Dear Interim Administrator Fuge, County Board Members, Board of Health and Human Services Members, Colleagues, Partners and Citizens:

I am pleased to present the Community Services Division 2017 Annual Report.

**Significant Division activities in 2017 included:**

- Continued work on the Community Health Improvement Plan with partners, focusing on the priorities of mental health, alcohol use/abuse, and nutrition/physical activity/obesity prevention.
- Submission of the fourth annual report to the Public Health Accreditation Board (PHAB).
- Implemented a case manager for Treatment Court and had six successful graduates from the program.
- Received and implemented a new Coordinated Services Team (CST) grant.
- Received and began implementation of a Dementia Crisis Innovation grant to improve services to persons with dementia who are in crisis.
- Received and implemented a carbon monoxide grant to promote placement of CO detectors in homes.
- Continued collaboration with the District Attorney’s office on school based education in all 8 county school districts on abusive electronic messaging through the SAM (Stop Abusive Messaging) project.
- Expansion of dental services for low income families in the Health Department through the establishment of a partnership with Northlakes Community Clinic, a Federally Qualified Health Care Center (FQHC).

The work of public health and human services continues to require current scientific knowledge, collaboration with diverse partners and full engagement of the community. We are committed to follow those principles in serving our community with progressive leadership, cutting edge technology and a well trained workforce to assure Polk county is a healthy place to live, work and play.

Sincerely,

Gretchen Sampson RN MPH
Director/Health Officer
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Mission, Vision, and Core Values

Our Vision
A Safe and Healthy Community

Our Mission
Partnering With Communities to Protect and Improve Health and Well-Being

Our Core Values
Compassion Caring about people
Prevention Stopping problems before they start
Collaboration Teamwork and partnership
Health Equity Serving everyone equally
Evidence Based Implementing strategies that are proven to work
Excellence High quality service provided with integrity and accountability
**Division Staff – March, 2018**

**Managers**  
Gretchen Sampson RN MPH – Division Director  
Brian Kaczmarski, BS – Public Health Director  
Bonnie Leonard, BSN – Public Health Supervisor  
Lisa Lavasseur – Behavioral Health (BH) Dept. Director  
Corby Stark MA, LPC, NCC – BH Clinical Manager  
Kristin Boland MA, LPC – BH Clinical Manager  
Jaime Weness MSW, CAPSW – Dept. of Children & Families Director  
Chad Knutson CSW – Dept. of Children & Families Supervisor  
Diana Peterson – Economic Support Manager  
Tonya Eichelt CSW, MPA – Business and Operations Manager

**Adult Protection**  
John Hale, CSW – Social Worker  
Kathy McGurran, CSW – Social Worker

**Behavioral Health**  
Roberta Carlson MS CSW LMFT – OPMH Therapist  
Kathy Carter RN, CEN – Registered Nurse  
Christy Coil – TCM Social Worker  
Gary Ehrich ICS, CSAC – Substance Use Counselor  
Sharon Foss – Treatment Court Case Manager  
Diane Garves – CSP Case Manager  
Samantha Hazen – Social Worker – Crisis  
Amy Hering MSW, LCSW – CSP Case Manager/Therapist  
Diane Jorgensen – CCS Social Worker  
Maddie Kortes, LPC, SACIT – OPMH Therapist/Substance Use Counselor  
Kevin Montague MS, CSAC, LPC, CSW, IDP-AT – Substance Use Counselor/OPMH Therapist  
Cynthia Peer SAC, MS, LSCW, PC T – Substance Use Counselor/OPMH Therapist  
Nicole Ruetz – TCM Social Worker  
James Rugowski, MD – Psychiatrist  
Jennifer Williams – CCS Social Worker

**Birth to 3**  
Dawn Larson, BA, Program Coordinator

**Children’s Waiver**  
Marisa Lindsay CSW – Social Worker  
Meghan Baasch CSW – Social Worker

**Child Protection**  
Marsha Appelquist – Family Support Worker

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judi Baldwin CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Kelly Bauernmeister CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Tiffanie Dagestad</td>
<td>Access/Intake</td>
</tr>
<tr>
<td>Shelby Fader CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Peggy Gilbertson CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Terri Jacobson CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Jamie Johnson</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Sasha Lundgren</td>
<td>Family Support Worker</td>
</tr>
<tr>
<td>Tarisa Ramis CSW</td>
<td>Foster Care/Kinship Care Coordinator</td>
</tr>
<tr>
<td>Heather Russo CSW</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Ashley Shanks CSW</td>
<td>Social Worker</td>
</tr>
</tbody>
</table>

**Economic Support**  
Connie Adams – Economic Support Specialist  
Nancy Anderson - Economic Support Specialist  
Kristen Burstad - Economic Support Specialist  
Michelle Clausen - Economic Support Specialist  
Mary Jo Hacker - Economic Support Specialist  
Kristi Kobs - Economic Support Specialist  
Miranda Lutz – ESS Lead worker  
Melissa McQuay - Economic Support Specialist  
Ameer Nelson – Energy Assistance Program Specialist  
Nancy Randall - Economic Support Specialist  
Robin Stage - Economic Support Specialist  
McKayla Swanson - Economic Support Specialist

**Environmental Health**  
Brian Hobbs, RS, Environmental Health  
Patty Lombardo, Certified Environmental Health Technician

**Family Health Benefits Counseling**  
ABC for Rural Health – Patty Turner

**Juvenile Justice**  
Rachael Anderson MSW, CAPSW – Social Worker  
Jim Hexum MS, CSW – Social Worker  
Cody Moore – Social Worker  
Leigh Wahlen MSW, CAPSW – Social Worker  
Brooke Whitley CSW – Social Worker

**Public Health Nursing**  
Therese Armour, BSN, Public Health Nurse  
Donna Johnson, BSN, Public Health Nurse/Jail  
Sally Johnson, BSN, Public Health Nurse  
Michelle Fontanille, Public Health Nurse  
Gail Peterson, BSN, Public Health Nurse
**Reproductive Health**  
Debbie Leschisin, RN C, Nurse Practitioner  
Jill Johnson, BSN, Public Health Nurse

**Support Staff**  
Amber Chapman – Receptionist, BH and DCF  
Rita Bohn – Intake Specialist  
Jackie Johnson – Program Assistant  
Sabrina Evenson – Fiscal Specialist  
Karen Fjorden – Support Specialist  
Kathy Gingras – Billing Specialist  
Jody Hansen – Medical Records Technician  
Felecia Kallevang – Fiscal Specialist  
Linda Moore – Program Assistant Birth to 3  
Jessica Olby – Receptionist, Health Dept.  
Bonnie Trumble – Fiscal Specialist  
Laurie Whitehead – Fiscal Manager

**Medical Examiner**  
Jonn Dinnes, ABMDI

**Western WI Public Health Readiness Consortium**  
Brittany Fry, MPH - Director

**WIC/Public Health Nutrition**  
Andrea Seifert, RD, CD, CLE, WIC Director  
Jennifer Baldini, RD, CD, Public Health Nutritionist  
Jaime Ehlers, Peer Counselor  
Linda O’Donnell, WIC Aide  
Lisa Simon, WIC Clerk

**Multi-Jurisdiction Tobacco Coalition/Health Education**  
Mary Boe, BS, Program Coordinator  
Elizabeth Hagen, BS, Public Health Specialist

**Board of Health and Human Services (BHHS)**  
John Bonneprise, Chair, County Board Supervisor  
Joe Demulling, County Board Supervisor  
Jim Edgell, County Board Supervisor  
Mike Prichard, County Board Supervisor  
Doug Route, County Board Supervisor  
Vacant – Appointed member  
Dr. Arne Lagus MD – Appointed member  
Bill Alleva - Appointed member  
Peter Raye – Appointed member
Essential Service 1: Monitor Health Status to Identify and Solve Community Health Problems

*Introduction:* Essential Service 1 activities include assessing the health status of the community through formal and informal needs assessments and data analysis. PCHD collaborates with a diverse group of community partners to address community health problems. In this section, community health improvement planning and leading health indicators are featured.

**Leading Health Indicators in Polk County**

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Live Births</td>
<td>430</td>
<td>457</td>
</tr>
<tr>
<td>Percent Low Birth Weight</td>
<td>4.9</td>
<td>6.6</td>
</tr>
<tr>
<td>Percent Teen Births</td>
<td>4.7</td>
<td>6.3</td>
</tr>
<tr>
<td>Percent of Mothers Receiving 1st Trimester Care</td>
<td>74.5</td>
<td>85.6</td>
</tr>
<tr>
<td>Percent of Mothers with Less Than High School Education</td>
<td>8.4</td>
<td>6.3</td>
</tr>
<tr>
<td>Percent of Unmarried Mothers</td>
<td>40.4</td>
<td>33.7</td>
</tr>
<tr>
<td>Percent of Women Smoking While Pregnant</td>
<td>21.7</td>
<td>19</td>
</tr>
</tbody>
</table>

**Leading Underlying Causes of Polk County Deaths**

<table>
<thead>
<tr>
<th>Leading Underlying Causes of Polk County Deaths</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malignant Neoplasms</td>
<td>22%</td>
<td>19%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>20%</td>
<td>24%</td>
</tr>
<tr>
<td>Cerebrovascular Disease</td>
<td>6%</td>
<td>5%</td>
</tr>
<tr>
<td>Accidents</td>
<td>8%</td>
<td>4%</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Disease</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td><strong>Total Deaths</strong></td>
<td><strong>346</strong></td>
<td><strong>399</strong></td>
</tr>
</tbody>
</table>

(*Wisconsin SPHERE and Vital Records, 2017*)

**Community Health Improvement Planning**

The Health Department, in collaboration with Polk’s three local medical centers and many other partners, completed a Community Health Needs Assessment (CHA) in 2015. A community survey was distributed and other county specific health data examined to assess priority health issues in Polk County. The CHA identified: 1) Mental Health 2) Obesity Prevention, and 3) Substance Use as the top three health priorities. Access to care was also identified as a priority and strategies to address this issue are woven in throughout the top three health priority areas. These major health issues require continued community partnerships to implement evidence based strategies to produce health improvement. The latest version of Healthy Polk County 2020 vs. 2017-2020 was released to the public in May of 2017. The CHIP Indicator Tracker table summarizes the progress of various CHIP health focus area indicators as of year-end, 2017.
## Healthy Polk County 2020: CHIP Indicator Tracker
### 2017 Update

<table>
<thead>
<tr>
<th>Improvement</th>
<th>Decline</th>
<th>No change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Progress Toward Target</strong></td>
<td><strong>Health Focus Area and Indicator</strong></td>
<td><strong>Baseline (Year)</strong></td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td>Percentage of high school students who seriously considered attempting suicide during the past 12 months</td>
<td>14.3% (2015)</td>
</tr>
<tr>
<td><strong>↓</strong></td>
<td>Percentage of high school students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.</td>
<td>26.8% (2015)</td>
</tr>
<tr>
<td><strong>↓</strong></td>
<td>Percentage of students who attempted suicide once in the past 12 months.</td>
<td>4.5% (2015)</td>
</tr>
<tr>
<td><strong>↓</strong></td>
<td>The Polk County mortality rate from suicide will decrease (rate/100,000).</td>
<td>32.1 (2015) N=14</td>
</tr>
<tr>
<td><strong>↓</strong></td>
<td>Percentage of high school students who agree that harassment and bullying is a problem at their school.</td>
<td>41.8% (2015) N=14</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of QPR trainings</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of People Trained in QPR</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of Make It Ok Events held</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of people trained as ambassadors for Make It Ok</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of Zero Suicide trainings</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Number of people that attended Zero Suicide Trainings</td>
<td>NEW</td>
</tr>
<tr>
<td><strong>↓</strong></td>
<td>Percentage of high school students who have been bullied on school property in the past 12 months.</td>
<td>30.2% (2015) N=14</td>
</tr>
<tr>
<td><strong>Obesity</strong></td>
<td>Percentage of exclusively breastfed at 3 months</td>
<td>29.7% (2016)</td>
</tr>
<tr>
<td><strong>←</strong></td>
<td>Percentage of WIC infants breastfed at 3 months</td>
<td>64.6% (2016)</td>
</tr>
<tr>
<td><strong>←</strong></td>
<td>Percentage of WIC children at a healthy BMI</td>
<td>69.2% (2016)</td>
</tr>
<tr>
<td><strong>←</strong></td>
<td>Percent of high school students who are active at least 60 minutes a day on 5 or more days of the week</td>
<td>55.5% (2015)</td>
</tr>
<tr>
<td>Progress Toward Target</td>
<td>Health Focus Area and Indicator</td>
<td>Baseline (Year)</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td><strong>Obesity</strong></td>
<td>Percent of Polk County WIC participants redeeming allotted Farmers Market Vouchers</td>
<td>26% (2016)</td>
</tr>
<tr>
<td><strong>Substance Abuse</strong></td>
<td>Number of prescription drug take back program/events held annually in Polk County</td>
<td>NEW</td>
</tr>
<tr>
<td></td>
<td>Number of community events to raise awareness about Polk County substance abuse issues</td>
<td>NEW</td>
</tr>
<tr>
<td></td>
<td>Number of Media Outreaches regarding Substance abuse</td>
<td>NEW</td>
</tr>
<tr>
<td></td>
<td>Percent of High School Students who drank alcohol (other than a few sips) for the first time before age 13.</td>
<td>18.2% (2015)</td>
</tr>
<tr>
<td></td>
<td>Percent of High School students who report using prescription drugs without a doctor's prescription</td>
<td>14.0% (2015)</td>
</tr>
<tr>
<td></td>
<td>Percentage of High School students who report trying marijuana in the last 30 days</td>
<td>12.8% (2015)</td>
</tr>
</tbody>
</table>
Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards in the Community

Introduction: Essential Service 2 includes provision of epidemiological identification of emerging health threats, active investigation of infectious disease and human health hazards and prevention of vaccine preventable disease through immunization. The following programs/activities are highlighted in this section: seasonal influenza, communicable disease control, immunization program, lead poisoning prevention, human health hazard control and the multi-county Radon Information Center (RIC), and Medical Examiner.

Seasonal Influenza

In 2017, the Polk County Health Department offered a quadrivalent seasonal influenza vaccine that included A/Michigan/45/2015 (H1N1) pdm09-like virus; A/Hong Kong/4801/2014 (H3N2)-like virus; B/Brisbane/60/2008-like (B/Victoria lineage) virus; and B/Phuket/3073/2013-like (B/Yamagata lineage) virus components. The Health Department also offered a trivalent, high-dose vaccine that is formulated to enhance the immune response of individuals over 65 years of age. PCHD continued to focus vaccination efforts on children and staff in Polk’s eight public school districts.

2017 Outcomes

- 1,809 doses of seasonal flu vaccine were administered; 1,350 of those doses were given in the school setting

Communicable Disease Control

Surveillance, investigation and follow-up of reportable communicable diseases are statutory responsibilities of local health departments. In addition, animal bites are reported to the health department and follow-up is conducted to assure that measures are taken to prevent potential rabies transmission.

2017 Outcomes

- Public Health Nurses conducted follow-up of 575 reports of communicable diseases and outbreaks classified by the State Health Department as either confirmed, probable or suspect. Six hundred fourteen (614) hours were spent on communicable disease surveillance, follow-up and control activities. Many cases initially reported as suspect were deemed not to be cases after testing and/or public health investigation
- Fifty six (56) animal bite investigations were conducted involving human exposure to 43 dogs, 8 cats, 3 bats, and 2 muskrats. 110 hours were spent on animal bite investigations

<table>
<thead>
<tr>
<th>Confirmed/Probable Selected Reported Diseases 2017</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campylobacteriosis</td>
<td>7</td>
</tr>
<tr>
<td>Chlamydia Trachomatis</td>
<td>110</td>
</tr>
<tr>
<td>Cryptosporidiosis</td>
<td>3</td>
</tr>
<tr>
<td>E-Coli, Shiga Toxin-Producing</td>
<td>2</td>
</tr>
<tr>
<td>Ehrlichiosis/Anaplasmosis</td>
<td>20</td>
</tr>
<tr>
<td>Giardiasis</td>
<td>7</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>7</td>
</tr>
<tr>
<td>Hepatitis B, Chronic</td>
<td>1</td>
</tr>
<tr>
<td>Hepatitis C, Chronic</td>
<td>19</td>
</tr>
<tr>
<td>Influenza Hospitalizations</td>
<td>50</td>
</tr>
<tr>
<td>Legionellosis</td>
<td>1</td>
</tr>
<tr>
<td>Lyme Disease (B.Burgdorferi)</td>
<td>79</td>
</tr>
<tr>
<td>Drug Resistant S. Aureus</td>
<td>3</td>
</tr>
<tr>
<td>Mycobacterial Disease</td>
<td>1</td>
</tr>
<tr>
<td>Parapertussis</td>
<td>1</td>
</tr>
<tr>
<td>Pertussis (Whooping Cough)</td>
<td>8</td>
</tr>
<tr>
<td>Pneumocystis</td>
<td>1</td>
</tr>
<tr>
<td>Salmonellosis</td>
<td>12</td>
</tr>
<tr>
<td>Shigellosis</td>
<td>1</td>
</tr>
<tr>
<td>Streptococcal Disease, Invasive</td>
<td>12</td>
</tr>
<tr>
<td><strong>Total Cases</strong></td>
<td><strong>345</strong></td>
</tr>
</tbody>
</table>
Immunization Program

The Health Department strives to reduce or eliminate indigenous cases of vaccine preventable diseases through administration of vaccines. In 2017, vaccines to prevent infectious diseases were given to 1,877 persons with a total of 1,973 shots given. Tuberculosis (TB) skin tests were administered to 79 walk-in clients and 25 inmates in the Polk County jail. Health Department staff work annually with all Polk County school districts to assure children are in compliance with the Wisconsin Student Immunization Law.

2017 Outcomes

- 99.06% of the school-aged children in Polk County were in compliance with the immunization law
- 66% of Polk’s 2 year olds met Wisconsin’s benchmark immunization standards
- No major childhood vaccine preventable disease outbreaks were reported in Polk County

Lead Poisoning Prevention

Children participating in the Health Department WIC program receive capillary blood lead screenings at age 1 and again at age 2 years or older. Lead test results from private medical providers are also recorded in the child’s WIC record to assure appropriate follow-up and testing is completed. Children with elevated capillary lead levels are referred to their physician for a confirmatory venous blood lead test. Families receive lead source and prevention education materials with this referral. This program provides education on prevention of lead exposure to families of children whose confirmed lead levels are 5 mcg/dl or higher, as well as offering home inspections and case management services. Lead risk assessments are completed of the homes of children with confirmed blood levels ≥10 mcg/dl. These assessments not only look for the source of the lead exposure but also provide direction for corrective action. Pregnant women enrolled in the PNCC program receive information on lead and other environmental hazards.

2017 Outcomes

In 2017, 463 children received blood lead testing from the PCHD or their local medical providers. 285 of these tests were completed during a WIC certification visit. The program Public Health Nurse offered education, home assessment and ongoing testing to families of children referred for testing and/or lead interventions. Lead risk assessments were completed on the homes of 3 families by a certified lead risk assessor. Recommendations for reduction of lead exposure were provided for all of the families. All three homes were rental units. Work orders for lead abatement were written on two of the homes and delivered to landlords for action. Results of one assessment were inconclusive but family was given instructions on how to reduce exposure to potential lead sources. The Lead Program PHN assisted with the assessment to provide education and completed developmental assessments on the lead-poisoned children. Appropriate referrals for services were offered as indicated by the assessments.

<table>
<thead>
<tr>
<th>Blood Lead Testing Referral and Follow Up</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Children Served with Elevated Levels</td>
<td>9</td>
</tr>
<tr>
<td>(venous or capillary on initial report)</td>
<td></td>
</tr>
<tr>
<td>Elevated Capillary—Referred For Venous Test</td>
<td>7</td>
</tr>
<tr>
<td>Venous &lt;5 mcg/dl—no further intervention</td>
<td>4</td>
</tr>
<tr>
<td>Venous ≥10 mcg/dl—lead risk assessment completed</td>
<td>3</td>
</tr>
<tr>
<td>No venous test—continue outreach</td>
<td>2</td>
</tr>
</tbody>
</table>
Human Health Hazard Control
The Health Department investigates complaints subject to provisions of the county Human Health Hazard Ordinance. The goal of this program is to protect the health of the public from illness and disease from health hazards. Unsafe housing issues are frequently reported.

2017 Outcomes
- PCHD investigated 21 housing complaints, 21 water quality issues, 11 air quality problems and 2 animal control situations
- 2 compliance orders were issued for housing violations and were resolved by property owner compliance via education and information about the county ordinance.

Radon Information Center
PCHD is the Radon Information Center (RIC) for four counties – Polk, Burnett, Washburn and Douglas. Cooperative agency efforts include distribution of test kits, assistance in analysis of test results, and mitigation information and referrals.

2017 Outcomes
- Published radon information to area media outlets, the agency website and agency Facebook page during January for National Radon Awareness month
- Conducted a radio interview focused on testing and mitigation during Radon Action Month
- Logged requests for information and/or radon kits, resulting in over 200 opportunities to educate the public on radon
- County specific radon test result information was sent to each RIC member
- 135 kits were sold in 2017, and 105 test results were added to the RIC database
- Percentage of elevated tests per county: Polk (18 of 91 for 20%), Burnett (2 of 7 for 29%), Washburn (4 of 7 for 57%), Douglas (0 of 9 for 0%)
- Radon information is available on the agency website and Facebook page
- Donated radon test kits to OXBO employees for outreach
- Met with Douglas County new environmental health staff regarding radon information and testing protocols
- Attended statewide radon conference and participated in statewide radon conference call regarding ideas to improve dissemination of radon information

Medical Examiner
The Polk County Medical Examiner provides death investigation services for deaths falling under WI Statute 979. This office also issues necessary permits for final disposition including cremation, embalming or disinterment permits.

2017 Outcomes
- 391 deaths were handled; 345 were natural, 28 accidental
- 16 deaths were classified as suicides; 1 death was classified a homicide
- 11 deaths were directly related to complications from falling
- 297 cremation permits were issued
Essential Service 3: Inform, Educate and Empower People about Health Issues

Introduction: Essential Service 3 includes social marketing, targeted media public communication and providing accessible health information resources to reinforce health promotion messages and programs. The following activities are highlighted in this section: general health education and the PCHD website.

General Health Education

The Community Services Division staff provides outreach and education to community groups, school districts, key stakeholders, legislators and the general public. Topics are diverse and include: Environmental health topics, such as radon and food handling/serving, information and assistance with Badgercare, the Affordable Care Act, living with chronic disease, immunizations, prenatal and postpartum care, healthy nutrition and physical activity recommendations, infectious disease and STI prevention, blood borne pathogens, first aid, contraceptive methods, use of epi pens in the school setting, mental health, breast cancer awareness and other general public health and human services related topics. The PCHD strives to use technology to enhance health education and public awareness about public health issues. The PCHD website www.polkcountyhealthdept.org has become a clearing house for a multitude of health related topics and programs. The PCHD Facebook page provides education, information, and awareness about a variety of health topics throughout the year.

2017 Outcomes

- Health Department staff conducted 113 educational sessions reaching over 4,700 persons
- The Health Departments provides local papers with press releases on public health topics; 11 press releases were published
- The Health Department attended 7 open house events at local school to provide information on public health services and public health topics
- Health Department staff participated in health fairs at Hazelden, Osceola, St. Croix Tribal Clinic, Balsam Lake, and the Amery Community Center. At these fairs PCHD promotes agency services, women’s health, nutrition, physical activity and other public health issues of importance
- The Health Officer and agency staff participated in 21 radio interviews on Public Health topics
- Health Department staff participated in 36 community events collaborating with our partners.
- The Health Department participated in three legislative events providing important up-to-date public health information to our local legislators and community partners
- Produced a movie trailer video on Carbon Monoxide Poisoning prevention that ran for six months at Cinema 6 movie theatre in St. Croix Falls
- DCF held two Trauma Informed Parenting (TIP) training sessions. Social workers and community partners trained 55 participants including service providers, parents, foster parents, etc on the effects of trauma and appropriate ways to support youth that have been impacted by trauma
- Youth Justice, in partnership with the Polk County District Attorney’s Office offered the second round of Stop Abusive Messaging (SAM) Project presentations to local School Districts. Youth are made aware these behaviors can result in a law enforcement referral and court ordered supervision
○ CLTS and Foster Care staff attended 5 community events to increase awareness of their respective programs
○ Foster care staff held regular support groups and training sessions to existing foster parents.

**Essential Service 4: Mobilize Community Partnerships and Action to Identify and Solve Health Problems**

*Introduction:* Essential Service 4 involves convening and facilitating community groups in undertaking defined preventive and population focused activities in order to capture the full range of potential resources to solve community health problems. Highlighted in this section are: Polk United Healthier Together; the Tobacco Free Coalition; the Western Wisconsin Public Health Readiness Consortium and the Polk County I Team

**Polk United – Healthier Together**
The Polk United – Healthier Together **mission** is: To engage stakeholders who will take collaborative action to create a healthier Polk County. The **vision** is: Resources, access and empowerment for the health of all Polk County residents.

Polk United envisions a vital, healthy Polk County in 2020 where resources and collaboration are maximized. Polk United - Healthier Together efforts will be centralized, sustainable, and strong because of diverse community involvement. Access to care and resources will be readily accessible. Individual and family efforts to seek good health will be fully supported and will be an accepted part of daily life.

**2017 Outcomes**
○ Held three coalition meetings with local organizations to foster collaboration and awareness about the actions around Healthy Polk County 2020 goals, other health initiatives, and to seek volunteers for action based activities that promote population health
○ Conducted one coalition training – how coalitions work and what makes them thrive
○ Provided updates to organizations to share with their extended circles on the actions and outcomes of Healthy Polk County 2020 health focus area workgroups
○ New member and organizations have been joining regularly – membership includes over 60 individuals and 4 plus partner organizations
○ [www.polkunited.org](http://www.polkunited.org) website continues to expand

**Western Wisconsin Working for Tobacco Free Living (W3TFL)**
The mission of W3TFL coalition is to prevent, reduce exposure to, and eliminate the use of tobacco products in Barron, Burnett, Pierce, Polk, Rusk and St. Croix counties through policy work, education and information efforts. This multi-jurisdictional coalition (MJC) strives to create a healthier, tobacco-free culture where people live and work. The focus is on increased public awareness of the health risks of tobacco in order to spur increased personal involvement of community members to create a better place for everyone to live.
2017 Outcomes
- W3TFL had impactful meetings with 5 current legislators to educate them on the current issues surrounding the tobacco culture among youth and adults
- W3TFL was represented at three area legislative events sharing information on tobacco prevention
- Conducted eight electronic cigarette/other tobacco product presentations throughout the W3TFL geographic area
- Six written communications were shared with grass top leaders on tobacco prevention and control happenings
- 30 Tobacco Retail Environmental Scans were conducted in the W3TFL area
- W3TFL FACT youth conducted nine “Factivisms” spreading the word about the dangers of tobacco use to their peers and communities. Twelve new FACT members were recruited.
- Received additional SPARK mini-grant funding in collaboration with Wisconsin Indianhead Technical College (WITC) and UW-River Falls, through the American Lung Association, to help support their tobacco-free campus policy and cessation efforts.
- Ten press releases were shared with W3TFL area media
- Two Radio Interviews were conducted to inform the public on various related issues

Western Wisconsin Public Health Readiness Consortium
The Polk County Health Department is the lead agency and fiscal agent for the Western Wisconsin Public Health Readiness Consortium (WWPHRC). This consortium successfully weathered the dissolution of the statewide consortia model largely due to the strong collaboration and partnerships that have been developed regionally since 2003. Currently there are ten county health departments and one tribal health agency as members. The purpose of the WWPHRC is to help prepare local public health agencies’ staff for acts of bioterrorism, infectious disease outbreaks, and other public health threats. The WWPHRC accomplishes this through networking, coordinating, standardizing, and centralizing resources and planning efforts.

Our Partners
Barron County Health and Human Services Department, Burnett County Department of Health and Human Services, Chippewa County Department of Public Health, Douglas County Department of Health and Human Services, Eau Claire City-County Health Department, Pepin County Health Department, Pierce County Health Department, Polk County Health Department, Rusk County Department of Health and Human Services, St. Croix Tribal Health Department, and Washburn County Health and Human Services Department.

2017 Outcomes
- WWPHRC maintains a strong presence in the arena of preparedness. WWPHRC is the only consortium pertaining to public health emergency preparedness in the State of Wisconsin and continues to be a model for the state
- WWPHRC continues to improve and strengthen local Public Health Emergency Plans per Centers for Disease Control and Prevention (CDC) guidance
o WWPHRC acted as a collaborative leader in public health representation in the newly formed Northwest WI Healthcare Coalition (NWWIHCC). The consortium Director served as the Vice-Chair for the NWWIHCC.

o WWPHRC co-sponsored and co-facilitated regional Volunteer Reception Center Training in collaboration with WI DPH and Northwest WI Healthcare Coalition.

o WWPHRC co-sponsored the following trainings, conference, and exercise: 3 area and one regional exercise, ICS 300, ICS 400, CERC, EOC Operations and Planning for All Hazard Events, Human Sex Trafficking Training, and CMS Training.

o WWPHRC and NWWIHCC were the first region to develop a functional Regional Medical Coordinating Center (RMCC).

**Local Preparedness Planning**

Public health preparedness follows a five-year funding and planning cycle as provided by the CDC. Each cycle year, running from July to June, is referred to as a Budget Period (BP). Calendar year 2017 included the final half of BP5 and beginning half of BP1 of a new funding and planning cycle. Key achievements in calendar year 2017 included:

**2017 Outcomes**

o Completed a revision of the Polk County Public Health Emergency Plan (PHEP) in a format based on the preparedness capabilities and submitted for partner review and approval. Ongoing work continues to update and maintain the current Polk County Public Health Emergency Plan (PHEP) as well working on a draft plan in a format based on the preparedness domains.

o Participated in the Regional Exercise focused on planning and responding to the variety of impacts of an ice storm causing a long-term power outage.

o Continued ongoing work on maintenance of stand-alone preparedness plans including the Mass Care (sheltering) plan, Mass Clinic plan, Isolation and Quarantine Plan, and Fatality Management plan.

o The local planner has worked with Polk County Emergency Management, Red Cross and WWPHRC on training for Community Services staff members who are responsible for opening and managing mass care (shelter) sites. A table top exercise was completed with assistance of WEM staff on mass care set up and management. The shelter staff were added to the PCA portal to provide a notification option.

o WWPHRC conducted testing of the WEAVR and RAVE notification systems.

o Assured that health department staff received ICS training based on anticipated assignments in a public health emergency and per grant requirements.

o Facilitated meetings with representatives of the county long-term care facilities and Emergency Management on how to develop plans, train and exercise to meet the new CMS preparedness requirements. Provided resources for facilities and facilitated completion of an HVA (Hazard Vulnerability Assessment).
o Continued ongoing engagement and work with preparedness partners in planning, training, and exercising of emergency plans. Local planner is a member of the Amery Hospital Preparedness and Safety committee. Local planner served as an evaluator for the Amery Hospital full-scale evacuation exercise.
o Participated in tabletop exercise as part of the St. Croix Regional Medical Center’s active shooter full scale exercise. The focus of the tabletop portion to determine how the Community Services (health and human services) could and would respond for assistance in family reunification and assistance services.
o Participated in PHEP Q&A webinars for guidance and resource sharing regarding planning, training and exercising of the PHEP.
o Designated health department staff received fit-testing for use of the N-95 respirators.
o Exercised the mass clinic plan by providing influenza vaccine at all 8 Polk County school districts within a 30 day time-frame. The AAR/IP from this exercise was completed per grant requirements.
o Provided trainings and preparedness updates to health department staff on quarterly basis
o Continued participation in WWPHRC for assistance and guidance in meeting contract objectives and development of consortia-based response to emergencies.
o Revised ICS command structure to reflect personnel changes.
o Maintained after-hours notification plan for use by Dispatch to reach department staff for emergencies.
o Maintained Health department profiles in PCA portal as part of emergency notification system.
o Local planner continues to serve on the LEPC (Local Emergency Planning Committee) and provides public health preparedness information to membership.

Polk County Elder Adults/Adults at Risk Interdisciplinary Team (I-Team)
The Polk County Elder Adults/Adults at Risk Interdisciplinary Team (I-Team) met 5 times in 2017. The goal of the I-Team is to address issues concerning both cases and systems within Polk County’s Elder Abuse Program. The group generally meets every other month with a focus on improving response to victims of abuse, neglect and exploitation. The Polk County I-Team has representation from various Polk County Governmental Departments, local banks, hospitals, along with other community stakeholders. In 2018, the I-Team is looking forward to adding an educational component to their agenda in an effort to continue to broaden the knowledge base of the team.
Essential Service 5: Develop Policies and Plans that Support Individual and Community Health Efforts

Introduction: Essential Service 5 involves providing leadership for systematic community and state level planning for health improvement; development and tracking of measureable health objectives as a part of continuous quality improvement strategies and development of codes, regulations and legislation to guide the practice of public health. Highlighted in this section are the Division’s strategic plan and the Polk County Community Health Improvement Plan.

Division Strategic Plan
The Community Services Division began implementation of the 2017-20 strategic plan in 2017. Division wide priorities are 1) Workforce Development and Communication/Branding/Marketing. A priority for Behavioral Health and the Department of Children and Families is strengthening Agency Infrastructure. Additional priorities for the Health Department are Performance Management/Quality Improvement and Public Health Reaccreditation.

2017 Outcomes
All Health Department staff participated in one of the four strategic plan or CHIP workgroups. These committees are comprised of a cross sector of staff following established work plans with objectives and strategies addressing the goals of the strategic plan. Major accomplishments were:
Successful completion of the fourth annual report due for maintenance of national voluntary accreditation (PHAB)

Competency assessment of all professional staff with improvement shown in the core competency domains

Continuation of lunch and learns for all staff

Review and revision of Friend of Public Health Award Policy and Procedure

Educational/Training videos uploaded to youtube page

Evaluated and implemented changes to program and staff meeting structures

All programs on VSMG Dashboard

Communication Plans updated to meet PHAB 1.5 requirements

Released CHA and CHIP

Held Ethics Training

Annual customer satisfaction survey and compiled data

Refinement of the agency performance management plan and communications plan

Training for staff conducted on “Performance Management vs Quality Improvement”

Community Health Improvement Plan (CHIP)

Division staff worked with the three local medical centers and other community partners including the Mental Health Task Force of Polk County (MHTF) to continue the implementation phase of the CHIP process where the community takes action on the health focus areas by executing the plan and periodically measuring progress. CHIP workgroups worked to assure that Polk County can achieve the Healthier Wisconsin 2020 vision of “Everyone Living Better, Longer”.

2017 Outcomes

Substance Abuse:

- Participated in Parents Who Host Campaign to raise awareness about adults not hosting parties for underage youth. A joint press release was submitted to local papers by health officer and the sheriff about this initiative

- Expanded the Hidden in Plain Sight Mock Room to include a smaller Backpack version for events where space is limited

- Applied for and received the WI State Targeted Response Grant to address Opioid Abuse through the use of the Dose of Reality Campaign

Obesity Prevention:

- Reviewed and updated the County-Wide Recreation Guide

- Initiated development of a website that will serve as an easy to access, central resource for all recreation/physical activity opportunities throughout the county for residents and visitors to Polk County

- Secured grant funding from Operation Round Up and donations from local medical centers to help support website development

- Determined messaging and avenues in which to promote the benefits of physical activity and the recreation/physical activity opportunities website when it launches.

- Continued to Partner with Amery Hospital and Clinic in their Power-Up initiative around fruit and vegetable consumption and physical activity for school aged-children
Promoted Osceola Medical Center’s monthly *Community Table Talk* about Nutrition and Physical Activity

**Mental Health:**
- Provided assistance to Mental Health Task Force in production of Mental Health Task Force brochure for community distribution.
- The Mental Health Task Force’s Healthy Beginnings Program (an early intervention program for addressing mental health issues in children) continued successfully serving children in school-based and home-based services.
- The Mental Health Task Force continued their Y-screen program of an emotional health screening for incoming Freshman at Polk County High Schools.
- Mental Health Task Force and Amery Hospital started the Make it Ok campaign.
- Four volunteers applied to become trainers for Mental Health First Aid.

**Essential Service 6: Enforce Laws and Regulations That Protect Health and Safety**

**Introduction:** Essential Service 6 involves full enforcement of sanitary codes, especially in the food industry; full protection of drinking water supplies; enforcement of clean air standards and timely follow-up of hazards. Highlighted in this section are: the Agent Programs with the State Department of Health Services (DHS) and the Department of Natural Resources (DNR), Human Health Hazard Control, Beach Water Testing and Youth Tobacco Compliance Investigations.

**Agent Program**
Since 2002, the PCHD has been an agent for the DHS to license and inspect hotels, motels, restaurants, swimming pools, campgrounds, bed and breakfasts, tourist rooming houses, tattoo and body art establishments and schools. The goal of this program is to assure clean and safe establishments for the public.

**2017 Outcomes**
- 365 establishments were licensed with 443 inspections occurring
- ServSafe Certified Food Manager training was provided to 72 individuals
- Food safety information was provided to 104 community group participants

**DNR Well Water Program**
Since 2007, the PCHD has been an agent for the DNR to investigate and test transient wells in Polk County. The program requires an annual test for bacteria and nitrate for any well that has public access to water for at least 25 individuals at least 60 days of the year. In 2010, PCHD assumed agent for the DNR in Burnett County.

**2017 Outcomes**
For More information visit the WI Wins website at: http://www.wisconsinwins.com/

- Polk: 165 establishments completed water testing; 4 had bacteria present; 3 Level 2 Assessments were completed and 42 follow up tests were conducted to assure return to safe levels after treatment. Nitrite samples were taken on 5 establishments. Nitrate samples were taken on all 165 establishments. One (1) establishment is posting for elevated nitrate levels. Forty one (41) sanitary surveys and 124 annual site visits were completed.
- Burnett: 169 establishments completed water testing; 4 had bacteria present; 5 Level 2 Assessments were completed and 73 follow up tests were conducted to assure return to safe levels after treatment. Nitrite samples were taken on 2 establishments. Nitrate samples were taken on all 169 establishments. One (1) establishment is posting for elevated nitrate levels. Forty three (43) sanitary surveys and 126 annual site visits were completed.

Recreational Beach Testing Program
The purpose of this program is to conduct bacteriological water testing of selected public recreational beaches in Polk County to assure water safety. Seven beaches were monitored for fecal bacteria in 2017. They include: Lotus Lake, Lake O’ the Dalles, Bone Lake, Half Moon Lake, Big Butternut, Balsam Lake, and South Twin Lake. Weekly sampling of these lakes was completed from May 31 through September 6, 2017. Eighty nine (89) samples were collected during this period.

2017 Outcomes
- Balsam Lake and Half Moon Lake beaches were closed June 23, 2017, due to consecutive tests with high levels of fecal coliform Bacteria. They reopened July 10, 2017, following consecutive safe coliform bacteria levels. Balsam Lake beach had a swimming advisory posted July 13, 2017, due to consecutive tests with high levels of fecal coliform bacteria. The advisory was lifted Aug. 2, 2017, following consecutive safe coliform bacteria levels.

Youth Tobacco Compliance Investigations
The Multi-Jurisdictional Tobacco Control Program (W3TFL) contracts with DHS to conduct tobacco compliance investigations. The goal of this program is to prevent sales of tobacco products to minors by educating retailers on not selling tobacco to minors. A specific on-line training tool is provided at www.smokecheck.org. The state goal is to reduce sales rates to fewer than 10 percent. Western Wisconsin Working for Tobacco-Free Living completed the compliance checks in Barron County, Burnett County, Pierce County, Polk County, Rusk County and St. Croix County. Overall between the six counties 24 retailers sold to minors during our checks this year, which means 90.4% of the establishments checked within the six counties are in compliance with the law which prohibits sales of tobacco to anyone under the age of 18!

<table>
<thead>
<tr>
<th>County</th>
<th># of Sales</th>
<th>Sale Rate</th>
<th>% in Compliance</th>
<th>2016 Sale Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barron</td>
<td>2</td>
<td>4.1%</td>
<td>97.8%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Burnett</td>
<td>2</td>
<td>8.3%</td>
<td>96.7%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Pierce</td>
<td>6</td>
<td>20%</td>
<td>65.6%</td>
<td>34.4%</td>
</tr>
<tr>
<td>Polk</td>
<td>5</td>
<td>8.5%</td>
<td>84.5%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Rusk</td>
<td>0</td>
<td>0%</td>
<td>86.4%</td>
<td>13.6%</td>
</tr>
<tr>
<td>St. Croix</td>
<td>9</td>
<td>11.7%</td>
<td>82.2%</td>
<td>17.8%</td>
</tr>
</tbody>
</table>

For More information visit the WI Wins website at: http://www.wisconsinwins.com/
Essential Service 7: Link People to Needed Personal Health Services

**Introduction:** Essential Service 7 involves assuring effective entry for disadvantaged people into a coordinated system of clinical care; linkage to services for special population groups; ongoing care coordination; targeted health information to high risk population groups and technical assistance for effective worksite health promotion/disease prevention programs. Highlighted in his section are the Division’s clinical, public health, behavioral health and child welfare programs.

The Birth to 3 Program is for children ages birth to 36 months. Eligibility is based on a diagnosed disability or significant delay in one or more areas of development. Services may begin before the child leaves the hospital after birth and may continue until the child is transitioned into other services when they turn three years old. Birth to 3 services include family services coordination, special instruction, parent education, vision instruction, hearing services, assistive technology, referral to community resources and therapy services, which may include physical therapy, occupational therapy and speech/language therapy.

**2017 Outcomes**
- One hundred twenty (120) referrals to the program were received due to concerns about child development. Of the 120 referrals, 85 children were screened or evaluated by the Birth to 3 Program and 53 children qualified and enrolled.
- A total of 97 children were enrolled in the program in 2017; 44 children remained in the program from 2016.
- Of the 97 enrollees, 50 children transitioned out of the program in 2017. These children either met their goals or aged out of the program and were referred to other services including 32 children who were referred to local school districts for special education.

**Family Health Benefits Counseling/Badger Care Outreach**
Family health benefits counseling is provided to assist families in accessing health care financing through outreach, counseling and advocacy. PCHD has a contract with the state for Badger Care Outreach & Enrollment and is a Certified Application Counselor agency for CMS.

**2017 Outcomes**
- 2,062 persons received information, referrals to community resources, or assistance with insurance applications. 592 adults and children were assisted with applications for Badger Care, Foodshare, Express Enrollment, Family Planning Only and Marketplace
Jail Health

The Jail Health Program is a cooperative and coordinated effort by the PCHD, a physician representing the Polk County Medical Society, the Polk County Sheriff, and the jail staff. The goal is to assure that each inmate has access to adequate medical care.

2017 Outcomes

- Nursing staff conducted 1,803 sick call visits and 515 inmate health histories
- Inmates were referred for 129 emergency room visits; 132 psychiatry visits (in-house), 55 medical visits, 6 dental visits
- Nursing consultation included 149 physician contacts, 132 mental health provider contacts, and 50 contacts with other ancillary health care providers
- On average, 42 inmates each week received medication setup services involving an average of 152 medications
- 515 inmates were symptomatically screened for tuberculosis and 14 inmates received tuberculosis skin testing
- Jail staff were given 46 immunizations and provided 21 health related trainings

Oral Health Services

Healthy teeth are very important to a child’s overall health. Early childhood caries preventive services include anticipatory guidance for parents and other caregivers and distribution of fluoride supplements. Five Polk county school districts participate in a weekly fluoride mouth rinse program: Luck, Unity, St. Croix Falls, Clayton and Frederic. The Northlakes Community Clinic expanded dental services onsite at the Health Department to low income families due to the high demand for services in 2017.

2017 Outcomes

- Ninety one (91) children ages 6 months through 17 years participated in the agency fluoride supplement program
- Six hundred eighty-eight (688) school aged children rinsed weekly with fluoride in the 2016-2017 school year
- Northlakes Community Clinic provided dental services including fluoride varnish to children in all eight Polk County School Districts. A total of 1,453 students benefited
- Through WIC, 129 fluoride varnishes were completed between May and December 2017
- Through the Polk County Early Learning Center, 96 fluoride varnishes were completed in 2017
Prenatal Care Coordination (PNCC)

Prenatal Care Coordination (PNCC) Services are available to Medicaid-eligible pregnant women with a high risk for adverse pregnancy outcomes. High-risk pregnancies require additional prenatal care services, coordination, and follow up because of medical or non-medical factors that include psychosocial, behavioral, environmental and nutritional factors. PCHD incorporates PNCC services with WIC in order to maximize convenience and service for clients.

2017 Outcomes
- One hundred one (111) risk assessments were completed; 103 women were eligible for the program and 81 enrolled; 27 women continued in the program from 2016
- The 108 women enrolled in PNCC received 1032 public health nursing visits and 121 dietician visits

Reproductive Health
The goal of the agency Reproductive Health Program is to increase the proportion of women at risk of unintended pregnancy who use contraception. In addition, the program offers pregnancy testing, sexually transmitted infection testing and treatment and access to Medicaid “Family Planning Only” services.

2017 Outcomes
- 378 unduplicated clients were served with 895 visits; 18% of clients were teens. Client volume decreased in 2017
- 59% of clients were at or below 100% of the federal poverty level; 4% of clients were at or above 250% of the federal poverty level
- 288 women (92%) were enrolled in Family Planning Only Services (BadgerCare) program
- 326 doses of emergency contraception were provided in advance of actual need
- 74 doses of emergency contraception were provided on an emergency basis
- 68% of unduplicated clients received a supply of condoms at least once in 2017
- Risk assessment for Chlamydia was done for every client; 16 cases of Chlamydia were identified; 15 were appropriately treated using CDC STD Treatment Guidelines; 5 cases of Gonorrhea were identified; 4 were appropriately treated using CDC STD Treatment Guidelines

School Nursing Program
The Health Department provides school nursing consultation to the eight Polk County school districts, one private school, and the CESA 11 Headstart Center. Services include: education and consultation regarding me, consultation with teachers on children with special health care needs, and classroom assistance with health education presentations.

2017 Outcomes
- 127 hours of nursing service were provided to Polk County schools. Coordination of health screening programs occurred upon request of the school districts
- 24 individual health conferences were conducted with students, parents and staff. 763 health screenings were conducted; 2 treatments were administered
School Based Social Work
The Polk County Department of Children and Families has entered into a partnership with the Unity School District to provide a school based social worker at Unity Schools. The provision of school based social work is a component of a greater initiative to provide trauma informed care and pupil services within Unity Schools. The school based social worker acts as a liaison between the County and Unity Schools and provides trauma informed services/interventions.

2017 Outcomes (2016-17 school year)
- Assisted 54 students and their families with navigating and accessing program areas/services in the County’s Community Services Division (Economic Support, Behavioral Health, Substance Abuse, Public Health, Children’s Long Term Support, Child Protective Services, and Youth Justice)
- Assisted families with accessing and utilizing other community resources to meet identified needs (such as mental health services, child care, housing assistance, transportation, health insurance coverage, etc.)
- Facilitated communication and coordination between the school, county services, and other community service providers
- Participated in staffing/consultation with school staff related to student behavioral and/or truancy concerns
- Assisted with truancy interventions

Women, Infant, and Children (WIC) Nutrition Program
The purpose of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is to promote and maintain the health and well-being of nutritionally at-risk pregnant, breastfeeding and postpartum women, infants and children under 5 years of age. WIC provides supplemental nutritious foods, nutrition and breastfeeding information, and referrals to other health and nutrition services. Income eligibility requirements for WIC extend to 185% of poverty. The WIC foods align with the Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics. It promotes WIC as the premier public health nutrition program with a strong focus on breastfeeding as the normal way to feed babies. Foods provided include fruits and vegetables, whole grains such as 100% whole wheat bread, tortillas, cereal or brown rice, protein foods such as peanut butter, beans, peas, eggs and canned fish, low fat milk, baby foods and formula. The WIC Farmer’s Market Nutrition Program provides vouchers for families to purchase fresh produce from local farmers.

2017 Outcomes
- WIC staff enrolled 1059 unduplicated WIC participants, a decrease of 102 participants from 2016; the average monthly caseload was 651 – a decrease in participation from 2016 of approximately 50 participants monthly from 2016
- 858 WIC certifications were completed; 1283 individual nutrition visits with a WIC RD; 1346 participants received secondary nutrition education through WIC, with some education in coordination with the Nutrition Educator from UW Extension’s FoodWise Program
- 286 families were issued Farmers’ Market drafts (14 less families than in 2016) with a 30% redemption rate (an increase from 26% in 2016). The value of the Farmers’ Market drafts increased from $20.00/family in 2016 to $24.00/family in 2017. Total redemption dollars increased from $1,570 in 2016 to $2,040 in 2017.
$399,861.61 food dollars were spent in Polk County for WIC foods (decrease of $56,999.13 from 2016)

**WIC Breastfeeding Peer Counseling Program**

The WIC Breastfeeding Peer Counseling Program provides frequent contacts to pregnant and breastfeeding mothers for breastfeeding promotion and support. A Peer fills a special niche in providing support to WIC participants when they need it most, which often includes evenings and weekends. Peers have basic breastfeeding knowledge to assist mothers with common concerns. She also can relate well to the WIC mothers through her own personal experience with WIC and breastfeeding. The WIC Breastfeeding Coordinator has specialized training to assist mothers with more complex problems.

**2017 Outcomes**
- 127 support calls made to pregnant and breastfeeding mothers
- 26 women attended breastfeeding classes
- 10 home or individual visits were made to mothers for breastfeeding support
- 9 breast pumps were provided to women

**2016 Breastfeeding Quality Measures**

<table>
<thead>
<tr>
<th>Breastfeeding Incidence and Duration Statistics</th>
<th>State WIC Goal</th>
<th>Statewide Comparison</th>
<th>Polk County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breastfeeding incidence (mom on WIC prenatally)</td>
<td>&gt;82%</td>
<td>72.8%</td>
<td>85.5%</td>
</tr>
<tr>
<td>1 month duration (all infants on WIC)</td>
<td>&gt;77%</td>
<td>73.5%</td>
<td>81.4%</td>
</tr>
<tr>
<td>3 months duration (all infants on WIC)</td>
<td>&gt;65%</td>
<td>57.9%</td>
<td>66.0%</td>
</tr>
<tr>
<td>6 months duration (all infants on WIC)</td>
<td>&gt;60%</td>
<td>35.7%</td>
<td>54.5%</td>
</tr>
<tr>
<td>12 months duration (all infants on WIC)</td>
<td>&gt;34%</td>
<td>16.2%</td>
<td>22.4%</td>
</tr>
<tr>
<td>Exclusively Breastfed – 1 month duration</td>
<td>&gt;57%</td>
<td>38.7%</td>
<td>47.3%</td>
</tr>
<tr>
<td>Exclusively Breastfed - 3 months duration</td>
<td>&gt;44%</td>
<td>27.6%</td>
<td>32.2%</td>
</tr>
<tr>
<td>Exclusively Breastfed - 6 months duration</td>
<td>&gt;24%</td>
<td>12.0%</td>
<td>22.8%</td>
</tr>
</tbody>
</table>

**Polk County Breastfeeding Coalition**

The PCHD is an active and engaged member of the breastfeeding coalition. The mission of the coalition is to increase the initiation, duration, and exclusivity of breastfeeding in Polk County, by supporting, protecting, and promoting practices that are helpful to breastfeeding mothers and babies.

**2017 Outcomes**
- Completed second edition of Nursing Is Normal (a traveling photography exhibit that supports and encourages breastfeeding families) with 12 updated photos of mothers and infants breastfeeding
- Interacted weekly with the community on the PCBC Facebook site
o Updated the Mother Baby Comfort Room at the Polk County Fair to create a more welcoming and calming environment.
o In celebration of World Breastfeeding Week, educated OB staff at each hospital on hand expression and provided a patient handout, Hand Expression and Spoon Feeding, for approximately half of each hospital’s annual births.
o Participated in the 7th Annual Mom and Baby Expo
o Updated and disseminated the coalition support flyer throughout Polk County
o Provided guidance and support to the Amery Hospital and Clinic as they implemented their breastfeeding support group, Baby Bistro.
o Shared introductory information on Wisconsin-Coffective, a new initiative to coordinate WIC and local hospitals on preparing women for a successful breastfeeding experience.

Fit Families Program
Fit Families is a public health nutrition program funded under the USDA’s Supplemental Nutrition Assistance Program for families with children ages 2 to 4 years old. It strives to prevent childhood overweight/obesity by providing individual coaching to empower families to adopt healthy eating and physical activity behaviors. In addition to engaging families, the program also encourages a healthy lifestyle for agency staff and partnering with community groups to reinforce Fit Families health messages and to promote and protect the health of all children in the community. Community partnership exists with Polk County Head Start and Early Head Start and Family Resource Center.

2017 Outcomes
o 53 families enrolled in the program with
o 40 completed the full year participation
o 95% of families who completed their year received 10 or more contacts out of possible 13
o Fruit and vegetable consumption of ≥4 servings/day (1/2 cup serving size) decreased from 32.5% at enrollment to 22.5% after one year
o Juice consumption of <6 oz./day increased from 47.5% at enrollment to 77.5% after one year
o Sweetened beverage consumption of ≤1 - 8 ounce serving/week improved from 82.5% at enrollment to 100% after one year
o Screen time of <2 hours/day improved from 77.5% at enrollment to 82.5% after one year
o Physical activity of ≥60 minutes/day improved from 87.5% at enrollment to 97.5% after one year

Wisconsin Well Woman Program (WWWP)
The Wisconsin Women's Cancer Control Program is a statewide program funded by the Center for Disease Control that provides free health services to low income, uninsured or underinsured women age 45-64. Services include breast and cervical cancer screening, yearly breast exam, pelvic exam, pap test and mammogram. The Well Women Program transitioned to a regional model of service provision in July 2015. PCHD is a regional coordinating agency for Barron, Burnett, Douglas, Polk, Rusk and Washburn counties.
2017 Outcomes
- 85 women were enrolled in WWWP
- 21 women were enrolled in Wisconsin Well Woman Medicaid in order to receive treatment
- Program coordinator made 323 technical support contacts with partner medical clinics

Child Protective Services (CPS)
The goal of Child Protective Services (CPS system) is to support parents/caregivers in making necessary changes so children are safe and protected in their homes. Polk County Department of Children and Families receives and responds to reports of alleged abuse and/or neglect of children. The agency decides if the information in the report is potential child abuse or neglect according to Wisconsin law. A timeframe for response is assigned and a trained CPS worker responds to assess for safety of the child. An Initial Assessment is completed within 60 days. The assessment must be conducted in accordance with Wisconsin Access and Initial Assessment Standards. After the Initial Assessment period, a decision is made whether or not to continue to work with the family. If it is decided that additional services are needed, the family will engage in Ongoing Services with a trained CPS worker. Wisconsin has Ongoing Standards that guides the Ongoing Services Practice. The focus of the CPS assessment is not to establish legal responsibility or make criminal determinations. CPS focuses on child safety and engaging with families to keep children safely in their homes whenever possible.

2017 Outcomes
- 804 total CPS reports were received in 2017 – a 9.5% increase from 2016
- 315 of the total reports were screened in – a 38.8% increase from 2016
- 189 of the total reports were screened out – a 3.6% decrease from 2016
- 544 children were assessed in the 315 screened in reports – a 42.7% increase from 2016
- Alleged physical abuse increased by 40.4% from 2016
- Alleged neglect (covers, among other, drug use by parents) increased by 30.4% from 2016
- Alleged sexual abuse increased by 41.7% from 2016
- Alleged emotional damage increased by 57.1% from 2016
- Response time to screened in reports
  - Same day responses increased by 70% from 2016
  - 24-48 hour responses increased by 51% from 2016
  - 5 day responses increased by 29% from 2016
- Child welfare responses
  - Over 5,500 case contacts (e.g., phone calls, face to face, home visits, court appearances, etc.) were logged by CPS workers and parent aides
  - 31 reports of abuse/neglect were accepted as a child welfare response which allows CPS to offer to voluntarily work with a family when criteria for an initial assessment is not met. There was a 29.5% decrease in child welfare responses from 2016.
  - Removal from parent/caregiver
    - 18 children were removed for physical abuse in the home – a 28.5% increase from 2016
    - 5 children removed due to sexual abuse
    - 131 children removed due to neglect – an 82% increase from 2016
- 5 children removed due to caretaker alcohol abuse
- 77 children removed due to caretaker drug use – a 13% increase from 2016

Ongoing cases
- 88 families and 318 children were served by Ongoing workers – a 14% increase in number of children served from 2016
- 79 children were served by CPS Parent Aides (family support workers)

**Family Support Program**
The Family Support Program is staffed by two Family Support Workers who provide services to clients at both the investigative and ongoing stages of Child Protection. The Family Support Workers are essential members of the Child Protective Services team and work directly with families, children and social workers to strengthen and support families while offering the following services: parenting skills, supervised visitation, communication skills, safety services, nutritional information, housing, money management, and personal hygiene. Family Support Workers often act as liaisons between the family and providers, assist parents in achieving necessary outcomes, and are instrumental in strengthening family bonds and connections.

**Children’s Long Term Support (CLTS)**
The Children’s Long Term Support Home and Community Based Medicaid Waivers provides Medicaid funding to support children who are living at home or in the community and who have substantial limitation in multiple daily activities as a result of one or more of the following disabilities: developmental disabilities, severe emotional disturbances, and physical disabilities. Funding can be used to support a range of different services that are identified based on an individual assessment of the child and his or her needs. In order to be eligible for the program, children/young adults must be under 22 years of age, be eligible for Wisconsin Medicaid, live at home or in a foster care setting, have a level of care need that is typically provided in an institutional setting such as a hospital, a nursing home, or an institution for people with developmental disabilities and be able to receive safe and appropriate care at home and/or in the community. Eligibility is established by completing an assessment of the child’s needs at a home visit, acquiring records related to the child’s care and determining level of care based upon an online functional screening tool that the county service coordinator completes.

**Children’s Community Options Program**
The purpose of CCOP is to provide a coordinated approach to supporting families who have a child with a long-term disability. Through a collaborative relationship with the family, supports and services aimed at achieving desired outcomes are identified, prioritized, and implemented. CCOP funds are designated for the purpose of purchasing goods and services that respond to assessed need and desired outcomes, as identified in each participant’s child and family-centered individual support plan (ISP).
2017 Outcomes

- 45 Children were served through CCOP and Children’s Long Term Support Waiver funds
- There were over 120 face to face visits
- 29 referrals were screened for eligibility – a 190% increase from 2016
- 9 children were removed from the waitlist and served through the programs – a 300% increase from 2016
- The Family Support Unit added case management services for those children being served by both CLTS and CCS programming.
- The Family Support Unit began to, and continues to, navigate multiple service and technology changes initiated by the State to meet federal programming requirements. This will ultimately lead to more children in Polk County being served.

Foster Care, Kinship Care and Daycare Certification

The Polk County Foster Care Program consists of the Foster Care, Kinship and Daycare Certification programs. The Foster Care Program helps to provide safe and stable out-of-home care for children until they are reunified with their parents or an alternative plan for permanence is developed. The Foster Care Coordinator is responsible for the recruitment of local foster homes, processing and approving foster care applications, completing home studies, re-licensing foster homes, providing ongoing training and support. A foster care license is valid for two years; at this point the home applies to be re-licensed or allows their license to expire. Polk County currently has 27 licensed foster homes. The Polk County Kinship Care Program is designed to provide financial support to a child who resides with a relative. Kinship Care supports the concept of children residing with a relative as an alternative to entering foster care or another type of out-of-home placement. The Kinship Care Program consists of three varying types of Kinship homes: voluntary, court ordered, and long term. The Foster Care Coordinator is responsible for processing and approving Kinship Care applications, monitoring placements for compliance, and managing the waitlist. The Polk County Daycare Certification Program certifies Polk County daycare providers. Daycare certification, oversight and quality assurance service was contracted to Eau Claire County in 2017.

2017 Outcomes

- An average of 34 children per month were in foster care in 2016
- 7 new foster homes were licensed. Only one of the seven is considered a general license home – able to accept any child. Six of the seven are child-specific licenses; these are generally granted to family or like kin who will have placement of children. The number of family members being licensed for child specific homes is increasing. Polk County has 20 general license foster homes and 1 contracted shelter home
- Foster parents have an average of six contacts per year with foster care coordinator/foster care support for training sessions, support groups, and re-licensing visits.
- 42% of children removed from their primary homes were placed with relatives. Conversely, 52% were unable to be placed with relatives and required licensed foster care.
- 56 children received kinship funding, 2 children were on waitlist as of end of 2017
  - 22 voluntary kinship cases; 14 long term kinship cases
  - 20 court ordered kinship cases
Coordinated Services Team (CST)
CST is a wraparound model of care for children with multiple needs. The wraparound process is committed to creatively addressing child and family needs using community-based supports. Support teams are developed in collaboration with the family and include the child, parents, and any other individuals who are important in the life of the child and family. Teams work together to identify goals and to develop strategies to achieve them.

2017 Outcomes
- Developed the foundation for establishing a CST program in Polk County, including creating policies and procedures for referrals, intake, assessment, and individualized goal planning
- Presented information about CST program goals and philosophy to community partners, including local school districts and service providers
- Partnered with the County’s existing Coordinating Committee for COP, CLTS, and Birth-3 to provide program oversight and quality assurance
- Enrolled 6 youth and their families in CST

Youth Justice (YJ)
The Youth Justice unit supports the needs of adolescents, families and the community by providing supervision, resources and opportunities to help prevent recidivism through advocacy, education, and accountability. Youth Justice social workers supervise youth that are delinquent, truant and uncontrollable through both court ordered and voluntary services. Court ordered supervision is often the result of either delinquent or habitually truant behaviors. Voluntary services are generally offered after a request by parents or from the community in order to prevent future criminal justice involvement. Youth Justice social workers have a comprehensive understanding of the complex challenges/issues youth face that can often lead to contact with the criminal justice system. Social workers use evidence-based practice to identify those issues that are the biggest impediment to the family’s success. Through collaboration with community partners and natural family supports, social workers empower clients in order to reduce the likelihood of future involvement with the justice system.

2017 Outcomes
- 219 referrals received by YJ intake; Case management and supervision provided to 89 juveniles and their respective families
- 69% of supervised youth were male; 31% of supervised youth were female; 62% of supervised youth have experienced significant trauma in their lifetime
- 19 juveniles were placed outside of their homes; 9 were successfully reunified with their families
- 13% of supervised juveniles were adjudicated for a new crime
• Most common reasons for service needs: Acting out aggressively, habitual truancy, inappropriate sexual behaviors, alcohol/other drug use issues, criminal activity

**Community Support Program (CSP)**
The Community Support program provides client-focused individualized community based services to people diagnosed with a severe and persistent mental illness. Treatment is provided by a multi-disciplinary team in collaboration with the consumer, their family and the community where the consumer resides. The goal of the program is to reduce the disabling effects of the consumer’s psychiatric symptoms through evidence based practices, education and supportive resources. Services emphasize community based treatment to reduce the need for hospitalization and institutional care and allow consumers to achieve the highest level of functioning and quality of life to which they are capable.

**2017 Outcomes**
- 29 consumers served. There were 7 admissions and 9 discharges. At year end, the CSP Team was providing services to 24 Consumers.
- According to the CSP Treatment Evaluation Profile Summary for 2017, 70.8% of the CSP consumers demonstrated a major to stabilizing improvement in their psychiatric symptoms.
- Discharge disposition: Successful completion of goals, transferring to CCS, transferring to a managed care organization due to health issues, or declined to continue with CSP services.
- CSP Consumers had a combined total of 0 days placed in a psychiatric hospital and 2 days in an Institute for Mental Disease (IMD). This is a decrease from 2016 which was 14 days.
- Implementation of Simplified Intervention to Modify Physical activity, Lifestyle & Eating behavior (SIMPLE). SIMPLE is a 16 week group focusing on healthy eating and increased physical activity and is run by a CSP Case Manager and the CSP Nurse.
- At the end of 2017, CSP had 5 referrals on a waiting list.
- CSP Team was provided with funding from the Mental Health Block Grant to implement Peer Support in 2018. This program will assist CSP consumers in building healthy relationships which support recovery.

**Comprehensive Community Services (CCS)**
Polk County continues to partner with the Western Region Wellness and Recovery Consortium to administer the Comprehensive Community Services (CCS) program. During this second year of CCS implementation, there was increased focus on quality assurance and quality improvement. Comprehensive Community Services provides a flexible array of individualized community based psychosocial rehabilitation services authorized by a mental health professional to consumers with mental health or substance use issues across the lifespan. CCS uses a recovery and wellness oriented model for assessment and approach to service planning. CCS is generally provided for individuals who are in need of a higher intensity level of services than outpatient mental health services and less intensity than Community Support Program services.
2017 Outcomes
- During 2017 37 consumers were served in the CCS Program. 30 continued in services at year end.
- 16 new individuals were enrolled in program
- 7 individuals were discharged in 2017. Discharge reasons included successful completion of goals (3 individuals); moving out of the area (4)
- 45 individuals were on a waiting list for CCS at the end of 2017
- 59% enrollment rate (16 of 27 referrals/applications, eligible & enrolled in program)
- 90% expecting to meet goals in 6 months to 3 years
- Program growth was 12% from 33 participants in 2016 to 37 in 2017

Emergency Mental Health Services
This program is a collaborative effort between the Polk County Behavioral Health Department (PCBHD), hospitals, community members, service providers and law enforcement. Emergency Mental Health Services provides support to persons who are experiencing a mental health crisis or situation likely to turn into a mental health crisis if supportive services are not utilized. PCBHD contracts with Northwest Connections (NWC) to provide a mental health and substance use crisis line that includes telephone support and mobile services. The goals of this service are to provide callers with information, support, assessment, intervention and response planning. In addition to NWC telephone, NWC mobile services provide onsite intervention, assessment and response planning. All documentation is sent to the county for follow-up and linkage. In addition, PCBHD provides follow up and linkage for the crisis line that includes: walk in services, crisis planning, crisis stabilization (out-of-home short term placement), three party petition screenings, and jail assessments for suicide watch. Emergency Mental Health Services collaborates with law enforcement, jail, Corporation Counsel, emergency rooms, schools, inpatient units, outpatient mental health and substance abuse providers, peer supports and homeless shelters in an effort to provide coordination of care.

2017 Outcomes
- 610 unduplicated clients were served
- There were 1857 emergency mental health services contacts, a decrease of 8.6% from 2016
- There were 84 total emergency detentions, an overall decrease of 2.3% from 2016
- Eleven (11) assessments for suicide risk were completed at the Polk County jail
- In collaboration with Corporation Counsel, twenty seven (27) Three Party Petitions were screened and eleven (11) were implemented
  ✐ The Emergency Services Clinical Manager and Polk County Sheriff’s Deputy are collaborating to bring Crisis Intervention Team (CIT) Training to Polk County Sheriff’s Department
  ✐ The Emergency Services Clinical Manager in partnership with key Polk County stakeholders participated in Zero Suicide Training and completed a workforce survey to determine training needs
  ✐ PCBHD implemented increased Crisis Billing
  ✐ Eighty three (83) mobile assessments were completed in the field
  ✐ PCBHD received a Dementia Crisis Innovation Grant and hired a Project Coordinator
Outpatient Mental Health Clinic

The Polk County Outpatient Mental Health Clinic provides an array of services including outpatient therapy for individuals and groups. Two therapy groups are offered: Women Initiating New Growth & Self-Discovery (WINGS) is for women with both Mental Health and Substance Use Disorders who are learning to manage, cope with, and recover from a mental illness and/or addiction while building trust and support with other women. Dialectical Behavioral Therapy (DBT) Group focuses on fun and easy ways for individuals addressing Anger, Anxiety, Depression, and Suicidal Thoughts to learn new coping skills and get support from others. Psychiatric Services are offered two days per week. The Psychiatric Team includes a Psychiatrist who completes assessments and prescribes medications and a Registered Nurse who monitors medication side effects, provides injections, and works with clients to maintain medication-compliance. Polk County Mental Health Therapists utilize multiple therapeutic techniques while providing services. These may include Trauma-Focused Cognitive Behavioral Therapy, Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Eye Movement Desensitization and Reprocessing, and Motivational Interviewing.

2017 Outcomes

- **Psychiatric Services** - 453 unique clients were served - an increase of 3.4%; 2,206 visits overall resulting in a 30% increase in visits over 2016
- **Outpatient Therapy** - 230 unique clients were served which was a 24% decrease from 2016; 1,408 visits, a 14.75% increase over 2016
- **Customer Satisfaction** - 410 (increase of 215.3%), surveys were completed in 2017; 72% of respondents identified themselves as being very satisfied; 24% as being somewhat satisfied with the services they received; 50% of clients identified themselves as feeling much better and 30% of clients identified as feeling somewhat better after beginning services in the Outpatient Clinic
- Polk County Mental Health Therapist worked with Amery School District to provide free depression screening to identify youth in the community who are at risk, but may not yet be connected to providers
- PCBHD hired a dual licensed therapist, who is trained in Trauma Focused-Cognitive Behavioral Therapy

Targeted Case Management (TCM)

Behavioral Health Social Workers assist a variety of clients in managing their Mental Health and Substance Use needs. This includes clients on Settlement Agreements, Stipulations, and Commitments following crisis involvement. Behavioral Health Social Workers also assist clients with long term mental health needs who are not able to function independently, but do not meet criteria for other programs such as the Community Support Program or Comprehensive Community Services. This includes individuals receiving Community Mental Health (CMH) funding as well as individuals with mental health needs in protective placements.
2017 Outcomes
  o Eighty (80) clients were served - an increase of 21% over 2016
  o 56 clients were on settlement agreements, stipulations, and/or commitments; 2 voluntary clients; 6 CMH grant clients; 2 clients in protective placement
  o Social Workers completed 1,824 hours of services in 2017; a 94% increase over 2016
  o Ten (10) individuals were recommitted compared to 9 in 2016
  o Social Workers increased their education regarding suicide assessment, prevention and management by attending the annual Crisis Intervention Conference

Substance Abuse Services (SAS)
Operating While Intoxicated (OWI) Driver Safety Plan Assessment Program
An Intoxicated Driver Program (IDP) Assessor meets with any Polk County resident who receives an OWI, or nonresident who receives an OWI in Polk County to determine required programming for the driver to maintain driving privileges. Based on the assessment, a plan is coordinated with the Wisconsin Department of Motor Vehicles (DMV).

Intoxicated Driver Intervention Program (IDIP) – A case management service to initiate and affirm program completion of driver safety plan requirements to the courts within 6 months of initial court date.

Adult and Adolescent Substance Use Assessment – A licensed counselor meets with individuals to determine what level of professional treatment support may be beneficial for improving the success of managing or abstaining from substance use. If detoxification or residential services are needed, the counselor will assist in the transfer of those services to another agency.

Individual and Group Counseling Services – A licensed counselor meets with clients individually or group sessions, delivering treatment planning and evidenced based programming or support as clients develop and improve their skills in early recovery and relapse prevention.

2017 Outcomes
  o 226 unique clients served
  o 176 OWI assessments/driver safety plans completed
  o Five Smart start Breathalyzer units installed
  o 15 IDIP clients served
  o 723 drug screens collected; 15.76% positive for substance use. This is a 6.64% decrease from 2016.

Treatment Court
Treatment Court provides services for Polk County residents who are high risk, high need individuals struggling with chemical dependency and legal issues. Using evidence based practices; the program addresses all aspects of each individual’s life that are hindering them from becoming successful and responsible members of the community. Stage 1 participants have weekly meetings
with their case manager, probation officer, and the court, in addition to multiple times per week drug screening. Participants also attend Mental Health and Substance Use Counseling appointments several times per week and self-help group meetings three times per week. Some areas that may be addressed in addition to addiction include mental health, education, housing, poverty, transportation, family dynamics, and employment.

2017 Outcomes
- 15 applicants -10 admissions. Of the five who were not accepted, 3 were exempt due to violent offender status, 1 did not meet the high risk/high need criteria, and one did not have the capacity to benefit from treatment court
- Six individuals graduated from the treatment court in 2017; one female and five males. There were no terminations in 2017. Total sober days for participants in 2017 was 1,709 days.
- The treatment court implemented case management in 2017, including an assessment of all individuals entering the program, in addition to a case plan and regular case management for all treatment court participants. This has increased the array of services offered to participants. Treatment Court participants are now engaged in substance use recovery services, mental health services, educational programs, work, and community services.

Adult Protective Services (APS) (Elder) Adults-At-Risk Agency

This program provides investigation, follow up and linkages to services for adults at risk of or experiencing abuse. There are many types of abuse. The most obvious is physical abuse. There are other types that do not involve any physical violence, such as verbal or emotional abuse, financial exploitation, sexual assault, or neglect or self-neglect.

Descriptions of the two populations protected in the (Elder) Adults-At-Risk Category are:

- Adult-at-Risk, which is any adult who has a physical or mental condition that substantially impairs his or her ability to care for his or her needs and who has experienced, is currently experiencing, or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation [s.55.01(1e)]. An “elder adult-at-risk” is any person age 60 or older who has experienced, is currently experiencing, or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation [s.46.90(1)(br)].

Guardianships/Protective Placements

This program consists of paperwork petitioning the court for guardianship/protective placement, comprehensive evaluations, possibly appearing in court, and conducting yearly protective placement reviews. The social worker makes a determination as to whether the current placement is the least restrictive placement for the client. This report is forwarded to the court for review. Polk County's Corporation Counsel is involved in guardianship cases where the client meets eligibility guidelines for income and assets. In cases where the client’s income is above our guidelines for eligibility, the family must employ a private attorney to do the guardianship and protective placement.

2017 Outcomes
- 309 intakes were reviewed and screened for services
- 167 intakes resulted in information and referrals to the appropriate resources
- 47 adults at risk clients were offered services directly
- 24 guardianships were filed
- 53 investigations for abuse or neglect were conducted; 12 comprehensive evaluations were conducted
- 63 annual reviews of protective placements were completed at the request of Polk County Circuit Court
- Enrolled three (3) individuals into AFCSP
- I-Team continues to meet every other month to address local concerns

**Economic Support – Great Rivers Consortium**

The staff of the Polk County Economic Support unit are partnered with the Great Rivers Income Maintenance Consortium, which is responsible for the administration of public assistance programs in ten counties in Northwestern Wisconsin: Barron, Burnett, Chippewa, Douglas, Dunn, Eau Claire, Pierce, Polk, St. Croix, and Washburn. Through this collaboration, the Great Rivers Call Center assists callers with the following services:

- Set eligibility filing date for BadgerCare, Medicaid, Food Share and Child Care
- Process interactive interviews for FoodShare and Childcare or schedule intake interview appointments
- Process eligibility renewals for on-going BadgerCare, Medicaid, Food Share and Child Care
- Process “add program” requests to open BadgerCare, Medicaid, and Food Share and Child Care
- Answer questions about benefits and process reported changes

**2017 Outcomes**

- 4,150 applications for economic assistance were processed; 98.46% timely
- 1,883 applications for Food Share were processed; 97.34% timely
- 2,257 healthcare applications were processed; 99.30% timely

**Wisconsin Home Energy Assistance Program (WHEAP)**

The Wisconsin Home Energy Assistance Program (WHEAP) provides assistance for heating costs, electric costs, and energy crisis situations. Operating with federal and state funding, the program provides assistance to households across the state to help lower the burden incurred with monthly energy costs. Most types of fuel are eligible to receive assistance. Whether you use wood, propane, natural gas, electricity, or fuel oil to heat your home, energy assistance is available if you qualify.

**2017 Outcomes**

- 1,631 households received paid energy assistance; total payments = $915,183
- 321 households received paid crisis assistance; total payments = $130,251
- 10 households had heating unit repairs paid; total payments = $5,122
- 24 households had heating unit replacements paid; total payments = $97,755
Essential Service 8: Assure a Competent Public and Personal Health Care Workforce

**Introduction:** Essential Service 8 involves educating and training personnel to meet the needs for public and personal health service; adoption of continuous quality improvement and life-long learning; active partnership with academic institutions. In order to provide the highest quality services, the Division strives to ensure that all our staff possesses the knowledge, skills, and abilities necessary to perform their jobs effectively and efficiently. Highlighted in this section are the Workforce Development Team, and Linkages with Academia.

**Workforce Development Team (WDT)**

**2017 Outcomes**

- Provided instructions to staff to help complete Public Health core competency assessment
- In December, all professional public health staff completed their fourth annual public health core competency assessment. Training plans for staff have been moved to an electronic format. Agency wide gaps have been identified and trainings will be provided at quarterly all staff meetings.
- The WDT sponsored three lunch and learns for staff.
- Created Succession Plan to be tested with upcoming retirements
- Analyzed employee satisfaction surveys and used coaching sessions to identify specific staff issues/ideas.
- Competency language added to a one page document to use for updating position descriptions
- Leadership activities were updated based on PHAB 1.5 requirement
- Converted 8 trainings for public health staff into web-based trainings
- Provided awareness-level RBA Training to leadership
- Provided trainings based on lowest three domains identified from competency assessment in 2016
- Division Staff attended trainings covering various common training topics such as food safety, early childhood system training, brain development, contraceptive care, incident command, breastfeeding, infant mental health, quality improvement strategies, PNCC regional workgroup, communicable disease surveillance and control, radon and Trauma Informed Care, ethics and boundaries, health literacy, cultural competency
- The Health Department also supported staff attendance at professional organization annual conferences such as WPHA, WFPRHA, WIC, WEHA and Wisconsin Healthwatch
- The Environmental Health Specialist and Environmental Health Technician serve on the Wisconsin Environmental Health Association (WEHA) Joint Education Council which plans an annual conference for Environmental Health Professionals

**Linkages with Academia**

The Division continues to have a strong relationship with institutions of higher learning and strives to provide students with internships or other opportunities that will enhance their learning about the discipline of Public Health and Social Work.
2017 Outcomes
- The agency hosted a student placement from the University of Minnesota who focused on work around the prevention of unwanted pregnancies
- PCHD worked with a DNC Student from UW-Eau Claire on a project related to PNCC Client Satisfaction Surveys
- The Health Department hosted an intern from UW-Madison who completed the WI Wins Tobacco Compliance Checks and created additional educational materials on tobacco prevention and control

Essential Service 9: Evaluate Effectiveness, Accessibility & Quality of Personal and Population Based Health Services

Introduction: Essential Service 9 calls for ongoing evaluation of health programs to assess program effectiveness and to provide information necessary for allocating resources and shaping programs. Measures for assessing this essential service indicate a need for strengthening PCHD activities in this domain. Highlighted in this section are the Public Health Accreditation Board (PHAB) standards, results of the agency statutory review, consolidated and other state contracts review process.

National Voluntary Public Health Accreditation
The PCHD was one of the first 14 health departments in the country to be nationally accredited. This is a process that requires public health departments to meet nationally established standards and measures in 12 domains. The ultimate goal is to improve public health performance to deliver high quality public health services to the population.

2017 Outcomes
- The Health Department successfully completed its fourth annual report to PHAB in June
- The Health Department participated in the Mentor/Mentee program through IWHI and provided technical assistance to one other Health Department applying for accreditation
- PCHD is on track to apply for re-accreditation status in summer of 2018.
- The Community Services Division Director is currently serving on the PHAB Accreditation Improvement Committee as well as the PHAB Small Health Department Think Tank Committee

Consolidated Contract and State Grant Program Reviews
Each year the State Division of Public Health (DPH) enters into contracts with local health departments for the provision of grant dollars targeting various public health initiatives. These grants are performance based and require attainment of negotiated objectives to assure funding.
2017 Outcomes

- Program objectives were met in the following programs: Immunization, Prevention, Lead Poisoning Prevention, Radon, Maternal Child Health, Well Woman, Reproductive Health, Tobacco Control, Oral Health, Local Preparedness Planning, Preparedness Consortium and Public Health Infrastructure
- Site visits were conducted by State DPH staff for the program areas of WIC and Birth to Three
- Positive comments were received about the programs and associated outcomes, and there were no required actions to consider.

Essential Service 10: Research for New Insights & Innovative Solutions to Health Problems

Introduction: Essential Service 10 includes continuous linkage with appropriate institutions of higher learning and research. Highlighted in this section are the agency’s participation in Wisconsin’s Practice Based Research Network (WPHRN) and other research related efforts including participation in several research studies.

Wisconsin Public Health Research Network (WPHRN)

The Wisconsin Public Health Research Network (WPHRN) is an organization with membership including public health professionals, researchers, students, and others from health departments, academic, and professional organizations. PCHD is one of 272 members engaged in ongoing collaboration with public health research centers to conduct rigorous, applied studies, designed to identify ways of improving the organization, financing and delivery of public health services in real world community settings. Current focus areas of WPHRN are aligned with State and national priorities:

- National Research Agenda for Public Health Services and Systems
- Building a Comprehensive Research Agenda: Potential Research Questions for Accreditation
- Wisconsin state health plan, Healthiest Wisconsin 2020, Health Focus Areas
- Short- and long-term priorities of the Robert Wood Johnson Foundation’s Culture of Health

2017 Outcomes

- PCHD participated in the 2017 Wisconsin Public Health Research Network Annual Survey
- PCHD participated in the 2017 NACCHO Assessment of Vector Control and Surveillance
- PCHD completed a NACCHO Communications Assessment in 2017
- Gail Peterson, PHN, received an Omaha System Excellence Award for her contributions to the development of electronic health records
- PCHD completed a NORC assessment for health departments approaching Re-accreditation in 2017
- PCHD completed a NACCHO 2017 Forces of Change Assessment
- PCHD completed a CSTE assessment of Epidemiology Capacity in 2017
- PCHD completed a WI-DHS Maternal Child Health Assessment
## Preliminary (unaudited) Financial Statement 2017

### Behavioral Health Department

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<tr>
<td>Outpatient Clinic</td>
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<td>$1,177,236.83</td>
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<tr>
<td>CSP/Targeted Case Management</td>
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<td>TAD Grant</td>
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<td>Dementia Crisis Innovation</td>
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<td><strong>Total Behavioral Health</strong></td>
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<td>$3,744,486.13</td>
<td>$4,579,713.68</td>
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### Department of Children and Families

<table>
<thead>
<tr>
<th>Program</th>
<th>2017 Budget</th>
<th>2017 Expenses</th>
<th>2017 Revenues</th>
<th>Balance</th>
</tr>
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<tbody>
<tr>
<td>DCF General</td>
<td>$1,950,268.48</td>
<td>$2,579,128.07</td>
<td>$1,941,709.19</td>
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<td>APS</td>
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<td>Kinship Care Benefits</td>
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<td>Kinship Care Assessment</td>
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<td>Alzheimer Grant</td>
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<td>Economic Support</td>
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<td>Juvenile Justice</td>
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<td>Safe and Stable Families</td>
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<td>CLTS</td>
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<td>Children's COP</td>
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<td>Elder Abuse</td>
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<td>WHEAP</td>
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<td>Community Intervention</td>
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<td><strong>Total DCF</strong></td>
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### Overall Balance BH/DCF

- **($106,345.99)**
## Health Department

<table>
<thead>
<tr>
<th>Category</th>
<th>2022 Budget</th>
<th>2023 Budget</th>
<th>2024 Budget</th>
<th>2025 Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Public Health</strong></td>
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<tr>
<td>Immunization</td>
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<td>Birth to Three</td>
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<td>PNCC</td>
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<td>Environmental Health</td>
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<td>WWPHRC (PH Preparedness)</td>
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<td>Local Preparedness Planning</td>
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<td>Consolidated Contracts</td>
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<td>(Lead, MCH, Imm, WWWP, Radon, Prevention)</td>
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<tr>
<td><strong>Total Public Health</strong></td>
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<td>$2,435,637.57</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>2022 Budget</th>
<th>2023 Budget</th>
<th>2024 Budget</th>
<th>2025 Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Examiner</strong></td>
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<tr>
<td></td>
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<td><strong>Total Division Budget</strong></td>
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<td></td>
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<td>$6,570.34</td>
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</tbody>
</table>

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Balsam Lake, WI 54810  
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Fax: (715)485-8401  
https://www.polkcountycommunityservices.org/