

# 2006

TO: The Honorable Chairman, Eugene Bartels 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 2006

The work and efforts of a dedicated staff and Board of Health are reflected in this report. A special thanks to the Grant County Board of Supervisors, UW-Extension, Corporation Counsel, Sheriffs Department, Emergency Management, Area Health Providers, Infection Control Practitioners, Pharmacists, SW Community Action Program, and Wisconsin Department Health & Family Services.

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

## **PUBLIC HEALTH**

### Essential Public Health Services

1. Monitor health status to identify community health problems.
2. Identify, investigate, control, and prevent health problems and hazards in the community.
3. Educate the public about current and emerging health issues.
4. Promote community partnerships to identify and solve health problems.
5. Create policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and insure safety.
7. Link people to needed health services.

8. Assure a diverse, adequate, and competent workforce to support the public health system.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Conduct research to seek new insights and innovative solutions to health problems.
11. Assure access to primary health care for all.
12. Foster the understanding and promotion of social and economic conditions that support good health.

### Health Priorities

- ▶ Access to primary and preventative health services.
- ▶ Adequate and appropriate nutrition
- ▶ Alcohol and other substance use and addiction
- ▶ Environmental and occupational health hazards
- ▶ Existing, emerging, and re-emerging communicable diseases
- ▶ High risk sexual behavior
- ▶ Intentional and unintentional injuries and violence
- ▶ Mental health and mental disorders
- ▶ Overweight, obesity, and lack of physical activity
- ▶ Social and economic factors that influence health
- ▶ Tobacco use and exposure

### Department Overview

Grant County Health Department administered over 20 programs with a staff of 30 including 3 individuals that work less than 20 hours per week (~26 FTE). The 2006 operating budget was approximately 2.13 million dollars (excluding donations). This is a decrease from the 2005 budget which was approximately 2.4 million dollars. Approximately 1.78 million dollars (2006) was obtained from sources other than the local tax levy making the health department largely funded by State, Federal, grant, and fee for service sources.

In 2006, 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 services, many of which are mandated by the State (see essential public health services above). The other three programs provide direct services to individuals with health problems or disabilities. These programs include, Personal Care, Personal Care Supervision (for Unified and Social Services), and Home Nursing.

Our Home Nursing program did not require the levy funds budgeted in 2005 but required significant levy support in 2006. Our Health Check program (serving children) did not require levy funds in 2006 but normally uses about \$30,000 of levy funds. All programs are supported by levy funds through basic infrastructure (see MAXIMUS report), administration, and other ancillary activities.

## **Highlights and Challenges in 2006**

In 2006 our department saw a marked shift in demand for services. The Grant County Hospice program experienced a dramatic increase in the number of referrals and clients. A LTE Hospice nurse was hired for a portion of 2006 to assist with the increased demand. Personal Care and Home Nursing programs saw reduced revenue and a shifting of client demographics to include more individuals on medical assistance.

It is currently unknown if these trends are an anomaly or sign of an ongoing need or lack thereof. Additionally, Family Care and a new hospice provider in our county (Southwest Health Center) make assessment of need and subsequent positioning of resources and structure changes to meet anticipated needs complex.

The Grant County Drug-Free Community program was renewed in 2006 for the third time. This grant provides \$100,000 per year to Grant County to help reduce drug, alcohol, and tobacco use among children and eventually adults in our county. By the end of this grant cycle over \$300,000 will have been brought into our county to reduce problems with substance abuse through this grant program.

A new vaccine for Rotavirus, a viral gastrointestinal illness that affects infants and children, was offered for the first time in 2006. Also, expanded use of Varicella (chickenpox), Meningitis, and Hepatitis A vaccine were implemented in 2006.

In 2006, Grant Health Department completed a working draft of a pandemic influenza plan. Meetings and planning efforts with our PPHR partners continue into 2007 with a focus on the public outreach, essential services, and pharmacy issues.

Once again, one of the greatest challenges of 2006 was the influenza vaccine distribution. Influenza vaccine was shipped from manufacturers in small lots (portions of total orders) to local health departments across the state forcing the cancellation of scheduled clinics in many areas. Grant County Health Department did not receive adequate influenza vaccine during the optimal vaccination period so substantial efforts were placed in locating entities with surplus influenza vaccine early in the shipping schedule.

Grant County Health Department secured 800 doses on loan from Dean Health allowing us to hold clinics as scheduled until our allotment arrived. Unfortunately, we had to refrain from advertising most clinics as supplies were very limited thus reducing the total number of those getting vaccinated (at least through our department).

Since vaccine arrived so late in the season, we were left with 400 doses of vaccine at the end of the traditional vaccination period and we were only able to return about 150 doses. Complaints were registered with the manufacturers and the State regarding the distribution of vaccine but little can be done to ensure adequate supplies in future years without Federal intervention.

In addition, re-imburement for influenza vaccine from private insurance, many of them Medicare replacement plans, had very low rates some only covering 65% of our charges.

Finally, a mumps outbreak originating in Iowa (in 2005) impacted Grant County in 2006. Unfortunately, Iowa did not notify us or the State of Wisconsin that they were experiencing a mumps outbreak and Grant County only found out about this outbreak in a “round about” way months after it had begun. Communication between states is still problematic even though we have exercised together with Iowa and Illinois several times (including once in Lancaster).

## **Health Department Program Overviews**

### **Public Health**

Public Health services are largely mandated by the State to ensure the control of communicable diseases as well as to provide a minimal level of health services that are available to a county’s residents. Health departments are also responsible for health promotion in the community. Education, outreach, and prevention efforts that help reduce the incidence of disease and promote healthy lifestyles are key public health components. Efforts center on local need and the priorities identified in the State health plan “Healthy People 2010”.

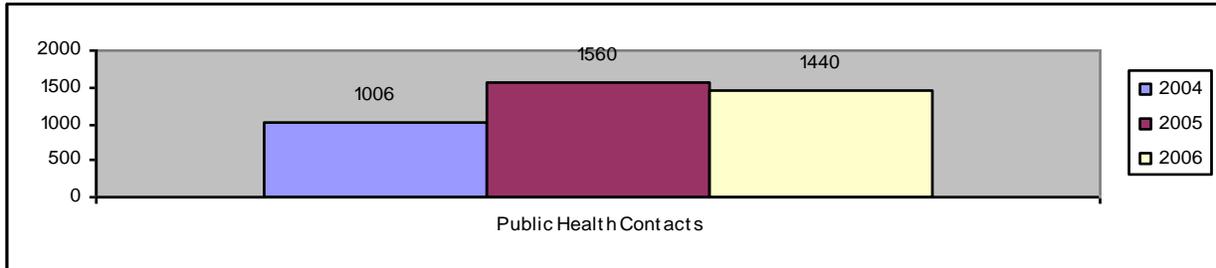
The Health Department monitors community health using surveys and a multitude of data sets available locally and through the State and private entities. We also educate through media releases, newsletters, classes, and outreach at community events. We provide satellite clinics in 12 areas across the county and provide services in homes and directly through our office.

Public Health clients receive home visits and other contacts for education, assessment, and monitoring or screening of/for health conditions. Bundling services and creating one access point instead of many points of entry continues to be a priority. Public Health contacts occur in homes, schools and other venues for reasons such as:

- 1) New mother and baby visits
- 2) Children with special health care needs

- 3) Chronically ill adults needing health teaching, and supervision
- 4) Families with individuals at risk for health or other problems
- 5) Health Check and related services
- 6) Communicable disease control

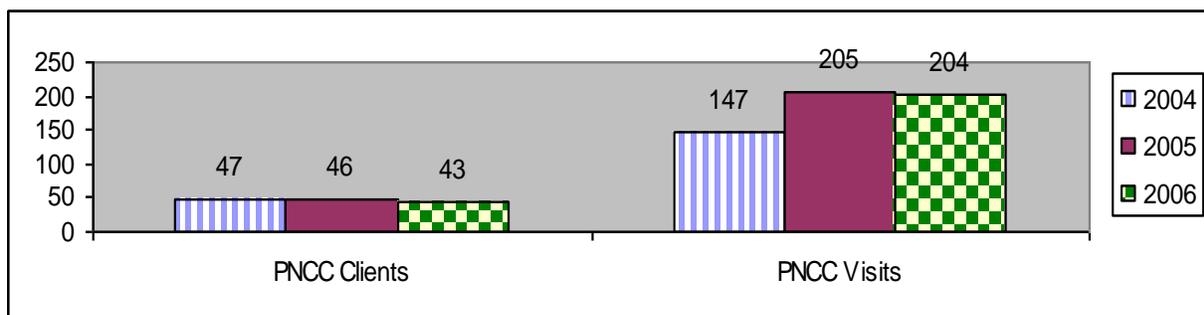
Below are the number of contacts for Public Health



### **Prenatal Care Coordination (PNCC)**

All pregnant women in Grant County are eligible to receive nursing visits during their pregnancy by a staff nurse from the Grant County Health Department. Access to PNCC greatly improves birth outcomes and saves thousands of dollars per year on preventable conditions by linking pregnant women to services that might not otherwise be provided. Nurses stress the importance of early and regular prenatal care and assist in coordinating this care with the woman's healthcare provider. Information is provided to clients on other health department programs such as Women, Infants and Children (WIC) and Health Check as well as other resources available to them.

Education crucial to child development and information about pregnancy related topics including: breastfeeding promotion, safety, nutrition, pregnancy related physiological and emotional changes, infant care, and parenting is provided as well. Nurses incorporate counseling regarding the dangers of alcohol, drug, and tobacco use during pregnancy, and encourage quitting these behaviors by providing referrals to counseling or cessation groups when necessary. The potential for abuse is assessed and appropriate referrals are made when necessary. Below is the number of visits for Prenatal Care Coordination:



## **School Health**

Since many schools in Grant County do not have their own nursing staff, the Grant County Health Department provides basic health services to area schools and assists with the development of required school health plans. Direct services provided by Grant County Health Department staff include:

- Health plan and policy development
- Vision and hearing screenings for selected grades, including rechecks and referrals to appropriate health care providers as needed.
- School immunization clinics
- Follow-up on immunization requirements for entry.
- Blood pressure screening for 10<sup>th</sup> graders.
- Scoliosis letters to 6<sup>th</sup> and 8<sup>th</sup> graders
- Wellness clinics for employees
- Flu and pneumonia vaccine for employees
- Health resources and presentations for teachers, staff, students and parents

The Grant County Health Department also provides support for school districts that employ their own school nurse by acting as a resource. Meetings are held several times a year to update them on important issues and we assist them in administering flu, pneumonia, and tetanus/diphtheria immunizations. Occasionally, support staff is provided to schools that have their own nursing staff to help out with health screening efforts.

Grant County Health Department also follows up on cases or reports of communicable diseases and identifies contacts to control the spread of illness in our school populations as part of our mandated responsibilities. A total of 592.25 nursing hours were spent relating to school health not including communicable disease control efforts. In addition, 5,020 miles were traveled by nurses relating to school health services. Public health aide time and administration are not included in this total (this is not specifically kept track of).

## **Jail Health**

A nurse from the Grant County Health Department staffs the Grant County Jail on a regularly scheduled basis providing 24 hours of scheduled onsite care and coordination per week (Monday, Wednesday, and Friday). In addition, the jail is included on our “on call” scheduling rotation and our department provides services as needed ensuring complete coverage 24 hours a day, 7 days a week including holidays. The jail nurses coordinate with health care providers to provide necessary care in as efficient and cost effective manner as possible. Services include training of jail staff and acting as a resource for a variety of public health issues as well as directly serving inmates by doing such things as ordering medications, collecting laboratory specimens, providing care, and maintaining records.

Jail Health policies were started in 2006 and requests for a medical director for the jail health program were granted by the Sheriffs Department and budgeted for 2007.

In 2006, 220 visits were made to the jail resulting in 1089.5 of nursing time. This is up significantly from 2005 where 847.75 hours were provided in 199 visits. In addition, 1,075 miles were traveled to provide jail health services in 2006. Many hours of charting and processing orders were also absorbed in the public health and home nursing budgets as work occurs out of the jail as well. In addition, significant amounts of administration time were needed to coordinate services, address complaints, and cover duties when problems at the jail arose.

### **WIC (Women, Infants and Children) Program**

The purpose of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is to promote and maintain 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 promotes and supports breastfeeding.

Health benefits of WIC participation include reduced:

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

Food Benefits for participants include:

- Milk, eggs, cheese.
- Cereals.
- Peanut butter, dried beans and peas.
- Tuna fish.
- Carrots.
- Fruit juices.
- Infant formula.

An average of 1,096 individuals were served per month, representing a slight decrease from 2005. ROSIE was fully implemented to the program to improve data collection. Farmers market continues to be an option for WIC participants to receive fresh produce while the added revenue assists area farmers that chose to participate. Clinic participation rates were monitored and surveys were conducted regarding our clinic locations and frequencies. After careful consideration the clinic schedule was reduced. Low volume at certain clinics, changes in data collection systems requiring live internet connections, increased travel expenses, and staff time limitations were also considerations in this reduction.

In 2006, WIC families spent a total of \$553,899 at 12 Grant County grocery stores. The total spent is down from 2005.

### **MCH Child Passenger Safety Seat Program**

This program helps to ensure the safe transportation of infants and children in vehicles. Trained staff provides information about child restraints and the compatibility of child safety seats with both children and vehicles. In 2006, a new booster seat law was passed in Wisconsin and significant outreach was done to educate the public as to the new requirements. Children must now be in a car seat until they reach age 4 and in a booster seat until they reach age 8.

Tiered structure now applies:

- Less than 1 year old, or less than 20 lbs. must be in a rear-facing child seat in the back seat (if so equipped)
  - Age 1 to age 4, or less than 40 lbs. must be in a forward-facing child seat in the back seat (if so equipped)
  - Age 4 to age 8, between 40-80 lbs., and no more than 4 ft. 9 ins. must be in a booster seat
- The fines remain the same, although tiered for ages 0-4 and ages 4-8
- The exemption allowing temporary removal of a child from a restraint to attend to personal needs has been removed
- The exemption for physical, medical, or body size condition still applies to booster seats and seat belts

We also offer free or low cost child passenger safety seats to low income families. In 2006, 80 car seat inspections were performed up from 38 in 2005. Many donations and grants have helped support this program.

### **Health Check**

The Health Check Program serves Grant County's children aged birth to 21 years. Health Check provides comprehensive examinations that include:

- √ Head to toe physical exams
- √ Immunizations
- √ Lab tests
- √ Eye exams
- √ Growth and development assessment
- √ And other screens

Fluoride dental varnish was added as a new service in 2006. This helps reduce some of the problems we are experiencing in the county with the lack of access to dental care for those on MA or without dental insurance. It also provides an opportunity to closely examine children's oral health conditions so that children can be referred and linked to services more efficiently.

Health check screenings occur at clinics that co-locate with the WIC Program. We also complete screenings in schools and at homes. Health Checks are reimbursed by Medical Assistance, BadgerCare, Healthy Start, and Maternal-Child Health grant funds. Quality assurance activities improved billing in 2006. This combined with increased numbers, the introduction of fluoride varnish services, and reduced staffing has improved the cost effectiveness of this program dramatically. In 2006 we had an estimated saving of \$33,000 in levy funds.

In 2006, 581 Health Checks were performed. Additionally, 618 blood lead screenings were completed for children in Grant County. In comparison, 429 Health Checks and 607 blood lead screenings were done in 2005. It should be noted that we have been operating with one less staff person for much of 2006 in this program in an effort to balance our department's budget (overall). We have pulled staff from clerical and personal care to cover this shortfall.

### **WWWP (Wisconsin Well Woman Program)**

Grant County Health Department administers the WWWP for women ages 45-64 meeting specific income requirements. In 2006, 67 participants from Grant County were able to access this program. This represents a decrease from the number of active participants from 2005. The reduction is a result of changes in the program including more restrictive eligibility requirements. An increase in the minimum age to participate from 34 to 45 years of age was implemented in 2005 and 2006. There has also been a reduction in the number of services covered.

The programs main focus is increasing the screening rates of women for the early identification of cancer by covering costs for pap smears and mammograms. Women identified with cervical cancer or breast cancer through this program may qualify for Wisconsin Well Woman Medicare which covers the treatment of these illnesses. State funding for this program has been outpaced by demand for services leaving many without medical coverage that previously would have qualified.

Encouraging women to enroll in other programs such as the Family Planning Waiver (which we now provide in our EIDP program) assists in continuing coverage for lower income women that were dropped from WWWP.

## **Immunizations**

In 2006, the immunization clinics were routinely to be held at 12 different locations throughout the county including all WIC / Health Check Clinics and vaccine was available at the health department office. Many vaccines are provided at no charge while others are billed at minimal expense. A new vaccine for Rotavirus, a viral gastrointestinal illness that affects infants and children, was offered for the first time in 2006. Also, expanded use of varicella (chickenpox), and Hepatitis A vaccine based on updated recommendations were implemented in 2006. In addition, Tdap (pertussis, diphtheria and tetanus) vaccine and a meningococcal vaccine were offered to a broader base of the population free of charge.

A mumps outbreak also resulted in expanded use of MMR vaccine to help ensure proper levels of immunity among priority individuals and health care workers. The recent pertussis and mumps outbreaks have seemed to play a role in improving immunization rates among those who have never been immunized or have only accepted limited vaccines such as our Amish populations.

In 2006, nearly 81% of children aged 12 to 23 months in Grant County received the necessary vaccines on time. This is up from about 75% of children in the same age group in 2005. After taking into consideration those that were eventually caught up, nearly 96% of children aged 12 to 23 months had received the required vaccinations in 2006. Below are the numbers of vaccinations given by the Grant County Health Department in 2006. It is important to note the continued expansion of the use of combined vaccines has made comparisons to previous year's statistics more complex.

<b>Number of Doses of Vaccine</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
DTaP - Diphtheria/Tetanus/Pertussis	1,036	466	484	484
Polio	846	241	281	298
MMR - Measles/Mumps/Rubella	447	455	492	548
Hepatitis A (pediatric)	6	1	6	14
Hepatitis B	682	79	57	61
Td - Tetanus/Diphtheria	1,488	858	555	885
Tdap (Adacel)	0	0	1	158
Hib - Haemophilus Influenza type B	610	616	448	433
Varicella (Chickenpox)	203	524	308	248
Prevnar	688	608	657	558
Pediarix (DTaP/HepB/Polio)	272	601	430	384
Comvax (Hib/Hep B)	269	53	42	12
Meningitis (college age)	127	51	71	121
Rotavirus (new in 2006)	0	0	0	3
Influenza	3,034	3,040	2973	2822
Pneumonia	80	95	65	95
Hepatitis A (adult)	15	21	34	46
Hepatitis B (adult)	240	180	164	169
<b>Total</b>	<b>10,043</b>	<b>7,889</b>	<b>7068</b>	<b>7339</b>

## **Communicable Disease Follow-Up**

Over 85 different communicable diseases are reportable to local health departments. Local public health departments are responsible for conducting follow-up activities with each reportable illness to attempt to confirm the illness, educate the individual(s) and control the spread of infectious diseases. Telephone calls, letters, and/or face-to-face contacts are used to gather and distribute information. Identifying contacts to cases and locating individuals can be a very time consuming process.

In 2006, significant numbers of mumps cases were identified in Grant County resulting in substantial amounts of staff time used in investigating and confirming cases. In addition, two West Nile Virus cases were reported in 2006 and Lyme disease continues to be reported frequently although less cases of Lyme disease were reported than in 2005.

We continue to work the State on the Wisconsin Electronic Disease Surveillance System (WEDSS) and the linkages with the Electronic Laboratory reporting (ELR) System by participating in the WEDSS Lead Team forwarding this program. This system is being piloted in Milwaukee and other areas of the State in early to mid 2007 and will likely be available for all health departments toward the end of 2007 or early in 2008.

Below is a summary of communicable diseases that were reported to the Grant County Health Department in 2006.

### **COMMUNICABLE DISEASES**

(January 1 - December 31, 2006)

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.

#### **SEXUALLY TRANSMITTED DISEASES**

	<b>2004</b>	<b>2005</b>	<b>2006</b>
Chlamydia	78	68	59
Gonorrhea	2	9	8
Herpes II	16	12	6

#### **VACCINE PREVENTABLE DISEASES**

	<b>2004</b>	<b>2005</b>	<b>2006</b>
Chickenpox	1	0	7
Hepatitis A	1	0	0
Hepatitis B	0	2	0
Hib	0	0	0
Pertussis	4	12	2

<b>COMMUNICABLE DISEASES</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
Arbo Virus	1	1	2
Aseptic Meningitis	0	0	0
Bacterial Meningitis	2	0	0
California Arbovirus	0	0	0
California Encephalitis	0	0	0
Campylobacter	16	23	16
Cat Scratch Disease	0	0	0
Cryptosporidium	10	18	15
Cyclosporiasis	0	0	1
E.Coli	3	1	5
Ehrlichiosis	1	0	1
Entamoeba Histolytica	0	0	0
Giardia	10	7	2
Hepatitis C	9	3	6
Histoplasmosis	0	1	0
Invasive Hemophilus Influenza	1	0	0
LaCrosse Encephalitis	1	0	0
Legionella	1	0	0
Listeria	1	0	0
Lyme Disease	23	31	24
Mumps	0	0	26
Mycobacterium Arium	0	2	1
Q Fever	1	1	0
Salmonella	4	12	7
Shigella	0	1	0
Strept A	0	0	2
Strept Pneumonia	3	0	0
Strept Agalc B	1	0	0
Tuberculosis	1	0	0
Viral Encephalitis	0	1	0
Viral Meningitis	5	0	0
West Nile Virus	0	0	2
Yersinia	1	0	0
	<b>95</b>	<b>102</b>	<b>110</b>

### **TOBACCO-FREE COALITION**

In 2006, the Tobacco-Free Coalition again partnered with the Grant County Sheriff's Department to conduct the Wisconsin WINS Program completing 170 compliance checks of establishments in Grant County that sell tobacco. The tobacco sales rate to minors was at 4.5% which was below the state-wide percentage rate. During compliance checks this year, it was found that 39 establishments no longer sell tobacco.

An educational campaign regarding smoke-free workplaces continued in Platteville and was extended into Lancaster. A community supper was held in Platteville with over 100 people attending and a smoke-free dance was held in Lancaster with over 40 people in attendance.

The Youth Leadership Conference was held in June in which 69 students from across Grant County and neighboring counties attended. Tobacco issues were discussed and programming within the schools will be implemented in the 2006-2007 school year.

In June 2006, a Multi-Year Action Plan was developed, written and then approved by the Grant County Board of Health. The goals and objectives of this plan will be implemented through 2009.

### **Environmental Health Programs**

Grant County is the lead agency in a five county Environmental Health Consortium. The other counties include Lafayette, Iowa, Richland, and Vernon. Environmental health issues range from human health hazards such as mercury spills or other highly toxic substances, to vermin infestations, water and air quality issues, "dirty houses" and many other problems that can impact the environment and public health.

In 2006, the Grant County Health Department received a \$1,500 grant to do enhanced mosquito surveillance and breeding ground abatement to help prevent West Nile Virus and other arboviral infections. Arboviral infections such as West Nile Virus and Lacrosse Encephalitis can cause serious illness and death. Mosquitoes are the primary mode of transmission for these and other illnesses.

The Environmental Health Coordinator also participated in the youth rural safety day programs in several counties including Grant County. The 2006 Grant County Rural Safety Day attracted over 300 children and more than 50 volunteers offering numerous programs to protect youth from injury and inform them on what to do to help others safely.

Grant County continues to house the regional Radon Information Center (RIC) for the 6 county region. Radon is a naturally occurring gas that is considered to be the second leading cause of lung cancer in the U.S. Over 500 radon test kits were given out through our RIC for the second year in a row. In addition, many activities and promotions were conducted to increase awareness of the hazards of radon and how to fix or prevent radon problems.

Despite an increase in the number of contacts and services provided in 2006, Grant County was ranked 54<sup>th</sup> of all counties in Wisconsin in Physical Environment in 2006 by the University of Wisconsin Population Health Institute. In 2005 we were ranked 50<sup>th</sup> and this reduction demonstrates the need for more resources in this area.

Below is the statistics for other environmental health issues:

<b>Number of Contacts</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
Water	97	116	94
Air Quality	45	30	182
Asbestos	9	5	96
Hazardous Materials	2	1	67
Lead Hazards	36	23	118
Occupational Hazards	1	0	0
Radiation Hazards	351	280	210
Other Environmental Hazards	3	3	0
Housing	54	36	205
Rabies	312	321	99
Sewage	12	3	48
Solid Waste	22	10	139
Insects/Rodents/Animal Problems	153	115	87
Home Inspections	NA	NA	210
<b>Totals</b>	<b>1,097</b>	<b>943</b>	<b>1555</b>

### **Public Health Preparedness and Response**

During 2006, Grant County participated in many activities as a county, with its local partners, and the six county Public Health Preparedness and Response (PHPR) Consortium. We were involved in Interim Pharmaceutical Stockpile exercises, pandemic influenza exercises (local, regional, and cross state borders) and a mass dispensing clinic exercise. We also completed several assessment surveys to identify areas where improvement is needed in planning efforts. The exercises and assessments lead to changes in Grant County Health Department preparedness plans. In 2007, formal work plans will be developed for addressing areas of need.

In 2006, we also conducted a mass mailing outreach to area businesses to encourage preparedness at a business level as well as a personal level for their employees. The mailing resulted in several inquiries and planning meetings with area businesses to discuss how to be better prepared and what kind of assistance the health department can provide.

We forwarded the message that individual preparedness is important for any emergency. This was accomplished through displays, newsletters, media releases, and presentations throughout the county. We solicited pharmacist volunteers for our mass pharmaceutical dispensing activities and have 6 area pharmacists that are willing to help. We also participated extensively with University of Wisconsin-Platteville in their efforts for emergency preparedness planning and exercised with them as well.

Grant County was selected for representation in the Public Health Preparedness Leadership Group which is looking to set the standards for preparedness throughout the State. However, decreases in funding directed toward preparedness and a continued lack of core funding from the State for public health harms efforts to maintain a solid infrastructure at a local level.

## Consolidated Grants

The Wisconsin Division of Public Health 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** – Public Health Home Visits, Health Check Screening, Car Seat Safety Checks

**Prevention** - A five County Environmental Health consortium including Grant, Iowa, Lafayette, Richland, and Vernon counties to address environmental health issues and human health hazards

**EIDP** – Helps cover the cost of enrollment into the Family Planning Waiver Program and pregnancy testing.

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

**Radon** – Provide 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 nutrition services, drafts, and referrals to women and children under the age of five who meet the income guidelines.

**Immunizations** – Funds used for maintaining records for each person receiving immunizations and for entering information into Wisconsin Immunization Registry (WIR).

**WWWP (Wisconsin Well Women’s Program)** – The WWWP provides Health services and screening to low income women.

**Tobacco-Free Coalition** – Funds from Wisconsin Tobacco Settlement provides education and prevention of tobacco use, especially in youth as well as funding for law enforcement and youth to do compliance checks at businesses throughout Grant County.

**Public Health Preparedness and Response** – Federal funds for planning public health responses and training in conjunction with Emergency Management, Law Enforcement, Fire Departments, health care providers and the community to prepare for local emergencies – both man made and natural disasters.

## **Other Grants**

**IV-E** – Provides parenting education services to families with young children, including referrals to other resources for families at risk for health or other problems.

**Drug-Free Community Grant** – A grant funded program that started in 2004 to address the challenges of alcohol, tobacco and other drug usage among youth and eventually among families through coalition building and community empowerment tactics. This \$100,000 per year grant is renewable for 5 years. We are in our third year.

### **Drug Free-Community Grant**

The Grant County Drug-Free Community Coalition helps reduce substance abuse, particularly tobacco use and underage drinking among youth. The key to its overall success is the ability to initiate positive changes in social norms through a research-based strategic work plan as well as community outreach using leaders from 12 community sectors representing the many facets of society. In time, a positive lasting impact should be seen among both youth and adults. The coalition supports after school programs, holds community suppers, provides wellness displays for numerous community events, offers sessions on strengthening families and training opportunities for interested individuals on substance abuse and related issues. It also creates and utilizes youth role models that can influence and educate peers about healthy and safe alternative activities to drugs by sponsoring an annual youth leadership conference and follow-up student activities.

In 2006, the coalition sponsored effective school programs in RiverRidge, Lancaster, Iowa-Grant, and Cuba City. Four free community suppers featuring drug-free information and family activities were held in Platteville, Lancaster (2) and Cassville. Also, the coalition partnered closely with UW-P and SWTC to help curb binge drinking on their campuses.

The Drug-Free Community Coalition continued its involvement with the Southwest Wisconsin Youth Survey (SWYS) to assess youth trends in alcohol, tobacco, and other drug usage as well as youth's beliefs and perceptions related to use. In addition, surveys identify risk and protective factors that influence beliefs and choices. According to the SWYS survey, alcohol is the most often used substance among teens and 1 in 5 teens had reported binge drinking in the month prior to the survey.

In 2006, prescription drug abuse misuse such as teens obtaining and using prescription drugs that are not their own, became a topic of interest. Linkages with local law enforcement, schools, mental health agencies, and drug enforcement officers help to identify new trends and where to direct resources and efforts. By the end of the current grant cycle over \$300,000 of federal assistance will have been provided to Grant County for substance abuse prevention.

# PERSONAL CARE SERVICE

## *Personal Care Program*

In 2006, twenty-five clients were served on Grant County Health Departments Personal Care Services Program. This program provided bath care, hair care, skin care and other personal care assistance to clients in their homes. This care is provided by personal care workers. In addition all clients receive a visit by a supervising registered nurse every 50 to 60 days. This service is funded through medical assistance or clients can pay privately for care.

## *Personal Care Supervision Program*

The personal care supervision program is a contracted program with Unified Community Services and Grant County Department of Social Services. Through this program clients receive a visit every 50 to 60 days by a registered nurse. The registered nurse is supervising the personal care workers who are providing care in the client's home. This program provides long term care to the frail elderly, physically disabled and developmentally disabled in their homes.

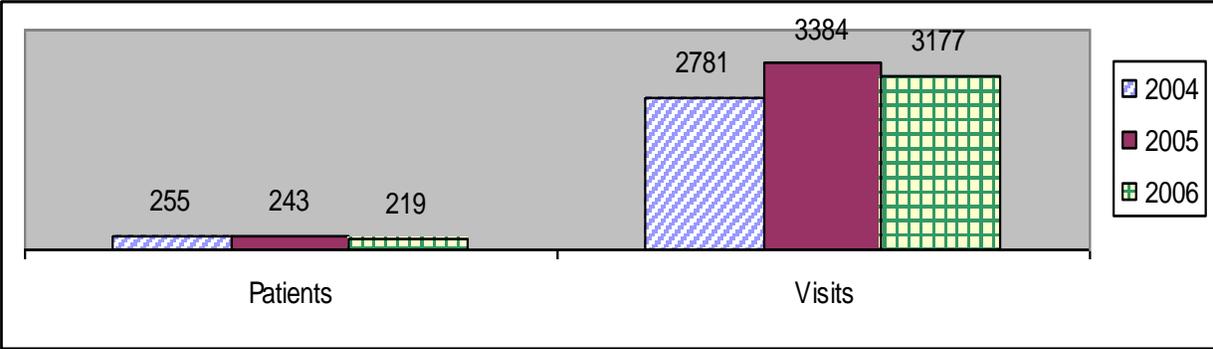
This program is funded entirely by medical assistance. This has created some funding challenges since medical assistance has not increased the funding in the personal care program for several years while the cost of providing services has continued to rise. This program requires extensive co-operation and collaboration between the departments involved to provide quality services to clients in their homes.

Number of Patients	2004	2005	2006	Number of Visits	2004	2005	2006
Health Dept	39	36	25	Health Dept	1,567	1,579	1353
Social Service & UCS	156	162	145	Social Service & UCS	733	765	586
COP / CIP Assessments	106	73	59	COP / CIP Assessments	106	73	59
<b>Total Patients</b>	<b>301</b>	<b>271</b>	<b>229</b>	<b>Total Visits</b>	<b>2,406</b>	<b>2,417</b>	<b>1,998</b>

# HOME NURSING

The Grant County Health Departments, Home Nursing Program provides skilled nursing visits, home health aide care, physical, speech and occupational therapy visits to clients in their home. In 2006, 219 clients received services through this program. The home nursing program has seen an increase in clients needing assistance in handling their medications in their homes, many of these clients are medical assistance eligible. Medical assistance reimbursement rates have created a financial struggle for the program. A nursing position vacancy was held open in this program toward the end of 2006 to assist with budget shortfall. The program continues to serve Medicare, private insurance and private pay individuals as well as medical assistance clients. No one is denied service because of their inability to pay.

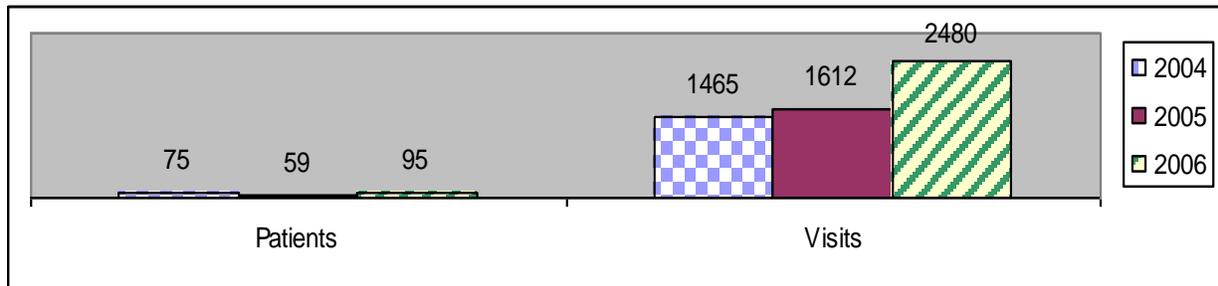
A comparison of patients and visits is noted below:



# HOSPICE

In 2006, ninety-five clients received care through the Health Departments Hospice program. Hospice provides care to clients who have a life limiting illness. The focus of care is on comfort not on cure of the disease and support for the clients and their families. The hospice program was extremely busy in 2006, and for several months a limited term registered nurse was hired to help with providing services for our hospice clients. As well as nursing visits, clients receive visits from the hospice social worker, home health aides and other members of the multi-disciplinary team as needed. The department is continuing to evaluate staffing for the hospice program as it finishes the busiest year since its development.

Below are the number of patients and visits for Hospice:



#### Board of Health Members

Clinton Orton, Chair	Ivan Farness	Meena Maski, MD
Allan Jansen, Vice Chair	John Pitts	Mary Kay Logemann, RN, BSN
Velma Weadge, Secretary		Philip Wegmann, 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

Mary Allen, Billing Clerk  
 Kelly Bird, CNA (8/06 transferred to Sheriffs Dept)  
 Chris Clauer, CNA  
 Brenda Cullen, CNA  
 Sharon Friederick, RN, BSN  
 Ann Jenkins, RN, BSN  
 Tracy Schildgen, RN, BSN  
 Kim Leamy, RN, BSN  
 Kathy Marty, Drug-Free Communities Project Director  
 Troy Moris, Environmental Health Coordinator  
 Susan Stohlmeyer, PH Aide  
 Lorna Wolf, Fiscal Clerk  
 Jennifer Stremcha, RD  
 DaNean Naeger, Nutrition Tech

JoAnne Basting, CNA  
 Lindsey Dresen, WIC Clerk  
 Amy Leffler, PH Tech  
 Jane Derleth, RN (9/06 retired)  
 Phyllis Fuerstenberg, RN  
 Mary Koenen, RN, BSN  
 Mareeta Kolman, SW  
 Julie Leibfried, RN, BSN  
 Amy Miller, RN  
 Carol Thole, Tobacco-Free Coalition Coordinator  
 Nola Sitts, RN  
 Steve Straka, LTE Clerical  
 Laurie Walker, RN, BSN