



CITY OF WAUWATOSA HEALTH DEPARTMENT
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City of Wauwatosa Board of Health Meeting Minutes
Tuesday, July 16, 2013 8:00 - 9:15 am
Wauwatosa Health Department Conference Room

Present: Nancy Kreuser, Chris Shaw, Bobby Pantuso, Lori Nielsen, Cheryl Davies, James Beix, Lisa Simonds

Excused: Leslie Martin, John Dunn

1. Call to Order- The meeting was called to order at 8:03 AM by Chris Shaw.
2. Approval of agenda: Motion to approve the agenda
 - Motion: Chris Shaw
 - Second: Bobby Pantuso
 - Motion carried unanimously.
3. Motion to approve the 5/21/13 Minutes <http://www.wauwatosa.net/index.aspx?NID=199>
 - Motion: Chris Shaw
 - Second: Bobby Pantuso
 - Motion carried unanimously.
4. Comments from the public – none
5. Comments from Board of Health – none.
6. New Business: Division Reports from Public Health Services
Administration: Nancy Kreuser, City of Wauwatosa Health Officer
 - Personnel updates – CHS Immunization Clinic pilot project grant is not being renewed. Our PT clerk to come back into the WHD office.
 - Wauwatosa Health Department Open House: July 16, 2013 from 11 a.m. – 1 p.m. An evening event will be held on 7/30 for Council and interested others
 - 2014 Budget – City looking at ways to reduce the tax levy. Nancy to scan and send the budget to the Board members when information becomes available. A slight delay. Budget training for city employees last week. Received personnel information yesterday. We won't take the allowed 2% for operations; no vacancies; no changes to budget other than planned accreditation.
 - Public Health Accreditation – WHD will discuss submitting a "letter of intent" after Labor Day. We will have one year to electronically load our documentation of evidence for the PHAB team to review. Our CHA (2011) is completed, and our CHIP (2013) is being finalized. We will review and update our 2010 WHD Strategic Plan—all 3 are pre-requisites to submitting a letter of intent. A PowerPoint presentation was conducted on Domain 12 (See attached). Discussion ensued about the governing entity's roles, responsibilities and documented actions (i.e. orders, annual reports, closures, STD trends, etc.

Actions will be tracked. More frequent meeting times will be needed between now and 12/2014. The following information was shared:

- PHAB Standards: An Overview <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-Overview-Version-1.0.pdf>
- PHAB Standards & Measures: <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>
 - PHAB Domain 11: Maintain administrative and management capacity
 - PHAB Domain 12: Maintain capacity to engage the public health governing entity

Public Health Nursing Division: Lori Nielsen, Nursing Supervisor

Communicable Disease (CD) Update: Lori Nielsen, Nursing Supervisor

SENTINEL EVENTS

Below is detailed information regarding each sentinel event:

Adult living facility respiratory outbreak #5074: On April 1, the WHD was notified of a respiratory outbreak at an adult living facility on 3 units. The trace back investigation identified symptoms in an individual beginning on March 20th. 29 residents became ill; 13 tested positive for RSV. Infection control measures including unit quarantine were implemented. The outbreak was resolved on May 15.

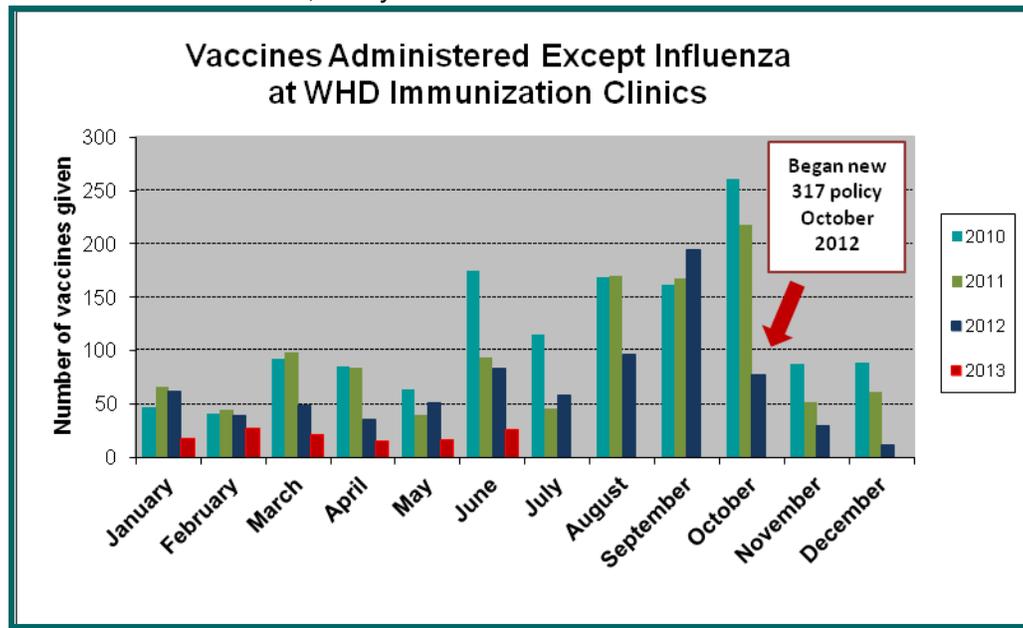
Healthcare facilities tuberculosis exposure #5075: On April 1, the WHD was notified of a healthcare provider (index case) working in Wauwatosa with active tuberculosis. Trace-back investigation determined that the index case was infectious beginning on December 28. Four Wauwatosa health institutions plus a health-related subcontractor were exposed. Over 605 staff, patients, and family members were exposed. In the first round of testing, 585 of the 605 (96.7%) identified exposed individuals have been initially tested. Six results were positive for latent tuberculosis infection (LTBI); none had active TB and are receiving prophylactic treatment. The second round of testing for most individuals began the last week of June. 92% (175 of the 191) of the high-risk exposures have had a second test. Two tested positive the second time; only one of the positive results was related to the healthcare exposure. 15 of the 40 'low-risk' individuals still need to be tested a second time.

Tuberculosis case #5077: On July 5, the WHD was notified of a positive tuberculosis sputum culture in an almost 99 year-old foreign born male. The individual was hospitalized in May for respiratory distress when the cultures were obtained; initial smear tests were negative. The individual will see a specialist later this week; the case is in isolation until further notice. Orders were issued yesterday, July 15. The investigation continues.

Other sentinel event investigations: In the past six months, other high-priority investigations which did not result in a confirmed case included bacterial meningitis, Hepatitis A, Mumps, salmonella typhi ("typhoid fever"), and carbapenem-resistant Enterobacteriaceae (CRE) in a healthcare institution.

Immunizations

Impact of 317 policy change: Due to the recent changes in federal funding, the WHD has not provided immunizations to children who are fully insured since October 1. The Centers for Disease Control and Prevention (CDC) define fully insured as “anyone with insurance that covers the cost of vaccine, even if the insurance includes a high deductible or co-pay”. This definition includes situations when immunization costs are denied for payment because the plan’s deductible was not met. The “high deductible” population accounted for most of the individuals seeking immunizations through the WHD clinics. Since implementing the 317 policy change in October, the WHD experienced a 59.2% decrease in non-flu immunization clinic activity. See graph below. WHD will monitor the effect of 317 policy changes on Wauwatosa immunization rates and waivers, if any.

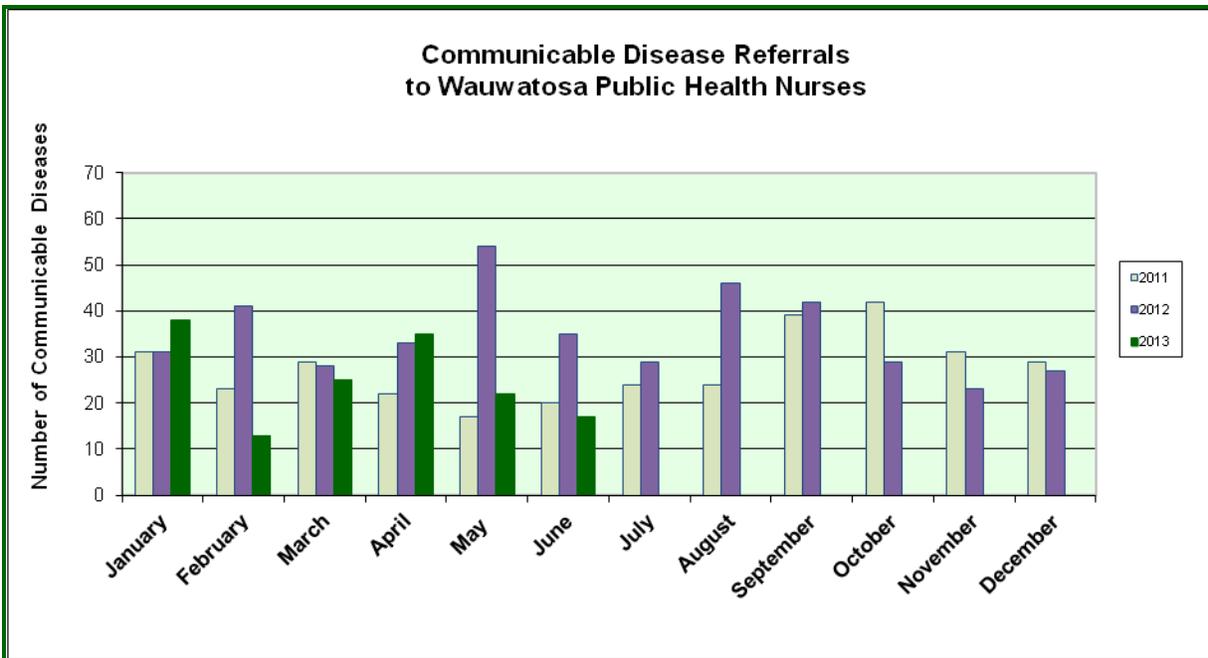


OTHER

Pertussis statewide outbreak: The number of statewide-pertussis cases is declining.

Sexually Transmitted Diseases (STDs): STDs continue to account for the majority of reported communicable diseases during 2013. With the staffing shortage, Chlamydia and Gonorrhea cases were currently a low priority.

Trends: See graph below for trends.



Healthiest Wauwatosa 2012 Programs and Initiatives Highlights:

Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) process:

- CHIP: Staff continues meeting with community partners to solicit and verify involvement in the five-year CHIP. WHD contracted with former WHD Specialist, Cindy Anderson, to write the CHIP.
- QIC: Quality Improvement Committees (QICs) are developed and modified the work plans; the QICs drafted and updated several departmental policies and procedures. Completed policies include:
 - Tobacco compliance checks
 - Alcohol compliance checks
 - Excessive heat advisories/warnings
 - Growth & development screenings
 - Rabies exposure
- Wauwatosa Breastfeeding Survey: WHD is conducting a retrospective survey on the breastfeeding practices of Wauwatosa mothers of two-year-olds. The survey process will continue into fall. It is similar to the breastfeeding survey conducted in 2010.

Alcohol, Tobacco, and Other Substances:

- Tobacco compliance checks were conducted on May 3. WHD secured grant monies to pay for the police overtime and student training. The results were:
 - 35: number of total checks attempted
 - 31: number of retailers that did not sell to underage volunteers
 - 1: number of retailers that does not sell tobacco products
 - 3: number of retailers that did sell to an underage volunteer, even after checking identification; all received a citation:
 - BP Gas Station, 11417 Watertown Plank Road
 - BP Gas Station, 11507 W. Blue Mound Road
 - Pick N Save, 1717 N. Mayfair Road

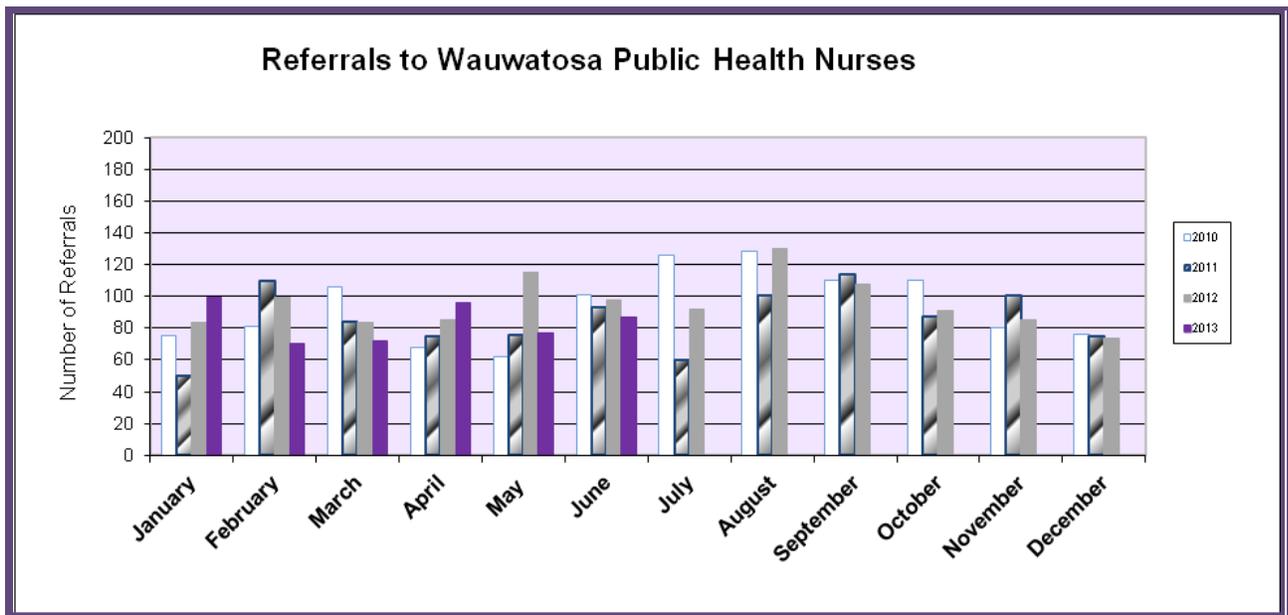
Injury & Violence Prevention:

- Home Safety Visits: PHNs continued offering and conducting home safety visits.
- Conducting outreach on injuries from furniture tipping.

Personnel: Much time was spent orienting the Public Health Specialist and the Public Health Nurses.

Public Health Database: The Program Tracker database continues to be in development; progress was slowed due to the staffing shortage and outbreaks. Much time was spent identifying and defining what is a referral / complaint for future tracking.

Access to Care: See graph below for trends.



Environmental Health/Preparedness Division: James Beix, Public Health Manager

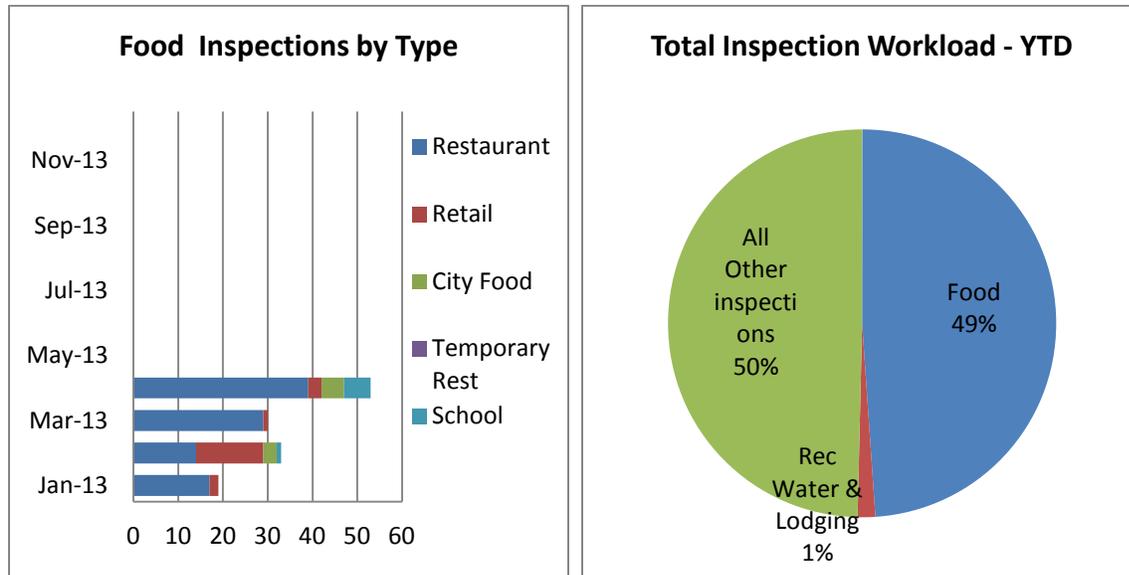
State Agent Inspection Program

Food & Soda Water Renewals – License renewals for the 2013/14 licensing year were mailed Friday May 17th. The licensed establishments have 6 weeks to renew their licenses. In addition to food licenses, WHD assumed responsibility for issuing soda water licenses. This was a natural progression since only food establishments are issued soda water licenses. Adding the soda water licenses required some troubleshooting from the database consultant, as a result the licenses were shipped out two weeks later than last year.

A Wauwatosa restaurant was ordered closed on April 3rd for evidence of a rodent infestation. The establishment was closed for 5 days while the establishment staff conducted cleaning and equipment replacement. The establishment also retained a pest management services to remediate the infestation. The establishment was allowed to re-open on April 8th. Subsequent inspections have shown no evidence or re-infestation and the establishment’s staff remains diligent in cleaning. WHD continues to receive status reports from the pest management company which indicate that the infestation has been controlled.

Upon receiving a complaint from the Department of Quality Assurance, a second Wauwatosa establishment, located on the Milwaukee County Grounds, was closed for operating without a license. After discussions with the operator, it is unlikely the establishment will reopen.

The Bigg's Roadhouse municipal court trial was April 15th. During the trial the owner of Bigg's Roadhouse questioned WHD's authority to issue citation immediately without giving them an opportunity to correct. Judge Baker asked Wauwatosa's legal representatives to demonstrate that WHD did in fact have immediate citation authority. Judge Baker upheld the City's authority and found Bigg's guilty on 2 of 3 citations issued.

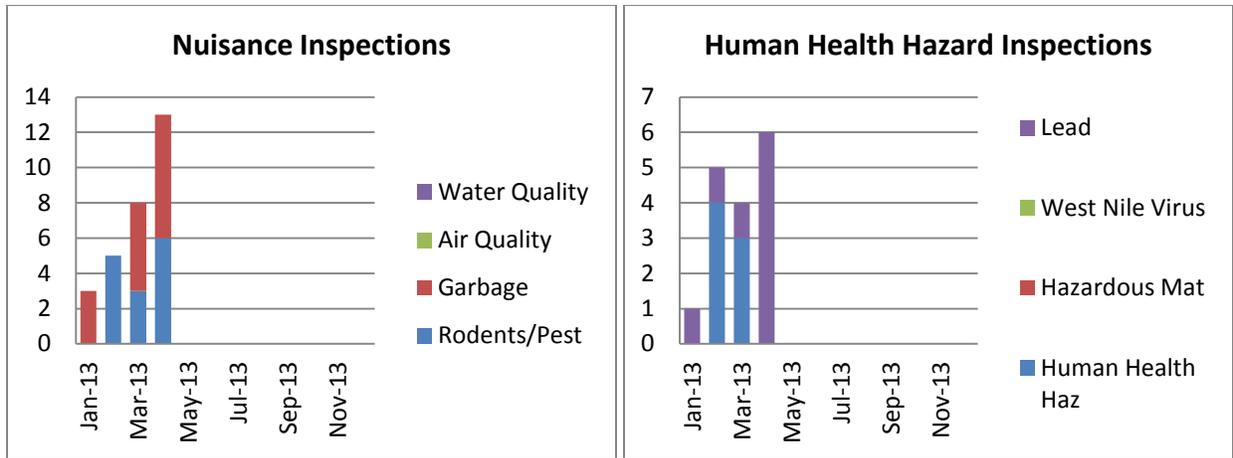


Nuisances/Human Health Hazards

Rodent and garbage complaints make up all of the complaints investigated by the WHD so far this year. WHD conducted 6 initial rodent inspections and 8 follow-up inspections to date. Over the same period of time in 2012, the sanitarians had already conducted 17 initial inspections, with 2 follow-up inspections. In 2012, the number of rodent complaints greatly increased in June and continued to see high levels of activity through October. WHD staff will monitor rodent complaints and quickly respond as needed for education of the homeowner.

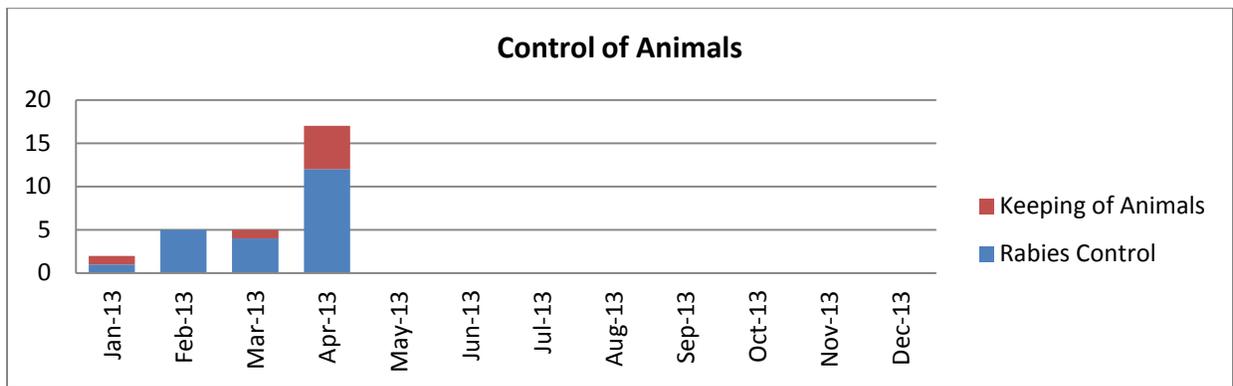
There has been no activity on our one open human health hazard issue. The resident is living elsewhere. Once the owner returns, WHD will continue its abatement efforts.

WHD recently administered one weatherization grant in which the property owner replaced 2 original construction external doors. A sanitarian was onsite during the installation to ensure the process was done in a lead (Pb) safe manner. Clearance Pb wipes were collected and tested prior to the contractor receiving payment.



Rabies/Animal Control Program

WHD issued 1 vicious dog declaration in April. The dog had previously bitten, but no declaration was issued because the owner paid the citation before the declaration could be issued. WHD, in coordination with the Legal Department, wrote a hold open letter stating that if the animal bites again, it would immediately be declared vicious. The owner understood the situation and is currently trying to find someone to remove the animal from Wauwatosa. WHD is working with the police department to ensure that future dog bite citations are designated with a mandatory court date. This will ensure that any future declarations will receive a court date to uphold any dangerous/vicious declarations.



Preparedness

Public Health Preparedness Grant

The 2012/13 grant year ends on June 30th. WHD will begin the final grant deliverable of completing 15 target capability surveys.

Cities Readiness Initiative

WHD staff participated in communications workshop on April 24th. The workshop was a precursor to a tabletop exercise revolving around regional communication issues during a public

health emergency. The tabletop exercise was conducted on May 15th and was the last objective requirement for the 2012/13 grant cycle. The after action report for the exercise will be issued within 30 days. WHD will review the after action report findings and, where applicable, use the recommendations to further enhance our response plans.

Tosa Area Preparedness Partners (TAPP)

The TAPP is a consortium of public and private Wauwatosa entities that meet to discuss emergency preparedness and collaboration opportunities. The private sector arm of the TAPP has representatives from hospitals, schools, long term care facilities and private industry members. The public sector arm has numerous City and Milwaukee County departments. The TAPP met on May 14th with the focus of the meeting on severe weather events. This venue has potential to be a powerful networking opportunity.

BioWatch

Wauwatosa will be receiving a BioWatch air monitoring unit in 2013. The entire BioWatch system was evaluated and optimized and it was determined that site in Wauwatosa would enhance the entire system. No operational burdens will be placed on WHD.

7. Advocacy/ Opportunities

- “Friends of the Wauwatosa Health Department” group - Item postponed until the next meeting

8. Old Business

- None.

9. Announcements

- PHAB e-newsletter link <http://www.phaboard.org/news-room/phabnewsletters/>
- Motion Carried unanimously
- **Next meetings:**
 - **September 17, 2013 8-9:15 AM, WHD Conference Room**
 - **November 19, 2013 8-9:15 AM, WHD Conference Room**
 - **January 14, 2014 8-9:15 AM, WHD Conference Room**

Motion to adjourn 9:05 AM

- Motion: Chris Shaw
- Second: Cheryl Davies

Recorder: lms



Domain A Month – May 6, 2013

Domain #12 *“Maintain Capacity to Engage the Public Health Governing Entity.”*

Purpose & Audience

- To increase familiarity with domains, standards and measures - encourage dialog and explore
- Intended audience Tribal/Local Health Departments
- Based on our best understanding of PHAB requirements at this time
- Not intended to explore fine detail of documentation
- For examples of documents, go to NACCHO, Public Health Accreditation Wisconsin, IWHI's Public Health Quality blog or other websites

PHAB Must Haves www.phaboard.org



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PUBLIC HEALTH QUALITY INITIATIVE

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Format for the Standards and Measures

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In this document, the PHAB Standards and Measures are preceded by the domain number and brief description of the domain. Standards are repeated at the beginning of each measure for easy reference. The chart below provides an example of the layout for standards, measures, required documentation and guidance for required documentation.

Standard: *This is the standard to which the measure applies.*

Measure	Purpose	Significance
<i>This section states the measure on which the health department is being evaluated.</i>	<p>The purpose of this measure is to assess the health departments . . .</p> <p><i>This section describes the public health capacity or activity on which the health department is being assessed.</i></p>	<i>This section describes the necessity for the capacity or activity that is being assessed.</i>

Required Documentation	Guidance
<p><i>This section lists the documentation that the health department must provide as evidence that it is in conformity with the measure.</i></p> <p><i>The documentation will be numbered:</i></p> <ol style="list-style-type: none"> 1. Xxx 2. Xxx <ol style="list-style-type: none"> a) xxx b) xxx 	<p><i>This section provides guidance specific to the required documentation. Types of materials may be described, e.g., meeting minutes, partnership member list, etc. Examples may also be provided here.</i></p> <p><i>This section will state if the documentation is department-wide or if a selection of programs' documentation is required.</i></p> <ol style="list-style-type: none"> 1. Xxx 2. Xxx <ol style="list-style-type: none"> a) xxx b) xxx



Featuring Linda Conlon

Director/Health Officer, Oneida County Health Department



Domain 12

Maintain Capacity to Engage the Public Health Governing Entity

Domain 12: Maintain capacity to engage the public health governing entity

Domain 12 focuses on the health department's capacity to support and engage its governing entity in maintaining the governmental public health infrastructure for the jurisdiction served. Governing entities play an important role in the function of many public health departments. Governing entities both directly and indirectly influence the direction of a health department and should play a key role in accreditation efforts. However, much variation exists regarding the structure, definition, roles, and responsibilities of governing entities.

A governing entity, as it relates to the accreditation process, should meet the following criteria:

1. It is an official part of Tribal, state, regional, or local government.
2. It has primary responsibility for policy-making and/or governing a Tribal, state, or local, health department.
3. It advises, advocates, or consults with the health department on matters related to resources, policy making, legal authority, collaboration, and/or improvement activities.
4. It is the point of accountability for the health department.
5. In the case of shared governance (more than one entity provides governance functions to the health department), the governing entity, for accreditation purposes, is the Tribal, state, regional, or local entity that, in the judgment of the health department being accredited or PHAB site visitors, has the primary responsibility for supporting the applicant health department in achieving accreditation.

DOMAIN 12 INCLUDES THREE STANDARDS:

Standard 12.1	Maintain Current Operational Definitions and Statements of the Public Health Roles, Responsibilities, and Authorities
Standard 12.2	Provide Information to the Governing Entity Regarding Public Health and the Official Responsibilities of the Health Department and of the Governing Entity
Standard 12.3	Encourage the Governing Entity's Engagement in the Public Health Department's Overall Obligations and Responsibilities

Your turn! Enter into the chat box a key verb or other key word or two that you see in these standards

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Standard 12.1

- Maintain Current Operational Definitions and Statements of the Public Health Roles, Responsibilities, and Authorities.



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Measure: 12.1.1 A

- Provide mandated public health operations, programs, and services
- Required documentation:
 1. Authority to conduct public health activities
 2. Description of operations that reflect authorities

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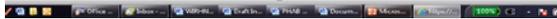
Measure: 12.1.2 A

- Maintain current operational definitions and/or statements of the public health governing entity's roles and responsibilities
- *Required documentation:*
 1. Authority of the governing entity
 2. Description of governing entity

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Measure: 12.1.2 A

11.08 HEALTH DEPARTMENT. (Rep. & rec. #19-98, Am. #55-2011)
(1) ESTABLISHMENT. The Health Department is and has been established pursuant to §251.02, Wis. Stats.
(2) LEVELS OF SERVICE; DUTIES. The Health Department shall meet the requirements of Level 1 as provided in §251.05(1)(a), Wis. Stats., and shall provide such additional services and shall have such additional duties as permitted by State law and as authorized by the Health and Aging Committee and, where required, approved by the County Board.
(3) GOVERNANCE. The Health Department shall be governed by the Health and Aging Committee which is appointed pursuant to § 2.40 of this General Code.
(4) JURISDICTION. The Health Department shall have such jurisdiction as is provided pursuant to §251.08, Wis. Stats.
11.09 HEALTH DEPARTMENT DIRECTOR. (Rep. & rec. #19-98, Am. #55-2011)
(1) DUTIES. The Health Department Director shall have the qualifications and duties as provided in §251.06, Wis. Stats., and as may be authorized by the Health and Aging Committee and, where required, as approved by the County Board.
11.13 COUNTY PUBLIC HEALTH ORDINANCE. (Cr. #22-86)
(1) GENERAL PROVISIONS. The purpose of this section is to prohibit, abate, suppress and prevent all acts, practices, conduct, uses of property and all other things detrimental or liable to be detrimental to the health of the inhabitants of the County.
(2) DEFINITIONS.
County Health Officer. The position of a local health officer in the Oneida County Health Department who meets the minimum qualifications set forth in Wis. Stats., §251.06 as they pertain to Oneida County. (Cr. #61-2003)
Health Committee. (Am. #55-2011) The Health Committee shall mean the County Health



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Standard 12.2

- Provide Information to the Governing Entity Regarding Public Health and the Official Responsibilities of the Health Department and of the Governing Entity.



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Measure: 12.2.1 A

- Communicate with the governing entity regarding the responsibilities of the public health department
- *Required Documentation*
 1. Two examples of communications provided to the governing entity regarding the responsibilities of the public health department.

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Measure: 12.2.1 A



AREA	RESPONSIBILITY	WHO IS RESPONSIBLE?
Long-term goals (2011-2015)	Assesses	Assessments and planning staff
Short-term goals (2011-2015)	Monitors	Epidemiology and control staff
Annual report and plan	Assesses	Epidemiology and control staff
Board meeting minutes	Assesses	Assessments and planning staff
Operational reports	Assesses	Assessments and planning staff
Budget	Assesses	Assessments and planning staff
Capital projects	Assesses	Assessments and planning staff
Departmental budgeting	Assesses	Assessments and planning staff
Performance of agencies	Assesses	Assessments and planning staff
Other matters	Assesses	Assessments and planning staff

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Measure: 12.2.2 A

- Communicate with the governing entity regarding the responsibilities of the public health department
- Required Documentation**
 - One Example of a communication with the governing entity about their operational definitions and/or statements of the public health governing entity's roles and responsibilities.

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Measure: 12.2.2 A



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Standard 12.3

- Encourage the Governing Entity's Engagement in the Public Health Department's Overall Obligations and Responsibilities.



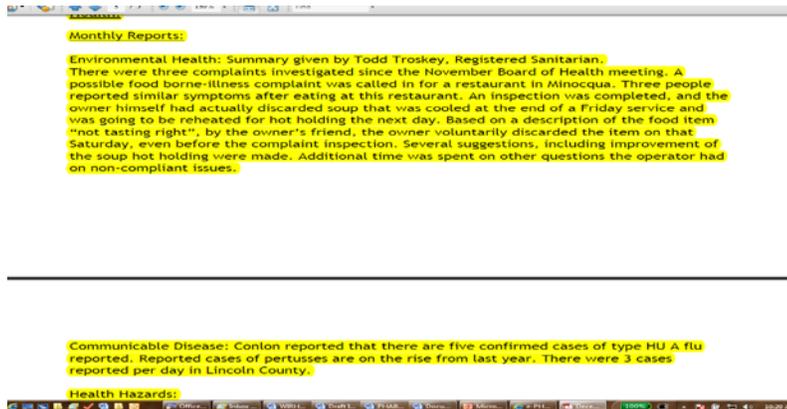
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Measure: 12.3.1 A

- Provide the governing entity with information about important public health issues facing the health department and/or the recent actions of the health department
- *Required Documentation*
 1. Two examples of communication with the governing entity regarding important public health issues and/or recent actions of the health department

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Measure: 12.3.1 A



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Measure: 12.3.2 A

- Communicate with the governing entity regarding the responsibilities of the governing entity
- *Required Documentation*
 1. Review issues discussed, actions taken, and policies set by the governing entity at least annually

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Measure: 12.3.2 A

Item	Start Date	End Date	Completion Date
1. All items identified on this log are discussed in detail in the minutes dated			
2. Environmental Health			
3. Approval of Recycled Tires	12-Apr		
4. Update on Appeal process for local body art facility	12-Apr	12-May	
5. Closure of spring in front of residence	12-Jul	12-Aug	
6. Homeos printed order for human habitation	11-May	11-Jun	
7. Health Issues	12-Oct	12-Nov	
8. Fall Risk	12-Oct		
9. Coalition Activity			
10. Linking Working Teams Update-6/2 and Transfer	12-Jan	12-Feb	12-Mar
11. Legislation			
12. AB 555 Family Care AB 55 AB 566/567/568	12-Feb		
13. Billing and Working Tools and PROV 51 construction	12-Feb		
14. Ordinance amendments to 2.20 Address review process	12-Mar		
15. OOD resolution to follow approval P&P	12-Mar		
16. 2012-2013 income needed for next house more than 1/2	12-Mar	12-Apr	
17. AB 237/238 37th Healthy Youth Act	12-Mar	12-Apr	
18. Billing and Working Tools Construction Policy	12-Apr	12-May	
19. AB 237 Pay Equity for Woman	12-Apr	12-May	
20. 2011 Revenue and Local 1111 various policy change	12-Jul	12-Aug	
21. CDC Accreditation	12-Feb		
22. Children update	12-Jan		
23. Reports/Plans			
24. 2012 Plan	12-Mar		
25. Community Health Plan Coalition update	12-Mar		
26. Department Informational Document	12-Jul		
27. Strategic Plan/BOC	12-Oct		
28. Accreditation			
29. Accreditation Update	12-Feb	12-May	12-Jun
30. Program Updates			
31. 2012 Plan	12-Jul		
32. Public Health Preparedness	12-Sep		
33. Tobacco	12-Oct		
34. Outbreaks			
35. 2012 Plan	12-Jul		
36. 2012 Plan	12-Jul		

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Measure: 12.3.3 A

- Communicate with the governing entity about assessing and improving the performance of the health department
- *Required Documentation*
 1. Two examples of communication with the governing entity concerning assessment of the health department's performance
 2. Two examples of communication with the governing entity concerning the improvement of the health department performance

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Measure: 12.3.3 A

Fee for Multiple Temporary Event Food Vendors: Temporary events regulated by the Department of Health Services currently have a temporary reimbursement fee of 25¢ for single events and 5.75¢ for two or more events per year. The Department of Agriculture will regulate food food vendors at a rate of 10¢ for each event. There is no fee for vendors if a vendor wants to participate in multiple events. They are required to pay the fee for each event. The Health Department is requesting that multiple temporary events fee of 25¢ per meal be added for food food vendors. This fee would benefit vendors that would like to go to multiple events in South County, making greater sales over than 5 events a year. Action by Board awarded by Staff to approve fee for multiple temporary event food vendors. Action complete.

LTC Staffing Scenario: Action made by Board, awarded by Cook to approve 2012 LTC staffing requests. Action complete.

Accreditation Update: Linda Carlson gave update on Public Health accreditation. The Health Department received \$12,000 to each research exception, with this grant, Linda was able to increase PHL's hours in order to prepare for accreditation. Data presented for Performance Management Plan that was completed, including the Performance Plan and the Strategic Plan, Q Plan, Community Health Plan, grant activities and performance standards and measures for the Health Department. She is waiting to have the complete Strategic Plan to the next meeting for approval. Plans are still in the works to meet for accreditation in the fall. Discussion only, no action taken.

Update on 2012 Community Health Plan: Linda Carlson presented the ADDH and Mental Health portions of the 2012 Community Health Plan. The Chronic Disease portion is still in process. Discussion only, no action taken.

Legislative Update: Linda Carlson stated that the budget is currently up in the air. Prevention will be cut 20% for next year. Linda will write the planning grant for the Chronic Disease Coalition. The focus of the grant is to build the coalition to work in implementing the community health plan. She will also write for the second part of the Accreditation grant if it becomes available. Discussion only, no action taken.

Relaxation Update: RRF to be in next month. Construction to begin mid to late September with the goal to be completed in December. The Health Department will make a move into the new building in January. The Department of Aging will move the end of December. Discussion only, no action taken.

Community Health Update: 1 Campbell watershed, 7 Berks/Wash, 11 Lyme, 1 Grandview, 1 G. Lake, 1 Champlin, 2 Jackson.

Health Impact Update: Summary given to Assistant Director.

- Three cases residence investigated for mold issues. Landlord notified and grant recommendations.
- Super Cache area investigated for emergence of small populations of pesticides. Referred to DNR.
- Foreclosed Harbor residence investigated for mold.

Project	Object Title	Plan Budget	Plan Complete
Public Health	Food Vending Study	10,000	10,000
Prevention	Food Vending Fee Study (P20), 10/1/12		
Prevention	Performance Management		
Prevention	PHL Accreditation		
PHL	Healthcare Update Status Form	41,000	41,000
PHL	Security System Upgrade	40,000	
PHL	PHL Core Time Study	41,000	41,000

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