

**OZAUKEE COUNTY  
PUBLIC HEALTH DEPARTMENT**



**ANNUAL REPORT  
2004**

**2004 FULL ANNUAL REPORT**  
**OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT**

January 1 thru December 31

**TO THE HONORABLE BOARD OF SUPERVISORS OF OZAUKEE COUNTY, WISCONSIN**

Dear Ladies and Gentlemen,

I respectfully submit the 2004 Annual Report of the Ozaukee County Public Health Department. This report is primarily prepared by public health staff in an effort to raise public awareness of the public health services provided to citizens of Ozaukee County through policy development and direction from the Board of Health.

Before reviewing the full report, I would like to briefly comment on a few significant events:

This is the second consecutive year that Ozaukee County is ranked number one in health outcomes among the state's 72 counties, according to the report issued by the Wisconsin Public Health and Health Policy Institute. This report demonstrates how health in populations compares across Wisconsin counties. While in general terms our health is getting better, there are significant challenges ahead if we want to continue to maintain our number one ranking. Public Health will continue efforts toward improving the health and well being of our citizens through education and prevention initiatives. This is vitally important with the ever-increasing health care costs and insurance rates.

The Health Department continues to address the 2002-2007 health priorities: overweight or obese adults and children, alcohol and drug use, tobacco use /environmental tobacco exposure and preventive health screenings. The Board of Health added a fifth health priority that was determined from results of the 2003 Community Assessment conducted by Aurora Health Care. The fifth health priority is to increase the use of carbon monoxide detectors in homes. The report indicated that 99% of respondents had working smoke detectors, and 44% working carbon monoxide detectors.

After evaluation and review, it was decided that the Cedarburg immunization clinic would be discontinued in October of 2004. The time of one Port Washington clinic also changed to increase evening hours from 2-5 pm to 3-6 pm to help accommodate more working parents. We will continue with one Mequon clinic and two Port Washington Clinics each month.

A couple of challenges addressed this year were an Influenza Vaccine shortage and a Pertussis (Whooping Cough) outbreak. Ozaukee County confirmed 100 cases of Pertussis. The state identified approximately 5,000 cases in 2004. Each case involves identifying contacts of each confirmed and suspect case in order that they receive medical follow up and prophylaxis to prevent further spread. The vaccine administered to children to prevent Pertussis begins to wane as they reach adolescence. A new vaccine to cover adolescents and adults is expected to be available in 2005.

When the flu shortage was announced, the Health Department worked closely with all the Ozaukee County medical providers to assess their needs and to assure that available vaccine was appropriately distributed to the priority groups identified by the CDC.

In December, the Quad County Bioterrorism Consortium hired an Epidemiologist. This position will assist in strengthening communicable disease surveillance and identifying public health trends.

This report provides a tool to remember and a method to evaluate our past year's experiences and help guide planning for future public health programs in Ozaukee County. I would like to extend my gratitude for the continued support and leadership provided by the Board of Health, as well as, to thank all public health staff for working together to achieve a healthier community. The full report is located on the county web page at: <http://www.co.ozaukee.wi.us/AnnualReports/2004/Index.htm>

Respectfully Submitted,

Glenda S. Madlom, Director / Health officer

**2002-2007 Health Priorities**

- Decrease overweight or obese adults and children.
- Decrease alcohol and drug use.
- Decrease tobacco use/environmental exposure.
- Increase preventive health screenings.
- Increase Carbon Dioxide monitoring in homes

# OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT

## BOARD OF HEALTH MEMBERS

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Gerald Walker, County Board Supervisor  
Kathy Geracie, County Board Supervisor  
Celestino Perez, MD, Medical Advisor  
Lila Mueller, CMC, BOH Secretary  
Grace Peterson, RN, Ph.D.

## HOME HEALTH PROFESSIONAL ADVISORY

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Janis Hayden, SMO, Infection Control  
Frank Peterson, Social Services  
Ralph Luedtke, Lasata, Chairperson  
Joan Kojis, Community Programs  
Sharon A. Gilman, Aging Serv  
Lou Hefle, Pharmacist (Retired), Vice Chairperson

## PUBLIC HEALTH STAFF:

### **ADMINISTRATION:**

Glenda S. Madlom, RN, BS, BSN  
Mary B. DeLuca, RN, BSN  
Julie Sauer

### **PUBLIC HEALTH NURSES**

Deborah Bartlett, RN, BSN  
Kathy Bleau, RN, BSN  
Peggy Fero, RN, BSN  
Caralee Jacque, RN, BSN  
Jeannine Kitzerow, RN, BSN  
Jan Koeppen, RN, BSN  
Jill Lackovick, RN, BSN  
Diana Noack, RN, BSN  
Abbie Povletich, RN, BSN  
Debra Schmidt, RN, BSN  
Donna Ubbink, RN, BSN  
Joanne Viesselmann, RN, BSN  
Daniel Ziegler, R.S.  
Scott Vesely, R.S.

Director / Health Officer  
Assistant Director / Deputy Health Officer  
Administrative Service Coordinator

### **PROGRAM MANAGEMENT:**

Home Health Care Case Manager  
Communicable Disease  
Home Health Care Case Manager  
Immunization Program  
MCH\* / Scoliosis / Pre-K Screenings / CSHCN\*\*  
Flu/Pneumonia/Hepatitis B / MCH team  
MCH/ Healthy Child Wellness Clinic  
Migrant Health, Lead, School Health Services  
Adult Health Services / MCH team  
Prenatal Care Coordination / MCH team / P.E.\*\*\*  
Women's Health / Student Nurse  
WIC: Women, Infant, and Children, MCH team  
Environmental Health Specialist, Lead, Beach  
Environmental Health Specialist, Bioterrorism

### **CERICAL STAFF:**

Marsha Ingamells Office Assistant  
Mary Johnson Account Clerk  
Marilynn Martin School Health Tech.  
Wendy Schwab Office Assistant  
Cindy Kapp Office Assistant / WIC

### **HOME HEALTH:**

Mary Aikins Home Health Aide  
Bonnie Penkwitz Home Health Aide  
Lori Schultz Home Health Aide  
Leann Tucker Home Health Aide  
Vacant Position Home Health Aide

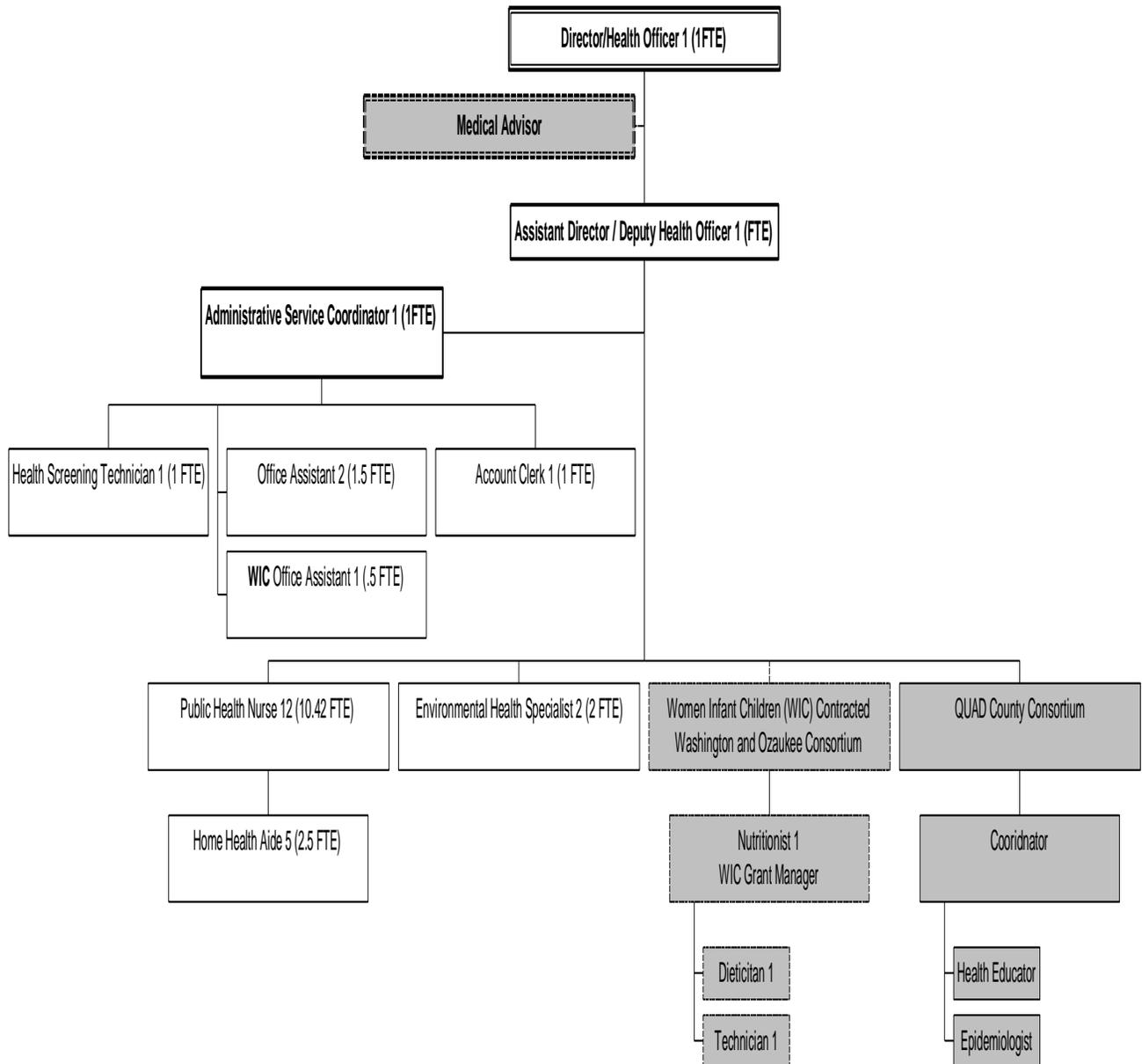
### **OTHER (Contracted):**

WIC: Carol Birkeland, Director/Registered Dietician  
Quad County Bioterrorism Consortium Staff:

Kathy Riehle, Director; Ann Sayer, Health Educator; Jennifer Evertson, Epidemiologist  
Medical Advisor: Celestino Perez, MD,

\*MCH = Maternal Child Health \*\*CSHCN=Children with Special Health Care needs  
\*\*\*Presumptive Eligibility WIC = Women Infant Children

# Ozaukee County Public Health Department



Gray boxes indicate contracted Services

## **MISSION STATEMENT**

**The mission of the Ozaukee County Public Health Department is to prevent disease and to promote and protect the safety and health of all county residents**

### **PHILOSOPHY**

Public Health services with a focus on the entire population include enforcement of health regulations, community health education regarding disease prevention, health promotion and community disease control activities. Services with a focus on sub-populations aim to improve the health status of that population in order to improve the health of all. Public health nurses have expertise in the collaborative interdisciplinary process of assessment, policy development, assurance activities, as well as health education and evaluation to promote healthy outcomes in a community. Health outcome indicators of public health nursing intervention include reductions in family violence, poor pregnancy outcomes, communicable disease, morbidity and premature mortality. Our cost-effective outreach, intervention and care coordination efforts result in disease prevention and health promotion. This is accomplished through managing and facilitating departmental and community efforts for the ongoing assessment of the community's health status, advancing a safe and healthful environment, promoting healthful behavior and providing or arranging for the provision of health services for the early diagnosis and treatment of disease and promoting an improved quality of life.

### **GOALS AND CORE FUNCTIONS OF PUBLIC HEALTH**

1. Community **ASSESSMENT** of health risk factors and disease indicators in the community.
  - a. Evaluate data to identify risks and patterns of morbidity and mortality.
  - b. Evaluate health behaviors and patterns that identify potential people at risk.
2. Development of **POLICIES** to reduce health problems.
  - a. Analyze assessment data to identify potential and actual health problems.
  - c. Collaborate with other community programs / services addressing identified health problems.
  - d. Develop health policies for the needs of children, families, groups and communities.
2. **ASSURANCE** activities to ensure implementation of policies at the service delivery level.
  - a. Monitor service delivery to achieve targeted health care outcomes.
  - b. Monitor access, utilization and appropriateness of health services for the community, including under-served and targeted populations.
  - c. Participate in systems building needs assessment and other programs to promote positive health outcomes for the community.

### **Wisconsin Twelve Essential Services for Local Public Health Include:**

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individuals and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services.
8. Assure a diverse and competent public health and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research new insights and innovative solutions to health problems.
11. Conduct research to seek new insights and innovative solutions to health problems.
12. Foster the understanding and promotion of social and economic conditions that support good health.

# COMMUNICABLE DISEASE CONTROL AND INVESTIGATION

Chapter 252 of the Wisconsin Statutes and HFS 140 and 145

## IMMUNIZATION PROGRAM AND CLINICS:

The Meningococcal vaccine is now into a second year of being offered through the Health department. In cooperation with area high schools, letters and information were disseminated to high school seniors in the spring of 2004, to promote Meningococcal vaccination for those attending college. The newspaper advertising was issued several times during the year to encourage vaccination. A pilot project was offered to Cedarburg School District offering on-site clinics for graduating seniors in May of 2004. The pilot was well accepted by students and parents providing 33 vaccinations on-site. By years end, the health department provided a total of 111 vaccinations to those attending college, traveling to endemic areas or entering the military.

Meningococcal disease is a serious bacterial illness and the leading cause of bacterial meningitis in children ages 2–18 years in the United States. Meningitis is an infection of the brain and spinal cord coverings. Meningococcal disease can also cause blood infections.

Meningococcal vaccine is not a routine vaccine for most people. Reasons to consider receiving Meningococcal vaccine are:

- College students, especially those living in dormitories.
- Laboratory workers routinely exposed to Meningococcal bacteria.  
Those who should be vaccinated are:
  - Anyone traveling to, or living in a part of the world where Meningococcal disease is common, such as West Africa.
  - Anyone who has a damaged spleen, or whose spleen has been removed.
  - Anyone who has terminal complement component deficiency (an immune system disorder).
  - U.S. military recruits.
  - People who might be affected during an outbreak of certain types of Meningococcal diseases.

This vaccine is offered to anyone two years of age or older. Interested persons may call the health department to reserve a dose(s). This vaccine will be offered during regular office hours, 8:30 a.m. to 5:00 p.m., Monday through Friday.

Late in 2003, Pneumococcal Conjugate Vaccine (Prevnar) began experiencing another production shortage resulting in limited supplies. The shortage continued through much of 2004. In September 2004, the 4 dose recommended series was again reinstated and currently in effect. This production shortage resulted in overall decrease in a total number of doses given over the year.

The immunization program, through grant support, reached a vaccination coverage level of 92.5%. These children aged 2, served by the Health Department, have received all childhood vaccinations. This grant objective has been a continuing goal since 1997 and improved each year since inception, with annual review using the CDC CASA-(Clinical Assessment Software Application) program and continuing review using the WIR (Wisconsin Immunization Registry) program. The goal of healthy people 2010 is for 90% of children aged 2 to be completely vaccinated. The Health Department has achieved their objective for 2004 to reach the 90% level for those clients in the 2-year old age group. To maintain this high level of coverage, the Health Department partnered with area physicians and county WIC program to document all doses of

vaccines given to our clients by comparing and combining individual vaccine records into the WIR. The registry, utilized by the department since August of 2000, has continued to improve levels of complete records and decrease chances of duplicate immunization being provided. Two large group private medical providers in the county have signed on to use the WIR in 2004 enabling the public and private sector providers to increase their ability to share and use the new data.

Three communities assisted us in providing sites for our four regular immunization clinics. A special thanks, to the American Legion Post-Cedarburg who have allowed use of their building for clinics. Due to declining attendance at this site, this clinic site closed in October 2004 after almost 2 decades of service. Sincere thanks also goes to the Mequon Police Department, for use of their building for our monthly clinics. At each of the regularly scheduled immunization clinics, vaccines for all ages were offered. Immunizations were also provided in public and worksite Adult Health Screenings, Healthy Child Wellness Clinics, Flu/Pneumonia clinics, WIC clinics, and special university and school clinics.

The following table indicates the number and kinds of vaccine administered:

<u>Vaccine Type</u>	<u>2003</u>	<u>2004</u>	<u>Increases/Decrease</u>
Injected Polio	298	231	-67
DTaP	355	305	-50
Td	508	388	-120
MMR	206	186	-20
Hib	21	22	+ 1
Hib/Hep B	167	134	-33
Hepatitis B (0-19 yrs)	185	73	-112
Hepatitis A – Adult	64	81	+17
Hepatitis A – Child	28	17	-11
Meningococcal	103	111	+8
Pneumococcal Conjugate (Prevnar)	221	157	-64
<u>Varicella (Chicken Pox)</u>	<u>76</u>	<u>109</u>	<u>+33</u>
<b>TOTALS</b>	<b>2,232</b>	<b>1,814</b>	<b>-4</b>

	<u>Clients</u> <u>Served 2004</u>	<u>Immunizations</u> <u>Given in 2004</u>	<u>% Change of Immunizations</u> <u>Given from 2003</u> <u>Closed 10/1/2004</u>
<b>Cedarburg Site:</b>	<b>67</b>	<b>126</b>	
<b>Mequon Site:</b>	<b>135</b>	<b>204</b>	<b>- 25.6%</b>
<b>Port Washington 2-5:</b>	<b>216</b>	<b>491</b>	<b>-10.2%</b>
<b>Port Washington 3-6:</b>	<b>271</b>	<b>675</b>	<b>-19.4%</b>
<b>Office:</b>	<b>361</b>	<b>465</b>	<b>+ 2.2%</b>
<b>Other Sites:</b>	<b>447</b>	<b>523</b>	<b>+122%</b>
<b>(Work sites, Health Screenings, etc.)</b>			

<b><u>School Immunizations</u></b>	<b><u>Audit 12/31/2003</u></b>	<b><u>Audit 12/31/2004</u></b>
Cedarburg	97.22% Completely Immunized	<b>99.55% Completely Immunized</b>
Grafton	99.24% Completely Immunized	<b>98.69% Completely Immunized</b>
Mequon-Thiensville	99.64% Completely Immunized	<b>99.44% Completely Immunized</b>
Northern Ozaukee	99.20% Completely Immunized	<b>98.97% Completely Immunized</b>
Port Washington -Saukville	98.10% Completely Immunized	<b>99.89% Completely Immunized</b>

**Adult Immunizations:**

The Ozaukee County Public Health Dept continues to provide Adult Hepatitis B vaccine to agencies that might be at high-risk for exposure to hepatitis. These agencies might include local fire, emergency and police department personnel, as well as day cares, local school and group home personnel. This past year we administered 260 doses of private pay Adult Hepatitis B. This is about the average that we have done in the last 3 years.

The health department also provides yearly-required TB skin testing for private and public agencies as needed.

**COMMUNICABLE DISEASE INVESTIGATIONS: (Exhibit I)**

Communicable disease control is a major function of the Public Health Department, as required by state statutes. Approximately 80 different diseases are mandated as reportable to the local public health department for investigation and follow-up. The focus of the health department investigation is to stop the transmission of the infectious disease. The first priority is to take action to prevent spread from the infected individual to others in the community. Efforts also involve attempts to locate the source of the infection and to identify any outbreaks or community wide increases in illness.

The number of sexually transmitted diseases, especially Chlamydia and genital herpes, also increased in 2004. This is most likely due to improved reporting by the medical community and may not reflect a true increase in sexually transmitted diseases.

Intestinal infections that can be caused by such organisms as E.Coli 0157, salmonella, campylobacter, cryptosporidium, and giardia continue to be reported. An important piece of any investigation into these illnesses is evaluating whether the person is involved in a high-risk occupation (such as food handling, day care, or health care) and to take measures to protect the public from possible exposure and infection.

In 2004, Pertussis (whooping cough) was a challenge for communicable disease investigation and follow-up. In past years, Pertussis has not been a prevalent disease. Ozaukee County normally averages 1-4 cases per year. However, during this last year there was a major outbreak in Wisconsin, particularly in the southeast part of the state. In 2004, Ozaukee County had 100 reported cases of Pertussis. It is quite contagious, and spreads easily to those in close contact with an infected individual. Therefore, the Public Health Department takes an active role in trying to contain the spread of Pertussis. All diagnosed individuals are kept in home isolation until they are no longer contagious. In addition, anyone who was in close contact with them is interviewed, questioned about possible symptoms, and given recommendations for treatment or symptom monitoring.

Although Pertussis vaccine is one of the routine childhood immunizations, it is not used after age six, and immunity wanes after several years. The majority of recent cases are being seen in adolescents. A safe and effective Pertussis vaccine for adolescents and adults is under development but not yet available.

**2004 PERTUSSIS OUTBREAK  
OZAUKEE COUNTY**

Pertussis cases by case status:

Case Status	Number of cases
Confirmed	74
Probable	16
Suspect	10
<b>Total:</b>	<b>100</b>

Age in years	Number of cases
0-5	7
6-10	16
11-20	59
21-50	17
50+	1
<b>Total:</b>	<b>100</b>

Cases Reported By Month:

Pertussis cases by date reported:

City	Number of cases
Belgium	3
Cedarburg	15
Fredonia	1
Grafton	17
Meq-Thiens.	39
Port Wash.	17
Saukville	8
<b>Total:</b>	<b>100</b>

January	1
February	0
March	2
April	2
May	6
June	17
July	15
August	7
September	15
October	6
November	17
December	12
<b>Total:</b>	<b>100</b>

**TURBUCULOSIS PREVENTIVE TREATMENT PROGRAM:**

Tuberculosis is a major public health threat. The health department investigates and does follow up on all suspected cases until they are proven to be free of TB.

There were three cases of active tuberculosis (TB) reported in 2004. One patient was in home isolation and needed daily visits by a nurse for several weeks.

The Public Health Department also provides medication for latent TB infection to persons who may have a positive skin test, but have negative chest x-rays and do not have active tuberculosis. These individuals show signs of exposure to TB, but have not developed infectious cases. In order to prevent them from going on to active disease in the future, six to twelve months of medication is often prescribed by the physician. The medication is supplied by the Wisconsin Division of Public Health to the Ozaukee County Public Health Department at no cost to the client. A public health nurse on a monthly basis then issues the medications to the client. At medication pick up, the public health nurse evaluates for compliance and side effects at each visit.

Tuberculin skin testing is offered on both a routine and a post-exposure basis throughout the year. The nurses also provide education on tuberculosis prevention and treatment.

**ANIMAL BITES/RABIES TESTING:**

Some animal bites pose the potential to transmit rabies to humans. When such cases are identified, the animal may need to be tested for rabies. The testing is performed at the Wisconsin State Lab of Hygiene in Madison. The Ozaukee County Public Health Department’s role is to assist in coordinating the testing with local animal control officers, local veterinarians, and the lab. A nurse also contacts the bite victim, and offers recommendations about appropriate medical follow-up, and updating vaccines. In 2004, a case of rabies was identified in a bat.

<b>Animal Testing</b>	<b>2004</b>	<b>2003</b>
Cat	13	22
Dog	10	10
Cow	0	1
Horse	0	1
Ferret	0	0
Bat	2	3
Raccoon	2	2
Woodchuck	0	1
Prairie Dog	1	0
Sugar Glider	1	0
Total	29	40

**HIV PARTNER REFERRAL PROGRAM:**

The Ozaukee County Public Health Department is notified of anyone who is newly diagnosed with HIV infection. The public health nurse contacts those individuals and assists them in identifying anyone who may have been exposed to their infection. These persons are notified that they may have been exposed to HIV and are counseled on testing and risk reduction. Strict confidentiality is maintained throughout all aspects of investigation and follow-up.

**INFLUENZA AND PNEUMONIA VACCINE:**

Every year we believe we are going to have a **routine year** for the dispensing of the inactivated influenza (flu) vaccine, yet each year seems to present a new challenge. This year, one of the two manufacturers of the flu vaccine had production problems. This manufacturer was to have provided 50% of the flu vaccine for the United States. Due to this situation, there was only one U.S. manufacturer producing the flu vaccine for the United States.

The Center for Disease Control (CDC) in coordination with the Advisory Committee on Immunization Practices (ACIP) initiated recommendations for the administration of the flu vaccine. Priority categories were established to cover the High-Risk individuals first and gradually opened to everyone by the latter part of December into January.

During the flu season The Ozaukee County Public Health Department was **very** fortunate to have received our full order of flu vaccine from the one and only flu manufacturing company. We did receive all of the seven 7,500 doses of flu vaccine that we had ordered, but there were many restrictions put on the use of this vaccine. Because many of the agencies that fell into the high priority groupings did not receive any flu vaccine, the Public Health Dept was able to redistribute some of our supply or provide vaccinations to those high-risk agencies and clients. Some of these agencies were the local nursing homes, St Mary’s Hospital Ozaukee, several of

the doctor's offices, and other local health departments in the southeast region. Because of the high-risk priority categories, all of our vaccines were given at group homes, open clinics in the community, or at the Ozaukee County Public Health office. We were not able to offer flu clinics in many of the industries this year.

The State of Wisconsin Dept of Health and Family Services also provides flu vaccine for eligible children under the age of eighteen (18) through the Vaccine For Children (VFC) program. We received 310 doses for eligible children.

This is a broad list of distribution of the flu vaccine:

	<u>Adult Vaccine</u>	<u>VFC Vaccine</u>
Vaccines given:	3373 and continue to give in our office	310 (plus)
Vaccines redistributed:	4160	
Total vaccines:	7533	

Some of the reasons for the discrepancy in numbers are:

1. Sometimes we are able to get more than 10 doses per vial of vaccine.
2. Pediatric doses under age 3 receive a half dose of vaccine, therefore more doses are available per vial of vaccine.

Adult pneumonia vaccines are usually administered at the same time as the flu vaccine for individuals needing updates. This year's flu season, as mentioned above was quite unusual, therefore we administered only 131 doses of adult pneumonia. This is about half of our usual doses administered during flu season.

## **MATERNAL CHILD HEALTH**

Chapter 253 of the Wisconsin Public Health Statutes

### **MATERNAL AND CHILD HEALTH PROGRAMS (MCH):**

The Ozaukee County Public Health Department's Maternal Child Health Program has continued to emphasize outreach and collaboration with community agencies and services in 2004 as an ongoing effort to strengthen families in Ozaukee County. If the family requests, a home visit is arranged by the public health nurse and follow up to the medical care provider after the visit to coordinate services is provided. Our goal is to improve the health status of pregnant women, parents, infants and children. We assist uninsured, presumptive eligibility pregnant women, postpartum women and families to gain access to medical services and follow-up.

### **The Postpartum Discharge Program:**

This program collaborates with Columbia-St. Mary's-Ozaukee Hospital and other surrounding counties hospitals for the purpose of promoting healthy families. Newly delivered mothers, who are referred, will receive a phone call from a public health nurse to address questions or concerns that develop during the transition from hospital to home. This service is free of charge and available to any one who lives in Ozaukee County.. The majority of the referrals are first-time moms or those that are breastfeeding. Families with new babies are mailed an educational packet that provides information about available community resources and educational material necessary to make a smooth transition from birth to home. They are also offered a monthly mailing of educational information regarding parenting the first year and a bi-

monthly mailing for parenting the second and third year. We received 126 requests for these mailings. This is accomplished through the collaboration of the Ozaukee County Public Health Department and the UW Extension office. This information is also available on-line if families have computer access. The information in the folders is made available with the financial assistance of the Family Preservation and Support and Mequon -Thiensville Women's Club. The feedback from families as well as health care providers and hospital staff has continued to be very positive. This program is supported through a grant from the Division of Public Health

### **Children With Special Health Care Needs: (CSHCN)**

The Children With Special Health Care Needs (CSHCN) program is funded through the Division of Public Health—WI Maternal and Child Health. The target is families with children ages 0-21yrs with special health care needs. The long-range goal is to better coordinate delivery of resources at the local level. Ozaukee County Public Health Department continues to work closely with grant administrators through Children's Hospital of Milwaukee. This the 5<sup>th</sup> year of the 5-year grant cycle. The most frequently seen diagnosis in 2004 continued to be that of prematurity and low birth weight. Surrounding hospitals referred many of these infants. The Parent Liaison is an important partner in advocating for those children. Early intervention and referral to specialty services is the key to helping these families make a successful transition from hospital to home.

### **2004 Consolidated MCH objectives:**

In 2004, the MCH program identified two areas of need for education of families under the Wisconsin DPH (Division of Public Health) Consolidated Grants. The first was in the area of childhood obesity. The 2002 Community Assessment showed our county shares in the nationwide epidemic of childhood obesity. In 2003, a pilot program was designed to find families at risk for obesity targeting children ages 3 thru 12 years. We developed the programs education modules on the food pyramid, fast food, healthy food choices, label reading, and the importance of increased physical activity. This year the nutritional program was offered again to continue to motivate change in lifestyle and behaviors in our adult and child population.

The second educational need was in the area of postpartum depression. Depression is a major public health problem affecting 10% to 15% of all women and can affect up to 28% of women living in poverty. The CES-D (Center for Epidemiological studies-Depression) was the tool that was used to screen new mothers regarding women's emotional health. The screening was either face to face or by telephone contact. The first screening was done at 4 weeks post delivery and again at 2 months.

We were able to complete the screening tool on 65 clients. Referrals of eleven (11) clients were made to a physician for further emotional health follow-up. Additional counseling regarding women's emotional health was done with seven (7) clients.

Because bioterrorism is a concern nationwide, a MCH grant was established to help local health department prepare for emergencies and establish a response plan. The Public Health MCH bioterrorism committee, working in cooperation with the Ozaukee County Register of Deeds Office, was able to identify the MCH at risk population and where they were located in the county. With this knowledge, a computerized GIS mapping was completed. The GIS mapping is also printable and can be used by other county members, if needed in case of a local disaster.

The Public Health Department continues to be represented on the Ozaukee County Child Abuse Prevention Committee (CAP). This committee includes Ozaukee Council, the DA's office, Ozaukee Counseling Center, Department of Social Services, St. Mary's – Ozaukee and, Big Brothers-Big Sisters. The Ozaukee County Public Health Department is involved in the blue ribbon campaign to increase awareness and prevention of child abuse. This year, the Ozaukee County CAP committee collaborated with the Washington County CAP committee in order to strengthen partners, effectiveness and expand awareness of community resources.

A Public Health Nurse is a representative on the Birth to 3 Advisory Committee. This representation keeps lines of communication open for referrals especially for Children with Special Care Needs.

**MCH Reporting System:**

For the year 2004, the SPHERE Data Base Computer Program was used by Ozaukee County Public Health Department in entering all daily activities for an entire year. This allowed for recovery of data on demographics of clients and staff activity. According to the SPHERE Database System, a total of 707 visit sessions were made to families in Ozaukee County in 2004. The following is a summary of the number of visit sessions under each of the specific MCH programs. A visit session is defined as one of the following: a home visit, office, telephone, clinic, community, worksite or other.

44	CSHCN (Children with Special Health Care Needs)
439	Postpartum Discharge (up to 60 days postpartum)
96	PNCC (Prenatal Care Coordination)
38	P.E. (Presumptive Eligibility)
13	Maternal Child Health Visit (after 60 days postpartum)
12	Nutrition sessions
65	Postpartum women screened for depression, 11 were referred for physician evaluation.

**Presumptive Eligibility (P.E.):**

Presumptive Eligibility (P.E.) is a service that has been provided by the Ozaukee County Public Health Department since 1999. The program targets uninsured pregnant women whose income does not exceed 185% of the federal poverty level. Recipients found eligible for this service receive a temporary Medicaid certification that allows them to receive immediate pregnancy related outpatient services while the application for Healthy Start is being processed. Early prenatal care helps in achieving healthy birth outcomes-an ongoing goal of Ozaukee County for its prenatal population. With this program's aim being early prenatal care, this goal was again achieved in 2004. **Out of the 38 clients receiving this service, which is up 9% from 2003, 71% of enrollees began prenatal care in the 1<sup>st</sup> trimester.**

**Prenatal Care Coordination:**

Prenatal Care Coordination (PNCC) is a service that has been provided to Ozaukee County's pregnant women population since 1993. This program helps pregnant women and their families gain access to medical, social, educational, and other services related to the pregnancy. These services are available during the pregnancy through the first 60 days following delivery. Services include:

- Outreach
- Initial assessment
- Care plan development
- Ongoing care coordination and monitoring
- Health education and nutrition counseling services

The goal of the program is to improve birth outcomes among women who may be at high risk for poor birth outcomes. Healthy birth outcomes continue to be an ongoing goal of the Maternal/Child Health team of nurses here in Ozaukee County. The main objectives for obtaining this goal include ensuring that women at high risk:

- Are identified as early as possible in the pregnancy so they can begin their prenatal care.
- Receive individual psychosocial support and services.
- Receive early and continuous prenatal care services.
- Receive necessary health and nutrition education.
- Are referred to available community services.
- Receive assistance in accessing and obtaining needed health and social services.

**In 2004, 96 referrals were received. This is up 11.4% from 2003. 58 women began services in the 1<sup>st</sup> trimester---that is 60% of the referrals. 38 of the 95 referrals were women who also received P.E. services through our agency.** This pocket of need continues to be addressed and serviced by our department.

#### **TARGETED CASE MANAGEMENT:**

The Ozaukee County Public Health Department is working toward expanding a program in 2004 called Targeted Case Management (TCM). This program will increase service coordination to those who qualify in the community and generate revenue for the health department. This is a benefit that is available to Medical Assistance (MA) eligible clients who reside in Ozaukee County, and are determined to be eligible under the following target populations:

- Families with children at risk
- HIV infection
- Asthma
- Tuberculosis
- Age 65 or old

The goal of the program is to improve a recipient's access to health care and managing of services received by a recipient including, medical, social, educational, vocational, and rehabilitation services. The objectives identified by the department are as follows:

- Coordinate the performance of evaluations and assessments.
- Facilitate and participate in the development, review and evaluation of individual Family Service Plans.
- Assist families in identifying available service providers.
- Coordinate and monitor the delivery of available services.
- Inform families of the availability of advocacy services.
- Coordinate with medical and health providers.
- Facilitate the development of a transition plan to preschool services, if appropriate.

The program remains in its development stages, but plans are underway for full implementation by February 1, 2005.

## **SCHOOL SCREENING SERVICES: (Exhibit II and III)**

### **Hearing and Vision:**

Hearing and vision screening programs are conducted from September through February of the school year. Rechecks for vision and hearing are done onsite when initial screenings indicate a possible problem. When indicated, referrals are then made to physicians. In 2004-2005, our Health Screening Technician performed all hearing and vision screenings, allowing the public health nurses to address other growing responsibilities.

Wisconsin passed a law in 2002-2003 academic year, stating children entering kindergarten in Wisconsin public schools will be encouraged to undergo a vision examination by an optometrist or eye evaluation by a physician.

VISION USA—The Wisconsin Project provides free eye exams to eligible children age 18 and under from low-income working families who have no vision health insurance. Services are donated by volunteer optometrists and may be limited in some areas. Applications are available at schools and our public health office. Eligibility requirements must be met to qualify.

### **Scoliosis:**

Students screened for scoliosis are boys in the 8th grade and girls in the 6th and 7th grades. Students are screened for scoliosis (curvature of the spine) and certain other spinal curvature problems. A Board Certified Orthopedist who specializes in scoliosis rechecks students suspected of having spinal curvature. M.D Rotter and M.D Major volunteer their time and services. Public health nurses will follow up after a referral is made to assure the child has received medical care.

The Scoliosis Program's brochures and procedures are reviewed and updated yearly to provide current educational material and improved screening technique.

During the 2004 school year, 1,832 children were screened for spine curvature. The referral rate to the health care provider is approximately 1%. The following summarizes the 2004 school year:

Total Number Children Screened	1,238
Total Number Children Rescreened	71
Total Number Children Referred	14

### **WIC: (Women, Infants and Children)**

WIC is a Supplemental Nutrition Program that provides food vouchers and education to women, infants and children who exhibit a nutritional risk and are financially eligible. A grant from the State of Wisconsin fully funds this program.

In 2004 the Ozaukee County WIC Program served an average of 354 participants each month. The number of food packages issued this year was 4246. The following is a breakdown by percentages of clients per program category:

- 31 % were women (either pregnant, or postpartum)
- 33% were infants under one year
- 36% were children ages one to five

WIC foods available with vouchers include milk, eggs, natural fruit juices, cheese, iron fortified cereals, peanut butter and infant formula. Ozaukee County has 12 contracted vendors where clients can redeem their vouchers. In 2004, WIC drafts generated \$210,572.00.

Each participant receives a nutrition and health assessment at each 6-month certification. Lead screening and needed immunizations are offered at each visit. This year again, flu vaccine

was offered to eligible clients after their WIC visit. A public health nurse offers to assess every pregnant woman participating in WIC and educates her pregnancy/parenting issues along with information on available community resources. In 2004, there were 70 women assessed and offered services. Breastfeeding continues to be recommended as the best nutrition for each pregnant participant's baby after delivery. This year, WIC was able to meet its goal to have more postpartum mothers continue to breastfeed after returning to work. We developed a protocol to inform all pregnant women of the availability of breast pumps through the WIC Program. Early postpartum contact to evaluate success, along with evaluation of the need for a breast pump, helped with the continuation of breastfeeding.

This year the Farmers Market Nutrition Program was again offered in our WIC program. Its major goal is to increase the choice and consumption of fresh fruits and vegetables. WIC participants also have a greater awareness of the local Farmers Markets and utilized this resource more than last year. This year we had 18 farmers accepting drafts at the various markets.

### **HEALTHY CHILD WELLNESS CLINIC:**

This program is designed to assist families with children between 0 and 18 years old, living in Ozaukee County who have no medical insurance, insurance that does not cover well child check-ups, insurance with high deductibles and/or high out-of-pocket costs or families with a low income who do not qualify for Medicaid or BadgerCare. Families can be assisted in signing up for Medicaid or BadgerCare.

In 2004, 36 families utilized our well child services. Fifteen new clients from 10 new families were served with a total of 66 office visits provided. The health department receives clients from a variety of sources including WIC, school programs, immunization program, friends/family, and St. Mary's Ozaukee Free Clinic for adults. We offer special thanks to our volunteer physicians who offered their services at our 7 scheduled clinics in 2004: Dr. Daniel Hagerman, Dr. Beth Hagen, Dr. Carol Estill, and Dr. Lorraine Gauthier.

#### **A healthy child clinic visit is designed to:**

- keep the child healthy and up-to-date with immunizations against many childhood diseases.
- allow parents to ask questions and to discuss concerns about their child's overall health.
- give the doctor and parents the chance to talk about child safety and developmental issues.
- help identify health problems or growth and development delays and assist in referring children for additional services.

#### **Services Offered**

- Physicals provided by volunteer Pediatric, Family Practice, and General Practice physicians.
- Child health history review
- Screening and assessment of physical, dental, growth and development, and nutritional needs
- Hemoglobin (blood Iron) for children 1-18 years old and lead screening for age 6 months through 5 years
- Hearing and vision screening
- Immunizations are available and given as needed
- Counseling on illness prevention, good nutrition, injury prevention, parenting and discipline are offered.
- Referrals will be made to other professional services as needed
- Clinics are held 6 to 8 times a year at the Health Department and services are provided by appointment.

**Well Child Service Providers:** Physician services are provided voluntarily through St. Mary's Hospital Ozaukee and other area physician groups. Nursing services, immunizations, hemoglobin and lead tests are provided by the Ozaukee County Public Health Department. A one-time amount of money was given to the program for medication vouchers for children through a community donation from the Mequon Thiensville Junior Women's Club. The Port Apothecary-Port Washington and Ye Olde Pharmacy – Cedarburg have agreed to accept the medication vouchers for prescriptions provided by our volunteer physicians.

## **CHRONIC DISEASE AND INJURY PREVENTION**

Chapter 255 and HFS 140 (1)(a)(4)

### **Childhood Injury Prevention:**

The Ozaukee County Public Health Department is also represented on the Southeast Wisconsin Safe Kids Coalition. This is a four county coalition created to reduce unintentional childhood injuries through educational, technical, policy and advocacy initiatives. Ozaukee, Waukesha, Milwaukee and Washington counties participate together to provide the educational and community programs to reduce injuries and mortalities to children. This year our agency participated in several activities coordinated by Safe Kids such as car seat checks, smoke alarm education, safety towns, and water safety programs for preschoolers held in our public libraries.

### **Cardiovascular Risk Reduction/Blood Pressure Control Program:**

Heart disease is the #1 cause of death in Ozaukee County and the United States. High blood pressure (hypertension) is a major risk factor for both heart attacks and strokes. Screening programs can identify people with hypertension who were unaware of their problem.

The Ozaukee County Public Health Department conducts 5 FREE blood pressure screenings every month at different Ozaukee County locations – Cedarburg, Grafton, Mequon, Thiensville and Port Washington. In 2004, FREE blood pressure screenings were also conducted at Breakfast on the Farm, the Senior Conference, and the Ozaukee County Fair as part of our Adult Health Screening program.

Participants receive a pamphlet explaining what their blood pressure means, what action they need to take and lifestyle modifications to lower blood pressure.

In 2004, 1,555\* people participated in the Blood Pressure Screening program and 146 were referred for follow-up medical care. (\*Corrected from the earlier published Executive Summary report)

### **Adult Health Screening: (Exhibit IV)**

Focusing on prevention of chronic health problems, the Ozaukee County Public Health Department provides screenings for blood pressure, near vision, distance vision, visual field analysis, hearing, diabetes, total cholesterol and HDL (good) cholesterol.

Both public and private screening programs are conducted. Each site determines which screenings to offer.

In 2004, public screening sites included Manchester Mall (3<sup>rd</sup> Tuesday of every month), Ozaukee County Administration Center, St. Paul's Church in Grafton, Cedarburg Fire Department's "Safety Day".

Ozaukee County businesses are invited to conduct Adult Health Screening clinics at their worksite. In 2004, 7 businesses offered these clinics to their employees.

Counseling by a Public Health Nurse is an integral part of every screening. All participants are given their screening results, informed whether results are normal or not, and instructed what to do about abnormal results.

In 2004, a total of 1,696 people were screened and counseled and 433 of them were referred for follow-up medical care.

#### **2004 Consolidated Grant – Prevention Program Objective:**

This year's objective was to have either a worksite or public venue purchase a Public Access Defibrillator and make it available for public use.

Public Access Defibrillators (PADs) are Automatic External Defibrillators available for public use by trained lay-people. They do save lives! If you would like more information about Public Access Defibrillators, you can get a PAD PowerPoint presentation from the Health Department.

Ozaukee County purchased 4 PADs. Two are located in the Justice Center and two are located in the Administration Center.

#### **WISCONSIN WELL WOMEN:**

The Wisconsin Well Woman Program (WWWP), a state and federally funded program, helps low income, uninsured, and underserved women gain access to lifesaving screenings for early detection of breast and cervical cancer. Deaths from these diseases occur disproportionately among women who are uninsured and underinsured. The program provides both screening and diagnostic services, including clinical breast exam, mammograms, pap tests, surgical consultation and diagnostic testing for women whose screening outcome is abnormal. The WWWP coordinator provides case management services to ensure that women are screened at appropriate intervals, access appropriate diagnostic services and receive medical treatment as needed. Women who are screened through WWWP who are diagnosed with breast or cervical cancer are eligible for full Medicaid coverage for treating the condition. This includes all Medicaid mandated and optional services. In 2002, one Ozaukee county woman was diagnosed with breast cancer and continues to receive Well Woman Medicaid benefits. The WWWP also pays for selected screenings and diagnostic tests related to depression, domestic abuse, high blood pressure, cholesterol levels, and osteoporosis.

Eligible women are enrolled through the Ozaukee County WWWP program coordinator. The screening program focuses on women who are 35 through 64 years old with a household income at or below 250% of the current poverty level. The priority of the mammography component of the program is to screen women ages 50 –64. By federal mandate 75% of women receiving mammograms through WWWP must be 50-64 years old. In 2003, 75 Ozaukee county women were enrolled in WWWP. 52 women received mammograms and 11 needed follow-up studies for abnormal results. 43 Pap and pelvic exams were performed, two had abnormal results and needed further evaluation.

The Ozaukee 100 Breast cancer-screening program encourages 100% of women in Ozaukee County to have routine breast cancer screenings. The Ozaukee 100 fund provides financial assistance for women who need mammography screening, and follow-up testing for breast related concerns and who lack resources to pay for these services. The work of the coalition is supported by donations to the Ozaukee 100 fund. In 2003, twenty-four women received 42 breast related services.

### **TOBACCO INITIATIVE:**

The Ozaukee County Smoke Free Coalition ceased existence after December 31, 2003, due to state budget cuts. The 2004 tobacco funds were reduced and seven health departments in the southeast region lost their funds to continue a tobacco coalition and a coalition coordinator.

A separate grant for youth tobacco education was received by our Health Department and sub-contracted to the Ozaukee Council, Inc. This grant objective was met in working with a group of John Long Middle School 8<sup>th</sup> grade students. Both the Ozaukee Council and the Health Department will continue to address the Board of Health's appointed health priority, to reduce tobacco use and second hand tobacco exposure. Public Health clients are counseled on the negative effects of tobacco smoking and exposure to environmental smoke at the health departments Adult Health Screenings, WIC and with our Maternal Child Health population.

The Health Department maintains representation on the Ozaukee County ATOD Prevention Consortium, which has greatly increased its activity in 2004. Meetings changed from quarterly to monthly and members from many more avenues of our community are in attendance to meet requirements for a new federal grant. This grant is from the Federal Drug-Free Communities Support Program, is worth \$86,933.00, and its goal is to reduce or eliminate substance use by youth and eventually reduce use by adults.

## **ENVIRONMENTAL HEALTH SERVICES**

### **Chapter 254 of the Wisconsin Public Health Statutes**

#### **Environmental Health Specialists (EHS):**

This year the Environmental Health Specialist addressed over 749 citizen environmental concerns, a 33% increase over 2003. These concerns included issues of housing and home safety, lead, indoor air quality (mold), food safety, drinking, pond and beach water quality, pest and animal control, sewage, solid and hazardous waste, radon, asbestos, west Nile virus, occupational health, and emergency preparedness.

Many of the duties of the EHS have included providing consultation to citizens and staff on environmental issues, investigation of potential human health hazards, writing press releases, maintaining aspects of the department website, presenting monthly reports to the Ozaukee County Board of Health, grant writing, assisting nursing staff with the follow up and investigation of food and waterborne disease outbreaks, and program development and administration.

#### **Ozaukee County Housing Initiative: (OCHI)**

In 2004, the Health department signed a fee for services contract with the Ozaukee County Housing Initiative. The Health department contracted to conduct field inspections and administer a federally funded housing rehab program for area homeowners and rental property owners. To date, approximately one half of the federal dollars allocated to this program have been committed in projects in Ozaukee County.

Other duties of the EHS have included creating news articles and public service announcements, participating in educational workshops, career days and committee membership. The EHS is a member of the following committees: the WDNR Beach Advisory Workgroup, the Health Department Emergency Planning Committee, and the OCHI Applicant Review Board.

The EHS continues to be a member of the County Emergency Management Level B Hazardous Materials Team.

**Beach Testing:**

From May through September the EHS assisted the health department with a beach monitoring program in Port Washington and at Harrington State Park. The health department teamed with city officials to sample and test the waters for a pathogenic indicator (E. coli) from Thursday through Monday. In 2004, the beach program was reduced to 15 weeks of beach sampling. The EHS regularly attended DNR Beach Advisory Workgroup meetings to discuss and share information relative to administration of this field program and reported to the Board of Health via a beach season summary.

The table below contains a numerical summary of the number of closures and ‘poor’ advisories for each beach combination and the **total percent** of the sampling time that those beach combinations were under **both closed and ‘poor’** advisory for **2003 and 2004**.

Hyw D & Harr north Beach			Harr south & Cedar Beach			Upper Lake Park Beach		
2003	8/21	38%	2003	9/26	35 %	2003	11/26	42%
2004	6/18	32%	2004	8/17	33 %	2004	8/18	35%

**CO Grant: (Carbon Monoxide)**

The EHS provided assistance to the health department by writing a grant that would provide local fire departments with updated information and training on carbon monoxide hazards in residential settings. Also as a consequence of this same grant, the health department received carbon monoxide testing equipment and supplies. Coupons were made available for residents to redeem money off to purchase Carbon Monoxide detectors at Home Depot. Six area fire departments scheduled and received a two-hour block of instruction.

**(WNV) West Nile Virus Surveillance:**

As a follow-up to the state 2002 WNV bird surveillance activities which indicated that virus infected birds were present in Ozaukee County, the EHS coordinated a county-wide mosquito surveillance program in 2003. Our 2003 surveillance results showed a higher concentration of mosquitoes in Mequon. As a result, in 2004, our surveillance efforts focused in Mequon. For a 16-week period from June through September, participating public properties were monitored for adult mosquito and larvae populations, so as to confirm information on what species were present in Mequon and in what relative numbers. These insects were also tested for the presence of the WNV. The Marshfield Clinic provided laboratory support for these surveillance activities. The 2004 mosquito surveillance results, along with suggestions for future abatement, were presented to the Board of Health and are scheduled for presentation to Mequon municipal officials and citizens in January of 2005.

**Childhood Lead:**

The health department continues its effort to reduce childhood lead exposure and to identify children that have been lead poisoned. The department provides free blood lead screening to children ages six months to less than six years at WIC, primary care clinics, and upon request. The total number of children screened in the county in 2004 was 401. This department screened

40 children or 10% of that total. Of the total number of children screened, four cases or less than 1% had levels of blood lead that would be a serious health concern. In all cases, PHN's and EHS's work jointly to provide both information and services. Families are provided counseling on proper nutrition and lead hazard reduction techniques. The department provides a no-cost HEPA vacuum to parents for use in the home. Case management by a Public Health Nurse is provided when necessary, as per state protocol. The EHS conducts home risk assessments, which include lead inspection and the collection of lead samples. This year Wisconsin Division of Health grant funding provided for homeowner training in lead safe working techniques. A free PowerPoint presentation entitled 'Home Health Hazards' was offered to area citizens at the Mequon MATC campus.

### **Bioterrorism:**

In September of 2003, the health department hired an additional full-time Environmental Health Specialist (EHS). Fifty percent of one Environmental Health Specialist's salary is funded by bioterrorism dollars. This EHS functions in coordinating the department's efforts for homeland security issues, which include bioterrorism and other related man-made or natural emergency response type activities. Besides assisting in on-going environmental health activities that the department now provides, this EHS is a representative on the Quad-Counties Consortium, a mutual aid organization including staff from Ozaukee, Washington, Sheboygan, and Fond du Lac counties. This involvement will foster communication between departments of county government, encourage the sharing of local resources, and coordinate area training events.

Ozaukee County, along with Fond du Lac, Washington, and Sheboygan counties, make up the Quad Counties Consortia (QCC), which is one of 12 consortia in Wisconsin organized to prepare for bioterrorism or other disasters. Representatives from the four counties meet monthly to discuss and coordinate plans for various man-made or natural disasters.

As part of our preparation, we are constructing plans to effectively vaccinate all of Ozaukee County in a limited period of time in the event of a smallpox or flu epidemic. This may involve vaccinating 84,000 people over the course of four or five days. To this end, we have worked with different organizations and partners that would be needed in an undertaking this large mass vaccination clinic plan, including, schools, bus companies, law enforcement, hospitals and volunteer groups. We have chosen tentative locations for registration and vaccination sites that would be used during a mass vaccination clinic. This Mass Vaccination Plan includes mapping of site locations, tours of the proposed facilities, agreements with facility managers, and appendices that contain the details for job descriptions, lists of supplies needed, contact numbers and other emergency information. The plan will be modified as new information and new requirements are revealed.

This year Ozaukee County, in cooperation with the Quad County Consortium (QCC), continued the process of testing and refining that plan by participating in tabletop exercises. These exercises allow us to walk through possible scenarios with our staff and partners to see where our plans need to be adjusted. The Health Department also purchased equipment and supplies that can be used when disaster strikes.

We have set up off-work communication networks consisting of phone trees, pager numbers and emergency contact numbers. Both the Health Department and the QCC networks were successfully tested for 24/7 responses this year and will continue to be tested on an annual basis.

Health Department staff continued their training related to bioterrorism subjects this year, including

- Incident Command System
- Epidemiology investigations
- HazMat activities
- Disaster preparedness
- Identification of methamphetamine labs
- Procedures for packing and shipping bio-samples to the State Lab of Hygiene.

## **PUBLIC HEALTH NURSING AND HEALTH PROMOTION**

Wisconsin Public Health Statutes

251.04(8); 251.05(2)(a); 253.06; and HFS 140.04(1)(a); and 140.04(1)(c)

### **Community Assessment 2004:**

The Wisconsin Division of Public Health directs each county health department to perform a community assessment every 5 years. In 2003, the third health study was completed for Ozaukee County. After the 2003 Community Health Survey results were completed, our Board of Health added an additional (fifth) health priority to the original four priorities selected after the 2002 community health study. The five health priorities for Ozaukee County are listed below:

- Decrease overweight or obese adults and children.
- Decrease alcohol and drug use.
- Decrease tobacco use and environmental tobacco exposure.
- Increase preventive health screenings.
- Increase presence of Carbon Monoxide detectors in homes.

Aurora Healthcare conducted the 2003 Community Health Survey through grant procurement. Forty communities in the southeast region were surveyed through the grant. These surveys are pursuant to the Wisconsin Division of Health's priority, "Healthiest Wisconsin 2010". The Ozaukee County studies were conducted by JVK Research to gather information on the health practices and health-related behavioral risks of residents. The 2003 survey can be viewed via this link on our web page:

<http://www.aurorahealthcare.org/yourhealth/comm-health-reports/art/ozaukee.pdf>.

Many of our public health grant objectives negotiated with the Wisconsin Division of Health are based on the five priorities selected by the Ozaukee County Board of Health.

The Ozaukee Health Initiative (OHI) is a group of county and community members who also review the health survey results, forward information to the Board of Health, and monitor community activity relating to the five health priorities. Through this Community Assessment process, the OHI has evaluated other communities and ascertained how they addressed awareness of their health priorities. Our goal is to increase community awareness of the Ozaukee County Health Priorities.

### **Migrant Health:**

The Migrant Health program addresses health needs of migrant workers and their families. Approximately 150 Latino workers and their families came from southern Texas to work at the Lakeside Foods cannery in Belgium and their produce freezing plant in Random Lake. Most workers live in one of the two "migrant camps" in Belgium during their five-month stay in

Wisconsin. They have low annual incomes; often have no health insurance, and minimal routine or preventive health care. Public health nursing services provided to the migrant population includes health teaching, communicable disease follow-up, assistance with scheduling medical care appointments and coordination of care with other community agencies. There is a federally funded program for migrant workers outpatient health needs administered through Family Health Medical and Dental Center in Wautoma, WI. Public health nurses assist migrant workers to access providers who participate in a discounted voucher reimbursement program with this clinic. Primary care, specialty care, diagnostic testing, dental care, prescription medication, and many more outpatient healthcare needs are coordinated through a public health nurse for the migrant workers. State program immunizations and WIC services are also provided through the Health Department.

Once again this year, we would like to give special thanks to the following primary care providers who have been very generous in meeting the migrant worker's needs in Ozaukee County and participate in the voucher program with Family Health Medical Clinic in Wautoma:

- Dr. Celestino Perez and office staff.
- Dr. Salvador del Rosario and office staff
- Dr. Raymond Bauer and Greenlane Family Practice staff.

Without the caring and assistance of these community partners, the Migrant Health Program would suffer, being unable to meet the immediate health needs of these workers and their families.

#### **Nursing Student Preceptor Program:**

The public health department participates in providing public health clinical experiences to nursing students. The public health department has contracts with seven colleges and universities of nursing. Twenty-seven senior nursing students from Concordia University participated in the immunization clinics in 2004. Two nursing students from Columbia College of Nursing had their fall semester clinical experience at the health department. One Concordia BSN completion student participated in the preceptor program this fall.

#### **HOME CARE PROGRAM: (Exhibit V)**

Our homecare agency is state licensed and available to all eligible Ozaukee County residents who need assistance in their home. We provide skilled nursing, bath service and medication management that is reimbursed by private pay (sliding scale for low income residents) or private insurance and also provide personal care services reimbursed by Medicaid. Our Home Care Program serves those community residents who would otherwise be underserved or forced into a nursing home environment earlier than they wish.

Our unique approach to homecare service is holistic and provides quality health care that assist our clients in maintaining their independence through evaluation of the client's environmental, physiological and psychological needs. We work closely with the client's support systems to assure a safe home environment. Our mission is to improve and/or maintain our client's health through skilled intervention, personal care assistance, ongoing education and exploration of community resources.

The Ozaukee County Department of Social Services, who has a Personal Care Only agency, contracts with our department for a full time RN to supervise their Personal Care Workers.

Our department continues to outreach to community members and partners in an effort to increase awareness of our program. Board of Health approval was received to increase the fee scale for home care effective September 1, 2004. This revenue helps to support the home care program.

**Volunteers:**

A difference was made in 2004 by our dedicated and caring volunteers. Our department program benefited greatly from the numerous hours and talents of our many volunteers. In 2004, 405 volunteers donated 868 hours of service to the school hearing, vision, and scoliosis screening programs. Fifteen volunteers donated 319 hours at our blood pressure and adult health screenings; 2 volunteers donated 20 hours to our Wisconsin Well Woman Program activities; two volunteers donated 240 hours to our Children with Special Health Care Needs program and 16 volunteers donated 190 hours of service at our monthly immunization and flu/pneumonia clinics. Four physicians donated a total of 24 hours at our Healthy Child Wellness Clinics and two physicians donated 12 hours at our scoliosis re-screens. Volunteers provided a total of 1,601 hours of service.

The Volunteer program is coordinated by a clerical staff member with the help of the public health nurses. The individual program managers train and supervise the many volunteers.

In spring the health department sponsors an annual Volunteer Luncheon to show our appreciation to our volunteers for all their hours of service. Their dedication enables our department to provide valuable services to the citizens of Ozaukee County.

**WEB page:** [www.co.ozaukee.wi.us/departments/PublicHealth/index.html](http://www.co.ozaukee.wi.us/departments/PublicHealth/index.html)

The health department maintains current information and links for health issues on their web page.

## CHARTS AND EXHIBITS

## Exhibit I

### 2004 COMMUNICABLE DISEASE STATISTICS-OZAUKEE COUNTY

<u>REPORTABLE DISEASES- DIAGNOSED CASES</u>	<u>Fred./Belg.</u>	<u>Port/Sauk.</u>	<u>Grafton</u>	<u>Cedarburg</u>	<u>Meq./Thien</u>	<u>Total 2004</u>	<u>Total 2003</u>
Blastomycosis						0	0
Campylobacter	3	10	1	3	9	26	17
Cryptosporidium				1	1	2	2
E. Coli 0157					1	1	2
Encephalitis					1	1	0
Giardia		1	1	1	4	7	6
Haemophilus influenza B		1				1	1
Hepatitis A			1		2	3	2
Hepatitis B	1	1	3	3	1	9	7
Hepatitis C	2	13	7	2	11	35	35
H.I.V.	1			1		2	0
Legionairres	1			1	1	3	0
Listeria			1			1	0
Lyme Disease		1				1	1
Measles						0	0
Meningitis	1	1			1	3	1
Mumps						0	0
Mycobacterial disease (non-tubercular)		3	4	3	3	13	16
Ova & Parasites (misc.)				1		1	1
Pertussis (See separate statistics)	4	25	17	15	39	100	4
Rubella						0	0
Salmonella	1	2	4	3	9	19	22
STD's: Chlamydia	7	17	6	13	13	56	22
Gonorrhea		2	4		3	9	6
Genital Herpes	1	4	14	3	9	31	12
Syphillis				2		2	0
Shigella	1	1	1		1	4	2
Strep A (invasive)				1	1	2	3
Strep B (invasive)	1	2			1	4	3
Strep Pneumo. (invasive)		4	1	3	4	12	5
Toxic shock syndrome						0	1
Tuberculosis-Active disease		1		1	1	3	3
Tuberculosis-Latent infection (non-contagious)		3	1	1	2	7	8
West Nile Virus						0	1

<b>Sub-total</b>	<b>24</b>	<b>92</b>	<b>66</b>	<b>58</b>	<b>118</b>	<b>358</b>	<b>184</b>
	<u>Fred./Belg.</u>	<u>Port/Sauk.</u>	<u>Grafton</u>	<u>Cedarburg</u>	<u>Meq./Thien</u>	<u>Total 2004</u>	<u>Total 2003</u>
<b>MISCELLANEOUS REPORTABLE DISEASES:</b>							
Cat Scratch Disease			1			1	0
Pontiac Fever			1			1	0
Rabies-animal (bat tested positive)	1					1	0
<b>Sub-total</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>
	<u>Fred./Belg.</u>	<u>Port/Sauk.</u>	<u>Grafton</u>	<u>Cedarburg</u>	<u>Meq./Thien</u>	<u>Total 2004</u>	<u>Total 2003</u>
<b>DISEASE EXPOSURES-FOLLOW-UPS (listed by location of index case patient)</b>							
Chlamydia-exposures to chlamydia	2	2	2		1	7	*
Foodborne illness-exposures to foodborne illness			6			6	*
Pertussis-exposures to pertussis	46	283	258	188	479	1254	*
Tuberculosis-exposures to tuberculosis		1		10	11	22	*
<b>Sub-total</b>	<b>48</b>	<b>286</b>	<b>266</b>	<b>198</b>	<b>491</b>	<b>1289</b>	<b>*</b>
<b>DISEASE INVESTIGATION ONLY-NOT CONFIRMED</b>	<u>Fred./Belg.</u>	<u>Port/Sauk.</u>	<u>Grafton</u>	<u>Cedarburg</u>	<u>Meq./Thien</u>	<u>Total 2004</u>	<u>Total 2003</u>
Foodborne illness	1	3	2	1		7	*
Mumps	1				1	2	*
Pertussis		4	2	1	3	10	*
<b>Sub-total</b>	<b>2</b>	<b>7</b>	<b>4</b>	<b>2</b>	<b>4</b>	<b>19</b>	<b>*</b>
<b>TOTAL:</b>	<b>75</b>	<b>385</b>	<b>338</b>	<b>258</b>	<b>613</b>	<b>1669</b>	<b>184</b>

\* -Not previously tallied

OAUKEE COUNTY

FALL 2004 **HEARING SCREENING** STATISTICS

**Exhibit II**

NUMBER OF STUDENTS	<u>SCREENED</u>	<u>RESCREENED</u>	<u>REFERRED</u>	<u>TREATMENT RECOMMENDED</u>	<u>COMMENTS</u>
<u>DAY CARE</u>					Screening in Spring 2005
PRESCHOOL					Screening in Spring 2005
ECH	74	3	0	0	"Early Childhood Screening"
<b>3K</b>	95	15	2	0	
4K	322	26	9	2	
5K	818	77	17	1	
1	860	59	23	6	
2	836	54	20	6	
3	841	41	11	1	
4	56	8	1	0	
5	24	6	2	0	
6	29	5	1	0	
7	25	4	0	0	
8	29	1	0	0	
<b>TOTAL</b>	<b>4009</b>	<b>299</b>	<b>87</b>	<b>16</b>	

**KEY**

"Screened" - HST will use total enrollment for each grade, subtracting absentees.

"Re-screened"- HST will record number re-screened at return visits.

"Referred" - HST will record number of referral letters sent to parents.

"Treatment Recommended" – HST will record number of children who returned a response (from referral letter) indicating any treatment recommendations or already under care of a doctor.

FALL 2004 VISION SCREENING STATISTICS

**Exhibit III**

NUMBER OF STUDENTS	<u>SCREENED</u>	<u>RE-SCREENED</u>	<u>REFERRED</u>	<u>TREATMENT RECOMMENDED</u>	<u>COMMENTS</u>
ECH	70	8	9	1	"Early Childhood Screening"
3K	115	15	6	1	
4K	359	34	16	6	
5K	840	125	60	8	
1	889	61	43	6	
2	864	62	35	1	
3	870	76	44	7	
4	932	95	57	8	
5	844	119	80	12	
6	1013	81	51	8	
7	1018	99	60	5	
8	1038	119	67	2	
9					
10					
11					
12					
<b>TOTAL</b>	<b>8852</b>	<b>894</b>	<b>528</b>	<b>65</b>	

**KEY**

"Screened" - HST will use total enrollment for each grade, subtracting absentees.

"Re-screened"- HST will record number re-screened at return visits.

"Referred" - HST will record number of referral letters sent to parents.

"Treatment Recommended" – HST will record number of children who returned a response (from referral letter) indicating any treatment recommendations or already under care of a doctor.

# ADULT HEALTH SCREENING STATISTICS

# Exhibit IV

Age	Sex	Screened	Blood		Vision risk		Distance		Near		Visual		Hearing	Cholesterol		HDL		Diabetes		Anemia		Pneum given	Td given		
			Pressure		Factors		Vision		Vision		Field test			SCR	REF	SCR	REF	SCR	REF	SCR	REF			SCR	REF
			SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF													
18-29	M	65	59	1	54	10	48	5	48	3	48			12	1	12	4	12	1				1		
	F	34	30	1	24	10	22	2	22	2	21			11		11		11					1		
30-44	M	139	119	4	98	31	77	5	77	4	76	4		70	11	70	21	70	3				1		
	F	99	83	2	59	15	42	3	42	4	42			36	4	36	6	36	1						
45-54	M	111	91	3	51	15	31	4	31	11	30	1		49	15	49	22	49	1						
	F	113	93	4	40	5	22	3	22	7	23	2		41	9	41	5	42	2						
55-64	M	108	97	7	22	8	13	2	13	4	14	2		33	9	33	8	33	1						
	F	219	204	18	36	10	15	2	15	7	15	1		63	20	63	9	63	5				1		
65-74	M	152	146	13	20	3	8	1	8	1	7	1		28	7	28	14	28	3				1		
	F	227	216	24	15	5	11	4	11	4	11	3		30	4	30	3	30	1						
75+	M	157	137	19	6		3	1	3	2	3	1		11	1	11	3	11							
	F	272	265	50	14	1	6	2	6	3	5	2		32	5	32	5	32					1		
<b>TOTALS</b>		<b>*1696</b>	1555	146	439	113	298	34	298	52	295	18		416	86	416	102	417	15				6		

	(screened)	<b>Total Persons referred</b>											433											
<b>Male</b>	732 664	47	251	67	180	18	180	25	178	9				203	44	203	72	203	9				3	
<b>Female</b>	964 828	99	188	46	118	16	118	27	117	8				213	42	213	30	214	9				3	

(\*Total numbers screened Corrected from the earlier published 2004 Executive Summary report)

**Exhibit V****NUMBER OF HOME CARE CLIENTS BY AGE AND RACE/ETHNICITY**

	<b><u>RACE/ETHNICITY</u></b>
	<b><u>White</u></b>
Under 25 Years	<b>1</b>
25 – 34 Years	<b>2</b>
35 – 44 Years	<b>1</b>
45 – 54 Years	<b>4</b>
55 – 64 Years	<b>5</b>
65 – 74 Years	<b>8</b>
75 – 84 Years	<b>23</b>
85 – 94 Years	<b>20</b>
95 + Years	<b>1</b>
<b><u>TOTAL</u></b>	<b>65</b>

**NUMBER OF HOME CARE CLIENT VISITS BY DISCIPLINE**

<b><u>Discipline</u></b>	<b>Number of Visits</b>	<b>Number of Patients</b>
Registered Nurse	575	61
Home Health Aide	1042	29
Personal Care Worker	1884	26
<b><u>TOTAL</u></b>	<b>3501</b>	

**NUMBER OF HOME CARE CLIENTS BY PRIMARY PAY SOURCE**

<b>Primary Pay Source</b>	<b>Number of Patients</b>
Medicaid (Title 19)	26
Private Insurance	3
Other / Fee Adjustment	22
Private Pay	14
<b>TOTAL</b>	<b>65</b>

**NUMBER OF HOME CARE ADMISSIONS AND READMISSIONS BY REFERRAL SOURCE**

<b><u>Referral Source or Site</u></b>	<b><u>Admission/ Readmission</u></b>
Family, Friends, Neighbors, Self	6
Physician (Un-hospitalized)	1
Hospital/Physician Referral for Hospitalized Cases	0
Social Services/Community Programs/Aging	28
Nursing Home	0
<b>TOTAL REFERRALS</b>	<b>35</b>

**NUMBER OF HOME CARE DISCHARGES BY REASON**

<b>Discharge Reason</b>	<b><u>Number Discharges</u></b>
Level of Care	10
Entered Hospital/Nursing Home	18
Death	1
Left Area (Moved)	0
Service Refused	2
Hospice	1
<b>TOTAL NUMBER OF DISCHARGES</b>	<b>32</b>

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