

2003

ANNUAL REPORT
OZAUKEE COUNTY
PUBLIC HEALTH DEPARTMENT
2003 FULL ANNUAL REPORT

OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT

January 1 thru December 31

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

Dear Ladies and Gentlemen,

One does not have to look very far to realize the vast public health challenges facing our country and our world today. The year 2003 presented another year of new challenges and achievements for public health in Ozaukee County. The full report will follow this brief introduction of some high points that occurred this year.

Though initiated in 2002, the health department in cooperation with state and national public health leadership, continued planning and developing a smallpox response plan and team. Considerable time was spent in planning and developing a volunteer vaccinated team from the health department to be part of the statewide Public Health Emergency Response Team (PERT) team. Ongoing training is essential to remain current with all preparedness plans.

2003 brought two new diseases. SARS (Severe Acute Respiratory Syndrome) developed in China and became a worldwide threat. Although there were no confirmed cases in Ozaukee County, five potential cases of SARS were investigated by health department staff. In the summer, Monkeypox was imported into Wisconsin from Africa by way of infected animals, and was seen for the first time in the western hemisphere. Two possible cases of Monkeypox in Ozaukee County were identified and investigated. The investigations into the possible SARS and Monkeypox cases were extensive and involved isolation of suspect individuals, as well as, identifying and monitoring their contacts.

Water quality was addressed through two new grants. A DNR grant provided enhancement of the Beach testing program and an environmental grant from the Division of Public Health funded well water testing for total coliform bacteria and screening of nitrates and fluoride.

Through the consolidated grants the health department addressed three out of the four health priorities determined by the Board of Health from the 2002 community assessment survey.

This was the last year for tobacco funding for the Smoke free Tobacco Coalition formed in 1999. Ozaukee was one of seven health departments in the southeast region to have lost funds.

I want to thank each of the program managers for their contributions to this full report and to recognize all public health staff and members of the Board of Health for their hard work and professionalism working together toward our mission for a healthier and safer Ozaukee County.

This year, each department prepared an Executive Summary. This is located on the Public Health Web page at, <http://www.co.ozaukee.wi.us/PublicHealth/index.html>. The full reports are posted on the county Web page at <http://www.co.ozaukee.wi.us/AnnualReports/2003/Index.htm>.

The remainder of the report will summarize each of the programs offered through the Public Health Department and accomplishments achieved.

Respectfully submitted,

Glenda S. Madlom, Director / Health Officer

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OZAUKEE COUNTY PUBLIC HEALTH DEPARTMENT

2003

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- Mary Johnson Account Clerk Leann Tucker Home Health Aide
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- Wendy Schwab Office Assistant Lori Schmidt Home Health Aide
- Cindy Kapp Office Assistant / WIC

OTHER:

Carol Birkeland, WIC Director/Registered Dietician

**CSHCN=Children with Special Health Care needs *MCH = Maternal Child Health

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OZAUKEE COUNTY PUBLIC HEALTH

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, and assurance activities, as well as health education and evaluation to promote healthy outcomes in a community. Health outcome indices 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

Community ASSESSMENT of health risk factors and disease indicators in the community.

Evaluate data to identify risks and patterns of morbidity and mortality.

Evaluate health behaviors and patterns that identify potential people at risk.

Development of POLICIES to reduce health problems.

- a. Analyze assessment data to identify potential and actual health problems.**
- b. Collaborate with other community programs / services addressing identified health problems.**
- c. Develop health policies for the needs of children, families, groups and communities.**

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:

- Monitor health status to identify community health problems.**
- Diagnose and investigate health problems and health hazards in the community.**
- Inform, educate and empower people about health issues.**
- Mobilize community partnerships to identify and solve health problems.**

- Develop policies and plans that support individuals and community health efforts.
- Enforce laws and regulations that protect health and ensure safety.
- Link people to needed personal health services.
- Assure a diverse and competent public health and personal health care workforce.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Research new insights and innovative solutions to health problems.
- Conduct research to seek new insights and innovative solutions to health problems.
- Foster the understanding and promotion of social and economic conditions that support good health.

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COMMUNICABLE DISEASE CONTROL AND INVESTIGATION

Chapter 252 of the Wisconsin Statutes and HFS 140 and 145

Immunization Program and Clinics:

The Meningococcal vaccine was well accepted as one of the newest vaccines offered by the department starting in 2002. In cooperation with area high schools, information letters to promote Meningococcal vaccination for those attending college were disseminated to high school seniors in spring of 2003. The letters and newspaper advertising helped to encourage the vaccination of 103 persons either attending college, traveling to endemic areas or entering the military.

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

About 2,600 people develop Meningococcal disease each year in the U.S. 10-15% of these people die, in spite of treatment with antibiotics. Of those who survive

the illness, another 10% may lose a limb to amputation, become deaf, develop problems with their nervous systems, become mentally disabled, or suffer seizures or strokes.

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

College students, especially those living in dormitories.

Laboratory workers routinely exposed to Meningococcal bacteria.

Those who should be vaccinated are:

Anyone traveling to, or living in a part of the world where Meningococcal disease is common, such as West Africa.

Anyone who has a damaged spleen, or whose spleen has been removed.

Anyone who has terminal complement component deficiency (an immune system disorder).

U.S. military recruits.

People who might be affected during an outbreak of certain types of Meningococcal diseases.

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

In September 2001, Pneumococcal Conjugate Vaccine (Prevnar) began experiencing shortages resulting in limited supplies. The shortage of supply came to an end in early 2003. Waiting/mailling list postcards were mailed to consumers and vaccination has returned to the previously recommended childhood schedule of four doses received by the age of two.

After joining the Wisconsin Immunization Registry (WIR) in August of 2000, the health department has continued to receive a positive response from the community for using this service. The registry was developed by the state of Wisconsin to centralize immunization records, to use as a tool to keep children on schedule for recommended immunizations and to record all immunizations children have received from all providers. This database will assist the department by keeping immunization records up to date, tracking our vaccine inventory and help halt unneeded vaccinations because of missing records. The latest 2003 state statistics show the registry holds 2.8 million clients with over

19.8 million immunization dates. There are currently over 800 organizations providing data, both public and private. Over 2400 schools have signed on for limited access to assist parents in updating their schools with required vaccination dates. The state continues to update the program and eventually would like to provide parents access to their child's record through the Internet.

Three communities assisted us in providing sites for our five regular immunization clinics. A special thanks to the Cedarburg American Legion Post and the Mequon Police for use of their buildings for our 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 and WIC clinics.

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

Vaccine Type 2002 2003 Increases

Injected Polio 243 298 55

DTaP 290 355 65

Td 153 50 355

MMR 186 206 20

Hib 13 21 8

Hib/Hep B 144 167 23

Hepatitis B (0-19 yrs) 276 185 -91

Hepatitis A – Adult 66 64 -2

Hepatitis A – Child 23 28 5

Meningococcal 2 103 101

Pneumococcal Conjugate (Pevnar) 104 221 117

Varicella (Chicken Pox) 99 76 -23

TOTALS 1,599 2,232 633= 28% Increase

Clients Immunizations % Change of
Immunizations

Served 2003 Given in 2003 Given from 2002

Cedarburg Site: 127 261 -13.60%

Mequon Site: 135 274 +34.00%

Port Washington 2-5: 246 541 +09.70%

Port Washington 3-6: 339 837 +28.60%

Office: 312 455 +70.50%

Other Sites: 200 235 +00.50%

(Work sites, Health Screenings, etc.)

School Immunizations Audit 12/31/2002 Audit 12/31/2003

Cedarburg 99.37% Completely Immunized 97.22% Completely Immunized

Grafton 99.60% Completely Immunized 99.24% Completely Immunized

Mequon-Thiensville 99.40% Completely Immunized 99.64% Completely Immunized

Northern Ozaukee 98.41% Completely Immunized 99.20% Completely Immunized

Port Washington 98.57% Completely Immunized 98.10% Completely Immunized

-Saukville

HIV Partner Referral Program:

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

Communicable Disease Investigations: (Exhibit I)

2003 was a busy and unusual year for communicable disease investigations. 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 actions to prevent the spread of infection 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.

Two new infectious diseases were seen in Wisconsin during the last year. SARS (Severe Acute Respiratory Syndrome) is an entirely new disease that developed in China and became a worldwide threat last winter. Although there were no confirmed cases in Ozaukee County, five possible cases of SARS were investigated. In the summer, Monkeypox was imported into Wisconsin from Africa via infected animals, and was seen for the first time in the western hemisphere. Two possible cases of Monkeypox in Ozaukee County residents were identified and investigated. The investigations into the possible SARS and Monkeypox cases were extensive and involved isolation of suspect individuals, as well as identifying and monitoring contacts of the suspected cases.

Some of the most commonly reported diseases are the intestinal infections that can be caused by such organisms as E.Coli 0157, salmonella, campylobacter, cryptosporidium, giardia and others. An important piece of any investigation is evaluating whether the person is active 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. Ozaukee County was involved in the follow-up investigation of an outbreak of salmonella associated with food served at a country club. Many Ozaukee County residents were exposed and infected.

Please review Exhibit I for statistical data.

Tuberculosis Preventive Treatment Program:

There were three cases of active tuberculosis (TB) reported in 2003. However, two of these cases were subsequently determined to be diseases other than TB. The health department investigates and does follow up on all suspected cases until they are proven to be free of TB.

The Public Health Department also provides medication for latent TB infection to persons who may have a positive skin test, but have negative chest x-rays and do not have active tuberculosis. These individuals show signs of exposure to TB, but have not developed infectious cases. In order to prevent them from developing into 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 potential side effects at each visit. There were 8 clients who received this service in 2003.

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

Animal Bites/Rabies Testing:

Some animal bites pose the potential to transmit rabies to humans. When such cases are identified, the animal may need to be tested for rabies. The testing is performed at the Wisconsin State Lab of Hygiene in Madison. The Ozaukee County Public Health Department's role is to assist in coordinating the testing with local animal control officers, local veterinarians, and the lab. A nurse also contacts the bite victim, and offers recommendations about appropriate medical follow-up, and updating vaccines. The following chart shows two years of data. Please note that the number of animal bite follow-ups doubled in the last year.

	2003	2002
Cat	22	14
Dog	10	3
Cow	1	1
Horse	1	1
Ferret	0	1
Bat	3	0
Raccoon	2	0
Woodchuck	1	0
Total	40	20

Influenza and Pneumonia Program:

Every year the influenza season offers challenges. This year several problems were identified with the original vaccine purchase order. First this vaccine was meant for individuals 4 years and older and second the vaccine was to be shipped in mid to late October. This would have delayed the start of our distribution of the flu vaccine to high-risk individuals in the county, and we would have to find another vaccine for children under four years of age. A different manufacturer was identified. A reasonable price was negotiated from this manufacturer and the vaccine was received within a reasonable time frame. This vaccine also covered individuals six months and older.

Once the flu clinics began they operated rather smoothly, until there were reports of deaths of young children in other states. Families with young children became very interested in receiving the flu vaccine and our clinics became very busy. This year, ACIP recommended that healthy children between the ages of 6 to 23 months of age should receive the vaccine. Most of these children have never been immunized before and required two doses of vaccine one month apart.

Our influenza program continues to serve individuals at senior meal sites, senior residential housing, industries and schools in the county, as well as, many public clinics at bank, malls, and our regular scheduled immunization clinics. This year we offered individuals unable to attend one of our scheduled clinics, the opportunity to receive the flu vaccine at our office. Many people who were served in this capacity were very grateful for this convenience. At present, we are still continuing to immunize adults and children with their second doses. We will continue as long as vaccine is available. Due to the great demand, there became a shortage of vaccine nationwide.

SUMMARY FLU SEASON 2003

15 Open clinics for Flu/Pneumonia/Td

8 Regular immunization clinics (flu was offered also at these clinics)

6 Senior Meal Sites

28 Group Homes (CBRF) & Senior Housing Apartments

50 Industries

12 Private Schools

3 Public School Districts

1 University School (staff and open clinic for the Public (Health Fair))

	FLU	PNEUM	TD
INDUSTRIES	1211	35	158
GROUP HOMES	439	60	44
SCHEDULED FLU CLINICS	3444	215	197
SCHOOLS	867	15	37
REG IMMUNIZATION CLINICS	244	12	12
VOUCHERS	153		
MISCELLANEOUS	433	6	10
TOTALS	6791	343	458



MATERNAL CHILD HEALTH

Chapter 253 of the Wisconsin Public Health Statutes

Maternal and Child Health Programs (MCH):

2003, the MCH Program has continued to emphasize outreach and collaboration with community agencies and services in an ongoing effort to strengthen families in Ozaukee County. With the continued unemployment, uncertain economy, skyrocketing costs in medical insurance and tightening of the 2004 County budget, the need for assessment, referral and collaboration with other agencies becomes even more paramount in order to continue serving families of Ozaukee County.

All new birth households are mailed health care information on Healthy Start, WIC, Healthy Child Wellness Clinics, Immunization Schedules, local community resources and our Public Health Department Agency Brochure. A return postcard is included to receive monthly mailings of educational information regarding 'Parenting the First Year' and bi-monthly mailings for 'Parenting the Second and Third Year'. This is accomplished through the collaboration of the Ozaukee County Public Health Department and the UW Extension office. This information is now also available at www.uwex.edu/ces/flp/parenting. In 2003, a total of 320 families requested these mailings.

Postpartum Discharge Program:

This program is now in its eighth year and the largest of the six MCH Programs. SMO hospital and hospitals in surrounding counties work collaboratively to promote this program. This service is available to any one who lives in Ozaukee County and has delivered a baby. The majority of the referrals are high-risk families, first-time moms or those that are breastfeeding and have many questions. The educational folder given to families at the home visit is continually updated in order to include the most current information and resources. The information in the folders is made available with the assistance of the Family Preservation and Support Committee. This year, SMO expanded their physician base to include more of the Northshore area, which has resulted in an increase in referrals. In 2003, after compiling stats, it is apparent that the baby boom year of 2002 continued into 2003. The feedback from families receiving this service, including cultures such as Hispanic, Laotian and Russian, as well as physicians and hospital staff, have continued to be very positive.

The Public Health Department continues to be represented on the Ozaukee County Child Abuse Prevention Committee (CAP). This committee includes representatives from Ozaukee Council, the DA's office, Ozaukee Counseling Center, Department of Social Services, St. Mary's Ozaukee and Big Brothers-Big Sisters. In 2003, we again participated in Table Tents, a fourth grade project to strengthen families and improve communication. This was accomplished through the collaboration of businesses and schools in promoting the family unit. The Ozaukee County Public Health Department is involved in the blue ribbon campaign to increase awareness and prevention of child abuse. This year, the

Ozaukee County CAP committee teamed up with the Washington County CAP committee in order to strengthen partner's effectiveness and expand awareness of community resources. An additional group effort was a luncheon held to honor those dedicated to child abuse prevention in Ozaukee and Washington Counties.

Children With Special Health Care Needs (CSHCN):

This project is funded through the Division of Public Health – WI Maternal and Child Health Program. The target population is families with children with special health care needs. The long-range goal is to better coordinate delivery of special needs health care on the local level. Ozaukee County Public Health Department continues to work closely with grant administrators through Children's Hospital of Milwaukee. The most frequently seen diagnosis in 2003 continued to be that of prematurity and low birth weight. Many referrals came through birthing units at surrounding hospitals as a result of our Postpartum Discharge Program. Early intervention and referral to specialty services was possible due to the training of MCH nurses involved in this program. The Parent Liaison Program was developed in 2001 with two parents contracted to assist in outreach to schools and parents. They continue to be very active advocates to families with children with special health care needs as well as resources to the public health nurses. In 2004, CSHCN Program will be following the Consolidated Grant format for the first time as well as reporting information in the state SPHERE web based software program.

2003 Consolidated MCH Objectives:

In 2003, the MCH program tackled two identified areas of need for education of families through DPH Consolidated Grants. The first was in the area of childhood obesity in Ozaukee County. According to the 2002 Community Assessment, 59% of our adult population is overweight. The challenge was to find families at risk for obesity with children ages 3 thru 12 years. Ozaukee County Public Health Department developed a pilot program with nutrition education modules and interventions for participating families. The outcome of the program was demonstrated through an enhanced awareness; families showed an increased ability to make healthier food choices. Planning and program development was completed in collaboration with the University of Wisconsin Extension nutritionist, regional office nutritionist and local WIC nutritionists in Ozaukee and Washington County. This pilot program did not weigh, count calories or discuss food as "good" or "bad" food, but as "better food choices." With the use of Power Point presentations, hands-on participation, demonstrations and participants sharing with each other, a successful change was seen in these families. This topic will be ongoing in coming years until we learn how to effectively motivate adults and children with a resulting desire to change to healthy lifestyles and behaviors.

The second educational need was in the area of high-risk pregnancy. Data showed that in 2001, 69% of Ozaukee County Public Health Department antepartal high-risk clients did not participate in hospital-based prenatal classes prior to the birth of their infant. In the first six months of 2002 that statistic increased to 85%. As a result we developed a Pilot Program for those who were not medical assistance eligible. Program implementation included the one on one model for education and required participants to demonstrate at least two positive labor technique outcomes in a postpartum interview with a public health nurse. The Public Health Department worked in partnership with St. Mary's Hospital to identify resources, evaluate the program, share results and identify assistive teaching materials.

The two public health nurses who became Certified Breastfeeding Educators in 2002 were able to use this expertise in 2003 by working with public health staff and clients in managing mothers with breastfeeding concerns or problems. Increased breastfeeding resulting in optimum health of the child is one of the goals of Healthy People 2010. In the late fall of 2003, St. Mary's Ozaukee Hospital hired a part-time Lactation Consultant. This added partnership enhanced the success and transition to home for these parents with the added education and support of the Ozaukee County Public Health Department.

MCH Reporting system and Conversion to SPHERE:

For the year 2003, the MCH Data Base Computer Program was used by Ozaukee County Public Health Department in entering all daily activities for an entire year. This allowed for recovery of very specific data on demographics of clients and productivity of staff. The MCH program continued to fine-tune this data collection with training updates and feedback from staff. According to the MCH Database System, a total of 1,446 visit sessions were made to families in Ozaukee County in 2003. The following is a summary of the number of visit sessions under each of the specific MCH programs. A visit session is defined as one of the following: a home visit, office, telephone (being at least 15 minutes long,) clinic, community, worksite or other.

124 CSHCN (Children with Special Health Care Needs)

930 Postpartum Discharge (up to 60 days postpartum)

208 PNCC (Prenatal Care Coordination)

39 P.E. (Presumptive Eligibility)

63 Other Prenatal

82 Maternal Child Health Visit (after 60 days postpartum)

not available Postpartum Discharge (Medical Assistance)

This year, Ozaukee County Public Health Department expanded MCH data entry skills among all staff members. As 2003 drew to a close, the MCH Database was being converted to a windows-based program called SPHERE in order to be in compliance with federal requirements. This will enhance collection and analysis of data and assist us to determine areas of need in both service and education.

Presumptive Eligibility (PE):

This program offers Medical Assistance to eligible pregnant women in Ozaukee County. Ozaukee County Public Health (OCPHD) is the only Presumptive Eligibility provider in the county. As a result, women are able to obtain medical care on the same day that they apply. During the same visit an appointment for WIC services is made, a PNCC Questionnaire to identify risk factors is completed and referral to other community resources is provided as needs are identified. 2003 has showed continued growth both in number of referrals and in awareness of this service. Loss of the husband's job coupled with an unexpected pregnancy and no medical insurance or the inability to afford COBRA has become a more frequently seen need. This year, due to the continued decline in the number of OB/GYN providers in this county accepting new clients, more participant's sought out-of-county physicians for follow-up and hospital for delivery. Utilization of the State toll free number was a more frequent occurrence in 2003 in order to assist clients finding a physician.

The OCPHD has been a certified PE provider since 1999. The program is aimed at uninsured pregnant women whose income does not exceed 185% of the federal poverty level. Recipients found eligible, receive a temporary Medicaid certification that allows the pregnant woman to receive immediate pregnancy related outpatient services while her application for Healthy Start is being processed. This pocket of need continues to be addressed. Our mission and goal is to achieve healthy birth outcomes in the county's prenatal population. With the aim of this program being early prenatal care, this goal was again achieved in 2003. Out of the 34 clients we served, 81% of enrollees began prenatal care in the first trimester.

Prenatal Care Coordination

Prenatal Care Coordination (PNCC) is a Medicaid benefit that helps pregnant women and, when appropriate, her family obtain access to medical, social, educational, and other services related to the pregnancy. These services are available during the pregnancy through the first 60 days following delivery. These services include:

- **Outreach**

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

The goal of the PNCC benefit is to improve birth outcomes among women who are deemed at high risk for poor birth outcomes. The main objectives for obtaining this goal include ensuring that women at high risk:

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

In 2003, 85 referrals were received, 35 were in the first trimester---41%. Average gestational age for those completing the program was 39 weeks (40 weeks gestation is considered full term). 34 of the 85 referrals were women who also received P.E. services through our agency. This pocket of need has been identified in Ozaukee County and is being serviced by our agency.

Health Check Clinic:

Managed Health Services, an HMO in the County, requested the health department to partner with them to outreach to families with children 0-18 years of age to encourage them to participate in Health Check exams. This T19 program seeks for early intervention for health issues for children 0-18 years. Managed Health Services provided outreach efforts and the Health department completed the health assessments and referrals. 21 children participated in a one-day clinic and the health department was reimbursed approximately \$1200.00. The health department has provided Health Check Clinics in the past until about 1997.

School Screening Services: (Exhibit II)

Hearing, vision and scoliosis screening programs are conducted from September through January of the school year. Rechecks for vision and hearing are done

immediately onsite when initial screenings indicate a possible problem. When indicated, referrals are then made to physicians. Follow up is done after a referral is made to assure a physician has evaluated the child. In 2003, the Health Screening Technician assumed responsibility for all hearing and vision screenings, freeing the public health nurses to address other growing responsibilities.

Wisconsin passed a law in 2002-2003 academic year, stating children entering kindergarten in Wisconsin public schools will be encouraged to undergo an eye examination by an optometrist or eye evaluation by a physician. Students that are involved in scoliosis screening are boys in the 8th grade and girls in the 6th and 7th grades. Students are screened for scoliosis (curvature of the spine) and certain other spinal curvature problems. Rechecks of students suspected of having spinal curvature problems are done in all Ozaukee County School Districts by Board Certified Orthopedists who specialize in scoliosis. M.D Rotter and M.D Major volunteer their time and services. RN's will follow up after a referral is made to make sure the health care provider has evaluated the child.

The Scoliosis Program's brochures and processes are updated yearly to provide more recent educational material and improved screening technique.

During the 2003 school year, 1,832 children were screened for spine curvature. The referral rate to the health care provider is approximately .0185%. The following summarizes the 2003 school year:

Total Number Children Screened 1,832

Total Number Children Rescreened 96

Total Number Children Referred 34

Screening Programs for Early Childhood and Kindergarten Registrants:

The Public Health Department's nurses participate in the screening programs offered by the Cedarburg and Grafton districts. Screenings are for children that will be entering 5-year-old kindergarten or children that have been identified by their parents as having a possible delay in early childhood. 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 nurses offer resources that are available in the county. Nursing staff is also available to private parochial schools for these services at their request.

Women, Infant, and Children (WIC) Annual Report 2003

WIC is a special supplemental nutrition program through the Department of Agriculture for women, infants and children. This program links this population to health care and food assistance. Pregnant women, nursing mothers, infants and children are considered at risk because of malnutrition and low income. Today, WIC is recognized as the nation's premier public health program. This supplemental nutrition program continues to be offered to eligible Ozaukee County residents through a combined Washington / Ozaukee County WIC Program. A grant from State of Wisconsin totally funds the WIC Program.

In 2003, the WIC program issued 4013 food packages. The average client caseload per month was 336. 59% of the certified participants were considered high risk. The following is a breakdown by percentages of clients per program category:

25% were woman (either pregnant, breastfeeding or postpartum)

27% were infants under one year

48% were children ages one to five

WIC provides food vouchers, for specific foods, to women, infants and children who exhibit a nutritional risk and are financially eligible. 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 2003 WIC drafts generated \$195,192. Each participant receives a nutrition and health assessment. Lead screening and needed immunizations are offered to infants and children during their visit. This year, through Vaccine for Children Program, WIC participants between the ages of six months through 23 months of age were offered influenza vaccine through a targeted outreach initiative to increase influenza immunization in this age group. One hundred forty one WIC clients were contacted and given the opportunity to receive the vaccine at draft pick-ups or scheduled WIC visits. As of December 31, 43 children received the vaccine. We presently are continuing to offer the vaccine to eligible participants at clinic visits and draft pick -up while our supply lasts.

A public health nurse assesses every pregnant woman participating in WIC and provides pregnancy/parenting educational materials along with community resources. In 2003, there were 59 women assessed and offered services. Breastfeeding is promoted in WIC and was a specific grant objective this year. Our goal was to have 60% of pregnant clients certified to pledge to breastfeed for at least two weeks. In 2003, 76% of moms agreed to pledge to breastfeed their babies. Our WIC dietician and the public health nurses worked with these mothers to help make breastfeeding successful. Manual breast pumps were also offered to all WIC mothers at their postpartum recertification/assessment.

Another grant objective chosen by WIC is one of the many 2010 objectives that address nutrition and the problem of overweight/obese children in the United States. By December 31, 25% of the food packages issued to children ages 2-5 were to contain low-fat milk. We achieved 32%, thus surpassing our initial goal.

This year, the Farmer's Market Nutrition Program (FMNP) was again offered in our WIC program. Its major goal is to increase the consumption of fresh fruits and vegetables of WIC participants and improve the awareness and utilization of farmers markets in Ozaukee County. This year we had 16 farmers accepting drafts at the various farmers markets. Each family participating in the WIC program received \$2.00 and \$3.00 drafts that totaled \$20.00 to be used in the summer and fall farmer's markets. These drafts can only purchase fresh unprocessed Wisconsin grown produce. In 2003, WIC Farmer's Market drafts generated \$2270.00.

Healthy Child Wellness Clinic:

The program, previously known as Primary Care Clinic, 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. Families with a low income who do not qualify for Medicaid or BadgerCare also qualify. Families can be assisted in signing up 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
- Hearing and vision screening
- Immunizations are available and given as needed

- Counseling on illness prevention, good nutrition, injury prevention, parenting and discipline are offered.
- Referrals to other professional services as needed
- Clinics are held 8 to 10 times a year at the Health Department and services are provided by appointment.

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

Well Child 2003 Service Summary: In 2003, 35+ families accessed our well child services. 23+ new clients were served with a total of 63 office visits provided. The health department receives clients from a variety of sources including WIC, school programs, immunization program, friends/family, and St. Mary's Ozaukee Free Clinic for adults. We offer special thanks to our volunteer physicians, Dr. Daniel Hagerman, Dr. Beth Hagen. Dr. Carol Estill, and Dr. Lorraine Gauthier, who offered their services at our 8 scheduled clinics in 2003.

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CHRONIC DISEASE AND INJURY PREVENTION

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

Southeast Wisconsin Safe Kids Coalition:

This is a four county coalition created to reduce unintentional childhood injuries through educational, technical, policy and advocacy initiatives. Ozaukee, Waukesha, Milwaukee and Washington counties participate together to provide the educational and community programs to reduce injuries and mortalities to children. One of our MCH nurses continues to represent Ozaukee County Public Health Department in this coalition. She has been recertified as a Child Passenger Safety Technician, thus allowing her to help coordinate and participate in three car seat checks this year. She has also coordinated the Delivering Fire Prevention Program in Ozaukee County in October 2003. This education program is designed to educate families and the community on fire prevention and smoke detectors. Six fire departments participated in this program. During the event, 39 families were visited and 113 smoke detectors were tested. Of those checked, seven were

found not to be working. Another major event of this coalition was the Winners Wear Helmets Program. All four counties participated in the event to educate third graders on bike safety and to distribute a free bike helmet to all participants.

Cardiovascular Risk Reduction/Blood Pressure Control Program:

High blood pressure (hypertension) continues to be a major risk factor for both heart attacks and strokes. Referred to as the "silent killer", high blood pressure often has no symptoms. Screening programs can identify people with hypertension who were unaware of their problem.

The Ozaukee County Public Health Department conducts five FREE blood pressure screenings every month at different Ozaukee County locations – Cedarburg, Port Washington, Grafton, Thiensville and Mequon. FREE blood pressure screenings are also conducted at the Ozaukee County Fair and 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.

1,402 people participated in the Blood Pressure Screening Program in 2003.

Adult Health Screening (Exhibit III)

The Ozaukee County Health Department provides Adult Health Screening Clinics in an effort to detect and prevent chronic health problems. These clinics can include screening blood pressure, near and distance vision, visual field analysis, hearing, diabetes and cholesterol (total & HDL "good" cholesterol).

Screening Clinics are conducted at both public and private sites. Each site chooses which screenings to offer.

In 2003, public sites included the Ozaukee County Administration Center (Feb. & May), Northern Ozaukee School District (March), the Ozaukee County Senior Conference (June), Breakfast on the Farm (June), the Ozaukee County Fair (July-Aug.), Concordia University Health Fair (Nov.) and Manchester Mall the 3rd Tuesday of every month.

Private sites in 2003 included the Grafton School District, Ozaukee Bank Prime Time programs in Grafton & Cedarburg, Southern WI Lutheran Church Convention at Concordia University, and three Ozaukee County businesses/worksites.

An integral part of every screening is counseling by a public health nurse. All participants are given their screening results, informed whether their results are normal or not, and instructed what to do about abnormal results.

In 2003, a total of 1,521 people were screened and counseled. 385 of them were referred for follow-up medical care. Many of those referred for medical evaluation indicated they would not have known of their need without the screening program

2003 Consolidated Grant - Prevention Program Objectives:

The local needs assessment identified physical inactivity as an area of concern. To encourage Ozaukee County residents to walk more, the Health Department created "Walk for the Health of It" brochures for Cedarburg, Grafton, Mequon-Thiensville, & Port Washington. Each brochure has designated walking courses, local history, & lists healthy benefits of walking. 50 Ozaukee County residents newly committed to increasing physical activity through participation with the "Ozaukee County Walk for the Health of It" program.

A second objective, also based on the local needs assessment, addressed the need for men to get preventive health screenings. The Health Department distributed "Men's Health Packets" that contained: (1.) a pull tab card listing men's health screenings, their purpose, the age to start screening, and how often each screening should be done, (2.) a laminated shower card describing how to do a self testicular exam for cancer, and (3.) a wallet card to keep track of screening dates & results. Follow-up phone calls indicated the packets were successful in getting men to seek health screenings. As a grant outcome, 30 Ozaukee County men ages 45 or older received at least one additional preventive health screening as a result of education and counseling regarding the need for prostate, colon-rectal and testicular cancer screenings.

Wisconsin Well Women (WWWP):

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

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

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

Tobacco Control Initiatives:

The Ozaukee County Smoke Free Coalition met monthly working with the Ozaukee Council, Inc to assure completion of the Tobacco Control Board's grant objectives and to increase public awareness of the dangers of tobacco use and environmental second hand smoke. Under the coordination of Sue Marten, Tobacco Coordinator, the following objectives were achieved.

- 15 Ozaukee County youth leaders demonstrated an increased knowledge in clean indoor strategies.
- A three-year tobacco control plan was developed and ratified by the Ozaukee County Tobacco-Free Coalition membership.
- 300 residents of Ozaukee County newly committed to become active participants with the Ozaukee County Tobacco-Free coalition in the implementation of a smoke-free environment public policy campaign.
- 25 employers demonstrated an increased knowledge of the benefits of workplace smoke-free policies.
- 20 physicians and dentists signed on to publicly advocate in support of smoke-free environments.

Due to state budget cuts, the 2004 tobacco funds were reduced for funding local coalitions. Ozaukee County was one of seven health departments in the southeast region that lost their funds to continue the work of the coalition and tobacco coordinator.

Indeed, both the Ozaukee Council and the Health Department will continue to address the Board of Health's appointed health priority, to reduce tobacco use and second hand tobacco exposure.

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ENVIRONMENTAL HEALTH SERVICES

Chapter 254 of the Wisconsin Public Health Statutes

Environmental Health Specialists (EHS):

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 Board of Health, grant writing, assisting nursing staff with the follow up and investigation of food and waterborne disease outbreaks, and program development and implementation. 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 and the Health Department Emergency Planning Committee. The EHS continues to be a member of the County Emergency Management Level B Hazardous Materials Team.

Environmental Referrals:

This year, the Environmental Health Specialist addressed over 560 citizen environmental concerns, a 24% increase over 2002. 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.

Beach Monitoring Program:

From May through September, the EHS assisted the health department with a beach-monitoring program in Port Washington and at Harrington State Park. The health department teamed with city officials to sample and test the waters for a pathogenic indicator (E. coli) five days per week for sixteen consecutive weeks. In general, the percentage of samples which resulted in the posting of both closed and poor condition advisories were at; Hwy D Boat Launch and North Harrington beach 25%, South Harrington and Cedar beach 30% and Upper Lake Park beach 30%. The EHS regularly attended DNR Beach Advisory Workgroup meetings to discuss and share information relative to administration of this field program.

Well Water Mini Grant Objective:

The EHS provided assistance to the health department by writing a grant that provided the department with water analysis equipment. As a consequence of this grant, 18 citizens from each civil town received free well water screening for fluorides and nitrates and lab testing for total coliform bacteria. The results of these water samples indicated all sampled water supplies were bacteriologically 'safe', 96 % had nitrate levels below a level of health concern, and 57% were naturally deficient in fluoride levels. With the acquisition of this equipment, the health department now has the capacity to screen water for these chemical parameters on a walk-in basis.

Joint County Radon Screening Initiative:

In 2003, the EHS worked with the Washington County Public Health Department's EHS, to develop and market a home radon screening initiative. In total, both departments sold over 700 radon passive test kits. Ozaukee County Public Health Department staff sold over 350.

Ozaukee County Housing Initiative (OCHI):

Department collaboration with this citizen community group began in late 2002 on a fee for service basis. In 2003, the EHS conducted inspections in residential units that were scheduled to receive OCHI rehab grant dollars through the HOME consortium. Late in 2003, the executive members of OCHI requested that the Ozaukee County Public Health Department consider assuming administrative duties of their rehab grant programs. This request was discussed and later approved by the County Board of Health. These rehab grant programs will be implemented in the spring of 2004.

West Nile Surveillance:

As a follow-up to the state 2002 WNV bird surveillance activities which indicated that virus infected birds were present in Ozaukee county, the EHS did coordinate a countywide mosquito surveillance program in 2003. From June through September, participating private and public properties were monitored for adult mosquito populations to provide the department with a baseline of information on what species were present in the county, and in what relative numbers. These insects were also tested for the presence of the WNV. The Marshfield Clinic provided laboratory support for these surveillance activities and is in the process of reviewing all the data that was collected. That 2003 final report will be shared with municipal officials and citizens once it is received.

Childhood Lead:

The health department continues its effort to reduce childhood lead exposure and to identify children that have been lead poisoned. The department provides free blood lead screening to children ages six months to less than six years at WIC, Healthy Child Wellness clinics, and upon request. The total number of children screened in the county in 2003 was 512. This department screened 73 children or 14% of that total. Of the total number of children screened, two cases or less than 0.5% had levels of blood lead that would be a serious health concern. To all parents with young children, public health nurses and the environmental health specialists 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. Targeted case management 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 Public Health grant funding provided for the training and certification of local home improvement professionals in lead safe working techniques. Three area contractors completed the forty-hour training and became state certified and one contractor renewed his certification.

Bioterrorism Planning and Preparedness:

In September of 2003, the health department employed an additional full-time EHS with half of this position funded with grant dollars from the state bioterrorism program. This EHS coordinates homeland security issues, which include bioterrorism and other related emergency response type activities either man-made or natural. Besides assisting in on-going environmental health activities that the department now provides, this EHS will be a representative on the Quad Counties Consortium (QCC), a mutual aid organization including staff from Ozaukee, Washington, Sheboygan, and Fond du Lac counties. This involvement will act to foster communication between departments of county government, encourage the sharing of local resources, and coordinate area training events. Through the grant, the 24/7 capacity of each of the counties has been enhanced. We increased public health's local communication capacity with the purchase of four two-way radios, provided two Incident Command workshops for community partners in Ozaukee County, enhanced our supply of personal protective equipment, and increased our available resource materials. We have updated and consolidated our emergency contact lists and phone trees. The EHS has created a portable display board that provides information on the Quad Counties Consortium and other items of public health. The board will be set up at various locations for viewing. The EHS has collected and written information pieces for the QCC and staff on items such as, pager and radio use and Chronic Wasting Disease. Both EHSs have been trained as EPA 165.15 HAZMAT Technicians.

PUBLIC HEALTH NURSING AND HEALTH PROMOTION

Wisconsin Public Health Statutes

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

Community Assessment 2003

The State of Wisconsin Division of Public Health directs each county health department to perform a community assessment every 5 years. In 2002, the second health study was completed. Health priorities selected by the Board of Health after the 2002 Community Health Survey is as follows:

- **Overweight or obese adults and children.**
- **Alcohol and drug use.**
- **Tobacco use and environmental tobacco exposure.**
- **Preventive health screenings.**

In order to keep a pulse on activities being addressed and to celebrate successes in the community, we have asked our community partners to inform us of any in-process or completed programs/projects on a worksheet. A copy of the 2002 survey and this worksheet are available on our web page <http://www.co.ozaukee.wi.us/nurse.html>

In 2003, Aurora Healthcare, through a grant, conducted a community health survey in 40 communities in the southeast region. These surveys are pursuant to the Wisconsin Division of Health's priority, "Healthiest Wisconsin 2010". The study was conducted by JVK Research to gather information on the health practices and health-related behavioral risks of residents. Public distribution of current survey results is currently being discussed between Ozaukee Public Health and Aurora Healthcare and will be released early in 2004.

Health Care For Migrant Workers and Families:

The Migrant program addresses health needs of migrant workers and their families. Approximately 150 Latino workers and their families came from southern Texas to work in the cannery in Belgium and the produce freezing plant in Random Lake. Most workers lived in one of the two "migrant camps" in Belgium during their five-month stay in Wisconsin. They have low annual incomes; often have no health insurance, and minimal routine or preventive health care. Public health nursing services provided to the migrant population includes health teaching, communicable disease follow-up, assistance with scheduling medical care appointments and coordination of care with other community agencies.

There is a federally funded program for migrant workers outpatient health needs administered through Family Health Medical and Dental Center in Wautoma, WI. Public health nurses assist migrant workers to access providers who participate in a discounted voucher reimbursement program with this clinic. Primary care, specialty care, diagnostic testing, dental care, prescription medication, and many more outpatient healthcare needs are coordinated through a public health nurse for the migrant workers. State program immunizations and WIC services are also provided through the Health Department.

We would like to give special thanks to the following primary care providers who have been very generous in meeting the migrant worker's needs in Ozaukee County:

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

Community outreach to the migrant workers was increased this year through a community health fair sponsored by St. Mary's Parish Belgium. Public Health department nurses administered adult tetanus vaccines, provided health education, and coordinated other healthcare needs. The success of this event has led to the planning of an annual community health fair with St. Mary's Parish.

Home Care Program: (Exhibit IV)

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

Our unique approach to homecare service is holistic and provides quality health care. We work closely with the client's support systems to assure a safe home environment. Our mission is to improve or maintain our client's health through skilled intervention, personal care assistance, ongoing education and exploration of community resources.

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

Our department continues to outreach to community members and partners in an effort to increase awareness of our program. Our charges for services increased by 3% effective

January 1, 2003 to generate more revenue to support this program. We have also worked hard to streamline processes and utilize technology to improve productivity and decrease cost. The Home Care program had a 14% increase in patient caseload from 2002.

Nursing Student Preceptor Program:

The public health department participates in providing public health clinical experiences to nursing students. The public health department has contracts with seven nursing schools. Twelve students from Concordia University participated in the flu and immunization clinics in 2003. This year the senior nursing student enrollment was low. Next year, we anticipate a greater number of students to participate in the program.

Volunteers:

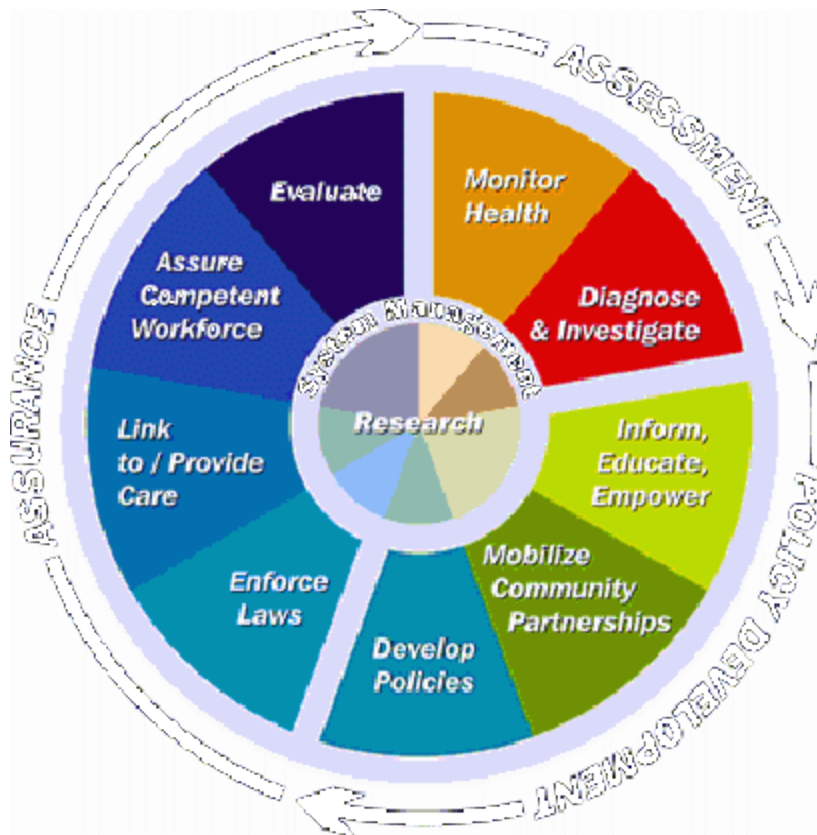
Our dedicated and caring volunteers made a difference in 2003. Our department programs benefited from the numerous hours and talents of our volunteers. In 2003, 402 volunteers donated 832 hours of service to the school hearing, vision, and scoliosis screening programs. Thirteen volunteers donated 330 hours at our blood pressure and adult health screenings; four volunteers donated 28 hours to our Wisconsin Well Woman Program activities; two volunteers donated 240 hours to our Children with Special Health Care Needs program and 20 volunteers donated 196 hours of service at our monthly immunization and flu/pneumonia clinics. Four physicians donated a total of 24 hours at our Healthy Child Wellness Clinics and two physicians donated 12 hours at our scoliosis re-screens. Volunteers provided a total of 1,662 hours of service.

A Public Health Nurse coordinates the Volunteer program with the assistance of clerical support staff. The individual program managers' train and supervise the many volunteers.

We sponsor an annual Volunteer Luncheon in the spring to show our appreciation to our volunteers for all their hours of service. We would not be able to provide valuable services to our community if our volunteers did not dedicate so much of their time and talents.

Public Health

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



CHARTS AND EXHIBITS FOLLOW BELOW

EXHIBIT I

COMMUNICABLE DISEASES OZAUKEE COUNTY 2003

	Fred/ Belgium	Port/ Saukville	Grafton	Cedarburg	Mequon/ Thiens	Total 2003	Total 2002
Blastomycosis						0	0
Brucellosis						0	0
Campylobacter	1	3	2	6	5	17	16
Cryptosporidium	1			1		2	5
E. Coli 0157 (misc)			1		1	2	6
Encephalitis						0	0
Foodborne Outbreaks						0	0
Giardia		1		1	4	6	4
Haemophilus influenza B.					1	1	1
Hepatitis A	1			1		2	6
Hepatitis B		1		1	5	7	12
Hepatitis C	4	14	3	4	10	35	39
H.I.V.						0	3
Legionairres						0	3
Listeria						0	0

Lyme	1					1	0
Malaria						0	0
Measles						0	0
Meningitis				1		1	1
Mumps						0	0
Non-tubercular Mycobacteria	1		1	5	9	16	9
Norwalk virus			1			1	---
Ova & Parasites (misc.)			1			1	2
Pertussis	1	1			2	4	0
Rubella						0	0
Salmonella	1		2	1	18	22	12
STD's: Chlamydia	3	9	3	3	4	22	7
Gonorrhea	2	1	1		2	6	2
Herpes		4	3	4	1	12	16
Syphillis						0	1
Shigella					2	2	4
Strep A (invasive)		1			2	3	2
Strep B (invasive)	1	1			1	3	6
Strep Pneumo. (invasive)	1	3	1			5	7
Toxic shock syndrome	1					1	1
Tuberculosis		1		2		3	3
West Nile Virus				1		1	0
MISCELLANEOUS:							
Monkeypox (investigation only-not confirmed)		1	1			2	0
SARS (investigation only-not confirmed)				1	4	5	0

TOTALS: 17 42 21 32 71 183 168

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EXHIBIT II

2002-03 **HEARING SCREENING** STATISTICS BY GRADE LEVEL

* EEN=Exceptional Educational Needs Children; ECH=Early Childhood

NUMBER OF STUDENTS	SCREENED	RESCREENED	REFERRED	TREATMENT RECOMMENDED
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<u>DAY CARE</u>	354	64	0	0
PRESCHOOL	596	99	12	4
*EEN, ECH	72	56	2	0
3K	103	29	0	0
4K	299	63	5	2
5K	814	151	12	9
1	762	82	8	7
2	1146	106	7	6
3	842	84	12	11
4	50	6	0	0
5	35	10	0	0
6	34	0	0	0
7	29	1	1	1
8	36	3	0	0
9				
10				
11				
12				
TOTAL	5172	754	59	40

2002-2003 **VISION SCREENING** STATISTICS BY GRADE LEVEL

* EEN=Exceptional Educational Needs Children; ECH=Early Childhood

<u>DAY CARE</u>				
PRESCHOOL	52	10	1	0
EEN, ECH	131	47	4	3
3K	35	5	2	0
4K	232	13	11	4
5K	1302	118	31	15
1	797	59	30	20
2	825	38	33	22
3	817	75	58	34
4	876	96	64	37
5	873	96	51	30
6	983	85	50	18
7	958	84	44	15
8	1024	68	49	14
9				
10				
11				
12				
TOTAL	8905	794	428	212

Key

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

"Rescreened" - HST will record actual number rescreened

"Referred" - RN will record number referred by letter to parent.

"Treatment Recommended" - RN will record number of children who actually saw a doctor or are currently under the care of a doctor.

EXHIBIT IV

2003 – OZAUKEE COUNTY

NUMBER OF HOME CARE CLIENTS

BY PRIMARY PAY SOURCE

Primary Pay Source	Number of Patients
Medicaid (Title 19)	25
Private Insurance	5
Other Fee Adjustment	27
Private Pay	12
TOTAL	69

**NUMBER OF HOME CARE_ADMISSIONS AND READMISSIONS BY
REFERRAL, SOURCE & SITE**

Referral Source and Site	<u>Visit Type</u>
	<u>Admission/</u>
	<u>Readmission</u>

Referred by:

Family, Friends, Neighbors, Self

21

Physician (Unhospitalized)	1
Hospital/Physician Referral for Hospitalized Cases	1
Social Services/Community Programs/Aging Dept.	12
Nursing Home	2
TOTAL Referrals	37

NUMBER OF HOME CARE DISCHARGES BY REASON AND DESTINATION

Discharge Reason or Destination	Visit Type Discharge
<i>Reason for Discharge:</i>	
Level of Care	8
Entered Hospital/Nursing Home	17
Death	3
Left Area (Moved)	2
Service Refused	4
TOTAL Number of Discharges	34

END OF REPORT

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