



PUBLIC HEALTH DEPARTMENT

2007

FULL ANNUAL REPORT

ANNUAL REPORT INDEX

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2007 ANNUAL REPORT
EXECUTIVE SUMMARY
January 1 thru December 31
OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT



TO THE HONORABLE BOARD OF SUPERVISORS OF OZAUKEE COUNTY, WISCONSIN

Dear Ladies and Gentlemen,

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.*

Introduction:

On behalf of management and staff of the Ozaukee County Public Health Department, I am pleased to present the 2007 Annual Report. Our agency is grateful to the many community local and regional partners whom we work with every day to achieve healthier outcomes for our citizens and environment. The role of public health is to promote healthy lifestyles and educate the public on measures and methods to improve health and well being. While many programs are focused on the most at risk populations for a particular disease or condition, public health services are for the benefit of all residents. The intention of this executive summary is to provide highlights of public health activities and services that address our public health mission and the state and local health priorities. This report will show the diversity of quality health services provided to the broad range of citizens through an efficient and competent public health workforce. These activities and services have enabled individuals and community organizations to improve the health and safety of Ozaukee residents.

Please read the full report either by requesting a copy from the health department or find on the internet at: <http://www.co.ozaukee.wi.us/AnnualReports/2007/PublicHealth.pdf>

Summary of Activities:

With the onset of the New Year, the Health and Human Services Board (HHSB) took each month to review at least one of the Wisconsin 12 essential public health services and determined how the health department is meeting those responsibilities. The essential services are part of the National Public Health Performance Standards Programs. The Essential Public Health Services provide a fundamental framework for public health services by describing the public health activities that should be undertaken in all communities. The Core Public Health Functions Steering Committee developed the framework for the Essential Services in 1994. The Essential Services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems. The 12 essential services are listed in the full report.

To promote cancer prevention, especially among our youth, the Board of Health (HHSB) sent a letter, copies of current statutes and brochures to tanning salons in Ozaukee County to request state regulations be followed to assure client safety.

The Health Department partnered with Columbia St. Mary's Ozaukee to provide a 'Medication Take Back Program' on October 13, 2007, to help protect Lake Michigan, prevent childhood poisonings, and reduce substance abuse. A four county regional Medication Collection program is being planned in 2008.

Production of flu vaccine by manufacturers was on schedule this year. The CDC recommendations emphasized the need for health care workers to receive vaccine. We provided vaccine to individuals in group homes, senior meal sites, industries and business offices, open clinics throughout the community as well as at the public health department. 6750 adult doses and 608 pediatric doses of flu vaccine were administered in 2007 and we will continue to provide vaccine thru the flu season into 2008.

At the request of the City of Port Washington, the health department applied for and received a grant from the USEPA to complete a sanitary survey of Upper Lake Park beach. This survey covered 16 weeks of the summer season from Monday through Sunday at eight sampling sites in the Port Washington harbor area. Outcomes of this sampling effort include a detailed understanding of the storm water impact on Upper Lake Park Beach and the development of a computer model which will allow the health

department to predict daily beach advisories. Results of this grant activity were shared with USEPA, WIDNR, HHSB/C and the City of Port Washington.

Wisconsin ranks second in the nation in the rate of deaths from falls. From 2002-2004, 969 Ozaukee County residents were seen in the emergency room for falls related injuries; 631 were hospitalized for falls related injuries; 16 died from falls. This year's prevention grant objective was to train one public health nurse to perform in-home assessments to determine an individual's risk factors for falling by using the "Sure Step" protocols developed by Dr. Jane Mahoney and Physical Therapist, Terry Shea at the University of Wisconsin Falls Clinic.

Through the bioterrorism grants, ongoing efforts were made to continue strengthening Ozaukee County's preparedness skills enabling an effective response to a bioterrorism or a natural disaster event. We developed and implemented a three year work plan to improve performance capabilities that the State of Wisconsin was required to measure and that we had identified as significant. Some of the areas included Incident Command System (ICS), risk communication, epidemiological investigations, surveillance, containment measures, Mass Clinic Plans and outreach to many partners. In addition to planning, we tested, exercised and evaluated our plans. More details of the work completed are found in the full report.

Ozaukee County is ranked the healthiest county in the state, according to the release of the 2007 Wisconsin County Health Rankings report. This report is the annual "health check-up" of the 72 counties and the City of Milwaukee, developed by the University of Wisconsin Population Health Institute utilizing over 30 measures of health, from over 10 different data sources, to summarize the overall health of each county in Wisconsin. The full report is located on this web site:

<http://www.pophealth.wisc.edu/uwphi/research/mainRankingsPage.htm>

Volunteers are a very essential part of providing public health services. Volunteers assist at hearing, vision, and scoliosis screenings; blood pressure, adult health, and immunization clinics; children with special needs program and well child clinics. Volunteers provided a total of 1,549.50 hours of dedicated service. An appreciation luncheon is held every spring.

OZAUKEE COUNTY HEALTH PRIORITIES DETERMINED FOR 2002-2007

- Reduction in overweight / obese adults and children
- Reduction in alcohol and drug use
- Reduction in tobacco use and environmental tobacco exposure
- Increase participation in preventative health screenings
- Increase use of home carbon monoxide detectors

The remainder of the summary addresses snapshots from each core public health function.

COMMUNICABLE DISEASE CONTROL: WI PH statutes 251.05(2) and 252; HFS 140.04(b); 144; 145.

- 290 infectious diseases were investigated with 268 confirmed. Details are in the full report.
- A slight increase of Pertussis was seen with 22 confirmed compared to five in 2006. This is still is less than what was seen in the 2004 outbreak at 100 cases.
- A safe and effective Pertussis vaccine for adolescents and adults became available in late 2005. It has been incorporated into the routine tetanus boosters that are given every 7-10 years. Use of this vaccine should assist in decreasing future rates of Pertussis disease.
- Of the reported diseases in 2007, higher rates were seen in Campylobacter, Salmonella, Chlamydia and Genital Herpes. Hepatitis C and TB had a reduction in rate.
- A significant increase in the number of norovirus outbreaks (intestinal infection) was seen throughout Wisconsin. The increase was reported from a variety of institutional settings and was especially high in nursing homes. This same trend was also noted within Ozaukee County where there were seven documented outbreaks of norovirus. Five of the outbreaks occurred in nursing homes, and two were foodborne related.
- Birds continued to test positive for West Nile Virus in Ozaukee County. The first County human case was diagnosed in 2003. There have been no human cases from 2004 through 2007.
- In February 2007, there was a national outbreak of salmonella cases related to contaminated peanut butter. Ozaukee County had reports of nine cases of suspected salmonella related to the peanut butter outbreak.
- 37 animal bites were reported. The highest rates were found with cats, dogs and bats. No animals were tested positive for rabies in 2007. An "Animal Bite" brochure can be accessed on our website.

It is intended as an educational handout for the public and discusses prevention of bites and what to do if bitten by an animal.

- We reached a vaccination coverage level of 67% for 2 year olds residing in Ozaukee County and 83.1% of 2 month olds receiving their first series of vaccinations by 3 months. The goal of healthy people 2010 is for 90% of children aged 2, to be completely vaccinated.
 - In February, the Wisconsin Immunization Program began offering Vaccine for Children (VFC) supplied Human Papillomavirus vaccine (HPV) to those female clients 9-18 years of age. The vaccine protects against Human Papillomavirus types 6 and 11 which cause about 90% of genital warts and types 16 and 18 which cause about 70% of cervical cancers in the United States.
- MATERNAL CHILD HEALTH:** Chapter 253 of the WI Public Health Statutes, HFS 140.04(1)(a)
- The MCH program identified two objectives that addressed the 2010 health priorities. The first objective was in the area of nutrition and physical activity. The program focused on strategies to create environments that support and promote healthy eating, daily physical activity and a healthy weight for the MCH population.
 - The second objective was to screen and educate 35 new postpartum, non-Medicaid women regarding signs and symptom of postpartum depression. If a need is recognized, the nurse makes a referral and follow-up for further emotional services with the primary care provider.
 - 37 special needs clients were served with referral/follow-up to the Birth to Three program, immunization program, food stamps, and the local health department.
 - According to the SPHERE database system, a total of 665 visit sessions were made to families in Ozaukee County in 2007.
 - Targeted Case Management served 157 clients/families by assisting them to locate resources which enhances family stability and promotes individual management of their identified needs. This service is reimbursed thru Medicaid.
 - 83 pregnant women received a prenatal risk assessment. This Medicaid funded program helps pregnant women and their families gain access to medical, social, educational, and other necessary services related to the pregnancy.
 - WIC Program served an average of 405 participants each month. 4,865 food package vouchers were issued. A total of 793 people were served throughout the year. WIC drafts generated \$255,461.83 to be used at local vendors.

CHRONIC DISEASE AND INJURY PREVENTION: WI PH statutes 255;(2)(a)&HFS 140.04(1)(c)

- Screenings for prevention of chronic health problems include: blood pressure, near and distance vision, visual field analysis, hearing, diabetes, total cholesterol and HDL (good) cholesterol. A total of 803 people were screened and counseled with 154 referred for follow-up medical care.
- 794 people participated in the free Blood Pressure Screening Program. Thirty-three were referred for follow-up medical care.
- The Ozaukee 100 Fund, managed through the Columbia St. Mary's Foundation, provides financial assistance for full or partial payment of women's health screenings. Thirty-five women were assisted through the Ozaukee 100 Fund. Donations are welcome.
- 67 women participated in the WI Well Women Program screenings. Fourteen women had abnormal screenings and needed further evaluation and follow-up. Two Ozaukee County women are currently enrolled in Well Women Medical Assistance for treatment of breast cancer and one woman for treatment of cervical cancer.
- The Migrant Health program addresses health needs of migrant workers and their families. Services provided include health teaching, communicable disease follow up, assistance with scheduling medical care and coordination of care with other community agencies. Approximately 120 Latino workers and their families come from southern Texas to work at the Belgium Lakeside Foods Cannery and Random Lake Produce Freezing Plant.
- Through a grant, 56 car seats were installed to low income clients. Each seat from this grant must have a certified car seat technician to educate and instruct the family how to install the seat.

ENVIRONMENTAL HEALTH SERVICES: Chapter 254 of the WI Public Health Statutes

- 197 transient non-community wells were sampled for bacteria and nitrates; 54 wells were inspected.
- Environmental Health Specialist (EHS) addressed over 280 citizen environmental concerns.

- 668 children screened for lead throughout the County, 1.2% of those were identified with high blood lead levels.
- The health department completed six homeowner rehab projects through grant program.
- Bioterrorism focused on exercising communication redundant systems and mass clinic plans.

PUBLIC HEALTH NURSING AND HEALTH PROMOTION: WI PH Statutes 251.04(8) & HFS 140-04(1)(a); WI PH Statutes 251.05(2)(a) & 253.06 & HFS 140.04 (1)(c)

- The Ozaukee Health Initiative, which consists of community health partners, meets regularly to address the county’s five health priorities. A community assessment is required every five years; this assessment requirement will be conducted in 2008.
- The health department collaborated with four schools to provide nursing students public health experience; one student each from Moraine Park Technical College, MATC and UWM and 24 students from Concordia University.
- An April luncheon was given to honor volunteers who provided 1,549.50 hours of service.
- The Health Department maintains current health information and links on their web page.
<http://www.co.ozaukee.wi.us/PublicHealth/index.html>

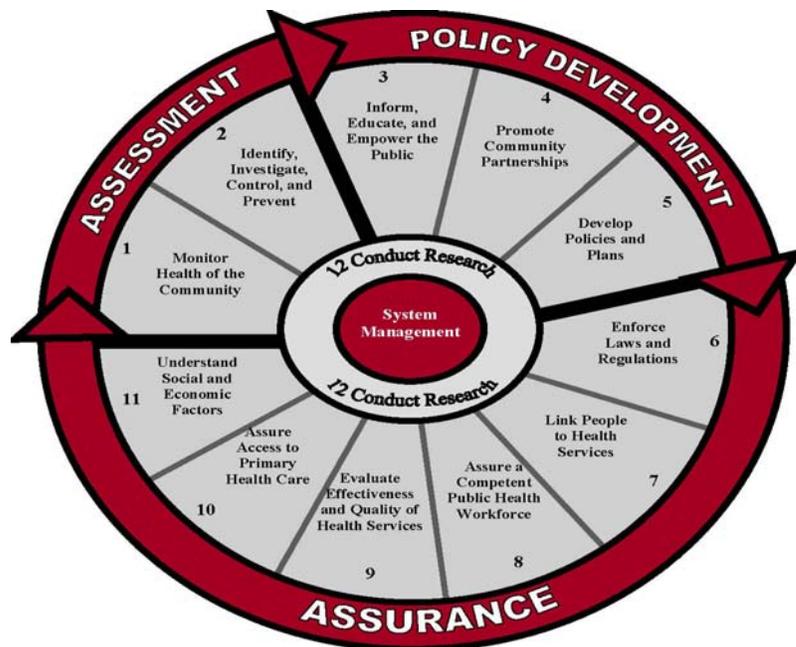
OZAUKEE COUNTY BOARD OF HEALTH: WI PH Statutes 2512.03(1), 251.04(1)(2)7(5)

The Health and Human Services Board met monthly in 2007 to set health policy for Ozaukee County residents. January–May members include County Board Supervisors Joe Dean, Chair, Janice Klemz, Vice Chair, Kathlyn M. Callen, Cindy Bock and John Hilber. Community members are Carol A. Lueders Bolwerk, RN, C. Perez, M.D., Ron Yokes and Dale Bspalec. August–December Janice Klemz became Chair and Cindy Bock, Vice Chair

Respectfully Submitted,

Wisconsin 12 Essential Public Health Services

Glenda S. Madlom, BS, BSN
Director / Health Officer
121 W. Main Street
Port Washington, WI 53074



OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT

Full Report

PUBLIC HEALTH STAFF:

ADMINISTRATION:

Glenda S. Madlom, RN, BS, BSN Director / Health Officer
Mary B. DeLuca, RN, BSN Assistant Director / Deputy Health Officer
Dawn Fay Administrative Services Coordinator

PUBLIC HEALTH STAFF

Kathy Bleau, RN, BSN
Caralee Jacque, RN, BSN
Jeannine Kitzerow, RN, BSN
Jan Koeppen, RN, BSN
Diana Noack, RN, BSN
Abbie Povletich, RN, BSN
Debra Schmidt, RN BSN
Jane Schulz RN, BSN

Donna Ubbink, RN, BSN
Joanne Viesselmann, RN, BSN
Patty Ruth, BA
Daniel Ziegler, BS, RS

PROGRAM MANAGEMENT:

Communicable Disease
Immunization Program, Healthy Child
MCH*, Scoliosis, CYSHCN*
Flu/Pneumonia/Hepatitis B, MCH team
Migrant Health, Lead, Women's Health
Adult Health Services, MCH team/Communicable Disease
PNCC*, MCH, P.E. *, TCM*, Health Check
School Health, Pre-K Screening, Immunization Program,
MCH team
Women's Health, Student Nurse Preceptor
WIC*, MCH team, Injury Prevention
Bioterrorism Project Manager
Environmental Health Specialist, Lead, Beach Monitoring,
Transient Non-Community Well Program

CERICAL STAFF:

Alison Schmitz Office Assistant
Mary Johnson Account Clerk
Wendy Schwab Office Assistant
Cindy Kapp Office Assistant / WIC

OTHER (Contracted):

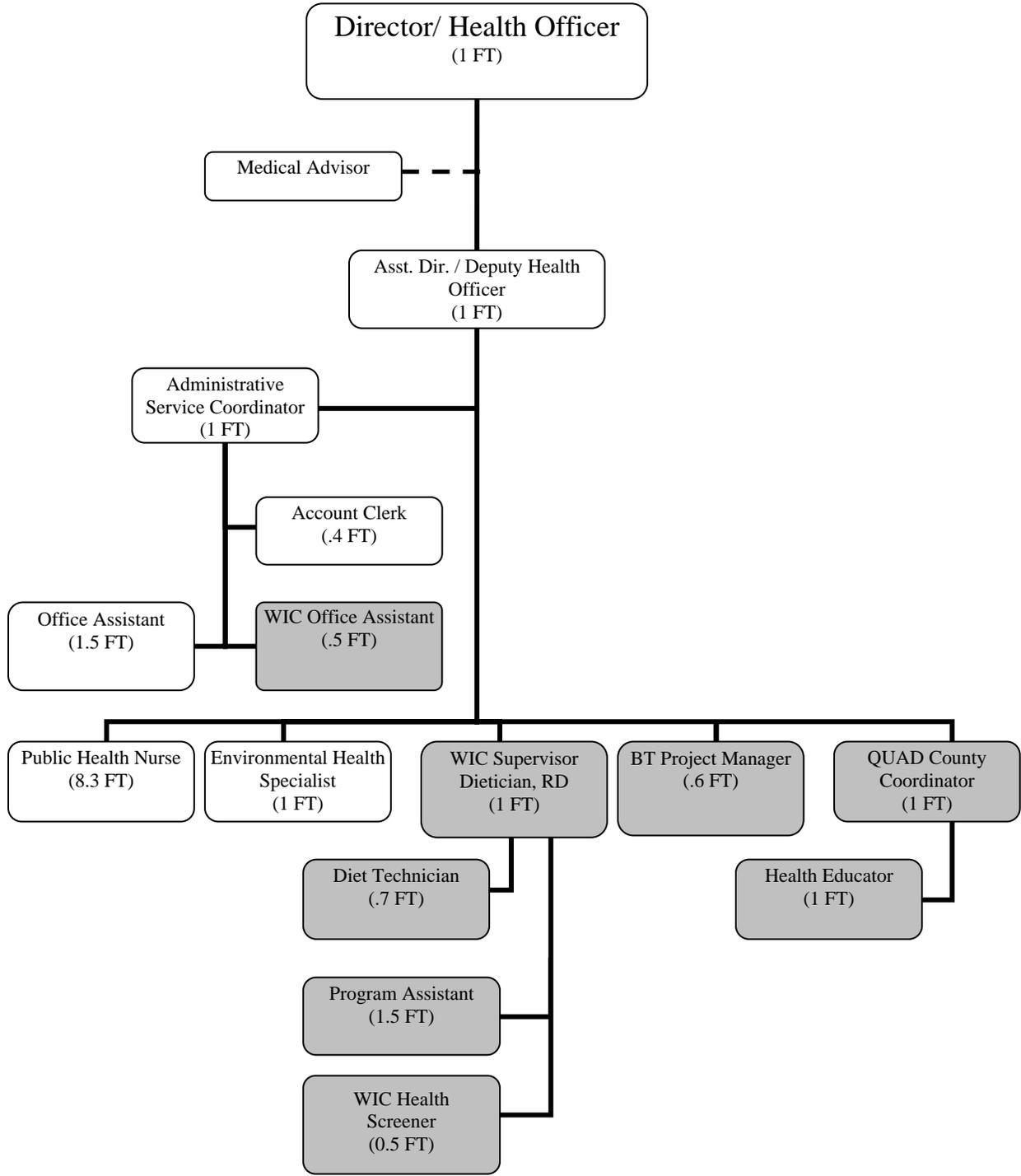
WIC: Carol Birkeland, Director/Registered Dietician
Quad County Consortium Staff: Kathy Riehle, Director; Ann Grundahl, Health Educator

Medical Advisor:

Celestino Perez, MD

- *MCH = Maternal Child Health
- *CYSHCN=Children and Youth with Special Health Care Needs
- *PE = Presumptive Eligibility
- *TCM=Targeted Case Management
- *WIC = Women, Infant, Children
- *PNCC=Prenatal Care Coordination

**OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT
2007**



Gray boxes indicate contracted services/or grant funded

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.
3. **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. Identify, investigate, control and prevent health problems and environmental health hazards in the community.
3. Inform, educate and empower people about current and emerging 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 diverse, adequate and competent workforce supporting public health systems.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Conduct research to seek new insights and innovative solutions to health problems.
11. Assure access to primary health care.
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

CHILDHOOD AND ADULT IMMUNIZATION PROGRAMS:

The immunization program, through two grant supported objectives, reached a vaccination coverage level of 67% for 2 year olds residing in Ozaukee County and 83.1% of 2 month olds receiving their first series of vaccinations by 3 months. The goal of healthy people 2010 is for 90% of children aged 2, to be completely vaccinated. These objectives were monitored using data and reports provided through the Wisconsin Immunization Registry (WIR). 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 Wisconsin Immunization Registry (WIR). The registry, utilized by the department since August of 2000, has continued to improve levels of complete records and decrease chances of duplicate or invalid immunizations being provided. Each year, county and statewide, medical providers have signed on to use the WIR enabling the public and private sector providers to increase their ability to share and use the new data. The Ozaukee County Public Health Department has continued to inform parents through immunization clinics, schools and health department literature about the ability for parents to obtain their child's records by logging into the WIR website. By doing so, parents are becoming better informed regarding those vaccinations recommended for their children and are helping to keep their family's records more complete by assisting private providers and the health department to update childhood records. This process also assists schools with WIR access to improve student vaccine law compliance.

Sincere thanks goes to the Mequon Police Department, for use of their building for one of 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.

In February, the Wisconsin Immunization Program began offering Vaccine for Children (VFC) supplied Human Papillomavirus vaccine (HPV) to those female clients 9-18 years of age. The vaccine protects against Human Papillomavirus types 6 and 11 which cause about 90% of genital warts and types 16 and 18 which cause about 70% of cervical cancers in the United States. This vaccine is licensed for females aged 9 to 26 years in a 3 dose series. For those clients 19 to 26, the health department hopes to offer vaccine in our clinics beginning early in 2008. Since inception of this vaccine into our program, the health department has provided a total of 213 HPV vaccinations. As with all VFC vaccines, continued provision is based on federal and state funding.

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

<u>Vaccine Type</u>	<u>2006</u>	<u>2007</u>	<u>Increases/Decreases</u>
Injected Polio	217	135	-82
DTaP	266	182	-84
Td	300	195	-105
TdaP	451	576	+125
MMR	228	136	-92
Hib	28	13	-15
Hib/Hep B	123	86	-37
Hepatitis B - Child	46	37	-9
Hepatitis B - Adult	243	204	-39
Hepatitis A - Adult	149	160	+11
Hepatitis A - Child	114	304	+190
HPV (Gardasil)	---	213	+213
Immunoglobulin (Ig)	11	---	-11
Meningococcal	251	216	-35
Rotavirus (Rotateq)	7	43	+36
Pneumococcal Poly (Pneumovax)	228	213	-15
Pneumococcal Conjugate (Prevnar)	202	138	-64
Typhoid	37	11	-26
Varicella(Chicken Pox)	101	213	+112
TOTALS	3002	3075	+73

	<u>2006</u>	<u>2007</u>
TB Skin Tests	338	271

	<u>Unduplicated Clients Served 2007</u>	<u>Immunizations Given in 2007</u>	<u>% Change Given from 2006 by site</u>
Mequon Site:	99	185	-30.4%
Port Washington:	448	1135	+38.8%
Office: WIC & Walk in clinics	674	1163	+15.9%
Other Sites: (Work sites, Health Screenings, excludes Flu clinics)	794	890	+16.1%

<u>School Immunizations</u>	<u>Audit 2006</u>	<u>Audit 2007</u>
Cedarburg	98.59% Completely Immunized	99.00% Completely Immunized
Grafton	98.38% Completely Immunized	99.04% Completely Immunized
Mequon-Thiensville	97.59% Completely Immunized	99.72% Completely Immunized
Northern Ozaukee	98.38% Completely Immunized	95.10% Completely Immunized
Port Washington -Saukville	96.67% Completely Immunized	99.96% Completely Immunized

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 whatever actions are needed 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.

Throughout the year, intestinal infections that can be caused by such organisms as E.coli 0157, salmonella, campylobacter, cryptosporidium, and giardia were 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 2007, a significant increase in the number of norovirus outbreaks was seen throughout Wisconsin. The increase was reported from a variety of institutional settings, and was especially high in nursing homes. This same trend was also noted within Ozaukee County, where there were seven documented outbreaks of norovirus. Five of the outbreaks occurred in nursing homes, and two were foodborne related. The health department investigated, assisted with and provided information on containment practices, hygiene, disinfection, and follow-up.

In February 2007 there was a national outbreak of salmonella cases related to contaminated peanut butter. Ozaukee County had reports of nine cases of suspected salmonella related to the peanut butter outbreak.

Pertussis continues to be reported. Because it is quite contagious, diagnosed individuals are kept in home isolation until they are no longer infectious and those who were in close contact with them are given recommendations for treatment or symptom monitoring.

A safe and effective pertussis vaccine for adolescents and adults became available in late 2005. It has been incorporated into the tetanus boosters that are given every 7-10 years, and is now being used routinely. Continued use of this vaccine should assist in decreasing the rates of pertussis disease in the future.

TURBUCULOSIS PREVENTIVE TREATMENT PROGRAM:

Tuberculosis can pose 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 no new cases of active infectious tuberculosis (TB) reported in 2007. Case management on one individual who had been diagnosed with active TB in 2006 was continued during 2007.

The public health department also provides medication for latent TB infected 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 progressing to the 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. The medications are then issued to the client on a monthly basis. 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 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.

An "Animal Bite" brochure can be accessed on our website. It is intended as an educational handout for the public and discusses prevention of bites and what to do if bitten by an animal.

Animals Tested for Rabies

	2007	2006	2005
Cat	12	18	11
Dog	12	11	7
Cow	0	0	0
Horse	0	1	0
Donkey	0	0	1
Bat	10	6	*7
Raccoon	0	2	0
Woodchuck	0	0	0
Goat	0	0	1
Llama	0	0	1
Rabbit	0	0	2
Chipmunk	1	0	1
Fox	1	0	0
Muskrat	1	0	0
Total	37	38	31

*One bat was positive for rabies

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. Those exposed persons are then notified of possible exposure to HIV and are counseled to get tested and on risk reduction. Strict confidentiality is maintained throughout all aspects of these investigation follow-ups.

INFLUENZA PROGRAM:

This year the production of flu vaccine by manufacturers was right on schedule, therefore, we were able to start our flu clinics in early October. The influenza recommendations from the CDC this year were for anyone who is at risk of complications from the flu and special emphasis to encourage health care workers to receive the vaccine. We were able to provide vaccine to individuals in group homes, senior meal sites, industries and business offices, open clinics through out the community as well as at the public health department. The public health department administered 6750 adult doses and 608 pediatric doses of flu vaccine in 2007 and will continue to provide vaccine thru the flu season into 2008.

MATERNAL CHILD HEALTH

Chapter 253 of the Wisconsin Public Health Statutes

MCH POSTPARTUM DISCHARGE PROGRAM:

The Ozaukee County Public Health Department's Maternal Child Health Program has continued to emphasize collaboration with community agencies in the year 2007 in an ongoing effort to strengthen families in Ozaukee County. We assist uninsured pregnant women to apply for Healthy Start, a state insurance plan, through the Presumptive Eligibility program. Pregnant women are also screened to see if they qualify for the Prenatal Care Coordination Program. If they are identified as high risk, a public health nurse will offer to follow them throughout their pregnancy to insure a healthy birth outcome. Surrounding agencies refers pregnant women.

The Postpartum Discharge Program collaborates with Columbia-St. Mary's-Ozaukee Hospital and other surrounding hospitals for the purpose of identifying at risk families that live in Ozaukee County and support them to transition smoothly from hospital to home. Newly delivered mothers who have agreed to a contact will receive a phone call from a public health nurse who will describe the Postpartum Program and offer a free home visit. Those families who refuse a home visit are screened to identify needs and evaluated for postpartum depression. All families are offered a mailing of educational materials and community resources. They are also offered, through collaboration with UW-Extension, a monthly parenting newsletter and a bi-monthly mailing for parenting the second and third year. Family Preservation has given financial assistance for the educational materials that are offered to our families. The feedback from families as well as health care providers and hospital staff has continued to be very positive.

CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS:

The Children and Youth with Special Health Care Needs (CYSHCN) project is through the Division of Public Health–WI Maternal and Child Health Program. This is the second cycle of the 5-year grant cycle. The target group is families with youth and children ages 0-21 years old with special health care needs. The long-range goal is to better coordinate delivery of resources to families at the local level. Ozaukee County Public Health Department continues to work closely with grant administrators through Children's Hospital of Milwaukee. The most frequent diagnosis in 2007 continued to be that of premature and low birth weight infants. Many of these infants were referred by surrounding hospitals and physicians. The childbirth records are reviewed weekly to identify CYSHCN. Early intervention and referral to specialty services is the key in helping these families. Public health, human services and Port Washington-Saukville school system provided a countywide resource night for all families. **In 2007, 37 clients were served under our referral and Follow-up. The majority of referrals were to the birth to three program, immunization program, food stamps, and the local health department.**

MCH CONSOLIDATED GRANTS:

In 2007, the MCH program identified two objectives that addressed the 2010 health priorities. The first objective was in the area of nutrition and physical activity. In 2007, the program focused on strategies to create environments that support and promote healthy eating, daily physical activity and a healthy weight for the MCH population. The nutritional team first conducted a survey of all five Ozaukee County school districts to discuss their school wellness policy and how best to integrate our proposed activities into their program. Secondly, a curriculum was developed to present to the booster/parent groups. Thirdly, junior and high school parents and/or booster clubs were contacted and offered a total of 20 educational presentations; 14 accepted the offer. These presentations promoted healthy eating and increased physical activity with an emphasis on nutritious offerings at sporting events. A follow up survey was conducted to the parent/booster clubs to determine what healthy food changes were made.

Survey results were shared with key stakeholders such as superintendents, school boards and athletic directors. Public health also partnered with UW-Extension to offer two sessions of Raising Healthy Eaters curriculum, designated for parents of 2-5 year olds. At each session, participants discussed strategies and barriers that impacted change in food choices and physical activity.

The second objective was to screen and educate 35 new postpartum, non-Medicaid women from Ozaukee County regarding the signs and symptom of postpartum depression. If a need is recognized, the nurse will make a referral and follow-up for further emotional services with the primary care provider.

All of the public health nurses, as they received a maternal & child health referral, were asked to discuss with the client the signs and symptoms of postpartum depression (Women's Emotional Health). The client was given the Edinburgh Depression Screening Tool, along with educational material on postpartum depression at the primary contact. After 3-6 weeks, a follow-up phone call was made to review the results of the self administered screening tool. If a scoring of nine or greater was determined, the client was referred to their primary medical provider.

51 Clients were provide education.

37 Clients completed the program (All of these clients had private insurance)

3 Clients (with score of nine or above) were referred to their primary provider for further mental health evaluation.

The SPHERE database computer program was used to enter data on daily activities. This allowed the staff to view reports that gave vital information on gaps in services for all populations served. According to the SPHERE database system, a total of 579 visit sessions were made to families in Ozaukee County in 2007. The following is a summary of the number of clients served under each of the specific MCH programs. A visit session is defined as one of the following: a home, office or clinic visit, telephone call (being at least 15 minutes long,) worksite or other type of visit program. SPHERE captured the following data:

15 MCH after 60 days postpartum

2 CBR (Child Birth Record)

41 CSHCN (Children with Special Health Care Needs)

252 Postpartum Discharge (up to 60 days postpartum)

83 PNCC (Prenatal Care Coordination)

29 P.E. (Presumptive Eligibility)

157 TCM (Targeted Case Management)

PRENATAL CARE COORDINATION:

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

- Outreach
- Initial prenatal risk assessment
- Care plan development
- Ongoing care coordination & monitoring
- Health education & 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 here at the Ozaukee County Public Health Department.

The main objectives for obtaining this goal include ensuring that women at high risk:

- Are identified as early as possible in pregnancy so prenatal care can begin.

- Receive individual psychosocial support & services.
- Receive early & continuous prenatal care services.
- Receive necessary health & nutrition education.
- Are referred to available community services.
- Receive assistance in accessing & obtaining needed health & social services.

In 2007, 83 pregnant women received a prenatal risk assessment. This pocket of need continues to be addressed by our department. This service reimbursed thru Medicaid.

TARGETED CASE MANAGEMENT:

The Ozaukee County Public Health Department has been participating in a program known as Targeted Case Management (TCM) since 2004. 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 older

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

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

In 2007, 157 clients/families were served in this program. Assisting families to locate resources enhances family stability and promotes individual management of their identified needs. This service is reimbursed thru Medicaid.

PRESUMPTIVE ELIGIBILITY:

Presumptive Eligibility (P.E.) is a program that has been available to Ozaukee County's pregnant women population since 1999. This program targets uninsured pregnant women whose income does not exceed 185% of the federal poverty level. Recipients found eligible for this program receive a temporary Medicaid certification that allows them to receive immediate pregnancy related outpatient services while their application for Healthy Start is being processed. Early prenatal care is vital in helping achieve healthy birth Outcomes - an ongoing goal of Ozaukee County Public Health for its prenatal population. **Ozaukee County completed 29 applications for Presumptive Eligibility in 2007.**

CHILD SAFETY SEAT GRANT:

Ozaukee County Public Health Department applied for and received a grant to purchase and distribute child passenger restraints to low-income clients in our county. All clients were assessed (WIC, PNCC, TCM) for the need of a seat or education. Car seats were also distributed to police departments in Ozaukee County that have a certified car seat technician on staff. We receive requests for child passenger restraints from Family Sharing and the Food Pantry. **In 2007, we were able to provide and install 56 car seats to low income clients. Each seat from this grant must have a certified car seat technician to educate and instruct the family how to install the seat.**

SCHOOL SCREENING SERVICES: (Exhibit II & III)

Hearing and vision screening programs are conducted in each Ozaukee County school from September through April. Preschools are also offered the hearing screening services. A Health Screening Technician with occasional RN assistance and large volumes of parent volunteers at each school, performs hearing and vision screenings.

If a hearing difficulty is identified during the initial screening, a hearing recheck is provided in 4-6 weeks at the school. If a possible deficiency is still detected, a letter with recommendations is sent to parents. Our hearing screening program serves children age 4 to grade 3, and any other age level if a parent or school staff requests a screening. Parents of students who fall below our screening criteria are sent a letter explaining the screening results. Parent responses to hearing referral letters are collected throughout the year and are added to the statistics as they are received.

Our vision screening program serves children in grades 4 through 8 and any other school age child if a parent or school staff makes a request. Distance vision screening is performed at each Ozaukee County school in the fall. If any deficiency is detected, a letter of recommendations is sent to the parent/guardian. As always, the public health department offers free vision and hearing screenings for age 4 through adult in our office throughout the year.

Kindergarten students are also screened for color deficiencies and depth perception either on the same day as distance screening or on a separate occasion in the fall of the year. Parents of students who may potentially have a color or depth deficiency are called by a public health nurse or are sent a letter explaining our screening results.

Treatment recommendations are collected and added to our statistics as they are received throughout the school year.

VISION USA—This 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. Local Lion's Clubs are very active in vision preservation and will assist with funding vision needs on a case by case basis.

EARLY CHILDHOOD AND KINDERGARTEN SCREENING:

The Public Health Department's nurses participate in the screening programs offered by the Cedarburg and Grafton districts. Screenings are for children who will be entering five-year-old kindergarten or children who have been identified by their parents as having a possible delay. Screening is usually done several times during the school year. The goal is to find any physical problems or delays in development and to encourage early medical and educational intervention. Public health nurse's offer available resources.

WOMEN INFANTS AND CHILDREN (WIC):

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 2007, the Ozaukee County WIC Program served an average of 405 participants each month. The number of food package vouchers issued this year was 4,865. There were a total of 793 people served by the program throughout the year. The following is a breakdown by percentages of clients per program category:

- * 29% were women (either pregnant, or postpartum)
- * 22% were infants under one year
- * 49% 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 11 contracted vendors where clients can redeem their vouchers. In 2007, WIC drafts generated \$255,461.83. Each participant receives a nutrition and health assessment at each 6 month certification. Lead screening and needed immunizations are offered at each visit. The flu vaccine is offered to eligible clients after their WIC visit. A public health nurse assesses every pregnant woman participating in WIC and offers her pregnancy/parenting education along with information on available community resources. Breastfeeding is recommended as the best nutrition for the baby to each pregnant participant. This year, WIC developed a position for a Breastfeeding Peer Counselor who provides telephone support both the prenatal stage as well as various times throughout the postpartum period. She also provides breastfeeding classes and home visits to those who need additional support. This year 68% of moms initiated breastfeeding post delivery. Of those breastfeeding mothers, 70.5% breastfed at least 1 month; 55% of them breastfed at least three months and 26% breastfed at least 9 months.

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 and at the same time help promote greater business for local farmers. WIC participants also have a greater awareness of the local Farmers Markets and utilized this resource more than last year. In 2007, vouchers worth \$1810 were redeemed for recipients in Ozaukee County.

HEALTHY CHILD WELLNESS CLINIC:

The 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.

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 old
- Hearing and vision screening

- Immunizations are available and given as needed
- Counseling on illness prevention, good nutrition, injury prevention, parenting and discipline is offered.
- Referrals will be made to other professional services as needed
- Clinics are held by appointment several times a year at the health department based on physician availability and services were provided by appointment only.

Well Child Service Providers: Physician services are provided voluntarily through Columbia-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

CHRONIC DISEASE AND INJURY PREVENTION

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

CARDIOVASCULAR RISK REDUCTION/BLOOD PRESSURE CONTROL PROGRAM:

The #1 cause of death in Ozaukee County as well as Wisconsin and the United States is heart disease. 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 and monitor the effectiveness of individuals receiving treatment.

The Ozaukee County Public Health Department conducts five FREE blood pressure screenings every month at different Ozaukee County locations – Cedarburg, Port Washington, Mequon, Thiensville and Saukville. In 2007, FREE blood pressure screenings were also conducted at Breakfast on the Farm, 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 2007, 794 people participated in the Blood Pressure Screening Program. Thirty three (33) were referred for follow-up medical care.

ADULT HEALTH SCREENING (Exhibit IV)

Previously the Ozaukee County Board of Health identified providing preventive health screenings as one of the 2002-2007 Ozaukee County Health Initiatives. The health department conducts both public and private screening programs. Each site determines which screenings to offer. Offered screenings can include: blood pressure, near and distance vision, hearing, diabetes, total cholesterol, and HDL (good) cholesterol.

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 2007, a total of 803 people were screened and counseled. One hundred fifty four (154) of them were referred for follow-up medical care.

2007 CONSOLIDATED GRANT – PREVENTION PROGRAM OBJECTIVE:

Wisconsin ranks second in the nation in the rate of deaths from falls. From 2002-2004, 969 Ozaukee County residents were seen in the emergency room for falls related injuries; 631 were hospitalized for falls related injuries; 16 died from falls.

This year's objective was to train one public health nurse to perform in-home assessments to determine an individual's risk factors for falling. Using the "Sure Step" protocols developed by Dr. Jane Mahoney and Physical Therapist, Terry Shea at the University of

Wisconsin Falls Clinic, our public health nurse then conducted 10 assessments. All 10 individuals benefited from the “Sure Step” program and decreased their risks for falling.

WISCONSIN WELL WOMAN PROGRAM:

The Wisconsin Well Woman Program (WWWP) provides preventive health screening services to low income, uninsured or underinsured women residing in Wisconsin. Breast and cervical cancer screening has been the primary reason for funding since 1994. The grant is provided by the U.S. Centers for Disease Control and Prevention and administered for the WWWP by the Wisconsin Department of Health and Family Services, Division of Public Health. Women screened and diagnosed with breast or cervical cancer may be eligible for Wisconsin Well Woman Medical Assistance (WWWMA). WWMA pays for treatment of breast and cervical cancer. WWWP also provides multiple sclerosis (MS) screening and support services. Women who have a high probability of having MS are referred to a primary care provider to start the MS assessment. Women who are determined to need further diagnostic testing are referred to a Regional MS Center. The program's primary focus continues to be breast and cervical screenings and MS support services.

Eligible women are enrolled through Ozaukee County's WWWP team. The WWWP focuses on women who are age 45 through 64 with a household income at or below 250% of the current federal poverty level. **In 2007, 67 women participated in the WWWP screenings. Fourteen (14) women had abnormal screenings and needed further evaluation and follow-up. Two (2) Ozaukee County women are currently enrolled in (WWWMA) for treatment of breast cancer and one (1) woman for treatment of cervical cancer.**

OZAUKEE 100 FUND:

The Ozaukee 100 Fund is managed through the Columbia St. Mary's Foundation and provides financial assistance for full or partial payment of women's health screenings. The breast cancer screening portion of the program encourages 100% of women in Ozaukee County to have routine breast cancer screenings. Eligible women must live in Ozaukee County and would not otherwise be able to get needed screenings. Financial assistance for other health services is considered depending on availability of funds earmarked for general use. Women can use the health care provider of their choice for screenings. Enrollment for this program is through the Ozaukee County Public Health Department. **In 2007, thirty five (35) women were screened through the Ozaukee 100 Fund, an increase from the twenty seven (27) women screened in 2006. The work of the coalition is supported by donations (tax deductible) to Columbia St. Mary's Foundation Ozaukee.**

TOBACCO CONTROL INITIATIVES:

Ozaukee County Public Health Department maintains strong community partnerships in an effort to control use of tobacco and decrease exposure to secondhand smoke.

In 2007, the public health department received a grant to implement a ‘smoke-free homes campaign’ with 2 of our maternal child health programs. The programs include the postpartum discharge program and families with children seen by a public health nurse after their WIC visit. The 57 clients assessed were uninsured or privately insured. The assessment included questions inquiring if anyone smoked in the household; offering information and resources to quit smoking; and whether they would agree to not allow smoking inside their home. We provided smoking cessation resources and counseling on the risks of secondhand smoke for infants, children and pregnant women. These assessment items, resource information, and individual counseling will become part of all maternal child health programs at the health department.

The health department maintains representation on the Ozaukee County ATOD (Alcohol, Tobacco, and Other Drugs) Consortium, which continues to obtain a large federal grant for education and prevention efforts with youth alcohol, drug, and tobacco use. The ATOD

consortium must include members from a broad spectrum of community partners. This grant is from the Federal Drug-Free Communities Support Program and its goal is to reduce or eliminate substance use by youth and eventually reduce use by adults.

The Ozaukee Health Initiative (OHI) steering committee is focused on monitoring community progress related to our five health priorities: Overweight and Obese adults and children; Alcohol and Drug Use; Tobacco Use and Environmental Exposures; Preventive Health Screenings; and Increase Use of In-Home Carbon Monoxide Detectors. One initiative the committee has been working with is to identify and congratulate the smoke-free eating establishments in Ozaukee County and to encourage all other eating establishments to follow their lead and also be smoke-free. We will continue to expand this tobacco control initiative in 2008.

MIGRANT HEALTH:

The Migrant Health program in Ozaukee County addresses health needs of migrant workers and their families. Approximately 120 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 stay in Wisconsin, working May through November. These workers 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/La Clinica 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, chiropractic visits, optometric visits, dental care, prescription drugs, laboratory services, radiology imaging, and radiology interpretation are the voucher assisted services. These and many more outpatient healthcare needs are case managed by a public health nurse for the migrant workers. State program immunizations and WIC services are also provided through the health department.

The voucher program provided 26 individuals and families with outpatient medical services. Ten other families were guided through the transfer and reapplication of Medicaid benefits from Texas to Wisconsin ensuring their children can receive medical care in our area. One family needed urgent high risk obstetric services two weeks after arriving from Texas, public health nurses quickly found a physician to continue her late pregnancy prenatal care and resulted in safe and successful medical care for mother and newborn baby.

Each year we give special thanks to those healthcare providers who have been very generous in meeting the migrant worker’s healthcare needs in Ozaukee County. We are fortunate to have a number of new provider participants in 2007. The following providers participate in the migrant health voucher program with Family Health/LaClinica Medical Clinic in Wautoma:

- Dr. Celestino Perez and office staff.
- Dr. Salvador del Rosario and office staff
- Greenlane Family Practice Physicians, Dr. Raymond Bauer and staff
- Columbia St. Mary’s Ozaukee Campus Hospital
- Columbia St. Mary’s Charity Care Assistance Program
- Wisconsin Radiology Associates
- Wheaton Franciscan Medical Group, Drs. Stuart Hannah, Victoria Yorke and their staff
- Lakeshore Eye Professionals, Drs’. Jay and Kostakos
- Belgium Chiropractic, Dr. Edward Braun

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.

ENVIRONMENTAL HEALTH SERVICES

Chapter 254 of the Wisconsin Public Health Statutes

This year the Environmental Health Specialist (EHS) addressed over 280 citizen environmental concerns. 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 County Health and Human Services Board, grant writing, assisting nursing staff with the follow up and investigation of food and waterborne disease outbreaks and program development.

This year the EHS completed the requirements of the transient non-community well sampling and inspection program. The program is funded by the WIDNR and the health department was reimbursed for each well sampled. A total of 197 wells were sampled for bacteria and nitrates and 54 wells were inspected.

From May through September the EHS assisted the health department with a DNR funded beach monitoring program at Lion's Den and at Harrington State Park. Several environmental health employees sampled beach water and the analysis for E. coli was completed by the City of Port Washington Water Utility. The EHS regularly attended WIDNR Beach Advisory Workgroup meetings to discuss and share information relative to administration of this field program and reported to the Health and Human Services Board via an end of beach season summary.

At the request of the City of Port Washington the health department applied for and received grant from the USEPA to complete a sanitary survey of Upper Lake Park beach. This survey covered 16 weeks of the summer season from Monday through Sunday at eight sampling sites in the Port Washington harbor area. Outcomes of this sampling effort include a detailed understanding of the stormwater impact on Upper Lake Park beach and the development of a computer model which allows the health department to predict daily beach advisories. Results of this grant activity were shared with USEPA, WIDNR, HHSB/C and the City of Port Washington.

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 throughout Ozaukee County in 2007 was 668. This department screened 55 children or 8 % of that total. Of the total number of children screened, 8 cases or 1.2% had levels of blood lead that would be a serious health concern. In all cases, public health nurses 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 the Wisconsin Division of Health grant funding provided for the lead abatement of two homeowner properties. Windows were replaced in eligible properties in Port Washington and in Belgium.

In 2007, the health department continued to administer the HOME rental and homeowner rehab programs. At years end, the health department completed six homeowner projects and submitted a grant application to fund an additional five rehab projects.

Early in 2007 the health department applied for and received a radon outreach grant from WI Division of Public Health. Students from Lakeview Middle School in Mequon and Cedarburg High School received instruction and radon screening kits. A total of 114 homes were screened for radon and the health department provided appropriate follow up when necessary.

Late in 2007 the health department followed up on 2007 goals and objectives to provide education to families on potential carbon monoxide hazards in their homes. 150 students at Homestead High School received instruction via PowerPoint. Afterward, students surveyed their homes for carbon monoxide alarms and learned to assess their operation.

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 HOME Applicant Review Board.

BIOTERRORISM (BT) GRANT PROGRAM:

It was a very productive 2007 for emergency preparedness planning under the Bioterrorism Grants. Ozaukee County continues to be a part of the Quad County Public Health Consortium. This means we have the opportunity to work closely with the Washington, Sheboygan and Fond du Lac Public Health Departments. The Consortium staff assists us by providing technical support. Our objectives included work on preparedness activities, Pandemic Influenza and Cities Readiness Initiative. We developed and implemented a three year work plan to improve performance capabilities that the State of Wisconsin was required to measure and that we had identified as significant. Some of the areas included Incident Command System (ICS), risk communication, epidemiological investigations, surveillance, containment measures, Mass Clinic Plans and outreach to many partners. In addition to planning, we tested, exercised and evaluated our plans.

Some of the highlights based on the objectives include:

- Outreach Activities – We have provided a variety of outreach opportunities to businesses, public and private schools, clergy, health care partners, associations and municipalities. Outreach has occurred via presentations to groups and assistance with planning and mailings. Some of the presentations have been to groups of 20 to 90 people. Assistance with planning has happened at meetings with healthcare partners and schools. Mailings have included reaching almost 2,000 businesses in Ozaukee County by working with all the Chambers of Commerce. Outreach is important as it strengthens the partnerships that we develop, it strengthens the planning efforts of all and it will assist us in being able to serve all our citizens.
- Communication – In emergency preparedness it is critical to plan and prepare to be able to communicate effectively and efficiently to partners and to the public in any type of emergency. With this in mind, we focused a great deal of attention on identifying redundant communication and testing the various forms of communication. Our testing has included 800 Trunking Radios, Satellite phones, Ham Radios, Command Caller, 24/7 Telephone Calling Tree and Blast Fax. In addition we developed a Risk Communication Plan that addresses accessing pre-scripted messages, message mapping and job action sheets. We have also had a number of our staff attend Risk Communication training and Public Information Officer (PIO) training.
- Mass Clinic Plans – We have been meeting with the hospital, medical clinics and emergency medical services, as they are vital parts of the Triage Plan and are addressing how the planning process may affect surge capacity at the clinics and hospital and how EMS will deal with surge in transporting ill individuals. This has been challenging for all involved. It requires that all work together in a non-competitive manner. We have made progress. This planning has been for Mass Clinic Plans for Smallpox, Anthrax and Pandemic Influenza.

- Pandemic Influenza – A year ago public health had some difficulty getting others to see the importance of planning for a Pandemic Influenza. Within the past 12 months, we have seen that many of our partners have become actively engaged. St. Mary’s Ozaukee Hospital is a partner that has been working along side of us from the beginning. They have told us that they are ahead of their other hospital campuses because of the work that we have been doing together for the past few years. They invited us to work with them on a full-scale exercise, testing surge capacity in the Emergency Department during a pandemic. This was very beneficial.

This year we developed a Community Containment Plan, defined the steps in reporting influenza, tested time frame it takes to send critical information to our healthcare partners, continued work on the Mortuary Planning Guidelines, developed a plan for vaccinating first responders, and began the process of reviewing ethical guidelines for determining allocation of any scarce resources during a pandemic. This may include antiviral medications, vaccines, masks, and ventilators, etc.

We also tested our Pandemic Plan – Vaccinating First Responders at a Tabletop Exercise.
- Ozaukee County Employee Emergency Response – We worked with Administration and several other departments to ensure that Ozaukee County employees are ready to be deployed in a disaster. Letters of explanation, forms, instructions and frequently asked questions and answers were developed and will be sent out to all departments in early 2008. The Public Health Department will pilot the completion of the forms.
- Special Population Planning – public health is working with human services, American Red Cross, Emergency Management and the Quad County Consortium on planning for the needs of special populations. This is taking the form of developing plans for special needs shelters, identifying individuals with special needs, exploring the prospect of a Voluntary Special Needs Registry and determining the best way to effectively communicate with this special population. (Please note: The definition of special needs during an emergency or disaster is very broad. It may include individuals that can not respond to an emergency independently or without adaptations due to physical, mental, emotional, socio-economic, and cultural and/or language based reasons.)
- Volunteers – Disasters, by definition, require resources beyond our normal capabilities. Therefore in preparedness planning we must look at ways we can access additional resources. These resources include people and things. One of the means of preparing for this area is via the Voluntary Organizations Active in Disasters. Public Health is an active participant in VOAD. VOAD is working hard at reviewing and revising policy in the areas of recruitment, activation, badging and training. We are also reaching out regionally to assure that Ozaukee County needs are met and that we can assist other counties. VOAD joined COAD (Citizens Organization Active in Disasters). We are now part of the Milwaukee, Waukesha and Ozaukee County COAD. In addition, public health has purchased software that will assist us in identifying and badging potential volunteers. The State has recently formed an Expert Panel on Volunteers in which Ozaukee County’s BT Project Manager is a member.
- Cities Readiness Initiative – Our department is part of this regional planning effort to assure that we can distribute antibiotics to an entire population that may be exposed to anthrax within 48 hours of exposure. This requires developing alternative methods for distribution of medication. In recent months, we have seen progress with this regional planning. We look toward 2008 to move forward with these plans & to test them.
- Training Opportunities – Training is a very important part of preparedness planning. One piece of the training that we have worked on in 2007 is related to National Incident Management (NIMS) and Incident Command System (ICS). The Federal government

mandates a specific level of training in this area. Public health has met the compliance requirements for 2007.

Other trainings that staff has participated in include but are not limited to:

- Risk Communication
- PPE Fit Testing
- Special Needs Shelter Operation Training
- Pandemic Preparedness & Schools
- The State Public Health Conference
- Agroterrorism

In summary, the 2007 Bioterrorism Grants have helped us to move forward with all our preparedness plans. We look forward to 2008, working very hard to continue to make improvements and to be able to better serve all of Ozaukee County.

HEALTH PROMOTION AND GENERAL NURSING PROGRAMS

Wisconsin Statutes: 251.05(2)(a); 253.06; 251.04(8)

COMMUNITY ASSESSMENT: (Regularly and systematically collect, assemble, analyze and make available information on the health status of the community. s. 251.05(3)(a),)

The State of Wisconsin Division of Public Health directs each county health department to perform a community assessment at least every 5 years. In 2005, the fourth health study was completed for Ozaukee County. We look forward to the fifth health study in spring 2008. Community Health Survey results have provided the solid data from which the following five health priorities have been selected:

- Overweight or obese adults and children.
- Alcohol and drug use.
- Tobacco use and environmental tobacco exposure.
- Preventive health screenings.
- Increase presence of Carbon Monoxide detectors in homes.

The 2005 Community Health Survey was conducted by Aurora Healthcare through their internal grant procurement. We received results of the 2005 survey in 2006. The community Health Surveys conducted by Aurora Healthcare are on a 3 year schedule and Ozaukee County will be surveyed in spring 2008. 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. We are fortunate to have the same research company for our recent Community Health Surveys.

The recent 2005 survey can be viewed via this link on our web page:

<http://www.aurorahealthcare.org/yourhealth/comm-health-reports/art/2005-Ozaukee-County.pdf>

Each year, our public health grants received from the State Division of Health are based on the five priorities selected above. Grant objectives are often based on data gathered from these Community Health Surveys.

The Ozaukee Health Initiative (OHI) is a group of county and community members who review the health survey results, and continuously monitor community activity relating to the five health priorities. We have continuously broadened our membership base, currently including the chairperson who is a County Board Supervisor and previous Board of Health chairperson; both Director and Assistant Director of Ozaukee County Public Health Department;

an Ozaukee County Public Health Nurse; the Director of Ozaukee Human Services; the Manager of Ozaukee Community Programs; the UW Extension Family Living Consultant; the Columbia St. Mary's Ozaukee Campus Director of Operations; the Director of Programming at the Saukville Feith Family YMCA and the primary programming Specialist at Ozaukee Council, Inc. In 2007, we expanded our membership to include an additional County Board Supervisor, and the Director of Ozaukee County Planning, Resources, and Land Management. We are also fortunate to have an epidemiologist available for consultation at the State Division of Public Health Southeast Regional Office in Milwaukee.

Now at the end of 2007, we are developing five additional questions for the 2008 Community Assessment Survey. Each survey community has the opportunity to ask 5 additional questions pertinent to activities and initiatives in their area.

Through this Community Assessment process, Ozaukee County is able to keep apprised of community needs as they arise, rather than having to deal with a problem which may have grown too large for effective intervention.

2007 Wisconsin County Health Rankings:

Ozaukee County is ranked the healthiest county in the state, according to the release of the 2007 **Wisconsin County Health Rankings report**. This report is the annual "health check-up" of the 72 counties and the City of Milwaukee, developed by the University of Wisconsin Population Health Institute. Director Dr. Patrick Remington brings together over 30 measures of health, from over 10 different data sources, to summarize the overall health of each county in Wisconsin.

The 2007 rankings measure overall health as a combination of the premature mortality rates and quality of life reported by adults. The report reveals significant differences in health between the five healthiest counties (Ozaukee, Waukesha, Eau Claire, Iowa and Dane) and the five least healthy places (Menominee, Milwaukee City, Juneau County, Marquette County, and Adams County). Milwaukee County also fared poorly with a rank of 68 in overall health outcomes.

Research has shown that health of a community is determined by a number of factors, including the quality of health care, lifestyle and behaviors, social and economic factors and the physical environment. The 16-page report reviews two factors to determine the level of health outcomes or "healthiness": the rank of premature death (dying before age 75) and how people assess their own health.

The report then analyzes many different factors in four major categories to establish how health is determined: access to and quality of health care, health behaviors such as smoking and drinking, social and economic factors such as levels of income and education, and the physical environment such as air and water quality.

The Institute's annual health ranking is an important tool for communities to assess and improve their health status. These reports can be used as a call to action. Just because we are number one, does not mean that there are not health issues that need to be identified and addressed. Just as this health ranking measures health as more than just health care, solutions need to come from broad-based partnerships of educators, employers, health advocates, and the media.

The full report, and "snapshots" of each county, are available at http://www.pophealth.wisc.edu/UWPHI/research/rankings_2007/rankings_2007.htm.

NURSING STUDENT PRECEPTOR PROGRAM:

The public health department participates in providing public health clinical experiences to nursing students. In 2007, the health department provided four schools with clinical experiences. The health department provided experiences to one (1) student from Moraine Park Technical College, one (1) from Milwaukee Area Technical College, One (1) from the University of Milwaukee and twenty four (24) students from Concordia University.

VOLUNTEERS:

A difference was made in 2007 by our dedicated and caring volunteers. Our department program benefited greatly from the numerous hours and talents of our many volunteers. In 2007, 438 volunteers donated 920 hours of service to the school hearing, vision, and scoliosis screening programs. Fifteen volunteers donated 267.5 hours at our blood pressure and adult health screenings. One volunteer donated 180 hours to our Children with Special Health Care Needs program and 25 volunteers donated 160 hours of service at our flu/pneumonia clinics and our monthly immunization clinic in Mequon. Four physicians donated a total of 12 hours at our Healthy Child Wellness Clinics and one physician donated 10 hours at our scoliosis re-screens. Volunteers provided a total of 1,549.50 hours of dedicated service.

WEB page: <http://www.co.ozaukee.wi.us/PublicHealth/index.html>

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

EXHIBIT I

2007 COMMUNICABLE DISEASE STATISTICS OZAUKEE COUNTY								
REPORTABLE DISEASES- DIAGNOSED CASES	Fred./Belg.	Port/Sauk.	Grafton	Cedarburg	Meq/Thien	Total 2007	Total 2006	Total 2005
Blastomycosis			1			1	1	2
Campylobacter	3	7	2	1	5	18	24	22
Cat Scratch Disease						0	1	0
Cryptosporidium	2	1	2	2		7	2	7
E. Coli 0157			1			1	7	2
E. Coli-shiga toxin positive (non O157)				1	1	2	n/a	n/a
Ehrlichiosis	1					1	0	0
Encephalitis						0	0	2
Giardia		1	2	4	6	13	10	11
Haemophilus influenza B						0	1	1
Hepatitis A	1					1	3	0
Hepatitis B	1		4	1	1	7	8	10
Hepatitis C		2	2	2	3	9	33	21
H.I.V.		1				1	2	4
Kawasaki Syndrome	2			1		3	1	0
Legionairres						0	0	0
Listeria						0	0	0
Lyme Disease	1	2	2			5	3	0
Malaria		1				1	0	0
Measles						0	0	0
Meningitis-bacterial						0	0	1
Meningitis-viral					1	1	4	5
Meningococcal disease						0	0	1
Mumps (confirmed/probable/suspect)				1		1	6	0
Mycobacterial disease (non- tubercular)	1	6	3	1	2	13	13	14
Norovirus-outbreaks		3		3	1	7	n/a	n/a
Ova & Parasites (misc.)						0	0	0
Pertussis (confirmed/probable/suspect)	7	10	1	2	2	22	5	13
Rubella						0	0	0
Salmonella	3	7	4	4	6	24	8	22
Shigella		1				1	0	2
STD's: Chlamydia	5	15	11	16	15	62	53	64
Gonorrhea		3	5	3	6	17	9	5
Genital Herpes	1	8	4	7	9	29	32	37
Syphilis		1	1	1	1	4	1	4
Strep A (invasive)	2	1	1			4	2	2

Strep B (invasive)		3	1			4	6	2
Strep Pneumo. (invasive)		2	1	1	2	6	5	6
Toxic shock syndrome						0	0	0
Tuberculosis-Active disease (confirmed/suspect)						0	3	1
Tuberculosis-Inactive (old TB-inactive-monitored)						0	0	2
Tuberculosis-Latent infection (non-contagious)			2		1	3	11	10
West Nile Virus						0	0	0
Yersinia						0	1	1
Sub-total	30	75	50	51	62	268	255	274
MISCELLANEOUS REPORTABLE DISEASES:	Fred./Belg.	Port/Sauk.	Grafton	Cedarburg	Meg/Thien	Total 2007	Total 2006	Total 2005
Haemophilus (non type B)	1					1	1	0
Vibrio fluvialis				1		1	n/a	n/a
Sub-total	1	0	0	1	0	2	2	3
EXPOSURES TO REPORTABLE DISEASES	Fred./Belg.	Port/Sauk.	Grafton	Cedarburg	Meg/Thien	Total 2007	Total 2006	Total 2005
Chlamydia-exposures to chlamydia		1		1	1	3	10	8
Waterborne illness-exposure to waterborne illness		3				3	0	0
Measles-exposures to case					1	1	n/a	n/a
Pertussis-exposures (no designated community listing)						81	1	156
Tuberculosis-exposures to tuberculosis					1	1	6	5
Sub-total	0	4	0	1	3	89	25	172
INVESTIGATION ONLY- NOT CONFIRMED	Fred./Belg.	Port/Sauk.	Grafton	Cedarburg	Meg/Thien	Total 2007	Total 2006	Total 2005
Ehrlichiosis		1				1	0	0
Foodborne illness		2	2	1	2	7	5	5
Hepatitis A		1				1	0	0
Measles					1	1	0	0
Rubella			1			1	0	0
Salmonella (serotype Tennessee)		2	1	2	2	9*	0	0
(*2 reports have no available address)								
Sub-total	0	6	4	3	5	20	10	7
TOTAL:	31	85	54	56	70	379	292	456

EXHIBIT II

2007 Hearing Statistics by Grade Level					
Grade	Screened	Rescreened	Referred	% Referred from Rescreen	Treatment Responses
ECH	99	4	2	50%	1
PRESCHOOL	519	122	11	9%	-
4K	290	35	5	14%	2
5K	809	54	8	15%	2
1	796	47	12	26%	2
2	808	44	8	18%	3
3	858	40	7	18%	-
4	20	2	1	50%	-
5	6	1	1	100%	-
6	35	5	-	0%	-
7	27	2	-	0%	-
8	27	4	-	0%	-
9	-	-	-		-
10	-	-	-		-
11	-	-	-		-
12	-	-	-		-
	-	-	-		-
TOTAL	4,294	360	55	15%	10

EXHIBIT III

2007 Vision Statistics by Grade Level					
Grade	Screened	Rescreened	Referred	% Referred from Rescreen	Treatment Responses
ECH	74	2	2	100%	2
PRESCHOOL	-	-	-		-
4K	339	23	14	61%	2
5K	832	62	38	61%	8
1	812	49	31	63%	4
2	837	50	35	70%	4
3	880	79	52	66%	4
4	959	85	58	68%	9
5	934	73	53	73%	7
6	961	57	38	67%	5
7	1,037	86	54	63%	8
8	1,024	95	55	58%	5
9	-	-	-		-
10	-	-	-		-
11	-	-	-		-
12	-	-	-		-
TOTAL	8,689	661	430	65%	58

EXHIBIT IV

ADULT HEALTH SCREENING STATISTICS:																					
2007 Totals																					
Age	Sex	Number Screened	Blood Pressure		Vision Risk Factors		Distance Vision		Near Vision		Visual Field Test		Hearing		Cholesterol		HDL		Diabetes		Td given
			SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF	SCR	REF	
18-29	M	9	9	0	8	3	6	0	6	0	0	0	0	0	8	1	8	3	8	0	0
	F	8	8	0	6	2	5	1	5	2	0	0	0	0	6	0	6	0	6	0	0
30-44	M	32	28	1	29	6	18	0	18	2	0	0	0	0	25	3	25	13	25	0	0
	F	35	35	0	26	4	15	0	15	0	0	0	0	0	23	6	23	5	23	0	0
45-54	M	32	32	2	20	4	13	1	13	4	0	0	0	0	22	9	22	9	22	1	0
	F	75	72	4	22	5	12	0	12	3	0	0	0	0	24	1	24	1	24	0	1
55-64	M	61	61	3	13	5	11	1	11	6	0	0	0	0	17	1	17	5	17	0	0
	F	58	56	6	15	2	4	1	4	2	0	0	0	0	17	3	17	3	17	0	0
65-74	M	76	76	2	1	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0
	F	103	103	4	0	0	0	0	0	0	0	0	0	0	6	2	6	0	6	0	0
75+	M	76	76	1	0	0	0	0	0	0	0	0	0	0	1	0	1	1	1	0	0
	F	238	238	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTALS		803	794	33	140	31	84	4	84	19	0	0	0	0	150	26	150	40	150	1	1
Total Persons referred											154										
<u>Screened Totals</u>																					
Male		286	282	9	71	18	48	2	48	12	0	0	0	0	74	14	74	31	74	1	0
Female		517	512	24	69	13	36	2	36	7	0	0	0	0	76	12	76	9	76	0	1

End of Report