



# Report to the Community



## Walworth County Division of Public Health

A review of the activities, accomplishments, and status of Public Health in Walworth County during 2015.

**For more information about our programs, contact:**

Walworth County Department of Health and Human Services  
Division of Public Health  
W4051 County Rd NN  
PO Box 1005  
Elkhorn, WI 53121

Phone: (262) 741-3140  
(800) 365-1587

Fax: (262) 741-3757

Email: [walcoph@co.walworth.wi.us](mailto:walcoph@co.walworth.wi.us)

Web: [www.co.walworth.wi.us](http://www.co.walworth.wi.us)

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“Coming together is a beginning, staying together is progress and working together is success.”

Henry Ford

## Letter from the Health Officer

As I began to reflect back on the accomplishments of 2015, I asked staff to summarize key activities of their primary programs and highlight unique events they participated in throughout the year. As I read the challenges and successes, two themes were consistent throughout the year: collaboration and compliance.

2015 proved to be a very busy year of community partnerships and collaborative growth. Public Health (PH) staff worked to broaden our presence in the community, collaborate on projects with new partners, build relevant educational programs, develop policies, and expand services to improve the health and well-being of our citizens and visitors. We continued to find new ways to partner with other Department of Health and Human Services (DHHS) divisions and county departments. We know that the more we work together on projects, bringing different perspectives to the table, the more successful we can be in providing the best services and opportunities for our consumers.

Compliance and regulations were also recurring themes in our activities this past year. We spent several months preparing for the State audit of our programs in June. The audit tool was revised to more closely align with Public Health Accreditation Board (PHAB) standards. This exercise helped us realize what steps we need to implement in revising our work strategies to prepare for accreditation over the next several years.

As with most years, 2015 witnessed personnel changes. We have four new faces in the division. Besides filling vacant nurse positions, we were able to add an interpreter/clerk position in WIC and replaced a part time nurse position with a health educator for the division. These moves have added a different perspective to the division and we welcome the contributions of our new team members, (pictured on the back cover). In January, we said goodbye to DHHS Director, Linda Seemeyer and Deputy Director, David Thompson. Elizabeth Aldred was appointed Director and in August, we welcomed Robert Williams as our Deputy Director. I thank them for their support of our programs and embracing prevention as a department philosophy.

I would like to thank several individuals that continued to support the work and efforts of PH this past year: David Bretl, our County Administrator; Nancy Russell, our County Board Chair; our Health and Human Services Board; the Health and Human Services management team; Dr. Gregory Gerber, our Medical Director; and our many community partners. We are also fortunate to have dedicated volunteers, Betty Wuttke, Debbie Bluett, Bev Thompson and Nedra Taylor, who every week willingly give of their time and talents to help us. We are grateful for all they do.

As we move forward, Public Health will continue to monitor the ever changing needs of our population, and continue to provide the preventative health care that we need to grow stronger, healthier communities.

Respectfully submitted,

Janis M. Ellefsen, BSN, RN  
Health Officer

# Mission

***In partnership with the community, we protect and educate our residents and visitors by providing targeted health and environmental programs and outreach initiatives which enhance the wellbeing of all.***

# Vision

***Recognized as a visible, active, community partner, elevating the wellbeing of the residents and visitors of Walworth County***

# Values

***Integrity:*** Displaying honesty, trustworthiness, and reliability in all that we do.

***Team Work:*** Promoting collaboration and communication within our organization and the community in a manner that is agency-blind to achieve the best possible outcomes.

***Respect:*** Creating an environment that is inclusive of all by recognizing and celebrating the diverse life experiences of our community.

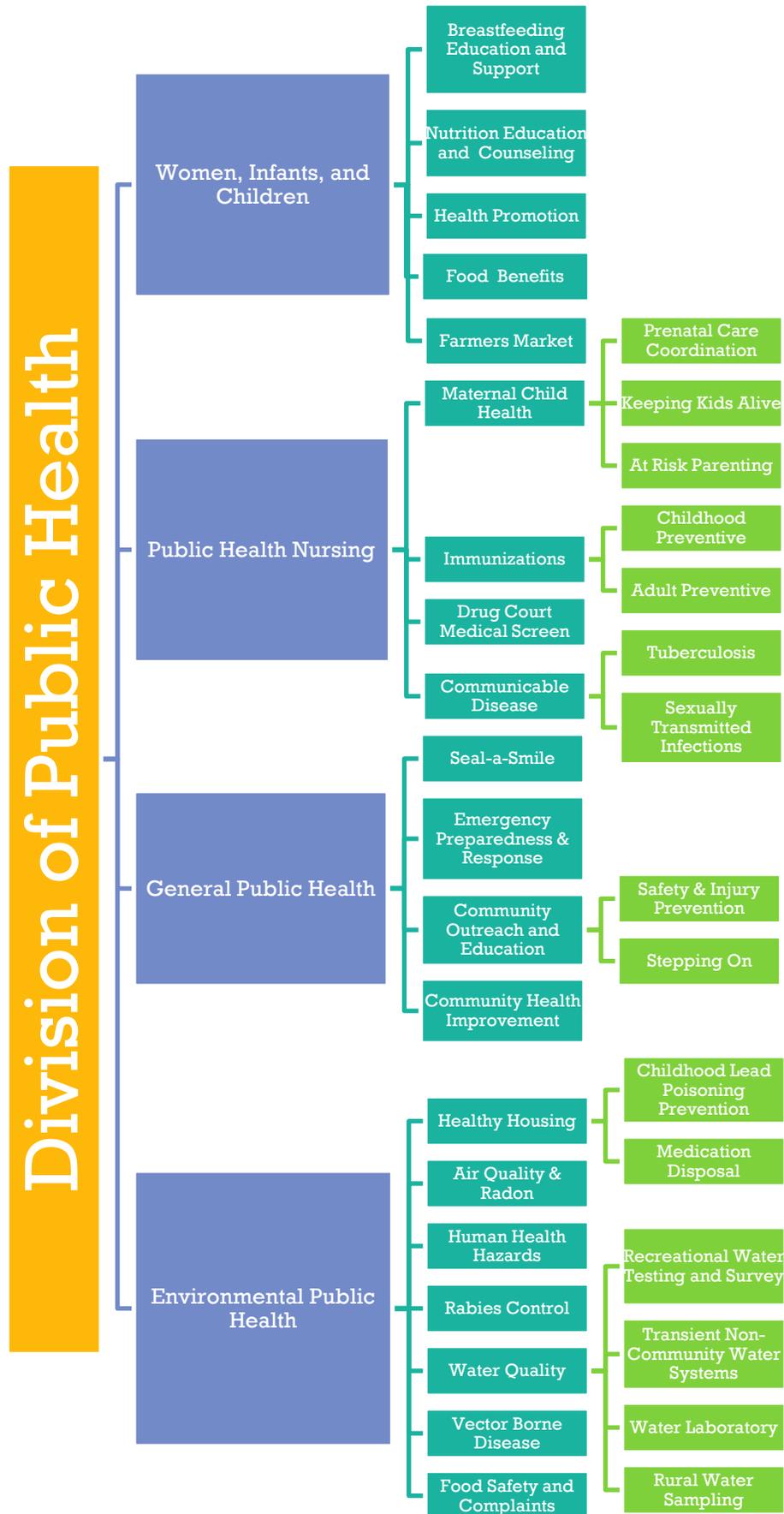
***Quality:*** Performing to the highest standard possible while remaining efficient, effective and responsive to the needs of the community.

***Prevention:*** Protecting the health of the community by stopping the root cause of disease and illness rather than treating the disease or illness itself.

***Innovation:*** Encouraging new approaches using evidenced-based data to create progressive solutions to new and emerging problems.

***Communication:*** Embracing effective and open communication among colleagues and with our consumers, utilizing all forms of communication in the most appropriate and effective channels.

# Division Structure





# Administration and Policy Makers

## Health and Human Services Board

Kenneth Monroe  
Chair, Supervisor

Tim Brellenthin  
Vice Chair, Supervisor

Kathy Ingersoll  
Supervisor

Joe Schaefer  
Supervisor

Charlene Staples  
Supervisor

James Seegers, MD  
Citizen Member

Bernice Solis  
Citizen Member

Sandy Wagie-Troemel  
Citizen Member

William Wucherer, RN  
Citizen Member

## Health and Human Services Directors

Elizabeth Aldred, AM, LCSW, ICS  
Director

Robert Williams, MSSW  
Deputy Director



## Public Health Manager

Janis Ellefsen, BSN, RN  
Health Officer

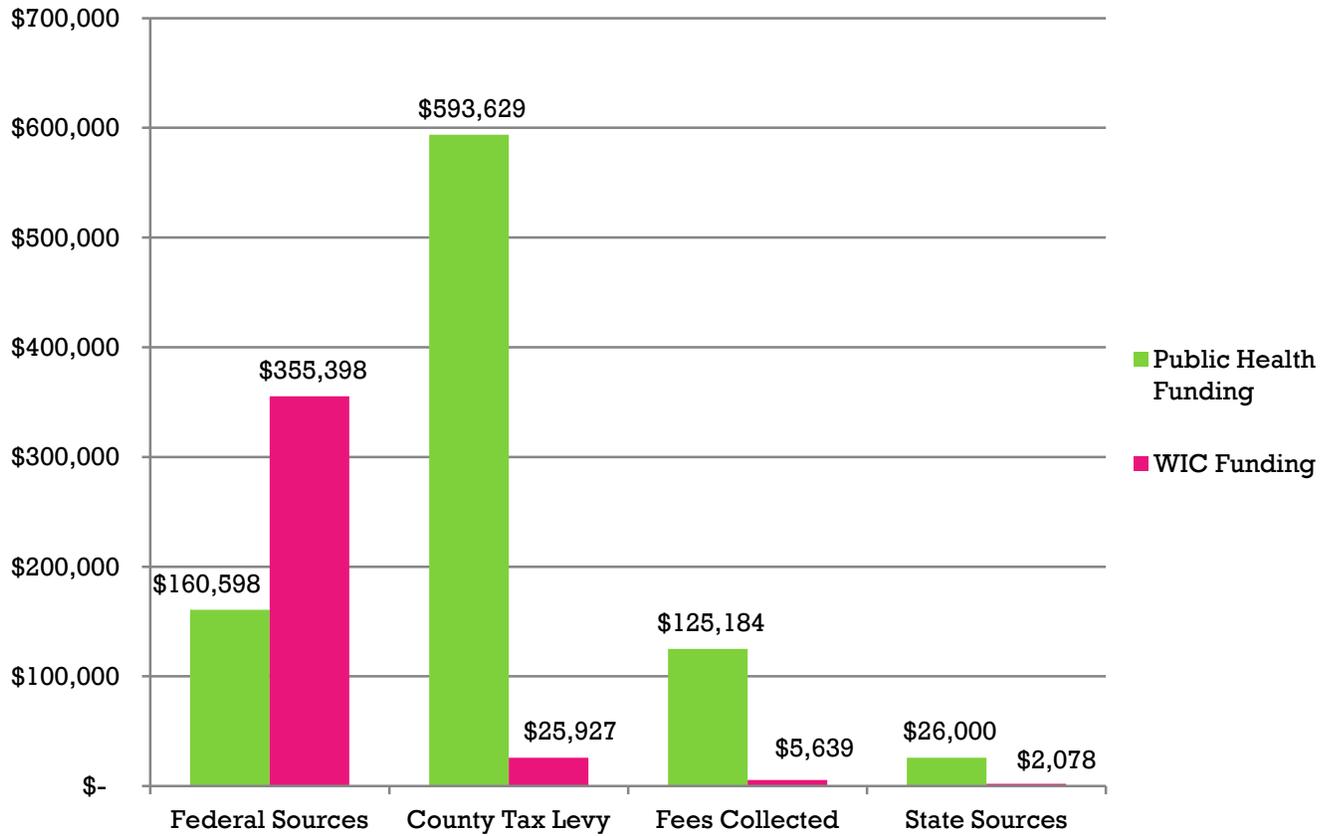


## Public Health Supervisors

Elizabeth Walsh, BSN, RN  
Public Health Nursing Supervisor

Terese Rutkowski, MS, RD, CD, CLS  
WIC Supervisor

# 2015 Funding Sources



## + Staffing:

Erica Bergstrom, MPH  
Environmental Health

Laura Borek  
Public Health Clerk

Adriana Cano  
Public Health Clerk

Daniel Clausen, RD  
WIC Dietitian

Bill FitzGerald-Fleck, BSN, RN  
Public Health Nurse

Andrew Jodarski, BSN, RN  
Public Health Nurse

Ashley Kopps, MPH  
Health Educator

Hollynd Schmidt, BSN, RN  
Public Health Nurse

Theresa Seidl, CLS  
WIC Nutrition Specialist

Susan Speciale  
WIC Clerk

Patty Stritesky  
WIC Clerk, BFPC

Paula Strom, BSN, RN  
Public Health Nurse

Chace Wolff, RDH  
Seal-a-Smile Coordinator

Gonzalo Vega  
Interpreter Clerk



# + Division Evaluation and Improvement

The journey of preparing our division for accreditation, through the development of sustainable methods of program planning, was continued in 2015. Over several months, all division staff met to develop a performance management process and begin implementation in a stepped progression. As we learned about the performance management cycle, staff selected a performance standard relating to their program area, developed strategies to meet the standard through use of evidence based practices, and identified how they would measure progress. Each performance standard was related back to a community health need.

The division staff also worked on priorities for division improvement that were chosen at the end of 2014. The priorities focused on internal and external communication and partnerships, looking for new partners and initiatives. Staff identified health issues in our community and in November 2015 began to address those issues through programming designed for implementation in 2016. Priorities selected for focus during 2016 were:

1. Oral Health
2. Safe Sleep
3. Healthy Homes
4. Overweight and Physical Activity

Division staff will provide data on these topics as a part of the Community Health Assessment in 2016.

## Accreditation Readiness

In 2015, the Prevention block grant funding provided by the State of Wisconsin mandated that a certain percentage be spent on conducting activities to begin preparing for Public Health Accreditation. Accreditation is currently a voluntary process. In 2015 the division took three steps towards accreditation: developing a performance management program to be implemented during the next year, developing a training development plan for staff, and finally, beginning to create a strategic plan for the division. These projects and processes all help the division make strides toward the goal of eventual accreditation.

## 140 Review: 5-year Audit Completed

Every five years Wisconsin public health departments are required to undergo a review process called the "140 Review" after state statute 140, which lists the required duties of the health department. Through this process the health department level is determined, which can have an impact on funding.

As a Level II health department, we are required to provide all mandates of a Level I health department, and, at a minimum, an additional seven programs. The review process looks in depth at our activities and ensures that we continue to meet state requirements. This year the format of the audit was revised to more closely align with public health accreditation standards.

Our on-site audit was conducted by state representatives on June 25, 2015. We received excellent feedback on our detailed presentation and the depth of our programs and were once again certified as a Level II health department.



**11%**

Walworth County households speak a language other than English in the home

**6<sup>th</sup>**

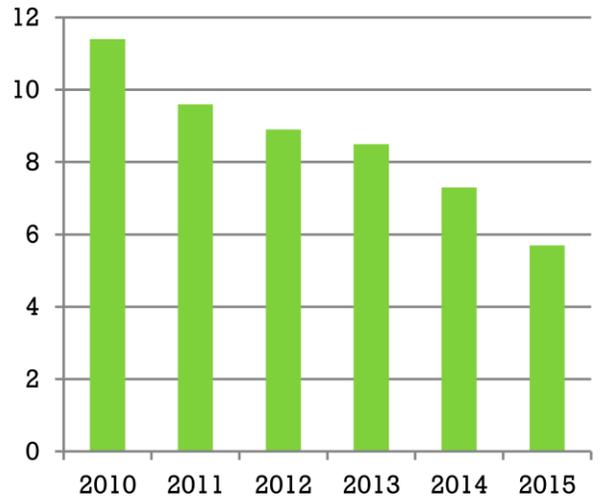
Largest tourism industry in the State

**15<sup>th</sup>**

Fastest growing county in Wisconsin over the last 5 years



**Percent Unemployment**



# County Demographics:

What the county population looks like

	2013	2014
Population Estimate	102,945	103,527
Persons 18 years and younger	22.3%	21.9%
Persons 65 years and over	14.8%	15.3%
White alone, not Hispanic or Latino	85.9%	85.6%
Hispanic or Latino	10.9%	11.1%
Black or African American alone	1.2%	1.3%
All others	1.6%	2.8%
High school graduate or higher	90.1%	90.3%
Bachelor's degree or higher, percent of persons age 25+	26.2%	26.3%
Per capita money income in past 12 months	\$27,130	\$27,321
Median household income	\$54,020	\$53,998
Persons below poverty level	13.4%	13.7%

Source: US Census Quick Facts



# County Health Rankings

Walworth County continued our slide downward in the County Health Rankings during 2015 in both health outcomes and health factors. While we have had some success in improving insurance coverage, preventable hospital stays, and diabetic monitoring, we've taken a downward stumble in other areas. These include children living in poverty, sexually transmitted infections, and adult physical activity. In the majority of the ranked categories we remain stagnant, while other counties in the state continue to make strides forward through concerted efforts. Improvement in the County Health Rankings in our community will take a widespread, focused, and determined effort by many groups working in cooperation. The upcoming 2016-2020 Community Health Improvement Plan will be an opportunity for us to look at the rankings and, as a community, decide how we can best improve our overall standing.

## Cancers

were the leading cause of death in 2015

Preventable hospitalizations cost **\$393** per capita

**571**

People were injured in motor vehicle crashes

### Health Outcomes

	2014	2015
<b>Overall Ranking</b>	38 of 72	43 of 72
<b>Length of Life</b>	20 of 72	35 of 72
<b>Quality of Life</b>	54 of 72	55 of 72
<b>Poor or Fair Health</b>	14%	14%
<b>Poor Physical Health Days per 30 days</b>	3.5	3.5
<b>Poor Mental Health Days per 30 days</b>	3.1	3.1
<b>Low Birthweight</b>	6.5%	6.5%

### Health Factors

	2014	2015
<b>Overall Ranking</b>	32 of 72	37 of 72
<b>Health Behaviors</b>	14 of 72	17 of 72
<b>Clinical Care</b>	50 of 72	54 of 72
<b>Social and Economic Factors</b>	32 of 72	35 of 72
<b>Physical Environment</b>	69 of 72	70 of 72



# Community Health Improvement Plan (CHIP):

## CHIP Initiative 1: Access to a Free Medical Clinic or Other Model

The opening of the Open Arms Free Clinic (O AFC), as a result of the 2011 Walworth County CHIP was, and continues to be, a huge community health improvement success. Since 2012, O AFC has seen over 1,500 residents. 2015 brought amazing growth to the clinic as it moved into a space three times larger, added volunteers, and added part-time staff. O AFC also introduced new services including dental, behavioral health, and vision care, seeing over 200 patients in these specialty areas.

Walworth County Department of Health and Human Services remains a committed partner to O AFC. Public Health continues to provide staff with training and assists in policy development. The Walworth County Health and Human Services Board advocated and approved providing flu vaccinations to the clinic.

The Affordable Care Act has assisted in increasing our community’s access to health care. Our percent uninsured has decreased and the number of people receiving routine vaccinations and screening procedures has increased. However, like much of the state, access to care continues to be a struggle in Walworth County. There are fewer physicians serving more people in the county and a higher percentage of people reporting unmet medical care. In spite of these challenges, O AFC plans to continue to provide prevention and primary care services to those in need and expand services in 2016 with the addition of other subspecialty providers. Through community collaborations, like that seen at O AFC, we can bridge the gap between the uninsured and access to quality health care.

How has the health status changed?

	2011	2015
<b>No health insurance coverage under age 65 (%)</b>	16	11.6
<b>Primary Care Physicians (Population:Physician)</b>	2,095:1	2,509:1
<b>Primary health services coming from a doctor/nurse practitioner’s office (%)</b>	79	78
<b>Unmet medical care (%)</b>	7	11
<b>Routine check-up during the previous 2 years (%)</b>	82	78
<b>Flu vaccination in the past year for ages 65 and older (%)</b>	64	76
<b>Pneumonia vaccination ever for ages 65 and older (%)</b>	68	79
<b>Colonoscopy within past 10 years for ages 50 and over (%)</b>	65	68
<b>Mammogram ages 50 and over in the past 2 years (%)</b>	73	70
<b>Pap smear within past 3 years ages 18 and over (%)</b>	83	80
<b>Children under age 3 with completed primary immunization series (%)</b>	77	71





# Community Health Improvement Plan (CHIP):

## CHIP Initiative 2: Access to Free/Low Cost Dental Services

Access to dental care continues to be a community need. Both availability of dentists who will see individuals covered by Badgercare and affordability of dental services for the uninsured are serious struggles within the community. There is one dentist for every 2,340 people in our county, the state average is 1 per 1,613.

However, some strides have been made in improving access to dental care:

- Open Arms Free Clinic now offers dental services to uninsured adults
- The Public Health Seal-a-Smile program has doubled its enrollment
- Two dentists have been contracted to provide care for children with severe dental needs when referred by Seal-a-Smile hygienists.

The dental work group continues to look for opportunities to partner with the community to improve access to dental health. During 2016, they anticipate the formation of a dental coalition and the possible re-opening of the dental suite at Inspiration Ministries.

### How has dental health changed?

	2011	2015
Routine dental check-up past year	59%	59%
Number of students enrolled in Seal-a-Smile	590	1,029
Seal-a-Smile referrals for dental care	202	215
Dentists accepting BadgerCare	1	0

## CHIP Initiative 3: Promote Health, Wellness, and Prevent Chronic Disease Across the Lifespan

The prevention group did not officially meet in 2015, although members of the workgroup continued to address wellness and prevention in the community. The 7% increase in advanced directives is in part due to a concentrated effort from members of this sub-committee. During its years of meeting, the prevention group also supported the establishment of a wellness committee in Whitewater and worked with the Kenosha-Racine-Walworth Tobacco Coalition to keep minors from purchasing tobacco products.

### How have chronic diseases changed? (% of population affected)

	2011	2015
Advanced care plan (%)	31	38
High Blood Pressure past 3 years (%)	29	27
High Blood Cholesterol past 3 years (%)	20	24
Mental Health Condition (%)	19	21
Asthma currently (%)	6	11
Heart Disease/Condition past 3 years (%)	6	7
Diabetes past 3 years (%)	7	5
Overweight (%)	65	64
Recommended Moderate or Vigorous Physical Activity (%)	48	48
Recommended Fruit Intake (%)	59	60
Recommended Vegetable Intake (%)	28	23
Current Smoker—past 30 days (%)	27	25
Non-smokers exposed to smoke in the past seven days (%)	18	20
Binge Drinking (%)	23	29
Heavy Drinking (%)	9	4



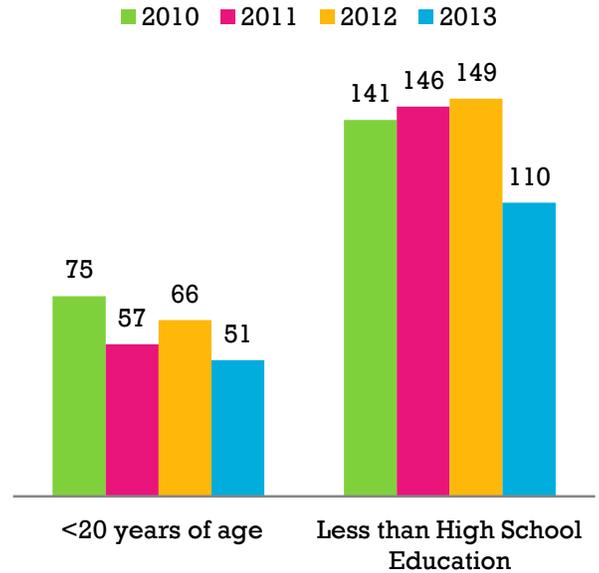
# Community Health Improvement Plan:

## CHIP Initiative 4: Early Intervention for High Risk Families

The group focusing on high risk families continued its work through the Early Learning Network (ELN), a community coalition of organizations that serve families. With the sustainability of the teen pregnancy and parenting groups, ELN met early in the year to establish new goals to rejuvenate the group and bring new people to the table. Four goals were established:

- Strive to connect children and families with resources to fulfill basic needs. (food, shelter, clothing, healthcare)
- Promote and support ongoing literacy among all residents of Walworth County. This includes child and adult literacy, financial literacy, healthcare literacy, computer literacy, etc.
- Support all community efforts that improve social, emotional, cognitive, physical, and mental well-being and development of all children and their families.
- Support prevention strategies that address bullying, sexual violence, substance abuse, family violence, and suicide.

## Changes in Teen Motherhood



## How have the risk factors changed?

	2011	2015
<b>Negative change</b>		
Children in poverty (%)	12	16
Number of newly diagnosed chlamydia infections per 100,000 population	101	253
Children in single-parent households (%)	23	30
<b>Positive change</b>		
Teen births per 1,000 female population ages 15-19 years	28	21
High School graduation (%)	85	92
Smoking during pregnancy (% of births)	16	13

## Community Spotlight: Delavan Darien Community Alliance (DDCA)

In the spring of 2015, Public Health was invited to be a part of a new grass-roots coalition that had formed in Delavan to address the issues of poverty in the community. This group arose after it was identified that there were at least 91 homeless students in the school district, 47 of whom were in elementary school. Local churches, non-profit organizations, the school district, governmental groups, and Community Action Inc., met to discuss their shared desire to promote prosperity and increase the quality of life in Delavan. During 2015, the DDCA helped organize free breakfasts for children during summer months and provided backpacks of food to get children through the weekends. At the end of 2015, DDCA developed a strategic plan to coordinate and align efforts and increase organizational participation.



# A Community of Practice

Over a dozen students learned about Public Health and had the opportunity to work on community health projects during 2015.

**“Tell me and I forget. Teach me and I remember. Involve me and I learn.”**  
**Benjamin Franklin**



Name: Heather Bernard  
School: UW-Madison  
Project: Breastfeeding 101

“This experience has broadened my understanding of the role of a public health nurse, and will certainly serve as a foundation as I grow in my nursing practice.”



Name: Alex Low  
School: NIU  
Project: Emergency Preparedness

“Before I came here I had no real public health experience...I can strongly say that this internship has developed me professionally.”



Name: Katie Kretzschmar  
School: UW-Madison  
Project: Five Senses Presentation

“My favorite part of the semester was researching, developing, and facilitating an after school program that related the senses to safety.”



Name: Amy Millard  
School: UW-Green Bay  
Project: Medication Safety

“I learned a whole new aspect of nursing. Community health looks at the *big picture* including our population, environment, and ways to prevent disease at the primary level.”



Name: Emily Stingle  
School: AHEC CHIP 2015  
Project: Healthy Restaurant Campaign

“Reflecting back on my 8 weeks I am amazed at the knowledge I have gained and how much I have grown professionally.”



Name: Haylee Severson  
School: AHEC CHIP 2015  
Project: Adolescent Vaccination

“This internship has served to increase my interest in Public Health and has made me excited for the next step in my life. There is rarely a dull moment in Public Health.”





# Safety and Injury Prevention



## Water Safety for Children

Utilizing grant funds dedicated to preventing childhood injury, Public Health was able to help many cities provide life jackets free of charge to children. Organizations that distributed a total of 150 life jackets were: Booth Lake Memorial Park, City of Elkhorn, Lake Geneva Water Safety Patrol, Town of Delavan, and Walworth County Sheriff Department's Whitewater Lake Patrol.



## Stepping On

Falls are the leading cause of injury-related emergency room visits across the US. In Walworth County, falls of all ages accounted for 12,425 emergency department visits between 2008-2012. During that same timeframe, 2,690 of those falls were to persons 65 years of age or older, resulting in 1,466 hospitalizations. Because falls are preventable, Walworth County made an effort to locate evidenced based programs that are aimed at reducing the frequency of falls for seniors. The "Stepping On" program shows a 50% reduction of falls amongst those completing the course. In partnership with the Aging and Disability Resource Center of Walworth County, we provided four Stepping On trainings with 52 seniors participating.



## Community Spotlight: Suicide Prevention and Awareness

Walworth County averages 13 completed suicides per year, higher than the state average, with nearly 300 attempted suicides reported through behavioral health. As a Department, Health and Human Services (DHHS) committed to developing suicide prevention strategies. An evidence-based strategy to prevent suicide is to raise awareness of the problem. In October, DHHS co-sponsored the first Walworth County "Out of the Darkness Walk." More than 400 people participated, raising \$28,000 to promote awareness and open discussion about suicide. In December, the first county-wide Suicide Prevention Coalition met to begin planning future efforts.





## Safety and Fun vs. 911: 2<sup>nd</sup> Annual Safety and Injury Prevention Fair

On September 19, 2015 Walworth County Department of Health and Human Services partnered with the Child Advocacy Center of Walworth County and many other community organizations for the second annual “Safety and Fun vs. 911” county-wide safety fair.

Over 400 families came through this free event that promoted safety for all ages, especially focusing on child and teen safety.

Public Health staff educated families about and gave away items to promote health and safety in the home, including playing the “Pills vs. Candy” medication safety game. We aided the Sheriff’s Department in providing children’s bicycle helmets,

and helping families install carseats properly.

Our dental hygienists helped families learn to properly brush their teeth, and utilize mouth guards to protect teeth during physical activity.

We also provided activities focused on physical activity and had healthy treats available for families to snack on.

Flight for Life, the Smoke House, Kohl’s Cares, the Walworth County Sheriff’s Department and other local police departments were there to educate about safety and prevention, while families were entertained by student musicians and an animal exhibit.

In 2015 there was a

**15%**

decrease in obesity among WIC postpartum women

The average benefit for each person enrolled in WIC is

**\$2192**

per year

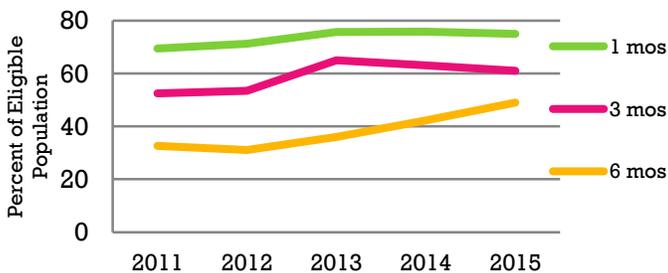


HERE FOR YOU



# Women, Infants, and Children Program Statistics

**Breastfeeding Duration**



## Breastfeeding

The Walworth County WIC Program's breastfeeding initiation rates remain steady at 85%, one of the highest in the state, and already higher than the Healthy People 2020 objective of 81.9%. Duration and exclusivity at six months has increased as has exclusive breastfeeding at nine months. We credit this improvement to our revised Breastfeeding 101 class, improved interviewing skills and having all WIC dietitians trained as Certified Lactation Consultants (CLC).

## WIC Program Services

The WIC program has seen a decrease in numbers nationally since the peak in 2009. Numbers have returned to pre-recession levels. Theories as to why this change has occurred include:

- Overall increase in the health of the economy
- Decrease in birth rates nationally (rates in Walworth County have remained steady)
- Increase in Food Share benefits
- Lack of accurate and widespread information about WIC

	2013	2014	2015
<b>Individuals Served</b>	2,632	2,558	2,025
<b>Contacts with Consumers</b>	Greater than 10,000	Greater than 11,000	Greater than 8,500
<b>Monthly Caseload</b>	1,535	1,462	1,429
<b>WIC benefits spent locally</b>	\$1,083,412	\$1,098,290	\$1,041,497
<b>Farmers Market Vouchers spent locally</b>	\$7,515	\$6,746	\$5,428



# WIC Happenings



## E-WIC Begins

Statewide the WIC program has successfully implemented the new EBT WIC card. Walworth County staff worked throughout the spring getting ready for a July 29<sup>th</sup> roll out by training vendors and updating the clinic flow. The card greatly improves the flow of WIC benefits by allowing for easier processing at the grocery store counter. WIC consumers have received it with open arms stating, “from a 1-10 it’s a 10,” and “the eCard is a much better way to use WIC.” We anticipate that it will improve participation in WIC and increase participant attendance at scheduled appointments.



## Cooking Demonstrations

WIC continued with their cooking demonstrations and activities for kids during the demos in 2015. Their first spring demo, “Leftover Makeover” taught participants numerous ways to create tasty and healthy meals from leftovers – a much requested topic from families in the past. The second demonstration in the summer, “Sensational Salads!” provided ideas and tastings of unique and nutritious salads for new recipes to add to their rotations at home. All of the recipes included WIC-approved foods and gave families a chance to learn new ways to use their benefits at home.



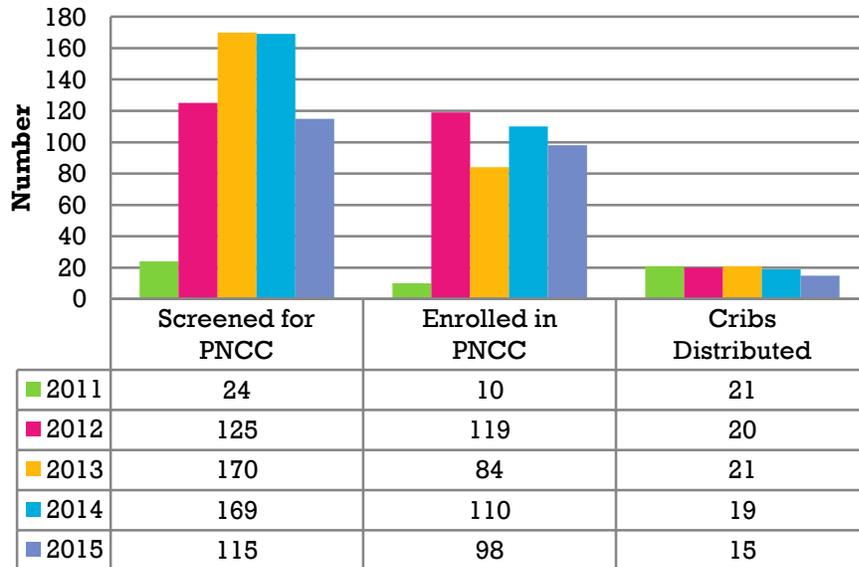
## Maternal Weight Management

WIC’s 2015 Nutrition Education Plan focused on helping mothers achieve or maintain healthy weights during and after pregnancy. Staff utilized counseling skills and developed new resources for participants. There were some marginal improvements in participants’ weights during the course of the program. The most significant improvement was that women at healthy weights six months after delivery increased from 22% to 50%.

## Community Spotlight: Living Well with Diabetes

As nutrition experts, WIC staff are able to participate in many different nutrition based health promotion activities. During 2015 one dietitian was able to become trained in facilitating the “Living Well with Diabetes” program and provided one class on the topic. He joins staff from the Aging and Disability Resource Center of Walworth County in providing this program to the community. Both Aurora Health Care and Mercy Health System run programs aimed at helping people in our community with diabetes live healthier lives. Aram Public Library in Delavan also joined in the cause and worked with the Medical College of Wisconsin and Planned Parenthood to offer programming targeted to help Hispanics and Latinos manage diabetes.

## Maternal Child Health Statistics



# 60

**Carseats were distributed by HHS in 2015**



## Maternal Child Health:

In 2015 Maternal Child Health continued to work within the life course model and utilize community partnerships.

### CHILD DEATH REVIEW (CDR)

During 2015, eight infant or child deaths were reviewed by the CDR team. It was determined that there were opportunities for preventative action in four of the deaths. The Suicide Prevention Coalition and our Maternal Child Health program will continue to work on programs designed to decrease the number of child deaths from preventable causes.

### SAFE SLEEP AND CRIBS PROGRAM

Safe sleep remains a priority in the southeast region of Wisconsin. Our cribs program distributed 15 cribs to families in need, and counseled 98 families enrolled in PNCC on safe sleep practices.

### PRE-NATAL CARE COORDINATION (PNCC)

The nurse case management PNCC program worked with 98 higher risk families during 2015, and screened-in an additional 17 families that qualified for the program. The families worked on topics like child development, home safety, and Shaken Baby Syndrome with the training doll pictured above. PNCC staff also worked closely with the Walworth County Children's Unit to provide teen parenting classes and utilized interactive tools to engage at risk families through the Early Learning Network.

### Community Spotlight: Teen Sexual Health and Development

During 2015 Public Health collaborated with a number of school and community groups to provide adolescents with education about puberty, safer sex, contraception, and determining consent. Nurses provided over a dozen classes at different venues throughout the community.

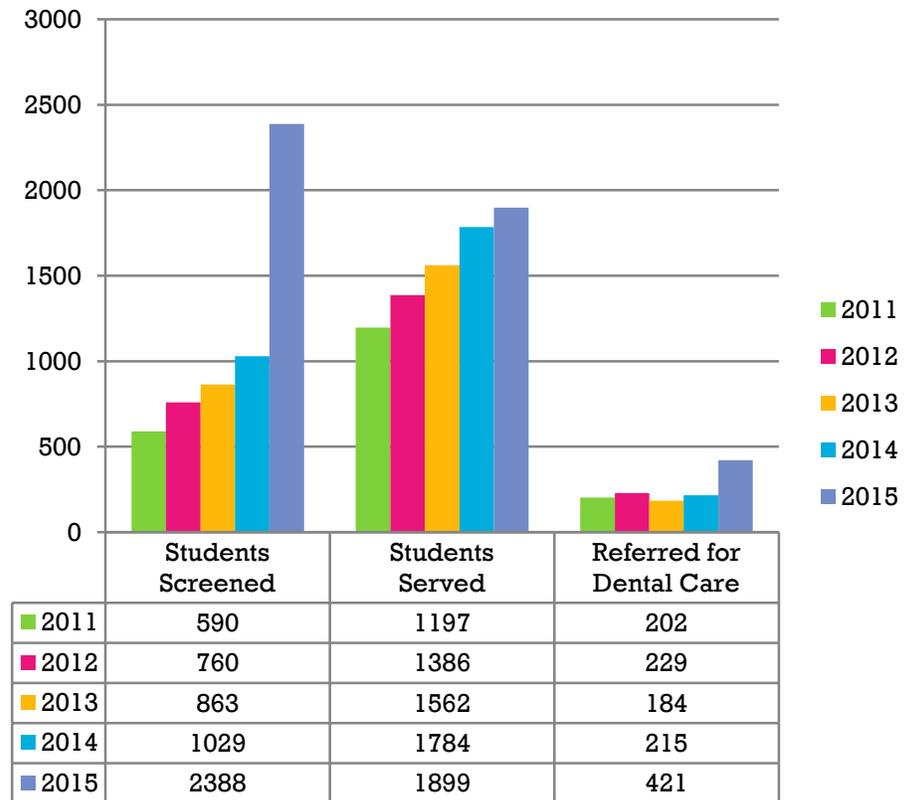
# + Seal-A-Smile

Our Seal-a-Smile (SAS) program case load has doubled since 2011 with the addition of preschool and kindergarten children. We continue to see a high rate of referrals for decay, most notably seen in the preschool and kindergarten students. This shows the effectiveness of the program. Children who have had Seal-a-Smile services in the past are not needing additional services. Unfortunately, of the students who are referred for further care, less than one third actually receive it due to limited dental access.

In 2015 we increased the number of schools that are participating to 28 across the county.

At the second annual Safety Fair, SAS staff assisted children in making custom fit mouth guards and discussed how vital this piece of safety equipment is when participating in any sport.

## Seal-a-Smile Program Statistics



## Community Spotlight: Fluoridated Water

2015 heralded some big discussions on the fluoridation of city water, an evidenced-based dental health strategy, in two of our biggest municipalities. Representatives from the State Department of Health Services, our Seal-a-Smile program, and the cities of Elkhorn and Delavan met to discuss the importance of fluoride in drinking water. Delavan stated that they have no intention of removing their fluoride treatment, while Elkhorn will pursue replacing fluoridation equipment through state funding to return fluoride to their water.

## + Trauma Informed Care

Understanding trauma as a preventable public health issue that has an impact on everyone is central in creating trauma-informed systems. Trauma Informed Care (TIC) impacts all aspects of an organization, from how services are provided to how the physical space is laid out. The implementation of TIC in the agency compliments Public Health values and principles. Public Health is dedicated to a system-wide approach to service delivery that places the consumer, co-worker, community partners, or whomever we are working with at the center of the interaction. We strive to improve our interactions with one another. TIC is based on the principles of quality customer service.

All Public Health staff participated in the agency wide TIC training in 2015, and the WIC supervisor, who is also a member of the TIC Committee, completed the 5-day Trauma Focused Cognitive Behavioral Therapy (TFCBT) training.

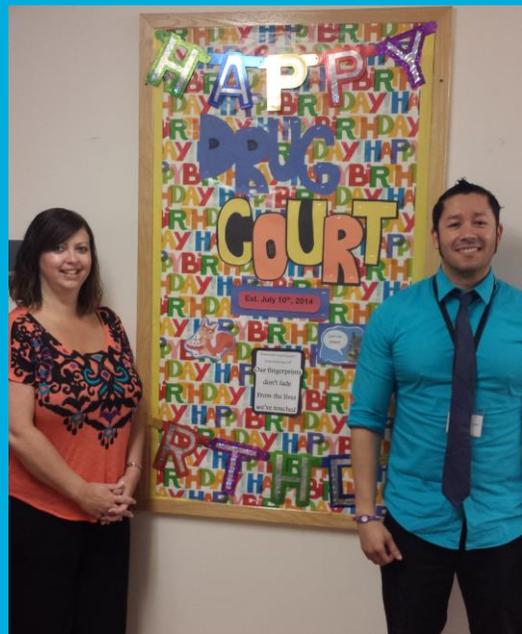


## + Community Spotlight: Drug Court

Drug Court is a program that started in 2014, steadily gained momentum throughout 2015, and celebrated its first graduate in December. The Drug Court works with individuals who have felony heroin and opiate drug convictions to rebuild their lives and develop coping strategies to avoid relapse. The program is a large partnership bringing together law enforcement, the judicial system, and Health and Human Services to provide a whole life view on getting off of and staying off of heroin.

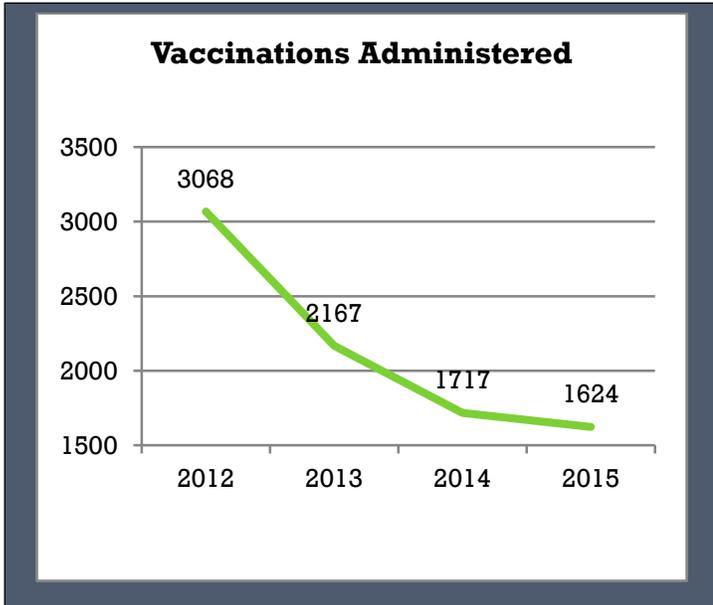
Public Health continued to provide health screens and nutrition consultations to drug court participants, as needed, during 2015. We also worked with the drug court administrators to provide education sessions on diseases that can be transmitted through sharing needles and unprotected sex, treatment for these infections, and resources available to help treat or prevent STI's or pregnancy.

As it moves forward, the drug court hopes to include more preventative efforts such as helping to control prescription drug abuse by aiding law enforcement in providing drug drop boxes, and helping medical providers monitor for the over-prescription of opiates.





# Immunizations:



	2014	2015
<b>Vaccines Administered</b>	1717	1624
<b>Consumers Seen</b>	1102	1094
<b>Primary Vaccination Series completed by age 2 years</b>	69%	71%
<b>School children with any vaccine waiver</b>	4.7%	5.6%

## Community Spotlight: Adolescent Vaccination

In 2015, Public Health accepted a challenge from the Centers for Disease Control and Wisconsin State Immunization Program to promote vaccines recommended for 11-12 year olds. AHEC Intern Hayley Severson spent her summer working on programs to increase adolescent vaccination rates. She partnered with Aurora, Mercy, and Dean Health Care clinics to discuss the current vaccine recommendations and how to promote vaccination. She also worked with all area schools to provide vaccination information at registration days. Framed posters were provided to schools and clinics to promote vaccination from the teen perspective. We saw a slight increase in vaccination rates for this age group and will continue these efforts in 2016.

### Preteens and Teens Up to Date on Vaccines

	2014	2015
HPV (complete series)	16%	18%
Meningitis (one dose)	57%	60%

## Diseases Still Here

Walworth County was the epicenter of a state-wide mumps outbreak that involved 5 universities, including UW-Whitewater, which had 13 cases reported, the most of all schools involved. Since the college-age population has a high rate of vaccination, most cases were fully vaccinated.

We have also seen an increase in the percentage of school age children with waivers for vaccines. In the last five years, personal conviction waivers have increased from 4.1% in the 2010-2011 school-year to 4.9% in the 2015-2016 school year. This is an increase of over 100 students in Walworth County who are not fully vaccinated, which increases the risk for all.

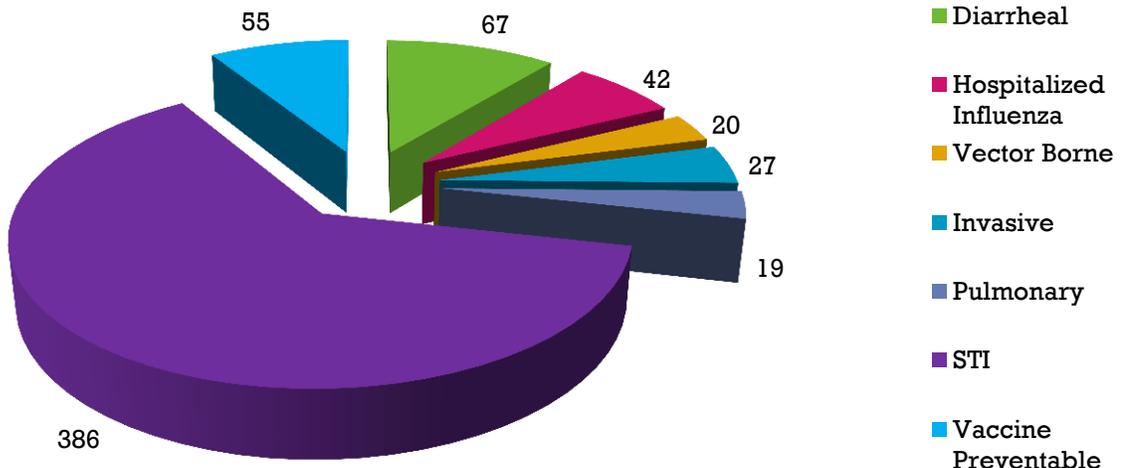
## Confirmed Cases of Vaccine Preventable Diseases

Disease	2011	2012	2013	2014	2015
Hepatitis B	<5	7	<5	<5	7
Mumps	0	0	0	<5	13
Pertussis	17	255	51	290	33
Varicella (Chickenpox)	10	16	11	14	<5



# Communicable Disease

## Reportable Disease Occurrence in Walworth County-2015



### Community Spotlight: Infection Control

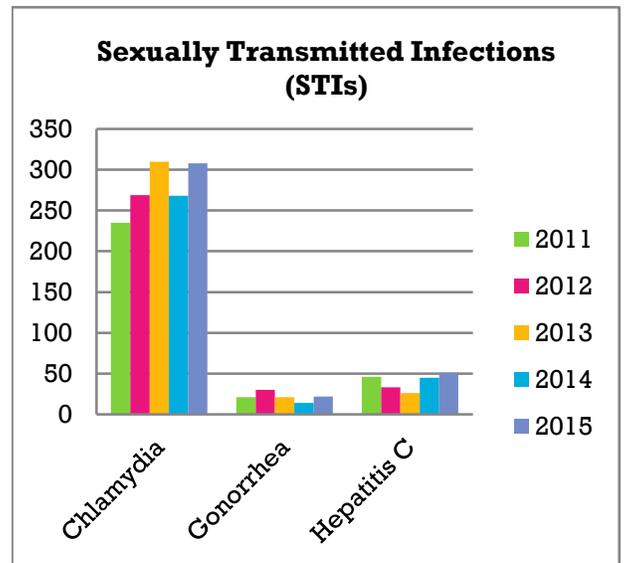


Infectious disease control is the foundation of Public Health and functions best when practiced as a community. During 2015, public health nurses met with infection prevention specialists at area hospitals, staff at nursing homes, and

day care workers to help them ensure they are protecting their consumers and staff from illness. They focused on controlling disease within special populations, which diseases must be reported to Public Health, and what steps should be taken daily to prevent the spread of disease.

### STI Prevention Education

In 2015 Public Health made major strides in promoting the practice of safer sex. We partnered with area groups to provide health education classes to teens and pre-teens, and to promote STI testing and condom use.





## + Emergency Preparedness and Response:

2015 was a year of strengthening partnerships in the emergency preparedness program. As Public Health increased our readiness to respond to a wide variety of emergencies, we also worked with our partners and our community to be prepared to work together for the best response. We held fire extinguisher training and an evacuation drill. We also trained many of our human services staff further in the Incident Command System with an on-site training.

### **Mass Fatality Exercise**

In August, we participated in Waukesha County's large-scale disaster exercise, which included EMS, police, fire, public health, Red Cross, hospitals and the National Guard. We observed and assisted in the Mass Fatality component of the exercise, working with the Waukesha Medical Examiner's office. Waukesha County provides medical examiner services for Walworth County and this exercise helped us to get to know one another better. Waukesha County also assisted us in finalizing our Mass Fatality Plan, outlining how all involved entities would respond to a similar event if it occurred in Walworth County.

### **Ebola**

Walworth County monitored several travelers from Ebola-stricken countries as part of the National Traveler Monitoring Program. No traveler who came through Walworth County exhibited any signs of Ebola disease.

# + Environmental Health Water Quality



## Recreational Water Monitoring

Despite large rainfalls that caused elevated levels of E.coli in mid-June and then again in mid-August in multiple lakes, overall E.coli levels in Walworth County recreational waters remained consistently low. Whitewater Lake once again contained the lowest levels of E. coli during the summer months.

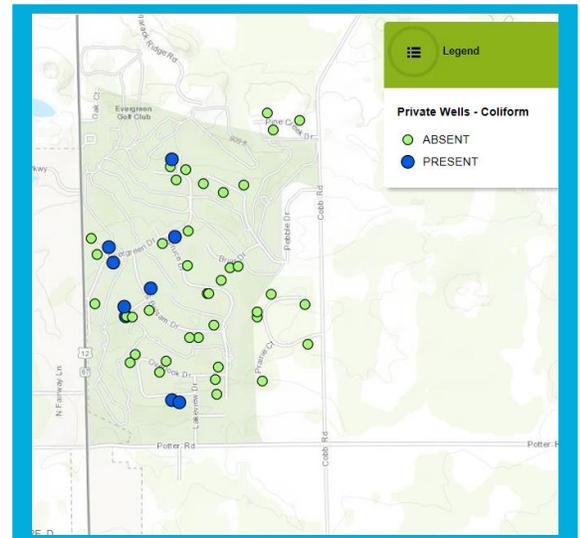
## Department of Natural Resources Transient Non-Community Water System Contract

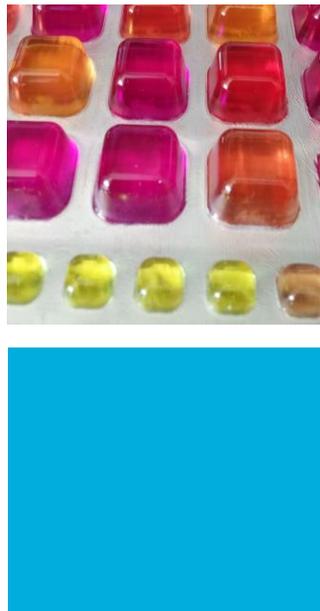
	2014	2015
<b>Total Systems</b>	183	188
<b>Nitrite Samples</b>	9	8
<b>Bacteria Samples</b>	292	264
<b>Nitrate Samples</b>	184	189
<b>Sanitary Surveys</b>	37	42
<b>Bacteria MCL: Not E. coli</b>	9	14
<b>Nitrate MCL: Ongoing</b>	5	5
<b>Additional Visits</b>	90	73



## Community Spotlight: Rural Water Sampling

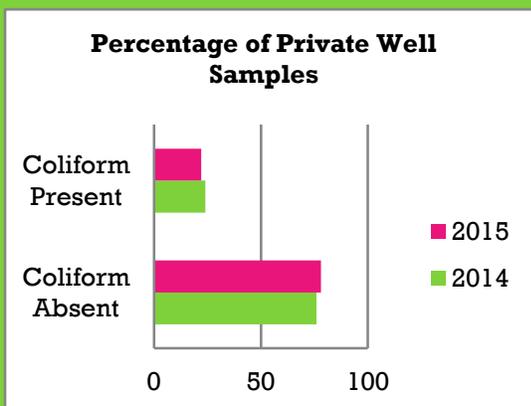
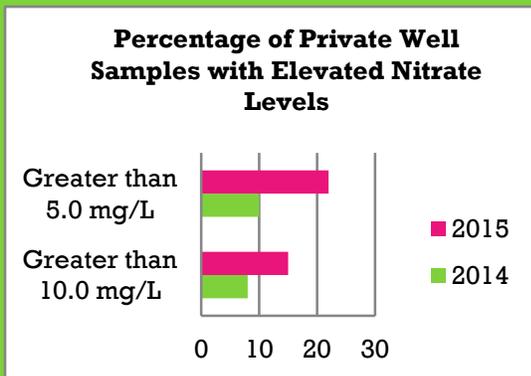
Building on the success of the cooperative with Geneva Lakes Environmental Agency and Linn Sanitary District to sample private wells in the Town of Linn during 2014, a partnership was formed with Aurora University-George Williams College to again provide homeowners with well sampling services. In November, eight students from George Williams College volunteered as trained advocates for private well water sampling and helped 47 homeowners in the Evergreen Estates subdivision. Homeowners were provided with the opportunity to test for bacteria, nitrate, and arsenic. 83% of samples were coliform bacteria negative. The majority of wells had low level arsenic and nitrate, with the highest levels at 13.9 and 14.4 respectively.





# + Water Lab

The lab continued to process a steady number of samples through the year analyzing 453 public water samples and 229 private water samples. No private wells indicated the presence of E. coli.



## Community Spotlight: Spring Water Quality Concern

Spring water is not routinely monitored by Public Health for quality. In the summer of 2015, a concerned citizen had the water quality of a Lake Geneva spring tested. Analysis indicated the presence of coliform bacteria but not E. coli, and had levels of nitrate, which could be dangerous to pregnant women and infants. In response to community concern, Public Health created an advisory sign that was posted at the spring warning of the possible concerns with the quality of the water and advising that it should not be used for drinking or cooking.





# Childhood Lead Poisoning Prevention



## Childhood Lead Poisoning Prevention Grant Activities

Year	Number of children under 6 years old tested for lead	Number of children screened in WIC	Number of children tested with lead result 5µg/dL or above	Number of children tested with lead results 10 µg/dL or above
2011	1455	661	81	16
2012	1231	479	10	6
2013	1244	473	33	2
2014	1244	612	40	2
2015	1238	475	44	13

Type of Investigation	Number Completed
Lead Hazard Investigation, Mandatory	5
Property Lead Hazard Screen, Optional, Clearance Investigation, Mandatory	6
	3

## Early Intervention for Low Level Lead Poisoning

In spring of 2014, Public Health Nursing, Environmental Health, and WIC all joined together to create a program that addresses low level lead poisoning in an attempt to prevent children with detectable blood lead levels from moving into the lead poisoned category. As we close 2015, we are now able to report data on the first 18 months of the project. The program used multiple intervention strategies. We have seen that the intervention program decreases the amount of time that children have an elevated lead level, decreases the amount of staff time required for the program, and is better received by parents than traditional program activities. Future plans include expanding partnerships to include private health care providers.

2014-2015	At least one venous blood lead recheck by 6 months	Decreased Blood Lead Level by 6 month Follow-up
Capillary Blood Lead Level up to 4.9 µg/dL (Seen in WIC)	26	17
Venous Blood Lead Level 5.0-9.9 µg/dL	11	7
Venous Blood Lead Level ≥10.0 µg/dL	5	4
2014-2015	Blood Lead Level ≥5.0µg/dL	WIC Blood Lead Level ≤4.9µg/dL
Total Children Monitored	89	48
Total Closed Cases	45	18
Total Active Cases	44	30
Cases Refusing Services	4	0
Case Closed: Lead Level Below Detectable	21	15
Active Case: Lead Level Below 5	11	-



# Environmental Health

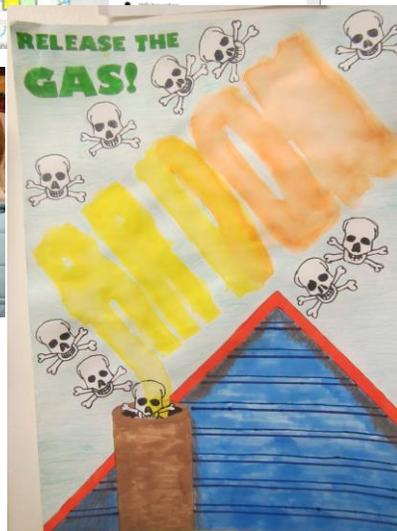
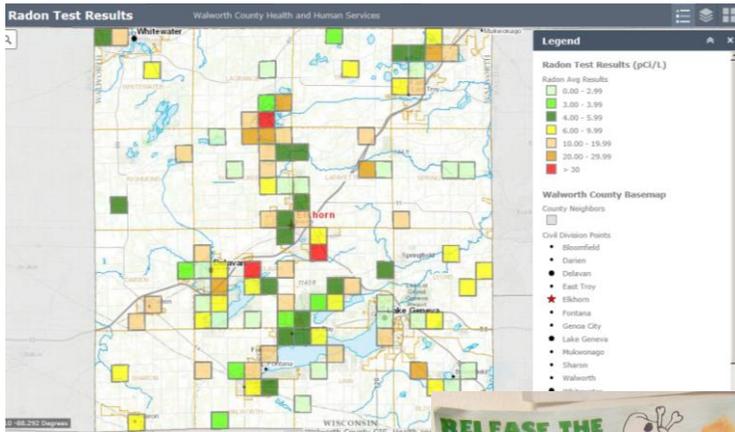
## Radon Outreach

Public Health was the recipient of a \$2,500 grant from the State of Wisconsin Radon program in 2015 to increase community awareness. Radon is the leading cause of lung cancer in non-smokers.

We kicked off our activities during National Radon Action Month in January with a poster contest for children in grades 4-8.

The second initiative undertaken was to promote testing for radon with individuals in the builders' community. To accomplish this Public Health hosted a booth at the Lakeland Builders Association's Home Expo in February.

Throughout the year, the grant allowed us to offer home radon test kits at a reduced cost.



Radon Kits Distributed	
2012	18
2013	20
2014	34
2015	227

## Environmental Health Initial Contacts

Topic of Contact	Total		
Drinking Water	75	Pest Question or Complaint	7
Body Piercing or Tattoo Complaint	0	Pool Complaint	0
Campground Complaint	0	Rabies	41
Foodborne Illness Complaint-Not Lab Confirmed	8	Radon	18
Grocery Complaint	3	Recreational Licensing Complaint	4
Housing Complaint	45	Recreational Water	5
Housing Question	9	Restaurant Complaint	19
Lead	8	Septic	6
Licensing inquiry	51	Toxic Substance	9
Medicine Recycling/Drop Box	5	Vector Borne Disease or Control	8
Mold	33	Waterborne Illness	0
Other	19	<b>Total</b>	<b>373</b>



# Environmental Health Program Statistics



## Human Health Hazards

During 2015, Environmental Health staff investigated twelve human health hazard complaints. In response to conditions identified to be in violation with County code, we issued orders to abate at three locations. Initial notices of potential violations were issued at six locations, and advice on preventing a violation from occurring was provided on the remaining sites.

Reports of clandestine drug laboratories from the Walworth County Sheriff's office increased dramatically during 2015. Public Health issued cleaning advice to these property owners.



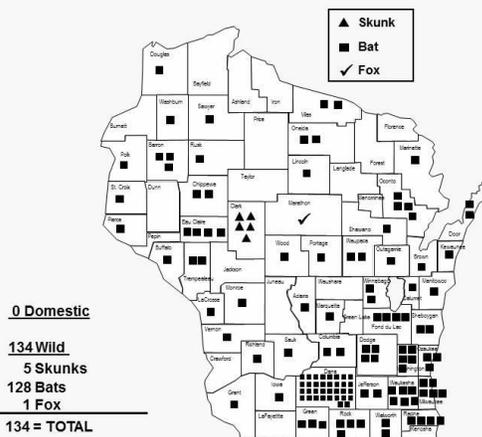
## Community Spotlight: Safe Medication Disposal

In 2015 multiple law enforcement agencies in the county took on the charge of reducing the misuse of prescription medications by providing easily accessible secure medication drop boxes and Prescription Drug Take Back Days. This allows community members to easily dispose of their unused medications.

Drop boxes were added to many different municipalities through funding provided by the Walworth County Department of Health and Human Services Behavioral Health Unit. The Behavioral Health Unit also connected with area pharmacies to provide drop box and medication disposal information on all prescriptions dispensed. Public Health worked with area hospice care groups to provide drop box information.

Figure 2

## Animal Rabies Diagnosed in Wisconsin, 2010 - 2014



## Vector Borne Disease

During 2015, vector borne disease continued to be of concern. Walworth County saw both animal and human cases of West Nile Virus, and there were 55 reported cases of Lyme disease.

## Rabies Control

During 2015, Walworth County had an interesting year for rabies. In May, two bats associated with human exposures tested positive for rabies. A similar number of dogs, cats, and wild animals were tested for rabies as in previous years, but none of the domestic animals, or non-bat wild animals, were positive for rabies.

# Coming Up in 2016



## Accreditation

In 2016 we will continue our activities to prepare for Public Health Board Accreditation (PHAB). At the State level, the Department of Health Services has set the goal of achieving accreditation by 2018. Currently accreditation is optional for health departments. In 2016, we will work on aligning our division strategic plan with priorities identified by the CHIP.



## Community Health Assessment and Improvement Plan 2015-2020

As mandated by State Statute §251.06(3)(h), in 2016 Public Health begins a new cycle of community health assessment by identifying priorities based on the data and developing an improvement plan. The goal is to solicit community input into the process and together work on initiatives that will have a positive impact on improving the health of the community. The process began in early 2016 when we met with key stakeholders and send surveys to at least 6,000 registered voters.



## Farm Technology Days

Walworth County is hosting the 2016 Wisconsin Farm Technology Days at the Snudden Farm in Zenda on July 19-21. This event is anticipated to bring between 45,000-60,000 visitors to our county. Public Health will have a booth in the Family Tent where we will focus on issues regarding surface and ground water, including the health impacts of nitrates in drinking water.



## Emergency Response Full Scale Exercise

June 13-14 is the “Bacillus Anthracis Threat 2016” (BAT 16) full scale exercise in Southeastern Wisconsin. Walworth County is partnering with Kenosha County Division of Health, City of Racine Health Department and Central Racine County Health Department to open a Point of Dispensing site (POD) at UW-Parkside in Kenosha, one of 12 PODs operating across the region, distributing mock antibiotics for a simulated anthrax attack. Participants include Wisconsin State Patrol, Emergency Police Services, Wisconsin National Guard, CDC’s Strategic National Stockpile, US Marshalls, area hospitals, and local and state emergency management officials.

“Individually, we are one drop. Together, we are an ocean.”  
–Ryunosuke Satoro

## Coming Up in 2016 Continued



### Healthy Homes Training

The environmental health unit will be offering training to Human Services staff and community members who make visits to consumers' homes on quick and simple ways to assess the home environment for human health hazards. This training will also be offered to other county programs and outside agencies that make home visits with the goal of preventing health issues that can arise from environmental problems.



### Medical Reserve Corps Expansion

We are working with the Lake Geneva Medical Reserve Corps (MRC) to expand the reach to all of Walworth County. MRC is a national network of local groups of volunteers committed to improving the health, safety and resiliency of their community.



### Fit Families Walworth County

WIC received a Fit Families grant funded by SNAP-Ed/USDA. Fit Families is a successful behavior change program for families with children 2 to 4 years of age enrolled in WIC. Coaches empower families to adopt healthy eating and physical activity behaviors, help promote staff and participant wellness, develop supportive environments, and strengthen community partnerships to extend the reach of the program. The Core Messages are: Move More...Watch Less; Make Every Bite Count...More Fruits & Veggies; Make Every Sip Count...More Healthy Beverages. The overarching message is: Eat Healthy, Be Active...Your Kids are Watching



“The strength of the team is each individual member. The strength of each member is the team.”

Phil Jackson



## Walworth County Division of Public Health

W4051 County Road NN  
Elkhorn, WI 53121  
(262) 741-3140, [walcoph@co.walworth.wi.us](mailto:walcoph@co.walworth.wi.us)