

BOARD OF HEALTH AGENDA

February 24, 2021 at 5:15 PM
Remote Meeting via WebEx Events

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: 145 911 6615

**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 – 5 minutes
2. Public Comment – *The Board of Health and Eau Claire City-County Health Department welcome you. Statements pertinent to agenda items may be made by attendees during the public comment section. We do ask that statements are limited to three minutes per person. Written comments may also be provided. -5 minutes*
3. *Board of Health Legal overview- tentative 15 minutes*
 - Ms. Jenessa Stromberger – City of Eau Claire*
 - Mr. Richard Eaton – Eau Claire County*
4. COVID-19 Update
5. Consent Agenda (Action Required – approved for full content) – 5 minutes
 - a. Approve minutes from January 27, 2021 meeting-enclosed
 - b. Stipends-enclosed
6. Business Item (Action Required) – 5 minutes
 - a. Review and receive COVID-19 Public Health Expectations-to be sent prior to meeting
7. Other information items from staff for the Board – 45 minutes

- a. Director/Health Officer Report-enclosed
 - b. Correspondence/Media-enclosed
 - c. Service Recognition
 - Dan Peterson, Environmental Health Specialist and Lead-retiring after 35 years of service
 - d. Health Department review of BOH action from 2020-enclosed
 - e. Health Department staffing update-verbal
 - f. Performance Management Update – 2020 end of year-enclosed
 - g. Eau Claire Healthy Communities Update-enclosed
 - h. Strategic Plan Update-enclosed
8. Board member informational items-20 minutes
- a. Quarterly review of tracking BOH Priorities -enclosed
 - b. Communicable Disease taskforce update-enclosed
 - c. Public Health Policy/Advocacy-enclosed
 - State of WI biennial budget – governor’s proposal
 - State COVID-19 related legislation
 - Federal COVID-19 related legislation
 - Other
 - d. Conference attendance: NALBOH and WPHA/WALHDAB annual 2021 conference
<https://www.nalboh.org/events/EventDetails.aspx?id=1375943&group=>
<https://www.wpha.org/events/EventDetails.aspx?id=1426989>
9. Requests from Board members for future agenda items to be given consideration – 5 minutes
10. Next business meeting – March 24, 2021
11. Adjourn

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

1b Priority Group Summary Table for Local Vaccinator Group

2/9/2021

Information pulled from [DHS Priority Group 1b Recommendations](#) Document

Eligibility Group	Subgroups
Education and Child Care	A. All staff in regulated childcare , public and private school programs, out-of-school time programs, virtual learning support, and community learning center programs
	B. All staff in Boys and Girls Clubs, YMCAs.
	C. All staff in preschool and Head Start through K-12 education settings.
	D. Faculty and staff in higher education settings who have direct student con
Eligibility Group	Subgroups
Individuals enrolled in Medicaid long-term care programs	A. IRIS (Include, Respect, I Self Direct)
	B. Family Care
	C. Katie Beckett and Children’s Long Term Care Waiver, when the member’s age allows them to qualify for vaccine
Eligibility Group	Subgroups
Some Public-Facing Essential Workers	A. 911 operators
	<p>B. Utility and communications infrastructure <i>Workers who cannot socially distance and are responsible for the fundamental processes and facilities</i></p> <p>Electric, natural gas, steam, water, wastewater, internet, and telecommunications services are built, maintained, generated, distributed, and delivered to customers.</p>
	<p>C. Public transit: Drivers or employees (supervisor or maintenance person who rides the bus, or a public facing service agent) who have frequent close contact with members of the public, limited to:</p> <ul style="list-style-type: none"> • Public and commercial intercity bus transportation services. • Municipal public transit services, including municipal or county contracted shared-ride service providers. • Those employed by specialized transit and paratransit services for seniors, disabled persons, and low-income persons.
	D. Food Supply Chain: Agricultural production workers, such as farm owners and other farm employees.

	<ul style="list-style-type: none"> • Critical workers who provide on-site support to multiple agricultural operations, such as livestock breeding and insemination providers, farm labor contractors, crop support providers, and livestock veterinarians. • Food production workers, such as dairy plant employees, fruit and vegetable processing plant employees, and animal slaughtering and processing employees. • Retail food workers, such as employees at grocery stores, convenience stores, and gas stations that also sell groceries. • Hunger relief personnel, including people involved in charitable food distribution, community food and housing providers, social services employees who are involved in food distribution, and emergency relief workers.
Eligibility Group	Subgroups
Non-frontline health care essential personnel	<p>Staff who perform essential roles within health care organizations by maintaining cyber security; perform cleaning functions; scheduling; critical HVAC functions related to maintaining proper air flow in health care settings and refrigeration functions related to vaccine storage; health care critical supply chain functions, including those involved in the production, manufacturing and distribution of vaccine; public health; and emergency management</p>
Eligibility Group	Subgroups
Congregate Living: Residents of congregate living settings and on-site facility staff	<ul style="list-style-type: none"> • Employer-based: Housing provided by an employer for unrelated individuals who share living quarters. • Housing serving the elderly or people with disabilities: Adult family home, community-based residential facility, residential care complex, state center for the disabled, intermediate care facilities for individuals with intellectual disabilities (ICFs/IDDs), mental health institute, and county-based center for the disabled. • Shelters for those who are homeless or in need of refuge • Transitional housing: A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living when such facilities include shared bedrooms • Incarcerated individuals: Individuals in jails, prisons, and transitional housing.
Eligibility Group	Subgroups
Mink Husbandry	n/a



INFORMATION RELATED TO POTENTIAL ELIGIBILITY FOR COVID VACCINATION

Hello, I am contacting you on behalf of the Eau Claire City County Health Department COVID Response Team. One of the roles of the Response Team is to notify organizations that employ individuals that will soon be eligible for COVID vaccinations and to offer more information on COVID vaccination in Eau Claire County. The goal of this email is to:

- **Share information on the groups that soon will be eligible (after education and child care which are next on the list and which were already contacted)**
- **Share the resources that you can use now to prepare**
- **Share next steps**

Your organization is believed to employ the following personnel types who specifically fit Wisconsin's next eligible (Phase 1B) criteria:

Some public-facing essential workers including:

1. Utility and communications infrastructure workers who cannot socially distance and are responsible for the fundamental processes and facilities
2. Public transit drivers or employees who have frequent close contact with members of the public
3. Food supply chain including ag workers
4. Food production workers
5. Retail food workers
6. Hunger relief personnel
7. 911 operators

The State of Wisconsin is responsible for determining who is eligible to receive a vaccine. With limited vaccines available they have indicated that the groups above will be next in line. We expect this to be on or after March 1st.

While this group is not eligible for COVID vaccinations right now, we want to assist your organization in preparing your staff to consider vaccination when they become available. Recommended next steps for you as an employer:

1. Consider who in your staff meets the eligibility. More detailed information about who exactly meets the definition of an eligible group is [at this website](#). In some cases, employees who fall into the above category but can still maintain physical distance would not be eligible.

- You may want to develop a group list of these specific employees.
- You may want to consider criteria to rank order this group list in the event of limited vaccine. The State of Wisconsin recommends that criteria be considered such as

age, underlying health conditions, access to protective equipment, and other factors.

2. Consider other work-related factors that may impact how you support vaccination

- Consider whether you will allow staff to do this as part of work time
- When appointments become available, consider if you prefer individuals to schedule their own appointments, or to work with a single vaccine provider for your eligible employees (more information about this will be sent in future emails).
Health Department clinics will be prioritizing government employees as we move into this eligible group.

3. Consider sharing information with your staff now to make sure they know that they soon will be eligible, and to make sure that they have good information to encourage getting vaccinated. This may be email, handouts, fliers, or other methods. This will reduce confusion for your workforce and help your entire organization be more prepared.

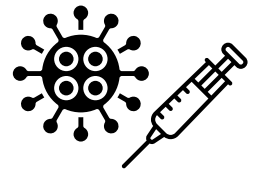
- **Consider sending an email to your employees. Your email might include the following sample language:** The WI Department of Health Services has indicated that some or all of our employees are among the next groups to be eligible for COVID-19 vaccine. The tentative eligibility date for this group is on or after March 1, 2021, though this will be highly dependent on vaccine availability in our state.

Please be aware that **as a government employee, you will have the option of getting vaccinated at a Health Department vaccination clinic** when your employment group becomes eligible. You may also choose to get vaccinated by your healthcare provider or pharmacy.

- These resources below can provide additional information as you wait for a vaccination appointment or if you are interested in more information on the COVID-19 vaccines available.
 - o Eau Claire County webpage for eligibility and vaccine appointments: <http://bit.ly/covidvaccine-ec>
 - o Eau Claire County vaccination data and FAQs: bit.ly/covid19vaccine-eauclaire
 - o Vaccine eligibility and safety handout: <https://www.dhs.wisconsin.gov/publications/p02900.pdf>
 - o Eau Claire Health Department Facebook Page for updates <https://www.facebook.com/eauclairehealth/>

Next Steps: As more information is available, please watch for future email information from the COVID-19 Response Team about vaccinations. To stay informed, please check the county [COVID-19 website](#) often for details, follow the Health Department on [Facebook](#), or subscribe to the COVID-19 weekly Situation Report [here](#). If you have specific questions, please call the COVID-19 call center at 715-831-7425.

Thank you very much for considering this important public health initiative for your staff.



Who Can Get Vaccinated

You are eligible to get the vaccine if:

- You work in:
 - Front line health care
 - Direct patient care
 - Police, Fire, or EMS
 - Correctional personnel
 - Are age 65 and older
- New groups will become eligible over time. Please go to bit.ly/covidvaccine-ec for the most updated information on who is eligible and how to get an appointment.

How to Get Vaccinated

If you are already a patient at HSHS/Prevea, Marshfield Clinic Health System, Mayo Clinic Health System, or OakLeaf Clinics, please contact the provider where you are already a patient. Other options are listed below.

IMPORTANT: Only make one vaccination appointment. Do not sign up with multiple vaccine providers. All providers will ask you to verify that you meet the above criteria and are eligible for vaccine at this time. No clinics are able to give a vaccine to someone without an appointment.

I want to get vaccinated at Prevea

- **Online:** If you have a MyPrevea account, sign in to schedule your vaccine. If you do not have a MyPrevea account, sign up here: myprevea.com
- **Phone:** If you do not have internet access, please call to get a vaccine appointment: 1(833) 344-4373.
- **Important:** Your second dose will be 21 days after your first dose. Please plan to return to your HSHS/Prevea provider 21 days after your first dose.

I want to get vaccinated at Marshfield Clinic Health System

- **Online:** Sign up at the community vaccination webpage: marshfieldclinic.org/community-vaccine
- **Phone:** If you do not have internet access, please call to get a vaccine appointment: 1(877) 998-0880.
- **Important:** Your Marshfield Clinic Health System provider will schedule your second dose approximately 21 days after your first dose.

I want to get vaccinated at OakLeaf Clinics

- **Phone:** If you are an OakLeaf Clinics patient, please call your OakLeaf Clinics office to schedule your vaccine appointment.
 - Eau Claire Medical Clinic (715) 839-9280
 - Pine Grove Family Medicine (715) 834-2788
 - Southside Medical (715) 830-9990
- **Important:** Your second dose will be 21 days (Pfizer) or 28 days (Moderna) after your first dose. Please plan to return to the same OakLeaf Clinic location for your second dose.

I want to get vaccinated at Mayo Clinic Health System

- Mayo Clinic Health System will notify its patients over age 65 when they are eligible to schedule their vaccine appointment. Please wait for your eligibility letter before you schedule your appointment.
- **Online for existing patients WITH a Patient Online Services account:** Watch for an email telling you that you can schedule an appointment. Once, you receive an email, go to Patient Online Services directly from that email to schedule your appointment online.
- **Online for existing patients WITHOUT a Patient Online Services account:** Watch for a mailed letter that will provide details on how to schedule your appointment over the phone. If you are interested in receiving your eligibility letter more quickly, create a Patient Online Services account by going to www.mayoclinichealthsystem.org/patient-online-services and select "create account".
- **New Patients:** Mayo Clinic Health System will be prioritizing existing patients at this time. Please check back to the above website for updates on when they may be able to accept non-patients.
- **Phone:** If you do not have internet access, please call to get a vaccine appointment. If you are an existing patient with Mayo Clinic Health System, call (715) 838-5437.
- **Important:** Your second dose will be 21 days after your first dose. Please plan to return to your Mayo Clinic Health System provider 21 days after your first dose.

Options beyond your healthcare provider

If you are a patient at another clinic or do not have a healthcare provider, please see the option below.

Eau Claire City-County Health Department

- **Online:** Sign up for an appointment at one of the next available clinics. New clinic dates will be added regularly here: bit.ly/covidvaccine-ec
- **Phone:** If you do not have internet access, please call the COVID-19 Call Center at (715) 831-7425 (leave a message and they will return your call) or the Aging & Disability Resource Center of Eau Claire County at 715-839-4735. Please be patient as we anticipate long wait-times.
- **Important:** Your second dose will be scheduled for 28 days after your first dose while you are at the Health Department clinic.

How to Get Ready for Your Appointment

- **Plan Ahead:** You will need to stay for up to 30 minutes after your vaccine to be sure you do not have an allergic reaction.
- **Be Informed:** You will be provided a factsheet about the vaccine that you will be given either before or at your appointment. Be sure to look over the information and ask any questions you have before you get your vaccine. Healthcare providers are required to give you this factsheet before your appointment.
- **Do a Self-Check:** You will be asked these five questions when you go to your vaccination appointment. If you answer “yes” to question #2, #3, or #4, please do not schedule a vaccination and talk to your doctor to find out if it is safe to be vaccinated.
 1. Are you generally feeling well today?
 2. Have you ever had an anaphylactic reaction (shock, a sudden and severe body reaction)?
 3. Have you had a severe allergic reaction to any vaccine, other injectable medication, or intravenous medication?
 4. Have you had a severe allergic reaction to any component of this brand of COVID-19 vaccine?
 5. Have you been previously diagnosed with COVID-19? (As long as you are recovered you can still get vaccinated)

Get Your COVID-19 Vaccine



The Eau Claire City-County Health Department is hosting two drive-through COVID-19 vaccination clinics. **Appointments are REQUIRED! No walk-ins.**



Drive-through Clinic Dates:

- Saturday, February 20th, 10am- Noon
- Saturday, February 27th, 10am- Noon



Where:

Augusta Bridge Creek Fire & Rescue Station,
745 Industrial Drive, Augusta, WI

*Access clinic entrance via Ted Anderson Dr. from Hwy 12. Follow the signs.

You are eligible to get the vaccine if:

- You are age 65 and older
- You work in: front line health care, direct patient care, police, fire, or EMS, or correctional personnel

How to sign up for an appointment






Online:

- February 20th Clinic: bit.ly/CovidVac22021
- February 27th Clinic: bit.ly/CovidVac22721



By Phone

- If you do not have internet access, please call the COVID-19 Call Center at 715-831-7425 (leave a message and they will return your call) or the Aging & Disability Resource Center of Eau Claire County at 715-839-4735.

-  Please arrive at your scheduled appointment time to help traffic flow.
-  Bring a completed consent form if possible. Pick up a copy at Augusta City Hall or Augusta, Fall Creek and Fairchild Post Offices.
-  Your second dose will be scheduled (for the same location) while you are at the clinic.



January 27, 2021 Board of Health Meeting

County Courthouse, Room G-302

The Board of Health convened in open session at 5:20 pm

The meeting was called to order by Mery Price

**Board Members Present
Quorum is reached**

Mery Price
Martha Nieman
Don Bodeau
True Vue
Martha Nieman
Jennifer Eddy
Emily Berge
Mark Kaeding (5:27pm)

**Board Members
Absent:**

Terry Miskulin

Staff Members Present:

Lieske Giese
Gina Holt (recorder)

Order of Agenda Request to pull items from Consent Agenda

- None made

Public Comment:

- None made

Thank you and recognition outgoing City-Appointment Board of Health Member: Elizabeth Spencer

- Recognized for 10 years of service on the Eau Claire City-County Board of Health.

Welcome and introduction new City-Appointed Board of Health Member: True Vue

- True Vue was introduced and welcomed.

COVID-19 Update

- COVID19 case numbers and vaccination rollout was discussed. Weekly COVID-19 vaccination meetings are being held with local providers and the Health Department. The first case of the variant COVID-19 was found in Eau Claire County.
- Board member question and answer:
 - Q-How many vaccines are being requested each week in Eau Claire County? The state currently does not have a jurisdictional report available, but it has been requested. It appears that around 1,200 vaccines per day on average are being given in our area. We have asked the state if there is a way to calculate how much vaccine can be expected weekly based on population size to allow for more effective planning. In some cases, providers have received less than half of the amount requested. For example, 300,000 requests were made to the state for vaccine this week, but the state only received 70,000 doses to distribute.
 - Q-How are the second doses prioritized? Locally it is set up so that the vaccinator automatically gets the second dose volume as a vaccinator. The available supply for a second dose is guaranteed at this time and will remain that way unless there would be a policy change at the state or federal level.
 - Q-Is there a time frame in which the second dose must be given for effectiveness? The recommendation is that it is given in close proximity to 4 weeks for Moderna and 3-weeks for Pfizer. It can be outside the window a bit, however, to build the best response receiving the

second dose within that scope is recommended. There is one dose vaccine on the horizon, when and if we get that is unknown.

Consent Agenda

- a. Approval of minutes from December 09, 2020 meeting
- b. Approval of minutes from January 12, 2021 Joint meeting between the Board of Health and Committee on Administration-
- c. Approve continuation of contractual agreement with the WI Department of Natural Resources (DNR) community water samples
- d. Approval of NARCAN Direct Grant

Motion to approve Consent Agenda: Marthan Nieman

2nd Motion: Jennifer Eddy

Motion Carried: Yes (unanimous vote)

Business Item

- a. Review and receive COVID-19 Public Health Expectations
 - This was based on a review of the data from November 2020 to present.
 - Discussion regarding what changes were made to the Expectations.
 - Board member question and answer:
 - Q-Is there any guidance to wear double face masks? Double masking is a newer discussion on the national level. The state has not made any specific recommendation. Multiple layers are better for protection.
 - Q-What kind of response have you received since the new expectations were updated? We have been asked is if people can find ways for activities to happen in a safe way is it allowable, and there is value in that. The volume of people does make a difference, but mitigation strategies are also very important.

Motion to review and receive COVID-19 Public Health Expectations as presented by Health Department staff: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

- b. Receive and Review Quarterly Financial Review
 - We always talk about the January report being odd because the end of year is not yet closed out. There are a lot of moving parts that will land over the course of the next two months.
 - Board member question and answer:
 - Q-Why were utilities budgeted for lower than it came in? We had a large group of people who needed phones primarily due to COVID work so most of the increase expense in that budget item came from the additions of cell phones.
 - Q-Is the fund balance listed a short-term parking place? Most of that will be set aside for certain COVID-19 costs in 2021.

Motion to review and receive Quarterly Financial Review as presented by Health Department Staff: Don Bodeau

2nd Motion: Emily Berge

Motion Carried: Yes (unanimous vote)

- c. Approval of 2020 Routes to Recovery Funding

- This is a retrospective approval, we talked about this funding, but were not sure of the exact amount that would be distributed and reimbursed specifically to our department. This was not confirmed until December. Funding was from the Department of Administration at the State level and distributed to local municipalities.
- This money is from expenses from March-November 2020. It was not built into the 2020 budget and we were not sure if we were going to receive it.

Motion to approve 2020 Routes to Recovery Funding as presented by Health

Department Staff: Emily Berge

2nd Motion: Martha Nieman

Motion Carried: Yes (unanimous vote)

d. Approval of 2020 CARES COVID-19 State of WI reallocations

- This is another example of 2020 adjustment. The board previously approved CARES funding and in December the State Health Department reallocated funds within this funding source. The overall additional funding is \$42,415.

Motion to approve 2020 CARES COVID-19 State of WI reallocations as presented by

Health Department Staff: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

e. Approval of Overdose to Action Community Prevention Grant-Opioid Prescription Pathway Project 2020 reallocation

- This is additive to our yearly funding. We will have a bigger budget with this reallocation.
- Staff continue working on COVID as well as their core public health division grants including this priority of overdose prevention.

Motion to approve Overdose to Action Community Prevention Grant-Opioid Prescription Pathway Project 2020 reallocation as presented by Health Department

Staff: Jennifer Eddy

2nd Motion: Emily Berge

Motion Carried: Yes (unanimous vote)

f. Approval of 2021-2022 Federal COVID Response Funding

- This is the start of new 2021 budget funding that was not known about when we did budget planning last fall.
- We are still waiting for more information regarding this funding as far as the scope and timing of funding.
- A large percentage of this will cover existing and future contract tracing costs and vaccination clinics.

Motion to approve 2021-2022 Federal COVID Response Funding as presented by

Health Department Staff: Martha Nieman

2nd Motion: Don Bodeau

Motion Carried: Yes (unanimous vote)

g. Approval of CDC 1815 Diabetes and Heart Disease Grant Medication Therapy Management funding

- This is one of the two Diabetes and Heart Disease grants that the Health Department works on. We were asked to participate with pharmacies regarding additional support that pharmacists can give around diabetes and heart disease. Only two sites were chosen in Wisconsin to pilot this program.

Motion to approve CDC 1815 Diabetes and Heart Disease Grant Medication Therapy Management Funding as presented by Health Department Staff: Martha Nieman
2nd Motion: Emily Berge
Motion Carried: Yes (unanimous vote)

h. Approval of additional 2021 allocation Family Foundations grant

- This is additional funding that is replacing what previously was a direct funded training/support amount. There are no change in actual local activities.

Motion to approve additional 2021 allocation Family Foundations grant as presented by Health Department Staff: Jennifer Eddy
2nd Motion: Martha Nieman
Motion Carried: Yes (unanimous vote)

i. Approval of 2021 State Division of Public Health Contracts

- Every year in January we bring forth to the board the repetitive grants received by the State Division of Public Health.
- We do receive grants and entities from other funding sources. Those will continue to be brought to the board on an individual level. We will also continue to bring to the BOH during the year any substantive changes to Division of Public Health Grants/Contracts.

Motion to approve 2021 State Division of Public Health Contracts- as presented by Health Department Staff: Don Bodeau
2nd Motion: Martha Nieman
Motion Carried: Yes (unanimous vote)

j. Approval of 2021 Health Department Director Performance Objectives

- The first objective is specifically around transition. We have two management positions that have announced their retirement. It will take a lot of work in transitioning.
- These priorities were shared and discussed with the management team.

Motion to approve 2021 Health Department Director Performance Objectives as presented by Health Department Staff: Emily Berge
2nd Motion: Jennifer Eddy
Motion Carried: Yes (unanimous vote)

Other policy and informational items from staff for the Board

- Director/Health Officer Report
 - The Community Health Assessment process is moving forward.
- Correspondence/Media
 - No discussion
- Face Covering Ordinance Update

- The City of Eau Claire and Eau Claire County are moving forward with ordinances that mirror each other. The County Board and City Council have both had a first reading. The ordinance is to be in place if the state order is no longer in place.
- d. Communicable Disease Taskforce Update
- There is representation from Eau Claire City Council, County Board, and The Eau Claire City-County Board of Health. A facilitator has been named for the project and the meetings are in the process of being set up. Meroy is coordinating with the leadership of the City Council and County Board.

Board member informational items

- a. Board of Health Advocacy/Policy –
- BOH/EC Healthy Communities January Legislative event report – note that the document in the packet was from last year’s event. Verbal update given
 - WPHA/WALHDAB Legislative Priorities
 - Multiple bills have moved forward in the last few weeks
 - Discussion on advocacy and reaching out to governing bodies and local entities.
 - COVID 19
 - State Biannual budget

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

- a. None requested

Next scheduled BOH meeting is February 24, 2021 at 5:15 p.m.

Meroy Price adjourned the meeting at 7: 13 p.m.

Fact Sheet –Board of Health Meeting 2/24/2020

Agenda Item 5.b

Scholarships/Stipends

The Eau Claire City-County Health Department has been offered the following stipends:

Agency/Individual	Description	Amount
Wisconsin WIC Association (WWA)	Stipend for Sarah Nix to attend the virtual National WIC Association National Policy Conference. This conference is an annual forum to highlight emergent and pressing WIC policy issues, promising practices in administer WIC services, and leadership skills to empower and sustain WIC advocacy at the local level.	\$285
Health Care Education and Training (HCET)	Recognizing that many in-person training opportunities have been cancelled or that public health professionals do not have the capacity to attend them during the COVID-19 pandemic, HCET is providing funding in the amount of \$400 for a representative of the Family Planning clinic to attend a virtual learning opportunity. The virtual learning opportunities include, but are not limited to the National Reproductive Health Conference and the Multicultural Maternal Mental Health Conference.	\$400

Budget Implications: Stipends in the amount of \$685.00.

Staff Recommendation: Accept stipends.

Board of Health Meeting 02/24/2021

Agenda Item 7.a

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

Staff Updates:

Dan Peterson, Environmental Health Specialist, is retiring after 35 years of service at the Eau Claire City-County Health Department. His last day in the office was February 19th- Dan will be missed!

Peter Speckman started January 11th as a new Environmental Health Specialist in our housing program. Peter is from Broadhead, WI and graduated from UW River Falls with a degree in Environmental Sciences. We are excited for to have Peter join our team!

Medication Safety PSA:

The overall target of this grant is to decrease prescription drug misuse among persons aged 12-25 through increased awareness and education along with decreased access to prescription drugs. Grant funds were used to contract with Stokes | Herzog Marketing and Consulting to develop a public service announcement in English, Spanish, and Hmong that is culturally appropriate to help prevent medication misuse. The video is located on the Alliance for Substance Abuse Prevention [website](#) and [social media](#).



Policy and Systems -Community Health Assessment Community meetings-

Eau Claire Healthy Communities is partnering on another Community Health Assessment with a broad group of partners. As you know, the community survey was recently sent out to a broad group of partners with response rate of around 2000 people in Eau Claire and Chippewa Counties completing the survey. This community perception data along with secondary data is being analyzed. Next, three prioritization meetings will be hosted in Eau Claire County in February in which the public will help determine the health focus areas based on data. We hope to have a broad community representation at these virtual meetings. The Chippewa and Eau Claire Community Health Assessment partners include Chippewa County Department of Public Health, Chippewa Health Improvement Partnership (CHIP), Eau Claire City-County Health Department, Eau Claire Healthy Communities, Marshfield Clinic, Mayo Clinic Health System, Sacred Heart Hospital, St. Joseph's Hospital, and United Way of the Greater Chippewa Valley.

Maples Neighborhood

Maples Neighborhood was previously identified as a small community facing difficult challenges. In 2017 the City of Eau Claire passed a public health-based housing code which addressed external and internal housing conditions and is enforced within the Housing Program at the Eau Claire City-County Health Department. The housing staff have been working with local partners to reduce potentially unsafe and unhealthy housing in Eau Claire through this program including at Maples Mobile Home Park Neighborhood. Some of the challenges at this location included outdated and dilapidated housing with real structural concerns, overcrowding causing the Fire Department to not have safe access in an emergency, deteriorated and outdated sewer and electrical systems, excessive police contacts, and general neglect from ownership. At the same time, this neighborhood provided a location where many in Eau Claire who otherwise had no access to housing could have some sort of housing available. The population in this neighborhood had many barriers to successfully transition to safer housing. A joint task force with members from the Health Department, Department of Human Services, Building Inspection, Fire Department, City Attorney's office, along with input from JONAH, City Council member Berge, Representative Emerson, and Senator Jeff Smith worked together to support a safe transition of residents to affordable housing. Maples neighborhood had 25 occupied residents to begin 2020, but due to health and safety conditions the number of units were reduced throughout the year. Ultimately the park was sold in October 2020 to Farrell Company (adjacent business to the park), and by February 2021 all homes were removed, the lot cleaned up, health and safety conditions concerns abated and the park is no longer in business. The Health Department worked with the partners named above to find alternative housing to residents who were displaced.

Regency Inn

In December 2020 the Eau Claire Attorney's Office filed a suit to close Regency Inn and Suites due to crime and safety reasons documented by the Eau Claire Police Department. This is a facility that the Health Department has licensed. The Health Department is working with city inspectors, fire department and police department to do a joint inspection of the property later in February. The purpose of the inspection is to thoroughly assess the condition of the property so decisions regarding the future of the property will be informed. The current litigation is focused on criminal problems at the property which may necessitate closing the hotel. The property owner and City of Eau Claire are looking at potential redevelopment options, and a thorough inspection will help inform what uses the property can support.

Events in 2021

Regulation and Licensing staff are working with event organizers who are planning events for this spring, summer and fall. Staff are in the final stages of creating an events guidance worksheet that will help organizers walk through basic public health mitigation strategies to hold a safer event due to COVID-19. This worksheet will be shared with event organizers to fill out and meet with the health department to consult on mitigation strategies and current Community Expectations and data. Some events have met with the Health Department to discuss preliminary plans and will continue to meet regularly to reassess the current COVID-19 situation and expectations. We will work with organizers to consider where disease spread, and vaccine uptake will be at the time of these events. The Health Department will ask that groups follow the most current guidelines and work with the Health Department to meet those guidelines. We will not be approving events, but as some events move forward we will provide the best recommendations for providing the safest event possible.

Board of Health Meeting 2/24/2021

Agenda Item 7.B

January 2021 Media Contacts

INTERVIEW

1/5/2021	Title: Wisconsin COVID-19 vaccine distribution still in Phase 1A Link: https://www.weau.com/2021/01/06/wisconsin-covid-19-vaccine-distribution-still-in-phase-1a/	Topic: Communicable Disease Staff: Allison Gosbin
1/6/2021	Title: All health workers encouraged to get COVID vaccine Link: https://wqow.com/2021/01/06/all-health-workers-encouraged-to-get-covid-vaccine/	Topic: Communicable Disease Staff: Audrey Boerner
1/6/2021	Title: Wisconsin avoids new COVID-19 strain so far; variant could stress hospitals, public health Link: NOT AVAILABLE	Topic: Communicable Disease Staff: Audrey Boerner
1/7/2021	Title: As Wisconsin Passes 5,000 Deaths, Health Officials Warn GOP Bill Could Kill Even More People Link: https://upnorthnewswi.com/2021/01/07/as-wisconsin-passes-5000-deaths-health-officials-warn-gop-bill-could-kill-even-more-people/	Topic: Communicable Disease Staff: Lieske Giese
1/11/2021	Title: Police and firefighters may soon get COVID-19 vaccine Link: https://www.weau.com/2021/01/12/police-and-firefighters-may-soon-get-covid-19-vaccine/	Topic: Communicable Disease Staff: Audrey Boerner
1/13/2021	Title: New COVID-19 strain, believed to spread more easily, found in Eau Claire County Link: https://www.jsonline.com/story/news/local/milwaukee/2021/01/13/covid-19-strain-circulating-england-believed-spread-more-easily-found-wisconsin/6655537002/	Topic: Communicable Disease Staff: Lieske Giese
1/13/2021	Title: Eau Claire City-County Health Dept. director gets COVID-19 vaccine Link: https://www.weau.com/2021/01/14/eau-claire-city-county-health-dept-director-gets-covid-19-vaccine/	Topic: Communicable Disease Staff: Lieske Giese
1/13/2021	Title: Vaccinations roll on as first virus variant found in EC County Link: https://www.leadertelegram.com/covid-19/vaccinations-roll-on-as-first-virus-variant-found-in-ec-county/article_6a6d6d73-4287-5c19-adeb-a22f08ac8cda.html	Topic: Communicable Disease Staff: Lieske Giese

1/14/2021	Title: First Wisconsin documented case of new COVID-19 strain found in Eau Claire County	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.news8000.com/first-wisconsin-documented-case-of-new-covid-19-strain-found-in-eau-claire-county/	
1/20/2021	Title: UWEC Nursing Students Volunteer at COVID-19 clinic	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://www.weau.com/2021/01/21/uwec-nursing-students-volunteer-at-covid-19-vaccine-clinics/	
1/20/2021	Title: Wisconsin residents 65 and older next in line to receive COVID-19 vaccine	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2021/01/20/wisconsin-residents-65-and-older-next-in-line-to-receive-covid-19-vaccine/	
1/20/2021	Title: How long it could take to vaccinate those 65+ in Eau Claire County	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2021/01/19/how-long-it-could-take-to-vaccinate-those-65-in-eau-claire-county/	
1/21/2021	Title: 'Light at the end of the tunnel': Seniors next in line for COVID-19 vaccines	Topic: Communicable Disease Staff: Audrey Boerner
	Link: NOT AVAILABLE	
1/25/2021	Title: Health officials ask for caution even after getting vaccine	Topic: Communicable Disease Staff: Allison Gosbin
	Link: https://wqow.com/2021/01/25/health-officials-ask-for-caution-even-after-getting-vaccine/	
1/26/2021	Title: Are two masks better than one? Local health professionals weigh-in	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2021/01/26/are-two-masks-better-than-one-local-health-weighs-in/	
1/27/2021	Title: Is more contact tracing available as COVID cases decline?	Topic: Communicable Disease Staff: Leeshia Crayton
	Link: https://wqow.com/2021/01/27/is-more-contact-tracing-available-as-covid-cases-decline/	
1/27/2021	Title: CDC study: In-person classes are safe — with plenty of precautions	Topic: Communicable Disease Staff: Gretchen Sampson
	Link: https://www.leadertelegram.com/covid-19/cdc-study-in-person-classes-are-safe-with-plenty-of-precautions/article_6ef141ae-fd81-52a7-84eb-a491646270fc.html	

PRINT ARTICLE

1/1/2021	Title: Radon	Topic: Healthy Homes and Places Staff: Lizzy Paulson
	Link: Not Available	
1/1/2021	Title: Radon	Topic: Healthy Homes and Places Staff: Lizzy Paulson
	Link: Not Available	
1/4/2021	Title: Fit Families Newsletter	Topic: Chronic Disease Prevention Staff: Alexis Tuma
	Link: Not Available	
1/4/2021	Title: Fit Families Newsletter	Topic: Chronic Disease Prevention Staff: Alexis Tuma
	Link: Not Available	
1/4/2021	Title: Fit Families Newsletter	Topic: Chronic Disease Prevention Staff: Alexis Tuma
	Link: Not Available	



Eau Claire City-County
Health Department

Service Recognition Certificate

In appreciation of your 35 years of dedicated service and expertise in environmental health, as well as your continued support to countless other Health Department programs and services.

This certificate is presented to

Dan Peterson

Environmental Health Specialist

Signature Director/Health Officer

Date

Signature President, Board of Health

Date

Information Sheet – 02/24/2021 Board of Health Meeting

Agenda Item 7.d

Health Department Review of Board of Health Action in 2020

The Eau Claire City County Health Department Management Team, along with Gina Holt, staff support to the Board of Health (BOH), annually reviews the BOH activities to identify patterns of issues discussed, opinions of the board members, and positions that the BOH has taken in the previous year (see attached Year in Review document). This is done in order to continue to build a strong relationship with the BOH and to improve the effectiveness of meetings and interactions between the department and the Board. Of note during the discussion of 2020 were the strengths seen in the BOH pivoting with COVID-19 impacting every aspect of their governing functions. The main things identified to work on in 2020 during this review and discussion were identification of potential informational presentations and orientation and recruitment of future board members.

The Eau Claire City County Health Department takes seriously the importance of engaging with and understanding the Board of Health as its governing body. The annual review of the BOH activities, opinions, and positions that is done by the Management Team provides an opportunity to do a check in that highlight's areas and issues where communication and connections can be strengthened. Additionally, it helps show we are meeting part of accreditation requirements, specifically measure 12.3.2, listed below.

- **Purpose:** The purpose of this measure is to assess the health department's familiarity and awareness of the governing entity's actions in order for the health department to identify patterns of issues discussed and topics or areas that call for increased communication and information.
- **Significance:** It is important that the health department understand the priorities, policy positions, opinions, and actions of the governing entity in order to continually improve communication and effectiveness leading to a quality governing entity-health department relationship

This year the board faced many new challenges. Face to face meetings were replaced with online meetings. Content of the board meetings prompted an increase in community participation through public comment. At times there were protestors outside of the Courthouse Building during Board meetings. Board of Health President, Merey Price, worked countless hours on ordinance and mask mandate committees. In reviewing BOH action there was noted a continued focus on state and local policy and making data informed decisions.

2020 also brought board membership changes. Terry Miskulin began serving as the Board of Health Vice President in January 2021. Mark Kaeding began his first term. Long time Board of Health member Liz Spencer was unable to renew another term as the City had enforced a two-term limit. True Vue began her first term as a result of that opening.

The Health Department continues to be appreciative to have such an incredibly supportive Board of Health.

Measure 12.3.2.A-Actions taken by the governing entity tracked and reviewed

Purpose: The purpose of this measure is to assess the health department’s familiarity and awareness of the governing entity’s actions in order for the health department to identify patterns of issues discussed and topics or areas that call for increased communication and information.

Significance: It is important that the health department understand the priorities, policy positions, opinions, and actions of the governing entity in order to continually improve communication and effectiveness leading to a quality governing entity-health department relationship

2020 Signed Resolutions and Policies

Date:	Resolution/Policy	Notes
2/26/2020	Board of Health Priorities and Actions approved	
4/22/2020	Remote meetings	Created due to pandemic
4/22/2020	Public Health Week Proclamation	
5/27/2020	Board of Health Chapter 7 Communicable Disease	
06/24/2020	Recommend approval of the County Board Racism as a Public Health Crisis/Racial Equity declaration	
6/24/2020	Recommend approval of revisions to the City Clean Air Ordinance	
7/22/2020	Recommend approval of the Counties Comprehensive Plan	
7/22/2020	Recommend support for the County’s Clean Water Resolution	
7/22/2020	Approved health department fee deviation policy update	
8/26/2020	Resolution 20-1 Adopting Fees for Retail Food Establishments and Mobile Food Processing Facilities	
8/26/2020	Resolution 20-2 Adopting fees for Swimming Pools and Recreational Facilities	
8/26/2020	Resolution 20-3 Adopting fees for Bed and Breakfast Establishments, Motels-Hotels and Tourist Rooming Houses	
8/26/2020	Resolution 20-4 Adopting fees for Body Art Facilities	
8/26/2020	Resolution 20-5 Adopting fees for Manufactured Home Communities	
9/14/2020	Recommend input to City/County regarding Communicable Disease ordinance	
12/08/2020	2020-2024 Board of Health Priorities	
5/27/2020	COVID Prevention and Control Order	
5/27/2020	COVID 19 Situational update and review of Plan	
6/24/2020	Snapshot of COVID 19 expense and revenue	
6/24/2020	COVID Prevention and Control Order	
7/22/2020	COVID Prevention and Control Order	

8/26/2020	COVID Prevention and Control Order	Several Public Comments Received
8/26/2020	Wisconsin Counties Association Update	
9/14/2020	Communicable Disease Ordinance Input	Several Public Comments Received
9/23/2020	COVID Prevention and Control Order	Several Public Comments Received
10/28/2020	COVID Prevention and Control Order	
10/28/2020	COVID Public Health Expectations	
12/08/2020	COVID Public Health Expectations	

Advocacy, Education, etc.

Date:	Topic or example	Notes
1/22/2020	Board of Health Priorities and Actions discussion	
1/22/2020	Legislative grid reviewed and discussed	
1/22/2020	140 Review Discussion after December visit	
2/26/2020	Board of Health Priorities and Actions approved	
2/26/2020	Legislative grid reviewed and discussed	
2/26/2020	Talking Points/hot topics from WAHL DAB distributed and discussed	
2/26/2020	Discussion on possible local ordinance for clean air	
2/26/2020	Education opportunities for board members shared- NALBOH and WPHA Conferences	

- Participated as BOH members in WI Public Health Association/WALHDAB Public Affairs Committee, Participation in Eau Claire County Ground Water Advisory Committee, State of the Chippewa Valley event, Communicable Disease Ordinance Team, Mask Mandate Committee, and attendance and participation in Legislative event.

2020 Updates from Agenda (not including Director Report updates)

- Annual Report-June
- Budget-June, July, August, September, October, December
- Community Health Assessment-discussed and link to participate shared at several meetings
- Pay Plan-July
- Director Performance objectives and Planning- January
- Employee Handbook-July
- Fund Balance Allocation-July
- Health Department Review of Board of Health Action- February
- Healthy Communities Update-January, May, July, October
- Performance Management/Measures Update- February
- PHAB Accreditation Update-July
- Strategic Plan-January, May, July
- Fiscal Year End Report -May



Information Sheet – 02/24/2021 Board of Health Meeting**Agenda Item 7.f****Performance Measures Update –2020 End of Year**

The Eau Claire City-County Health Department believes that measuring agency performance and managing that performance through a deliberate and strategic process leads to improved organizational operations and ultimately improved community health. Efficiency and effectiveness are critical in programs and services. The Performance Measurement and Management plan is a key part of overall organizational operations and includes a focus on identifying strategic areas to measure, identifying standards, measuring against those standards, doing Quality Improvement to improve in areas that need improvement and reporting on results. This work aligns with our Strategic Plan guiding principles of being Data Informed.

In 2020, with COVID-19 response, there were considerable impacts on the overall performance measures. While generally many of the measures continue to show strong outcomes, this year is an unusual pause in our typical performance related to the broad range of critical work done by our department. All parts of the department contributed to the successful response to COVID-19 in Eau Claire and our primary success was related to responding to this crisis.

We will again this year continue to review areas of strength and areas identified for improvement in the upcoming year.

#1 HEALTHY HOMES AND PLACES	Budget \$604,371	Levy \$318,455		FTEs 5.72				
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The Healthy Homes and Places Program is designed to create safe environments in our community where people can live, work, and play. This program consists of services that include inspections, complaint investigations, and outreach initiatives to respond to and reduce harm from risks ranging from lead, radon and mold to natural disasters and environmental emergencies. Place plays a vital role in our health.

OUTPUTS

<i>*inspections include pre-inspections, routine inspections, re-inspections, second inspections, onsite visits, and complaint investigations unless otherwise noted.</i>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
# of radon consultations/calls	334	250	214	293	354	112	171	208
# of housing consultations/calls	2306	1902	1567	1335	1353	2325	2418	2171
# of Housing complaint inspections:	903	456	619	522	276	283	208	171
# of health department initiated inspections and reinspections:	406	773	732	508	537	1265	1054	671
# of Mobile Home Park inspections:	33	17	17	28	17	19	17	16
# of body art inspections:	New measure 2015	New measure 2015	38	28	23	32	30	17
# of campground inspections including special event campgrounds:	New measure 2015	New measure 2015	15	16	22	20	21	17
# of blood lead screening tests done	728	589	612	490	505	461	430	101
# of radon tests completed	151	150	226	212	243	172	200	164
# of responses to public health threats (environmental)	New measure 2016	New measure 2016	New measure 2016	9	19	7	15	20
# of residences placarded as unfit for habitation	26	26	20	32	24	34	49	30
# of press releases, print articles, interviews on Healthy Homes and Places	New measure 2016	New measure 2016	New measure 2016	4	3,6,15	8,6,8	5,5,7	1,3,0
# of Facebook posts on Healthy Homes and Places	New measure 2016	New measure 2016	New measure 2016	36	24	18	33	1
# of interdisciplinary meetings to resolve human health hazard	4	3	3	4	13	5	6	0

Performance Goal	Outcome Measures	Benchmark	2014	2015	2016	2017	2018	2019	2020
Decrease injury/hospitalization related to environmental factors	% of housing complaints investigated	100%	100%	100%	100%	100%	100%	100%	100%
	% of children with >5 mcg/dl bl lead that was brought below 5 within 6 months	100%	New measure 2016	New measure 2016	0%	80%	71%	25%	75%
	% of licensed facilities inspected	100%	100%	100%	100%	100%	100%	100%	0%
	% of placarded households resolved	75%	New measure 2016	New measure 2016	19%	57%	56%	61%	60%
	% of total full housing inspections with violations in 3 or less categories	80%	New measure 2018	New measure 2018	New measure 2018	New measure 2018	17%	24%	10%
	% of unsafe radon test that are provided education	100%	100%	100%	100%	100%	100%	100%	100%

#2 SAFE FOOD AND WATER	Budget \$ 1,206,926	Levy \$ 453,954		FTEs 11.33					
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The Safe Food and Water program assures that residents and travelers will have their health protected when using recreational facilities and restaurants in our community. Services include investigating complaints, inspecting all facilities that provide food and water to the public, testing of private drinking water, and assisting the public in reducing risks of food and waterborne illness. This is important because safe food and water are integral to our health.

OUTPUTS

<i>*inspections includes pre-inspections, routine inspections, re-inspections, second inspections, onsite visits, compliant investigations, and follow up</i>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	
# of Restaurant inspections:	810	708	948	1009	893	971	939	423	
# of Retail Food inspections:	182	270	319	270	256	288	311	184	
# of School inspections:	67	68	64	70	53	56	65	57	
# food service samples (food products, swabs, utensils, etc) analyzed:	New measure 2016	New measure 2016	New measure 2016	1299	2014	1366	1216	421	
# of Foodborne Illness Investigations:	12	9	2	20	21	15	27	11	
# of private onsite wastewater treatment systems inspections/consultations:	2321	1165	2469	1612	2065	1821	1781	2115	
# of water samples (ground and surface) processed/analyzed	2290	1642	3663	3344	3199	3267	3219	2827	
# of recreational water (pools and beaches) investigations/inspections/consultations	1333	1360	1423	1434	1454	1449	1365	989	
# of well locations permits issued (new and replacement):	94	64	110	98	126	117	124	168	
# of Facebook posts on Safe Food and Water	New measure 2016	New measure 2016	New measure 2016	49	44	22	24	0	
# of press releases, print articles, interviews on Safe Food and Water	New measure 2016	New measure 2016	New measure 2016	7	4,10,9	5,4,11	3,10,1	13,2,2	
Performance Goal	Outcome Measures	Benchmark	2014	2015	2016	2017	2018	2019	2020
Decrease incidence of food and water borne disease outbreaks and fatalities	% of owners with unhealthy well samples results who receive education and technical assistance	100%	100%	100%	100%	100%	100%	100%	100%
	% of public wells with uncorrected deficiencies	0%	0%	0%	0%	0%	0%	1%	0%
	% of recreational water inspections with 2 or less violations	90%	New measure 2016	New measure 2016	71%	51%	38%	*	*
	90% of restaurant priority violations corrected at the time of inspection or first reinspection	90%	New measure 2016	New measure 2016	68%	81%	79%	*	*

#3 HEALTHY GROWTH AND DEVELOPMENT	Budget	Levy		FTEs				
	\$ 1,900,872	\$ 1,218,629		20.96				

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

OUTPUTS								
<i>(YTD column = Jan-Jun results)</i>	2013	2014	2015	2016	2017	2018	2019	2020
# of clients\visits receiving reproductive health/contraception services:	938	891	992	936	636/1030	632/1026	626/1129	406/804*
# of WIC clients	3419	3271	3114	2928	2727	2582	2310	2268
# of Nurse Family Partnership clients	New measure 2016	New measure 2016	New measure 2016	3	63	161	200	158
# of Nurse Family Partnership visits	New measure 2016	New measure 2016	New measure 2016	243	722	1211	1520	1069
# of MCH clients\visits	1712 visits	1882 visits	1373 visits	425/992	367/821	285/648	227/509	222/432
# of pregnancy tests administered	263	188	171	155	214	147	75	72
# of child vision/hearing screening completed	5937	6195	5892	4735	6011	4823	4,716	*
# of adolescents trained in evidence based program	New measure 2016	New measure 2016	New measure 2016	50	192	249	213	32
# of people/agencies who received Safe Sleep training (education and supplies)	New measure 2016	New measure 2016	New measure 2016	17	48/2	0	18	19
# of Facebook post on Healthy Growth and Development	New measure 2016	New measure 2016	New measure 2016	86	82	46	36	1
# of press releases, print article, interviews on Healthy Growth and Development	New measure 2016	New measure 2016	New measure 2016	23	4,10,9	8,3,8	4,3,1	0,1,1
# of collaborative community meetings on Healthy Growth and Development	New measure 2016	New measure 2016	New measure 2016	41	117	107	71	43

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Decrease unplanned pregnancies	% negative pregnancy tests who receive birth control method	95%	New measure 2016	New measure 2016	65%	66.3%	58.9%	62.5%	*
Increase healthy birth outcomes	% of Women who had a positive pregnancy test in FPC referred to WIC/PNCC	80%	New measure 2016	New measure 2016	59%	72.2%	73.9%	60.0%	*
	%WIC clients enrolled in 1st trimester	39%	38%	33%	33%	30%	29%	33.0%	39.0%
Increase early childhood health/healthy start to life	% of WIC breastfeeding incidence	73%	77%	78%	79%	79%	76%	79%	81%
	% of WIC clients received recommended nutrition education contact	60%	45%	51%	57%	63%	65%	67%	39%
	% of clients with medical home in first trimester	83%	79%	73%	83%	80%	73%	81%	78%

#4 COMMUNICABLE DISEASE	Budget \$ 873,341	Levy \$ 345,542		FTEs 8.17				
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The Communicable Disease program is focused on preventing diseases that spread from person to person, animal to person, and environment to person. These services include community and healthcare provider education, preventive medicine distribution, vaccination, disease testing, environmental monitoring and disease outbreak investigation and prevention. This program is important in decreasing illness and death rates in our community.

OUTPUTS

<i>(YTD column = Jan-Jun results)</i>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
# of animal bite/exposures reports received:	192	166	156	167	156	143	161	120
# of immunizations administered during the year:	887	1,556	1,466	1570	1523	1950	2165	1070
# of seasonal flu shots administered during the year:	457	982	1,027	739	664	982	1031	616
# of outbreaks in nursing homes reported	New measure 2016	New measure 2016	New measure 2016	11	10	12	10	15
# of clients screened for sexually transmitted infection:	550	452	657	489	558	799	727	556
# of newly diagnosed cases chlamydia	New measure 2016	New measure 2016	New measure 2016	512	507	513	468	369
# of communicable disease reports	New measure 2016	New measure 2016	New measure 2016	935	1137	1389	1183	10,574
# of HIV Partner Service client referrals	New measure 2016	New measure 2016	New measure 2016	10	17	17	16	16
# of responses to public health threats (communicable disease)	New measure 2016	New measure 2016	New measure 2016	11	29	19	17	169
# of Facebook posts on communicable diseases	New measure 2016	New measure 2016	New measure 2016	46	60	36	31	4
# of press releases, print articles, interviews stories on communicable disease	New measure 2016	New measure 2016	New measure 2016	55	12,22,31	16,13,20	13,19,30	50,44,171

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Decrease vaccine preventable diseases	% of 2 year olds who received the recommended vaccinations	85%	77%	79%	77%	77%	75%	78%	74%
	% of adolescents 11-26 who received the HPV vaccination	35%	New measure 2016	New measure 2016	30%	36%	37%	39%	45%
	% of school age children fully immunized	95%	92%	87%	92%	87%	87%	91%	have not be
	% of those greater than 6 months old vaccinated for influenza	40%	New measure 2016	New measure 2016	30%	29%	31%	31%	37%
Decrease reportable communicable diseases	% animal bites/exposures receiving follow up	100%	100%	100%	100%	100%	100%	100%	100%
	% of communicable disease investigations completed	100%	100%	100%	100%	100%	100%	100%	100%
	% staff trained in public health emergency Incident Command System	100%	New measure 2016	New measure 2016	66%	63%	62%	60%	65%
Decrease STIs and communicable diseases	% STIs receiving treatment	98%	New measure 2016	New measure 2016	100%	99%	99%	99%	100%

#5 CHRONIC DISEASE PREVENTION	Budget \$ 422,236	Levy \$ 343,317		FTEs 5.08				
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The Chronic Disease Prevention Program consists of programs and policy work to prevent or reduce the effects of chronic diseases such as diabetes, heart disease, and lung cancer. These services include nutrition education and cancer screening. Additional work in this program includes policy and organizational changes to increase access to healthy foods and create a healthy built environment for all. This program is important because chronic disease is one of the leading causes of death in our community - chronic disease/obesity have been identified as a priority in the two most recent community health assessments.

OUTPUTS									
	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	
# of Farmers' Market Nutrition Education contacts	New measure 2019	New measure 2019		New measure 2019	New measure 2019	New measure 2019	2863	NA	
# of Wisconsin Well Women Program (WWWP) Clients cases	New measure 2016	New measure 2016	New measure 2016	33	32	19	26	30	
# of Facebook posts on Chronic Disease Prevention	New measure 2016	New measure 2016	New measure 2016	53	20	28	39	5	
# of press release, print articles, interviews on Chronic Disease Prevention	New measure 2016	New measure 2016	New measure 2016	30	9,18,10	8,26,14	14,39,23	3,25,2	
# of collaborative community meetings on Chronic Disease Prevention	8CD/11OH	12CD/8OH	12CD/11OH	12CD/11OH	28	22	24	8	
<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020 Q1</u>
Decrease obesity	% of WIC farmers market vouchers redeemed	43%	50%	43%	41%	43%	47%	48%	44%
	% of WIC children at a healthy weight	65%	64%	66%	65%	64%	61%	65%	16%
	% of adults (age 20 and older) that report a BMI greater than or equal to 30	31%	29%	31%	32%	29%	28%	28%	31%
Decrease chronic disease and cancers	% of WWWP eligible women received screening for cervical cancer through WWWP	50%	New measure 2016	New measure 2016	16%	33%	6%	42%	57%
	% of WWWP eligible women 50-64 who received mammograms through WWWP	75%	New measure 2016	New measure 2016	43%	62%	65%	64%	78%
	% of adults (age 20 and older) with diagnosed diabetes	9%	7%	7%	8%	8%	7%	8%	9%
	Coronary heart disease hospitalization rate per 1,000 population	2.8	4	3	3	2	N/A	2.5	2.8
	Cerebrovascular disease hospitalizations rate per 1,000 population	2.5	2	3	2	2	N/A	2.3	2.3
Increase physical activity	% of WIC children with less than 2 hours of screen time daily	75%	65%	69%	60%	58%	70%	67%	66%
	% of adults (age 20 and older) reporting no leisure-time physical activity	20%	23%	22%	21%	17%	18%	16%	20%

	% of population with adequate access to locations for physical activity	86%	68%	69%	67%	67%	81%	83%	81%
Increase access to healthy foods	% of population who lack adequate access to food	11%	12%	13%	13%	13%	12%	12%	11%
	% of population who are low-income and do not live close to a grocery store	5%	8%	8%	8%	8%	6%	6%	6%

#6 Healthy Living and Prevention	Budget \$ 376,064	Levy \$ 192,303		FTEs 5.87				
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The Healthy Living and Prevention Program works to develop a community that fosters the promotion and awareness of mental well-being and addresses the inappropriate consumption and negative health effects of alcohol, tobacco, and other drugs. Services include youth programming, policy change, compliance checks, community collaboration and education. This program is important to improving the lives of children, youth, and adults by mobilizing communities to prevent mental illness and substance abuse. Both mental health and substance misuse have been identified in our community health assessment as top needs in our community.

OUTPUTS								
<i>(YTD column = Jan-Jun results)</i>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
# of youth involved with Life of an Athlete/ SADD	62	80	160	44	50	49	41	41
# of people trained related to mental health:								
QPR	New measure 2016	New measure 2016	New measure 2016	659 adults/265 adol.	557 adults/542y outh	159/973	220/1036	19/349
ACEs/ Resiliency	New measure 2019	New measure 2019	New measure 2019	New measure 2019	New measure 2019	New measure 2019	544	1
Mindfulness	New measure 2019	New measure 2019	New measure 2019	New measure 2019	New measure 2019	New measure 2019	30	0
# of alcohol compliance checks	91	56	80	83	42	62	63	0
# of tobacco compliance checks	36	62	59	62	62	63	38	21
# referrals to 1st Breath	New measure 2016	New measure 2016	New measure 2016	21	27	18	18	11
# of Facebook posts on Mental Health/Substance use	New measure 2016	New measure 2016	New measure 2016	97	171	68	69	3
# of press releases, print articles, interviews on Mental Health/Substance use	New measure 2016	New measure 2016	New measure 2016	25	15,40,36	15,23,41	21,18,34	2,7,6
# of collaborative community meetings focused on mental health	7	10	11	27	27	82	60	44
# of collaborative community meetings focused on alcohol misuse prevention	New measure 2016	New measure 2016	New measure 2016	16	16	26	23	9

<u>Performance Goal</u>	<u>Outcome Measures</u>	<u>Benchmark</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020 Q1</u>
Decrease underage retail access to alcohol and tobacco products	% of licensed establishments who don't sell to minors during tobacco compliance	100%	90%	90%	90%	93.5%	90.0%	95.0%	100.0%
	% of licensed establishments who don't sell alcohol to underagers during compliance	100%	84%	75%	90%	95.2%	88.7%	85.0%	*
Decrease misuse of tobacco, alcohol and other substances	% of births where mother reports smoking during pregnancy	10%	17%	16%	16%	14%	14%	14%	9%
	% of adults reporting binge or heavy drinking	20%	24%	24%	25%	27%	25%	25%	27%
	% of youth after SADD training who feel confident to create an accurate and valid activism targeted at youth risk behavior	90%	New measure 2019	New measure 2019	New measure 2019	New measure 2019	New measure 2019	100%	NA
Decrease suicide rates	% of adults who "strongly agree" or "agree" that they are able to help prevent suicide in their community after QPR training	90%	New measure 2016	New measure 2016	84%	90.6%	92.1%	94.5%	100.0%
	% of youth after QPR program who feel "quite a bit prepared" or "very prepared" to ask the suicide question if needed	80%	New measure 2016	New measure 2016	86%	83.4%	83.1%	81.2%	80.8%

Fact Sheet 02/24/2021–Board of Health Meeting

Agenda Item 7.g

Eau Claire Healthy Communities Update

Some Action Teams have continued web-based meetings and other teams have continued to cancel meetings. All Action Teams are working on posts for social media.

Eau Claire Healthy Communities is working on the third shared Community Health Assessment with a core group of Eau Claire and Chippewa County partners. The community survey was recently sent out to a broad group of partners with response rate of around 2000 people in Eau Claire and Chippewa Counties completing the survey. This community perception data along with secondary data is being analyzed. The second week of February three prioritization meetings were hosted in Eau Claire County in which the public will help determine the health focus areas based on data. We had broad community representation at these virtual meetings. The final Community Health Assessment report will be available in May of this year.

Healthy Communities Council – Met virtually in November to learn more about what the Mental Health Team in the COVID-19 Incident Command structure is doing. There were many ideas shared about how to promote mental wellness in our community. In January, the Council met virtually and had a presentation from Dr. Ken Johnson of Prevea Health and Marisa Stanley about the COVID-19 vaccine and how the vaccine will roll out in our community.

Healthy Relationship Promotion Action Team - HRPAT has been working on grant objectives for the Sexual Violence Prevention grant. They've also been busy creating social media posts. For February, they have a social media campaign, #RelationshipGoals, for community members to post a picture of yourself and what makes your relationship healthy with your family, friends, co-workers, pets, or yourself.

Chronic Disease Prevention Action Team – Has been partnering with Wintermission/Visit Eau Claire and other partners to create several social media challenges over the past few months. Examples include: [Plan your Perfect Eau Claire Afternoon](#), [Hygge Challenge](#) promoting coziness during winter, and a colorful [Snow Sculpture Challenge](#). In March the team is challenging the community to put their luck to the test and follow the rainbow to the pot of gold on the St. Patrick's Day-themed scavenger hunt, Good as Gold. This scavenger hunt will bring people on twists and turns through eight Eau Claire parks, searching for leprechauns, gold coins, lucky dice, and more!




High-Risk Drinking Prevention Action Team- Has not been meeting. Plans to meet in April/May of 2021.

Oral Health Promotion Action Team- Has not been meeting.

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





**EAU CLAIRE COUNTY
COMMUNITY
CONVERSATION**

2020-2021 Community Health Assessment

1

**COMMUNITY HEALTH ASSESSMENT
PLANNING PARTNERSHIP**

- Eau Claire City-County Health Department
- Eau Claire Healthy Communities
- Chippewa County Department of Public Health
- Chippewa Health Improvement Partnership
- Marshfield Clinic Health System
- Mayo Clinic Health System
- HSHS Sacred Heart Hospital
- HSHS St. Joseph's Hospital
- United Way of the Greater Chippewa Valley



2


AGENDA

- **Data Review**
 - Community Health Survey
 - Local/State/National Health Comparisons
- **Breakout Rooms**
 - Health Impacts and Prioritization Discussion
- **Time to Vote**
 - Top 3 Areas of Focus
- **Next Steps**
- **Evaluation**

3

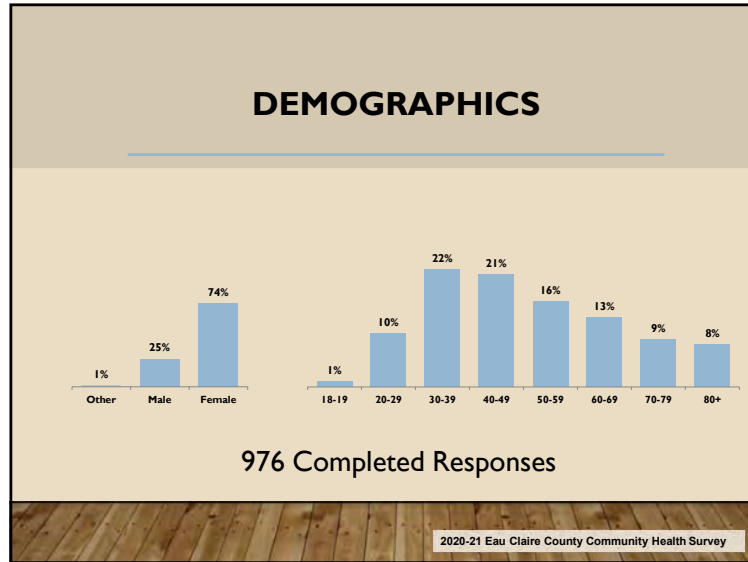
**COMMUNITY HEALTH SURVEY
AND LOCAL DATA**

A few things to keep in mind:

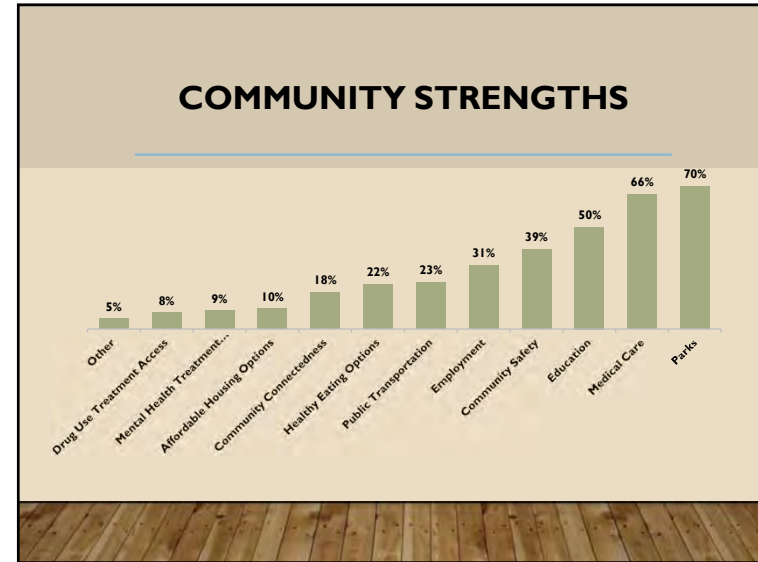


- Not a truly random sample
- Not all survey respondents answered all questions
- Local health data is most recent – but not “today”
 - Has anything changed since then?
- These are just a few measures. What else do we know?

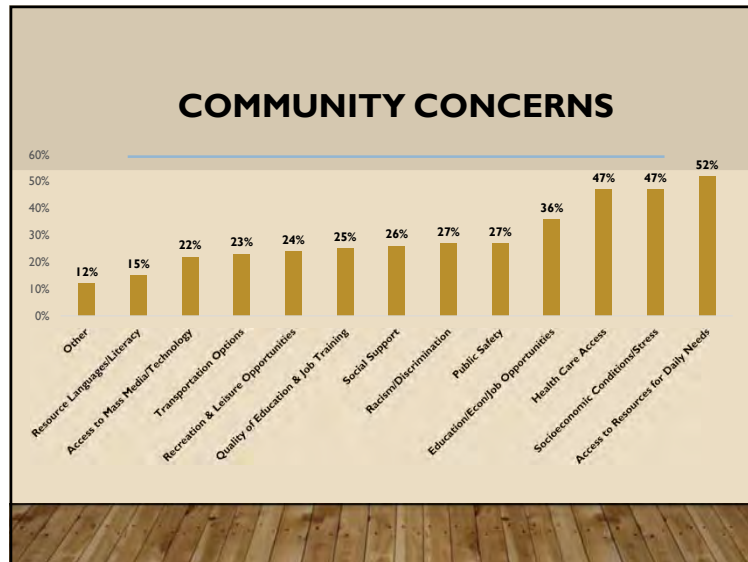
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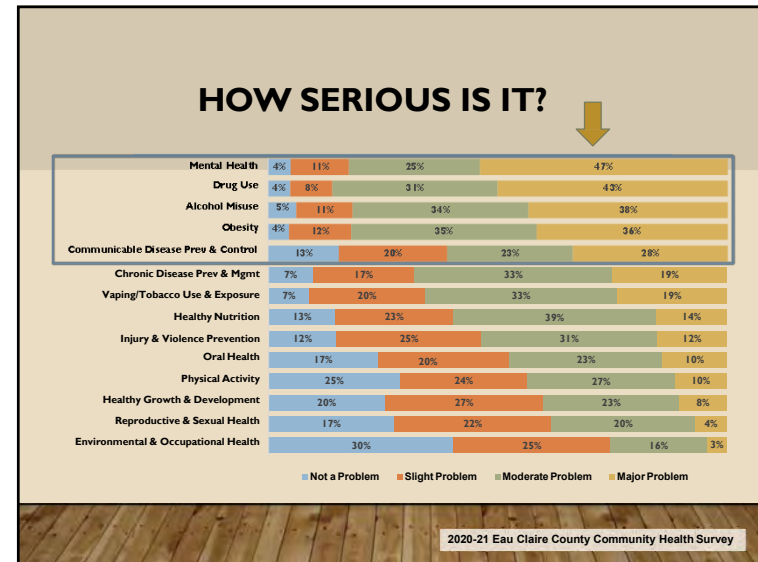
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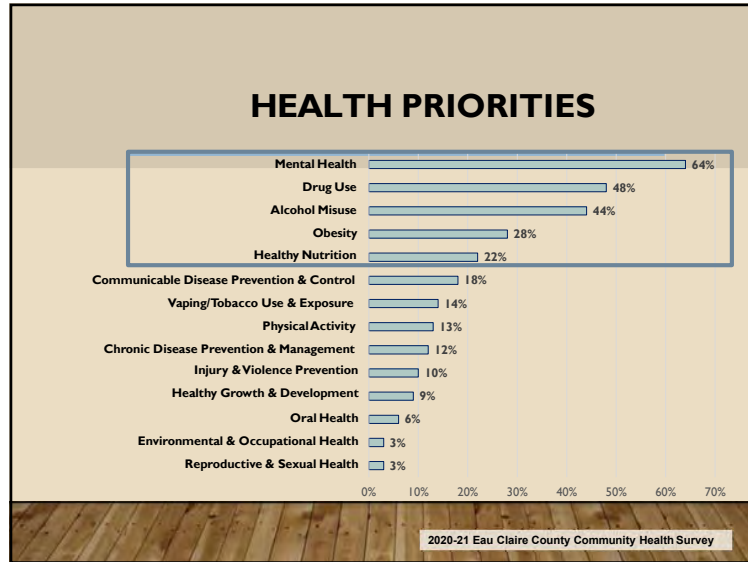
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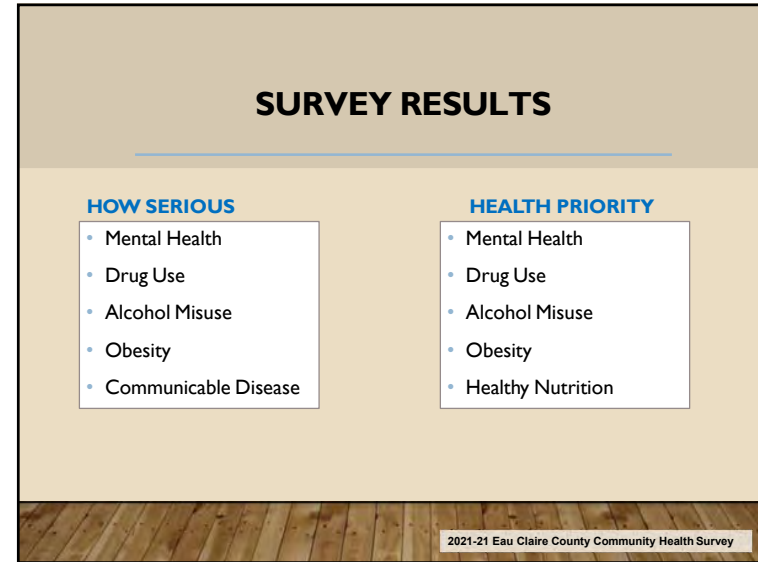
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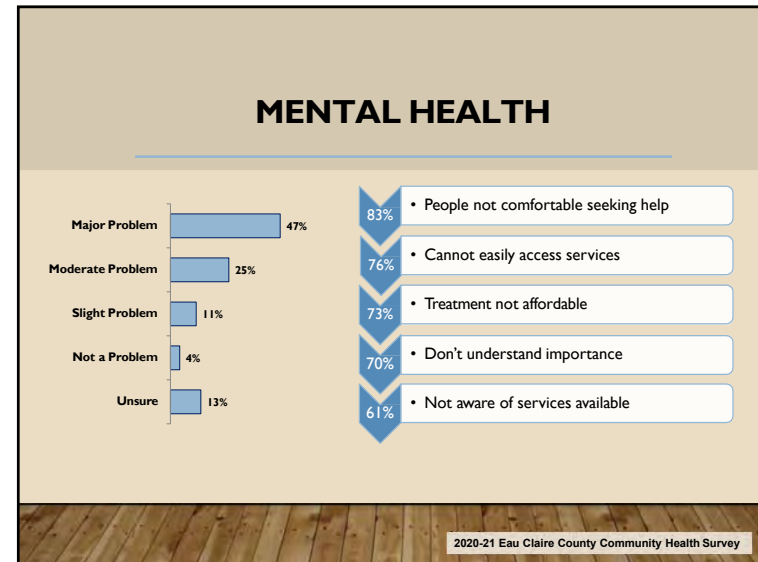
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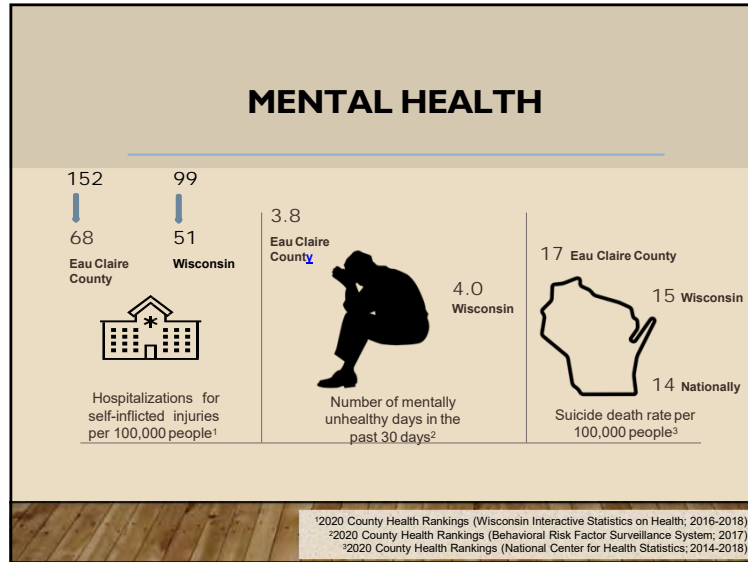
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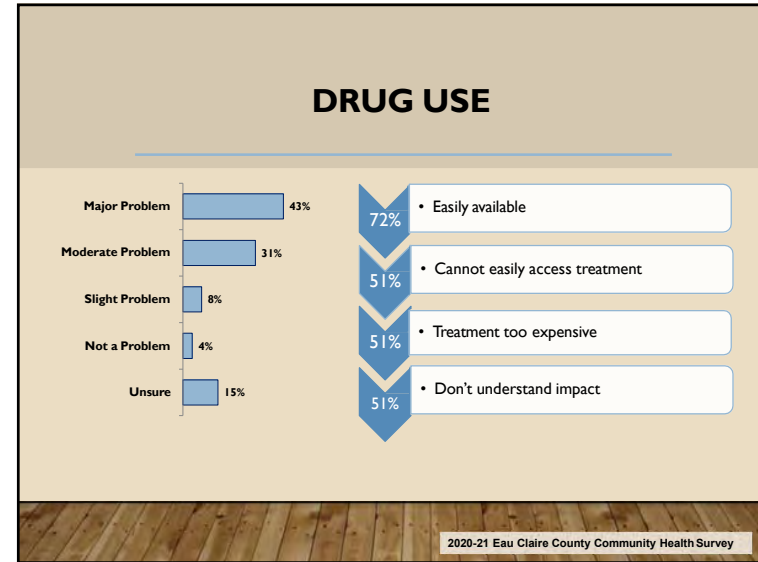
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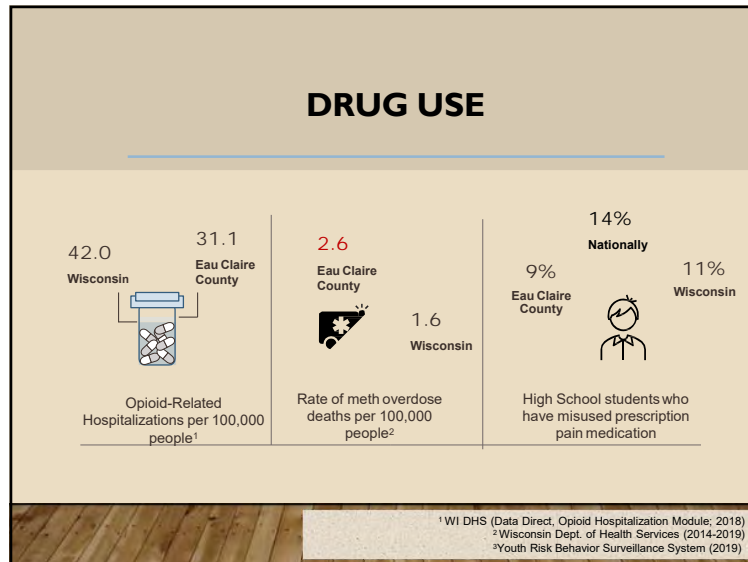
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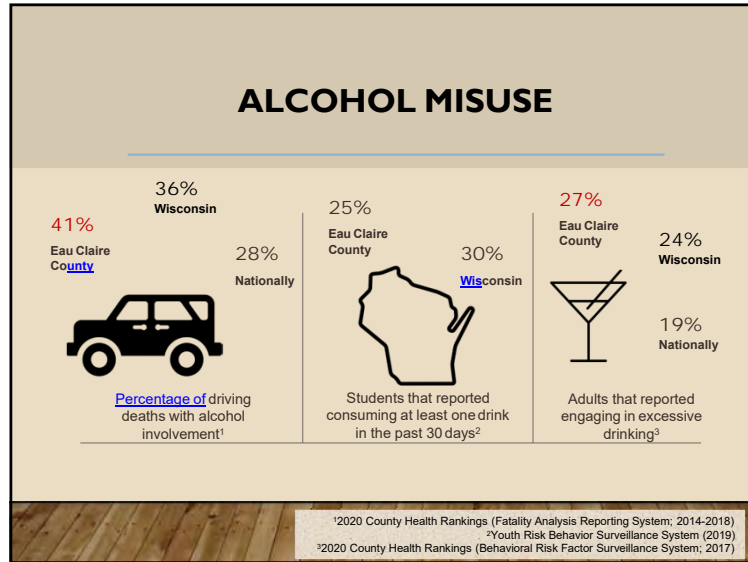
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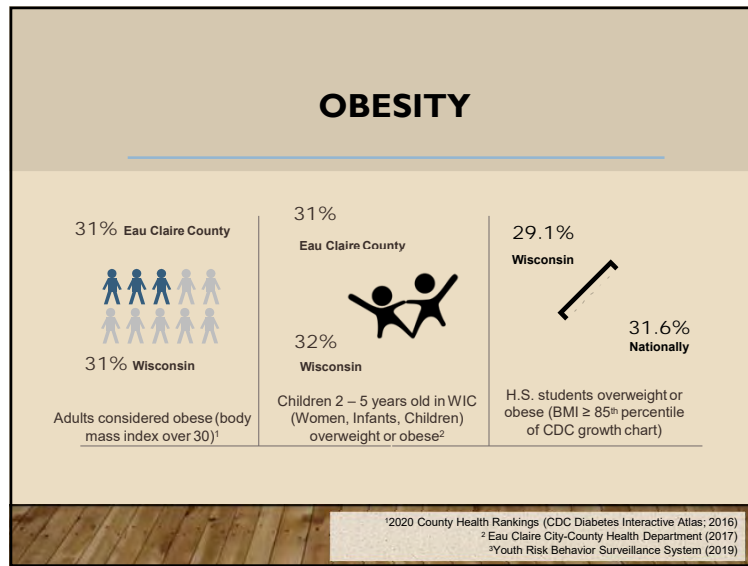
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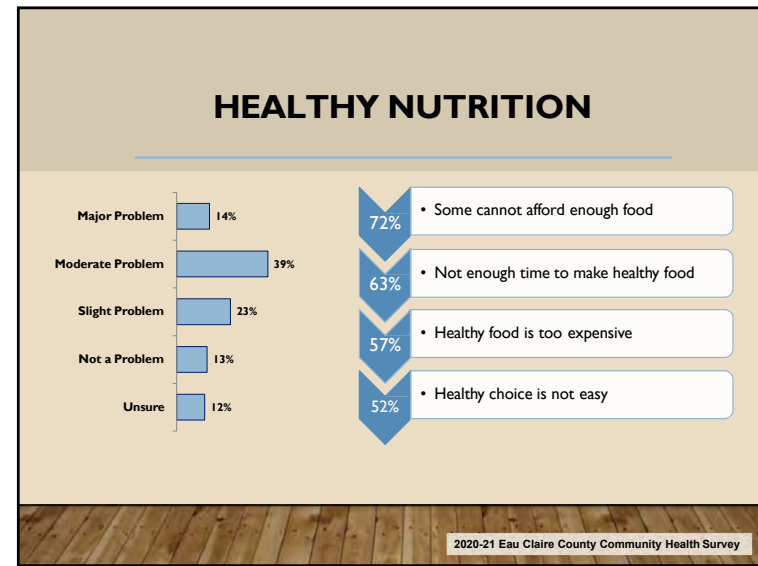
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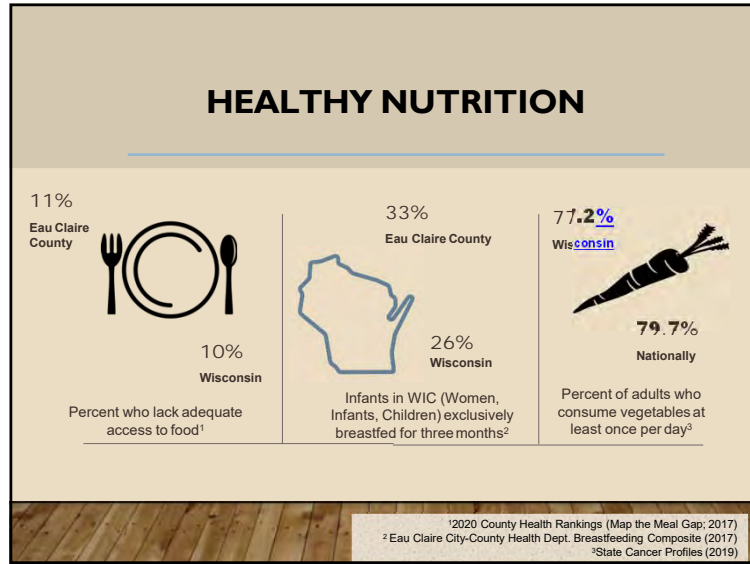
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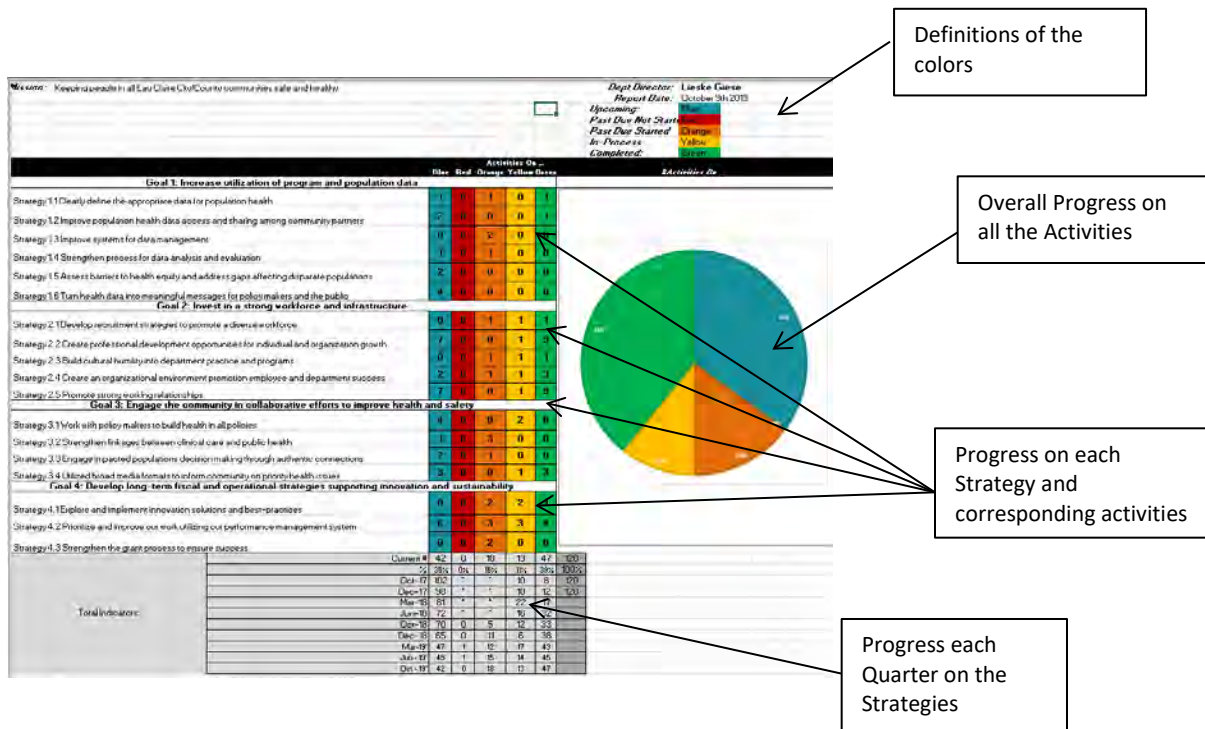
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Board of Health Meeting 2/24/2021

Agenda Item 7.h Strategic Plan

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

With just under a year left in the Strategic Plan, more than 60% of the activities are completed and 21% are in progress. Health Department focus in 2020 has primarily on COVID-19 response. Health Department focus for the remainder of 2021 on the Strategic Plan will be around data, including COVID-19 data, and health equity. With this being the last year in the Strategic Plan, the department intends to bring forward later in the year a plan for next steps.



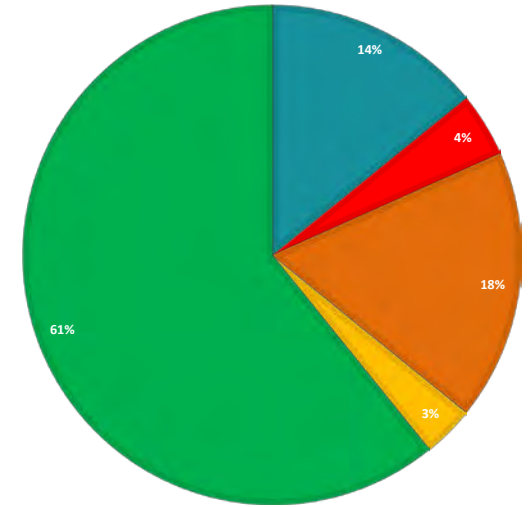
Mission: Keeping people in all Eau Claire City/County communities safe and healthy

Dept Director: Lieske Giese

Report Date: February 21 2021

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

	Activities On ...					%Activities On ...	
	Blue	Red	Orange	Yellow	Green		
Goal 1: Increase utilization of program and population data							
Strategy 1.1 Clearly define the appropriate data for population health	0	0	1	0	2		
Strategy 1.2 Improve population health data access and sharing among community partners	1	1	0	0	1		
Strategy 1.3 Improve systems for data management	0	0	1	0	1		
Strategy 1.4 Strengthen process for data analysis and evaluation	0	0	2	0	0		
Strategy 1.5 Assess barriers to health equity and address gaps affecting disparate populations	1	1	0	0	0		
Strategy 1.6 Turn health data into meaningful messages for policy makers and the public	2	0	0	0	10		
Goal 2: Invest in a strong workforce and infrastructure							
Strategy 2.1 Develop recruitment strategies to promote a diverse workforce	0	0	2	0	1		
Strategy 2.2 Create professional development opportunities for individual and organization growth	3	1	0	1	12		
Strategy 2.3 Build cultural humility into department practice and programs	0	0	2	0	1		
Strategy 2.4 Create an organizational environment promotion employee and department success	1	0	0	0	6		
Strategy 2.5 Promote strong working relationships	3	0	0	0	14		
Goal 3: Engage the community in collaborative efforts to improve health and safety							
Strategy 3.1 Work with policy makers to build health in all policies	2	0	1	1	8		
Strategy 3.2 Strengthen linkages between clinical care and public health	0	1	3	0	0		
Strategy 3.3 Engage impacted populations decision making through authentic connections	0	1	2	0	0		
Strategy 3.4 Utilized broad media formats to inform community on priority health issues	1	0	0	0	6		
Goal 4: Develop long-term fiscal and operational strategies supporting innovation and sustainability							
Strategy 4.1 Explore and implement innovation solutions and best-practices	0	0	1	2	2		
Strategy 4.2 Prioritize and improve our work utilizing our performance management system	3	0	4	0	9		
Strategy 4.3 Strengthen the grant process to ensure success	0	0	2	0	0		
Total Indicators:	Current #	17	5	21	4	73	120
	%	14%	4%	18%	3%	61%	100%
	Oct-17	102	*	*	10	8	120
	Dec-17	98	*	*	10	12	120
	Mar-18	81	*	*	22	17	
	Jun-18	72	*	*	16	32	
	Oct-18	70	0	5	12	33	
	Dec-18	65	0	11	6	38	
	Mar-19'	47	1	12	17	43	
	Jun - 19'	45	1	15	14	45	
	Oct - 19'	42	0	18	13	47	
	Dec - 19'	40	1	16	7	56	
	July- 20'	29	2	19	10	60	
Oct- 20'	23	2	19	10	66		



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

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

Goal	Strategy	Activities	Lead	Status Legend					Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
		By 12/31/2021 produce the HD summary report which creatively presents key health data.	Policy & Systems	X					
		By 6/30/18 standardize the practice of including local data in all appropriate press releases and media contacts.	Communication Team					X	Created a new press release template with instructions to include data.
		By 6/30/19 research and implement one new method for messaging health data to the public.	Communication Team					X	Data team created a template form for creating graphs.
				4	2	3	0	11	Total

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

Goal	Strategy	Activities	Lead						Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
		By 12/31/2019 develop and implement plan for identifying and addressing longer term (5+ year) professional development goals of staff.	Workforce Develop Team					X	Training plan is built into staff performance reviews. Tuition reimbursement process asks staff how the request is of value to department or staff's future goals. Knowledge journal is being used by staff when someone is leaving the department.	
		By 12/31/17 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	CO/AB - SOPHIA, CO/RM Natl substance abuse, LG - NALBOH, AH/JH - U of MI Adolescent Health Initiative 4/24-25, SB - APHL, AB/LG - INVEST	
		By 12/31/18 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	Atlanta Walkability Institute, National WIC conference, INVEST Health and NFP training	
		By 12/31/19 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	National WIC conference, ASCCP, Design Thinking Training, NFP training and NFP RHA	
		By 12/31/20 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT					X	Staff attended virtual CADCA meeting/training	
		By 12/31/21 provide an opportunity for at least 2 staff to attend a national training opportunity.	MT	X						
		By 12/31/18 develop and implement a specific plan for leadership and management development across organization.	MT	X						
	2.3 Build cultural humility into department practice and programs	By 12/31/18 assess departmental status related to existing understanding and implementation of cultural competence and humility in practice/programs.	Workforce Development Team						X	A video was shown at all staff meeting. In fall of 2018 staff completed competency assessment including cultural competencies elements.
		By 06/30/19 develop and implement a process to build program and staff strength in cultural competence and humility.	Workforce Development Team				X			Orientation process will include cultural competency training options and building into all staff meetings.
		By 12/31/19 create employee orientation for new and existing employees on cultural humility	Tegan				X			The orientation process will incorporate this training.
			By 6/31/18 assess and develop plan/policy related to health department space focused on meeting multiple working styles.	Handbook Committee					X	Have worked with Staples on designs options and implementation in process

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
Goal 2: Invest in a strong workforce and infrastructure	2.4 Create an organizational environment promoting employee and department success	By 12/31/17 evaluate the technology needs of department and implement appropriate improvements.	Tegan					X	Tegan has an up-to-date list of existing technology and gaps identified. In 2017, a new FPC database was implemented to assist in data tracking. Also, EH developed a new web-based registration system.
		By 12/31/18 evaluate the technology needs of department and implement appropriate improvements.	Tegan					X	There is an updated equipment list and equipment is ordered as needed.
		By 12/31/19 evaluate the technology needs of department and implement appropriate improvements.	Tegan					X	Tech needs are identified and processed accordingly. We added for GIS capable laptops and AV equipment and updated tech for remote meetings. Continuing to work on SharePoint
		By 12/31/20 evaluate the technology needs of department and implement appropriate improvements.	Tegan					X	Laptops have been deployed to staff and VPN connectivity has been enabled allowing staff to telecommute. Additionally staff have access to Skype, Teams and Webex platforms to hold virtual meetings.
		By 12/31/21 evaluate the technology needs of department and implement appropriate improvements.	Tegan	X					
		By 2/01/19 develop procedure and implement central "intranet" for the Health Department	Tegan					X	A SharePoint site is in use.
		By 12/31/17 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	4/22/17 - Supported Earth Day clean up efforts by organizing a group to participate 8/10/17 - Coordinated summer picnic at Mt. Simon Park 9/15/17 - Organized Day of Caring Event at Community Gardens
		By 12/31/18 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	January Christmas party, Accreditation celebration, 4/21/18 Amazing Eau Claire clean-up and there was a staff picnic in August
		By 12/31/19 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	Christmas party was held in January and a staff picnic on June 20th.

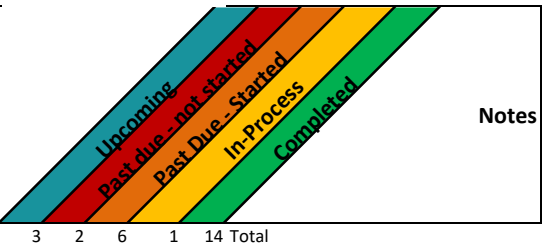
Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
	2.5 Promote strong working relationships	By 12/31/20 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections					X	Christmas party was held in January. Due to COVID no outside of work opportunities were offered. Sunny connections coordinated with other internal teams to offer other virtual opportunities for networking.
		By 12/31/21 complete 2 (external to work hours) networking opportunities for staff.	Sunny Connections	X					
		By 12/31/17 complete at least 5 employee wellness activities.	Wellness Committee					X	4 Lunch 'n Learns have been held covering Wellness topics; Weekly yoga breaks were offered in March and April; Wellness Walk held in July
		By 12/31/18 complete at least 5 employee wellness activities.	Wellness Committee					X	3 wellness competitions, 4 Lunch 'n Learns and 2 fitness classes have been offered
		By 12/31/19 complete at least 5 employee wellness activities.	Wellness Committee					X	1 wellness competition has been offered and 5 community events/challenges have been promoted.
		By 12/31/20 complete at least 5 employee wellness activities.	Wellness Committee					X	2 wellness challenges and 6 other wellness activities have been offered, including The Weekly – a weekly newsletter sent to employees
		By 12/31/21 complete at least 5 employee wellness activities.	Wellness Committee	X					
		By 12/31/18 distribute and analyze employee engagement survey.	Wellness Committee/IDT/Handbook Committee					X	Survey was sent out in June and committees are reviewing results.
		By 12/31/20 distribute and analyze employee engagement survey.	IDT					X	Due to COVID the typical engagement survey wasn't used. MT worked to help people engaged using mindfulness training and coordinating with REALiving and worked with wellness to survey staff about the usefulness of those.
		By 12/31/17 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT					X	QI Team reviews PM/SP to improve results as part of plan, SPITfires has multiple SP goals in progress, Wellness and Sunny Connections have multiple SP goals in progress.

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
		By 12/31/18 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT					X	Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, SPITfires has multiple SP goals in progress, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/19 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT					X	Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, communication team, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/20 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT					X	Data Team is focused on meeting SP goal 1. QI Team reviews PM/SP to improve results as part of plan, communication team, Wellness and Sunny Connections have multiple SP goals in progress.
		By 12/31/21 assure at least 1 cross divisional workgroup that focuses on Performance Management Plan or Strategic Plan measure.	MT	X					
				7	1	4	1	34	Total

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

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

Goal	Strategy	Activities	Lead	Notes



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

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

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - Started	In-Process	Completed	
		By 12/31/17 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	Completed self-assessment identifying use of customer survey data as weakness and began QI Team working on that project; also began SharePoint development QI Team.
		By 12/31/18 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	QI project completed around community engagement techniques.
		By 12/31/19 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	QI project completed around the 2 year old vaccination rate
		By 12/31/20 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team					X	Multiple process maps have been created to document new or changes to existing processes due to COVID-19
		By 12/31/21 under take at least one quality improvement project related to a Strategic Plan goal or Performance Management measure.	QI Core Team	X					
		By 06/30/2019 develop and implement departmental guidance tool linking performance measures, strategic plan priorities and community health priorities to decision-making about existing and future programs/services. (overlap with 1.4)	MT			X			
	4.3 Strengthen the grant process to ensure success	By 6/30/18 collect and centralize resources/templates available for grant writing.	Grant Team			X			Checklist in process; documents saved for use in grant applications
	By 12/31/18 strengthen the interdepartmental core grant team to analyze and identify support efforts needed in the department for grant/funding identification and application.	Grant Team			X				

3 0 7 2 11 Total

	Actions	Next Steps	Timing	Notes:	
Priority 1: Maintain Health Department's fiscal stability	Annual update/review of BOH's fiscal policies and related responsibilities	Fund balance policy, HD fee setting and BOH budget approval process	July and August	Fund balance details and policy reviewed at July meeting. HD fee setting done at August meeting.	
	Quarterly review of fiscal reporting (Significant financial changes discussed at any monthly meeting)		Jan/April/July/Oct	Quarterly review done at designated BOH meetings. Includes preliminary financial summary, revenue and expense statement and balance sheet. HD's audit done as part of City's annual fiscal audit, reported on at monthly BOH meetings when info becomes available from auditors.	
Priority 2: Support and advocate for public health priorities	Provide skill development training for BOH	Advocacy training to provide framework and process for engagement	4/22/2020		
	Provide talking points for key priorities			Health officer plus WALHDAB, NAHBOH and WI Public Health Association have provided talking points regarding public health funding and proposed state COVID legislation.	
	Support WPHA/WALHDAB legislative priorities	Legislative update documents provided in monthly meeting packets			Ongoing when updated documents become available.
		BOH copied on emails the Health Dept. has sent to legislative officials			Ongoing.
	Engage with community partners/leaders to support community action on health priorities				Communicable Disease Ordinance Task Force
	Raise community and governmental policy maker's awareness of need to support "health lens" in decision-making	Identify BOH members' current participation in community organizations. Determine if additional resources/training required.			
	Raise awareness of upstream factors impacting health	Determine if additional resources/training required.			
Identify and share influencing tools available for BOH	Determine info/resources available for BOH			All BOH members are provided with WALHDAB and NALBOH memberships; receive electronic newsletters, public health legislative alerts, and have access to web resources.	
	Public health resources				
	Case Studies				
Priority 3: Review new or changing community / Health Department priorities	Include quarterly BOH agenda item to update/review a running list of potential issues in community	Examples of success in other communities	Jan/April/July/Oct	Planning more detailed info from current CHA and CHIP Spring 2021.	
	Discuss populations impacted and data gaps			See above entry.	
	Discuss staffing and fiscal implications for health department				
Priority 4: Ongoing BOH Improvements	Strive for diversity in BOH membership and decision-making			BOH membership has expanded to include representation from the rural community, <40 years of age and Hmong ethnic group.	
	Identify and prioritize BOH training opportunities and needs	Consider diversity in broadest terms possible.			

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

PRIORITIES

- 1. Maintain Health Department's fiscal stability**
- 2. Support and advocate 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, HD fee setting and BOH budget approval process
2. Quarterly review of fiscal reporting (Jan/April/July/Oct)
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 (April 22,2020)
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 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
2. Discuss populations impacted and data gaps
3. Discuss staffing and fiscal implications for Health Dept

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

Review and Updating Process

1. Quarterly review of tracking document during regular BOH meetings to assess progress (Feb/May/August/Nov)
2. BOH will agenda time at March 25, 2020 meeting to determine processes for:
 - a. Prioritization of actions/next steps
 - b. Establish time frames
 - c. Changes to actions and next steps
3. TBD

Where Communities Come Together



City / County Taskforce on Communicable Disease Ordinances Announces Facilitator

For Immediate Release:

(Eau Claire, Wis.) – County Board Chair Smiar, City Council President Weld, and City-County Board of Health President Price have announced Dan Stier, J.D., as facilitator for the recently appointed City-County Communicable Disease Task Force. The purpose of the task force is to review the proposed Communicable Disease Ordinances and clarify how we promptly and responsibly respond locally to future communicable disease emergencies. It is anticipated that the work of the 20-member community task force will begin soon with task force work sessions and community listening sessions. Because of the size of the task force and the complexity of the issues to be dealt with, the services of a facilitator will be used to help focus the thoughts, ideas, and work of the task force members and public input in community listening sessions.



Dan Stier, J.D., is a veteran attorney and administrator with decades of experience in public health law at state and federal levels. From March, 2010, until May, 2013, he was the director of the Network for Public Health Law's National Coordinating Center, funded by the Robert Wood Johnson Foundation. Upon leaving the Network, he established a public health law consulting business, Dan Stier, LLC.

Mr. Stier was a Senior Public Health Analyst with CDC's Public Health Law Program from 2005-2010. He worked closely with state public health officials and attorneys, guided by the Program's mission "to advance the public's health through law." Mr. Stier devoted considerable attention to multi-jurisdictional legal issues relating to public health emergency preparedness, with particular focus on issues associated with state-tribal public health collaboration. He led CDC's initiative to strengthen the relationship between public health and the courts, and served as the Program's liaison to CDC's National Center for Injury Prevention and Control.

Before joining CDC, Mr. Stier had a long and varied career in Wisconsin state government. In his most recent state position, as Chief Legal Counsel for ten years with the Department of Health and Family Services, he was closely involved with public health legal issues, including public health emergency preparedness and related revisions of Wisconsin law. Prior to his service with the Department of Health and Family Services, Mr. Stier served as an assistant attorney general in the Wisconsin Department of Justice and as the Deputy Secretary of the Wisconsin Department of Veterans Affairs. He is a member of the State Bar of Wisconsin and former member of the State Bar of Georgia, and is a graduate of the University of Wisconsin Law School.

Citizens and interested parties will be able to follow the work of the Task Force at: INSERT LINK

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Incorporated in 1856, Eau Claire County's mission is "To provide quality, innovative and cost-effective services that safeguard and enhance the well-being of residents and resources." Covering 655 square miles in northwest Wisconsin, Eau Claire County government services touch those who live in the county, visitors and others in the Chippewa River Valley. For more information, visit our website at www.co.eau-claire.wi.us or go to our Facebook



page at www.facebook.com/EauClaireCounty.

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Governor Evers 2021-23 Biennial Budget Proposal

Initial Analysis for WALHDAB & WPHA

Department of Health Services

1. To provide healthcare coverage to 90,900 low-income families, of which approximately 45,100 are uninsured, and lower state healthcare costs by \$634,100,000 GPR over the biennium, the Governor recommends accepting the federal Affordable Care Act's provision for Medicaid expansion. Medicaid expansion reduces the fiscal burden associated with healthcare costs for many more Wisconsin residents and unites Wisconsin with 38 other states that provide free healthcare for the nation's impoverished. The Governor also recommends repealing the federal waiver for childless adults to administer the Medicaid program uniformly across all Medicaid eligibility groups.
2. The Governor recommends creating and offering a public option health insurance plan to improve healthcare coverage and affordability by no later than January 1, 2025, or no later than January 1, 2022, if the federal Affordable Care Act is no longer enforceable. The Governor also recommends the department and the Office of the Commissioner of Insurance conduct an analysis and actuarial study for the development of the public option health insurance plan.
3. The Governor recommends providing funding to support the development of up to two regional crisis centers. Funding for each regional crisis center would support a crisis urgent care and observation center, a 15-bed crisis stabilization facility, and two inpatient psychiatric beds. Regional crisis centers would also assume custody of emergency detention cases, conduct medical clearances and assist with admission to other facilities, if necessary, in order to reduce law enforcement time dedicated to emergency detention situations. The Governor also recommends providing 2.0 FTE human services program coordinator positions and associated funding to develop and evaluate the centers on an ongoing basis.
4. The Governor recommends providing funding to extend postpartum Medicaid eligibility from 60 days to 12 months. The Governor also recommends that the department implement the eligibility expansion regardless of whether federal approval is granted.
5. The Governor recommends increasing supplemental payments to stand-alone pediatric teaching hospitals that provide medical services to a disproportionate share of pediatric Medicaid recipients. The Governor also recommends that the payment increase be contingent on the department expanding Medicaid under the federal Affordable Care Act.

6. The Governor recommends providing funding to expand the availability of medication-assisted treatment for those with opioid use disorder in underserved or high-need areas.
7. The Governor recommends increasing funding for the Child Psychiatry Consultation Program to expand the program statewide.
8. The Governor recommends aligning state statutes with federal law by increasing the minimum age to purchase cigarettes, nicotine products, tobacco products and vapor products from age 18 to age 21.
9. The Governor recommends expanding the current law prohibition against smoking in indoor locations to include the use of vapor products.
10. The Governor recommends prohibiting the use of vapor products on public, private and charter school property.
11. The Governor recommends providing funding to develop and implement a public health campaign to prevent the initiation of tobacco and vapor product use. The Governor also recommends granting funds to organizations that work to reduce youth vapor product use and provide cessation services.
12. The Governor recommends increasing funding for the Women's Health Block Grant by \$193,600 in both years of the biennium. The Governor also recommends expanding Women's Health Block Grant, Title V and Title X funding to entities that provide abortion services or entities that have an affiliate that provides abortion services. This does not change the prohibition on using state or federal funds for abortion services.
13. The Governor recommends the creation of a Health Equity Grants program, which would award grants to community organizations to implement community health worker care models and would award grants to community organizations and local health departments to implement health equity action plans. To fund the grant program, the Governor also recommends providing \$10 million general purpose revenue in FY22 and \$20 million segregated revenue in FY23 from the community reinvestment fund.
14. The Governor recommends providing a Medicaid community health benefit that provides nonmedical services to Medicaid recipients. Services include housing referrals, nutritional mentoring, stress management and other services that would positively impact an individual's economic and social condition. Services would be delivered by various culturally competent organizations and would be adapted to the particular needs of members in each community. The benefit would include wellness and family support services as a preventive measure to improve emotional health and resilience and reduce health risks, while improving and maintaining general health, and building health literacy and healthy living skills.

15. The Governor recommends providing position and expenditure authority to staff an enterprisewide Health in All Policies Action Team, which would organize representatives from all executive branch agencies to create a shared vision of healthy and equitable communities, define common goals, explore the root causes of health, create a collective action plan, implement health in all policies and programs within their agencies, and engage their stakeholders in conversations about what creates health.
16. The Governor recommends providing expenditure authority to provide grants to Black women-led and community serving organizations that work to improve Black women's wellness in Dane, Milwaukee, Rock and Kenosha counties. The Governor also recommends providing expenditure authority to provide grants to organizations that work to reduce racial disparities related to infant and maternal mortality. The Governor further recommends providing expenditure authority to contract with an organization to connect and convene efforts between state agencies, public and private sector organizations, and community organizations to create a comprehensive statewide strategy to advance Black women's health in Wisconsin.
17. The Governor recommends increasing grants to local and tribal public health departments to support communicable disease control and prevention activities by \$5 million in each year of the biennium.
18. The Governor recommends increasing funding available for grants to community health centers by \$2 million in each year of the biennium.
19. The Governor recommends providing ongoing funding for the Windows Plus Program, which provides lead-safe renovation to high-risk areas in homes built before 1950 that are occupied by low-income families. The Governor also recommends providing position and expenditure authority to administer the program.
20. The Governor recommends increasing funding in the Birth to 3 Program to expand services to eligible children who have a positive blood lead test above 5 micrograms per deciliter.
21. The Governor recommends increasing funding for lead screening and outreach grants by \$50,000 in each year of the biennium.

Department of Public Instruction

22. The Governor recommends fully funding reimbursements to school districts, private schools and tribal schools under the school breakfast program at \$0.15 for each breakfast as required by current law. The Governor also recommends expanding the institutions eligible for reimbursement to include: (a) independent charter schools, (b) Wisconsin educational services program for the deaf and hard of hearing, (c) Wisconsin center for the blind and visually impaired, and (d) residential care centers for children and youth.

The Governor further recommends eliminating reimbursement payments to institutions no longer in operation.

Department of Corrections

23. The Governor recommends modifying the process by which the department may revoke the extended supervision, probation or parole of a person in the department's care and modifying the sanctions procedure for certain rule violations. The Governor also recommends creating an earned compliance credit for certain eligible persons in the department's care. The earned compliance credit would equal the amount of time served on extended supervision or parole without violating any conditions or rules of extended supervision or parole. The Governor further recommends expanding the earned release program to include educational, vocational, treatment or other qualifying training programs that are evidence-based to reduce recidivism. In addition, the Governor recommends allowing a sentencing court to reduce the term of a person's extended supervision if certain conditions apply. Furthermore, the Governor recommends allowing a person detained in a county jail facility for an extended supervision violation to participate in Huber release for employment-related or medical purposes. Finally, the Governor recommends requiring the department to identify, via an annual report to the Governor and Legislature, the cost savings incurred by the modifications to the earned release and extended supervision processes included in this bill.
24. The Governor recommends establishing a Sentencing Review Council to study and make recommendations regarding: the state's criminal code, equity in sentencing, the state's bifurcated sentencing structure and sentences for violations committed by those between 18 and 25 years of age.
25. The Governor recommends eliminating the felony penalty for bail jumping and allowing for a misdemeanor penalty regardless of the original charge. The Governor also recommends requiring a diversion and restitution alternative for certain misdemeanor offenses. The Governor further recommends legalizing marijuana.
26. The Governor recommends limiting the use of restraints on pregnant and postpartum people in correctional facilities and providing them access to certain tests, materials, services and information. Under this item, correctional facilities would include: state prisons, jails, juvenile detention facilities, secured residential care centers for children and youth, and juvenile correctional facilities.

Department of Revenue

27. The Governor recommends creating a nonrefundable individual income tax credit for qualified expenses incurred by a family caregiver to assist a qualified family member. For the purposes of the credit, a qualified family member must be at least 18 years of age, must require assistance with one or more daily living activities as certified by a physician, and must be the credit claimant's spouse or related by blood, marriage or adoption within the third degree of kinship. The credit is equal to 50 percent of qualified expenses in the taxable year and is limited to \$500 for most filers and \$250 for married-separate filers. The credit is subject to income limits that phase out the credit between \$75,000 and \$85,000 in income for single and head of household filers and \$150,000 and \$170,000 in income for married-joint filers. The credit first applies to taxable years

beginning after December 31, 2020. The fiscal impact is an estimated decrease in tax revenue of \$100.4 million in FY22 and \$102.5 million in FY23.

28. The Governor recommends legalizing the sale of marijuana for recreational use for sales that occur at a marijuana retailer holding a permit issued by the department. The Governor also recommends the imposition of a 15 percent wholesale excise tax and a 10 percent retail excise tax on the sale of marijuana by department-issued permit holders. Sixty percent of excise tax collections will be deposited to a newly established community reinvestment fund with the remaining collections deposited to the general fund. The fiscal impact is an estimated increase in segregated tax revenue of \$79.3 million in FY23 and an estimated increase in general fund tax revenue of \$86.5 million in FY23.
29. The Governor recommends imposing a tax on vapor products at the rate of 71 percent of the manufacturer's list price. This tax would replace the existing tax of 5 cents per milliliter which only applies to vapor liquid. The recommended tax would apply to any electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe, or similar product or device, as well as any container of a solution or other substance that is intended to be used with these items. The fiscal impact is an estimated increase in tax revenue of \$12.7 million in FY22 and \$16.6 million in FY23.
30. The Governor recommends imposing the cigarette excise tax on little cigars that include an integrated cellulose acetate filter and that are wrapped in any substance containing tobacco. The fiscal impact is an increase in tax revenue of \$2.3 million in FY22 and \$3.0 million in FY23.

Department of Administration

31. The budget establishes the Office of Sustainability and Clean Energy within the Department of Administration. The office will promote the development and use of clean and renewable energy across the state, advance innovative sustainability solutions that improve the state's economy and environment, diversify the resources used to meet the state's energy needs, and generate family supporting jobs by promoting the expansion of Wisconsin's clean energy economy.
32. Create a \$4 million renewable and clean energy research grant in fiscal year 2021-22 administered by the Office of Sustainability and Clean Energy and funded by the environmental fund.
33. Creating the Office of Environmental Justice within the Department of Administration. This office would be tasked with collaborating across state agencies and would engage with environmental justice advocates, communities of color, Native Nations, and low-income communities to design climate policies that reduce emissions and pollutants and address the cumulative and deadly impact of their concentration within those communities.
34. Funding and executing state and local climate risk assessment and resilience plans and creating a chief resilience officer to oversee development and execution of these plans. According to the task force, a statewide climate risk assessment and resilience plan is

necessary to identify infrastructure and communities most at risk of climate change impacts.

35. Modifying current law to require a comprehensive plan be developed by municipalities to address climate change, require that local hazard mitigation plans include climate change, and require communities throughout the state to include climate change in their community health improvement assessment and plans.
36. Providing technical assistance grant funding to assist municipalities and tribal nations to develop a plan to be carbon-free by 2050. Provide \$200,000 GPR over the biennium at the new Office of Environmental Justice for this purpose.

Department of Justice

37. COMMUNITY REINVESTMENT FUND - Provide from the Community Reinvestment Fund the following appropriations for fiscal year 2022-23:
 - \$10 million for grants to promote diversity and advance equity and inclusion.
 - \$10 million for community health worker grants.
 - \$10 million for equity action plan grants.
 - \$5 million to assist underserved communities.
 - \$34,852,800 to provide school sparsity aid.
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38. TAD - Provide an additional \$15 million GPR and 2.0 FTE GPR positions in fiscal year 2022-23 for an expansion of the treatment alternatives and diversion program to greatly expand the program.
39. TAD - Provide \$221,400 GPR in fiscal year 2021-22, \$273,500 GPR in fiscal year 2022-23, and 3.0 FTE GPR positions for the administration and evaluation of the treatment alternatives and diversion program.

Public Service Commission

40. Doubling the required utility contribution for the Focus on Energy program from 1.2 percent to 2.4 percent of annual operating revenues, which would generate an additional \$100 million in funding for the program. Focus on Energy provides both business and residential programs. Examples of programs include: assistance for businesses applying for federal grants from the U.S. Department of Energy, providing no or low-cost energy tips, training opportunities for businesses, and financial incentives for residents seeking to improve the energy efficiency in their homes.
41. Reserving a portion of the additional Focus on Energy funds for the Public Service Commission to develop a low-income customer track that will, in partnership with the Department of Administration Weatherization Program, offer enhanced incentives for eligible customers. Examples of expansion could include the development of a workforce training element, addition of solar panels as an eligible measure for the Weatherization Program, and addition of a low-income solar subscription or grant program.

42. The Governor's budget also allocates the remaining Volkswagen emissions settlement funds by appropriating \$10 million to support the reinstatement of the electric vehicle charging station grant program administered by the Department of Administration and \$700,000 to replace aging state fleet vehicles with new electric vehicles.
43. The Governor recommends modifying several statutory provisions to expand low-cost debt financing of clean energy projects for residential, commercial, and governmental customers, including: (a) requiring the commission to create a model ordinance for counties to establish a property assessed clean energy (PACE) financing program; (b) authorizing the Focus on Energy program to allocate funds to market PACE programs across the state; and (c) authorizing regulated utilities to offer inclusive on-bill financing for energy efficiency improvements.
44. The Governor is also requiring the commission to reevaluate the appropriate social cost of carbon every two years, in consultation with the Department of Natural Resources, and report the findings in a biennial report to the standing legislative committees; and requiring the commission to consider the social cost of carbon when determining whether to issue construction certifications. The "social cost" of carbon includes the economic damage resulting from carbon dioxide emissions, including effects on human health, agricultural productivity, and property damage from severe weather events. The cost is an estimate of the economic damages that would result from emitting one additional ton of greenhouse gas into the atmosphere.

Department of Natural Resources

45. PFAS - Provide \$731,300 SEG in fiscal year 2021-22, \$936,700 SEG in fiscal year 2022-23, 10.0 FTE SEG permanent positions, and 1.0 FTE SEG four-year project position in the Department of Natural Resources for the development and implementation of a per- and polyfluoroalkyl substances (PFAS) action plan.
46. PFAS - Provide \$1,430,000 SEG in fiscal year 2021-22 and \$680,000 SEG in fiscal year 2022-23 for statewide monitoring and testing for PFAS.
47. PFAS - Provide \$10 million GPR in each year of the biennium for a municipal grant program for the testing and remediation of PFAS by local units of government.
48. PFAS - Provide \$1 million SEG in fiscal year 2021-22 for the collection and disposal of firefighting foam that contains PFAS.
49. PFAS - Establish and enforce various environmental standards for PFAS
50. SEALANTS - Prohibit the sale and use of sealants that contain coal tar, coal tar pitch, coal tar volatiles, or high concentrations of polycyclic aromatic hydrocarbons.



The Wheeler Report

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Tuesday, February 16, 2021

According to the [Budget in Brief](#) document:

Expenditures

- The Governor recommends an operating budget of \$45.4 billion in fiscal year 2021-22 and \$45.6 billion in fiscal year 2022-23.
- On an annual basis, the Governor's all funds budget for fiscal year 2021-22 represents an increase of \$3,843.1 million (9.3 percent) over the fiscal year 2020-21 adjusted base, and the budget for fiscal year 2022-23 represents an increase of \$200.7 million (0.4 percent) compared with fiscal year 2021-22.
- Largest biennial GPR increases over base
 - DPI - \$1.642 million
 - DHS \$463 million
 - WEDC - \$320 million
 - DCF - \$247 million
 - UW System - \$192 million
 - PSC - \$156 million
 - DWD - \$127 million
 - All others - \$79 million
- The Governor recommends a GPR budget of \$20.7 billion in fiscal year 2021-22 and \$21.1 billion in fiscal year 2022-23.
- On an annual basis, the Governor's GPR budget for fiscal year 2021-22 is a spending increase of \$1,409.0 million (7.3 percent) over the fiscal year 2020-21 base, and for fiscal year 2022-23 is a spending increase of \$406.0 million (2.0 percent) over fiscal year 2021-22.

Positions

- The Governor's budget recommendations include authorization for 71,789.33 FTE state positions from all fund sources by the end of the next biennium (fiscal year 2022-23). This represents an increase of 308.74 FTE positions from the fiscal year 2020-21 adjusted base of 71,480.59. From GPR funds, the budget provides 35,922.07 FTE positions, an increase of 363.95 from the fiscal year 2020-21 adjusted base of 35,558.12.
 - 23 FTE GPR positions for DHS for COVID response
 - 3 FTE GPR positions for DHS for a communicable disease harm reduction strike team
 - 2 FTE positions to create a data analytics and predictive modeling team.
 - 48 FTE positions and \$9.7 million GPR to create a new customer-centric worker pilot program at DWD to help overcome barriers to employment.
 - 16 FTE positions to establish the Office of Prescription Drug Affordability

- 10 FTE positions to establish a state-based health insurance marketplace by plan year 2024.
- 7 FTE GPR positions to expand the Veterans Outreach and recovery Program
- 5 FTE GPR positions to provide regional mental health support for farmers and farm families
- 27 FTE and funding to expand substance use disorder treatment capacity for the Earned Release Program at adult institutions.
- 10 FTE SEG positions at DNR to development and implement a PFAS action plan.
- 73 FTE positions to keep forensic patient units operation at the Sane Ridge Secure Treatment Center and the Mendota Juvenile Treatment Center.
- 10 FTE positions for the SPD, and 5.9 FTE GPR ASA positions.
- 44.52 FTE PR positions at UW System to reflect the Board of Regents' approved 2020-21 operating budget for academic students' fees.

Workforce and Employment

- SMALL BUSINESS RECOVERY - Provide WEDC with \$200 million to assist small business recovery.
- VENTURE CAPITAL - Create a Venture Capital Program with \$100 million in one-time GPR funding in a continuing appropriation in FY2021-22. The program will be required to be a fund of funds investment program.
- PANDEMIC ASSISTANCE - Provide WEDC with \$8 million on a one-time basis in FY2021-22 to help organizations with pandemic recovery efforts.
- ENTREPRENEURSHIP - Provide \$5 million GPR in FY2021-22 to promote entrepreneurship in underserved areas. Provide \$5 million SEG revenues beginning in FY2022-23 from marijuana tax revenues.
- WEDC BLOCK GRANT FUNDING - Increase WEDC's total block grant funding by \$10 million in each year of the biennium.
- FAST FORWARD/GREEN JOBS - Provide \$500,000 GPR annually under WI Fast Forward for green jobs throughout the state.
- WORKFORCE DEVELOPMENT BOARDS - Provide \$8 million GPR in pandemic recovery grants to local workforce development boards.
- HEALTH CARE CAREERS - Provide \$200,000 GPR for local workforce development boards to hold hiring events for health care-related careers and career exploration courses.
- EMPLOYMENT BARRIERS - Provide \$9.7 million GPR and 48 FTE project positions to create a new customer-centric worker pilot program at DWD to help obtain meaningful employment by overcoming barriers to employment.
- YOUTH APPRENTICESHIP - Provide \$250,000 GPR annually to expand youth apprenticeship opportunities.
- FAST FORWARD GRANTS - Provide \$10 million GPR within WI Fast Forward for grants to fund worker training programs for individuals and organizations.
- FIRST-TIME HOMEBUYERS - Create a tax-preferred savings account that would allow first-time homebuyers to subtract from their adjusted gross income up to \$5,000 in contributions for single filed and up to \$10,000 in contributions for married-joint filers.
- RESEARCH CREDIT - Increase from 10% to 20% the research credit that is refundable in tax year 2021.
- UI LAWS - Reform the state's unemployment insurance law to make it less complicated for individuals, increase the number of individuals who are eligible, and reduce adjudication time.

- FMLA - Expand the Wisconsin Family Medical Leave Act.
- UNION WORKERS - Repeal the prohibition on contracts between labor unions and employers that specify the employer may only hire unionized workers.
- MINIMUM WAGE - Increase the state minimum wage for general workers from \$8.60 gradually until it reaches \$10.15 on January 1, 2024, and by the consumer price index for each year thereafter.
- PREVAILING WAGE - Require employers conducting projects of public works, both state and local, to pay workers the hourly wage and benefits paid to the majority of workers in the project area (Prevailing wage).
- WORKERS COMPENSATION - Create an escalating penalty structure for repeat violations of worker's compensation and unemployment insurance laws around classification.
- COLLECTIVE BARGAINING - Establish collective bargaining rights for state and local government front-line workers.
- RECERTIFICATION - Eliminate annual recertification requirement for state and local government bargaining units.
- EMPLOYER/WORKER MEETINGS - Require employers meet at least quarterly or upon changes in policies affecting wages, hours, and working conditions of general employees.
- WHEDA INVESTMENTS - Increase the limit on how much the Wisconsin Housing and Economic Development Authority may invest of its general funds in small businesses and start-up companies from \$1 million in total to \$1 million annually.
- UI ADMINISTRATION - Provide \$15 million GPR in fiscal year 2022-23 to address unemployment insurance administration workload increases due to the impact of COVID-19.
- UI SYSTEM - Provide \$79.5 million GPR in FY2021-22 in a continuing appropriation for necessary upgrades for the state's unemployment insurance system.
- WORK OPPORTUNITY TAX CREDIT - Create a Wisconsin supplement to the federal Work Opportunity Tax Credit equal to 50% of the amount a taxpayer claims of the federal credit.
- WORKFORCE HOUSING – Establish an affordable workforce housing grant program and provide \$50 million GPR in FY2021-22 to provide funding to local municipalities to encourage the development of additional affordable workforce housing in the state.

Higher Education

- UW SYSTEM OPERATION FUNDS - Increase general operations funding for UW System by \$20 million GPR in each fiscal year to provide flexibility to system institutions to address student needs and COVID challenges.
- NURSE EDUCATORS - Provide \$5 million GPR in FY2022-23 to address nurse educator shortages.
- TUITION FREEZE - Continue the tuition freeze at the UW System in the 2021-22 and 2022-23 academic years.
- OFFSET TUITION FREEZE - Provide the UW System with \$16,800,000 GPR in FY2021-22 and \$33,600,000 GPR in FY2022-23 to offset the tuition freeze.
- MILITARY TRAINING - Provide \$50,000 PR to DSPS in both fiscal years to create a program to ensure direct translation of military training and credits to licensure requirements, and where possible adjust programming to allow military training to fulfill requirements.
- WISCONSIN GRANTS - Increasing funding for need-based financial aid in the Wisconsin Grants programs.

- TUITION GRANTS - Provide \$13.8 million GPR in FY2021-22 and \$25.2 million GPR in FY2022-23 for a tuition program grant program that pays tuition and segregated fees on behalf of students whose household adjusted gross income is \$60,000 or less.
- COLLEGE SAVINGS ACCOUNTS - Adopt federal law changes for college savings accounts.
- SHORT-TERM BORROWING - Provide UW System with the authority to obtain extensions of credit to provide short-term funding for expenses associated with athletic and educational programs.
- UW/SWIB - Provide UW System with the ability to designate certain program revenues for investment outside of the State Investment Fund through the State of Wisconsin Investment Board.
- UNIVERSITY ALLIANCE - Provide \$300,000 GPR in each year to support the University Alliance.
- TECHNICAL COLLEGES - Provide WI Technical College System and system institutions support by increasing general aid by \$18 million GPR in FY2021-22 and FY2022-23.
- STUDENT LOANS - Create a student loan borrower bill of rights and an Office of Student Loan Ombudsman within DFI.
- STUDENT MENTAL HEALTH – Provide \$2.5 million GPR in FY2021-22 and \$75. million GPR in FY2022-23 to UW System to support additional and improved student health services related to mental and behavioral health.
- TRANSITIONAL JOBS - Provide \$2.6 million TANF in FY2021-22 and \$5.2 million TANF in FY2022-23 to engine the statewide expansion of the Transitional Jobs program at DCF.

K-12 Education

- GENERAL AID - Provide \$612.8 million in GPR in state general aid to school districts across the biennium.
- 2/3 FUNDING - Restores the requirement that the state provide at least 2/3 funding of partial school revenues – in both biennium.
- SPECIAL EDUCATION - Covert special education aid to a sum sufficient appropriation, ensuring that aid is not prorated. Increase special education aid by \$296,695,600 GPR in FY2021-22 and \$412,80,100 GPR in FY2022-23 to reimburse eligible special education cost at 45% and 50%.
- HIGH COST SPECIAL EDUCATION - Increase high cost special education aid by \$1.752,200 GPR in FY2021-22 and \$7,804,900 GPR in FY202223 to reimburse eligible high cost special education costs at 40% and 60%.
- SPECIAL ADJUSTMENT AIDS - Increase special adjustment aid rates from 85% of prior year general aid to 90% of prior year general aid in each year.
- LOW-SPENDING DISTRICTS - Increase revenue limit equity for low-spending school districts by increasing the low revenue ceiling to \$10,250 in FY2021-22 and \$10.500 in FY2022-23.
- EQUALIZED AID - Increase the state general equalization aid and revenue limit four-year-old (4K) membership calculations for school districts, independent charter schools, ad private schools participating in the state’s parental choice programs that provide a full-day 4K program.
- SCHOOL MENTAL HEALTH - Increase funding by \$22.5 million GPR in FY2021-22 and \$24 million GPR in FY2022-23 for school mental health expenditures and provide 10% reimbursement in each year.
- SCHOOL MENTAL HEALTH - Increase funding by \$3.5 million GPR in each year to increase the number and size of school-based mental health collaboration grants provided.
- PER PUPIL PAYMENTS - Increase funding by \$31,177,000 GPR in FY2021-22 and \$29,654,000 GPR in FY2022-23 to fund per pupil payments of \$750 in each year and to provide an additional \$75 per economically disadvantaged pupil.

- BICULTURAL-BILINGUAL CATEGORICAL AID - Increase funding by \$9.745,500 GPR in FY2021-22 and \$18.267.200 GPR in FY2022-23 to provide 15% reimbursement of eligible costs and to reform the current bilingual-bicultural categorical aid program to address increasing costs and the needs of English learners in any school district or independent charter school in each fiscal year.
- BILINGUAL TEACHERS/ESL - Provide \$750,000 in FY2022-23 for grants to school districts to support the identification and professional development of staff and teachers seeking licensure as a bilingual teacher or English as a second language teacher.
- SPARSITY AID - Provide \$9,992,100 GPR in FY2021-22 and \$10,038,900 SEG in FY2022-23 for sparsity aid. Replace GPR funding for sparsity aid in the second year with funding from the newly created Community Reinvestment Fund.
- TIME GRANTS - Create new out-of-school time grants, and provide \$20 million GPR in FY2022-23.
- ENERGY EFFICIENCY FOR SCHOOLS - Provide \$10 million GPR in each fiscal year to support a new energy efficiency grant program for schools.
- AMERICAN INDIAN TRIBES - Highlight the importance of federally recognized American Indian tribes and bands and reinforce the intent of 1989 Wisconsin Act 31 by: (a) expanding the teacher licensing requirement related to knowledge of American Indian tribes and bands in Wisconsin to include contemporary and historical events; (b) increasing the frequency of social studies instruction in the culture, tribal sovereignty, and contemporary and historical significant events of federally recognized tribes and bands in Wisconsin for school districts beginning in the 2022-23 school year; and (c) requiring independent charter schools and private schools participating in a parental choice program to provide instruction in American Indian studies in both elementary grades and high school grades beginning in the 2022-23 school year.
- COMPUTER SCIENCE - Provide \$750,000 GPR in FY2022-23 to school districts to identify staff and teachers for professional development resulting in licensure in computer science.
- SCHOOL HEALTH INSURANCE - Investigate whether potential cost savings exist for school districts related to health insurance if all school districts were required to participate in the Group Health Insurance Program as of January 1, 2024, through an actuarial study by the Group Insurance Board.
- OPPORTUNITY SCHOOLS PARTNERSHIP - Repeal the Opportunity Schools Partnership Program.
- TRUANCY - Repeal the truancy abatement and burglary suppression program.

Child Care, Early Education, Child Services

- CHILD CARE STRONG PROGRAM - Create the Child Care Strong program to increase quality, affordable and accessible child care for Wisconsin children. Provide \$54=3,016,400 GPR and repurposing \$17,637,000 TANF by delinking YoungStar incentive payments to providers from Shares authorizations.
- REWARD PROGRAM - Provide \$500,000 TANF in each year to expand the REWARD program.
- MILWAUKEE CHILD CARE - Continue current funding to support and expand quality and affordable child care in economically disadvantaged areas within the city of Milwaukee.
- CHILDREN AND FAMILY AIDS - Increase Children and Family Aids by \$10 million beginning in calendar year 2022. Appropriate \$15 million GPR over the biennium to provide additional support to the child welfare system.
- IN-HOME INTERVENTION PROGRAM - Authorize DCF to implement a new statewide in-home services intervention program. Invest \$8,613,400 GPR and \$3,729,300 PR-F in each year in services to reduce the need for child welfare interventions and certify qualified residential treatment programs.

- CHILD SUPPORT - Increase funding by \$4 million GPR and \$7,764,700 FED in each fiscal year to child support agencies to improve collection of delinquent child support in the state.

Health Care

- MEDICAID - Expand Medicaid.
- PUBLIC HEALTH OPTION - Invest \$1.8 million to fund the development of state-administered public option health plan to be offered no later than 2025, or 2022 if the federal Affordable Care Act is no longer enforceable.
- HOSPITALS - Provide \$321 million to hospitals that service Medicaid patients.
- MEDICAID HEALTH BENEFITS - Create a Medicaid community health benefits and provides \$25 million for nonmedical services to reduce and prevent health disparities.
- EQUITY INITIATIVES - Investing in the following health equity initiatives: (a) grants for community organizations and local public health departments to implement health equity action plans; (b) grants for community organizations to implement community health worker care models; (c) a Medicaid tribal shared savings initiative; (d) funding to translate the Department of Health Services' Web page into multiple languages; and (e) 1.0 FTE position to staff an enterprisewide health in all polices action team. Fund these initiatives with \$10,166,200 in fiscal year 2021-22 and \$25,726,100 in fiscal year 2022-23.
- COMMUNICABLE DISEASES - Provide \$14 million for communicable disease items.
- DENTAL ACCESS - Increase access to dental services and begin licensing Dental Therapists. Provide \$11.9 million in FY2021-22 and \$23.8 million in FY2022-23 to provide Medicaid dental incentive payments through reimbursement rate increases to dental providers.
- DOULA SERVICES - Provide \$1,015,200 in FY2022-23 to cover doula services through Medicaid,
- WOMEN'S HEALTH BLOCK GRANT - Increase funding for the Women's Health Block Grant by \$193,600 GPR annually
- POSTPARTUM - Expand postpartum eligibility for women in the Medicaid program from 60 days to 12 months – providing \$20,948,600 in FY2022-23
- MATERNAL AND INFANT MORTALITY - Grant \$3.5 million to organizations working to reduce disparities related to maternal and infant mortality.
- BLACK WOMEN'S WELLNESS - Grant \$4.5 million to Black woman-led and community serving organizations working to improve Black women's wellness.
- CHILDHOOD LEAD POISONING – Increase blood lead testing by providing additional funding for lead screening and outreach grants, providing ongoing funding for the Windows Plus Program, expand Birth to 3 services to additional children that are lead poisoned. Provide \$4,311,800 in FY2021-22 and \$7,704,800 in FY2022-23.
- TOBACCO AND VAPOR PRODUCTS – Increasing the age to purchase tobacco and vapor products from 18-21. Prohibit the use of a vapor product indoors, and on school grounds. Provide \$2 million to fund a public health campaign related to tobacco and vapor product use.
- EMERGENCY MEDICAL SERVICES – Provide additional funding from EMS Funding Assistance Program, convert 2.0 FTE on the Wisconsin Trauma System from FED to GPR, provide 1.0 FTE position to staff an ambulance inspection program.
- REGIONAL CRISIS CENTER – Provide \$12.3 million GPR in FY2022-23 to establish up to two regional crisis centers.

- CRISIS STABILIZATION FACILITIES – Provide \$5 million GPR in FY2022-23 to establish five crisis stabilization facilities across the state.
- COUNTY CRISIS PROGRAMS – Provide \$1.2 million GPR in each year to support staffing needs of county crisis programs and peer-run respite centers for their telephone services.
- BEHAVIORAL HEALTH TREATMENT PROGRAM – Create a \$1.9 million grant in FY2022-23 to establish a behavioral health treatment program for those who are deaf, hard of hearing, or deaf-blind.
- HEALTH EATING – Provide \$425,000 GPR in each year to implement a Healthy Eating Incentives Pilot Program.
- CRISIS RESPONSE – Create a \$1.25 million GPR grant in each year for municipalities and counties to establish behavioral health and police collaboration program to increase behavioral health professional involvement in emergency response situations. Provide \$375,000 GPR in each year for additional crisis intervention trainings to local law enforcement. Provide \$850,000 GPR in each year to expand Milwaukee County’s Crisis Mobile Team.
- CAREGIVERS – Provide \$40.4 million in FY2021-22 and \$37.4 million in FY2022-23 to increase the direct care and services portion of the capitation rates DHS provides to long-term care managed care organizations. Provide \$40.4 million in FY2021-22 and \$37.4 million in FY2022-23 to fund rate increases for personal care direct care services. Provide \$78.3 million in FY2021-22 and \$163.7 million in FY2022-23 for a rate increase for nursing homes.
- FREE AN CHARITABLE CLINICS – Provide an additional \$2 million GPR annually for free and charitable clinics and an additional \$2 million GPR for community health center grants.
- WI HEALTHCARE STABILITY PLAN – Fund the Wisconsin Healthcare Stability Plan. Provide \$200 million in each fiscal year to reinsure high cost individuals across all health insurance exchanges.
- PRESCRIPTION DRUGS – Provide 7.5 FTE and %696,600 PR in FY2021-22 and \$617,800 PR in FY2022-23 to license and regulate entities involved in the prescription drug supply chain.
- OFFICE OF PRESCRIPTION DRUG AFFORDABILITY – Provide 16.0 FTE and \$1.7 million PR in FY2021-22 and \$1.5 million PR in FY2022-23 to establish the Office of Prescription Drug Affordability.
- PATIENT PHARMACY BENEFITS TOOL – Create a \$500,000 GPR grant in FY2022-23 to develop a patient pharmacy benefits tool.
- PHARMACIST VOLUNTEER WORK – Increase pharmacist participation at free and charitable clinics by allowing one-third of continuing education requirements be met through volunteer work.
- DRUG DISCOUNT PROGRAM – Require hospitals participating in the federal 340B drug discount program to report on their savings under the program and how they utilize those savings.
- INSULIN – Set the maximum copay for a month’s supply of insulin at \$50.
- INSULIN SAFETY NET PROGRAM – Establish an Insulin Safety Net Program to ensure affordable insulin costs.
- STATE PRESCRIPTION DRUG PURCHASING – Direct OCI to study the creation of a state prescription drug purchasing entity.
- STATE-BASED HEALTH INSURANCE MARKET – Provide 10.FTE, \$885,000 GPR in FY2021-22, \$1.2 million GPR in FY2022-23 and 43 million PR in FY2022-23 to establish a state-based health insurance marketplace by plan year 2024.
- PREMIUM ASSISTANCE – Direct OCI to develop a plan to offer premium assistance by plan year 2024 for those between 138% and 250% of the FPL.
- TELEHEALTH – Establish parity provisions to ensure patients utilizing telehealth services are not charged or have their services limited.
- INSURANCE NAVIGATOR – Create a \$500,000 PR grant in each year to support insurance navigator organizations help individual enroll for health insurance coverage.

- HEALTH INSURANCE COVERAGE – require health insurance providers to guarantee the issuance of health insurance to individuals that apply for coverage regardless of preexisting conditions, sexual orientation, gender identity, health status, or medical history, among others; prohibit health insurance providers from charging greater premiums or out-of-pocket costs based on those factors; prohibit health insurance providers from establishing annual or lifetime limits on health insurance plan benefits; require all health insurance plans to provide coverage for the ten essential health benefits categories covered under the federal Affordable Care Act; and require all health insurance plans provide coverage for certain preventive services at no cost to the plan holder.
- BALANCE BILLING – Eliminate balance billing for emergency and ambulatory services given by out-of-network provider as well as services provided at an in-network facility by an out-of-network provider.
- VETERANS OUTREACH AND RECOVERY PROGRAM – Provide 7 FTE GPR positions to expand the Veterans Outreach and Recovery Program.
- SUICIDE PREVENTION – Provide \$100,000 annually to promote suicide prevention and awareness in veteran communities by conducting improved outreach to traditionally underserved veteran populations.
- AMERICAN INDIAN TRIBES VETERANS SERVICES – Provide a 5% increase to grants to counties and the governing bodies of federally recognized American Indian tribes and bands in support of the costs of maintaining veterans service offices.
- OPIOID EPIDEMIC – Expand DSPS efforts to address the opioid epidemic by authorizing increased expenditure authority of \$250,000 PR in each year of the biennium.
- HOMELESS PREVENTION PROGRAMS – Increase funding for the homeless prevention programs. \$1 million GPR in each fiscal year for the Homelessness Prevention Program; \$500,000 GPR in each year for the creation of a new diversion program; \$700,000 GPR in each fiscal year for the State Shelter Subsidy Grant; \$5 million GPR in each fiscal year for the Housing Assistance Program; \$500,000 TANF in each fiscal year for the Homeless Case Management Services Grant; \$250,000 GPR in each fiscal year for the Skills Enhancement Grant at the Department of Children and Families; \$2 million GPR in each fiscal year to create a new housing quality standards grant; and (h) \$600,000 GPR in each fiscal year to create a grant for housing navigation. In addition, create a veteran rental assistance program funded at \$1 million GPR in each fiscal year. Finally, repurpose unused funding from the Employment Services Grant program to support 1.0 FTE GPR position within the Department of Administration's Division of Energy, Housing and Community Resources to support the expanded programs and convert 1 FTE FED to PR-S funded by TANF.
- HOMELESS CHILDREN AND FAMILIES – Create a pilot program that gives priority to homeless children and their families on the WHEDA federal Housing Choice Voucher Program waiting list.
- CIVIL LEGAL ASSISTANCE – Create a civil legal assistance program and provide \$2 million GPR in each fiscal year to allocate funds to the Wisconsin Trust Account Foundation.
- EMERGENCY ASSISTANCE – Provide \$4,153,800 in each fiscal year to expand the Emergency Assistance Program at DCF.
- DCF CIVIL LEGAL SERVICES/EVICTIONS – Expand the civil legal assistance program at DCF by \$500,000 TANF in each fiscal year to provide civil legal services related to eviction matters.
- LANDLORD-TENANT – Reinstate the ability for local governments to enact ordinances regulating the landlord-tenant relationship and modify certain statutory language related to landlord-tenant responsibilities.

- LEAD SERVICE LINES – Provide \$40 million GPR for the replacement of lead services lines through the Safe Drinking Water Loan Program.
- WELL COMPENSATION PROGRAM – Increase funding by \$1 million GPR in each year for financial assistance under the well compensation program.
- FARMER MENTAL HEALTH – Provide \$447,400 GPR in FY2021-22, \$536,600 FPR in FY2022-23 and 5 FTE GPR positions to provide regional mental health support for farmers and farm families.
- VAPING PRODUCTS – Provide DATCP with \$102400 GPR in FY2022-23 and 1 FTE GPR position to provide consumer protection enforcement on vaping products.

Equity and Opportunity

- Establish “Wisconsin For All” Diversity, Equity and Inclusion initiatives to promote and advance equity within all of state government and state programs.
- DOMESTIC PARTNERSHIP - Reinstate domestic partnership benefits for all state and local government employee insurance programs administered by ETF.
- LANGUAGE REFERENCES - Modify current law to make references to marriage, spouses, and parentage gender-neutral, recognizing the legalization of same-sex marriage and providing greater flexibility and inclusion for all individuals, couples, and families.
- EMPLOYMENT DISCRIMINATION - Expand the definition of employment discrimination to specify that employers cannot discriminate based on gender identity and/or expression
- AMERICAN TRIBES - Create a new discretionary grant of equal amounts to the tribes to support nongaming programs that meet the needs of members of the tribes. The grant will start in fiscal year 2022-23 and will be funded at \$11 million or \$1 million per federally recognized tribe.
- SMALL BUSINESS ECONOMIC DEVELOPMENT - Provide \$390,000 annually to create a small business economic development program at WEDC.
- Create a grant program administered by the Department of Public Instruction to reimburse expenses incurred by school districts that choose to change racebased mascots and logos, funded at \$200,000 PR-S per year.
- Provide \$69,400 PR in fiscal year 2021-22, \$87,400 PR in fiscal year 2022-23, and 1.0 FTE PR position to create a Latinx outreach specialist at the Department of Agriculture, Trade and Consumer Protection.

Taxes

- SELF-EMPLOYED HEALTH INSURANCE -Allow self-employed individuals to deduct their medical care insurance premiums against all sources of income instead of current law limitation.
- HOMESTEAD TAX CREDIT - Increase the maximum income threshold of the homestead credit to \$30,000 in tax year 2021 and annually index all parameters for inflations beginning in 2023.
- VETERANS TAX CREDIT - Expand the veterans and surviving spouses property tax credit to include a benefit for renters equal to 20% of rent paid.
- EARNED INCOME TAX CREDIT - Increase the Wisconsin earned income tax credit as a percentage of the federal credit from 4% to 16% for filers with one qualifying child and from 11% to 25% for filers with two qualifying children beginning in tax year 2021.
- CHILD CARE EXPENSES - Adopt a nonrefundable credit equal to 50% of the federal credit for child and depend care expenses beginning in tax year 2021 while repealing the current law subtraction for qualifying child and dependent care expenses.

- AMERICORPS - Create a subtraction from the individual income tax for those amounts received by a taxpayer as part of AmeriCorps education awards.
- TUITION DEDUCTION - Limit the subtraction from adjusted gross income for tuition paid by a parent to send their child to a private primary or secondary school to those single and head of household filers with incomes below \$100,000 and married-joint filers with incomes below \$150,000.
- FAMILY CAREGIVER – Create a nonrefundable individual income tax caregiver credit for qualified expenses incurred by a family caregiver to assist a qualified family member.
- STATE HOUSING RAX CREDIT – Modify the State Housing Tax Credit Program to address the need for affordable housing in the state.
- FLOOD INSURANCE INCOME TAX CREDIT - Create a nonrefundable individual income tax credit equal to 10 percent of the amount individuals pay for flood insurance premiums in a tax year beginning with tax year 2021, limited to \$60.
- MANUFACTURING AND AG CREDIT – Limit the amount of qualified production activities income that may be claimed by manufacturing firms under the manufacturing and agriculture credit to \$300,000 per tax year – while leaving the agricultural portion of the credit unchanged. The fiscal impact is an estimated increase in tax revenue of \$258.9 million in fiscal year 2021-22 and \$228.5 million in fiscal year 2022-23.
- INTERNAL REVENUE CODE CHANGES - Adopt numerous changes made to the federal Internal Revenue Code, including major provisions of the Tax Cuts and Jobs Act of 2017. The net fiscal impact of these changes is an increase in tax revenue of \$264.2 million in fiscal year 2021-22 and \$275.9 million in fiscal year 2022-23.
- CAPITAL GAINS EXCLUSIONS - Preserve the current law 30 percent long-term capital gains exclusion for single filers with federal adjusted gross income below \$400,000 and below \$533,000 for married-joint filers while eliminating it for taxpayers above those income levels. Taxpayers with noncapital gains income below those thresholds could claim capital gains income that, when combined with other sources, would stay within those limits for purposes of the exclusion, but not those amounts above the income limits. These modifications will preserve the exclusion for low- and middle-income investors while creating greater equity in the tax treatment of different sources of income for higher-income taxpayers. These modifications do not affect the 60 percent capital gains exclusion for farm assets. The fiscal impact is an estimated increase in tax revenue of \$202.1 million in fiscal year 2021-22 and \$148.4 million in fiscal year 2022-23.
- SALES TAX - If approved by local referendum, allow counties to impose an additional 0.5 percent sales tax and allow municipalities with populations over 30,000 to impose a 0.5 percent sales tax to diversify local revenue sources and better empower local governments to fund police and fire protection, transit, roads, and other important services.

Infrastructure

- MAJOR HIGHWAY PROGRAM - Provide a total of \$565.6 million in federal and state funds for the major highway program over the biennium to continue work on projects throughout the state.
- MULTIMODAL TRANSPORTATION PROJECTS - Provide \$75 million for local multimodal transportation projects to address the significant need for supplemental infrastructure funding as evidenced by the \$1.2 billion of projects submitted by local governments under a similar program in the 2019-21 biennium.
- BROADBAND - Invest over \$200 million to expand broadband access in Wisconsin, The main component of this investment is an increase in funding for the Broadband Expansion Grant

Program at the Public Service Commission to \$151.7 million over the biennium, compared to \$48 million during the 2019-21 biennium. The \$151.7 million is comprised of \$74.8 million GPR in fiscal year 2021-22 and \$72.9 million GPR in fiscal year 2022-23 and the statutorily required minimum of at least \$2 million annually in funding from the state's Universal Service Fund.

- BROADBAND - Eliminate several statutory restrictions for certain municipalities defined as broadband "underserved" or "unserved" to directly invest in broadband infrastructure and provide service to residents. Allow these communities to apply directly for broadband grants from the Public Service Commission.
- BROADBAND LINE EXTENSION GRANT PROGRAM - Create a Broadband Line Extension Grant Program, funded at \$1.75 million GPR in fiscal year 2021-22 and \$3.5 million GPR in fiscal year 2022-23, to provide grants and financial assistance to eligible households to subsidize the cost of a line extension from existing broadband infrastructure to a residence without access to 25/3 mbps service. Provide 1.0 FTE GPR position and associated funding to the State Broadband Office to assist with the initiative.
- INTERNET ASSISTANCE PROGRAM - Create an Internet assistance program at the Department of Children and Families, funded at \$20 million annually, including \$10 million GPR and \$10 million TANF funds, to subsidize the cost of a monthly Internet subscription for families at or below 200 percent of the federal poverty level. In addition, provide 1.0 FTE position to administer the program.
- HIGHWAY REHABILITATION - Increase State Highway Rehabilitation program funding by \$66.6 million to provide a 3 percent increase over the prior biennium.
- I-94 EAST/WEST - Provide \$40 million in bonding to start the I-94 East/West expansion project in Milwaukee County.
- LOCAL ROADS - Provide \$15 million in bonding for a Local Roads for Critical Infrastructure pilot program to combat the increased frequency of roadway destruction from flooding events.
- ELECTRICAL VEHICLE CHARGING - Authorize \$5 million in bonding for electric vehicle charging infrastructure to allow greater use of electric vehicles throughout the state.
- GENERAL TRANSPORTATION AIDS - Increase General Transportation Aids for both counties and municipalities by 2 percent in calendar year 2022 and by another 2 percent in calendar year 2023.
- GENERAL TRANSIT OPERATION AIDS - Provide \$3.5 million for a 2.5 percent annual increase in general transit operation aids for transit systems across the state.
- NEXT GENERATION 9-1-1 - Provide \$3.4 million SEG in fiscal year 2021-22 and \$21.7 million SEG in fiscal year 2022-23 to build the systems that will enable Next Generation 9-1-1 statewide. Funding would provide for the development and management of an emergency services Internet protocol network; grants to counties for the development of geographic information systems data; development and management of the geographic information systems data provided by counties; and grants to 9-1-1 public safety answering points for training, equipment, or software expenses.
- STATEWIDE INTEROPERABLE COMMUNICATIONS - Provide \$6.5 million GPR for the design and implementation of a new statewide interoperable communications system, which is a shared land mobile radio public safety communications system allowing emergency personnel and first responders to communicate for their daily mission, during a major disaster, or a large-scale incident.

Agriculture

- WI INITIATIVE FOR AG EXPORTS - Create the Wisconsin Initiative for Agricultural Exports with \$1,074,400 GPR in fiscal year 2021-22, \$1,092,200 GPR in fiscal year 2022-23, and 1.0 FTE GPR position to help build Wisconsin's agricultural brand in international markets and increase agricultural exports.
- FARM BUSINESS CONSULTANTS - Provide \$100,000 GPR in each year for grants to help farms hire business consultants to examine their farm business plans.
- DAIRY PROCESSOR GRANT - Provide an additional \$600,000 GPR in each year to increase the available funding for the Dairy Processor Grant program.
- VALUE-ADDED GRANT PROGRAM - Create the Value-Added Grant program with \$468,000 GPR in fiscal year 2021-22, \$490,600 GPR in fiscal year 2022-23, and 1.0 FTE position. The program will help farmers expand agricultural practices that produce value added products.
- FARM TO SCHOOL - Fund the Farm to School Grant program at \$200,000 GPR in each year.
- FARM TO FORK GRANT - Create the Farm to Fork Grant program with \$200,000 GPR in each year. The program will connect nonschool entities that operate cafeterias with local farmers, so that they can purchase locally grown food.
- BUY LOCAL, BUY WISCONSIN - Increase funding and position authority for the Buy Local, Buy Wisconsin Grant program by \$165,100 GPR in fiscal year 2021-22, \$186,800 GPR in fiscal year 2022-23, and 1.0 FTE GPR position.
- SOMETHING SPECIAL FROM WI - Provide a one-time infusion of \$400,000 GPR in fiscal year 2021-22 into the Something Special from Wisconsin trademark program.
- MEAT PROCESSOR GRANT - Create a new Meat Processor Grant program with \$1,000,000 GPR in each year. The program will provide grants to meat processors to expand and modernize their operations and grow the meat industry.
- MEAT TALENT DEVELOPMENT GRANT - Create the Meat Talent Development Grant program with \$1,306,700 GPR in fiscal year 2021-22, \$1,329,700 GPR in fiscal year 2022-23, and 1.0 FTE GPR position. The new grant program will support meat industry workforce development needs by providing tuition assistance to individuals pursuing meat processing programming at Wisconsin universities, colleges, and technical schools.
- WATER ASSISTANCE - Develop a water utility assistance program at the Department of Administration and provide \$10,170,200 GPR in fiscal year 2021-22 and \$13,560,200 GPR in fiscal year 2022-23 to help customers defray the cost of water and wastewater bills. In addition, provide 1.0 FTE GPR position to support the program.

Justice

- TAD - Provide an additional \$15 million GPR and 2.0 FTE GPR positions in fiscal year 2022-23 for an expansion of the treatment alternatives and diversion program to greatly expand the program.
- TAD - Provide \$221,400 GPR in fiscal year 2021-22, \$273,500 GPR in fiscal year 2022-23, and 3.0 FTE GPR positions for the administration and evaluation of the treatment alternatives and diversion program.
- NONVIOLENT OFFENDER TREATMENT DIVERSION - Provide funding to continue the Nonviolent Offender Treatment Diversion Pilot Program consisting of \$261,000 GPR in each year and removing the program's June 30, 2021, sunset date.
- NONEMERGENCY BEHAVIORAL CRISIS - Provide \$280,000 GPR in each year of the biennium to create a program that expands the capacity of behavioral crisis lines that provide an alternative to 9-1-1 for nonemergency behavioral health issues.

- VIOLENCE INTERRUPTION GRANT - Provide \$2 million GPR over the biennium for the creation of a violence interruption grant program.
- JUVENILE JUSTICE - Modernize Wisconsin's juvenile justice system to be more evidence based by: (a) creating a sentence adjustment procedure for youth under 18 who commit a crime; (b) eliminating the Serious Juvenile Offender program; (c) eliminating life without the possibility of extended supervision for juvenile offenders; (d) limiting the use of detention sanctions or holds; and (e) prohibiting the use of restraints on anyone under the age of 18 when appearing in court in most cases.
- ADULT JURISDICTION – Raise the age of adult jurisdiction to 18 years of age and eliminate automatic original adult court jurisdiction for all youth under the age of 18; modifying the conditions under which a youth under the age of 18 may be waived into adult court; and increasing the age of delinquency from 10 years of age to 12 years of age.
- YOUTH JUSTICE SERVICES - Enhance youth justice services by creating 3.0 FTE GPR positions, program improvements, grants for community-based and out-of-home care services, and budgeting \$417,000 GPR in fiscal year 2021-22 and \$11,087,200 GPR in fiscal year 2022-23 for these purposes. Further modify the youth justice statutes and appropriations to provide more flexibility in allocating Youth Aids funding and enhancing system improvements.
- COUNTY COURT COSTS - Create a new sum sufficient appropriation and provide \$10 million GPR in each fiscal year to reimburse counties for the increased cost associated with raising the age that a circuit court or municipal court exercises adult court jurisdiction on individuals from 17 years of age to 18 years of age.
- SERIOUS JUVENILE OFFENDER PROGRAM - Eliminate the Serious Juvenile Offender program in the Department of Corrections and move responsibility for caring for future young offenders to the counties. Authorize the Department of Children and Families to distribute an additional \$5,327,500 GPR in fiscal year 2021-22 and \$13,529,700 GPR in fiscal year 2022-23 in youth aids to ensure counties can meet an increase in youth offender services that arise from the elimination of the Serious Juvenile Offender program.
- SENTENCING REVIEW COUNCIL - Establish a Sentencing Review Council to study and make recommendations regarding: the state's criminal code, equity in sentencing, the state's bifurcated sentencing structure, and sentences for violations committed by those between 18 and 25 years of age
- LAW ENFORCEMENT - Enhance law enforcement accountability and transparency by requiring specific standards in use of force policies, annual training on use of force options and deescalation tactics, and use of force reporting.
- LAW ENFORCEMENT TRAINING - Provide \$114,200 GPR in fiscal year 2021-22 and \$149,000 GPR in fiscal year 2022-23 and create 2.0 FTE GPR law enforcement officer training positions at the Department of Justice. The positions would focus on implicit bias training, emergency detention, and officer wellness.
- SEXUAL ASSAULT KITS - Establish statutory procedures for processing and storing sexual assault kits.
- CRIME VICTIM AND WITNESSES - Provide an additional \$4 million GPR in each year of the biennium to reimburse counties for eligible costs associated with providing services to crime victims and witnesses.
- FIREARMS - Require, with certain exceptions, that any firearm transfers be done through federally licensed firearm dealers with background checks conducted on recipients.
- FIREARMS - Create an extreme risk protection injunction procedure where a court, after a hearing, may order an individual to refrain from possessing a firearm if it finds by clear and

convincing evidence that they are substantially likely to injure himself or herself or another by possessing a firearm. The Department of Justice would, in addition to checking for prohibitions under current law, check whether an applicant for a license to carry a concealed weapon is prohibited from possessing a firearm under an extreme risk protection injunction.

- BAN THE BOX - Establish that requesting an applicant for employment to supply information regarding their conviction record, or otherwise considering the record, prior to selection for an interview constitutes employment discrimination.
- DISTRICT ATTORNEYS - Require district attorneys to offer a diversion and restitution alternative for certain misdemeanor offenses.
- SPD PRIVATE BAR RATE - • Index the State Public Defender's private bar rate to the consumer price index. Beginning on July 1, 2023, the rate would be adjusted biennially by a percentage equal to the average consumer price index over the preceding 12-month period.
- SUPERVISION/HUBER - Modify the process by which the Department of Corrections may revoke the extended supervision, probation, or parole of a person and modify the sanctions procedure for certain rule violations. Allow, at the discretion of the county sheriff, for a person being held in jail on an extended supervision hold to be eligible for Huber release privileges.
- EARNED COMPLIANCE CREDIT - Create an earned compliance credit for certain eligible individuals under the supervision of the Department of Corrections. The earned compliance credit would equal the amount of time served on extended supervision or parole without violating any conditions or rules of extended supervision or parole.
- EARNED RELEASE - Expand the earned release program to include educational, vocational, treatment, or other qualifying training programs that are evidence-based to reduce recidivism. Clarify that the earned release program can reduce a term of confinement below a mandatory minimum period of confinement.
- SENTENCING COURT - Allow a sentencing court to reduce the term of a person's extended supervision if certain conditions apply.
- EXPUNGEMENT - Expand the conditions under which an individual may have their criminal record expunged of a conviction.
- OPENING AVENUES TO REENTRY SUCCESS - Expand the Opening Avenues to Reentry Success program by providing \$2,254,400 GPR in fiscal year 2021-22 and \$3,005,800 GPR in fiscal year 2022-23.
- WINDOW TO WORK - Provide \$250,000 GPR in each year to expand the Windows to Work program.
- MEDICATION-ASSISTED TREATMENT - Provide \$800,000 GPR in each year to expand a medication-assisted treatment program at the Department of Corrections.
- RACINE YOUTHFUL OFFENDER CORRECTIONAL FACILITY - Establish a behavioral modification unit at Racine Youthful Offender Correctional Facility as an alternative to restrictive housing. Provide \$399,000 GPR in fiscal year 2021-22, \$520,500 GPR in fiscal year 2022-23, and 4.0 FTE positions.
- ALTERNATIVE TO REVOCATION - Provide \$1,039,200 GPR in fiscal year 2021-22 and \$2,078,300 GPR in fiscal year 2022-23 to expand options for alternatives to revocation.
- EARNED RELEASE - Provide \$1,579,800 GPR in fiscal year 2021-22, \$1,869,100 in fiscal year 2022-23, and 27.0 FTE positions to expand substance use disorder treatment capacity for the Earned Release Program at adult institutions.
- MARIJUANA - Legalize the sale of marijuana for recreational use if it is sold by a retailer holding a permit issued by the Department of Revenue and direct that 60 percent of the resulting excise tax collections be deposited into a newly created Community Reinvestment Fund to support

\$69,852,800 of programs to improve social equity, aid underserved communities, and support sparsity aid during fiscal year 2022-23.

- MARIJUANA - Provide \$203,400 PR in fiscal year 2021-22, \$251,100 PR in fiscal year 2022-23 and 3.0 FTE PR positions to the Department of Agriculture, Trade and Consumer Protection to provide staffing for the regulation of marijuana.
- COMMUNITY REINVESTMENT FUND - Provide from the Community Reinvestment Fund the following appropriations for fiscal year 2022-23:
 - \$10 million for grants to promote diversity and advance equity and inclusion.
 - \$10 million for community health worker grants.
 - \$10 million for equity action plan grants.
 - \$5 million to assist underserved communities.
 - \$34,852,800 to provide school sparsity aid.
- BODY-WORN CAMERAS - • Allocate funding to purchase body-worn cameras for state police officers and pay for the storage of data. This includes \$50,000 PR-S in each fiscal year for police officers in the Department of Administration's Division of the Capitol Police, \$406,000 in each year for the Department of Natural Resources' law enforcement staff, and \$700,000 SEG annually for the Department of Transportation's Division of State Patrol.

Conservations/DNR

- BUSINESS DEVELOPMENT CREDIT - Create a new earnings activity for the Business Development Credit for energy efficiency and renewable energy project expenditures by a business, specifying WEDC may provide an incentive of up to 25 percent of expenditures on real or personal property for such projects.
- PFAS - Provide \$731,300 SEG in fiscal year 2021-22, \$936,700 SEG in fiscal year 2022-23, 10.0 FTE SEG permanent positions, and 1.0 FTE SEG four-year project position in the Department of Natural Resources for the development and implementation of a per- and polyfluoroalkyl substances (PFAS) action plan.
- PFAS - Provide \$1,430,000 SEG in fiscal year 2021-22 and \$680,000 SEG in fiscal year 2022-23 for statewide monitoring and testing for PFAS.
- PFAS - Provide \$10 million GPR in each year of the biennium for a municipal grant program for the testing and remediation of PFAS by local units of government.
- PFAS - Provide \$1 million SEG in fiscal year 2021-22 for the collection and disposal of firefighting foam that contains PFAS.
- PFAS - Establish and enforce various environmental standards for PFAS
- STEWARDSHIP - Extend the Warren Knowles-Gaylord Nelson Stewardship 2000 Program until fiscal year 2031-32 at \$70 million per year. Provide \$700 million in bonding authority for the program.
- GREAT LAKES EROSION - Create a Great Lakes Erosion Control loan program. The program would assist municipalities and owners of homes located on the shore of Lake Michigan or Lake Superior where the structural integrity of municipal buildings or homes is threatened by erosion of the shoreline. Provide \$5 million SEG in fiscal year 2021-22 as an initial capitalization for the program.
- GREAT LAKES SEDIMENT - Authorize \$25 million in bonding for contaminated sediment removal from sites in the Great Lakes or its tributaries that are on Wisconsin's impaired waters list.
- SEALANTS - Prohibit the sale and use of sealants that contain coal tar, coal tar pitch, coal tar volatiles, or high concentrations of polycyclic aromatic hydrocarbons.

- NONPOINT SOURCE/MUNICIPAL FLOOD CONTROL - Authorize \$12 million in environmental fund-supported general obligation bonding authority for urban nonpoint source cost-sharing and the municipal flood control program. Of the \$12 million in bonding, \$8 million must be set aside for the municipal flood control program.
- FLOOD INSURANCE - Provide \$1 million SEG in expenditure authority in each year for the Department of Natural Resources to provide funding for the preparation of flood insurance studies and other flood mapping projects.
- COUNTY CONSERVATION STAFF – LAND AND WATER - Provide \$3.6 million SEG in fiscal year 2021-22 and \$3,708,000 SEG in fiscal year 2022-23 for grants to counties for county conservation staff to support land and water conservation activities.
- COUNTY CONSERVATION STAFF – CLIMATE CHANGE - Provide \$1.8 million GPR in each year for grants to counties for additional county conservation staff to support climate change resiliency efforts.
- TARGETED RUNOFF MANAGEMENT - Authorize \$6.5 million in bonding for grants to counties for capital projects that implement land and water resource management plans under the Targeted Runoff Management program.
- TARGETED RUNOFF MANAGEMENT - Provide an additional \$100,000 SEG in each year for noncapital projects under the Targeted Runoff Management program.
- SOIL AND WATER MANAGEMENT - Authorize \$7 million in bonding for grants to counties for implementation of land and water resource management plans, including cost-share grants to landowners through the Soil and Water Resource Management program.
- PRODUCER-LED WATERSHED - Provide an additional \$250,000 SEG in each year for Producer-Led Watershed grants.
- FARMLAND PRESERVATION - Expand the farmland preservation planning grant program to allow for activities that implement certified farmland preservation plans.
- NITROGEN OPTIMIZATION - Provide \$500,000 GPR in fiscal year 2021-22 to establish a nitrogen optimization pilot program.
- CARBON MARKET - Provide \$370,000 SEG in each year for a pilot program that studies the feasibility of a carbon market covering the state. Provide grants to producers and producer-led groups who participate in a carbon market pilot program.
- FOOD WASTE REDUCTION - Create a new food waste reduction pilot project, funded at \$100,000 GPR in each year.
- BIODIGESTER - Create a new biodigester planning grant, funded at \$250,000 GPR in each year.
- SNOWMOBILING - Provide \$200,000 SEG in each year for snowmobile trail mapping.
- ATVs - • Increase the funding for all-terrain vehicle and utility terrain vehicle trail maintenance, trail development, and recreational projects by \$250,000 SEG in each year. Increase the funding for county and local all-terrain vehicle and utility terrain vehicle trail projects and support facilities by \$617,500 SEG in each year.
- DEER CARCASS DISPOSAL - • Provide \$1 million SEG in one-time funding in fiscal year 2021-22 to issue grants for the purchase of deer carcass disposal sites.
- CWD - Provide \$50,000 SEG in each year for chronic wasting disease education for hunters.
- WILDLIFE VETERINARIAN - Provide \$900 SEG in fiscal year 2021-22 and \$19,500 SEG in fiscal year 2022-23 to allow the Department of Natural Resources to reallocate an existing position as a wildlife veterinarian.
- DAMS - Authorize \$6 million in bonding for the repair, reconstruction, and removal of dams.
- E-CYCLE GRANTS - Expand public accessibility to electronics recycling by providing E-Cycle grants to rural counties of the state.

- PRIVATE ON-SITE WASTEWATER TREATMENT - Eliminate the June 30, 2021, sunset date for the Private On-Site Wastewater Treatment System Replacement or Rehabilitation Program and provide the Department of Safety and Professional Services with spending authority of \$840,000 PR in both years of the biennium to allow a larger number of individuals and businesses to repair or replace eligible failing private on-site wastewater treatment systems through expanded eligibility criteria.
- ENVIRONMENTAL HEALTH – UW SYSTEM - Require the University of Wisconsin (UW) System Board of Regents to establish a partnership program among UW-Superior's Lake Superior Research Institute and surrounding northern Wisconsin communities to address local environmental health issues and priorities. Provide \$402,500 GPR in fiscal year 2021-22 and \$500,000 GPR in fiscal year 2022-23 and 5.0 FTE positions for the program.
- PFAS - Provide \$105,300 GPR in fiscal year 2021-22, \$140,300 GPR in fiscal year 2022-23, and 1.0 FTE GPR faculty position at the State Laboratory of Hygiene to conduct research and provide outreach and training to help reduce PFAS and other emerging contaminant exposures and associated adverse environmental and health impacts in the state.
- SOIL HEALTH FACULTY - Provide \$105,300 GPR in fiscal year 2021-22, \$140,300 GPR in fiscal year 2022-23, and 1.0 FTE GPR soil health faculty position at the State Laboratory of Hygiene that will work to advance, sustain, and protect the state's soil resources and an agriculture sector that is highly dependent on these soil resources.
- WI INSTITUTE FOR SUSTAINABLE TECHNOLOGY - Provide \$365,000 GPR in each year of the biennium for the Wisconsin Institute for Sustainable Technology at UW-Stevens Point.
- FRESHWATER COLLABORATIVE - Increase Wisconsin's commitment to advance water-centric training, research, and innovation by providing \$3 million GPR in fiscal year 2021-22 and \$6 million GPR in fiscal year 2022-23 for the freshwater collaborative in the University of Wisconsin System to offer student support and scholarships, and to recruit faculty and staff.
- OFFICE OF ENVIRONMENTAL JUSTICE - Create the Office of Environmental Justice within the Department of Administration, which will facilitate collaboration across state agencies and engage with environmental justice advocates, communities of color, Native Nations, and low-income populations to design climate policies that reduce emissions and pollutants and address the cumulative and deadly impact of their concentration within those communities. Provide a new 1.0 FTE PR-S unclassified office director position, appointed by the Secretary of Administration. In addition, reallocate 2.0 FTE vacant positions within the department for classified office staff.
- OFFICE OF ENVIRONMENTAL JUSTICE - Provide funding to the Office of Environmental Justice for the execution of state and local government climate risk assessment and resilience plans. Provide a new 1.0 FTE PR-S unclassified position for a new chief resilience officer to oversee development and execution of these plans.
- CARBON-FREE - Establish a technical assistance grant program to assist municipalities and tribal nations to develop a plan to be carbon-free by 2050. Provide \$200,000 GPR over the biennium at the new Office of Environmental Justice for this purpose.
- CLIMATE CHANGE - Require a comprehensive plan be developed by municipalities to address climate change, require that local hazard mitigation plans include climate change, and require communities throughout the state to include climate change in their community health improvement assessment and plans.
- OFFICE OF SUSTAINABILITY AND CLEAN ENERGY - Establish the existing Office of Sustainability and Clean Energy in statute within the Department of Administration, which will continue to promote the development and use of clean and renewable energy across the state, advance

innovative sustainability solutions that improve the state's economy and environment, diversify the resources used to meet the state's energy needs, and generate family supporting jobs by promoting the expansion of Wisconsin's clean energy economy.

- RENEWABLE AND CLEAN ENERGY - Create a \$4 million renewable and clean energy research grant in fiscal year 2021-22 administered by the Office of Sustainability and Clean Energy and funded by the environmental fund.
- ELECTRIC VEHICLE CHARGING - Allocate \$10 million of the remaining Volkswagen emissions settlement funds to be dedicated to the reestablishment an electric vehicle charging station grant program administered by the Department of Administration. Allocate remaining funds in excess of \$10 million for the replacement of state vehicles with a focus on clean energy vehicles.
- CARBON EMISSIONS - Require the Public Service Commission to reevaluate the appropriate social cost of carbon every two years, in consultation with the Department of Natural Resources, and report the findings in a biennial report to the standing legislative committees. Require the commission to consider the social cost of carbon when determining whether to issue construction certifications
- INNOVATIVE TECHNOLOGIES PILOT PROGRAM - Direct the Public Service Commission to establish an Innovative Technologies Pilot Program, which would set a voluntary goal for utilities to collectively spend \$100 million over five years on a pilot for a range of innovative technologies, including storage and microgrids.
- CLEAN ENERGY PROJECTS –
 - Require the Public Service Commission to create a model ordinance for counties to establish a property assessed clean energy (PACE) financing program
 - Authorizing the Focus on Energy program to allocate funds to market PACE programs across the state.
 - Authorize regulated utilities to offer inclusive on-bill financing for energy efficiency improvements.
- POWER PLANTS - Expand the types of remaining costs incurred by retiring power plants that can be securitized using environmental trust bonds, which can result in cost-savings for customers.
- STATE PARK FEES - Providing fee waivers for annual admissions receipts to state parks for the families of fourth grade students. Provide \$243,600 GPR in each year to the Department of Natural Resources to offset the revenue foregone under this item.

Other

- REDISTRICTING – Require the Legislature to take up the redistricting maps proposed by the People’s Maps Commission.
- TOURISM – Provide \$781,800 GPR of ongoing marketing funds to allow the Dept. of Tourism to kickstart marketing campaigns and bolster tourism as COVID subsidies.
- SMALL BUSINESS – Create a small business retirement savings program for privately-employed individuals who are not currently eligible for employer-sponsored retirement plan.
- ARTS BOARD – Provide \$250,000 GPR in one-time funding to the Wisconsin Arts Board for grants to businesses, local governments, and business development organizations.
- FOOD ASSISTANCE – Provide \$10 million GPR in each year for grants to nonprofit food assistance agencies to purchase Wisconsin made or grown agricultural products.
- WING - Provide \$1.7 million GPR and 5.0 FTE positions annually to expand the comprehensive wellness program, which works to improve the culture of health and wellness within the Wisconsin National Guard.

- ACTIVE DUTY NATIONAL GUARD - Expand the current law exclusions from income for active duty National Guard and Reserve compensation to exclude from a taxpayer's Wisconsin adjusted gross income any amounts earned by National Guard members while on National Guard state active duty or by reservists activated for certain preplanned support missions. The fiscal impact of this proposal is an estimated reduction in tax revenue of \$430,000 in each year.
- VOTER REGISTRATION - Provide \$156,100 GPR in fiscal year 2021-22 and \$16,600 GPR in fiscal year 2022-23 for the Wisconsin Elections Commission to work with the Department of Transportation to begin automatic voter registration. The commission should facilitate the initial registration of all eligible electors as soon as practicable.
- COUNTY AND MUNICIPAL AID PROGRAM - Provide successive 2 percent increases in the funding for the County and Municipal Aid Program to take effect in 2021 and then again in 2022. Each county and municipality's base entitlement will be increased by 2 percent over its 2020 levels for 2021 payments and then will be increased by 2 percent again in 2022 over 2021's payments. These increases will provide \$15.06 million for county and municipal governments in 2021 and \$30.4 million in 2022 and in future years.
- MUNICIPAL SERVICES - Increase the payments for municipal services appropriation to restore the cuts imposed during the 2011-13 biennium, providing \$2.065 million annually to governments serving property tax-exempt state property
- CROSS-BOUNDARY TRANSIT - Make it easier for communities to work together to create cross-boundary transit corridors by creating an exclusion to county and municipal levy limits for crossmunicipality transit routes where the counties and municipalities meet a number of criteria, including that the counties and municipalities claiming the exclusion must be adjacent, must have entered into an intergovernmental cooperation agreement to provide new or enhanced transit services across county or municipal boundaries, and that each participating county or municipality must have passed a referendum approving the agreement.
- EMERGENCY MEDICAL SERVICES - Allow towns to fund emergency medical services via the same mechanisms allowed for fire protection services.
- TIF - Modify current tax incremental financing (TIF) law to allow municipalities to use TIF districts to spur the creation of workforce housing.
- COMPENSATION RESERVES – JCOER
 - Provide \$87.5 million GPR over the biennium for a general wage adjustment for most state employees at state agencies and UW System of 2 percent on January 1, 2022, and an additional 2 percent on January 1, 2023.
 - Provide \$10 million GPR over the biennium for targeted market and parity wage adjustments for employees within certain classifications in state agencies to better align their wages to those paid by private and other public sector employers.
 - Decrease the waiting period for all new state and UW System employees to receive the employer share of their health insurance from three months to one month.
 - Create a new paid parental leave program for state and UW System employees for up to six weeks annually.
 - Establish Juneteenth as a holiday for all of state government.
 - Increase the minimum hourly wage for all permanent and project employees at state agencies to \$15.
 - Institute a pay progression system for certified nursing assistants and residential care technicians within the Department of Health Services, the Department of Veteran Affairs, and the Department of Corrections.
 - Fund paid sick leave for limited term employees that work for state agencies.

- Modify the vacation allowance during the first five years of employment at state agencies to improve retention of employees for state agencies.
- Increase hourly night and weekend differential rates for those employees of state agencies that qualify for such payments.
- MERIT COMPENSATION - Restore funding for the discretionary merit compensation appropriation to \$6 million GPR per year.
- CONSOLIDATE BOARDS - Consolidate the Department of Employee Trust Funds' Wisconsin Retirement Board and the Teachers Retirement Board into the Employee Trust Funds Board, reducing the number of retirement board member positions from 35 to 13.
- OFFICE OF DIGITAL TRANSFORMATION - Establish the Wisconsin Front Door on-line services hub, a comprehensive portfolio of state resources in a consolidated and centralized format, and support data-sharing initiatives among state agencies. The office would also support an opioid and methamphetamine data system that would require collaboration and data-sharing from a number of state agencies.
 - Provide \$1.5 million GPR in fiscal year 2021-22 to establish the opioid and methamphetamine data system.
 - provide expenditure and position authority for a new unclassified office director, one-time start-up costs, and ongoing consulting service costs.
 - Reallocate existing expenditure and position authority for classified office staff.
- GRANT RESOURCE TEAM - Establish a grant resource team within the Department of Administration's Office of the Secretary, which will assist state agencies and local governments in navigating state and federal grant application processes.

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Healthy Communities Initiative

BACKGROUND:

The COVID-19 pandemic exposed financial inadequacies in Wisconsin's public health infrastructure. A lack of sufficient public health funding leaves communities across the state vulnerable to public health threats. Committed state funding provided directly to local public health departments would enable communities to implement public health strategies more effectively and equitably.

It would also allow local health departments to administer the nearly two-dozen unfunded mandates the state has placed on local health departments. Please see the attached list of unfunded mandates.

Why Public Health Funding

According to *America's Health Rankings*, public health funding allows states to proactively implement programs that [improve health](#). Investments in public health programs represent around 10% of all health care spending in most countries, yet its impact can be [substantial](#). An investment of \$10 per person per year in evidence-based programs in local communities that are proven to increase physical activity, improve nutrition, and prevent smoking or other tobacco use could save the country more than [\\$16 billion](#) annually within five years. This is a potential savings of \$5.60 for every \$1 invested.

However, Wisconsin is not investing in taking advantage of these savings. The Trust for America's Health has calculated that across all states, the median amount of financial 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.

REQUEST:

Support equitable public health infrastructure investment by creating a continuing appropriation to provide block grants to local public health departments, with the following parameters:

1. Allow for this funding to be flexible for local health departments to function with increased support in alignment with their community's needs.
2. Take into account certain factors, such as base allocation, general population, target populations, risk factors and geographic area to establish an equitable allocation formula for distribution of funds.

The Healthy Communities Initiative will allow local health departments to adequately function as their local community's health strategist and investments will be used by local health departments for core public health functionalities, as follows:

- Develop preparedness response strategies to guarantee the capacity to respond quickly to public health emergencies
- Utilize testing and tracing to assess and track over time the health of communities
- Communicate important, accurate data and information to the public in a timely manner
- Improve quality and performance through utilization of best practices to develop public health workforce and achieve outcome goals
- Correct disparities to advance health equity
- Increase community health services, like cancer screenings

Healthy Communities Initiative

DISCUSSION POINTS:

- Supporting a strong public health infrastructure is paramount with the continuing occurrences of natural disasters, increased drug use, and infectious diseases.
- Emerging and existing public health threats jeopardize security, the economy and quality of life for all Wisconsin citizens.
- The COVID-19 pandemic shows that the challenges presented by public health threats are more complex than they were even a few years ago.
- Throughout the pandemic, insufficient investment in infrastructure has had a detrimental effect on local health departments, causing increased threat to the public.
- For instance, public health departments are fighting to keep up with nearly two-dozen unfunded state mandates placed on departments. Other important functions of public health departments are neglected or deprioritized due to a lack of resources.
- Insufficient infrastructure has a detrimental effect on downstream healthcare providers. With public health departments struggling to contain the spread of COVID-19 due to insufficient infrastructure, hospitals in every region of the state have experienced increased usage of hospital beds.
- This causes a danger not only for the continued hospital treatment of subsequent patients, but it also threatens the availability of hospital beds for patients experiencing non-COVID health emergencies.

OTHER FUNDING PRIORITIES

- \$10 million in new funding for programs to improve environmental health programs
 - Eliminate / abate lead hazards related to paint, soil and pipes statewide
 - High levels of lead can damage the nervous system in children, causing problems that range from hearing loss and seizures to unconsciousness and death.
 - Even relatively low levels of exposure can cause subtle cognitive problems including learning disabilities and decreased intelligence.
 - Still, children are exposed to lead in pipes, soil, and paint, especially in older homes
- \$4 million in new funding for health baby initiatives
 - Increase cancer screenings, health exams, and STI testing in target communities.
 - Support healthier pregnancies and births.
 - Address racial disparities in maternal and child health.
- \$3.325 million in new funding for Tobacco Prevention and Control Program
 - Better support a comprehensive program to prevent the rising youth use rate of e-cigarettes and target populations that use tobacco at higher rates.
 - Fully cover all Wisconsin counties with tobacco prevention coalitions.
 - Increase funding to tobacco cessation programs like UW-CTRI, the Quit Line, and First Breath, which helps pregnant mothers quit tobacco.
 - This additional funding would bring the program to the 15% CDC benchmark (\$8.625 million per year).
- \$625,000 in new funding for Nutrition and Physical Activity programs
 - The Department of Health Services lost a competitive Centers for Disease Control and Prevention grant in 2020.
 - This investment would allow their good work to continue at a minimal level.
 - 14% of Wisconsin youth (10-17) suffer from obesity, and 39% of Wisconsin adults are obese (5% higher than the national average).

2021
2022

WISCONSIN PUBLIC HEALTH ASSOCIATION &
WISCONSIN ASSOCIATION OF LOCAL HEALTH DEPARTMENTS AND BOARDS

LEGISLATIVE PRIORITIES



WALHDAB

Public Health In Action

Wisconsin Association of Local Health Departments and Boards

WPHA & WALHDAB funding and policy priorities are below. Public health in Wisconsin is chronically underfunded both nationally and statewide. We continue to advocate for fully funding Wisconsin's public health system and policies to advance health equity.

Legislative Priorities

Preserving public health statutory authority for control of communicable diseases and other public health threats

Pursue proactive approach to maintaining public health authority.

Building and retaining public health infrastructure through increased and more flexible public health funding

Create dedicated funding for core public health services that are sustainable, predictable, and adequate.

A new allocation of \$36 million per year, over and above what is currently budgeted for public health.

Divided between local health departments and existing public health programs, with at least half going to local health departments.

Address the social determinants of health and preserving and increase current investments for these efforts

Address Racism as a Public Health Crisis.

Support legislation that promotes and fosters diversity, equity, and inclusion so that all people are treated fairly and respectfully and can attain their full health potential.

Policy Priorities

Criminal Justice Reform

- Increase treatment alternatives and diversion program (TAD) funding for mental health and substance abuse issues
- Increase funding allocated to counties for juvenile justice services

Income Stability and Employment

- Supporting and expanding Paid Family Leave
- Increase Earned Income Tax Credit and move from one-time to monthly payments
- Establish tax credit for family caregivers.
- Increase workforce training/transitional jobs

Early Childhood

- Fully fund School Breakfast Program

Core Public Health Services

- Racism, Immunizations, climate change, tobacco prevention and control

Housing

- Expand low-income housing tax credits for developers and rental assistance vouchers for renters
- Funding for programs to eliminate / abate lead paint, soil and pipes

About Public Health

Public health is a broad science with a focused goal of protecting and improving the health of Wisconsin residents. Over the last century, public health has dramatically increased life expectancy through such scientific advancements as vaccination, infectious disease control and chronic disease prevention. It has become increasingly clear that health outcomes are primarily driven by the social and economic conditions in which we live, work, play, pray, grow up, and grow old. That's why public health is increasing its emphasis on education, income and employment, housing, and other "social determinants of health".

Together, WPHA and WALHDAB represent over 1,200 public health professionals in communities across Wisconsin, striving to prevent, promote, and protect the residents of the state.

About WPHA

The Wisconsin Public Health Association is the largest statewide association of public health professionals in Wisconsin. Established in 1948, WPHA exists to improve, promote and protect health in Wisconsin. WPHA strives to be diverse in its constituency, rich in partnerships and valued for its policy recommendations and best practices. WPHA is the collective voice for public health in Wisconsin.

About WALHDAB

The Wisconsin Association of Local Health Departments and Boards is the statewide leader and voice for local governmental public health. WALHDAB was founded in 1991 to serve local health departments and boards of health.



News FROM WASHINGTON

NACCHO
National Association of County & City Health Officials

February 12, 2021



Biden Asks Supreme Court to Uphold ACA

The Biden administration has withdrawn the federal government's support for a Supreme Court challenge to the ACA, telling the Supreme Court that the law should stand. The [letter](#), sent by the Justice Department (DOJ), informed the Court that the change in administration has caused DOJ to reconsider the government's position, and notified the Court that the U.S. no longer adheres to the conclusions in the previously filed brief of the federal respondents. The new position of the U.S. is that the provision of the law in question is constitutional.

All About Coronavirus

Congress Moving Forward with Next COVID-19 Package

This week, committees in the House began marking up various pieces of legislation to be compiled as the next COVID-19 relief package. The package is being crafted in order to use a legislative process called budget reconciliation, which only requires a simple majority in the Senate.

Yesterday, the House Energy and Commerce Committee [began considering amendments to their reconciliation](#) package which includes \$46 billion for activities to detect, diagnose, trace, and monitor COVID-19 infections and related strategies to mitigate the spread of the virus, as well as \$7.6 billion to bolster the workforce of state, local, and territorial public health departments by adding case investigators, contact tracers, social support specialists, community health workers, public health nurses, and any other positions that may be necessary to prevent, prepare for, and respond to COVID-19. House Democrats on the committee are also pursuing \$100 million in environmental justice grants and \$4.5 billion to help low-income households cover their energy bills during the COVID-19 crisis.

In a notable win, the bill contains \$100 million for the Medical Reserve Corps (MRC). NACCHO has advocated for many years to increase funding for the MRC program, which has seen flat funding annually at \$6 million per year since 2016. Since the spring, [we have requested](#) an emergency appropriation of \$100 million as a way to harness volunteerism to help combat the pandemic. A \$100 million increase for the program would allow for each unit to increase its budget by \$100,000 on average, and other units to be organized, exponentially increasing the benefits to local communities, as well as the health and safety of the public. Last year, MRC [units contributed](#) over 800,000 hours to the COVID-19 response.

The bill also extends Medicaid benefits to new mothers with children up to 12 months of age and offers an increase in federal matching funds for two years to states to enact Medicaid expansion where they have not yet done so.

NACCHO [sent a letter](#) to the Energy and Commerce Committee thanking them for their efforts to support the public health response and also released a [press statement](#).

In a separate stimulus measure, House Committee on Oversight and Reform Chairwoman Carolyn Maloney (D-NY) [announced that](#) her committee would be voting on a bill to allocate \$350 billion in funding to states, localities, Tribes, and territories. The bill creates a new dedicated state and local fund that bypasses the traditional appropriations process by making these funds mandatory, rather than discretionary. This fund is similar to the COVID Relief Fund from the CARES Act of 2020.

House Democrats on the Ways & Means Committee have [released their plan](#) to expand the Affordable Care Act (ACA) subsidies as part of the coronavirus relief package. The bill would fully subsidize ACA coverage for people earning 150% of the federal poverty level, as well as those receiving unemployment insurance.

After each committee marks up their bills, the Budget Committee will prepare an omnibus budget reconciliation bill for consideration by the full House of Representatives, where it is expected to pass, and then the Senate.

President Biden Announces Community Health Centers Vaccination Program

In an effort to boost vaccinations, President Biden [announced the launch](#) of the first phase of the federally qualified health center (FQHC) program for

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COVID-19 vaccination. Starting next week, select FQHCs will begin directly receiving vaccine supplies to vaccinate their patients. The initial phase will include at least one Community Health Center in each state, expanding to 250 centers in the coming weeks. NACCHO has recommended to the administration that as the program is rolled out, FQHCs should partner with local health departments in their communities, as well as the need for local health departments to have full visibility as to the doses coming into their borders. .

Biden Administration Announces Health Equity Task Force

On Wednesday, President Biden [announced the formation](#) of the White House COVID-19 Health Equity Task Force as part of their focus on the pandemic. The task force members include individuals across a range of racial and ethnic groups, as well as educators and public health experts, including the Chief Medical Executive for the State of Michigan, [Joneigh Khaldun](#), MD, MPH, FACEP. Dr. Khaldun was previously the Director and Health Officer for the Detroit Health Department.

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Congressional Activities

Appropriations Ranking Member Not Seeking Re-Election

Senate Appropriations Committee ranking member Richard Shelby (R-AL) [announced](#) that he will not seek re-election in 2022. Shelby is the fourth most senior member of the Senate and the longest-serving senator from Alabama. The Appropriations chairmanship is one of the most coveted in the chamber and controls the power of the purse.

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Media Mentions

NACCHO spoke to or was referenced in many different media outlets this month regarding the rapidly changing COVID-19 situation on the ground and to help promote the work of our members, including the following:

- February 9, 2021, CNN: [Jumping hurdles for a second dose of COVID-19 vaccine](#)
- February 9, 2021, Stateline: [COVID-19 variants further strain public health agencies](#)
- February 10, 2021, Mid Hudson News: [Ulster County to tackle opioid OD spike](#)
- February 11, 2021, CNN: [More Americans say they're willing to take a COVID-19 vaccine, but supply remains an issue](#)
- February 11, 2021, Las Vegas Review-Journal: [Sisolak begins to open up Nevada, lifts gathering limits](#)
- February 12, 2021, McKnight's Senior Living: [Help is on the way for unvaccinated, homebound seniors: AARP](#)

Voice of Local Health Departments

- [Joint Statement for COVID-19 Recovery Priorities to Meet Children's Nutritional Needs \(2/8/21\)](#)
- [Letter to Congress Lauding The Public Health Provisions in Latest Coronavirus Relief Package \(2/11/21\)](#)

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Resources

- NACCHO: [COVID-19 Response](#)
- CDC: [COVID-19](#)
- CDC: [Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure](#)
- Health Affairs Blog: [Actualizing Better Health and Health Care for Older Adults](#)
- National WIC Association: [The State of WIC: Healthier Pregnancies, Babies, and Young Children During COVID-19](#)
- Trust for America's Health: [Pain in the Nation](#)


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Webinars

Date	Time	Description
February 16, 2021	2:00pm ET	NACCHO, Mobilizing for Action through Planning and Partnerships (MAPP) Evolution
February 18, 2021	3:00pm ET	NACCHO, Hygiene-related behaviors during the COVID-19 pandemic among U.S. populations: A review
February 22, 2021	2:00pm ET	NIHCM, Nurses on the Frontline: Strengthening America's Health Care Workforce
February 22, 2021	3:00pm ET	Big Cities Health Coalition, COVID-19 Health Inequities in Cities Webinar
February 24, 2021	1:00pm ET	Public Health Communications Collaborative, Webinar with CDC
March 3, 2021	3:00pm ET	NACCHO, Addressing Hepatitis A Outbreaks During COVID-19: Challenges, Opportunities, and Innovations

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 <p>NACCHO National Association of County & City Health Officials <i>The National Connection for Local Public Health</i> www.naccho.org</p>	 <p>Public Health <small>Prevent. Promote. Protect.</small></p>	<p>The mission of the National Association of County and City Health Officials (NACCHO) is to improve the health of communities by strengthening and advocating for local health departments.</p> <p>1201 Eye Street, NW Suite 400 Washington, DC 20005 P 202-783-5550 F 202-783-1583 © National Association of County and City Health Officials</p>
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1201 Eye Street, NW, Suite 400, Washington, DC 20005

February 11, 2021

The Honorable Frank Pallone, Jr.
Chairman
House Energy and Commerce Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Cathy McMorris Rodgers
Ranking Member
House Energy and Commerce Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Pallone and Representative McMorris Rodgers:

On behalf of the National Association of County and City Health Officials (NACCHO) and the nearly 3,000 local health departments across the country, I write to thank you for your efforts to support the public health response to COVID-19. Local health departments have been and continue to lead on the front lines of this response with no end in sight. However, they do so despite great policy and funding challenges.

NACCHO and local health departments appreciate the extensive attention paid to the public health response to COVID-19 in the budget reconciliation package to be considered today by your committee. Below we have cited aspects of the package with particular importance to local health departments.

Public Health Workforce

Public health is a discipline that relies on people and a strong, experienced workforce is critical to achieve our goals. Unfortunately, local health department came into the pandemic at a workforce deficit. Local health departments lost 20% of their jobs (37,000) nationwide after the 2008 recession, and although they have finally started to rebuild, adding 3% of that lost workforce back (6,000 jobs) between 2016 and 2019, the increases have not kept up with demand.¹ Over the same period, the nation's population increased by 8%.² As a result, local health departments have actually lost 21% of workforce capacity since 2008, with the number of full-time equivalent employees dropping from 5.2 per 10,000 people in 2008 to 4.1 per 10,000 people in 2019.¹

The results of this disinvestment are seen in the COVID-19 response, as local health departments are stretched thin and staff are pulled away from other essential areas in order to respond to the pandemic. Growing and strengthening the paid governmental public health workforce is critical now and long into the future as we recover from the pandemic and must turn our attention back to the many other public health challenges that have fallen out of focus during the pandemic.

The budget reconciliation bill includes \$7.6 billion for awards to state, local, and territorial public health departments for staff to serve as case investigators, contact tracers, social support specialists, community health workers, public health nurses, disease intervention specialists, epidemiologists, program managers, laboratory personnel, informaticians, communication and policy experts, and any other positions as may be required to prevent, prepare for, and respond to COVID-19.

We particularly applaud the language in the bill that explicitly permits subawards to local health departments to carry out these activities. Over the course of the response, we have seen great



variability in the amount and speed with which public health funds have reached local health departments.³ Underinvestment and/or delays in obtaining this federal support poses significant challenges to local health departments. Therefore, we further request that this package, if possible, or in any future COVID relief package specifically **designate a portion of the funds to go for local health departments to help ensure equitable and timely access to these resources** so that they can continue to lead on the response in the short term, as well as over the long-term response and through recovery.

We also applaud the focus on and infusion of support for the Medical Reserve Corps, which is the existing way for individuals to volunteer with health departments to respond to pandemics and other emergencies. Last year, the Medical Reserve Corps program, with two-thirds of units administered by local health departments, facilitated 800,000 volunteer hours devoted to the COVID-19 response. While volunteers provide their time free of charge, it takes resources to operate the program for efforts like recruitment, training, management, and supervision. An increase to \$100 million for the program would allow for each unit to increase its budget by \$100,000 and other units to be organized, exponentially increasing the benefits to local communities and the health and safety of the public.

Vaccine Distribution

The federal government has made significant investments to potentially stop the spread of COVID-19 through development of multiple vaccines. However, to date, we lack the necessary investments in the governmental public health system to ensure rapid and effective deployment and tracking of available vaccine as well as vaccine doses administered. The window to hire and train staff, upgrade data systems, and address vaccine confidence is rapidly closing, and resources are needed now.

Thank you for including an additional \$7.5 billion for activities to plan, prepare for, promote, distribute, administer, monitor, and track COVID-19 vaccines in the budget reconciliation bill. We are hopeful that this funding will help support local health departments in their mission to vaccinate the public and coordinate these efforts their communities. Simply put, when local health departments get vaccine, they have shown that they can be incredibly efficient in getting it to individuals in their community. As additional access points to receive vaccine open, it is even more critical that local health departments have the funds and situational awareness to lead the effort in their jurisdictions. This includes not only vaccine administration, but also working with health care providers and other vaccinators, community-based organizations, and other partners to coordinate access to the vaccines and leverage trusted relationships with the public and deliver accurate, culturally appropriate messages about the safety and importance of getting a COVID-19 vaccine. Moreover, these investments are important to build out vaccine infrastructure and track all the necessary information about vaccine administration to identify any safety problems and ensure people receive the necessary doses of vaccine within the recommended timeline. We also appreciate the support within the bill of improved data systems to help with surveillance and ensuring the people at greatest risk for illness and death from COVID-19 have access to vaccination. In your oversight, we urge you to ensure that these investments address challenges at all levels of the governmental public health system (federal, state, *and* local) and that all levels have access to the critical data they need to ensure an equitable vaccine rollout.

COVID-19 Tracing and Testing

Thank you for including \$46 billion for activities to detect, diagnose, trace, and monitor COVID-19 infections and related strategies to mitigate the spread of COVID-19. The governmental public health system, including local, state, and federal public health agencies, is the critical infrastructure our nation has to slow the spread of this disease, track our progress, protect particularly vulnerable populations,

and preserve critical health care resources. This work is incredibly resource and time intensive, requiring strong funding, staffing, and infrastructure. In addition to providing federal support, NACCHO **requests that Congress direct the federal government to publicly track any disbursement of federal COVID-19 response funds down to the local health department level to identify best practices as well as better understand the challenges of getting money to the front lines of the response.** Similar tracking language was included in the COVID-19 relief package passed in December 2020 and has already encouraged greater attention to the extent to which funding allocated to the states is passed through to local health departments.

In closing, NACCHO appreciates your thoughtful consideration of these recommendations and looks forward to working with you to prepare the nation for the next phase in this fight against the COVID-19 pandemic. For additional information, please contact Adriane Casalotti, NACCHO's Chief of Government and Public Affairs, at acasalotti@naccho.org.

Sincerely,



Lori Tremmel Freeman, MBA
CEO

¹ NACCHO's 2019 Profile Study: Changes in Local Health Department Workforce and Finance Capacity Since 2008. Retrieved October 30, 2020 from https://www.naccho.org/uploads/downloadable-resources/2019-Profile-Workforce-and-Finance-Capacity_final-May-2020.pdf

²Population Reference Bureau, The U.S. Population Is Growing at the Slowest Rate Since the 1930s, <https://www.prb.org/the-u-s-population-is-growing-at-the-slowest-rate-since-the-1930s/>

³Currently, CDC sends funds directly to states, territories, and only 6 large cities (<https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/funding-update.pdf>). The rest of the nation's local health departments are reliant upon their state to decide, if, how much, and when to send money to the local level. That has led to vast inconsistencies across the country in the amount of funding and the speed that federal funds are making it to local health departments to support this response. For more information see: <https://www.reuters.com/investigates/special-report/health-coronavirus-tracing/> and <https://khn.org/news/uspublic-health-system-underfunded-under-threat-faces-more-cuts-amid-covid-pandemic/>