

OFFICE OF NAN KOTTKE COUNTY CLERK MARATHON COUNTY



Marathon County Mission Statement: Marathon County Government serves people by leading, coordinating, and providing county, regional, and statewide initiatives. It directly or in cooperation with other public and private partners provides services and creates opportunities that make Marathon County and the surrounding area a preferred place to live, work, visit, and do business.

ADJOURNED ORGANIZATIONAL MEETING

THE ADJOURNED ORGANIZATIONAL MEETING of the Marathon County Board of Supervisors, composed of thirty-eight (38) members, will convene at the Marathon County Courthouse, Assembly Room, 500 Forest Street, Wausau, on Tuesday, June 25, 2019, at 7:00 p.m. to consider the following matters:

A. OPENING OF SESSION:

- 1. Meeting called to order by Chairperson Gibbs at 7:00 p.m., the agenda being duly signed and posted
- 2. Pledge of Allegiance to the Flag; Followed by a Moment of Silence/Reflection
- 3. Reading of Notice
- 4. Request for silencing of cellphones and other electronic devices
- 5. Roll Call
- 6. Acknowledgment of visitors

B. EDUCATION PRESENTATIONS / REPORTS:

- 7. Update on the work of the Aging and Disability Resource Center of Central Wisconsin Jonette Arms and Tim Buttke
- 8. The Role of the Board of Health John Robinson and Joan Theuer

C. CONSENT AGENDA:

- 9. Approval of minutes from the May 23 and 28, 2019 meetings
- 10. Referral of bills and communications to respective committees
- 11. Authorizing the Clerk to issue orders, bills and claims from the last session through this session
- 12. Appointments
 - a) Local Emergency Planning Committee
 - b) Board of Adjustment
 - c) Solid Waste Management Board
- 13. Enactment of Ordinances:
 - a) Environmental Resources Committee:
 - A. Town of Eau Pleine Rezone, Nathan Wincentsen of Riverside Land Surveying on behalf of June A. Landwehr Irrevocable Trust #O-9-19
 - B. Town of Elderon Rezone, Matthew & Robyn Krull for Ruth Bessette #O-10-19

D. ORDINANCES:

14. Amending Sec. 2.05(1)(d), Gen. Code of Ord. To Provide for Board of Health Membership to Track Statutory Language #O-8-19

<u>RESOLUTIONS</u>

- E. HUMAN RESOURCES, FINANCE, AND PROPERTY COMMITTEE:
 - 15. Approving 2019 Interdepartmental Budget Transfers from Marathon County Department #R-31-19 Appropriations
- F. EXTENSION, EDUCATION, AND ECONOMIC DEVELOPMENT COMMITTEE AND **DIVERSITY AFFAIRS COMMISSION:**
 - 16. Declaring June as Pride Month in Marathon County #R-33-19
- G. POLICY QUESTION:
 - 17. Motion to determine whether NCHC should work with our county partners to facilitate the transfer of the Birth to 3 Program from NCHC to Marathon County Special Education?
- H. MISCELLANEOUS BUSINESS:
 - 18. Announcements or Requests
 - 19. Move to adjourn

WITNESS: My signature this 25th day of June, 2019

Nan Kottke Marathon County Clerk

NOTE:

The next meeting of the County Board will be the Educational Meeting on Thursday, July 18, 2019. The Business Meeting will be on Tuesday, July 23, 2019. Both meetings will be held at 7:00 p.m. in the Assembly Room of the Courthouse.

NOTICE PROVIDED TO: County Board Members

Marathon County Departments

News Media

Posted on County Website: www.co.marathon.wi.us

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk's Office at 715-261-1500 or e-mail infomarathon@mail.co.marathon.wi.us one business day before the meeting.



2018 Annual Report to the Community



Who We Are

The Aging and Disability Resource Center of Central Wisconsin (ADRC-CW) represents a regional collaboration through an *Intergovernmental Agreement* between four counties: Langlade, Lincoln, Marathon, and Wood. The ADRC-CW covers a large (7087.71 square miles), mostly rural area, in the center of the state. Services are provided to the surrounding communities from five office locations in: Antigo, Marshfield, Merrill, Wausau, and Wisconsin Rapids. The total population of the region is 256,573 with 62,250 or 24.3 percent of the population over the age of 60.

Our Mission

The Aging and Disability Resource Center of Central Wisconsin promotes choice and independence through personalized education, advocacy, and access to services that prevent, delay, and lessen the impacts of aging and disabilities in the lives of adults.







Volunteers

The ADRC-CW volunteers help in the offices, lead classes, set tables, package meals, deliver meals, and contribute to the overall success of the organization. It would not be possible to provide the services we do without the dedication of our volunteers.

Total ADRC-CW Volunteers: 308

Langlade: 61 Lincoln: 83 Marathon: 54 Wood: 110

Total Volunteer Hours: 44,518

Langlade: 11,935 Lincoln: 8951 Marathon: 7,268 Wood: 16,364

Resource Services

The resource specialists connect individuals, concerned family or friends, and professionals to information and support for issues related to aging or disabilities. The information can include options for older adults, transition services for youth with disabilities, and long-term care programs.

Total Contacts: 21,386

Langlade: 2602 Lincoln: 2858 Marathon: 9347 Wood: 6579

Total Customers: 15,061

Langlade: 1476 Lincoln: 1638 Marathon: 7030 Wood: 4917

Total Enrollments: 451

Family Care: 396

Iris: 55



Disability and Elder Benefit Services

The benefit specialists can help answer questions and solve problems related to benefits such as Medicare, Medicaid, Social Security, FoodShare, and private health insurance.

Total Disability Benefit Customers: 226

Langlade/Lincoln: 78

Marathon: 61 Wood: 87

Total Elder Benefit Customers: 1355

Langlade: 291 Lincoln: 246 Marathon: 464 Wood: 354



Senior Nutrition

The ADRC-CW provides nutritious meals to seniors in three ways: meals on wheels, community congregate dining, and with the State's only Café 60 program.

Hot and frozen meals are delivered to meet 1/3 of the daily requirements for an older adult.

Community congregate dining sites are a wonderful way to gather and have a meal.

The Café 60 program, available in Marathon County, offers choices not typical of a traditional senior nutrition program.

Total MOW Customers: 1,152

Langlade: 163 Lincoln: 221 Marathon: 498 Wood: 270

Total Congregate Customers: 908

Langlade: 146 Lincoln: 147 Marathon: 95 Wood: 520

Total Café 60 Customers: 367

Total MOW Meals Served: 137,667

Langlade: 17,224 Lincoln: 28,094 Marathon: 64,215 Wood: 28,134

Total Congregate Meals Served: 44,933

Langlade: 5,642 Lincoln: 8,427 Marathon: 8,164 Wood: 22,700

Total Café 60 Meals Served: 20,114





Promoting Healthy Aging

The ADRC-CW provides evidence based classes to help older adults learn new skills and stay healthy. The community-based wellness and prevention classes include topics that address chronic conditions, diabetes, and falls prevention.

Total Class Participants: 327

Langlade: 15 Lincoln: 51 Marathon: 92 Wood: 169

Total Class Hours: 3,760

Langlade: 180 Lincoln: 611 Marathon: 1013 Wood: 1955



Caregiver Support

The ADRC-CW recognizes that it is often the family, friends, and neighbors who help an individual with a disability, chronic illness, or age-related needs. The ADRC-CW provides classes, resources, and information to lessen the stress of caregiving

Total Contacts: 1,089

Case Management Customers: 80
Case Management Contacts: 693

Powerful Tools for Caregivers Sessions: 268

Langlade: 46 Marathon: 88 Wood: 134

Classes scheduled in Lincoln County were cancelled due to low enrollment.



Community Presence and Media

The ADRC-CW provides information about its work and services using multiple communication channels. We understand the importance of reaching as many people as we can to ensure that anyone who can benefit from ADRC-CW services knows about them and how to contact us.

Educational Presentations

Through partnerships with radio, television, and employers, the ADRC-CW conducted 122 presentations and interviews throughout the year

Monthly Newsletter

The ADRC-CW distributed more than 92,000 copies of its monthly publication, CHOICES. Copies are provided to all meal program participants and are delivered to businesses throughout the region.

Organizational Website

The ADRC-CW launched a new web design and domain late in 2017. The new site includes information on programs, classes, menus, and several ways to contact the offices.

There were 17,210 visitors to the website throughout the year. Of these visitors, 16,972 were new visitors.

Social Media

The ADRC-CW has a very active Facebook page with a growing number of followers. In 2018, the Facebook page had 405 unique followers and several posts received hundreds of likes reactions, and engagements.





ADRC-CW 2018 Funding Sources

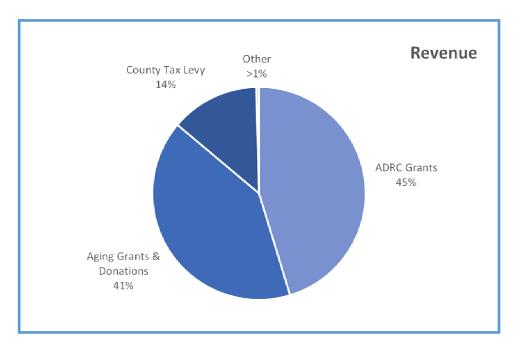
Total Revenue from all Funding Sources: \$6,374,673

ADRC Grants: \$2,887,364

Aging Grants and Donations: \$2,603,140

County Tax Levy: \$858,181

Other: \$25,988

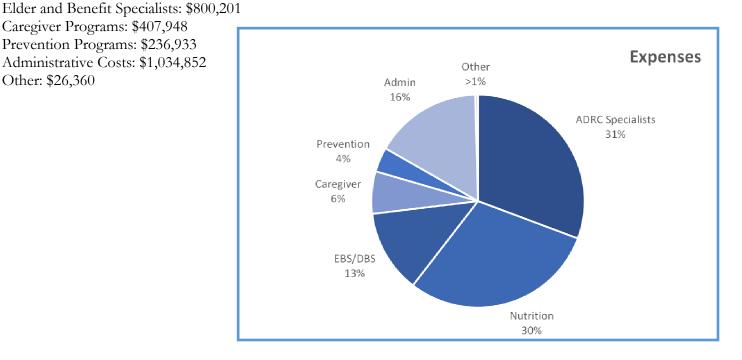


ADRC-CW 2018 Expenses

Total Expenses: \$6,338,704 ADRC Specialists: \$1,946,586 Nutrition Programs: \$1,885,824

Caregiver Programs: \$407,948 Prevention Programs: \$236,933 Administrative Costs: \$1,034,852

Other: \$26,360

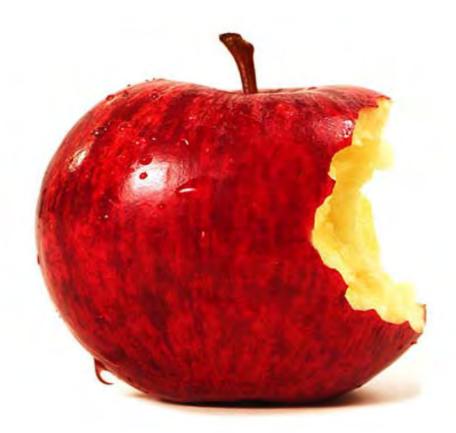


Why does it exist? What does it do?

Marathon County Board of Health



Apple a Day Keeps ...



Prevent infectious disease threats to the public

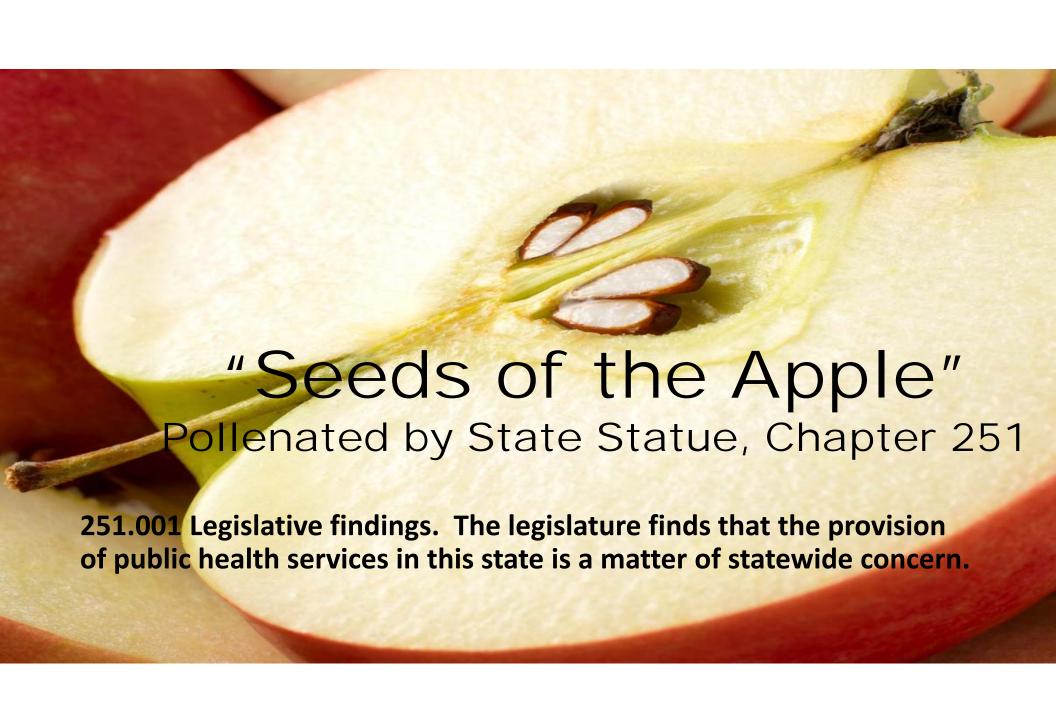
Prevent unsafe food and water

Promote strong healthy families during the early years

Creating places where it is easy to support healthy lifestyles

Protect against health hazards

Monitor and address community health priorities



The Why?

Assure the local health department is meeting it's statutory charge, that is, **overseeing the health** of individuals, families and the communities in which they live, learn, work, and play



... Individuals who reflect the diversity of the community and have a demonstrated interest or competency in the field of public health. State Statue 251.03

The Who?

Laura Scudiere

John Robinson, Chair
Sandi Cihlar, Vice-Chair, County Board of Supervisor
Lori Shepherd, MD, Secretary
Many Ann Crosby, County Board of Supervisor
Dean Danner,
Kue Her, RN
Michael McGrail, MD

The What?

- Assure state public health statutes and rules are carried out
- Assure it meets the requirements of a health department
- Adopt local public health regulations to protect and improve the public's health
- Assess public health needs & advocate for the provision of services
- Develop policy and provide leadership to meet public heath needs
- Assure department collaborates with other partners

Marathon County ...

- Adopt human health hazards and licensing regulations
- Select community health priorities every 4 years
- Host educational meeting with public officials, advance resolutions
- Study the effectiveness of program services
- Represent the diverse perspectives of residents
- Advise the Health Officer



Broaden the diversity of members to be in a better position to respond to today's challenges in addressing the social and economic issues impacting the health of our community.

Next time you see an apple ...



APPOINTMENT Local Emergency Planning Committee

Supervisors, appoint Robert Paradowski, Kraft Heinz ORM Manager, to the Local Emergency

Planning Committee for an indefinite term, replacing Brian Lu.

I, Brad Karger, Marathon County Administrator, do hereby upon approval of the Board of

DATED: June 25, 2019	
	Brad Karger Marathon County Administrator
STATE OF WISCONSIN) (SS) (COUNTY OF MARATHON) I, Nan Kottke, County Clerk in and for Marthe above appointment was confirmed by the Marthadjourned Organizational meeting which was held	*
SEAL	Nan Kottke Marathon County Clerk

APPOINTMENT Board of Adjustment

I, Kurt Gibbs, Chairperson of the Marathon County Board of Supervisors, do here	by
upon approval of the Board, re-appoint the following individuals to the Marathon County Boa	ard
of Adjustment for three year terms to expire June 30, 2022:	

Richard Lawson, 163228 Meadow Road, Wausau Roger Zimmermann, 216255 Esker Road, Hatley

Mileage/expense reimbursement is allowed for meeting attendance, paid upon request. Per diem will be paid to citizen members of the Board.

Dated this 25 th day of J	June, 2019.
	Kurt Gibbs
	County Board Chairperson
STATE OF WISCONSIN))SS.
COUNTY OF MARATHON)
the above appointments were	Clerk in and for Marathon County, Wisconsin, hereby certify that confirmed by the Marathon County Board of Supervisors at their eting which was held June 25, 2019.
SEAL	Nan Kottke
	Marathon County Clerk

APPOINTMENT Solid Waste Management Board

I, Brad Karger, Marathon County Administrator, do hereby upon approval of the Board of Supervisors, appoint and reappoint the following individuals to the Solid Waste Management Board for three year terms to expire April 30, 2022:

County Supervisor Jim Bove - appoint County Supervisor Thomas Seubert - reappoint County Supervisor Maynard Tremelling - reappoint Myron Podjaski, 226880 County Road Q, Ringle - reappoint

Mileage/expense reimbursement will be paid to all members of the Board. Per diem will be paid to citizen members.

Dated this 25 th day of J	ne, 2019.
	Brad Karger Marathon County Administrator
STATE OF WISCONSIN	
COUNTY OF MARATHON	SSS.
above appointments were co	erk in and for Marathon County, Wisconsin, hereby certify that the firmed by the Marathon County Board of Supervisors at their ing which was held June 25, 2019.

S E A L

Nan Kottke

Marathon County Clerk

ORDINANCE # O - -19

Town of Eau Pleine Rezone

WHEREAS, the Marathon County Board of Supervisors has been petitioned to amend the General Code of Ordinances for Marathon County Chapter 17 Zoning Code Chapter 17; by Nathan Wincentsen of Riverside Land Surveying on behalf of June A. Landwehr Irrevocable Trust to rezone from F-P, Farmland Preservation to R-R Rural Residential described as part of the NE ¼ of the SW ¼ of Section 05, Township 27 North, Range 03 East, Town of Eau Pleine, proposed as Lot #2 (3.000 Acres) of the Preliminary Survey submitted by Riverside Land Surveying LLC. Part of parent parcel PIN# 020-2703-053-0999 with a property address: 218334 Greenbrier Lane, Stratford WI, 54484.

WHEREAS, the petition was referred to the Marathon County Environmental Resources Committee (the Committee) for public hearing; and

WHEREAS, the Committee, on due notice, conducted a public hearing thereon, pursuant to Section 59,69, Wisconsin Statutes on June 6, 2019 to consider the petition to amend Chapter 17; and

WHEREAS, the Committee being duly informed of the facts pertinent to the changes proposed, having reviewed the staff report, and duly advised of the recommendations of the Town of Eau Pleine, hereby recommends the petition be GRANTED AS APPLIED FOR

NOW, THEREFORE, the County Board of Supervisors of the County of Marathon does ordain as follows: The General Code of Ordinances for Marathon County Chapter 17 Zoning Code (and accompanying Zoning Map) is amended as stated above.

	ENVIRONMENTAL RESOURCES COMMITTE	
		Chair
	Rick Sales	
	Sara Guild	
	1111 121	
	Andy The	
	Muly Jee	
	111 100	
	- War As	
ed this day o	f, 2019	

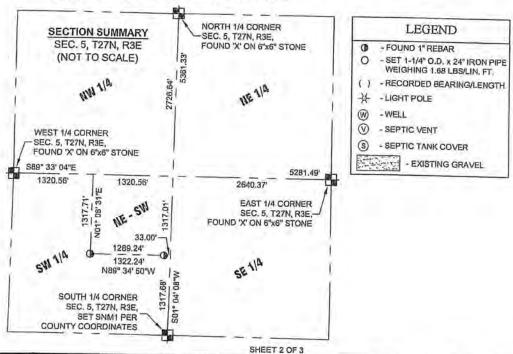
MARATHON CO. CERTIFIED SURVEY MAP NO.

Of a part of the Northeast 1/4 of the Southwest 1/4 of Section 5, Township 27 North, Range 3 East, Town of Eau Pleine, Marathon County, Wisconsin.



1.) BEARINGS ARE BASED ON THE WISCONSIN COUNTY COORDINATE SYSTEM, MARATHON COUNTY NAD 83 (2011) AND REFERENCED TO THE EAST LINE OF THE SOUTHWEST 1/4 OF SECTION 5, TOWNSHIP 27 NORTH, RANGE 3 EAST, MEASURED TO BEAR NORTH 01°04/08" EAST.

2.) THE WETLANDS LOCATION AS SHOWN HEREON WERE SCALED FROM THE MARATHON COUNTY GIS MAPPING AND ARE APPROXIMATE. A WETLANDS DELINEATION WOULD NEED TO BE PERFORMED TO DETERMINE THE EXACT LOCATION.



R	RIVERSIDE LAND SURVEYING LLC 5310 WILLOW STREET, WESTON, WI 54476 PH 715-241-7500 - FAX 715-355-6894 email - mail@civersidelandsurveying.com
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DRAWN BY	DATE
S.M.H.	MARCH 28, 2019
CHECKED BY	PROJECT NO.
N.J.W.	3030
PREPARED FOR:	SHAWN KARL

MARATHON COUNTY CERTIFIED SURVEY MAP NO. Of a part of the Northeast 1/4 of the Southwest 1/4 of Section 5, Township 27 North, Range 3 East, Town of Eau Pleine, Marathon County, Wisconsin. SW1/4 - NW1/4 UNPLATTED LANDS OWNED BY OTHERS SE1 4 - NN1 4 UNPLATTED LANDS NORTH 1/4 CORNER OWNED BY OTHERS SEC. 5, T2/N, H3E, FOUND 'X' ON 6'x6' STONE B SEC. 5, T27N, R3E, 5361.33' di 589° 33' 04"E de ali 1287.55 NORTH LINE OF THE NE1/4 OF THE SW1/4 IRON PIPE SET 4.5' NORTH OF IRON PIPE SET 6.2' EAST OF ali. FENCE LINE & 21.5' EAST FENCE LINE & 4.1' NORTH all de OF FENCE CORNER OF FENCE CORNER 1317 de di. W alt, N89° 33' 04"W 439.58 WEST LINE OF THE NE1/4 OF THE SW1/4 08"W LOT 2 130,680 sq. ft. 04 30, 297 3.000 acres S01° 297. SEE SHEET 2 OF 3 FOR LOT DETAIL ull. NW1/4 - SE1/4 S89° 33' 04"E 439.58 de LOT 1 1317.01 1,566,502 sq. ft. 35.962 acres ali NE1 4 - SW1 4 OWNED BY OTHERS GREENBRIER LANE SEE NOTES AND LEGEND ON SHEET 2 OF 3 EAST LINE OF THE NE1/4 OF THE SW1/4 N01° 08' 31"E 08"W REBAR FOUND 2.6' WEST REBAR FOUND 0.3' EAST OF RW OF FENCE END & 0.2' SOUTH OF FENCE END 1 N89° 34' 50"W (S89°59'22"W) MONUMENTED SOUTH LINE OF 1289.24' (1289.40') OWNED BY OTHERS THE NE1/4 OF THE SW1/4 CSM TO THE POWNED BY OTHERS NORTH N89" 34' 50"W 66 33.00 = 200 SE1 4 - SW14 RIGHT-OF-WAY 1317.68' 200 NO1 . 04' 08"E - SW1/4 BEARINGS ARE BASED ON THE WISCONSIN COUNTY COORDINATE SYSTEM, MARATHON COUNTY NAD 83 (2011) AND REFERENCED TO THE EAST LINE OF THE SOUTHWEST 1/4 OF SECTION 5, TOWNSHIP 27 SW1/4 NORTH, RANGE 3 EAST, MEASURED TO BEAR SOUTH 1/4 CORNER SEC. 5, T27N, R3E, SET SNM1 PER COUNTY COORDINATES NORTH 01"04'08" EAST. SHEET 1 OF 3



DRAWN BY	DATE	
S.M.H.	MARCH 28, 2019	
CHECKED BY	PROJECT NO.	
N.J.W.	3030	
PREPARED FOR:	SHAWN KARL	

MARATHON CO. CERTIFIED SURVEY MAP NO.

Of a part of the Northeast 1/4 of the Southwest 1/4 of Section 5, Township 27 North, Range 3 East, Town of Eau Pleine, Marathon County, Wisconsin.

I, Nathan J. Wincentsen, Professional Land Surveyor S-2539, hereby certify to the best of my knowledge and belief: That I have surveyed, mapped and divided a part of the Northeast 1/4 of the Southwest 1/4 of Section 5, Township 27 North, Range 3 East, Town of Eau Pleine, Marathon County, Wisconsin described as follows:

Commencing at the South 1/4 corner of said Section 5; Thence North 01"04'08" East along the East line of said Southwest 1/4, 1317.68 feet to the South line of said Northeast 1/4 of the Southwest 1/4; Thence North 89°34'50" West along said South line, 33.00 feet to the West right-of-way line of Greenbrier Lane and the point of beginning; Thence continuing North 89°34'50" West along said South line, 1289.24 feet to the West line of said Northeast 1/4 of the Southwest 1/4; Thence North 01°08'31" East along said West line, 1317.71 feet to the North line of said Northeast 1/4 of the Southwest 1/4; Thence South 89°33'04" East along said North line, 1287.55 feet to said West right-of-way line; Thence South 01°04'08" West along said West right-of-way line, 1317.03 feet to the point of beginning.

That the above described parcel of land contains 1,697,183 square feet or 38.962 acres, more or less;

That said parcel is subject to all easements, restrictions and right-of-ways of record;

Dated this

day of

That I have made this survey, division and map thereof at the direction of SHAWN KARL, Agent of said parcel;

That I have fully complied with the provisions of Section 236.34 of the Wisconsin Statutes, Chapter A-E7 of the Wisconsin Administrative Code and the subdivision regulations of Marathon County and the Town of Eau Pleine in Surveying, Mapping and Dividing the same.

That said map is a correct and accurate representation of the exterior boundaries of said parcel and the division thereof.

Riverside Land Surveying LLC Nathan J. Wincentsen P.L.S. No. 2539	
Approved for recording under the terms of the Marathon Co. Land Division Regulations.	TOWN OF EAU PLEINE Approved for recording under the terms
Ву	of the Town of Eau Pleine Land Division Regulations.
Date	Ву
Marathon County Department of Conservation, Planning and Zoning CPZ Tracking No.	Date

SHEET 3 OF 3



RECEIVED

MAY 1 3 2019

STATE OF WISCONSIN)
MARATHON COUNTY)
TOWN OF EAU PLEINE)

MARATHON CO. CONSERVATION PLANNING & ZONING DEPT

RESOLUTION ON ZONING ORDINANCE AMENDMENT

	day of		ution adopted by the Town of Eau Pleine Town Board at a meeting held on the, 2019.
			RESOLUTION
di	sapproves of the propo	osed amendment, the to	., Wisconsin Statues, provides that if a town affected by a proposed amendment town board may file a certified copy of a resolution adopted by such board mental Resources Committee prior to, at or within ten (10) days after the public
di	stricts files such a reso	olution, the Environmen	e town affected in the case of an ordinance relating to the location of boundaries of ental Resources Committee may not recommend to the County Board approval of ommend approval with change or recommend disapproval.
Re	ndwehr Irrevocable T esidential in the Town	rust to amend the Ma of Eau Pleine describ	LVED that the Town of Eau Pleine Town Board considered on the
			-0999 with a property address: 218334 Greenbrier Lane, Stratford WI, 54484.
	cessary); Has the applicant p	provided what public	d the following standards for rezoning above property (use additional sheets if c facilities and/or services currently serve the proposed development, what ad how the additional services will be provided?
	□No AYes	Explain: No	aditional services required
			0
	2) Has the applicant demonstrated how the provision of the public facilities will not be an unreasonable burde		e provision of the public facilities will not be an unreasonable burden to local
2)	Has the applicant of government?		
2)	government?	Explain:	
	government? No Yes Has the applicant of		and is suitable for the development proposed? Explain.
	Has the applicant d water pollution, soi	letermined that the late Explain: 10 K	and is suitable for the development proposed? Explain.
2) 33)	Has the applicant de water pollution, soi	letermined that the late Explain: 10 K	and is suitable for the development proposed? Explain. A A A A A A A A A A A B B

	Has the applicant demonstrated the need for the proposed development at this location? Explain. HNO Pes Explain: NO NEW LEVELOPMENT				
7)	Has the applicant demonstrated the availability of alternative locations? Be specific No Yes Explain: 1				
8)	Is cropland is being consumed by this zone change? What is the productivity of the agricultural lands involved? No Ares Explain: Minimal Change only loss of bacre of cropland				
9)	Has the applicant explained how the proposed development will be located to minimize the amount of agricultural land converted? No Yes Explain:				
10)	Is proposed rezone request consistent with the town's adopted Comprehensive Plan? Explain.				
11)	Is there anything else the Town wishes to present or comment on regarding this application to the Marathon County Environmental Resources (ERC) Committee? No Yes Explain:				
The	Town of recommends: Approval Disapproval of the amendment and/or zone change. Requests an Extension* for the following reasons:				
days	s. Stats §59.69(5)(e), (3), and (3m) authorizes Towns to extend the time to disapprove a zone change for a total of thirty (30) beyond the date of the public hearing. The extension must be by Town Board Resolution and remains in effect until the m Board adopts a resolution rescinding the extension. Clerk Town Board				
NO'	TE: If you recommend disapproval of this request, please make every effort to send a representative to the				

NOTE: If you recommend disapproval of this request, please make every effort to send a representative to the Environmental Resources Committee Public Hearing. Town input at the hearing is always appreciated. Please return this form before June 6, 2019 to:

Marathon County Conservation, Planning and Zoning Department 210 River Drive Wausau, WI 54403

ORDINANCE # O - -19

Town of Elderon Rezone

WHEREAS, the Marathon County Board of Supervisors has been petitioned to amend the General Code of Ordinances for Marathon County Chapter 17 Zoning Code Chapter 17; by Matthew and Robyn Krull on behalf of Ruth Bessette to rezone from G-A, General Agriculture to R-R, Rural Residential described as part of the SW ¼ of Section 01, Township 27 North, Range 10 East, Town of Elderon, proposed area to be rezoned (approximately 3.50 acres) of the Preliminary Survey submitted by Plover River Land Co. Part of parent parcel PIN# 022-2710-013-0990.

WHEREAS, the petition was referred to the Marathon County Environmental Resources Committee (the Committee) for public hearing; and

WHEREAS, the Committee, on due notice, conducted a public hearing thereon, pursuant to Section 59.69, Wisconsin Statutes on June 6, 2019 to consider the petition to amend Chapter 17; and

WHEREAS, the Committee being duly informed of the facts pertinent to the changes proposed, having reviewed the staff report, and duly advised of the recommendations of the Town of Elderon hereby recommends the petition be GRANTED AS APPLIED FOR

NOW, THEREFORE, the County Board of Supervisors of the County of Marathon does ordain as follows: The General Code of Ordinances for Marathon County Chapter 17 Zoning Code (and accompanying Zoning Map) is amended as stated above.

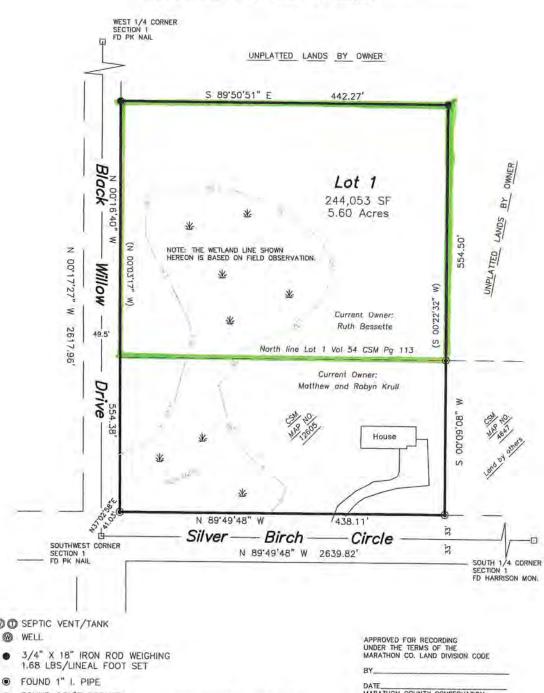
Dated this 6th day of June, 2019

ENVIRONMENTAL RESOURCES COMMITTEE

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		A Know	
	(Rick Dalgel	
		Sala Guild	
		Kielly lora	
		Melinteen	
	15	Me De	
	_	Vo V	
ated this	day of	, 2019	
		Kurt Gibbs – Marathon Cou	inty Board Chair
		Trait Globs Martinon Cot	and Dourd Chair

CERTIFIED SURVEY MAP NO.____ VOL___ PAGE_

OF ALL OF LOT 1, VOLUME 54 CERTIFIED SURVEY MAPS, PAGE 113 AND PART OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 1, TOWNSHIP 28 NORTH, RANGE 10 EAST, TOWN OF ELDERON, MARATHON COUNTY, WISCONSIN



O SEPTIC VENT/TANK

- □ FOUND GOV'T CORNER
- () RECORD DATA

GRAPHIC SCALE 1 inch = $100 \, \text{ft}$.

CPZ TRACKING #

NORTH

SURVEY PROVIDED BY:

BEARINGS ARE REFERENCED TO THE SOUTH LINE OF THE SW 1/4 OF SEC 1 ASSUMED TO BEAR NB9' 49' 48" W

SHEET 1 OF 2

PLOVER RIVER LAND CO., INC. 158 KENT STREET WAUSAU, WI 54403 (715)449-2229

RECEIVED

MAY 1 6 2019

STATE OF WISCONSIN MARATHON COUNTY TOWN OF ELDERON

MARATHON CO. CONSERVATION, PLANNING & ZONING DEPT

	Mary Ostrowski, Clerk of the Town of Elderon, Marathon County, State of Wisconsin, do hereby certify that the following is a me and correct copy of a resolution adopted by the Town of Elderon Town Board at a meeting held on the				
	RESOLUTION				
di	WHEREAS, Section 59.69(5)(e)3m., Wisconsin Statues, provides that if a town affected by a proposed amendment isapproves of the proposed amendment, the town board may file a certified copy of a resolution adopted by such board sapproving of the petition with the Environmental Resources Committee prior to, at or within ten (10) days after the public earing, and				
dis	WHEREAS, if the town board of the town affected in the case of an ordinance relating to the location of boundaries of stricts files such a resolution, the Environmental Resources Committee may not recommend to the County Board approval of e petition without change, but may only recommend approval with change or recommend disapproval.				
(ap	NOW, THEREFORE BE IT RESOLVED that the Town of Elderon Town Board considered on the				
Thener	Has the applicant provided what public facilities and/or services currently serve the proposed development, what additional services may be required, and how the additional services will be provided? No Pres Explain: No additional Services Veguired, adding to adding to add a cent parcel.				
2)	Has the applicant demonstrated how the provision of the public facilities will not be an unreasonable burden to local government?				
	No Deves Explain: NO burden to local government				
	Has the applicant determined that the land is suitable for the development proposed? Explain.				
3)	그 그 그 사람이 하는 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그				
3)	No Des Explain: No New desirement will be ame				
3)	Has the applicant demonstrated what will have to be done so the development will not cause unreasonable air and water pollution, soil erosion, or adverse effects on rare or irreplaceable natural areas? Explain.				
9)	Has the applicant demonstrated what will have to be done so the development will not cause unreasonable air and				

	Has the applicant demonstrated the need for the proposed development at this location?, Explain.
	Ano Dyes Explain: NO NEW awelog ment; add (My) to
7)	Has the applicant demonstrated the availability of alternative locations? Be specific
'n	INO Dives Explain: NO other property adjacent to his
8)	Is cropland is being consumed by this zone change? What is the productivity of the agricultural lands involved?
	ANO DYES Explain: Cropland will Continue in Production
9)	Has the applicant explained how the proposed development will be located to minimize the amount of agricultural land converted?
	No Yes Explain: N/ H
10)	Is proposed rezone request consistent with the town's adopted Comprehensive Plan? Explain.
	□No Dives Explain: adding to existing parcel
11)	Is there anything else the Town wishes to present or comment on regarding this application to the Marathon County Environmental Resources (ERC) Committee? No Explain: No Conflict with this amendment
	Town of recommends: Approval Disapproval of the amendment and/or zone change.
OR	Requests an Extension* for the following reasons:

NOTE: If you recommend disapproval of this request, please make every effort to send a representative to the Environmental Resources Committee Public Hearing. Town input at the hearing is always appreciated. Please return this form before June 6, 2019 to:

Marathon County Conservation, Planning and Zoning Department 210 River Drive Wausau, WI 54403

ORDINANCE #O-8-19

AMENDING SEC. 2.05(1)(d), GEN. CODE OF ORD. TO PROVIDE FOR BOARD OF HEALTH MEMBERSHIP TO TRACK STATUTORY LANGUAGE

WHEREAS, on April 19, 2018, the Board of Supervisors for the County of Marathon adopted § 2.05 of the General Code of Ordinances for Marathon County, establishing the membership requirements for the Board of Health; and

WHEREAS, the State of Wisconsin mandates relative to the membership requirements for local boards of health; and

WHEREAS, on May 7, 2019, the Marathon County Board of Health voted to amend § 2.05(1)(d), Gen. Code, to modify membership requirements in order to track with state statute; and

WHEREAS, on May 20, 2019, the Marathon County Health & Human Service Committee voted to amend § 2.05(1)(d), Gen. Code, as provided for in the attached addendum, to reference the requirements provided for in state statute; and

WHEREAS, §2.01(intro.), Gen. Code, permits amendment of the County Board rules of procedure by two-thirds majority vote of a quorum of the members present at a County board meeting.

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of Marathon does hereby ordain as follows:

1. To amend § 2.05(1)(d) of the General Code of Ordinances, pursuant to the addendum attached hereto.

BE IT FURTHER RESOLVED that the ordinance shall take effect upon passage and publication as required by law.

Dated this 25th day of June, 2019

HEALTH & HUMA	N SERV	VICES COMMITTEE	

Estimated Fiscal Impact: None.

Proposed Amendment to Code of Ordinances, Chapter 2, the Governing Body, Section 2.05(1)(d) Board of Health Membership

(1) Board of Health.

- (a) Committee type and reporting relationship: The Marathon County Board of Health coordinates through the Marathon County Health and Human Services committee to the County Board.
- (b) Mission/purpose statement: The purpose of the Marathon County Board of Health is to develop and recommend for consideration by the Health and Human Services Standing Committee, health policies which create an environment in which individuals can be healthy.
- (c) Statutory responsibilities: Wisconsin Statutes, Chapter 251.
- (d) Membership: Total of nine members consisting of at least three of whom are not elected County officials and no less than three County Board Supervisors. Board of Health members will demonstrate interest or competence in the field of public health or community health. A good faith effort to include at least one physician, one registered nurse, one dentist, and one veterinarian will be made. The membership composition will be in keeping with Wisconsin Statute 251.03.

The Medical Director of the Health Department shall serve as an Ex Officio member of the Board of Health. This position advises the Board, the Health Officer, and the Health Department staff on medical issues. This position shall not vote nor contribute to the quorum requirements of the Board.

- (e) Member term: Board of Health members are appointed by the County Administrator and confirmed by the Marathon County Board of Supervisors. Citizen members are appointed for five-year staggered terms. There are no term limits. County Board Supervisors are appointed to serve two-year terms concurrent with their terms of office. Committee vacancies will be filled according to County Board Rule 13.
- (f) Duties and responsibilities:
 - 1. Assure the enforcement of public health statutes and rules.
 - 2. Assure the local health department meets the requirements of a Level III Health Department as defined by statute.
 - 3. Adopt local public health regulations to protect and improve the public's health which are no less stringent than, and do not conflict with, state statutes or the rules of the State Department of Public Health.
 - 4. Assess public health needs and advocate for the provision of reasonable and necessary public health services.
 - 5. Develop policy and provide leadership to meet public health needs.
 - 6. Assure the local health department collaborates with other public health partners.
 - 7. Assure accountability of the local health department.
- (g) Other organization relationships: The Board of Health will work with the Marathon County Health and Human Services Standing Committee to develop County-wide Health policies. Work with other County Board Committees, as the needs arise.

RESOLUTION # R-_____- 19 APPROVE 2019 BUDGET TRANSFERS FOR MARATHON COUNTY DEPARTMENT APPROPRIATIONS

WHEREAS, Section 65.90(5)(a) dictates that appropriations in the Marathon County budget may not be modified unless authorized by a vote of two-thirds of the entire membership of the County Board of Supervisors, and

WHEREAS, the Human Resources, Finance and Property Committee has reviewed and does recommend the 2019 transfers listed below, and

NOW, THEREFORE, BE IT RESOLVED the Marathon County Board of Supervisors authorize and direct the budget transfers as listed below:

Transfer from:	Health 409-420 Other Healthcare services revenue
Hanslei IIOIII.	Health 409-420 Other Healthcare Services revenue
Transfer to:	Health 409-420 Salaries, Sundries and Educational Supplies
Amount:	\$12,775
Re:	Wisconsin Wins program to decrease youth access to tobacco products

Transfer from:	Health 417-427 Other Healthcare Services revenue		
Transfer to: Health 417-427 Expenditures Various			
Amount: \$95,207			
Re: Tobacco Multi-jurisdictional Coalition-program for tobacco prevent			
	control in Marathon, Portage and Wood Counties		

Transfer from: CPZ TBD DNR Lake Grant Revenue		
Transfer to:	CPZ TBD expenditures various-supplies, direct payments, wages	
Amount:	\$100,000	
Re:	Wi DNR Lake Protection Grant for shoreland and wetland restoration	

Transfer from: CPZ-TBD Norbert Guden DNR TRM Grant revenue	
Transfer to: CPZ-TBD Direct Payments	
Amount: \$534,447	
Re: WI DNR Target Runoff Management grant for Norbert Guden for	
storage and barnyard runoff to solve water quality problem	

Transfer from:	CPZ 269-791 NACF Technical Assistance Grant
Transfer to:	CPZ 269-791 Expenditures various
Amount:	\$40,000
Re:	NACD-National Association of Conservation Districts Technical Assistance
	Grant to fund staff for conservation practices

That a Class 1 Notice of this transaction be published within (10) days of its adoption;

BE IT FURTHER RESOLVED that the County Board of Supervisors hereby authorizes and directs the Marathon County Clerk to issue checks pursuant to this resolution and the Marathon County Treasurer to honor said checks.

BE IT FURTHER RESOLVED that the proper officers of Marathon County are hereby authorized and directed to take all actions necessary to effect this policy.

Respectfully submitted this 25th day of June 2019.

HUMAN RESOURCES, FINANCE AND PROPERTY COMMITTEE				
•				

Fiscal Note: This resolution modifies the revenues and expenditures for various County funds. There is no additional County levy appropriated in this resolution.

MARATHON COUNTY

Budget Transfer Authorization Request Form

This form must be completed electronically and emailed to **Alicia Richmond** and to your Department Head. This email will confirm that your Department Head acknowledges approval of this transfer. Forms that are incomplete, incorrect, out-of-balance, or that have not been sent to your Department Head will be returned. The Finance Department will forward completed forms to the Marathon County Human Resources, Finance & Property Committee.

DEPARTMENT:	Conservation, Planning & Zoning	BUDGET YEAR:	2019	_

TRANSER FROM:

Action	Account Number	Account Description	Amount
Revenue Increase	XXX-XXX-8-2485	LPT63719 DNR LAKE GRANT 2019	100,000

TRANSER TO:

Action	Account Number	Account Description	Amount
Expenditure Increase	XXX-XXX-9-7170	DIRECT PAYMENTS	7500
Expenditure Increase	XXX-XXX-9-3390	MEETING EXPENSES	4000
Expenditure Increase	XXX-XXX-9-3410	AG AND HORTICULTURE SUPPLIES	23100
Expenditure Increase	XXX-XXX-9-3480	EDUCATIONAL SUPPLIES	5400
Expenditure Increase	XXX-XXX-9-1250	WAGES – TEMP REGULAR	50000
Expenditure Increase	XXX-XXX-9-1510	SOCIAL SECURITY	4000
Expenditure Increase	XXX-XXX-9-1520	RETIREMENT	4000
	XXX-XXX-9-1543	INCOME CONTINUATION	200
Expenditure Increase	XXX-XXX-9-1550	LIFE INSURANCE	10
Experiorure increase	XXX-XXX-9-1560	WORKERS COMPENSATION	1700
	XXX-XXX-9-1580	UNEMPLOYMENT COMPENSATION	90

I, the undersigned, respectfι	ılly request that the Human Resource	es, Finance & Property Committee approve the
following change in budget /	transfer of funds as discussed in the	attached supplemental information.

Requested By:	Diane Hanson	Date Completed:	5/13/2019
		_	

Approv	ved by Human Resources, Finance & Property Committee:	Date Transferred:
	MARATHON COUNT	Y
	Budget Transfer Authorization Request – Suppler	mental Information
	this supplemental information to the original Budget Transfer Authorizeted by the requesting department, or the Budget Transfer Authorizati	·
1)	What is the name of this Program/Grant? (DO NOT use abbreviations) Wisconsin Department of Natural Resource Lake Protection Control Water Resources Protection.	, .
2)	Provide a brief (2-3 sentence) description of what this program does. This grant will provide funds for a casual employee to assist to restoration efforts and continue to engage local communities protection efforts.	andowners with shoreland and wetland
3)	This program is: (Check one) ☐ An Existing Program. ☑ A New Program.	
4)	What is the reason for this budget transfer? □ Carry-over of Fund Balance. □ Increase/Decrease in Grant Funding for Existing Program. □ Increase/Decrease in Non-Grant Funding (such as tax levy, don Set up Initial Budget for New Grant Program. □ Set up Initial Budget for New Non-Grant Program □ Other. Please explain: Click here to enter description	ations, or fees) for Existing Program.
5)	If this Program is a Grant, is there a "Local Match" Requirement? ☐ This Program is not a Grant. ☐ This Program is a Grant, but there is no Local Match requirement. ☑ This Program is a Grant, and there is a Local Match requirement. ☐ Cash (such as tax levy, user fees, donations, etc.) ☑ Non-cash/In-Kind Services: (Describe) CPZ staff time, office.	nt of: (Check one)
6)	Does this Transfer Request increase any General Ledger 8000 Accound No. ☐ Yes, the Amount is Less than \$30,000. ☐ Yes, the Amount is \$30,000 or more AND: (Check one) ☐ The capital request HAS been approved by the CIP Commit	

 $\hfill\Box$ The capital request HAS NOT been approved by the CIP Committee.

COMPLETED BY FINANCE DEPARTMENT:			
Is 10% of this program appropriation unit or fund?	No	Is a Budget Transfer Resolution Required?	Yes
Is 10% of this program appropriation unit or fund?	No	Is a Budget Transfer Resolution Required?	Ye

MARATHON COUNTY

Budget Transfer Authorization Request Form

This form must be completed electronically and emailed to **Alicia Richmond** and to your Department Head. This email will confirm that your Department Head acknowledges approval of this transfer. Forms that are incomplete, incorrect, out-of-balance, or that have not been sent to your Department Head will be returned. The Finance Department will forward completed forms to the Marathon County Human Resources, Finance & Property Committee.

BUDGET YEAR: 2019

DEPARTMENT: Conservation, Planning & Zoning

TRANSER FROM:

Action	Account Number	Account Description	Amount
Revenue Increase	XXX-XXX-8-2485	Norbert Guden DNR TRM Grant	\$534,447
TRANSER TO:			
Action	Account Number	Account Description	Amount
Expenditure Increase	XXX-XXX-9-7170	Direct Payments	\$534,447
	• •	n Resources, Finance & Property Committee apssed in the attached supplemental information	•
Requested By: Diane H	anson	Date Complet	red: 5/13/2019
COMPLETED BY FINANCE Approved by Human Reso		ommittee: Date Transferr	red:

Budget Transfer Authorization Request – Supplemental Information

Attach this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be completed by the requesting department, or the Budget Transfer Authorization Request Form will be returned.

Τ)	What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms)
	Wisconsin Department of Natural Resources Target Runoff Management Grant for Norbert Guden
2)	Provide a brief (2-3 sentence) description of what this program does.
	This grant will provide cost share funds to Norbert Guden for the installation of a manure storage and barnyard runoff project to resolve a water quality issue.
3)	This program is: (Check one)
	☐ An Existing Program.
	☑ A New Program.
4)	What is the reason for this budget transfer?
	☐ Carry-over of Fund Balance.
	\square Increase/Decrease in Grant Funding for Existing Program.
	\Box Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program.
	☑ Set up Initial Budget for New Grant Program.
	\square Set up Initial Budget for New Non-Grant Program
	☐ Other. Please explain: Click here to enter description
5)	If this Program is a Grant, is there a "Local Match" Requirement?
	☐ This Program is not a Grant.
	☑ This Program is a Grant, but there is no Local Match requirement.
	\Box This Program is a Grant, and there is a Local Match requirement of: (Check one)
	☐ Cash (such as tax levy, user fees, donations, etc.)
	☐ Non-cash/In-Kind Services: (Describe) Click here to enter description
6)	Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts)
	☑ No.
	\square Yes, the Amount is Less than \$30,000.
	\square Yes, the Amount is \$30,000 or more AND: (Check one)
	\Box The capital request HAS been approved by the CIP Committee.
	\Box The capital request HAS NOT been approved by the CIP Committee.

Budget Transfer Authorization Request Form

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Account Number 269-791 -9- 7212	Account Description National Association of Conservation Districts (NACD) Technical Assistance Grant	40000
Account Number	Account Description	Amount
	SALARIES – PERMANENT REGULAR	25598
269-791 9 1510		
203 731 3 1310	SOCIAL SECURITY	1836
269-791 9 1520	SOCIAL SECURITY RETIREMENT	1836 1680
269-791 9 1520	RETIREMENT	1680
269-791 9 1520 269-791 9 1540	RETIREMENT HOSPITAL/HEALTH INSURANCE	1680 8882
269-791 9 1520 269-791 9 1540 269-791 9 1541	RETIREMENT HOSPITAL/HEALTH INSURANCE DENTAL INSURANCE	1680 8882 352
	Account Number 269-791 9 1110	•

Date Transferred:

COMPLETED BY FINANCE DEPARTMENT:

Approved by Human Resources, Finance & Property Committee:

Budget Transfer Authorization Request – Supplemental Information

Attach this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be completed by the requesting department, or the Budget Transfer Authorization Request Form will be returned.

Τ)	What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms)
	National Association of Conservation Districts Technical Assistance Grant
2)	Provide a brief (2-3 sentence) description of what this program does.
	Grant program to provide funding for staff to provide technical assistance for conservation practices. Marathon County intends to utilize the funds to offset tax levy costs for staff assisting landowners with soil health practices including grazing.
3)	This program is: (Check one)
	☑ An Existing Program.
	☐ A New Program.
4)	What is the reason for this budget transfer?
	☐ Carry-over of Fund Balance.
	☐ Increase/Decrease in Grant Funding for Existing Program.
	\Box Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program.
	☑ Set up Initial Budget for New Grant Program.
	☐ Set up Initial Budget for New Non-Grant Program
	☐ Other. Please explain: Click here to enter description
5)	If this Program is a Grant, is there a "Local Match" Requirement?
	☐ This Program is not a Grant.
	☑ This Program is a Grant, but there is no Local Match requirement.
	\Box This Program is a Grant, and there is a Local Match requirement of: (Check one)
	\Box Cash (such as tax levy, user fees, donations, etc.)
	☐ Non-cash/In-Kind Services: (Describe) Click here to enter description
6)	Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts)
	□ No.
	\square Yes, the Amount is Less than \$30,000.
	\square Yes, the Amount is \$30,000 or more AND: (Check one)
	\square The capital request HAS been approved by the CIP Committee.
	☐ The capital request HAS NOT been approved by the CIP Committee.

Budget Transfer Authorization Request Form

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ANSER FROM:			
TEch	Account Number	Account Description	Amount
Select action	Click to enter GL Account	National Association of Conservation Districts (NACD) Technical Assistance Grant – PAGE 2	Enter amount
ANSER TO:	Account Number	Account Description	Amount
Expenditure Increase	269-791 9 1560	WORKERS COMPENSATION	1164
		UNEMPLOYMENT COMPENSATION	64
expenditure Increase	269-791 9 1580		Ü
	et / transfer of funds as discu	an Resources, Finance & Property Committee applessed in the attached supplemental information. Date Complete	

Approved by Human Resources, Finance & Property Committee:

Date Transferred: _____

Budget Transfer Authorization Request Form

This form must be completed electronically and emailed to **Alicia Richmond** and to your Department Head. This email will confirm that your Department Head acknowledges approval of this transfer. Forms that are incomplete, incorrect, out-of-balance, or that have not been sent to your Department Head will be returned. The Finance Department will forward completed forms to the Marathon County Human Resources, Finance & Property Committee.

PEPARTMENT: Health		BUDGET YEAR: 2019		
RANSER FROM:				
Action	Account Number	Account Description	Amount	
Revenue Increase	417-42782446	Oth Health Care Serv-St Grant	\$95,207	
RANSER TO:	Account Number	Account Description	Amount	
Expenditure Increase	417-42791110	Salaries-Permanent-Regular	\$75,000	
Expenditure Increase	417-42792990	Sundry Contractual Services	\$2,500	
Expenditure Increase	417-42793130	Printing/Duplication	\$350	
Expenditure Increase	417-42793390	Meeting Expenses	\$600	
Expenditure Increase	417-42792141	Internet Service	\$25	
Expenditure Increase	417-42793321	Personal Auto Mileage	\$4,700	
	417-42793360	Lodging	\$771	
Expenditure Increase				

Approved by Human Resources, Finance & Property Committee:

Date Transferred: ____

Budget Transfer Authorization Request – Supplemental Information

Attach this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be completed by the requesting department, or the Budget Transfer Authorization Request Form will be returned.

1) What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms)

	Tobacco Multi-Jurisdictional Coalition (MJC) 2019-2020
2)	Provide a brief (2-3 sentence) description of what this program does.
	This program provides tobacco education, outreach and capacity building related to tobacco prevention and control in a three county area, including Marathon, Portage and Wood.
3)	This program is: (Check one)
	An Existing Program.
	☐ A New Program.
4)	What is the reason for this budget transfer?
	☐ Carry-over of Fund Balance.
	☐ Increase/Decrease in Grant Funding for Existing Program.
	\Box Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program.
	\square Set up Initial Budget for New Grant Program.
	☐ Set up Initial Budget for New Non-Grant Program
	☑ Other. Please explain: Set up initial budget for new fiscal year for an existing grant program
5)	If this Program is a Grant, is there a "Local Match" Requirement?
	☐ This Program is not a Grant.
	☑ This Program is a Grant, but there is no Local Match requirement.
	\Box This Program is a Grant, and there is a Local Match requirement of: (Check one)
	\Box Cash (such as tax levy, user fees, donations, etc.)
	□ Non-cash/In-Kind Services: (Describe)
6)	Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts)
	ℤ No.
	\square Yes, the Amount is Less than \$30,000.
	☐ Yes, the Amount is \$30,000 or more AND: (Check one)
	\square The capital request HAS been approved by the CIP Committee.
	\Box The capital request HAS NOT been approved by the CIP Committee.

Budget Transfer Authorization Request Form

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BUDGET YEAR: 2019

DEPARTMENT: Health

COMPLETED BY FINANCE DEPARTMENT:

Action	Account Number	Account Description	Amount
Select action	Click to enter GL Account	Click here to enter account description	Enter amount
Action	Account Number	Account Description	Amount
Expenditure Increase	417-42793250	Registration	\$885
Expenditure Increase	417-42792250	Telephone	\$96
Expenditure Increase	417-42793241	Licenses & Certifications	\$55
Expenditure Increase	417-42792133	Indirect	\$10,000
ne undersigned, respec	ctfully request that the Human	Resources, Finance & Property Committee a	oprove the

Approv	red by Human Resources, Finance & Property Committee: Date Transferred:
	MARATHON COUNTY
	Budget Transfer Authorization Request – Supplemental Information
	this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be ted by the requesting department, or the Budget Transfer Authorization Request Form will be returned.
1)	What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms) Tobacco Multi-Jurisdictional Coalition (MJC) 2019-2020
2)	Provide a brief (2-3 sentence) description of what this program does. This program provides tobacco education, outreach and capacity building related to tobacco prevention and control in a three county area, including Marathon, Portage and Wood.
3)	This program is: (Check one) ☑ An Existing Program. □ A New Program.
4)	What is the reason for this budget transfer? □ Carry-over of Fund Balance. □ Increase/Decrease in Grant Funding for Existing Program. □ Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program. □ Set up Initial Budget for New Grant Program. □ Set up Initial Budget for New Non-Grant Program ☑ Other. Please explain: Set up initial budget for new fiscal year for an existing grant program
5)	If this Program is a Grant, is there a "Local Match" Requirement? ☐ This Program is not a Grant. ☑ This Program is a Grant, but there is no Local Match requirement. ☐ This Program is a Grant, and there is a Local Match requirement of: (Check one) ☐ Cash (such as tax levy, user fees, donations, etc.) ☐ Non-cash/In-Kind Services: (Describe)
6)	Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts) ☑ No. ☐ Yes, the Amount is Less than \$30,000. ☐ Yes, the Amount is \$30,000 or more AND: (Check one) ☐ The capital request HAS been approved by the CIP Committee. ☐ The capital request HAS NOT been approved by the CIP Committee.

Budget Transfer Authorization Request Form

This form must be completed electronically and emailed to **Alicia Richmond** and to your Department Head. This email will confirm that your Department Head acknowledges approval of this transfer. Forms that are incomplete, incorrect, out-of-balance, or that have not been sent to your Department Head will be returned. The Finance Department will forward completed forms to the Marathon County Human Resources, Finance & Property Committee.

PARTMENT: Health		BUDGET YEAR: 2019	
ANSER FROM:			
Action	Account Number	Account Description	Amount
Revenue Increase	409-42082446	Oth Health Care Serv-St G	\$12,775
RANSER TO: Action	Account Number	Account Description	Amount
Expenditure Increase	409-42091110	Salaries-Permanent-Regular	\$5,617
Expenditure Increase	409-42092990	Sundry Contractual Service	\$7,008
Expenditure Increase	409-42093480	Educational Supplies	\$150
	•	n Resources, Finance & Property Committee approsed in the attached supplemental information.	ve the
quested By: _ Joan Theu	urer, Health Officer	Date Completed:	5/24/2019
OMPLETED BY FINANCE D			

Approved by Human Resources, Finance & Property Committee:

Date Transferred: _____

Budget Transfer Authorization Request – Supplemental Information

Attach this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be completed by the requesting department, or the Budget Transfer Authorization Request Form will be returned.

1)	What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms)
	Tobacco Wisconsin Wins 2019-2020
2)	Provide a brief (2-3 sentence) description of what this program does.
	Wisconsin Wins is a State-level initiative designed to decrease youth access to tobacco products. The money is used to conduct retailer compliance checks. It is also used for retailer education and training, media, and community outreach and education.
3)	This program is: (Check one)
	☑ An Existing Program.
	☐ A New Program.
4)	What is the reason for this budget transfer?
	☐ Carry-over of Fund Balance.
	☐ Increase/Decrease in Grant Funding for Existing Program.
	\square Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program.
	\square Set up Initial Budget for New Grant Program.
	☐ Set up Initial Budget for New Non-Grant Program
	🗷 Other. Please explain: Set up initial budget for new fiscal year for an existing grant program
5)	If this Program is a Grant, is there a "Local Match" Requirement?
	☐ This Program is not a Grant.
	☑ This Program is a Grant, but there is no Local Match requirement.
	\Box This Program is a Grant, and there is a Local Match requirement of: (Check one)
	\square Cash (such as tax levy, user fees, donations, etc.)
	□ Non-cash/In-Kind Services: (Describe)
6)	Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts)
	☑ No.
	☐ Yes, the Amount is Less than \$30,000.
	\square Yes, the Amount is \$30,000 or more AND: (Check one)
	\square The capital request HAS been approved by the CIP Committee.
	\Box The capital request HAS NOT been approved by the CIP Committee.
	LETED BY FINANCE DEPARTMENT:
S 10% (of this program appropriation unit or fund? No Is a Budget Transfer Resolution Required? Yes

RESOLUTION #R-33-19

DECLARING JUNE AS "PRIDE MONTH IN MARATHON COUNTY"

WHEREAS, Marathon County supports the rights of every citizen to experience equality and freedom from discrimination; and

WHEREAS, all people regardless of age, gender identity, race, ethnicity, religion, marital status, national origin, sexual orientation, or physical abilities have the right to be treated on the basis of their intrinsic value as human beings; and

WHEREAS, Marathon County's <u>Comprehensive Plan 2016</u> identifies the county's overarching goal to be the healthiest, safest, and most prosperous county in the State of Wisconsin and calls for leadership to ensure that Marathon County is an open, inclusive, and diverse place to live and work; and

WHEREAS, the Williams Institute at the UCLA School of Law <u>reported</u> in January 2019 that 3.8% of the population of Wisconsin identifies as LGBTQ+; and

WHEREAS, assuming that state statistics hold true locally and 3.8% of Marathon County residents identify as being LGBTQ+, they represent one of the larger minority/marginalized groups in the County; and

WHEREAS, a 2010 study ("Marathon County: A Next Generation Talent Magnet") conducted by Next Generation Consulting of Madison, WI, (referenced in Marathon County's Comprehensive Plan 2016) concluded that being a place that is perceived as open, safe, and accessible to people of diverse backgrounds is a critical issue that needs to be addressed in order to ensure Marathon County's future prosperity; and

WHEREAS, the <u>2019 Economic Development Strategic Plan</u> completed by TIP Strategies of Austin, TX, commissioned by the Wausau Region Chamber of Commerce identified talent recruitment as a fundamental component of economic success, stating that competing successfully for top-tier talent will require that the Greater Wausau Region bring in nontraditional workers to attract and retain skilled workers from outside the region; and

WHEREAS, June 28, 2019, marks the 50th anniversary of the "Stonewall Uprising," which is generally recognized as a turning point in the struggle for civil rights of the LGBTQ+ community; and

WHEREAS, in 1982, Wisconsin was the first state to ban discrimination based on sexual orientation in employment, housing, education, credit, and all public accommodations — When signed into law by Governor Lee S. Dreyfus, he <u>said</u>, "It is a fundamental tenet of the Republican Party that government ought not intrude in the private lives of individuals where no state purpose is served, and there is nothing more private or intimate than who you live with and who you love"; and

WHEREAS, we recognize that diversity and inclusiveness is key to the future economic and social success of Marathon County; and

WHEREAS, we recognize and embrace the responsibility for Marathon County to set a positive example for the community in ensuring that our employment practices and work environments are respectful of all people, regardless of age, gender identity, race, color, religion, marital status, national origin, sexual orientation, or physical challenges,

NOW THEREFORE, BE IT RESOLVED by the Marathon County Board of Supervisors that the month of June shall be proclaimed as "Pride Month in Marathon County," when all Marathon County residents are

invited to reflect on ways that we can live and work together with a commitment to mutual respect and understanding; and

BE IT FURTHER RESOLVED by the Marathon County Board of Supervisors that the County Administrator is directed to evaluate Marathon County Government's employment policies/practices and facilities/work environments to assure that they meet the County's expectation of being open and inclusive to people who identify as LGBTQ+, consistent with our Comprehensive Plan.

Dated this 25th day of June, 2019.

DIVERSITY AFFAIRS COMMISSION
EXTENSION, EDUCATION, AND ECONOMIC DEVELOPMENT COMMITTEE
Fiscal Impact: There is no cost to declaring the month of June as "Pride Month in Marathon County."
It is unknown at this time whether the evaluation of Marathon County Government employment practices and facilities to ensure they are open and inclusive to LGBTQ+ people will require any financial investment.
Note of Clarification: The term "LGBTQ+" represents:
L = Lesbian
G = Gay
B = Bisexual
T = Transgender
Q = Queer or Questioning

+ = encompasses a list of other identities that fall under the "Queer" umbrella

NOTE: In light of the fact that this substitute resolution has not been debated before the full
County Board, the County Board Chair asks that you be mindful of the Wisconsin Open
Meeting Law and refrain from contacting him, or other board members, to discuss the
substitute resolution and instead, offer all of your comments at the full County Board meeting
on Tuesday.

SUBSTITUTE RESOLUTION #R-33-19

DECLARING JUNE AS "DIVERSITY AND INCLUSIVENESS MONTH IN MARATHON COUNTY"

WHEREAS, Marathon County supports the rights of every citizen to experience equality and freedom from discrimination; and

WHEREAS, all people regardless of age, gender identity, race, ethnicity, religion, marital status, national origin, sexual orientation, or physical abilities have the right to be treated on the basis of their intrinsic value as human beings; and

WHEREAS, we recognize that there have been instances in Marathon County when our community has fallen far short of our goal of being inclusive and when people in minority or marginalized groups have been discriminated against by virtue of their age, gender identity, race, ethnicity, religion, marital status, national origin, sexual orientation, or physical abilities; and

WHEREAS, Marathon County's <u>Comprehensive Plan 2016</u> identifies the county's overarching goal to be the healthiest, safest, and most prosperous county in the State of Wisconsin and calls for leadership to ensure that Marathon County is an open, inclusive, and diverse place in which to live and work; and

WHEREAS, a 2010 study ("Marathon County: A Next Generation Talent Magnet") conducted by Next Generation Consulting of Madison, WI, (referenced in Marathon County's Comprehensive Plan 2016) concluded that being a place that is perceived as open, safe, and accessible to people of diverse backgrounds is a critical issue that needs to be addressed in order to ensure Marathon County's future prosperity; and

WHEREAS, Marathon County's <u>Strategic Plan 2018–2022</u> outlines the Core Values that Marathon County stands for, which include *diversity*, demonstrated by "actively welcoming and valuing people with different perspectives and experiences"; and

WHEREAS, the <u>2019 Economic Development Strategic Plan</u> completed by TIP Strategies of Austin, TX, commissioned by the Wausau Region Chamber of Commerce identified talent recruitment as a fundamental component of economic success, stating that competing successfully for top-tier talent will require that the Greater Wausau Region attract and retain nontraditional skilled workers from outside the region; and

WHEREAS, we recognize that diversity and inclusiveness is key to the future economic and social success of Marathon County; and

WHEREAS, we recognize and embrace the responsibility for Marathon County to set a positive example for the community in ensuring that our employment practices and work environments are respectful of all people, regardless of age, gender identity, race, ethnicity, religion, marital status, national origin, sexual orientation, or physical abilities; and

WHEREAS, we recognize and embrace our responsibility to educate ourselves and our community on the discrimination and struggles faced by minority or marginalized groups.

NOW THEREFORE, BE IT RESOLVED by the Marathon County Board of Supervisors that the month of June shall be proclaimed as "Diversity and Inclusiveness Month in Marathon County," when all Marathon County residents are invited to reflect on ways that we can live and work together with a commitment to mutual respect and understanding; and

BE IT FURTHER RESOLVED by the Marathon County Board of Supervisors that the County Administrator is directed to evaluate Marathon County Government's employment policies and practices and facilities and work environments to ensure that they meet the County's expectation of being open and inclusive to all people, consistent with our Comprehensive Plan; and

BE IT FURTHER RESOLVED by the Marathon County Board of Supervisors that it will commit to educating itself on the plight and challenges faced by minority or marginalized groups to better develop truly inclusive public services, policies, and practices. Specifically, the County Administrator is directed to support the board by arranging for regular educational sessions, beginning in September of 2019 and concluding in June of 2020, intended to develop (A) a common understanding of the terminology for discussing the status of minority and marginalized groups, (B) an accurate understanding of the history of minority and marginalized groups in Marathon County, and (C) a solid understanding of the dynamics of implicit and explicit bias and institutional and structural discrimination that can lead to health disparities and other outcomes that are inconsistent with our commitment to diversity and inclusion and our goal of being the healthiest, safest, and most prosperous county in Wisconsin; and

BE IT FURTHER RESOLVED by the Marathon County Board of Supervisors that it will commit to utilizing the public engagement methodology to discuss how specific county government policies and practices can be changed or updated to ensure that Marathon County lives up to its goal of being welcoming and inclusive to all people. This public engagement process will start shortly after the educational sessions are completed but not later than September of 2020.

Dated this 25th day of June, 2019.

DIVER	RSITY AFFAIRS (COMMISSION		
EXTENSION, EDUCATION	, AND ECONOR	MIC DEVELOPMENT	COMMITTEE	

Fiscal Impact: There is no cost to declaring the month of June as "Diversity and Inclusiveness Month in Marathon County."

It is unknown at this time whether the evaluation of Marathon County Government employment practices and facilities to ensure they are open and inclusive to all people will require any financial investment. County Board education is likely to have some cost associated with it to bring forward presenters with subject matter expertise. The estimated cost will range from \$1000 to \$5000.

POLICY QUESTION:



Motion to determine whether NCHC should work with our county partners to facilitate the transfer of the Birth to 3 Program from NCHC to Marathon County Special Education?

Transfer of Birth to 3 Program from NCHC to MCSE

North Central Health Care

Policy Question

Should NCHC work with our county partners to facilitate the transfer of the Birth to 3 Program from NCHC to Marathon County Special Education?

Agenda

- Describe Marathon County Special Education
- Overview Birth to 3 Services
- · History of NCHC Providing Birth to 3 Services
- · Analysis of Transfer
- Highlights of the Transfer Process
- Questions

Marathon County Special Education

North Central Health Care

Marathon County Special Education (MCSE)

- Children with Disabilities Education Board (CCDEB)
- MCSE is a legally separate entity from Marathon County government
- · One of four remaining in the State
- Established in 1958 Statutorily created to provide services to students with disabilities ages 3-21
- The CCDEB has regulatory guidance from the Federal Individuals with Disabilities Act (IDEA)
- Birth to Three program integration provides a logical fit and expansion of MCSE continuity of care
- The reference to Marathon County is only a historical geographic reference and has no limitation to taking on the Birth to Three program regionally

Overview of Birth to 3 Services



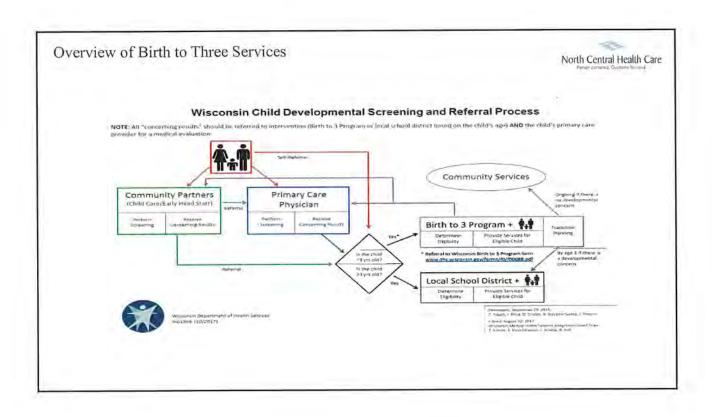
Children ages birth to 36 months are eligible. Eligibility is based on a diagnosed disability of 25% delay in one or more areas of development. The child's ability to:

- · Learn (cognitive development)
- · Move, see and hear (physical/motor development
- · Communicate (speech and language development)
- Respond to and relate with others (social and emotional development)
- · Eat, dress and care for daily living needs (adaptive development)

The Birth to 3 service team consists of the parent, service coordinator, and at least two professionals knowledgeable about the child's suspected areas of need

NCHC implemented a regional Birth to 3 Program in 2012

Service Coordination and/or Service Delivery



History of NCHC Providing Birth to 3 Services

North Central Health Care

Background

- Wisconsin has had early intervention programs since the 1970's
- Federally mandated program (Part C of the Individual with Disabilities Education Act (IDEA)) enacted in 1986
- Wisconsin enacted DHS Administrative Code 90 to ensure parity with federal guidance, and implemented a statewide Birth to 3 program in 1991 through delegation to counties
- County Boards must designate a county agency or contract with another public agency to administer Birth to 3 programs – NCHC designated agency

Analysis of Transfer

North Central Health Care

Initial transfer discussions began in late 2018 for two primary reasons:

- · Fit with updated mission and service line strategies
- · Campus renovations

Marathon County Special Education was identified as the most suitable partner

- · Public entity
- Expertise
- · Enhanced coordination into the schools
- · Clinical staff recruitment and retention

Feasibility of the transfer was examined and a transfer agreement was developed to document the intention and commitments of the parties

North Central Health Care

Approval Sequence

- Marathon County Special Education Board
- North Central Health Care Board
- · Retained County Authority Committee
- · Langlade County Board
 - · Langlade County Social Services Committee
- · Lincoln County Board
 - Lincoln County Administrative & Legislative Committee
- · Marathon County Board
 - · Marathon County Human Services Committee

Following approval, each County will need to develop a service contract directly with MCSE by December 19, 2019 – Quality (14 indicators), Costs and Funding

Analysis of Transfer

North Central Health Care

Analysis

- MCSE is willing to assume the delegation from the counties for Birth to 3 Services as currently delivered
- MCSE is agreeing to the full scope of responsibility of services and to maintain the fidelity of the program on a multi-county basis
 - Employees will transfer to new office location adjacent to MCSE and become employees of MCSE effective July 1, 2019
 - Transfer timeline of up to 18 months (December 31, 2020)

North Central Health Care

Conditions Required to Complete the Transfer

- Facilities
- · Approval and Appointment by Appointing Counties
- DHS Approval
- · Medicaid Status
- · Grant Transfer
- · Other Approvals

Analysis of Transfer

North Central Health Care

Services to be Performed by NCHC in the Transfer

- Start-up and Transfer Assistance
- Initial Training
- · Billing and Collection Services
- Budgeting Consultative Support
- · Transfer of Equipment
- · Limited Access to Medical Records
- · Transfer of Policies, Procedures and Records

North Central Health Care

Birth to 3 Personnel to be transferred

- 1.0 FTE Birth to Three Manager
- 1.0 FTE Administrative Assistant
- 5.0 FTE Case Manager
- 1.0 FTE Child Development Specialist
- 1.0 FTE Physical Therapist
 - 1.0 FTE Occupational Therapist
 - 3.0 FTE Speech & Language Pathologist

Transfer of Birth to 3 Program from NCHC to MCSE

North Central Health Care

Birth to 3 Program Revenues and Expenses

- · NCHC will remain fiscal agent until December 31, 2019
- NCHC will reimburse MCSE for all expenses until December 31, 2019
- MCSE will become fiscal agent and receive tax levy directly from each county effective January 1, 2020
- Effective January 1, 2020 until December 31, 2020, NCHC will bill for any costs incurred in support of the transfer
- Special financial considerations:
 - · Segregation of funds
 - · Maintenance of Effort
 - Langlade County \$79,482
 - Lincoln County \$133,923
 - Marathon County \$631,707

North Central Health Care

REVENUES	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	379,000	318,000	233,000
Grant	519,000	519,000	519,000
County Appropriation	835,112	835,112	714,404
Contract		23,000	12,000
TOTAL REVENUES	1,733,112	1,695,112	1,478,404
EXPENDITURES	2017 Budget	2018 Budget	2019 Budget
Salaries	928,489	922,623	864,642
Benefits	354,214	336,435	321,170
Other Direct Expenses	101,430	138,620	70,903
TOTAL EXPENDITURES	1,384,133	1,397,678	1,256,715
NET OPERATIONS	348.979	297,434	221,689