

# LA CROSSE COUNTY HEALTH DEPARTMENT



## *Annual Report 2010*

*Laboratory*

*Administration*

*Vector Control*

*Health Education*

*Nutrition Division*

*Home Care Nursing*

*Public Health Nursing*

*Environmental Health*



**Public Health**  
Prevent. Promote. Protect.

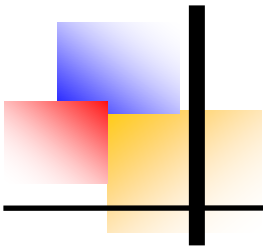
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La Crosse County Health Department  
[www.co.la-crosse.wi.us/Health.htm](http://www.co.la-crosse.wi.us/Health.htm)



## **Mission Statement**

*The Mission of the La Crosse County Health Department is to improve the quality of life and health of all people in La Crosse County.*

## **Vision Statement**

*La Crosse County residents have the opportunity to live a long and productive life, free of preventable disease and injury.*

*Individuals and public and private organizations work together to bring about positive changes in the health status of La Crosse County residents.*

*All people have access to health services regardless of their ability to pay.*

*Effective and innovative public health services are available to meet the changing needs of La Crosse County residents.*

## 2010 Goals, Objectives and Outcomes

<u>GOALS/OBJECTIVE</u>	<u>Objective met</u>
<b>GOAL #1 Provide public health services to meet changing needs.</b>	
1.a. Maintain La Crosse County Annual Years of Potential Life Lost among the lowest third in the state.	YES
1.b. By Dec. 2010, conduct at least 100 consultations, inspections or orders for homes suspected to have radon, lead or mold exposure.	YES
1.c. By Dec. 2010, complete over 700 communicable disease follow-ups on 83 reportable diseases or conditions.	YES
1.d. By Dec. 2010, provide home health nursing and Personal Care services to 75% of referral received.	YES
1.e. By Dec. 2010, there will be a 3% increase from 2009 rates of infants residing in La Crosse County who turn 24 months of age during the contract year will have received the primary series of immunizations.	YES
1.f. By Dec. 2010, have the monthly testing of 10-area municipal drinking water systems show the systems to be safe.	YES
1.g. By Dec. 31, 2010 more than 70% of infants whose mothers were enrolled in the La Crosse WIC Program prenatally will be breastfed	NO
1.h. By Dec. 31, 2010, 5 schools in the County will have implemented Safe Routes to School Programs	YES
1.i. By Dec. 31, 2010, assist 100 uninsured individuals enroll in the Badger Care Plus Program.	YES
1.j. By Dec. 2010, provide employee wellness services to 25% of all La Crosse County employees.	YES
1.k. By Dec. 2010, less than 3 reported cases of mosquito-borne West Nile or La Crosse Encephalitis.	YES
1.l. By Dec. 2010 meeting the 2010 budget goals for the dept.	N/A
1.m. For the year ending Dec. 2010 in an effort to receive 95% of signed doctor's orders within the 20 calendar day limit, clerical staff will attempt three contacts with physicians' offices to request return of the orders to the Health Department.	NO
<b>GOAL #2 Utilize technology to improve public health services.</b>	
2.a. By Dec. 2010, establish an electronic reportable disease-case report system.	YES
2.b. March and April thru November Surveillance, trapping, and control activities for disease carrying mosquitoes and ticks.	YES
2.c. By Dec. 2010, the Business Continuity Plan will be tested	Yes
2.d. By Dec. 2010, complete initial planning for a department-wide electronic health record system.	NO
<b>GOAL #3 Maintain the current State of Wisconsin designation as the highest-level public health agency.</b>	
3.a. Report each quarter on the range of high priority services needed to maintain status of Level III HD.	YES
<b>GOAL #4 Expand partnerships to develop public health services in high</b>	

<b><u>GOALS/OBJECTIVE</u></b>	<b><u>Objective met</u></b>
<b>priority areas.</b>	
4.a. By Dec. 2010, expand the current partnership with dentists to increase persons covered by MA that receive dental care to over 25%.	N/A
4.b. By Dec 2010 HD employees will participate in the following partnerships:	
Western Regional Partnership for Public Health Preparedness	YES
Staff 7 C's coalition which includes La Crosse, Monroe, Jackson, Buffalo, Vernon, Crawford and Trempealeau counties.	YES
WI Public Health Laboratory Network	YES
Coulee Region Childhood Obesity Coalition	YES
Safe Route to School Task Force - SRTS <ul style="list-style-type: none"> <li>• City of La Crosse</li> <li>• La Crosse County</li> </ul>	YES
La Crosse Area Immunization Coalition	YES
La Crosse Area Communicable Disease Coalition	YES
La Crosse Long Term Care Coordinating Committee	YES
ECO-County Plan for Sustainability	YES
<b>GOAL #5 Hire and retain high quality staff by providing a positive work environment.</b>	
5.a. By Dec 2010, all staff will have had a performance review.	NO
5.b. By Dec 2010, all staff will have the opportunity to meet with mgmt at least quarterly.	YES
5.c. By Dec 2010 all staff will have the opportunity to attend 30 hours of continuing ed.	N/A
5.d. By August 2010, all staff will have an opportunity to offer suggestions for the 2010 budget that could improve the potential to reach the HD Mission.	YES
5.e. By Dec 2010, assure that all staff meets basic licensing certification and accreditation requirements.	YES

**KEY:**

<b>Admin</b>	Administration	<b>ED</b>	Health Education	<b>Env</b>	Environmental
<b>Health</b>					
<b>HC</b>	Home Care Nursing	<b>Lab</b>	Laboratory	<b>Nutr</b>	Nutrition
<b>PHN</b>	Public Health Nursing	<b>Vector</b>	Vector Control		

**N/A = Not Available**

# 2010

## Health and Human Services Board

Sharon Hampson, Chair	James Glasser, MD	David Trapp
Jill Billings, Vice Chair	Loren Kannenberg	Margaret Wood
Bill Brockmiller	Bill Feehan	Monica Kruse

### Advisory Groups:

#### **Nursing Audit Committee**

Sigrid Dooley, R.N.

#### **La Crosse County Breastfeeding Coalition**

Megan Baudek	Traci Lien	Robin Oehrle	Donna Sullivan
Lindsey Bertrand	Jenny Loging	Beth Padesky	Jackie Thingvold
Elizabeth Haag	Dawn McFadden	Glenda Pinkham	Kim Welvaert
Kim Hottenstein	Jennifer Miller	Stephanie Ryan	
Marissa Kamrowski	Sue Murvich		

#### **Home Health Professional Advisory Committee**

Carol Bloom, P.T.	Doug Mormann, Director
Dave Seitz, P.T.	Michael O'Brien, M.D.
Connie Eide, R.N., HC Supervisor	Maryellen Paudler, Supervisor
Helen Harms, S.T.	Jean Walleser RHIT
Cindy Koeller, RN	

### Collaborative Efforts:

#### **Coulee Region Childhood Obesity Coalition**

Patti Abraham	Troy Harcey	Michelle Kloser	Jennifer Miller
Tiffany Adrians	Sheila Harding	Rebecca Lakowske	Joni Ralph, RD
Beth Balder, PNP	Rachel Hazuga	Linda Lee	Karen Rude
Heidi Blanke	Barbara Helgeson	Margie Ley	Angie Seeger
Ann Budzak, MD	Mary Hoeft-Leithold	Kris Litscher-Lee PNP	Aubrey Stetter
Diana Diaz Granados	Paul Holman	Ginny Loehr	Steve Torres
Liana Escott	Sue Howe	Kim Lombard	Andi Van Sickle, RN
Michael Gasper	Paula Jacobson	Kim Mahlum	Jennifer Wood
Sharon Hampson	Diane Kelbel	Jennie Melde	
Angela Hanson			

## **FACT: Fighting Against Corporate Tobacco**

Josh Ammann	Brandon Brown	Maya Dougherty-Harris	Micah Dummer
Jade Howen	Tessa Johnson	Randa Johnson	Jacob Jones
Mariah Kutil	Emma McConahay	Maggie McConahay	Jordy McKay
Brittany Mighall	Ben Mighall	Amelia Neas	Molly Neumann
Laura Oldenburg	Erin Petersen	Brock Schabel	Mclaine Schwertfger
Ashley Sprain	Natalie Stehly	Mina Theilen	Sylvia Vandenberg-Davis
Taylor Winger	Kresten Winger	Greta Winterstien	Anna Yang
Emily Yang	Rachel Zeleznick		

## **La Crosse Area Dental Care Advocacy Coalition**

### **Participating Organizations**

- Couleecap
- La Crosse Area Dental Hygienists
- Franciscan Skemp Medical Center
- Gundersen Lutheran Medical Center
- Independent Living Resources
- La Crosse Community Foundation
- La Crosse County Health Department
- La Crosse County Health & Human Services Board
- La Crosse Dental Society
- League of Women Voters
- Scenic Bluffs Community Health Centers
- St. Clare Health Mission
- Western Technical College
- Wisconsin Dental Association

## **7C's Health Initiative**

### **Participating Organizations**

- ***Health Departments and Police Departments From:***
  - Buffalo County, Trempealeau County, Jackson County, Monroe County, La Crosse County, Vernon County and Crawford County
- American Cancer Society
- CESA#4
- Coulee Cap
- Franciscan Skemp
- Gundersen Lutheran
- Prairie du Chien Memorial Hospital
- Safe Communities Coalition
- Individual Community Citizens

# 2010 Staff

**Douglas Mormann, Director**  
**Michael O'Brien, M.D., Medical Advisor**

## Administration

### **Diane Panzer, Office Supervisor**

Tamara Glentz, Clerk Advanced  
Darlene Kissel, Clerk Senior  
Pattie Larson, Clerk Advanced\*  
Kitty McIntee, Clerk Senior  
Lisa Perry, Clerk Entry

## Fiscal

### **Don Neitzel, Fiscal Manager**

Jennifer Mullin, Account Clerk Senior\*  
Lynn Role, Account Clerk Advanced\*

## Environmental Health

### **Ron Berg, Manager**

Pat Danielson, Sanitarian  
Amy Elliott-Stevens, Secretary  
David Sawvell, Sanitarian  
Doug Schaefer, Sanitarian  
Sam Welch, Sanitarian

## Health Education

### **Al Graewin, Manager**

Al Bliss, Health Educator  
Brenda Hanson, Health Educator  
Maichor Lee, Health Educator  
Derek Moore, Epidemiologist  
Paula Silha, Health Educator\*  
Judi Zabel, Health Educator

## Home Care Nursing

### **Connie Eide, Supervisor**

Pollyanna Banashak, C.H. Aide\*  
Brenda Elliott, C.H. Nurse\*  
Julie Dietz, C.H. Nurse\*  
Carol Griswold, C.H. Nurse\*  
Karen Havey, C.H. Aide\*  
Casey Hemmersbach, C.H. Aide\*  
Dan Kaminski, C.H. Nurse  
Rosemary Klum, C.H. Aide\*  
Julie Martine, C.H. Aide\*  
Ellie Meyer, C.H. Nurse\*

Jean Walleser, R.H.I.T.\*

## Laboratory

### **Jim Steinhoff, Supervisor**

Alana Clements, Lab Technologist\*  
Patty Dayton, Lab Technologist  
Stephen Lenser, Lab Technologist  
Sue Schreiner, Lab Technologist\*

## Nutrition

### **Linda Lee, Manager**

### **Jennifer Logging, Supervisor**

Tiffany Adrians, Nutrition Educator  
Lindsey Bertrand, Nutrition Educator\*  
Judy de Back, Clerk Senior  
Elizabeth Haag, Nutrition Educator\*  
Kim Hottenstein, Nutrition Educator\*  
Lisa Knutson, C.H. Aide\*  
Rebecca Lakowske, Health Educator  
Ginny Loehr, Health Ed  
Dawn Mc Fadden, Nutrition Educator  
Jennifer Miller, Nutrition Educator  
Josh Miner, Nutrition Educator\*  
Nor Moua, C.H. Aide  
Ali Nehmer, Nutrition Educator\*\*

Robin Oehrle, C.H. Aide\*  
April Prescott, C.H. Aide  
Alexandra Price, C.H. Aide \*\*  
Lindsey Schwarz, Social Worker  
Maggie Smith, Work Assistant\*\*  
Maomoua Vue, Nutrition Ed.  
Jack Zabrowski, Health Educator

## Public Health Nursing

### **Sarah Spah, Manager**

Susan Bennett, C.H. Nurse  
Christine Berth, C.H. Nurse  
Mary Dahlby, C.H. Nurse  
Joann Foellmi, C.H. Nurse  
Marissa Kamrowski, C.H. Nurse  
Charity Kocimski, C.H. Nurse  
Lisa Lee, C.H. Nurse  
Traci Lien, C.H. Nurse  
True Lor, Interpreter\*  
John Snyder, C.H. Occupational H.  
Nurse  
Bryany Weigel, C.H. Nurse

## Vector Control

### **Dave Geske, Manager**

Eric Dotseth, Vector Monitor\*\*  
Michelle Eddy, Vector Monitor\*\*  
Michael Godden, Vector Monitor\*\*  
Matt Holmstad, Vector Monitor\*\*  
Ryan Horstmann, Vector Monitor\*\*  
Jessica Hulberg, Vector Monitor\*\*  
Molly Jensen, Vector Monitor\*\*  
William Jensen, Vector Monitor\*\*  
Leah Jagodzinski, Vector Monitor\*\*  
Ryan Klein, Vector Monitor\*\*  
Lauren Leopold, Vector Monitor\*\*  
Rachel Quinn, Vector Monitor\*\*  
Nicholas Shattuck, Vector Monitor\*\*  
**NOTE: Vector Monitors Are Seasonal**

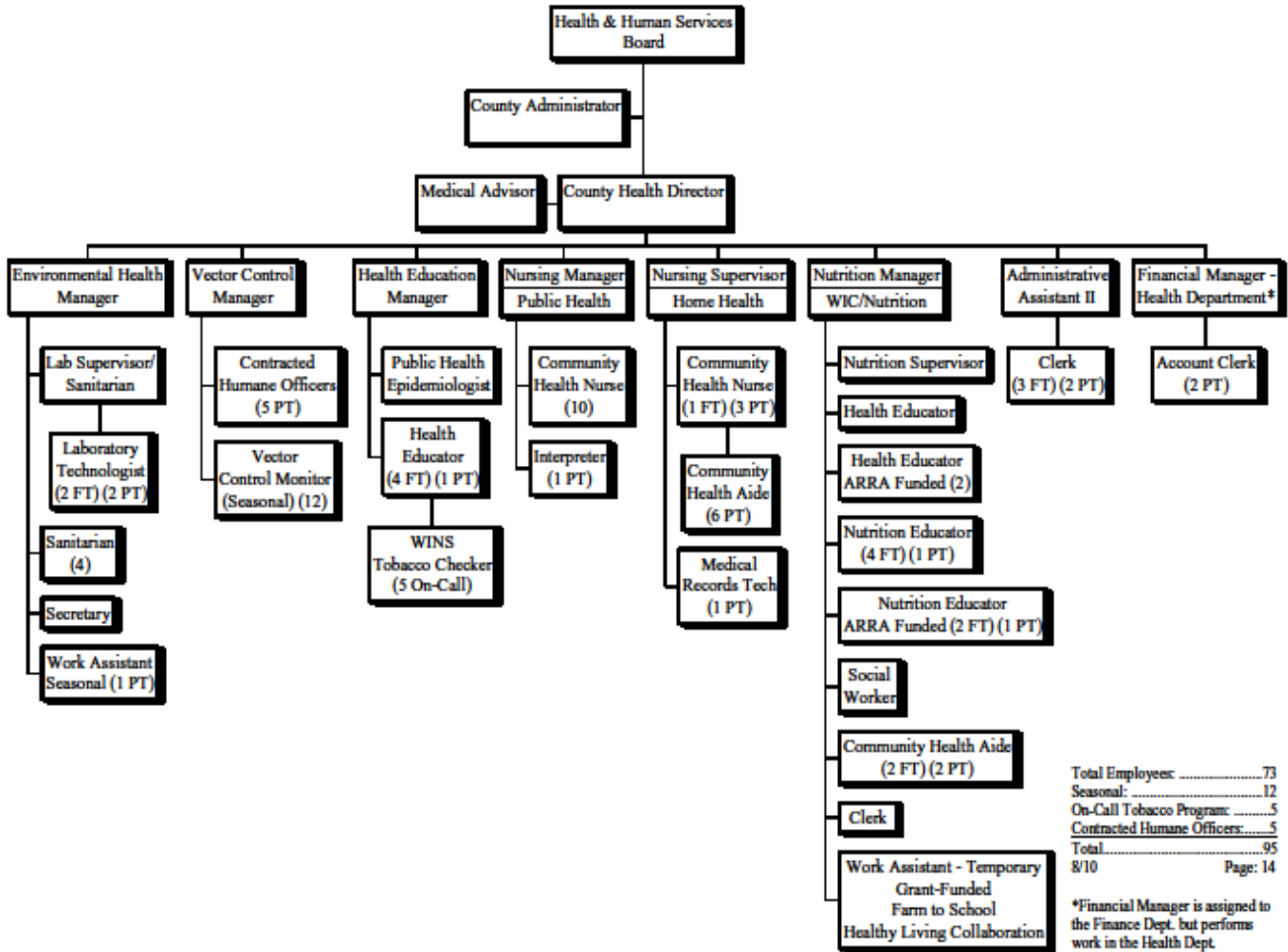
## Persons Leaving in 2010

Sheri Hanson, Env. Health Secretary  
Greg Faas, Env. Health. Work Assist.\*\*  
Kodi Kaiser, Health. Educ. Work  
Assist.\*\*  
Aubrey Nugent, Nutrition Educator\*\*  
Dorothy Schmaltz, Nutrition Educator  
William Thoftne, Vector Monitor\*\*

\*Denotes Part-Time

\*\*Denotes Temporary Position

# LA CROSSE COUNTY HEALTH DEPARTMENT



Total Employees: .....73  
 Seasonal: .....12  
 On-Call Tobacco Program: .....5  
 Contracted Humane Officers: .....5  
 Total: .....95  
 8/10 Page: 14

\*Financial Manager is assigned to the Finance Dept. but performs work in the Health Dept.

# DISEASE REPORTING AND INVESTIGATION

State law in Wisconsin requires reporting, investigation and control of 75 communicable diseases.

The Health Department collaborates with local medical personnel, schools and day care centers that report by disease and demographic information.

Staff provides public education and recommendations for management of individuals with disease to prevent further spread of disease in the community.



## SELECTED HEALTH STATUS GOALS FROM “HEALTHY PEOPLE 2010”

<i>Disease Category</i>	<i>Nation 2010 Goal Cases/100,000</i>	<i>La Crosse County 2010 Actual Cases/100,000 Approx.</i>
Chlamydia	500	415
Gonorrhea	19	28
Measles	0	0
Pertussis	0.1	8
Hepatitis A	4.5	2
Hepatitis B	9	26
Salmonella	6.8	17
Campylobacter	12.3	39
Lyme Disease	9.7	181
Tuberculosis (active)	1	2

## REPORTABLE COMMUNICABLE DISEASE

The State of Wisconsin requires reporting, investigation and control of communicable diseases. The following table identifies these cases by number and year in La Crosse County

<b>DISEASE</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
<b>NR – Not Reportable</b>					
AIDS	9	3	4	0	0
Amebiasis	0	0	NR	0	0
Anaplasmosis/ Ehrlichiosis	10	10	2	14	27
Anthrax	0	0	0	0	0
Arboviral infection (encephalitis/ meningitis)	0	0	0	0	0
Babesiosis	1	1	0	0	2
Blastomycosis	0	0	0	0	0
Brucellosis	0	0	0	0	0
Botulism	0	0	0	0	0
Botulism, infant	0	0	0	0	0
Campylobacter	32	27	38	17	39
Chancroid	0	0	0	0	0
Chlamydia	355	335	369	362	415
Cholera	0	0	0	0	0
Cryptosporidiosis	23	15	16	4	12
Cyclosporiasis	0	0	0	0	0
Diphtheria	0	0	0	0	0
E. coli 0157:H7 and other enterohemorrhagic E. coli, enteropathogenic E. coli, enteroinvasive E. coli, enterotoxigenic E. coli.	5	5	6	1	4
Giardiasis	14	15	13	9	5
Gonorrhea	27	62	43	61	28
Haemophilus influenzae invasive disease (including epiglottitis)	0	0	1	1	2
Hantavirus infection	0	0	0	0	0
Hemolytic uremic syndrome	0	0	0	0	0
Hepatitis A	0	1	2	0	2
Hepatitis B	19	13	9	9	26
Hepatitis C	36	46	58	34	41
Hepatitis D	0	0	0	0	0
Hepatitis E	0	0	0	0	0
Histoplasmosis	0	0	1	0	0
HIV	13	6	8	5	1
Infant methemoglobinemia	0	0	0	0	0
Kawasaki disease	0	0	0	2	0
Lead intoxication (specify Pb levels) $\geq$ 10 micrograms	16	16	19	13	33
Legionellosis	2	1	0	2	0
Leprosy (Hansen Disease)	0	0	0	0	0
Leptospirosis	0	0	0	0	0
Listeriosis	1	1	0	0	0
Lyme disease	57	31	97	150	181
Malaria	1	0	0	0	0

<b><u>DISEASE</u></b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
<b>NR – Not Reportable</b>					
Measles	0	0	0	0	0
Meningitis, bacterial (other than Haemophilus)	1	0	1	0	0
Meningococcal disease	0	0	0	0	0
Mumps	0	1	2	1	0
Mycobacterial disease (nontuberculous)	3	14	8	10	41
Metal & Pesticide poisonings	0	0	0	0	0
Pelvic inflammatory disease	0	0	0	1	0
Pertussis (whooping cough)	4	6	8	2	8
Plague	0	0	0	0	0
Poliomyelitis	0	0	0	0	0
Psittacosis	0	0	0	0	0
Q Fever	1	0	0	0	0
Rabies (human)	0	0	0	0	0
Rheumatic fever (newly diagnosed and meeting the Jones criteria)	0	0	0	0	0
Ricin toxin	0	0	0	0	0
Rocky Mountain spotted fever	1	0	0	0	0
Rubella	0	0	0	0	0
Rubella (congenital syndrome)	0	0	0	0	0
Salmonellosis	12	21	13	13	17
Shigellosis	3	5	2	1	0
Small pox	0	0	0	0	0
Streptococcal disease (all invasive disease caused by Groups A and B Streptococci)	3	14	14	8	15
Streptococcus pneumoniae invasive disease (invasive pneumococcal)	6	11	19	18	22
Suspected outbreaks of other acute or occupationally-related diseases	0	0	0	0	0
Syphilis	1	0	0	1	1
Tetanus	0	0	0	0	0
Toxic shock syndrome	2	0	0	0	0
Toxic substance related disease	0	0	0	0	0
Toxoplasmosis	0	0	0	2	0
Trichinosis	0	0	0	0	0
Tuberculosis	2	1	0	2	2
Tularemia	0	0	0	0	0
Typhoid fever	0	0	0	0	0
Varicella (chicken pox) – reported by number of cases only	0	0	0	5	9
Yellow fever	0	0	0	0	0
Yersiniosis	1	0	1	0	0
<b>TOTAL</b>	<b>661</b>	<b>661</b>	<b>754</b>	<b>758</b>	<b>836</b>

# ENVIRONMENTAL HEALTH DIVISION

The Environmental Health Division's 2010 report is listed below. This Division has contract agreements with the Wisconsin Department of Health, Wisconsin Department of Agriculture, Wisconsin Department of Commerce and Wisconsin Department of Natural Resources.

## A. Licensed Establishments

This Division licenses and inspects the following establishments for the Wisconsin Department of Health:

- Restaurants
- Hotels and Motels
- Tourist Rooming Houses
- Bed and Breakfast
- Campgrounds
- Recreational and Educational Camps
- Swimming, Whirlpools, Therapy Pools
- Tattoo and Body Piercing Establishments
- Schools



Department of Agriculture establishments licensed and inspected include:

- Retail Food Stores
- Bakeries
- Convenience Stores

The Mobile Home Park licensing and inspection program is under the Wisconsin Department of Commerce.

County Permits/Licenses are issued for:

- Taverns (without food)
- Outdoor/Indoor Foodstands
- Outdoor Wood Fired Furnaces
- Farmer/Flea Markets
- Massage Establishments
- Beaches

This Division also inspects carnivals, fairs and other seasonal/special events.

## B. Other Programs

The On-Site Waste Program is under the Wisconsin Department of Commerce.

The Well Program is under the Wisconsin Department of Natural Resources.

The licensed establishments are listed below.

<b>La Crosse County Licensed Establishments</b>					
LICENSED ESTABLISHMENTS	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Restaurants	317	324	344	344	356
Pre-packaged Food Restaurants	50	43	50	50	51
Temporary Restaurant Permit	34	46	40	40	45
Hotels/Motels/TRH/B&B	45	34	33	33	35
Number of Rooms	(2105)	(2047)	(1956)	(2052)	(2131)

Mobile Home Parks	30	30	31	31	30
Campgrounds	7	7	7	7	7
Temporary Campgrounds	1	1	2	2	2
Rec. and Ed Campgrounds	2	2	2	2	2
Swimming Pools	74	70	77	77	69
Food Retail	108	120	119	119	111
Tavern	21	17	17	20	18
Indoor Food stands	19	18	22	17	22
Outdoor Food stands	8	3	8	9	8
Tattoo	7	5	7	6	9
Massage	11	13	12	29	32
Farmers/Flea Market	94	106	108	108	101
Schools	47	45	45	45	47
<b>Totals</b>	<b>875</b>	<b>884</b>	<b>924</b>	<b>939</b>	<b>945</b>

### C. Environmental Health Inspections

Inspections are made in all food establishments including restaurants, taverns and retail food stores. This is to ensure that clean and sanitary conditions are achieved and maintained, food service operators are properly trained, and defective equipment is brought into compliance. It is through these efforts that the health of the public is protected and foodborne illness is prevented. Reinspections are conducted when major violations are detected or when a complaint is received pertaining to the sanitary practices or conditions of an establishment. The numbers of inspections are found below. Staff participated in web-based training sponsored by the FDA to ensure uniform regulation of food establishments.

HEALTH INSPECTIONS	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Temporary Licenses	153	155	190	292	110
Farmer / Flea Market	189	240	161	200	366
Lodging Establishments	58	39	50	48	60
Outdoor Foodstands	12	3	8	10	6
Indoor Foodstands	22	18	20	20	16
Vending Machine Operators/Commissaries	1	1	2	1	1
Vending Machine	37	35	23	24	0
Eating & Drinking Establishments	684	629	745	722	649
Mobile Home Parks	40	40	57	44	67
Recreational Facilities	266	311	291	191	173
Fires at Licensed Establishments	1	4	3	4	2
Food Retail	211	182	215	142	157
Housing	123	103	163	93	55
Animals	22	27	25	11	51
Human Health Hazards	15	48	27	10	38
Garbage and Refuse	49	25	45	28	44
Foodborne Illness	5	9	13	15	2
Lead	12	4	8	3	9
Mold	29	24	10	9	102

Tattoo	63	69	65	38	23
Massage Establishments	14	9	15	12	8
Schools	50	92	92	60	72
<b>TOTALS</b>	<b>2,056</b>	<b>2,067</b>	<b>2,228</b>	<b>1,977</b>	<b>2011</b>

#### D. On-Site Waste Disposal Program

This Division regulates and issues sanitary permits for all private on-site waste disposal systems in La Crosse County. We review and make on-site inspections on all soil tests, and all septic system installations are inspected for compliance prior to backfilling. The Maintenance Program, started in 1983, requires owners of new systems to have their septic tanks inspected or pumped every three (3) years after installation of their system. The program has system owners from 1969 to present entered plus we've identified and added approximately 1,200 unknown systems.

There were 3,065 notices sent out and 38 citations issued. County Sanitary Permits are issued for reconnection and non plumbing systems.

SANITARY PERMITS ISSUED	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
New Construction	139	111	90	84	72
Replacement	57	73	71	65	68
Tank Replacement Only	2	0	4	3	1
Repair	0	0	0	2	1
County Reconnection	10	2	3	4	4
County Privy	3	1	2	1	3
Non-Plumbing	3	1	5	4	3
Sanitary Permit Transfer Landowner *	(0)	(1)	(0)	(0)	(0)
Sanitary Permit Plumber Revised *	(4)	(0)	(0)	(0)	(2)
Sanitary Permit Renewal *	(2)	(1)	(5)	(0)	(8)
<b>TOTAL</b>	<b>214</b>	<b>188</b>	<b>175</b>	<b>163</b>	<b>152</b>
Septic Systems Installed:					
Conventional					
New	90	70	42	48	48
Replacement	43	54	47	25	44
Mounds					
New	16	8	2	5	8
Replacement	7	6	7	6	8
In-ground Pressure					
New	0	1	0	0	0
Replacement	0	1	0	1	0
At-Grade (Experimental)					
New	40	33	13	24	13
Replacement	11	10	8	8	11
Holding Tank					
New	1	0	2	2	2
Replacement	1	0	1	0	2
Septic Tank Replacement	2	0	1	3	0
Relocate Tank	0	0	0	0	1
Repairs	1	0	0	1	3

Additions	2	0	1	2	2
Non-Plumbing	5	0	2	4	0
Privies	2	0	1	1	3
Reconnections	7	0	6	4	7
Total Systems Installed	228	183	133	134	131
Total Number of Inspections	391	319	277	228	227
Wisconsin Fund Applications					
Orders Issued	7	6	7	8	8
Grants Applied For	7	6	7	8	8
Grants Approved	7	6	7	8	8
Systems Installed	7	6	7	8	8
Funds Distributed	\$27,120	\$23,666	\$41,390	\$40,045	\$23,239

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Enforcement Actions					
Construction Directives & Orders					
Field Directives	13	0	0	0	0
Directives Complied With	10	0	0	0	0
Written Notices	13	0	5	0	0
Replacement System Inspections					
Replacement Systems	59	71	65	48	70
Systems Replaced without Orders	46	65	65	25	59
Orders for Replacement	6	6	7	10	11
Soil Tests					
Reports Filed	170	159	173	125	107
Reports Verified	170	159	173	125	107
Written Notices	3	0	4	0	0

\* Sanitary Permit Transfers, Renewals, Revisions and Rescinded Permits are issued as defined and valid for continuation of sanitary permit until expiration – not part of total.

#### E. Well Program – Level I

The program allows us to review all well locations before the well is installed. We check the proposed well elevation, site location, distances from contamination sources, buildings and property lines. A follow-up inspection is made after the well is installed. This includes verifying the location, heights and setbacks of the new well and checking the well cap and the wiring for proper seals. We also order abandonment of all wells being replaced.

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Well Permits Issued					
New	176	114	86	80	62
Replacement	51	62	63	52	51
Reconnect/Rehab	2	2	1	0	2
<b>TOTAL</b>	<b>229</b>	<b>178</b>	<b>150</b>	<b>132</b>	<b>115</b>

Inspections Conducted	285	255	222	101	170
Orders for Abandonment	61	51	62	52	147
Written Orders	15	24	28	0	0
Citations	0	0	0	0	0

**F. Environmental Sampling**

Samples for laboratory analysis were collected in the following areas:

1. All swimming, wading and whirlpools are tested monthly for pH and chlorine/bromine levels and for bacteriological counts bimonthly. One hundred eighteen seasonal water samples were collected from all beaches.
2. We collect random retail food samples including the following: ice cream, frozen desserts, cut melon salad, sliced deli meat, ready-to-eat lettuce salad, oysters and deli salads. All samples with elevated bacteria levels are followed up by a Sanitarian.
3. All licensed establishments served by private wells are sampled yearly.
4. Through a contract with the DHS, we collect bi-monthly radiation samples. The samples measure the background radiation in the La Crosse and Genoa areas.
5. We collected 14 mold samples from homes to resolve mold related illness complaints.
6. The Environmental Health Division has a contract with the Wisconsin DNR for the purpose of assuring compliance with the Safe Drinking Water Code as it applies to public transient non-community water systems. Work includes collecting drinking water quality samples, conducting all required follow-up needed based on sample results and evaluating the sanitary condition of the well and pump installation. Eighty-seven wells were sampled. We issued boil water notices on four water systems. We also sent three nitrate maximum contaminant level violation letters for new or continuing violations.
7. We collected 62 lead/dust samples in homes with lead poisoned children.
8. Ground Water Survey. Midway is a small community in the Town of Onalaska with about 50 properties most of which are over 50 years old. Many of the homes have shallow wells and have elevated sodium and chloride in their drinking water. We are also sampling the town's three monitoring wells on a semi-annual basis. The data from these samples are being used as part of a hydrological study of water flow beneath Midway.

**G. Environmental Complaints**

Environmental complaints include waste disposal, open storage, animals, insects, pollution control and other citizen complaints. We investigate all housing complaints in La Crosse County and work closely with the La Crosse City Housing Inspection Program. Complaints received are investigated by the following workday.

Complaints	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
	478	310	452	328	217

## **H. Environmental Health Education Programs**

Most of our public health educational programs are focused on prevention. In addition to working with individuals about their specific concerns, the Department conducted 12 programs in several areas including a soil tester/plumber seminar, food protection to restaurant and grocery staff and various business groups and foodborne illness presentations at UW-L. Presentations: WTC food safety classes, UWL-epidemiology classes, UW-Madison nursing students, WTC massage therapist class, Viterbo Nursing, realtors and hospital infection control practitioners. We investigated two laboratory confirmed foodborne illness complaints and five other foodborne illness complaints. All cases are fully investigated and all outbreaks are reported to the State Epidemiologist. We investigated three cases of cryptosporidium and one Trichinosis infection reported by local physicians.

We participated in 13 media interviews on radon, beaches, tattoo infection, restaurant inspection and foodborne illness.

## **I. Lead**

The Environmental Health Division continued to work with the Public Health Nursing and Nutrition Divisions to reduce childhood lead poisoning in La Crosse County. Five homes were evaluated for lead hazards and five families were educated on lead poisoning prevention. The HEPA vacuum was loaned out to five families to reduce lead dust exposure. One staff member is certified as a lead risk assessor by DHFS. Staff participated on WLSU Radio Newsmakers Show to provide information on the Renovate Right Law.

## **J. Mold**

The Health Department investigated 14 mold complaints.

## **K. Radon**

We operate the Southwestern Radon Information Center which serves La Crosse and Monroe counties with grant funding from DHS. In 2010, 648 radon test kits were sold at La Crosse County libraries and the Health Department. Public presentations on radon mitigation were presented on 5 dates with 131 people attending. Others contacted the Department for one-on-one consultation—230. Staff participated with Gundersen Lutheran pharmacies to sell radon test kits to their employees.

# HEALTH EDUCATION DIVISION

Health promotion activities include a variety of educational and training activities aimed at helping people to improve their health. Health promotion can go by many names—wellness, prevention, injury, illness prevention and physical fitness—are some of the terms that are used in today’s popular press. The health promotion programs within the Health Department are grouped in the following major categories:

## Health Education Activities

### Tobacco Prevention and Control

#### Overview:

The La Crosse County Health Department (LCHD) was awarded a five year grant to facilitate a seven county Multi-Jurisdictional Tobacco Prevention and Control Coalition. Partner counties include Buffalo, Trempealeau, Jackson, Monroe, Vernon and Crawford. Staff in these counties negotiated and signed Memorandums of Understanding to conduct a certain level of education and outreach within their county. LCHD staff attended and coordinated regular meetings with partner county staff and traveled to the counties to help with presentations, media outreach, law enforcement education and strategy sessions to build relationships. Three Seven C’s Health Initiative meetings were held during 2010, and a quarterly schedule was laid out for 2011. Much work in 2010 occurred surrounding implementation of Wisconsin Act 12 the Smoke-free Workplace Law.

#### Highlights:

LCHD staff conducted educational presentations in each of the seven counties to: law enforcement, Boards of Health, Chambers of Commerce, Town Boards, Tourism and Commerce, Rotaries, local media and small news outlets and local coalitions. LCHD provided education and outreach to workplaces as requested including: Lakeview Health Care Center, Logistics Health, Mathy Construction, University of La Crosse, La Crosse Area Visitor Bureau, 3M Company, Badger Corrugating, Labor Management Council AFL-CIO, numerous hotels, bars and small businesses. Three communities adopted Wisconsin Act 12 to enhance enforcement capabilities. Staff facilitated 32 youth in FACT. Youth members distributed 506 educational packets to parents of K-12 students, educated legislators about new and emerging tobacco products, promoted Wisconsin Act 12 including “Kick off” event for Governor Doyle and organized a second annual Women of Influence event. Two new FACT groups were implemented through the Boys and Girls Club.

Four strategies in support of statewide smoke-free air policy implementation, four strategies in support of tobacco control program sustainability, two strategies in support of coalition building, three strategies to actively engage a FACT youth group in support of tobacco control policy and

sustainability activities, two strategies to support the Healthy Lifestyles Coalition's integrated approaches were implemented in La Crosse County by the Seven C's Health Initiative/LCHD.

Two hundred ninety-one compliance investigations at licensed tobacco retail vendors, seven related public outreach activities and seven related media outreach activities were conducted by the Seven C's Health Initiative/LCHD.

Staff developed a media plan to promote implementation at 100 days, 50 days and 25 days prior to July 5, 2010. Staff also wrote a media release at several intervals after the July 5, 2010 implementation date. Routinely, media interviews were held with: WXOW-TV, WKBT-TV, WIZM news reporter and WIZM morning talk show, La Crosse Tribune front page and Channel 24-TV. FACT youth got two interviews with releases and coverage of Kick Butts Day—WXOW-TV and WKBT-TV. Additionally, staff localized the media releases and asked the six partner county staff to share the release locally with their weekly newspapers and local radio stations. These local media often ran local stories with the same information.

Work on program sustainability involved co-hosting candidate forums prior to the November elections, advocating for awareness of OTP and tax inequity as a potential fiscal source of funding for Wisconsin and the Wisconsin Tobacco Control and Prevention Program by educating state elected officials at in-district meetings, hosting Women of Influence events and conducting earned media stories about OTP.

The Healthy Living Collaboration is a La Crosse County based effort and combines nutrition, physical activity and tobacco control as focus areas for activity. The Healthy Living Collaboration worked with middle school and high school youth. Youth were involved in learning about OTP and conducting outreach and advocacy to lessen the uptake of these products by their peers. The two sites involved were Erickson Club and the Mathy Center Club on the Viterbo University campus.

## **Maternal Child Health Grant**

### **Overview:**

Objective 1 of this grant included staff conducting home safety assessments at 19 residences located within La Crosse County with children ages three months to seven years of age to decrease hazards for injury. Objective 2 was to evaluate child safety seat installation for 140 children birth through seven years of age from La Crosse County who are properly positioned in a child safety restraint as demonstrated by their parent or caregiver.

### **Highlights:**

Over the course of this grant, the LCHD conducted 19 home safety checks in line with objective 1. One hundred fifty-four car seat checks were done with parents and caregivers in line with objective 2. Members of the LCHD worked at the Brenengen Fitting Station in West Salem.

Child Passenger Safety (CPS) techs manned booths at events to educate event-goers on proper car seat fitting. LCHD members conducted 3 separate interviews—2 with WKBT and 1 with WIZM—on topics relating to the grant. LCHD members also conducted a Safe Kids Car Seat Check for the Hmong Community in August. Staff attended two Gundersen Lutheran Baby Expos where they participated as an instructor and CPS technician.

## **Breast and Cervical Cancer Awareness**

### **Overview:**

The LCHD was awarded a grant to promote awareness of breast and cervical cancer among the Hmong populations. Objectives of the grant include increasing awareness of breast and cervical cancer in 100 Hmong women in La Crosse County and enrolling 100 unique Hmong women aged 18 and older to be screened for breast and/or cervical cancer.

### **Highlights:**

LCHD had a Hmong health workshop in December 2009 to launch this grant; 81 Hmong women attended, 20 Hmong women had mammogram screening during the workshop. A breast and cervical prevention presentation was given to 14 Hmong elders that included 12 women and 2 men; six Hmong women aged 60-76 were enrolled for mammogram screening—transportation and an interpreter were arranged for those six women.

During the months of October 2009 and January 2010, LCHD recorded a Hmong public service announcement on breast and cervical cancer awareness, which played during “Hmong Talk” a show on radio station WIZM that airs every Sunday from 7:00-8:00 a.m.

## **Prevention- Hmong Women Exercise Program**

### **Overview:**

The objective on this program includes: description of strategies implemented and outcomes measured, challenges or barriers to success and actions to address challenges. This program was made available in two sessions; winter and fall.

The winter session started on January 19, 2010 and ended on May 25, 2010 (19 weeks) and was held at the Hmong Community and Cultural Center Tuesday nights from 5:30-8:30 p.m. The session was divided into three parts. The first 45 minutes of the exercise program was focused on strength training; using dumbbells and ankle weights. The second part of the exercise program was health and nutrition education and followed by the third part which focused on line dancing. The line dancing activity was divided into two groups; advanced and beginner. There were two teachers for the beginner class and one for the advanced class.

The fall exercise program session started on August 23, 2010 and ended December 29, 2010 (18 weeks) and was also held at the Hmong Community and Cultural Center from 5:00-8:00 p.m. Monday nights. This session follows the same three part structure as the winter session. On the first day of the fall session, participants’ weight, body fat, body mass index (BMI) and waist measurements were taken. The women also set a personal weight goal for themselves. To help the women lose the weight, they were encouraged to increase physical activity on the days they

don't have the exercise class and to log on their physical activity log sheet. Women were also encouraged to monitor their food portion sizes.

### **Highlights:**

Forty-three women attended the winter exercise session—61% (25) of the women completed the winter exercise program. Participants' weight and body fat, BMI and waist measurements were taken on the first and last days of class—60% (15) of the women lost weight (between 2-15 pounds); 14% (3) of the women maintained their weight; 28% (7) women gained weight (between .5-1.5 pounds); 39% (16) of the women didn't complete this program.

Eighteen women attended the fall exercise session. Participants' weight and body fat, BMI and waist measurements were taken on the first and last day of class—39% (7) women lost weight (between .5-5 pounds); 16% (3) women gained weight (between .5-2 pounds); 11% (2) women maintained their weight; 33% (6) women either missed the measurement on the first day or last day of class.

## **Employee Smoking Cessation**

### **Overview:**

La Crosse County Health Department has a few different programs to help its employees quit smoking. One of the smoking programs is "Freedom From Smoking" from the American Lung Association. The other program is a one-on-one smoking cessation program with a health educator.

### **Highlights:**

Four smoking cessation sessions of "Freedom From Smoking" were offered to County employees. Two cessation sessions were offered at Lakeview and two were offered at the Health Department. Each smoking cessation session lasted eight weeks.

A total of fifteen employees went through this program—of the fifteen employees, nine quit smoking.

## **Alcohol Project**

### **MISSION:**

The mission of the Changing the Culture of Risky Drinking Behavior Community Coalition is to reduce the adverse effects of alcohol-related injuries and deaths by:

1. Creating an environment that supports safer choices and
2. Reducing underage access to and use of alcohol

and a community in which alcohol is consumed legally and safely without resulting in injury either to those drinking or those who are not.

## **IMPLEMENTATION STRATEGIES:**

**Media advocacy:** Gain support for positive changes in responsible and legal alcohol consumption and developing a partnership with local media through press conferences and interviews.

**Working with area festivals and taverns to adopt “best practices” and offering Responsible Beverage Server training.**

**Enhance enforcement of alcohol laws and policies:** on campus property and at campus sponsored events and offering social networking for safer choices through Face Book “WING TIPS” page and You Tube video contest.

**Coalition-building Activities:** recruiting new members and community sectors to the coalition, developing active volunteer leaders and providing leadership training.

**Educational Activities:** conducting an annual Parent Who Host Lose the Most Campaign, Strengthening Families Program, providing leadership training among high schools and offering mini grants for alcohol-free alternative events.

**Policy/Enforcement Activities:** conducting alcohol compliance checks and/or party patrols, working with law enforcement to educate La Crosse County alcohol retailers, taverns, restaurants and festival planners.

## **Intravenous Drug Use Outreach**

### **Overview:**

This grant entailed looking for populations that would be involved with intravenous drug use. The populations involved had contracted either a sexually transmitted infection (STI) or human immunodeficiency virus (HIV). The LCHD went to Alcohol and Other Drug Abuse (AODA) centers to contact participants. Participating centers included: The Women’s Unity and Men’s Unity based out of Gundersen Lutheran and the Women’s LAAR based out of Franciscan Skemp and the Women’s House Community Program (La Crosse County Justice Sanctions). A monthly STD/HIV prevention education program was provided to male inmates in the La Crosse County Jail. Education program participants were offered free HIV tests. Female inmates were not offered education due to space restrictions; however, they could request HIV testing. Outreach to the Salvation Army shelter residents was also established in 2010.

### **Highlights:**

The LCHD presented to 30 participants at the Women’s Unity, with 9 being tested and 9 receiving results. For the Women’s LAAR group, the LCHD presented to 25 participants, with 12 being tested and 12 receiving results. For the Men’s Unity group, the LCHD presented to 42 participants, with 17 being tested and 17 receiving results. The Women’s

House Community Program provided education to 27 women; through the Salvation Army, education was provided to 146 individuals and 14 took advantage of HIV testing and counseling. Additionally, 87 male inmates were provided with education and 54 inmates (including one female) were tested for HIV.

Two presentations on HIV/STI's and local resources were provided through two classes of the Building Opportunities Program (a program of Workforce Connections) to 36 high-risk youth; another education program was provided to 14 individuals at the Lesbian, Gay, Bisexual and Transgender (LGBT) Resource Library ; two presentations were provided to eight individuals through the La Crosse County Juvenile Detention Program.

In addition to the condoms provided to walk-in requests, quantities of condoms were also provided to the following agencies for distribution to their clients: Coulee Council on Addiction, Gundersen Lutheran Behavioral Health Clinic in Onalaska, Lakeview Clinic and the Lesbian, Gay, Bisexual, Transgender Resource Library.

### **Communicable Disease Investigation/Follow Up: Education Division**

#### **Overview:**

Wisconsin Statute Chapter 252.02 and Administrative Rule Chapter HFS 145 require specified communicable diseases to be reported to the local county health department for investigation and follow up. The Health Education Division facilitates investigation/follow up for STI and foodborne (enteric) infections. Local investigation and follow up includes contacting the individual, ensuring the individual understands the diagnosis and how to prevent re-infection, the individual has received treatment and that sexual contacts are notified to get tested. Contact with individuals may include two letters, a minimum of three calls and physical site visits to complete this task. Starting in September, a new interview document was adopted to capture information surrounding foodborne exposure. Each enteric interview now takes a minimum of thirty minutes to complete. At the end of 2009, we started to enter the data from each case report into the Wisconsin Electronic Data Surveillance System (WEDSS). In 2010, the Wisconsin Electronic Disease Surveillance System (WEDSS) was fully implemented into LCHD, fundamentally changing the notification process from health care providers to the LCHD.

#### **Highlights:**

Reported cases of foodborne infections and follow up of: 39 Campylobacteriosis; 4E Coli 0157:H7; 5 Giardiasis; 17 Salmonellosis.

Reported cases of sexually transmitted infections: 415 Chlamydia trachomatis; 28 reported cases of gonorrhea, 1 Human Immunodeficiency Virus and 0 AIDS. Additionally, staff provided HIV testing/counseling to 42 people on site and at Options Clinic. In April, STI Awareness Month, LCHD collaborated with the AIDS Resource Center of Wisconsin (ARCW) to place educational posters in 103 establishments in the community to promote STI testing and condom use, provide four community presentations, distribute one media release and conduct two media interviews.

All LCHD communicable disease staff is now trained on the WEDSS system (provided initially by DHFS in November 2008, then updated by LCHD epidemiologist in 2010). In addition, Franciscan Skemp Healthcare and Options Clinic now utilize WEDSS for 100% of all reportable cases in their facilities (and were trained by LCHD epidemiologist). The LCHD also provided any technical assistance needed for LCHD and reporters. Gundersen Lutheran Medical Center has not been trained to use WEDSS and has decided not to use WEDSS until the state meets with them to assist with conversion of lab reports. The UW-L Clinic has also been non-responsive to WEDSS training requests. In addition, any communicable disease testing submitted through the Mayo laboratory system in La Crosse County are returned to LCHD, even if testing occurred on a resident outside of La Crosse County. The Western Regional Office has assisted in re-assigning these cases to other counties.

## **Partner Services Contract with the Division of Public Health AIDS/HIV Section**

### **Overview:**

The La Crosse County Health Department's Education Division is contracted with the Wisconsin Division of Public Health to assist HIV (Human Immunodeficiency Virus) or AIDS (Acquired Immune Deficiency Syndrome) infected persons with notification and referral of partners in La Crosse, Buffalo, Crawford, Jackson, Trempealeau and Vernon Counties.

### **Highlights:**

The state assigned LCHD 13 cases for location, investigation and follow up in 2010 including locating the patient, identifying/locating partners for HIV prevention counseling and testing services, and assessing the medical and social supports of HIV-infected persons to link them with the resources to meet their needs.

## **Public Health Preparedness**

### **Overview:**

Objectives of this grant include: the LCHD engaging in a continuous planning process with local and regional partners to respond to public health emergencies, LCHD staff will meet

the appropriate competencies for their assigned emergency preparedness roles, LCHD will participate in a mass clinic exercise or real event that meets the requirements set by the CDC, in addition to completing (14 out of 14) performance measures, LCHD will collaborate with community partners to develop an integrate public health response addressing at-risk populations during public health emergencies, and LCHD will participate in the process of restructuring existing consortia to no more than six consortia aligning within the Department of Health Services geographic Regional Office boundaries.

### **Highlights:**

As required by the state, the Coulee Region Public Health Consortium was dissolved in 2009. In 2010, LCHD became a member of the Western Region Partnership for Public Health Preparedness, located in Polk County. The Western Region Partnership coordinated an exercise testing performance measures, and helped LCHD to complete the evaluation and recommended improvements from the exercise, using the nationally-required Corrective Action Program. In addition, each staff member completed a competency inventory, which was then used to determine what specific education should be provided to the department. LCHD also used the online Training and Learning Center (TLC) through La Crosse County for a basic preparedness course. In 2010, competency levels were also changed based on expected and past roles each division played in emergency situations. LCHD is also interested in working with special populations, particularly creating a “cooling center” during hot and humid days for those who do not have the ability to cool themselves. In 2010, LCHD worked with the Warming Center in La Crosse to use as a model practice for implementing a temporary shelter for weather conditions.

## **Other Projects**

### **Overview:**

The UW-L Graduate Microbiology Program contracted with LCHD for the LCHD epidemiologist to serve as lecturer for the “Introduction to Epidemiology” class in spring 2010. The semester-long class included 11 graduate microbiology students. It is a required course in the graduate microbiology curriculum. UW-L has indicated interest in continuing this arrangement when the class is taught every two years.

### **Overview:**

The LCHD epidemiologist served on the Advisory Board for the Viterbo University School of Nursing. The Board meets twice a year to work with and support the School of Nursing. In 2010, additional meetings were added so the Board could meet with the national BSN accreditation committee and help the school achieve re-accreditation.

# HOME CARE NURSING DIVISION

The mission of the La Crosse County Home Care Nursing Division is to provide skilled health care to residents of La Crosse County in their homes, fostering their independence to attain the highest quality of life. The challenge remains to provide quality service to patients who are being discharged quicker and sicker from the hospitals with increased and often complex needs at home. This is done within the parameters of federal and state regulations with minimal increase in reimbursement over the last 10 years. This annual report provides a statistical analysis of the La Crosse County Home Care Program.

The role of La Crosse County Home Care is to:

- Provide patient choice in home health services.
- Provide a viable option for people who need to private pay for services.
- Provide for exceptional coordination of services between La Crosse County Human Services, Hillview, Lakeview, other parts of the County Health Department and county governmental offices.
- Provide continuity of care for current and future clients.
- Provide staffing to be drawn on in the event of a significant public health emergency.
- Provide for quality home care services to residents of La Crosse County and a commitment to serving them.

Home care services include skilled nursing, home health aide, occupational therapy, speech therapy and physical therapy. During 2010, the agency cared for 79 home health nursing patients. Additional patients were evaluated, but if found not to need home care service, they were referred to other community resources. The Division also cared for 28 home health aide, 19 therapy and 14 personal care patients.

## HOME HEALTH CARE SERVICES

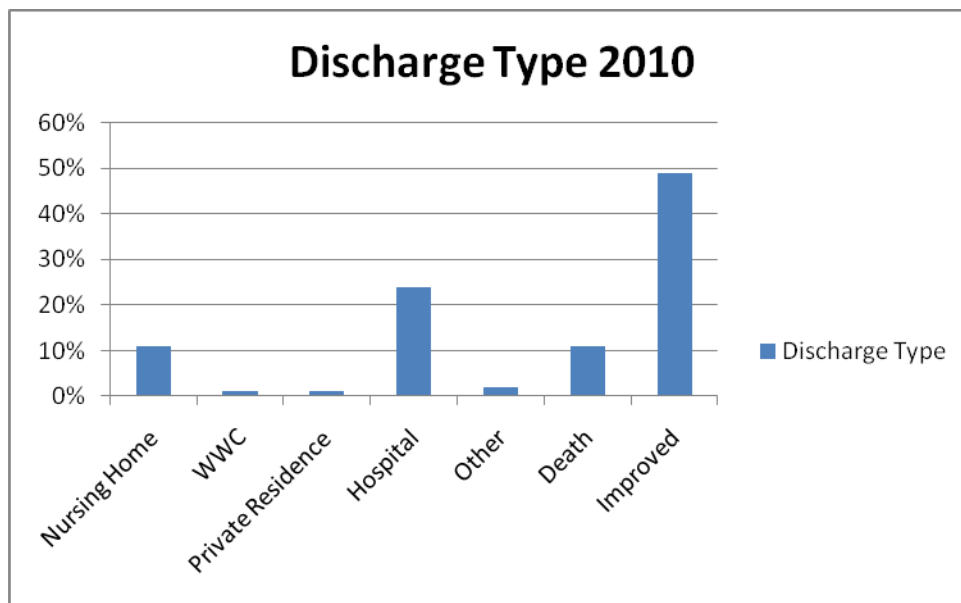
The number of patients served remains stable. RN skilled visits decreased slightly due to less RN staff available to provide admissions and skilled care. Home Health aide visits have also decreased in 2010 as the FTE was decreased by one half-time position. The Western Wisconsin Cares (WWC) continues to affect the number of clients on the Agency caseload for the year of 2010.

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Admissions	38	28	39	30	29
Discharges	37	36	32	31	32
Home Health Patients	88	79	75	75	79
Home Health Nursing Visits	2,803	2,502	2,290	2,729	2,513
Home Health Aide Patients	42	39	38	34	28
Home Health Aide Visits	6,318	6,400	5,512	5,030	4,611

Home Health Speech / Occupational Therapy Patients	3	1	4	5	4
Home Health Speech / Occupational Therapy Visits	9	11	8	17	42
Home Health Physical Therapy Patients	10	9	14	14	10
Home Health Physical Therapy Visits	101	47	78	193	136
Nutrition Visits	4	0	0	0	0

### ADMISSION PAYER SOURCES

	Medicare	Medicaid	Self-Pay	Private Insurance	CMO
<b>2006</b>	13%	8%	5%	11%	63%
<b>2007</b>	11%	7%	3%	18%	61%
<b>2008</b>	33%	21%	5%	23%	18%
<b>2009</b>	40%	13%	0%	17%	30%
<b>2010</b>	26%	1%	1%	36%	36%



### PERSONAL CARE SERVICES

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Personal Care Clients	16	15	18	16	14
Personal Care Hours	3,215.00	4,531.02	3,7951	4,674	4,409
Personal Care Supervisory Visits	67	63	52	64	61

## HOME CARE VIGNETTES

With the harsh economic atmosphere and shortage of agencies that are able to cover the needs of our aging and fragile population, it is imperative that Home Care at La Crosse County play an important role in meeting the needs of those citizens for the continuum of care. Long Term Care workers face challenges in the field providing the appropriate care to keep clients safe in their homes. Nursing home and assisted living facilities face the same financial problems due to decreasing reimbursement from the state and federal government. Home Care at La Crosse County provides skilled services, such as skilled nursing, physical therapy, occupational therapy, speech therapy and home health aide services. Our goal remains the same—to maintain clients safely in the least restrictive environment with a higher quality of life.

Susan is an eight year old girl who developed a debilitating condition that is potentially fatal. She has other preschool siblings who need their time with mom who works part time away from home. Personal care services are provided by La Crosse County Home Care to allow mom to maintain her job and have time to spend with her other children. Susan requires constant supervision and complete care for all of her personal needs, including meals. She is nonverbal, paralyzed and bedbound. She is also alert and aware of her family and care providers. The cost of providing these cares on their own would be prohibitive, and without Home Care, mom would not be able to work or spend the time her younger children demand. The family is pleased and grateful for the care provided.

Tom is an eighty-two year old man who is paralyzed from the waist down. His wife is also elderly and unable to provide all of his needs. Skilled nursing is required for part of his needs, including wound care. Home Health aides provide his personal cares and transfer Tom into his wheel chair in the morning. Because of his many needs, his wife would be unable to provide these cares on her own, and the alternative would be for him to be admitted into a nursing home. Tom is appreciative of being able to remain in his home safely because of the care he receives from La Crosse County Home Care.

Andy is a fifty-eight year old man who has a fatal condition. He receives skilled nursing through Home Care to assist in keeping him comfortable and on track with his medication regime. His case manager is the liaison person and advocate with his medical doctor, his sister and the Family Care case manger. He wants to remain in his own home until end of life. This is accomplished by personal care services and his home care nurse with La Crosse County.

Helen is a seventy-seven year old woman who lives alone. She was discharged from the hospital needing daily skilled nursing for wound care to her lower extremities. Without Home Care, she would have been admitted into the nursing home. Helen felt that was not an option for her. She was referred to La Crosse County Home Care, as there was not another agency able to provide these cares at the time. She is very grateful and happy for the care she receives. She speaks very highly of the nurses who provide her wound care.

There are many more stories like these to speak to the need of Home Care and the appreciation of services that allow people to remain in the best environment, their own home.

# LABORATORY DIVISION

## 2010 ANNUAL REPORT - LABORATORY DIVISION

La Crosse County Health Laboratory offers testing, interpretation and referral for a variety of environmental and human health hazards. The Health Laboratory provides surveillance and detects the presence of disease producing agents which have the potential to adversely affect the health of an entire community. Public health laboratory technologists use rapid test methods and provide quick turn-around time for customers.

Significant efforts are made to assure the safety of public and private drinking water supplies. State and federal law mandates routine sampling, testing and reporting of sample results. Lab technologists work in partnership with homeowners, water utilities, Wisconsin DNR, US EPA, environmental health sanitarians and licensed establishments to accomplish this goal. Wastewater treatment plant effluents, streams and beach waters are routinely tested to prevent the spread of infectious diseases in surface waters. The Laboratory is certified to conduct these tests by the Wisconsin Department of Natural Resources and Wisconsin Department of Agriculture under state laws NR 149 and ATCP 77.

One of the most important duties of a public health laboratory is to respond quickly and decisively during a public health emergency. As part of the County's overall emergency response effort, the Laboratory offers local testing and referral services to address human health hazards caused by natural or intentional events. Frequently, we are able to provide test results within 24 hours of sample submission.

Many La Crosse County departments depend on public health laboratory services on a daily basis. In 2010, Solid Waste, Facilities, Land Conservation, Justice Sanctions, Environmental Health, Human Services, Public Health Nursing, Home Care and Health Education all utilized Laboratory services. In 2010, we conducted 63,699 drug tests on 16,414 urine samples for Justice Sanctions. Drug analyses included cocaine, opiates, amphetamines, methamphetamines, tetrahydrocannabinol, barbiturates, benzodiazepines, tramadol, and oxycodone and buprenorphine.

The Laboratory continues to work closely with the Wisconsin State Lab of Hygiene and other public health labs through participation in the Wisconsin Public Health Lab Network. Through collaborations with other public health partners, we are able to share technical and logistical information to improve services across Wisconsin.

Laboratory Report 2010	2006	2007	2008	2009	2010
Media Contacts	2	3	5	1	2
Food Products	788	28	6	0	6
N. gonorrhoea	532	435	160	0	0
Special Projects, Na, Cl, NO3	303	537	110	159	20
Beaches/Land Conservation Bacteria	127	104	413	414	444
Rivers & Streams Chemical	744	942	549	555	570
Pools - Bacteria	1778	888	914	901	915
Sewage Effluent	166	185	194	226	161
Landfill Monitoring	1471	1287	1249	1382	1275
Public Water - Bacterial/ Chemical	2257	2132	2028	2003	2029
Private Water - Bacteria	2495	2931	1939	1490	1674
Private Water - Chemical	890	752	1049	866	990
Paternity Tests	267	394	228	1	0
Drug Test Urine Samples	0	16,900	16,872	14,411	16,414
Presentations	0	4	3	12	12

# NUTRITION DIVISION

The Nutrition Division works within the community to develop and implement programs that help area residents eat in a healthful manner and live an active lifestyle.

During 2010, the Nutrition staff's activities focused on the following health priorities from the *Healthiest Wisconsin 2010* public health plan:

1. Adequate and appropriate nutrition
2. Overweight, obesity and lack of physical activity
3. Social and economic factors that influence health
4. Access to primary and preventive health services

To accomplish these goals, the division offered the following public health programming:

## Health priorities:

1. Adequate and appropriate nutrition
3. Social and economic factors that influence health

## La Crosse WIC Program

WIC is a supplemental nutrition program for women, infants and children that has been proven to reduce the incidence of low birth weight and increase breastfeeding rates among participating families. The program focuses on preventing nutrition related health problems and improving the health status of low-income, at-risk pregnant/post-partum/breastfeeding women and children up to age 5. WIC accomplishes this through the provision of supplemental foods, nutrition counseling and referrals to other area services.

During 2010, the La Crosse WIC Program served an average of 2,336 participants each month and served 3,954 unduplicated mothers and children.

### *Average Monthly Participation*

2006	2007	2008	2009	2010
2,186	2,289	2,389	2,357	2,336



**Actual Food Dollars Spent in La Crosse County WIC Approved Grocery Stores**

2006	2007	2008	2009	2010
\$1,195,330.29	\$1,497,357.86	\$1,621,865.55	\$1,524,355.57	\$1,496,303.65

**The Prenatal Care Coordination Program**

Prenatal Care Coordination is a case management program for high-risk pregnant women enrolled in the Medicaid Program. The goal of the program is to improve pregnancy outcomes and help women have healthy babies. Case managers provide health and nutrition information, breastfeeding information and support and help women connect to needed services. In 2010, 305 women were enrolled in the program.

***Annual Participation***

	2006	2007	2008	2009	2010
Number of women enrolled in the program this year	119	104	178	292	305

***The WIC and Prenatal Care Coordination Programs make a difference in the health of those who participate. Breastfeeding rates rise and the incidence of low birth weight decreases with participation in these programs.***

**IMPROVING BIRTH WEIGHT:**

	2006	2007	2008	2009	2010
% of infants weighing less than 5.5 lbs. at birth whose mothers were enrolled prenatally in the Prenatal Care Coordination and WIC Programs	6%	2%	5%	8.8%	8.7%
% of Hmong infants weighing less than 5.5 lbs. at birth whose mothers were enrolled prenatally in the Prenatal Care Coordination and WIC Programs	0%	2%	0%	2.9%	3.4%

Breast milk is the ideal food for a child under 1 year of age. WIC and prenatal care coordination staff promote breastfeeding with all the families they serve. Following is a chart showing breastfeeding rates among women participating in the WIC and Prenatal Care Coordination programs.

### ***Improving Breastfeeding rates:***

**2010 goal:** 75% of women breastfeed their infants at birth, 50% will continue breastfeeding until their infant is 6 months of age

\*\* NOTE: 2009 Pediatric Nutrition Surveillance data shows a 61.7% breastfeeding rate at birth among low income mothers in the U.S. and a 27% rate of breastfeeding at 6 months

<b>Population</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
% of infants born to WIC mothers who were initially breastfed	71.2%	71.5%	67.8%	70.6%	64.9%
% of infants born to Prenatal Care Coordination mothers who were initially breastfed	85%	65.3%	66.2%	58.1%	60.3%
% of infants born to Hmong mothers who participated in the WIC and Prenatal Care Coordination Programs who were initially breastfed	71.4%	68.8%	60%	54.5%	41%
% of infants born to WIC mothers who were breastfed at 6 months of age	NA	26%	24.2%	24.6%	25.3%

### **WIC Breastfeeding Peer Counselor Program:**

La Crosse has a sizable Hmong population and only a few Hmong health care providers. Health care disparities often exist in minority populations resulting in poorer health outcomes. To address this issue, the Wisconsin WIC Program continued in 2010 the WIC Breastfeeding Peer Counselor Program to provide culturally appropriate breastfeeding education and support to Hmong mothers in La Crosse.

A Hmong community health aide from the La Crosse WIC Program became a counselor through the program completing the training in July 2005. In 2010, she worked with pregnant and breastfeeding Hmong women providing culturally sensitive breastfeeding information, support and encouragement.

<b>Year</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Hmong women initially breastfeeding their newborn	67.4%	55.6%	57.5%	54.5%	41%
Hmong women breastfeeding longer than 1 month	41.9%	46.2%	53.8%	64%	50%

Because the Hmong breastfeeding peer counselor has been well received by Hmong WIC mothers, a second non Hmong peer was trained to work with non Hmong WIC mothers. She sees women when they are pregnant encouraging and preparing them for breastfeeding once their infant is born. When a mother gives birth and is breastfeeding she provides support and helps problem solve if /when mothers need help.

## **Lead Poisoning Prevention**

The Health Department’s Lead Poisoning Prevention Program is a partnership between the Nursing, Nutrition and Environmental Health divisions in the Department. Children between 6 months and 5 years of age who were enrolled in the WIC Program are screened for lead poisoning. Those found to have elevated blood lead levels receive a home visit from the lead team (a nutritionist, nurse and sanitarian) who provide information on how to alter the families’ environment and diet to reduce lead problems. Lead activities in the Nutrition Division included:

<b>Lead Activities</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Screening	573	548	697	571	460	648
Nutrition follow up for diet counseling	8	1	3	3	3	2

## **Food Insecurity**

Hunger is a concern among many in the La Crosse area—particularly among low-income families with children. 2005 data indicates 9% of Wisconsin households experience food insecurity or hunger. A 2006 survey conducted with La Crosse WIC Program participants found 51% were food insecure (limited or uncertain ability to acquire food in socially acceptable ways—was 48% in 2002) and 17% experienced food insecurity with hunger (have a recurring problem accessing sufficient amounts of food—was 19% in 2002). Because so many WIC families in La Crosse experience food insecurity/hunger, the La Crosse WIC Program partners with the Hunger Task Force of La Crosse to offer a small food pantry in the Department. Foods provided were nutrient dense and include fruits and vegetables, grains, dairy and meats. The food pantry packages supplement the WIC foods each family receives. Following is a chart showing the pounds of food distributed as well as the number of WIC families and individuals served through the WIC food pantry:

<b>Year</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
# of families served	172	177	170	201	193
# of people served	605	628	690	696	671
Pounds of food served	5,153	3,822	2,655	2,599	2,479

## **WIC Farmer's Market Nutrition Program**

The WIC Farmer's Market Nutrition Program provides \$15 in WIC vouchers to each eligible WIC family for the purchase of fresh, locally grown fruits, vegetables or herbs at area Farmers' Markets. When families received the vouchers, they also received information from WIC staff regarding the times and days of the markets, a listing of when certain fruits and vegetables are in season and ideas for using and preparing fresh fruits and vegetables.

Between June and October 2010, 1,482 families received farmer's market vouchers worth \$22,230. Forty-five (45%) percent of the vouchers issued were redeemed for locally grown fruits and vegetables.

*Health priority: 2. Overweight, obesity and lack of physical activity*

## **Childhood Obesity**

The Coulee Region Childhood Obesity Coalition was formed in 2000 to address the issue of childhood obesity in the Coulee Region. The Coalition is co-facilitated by staff from the Health Department Nutrition Division and Gundersen Lutheran. The mission of the Coalition is to improve child health by encouraging healthy eating habits and regular physical activity. Coalition members used the following strategies in 2010 to help achieve their mission:

1. *Maintenance of the Coalition's web site* ([www.childhoodobesitycoalition.org](http://www.childhoodobesitycoalition.org)).
2. *Continued distribution of a quarterly consumer newsletter* (see web site for 2010 issues).
3. *Continued regular contact with the media*: 11 press releases were sent to area media on issues surrounding childhood obesity and 26 stories were aired. In addition, 14 media spots are aired/month focused on the Coalition's Footsteps to Health project (TV19, WIZM, La Crosse Radio Group and the La Crosse Tribune)

4. *Conducted two active lifestyle challenges in the community:* Turn off the TV Week (4/10) and the Walk to School Challenge (10/10)—595 children and adults participated in the Turn off the TV Challenge in April- a 15% increase from 2009. Children from 18 area schools participated in the Walk to School Challenge in October with 33.8% of children from the schools walking or biking to school during the challenge.
5. *Piloted a winter healthy eating and activity challenge at 3 sites.* Several Head Start classrooms, YMCA Surround Care sites and La Crosse School District elementary classrooms piloted the Walk Around the World Challenge. The challenge enables children who participate in select activities to earn miles which move them around the world during the challenge.
6. *Continued the Footsteps to Health Program:* The program continued to be implemented at 3 Festival Foods stores. Each month a featured fruit and vegetable was promoted in the store at 2 nutrition kiosks. Samples using the featured fruit or vegetable were offered at the kiosks along with pertinent nutrition information. Recipes were provided. Year 1(July 2009-June 2010) evaluation data shows a 7.8% increase in fruit and vegetable purchases.

## **Fit Families**

Overweight and obesity among preschool children has increased in Wisconsin by 49% in the past 10 years. Low income families are particularly impacted by poor eating choices and inactive lifestyles. To address this, 6 WIC Programs partnered with UW-Madison Population Health Institute to develop the Fit Families Program. This program provides individual nutrition counseling for program participants, training for Fit Families staff to assure they are comfortable and knowledgeable about wellness and recruits community partners to help get healthy eating and activity messages out to the community. During 2010, 83 children from La Crosse County completed the program and 111 new families were enrolled. Families participate for a year receiving monthly contacts from a nutritionist. Families work to improve one of four lifestyle areas: increasing their child's fruit and vegetable intake, reducing sugared beverage consumption, reducing TV time or increasing daily physical activity. Parents were encouraged to model the behavior they were encouraging in their child. During the first 2 years of the program, a comparison group was established in each Fit Families program for evaluation purposes. Program results show a statistically significant increase in the fruit and vegetable consumption, a reduction in excessive juice consumption, an increase in daily activity and a decrease in TV viewing among those completing the program. Results were as follows:

- The proportion of children who ate at least 4 servings of fruits and vegetables per day increased from 33% to 59%, while the comparison group varied from 45% to 46% (OR=2.94, 95%CI=2.14-4.05, p<.001).
- The proportion of children in Fit Families who consumed the recommended 6 ounces or less of juice per day increased from 46% to 64%, while the

comparison group varied from 43% to 47% (OR=1.74, 95%CI=1.27- 2.40, p<.001).

- Children in Fit Families with 2 hours or less of TV or screen time per day increased from 79% to 89%, while the comparison group varied from 82% to 83% (OR=1.93, 95%CI=1.25-3.00, p=.003).
- Children in Fit Families with at least 60 minutes of activity per day increased from 90% to 98%, while the comparison group varied from 94% to 96% (OR=3.58, 95%CI=1.56-8.58, p=.003).
- For sweetened beverages, however, there were no significant differences between the intervention and comparison groups. The proportion of children with one or fewer servings per week increased from 70% to 82% in the intervention group and increased from 72% to 78% in the comparison group (OR=1.37, 95%CI=0.94- 1.99, p=.103).

## **Safe Routes to School**

In 1969, 50% of elementary school age children in the U.S. walked to school; today, only 15% walk. To remedy this and encourage an active lifestyle among children, the Nutrition Division implemented a Safe Routes to School Program in October 2007. The 2010 program activities included:

- Collaborating with Coulee Region Childhood Obesity Coalition on the Walk to School Challenges at 18 area schools
- Sponsoring several bike rodeos
- Working with area municipalities to submit 5 Safe Routes to School Implementation Grants. Grants will improve community infrastructure making it safer for children to walk and bike and provide programming to encourage children to walk and bike to school safely. All were funded. The municipalities were: La Crosse County, City of La Crosse, Town of Campbell, Village of West Salem and Village of Holmen.
- Expanding, through the Communities Putting Prevention to Work funds, the number of area schools participating in La Crosse County's Safe Routes to School Program. (Expanded from 3 to 13 schools.) Each of the 13 schools has an internal Safe Routes to School Liaison that leads weekly walking school buses and coordinates in-school activities connected to the Safe Routes to School Program.
- Evaluated impact of Safe Routes to School Program from 2007-2010. By 2010, 18.25% of children at Franklin Elementary School children were walking to/from school (a 3% increase), 16.5% of Hamilton children were walking/biking to/from school (a 7.25% increase) and 5% of State Road children were walking/biking to/from school (a 3.7% increase)

## **Healthy Living for a Lifetime Program**

The Division continued its regular *Healthy Living for a Lifetime* programming for the community in 2010 with 5 noon nutrition brown bag sessions and 3 health challenges. During January and February, we offered the New Year-New You Challenge encouraging participants to keep their New Year's resolutions to eat healthier and be more active in 2010. During the summer we offered a *Farmers Market Challenge* to encourage community residents to utilize area farmers markets, trying new fruits and vegetables and in September, we offered the *Fall 30 Activity Challenge*, which encouraged participants to set a daily walking goal to increase their physical activity.

Post session evaluations of the education sessions show participants increased their health knowledge and planned to use this new knowledge to make changes in their eating and activity habits. Post challenge evaluations show participants improved their activity and eating habits during the time they participated in the challenge.

## **Occupational Health**

Since diet and physical inactivity contribute to 35% to 40% of healthcare costs (Dr. Aldana, 2007), an astounding \$5 million to \$6 million of La Crosse County employees' healthcare costs could be attributed to diet and physical inactivity. Increasing programming to help improve diet and exercise habits of employees helps to improve the health and productivity of employees and reduce healthcare costs to La Crosse County. The following activities were provided by the Nutrition Division in 2010 to help meet the health needs of La Crosse County employees.

- **HealthBits Newsletter**
  - We wrote and distributed the newsletter to all County employees twice a month via e-mail (sent to about 1,400 employees electronically). HealthBits is also posted and archived on Countyview for all employees to read.
- **Weight Management**
  - About 12% of healthcare costs are obesity related (Dr. Aldana, 2007). This means that almost \$1.8 million is spent by La Crosse County on obesity related healthcare costs. Helping employees to manage their weight could in turn help to reduce these healthcare costs. (It costs \$1,200 more to treat an obese person than it does a person of healthy weight with the same condition. Dr. Aldana, 2007).
  - We provided weight loss support to 22 employees
  - We provided a weight loss educational session attended by 30 employees

- **Individual contacts**
  - Responded to a variety of nutrition-related questions from 189 employees via e-mail, phone or in person
- **Healthy Living for a Lifetime** – These brown bag noon nutrition sessions and weight loss challenges provided to the community are promoted to and attended by County employees as well. Five educational sessions were presented at the Health and Human Services building downtown over noon hour. They were attended by 64 employees
- **Health Challenges** – promoting improved physical activity and nutrition intake. Three challenges were held in 2010 with 231 employees participating.

## **Communities Putting Prevention to Work**

The goal of this 2.2 million dollar federal grant is to utilize policy, system and environmental change to make healthy eating and active lifestyles the easy choice thereby reversing the problem of obesity in our community. The project runs from March 2010-March of 2012. Five (5) staff were hired and 3 current staff partially reassigned to carry out the strategies below:

- A multimedia community campaign targeted to children, adults and seniors designed to motivate our community to ask more of it so it's easier to live actively & eat in a healthy fashion
- A Complete Streets effort so roadways consider all users not just cars. (Bikes, pedestrians, seniors and people in wheelchairs are all accommodated)
- A "Share the Be Aware" campaign to encourage drivers to watch out for cyclists and pedestrians and encourage cyclists to follow the rules of the road.
- Implementation of active commuting programs at 15 worksites
- An assessment of bike parking in the City of La Crosse and development of a plan for increasing on street, secure bike parking
- Doubling the number of restaurants participating in Gundersen Lutheran's 500 Club Program and expansion/improved labeling of offerings
- Expansion of the Footsteps to Health fruit and vegetable kiosks to 5 participating grocery stores and possibly one worksite to encourage more fruit and vegetable purchases at county grocery stores
- Doubling the number of vending sites in the Wellness Warriors healthy vending program
- Organization of strong seniors activity groups at 3 sites or senior centers
- Implementation of a Farm to School Program in 4 school districts in the county to encourage the inclusion of local foods in school meals
- Expansion of the Safe Routes to School Program from 3 to 13 schools
- Assessment and revision as needed of school wellness policies to incorporate Safe Routes to School & Farm to School

*Health priorities:*

*3. Social and economic factors that influence health*

*4. Access to primary and preventive health services*

While La Crosse has a wide variety of services to help meet community needs, many individuals and families are unaware of their existence. To help people learn about resources in our community, the Division provides information through the Community Liaison Program.

### **Community Liaison Program**

Begun in 1999, the Community Liaison Program connects people with unmet needs to available community services.

In 2010, the Coordinator received 106 requests for assistance. The most common request from those referred to the program was for transportation assistance, while the second and third most common requests were for health related assistance and baby items respectively.

Of the 106 direct referrals, 95% resulted in either partial or full resolution of the need and 5% of the people did not act on information provided.

### **For Goodness Sakes**

Started as a holiday project, the For Goodness Sakes project evolved into a year-round program in partnership with the La Crosse Tribune. The project matches people whose needs cannot be satisfied through traditional channels with people or funds that can satisfy their need. Needs such as car repairs, furniture or assistance paying for prescriptions are satisfied when people from the community step forward and offer to help. Needs were posted each week in the Sunday paper in 2010 and through the generosity of Coulee Region families, many of those posted were met.

The holiday For Goodness Sakes Program served over 1,000 people in 2010. People in need were referred to the program by community professionals who work with them. The person referring the family identified the individual or family's needs and then that individual or family was "adopted" for the holidays by a business or community member for the holiday.

## **Badger Care Plus Outreach**

When the expanded Medicaid Program *BadgerCare Plus* was launched in February 2008, the State of Wisconsin awarded outreach grants to a variety of community based organizations to help enroll eligible individuals and families. La Crosse County Health Department's Nutrition Division was awarded a grant with the goal of enrolling 100 individuals between February 1, 2008 and June 30, 2009. That contract has been extended through June 2011 because of our success. During 2010, Nutrition Division staff completed the following express and full application enrollments: (*Express enrollment* provides short term, temporary enrollment until a *full application* can be completed.)

<b>Year</b>	<b>Express BadgerCare Plus enrollments completed</b>	<b>Full BadgerCare Plus &amp; BadgerCare Core applications completed</b>
2008	37	46
2009	78	378 * in 6/09 DHS launched BadgerCare Core for childless adults
2010	76	130

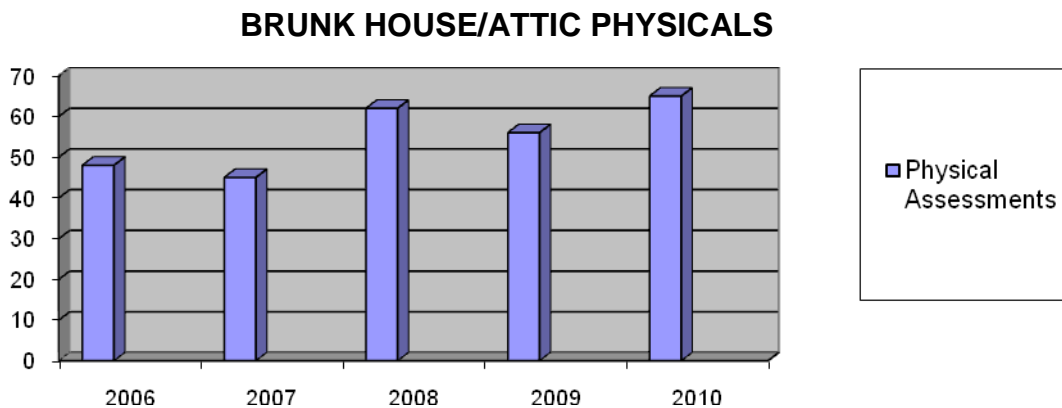
# PUBLIC HEALTH NURSING DIVISION

The Public Health Nursing Division offers services that promote health and prevent disease for the citizens of La Crosse County. Our services are designed to meet the needs of individuals, families and the community as a whole through collaboration with a variety of partnerships.

The funding sources for Public Health Nursing services include contracts, grants, third-party payers, tax levy funds and private pay. The following provides a statistical and narrative report of these services provided during the 2010 calendar year.

## BRUNK HOUSE/ATTIC CORRECTIONAL SERVICES

The Public Health Nursing Department provides nursing assessments for residents of the Brunk House, a halfway correctional facility for men in the city of La Crosse supported by ATTIC Correctional Services. Nursing assessments are also provided to new ATTIC Correctional Services' employees. This is a fee for service program. Our numbers are dependent on admissions, ranging from 1-7 monthly. We also take the opportunity to provide basic health education and assist with informing of appropriate community resources.



## CARING

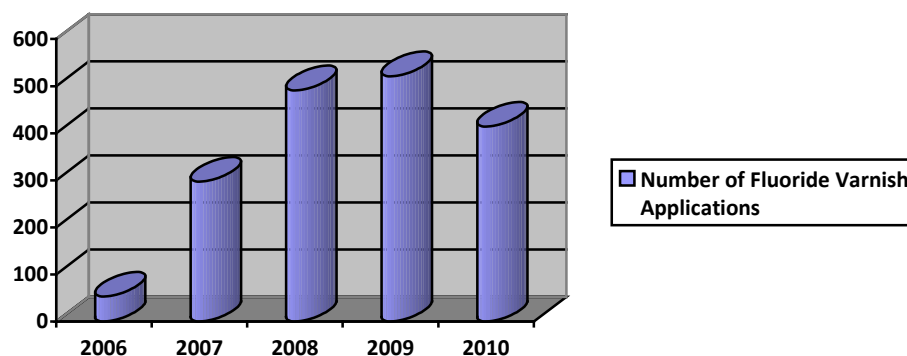
Caring is a collaborative grant-funded project among the Salvation Army, Viterbo University-School of Nursing and the Public Health Nursing Division. Two days a week, nursing students work with a public health nurse and their instructor to provide care and education to clients utilizing Salvation Army services. Health education, screening services and assistance with referrals are some of the services provided. Nursing services were not provided during summer months due to funding.

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Clinic Visits	362	261	348	408	450

## EARLY CHILDHOOD CARRIES INTERVENTION PROGRAM

Through this program, children 6 months to 6 years of age receive a fluoride varnish application to their teeth by the Public Health Nurses. Fluoride varnish is a protective varnish coating that aids in the prevention of cavities. With the application of fluoride varnish, an oral assessment is completed by the nurse and referrals are made when applicable. Children are seen at the La Crosse County Health Department, in the home and through local Head Starts. This program is supported by Maternal Child Health consolidated contracts and Wisconsin Medical Assistance.

**Number of Fluoride Varnish Applications**



## CHILDHOOD LEAD POISONING EDUCATION AND PREVENTION PROGRAM

In La Crosse County, children with a lead level of 10 mcg or greater are case managed by the Lead Program Nursing Team. Case management may include but is not limited to phone calls, home visits, consults with primary health care providers and a home lead risk assessment. The RN works together with a Registered Dietician and a Lead Risk Assessor to decrease the blood lead level and limit the effects. In 2010 Public Health Nurses:

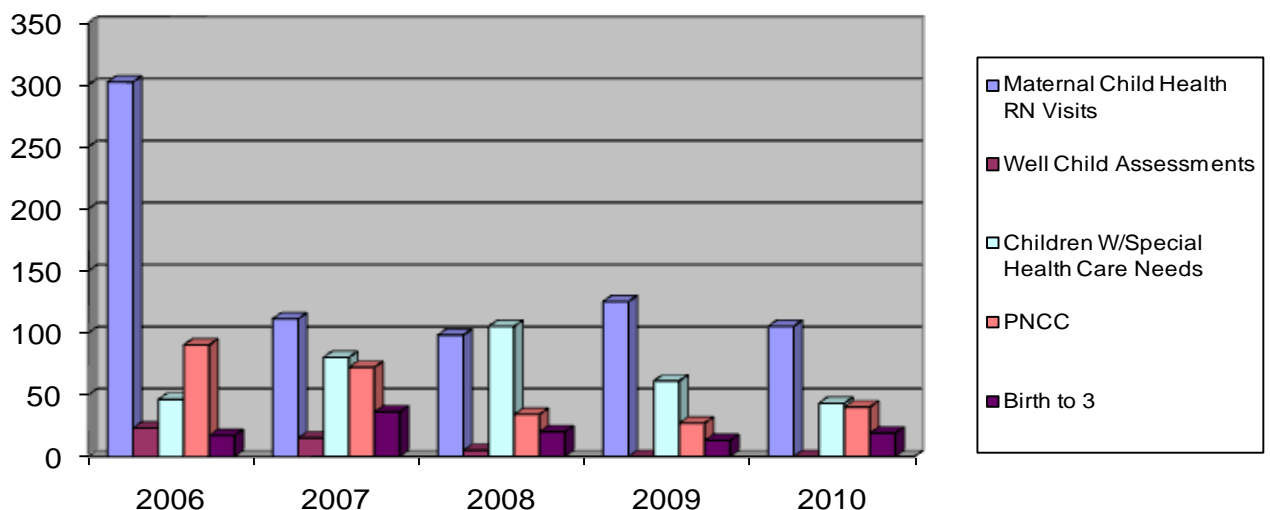
Tested 12 children for lead poisoning through a capillary blood draw (finger poke) at the LCHD. All 12 children had a normal lead level.

- Received 22 referrals from Gundersen Lutheran, Franciscan Skemp, and WIC for children who had an elevated capillary level. Nineteen of the 22 children received the confirmatory venous test with normal results and their cases were closed. The other three declined venous testing or moved out of La Crosse County before they were able to receive venous testing.
- Case Managed 25 children who were lead poisoned.
- Provided education on lead poisoning to the above 59 families with children who were either at risk for lead poisoning or had been lead poisoned.

## MATERNAL AND CHILD HEALTH PROGRAM

The Maternal and Child Health (MCH) Programs in the Public Health Nursing Division provide clinic and home visitation services to mothers, infants and children. These services include: post partum assessments, well child assessments, infant assessments, weight checks, health and safety education, lactation consultations, referrals, follow-up and targeted case management. Program referrals are received from medical facilities, schools, Social Services and self referrals from parents. Funding for these programs are provided through state MCH consolidated contracts, Wisconsin Medical Assistance, regional consolidated contract for Children and Youth with Special Health Care Needs services and the local Birth to 3 Program.

### Child Health Assessments



## IMMUNIZATION SERVICES

The Public Health Nursing Division is dedicated to promoting wellness and preventing disease in individuals by offering childhood and adult immunization programs. Immunization Clinics have been provided at schools, businesses, health fairs, Salvation Army, St. Clare Health Mission, area Congregations, daycares and the La Crosse County Health Department to increase access to services for all La Crosse County residents. Below is a summary of immunizations given to adults and children.

	2006	2007	2008	2009	2010
Diphtheria/Tetanus/Pertussis (DTP/aP)	164	168	112	132	106
Polio	72	54	38	100	98
Tetanus/Diphtheria (Td)	121	472	46	16	11
Mumps/Measles/Rubella (MMR)	211	154	137	110	116
Pneumococcal (Adult)	8	3	2	4	0
Pneumococcal (Child)	171	120	75	84	82
Influenza (seasonal)	3,699	5,286	5,350	2,857	3,938
Influenza (H1N1)				5,050	1,615
Haemophilus Influenza type b (Hib)	87	109	49	83	70
Hepatitis A	42	119	120	104	125
Hepatitis B	708	359	399	263	187
Human Papillomavirus (HPV)		123	160	86	99
Meningococcal	42	124	130	103	103
Rotavirus	4	48	28	35	28
Tetanus/Diphtheria/Pertussis (Tdap)	137	240	1,635	684	315
Varicella (chicken pox)	135	169	553	419	160
<b>TOTAL</b>	<b>5,601</b>	<b>7,548</b>	<b>8,834</b>	<b>10,130</b>	<b>7,053</b>

## SAFE SLEEP PROGRAM

In an effort to help reduce the number of infant deaths, La Crosse County Public Health Nursing implemented a Safe Sleep Program in 2009. Working under the national “Cribs For Kids” Program, nurses provide a safe sleep option (a new Pack and Play) as well as education on safe sleep and Sudden Infant Death Syndrome (SIDS) prevention. In 2010, 10 different families were provided with a Pack and Play and received education. This program has been funded through a consolidated contract with the state’s Maternal and Child Health Program.

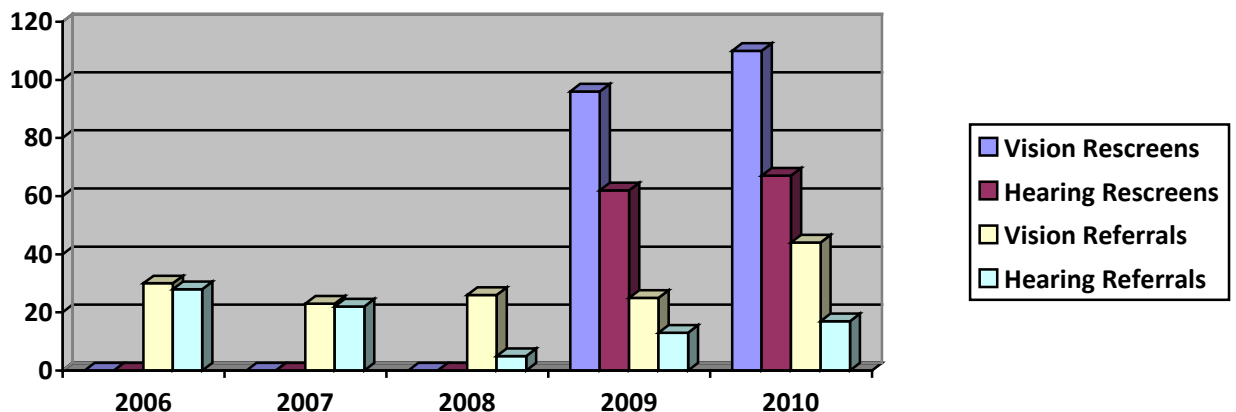
## SCHOOL BASED VISION AND HEARING PROGRAMS

The Public Health Nursing Division collaborates with 16 different La Crosse County Public and Parochial Schools to perform vision and hearing assessment on students' grades pre-school, Kindergarten, 1, 3, 5 and to offer any referrals. The Public Health Nursing staff trains volunteers from public and parochial schools to provide the initial screening of children. The Public Health Nursing staff and senior nursing students re-screen students that did not meet the requirements on the initial screening. After completing the re-screening, the Public Health Nursing staff conducts follow-up services by sending referrals to parents requesting the child to receive additional hearing or vision evaluations.

### VISION AND HEARING SCREENING



### RESCREENS AND REFERRALS



## TUBERCULOSIS PROGRAM

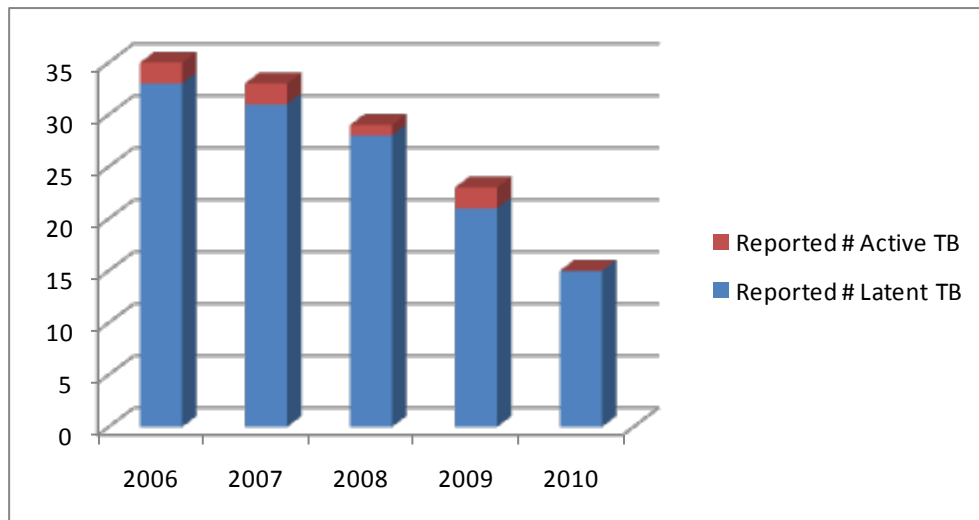
The Tuberculosis (TB) Program serves to educate, screen, monitor and treat for TB within the residential and medical communities of La Crosse County. The goal is to prevent, control and eliminate TB in Wisconsin. This program provides medication and case management services to prevent the conversion of latent TB (infection) to active TB (disease) or to treat active TB. Patients are referred to this program through nursing triage, TB clinics or by outside agencies.

This program also includes the TB Dispensary Program that allows clients to receive a doctor's visit, chest x-rays and certain blood testing after a positive TB skin test if they are underinsured or uninsured. The Department of Health Services, TB Division is the funding source for this program.

In 2010:

- Admitted and case managed 15 Mantoux positive clients to our TB Program.

### Number of Reported Latent (infection) and Active (disease) TB Cases Followed by Public Health Nurses



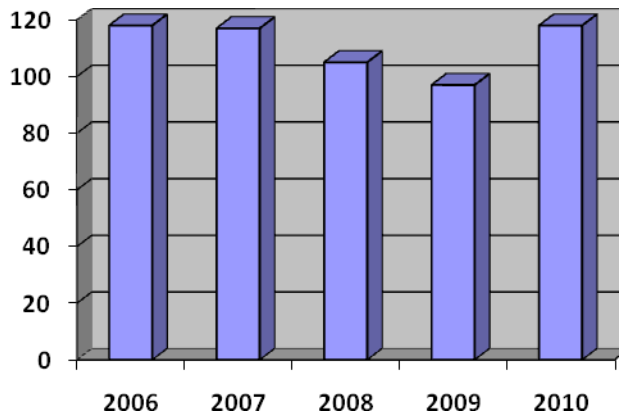
## WISCONSIN WELL WOMAN PROGRAM (WWWP)

The WWWP Program promotes the early detection of breast and cervical cancer. To be eligible for this program, women need to be 45-64 years of age; household income at or below 250% of the Federal Poverty Guidelines; and be uninsured or underinsured. Two women, who would not have otherwise been screened if it weren't for this program,

were diagnosed with breast cancer. WWWP staff transitioned these women to the Well Woman Medical Assistance Program which covered the costs of their cancer treatment.

Public Health Nurses attended the Hmong Women’s Health Fair and the Women’s Health Expo at Gundersen Lutheran in Onalaska to promote the WWWP to women in need. Public Health Nurses also attended a free mammography event at Franciscan Skemp to educate women on the importance of breast and cervical screenings.

### Number of Women Screened Through WWWP



### PUBLIC HEALTH NURSING - HOME AND CLINIC VISITS

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Public Health Nursing Visits	455	372	164	200	160
TB Nursing Visits	628	150	212	488	217
Home Foot Care	26	14	27	10	7
<b>Total Community/Home Visits</b>	<b>1,629</b>	<b>896</b>	<b>739</b>	<b>1,000</b>	<b>673</b>

## PUBLIC HEALTH NURSING - CLINIC VISITS

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Blood Pressure	284	173	91	88	64
Cholesterol/Diabetes Screening	87	97	89	118	58
Communicable Disease Follow-up	82	108	127	130	74
Immunizations	4,482	6,208	8,834	6,529	5,585
Pregnancy Testing	47	32	24	25	19
Tuberculosis Screening	1,380	1,370	1,614	1,343	1,345
Foot Care Visits	555	679	701	637	484
<b>Total Clinic Visits</b>	<b>7,067</b>	<b>8,979</b>	<b>11,976</b>	<b>9,391</b>	<b>8,043</b>

## EMPLOYEE HEALTH PROGRAM

The Employee Health Nurse performs new employee physicals, schedules and performs health-screening clinics, provides health and safety education in groups and with individuals, provides basic first-aid, various employee immunizations and employee counseling. The Employee Health Program also coordinates the following programs: Respiratory Protection, Bloodborne Pathogen Protection, Smoking Cessation, Corporate Fitness Centers and annual health fairs. Bloodborne pathogen training and Mantoux testing for those employees that require it were also provided. Other responsibilities of the Employee Health Program include serving on various committees such as Employee Health, Immunization Coalition and writing monthly employee health newsletters posted on Countyview. The funding sources for Employee Health Nurse Services include a contract with La Crosse County Personnel Department and private pay.

**Please see “Employee Wellness and Occupational Health 2010 Report of Services” for a complete listing of services provided – a condensed version is below:**

### **New Employee Physicals**

- All new County employees see the nurse for an employee physical. Physical includes body systems evaluation, immunizations, screenings and health education. Employee physicals help the employer’s hiring practice. Hiring an employee that just simply can’t physically handle a job position can cost hundreds to thousands of dollars in training expenses.

### **Health Screening Clinics**

- Screening clinics include blood pressure, blood sugar, body fat and blood cholesterol testing.

### **Health and Safety Education Classes/In-services**

- Employee Health Nurse provides health related classes to County programs as requested on topics such as bloodborne pathogens, tuberculosis, MRSA and first aid and safety.

### **Walk-in Service**

- County employees can come to the Health Department with questions or for minor injuries for evaluation and treatment as needed. Employees also email or call with health related questions for the Employee Health Nurse on a regular basis (15-25/month).

### **Employee Immunizations**

- Immunizations such as tetanus, hepatitis B and MMR are given on a regular basis to employees as needed or as requested. Flu shot clinics are held during the influenza season at various worksites in order to vaccinate as many employees as possible.

### **Employee Health Education & Counseling**

- Appointments are made by County employees to discuss their health concerns with the Employee Health Nurse. Health education and counseling often are not covered under insurance plans so many individuals go without it.

### **Respiratory Protection Program**

- The Employee Health Nurse coordinates this program for all County employees that are required to wear respiratory protection. Departments include Health, Human Services, Solid Waste, Sheriff's Department and Juvenile Detention.
- Included in this program is respiratory protection education and Fit testing for respirators used. This practice is required by OSHA for anyone using respirators.

### **Smoking Cessation Programming**

- Coordination of the smoking cessation reimbursement program for employees called "Commit to Quit."

### **Health Fair Coordination**

- Nurse works with the Health Education and Nutrition Divisions to coordinate health fairs for County employees approximately three times annually.

### **TB (Tuberculosis) Testing**

- Nurse coordinates the planning and implementation for annual TB skin testing for those employees that need this testing as recommended by the CDC and other government agencies due to the high risk nature of their job duties.

### **Health Risk Appraisals (HRA's)**

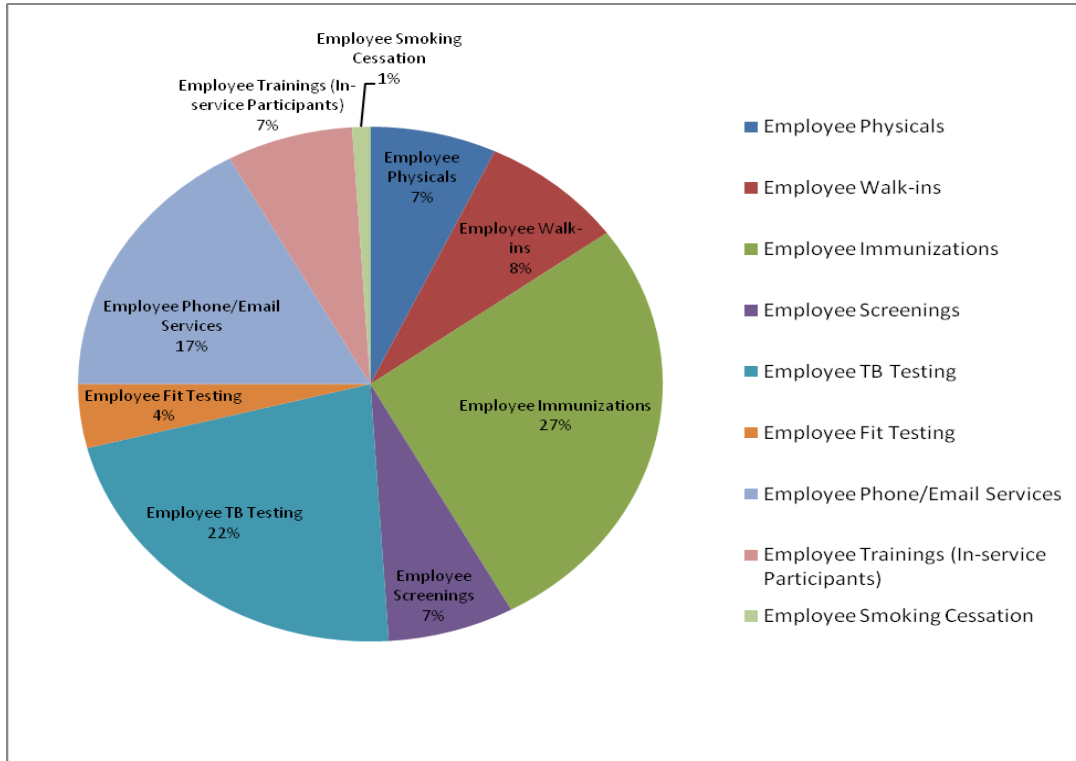
- Health promotion/health education program intended for employees to discover their strengths and weaknesses in regards to their health related lifestyle practices.

### **Employee Health Challenges**

- Health related challenges offered 2-3 times annually to County employees which focus on exercise and healthy eating. Nurse coordinates the health challenges

with the Health Education and Nutrition Divisions. Challenges last 4-8 weeks on average.

## EMPLOYEE HEALTH NURSING SERVICES



	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
<b>Employee Physicals</b>	184	219	283	196	161
<b>TB Screening</b>	592	414	510	644	527
<b>Immunizations</b>	578	621	563	668	639
<b>Miscellaneous Walk-in</b>	189	181	220	172	201
<b>Adult Health Screening</b>	221	283	240	205	168
<b>Fit Testing</b>	52	29	65	24	84
<b>Phone/Email Services</b>	NA	NA	NA	NA	408
<b>Trainings (In-service Participants)</b>	NA	NA	NA	NA	171
<b>Smoking Cessation</b>	NA	NA	NA	NA	7

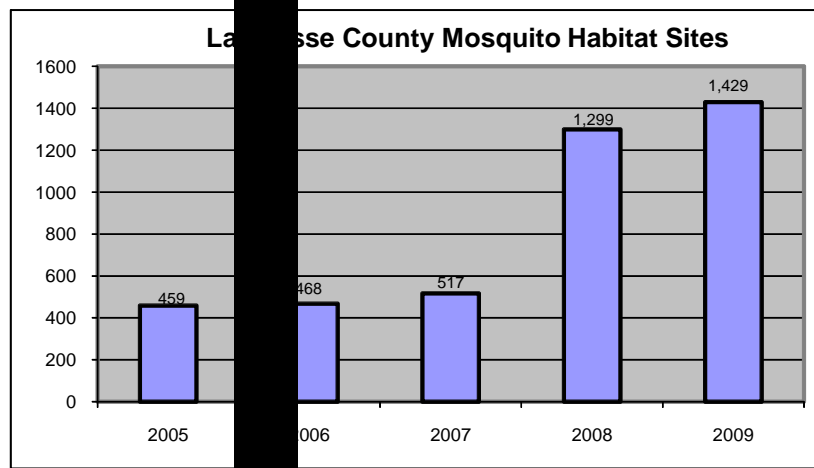
# VECTOR CONTROL DIVISION

The Vector Control Program has three main areas of activity:

1. Mosquito control for both disease carrying and pest species.
2. Animal control, which includes enforcement of laws dealing with the humane treatment of animals, animal licensing, owner's responsibility and the public health aspects of animal borne disease, rabies control and animal bite investigations and quarantine.
3. Tickborne disease education: tick-monitoring program for the tick *Ixodes scapularis* (the carrier of Lyme disease), ehrlichiosis, anaplasmosis and Powassan Virus.



## Mosquito Control Encephalitic Mosquito Control



### Habitat Management for Arbovirus Control

Artificial habitat for the mosquito vectors of La Crosse Viral Encephalitis and West Nile Virus which were removed or properly managed to control mosquito hatch.

### Sites Monitored

	2006	2007	2008	2009	2010
La Crosse County	468	517	1,299	1,429	1,697
Crawford County	340	394	418	406	552
Monroe County	342	367	361	491	579
Winona County	379	467	829	895	1,511
Vernon County	341	393	389	449	569
Polk County					19

	2006	2007	2008	2009	2010
La Fayette County					167
Ho-chunk					241
Trempealeau County					721
Dunn County					542
Pierce County					577
City of Winona					329
Orders Issued	947	641	511	236	396
Complaints investigated	325	544	327	248	332
Follow-up	231	303	244	151	266

### Oviposition Traps:

Oviposition traps are controlled artificial habitat for *Ochlerotatus triseriatus*. These traps are placed in endemic areas to monitor and reduce *Ochlerotatus triseriatus* population and viral activity. These traps are normally monitored and eggs harvested approximately every ten days.

### Oviposition Traps

	2006	2007	2008	2009	2010
Number of Traps	2,765	3,033	4,915	5,050	6,685
Total Traps Collected	26,267	27,297	31,101	31,455	32,791

### Educational Programs:

Educational programs concerning the habitat and control of the vectors of La Crosse Viral Encephalitis, West Nile Virus and Lyme disease as well as symptoms, treatment and precaution to reduce risk of these diseases were given in La Crosse, Crawford, Monroe, Winona and Vernon Counties.

### Educational Programs

	2006	2007	2008	2009	2010
Number of Programs	62	69	37	43	34

### Pest and Encephalitis Mosquito Control

#### Light Traps:

Light trap stations are used to determine numbers and species of adult mosquitoes in an area. In county parks, light traps are checked daily to determine need and affect of adulticides. In endemic areas, light traps are used to determine numbers of adult *Ochlerotatus triseriatus* as well as other problem species. Our data indicate that if 20 female pest mosquitoes are caught per night in a light trap, there is a pest problem.

U.W.L. trap data from years prior to this program document evenings with over 4,000 female pest mosquitoes collected per trap.

	2006	2007	2008	2009	2010
Number of Trap Sites	5	7	5	0	18
Total Samples Taken	66	102	55	0	424

**Bite Counts:**

Bite counts are used in areas without light traps to determine types and numbers of adult mosquitoes. Mosquitoes are allowed to land; the mosquito is then picked up by use of an aspirator.

	2006	2007	2008	2009	2010
Bite Counts	742	829	1,026	1,513	1,472

**Wetlands:**

Wetland sites are monitored on a weekly basis (depending on weather conditions), to determine level of mosquito larval activity, species and need for control activities.

	2006	2007	2008	2009	2010
Wetland Sites	512	831	619	667	699

**Adult & Larval Control of Mosquitoes:**

Using collected data, sites are treated with adulticides and larvicide to reduce the mosquito population.

	2006	2007	2008	2009	2010
Adulticides Treatment	0	31	26	21	31
No. Sites Treated with Adulticides	0	39	33	51	67
Aquatic Treatment (excluding storm sewers)	367	446	519	479	324
Number of Sites Treated with Larvicide to Control Ochlerotatus triseriatus or Culex					
Species of Mosquitoes	2,731	2,944	2,982	2,863	3,217

**Ixodes scapularis (Deer Tick) Monitoring**



	2006	2007	2008	2009	2010
Sites Monitored	322	229	195	178	536

**Animal Control Activities**

	2006	2007	2008	2009	2010
Animal Bites of Humans Investigated	247	230	220	214	426
Stray Animals Collected – Total	2,132	1,896	1,881	1,727	2,041
City of La Crosse	1,125	938	1,017	901	1,032
La Crosse County outside of City	1,007	958	864	826	1,009

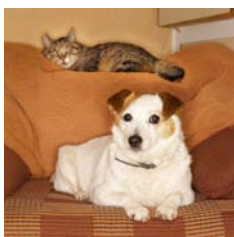
	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Animal Complaints Investigated – Total	1,787	2,154	1,894	2,310	2,749
City of La Crosse	1,223	1,531	1,272	1,673	1,869
La Crosse County outside of City	564	628	622	637	880
Specimens sent to State Lab for Rabies Analysis	37	54	67	47	42
Rabies Quarantines Ordered	226	222	237	201	251

### **Educational Programs**

Programs entitled, “Humane Treatment of Animals,” “Animal Rights and Responsibilities,” and “Animal Health Concerns and Their Importance to the Community,” were presented to local schools and civic groups.

	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Number of Programs	409	359	213	186	214

## **ANIMAL LICENSING**



	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
License Action (Persons ordered to properly license animals)	2,167	2,321	2,907	2,875	3,307

### **Orders Issued**

Orders are issued regarding humane treatment of animals, animal responsibility laws, commercial animal establishment standards, animal health regulations and the rabies control program, including animal bite follow-up, quarantine and testing.

	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Orders issued	7,761	7,115	7,885	8,170	8,445
	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Citations issued – mailing program	1,042	870	758	967	1,038
Citations from day-to-day animal control program	146	176	133	144	494
<b>Total citations issued</b>	<b>1,188</b>	<b>1,266</b>	<b>891</b>	<b>1,111</b>	<b>1,532</b>

# HEALTH DEPARTMENT FINANCIAL COMPARISON

	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
COUNTY TAX LEVY	\$1,666,381	\$1,757,510	\$1,935,492	\$1,987,909	\$2,128,988
<b><u>Total Outside Revenue Sources</u></b>					
Health Administration	423,690	492,511	258,919	251,663	163,295
Environmental Health	393,681	415,806	454,160	475,940	480,115
Health Education	347,459	269,640	358,154	420,104	427,332
Home Care/Personal Care	656,123	631,445	535,366	578,763	534,817
Laboratory	139,535	142,141	142,000	136,325	135,468
Public Health	230,907	225,901	246,423	223,933	222,590
Nutritional Health	491,023	575,688	632,011	899,920	1,247,165
Vector Control	54,594	80,472	69,449	43,535	39,714
Animal Control	<u>89,918</u>	<u>92,653</u>	<u>92,016</u>	<u>107,809</u>	<u>105,923</u>
TOTAL OUTSIDE REVENUE	\$2,826,930	\$2,926,257	\$2,788,498	\$3,137,992	\$3,356,419
 TOTAL LEVY/OUTSIDE REVENUE	 <b>\$4,493,311</b>	 <b>\$4,683,767</b>	 <b>\$4,723,990</b>	 <b>\$5,125,901</b>	 <b>\$5,485,407</b>
<b><u>EXPENSES</u></b>					
Health Administration	(671,200)	(726,812)	(917,556)	(547,275)	(550,680)
Environmental Health	(532,260)	(526,655)	(595,178)	(630,753)	(644,030)
Health Education	(438,542)	(387,869)	(443,450)	(556,343)	(625,784)
Home Care/Personal Care	(780,488)	(814,310)	(737,988)	(809,518)	(787,749)
Laboratory	(286,205)	(244,418)	(235,133)	(264,649)	(258,369)
Public Health	(771,365)	(789,170)	(850,071)	(864,931)	(934,260)
Nutritional Health	(680,438)	(752,694)	(848,961)	(1,090,333)	(1,469,632)
Vector Control	(174,756)	(187,026)	(205,735)	(193,883)	(187,269)
Animal Control	<u>(90,087)</u>	<u>(89,273)</u>	<u>(92,475)</u>	<u>(101,780)</u>	<u>(99,454)</u>
TOTAL EXPENSES	<b>(\$4,425,340)</b>	<b>(\$4,518,227)</b>	<b>(\$4,926,547)</b>	<b>(\$5,059,466)</b>	<b>(\$5,557,226)</b>
 Income/(Loss)	 <b>\$67,971</b>	 <b>\$165,540</b>	 <b>(\$202,557)</b>	 <b>\$66,435</b>	 <b>(\$71,819)</b>
<b><u>OTHER FINANCING SOURCES(USES)</u></b>					
OPERATING TRANSFER IN (OUT)	<u>(4,400)</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<b>(\$4,400)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
 REVENUES OVER (UNDER) EXPENDITURES	 <b>\$63,571</b>	 <b>\$165,540</b>	 <b>(\$202,557) *</b>	 <b>\$66,435</b>	 <b>(\$71,819)</b>
 FUND BALANCE	 <b>\$900,289</b>	 <b>\$1,065,829</b>	 <b>\$863,272</b>	 <b>\$929,707</b>	 <b>\$857,888</b>

\* The funding for these expenditures came from the fund balance. In years prior to 2008 and 2010, objectives of objective-based contracts were met while allowing the Health Department to carry some of the contract revenues forward for use in future contract periods. Accounting method changes to performance-based contracting would not allow the carry forward of unexpended funds, requiring all previous objective-based fund reserves to be spent in 2008 and 2010. These expenditures were not funded through use of tax levy dollars. Note, figures for 2010 are unaudited.

2010 Fund Comparison: Outside Funding Sources vs. Expenditures

