

BOARD OF HEALTH AGENDA

April 28, 2021 5:15 PM

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: 145 785 1645

**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. Walk through remote meeting process. Welcome Guests. Order of the Agenda. Request to pull items from the 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. COVID-19 Update-verbal
4. Consent Agenda (Action Required-approved for full content)- 5 minutes
 - a. Approval of minutes from March 24, 2021 meeting-enclosed
 - b. Approval of Overdose Fatality Review (OFR) funding-enclosed
 - c. Approval of Stipends-enclosed
5. Business Item (Action Required)- 20 minutes
 - a. Review and receive COVID-19 Public Health Expectations-enclosed
<https://www.eauclairewi.gov/Home/ShowDocument?id=32605>
 - b. Review and Receive Quarterly Financial Update-enclosed
 - c. Approval of Eau Claire Vaccination Outreach Funding-enclosed

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.

- d. Approval of Western Region Vaccination Outreach Funding-enclosed
 - e. Approval of Breast Feeding Campaign funding-enclosed
 - f. Approval of Strategic Plan extension-enclosed
 - g. Approval of representative on the Eau Claire County Groundwater Advisory Committee-enclosed
 - h. Approval of 2021-2022 License Renewal Fee Deviation due to Public Health Emergency
6. Other information items from staff for the Board- *15 minutes*
- a. Director/Health Officer Report -enclosed
 - b. Correspondence/Media -enclosed
 - c. Service Recognition/Retirement-enclosed
 - Paulette Magur, Communicable Disease Division Manager-32 years
 - d. Preliminary 2020 Year End Financial report-close out 2020 budget-enclosed
 - e. 2020 Annual Report-will be sent next week
 - f. Strategic Plan Update-enclosed
 - g. EC Healthy Communities Update-enclosed
 - h. Quality Improvement Plan update-enclosed
 - i. County Health Rankings –<http://www.countyhealthrankings.org/>
[Eau Claire County, Wisconsin | County Health Rankings & Roadmaps](http://www.countyhealthrankings.org/)
7. Board member informational items -*10 minutes*
- a. Communicable Disease taskforce update-enclosed
 - b. Board evaluation – discussion to determine questions for next self-evaluation-enclosed
 - c. Public Health Policy/Advocacy-enclosed
 - Biannual budget update – handout with graphics from WALHDAB, written testimony
 - WI legislative update – WALHDAB/WPHA Public Affairs committee
 - Federal American Recovery Act local funding – population health outcomes
 - d. WPHA/WALHDAB annual conference
<https://www.wpha.org/page/2021AnnualPublicHealthVirtualConference>
8. Requests from Board members for future agenda items to be given consideration- *5 minutes*
9. Next business meeting – May 26, 2021
10. Adjourn

Joint Western Region Local and Tribal Public Health Statement Urging Wisconsinites to Continue Following COVID-19 Recommendations

Local and tribal health departments are jointly reminding everyone that even though we have started vaccinating for COVID-19, it is important that we remain diligent in our efforts of fighting this virus. Our organizations are working together to inform, educate, and protect everyone in our communities from COVID-19. We are doing everything we can, but we need your help. **You are the most important part of stopping this pandemic.**

The Western Region of Wisconsin is still seeing cases of COVID-19, including those from COVID-19 variants. Surrounding states, such as Minnesota, are experiencing high numbers of these cases. This means our area will likely soon see higher numbers if actions are not taken, as this increase is already being experienced in border counties. This is also important because even though your local hospital may not have significant impacts from COVID-19, patient transfers may be impacted or delayed.

Despite vaccination occurring, there is still a large population that hasn't been vaccinated, including those under 16, who are not yet approved to be vaccinated. None of the below signed counties have over 40% of their eligible population fully vaccinated. Continuing to take the actions below can help protect children and your loved ones.

Children can get sick and spread COVID-19 to others in schools, families and the community. There have been 90 children in Wisconsin that have developed multisystem inflammatory syndrome in children (MIS-C). MIS-C is a rare, but serious condition where parts of the body can become inflamed. Children that have been diagnosed with MIS-C have been diagnosed with or been around someone with COVID-19.

Here is how you can help:

- **Wear a Mask.** When worn properly, masks do work and save lives.
- **Physically Distance.** Stay at least 6-feet from people who don't live in your household.
- **Wash Your Hands Often.**
- **Avoid Large Gatherings.** Large gatherings put you, everyone at the gathering, and everyone you come into contact with after the gathering at risk.
- **Get Vaccinated.** You can find information on the safety of COVID-19 vaccines and how to get vaccinated by visiting your county or healthcare provider's website.

This has been an extremely difficult year for everyone, but we need to stay the course of prevention and mitigation. We know that there is a desire to cut back on the strategies wherever possible, but congregate settings are not the places to do it. The strategies that schools and others have put together work together. Simply put,

handwashing, physical distancing, masking, and vaccination are efforts that work best when practiced together.

DocuSigned by:
Ellen Moldenhauer
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Public Health Manager/Health Officer
Jackson County Health and Human Services

DocuSigned by:
Heath Stewart
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Health Officer/ Director
Pepin County Health Department

DocuSigned by:
Anita Zimmer
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Public Health Officer
Rusk County Public Health

DocuSigned by:
Jackie Lowe
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Health Director
St. Croix Tribal Health Clinic

DocuSigned by:
Anna Tresgus
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Interim Health Officer/PH Supervisor
Burnett County DHHS

DocuSigned by:
Jane Klekamp
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Associate County Administrator
La Crosse County

DocuSigned by:
Barbara Barczak
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Director/Health Officer
Trempealeau County Health Department

DocuSigned by:
Jan Schultz
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Public Health Director/Health Officer
Polk County Health Department

DocuSigned by:
Cheri McKell
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health officer
Washburn County Public Health

DocuSigned by:
Kiana Baudin
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Executive Director of Health
Ho-Chunk Nation

DocuSigned by:

Josie Knauer

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Health Officer

Buffalo County Public Health

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AE Snyder

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Health Officer

Pierce County Public Health

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Director/Health Officer

Dunn County Health Department

DocuSigned by:

Laura Same

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Health Officer

Barron County DHHS-Public Health

DocuSigned by:

Kathy Ronchi

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Health Officer

Douglas County Department of HHS

DocuSigned by:

Lieske Giese

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Health Officer/Director

Eau Claire City-County Health Dept

DocuSigned by:

Kelli Engen

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Health Officer

St. Croix County Health and Human Services

DocuSigned by:

Pam Feustel

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Health Officer

Bad River Public Health

DocuSigned by:

Kelsey Wussow

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Lead Public Health Nurse - Interim Health Officer

Clark County Health Department

DocuSigned by:

Tiffany Giesler

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Director/Health Officer

Monroe County Health Department

DocuSigned by:

Angela Weideman

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Health Officer/Director

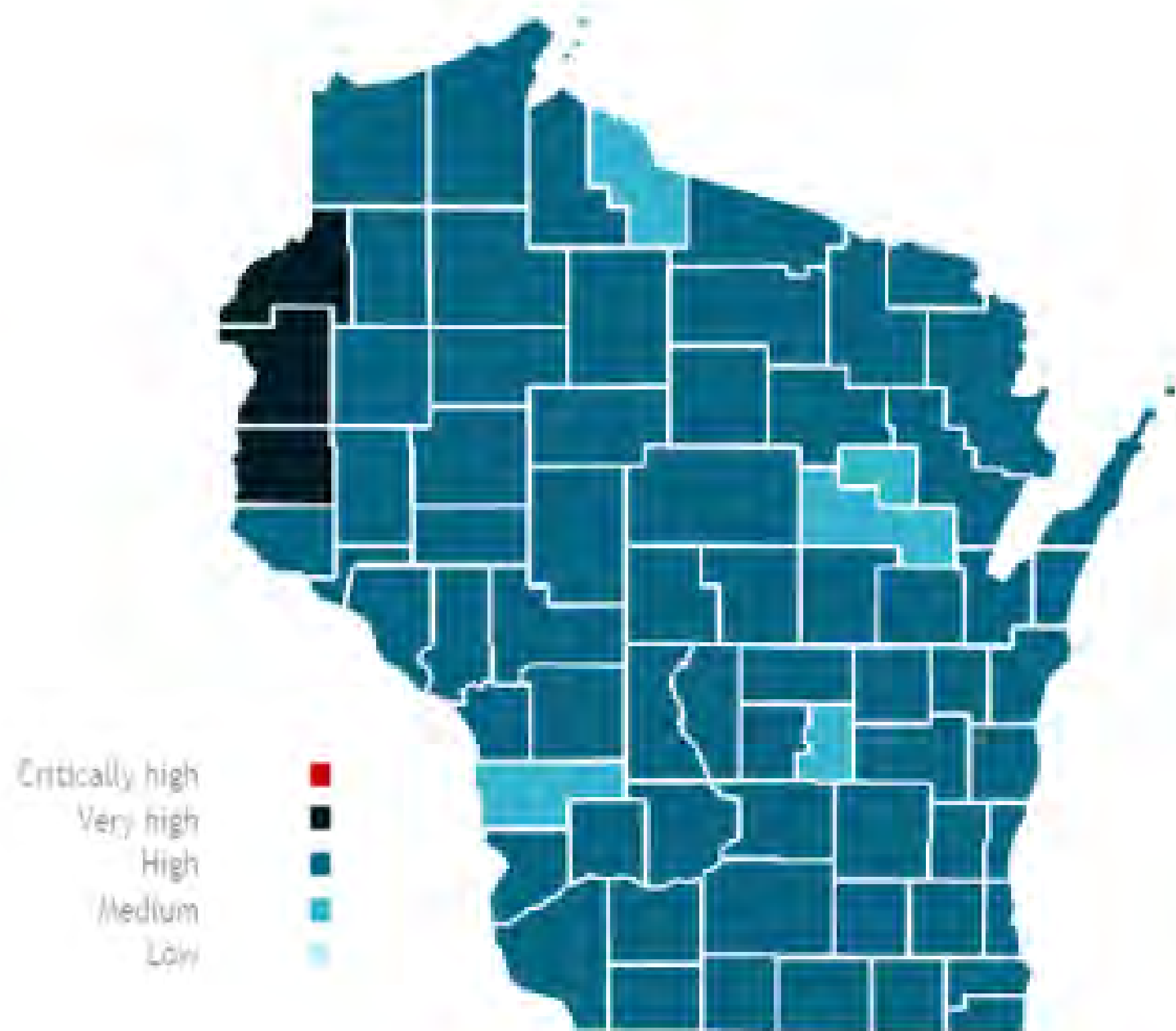
Chippewa County Department of Public Health

Joint Western Wisconsin Local and Tribal Public Health Message Urging Wisconsinites to Continue Following Precautions

Supplement to Media Release

Cases Increase in Border Counties

As of April 21, 2021



Minnesota has reported high numbers of variant cases. Wisconsin is already starting to see increased cases along the border.

Updated data: <https://www.dhs.wisconsin.gov/covid-19/local.htm>

Why We Care About Variants

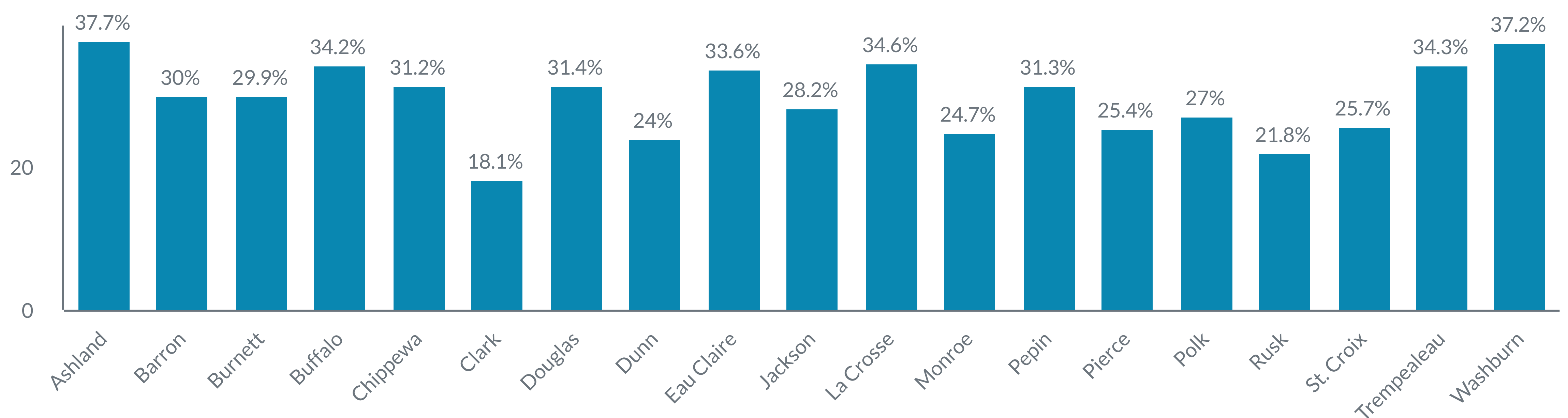
Variants have mutations that cause the virus to act differently.

This can include:

- Causing more severe disease
- Spreading more easily
- Requiring different treatments
- Changing the effectiveness of vaccines

Percent of Population 16+ with Completed Vaccination Series

1 dose of Johnson and Johnson or 2 doses of Moderna or Pfizer



*Based on DHS Data Update 4/23/2021

We are not halfway to 80% of the population being vaccinated.

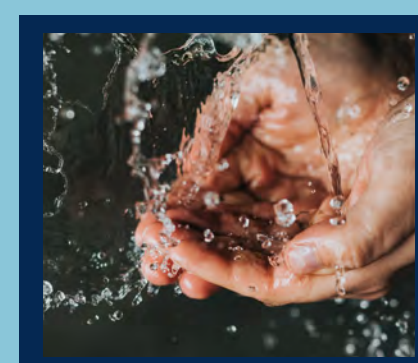
What You Can Do



Get Vaccinated



Wear a Mask



Wash Your Hands



Avoid Large Gatherings

March 24, 2021 Board of Health Meeting
Meeting held via WebEx Events

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

Board Members Present Roll Call:

Don Bodeau
Merrey Price
True Vue
Mark Kaeding
Terry Miskulin
Martha Nieman
Jennifer Eddy
Emily Berge

Staff Members Present:

Lieske Giese
Matt Steinback
Marisa Stanley
Gina Holt (recorder)

Order of Agenda Request to pull items from Consent Agenda

- None Requested

Public Comment:

- None Received

COVID-19 Update

- Case numbers reviewed: There have been 11,187 positive COVID-19 cases and 105 deaths in Eau Claire County. The spread of COVID-19 has slowed significantly. We continue to watch the variant strains and their impact.
- Vaccination discussion:
 - 28.5 % of Eau Claire County residents have received their first vaccine.
 - 20% of the Eau Claire County population are not eligible to receive vaccination due to age. (under 16)
 - 77% of Eau Claire County population in the age range of 65+ have received vaccination.
 - This week vaccination opened to anyone 16 or older with certain health conditions.
 - There is a strong interest that on or before May 1st everyone be eligible to be vaccinated.
 - Our goal is to have 75-80% of the population in Eau Claire County vaccinated.
 - Targeted mobile vaccination clinics continue to be a priority. (jail, Sojourner house, nursing homes, rural communities, etc.)
 - The health department will be working on managing and staffing the FEMA vaccination site at Zorn Arena. This site will operate Tuesday -Saturday's 11am-7pm. The state is committed to providing vaccine to this location. A lot of partners, including UWEC, will be coming together to make this happen.
 - The State registration system is being implemented as a way to schedule vaccination times for the FEMA clinic. <https://vaccinate.wi.gov/en-US/>
 - We continue to focus on partnering with those vulnerable populations to provide vaccinations.
- Policy at the State level:

- The federal government released a report for schools that indicated the physical distance parameter be 3ft instead of 6ft. This has engaged a lot of conversations at the state and local level. A close contact is still considered to be a person within 6ft for ten minutes or more.
- We continue to discuss and walk through what happens with gatherings and public spaces.
- We continue to track where disease spread is taking place when mitigation strategies are not followed.
- Question/Answer from the Board:
 - Q: How do you differentiate between the variants? A: This happens at the State Lab of Hygiene and other specific labs. The sample gets looked at in more detail to see what the strain is. This does not happen on every sample received.
 - Q: As people are vaccinated is outcome being tracked? A: This data is collected and will give a sense of how much vaccination is working. CDC feedback is that it is safer when you are vaccinated, and it is possible to gather in small gatherings when all have been vaccinated. If symptomatic you still need to be tested even after vaccination.
 - Q: Have there been any people who have been vaccinated turning up positive? A: There have been examples of this happening and we are enhancing surveillance and trying to do additional testing when we hear about these situations.
 - Q: Is there follow up being done regarding the confusion that people think they need health insurance to receive the vaccine? A: The vaccine is provided free of charge. Health care providers have the ability to bill private health insurance an administrative charge, but there should not be out-of-pocket expenses for the patient related to receiving the COVID-19 vaccination. There will be no administrative charge and clients will not be asked provide health insurance information at the FEMA site. You do not need to be insured to receive a COVID-19 vaccine. Follow up is happening with all vaccinators.
 - Q: Are the recovery dollars coming from the federal level causing any challenges? A: The federal dollars are coming into the City and County of Eau Claire, Altoona, as well as other municipalities. The health department continues to have conversations with those entities and discuss the costs related to the pandemic that the health department is facing.
 - Q: Does current State legislation have any effect on the funding? A: It appears that some of the funding may be affected by the proposed legislation.
 - Q: How is the department reaching out to offer vaccine to vulnerable populations? A: We have an ongoing vulnerable populations group that meets regularly. This group applied for funding to help with this with such things as providing transportation, and mobile clinics.
 - Q: With the populations that have barriers are efforts being made to give Johnson and Johnson single dose instead of the multi dose options? A: We were fortunate to get a large amount of Johnson and Johnson, and this has helped tremendously for those types of situations. We did hear that the state has prioritized local health departments to receive Johnson and Johnson.

Consent Agenda

- a. Approval of minutes from February 24, 2021 meeting
- b. Approval of Alliance for Substance Abuse Prevention funding
- c. Approval of Get Yourself Tested grant funding

Motion to approve Consent Agenda: Terry Miskulin

2nd Motion: Martha Nieman

Motion Carried: Yes (unanimous vote)

Business Item

- a. Review and receive COVID-19 Public Health Expectations
 - This is the same document that we have been operating under from January 2021.
 - We are moving from the place where we had a lot of cases to a spot that we are having fewer. We think that a basic expectations document continues to remain important. The public spaces and gathering sections we are looking at providing mirror some of the wording to that of Minnesota. If numbers remain low, we expect to move forward being able to increase occupancy and size limit of gatherings. Our current practice for those events is being worked on in active conversations for such things as Music in the Park, Country Jam, etc. We are hoping to have the recommendations updated next week.

Motion to review and receive COVID-19 Public Health Expectations as presented by Health Department staff: Jennifer Eddy
2nd Motion: Don Bodeau
Motion Carried: Yes (unanimous vote)

- b. Approval of Public Health Week Proclamation
 - This a yearly event that recognizes the work being done in Public Health.
 - This is a great time to celebrate all the community partners doing public health work.

Motion to approve Public Health Week Proclamation as presented by Health Department Staff: Martha Nieman
2nd Motion: Emily Berge

- c. Ground Water Advisory Committee Board of Health member reappointment
 - Jennifer Eddy has served on the Ground Water Advisory committee for three years and is recognized for her service.
 - The meetings are held every two to three months at 4pm. There is not a fixed date and time, it is flexible.
 - The health department serves as technical advisors to the committee.
 - Board members are going to take some time to think about the appointment and it will be brought back for discussion at the April BOH meeting.

Motion to appoint a board of health member to the Ground Water Advisory Committee: Jennifer Eddy
2nd Motion: Terry Miskulin

Emily Berge Motion to postpone this agenda item until the April 28th Board of Health Meeting:

2nd Motion: Jennifer Eddy
Motion Carried: This motion was tabled in order for board members to think about and the topic will be brought back to the board at the April meeting.

Other policy and informational items from staff for the Board

- a. Director/Health Officer Report

- Staffing update: We are re-recruiting for a Communicable Disease Management position, a federal funded two-year position related to COVID, and a Communicable Disease Specialist.
 - Board member expressed that at the last county board meeting there was a lot of discussion regarding Seven-Mile Creek and water quality.
- b. Correspondence/Media
 - No discussion
 - c. Service Recognition/Retirement
 - Denise Wirth, Community Health Promotion Division Manager-32 years

Board member informational items

- a. Communicable Disease taskforce update-the group met for the first time to get aquatinted and to lay out some groundwork. The upcoming meetings will go into more detail around purpose, input, and suggestions. Meetings will be taking place over the next several months. Dr. Bodeau from the Board of Health and Marissa Stanley from the Health Departments are members.
- b. Public Health Policy/Advocacy update
 - WI Legislative update – LRB 0792 document reviewed and discussed. Thoughts were shared on LRB 0792 by Lieske with local representatives.
 - State Budget discussion: Joint finance committee has announced listening sessions. These will be held in person as well as virtual. Every year a member from the local health department participates in the listening sessions.
 - WPHA/WAHLDAB overview was reviewed. As more finalized advocacy pieces and talking points come forward around the state budget, they will be shared with board members. The state is on the bottom when it comes to funding public health.
 - Federal update-American Rescue plan act discussion
- c. Board Evaluation – A board evaluation survey will be sent out prior to the April meeting. Merrey Price will email last years evaluation for feedback to board members to get feedback on any additional questions/changes.

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

- a. Health disparities (the county is moving forward on a self-evaluation it would be nice to have a report on what the health department is working on)
- b. Discussion on what items have been on the wayside due to COVID.

Next scheduled BOH meeting is April 28, 2021 at 5:15 p.m.

Merrey Price adjourned the meeting at 6:51 p.m.



Fact Sheet – 4/28/2021 Board of Health Meeting

Agenda Item 4.b

Overdose Fatality Review Implementation Project

\$16,500 was awarded to the Eau Claire City-County Health Department for Overdose Fatality Review (OFR) implementation. The purpose of this funding is to assist OFR teams with implementation of recommendations derived from the OFR process. This is one time funding from the Wisconsin Department of Health Services, Division of Public Health, Overdose Data to Action grant funds from the Centers for Disease Control and Prevention (CDC) was offered to counties with existing Overdose Fatality Review committees in place. Eau Claire and Dunn counties have been partnering on the OFR project since 2019.

Mental health, substance use, and alcohol misuse were identified as the top three health priorities by Eau Claire community partners in the most recent community health assessment and are similarly important issues in Dunn County. Eau Claire and Dunn Counties are following national and statewide trends when it comes to increased opioid misuse and overdose. The rate of opioid poisoning hospital encounters has increased in Eau Claire County and Dunn County since 2014. The rate of opioid-related emergency room visits in 2018 was 31.1 per 100,000 in Eau Claire County and 15.6 per 100,000 in Dunn County. Additionally, in 2019, City of Eau Claire EMS responded to 188 overdose related calls and administered naloxone 116 times. The Eau Claire County Youth Risk Behavior Survey in 2019 reports 11% of high school students and 3% of middle schoolers taking a prescription painkiller without a doctor's prescription, an increase from previous years.

Overdose Fatality Reviews provide an opportunity to explore missed opportunities for intervention and increase the community's response to end overdose deaths in our community. Recommendations from the OFR committee that will be addressed with these funds include increasing community awareness of opioid misuse and signs of overdose, providing overdose prevention and treatment information for individuals carrying Narcan as well as to members in the community at risk for accidental overdose, and supporting best practice that all overdose related deaths should have an autopsy performed.

Budget Implication: This one-time award of \$16,500 is supplemental to the funding supporting the Overdose Fatality Review Committee work already underway, and will support expenses for materials for a community outreach media campaign (i.e. print advertising, online messaging, outdoor messaging, television, radio, and promotional items).

Staff Recommendation: Approve acceptance of the Overdose Fatality Review Implementation Funding for \$16,500 from 1/1/21– 8/31/21

Prepared by Peggy O'Halloran, Community Health Promotion Division Manager

Fact Sheet – 4/28/2021 Board of Health Meeting
Agenda Item 4.c
Scholarships/Stipends Received

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

Agency/Individual	Description	Amount
Jeff and Deb Hansen	The Health Department has received a donation from the individuals listed as a thank you for its work during the COVID pandemic.	\$250

Budget Implications: Stipend in the amount of \$250.00

Staff Recommendation: Accept stipend.

**EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT
COVID-19 PREVENTION AND CONTROL COMMUNITY EXPECTATIONS
EFFECTIVE APRIL 1, 2021**

WHEREAS, on December 2019, a novel strain of the coronavirus (SARS-CoV-2) was detected, a virus that causes a disease now named COVID-19, and it has spread throughout the world;

WHEREAS, as a novel disease with no certain immunity and currently limited available vaccine, the population is at risk of illness, hospitalization, long-term health issues, and death related to COVID-19;

WHEREAS, physical contact and close proximity to infected individuals, some of whom may be asymptomatic, causes the rapid spread of COVID-19;

WHEREAS, COVID-19 activity remains high throughout much of Wisconsin, including in Eau Claire County, with 11,247 total cases and 105 total deaths confirmed and 717 cases and 7 deaths occurring in the past 60 days;

WHEREAS, vaccination progression remains limited by national supply and is only available currently to those age sixteen and older which impacts population immunity measures;

WHEREAS, SARS-CoV-2 has a history of mutation, creating an environment for variant strains to emerge, which has happened across the world;

WHEREAS, a variant of concern (B.1.1.1), which is known to be more infectious and has been linked to increased disease severity, has been detected in significant levels in surrounding states despite limited testing and there have been multiple cases identified in Eau Claire County;

WHEREAS, it remains critical to limit community transmission of COVID-19 to reduce the spread of existing variants and the potential for the development of new variants while approaching vaccination milestones;

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

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

WHEREAS, these expectations are intended to replace the EAU CLAIRE CITY-COUNTY HEALTH DEPARTMENT COVID-19 PREVENTION AND CONTROL COMMUNITY EXPECTATIONS effective January 25th, 2021 in order to best address the current local conditions of COVID-19 in Eau Claire County.

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

1 Individual Expectations.

- Unless otherwise noted here, follow the most recent national, state, and local official public health guidance for travel, physical distancing, face covering use, other mitigation measures, and participation in various activities. A directory of acceptable guidance is maintained here: <http://bit.ly/ECwebresources>.
- Stay home when sick with symptoms consistent with COVID-19 and get tested. Do not go to work or school or engage in other activities.
 - Cooperate with any public health investigation as a COVID-19 case or close contact including required isolation and quarantine.
- Determine vaccination plan for COVID-19.

2 Expectations for Indoor and Outdoor Public Spaces and Buildings and Public Gatherings.

This includes all public spaces and public buildings, including private events at public venues. Examples include, but are not limited to: schools and childcare, athletic facilities, businesses, government, and service providers. Gatherings include planned or spontaneous events that occur with a number of people in attendance in a defined location for a prolonged period of time. This may include but is not limited to concerts, festivals, sporting events, or other public or private social events.

- Unless otherwise noted here, follow the most recent national, state, and local official public health guidance, and applicable industry guidance for mitigation of disease transmission, as well as outbreak prevention and containment. A directory of such acceptable guidance is maintained here: <http://bit.ly/ECwebresources>.
- Specific procedural measures to implement include, but are not limited to:
 - Implement policies to assure the use of face coverings.
 - Increase standards of facility cleaning and disinfection.
 - Adopt policies to actively screen and prevent employees, students, customers, visitors, and guests from entering the premises if they display COVID-19-like symptoms, have COVID-19, or have had contact with a person with a confirmed diagnosis of COVID-19.
 - Adopt policies that actively support employees who are required to quarantine or isolate.
 - Cooperate with public health investigations related to COVID-19 confirmed or suspected cases.
 - Consider policies to vaccinate paid and unpaid workforce.
- Reduce overall capacity to no more than 50% for all public spaces. Further limit capacity if venue is unable to accommodate this level of capacity while maintaining expected basic mitigation measures, including physical distancing.

Note: Future revisions of this document will include incremental increases in acceptable capacity. The projected progression, which is dependent upon sustained progress towards disease activity and vaccination goals, can be viewed here: bit.ly/ECC-CommunityExpectations.

- Implement measures to assure physical distancing can be maintained between individual groups on the premises.
- Consult with the Health Department when organizing a **gathering with elevated risk** to assure that measures are taken to minimize risk. The instructions for pursuing consultation are available here: <https://www.eauclairewi.gov/Home/ShowDocument?id=35017>
- Gatherings classified as being elevated risk include the following scenarios:
 - Indoor gathering with non-seated activities (e.g., festival or market, wedding reception) – 250 or more attendees
 - Indoor gathering with attendees seated (e.g., performance or presentation) – 500 or more attendees
 - Outdoor-only gathering with non-seated activities – 500 or more attendees
 - Outdoor-only gathering with attendees seated – 1,000 or more attendees

3. Duration. These expectations are effective immediately and shall remain in effect until superseding guidance is issued based on public health science and data, including progress towards community vaccination and local disease trends (see projected progression here: bit.ly/ECC-CommunityExpectations). Data and research shall be regularly examined to ensure the most salient recommendations are available to the public. Minimally, these expectations will be updated monthly.



Elizabeth Giese

04/01/2021

Date

Eau Claire City-County Health Department

Fact Sheet – 4/28/2021 Board of Health Meeting
Agenda Item 5.b
March 2021 Financial Summary

The Q-1 financial summary looks a little different than usual. Currently the City (including the Health Department) is in the middle of the audit so 2020 is still being adjusted, therefore the comparison of 2021 to the prior quarter and prior year has been removed. This will return next quarter. The fund balance at the end of 2020 has not yet been determined so those balances are still “to be determined” for 2021. There have been many changes since the budget was adopted in December 2020 and due to the addition/change of several grants including several new COVID sources as well as changes and additions in staff this work is ongoing. An updated and revised budget will be available soon for 2021. However, the status as of March 31 is presented with highlights mentioned below.

Balance Sheet

- The balance sheet appears healthy; balances will continue to change as we continue through the 2020 audit.

Revenue and Expense Report

Revenue

- 2020 revenue received in January and February has been moved back to 2020. Revenue appears lower in comparison to the budget (25% of the year has elapsed). This is expected as revenue is generally collected one or two months after it is billed.
- City taxes have not yet been received which also impacts the % of revenue YTD.

Expense

- Expenses are running at 25% of the adopted budget which is expected.

Grant & Project Revenue & Expense Report

- Non-calendar year grants are noted in the project list included in this packet.

**Fact Sheet – 4/28/2021 Board of Health Meeting
Agenda Item 5.b
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Expense

- Expenses are running at 25% of the adopted budget which is expected.

Grant & Project Revenue & Expense Report

- Non-calendar year grants are noted in the project list included in this packet.

**Eau Claire City-County Health Department
Balance Sheet
As of March 31, 2021**

Assets

Cash and Investments <i>(Cash in bank , petty cash, gift cards)</i>	\$ 1,634,796
Accounts Receivables <i>(Bills outstanding non government)</i>	\$ 399,439
Due from other governments <i>(Bills outstanding government)</i>	\$ 162,979
Taxes Receivable <i>(amt on tax roll not yet received)</i>	\$ 14,670
Prepayments <i>(Payments made in advance i.e. health, life insurance)</i>	\$ 347,033
Inventories <i>(Radon Kits)</i>	\$ 1,851
Allowance for Doubtful Accts <i>(Estimate of uncollectables)</i>	\$ (350)
Total Assets	<u>\$ 2,560,418</u>

Liabilities

Accounts Payable <i>(Amts owed incl. payroll taxes, health, life)</i>	\$ 327,004
Accrued Liabilities <i>(Accrued Payroll done at year end)</i>	\$ -
Due to other governments <i>(Sales tax, state license fees, rent to County)</i>	\$ 20,958
Deferred Inflows <i>(Amt. Billed-not received, advance on contracts)</i>	\$ 569,770
Total Liabilities	<u>\$ 917,732</u>

Fund Balances

Fund Balance <i>(Restricted, non-spendable prepayments, inventories)</i>	\$ 2,774,229
Control Accounts <i>(Current year revenue over (under) expense)</i>	\$ (1,131,543)
Total Fund Balances	<u>\$ 1,642,686</u>
Total Liabilities and Fund Balances	<u>\$ 2,560,418</u>

	<u>12/31/2020</u>
<i>Non-Spendable Pre Payment</i>	<i>TBD</i>
<i>Non-Spendable Inventory</i>	<i>TBD</i>
<i>Restricted to Particular Projects</i>	<i>TBD</i>
<i>Restricted - Capital Purchases</i>	<i>TBD</i>
<i>Restrctied - Working Capital</i>	<i>TBD</i>
<i>Restricted - Special Projects</i>	<i>TBD</i>
Fund Balance at 12/31/17	<u>\$ -</u>

**Eau Claire City-County Health Department
Revenue and Expense Statement
As of March 31,2021**

Revenues	Adoped Budget	YTD Actual	% of Adopted Bdgt	Available Budget
Intergovernmental <i>(Federal and state grants)</i>	\$ 2,439,100	\$ 315,321	12.9%	\$ 2,123,779
Licenses & Permits <i>(Lodging, restaurant, sanitary etc.)</i>	\$ 694,700	\$ 44,838	6.5%	\$ 649,862
Charges for Services <i>(Water tests, vaccinations inspections etc.)</i>	\$ 156,500	\$ 18,658	11.9%	\$ 137,842
Charges for Services - Intergov. <i>(Medicaid, schools, County tax)</i>	\$ 1,614,690	\$ 359,847	22.3%	\$ 1,254,843
Misc revenue <i>(Gifts, reimbursements, non-governmental grants)</i>	\$ 406,600	\$ 41,842	10.3%	\$ 364,758
Other Financing Sources <i>(Taxes from City, CDBG revenue)</i>	\$ 2,057,000	\$ -	0.0%	\$ 2,057,000
Other Budgeted Receipts <i>(Budget only-use of fund balance)</i>	\$ 209,810	\$ -	0.0%	\$ 209,810
Total Revenues	\$ 7,578,400	\$ 780,506	10.3%	\$ 6,797,894
Expenses				
Personnel <i>(Payroll, benefits, auto allowance)</i>	\$ 6,271,500	\$ 1,568,255	25.0%	\$ 4,703,245
Contractual Services <i>(Postage, computer service, rent, advertising, audit, etc.)</i>	\$ 821,300	\$ 222,870	27.1%	\$ 598,430
Utilities <i>(Phones, garbage)</i>	\$ 35,400	\$ 9,066	25.6%	\$ 26,334
Fixed Charges <i>(License & Permits, Workers Comp)</i>	\$ 20,000	\$ 11,915	59.6%	\$ 8,085
Supplies <i>(Office, lab, medical, equipment, gift cards, etc.)</i>	\$ 241,700	\$ 72,662	30.1%	\$ 169,038
Contributions & Other Payments <i>(Payments to other organizations)</i>	\$ -	\$ 500	0.0%	\$ (500)
Capital Purchases <i>(Long term purchases over \$5,000)</i>	\$ 162,500	\$ 26,782	16.5%	\$ 135,718
Other Financing Uses <i>(Debt service for debt on unfunded pension)</i>	\$ 26,000	\$ -	0.0%	\$ 26,000
Total Expenses	\$ 7,578,400	\$ 1,912,049	25.2%	\$ 5,666,351
Net Revenue Over / (Under) Expenses	\$ -	\$ (1,131,543)		\$ 1,131,543

Financial Statement explanations

Notes / what's included

Balance Sheet Categories

Assets

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

Liabilities

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

Fund Balances

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

Revenues and Expense Categories

Revenues

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

Expenses

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

Supervisor	Program #	Project #	Type	Fiscal Year End	Fiscal Year	2021 Project Description
Peggy	2084	25002		12-Dec	Jan-Dec	MCH
Cortney	2081	25004		9-Sep	Sept-Sept	Prevention
Jeff Robb	2086	25006		12-Dec	Jan-Dec	Reg Radon Info Center
Beth	2083	25007		12-Dec	Jan-Dec	Childhood Lead
Paulette	2085	25008		12-Dec	Jan-Dec	Immunization
Beth	2083	25009	FFS	12-Dec	Jan-Dec	Prenatal Care Coordination
Beth	2083	25014		9-Sep	Oct-Sept	DOT Child Passenger Safety
Paulette	2085	25017		6-Jun	July-June	Wisconsin Well Woman
Paulette	2085	25028		6-Jun	July-June	Public Health Emergency Preparedness
Peggy	2084	25029		6-Jun	July-June	Tobacco
Beth	2083	25041	FFS	12-Dec	Jan-Dec	Blood Lead Testing/EH Investigation
Paulette	2085	25045		6-Jun	July-June	Medical Reserve Corps - State
Peggy	2084	25056		12-Dec	Jan-Dec	Alliance For Substance Abuse Prevention
Paulette	2085	25057	FFS	12-Dec	Jan-Dec	Hep B Case Management
Beth	2083	25060		12-Dec	Jan-Dec	WIC Grant - Program Admin
Beth	2083	25061		12-Dec	Jan-Dec	WIC Grant Client Srvcs
Beth	2083	25062		12-Dec	Jan-Dec	WIC Grant Nutrition Ed
Beth	2083	25063		12-Dec	Jan-Dec	WIC Grant Brst Feed Promo/Support
Beth	2083	25064		12-Dec	Jan-Dec	WIC Farmers Mkt Nutrition Program
Beth	2083	25065		12-Dec	Jan-Dec	WIC Brst Feeding Peer Counseling
Beth	2083	25069		9-Sep	Oct-Sept	Fit Family
Tegan	2082	25070		31-Mar	Apr-Mar	Reproductive Health-Grant
Tegan	2082	25071	FFS	12-Dec	Jan-Dec	Reproductive Health-Program Generated Revenue
Tegan	2082	25072		ongoing	Jan-Dec	Reproductive Health-Colposcopy
Cortney	2081	25079		12-Dec	Jan-Dec	Healthy Communities Council
Cortney	2081	25081		12-Dec	Jan-Dec	Comm Health Partnership Project
Peggy	2084	25095		12-Dec	Ongoing	Oral Health Promotion
Paulette	2085	25100		12-Dec	Jan-Dec	HIV Partner Services
Paulette	2085	25102		12-Dec	Jan-Dec	Get Yourself Tested
Paulette	2085	25110	FFS	12-Dec	Jan-Dec	TB Dispensary
Paulette	2085	25111	FFS	12-Dec	Jan-Dec	TB MA
Beth	2083	25120		12-Dec	Jan-Dec	Safe Sleep
Jeff Robb	2086	25130		12-Dec	Jan-Dec	EC Food Program - Self Assessment
Peggy	2084	25140		12-Dec	Ongoing	Mental Health Action Team - Mhat
Beth	2083	25142		6-Jun	July-June	Nurse Family Partnership Program
Peggy	2084	25145		5-May	June-May	HWPP - Mental Health Matters
Jeff Robb	2086	25160		7-Jul	Aug-July	CDBG
Beth	2083	25172		12-Dec	Jan-Dec	NFP - Admin
Paulette	2085	25181		8-Aug	31-Aug	NACCHO Volunteer Outreach
Jeff Robb	2086	25182		12-Dec	Jan-Dec	Hoarding Task Force
Paulette	2085	25193		6-Jun	July-June	Communicable Disease & Prevention
Cortney	2081	25198		9-Sep	Oct -Sept	Innovative Diabetes & Cardio Vas
Peggy	2084	25199		6-Jun	July-June	Diabetes Cardio Vascular
Peggy	2084	25202		8-Aug	Sept-Aug	Overdose Fatality
Cortney	2081	25208		9-Sep	Sept-Sept	Accreditation Mentoring
Beth	2083	25209		12-Dec	Jan-Dec	WIC Interpreters
Peggy	2084	25210		12-Dec	Ongoing	Diversion
Cortney	2081	25211		3-Mar	Oct 19- Dec 20	Wintermission
Beth	2083	25212		9-Sep	Oct-Sept	Family Foundations
Peggy	2084	25213		12-Dec	Jan-Dec	Substance Use Prevention
Marisa	2080	25214		?	Ongoing	Homelessness Prevention
Peggy	2084	25215		1-Jan	Feb-Jan	Sexual Violence Prevention
Matt	2087	25216		4-Apr	3/5/20-4/1/21	Topobox
Peggy	2084	25217		8--Aug	Sept-Aug	OD2A Community Prevention Grant
Marisa	2080	25218		6-Jun	8/1/20-6/30/21	Quarantine
Paulette	2085	25222		30-Sep	2/1/20-9/30/21	COVID D ELC \$28,100
Peggy	2084	25224		30-Sep	Sept-Aug	PFS-SPF
Paulette/Marisa	2085	25225		30-Jun	Thru 6/30/21	COVID Testing Pilot Program (\$22,750)
Paulette	2085	25226			10/1/20-10/31/22	COVID Contact Tracing ELC (\$527,400)
Paulette	2085	25227			10/1/20-10/31/22	COVID Response (\$777,600)
Paulette	2085	25228			???	FEMA Vaccination Site ZORN
Beth	2083	25229			10/01/20-09/31/21	Breastfeeding Campaign (\$17,500)
Cortney	2081	25230			04/01/21-08/31/21	Eau Claire Vaccination Outreach (\$100,000)
Cortney	2081	25231			04/01/21-08/31/21	Western Region Vaccination Outreach (\$100,000)
Paulette	2085	25232			???	FEMA Vaccination Clinic Zorn (Exp not submitted to FEMA)
Paulette	2085	50292			Ongoing	COVID No Grant

**Fact Sheet –Board of Health Meeting 4/28/2021****Agenda Item 5.c****DHS COVID Vaccine Outreach Grant – Eau Claire County**

A \$100,000 grant was awarded to the Eau Claire City-County Health Department by the Wisconsin Department of Health Services, Division of Public Health (DPH) for the COVID-19 Vaccination Community Outreach grant. The goal of the grant is to engage community-based organizations to help remove barriers to and promote acceptance of COVID-19 vaccination for communities that have barriers to accessing medical care and people who have historical mistrust of the medical community and vaccines. This grant provides funding for initiatives centered around conversations with community partners in the Vulnerable Populations Incident Command group, with a focus on low-income/poverty, food insecure, persons experiencing homelessness, and non-English speaking populations. The strategies that will be utilized include: outreach and education to address vaccine hesitancy and accessibility, reduce barriers to securing of and transportation to a vaccination appointment, and partnering to plan, promote and host clinics in trusted locations specific to underserved populations.

With this funding, ECCCHD will partner with and allocate funds to community-based organizations. We currently have commitment from the following organizations who represent a wide range of populations, all of whom have experienced barriers in Eau Claire County, both in general and over the course of the COVID-19 pandemic.

1. Black & Brown Womyn Power Coalition (BBWPC)
1. Eau Claire Area Hmong Mutual Assistance Association (ECAHMAA)
2. The Community Table (TCT)
3. Eau Claire Area School District (ECASD)
4. JONAH - Joining Our Neighbors Advancing Hope

Our intention is to allocate most of the award to our community partners identified above. We are also intentionally setting some funding aside for community partners that may want to become involved in this work down the line and represent other vulnerable populations, such as our rural community. The funding that goes to these partners will be used to cover staff time, printing, bus tokens, gas cards, and other costs funded partners need to accomplish selected categories. Additionally, we anticipate the ECCCHD to use some of these funds to advertise in culturally competent ways for existing mass clinics, as well as interpreters that can assist Spanish or Hmong speaking individuals to sign-up for clinics and move through a vaccination appointment.

Budget Implication: Funding received will be used to support community partners, advertising, and interpreters.

Staff Recommendation: Approve acceptance of the DHS COVID Vaccine Outreach Grant – Eau Claire County award for \$100,000 starting 4/1/2021- 8/31/2021.

Prepared by Cortney Draxler, Policy and Systems Division Manager

**Fact Sheet –Board of Health Meeting 4/28/2021****Agenda Item 5.d****DHS COVID Vaccine Outreach Grant – Western Wisconsin Public Health Readiness Consortium (WWPHRC)**

A \$100,000 grant was awarded to the Western Wisconsin Public Health Readiness Consortium (WWPHRC), with the Eau Claire City-County Health Department as the fiscal agent, by the Wisconsin Department of Health Services, Division of Public Health (DPH) for the COVID-19 Vaccination Community Outreach grant. The Western Wisconsin Public Health Readiness Consortium (WWPHRC) is a regional consortium consisting of thirteen local public health agencies and two tribal health agencies. Established in 2003 their purpose is to help our members develop local capacity to effectively respond to all types of health emergencies including bioterrorism, infectious disease outbreaks, and natural disasters.

The goal of the grant is to engage community-based organizations to help remove barriers to and promote acceptance of COVID-19 vaccination for communities that have challenges accessing medical care and people who have historical mistrust of the medical community and vaccines. This application will focus on our Amish, Hispanic/Latinx, Native American, agricultural, rural, and asset limited populations. This grant aims to serve multiple counties in the western region, focusing on the following communities:

- Bad River Tribe
- Barron County
- Burnett County
- Clark County
- Douglas County
- Dunn County
- Pepin County
- Pierce County
- Rusk County
- St. Croix County
- St. Croix Tribe
- Washburn County

As part of a unified regional approach, WWPHRC creates at least one COVID-19 related message each week and shares with partners. WWPHRC will take current COVID-19 related knowledge and experience with message creation, while leveraging connections with local stakeholders of the target populations to customize messages. This will include messaging on general COVID-19 information, vaccine basics, clarifying vaccine misconceptions, resources available, emerging concerns, vaccination process, and vaccination locations within the local community and regional sites.

WWPHRC will build on the current work with health department partners to expand to support grant subcontractors. This will include the use of a shared and consistent message, along with bi-monthly collaboration. WWPHRC will create messaging based on the Department of Health Services and the Centers for Disease Control guidance for use by local and tribal health departments and subcontractors. The subcontractors will provide feedback or make alterations, as appropriate, in order to ensure that the messaging is best received by their respective populations. Additionally, all messages will be shared amongst tribal and local health departments, along with all subcontracts for their use if a need arises during their work to have a particular targeted message. This grant will also support engagement with many people that are asset limited and live in rural areas. These areas do not have public transportation systems and tend to have limited primary healthcare options. All of these factors can hinder the ability to obtain vaccine.

Budget Implication: Funding received will be used to support subcontractors, community partners, advertising, and purchasing of supplies/materials. ECCCHD will received \$10,000 of in-direct funding which will be used for staff time of Policy and Systems Division Manager and fiscal staff time on this grant.

Staff Recommendation: Approve acceptance of the DHS COVID Vaccine Outreach Grant – WWPHRC award for \$100,000 starting 4/1/2021- 8/31/2021.

Prepared by Cortney Draxler, Policy and Systems Division Manager

Fact Sheet – 04/28/2021 Board of Health Meeting

Agenda Item 5.e

WIC Breastfeeding Campaign

The Division of Public Health (DPH) has awarded the Health Department’s WIC program a grant to add funding in 2021 for the WIC Breastfeeding Peer Counseling Program to pilot two specific projects. This funding is part of a DPH awarded grant from the University of Nevada-Reno, entitled *WIC Breastfeeding Support: Learn Together.Grow Together*. The purpose of the grant is to provide best practices for management and recruitment through the piloting of two support options for WIC families.

The two projects that were chosen to pilot are a Buddy Program and a Facebook Breastfeeding Support Group. These projects will help women communicate with one another, get questions answered and make it easier for women to provide support to other women with similar experiences. Both projects connect women during a very challenging time in their lives. The Facebook Breastfeeding Support group and the Buddy Program have the similar goals. Both aim to increase a mother’s support network, increase awareness of available resources in our area, increase a mother’s confidence and help a mother feel that she is not alone in her pregnancy or breastfeeding journey. The Buddy Program connects pairs of women while the Facebook Breastfeeding Support Group provides a platform for a larger group to connect. With this extra support, we hope to increase the breastfeeding initiation and duration rates within the WIC Program. Data related to breastfeeding in Eau Claire is below (ROSIE CMPQ2001-6, 1/1/21). This continues to be a data-driven priority for the department.

This grant funding will provide staff time to allow our Breastfeeding Peer Counselor and WIC Breastfeeding Coordinator to implement the Buddy Program as well as work with partners to develop a regional Facebook Breastfeeding Support Group.

	ECCCHD	State	Goal
<i>Incidence</i>	81%	71%	>82%
1 month	83%	73%	>77%
3 months	60%	55%	>65%
6 months	45%	34%	>60%
12 months	19%	17%	>34%
<i>Exclusivity</i>			
1 month	42%	36%	>57%
3 months	33%	26%	>44%
6 months	10%	11%	>24%

Budget Implication:

This grant will allow us to increase our our Breastfeeding Peer Counselor time from a .6 FTE to a .7 FTE and will support her time spent on this campaign. It will also support oversight time for our WIC Breastfeeding Coordinator.

Staff recommendation:

Approve the WIC Breastfeeding Campaign grant from the Division of Public Health in the amount of \$17,500.

Prepared by Beth Draeger, Healthy Beginnings Division Manager

Fact Sheet – 4/28/2021 Board of Health Meeting**Agenda Item 5.f****Approve Next Step with 2017-2021 Health Department Strategic Plan**

The current 2017-2021 Strategic Plan will end in December. This Strategic plan has been a critical framework for the past 4 years in the work of the department. Because of COVID-19, the usual process for development of a new strategic plan has not happened. Also because of COVID-19 we have been delayed in implementation of strategies this past year. Because of this, there is an opportunity for the Board of Health to consider next steps related to the current 2017-2021 Strategic Plan and what happens in 2022. Because of the importance of this strategic plan work that remains undone and the effort we would recommend happen in order to develop a new strategic plan, there is value in considering a continuation of the current plan. Below, for context, is a reminder of the work that happened and the information shared in 2016 related to the now current strategic plan.

The current 2012-2016 Eau Claire City- County Health Department Strategic Plan will end this month. Since July 2016, a core Strategic Planning team consisting of Health Department supervision, staff from all divisions and Board of Health members has been working to complete the new 2017-2021 Strategic Plan.

This process began with extensive background work to assure a strong foundation was laid and that all requirements for national accreditation were met. Planning and coordination phone meetings were held with the Health Department Director, Health Education Supervisor, Manager of Internal operations and a contracted facilitator from the Public Health Foundation. Feedback was gathered from all staff at two separate All-Staff Meetings, one facilitated by Division of Public Health Regional Office representatives. Surveys were sent to all health department staff, Board of Health members and community stakeholders to provide feedback on health department strengths and opportunities and give feedback on existing priorities. On September 23, 2016 a full day workshop was facilitated by the Public Health Foundation for all Core Team members to complete a SWOT, review mission, vision and guiding principles and to draft strategic plan goals and strategies. This full day workshop incorporated data from the staff and community survey, information from the QI plan, as well as the Community Health Assessment/Plan, and Performance Management Plan.

Once the draft Strategic Plan was developed feedback was again requested from all staff and board members through a survey including the draft goals, strategies and proposed revisions to the mission, vision, and guiding principles. The Board of Health also provided feedback at their November 2016 work session. A final draft of the strategic plan was developed using the results of the survey and Board of Health feedback.

Budget Implication: No budget implication

Staff recommendation: Recommend approval



Informational Sheet – 04/28/2021 Board of Health Meeting

Agenda Item 5.g

Ground Water Advisory Committee

The membership structure of the Eau Claire County Groundwater Advisory Committee includes one appointment that is designated for a member of the Board of Health. The term of the current Board of Health member appointed to the committee will expire at the end of April 2021 and the Groundwater Advisory Committee is seeking a recommendation from the Board of Health for a member to be considered for appointment by the County Board Chair. All committee members are expected to be knowledgeable and interested in groundwater quality and protection and shall be citizens of the county at the time of appointment and for the duration of their 3-year terms. Stated committee duties include monitoring state and federal regulation of groundwater, overseeing the development and implementation of a comprehensive, county-wide groundwater management plan, and performing such other tasks as directed by the Planning & Development Committee. Meetings are generally held at least four times per year. Additional information about the composition and functions of the committee can be found at: <https://www.co.eau-claire.wi.us/our-government/county-board/boards-commissions-and-councils/groundwater-advisory>

Staff recommendation: Approve a nominee to forward to the County Board Chair as the Board of Health representative on the Eau Claire County Groundwater Advisory Committee.

Prepared by Matt Steinbach, Environmental Sciences

Fact Sheet – 4/28/2021 Board of Health Meeting

Agenda Item 5.h

2021-2022 License Renewal Fee Deviation due to Public Health Emergency

The proposed fee deviation seeks to provide monetary relief to ECCCHD licensed businesses that were significantly impacted by COVID-19 during the current licensing year (July 1, 2020 - June 30, 2021). Per the Department's Fee Deviation and Unpaid Invoice Policy (attached), this proposal would grant a 20% temporary fee reduction on the renewal of specific license types for 2021-2022 (see attached) due to the impacts of the COVID-19 Public Health Emergency. This reduction is identical to the reduction authorized for renewals in 2020 (compensated for impacts of Public Health Emergency for COVID-19 impacts in the licensing year that ended June 30, 2020).

As a reminder, in the August 2020 Board of Health Meeting the Board approved a plan for fees for 2021-2022 to remain flat. This was due to the department's response to the COVID-19 pandemic and the difficulty in obtaining accurate and stable cost information during the COVID-19 public health emergency. The best response to this lack of stable data and uncertainty seemed to be to have the fees remain flat.

The justification for this additional fee reduction includes a reduced scope in ECCCHD inspections and license related education due to COVID-19 response since July 1, 2020, in addition to the economic impact incurred by these licensed businesses due the Public Health Emergency and associated state and local business mitigation recommendations for the period of July 1, 2020 - June 30, 2021. This fee reduction applies to the ECCCHD portion of certain license fees and excludes State fees, reinspection, plan review, pre-inspection, and other non-license renewal fees. The programs proposed for this temporary Fee reduction are restaurants (309), retail food (210), school food (28), swimming pools/water attractions (53), lodging (48), body art (24), and campgrounds (14) and recreational educational camps (3).

This fee reduction is only applicable to renewals and therefore does not apply to new licenses that may be issued in next licensing year (July 1, 2021 – June 30, 2022).

Budget Implication: ECCCHD anticipates the proposed licensing fee adjustment to result in a revenue loss of up to \$110,000 in 2021. Lost fee revenue will be partially off-set with COVID-19 funding used to support staff time spent due to the public health emergency in 2021.

This reduction is intended to compensate for the impacts to services for the limited period of July 1, 2020 - June 30, 2021 resulting from COVID-19.

Staff recommendation: Approve 2021-2022 License Renewal Fee Deviation due to Public Health Emergency as presented.

Prepared by Jeff Robb, Regulation & Licensing Division Manager.



Restaurant License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
High Complexity: > \$500,000	\$ 1,988.00	\$ 1,934.00	\$ 386.80	\$ 1,601.20	\$ 1,547.20
High Complexity: \$100,000 - \$499,999	\$ 1,669.00	\$ 1,615.00	\$ 323.00	\$ 1,346.00	\$ 1,292.00
High Complexity: <\$100,000 sales	\$ 1,312.00	\$ 1,258.00	\$ 251.60	\$ 1,060.40	\$ 1,006.40
Moderate Complexity: > \$500,000	\$ 1,215.00	\$ 1,182.00	\$ 236.40	\$ 978.60	\$ 945.60
Moderate Complexity: \$100,000 - \$499,999	\$ 1,021.00	\$ 988.00	\$ 197.60	\$ 823.40	\$ 790.40
Moderate Complexity: <\$100,000 sales	\$ 802.00	\$ 769.00	\$ 153.80	\$ 648.20	\$ 615.20
Low Complexity: > \$500,000	\$ 846.00	\$ 823.00	\$ 164.60	\$ 681.40	\$ 658.40
Low Complexity: \$100,000 - \$499,999	\$ 712.00	\$ 689.00	\$ 137.80	\$ 574.20	\$ 551.20
Low Complexity: <\$100,000 sales	\$ 559.00	\$ 536.00	\$ 107.20	\$ 451.80	\$ 428.80
Pre-Packaged/Health Limited food service	\$ 348.00	\$ 337.50	\$ 67.50	\$ 280.50	\$ 270.00
Independent Food Prep/Service (Addt'l)	\$ 219.00	\$ 211.00	\$ 42.20	\$ 176.80	\$ 168.80
Temporary Restaurant License	\$ 200.00	\$ 183.00	\$ 36.60	\$ 163.40	\$ 146.40
Special Organization	\$ 401.00	\$ 368.00	\$ 73.60	\$ 327.40	\$ 294.40

Retail Food License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
Process Potentially Hazardous Sales of at least \$1,000,000 (11)	\$ 1,504.00	\$ 1,435.50	\$ 287.10	\$ 1,216.90	\$ 1,148.40
Process Potentially Hazardous Sales of at least \$25,000 but less than \$1,000,000 (22)	\$ 653.00	\$ 626.50	\$ 125.30	\$ 527.70	\$ 501.20
Process Non-Potentially Hazardous Sales of at least \$25,000 (33)	\$ 502.00	\$ 483.00	\$ 96.60	\$ 405.40	\$ 386.40
Process Non-Potentially or Potentially Hazardous Sales of less than \$25,000 (44)	\$ 238.00	\$ 232.00	\$ 46.40	\$ 191.60	\$ 185.60
Non-Processing (55)	\$ 207.00	\$ 202.50	\$ 40.50	\$ 166.50	\$ 162.00
Mobile Retail Food	\$ 150.00	\$ 150.00	\$ 30.00	\$ 120.00	\$ 120.00
Micro-Market (Multiple)	\$ 60.00	\$ 60.00	\$ 12.00	\$ 48.00	\$ 48.00
Micro-Market (Individual)	\$ 40.00	\$ 40.00	\$ 8.00	\$ 32.00	\$ 32.00

School Food Service Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
Satellite Kitchen	\$ 265.00	\$ 265.00	\$ 53.00	\$ 212.00	\$ 212.00
Limited Food Preparation	\$ 350.00	\$ 350.00	\$ 70.00	\$ 280.00	\$ 280.00
Unlimited Food Preparation	\$ 475.00	\$ 475.00	\$ 95.00	\$ 380.00	\$ 380.00
Unlimited Food Prep. & Trans.	\$ 579.00	\$ 579.00	\$ 115.80	\$ 463.20	\$ 463.20

Swimming Pool/Water Attraction License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
Seasonal	\$ 722.00	\$ 707.00	\$ 141.40	\$ 580.60	\$ 565.60
Year round	\$ 995.00	\$ 980.00	\$ 196.00	\$ 799.00	\$ 784.00
Water Attraction - Seasonal	\$ 789.00	\$ 771.50	\$ 154.30	\$ 634.70	\$ 617.20
Water Attraction - Year round	\$ 1,059.00	\$ 1,041.50	\$ 208.30	\$ 850.70	\$ 833.20
Water Attraction w/ 2 slides	\$ 1,154.00	\$ 1,129.00	\$ 225.80	\$ 928.20	\$ 903.20
Additional Slide	\$ 426.00	\$ 411.00	\$ 82.20	\$ 343.80	\$ 328.80

Lodging License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
Tourist Rooming House	\$ 257.00	\$ 246.00	\$ 49.20	\$ 207.80	\$ 196.80
5-30 sleeping rooms	\$ 332.00	\$ 311.50	\$ 62.30	\$ 269.70	\$ 249.20
31-99 sleeping rooms	\$ 531.00	\$ 503.00	\$ 100.60	\$ 430.40	\$ 402.40
100-199 sleeping rooms	\$ 720.00	\$ 684.50	\$ 136.90	\$ 583.10	\$ 547.60
>200 sleeping rooms	\$ 900.00	\$ 851.00	\$ 170.20	\$ 729.80	\$ 680.80
Bed & Breakfast	\$ 355.00	\$ 344.00	\$ 68.80	\$ 286.20	\$ 275.20

Campground/ Recreational Education Camp License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
1-25 sites	\$ 303.00	\$ 285.50	\$ 57.10	\$ 245.90	\$ 228.40
26-50 sites	\$ 395.00	\$ 370.00	\$ 74.00	\$ 321.00	\$ 296.00
51-100 sites	\$ 501.00	\$ 470.50	\$ 94.10	\$ 406.90	\$ 376.40
101-199 sites	\$ 546.00	\$ 510.50	\$ 102.10	\$ 443.90	\$ 408.40
200+ sites	\$ 552.00	\$ 511.00	\$ 102.20	\$ 449.80	\$ 408.80
Educational/recreational	\$ 298.00	\$ 247.50	\$ 49.50	\$ 248.50	\$ 198.00
Special Events 1-25	\$ 303.00	\$ 285.50	\$ 57.10	\$ 245.90	\$ 228.40
Special Events 26-50	\$ 395.00	\$ 370.00	\$ 74.00	\$ 321.00	\$ 296.00
Special Events 51-100	\$ 501.00	\$ 470.50	\$ 94.10	\$ 406.90	\$ 376.40
Special Events 101-199	\$ 546.00	\$ 510.50	\$ 102.10	\$ 443.90	\$ 408.40
Special Events over 200	\$ 552.00	\$ 511.00	\$ 102.20	\$ 449.80	\$ 408.80

Body Art License Type	2021 Fee	2021 Health Dept. Portion	Discount	Adjusted Fee	Adjusted HD Portion
Tattoo Facility	\$ 359.00	\$ 345.50	\$ 69.10	\$ 289.90	\$ 276.40
Body Piercing Facility	\$ 359.00	\$ 345.50	\$ 69.10	\$ 289.90	\$ 276.40
Combined Tattoo and Body Piercing Facility	\$ 665.00	\$ 643.00	\$ 128.60	\$ 536.40	\$ 514.40
Temporary Body Art Facility	\$ 665.00	\$ 655.00	\$ 131.00	\$ 534.00	\$ 524.00



Category: Departmental

Subject: Fee Deviation and Unpaid Invoice Policy

Date: July 22, 2020; Original Date: December 12, 2018

Purpose:

This policy outlines the circumstances in which the Eau Claire City-County Health Department (ECCCHD) may exempt fees, or issue modified charges for fee-eligible services and the manners in which the ECCCHD may manage unpaid invoices. This policy provides a framework to adjust billing practices when presented with unique situations and/or clientele.

Scope:

This policy shall be applicable to those fees for which all associated monetary payment and governing authority is exclusive to the ECCCHD and the Board of Health, respectively. The Director/Health Officer retains the authority to deny requests or impose additional restrictions where it is determined that activities may exhaust health department resources.

References:

ECCCHD Fee Schedule

Process Overview:

- A. **Fee Increases.** For situations in which the ECCCHD is requested to conduct related, but nonstandard work that would result in extra costs being incurred by the department, an additional fee may be requested to facilitate the work. In any such instance, the modified fee amount must be amenable to all parties prior to the service being authorized.
- B. **Fee Reductions.** As determined to be practical, fee reductions (via reduced payment or reimbursement) may be granted to accommodate:
1. Governing bodies and/or cooperating agencies that are either contributing to the ECCCHD budget and/or subject to the same tax base as the ECCCHD.
 - i. The rate of fee reductions granted to city/county governmental entities shall be based on the ratio of city/county tax levy used to fund the ECCCHD unless otherwise agreed upon;
 2. Laboratory analyses of routine drinking water compliance samples for Eau Claire County Municipalities (Eau Claire, Augusta, Altoona, Fall Creek, Fairchild);
 3. Situations in which a declared Public Health Emergency results in a prolonged and significant reduction in the payee's services and operations and the services intended to be provided by ECCCHD in association with an established fee;
 4. Limited-period promotional pricing to encourage increased awareness and participation in a departmental program; and
 5. Other contracts or projects at the discretion of the ECCCHD.
- C. **Fee Exemptions.** As deemed appropriate, fees may be waived to accommodate:
1. Routine laboratory testing associated with an obtained license or permit for which the ECCCHD incorporates laboratory costs into license and permit cost calculations;

2. Instances of a satisfactory inspection, including resolution of violations at a licensed facility or residential rental unit, at the discretion of the ECCCHD;
3. Sampling and testing of Health Department identified recreational waters in the City of Eau Claire and Eau Claire County in accordance with the Department's standard monitoring procedures;
4. Collection of routine drinking water compliance samples for Eau Claire County Municipalities (Eau Claire, Augusta, Altoona, Fall Creek, Fairchild);
5. Special public services conducted in relation to an ongoing or emerging public health emergency at the discretion of the ECCCHD;
6. Department conducted assessment, sampling, and analyses of lead contamination in homes containing children with elevated blood lead levels within Eau Claire County;
7. Sampling and analyses of homes for methamphetamine contamination within Eau Claire County, as requested by law enforcement; and
8. Testing of newborn drinking water for those contaminants presented as free-of-charge through the newborn program for qualifying Eau Claire County residents.

D. **Write-off.** Per applicable regulations and at the discretion of the ECCCHD, outstanding invoices may be written-off to enable the closure of long-standing invoices that have been left unpaid and are either ineligible for other collection methods or have otherwise been deemed impractical for further pursuit of payment.

E. **Tax-Roll.** Per applicable regulations and at the discretion of the ECCCHD, the balance of unpaid invoice(s) that have been issued to an individual or entity that owns property within the City of Eau Claire or elsewhere within Eau Claire County may be transferred to the property tax bill of the respective individual or entity, in order to obtain payment in a successive year.

F. **Collections.** Per applicable regulations and at the discretion of the ECCCHD, eligible outstanding invoices may be referred to the Wisconsin Department of Revenue (DOR) for collections.

Policy and Procedure Review:

This policy and procedure will be reviewed and revised on an as needed basis by the ECCCHD Management Team under the review and approval of the Health Director/Officer and final approval by the Board of Health.

Board of Health Meeting 04/28/2021

Agenda Item 6.a

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

Operations:

In March, we received a donation of \$250 from a citizen thanking the Health Department for its efforts over the last year. Our team is so appreciative of the support received from Eau Claire community members and this was an unexpected and wonderful reminder of the impact our department makes in promoting a safe and healthy City/County. We are still in the process of determining how the money will be used to support out staff and the work that they do.

National Public Health Week

April 5 – April 9 was the 2021 National Public Health Week. This is a week dedicated to bringing communities together to recognize all the hard work that has been put into public health in the past year (and frankly every year) and highlight health issues that are important to focus on. This year’s theme was “Building Bridges to Better Health” to recognize the physical distance between us all but staying connected as a nation. To celebrate this together as a department, the following activities were organized to allow all staff to engage in different ways.

*To Lieske and Her
Band of Angels,*

*Thank you for the
wisdom, guidance
and steady hand that
you have provided to
the citizens of western
Wisconsin during these
trying times.*

Day	Theme	Activity	When	Where
Mon 4/5	Rebuilding	Mindfulness Session	11:45am-12pm	WebEx
Tues 4/6	Advancing Racial Equity	United Way 21 Week Equity Challenge	All Day	Email from Ashley Hahn
Wed 4/7	Strengthening Community	Fitness Class (in-person) Fitness Class (virtual)	12-12:30pm 12-12:15pm	Health Dept. Entrance WebEx
Thurs 4/8	Galvanizing Climate Justice	Bingo	1:30-2pm	All Staff Meeting
Fri 4/9	Constructing COVID-19 Resilience	Reflecting on COVID-19 in 2020	All Day	Email & TBD Office Display

Throughout the week, staff were asked to contribute memories from 2020 to make this video, <https://www.powtoon.com/c/eof5KW7I3Fm/1/m>, which was shared with the department on Friday.

Self-Monitoring Blood Pressure (SMBP) program:

According to the American Heart Association, nearly 80 million adults have high blood pressure in this country. Less than half have it under control. High blood pressure is a key, modifiable, risk factor for both heart disease and stroke, which are two of the leading causes of death in the United States.

During Year 4 (July 2020 – July 2021) of the Diabetes & Heart Disease Prevention Grant, a YMCA evidence-based Self-Monitoring Blood Pressure (SMBP) program will be implemented to help adults with hypertension lower and manage their blood pressure. The four-month program focuses on regulating at-home self-

monitoring of one's blood pressure using proper measuring techniques, individualized support, and nutrition education for better blood pressure management. With the support from a trained Healthy Heart Ambassador, participants will:

- Measure and record their blood pressure at least two times per month
- Attend two personalized consultations per month
- Attend monthly Nutrition Education Seminars

Farmers' market:

Farmers' markets in Wisconsin provide a critical food resource, as well as an essential opportunity for Wisconsin farmers to connect with their communities. On Tuesday afternoons from June 22nd through September 21st, 2021 the Eau Claire City-County Health Department will host a farmers' market at the Eau Claire County Government Center at the corner of Lake Street and 2nd Avenue. The purpose of the on-site market is to improve WIC and county staff access to fresh, local produce, and to support local growers.

Medication Safety:

In partnership with the health department and Extension Eau Claire County, Lidix Montoya from the Neighbor to Neighbor: Together in Ministry program will be distributing medication lockboxes and deactivation bags to Latinx community members in the Chippewa Valley, 16 small lockboxes and 45 deactivation bags were provided. Educational materials in English and Spanish will be shared with individuals and families to discuss the importance of medication safety and disposal.

Cómo utilizar

El Deterra® Sistema es un proceso simple de tres pasos que desactiva los fármacos
Seguro • Conveniente • Eficaz

- 1 Rasgar abierto la bolsa y colocar los medicamentos no utilizados dentro
- 2 Llenar la bolsa hasta la mitad con agua tibia y esperar 30 segundos
- 3 Sellar estrechamente la bolsa, agitar suavemente y desecharla en la basura normal

www.DeterraSystem.com

DETERRA

PFAS (per- and polyfluoroalkyl substances) are a group of human-made chemicals used for decades in various products, including non-stick cookware, fast food wrappers, stain-resistant sprays and some types of firefighting foams. These contaminants stay in the environment and human body for extended periods of time. Recent findings indicate that exposure to certain PFAS may have harmful health effects in people. In 2019, the governor signed [Executive Order #40](#) to address the issue of PFAS across the state and the governor's [2021-23 biennial budget](#) proposes significant resources for the monitoring and testing of PFAS including over \$20 million over the next two years for assistance and resources to local communities that are impacted by PFAS contamination, as well as other work. On April 21, 2021, Gov. Tony Evers, with fellow state elected officials, reintroduced Wisconsin's Chemical Level Enforcement and Remediation (CLEAR) Act for the 2021-23 legislative session. The CLEAR Act, [LRB-2927](#), seeks to begin working to address statewide PFAS contamination. The provisions of the proposed legislation include funding new positions at the DNR specific to the implementation of a PFAS action plan, creating the PFAS municipal grant program for testing and remediation efforts by local governments, funding statewide monitoring and testing initiatives, collecting and disposing of PFAS contaminated firefighting foam, and establishing and enforcing environmental standards for PFAS.

PFAS in drinking water has not yet emerged as a known issue locally, but limited sampling has been conducted in the county to date. In 2013 the WDNR conducted sampling of several communities around the state to investigate PFAS in community water systems. This testing revealed the presence of PFAS compounds in the public drinking supply of several Wisconsin municipalities. This testing has led to additional study in public and private water supplies across the state, particularly in the vicinity of known contaminant sources, most notably, firefighting training sites. The City of Eau Claire water system was included in the testing in 2013 and no PFAS was detected. To staff's knowledge, there are several communities in the county that have not yet had their public water system tested for PFAS. Sampling and testing for these compounds is still a new science that includes extremely complex processes and strict protocols. In addition to drinking water testing, WDNR has also prioritized testing in wastewater and surface water in the past few years to better understand the extent of contamination in the state. Further refinement of protocols, expansion of funding for testing, and expanded testing in the vicinity of potential contamination sites would be helpful in facilitating further assessment of the issue locally and statewide. Health Department staff trained in groundwater contamination continue to follow state and national research and regulation developments related to PFAS.

Regency Hotel:

In December 2020 Eau Claire Attorney's Office filed a suit to close Regency Inn and Suites. The Health Department worked with city inspectors, fire department and police department to do a joint inspection of the property on March 4, 2021. The purpose of the inspection was to thoroughly assess the condition of the property so decisions regarding the future of the property will be informed. The Health Department portion of the inspection noted some violations, but no immediate health or safety concerns that would necessitate closure at this time. A reinspection for the critical items that were observed on March 4th was conducted on April 7th and the violations were found corrected at that time. Each agency sent a summary of the inspection to the City of Eau Claire Attorney's office. The City Attorney will be meeting with the hotel owner's attorney to discuss next steps regarding the lawsuit. 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.

A hotel working group met on April 9th, 2021 to discuss issues further. The current focus of the group is to work together to provide resources for the residents of the Regency that would be displaced if the hotel is forced to close. The group brainstormed ideas of setting up a resource table at the Regency to meet onsite with residents and working with individual residents to find stable and affordable housing.

The city attorney's office has a status meeting with the owner's attorney this week which will likely lead to another scheduled status update meeting. The health department will continue to be involved as needed including following up on any complaints about the property received from residents or the public.

DATCP Agent Program Evaluation:

The WI-DATCP Bureau of Retail Food and Recreational Business conducted an evaluation of our Retail Food and Recreational Business Agent program during the week of March 29, 2021. The Eau Claire City-County program operates as an agent of DATCP under the legal authority of s. 97.41. This evaluation is required by Chapter 97.41(2) Wis. Stats. and ATCP 74.12, Wis. Adm. Code and is conducted every three years. These typically are an onsite evaluation and this year was performed virtually due to COVID. This year the field exercises and field standardizations portion of the evaluation was not included.

We are pleased to report that we are in compliance with applicable state statutes, codes, regulations and departmental policy. In the report it said, "We recognize and commend the Eau Claire City-County management and their Boards for the commitment and support they have given to their Retail Food and Recreational Business Agent program as an agent for DATCP."

A few items of improvement were noted and we will fill out a work plan based on some feedback for improvement and will have a close out meeting May 6th.

Board of Health Meeting 4/28/2021

Agenda Item 6.b

March 2021 Media Contacts

INTERVIEW

3/2/2021	Title: Several educator vaccine clinics to begin Wednesday	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://wqow.com/2021/03/02/several-educator-vaccine-clinics-to-begin-wednesday/	
3/3/2021	Title: "I was just ecstatic," New groups receiving COVID-19 vaccine at health department clinic	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://wqow.com/2021/03/03/i-was-just-ecstatic-new-groups-receiving-covid-19-vaccine-at-health-department-clinic/	
3/3/2021	Title: Tick Season Approaching as Temperatures Rise	Topic: Communicable Disease Staff: Tristin Faust
	Link: https://wqow.com/2021/03/03/tick-season-approaching-as-temperatures-rise/	
3/10/2021	Title: Vaccination clinic held at North High School	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://www.weau.com/2021/03/10/vaccination-clinic-held-at-north-high-school/	
3/16/2021	Title: A look at where people can get vaccinated	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://www.weau.com/2021/03/17/a-look-at-where-people-can-get-vaccinated/	
3/16/2021	Title: Wisconsin restaurant workers are immediately eligible for the COVID-19 vaccine	Topic: Communicable Disease Staff: Audrey Boerner
	Link: https://www.leadertelegram.com/covid-19/wisconsin-restaurant-workers-are-immediately-eligible-for-the-covid-19-vaccine/article_96bd61de-c4a5-5271-828d-1f9982ab1114.html	
3/17/2021	Title: When will the pandemic officially come to an end?	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://www.weau.com/2021/03/17/when-will-the-pandemic-officially-come-to-an-end/	
3/19/2021	Title: 'It's about community': Eau Claire health director reflects on year of COVID-19, looks forward to th	Topic: Communicable Disease Staff: Lieske Giese
	Link: https://wqow.com/2021/03/19/its-about-community-eau-claire-health-director-reflects-on-year-of-covid-19-looks-forward-to-the-future/	
3/22/2021	Title: Subgroup 1C Now Eligible for Covid-19 Vaccine	Topic: Communicable Disease Staff: Elizabeth Giese
	Link: https://www.weau.com/video/2021/03/22/subgroup-c-now-eligible-covid-vaccine/	

3/30/2021 Title: Wisconsin to open vaccinations to general public Monday Topic: Communicable Disease
Staff: Audrey Boerner
Link: https://www.leadertelegram.com/covid-19/wisconsin-to-open-vaccinations-to-general-public-monday/article_530a2079-4a0e-5b34-a55b-fb0d6068a9d9.html

PRINT ARTICLE

3/1/2021 Title: Fit Families Newsletter Topic: Chronic Disease Prevention
Staff: Sarah Nix
Link: [Not Available](#)

3/1/2021 Title: Fit Families Newsletter Topic: Chronic Disease Prevention
Staff: Sarah Nix
Link: [Not Available](#)

3/1/2021 Title: Fit Families Newsletter Topic: Chronic Disease Prevention
Staff: Sarah Nix
Link: [Not Available](#)

3/2/2021 Title: Good as Gold Scavenger Hunt- Topic: Healthy Living and Prevention
Staff: Aimee Gillespie
Link: [Not Available](#)

3/4/2021 Title: Vaccine clinics for COVID-19 run in Augusta Topic: Communicable Disease
Staff: Paulette Magur
Link: [Not Available](#)

3/18/2021 Title: Students from Osseo, Cadott helping at vaccination clinic Topic: Communicable Disease
Staff:
Link: [Not Available](#)

3/18/2021 Title: People Who Smoke Face Greater Risk to Get Sicker from COVID-19 Topic: Healthy Living and Prevention
Staff:
Link: [Not Available](#)

3/25/2021 Title: County health depts. Expand vaccine eligibility Topic: Communicable Disease
Staff: Lieske Giese
Link: [Not Available](#)



Eau Claire City-County
Health Department

Service Recognition Certificate

In appreciation of your 32 years of dedicated service and nursing expertise that have improved the health of every citizen, visitor, city, town and village in the County of Eau Claire.

This certificate is presented to
Paulette Magur
Communicable Disease Division Manager

Signature Director/Health Officer

Date

Signature President, Board of Health

Date

Fact Sheet –04/28/2021 Board of Health Meeting

Agenda Item 6.d

Preliminary December 2020 Financial Statements

Each year we bring to the Board a preliminary review of the previous year’s financial statement. As is well known, the COVID-19 pandemic has created many challenges related to our fiscal situation. This has been related to both revenue and expense changes. Some issues included:

- Several grants had ended but several new grants were secured at the start of 2020.
- Some existing and new grants had to be postponed, decreased, or cancelled.
- New staff was hired for both permanent and temporary positions.
- Revenue from COVID related grants increased
- Revenue from individuals and businesses for certain services decreased.

In the end there was a savings. Staff, who normally charged to tax levy, were re-assigned to COVID efforts or new grants. Vacancies occurred and could not be refilled quickly enough. This resulted in an excess of revenue over expenses.

It is estimated over \$700,000 of that excess was due to tax levy savings related to COVID reassignments and deployment away from tax levy programs. Therefore, a reserve has been established in Fund Balance for use in future COVID related efforts. The remaining excess is due to vacancies and new revenue. The preliminary report shows a contribution to fund balance of a total of \$1.282K.

We are in the process of the audit and adjustments continue to be made so there will changes in that number and our overall financials. However, we do not expect major changes at this point.

Attached is the *draft* copy of the year-end financial report for 2020. The final reports are normally ready by the July Board of Health.

Prepared by Janice Vinopal Budget Specialist

**Eau Claire City-County Health Department
Balance Sheet
As of December 31, 2020**

		Changes	
		Change from Prior Quarter	Change from Prior Yr
Assets			
Cash and Investments <i>(Cash in bank , petty cash, gift cards)</i>	\$ 2,048,232	\$ 435,299	\$ 615,257
Accounts Receivables <i>(Bills outstanding non government)</i>	\$ 108,139	\$ (86,870)	\$ 67,967
Due from other governments <i>(Bills outstanding government)</i>	\$ 1,067,740	\$ 903,925	\$ 647,664
Taxes Receivable	\$ 14,670	\$ 14,670	\$ (18,230)
Prepayments <i>(Payments made in advance i.e. health, life insurance)</i>	\$ 129,786	\$ (495,700)	\$ 31,890
Inventories <i>(Radon Kits)</i>	\$ 517	\$ (4,679)	\$ (470)
Allowance for Doubtful Accts <i>(Estimate of uncollectables)</i>	\$ (350)	\$ (200)	\$ (201)
Total Assets	\$ 3,368,734	\$ 766,445	\$ 1,343,877
Liabilities			
Accounts Payable <i>(Amts owed incl. payroll taxes, health, life)</i>	\$ 355,219	\$ (430,106)	\$ 123,010
Accrued Liabilities <i>(Accrued Payroll done at year end)</i>	\$ 59,199	\$ 59,199	\$ (45,302)
Due to other governments <i>(Sales tax, state license fees, rent to County)</i>	\$ 16,754	\$ (4,286)	\$ (2,185)
Deferred Inflows <i>(Amts. Billed-not received, advance on contracts)</i>	\$ 192,872	\$ (165,746)	\$ (13,742)
Total Liabilities	\$ 624,044	\$ (540,939)	\$ 61,781
Fund Balances			
Fund Balance <i>(Restricted, non-spendable prepayments, inventories)</i>	\$ 1,462,594	\$ -	\$ 121,663
Control Accounts <i>(Current year revenue over (under) expense)</i>	\$ 1,282,096	\$ 1,307,384	\$ 1,160,433
Total Fund Balances	\$ 2,744,690	\$ 1,307,384	\$ 1,282,096
Total Liabilities and Fund Balances	\$ 3,368,734	\$ 766,445	\$ 1,343,877

	<u>12/31/2019</u>	\$
<i>Non-Spendable Pre Payment</i>	\$ 97,896	
<i>Non-Spendable Inventory</i>	\$ 988	
<i>Restricted to Particular Projects</i>	\$ 37,584	
<i>Restricted - Capital Purchases</i>	\$ 360,660	
<i>Restrcted - Working Capital</i>	\$ 955,466	
<i>Restricted - Special Projects</i>	\$ 10,000	
Fund Balance at 12/31/19	\$ 1,462,594	-

**Eau Claire City-County Health Department
Revenue and Expense Statement
As of December 31, 2020**

Revenues	Adoped Budget	Revised Budget	YTD Actual	% of Revised Bdgt	Change from Prior Quarter	Change from Prior Yr
Intergovernmental <i>(Federal and state grants)</i>	\$ 1,686,000	\$ 4,409,700	\$ 4,334,960	98.3%	\$ 3,185,341	\$ 2,903,898
Licenses & Permits <i>(Lodging, restaurant, sanitary etc.)</i>	\$ 729,000	\$ 729,000	\$ 605,292	83.0%	\$ 150,307	\$ (99,265)
Charges for Services <i>(Water tests, vaccinations inspections etc.)</i>	\$ 177,000	\$ 177,000	\$ 144,018	81.4%	\$ 44,048	\$ (92,692)
Charges for Services - Intergov. <i>(Medicaid, schools, County tax)</i>	\$ 1,622,000	\$ 1,622,000	\$ 1,485,225	91.6%	\$ 451,596	\$ (35,274)
Misc revenue <i>(Gifts, reimbursements, non-governmental grants)</i>	\$ 303,100	\$ 322,700	\$ 353,846	109.7%	\$ 128,757	\$ 16,917
Other Financing Sources <i>(Taxes from City, CDBG revenue)</i>	\$ 2,020,500	\$ 1,980,900	\$ 1,974,588	99.7%	\$ 1,117	\$ (20,269)
Other Budgeted Receipts <i>(Budget only-use of fund balance)</i>	\$ 222,100	\$ -	\$ -	0.0%	`	\$ -
Total Revenues	\$ 6,759,700	\$ 9,241,300	\$ 8,897,929	96.3%	\$ 3,961,166	\$ 2,673,315
Expenses						
Personnel <i>(Payroll, benefits, auto allowance)</i>	\$ 5,891,200	\$ 7,745,300	\$ 6,314,555	81.5%	\$ 2,062,323	\$ 1,097,008
Contractual Services <i>(Postage, computer service, rent, advertising, audit, etc.)</i>	\$ 448,600	\$ 918,100	\$ 800,420	87.2%	\$ 372,815	\$ 313,822
Utilities <i>(Phones, garbage)</i>	\$ 34,700	\$ 42,400	\$ 47,828	112.8%	\$ 11,897	\$ 11,172
Fixed Charges <i>(License & Permits, Workers Comp)</i>	\$ 16,200	\$ 16,500	\$ 15,385	93.2%	\$ 342	\$ 2,640
Supplies <i>(Office, lab, medical, equipment, gift cards, etc.)</i>	\$ 229,900	\$ 379,900	\$ 356,288	93.8%	\$ 204,055	\$ 138,303
Contributions & Other Payments <i>(Payments to other organizations)</i>	\$ -	\$ -	\$ -	0.0%	\$ -	\$ (150)
Capital Purchases <i>(Long term purchases over \$5,000)</i>	\$ 112,500	\$ 112,500	\$ 52,425	46.6%	\$ -	\$ (51,579)
Other Financing Uses <i>(Debt service for debt on unfunded pension)</i>	\$ 26,600	\$ 26,600	\$ 28,932	108.8%	\$ 2,350	\$ 1,666
Total Expenses	\$ 6,759,700	\$ 9,241,300	\$ 7,615,833	82.4%	\$ 2,653,782	\$ 1,512,882
Net Revenue Over / (Under) Expenses	\$ -	\$ -	\$ 1,282,096		\$ 1,307,384	\$ 1,160,433

2020

Annual Report Summary



Eau Claire City-County
Health Department

720 Second Avenue
Eau Claire, WI 54703
www.echealthdepartment.org



Message From the Health Officer

I am proud to share with you the 2020 Eau Claire City-County Health Department Annual Report Summary. The stories in this report highlight a few of the many public health issues we addressed this year, in addition to our ongoing response efforts for COVID-19. 2020 was a busy and challenging year for the health department as we focused on a broad range of emerging and ongoing public health issues! These included:

- COVID-19
- Safe and affordable housing for all community members
- Drug misuse prevention including opioids and vaping
- Safe water
- Chronic Disease work around heart health and diabetes awareness

As I reflect on this last year, I am grateful for our dedicated health department team here and all our community partners, whose hard work and commitment were critical to our successes this last year. Thank you for your continued support of the work we do to promote health and safety for all communities in Eau Claire County.

We look forward to working with all of you in the next year as we continue to work on these and other important public health topics. We will continue to strive to meet the needs of all that live, work, learn, vacation, play, and spend time here. The health department recognizes that there are challenges and opportunities in the year ahead and is positioned well to be strategic in addressing these. In 2021, the health department will work to incorporate health in all policies, continue working on Racism as public health issue, and will continue to be a leader in the state on water issues. The health department will also continue to address the challenges of drug and alcohol misuse, chronic disease, healthy babies, mental health, homelessness, affordable housing, and public health emergency preparedness. Let me know how we can continue to improve all the work we do here at the Health Department.

Respectfully,



Lieske (Elizabeth) Giese
Health Officer-Director
Eau Claire City-County Health Department



Health Department Overview

Mission

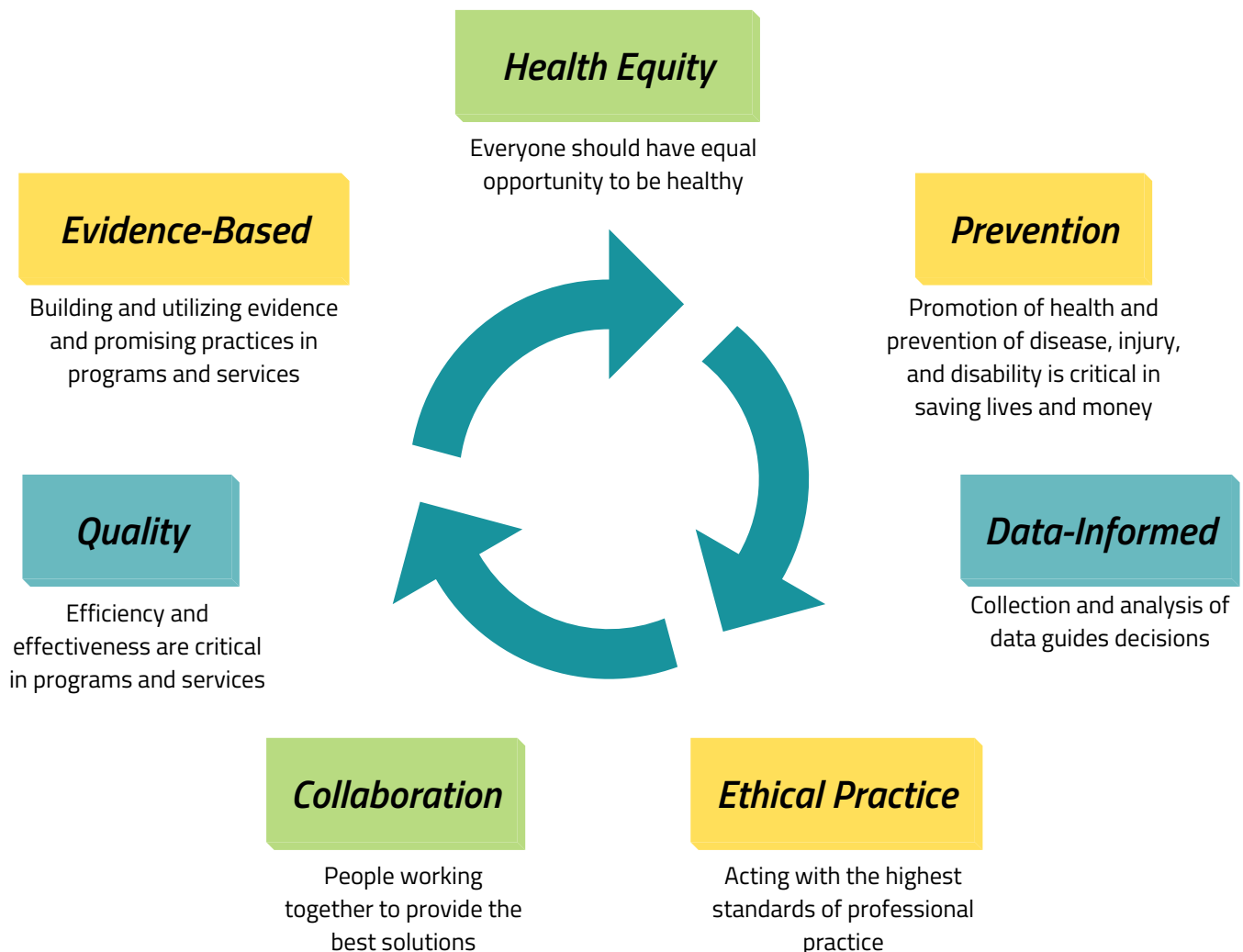
Promoting health and safety for all Eau Claire communities

Vision

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

Guiding Principles

Seven overarching principles guide the work of the Eau Claire City-County Health Department:



Meet Our Managers

Assistant Director



Marisa Stanley

Environmental Sciences



Matt Steinbach

Community Health Promotion



Denise Wirth

Healthy Beginnings



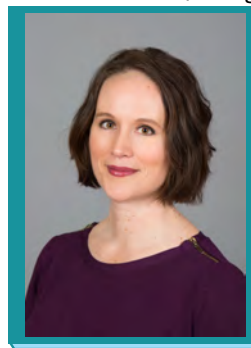
Elizabeth Draeger

Regulation & Licensing



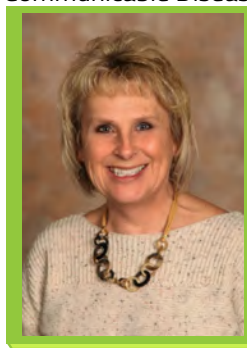
Jeff Robb

Operations and
Clinical Services (acting)



Tegan Ruland

Communicable Disease



Paulette Magur

Policy & Systems



Cortney Draxler

Eau Claire City-County Board of Health

The Eau Claire City-County Board of Health (BOH) is an eight-member board appointed by the County Board and City Council. The BOH advocates for reasonable and necessary public health services. They also provide leadership that fosters local involvement and commitment. The BOH is made up of: a City Council member, a County Board member, two practicing physicians, one practicing dentist, one registered nurse, and two community representatives.

Members:

Emily Berge - City Council

Jennifer Eddy, MD

Terry Miskulin, DDS

Merey Price, RN

Kari Stoede (outgoing)*

Donald Bodeau, MD

Mark Kaeding (incoming)*

Martha Nieman - County Board

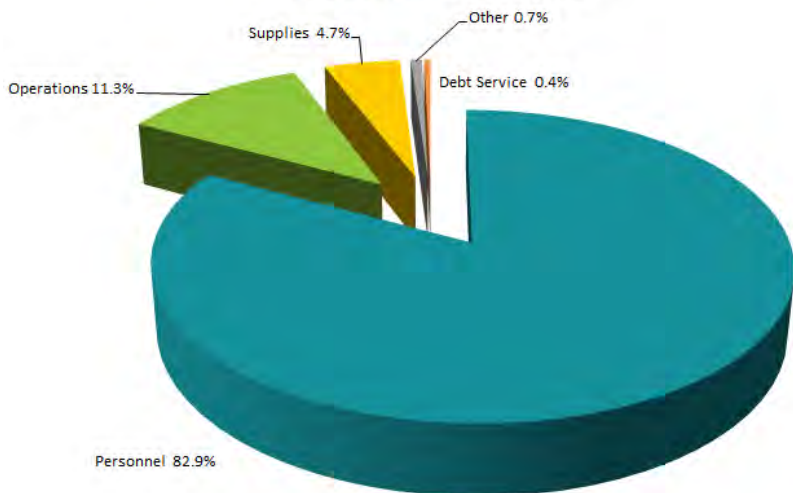
Elizabeth Spencer (outgoing)*

True Vue (incoming)*

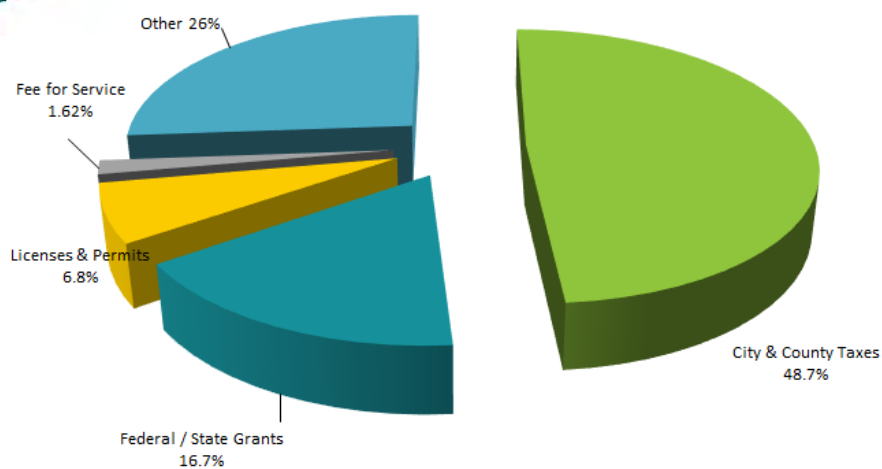
2020 Budget

Here is a general review of the 2020 Eau Claire City-County Health Department budget. We are proud of our remarkable staff and the amazing work they do. In fact, staff represent the largest and one of the most important expenses we have. This staff strives to acquire diverse funders to support health department work.

2020 Estimated Expenses



2020 Estimated Revenues



Operations Division

The Operations Division provides leadership, support, and oversight of operational capacity for all divisions, including areas of human resources, finance, and technical support. This team works hard to keep the health department organized and functioning efficiently to best serve the community.



Local Health Data

Data provides an overview of the health of our community and can show how health is influenced by many factors. This includes our everyday surroundings - where we live, learn, work, and play. Accurate data helps us to:

- Identify and understand current and potential health problems or environmental public health
- Provide reliable health information to community partners hazards
- Evaluate if our programs, policy changes, and environmental changes are making a difference

Eau Claire County By The Numbers

104,646

Eau Claire County
Population
(Census)

\$59,476

Median Household
Income (Census)

10.6%

Persons Living in
Poverty (Census)

23%

Eau Claire County
Residents Living in
Rural Areas (Co
Health Rankings)

79.5

Average Years
Expected To Live
(Co Health
Rankings)

9%

Population is African
American, Asian,
American
Indian/Alaskan Native,
Hispanic, or Native
Hawaiian/Other Pacific
Islander (Census)

39%

Households in
Poverty or Qualify as
ALICE (Asset Limited,
Income Constrained,
Employed)
(United Way)

\$12,140

Household Costs
for Single Adult
(United Way)

616

Seasonal Flu Shots
Administered

Learn how we are protecting
the public from spread of
disease on [page 6](#)

59

Pap Smears

Learn how our Family
Planning Clinic has improved
on [page 8](#)

1,078

NFP Telehealth
Visits

Learn how we are providing
for families on [page 10](#)

1,390

Housing
Inspections

Learn how we are keeping
housing safe on [page 11](#)

Communicable Disease Division

Provides essential services to prevent and control communicable disease outbreaks and prepares public health emergency response activities.

Filling Gaps to Protect Community Health

The communicable disease team works hard to keep you safe from illnesses like influenza (flu), tuberculosis (TB), and many others in a typical year. This year we added SARS-CoV-2, popularly known as COVID-19. The team is committed to preventing disease outbreaks by continuously collecting and reviewing data on disease exposure, monitoring disease outbreaks when they occur, and following up with individuals who have been exposed to make sure they are receiving care and not spreading the disease to others.

The communicable disease team focuses on health equity and assurance, meaning that anyone who has trouble accessing a flu vaccine, thermometer, or mask can receive one from the health department. For example, the team supported several volunteers throughout 2020 who delivered free masks and thermometers to people who otherwise would not have access to them. They also sponsored multiple drive-thru vaccine clinics to distribute influenza vaccines to children and adults. By utilizing a drive-through model for vaccine distribution for influenza early in the year, the communicable disease team was able to distribute shots quickly and safely without requiring recipients to leave their cars, and provided health department staff an opportunity to practice a drive-through model for future COVID-19 vaccination clinics.

Communicable Disease by the Numbers

IMMUNIZATIONS
ADMINISTERED
(NON-COVID)

1,070

SEASONAL FLU
SHOTS
ADMINISTERED

616

FOLLOWED UP ON
REPORTED
COMMUNICABLE
DISEASES CASES
(NON-COVID)

849



Clinical Services Division

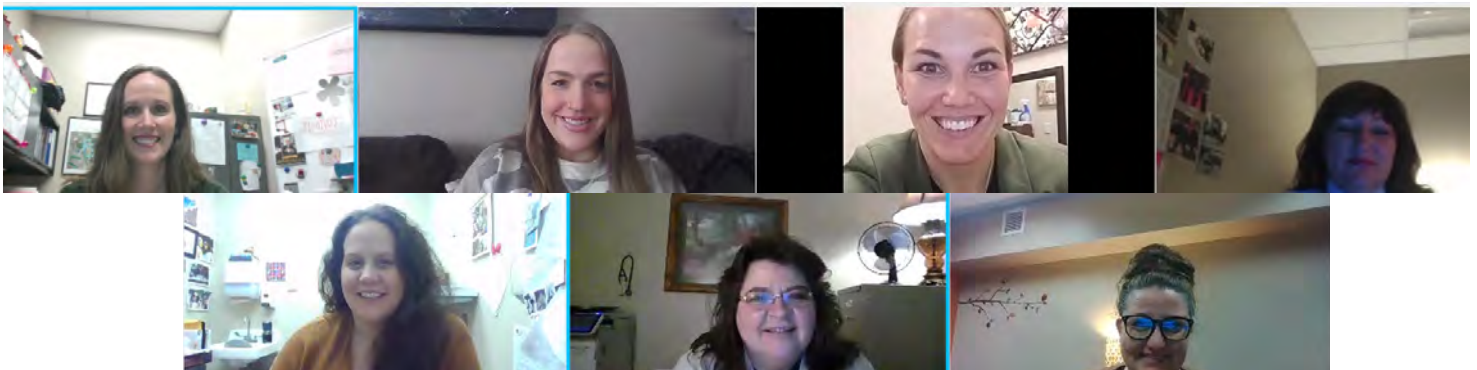
Provides quality reproductive health services, including testing and treatment of diseases and infections. The division also provides education to raise community awareness of less risky sexual behavior.

Expanding Telehealth Visits

At the onset of the COVID-19 pandemic, the Family Planning Clinic (FPC) team began offering virtual telehealth visits so patients could receive family planning services without visiting the clinic in-person. This helped prevent the spread of infectious disease between visitors and staff, and for some patients made appointments more easily accessible by eliminating travel time to and from the clinic. We were able to continue to provide basic essential services related to pregnancy prevention and reproductive health.

Shared Nurse Practitioner Model

Beginning in 2019, the Eau Claire City-County, Pepin County, Pierce County, St. Croix County and Dunn County health departments collaborated to develop a shared service model for family planning nurse practitioner (FPNP) services. In 2020, we hired a Nurse Practitioner and began working within this innovative partnership arrangement to support high-quality, accessible and sustainable nurse practitioner services across all five counties. Even with the COVID-19 response taking a high priority, all five counties were able to continue providing family planning services to populations that may otherwise not have access during the year.



Clinical Services By The Numbers

LONG-ACTING
REVERSIBLE
CONTRACEPTION

26

TOTAL VISITS

804

CHLAMYDIA
CASES

369

SEXUALLY
TRANSMITTED
INFECTION
SCREENINGS

556

Community Health Promotion Division

Works collaboratively with partners to identify and address strategies to improve community health where we live, work, and play.

Sharing Tools to Fight Chronic Disease

The community health promotion team aims to reduce the burden of chronic disease in Eau Claire County by providing resources and education covering topics like type II diabetes prevention, healthy lifestyle habits, adult nutrition, and more. This year, the team distributed healthy lifestyle supplies such as orange peelers, water bottles, measuring spoons, and exercise resistance bands at local farmers' markets. The team also successfully partnered with community agencies like Hope Gospel Mission, the Lion's Club, and the L.E. Philips Memorial Public Library to distribute chronic disease prevention kits and information on heart health and exercise to those experiencing homelessness and poverty. Additionally, the team promoted available resources through media interviews, press releases, print articles, and social media posts.

Creating a Substance-Free Community

Reducing the prevalence of vaping and commercial tobacco consumption remained a community health priority in 2020. The community health promotion team successfully completed 21 tobacco compliance checks to ensure that tobacco products were not being illegally sold by retailers to youth under the age of 21. All retailers checked by the Health Department followed federal law by checking customer IDs at the time of purchase and declining to sell tobacco products to those under age 21. The community health promotion team provided resources to local entities, such as the City of Eau Claire, to provide guidance to add vaping and e-cigarette products to their smoke-free indoor air ordinances.

Community Health Promotion by The Numbers

ON-SITE FARMER'S MARKETS

14

CHRONIC DISEASE PREVENTION KITS

265

TOBACCO COMPLIANCE CHECKS

21



Healthy Beginnings Division

Provides a wide variety of individual and family services that positively impact the health of our community, specifically the maternal and child health population.

Here for You, No Matter What

In 2020, the United States Department of Agriculture (USDA) announced several WIC program flexibilities to ensure that nutritionally at-risk families could continue receiving nutrition assistance and other benefits throughout the pandemic. For the first time, Eau Claire County WIC families were able to be approved for benefits and attend appointments virtually without making an in-person office visit. For some participants, this made attending WIC appointments easier by eliminating the need to take time off from work or use transportation to and from appointments.

The average monthly caseload increased by 3.89%, for an average of 56 new families now obtaining WIC services in Eau Claire County. WIC is proud to serve families in need of nutrition assistance, breastfeeding support and more, and are committed to providing high-quality nutritional services to families in the year to come.

Keeping Families Connected

At the onset of the Covid-19 pandemic, the Nurse Family Partnership (NFP) program transitioned all appointments to telehealth visits in order to meet pregnant women and young family needs and prevent disease spread. During this time, the NFP National Service Office identified the critical need for nurses to remain in contact with their clients. NFP contracted with Verizon to provide 22 clients with a cell phone and cell phone plan. This helped NFP nurses stay in touch with clients in addition to their Covid-19 response duties and allowed clients to participate in the program without in-person visits.

Healthy Beginnings By The Numbers

WIC MONTHLY FAMILY ANVERAGE INCREASE

56

NFP TELEHEALTH VISITS

1,078

CAR SEATS GIVEN & INSTALLED

34

CRIBS AND PACK&PLAYS GIVEN

19



Environmental Science Division

Provides programs and services to enhance and protect environment quality. This division increases awareness of how environmental hazards conditions significantly influence the health and welfare of communities.

Healthy Coops in Eau Claire

The Environmental Sciences Poultry Program provides support for the City of Eau Claire ordinance that allows residents within the City of Eau Claire to safely keep poultry in some areas. The purpose of this program is to ensure that eggs are utilized for household use, that poultry are kept in safe and sanitary conditions, and that the ordinance standards are being followed. The division's involvement in the City of Eau Claire's licensing procedures, which includes education to licensees, seeks to prevent an outbreak of illness due to improper poultry handling, egg distribution, hand washing, or management of feed, waste, or sick birds. Staff have assisted in the licensing of fifteen poultry coops in the city. A city poultry license requires an application showing a thoughtful and safe plan for poultry keeping, including the intended coop design and a plan for managing waste.

Testing for Tick-Borne Illnesses

The division partnered with state and federal agencies to conduct additional testing on ticks that were collected from two rural parks in Eau Claire County in late 2019. In addition to the routine test for *Borrelia burgdorferi*, the bacteria that can cause Lyme disease, a subset were sent to the CDC to be tested for several other pathogens that the Department's laboratory had not historically tested for. These tests revealed the presence of several other pathogens of concern, although at much lower levels than *Borrelia burgdorferi*. The result of the testing suggests that monitoring for other pathogens may be beneficial to supplement the ongoing efforts to evaluate and track the various parks for their risk of human exposure to infected ticks.

Environmental Science By The Numbers

ANIMAL
BITE/EXPOSURE
FOLLOW-UPS

120

PERMITS ISSUED
FOR WELL
INSTALLATION,
REPLACEMENT, AND
RECONNECTION

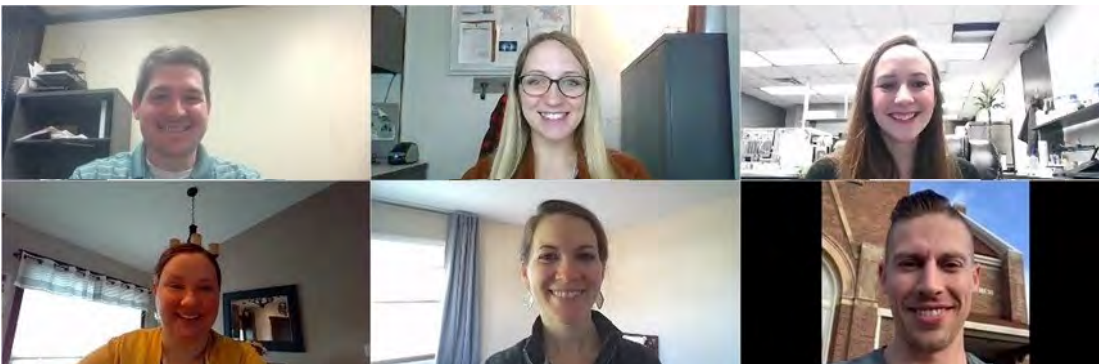
168

PERMITS ISSUED FOR
PRIVATE ON-SITE
WASTEWATER
TREATMENT SYSTEMS
(POWTS)

203

DRINKING WATER
TESTS
PERFORMED

7,043



Regulation & Licensing Division

Inspects any facility that provides necessities such as food, water, and housing to the public. This division also inspects recreational facilities and temporary event spaces.

Safer Home and Work Environments

In the early stages of the COVID-19 pandemic, the inspection and licensing team strategically partnered with the Chippewa Valley COVID-19 Economic Recovery Task Force (CVERT) to work with businesses to help inform and create safe working practices. The team distributed outreach emails, newsletters, and phone calls to keep businesses updated with changing information and guidance related to disease prevention. The team incorporated COVID-19 education into regular business and restaurant inspections, and followed up on complaints related to employees or customers not following local and state orders and community expectations.

Healthy Housing for a Healthy Life

The Housing Program works with local partners to reduce unsafe and unhealthy housing throughout Eau Claire County by inspecting interior and exterior conditions and enforcing housing codes to promote health and safety. This year, the housing inspection team focused on Maples Neighborhood, a mobile home park in the City of Eau Claire. In collaboration with residents and local partners, units in the park were inspected for health and safety, and when hazardous conditions were identified, the number of units were reduced over time to minimize displacement of residents. Eventually, the park was sold in October 2020. Our housing team worked with community partners to identify alternative housing to residents who were displaced.



Regulation & Licensing By The Numbers

RESTAURANT & RETAIL FACILITY INSPECTIONS

607

POOL INSPECTIONS

56

RENTAL UNITS REGISTERED

10,231

RENTAL PROPERTIES REGISTERED

3,606

PROPERTY INSPECTIONS

1,390

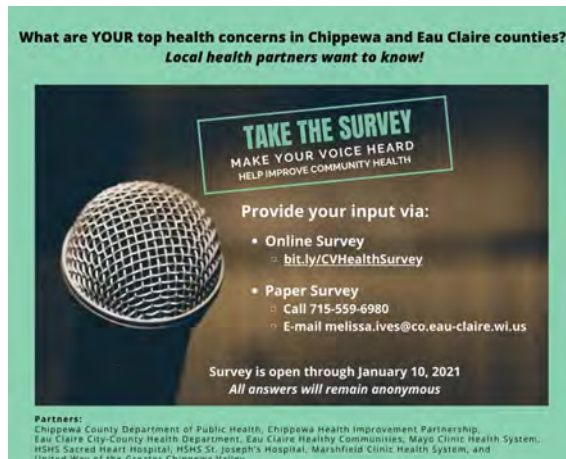
Policy & Systems Division

Works closely with partners to collectively identify and communicate importance of including health in policy, system and environmental changes across the department and community.

Measuring Community Needs and Setting Priorities

Community partners from Eau Claire and Chippewa Falls came together to begin the 2020-21 Community Health Assessment process this fall. The Health Department partnered with the Chippewa County Department of Public Health, Chippewa Health Improvement Partnership, Eau Claire Healthy Communities, Marshfield Clinic, Mayo Clinic Health System, HSHS Sacred Heart Hospital, HSHS St. Joseph's Hospital, and United Way of the Greater Chippewa Valley for the assessment.

The goal of the Community Health Assessment (CHA) is to learn from community members what they think the top health priorities are. The CHA also provides the Health Department and other partners an opportunity to learn about the health needs of the community, and evaluate community priorities. The first part of the CHA, an electronic survey, was distributed widely in December 2020. Paper copies were also provided to respondents, and a total of 976 Eau Claire County residents responded to the survey. In 2021 several community conversations will be held to share survey and local health data, where participants will discuss the data and vote for their top three health areas from the 14 areas listed in the survey. Results from the CHA will be used to help guide Health Department actions and mobilize the community to address health issues in the coming three years.



Top 5 Health Priorities from 2020 Community Survey

1. MENTAL HEALTH
2. DRUG USE
3. ALCOHOL MISUSE
4. OBESITY
5. HEALTHY NUTRITION



COVID-19

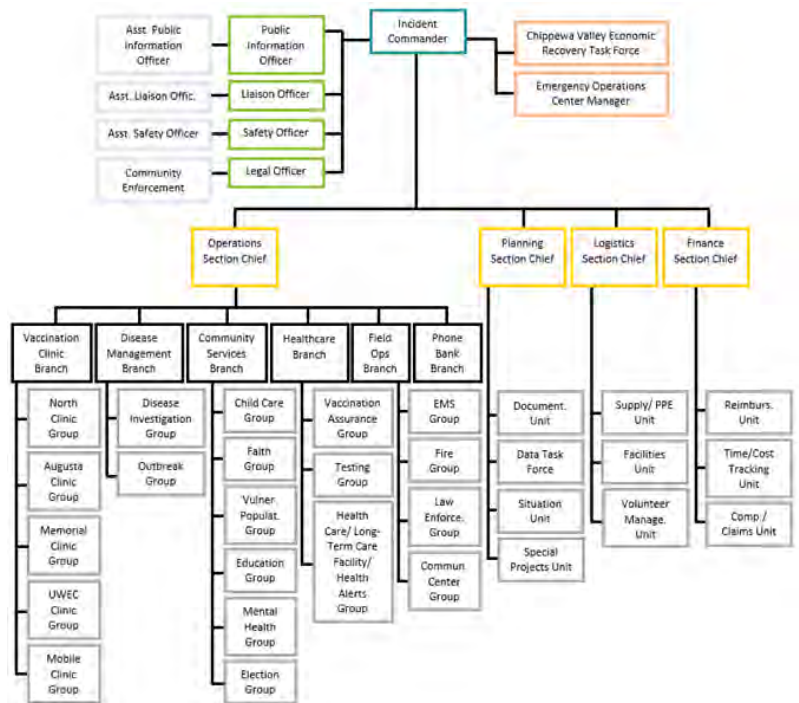
What a year! 2020 brought us new vocabulary, new experiences, and a very new awareness of public health. You may have:

- Learned the meaning of “quarantine”, “isolation”, and “socially distant”
- Discovered many ways to measure 6 feet
- Become a frequent user of curbside pickup and delivery services
- Attempted a quarantine haircut for yourself or a family member
- Participated in a virtual ___ (wedding, bingo, trivia, holiday, concert...you fill in the blank!)

We also had a year with an unprecedented number of our residents being hospitalized & dying from a respiratory virus. There is no simple way to sum up this year. *Devastating. Challenging. Ever-changing. Exhausting.* One word we would also use is **thankful**. We are so thankful for our amazing staff and community partners who have worked countless hours to protect our community’s health during the COVID-19 pandemic.

As a public health department, we regularly prepare and plan for public health emergencies. As part of this preparation, on Jan 22, 2020, the Incident Command System was opened as we were hearing concerns about a possible pandemic.. (Incident command is a standard management structure with procedures for managing temporary incidents of any size). Throughout 2020, ICS was staffed primarily by Health Department staff and with additional community partners. Lieske Giese, the Health Department Director, has served as Incident Commander.

Incident Command helps to ensure efficient emergency response, with very specific roles and expectations for each role. This system has also helped us to quickly expand certain branches as needed (such as during our case surge, or when vaccinations began). This is the longest time we have EVER been working in an emergency response like this. The incident command structure ensures we have a coordinated response and clear, consistent, and accurate information for the community (see picture on right with incident command diagram).

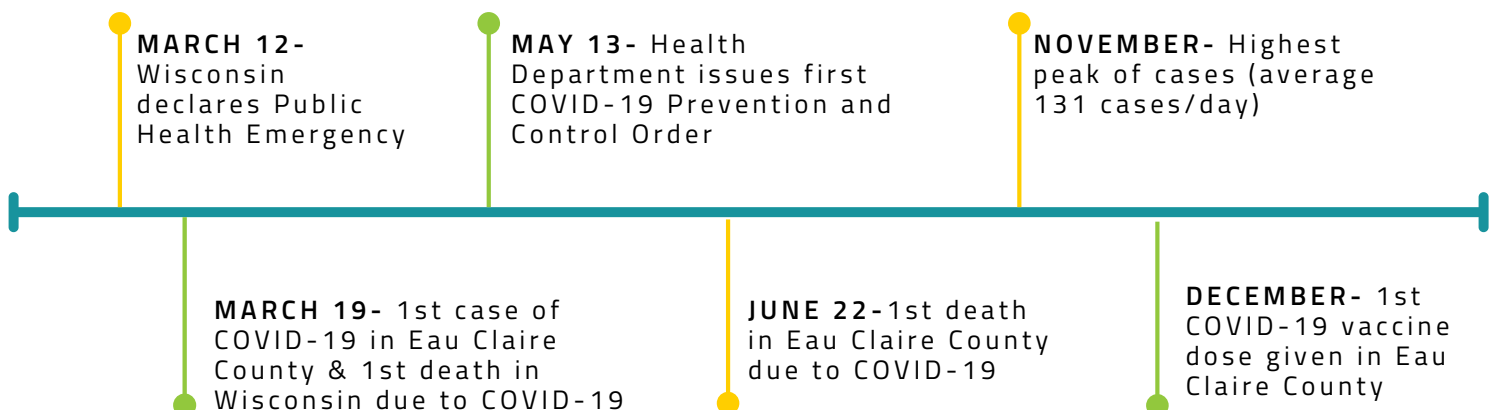


COVID-19

COVID-19 Response Accomplishments in 2020 (and the work continues in 2021)

- Eau Claire Incident Command for COVID-19 response has more than 95 people filling various Incident Command roles to ensure we are able to respond efficiently and effectively to COVID-19.
- Answered nearly 7,000 calls to our COVID-19 Call Center since it opened (March 25-December 31)
- Held 91 live COVID-19 briefings on social media to provide current information for our community and developed 72 weekly situation reports to distribute to the community and partners.
- Investigated 9,712 cases of COVID-19 and followed up with the many close contacts of those cases.
- Hired and supervised 51 additional COVID-19 disease investigators to follow up with cases
- Worked with schools on best practices and mitigation strategies throughout the year. Created the Schools Toolkit for what to do when experiencing symptoms, when to stay home from school, safety requirements of every Eau Claire County school for reducing COVID-19 transmission, and many other topics.
- Developed a local COVID-19 Prevention and Control order to provide specific guidance for individuals, public spaces, and private and public gatherings. This order was revised multiple times throughout the year based on public health science and available data.
- Starting in September 2020, partnered with 7 community organizations and distributed \$54,405 to promote testing and COVID-19 information in vulnerable populations in EC County. The grant work ended on December 31, 2020 and by then these organizations reached approximately 1,100 individuals and signed up 130 for testing appointments.
- Developed protocol for outbreak testing including a partnership with local EMS to provide on-site testing a site of potential outbreaks. 350 tests were done by EMS as part of this strategy; one outbreak included weekly tests for 13 weeks.
- Supported two Wisconsin National Guard testing sites, beginning in October 2020. The Augusta site performed 500 tests in 2020 and the Eau Claire regional site performed 4,399. National Guard staff also worked with the ECCCHD to provide testing for people experiencing incarceration.
- Provided hotel rooms for 125 cases or close contacts to safely complete isolation/quarantine.
- And much more.....

Timeline & Highlights



We are committed to creating a safe and healthy community for all the citizens of Eau Claire County. We are proud to share some of the progress that our county has made in 2020. Thank you for taking the time to read about the empowering and necessary work that our dedicated staff devote their time to each and every day.



Eau Claire City-County
Health Department

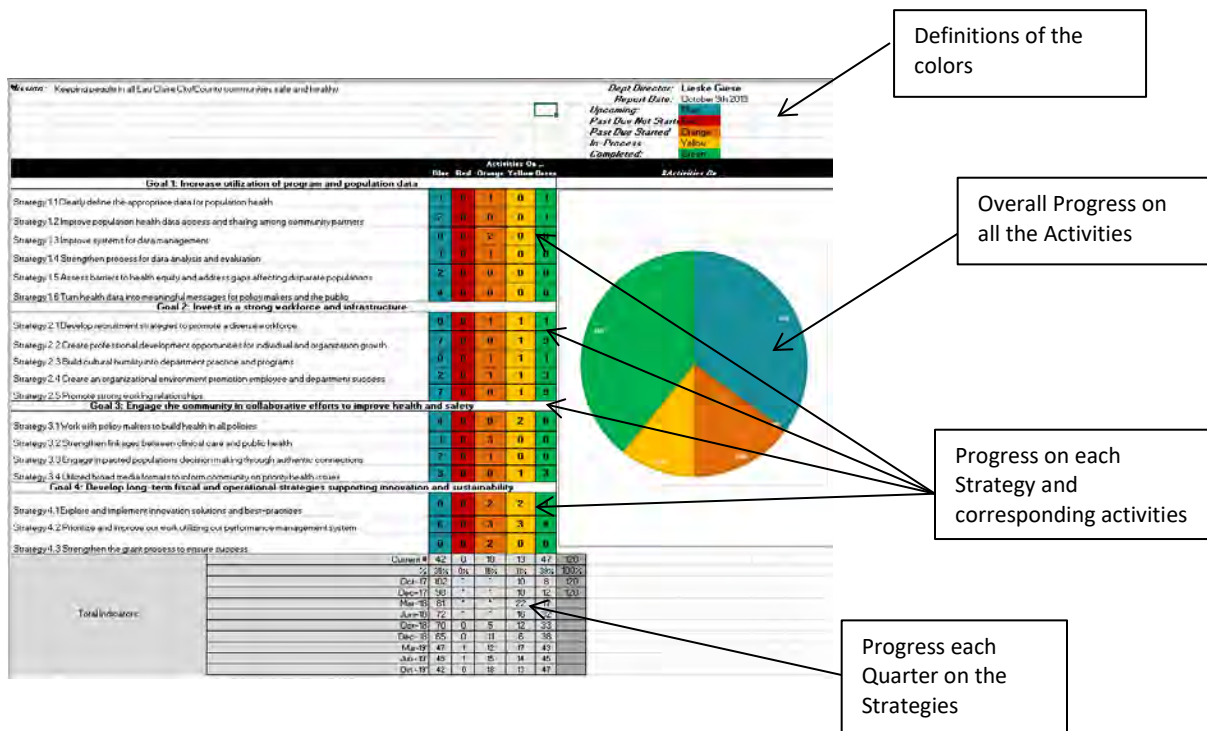
Full Annual Report and
Annual Report Summary
available at
www.echealthdepartment.org

Board of Health Meeting 4/28 /2021

Agenda Item 6.f 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 under a year left in the Strategic Plan, 66% of the activities are completed and less than 5% have yet to be started. 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 health data, including COVID-19 data, and health equity.



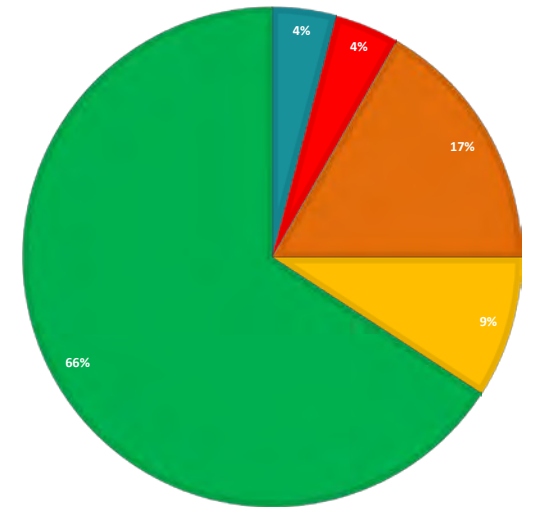
Mission: Keeping people in all Eau Claire City/County communities safe and healthy

Dept Director: Lieske Giese

Report Date: Wednesday, April 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	0	0	0	1	11		
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	1	1	0	0	15		
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	0	0	0	1	6		
Strategy 2.5 Promote strong working relationships	0	0	0	3	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	0	1	9		
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	0	0	0	1	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	1	3		
Strategy 4.2 Prioritize and improve our work utilizing our performance management system	0	0	4	3	9		
Strategy 4.3 Strengthen the grant process to ensure success	0	0	2	0	0		
Total Indicators:	Current #	5	5	20	11	79	120
	%	4%	4%	17%	9%	66%	100%
	Oct-17	102	*	*	10	8	
	Dec-17	98	*	*	10	12	
	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		



Dec-21	17	5	21	4	73
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Special thanks to Columbus Ohio Public Health for the original creation of this tool and to Wood County Health Department

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

Goal	Strategy	Activities	Lead						Notes	
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed		
Goal 1: Increase utilization of program and population data	1.5 Assess barriers to health equity and address gaps affecting disparate populations	By 06/30/20 review data and partner with stakeholders to prioritize key populations with disparate health outcomes.	ECHC Assessment Workgroup		X					
		By 3/31/21 develop plan to address health equity barrier impacting at least one specific population group.	Cortney D/ECHC	X						
	1.6 Turn health data into meaningful messages for policy makers and the public	By 12/31/17 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/9/17 and released to community partners	
		By 12/31/18 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/8/18 and released to community partners	
		By 12/31/19 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	Annual Report for ECHC approved by council on 3/11/19 and released to community partners	
		By 12/31/20 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X		
		By 12/31/21 produce a report on the ECHC community health priorities for policy makers, community partners, and the public creatively utilizing data and stories.	Gina S/ECHC					X	2020 Annual Report for ECHC was approved at March 2021 Council	
		By 12/31/2017 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2016 Annual Summary Report released on 4/3/2017	
		By 12/31/2018 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2017 Annual Report Summary released on 3/28/18	
		By 12/31/2019 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2018 Annual Report Summary released in April 2019.	
		By 12/31/2020 produce the HD summary report which creatively presents key health data.	Policy & Systems					X	2019 Annual Report Summary completed in June 2020	

Goal	Strategy	Activities	Lead	Progress Status					Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
		By 12/31/2021 produce the HD summary report which creatively presents key health data.	Policy & Systems				X		
		By 6/30/18 standardize the practice of including local data in all appropriate press releases and media contacts.	Communication Team					X	Created a new press release template with instructions to include data.
		By 6/30/19 research and implement one new method for messaging health data to the public.	Communication Team					X	Data team created a template form for creating graphs.
				2	2	3	1	12	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	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	UW-Extension educational opportunity on Diversity and Civility
		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.

Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
	organizational growth	By 12/31/21 review/update Workforce Development plan with representation from all divisions.	Workforce Development Team	X					
		By 12/31/2019 develop and implement plan for identifying and addressing longer term (5+ year) professional development goals of staff.	Workforce 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 NFRPHA
		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	City supervisor training and Leadership Eau Claire
	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

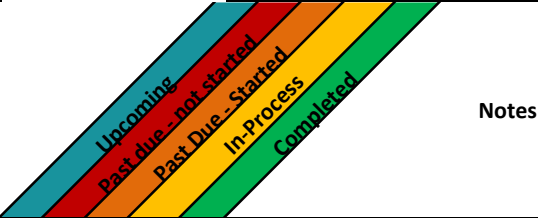
Goal	Strategy	Activities	Lead						Notes
				Upcoming	Past due - not started	Past Due - started	In-Process	Completed	
Goal 2: Invest in a strong workforce and infrastructure	2.4 Create an organizational environment promoting employee and department success	By 12/31/17 evaluate the technology needs of 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		
				1	1	4	4	37	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. Winter event was held on 1/8/21
	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
				 <p>2 2 5 2 15 Total</p>

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. Online payments enhanced and updated. Exploring online POWTS system.
		By 12/31/21 explore and implement 3 best practices around innovative operational strategies	Tegan/MT					X	1.) SharePoint is up and running. 2.) We have contracted out for our database management. 3.) Employee orientation website is up.
		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			Tool developed at time we were looking at new PM buckets - need to implement.
	4.3 Strengthen the grant process to ensure success	By 6/30/18 collect and centralize resources/templates available for grant writing.	Grant Team				X		Checklist in process; documents saved for use in grant applications	
	By 12/31/18 strengthen the interdepartmental core grant team to analyze and identify support efforts needed in the department for grant/funding identification and application.	Grant Team			X					

0 0 7 4 12 Total

	Strategy	Activity	Notes
Priority 1: Maintain Health Department's fiscal stability	1.1 Annual update/review of BOH's fiscal policies and related responsibilities	Fund balance policy reviewed annually at July BOH meeting	
	1.2 Quarterly review of fiscal reporting (Jan/April/July/Oct)		
	1.3 Significant financial changes or decisions discussed at any monthly meeting		
Priority 2: Support, advocate and educate for public health priorities	2.1 Provide skill development training for BOH	Advocacy training to provide framework and process for engagement (TBD)	
	2.2 Provide talking points for key priorities	Support Health Dept's planning efforts.	
	2.3 Support WPHA/WALHDAB legislative priorities	Legislative update documents provided in monthly meeting packets BOH copied on emails the Health Dept has sent to legislative officials	
	2.4 Engage with community partners/leaders to support community action on health priorities		
	2.5 Raise community and governmental policy makers' awareness of need to support "health and health equity lens" in decision-making	Confirm BOH role in Community Health Assessment	
	2.6 Raise awareness of upstream factors impacting health		
	2.7 Identify and share influencing tools available for BOH	Public health resources Case studies Examples of success in other communities	
Priority 3: Review new and changing community/Health Dept priorities	3.1 Include quarterly BOH agenda item to update/review a running list of potential issues in community (January/April/July/October)		
	3.2 Discuss populations impacted and data gaps		
	3.3 Discuss staffing, fiscal and resource implications for Health Dept		
	3.4 Support the Health Dept's capacity to deal with a pandemic		
Priority 4: Ongoing BOH improvements	4.1 Strive for diversity of BOH membership		
	4.2 Identify and prioritize BOH training opportunities and needs	Annual review of state statutes applicable to BOH	



Fact Sheet 4/28/2021–Board of Health Meeting**Agenda Item 6.g****Eau Claire Healthy Communities Update**

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 purpose of the assessment is to identify and prioritize significant community health needs, as well as to identify potential resources to address those needs. The partnership factored data from several sources into a prioritization matrix to identify top health areas on which to focus local health improvement efforts. Those sources included a Community Health Survey; secondary health data involving local and national comparisons; virtual Community Conversations with county residents and stakeholders; and Eau Claire Healthy Communities meeting. The final Community Health Assessment report will be available in May of this year. The Community Health Assessment in turn serves as an input to the three-year, county-wide Community Health Improvement Plan (CHIP), which includes goals, measurable objectives, and implementation strategies that address the county's top health priorities. Data from the CHA will be used by Eau Claire Healthy Communities in the creation of the CHIP.

Typically, Healthy Communities hosts a celebration in April. In lieu of an event, the Steering Committee decided to do a promotion on social media to highlight co-chairs and share why they got involved in healthy communities to stir up member engagement (and recognize co-chairs for their commitment to the coalition).

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.

Healthy Communities Council – Met virtually in March. Melissa Ives, Community Health Assessment Project Manager, came and presented community health assessment data to the team, and gathered input on the priority topics from members. The Council also approved the Eau Claire Healthy Communities 2020 Annual Report (available at www.ehealthycommunities.org).

Healthy Relationship Promotion Action Team - HRPAT has been working on grant objectives for the Sexual Violence Prevention grant. Put together several social media posts and an email to members to promote activities happening in the community for April- Sexual Assault Awareness month.

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. 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! They are now beginning to partner with Chippewa and Dunn counties on an "activity passport" to promote physical activity and nutrition this summer.

High-Risk Drinking Prevention Action Team- Held their first meeting in April after many months of not meeting. The team had a good discussion around alcohol policies that are being brought forward at the state level that could have a big impact on the availability of alcohol in our communities. They also discussed moving forward partnerships around the 'place of last drink' (POLD) data that is being collected by the police departments.

Oral Health Promotion Action Team- Has not been meeting.

Mental Health Action Team- The action team is getting ready for their mental health month activity. They plan to promote chalking of positive mental health messages throughout the community in May. A press release, as well as social media will be created to promote it.

4/28/2021 Board of Health Meeting

Agenda Item 6.h

Quality Improvement Update

Continuous improvement for our organization is critical for strong performance and part of our accreditation requirements. Our current strategic plan includes the guiding principles of focusing on Quality and being Data informed which are directly connected to this work.

The Quality Improvement (QI) Core Team has now been operating since 2012. The department developed and implemented a QI plan in October 2014 providing a framework to better align QI efforts with the department strategic plan and priorities. The QI plan and processes are incorporated into the current 2017-2021 ECCCHD Strategic Plan and are a key component of the department's Performance Management plan.

Due to COVID-19 response the QI trainings and team meetings were impacted and not held in 2020. Some quality improvement projects were still moved forward related to COVID-19 response activities. With the main focus being on COVID response this last year our primary goal was to get feedback given our current response including work related to disease investigation, data reporting, and now vaccination. Feedback routes were built into our communication efforts through operationalizing a call center line and ongoing communication via social media. While we struggled with formal QI projects, we did use the principles. As more recent QI project that is being worked on is the process for how we track and record data related to possible COVID-19 reinfection.

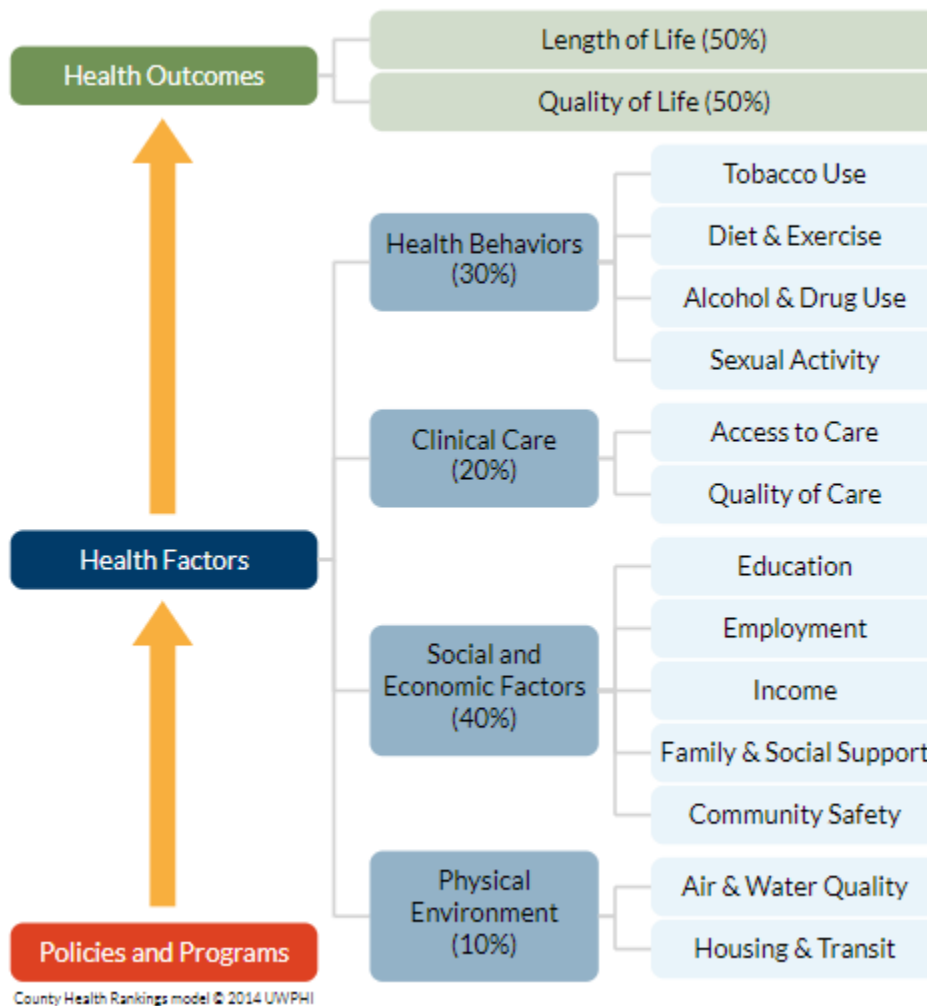
The goal is to resume QI team meetings and to hold a refresh of QI with all-staff in the next year.

New staff that have joined the health department team, both managers and staff, bringing strong knowledge and experience around performance management systems. In the second half of 2021, pending COVID response, these team members will be tapped to help revise how we currently are tracking/monitoring our performance measures. Management Team continues to be committed to leadership processes to improve our own practices in order to model a QI culture at the department.

Information Sheet – 4/28/2021 Board of Health Meeting

County Health Rankings 6.i

Please see the following data sheet related to the 2021 *County Health* Rankings released by the University of Wisconsin Population Health Institute (UWPHI) and the Robert Wood Johnson Foundation (RWJF). The *Rankings* are based on the model below and highlight that many factors, if improved, can help make communities healthier places to live, learn, work and play. Eau Claire County in 2021 was ranked 21st for Health Outcomes and 8th for Health Factors.



Prepared by Cortney Draxler, Policy and Systems Division

Eau Claire County Health Rankings					
County Demographics	2017	2018	2019	2020	2021
Population	102,105	102,965	103,671	140,534	104,646
% below 18 years of age	20.5	20.5	20.4	20.4	20.1
% 65 and older	14.4	14.8	15.3	15.7	16.2
% Non-Hispanic African American	1	1	1	1.1	1.1
% American Indian and Alaskan Native	0.6	0.6	0.6	0.6	0.6
% Asian	4	4.1	4.2	4.4	4.3
% Native Hawaiian/Other Pacific Islander	0.1	0.1	0.1	0.1	0.2
% Hispanic	2.3	2.3	2.4	2.6	2.7
% Non-Hispanic White	90.5	90.4	90.2	89.7	89.6
% not proficient in English	1	1	1	1	1
% Female	50.5	50.7	50.7	50.6	50.5
% Rural	23	23	23	23	23
Male Population 0-17	11,206	11,190	11,203	11,215	
Male Population 18-44	20,008	20,088	20,033	20,176	
Male Population 45-64	11,893	11,838	11,722	11,628	
Male Population 65+	6,701	6,945	7,158	7,452	
Total Male Population	49,808	50,061	50,116	50,471	
Female Population 0-17	10,987	10,990	10,971	11,010	
Female Population 18-44	20,029	19,998	19,975	20,098	
Female Population 45-64	12,365	12,305	12,165	12,055	
Female Population 65+	8,415	8,688	8,919	9,259	
Total female population	51,796	51,981	52,030	52,422	
Population growth %	2	2	3	4	
Health Outcomes	21	35	33	30	21
Length of Life	20	29	28	28	28
Premature Death	5,400	5,800	6,000	6,000	5,800
Quality of Life	26	39	37	42	21
% Poor or fair health **	14	14	14	13	15
Poor physical health days **	3.3	3.5	3.5	3.4	3.6
Poor mental health days **	3.4	3.5	3.5	3.8	4
% Low birthweight	6	6	6	6	6
Life expectancy	N/A	N/A	79.4	79.5	79.7
Premature age-adjusted mortality	290	290	300	300.0	290
Child mortality	50	50	60	50	50
Infant mortality	5	5	6	6	6
Frequent physical distress %	10	11	11	10	11
Frequent mental distress %	10	11	11	12	13
Diabetes prevalence %	8	7	8	9	10
HIV prevalence	16	39	39	40	44
Communicable disease	775	793	998	1,050	
Self-inflicted injury hospitalizations	152	152	63	68*	
Cancer incidence	447	442	451	447	
Coronary heart disease hospitalizations	2	N/A	2.5	2.8	
Cerebrovascular disease hospitalizations	2	N/A	2.3	2.3	
Health Factors	17	13	13	19	8
Health Behaviors	40	17	14	47	10
% Adult smoking **	18	15	15	16	18
% Adult obesity	29	28	28	31	28
Food environmental index	7.5	7.9	8.1	8.1	8.5
% Physical inactivity	17	18	16	20	19
% Access to exercise opportunities	67	81	83	81	81
% Excessive drinking **	27	25	25	27	25
% Alcohol impaired driving deaths	31	41	36	41	41
Sexually transmitted infections	378.6	412.5	467.2	483.3	487.1
Teen births	14	12	12	11	10
% Food insecurity	13	12	12	11	9
% Limited access to healthy foods	8	6	6	6	6
Drug overdose deaths	8	8	9	10	12

Drug overdose deaths - modeled	N/A	8-11.9	N/A	N/A	N/A
Motor vehicle crash deaths	8	7	8	8	7
% Insufficient sleep	28	32	32	32	34
% Smoking during pregnancy	14	14	14	13	
Drug arrests	728	854	804	N/A	
Opioid hospital visits	N/A	N/A	429	417	
Alcohol-related hospitalizations	3	N/A	3.2	3	
Motor vehicle crash occupancy rate	43	61	61	59	
On-road motor vehicle crash related ER visits	450	450	531	461	
Off-road motor vehicle crash related ER visits	86	86	79	N/A	
Clinical Care	10	8	16	14	9
Uninsured %	9	6	6	6	6
Primary care physicians	770:1	780:1	790:1	810:1	800:1
Dentists	1,120:1	1,110:1	1,000:1	1,010:1	950:1
Mental health providers	390:1	370:1	340:1	320:1	300:1
Preventable hospital stays	50 (per 1000)	52 (per 1000)	5512 (per 100,000)	5,057	4,763
Diabetes monitoring %	91	91	N/A	N/A	N/A
Mammography screening %	76	76	54	54	55
Flu vaccinations	N/A	N/A	56	58	59
Uninsured adults %	10	7	7	7	7
Uninsured children %	4	3	4	4	4
Health care costs \$	8,430	8,917	N/A	N/A	N/A
Other primary care providers	756:1	700:1	669:1	533:1	500:1
No recent dental visit %	28	28	N/A	N/A	
Did not get needed health care %	2	2	N/A	N/A	
Childhood immunizations %	74	74	74	72	
Local health department staffing	6	N/A	N/A	N/A	
Social & Economic Factors	24	19	28	22	11
High school completion %	N/A	N/A	N/A	N/A	***94
High school graduation %	89	89	87	87	***86
Some college %	73	73	74	75	75
Unemployment %	3.9	3.5	2.9	2.6	3.1
Children in poverty %	16	14	14	13	11
Income inequality	4.7	4.5	4.4	4.4	4.2
Children in single-parent households %	26	24	24	24	18
Social associations	12.5	12.9	12.6	12.4	12.4
Violent crime	145	145	142	142	142
Injury deaths	58	64	69	72	74
Disconnected youth %	6.0	6	5	4	3
Reading scores	N/A	N/A	N/A	3.2	3.1
Math scores	N/A	N/A	N/A	3.2	3.1
Median household income \$	51,900	52,200	55,400	60,100	65,000
Children eligible for free or reduced price lunch	41	40	37	64	37
Residential segregation - Black/White	61	64	60	62	63
Residential segregation - non-white/White	22	19	26	27	33
Homicides	0	1	1	1	
Suicides	N/A	N/A	N/A	17	19
Firearm fatalities	8	9	11	11	13
Juvenile arrests	N/A	N/A	N/A	22	13
Reading proficiency %	57	57	55	51	
W-2 enrollment	168	133	89	53	
Poverty %	14	13	15	13	
Older adults living alone %	33	32	32	31	
Hate crimes	2	0	0	N/A	
Child abuse	4	4	5	5	
Injury hospitalizations	802	802	366	397	
Fall fatalities 65+	113	126	146	156	
Physical Environment	21	18	23	11	16
Air pollution - particulate matter **	9.3	9.3	8	8	6.2
Drinking water violations	No	No	No	No	No

Severe housing problems %	16	15	16	14	14
Driving alone to work %	79	79	80	81	81
Long commute - driving alone %	13	14	15	14	14
Traffic volume	N/A	N/A	N/A	230	436
Homeownership	N/A	N/A	63	63	64
Severe housing cost burden	N/A	N/A	13	13	12
Year structure built %	24	22	22	22	N/A
Broadband access %	N/A	N/A	N/A	N/A	86

NOTES

2021: Key Findings Report & State Reports not reported this year to avoid pulling focus from COVID-19 response and recovery. Will be back in 20

***2021: High school completion replaced high school graduation as a ranked measure.

* 2020: now categorized in the social and economic factors

** data should not be compared with prior years

not included in overall ranking



AGENDA

Eau Claire County
Communicable Disease Taskforce
Wednesday, April 21, 2021 at 5:00 p.m.
Virtual Meeting

Dial In: 1-415-655-0001 Access Code: 145 773 1779

A public listening session will be held separate of this meeting, Dates and times are to be determined and will be posted as a notice to the meeting and on the County and City websites.

1. Call to Order and confirmation of meeting notice.
2. Roll Call
3. Approval of Minutes – **Discussion/Action**
 - a. March 31, 2021
4. Communication: Dan Stier, Facilitator - **Information**
5. Values, customs and practices in the Eau Claire Community; promotion of the common good:
Dan Stier, Facilitator - **Information**
6. Plan for Public Listening Session: Dan Stier, Facilitator – **Information/Discussion**
 - a. Goals, ground rules, and potential dates
7. Determine next meeting date and time after public listening session – **Discussion/Action**
8. Adjourn

Next Meeting – to be determined.



MINUTES

Eau Claire County Communicable Disease Taskforce Wednesday, March 31, 2021 at 5:00 p.m. *Virtual Meeting*

1. Call to Order and confirmation of meeting notice. – Nick Smiar
2. Roll Call
 - a. Members Present: Alissa Hiladilek, Anna Ziebell, Brandon Riechers, Bruce Barker, David Klinkhammer, Crispin Pierce, Don Bodeau, Emily Smith Nyguen, Grace Crikckette, Jeff Jalloin, Joe Sanfelippo, Ken Johnson, Kimberly Cronk, Lori Whitis, Mai Xiong, Marisa Stanley, Michael Johnson, Miriam Gehler, Scott Rogers, Berlyle Middleton
 - b. Others Present: Terry Weld, Nick Smiar, Merey Price, Kathryn Schauf, Dave Solberg, Steve Nick, Tim Sullivan, Elizabeth Giese, Dan Stier (Facilitator), Samantha Kraegenbrink
2. Approval of Minutes – **March 10, 2021**
 - a. David Klinkhammer motioned- all in favor- no changes
3. Background on ordinance ([Link to Ordinance](#)): Tim Sullivan, Eau Claire County Corporation Counsel and Steve Nick, City of Eau Claire Attorney– **Information**
 - a. Tim Sullivan and Steve Nick presented a PowerPoint presentation outlining some important background information regarding the proposed ordinance, previous court decisions, and State-Local Authority. In addition to that provided definitions and clarity on the order of general application and safeguards that were and are to be considered for the ordinance.
4. Balance between protecting public health, individual liberty, as well as business and economic interest: Dan Stier, Facilitator – **Discussion/Information**
 - a. Communicable Disease background and awareness: Lieske Giese, Health Department Director
 - i. A brief background was provided on communicable disease and was simply put that the requirements and authority prevention and control come from the state statutes and rules.
 - b. Balance between protecting public health, individual liberty, as well as business and economic interest-Discussion:
 - i. Many members of the task force spoke during this open discussion in regards to buy in of the ordinance, how we will get this ordinance to pass the legislative process, what enforceability may look like, and how to determine what reasonable and necessary will look like for this ordinance. All of this comes into play with also staying focused on the prevention aspect of any communicable disease.
5. Communication: Dan Stier, Facilitator – **Postponed to next meeting**
6. Values, customs, and practices in the Eau Claire Community; promotion of the common good: Dan Stier, Facilitator – **Postponed to next meeting**

7. Determine next meeting date and time –
 - a. Wednesday, April 21st at 5pm – virtual meeting

8. Adjourn – Nick Smiar

Respectfully submitted,

Rebecca Draeger

Eau Claire City-County Board of Health (BOH) Self-Evaluation
January 2018 – March 2019

1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, 5=Strongly Agree					
BOH Meetings	1	2	3	4	5
1. In terms of what is accomplished, Board meetings meet or exceed my expectations.					
2. BOH receives necessary information and support from the Health Department to address the governance functions listed in questions 5 through 10 below.					
BOH Competencies					
3. Do you feel competent regarding BOH’s fiscal oversight responsibilities?					
4. Do you feel you have a good understanding of the Health Dept priorities and strategic plan?					
BOH Governance Functions (NALBOH)					
5. Policy development: BOH leads and contributes to the development of policies that protect, promote and improve public health.					
6. Resource Stewardship: BOH assures the availability of adequate resources (legal, financial, human, technological and material) to perform essential public health services.					
7. Partner Engagement: BOH builds and strengthens community partnerships through education and engagement to ensure the collaboration of all relevant stakeholders in promoting and protecting the community’s health.					
8. Legal Authority: BOH exercises legal authority and understands the roles, responsibilities, obligations and functions of the governing body, health officer and agency staff.					
9. Continuous Improvement: BOH routinely evaluates monitors and sets measurable outcomes for improving community health status and board responsibilities.					
10. Oversight: BOH provides necessary leadership and guidance in order to support the public health agency in achieving measurable outcomes.					

Are there Board activities you would like added or things we should stop doing? If so, please describe.

If you rated any of the above 1, 2 or 3, please consider describing why or offer suggestion(s) for improvement.

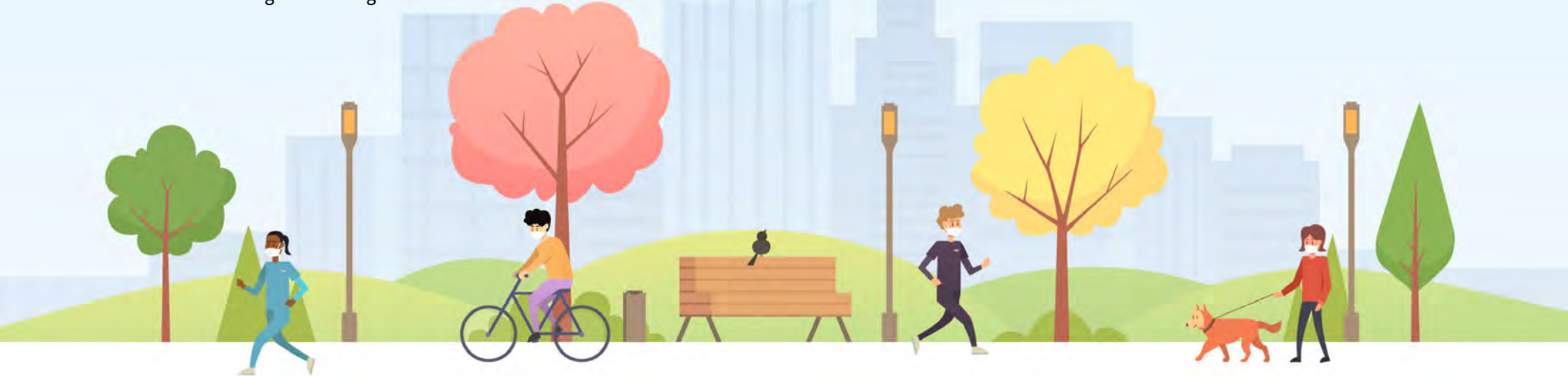
Additional comments?

Potential questions for BOH annual self-evaluation

1. The frequency and duration of BOH meetings are appropriate to effectively meet our responsibilities.
2. BOH receives necessary information and support from the Health Department to address the governance functions as described by NALBOH.
OR
3. BOH annually reviews governance functions as described by NALBOH and discusses application of those functions.
4. BOH assures a broad cross-section of the community is considered during any decision-making/policy development.
5. What is one thing BOH members are doing now and should continue doing?
6. What is one thing BOH members are doing now and should stop doing?
7. What is one thing BOH members are not doing now and should start doing?

Investing in public health will provide us the opportunity to be healthy where we live, work, learn and play.

Help the state recover from the human and economic trauma. The pandemic exposed longstanding financial inadequacies in Wisconsin's public health infrastructure. As we navigate the waning months of the pandemic, we need to begin charting our course for recovery that includes addressing neglected chronic underfunding and strategic investments for the future.



BOOST PUBLIC HEALTH INFRASTRUCTURE FOR HEALTHY COMMUNITIES

\$18 MILLION

Dedicated State Funding for Local Health Departments

- Provide block grants to support public health infrastructure and fund state mandates which are supported by county and municipal levies.
- Allow for this funding to be flexible for increased alignment with their community's needs to maximize impact statewide.
- Take into account factors with allocation formula for distribution more effectively and equitably.

Committed state funding provided directly to local public health departments would enable communities to implement public health strategies more effectively and equitably.

Examples where local health departments could utilize this dedicated funding is:

- Increase community health services, like cancer screenings, substance abuse prevention, and mental health services
- Invest in programs to protect against water, air quality, and other environmental health hazards
- Develop preparedness response strategies to guarantee the capacity to respond quickly to public health emergencies
- 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
- Reduce disparities and advance health equity

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

WPHA & WALHDAB also support these two categorical funding mechanisms for direct support to local health departments and community based organizations:

\$10 MILLION

for Communicable Disease Grants

- Build on state funding to local and tribal health departments.
- Communicable Diseases can lead to a loss in productivity, increase costs, and place employees on extended sick leave.
- Limited resources are provided though threats are increasing. Wisconsin provides surveillance and follow up for a numerous amount of disease, including Zika, Lyme Disease, Hepatitis C, Influenza, Tuberculosis, and Elizabethkingia.

\$30 MILLION

for Health Equity Grants

- The pandemic exposed many ways in which some Wisconsinites across both rural and urban areas have more difficulty accessing health resources. Support for community organizations to implement community health worker models could help address those issues and advance health equity.
- Promote health equity for community organizations to implement community health worker care models.
- Community organizations, and local/tribal health departments to hire health equity strategists and implement health equity action plans.

Supporting a strong public health infrastructure is paramount with the continuing occurrences of natural disasters, increased substance use, and an increase in both infectious and chronic diseases.

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, according to the Robert Wood Johnson Foundation. This is a potential savings of \$5.60 for every \$1 invested.

However, Wisconsin is not investing in taking advantage of these savings. According to The Trust for America's Health, Wisconsin state funding for public health is \$17.40 per person per year—\$36 per person per year is the national average.

Facing this fact and knowing the detrimental effects of chronically underfunding public health, we respectfully urge you to make ongoing public health funding a top priority in the 2021-23 biennial budget.

SUPPORT INCREASED INVESTMENT IN EXISTING PUBLIC HEALTH PROGRAMS ADMINISTERED BY THE DEPARTMENT OF HEALTH SERVICES

The Department of Health Services is an equal partner in a strong public health coalition. We strongly recommend supporting the following initiatives in Governor Evers' budget proposal:

Windows Plus Lead Exposure Prevention Program

Provide \$961,800 in 2021-22 and \$1,054,800 in 2022-23

Lead Screening and Outreach Grants

Provide \$50,000 annually to increase a grant for lead screening and outreach activities

Expand Eligibility for Birth to 3 Program

Provide \$3,300,000 in 2021-22 and \$6,600,000 in 2022-23

Black Women and Infants' Health

Provide \$3,500,000 annually to fund grants to address Black women's health and infant and maternal mortality.

Tobacco and Vaping Prevention

Increase funding by \$2,000,000 in 2021-22 to fund a new public health campaign aimed at preventing initiation of tobacco and vapor product use.

Community Health Benefit

Provide \$1,000,000 in 2021-22 and \$24,500,000 in 2022-23 to fund a new MA benefit.

Postpartum Eligibility Extension

Provide \$20,948,600 in 2022-23 to reflect the estimated cost of extending benefits for MA eligible pregnant women until the last day of the month.

Community Health Workers

Provide \$14,232,000 in 2022-23 to fund coverage of community health worker services under MA.

Medication-assisted Treatment

Reimbursement












Provide \$3,632,800 in 2021-22 and \$7,265,500 in 2022-23 to increase reimbursement rates for medication-assisted treatment (MAT) services for individuals with substance use disorder.












A comprehensive recovery strategy needs to include robust investments in public health. For more information, please do not hesitate to contact our government affairs consultants Tim Hoven (414-305-211) or Erik Kanter (608) 310-8833.










All people deserve the opportunity to live in a state that creates conditions for everyone to be healthy. Public policy should strive toward the elimination of health disparities.



WPHA/WALHDAB – 2021-22 Wisconsin Bill Tracking

Bill Number	Bill Description	Position	Bill Status
Assembly Bill 1	Relating to: Pandemic relief		<ul style="list-style-type: none"> Vetoed by the Gov. on Feb 5, 2021
Assembly Bill 5	Relating to: Facilitating COVID-19 vaccine distribution		<ul style="list-style-type: none"> Passed Assembly on Jan 28, 2021
Assembly Bill 23 (Companion to Senate Bill 4)	Relating to: prohibiting government officials from mandating a COVID vaccine		<ul style="list-style-type: none"> Passed Assembly on March 23, 2021
Assembly Bill 24 (Companion to Senate Bill 7)	Relating to: Closure of places of worship		<ul style="list-style-type: none"> Passed Assembly on March 23, 2021
Assembly Bill 25 (Companion to Senate Bill 5)	Relating to: Prohibiting mandatory vaccination as condition of employment		<ul style="list-style-type: none"> Passed Assembly on March 23, 2021
Assembly Bill 32 (Companion to Senate Bill 22)	Relating to: Drinks to Go		<ul style="list-style-type: none"> Passed legislature on March 23, 2021
Assembly Bill 66 (Companion to SB 59)	Relating to: Community Health Center Grants		<ul style="list-style-type: none"> In Assembly Health Committee
Assembly Bill 88 (Companion to Senate Bill 87)	Relating to: Requiring face coverings in certain situations		<ul style="list-style-type: none"> In Assembly Committee
Assembly Bill 92 (Companion to Senate Bill 86)	Relating to: Grants to hospitals for expanding psychiatric bed capacity		<ul style="list-style-type: none"> In Assembly Committee
Senate Bill 4 (Companion to Assembly Bill 23)	Relating to: Prohibiting government officials from mandating COVID-19 vaccination		<ul style="list-style-type: none"> Passed Senate on 2/16/21
Senate Bill 5 (Companion to Assembly Bill 25)	Relating to: Prohibiting mandatory vaccination as condition of employment		<ul style="list-style-type: none"> Passed Senate Committee on Jan 21, 2021
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Senate Bill 7 (Companion to Assembly Bill 24)	Relating to: Closure of places of worship		<ul style="list-style-type: none"> Passed Senate on 2/16/21
Senate Bill 22 (Companion to Assembly Bill 32)	Relating to: Drinks to Go		<ul style="list-style-type: none"> Passed Senate Committee on March 19, 2021
Senate Bill 56	Relating to: Remote orders and pick up of alcohol		<ul style="list-style-type: none"> Passed Senate on March 23, 2021
Senate Bill 57	Relating to: Alcohol Delivery		<ul style="list-style-type: none"> Public hearing held in Senate Committee on Feb 4, 2021
Senate Bill 59 (Companion to AB 66)	Relating to: Community Health Center Grants		<ul style="list-style-type: none"> Passed Senate Committee on 2/11/21
Senate Bill 86 (Companion to AB 92)	Relating to: Grants to hospitals for expanding psychiatric bed capacity		<ul style="list-style-type: none"> Passed Senate Committee on March 19, 2021
Senate Bill 87 (Companion to AB 88)	Relating to: Requiring face coverings in certain situations		<ul style="list-style-type: none"> In Senate Committee
Senate Joint Resolution 3	Relating to: Terminating COVID-19 public health emergency		<ul style="list-style-type: none"> Passed Legislature on Jan 26, 2021
Senate Joint Resolution 9 (Companion to AJR 6)	Relating to: proclaiming February 2021 as American Heart Month		<ul style="list-style-type: none"> Passed Senate on Feb 15, 2021
Assembly Joint Resolution 6 (Companion to SJR 9)	Relating to: proclaiming February 2021 as American Heart Month		<ul style="list-style-type: none"> Passed Legislature on Feb 16, 2021
Assembly Joint Resolution 8	Relating to: Proclaiming racism a public health crisis		<ul style="list-style-type: none"> In Assembly Rules Committee

Assembly Bill 131 (Companion to SB 152)	Relating to: sealant products		<ul style="list-style-type: none"> In Assembly Committee on Transportation
Assembly Bill 140 (Companion to SB 156)	Relating to: PFAS mitigation		<ul style="list-style-type: none"> In Assembly Committee on Environment
Assembly Bill 169 (Companion to SB 181)	Relating to: licensing of dental therapists		<ul style="list-style-type: none"> In Assembly Committee on Organization
Assembly Bill 174 (Companion to Senate Bill 188)	Relating to: Revoking supervision, parole, or probation if a person is charged with a crime		<ul style="list-style-type: none"> In Assembly Criminal Justice Committee
Senate Bill 8	Relating to: COVID-19 Vaccination distribution		<ul style="list-style-type: none"> Passed Senate on Feb. 16, 2021
Senate Bill 152 (Companion to AB 131)	Relating to: sealant products		<ul style="list-style-type: none"> In Senate Committee on Natural Resources
Senate Bill 156 (Companion to AB 140)	Relating to: PFAS mitigation		<ul style="list-style-type: none"> In Senate Committee on Natural Resources
Senate Bill 181 (Companion to AB 169)	Relating to: licensing of dental therapists		<ul style="list-style-type: none"> In Senate Licensing Committee
Senate Bill 188 (Companion to AB 174)	Relating to: Revoking supervision, parole, or probation if a person is charged with a crime		<ul style="list-style-type: none"> In Senate Judiciary Committee

Eau Claire County Federal COVID Relief: Overview and Implementation Recommendations

A Framework for discussion

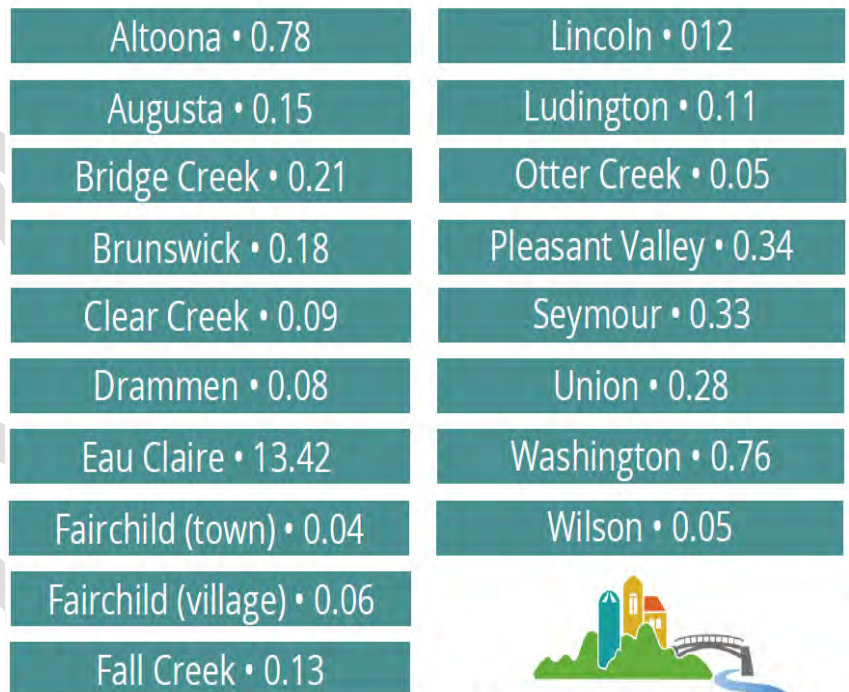
Background Information:

The American Rescue Plan Act of 2021 provides federal recovery aid for state and local governments, **\$20,295,447** is provided in direct aid to Eau Claire County. The county will not have to provide a portion of their funding to cities and towns as the municipalities will receive their own direct aid. The first payment of aid will be received no later than 60-days after enactment (May 10th), and the second payment is scheduled approximately 12 months later. All funds must be spent by December 31, 2024, and detailed records and reports are required detailing the funds utilization. Also, the rescue plan bill is clear that failure to comply with the provision of the bill will require repayment of the funds to the U.S. Treasury.

At right is a chart detailing funds to other municipal jurisdictions in the county.
 Cities: 14,344,260; Villages: 187,025;
 Towns: 2,627,052.

Allowable Spending Areas:

The American Rescue Plan advances us on the road to recovery and equips us to help drive the economic recovery and strengthen our communities by investing in infrastructure, small businesses, public health and safety, and human services. The National Association of Counties (NACo) sent a letter to the U.S. Treasury dated Mar 18, 2021 requesting additional guidance regarding eligible uses, spending, implementation, and administration of the Recovery Funds.



**all numbers are in millions*



Currently as outlined in the bill the following are the allowable uses for Recovery Funds (in more detail):

- Money used to:
 - Respond to the public health emergency or its negative economic impacts (including assistance to small businesses and nonprofits, or aid to impacted industries such as tourism and hospitality)
 - Respond to workers performing essential work
 - Recoup lost revenue due to the public health emergency
 - Investments in water, sewer, and broadband infrastructure

- “Respond to or mitigate the public health emergency with respect to the COVID-19 emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality.”
- “Provide government services to the extent of the reduction in revenue...”
- “Make necessary investments in water, sewer, or broadband infrastructure.”
- “State and local governments can transfer the funds to a private nonprofit organization, a public benefit corporation involved in the transportation of passengers or cargo or a special-purpose unit of State or local government.”
- “Respond to workers performing essential work during the COVID-19 public health emergency by providing premium pay to eligible workers of the county that are performing such essential work, or by providing grants to eligible employers that have eligible workers who perform essential work.”

Recommended Eau Claire County Spending Areas: (not in priority order)

County leadership should strive with input from local stakeholders to leverage the funding to create meaningful value for residents over time. We will also seek to form effective partnerships to maximize the investment in our community.

The recommendation is that a values-based approach be applied that is based on community need.

Who really needs it?

These investments might include the following:

- **Improved broadband** in rural and low-income communities. As public education, social services and work have increasingly transitioned to the virtual space, reliable and fast internet has become a primary connection to resources.
- **Gap funding** to cover lost revenues and county government services.
- **Transition of operational covid levy dollars to covid relief dollars.**
- **Investment in local government sustainability and infrastructure.** Investment in county government that results in future savings. This may include emergency communication upgrades, and technological advances. This will need to be correlated with the infrastructure plan being developed.
- **Economic Recovery Programs:** Promote the stabilization and recovery of the local economy by supporting grants and loans to small businesses.
 - Revolving loan fund for business start-up / entrepreneur.
 - Business loan program to attract businesses.
 - Grants for minority businesses.
 - Foresight activity to encourage diversity, inclusion and equity.
- **Community Response and Resilience:** Support community response and resiliency programs to include: Foodbanks, equitable housing (housing stability and homeless shelters), domestic violence prevention, transportation/support services for disabled and elderly, veterans services, mental health services, child and family services.
- **Public Health Emergency Response:** Protect and promote the health of the public by supporting programs to include, but not be limited to: Countywide COVID-19 surveillance, contact tracing,

proactive testing and disease prevention, access to and training on personal protective equipment, local healthcare system capacity, public education programs.

- **Projects of regional value:** The County will look to support local government partners in leveraging investments to assure that the region achieves outcomes.

Recommended Guiding Principles for Spending the Recovery Funds:

- **Principle 1. Accountability and Outreach** – Eau Claire County will be accountable and transparent in its funding decisions. Eau Claire County will actively communicate information about its efforts to the public and will prepare and maintain reports regarding the use of funds that will be readily available to the public.
- **Principle 2. Financial Stewardship** – Eau Claire County will be strategic in the use of funds and prioritize those uses that result in the greatest community benefit and reach at the lowest long-term cost.
- **Principle 3. Leverage** – Eau Claire County will seek to leverage funds through partnerships with other governments, institutions, non-profit community, and the private sector to increase the reach and effectiveness of the Funds. This includes seeking grant funding as appropriate, and navigating the various funding sources.
- **Principle 4. Countywide Approach** – Eau Claire County will consider countywide needs including needs within cities and towns when programming and expending funds and will structure programs to provide countywide benefit whenever possible and appropriate.
- **Principle 5. Long-term impact** - An investment in community that will have long-term impact.
- **Principle 6. Timeliness and Flexibility** – Eau Claire County will be timely in the expenditure of funds to support the needs of the community. Eau Claire County will also maintain a measure of flexibility in its use of funds to adapt to changing circumstances and needs.
- **Principle 7. Compliance** – All expenditures will be compliant with the requirements of the American Rescue Plan Act and other applicable laws.

The Way Ahead:

Eau Claire County will solicit input from local leaders, communities, and stakeholders that will help the county government craft guidance on how the \$20,295,447 million in direct federal aid can be used.

- **Step 1.** Eau Claire County Government Department Head Meeting to discuss rescue plan, funding priorities, and provide recommendations on effective delivery and implementation of funds. Identify potential investments that meet criteria for ARPA funds.
- **Step 2.** Create detailed analysis of lost revenue.
- **Step 3.** Start conversations and meet with the Broadband Committee, COVID-19 Task Force, Towns Association and other municipal partners, and the Economic Recovery Task Force. Identify potential investments that meet criteria for ARPA funds.
- **Step 4. County board resolution to lay out the principles, values and bigger picture implementation process.**
 - Use process that mirrors budget process –
 - Identify county specific uses of funds
 - Revenue loss

- Technology investments
 - Primarily county board based with some citizen stakeholders and municipal partners. Citizen stakeholder must have a community-wide view and not “lobby” for their projects.
 - Size: 9
 - Duration: until December of 2024.
- **Step 5.** Further resolutions to the board to:
 - Identify how the county will connect with community partners and stakeholders to discuss and determine community priorities and possible matching dollars.
 - Develop an understanding of funding opportunities.
 - Determine the initial criteria and priorities for funding.

Considerations / Update 04/12/2021 WCA call:

- Noted best to be cautious and not in any hurry
- Guidance from the Treasury to be like it was with CARES and come out multiple times with additional clarity over time – May 11, 2021 is likely first influx of information. No application for funding required.
- Reiterated that counties should have an investment strategy outlined (safety, liquidity and yield considerations)
- Constitutional and regulatory issues – Von Briesen guidance
 - Discussed the need to make sure that there aren’t any State statutes that would prohibit or limit the ability to transfer some ARP funds to non-profits
 - Noted the need to make sure to think about not tripping up any discrimination issues in the winners vs losers in non-profits if some funds are distributed
 - WCA will be providing some guidance
- WCA, Extension and other partners / groups are creating ideas for appropriate expenditures of funds – creative / broad / shared initiatives.