

Board of Health August 13, 2025 4:00 PM

Health & Human Services Center Community Room 303 West Chapel Street Dodgeville, Wisconsin

Zoom

https://us02web.zoom.us/i/83246175888?pwd=SvdpezExUplx3omY5pi m4d5cEaDhpX.1 Meeting ID: 832 4617 5888 lowa County, Wisconsin



1	For information regarding access for the disabled, please call 608.935.0399 Any subject on this agenda may become an action item						
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1							
	Call to Order and Welcome						
2	Roll Call and Introductions						
3	Approve the agenda for this meeting						
4	Approval of the minutes: February 26, 2025 prior meeting						
5	Report from committee members and an opportunity for members of the audience to address the Committee. No action will be taken.						
6	Presentation: Environmental Health Program Update – Troy Moris, EH Program Coordinator						
7	Presentation: Healthy Iowa County website – Debbie Siegenthaler						
8	Public Health Program Updates: Communicable Disease: Tuberculosis, Measles, H5N1 (Avian Influenza) Public Health Vending Machine — PHVM dashboard - dispersal statistics Opioid Award: final report - Public Health Vending Machine Promotion & Support (October 15, 2024 — March 31, 2025) \$12,000 Opioid Award - Public Health Vending Machine Promotion & Support 2.0 (June 2025- May 2026) \$15,000 Administrative: Mandated Services Summary — revision; WPHA/WALHDAB Legislative Priorities Strategic Plan - update 2024 Year-end Budget Summary 2025 YTD Budget Report 2026 Budget						
9	Monthly report (programmatic stats)						
10	Next meeting date						
11	Adjournment						
ŀ	Posting Verified by: Debbie Siegenthaler, Director/Health Officer; Joan Davis, Chair Date: <u>8.6.2025</u> Initials: <u>DS</u>						



DRAFT MINUTES Board of Health

Wednesday, February 26, 2025 @ 4:00 PM Health & Human Services Building – Community Room 303 West Chapel Street Dodgeville, WI 53533

Iowa County Wisconsin

For information regarding zoom or access for the disabled, please call 935-0399 1 Meeting was called to order by Chairperson Joan Davis at 4:00 PM. Roll Call and Introductions: Committee members present: Joan Davis, Tom Howard, Gerald Galle, Dody Cockeram, Bruce Paull, and Sue Steudel. Others Present: Iowa County Health Department 2 Director Debbie Siegenthaler, John Meyers, Iowa County Board Chairman, Medical Advisor Dr. Peter Mullin, Leah Walrack, PHN, and Kelly Deterding, LTE PH Nurse. Attending via zoom: Andrea Larson Guests present Ruth Schriefer, Laura Blalock from the Family Resource Center Approve the agenda for this meeting: Stangel moved to approve the agenda for this February 26, 2025 3 meeting. Paull seconded the motion. Motion passed. Approval of the minutes from the November 20, 2024 prior meeting: Howard moved to approve the minutes of the November 20, 2024 meeting. Stangel seconded the motion. Motion passed. Paull 4 suggested that Iowa County Board of Health meeting minutes be posted on the county website in a more timely manner following the meeting. Director Siegenthaler agreed to send the draft minutes to the county clerk to be posted. Report from committee members and an opportunity for members of the audience to address the 5 Committee. No action will be taken. No reports/addresses. Board of Health Community Lay Member Re-appointment - Tom Howard. Director Siegenthaler explained that, by Wisconsin state statute, county Boards of Health shall include three community lay members. Procedurally, the board makes a motion to appoint a citizen lay member, votes on that motion, and sends that recommendation for action to the County Board which makes the appointment. Tom Howard agreed to serve as a lay member for another three-year term. This appointment would expire on March 23, 2028. Cockeram made a motion to recommend Howard for this appointment. Galle seconded the motion. Motion passed. Presentation: Friend of the Family Resource Center Award - Ruth Schriefer, Chair, and Laura Blalock, Director, Family Resource Center. Ruth Schriefer, Board of Directors Chairperson for the Iowa County Family Resource Center, stated that each year, the Center presents an award to a person or agency that excelled in promoting healthy families in Iowa County. She described a number of projects 7 and initiatives that the Health Department has collaborated with the Resource Center on. Laura Blalock, the Center's Director presented this year's award (plaque) to the Iowa County Health Department "For your ongoing collaborations, contributions, and support toward our mission of offering innovative programs and resources that capitalize on strengths, support growth, and promote healthy families in Iowa County". Leah, Debbie and Kelly accepted the award and thanked them very much. Presentation: 2024 Annual Report of the Iowa County Health Department – approval: Director Siegenthaler presented the Iowa County Health Department's 2024annual report to the Board. She emphasized several areas of the report regarding work done on communicable diseases, grant work, Healthy Iowa County Initiative, former PHN Geana Shemak's work on the website, the 2024 fiscal summary, social media use, the environmental water lab, and other areas. Stangel made a motion to accept the Health Department's 2024 report. Motion was seconded by Cockeram. Motion passed. Director Siegenthaler explained that this report would be submitted to the Wisconsin State Department of Health Services (per statutory requirement) and will be added to the county health department's website.

Presentation: COVID-19 Pandemic – A cumulative Report of the Iowa County Response – Kelly Deterding, LTE PHN: Kelly Deterding presented the Iowa County Cumulative Report of the Iowa County Response to the Pandemic. "The Iowa County Cumulative COVID-19 Pandemic Report has been compiled for the purpose of documenting the journey of the Iowa County Health Department from March of 2020 when the pandemic was declared to May 2023 when the declared public health emergency ended. The value of this report is meant to lie within the historical documentation of the pandemic as experienced at the local level including the organizational response, operational continuity and service delivery. Moving forward with hope, this report will also include the lessons learned about best practices and future preparedness and resilience".

Kelly described the components of the report, various metrics concerning the spread of the disease and the Health Department's response and including the Dodgeville Police Department's Pandemic After Action Report. Deterding stated that the local government archivist at the State Historical Society was very receptive to receiving this report for its historical relevance.

The report will be shared with partners and the County Board.

Public Health Program Updates:

Public Vending Machine – dispersal statistics: Director Siegenthaler presented an updated summary of products dispersed from the two vending machines (totaling 732 items in three months!).

Well Water Lab: Environmental Health Literacy Grant Activities – National Groundwater Awareness Week (March 9-15): Director Siegenthaler and Leah Walrack stated that the Health Department would be partnering with Lafayette County on nitrate testing as Lafayette County has a certified nitrate lab. The reason is that more nitrate testing will be required of businesses and the lab we currently use at UW Oshkosh will be challenged to meet the needs. Partnering locally is also a major advantage. Leah Walrack updated the Board on the recently received grant activities. This funding allows the Health Department to finance ten nitrate level tests to mark National Groundwater Awareness Week. Leah further informed the board that the standard recommendations for water testing was yearly for nitrate and bacteria testing and every five years for lead and arsenic testing. Leah informed the board that Jeremiah Yii, a toxicologist with the Bureau of Environmental and Occupational Health at the State Department of Health Services would give a public presentation on PFAs on March 12 at 6:00 pm at the Health and Human Services Building, Community Room.

Communicable Disease: respiratory disease (covid, influenza, pertussis, measles, TB), H5N1 (Avian Influenza): Director Siegenthaler stated that Wisconsin cases of influenza and pertussis have peaked for this season and that Iowa county has had six cases of pertussis (which she characterized as a lot for this small county). She explained that Wisconsin is now formally enrolled in a national milk testing program (for H5N1 surveillance), and that nationwide, wastewater surveillance continues (including at a number of sites throughout Wisconsin).

Administrative:

2024 Year-end Budget Summary (tentative): Director Siegenthaler provided the Health Department's 2024 Financial Summary to the Board. Highlights included a levy request of \$352,568; and that the actual tentative 2024 levy request of \$333,763 is \$18,805 to the good. She attributes the good financial shape of the Health Department was largely due to the several competitive grants the Health Department was successful in securing.

Mandated Services Summary: Director Siegenthaler included the Health Department's Schedule of 2025 Services/Programs for the Board. This review provided a summary of those services/programs that are statutorily mandated, the FTE burden involved with each of them, the funding source, and the consequence of not providing them. In summary, a Health Department workforce of 14 FTE staff would be necessary to accomplish/implement mandated services in Iowa County, although the Iowa County Health Department currently has only 4.2 FTE.

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11	Monthly Report (programmatic stats): Health Department 2025 stats through January were previously distributed to Board members.
12	Next Meeting Date: The next meeting of the Iowa County Board of Health is scheduled for Wednesday, May 14, 2025 at 4:00 PM.
13	Adjournment: Galle made a motion to adjourn the meeting. Cockeram seconded the motion. The meeting was adjourned at 5:30 pm.

Minutes submitted by Tom Howard, Iowa County Board of Health Secretary



Iowa County Health Department

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Fax: (608) 937-0501

https://www.iowacounty.org/departments/HealthDepartment

Board of Health Update

August 2025

Launch of the Iowa County Public Health Vending Machine Utilization Dashboard!

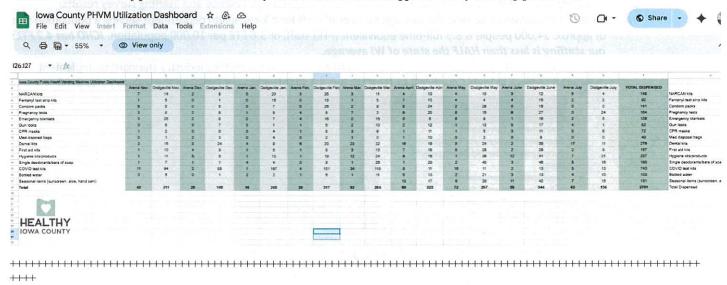
This tool provides **monthly data** on the distribution of health and safety supplies through the public health vending machines, categorized by **item type** and **location**. We hope this dashboard helps increase transparency, inform planning, and highlight the impact of this public health initiative.

You can access the dashboard two ways:

- On the Iowa County Health Department website under the *Public Health Vending Machine* tab: https://www.iowacounty.org/departments/HealthDepartment/PublicHealthVendingMachines
- Or via the Healthy Iowa County website under Data Sources: https://healthyiowacounty.org/data-sources/

We invite you to explore the dashboard, share it within your networks, and use it to support ongoing conversations about community health needs and resource access.

Thanks to our dozens of partners and community members who donate supplies, money and help promote it!



Stay up to date info on what the Health Dept is up to ...

- Follow us on <u>Facebook</u>
- Check out Website of Iowa County Health Department
- Check out lots of cool stuff, including our <u>Community Events Calendar</u> our <u>Iowa County Resource</u> <u>Page</u> (and much more) at <u>www.healthyiowacounty.org</u>
- And... tune into D99.3 for *Wellness Wednesdays* (the first Wed of the month) a new chance to let you know what we are up to!!

This article is worth the read --

It's not just about measles

By now, you've seen the news: after being declared eliminated in the U.S. in 2000, measles cases have reached record highs and already claimed four

Administrative Updates:

Staffing Announcement

- · Resignation of Leah Walrack, PHN
- Grants/funding opportunities: without adequate staff, we have to pass on these
 - o Environmental Health Data Grant (DHS) \$15,000
 - o Lead Pipe Assessment in Daycares (DHS) \$1200 per daycare
 - o RICE 4.0 (Immunization Outreach) (DHS) \$40,000 (we applied successfully for RICE 3 previous times)
 - o Maternal and Child Health Innovations Grant (DHS) up to \$100,000
 - o Unable to host UW Madison Nursing student in the fall

2024 Year-end Budget Summary (separate handout)

2025 1st Qrtr Budget Report (separate handout)

2026 Budget – directive to cut 3% to 2025 levy request

Mandated Services Summary – update

See attachment in meeting packet assembled to outline mandated services of local health departments

Statewide Financing and Staffing Survey Results

Local Health Depts are statutorily required to carry out the foundational capabilities/areas noted in this document. In 2022, a large data collection effort began across WI to assess/analyze current capacity and gaps across local health departments. Results for Iowa County Health Department are included in the summary on the table below.

There are two important statistics from these DPH Local Health Department Finance and Staffing survey results:

- Based on responses statewide, the average number of staff for a local health department serving a population size
 of approx. 24,000 people is 8.5 full-time equivalent (FTE) staff, or 3.6 FTE per 10,000 population. ICHD has 4.2 FTE;
 our staffing is less than HALF the state of WI average.
- Based on our specific ICHD survey results, the recommended optimal staffing industry standard to implement mandated services in Iowa County = 14 FTE. ICHD has 4.2 FTE, less than a THIRD of the industry standard.

1.30 1.07	Foundational Capabilities	FTE Expected	FPHS FTE Needed
Community Partnership Development 0.70 0.30	Assessment & Surveillance	1.40	0.84
Equity	Emergency Preparedness & Response	1.30	1.07
Organizational Competencies 2.20 1.67 Policy Development & Support 0.50 0.30 Accountability & Performance Management 0.20 0.06 Communications 0.70 0.21 Foundational Areas FTE Expected FPHS FTE Needed Chronic Disease & Injury Prevention 1.70 1.57 Communicable Disease Control 1.40 0.08 Environmental Public Health 2.50 2.08 Maternal, Child, & Family Health 0.90 0.66 Access to & Linkage with Clinical Care 0.20 0.06 6.70 0.06 0.06	Community Partnership Development	0.70	0.30
Policy Development & Support 0.50 0.30	Equity	0.40	0.31
Accountability & Performance Management Communications 0.20 0.06 0.70 0.21 7.40 Foundational Areas FTE Expected FPHS FTE Neededd Chronic Disease & Injury Prevention Communicable Disease Control Environmental Public Health Access to & Linkage with Clinical Care 0.20 0.06 6.70	Organizational Competencies	2.20	1.67
0.70 0.21	Policy Development & Support	0.50	0.30
Foundational Areas FTE Expected Needed Chronic Disease & Injury Prevention Communicable Disease Control Environmental Public Health Maternal, Child, & Family Health Access to & Linkage with Clinical Care 7.40 FPHS FTE Needed 1.70 1.70 1.57 2.08 0.08 Environmental Public Health 0.90 0.66 0.20 0.06 6.70	Accountability & Performance Management	0.20	0.06
Foundational Areas FTE Expected Needed Chronic Disease & Injury Prevention Communicable Disease Control Environmental Public Health Maternal, Child, & Family Health Access to & Linkage with Clinical Care FPHS FTE Expected FPHS FTE Needed 1.70 1.57 2.08 0.08 0.09 0.66 6.70	Communications	0.70	0.21
Needed Chronic Disease & Injury Prevention 1.70 1.57 1.57 Communicable Disease Control 1.40 0.08 Environmental Public Health 2.50 2.08 Maternal, Child, & Family Health 0.90 0.66 Access to & Linkage with Clinical Care 0.20 0.06 6.70 Communication Communication		7.40	
Communicable Disease Control 1.40 0.08 Environmental Public Health 2.50 2.08 Maternal, Child, & Family Health 0.90 0.66 Access to & Linkage with Clinical Care 0.20 0.06 6.70 0.06 0.06	Foundational Areas	FTE Expected	FPHS FTE Needed
Environmental Public Health 2.50 2.08 Maternal, Child, & Family Health 0.90 0.66 Access to & Linkage with Clinical Care 0.20 0.06 6.70	Chronic Disease & Injury Prevention	1.70	1.57
Maternal, Child, & Family Health 0.90 0.66 Access to & Linkage with Clinical Care 0.20 0.06 6.70 0.06 0.06 0.06	Communicable Disease Control	1.40	0.08
Access to & Linkage with Clinical Care 0.20 0.06 6.70	Environmental Public Health	2.50	2.08
6.70	Maternal, Child, & Family Health	0.90	0.66
		0.20	0.06
14.10 9.21	Access to & Linkage with Clinical Care		
	Access to & Linkage with Clinical Care	6.70	

There is insufficient (virtually nonexistent) state GPR funding to local health departments for the provision of mandated services under S.251.05(2) and 251.05(3).

- Wisconsin is tied for **last** in the U.S. for state GPR dedicated to public health per person. <u>Explore Public Health Funding</u> in Wisconsin | AHR https://www.americashealthrankings.org/explore/measures/PH funding/WI
- Currently, dedicated state funding for mandated services includes only a \$500,000 annual appropriation for communicable disease control and prevention under S.252.185 for dispersal among 84 local health departments across the entire state.
 - Iowa County HD receives \$3,600 (.005% of revenues)
- Local property tax revenue and federal revenue are the largest sources of funding for local health departments.
 - Iowa County HD: 45% of revenue is federal funding and 48% is tax levy

- Given the heavy reliance on federal grants, cuts to federal funding would have devastating impacts on the public health workforce in local communities and the health and well-being of residents.
- A consistent, reliable funding source to deliver core, mandated public health services as required by state law is critical to ensure the health and safety of Wisconsinites.
- Without funding for mandated services... 1) which mandated services should be cut? 2) statutes would need to change to reflect the cuts to mandated services 3) are we prepared for the health care costs down the road because we didn't invest in prevention.

Application for Iowa County Opioid Settlement Funds

Iowa County Health Department April 30, 2025, amended 6.26.25

Requesting Opioid Settlement funds for three specific aims: 1) Purchase harm reduction items to place in the PHVM for distribution including dental hygiene kits and reorder the resource magnets. The resource magnets include a list of important local resources, phone numbers for emergency mental health, suicide services, etc. Each item dispensed in the PHVM includes this resource magnet. Hundreds of other harm reduction items continue to be secured from community partners. 2) Education: we seek to partner with Sheriff's Dept, local law enforcement, EMS, local schools, Unified and the Suicide Coalition to invite Tony Hoffman or KodyGreen to speak to the community. Tony was a popular draw several years ago with over 1500 community members in attendance. Both options are renowned motivational speakers for substance abuse prevention and mental wellness.

3) Promotion Campaign 2.0. We seek funds to continue a promotion campaign to promote the resources available in our community for mental health and wellness. Promotion will include a multi-layer campaign to promote the motivational speaker event, the PH vending machines, and general awareness and connection to resources, including promotion of the Healthy Iowa County website, community asset map and community calendar. Promotion layers include advertising with billboards, radio and newspaper ads and a weekly radio spot across Iowa County.

Note: The vending machines were purchased with awarded grant funds from DHS. Narcan and Fentanyl test strips are supplies we secure via the DHS program. However, we seek local Opioid Settlement funds because the DHS Grant funds that accompany the PHVM do not allow other harm reduction items to be purchased, nor does it allow for printing, promotional and/or advertising.

Items for Dispensing		
zioni zione	Dental kits (toothbrushes, mini toothpaste)	\$250
	Resource Magnets - Advantage Printing, Dodgeville; 1000 magnets = \$987	\$987
		\$1,237
Education		
	Community speaker fee and travel expenses (quoted per Tony Hoffman) 2 presentations	\$9,200
		\$6,200
		\$6,200
Advertising & Promotion		
	Radio spots (paid radio spot on D99.3 (approx. \$125 each, run 8 times) = \$1000	\$1,000
	Newspapers (paid ads in 2 IC newspapers, (each ad \$350 run 2 times each) = \$1400	\$1,400
	Billboard 6 locations in IC, (each billboard \$575 plus \$400 service fee = \$3850	\$3,850
	Social Media boosting	\$400
	Weekly Radio Spot on D99.3 Live Talks once a month for \$75 x 12 = \$900	\$900
	Healthy Iowa County Website and community calendar renewals	\$750
		\$8,300
		\$7550
		\$14,987
	TOTAL	\$14,507

Award is \$15,000

Final Report: Iowa County Opioid Settlement Fund Award – Iowa County Health Department

PH Vending Machine Promotion and Support

Date of Report: April 7, 2025

Public Health Vending Machine Promotion & Support -- Iowa Co Health Department

Awarded funds for three specific aims:

- 1) Promotion of the new PHVMs located at the Health and Human Service building in Dodgeville and the Village Hall in Arena. Promotion includes advertising (billboards, radio and newspaper ads, social media ads) across lowa County.
- 2) Purchase harm reduction items to place in the PHVM for distribution including CPR mask barrier kits and medication disposal bags. Hundreds of other harm reduction items were secured from community partners.
- 3) Other costs with PHVM to include resource magnets which will be designed to include a list of important local resources such as phone numbers for emergency mental health, suicide, Unified, social services, etc. Each item dispensed in the PHVM will include this resource magnet.

Note: The vending machines were purchased with awarded grant funds from DHS. Narcan and Fentanyl test strips were purchased with the DHS grant as allowable expenses. We sought local Opioid Settlement funds because the DHS Grant funds that accompany the PHVM do not allow other harm reduction items to be purchased, nor does it allow for printing, promotional and/or advertising costs.

The PHVM initiative has a broad group of partners and stakeholders contributing in-kind time and supplies or items to the program and we feel many, if not all, will continue their commitment. These partners include: Iowa County Sheriff's Department, Iowa County Drug Treatment Court, Dodgeville Mayor, Unified Community Services, Iowa County Social Services, Dodgeville EMS, Upland Hills Health, UW Extension, Dodgeville Dental, SWCAP Opportunity House, Dodgeville PD, SWCAP Care Coordination Network, Mineral Point Family Dentistry, Iowa County Veteran's Office, Neighborhood Health Partners, Wisconsin Department of Health Services, Iowa County Administrator, County Board Representative/Opioid Task Force, HHS Committee, Board of Health. The Iowa County Health Department plans to continue enrollment in the State DHS Narcan Direct Program and the Fentanyl Test Program to supply the units with these items. We will apply for funding to purchase additional PHVMs to place in additional locations in Iowa County if there is the opportunity as well as community support.

Funds awarded \$ TOTAL: \$12,000

Timeline: October 15, 2024 - March 31, 2025

Summary of Funds Expended

Harm Reduction Items for Dispensing: \$1,904.74 Total Medication disposal bags = \$859.77 CPR mask barrier = \$149.97 Resource Magnets = \$895

Educational Advertising: \$9,978.81 Total – detail below Radio spots = \$ 1,000 Newspapers = \$ 1,185 Billboard = \$6,578 Social Media Ad Boosting = \$456.05 Website =\$ 759.76

GRAND TOTAL: \$11,883.55

Final Report: Iowa County Opioid Settlement Fund Award – Iowa County Health Department

PH Vending Machine Promotion and Support

Date of Report: April 7, 2025

Project Goal/Objectives:

Goal: To provide easy access to essential, lifesaving and chronic disease prevention supplies such as naloxone kits, fentanyl test strips, pregnancy tests, condoms, CPR masks, first aid kits, gun locks, medication disposal bags, and informational resources to individuals who face barriers to accessing traditional services.

Objectives:

- 1) Increase access to harm reduction supplies for individuals with substance use disorder.
- 2) Prevent opioid overdose deaths by distributing naloxone kits and offering overdose prevention education.
- 3) Promote safer sexual practices and reduce the risk of sexually transmitted infections by providing condoms and educational materials.
- 4) Connect individuals with support services, including addiction treatment, healthcare, and social support, through referrals and informational resources available in the vending machines.

1) PHVM distribution statistics

	Arena Nov.	Dodgeville Nov.	Arena Dec.	Dodgeville Dec.	Arena Jan.	Dodgeville Jan.	Arena Feb.	Dodgeville Feb	Arena Mar.	Dodgeville Mar.	Arena April	Dodgeville April	TOTAL DISPENSED
NARCAN	7	14	2	8	0	20	3	25	3	11	0	0	93
Fentanyl test strips	1	5	0	1	0	15	0	13	1	5	0	0	41
Condoms	6	8	0	5	0	7	0	26	2	9	0	0	63
Pregnancy tests	3	8	2	6	1	9	4	9	7	3	0	0	52
Emergency blankets	3	25	2	8	2	7	4	16	0	16	0	0	83
Gun locks	0	6	0	7	0	1	1	5	2	10	0	0	32
CPR masks	1	2	0	6	0	4	1	8	3	9	0	0	34
Med disposal bags	0	1	2	3	0	4	0	2	1	0	0	0	13
Dental kits	3	15	8	24	4	9	6	20	23	32	0	0	144
First aid kits	1	10	4	8	1	6	1	8	3	13	0	0	55
Hygiene kits	3	11	6	5	1	13	1	19	12	24	0	0	95
Deodorants/soaps	1	7	1	1	4	4	0	9	1	26	0	0	54
COVID test kits	11	94	2	85	1	167	4	151	34	115	0	0	664
Bottled water	0	5	0	1	2	2	1	6	1	11	0	0	29
Total	40	211	29	168	16	268	26	317	93	284	0	0	1452

2) Opioid Overdose Deaths

Our county data is suppressed due to low numbers

Provisional County Drug Overdose Deaths

https://www.dhs.wisconsin.gov/aoda/drug-overdose-deaths.htm (drug overdose deaths)

https://www.dhs.wisconsin.gov/opioids/deaths-county.htm (opioid deaths by county)

https://www.dhs.wisconsin.gov/opioids/hospitalizations-county.htm (hospitalizations)

https://www.dhs.wisconsin.gov/opioids/data-reports-studies.htm

3) STI stats

ICHD Annual Report (pages 10-11) lowa County Health Department 2024 Annual Report

Sexually Transmitted Disease	2022	2023	2024
Chlamydia	29	55	33
Gonorrhea	3	7	0
Syphilis	1	3	1

Final Report: Iowa County Opioid Settlement Fund Award – Iowa County Health Department PH Vending Machine Promotion and Support

Date of Report: April 7, 2025

4) Connection to services

Billboards, Radio and newspaper Ads Summary

Radio spots (paid radio spots on D99.3 local station and station 100.9 out of Richland Center which was recommended as another station Arena individuals tune into (approx. \$125 each, run 8 times) = **\$1000**

Newspapers (paid ads in Chronicle and Democrat and Arena Home News (\$750 to Dodgeville Chronicle/Democrat & \$440 to Arena News) = **\$1185**

Billboard 7 different locations in Iowa Co, including billboards in Barneveld, Dodgeville, Mineral Point, Cobb and Spring Green = **\$6,578**

Social Media Ad Boosting on Facebook regarding the vending machines and Healthy Iowa County resource page = **\$435.63**

Website = \$759.76

Promotion Via

Healthy Iowa County https://healthyiowacounty.org/



Healthy IC website Engagement Statistics

Number of users engaging with the Healthy Iowa County website since site went live March 2024	1373
Number of visit sessions to the Healthy Iowa County website since site went live March 2024	2682
Number of events submitted to the Community Calendar since went live March 2024	219

Analytics Report April 1, 2025

Final Report: Iowa County Opioid Settlement Fund Award – Iowa County Health Department

PH Vending Machine Promotion and Support

Date of Report: April 7, 2025

Key assets of the Healthy IC website:

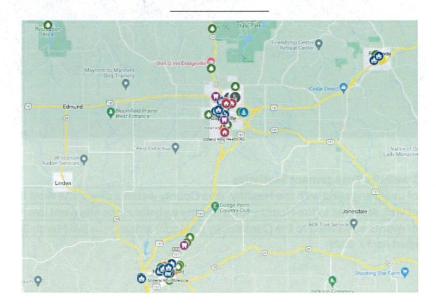
Iowa County Resources - Welcome to Healthy Iowa County



Community Assets - Welcome to Healthy Iowa County

Asset Map

Welcome to the asset map page. Click the map below to go to our interactive map for the many resources we have available in lowa County. Enjoy!



Final Report: Iowa County Opioid Settlement Fund Award – Iowa County Health Department PH Vending Machine Promotion and Support

Date of Report: April 7, 2025

Community Events Calendar - Welcome to Healthy Iowa County

Anyone can submit their event for inclusion on the <u>COMMUNITY CALENDAR</u> ... its super easy, just click "submit event", answer a few questions, upload a flyer – super simple. Help us make this a one-stop-shop for all the cool things happening in our community!



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Final Report
April 7, 2025
Prepared/submitted by DSiegenthaler

Iowa County Health Department (ICHD)

SCHEDULE OF 2025 SERVICES/PROGRAMS

PREPARED BY: Debbie Siegenthaler, Director/Health Officer (2.28.2025)

DEPARTMENT FUNCTION:

Wisconsin Local Public Health Department: Requirements

Sources: https://www.dhs.wisconsin.gov/lh-depts/requirement-updates.htm; Wisconsin DHS 140 Review Discussion Question Review Prep 3.31.21

Updates to <u>Wis. Admin. Code ch. DHS 140</u> went into effect 1.1.19. <u>Wis. Admin. Code ch. DHS 140</u> specifies the required services for Levels I, II, and III local health departments (LHDs). This chapter was created in 1998, and the 2019 update aligns local requirements with changes in public health practice since that time, as well as with the latest innovations modernizing Wisconsin's public health system.

The Iowa County Health Department is a Level II Health Dept. The requirement for Level II LHDs is to provide Level II services in addition to Level I.

- o <u>Level I LHD requirements</u> focus on the public health core functions, the 10 Essential Public Health Services, national public health performance standards, and the Foundational Public Health Services model.
 - Service requirements of local health departments listed in <u>Wis. Stat. § 251.05(2)a</u> and <u>Wis. Admin. Code § DHS 140.05(1)(b)1.</u> <u>Wis. Admin. Code § DHS 140.05(1)(b)3.</u> Several additional statutes and administrative rule direct LHD services and/or health officer authority.
 - The Level I requirements align with public health core functions, the 10 Essential Public Health Services, national public health performance standards, and the Foundational Public Health Services model.
- Level II LHD requirements focus on organizational performance and capacity-building.
 - A Level II health department must provide services in the following **foundational areas**: communicable disease (including immunizations); chronic disease and injury prevention; environmental public health; maternal child family health; and access to, linkage with, clinical health care.
 - A Level II health department must provide services in the following foundational capabilities: assessment and surveillance; community partnership development; equity; organizational competencies; policy development and support; accountability and performance management; emergency preparedness and response; communications. Foundational Public Health Services model. FPHS-Factsheet-2022.pdf

Foundational Public Health Services



A Level II health department must assure workforce development by doing the following: maintaining a workforce development plan, including core public health
competencies in job descriptions, and assessing staff core public health competencies every two years. Performance reviews and development plans are also
required unless prohibited by the local governing body.

- A Level II health department must engage in quality improvement efforts, including training/resources to staff and governing body.
- A Level II health department must engage in performance management by setting performance measures for the mission, vision, values, and goals of the agency.
- A Level II health department must embed public health nursing services throughout.

This Programs/Services Summary is organized by each of the **5 Foundational Areas** and the **8 Foundational Capabilities**.

This Frograms/Col	rvices Summary is organized by each of the 5 Foundational Areas and	the or oanaa	litionat Gapabitities.						
PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE				
COMMUNICABLE D									
ASSESSMENT & SURVEILLANCE, COMMUNICATIONS, COMMUNITY PARTNERSHIP, ORGANIZATIONAL COMPETENCIES, ACCOUNTABILITY									
	Communicable Disease								
(PH Essential Servi		mentaci sontrazzano del colo contrato del trono							
Develop public health policies and plans; Protect people from health problems and health hazards; Enforce public health laws and regulations; Engage the community to identify and solve									
health problems	252.03 Duties of local health officers.	.5	Wisconsin Stat. ch. 252	2% State	Required per statute and				
	1) Every local health officer, upon the appearance of any	.5	Communicable	Grant \$3600	administrative rule.				
	communicable disease in his or her territory, shall immediately	FTE	Diseases	Οιαπι φοσσσ	dariiiiidaative rate.				
	investigate all the circumstances and make a full report to the	percentage	Statue 252.03, 252.05,	98% Tax Levy	If the local authorities fail				
	appropriate governing body and also to the department. The local	over all	252.06, 252.12 (7)	0070700000	to enforce the				
	health officer shall promptly take all measures necessary to prevent,	positions	Wisconsin Legislature:		communicable				
	suppress and control communicable diseases, and shall report to	(.4 of 4.2 FTE)	DHS 140.04(1)		disease statutes and				
	the appropriate governing body the progress of the communicable	112)			rules, the department				
	diseases and the measures used against them, as needed to keep				shall take charge, and				
	the appropriate governing body fully informed, or at such intervals as				expenses thus				
Communicable	the secretary may direct. The local health officer may inspect				incurred shall be paid				
Disease	schools and other public buildings within his or her jurisdiction as				by the county or				
Surveillance,	needed to determine whether the buildings are kept in a sanitary				municipality.				
Investigation and	condition.	100							
Case	2) Local health officers may do what is reasonable and necessary for				One outbreak such as				
Management	the prevention and suppression of disease; may forbid public				measles has an				
	gatherings when deemed necessary to control outbreaks or				enormous economic				
	epidemics and shall advise the department of measures taken. 2) j A local health officer may not issue a mandate to close any				and health care cost.				
	business in order to control an outbreak or epidemic of								
	communicable disease for longer than 30 days unless the	v.							
	governing body of the political subdivision in which the order is								
	intended to apply approves one extension of the order, not to								
	exceed 30 days. A mandate to close more than one business as								
	provided under this subsection may not distinguish between								
	essential and nonessential businesses. In this subsection,								
	"political subdivision" means a city, village, town, or county.								

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	 3) If the local authorities fail to enforce the communicable disease statutes and rules, the department shall take charge, and expenses thus incurred shall be paid by the county or municipality. 4) No person may interfere with the investigation under this chapter of any place or its occupants by local health officers or their assistants. 				
The various to sense to the contract of the co	 DHS 140.04(1) REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by conducting: (b) Communicable disease control. 1. Conduct activities required of local health departments under ch. DHS 144, relating to immunization of students. 2. Comply with the requirements of ch. DHS 145, relating to prevention, monitoring, conducting epidemiological investigations, and control of communicable diseases, including outbreaks. 3. Improve public recognition and awareness of communicable diseases and other illnesses of public health importance. 4. Provide or facilitate community-based initiatives to prevent communicable diseases. 				
	Program Description: Investigate all circumstances concerning appearance of any communicable disease in the jurisdiction of the local health department within 24-72 hours, promptly takes all measures to prevent, suppress and control the communicable disease and makes a full report to the department. Provide education to those involved as well as to medical providers and the community as needed. Works with local providers to increase testing and follow up. Outbreak investigation and management.				
Sexually Transmitted Infections	STIs are communicable diseases and defined under the statutes and Admin rules – see above Program Description: Conduct partner notification, referral and counseling services for individuals diagnosed with STI's, and works with medical clinics on STI follow up.	.03	Wisconsin Stat. ch. 252 Statue 252.11 Wisconsin Legislature: DHS 140.04(1)	100% Tax Levy	Required per statute and administrative rule. If the local authorities fail to enforce the communicable disease statutes and rules, the department shall take charge, and expenses thus

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
					incurred shall be paid by the county or municipality.
					Increase in morbidity and mortality r/t STI's, increase in # STIs, decrease in
					education to the community re diseases, decrease in knowledge.
	TB is a communicable disease and defined under the statutes and Admin rules – see above. Additional requirements under 252.07 re isolation and quarantine	.08	Statue 252.07 Wisconsin Legislature: DHS 140.04(1)	10% State TB Dispensary	Required per statute and administrative rule.
	(5) Upon report of any person under sub. (1m) or (1t), the local health officer shall at once investigate and make and enforce the necessary orders. If any person does not voluntarily comply with any order made by the local health officer with respect to that person, the local health officer or the department may order a			90% Tax Levy	If the local authorities fail to enforce communicable disease statutes and rules, the department shall take charge, and expenses thus
Tuberculosis (TB) Control Program	medical evaluation, directly observed therapy or home isolation of that person.			25	incurred shall be paid by the county or municipality.
Controcritogram	Program Description: assure identification and appropriate follow-up care of individuals who may be at higher than usual risk of contracting or spreading tuberculosis. In conjunction with the Wisconsin TB Program, ICHD shall provide anti-tuberculosis medication free of charge to persons with TB infection, suspect or confirmed disease or their household contacts. The ICHD works with the client's physician who prescribes the medication. Public Health Nurses provide health education and monitor the client's				Increase in morbidity and mortality and disease transmission. Increase in health care costs. Increase in health insurance costs. We provide over 100 TB tests/screenings each year to LTC facilities, group
	response to the medication. The ICHD also helps local agencies by providing TB Skin Tests to employees and first responders, an important surveillance activity.				homes, students for school entrance, EMS and other healthcare entities
Food and/or Waterborne	This also falls under the statutes and Admin rules – see above Shall investigate reportable food and waterborne diseases in a timely manner. Shall conduct investigation outbreaks to identify	.05	Wisconsin Stat. ch. 252 Communicable Diseases	100% Tax Levy	Required per statute and administrative rule.
Illness Surveillance and Investigation	source of exposure. Shall institute necessary control measures to prevent further spread of disease. Provides education to community agencies/organizations as needed.		Statue 252.03, 252.05, 252.06, 252.12 (7) Wisconsin Legislature: DHS 140.04(1)	-	If the local authorities fail to enforce communicable disease statutes and rules, the department shall take charge, and expenses thus

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
					incurred shall be paid by the county or municipality. One foodborne outbreak in a local restaurant has an enormous economic and health care cost.
Immunization Prod	fram				

Immunization Program

(PH Essential Services):

Protect people from health problems and health hazards; Enforce public health laws and regulations; Help people receive health services

	144.08 Responsibilities of local health departments.	.32	Statue <u>252.04 (2)</u> ,	10% State	Required per statute and
	Each local health department shall make available the		Wisconsin Legislature:	Grant	administrative rule.
	immunizations required under s. 252.04 (2), Stats., insofar as the		DHS 140.04(1)		
	vaccine is available without charge from the department under		Chapter DHS 144	10% MA &	Immediate – a decreased
	ch. DHS 146. Vaccines made available free from the department			Medicare	awareness of and access to
	under ch. <u>DHS 146</u> shall be administered without charge for the				affordable childhood and
	cost of the biologic. By November 15 of each year, each local			80% Tax	adult immunizations.
	health department shall report to the department statistical			Levy	Decrease community
1	information concerning the degree of compliance with s. <u>252.04</u> ,				linkage and coordination of
Immunization	Stats., of students within its service area. These reports shall be on				vaccination. Increase in
Program	a form prescribed by the department.				vaccine preventable
Flogialli	Program Description: Vaccine preventable disease prevention.				diseases and death.
	Maximize childhood immunization rates in the county to prevent		5		Increase in health care
	vaccine preventable disease, promote and provide adult and				costs.
	childhood vaccinations via state VFC/VFA programs (safety net),				
	promote childhood immunization tracking systems in healthcare				Vaccination rates are key to
	settings and assures that immunizations are a part of health				disease prevention and
	promotion services in healthcare settings, provides updated				suppression. Measles is a
	information to school nurses and clinics, established best				key example of the critical
	practices for vaccine administration, and provide counseling for				importance of vigilance in
	travel health. Coordinate and implement mass vaccination clinics.				this area. The HD is only
	Vaccine outreach, inventorying and required trainings.				resource for uninsured.
	COMMUNICABLE DISEASE Total FTE	.98			
	ESTIMATED 2025 COST =	\$115,829			

CHRONIC DISEASE AND INJURY PREVENTION

ASSESSMENT & SURVEILLANCE, EQUITY, COMMUNICATIONS, COMMUNITY PARTNERSHIP

Continuous Public Health Programs

(PH Essential Services):

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE				
Monitor health status and understand health issues facing the community; Give people information they need to make healthy choices; Develop public health policies and plans; Foster the									
understanding and p	understanding and promotion of social and economic conditions that support good health								
Injury Prevention	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by Other disease prevention. 1. Develop and implement interventions intended to reduce the incidence, prevalence or onset of chronic diseases or to prevent or ameliorate injuries that are the leading causes of disability and premature death in the local health department's jurisdiction, as identified in the community health assessment or the most recent state public health agenda. Program Description: Collaborator in Rural Safety Day, Falls Prevention Initiative, Backpack Event, Wellness Expo, Car Seat Safety, Narcan, PHVM	.04	DHS DHS 140.04(1)(c)1. Wisconsin Stat. ch. 255 Chronic Disease and Injuries	100% Tax Levy	Required per statute and administrative rule. Increase in injuries death; Investment in prevention saves future health care costs.				
Chronic Disease	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by Other disease prevention. 1. Develop and implement interventions intended to reduce the incidence, prevalence or onset of chronic diseases or to prevent or ameliorate injuries that are the leading causes of disability and premature death in the local health department's jurisdiction, as identified in the community health assessment or the most recent state public health agenda. 2. Link individuals to needed personal health services. 3. Identify and implement strategies to improve access to health services. Program Description: Blood Pressure screening, education	s.	DHS 140.04(1)(c)1. Wisconsin Stat. ch. 255 Chronic Disease and Injuries	100% Tax Levy	Required per statute and administrative rule. Increase in morbidity and mortality from diseases like diabetes, high blood pressure, heart disease, stroke; Investment in prevention saves future health care costs.				
Health Education and Promotion Events	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by conducting: Health promotion. 1. Develop and implement interventions, policies, and systems to promote practices that support positive public health outcomes and resilient communities.	.1	Wisconsin Legislature: DHS 140.04(1) DHS 140.04(1)(e) Wis. Stat. § 251.05(2)(a); Wis. Admin. Code § DHS 140.04(1)(c)	100% Tax Levy	Required per statute and administrative rule. Increase in preventable diseases and injuries. Community resources would not be utilized. Lower health literacy and awareness. Increased risk of diseases				

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	 Disseminate relevant, accurate information and evidence-informed prevention guidance to the public health system and community. Use a variety of accessible, transparent, and inclusive methods of communication to convey and to receive information from the public and stakeholders. Provide accurate, timely, and understandable information, recommendations, and instructions to the public during a disaster, outbreak, or emergency. Program Description: Education to community on health-related topics/concerns. Events: Rural Safety Day, Falls Prevention, Backpack Event, Wellness Expo, Car Seat Safety, Narcan, PHVM Disease and Injury Prevention [Wis. Stat. § 251.05(2)(a); Wis. Admin. Code § DHS 140.04(1)(c)] LHD develops and implements interventions intended to reduce the incidence, prevalence, or onset of chronic diseases, or to prevent or ameliorate injuries. [Wis. Admin. Code § DHS 140.04(1)(c)1.] 		SINIERES		and delayed preventative care.
	 Interventions shall align with community needs and the most recent state public health agenda. 				
PH Vending Machine	The PHVM Program is a program that meets requirements defined under the statutes and Admin rules above. Program Description: Distribution of Harm reduction items in collaboration with dozens of community partners (See language above in Health Education and Promotion).		Wisconsin Legislature: DHS 140.04(1) DHS 140.04(1)(e)	70% grant funds 30% donations	Investment in prevention saves future health care costs.
Narcan Direct	The Narcan Direct Program is a program that meets requirements defined under the statutes and Admin rules above. Program Description: Distribution of NARCAN and fentanyl test strips through the Department of Health Services. (See language above in Health Education and Promotion).		Wisconsin Legislature: DHS 140.04(1) DHS 140.04(1)(e)	100% grant funds	Potential increase in overdose death and injury.
	CHRONIC DISEASE AND INJURY PREVENTION Total FTE	.14			
	ESTIMATED 2025 COST =	\$16,547			

ACCESS TO CARE/LINKAGES W CLINICAL CARE

COMMUNITY PARTNERSHIP, EQUITY, COMMUNICATIONS

Continuous Public Health Programs (PH Essential Services):

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE				
	Help people receive health services; Assure access to primary health care for all; Monitor health status and understand health issues facing the community; Give people information they need to make healthy choices; Foster the understanding and promotion of social and economic conditions that support good health.								
Health Promotion, Health Education, Communication,	 Wis. Stat. § 251.05(2)(a); Wis. Admin. Code § DHS 140.04(1)(e) REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by conducting: Health promotion. 1. Develop and implement interventions, policies, and systems to promote practices that support positive public health outcomes and resilient communities. 2. Disseminate relevant, accurate information and evidence- informed prevention guidance to the public health system and community. 3. Use a variety of accessible, transparent, and inclusive methods of communication to convey and to receive information from the public and stakeholders. 4. Provide accurate, timely, and understandable information, recommendations, and instructions to the public during a disaster, outbreak, or emergency. Program Description: Social media, HD website, HIC website information dissemination, planning (billboards, press releases, email. Identifying, collecting, and sharing data. We participate in dozens of community coalitions (tobacco, homeless, family health, mental health, head start). We facilitate and coordinate the Community Health Needs Assessment and Community Health Improvement Plan. 	.11	Wisconsin Legislature: DHS 140.04(1) Wisconsin Legislature: DHS 140.04(1) DHS 140.04(1)(e) Wis. Stat. § 251.05(2)(a);	100% Tax Levy	Required per statute and administrative rule. Increase in morbidity and mortality from diseases like diabetes, high blood pressure, heart disease, stroke. Investment in prevention saves future health care costs. Increase in preventable diseases and injuries. Community resources would not be utilized.				
Community Needs Assessment (CHNA)/ Community Health Improvement Plan (CHIP)	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by conducting: (a) Surveillance and investigation. 1. Collect and analyze public health data to do all of the following: a. Identify health problems, environmental public health hazards, and social and economic risks that affect the public's health. b. Guide public health planning and decision-making at the local level.	.12	HPS 140.04 Statute 251.05 Wisconsin Legislature: DHS 140.04(1) (a)(g)	100% Tax Levy	Required per statute and administrative rule. Assessing the community needs is critical to determine which needs are priority so we can have a healthier community.				

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
,	c. Develop recommendations regarding public health policy, processes, programs, or interventions, including the community health improvement plan.				
	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by:				
	 (g) Policy and planning. 1. Coordinate planning and serve as a source of information and expertise in the development and implementation of policies affecting public health. 2. Foster and support community involvement and partnerships in development, adoption, and implementation of policies affecting public health, including engagement of diverse populations and consideration of adversely impacted populations. 3. Conduct a community health assessment resulting in a community health improvement plan at least every 5 years. 4. Develop a written community health improvement plan at least every 5 years, by assessing applicable data, developing measurable health objectives, and partnering with persons, agencies, and organizations to cultivate community ownership throughout the entire development and implementation of the plan. 5. Engage members of the community in assessment, 				
	 implementation, monitoring, evaluation, and modification of community health planning. 6. Promote land use planning and sustainable development activities to create positive health outcomes. 				
	Program Description: This is a required undertaking every five years to assess the community (CHNA) and identify community priorities. A Community Health Improvement Plan (CHIP) must be assembled to address the community priorities. The HD stewards and facilitates this process and Community Action Teams in each of the priority areas. Goals, objectives and strategies are defined for each CAT to implement (Community Health Improvement Plan). Healthy Iowa County is coordinated/facilitated by the HD (CATs, website, resource page, data sources, community calendar, asset map. We participate in several additional coalitions that align and support this work (ex: Family Resource Center).				

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
Support and Increase Access to Medical and Oral Health	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by Other disease prevention. 1. Develop and implement interventions intended to reduce the incidence, prevalence or onset of chronic diseases or to prevent or ameliorate injuries that are the leading causes of disability and premature death in the local health department's jurisdiction, as identified in the community health assessment or the most recent state public health agenda. 2. Link individuals to needed personal health services. 3. Identify and implement strategies to improve access to health services. Wis. Admin. Code § DHS 140.04(1)(c)3. LHD shall implement efforts to increase access to health care services for the jurisdiction. Program Description: Partnership with Community Connections Free Clinic to deliver immunization services and care coordination for TB and LTBI cases. Coordinate/host a clinic via Bridging Brighter Smiles Care Mobile for medical assistance, un/underinsured children. Implement referral system with ACCESS dental clinic. ACCESS TO CARE/LINKAGES W CLINICAL CARE Total FTE	.34	Statue 251.02 (2) (a) Wisconsin Stat. ch. 255 Chronic Disease and Injuries DHS 140.04(1)(c)1. Wis. Admin. Code § DHS 140.04(1)(c)3.	100% Tax Levy	Required per statute and administrative rule. People without access to care contribute to less healthier community. Increased economic burden to others. Working to solve/support our burdened health care and dental care systems contribute to a more vibrant and healthier community.
	ESTIMATED 2025 COST =	740, 185			

MATERNAL AND CHILD HEALTH

EQUITY, COMMUNICATIONS, COMMUNITY PARTNERSHIP

Maternal Child Health (MCH) Services:

(PH Essential Services):

Monitor health status and understand health issues facing the community; Help people receive health services; Engage the community to identify and solve health problems; Assure access to primary health care for all

primary neattir care	ioi all				
Maternal and	REQUIRED SERVICES. A local health department shall provide	.22	Wissensin Lagislatura	30% DHS	Required per statute and
Child Health	leadership for developing and maintaining the public health system within its jurisdiction by:		Wisconsin Legislature: DHS 140.04(1)	70% Tax Levy	administrative rule.
	2. Link individuals to needed personal health services. 3. Identify and implement strategies to improve access to health		Wisconsin Stat. ch. 253		Lack of connection to resources. Increase in
	services.		253.085 Outreach to		post-partum anxiety,
	Wis. Admin. Code § DHS 140.04(1)(c)3. LHD shall implement efforts to increase access to health care services for the jurisdiction.		low-income pregnant women.		depression, abuse and neglect. Higher incidence

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	253.085 Outreach to low-income pregnant women.				low birth weights, etc.
	(1) The department shall conduct an outreach program to make				Decreased health
	low-income pregnant women aware of the importance of early				education and awareness
	prenatal and infant health care and of the availability of				Increase in disparities.
	medical assistance benefits under subch. IV of ch. 49 and				
	other types of funding for prenatal and infant care, to refer				
	women to prenatal and infant care services in the community		1		
	and to make follow-up contacts with women referred to				
	prenatal and infant care services.		1		
	(2) In addition to the amounts appropriated under s. 20.435 (1) (ev),				
	the department shall distribute \$250,000 for each fiscal year				
	from moneys received under the maternal and child health				
	services block grant program, 42 USC 701 to 709, for the				
	outreach program under this section.				
	Program Description: Child & Family Health Promotion:				
	Postpartum follow-up, breastfeeding services, networking with				
	agencies on topic. Family Resource Center partnership.				
	Equity as our objective. Resource for Iowa County school nurses				
	and daycares.				
	MATERNAL AND CHILD HEALTH Total FTE	.22			
	ESTIMATED 2025 COST =	\$26,002			
NVIRONMENTA	HEALTH				
OLICY DEVELOR	MENT AND SUPPORT, COMMUNICATIONS, COMMUNITY PARTNERS	HIP, ORGANI	ZATIONAL COMPETENCIE	ES, ACCOUNTA	ABILITY AND PERFORMANCE
ANAGEMENT					
nvironmental H	ealth				
H Essential Ser					
	h laws and regulations; Monitor health status and understand health issues faci	ng the commu	nity; Give people information	they need to mak	e health choices; Enforce publi
ealth laws and regi			Table 1	T	T2
abies	95.21 Rabies control program details surveillance, education	.26	Wisconsin Legislature:	100% Tax	Required to per statute an
evention	about rabies prevention, follow-up on reported bites, and referral		95.21	Levy	administrative rule.
rogram	for treatment.		Statue 254.51 (4) (5) (6)		Increase in morbidity and
	Iowa County Ordinance		Statue 254.51 (4) (5) (6)		mortality relating to rabies
	275 Animal Pagulations and Treatment adf		Jawa Co Ordinanaa		

Iowa Co Ordinance

375 Animal Regulations and Treatment.pdf

375 Animal Regulations and Treatment.pdf

promulgated under sub. (3).

254.51 Powers and duties.

Details the local issuance of bite orders, quarantine, follow up, etc

(4) The local health department shall enforce rules that are

in humans.

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
,	 (5) The local board of health may adopt regulations and recommend enactment of ordinances that set forth requirements for animal-borne and vector-borne disease control to assure a safe level of sanitation, human health hazard control or health protection for the community, including the following: (a) The control of rats, stray animals, noise and rabies and other diseases. 				
Human Health Hazard Control	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: Human health hazard control. 1. Assist in the conduct of activities authorized under ss. 251.06 (3) (f) and 254.59, Stats. 2. Declare dilapidated, unsafe or unsanitary housing to be a human health hazard, when permitted under s. 254.593, Stats. 3. Identify public health hazards through laboratory testing, inspections, reporting, and investigation for the purpose of preventing further incidence of occupational disease, environmental disease, and human health hazard exposure. Investigation and enforcement of state laws which protect citizens from damage to human health and/or environmental hazards. [Wis. Stat. § 251.05(2)(a); Wis. Admin. Code § DHS 140.04(1)(f)] • LHD shall report and investigate occurrences of occupational disease, environmental disease, or exposure to a human health hazard. [Wis. Admin. Code § DHS 140.04(1)(f)1.] • Partnerships with other entities to control human health hazards within jurisdiction. • Participation, and provision of environmental health expertise, in the development of community plans. [Wis. Admin. Code § DHS 140.06(5)(a)] • Practices related to providing or arranging for the availability of services authorized under Wis. Stat. ch. 254, such as for toxic substances, indoor air quality, animal-borne or vectorborne disease, and human health hazards [Wis. Admin. Code § DHS 140.06(5)(b)]	.25	Wisconsin Stat. ch. 254 Wis. Stat. § 251.05(2)(a) Environmental Health Statue 254.59, 254.93 Wis. Admin. Code § DHS 140.04(1)(f)1. Wisconsin Legislature: DHS 140.04(1) Wis. Admin. Code § DHS 140.06(5)(a) Wis. Admin. Code § DHS 140.06(5)(b)	100% Tax Levy	Required to per statute and administrative rule. Increase in potential for diseases related to environmental hazards.

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
Water Quality/DATCAP Certified Well Water Lab,	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: 3. Identify public health hazards through laboratory testing, inspections, reporting, and investigation for the purpose of preventing further incidence of occupational disease, environmental disease, and human health hazard exposure.	.25	Statue 95.21 (9) b HFS 140.06 (1) (e) (4) Wis. Admin. Code 8 DHS 140.06(5)(b) Wis. Stat. ch. 254	100% Fees and DHS Grant funds	Increase in illness related to water quality issues. Increase in infant mortality.
	Practices related to providing or arranging for the availability of services authorized under <u>Wis. Stat. ch. 254</u> , such as for toxic substances, indoor air quality, animal-borne or vectorborne disease, and human health hazards [<u>Wis. Admin. Code § DHS 140.06(5)(b)</u>]				
	Program Description: The Health Department promotes annual well testing for all homeowners and renters via in house DATCAP Certified Well Water Lab, Promote free Well water testing to families with pregnant women and infants. This is especially important for bacteria and fluoride tests. Municipal water Quality Consultation				
Radon	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: Human health hazard control. 1. Assist in the conduct of activities authorized under ss. 251.06 (3) (f) and 254.59, Stats. 3. Identify public health hazards through laboratory testing, inspections, reporting, and investigation for the purpose of preventing further incidence of occupational disease, environmental disease, and human health hazard exposure.	.05	Wis. Stat. ch. 254 Statue 254.59 Wis. Admin. Code § DHS 140.06(5)(b)	100% Grant	Increase radon exposure. Increase in potential for disease related to radon exposure, including lung cancer.
	Practices related to providing or arranging for the availability of services authorized under Wis. Stat. ch. 254, such as for toxic substances, indoor air quality, animal-borne or vectorborne disease, and human health hazards [Wis. Admin. Code § DHS 140.06(5)(b)] Program Description: Provide public information and education on radon testing. Testing kits available, analyze and notify homeowners of results and recommendation for remediation.				

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
Beach Testing	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: Human health hazard control. 1. Assist in the conduct of activities authorized under ss. 251.06 (3) (f) and 254.59, Stats. 3. Identify public health hazards through laboratory testing, inspections, reporting, and investigation for the purpose of preventing further incidence of occupational disease, environmental disease, and human health hazard exposure. Iowa County has MOU with beaches. Has authority to post closure as needed if the bacteria count is high.	.01	Wis. Stat. ch. 254 Statue 254.46	100% Tax Levy	Increase in waterborne illnesses.
Lead	REQUIRED SERVICES. A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: Human health hazard control. 1. Assist in the conduct of activities authorized under ss. 251.06 (3) (f) and 254.59, Stats. 2. Declare dilapidated, unsafe or unsanitary housing to be a human health hazard, when permitted under s. 254.593, Stats. 3. Identify public health hazards through laboratory testing, inspections, reporting, and investigation for the purpose of preventing further incidence of occupational disease, environmental disease, and human health hazard exposure.	.04	Wis. Stat. ch. 254 Statue 254.13, 254.164, 254.152, 254.166 (2) (b) and 254.171 HFS 140.04 (1) (c)	75% DHS Grants 25% Tax Levy	Increase of children with elevated blood lead levels due to lack of outreach, education, and screening. Long range – High levels of lead can cause developmental/cognitive delays in children.
	Program Description: Public health nurses provide mandated blood lead screening and surveillance, lead exposure risk assessments, prevention education and lead hazard referral and case management. Municipal water Quality Consultation Lead in Remediation Program				
	ENVIRONMENTAL HEALTH Total FTE	.86			

EMERGENCY PREPAREDNESS AND RESPONSE COMMUNICABLE DISEASE

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE					
Public Health Preparedness & Response - PH P&R										
(PH Essential Services): Monitor health status and understand health issues facing the community; Protect people from health problems and health hazards; Engage the community to identify and										
	solve health problems; Enforce public health laws and regulations; Maintain a competent public health workforce									
Partner	REQUIRED SERVICES. A local health department shall provide	.2	Wisconsin Legislature:	40% PHEP	Required to per statute and					
Communication	leadership for developing and maintaining the public health	***************************************	DHS 140.04(1)(d)	grant	administrative rule.					
	system within its jurisdiction by:			60% Tax levy						
	(d) Emergency preparedness and response.									
	1. Participate in the development of response strategies and plans									
	in accordance with local, state, and national guidelines to			. =						
	address public health emergencies as defined in s. 323.02									
E 2	(16), Stats.									
	2. Participate in public health preparedness exercises.									
	3. Communicate and coordinate with health care providers,									
	emergency service providers, and other agencies and									
	organizations that respond to a disaster, outbreak or									
	emergency.									
	4. Define the role of public health personnel in responding to a									
	disaster, outbreak, or emergency, and activate these	_								
	personnel during any such occurrence.									
	5. Maintain and execute an agency plan for providing continuity of									
	operations during a disaster, outbreak, or emergency,									
	including a plan for accessing resources necessary for									
	response or recovery. 6. Issue and enforce emergency health orders, as permitted by law.									
	7. Establish processes to ensure the local health department is									
	immediately notified of an actual or potential disaster,									
	outbreak, or emergency.									
	8. Implement strategies intended to protect the health of vulnerable									
	populations during a disaster, outbreak, or emergency.									
	Communicate with partners and stakeholders constantly on issues									
	re emerging diseases, current risks such as respiratory infections,									
Planning	enhanced surveillance and testing	.23	Statue 254.015 (1),	40% PHEP	Required to per statute and					
rtailling	This falls under the statutes and Admin rules detailed above per	.23	254.02 (3) (b)	grant	administrative rule.					
	Wisconsin Legislature: DHS 140.04(1)(d)			60% Tax levy	Being unprepared in the					
	The Health Department works with the Southwest Wisconsin		Wisconsin Legislature:	JO 70 Tax tevy	event of terrorist					
	Consortia as well as two surrounding Counties to fulfill objectives		DHS 140.04(1)(d)		attack/hazardous material					
	of the grant which include writing and updating plans for			22	exposure, pandemic.					
	of the grant which include withing and apparing plans for		L		on position particular					

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	Bioterrorism events, exercising plans, trainings, working with Emergency Management Government and Iowa County contingency plans, ICS, working with county agencies and organizations regarding emergency planning and recovery, working with special needs populations and medical providers				Decrease partner communication. Increase lives lost, confusion among public, potential to cause harm. Healthcare partners rely on PH response. Medical supply shortages.
Exercising	This falls under the statutes and Admin rules detailed above per Wisconsin Legislature: DHS 140.04(1)(d) SCWIHERC and local exercises	.15	Wisconsin Legislature: DHS 140.04(1)(d)	40% PHEP grant 60% Tax levy	Grant funds require exercising; required to per statute and administrative rule.
Response	This falls under the statutes and Admin rules detailed above per Wisconsin Legislature: DHS 140.04(1)(d) Also depending on incident, communicable disease statutes and rules kick in Pandemic, pertussis, H5N1, measles monitoring EMERGENCY PREPAREDNESS AND RESPONSE Total FTE	.68	Wisconsin Legislature: DHS 140.04(1)(d)	100% COVID-19 Grant	Statutorily required to respond and protect public health
	ESTIMATED 2025 COST =	\$80,371			
POLICY DEVELOP	MENT AND SUPPORT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Public Health Nuisance Ordinance		.11	Statue 251.05 Wisconsin Legislature: DHS 140.04(1)(g)	100% Tax Levy	Collaborated with county administrator, Sheriff's Dept, Corp Counsel on development. Provide communicable disease guidance on other county policy. The Community health improvement plan is a big part of meeting this requirement

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	ownership throughout the entire development and implementation of the plan. 5. Engage members of the community in assessment, implementation, monitoring, evaluation, and modification of community health planning. 6. Promote land use planning and sustainable development activities to create positive health outcomes.				
	Policy and Planning [Wis. Admin. Code § DHS 140.04(1)(g)] Shall maintain internal operating policies and procedures; Shall serve as a source of information and expertise in the development and implementation of policies affecting public health.				
	This ordinance is an example of informed policy leading to action.		Wisconsin Levisleton	Food and	Collaborated with Land
DATCP Certified Water Testing	Policy and Planning [Wis. Admin. Code § DHS 140.04(1)(g)] Shall maintain internal operating policies and procedures; Shall serve as a source of information and expertise in the development and implementation of policies affecting public health? [Wis. Admin. Code § DHS 140.04(1)(g)1.]		Wisconsin Legislature: DHS 140.04(1)(g)	Fees and grant funds	Conservation Department
	Water Lab is informed policy (& SWIGG study) leading to action.				
Board of Health, HHS Committee	Statutes require a Board of Health with bullets below; ICHD also reports to the HHS Committee Board of Health appointed members shall reflect the diversity of your jurisdiction and meet the requirements of a board of health. [Wis. Stat. § 251.03(1)] Board of Health shall employ qualified public health professionals [Wis. Stat. § 251.04(8)] Frequency of meetings (quarterly). [Wis. Stat. § 251.04(5)] Board of Health shall assess public health needs and advocate for the reasonable and necessary provision of public health services [Wis. Stat. § 251.04 (6)(a)] Board of health develops policy and provides leadership: Fosters involvement and commitment of the community. Advocates for equitable distribution of PH resources. Is consistent with public health needs in the jurisdiction. [Wis. Stat. § 251.04(6)(b)]	.11	Wis, Stat, § 251.03(1) Wis, Stat, § 251.04(5) Wis, Stat, § 251.04 (6)(a) Wis, Stat, § 251.04(6)(b)	100% Tax Levy	Required per statute and administrative rule.
	POLICY DEVELOPMENT AND SUPPORT Total FTE	.22			
	ESTIMATED 2025 COST =	\$26,002			

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
Leadership and Organizational Competencies	 Wis. Admin. Code § DHS 140.04(1)(h) REQUIRED SERVICES. A local health department shall provide leadership f developing and maintaining the public health system within its jurisdiction by ensuring: (h) Leadership and organizational competencies. 1. Establish and sustain relationships with governmental a nongovernmental partners and stakeholders. 2. Engage stakeholders in the development and implementation of toolal health department's organizational goals. 3. Use principles of public health law, including local and state laws the planning, implementation, and enforcement of public heal initiatives. 4. Promote and monitor progress towards achieving organization goals, objectives identified in community health improvement plan, and identifying areas for improvement. 5. Implement processes within public health programs that creathealth equity. 6. Maintain a competent and diverse workforce intended to ensure the effective and equitable provision of public health services. 7. Provide continuing education and other training opportunities. 	nd he in lth nal ent ate	Wis. Admin. Code § DHS 140.04(1)(h)	100% Tax Levy	Required by Wisconsin statute and administrative rule/Administrative Code
	necessary to maintain a competent workforce.	102			
Workforce Development	effective and equitable provision of public health services. 7. Provide continuing education and other training opportunities necessary to maintain a competent workforce. 140.05 Level II local health department. (1) REQUIRED SERVICES. In addition to the level I local health department required services described in s. DHS 140.04, a level II local health department shall do all of the following: (a) Address communicable disease control, chronic disease and injury prevention, environmental public health, family health, and access and linkage to health services, in addition to services already provided under s. DHS 140.04, by doing all of the following:		Wis. Admin. Code § DHS 140.05(1)(b)1. Wis. Admin. Code § DHS 140.05(1)(b)2. Wis. Admin. Code § DHS 140.05(1)(b)3.	Tax Levy + topic specific grant funds	Required by Wisconsin statute and administrative rule/Administrative Code

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
SERVICE	 Evaluating the additional services and reporting to the community an local board of health on progress and performance. (b) Develop and maintain a plan to employ qualified public health professionals and assure a competent public health workforce by doing all of the following: Including core public health competencies and credentialing requirements in all department job descriptions, unless prohibited by local governing body. Assessing staff core public health competencies every 2 years to identify department training needs. Completing annual performance evaluations and personal development plans, unless prohibited by local governing body. 	d e	STATE/FED?	SOURCE	NOT PROVIDING SERVICE
	 (c) Conduct quality improvement. (d) Provide training and resources related to quality improvement to loc health department staff and the local governing body. (e) Establish explicit organizational performance measures for the local health department's mission, vision, values, and strategic goals. (f) Apply nursing and public health principles to collaboratively assess, develop, implement, and evaluate the services required under pars. (a) to (e). LEADERSHIP AND ORGANIZATIONAL COMPETENCIES Total F	ı			
	ESTIMATED 2025 COST				

ACCOUNTABILITY	AND PERFORMANCE MANAGEMENT		
Staff Requirements and Qualifications	Local Health Officer qualifications, per Wis. Stat. § 251.06(1). Wisconsin Admin. Code ch. DHS 139 Qualifications of Public Health Professionals Employed by Local Health Departments Wisconsin Admin. Code ch. DHS 140 Required Services of Local Health Departments: A local health department shall provide leadership for developing and maintaining the public health system within its jurisdiction by: (i) Public health nursing services. [Wis. Admin. Code § DHS 140.04(1)(i)]	Wis. Stat. § 251.06(1) Wisconsin Admin. Code ch. DHS 139 Wisconsin Admin. Code ch. DHS 140 Wis. Admin. Code § DHS 140.04(1)(i)	Required to per statute and administrative rule. Iowa County Health Department (along with Richland County) are the smallest staffed health departments per capita in the state of WI having the least amount of staff of any

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	Shall conduct a general public health nursing program which shall apply nursing and public health principles to collaboratively assess, develop, implement, and evaluate the services required in pars. (a) to (h), in cooperation with the local board of health.				other health departments in the state of Wisconsin. The average # staff for our size is 8.5 FTE, we have 4.2
Reporting	Annual Report; grant reporting and tracking, financial audits LHD's documentation required by Wisconsin State Statutes and Administrative Code. Annual reports as per Wis. Stat. § 251.06(3)(h) and Wis. Admin. Code § DHS 140.05(2). Board of Health meetings as per Wis. Stat. § 251.04(5). Community Health Assessment (aka Community Health Needs Assessment), as per Wis. Admin. Code §§ DHS 140.04(1)(c)1 and 140.04(1)(g)3. Community Health Improvement Plan, as per Wis. Stat. § 251.05(3)(c) and Wis. Admin. Code §§ DHS 140.04(1)(a)1.c, 140.04(1)(g)3-4, 140.04(1)(h)2, and 140.05(1)(a)1.	.3	Wis. Stat. § 251.06(3)(h) and Wis. Admin. Code § DHS 140.05(2) Wis. Stat. § 251.04(5) Wis. Admin. Code § Shall be seen to see the seed of	Tax Levy + topic specific grant funds	Reporting is required to per statute and administrative rule. Grant requirements dictate specific fiscal and objective reporting in order to be in compliance.
Community Needs Assessment (CHNA)/ Community Health Improvement Plan (CHIP)	Statutes and Admin Rule covering this requirement are noted earlier in document (pages 8-9). This is a required undertaking every five years to assess the community (CHNA) and identify community priorities. A Community Health Improvement Plan (CHIP) must be assembled to address the community priorities. The HD stewards and facilitates this process and Community Action Teams in each of the priority areas. Goals, objectives and strategies are defined for each CAT to implement (Community Health Improvement Plan). Healthy Iowa County is coordinated and facilitate by the HD. 3 CATs and website; resource page, community calendar		Community Health Needs Assessment), as per Wis. Admin. Code §\$ DHS 140.04(1)(c)1 and 140.04(1)(g)3. Community Health Improvement Plan, as per Wis. Stat. § 251.05(3)(c) and Wis. Admin. Code §\$ DHS 140.04(1)(a)1.c, 140.04(1)(g)3-4, 140.04(1)(h)2, and 140.05(1)(a)1.	Tax Levy + topic specific grant funds	Assessing the community needs is critical to determine which needs are priority so we can have a healthier community. Required to per statute and administrative rule.
Performance Management, Quality Improvement	LHD shall engage in performance management and quality improvement [Wis. Admin. Code § DHS 140.05(1)(c) and (d)] Shall employ efforts to develop and implement methods to collect performance data, evaluate goals, conduct quality improvement, and report progress to advise organizational decisions. [Wis. Admin. Code § DHS 140.06(7)]	.2	Wis. Admin. Code § DHS 140.05(1)(c) and (d) Wis. Admin. Code § DHS 140.06(7)	100% Tax Levy	Required to per statute and administrative rule.

PROGRAM/ SERVICE	DESCRIPTION/ESTIMATED 2025 COST	FTE POSITIONS	MANDATED? STATE/FED?	FUNDING SOURCE	CONSEQUENCE OF NOT PROVIDING SERVICE
	Quality improvement plan implemented and integrated		Wis. Admin. Code §		
	throughout the organization [Wis. Admin. Code § DHS 140.06(8)]		DHS 140.06(8)		
	Strategic Plan, annual staff trainings, monthly staff procedure reviews, surveys to partners and community members. Grant Management: tracking fiscally and objective deliverables	ų			
	ACCOUNTABILITY AND PERFORMANCE MANAGEMENT Total	.5			
	FTE				
	ESTIMATED 2025 COST =	\$59,096			

Total FTE = 4.2 /Total cost \$496,409

Total 4.2 FTE Breakdown Across Required Service Categories with Costs

		FTE	2025 total expense
		4.2	\$496,409
COMMUNICABLE DISEASE/IMMUNIZATION	0.98	23.3%	\$115,829
CHRONIC DISEASE AND INJURY PREVENTION	0.14	3.3%	\$16,547
ACCESS TO CARE/LINKAGES W CLINICAL CARE	0.34	8.1%	\$40,185
MATERNAL AND CHILD HEALTH	0.22	5.2%	\$26,002
ENVIRONMENTAL HEALTH	0.86	20.5%	\$101,646
EMERGENCY PREPAREDNESS AND RESPONSE	0.68	16.2%	\$80,371
POLICY DEVELOPMENT AND SUPPORT	0.22	5.2%	\$26,002
LEADERSHIP AND ORGANIZATIONAL COMPETENCIES	0.26	6.2%	\$30,730
ACCOUNTABILITY AND PERFORMANCE MANAGEMENT	0.5	11.9%	\$59,096
		100.0%	\$496,409

Statewide Financing and Staffing Survey Results

Local Health Depts are statutorily required to carry out the foundational capabilities and areas in the categories noted in this document. In 2022, a large data collection effort began across the state of WI to assess/analyze current capacity and gaps across local health departments. Results for Iowa County Health Department are included in summary on the table below.

There are two important statistics from these DPH Local Health Department Finance and Staffing survey results:

• Based on responses statewide, the average number of staff for a local health department serving a population size of approx. 24,000 people is 8.5 full time equivalent (FTE) staff, or 3.6 FTE per 10,000 population. *ICHD has 4.2 FTE*; our staffing is less than HALF the state of WI average.

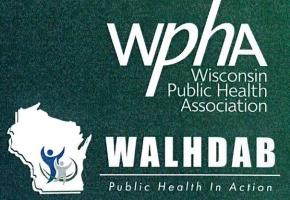
• Based on our specific ICHD survey results, the recommended optimal staffing industry standard to implement mandated services in Iowa County = 14 FTE. ICHD has 4.2 FTE, less than a THIRD of the industry standard.

Foundational Capabilities	FTE Expected	FPHS FTE Needed
Assessment & Surveillance	1.40	0.84
Emergency Preparedness & Response	1.30	1.07
Community Partnership Development	0.70	0.30
Equity	0.40	0.31
Organizational Competencies	2.20	1.67
Policy Development & Support	0.50	0.30
Accountability & Performance Management	0.20	0.06
Communications	0.70	0.21
	7.40	
Foundational Areas	FTE Expected	FPHS FTE
		Needed
Chronic Disease & Injury Prevention	1.70	1.57
Communicable Disease Control	1.40	0.08
Environmental Public Health	2.50	2.08
Maternal, Child, & Family Health	0.90	0.66
Access to & Linkage with Clinical Care	0.20	0.06
	6.70	

The survey was completed with 2022 staffing data.

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2025-2026 POLICY AGENDA



Wisconsin Association of Local Health Departments and Boards

Public health is what we as a society do collectively to assure the conditions in which all people can be healthy. These conditions go far beyond access to healthcare and individual choices. In fact, 80% of what makes people healthy occurs outside of a doctor's visit. For everyone to thrive, we must create and maintain community conditions and systems that support health like safe housing, good-paying jobs, public transportation, and well-resourced schools. Public policies that promote public health are essential for building a stronger Wisconsin, where everyone has the chance to live their healthiest lives.

POLICY PRIORITIES WE WILL LEAD



Local & Tribal Health Department Funding

Secure funding for local and tribal health departments to carry out essential and mandated public health responsibilities and services



Community Health Funding

Secure funding for community-based organizations, local and tribal health departments, and community partners to address community specific health gaps based on community health needs assessments



Public Health Workforce

Support the recruitment and retention of the public health workforce in Wisconsin



Public Health Authority

Assure public health authority for control of communicable diseases and other public health threats

POLICY PRIORITIES WE WILL SUPPORT



Increase Access to Care & Improving Clinical Linkages

- Extension of Medicaid postpartum coverage to one year
- Expansion of Medicaid eligibility as allowed under the Affordable Care Act
- Access to comprehensive reproductive rights and healthcare
- Policies that support doulas and birth workers
- Policies that increase access to oral health care
- Reimbursement for community health worker services



Safe, Healthy, & Thriving Communities

- Equitable policies that prevent and reduce substance use
- Increased funding for the expansion of youth and adult mental health and substance use treatment programs, and support for legal diversion programming
- Allocation of a greater proportion of opioid settlement dollars to communitybased prevention and harm reduction initiatives
- · Evidence-based policies and programs to prevent chronic disease
- Policies that address the inequities and health harms of the criminal legal system
- · Policies that reduce firearm-related harm and violence
- Evidence-based immunization practices
- Expanded civic engagement and equitable access to voting



Environmental & Climate Health

- Expanded funding for PFAS testing, mitigation, and remediation
- Policies that remove lead hazards
- Policies that improve the quality of air, water, and food safety



Economic Growth & Family Stability

- Increased access to affordable childcare
- Increased access to affordable and safe housing
- · Paid family leave
- Universal school meals and reduced food insecurity
- Policies that support family caregivers
- · Expanded child tax credits

Who are we?

The Wisconsin Public Health Association (WPHA) is the state's largest membership organization for public health workers and includes those working in both governmental and nongovernmental sectors. The Wisconsin Association of Local Health Departments and Boards (WALHDAB) is the professional organization representing leaders and workers in local governmental public health. Together, WPHA and WALHDAB represent more than 1,200 public health professionals across Wisconsin who are striving to create a healthier, safer, and more equitable state for all people.



wpha.org | walhdab.org

2024 Financial Summary - Iowa County Health Department

Per report from JGould to HHS Committee 7/28/25

In the 2024 budget submission, we submitted a levy request of 352,568 (Expenses 622,339 (not inclusive of wage increases)/Revenues 269,771). After wage/fringe adjustments, the 2024 levy request was \$377,509. Actual levy was \$341,145 which was \$36,364 to the good. The positive financial picture was due to several competitive grants we were successful in securing.

FISCAL SUMMARY 2024

	2024 Approved Budget	2024 Approved Revised Budget	2024 Actual Budget (not yet audited)
Total Expenses	\$647,280	\$668,826	\$671,496
Total Revenue	\$269,771	\$291,317	\$330,351
Tax Levy	\$377,509	\$377,509	\$341,145

2021 4°

4TH QUARTER 2024 EXPENDITURES FOR HHS COMMITTEE

	ex							
	ORGANIZATION CODE	ACCOUNT DESCRIPTION	2024 BUDGET	2024 BUDGET AMENDMENTS & 2023 CARRYOVERS	2024 REVISED BUDGET	YTD EXPENDITURES THROUGH 12/31/24	REMAINING BUDGET	% USED
	HEALTH DEPARTMENT							<u> </u>
		PUBLIC HEALTH	450,132.00	21,546.49	471,678,49	560,536,61	[88,858,12]	119%
人	10054102	PUBLIC HEALTH - COVID	197,148.00	-	197,148.00	93,967.81	103,180.19	48%
	10054111	PUBLIC HEALTH COMMUNITY HEALTH	-	-	-	16,991.65	(16,991.65)	
	ļ	TOTAL HEALTH DEPARTMENT EXPENDITURES	647,280,00	21,546,49	668,826.49	671,496.07	(2,669.58)	100%

2024 (Tereuses

4TH QUARTER 2024 REVENUES FOR HHS COMMITTEE

	ORGANIZATION CODE	ACCOUNT DESCRIPTION	Ż024 BUDGET	2024 BUDGET AMENDMENTS	2024 REVISED BUDGET	YTD REVENUES THROUGH 12/31/24	remaining Budget	% USED
	HEALTH DEPARTMENT					,		
K	4-15-4-15-4	PUBLICHEALTH	(80,904.00)	(21,546.49)	(102,450.45)	(227,367,06)	124,916,57	222%
ì	10054102	PUBLIC HEALTH - COVID	(188,867.00)	-	(188,867.00)		(85,883.00)	
		TOTAL HEALTH DEPARTMENT REVENUES	(269,771.00)	(21,546.49)	(291,317.49)	(330,351.06)	39,033.57	113%

2025 Fragrands

1ST QUARTER 2025 REVENUES FOR HHS COMMITTEE

ORGANIZATION CODE	ACCOUNT DESCRIPTION	2025 BUDGET	2025 BUDGET AMENDMENTS	2025 REVISED BUDGET	YTD REVENUES THROUGH 3/31/25	REMAINING BUDGET	% USED
HEALTH DEPARTMENT				***************************************			
10054100 10054102	PUBLIC HEALTH PUBLIC HEALTH - COVID	(127,790.00)		(127,790.00)	(31,927.94)	(95,862.06)	25%
	TOTAL HEALTH DEPARTMENT REVENUES	(127,790.00)		(127,790.00)	(31,927.94)	(95,862,06)	0% 25%

2025 18t 8th

1ST QUARTER 2025 EXPENDITURES FOR HHS COMMITTEE

ORGANIZATION CODE	ACCOUNT DESCRIPTION	2025 BUDGET	2025 BUDGET AMENDMENTS & 2024 CARRYOVERS	2025 REVISED	YTD EXPENDITURES THROUGH 3/31/25	REMAINING	% USED
HEALTH DEPARTMENT							
10054102	PUBLIC HEALTH PUBLIC HEALTH - COVID	520,519.00		520,519.00	117,558.21 611.86	402,950.79 (611.86)	23% 100%
at shipping comments are required	TOTAL HEALTH DEPARTMENT EXPENDITURE	520,519.00		\$20,519.00	118,170.07	402,348.93	23%

	lowa County 2025														
	Communicable	VFC Vaccines	VFA Vaccines	Rabies	(New) Lead	NEW residents being treated	Residents continuing to be	TB Skin	ICHD Well Owner		Narcan Boxes	Radon Tests	Births	Newborn Referral	TOTAL
	Disease Cases	Administered	Administered	Follow-ups	Follow-ups	for TB this month	treated for TB this month	Tests	Tests Distributed	Tests Distributed	To Entities	Distributed		Follow-ups	
January	42	10	8	4	0	1	0	13	4	5	0	38	14	3	142
February	44	3	10	2	0	0	1	4	12	3	0	18	20	111	118
March	32	0	9	9	1	1	1	11	12	5	0	16	19	2	118
April	19	0	20	1	0	0	2	17	4	1	10	16	22	2	114
May	21	3	6	13	0	0	2	8	8	3	1	5	20	1	91
June	40	3	0	5	0	0	2	15	12	2	0	2	21	6	108
July	30	6	3	8	2	1 .	2	12	8	4	0	2	23	1	102
August															0
September															0
October															0
November															0
December	11														0
TOTAL-YTD	228	25	56	42	3	3	10	80	60	23	11	97	139	16	793

2025	VFC Flu Vaccines	Adult Flu Vaccines	TOTAL Vaccines Given YTD		
Total	1	3	84		



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