



CITY OF WAUWATOSA HEALTH DEPARTMENT
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Board of Health Meeting Minutes
Tuesday, March 18, 2014 8:00 - 9:15 a.m.
Wauwatosa Health Department Conference Room

Present: Nancy Kreuser, John Dunn, Leslie Martin, Chris Shaw, Lori Nielsen, Cheryl Davies, Jim Beix, Lisa Simonds

Excused: Bobby Pantuso

1. Call to Order- The meeting was called to order at 8:02 AM by Chairperson, John Dunn.
2. Approval of agenda: Motion to approve the agenda
 - Motion: Chris Shaw
 - Second: Leslie Martin
 - Motion carried unanimously.
3. Motion to approve the 1/14/14 Minutes notes: <http://www.wauwatosa.net/index.aspx?NID=199>
 - Motion: Cheryl Davies
 - Second: Leslie Martin
 - Motion carried unanimously.
4. Comments from the public – none
5. Comments from Board, etc. – none
6. New Business: Division Reports from Public Health Services Administration: Nancy Kreuser, City of Wauwatosa Health Officer
 - *Personnel – Our Public Health Specialist resigned last fall and vacated this position in early January. The position had 3 people in the past 4 years. After thoughtful consideration, a decision was made to hire a part-time nurse for flexibility and distribute the community health reports and partnership duties across the rest of the staff. We plan to fill the position in June. The balance would be used for contractual services needed for high-level data analysis and technical report writing. Dr. Martin inquired about the salary difference. This is budget neutral.
 - Wisconsin DHS 140 Requirements of Local Health Departments pilot audit was conducted on 2/13/14. Most documents were uploaded to share point in advance of the visit. Dr. Dunn participated. There were 5 state/regional reviewers. Preliminary feedback is that the visit went well. The Mayor and Board of Health Chair will receive written notification. This is a 5-year compliance audit by the state of the statutes and administrative rules related to public health.
 - Accreditation: The draft 2014-2017 Wauwatosa Health Department Strategic Plan was completed and vetted by WHD staff in late February. The Plan incorporates the goal discussion by the board of health in a past meeting. Dr. Martin suggested a word change related to the PHAB domains versus the public health 10 essential services. Nancy reviewed the 2010 strategic plan progress and 2014-2017 plan contents Motion to approve the 2014-2017 Strategic Plan with proposed changes: Chris Shaw, Second: John Dunn. Motion passed unanimously. A resolution was signed. The plan will be posted to the website. This is the last of 3 pre-requisite documents for PHAB accreditation application scheduled for April or May 2014.
 - City of Wauwatosa Community Health Improvement Plan (CHIP) – The CHIP was conceptually approved in a past meeting. The final CHIP was completed. There was a

motion to approve the final draft. City of Wauwatosa Community Health Improvement Plan: John Dunn, Second: Cheryl Davies. Motion passed unanimously. A resolution was signed.

- Review of new/revised WHD policy and procedures (see attached)
 - childhood lead poisoning prevention
 - disease outbreaks: enteric, respiratory
 - professional license verification

Discussion ensued about lead levels (level, testing, re-testing, and outreach). The WHD is notified by the state of lead levels. Lori discussed enteric and respiratory outbreak policies, and license verification policy for RN and RS. Motion to approve the above-mentioned policies: Chris Shaw, Second: Leslie Martin. Motion passed unanimously. A resolution was signed.

- City of Wauwatosa Employee Performance Evaluation process changes were discussed. The electronic system NeoGov, is currently used for employee recruitment and hiring; City staff will be trained in March. The paperless system will be implemented in April 2014 for all employees. There are 5 leadership competencies for all employees and 5 technical SMART goals.
- The WHD is meeting monthly with Mayor Ehley and City Administrator Jim Archambo to communicate happenings in the public health and partner on City-wide initiatives. The last meeting focused on the CHIP document and contents and the Youth Risk Behavior Survey findings. Lori and Nancy attended.
- Financial updates: 2013 City audit March 10-27 – Auditors on site this month reviewing 2013. There were no findings against the WHD in 2012.

Public Health Nursing Division: Lori Nielsen, Nursing Supervisor

SENTINEL EVENTS

Below is detailed information regarding each sentinel event:

Healthcare facilities tuberculosis exposure #5075: On April 1, 2013, the WHD was notified of a healthcare provider (index case) working in Wauwatosa with active tuberculosis (TB). 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. WHD identified 669 staff, patients, and family members who were exposed to the index case. The first round of testing was completed in May. The second round of testing began the last week of June. To date, 645 out of the 669 individuals (96.4%) completed follow-up testing, thus closing those investigations. Twenty-four cases remain open due to the individual no longer working/attending the facility, complex medical situation, or have expired. Letters were sent to the local health departments to follow-up on the remaining open cases. No facility staff member, patient, or patient family member became infected; no additional case of active TB was identified. Six medical staff were positive for latent tuberculosis infection (LTBI) and are receiving prophylactic treatment; two or three cases were directly linked to this exposure. This extensive exposure prompted one organization to modify their employment policy and procedure regarding TB status. The last round of follow-up should be completed by the end of April.

Tuberculosis case #5077: On July 5, 2013, 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. On July 15th, the WHD issued orders to place the individual in isolation; the orders were lifted on August 5 when the individual completed the necessary treatment to be considered non-infectious. The initial Daily Observed Therapy (DOT) continued until September 15; the second phase of treatment included bi-weekly observed therapy until the end of January. Since the final testing revealed that the individual remained disease-free, then the WHD released the individual from any further treatment as of February 7, 2014.

Pertussis outbreak case #5079: On October 17, 2013, the WHD was notified of a student in a Wauwatosa school with pertussis. The case was investigated and contacts were notified. On October 29, the WHD linked at least 4 cases of Pertussis within a single school, therefore it was determined that

an outbreak existed. Additional contacts were identified. All school notices were disseminated on October 21, November 15, and December 20. Dozens of notifications were distributed to a sports team and music team. 14 cases were linked to the school. The investigation was resolved on January 28, 2014.

Pertussis outbreak case #5080: On December 3, 2013, the WHD was notified of 2 students in a Wauwatosa school with pertussis. The trace back investigation revealed a staff member with symptoms consistent with Pertussis as early as November 15. The cases were investigated and contacts were notified. School notices were disseminated on December 3. 5 cases were linked to this outbreak. The investigation was resolved on January 30.

Pertussis outbreak case #5083: On November 26, 2013, the WHD declared an outbreak of pertussis in a Wauwatosa school. The WHD was notified of the initial case on November 11 and linked a second case to the initial case on November 26. The cases were investigated and contacts were notified. Various school notices were disseminated intermittently between November 26 and December 16. 4 cases were linked to this outbreak. The investigation was resolved on January 27.

Adult living facility pneumonia cluster #5085: On December 18, 2013, the WHD was notified of a pneumonia cluster at an adult skilled living facility beginning on November 22. 3 out of the 4 cases had aspiration pneumonia. The WHD inquired if there was a common link with the aspiration pneumonia cases. The investigation was resolved on January 8 without an identified common source.

Adult living facility enteric outbreak #5086: On December 30, 2013, the WHD was notified of an enteric outbreak at an adult skilled living facility beginning on December 27. 14 residents became ill. Infection control measures including unit quarantine were implemented. Norovirus was the identified organism in 4 samples. The investigation was resolved on January 14.

Adult living facility enteric outbreak #5087: On December 30, 2013, the WHD was notified of an enteric outbreak at an adult assisted living facility beginning on December 28. 11 residents and 9 staff became ill; 6 out of the 9 staff were food workers. Infection control measures including unit quarantine were implemented. Norovirus was the identified organism in one of the samples. The investigation was resolved on January 30.

Healthcare institution Pertussis exposure #5088: On January 7, 2014, the WHD was notified of a Pertussis exposure at a healthcare institution by an employee. Exposure occurred between December 25 and January 6. The index case tested negative for Pertussis on January 1 but was declared an epidemiologically linked confirmed case on January 7. The employee floated between 2 units, exposing 20 staff. 25 patients from 12 jurisdictions including 3 from out-of-state were exposed; none from Tosa. Many of the exposed were infants. One secondary Pertussis case emerged from the index case. The investigation was resolved on January 28.

Healthcare institution Varicella exposure #5089: On December 23, the WHD was notified of a Varicella exposure at a healthcare institution. Exposure occurred on December 20 in the pre- and post-surgery units and the surgical suite. 20 patients from 12 jurisdictions including 4 from out-of-state were exposed and notified. All exposed staff were already immune. No secondary exposures were identified. The investigation was resolved on January 10.

Adult living facility enteric outbreak #5090: On January 11, the WHD was notified of an enteric outbreak at an adult skilled living facility beginning on January 9. 21 residents and 17 employees became ill. Infection control measures including unit quarantine were implemented. Norovirus was the identified organism in 2 samples. The investigation was resolved on March 7.

Adult living facility enteric outbreak #5091: On February 12, the WHD was notified of an enteric outbreak at an adult skilled living facility beginning on February 8. 5 residents became ill. Infection control measures including unit quarantine were implemented. Norovirus was the identified organism in 2 samples. The investigation was resolved on February 24.

Adult living facility enteric outbreak #5092: On March 7, the WHD was notified of an enteric outbreak at an adult skilled living facility beginning around February 25. To date, 53 residents and 29 employees became ill. Infection control measures including unit quarantine were implemented. Norovirus was the identified organism in 7 samples to date. The investigation continues.

IMMUNIZATIONS

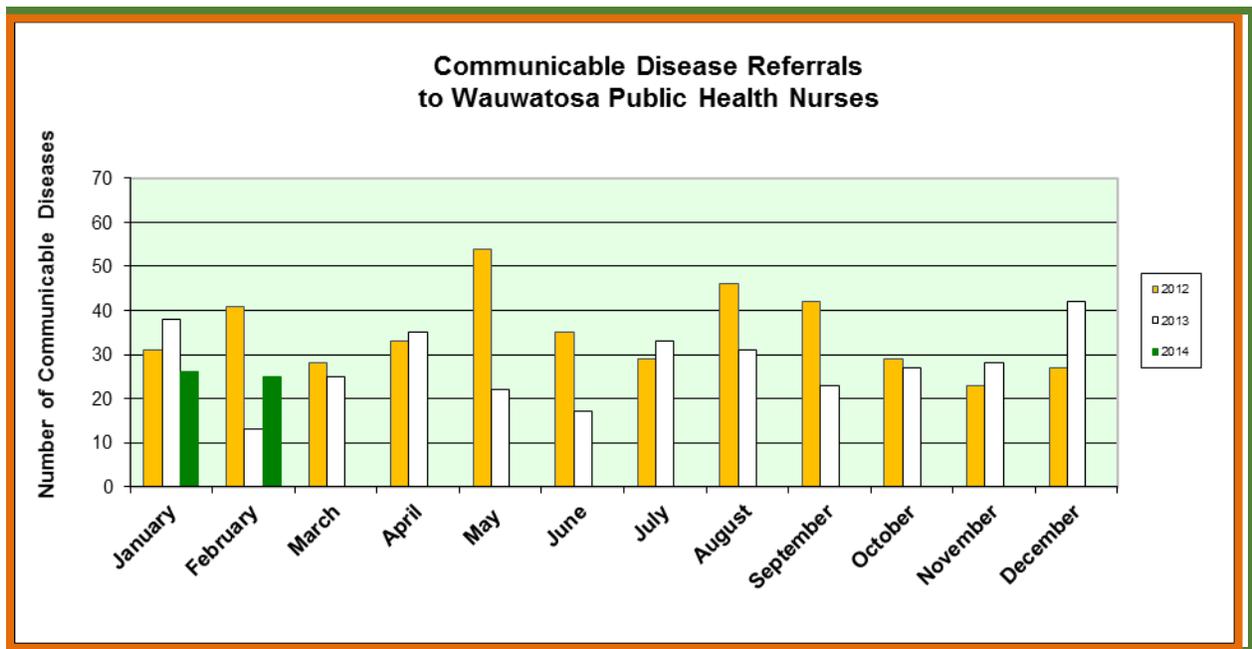
Flu Vaccine / Clinics: WHD began planning for the 2014-2015 flu campaign season. WHD will provide free children’s flu vaccine only at the 3 mass flu clinics in the fall.

OTHER

Pertussis statewide outbreak: The number of statewide-pertussis cases has declined for the year. However, Wauwatosa experienced an increased number of cases over the winter.

Sexually Transmitted Diseases (STDs): STDs continue to account for the majority of reported communicable diseases during 2013. However, Pertussis cases still continue in Wauwatosa.

Trends: See graph below for trends.



Healthiest Wauwatosa 2013-2014 Programs and Initiatives Highlights:

Quality Improvement (QI) Process:

- CHIP: CHIP is completed and reported on in the Health Officer’s Report.
- Strategic Plan: Discussed during the Health Officer’s Report.
- PHAB accreditation: Discussed during the Health Officer’s Report.
- QI: The overarching Health Improvement Committees (HIC) planned and conducted a day-long staff training on PHAB and QI process on March 14. See Retreat Agenda for topics covered.
- 2013 WHD Annual Report is in development. Final version will be available by the end of April.

Alcohol, Tobacco, and Other Substances:

- Tobacco compliance checks were conducted on November 2, 2013. WHD secured grant monies to pay for the police overtime and student training. The results were:
32: number of total checks attempted

28: number of retailers that did not sell to underage volunteers

4: number of retailers that did sell to an underage volunteer; all received a citation:

- 7/11, 11216 W. Blue Mound Road
 - Blue Mound Shell Gas Station, 10636 W. Blue Mound Road
 - Mobile Gas Station, 12331 W. North Avenue
 - Currie Auto (Citgo), 10745 W. Capitol Drive
- Next tobacco compliance check is planned for April.
 - Senate bill 440 (and the companion Assembly bill 762) seeks to exempt electronic smoking devices (ex: e-cigarettes) from the types of smoking devices that may not be used in certain locations. WPHA and WALHDAB oppose this legislation. Attached are the WPHA-WALHDAB talking points on electronic smoking devices.
 - Next alcohol compliance check is planned for May.

Injury & Violence Prevention:

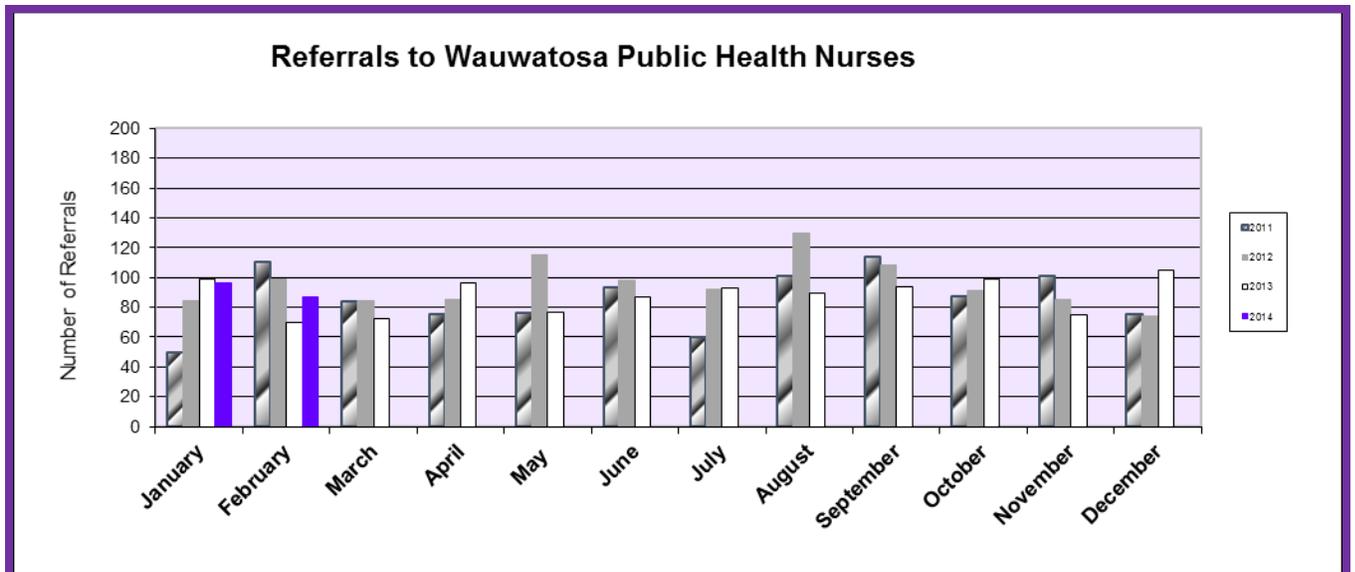
- Home Safety Visits: PHNs continued offering and conducting home safety visits. In partnership with the Wauwatosa Fire Department, the WHD submitted a joint application for training on the *Remembering When* fire protection/home safety visiting program. Selected applicants will be notified in April.

Access to Care:

- The Wisconsin Division of Public Health (WDPH) is restructuring the delivery of the Wisconsin Well Women Program (WWWPP), a program that offers low-cost cancer screenings for income-eligible women. Initial plans were to eliminate local health departments (LHDs) from coordinating the program and assign "health care systems" the coordination responsibility by mid-2014. The restructured program would continue until the end of 2015 when the effects of the Affordable Care Act will be determined. Due to the LHDs response, WDPH is rethinking the restructuring process.
- In partnership with Froedtert & Medical College of Wisconsin and the Milwaukee Enrollment Network, the WHD hosted a Health Insurance Marketplace Enrollment Event to assist individuals with enrolling into the Marketplace on March 6. 15 individuals were educated on the health enrollment options.
- During 2014, the WHD is conducting a pilot to provide limited programming and I&R outreach to individuals accessing the Tosa Cares program out of Mt. Zion Church. The first outreach session which included flu shots was on January 11. The second outreach session included healthy, low-cost food prep demos in partnership with Mt. Mary University dietetic students; the outreach was conducted on March 8.

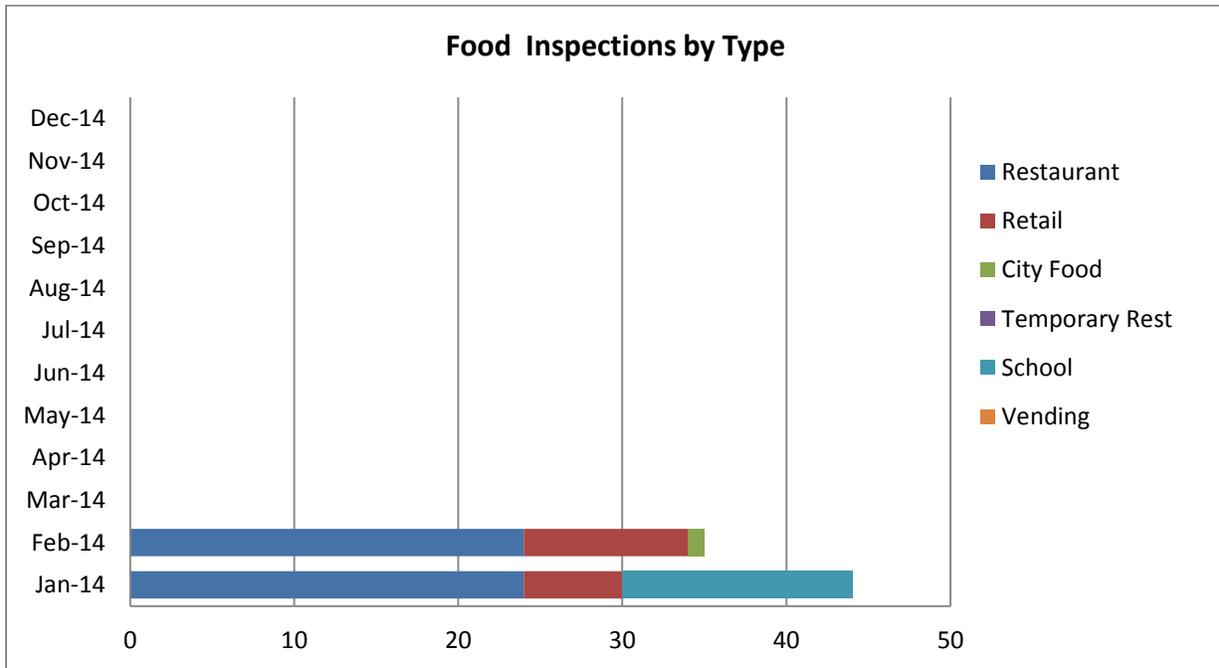
Other:

- Personnel: Staff continued orienting the Public Health Nurses.
- Public Health Database: The Program Tracker database continues to be in development.
- Breastfeeding Survey: WHD conducted a breastfeeding survey of moms who gave birth in 2011. The results were compiled and analyzed; results will be distributed at the next Board of Health meeting. WHD was selected for a poster presentation on the breastfeeding survey at the 2014 WPHA conference.
- Referrals to the public health nurse remain steady. See graph below for trends.



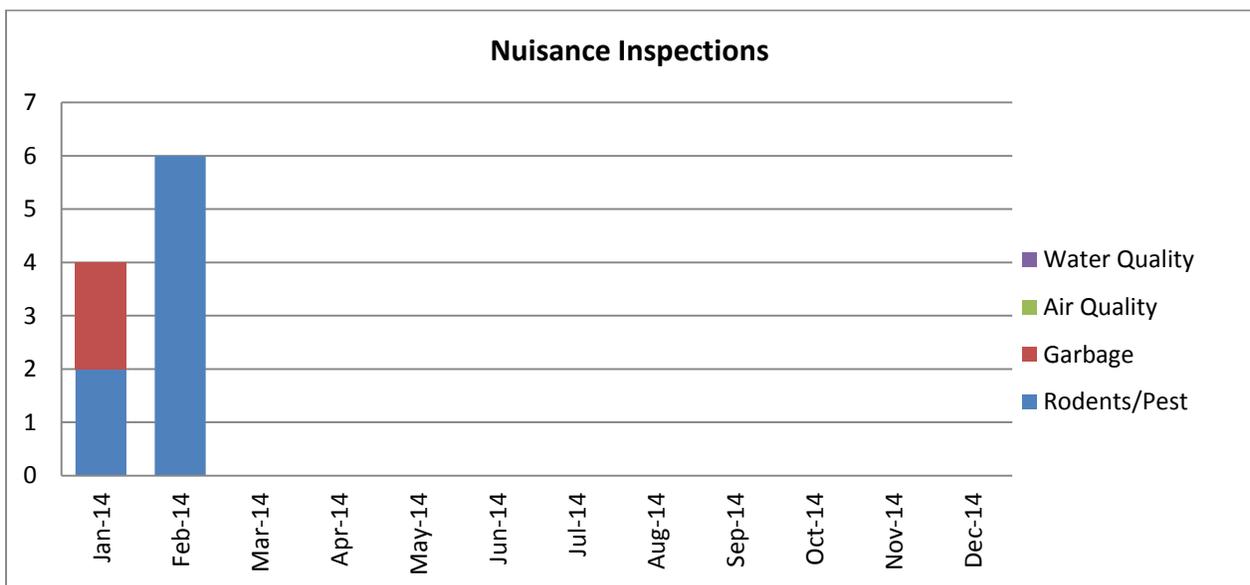
Environmental Health: James Beix, Public Health Manager

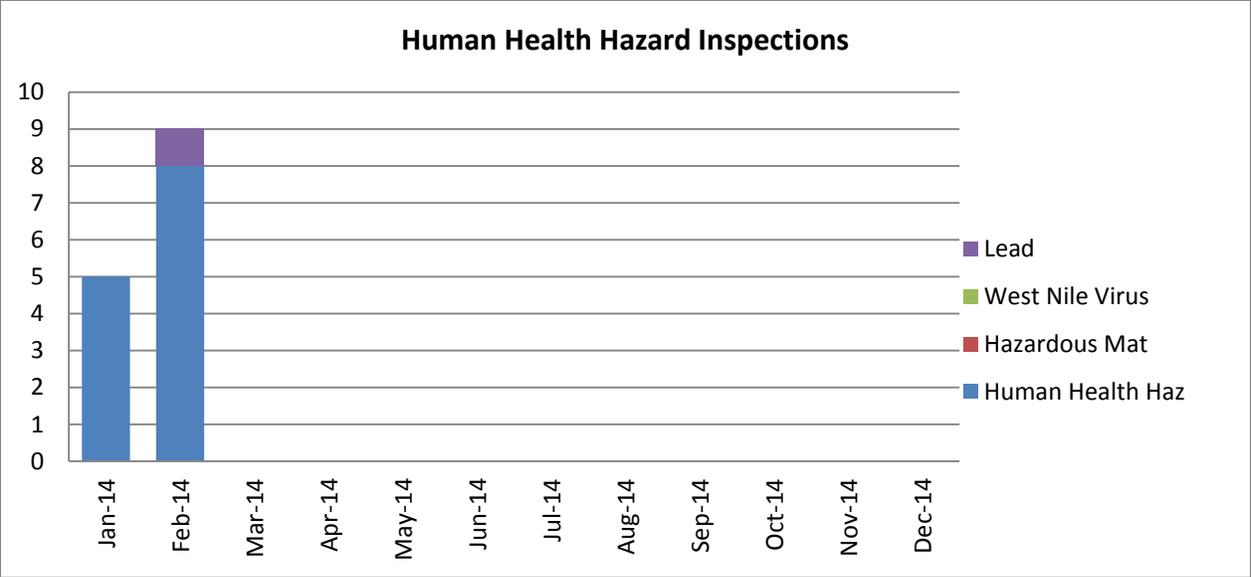
- Health Inspection Program Updates
- Licensing – Initial phases of the license-renewal season have begun. Record reviews and data cleansing is currently being conducted. Once that is complete, roster reviews will be conducted to ensure establishments are being invoiced for the proper levels of operation. Then the license renewal will be generated and ready for importation into the GEMS financial accounting software.
 - Inspections –Staff continues to work through our pending inspection log. Inspections are on schedule to be completed by the end of the licensing year
 - McDonalds on Burleigh and Mayfair had a number of issues at the last inspection which resulted in the WHD closing them until things were under control (temperatures; hand-wash sick access, demonstration of knowledge were some of the concerns. Citations were issued.
 - Maxfields had some temperature issues for the freezer which have since been remedied.
- The JS Online open records request filed late in 2013 with WHD to provide a copy of all our inspection database tables resulted in an agreement to provide weekly digital scans of inspections records. The WHD responded to the JS Online article regarding the misrepresentation of the open records law, the City's process and need for factual information. This letter was signed by Dr. Dunn and Dr. Kreuser. A follow up letter from the Wauwatosa legal department was co-signed by the Assistant City Attorney and Health Officer providing education and corrections related to open records law, health inspections, citations, and electronic databases.
- WHD staff responded to a call from the Fire Department concerning a fire at Juniper 61 (6030 W North Avenue. Orders were issued to discard contaminated food and single-service items as well as clean the affected areas and sanitize all food preparation areas before food service operations resumed.
- New establishments for the City of Wauwatosa and progress is listed below:
 - Picnic basket, West Blue Mound Road, Construction/Pre-inspection phase
 - ABB Cafeteria, Research Park, Construction/Pre-Inspection phase
 - Corner Bakery, Burleigh Triangle, initial planning meetings



- Nuisances/Human Health Hazards:**

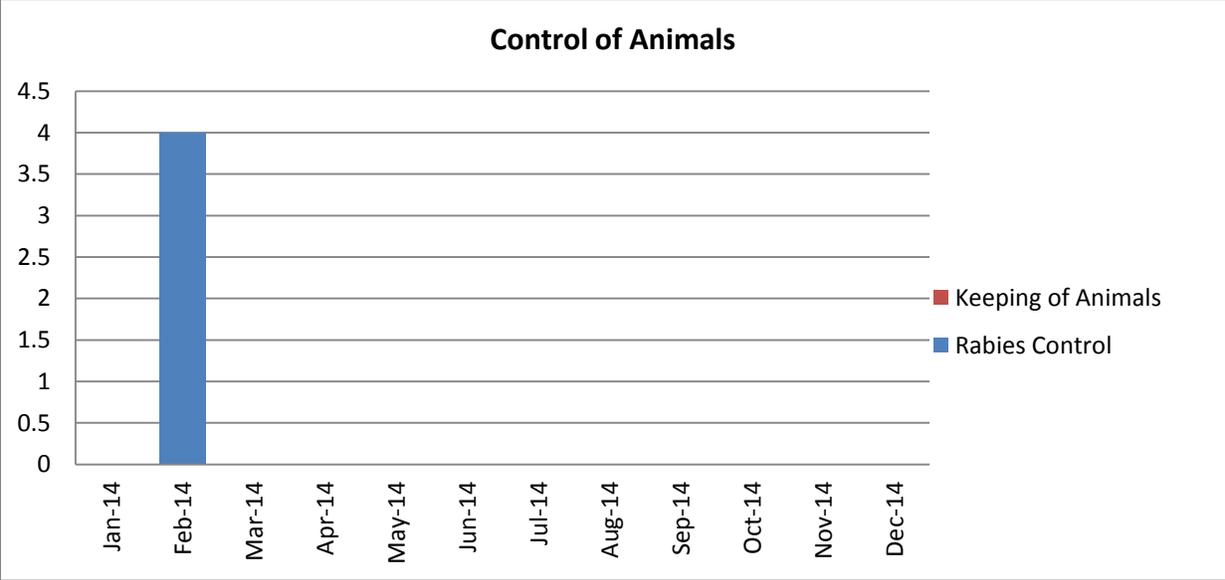
- Nuisance complaints consist mostly rodent and pests and remain active, the past two months WHD staff has conducted 8 inspection activities (initial investigations or follow-ups). WHD staff will continue to monitor and respond to complaints as they occur. With the spring thaw, season trends dictate that nuisance complaints will be active for the next couple months.
 - Orders to abate unsanitary conditions were issued for unsanitary conditions in a private residence. Accumulation of clutter and materials made the residence unsafe for the owners and emergency responders. A one-month variance was granted to allow the cleanup by out-of-town family members with interim measures in place. The WHD is coordinating with other governmental agencies to assure safety for the family who are currently not living in the home.





Rabies/Animal Control Program

- There have been four rabies exposure to date in 2014. Three exposure were bats found in buildings (2 private residents and 1 school) and one dog bite. One of the three bats, after interviewing the client one was determined not to be an exposure and the animal was surrendered to the Wisconsin Humane Society. The bat from an institution was tested for rabies and did not have the rabies virus present. And the bat was tested but results were indeterminate since the sample was damaged while attempting to capture the bat.
- Currently no rabies exposures are under quarantine or being considered for dangerous or vicious declarations.



Ordinance Update

- Beekeeping: The Common Council requested a memo from the Legal Department assessing the potential impact of changing Municipal Ordinance 9.08020, which regulates the keeping of bees, to include residentially-zoned parcels. The Legal Department reached out to the Health Department to assess the health and public safety aspects of this potential change. The memos are tentatively scheduled to be introduced to the Common council ordinance review process within the next month. See attached. Discussion ensued.

Preparedness

- Public Health Emergency Preparedness Grant (PHEP): The 2013/14 grant year began July 1, 2013 and ends June 30, 2014. The objectives this year will focus on Community Preparedness, Responder Health and Safety and Fatality Management. State preparedness groups are meeting to develop material to close identified gaps in local plans. Members of Local Health Departments in Milwaukee County are planning to meet with the Medical Examiner's office on April 1st to discuss mass fatality planning.
- Cities Readiness initiative Grant (CRI): The 2013/14 grant year is a continuation year with similar funding levels and objectives and deadlines as the PHEP. The CRI Tabletop Exercise will be held May 7th 2014. The next exercise design team meeting will be held December 6th at the Wisconsin Athletic Club on Watertown Plank Road.
- City Emergency Operations Plan (EOP) City WHD staff assisted the Wauwatosa Fire Department in the revision of the Health Department section of the in order to incorporate the Milwaukee County new Emergency Support Functions (ESF) model which replaces the Annexes. This will enhance our plans and become a template for other City departments. WHD staff will now begin reviewing and updating the mass sheltering sections of the City EOP.

7. Advocacy/ Opportunities

- Lori discussed upcoming legislation on electronic cigarettes, or e-cigarettes - 2013 Senate Bill 440)
- Lori discussed the changes to the Well Women Program and adverse impact on the clients who use these important detection services. The state did not inform health officers nor clients of the changes/discontinuation of services. Meetings were held and the next meeting is scheduled for 3/27. The City of Racine stepped in to coordinate services for the southeast region when the current coordinator resigned.
- Wauwatosa coordinated a room for area ACA Navigators for insurance enrollment prior to the 3/31/14 deadline. The target group is young adults. 3% of Wauwatosans are uninsured. The WHD for clients calling to inquire about the health care changes is to refer them to trained personnel and navigators for the ACA.

8. Old Business

- None

9. Announcements

- None

Next meeting May 20, 2014 8-9:15 am.

10. Motion to adjourn 9:15 AM

- Motion: Cheryl Davies
- Second: Chris Shaw
- Motion Carried unanimously

Recorder: Ims

City of Wauwatosa Health Department Memo

To: Eileen Miller Carter, Assistant City Attorney
From: James Beix, Public Health Manager
Date: February 26, 2014
Re: *Bee keeping in a suburban community*

Issue:

The City of Wauwatosa Common Council asked the Legal Department to review the beekeeping ordinance (9.08.020) to determine the impact of changing the zoning restrictions to include residential-zoned properties. The Legal Department consulted the Wauwatosa Health Department (WHD) to discuss health and safety concerns with this potential change.

Background:

The findings presented are based on literature searches. Trained entomologists have the subject matter expertise. The main concern of the WHD has to do with the portion of Wauwatosa residents that are sensitized or allergic to bee stings. For most people bee sting symptoms are mild. Moderate reactions may take a week or more to fully resolve. A small percent of the population will have a severe (anaphylactic) reaction to bee stings. These symptoms can be life threatening if medical attention is not immediately sought (Mayo Clinic, 2014). Approximately 100 people in the US die annually from bee stings (Boston Children's Hospital, 2014).

Repeated exposures to an allergen can have a cumulative effect. According to the National Institutes of Health, "Although first-time exposure may only produce a mild reaction, repeated exposures may lead to more serious reactions. Once a person has had an exposure or an allergic reaction (is sensitized), even a very limited exposure to a very small amount of allergen can trigger a severe reaction". Estimates for the prevalence of allergic reactions to bee stings are difficult to ascertain but estimates range from >0.5%-0.6% for the general population and 3% for children (The Anaphylaxis Campaign, UK, 2011; Boston Children's Hospital, 2014).

Wauwatosa's current population estimate is 47,068 (US census bureau 2012 estimate), meaning up to 282 Wauwatosa residents may be allergic to bee stings.

Honey Bees by their very nature need to travel appreciable distances from the hive in order to collect pollen and nectar. Research suggests that a bee colony can sustain itself when a sole food source is up to 4 miles away. The research showed honey bees could travel 7 miles to a food source if needed (J.E. Eckert et al., 1933). In the same study it was noted that honey bees have preferences for food sources and will forego readily-available food that is closer to the hive and travel greater distances for a preferred food source.

Conclusion:

Honey bees cannot be contained on a residential property, as they must forage nectar and pollen for the colony to survive. Bees can travel great distances for food. Allowing honey bees to be kept on residential-zoned properties will introduce more allergens into the community and increase the risk of exposure to all citizens, including those with allergies to bee stings. A small but appreciable number of Wauwatosa residents are allergic to bee stings.