

Marathon County Board of Health
AMENDED February 5, 2021

Tuesday, February 9, 2021 at 7:45 AM

Meeting Location: 1000 Lake View Drive, Suite 100
Wausau, WI 54403

The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, Marathon County encourages Board of Health members and the public to attend this meeting remotely. To this end, instead of attendance in person, Board of Health members and the public may attend this meeting by telephone conference. If Board of Health members or members of the public cannot attend remotely, Marathon County requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees. 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. When you enter the telephone conference, put your phone on mute.

Dial +1 312 626 6799 US (Chicago)
Meeting ID: 851 2896 1112
Password: 882227

Committee Members: John Robinson, Chair; Craig McEwen, Vice-Chair; Lori Shepherd, Secretary; Sandi Cihlar; Dean Danner; Kue Her; Tiffany Lee; Corrie Norrbom

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)

- 1. Call to Order**
- 2. Public Comment Period**
- 3. Approval of the Minutes of the December 8, 2020, January 12, 2021 Board of Health Meeting, and the Minutes of the January 12, 2021 Health & Human Services and Board of Health Joint Meeting**
- 4. Operational Functions Required by Statute, Ordinance, or Resolution**
 - A. None
- 5. Policy Discussion and Possible Action**
 - A. Determine the 2021-2022 Licensing Fee
 - B. Confirm timeline for identifying Community Health Priorities and the development of the 2022-25 Community Health Improvement Plan required for local health departments

- C. Discuss local efforts to control the spread of COVID-19 and the role/responsibility of the Marathon County Health Department in the response
 - i. Mitigation measures
 - ii. Surveillance
 - iii. Disease investigation/contact tracing
 - iv. Testing and vaccinations
 - 1. Marathon County serving as a regional vaccination site
 - v. Informing the public and community engagement initiatives
 - vi. Other
- D. Policy updates from the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and WI Department of Health Services (standing agenda item)
- E. Report from the Health & Human Services Committee February 3 meeting on policy issues impacting public health
- F. Update on the Start Right program evaluation (as time permits)
 - i. UniverCity application
 - ii. Other evaluation options
- G. Update on the Board of Health training session focused on health equity (as time permits)

6. Educational Presentations/Outcome Monitoring Reports

- A. None

7. Announcements

8. Next Meeting Date & Time, Location, Future Agenda Items:

- A. Confirm March 9, 2021 meeting date and determine agenda topics
 - i. Update on formalizing the reporting relationship between the Board of Health and the Health & Human Services Committee

9. Adjourn

FAXED TO: Daily Herald, City Pages,
Marshfield News, Mid-West Radio Group

Signed _____

THIS NOTICE POSTED AT THE COURTHOUSE

Date _____ Time _____

By _____

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 infomarathon@mail.co.marathon.wi.us one business day before the meeting.

MARATHON COUNTY BOARD OF HEALTH
Meeting Minutes
December 8, 2020

Present (Via Zoom): John Robinson, Sandi Cihlar, Dean Danner, Kue Her, Craig McEwen, Corrie Norrbom, Tiffany Rodriguez-Lee, Lori Shepherd (Telephone)

MCHD Staff: Joan Theurer, Judy Burrows, Dale Grosskurth, Rachel Klemp-North, Eileen Eckardt, Chris Weisgram

Others Present: Tim Buttke

1. Call to Order

John Robinson called the meeting to order at 7:45 a.m.

2. Public Comment Period

None

3. Approval of the Minutes of the November 10, 2020 Board of Health Meeting

Motion to approve the minutes of the November 10, 2020 meeting made by Sandi/Craig. Motion approved.

4. Operational Functions Required by Statute, Ordinance, or Resolution

A. None

5. Policy Discussion and Possible Action

A. Update on the Board of Health training session focused on health equity along with the WALHDAB October 19 Forum

John Robinson shared he needs to outreach to remaining board members to gather input as to the focus of the health equity training. Joan Theurer shared background information on how board members can become involved in WALHDAB.

B. Update on the 2021 Marathon County and Health Department Budget and implications for the Health Department's COVID-19 response

Joan Theurer revisited the proposal brought forward at the last meeting which proposed reducing the Start Right budget. The resolution at the County Board level failed, and the program will be funded at its current tax level in 2021.

Discussion on conversations at the County Board meeting and the need to still complete the evaluation of the Start Right program, and explain the need for the program to other County Board Supervisors.

Discussion on including cost effectiveness and return on investment of the Start Right program in the evaluation.

Joan Theurer shared updates on what funding will be available in the first quarter of 2021 for COVID-19 response. Marathon County will receive approximately \$631,000 from the Epidemiology and Laboratory Capacity Building grant, which would fund response efforts through April.

Joan indicated there is adequate funding to have contractual employees stay on board through March or April of 2021, anticipating having a better picture of the funding situation by late January.

C. Overview of Wisconsin Counties Association publication on 'stepped' enforcement process for communicable disease

Joan shared an overview of the handout provided in the packet regarding guidance on enforcement of local health orders from Wisconsin Counties Association. Joan shared how enforcement actions have been carried out previously with response to Tuberculosis cases, human health hazards, and licensing violations.

Joan presented the challenges with stepped enforcement, including having a majority of residents supporting the control efforts, staff resources available to carrying out monitoring and investigation, the County's staffing resources to pursue court action, and the assumption of a long infectious time period to pursue meaningful court action.

John Robinson asked what response the health department has been getting as far as voluntary compliance for isolation and quarantine. Joan shared that the department given the number of cases does not have the capacity to collect the information necessary to monitor quarantine and isolation beyond initial contact tracing.

John Robinson summarized that the stepped enforcement idea is a tool that is available, but may have limited applicability with response to the pandemic.

D. Report from the Health & Human Services Committee December 2, 2020 meeting on policy issues impacting public health

- i. Stepped Enforcement Process Under Administrative Code 145
- ii. Responding to the Housing Needs of our COVID Positive Homeless Population
- iii. Update on Discussions with WIPPS Relative to Community Conversation about COVID-19

Joan Theurer shared the stepped enforcement process was also discussed at the Health and Human Services Committee meeting earlier in the month. Committee members were made aware of housing needs of homeless community members who have COVID-19, and plans were developed to secure housing, utilizing Catholic Charities as a referral source. Protocols are currently being finalized.

A proposal focused on a public dialogue around COVID-19 was presented to the committee by WIPPS. John Robinson shared the goal of the dialogue is to hold a civil discussion in the

community on the response to the pandemic. A work group will finalize the scope of the program by the end of December or January.

- E. Discuss local efforts to control the spread of COVID-19 in Marathon County
 - i. Community engagement initiatives
 - ii. Housing for homeless population in need of isolation and quarantine
 - iii. Influenza and COVID-19 vaccination efforts
 - iv. Other

Judy Burrows provided updates on community initiatives including a live conversation with local health care organization leadership, DC Everest School District, and the health department to give the community a stronger message of what is happening in the community. The intent was to draw attention to the local circumstances. Work with United Way has launched a new campaign with stories from community members on how COVID-19 has impacted them. The campaign is called Community Voices – Beyond the Virus. Community members are asked to go to the associated website and share their stories.

Joan shared that having community conversations outside of the health department will continue to be important.

6. Educational Presentations/Outcome Monitoring Reports

- A. Update on Marathon County's COVID-19 response efforts and focus for the next 30-60 days
 - i. Community testing, disease investigation/contact tracing, vaccination plans, communication to the public, and demands on community resources

Joan Theurer shared coordination among health care providers as far as community testing has been beneficial. Starting this week, Aspirus will be assuming the community testing days at the Emergency Management department, operating 7 days per week. Changes to quarantine timelines are rolling out, as recommended by CDC. New quarantine options include 7 or 10 days within the 14 day quarantine period. Recommendations vary based on individual cases and situations.

The phase one vaccine distribution plan will include long term care facilities in sub-phase 1A, essential workers in sub-phase 1B, and individuals over age 65 in sub-phase 1C. Vaccine manufacturers have requested emergency use approval from the FDA. Work is under way to plan for storage and distribution of vaccine. Local health departments' role in phase 1A will be limited as far as administering vaccine. Weekly planning meetings between the health department, and local health care organizations have started and will look at where gaps exist for vaccine distribution, and who will fill those gaps. Judy Burrows as public information officer will work with communications staff at the health care organizations when it is time to communicate with the public on the roll out of vaccine distribution.

Discussion on communication being planned at the state and federal levels for vaccine safety and effectiveness.

7. Announcements

8. Next Meeting Date & Time, Location, Future Agenda Items:

- A. Confirm January 14, 2021 meeting date and determine agenda topics
 - i. Formalizing the reporting relationship between the Board of Health and the Health & Human Services Committee

9. Adjourn

Motion to adjourn made by Lori Shepherd. Seconded by Corrie Norrbom. The meeting adjourned at 9:25 a.m.

Respectfully submitted,

Lori Shepherd, Secretary
Chris Weisgram, Recorder

DRAFT

MARATHON COUNTY BOARD OF HEALTH
Meeting Minutes
January 12, 2021

Present (Via Zoom): John Robinson, Sandi Cihlar, Kue Her, Dean Danner, Tiffany Rodriguez-Lee, Craig McEwen, Lori Shepherd, Corrie Norrbom

MCHD Staff: Laura Scudiere, Judy Burrows, Joan Theurer, Dale Grosskurth, Chris Weisgram

Others Present: Tim Buttke

1. Call to Order

John Robinson called the meeting to order at 9:28 a.m.

2. Public Comment Period

None

3. Approval of the Minutes of the December 8, 2020 Board of Health Meeting

Agenda item tabled due to time constraints.

4. Operational Functions Required by Statute, Ordinance, or Resolution

A. None

5. Policy Discussion and Possible Action

A. Update on the Board of Health training session focused on health equity

Agenda item tabled due to time constraints.

B. Update on formalizing the reporting relationship between the Board of Health and the Health & Human Services Committee

Agenda item tabled due to time constraints.

C. Policy updates from the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and WI Department of Health Services

- i. Legislative Action Alert regarding Assembly GOP legislative proposal to limit local health officers' authority to manage public health risks on a case-by-case basis
- ii. Extension of the Governor's Emergency Order #1 Requiring Face Coverings and support for Health Officer's advisement to wear face masks
- iii. COVID-19 response funding

iv. Other

Joan Theurer shared that the State is still under emergency orders from the governor, requiring face coverings. The current order is in effect until January 19, 2021, and at this point there is not information available as to whether or not the order would be reissued. Joan indicated she is recommending a Health Officer Advisory regarding face coverings be issued, if the order expires. The Board of health is being asked to support an advisory.

Motion by Dean Danner to direct the release of an advisory if the State mask mandate does expire, based upon science and medical information. Seconded by Corrie Norrbom. Motion to amend by Dean Danner to include a review of the advisory after six months. Seconded by Corrie Norrbom. The amended motion was approved.

Joan Theurer shared an update on the State Assembly bill relating to health officer's authority to manage public health risks, prohibiting employers from requiring employee vaccinations, prohibiting health officer's authority to require vaccinations. The state Senate is considering a compromise bill based on what was agreed upon with the governor.

John Robinson indicated remaining agenda items would be carried over to the next Board of Health meeting.

John Robinson adjourned the meeting at 9:47 a.m.

Respectfully submitted,

Lori Shepherd, Secretary
Chris Weisgram, Recorder



**HEALTH AND HUMAN SERVICES COMMITTEE &
MARATHON COUNTY BOARD OF HEALTH (JOINT MEETING)
MEETING MINUTES**

Date & Time of Meeting: **Tuesday, January 12, 2021 at 7:45 a.m.**

Meeting Location: **Zoom Meeting/1000 Lake View Dr. Suite 100 Wausau, Wausau WI**

	Present	Absent
Tim Buttke, Chair	Z	
Michelle Van Krey, Vice Chair	Z	
Kelley Gabor	Z	
Dennis Gonnering		X
William Harris	Z	
Donna Krause		X
Tom Seubert	Z	

Board of Health Committee Members: John Robinson, Chair; Craig McEwen, Vice-Chair; Lori Shepherd, Secretary; Sandi Cihlar; Dean Danner; Kue Her; Tiffany Lee; Corrie Norrbom

Also Present Via Web or Phone: Kurt Gibbs, Lance Leonhard, Jason Hake, Joan Theurer, Laura Scudiere, Judy Burrows, Katie Rosenberg, Frederick Prehn, and Toshia Ranallo

1. Call Meeting to Order

Chair Tim Buttke called the meeting to order at 7:45 a.m.

2. Public Comment (15 minute limit) – Dr. Frederick Prehn expressed his concern of delays in regards to distributing COVID vaccinations throughout Marathon County.

Chair Buttke read a letter of support from Supervisor Jennifer Bizzoto, District 2. She supports both the State’s and County’s role in developing the vaccination plan.

3. Policy Issues for Discussion and Possible Action:

A. Health care system and surrounding counties efforts to have a coordinated response to testing and vaccinations

1. Role of Marathon County Health Department in Phase 1A, 1B, 1C

Discussion:

Joan Theurer addressed the public comments and understands the frustration. Today’s meeting is to focus on the county’s response and moving forward in the phases as efficiently and effectively as possible.

She gave an overview of the vaccine distribution and explained who makes the decisions, how the decisions are made, and who is currently being vaccinated in Wisconsin and Marathon County. This information is to assist the committees into policy discussion to help define the Marathon County Health Department’s engagements and roles. The full presentation can be accessed in the [packet located here](#).

The vaccine is to be rolled out in the following series of phases:

- Phase 1 A: Health care workers and long-term care facilities
- Phase 1 B: (Currently under development) CDC recommending age 75+ and frontline essential workers (and as of 1/11/2021 the WI Dept. of Health Services moved to add law enforcement and fire personnel to this phase, even though the WI States Disaster Medical Advisory has not made this recommendation.)
- Phase 1 C: CDC recommending age 65-74, age 16-64 with high risk medical conditions, other essential workers
- Phase 2: General Population

Theurer indicated this could take several months because it depends on vaccine availability. Two manufacturers made vaccines available in WI on 12/14/2020 and 12/20/2020. Three things to keep in mind: 1. People who want it; 2. adequate supply, (which is being balanced by supply and demand); and 3. an adequate delivery system.

The [Marathon County Health Department Website](#) offers an abundance of information which outlines the Phases, defines who is eligible, and how to reach out and make appointments. Marshfield Clinic Health Systems is actively registering and vaccinating, Aspirus will be opening up their registration on Friday, January 15th, and Trigs Pharmacy has been identified as another local provider.

There was a lengthy discussion on concerns for communication distribution to reach the general public, including our Hispanic & Hmong population, rural communities (who have no broadband access) and the non-tech savvy community. Strategies identified included: More exposure on television (the Noon Show), radio interviews, newspapers, press releases, social media, Amber Alert type of notifications, cell phone apps, our website, and County Board Supervisors talking with their constituents. Boots on the ground may have to be an additional method to distribute information to the vulnerable population.

Press releases are difficult because the information may only be valid for about 12 hours. Information changes frequently and it can be a disservice to those who don't get it until a later time.

Supervisor Robinson indicated that Administration has expressed the willingness to make investments to satisfy communication goals. Administrator Leonhard will investigate a push button alert system through the county's EverBridge Technology Program.

Chair Gibbs acknowledged the communication barrier. He reiterated there hasn't been a clear definition from the state, and it is causing uncertainty. The communication plan needs to be clear, concise, and accurate. Our local population is receiving national news which can also be conflicting with the state causing more confusion and frustration. Gibbs commended the Health Department for reporting accurate information on the Marathon County website.

Supervisor Harris suggested incorporating vaccinations into the WIPPS study/discussions.

Follow Through:

Robinson will coordinate a brainstorming session to develop a communication plan including the following: Identify communication gaps, communicate with health professionals (local, state, and federal), define a clear role for the county, and looking beyond Phases 1B and 1C and into Phase 2, the general population.

4. Operational Functions required by Statute, Ordinance, or Resolution: - None
5. Educational Presentations and Committee Discussion: - None
6. Announcements - None
7. Adjournment - Chair Buttke adjourned the meeting at 9:26 a.m.

Respectfully submitted by,
Toshia Ranallo

**Marathon County Health Department
2021-2022 Licensing Fee**

Background: In March of 2018, the Board of Health recommended the licensing program fees should cover indirect costs (supervision of the program and central overhead) in addition to direct costs (staff time, travel, training, supplies, equipment). To achieve this goal, fee increases were to be incremental, keeping in mind the impact on license operators.

The recommendation was in keeping with the intention of Marathon County Priority Based Budgeting, having programs achieve greater self-sufficiency when feasible.

Fee History: Table 1 provides tax levy and fee increase history from 2015-2020. Factors that impact program revenue from year to year include: 1) Number of licensed facilities; and 2) Type of licensed facilities. Factors that impact program costs from year to year include: 1) Number of FTE direct staff based on number/type of licensed facilities and program standards; 2) Health insurance enrollment and type; and 3) Staff turnover. In 2020, direct program costs were significantly lower than budgeted due to a shift in work among the Environmental Health Sanitarians from licensing to the COVID-19 response, while the fees collected remained steady. This resulted in a higher than projected recovery of indirect tax levy program costs.

Table 1: 2015-2020 Fee Increases, Tax Levy, Fees Covering Direct and Indirect Costs

	2015	2016	2017	2018	2019	2020
Fee Increase	1%	0%	0%	3%	5%	3%
Tax Levy that Covered Direct Program Costs	\$14,720	\$0	\$0	\$0	\$0	\$0
Fees that Covered Indirect Program Costs	\$0	\$47,497	\$16,263	\$26,204	\$41,449	\$116,742

Recommendation: In building the 2021 budget, the goal was to continue to capture revenue to offset indirect program costs. The budget was built to capture 10% of the Program Directors 26% supervision costs allocated to the licensing program. Costs associated with program and fiscal oversight on the part of the Health Officer and Director of Operations was not included. In addition, indirect program costs related to payroll, maintenance of the website, reception, facilities, etc. was not factored into the budget.

The 2021 budget built a 3% proposed fee increase (\$465,000 for revenue), based on the following assumptions:

- Environmental Health Sanitarians would be carrying out licensing program services at their FTE allocation.
- The 3% was applied to anticipated revenue at the close of 2020 of \$451,500. This was based on fees collected as of August 15, 2020.
- Estimated tax levy support would be \$34,347.

The licensing revenue at the close of 2020 was \$461,819. Expenses associated with licensing personnel for 2021 is estimated to be 50,000 lower than budgeted due to the department's COVID-19 response. In light of this, it is recommended no fee increase for the 2021-2022 license year.

**2022-2025 Marathon County Community Health Improvement Plan
Roles and Timeline – Updated February 1, 2021**

Background: Wisconsin Administrative Rule DHS 140.04 requires local health departments to “conduct a community health-assessment resulting in a community health improvement plan at least every 5 years”. Since 2011, the LIFE Report has been used as our community health assessment; having the Board of Health, representatives from Healthy Marathon County, and the Health Officer identify community health priorities. Based on selected health priorities, community stakeholders participate in the development of the community health improvement plan.

Purpose: The 2019-2021 LIFE Report was released in January 2020. The process for developing the 2021-2024 Community Health Improvement Plan that began in March of 2020 was suspended due to the COVID-19 pandemic, delaying the process and resulting plans by one year.

The Results Based Accountability framework is being used for the State of Wisconsin Health Plan. Marathon County is one of seven, year 2, State of WI Department of Health Services pilot health departments applying the principles of Results Based Accountability to shape community health improvement plans and processes.

Roles/Tasks	Timeline
<p>The Board of Health and Healthy Marathon County representatives will:</p> <ul style="list-style-type: none"> - <i>COMPLETED in 2020:</i> Review the 2019-2021 LIFE Report indicators, State WI Health Priorities, area health care organization health priorities, and Health Department’s staff health priorities - <i>COMPLETED in 2020:</i> Adopt the proposed criteria for selecting community health priorities - <i>COMPLETED in 2020:</i> Select priorities. Priorities selected were: Mental Health, Alcohol Misuse and Abuse, Adverse Childhood Experiences, Discrimination, and Other Drug Misuse and Abuse. Recommendations for further refinement included: <ul style="list-style-type: none"> o Mental Health to include Adverse Childhood Experiences o Combine priorities regarding Alcohol and Other Drugs to Alcohol and Other Drug Misuse and Abuse o Narrow Discrimination to Health Equity - Determine results for each population health priority - Select indicators for each result 	<p>Board of Health meetings (45 minutes):</p> <p>March 3, 2020 – Selected priorities</p> <p>April 13, 2021 – Confirm and define priorities</p> <p>May 11, 2021 – Turning priorities into results</p> <p>June 8, 2021 – Assign indicators to measure</p> <p>July 13, 2021 (Hold as needed)</p>
<p>Healthy Marathon County Alliance members with an invitation to the Board of Health will:</p> <ul style="list-style-type: none"> - Identify partners who can help 	<p>June/July 2021 – Identify partners</p>

Community partners and stakeholders will:
- Identify strategies to 'turn the curve'

September – November
2021

Board of Health with Healthy Marathon County will:
- Adopt the plan
- Present plan to the Health & Human Services Committee
and/or Marathon County Board of Supervisors

January – February 2022

Marathon County Health Department COVID-19 Response Role

Community Containment and Mitigation	Disease Investigation and Contact Tracing	Testing and Vaccinations	Surveillance
<ul style="list-style-type: none"> • Maintain isolation & quarantine sites • Inform the public, businesses, and other entities of actions they can take to control the spread of COVID-19 • Monitor state legislation and policy at the county, municipal and school district level 	<ul style="list-style-type: none"> • Follow-up with individuals diagnosed with COVID to identify close contacts, assess unmet needs, and reinforce isolation • Notify close contacts to assess unmet needs and reinforce quarantine (exception schools and employers do notification) • Follow-up on facility outbreaks 	<ul style="list-style-type: none"> • Facilitate planning to meet testing needs with health care systems and UW • Facilitate planning for vaccination with health care providers • Fill gaps by providing/sharing resources as a vaccine provider 	<ul style="list-style-type: none"> • Submit required information and data to the WI Department of Health Services • Monitor the impact of the virus, testing, and vaccinations on daily basis

Inform and Engage the Public

- Respond to calls and emails from the general public, businesses, schools, other entities
- Outreach to vulnerable populations (e.g., age, culture, language, income, access to technology/transportation)
- Provide accurate, timely information via Marathon County Health Department COVID-19 website, FaceBook, Everbridge
- Issue press releases, conduct interviews, and consult with media; facilitate communication among Public Information Officers (PIOs)
- Provide weekly update to the general public and sectors (schools, MCDEVCO, health care systems, Healthy Marathon County, Board of Health, County Board, Legislators)
- Participate in the North Central Wisconsin Health Emergency Readiness Coalition (NCW-HERC) response meetings

Carry out Best Practices

- Stay abreast of guidance and recommendations from the CDC and WI Department of Health Services
- Adjust processes and plans to improve efficiencies and effectiveness of response
- Participate in regional and state workgroups to develop plans, align efforts, and further best practices

Marathon County Health Department Role in COVID-19 Vaccination

Goal: To get vaccines into arms in the quickest and most efficient manner.

Facilitate the planning of the vaccine roll-out across Marathon County with vaccination partners:

- Encourage eligible vaccine providers to enroll as a registered COVID-19 vaccination provider
- Stay informed on who is a vaccine provider, their capacity, populations served, and challenges
- Keep vaccine providers informed of current eligibility and anticipated next phases
- Determine the number of people eligible for each phase (e.g., adults 65+, school staff, etc.) and communicate to vaccine providers to assist them in planning
- Inform and match groups eligible to receive vaccine of vaccination providers
- Identify and address gaps in the vaccination of eligible populations

Provide accurate and timely information so residents can make informed, confident decisions regarding vaccination:

- Keep the public informed of who is eligible and how to get a vaccine
- Ensure an aligned and unified message of the safety and effectiveness of vaccines
- Serve as the spokesperson on COVID-19 vaccination efforts in the county, being aware of health care systems communications to the media
- Outreach to agencies/organizations to push out information on current eligible groups (e.g., ADRC, schools)
- Identify and utilize trusted messengers to remove perceived and actual barriers (e.g., hesitancy, language, cultural health practices, costs, transportation)
- Respond to inquiries from the public and community organizations via email, calls, and Facebook

Fill gaps by providing/sharing resources as a vaccine provider when:

- Matches between eligible populations and vaccine providers do not exist and are unable to be developed (Refer to Diagram 1)
- Vaccines are more available than existing providers, needing additional community based clinics to get vaccine in arms (Refer to Diagram 2)
- Partners are looking to share resources to expand community based clinic options

Diagram 1. Filling Gaps of Populations

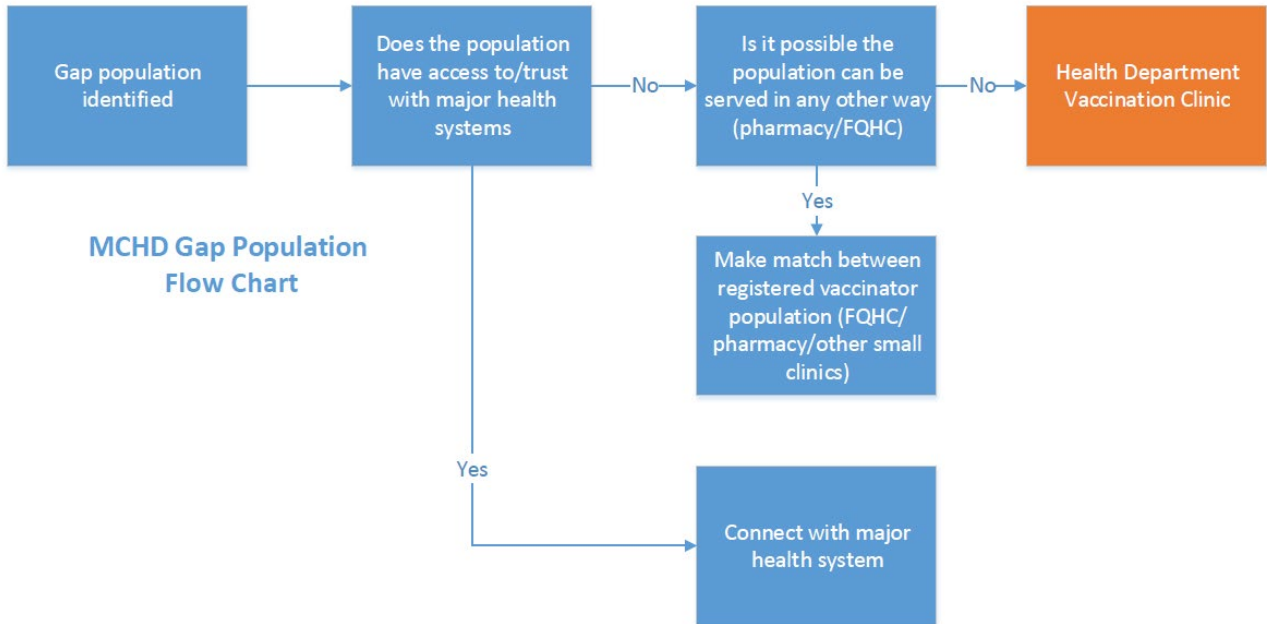
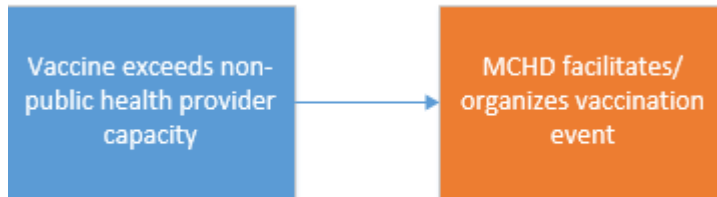


Diagram 2. Increase Vaccine Availability



PROJECT DESCRIPTION FORM



Complete this form for each proposed project.
E-mail completed forms to gavin@cowi.org by December 1, 2020

Project Title	Marathon County Start Right Program: A Smart Investment for Future Generations	
Project Sponsor Authorizes project, provides resources, removes obstacles	<i>Name</i>	Joan Theurer
	<i>Email address</i>	Joan.theurer@co.marathon.wi.us
	<i>Phone number</i>	715-261-1903
	<i>Communication preference</i>	Email or Phone (time sensitive)
Project Lead Main point of contact for faculty and students.	<i>Name</i>	Joan Theurer
	<i>Email address</i>	Joan.theurer@co.marathon.wi.us
	<i>Phone number</i>	715-261-1903
	<i>Communication preference</i>	Email or Phone (time sensitive)
Oversight Committee Who else from the community or your local government should be involved?	<i>Name</i>	Marathon County Board of Health Marathon County Health & Human Services Committee
	<i>Meeting schedule</i>	Marathon County Board of Health 2 nd Tuesday of each month at 7:45 AM Marathon County Health & Human Services Committee 1 st Wednesday of each month at 4:00 PM
Project Description What questions need answering? What goals need to be achieved? Why do this now? What has already been tried?	The Start Right Program began as a pilot in Athens in 1994, becoming a county-wide service in 1999. Marathon County has been seen as pioneer for home visiting, being one of ten counties selected by the State of Wisconsin Department of Health Services to pilot the Prevention of Child Abuse and Neglect (POCAN) grant from 1999 to 2010. The Start Right Program has two major program components: Start Right First Steps Prenatal Care Coordination that includes postpartum services for high risk births not served prenatally; and Start Right Step by Step Home Visiting.	

In 2007-2008, a comprehensive evaluation and redesign of the Start Right Program occurred to ensure alignment with state and national best practices and benchmarks. Prior to this, Start Right First Steps Prenatal Care Coordination was part of a statewide research study published in 2010. In addition, an evaluation study was completed in 2003 among the ten pilot counties participating in the Prevention of Child Abuse and Neglect (POCAN) state grant, which included Start Right Step by Step Home Visiting. The Step by Step Home Visiting program is in the process of being accredited by Healthy Families of American with a site visit scheduled for the spring of 2021.

For 2021, the county's tax levy investment in the Start Right program is estimated at \$1,138,113 of the program's total budget of \$1,606,183. Since 1994, Marathon County Health Department contracts with Children's Service Society of WI to deliver the home visiting services program component. Of the \$1,138,113 tax levy, \$448,113 is allocated to Start Right First Steps Prenatal Care Coordination and postpartum services with the balance of \$690,000 supporting the Start Right Step by Step Home Visiting and Family Resource Center services.

Issues: During the 2020 budget process in the fall of 2019, a number of policy issues were raised regarding the Start Right Program that included:

- Marathon County Government with finite tax levy is tasked with determining how to fund competing program priorities; Start Right is not a mandated county service.
- Marathon County Board of Supervisors have a varied level of understanding as to the value of investing in the Start Right Program and there does not appear to be consensus around what results would be meaningful.
- Marathon County Board of Supervisors, the Marathon County Board of Health and the Start Right program staff do not have a common language for measuring and communicating results.

In the winter of 2020, a program assessment plan was developed with the intended goals. The plan was developed to:

1. Review state and national best practices known to support at women for poor birth outcome and comprehensive home visiting services for at risk families in relationship to the Start Right program component services.
2. Review the Start Right program services design and outcome data in relationship to state and national studies.
3. Review the Start Right program services outcomes in relationship to state and national benchmarks for Medicaid Prenatal Care Coordination and Comprehensive Home Visiting Programs.
4. Determine the benefit of past and continued investment of tax levy in Start Right program services.

Initial work began during the winter of 2021 to realign program outputs and outcomes into a Results Based Accountability framework. Plan products were not completed due to the Marathon County Health Department redirecting resources to respond to the COVID-19 pandemic.

<p>Final Deliverable (s)</p> <p>What should students produce? Report? Video? Spreadsheet? Presentation?</p>	<p>Written report along with a presentation (could be video).</p>
<p>Project Implementation</p> <p>What would successful implementation of this project look like in the community?</p>	<p>Primary objective for the project is to produce a report that speaks to the return of tax levy investments for the Start Right program by service component; specifically the short-term and long-term return on investments. Secondary objectives include:</p> <ol style="list-style-type: none"> 1. Develop a common language among Marathon County policy makers for measuring and communicating the Start Right Program results. 2. Ensure the Start Right Program is keeping with national and state best practices for Medicaid Prenatal Care Coordination and Comprehensive Home Visiting programs. 3. Ensure the Start Right program’s design and program performance measures are aligned with state studies on the effectiveness of Medicaid Prenatal Care Coordination and Home Visiting programs. 4. Ensure the Start Right program performance measures are aligned in relationship to state and national benchmarks.
<p>Project Budget</p> <p>How much could the community allocate to project implementation?</p>	<p>Marathon County Health Department and Children’s Service Society of WI (partner contracted organization) is has a long history of being committed to ensuring program services are keeping with best practices. Evaluation findings with resulting recommendations would be incorporated into a program quality improvement plan.</p>
<p>Data</p> <p>What information can the community share with students? What information should students collect?</p>	<p>Marathon County Health Department and Children’s Hospital of WI (partner contracted organization) has over 10 years of aggregate program output and outcome data. Non-aggregate data (that by client) could be made available based on the nature of the request and length of time for look back.</p> <p>Data and information to be collected under this project is to inform objectives outlined in the Project Implementation section. Refer to Marathon County Health Department 2018 Annual Report for example of data currently being reported on to the community and policy makers (pages 27-33)</p> <p>https://www.co.marathon.wi.us/Portals/0/Departments/HLD/Documents/MCHD_AnnualReport.pdf?ver=2019-06-19-144325-907</p>