



**MARATHON COUNTY  
BOARD OF HEALTH AMENDED AGENDA**

Date & Time of Meeting: **Tuesday, June 20, 2023, at 8 a.m.**

Meeting Location: **Courthouse Assembly Room, B-105, 500 Forest Street, Wausau WI**

**Committees Members:** Michelle Van Krey-Chair, Tara Draeger-Vice Chair, Helen Luce, Katie Dively, Stacey Morache, Jennifer Aarrestad, Yee Leng Xiong, Ann Lemmer

**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. (Last updated: 12-20-05)*

Persons wishing to attend the meeting by phone may call into the **telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:**

**Phone #:** +1-408-418-9388

**Access Code:** 2486 058 5170

When you enter the telephone conference, **PLEASE PUT YOUR PHONE ON MUTE!**

- 1. Call Meeting to Order**
- 2. Pledge of Allegiance**
- 3. Public Comment (15 Minutes)** *(Any person who wishes to address the County Board, or one of its committees, during the "Public Comment" portion of meetings, must provide his or her name, address, and the topic he or she wishes to present to the Marathon County Clerk, or chair of the committee, no later than five minutes before the start of the meeting.)*
- 4. Approval of the April 11, 2023, Board of Health Meeting Minutes**
- 5. Policy Issues for Discussion and Possible Action**
  - A. None
- 6. Operational Functions Required by Statute, Ordinance, or Resolution**
  - A. None
- 7. Educational Presentations and Committee Discussion**
  - A. Annual Report Update
  - B. AOD Partnership Update
  - C. Criminal Justice Coordinating Council and Opioid Settlement Funds Update
  - D. 140 Review Update
  - E. Conclusion of COVID Emergency Update
- 8. Next Meeting Date & Time, Location, Announcements and Future Agenda Items:**
  - A. Committee members are asked to bring ideas for future discussion.
  - B. Next Board of Health Meeting: Tuesday, August 8 at 8 am
- 9. Adjournment**

*\*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 261-1500 or e-mail [countyclerk@co.marathon.wi.us](mailto:countyclerk@co.marathon.wi.us) one business day before the meeting*

**SIGNED:** \_\_\_\_\_  
**Presiding Officer or Designee**

EMAILED TO: Wausau Daily Herald, City Pages, and other Media Groups

NOTICE POSTED AT COURTHOUSE

EMAILED BY: \_\_\_\_\_

BY: \_\_\_\_\_

DATE & TIME: \_\_\_\_\_

DATE & TIME: \_\_\_\_\_



# BOARD OF HEALTH MEETING AGENDA WITH MINUTES

Date & Time of Meeting: **Tuesday, April 11, 2023, at 8:00 AM**

Meeting Location: **WebEx/ Courthouse Assembly Room (B105), 500 Forest Street, Wausau, WI 54403**

**Committee Members:**

Michelle Van Krey	X
Tara Draeger	X
Helen Luce	X
Jennifer Aarrestad	X
Yee Leng Xiong	Absent
Ann Lemmer	X
Stacey Morache	X
Katie Dively	X (Webex)

MCHD Staff Present: Eileen Eckardt, Rachel Klemp-North (WebEx), Becky Mroczenski (WebEx) Laura Scudiere, Amanda Ostrowski, Jon Schmunk, Mai Lee, Samantha Younn, Dale Grosskurth, Kate Florek

Others via WebEx:

Others In Person:

1. **Call to Order-** Chair Michelle Van Krey called the meeting to order at 8:00 AM.
2. **Pledge of the allegiance.**
3. **Public Comment Period – None.**
4. **Approval of the February 14th, 2023, Board of Health Meeting Minutes**  
Motion to approve the minutes of the February 14th, 2023. Board of Health meeting made by Stacey Morache. Second by Jennifer Aarrestad. Motion approved.
5. **Policy Discussion and Possible Action – None.**
6. **Operational Functions Required by Statute, Ordinance, or Resolution**
  - A. DHS 140 Review of Level III Health Department.  
Laura Scudiere explained the distinction of being a Level III Health Department and provided an overview of the required operational functions and the DHS 140 review.
7. **Educational Presentations and Committee Discussion**
  - A. ~~Overview of Impact of Heart Disease in Marathon County~~  
Chair Van Krey explained the removal of agenda item (7.A). The topic will be discussed and reevaluated at a later meeting.
  - B. Overview of the CHIP Plan Continued: Reviewing the Social Determinants of Health  
Community and Health Improvement Director, Amanda Ostrowski, provided an overview on the five domains of Social Determinants of Health: education access and quality, health care access and quality, neighborhoods and built environments, social and community context, and economic stability. Ostrowski also described the county’s health priorities, and specific indicators and strategies that impact the Social Determinants of Health.
  - C. Introduction of Kate Florek, Environmental Health and Safety Director  
Scudiere introduced the new Environmental Health and Safety Director, Kate Florek. Scudiere also shared that although Dale Grosskurth has left his role of being the Environmental Health and Safety Director, he will still be providing his experience and expertise through a new role focused on community environmental health. Florek provided further details of her professional career history and her past work in health, policy, and community initiatives.



## BOARD OF HEALTH MEETING AGENDA WITH MINUTES

### D. Takeaways from WALHDAB Operations Conference

Board member Ann Lemmer discussed her takeaways from attending WALHDAB Operations Conference. Lemmer expressed that the biggest takeaway was the collaboration and perspectives between health departments and board members. Lemmer and Van Krey encouraged other board members to sign up and attend these conferences in the future.

### E. Juul Grant Settlement Funds

Scudiere and Ostrowski explained that the Nicotine Prevention Alliance of Central Wisconsin has been granted funding from the Juul Settlement funds. The alliance services Marathon, Wood, and Portage counties. Marathon County serves as the fiscal agent for the alliance and would be receiving and distributing the funds. Scudiere explained in further detail of how the funds will help implement strategies preventing and addressing the harm caused by Electronic Nicotine Delivery Systems.

### 8. **Next Meeting Date & Time, Location, Announcements and Future Agenda Items:**

A. Committee members are asked to bring ideas for future discussion.

B. Next Board of Health Meeting: Tuesday, June 20 at 8 am

### 9. **Adjournment**

Motion to adjourn made by Helen Luce second by Jennifer Aarrestad. Motion approved. Meeting was adjourned at 8:33 AM.

Minutes prepared by Samantha Younn, Marathon County Health Department Administrative Specialist

# 2022 Annual Report

Published May 2023

Fulfills WI Stats. 251.06 (3)(h)



*Promoting Health, Preventing Disease, Protecting the Environment.*







# A Message to the Community

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Dear Residents of Marathon County,

It is my pleasure to introduce this year's annual report on the activities of the Marathon County Health Department. As the Health Officer, it is my honor to share with you the progress and initiatives that we have undertaken in the past year to ensure the health and well-being of our community.

Over the last year, our department has been actively working to address three priority concerns as identified in our Community Health Improvement Plan: health equity, mental health, and substance misuse.

At the Marathon County Health Department, we strive to ensure that every individual has access to the same level of health and well-being, regardless of their race, ethnicity, or socio-economic status. We have been working to address disparities in health outcomes by implementing programs that focus on improving access to care and promoting health equity for all.

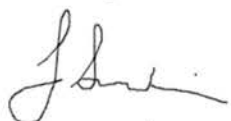
Mental health is an important issue that we have been addressing, as we recognize the impact that it has on individuals, families, and our community as a whole. We have been working to increase access to mental health services, as well as raise awareness about the importance of mental health and the resources available to those who need support.

Finally, substance use has become a significant public health concern, and we have been working to address this issue by implementing programs and initiatives that focus on prevention, intervention, and treatment. Our staff is working to reduce the negative impact of substance use on individuals, families, and our community, and to help those who need support to access the resources they need to overcome this challenge.

In this annual report, you will find detailed information on the various programs and initiatives that we provide, as well as a comprehensive overview of the successes and challenges that we have faced in these areas.

Thank you for your continued support. I am proud to share with you the progress that we have made and I am confident that, together, we can continue to build a healthier and more vibrant community.

Sincerely,



Laura Scudiere, MPH, CHES  
Marathon County Health Officer







The background of the page is a scenic photograph of a lake. In the foreground, two red Adirondack chairs are positioned on a concrete deck. A tree trunk is visible on the right side, and a concrete structure, possibly a well or vent, is in the middle ground. The water of the lake is dark blue, and the sky is clear and blue.

## Essential Services of Public Health

1. Assess and monitor population health status, factors that influence health, and community needs and assets.
2. Investigate, diagnose, and address health problems and hazards affecting the population.
3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.
4. Strengthen, support, and mobilize communities and partnerships to improve health.
5. Create, champion, and implement policies, plans, and laws that impact health.
6. Utilize legal and regulatory actions designed to improve and protect the public's health.
7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy.
8. Build and support a diverse and skilled public health workforce.
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.
10. Build and maintain a strong organizational infrastructure for public health.



# OUR ORGANIZATION

## Our Mission

To be the healthiest and safest county in which to live, learn, work, and play.

## Our Vision

To advance a healthy Marathon County community by preventing disease, promoting health, and protecting the public from environmental hazards.

## Our Core Values



**Service:** responsibly delivering on our commitments to all of our internal and external customers.



**Diversity:** actively welcoming and valuing people with different perspectives and experiences.



**Integrity:** honesty, openness, and demonstrating mutual respect and trust in others.



**Shared Purpose:** functioning as a team to attain our organizational goals and working collaboratively with our policy makers, department, and employees.



**Quality:** providing public services that are reflective of "best practices" in the field.



**Stewardship of Resources:** conserving the human, natural, cultural, and financial resources for current and future generations.

## Health Department Leadership

**Laura Scudiere, MPH, CHES** - Health Officer

**Amanda Ostrowski** - Program Director,  
Community Health Improvement

**Eileen Eckardt, RN, BSN** - Program Director,  
Family Health and Communicable Disease Control

**Dale Grosskurth, RS, MPA** - Program Director,  
Environmental Health and Safety & Water Testing

**Kim Wieloch** - Director of Operations,  
Administrative and Fiscal Support  
(Jan-Nov)

## Board of Health

**Ann Lemmer**

**Helen Luce, MD**

**Jennifer Aarrestad**

**Kate Dively**

**Michelle Van Krey**

**Stacey Morache**

**Tara Draeger**

**Yee Leng Xiong**

**Ex-Officio Members:**

**Kevin O'Connell, MD** -Medical Advisor





## Health Department Program Scope

### Community Health Improvement

- Community Health Assessment (CHA)
- Community Health Improvement Planning (CHIP)
- Mental Health - Changemakers for Behavioral Health
- Substance Abuse Prevention
- Tobacco Prevention and Control

### Environmental Health

- Licensing – restaurants, stores, hotels, campgrounds, tattoo & body piercing shops, pools, and mobile homes for safety
- Water Testing – public swimming pools, municipal water supplies, and private wells
- Investigating animal bites and preventing rabies
- Human Health Hazards – mold, pests, housing issues, and radon
- Mercury Reduction program
- Northcentral Radon Information Center – provides testing and information

### Family Health / Communicable Disease

- Communicable Disease Surveillance, Investigation, and Control
- Immunization Surveillance and Clinics
- Tuberculosis Case Management and Therapy
- Sexually Transmitted Disease Clinic
- Public Health Preparedness
- Start Right
- Child Health
- Northern Regional Center for Children and Youth with Special Health Care Needs
- Childhood Lead Poisoning
- Injury Prevention
- COVID-19 Disease Investigation and Contact Tracing
- Isolation letters with educational information

### Fiscal and Administrative Support

- Backbone functions of all internal operations
- Fiscal management of grants, fees, and contracts
- Customer service

## MCHD STAFF *by the numbers*

 Health Officer

 Directors

 Managers

 Public Health Nurses

 Sanitarians

 Health Educators

 Administrative Support Staff

 Professionals/Paraprofessionals

*+ contract staff for COVID-19 response*







# DASHBOARD

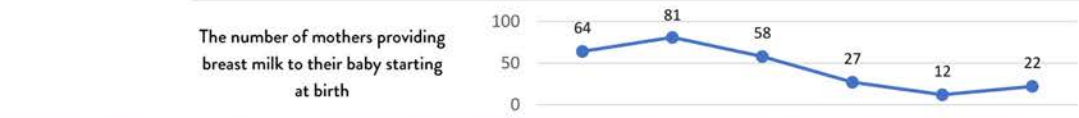
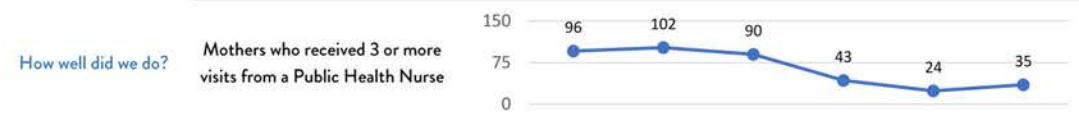
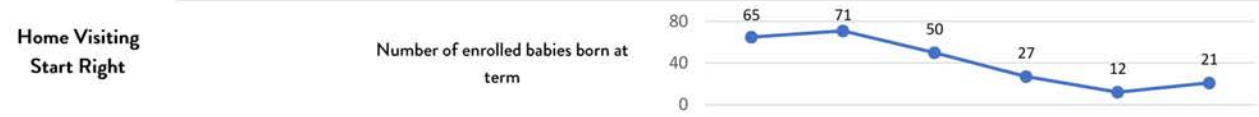
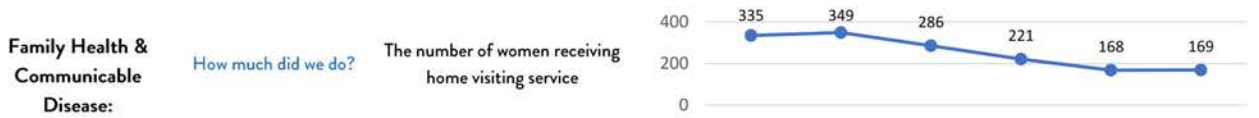
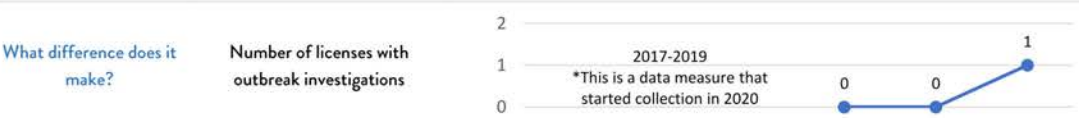
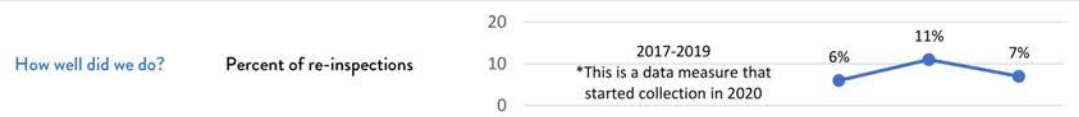
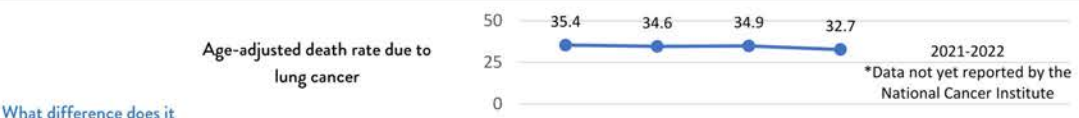
Program Name/Area	Measure Type	Performance Measure	2017	2018	2019	2020	2021	2022	
Community Health Improvement: Tobacco/Alcohol	How much did we do?	Number of tobacco compliance checks completed	50	2017-2021 *This is a new data measure that is collected as of 2022					47
	How well did we do?	Percent of retailers not complying with minimum age laws	10	2017-2021 *This is a new data measure that is collected as of 2022					9%
	What difference does it make?	Percent of teens who smoked cigarettes in the past 30 days (High School) (collected biennially)	9.9%	9.9%	7%	7%	4%	4%	4%
Community Health Improvement: Substance Use	How much did we do?	Number of prevention recommendations issued by Fatal Overdose Review Team	50	2017-2021 *This is a new data measure that is collected as of 2022					19
		Number of Community-sponsored drop box locations	20	2017-2019 *This is a data measure that started collection in 2020			11	14	17
	How well did we do?	Number of prevention recommendations implemented by community partners	15	2017-2021 *This is a new data measure that is collected as of 2022					12
		Pounds of medications collected	3,000	2017-2019 *This is a data measure that started collection in 2020			2,256	1,327	1,368
	What difference does it make?	Age-adjusted death rate due to all drug overdose	20	12.8	9.5	12.6	11.2	2021-2022 *Data not yet reported by the Wisconsin Department of Health Services	
		Percent of residents who have expired prescription medications at home (collected biennially)	50	29%	29%	29%	34%	34%	34%
Community Health Improvement: Mental Health	How much did we do?	Number of prevention recommendations issued by Suicide Death Review Team	10	2017-2021 *This is a new data measure that is collected as of 2022					8
		Number of districts offering mental health therapy	10	2017-2019 *This is a data measure that started collection in 2020			8	7	7
	How well did we do?	Number of prevention recommendations implemented	4	2017-2021 *This is a new data measure that is collected as of 2022					2
		Percent of districts with comprehensive school based mental health	100	2017-2021 *This is a new data measure that is collected as of 2022					100

# DASHBOARD *Continued*

Program Name/Area	Measure Type	Performance Measure	2017	2018	2019	2020	2021	2022	
	What difference does it make?	Number of suicide deaths	20	25	25	15	21	*2022 data not yet reported by the Wisconsin Department of Health Services	
		Percent of teens who reported feeling depressed (collected biennially)	25.2%		26%		29%		
Community Health Improvement:	How much did we do?	Number of Households Receiving Emergency Housing Assistance Funds (EHAF)	246	249	261	178	240	2022 *Data not yet reported by the North Central Community Action Program	
Social Determinants of Health	What difference does it make?	Percent of renters spending 30% or more of household income on rent	40.8	37.5	36.9	38.5	41.8	2022 *Data not yet reported by the American Community Survey	
	How well did we do?	Number of Households with Severe Housing Problems (at least one of the four: overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities)	12.1	11.5	10.7			2020-2022 *Data not yet reported by the County Health Rankings	
Community Health Improvement:	How much did we do?	Number of childcare providers	117	109	105	98	93	83	
Childcare	How well did we do?	Percent of regulated childcare providers in Marathon County that have received a YoungStar rating	74.4	72.5	71.4		64.3	66.7	
	What difference does it make?	Number of childcare slots with regulated childcare providers in Marathon County					3,349	3,336	3,414
Environmental Health:	How much did we do?	Number of samples tested	4,624	4,030	3,513	3,013	3,151	3,760	
Water Testing	How well did we do?	Number of samples with unsafe bacteria levels	526	420	339	230	237	395	
	What difference does it make?	Number of samples with safe Coliform bacteria levels	3,329	3,224	2,916	2,621	2,710	3,031	
Environmental Health:		Number of radon test kits sold					318	467	294
Human Health Hazards	How much did we do?	Number of childhood lead tests	1,066	1,169	1,261	1,159	1,341	1,392	



Program Name/Area	Measure Type	Performance Measure	2017	2018	2019	2020	2021	2022
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# DASHBOARD *Continued*

Program Name/Area	Measure Type	Performance Measure	2017	2018	2019	2020	2021	2022
	What Difference Does It Make?	Mothers enrolled in NFP, age 18+, are employed at baby's 24 month birthday						
			Nurse Family Partnership started in 2023. *This is a new data measure that is being collected and will be available in 2025's Annual Report					
Family Health & Communicable Disease:	How much did we do?	Number of childhood vaccinations completed by the Marathon County Health Department				210	158	160
			2017-2019 *This is a data measure that started collection in 2020					
Immunization	How well did we do?	Percent of children who are 24 months old and received vaccines* according to the childhood vaccine schedule. <i>*DTaP, polio, MMR, Hib, Hep B, Varicella, and Pneumococcal.</i>	76.9%	78.4%	78.3%	77.6%	76.1%	77%
	What difference does it make?	Number of confirmed or probable reports received for children 5 years and younger for the following diseases: diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, Hib, hep B, varicella, and invasive streptococcus pneumoniae.				1	2	1
			2017-2019 *This is a data measure that started collection in 2020					
Family Health & Communicable Disease:	How much did we do?	The number of individuals screened for TB through the Marathon County Health Department <i>(This number includes cases reported as suspect active TB disease and individuals screened for Latent TB infection)</i>				54	23	59
			2017-2019 *This is a data measure that started collection in 2020					
Tuberculosis	How well did we do?	Number of individuals diagnosed with infectious TB in Marathon County	2	1	1	1	3	3
	What difference does it make?	Number of individuals who completed infectious TB treatment <i>(Treatment is at minimum 6 months, so diagnosis and completion can cross years)</i>				2	0	3
			2017-2019 *This is a data measure that started collection in 2020					
Family Health & Communicable Disease:	How much did we do?	Number of communicable disease reports received through WEDSS <i>(All reports received-upon receipt of a report resolution status is determined as not a case, suspect, probable, confirmed).</i>				60,505	52,965	49,789
			2017-2019 *This is a data measure that started collection in 2020					
Disease Reports	How well did we do?	Number of chlamydia cases	365	342	365	387	349	360
	Case Investigation started within 72 hours					627	543	515
			2017-2019 *This is a data measure that started collection in 2020					
	What difference does it make?	Number of successful incident resolutions <i>(Excludes COVID-19 and HIV cases)</i>				1,925	2,222	1,659
			2017-2019 *This is a data measure that started collection in 2020					
Family Health & Communicable Disease:	How much did we do?	Number of inmates seen <i>(STI clinic services only)</i>				56	*No jail services provided in 2021	81
			2017-2019 *This is a data measure that started collection in 2020					
Jail Services	How well did we do?	Number of Hepatitis C cases diagnosed in inmates				2	*No jail services provided in 2021	4
			2017-2019 *This is a data measure that started collection in 2020					



Program Name/Area	Measure Type	Performance Measure	2017	2018	2019	2020	2021	2022
	What difference does it make?	Number of Hepatitis C cases	64	25	26	26	27	34
Children & Youth with Special Health Care Needs:	How much did we do?	Number of families who contacted the Regional Center	2017-2018		18	12	19	22
			*This is a data measure that started collection in 2019					
Medical Home	How well did we do?	Percent of families who are receiving services	2017-2019			44%	54%	68%
			*This is a data measure that started collection in 2020					
	What difference does it make?	Percent of Children with disabilities/special healthcare needs that have a medical home (State level data)	2017-2019			42%	47%	2022
			*This is a data measure that started collection in 2020					*Data not yet reported by National Children's Health









# COMMUNITY HEALTH IMPROVEMENT

## Overview

In collaboration with community partners, the Community Health Improvement Team is dedicated to changing existing systems and policies in support of creating healthier communities. In alignment with Public Health 3.0, Health Educators “participate in and support community-based coalitions that examine health data, set goals, and develop plans to improve health.”<sup>1</sup>

## Community Health Improvement Plan

The 2022-2026 Marathon County Community Health Improvement Plan (CHIP) was created using the Results-Based Accountability Framework, with local data from [www.marathoncountypulse.org](http://www.marathoncountypulse.org), and adopted by the Healthy Marathon County Alliance. Focusing on advancing the health priorities of health equity, mental health and substance misuse, the CHIP will guide the use of community resources and collaboration to impact the health outcomes of our Marathon County residents.

To view the full 2022-2026 Marathon County Health Improvement plan, please visit: <https://www.co.marathon.wi.us/Departments/HealthDepartment/DataPublications/CommunityHealthImprovementPlan.aspx>.



## Healthy Marathon County Alliance

It is required that the planning and implementation process for the CHIP is community-driven, involving community stakeholders and partners. The Healthy Marathon County Alliance is a community catalyst to improve the health of Marathon County residents through individual, organizational, and community involvement. The Healthy Marathon County Alliance works collaboratively with community partners, the Marathon County Health Department, and the Board of Health to build systems, environments, and a culture that supports health. In working with the Healthy Marathon County Alliance, the Community Health Improvement Team is responsible for engaging stakeholders to address community health priorities, assist in conducting the community health assessment, and leveraging resources needed to sustain community improvement efforts that maximize community assets. Visit [www.healthymarathoncounty.org](http://www.healthymarathoncounty.org) to learn more.

## 2022 Highlights of Community Health Improvement Team's Program Work:

- Mental health therapy services continued in Marathon County school districts;
- Marathon County Suicide Death Review Team began, with the purpose of implementing community-based strategies for suicide prevention;
- Marathon County Alcohol and Other Drug Partnership Council created and released their strategic plan: <http://aodpartnership.org/about/strategic-plan/>
- Marathon County Fatal Overdose Review Team implemented national standards of practice, as well as worked with community partners to increase Narcan<sup>®</sup> availability in the Wausau Metro area;
- Coordinated Drug Take Back events with local law enforcement organizations;
- Conducted tobacco compliance checks for the first time since 2019.

<sup>1</sup>Public Health Leadership Forum, The High Achieving Health Department in 2020 as the Community Health Strategist, 2015, <http://www.resolv.org/site-healthleadershipforum/hd2020/>



# BY THE NUMBERS

## MENTAL HEALTH



**29%**

High school students felt so sad or hopeless every day for two or more weeks in a row that they stopped doing some usual activities.



**27%**

Middle school students felt so sad or hopeless every day for two or more weeks in a row that they stopped doing some usual activities.



**4.3**

Average number of days that adults reported their mental health was not good in the past 30 days.



## SUBSTANCE MISUSE



**4%**

Teens who reported smoking cigarettes in the past 30 days.



**17.2%**

Adults who currently smoke cigarettes.



**8%**

High school students who used marijuana in the past 30 days.



**20%**

High school students who drank alcohol in the past 30 days.



**27.3%**

Adults who reported binge drinking in the past 30 days.



SOCIAL DETERMINANTS OF HEALTH



**6%**

Teens and young adults ages 16-19 who are not working nor in school.



**85%**

Marathon County households who have broadband internet connection.



**17.3%**

Marathon County commuters drive alone to work for more than 30 minutes.



**\$218.72**

Average weekly rate for group child care in Marathon County.



**11.5%**

Marathon County households who have at least one of the following housing problems: overcrowding, high housing costs, lack of kitchen & lack of plumbing facilities.



# 2022-2026 Marathon County Community Health Improvement Plan

## RESULT

Marathon county residents of all ages and abilities are free from the physical, emotional, and social impacts of substance misuse.

### Indicator

**Teens who smoked cigarettes in the past 30-days (High School):** The percentage of teens who smoked cigarettes during the past 30-days before the survey.

### Indicator

**Adults who Smoke:** The percentage of adults who currently smoke cigarettes.

### Indicator

**Teens who used marijuana in the past 30-days (High School):** Percentage of high school students that used marijuana in the past 30 days before the survey.

### Indicator

**Teens who drank alcohol in the past 30-days (High School):** Percentage of high school students who drank alcohol during the past 30 days before the survey.

### Indicator

**Adults who binge drink:** The percentage of adults who reported binge drinking at least once during the 30 days prior to the survey. Male binge drinking is defined as five or more drinks on one occasion, and female binge drinking is four or more drinks on one occasion.

### Strategies

- Conduct tobacco age-compliance checks for tobacco service points and retailers in Marathon County.
- Propose alternatives to suspension and citation programs within Marathon County high schools.
- Recommend use of lifeskills curriculum within high schools to strengthen coping strategies.

### Strategies

- Promote Wisconsin and Marathon County smoking cessation programs.
- Incorporate tobacco cessation resources into workplaces.
- Engage community stakeholders in the Nicotine Prevention Alliance.

### Strategies

- Recommend best practice marijuana policies, including enforcement, across Marathon County school districts.
- Recommend use of life skills curriculum within high schools to strengthen coping strategies.
- Continue implementation of the marijuana (THC) Diversion Program.
- Explore Screening, Brief Intervention, and Referral to Treatment (SBIRT) in Marathon County Schools with grades 8-12.

### Strategies

- Conduct Minimum Legal Drinking Age compliance checks for alcohol service points and retailers in Marathon County.
- Continue implementation of Choices Track 1 Group in Marathon County high schools.
- Explore Screening, Brief Intervention, and Referral to Treatment (SBIRT) in Marathon County Schools with grades 8-12.

### Strategies

- Implement trauma-informed, AODA specific Dialectic Behavioral Therapy (DBT) throughout Marathon County.
- Recommend use of life skills curriculum within high schools to strengthen coping strategies.
- Explore the effectiveness of referring to treatment using Continuum of Care platforms, which manage patient care through the preventative, curative, maintenance, and rehabilitative stages.



## RESULT

All Marathon County residents meet their highest potential of mental health.

### Indicator

**Teens Who Reported Feeling Depressed (High School)**: Percentage of high school students who felt so sad or hopeless every day for two or more weeks in a row that they stopped doing some usual activities during the 12 months before the survey.

### Strategies

- Advance implementation of comprehensive school-based mental health.
- Educate importance of comprehensive school-based mental health services.
- Support school-based mental health counseling.
- Explore feasibility of implementing a county-wide referral system for mental health services.

### Indicator

**Teens Who Reported Feeling Depressed (Middle School)**: Percentage of middle school students who ever felt so sad or hopeless almost every day for two or more weeks in a row that they stopped doing some usual activities.

### Strategies

- Advance implementation of comprehensive school-based mental health.
- Educate importance of comprehensive school-based mental health services.
- Support school-based mental health counseling.
- Explore feasibility of implementing a county-wide referral system for mental health services.

### Indicator

**Poor Mental Health - Average Number of Days**: The average number of days that adults reported their mental health was not good in the past 30 days.

### Strategies

- Promote community education and trainings on mental health, mental illness, and trauma-informed care.
- Support community health worker networks within Marathon County.
- Explore feasibility of implementing a county-wide referral system for mental health services.

## RESULT

All residents in Marathon County have a fair and just opportunity to be as healthy as possible.

### Indicator

**Renters spending 30% or more of household income on rent**: The percentage of renters who are spending 30% or more of their household income on rent. Rental costs are comprised of rent and utilities (electricity, gas, other fuels, water, and sewer).

### Strategies

- Educate community stakeholders about the connection between safe and affordable housing and positive health outcomes.
- Advance local housing initiatives, including those of the Marathon County Housing Task Force, an initiative of the United Way of Marathon County.

Indicator data can be viewed on the [Marathon County Pulse Data Dashboard](http://www.marathoncountypulse.org) at:  
[www.marathoncountypulse.org](http://www.marathoncountypulse.org)



# ENVIRONMENTAL HEALTH & LABORATORY

## Human Health Hazards

A Human Health Hazard, defined in State Statute 254.01, is “a substance, activity, or condition that is known to have the potential to cause acute or chronic illness, to endanger life, to generate or spread infectious diseases, or otherwise injuriously to affect the health of the public” and is a state requirement for all local health departments to address. Examples of hazards include, though are not limited to, radon gas, unsafe housing, environmental contamination, pests, mold, lead poisoning, blastomycosis, blue-green algae, and concerns about drinking water.

The Marathon County Health Department helps to assess the health risk from a human health hazard exposure and provides guidance to resolve the condition. Several criteria are considered to determine the risk severity of a health hazard. The criteria include the duration of exposure, the quantity and means of exposure, the type and number of individuals exposed, and the known or expected health risk. Frequently, information is provided for individuals to resolve a condition. If risks are determined, voluntary compliance is sought by providing information and options to correct the condition. If voluntary compliance cannot be achieved or when required under regulations, a written order requiring actions is used to address the condition.

## Licensing

The Marathon County Health Department, under contracts with the Department of Agriculture, Trade, and Consumer Protection and Department of Safety and Professional Services, licenses and conducts health and safety compliance inspections for a variety of businesses. These businesses include restaurants, grocery and convenience stores, lodging, campgrounds, recreational/education camps, swimming pools, mobile home parks, and body art facilities.



Additional activities include complaint follow up, illness or safety investigations, consultations with business operators with respect to their business, and answering questions from Marathon County citizens.

## Lab

The Marathon County Health Department Water Testing Laboratory provides convenient, reliable, and reasonably-priced water testing services to the citizens of Marathon County and surrounding counties. The Lab analyzes public and private drinking water samples in addition to recreational waters, such as public swimming pools and beaches, testing for several microbiological and chemical parameters. In addition, Lab personnel interpret results for well owners and provide education concerning water safety issues.

## Transient Non-Community well program:

Under a contract with the Department of Natural Resources, public wells serving 25 or more different individuals per day for 60 or more days per year have annual samples and follow up sampling performed, the well inspected to ensure proper maintenance, and enforcement when bacteria or nitrate levels exceed state standards. Public wells covered under the contract include licensed facilities that are inspected, county parks, and churches.

## Rabies

Rabies is nearly always fatal, so preventing rabies in humans involves domesticated and wild animal bite follow up and recommendations for rabies shots if an animal cannot be observed or tested. Follow up starts with animal bite reports made by hospitals, clinics, and law enforcement agencies. Following State law, the Marathon County Health Department investigates the bite reports, requires animal quarantines and veterinary observations of dogs and cats for signs of rabies, and arranges for laboratory testing when that is necessary, typically for a wild animal.



# BY THE NUMBERS

## LICENSING

---



**1,149**

Licensing inspections conducted with restaurants, stores, lodging, pools, mobile home parks, campgrounds, and tattoo shops.



**1,012**

Licenses issued for restaurants, food stands, lodging, campgrounds, pools, retail food stores, mobile home parks, and tattoo facilities.

## WATER TESTING

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**3,760**

Drinking water samples tested.



**1,392**

Childhood Lead tests

## RABIES

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**350**

Animal bites reported.



**29**

Persons were recommended to receive shots to prevent the development of rabies from their animal bite exposure.

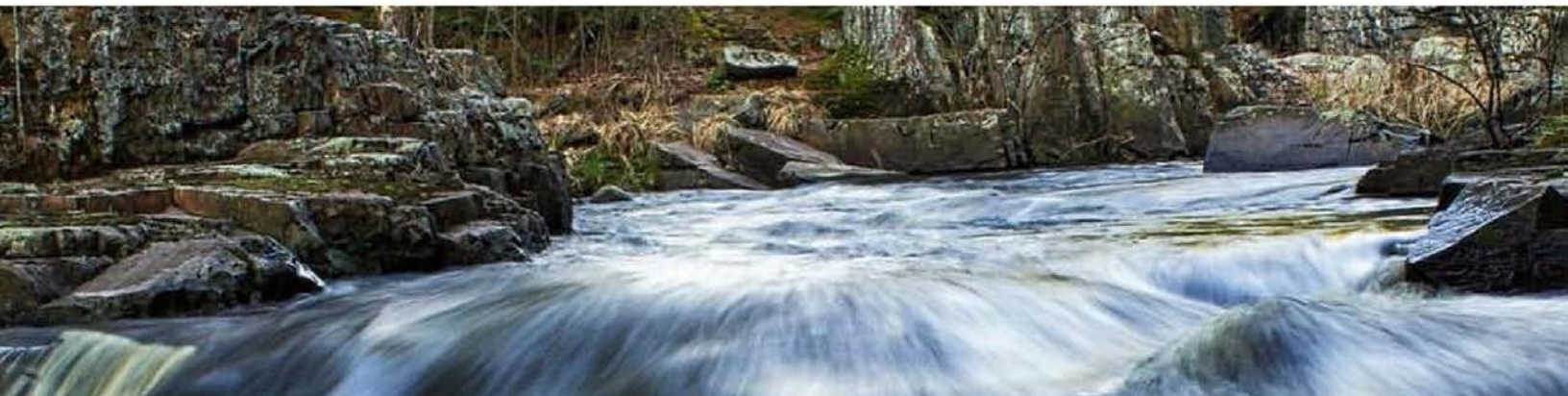
## NORTHCENTRAL RADON INFORMATION CENTER

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**294**

Radon kits provided to homeowners.







# FAMILY HEALTH & COMMUNICABLE DISEASE

## Overview

This year, many programs that were put on hold during the pandemic were resumed. Policies and procedures were reviewed, nurses were refreshed, and services were fully deployed by the end of the year.

## Family Health

Start Right home visiting provides support, education, and referrals to low income women to promote healthy mothers and babies. The program operates on referrals of pregnant women from medical providers and community partners. The pandemic brought a reduction in visits to medical providers and community resources, thus reducing the referrals to home visiting. Start Right consists of two main components: pregnancy services provided by public health nurses and long term home visiting provided by Children's Wisconsin.

In 2022, Start Right served 169 families (prenatal and long term home visiting). There were 34 babies born to mothers in the program in 2022 and 62% were born full term (39-40 weeks). Of those babies, 65% received breastmilk beginning at birth. Demographically, all of the women served lived at or below the poverty line. Of the 35 women served prenatally (fully engaging in the program), 6% resided in the jail, 12% were unhoused or lacked stable housing, 29% were currently involved with social services, 49% had symptoms of perinatal depression, and 35% reported interpersonal violence. The stressors brought on by the pandemic amplified the stresses that these women already faced. Many mothers shared that getting back to baseline in health, finances, and schooling has been a struggle, and was compounded by a reduction of service availability from some community resources.

Start Right prenatal services team was able to establish a strong relationship with a valued community partner, The Babies' Place, in 2022. The Babies' Place is a diaper bank and is part of The Neighbors' Place food pantry. Nurses are able to refer women to The Neighbors Place

and The Babies' Place for food, diapers and other resources; nurses are also able to see women at The Babies' Place as another location of service. The Babies' Place provides information on Start Right home visiting to pregnant women, referring women who would benefit from the program. As the barriers to health and stability continue to affect women and babies in the community, close collaboration and coordination of services, like the one with The Babies' Place, become more important than ever.

(Please note that the Marathon County Health Department moved from using the Start Right model in 2023 to Nurse Family Partnership. Start Right continues to operate at reduced levels out of Children's Wisconsin in Marathon County. This change in programming will be highlighted in the 2023 Annual Report.)

## Communicable Disease

Communicable disease prevention through vaccination continues to be an important cornerstone of public health. In 2022, 541 routine vaccinations were given to children and adults.





# FAMILY HEALTH & COMMUNICABLE DISEASE CONTINUED

Among the other stressors of the pandemic period, it has been noted statewide and nationally that children had fallen behind schedule of the routine vaccinations. The rate of children, 24 months of age, who are up-to-date with immunizations in Marathon County has remained steady and was 77% in 2022; an increase of 1 percentage point from the year prior. During the pandemic period, routine vaccination clinics continued to be held at the Marathon County Health Department when staff capacity allowed. Routinely scheduled Vaccination clinics resumed in 2022, with 160 vaccinations given to children and 381 given to adults both at the Marathon County Health Department and at the Marathon County Jail.

Latent and infectious Tuberculosis (TB) testing and treatment by the Marathon County Health Department was maintained throughout the pandemic in order to continue to protect the community from this disease. The Marathon County Health Department staff screened 59 individuals for latent or infectious TB in 2022. A total of 22 individuals received 610 visits from public health nurses providing necessary treatment for both latent and infectious TB.

A collaborative relationship was formed with Ethiopian Community Development Council (ECDC) in 2022. Public health nurses performed some of the required testing for infectious diseases and provided health education and referrals to community resources for refugee families. ECDC referred women to the health department for home visiting services if they were pregnant.

Marathon County Health Department received reports of 45 different disease groups or other conditions. Each disease or condition reported to the health department requires a specific public health response. In 2022, the health department responded to 20,235 probable and confirmed disease reports, 95% of those being COVID-19. See department indicators for more information.



## Children & Youth with Special Health Care Needs

The Northern Regional Center for Children and Youth with Special Health Care Needs (CYSHCN) guides families with children to access the supports they need. Staff work with professionals and community organizations to address barriers and provide training and technical assistance related to care coordination and youth health transition. Marathon County makes up almost 30% of the total population of the region served and many activities are locally focused. In 2022, to better serve families, the Regional Center engaged with two Parent Advisors from rural Marathon County to learn more about how to better tailor services for different communities. CYSHCN staff continue to support activities of the Marathon County Communities on Transition and North Central Network to Serve Infants.



# BY THE NUMBERS NON-COVID-19 SERVICES

NORTHERN REGIONAL CENTER FOR CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS

---



**59**

Consultations with professionals.



**43**

People participated in a training.

## START RIGHT

---



**30**

Pregnant women enrolled in WIC.



**70**

Families received education on safe sleep practices for their newborn.



**194**

Pregnant women referred to MCHD for services.



**35**

Women received three or more visits by a public health nurse.



**4**

Pregnant woman reported experiencing homelessness.







# BY THE NUMBERS

COVID-19



**182**

Outbreaks related to COVID-19.



**19,176**

Positive COVID-19 cases reported.



**1,933**

Online case interviews completed.  
\*Started May 2022



**1,635**

Home test kits distributed to different locations in Marathon County.



**114**

COVID-19 related deaths.



**1,722**

Calls from community members with questions about COVID-19.



**22**

COVID-19 related media interviews.



**640**

People ever hospitalized for COVID-19.



**103**

COVID-19 related social media posts.



# FAMILY HEALTH & COMMUNICABLE DISEASE INDICATORS

<i>Start Right Prenatal Services</i>	<i>*Data not available</i>	2020	2021	2022
Number of women who had 3 or more visits with a public health nurse		43	24	35
Percent of women who reported smoking during their pregnancy		26%	26%	26%
Percent of women who reported smoking who stopped or decreased smoking		90%	100%	78%
Percent of homes that are smoke-free		*	57%	79%
Percent of women who reported drinking at all during their pregnancy		28%	30%	12%
Percent of women who reported drinking at all during their pregnancy who stopped drinking completely		100%	100%	100%
Percent of women who screened positive for domestic violence		8%	8%	35%
Percent of women who were homeless at any time during services		8%	4%	12%
Was involved with Social Services at any time during services		10%	9%	29%
Resided in jail at any time during services		3%	0%	6%
Percent of women who initiated breastfeeding		69%	52%	32%
Women who have a reproductive life plan		85%	78%	88%
<i>Stepping Stones Home Visiting</i>				
Percent of infants who sleep in a safe sleep environment		69%	70%	77%
Percent of children on schedule for their well child exams		97%	89%	96%
Percent of children who are up-to-date on immunizations at 24 months of age		90%	95%	100%
Percent of parents identified with AODA, domestic violence or mental health concerns who received supportive services		57%	69%	63%
<i>Children and Youth with Special Health Care Needs</i>				
Number of families served		47	68	22
Number of consultations with professionals		88	138	59
Number of trainings offered		9	10	11
Number of attendees at trainings		45	71	43
<i>Reportable Diseases and Conditions</i>				
		2020	2021	2022
Babesiosis		3	9	8
Blastomycosis		9	5	5
Campylobacteriosis		23	35	33
Carbapenem-Resistant Enterobacterales (CP-CRE)		0	1	0
Carbon Monoxide Poisoning		11	9	11
Chlamydia Trachomatis Infection		387	349	360
Coronavirus (COVID-19)		13,304	15,883	19,176
Cryptosporidiosis		24	16	12
Cyclosporiasis		2	0	0
Ehrlichiosis/Anaplasmosis		25	56	40
Giardiasis		26	26	18
Gonorrhea		141	90	62
Haemophilus Influenzae/Invasive Disease		1	5	2
Hepatitis A		0	0	1
Hepatitis B		7	8	8
Hepatitis C		26	27	34
Histoplasmosis		0	3	1
HIV		2	2	1
Influenza Associated Hospitalizations		86	6	66
Jamestown Canyon Virus		0	1	1
Legionellosis		1	1	1



Listeriosis	0	2	0
Lyme Disease	28	46	248**
Meningitis, Aseptic (Viral)	0	0	1
Meningitis, Other Bacterial	0	2	0
Meningococcal Disease	1	1	0
Mumps	1	0	0
Mycobacterial Disease (Nontuberculous)	7	12	14
Others (Measles, Rubella, Tetanus, Diphtheria, Polio)	0	0	0
Pathogenic E. Coli	20	15	17
Pertussis (Whooping Cough)	11	5	0
Q Fever	0	1	0
<b>Reportable Diseases and Conditions Continued</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
Salmonellosis	22	29	27
Shigellosis	2	0	3
Streptococcal Infection, Groups A, B, and Other Invasive	19	22	17
Streptococcus Pneumoniae/Invasive Disease	10	9	8
Syphilis	2	5	10
Toxoplasmosis	0	3	0
Transmissible Spongiform Encephalopathy (TSE)	1	0	1
Tuberculosis	1	3	3
Tuberculosis, Latent Infection (LTBI)	10	28	39
Typhoid Fever	0	0	1
Varicella (Chickenpox)	1	3	3
Vibriosis, Non Cholera	0	0	1
<i>Case counts are from state records and can vary from year to year based on review of records and additional case information. Case count numbers are for all reports that are determined to be confirmed or probable.</i>			
<i>**Lyme disease number for 2022 was affected by a new surveillance case definition that went into effect in January 2022.</i>			
<b>Immunization Clinic Services</b>			
Number of Children & Adults who recieved a vaccine	196	802	321
Number of Childhood & Adult Vaccines given	356	1,264	541
<b>STD Clinic Services</b> *Did not operate STD clinics in 2021			
Number screened for STD's	54	*	81
Number screened for HIV	49	*	80
Number of vaccines given at STD clinics (part of vaccine total above)	31	*	133
Total Client visits	55	*	160

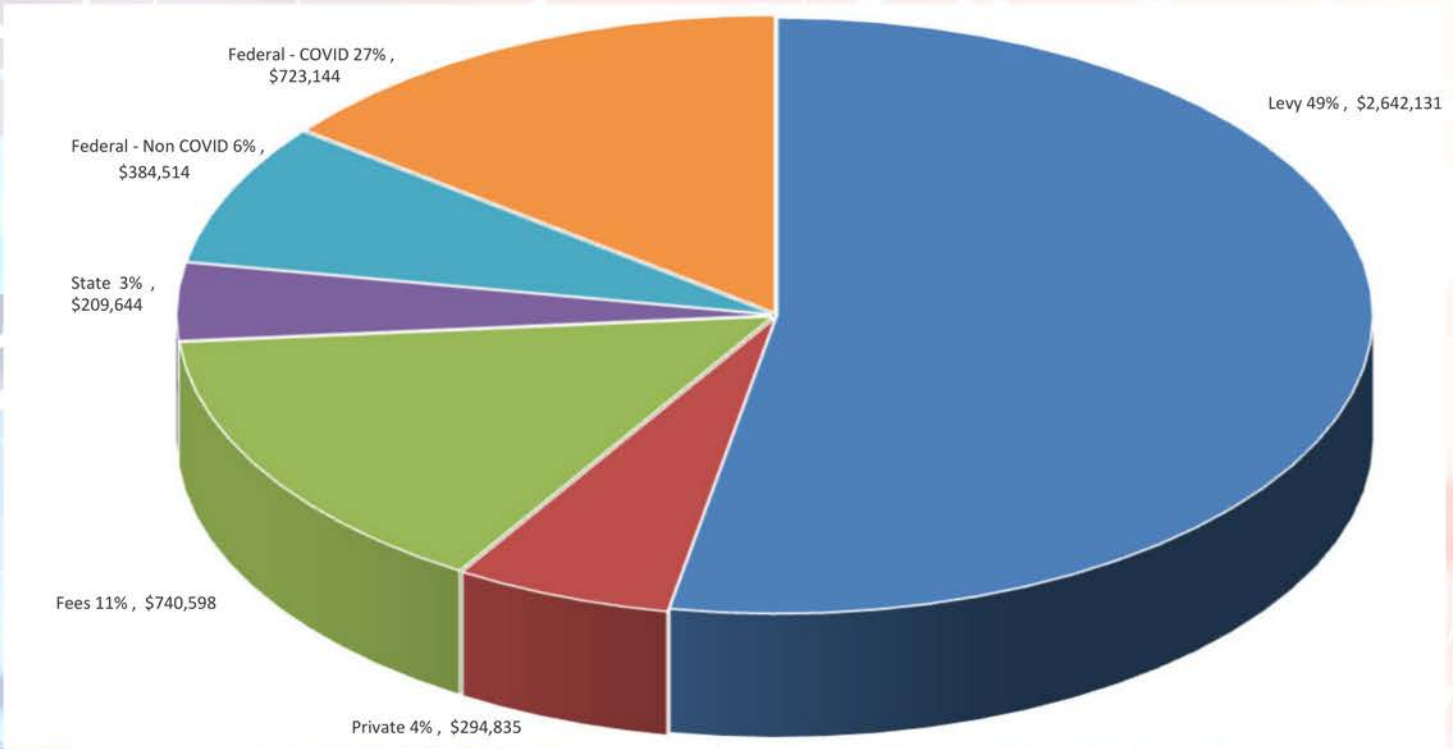




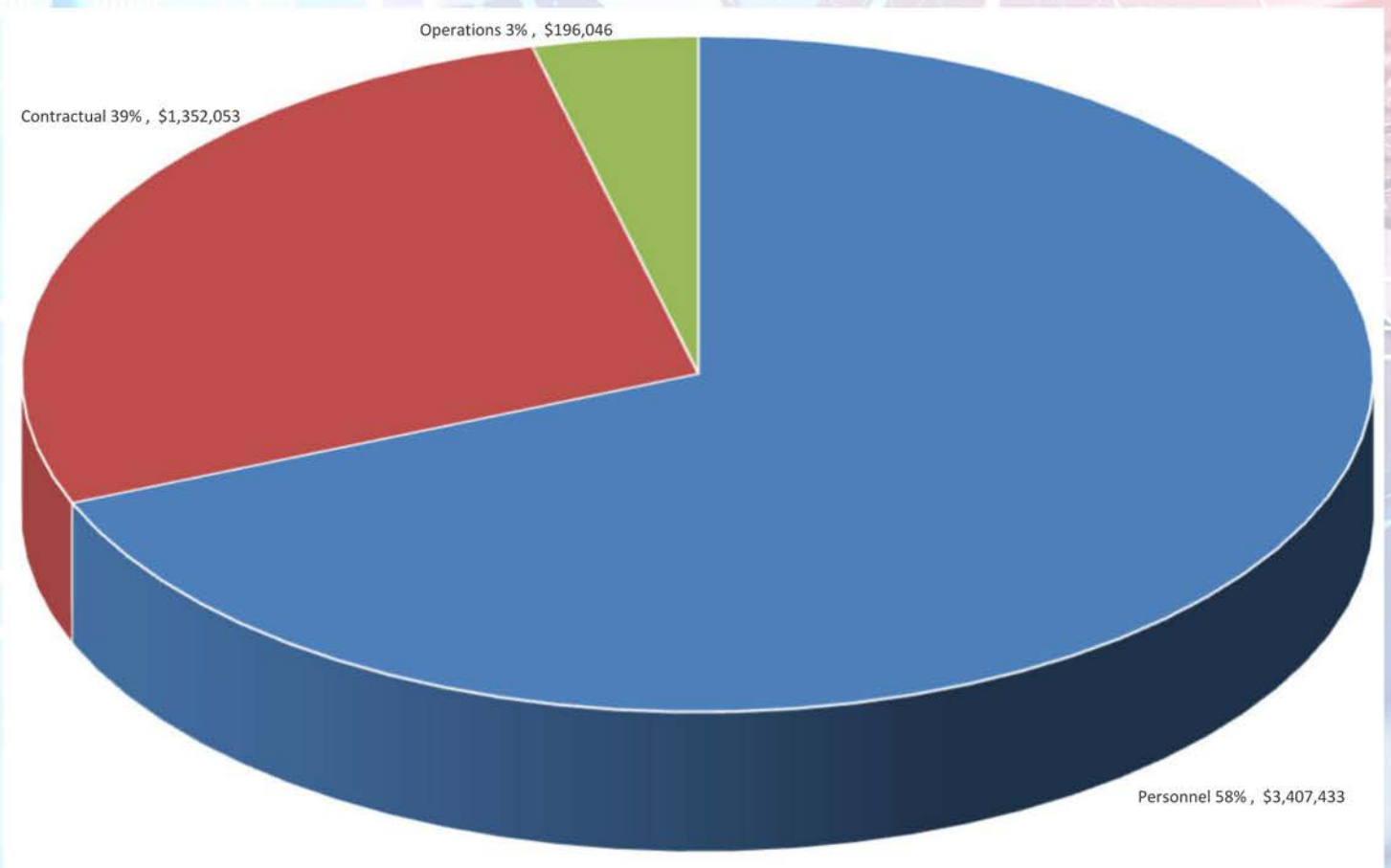


# FISCAL REPORTING

## 2022 REVENUE SOURCES



## 2022 EXPENDITURES





1000 Lake View Drive  
Suite 100  
Wausau, WI 54403  
715-261-1900

<https://www.co.marathon.wi.us/Departments/HealthDepartment.aspx>





**AOD**  
PARTNERSHIP

MARATHON COUNTY ALCOHOL AND OTHER DRUG PARTNERSHIP COUNCIL, INC.

# *An Overview of Your Local Substance Misuse Prevention Coalition*

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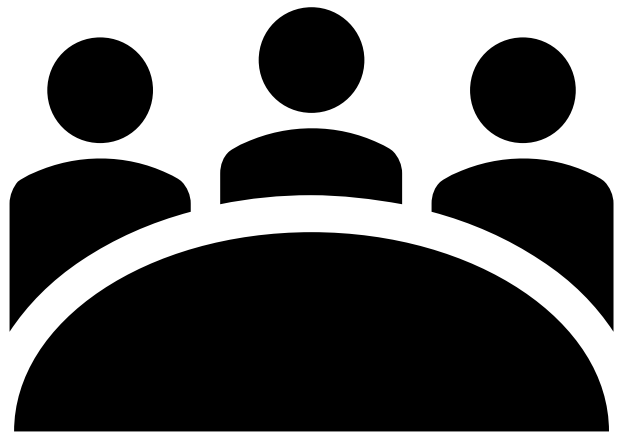
Ruth Heinzl, Board Member, Marathon County DA's Office

Kerry Thieme, Staff Support, Marathon County Health Department

# *Presentation Objectives*

1. Learn about the role of substance misuse prevention coalitions.
2. Gain an understanding of what the Marathon County AOD Partnership is and strategic initiatives.
3. Learn how to get involved.

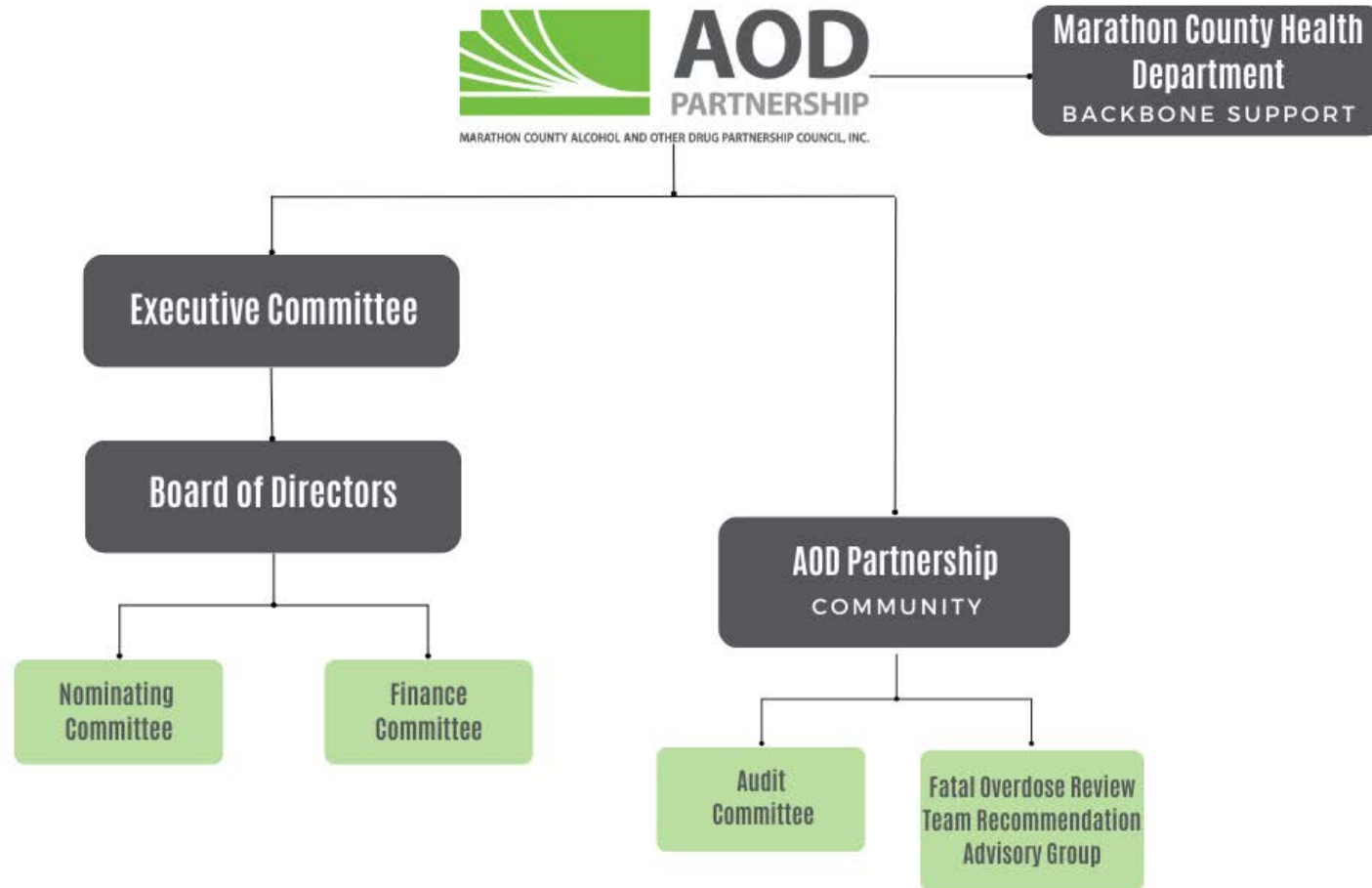




*What is a Coalition?*

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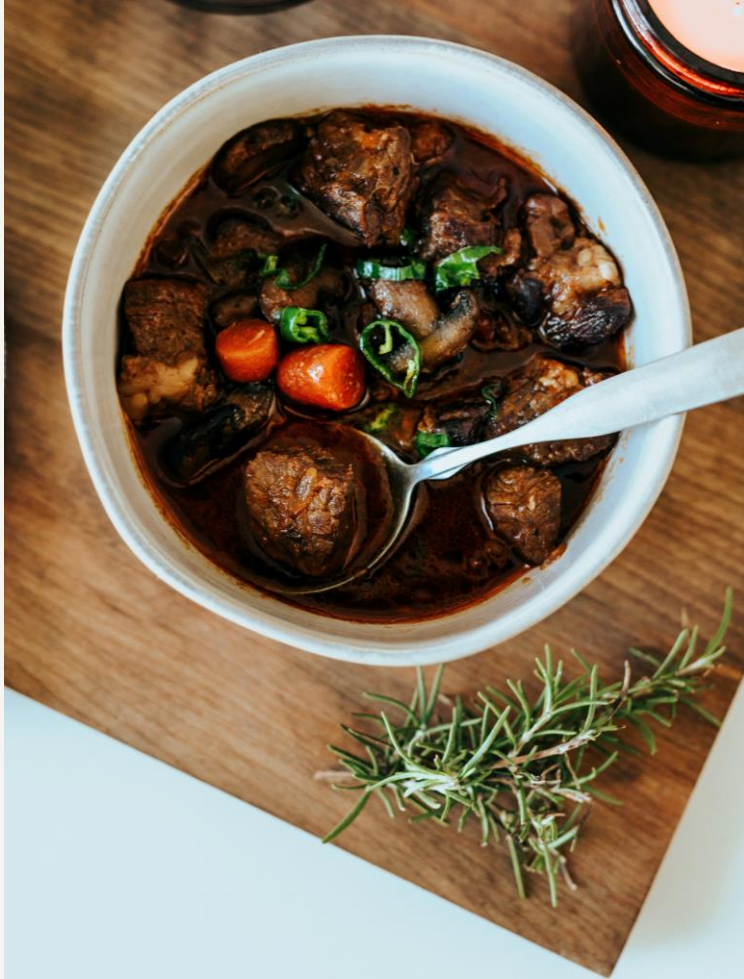
# Coalition Structure





<b>Role</b>	<b>Name</b>	<b>Organization</b>
Chair	Shannon Young	EEA Academy – Wausau Schools
Vice-Chair	Heidi Kleinschmidt	North Central Health Care
Past-Chair	Tara Draeger	Aspirus
Treasurer	Brad Gast	Northcentral Technical College
Secretary	Shereen Siewert	Wausau Pilot & Review
At-Large Member	Michelle Carr	Bridge Community Health Clinic
At-Large Member	Becky Turpin	Marshfield Clinic
At-Large Member	Lauren Henkelman	Community Member
At-Large Member	Sarah Olafson	D.C. Everest
At-Large Member	Melinda Pauls	Wausau Police Department
At-Large Member	Ruth Heinzl	Marathon County District Attorney
At-Large Member	Alexa Billeb	Marathon County Social Services
At-Large Member	Vacant	
At-Large Member	Vacant	
At-Large Member	Vacant	

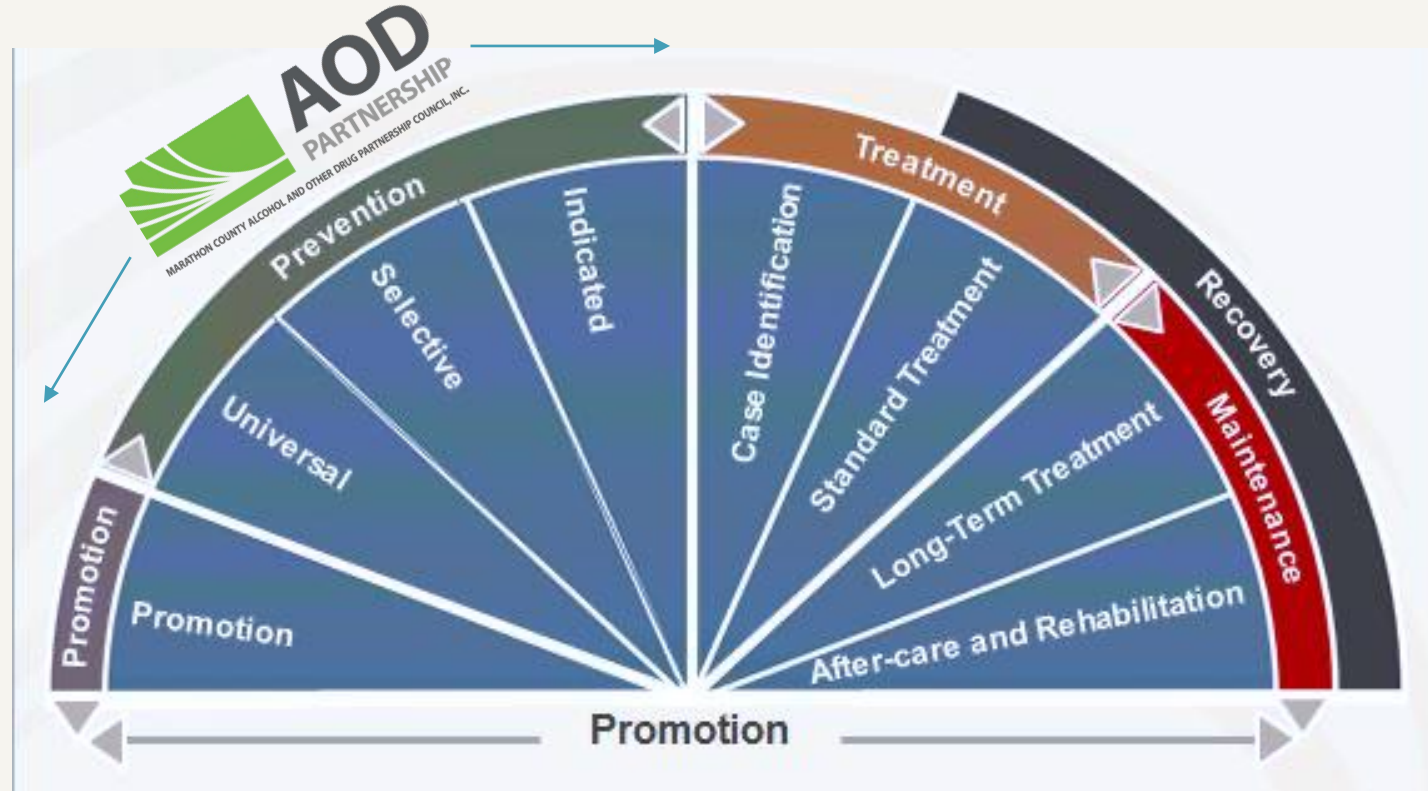
**2023**  
*Marathon County*  
*AOD Board of*  
*Directors*



*The Role of a  
Substance Misuse  
Prevention Coalition*



# Continuum of Care



PROVIDE INFO



ENHANCE SKILLS



PROVIDE SUPPORT



ENHANCE ACCESS/  
REDUCE BARRIERS



CHANGE CONSEQUENCES



CHANGE DESIGN



MODIFY POLICIES



# *How do Prevention Coalitions Affect Change?*

1. Providing Information
2. Enhancing Skills
3. Providing Support for Prevention Activities
4. Enhancing Access/Reducing Barriers
5. Changing Consequences (Incentives/Disincentives)
6. Changing Physical Design/Making Environmental Changes
7. Modifying/Changing/Developing Policies



*How do we do this Locally?*





# Marathon County AOD Partnership Strategic Plan 2023-2025





# 2023-2025 STRATEGIC PLANNING TEAM

Back Row (left to right)

Brad Gast, Treasurer | Northcentral Technical College

Becky Turpin, At-Large Member | Marshfield Clinic

Michelle Carr, At-Large Member | Bridge Community Health Clinic

Tara Draeger, Chair | Aspirus

Lauren Henkelman, At-Large Member | Inclusa

Kyle Mayo, Past-Chair | Marathon County District Attorney

Front Row

Heidi Kleinschmidt, At-Large Member | North Central Health Care

Jenna Flynn, Support Staff | Marathon County Health Department

Sarah Olafson, At-Large Member | United Way

Melinda Pauls, At-Large Member | Wausau Police Department

Nate Stetzer, Secretary | Wausau Police Department

Members Not Pictured

Shereen Siewert, At Large Member | Wausau Pilot & Review

Shannon Young, Vice-Chair | EEA Academy - Wausau Schools

Jennifer Smith, At Large Member | Bridge Community Health Clinic

Strategic Plan Facilitator

Todd Kuckkahn, Strategic Plan Facilitator and Leadership Instructor

Northcentral Technical College Workforce Training and Professional Development

Information about the 2023-2025 Strategic Plan is available online at <http://aodpartnership.org/>

\*This is a working document & subject to change over the duration of the plan





# Vision & Mission

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VISION: To be the community leader in eliminating the impact of substance use in Marathon County.

MISSION: A community partner who leads prevention efforts to reduce substance use.

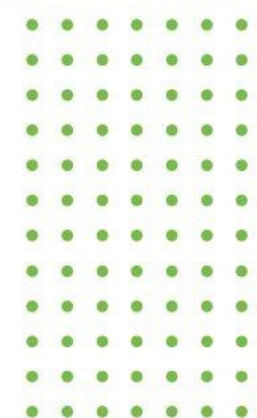




# Values

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- Collaboration** | Prioritize Partnerships
- Education** | Influence Beliefs to Change Behavior
- Inclusivity** | Integrate all Voices
- Service** | Serve the Community
- Sustainability** | Achieve Long Term Results



# OBJECTIVE 1

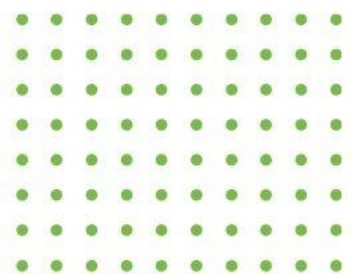
Increase public education to develop knowledge, attitudes, and skills to influence beliefs and change behaviors.

## STRATEGY 1

By December 2023, utilize the Strategic Prevention Framework to begin full implementation of an educational outreach plan.

## STRATEGY 2

Recommend integration of Botvin Lifeskills® Training for grades 9-10 to administration in all high schools and youth serving organizations in Marathon County by September, 2023.





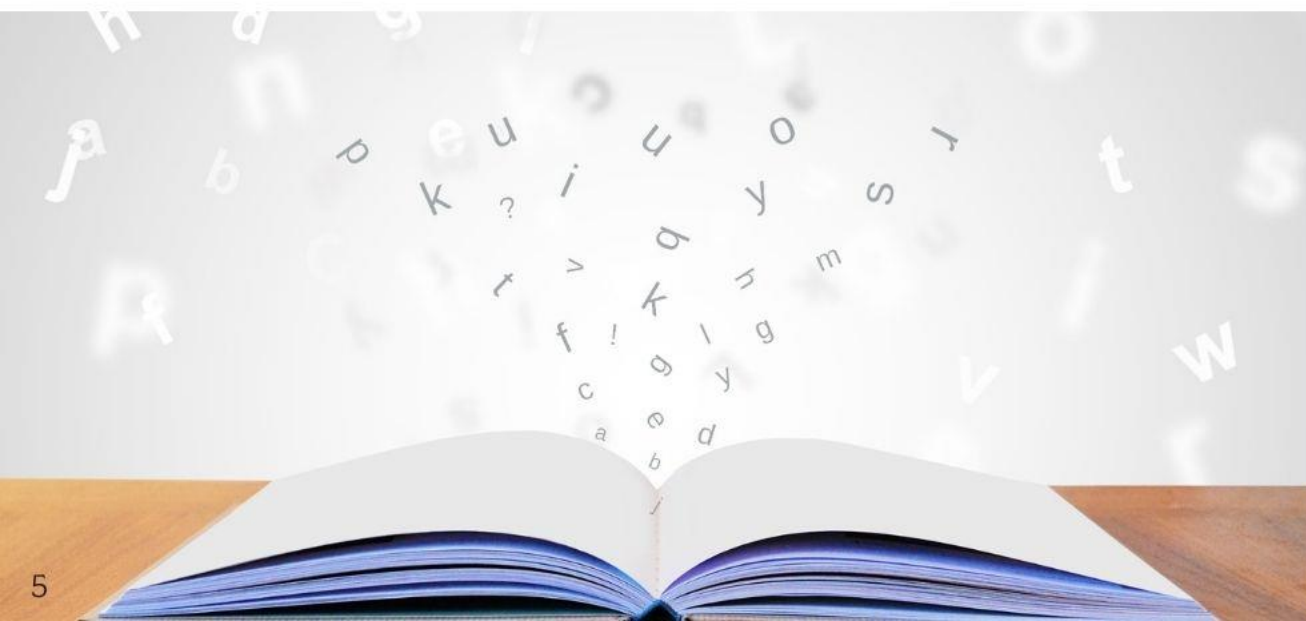


## OBJECTIVE 2

Enhance communication to influence community norms, increase public awareness, and attract community support for prevention.

## STRATEGY 1

By December 2023, utilize the Positive Culture Framework to guide the development and implementation of a communication plan.





# Marathon County AOD Partnership

## ABOUT US

### VISION

To be the community leader in eliminating the impact of substance use in Marathon County.

### MISSION

A community partner who leads prevention efforts to reduce substance use.

## OUR VALUES



INCLUSIVITY



EDUCATION



SERVICE



SUSTAINABILITY



COLLABORATION

## OUR STRATEGIES

- Increase public education to develop knowledge, attitudes, and skills to influence beliefs and change behaviors.
- Enhance communication to influence community norms, increase public awareness, and attract community support for prevention.

## HOW WE DO IT



Educational Outreach



Community Engagement



Using What Works for Prevention

## HOW YOU CAN GET INVOLVED

Subscribe to our updates! Visit [aodpartnership.org](http://aodpartnership.org)

## HOW MUCH?

2 Quarterly Summaries Issued

2 Community Events Held

2 Drug Take Back Day Events Supported

3 AOD Partnership-Related Media Interviews Conducted

3 Surveys for Community Feedback Issued

6 Hours of Strategic Planning Completed

7 Executive Committee Meetings Completed

8 AOD Board Meetings Completed

33 Registrants Attended Partners in Prevention & Recovery

50 Media Partners Received a Medication Assessment Summary

123 Registrants Attended Screenagers

## HOW WELL?



Email Engagement Increased



Board Member Sustainability Occurred



70% of Audit Committee Recommendations Implemented



Strategic Plan Objectives and Strategies Align With CADCA's 7 Strategies for Behavior Change & the Strategic Prevention Framework

## WHAT DIFFERENCE DID IT MAKE?

1 \$1,368 Pounds of Medication Were Properly Disposed of to Keep Our Communities Safe

2 80% of AOD Board Members Participated in Community Health Improvement Planning Process, Advocating for Best Practice Strategies to Reduce Substance Misuse in our Community

3 The AOD Board Fully Executed an Entire Strategic Planning Process and as a Result, the AOD Partnership has a Plan to Implement for 2023-2025

4 Alcohol Compliance Checks will Restart in our Community as part of a Catalyst Meeting that the AOD Partnership Sponsored

5 Relationships Were Built or Re-established with Partners in Prevention, Harm Reduction, Treatment, and Recovery



# How to Get Involved



**AOD**  
PARTNERSHIP

MARATHON COUNTY ALCOHOL AND OTHER DRUG PARTNERSHIP COUNCIL, INC.

## Save the Dates

### 2023 MEETINGS

ALL MEETINGS ARE HYBRID

PHYSICAL LOCATION:  
NORTHCENTRAL TECHNICAL COLLEGE  
1000 W CAMPUS DR, WAUSAU, WI  
ROOM: TBD

VIRTUAL LOCATION: ZOOM

ADDITIONAL INFO TO BE SENT OUT WITH AGENDA

TUESDAY JAN. 10 1030-1230	TUESDAY APRIL 4 1030-12	TUESDAY AUG. 1 1030-12	TUESDAY NOV. 7 1030-12
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*Questions*







**AOD**  
PARTNERSHIP

MARATHON COUNTY ALCOHOL AND OTHER DRUG PARTNERSHIP COUNCIL, INC.

# Marathon County AOD Partnership

## ABOUT US

### VISION

To be the community leader in eliminating the impact of substance use in Marathon County.

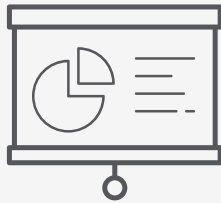
### MISSION

A community partner who leads prevention efforts to reduce substance use.

## OUR VALUES



INCLUSIVITY



EDUCATION



SERVICE



SUSTAINABILITY



COLLABORATION

## OUR STRATEGIES

- Increase public education to develop knowledge, attitudes, and skills to influence beliefs and change behaviors.
- Enhance communication to influence community norms, increase public awareness, and attract community support for prevention.

## HOW WE DO IT



Educational Outreach



Community Engagement



Using What Works for Prevention

## HOW YOU CAN GET INVOLVED

Subscribe to our updates! Visit [aodpartnership.org](http://aodpartnership.org)

**COVID-19 Grant Funding**

<b>Grant</b>	<b>Dates</b>	<b>Amount</b>	<b>Remaining YTD</b>	<b>Obligated</b>	<b>Required Use</b>	<b>Activities</b>
COVID Immunizations and Vaccines Grant	2021-2024	\$195,900	\$76,332 <small>(As of 6/08/2023)</small>	\$13,573	These funds reimbursed local health departments for expenses related to providing COVID-19 vaccine in an accessible, culturally relevant manner to underserved communities and could only be spent on COVID vaccination-related activities.	Marathon County Health Department activities included staff time, supplies, outreach, and resources to provide COVID-19 immunizations in accordance with state recommendations.
COVID-19 ARPA	2021-2024	\$1,037,700	\$719,228.73 <small>(As of 6/08/2023)</small>	\$173,089	These funds provided resources to meet and address emergent public health needs, including measures to counter the spread of COVID-19, provision of care to those impacted by the virus, and programs or services that address disparities in public health that have been exacerbated by the pandemic.	Marathon County Health Department activities included contracted staff, LTE staff, supplies, and Hmong outreach worker for COVID-specific activities that supported or enhanced efforts as recommended or required by the state.
COVID-19 Public Health Workforce	2021-2023	\$180,300	\$137,972 <small>(As of 6/08/2023) Will be applying for extension.</small>	\$103,766	This funding is primarily intended for local public health departments to establish, expand, train, and sustain public health workforce to support jurisdictional COVID-19 prevention, preparedness, COVID response, and COVID recovery initiatives in accordance with DHS requirements.	Marathon County Health Department activities included hiring contracted and LTE staff to support DHS-required COVID mitigation activities including contact tracing, disease investigation, and required reporting.
COVID-Epidemiology and Lab Capacity (ELC) Funding	2020-2022	\$1,616,000	\$1,585 <small>(Contract ended 10/2022)</small>	\$0	This funding was for health departments to prioritize the use of this funding to increase their workforce to enhance our state's capacity to respond to COVID-19.	Marathon County Health Department activities included contracted staff and LTE staff.





YTD Disease Incidents by Episode Date

Incidents for MMWR Weeks 13 - 23 (Through the week ending June 10, 2023)

Jurisdiction: Marathon County

Disease Group	Disease	2023											Total
		Week 13	Week 14	Week 15	Week 16	Week 17	Week 18	Week 19	Week 20	Week 21	Week 22	Week 23	
Blastomycosis	Group Total:	1	0	1	0	0	0	0	0	0	0	0	2
Campylobacteriosis (Campylobacter Infection)	Group Total:	0	1	2	0	0	0	0	0	1	2	0	11
Carbon Monoxide Poisoning	Group Total:	1	0	0	0	0	0	2	0	0	0	0	8
Chlamydia Trachomatis Infection	Group Total:	5	6	11	4	8	8	2	5	10	12	5	144
Coccidioidomycosis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	1
Coronavirus	Group Total:	130	116	72	36	28	22	16	9	20	11	6	1970
Cryptosporidiosis	Group Total:	0	0	0	2	0	1	1	1	0	0	0	6
Ehrlichiosis / Anaplasmosis	Group Total:	0	0	0	0	0	0	0	0	1	1	0	2
Giardiasis	Group Total:	0	0	0	1	0	2	0	0	0	0	0	4
Gonorrhea	Group Total:	0	0	0	1	1	0	0	2	1	1	0	23
Haemophilus Influenzae Invasive Disease	Group Total:	0	0	0	0	0	2	0	0	0	0	0	2
Hepatitis B	Group Total:	0	0	0	0	0	1	1	0	0	0	0	4
Hepatitis C	Group Total:	0	1	0	0	0	1	1	1	2	0	2	22
Histoplasmosis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	1
Influenza Associated Hospitalizations	Group Total:	0	0	0	0	0	1	0	0	0	0	0	15
Invasive Streptococcal Disease (Groups A And B)	Group Total:	0	1	0	0	0	1	0	1	1	0	0	10
Lyme Disease	Group Total:	0	2	0	1	2	2	2	6	4	3	2	42
Mycobacterial Disease (Nontuberculous)	Group Total:	0	0	1	0	0	0	0	0	0	0	0	5
Pathogenic E.coli	Group Total:	0	0	1	0	1	0	0	0	0	0	1	5
Pertussis (Whooping Cough)	Group Total:	0	0	0	0	0	0	2	1	0	0	0	4
Salmonellosis	Group Total:	1	0	0	0	0	0	1	0	0	0	0	12
Shigellosis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	1
Streptococcus Pneumoniae Invasive Disease	Group Total:	0	0	1	0	0	0	1	0	1	0	0	4
Syphilis	Group Total:	0	0	0	0	1	0	0	0	0	0	0	4
Toxic Shock Syndrome	Group Total:	0	0	0	0	0	1	0	0	0	0	0	1
Tuberculosis	Group Total:	0	0	0	0	0	0	0	0	0	1	0	1
Tuberculosis, Latent Infection (LTBI)	Group Total:	0	0	0	0	0	0	0	1	0	1	0	11
Varicella (Chickenpox)	Group Total:	0	0	0	0	0	0	0	0	0	0	0	1
	Period Total:	138	127	89	45	41	42	29	27	41	32	16	2316