

MINUTES

Public Health Advisory Committee of the
Health & Human Services Board
Thursday, March 10, 2016 - 8:12 to 9:17 a.m.

MEMBERS PRESENT: Kerri Ackerman, Waukesha Community Health Center; Dr. Ross Clay, Medical College of Wisconsin; Jessica Kadow, Hispanic Health Resource Center; Mary Smith, Aging & Disability Resource Center of Waukesha County; and JoAnn Weidmann, Co-Member.

EX OFFICIO Members Present: Dr. Nancy Healy-Haney, Waukesha County Public Health Manager; Benjamin Jones, Waukesha County Public Health, Health Officer; and Jan Leuenberger, Waukesha County Public Health.

MEMBERS ABSENT: Dr. Steven Andrews, Waukesha County Medical Society; Dr. Marshall Jennison; Sarah Ward, Environmental Health Division;

EX OFFICIO Members Absent: none

- I. Meeting was called to order by Dr. Healy-Haney at 8:12 AM. Dr. Ross Clay arrived at 8:21 am and chaired the meeting.
- II. Dr. Healy-Haney motioned to postpone going over the bylaws until later in the meeting.
- III. Committee Reports:

Health & Human Services Board Report:

- No representative. No report.

Environmental Health Division Report: Sarah Ward

- Ms. Ward was not in attendance so there was no report.

Public Health Division Report: Nancy Healy-Haney

- It was noted that the Public Health Needs presentation is scheduled for March 24, 2016 at 2:00 pm in the Board room. Attention was brought to the fact the greatest need is to support the Public Health Division at the level it is at. It was pointed out that any lower placement would put the Division's certification in jeopardy.
- There was discussion regarding the Community Health Improvement Plan (CHIPP) being officially launched in November. It was noted there is a lot of behind the scenes work that needs to be done in order for a CHIPP to be launched, including the gathering of all the tools needed. Once the information is gathered, it will take the Director and Mr. Farrow a while to go through and organize the information. It was noted that a lot of people want to be on the CHIPP Committee. It was noted in 2010 there was a huge campaign to educate the public about what a CHIPP is. It took a while for the importance of CHIPP to catch on. Last time there were 30-33 participants, which was a large group to work with. This time the plan to keep things more manageable is to have more subcommittees, keeping the committees smaller. This change will be an improvement and keep members interest with shorter term focus and reporting to smaller groups.
- It was brought to the Committee's attention that the Public Health Division's Electronic Medical Record (EMR), Insight, is in its 2nd month of implementation. The EMR is up and running and staff is adapting. It was noted there has been a lot of tweaking done to the EMR. It was noted that Mr. Jones and another group have been working on the upgrades and the Division is very thankful. Attention was drawn to how the EMR has changed the way the Division operates and does business, including requiring two people dedicated to the Division's Admissions and Check out/Receptionist areas every day. Before the EMR

only one person was required for Admissions and Check out/Reception. The implementation of the EMR has taxed the Division's clerical team as beside the two dedicated people needed every day, additional clerical is needed for half a day for relief work: breaks and lunches. The Division is down one clerical position, the Admissions Clerk. The existing four clerical currently take turns covering the Admissions desk and covering breaks for Check out/Reception desk every day. Attention was brought to the fact the current Division clerical opening is for an Administrative Assistant position, which is a lower/entry level position with a lower skill set. Reference was made to the fact that after implementation of the EMR the Division concluded that at the Admissions desk position requires proficiency in managing computers, data entry, and working 2-3 systems at a time. It was noted that Claims MD, Wisconsin Immunization Registry (WIR) and Insight are all used in the Admissions process, and the new EMR is not intuitive. It was brought to the Committee's attention that although the EMR requires more entry on the front end, there is a reward in reporting on the back end which is really helpful and much improved over the past process. The additional reports are useful in the budget process. It was pointed out that the Fiscal Division recognized the need for a more skilled person for the Admissions Clerk position and has taken over filling the position requesting an updated skill set moving it more into a Fiscal Analyst position. There was much discussion on the benefits of this change including the ongoing training needed for insurance questions. It was noted that although this is positive, the Division will need to wait for the Fiscal Division's timeline in filling the position. The funding source for the new Admissions Clerk/Fiscal Analyst position was questioned and it was noted that it is still to be determined.

- Dr. Clay arrived at 8:21 am.
- It was noted that the Public Health Division has a young staff and there are many maternity leaves. In addition there is more senior staff retiring. A senior nurse in the immunization program, Maria Schneider, announced her retirement. It was noted that Maria is a stellar person and will be greatly missed. Attention was brought to the fact there was a review with the State for the immunization program in 2015 so next review won't be for another year and a half, allowing Maria's replacement more time to get up to speed.
- It was brought to the Committee's attention that there are approximately 5,000 children on waivers in Waukesha County and the numbers are growing. It was noted that obtaining a waiver is an available feature under State law. It was pointed out that it doesn't matter if the child receives a vaccination or a waiver, either one would put them in compliance. There was much discussion on how schools obtain waivers to be in compliance. Concern was brought up regarding the resurgence of childhood diseases because of the number of waivers. Discussion also moved to the uninsured and under-insured and how people are getting around having to pay the penalty for not having insurance. Also noted was a spike in referrals in February for the Waukesha Community Health Center. Attention was brought to caps on Vaccines for Children (VFC) for the Waukesha Community Health Center and it resulting in more referrals to the Public Health Division. Concern was expressed regarding the need for adults and children to both be immunized for herd immunity and the protection of those with compromised immune systems.
- Attention was drawn to the Public Health Advisory Committee By-Laws. It was asked if there were any suggestions for changes or additions. It was noted that there can be an application for membership made outside of the October date listed in the By-laws. Anyone can forward a name to Dr. Clay which will be forwarded to the County Executive for appointment. It was questioned whether a mechanism to remove members should be added, noting the minimum of 9 meetings per year listed in the current by-laws. It was the consensus of the Committee to add a provision for providing an excused absence if a member was unable to attend the required 9 meetings per year. It was concluded that the existing by-laws would be amended and submitted for the next meeting. It was questioned whether the changes to the By-laws need to be approved by HHS board. It was noted that they would just be publically read at the next meeting and approved.

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- It was questioned whether in the absence of a Health and Human Services (HHS) Board representative on the Committee that copies of the minutes were still being received. It was noted that they were not. Dr. Healy-Haney stated that she would ask Julie Bartelt to insure the Committee receives a copy. There was discussion on the upcoming election and how a change in County Supervisors may have an affect the HHS budget.
- It was pointed out that the Public Health Division just completed HAY Studies on almost all positions with a very short turn-around time. There was discussion regarding what the HAY study was and what it all involved. It was noted that the Division added language to all of their HAY studies to meet the Council on Linkages for Public Health practice requirements which are required if the Division applies for accreditation. The Committee was given an in-depth overview of what was required for accreditation from verifying academia skills taught in universities translates to work done in the public health field, ie. Community assessments; to what is being done to be prepare, ie. contracting with a vendor to assess employees' skills, devising a workforce development plan. It was noted that preparing for Accreditation is a challenge with continued preparedness training and staff turnover, especially senior staff leaving taking years of knowledge with them. There was discussion regarding available training, how it has moved from regional seminars to mainly webinars when big issues arise. There was also reference made to the trend of moving away from having clinical backgrounds to non-clinical for Public Health positions, ie. the State regional directorship position being filled by a social worker, not a Health Officer, losing institutional intelligence. Also brought up was the Division's difficulty in recruiting nurses, its inability to compete with bonuses or other organizational benefits, ie. retiring student loans, other organizations provide. It was noted that nurses are going for Nurse Practitioner positions because of higher pay creating a loss of traditional nurses.

Public Health Division, CD Section Report: Ben Jones

- Reference was made to the Elizabethkingia virus: 48 cases were reported in Wisconsin since November with 7 of those cases being in Waukesha County. In the last couple weeks 4 more cases were identified in Wisconsin. The State is taking the lead on this virus, having a Hotline for media and people to call. The Division is to direct people to the State. It was noted that they think they have a common source identified, but there is not enough information to release. A lot of information about the antibiotic susceptibility was just released. The virus looks pretty susceptible to most things. Most infected are those over 65, and of those most, maybe all, had a major underlying health, immunocompromised condition, ie. Diabetes, cancer, etc. Elizabeth Kingia is not a reportable disease, fitting into the grey area of an outbreak. It was noted that the State Health Officer and Medical Director have the authority to follow up on anything they see fit. Eight people from the CDC are in Wisconsin helping investigate. It was asked if there have been any mortalities in Wisconsin. It was noted there has been 1 in Wisconsin, and 18 country-wide.
- Reference was made to the Zika virus. There are 193 travel related cases in the United States. The sexual transmission to-date has been travel related. There are studies being made on Zika now. There are strong indications that Zika is linked to microcephaly, stronger in first trimester. In general, any infection during pregnancy leads to poor birth outcomes.
- Attention was brought to a tuberculosis case the Division was involved in. A person with tuberculosis spent two days in jail then was released. Two days after the person was released the Division was notified the person was multi-drug resistant, possibly extreme drug resistant, tuberculosis case and non-compliant with their treatment. This person was on a do-not-board/lookout list, but this information did not translate to the law enforcement system. Consequently this person was with law enforcement officers in car for 4 hours; and in small jail cells with inmates and in courts, for two days. This discovery created a lot of anxiety with the people who were exposed. The Division initiated an investigation to establish baseline TB Skin Tests to make sure they were not previously infected, then 10 weeks later

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followed up with another test. After the baseline tests and education were done. This person was apprehended and sputums were obtained. There were five sputums performed and they all came back negative. This was considered good because even if the person is infected with TB, most likely those exposed were not infected. There are not definitive results, the Division needs to wait 6-8 weeks for the cultures. If the cultures come back negative, people would not have to come back for next test. There was much discussion regarding how this person did not come to law enforcement attention with possible TB. The Division pushed their concerns up the chain through the state, homeland security advisor at the state.

- It was questioned whether Committee Members could contact Paul Farrow directly regarding concern over cutting and/or privatizing services which should be government functions. It was expressed that these concerns should be brought up at the needs presentation: March 24, 2016 @ 2:00 pm. This was a serious disease that could have infected a lot of people.
- It was noted the Public Health Division is doing drug screening of individuals applying for the Food Share program, Economic Support, now as well as urine screening for Child and Adolescent and Child and Family for parents and children in our system already who are trying to rehabilitate.
- It was pointed out that a full scale exercise is scheduled for June 14, 2016. All Committee Members were asked to participate or be an observer.
- It was noted that the minutes would be deferred until next meeting because of no quorum.
- It was noted that some of the budget and CDC items should be updated for the upcoming needs presentation. For the CDC Funding, look at last year's presentation and update the numbers. There was a request for any new items.
- It was concluded that the January minutes are to be reviewed next month. It was agreed that the minutes for February's meeting will be sent out the week of March 1st. It was pointed out that the March meeting will be kept on the calendar in preparation of needs meeting for March 24th at 2:00 pm. It was noted that the Chair requires a list of Communicable Diseases in the county with the year listed for a baseline. All Committee Members were asked to think about needs should be addressed for the needs presentation. A draft of the needs discussed will be available at the next committee meeting.

The next meeting will take place on Thursday, April 14, 2016.

IV. Meeting adjourned 9:17 am.

Respectfully submitted,
/jml

Minutes approved on: 04/14/2016

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Room #1001 - Health and Human Services Building,
514 Riverview Avenue,
Thursday, March 10, 2016 8:12 – 9:17 am