November 2020

Introduction

The COVID-19 pandemic is a significant threat that may continue until safe and effective treatments and a vaccine are developed. **The purpose of this document is to provide guidance for decision making and highlight actions that people and communities can take (mitigation strategies) to slow the spread of COVID-19 in Eau Claire County.** Mitigation strategies are those things that we can do to decrease how badly COVID-19 impacts our community. They are also shown by research to work to slow COVID-19 spread. This document focuses on using local data and context to inform public health, city and county leadership, community partners and stakeholders, and all Eau Claire County community members to make decisions about the specific mitigation strategies needed to slow the spread of COVID-19 and save lives.

In the absence specific medical treatments or widely available vaccine for COVID-19, strategies that help to contain the virus, such as disease investigation and isolation, contact tracing and quarantine, as well as mitigation strategies, such as physical distancing, face coverings, and hand hygiene, are needed. These actions are part of both regular public health practice for many communicable diseases and recent specific public health orders and expectations for COVID-19 in Eau Claire County. **Specific strategies to slow the spread of disease must be designed to fit the disease occurrence and characteristics of the community as well as the specific characteristics of the disease itself.** Some of these basic mitigation strategies must be present at all times of the pandemic until there is an effective vaccine, but others may loosen or tighten based on local, regional, and statewide disease occurrence. See graphic below.



This illustration shows that as a surge of new cases is detected, measures to increase safety (red) can be put in place to reduce the spread of the virus. Following the 'peak' of cases, those policies can lift to move toward fewer safety requirements. Image modified from <https://preventepidemics.org/covid19/science/insights/adaptive-response/>.

At the time of this plan document, COVID-19 cases are at an all-time high and hospitalizations and deaths due to the disease are increasing to the point that public health and hospitalization capacity are compromised. This is a crucial time for the Eau Claire County community to continue to be vigilant and take actions that will decrease further spread of the disease at the individual, organizational, and community level. This requires everyone to take responsibility for their actions, to work together, and to support best practices. It is important to slow the spread of this disease and reduce the chance of a continued “surge” of cases. A large volume of cases strains our local workforce, preventing some businesses or schools from operating in-person if a large number of the workforce test positive or need to quarantine due to exposure. A high case volume also strains healthcare system resources and capacity. This scenario also strains public health capacity and can lead to incomplete contact tracing or follow up with positive cases.

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- *In the month of July, on average, 8 new COVID-19 cases were confirmed daily; 2 deaths occurred*
 - *To date in the month of November, on average 148 new COVID-19 cases have been confirmed daily; 35 deaths have occurred*
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Respond Together Eau Claire Data Measures

During the COVID-19 pandemic, national, state and local guidance has informed individuals, businesses, communities, and schools as they have been making decisions about when and how to safely open and engage in activities. There is no single indicator for when it is safe to “open” or “close”. Like many other public health agencies, Eau Claire City-County Health Department continues to monitor several metrics to describe disease activity locally to inform policy and practices at the individual, community, and organizational level.

This document includes summary metrics that community leaders and individuals can use to assess the local situation for COVID-19 as they make decisions related to safely opening businesses, schools, and other activities. Additionally, the Eau Claire City-County Health Department supports use of this data to develop organizational policies related to community expectations or other appropriate mitigation strategies.

In June, with the first version of *Respond Together Eau Claire*, the Eau Claire City-County Health Department identified several measures that could be tracked over time to summarize the COVID-19 disease impact in the county. These measures also track the ability of both the local healthcare system and public health system to respond to disease. If we have an overwhelmed public health and healthcare system we will see more disease, hospitalization and death. As we have learned more about the disease and best practices, and as more data has become available from the Wisconsin Department of Health Services, the weekly county metrics have been

updated, but continue to focus on three core areas of Disease Occurrence, Healthcare Capacity, and Public Health Response.

Disease Occurrence

To control the spread of disease, it is critical to understand how many people are getting sick and the main ways in which they are getting sick (travel, contact with a sick individual, unknown, etc.). If the number of new cases is overwhelming, it is difficult to quickly contain the virus and reduce spread. A sustained, high testing level is a critical to ensure our disease occurrence data are meaningful. Testing is how we detect active infection, which leads to disease investigation and contact tracing and prevention of further disease spread transmission from those that test positive.

Healthcare Capacity

Along with knowing disease and testing data to monitor the course of the epidemic, it is vital that healthcare systems are equipped to manage patient care of COVID-19 and respond to a surge in cases. This capacity includes staff, protective equipment, and bed availability, as well as testing for healthcare workers. An overwhelmed healthcare system will likely increase negative disease outcomes, including deaths.

Public Health Response




To contain disease, a robust public health response system is needed. Disease containment includes the ability to identify and isolate individuals who test positive to prevent further spread. Also critical to containment is rapid contact tracing, in which contacts who have been exposed by a positive case are identified and notified of the need to stay home for the incubation period of this disease, which is 14 days from exposure. If cases and their close contacts stay home, disease spread does not happen to the next circle of people in the community.

These three core areas of metrics support data-informed decision making. Although these measures do not specifically tell us which mitigation strategies are needed, they do provide a picture of disease activity in the community that highlights when individuals, communities, businesses, and government must consider additional ways to respond. Our goal as a community is to not overwhelm the healthcare and public health system and to keep our case activity level low.

➤ *Current ordinances, orders, advisories, or expectation related to COVID-19 are [here](#)*

➤ *Current metrics for Eau Claire County are [here](#)*

Table 1. Local data helps describe disease occurrence as well as healthcare and public health capacity. These metrics are updated on our website covid19eauclaire.org

Metrics	Lower risk of transmission 	Moderate to Higher risk 	Highest risk 
Disease occurrence measures			
Total case count in last 14 days	<i>See note below*</i>		
Case Activity Level: Cases/100k population combined with growing, shrinking, or no significant change in % change from previous week	Low activity level	Medium activity level	High, Very High, or Critically High Activity Level
Outbreaks: New outbreak investigations in most recent 14-day period	0 new outbreak investigations	1-2 new outbreak investigations	3 + new outbreak investigations
Community Spread: Proportion of contacted COVID-19 cases who don't know where they could have gotten COVID-19 in most recent 14-day period	< 20%	20-30%	> 30%
COVID-like Illness (CLI) Activity Level: Count of CLI emergency room visits/100k combined with growing, shrinking, or no significant change in % change from previous week	Low activity level	Medium activity level	High, Very High, or Critically High Activity Level
Healthcare system measures			
Tests conducted: Number of tests per 100,000 people per day over most recent 14-day period	<i>See note below*</i>		
Percent Positive Tests: Positive tests as a percent of total tests across most recent 14-day period	< 5% positivity	5 to <10% positivity	10% + positivity
COVID patients hospitalized: Count of COVID inpatients in Northwest Region and growing, shrinking, or no change over most recent 14-day period	<i>See note below*</i>		
COVID ICU patients: Count of COVID ICU patients in Northwest Region and growing, shrinking, or no change over most recent 14-day period	<i>See note below*</i>		
Hospital bed use: Inpatient hospital beds occupied in past 14 days (Northwest Region)	< 80% occupied	80-90% occupied	>90% occupied

ICU bed use: ICU beds occupied in past 14 days (Northwest Region)	< 80% occupied	80-90% occupied	>90% occupied
<i>Public Health response</i>			
Case Contact Timeliness: Proportion of positive cases contacted within 24 hours in most recent 14-day period	100%	75%-<100%	<75%
Contact Tracing Timeliness: Proportion of close contacts reached within 48 hours of case interview in most recent 14-day period	85% +	75%-<85%	<75%
Mitigation strategy continuum	Less protective strategies needed <-----> More protective strategies needed <i>See actions to slow the spread of COVID-19 below</i>		

*No thresholds: measure provided for general monitoring to provide community context

Mitigation strategies/Actions to slow the spread of COVID-19:

At all levels of risk (Lower, Moderate, High) as determined by the *Respond Together Eau Claire* metrics, it is critical that communities follow core public health practices to slow disease spread. These include consistent and correct use of quality face coverings, physical distance of 6 feet, social distancing to the extent possible, and hand hygiene and respiratory etiquette (see table below).

Local data, such as the measures in Table 1, and statewide data provided by the WI Department of Health Services provide context with which to determine the most appropriate mitigation strategies at different points in time. As this data highlight fluctuations in the severity or intensity of the pandemic, different mitigation strategies may be recommended. Also, it should be noted that strategies have a cumulative impact on reducing risk. Applying multiple strategies within a community or facility can decrease the overall risk of transmission. A facility, organization, school, or business will have a lower risk of transmission of the virus that causes COVID-19 if the core public health principles + the data-driven local, state, or national advisories are followed.

Mitigation strategies that may be considered based on risk level in the community are provided in several places to help with decision making about best practices to limit spread of COVID-19. **Following the [Eau Claire County Expectations](#) document is the critical first step for everyone in Eau Claire County.** This document uses data and evidence to define the best way to reduce disease spread in our community overall. Expectations are in place to guide individuals, public spaces/businesses, and group gatherings.

Other important steps to help individuals and community stakeholders adopt best practices to slow the spread of disease are:

- 1) to follow other local, state, and national orders and advisories, and
- 2) to use existing summary resources of recommended strategies for specific businesses, agencies, or groups.

Table 2. Description of public health principles and resources that describe a variety of mitigation strategies that should be applied at all risk levels outlined in Table 1.

Public Health Principles and Mitigation Strategies to Reduce Transmission Risk	
Core public health strategies (for slowing coronavirus spread at ALL levels of risk)	<ul style="list-style-type: none"> Cooperate with any public health investigation to slow spread (individuals and organizations) Ensuring isolation (staying home) of people diagnosed with COVID-19 Ensuring quarantine (staying home) of people who have been exposed to COVID-19 Consistent and correct use of quality face coverings Physical distancing of at least 6 ft from others that are not part of your household Regular and good hand washing Cover coughs/sneezes Staying home when sick
Specific mitigation strategies (to help lower the risk of transmission at moderate and higher levels of risk of transmission)	<ul style="list-style-type: none"> Eau Claire County-wide Community Expectations Eau Claire County Ordinances City or village Ordinance National orders or advisories State of Wisconsin Executive or Emergency Orders WI Department of Health Services Community Mitigation Strategies (Mitigation strategies based on designated risk level for county as determined by DHS. Activity level is provided here.) WI Economic Development Corporation sector-specific guidelines Other industry or sector standards

These resources are subject to change based on the severity of the pandemic and are determined by different levels of government. For this reason, they are being referenced here and acknowledged that these requirements or advisories are fluid, and not static. **Please follow the provided links for the latest recommendations at a local, state, or national level.** In the

situation where different levels of government have different restrictions, the more restrictive advisory or requirement should be followed.

The [Eau Claire County COVID Hub website](#) and Eau Claire City-County Health Department [social media](#) will regularly be informing the public when new orders, expectations, or advisories that apply to Eau Claire County are issued. Please refer to these sites for timely updates.

Future Mitigation Strategies: Vaccination

Development of safe and effective vaccines for COVID-19 is ongoing at the time of publication of this document. Similar to other contagious diseases, a vaccine is the most effective strategy for preventing further community spread. It is unclear at this time what percentage of the population would need to be vaccinated to achieve “herd immunity”. Herd immunity is when enough of a population carries immunity to a contagious disease because of vaccine or illness that further spread of the disease between people is unlikely. Based on evidence from other diseases, it is likely that over 75% and possibly as much as 90% or more of a community would need to be vaccinated or otherwise immune to achieve herd immunity. When a viable vaccine becomes available, the Table 2 mitigation strategies will be updated to reflect this new strategy for slowing or stopping the spread of the virus that causes COVID-19. The core public health and other recommended mitigation strategies may still be necessary until herd immunity is achieved.

CONCLUSION

Responding effectively to COVID-19 takes the whole community. Efficiently and effectively moving to a new normal with limited impact on daily activities is critically important to us as individuals, businesses, and community stakeholders. Carefully utilizing public health principles and core metrics helps us all to support our community in reaching our goals of reducing the number of people who simultaneously contract COVID-19, reducing deaths from COVID-19, and assuring our healthcare system can adequately respond to persons needing medical care. We look forward to this partnership as we work toward a healthy and successful Eau Claire County.

DRAFT Eau Claire COVID-19 Data Snapshot – December 3, 2020 **DRAFT**

Data Measure		Explanation
Average daily new cases	61	Measure reflects average over last 7 days. Goal for daily new cases to manage contact tracing: 10 cases
Cumulative no. cases (total over last 7 days)	7956 (430)	State rating for EC County COVID Activity Level is ‘Critically High’, with ‘shrinking’ trajectory. 31 counties have ‘Critically High’ activity level rating
Cumulative no. deaths (total over last 7 days)	59 (2)	Deaths increased dramatically in November. 12 deaths occurred Mar – Oct 28 th . 47 deaths Oct 28 – Dec 2
Average Daily Positivity Rate*	29%	Generally steady at low to mid 30-percent range since end of October Significantly higher than average through summer (<10%)
Cumulative no. hospitalizations (total over last 7 days)	248 (11)	Weekly total hospitalizations in Nov were 2x – 3x higher than any previous time.
Hospital Capacity: regional inpatient/ ICU bed use	80%/84%	Capacity is improving slightly. Providers continue to report staffing shortages and challenges in overall regional ability to treat and care for patients.
Public Health Capacity	Moderate	Able to follow up with all individuals who test positive, but unable to do effective contact tracing due to case volume.
Highest Risk Areas	Potential for increase in cases following gatherings at hunting camps, Thanksgiving holiday. Concern that December holiday gatherings will also contribute to spread.	
Successes	Ongoing work with several community organizers on testing navigation; downward trend in number of cases and improvement in hospital capacity locally. State funding made available for businesses to implement health and safety measures in Community Expectations	
Challenges	Antigen testing site ending soon WI National Guard testing site(s) continuation confirmed recently but site needs to be changed. Other testing is decreasing with uncertainty about reason. Communicating change in quarantine guidelines from DHS (sparked by CDC change to guidelines)	
Action Needed to Slow the Spread Virus	Local: Community members limit gatherings over upcoming holidays; staying home as much as possible State: Funding for testing, contact tracing in 2021, operation of WI National Guard testing sites Federal:	

*Positivity rate is reported by person, and multiple negative tests for one person are not counted.

Additional Information:

[Eau Claire County Community Expectations](#)

[COVID-19 County Data Dashboard](#) (updated daily)

[Eau Claire County Situation Report](#) (published weekly)

MOTION TO POSTPONE WITH DIRECTION

MOTION TO POSTPONE AGENDA ITEM #21: ORDINANCE AMENDING CHAPTER 8.04 “CONTAGIOUS DISEASE” BY CREATING SECTION 8.04.021 ENTITLED “LOCAL HEALTH OFFICER ORDERS” OF THE CODE OF ORDINANCES OF THE CITY OF EAU CLAIRE AUTHORIZING THE LOCAL HEALTH OFFICER TO ISSUE ENFORCEABLE ORDERS WITH NECESSARY PROCEDURAL AND SUBSTANTIVE SAFEGUARDS, WITH THE FOLLOWING DIRECTION:

WHEREAS, though there have been broad discussions regarding the proposed changes amending the "Contagious Disease" ordinance, there is a need for a deliberate pause; and

WHEREAS, the ability to take a step back can foster our community’s ability to bring partners and perspectives to the table that will strengthen the long-term ability to look at the public health perspective; and

WHEREAS, public policy frameworks such as a City Council Work Session and a City Council Pre-Legislative Discussions can foster collaboration between staff and policy makers.

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Eau Claire that the Public Health Director and City Manager bring a revised engagement plan and recommendations to form a task force to the Eau Claire City Council on or before Monday, January 25, 2021 in the form of a City Council Work Session, that includes an update on the proposed task force membership and community engagement, including a shared understanding of the process that will be used to engage our community on the strengths and limitations of amending Section 8.04.021.

BE IT FURTHER RESOLVED that the Eau Claire City-County Board of Health populate the task force membership.

BE IT FURTHER RESOLVED that the Public Health Department is the designated lead on the task force and engagement plans.

BE IT FURTHER RESOLVED that the Public Health Director and City Manager may consider and recommend a facilitator to assist in these efforts.

BE IT FURTHER RESOLVED that the Public Health Director and City Manager bring the findings of the community task force with recommendations to the city council on the proposed “Contagious Disease” ordinance, on or before June 8, 2021 in the form of a pre-legislative work session.

BE IT FURTHER RESOLVED by the City Council of the City of Eau Claire that any changes to this schedule must be approved by the Eau Claire City Council, and should be coordinated through the Eau Claire City Manager.

BE IT FURTHER RESOLVED that the Public Health Director and City Manager are empowered to apply their professional judgment to shorten the time frame.

BE IT FURTHER RESOLVED that, should it be deemed a necessity, the City Council welcomes emergency legislative requests from the Public Health Department and shall act without haste to protect local public health.

Adopted,
October 13, 2020

(SEAL) President Terry L. Weld
(SEAL) City Manager Dale Peters
(ATTESTED) City Clerk Carrie L. Riepl

**October 28, 2020 Board of Health Meeting
Virtual Meeting**

The Board of Health convened in open session at 5:15 pm
The meeting was called to order by Mery Price

**Board Members Present
Quorum is reached**

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

Board Members Absent:
None

Staff Members Present:

Lieske Giese
Janice Vinopal
Marisa Stanley
Gina Holt (recorder)

Order of Agenda Request to pull items from Consent Agenda

- None made

Public Comment:

- No public comment was received regarding any agenda items.

Update COVID-19 Situation Report

- Discussion on current COVID19 data from Eau Claire County. With an average of 100 case a day for the last week or so we have moved to a place where we are not able to contact close contacts and are working with partners to try and do that notifications. We have added on our website instructions on what to do if you have tested positive or if you have been in direct contact. The state disease investigation team and local health departments are overwhelmed.

Consent Agenda

- a. Approval of minutes from September 23, 2020 meeting
- b. Approval of Strategic Prevention framework Partnerships for Success (PFS15) Grant
- c. Approval of Diabetes and Heart Disease Prevention Grant

Motion to approve Consent Agenda: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

Ayes: Don Bodeau, Jennifer Eddy, Liz Spencer, Mark Kaeding, Emily Berge, Martha Nieman, Terry Miskulin

Business Item

- a. Receive Quarterly Financial Update
 - Discussion on COVID19 expenses and revenues.
 - 2021 Funding sources for COVID are uncertain.

Motion to approve Nurse Family Partnership Family Foundations policy as presented by Health Department Staff: Jennifer Eddy

2nd Motion: Emily Berge

Motion Carried: Yes (unanimous vote)

Ayes: Don Bodeau, Jennifer Eddy, Liz Spencer, Mark Kaeding, Emily Berge, Martha Nieman, Terry Miskulin

b. Approval of Nurse Family Partnership Family Foundations funding

- This allocation is part of helping our 2021 budget as we are continuing to prioritize NFP services.

Motion to approve Nurse Family Partnership Family Foundations funding as presented by Health Department Staff: Martha Nieman

2nd Motion: Jennifer Eddy

Motion Carried: Yes (unanimous vote)

Ayes: Don Bodeau, Jennifer Eddy, Liz Spencer, Mark Kaeding, Emily Berge, Martha Nieman, Terry Miskulin

c. Approval of Employee Quarantine and Isolation Sick Leave Policy

- This is an important message to staff that isolation and quarantine is important.

Motion to approve Employee Quarantine and Isolation Sick Leave policy as presented by Health Department Staff: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

Ayes: Don Bodeau, Jennifer Eddy, Liz Spencer, Mark Kaeding, Emily Berge, Martha Nieman, Terry Miskulin

d. Approval of fee deviation strategy related to influenza vaccine

- This is an example of a strategy utilizing the fee deviation policy to increase influenza vaccinations.
- The drive through car flu shot clinic in Augusta served 151 individuals. 47 vaccinations were given to adults, the rest were given to children.
- There will be another flu shot clinic in Eau Claire in the beginning of November.

Motion to approve fee deviation strategy related to influenza vaccine as presented by Health Department Staff: Jennifer Eddy

2nd Motion: Emily Berge

Motion Carried: Yes (unanimous vote)

Ayes: Don Bodeau, Jennifer Eddy, Liz Spencer, Mark Kaeding, Emily Berge, Martha Nieman, Terry Miskulin

Other policy and informational items from staff for the Board

- Director/Health Officer Report-enclosed
 - No discussion
- Correspondence/Media-enclosed
 - No discussion
- Service Recognition Ted Johnson, Chemist -Retirement
 - Kind words were shared regarding Ted's employment.

- d. 2021 ECCCHD Budget update -enclosed
 - In the next few weeks there will be meetings to discuss 2021 budgets with both the City and County.
 - There will be a future discussion related to unspent tax levy due to COVID19.
- e. Single Audit Report
 - No discussion
- f. Eau Claire Healthy Communities Update-enclose
 - No discussion
- g. Strategic Plan Update-enclosed
 - We continue to work through being strategic, but a lot of the plan has been put on hold while working through COVID.

Board member informational items

- a. Board of Health Advocacy/Policy –No discussion
 - WPHA/WALHDAB Legislative Priorities
 - Other
 - November work session will not have any business agenda items. It is a session that will be spent talking and focusing on 2021.

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

- a. None made

Next scheduled BOH meeting is November 11, 2020 at 5:15 p.m.
Merrey Price adjourned the meeting at 7:09 p.m.

**November 11, 2020 Board of Health Meeting
Virtual Meeting**

The Board of Health convened in open session at 5:15 pm
The meeting was called to order by Merey Price

Board Members Present

Quorum is reached

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

Staff Members Present:

Lieske Giese
Janice Vinopal
Marisa Stanley
Jeff Robb
Gina Holt (recorder)

Public Comment:

- None received

Board of Health Priorities

- Priorities and Action Discussion:
 - Suggestion for Priority 2: add education so it reads support, advocate and educate public health priorities
 - Suggestion for Priority 3: Mention health equity. Any place in the page that discusses all policies adding health equity and raise awareness.
 - Suggested adding specific wording around COVID perhaps adding a separate priority or adding COVID to actions. Discussion regarding adding COVID specific actions.
 - Suggestion to add maintain and develop the health departments capacity, the capacity to deal with a pandemic.

Work Session and Facilitated Discussion

- Overview of COVID: Eau Claire County's case rate is currently higher than the states. Our goal is to follow up on all cases and then follow up with close contacts. This has not been achieved that due to the high case numbers. We are working with institutional partners to notify close contacts. The department continues to work with the Wisconsin National Guard test site as well as working with the clinical test sites. UWEC has been doing antigen testing and is now testing faculty and off campus students. If a positive antigen test is received, they do a confirmatory PCR test on site. UWEC is working with the ECASD to offer additional community antigen testing at Memorial High School on Saturdays, Sundays, and Wednesdays for the next four weeks. This will focus on asymptomatic testing. We are looking at adding a policy maker briefing that would be some key talking points and messages that would go to policy makers (city council, county board, Health Department as well as other government entities)

Facilitated discussion will be structured under the following "buckets"

1. Policy/legislation-Questions asked and discussed: It appears other continues have stronger orders, what is the consequence or pushback that they have received? Does the WI supreme court decision negate statute 252? Would any proposed ordinances include oversight of the Health Director? Is there any sense of power behind the current Public Health Expectations document? What are the results of lack of national and state leadership during the pandemic?

- The order had a sense of power to it but was limited due to the inability to write citations. We continue to receive and investigate complaints. The department works hand in hand with the Chippewa Valley Recovery Task Force. Giving institutions backing and support helps throughout this difficult time.
 - The lack of national and state leadership has been a burden on local government. Other counties in Wisconsin that continued with stronger orders have faced litigation. The existence of ordinances and or orders can have a community impact to slow the spread. An example of sending a clear message would be something like a mask requirement in restaurant or stores with signage like no shoes no shirt no service.
 - Partnership with all local government is ideal. If we were to try and limit things like gatherings would it be helpful if it were in conjunction with the City Council and County Board. Ordinance action is municipality by municipality.
2. Budget- Questions asked and discussed. How is the focus on COVID taking away from other areas of work in the Health Department? What would be the roadblocks in using tax levy money to hire temporary employees? What does COVID funding look like for 2021?
- The department has spent a lot of money on COVID related work. We are estimating well over \$2 million dollars to be spent in 2021, and we know that there will be a gap in funding. We also have not been able to focus on fee-based programs and doing things such as applying for new grants. These things all effect the budget. If our estimates of our expenses are correct for 2021 there could be a \$1.8 million dollar gap. We are trying to figure out what our priorities will be. What services do we stop, what do we start etc.? We are also negotiating with the City/County around unspent tax levy from 2020. Staff that would have been tax levy funded have been funded through COVID with federal grant funding that would have otherwise been levy funded. We indicated that we would like to move some of those funds into a fund balance account that we could draw from for 2021 COVID expenses, We have hired a number of people for disease investigation and a number of individuals across incident command beyond our regular public health staff. Having funding to continue with those people in 2021 is so important.
3. Workforce-Questions asked and discussed: How is the negative feedback regarding public health effecting staff morale? Will future recruitment become difficult?
- One of things that we are worried about is the large percentage of staff that is retirement eligible. Because of our response to COVID-19 it is difficult to bring new staff members on and have an effective orientation. We are working on a way to hire replacements earlier than usual and being strategic with training.
 - There has been so much negative feedback regarding public health throughout all of this. It is hard when staff care so much, they have an enormous workload, and are receiving non supportive feedback. Health officers and staff are leaving due to the overwhelming nature of the work. We are trying to find ways to continue to show support to our staff. We are working with WIFLI to look at what opportunities there may be to support the management team who does not get paid or compensated for extra hours worked.
4. Advocacy-what can you do/what can the community do questions and discussion: A lot of community members have reached out to City Council and County Board members asking what they can do to help, any ideas or recommendations on how to respond?
- Advocacy about funding will continue to be important. Board members continuing to bring ideas back to the department which is so helpful. Sharing the “Caring is Contagious” message is a great way to advocate. State and Federal elected official’s advocacy and letting

them know what we need. Working with local municipalities and local government to continue advocacy work.

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

- a. None made

Next scheduled BOH meeting is December 9, 2020 at 5:15 p.m.

Merrey Price adjourned the meeting at 7:08 p.m.

DRAFT

Fact Sheet –12/09/2020 Board of Health Meeting**Agenda Item 4.c****Northwoods Coalition Mini-Grant**

A mini grant in the amount of \$1000 has been awarded to the Eau Claire Healthy Communities High Risk Drinking Prevention Action Team (HRDPAT) by Northwoods Coalition. Northwoods Coalition was formed in 1995 and is a partnership between Marshfield Clinic and several community coalitions from their 37-county region. It is the largest and oldest coalition dedicated to substance misuse prevention in Wisconsin. Both the Alliance and Healthy Communities are active members of the coalition. The Northwoods Coalition provided the opportunity to receive mini grants to its coalition members to help shape policies, practices and programs in their communities which address public health issues arising from use of alcohol and other drugs. The mini- grant is awarded for projects to be completed between July 2020 and May 2021. This funding will be used to build capacity and increase sustainability through development of action plans for the HRDPAT. Eau Claire City-County Health Department serves as the fiscal agent for Healthy Communities.

Budget Implications: Grant funds will support staff time to build capacity and increase sustainability through development of action plans for the HRDPAT.

Staff Recommendation: Accept as fiscal agent \$1000 (EC Healthy Communities) mini- grant from Northwoods Coalition.

Prepared by Denise Wirth, Community Health Promotion Division Manager

Fact Sheet 12/09/2020 Board of Health Meeting

Agenda Item 5.a

Review and receive COVID-19 Prevention and Control Expectations

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 was subsequently updated based on the current data and continues to provide guidance and mandates during this active pandemic. The previous Public Health Emergency Order was then written as Public Health Expectations following the recommendation of legal counsel.

The current Public Health Expectations are framed by local and state COVID-19 data and public health best practice. The Respond Together Plan informs how data and state and federal mitigation requirements and recommendations are incorporated into local decision making. The Respond Together Plan was recently updated as well and is attached.

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 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 Public Health Expectations.

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

**EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT
COVID-19 PREVENTION AND CONTROL COMMUNITY EXPECTATIONS
EFFECTIVE NOVEMBER 13, 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; and 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 10.3 million people in the United States, and almost 300,000 people in Wisconsin;

WHEREAS, as a novel disease with no certain immunity and no vaccination currently available, all of the population is at risk of illness, hospitalization, long-term health issues, and death related to COVID-19 infection with some sub-populations being at higher risk;

WHEREAS, physical contact and close proximity to infected individuals, some of whom may be asymptomatic, causes the rapid spread of COVID-19, thereby endangering the public and placing undue strain on the healthcare system; and

WHEREAS, COVID-19 is present throughout Wisconsin, including in Eau Claire County with 5,475 people testing positive and 34 deaths as of November 12th, 2020;

WHEREAS, the State and Eau Claire County are now listed as being at Critically High activity level with the number of cases and the trajectory of case counts being at an alarming level;

WHEREAS, among Eau Claire County residents, more than 55% of confirmed cases of COVID-19, 50% of COVID-19 hospitalizations, and 73% of confirmed COVID-19 deaths have occurred in the past 30 days;

WHEREAS, the death incidence rate for Eau Claire County has been more than 40% higher than the Wisconsin average in the past 30 days, while the case incidence rate has been 12% higher than the state average;

WHEREAS, all census tracts and age groups in the county have had a significant increase of cases of COVID -19;

WHEREAS, the average number of cases confirmed per day in Eau Claire County (rolling 7-day average) is almost three and half times higher than it was 30 days ago (131.3 vs. 38.6) and the per test positivity rate (rolling 14 days) is 113% higher than it was 30 days ago;

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 State Health Officer provide communicable disease prevention and control and social distancing expectations informed by Wisconsin public health experts and the U.S. Centers for Disease Control;

WHEREAS, Governor Evers issued Emergency Order #94 on November 10, 2020 advising all Wisconsin residents to stay home as much as possible due to the considerable spread of COVID-19.

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 COMMUNITY EXPECTATIONS effective October 16th, 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 slow spread of COVID-19.
 - Stay at home or place of residence as much as feasible.
 - If you travel and engage in activities that compromise physical distance, wear a cloth face covering and limit close contact , especially those that may be at elevated risk for severe symptoms if they become infected, for 14 days after those activities or travel, and monitor symptoms closely.

- When it is not feasible to stay at home because of required activities, maintain 6 feet distance from others and wear a properly fitting face coverings whenever in a room or other enclosed space with individuals that are not within their household, unless a face covering will be medically compromising.
- Avoid gatherings of any size between individuals who are not members of your immediate family or household.
- Stay home when sick with symptoms consistent with COVID-19 and get tested. Do not go to work or school, or engage in other activities.
- Cooperate with any public health investigation as a COVID-19 case or close contact including required isolation and quarantine.
- Follow all public health orders or recommendations issued by the Wisconsin Department of Health Services.
- Take available opportunities to provide material and emotional support to fellow Eau Claire residents for whom staying at home poses financial and psychological hardships.

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 slow 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 prohibit any social activity that, by its very nature, promotes prolonged close contact (e.g. dancing, close contact sports, some types of performances) 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 employees, students, customers, visitors, and guests from entering the premises if they display COVID-19-like symptoms, have COVID-19, or have had contact with a person with a confirmed diagnosis of COVID-19.
- Adopt policies that actively support employees who are required to quarantine or isolate to stay home.
- 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, deliveries, drive-through item pick up, 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.

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.

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.

3. 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. Classroom settings in daycare, K-12, and college or university settings are not considered public gatherings but must consider all expectations in paragraph 2.

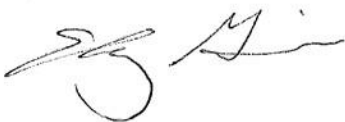
- Any public or private gathering is expected to be less than 10 people not including those people that are part of the same household.
- The indoor gathering of more than one household for socialization purposes is strongly discouraged.
- Constitutionally protected gatherings are encouraged to follow 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.

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.
- State of WI Emergency Order #94 issued On November 10th, 2020 advising all individuals to take certain actions to protect their family, friends, and neighbors from COVID-19.

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.

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.



11/12/2020

Elizabeth Giese

Date

Eau Claire City-County Health Department

Board of Health Meeting 12/9/2020
Agenda Item 5.b
2021 Health Department Budget approval

Please see attached Items for the proposed Eau Claire City-County Health Departments 2021 budget.

The “adopted” budget is frozen when the City Council approves the budget (November, 2020) and no changes can be made in MUNIS, our City supported finance system. Changes will be made through budget adjustments in the first quarter of 2021 and you will see it in the “Revised budget” column. We anticipate that there will be some changes.

The proposed budget right now is \$7,578,400 (decrease from July of \$27,200). Some highlights are below.

- The use of fund balance has decreased from \$258,000 to \$209,810 (\$48,190). \$162,500 of the fund balance is due to planned capital expenditures for 2021 from our plan.
- Tax levy calculations were updated following the release of equalized values in August. This resulted in levy amounts 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 and an increase from the estimate in July of \$21,290 from the draft July Budget.
- Licensing fees were held with no increase at the August BOH meeting. We are also assuming a potential decrease in the number of licenses issued.
- Federal grant revenue is up from the 2020 Adopted Budget. The team has secured several new grants in 2020 which were not in the original 2020 adopted budget and which will continue into 2021. We are carrying over unspent grants from 2020 into 2021 where possible.
- Family Planning Revenue in the clinic is increasing in 2021 vs. 2020 mainly due to a large increase in Title X funding. These funds are supporting our new multi-county Nurse Practitioner position as well as a number of other efforts.
- There is funding from the federal government for COVID 19 programs in 2020 but 2021 funding has not been announced. Therefore, we are not projecting any revenue in this initial budget.
- The budget includes a 2% economic increase in wages as well as planned step increases.
- Health insurance decreases resulting in a \$35K decrease in costs from July Budget. Premiums decreased by 1%. Employer/employee cost share of health insurance premium for staff currently enrolled in health plan remains at 88/12.
- Capital Projects are now included in budget (\$162,500 is expected to be used from fund balance for capital improvements in 2021). The Capital purchase line item on this budget only includes equipment and building projects over \$5,000 per item.

Staff recommendation

Approve 2021 City County Health Department budget.

**Eau Claire City - County Health Department
2021 Budget Summary**

	Budget Adopted 2020	% of Budget	Budget Adopted 2021	% of Budget	% Inc (Dec) from Adopted
Revenues					
Tax Levy					
City	\$ 1,918,600	28.4%	\$ 1,955,400	25.8%	1.9%
County	\$ 1,243,200	18.4%	\$ 1,283,090	16.9%	3.2%
Sub-total	\$ 3,161,800	46.8%	\$ 3,238,490	42.7%	2.4%
Debt Service					
City	\$ 16,500	0.2%	\$ 16,200	0.2%	-1.8%
County	\$ 10,100	0.1%	\$ 9,800	0.1%	-3.0%
Sub-total	\$ 26,600	0.4%	\$ 26,000	0.3%	-2.3%
License & Permits	\$ 729,000	10.8%	\$ 694,700	9.2%	-4.7%
Charges for Services	\$ 177,000	2.6%	\$ 156,500	2.1%	-11.6%
Intergovernmental	\$ 2,140,100	31.7%	\$ 2,846,300	37.6%	33.0%
Misc	\$ 303,100	4.5%	\$ 406,600	5.4%	34.1%
Use of Fund Balance	\$ 222,100	3.3%	\$ 209,810	2.8%	-5.5%
Total Revenue	\$ 6,759,700	100.0%	\$ 7,578,400	100.0%	12.1%
Expenses					
Personnel	\$ 5,891,200	87.2%	\$ 6,271,500	82.8%	6.5%
Contractual Services	\$ 448,600	6.6%	\$ 821,300	10.8%	83.1%
Utilities	\$ 34,700	0.5%	\$ 35,400	0.5%	2.0%
Fixed Charges	\$ 16,200	0.2%	\$ 20,000	0.3%	23.5%
Supplies	\$ 229,900	3.4%	\$ 241,700	3.2%	5.1%
Capital Purchases	\$ 112,500	1.7%	\$ 162,500	2.1%	N/A
Other Financing	\$ 26,600	0.4%	\$ 26,000	0.3%	-2.3%
Total Expense	\$ 6,759,700	100.0%	\$ 7,578,400	100.0%	12.1%

**Eau Claire City - County Health Department
2021 Budgeted Revenue Detail**

Revenues

Tax Levy		Intergovernmental	
City	\$ 1,955,400	Federal Aid - Other	\$ 448,400
County	\$ 1,283,090	State Aid - Other	\$ 9,500
	<u>\$ 3,238,490</u>	CARS - Fed	\$ 1,825,000
Debt Service		CARS - State	\$ 156,200
City	\$ 16,200	Servv to EC Co - Septic Maint	\$ 100,000
County	\$ 9,800	Family Planning - Medicaid	\$ 45,000
	<u>\$ 26,000</u>	Family Planning - Title 19	\$ 158,100
License & permits		WI DNR - Lab Testing	\$ 15,000
Lodging License	\$ 19,700	State of WI - Misc	\$ 3,700
Recreational Facility	\$ 8,500	CDBG	\$ 85,400
Pool License	\$ 49,400		<u>\$ 2,846,300</u>
Retail Food License	\$ 99,000	Misc Revenue	
Restaurant	\$ 344,000	Misc Grant Rev	\$ 404,000
Mobile Home Park License	\$ 15,900	Gifts & Donations	\$ 2,600
Other Bus/Occ License	\$ 6,900		<u>\$ 406,600</u>
Sanitary Permits	\$ 132,500	Fund Balance	
Tatoo & Body Piercing Permits	\$ 8,300	Fund Balance Used	\$ 209,810
Well Permits	\$ 9,500		<u>\$ 209,810</u>
Other - Beekeeping	\$ 1,000	TOTAL REVENUE	
	<u>\$ 694,700</u>		<u><u>\$ 7,578,400</u></u>
Charges for Services			
TB Testing	\$ 7,000		
Water Samples	\$ 45,000		
Hepatitis B Vaccine	\$ 1,500		
Flu Shots	\$ 5,000		
Family Planning Individual	\$ 6,700		
Radon Kit Sales	\$ 3,500		
Plat Review	\$ 500		
Landfill Inspection Fees	\$ 800		
Soil Test Reveiws & Filing	\$ 9,500		
Rental Registration Fees	\$ 600		
AA/CG Samples	\$ 10,000		
Health Dept Misc	\$ 20,000		
Housing Re-Inspection Fees	\$ 8,500		
Blood Lead Testing/EH Invest	\$ 8,200		
School Program	\$ 10,200		
Special Chg - Housing Reinspec	\$ 18,800		
Special Chg - Septic Maint	\$ 700		
	<u>\$ 156,500</u>		

**Eau Claire City - County Health Department
2021 Budgeted Expenses Detail**

Expenses

Personnel		Utilities	
Payroll Wages	\$ 4,150,500	Telephones	\$ 11,900
Special Pays	\$ 9,500	Mobile Phones	\$ 22,900
Employer Paid Benefits	\$ 317,700	Garbage Service	\$ 600
WI Retirement	\$ 273,800		\$ 35,400
Health/Life Ins	\$ 1,140,800	Fixed Charges	
Health Insurance Deduc	\$ 59,800	LICENSE & PERMITS	\$ 4,200
Retiree - Health Ins	\$ 218,500	WORKERS COMPENSATION C	\$ 15,000
Retiree Deductible	\$ 13,300	LIABILITY & PROPERTY I	\$ 800
Education Reimbursement	\$ 12,000		\$ 20,000
Auto Allowance	\$ 75,600	Supplies	
	\$ 6,271,500	Office Supplies	\$ 17,400
Contractual Services		Books & Periodicals	\$ 3,700
Unemployment Comp	\$ 5,000	Awards & Trophies	\$ 900
Postage & Shipping	\$ 17,300	Health Educ Supplies	\$ 1,000
Computer Service Charges	\$ 91,000	Nutritional Educ Supplies	\$ 6,200
Printing & Binding	\$ 18,900	Environmental Supplies	\$ 1,400
Advertising/Marketing	\$ 24,700	Hepatitis B Vaccine	\$ 1,500
Auditing	\$ 7,600	Flu Vacine	\$ 3,500
Repairs to Tools & Equip	\$ 3,100	Radon Test Kits	\$ 4,500
Building Rental	\$ 134,100	Lab Supplies	\$ 40,000
Other Rental	\$ 2,000	Medical Supplies	\$ 72,400
Laundry & Dry Cleaning	\$ 400	Repair Parts & Supplies	\$ 1,300
Contractual Employment	\$ 162,800	Equipment Purchases (< \$5,000)	\$ 30,600
Convenience Fees (Credit Cd)	\$ 1,500	Other Materials & Supplies	\$ 57,300
Professional Services	\$ 100		\$ 241,700
Legal Services	\$ 1,000	Capital Purchases	
Training/Meetings	\$ 92,100	Capital Purchases	\$ 162,500
Membership Dues	\$ 24,400	Other Financing	
Recruitment Expenses	\$ 2,000	Debt Service	\$ 26,000
Misc Contractual Services	\$ 233,300		
	\$ 821,300	TOTAL EXPENSES	
			\$ 7,578,400

**EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT
REVENUE**

	Actual 2019	Adopted 2020	Proposed 2021	2020-21 Change	2020-2021 % Change
TAX LEVY CITY	\$ 1,887,100	\$ 1,918,600	\$ 1,955,400	\$ 33,600	1.75%
TAX LEVY COUNTY	\$ 1,214,200	\$ 1,243,200	\$ 1,283,090	\$ 21,800	1.75%
UNFUNDED PENSION PYMT CITY	\$ 16,900	\$ 16,500	\$ 16,200	\$ (400)	-2.42%
UNFUNDED PENSION PYMT COUNTY	\$ 10,323	\$ 10,100	\$ 9,800	\$ (300)	-2.97%
TAXES	\$ 3,128,523	\$ 3,188,400	\$ 3,264,490	\$ 54,700	\$ (0)
FEDERAL AID-OTHER	\$ 185,220	\$ 292,900	\$ 448,400	\$ 155,500	53.09%
STATE AID-OTHER	\$ 9,469	\$ 49,500	\$ 9,500	\$ (40,000)	-80.81%
CARS-FEDERAL AID	\$ 986,101	\$ 1,195,600	\$ 1,825,000	\$ 629,400	52.64%
CARS-STATE AID	\$ 250,272	\$ 148,000	\$ 156,200	\$ 8,200	5.54%
INTERGOVTAL REVENUE	\$ 1,431,062	\$ 1,686,000	\$ 2,439,100	\$ 753,100	44.67%
LODGING LICENSE - HEAL	\$ 22,744	\$ 21,300	\$ 19,700	\$ (1,600)	-7.51%
RECREATIONAL FACILITY	\$ 8,614	\$ 8,000	\$ 8,500	\$ 500	6.25%
POOL LICENSE - HEALTH	\$ 54,726	\$ 53,400	\$ 49,400	\$ (4,000)	-7.49%
RETAIL FOOD LICENSE	\$ 102,696	\$ 107,100	\$ 99,000	\$ (8,100)	-7.56%
RESTAURANT - HEALTH	\$ 345,753	\$ 371,900	\$ 344,000	\$ (27,900)	-7.50%
MOBILE HOME PARK LICEN	\$ 9,395	\$ 15,900	\$ 15,900	\$ -	0.00%
OTHER BUS/OCC LICENSE	\$ 6,270	\$ 6,900	\$ 6,900	\$ -	0.00%
SANITARY PERMITS	\$ 131,123	\$ 126,000	\$ 132,500	\$ 6,500	5.16%
TATTOO & BODY PIERCING	\$ 12,187	\$ 9,000	\$ 8,300	\$ (700)	-7.78%
WELL PERMITS	\$ 9,525	\$ 9,000	\$ 9,500	\$ 500	5.56%
OTHER PERMITS BEEKEEPING	\$ 1,525	\$ 500	\$ 1,000	\$ 500	100.00%
LICENSES & PERMITS	\$ 704,557	\$ 729,000	\$ 694,700	\$ (34,300)	-4.71%
TB TESTING	\$ 12,927	\$ 7,000	\$ 7,000	\$ -	0.00%
WATER SAMPLES	\$ 47,157	\$ 43,000	\$ 45,000	\$ 2,000	4.65%
WIS FUND	\$ 240	\$ 200	\$ -	\$ (200)	-100.00%
HEPATITIS B VACCINE	\$ 1,311	\$ 1,500	\$ 1,500	\$ -	0.00%
FLU SHOTS	\$ 4,028	\$ 5,000	\$ 5,000	\$ -	0.00%
AID TESTING INDIVIDUAL	\$ 10	\$ -	\$ -	\$ -	0.00%
FAMILY PLANNING-INDIVI	\$ 4,694	\$ 7,200	\$ 6,700	\$ (500)	-6.94%
RADON KIT SALES	\$ 3,571	\$ 3,500	\$ 3,500	\$ -	0.00%
PLAT REVIEW	\$ 1,150	\$ 500	\$ 500	\$ -	0.00%
LANDFILL INSPECTION FE	\$ 828	\$ 800	\$ 800	\$ -	0.00%
SOIL TEST REVIEWS & FI	\$ 9,700	\$ 9,000	\$ 9,500	\$ 500	5.56%
RENTAL REGISTRATION FEES	\$ 1,875	\$ 400	\$ 600	\$ 200	50.00%
AA/CG SAMPLES	\$ 14,471	\$ 14,500	\$ 10,000	\$ (4,500)	-31.03%
HEALTH DEPT-MISC	\$ 79,791	\$ 33,400	\$ 20,000	\$ (13,400)	-40.12%
HOUSING RE-INSPECTION	\$ 8,558	\$ 12,500	\$ 8,500	\$ (4,000)	-32.00%
BLOOD LEAD TESTING/EH	\$ 4,966	\$ 8,700	\$ 8,200	\$ (500)	-5.75%
SCHOOLS	\$ 8,948	\$ 10,200	\$ 10,200	\$ -	0.00%
DIVERSION PROGRAM	\$ 75	\$ -	\$ -	\$ -	#DIV/0!
SPECIAL CHG-HSG REINSP	\$ 31,550	\$ 18,800	\$ 18,800	\$ -	0.00%
SPECIAL CHG-SEPTIC MAI	\$ 860	\$ 800	\$ 700	\$ (100)	-12.50%
CHARGES FOR SERVICES	\$ 236,710	\$ 177,000	\$ 156,500	\$ (20,500)	-11.58%
SERV TO EC CO-SEPTIC M	\$ 97,750	\$ 98,000	\$ 100,000	\$ 2,000	2.04%
FORWARD HLTH-MEDICAID	\$ 38,512	\$ 45,000	\$ 45,000	\$ -	0.00%
FAMILY PLANNING-TITLE	\$ 126,324	\$ 181,500	\$ 158,100	\$ (23,400)	-12.89%
WI DNR-LAB TESTING	\$ 15,264	\$ 15,000	\$ 15,000	\$ -	0.00%
STATE OF WISC-MISC	\$ 4,890	\$ 3,800	\$ 3,700	\$ (100)	-2.63%
OTHER COUNTIES-MISC	\$ 13,236	\$ 25,400	\$ -	\$ (25,400)	-100.00%
TSF FROM CDBG	\$ 90,596	\$ 85,400	\$ 85,400	\$ -	0.00%
CHARGES SERV-INTGOV	\$ 386,572	\$ 454,100	\$ 407,200	\$ (46,900)	-10.33%
MISC GRANT REVENUE	\$ 311,669	\$ 300,500	\$ 404,000	\$ 103,500	34.44%
GIFTS & DONATIONS	\$ 7,217	\$ 2,600	\$ 2,600	\$ -	0.00%
MISC REIMBURSEMENTS &	\$ 12,998	\$ -	\$ -	\$ -	0.00%
MISCELLANEOUS REVENUE	\$ 5,306	\$ -	\$ -	\$ -	0.00%
MISC REVENUE	\$ 337,190	\$ 303,100	\$ 406,600	\$ 103,500	34.15%
FUND BALANCE USED-OPER	\$ -	\$ 222,100	\$ 209,810	\$ (12,290)	-5.53%
OTHER BUDGETED RECEIPTS	\$ -	\$ 222,100	\$ 209,810	\$ (12,290)	-5.53%
TOTAL REVENUE	\$ 6,224,613	\$ 6,759,700	\$ 7,578,400	\$ 818,700	12.11%

**EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT
EXPENSES**

				2020-21	2020-2021
	Actual 2019	Adopted 2020	Proposed 2021	Change	% Change
PAYROLL WAGES	\$ 3,467,289	\$ 3,874,000	\$ 4,150,500	\$ 276,500	7.14%
SPECIAL PAYS	\$ 9,710	\$ 8,200	\$ 9,500	\$ 1,300	15.85%
EMPLOYER PAID BENEFITS	\$ 247,625	\$ 296,400	\$ 317,700	\$ 21,300	7.19%
WRF(ER)	\$ 223,224	\$ 258,900	\$ 273,800	\$ 14,900	5.76%
HEALTH INS(ER)	\$ 934,980	\$ 1,116,900	\$ 1,140,800	\$ 23,900	2.14%
HEALTH INSURANCE DEDUC	\$ 52,900	\$ 56,600	\$ 59,800	\$ 3,200	5.65%
RETIREE-HLTH INS	\$ 183,382	\$ 198,600	\$ 218,500	\$ 19,900	10.02%
RETIREE DEDUCTIBLE	\$ 12,100	\$ 12,100	\$ 13,300	\$ 1,200	9.92%
EDUCATION REIMBURSEMENT	\$ 10,000	\$ 8,000	\$ 12,000	\$ 4,000	50.00%
AUTO ALLOWANCE	\$ 66,327	\$ 61,500	\$ 75,600	\$ 14,100	22.93%
MISC REIMBURSEMENTS	\$ 10,009	\$ -	\$ -	\$ -	0.00%
PERSONNEL	\$ 5,217,547	\$ 5,891,200	\$ 6,271,500	\$ 380,300	6.46%
UNEMPLOYMENT COMPENSAT	\$ -	\$ -	\$ 5,000	\$ 5,000	0.00%
POSTAGE & SHIPPING	\$ 14,962	\$ 16,100	\$ 17,300	\$ 1,200	7.45%
COMPUTER SERVICE CHARG	\$ 60,672	\$ 91,000	\$ 91,000	\$ -	0.00%
PRINTING & BINDING	\$ 16,575	\$ 17,500	\$ 18,900	\$ 1,400	8.00%
ADVERTISING/MARKETING	\$ 41,659	\$ 22,100	\$ 24,700	\$ 2,600	11.76%
AUDITING	\$ 6,321	\$ 6,800	\$ 7,600	\$ 800	11.76%
REPAIRS TO TOOLS & EQU	\$ 3,451	\$ 3,400	\$ 3,100	\$ (300)	-8.82%
REPAIRS TO BUILDINGS	\$ 237	\$ -	\$ -	\$ -	0.00%
BUILDING RENTAL	\$ 123,821	\$ 127,000	\$ 134,100	\$ 7,100	5.59%
OTHER RENTAL	\$ 1,474	\$ 2,000	\$ 2,000	\$ -	0.00%
LAUNDRY & DRY CLEANING	\$ 518	\$ 400	\$ 400	\$ -	0.00%
CONTRACTUAL EMPLOYMENT	\$ 27,595	\$ 27,300	\$ 162,800	\$ 135,500	496.34%
CONVENIENCE FEES (CREDIT CARD)	\$ 757	\$ 1,000	\$ 1,500	\$ 500	50.00%
PROFESSIONAL SERVICES	\$ 7,387	\$ 1,600	\$ 100	\$ (1,500)	-93.75%
LEGAL SERVICES	\$ -	\$ 1,000	\$ 1,000	\$ -	0.00%
TRAINING/MEETINGS	\$ 107,410	\$ 83,100	\$ 92,100	\$ 9,000	10.83%
MEMBERSHIP DUES	\$ 23,372	\$ 23,900	\$ 24,400	\$ 500	2.09%
RECRUITMENT EXPENSES	\$ 1,484	\$ 3,000	\$ 2,000	\$ (1,000)	-33.33%
MISC CONTRACTUAL SERVI	\$ 48,905	\$ 21,400	\$ 233,300	\$ 211,900	990.19%
CONTRACTUAL SERVICES	\$ 486,598	\$ 448,600	\$ 821,300	\$ 372,700	83.08%
TELEPHONES	\$ 12,240	\$ 10,800	\$ 11,900	\$ 1,100	10.19%
MOBILE PHONES	\$ 24,415	\$ 23,300	\$ 22,900	\$ (400)	-1.72%
GARBAGE SERVICE	\$ -	\$ 600	\$ 600	\$ -	0.00%
UTILITIES	\$ 36,655	\$ 34,700	\$ 35,400	\$ 700	2.02%
LICENSE & PERMITS	\$ 416	\$ 1,200	\$ 4,200	\$ 3,000	250.00%
WORKERS COMPENSATION C	\$ 12,329	\$ 15,000	\$ 15,000	\$ -	0.00%
LIABILITY & PROPERTY I	\$ -	\$ -	\$ 800	\$ 800	#DIV/0!
FIXED CHARGES	\$ 12,745	\$ 16,200	\$ 20,000	\$ 3,800	23.46%
OFFICE SUPPLIES	\$ 19,219	\$ 17,300	\$ 17,400	\$ 100	0.58%
BOOKS & PERIODICALS	\$ 1,422	\$ 3,200	\$ 3,700	\$ 500	15.63%
AWARDS & TROPHIES	\$ 1,599	\$ 900	\$ 900	\$ -	0.00%
HEALTH EDUC SUPPLIES	\$ 819	\$ 1,000	\$ 1,000	\$ -	0.00%
NUTRITIONAL EDUC SUPPL	\$ 5,075	\$ 6,200	\$ 6,200	\$ -	0.00%
ENVIRONMENTAL SUPPLIES	\$ 2,218	\$ 1,200	\$ 1,400	\$ 200	16.67%
HEPATITIS B VACCINE	\$ -	\$ 1,500	\$ 1,500	\$ -	0.00%
FLU VACINE	\$ 1,793	\$ 3,500	\$ 3,500	\$ -	0.00%
RADON TEST KITS	\$ 4,395	\$ 4,500	\$ 4,500	\$ -	0.00%
LAB SUPPLIES	\$ 41,961	\$ 43,000	\$ 40,000	\$ (3,000)	-6.98%
MEDICAL SUPPLIES	\$ 39,994	\$ 62,100	\$ 72,400	\$ 10,300	16.59%
UNIFORMS	\$ 135	\$ -	\$ -	\$ -	0.00%
REPAIR PARTS & SUPPLIES	\$ 1,306	\$ 1,300	\$ 1,300	\$ -	0.00%
EQUIPMENT PURCHASES (<	\$ 52,120	\$ 25,500	\$ 30,600	\$ 5,100	20.00%
GIFT CARDS	\$ 9,230	\$ 300	\$ -	\$ (300)	-100.00%
OTHER MATERIALS & SUPP	\$ 36,700	\$ 58,400	\$ 57,300	\$ (1,100)	-1.88%
SUPPLIES	\$ 217,985	\$ 229,900	\$ 241,700	\$ 11,800	5.13%
PMT TO OTHER ORGANIZATION	\$ 150	\$ -	\$ -	\$ -	0.00%
CONTRIBUTIONS & OTHER PAYMENTS	\$ 150	\$ -	\$ -	\$ -	0.00%
CAPITAL PURCHASES	\$ 104,004	\$ 112,500	\$ 162,500	\$ 50,000	44.44%
CAPITAL PURCHASES	\$ 104,004	\$ 112,500	\$ 162,500	\$ 50,000	44.44%
TSF TO DEBT SERVICE	\$ 27,266	\$ 26,600	\$ 26,000	\$ (600)	-2.26%
OTHER FINANCING USES	\$ 27,266	\$ 26,600	\$ 26,000	\$ (600)	-2.26%
TOTAL EXPENSES	\$ 6,102,950	\$ 6,759,700	\$ 7,578,400	\$ 818,700	12%

Fact Sheet – 12/09/2020 Board of Health Meeting

Agenda Item 5.d

Public Health Emergency – Temporary Supplemental Compensation Policy

Employees at the Eau Claire City-County Health Department are, and have been, working in an unprecedented critical response capacity during the COVID-19 pandemic. This has been the case since mid-March, 2020, almost 9 months in duration, with no near term end in sight. Most emergencies last days or weeks. This emergency is different.

To ensure the continuance of health department operations and the health and safety of the general public, the response to this emergency for many employees extends well beyond normal requirements and exceeds their regular job duties and core work schedules. The duration of this crisis, in particular, has created a need to look at how to appropriately and fairly compensate employees for their work. This situation is not unique to the ECCCHD; many other health departments across the state are experiencing the same situation and working toward options to meet this need.

We have already taken some steps to recognize the excessive hours worked during the crisis by creating some temporary added or expanded benefits for certain employees. Primarily, we are working with all employees to limit the impact of the pandemic. We are offering flexible schedules, work from home opportunities and encouraging the use of vacation and time away from work when possible. We are encouraging the use of mindfulness opportunities and participation in wellness activities.

We also have specifically temporarily updated our compensation policies as follows.

- **Non-exempt hourly employees:** we have provided the option of accruing overtime when needed for emergency response. This is paid out to those employees at time and a half.
- **Exempt employees that are eligible for compensatory time:** this group includes the majority of our employees working in responding to the emergency like public health nurses, environmental health specialists and public health specialists among others. For this group we removed the cap on earning compensatory time and have temporarily removed any deadlines to use the hours. These employees have also been given the opportunity to have their compensatory time paid out as part of their bi-weekly payroll. Compensatory time is earned at straight time, hour for hour. At certain points in time, all compensatory time accrued over 40 hours will also be paid out, allowing employees to keep a week of time in their leave banks.
- **Differential Pay:** certain employees that have been identified to take on significant additional, temporary oversight job roles related to emergency response in addition to their current work are being provided differential pay. This is a set percent increase in their overall salary, per hour worked, for a set period of time during which they are carrying out additional job duties.
- **On-Call Pay:** non-supervisory, exempt employees who are asked to remain on call for surge capacity or emergency situations outside of normal business hours receive a minimum of 1 hour of pay for each 4-hour on call shift.

Current challenge: While these strategies are assisting to fairly compensate the majority of ECCCHD employees for the exemplary work they are doing, there are 10 employees that are not currently eligible for any of these benefits due to our existing employee policies. These include the 9 members of our management team and the Budget Specialist position. These positions, by nature of their roles, have been salaried positions with no opportunities to earn compensatory time or additional pay. Except for the Budget Specialist position, all of these management positions do currently receive 40 hours of Executive Leave as part of existing employee policies in part to acknowledge the typical significant additional hours worked in normal circumstances.

This pandemic has resulted in almost 36 weeks of emergency response by the 10 individuals who otherwise have not received additional benefits related to emergency policy changes that the Board of Health have approved. The circumstances of this particular public health event, along with its duration, have strongly impacted this group of employees and provided them with few opportunities to flex time or to take time away from work for any extended period. The extraordinary time and effort they have worked due to the pandemic has extended for 9 months in 2020 and may not end until well into 2021.

To provide options for compensation for this group, in addition to participating on a recently developed WALHDAB compensation task force, we have contracted with WIPFLI. This contract provides for Deb Marshall, Senior Manager, to conduct an analysis of best practices for designing compensation and reward programs that would meet this need, health department goals, and overall budget requirements. A written report summarizing the process, findings, and recommendations accompanies this fact sheet.

Budget Implication: Dependent on BOH decision based on Report presented.

Staff recommendation: Consider WIPFLI options for providing some level of supplementary compensation for this public health emergency.

Prepared by Tegan Ruland, Operations



Eau Claire City-County
Health Department



WIPELJ

Talent Management
Consulting

Supplemental Compensation for Exempt Employees

December 2020

Prepared by:
Wipfli LLP
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Eau Claire, WI 54701
Telephone: 715.832.3407

December 9, 2020

Ms. Merey Price, Board Chair
Eau Claire City-County Health Department
720 Second Avenue
Eau Claire, WI 54703

E-mail: mereyprice@yahoo.com

RE: Supplemental Compensation for Exempt Employees

Wipfli LLP (“Wipfli”) appreciates the opportunity to present this report to the Board of Health (“the Board”) at the Eau Claire City-County Health Department (“ECCCHD” or “the Department”). During the unprecedented workload resulting from the global pandemic, we were asked to assess options to provide additional compensation and/or other reward for the 10 salaried, Fair Labor Standards Act (FLSA) exempt employees at the Department who are not eligible for overtime compensation or compensatory time off (comp time).

Wipfli is confident that this analysis and our recommendations will meet the needs of the Board and accomplish the objectives established at the time this engagement was approved. We are available to assist in the implementation of our recommendations as may be requested.

Sincerely,



Wipfli LLP

Eau Claire City-County Health Department

Supplemental Compensation for Exempt Employees

December 2020

Table of Contents

Background Information	1
Data Gathering and Observations	1
Recommendations	5
Concluding Remarks	6

Appendixes

Mission/Vision/Guiding Principles	A
Section 4 – Leave (4.01 – Vacation)	B

BACKGROUND INFORMATION

Eau Claire City-County Health Department (“ECCCHD” or “the Department”) is a local governmental agency providing public health services to both the City of Eau Claire and Eau Claire County, with an annual budget of approximately \$6.3 million and 100+ employees during this pandemic. Starting in March 2020, COVID-19 became a worldwide pandemic, and our area was not spared. The dedicated employees at the Department have performed their jobs admirably and taken on an unprecedented amount of work to appropriately respond to this public health crisis.

A significant amount of money was provided by a variety of federal, state, and local funding sources to ramp up services and systems to help meet the demand. Much of this funding paid for the direct compensation of the majority of Department employees who are eligible for overtime at 1.0 or 1.5 times their regular hourly rate of pay for all hours worked over 40 in a work week (includes many part-time and limited term hires due to the pandemic) and/or compensatory (comp) time off. The 10 employees who are salaried and exempt from overtime or comp time have received no additional compensation for the truly significant amount of time they have worked and the enormous effort they have expended since March 2020. Under the Fair Labor Standards Act (FLSA), salaried/exempt employees are paid to do a job until it is done (not based on hours worked). Historically, this has balanced out timewise within the Department to accommodate for busy times and occasional emergencies, but 2020 is an anomaly.

The question addressed in this project is - given the limited funding that is available to distribute to these hard-working and well-deserving leaders at the Department, what are the options the Board of Health (“the Board”) should consider? We have limited the scope of this analysis to cover only calendar year 2020.

DATA GATHERING AND OBSERVATIONS

We conducted a “current state” analysis of available information to address options for the Board to consider. This included reviewing:

- Excel spreadsheets provided by the Operations Division Manager which included employee data on length of service, current rates of pay, and some limited information on extra hours worked by some of the salaried staff

- Currently available information on this topic gathered by the Wisconsin Association of Local Health Departments and Boards (WALHDAB)
- Personal interviews with eight of the 10 affected employees
- Guiding Principles, Mission, Vision, Values statements
- Vacation policy from the Employee Handbook

Based on our analysis of this information, we organized our observations for the Board to consider, by topic area, as follows:

1. **GUIDING PRINCIPLES:** When addressing projects such as this, we always start with a review of an organization’s mission, vision, and values statements (or similar) (see Appendix A) to ensure we are focusing on what is important to them. The Department has 9 Guiding Principles. Of those, the one on Collaboration is most relevant to this project – “People working together to provide the best solutions.” It was quite apparent during the employee interviews that all of them support and respect each other and recognize the value each brings to the team. The Department has a dedicated staff of management professionals that really know what they are doing and enjoy working together – that is quite special, particularly during an extended crisis.
2. **RECOGNITION & COMMUNICATION:** An important role of the Board is to ensure strong Department leadership exists, especially in an emergency, and to ensure they are supported. As part of this project, it is important to positively recognize and appreciate the outstanding job these Department leaders have performed this year. They have stepped up to the plate and supported each other, their employees, and the community during an event that has caused conflict and division. It is important to note that how that recognition occurs is very personal and will vary from person to person, and likely will *not* include public accolades (like being in the newspaper). Consider communicating a sincere personal thank you from each person on the Board to each of them individually (and privately). Words mean a lot, but then so does money – see Funding.
3. **FUNDING:** There is limited funding available for providing cash bonuses or money to fund benefits (time off, other benefits, gifts, etc.). Given this, it will be important to prioritize the dollars in a way that makes sense to the Board and to the employees impacted. It will be important for the Board to determine just how much money can be budgeted for this and from what available funds.

4. **PANDEMIC IMPACT ON REGULAR JOBS:** The response to the pandemic required an “all hands-on deck” approach. It disrupted the “regular” job duties of every salaried employee. Each of their regular jobs still had to be done and occurred mostly after regular business hours. Some of their duties could be delegated to other staff, but they are still responsible for oversight. Although there has been substantial impact for all, there are those who were impacted more significantly than others. This was acknowledged by all the employees interviewed, and they consistently expressed who they thought those people were. This included those who were on-call two or three days a week and rotating weekends, as well as those serving in cross-Department Incident Command roles.
5. **HOURS WORKED:** Some of the salaried staff tracked hours worked to meet audit requirements of some of the funding sources. Although this at first appeared to provide some basis for determining the level of impact on all the salaried employees, time tracking parameters were inconsistently administered. Frankly, asking managers and professionals to track their time in the midst of a crisis, especially when they have never been required to do it, often produces unreliable data for analysis. Several employees reported not tracking their time at all, as they have always just worked to get the job done. Although the hours worked data that was gathered will likely be helpful for supporting some funding sources, it is not sufficient for the purposes of this project.
6. **HOURLY PAY and INFORMATION FROM OTHER HEALTH DEPARTMENTS:** A few of the 12 health departments that provided limited survey information had moved their salaried employees temporarily to straight-time hourly paid status. Most of the health departments that did this adjustment were much smaller than ECCCHD. Some health departments are currently providing nothing additional for their salaried employees. The concern we have with paying FLSA exempt employees on an hourly basis, even temporarily, is that it likely destroys their overtime exemption and would then *require* the payment of overtime at 1.5 times the regular rate of pay. Without legal guidance, this is likely not an option for ECCCHD. Also, and probably more significantly, the cost associated with paying all your salaried staff overtime, even if it was only at half-pay, would be unaffordable. This also assumes they tracked their time accurately (which has not occurred) and it is unrealistic to ask for it to be estimated at this point.

7. **TIME OFF WITH PAY:** We considered the option of providing additional paid time off in the form of Vacation (see Appendix B). However, given that most of the salaried employees cannot even consider taking a vacation, or more than a day or two off at a time during the pandemic, it seems counterproductive to provide more paid time off. Several of them indicated that even taking off a couple of days resulted in more work, both before and after, than it was worth. It is significant to note that the Department has suspended the maximum carryover of 120 hours into an employee's new anniversary year. This is certainly an appropriate response given the circumstances, and one we have seen executed by many area employers this year. You will need to consider how long this will continue and review the anniversary date schedule during 2021. Please note that unused Vacation is paid out at termination of employment, and as such is an expense that should be budgeted. There are two long-term employees who plan to retire in 2021.
8. **EXECUTIVE LEAVE/COMPENSATORY LEAVE:** Nine of the 10 salaried employees (managers) are eligible for Executive Leave of 40 hours per calendar year. This typically provides additional paid time off for these employees to flex their hours and take time off when their work schedules allow. This has not been possible this year. One option to consider is allowing that to be carried over into 2021 as well (so 80 hours in 2021 – it is our understanding that Executive Leave is NOT paid out at termination of employment so would be budget neutral).

Another consideration may be Compensatory Time Off which is available in the public sector. The problem with this, again though, is that it assumes accurate tracking of hours worked for salaried exempt employees.

9. **BENEFITS:** There was some discussion on providing a benefits “holiday” for these employees in the form of paid health insurance premiums for a period of time, or other insured benefits. The problem here is the potential for ERISA and discrimination testing issues that could have unintended negative consequences to the tax deductibility of these plans in their entirety. Without legal counsel input, this is likely not a viable option. Also, again, it treats people the same, except for those that may not be enrolled in your benefits, or who have single vs. family coverage.

TIERING OF THE TEN: In interviews with employees, it was clear they all acknowledged the additional time and effort they each have put in during the pandemic response, and that they all had to learn and perform many new responsibilities. They all supported each other and were most complimentary of the positive team effort and work their colleagues are doing, day in and day out. It was also clear that there was support for a tiered response to distributing limited funds to them. The first group includes those who have across-Department and across-Incident Command responsibilities, as well as those who took on the rotating 24-hour on-call schedule two to three days a week with rotating weekends. The second group included all those who assumed additional specific responsibilities related to Incident Command which are well outside of their normal jobs.

RECOMMENDATIONS

Based on the analysis of this information and our experience in the design of recognition and reward programs, we suggest the Board consider the following tiered approach to allocating the available funds (vs. any alternative that would provide the same level of reward/compensation to all of them, or any based on tracking of hours worked). This tiered approach of awarding a percentage of the available funds via two levels takes into consideration the relative level and community impact of the work performed during the pandemic response in 2020, their management responsibilities, and employee input. Three possible payout examples are included, depending on the level of funding. Please note this is taxable income.

Job Title	Tier	% of Fund	Example 1 \$25,000	Example 2 \$35,000	Example 3 \$50,000
Director/Health Officer	1	12.5%	\$3,125	\$4,375	\$6,250
Assistant Director	1	12.5%	\$3,125	\$4,375	\$6,250
Manager - Communicable Disease	1	12.5%	\$3,125	\$4,375	\$6,250
Manager - Operations	1	12.5%	\$3,125	\$4,375	\$6,250
Manager - Community Health Promotion	1	12.5%	\$3,125	\$4,375	\$6,250
Manager - Healthy Beginnings	2	7.5%	\$1,875	\$2,625	\$3,750
Manager - Policy & Systems	2	7.5%	\$1,875	\$2,625	\$3,750
Manager - Environmental & Data	2	7.5%	\$1,875	\$2,625	\$3,750
Budget Specialist	2	7.5%	\$1,875	\$2,625	\$3,750
Manager - Regulation & Licensing	2	7.5%	\$1,875	\$2,625	\$3,750

100%

CONCLUDING REMARKS

We appreciate the opportunity to provide the Board of Health for ECCCHD with this report. We are available to review the details of this analysis.

Please note our recommendations are the result of a limited period of time spent reviewing and discussing the information available at the time. The observations and recommendations are not intended to be absolute. We are not attorneys and do not intend any of our recommendations to be legal advice. The Board is best qualified to determine what will and will not work for the Department.

This project was conducted by Deborah Marshall, Senior Manager, in Talent Management Consulting at Wipfli LLP.

Appendixes

APPENDIX A



Mission/Vision/Guiding Principles

Mission:

Promoting health and safety for all Eau Claire Communities

Vision:

Eau Claire City-County Health Department will be a leader in assuring healthy people in healthy communities

Guiding Principles:

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
- Health Equity - Everyone should have equal opportunity to be healthy
- Collaboration - People working together provide the best solutions
- Quality - Efficiency and effectiveness is critical in programs and services
- Data Informed - Collection and analysis of data guides decisions
- Evidence Based - Building and utilizing evidence and promising practices in programs and services
- Ethical Practice - Acting with the highest standards of professional practice

APPENDIX B

SECTION 4 - LEAVE

4.01 - Vacation

Vacation leave is available to all regular full-time and regular part-time Employees to provide opportunities for rest, relaxation and personal pursuits. Vacation accrual begins with the first date of employment and is available to use as soon as it is earned.

Years of Continuous Service	Annual Vacation Accrual
From start of employment up to 3 years of service	80 hours/10 days
After 3 years of Service	96 hours/12 days
After 5 years of Service	120 hours/15 days
After 11 Years of Service	160 hours/20 days
After 17 Years of Service	200 hours/25 days
After 25 Years of Service	224 hours/28 days

Positions less than full time (40 hours) will receive a prorated vacation accrual based on hours worked.

Vacation is to be used in the year earned. The maximum number of vacation hours available to the Employee on their anniversary date cannot exceed 120 hours (15 days), prorated by FTE. Vacation hours in excess of the allowable balance will be forfeited on an Employee's anniversary date each year unless approval received from Supervisor and Department Director. Negative vacation balances of up to 40 hours are allowed with approval from Supervisor and Department Director with proration based on FTE. Form can be found at <K:\FORMS\Negative Vacation Request.docx>.

All vacation must be scheduled at the mutual convenience of both the Employee and the Department. Management reserves the right to deny vacation requests to meet operational needs.

Employees shall continue to accrue vacation while on any other compensated leave. Vacation shall accrue during approved and paid sick leave. When a holiday occurs during an Employee's assigned vacation, it will not be counted as part of the vacation time.

Unused vacation will be paid on the final paycheck at the Employee's current pay rate. Unearned vacation already taken must be paid back if the Employee terminates.

Eau Claire City-County Board of Health (2020-2024)

PRIORITIES

1. **Maintain Health Department's fiscal stability**
2. **Support, advocate and educate for public health priorities**
3. **Review new and changing community/Health Dept priorities**
4. **Ongoing BOH improvements**

ACTIONS

Maintain Health Department's fiscal stability

1. Annual update/review of BOH's fiscal policies and related responsibilities
 - a. Fund balance policy reviewed annually at July BOH meeting
2. Quarterly review of fiscal reporting (March/June/Sept/Dec)
3. Significant financial changes or decisions discussed at any monthly meeting

Support and advocate for public health priorities

1. Provide skill development training for BOH
 - a. Advocacy training to provide framework and process for engagement (TBD)
2. Provide talking points for key priorities
3. Support WPHA/WALHDAB legislative priorities
 - a. Legislative update documents provided in monthly meeting packets
 - b. BOH copied on emails the Health Dept has sent to legislative officials
4. Engage with community partners/leaders to support community action on health priorities
5. Raise community and governmental policy makers' awareness of need to support "health and health equity lens" in decision-making
 - a. Confirm BOH role in Community Health Assessment
6. Raise awareness of upstream factors impacting health
7. Identify and share influencing tools available for BOH
 - a. Public health resources
 - b. Case studies
 - c. Examples of success in other communities

Review new or changing community/Health Dept priorities

1. Include quarterly BOH agenda item to update/review a running list of potential issues in community (January/April/July/October meetings)
2. Discuss populations impacted and data gaps
3. Discuss staffing, fiscal and resource implications for Health Dept
4. **Support the Health Dept's capacity to deal with a pandemic**

Ongoing BOH improvements

1. Strive for diversity of BOH membership
2. Identify and prioritize BOH training opportunities and needs
 - a) Annual review of state statutes applicable to BOH

Updated & Approved 12/__/2020

Board of Health Meeting 12/09/2020

Agenda Item 6.a

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

Public Health Proclamation:

A proclamation was voted on at the November 23rd City Council meeting thanking Public Health for all of the work that has been done to combat the current public health crisis. (See attached). City Council President Terry Weld and Interim City Manager Dave Solberg also provided lunch to the health department team as a thank you which was incredibly generous.

SADD Summit

On November 11th, 2020, the Alliance for Substance Abuse Prevention held a Students Against Destructive Decisions (SADD) Advisor Summit virtually. Three of the six SADD advisors were able to attend which we felt happy about given the pandemic. The Summit focused on reconnecting with the SADD advisors and seeing how we can support their work in the COVID-19 virtual world. The Fall Creek and Regis SADD advisors stated that they had been meeting virtually and students have started some activisms. Augusta SADD advisor stated that they have been unable to meet, but at the end of the meeting, the advisor said that this meeting invigorated him to get his SADD chapter together. Kate Kensmoe provided medication safety updates and shared resources and trainings to help guide and focus SADD chapters, Emily Carlson and AmeriCorps member Grace Huftel presented on vaping, Peggy O'Halloran presented on Youth Risk Behavior Survey (YRBS) data. Amanda Davis, Alliance School Consultant, and Alison Harder, Alliance Facilitator also attended the summit. A recording of the summit was shared with advisors who were not able to attend, along with resources. Activism that are created by students have been shown to effectively motivate and educate their peers in making healthier decisions. This work is supported by the Strategic Plan Framework- Partnerships for Success grant the department received in September with the purpose of preventing the onset and reducing the progression of substance abuse in our community.

Medication Safety PSA:

The Strategic Prevention Framework Partnerships for Success (PFS) grant continued to spread the message on medication safety. Grant funds were used to work with Stokes | Herzog to develop a public service announcement to help prevent medication misuse. The video is located on the Alliance for Substance Abuse website and [social media](#), along with the [Health Department's](#) Facebook page.



Help Prevent Rx Misuse

Alliance for Substance Abuse Prevention

1 Comment 1 Share

Almost 1 in 10 Eau Claire County high school students say they've misused a prescription pain medication in the past month! Here's how YOU can help prevent misuse.

More info: <http://getinvolvedasap.org>



National Prescription Drug Take Back:

On October 26, the Eau Claire County Sheriff's Office was able to dispose of approximately 2500 lbs of unwanted, expired, and unused prescription medications collected from disposal bins throughout the year.

HIV Partner Services Funding

Since 2014, the WI Division of Public Health (DHS) has contracted with Eau Claire City-County Health Department (ECCCHD) for \$75,000 to support regional HIV Partners Services (HIV PS) to 14 counties: Eau Claire, Chippewa, Dunn, Clark, Pepin, Washburn, Douglas, Burnett, Rusk, Barron, Bayfield, Pierce, Polk, and St Croix. The contract assures expertise is available through our public health nursing staff for this specialized HIV service. HIV PS assure that partners of HIV-infected individuals receive counseling, prevention, and support service as well as at home rapid HIV testing as indicated to help prevent further spread.

Due to recent changes in this program and significant funding decreases within the last year, DHS has been evaluating contract processes and funding amounts for all our grantees. As DHS reviewed grants, they became aware that ECCCHD has been receiving 3.5 times the amount of other LHDs within Wisconsin. With it being so late into the 2021 budget process, DHS has agreed to keep ECCCHD funding stable for 2021. Starting in 2022, DHS plans to decrease the ECCCHD funding to \$25,000. Although this amount is a third of the \$75,000 that Eau Claire has received in the past, it is still greater than the amount DHS provide most LHDs in Wisconsin. The health department team will be working with the State to discuss how this will impact services provided if the funding amount is decreased. This will come back to the BOH for confirmation in 2021.

Cases Assigned to Eau Claire County for HIV PS Follow-up		
Year	Number of HIV-PS Cases	Number of those cases in Eau Claire County
2016	10	6
2017	19	4
2018	16	5
2019	16	9
As of Dec 1, 2020	11	1

More information on HIV PS go to:

<https://www.dhs.wisconsin.gov/hiv/partner-services.htm>

Proclamation

WHEREAS, public health workers are dedicated to promoting health and safety for all by encouraging healthy habits, and preventing disease, injury, and disability through immunization against vaccine-preventable diseases, promoting mental health and injury prevention, helping communities prepare for natural disasters, and advancing equity efforts to reduce health disparities; and

WHEREAS, advancing public health is a cooperative effort, we recognize that public health workers are leaders in creating partnerships with the business community, local and state government, community organizations, and local schools to improve the conditions that lead to better health for all; and

WHEREAS, in addition to their extraordinary work with their daily responsibilities, our public health heroes have dedicated additional time and energy to combat the current public health crisis that is the COVID-19 pandemic, and working to Slow The Spread by teaching us the importance of wearing a mask, physically distancing, washing our hands, and not gathering in groups outside our immediate households so we can stay safe and healthy; and

WHEREAS; as the Thanksgiving holiday approaches and we continue our battle with the most dangerous pandemic in a century, local public health workers have worked tirelessly to protect our healthcare and long-term care systems, and have helped to secure additional support and resources for those systems during these times of crisis; and

NOW, THEREFORE, I, Terry L. Weld, President of the Eau Claire City Council, on behalf of the entire City Council, do hereby proclaim November 23, 2020 as

PUBLIC HEALTH THANK YOU DAY

in the City of Eau Claire and call upon Eau Claire residents to join all Wisconsinites in expressing our deepest gratitude to our public health heroes.



Terry L. Weld, President
Eau Claire City Council

Dated,

November 24, 2020



Board of Health Meeting 12/9/2020

Agenda Item 6.b

October 2020 Media Contacts

INTERVIEW

10/1/2020	Title: LIVE: Incident Update for October 1, 2020 Link: https://www.facebook.com/eauclairehealth/videos/263016031571582/	Topic: Communicable Disease Staff: Lieske Giese
10/5/2020	Title: Eau Claire Businesses Spammed Link: https://www.leadertelegram.com/covid-19/eau-claire-businesses-spammed-with-fake-placards/article_32c51e9a-3e1e-5831-a586-51298854285e.html	Topic: Communicable Disease Staff: Audrey Boerner
10/5/2020	Title: Eau Claire Health Dept. calls quarantine placards on area businesses 'spam' Link: https://wqow.com/2020/10/05/eau-claire-health-dept-calls-quarantine-placards-on-area-businesses-spam/	Topic: Communicable Disease Staff: Elizabeth Giese
10/8/2020	Title: EC Health fights back against misinformation Link: NOT AVAILABLE	Topic: Communicable Disease Staff: Lieske Giese
10/8/2020	Title: LIVE: Incident Update for October 8, 2020 Link: https://www.facebook.com/335272176509846/videos/737496400442976	Topic: Communicable Disease Staff: Lieske Giese
10/12/2020	Title: Eau Claire City Council hears from many opposed, some in favor of proposed health ordinance Link: https://wqow.com/2020/10/12/eau-claire-city-council-hears-from-many-opposed-some-in-favor-of-proposed-health-ordinance/	Topic: Communicable Disease Staff: Lieske Giese
10/12/2020	Title: Eau Claire City Council hears from community members on proposed health ordinance Link: https://www.weau.com/2020/10/13/eau-claire-city-council-hears-from-community-members-on-proposed-health-ordinance/	Topic: Communicable Disease Staff:
10/12/2020	Title: Health department warns of increase change for rabies exposure as temperatures drop Link: https://www.weau.com/2020/10/12/health-departments-warns-of-increase-change-for-rabies-exposure-as-temperatures-drop/	Topic: Communicable Disease Staff: Savannah Bergman

10/13/2020	Title: Eau Claire City Council postpones vote on Contagious Disease Ordinance	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/14/eau-claire-city-council-postpones-vote-on-contagious-disease-ordinance/	
10/13/2020	Title: Change in seasons brings increased rabies risk	Topic: Communicable Disease Staff: Savannah Bergman
	Link: https://www.weau.com/2020/10/13/change-in-seasons-brings-increased-rabies-risk/	
10/13/2020	Title: Eau Claire County reports 9th COVID-19 related death	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/13/eau-claire-county-reports-9th-covid-19-related-death/	
10/13/2020	Title: Eau Claire City Council postpones vote on Contagious Disease Ordinance	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/14/eau-claire-city-council-postpones-vote-on-contagious-disease-ordinance/	
10/13/2020	Title: Eau Claire City Council postpones public health ordinance	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2020/10/13/eau-claire-city-council-postpones-public-health-ordinance/	
10/13/2020	Title: Eau Claire City Council postpones public health ordinance	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2020/10/13/eau-claire-city-council-postpones-public-health-ordinance/	
10/15/2020	Title: UPDATE: Eau Claire City- County Health Department gives COVID update	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/15/watch-live-eau-claire-city-county-health-department-gives-covid-update/	
10/15/2020	Title: Eau Claire Health Dept. does away with health order, opts for 'health expectations'	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2020/10/15/eau-claire-health-dept-does-away-with-health-order-opts-for-health-expectations/	
10/16/2020	Title: Eau Claire City-County Health Department releases community expectations	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/16/eau-claire-city-county-health-department-releases-community-expectations/	
10/22/2020	Title: LIVE: Incident Update for October 22, 2020	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.facebook.com/335272176509846/videos/2700819983468161	

10/22/2020	Title: Free flu shot clinic in Augusta Saturday, another in EC next month	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2020/10/22/free-flu-shot-clinic-in-augusta-saturday-another-in-ec-next-month/	
10/24/2020	Title: Health department holds drive-through flu shot clinic	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/24/health-department-holds-drive-through-flu-shot-clinic/	
10/25/2020	Title: UPDATE: Regis Middle and High Schools going virtual for two weeks due to spike in COVID-19 cases	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2020/10/25/regis-catholic-schools-recommending-all-students-and-staff-be-tested-for-covid-19/	
10/26/2020	Title: Eau Claire principal, health director share opinions of study showing prep sports don't spread COVID	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2020/10/26/eau-claire-principal-health-director-share-opinions-of-study-showing-prep-sports-dont-spread-covid/	
10/28/2020	Title: Contact tracing growing more difficult as COVID-19 pandemic intensifies	Topic: Communicable Disease Staff: Leeshia Crayton
	Link: https://www.weau.com/2020/10/28/contact-tracing-growing-more-difficult-as-covid-19-pandemic-intensifies/	
10/29/2020	Title: Daughter Will 'Wait and Pray' After Mom Tests Positive for COVID in Nursing Home	Topic: Communicable Disease Staff: Lieske Giese
	Link: NOT AVAILABLEhttps://upnorthnewswi.com/2020/10/29/daughter-will-wait-and-pray-after-mom-tests-positive-for-covid-in-nursing-home/	
10/29/2020	Title: LIVE: Incident Update for Oct 29, 2020	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.facebook.com/335272176509846/videos/374779817044741	
11/2/2020	Title: UW-Eau Claire Instructors Call For Online Classes After Thanksgiving	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.wpr.org/uw-eau-claire-instructors-call-online-classes-after-thanksgiving	
11/2/2020	Title: How is Wisconsin's mask mandate enforced at local businesses?	Topic: Other Staff: Jeff Robb
	Link: https://www.weau.com/2020/11/03/how-is-wisconsins-mask-mandate-enforced-at-local-businesses/	

11/4/2020	Title: UWEC expanding antigen testing Link: https://wqow.com/2020/11/04/uwec-expanding-antigen-testing/	Topic: Communicable Disease Staff: Lieske Giese
11/5/2020	Title: UW System to offer free antigen testing Link: https://www.weau.com/2020/11/05/uw-system-to-offer-free-antigen-testing/	Topic: Communicable Disease Staff: Lieske Giese
11/5/2020	Title: LIVE: Incident update for November 5, 2020 Link: https://www.facebook.com/335272176509846/videos/1214740412240636	Topic: Communicable Disease Staff: Lieske Giese
11/11/2020	Title: Health experts offer tips on celebrating Thanksgiving this year Link: https://www.weau.com/2020/11/11/health-experts-offer-tips-on-celebrating-thanksgiving-this-year/	Topic: Communicable Disease Staff:
11/12/2020	Title: Free Community Antigen Testing for COVID-19 Starts This Weekend Link: https://volumeone.org/articles/2020/11/12/268559-free-community-antigen-testing-for-covid-19-starts	Topic: Communicable Disease Staff:
11/12/2020	Title: New ideas and advice on celebrating Thanksgiving during the COVID-19 pandemi Link: https://www.wiproud.com/news/local-news/new-ideas-and-advice-on-celebrating-thanksgiving-during-the-covid-19-pandemic/	Topic: Communicable Disease Staff: Audrey Boerner
11/12/2020	Title: LIVE: Incident Update for November 12, 2020 Link: https://www.facebook.com/335272176509846/videos/446046483045981	Topic: Communicable Disease Staff: Lieske Giese
11/13/2020	Title: Eau Claire City- County Health Department releases community and individual expectations as COVID-19 Link: https://www.weau.com/2020/11/13/eau-claire-city-county-health-department-releases-community-and-individual-expectations-as-covid-19-cases-rise/	Topic: Communicable Disease Staff: Lieske Giese
11/18/2020	Title: Getting the Right COVID-19 Test Link: https://www.weau.com/2020/11/18/getting-the-right-covid-19-test/	Topic: Communicable Disease Staff: Audrey Boerner
11/19/2020	Title: LIVE: Incident update for November 19, 2020 Link: https://www.facebook.com/335272176509846/videos/690207351635601	Topic: Communicable Disease Staff: Lieske Giese
11/23/2020	Title: Area hospital adapts to COVID-19 Link: https://www.weau.com/2020/11/24/area-hospital-adapts-to-covid-19-case-surge/	Topic: Communicable Disease Staff: Audrey Boerner

11/23/2020 Title: Eau Claire City Council to vote on added funding for temporary homeless shelter Topic: Communicable Disease
Staff: Audrey Boerner
Link: <https://wqow.com/2020/11/23/eau-claire-city-council-to-vote-on-added-funding-for-temporary-homeless-shelter/>

PRESS RELEASE

10/8/2020 Title: COVID-19 media updates Topic: Communicable Disease
Staff: Audrey Boerner
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/15/2020 Title: COVID-19 media updates Topic: Communicable Disease
Staff: Gina Schemenauer
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/19/2020 Title: WIC Celebrates #WICsconin Enrollment Week Topic: Healthy Living and Prevention
Staff: Beth Draeger
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/20/2020 Title: Health Department Offering FREE Flu Shots for Youth at Drive-Thru Clinics Topic: Communicable Disease
Staff: Allison Gosbin
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/21/2020 Title: COVID-19 media updates Topic: Communicable Disease
Staff: Audrey Boerner
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/22/2020 Title: Drive-Thru Flu Shot Clinic in Augusta Topic: Communicable Disease
Staff: Audrey Boerner
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/23/2020 Title: Cat Bite Topic: Communicable Disease
Staff: Savannah Bergman
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

10/23/2020 Title: Health Dept Seeks Cat that Bit a Man Topic: Communicable Disease
Staff: Savannah Bergmann
Link: <https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases>

11/6/2020	Title: Drive Thru Flu Shot Clinic in Eau Claire	Topic: Communicable Disease Staff: Audrey Boerner
	Link:	
11/13/2020	Title: Health Department updates COVID-19 Prevention and Control Community Expectations	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://www.eauclairewi.gov/government/our-divisions/health-department/there-s-more/news-releases	
11/20/2020	Title: Don't let your Thanksgiving turkey bite you back!	Topic: Safe Food and Water Staff: Iris Casey
	Link: K:\Communication Team\Press Releases\2020	
PRINT ARTICLE		
10/1/2020	Title: Breast Cancer- WWWP	Topic: Chronic Disease Prevention Staff: Jackie Krumenauer
	Link: Not Available	
10/1/2020	Title: Flu	Topic: Communicable Disease Staff: Allison Gosbin
	Link: Not Available	
10/1/2020	Title: Fit Families Newsletter	Topic: Chronic Disease Prevention Staff: Alexis Tuma
	Link: Not Available	
10/1/2020	Title: Fit Families Newsletter	Topic: Chronic Disease Prevention Staff: Alexis Tuma
	Link: Not Available	
10/5/2020	Title: A Fourth County Health Director Is Out Over Pushbacks to COVID-19 Safeguards	Topic: Communicable Disease Staff: Elizabeth Giese
	Link: https://upnorthnewswi.com/2020/10/05/a-fourth-county-health-director-is-out-over-pushbacks-to-covid-19-safeguards/	
10/15/2020	Title: Fall temperatures increase chances of rabies exposure for your families and pets	Topic: Communicable Disease Staff: Savannah Bergman
	Link: Not Available	
10/22/2020	Title: EC Health Dept releases COVID-19 Community expectations	Topic: Communicable Disease Staff: Lieske Giese
	Link: Not Available	

10/22/2020	Title: EC Health Dept offers free flu vaccine shots in augusta Link: Not Available	Topic: Communicable Disease Staff: Allison Gosbin
10/22/2020	Title: WIC celebrates #WIconsin Enrollment Week Link: Not Available	Topic: Healthy Growth and Development Staff: Beth Draeger
10/24/2020	Title: County Health order renewed as cases surge, new health ordinance proposed Link: Not Available	Topic: Communicable Disease Staff: Lieske Giese
11/1/2020	Title: Fit Families Newsletter Link: Not Available	Topic: Chronic Disease Prevention Staff: Alexis Tuma
11/2/2020	Title: Fit Families Newsletter Link: Not Available	Topic: Chronic Disease Prevention Staff: Alexis Tuma
11/12/2020	Title: UWEC's COVID-19 dashboard receives "A-" nationally Link: https://www.spectatornews.com/campus-news/2020/11/uwecs-covid-19-dashboard-receives-a-nationally/	Topic: Communicable Disease Staff:
11/12/2020	Title: UPDATE: Eau Claire City-Co. Health Dept. gives COVID update Link: https://www.weau.com/2020/11/12/watch-live-eau-claire-city-county-health-department-gives-covid-update/	Topic: Communicable Disease Staff:
11/13/2020	Title: EC Health Department updates COVID-19 'community expectations' Link: Not Available	Topic: Communicable Disease Staff:
11/16/2020	Title: Eau Claire County sees 284 new COVID-19 cases Link: https://www.weau.com/2020/11/16/eau-claire-county-sees-284-new-covid-19-cases/	Topic: Communicable Disease Staff:



Eau Claire City-County
Health Department

Service Recognition Certificate

*In appreciation of your 30 years of
dedicated service to the Eau Claire City-
County Health Department, to the Hmong
Community and to the
Eau Claire Community as a whole,*

This certificate is presented to

May Her
Public Health Aide- Bilingual

Signature Director/Health Officer

Date

Signature President, Board of Health

Date

WPHA Legislative News



Late yesterday, the Assembly Republicans released a package of proposals to address COVID-19. These proposals reflect the priorities of internal discussions among the Assembly Republican caucus. They have not been agreed to by either the Governor or the Senate Republicans. As such, these may be better viewed as a starting point for continuing discussions among Evers, Vos, and incoming Senate Majority Leader Devin LeMahieu to arrive at some sort of agreed-to proposal. We are speaking to as many legislators and staff as we can to gauge their next steps.

However, we did want to bring a few of the proposals to your attention. Below is a brief summary of each, which can be explained in more detail in [this document](#).

Tier 1 Items

1. Vaccine Distribution Plan - Joint Finance Approval (Page 9, Item 5)

Require DHS to submit to the Joint Committee on Finance a proposed plan for the state for distributing SARS-CoV-2 coronavirus vaccines. Provide that DHS may implement the vaccine distribution plan only as approved by the Joint Committee on Finance under a 14-day passive review process.

2. Increase Local Public Health Staff (Page 9, Item 6)

Require DHS to double the number of individuals performing public health services related to the COVID-19 in Wisconsin, as compared to the number as of November 20, 2020, by providing funding to counties to hire individuals to perform public health services during the COVID-19 epidemic.

3. Rapid Antigen Testing - DHS Assistance (Page 10, Item 8)

Require DHS to assist entities that receive, through federal funding, antigen tests for COVID19, including nursing homes, hospitals, and surge testing sites, in administering and processing the rapid antigen tests.

4. Local Health Officers' Authority to Close and Impose Capacity Restrictions on Businesses (Page 10, Item 10)

Prohibit a local health officer from ordering the closure of, or capacity restrictions on a type of business unless the closure or capacity restriction applies to all types of businesses. Provide that if a local health officer orders closure or capacity restrictions, the officer must include with the order the justification and scientific reasoning and a timeline or specific date for termination of the closure or restriction. Provide that if a local officer orders a closure or capacity restriction, the order could be in effect for up to two weeks, unless the order is extended by the County Board for an additional period of up to two weeks. Authorize the County Board to provide subsequent extensions of up to two weeks each business.

Tier 2 Items

1. Prohibit Mandatory SARS-COV-2 Vaccination (Page 11, Item 11)

Prohibit the Department of Health Services and local health officers from requiring individuals to receive a vaccine against the SARS-CoV-2 coronavirus, which causes COVID-19. In addition, prohibit employers from requiring their employees to receive a vaccine against the SARS-CoV-2 coronavirus as a condition of employment.

2. Authority to Forbid Public Gathering in Churches (Page 11, Item 12)

Prohibit the Department of Health Services and local public health departments from prohibiting public gatherings in churches.

3. School Board Approval of Virtual Instruction (Page 17, Item 6)

Specify that, during the time period beginning on January 11, 2021, and ending June 30, 2022, a school board may not provide virtual instruction to pupils in lieu of in-person instruction unless approved by a two-thirds vote of the board. Provide that such an approval would be valid for 14 days. Specify that a board may extend virtual instruction only by a two-thirds vote of the board and that each extension may not be for more than 14 days.

As stated, we believe this document to be a starting point for Assembly Republicans to work off going forward in negotiations with the Governor's Office and Senate Republicans. At this time, it is also unclear when an actual legislative session on COVID-19 would take place. We understand it could be after the first of the year.

We will continue to provide updates as they're available.

WPHA & WALHDAB Approve 2021-2022 Legislative Priorities

After multiple membership surveys, partnership surveys (organizations that belong to WPHA/WALHDAB), listening sessions on priorities, discussions with the PA committee, a small workgroup, discussions with the Boards and staff, it has been recommended and the boards have approved:

- *Preserving public health statutory authority for control of communicable diseases and other public health threats*
- *Building and retaining public health infrastructure through increased and more flexible public health funding*

We will lead legislative advocacy related to statutory authority and increased public health infrastructure funding. Our budget request is a new allocation of \$36 million per year, over and above what is currently budgeted for public health, to be divided between local health departments and existing public health programs, with at least half going to local health departments.

WPHA & WALHDAB support addressing the social determinants of health and preserving current investments for all of these efforts. WPHA & WALHDAB will actively work with key partners that align with priorities that include social determinants of health which remain critically important. We will continue to support legislation and advocacy on our previous session's legislative priorities of criminal justice reform, income stability and employment, early childhood education, and housing, as well as other bills introduced that align with traditional public health priorities.

WPHA & WALHDAB will monitor and support additional efforts as time and resources allow. This legislative agenda is meant to guide WPHA & WALHDAB's state advocacy work. WPHA & WALHDAB Lobbyists and staff, with direction and oversight of the respective Board of Directors and the WPHA/WALHDAB Joint Public Affairs Committee, may have to reprioritize, add, or delete items depending upon new initiatives, threats, and legislative activities. Please contact the WPHA office with any comments or questions! More information and resources to come to support these priorities.

WPHA-WALHDAB Legislative Priorities 2021-2022

To: WPHA & WALHDAB Boards

From: WPHA/WALHDAB Public Affairs Committee

The PA Committee has met several times to identify the organizations' legislative priorities and policy agenda for the 2021-2022 biennium. After reviewing WPHA and WALHDAB member surveys, partner surveys, multiple small and large group meetings and extensive discussion, the PA Committee has identified the following legislative priorities for the 2021-2022 legislative session:

- *Preserving public health statutory authority for control of communicable diseases and other public health threats*
- *Building and retaining public health infrastructure through increased and more flexible public health funding*

We will lead legislative advocacy related to statutory authority and increased public health infrastructure funding.

Why preserve public health statutory authority?

We need a proactive approach to maintaining, if not strengthening, public health authority. Providing talking points and messaging opportunities for defending the need for public health authority will be critical. More details to be fleshed out about what this looks like.

Why ask for increased public health funding?

Federal, state, and local public health programs have been historically underfunded and undervalued. Our focus will be on local and state funding. WPHA & WALHDAB support addressing the social determinants of health and preserving current investments for all of these efforts.

Our budget request is a new allocation of \$36 million dollars to be divided between local health departments and existing public health programs within the Division of Public Health.

Additional Investment Recommendation Breakdown

- 1. Funding allocated Local Health Departments (allocated proportional to size of population served):**
 - a. Allocate flexible funding for local health departments to strengthen initiatives in alignment with their community health assessments and to better serve as their community's health strategist.

- b. The COVID-19 pandemic has exposed weakness in Wisconsin's public health system that have resulted from decreased investment over time. Some of these funds could be used to shore up local health departments' emergency response capacities.
 - c. Other examples may include: Mandated directives and core responsibilities (list of unfunded state mandates), Health Equity and Policy Coordinators, prevention coalition building based on community needs, etc.
- 2. Expanded public health initiatives through Wisconsin's Division of Public Health, Community based agencies and coalitions.**
- a. Examples to include but are not limited to: environmental health initiatives, healthy baby initiative, Tobacco Prevention and Control programming, Nutrition and Physical Activity programming

Additional Legislative Activity

WPHA & WALHDAB will actively work with key partners that align with priorities that include social determinants of health which remain critically important. We will continue to support legislation and advocacy on our previous session's legislative priorities of criminal justice reform, income stability and employment, early childhood education, and housing, as well as other bills introduced that align with traditional public health priorities. Examples may include:

- Supporting increase for school breakfast program
- Supporting treatment alternatives and diversion program (TAD) funding for mental health and substance abuse issues
- Supporting funding and program services to increase care coordination for improved birth outcomes, manage chronic conditions and social barrier reduction.
- Supporting Income Stability/Employment Initiatives such as Paid Family Leave, Child Care support.
- Supporting Medicaid Expansion.

WPHA & WALHDAB will monitor and support additional efforts as time and resources allow. This legislative agenda is meant to guide WPHA & WALHDAB's state advocacy work. WPHA & WALHDAB Lobbyists and staff, with direction and oversight of the respective Board of Directors and WPHA & WALHDAB Public Affairs Committee, may have to reprioritize, add, or delete items depending upon new initiatives, threats, and legislative activities.

WALHDAB-WPHA 2021-22 Budget Talking Points

****official 2021-22 priorities have not been voted on so do not want to use specifics***

Introduction: My name is _____.

Share Association representation: I am a member/Public Affairs Committee member/position of the Wisconsin Public Health Association/Wisconsin Association of Local Health Departments and Boards.

Share professional representation (if desired): I work at _____.

1) Wisconsin needs immediate and sustained investment in public health.

- An investment of \$10 per person per year in evidence-based programs could save the country more than \$16 billion annually within five years. These include programs to increase physical activity, improve nutrition, and prevent smoking and other tobacco use.
- Investment in public health saves \$5.60 for every \$1 invested.
- Wisconsin is not taking advantage of these potential savings. Across all states, the median support for public health is \$36.00 per person per year. Currently, Wisconsin state funding for public health is \$17.40 per person per year – a difference of \$18.60 per person.

2) The pandemic spotlights chronic underfunding of Wisconsin's local health departments.

- Provide a continuing appropriation of block grants to local public health departments to increase their capacity.
- Provide flexible funding for local health departments to work toward local priorities they set with partners across sectors in their planning processes.
- *[Share your role in the process and/or your specific CHIP objectives and why any are unique to your community.]*
- Local health departments function as their community's health strategist.
- To meet Wisconsin's community health needs, we must invest in local health departments.

3) Wisconsin funds our Department of Health's programs at a fraction of CDC-recommended levels.

- Allocate new state funding to existing programs that support:
 - Environmental health - Eliminate / abate lead hazards related to paint, soil, and pipes statewide
 - Healthy baby initiatives - Support healthier pregnancies and births;

Address racial disparities in maternal and child health.

- Tobacco Prevention and Control - Better support a comprehensive program to prevent the rising youth use rate of e-cigarettes and target populations that use tobacco at higher rates.
- Nutrition and Physical Activity - The Department of Health Services lost a competitive Centers for Disease Control and Prevention grant in 2020; provide funding to allow their good work to continue at a minimal level.

4) *Connect social determinants of health to public health.*

- To improve public health, we must infuse health and equity into all policies.
 - Health starts in our homes, schools, workplaces, neighborhoods, and communities.
 - All Wisconsinites deserve an equal opportunity to make the choices that lead to good health.
 - Key public health policy priorities include: criminal justice reform, early childhood investment, income stability/employment, and housing.
 - Improving the conditions in which we live, learn, work, and play will create a healthier Wisconsinites.

**November 11, 2020 Board of Health Meeting
Virtual Meeting**

The Board of Health convened in open session at 5:15 pm
The meeting was called to order by Merey Price

Board Members Present

Quorum is reached

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

Staff Members Present:

Lieske Giese
Janice Vinopal
Marisa Stanley
Jeff Robb
Gina Holt (recorder)

Public Comment:

- None received

Board of Health Priorities

- Priorities and Action Discussion:
 - Suggestion for Priority 2: add education so it reads support, advocate and educate public health priorities
 - Suggestion for Priority 3: Mention health equity. Any place in the page that discusses all policies adding health equity and raise awareness.
 - Suggested adding specific wording around COVID perhaps adding a separate priority or adding COVID to actions. Discussion regarding adding COVID specific actions.
 - Suggestion to add maintain and develop the health departments capacity, the capacity to deal with a pandemic.

Work Session and Failitated Discussion

- Overview of COVID: Eau Claire County's case rate is currently higher than the states. Our goal is to follow up on all cases and then follow up with close contacts. This has not been achieved that due to the high case numbers. We are working with institutional partners to notify close contacts. The department continues to work with the Wisconsin National Guard test site as well as working with the clinical test sites. UWEC has been doing antigen testing and is now testing faculty and off campus students. If a positive antigen test is received, they do a confirmatory PCR test on site. UWEC is working with the ECASD to offer additional community antigen testing at Memorial High School on Saturdays, Sundays, and Wednesdays for the next four weeks. This will focus on asymptomatic testing. We are looking at adding a policy maker briefing that would be some key talking points and messages that would go to policy makers (city council, county board, Health Department as well as other government entities)

Facilitated discussion will be structured under the following "buckets"

1. Policy/legislation-Questions asked and discussed: It appears other continues have stronger orders, what is the consequence or pushback that they have received? Does the WI supreme court decision negate statute 252? Would any proposed ordinances include oversight of the Health Director? Is there any sense of power behind the current Public Health Expectations document? What are the results of lack of national and state leadership during the pandemic?

- The order had a sense of power to it but was limited due to the inability to write citations. We continue to receive and investigate complaints. The department works hand in hand with the Chippewa Valley Recovery Task Force. Giving institutions backing and support helps throughout this difficult time.
 - The lack of national and state leadership has been a burden on local government. Other counties in Wisconsin that continued with stronger orders have faced litigation. The existence of ordinances and or orders can have a community impact to slow the spread. An example of sending a clear message would be something like a mask requirement in restaurant or stores with signage like no shoes no shirt no service.
 - Partnership with all local government is ideal. If we were to try and limit things like gatherings would it be helpful if it were in conjunction with the City Council and County Board. Ordinance action is municipality by municipality.
2. Budget- Questions asked and discussed. How is the focus on COVID taking away from other areas of work in the Health Department? What would be the roadblocks in using tax levy money to hire temporary employees? What does COVID funding look like for 2021?
- The department has spent a lot of money on COVID related work. We are estimating well over \$2 million dollars to be spent in 2021, and we know that there will be a gap in funding. We also have not been able to focus on fee-based programs and doing things such as applying for new grants. These things all effect the budget. If our estimates of our expenses are correct for 2021 there could be a \$1.8 million dollar gap. We are trying to figure out what our priorities will be. What services do we stop, what do we start etc.? We are also negotiating with the City/County around unspent tax levy from 2020. Staff that would have been tax levy funded have been funded through COVID with federal grant funding that would have otherwise been levy funded. We indicated that we would like to move some of those funds into a fund balance account that we could draw from for 2021 COVID expenses, We have hired a number of people for disease investigation and a number of individuals across incident command beyond our regular public health staff. Having funding to continue with those people in 2021 is so important.
3. Workforce-Questions asked and discussed: How is the negative feedback regarding public health effecting staff morale? Will future recruitment become difficult?
- One of things that we are worried about is the large percentage of staff that is retirement eligible. Because of our response to COVID-19 it is difficult to bring new staff members on and have an effective orientation. We are working on a way to hire replacements earlier than usual and being strategic with training.
 - There has been so much negative feedback regarding public health throughout all of this. It is hard when staff care so much, they have an enormous workload, and are receiving non supportive feedback. Health officers and staff are leaving due to the overwhelming nature of the work. We are trying to find ways to continue to show support to our staff. We are working with WIFLI to look at what opportunities there may be to support the management team who does not get paid or compensated for extra hours worked.
4. Advocacy-what can you do/what can the community do questions and discussion: A lot of community members have reached out to City Council and County Board members asking what they can do to help, any ideas or recommendations on how to respond?
- Advocacy about funding will continue to be important. Board members continuing to bring ideas back to the department which is so helpful. Sharing the “Caring is Contagious” message is a great way to advocate. State and Federal elected official’s advocacy and letting

them know what we need. Working with local municipalities and local government to continue advocacy work.

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

- a. None made

Next scheduled BOH meeting is December 9, 2020 at 5:15 p.m.

Merrey Price adjourned the meeting at 7:08 p.m.

DRAFT

2021 Board of Health Calendar –
Showing typical suggested monthly topics
Subject to change

January 27

- Distribute final 2021 Board of Health calendar
- Approve continuing grant for DNR Transient Non-community Water Systems
- Eau Claire Healthy Communities update
- Director Performance review mid-point update
- Strategic Plan Update
- Follow up from November work session
- Update/review running list of potential issues in the community (from Priorities tracking doc)
- Quarterly Financial Update

February 24

- Performance Management Update
- Quarterly review of tracking BOH Priorities

March 24

- Board evaluation

April 28

- Initial input from the Board of Health for the proposed 2022 budget, including discussion of salary and health insurance for employees for 2022
- Summary of 2020 financial
- Discuss 2020 Annual Report
- EC Healthy Communities update
- Question development and approval for Director performance review survey
- Strategic Plan update
- Workforce Development Update
- Quality Improvement Plan Update
- Close out 2020 budget
- Update/review running list of potential issues in the community (from Priorities tracking doc)
- Quarterly Financial Update

May 26

- Review budget development process
- Quarterly review of tracking BOH Priorities
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June 23

- Department Director performance review (Closed session)
- Fee discussion

July 28

- Develop Department Director Performance expectations

- Annual review of Account Allocations/Fund Balance
- Approve draft of 2022 Health Department budget
- Performance Management Update
- Strategic Plan Update
- Eau Claire Healthy Communities Update
- Adopt Department budget/pay schedule for 2021
- Review and Approve Employee Handbook-personnel policies updated
- Update/review running list of potential issues in the community (from Priorities tracking doc)
- Quarterly financial update

August 25

- Adjust 2022 Budget proposal if needed (after the Joint Budget Team meeting)
- Review and approve/adopt 2021 Health Department fees, and fee related regulation and resolution changes
- Quarterly review of tracking BOH Priorities

September 22

October 27

- Adjust 2022 Department budget by Board, if needed
- Single Audit Report
- EC Healthy Communities update
- Strategic Plan Update
- Workforce Development Update
- Quality Improvement Plan Update
- Update/review running list of potential issues in the community (from Priorities tracking doc)
- Quarterly Financial Update

November 10 (second Wednesday)

- BOH work session
- Quarterly review of tracking BOH Priorities

December 8 (second Wednesday)

- Election of President and Vice-President for next calendar year
- Approve final 2022 Budget
- Review a draft of the 2022 Board of Health calendar
- Approve 2022 contracts with State Division of Public Health
- Board photo for the annual report