

Meeting called to order at 6 PM

Attendance:

C. Simenz

C. Holtz

C. Farrington

M. Roberts

B. Simerly

J. Voss

A. Kay

B. Rowland

T. Bohacheff

K. Peterka

E. Conlin

Avery

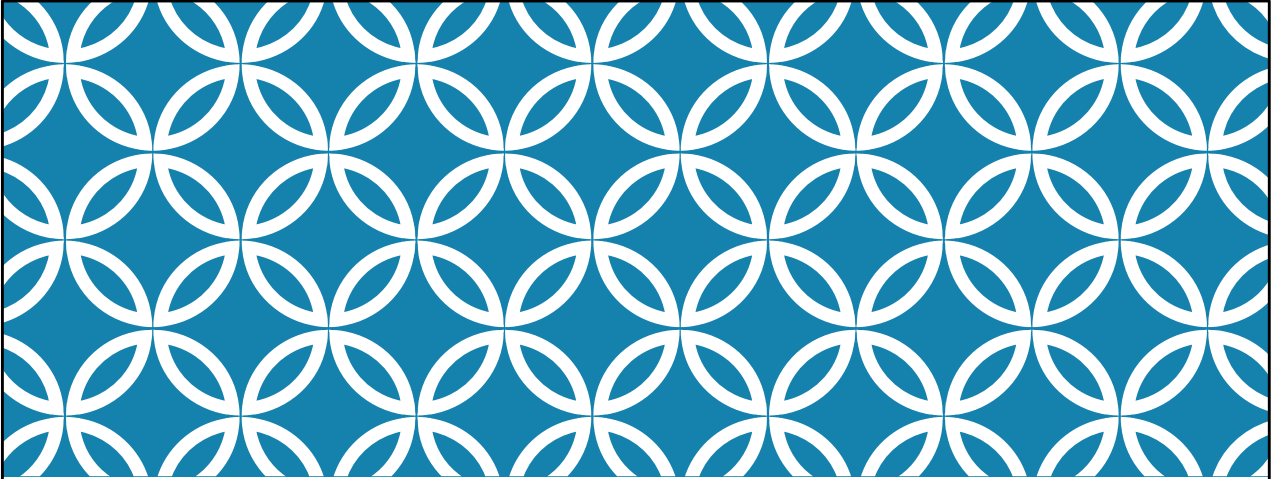


## AGENDA

- Meeting called to order, roll call
- Approval of the May 2024 Minutes
- Health Department Administrative Updates
  - Grant Updates
  - Preparedness Updates
  - Communicable Disease Updates
  - Community Case Manager Updates
  - Environmental Health Updates
- Tour of the new space
- Other items

M. Roberts moves to approve the minutes

C. Simenz seconds. No discussion. Motion carries.



**GRANT UPDATES** |

## GRANT UPDATES

AHW: Will reapply and utilize feedback provided in the application review.

CDBG: Waiting, likely voted on at the Dec MKE County Board of Supervisors.

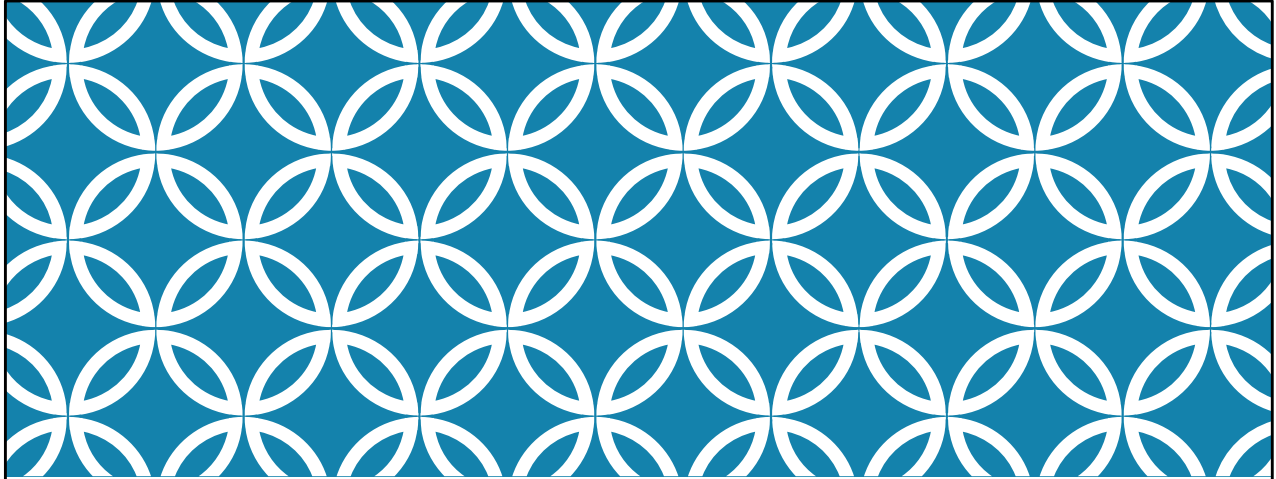
OD2A: Refunded at 2x, expected to not have to complete for funding until 2028.

PHEP: \$25K decrease, DHS error.

Spending and objectives on track!

Closed out Beach Season and Prevention Block, and Harm Reduction Vending Machine re-stock Grant since our last meeting.

Stated budget will be finalized Dec. 2nd. Discussed court is no longer in BD and how to access residents for narcan. What municipality has highest concentration? Discussed applying for another vending machine.



## PHEP UPDATES

## PUBLIC HEALTH EMERGENCY PREPAREDNESS



Reported out on self-directed objectives for the last grant, 2024-2028 is focusing on all 15 CDC PHEP Capabilities



CRI Jurisdictional Action Plan

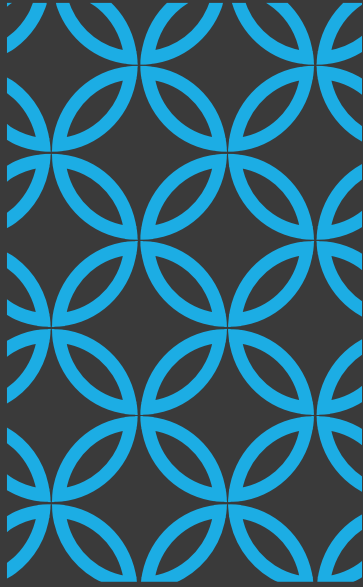
Reviewed shelter plans, sites, and contacts.  
Made visits, conducted tours, and built rapport



Completed our annual HVA  
(hazard vulnerability assessment)

Highest areas of vulnerability, on a scale to 100 are:  
Temp extremes (31), Inclement weather (30), ID  
Outbreak (29), Tornado (28), Pandemic (27)

Question: What happens in the case of an emergency?  
MOU's have been put in place.



## PHEP CONTINUED...

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Used our 3 large flu clinics as exercises.

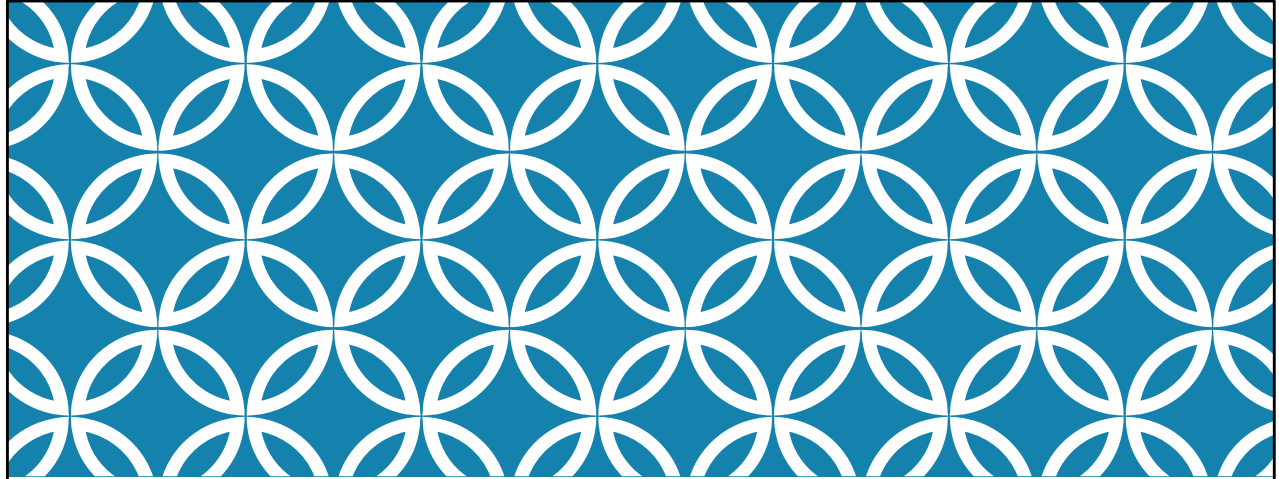
We Practice to fail and ID our areas of opportunity

Participated in the Nicolet Emergency Operations Planning Meeting

Continue to meet and be frustrated with emPOWER data

Participate in exercise planning and design for the region, BioWatch Advisory Committee, SER COAD and HERC

Can we do more education for clinics? Trying to head counts to manage efficiency. Vaccine handling is most important to no risk spoilage. Jamie discussed having an entire community clinic. Could two villages be combined? What do other communities do? Less clinics. Give everything for VFC kids. No RSV vaccine. Ed suggests RSV vaccine.



## COMMUNICABLE DISEASE UPDATES



## QI UPDATE: 2-YEAR-OLD VACCINE COMPLIANCE

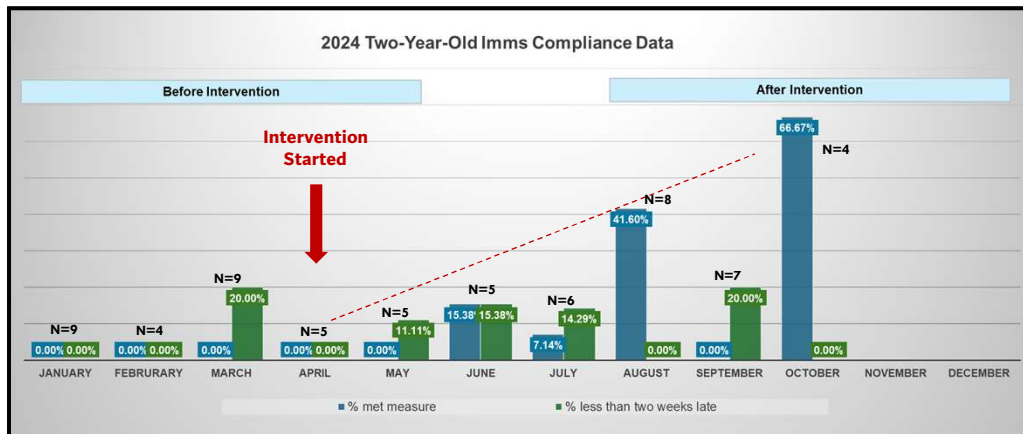
### Every month we provide...

- Analysis of 2-year-old vaccine compliance data
- Telephonic outreach to those overdue for required [DHS 144] vaccines including: DTaP(4), Hep B(3), Polio(3), MMR(1), Pneumo(4), Varicella(1)
- Health education and appointment scheduling assistance
- Personalized letters if unable to reach by phone



Ashley explains outreach and its challenges.

## QI UPDATE: 2-YEAR-OLD VACCINE COMPLIANCE



- 2-month lead time on analysis and outreach (eg. Calls were made in September to all families of children turning 2 years old in November)
- Compliance is tracked monthly

## FALL 2024 FLU & COVID CLINICS

Clinic Site	NSHD	Kroger
Shorewood	47	73
Glendale	50	32
Brown Deer	71	46
<b>Total</b>	<b>168</b>	<b>151</b>



## ADDITIONAL 2024 VACCINE CLINICS

Clinic Site	NSHD
Brown Deer School District	40
Villages of Bayside & Fox Point	8
North Shore Fire & Rescue	11
NSHD Open Clinic (weekly)	62
<b>Total</b>	<b>121</b>

### Grand Total

**440**

**vaccines  
provided**

(Mid-September - Mid-November)

## ANNUAL SCHOOL IMMUNIZATION REPORT

- Goal is always at least 99% compliance
  - **Meets minimum:** Student has received the minimum imms required for age
  - **In process:** Student is in process of receiving the required immunizations
  - **Waiver:** A medical, religious, or personal waiver has been submitted
- On track to have 100% of reports submitted this year
  - Numerous schools still reporting compliance under 99%
  - Opportunity for improved personnel education for 2025-26 school year
  - Opportunity for improved community outreach re: vaccine uptake/hesitancy

### Annual School Immunization Report QI Timeline

**May 2024** – WI updated imms requirements for child care and school entry; MenACWY vaccine for 7th/booster for 12th; chickenpox must now be verified by qualified health professional (not just parent report) for exemption from varicella

**June 2024** – Compliance results for 2023-24 school year released; 4 schools in NS jurisdiction did not submit report (funding objective not met); outreach for 2023-24 school year limited to one reminder email

**July 2024** – Initiated outreach to verify school contacts; identified 8 schools that were not included in outreach last year; total of 32 schools across 7 districts requiring outreach








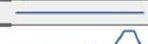




**August 2024** – Continued outreach, reminders, support; emails/calls to provide resources and educational materials from WDHS

**October & November 2024** – Immunization reporting deadlines; currently only 2 of 32 schools have yet to submit a report; confusion among school administrators around how to quantify compliance

## ANNUAL SCHOOL IMMUNIZATION REPORT CONT.

Public		Private			
Brown Deer	99.93%	Inst of Tech & Acad.	79.43%	USM	99.65%
Fox Point	99.46%	Bader Hillel Academy	77.91%	Bader Hillel High	No Report
Glendale-River Hills	99.49%	MKE Jewish Day School	100%	Torah Academy	84.85%
Maple Dale-Indian Hill	100%	St. Eugene School	100%	St. Robert School	95.49%
Nicolet	99.34%	NS Montessori	99.02%	Dominican High School	100%
Shorewood	98.55%	St. Francis Children's Ctr	100%	Holy Family Parish School	No Report
Whitefish Bay	99.2%	St. John's Lutheran	98.2%	St. Monica Grade School	98.96%

Is there accountability for a school not reporting? Possibly DPI. Is there a way the HD can be more substantial in facilitating the process for the red schools? Schools don't have access to imms records.

Disease	Jan-Aug 2024	Jan-Aug 2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	January 2024- October 2024 Trend
ARBOVIRAL ILLNESS, OTHER^^	10	0	0	2	0	2	0	0	2	2	2	0	
ARBOVIRAL ILLNESS, WEST NILE*	8	8	0	0	0	0	0	0	0	2	4	2	
BABESIOSIS*	105	197	11	10	7	9	4	24	18	9	9	4	
BLASTOMYCOSIS	28	77	8	4	5	0	2	2	2	1	1	3	
BLUE-GREEN ALGAE AND CYANOTOXIN POISONING	0	0	0	0	0	0	0	0	0	0	0	0	
CAMPYLOBACTERIOSIS	99	119	15	6	11	11	7	13	13	11	5	7	
CHLAMYDIA	8294	8684	910	876	776	866	767	775	932	832	825	735	
COVID-19 Associated Hospitalizations^^^	599	-	108	74	42	30	28	19	48	108	90	52	
COVID-19 Pediatric Mortality^^	0	-	0	0	0	0	0	0	0	0	0	0	
CRYPTOSPORIDIOSIS*	48	26	1	4	4	1	5	5	4	13	10	1	
E-COLI, SHIGA TOXIN-PRODUCING (STEC)	28	36	1	4	0	0	3	3	7	4	3	3	
EHRlichiosis/ANAPLASMOSIS*	5	6	0	0	0	0	0	3	2	0	0	0	





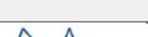




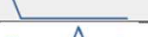





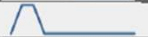




## MILWAUKEE COUNTY COMMUNICABLE DISEASE REPORT RECEIVED 11/5/2024

Everyone interested in getting Milwaukee County CD report.

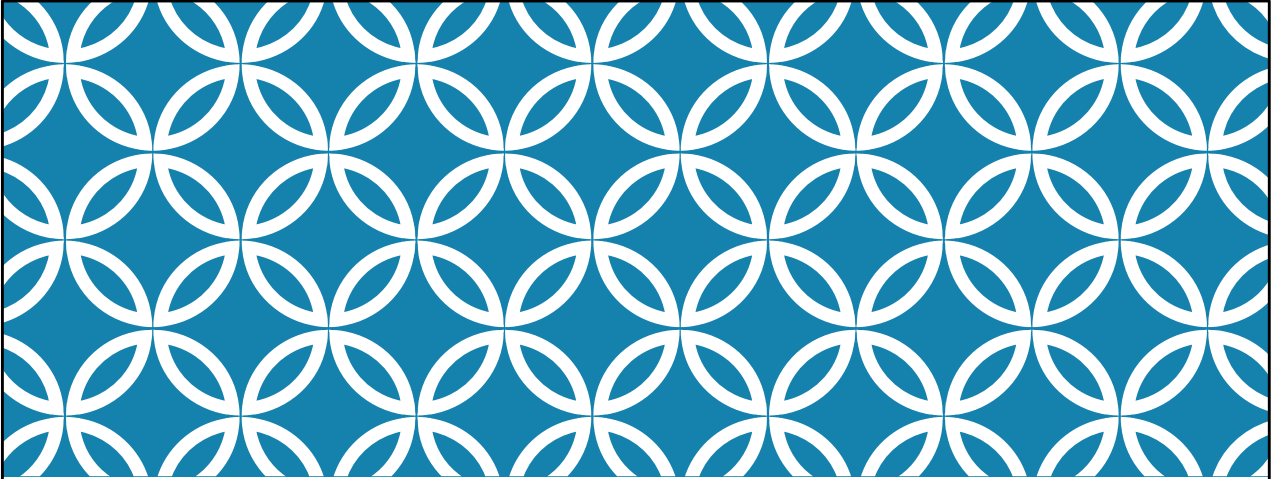
# MILWAUKEE COUNTY COMMUNICABLE DISEASE

Disease	Jan-Aug 2024	Jan-Aug 2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	January 2024- October 2024 Trend
%GC Resistant to Cefixime††	0	0	0	0	0	0	0	0	0	0	0	0	
%GC Resistant to Ceftriaxone	0	0	0	0	0	0	0	0	0	0	0	0	
%GC Resistant to Ciprofloxacin	23.72	32.1	27.6	29.4	13.3	25.8	17.6	26.7	26.2	26.2	18.4	26	
GIARDIASIS*	54	37	4	3	6	1	3	5	10	12	9	1	
GONORRHEA	3671	3577	433	361	323	352	313	312	401	403	405	368	
HAEMOPHILUS INFLUENZAE, INVASIVE DISEASE*	20	24	2	2	2	1	1	4	2	0	3	3	
HEPATITIS A	1	4	0	1	0	0	0	0	0	0	0	0	
HEPATITIS B, ACUTE	61	2	8	7	10	7	3	7	9	4	0	6	
HEPATITIS B, CHRONIC	57	15	8	7	10	7	3	5	7	4	0	6	
HEPATITIS C, ACUTE	5	8	1	0	0	1	0	2	0	1	0	0	



HEPATITIS C, CONFIRMED CHRONIC	129	177	15	15	12	8	14	18	12	11	12	12	
HISTOPLASMOSIS	1	16	0	0	0	0	0	0	0	0	0	1	
HIV, NEW DIAGNOSES	88	68	15	7	5	7	15	10	7	11	6	5	
INFLUENZA-ASSOCIATED HOSPITALIZATION*	553	92	175	161	134	55	15	1	2	4	3	3	
INFLUENZA-ASSOCIATED PEDIATRIC MORTALITY	0	0	0	0	0	0	0	0	0	0	0	0	
KAWASAKI DISEASE*	5	6	1	0	0	3	0	1	0	0	0	0	
LEGIONELLOSIS	41	55	0	0	0	0	3	10	7	9	9	3	
LISTERIOSIS	5	7	0	1	0	1	2	0	0	1	0	0	
LYME DISEASE*+	94	179	9	9	7	8	3	21	16	9	8	4	
MALARIA	3	7	0	1	0	1	1	0	0	0	0	0	
MEASLES	0	1	0	0	0	0	0	0	0	0	0	0	
MENINGITIS, BACTERIAL OTHER	3	12	0	0	0	0	2	0	0	0	1	0	
MENINGOCOCCAL DISEASE (N. meningitidis)*	1	0	0	0	0	0	0	0	1	0	0	0	
MUMPS	0	0	0	0	0	0	0	0	0	0	0	0	
ORTHOPOXVIRUS, MPOX*	3	5	1	0	0	0	0	0	1	0	0	1	
PERTUSSIS (WHOOPING COUGH)*	173	3	1	2	0	8	2	6	13	31	59	51	
ROCKY MOUNTAIN SPOTTED FEVER*	0	0	0	0	0	0	0	0	0	0	0	0	
RSV Associated Hospitalizations^^	209	-	102	63	26	10	2	1	1	1	1	2	
RSV Pediatric Mortality^^	1	-	1	0	0	0	0	0	0	0	0	0	
RUBELLA	0	0	0	0	0	0	0	0	0	0	0	0	

Disease	Jan-Aug 2024	Jan-Aug 2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	January 2024- October 2024 Trend
STREPTOCOCCAL DISEASE, INVASIVE, GROUP A	77	80	8	3	7	15	8	9	12	5	5	5	
STREPTOCOCCAL DISEASE, INVASIVE, GROUP B	72	64	9	5	5	4	10	10	13	5	3	8	
STREPTOCOCCUS PNEUMONIAE, INVASIVE DISEASE*	86	68	13	6	12	11	12	5	4	2	6	15	
SYPHILIS, PRIMARY AND SECONDARY*	143	283	18	15	17	18	16	13	16	5	17	8	
TUBERCULOSIS	12	7	0	0	1	1	3	0	3	3	0	1	
VARICELLA (CHICKENPOX)*	25	26	5	1	2	3	0	3	3	4	2	2	
VIBRIOSIS, NON-CHOLERA*	9	5	2	0	1	1	1	0	1	2	1	0	
YERSINIOSIS	8	16	0	1	1	1	1	1	0	2	0	1	



**CASE MANAGEMENT UPDATES** |

## Q3 HIGHLIGHTS

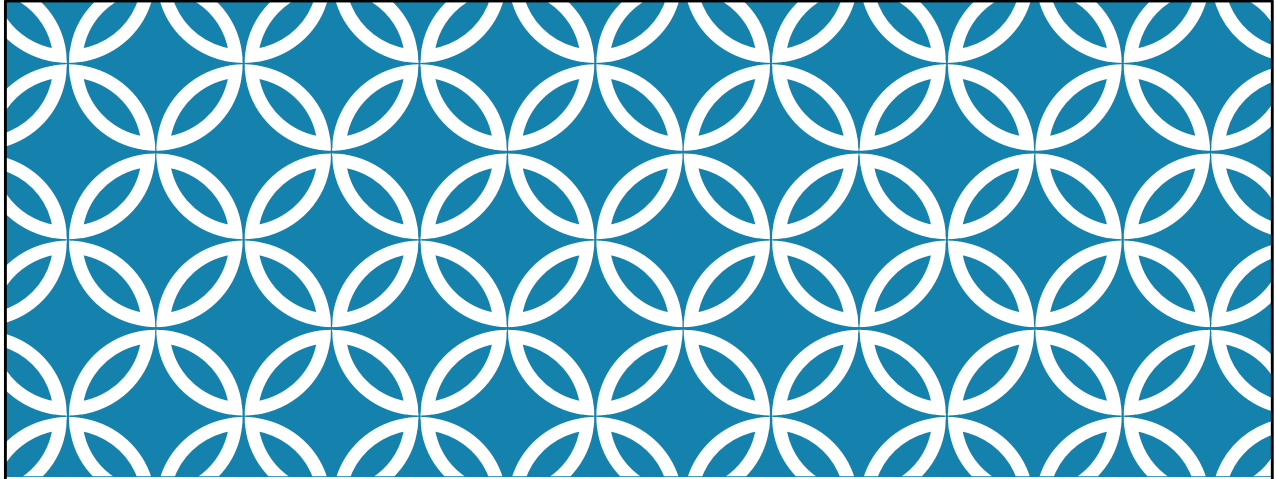
- Leaving door hangers at missed home visits
- Coordinated a fall prevention resource fair
- Created a charting form and tracking document (continually refining)
- Contacted 399 NS residents, took 20 referrals from NSFR and conducted 24 ride alongs with NSFR
- Creating harm reduction kits to provide to individuals with recent OD and their loved ones
- Followed up with 100% of the individuals who had a non-fatal OD (n = 13)
- Starting to collect stories and wins because numbers don't mean that much
- Trying to show a cost savings

Focus in on the families and their stories. Get specifics on access to care. Use emotion. Gain photos, quotes, and stories of victims.

2023	Falls	2024	Falls	Percent Change
July	312	July	339	+8.65
August	388	August	319	-17.78
September	337	September	350	+3.86
<b>Total</b>	<b>1037</b>		<b>1008</b>	<b>-2.80</b>

2022 fall-related deaths (394 total deaths Jan-Sept)	2023 fall-related deaths (380 total deaths Jan-Sept)	2024 fall-related deaths (382 total deaths Jan-Sept)
Q1: 7	Q1: 3	Q1: 8
Q2: 6	Q2: 3	Q2: 5
Q3: 4	Q3: 5	Q3: 4
Total: 17 (4.31% of deaths)	Total: 11 (2.89% of deaths)	Total 17 (4.45% of deaths)

Month	July	Aug	Sept
Total Referrals	4	6	5
EMS Providers Trained	0	0	0
Completed Home Visits	30	19	32
Follow ups on falls (letter, phone call, case consult)	180	165	54
Overdose follow ups	5	2	6
Community Agency Site Visits	2	3	3



**ENVIRONMENTAL HEALTH UPDATES** |

## NSEHC UPDATES

- 150 Inspections since our last meeting
- Leslie passed the Certified Pool Inspector Exam
- Staff attended the Wisconsin Environmental Health Association Conference
- New licenses issued: Off Shore, Jersey Mikes, Mallards, WAC, Original Beer Garden
- LaQuinta Update
- Courtyard by Marriott Update
- Ordinance and Fee Changes Update

Off shore to carry epi pens.

## LEAD

- Working with DPWs and Managers around the changes in the EPA lead lateral regulations
- Will be applying for a grant through DNR for community outreach around the project (This could fund a position in NSHD—meeting next week)
- Have dispensed, in partnership with WLSH and WFB over 200 lead in water test kits
- Attending community meeting 12/2 to do education for the public around lead risks
- Did a few TV interviews on the subject to control the narrative and remind folks that public health is here for support



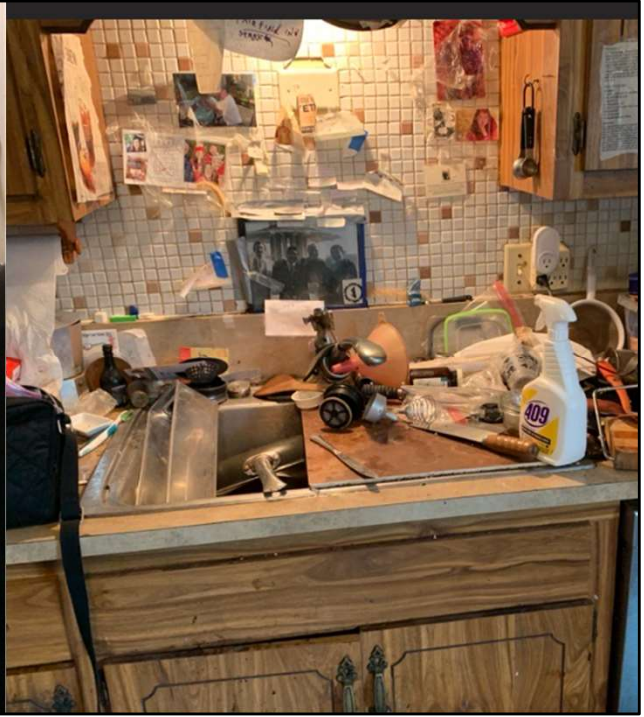
## HUMAN HEALTH HAZARDS

- 2 mitigations in process—Glendale and Whitefish Bay
- Refining systems and hitting our stride on process and approach
- Deferring as much as work as possible to the homeowner and their supports
- Stressing the importance of staying engaged with NSHD in the process
- Approaching the situation as objectively as possible and explaining that throughout the process.
- Using language like "I cannot unsee that..." to motivate folks to maintain inertia
- Maintaining open lines of communication with village managers, inspectors, and DPW

At one point do you enforce the raze order? Work with our local partners.



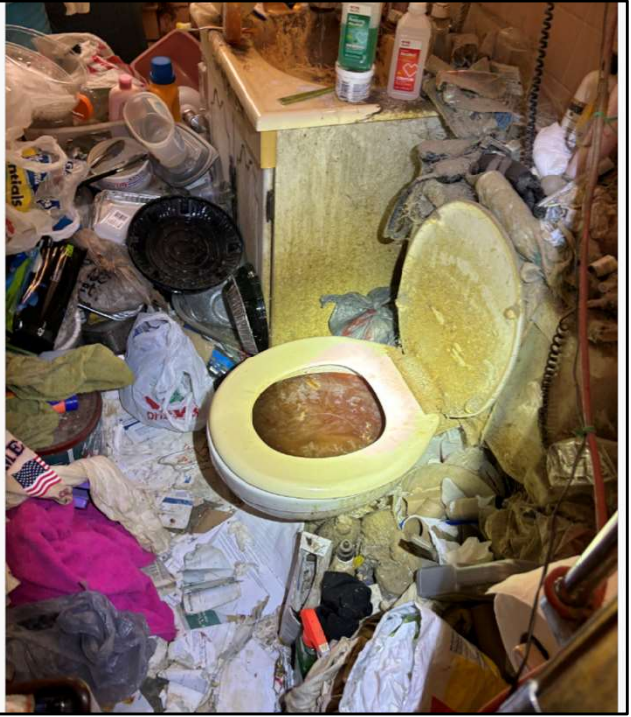
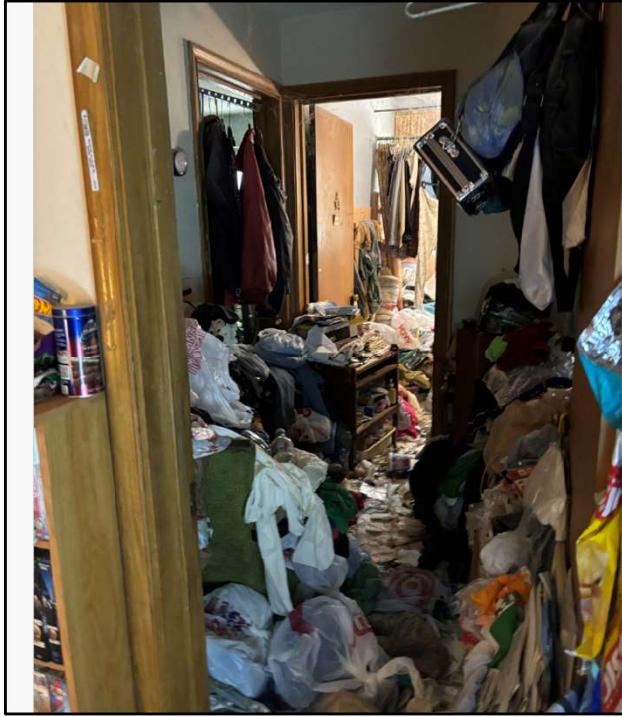
This is not placarded as a human health hazard, but there were several items for follow-up that required re-inspection. This work is nearly completed and the individual has moved to a living space more suitable for their age and capacity.

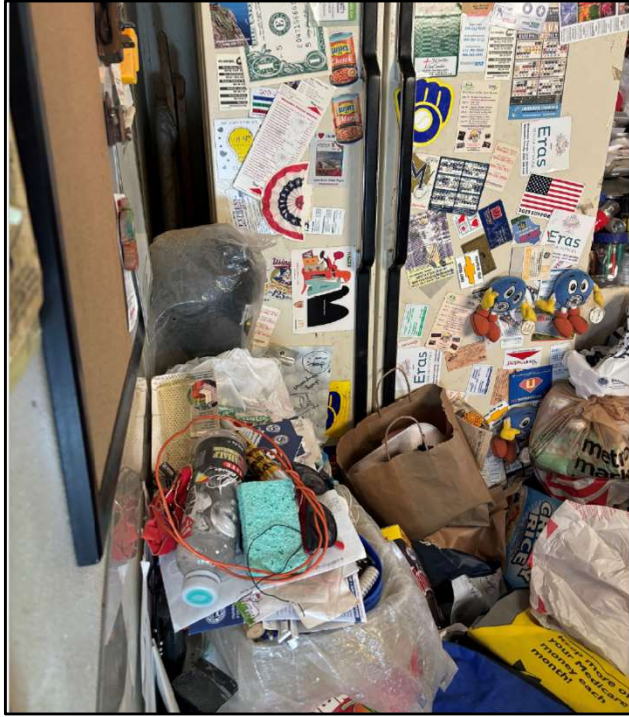


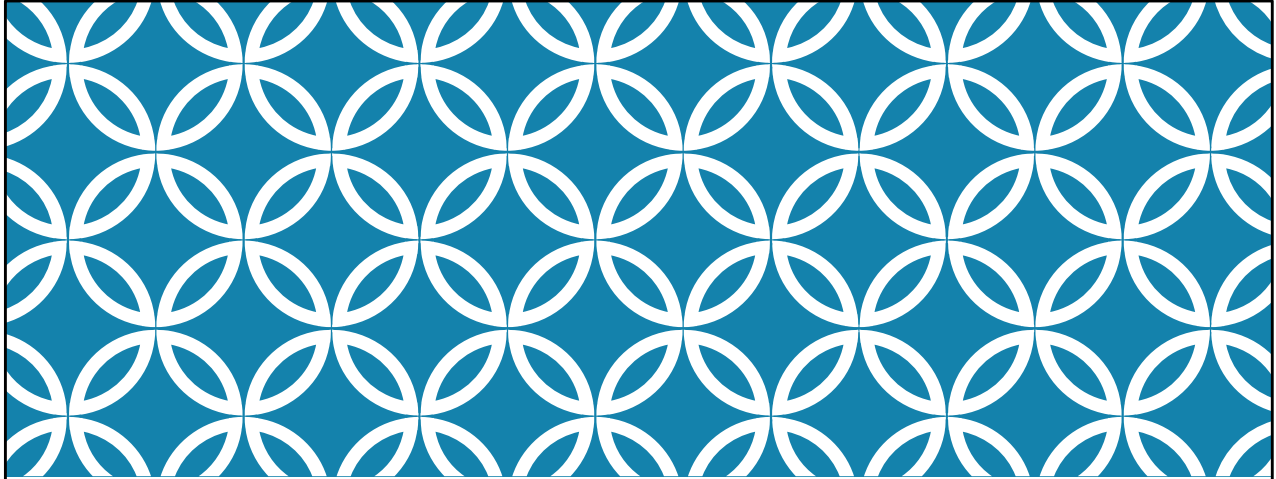


This is a work in progress, but progress is the key word! This was placarded due to the presence of hazardous human waste and unsafe/unusable nature of the space. The owner of this home is currently displaced, and the additional tenant has been hospitalized for several weeks as a result of injuries and illness related to these living conditions. WFB inspector was very helpful and worked collaboratively with NSHD on this and issued a coinciding raze or repair order.









## OTHER UPDATES

## OVERDOSE DATA TO ACTION

- 2024-2025 OD2A Grant for OFR
  - Subject matter experts and persons with lived experience
  - Focus on SMARTIE based recommendations
  - Continue to grow partnerships and collaborations
- Vending Machine
  - 2024: 888 doses
  - Since October 2023: 1136 doses



Becky mentioned our success with being rewarded funding for the OD2A grant for 2024-2025 in previous slides. With the funding objectives we have:

- Work with subject matter experts and persons with lived experiences to create recommendations that are rich, contextual and feasible. This includes paying folks for their time.
- Focus on SMARTIE based recommendations by revamping the recommendation processes (currently an intern is researching options) but such as surveys, voting mechanisms, ranking, etc.
- Continue to grow partnerships and collaborations,

The vending machine was moved to Glendale. Glendale City Hall is now the site of the North Shore Municipal Court, which hosts Night Court on Thursdays. This was originally in Brown Deer, but the clerk retired, so they consolidated it. We saw the greatest number of folks accessing the vending machine during night court previously and hope to see the same continue.



## NARCAN + FENTANYL DIRECT

- NARCAN DIRECT:
  - Trained: 459
  - Distributed Doses: 788
- FENTANYL DIRECT:
  - Trained: 70
  - Distributed: 360

**78%**  
INCREASE OVER 2023



Since 2023 we have had an approx. 78% increase in both folks trained how to give Narcan and in the number of doses distributed. 2023 was the first year we really had supply to start distributing to the community and training them.


We have also been awarded 60 cases (720 boxes or 1440 doses) of Narcan for the 2024-2025 grant year.


Fentanyl Direct is mainly via the vending machine. Folks are interested in these, but much more interested in combination MDBio test kits – Fentanyl and Xylazine. We just got in some FTS kits from the State that don't fit in the vending machine well but are good for distributing out in the community through channels such as the hotel/motels.


# CHIP UPDATE


- RELEASE OF CHIP REPORT
  - End of year
  - Two phase approach
    - Health Department focused
    - Community focused
- ACTION TEAMS: 2025
  - Recruitment Strategy
  - Stagger Teams
- LIVING PROCESS


2020 - 2024  
CHIP PRIORITIES


 #1  
Mental Health


 #2  
Substance-Free Living


 #3  
Injury Prevention

 #4  
Physical Activity & Nutrition

 #1  
Mental Health

 #2  
Healthy Living

 #3  
Environmental Health

 #4  
Communication & Community Engagement

The CHIP for 2025-2029 will be released by the end of the year. Taking the approach of a living process/document, we aim to update our work continuously. Especially for goals and objectives – if something is achieved, it doesn't mean we are done. collaborations, in that consideration, it's going to be a two phased approach:

1. Health Department focused: what are the goals and objectives that we can be accountable and responsible for to the community?
2. Community focused: what are the goals and objectives the action teams identify?

We will kick off action teams in early 2025. Naomi, a student with us this fall, is working on an action team recruitment strategy as her project. That should be ready mid-December. Because we have to build coalitions and collaborations we also plan to stagger teams, likely focusing on Mental Health as the first one.

AKO



## SLEEP BABY SAFE INITIATIVE

**Collaboration:** Partnered with Children's Health Alliance of Wisconsin, who provided one pack-n-play, safe sleep sacks, and educational materials.

**Goal:** Educate families on AAP safe sleep guidelines, including the "ABC's" (Alone, on their Back, in a Crib in a Smoke-free environment).

**Method:** created an intentionally unsafe sleep environment in a pack-n-play by including items such as toys, clothes, and books. Families were encouraged to identify and correct the hazards. Along with this activity, families received safe sleep education, resources, and safe sleep sacks to promote proper sleep practices.

**Outreach:** Offered demonstrations at 10+ events, including farmer's markets, community health fairs, and the Bradley Crossing Back-to-School BBQ (bottom right picture).

**Impact:** Engaged with 35+ families, promoting safe sleep education.

- Our partnership with the Children's Health Alliance of Wisconsin allowed us to bring the Sleep Baby Safe initiative to our community.
- At each event, we set up a "bad" portable crib to demonstrate unsafe practices, such as the inclusion of toys and clothes, and engaged families in making corrections.
- We shared the American Academy of Pediatrics (AAP) guidelines on safe sleep and encouraged open conversations with caregivers about their experiences and challenges regarding safe sleep practices.
- This initiative was part of our outreach at community events such as the Farmer's Market, the Bradley Crossing Back-to-School BBQ, and various health fairs. In total, we attended over 10 events, connecting with more than 35 families.
- This hands-on education provided a safe space for caregivers to ask questions and learn, helping to build trust and raise awareness about infant safe sleep.
- Question asked what a sleep sack was.

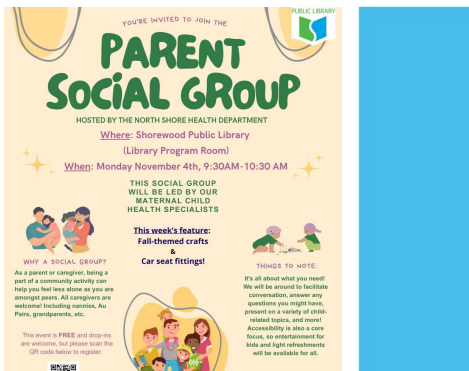
## Slide 35

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**AK0**

[@Becky Rowland] SBS and Parent Social Group slides and notes completed.

Ashley Kay, 2024-11-18T20:31:21.020



## PARENT SOCIAL GROUPS

- Parent Social Groups were relaunched this fall.
- **Goal:** Provide a safe space for caregivers to socialize, support mental health and wellness, and reduce postpartum social isolation.
- **Expanded Audience:** Parents, family members, grandparents, aunts, uncles, legal guardians, and non-birthing partners
- **Activities:**
  - Socialization opportunities
  - Public health information
  - Q&A with North Shore Health Department staff
  - Entertainment for children provided
- **Locations:** North Shore, Shorewood, and Whitefish Bay public libraries
- **Turnout:** Best turnout at Whitefish Bay Library with 7 families in attendance

- Last year, we launched the Parent Social Groups program to provide new parents with a safe, supportive space to connect and promote mental wellness during the postpartum period.
- This year, we're excited to expand the program to include all caregivers—whether they are parents, grandparents, aunts, uncles, legal guardians, or non-birthing partners.
- These gatherings are met to be a safe and relaxing opportunity for caregivers to socialize, share stories, and get answers to their public health questions. We also provided resources on mental health and wellness, and staff will be available for Q&A.
- We're offering entertainment for children to ensure families can participate and feel comfortable.
- Our events are hosted at libraries in North Shore, Shorewood, and Whitefish Bay, with Whitefish Bay seeing the best turnout so far. Average turn-out per group is 2-3 families. So far, we held 5 groups and plan to do two more in December and continue the groups next year.
- We are looking forward to reconnecting with families and expanding this initiative to build community support among caregivers.
- Question is Brown Deer has had any babies that died.

## POTPOURRI

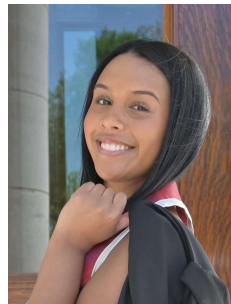
- Becky appointed by Governor Evers to the board of directors at the WSLH
- 2 recent bats tested + for rabies, conducting outreach and education (one more since the last time we met) so many bats!
- Bri completed the car seat tech training and will start clinics in December
- Exploring the provision of travel vaccines
- Budget to Brown Deer Board 12/2 for final approval—decreased our original deficit

## ACADEMIC UPDATES

- INTERNS

- STUDENTS

- FALL 2024
- SPRING 2025



- Interns: This semester we welcomed Avery and Haley to NSHD. Avery is an undergraduate BSPH student at UWM and Haley is a graduate MPA student at UWM.
- Students:
  - Fall 2024
    - This fall we have an undergraduate clinic group from UWM's School of Nursing. They provided assistance at our 3 fall flu clinics (Heather showed instructing students how to vaccinate).
    - We have a PharmD/MPH dual degree student, Alexis, from Concordia University. Alexis is doing a public health rotation at NSHD. She plans to return next summer to complete her practicum with us.
    - We have a MPH student, Naomi, from MCW, doing her field placement project.
  - Spring 2025
- Motion to adjourn. Simenz first. Ed Second.