

# 2021 ANNUAL REPORT

CENTRAL RACINE COUNTY HEALTH DEPARTMENT 10005 NORTHWESTERN AVE, SUITE A FRANKSVILLE, WI 53126 ME

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# MESSAGE FROM THE HEALTH OFFICER

Perhaps the best three words to describe our work efforts in 2021 are adaptability, flexibility, and change. Central Racine County Health Department (CRCHD) spent the first third of the year adapting our work in order to provide COVID-19 vaccines for residents. The middle third of the year was occupied by restarting public health programs and services that had been halted due to the pandemic, requiring flexibility to reimagine and recreate processes to ensure safe and effective work. The last third of the year was focused on preparing to become the Racine County Public Health Division. All this work was amid ongoing efforts to provide COVID-19 disease investigations (11,505 in 2021), contact tracing, outbreak investigations, testing information resources, and public education.

For a small health department with limited resources, CRCHD provided a substantial number of vaccines at its own clinics and then supported the state-run clinic in Racine County. CRCHD provided 11,582 vaccines, with the vast majority given in the spring and some boosters given thereafter. With an eye towards reducing health disparities exposed by COVID-19, CRCHD focused its vaccine work on population health – the health of all residents – while ensuring those disproportionately affected by COVID-19 had access to vaccines and testing. We advanced COVID-19 efforts to improve the health of our entire community while simultaneously ensuring our programs and services reflected an understanding that health outcomes and health inequities are driven primarily by where people live, work, learn and play as well as structural barriers to achieving optimal health.

Many CRCHD programs had been shuttered or limited in capacity for much of 2020 as well as the beginning of 2021 due to the pandemic. However, as soon as it was safe for staff to do so and there was enough capacity, CRCHD began to slowly restart programs and services. Environmental Health staff resumed inspections, followed up on human health hazards, and ensured beach water testing. Similarly, Community Health staff recommenced perinatal home visiting programs, opened appointments for childhood vaccines and TB skin tests, cleared the backlog of communicable diseases cases, and restarted prevention work to address the ongoing opioid epidemic.

In 2020, the 14 municipalities making up CRCHD agreed to disband and become the Racine County Public Health Division in January of 2022. A major impetus for this change was a revenue shortfall – especially at the beginning of the pandemic, which meant there were not enough staff to perform all the necessary roles and had a cascading effect on all pandemic response work thereafter. The process of moving to Racine County required an enormous lift by all involved, ranging from executing an Intergovernmental Agreement and creating new ordinances to moving staff to become Racine County employees and establishing contracts. During this time, Margaret Gesner retired as Health Officer after 15 years in the position but stayed on through the end of the year to help with the transition to Racine County. We are deeply grateful for her service during these unprecedented times. Further, we are extremely appreciative of the dedication and commitment of staff and Board of Health, all of whom made CRCHD so successful during normal times as well as the pandemic. We look forward to working with the Racine County community to continue to improve the health and well-being of our residents.

Jeff Langlieb, Health Officer

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# HEALTH DEPARTMENT STAFF

#### **ADMINISTRATION & FINANCE**

Jeff Langlieb, Health Officer (Sept - Dec)

Margaret Gesner, Interim Transition Administrator/Advisor to

Health Officer and Board of Health (Health Officer Jan -Aug)

Wayne Krueger, Fiscal Director

Liz Staples, Health Technician

Louise Caracciolo, Senior Health Technician

#### **ENVIRONMENTAL HEALTH / EMERGENCY RESPONSE**

Keith Hendricks, EH Health Director/Deputy Health Officer

Chuck Dykstra, EH Supervisor

Jennifer Loizzo, Sanitarian

Kevin Plachinski, Sanitarian

Lindsay Visona, Sanitarian

Vanessa Hernandez, Public Health Specialist

Fred McCann, Public Health Specialist

Jon Keiser, EMT

#### COMMUNITY HEALTH / HOME VISITING / EPIDEMIOLOGY

Ashlee Franzen, Community Health Director Kate Dickinson, Community Health Supervisor

#### **COMMUNITY HEALTH (cont.)**

Sai Moua, Public Health Nurse Holly Anderson, Public Health Nurse Amanda Busack, Public Health Strategist Carissa Brunner, Public Health Strategist Renee Foy, Public Health Strategist Joella Murray, Public Health Nurse Kari Villalpando, Public Health Nurse HV Supervisor Erin Donaldson, Public Health Educator HV Supervisor Yesenia Arjon, Public Health Educator Home Visitor Linda Garza, Public Health Nurse Home Visitor Kelley Marshman, Public Health Nurse Home Visitor Jessica Mendoza, Public Health Educator Home Visitor April Johnson, Public Health Nurse Home Visitor Brittany Gunn, Public Health Nurse Home Visitor Wendi Huffman, Public Health Nurse Home Visitor Katie Whitaker, Public Health Nurse Home Visitor Pa Chang, Epidemiologist Silviano Garcia, Epidemiologist

### **BOARD OF HEALTH**

#### **CHAIRPERSON**

Frances M. Petrick, RN

#### MEDICAL DIRECTOR/VICE-CHAIR

Mark E. DeCheck, MD

#### **BOARD MEMBERS**

Holly McManus, Caledonia Trustee Susan Stroupe, Caledonia Citizen Rep. Denise Anastasio, Mt. Pleasant Trustee Vikki Prochaska, Mt. Pleasant Citizen Rep. Kristin Holmberg-Wright, North Bay Trustee Tom Kramer, Town of Norway Administrator



#### **BOARD MEMBERS**

John Monsen, Village of Rochester Citizen Rep.
McKenzie Moore, Sturtevant Trustee
Gordon Svendsen, Union Grove Trustee
Sherry Gruhn, Village of Yorkville Citizen Rep.
Teri Nicolai, Town of Waterford Board Member
Tamara Pollnow, Village of Waterford Trustee
Theresa Meyer, City of Burlington Alderman
Vacant, Town of Burlington, Dover, Raymond Board
Members

Jeff Langlieb, Health Officer, Secretary

A special thank you to the outgoing 2021 Board of Health members for their dedication and commitment to CRCHD. A new RCPH Board of Health was appointed by Racine County Executive Jonathan Delagrave and will meet on the 3rd Thursday of the month throughout 2022.



# CRCHD MISSION, VISION, PRINCIPLES, PRIORITIES, PROGRAMS, AND SERVICES

#### **Mission Statement**

The mission of Central Racine County Health Department is to improve the health of the communities we serve through health promotion, disease prevention, and protection from health and environmental hazards. This mission is achieved by:

- · Assuring the enforcement of state public health statutes and rules.
- Developing policies and providing public health programs and services that prevent disease and injury, protect against environmental health hazards, promote healthy behaviors, and provide education.
- · Monitoring the health status of the community to identify health issues.
- · Preparing for and responding to public health emergencies.
- · Assessing the effectiveness, accessibility, and quality of programs and services.

# Vision: Building a Healthy Future by Protecting the Public's Health

### **Guiding Principles**

<u>Collaboration:</u> Engage partners & the community to promote health and meet common goals

- Leaders
- Innovative problem-solvers
- Team players

**Responsiveness:** Deliver accessible public health programs with integrity

- Respectful, reliable, principled
- Community-driven
- Stewardship of resources

**Caring:** Serve the community with the customer in mind

- Accountable and respectful
- Competent and highly skilled staff
- Quality service-oriented

**<u>High Quality:</u>** Provide excellence in programs and services

- Evidence-based and data-driven
- Quality outcomes and performance-driven
- Effective, efficient, and sustainable

<u>**Diversity:**</u> Promote public health services that address community needs

- Advocate
- Culturally competent
- Focused on eliminating health disparities

# Strategic Priorities 2016 - 2020 (completed)

- 1. Achieve national Public Health Accreditation
- 2. Enhance External Communication & Partnerships
- 3. Focus Workforce Development on Performance
- 4. Align Organizational Programs and Services
- 5. Assure Financial Viability

### **Programmatic Areas**

- 1. Community Health/Home Visiting
- 2. Environmental Health/Emergency Preparedness
- 3. Administration

# 3 Core Functions & 10 Public Health Essential Functions





# **COVID-19 RESPONSE 2021**

11,505
COVID-19 cases

investigated

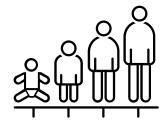
36,469

COVID-19 negative reports reviewed and filed

112 COVID-19 deaths (1% of positive cases)

42% decrease in # of deaths from 2020 showing positive impact of vaccines

> 11,582 # of vaccines given by CRCHD



30-39

Age group with highest rate of cases



84% White

4% Black or African American

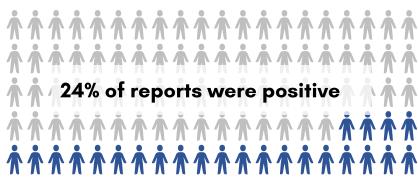
12% Others



82% Not Hispanic or Latino

8% Hispanic or Latino

10% Others/Unknown



**582** % of

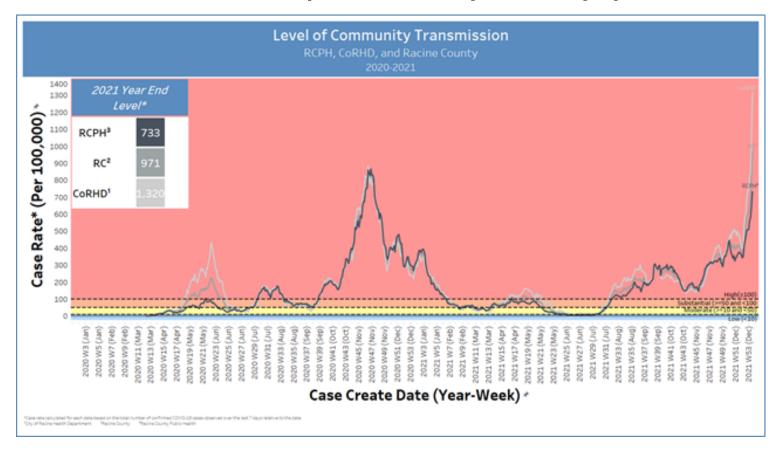
% of people who got 1st and 2nd doses at CRCHD

98%

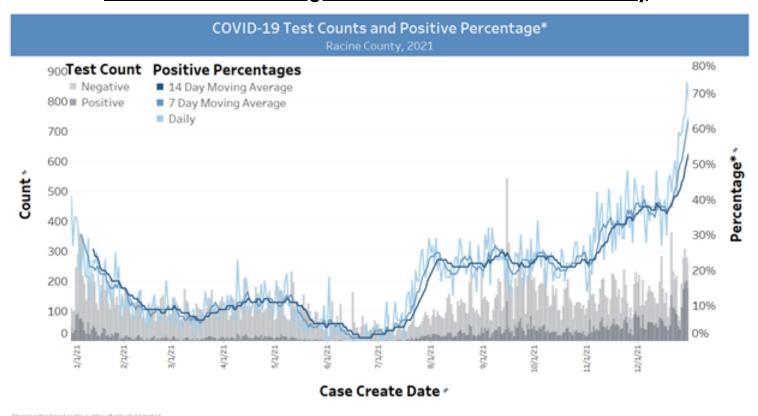
**209**# of boosters
given by CRCHD



# 2021 COVID-19 Epidemic Curve by Risk Category



### 2021 COVID-19 Testing and % Positive for Racine County





# 1. Monitor Health Status to Identify and Solve Community Health Problems

#### **Community Health Assessment (CHA)**

Local health departments are required to conduct a community health assessment (CHA) every five years to better understand the health status of our community and the factors that impact health. It also helps us identify the effectiveness of interventions and the community's capacity to address relevant health issues. CRCHD most recently conducted a CHA in 2017. On a regular basis, CRCHD updates health data as necessary but in 2021 we were not able to perform data updates due to our COVID-19 response. CRCHD is poised to begin a new CHA in 2022 to meet the statutory requirements of completing one every five years.

#### Community Health Improvement Plan (CHIP)

As with the CHA, local health departments are required to conduct a community health improvement plan (CHIP) every five years. In 2018, CRCHD CHIP priority health issues included mental health, substance abuse, chronic disease, and access to healthcare. However, in a 2020 resident survey, COVID-19 was the top health issue (43%) followed by affordable health care (33%). CRCHD regularly convenes community partners to address CHIP progress. For 2021, we were not able to meet to identify updates due to our COVID-19 response.

#### **Morbidity and Mortality Data**

In past years, the five top causes of death per 100,000 population in Racine County were: 1) diseases of the heart 2) malignant neoplasm 3) accidents/unintentional injuries; 4) chronic lower respiratory diseases; and 5) cerebrovascular diseases. However, COVID-19 has caused communicable diseases to surpass the usual causes of death, knocking accidents/unintentional injuries out of the top five for 2021.

### COVID-19: 3rd highest cause of death in 2021 (Racine County)

Rank	2021 Racine County Leading Causes of Death	Deaths	Population	Crude Rate
1	#Diseases of heart	481	195802	245.7
2	#Malignant neoplasms	354	195802	180.8
3	#COVID-19	217	195802	110.8
4	#Chronic lower respiratory diseases	115	195802	58.7
5	#Cerebrovascular diseases	111	195802	56.7



### 2. Identify and Investigate Health Problems and Hazards in the Community

#### **Communicable Disease Control**

CRCHD is required to investigate over 80 reportable communicable diseases (CDs), which include sexually transmitted diseases (STDs). A confirmed or probable disease case requires case investigation, follow-up of treatment, individual education, and community education, depending on the disease. Disease reports that ultimately do not meet the case definition still require timely investigation to determine if the diagnosis fits the case definition. For 2021, there were 12,125 confirmed and probable CD reports (11,505 or 95% were COVID-19, 3.5% were STDs, and the rest were other CDs).

91%
Decrease in Influenza
Hospitalizations from
2020 to 2021

17%
Increase in non-COVID19 CD cases between
2020 and 2021

33% Increase in STD cases from 2020 to 2021 Increase in COVID-19 cases from 2020 to 2021

#### **Outbreak Investigations**

CRCHD investigates all disease outbreaks as defined and as required by law; we are charged with investigating and responding to public health threats and emergencies. In 2021, CRCHD continued to perform primarily COVID-19 outbreak investigations related to schools, businesses, long-term care facilities, and gatherings, amongst others.

#### **Human Health Hazards**

CRCHD continues to investigate human health hazards which are defined as substances, activities or conditions that are known to have the potential to cause acute or chronic illness or death if exposure to the substances, activities or conditions is not abated. In 2021, CRCHD followed up on 17 reported human health hazard complaints.

#### Lead Poisoning Case Management & Lead Hazard Investigations

CRCHD provided lead poisoning education to 6 children identified with a venous BLL  $\geq$ 5  $\mu$ g/dL. Home visits were not offered due to COVID-19. No children had a venous BLL requiring a lead hazard investigation.

# 3. Inform, Educate, Empower People About Health Issues

#### **Suicide Prevention Work Group**

For 2021, we were not able to meet due to our COVID-19 response.

#### Radon Testing

In 2021, CRCHD sold 19 radon test kits. Of those purchased, 58% were sent by the homeowner for analysis; 82% of kits analyzed had a result greater than or equal to 4.0 pCi/l (recommended remediation level).

#### **Well Water Testing**

In 2021, CRCHD provided 21 bacteria/nitrate well water test kits to residents.

#### **Health Communication and Public Outreach**

The 2021 work is enumerated primarily in the COVID-19 Response section.





# 4. Mobilize Community Partnerships and Action to Identify and Solve Health Problems

#### Fetal, Infant, & Child Death Review

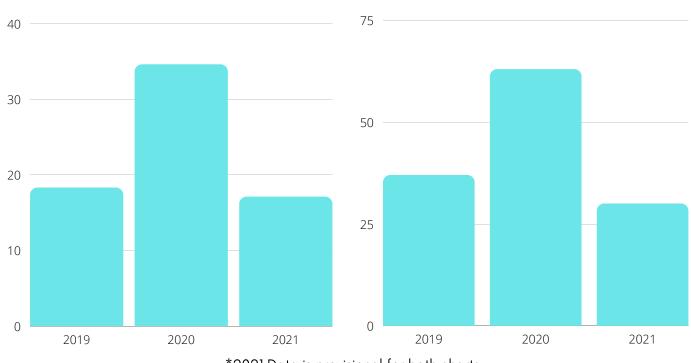
For 2021, while CRCHD could not convene the local Racine County FIMR/CDR team in the usual fashion due to COVID-19 response, CRCHD collected data from partner agencies as needed, ensured reporting in the National Case Reporting System, and wrote annual summary reports as per usual. In addition, CRCHD had to perform CDR/FIMR catch-up work in 2021, completing work from 2020 due to the CRCHD 2020 COVID-19 response. For 2020, there were 10 childhood (ages 1-21), 15 infant (ages 0-1), and 19 fetal (stillbirths) deaths reported to date. For 2021, there were 11 childhood (ages 1-21), 11 infant (ages 0-1), and 8 fetal (stillbirths) deaths reported to date. This team will be resumed in 2022.

#### Overdose Fatality Review, Med Collection, Opioid/Heroin Awareness

The OFRT started meeting again in 2021 after a hiatus due to COVID-19. CRCHD continues to promote use of medication collection boxes, an information card for law enforcement and emergency medical services to give to families of overdose victims, and use of our Opioid and Heroin Awareness Guide. For 2021, preliminarily data show 30 reported overdose deaths, a decrease from 2020 which saw 63 overdose deaths in Racine County.

#### Age Adjusted Rates of Drug Overdose by Year

#### Count of Drug Overdose Deaths by Year



\*2021 Data is provisional for both charts



# 5. Develop Policies and Plans That Support Individual and Community Health Efforts

#### **CRCHD Strategic Plan**

CRCHD completed its Strategic Plan 2016–2020 in 2020 and wrote up a final report in 2021. CRCHD is poised to begin a new Strategic Plan in 2022.

#### **Public Health Policies and Laws**

In 2020 CRCHD was reaccredited by the Wisconsin Department of Health Services as a Level III health department. In the same year CRCHD achieved National Public Health Accreditation. In 2021, CRCHD successfully submitted a Year 1 report to PHAB (Public Health Accreditation Board).

#### **Emergency Preparedness**

In 2021, CRCHD was required to complete objectives related to CDC requirements, including addressing COVID-19. CRCHD completed a COVID-19 After Action Report to summarize its work from January 2020 through August of 2021. This report elucidated strengths and opportunities for improvement of the CRCHD response.

# 6. Enforce Laws and Regulations That Protect Health and Ensure Safety

#### **Environmental Health Licensing and Inspections**

CRCHD completed its required inspections for the 2020-2021 license year but needed a few more months into the new inspection cycle to do so due to the COVID-19 response.

#### **Food Safety Classes**

In 2017 CRCHD Environmental Health staff developed six video presentations to provide basic food safety information. These videos make food safety available to many more people who serve food to the public. In 2021, 39 individuals took the online food safety course.

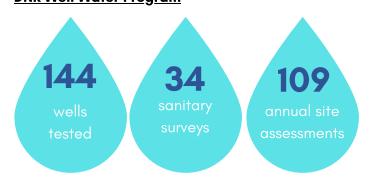
#### Total Licenses Establishment Type

- 12 Body Art
- 3 Campground
- 522 Restaurant/Retail Food
  - 18 Hotels/Motels
  - 61 Pools
  - 69 Temporary Restaurants
    - 1 Summer Camps
    - 1 Tourist rooming Houses
- 687 TOTAL for 2020-2021

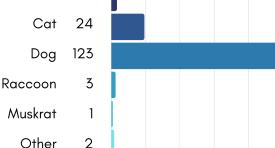
#### **Excellence Award for Food Facilities**

In 2017, Central Racine County Health Department developed a concept to acknowledge food facilities that regularly meet a high standard of food safety by issuing an annual award to these facilities. In 2021 CRCHD was not able to give out our annual Excellence Award for Food Facilities due to our COVID-19 response.

### DNR Well Water Program



# Animal Bite/Rabies Investigations Bat 4



#### **Beach Water Monitoring**

CRCHD posted 12 Caution and 3 Closed signs throughout the 2021 beach season.



# 7. Link People to Needed Health Services and Assure the Provision of Healthcare When Otherwise Unavailable

#### Healthy Families America (HFA) Model Home Visiting Programs

Due to COVID-19, in 2020 and 2021 some visits were performed virtually, others were in person, and others were cancelled entirely in accordance with Model standards. For the 2020-2021 grant cycle, CRCHD provided 480 home visits for 94 families (FFHV) and 39 home visits for 17 families (RHB).



#### Family Connects Model Home Visiting Program

The Family Connects Racine County pilot, a community-wide nurse home visiting program, resumed in 2021 after a hiatus due to COVID-19. Family Connects Racine County supports parents by bringing health providers, community resources and families together. In 2021, CRCHD provided home visits for 195 families.





#### Population-Based Immunization Compliance Program

CRCHD helped ensure that 73% of children who turned 24 months of age during the year were up to date on their immunizations (79% were late but became up to date).

#### **Childhood Immunization & Adult Services Programs**

In July of 2021, CRCHD restarted administering childhood vaccines after pausing in 2021 due to COVID-19. In 2021, CRCHD provided 72 pediatric vaccines to 26 pediatric clients (includes 7 pediatric influenza shots). Of those receiving pediatric vaccines, 50% lived in the CRCHD jurisdiction and 50% lived in the City of Racine jurisdiction.

### 8. Assure Competent Public and Personal Health Care Workforce

#### Workforce Development Plan & Qualified Health Professionals

CRCHD's Workforce Development Plan ensures a systematic process for staff to identify strengths and areas for improvement and to institute actions to fulfill improvements. CRCHD employees must meet job, statutory, and license requirements.

#### <u>Linkages with Academia, Healthcare, Schools</u>

CRCHD maintains strong relationships with local healthcare systems to provide quality staff, programs, and services. Through partnerships, CRCHD identified education and training needs as well as opportunities for developing core public health competencies. In 2021, linkages remained vitally important to address COVID-19.









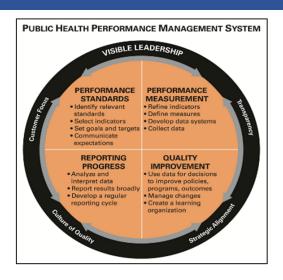




# 9. Evaluate Effectiveness, Accessibility, and Quality of Individual and Population Based Health Services

#### Performance Management & Quality Improvement Plans

CRCHD has developed a comprehensive Performance Management System to systematize and institutionalize all planning, monitoring, measurement, and improvement efforts. CRCHD Quality Improvement Plan principles are integrated throughout CRCHD programs and services. CRCHD regularly evaluates our performance, processes, and outcomes to provide information necessary to define accountability, allocate resources, and reshape policies and services. We see performance management and quality improvement as methods to explore and address more effectively the root causes of issues.



### 10. Research for New Insights and Innovative Solutions to Health Problems

#### Partnerships for Research and Innovation

CRCHD partners with many local and state agencies and programs to further public health innovation and research as enumerated throughout this report.

#### **2021 BUDGET SUMMARY**

In 2021, the COVID-19 response continued to overwhelm the budget and CRCHD relied heavily on State and Federal funding for response efforts. The 2021 levy contribution was \$7.69 per capita, about ½ the state average. Total revenue (unaudited) amounted to \$3,919,971, with 21.5% of revenues from levy and 78.5% of revenues from grants (and a small amount of fees) due to COVID-19. Ninety percent (90%) of 2021 budgeted expenses were for personnel-related expenditures, both CRCHD staff and contracted staff through Professional Services Group for COVID-19 contact tracing.



