

Menasha aldermen occasionally attend meetings of this body. It is possible that a quorum of Common Council, Board of Public Works, Administration Committee, Personnel Committee may be attending this meeting. (No official action of any of those bodies will be taken).

**CITY OF MENASHA
BOARD OF HEALTH
Menasha Health Department
316 Racine Street, Menasha**

4-11-2012

8:00 AM

AGENDA

- A. CALL TO ORDER
- B. ROLL CALL/EXCUSED ABSENCES
- C. MINUTES TO APPROVE
 - 1. [March 14, 2012](#)
- D. REPORT OF DEPT HEADS/STAFF/CONSULTANTS
 - 1. [March 2012 Communicable Disease Report](#)
 - 2. Pertussis Update
 - 3. Community Health Improvement Plan Update
- E. ACTION ITEMS
 - 1. Inspection Reports – Website Posting
 - 2. Foot Care Program Guidelines
- F. HELD OVER BUSINESS
 - 1. None
- G. ADJOURNMENT
 - 1. Next Meeting May 9, 2012

"Menasha is committed to its diverse population. Our Non-English speaking population and those with disabilities are invited to contact the Menasha Health Department at 967-3520 at least 24-hours in advance of the meeting for the City to arrange special accommodations."

Board of Health Members: Dorothy Jankowski, Lori Asmus, Susan Nett, Candyce Rusin, Theresa Shoberg

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**CITY OF MENASHA
BOARD OF HEALTH
Minutes
March 14, 2012**

- A. Meeting called to order at 8:07 AM by Chairman C. Rusin
- B. Present: Candyce Rusin, Lori Asmus, Dr. Teresa Rudolph, Susan Nett
Excused: Dorothy Jankowski
- C. MINUTES TO APPROVE
1. Motion to minutes from February 8, 2012 meeting made by T. Rudolph and seconded by L. Asmus. Motion carried.
- D. REPORT OF DEPT HEADS/STAFF/CONSULTANTS
1. February 2012 Communicable Disease Report presented and discussed. S. Nett also distributed a copy of the communicable disease report for the past year for all of Winnebago County. The 12 month total for Chlamydia remains high. Rickettsial/tickborne diseases are also increasing.
 2. Update – Pertussis. S. Nett reported the number of confirmed pertussis cases in Menasha seems to be declining. A significant number of individuals being tested continues to be reported with negative test results. These cases are classified as suspect and staff follow-up on each one to determine if they meet the probable case definition. The majority of cases have been in school age children. To date from January 1st there have been 2 confirmed cases, 13 probable cases (meet case definition but aren't lab confirmed), and 18 suspect cases.
 3. Community Health Improvement Plan update given by S. Nett. Representatives from ThedaCare, Affinity, and Aurora health systems, and the local public health departments in the Fox Valley region have formed a coalition to begin working on a community health improvement plan. The group has met twice and has started working on identifying health priorities in the area. Monthly meetings are scheduled to continue. Currently the top health priority identified is obesity.
 4. 60+ Health Screening Program Update---S. Nett reported that the grant nurse recently completed the foot care certification course through UW- Eau Claire. Nail care can now be provided as part of the 60+ health program. The program is being implemented for low income seniors. The federal poverty guidelines will be used in determining eligibility. Discussion ensued around what kind of evidence would need to be provided to show an individual met the income guidelines. The other new program currently under consideration for implementation is ear wax screening. Some seniors were reporting they were having to make 2 physician office visits when ear wax was a concern. The first visit was for a screening and then it was recommended to try and OTC product for softening and removing the ear wax; the second visit was to determine if they needed to have their ears

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flushed at the MD office. The grant nurse would need a review on the assessment for ear wax. Dr. Rudolph agreed to provide insight and assist with the review.

E. ACTION ITEMS

1. Fees for DHS Agent of the State 7-1-12 to 6-30-13 Licensing Year reviewed. S. Nett recommended the fees remain the same as the current licensing year. The state is not increasing their reimbursement amount and the costs to administer the agent of the state program is not increasing for 2012. L. Asmus made a motion and seconded by T. Rudolph to keep the fees the same as in 2011 for the DHS Agent of the State 7-1-12 to 6-30-13 licensing year. Motion carried.
2. Fees for Tattoo Parlors 7-1-12- to 6-30-13 Licensing Year reviewed. S. Nett recommended the fees remain the same as in 2011. L. Asmus questioned how many tattoo parlors there are currently in the city. S. Nett indicated there is only one currently licensed and that business does the permanent eyeliner. T. Rudolph made a motion and seconded by L. Asmus to retain the same fee as is in 2011 for the licensing period 7-1-12 to 6-30-13 for tattoo parlors. Motion carried.
3. Fees for DATCP Agent of the State 7-1-12 to 6-30-13 Licensing Year reviewed. S. Nett recommended the fees remain the same as the current licensing period. The state is not increasing their reimbursement amount and the costs to administer the agent of the state program is not increasing for 2012. Motion made by L. Asmus and seconded by T. Rudolph to keep the fees the same as in 2011 for the DATCP Agent of the State 7-1-12 to 6-30-13 licensing year. Motion carried.
4. Fees for Temporary Not for Profit Food Permits 7-1-12 to 6-30-13 Licensing Year reviewed. C. Rusin requested information on how this permitting process works. S. Nett explained the two tiers of permits. Applicants can choose to watch a video online or at the department and pay a lesser fee or the applicant can choose to have an inspection by the sanitarian, receive the education at the time of the inspection and pay the higher fee. The majority of applicants will take the online training. S. Nett recommends the fees stay the same for this licensing period. Motion made by T. Rudolph and seconded by L. Asmus to keep the fees the same for the Not for Profit Food Permits for the licensing period 7-1-12 to 6-30-13. Motion carried.
5. Fees for Mobile Home Parks 7-1-12 to 6-30-14 Licensing Year (2 yr. Permit) reviewed. S. Nett explained this is a 2 year permit. One inspection is required per year. The state is not increasing the pass-through fee. Motion made by T. Rudolph and seconded by L. Asmus to keep the current fees for the licensing period 7-1-2 to 6-30-14 for mobile home parks. Motion carried.
6. Discussion – Foot Care Program Fees. S. Nett explained the grant nurse received certification to do nail care and that fees needed to be set for this program which will become part of the 60+ health program. There was much discussion on how to set income eligibility as the program is primarily for low income older adults. C. Rusin asked if there was a difference in criteria for someone who is an older adult versus someone much younger. S. Nett to contact the benefit specialist for Winnebago County for information. The VNA currently charges \$22 and the Thompson Center in Appleton charges \$25. Board members were willing to set the fee now but wanted to review program guidelines once they were completed.

Motion made by T. Rudolph and seconded by L. Asmus to set a fee of \$15 per person for foot care based on eligibility guidelines. Motion carried.

7. Discussion – Ear Wax Screening Fees. S. Nett explained the 60+ program was looking at ear wax screening a couple of times a year and wanted to set a fee for doing so. The 60+ grant nurse will need a review on the assessment of the ear before starting this program. T. Rudolph willing to do the review. After discussion, it was decided the screening should be done with a recommended donation. Motion made by L. Asmus and seconded by T. Rudolph to set a recommended donation of \$2/person for the ear wax screening. Motion carried.

F. HELD OVER BUSINESS

1. None

- G. Motion to adjourn at 9:25 AM made by L. Asmus and seconded by T. Rudolph. Motion carried. Next meeting April 11, 2012.

**Menasha Health Department
Communicable Disease Report
March 2012**

Campylobacter	1
Chlamydia Trachomatis	2
Gonorrhea	1
Hepatitis C	1
Lyme Disease	1
Pertussis Probable	2
Tuberculosis (Non-mycobacterial)	2