



THE CITY OF  
**WATERTOWN**



# **Watertown Department of Public Health**

**Annual Report 2016**

## Letter from Health Officer/Director

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Dear Community of Watertown:

I am pleased to present the Watertown Department of Public Health 2016 Annual Report.

The Department staff completed a strategic plan that identified strategic priorities and strategies that focus on providing the maximum benefit for the largest number of people. Strategies focus on primary prevention, aims to prevent disease or injury before it ever occurs.

Department strategic priorities:

- Priority 1: Communicate the mission of WDPH to generate broad-based community support
- Priority 2: Increase physical activity, decrease chronic disease
- Priority 3: Decrease/eliminate environmentally-based illness and injury
- Priority 4: Increase family wellness and promote health equity
- Priority 5: On-going improvement in programmatic and process quality improvement utilizing technology and sustainable resources

The Department completed the Community Health Assessment in partnership with the Dodge and Jefferson county health departments, Watertown Regional Medical Center, Fort HealthCare and many community partners. Community input was gathered through surveys, focus groups and a public forum.

Priority areas identified in the process include:

- Priority 1: Obesity: Nutrition & Physical Activity
- Priority 2: Mental Health
- Priority 3: Substance Abuse

The Department continued to coordinate with community partners throughout Dodge and Jefferson to reduce the personal and public burdens of chronic disease as identified in the 2015-2017 Community Health Improvement Plan(CHIP).

The Department is committed to serving the community and “Creating opportunities for safe and healthy living”.

Warm Regards



Carol Quest



## ***Mission, Vision and Core Values***

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### **MISSION:**

***Creating opportunities for safe and healthy living***

### **VISION:**

***For the community of Watertown to realize and enjoy the highest quality of health today and for generations to come.***

### **ORGANIZATIONAL CORE VALUES:**

**Accountability:** We take responsibility for our actions and decisions while striving to meet goals and outcomes.

**Collaboration:** We work in partnership to create an environment that brings together diverse people to work collectively towards shared goals.

**Community:** We promote cooperative and creative approaches to common issues.

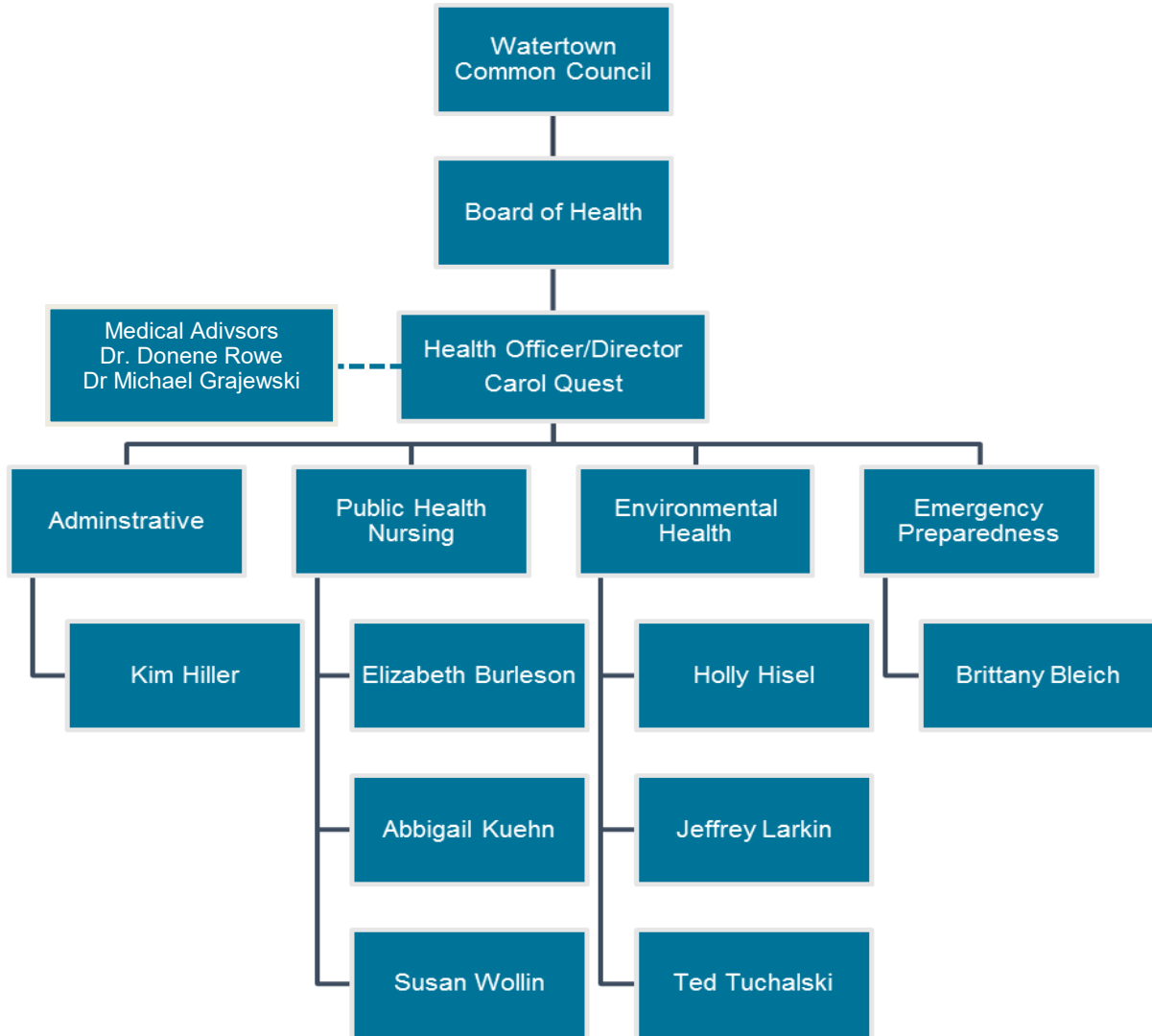
**Consistency:** We are committed to equitable enforcement of agency policies to ensure fair treatment and assessments that uphold the public trust.

**Knowledge:** We foster education and implementation of best practice and evidence based strategies by educating staff, informing the community and supporting future public health professionals.

**Leadership:** As a team of Public Health professionals we adhere to and promote public health core functions and standards of practice, embracing responsibility and leading by example to achieve community public health goals.

# Organizational Chart 2016

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## Essential Service #1

Monitor health status to identify and solve community health problems.

### Demographics

	Watertown	Wisconsin	USA
Population	23,891 (2014)	5,795,428	323,580,626
Median Age	38.2 (2014)	39.3	38
Median Household Income	\$47,760 (2013)	\$53,160	\$54,149
Annual Pop. Growth (2016-21)	NA	0.35%	0.84%
Household Population	9,187 (2010)	2,333,049	121,786,233
Dominant Tapestry	NA	Green Acres (6A)	Green Acres (6A)
Bussinesses	1,664 (2012)	250,953	13,207,211
Employees	NA	3,453,624	162,998,347
Medical Care Index*	NA	94	100
Average Medical Expenditures	NA	\$1,806	\$1,921
Total Medical Expenditures	NA	\$4.2 B	\$234 B
<b>Racial and Ethnic Make-up</b>			
White	90% (2013)	85%	71%
Black	1% (2013)	7%	13%
American Indian	0% (2013)	1%	1%
Asian/Pacific Islander	1% (2013)	3%	5%
Other	NA	3%	7%
Mixed Race	2% (2013)	2%	3%
Hispanic Origin	6% (2013)	7%	18%

Source for Dodge County, Jefferson County, Wisconsin, and USA: Esri  
 Source for Watertown: City-Data, United States Census Bureau

### Poverty Levels

Residents with income below the poverty level in 2015:

Watertown:	12.7%
Whole state:	16.1%

Residents with income below 50% of the poverty level in 2015:

Watertown:	3.4%
Whole state:	5.2%

Poverty in families in Watertown  
 Children below poverty level:

Watertown:	17.4%
State:	15.9%

Source: City-data.com

### Women, Infants and Children

WIC, the Supplemental Nutrition Program for Women, Infants, and Children, helps income eligible pregnant and breastfeeding women, women who recently had a baby, infants and children up to five years of age who are at health risk due to inadequate nutrition. The Jefferson County WIC program operates for one week each month at the WDPH in order to provide local services to families. Breast pumps are available to rent for WIC participants and trained Breastfeeding Educators provide breastfeeding support.

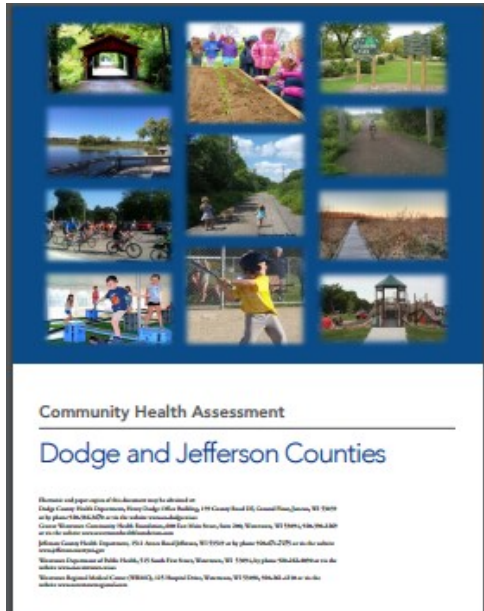
WIC data/2016:

53094:	383 participants	243 Families
53098 :	87 participants	53 families

## Community Health Assessment

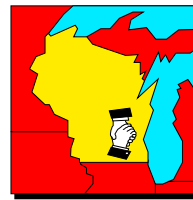
In 2016, DJHCP consisted of individuals from Watertown Department of Public Health, Dodge and Jefferson County Health Departments, Watertown Regional Medical Center, and Fort HealthCare to develop a Community Health Assessment (CHA).

The assessment consisted of a community



survey, focus groups, and a community roll out presentation. Statasan, a facilitator company joined the group to help lead the group and provide guidance. Over 1,000 surveys were completed by community members of Dodge County, Jefferson County, and City of Watertown. Three focus groups were held in the communities during September 2016. Information from the surveys and focus groups were presented at the roll out presentation held at Windwood of Watertown on October 24, 2016. Obesity (nutrition & physical activity), substance abuse, and mental health were the three main topic areas decided upon to work on for the next Community Health Improvement plan (CHIP)

## Community Health Improvement Plan




Dodge-Jefferson Healthier Community Partnership (DJHCP) is a group of individuals from Watertown Department of Public Health, Dodge and Jefferson Health Department, Beaver Dam Community Hospital, Fort


HealthCare, and Watertown Regional Medical Center. DJHCP developed a Community Health Improvement Plan (CHIP) for 2015-2017. The goal of the CHIP was “to reduce the personal and public burdens of chronic disease in Dodge and Jefferson Counties by encouraging, promoting, and rewarding higher levels of exercise, and reducing barriers to physical activities and locally grown foods”. The CHIP group focused on social media connectedness between the partners to promote healthy eating and activities such as the Farm to School program, farmers markets, community gardens, walking, biking, and hiking.

**Dodge-Jefferson Healthier Community Partnership**

**Community Health Improvement Plan**

**2015-2017**





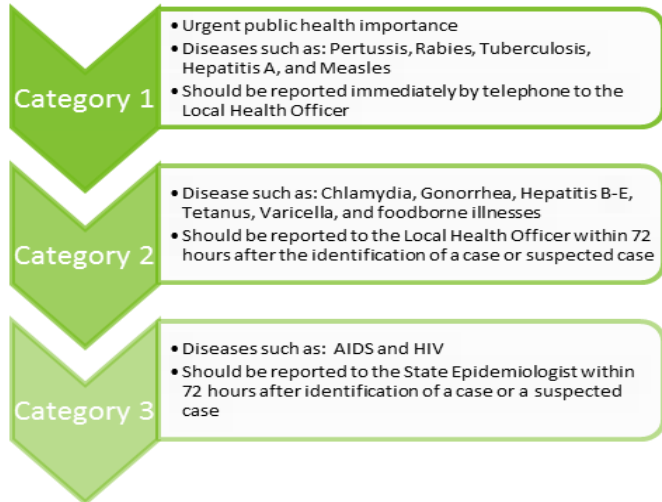
"To act as a collaborative catalyst, identifying community needs and linking the necessary resources to enhance the health and well-being of all individuals and communities in Dodge and Jefferson Counties."

## Essential Service #2

Diagnose and investigate health problems and health hazards in the community.

### Communicable Disease

Communicable diseases are reported to the Local Health Department to help stop the transmission of disease. Communicable diseases are reported based on three different categories

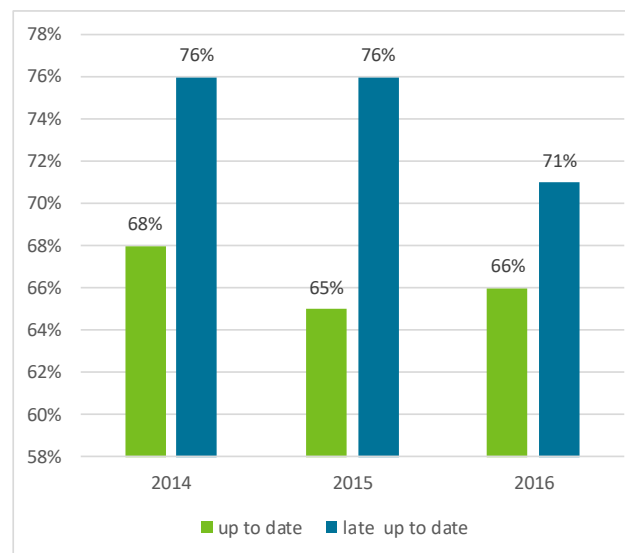


Communicable Disease	2014	2015	2016
Chlamydia & Gonorrhea	72	68	67
Food/Water Borne (Campylobacteriosis, Cryptosporidiosis, E-Coli-Shiga Toxin-Producing (STEC), Giardiasis, Salmonellosis, Shigellosis, Yersinosis)	6	11	8
Hepatitis A, B, C	12	18	30
Hospital Associated Influenza	25	17	22
Lyme Disease	8	10	6
Measles & Mumps	9	9	1
Pertussis	4	47	35
Invasive Streptococcal Disease	9	13	7
Tuberculosis-Latent	3	6	2
Varicella	2	8	7

### Immunization

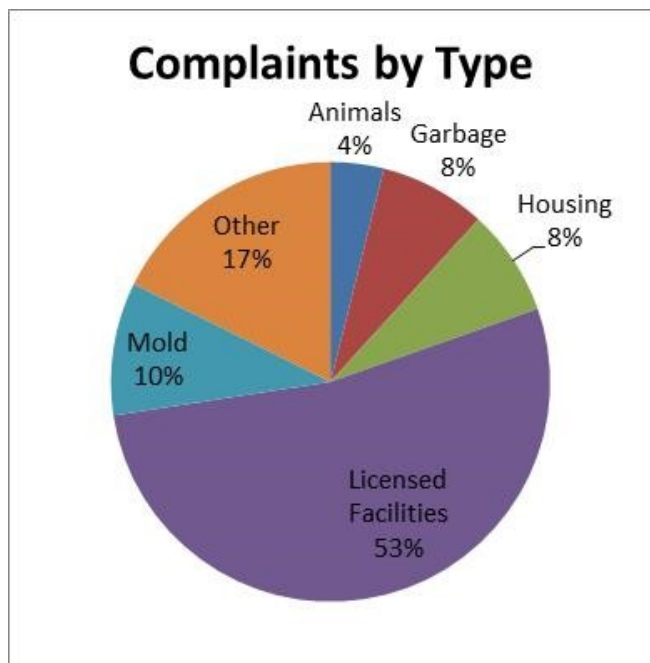
Vaccines given 2015-2016		
Type	2015	2016
Dtap	8	7
Pediarix (DTaP, IPV, HepB)	33	7
Kinrix (DTaP, IPV)	18	9
Pentacel	0	1
HEP A - ped	15	17
HEP B - ped	10	7
Hib	34	15
HPV	18	15
Meningitis	15	9
MMR	21	16
Prevnar (Child Pneumonia)	34	15
IPV / Polio	16	1
Rotavirus	25	6
Td	6	7
Tdap	122	84
Varicella	26	12
Proquad (MMR,Varicella)	21	9
Pneumonia	1	2
<b>Total</b>	<b>423</b>	<b>239</b>

The chart below shows percentage of children at 24 months that met the benchmark of DTaP (4), HepB (3), Hib (3), MMR (1), Pneumo (4), Polio (3), Varicella (1)



### Human Health Hazards

Throughout the year, the Environmental Public Health Consortium handles a variety of complaints from citizens that require investigation and follow-up. In 2016, 195 different contacts (phone, onsite visits, letters, emails, etc.) were made on 51 complaints.



### Radon

Watertown Radon Information Center (RIC) provides education and outreach to citizens of Watertown and Dodge and Jefferson Counties about Radon. Undetectable to the human senses, Radon is a lung-cancer causing gas found in homes.

The Watertown RIC provides free Radon test kits throughout the year.

Of the **270** kits analyzed, **146** were greater than 4 pCi/L, the national Radon action level.\*

\*Homes over 4.0 pCi/L are encouraged to install mitigation systems to remove the radon.

### Lead

There is no safe level of lead in the human body; lead exposure can affect nearly every system in the body. Even very low levels of lead exposure can cause permanent brain damage and negatively affect health throughout the child's life, especially between 6 months and 6 years of age. Many lead hazards still exist in homes and the environment, including paint, vinyl mini-blinds, chalk candlewicks, and others. These hazards are commonly present during painting and remodeling of pre-1978 housing.

The Center for Disease Control (CDC) defines a level of 5 mcg/dL to identify children with elevated blood lead levels. These children are exposed to more lead than most children.

Watertown Department of Public Health provides follow-up by a Public Health Nurse for children with elevated blood lead levels (5mcg/dL or greater). Follow-up may include letters, phone calls, home visits, consultation with the primary health care provider and a home lead risk assessment by a Lead Hazard Investigator. The ultimate goal is to reduce environmental lead exposure and lead poisoning.

2016: 428 Tests

Capillary test	≥5mcg/dL	21
	3 with f/u (all ≤ 5)	
Capillary test	≥10 mcg/dL	3
	1 with f/u (≤ 5)	
Venous test	≥ 5 mcg/dL	2
	None with documented f/u	
Venous test	≥ 10mcg/dL	0

No new cases opened in 2016; 3 cases closed per state statutes. The 2014-2015 data is in the last reports

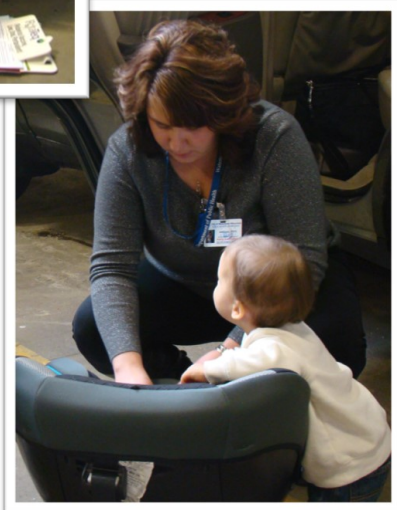
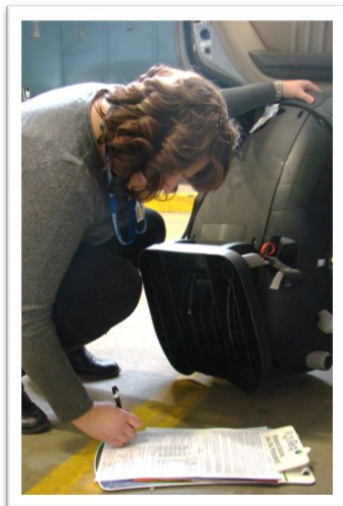


## Essential Service #3

Inform, educate, and empower people about health issues.

### Child Passenger Safety

Two public health nurses are certified Child Passenger Safety Technicians. They are available by appointment to help parents, grandparents, and caregivers learn about their car seats. Our technicians check seats for expirations, recalls, proper fit, and proper installation in the vehicle. In 2016, our technicians checked 150 car seats. August, September, and October were the months with the highest amounts of seat checks. Technicians held community car seat check events at Farmer's Markets and the Watertown Fire Department Station. WDPH received a grant for \$4,000 from the Wisconsin Bureau of Transportation to provide car seats to families in the City limits of Watertown who are unable to afford a car seat. Technicians dispensed 45 car seats to families in need in Watertown. February, July, and October were the months with the highest amounts of seats dispensed.



### Safe Sleep

Since 2013, WDPH has worked with community partners and individuals to implement and evaluate Safe Sleep strategies to support safe sleep practices in our community. As part of our Maternal Child Health objectives for 2016, WDPH provided trainings to implement safe sleep practices with child care providers using common messaging.

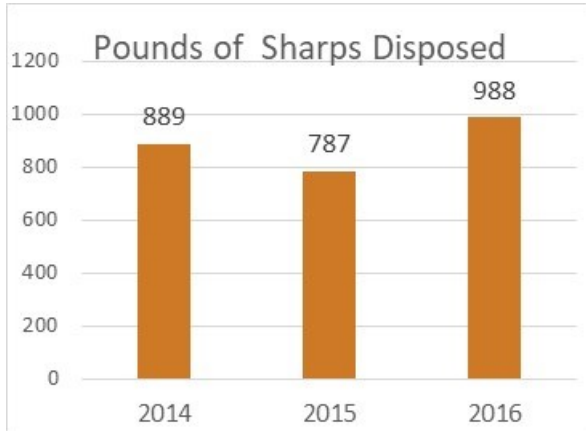


With programmatic support from the Children's Health Alliance of Wisconsin, five in-home daycare providers received education and resources to work with families to assure that all infants have a safe sleep environment. WDPH also continues to provide consistent messaging regarding Safe Sleep practices at community events and in contacts with prenatal and newborn families.

## Sharps

As the number of persons using sharps (needles, syringes and lancets) in their homes rises, so does the health risk to all workers in recycling facilities. Workers may be accidentally stuck when sharps are mixed with household garbage, recyclables or when flushed down a toilet.

The Watertown Department of Public Health is a drop off site for household sharps. During 2016, 988 pounds of household sharps were collected and disposed of safely from citizens.



## Paper Tigers

The purpose of the Dodge County and City of Watertown CARES (Creating a Responsive and Effective System for Protecting and Promoting Child Well Being) Coalition is to ensure the safety, health and wellbeing of all children in Dodge County and the City of Watertown. The coalition provides leadership for creating and coordinating a spectrum of care and support for children and their families. Our vision is to ensure that “Every Child is safe and Healthy.”

In April 2016, the CARES Coalition presented a community summit “Putting the Pieces Together” to educate and inform partners and community members regarding the *Collective Impact* framework and to understand the impact of *Adverse Childhood Experiences (ACES)*.

As a follow-up to the spring summit, the Coalition hosted a free screening of *PAPER TIGERS*, a documentary focusing on toxic childhood stress, in October.



## HPV Billboard, Trailer

The City of Watertown Department of Public Health collaborates with the Dodge County Human Services and Health Department to provide leadership to the Partners in Prevention immunization Coalition.

The coalition was awarded a grant in 2015 from the Wisconsin Immunization Program and the Wisconsin Comprehensive Cancer Control Program, that award was extended until midsummer. Coalitions used consistent messages about the adolescent immunization platform: 9vHPV (Gardasil 9), Meningococcal – MenACWY (Menactra), Tdap and Influenza to increase provider and public education. During late summer and fall the coalition turned its focus to increasing the knowledge regarding adult vaccine and the adult vaccination schedule.



## Essential Service #4

Mobilize community partnerships and action to identify and solve health problems.

### Watertown Family Center

WDPH staff provides on-going leadership and support to the Watertown Family Center (WFC). WFC provides free, quality educational programs and resources promoting the social, emotional, physical and intellectual development and well-being of children birth through five years old and their families.



### Child Death Review Teams

Child Death Review is a multidisciplinary process to help us better understand why children in our community die and to help us identify how we can prevent deaths. The CDRT teams in each county have been meeting since 2013 and WDPH staff are team members in both counties. The teams met quarterly in 2016 to share case information on child deaths that occur in the community with the goal of preventing other deaths.

### Crossroads

- 54 students within the Watertown Unified School district identified that their family was homeless.
- In 2016, Crossroads aided 67 people (34 adults, 33 children = 24 families in Watertown) with rental assistance.
- The volunteer board of 15 members also provided housing in 2016 for two families ( a family is able to stay for up to one year with case management services) at the Crossroads House through community donations and fundraising efforts.

Even with the recession and the low rate of inflation, the cost of basic housing, child care, transportation, food and health care in Wisconsin increased by 14% during 2007 -2014.

The cost of basic household expenses in Wisconsin is more than most jobs can support. Most new job openings in Wisconsin are in service jobs. 65% of all jobs in Wisconsin pay < \$20.00 per hour (\$40,000 per year if full time), and most pay < \$15.00 per hour (\$30,000 per year if full time). Average Wisconsin hourly wage is \$11.60 or less for a single adult. Fewer than half of Wisconsin rental units/properties are affordable (cost < 1/3 of a household's income) Because we have an aging population that is working in lower paid jobs or have used their saving and retirement to weather the economic downturn, more Wisconsin residents will need assistance as they age.



Regional Preparedness

South Central Health Care Coalition (SCHCC) - Attended general membership meetings, launch of new website:



<http://www.southcentralhcc.org/>

Dodge County Health Care Coalition – Brittany is the coalition coordinator. Monthly meetings that include partner sharing, presentations from a variety of partners, promotion of upcoming exercises and trainings, as well as sharing forums to learn best practices and lessons learned within the county.

Watertown Health Care Coalition – Attended monthly meetings to collaborate on Emergency Preparedness related items within the city, promotion of upcoming exercises and trainings and partner sharing.



Get Healthy Watertown

Get Healthy Watertown members and its partners strive to improve the health of our community by providing services and education.

Health Coalition Highlights:

- Community collaboration to increase awareness around building a bike friendly and walk friendly community
- Partnership with area nutrition partners to share information about nutrition resources and programs (traveling display boards)
- Weekly walking program to promote physical activity
- Farm to School , School gardens and community garden programs
- Support access to care for all
- Partners with county Tobacco Free Coalitions
- Participates in the State of Wisconsin Chronic Disease Control and Prevention workgroup
- Social media campaigns
- Coordinates with public officials, various groups and organizations to work collaboratively toward policy and environmental change.



1, 2 & 3 mile routes  
All walks begin at 9 a.m.



2016 Schedule of Walks

Date	starting location	walk begins at:
4/16/2016	Octagon House, 919 Charles Street	Front sidewalk
4/23/2016	Bethesda Luth. Homes, off Johnson St.	Corporate Ctr, west parking lot
4/30/2016	Sr./Community Center, 514 S. 1st St.	Main entrance
5/7/2016	MATC, 1300 W. Main St.	Front entrance
5/14/2016	Wester Elem. School, 634 S. 10th St.	10th St., back entrance
5/21/2016	Dan Brandenstein Park	100 block of W. Spaulding
5/28/2016	Good Shep. Luth. Church, 1611 E. Main	Lower back parking lot
6/4/2016	Hospital - N parking lot of Memorial Dr.	2nd driveway near 2 white boulders
6/11/2016	St. Bernard's School, 111 S. Montgomery	Southwest parking lot
6/18/2016	Brandt-Quirk Park, N. Carriage Hill Dr.	Soccer Pavilion on Lunde Ln.
6/25/2016	Fisher-Barton, 300 Air Park Dr.	W parking lot, near clock tower
7/2/2016	No official walk	4th of July
7/9/2016	Immanuel Luth. Church, 204 N. 10th St.	10th St., back entrance
7/16/2016	St. Vincent De Paul, 1181 N. 4th St.	Parking lot, north side
7/23/2016	Wellness Chiropractic, 816 West St.	Front parking lot
7/30/2016	Riverside Park, Labaree St.	Upper Pavilion
8/6/2016	Trinity-St. Luke's School, 301 Clark St.	Parking lot near canopy entrance
8/13/2016	Glenn's Market, 722 W. Main St.	Park north of Brat Haus
8/20/2016	Calvary Baptist School, 792 Milford St.	Hwy A@Calvary sign, N parking lot
8/27/2016	Octagon House, 919 Charles Street	Front sidewalk
9/3/2016	Bethesda Luth. Homes, off Johnson St.	Corporate Ctr, west parking lot
9/10/2016	Hospital - N parking lot of Memorial Dr.	2nd driveway near 2 white boulders
9/17/2016	WHS, 825 Endeavour Dr.	Peace Garden, near flag pole
9/24/2016	Good Shep. Luth. Church, 1611 E. Main	Lower back parking lot
10/1/2016	Wellness Chiropractic, 816 West St.	Front parking lot
10/8/2016	Sr./Community Center, 514 S. 1st St.	Main entrance
10/15/2016	Riverside Park, Labaree St.	Upper Pavilion
10/22/2016	Move indoors - WHS	room 114 W wing

## Essential Service #5

Develop policies and plans that support individual and community health efforts.

### Preparedness

Revision of the Public Health Emergency Plan (PHEP) started and currently following the State PHEP Workgroup timeline. A new Table of Contents was presented and will be a revolving document until pending finalization in 2017/2018. Table of contents include a checklist for all 15 of the Public Health Preparedness Capabilities, variety of maps, key contact information, other checklists and documents that would be needed at the time of activation. **On October 22, 2016 we participated in a Full Scale Exercise of the Family Assistance Center, activating our newly completed Mass Care and Family Assistance Center plans that was worked on throughout the year.** An After Action Report and Improvement Plan was written in compliance with the Homeland Security Exercise and Evaluation Program (HSEEP).

*The fifteen Public Health Preparedness Capabilities are:*

1. Community Preparedness
2. Community Recovery
3. Emergency Operations Coordination
4. Emergency Public Information and Warning
5. Fatality Management
6. Information Sharing
7. Mass Care
8. Medical Countermeasure Dispensing
9. Medical Material Management and Distribution
10. Medical Surge
11. Non-Pharmaceutical Interventions
12. Public Health Laboratory Testing
13. Public Health Surveillance and Epidemiological Investigation
14. Responder Safety and Health
15. Volunteer Management

### Communicable Disease Resolution

In 2016 local policy makers joined statewide a effort to support State funding to local health departments for communicable disease control. Wisconsin has no dedicated, stable federal and state funding sources for communicable disease control and prevention efforts .

The Common Council of the City of Watertown, WI endorsed and extended support for the Watertown Board of Health resolution to the state legislature to secure funding for communicable disease control for local health departments.



## Essential Service #6

**Enforce laws and regulations that protect health and ensure safety.**

### Agent Inspection Program

Environmental Public Health Consortium covers a wide range of programs to help promote health and safety in City of Watertown and Jefferson County.

As of July 1, 2016, the inspection programs from Department of Health merged with the Department of Agriculture, Trade and Consumer Protection creating (DATCP) one licensing entity for restaurants, retail food facilities, pools, campgrounds, lodging facilities. Tattoo and Body Piercing licensing was also moved to the Department of Safety and Professional Services.

The Environmental Public Health Consortium contracts with both DATCP and DSPS to act as the licensing and inspection agent for the City of Watertown and Jefferson County. Our jurisdiction licenses around 600 facilities during the year

Schools receiving funds from the Department of Instruction are also inspected twice a year.

### Transient Well (TN) Program

Through a contract with the Wisconsin Department of Natural Resources, the Environmental Public Health Consortium is a county contract for the transient well water program. Transient well water systems are location with private wells that serve at least 25 transient people at 60 days a year. Our jurisdiction covers both Jefferson and Dodge Counties. Responsibilities of the contract include water sampling, well inspection and enforcement.

Dodge County		Jefferson County
147	Number of Systems	156
179	Bacteria Samples Routine	169
150	Nitrate Samples	160
2	Nitrite Samples	2
32	Sanitary Surveys	35
120	On-site Assessments	65
22	Seasonal Start Ups	20
122	Follow Up Bacteria Samples	24
2	Follow Up Nitrate Samples	1
4	Level 2 Assessments	0

Facility Type	Pre-Inspections	Routine Inspections	Re-Inspections	Onsite Visits	Complaints	Total
DHS Food	73	233	45	47	17	415
DATCP Retail Food	24	146	8	19	5	202
School Inspections		81				81
Tattoo & Body Piercing	3					3
Lodging	16	17	13	1	15	62
Campgrounds		23			1	24
Pools	24	24	22	162	2	234
Re-Ed Camps		4	1			5
<b>Total</b>	<b>140</b>	<b>528</b>	<b>89</b>	<b>229</b>	<b>40</b>	<b>1026</b>

This chart reflects the calendar year 2016 and still includes pre-merger facility types

### Beach Water Quality Testing

In June, July and August, E.coli sampling is performed at three Jefferson County Beaches: Lower Spring Lake, Palmyra; Rock Lake Ferry Park, Lake Mills, and Lake Ripley, Cambridge. Beaches with levels over 235 ppm E.coli, are asked to post an advisory sign to let patrons know of the elevated level and proper precautions.

During the 13 weeks of sampling, there was only **1** advisory at one beach.

Towards the end of beach season 2016, Environmental Public Health Consortium worked in junction with the City of Lake Mills, Jefferson County Jefferson County Land and Water Conservation Department and the Joint Rock Lake Committee to assist Lake Mill city beaches in converting their sampling method to E.coli in order to be more consistent across the county. Sampling dates are coordinated between the consortium employee and the City of Lake Mills Wastewater Department. Environmental Public Health Consortium transports the Lake Mills city beach samples to the Wisconsin State Lab of Hygiene along with the three other county location samples.

## Essential Service #7

Link people to needed personal health services and assure the provision of health care when otherwise unavailable.

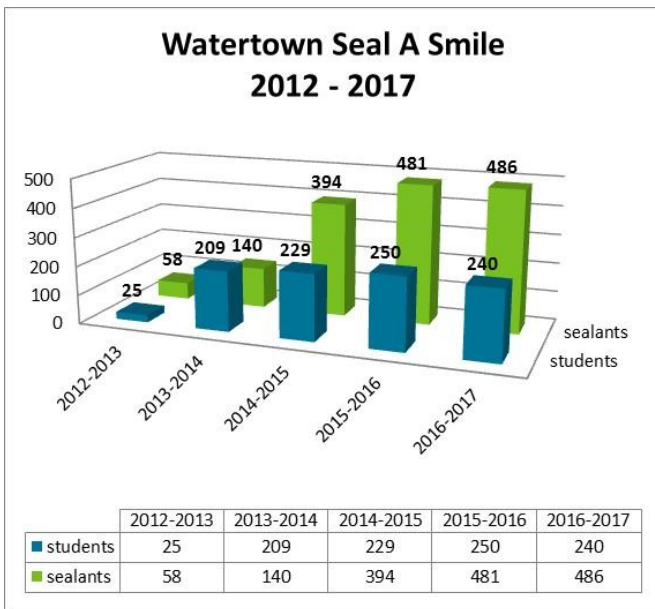
### Seal-A-Smile Program

The Watertown Department of Public Health received grant funding in 2014 for the Seal-A-Smile (SAS) Program. The SAS Program was created in collaboration with local dental offices to improve the oral health of children through school-linked dental sealant programs. Registered Dental Hygienists provide dental services to second and third grade children in public schools within the Watertown Unified School District. This program provides oral health education, screening, sealant placement and fluoride varnish application free of charge.

### PNCC

The purpose of the Medicaid Prenatal Care Coordination (PNCC) Program is to provide access to medical, social, educational and other services to pregnant women who are considered high risk for adverse pregnancy outcomes. PNCC assists women on Medicaid and BadgerCare to get the support they need to have a healthy baby. A public health nurse at WDPH provides assessment, care plan development, ongoing care coordination, referrals and health education to PNCC eligible women. The personalized plan of care is developed for a healthy pregnancy, birth, and beyond.

- **39 Carry-over clients from 2015**
- **78 new referrals received in 2016**
  - \* 48 screened/10 did not meet criteria for on-going PNCC Services
  - \* 9 declined screening
  - \* 21 unable to locate
- **38 New clients who received PNCC services in 2016**



### First Breath

First Breath is an evidence-based program that helps pregnant women to reduce or quit smoking. Women receive one-on-one counseling support, self-help and educational materials as well as follow-up support after delivery, access to the WI Tobacco Quit Line and incentives to quit smoking.

In 2016, 3 women were enrolled in the program; in results of 2 postpartum surveys received from WDPH: 1 woman had quit or stayed quit during third trimester of their pregnancy, 1 woman who entered the program reporting smoking one month prior to their pregnancy had cut down on their smoking during third trimester of their pregnancy.



## Essential Service #8

Assure competent public and personal health care workforce.

### Interns/Students

Each year, WDPH provides real life experiences for health-focused students. BS Nursing students from UW-Madison work within the department for 120 hours during the senior year N419 Community Health Nursing practicum. Nursing students from UW-Green Bay and UW-Oshgoch also work with the department staff to fulfill their community health practicum requirements. WDPH has participated in the Wisconsin Area Health Education Centers (AHEC) Community Health Internship Program for several years hosting 2 students for an 8 week full-time summer internship. Students participate fully in the nursing and environmental programs of WDPH to assist with various projects.





## Essential Service #9

Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

### Consolidated Grant

The following are the program goals that are supported by State and Federal funds through a contract with Wisconsin Department of Health Services.

Throughout the 2016 contract period, residents from the jurisdiction of the Watertown Department of Public Health will receive lead poisoning prevention and intervention services at a blood lead level greater than or equal to 10 mcg/dL. - **Achieved**

By December 31, 2016, 73% children residing in Watertown Department of Public Health jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccination by their second birthday - **Achieved 66%**

By December 31, 2016, the agency, in collaboration with community partners, will implement and evaluate strategy 2 (insert strategy number(s) from Input Activities) to support safe infant sleep practices in their communities.—**Achieved**

Environmental Health Hazards: By August 31, 2017, Watertown Department of Public Health will implement strategies to prevent or ameliorate environmental health hazards in City of Watertown and Jefferson County.—**Achieved**

National Public Health Standards - Required: By August 31, 2017, Watertown Department of Public Health will conduct one activity to meet or sustain National Public Health Performance Standards (i.e. pursue accreditation readiness) by developing and implementing an agency Performance Management Plan.—**Achieved**

This is a multi-year objective, from 2015 through 2017. Throughout calendar years 2015, 2016, and 2017, residents of Jefferson and Dodge Counties will be served by a regional Radon Information Center managed by the Dodge and Jefferson County.—**Achieved**

### Strategic Plan

In 2016, the department completed a series of meetings to review and update the 2013 Strategic Plan. Regional office staff, Michelle Bailey, Sheri Siemers, and Dave Pluymers facilitated three meetings with the WDPH staff in April, May and June. All staff participated to develop five on-going priorities:

- Communicate the mission of WDPH to generate broad-based community support
- Increase physical activity and decrease chronic disease in the Watertown community
- Decrease environmentally-based illness and injury
- Increase family wellness and promote health equity
- On-going improvement in programmatic and process quality improvement utilizing technology and sustainable resources

The staff also reviewed the WDPH mission and vision statements in October. Our mission statement was revised to strongly reflect our community commitment:

***Creating opportunities for safe and healthy living.***

## Essential Service #10

Research for new insights and innovative solutions to health problems.

### Parenting/Bright Beginnings

In 2016, the 20<sup>th</sup> year of the Bright Beginnings program, the nurses who work in the program were trained and implemented a new program curriculum, *Parents as Teachers*. *Parents as Teachers* promotes the optimal early development, learning and health of young children by supporting and engaging their parents and caregivers: providing an evidence-based, research-informed home visiting model. For families who had been participating in services prior to the foundational training for staff, we completed their program with our previous curriculum. As new families were enrolled, we implemented the *Parents as Teachers* curriculum. As of September, all families participating in Bright Beginnings are engaged with the *Parents as Teachers* model.

33 families served with 123 face-to-face visits.

5 Hispanic families

9 families have graduated (completed 1 yr of visits)

3 moved outside of the service area

8 families voluntarily withdrew from the program or have been lost to followup

10 dads participated in the visits



**Financial Comparison**

	2014	2015	2016
<b>Revenue</b>			
Maternal & Child Health Grant	\$ 12,919.00	\$ 11,865.00	\$ 12,393.00
Prevention Block Grant	\$ 4,577.00	\$ 8,822.00	\$ 9,848.00
Family Preservation Grant	\$ 26,087.31	\$ 21,925.02	\$ 21,726.00
Immunization Grant	\$ 7,804.00	\$ 7,726.00	\$ 7,193.00
Car seat Grant	\$ 1,987.03	\$ 3,909.48	\$ 2,587.87
Emergency Preparedness Grant	\$ 20,105.00	\$ 21,315.00	\$ 16,283.00
Radon Grant	\$ 6,310.00	\$ 7,892.00	\$ 7,252.00
Childhood Lead Grant	\$ 2,893.00	\$ 3,557.00	\$ 1,561.00
Pandemic Revenue	\$ 1,500.00	\$ -	\$ -
Infrastructure	\$ 5,678.00	\$ 7,272.00	
Ebola			\$ 6,071.00
HPV Grant		\$ 186.82	\$ -
Seal A Smile Grant & Donations	\$ 11,392.73	\$ 9,000.00	\$ 6,600.00
<b>Fees for Service</b>			
Title 18 (Medicare)	\$ 3,071.92	\$ 7,512.13	\$ 3,509.88
Title 19 (HealthCheck/PNCC)	\$ 9,808.85	\$ 10,401.36	\$ 13,264.99
Seal A Smile MA	\$ 11,158.00	\$ 7,541.25	\$ 6,786.59
Jefferson Cty Consortium	\$ 42,653.37	\$ 34,874.63	\$ 35,958.00
Environmental Health Fees	\$ 3,896.87	\$ 3,840.00	\$ 28.44
Dept of Ag	\$ 55,247.00	\$ 54,310.00	\$ 76,443.00
Agent Program	\$ 185,618.68	\$ 208,455.32	\$ 195,298.00
Transient Well Water Program	\$ 40,645.00	\$ 44,766.00	\$ 50,466.25
Emergency Preparedness Consortium	\$ 34,924.00	\$ 42,865.00	\$ 34,356.09
General Health Revenue	\$ 15,187.56	\$ 12,989.97	\$ 11,122.91
Total Revenue	\$ 503,464.32	\$ 531,025.98	\$ 518,749.02
<b>Expenses</b>			
Environmental Carry Over	\$ 7,904.71	\$ 33,525.80	\$ 18,497.07
Emergency Prep/Pandemic Carry Over	\$ 9,436.19	\$ (2,247.70)	\$ 3,946.84
Seal A Smile Carry Over	\$ 9,067.93	\$ 9,566.41	\$ 2,430.63
Contracted Salary/Emergency Prep Coordinator Unemployment	\$ 21,931.36	\$ 44,616.34	\$ 29,209.60
Contracted Salary/SAS Hygienist & Dental Asst.	\$ 4,903.75	\$ 1,762.50	\$ 4,537.50
Personnel	\$ 554,410.54	\$ 617,300.87	\$ 620,909.38
General Supplies	\$ 160,227.47	\$ 95,708.29	\$ 113,273.42
Total Expenses	\$ 767,881.95	\$ 800,232.51	\$ 792,804.44
<b>City Tax Contribution</b>	\$ (264,417.63)	\$ (269,206.53)	\$ (274,055.42)