### **Marathon County Board of Health**

Tuesday, November 5, 2019 at 7:45 AM Meeting Location: Marathon County Courthouse Assembly Room 500 Forest Street Wausau, WI 54403

Please note those attending will need to pass through security upon entering the courthouse.

**Committee Members:** John Robinson, Chair; Sandi Cihlar, Vice-Chair; Lori Shepherd, Secretary; Mary Ann Crosby; Dean Danner; Kue Her; Tiffany Lee; Michael McGrail; Laura Scudiere

**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)

**Marathon County Health Department Mission Statement:** To advance a healthy Marathon County community by preventing disease, promoting health, and protecting the public from environmental hazards. (Last updated: 5-7-13)

- Call to Order
   A. Welcome Tiffany Lee to the Board of Health
- 2. Public Comment Period
- 3. Approval of the Minutes of the October 1, 2019 Board of Health Meeting
- 4. Operational Functions Required by Statute, Ordinance, or Resolution A. None

### 5. Policy Discussion and Possible Action

- A. Resolution in support of legislation on the End the Use of Personal Conviction Waivers for School and Day Care Center Immunizations
- B. Update on the 2020 Marathon County Proposed Budget
  - i. Human Resources and Finance Committee discussion held on October 14 regarding the possible reduction in Start Right funding: Discuss the impact on Start Right services by reducing the budget by \$160,000
  - ii. Health Department's 2020 budget
- 6. Educational Presentations/Outcome Monitoring Reports (as time permits)
  - A. Update on the progress in meeting the 2019-2023 Marathon County Strategic Plan goals and objectives

B. Report from the Health & Human Services Committee October 28, 2019 meeting on policy issues impacting public health

### 7. Announcements

### 8. Next Meeting Date & Time, Location, Future Agenda Items: December 3, 2019

- A. Review draft Board of Health position paper on marijuana
- B. Update as needed on the Health Department's 2020 budget
- C. Confirm the Board of Health's role and timeline for determining community health priorities for the 2021-2024 Community Health Improvement Plan
- E. Overview of Public Health 3.0 and revisions of Wis. Admin. Code DHS 140 level requirements of local health departments
- F. Other

### 9. Adjourn

FAXED TO: Daily Herald, City Pages,	Signed
Marshfield News, Mid-West Radio Group	
	THIS NOTICE POSTED AT THE COURTHOUSE
Date Time	
Ву	Date Time

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 <u>infomarathon@mail.co.marathon.wi.us</u> one business day before the meeting.

#### MARATHON COUNTY BOARD OF HEALTH **Meeting Minutes** October 1, 2019

- Present: John Robinson, Mary Ann Crosby, Kue Her, Laura Scudiere, Sandi Cihlar, Dean Danner, Michael McGrail, Lori Shepherd
- MCHD Staff: Dale Grosskurth, Rebecca Mroczenski, Joan Theurer, Eileen Eckardt, Season Welle, Hannah Schommer

Guests:

1. Call to Order

The meeting was called to order at 7:54 a.m.

John Robinson asked for introductions from members of the Board of Health and Health Department Staff.

#### 2. **Public Comment Period**

The following members of the public provided comments on Agenda Item 5B:

#### Name

Name	Address
Dr. Tim Snow	Autumn Lane, Mosinee
Kaylee Frisch	306 Rimrock Rd, Wausau, WI 54401
Chelsea Poland	1119 Brown St., Wausau, WI 54403
Aaron Johnson	3214 Terrace Ct., Wausau, WI 54401
Erick & Tina Jensen	178808 Pineview Rd., Birnamwood, WI
Ira Huber	180716 Pineview Rd., Birnamwood, WI
Michael Bautsch	1717 Mulligan Dr
Alex Hartinger	1550 Westwood Dr., #65, Wausau, WI
Steve Frazier	7102 Evergreen St., Schofield, WI 54476
Georgianna Szymanski	227461 Cardinal Ln., Edgar, WI 54426
Amy Rogers	4232 Janick Cir. N, Stevens Point, WI 54481
Tyler Rogers	4232 Janick Cir. N, Stevens Point, WI 54481
Rob Bragten	115 Curtis Ave., Hatley, WI 54440
Robin Baker	2809 Merrill Ave., Wausau, WI 54401
Bernadette Puissant	W5497 Lincoln Dr., Mosinee, WI 54455
James DeRoche	W5497 Lincoln Dr., Mosinee, WI 54455
Scott Bautsch	7704 Walden Blvd.
Jane Poland	203 Wood St., Rothschild
Kathleen Riese	118355 HWY 153, Stratford
Julie Hill	11987 Scheuster Rd., Stratford
Heidi Soczka	963 Sunset Dr., Marathon

Motion to postpone Item 5B until the next meeting to allow time to review information and materials submitted made by Dean Danner. Seconded by Sandi Cihlar. Motion approved.

3. Approval of the Minutes of the September 3, 2019 Board of Health Meeting

Motion to approve the minutes of the September 3, 2019 meeting made by Laura Scudiere. Second Lori Shepherd. Motion approved.

4. Operational Functions Required by Statute, Ordinance, or Resolution A. None

#### 5. Policy Discussion and Possible Action

A. Share the Board of Health Plan of Work for 2019-2020

## Motion to accept the plan or work made by Dean Danner. Seconded by Laura Scudiere. Motion approved.

- B. Determine the merits of advancing a county resolution on the End the Use of Personal Conviction Waivers for School and Day Care Immunizations
- C. Report from the Health & Human Services Committee September 17, 2019 meeting on policy issues impacting public health
- Voted to declare September Suicide Prevention Month in Marathon County
- Update on Marathon County pursuing changing medical policy termination upon incarceration to suspension. This is also being pursued at the state level.
- Block grant for low income families for home improvement Accepted at the County Board meeting.

#### 6. Educational Presentations/Outcome Monitoring Reports

A. Update on Governor Evers and the Department of Health Services priorities and legislative priorities for Wisconsin Public Health Association/Wisconsin Association of Local Health Departments and Boards (WPHA/WALHDAB)

#### This item was not addressed, due to time considerations.

B. Update on the Health Department's 2020 budget and the county's timeline

This item was not addressed, due to time considerations.

C. Update on the progress in meeting the 2019-2023 Marathon County Strategic Plan goals and objectives

This item was not addressed, due to time considerations.

D. Continue the overview of the Health Department's success and challenge trends based on the 2019 Annual Report: Community Health Improvement, Family Health & Communicable Disease, Fiscal and Operations

Eileen Eckardt, Director of Family Health and Communicable Disease shared highlights and program impacts of Start Right in 2018, providing a high quality service despite changing demographics of the clients being served. A summary of the demographics of Start Right clients was included in the meeting packet. Starting to implement a new intensive services program in 2019, and collaborating with community partners to teach safe sleep practices where families are staying, and through child care providers. Outreach has been enhanced through use of the Start Right Facebook page.

Joan asked if continued discussion on the 2018 program highlights would be needed or, if Board members had enough information provided in the packet in light of future agenda topics.

The Board held discussion on what information to include in the packet, such as a presentation, related to the topic of personal conviction waivers for school and day care immunizations.

E. Share the Denison Organizational Culture Survey findings and next steps to further organizational culture

This item was not addressed, due to time considerations.

#### 7. Announcements

A. Staff Updates

This item was not addressed, due to time considerations.

#### 8. Next Meeting Date & Time, Location, Future Agenda Items: November 5, 2019

- A. Review draft Board of Health position paper on marijuana
- B. Update on the Health Department's 2020 Budget
- C. Confirm the Board of Health's role and timeline for determining community health priorities for the 2021-2024 Community Health Improvement Plan
- E. Overview of Public Health 3.0 and revisions of Wis. Admin. Code DHS 140 level requirements of local health departments
- F. Other

#### Discussion was held on potential location and meeting time changes for the next meeting.

Motion to adjourn made by Dean Danner. Seconded by Michael McGrail. The meeting adjourned at 9:43 a.m.

Respectfully submitted,

Lori Shepherd, Secretary Chris Weisgram, Recorder

#### Health Officer Notes November 2019

#### **Operational Functions Required by Statute, Ordinance, or Resolution**

A. None

#### **Policy Discussion and Possible Action**

A. Resolution in support of legislation on the End the Use of Personal Conviction Waivers for School and Day Care Center Immunizations

Joan Theurer, Health Officer will provide an overview of the School and Day Care Immunization Requirements and vaccination trends in Wisconsin. Enclosed, find a copy of:

- PowerPoint presentation of School and Day Care Immunization Requirements
- Revised Immunization Rates Q & A
- Draft template resolution for local jurisdictions provided by the state public health associations
- Public Health Council Statement regarding Vaccination

#### B. Update on the 2020 Marathon County Proposed Budget

- Human Resources and Finance Committee discussion held on October 14 regarding the possible reduction in Start Right funding: Discuss the impact on Start Right services by reducing the budget by \$160,000
- ii. Health Department's 2020 budget

John Robinson, Chair will share the discussion held on reducing Start Right funding and Joan Theurer, Health Officer will provide an overview of program costs and implications for the reduction in services. Refer to the 2020 Marathon County Administrator's Budget Message on page 17 <u>http://www.co.marathon.wi.us/Portals/0/Departments/CAD/Documents/2020 Budget Message.p</u> df. Joan will share the proposed 2020 Health Department budget.

#### Educational Presentations/Outcome Monitoring Reports (as time permits)

C. Update on the progress in meeting the 2019-2023 Marathon County Strategic Plan goals and objectives

Joan Theurer, Health Officer will review key strategies that have been implemented in support of the department's strategic plan. Enclosed, find a summary document.

D. Report from the Health & Human Services Committee October 28, 2019 meeting on policy issues impacting public health

Mary Ann Crosby, County Board Supervisor will share highlights from the discussion that impact public health.

#### Announcements

#### Next Meeting Date & Time, Location, Future Agenda Items: December 3, 2019

- A. Review draft Board of Health position paper on marijuana
- B. Update as needed on the Health Department's 2020 budget
- C. Confirm the Board of Health's role and timeline for determining community health priorities for the 2021-2024 Community Health Improvement Plan
- D. Overview of Public Health 3.0 and revisions of Wis. Admin. Code DHS 140 level requirements of local health department
- E. Other



## WISCONSIN IMMUNIZATION OF STUDENTS

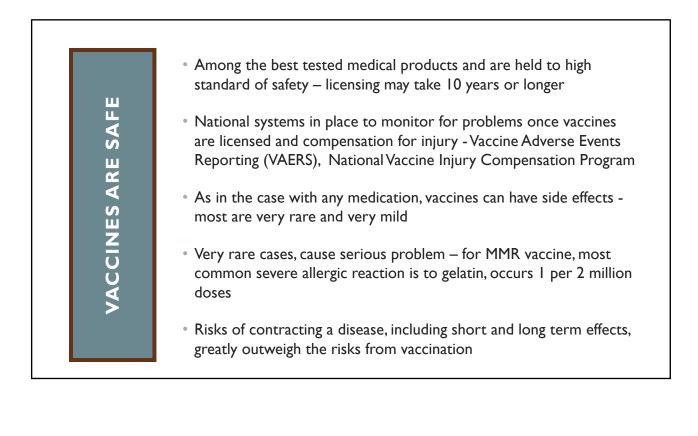
DHS 144.01 (1) The purpose of immunization is to prevent disease an suffering and any permanent disability resulting from the disease. These rules implement s.252.04, Stats., which as public policy seeks to identify and immunize these students who are still susceptible to measles, mumps, rubella, polio, hepatitis B, varicella, diphtheria, tetanus, pertussis upon admission to an elementary, middle, junior or senior high school or day care center, or Haemophilus influenza B and pneumococcal infection upon admission to a day care center, in order to prevent transmission of these diseases.

- Put in place in 1975, periodically revises administrative rules to keep with national recommendations
  WISCONSIN IMMUNIZATION LAW
  Applies students enrolled in public, private, charter, non-charter schools; children enrolled in licensed child care centers
  Does not apply to homeschooled children, virtual or online schools as long as the student does not attend a brick and mortar school for courses or extracurricular activities
  Requires students to be current in vaccinations for 9 of 16 CDC recommended vaccine preventable diseases
  Parents can waive for personal conviction, medical, religious in Wisconsin
  - As of June 2019, Wisconsin 1 of 16 states with personal convictions waiver

## VACCINATE TO PROTECT OUR CHILDREN, OUR FUTURE

- One of the top ten interventions that reduced suffering and death in the 20<sup>th</sup> century
- Best way to prevent diseases such as measles, pertussis, tetanus and chickenpox
- Led to the eradication of smallpox and near-eradication of polio
- CDC vaccination recommendations, an 18 year old is protected against 16 different diseases, two causing cancers

	<ul> <li>Protect a whole community from disease by immunizing the majority of the community</li> <li>Protect those in the community who cannot be vaccinated, such as infants and those with</li> </ul>
VACCINES PROTECT THE MOST VULNERABLE	<ul> <li>weakened immune systems who may not be able to be vaccinated</li> <li>Pre-vaccine era, more than 90% of individuals had measles – U.S. each year,</li> </ul>
our most vulnerable community members rely on others to be vaccinated	<ul> <li>500,000 cases of measles</li> <li>48,000 hospitalizations</li> <li>400-500 deaths</li> <li>Vaccine preventable diseases continue to circulate threadbet the preventable</li> </ul>
	<ul> <li>throughout the world</li> <li>2019 measles outbreaks in U.S. demonstrate how easily diseases can spread when communities are not protected</li> </ul>



### **Declining immunization rates**

- Marathon County school immunization rate 93.1% compared to Wisconsin 91.9%
- Marathon County personal conviction
  - Schools 3.7% compared to Wisconsin 4.6%
  - Day care centers 3.2% compared to Wisconsin 2.1%

## Contributed to the measles outbreak in 31 states in 2019 (CDC October 3, 2019)

- 1,250 individual cases
- 119 hospitalized (1 out of 10 individuals)
- 61 reported complications including pneumonia and encephalitis (1 out of 25 individuals)

CHILDHOOD IMMUNIZATIONS 19-35 MONTHS UP-TO-DATE Healthy People 2020 Goal 80% 100 80 60 40 20 0 Marathon Clark Wood Portage Lincoln 2011 80 50 77 79 84 2017 77 43 70 74 74

LOWER IMMUNIZATION RATES PUT COMMUNITIES AT RISK FOR DISEASES Children born during 1994-2013, vaccinations will prevent estimated 322 million illnesses, 21 million hospitalizations, and 732,000 deaths over the course of their lifetime

 Save the U.S. \$295 billion in direct medical costs and \$1.38 trillion in total society costs

> VACCINES PREVENT ILLNESS, HOSPITALIZATION, PREMATURE DEATH AND DECREASE COSTS TO OUR COMMUNITY

Communicable disease outbreaks are costly in terms of health care cost, time lost from work due to exclusion, and controlling further spread

- Ill persons are isolated to prevent the spread of disease
- Unvaccinated persons exposed excluded (quarantined) to prevent the spread of disease



#### **SUPPORT FOR ASSEMBLY BILL 248** ELIMINATING PERSONAL CONVICTION EXEMPTIONS FROM IMMUNIZATIONS

- Ascension Wisconsin
- Aurora Health Care
- Children's Hospital of WI
- Gunderson Health System
- League of Women Voters of Wisconsin
- Medical College of Wisconsin
- Pharmacy Society of Wisconsin
- Rural Wisconsin Health Cooperative
- Wisconsin Academy of Family Physicians

- Wisconsin Academy of Physician Assistants
- Wisconsin Association of Local Health Departments and Boards
- Wisconsin Association of School Nurses
- Wisconsin Chapter of the American Academy of Pediatrics
- Wisconsin Hospital Association
- Wisconsin Medical Society
- Wisconsin Nurses Association
- Wisconsin Public Health Association

2019. <u>https://www.cdc.gov/measles/cases-outbreaks.html</u> MMWR Benefits from Immunizations During the Vaccines for Children Program Era – United States, 1994-2013 (CDC) <u>https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6316a4.htm</u>
Centers for Disease Control and Prevention (CDC). Measles Cases and Outbreaks. Measles Cases in
Rao, T. S., & Andrade, C. (2011). The MMR vaccine and autism: Sensation, refutation, retraction, and fraud. Indian journal of psychiatry, 53(2), 95–96. doi:10.4103/0019-5545.82529 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3136032/
Health Resources and Services Administration. National Vaccine Injury Compensation Program. https://www.hrsa.gov/vaccine-compensation/index.html
Centers for Disease Control and Prevention (CDC). History of Vaccine Safety. https://www.cdc.gov/vaccinesafety/ensuringsafety/history/index.html
Bulletin of the World Health Organization:Vaccination greatly reduces disease, disability, death and inequity worldwide (2008). FE Andre, R Booy, HL Bock, J Clemens, et. al <a href="https://www.who.int/bulletin/volumes/86/2/07-040089/en/">https://www.who.int/bulletin/volumes/86/2/07-040089/en/</a>
State of WI Department of Health Services. Safety of Vaccines Message Map and Vaccines Message Map. October 2018
State of WI Department of Health Services. Immunization Law Clarification. (P-01438 (6/2018) https://www.dhs.wisconsin.gov/publication/p01438.pdf

### Marathon County Childhood Immunization Rates for Schools and Day Care Centers Questions and Answers October 24, 2019 Becky Mroczenski, Communicable Disease Manager

1. What is the overall immunization rate for schools and days care centers for Marathon County compared to the State of Wisconsin for the 2018-19 school year?

Answer: Marathon County schools immunization rate for minimum requirements is 93.1% compared to the State of Wisconsin at 91.9%. Day care centers are not reported in the same way. Immunization rates for day care centers are measured by individual vaccine. Not all day care centers report, having 60.5% of Marathon County day care centers submit a report compared to Wisconsin at 54.3%

2. What the current type of immunization exemptions/waivers allowed in Wisconsin for students enrolled in schools and day care centers?

Answer: There are three types of immunization exemptions: religious, medical and personal conviction waiver.

3. What is the percentage of students with religious and medical waivers for Marathon County for the 2018-19 school year?

Answer: The percentage for Marathon County schools is 0.4% and Marathon County day care centers is 0%. This compares to 0.7% for Wisconsin schools and 0.5% for Wisconsin day care centers.

4. What is the percentage of students with a personal conviction waiver for Marathon County for the 2018-19 school year?

Answer: The percentage for Marathon County schools is 3.7% compared to Wisconsin at 4.6% Marathon County day care centers is 3.2% compared to Wisconsin at 2.1%.

5. What has occurred in other states where personal conviction exemptions have been removed?

Answer: The CDC provides data for school required vaccines by specific vaccine type. In an effort to provide information for consistent comparison the percentages listed below are for the MMR vaccine.

For the CDC available data for the 2017-2018 school year of children enrolled in kindergarten by state, only 3 states did not allow for religious or personal (philosophical) exemptions; they are California (96.9%), Mississippi (99.4%) and West Virginia (98.4%). California removed both personal and religious with Senate Bill 277 in 2015 for the 2016-2017 school year. Since the 2014-2015 school year to the 2017-2018 school year their school rates went from 92.6% to 96.9%. Of note, with SB 277 physicians were given boarder discretion to grant medical exemptions for reasons other than a

contraindication, including family medical history. West Virginia and Mississippi have had their school vaccination laws in place for over 30 years.

Maine and New York states passed legislation in 2019 to only allow for medical exemptions. Maine's law goes into effect September 1, 2021. Regarding the state of New York, it is unclear the actual date the law went into effect, however, it is in place for the 2019-2020 school year. No data is available to compare changes for Maine and New York. For the 2017-2018 school year Maine was 94.3% and New York was 97.2%

There are 45 states and the District of Columbia that allow for religious exemptions for the MMR vaccine. Currently, 14 states that allow for both religious and philosophical exemptions for the MMR vaccine. For states that allow only a religious exemption estimated vaccination coverage ranged from 81.3%-98.6%. States that allowed for both exemptions estimated vaccination coverage ranged from 88.7%-96.7%. There was no CDC date for Wyoming, which only allows for a religious exemption.

Two articles looked at the correlation between removing personal conviction waivers/philosophical exemptions and vaccination coverage rates.

American Journal of Public Health, Nonmedical Exemptions From School Immunization Requirements: A Systematic Review. 2014, November; Volume 104(11):5 pages e62-e84.

- "Studies have consistently found that allowing philosophical and religious exemptions increases exemption rates and decreases vaccination rates."
- "State exemption rates also appeared to be correlated with the ease with which nonmedical exemptions can be obtained. Studies have consistently found that states with easier exemption requirements (in terms of paperwork or the effort required) have higher exemption rates and vice versa."
- "We found consistent evidence of rising rates of nonmedical exemptions from school entry vaccine mandates and of the association of exemption rates with outbreak risk. We have also found that stricter exemption laws can decrease or restrict growth of these rates and thereby reduce outbreak risk."

Journal of American Medical Association, Research Letter, *Change in Medical Exemptions From Immunization in California After Elimination of Personal Belief Exemptions*. September 5, 2017; Volume 318(9), page 863.

- "We found a positive relationship between county level change in medical exemption (ME) percentage and previous personal belief exemption (PBE) use (Pearson r=0.65; P<.001; n=56), signaling that counties with high PBE use prior to SB 277 had the largest increase in MEs after its implementation."</li>
- 6. Is there data available on the number of children who are home schooled? Are children who are home schooled exempt from immunization requirements?

Answer: Information provided by Marathon County Special Education indicates there are 467 home schooled children from K-12 in Marathon County. There is approximately 20,532 children in Marathon County who are between the ages of K-12. There is no immunization data on home schooled children, they are exempt from reporting requirements.

## **DRAFT DRAFT DRAFT**

Draft template resolution for local jurisdictions

**RESOLUTION NO.** <u>insert number if applicable</u>

#### RESOLUTION REQUESTING THE WISCONSIN LEGISLATURE END THE USE OF PERSONAL CONVICTION WAIVERS FOR SCHOOL AND DAY CARE CENTER IMMUNIZATIONS

WHEREAS, there are multiple important and potentially dangerous communicable diseases that are

preventable by vaccinations currently required by Wisconsin law for school and day care attendance, and

WHEREAS, vaccine-preventable diseases can be very contagious, and can result in serious health

complications, including pneumonia and encephalitis, and lead to death, and

WHEREAS, the effectiveness and safety of vaccines have been well established, and

WHEREAS, the Affordable Care Act has improved insurance coverage for vaccinations, which are readily

available in medical offices and pharmacies, and public health departments continue to serve those eligible for the

Vaccines for Children Program, and

WHEREAS, all states require certain vaccines for school entry in order to

a) assure that individual children do not contract disease in the social setting of school,

b) protect other students from being at risk of disease and death from exposure to an individual student, and

c) protect the broader community from these serious illnesses, including individuals who are immunocompromised and those who cannot receive vaccines for *bona fide* medical reasons, and

WHEREAS, Wisconsin's immunization law Wis. Stat. § 252.04(3), Wis. Admin. Code § DHS 144.06,

makes Wisconsin one of only 16 states that permits parents to opt out or waive some or all of the vaccinations required to attend school or group day care based on their personal beliefs, and

WHEREAS, Wisconsin's percentage of students with religious and medical waivers have remained relatively constant over the past decade at less than 1%, but the percentage of students with a personal conviction waiver in Wisconsin increased from 1.2% during the 1997-98 school year to an alarming 4.6% during 2018-19, and

WHEREAS, outbreaks of measles have impacted multiple states in 2019, and a number of other serious vaccine-preventable disease outbreaks have occurred in Wisconsin over the past 2 decades, and

WHEREAS, several other states have recently removed personal belief exemptions from their legal codes, such that 34 states now prohibit the use of personal belief exemptions for school and daycare immunizations, and

WHEREAS, the Wisconsin Public Health Association (WPHA) and the Wisconsin Association of Local Health Departments and Boards (WALHDAB) both support a change in school and day care center immunization law that eliminates personal conviction waivers for students in Wisconsin public and private schools and for children who attend group day cares.

#### NOW, THEREFORE, BE IT RESOLVED that the \_\_\_\_\_Insert name of local health department,

*board of health, county board, or other entity submitting* respectfully requests that the Wisconsin Legislature end the use of personal conviction waivers for school and day care center immunization requirements.

BE IT FURTHER RESOLVED that a copy of this resolution be sent to the Governor of Wisconsin,

Wisconsin state legislators, WPHA, WALHDAB, Wisconsin Counties Association, and other organizations as appropriate.

Dated

SUBMITTED BY: Insert Name of Entity Submitting

<mark>Name</mark>

<mark>Name</mark>

**FISCAL NOTE:** This resolution does not require an appropriation from the <u>Insert name of budget fund if</u> <u>applicable</u> fund.

#### **APPROVED BY:**

**APPROVED BY:** 

Name Name Title Title

**<u>CERTIFICATION</u>** *(if applicable)*: I hereby certify this to be a true and exact copy of Resolution No. \_\_\_\_\_\_.

Ayes \_\_\_\_ Nays \_\_\_\_ Abstained \_\_\_\_ Excused \_\_\_\_ Absent \_\_\_\_

\_\_\_\_ Approved and adopted this \_\_\_\_\_\_ day of \_\_\_\_\_\_.

\_\_ Denied this \_\_\_\_\_ day of \_\_\_\_\_.

Name Title

## WISCONSIN PUBLIC HEALTH COUNCIL

Assure safe and healthy people by monitoring progress on the state health plan, Healthiest Wisconsin 2020, and on the readiness for public health emergencies.



# Wisconsin Public Health Council Statement Regarding Vaccination and Current Measles Outbreak

The Wisconsin Public Health Council was created by Act 186 [WI Statute 15.197(13)] to advise the Department of Health Services, the Governor, the Legislature, and the public on the progress in implementing the state's 10-year public health plan and the coordination of responses to public health emergencies.

This urgent statement is provided to the Department of Health Services, the Governor, and the Legislature to insure awareness of the Measles outbreaks currently occurring in the United States, the connection to the State Health Plan and potential for a public health emergency in our state due to under-vaccination for measles in Wisconsin.

The Public Health Council strongly advises, as per our charge, that state and public health action should be taken urgently to insure vaccination of every eligible person in the state except for those rare individuals with a valid medical exemption, to prevent measles-related illness, hospitalization, and death in Wisconsin.

### Issue: Outbreak of Measles Cases in Unvaccinated Populations

Measles is highly contagious, spreading through the air when an infected person coughs or sneezes, causing significant illnesses, including pneumonia and encephalitis. Measles was eliminated from the United States in 2000 due to good public health practices and through use of a safe and effective vaccine that has been the standard of measles prevention accepted by public health practitioners and physicians around the world. Our nation is currently experiencing the greatest number of reported cases of measles since 1994, and since measles was declared eliminated in 2000. Although no one in Wisconsin has become ill from measles yet during this outbreak, measles has been reported in three of our four bordering states, and it is likely that our first case is only weeks, if not days away.

### Immunity and Vaccine Background

The MMR vaccine (measles, mumps and rubella) is very safe and effective. Because measles is so very contagious, studies have shown that 95% of the population needs to be immunized to prevent re-establishment of measles.

The spread of measles during this national outbreak has been closely linked to unvaccinated persons. Fraudulent and discredited misinformation linking the MMR vaccine to autism have resulted in tens of thousands of unnecessary measles cases and hundreds of deaths worldwide due to vaccine avoidance.

### **Vaccine Exemptions**

All states require certain vaccines for school entry. Requirements have three major purposes beyond the goal of maintaining overall individual health. First, they assure that individual children do not contract disease in the social setting of school. Second, other students are protected from being at risk of disease and death from exposure to an individual student. Third, when vaccine coverage is high enough (called "herd immunity") the community is protected, including individuals who cannot receive vaccines or are immunocompromised.

Statement Regarding Vaccination & Current Measles Outbreak Page 2 June 28, 2019

This concept is important when one considers that, at any given time, there are millions of immunocompromised Americans who are highly susceptible to infectious diseases.

All states provide exemptions from vaccination for specific scientifically proven medical reasons. Exemptions also may be granted for religious or personal belief reasons. Medical exemptions are extremely rare, and most established religious orders support vaccination. Only 15 states allow personal exemptions from immunizations, including our state of Wisconsin. Recently, in response to this outbreak, California entirely repealed its non-medical exemptions, and Vermont removed personal belief exemptions from its legal code.

#### Recommendation

State and public health action should be taken urgently to insure vaccination of every eligible person in the state except for those rare individuals with a valid medical exemption, to prevent measles-related illness, hospitalization, and death in Wisconsin.

## Goal 1: Integrate concepts of health equity into programs and initiatives that address the population health needs in Marathon County.

Strategies Implemented:

- Community Health Improvement Program Director active participant on the Marathon County GARE (Government Alliance on Race and Equity) Learning Community, part of a statewide initiative. In addition, serves on the Marathon County planning committee for Martin Luther King Jr. Day On
- Project Charter developed to guide the planning and evaluation of progress was finalized on May 15, 2019. Major milestones met:
  - Cross-team Health Equity formed with first meeting held on June 26, 2019
  - o Initial review of health equity organizational assessment tools completed
  - Inventory of what peer local health departments are doing
  - Review of learning resources completed with the goal to hold the viewing of "Unnatural Causes: In Sickness and In Wealth" at October 23<sup>rd</sup> All-Staff

#### **Goal 2:** Foster an organizational culture that support innovation and excellence.

Strategies Implemented:

- All current employees participated in the IDEAS (Improvement Driven by Employee Awareness and Study) Academy 4 hour training, a county-led quality improvement initiative. Seventeen (17) percent of employees will be participating in a 3-day IDEAS Innovator course this fall
- Quality improvement projects have been identified, in process or completed for all six major program areas for this fiscal year
- Program professionals job standards are being revised to be in keeping with the Public Health Core Competencies
- Five (5) "Innovations" occurred, topics varying from project management tools, data visualization, icebreakers and improve during a meeting. The purpose of Innovations is enable colleagues to experience shared learning, ideas and innovations with one another. The topics encompass universal, personal development and growth opportunities, identified and lead by employees. To date 9 colleagues have hosted a topic, having 84 attendees, with 33 unduplicated attendees.

## Goal 3: Advance strategic collaborative partnerships at the local, regional and state level to fulfill the department's mission.

Strategies Implemented:

- Four colleagues attended 2-day ToP (Technology of Participation) Facilitation Methods training held in Wausau. One colleague attended 2-day advance ToP Strategic Planning training with plans to attend 2-day ToP Designing for Change training in November. All health educators and prevention specialist will be trained in the Journey of Facilitation and Collaboration as of October 2019.

## Goal 4: Inform and advance public health policy in support of the County's mission and strategic goals.

#### Strategies Implemented:

- Board of Health hosted a Legislative Educational Meeting on February 25<sup>th</sup> focused on Adverse Childhood Experiences (ACEs), behavioral health and substance abuse.
- Board of Health advanced a resolution to Support Federal Medicaid Expansion and a policy statement on Workplace Naloxone Use Program to the Health & Human Services Committee.



### Wisconsin Department of Health Services Division of Public Health PHAVR - WEDSS

YTD Disease Incidents by Episode Date

#### Incidents for MMWR Weeks 1 - 41 (Through Week of October 12th, 2019)

Jurisdiction: Marathon County

Disease Group		2019				
	Week 38	Week 39	Week 40	Week 41	Total	201
Arboviral Disease	0	0	0	0	1	
Babesiosis	0	0	0	0	1	
Blastomycosis	0	0	0	0	6	
Campylobacteriosis (Campylobacter Infection)	0	0	0	1	24	5
Carbapenem-Reistant Enterobacteriaceae	0	0	0	0	1	
Carbon Monoxide Poisoning	0	0	0	0	6	
Chlamydia Trachomatis Infection	8	11	8	2	285	34
Cryptosporidiosis	2	0	1	0	25	3
Ehrlichiosis / Anaplasmosis	0	0	0	0	15	28
Environmental and occupational lung diseases	1	0	0	0	1	(
Giardiasis	2	2	4	2	32	39
Gonorrhea	0	5	2	5	99	54
Haemophilus Influenzae Invasive Disease	0	0	0	1	4	
Hepatitis B	0	0	0	0	6	10
Hepatitis C	0	0	1	0	21	2!
Influenza	0	0	0	0	62	147
Invasive Streptococcal Disease (Groups A And B)	0	0	0	0	17	20
Lyme Disease	0	0	0	0	32	4
Mumps	0	0	0	0	1	(
Mycobacterial Disease (Nontuberculous)	0	0	0	0	10	1!
Parapertussis	0	1	0	0	1	5
Pathogenic E.coli	0	0	0	0	10	18
Pertussis (Whooping Cough)	0	0	0	0	12	14
Salmonellosis	1	0	0	0	30	19
Streptococcal Infection, Other Invasive	0	0	0	0	2	(
Streptococcus Pneumoniae Invasive Disease	0	0	0	1	13	1!
Syphilis	0	1	0	0	5	
Tuberculosis	0	0	0	0	1	
Tuberculosis, Latent Infection (LTBI)	0	0	0	0	6	1
Varicella (Chickenpox)	0	1	0	0	5	
Vibriosis, Non Cholera	0	0	0	0	1	
	14	21	16	12	735	