

Washington County Health Department

www.co.washington.wi.us/chn

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2010 Annual Report

presented to the County Board May 10, 2011

Health Department Mission

Promote Health ◆ Prevent Disease ◆ Protect the Public

Director's Message

from Linda Walter, Director/Health Officer

This report of the Health Department's activities during 2010 is presented in compliance with Wisconsin Administrative Rule HFS 140.04(3) (a). I wish to thank the Board of Health for assuring that the core functions of public health are met. The department's 2006-2010 Strategic Plan and 2006-2010 Community Health Improvement Plan (CHIP) have continued to guide the Board in policy development and both are in the process of being updated. The Health Department strives to fulfill its mission and the County's expectation of providing all citizens with high quality, prompt and cost-effective services. As the Director of the Health Department and the county's Health Officer, I am proud of the services offered and the employees who provide them.

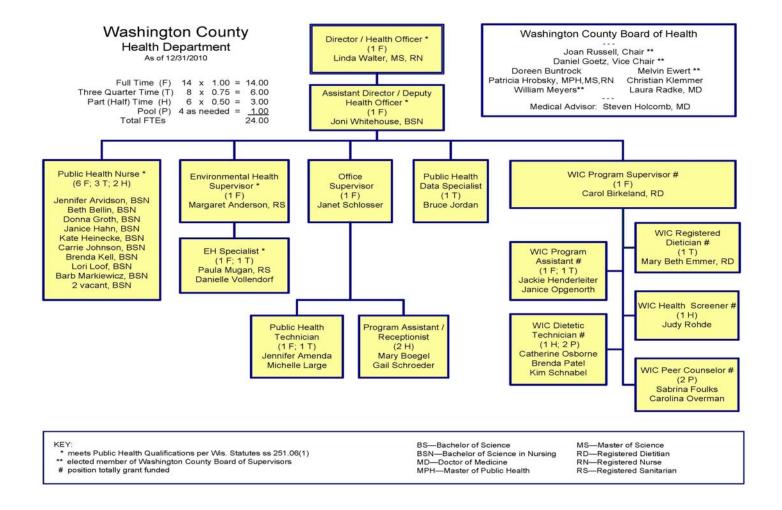
The 2006—2010 CHIP is the third community assessment done since 1994 and identifies priority areas that impact the general well being of all citizens. For the last five years the plan has identified priority areas that include, but are not limited to: (1) obesity: nutrition & physical activity, (2) addictions: tobacco, alcohol & other drugs and (3) emergency preparedness: proactive measures. The plan and supporting documentation are available by going to the county website www.co.washington.wi.us, clicking on the department tab for the Health Department and scrolling down the page to the documents/brochures section. Many partners, coalitions, other county departments and the Health Department have worked towards meeting the needs identified in the CHIP. Progress has been made on all 3 priorities, but obesity continues to be an area where the county statistics exceed the state average.

Telephone surveys done by JKV Research, LLC in 2006 and 2010 asked 400 adults what they thought was the most important health issue facing their community. From 2006 to 2010, there was a statistical increase in the overall percent of respondents who reported overweight, obesity and lack of physical exercise, or unhealthy food choices as one of the top three community health problems. In 2010, 60% of respondents indicated that obesity was the most important community health problem. The 2010 County Health Rankings produced by the University of Wisconsin Population Health Institute also confirmed that obesity continues to be a priority area needing attention. The CHIP will be updated after the 2011 County Health Rankings are released.

The phone survey also showed that between 2006 and 2010 there was a statistical increase in the overall percent of respondents who reported they were aware of the Health Department before the interview (63% to 72%). Of the 72% of adults who were aware of the Health Department in 2010, 88% were satisfied or very satisfied with the department meeting its mission. Ninety-five percent of respondents who received services from the health department reported they were satisfied with the way the health department meets its mission compared to 81% of respondents with no experience with the health department. There was also a statistical increase from

Public Health makes a difference to the citizens of Washington County

44% to 52% in the overall percent of respondents who reported they were aware of the Health Department's involvement in emergency preparedness planning at the local, regional and state level. The Health Department appreciates the support of its stakeholders and strives to deliver essential services to meet their expectations.



Focus Areas of Public Health

Communicable Disease Control and Surveillance

- Communicable disease follow-up including
 - New, emerging, and re-emerging diseases
 - STI (sexually transmitted infections) and hepatitis counseling services
- Immunization services/coalition
- Tuberculosis testing/case management/ dispensary
- Disaster preparedness activities/coalition

Environmental Health (Human Health Hazard Control)

- ♦ Radon information center/screenings
- ♦ Human health hazard/nuisance investigation
 - Lead screening and risk assessments
 - Beach water testing
- ♦ Rabies control coordination
- Water testing for selected wells—DNR contract
- Food Safety and Recreational Licensing services as an agent of the state Division of Public Health

Disease and Injury Prevention

- ♦ Wisconsin Well Woman services/regional coalition
- ♦ Obesity/Healthy People Project of WC
- ♦ Injury Prevention services/coalition
 - Car seat safety check site
- ◆ Tobacco education/multi-jurisdictional coalition

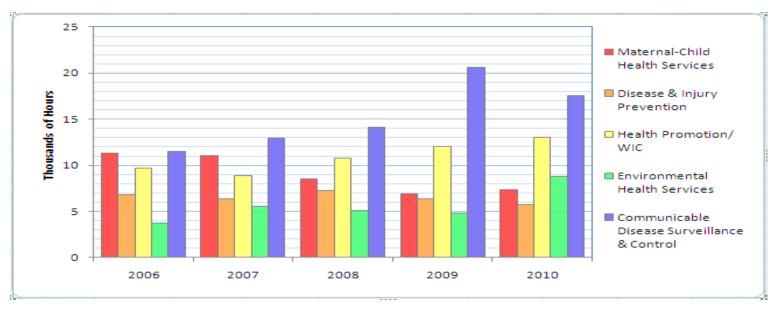
Health Promotion

- Women, Infants and Children (WIC) program Breastfeeding Coalition
- ♦ Information dissemination
 - Website, brochures, media, displays

Generalized Public Health Nursing

- ♦ Community Health Improvement Process
- Maternal/newborn health services including
 - Prenatal/postpartum
 - Teaching and education
 - Case management services
 - Referral to community resources
 - Pregnancy testing

Health Department Time Allocation By Focus Area



Performance Management Highlights

Table 1 Data on Selected Outputs

		2006	2007	2008	2009	2010
1	Communicable Disease Investigations	554	555	519	996	628
2	Value of free vaccines distributed locally	\$70,263	\$93,681	\$199,500	\$154,663^^	\$198,477
3	# of children followed with elevated blood lead levels	15	16	11	8	No cases
4	% of blood lead screenings provided by Health Dept of those done annually in the county by all health care providers	15% 100/669	12% 102/844	12% 125/1024	15% 161/1090	14% 164/1146
5	Preparedness hours logged by Health Department annually	2,695	2,204	1,835	2,552 + 4,788 H1N1	2,074+ 996 H1N1
6	WIC vouchers redeemed in county	\$693,331	\$963,953	\$1,136,521	\$1,116,954	\$1,098,511
7	Average monthly WIC caseload: individuals/families	1231/768	1348/827	1471/897	1555/955	1510/937
8	Local county per capita tax levy vs. average all local health departments' per capita tax levy	\$7.88 \$13.20	\$7.80 \$13.30	\$8.30 13.60	\$8.01 #	\$8.40 #
9	Local health department total staff FTEs per 10,000 population vs. average total FTEs all health departments in state	1.6 3.2	1.6 3.3	1.6 3.1	1.7 #	1.8 #
	Table 2 Data on Selected Outcomes	1	1	T		
10	% of age appropriate immunizations for 24 month olds (Changed from measuring HD caseload to jurisdictional in 2008)	89%	83%	86% agency 70% county	69% countywide	70% countywide
11	% of Health Dept. clients beginning pregnancy care during the 1st trimester	59% 84/142	68% 110/164	66% 88/133	51% 50/98	67% 88/131
12	% of county births for which Health Dept. completed a prenatal or postpartum assessment	18% 241/1345	22% 330/1512	19% 290/1504	16% 242/1534	16% 217/1369
13	% of enrolled WI Well Woman Program clients who are aged 50-64 years	63% 87/138	68% 110/162	63% 99/156	64% 92/143	69% 106/153
14	County's ranking and the (quartile) for health outcomes from annual state report	7th 1st quartile	8th 1st quartile	6th 1st quartile	3rd ** 1st quartile	3rd ** 1st quartile
15	County's ranking and the (quartile) for health determinants or factors from annual state report **changed to standard_national metrics & formula for 72 WI counties_for_2009/2010	3rd 1st quartile	4th 1st quartile	3rd 1st quartile	5th ** 1st quartile	5th ** 1st quartile

Confirmed and Probable Communicable Disease Cases

Washington County * 2010 Population 131,													2010	2010	2009	2008
Disease Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Cases	Rate *	Rate *	Rate*
Category I																
Haemophilis influenza		2		1									3	2.3	0.0	0.0
Hepatitis A	1												1	8.0	0.0	0.8
Meningococcal disease													0	0.0	0.0	0.8
Pertussis						1	3	3	5	5	5	1	23	17.5	16.8	3.8
Tuberculosis									1			1	2	1.5	1.5	0.0
Vancomycin Intermed. S.Aureaus (VISA)													0	0.0	0.8	0.0
Total Category I	1	2	0	1	0	1	3	3	6	5	5	2	29	22.1	19.8	5.4
Category II																
Arboviral Infection							1						1	0.8	0.0	0.0
Blastomycosis		1		1									2	1.5	8.0	0.8
Campylobacter	2	3	2	2	6	5	7	8	6	1	5	1	48	36.5	21.4	22.2
Cryptosporidiosis				1		4	12	17	3	1	1		39	29.7	6.9	13.0
E. coli						2	1	1		1			5	3.8	3.8	5.4
Giardiasis	1		1		2		2	1			1	1	9	6.9	9.2	6.9
Hemolytic uremic syndrome													0	0.0	1.5	0.0
Hepatitis B	1	1	1	1	1				2	1			8	6.1	6.9	6.1
Hepatitis C	2	3	2	1	5	1	2	1	3	5	3		28	21.3	23.7	13.0
Histoplasmosis													0	0.0	8.0	8
Influenza, Novel A (H1N1)			3										3	2.3	267.0	0.0
Kawasaki disease													0	0.0	0.0	1.5
Legionellosis							1						1	0.8	0.8	0.0
Lyme Disease		1		1	1	5	7	4	2	2	2		25	19.0	17.5	5.4
Malaria							1						1	0.8	0.0	0.0
Mumps													0	0.0	0.0	0.8
Mycobacterial disease (nontuberculosis)	1	2	1	2	2	2	2	2	3		1	1	19	14.5	13.0	13.8
Rheumatic fever			1										1	0.8	0.0	0.0
Salmonellosis		1	3	2	1	3	2		2			2	16	12.2	16.0	14.6
Shigellosis													0	0.0	5.3	6.1
STI: Chlamydia trachomatis	13	9	14	15	13	15	10	16	14	13	6	9	147	111.9	99.2	102.7
STI: Gonorrhea	1	1	3			2	4	2	2	4	4	1	24	18.3	10.7	16.9
Streptococcus group A invasive disease											2		2	1.5	1.5	1.5
Streptococcus group B invasive disease			1			2		3		1			7	5.3	6.1	4.6
Streptococcus pneumoniae invasive	2		2	2	2					1	1	3	13	9.9	3.8	8.4
Varicella	2	4		1	4		1				1	2	15	11.4	8.4	29.9
Yersiniosis													0	0.0	0.8	0.0
Total Category II	25	26	34	29	37	41	53	55	37	30	27	20	414	315.2	524.9	283.5
Category III																
AIDS													0	0.0	1.5	1.5
HIV								_		_		^	0	0.0	1.5	3.8
Total Category III	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	3.1	5.4
Total Reportable These data are provisional, are subject to or	26	28	34	30	37	42	56	58	43	35	32	22	443	337.3	547.8	294.3

* Population estimate is as of 1/1/2010 from WI Dept of Administration (http://www.doa.state.wi.us/). Rates are per 100,000 population.

Communicable Disease Control and Surveillance

Strategic Plan Long Term Goal:

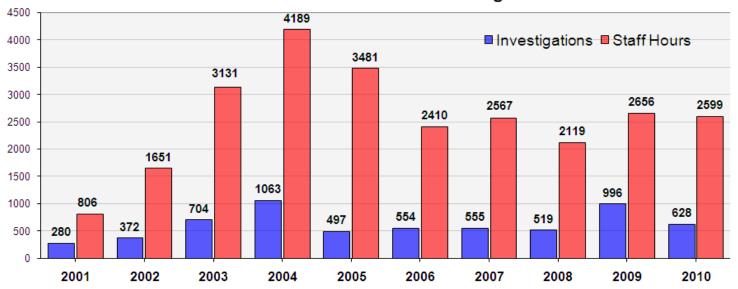
The public's health will be protected from preventable communicable diseases

Highlights:

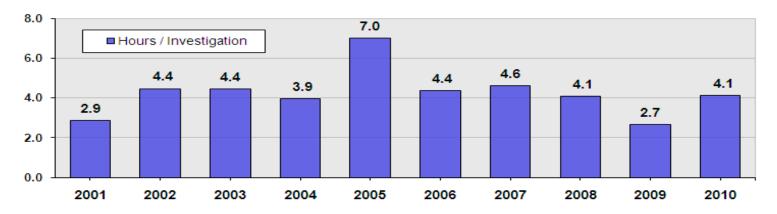
♦ Communicable disease (CD) surveillance, investigation, control and prevention

- The yearly fluctuation in employee hours needed for communicable disease control and surveillance demonstrates the importance of having cross-trained professionals who can provide the needed surge capacity when unanticipated events such as pertussis, H1N1 or food borne outbreaks occur
- In response to the H1N1 pandemic, the Governor issued Executive Order #280 on April 30,2009, declaring a state of public health emergency pursuant to Sections 166.03(1)(b) and 321.39(1)(a) of the Wisconsin Statutes; the order was not removed until July 8, 2010 and significantly affected Health Department operations and services throughout that time
- 465 hours were spent on tuberculosis-related case management and an additional 74 hours were devoted to directly observed therapy for two cases in 2010
- While there was no single cause identified, the rates of campylobacter and cryptosporidiosis increased and were likely related to the heavy spring rains, prolonged hot weather, increased frequency of swimming and contact with the outdoor environment
- Consultation and follow up for norovirus outbreaks in facilities such as schools, daycare centers and long term care facilities continued to be time consuming; there were 7 outbreaks during 2010
- AARA (stimulus) funds were used to provide free adult vaccines (Hepatitis A and B, Tdap, HPV, MMR and Varicella) to high risk groups during 2010

Communicable Disease Investigations



Time Required for Communicable Disease Investigations



Disease and Injury Prevention

Strategic Plan Long Term Goal:

The public's health is protected and promoted through prevention information and activities with respect to the leading causes of death: heart disease, cancer, stroke, and injury

Highlights:

- Wisconsin Well Women Program (WWWP)
 - Provides income eligible women with cancer screenings and access to medical care
 - ♦ Women ages 50-64 are considered at highest risk for lack of insurance coverage; the % of clients served in that target group ranged from 63-69% of the total women served for the past 5 years
 - ♦ The Health Department coordinated 177 diagnostic tests through pre-approved medical care partners for 111 clients who were income eligible

♦ Injury Prevention Efforts

- ◆ The Health Department and the Washington County Injury Prevention Coalition participated in the Celebrate Families event, Fire Prevention Week, Walk Your Child to School, Kid Fest at Boys & Girls Club and Law Enforcement Family Bike Jam as well as holding the annual alcohol related mock traffic crash for students which was held at Kewaskum High School in 2010
- ◆ The number of infant and child car safety seats demonstrations with education and installation assistance was 239; up 15% from 208 in Y2009

♦ Childhood Lead Poisoning Prevention

- ◆ The Health Department continued to provide community education, awareness of the dangers of childhood lead poisoning and promotion of lead screening for children aged 6 and under due to the housing stock built before 1978 in the county that continues to put children at risk
- ♦ Obesity: Physical Activity and Nutrition (CHIP Obesity Priority)
 - ♦ The Health Department continued work towards becoming designated as a breastfeeding friendly agency and a new community coalition was formed to promote breastfeeding
 - ◆ The Healthy People Project of Washington County (HPP) sponsored three days of community education and awareness in May 2010 featuring Mark Fenton, a nationally known expert and advocate of physical activity and the built environment (how our environment affects health)
 - ♦ The HPP website www.getmovingwashingtoncounty.com was released and paper copies of the new recreation map were made available to correspond with the Mark Fenton community events
 - Action teams were developed after the community events focusing on nutrition and physical activity

Health Promotion

Wisconsin Statutes 251.05(2)(a) and 253.06 Administrative Rule HFS 140.04(1)(c)

Strategic Plan Long Term Goal:

The public's health is protected and promoted through health promotion information and activities that affect the health and well-being of all

- ◆ The Women, Infants and Children (WIC) program remained a critical support for families, encompassing supplemental food vouchers, nutrition information, education and promotion of breastfeeding which is associated with reduced childhood obesity
- In 2010 a total of 2,601 women and children were served by WIC, slightly down from 2,677 in 2009

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2010	2009
Individual WIC Caseload	1543	1506	1538	1536	1490	1506	1505	1536	1545	1493	1478	1465	1512**	1555**
Family WIC Caseload	955	923	946	934	918	929	932	959	968	938	931	925	938**	955**

^{**} Monthly average

Environmental Health (Human Health Hazard Control)

Wisconsin Statutes 251.05(2) & 252 Administrative Rule HFS 140.04(1)(e) & (f)

Strategic Plan Long Term Goal:

The public is to be protected from unhealthy environmental conditions where they live, work and play

Highlights:

- ◆ The Environmental Health (EH) program expanded services for local food safety and recreational licensing (FSRL) services to facilities serving the public by becoming an agent of the state Department of Health Services, Division of Public Health (DHS/DPH)
- The transition from state to local inspectors was uneventful and facilitated by training on the state data system (Health Space) that allows inspection reports to be generated on-site for facility owners, enhancing data collection and improving tracking of previous inspections, findings and results
- ♦ A total of 519 inspections were made to follow up on 387 routine annual inspections, 39 pre-inspections, 34 follow up visits, 30 complaints, 18 advisory inspections, 7 second DPI visits, 3 visits with no inspection and one re-inspection
- ♦ The local FSRL service fee schedule mirrored the state fee schedule for the 2010 license year
- ♦ EH personnel followed-up and investigated 6 possible human health hazards in collaboration with municipalities; one of the six situations required a written human health hazard order
- ♦ Under a contract with WDNR, 215 transient non-community water systems were inspected by EH personnel and included well water testing and consultation
- ♦ In March all state certified daycares received an informational mailing that included a cover letter and flyer about EPA lead renovation, repair and a new lead painting rule that went into effect April 22, 2010
- In October all state certified daycares were again contacted with an informational mailing and flyers for National Lead Poisoning Prevention Week and promotion of childhood blood lead screening
- ◆ Two lead risk hazard evaluations were done by trained and certified Environmental Health (EH) employees for county residents who requested services
- ♦ In October as part of National Radon Awareness Week, the EH Supervisor participated in a question and answer radio program on WBKV with 62 radon test kits being distributed that month
- ♦ As a result of distributing over 440 radon test kits in Washington County, 286 residents tested for radon
- ♦ EH personnel continued to assist citizens and municipalities with concerns about indoor air quality, beach safety, well water testing, pest control, animal bites, lead poisonings, food safety, housing and environmental health concerns as well as referrals to the Department of Agriculture Trade & Consumer Protection for landlord/tenant issues
- ♦ Beach Testing occurred weekly from Memorial Day through Labor Day at three beaches with one closure at each of two of the beaches in Y2010
- ♦ EH personnel continued to assist Public Health Nurses with the investigation and follow-up of suspected food borne illnesses in the community in collaboration with the DPH

Health Promotion (continued)

Highlights:

- ♦ Lower-fat food choices first introduced for clients in 2009 with more whole grains foods, fruits and vegetables continued in 2010 with more acceptance by clients
- ♦ Participants redeemed \$5,888 in vouchers to purchase fresh fruits and vegetables from local producers at farmers' markets in 2010 down \$505 from 2009
- ♦ In 2010 77.5% of babies were breastfed, up 5% from 2009, and of those:
 - 82% were breastfed for 1 month or more, up from 73.8% in 2009
 - 52% were breastfed for at least 3 months.
 - 40% were breastfed for 6 months or more, up from 34% in 2009
- ◆ The breastfeeding coalition provided education and outreach to employers, including daycares, concerning new regulations amending Section 7 of the FLSA concerning break time for nursing mothers

Generalized Public Health Nursing

Strategic Plan Long Term Goal:

Public health needs will be balanced with community resources/capacity through community assessment and prioritization to identify at-risk or vulnerable populations and match needs to resources

Highlights:

- Pregnant women, new mothers and their babies continue to be identified as an at-risk group needing the
 assistance and support of the Health Department. Referrals to other community resources included, but
 was not limited to, Birth To Three, food pantries, Badger Care and day care services
- ♦ Public Health Nurses provide education on topics including, but not limited to, safe sleep, car seat safety, smoking cessation, nutrition, physical activity, infant care and childhood growth and development
- ♦ A new initiative to support breastfeeding, a Rock & Relax station, was used by mothers and families at the Washington County Fair and the Celebrate Families event with numerous positive comments
- ♦ Surveillance of birth certificates continued with 226 mothers of high risk infants offered services and all new parents in the county received 2 general mailings about Health Department services
- The total number of women receiving pregnancy related services remained stable; the number of express enrollments increased by 39% and the number of women receiving Title 19 services 24%

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2010	2009
Prenatal Assessments	10	7	21	9	15	5	11	10	8	15	16	9	136	99
Postpartum Assessments	6	7	9	6	5	10	10	1	3	7	7	10	81	144
Express Enrollment (EE) for Title 19	7	4	16	7	6	3	6	4	4	4	9	5	75	54
# women per month receiving a pregnancy related service	59	59	75	70	66	68	76	70	64	66	76	80	354*	354*
# women per month receiving services under Title 19	24	18	33	24	24	29	36	32	34	35	38	37	135*	109*

^{*} Duplicates in the 12 month total were eliminated, counting each client only once

Community Health Improvement Plan (CHIP) Activities that supported the 3 priority areas of the 2006–2010 plan included, but are not limited to the following:

- ♦ Obesity: the Healthy People Project of Washington County updated its strategic plan which addresses implementation of the obesity priority in the Washington County Community Health Improvement Plan
- ♦ Addictions: statewide smoke free legislation in public places was enacted during 2010 and the local coalition was incorporated into a new multi-jurisdictional community coalition in Fond du Lac
- ♦ Emergency Preparedness: the Washington County Health Care Partners committee continued to meet monthly coordinating the H1N1 response through July. The All Hazards Preparedness Coalition met quarterly and continued to work on setting up a structure for a community emergency fund.

The Wisconsin Department of Health Services Division of Public Health (DHS/DPH) reviewed the Washington County Health Department in 1999, 2005 and again in 2009. The Washington County Health Department has continued to meet the Level II requirements of Administrative Rule HFS 140.07(4) during each five year review period. To qualify for Level II the Health Department has met the minimum standards outlined in Wisconsin Statutes for all Level I health departments and, in addition, demonstrated that programming and services were in place addressing at least 7 areas of the current state health plan and had a qualified Health Officer. To meet Level III standards a health department must be an agent of the state providing a local licensed facility inspection program, meet higher standards and offer more programming than Level I and II departments. The Health Department implemented food safety and recreational licensing (FSRL) services as an agent of the state DPH in 2010.