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 100 Main Street, Menasha September 14, 2018 8:00 AM Board of Health Meeting AGENDA

- A. CALL TO ORDER
- B. ROLL CALL/EXCUSED ABSENCES
- C. MINUTES TO APPROVE
 - 1. BOH Meeting Minutes August 17, 2018
- D. REPORT OF DEPT HEADS/STAFF/CONSULTANTS
 - 1. Administrative
 - a. Health Department Budget and Contracts
 - i. Contract Updates
 - a. 2017 into 2018 Fund Balance Reserves
 - b. DHS DPH 2018-19 Grants and Contracts Status
 - i. State Health Plan Community Dialogue Grant Award
 - b. Rabies Vaccine Information
 - c. Correspondence/Communications
 - i. Menasha Health Department Mission, Vision, Values, Goals 2018
 - ii. Mass Influenza Vaccine Clinic October 11, 2018
 - d. Personnel
 - e. Academic Affiliation Update
 - i. University of Wisconsin Green Bay
 - ii. University of Wisconsin Oshkosh
 - a. BSN students Dates: 9/6/18-12/4/2018 (Jodi Koplitz, MSN, RN, Instructor)
 - b. RN to BSN student Megan Davis, RN Dates: 9/14/18 11/30-18 84 hours (Terese Blakeslee, MSN, RN instructor)
 Project Goal: increase participation in the immunization clinics and Mass Influenza Vaccine Clinic
 - c. DNP -
 - d. **Project Goal**: To reduce the number of lead-poisoned children under age six years by reducing or eliminating sources of lead in children's environments before they are exposed
 - iii. Fox Valley Technical College
 - iv. Rasmussen College
 - 2. Employee Safety
 - 3. Sealer of Weights and Measures
 - 4. Environmental Health

"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: Lori Asmus, Kristene Stacker, Nancy McKenney, Dr. Theresa Rudolf, Candyce Rusin,

- 5. Public Health Department
 - a. Communicable Disease Report
 - i. August 2018
 - ii. January-August 2018
 - b. School Health
 - i. Absences
- 6. Health Screening 60+
- 7. Prevention
- 8. School Health Aides
- 9. Dental Program (screening, fluoride varnish, Children and Youth with Special Healthcare Needs)
- 10. Communicable Disease
- 11. Lead Prevention
- 12. Immunization
- 13. Maternal and Child Health
- 14. Dental Sealants
- 15. Emergency Preparedness
- 16. Twenty Four/Seven
- 17. Senior Center
- E. ACTION ITEMS
 - 1. Policy/Procedure Review, Discussion, Approval
 - a. Audiology Screening Procedure
- F. HELD OVER BUSINESS
- G. ADJOURNMENT Next Meeting: Friday, October 12, 2018 at 8:00 am Menasha Health Department 100 Main Street, Suite 100 Menasha, WI

CITY OF MENASHA BOARD OF HEALTH Minutes August 17, 2018

A. Meeting called to order at 8:08 AM by Candyce Rusin.

B. Roll Call: Present: Nancy McKenney, Lori Asmus, and Teresa Rudolph, Candyce Rusin
Staff: Kortney Dahm, Todd Drew, Mary Fritz, Kristine Jacobsen Claire Opsteen, Meghan Pauly
Excused: Kristene Stacker

C. MINUTES TO APPROVE

Kristene Stacker moved to approve the June 15, 2018 minutes, seconded by Lori Asmus, motion passed

D. REPORT OF DEPT HEADS/STAFF/CONSULTANTS

Administrative: *Budgets and Contracts:* Nancy McKenney gave an update on2017-2018 Fund Balance Reserves. DHS DPH 2017-2018 Grants and Contract Status. The municipal budget kickoff meeting was held with the Menasha Common Council. It was noted that the Menasha Health Department is cost effective (\$1/\$100,000 home). She shared that the Health Department successfully applied were awarded three competitive grant awards. The United Way of the Fox Cities awarded \$48,975 in 2019 and \$50,445 in 2020) for Menasha Healthy Smiles , (a school based screening, fluoride varnish, oral health education program); a Wisconsin Seal a Smile program awarded the Menasha Health Department a \$7,000 grant (oral screening and dental sealant program); and the Wisconsin Environmental Public Health Tracking Program awarded Menasha Health Department \$9,998 in 2018-19 for "Menasha Lead Free by Delivery." The Menasha Health Department was selected as one of 8 awards out of 29 applicants. Nancy McKenney thanked and recognized Claire Opsteen, Public Health RDH and Kristine Jacobsen, MPH, CHES for their diligent work on the successful grant applications. She noted that programs save residents both in prevention service costs and dental treatment costs by averting tooth decay.

Correspondence/Communication: Appanasha Pet Clinic requested the Menasha Board of Health revisit the request to administer Rabies vaccine. The Board of Health directed that the Health Department to explore the possibility of providing the vaccine, including the costs of vaccine, supplies, and cost to administer for Board of Health review on September 14th.

Employee Safety: – Todd Drew conducted regular safety meeting. CPR manikins, fire extinguishers, panic buttons, personal protective equipment were purchased for City of Menasha Departments. **Sealer of Weights and Measures**: Todd Drew is in the process of testing gas pumps and scale testing.

Environmental Health Programs: Todd Drew is completing an end-of-the-year Self-Assessment. Contractors are cleaning 629 Appleton Street, 3 large trash receptacles with biohazard (e.g. used needles) have been collected from within the house. The ducts were inspected and found to contain drugs paraphernalia. These biohazards were safely removed by a licenses medical waste hauler. The Department of Natural Resources (DNR) Kwik Trip case with Wisconsin DOJ was settled with 4 contractors for \$62,500. There were 6 housing complaints. Todd Drew attended drug training provided with Wisconsin State Lab of Hygiene. He is working with De Pere on multiple restaurant enforcement actions. DNR Contract renewed and signed for 2018-19. There are new establishments coming to Menasha, Jimmy Johns Subs and BBQ caterer and food truck. There was an indoor air quality issue involving under diluted cleaning chemicals on 68 Racine Street, which resulted in inhalation mild chemical burns. The issue was remediated. 5 O'clock Somewhere has closed. Piggly Wiggly has changed operators, and is a corporate franchise store. A raze order has been issued on 409 First Street. Environmental issues include arsenic and asbestos. Todd Drew will conduct a food related contamination exercise at WEHA Conference on Sept 19, 2018. It is endorsed by Wisconsin Emergency management as a Homeland Security Exercise and Evaluation Program exercise. Todd Drew is working on the RR Donnelly Demolition including asbestos, lead, mercury and PCB. The old Coast Guard building going to be demolished in September, including asbestos survey and abatement if necessary.

Communicable Disease Reports: Kortney Dahm reviewed the June-July 2018 Communicable Disease reports. **School Health:** No Report

Health Screening 60+ Program: Meghan Pauly gave an update on Senior Center programs. Vascular Screening will be held on September 19th. Tai Chi class complete for the season. Walking program is in process. Healthy Living with Diabetes will be held in Oct.

Dental Program: Claire Opsteen reported dental consents are now on-line for school registration.

Dental Sealant Program: No Report

Lead Prevention Program: No Report

Prevention: Claire Opsteen and Kristine Jacobsen noted Corny Community Walk was a success. 250 residents attended 2018 Corny Community Walk, increased from 184 in 2017.

Maternal and Child Health: Kristine Jacobsen is working with City of Menasha Administration staff to discuss the process of becoming a Breastfeeding Friendly Business.

Immunization: Regular monthly immunization clinic are being offered.

Emergency Preparedness: Kristine Jacobsen gave an update on cooling shelters that were offered in June-July.

Twenty Four/Seven: No Report

Senior Center: No Report

E. ACTION ITEMS

Policy and Procedure Review: Board of Health reviewed and approved Bloodborne Pathogen Post Exposure Management for Students and the Dental Infection Control Policy/Procedure. Lori Asmus motioned to approve, second by Candyce Rusin.

F. HELD OVER BUSINESS: None

G. ADJOURNMENT: Lori Asmus moved to adjourn the meeting, seconded by Theresa Rudolph. Motion passed. The next meeting will be on Friday September 14, 2018 at 8:00 a.m.



MISSION-VISION-VALUES

City of Menasha Health Department

In partnership with the community, our **mission** is to protect and promote health and safety.

Our vision is a safe and healthy community.

We value teamwork, trust, communication, respect and friendliness.

GOALS

Overarching Goal – Improve communication to promote services and communicate results.

External: Inform the community of services provided at the Menasha Health Department. Inform healthcare systems about the Menasha Health Department; engage elected officials to be a voice for the Health Department to promote and support programs.

Internal: Improve the flow of information and communications for all staff (use tools, point people for messaging).

<u>Goal #1:</u> Promote services and communicate results to the public. Objective: Use Facebook.

- Use icon on promotional materials & website
- Objective: Performance Management Plan & System

Objective: Determine target audiences

- Audience may be different for programs or messaging
- Objective: Engage elected officials
 - Invite specific to programs or Board of Health
 - Coffee
 - Write into preparedness plans

<u>Goal #2:</u> Improve the flow of communication within the Health Department Objective: Use electronic and other tools available for staff communication.

- Calendars assure they are current
- Keep phones on
- Email messaging to all
 - Specify who receives specific messages
 - Use group messaging (e.g. nursing to PHN group)
- Keep Health Officer in the loop

Strengths

- Competent Staff
- Work well together
- Good relationship with schools (partnership)
- Senior Center access & partnership
- Partnerships with health systems CHA
- Well supported by the City
- Wide variety of services
- Have partnerships around the table for the CHIP
- Good relationship with businesses
- Well respected by the community
- Looked to as a resource & experts
- Consortium
- Relationship with State DHS/DATCP
- Revenue from Environmental Health
- Academic partnerships

<u>Weaknesses</u>

- Communication internal & external
- Time balance between programs
- Financing majority from state
- Most data is county level
- Backup for programs

Opportunities

- Flexibility in hours (Not day to work but need to work)
- Improved <u>flow</u> of communication internal
- How to capture partnerships
- Performance management & communicate the successes
- Partnering with internal city depts. To move the CHIP
- How to show impact in what we do
- Researching impact to improved health (measurement tools)
- Social media strategies to recognize others for their work

Challenges

- Balance with promotion & capacity
- How to deal with those wanting to use city services that need to be turned away. (Do not live in the city)
- Burnout of staff being overextended
- Communication
- Capacity
- Partnering internal/external
- Using services provided to recruit people to live in the community
- Succession Planning cross-training
- Healthcare system buy in programs (support of) (funding) (people-resources)
- For all to know Menasha Public Health and what is offered
- Public relations
- Diversify financing

Cumulative Report

Date Type: Create	Date Range: 01/01/2018 to 08/31/2018
Incident Jurisdiction:	Health Jurisdiction: Health Jurisdiction
Outbreak Jurisdiction:	Transmission Status:
Resolution Status: Confirmed, Suspect, Probable	
Process Status:	

Prepared By: WEDSS (Preparer's Title)

Telephone: 9885297959

Fax: 9848999801

Disease Name	Number of Incidents
ANAPLASMOSIS, A. phagocytophilum	2
BLASTOMYCOSIS	1
CAMPYLOBACTERIOSIS	5
CHLAMYDIA TRACHOMATIS INFECTION CRYPTOSPORIDIOSIS	68 2
CYCLOSPORIASIS	- 1
E-COLI, ENTEROPATHOGENIC (EPEC)	6
EHRLICHIOSIS/ANAPLASMOSIS, undetermined	1
GONORRHEA	11
HEPATITIS B, Unspecified	2
HEPATITIS C, CHRONIC	11
INFLUENZA-ASSOCIATED HOSPITALIZATION LYME DISEASE (B.BURGDORFERI)	13
	2
MYCOBACTERIAL DISEASE (NON-TUBERCULOUS) PELVIC INFLAMMATORY DISEASE	1
(NON GC, NON CT) PERTUSSIS (WHOOPING COUGH)	2
SALMONELLOSIS	5
SHIGELLOSIS	1
STREPTOCOCCAL INFECTION, OTHER	1
STREPTOCOCCUS PNEUMONIAE, INVASIVE DISEASE	4
SYPHILIS, UNKNOWN DURATION OR LATE	1
TUBERCULOSIS, LATENT INFECTION (LTBI)	5
TUBERCULOSIS, SCREENING	1

Information contained on this form or report which would permit identification of any individual has been collected with a guarantee that it will be held in strict confidence, will be used only for surveillance purposes, and will not be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242m).

Date Type: Create	Date Range: 01/01/2018 to 08/31/2018	
Incident Jurisdiction:	Health Jurisdiction: Health Jurisdiction	
Outbreak Jurisdiction:	Transmission Status:	
Resolution Status: Confirmed, Suspect, Probable		
Process Status:		
Prepared By: WEDSS (Preparer's Title)	Telephone: 9885297959	Fax: 9848999801
<u>Disease Name</u>	Number of Incidents	
VANCOMYCIN-INTERMEDIATE S.	1	
AUREUS (VISA) VARICELLA (CHICKENPOX)	2	

Information contained on this form or report which would permit identification of any individual has been collected with a guarantee that it will be held in strict confidence, will be used only for surveillance purposes, and will not be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242m).

Cumulative Report

Date Type: Create	Date Range: 08/0	1/2018 to 08/31/2018
Incident Jurisdiction:	Health Jurisdiction	n: Health Jurisdiction
Outbreak Jurisdiction:	Transmission Stat	tus:
Resolution Status: Confirmed, Probable, Suspect		
Process Status:		
Prepared By: WEDSS (Preparer's Title)	Telephone: 9885297959	Fax: 9848999801
Disease Name	Number of Incidents	

1

1

13

1

3 2

1

1

1

1

ANAPLASMOSIS, A. phagocytophilum

LYME DISEASE (B.BURGDORFERI)

STREPTOCOCCUS PNEUMONIAE,

VANCOMYCIN-INTERMEDIATE S.

LYME LABORATORY REPORT

CAMPYLOBACTERIOSIS

CRYPTOSPORIDIOSIS

HEPATITIS B, Unspecified

INVASIVE DISEASE

AUREUS (VISA)

INFECTION

GONORRHEA

CHLAMYDIA TRACHOMATIS

Information contained on this form or report which would permit identification of any individual has been collected with a guarantee that it will be held in strict confidence, will be used only for surveillance purposes, and will not be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242m).

	TITLE: AUDIOLOGY SCREENING TYPE: []POLICY (A) [B]PROCEDURE / PROTOCOL (B) []OTHER (Z)		
Menasha			
REVISION #:00		SUPERSEDES: None (New)	
DATE ISSUED:	17 Sept 2014	DOC OWNER: Claire Opsteen, RDH	
		Liz Rosin, PHN	
DATE REVIEWED:		REVIEWED BY: Board of Health	
DATE APPROVED:		APPROVED BY: Nancy McKenney RDH, MS	
		Health Officer / Director	
EFFECTIVE DATE:	17 Sept 2014	NEXT REVIEW DATE: Sept 2019	

Objective

To facilitate early diagnosis of hearing problems, referral to audiologist if necessary, and prevent future hearing loss, The Menasha Health Department will facilitate hearing screenings within the school targeting specific grade levels.

Applies To

Public Health Personnel

Procedure

All kindergarten students through third graders will be screened in the beginning of every school year. A screening schedule will be sent to each school and approved by the school administrator. A school roster will be sent to the Menasha Health Department administrative assistant and the administrative assistant will prepare the necessary forms for the screening process to be completed by the trained screener.

Preschool students (4K) will be screened on request by teachers that suspect a hearing issue. Alternatively, 4K students may be screened **after** the initial screening at all schools during the time other students are being rescreened. This would allow time for 4K teachers to observe students for a period of time to better determine who should be selected for the screening. This method will be utilized at the discretion of the health director. Hearing and dental screenings will be done at the same time at each school site.

*Note** A Menasha Health Department nurse will conduct an audiology training with the screeners at the end of the summer (usually in August). Audiology screening Procedure/Protocol and Hearing "cheat sheet" will be sent to the screener prior to the training.

<u>Step I</u>

Explain the hearing screening procedure to all students. The trainer may need to demonstrate the process before the screening is started especially for younger students.

<u>Step II-Set up</u>

Set up screening area

	TITLE: AUDIOLOGY SCREENING		
Menasha	Type: [] Policy (A)) [B]PROCEDURE /PR	OTOCOL (B) [] OTHER (Z)
REVISION #:00		SUPERSEDES: None (New	w)
DATE ISSUED:	17 Sept 2014	DOC OWNER:	Claire Opsteen, RDH
	-]	Liz Rosin, PHN
DATE REVIEWED:		REVIEWED BY: 1	Board of Health
DATE APPROVED:		APPROVED BY: 1	Nancy McKenney RDH, MS
]	Health Officer / Director
EFFECTIVE DATE:	17 Sept 2014	NEXT REVIEW DATE:	Sept 2019

- 1. Place the audiometer on a table and plug into the electrical outlet on a wall.
- 2. Head phone cords are color coded. Plug the red cord into the machine in the red hole. Plug the blue cord into the machine in the blue hole.
- 3. Select the steady option on the audiometer instead of pulse position.
- 4. Perform a practice test on yourself or other staff to check that pure tone screening equipment is working properly.
- 5. One or two parent volunteers (provided by each school) will assist with bringing classes to the screening area.

<u>Step III-Screening</u>

- 1. All screening will be facilitated by a trained screener.
- 2. Have the student sit in front of the screener (child facing away from the screener).
- 3. Place the headphones on the student. Red ear phone placed on the right ear. Blue ear phone placed on the left ear.
- 4. Start the testing process with the right ear. Flip the knob in the right position on the audiometer for the right ear.
- 5. Present a 1000 Hz tone at 40 dB in the right ear. If child responds then decrease the level to 20 dB and test at 1000 Hz, 200 Hz, and 4000 Hz.
- 6. Present a tone more than once but no more than 4 times if a child fails to respond.
- 7. A student will respond by raising their hand, pressing the button attachment, or saying yes or beep when tone is heard.
- 8. Switch the knob on the audiometer to the left position and repeat the entire process for the left ear.
- 9. The audiometer kit has a silver switch with a red button that can be plugged in the back of the audiometer that the child can press when the beep is heard. This option can be used as you determine appropriate.
- 10. The student fails if lack of response at any frequency in either ear.
- 11. Document the results for both ears on the form provided by the Menasha Health Department. P=pass, F=failed. Indicate on the hearing form which level child failed. i.e. F@1000-will indicate the child failed at this frequency but passed at all other frequencies. P indicates that the child passed at all frequencies. F@ all freq. indicates the child failed at all frequencies. Indicate what the child failed at for each ear.

	TITLE: AUDIOLOGY SCREENING		
Menasha	Type: [] Policy (A	.) [B] PROCEDURE / PROTOCOL (B) [] OTHER (Z)	
REVISION #:00		SUPERSEDES: None (New)	
DATE ISSUED:	17 Sept 2014	DOC OWNER: Claire Opsteen, RDH	
	•	Liz Rosin, PHN	
DATE REVIEWED:		REVIEWED BY: Board of Health	
DATE APPROVED:		APPROVED BY: Nancy McKenney RDH, MS	
		Health Officer / Director	
EFFECTIVE DATE:	17 Sept 2014	NEXT REVIEW DATE: Sept 2019	

12. Use the comments sections for any other necessary information. For i.e. "unable to test" "did not understand" "had a cold and complained they could not hear."

Step IV-Screening Results

- 1. Students at all grade levels pass if they respond to tones at 1000 Hz, 2000 Hz, and 4000 Hz.
- 2. After the initial screening is done, the documentation will be given to the Public Health Nurse to review to determine which students need to be rescreened.
- 3. Public Health Nurse will rescreen students at the school site.
- 4. The Public Health Nurse will send out a letter to the parents of any students who did not respond at any of the 3 levels at 20 decibels after being rescreened.
- 5. Further follow-up will be facilitated as needed.

Effective Date

Next Review Date

Revision History

Revision #	Date Approved	Reason / Brief Description	Author
00	17 Sept 2014	Reviewed	Loretta Kjemhus RDH
	06 Feb 2017	Updated 2-06-17	Loretta Kjemhus RDH
	20 June 2018	Updated 6-20-18	Liz Rosin RN

Signature of Approval: ______ Date: ____9-12-2018_____