

2013



Grant County Health Department

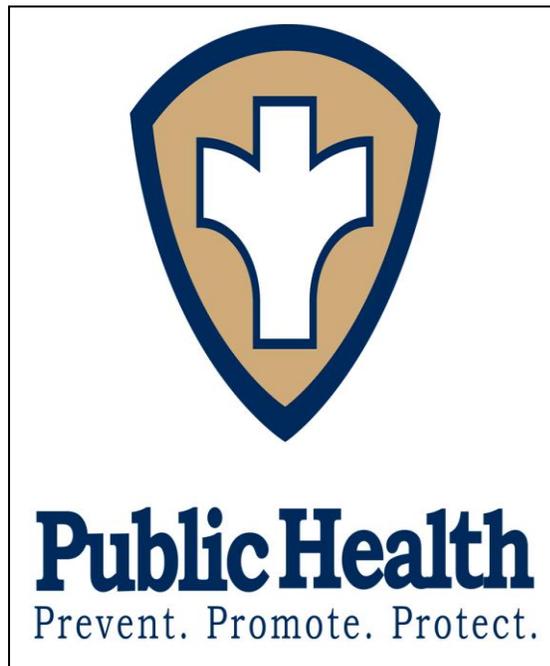
"Protecting Public Health in Grant County for 78 years"

- TO:** The Honorable Chairman, Larry Wolf and the Members of the Grant County Board of Supervisors
- FROM:** The Staff of the Grant County Health Department and the Members of the Board of Health
- RE:** Report of the Grant County Health Department Programs and Services for 2013

The work and efforts of a dedicated staff and Board of Health are reflected in this report. A special thank you to the Grant County Board of Supervisors, UW-Extension, Personnel Department, Finance Director, Sheriff's Department, Emergency Management, Area Health Providers, SW Community Action Program, Wisconsin Department of Health Services and our other partners in public health not mentioned above.

The mission of the
Grant County Health Department
is to promote the health and wellness
of ALL residents of Grant County.

“Everyone Living Better, Longer”



Ten Essential Services

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal healthcare workforce.
9. Evaluate effectiveness, accessibility, and quality of personnel and population-based health services.
10. Research for new insights and innovative solutions to health problems.

State and Local Health Goals

Improved Health Across the Life Span
Eliminate Health Disparities and Achieve Health Equality

2020 Health Plan Focus Areas

Identify and Address Health Disparities
Examine and Assess Social, Economic and Education Factors that Influence Health
Improve Access to High Quality Health Services
Form Collaborative Partnerships for Community Health Improvement
Create and Maintain a Diverse, Sufficient, and Competent Workforce that Promotes and Protects Health
Ensure Capabilities that Promote Emergency Preparedness, Response, and Recovery
Secure Equitable, Adequate, and Stable Public Health Funding
Improve the Health Literacy of the Public and Our Partners
Ensure Public Health Capacity and Quality of Services
Conduct research for New Insights and Innovative Solutions to Health Problems
Support Systems to Manage and Share Health Information While Protecting Privacy
Assure Adequate, Appropriate, and Safe Food and Nutrition
Reduce Alcohol and Drug Abuse
Prevent and Manage Chronic Illness
Control and Prevent Communicable Diseases
Improve Environmental and Occupational Health
Promote Health, Growth and Development
Reduce Injuries and Violence
Improve Mental Health
Improve Oral Health
Increase Physical Activity
Promote Reproductive and Sexual Health
Reduce Tobacco Use

Department Overview

In 2013, the Grant County Health Department administered over 20 programs managing multiple grants and contracts with the State and other agencies. Additionally, we manage several multi-county regional programs. Staffing includes the following:

Full Time: 23
Part Time: 4 (including 2 that do not receive full benefits)
LTE Staff: 1-4 (RNs) and (1) Nurse Practitioner
Direct Contracts: 15 [(1) Hospice Medical Director, (1) Associate Hospice Medical Director, (1) Pharmacist, (2) Breast Feeding Peer Counselors, (2) Dental Hygienists, (2) Drug Free Community Assistant Coordinators, (2) Translators (1) Registered Dietitian (3) Dentists (via contract with InHealth Community Wellness Clinic)
Other Contracts: >~100 individual contracts for services or to provide services
Volunteers: ~8 Hospice, 1 PH Medical Director, >20 for DFC Coalition
Staff Professions: Include: Registered Nurses, Nurse Practitioner, Certified Nursing Assistants, Registered Sanitarians, Registered Dietitians, Social Worker, Speech Therapist, Dentists, Dental Hygienists, Pharmacist, Medical Doctors, Physical Therapists and Occupational Therapists.

The 2013 operating budget was approximately 2.78 million dollars (excluding donations). Approximately 2.35 million dollars was anticipated from sources other than the local tax levy making the health department largely funded by State, Federal, grant, and fee for service sources.

In 2013, four programs were supported directly, but not entirely, by county levy funds. Of the four programs the vast majority of levy is used to provide public health and environmental health services which are mandated by the State. The other programs provide direct services to children and/or individuals with health problems or disabilities. These programs include Personal Care and Health Check.

Our Home Nursing Program requires direct levy support most years however, it did not require any direct levy support in 2013 (and likely will not require direct levy support in 2014). All programs are supported by levy funds through basic infrastructure, administration, and other ancillary activities (see the Sequoia Consulting Group Report).

Highlights and Challenges in 2013

In 2013, changes brought about by the Affordable Care Act (ACA) began to impact programming. The most notable change in 2013 was the change in the allowable use of State supplied vaccine. The change limited our ability to provide immunizations to children and may be limiting access to vaccines as well. Additionally, many individuals struggled to find information and to enroll for coverage starting in 2014.

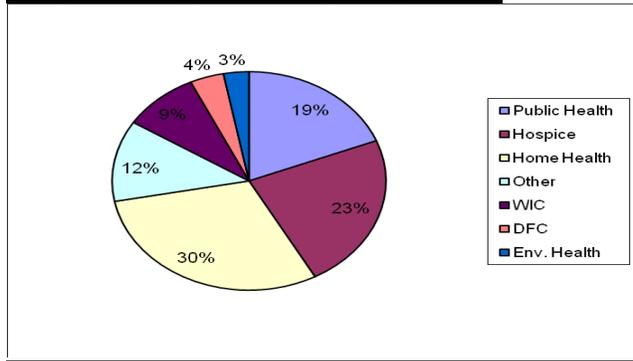
We began the public health accreditation process and received a \$5,000 grant to do quality improvement initiatives as part of this effort. We initiated several quality improvement projects including improving our billing process and some of our services in hospice, home nursing, and Prenatal Care Coordination (PNCC). As a result of our efforts in PNCC we saw a 520% increase in the number of clients served by our program.

An eighth \$2,500 grant from the Wisconsin Department of Transportation was also obtained to provide child passenger safety seats to low income families.

We also began to receive partial payment for school nursing services.

The most difficult challenges were all of the changes in programming requirements that are occurring in 2013 and 2014. This includes new data collection and reporting as well as preparing for a complete overhaul of the medical coding system beginning in 2014.

Major Programs by Expense



Health Department Program Overviews

Public Health

Health Departments are responsible for monitoring and improving the health of the community. This is accomplished by collecting and reviewing health indicators such as disease incidents, causes of death, and health behaviors and using them to create programming or utilize existing resources to create positive changes. Reaching out to the community and doing targeted interventions results in a system based approach to addressing the public health needs of our community.

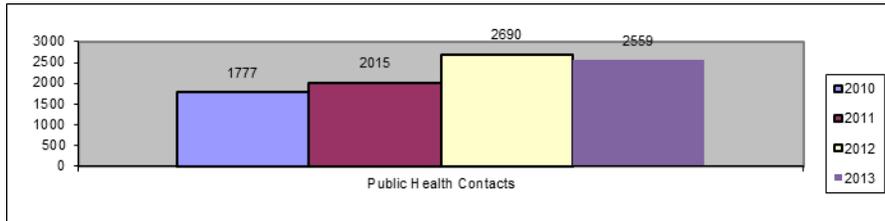
Local health departments are also required to provide other services identified by State Statutes and Administrative Rules. Mandated programs include the control of communicable disease, investigating and resolving human health Hazards, health promotion, education, and prevention efforts.

Health departments use health promotion and education campaigns, the media, social networking sites, newsletters, classes, and outreach at community events as well as direct communication with the public and community leaders to educate and help initiate changes.

We provide services out of our office and in businesses, schools, satellite clinic locations, and in homes across the county. Examples of services provided to our residents include:

- 1) Dental Health Services
- 2) Health Checks
- 3) Immunizations
- 4) Injury Prevention Programming
- 5) Communicable Disease Control
- 6) Emergency Responses

Below is the number of contacts for our Public Health staff.



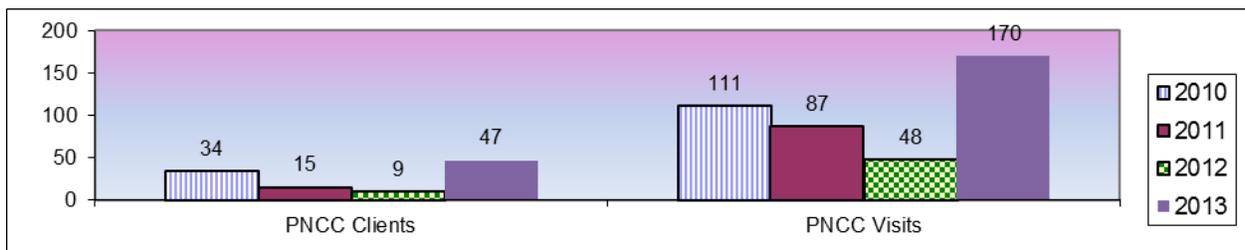
Prenatal Care Coordination (PNCC)

The PNCC program reaches out to women with increased risks for complications during pregnancy. Our Public Health Nurses coordinate care to help ensure linkages with other providers and programs dedicated to improving birth outcomes saving thousands of dollars per year on health care costs and preventing many life-long problems.

Education is provided on: breastfeeding promotion, safety, nutrition, pregnancy related physiological and emotional changes, infant care, and parenting skills. Nurses assess risks including alcohol, drug, and tobacco use during pregnancy. If these or other risks are present, they encourage quitting behaviors or getting assistance by providing referrals to professional counseling or other agencies when necessary.

PNCC offers a comprehensive set of services which includes referrals and assistance in enrolling in other health department programs such as Women, Infants and Children (WIC) and Health Check as well as programs offered by outside agencies. A quality improvement project was started during 2013 to increase the number of clients served. The end result was a 520% increase in the number of clients served.

Below are the number of clients and visits in the PNCC Program:



School Health

The Grant County Health Department provides nursing services to the following schools:

St Clements (Lancaster)
 Christian Day School
 St. Rose (Cuba City)
 St. Joseph (Sinsinawa)
 Cassville Elm. /HS

St Charles (Cassville)
 Amish/Mennonite Schools
 Holy Ghost (Dickeyville)
 RiverRidge Elem. /HS
 St. Mary's (Bloomington)

Potosi Elem. /HS
 Cuba City Elem. /HS
 Immaculate Conception (Kieler)

Services include:

- Medication management assistance
- Health plan and policy development
- Vision and hearing screenings for selected grades, including rechecks and referral to appropriate health care providers as needed.
- Immunization clinics for children and staff
- Follow-up on immunization requirements for entry to school.
- Health resources and presentations for teachers, staff, students and parents
- Training for school staff

Meetings are held to educate and coordinate activities with school nurses employed by the schools. Limited support is provided to schools that have their own nursing staff to help out with their efforts or to provide services that we are required to assist them with. Schools located in Boscobel, Fennimore, Lancaster, Platteville, and Muscoda (Riverdale) receive these services.

A total of 734.25 nursing hours were spent relating to school health not including communicable disease control efforts. In addition, 4,320 miles were traveled by nurses relating to school health services. In 2012, 701 hours of nursing time were dedicated to schools and 5,504 miles were traveled. Public health aide time and administration time are not included in this total (as these hours are not specifically kept track of).

Jail Health

Two nurses from the Grant County Health Department have received extensive training and continuing education on topics relating to the provision of jail health services. These nurses staff the Grant County Jail providing onsite care three days a week (Monday, Wednesday, and Friday). In addition, the jail is included in our “intake” system and “on call” rotation allowing our department to provide services as needed ensuring complete coverage 24 hours a day, 7 days a week including holidays.

The jail nurses coordinate with the jail staff, health care providers, and State inspectors to provide necessary care in as efficient and cost effective manner as possible. This system of providing nursing services on demand has met needs and continued to save thousands of taxpayer dollars each year.

In 2013, 1058.75 hours of nursing time were provided to the jail. This is an increase over 2012 when 971.5 hours of nursing time were provided to the jail. In addition 1,615 miles were traveled to provide jail health services in 2013.

WIC (Women, Infants and Children) Program

The Women, Infants and Children (WIC) program is an educational and supplemental nutrition program serving lower income families with children up to age five. WIC encourages and supports breastfeeding. The program also promotes and maintains the health and well-being of nutritionally at-risk pregnant, breastfeeding and postpartum women, infants, and children. WIC provides supplemental nutritious foods, nutrition and breastfeeding information, and referrals to other health and nutrition services. WIC also has a breastfeeding peer program and provides access to fresh fruits and vegetables with a farmer's market program.

Health benefits of WIC participation include reduced:

- Premature births
- Low birth-weight babies
- Long-term medical expenses

In 2013 an average of 932 individuals were served per month. In 2013, WIC families spent a total of \$568,811.87 at thirteen Grant County grocery stores. A total of \$600,783 was spent in 2012.

Health Check

The Health Check Program provides comprehensive examinations of children aged birth to 21 years. A complete health check includes:

Head to Toe Physical Exams	Immunizations
Growth and Development Assessments	Mouth Exams
Nutritional Screening	Other Screenings
Fluoride Varnishes	Blood Lead Testing
Lab Tests	Eye Exams

Health check screenings and immunizations are offered at most clinics to compliment the WIC program. In 2013, 25 Health Checks were performed. Additionally, 414 blood lead screenings were completed for children in Grant County. In comparison, 70 Health Checks and 505 blood lead screenings were done in 2012.

As part of our services, we also checked and or installed 83 child passenger safety seats (providing some seats at no charge to low income families). We also provided 5 cribs to low income families along with information on how to prevent Sudden Infant Death Syndrome (SIDS) following the Cribs for Kids® program guidelines.

Dental Health Services

Dental Hygienists provided services to 1245 clients, this is a 20% increase over the 1034 clients served in 2012. They also educated many others in schools throughout Grant County. Grant County Health Department contracted dentists saw 142 clients in 2013. Services were also provided at the Grant County Health Department and in the Head Start offices. In addition, Public Health Nurses completed 189 fluoride varnishes and oral assessments on children in schools and at WIC/Health Check Clinics.

WWWP (Wisconsin Well Woman Program)

Grant County Health Department administers the WWWP for women ages 45-64 years of age meeting specific income requirements. Well Woman pays for mammograms, Pap tests and certain other health screenings. Early detection of breast or cervical cancer can greatly improve outcomes and significantly reduce the cost of treatment as well as shorten recovery times. In 2013, 50 participants from Grant County were able to access the WWWP program. This is a decrease from 54 in 2012.

Immunizations

In 2013, immunizations were offered at many locations throughout the county including all WIC / Health Check Clinics and vaccine was also available at the Health Department office and in Grant County schools. Many vaccines are provided at no charge while others are billed at minimal expense.

Below are the totals of vaccinations given by the Grant County Health Department in 2013. It is important to note that changes in the allowable use of State supplied vaccines and the continued expansion of the use of combined vaccines have made comparisons to previous year's statistics more complex and reduced the number of immunizations given. Vaccine supply issues also caused shifts to alternate vaccines and vaccine combinations as well.

Number of Doses of Vaccine	2007	2008	2009	2010	2011	2012	2013
DTaP - Diphtheria/Tetanus/Pertussis	386	366	151	73	69	58	83
DTaP/Hib/Polio (Pentacel)	0	0	218	379	356	322	2
DTaP/Polio (Kinrix)	0	0	207	209	198	197	103
DTaP/HepB/Polio (Pediarix)	349	357	153	0	5	23	196
Polio	215	196	40	28	24	14	21
MMR - Measles/Mumps/Rubella	387	388	435	374	392	339	204
Hepatitis A (pediatric)	76	146	155	158	155	153	103
Hepatitis B (pediatric)	35	22	157	296	280	211	26
Td - Tetanus/Diphtheria	845	147	99	81	86	28	9
Tdap (Adacel & Boostrix)	165	976	1125	1078	747	1170	354
Hib - Haemophilus Influenza type B	386	312	207	110	48	53	240

HPV (Gardasil)	172	282	162	117	98	212	71
Varicella (Chickenpox)	408	780	875	811	742	607	230
Pevnar	482	474	415	576	388	323	241
Comvax (Hib/Hep B)	4	5	5	0	0	0	0
Meningitis	180	210	370	301	359	213	71
Rotavirus	76	134	108	140	132	118	92
Influenza -H1N1	0	0	2928	3461	n/a	n/a	n/a
Influenza - Seasonal	3048	2993	3155	4529	4218	4232	4524
Pneumonia	89	113	92	83	48	49	26
Twinrix (Hep A/Hep B)	0	1	13	22	57	10	0
Hepatitis A (adult)	26	28	30	42	43	20	21
Hepatitis B (adult)	134	132	103	106	117	91	69
Shingles (Zostavax)	-	-	-	-	-	2	0
Total	7463	8062	11203	12974	8562	8445	6686

Communicable Disease Follow-Up

Local public health departments conduct follow-up activities with individuals having or suspected to have illnesses as identified in Wisconsin State Administrative Rule Chapter DHS 145, "Control of Communicable Diseases". Public Health Nurses confirm the illness, educate the individual(s) about the illness and encourage or ensure treatment (if needed), Steps are taken to control and reduce the spread of disease as well. Telephone calls, letters, and/or face-to-face contacts are used to gather and distribute information.

We investigated three cases of cyclosporiasis in 2013. The last previous case of cyclosporiasis reported in Grant County was in 2006. We also saw a dramatic decline in the number of pertussis cases in Grant County in 2013. In 2012, 93 cases of pertussis were reported and in 2013 only eight cases were reported.

Below is a summary of communicable diseases that were reported to the Grant County Health Department in 2013 (It should be noted that not all cases were confirmed, many reports end up not being actual cases).

COMMUNICABLE DISEASES

(January 1 - December 31, 2013)

According to Wisconsin State Statute 252, any individual with knowledge or reason to believe that a person has a communicable disease must report to their local health department. This includes physician, nurses, lab workers, teachers and the general public. The Grant County Health Department has received the following reports of illness. Staff has completed follow-up on these reports and appropriate action has been taken.

VACCINE PREVENTABLE DISEASES	2008	2009	2010	2011	2012	2013
Chickenpox	21	4	9	11	11	8
Hepatitis A	1	0	0	0	0	1
Hepatitis B	4	2	1	0	2	5
Hib	0	1	2	0	1	0
Pertussis	0	3	5	17	93	8
TOTALS	26	10	17	28	107	22

COMMUNICABLE DISEASES	2008	2009	2010	2011	2012	2013
Anthrax	0	0	0	1	0	0
Arboviral Illness	1	1	0	2	2	1
Blastomycosis	0	0	0	0	1	0
Brucellosis	0	0	0	0	1	1
Campylobacteriosis	22	18	34	26	23	31
Cryptosporidiosis	36	10	17	8	18	10
Cyclosporidiosis	0	0	0	0	0	3
E.Coli	1	6	7	8	8	4
Ehrlichiosis	0	0	1	1	4	3
Giardiasis	2	1	3	2	2	5
Hepatitis C	5	4	8	11	8	11
Histoplasmosis	1	0	0	2	1	0
Hemolytic Uremic Syndrome	0	0	0	2	0	0
Influenza-Associated Hospitalization	-	-	-	2	3	19
Invasive Hemophilus Influenza	0	1	2	0	0	0
LaCrosse Encephalitis	0	1	0	1	0	1
Legionella	0	1	1	1	0	2
Listeriosis	0	0	1	0	0	0
Lyme Disease	11	17	30	27	40	35
Measles (Rubeola)	0	0	0	3	0	1
Metal Poisoning (Non-Lead)	0	0	0	0	1	0
Mumps	0	0	0	1	1	1
Mycobacterium (Non TB)	4	3	2	2	5	3
N. Meningitidis	-	-	-	-	2	1
Parapertussis	-	-	-	-	1	0
Q Fever	0	0	1	1	0	1
Rocky Mountain Spotted Fever	0	0	0	1	1	0
Rubella	0	0	0	2	0	1
Salmonellosis	3	2	6	9	11	11
Shigellosis	1	26	1	6	0	0
Strept All Types	1	1	5	2	3	3
Toxic Shock Syndrome	1	0	0	0	2	1
Transmissible Spongiform Encephalopathy	0	0	0	1	1	2
Tuberculosis	0	0	0	0	2	2
Tuberculosis Latent	0	4	7	6	3	5
Viral Encephalitis	0	1	0	1	0	0
TOTALS	89	97	126	128	144	158

SEXUALLY TRANSMITTED DISEASES	2008	2009	2010	2011	2012	2013
Chlamydia	87	104	108	87	132	128
Gonorrhea	6	8	7	6	9	11
Syphilis	0	0	0	0	2	2
TOTALS	93	112	115	93	143	141

Public Health Preparedness and Response

During 2013, Grant County Health Department continued to prepare for public health emergencies through extensive planning, training, and testing efforts. In 2013, we began to work on issues surrounding Community Preparedness, Responder Health and Safety, and Fatality Management.

While a formal regional structure no longer exists due to funding cuts, we continue to meet at least monthly with public health partners including those in our local and regional area. Additionally, we maintain memorandums of understanding so that resources can be shared if necessary. We also updated plans based on findings from exercises, new information, and lessons learned.

Environmental Health Programs

Grant County remains the lead agency in the Southwest Wisconsin Environmental Consortium. Members of the consortium include Grant, Crawford, Lafayette, Iowa, Richland, and Vernon counties. This program addresses several mandates and investigates factors that can adversely impact the health of our citizens. Problems can include human health hazards such as vermin infestations, sewage or other waste problems, water and air quality issues, or public health nuisances which may endanger the safety or health of the public.

Local health departments are required by state statute to respond to human health hazards and by local ordinance to respond to public health nuisances. Additionally, health departments are required to investigate lead poisoning cases. Most complaints received by the local health departments are related to environmental health issues and include both public health nuisances and human health hazards. In 2013, we saw a significant increase in the number of home visits needed.

Grant County also operates a regional Radon Information Center (RIC) serving a six county region. Radon is a naturally occurring gas that is considered to be the second leading cause of lung cancer in the U.S. The RIC provides free consultation and radon test kits to homeowners concerned about radon. Below are the statistics for environmental health:

<i>Number of Contacts</i>	2008	2009	2010	2011	2012	2013
Water	208	179	215	157	184	152
Air Quality	425	272	259	213	216	206
Asbestos	88	210	197	153	196	151
Hazardous Materials	0	0	0	0	2	0
Lead Hazards	134	167	138	161	141	114
Radiation Hazards	404	209	234	183	180	208
Housing	418	270	174	218	130	198
Rabies	107	113	92	117	101	114
Sewage	47	183	180	143	217	161
Solid Waste	146	213	241	179	202	180
Insects/Rodents/Animal Problems	111	170	162	132	170	146
Home Inspections	235	254	308	261	281	359
Totals	2323	2240	2200	1917	2020	1989

Tobacco-Free Coalition

In 2013, the Tobacco-Free Coalition continued a partnership with resources being provided by Family Services of Southern Wisconsin and Northern Illinois, Inc. The coalition provided tobacco control and coordination services to Grant, Iowa, and Lafayette Counties. The primary focuses of the Multi-jurisdictional Tobacco Coalition include monitoring for new tobacco products that may be marketed to children, policy work, and sustainability efforts. Attention is now being paid to E-cigarettes which are gaining popularity among youth and adults. This Coalition also continued to partner with the Grant County Sheriff's Department to check establishments selling tobacco products to ensure that they were not selling these products to minors. Compliance checks were done in both Grant (52 checks) and Iowa (23 checks) County establishments that sell tobacco products. The 2013 illegal tobacco sales rate to minors in Grant and Iowa Counties were at 5.8% and 4.3% respectively.

S.A.F.E. GRANT COUNTY COALITION

The S.A.F.E. (Safe Actions for Everyone) Grant County Coalition serves all of Grant County since 2004 and has been primarily supported through competitive federal/state grants (such as the Drug Free Communities, STOP, State Tobacco Control, and OJA grants) and the innumerable volunteer hours of its many members/partners from multiple sectors of Grant County.

In total, the coalition has brought in over 1.3 million grant dollars. Over 1.4 million dollars of in-kind contributions were made as well for a total contribution of over 2.7 million dollars to help save lives and create safer communities in Grant County. According to a University of Oklahoma Outreach study (2004), it is estimated that for every dollar invested in substance abuse prevention programs, from \$2 to \$20 is returned in benefits. (Benefits are estimates of savings over a period of time resulting from reduced demand for health and social services.) This means a return to the county of between \$5 and \$50 million dollars for the coalition's efforts.

Since the STOP and OJT grants have expired and the Drug Free Communities (DFC) grant is in its tenth and final year of funding, the coalition has been seeking alternative funding streams and resources to continue its mission to "*promote responsible behaviors to reduce/prevent substance abuse and other risky activities among youth/adults in Grant County.*" The coalition is particularly seeking local funds so there is more local ownership and the strong voice/driving force that the coalition has built up over the years can continue to keep kids and others from falling victim to suicide, alcohol abuse, and other drugs in the county.

Some of S.A.F.E's initiatives/accomplishments over the years include:

1. Providing drug-free education through Town Hall or Community Meetings. Most recently, the coalition responded to an urgent call from a local hospital to arrange for training for emergency medical providers, law enforcement, and the general public so the hospital and the community could better deal with the dangerous designer drugs that were infiltrating our area. Also, in February 2014, the coalition responded to the Sheriff's Office to help raise awareness on the alarming rise of heroin in the county), legislative breakfasts/meetings, numerous classroom presentations from elementary school to the college level, and informative displays at public events regarding substance abuse and suicide prevention.
2. Helping support/fund 3 permanent drop-off prescription drug boxes in Lancaster, Muscoda and Platteville so that citizens of Grant County (and beyond) can dispose of their unused/expired Rx drugs more quickly and conveniently, thus preventing the drugs from potential misuse. Prior to the drop-off boxes, the coalition hosted many Rx round-ups around Grant County to collect and dispose of these drugs.
3. Holding an annual Youth Leadership Conference (YLC) to create student leaders who can influence and educate peers about healthy and safe alternative activities to alcohol, tobacco, and other drugs; 726 middle/high school student leaders have been trained since 2002.
4. Holding five annual day-long PLUNGE reality events into the dire consequences of underage drinking/driving and "drugged" driving, which involves 80 to 90 students from public/private schools throughout the county and 200 hours of volunteer time from community leaders (including Judge Day, Sheriff's Office, Lancaster Police Chief/officers, EMTs, Lancaster Fire Dept., GRHC, funeral home, etc.).
5. Assist with a countywide Underage Drinking Task Force to help curb underage drinking and related concerns. As a result, many neighborhoods throughout the county (including those around the UW-P campus) are reporting a decrease in problematic house parties.
6. Continuous Public Service Announcements/media campaigns over the past 6 years on radio and TV regarding alcohol, tobacco, marijuana, and Rx drugs. Youth helped the coalition create and record PSAs for this effort.
7. Offering a car chip program to parents of all high schools in Grant County so that they could monitor their youth's driving skills.

The efforts of the Coalition have led to a reduction of the abuse of alcohol, tobacco, and marijuana in our county as noted in the Southwest Youth Survey (SWYS) results. SAMHSA closely monitors and studies the results of their grant programs and they have shown that communities with DFC grants have significantly decreased substance abuse more than those communities without these grants.

Consolidated Grants

The Wisconsin Department of Health Services has continued to provide state and federal grant funds to local health departments in a pass through process called Consolidated Contracts.

The following programs are examples of services provided using these funds:

Maternal & Child Health – Promotes systems building, Healthy childhood development and injury prevention

Lead – Promotes blood lead screening of children and follow-up services for children with elevated lead levels (Grant, Iowa, Lafayette, Richland, and Vernon counties funds)

Radon – Provides testing, education, and consultation services for residents regarding the risk of radon. (Grant, Iowa, Lafayette, Richland, Vernon, and Crawford counties funds)

WIC (Women, Infants & Children) – Provides education and nutrition services, access to healthy foods, and referrals to services for pregnant women and children under the age of five who meet the income guidelines.

Immunizations – Funds are used for maintaining records and for entering information into Wisconsin Immunization Registry (WIR) as well as to help ensure that children are up to date on immunizations.

WWWP (Wisconsin Well Women's Program) –Provides health services and screening to low income women.

Public Health Preparedness and Response – Provides federal funds for training and planning responses to natural and man-made public health emergencies. This is done in conjunction with Emergency Management, Law Enforcement, Fire Departments, and health care providers as well as other partners.

Prevention - Provides some limited funding for environmental health services.

HOME NURSING

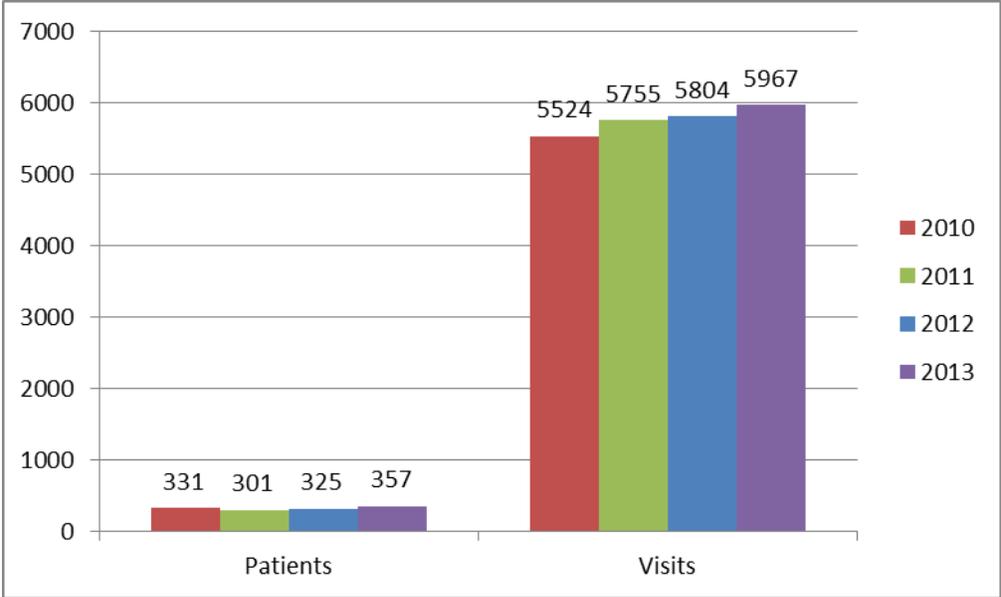
In 2013, 357 clients received services from the Grant County Health Department. This number shows an increase of 33 more clients being served in 2013 than in 2012. These clients received a total of 5967 visits from the Department. These visits are provided by nurses, physical therapists, occupational therapists, speech therapists and home health aides. These services are paid for by Medicare, Medical Assistance, private insurance, Medicare replacement policies, private pay and family care. No one is denied service because of inability to pay.

The Department provides physical, occupational and speech therapy services through contracts. The Department utilizes therapy contracts with all three hospitals in our county. This allows the therapy services to be provided by a therapist who is in their area.

2013 proved to be a challenging year with both the increase in clients served and number of visits, these increases have stretched our nursing capacity, which the department continues to evaluate.

In 2013, two clients received personal care only services. In 2012, 136 visits were made to these clients by our home health aides. These clients receive assistance with bathing, hair care, skin and nail care. These clients also receive a supervision visit from our nurses every 50 to 60 days. In 2013, eleven nursing visits were made to these clients. These services are covered by Medical Assistance or private pay.

A comparison of patients and visits is noted below.



(2012 visit number corrected)

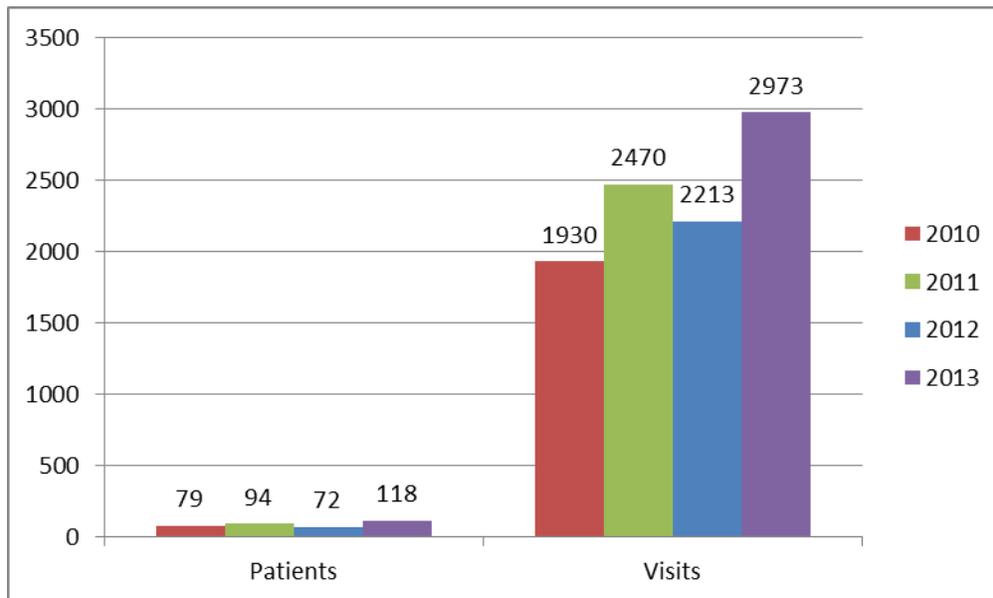
HOSPICE

In 2013, 118 clients were served on the Grant County Hospice Program. This was an increase of 46 clients from 2012. These clients receive services from a multi-disciplinary support team that includes registered nurses, social workers, hospice aides, nurse practitioner and therapist. Clients choose hospice care when their physician certifies that they are terminally ill and they are no longer seeking active treatment for their illness.

Hospice care focuses on medical and personal comfort for people in the last months of their lives. Hospice provides comfort care so clients can live as fully as possible until the end of life. Hospice also provides support services to clients' families as well as bereavement services for at least 13 months following the clients' death.

In 2013, Grant County experienced a 63% increase in our hospice caseload from 2012. This may have been in part due to the closing of a hospice that had served Grant County. This increase in census has stretched the departments nursing capacity and we continue to evaluate our nursing staffing.

A comparison of patients and visits is noted below:



Board of Health Members

Dwight Nelson, Chair
Carol Beals, Vice Chair
Gary Ranum, Secretary
John Beinborn
Vern Lewison
Meena Maski, MD
Mary Kay Logemann, RN, BSN
Matt Andrews, DDS

The persons listed below are directly responsible for the activities and programs noted in this report. Their dedication and commitment to the residents of Grant County is evident in the quality of the services provided to our communities.

Health Department Staff

Jeff Kindrai, MSPH, RS, Director/Health Officer
Mary J. Rasmussen, RN, BSN, Assistant Director
Deb Udelhoven, Administrative Assistant

Amy Belscamper, Fiscal Clerk
Amy Miller, RN, BSN
Ann Reuter, BF Counselor
Brenda Cullen, CNA
Brenda Kennicker, RN, BSN
Casey Kudlik, LTE CNA
Carol Johnson-Hohol, Contract WIC Dietitian
Cheryl Meier, CNA
Devan Toberman, Dental Hygienist
Erin Huebschman, Associate Hospice Medical Director
Heather Meier, LTE RN, BSN
Holly Muench, RN
Jennifer Busch, RN, BSN
Julie Leibfried, RN, BSN
Katherine Reuter, Nurse Practitioner
Kathy Marty, DFC Project Director
Kessa Klaas, RN, BSN
Kim Martens, RN, BSN
Laura Fritz, BF Counselor
Lindsay Hanson, RD, WIC Dietitian
Lori Shea-Polzin, BF Counselor
Lorna Wolf, Billing Clerk
Mareeta Kolman, SW
Margaret Schmitt, Asst DFC Coordinator
Mary Allen, Admission Specialist
Mary Koenen, RN, BSN
Meena Maski, MD, Medical Director
Michelle Farrell, Contract Pharmacist
Michelle Young, RN
Mike Parks, Speech-Language Path.
Nikki Frisch, Dental Hygienist
Rebecca Franzen, BF Counselor
Robert Smith, Hospice Medical Director
Selina Baus, RN, BSN
Shawn Handfelt, CNA
Steve Straka, LTE Clerical
Tonia Wagner, STOP Coordinator
Tracy Schildgen, RN, BSN
Troy Moris, RS