

## Marathon County Board of Health

Tuesday, May 11, 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 April 13, 2021 Board of Health Meeting**
4. **Operational Functions Required by Statute, Ordinance, or Resolution**
  - A. None
5. **Policy Discussion and Possible Action**
  - A. Adopt proposed changes to the Marathon County Health Department Agent Programs Regulation
  - B. Update on Governor Evers 2021-23 Biennial Budget Proposal and determine public health priorities
    - i. Review WALHDAB & WPHA [budget](#) and [legislative priorities](#) documents
    - ii. Review WI Department of Health Services [Badger Bounceback Governor Evers' 2021-23 Biennial Budget](#)

- C. Policy updates from the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and WI Department of Health Services (standing agenda item)
  - i. Status of LRB-0792 limiting the use of emergency powers during emergencies
  - ii. Other
- D. Report from the Health & Human Services Committee May 5 meeting on policy issues impacting public health
  - i. Health Department Licensing Program Ordinance
  - ii. 2021 County Health Rankings
  - iii. Update on COVID Vaccine
- E. Update on the Start Right UniverCity program evaluation
- F. Update of COVID-19 response efforts at a local and state level
  - i. Overview of vaccination efforts in Marathon County
  - ii. Other
- 6. Educational Presentations/Outcome Monitoring Reports (as time permits)**
  - A. Update on Staffing
- 7. Announcements**
- 8. Policy Discussion and Possible Action (resume 8:30 AM)**
  - A. Development of the 2022-2025 Community Health Priorities
- 9. Next Meeting Date & Time, Location, Future Agenda Items:**
  - A. Confirm June 8, 2021 meeting date and determine agenda topics
    - i. Healthy Marathon County to join for the second half of the meeting to further the development of the 2022-2025 Community Health Priorities
- 10. 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](mailto:infomarathon@mail.co.marathon.wi.us) one business day before the meeting.*

**MARATHON COUNTY BOARD OF HEALTH**  
**Meeting Minutes**  
April 13, 2021

Present (Via Zoom): Sandi Cihlar, John Robinson, Craig McEwen, Dean Danner, Kue Her, Tim Buttke, Corrie Norrbom

Healthy Marathon County Alliance (Via Zoom): Debi Traeder, Ciara Schultz, Jennifer Smith, Brooke Davis, Jeff Sargent, Tara Draeger, Erin Wells, JoAnna Bernklau, Katie Dively,

MCHD Staff: Chris Weisgram, Dale Grosskurth, Joan Theurer, Laura Scudiere, Judy Burrows, Melissa Moore, Eileen Eckardt, Aaron Ruff, Hannah Schommer, Jenna Flynn

Others Present: Tim Buttke

**1. Call to Order**

John Robinson called the meeting to order at 7:46 a.m.

**2. Public Comment Period**

None

**3. Approval of the Minutes of the March 9, 2021 Board of Health Meeting**

**Motion to approve the March 9, 2021 meeting minutes made by Dean Danner. Seconded by Kue Her. Motion approved.**

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

A. None

**5. Policy Discussion and Possible Action**

- A. Update on Governor Evers 2021-23 Biennial Budget Proposal
  - i. Determine public health priorities based on the *Governor Evers 2021-23 Biennial Budget Proposal Initial Analysis for WALHDAB & WPHA* document
  - ii. Update on priorities being discussed by Marathon County Standing Committees

Joan Theurer asked if there were any specific areas the Board of Health would like more information on the proposed State budget.

John Robinson shared that County Board Members were asked to look at how the Governor's budget priorities would affect citizens in the County.

Discussion on how Medicaid expansion would free up other general funds to cover program costs in several areas of need. The Board asked Joan Theurer to see if county specific information could be made available in terms of the impact of Medicaid expansion.

John Robinson asked if there are other issues related to the budget proposal that members want to weigh in on. Discussion will continue at the May meeting.

- B. Policy updates from the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and WI Department of Health Services (standing agenda item)
  - i. Overview of LRB-0792 limiting the use of emergency powers during emergencies
  - ii. Other

Joan Theurer provided an overview of the analysis of LRB-0792, which proposes limiting the use of emergency powers during emergencies, specifically prohibiting a health officer's ability to close a business, unless action taken is uniform for all businesses. In addition, LRB-0792 outlines requirements for a local health officer to order the confinement of an individual who has or is suspected of having a communicable disease, including a requirement to petition the court if confinement is longer than 72 hours. The proposed language is keeping with current state statutes for the confinement due to tuberculosis. Current state statutes allows public health officer to confine individuals to their homes through isolation or quarantine to control the spread of disease.

**Dean Danner motioned to oppose the proposed legislation contained in LRB-0792. Seconded by Corrie Norrbom. Motion approved.**

John Robinson will discuss with Tim Buttke and Lance Leonhard about how to move this forward to the Health and Human Services Committee.

- C. Update of COVID-19 response efforts at a local and state level
  - i. Overview of vaccination efforts in Marathon County
  - ii. Other

Judy Burrows provided an update on work being done in the community, including the H2N Collaborative group providing outreach to Hispanic and Hmong communities. Work continues to look at how to connect with vulnerable populations in the County.

Discussion on what percentage of minority populations have received vaccine, and how demographic data is being collected for these groups of the population.

Discussion on status of variants of the COVID-19 virus that are present in Marathon County.

- D. Report from the Health & Human Services Committee March 31, 2021 meeting on policy issues impacting public health

Tim Buttke provided an update on recent activity at the Health & Human Services Committee.

- Potential grant opportunity to serve transient populations in the County
- NCHC building projects update and strategic goals updates
- Reviewed County's strategic plan as they relate to the committee

- E. Update on the Start Right UniverCity program evaluation

Joan Theurer shared a retired faculty member was identified who specialized in evaluation of program services, and clarification questions have been responded to. Within the next week or two, it should be known if the individual will be interested in taking on the review of the Start Right program.

**6. Educational Presentations/Outcome Monitoring Reports (as time permits)**

A. Highlights from the 2021 County Health Rankings

Joan Theurer shared an overview of 2021 County Health Rankings, pointing out strengths and opportunities for improvement. Joan Theurer also walked through specific areas that would be addressed by the new health priorities for 2022-2025.

B. Update on Staffing

Joan Theurer shared Isabel Mandli who was offered a public health nursing position, was not able to accept the role, and will continue to work as a casual nurse. Recruitment for that position continues. Tammy Borchardt, public health nurse has submitted her resignation.

**7. Announcements**

None

**8. Policy Discussion and Possible Action (resume 8:30 AM)**

A. Development of the 2022-2025 Community Health Priorities

Amanda Ostrowski facilitated discussion with members of the Board of Health and Healthy Marathon County for clarification of definitions for the 2022-2025 health priorities: Substance Misuse, Mental Health, and Health Equity.

Discussion on how work continues to be done to address current health priorities, however in a different format. The effect of the COVID-19 pandemic has been to further amplify the needs in the community.

Participants completed a rank ordering of three definition options for each identified health priority. Amanda Ostrowski shared the purpose of selecting a definition was to create boundaries for defining local conditions which will serve as Marathon County's definition. The majority of participants selected the following definitions as a place to begin:

Health Equity – Everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care. (Source: Robert Wood Johnson Foundation:

<https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html>)

Mental Health – Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. (Source: World Health Organization:

[https://www.who.int/mental\\_health/media/investing\\_mnh.pdf](https://www.who.int/mental_health/media/investing_mnh.pdf))

Substance Misuse – Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home. The great majority of substance-related health and social problems occur among those who are not addicted. (Source: SAMHSA: Mental Health and Substance Use Disorders, National Institutes of Health)

Amanda shared the Community Health Improvement team will begin taking the definitions and incorporating them into results based accountability framework. Next steps include: 1) creating a local, Marathon County definition of the condition of well-being, population, and geographic location for each health priority; and 2) selecting indicators to measure success once the local definition has been created.

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

- A. Confirm May 11, 2021 meeting date and determine agenda topics
  - i. Healthy Marathon County to join for the second half of the meeting to further the development of the 2022-2025 Community Health Priorities

**10. Adjourn**

**Motion to adjourn by Craig McEwen. Seconded by Kue Her. The meeting adjourned at 9:23 a.m.**

Respectfully submitted,

Lori Shepherd, Secretary  
Chris Weisgram, Recorder

**Health Officer Notes  
May 2021**

To facilitate diverse perspectives, consider the following questions during the policy discussion.

- Who benefits from or will be burdened by the proposal?
- What are the strategies for mitigation unintended consequences?

**Policy Discussion and Possible Action**

**A. Adopt proposed changes to the Marathon County Health Department Agent Programs Regulation**

The Department of Agriculture, Trade, and Consumer Protection updated Administrative Code ATCP 75, “Retail Food Establishments”. Therefore, the Marathon County Health Department Agent Programs Regulation has been updated to adopt changes. Enclosed, find two documents:

- Marathon County Health Department Agent Programs Regulation Changes, providing an overview proposed changes, and
- Marathon County Agent Programs Regulations, tracking proposed changes in the regulation.

**B. Update on Governor Evers 2021-23 Biennial Budget Proposal and determine public health priorities**

- I. Review WALHDAB & WPHA [budget](#) and [legislative priorities documents](#)
- II. Review WI Department of Health Services [Badger Bounceback Governor Evers’ 2021-23 Biennial Budget](#)

The Board of Health will determine public health priorities based on WALHDAB & WPHA budget and legislative priorities documents, the WI Department of Health Services overview of key 2021-2023 biennial budget items to advance the health of Wisconsinites, along with priorities for Marathon County. Enclosed, find documents for review.

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

- I. Status of LRB-0792 limiting the use of emergency powers during emergencies
- II. Other

Joan Theurer, Health Officer and Board of Health members will share any policy updates not covered under the Governor Evers 2021-23 Biennial Budget proposal.

**D. Report from the Health & Human Services Committee May 5 meeting on policy issues impacting public health**

- I. Health Department Licensing Program Ordinance
- II. 2021 County Health Rankings
- III. Update on COVID Vaccine

A report will be given by Board of Health members present, Chair Tim Buttke, and/or Joan Theurer, Health Officer on actions taken at the May 5 meeting.

#### **E. Update on the Start Right UniverCity program evaluation**

Joan Theurer, Health Officer will provide an update on the Start Right program evaluation being done through UniverCity, UW System.

#### **F. Update of COVID-19 response efforts at a local and state level**

- I. Overview of vaccination efforts in Marathon County
- II. Other

An update of vaccination efforts in Marathon County including efforts to reach vulnerable and hesitant vaccine populations will be provided by Joan Theurer, Health Officer and Judy Burrows, Program Director for Community Health Improvement. Enclosed, find demographic data on those vaccinated.

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

##### **A. Update on Staffing**

Laura Scudiere, MPH, Public Health Educator has accepted the Program Director – Community Health Improvement position and will begin on May 31, 2021. Recruitment to fill the public health educator position is underway.

#### **Announcements**

##### **Policy Discussion and Possible Action (resume 8:30 AM)**

##### **A. Development of the 2022-2025 Community Health Priorities**

Joan Theurer, Health Officer will provide an overview for the outcome of the May 11, 2021 meeting to determine on how best to move forward the development of the 2022-2025 Community Health Improvement Plan. The meeting will be facilitated by Amanda Ostrowski, Public Health Educator. Enclosed, find Results-Based Accountability and Results-Based Accountability and Community Health Improvement Plan documents.

##### **Next Meeting Date & Time, Location, Future Agenda Items:**

##### **A. Confirm June 8, 2021 meeting date and determine agenda topics**

- I. Healthy Marathon County to join for the second half of the meeting to further the development of the 2022-2025 Community Health Priorities

Based on the Community Health Priorities discussion, Joan Theurer, Health Officer will determine what next steps look like for the development of the 2022-2025 Community Health Improvement Plan.



**Marathon County Health Department Agent Programs Regulation Changes  
May 3, 2021**

**Background:** The Department of Agriculture, Trade, and Consumer Protection updated Administrative Code (DATCP) ATCP 75, “Retail Food Establishments”. This revision changed the designations for restaurants and retail food facilities and added licensing categories for those individuals operating a food stand at a temporary event location such as farmers market, fair, or community event. These changes need to be incorporated into the Marathon County Health Department Agent Programs Regulation. The following provides a summary of proposed changes to the Marathon County Health Department Agent Programs Regulation.

1. Facility Naming Changes: Restaurant and Retail Food designations have changed and included in the Marathon County Health Department Agent Programs Regulation definition of Retail Food Establishment as follows. Refer to page 4, item [16] of the draft Marathon County Health Department Agent Programs Regulation.

Old designation	New designation	
Restaurant	Retail Food Establishment – Serving Meals	
Retail Food: groceries, convenience stores, bakeries	Retail Food Establishment – Not Serving Meals	
Temporary Restaurant	See below the new designation categories under Transient Retail Food Establishment TCS (Time and Temperature Controlled for Safety)	
Mobile Retail operating at a Temporary Event (Farmers Market, fair, community event)	Transient Retail Food Establishments – TCS, Non TCS, or Prepackaged	Examples of Food
	Transient Retail Food Establishment – TCS (Time and Temperature Controlled for Safety)	Hot dogs, burgers, egg rolls, pizza, cheese curds, and ice cream
	Transient Retail Food Establishment – Non-TCS (Time and Temperature Controlled for Safety)	Non-potentially hazardous baked goods, slushies, cookies, pastry, donuts, kettle corn
	Transient Retail Food Establishment – Prepackaged, TCS (Time and Temperature Controlled for Safety) food only	Prepackaged, typically individual-sized foods needing refrigeration: milk, ice cream sandwiches
Mobile Retail or Restaurant Serving Meals or Not Serving Meals	No change	Food trucks

**“Transient retail food establishment”** means a temporary retail food establishment that operates at a fixed location in conjunction with a special event and sells or serves food for a period of no more than 14

*consecutive days or in conjunction with an occasional sales promotion. The updated ATCP 75 introduced 3 categories of Transient Retail Food Establishment facilities based on the foods served and we need to set fees for these categories.*

2. The exemptions for requiring a Retail Food Establishment have been expanded and clarified. The draft Marathon County Health Department Agent Programs Regulation has been changed to reference that exemptions exist and cites the ATCP 75 code reference. Refer to Page 9, item [1] (b) of the draft Marathon County Health Department Agent Programs Regulation.
3. The Department of Agriculture, Trade and Consumer Protection (DATCP) no longer allows the transfers of permits for restaurants as had been allowed under the WI Department of Health Services prior to the transfer to DATCP in 2016. Refer to page 11, item [3] (b) of the draft Marathon County Health Department Agent Programs Regulation.
4. The Department of Agriculture, Trade, and Consumer Protection (DATCP) issued an Interpretive Memo on the Certified Food Protection Manager Certificate in March of 2021. The Memo specifies enforcement for Retail Food Establishments who open a new facility without having a Certified Food Protection Manager onsite or in the event the Certified Food Protection Manager leaves the facility and is not replaced. DATCP has a \$150.00 fee to be assessed if the Establishment does not provide proof of a Certified Food Protection Manager within 90 days. Language from the Memo is to be incorporated into the Agent programs regulation. Refer to pages 13-14, items (a) thru (g) of the draft Marathon County Health Department Agent Programs Regulation.
5. The following is proposed license fees for the new categories created under the Transient Retail Food Establishment.

<b>Examples of Food</b>	<b>Transient Retail Food Establishment Categories</b>	<b>DATCP Fee</b>	<b>Marathon County Health Department Comparable Food License Fee</b>
Hot dogs, burgers, egg rolls, pizza, cheese curds, and ice cream	TCS Food	\$170.00	\$140, this was the fee for Temporary Restaurants serving meals
Non-potentially hazardous baked goods, slushies, cookies, pastry, donuts, kettle corn	Non-TCS food	\$75.00	No current fee, propose \$68.00 as inspection time is comparable to Prepackaged, TCS food only
Prepackaged, typically individual-sized foods needing refrigeration: Milk, ice cream sandwiches	Prepackaged, TCS food only	\$45.00	\$68.00, this was the fee used in the past for a Mobile Retail facility without any food processing, used when food is prepackaged and needed TCS protection

Marathon County Health Department Policy		
Policy Name	Marathon County Agent Programs Regulation	
Relevant Policy(s)/Procedure(s)	Marathon County Health Department Food Facility Enforcement Policy Marathon County Health Department Food Safety Inspection Procedures Marathon County Health Department Licensing Permit Renewal Procedure Marathon County Health Department Public Pool and Water Attraction Enforcement and Re-Inspection Policy	
Applicable To	EHS Program Staff Director of Environmental Health & Safety Health Officer	
Location	<del>O:\Policies and Procedures – Final\Licensing\Marathon County Agent Programs Regulation 2020-02-04.pdf</del>	
Effective Date	April 1982	
Date of Revision	July 7, 2016, December 6, 2016; February 8, 2017; February 5, 2018; March 5, 2019; February 4, 2020; <u>May 11, 2021</u>	
Legal and Other References	State Statutes: 66, 101, 97, 251, 125 Wisconsin Administrative Code Chapters: ATCP 74, ATCP 75 and Wisconsin Food Code, ATCP 72, ATCP 73, ATCP 76, ATCP 78, ATCP 79, SPS 390, SPS 221, and SPS 326	
Authorizing Signatures		
	Dale Grosskurth, Director of Environmental Health & Safety	Date
	Joan Theurer, Health Officer	Date

**Purpose Statement**

The purpose of this regulation is to protect the public health, safety and general welfare, and to improve and maintain the public health for the citizens and communities in the County of Marathon through agent program activities.

**Policy**

Whereas the Wisconsin Departments of Safety and Professional Services and Agriculture, Trade, and Consumer Protection, under Wisconsin State Statute Sections 101.935, 97.41, 97.615, 97.67 and respectfully, grant authority to the Board of Health of the County of Marathon as their agent and to adopt rules and regulations promulgated by state statute and administrative rule and, in addition, adopt their own regulations which may be more strict than said statute, or administrative rules; and

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**1** Marathon County Agent Programs Regulation  
Effective Date: April 1982  
Revision Date: ~~February 4, 2020~~Month, Day, Year

Whereas Wisconsin State Statute Sections 251.04, and provides that the Board of Health of the County of Marathon shall have authority to adopt regulations to protect and improve public health; and

Whereas Wisconsin State Statute Sections 97.30, 97.41, 97.615, 251.04, and 254.51 provide that such boards shall take such measures and make such rules and regulations as shall be most effectual for the preservation of public health; and

Whereas Wisconsin State Statute Section 125.68(5) requires all "Class B" and "Class C" taverns to conform to the same sanitation requirements governing ~~retail food establishment~~ ~~restaurant~~ sanitation; and

**Commented [DG1]:** Under Admin. Code ATCP 75, restaurants have been redefined to be Retail Food Establishments – Serving Meals

Whereas the purpose of this regulation is to protect the public health, safety and general welfare, and to improve and maintain the public health for the citizens and communities in the County of Marathon; and

Whereas it is the considered opinion and judgment of the Board of Health of Marathon County that it is in the public interest and necessary for public health to provide the regulations herein contained; and

Therefore the Marathon County Board of Health does ordain the following regulations:

#### 100.1 - Scope of Regulation

- [1] Applicability - The provisions of this regulation apply to all areas of the County.

#### 100.2 - General Provisions

- [1] This regulation shall be referred to as the "Marathon County Public Health Agent Programs Regulation".
- [2] The effective date of this regulation shall be after adoption and promulgation by the Marathon County Board of Health and publication date as required by State Statute.
- [3] Administration and the interpretation of this regulation shall be by the Health Officer or designee. The Health Officer shall have the authority to insure compliance with the intent and purpose of this regulation.
- [4] The fees for permits shall be established by the Marathon County Board of Health to cover part or all of the cost of issuing permits, making investigations, inspections, sampling, providing education, training and technical assistance to establishments and facilities, plus the cost required to be paid to the state for each permit.

#### 100.3 - Definitions: In this regulation

- [1] "Automated System" means a commercially available system which continuously monitors disinfectant concentrations.
- [2] "County" means the County of Marathon.
- [3] "Department" means Marathon County Health Department.
- [4] "Employee" means any person working in a public facility or establishment.
- [5] "Extensive remodeling" means the construction or repair of an existing public facility or establishment that significantly alters the design or operation of the food service area. Extensive remodeling does not include redecorating, cosmetic refurbishing, or altering seating design or capacity.
- [6] "Human Health Hazard" means 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" Wisconsin State Statute 254.01(2)
- [7] "Health Officer" means the Health Officer of Marathon County, his or her designee or authorized agent. The Environmental Health Sanitarian and the Director of Environmental Health and Safety are considered designees.
- [8] "Immediate/Imminent Danger to Health" means a significant threat or danger to health that is considered to exist when there is evidence sufficient to show that a product, practice, circumstance, or event creates a situation that requires immediate correction or cessation of operation to prevent injury based on:
  - (a) The number of potential injuries; or
  - (b) The nature, severity, and duration of the anticipated injury. [DATCP 75 Appendix]
- [9] "Manufactured Home Community" means any plot or plots of ground upon which 3 or more manufactured homes that are occupied for dwelling or sleeping purposes are located. "Manufactured home community" does not include a farm where the occupants of the manufactured homes are the father, mother, son, daughter, brother or sister of the farm owner or operator or where the occupants of the manufactured homes work on the farm.
- [10] "Non-Automated System" means a system that is entirely under the control of the owner/operator and must be manually controlled to maintain required disinfectant levels.
- [11] "Person" means any individual, partnership, association, firm, company, corporation, or other legal authority and any municipality, town, and county; whether tenant, owner, lessee, licensee or the agent, heir or assignee of any of these.

- [12] "Preinspection" refers to an inspection of a Public Facility or Establishment to determine compliance with applicable regulations prior to issuing an operating permit.
- [13] "Public Facility or Establishment" refers to a retail food establishment ~~restaurant~~ (includes taverns subject to statute or administrative rules for permitting purposes as a ~~restaurant or~~ retail food establishment), grocery, convenience store, bakery, body art, hotels, motel, tourist rooming house, bed and breakfast, swimming pool, campground, recreational and educational campground, manufactured home community, and any facility or establishment used by the general public that requires a permit or license under this regulation, Wisconsin Administrative Code, or Wisconsin State Statute adopted by reference in this regulation.
- [14] "Regulation" means the Marathon County Public Health Agent Programs Regulation.
- [15] "Reinspection" means a follow-up inspection conducted on a specified date, to verify that an ordered remediation has occurred or corrected in compliance with this regulation {Refer to 100.8(3)(b)}.
- [16] "Retail food establishment" includes all of the following as defined in ATCP 75 Retail Food Establishments:
- (a) Retail food establishment—not serving meals
  - (b) Retail food establishment—serving meals
  - (c) Vending machine
  - (d) Micro market
  - (e) Mobile or transient retail food establishment – not serving meals
  - (f) Mobile or transient retail food establishment – serving meals
  - (g) Retail food establishment serving prepackaged meals as defined in sub.
- ~~"Temporary Order" means an enforcement action that lasts for 14 days and can be extended for an additional 14 days pursuant to sec. 66.0417, Wis. Stats. A Temporary Order may include but is not limited to:~~
- ~~(a) The immediate exclusion of an individual from employment;~~
  - ~~(b) The immediate closing of the facility or establishment concerned until, in the opinion of the Health Officer, no further immediate/imminent danger to health exists;~~
  - ~~(c) Restriction of employee(s) services to an area of the Public Facility or Establishment where there is no risk of disease transmission;~~
  - ~~(d) Adequate medical and laboratory examination of the employee(s).~~
- [17] "Revocation" means to officially cancel or invalidate a permit previously issued due to:

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- (a) Failure to comply with a Temporary Order;
- (b) Repeated violations that have resulted in more than one Temporary Order;
- (c) Interference with the Health Officer or designee in the performance of duties enforcing the provisions of the Marathon County Public Health Agent Programs Regulation.

[17] “Special Condition Inspection” means inspections or consultation activities not related to permitting responsibilities which are performed to provide information assessing compliance with sanitation, equipment, or licensing standards. Consultation inspections are advisory and not enforceable under this regulation.

[18] “Suspension” means a notice of Suspension is an enforcement action which extends a Temporary Order until a final decision is made by the Health Officer.

[19] “Tavern” means a business with a “Class B” or “Class C” license issued under authority of WI Statute 125, in which alcohol beverages are sold for consumption on the premises, and which is not subject to statute or administrative rules requiring ~~restaurant~~ retail food establishment ~~or retail food~~ permitting. Taverns can fall into two categories:

- a. Taverns that sell commercially prepared food items including but not limited to pickled eggs, pickles, cured meats, and prepackaged chips. Foods may sold in individual packing or from bulk.
- b. Taverns that sell only alcoholic and non-alcoholic beverages.

[20] “Temporary Order” means an enforcement action that lasts for 14 days and can be extended for an additional 14 days pursuant to sec. 66.0417, Wis. Stats. A Temporary Order may include but is not limited to:

Commented [DG2]: Moved into alphabetical order

- (a) The immediate exclusion of an individual from employment;
- (b) The immediate closing of the facility or establishment concerned until, in the opinion of the Health Officer, no further immediate/imminent danger to health exists;
- (c) Restriction of employee(s) services to an area of the Public Facility or Establishment where there is no risk of disease transmission;
- (d) Adequate medical and laboratory examination of the employee(s).

[20] “Unique” means pertaining to one specific Public Facility or Establishment only.

[21] Other Definitions will be found and are enumerated in the Wisconsin State Statutes and Administrative Codes referenced in this regulation and which are incorporated herein by specific references as if set forth in full.

100.4 - Conflict and Severability

- [1] *Conflict of provisions.* If the provisions of the different chapters of this Code conflict with or contravene each other, the provisions of each chapter shall prevail as to all matters and questions arising out of the subject matter of such chapter.
- [2] *Severability of code provisions.* If any section, subsection, clause or phrase of the Code is for any reason held to be invalid or unconstitutional by reason of any decision of any court of competent jurisdiction, such decision shall not affect the validity of any other section, subsection, sentence, clause or phrase or portion thereof. The Board hereby declares that it would have passed this Code and each section, subsection, sentence, clause, phrase or portion thereof, irrespective of the fact that any one or more sections, subsections, sentences, clauses, phrases or portions may be declared invalid or unconstitutional.

100.5 - Adoption and Provisions by Reference

- [1] Adoption by Reference: Except as provided in sub [2] below, this regulation adopts by reference Wisconsin Statute Sections 97.12, 97.30, 97.41, 97.615, SPS 463, and 66.0417 and Wisconsin Administrative Code Chapters, ATCP 74, ATCP 75, SPS 390, ATCP 72, ATCP 73, ATCP 76, ATCP 78, ATCP 79, SPS 221 and SPS 326, and any successor statutes or regulations as if fully set forth. Any and all amendments and/or revisions thereto are adopted and by reference made a part of this regulation as if fully set forth herein.
- [2] Exceptions:

Section ATCP 76.16 (3) WI Administrative Code is specifically modified by the Marathon County Board of Health as follows:

Pool Water Bacteriological Quality/Sampling: Samples of pool water shall be submitted by the owner/operator every two weeks at a minimum. Samples may be required on a more frequent basis for new facilities or to monitor bacteriological water quality.

100.6 - Application for Permits and Fees:

- [1] Applications for permits by Public Facilities or Establishments covered by this regulation shall be made upon such forms supplied and prescribed by the department. The department shall, within 30 calendar days of the receipt of a completed application, act upon the application, except for Retail Food Establishments. The department shall act upon a completed application for Retail Food Establishments within 15 calendar days from receipt of a completed application.



- [2] Prior to approval of an application for a permit, the department shall inspect the Public Facility or Establishment to determine compliance with the requirements of this regulation.
- [3] The fee for permits required by this regulation shall be due before the issuance of a permit. The renewal fee shall be postmarked on or before June 30 of each year. An additional \$50.00 fee shall be required whenever the renewal annual fee is not received or postmarked on or before June 30 of each year.
- [4] A preinspection fee for each new permit shall be collected at the time of application from the operator or new operator of a Public Facility or Establishment.
- [5] The preinspection fee shall be equal to the licensing permit for a new Public Facility or Establishment and for a new operator of an existing Public Facility or Establishment with extensive remodeling. The definition for Extensive Remodeling will be used in making the determination.
- [6] The preinspection fee shall be one half the licensing permit for a new operator of an existing Public Facility or Establishment without extensive remodeling. The definition for Extensive Remodeling will be used in making the determination.
- [7] A preinspection fee shall be collected when an existing Public Facility or Establishment upgrades from an Eating and Drinking Establishment to a ~~Restaurant~~Retail food establishment - serving meals permit and shall be based on the fee associated with the new licensing category.
- [8] For an existing Public Facility or Establishment without extensive remodeling and where there is an upgrade from one license category to a higher license category, only the difference between the license category fees will be collected. A pre-inspection fee is not required.
- [9] If the payment is by check or other draft drawn upon an account containing insufficient funds, the permit applicant shall pay the permit fee(s), late renewal fee charges, and any insufficient funds charges by cashier's check or other certified draft, money order, debit card, credit card, or cash, within 7 working days after receipt of notice from the department. The day on which notification occurs is day 0. If the permit applicant fails to pay all applicable fees, late renewal fees, and/or any insufficient funds charges within 7 working days after the applicant receives notice of the insufficiency, the permit is void. In an appeal concerning voiding of a permit under this paragraph, the burden is on the permit applicant to show that the entire applicable fees, late fees and processing charges have been paid. During any appeal process concerning payment dispute, operation of the establishment in question is deemed to be operation without a permit.

100.7 - Permit Issuance and Requirements:

[1] Permit Requirements:

(a) The Marathon County Board of Health shall establish all pre-inspection fees and permit fees for all Public Facilities or Establishments. Permits required in this regulation are listed below:

- (1) Public indoor and outdoor swimming pools are subject to an annual permit fee [Wisconsin Administrative Code ATCP 76, Department of Agriculture, Trade, and Consumer Protection]
- (2) Recreational and Educational Camps are each subject to an annual permit fee [Wisconsin Administrative Code ATCP 78, Department of Agriculture, Trade, and Consumer Protection].
- (3) Campgrounds and Camping Resorts are subject to an annual permit fee [Wisconsin Administrative Code ATCP 79, Department of Agriculture, Trade, and Consumer Protection].
- ~~(4) Restaurants are subject to an annual permit fee [Wisconsin Administrative Code ATCP 75, Department of Agriculture, Trade, and Consumer Protection].~~
- (5) Hotels, Motels, and Tourist Rooming Houses are subject to an annual permit fee [Wisconsin Administrative Code ATCP 72, Department of Agriculture, Trade, and Consumer Protection].
- (6) Bed and Breakfast Establishments are subject to an annual permit fee [Wisconsin Administrative Code ATCP 73, Department of Agriculture, Trade, and Consumer Protection].
- (7) Mobile, Transient, or Temporary public facilities or establishments ~~that~~ are operated on a short-term basis as defined in this regulation, Wisconsin Administrative Code, or a Wisconsin State Statute referenced in this regulation are subject to a permit fee. If possessing a valid permit issued by another agency, a ~~transient temporary~~ inspection fee may be assessed. [Wisconsin Administrative Code ATCP 75, Department of Agriculture, Trade, and Consumer Protection].
- (8) Tattoo or body piercing establishments are subject to a permit fee. [Wisconsin Administrative Code SPS 221, Department of Safety and Professional Services].

**Commented [DG3]:** Considers permits for mobile retail food establishments, transient food establishments, also temporary campgrounds and body art.

- (9) Retail Food ~~Establishments~~ are subject to an annual permit fee [Wisconsin Administrative Code ATCP75, Department of Agriculture, Trade, and Consumer Protection].
- (10) Manufactured Home Communities are subject to an annual permit fee [Wisconsin Administrative Code SPS 326, Department of Safety and Professional Services].
- (11) "Class B" or "Class C" taverns that sell only alcoholic and non-alcoholic beverages requesting an inspection to determine ~~restaurant~~ retail food establishment sanitation compliance in keeping with Wisconsin State Statute 125.68(5) are subject to a Special Condition Inspection and inspection fee. No permit is required under this regulation. [Wisconsin State Statute 125.68(5)].

**Commented [DG4]:** Addresses all as defined 100.3[16], page 4

(b) Permit Exemptions: A retail food establishment permit is not required as identified in Wisconsin s. 97.30 (2) (b) Wis. Stats and Administrative Code ATCP 75.063 Exemptions:

**Commented [DG5]:** ATCP 75.063 section is long and ATCP 75 is and adopted reference under 100.5

- (1) ~~A retail food establishment permit is not required under Wisconsin Administrative Code ATCP 75.03(9) for the following:~~
  - ~~a. A retail food establishment that sells only packaged foods or fresh fruits and vegetables, provided the establishment does not sell potentially hazardous food and does not engage in food processing.~~
  - ~~b. A retail food establishment operated by a person holding a food processing plant license under s. 97.29, Wis. Stats., if all the following apply:
 
    - ~~1. The person operates the retail food establishment at the same location as the licensed food processing plant.~~
    - ~~2. Sales from the retail food establishment are included in the computation of the food processing plant license fee under s. 97.29 (3), Wis. Stats.~~~~
  - ~~c. A retail food establishment operated by a person holding a restaurant permit issued 97.30 Stats., if all of the following apply:
 
    - ~~1. The person operates the retail food establishment at the same location as the restaurant for which the person holds a permit under s. 97.30, Wis. Stats.~~
    - ~~2. Non-meal food sales from that location comprise no more than 50% by dollar volume of all meal and non-meal food sales from that location. Sales of alcohol beverages and vitamin supplements shall be excluded~~~~

~~from the calculation of food sales under this subdivision.~~

~~d. A restaurant, vending machine, vending machine commissary or other establishment for which a permit is issued under s.97.30, Stats., to the extent that the activities of the establishment are covered by that permit.~~

~~e. A retail food establishment operated by a person holding a dairy plant license under s. 97.20, Wis. Stats., if all the following apply:~~

~~-1. The person operates the retail food establishment at the same location as the licensed dairy plant.~~

~~-2. Food sales from that location, other than sales of dairy products produced at that location, comprise no more than 25% by dollar volume of all dairy and non-dairy food sales from that location.~~

~~f. A retail food establishment operated in conjunction with a state licensed or federally inspected meat establishment if all the following apply:~~

~~-1. The meat establishment is licensed under s. 97.42, Wis. Stats., or inspected under 21 USC 601 et seq. or 21 USC 451 et seq.~~

~~-2. The person operating the meat establishment operates the retail food establishment at the same location.~~

~~-3. Food sales from that location, other than sales of inspected meat or meat products produced at that location, comprise no more than 25% by dollar volume of all meat and non-meat food sales from that location.~~

~~g. A retail food establishment primarily engaged in selling fresh fruits and vegetables, honey, cider, sorghum or maple syrup produced by the operator of the retail food establishment if no other food processing activities are conducted at that retail food establishment.~~

~~h. A temporary retail food establishment operated by a religious, charitable or non-profit organization for no more than 12 days in any license year.~~

[2] Permit Issuance

- (a) No person shall operate a Public Facility or Establishment covered in this regulation within the County of Marathon who does not have a valid permit issued to him/her by the department, unless otherwise exempt in this regulation.

- (b) A Conditional Permit specifying corrections to be made and the time within which the corrections must be made may be issued by the Department at the time of initial issuance or renewal of a permit, or continued validity of a permit issued under this section.

The Conditional Permit shall be posted until a regular permit is issued or violations are corrected after a designated time frame determined by the Department.

If the permittee fails to meet the conditions within the specified period of time, the permit is void.

- (c) Only a person who complies with the requirement of this regulation shall be entitled to receive or retain such a permit.
- (d) A valid permit shall be posted in every Public Facility or Establishment as required in this ordinance.
- (e) A \$5.00 fee shall be assessed for each duplicate permit.
- (f) The Marathon County Health Department may refuse to issue or renew a permit to operate a facility under any of the following circumstances:
  1. The Department has not conducted a preinspection of the facility for which an initial or new permit is required.
  2. The owner of facility has not corrected a condition for which the Department has issued a written health or safety-related order.
  3. All applicable fees under have not been paid, including preinspection fees, permit fees, late renewal fees, reinspection fees.

[3] Permit Transfer

- (a) Permits are not transferable for ~~retail~~ DATCP ~~retail food establishments facilities~~ under Wisconsin Statute 97.30(2) and in Wisconsin Administrative Code ATCP 75.063 between persons or establishments.
- (b) ~~Department of Agriculture, Trade, and Consumer Protection restaurant permits, Wisconsin Administrative Code ATCP 75.104(2), An individual may transfer a permit to an immediate family member, as defined in s. 97.605 (4) (a) 2, Wis. Stats., if the individual is transferring operation of the restaurant. A sole proprietorship that reorganizes as a business entity, as defined in s. 179.70 (1), Wis. Stats., or a business entity that reorganizes as a sole proprietorship or a different type of business entity may transfer a permit to the newly formed business entity or sole proprietorship if the restaurant remains at the location for which the~~

**Commented [DG6]:** ATCP 75 no longer and Statute 97 did not allow Restaurant permit transfer, this had been a carryover from DHS 195 Admin. Code.

~~permit was issued and at least one individual who had an ownership interest in the sole proprietorship or business entity to which the permit was issued has an ownership interest in the newly formed sole proprietorship or business entity. Except as provided in this subsection, no permit issued under this subchapter is transferable from one premise to another or from one person or entity to another.~~

- (c) Department of Agriculture, Trade, and Consumer Protection hotel, tourist rooming house, vending machine commissary or vending machine permits, s. 97.605 (4)(b) Wis. Stats. No permit issued under this section is transferable from one premise to another or from one person, state or local government to another except as provided in (1) and (2) below.
- (1) A permit issued under this section may be transferred from an individual to an immediate family member, as defined in s. 97.605 (4)(a)2. Wis. Stats., if the individual is transferring operation of the facility to the immediate family member.
- (2) Except as provided in par. a. or b., no license is transferable from one premises to another or from one person to another.
- a. The holder of a license issued under this section may transfer the license to an individual who is an immediate family member if the holder is transferring operation of the hotel, tourist rooming house, bed and breakfast establishment, or vending machine to the immediate family member.
- b. A sole proprietorship that reorganizes as a business entity, in s. [179.70 \(1\) Wis. Stats.](#), or a business entity that reorganizes as either a sole proprietorship or a different type of business entity may transfer a license issued under this section for operation of a hotel, tourist rooming house, bed and breakfast establishment, or vending machine commissary to the newly formed business entity or sole proprietorship if the following conditions are satisfied:
1. The hotel, tourist rooming house, bed and breakfast establishment, or vending machine commissary remains at the location for which the license was issued.
  2. At least one individual who had an ownership interest in the sole proprietorship or business entity to which the license was issued has an ownership interest in the newly formed sole proprietorship or business entity.

- (d) Department of Agriculture, Trade, and Consumer Protection campgrounds and camping resorts, recreational and educational camps, and public swimming pools, s 97.67 Wis. Stats.
  - (1) A separate license is required for each campground, camping resort, recreational or educational camp, and public swimming pool.
  - (2) Except as provided in par. a. or b., no license issued under this section is transferable from one premises to another or from one person, state or local government to another.
    - a. A license issued under this section may be transferred from an individual to an immediate family member, as defined in s. 97.605 (4) (a) 2. Wis. Stats, if the individual is transferring operation of the campground, camping resort, recreational or educational camp, or public swimming pool to the immediate family member.
    - b. A sole proprietorship that reorganizes as a business entity, as defined in s. 179.70 (1) Wis. Stats., or a business entity that reorganizes as a sole proprietorship or a different type of business entity may transfer a license issued under this section for a campground, camping resort, recreational or educational camp, or public swimming pool to the newly formed business entity or sole proprietorship if all of the following conditions are satisfied:
      - 1. The campground, camping resort, recreational or educational camp, or public swimming pool remains at the location for which the license was issued.
      - 2. At least one individual who had an ownership interest in the sole proprietorship or business entity to which the license was issued has an ownership interest in the newly formed sole proprietorship or business entity.
- (e) Permits are not transferable for Department of Safety and Professional Services (DPS) manufactured home communities under Wisconsin Administrative Code SPS 326.08.
- (f) Permits are not transferable for DPS body art facilities under Wisconsin Administrative Code SPS 221.04(1)(a)2.

[4] ~~Certified Food Protection Manager, operator of restaurant, retail food establishment operator or manager:~~

**Commented [DG7]:** Section updated to comply with Agent Contract and DATCP CFPM interpretive memo enforcement procedures

- (a) The operator or at least one manager of a retail food establishment facility or establishment, as required under the Wisconsin Food Code, shall have a valid ~~Food Service Operator~~Certified Food Protection Manager (CFPM) course completion certificate issued by the Wisconsin Department of Agriculture, Trade, and Consumer Protection approved trainer.
- (b) The operator or a manager of a new or change-of-operator ~~restaurant~~retail food establishment and shall become certified and provide proof of certification within 90 days after the retail food establishment~~restaurant~~ opens for business.
- (d) The operator or manager of an existing retail food establishment shall become certified and provide proof of certification within 90 days after the date of an inspection if it is found that the retail food establishment has no CFPM on staff.
- (e) When (a) or (b) occurs, the license status will become Conditional with the condition for obtaining and providing proof of a CFPM certificate within 90 days. If proof is provided no further action is necessary and conditions on the facility permit will be removed.
- (f) Failure to obtain a CFPM within 90 days results in a \$150.00 fee and a 30-day extension of the Conditional permit.
  1. If no proof of a CFPM is submitted within the 90-day period, the permit will be suspended.
  - 1-2. If the facility fails to meet the conditions and the permit is suspended, the facility permit can be reinstated if the facility provides proof of a CFPM certificate within the licensing period the suspension occurred.
- (ge) If more than one ~~restaurant~~retail food establishment operated by the same person is located on the same property or contiguous properties, only the operator or one manager is required to be certified.

100.8 - Inspections

[1] Inspection Frequency

An inspection of Public Facilities or Establishments shall be performed at least once per license year. Additional inspections of facilities and establishments shall be performed as often as necessary for the enforcement of this regulation.



[2] Inspection and Sampling

Representatives of the department, after proper identification, may enter, at normal business hours, any premises for which a permit is required under this regulation to inspect the premises for the purpose of determining compliance with this regulation, secure samples or specimens, examine and copy relevant documents and records or obtain photographic or other evidence needed to enforce this regulation {Reference Wisconsin State Statutes 97.12, 97.65, 66.0417, and Wisconsin Administrative Code SPS 221.06 and 326.09}. Should access be denied, the department may obtain a special inspection warrant in addition to actions set forth in 100.9.

[3] "Class B" or "Class C" Tavern -Taverns that sell only alcoholic and non-alcoholic beverages.

"Class B" or "Class C" taverns need to be in keeping with retail food establishment ~~restaurant~~ sanitation compliance per Wisconsin State Statute 125.68(5). Taverns requesting an inspection shall include the following areas of sanitation and be performed as a "Special Condition Inspection".

- (a) Cleaning and sanitizing multiuse equipment and utensil surfaces
- (b) Handwashing equipment and supplies
- (c) Toilet facilities
- (d) Employee hygiene or hygiene practices
- (e) Employee health as related to diseases transmissible through food based on diagnosis including but not limited to Norovirus, Hepatitis A, Shigella, Enterohemorrhagic or Shiga Toxin-producing Escherichia coli, and Salmonella or symptoms including but not limited to vomiting, diarrhea, jaundice, or a lesion.
- (f) Provision of potable water and protection from cross contamination and sewerage disposal
- (g) Maintaining the establishment in a clean condition and in good repair
- (h) Pest control

[3] Report of Inspections:

Whenever an inspection of a Public Facility or Establishment is made, the findings shall be recorded on an inspection report form. The inspection report form shall summarize the requirements of this regulation. A copy of the completed inspection report form shall be furnished to the holder of the permit or his/her agent in charge of the Public Facility or Establishment at the conclusion of the inspection.

[4] Correction of Violations:

- (a) A reinspection shall be conducted when a violation(s) or Human Health Hazard has not been brought into compliance by the operator of a Public Facility or Establishment. The completed inspection report form shall specify a reasonable period of time for the correction of the violation(s) or Human Health Hazard found. Correction of the Human Health Hazard or violation(s) shall be accomplished in the period specified.
- (b) A \$100.00 fee may be assessed for a first reinspection, a \$200.00 fee may be assessed for a second reinspection, and a \$300.00 fee may be assessed for a third reinspection when a violation(s) or Human Health Hazard has not been brought into compliance by the operator of a Public Facility or Establishment. A reinspection fee will not be assessed when the violation(s) or Human Health Hazard has been brought into compliance.

[5] Approved Comparable Compliance:

When it appears that strict adherence to a provision of this regulation or an administrative code is impractical for a particular facility or establishment, the facility or establishment may seek a variance approval to that rule through the Wisconsin Department of Agriculture, Trade, and Consumer Protection or Department of Safety and Professional Services as applicable. Satisfactory proof must be provided that the grant of a variance will not jeopardize the public's health, safety or general welfare. If a variance is granted, there shall be documentation as to the extent of the variance and the specific reasons for it. The applicant shall be given a copy of the documentation.

100.9-Temporary Order

- [1] Whenever, as a result of an examination, the County has reasonable cause to believe that any examined food constitutes, or that any construction, sanitary condition, operation or method of operation of the premises or equipment used on the premises creates an immediate/imminent danger to health, the Health Officer or designee may issue a temporary order either verbally or in writing and cause it to be delivered to the permittee (his/her employee, agent, assignee, or representative), or to the owner or custodian of the food, or to both. If the Temporary Order is delivered verbally, a written notice shall be sent within 72 hours excluding weekends and legal holidays. The order may prohibit the sale or movement of the food for any purpose, prohibit the continued operation or method of operation of specific equipment, or require the premises to cease any other operation or method of operation which creates the immediate/imminent danger to health, or set forth any combination of these

requirements. The Health Officer or designee may order the cessation of all operations authorized by the permit only if a more limited order does not remove the immediate/imminent danger to health. Except as provided in par. [2], no temporary order is effective for longer than 14 days from the time of its delivery, but a temporary order may be reissued for one additional 14-day period, if necessary to complete the analysis or examination of samples, specimens or other evidence.

- [2] If the analysis or examination shows that the construction, sanitary condition, operation or method of operation of the premises or equipment constitutes an immediate danger to health or safety, the department or agent, within the effective period of the temporary order specified in par. [1], shall provide written notice of the findings to the owner, operator or responsible supervisor. Upon receipt of the notice, the temporary order remains in effect until a final decision is issued under s. [ATCP 75.108](#) Wisconsin Administrative Code. The notice shall include a statement that the facility has a right to request a hearing under s. [ATCP 75.108](#) Wisconsin Administrative Code within 15 days after issuance of the notice.
- [3] No food described in a temporary order issued and delivered under par. [1] may be sold or moved and no operation or method of operation prohibited by the temporary order may be resumed without the approval of the Health Officer or designee, until the order has terminated or the time period specified in par. [2] has run out, whichever occurs first. If the Health Officer or designee, upon completed analysis and examination, determines that the food, construction, sanitary condition, operation or method of operation of the premises or equipment does not or no longer constitutes an immediate/imminent danger to health, the permittee, owner or custodian of the food or premises shall be promptly notified in writing and the temporary order shall terminate upon his or her receipt of the written notice.

#### 100.10- Notice of Suspension

- [1] If the analysis or examination shows that the food, construction, sanitary condition, operation or method of operation of the premises or equipment constitutes an immediate/imminent danger to health, the permittee, owner or custodian shall be notified within the effective period of the temporary order issued under par. 100.9 [1]. Upon receipt of the notice, the temporary order remains in effect until a final decision is issued under sub. [100.10 [2]], and no food described in the temporary order may be sold or moved and no operation or method of operation prohibited by the order may be resumed without the approval of the village, city or county.
- [2] A notice issued under sub. [1] shall be accompanied by notice of a hearing before the Marathon County Health Officer, or his or her designee. The County shall hold a hearing no later than 15 days after the service of the notice, unless

both parties agree to a later date. A final decision shall be issued within 10 days of the hearing. The decision may order the destruction of food, the diversion of food to uses which do not pose a immediate/imminent danger to health, the modification of food so that it does not create a immediate/imminent danger to health, changes to or replacement of equipment or construction, other changes in or cessations of any operation or method of operation of the equipment or premises, or any combination of these actions necessary to remove the immediate/imminent danger to health. The decision may order the cessation of all operations authorized by the permit only if a more limited order will not remove the immediate/imminent danger to health.

- [3] All notices, written or verbal, shall contain reasons for the Health Officer or designee's belief that a violation(s) or Immediate/Imminent danger to Health exists.
- [4] The Health Officer or designee may lift the suspension at any time if the reasons for the suspension no longer exist.

#### 100.11 - Revocation of Permits:

Prior to revocation the department shall notify, in writing, the person issued the permit of the specific reason(s) for which the permit is to be revoked. The permit shall be revoked at the end of the 10 working days following service of such notice unless a written request for hearing is filed with the department. The day on which notification occurs is day 0. If no request for hearing is filed within the 10 day period, the revocation of the permit becomes final.

#### 100.12 – Appeals:

Any person having a substantial interest that is adversely affected by an administrative determination made on behalf of the County pursuant to any of the provisions of this Regulation may have such determination reviewed as provided in Chapter 68, Wis. Stats., and in conformance with the following procedures:

- [1] Any person having a substantial interest that is adversely affected by a determination by a staff person or persons may, within 30 days of notice to such person of such determination, request in writing a review of the determination before the Health Officer. The request shall state the ground or grounds upon which the person adversely affected contends that the decision should be modified or reversed. The request for review shall be made to the staff person or persons who issued the initial determination, the Environmental Health and Safety Director or to the Health Officer.
- [2] The Health Officer shall review the initial determination and make a decision within 15 days of receipt of the request for review. The time for review may be extended by agreement with the person aggrieved. The decision shall state the

reasons for such decision and shall advise the person aggrieved of the right to appeal the decision, the time within which the appeal shall be taken and the office or person with whom notice of appeal shall be filed.

- [3] Any person having a substantial interest that is adversely affected with the decision of the Health Officer (pursuant to the review procedure, set forth above, or by a decision regarding suspension or revocation of a permit under §100.9[4] or §100.10, above) may appeal to the Marathon County Administrative Board of Review by requesting a hearing within 30 days of notice of the Health Officer's decision. The request must be in writing and must be filed with or mailed to the office of the Health Officer.
- [4] The Marathon County Administrative Board of Review shall constitute the appeals board to provide a hearing of the appeal of the Health Officer's decision. A member of the Board shall conduct the hearing within 15 days of receipt of the notice of appeal. The hearing will be conducted pursuant to s. 68.11, Wis. Stats. The procedures of the hearing shall be in accordance with the Marathon County General Code of Ordinances, Chap. 24.

#### 100.13 -Penalties

- [1] In the case of violations of State of Wisconsin Administrative Codes enforced under this regulation, the penalty for violation of any of the provisions of this regulation shall be a penalty as provided in applicable Administrative Code or Wisconsin State Statute.
- [2] In all other cases, any person convicted of violating a provision of this regulation shall be subject to a forfeiture not less than \$100 nor more than \$1,000. Each and every violation of the provisions of this regulation shall constitute a separate offense. Each day of noncompliance after the order is served is a separate offense.
- [3] Prosecution of violations of this Regulation shall be conducted by the Office of Corporation Counsel for Marathon County.

This regulation shall take effect upon passage and publication.

Dated this ~~March 5, 2019~~Month, Day, Year

# 2021-2022

# LEGISLATIVE PRIORITIES

Together, WPHA and WALHDAB represent over 1,200 public health professionals in communities across Wisconsin, striving to prevent, promote, and protect the residents of the state.

## About Public Health

Over the last century, public health advancements have dramatically increased life expectancy through vaccination, infectious disease control, and chronic disease prevention. Health outcomes are primarily driven by the social and economic conditions in which we live, work, play, pray, grow up, and grow old. That's why public health is increasing its emphasis on education, income and employment, housing, and other "social determinants of health."

## Legislative Priorities

Preserve public health statutory authority for control of communicable diseases and other public health threats.



Build and retain public health infrastructure through increased and more flexible public health funding.

Dedicate funding for core public health services.

Allocate \$36 million per year, over and above what is currently budgeted for public health.

Direct at least half the new allocation (\$18 million) to local health departments.

Address Racism as a Public Health Crisis.

Support legislation that promotes and fosters diversity, equity, and inclusion, so that all people are treated fairly and respectfully and can attain their full health potential.



## Policy Priorities

### Criminal Justice Reform

- Increase treatment alternatives and diversion program (TAD) funding for mental health and substance abuse issues.
- Increase funding allocated to counties for juvenile justice services.

### Income Stability and Employment

- Support and expand Paid Family Leave.
- Increase Earned Income Tax Credit and move from one-time to monthly payments.
- Establish tax credit for family caregivers.
- Increase workforce training/transitional jobs.

### Early Childhood

- Fully fund School Breakfast Program.

### Housing

- Expand low-income housing tax credits for developers and rental assistance vouchers for renters.
- Fund abatement for lead paint, soil and pipes.

## Support Best Practice Public Health Policy and Effective Programming

Each local health department in Wisconsin is charged to identify its community's health priorities. Planning processes include representatives from healthcare, for-profit businesses, community-based non-profit organizations, other community groups, and intergovernmental departments. Specific priorities vary across the state (e.g. soil contaminants, alcohol, tobacco or other drug prevention, preventable injury, mental health, etc.), but there is also much common ground across the state. Support public health to effectively address these priorities accomplish these goals.



### About WPHA

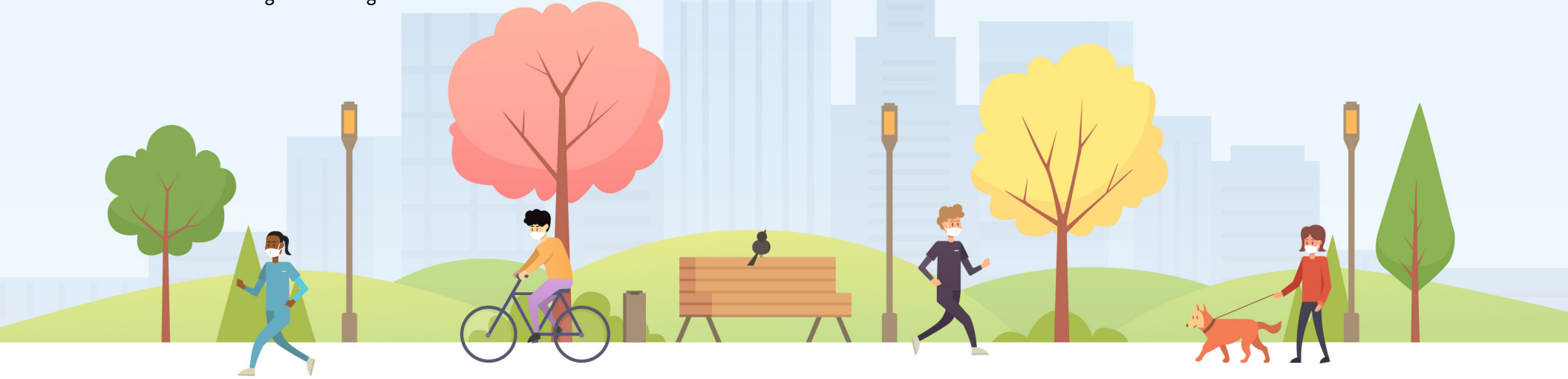
The Wisconsin Public Health Association is the largest statewide association of public health professionals in Wisconsin. Established in 1948, WPHA exists to improve, promote and protect health in Wisconsin. WPHA strives to be diverse in its constituency, rich in partnerships and valued for its policy recommendations and best practices. WPHA is the collective voice for public health in Wisconsin.

### About WALHDAB

The Wisconsin Association of Local Health Departments and Boards is the statewide leader and voice for local governmental public health. WALHDAB was founded in 1991 to serve local health departments and boards of health.

# Investing in public health will provide us the opportunity to be healthy where we live, work, learn and play.

Help the state recover from the human and economic trauma. The pandemic exposed longstanding financial inadequacies in Wisconsin's public health infrastructure. As we navigate the waning months of the pandemic, we need to begin charting our course for recovery that includes addressing neglected chronic underfunding and strategic investments for the future.



## BOOST PUBLIC HEALTH INFRASTRUCTURE FOR HEALTHY COMMUNITIES

### \$18 MILLION

#### Dedicated State Funding for Local Health Departments

- Provide block grants to support public health infrastructure and fund state mandates which are supported by county and municipal levies.
- Allow for this funding to be flexible for increased alignment with their community's needs to maximize impact statewide.
- Take into account factors with allocation formula for distribution more effectively and equitably.

Committed state funding provided directly to local public health departments would enable communities to implement public health strategies more effectively and equitably.

Examples where local health departments could utilize this dedicated funding is:

- Increase community health services, like cancer screenings, substance abuse prevention, and mental health services
- Invest in programs to protect against water, air quality, and other environmental health hazards
- Develop preparedness response strategies to guarantee the capacity to respond quickly to public health emergencies
- Communicate important, accurate data and information to the public in a timely manner
- Improve quality and performance through utilization of best practices to develop public health workforce and achieve outcome goals
- Reduce disparities and advance health equity

*It would also allow local health departments to administer the nearly two-dozen unfunded mandates the state has placed on local health departments.*

*WPHA & WALHDAB also support these two categorical funding mechanisms for direct support to local health departments and community based organizations:*

### \$10 MILLION

#### for Communicable Disease Grants

- Build on state funding to local and tribal health departments.
- Communicable Diseases can lead to a loss in productivity, increase costs, and place employees on extended sick leave.
- Limited resources are provided though threats are increasing. Wisconsin provides surveillance and follow up for a numerous amount of disease, including Zika, Lyme Disease, Hepatitis C, Influenza, Tuberculosis, and Elizabethkingia.

### \$30 MILLION

#### for Health Equity Grants

- The pandemic exposed many ways in which some Wisconsinites across both rural and urban areas have more difficulty accessing health resources. Support for community organizations to implement community health worker models could help address those issues and advance health equity.
- Promote health equity for community organizations to implement community health worker care models.
- Community organizations, and local/tribal health departments to hire health equity strategists and implement health equity action plans.

**Supporting a strong public health infrastructure is paramount with the continuing occurrences of natural disasters, increased substance use, and an increase in both infectious and chronic diseases.**

Investments in public health programs represent around 10% of all health care spending in most countries, yet its impact can be substantial. An investment of \$10 per person per year in evidence-based programs in local communities that are proven to increase physical activity, improve nutrition, and prevent smoking or other tobacco use could save the country more than \$16 billion annually within five years, according to the Robert Wood Johnson Foundation. This is a potential savings of \$5.60 for every \$1 invested.

However, Wisconsin is not investing in taking advantage of these savings. According to The Trust for America's Health, Wisconsin state funding for public health is \$17.40 per person per year—\$36 per person per year is the national average.

*Facing this fact and knowing the detrimental effects of chronically underfunding public health, we respectfully urge you to make ongoing public health funding a top priority in the 2021-23 biennial budget.*

# SUPPORT INCREASED INVESTMENT IN EXISTING PUBLIC HEALTH PROGRAMS ADMINISTERED BY THE DEPARTMENT OF HEALTH SERVICES

The Department of Health Services is an equal partner in a strong public health coalition. We strongly recommend supporting the following initiatives in Governor Evers' budget proposal:

## Windows Plus Lead Exposure Prevention Program

Provide \$961,800 in 2021-22 and \$1,054,800 in 2022-23

## Lead Screening and Outreach Grants

Provide \$50,000 annually to increase a grant for lead screening and outreach activities

## Expand Eligibility for Birth to 3 Program

Provide \$3,300,000 in 2021-22 and \$6,600,000 in 2022-23

## Black Women and Infants' Health

Provide \$3,500,000 annually to fund grants to address Black women's health and infant and maternal mortality.

## Tobacco and Vaping Prevention

Increase funding by \$2,000,000 in 2021-22 to fund a new public health campaign aimed at preventing initiation of tobacco and vapor product use.

## Community Health Benefit

Provide \$1,000,000 in 2021-22 and \$24,500,000 in 2022-23 to fund a new MA benefit.

## Postpartum Eligibility Extension

Provide \$20,948,600 in 2022-23 to reflect the estimated cost of extending benefits for MA eligible pregnant women until the last day of the month.

## Community Health Workers

Provide \$14,232,000 in 2022-23 to fund coverage of community health worker services under MA.

## Medication-assisted Treatment

Provide \$3,632,800 in 2021-22 and \$7,265,500 in 2022-23 to increase reimbursement rates for medication-assisted treatment (MAT) services for individuals with substance use disorder.

A comprehensive recovery strategy needs to include robust investments in public health. For more information, please do not hesitate to contact our government affairs consultants Tim Hoven (414-305-211) or Erik Kanter (608) 310-8833.

All people deserve the opportunity to live in a state that creates conditions for everyone to be healthy. Public policy should strive toward the elimination of health disparities.





# GOVERNOR EVERS' 2021-23 BIENNIAL BUDGET

## Department of Health Services

Wisconsin faces unprecedented challenges. The Governor Evers 2021-2023 Budget Proposal puts people first by increasing and improving access to health care, expanding behavioral health services, protecting our neighbors most in need, and ensuring our public health system is robust and responsive. Now is a time for bold action, and instead of retracing our steps to go back to the way things were, we will bounce back a safer, healthier, and more equitable state. Together, we commit to putting people first to meet our challenges moving forward.

### People First: Invest in Coverage and Communities

- \$634 million in **GPR savings for Medicaid expansion**
- \$25.5 million for **community health benefit to address social determinants of health**
- \$30 million for **health equity community grants**
- \$12 million for **protection of kids from lead hazards**
- \$1 million for **coverage of doula services**
- \$0.4 million for **family planning services**
- \$0.9 million for **farms to FoodShare**
- \$35.9 million for **access to dental services**
- \$2 million for **protection of kids from tobacco**
- \$14.3 million for **community health workers**
- \$0.6 million for **emergency medical services**
- \$16 million for **prescription drugs**
- \$8 million for **community health centers and free and charitable clinics**
- \$321 million for **hospital funding**
- \$21 million to **extend postpartum coverage**

### People First: Invest in Behavioral Health

- \$12.3 million for **regional crisis centers**
- \$5 million for **regional crisis stabilization facilities**
- \$12.4 million for **medication-assisted treatment for opioid use**
- \$2 million for **Medicaid psycho-social rehabilitation**
- \$2.6 million for **Milwaukee mobile crisis response**
- \$2.4 million for **county crisis and peer support phone lines**
- \$3.3 million for **county and law enforcement crisis response and training**
- \$3.2 million for **Medicaid coverage of acupuncture**
- \$1.9 million for **behavioral health treatment for people who are deaf and hard of hearing**
- \$40 million for **increased funding for behavioral health and suicide prevention services**
- \$6.5 million for **room and board payments for residential substance use disorder treatment**

### People First: Invest in Public Health and Long-Term Care

- \$241 million for **nursing home Medicaid rate increase**
- \$156 million for **direct care rate increase**
- \$3.5 million for **expansion of dementia care specialists**
- \$1 million for **Alzheimer's family caregiver supports**
- \$15.4 million for **state, local and tribal health communicable disease response**
- \$7 million for **Aging and Disability Resource Centers**



# Results-Based Accountability

## RESULTS



The end conditions of well-being for populations in a geographic area

The responsibility of partnerships

## INDICATORS



How we measure these conditions

Baselines are what the measures show about where we've been and where we're headed

Turn the Curve is what success looks like if we do better than the baseline

## From Talk to Action

*For Communities, Cities, Counties, States and Nations*

The step-by-step process starts with a group of partners who wish to improve the quality of life in the community.

- Step 1: What are the quality of life conditions we want for the children, adults, and families who live in our community?
- Step 2: What would these conditions look like if we could see or experience them?
- Step 3: How can we measure these conditions?
- Step 4: How are we doing on the most important measures?
- Step 5: Who are the partners that have a role to play in doing better?
- Step 6: What works to do better, including no-cost and low-cost ideas.
- Step 7: What do we propose we do?

Repeat these steps each time you meet. The steps can be done in any order as long as you do them all.

## STRATEGIES



What works to improve these conditions

## PERFORMANCE MEASURES



How we know if programs & agencies are working effectively

Begin with sorting the Strategy's performance measures into 3 common-sense, plain language categories:

- \* How much did we do?
- \* How well did we do it?
- \* Is anyone better off?

## From Talk to Action

*For Programs, Agencies, and Service Systems*

The step-by-step process starts with a manager or a group of managers who care about the quality of their services.

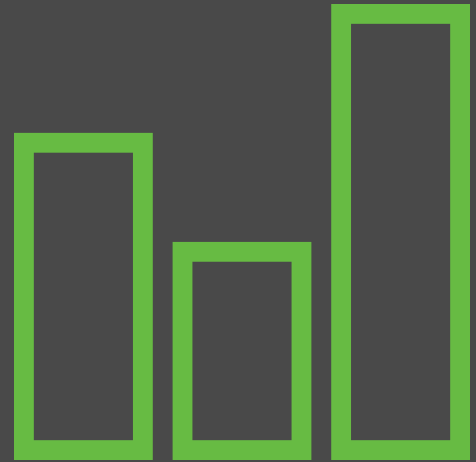
- Step 1: Who are our customers?
- Step 2: How can we measure if our customers are better off?
- Step 3: How can we measure if we're delivering services well?
- Step 4: How are we doing on the most important measures?
- Step 5: Who are the partners that have a role to play in doing better?
- Step 6: What works to do better, including no-cost and low-cost ideas.
- Step 7: What do we propose we do?

Repeat these steps each time you meet. The steps can be done in any order as long as you do them all.

# Results-Based Accountability

## Basic Ideas

- \* RBA organizes the work of programs, agencies, communities, cities, counties and states around the end conditions we seek for those who live in our community and those receiving service
- \* Starts with ends, work backward to means:
  - \* *What do we want?*
  - \* *How will we recognize it?*
  - \* *What will it take to get there?*
- \* Use plain language, not jargon
- \* Use data to drive decision-making
- \* Use data to gauge success
- \* Involve a broad set of partners
- \* Get from talk to action as quickly as possible



***"We cannot fool ourselves by taking a collection of actions that sound good and hoping for the best."***

***Results Based Accountability*** means that we have set out to make a change, not by chance, but by choice. And the deliberate nature of this work is different. And it requires a different way of thinking about and organizing the work. We must make the best choices possible for indicators. We must strive to get better indicators over time. We must recognize that baselines are the only real business-like way to measure change for the better or worse. We must work to understand why the baselines look the way they do so that we can target our efforts most effectively. We must bring in partners, public and private, parents and youth, to contribute their wisdom and where possible, their resources.

We must struggle to find the things that actually work to make change at the population. This means we must search for things that have worked in other places and search deep in ourselves and our community for things we think will work here. We must not accept the easy or politically correct answers, but test everything by whether it will make a difference here. And we must get started taking action. We must take those steps that can be taken easily and inexpensively first, and gather resources to take the harder and more expensive actions as soon as we can. We must track our progress and be honest with ourselves about whether we are in fact making a difference. We must make changes and improvements to our plan over time. And if we do all this well, we must celebrate and share credit. And then we get back to doing more...

## Results-Based Accountability and Community Health Improvement Plan

The purpose of this document is to provide guidance to Marathon County Health Department Community Health Improvement Team when developing the 2021-2024 Community Health Improvement Plan within the Results-Based Accountability Framework.

### Results

A result is the end conditions of well-being for populations in a geographic area, state in plain language. Results are the responsibility of partnerships, not the responsibility of an individual organization.

It may help to think of creating a Result by a “Pick 3” menu of options (these lists do not include every option):

Populations	Geographic Area	Condition of Wellbeing
All residents	State	Healthy
All children prenatal to 5 years old	County	Free from death and suffering due to...
All seniors	Local Jurisdiction (City, Village, Town)	Born Healthy
People with developmental disabilities	School District	Financially Secure
Southeast Asian females	Neighborhood	Have Access to...

*Examples for Marathon County may include:*

- All Marathon County residents are healthy.
- Marathon County children enter school ready to learn.
- Pregnant women in Marathon County have access to early prenatal care.
- Spencer residents live in a safe community.

*Examples from other Communities:*

- People living with, or at risk of behavioral health conditions in King County, are healthy, have satisfying social relationships, and avoid criminal justice involvement.
- All Washington State residents have clean environments (land, air, water).
- The entire King County population contributes to a vibrant economy.
- Auburn residents live in a safe community.
- Vermont youth successfully transition to adulthood.