MINUTES OF BOARD OF HEALTH MEETING March 6, 2013

Meeting was called to order by Chair Kraft at 6:00 p.m.

<u>Board of Health Members Present</u>: Chair Kraft, Supervisor Peer, Supervisor Bostwick (left at 7:00 p.m.), Supervisor Rundle, Dr. Peterson, Dr. Winter, and Ms. Wade.

Board of Health Members Absent: Dr. Best and Mr. Rooney.

<u>Staff Members Present</u>: Karen Cain – Health Officer; Timothy Banwell – Environmental Health Director; Janet Zoellner – Public Health Nursing Director; Sancee Siebold – Nursing Supervisor South Office; Deborah Erickson – Nursing Supervisor North Office; Elizabeth Labelle – Administrative Secretary; and Geri Waugh – Account Clerk.

Others Present: None at this time.

Adopt Agenda

Supervisor Bostwick made a motion to adopt the agenda. Ms. Wade seconded the motion. MOTION APPROVED.

Approval of Minutes 2/6/13

Supervisor Peer made a motion to approve the minutes of the 2/6/13 Board of Health meeting. Dr. Peterson seconded the motion. MOTION APPROVED.

Citizen Participation

None at this time.

Unfinished Business

None at this time.

New Business

Administrative Division

Approval of Bills/Transfer of Funds

Supervisor Bostwick asked why we order typhoid vaccine. Typhoid vaccine is one of the vaccines the health department offers for international travel clients.

Dr. Winter made a motion to approve the bills for the month of February, 2013 in the amount of \$12,215.13; bills for the Brownfields Grant in the amount of \$300.00; and bills for the Community Transformation Grant in the amount of \$329.34. Ms. Wade seconded the motion. MOTION APPROVED.

There are no transfers of funds this month.

Health Department Report

Possible Health Department Additional Programming: Ms. Cain reminded the Board members about the handout she had given them at the 2/6/13 Board of Health meeting concerning possible additional Rock County Health Department programming. She asked if there are any additional programs the Board members would like to have considered. Supervisor Rundle stated there should be a contingency plan in place at the health department for the Prescription Drug Collection Program due to the proposed changes by the Drug Enforcement Agency (DEA). No other additional programs were mentioned.

Sequestration Impacts: Ms. Cain stated she attended the health officer meeting in Madison today, and there was discussion on the potential impacts of the federal budget sequestration. In 2014, the health department could potentially lose 8% of the Consolidated Contracts funding, possibly lose 8% of the Brownfields Grant funding, and also have a possible decrease in the Community Transformation Grant funding.

WI Partnership Program Grant: Ms. Cain reported the health department has been awarded a \$150,000 Wisconsin Partnership Program Fetal Infant Mortality Grant for the next 3 years. As part of this grant, there will be a fetal infant mortality review team that will investigate fetal deaths in Rock County.

Rock County Nitrates Study: Ms. Cain stated it is likely the WDNR will choose Rock County for a nitrates study of public and private wells. If Rock County is chosen for this study, WDNR will also install monitoring wells. The health department doesn't know at this point if any funding would be included with this study, but the data collected from the study will be very useful.

Rabies Prevention Program Issues: Mr. Banwell discussed the following with the Board members: Problem I: The Rock County Health Department takes possession of approximately 12 live bats each year that have potentially exposed humans and/or domestic pets to rabies. The bats must be humanely and safely euthanized, and sent to the State Laboratory of Hygiene for rabies analysis.

Several local health departments in the state utilize the current process used by our department. Bats are placed in a container and exposed to small amounts of chloroform. As of this time, there has never been any problems. However, the potential exists for exposure of staff to rabies and perceived mistreatment of animals.

Problem II: The Rock County Humane Society will no longer prepare rabies specimens for shipment to the State Lab of Hygiene. In 2012, 15 rabies specimens were prepared by the Rock County Humane Society. The Humane Society was reimbursed by the county for their assistance at a total cost of \$720, or nearly \$50 each for euthanizing the animal and sample preparation. Specimens were stray cats and dogs that bit a citizen or Humane Society employee. This year, the Health Department has been taking euthanized animals from the Humane Society to veterinary clinics for sample preparation. If private veterinary clinics are to be used for rabies sample preparation, a policy must be developed to show impartiality for which veterinary clinics will provide and be reimbursed for this service.

Proposed Solution: The service to euthanize bats and other wildlife, and preparation of all animal specimens for shipment to the State Lab of Hygiene is bid out to private veterinary clinic(s) in Rock County.

Low Cost Rabies Vaccination Clinic: Chair Kraft updated the Board members on this clinic that had been discussed at the February Board of Health meeting. Chair Kraft stated she and Ms. Cain met with members of the Friends of Noah concerning a low cost rabies vaccination clinic. The clinic will be held at the Rock County Fairgrounds Sales Arena on Saturday, April 27, 2013 from 1:00-4:00 p.m. The cost for the vaccines will be \$10 for either cats or dogs, and 250 vaccines will be available. Dr. Peterson stated the Board of Health should not be associated with this clinic, and Dr. Winter agreed. The Board of Health is aware of this upcoming clinic being held, but the Board of Health is not sponsoring the clinic. Dr. Peterson also believes the rabies vaccine should be administered at a veterinary clinic, including an examination of the animal. The Board of Health would like to have as many animals vaccinated as possible, but the vaccination should be done at a veterinary clinic so a proper examination to determine the animal's health can be done in conjunction with the vaccination. The vaccination also needs to be properly recorded so there is a record of the date of the vaccination on file. Chair Kraft stated since the Board unanimously supported the rabies clinic and the Board of Health involvement at the prior Board of Health meeting, the clinic will go forward as posters were already readied for print and Board of Health staff have volunteered to help make this a success.

CRE Infections: Ms. Erickson stated in December, 2011, the Wisconsin Division of Public Health began requiring hospitals in Wisconsin to report cases of *carbapenem-resistant Enterobacteriaceae*, otherwise known as CRE bacteria.

- In the past 15 months, CRE infections have been reported in 25 patients in 17 hospitals and long-term acute care hospitals in Wisconsin (out of 137 hospitals statewide).
- CRE infections are caused by germs that are part of a person's healthy digestive system. These germs can cause infection when they get into areas where they don't belong, such as the bladder or blood.
- There are antibiotics that can treat CRE infections.
- CRE bacteria mostly infect persons who have had prolonged hospital stays, those in long-term care facilities, and patients using catheters or ventilators.
- Hospitals and other medical facilities take precautions to prevent the spread of CRE bacteria, including:
 - 1. Following contact precautions and hand hygiene when treating patients with CRE
 - 2. Dedicating rooms, staff, and equipment for patients with CRE
 - 3. Wisely prescribing antibiotics that the bacteria are not resistant to
 - 4. Removing temporary medical devices such as ventilators and catheters from infected patients as soon as possible
- Although CRE bacteria are found in hospitalized persons, it doesn't mean they contracted the bacteria from the hospital or long-term care facility
- Of the reported cases of CRE infections in Wisconsin, there have been no reports of it spreading to other patients.
- Healthy persons are at low risk of CRE infections.
- CRE infections are difficult to treat, lengthen hospital stays, and are more expensive to treat.
- Serious infections, such as bloodstream infections caused by CRE, are associated with mortality rates up to 50%.

Environmental Health

Brownfields Grant Report

Jenna Lovaas and Rick Wietersen did a powerpoint presentation for the Board members on the Brownfields Grant:

The grant name is (Re)Energize Janesville – (Re)Building a Healthy Community. The grant was awarded to the health department by the Centers for Disease Control, Agency for Toxic Substances & Disease Registry (ATSDR).

ATSDR Brownfields/Land Revitalization Action Model

- Step 1: What are the issues in the community?
- Step 2: How can development address these issues?
- Step 3: What are the corresponding community health benefits?
- Step 4: What data are needed to measure change?

What is a Brownfield?

- Brownfield sites are defined as 'abandoned, idled, or underused industrial and commercial properties where reuse or redevelopment is complicated by real or perceived contamination'
- Land Re-Use Sites
- Land Revitalization

Sites in Janesville with Known or Potential Contamination and Priority Brownfield Parcels

- North River Front/Traxler Park
- Downtown Area
- Five Points Area
- General Motors Area

Step 1: Identify Issues in the Community

- Who have we talked to so far?
 - 1. ECHO clients
 - 2. Neighborhood Action Team
 - 3. Boys & Girls Club
 - 4. YMCA
 - 5. Downtown Development Alliance
 - 6. Senior Activity Center (open community event)
 - 7. Noon Lions Club
 - 8. Foundation for the Preservation of 108 S. Jackson Street
 - 9. West Gate Corridor
 - 10. Century 21
 - 11. League of Women Voters
- Examples of Community Issues
 - 1. Limited river access
 - 2. Alcohol/drug abuse
 - 3. Unemployment
 - 4. Crime/violence
 - 5. Food deserts
 - 6. Sub-standard housing conditions
 - 7. Janesville area's poor image
 - 8. Environmental issues

Step 2: Determine How Redevelopment Can Address the Issues

- Community gardens
- Year-round Farmers Market
- Neighborhood grocery store
- Downtown hotel and/or conference center
- Expand bike trail along the river
- Remove a dam
- Mental health clinic
- Canoe/kayak/bike rentals along river and trails
- Environmental clean-ups
- Better street/park lighting
- Community recreation facilities
- Downtown community programs
- Recruit new businesses downtown to reduce empty storefronts

Step 3: Identify Community Health Benefits

- Improved health
 - 1. Reduced asthma cases
 - 2. Reduced lead poisoning cases
 - 3. Increased resident mobility/activity
- Reduced crime
- Increased employment

Step 4: Collect Data Needed to Measure Change

How will we measure change?

- Infant mortality rates
- Blood lead levels
- Number of persons using parks/river/trail
- Percent of persons employed/unemployed
- Number of new construction permits
- Acreage of vacant lots
- Number of persons attending events downtown/eating at restaurants/shopping
- Number of persons uninsured/Number of persons utilizing HealthNet services

Upcoming Events/Work

Community Presentations:

- Noon Rotary
- Noon Kiwanis
- Open Community Meeting:

April 16th, 6-8 p.m., Womens Club, 108 S. Jackson St., Janesville

Projects:

- Report results to the City of Janesville's City Revitalization Committee in June 2013
- Summer intern
- Environmental testing
- Indicator collection

Lead Education Program for Rental Property Owners

Mr. Banwell distributed a Memorandum of Understanding to the Board members between Rock County Health Department and Rock County Planning and Development Agency that has already been reviewed by Rock County Corporation Counsel, as follows:

Background

Rock County has received a U.S. Housing and Urban Development (HUD) Office of Healthy Homes Lead Hazard Control grant to conduct a Lead Hazard Control program. The purpose of this program is to conduct lead hazard control projects on qualifying housing units.

To promote and support the Rock County Lead Hazard Control Program, the Rock County Health Department proposes the creation of a program in which trained Health Department employees will identify lead hazards for rental property owners and provide information on proper lead paint hazard remediation techniques. This identification of lead hazards by staff of the Rock County Health Department in rental properties will require the use of the XRF lead monitoring device.

Parties to the Agreement

RCHD shall conduct educational visits to rental property on behalf of the property owner to determine the lead paint risks associated with their rental units. Identification of lead in the rental units will be determined by the use of an XRF lead monitoring device (*XRF*).

Planning Department has ownership of the XRF and is responsible for the secure storage, use, and maintenance of the device. RCHD will borrow the XRF for use with educational visits at rental properties. This agreement explains the responsibilities of Planning Department and RCHD in this shared use of the XRF.

Process

- 1. The storage location for the XRF is in the Planning Department.
- 2. RCHD staff will sign out the XRF from the Planning Department according to established sign-out policy (date, time, RCHD staff).
- 3. RCHD staff who are certified lead assessors and instructed on the use of the XRF, will sign out the equipment.
- 4. RCHD will verify that the equipment is in working order before the XRF is checked out.
- 5. RCHD will be responsible for the proper use of the XRF.
- 6. RCHD staff will return the equipment and sign in equipment (date, time, RCHD staff).
- 7. Planning Department is responsible for proper secure storage and maintenance of the XRF.
- 8. RCHD staff will use the XRF for work-related activities only.

This Memorandum of Understanding will become effective upon date signed by both departments and will be reviewed annually.

Dr. Winter made a motion to approve the Memorandum of Understanding. Supervisor Rundle seconded the motion. APPROVED.

Public Health Nursing

Vaccines 2012 – Month by Month Totals

Ms. Zoellner gave a report on the number of immunizations administered by Rock County Health Department, for ages 0-18, flu clients excluded.

Immunization Client Count Comparison for 2011 and 2012:

Total client count:

Year 2011: 2,012 Year 2012: 1,175

Ms. Zoellner stated Beloit Area Community Health Center had school immunization clinics in August, 2012, which affected the number of school children who would have otherwise been immunized by the health department.

The Affordable Health Care Act will continue to affect the number of children immunized by the health department. This legislation requires all insurance to pay for children's immunizations. If a parent brings their children to the health department for vaccines and they have insurance, the health department can only administer immunizations to their children one time. The parents are then informed they need to take their children to their physician for future vaccines. However if a family is uninsured or underinsured, the health department will be able to administer the vaccines they need.

Communications and Announcements

Chair Kraft stated it is good to see Ms. Cain back after her illness.

Chair Kraft reported Supervisor Dave Brown passed away suddenly on 3/5/13.

Ms. Cain introduced Elizabeth Labelle, Administrative Secretary. She is observing the meeting tonight and will be at future Board of Health meetings to take the minutes.

Adjournment

Supervisor Rundle made a motion to adjourn the meeting. Dr. Peterson seconded the motion. MOTION APPROVED. Meeting adjourned at 7:18 p.m.

Respectfully submitted,

Geri Waugh, Recorder

Not Official Until Approved by the Board of Health