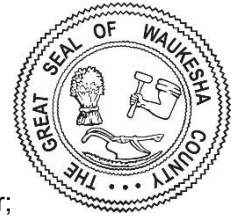


MINUTES OF: Public Health Advisory Committee Meeting
DATE: Thursday, February 7, 2019
TIME: 8:00am-9:30am
LOCATION: Health & Human Services Building, Public Health Center Room 1001



Members Present: (via phone) Mary Baer, Citizen Member; (via phone) Kerri Ackerman, Waukesha Sixteenth Street Community Health Center; Andrew Dresang, Froedtert Health; Jessica Kadow, ProHealth Care Community Outreach Hispanic Health Resource Center; Mary Reich, Lake Area Free Clinic; Tim Whitmore, HHS Board Liaison Substitute

Members Absent: Dr. Steven Andrews, Aurora Healthcare / Waukesha County Medical Society; Dr. Ross Clay, Citizen Member; Vicki Dallmann-Papke, HHS Board Liaison / ProHealth Care; Betty Koepsel, Citizen Member;

Ex Officio Members Present: Bridget Gnad, Waukesha County Public Health / HHS, Emergency Preparedness Coordinator; Ben Jones, Waukesha County Public Health Division, Manager / Health Officer; Liz Laatsch, Waukesha County Public Health Division, CD Supervisor; Trista Neary, Waukesha County Public Health Division, Administrative Specialist

Ex Officio Members Absent: Theresa Imp, Waukesha County Public Health Division, Family & Community Health Supervisor; Mary Jo Hamman, Waukesha County Public Health Division, WIC Supervisor; Mary Smith, Aging & Disability Resource Center of Waukesha County, Manager; Sarah Ward, Waukesha County Environmental Health Division, Manager

AGENDA	TOPICS	DISCUSSION	ACTION ITEMS	DATE DUE
Call to Order		Mary Baer calls the meeting to order at 8:06am.		
Approval of Minutes		MOTION: Andy Dresang, second by Kerri Ackerman, to approve the minutes from January 10, 2019. Motion carried 6-0.		
Advisory Committee		<p>Mary Baer informs that she has a meeting scheduled with co-chairs from three other HHS Advisory Committees on February 8, 2019 to discuss possible collaboration in presenting to the HHS Board on March 21, 2019. She shares two critical community needs that were identified, which are not Public Health specific and could benefit other divisions within the department.</p> <p>Critical Community Need 1 Maintain prior year's budgeted staffing levels, at a minimum. Tax levy not matching increasing need. The Department's cost to continue service goes up annually – salaries, benefits, purchased items and services. Each year, the Department starts the budget underfunded with tax levy, which significantly impacts each Division. They do receive partial funding but this does not cover the cost to continue services. This restrict opportunities for additional education or HHS projects as there is a structural deficit going into each new year.</p> <p>Mary further clarifies that this is minimum request for divisions to stay at their current budget level, not a request for more. Ben Jones informs that this would help manage the increasing statutorily-required mandates, with the possibility of expanding initiatives around the increasing opiate, mental health and suicide concerns that CHIP identified. HHS Board Liaison, Tim Whitmore suggests asking for an increase to help offset the deficit. He states that the board relies on guidance from the department Director regarding community needs, but ultimately the County Board has the final decision.</p>		

		<p>Jessica Kadow expresses that it may be helpful to share what is required for mandates and case follow up for those unfamiliar with the health care field, including monetary values equivalent to the amount of work put into CD investigations and the time involved.</p> <p>Critical Community Need 2 Need for full time permanent Data Analytics HHS staff position(s) to begin to be able to track needs and outcomes. Data will be shared with county health systems and providers who share their data with the county and be available for all to access, analyze and report on.</p> <p>Ben states that this would help create a more formal approach to getting and using data, and would have a greater impact on community organizations. Work is being done on many initiatives around the county by individual groups. Implementing a permanent Data Analytics staff position would continue to promote working together for the greater good of the community members.</p>		
Agency Reports		<p>Andy Dresang shares that Froedtert, ERAs and Thriving continue to work on the Find-a-Ride program. Menomonee Falls Town Hall Clinic will provide a resource person on site to help clients navigate through the process. The program will pilot in February for ambulatory clients with hopes to expand to other healthcare providers over time and eventually assist with transportation to food access, etc. and include the ability to transport non-ambulatory clients as well.</p>		
Committee Reports	Health & Human Services Board – Tim Whitmore	<p>Tim Whitmore reports that Randy Setzer presented an overview on the billing process and revenue cycle. Substance use grants were approved for both women and youth. The HHS Board received the final report on the ADRC Dementia grant.</p> <p>Andy Dresang adds that Menomonee Falls recently completed Dementia Friendly training and is now the third official Dementia Friendly community.</p>		
	Environmental Health Division – Sarah Ward	No Update		
	Aging & Disability Resource Center – Mary Smith	No Update		
Public Health Division Reports	Manager / Health Officer – Ben Jones	<p>CHIPP: Ben shares that the action teams will provide an update to the Steering Committee in March.</p> <p>PDO Grant / Narcan Trainings: Currently reviewing restrictions on who can provide the trainings and who distribute the prescription medication Narcan.</p> <p>Overdose fatality Reviews (OFR) Medical College of Wisconsin will provide full technical assistance during this grant process.</p> <p>WHARP Grant: State of WI approached HHS Department regarding a women and substance use grant to work on developing a model to help ensure women and families are aware of and connected to all resources available during recovery. HHS will host six meeting with community participants over the next few months.</p> <p>Division: Ben shares the future of Public Health 3.0 looking at the overall health of the community by bringing community partners together and approaching all areas of health. Management is actively interviewing this week for the Coordinator position.</p>		

	<p>Communicable Disease – Liz Laatsch</p>	<p>Liz Laatsch reports that the CD team has experienced many TB challenges recently. One client did pass away. The case was complex and the client did present with other chronic health issues and a history of substance use. Liz notes that TB is growing globally with an increased drug resistance. Jessica Kadow inquires on the number of insured TB cases and whether insurance pays for treatment. Liz informs there is no reimbursement from insurance, but that the state does have a program that will cover a minimum amount for DOT treatments.</p> <p>One mumps case at Marquette University. Liz states that when providers perform any mumps testing, even if to rule out the disease, a full investigation is required.</p> <p>The state of Washington has declared a state of emergency due to the measles outbreak.</p>		
	<p>Family & Community Health – Theresa Imp</p>	<p>No Update</p>		
	<p>WIC –</p>	<p>Ben informs that WIC has been fully functioning during the Federal Government shutdown. The Waukesha County Breastfeeding Coalition has established a structure with charters and committees.</p>		
	<p>Preparedness – Bridget Gnad</p>	<p>Bridget Gnad reports that the LTE/28 hours per week Preparedness Educator position has been filled by new County employee Sara Ernster. Bridget and Sara will attend the Pandemic Preparedness Exercise with the National Guard in Madison on Sunday, February 10, 2019. They are currently preparing for the Operations Readiness Review (ORR) that will take place on April 26, 2019. This requires a large amount of work uploading forms and documentation prior to the review date.</p> <p>The 2019 Region 7/SE Wisconsin HERC closed POD table top exercise with community partners and meeting will take place on June 3-4, 2019. Many community partners will participate, the main focus will be on hospital systems as they are an essential piece. Ben informs that during a potential mass clinic, GE Healthcare could provide for 30,000 individuals (employees and families) at their POD, eliminating the need for Public Health to provide services to a large number of individuals. Closed POD training for large companies such as Quad Graphics, Kohls and Harley will be considered once critical infrastructure has been trained and established, including police, fire, ems and public works.</p>		
<p>Walk-In Items</p>		<p>None</p>		
<p>Next Meeting</p>		<p>Thursday, March 14, 2019</p>		
<p>Adjournment</p>		<p>MOTION: Andy Dresang, second by Jessica Kadow to adjourn. Motion carried 6-0. 9:26am</p>		