

2023



Public Health
Prevent. Promote. Protect.



Appleton Health Department Annual Report

<https://www.appleton.org/residents/health>

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APPLETON HEALTH DEPARTMENT 2023 ANNUAL REPORT

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MESSAGE FROM THE HEALTH OFFICER

It is my pleasure to present the 2023 annual report for the Appleton Health Department. I am honored to celebrate and share with you the progress and accomplishments of our department over the past year.

One of the most significant advancements in our department this year has been the establishment of the new Community Health Division. This division has taken the lead in our Community Health Assessment and Community Health Improvement Planning initiatives, driving these processes through robust primary data collection, collaboration with key partners, active coalition engagement, and the implementation of diverse, community-focused programs. In collaboration with the Appleton Police Department and the Department of Community Development, this division plays a critical role in Appleton's Basic Needs Team, working tirelessly to support individuals experiencing homelessness by facilitating long-term housing solutions and providing immediate assistance through resource referral and navigation.

The Health Department, along with the Mayor's Office, hosted the City of Appleton's first Summit on Homelessness in June. This event was aimed at beginning community-wide conversations around issues surrounding homelessness, including community collaboration, barriers to housing, and the use of community resources. Now led by community non-profit organizations, this work continues today.

We also launched the AARP Age Friendly Appleton survey in 2023. This assessment sought to identify the issues faced by both seniors and young people planning on aging in Appleton. The survey was a critical step in understanding what features of the Appleton community make it easier or harder for all people to have what they need throughout their lifespan.

Our Environmental Health Division saw a surge in necessary, routine inspections made possible with additional staff, funded with increased inspection revenue. We also saw the launch of our Tuberculosis skin test fee-for-service program, quality improvements to our Rabies follow-up service, and an increase in our at-home visiting referrals, to name just a few efforts.

The last year brought with it numerous opportunities of deep collaboration with stakeholders and partners. Thank you for your ongoing support and partnership in improving the health of our community.

Gratefully yours,



Charles E Sepers, Jr, PhD, MPH

Health Officer | Director

Appleton Health Department

Appleton, WI, 54911

OUR VISION

Health for all, together.

OUR MISSION

Facilitate equitable community wellbeing through education, health promotion, and response to public health needs.

OUR BELIEFS

- The Appleton Health Department plays a vital role assessing and assuring the health needs and trade practices in the community.
- The Appleton Health Department consists of highly motivated and dedicated individuals who provide services to protect and promote the health and well-being of the citizen and consumer.
- The Appleton Health Department communicates with the public on health and consumer related issues.
- The Appleton Health Department provides services in a cost effective and efficient manner.
- The Appleton Health Department develops and evaluates departmental programs, policies, and procedures based on community needs. We collaborate with community agencies and providers to assess those needs and ensure high quality services.
- The Appleton Health Department has a professional staff that works together as a cohesive team by cooperating, communicating, and supporting each other to achieve departmental and individual goals.



2023: Appleton Health Department Staff Photo

2023 BOARD OF HEALTH



Cathy Spears
Chairperson



Lee Marie Vogel, MD
Medical Advisor



Kathleen Fuchs, PhD



Vered Meltzer
Aldersperson



Vaya Jones
Aldersperson



Deborah Werth, BSN, RN



Emma Kane, MPH



Jacob Woodford
Mayor

The Board of Health shall consist of eight (8) members who shall be the Mayor and seven (7) members appointed by the Mayor subject to confirmation by the Common Council. Two (2) of the seven (7) members of the Board shall be members of the Common Council. Members of the Board shall have a demonstrated interest or competence in the field of public health or community health, and a good faith effort shall be made to appoint a registered nurse and a physician. Members of the Board shall hold office for terms of two (2) years.

The Board of Health governs the City Health Department and assures the enforcement of state public health statutes, public health rules, and municipal health ordinances.

2023 TABLE OF ORGANIZATION

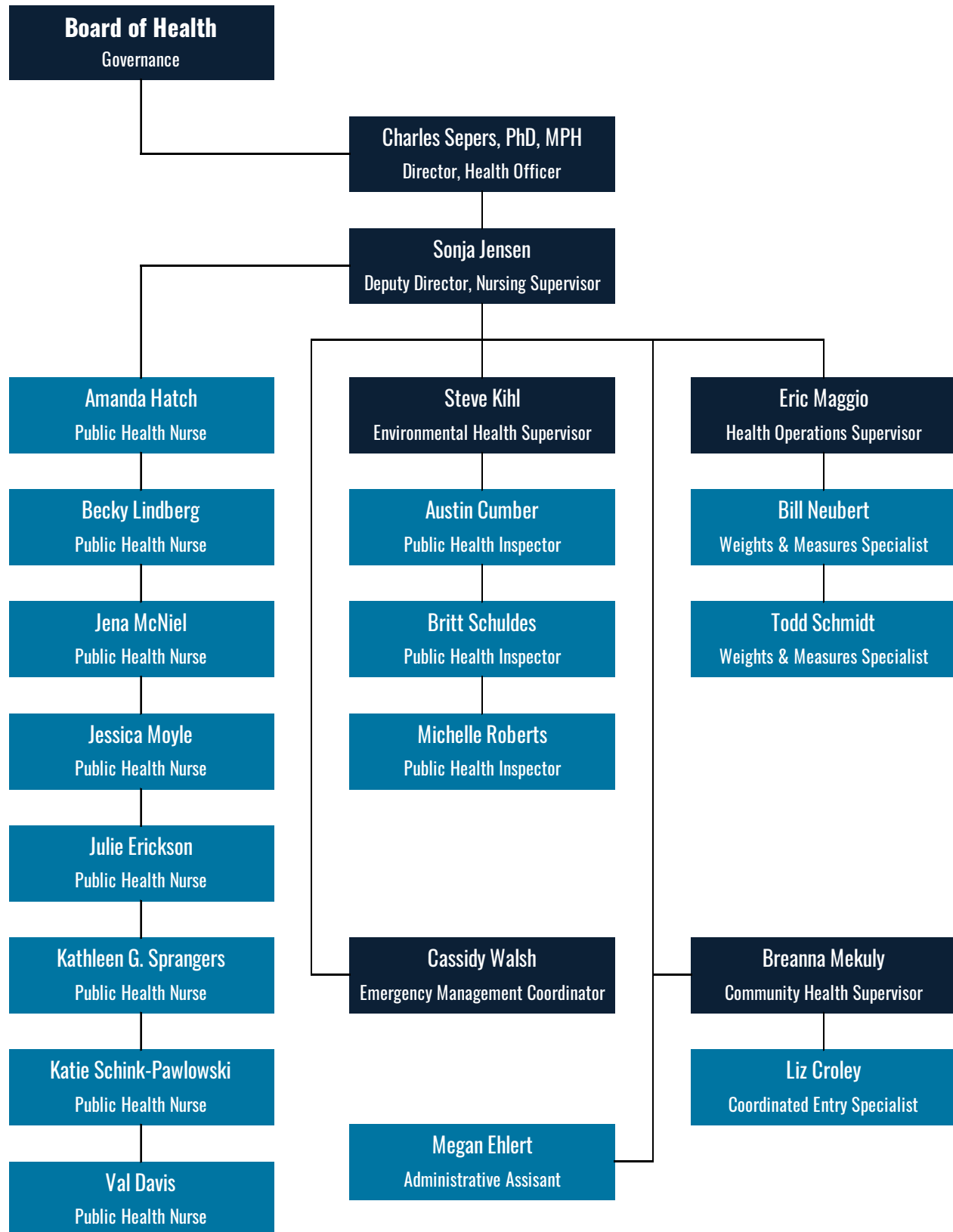


Figure 1: 2023 Table of Organization

2023 ROSTER

BOARD OF HEALTH

Cathy Spears, Chairperson
Lee Marie Vogel, MD, Medical Advisor
Deborah Werth, RN
Kathleen Fuchs, PhD
Emma Kane, MPH
Aldersperson Vaya Jones
Aldersperson Vered Meltzer
Mayor Jacob Woodford

STAFF

Administration

Charles E Sepers, Jr, PhD, MPH,
Health Officer/Director
Sonja Jensen, RN, Deputy Director
Megan Ehlert, Administrative Support

Environmental Health

Steve Kihl, RS, Environmental Health Supervisor
Austin Cumber, Environmentalist
Britt Schuldes, Environmentalist
Michelle Roberts, RS, Environmentalist

Community Health

Breanna Mekuly, MTS, Community Health
Supervisor
Liz Croley, Coordinated Entry Specialist

Public Health Emergency Preparedness

Cassidy Walsh, CEM, Emergency Management
Coordinator

Public Health Nursing

Valerie Davis, RN, Public Health Nurse
Katie Schink-Pawlowski, RN, Public Health Nurse
Julie Erickson, RN, Public Health Nurse
(Part-Time)
Amanda Hatch, RN, Public Health Nurse
(Part-Time)
Becky Lindberg, RN, Public Health Nurse
(Part-Time)
Jena McNeil, MPH, RN, Public Health Nurse
(Part-Time)
Jessica Moyle, RN, Public Health Nurse
(Part-Time)
Kathleen Sprangers, RN, Public Health Nurse
(Part-Time)
Susan Larson, RN (PRN)

Consumer Protection

Eric Maggio, City Sealer
Todd Schmidt, Weights & Measures Specialist
Bill Neubert, Weights & Measures Specialist

USING THIS REPORT

PURPOSE OF THIS REPORT

An annual report is a document that organizations create each year to keep everyone informed about what they have been doing. Here's what it's for:

1. **Clarity:** It shows how money was earned and spent, making things clear and easy to understand.
2. **Responsibility:** It explains how the organization has worked to meet its goals and stick to its mission.
3. **Highlights:** It shares big achievements and any challenges faced over the year.
4. **Future Plans:** It talks about what the organization hopes to achieve next.
5. **Connection:** It helps build trust by showing the impact the organization has had on the community.
6. **Following the Rules:** It ensures the organization is following the law and any necessary guidelines.

In simple terms, the annual report is like a yearbook that shows how the organization has been doing and what it plans to do next.

FOUNDATIONAL PUBLIC HEALTH SERVICES

High-performing public health departments use data-driven, evidence-based practice to be good stewards of public money and address community priorities. Delivering protections in their communities at this level requires a strong foundation of public health infrastructure.

The Foundational Public Health Services framework provides an overview of the responsibilities of public health and sets a standard for what should be available in every community. Although the needs of every community will likely differ, this sets the minimum level of service that should exist. In addition, the framework is rooted with a focus on community health, well-being, and achieving equitable outcomes. There are five Foundational Public Health Service Areas: 1) Communicable Disease, 2) Chronic Disease and Injury Prevention, 3) Environmental Public Health, 4) Maternal, Child and Family Health, and 5) Access to and Linkage with Clinical Care. This report is organized by these public health foundational areas, with the addition of consumer protection as a foundational area, which is a unique feature of the Appleton Health Department. Major headings correspond with these areas of foundational areas. Below you will find each of these along with the Public Health Essential Services that contribute to the work done in that area.

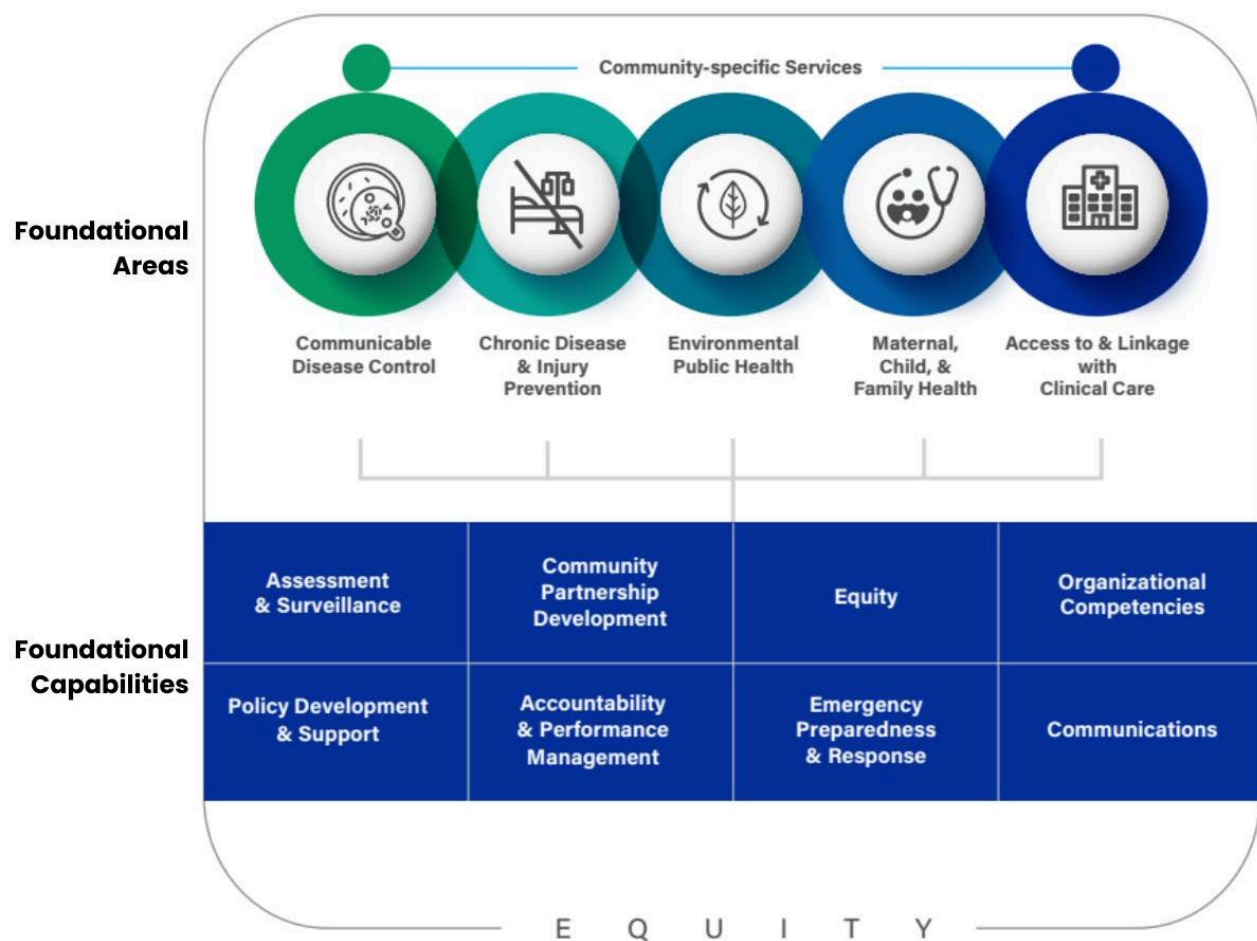


Figure 2. Foundational Public Health Services

Local health departments in the State of Wisconsin are required to be organized by and operate according to this framework to ensure high-quality public health services and capabilities universally statewide.

Additionally, those activities and data that correspond with the core foundational capabilities will be identified throughout the document. At a glance, this structure demonstrates compliance with these high standards.

- FC1. Assessment & Surveillance
- FC2. Policy Development & Support
- FC3. Community & Partnership Development
- FC4. Accountability & Performance Management
- FC5. Equity
- FC6. Emergency Preparedness & Response
- FC7. Organizational Competencies
- FC8. Communications

10 ESSENTIAL PUBLIC HEALTH SERVICES

While the Foundational Public Health Services define *what* work is required by local health departments, the 10 Essential Public Health Services illustrate *how* that work is done. This high-quality implementation of public health best practice is also required by State statute.

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve equity, the Essential Public Health Services actively promote policies, systems, and overall community conditions that enable optimal health for all and seek to remove systemic and structural barriers that have resulted in health inequities. Such barriers include poverty, racism, gender discrimination, ableism, and other forms of oppression. Everyone should have a fair and just opportunity to achieve optimal health and well-being.

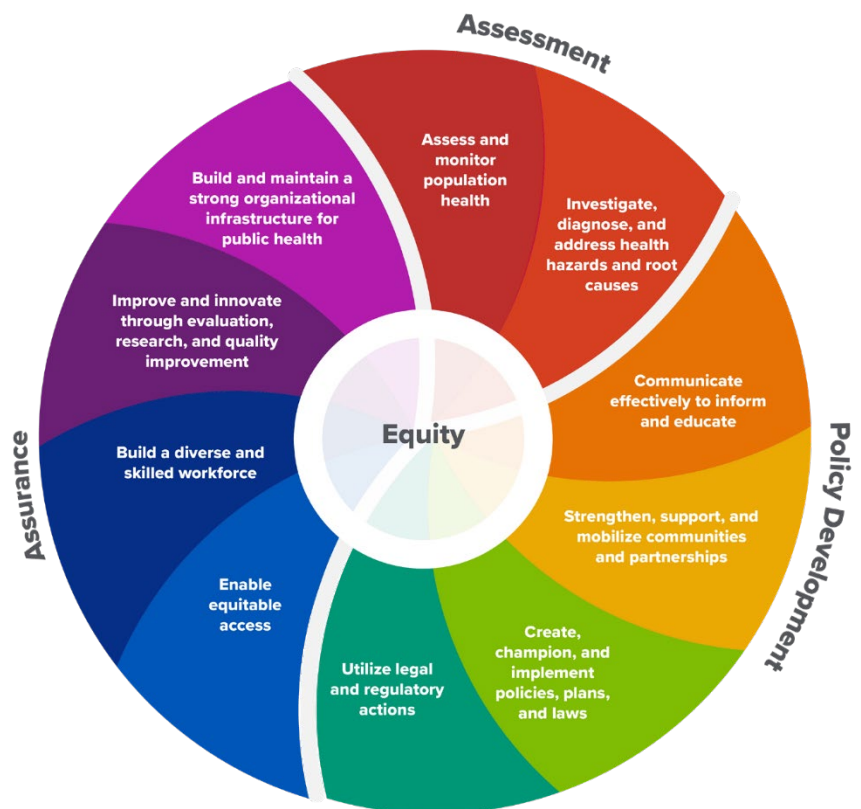


Figure 3: The 10 Essential Public Health Services

The 10 Essential Public Health Services are:

- EPHS1. Assess and monitor population health status, factors that influence health, and community needs and assets
- EPHS2. Investigate, diagnose, and address health problems and hazards affecting the population
- EPHS3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
- EPHS4. Strengthen, support, and mobilize communities and partnerships to improve health
- EPHS5. Create, champion, and implement policies, plans, and laws that impact health
- EPHS6. Utilize legal and regulatory actions designed to improve and protect the public's health
- EPHS7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
- EPHS8. Build and support a diverse and skilled public health workforce
- EPHS9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
- EPHS10. Build and maintain a strong organizational infrastructure for public health

COMMUNITY SNAPSHOT

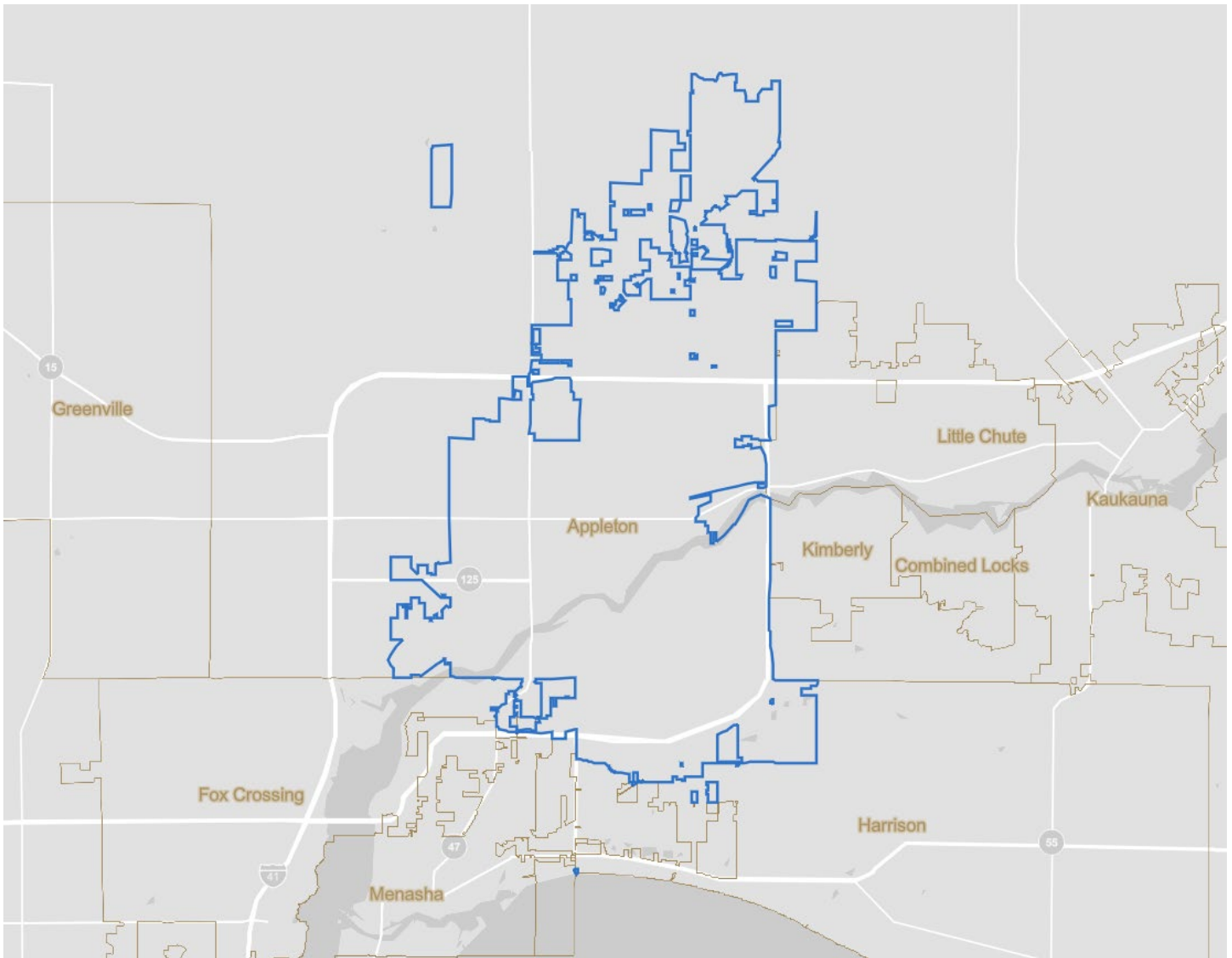


Figure 4: City of Appleton Map

Population (2020)

75,644

Median Family Income (2022)

\$75,262

Median Age (2022)

38.5 years

Median Gross Rent (2022)

\$983/month

Homeownership Rate (2022)

65.3%

Poverty Rate (2022)

7.6%

FOUNDATIONAL CAPABILITIES

ASSESSMENT & SURVEILLANCE

The Appleton Health Department is dedicated to assessing and monitoring the health status, needs, and assets of our community through systematic processes such as the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). Our surveillance activities help monitor health threats to the community. These interconnected processes enable us to identify key health issues and develop targeted strategies to enhance the health and well-being of Appleton residents.

Community Health Assessment (CHA)

The CHA is a comprehensive examination of health status, behaviors, resources, and social determinants of health within Appleton. This process involves collecting data from various sources, including health surveys, vital statistics, community focus groups, and existing health reports. The CHA identifies health issues, disparities, and community strengths that guide our public health initiatives. Our goal is to understand the unique health needs and priorities of Appleton residents, providing a foundation for effective interventions and programs.



Figure 5: Community Health Assessment Committee

Recent CHA activities include the Homelessness Summit, Point-in-Time Count, and Age-Friendly Survey. These efforts, which engage community stakeholders, help ensure that public health initiatives are tailored to the specific needs of our population, fostering sustainable and long-term improvements in community health.

Early data analyses show that access to affordable housing and mental health services are among the leading areas of concern among Appleton residents. These two focus areas will likely guide our work in 2024 and beyond.

Community Health Improvement Plan (CHIP)

Following the completion of the CHA, the CHIP is developed to address the identified health priorities. This strategic plan outlines actionable steps, programs, and policies designed to improve community health and reduce disparities. The CHIP involves collaboration with local health departments, community organizations, healthcare providers, schools, businesses, and residents. Through this collective effort, we set measurable objectives, establish timelines, and allocate resources for evidence-based interventions. The CHIP will be completed in 2025, as part of a Tri-County effort to streamline CHA and CHIP development and implementation.

Investigations and Disease Prevention

The Appleton Health Department is committed to investigating, diagnosing, and mitigating health problems and hazards that pose risks to the community. Our Public Health Inspectors (Environmentalists) and Public Health

Nurses collaborate on investigations where environmental factors intersect with health outcomes. This teamwork is essential to preventing the spread of communicable diseases, identifying health threats, and promoting healthy behaviors.

For instance, gastroenteric investigations are crucial for identifying outbreaks of foodborne illnesses such as E. coli or Salmonella. Our team conducts interviews, collects laboratory samples, and provides education and counseling to those affected, ultimately helping to prevent further spread and improve public health outcomes.

Lead Hazard Investigation and Mitigation

Our Certified Lead Hazard Investigators and Certified Lead Risk Assessors are trained to conduct safe and thorough investigations of lead hazards, particularly in homes of children with elevated blood lead levels. By collecting paint, dust, and soil samples, our team identifies sources of exposure and collaborates with families to mitigate risks. These efforts are important in the prevention of long-term health problems such as developmental delays and cognitive impairments in children.

Through continuous assessment, investigation, and targeted interventions, the Appleton Health Department plays a pivotal role in safeguarding public health and preventing disease and environmental hazards in our community.

PARTNERSHIPS & COLLABORATIONS

The Appleton Health Department collaborates with various organizations to enhance public health services and promote community well-being. Key partnerships include Mosaic Family Health, Appleton Downtown Inc. (ADI), and N.E.W. Mental Health Connection, each playing a unique role in supporting the health of Appleton residents.

Mosaic Family Health

Mosaic Family Health is a primary care practice and family medicine residency program that has served the Appleton community for over 40 years. As the home of the Fox Valley Family Residency Program, a community-based affiliate of the Medical College of Wisconsin, Mosaic provides high-quality, patient-centered care while training new family medicine physicians. The partnership with the Appleton Health Department extends to various projects, including specialty vaccine clinics for medically underserved populations and training medical residents in health promotion and public health infrastructure.

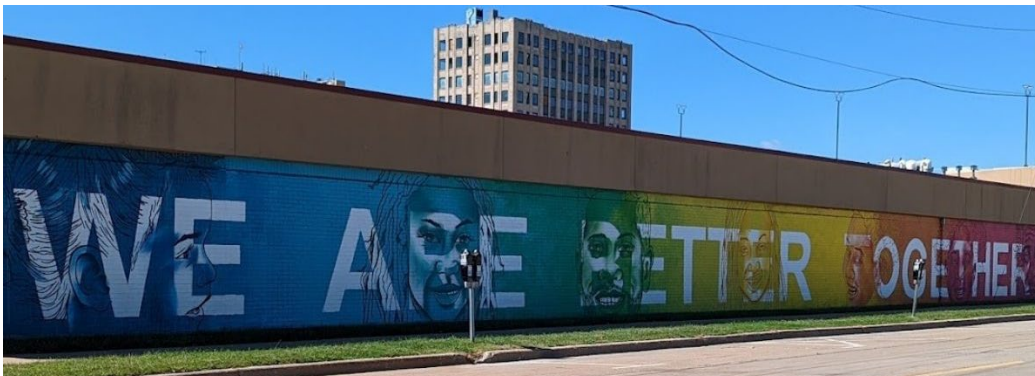


Figure 6: Mosaic Family Health Mural

Mosaic Family Health’s faculty includes experienced family medicine physicians, such as Dr. Lee Vogel, who serves as the program director, Medical Advisor for the City of Appleton Health Department, and Vice Chair of the Board of Health. This partnership ensures that residents receive comprehensive training,

including exposure to public and community health, and access to the latest research and medical

technologies. The collaboration helps keep healthcare providers informed of best practices, enhancing patient care quality and public health initiatives.



Appleton Downtown Inc. (ADI)

Appleton Downtown Inc. (ADI) is a non-profit organization dedicated to promoting the economic strength and cultural vibrancy of downtown Appleton. Through marketing campaigns, events, and development projects, ADI works with local businesses and community partners to create a thriving downtown district. In partnership with the Appleton Health Department, ADI plays a crucial role in enforcing health and safety regulations, ensuring that downtown businesses, events, and initiatives comply with standards designed to protect public health.

This collaboration involves providing guidance to businesses, conducting inspections, and fostering a culture of health and safety awareness, particularly at the Farmer's Market and other ADI-sponsored events. The joint efforts between ADI and the Health Department contribute to creating a safe and welcoming environment, enhancing the overall well-being of residents and visitors while supporting ADI's mission to make downtown Appleton a vibrant destination for business, learning, living, and leisure.

N.E.W. Mental Health Connection (The Connection)

N.E.W. Mental Health Connection, known as The Connection, is a collaborative initiative focused on improving mental health care across Outagamie, Winnebago, and Calumet Counties. Utilizing the Collective Impact framework, The Connection addresses complex mental health challenges that no single agency can solve alone. This model fosters a common agenda, shared measurement practices, and coordinated activities to drive systemic change in mental health and suicide prevention efforts.

As the backbone organization for mental health initiatives in the region, The Connection guides vision and strategy, supports aligned activities, and builds public will. They also advocate for policy changes, establish shared measurement practices, and mobilize funding to support their goals. Their use of Results-Based Accountability (RBA) ensures that their focus remains on impactful outcomes, such as improved mental health and reduced suicide rates, rather than just service volume. The Connection's innovative approach challenges misconceptions about mental health and works to create a healthier community.

COMMUNITY HEALTH IMPROVEMENT INITIATIVES

The Appleton Health Department is committed to advancing community health through various initiatives that address the needs of all residents, particularly older adults. A key initiative in this effort is the Age-Friendly Appleton Initiative, developed in partnership with AARP and Appleton Downtown Inc.

Age-Friendly Appleton Initiative

AARP, a nonprofit organization dedicated to empowering and advocating for older adults, designated Appleton as an "Age-Friendly Community" in 2022. This recognition reflects Appleton's commitment to creating an inclusive environment that supports residents of all ages, with a particular focus on older adults. Following this designation, the Age-Friendly Appleton Initiative was launched to ensure that the needs and preferences of older residents are integrated into city planning and policies.

In collaboration with AARP, the Appleton Health Department developed the Age-Friendly Appleton Survey to better understand and prioritize the needs of older adults. The survey, conducted June through August of 2023, covered key topics such as accessible housing, transportation, healthcare, social engagement, and other factors that contribute to healthy aging. It was promoted both online and at community gatherings, aiming to reach a broad audience of older residents.

The insights gained from the survey will guide the city's planning and decision-making processes, ensuring that the voices of older adults are heard and considered. By focusing on these needs, the Age-Friendly Appleton Initiative not only helps older residents thrive but also strengthens the broader community, making Appleton a more vibrant and supportive place for everyone.

EQUITY

In 2023, the Appleton Health Department engaged in several equity-focused activities aimed at addressing health disparities and promoting inclusive public health services. These efforts were centered on ensuring that all community members, regardless of their background, have access to the resources and support they need for optimal health and well-being. Key equity activities conducted by the department included:



Language Access and Translation Services

Recognizing the linguistic diversity within the community, the department provided access and translation services to ensure that non-English-speaking residents receive clear health information in their preferred language. This included translating health materials, providing interpreter services at clinics, and offering multilingual service delivery.

Targeted Health Screenings and Vaccination Clinics

To address barriers to healthcare access, the department held targeted vaccination clinics among underserved populations. These clinics were designed to reach vulnerable populations, including low-income families, and children in need of sensory processing interventions, that included both routine and seasonal flu and COVID-19 vaccinations.

Partnerships with Community Organizations

The Appleton Health Department strengthened partnerships with local organizations serving marginalized groups, such as food pantries, refugee support agencies, and housing organizations. These collaborations aimed to provide holistic support to residents, addressing not just health needs but also social determinants of health like food security, housing stability, and access to social services.

Inclusive Policy Development

The Appleton Health Department developed and implemented policies that promote equity in public health services. This included revising protocols to ensure equitable access to health services and incorporating equity considerations into program planning and resource allocation.

Through these and other efforts, the Appleton Health Department has demonstrated its commitment to advancing health equity, reducing disparities, and creating a healthier, more inclusive community for all residents.

ORGANIZATIONAL COMPETENCIES

To ensure that the Appleton Health Department is well-positioned to meet the evolving needs of our community, we have taken significant steps to strengthen our workforce and expand our public health services. One key initiative was the creation of a full-time Public Health Nursing position, upgraded from a previously part-time role. This transition, funded by external support from the Wisconsin Department of Health Services, aims to enhance the capacity of local and tribal health departments. By establishing this full-time position, we can reduce our reliance on limited-term employees for critical tasks such as communicable disease investigations and follow-ups.

Public Health Nurses at the Appleton Health Department play a necessary role in community health through a variety of services. These include communicable disease investigation, immunizations, lead poisoning prevention, maternal and child health home visits, coalition participation, and health promotion efforts. Expanding the full-time staff within our Public Health Nursing division is crucial as we embark on key initiatives, such as the City's Community Health Assessment and the Age-Friendly Appleton survey in partnership with AARP.

Internship and Student Engagement Opportunities

The Appleton Health Department is committed to fostering the next generation of public health professionals by offering a range of internship opportunities for undergraduate and graduate students. Internships are supported through grants, student inquiries, and partnerships with universities and organizations, including the University of Wisconsin-Green Bay Nursing Program, Lawrence University, University of Nebraska Medical Center, the AHEC Scholars Program, and Bellin College. These placements allow students to gain practical experience in Public Health Nursing, Environmental Health, Public Health Preparedness, Weights and Measures, and Public Health Administration.

In 2023, we hosted three interns: Barb, an undergraduate nursing student from UW Green Bay, Nat, a pre-med student from Lawrence University, and Austin, an Appleton Health Department Environmentalist completing his double master's degree from Texas Tech University. Barb gained hands-on experience in Public Health Nursing, while Nat focused on Age-Friendly Appleton Survey distribution and collection. Austin focused his capstone project on the Wisconsin Lead-in-Water Testing and Remediation (WTR) Initiative. Austin educated local early childcare centers about the free lead testing program, collected samples for testing by the Wisconsin State Laboratory of Hygiene, and provided follow-up support for lead contamination remediation.



Figure 7: Austin Cumber preparing water samples collected from childcare center

Through these workforce enhancements and educational initiatives, the Appleton Health Department continues to build its organizational competencies, ensuring our ability to protect and promote the health of our community effectively.

POLICY DEVELOPMENT & SUPPORT

- The Appleton Health Department is committed to advancing public health by fostering a strong foundation in policy development and support. This section of the annual report showcases key accomplishments and progress in policy development, collaboration, and technical assistance for the year 2023.

Collaborating with Local Government and Stakeholders

- Worked with city council members, local businesses, healthcare providers, and community organizations to draft, refine, and implement public health policies. This collaboration fostered a coordinated approach to addressing health issues.

Implement Health in All Policies (HiAP) Frameworks

- Implemented HiAP strategies that incorporate health considerations into decision-making across various sectors, such as urban planning, transportation, and strengthening infrastructure. This holistic approach ensured that health is a key component in policies beyond the traditional health domain.



Figure 8: Steve Kihl, Environmental Health Supervisor, providing food safety education at a public event.

Supporting Policy Compliance and Enforcement

- Provided education, resources, and technical assistance to businesses and community organizations to help them comply with health-related regulations. This included toolkits or offering workshops on best practices for adhering to public health policies, including community presentations to Farmer’s Market and Octoberfest vendors.

Emergency Preparedness and Response Planning

- Developed and supported policies related to emergency preparedness, such as protocols for infectious disease outbreaks, natural disasters, or other public health emergencies. Ensured these policies were up-to-date and reflective of current best practices is critical for community resilience.

Public Health Workforce Development Policies

- Advocated for and implemented policies that support the growth and sustainability of the public health workforce, such as training opportunities, workforce retention strategies, and funding for professional development. For example, full implementation of the City of Appleton’s flex policy has allowed staff to meet personal needs and reduce operational expenses

Equity-Focused Policy Initiatives

- Developed policies that specifically address health disparities and promote equity, such as ensuring language access, culturally responsive services, and targeted programs for underserved populations.

ACCOUNTABILITY & PERFORMANCE MANAGEMENT

In the past year, the Appleton Health Department has made significant strides in enhancing our accountability and performance management capabilities. Recognizing the importance of continuous improvement and a commitment to public health standards, we have undertaken comprehensive Public Health Accreditation Board (PHAB) readiness work. This report highlights key accomplishments in building a stronger, more transparent, and effective organization to serve the community's public health needs.

Implementation of a Performance Management System

- Began the early stages of planning to implement a comprehensive performance management system that tracks progress on key public health initiatives. This system can include performance metrics, dashboards, and regular reporting to ensure that the department’s activities align with strategic goals and deliver desired outcomes.

Regular Public Reporting of Health Outcomes

- Published annual and quarterly reports, health scorecards, and performance summaries that provide transparent updates on the department’s progress in key areas, such as communicable disease control, environmental health, and community health improvement initiatives.

Staff Performance Reviews and Professional Development

- Implemented a structured process for staff performance reviews that include setting clear expectations, providing feedback, and identifying opportunities for professional growth. This process also included the tracking of public health core competencies. This helps ensure that staff members are equipped with the skills and knowledge necessary to meet public health demands.

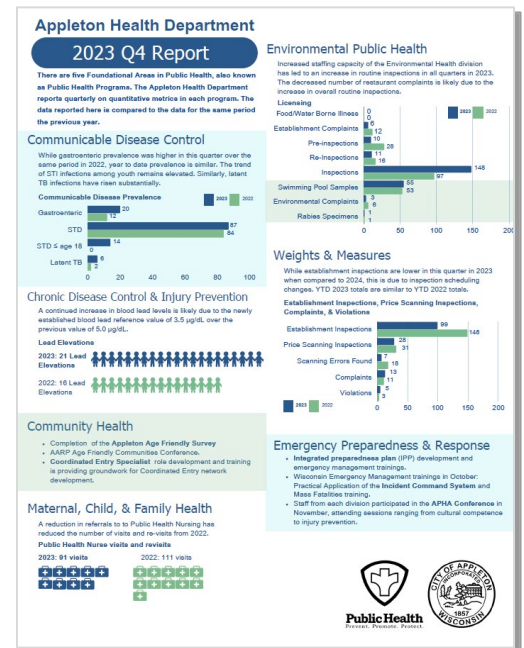


Figure 9: Quarterly Report redesigned to improve health literacy

Financial Accountability and Grant Management

- Ensured responsible stewardship of public funds through rigorous financial management practices, including tracking grant expenditures, conducting audits, and adhering to funding requirements. Additionally, we worked to reduce the shortfall between revenue and expenses. This taxpayer subsidy had previously been a feature of our revenue-generating programs. This accountability demonstrates prudent use of resources and strengthens grant management.

Accreditation and Standards Compliance

- Made continual strides in pursuing public health accreditation, which involves meeting national standards for quality and accountability. Regularly reviewing and updating policies and procedures to comply with these standards and maintain statutory compliance helps improve the department's performance and credibility.

Strategic Planning and Goal Setting

- Continued development of the department's strategic plan to reflect current public health priorities and setting specific, measurable goals to track progress. This process ensures that the department remains focused on achieving its mission and vision.

EMERGENCY PREPAREDNESS & RESPONSE

The Appleton Health Department continues to prioritize emergency preparedness and response, a foundational capability essential to safeguarding the health and well-being of our community. Over the past year, we have made significant advancements in readiness, strengthened partnerships, and responded effectively to public health emergencies. This section highlights our key accomplishments in emergency preparedness and response.



Figure 10: Create a plan for household emergency preparedness

National Preparedness Month

September is recognized annually as National Preparedness Month in the United States, sponsored by the Federal Emergency Management Agency (FEMA) within the U.S. Department of Homeland Security. This

month is dedicated to raising awareness about the importance of emergency preparedness and encouraging residents to take proactive steps to be ready for any potential disaster that might affect the City of Appleton.

During National Preparedness Month, the Appleton Health Department, guided by FEMA, shares crucial information and resources with the community. These include tips on creating emergency communication plans, receiving alerts for potential hazards, and assembling emergency kits. Using our social media platforms, we engage with the public, providing guidance on how to prepare for emergencies and emphasizing the importance of readiness.

The 2023 theme for National Preparedness Month was "Preparing Older Adults for Disasters," focusing on equipping older adults with the knowledge and resources needed to stay safe during emergencies. Preparedness efforts included family communication plans, community involvement, and disaster supply kits, all aimed at encouraging residents to take simple but effective steps to enhance their readiness for disasters such as natural events, power outages, or medical crises.

Community Engagement and Partnerships

Effective emergency response relies on strong partnerships with businesses, non-profits, community leaders, and residents. National Preparedness Month serves as a reminder that preparedness is a shared responsibility within our community, and every step taken by individuals and organizations enhances our collective ability to respond to emergencies and protect lives.

We encourage residents to take practical steps to increase their preparedness, such as creating a family communication plan, building an emergency kit, volunteering in the community, or ensuring access to emergency alerts. These actions help create a more resilient community that can better withstand and recover from disasters.

Building Resilience Through Collaboration

The Appleton Health Department facilitates partnerships between public and private stakeholders to mobilize a broad range of resources and expertise during emergencies. Collaborative efforts with local organizations and community leaders are crucial in identifying vulnerabilities, developing targeted plans, and building resilience within our communities.

By fostering a culture of ongoing partnership development, we ensure that Appleton is equipped to respond and recover more effectively from any disaster. These collaborative efforts enhance our readiness and reinforce our commitment to protecting the health and safety of all Appleton residents.

COMMUNICATIONS

Over the past year, the Appleton Health Department has focused on enhancing its foundational capability of communication to ensure that accurate, timely, and actionable health information reaches diverse audiences across our community. By effectively disseminating health information, we empower individuals to make informed decisions, promote healthier behaviors, and contribute to a safer, healthier city.



Tailoring Communications for Diverse Audiences

In 2023, we completed a quality improvement project aimed at tailoring health messaging across various social media platforms to better reach our community. We are committed to developing and deploying culturally and linguistically appropriate communications and educational resources. This includes collaborating with community stakeholders and influencers to create materials that resonate culturally and reflect the unique needs of our residents.

Our communications strategy prioritizes culturally sensitive and relevant responses to public health

developments. By applying principles of risk communication, health literacy, and health education, we aim to inform the public effectively while avoiding messaging that could unintentionally harm or marginalize disproportionately affected populations. This approach was particularly important in our response to Mpox, where asset-based communication was used to empower communities rather than reinforce damaging narratives.

Expanding Social Media Presence

Recognizing the power of social media to improve health outcomes and extend community reach, the Appleton Health Department has strategically enhanced its use of digital platforms. Facebook has been a cornerstone of our efforts to engage the public, share information, and promote healthier behaviors. The Appleton Health Department utilizes a variety of communication channels, including Facebook, in-person community networks, and formal press releases. Facebook posts and community engagement efforts bring public health information into familiar and social settings, enhancing reach and relatability. Urgent and official press releases maintain the necessary formality for critical information, ensuring our messages are trusted and clear.

Promoting Health Equity Through Digital Engagement

One of the most significant advantages of our expanded social media strategy is the ability to reach diverse and underserved populations. By utilizing varied platforms, culturally sensitive messaging, and translation services, we tailor content to specific communities, ensuring that everyone has access to timely and useful health information. This approach helps bridge information gaps, promote health equity, and reduce health disparities, making our communications more inclusive and effective.

Social media has transformed the way the Appleton Health Department communicates with the public. By embracing these digital tools, we have been able to disseminate information, engage with the community, and reach diverse audiences like never before. Our commitment to communication excellence empowers residents to make informed decisions about their health—all from the convenience of their smartphones.

COMMUNICABLE DISEASE

Infectious disease prevention and case surveillance are foundational to public health, enabling us to understand disease patterns, control outbreaks, and protect our community. At the Appleton Health Department, we engage in disease investigation and case surveillance each time a reportable condition poses a significant health threat. This work, guided by local, state, and federal regulations, involves collaboration with healthcare providers, laboratories, and other partners to monitor, control, and prevent diseases in our community.

We monitor approximately 120 notifiable diseases and conditions, including infectious diseases like Pertussis and Measles, and foodborne outbreaks such as Listeria. By gathering data on who is affected, where they are affected, and how they are impacted, our surveillance efforts provide critical insights that guide public health actions.

Partner Services Program

The Appleton Health Department plays a crucial role in HIV prevention and care through the Partner Services Program, a confidential service provided by specially trained staff. Our Public Health Nurses assist individuals diagnosed with HIV and their partners, ensuring access to medical care and other essential services. In collaboration with community partners like Vivent Health, our nurses provide testing, case management, and support services to those affected by HIV.

In 2023, our nurses received 12 referrals and worked discreetly with individuals newly diagnosed with HIV to identify and notify their sexual or needle-sharing partners. Partners are offered free, confidential testing, and those testing positive receive immediate linkage to care. Prevention information, safer sex education, needle exchange programs, and pre-exposure prophylaxis (PrEP) are provided to those testing negative. The program's primary goals include breaking the chain of HIV transmission, early diagnosis, timely treatment, and improving equitable access to care.

Partnership with Vivent Health

Vivent Health, a specialized healthcare provider for people living with HIV, offers an "HIV medical home" with comprehensive care, including medical check-ups, personalized treatment, and support for antiretroviral therapy (ART). ART effectively reduces the viral load in the blood to undetectable levels, minimizing the risk of transmission. Beyond medical care, Vivent Health connects clients to mental health services, pharmacy support, case management, housing assistance, and more, fostering hope, resilience, and healthier futures for our community.



Figure 11: Pre-exposure prophylaxis (PrEP) is an effective measure to break the chain of HIV transmission

Vaccines for Children (VFC) and Vaccines for Adults (VFA) Programs

The Appleton Health Department participates in the Federal Vaccines for Children (VFC) program, which provides vaccines to eligible children who are Medicaid-eligible, uninsured, underinsured, or American Indian/Alaska Native. The VFC program ensures that children receive recommended vaccinations on schedule, protecting them from 16 diseases.

Additionally, the department is a provider for the Vaccines for Adults (VFA) program, which assists uninsured and underinsured adults aged 19 and older in accessing vaccines. The VFA program addresses vaccine-specific eligibility criteria and aims to close the immunization gap for vulnerable populations.

Collaborations with Community Partners



Figure 12: Public Health Nurses, Katie Schink-Pawlowski and Jena McNeil, explore the "Food to Grow" Exhibit

Community partnerships are essential to our communicable disease efforts. One key partner is the Building for Kids Children's Museum (BFK), which collaborated with the department during the COVID-19 pandemic by hosting pediatric vaccination clinics. The non-traditional setting provided a welcoming environment for families, enhancing access to critical vaccination services.

Looking ahead, we are excited to serve as an advisory partner for BFK's "Food to Grow" initiative, which aims to educate children and families about nutrition, food sourcing, and food equity through a new, permanent exhibit. This effort aligns with our mission to promote healthier lifestyles and support community well-being.

Tuberculosis (TB) and Directly Observed Therapy (DOT)

In managing communicable diseases like Tuberculosis (TB), the department employs Directly Observed Therapy (DOT), where trained health workers ensure patients adhere to their TB medication regimen. This method helps prevent the spread of TB and ensures effective treatment outcomes.

Sexually Transmitted Diseases (STDs) Surveillance

The department monitors sexually transmitted diseases (STDs) and has observed a significant increase in cases among individuals under 18, mirroring national trends. Understanding these patterns is critical to developing targeted prevention and intervention strategies to address rising STD rates in our community.

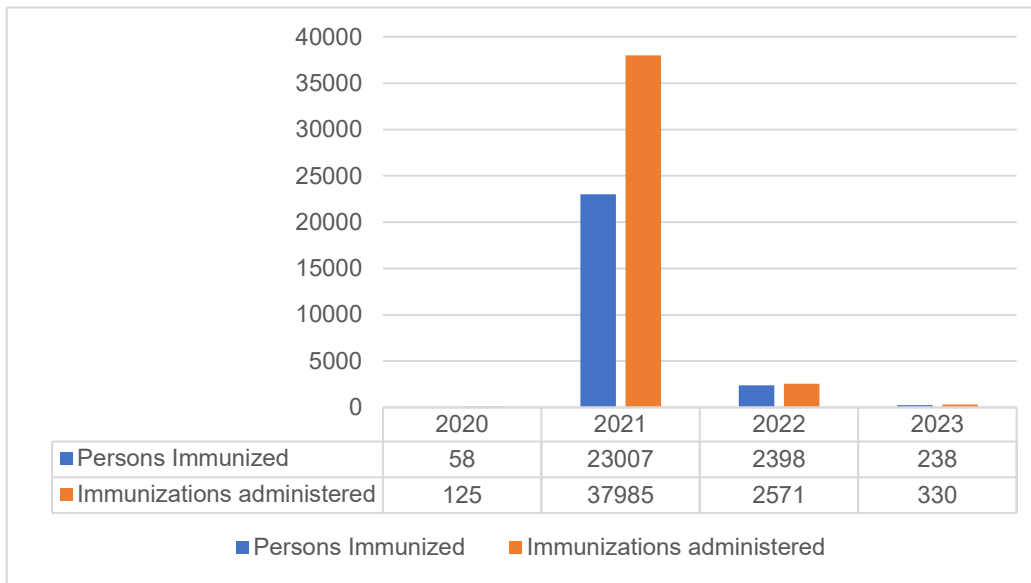


Figure 13: Immunization Clinics illustrates the number of persons immunized and the total immunizations administered from 2020 to 2023. These are the highlights:

Figure 13: Immunization Clinics

2020: The numbers were relatively low, with only 58 persons immunized and 125 immunizations administered. This year likely reflects limited clinic activity, possibly due to the onset of the COVID-19 pandemic and related disruptions in routine healthcare services.

2021: There was a significant surge in immunization activity, with 23,007 persons immunized and 37,985 immunizations administered. This dramatic increase is likely attributed to the COVID-19 vaccination rollout, which saw a high demand and a large-scale effort to vaccinate the population.

2022: The numbers dropped considerably compared to 2021, with 2,398 persons immunized and 2,571 immunizations administered. The sharp decline suggests that the intensive COVID-19 vaccination efforts had subsided, with fewer people needing new vaccinations as many had already received their initial doses.

2023: The figures continued to decrease, with 238 persons immunized and 330 immunizations administered. This further reduction indicates a return to routine immunization levels, as the urgency of mass COVID-19 vaccinations diminished.

Overall, the data highlights a peak in immunization efforts in 2021, driven primarily by the COVID-19 vaccination campaign, followed by a steady decline as the pandemic’s immediate impacts waned and routine vaccination activities resumed.

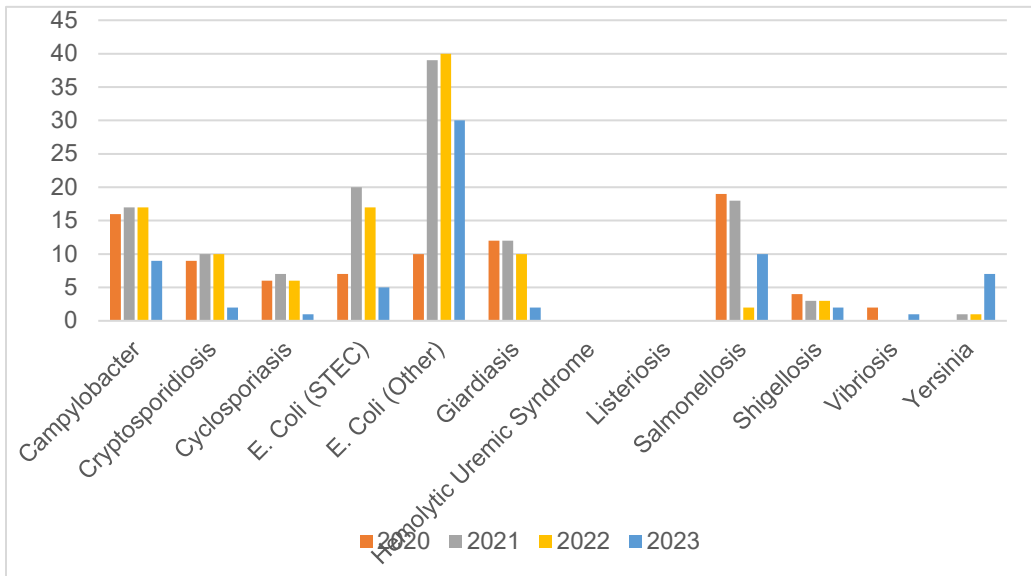


Figure 14: Communicable Disease Cases (Gastroenteric) displays the reported cases of various gastroenteric diseases from 2020 to 2023. The data is represented by bars for each year (2020, 2021, 2022, and 2023) across multiple disease categories. Key observations include:

Figure 14: Communicable Disease Cases (Gastroenteric)

Campylobacter: There was a steady occurrence of cases across all four years, with minor fluctuations, showing consistent presence within the community.

Cryptosporidiosis: The number of cases remained relatively low and stable over the years, indicating a consistent but minimal impact.

Cyclosporiasis: Cases were consistently low, with only slight variations each year, reflecting limited occurrence.

E. coli (STEC): The cases of Shiga toxin-producing E. coli were low, with a slight increase in 2022, showing some variability but overall infrequent cases.

E. coli (Other): There was a significant spike in cases in 2021, far surpassing other years, indicating an outbreak or increased reporting during that year.

Giardiasis: Cases showed a general decline over the four years, with the highest in 2020 and the lowest in 2023, suggesting effective control measures or reduced transmission.

Hemolytic Uremic Syndrome: This condition had consistently low reported cases, with slight occurrences in a few years.

Listeriosis: Cases remained low and stable, with minimal changes over the years.

Salmonellosis: There was a noticeable peak in cases in 2021, which then declined significantly in subsequent years, suggesting a resolved outbreak or successful intervention.

Shigellosis: Cases were generally low, with small fluctuations over the years, reflecting its sporadic nature.

Vibriosis: There were very few cases reported, highlighting its rare occurrence within the community.

Yersinia: This condition had a slight increase in 2023, while it remained low or absent in previous years, indicating new or heightened activity.

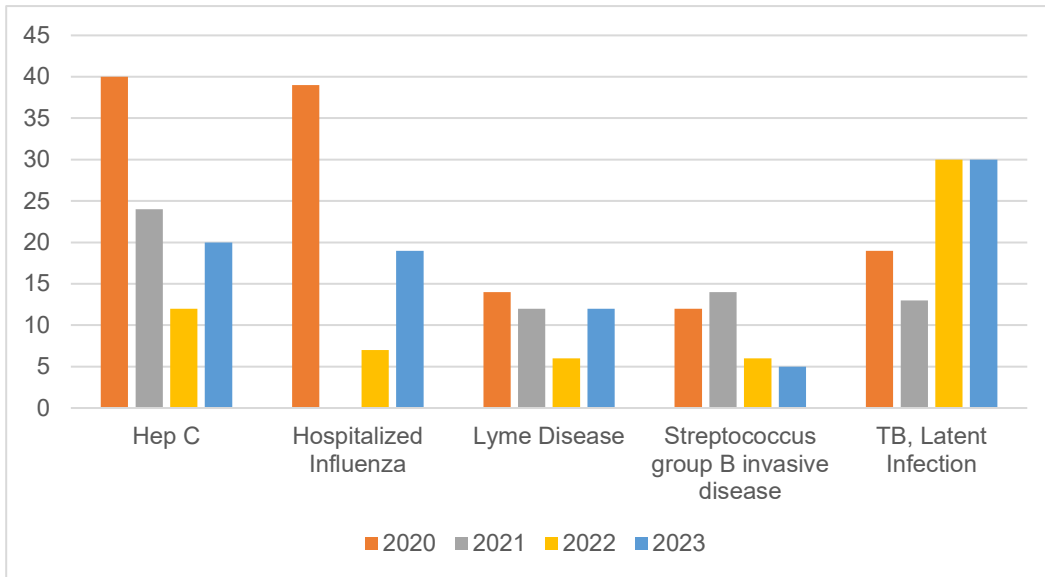


Figure 15: Communicable Disease Cases (Other) shows the reported cases of various non-gastroenteric communicable diseases from 2020 to 2023. Each bar represents the number of cases reported for each year (2020, 2021, 2022, and 2023) across different diseases. Key observations include:

Figure 15: Communicable Disease Cases (Other)

Hepatitis C (Hep C): There was a significant decline in cases from 2020, which had the highest number, to 2022, with the fewest. However, 2023 showed a slight increase, suggesting fluctuating trends in detection or reporting of Hepatitis C.

Hospitalized Influenza: The highest number of cases occurred in 2020, reflecting widespread impact, likely influenced by the concurrent COVID-19 pandemic. There was a notable decrease in 2021, with cases gradually increasing again in 2022 and 2023, possibly indicating the variable impact of influenza seasons and the influence of public health measures like mask-wearing and social distancing.

Lyme Disease: Cases of Lyme Disease were similar year to year with a slight decrease in 2022.

Streptococcus Group B Invasive Disease: Cases dropped considerably from 2021 to 2022. Cases remained low in 2023.

Tuberculosis, Latent Infection: The number of latent TB cases increased significantly from 2020, peaking in 2022 and maintaining high levels in 2023. This trend underscores ongoing concerns about TB prevention and management, particularly latent infections that can reactivate and pose broader health risks.

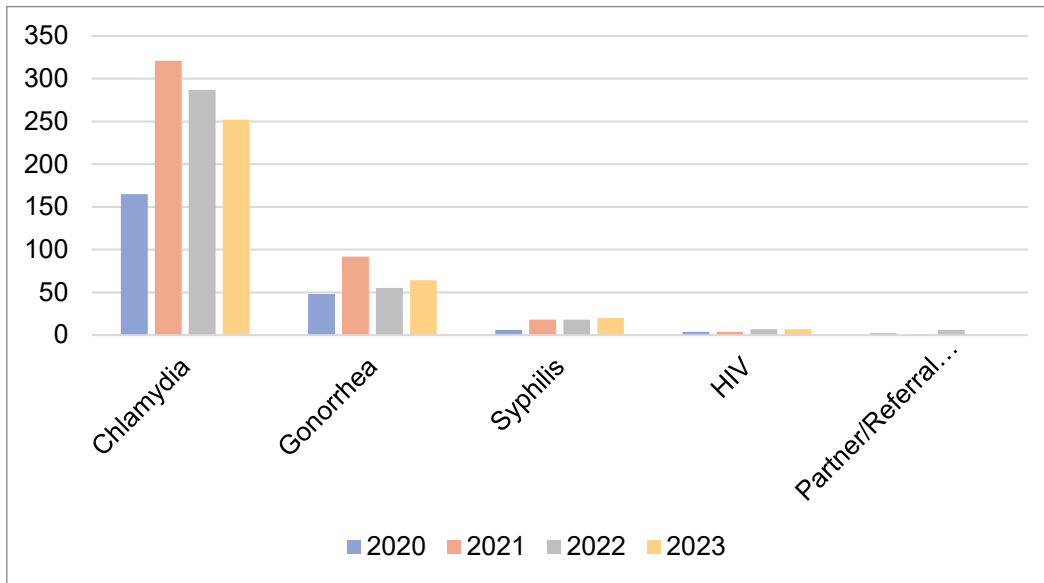


Figure 16: Sexually Transmitted Disease, shows the reported cases of various sexually transmitted diseases (STDs) from 2020 to 2023. The data includes Chlamydia, Gonorrhea, Syphilis, HIV, and cases managed through the Partner/Referral Program (Contacts). Each bar represents the number of cases reported in each year.

Figure 16: Sexually Transmitted Disease

Chlamydia: Chlamydia had the highest number of reported cases across all the STDs shown, with a peak in 2021. There was a slight decline in 2022 and 2023, but the number of cases remained significantly high compared to other STDs, highlighting it as the most prevalent STD in the community.

Gonorrhea: The number of Gonorrhea cases showed a slight increase year over years. This trend suggests necessitating ongoing prevention and treatment efforts.

Syphilis: Cases of Syphilis were relatively low across all years, showing minor fluctuations with slight increases in 2022 and 2023. Although the case numbers are small, the upward trend warrants attention for early detection and intervention.

HIV: HIV cases were consistently low over the years, indicating controlled levels of new infections. The stability in case numbers reflects the ongoing impact of prevention measures, including testing, treatment, and education efforts.

Partner/Referral Program (Contacts): This category only appears in 2022, indicating an active effort in managing contacts through the Partner Services Program that year. This service is essential in breaking the chain of transmission and ensuring those exposed receive necessary testing and care.

Overall, the chart highlights Chlamydia as the most significant STD rate of infection, followed by increasing trends in Gonorrhea and a slight rise in Syphilis cases. These patterns underscore the importance of targeted public health strategies, such as increased testing, education, and partner notification programs, to manage and reduce the impact of STDs in the community.

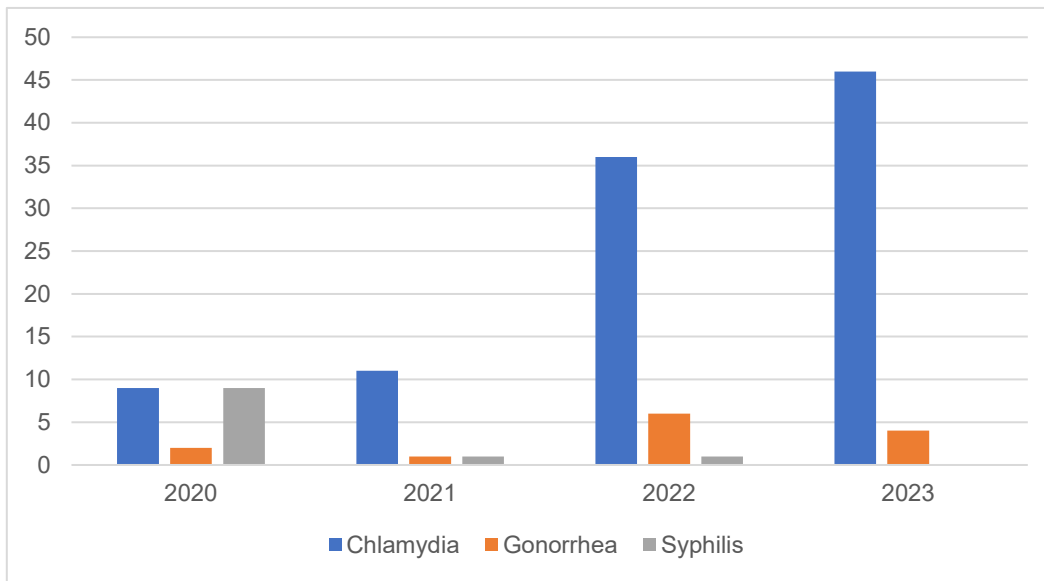


Figure 17: Sexually Transmitted Disease≤18 shows the reported cases of Chlamydia, Gonorrhea, and Syphilis among individuals aged 18 and younger from 2020 to 2023.

Figure 17: Sexually Transmitted Disease≤18

Chlamydia: Chlamydia cases are consistently the highest among the three STDs for those aged 18 and younger. There was a marked increase from 2020, peaking in 2023 with nearly 50 reported cases. This trend matches increased infection rates nationwide in this age group, highlighting the need for targeted prevention and education efforts.

Gonorrhea: Gonorrhea cases were minimal compared to Chlamydia but showed a slight increase over the years, particularly in 2022 and 2023. Although the numbers are lower, the rising trend suggests a need for ongoing monitoring and intervention to prevent further spread.

Syphilis: Syphilis cases were the lowest among the three STDs, with very few reported cases each year. The trend remained stable with no significant increases.

Overall, the chart highlights that Chlamydia is the most significant STD affecting those 18 and younger, with a notable upward trend over the four years. The data underscores the importance of comprehensive sexual health education, increased access to testing and treatment, and targeted prevention strategies to address the rising rates of STDs in this vulnerable age group.

CHRONIC DISEASE & INJURY

The Appleton Health Department works to prevent chronic disease and injury within the City of Appleton by providing services, education, and working with a diversity of coalitions.

We work with the East Central Wisconsin Regional Planning Commission and their community partners as they strive to make the City of Appleton more walkable and bikeable. In addition, we participate as a general and steering member on the Fox Valley Safe Kids Coalition, which works on injury prevention objectives for children under the age of 18. Appleton Health Department is also a member of the Outagamie County Child Death Review Team, which reviews all child deaths and domestic abuse related deaths in order to better understand how and why these deaths occur with the hope of using the findings to take preventative action that will improve the health and safety of the community.

SAFE SLEEP

As a matter of prevention, Appleton Public Health Nurses provide education and resources to families about the importance of Safe Sleep practices to prevent sudden infant death syndrome (SIDS). In 2023, the nurses offered home visits to new families and continued to collaborate with the local family health center, Mosaic, so families in need could obtain education and “Pack’n’Play” cribs distributed as part of the Safe Sleep Program. Nurses also counsel caregivers on safe sleep practices during pregnancy and baby care home visits. In addition, Appleton Health Department staff are part of the Fox Valley Safe Sleep Coalition. In 2023, The Fox Valley Safe Sleep Coalition established a mission and vision statement and worked on recruiting additional community partners. In addition, the coalition reviewed safe sleep resources currently being used in the community and chose one resource for promotion. Finally, the group began working on three safe sleep traveling displays. The funds were secured, and promotional materials are in the process of being created. The displays will move to predetermined locations around the Fox Cities to serve as a visual reminder of what safe sleep looks like.

LEAD SURVEILLANCE & ENFORCEMENT

The Appleton Health Department operates lead poisoning prevention to alleviate the harm caused by lead exposure which typically affects children under the age of 6 years old, particularly those living in low-income areas. Appleton Public Health Nurses receive referrals from physicians and then conduct home visits to determine sources of lead exposure. While with the families, our nurses educate them on best practices and how to keep their children safe.

In 2012, CDC introduced the blood lead reference value (BLRV) to identify children with higher levels of lead in their blood compared to most other children. This level is based on the 97.5th percentile of the blood lead values among U.S. children ages 1-5 years from 2015-2016 and



Figure 18: Wet Method cleaning is the best method for picking up unseen lead dust

2017-2018 National Health and Nutrition Examination Survey (NHANES) cycles. Children with blood lead levels at or above the BLRV represent those at the top 2.5% with the highest blood lead levels.

NHANES is a population-based survey to assess the health and nutritional status of adults and children in the U.S. and determine the prevalence of major diseases and risk factors for diseases. Every four years, CDC reanalyzes blood lead data from the most recent two NHANES cycles to determine whether the reference value should be updated.

The value of 3.5 µg/dL was derived from NHANES data from the 2015-2016 and 2017-2018 cycles. The Federal Advisory Committee, called the Lead Exposure and Prevention Advisory Committee (LEPAC), unanimously voted on May 14, 2021 in favor of recommending that CDC update the reference value to 3.5 µg/dL based on these NHANES data.

Lead can get into one’s body by consuming contaminated water or food, or from breathing fumes or dust that contain lead.

As noted, children under the age of 6 years old are at an increased risk for lead exposure, due to their rapid rate of growth and their tendency to place toys and other objects in their mouths that could contain lead or leaded dust.

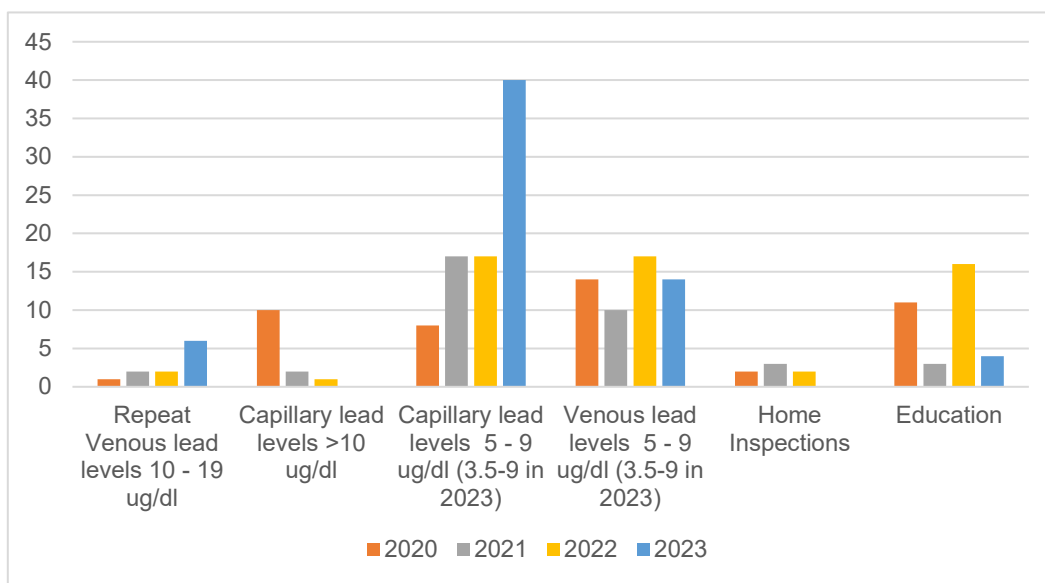


Figure 19: Lead Elevations

However, adults may also experience elevated blood lead levels. Most are exposed to lead at work. A greater chance for lead exposure is found in people who work in occupations related to mining, ironwork or welding, construction including building renovation and remodeling, smelters, shooting ranges, manufacture and disposal of car batteries, automobile radiator repair, and manufacture of pottery or stained glass. High lead

levels in adults are associated with cardiovascular effects, nerve disorders, decreased kidney function, and fertility problems, including delayed conception and adverse effects on sperm and semen, such as lower sperm counts and motility, increases in blood pressure, hypertension, and incidence of essential tremor, a degenerative disorder of the central nervous system whose most recognizable feature is a tremor of the arms or hands during voluntary movements, such as eating and writing.

Lead Safe Homes Program

Along with testing lead levels and educating families on lead poisoning prevention, the Appleton Health Department also refers families to the Lead Safe Homes Program (LSHP) which is a Health Services Initiative with the Children’s Health Insurance Program (CHIP), otherwise known as Medicaid or BadgerCare Plus in Wisconsin. This program provides repairs to owner-occupied and rental properties to make them lead-safe. It

is available to persons enrolled In Medicaid or BadgerCare Plus as a way to prevent lead poisoning. Families with children under the age of 19 and pregnant women may qualify for the program.

CHILD PASSENGER SAFETY

In 2022, the Appleton Health Department started a Child Passenger Safety program. Four nurses completed training to become Certified Child Passenger Safety Technicians (CPST). Child Passenger Safety Technicians are car seat experts who have taken a roughly 40-hour class with curriculum written by NHTSA in collaboration with National CPS Board and Safe Kids Worldwide. Some 3 out of 4 child safety seats are not used correctly. The correct installation of child safety seats is often very confusing to parents, grandparents, and caregivers. Changing technology in vehicles and child safety seats adds to this confusion. Appleton Health Department CPST's provide education, training, and other resources on child passenger safety for families in the City of Appleton.

OVERDOSE FATALITY

The Appleton Health Department actively participates in the Overdose Fatality Review (OFR) teams of Outagamie and Winnebago Counties, with the shared mission of preventing overdose deaths. These teams work by examining individual, organizational, and systemic factors that contribute to overdose deaths in their respective counties. Rather than assigning blame, the focus of these reviews is on identifying opportunities for system-level changes to prevent future fatalities.

Central to Winnebago County's OFR efforts is the guiding principle that "overdoses are preventable." Each month, a diverse group of stakeholders, including local health departments, healthcare providers, law enforcement, addiction treatment centers, and community organizations, convene to review overdose cases. During these meetings, each organization shares insights about the decedent's life and the circumstances of their death, fostering discussions about risk factors and systemic issues.

One of the first initiatives arising from Winnebago County's OFR team is the "We Heart You" campaign, a compassionate outreach effort aimed at connecting individuals affected by substance use disorder to critical resources and services. The campaign has expanded to include the Solutions Peer Response Team, a dedicated "We Heart You" app, and a public service announcement short film, all designed to support those impacted by substance use.



Figure 20: We Heart You cards connect to the We Heart You mobile app

Julie Erickson, a nurse with the Appleton Health Department, plays an active role in both the Outagamie and Winnebago County OFR teams. She has collaborated with the Appleton Area School District to provide school counselors, nurses, and support staff with essential information about substance use disorder and the resources available through the "We Heart You" program. By reaching out early to middle and high school students struggling with substance use, Julie and her partners help ensure that these young people know they are not alone and that there are people who care and want to help them.

COMMUNITY HEALTH

On July 19th, the City of Appleton Common Council approved a table of organization change, establishing a new Division of Community Health within the Appleton Health Department. This change included the creation of the Community Health Supervisor position to lead the new division, as well as the transition of the Coordinated Entry Specialist position from the Department of Community and Economic Development to the newly formed Community Health Division.

This structural change aims to strengthen the Appleton Health Department’s role as a Community Chief Health Strategist. It enhances our capacity for data collection, fosters collaboration with stakeholders, and supports a Tri-County regional approach to understanding and improving the conditions that impact residents in our communities. The reorganization of the Coordinated Entry Specialist position also emphasizes the importance of addressing housing and other social determinants of health. These adjustments will enable the department to make data-driven decisions that address health inequities faced by underserved and marginalized populations.

To further support our community, we are part of the newly established “Basic Needs Team,” a collaborative effort between the Health and Police Departments focused on assisting individuals and families experiencing homelessness or lacking other basic needs, with an emphasis on support rather than criminalization. Our Coordinated Entry Specialist works with individuals and families to secure short- and long-term housing through supportive housing programs that offer case management, subsidized rent, and budgeting support, utilizing the statewide Coordinated Entry system to prioritize placements.



Figure 21: Coordinated Entry cards connect clients to the Community Health Team

ENVIRONMENTAL PUBLIC HEALTH

Environmental health is a critical branch of public health that focuses on the relationship between people and their environment, promoting human health and well-being while fostering safe and healthy communities. The field aims to reduce environmental exposures in air, water, soil, and food through policies and programs that protect people and improve community environments.

The Environmental Public Health (EPH) division of the Appleton Health Department safeguards those who live, work, and play in Appleton by promoting a safe and healthy environment. Over the past year, the EPH team has been dedicated to preventing, identifying, and responding to various environmental health issues. This section highlights the division's achievements, initiatives, and collaborations throughout the year.



Figure 22: A crowd gathers for summer fun Downtown Appleton

Ensuring Food Safety at Community Events

Appleton's warm-weather festivals and markets are popular community gatherings featuring diverse food options from licensed vendors. The Environmental Health division plays a crucial role in ensuring the safety of food at these events by inspecting and licensing vendors and educating non-profit organizations on safe food handling. Health inspectors are actively present at events such as Art in the Park, the Appleton Farm Market, Mile of Music, Latino Fest, and Octoberfest, conducting inspections and providing guidance on food safety practices like proper temperature control, hand hygiene, and food handling.

Addressing Increased Demand for Inspections

A detailed time study within the Environmental Health Division revealed a significant increase in pre-licensing inspections—those required for new restaurants or ownership changes—from 57 in 2021 to 121 in 2022. Inspections of Tourist Rooming Houses, such as AirBnB and Vrbo, also saw a rise. To address these growing demands and ensure the timely completion of routine inspections, the Appleton Common Council approved the addition of an Environmentalist position in November 2022.

In December 2022, a new license fee schedule was approved and implemented on January 1, 2023. This adjustment allowed for sustainable funding of the new position and reduced the financial burden on taxpayers by covering billable activities through license fees. The additional staff member enabled the division to complete all routine inspections by the end of the licensing period for the first time in eight years.

Financial Impact and Program Efficiency

The addition of new staff significantly enhanced the division's efficiency and financial performance. In 2023, program revenue increased by approximately \$132,000 over projections, resulting in a net revenue increase of about \$68,000. This boost in revenue substantially decreased the need for levy subsidies to operate the

program, ultimately saving the City approximately \$54,000. These changes demonstrate the Appleton Health Department’s commitment to building and maintaining a strong organizational infrastructure for public health.

LICENSED ESTABLISHMENTS: PREINSPECTIONS

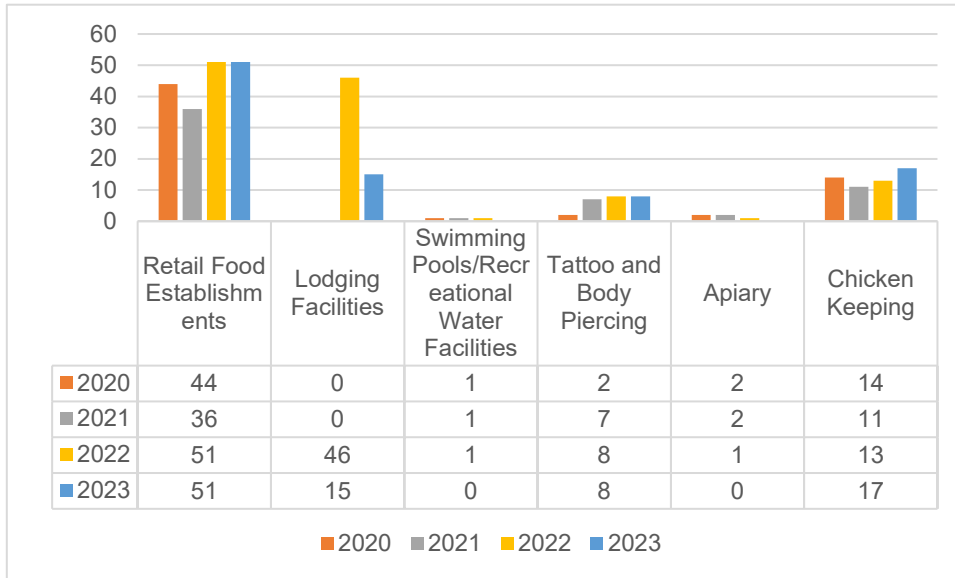


Figure 23: Licensed Establishments: Preinspections shows the number of preinspections conducted by the Appleton Health Department across various types of establishments from 2020 to 2023. The chart details the inspections for Retail Food Establishments, Lodging Facilities, Swimming Pools/Recreational Water Facilities, Tattoo and Body Piercing, Apiary, and Chicken Keeping.

Figure 23: Licensed Establishments: Preinspections

Retail Food Establishments

This category consistently had the highest number of preinspections each year. Preinspections peaked in 2022 and 2023 with 51 inspections, indicating a strong and continuous demand for new or changed licenses in food establishments.

Lodging Facilities

There were no preinspections for lodging facilities in 2020 and 2021. However, there was a sharp increase in 2022, with 46 inspections, suggesting a surge in new Tourist Rooming Houses during this period. In 2023, the number decreased to 15, indicating a return to lower activity levels.

Swimming Pools/Recreational Water Facilities

This category consistently had very few preinspections, with only one inspection per year from 2020 to 2022 and none in 2023, reflecting limited new or modified activity in this type of facility.

Tattoo and Body Piercing

Preinspections in this category fluctuated slightly, with an increase from 2 in 2020 to 7 in 2021 and remaining steady at 8 in 2022 and 2023. This steady level suggests consistent growth or interest in new tattoo and body piercing establishments.

Apiary

The number of preinspections was minimal, with two inspections in 2020 and 2021, and one inspection in 2022. There were no inspections in 2023, showing limited activity in this category over the years.

Chicken Keeping

This category saw some variability, starting with 14 preinspections in 2020, dropping slightly in 2021, and then increasing to 17 in 2023. The rise in inspections suggests growing interest in backyard chicken keeping in the community.

Overall Observations:

- The chart indicates a significant focus on Retail Food Establishments, which consistently had the highest number of preinspections, demonstrating maintained industry strength in the food service sector.
- Lodging Facilities saw a notable increase in preinspections in 2022, reflecting an spike in new or changing establishments during that year.
- Other categories, like Swimming Pools, Tattoo and Body Piercing, and Chicken Keeping, show steady but lower activity, highlighting more niche or specialized growth areas within the community.

LICENSED ESTABLISHMENTS: INSPECTIONS

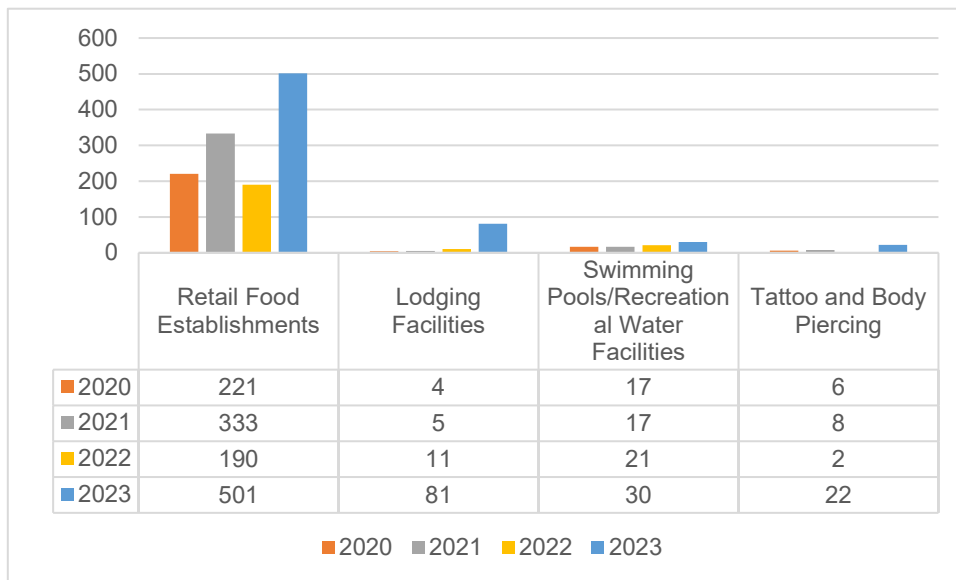


Figure 24: Licensed Establishments: Inspections displays the number of inspections conducted by the Appleton Health Department across various types of licensed establishments from 2020 to 2023. The chart includes data for Retail Food Establishments, Lodging Facilities, Swimming Pools/Recreational Water Facilities, and Tattoo and Body Piercing establishments.

Figure 24: Licensed Establishments: Inspections

Retail Food Establishments

Inspections of Retail Food Establishments show significant variation over the years. The number increased from 221 in 2020 to 333 in 2021, highlighting increased oversight due to pandemic-related health and safety

concerns. There was a notable drop in 2022 to 190 inspections, followed by a dramatic rise to 501 inspections in 2023. This sharp increase was a result of increased staff levels to preform routine inspections.

Lodging Facilities

Inspections of lodging facilities remained minimal in 2020 and 2021, with only 4 and 5 inspections, respectively. There was a slight increase in 2022, with 11 inspections, and a significant jump to 81 inspections in 2023, reflecting continued operation of licensed lodging establishments.

Swimming Pools/Recreational Water Facilities

Inspections in this category were relatively stable, with 17 inspections each in 2020 and 2021, increasing slightly to 21 in 2022 and 30 in 2023.

Tattoo and Body Piercing

Inspections of tattoo and body piercing establishments varied over the years, starting with 6 inspections in 2020, increasing to 8 in 2021, but dropping to just 2 in 2022. In 2023, inspections surged to 22, showing the continued operation of licensed body art establishments.

LICENSED ESTABLISHMENTS: REINSPECTIONS

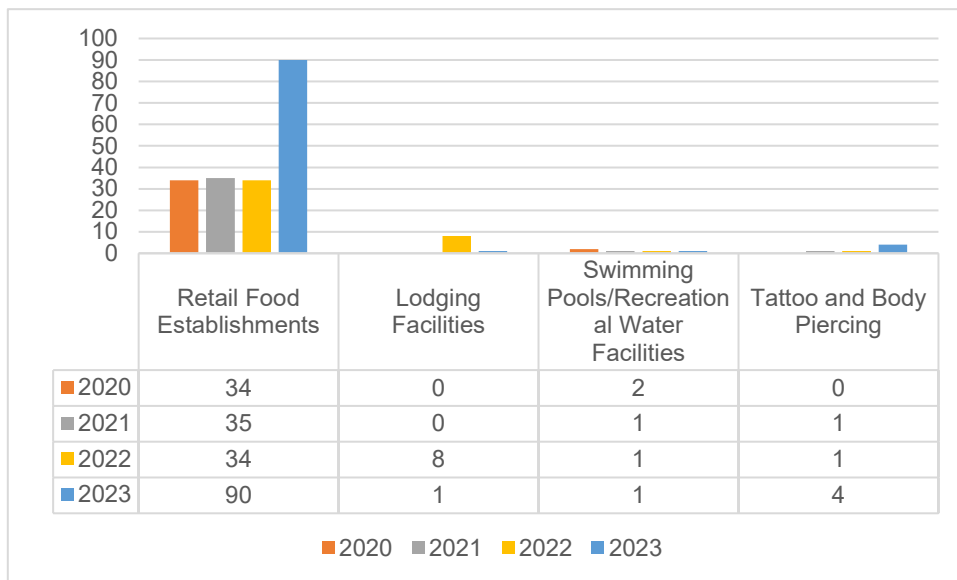


Figure 25: Licensed Establishments: Reinspections illustrates the number of reinspection conducted by the Appleton Health Department across various licensed establishments from 2020 to 2023. The data includes reinspection for Retail Food Establishments, Lodging Facilities, Swimming Pools/Recreational Water Facilities, and Tattoo and Body Piercing establishments.

Figure 25: Licensed Establishments: Reinspections

Retail Food Establishments

The number of reinspection for Retail Food Establishments remained relatively stable from 2020 to 2022, with 34-35 reinspection each year. However, there was a significant increase in 2023, with 90 reinspection conducted. Reinspection match the increase in overall number of inspection for the same time period.

Lodging Facilities

Reinspections for Lodging Facilities were minimal, with no reinspections from 2020 to 2021, a slight increase to 8 in 2022, and just 1 in 2023. The low numbers reflect either strong compliance within this category or fewer operational changes requiring follow-up.

Swimming Pools/Recreational Water Facilities

Reinspections in this category were low throughout the observed years, with only 2 reinspections in 2020 and 1 per year from 2021 to 2023. This stability indicates consistent compliance or fewer issues necessitating follow-up reinspections.

Tattoo and Body Piercing

Reinspections of Tattoo and Body Piercing establishments varied, starting with no reinspections in 2020, 1 in both 2021 and 2022, and increasing to 4 reinspections in 2023.

Overall Observations:

- The most notable trend is the significant rise in reinspections of Retail Food Establishments in 2023, indicating a possible focus on stricter enforcement of food safety standards or increased challenges in maintaining compliance.
- Other categories, including Lodging Facilities, Swimming Pools, and Tattoo and Body Piercing, had comparatively low reinspection numbers, reflecting generally stable compliance with public health regulations in those sectors.



Figure 26: Residential homes licensed for Short Term Rental are called Tourist Rooming Houses

MATERNAL, CHILD, & FAMILY HEALTH

The Wisconsin Maternal Child Health (MCH) Program, administered by the Wisconsin Department of Health Services (DHS) and funded through Title V of the Social Security Act, is a public health initiative aimed at improving the health and well-being of women, infants, children, and families in Wisconsin. The Appleton Health Department plays a crucial role in implementing the MCH Program by partnering with local health departments, community organizations, healthcare providers, and other stakeholders to deliver essential services and support.

MATERNAL CHILD HEALTH (MCH) PROGRAM

Prenatal and Postnatal Care

The Appleton Health Department promotes access to quality prenatal and postnatal care to ensure that expectant mothers receive appropriate medical care, counseling, and support. Programs such as Prenatal Care Coordination (PNCC) help pregnant women access healthcare, nutrition, and additional support services, enhancing outcomes for both mothers and infants.

Home Visiting Services

The MCH Program supports home visiting services that provide in-home support to pregnant women and families with young children. These visits are designed to promote healthy pregnancies, enhance child development, and strengthen family functioning by offering education, resources, and personalized guidance.



Figure 27: This baby and parent use Safe Sleep practices

Infant and Child Health

The program emphasizes improving the health and well-being of infants and children through comprehensive healthcare services, including immunizations, well-child checkups, and developmental screenings. Specific health issues such as infant mortality, sudden infant death syndrome (SIDS), and childhood obesity are also addressed to ensure a healthy start for every child.

Community-Based Services

Through partnerships with local health departments and community organizations, the MCH Program offers a range of community-based services, including family planning, WIC (Women, Infants, and Children) nutrition services, and oral health care. These services support the overall health and well-being of families in Appleton.

Data Collection and Analysis

The program collects and analyzes data on maternal and child health indicators to identify trends, disparities, and areas for improvement. This data-driven approach informs program planning, policy development, and resource allocation, helping to address health disparities and promote health equity.

Training and Technical Assistance

The MCH Program provides training and technical assistance to local health departments, community organizations, and stakeholders, building capacity and enhancing the delivery of maternal and child health services in Appleton.

HIGHLIGHTS OF 2023

- The Appleton Health Department provided home visits to pregnant women and new families, assisting them in connecting to clinical care through resource sharing and referrals, ensuring families receive the support they need during critical times.
- Several local childcare centers were re-designated as “Breastfeeding Friendly” after participating in a statewide workgroup focused on equity and the improvement of the Breastfeeding Friendly Child Care toolkit, promoting supportive environments for breastfeeding families.
- Appleton Public Health Nurses participated in the Young Parent Conference, presenting virtually on important topics including pregnancy discomforts, breastfeeding, and safe sleep, offering valuable education and support to young parents.



Figure 28: Mother breastfeeds baby

MCH (Maternal and Child Health) Visits

The number of MCH visits shows a gradual increase over the years. Starting with the lowest in 2020, there was a steady rise each year, reaching the highest in 2023. This trend suggests a growing focus on maternal and child health services, possibly due to increased outreach and program efforts targeting this demographic.

Adult Visits

Adult visits were the highest in 2020, with a notable peak compared to other years, indicating high engagement during this period. This was likely influenced by the COVID-19 pandemic, as many health services were directed toward adults during this time. However, the number of visits decreased significantly in 2021 and remained stable in 2022 and 2023, suggesting a return to more routine service levels post-pandemic.

Elderly Visits

Visits in the elderly category peaked in 2021, surpassing other age groups that year. This increase may reflect targeted health interventions or increased outreach for elderly populations during this period. However, the numbers declined in 2022 and continued to drop further in 2023, showing a reduction in visits as pandemic-related efforts subsided.

Overall Observations:

- The data indicates that health visits were initially dominated by adults in 2020, likely due to pandemic-related services. Over time, there was a shift with increased MCH visits and a temporary rise in elderly visits in 2021.
- By 2023, MCH visits became the most prominent, reflecting sustained efforts in maternal and child health initiatives, while adult and elderly visits saw a reduction compared to previous peaks.
- This pattern highlights the shifting focus of community health efforts over the years, adapting to the evolving needs of the population, particularly emphasizing maternal and child health in recent times.

ACCESS TO & LINKAGE WITH CLINICAL CARE

The Appleton Health Department is committed to enhancing community wellness by providing access to essential healthcare services, including immunizations, clinical lab testing, and referrals to critical care providers. Our department serves as a link, connecting residents to healthcare resources to help them achieve optimal health.

In collaboration with Diverse & Resilient, we ensured safe and easy access to the Mpox vaccine, addressing the needs of our diverse community. Through the Wisconsin Department of Health Services' Local and Tribal Health Department (LTHD) Antigen Distribution Program, we distributed over 10,500 COVID-19 tests to local organizations. Our COVID-19 Public Health Fellow worked with key partners, including Pillars, Lawrence University, and the Multicultural Coalition, to address barriers heightened by the COVID-19 pandemic. In September, we provided 500 COVID-19 tests directly to residents at a local Farm Market and cultural event.

A cornerstone of our services is the continued operation of immunization clinics, offering vaccines through the Vaccines for Children (VFC) and Vaccines for Adults (VFA) programs. For those ineligible for these programs, our Public Health nurses connect residents with alternative healthcare providers. We also partnered with the Autism Society of Greater Wisconsin, Building for Kids Children's Museum, and Mosaic Family Health Center to provide sensory-friendly vaccination clinics in March, May, October, and November.

Through a partnership with the Wisconsin State Laboratory of Hygiene, we offer critical clinical lab testing in cases where insurance or other payor sources are unavailable. These services include testing for mycobacteria (such as Tuberculosis), norovirus, and rabies, helping to safeguard public health.



As an active member of the Appleton Refugee Resettlement Team led by World Relief Fox Valley, our Public Health nurses assist refugee families in connecting with healthcare resources essential for their successful transition into our community, ensuring they become healthy, active citizens in local schools, workplaces, and beyond.

Figure 29: Family served by World Relief Fox Valley

CONSUMER PROTECTION

The City of Appleton's Weights and Measures team protects consumers by ensuring that weighing and measuring devices are accurate, fair, and reliable. Led by City Sealer Eric Maggio and dedicated Weights and Measures Inspectors, the team regularly monitors gas pumps, price scanners, scales, and package weights, ensuring that consumers receive the correct value for their purchases.



Figure 30: Customers shopping a grocery store

To maintain price accuracy, most businesses assign employees to manage scanner price databases, sales tags, and shelf tags. However, the City's inspectors conduct unannounced price verification inspections to further protect consumers. Using a handheld barcode reader, inspectors compare the shelf or advertised price with the scanned price at checkout. In cases of consumer complaints, undercover purchases are made to verify the accuracy of prices. Violations of price accuracy laws may result in written warnings, civil penalties, or criminal and civil prosecutions. Recent high-profile statewide enforcement actions have led to significant monetary judgments against several large retail corporations.

The East Central Weights and Measures Consortium, established in 2003, addresses the consumer protection needs of multiple communities. Originally comprising seven municipalities—Ashwaubenon, Kaukauna, Kimberly, Little Chute, New London, Ripon, and Waupaca—the consortium has since expanded to include Berlin, Fox Crossing, Neenah, and most recently, Greenville, totaling eleven communities and providing 229 contracted days of service annually. The consortium inspects and tests all commercially used weighing and measuring devices for accuracy and proper operation, ensuring that customers consistently receive what they pay for.

Inspections are conducted at a wide variety of businesses, including food and convenience stores, restaurants, hardware stores, gas stations, manufacturing plants, and more. Some of the specific devices tested include computing and pre-pack scales, fuel meters, vehicle scales, petroleum pumps, and timing devices like car washes and tire pumps.

In 2023, the Consortium successfully expanded by adding the Village of Greenville and set the stage for a budget-neutral 2025, demonstrating fiscal responsibility and a commitment to sustainable growth. Each year, the Consortium celebrates Weights and Measures Week in recognition of the importance of accurate measurements, commemorating President John Adams' 1799 legislation that established the first U.S. weights and measures laws. As John Quincy Adams famously stated, "Weights and Measures may be ranked among the necessities of life to every individual of human society."

Through its proactive approach, the East Central Weights and Measures Consortium continues to safeguard consumers, ensuring fairness and accuracy in every transaction.

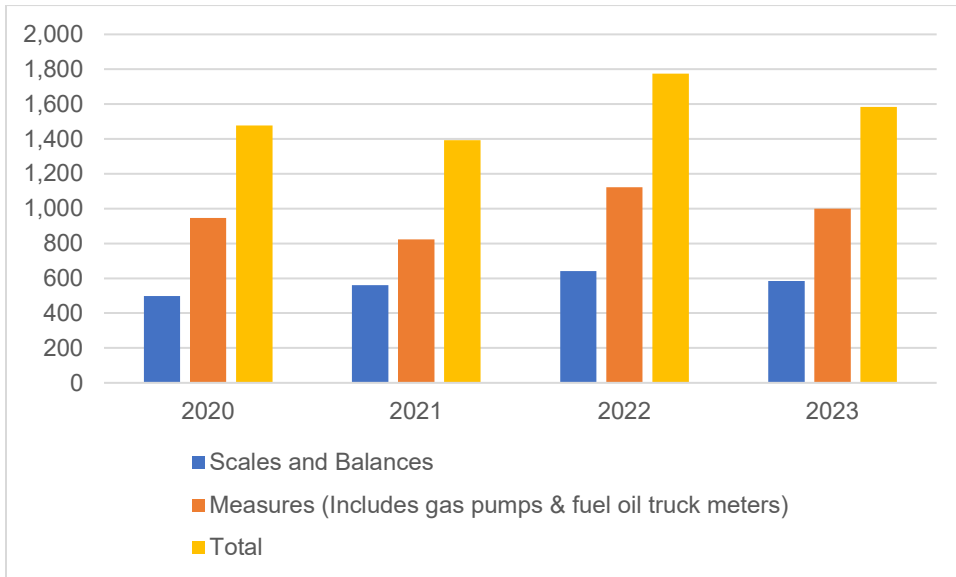


Figure 31: Equipment and Devices Examined

HIGHLIGHTS OF 2023

January 2023

The City of Appleton's Weights and Measures team continued its mission to provide robust consumer protection. This included a comprehensive range of services such as complaint investigation, measurement and weighing device testing, price scanning device testing, product check weighing, and label verification. The team also played a pivotal role in ensuring fair business practices, providing investigative services for the City Clerk's Office in licensing and regulating "going out of business" sales, commercial solicitors, salvage dealers, and taxicab/limousine service firms.

April 2023

The Appleton Weights and Measures team laid the groundwork for a budget-neutral 2025. This initiative involved refining processes, improving efficiency, and strategically managing resources across the Consortium. The proactive approach taken in 2023 is expected to secure the financial sustainability of the Weights and Measures program for the coming years.

May 2023

Appleton Weights and Measures continued its tradition of ensuring high compliance at the Appleton Downtown Inc. Farm Market by hosting the annual vendor information meeting. This meeting, mandatory for all market vendors, provided essential updates on regulations and best practices, ensuring a smooth and compliant operation throughout the summer market season. Vendor scales were also inspected during this meeting.

July 2023

The East Central Weights and Measures Consortium, administered by the Appleton Health Department, successfully added the Village of Greenville to its roster. This expansion was a significant step towards meeting the growing consumer protection needs in the region and was achieved without the need for additional staff resources, thanks to the efficient practices and streamlined operations developed over recent years.

September 2023

City Sealer Eric Maggio demonstrated exceptional leadership by engaging with the eleven contracted Consortium municipalities through face-to-face meetings. These interactions allowed for a thorough discussion of the program's performance, addressing concerns, and collecting feedback. The feedback from these municipalities reinforced the success of the shared services partnership and the positive impact on regional consumer protection.

October 2023

The Wisconsin Weights and Measures Association (WWMA) annual fall conference was held in Appleton, WI. Todd Schmidt, Weights and Measures Specialist was President. Under his leadership, the association had a successful meeting, focusing on the impact of emerging technologies like electric vehicles on weights and measures standards. The conference also provided critical training on inspection procedures and dealing with demanding customers. Eric Maggio assumed the role of Vice-President of the Wisconsin Weights and Measures Association, leading the state's efforts to adapt to new challenges in the field.



Figure 32: Produce scale testing underway

APPENDIX A: BIRTH DATA

Age of Mother	Birth Count	Percent
15-17	8	0.72%
18-19	17	1.52%
20-24	145	12.98%
25-29	348	31.15%
30-34	393	35.18%
35-39	172	15.40%
40-44	32	2.86%
45+	2	0.18%
Total	1,117	100.00%

Race/Ethnicity of Mother	Birth Count	Percent
Non-Hispanic White	780	69.83
Non-Hispanic Black	69	6.18%
Non-Hispanic American Indian/Alaska Native	10	0.90%
Hispanic	120	10.74%
Non-Hispanic Laotian/Hmong	73	6.54%
Non-Hispanic Other Race	44	3.94%
Non-Hispanic Multi-race	15	1.34%
Non-Hispanic Unknown	6	0.54%
Total	1,117	100.00%

Education of Mother	Birth	Percent
8th grade or less	22	1.97%
9th-12th grade-no diploma	41	3.67%
High school grad/GED	268	23.99%
Some college	258	23.10%
Bachelors degree	363	32.50%
Masters/Professional degree	156	13.97%
Unknown	9	0.81%
Total	1,117	100.00%

Marital Status of Mother	Birth Count	Percent
Married	752	67.32
Unmarried	361	32.32%
Unknown	4	0.36%
Total	1,117	100.00%

Trimester Prenatal Care Began	Birth Count	Percent
1st trimester	917	82.09%
2nd trimester	137	12.26%
3rd trimester	32	2.86%
None	7	0.63%
Unknown	24	2.15%
Total	1,117	100.00%

Number of Prenatal Care Visits	Birth Count	Percent
0	7	0.63%
1-4	13	1.16%
5-9	85	7.61%
10-12	300	26.86%
13-98	681	60.97%
Unknown	31	2.78%
Total	1,117	100.00%

Sex of Infant	Birth Count	Percent
Male	579	51.84%
Female	538	48.16%
Total	1,117	100.00%

Plurality	Birth Count	Percent
Singleton	1,087	97.31%
Multiple	30	2.69%
Total	1,117	100.00%

Live Birth Order	Birth Count	Percent
1	428	38.32%
2	356	31.87%
3	186	16.65%
4	86	7.70%
5+	60	5.37%
Unknown	1	0.09%
Total	1,117	100.00%

Attendant at Birth	Birth Count	Percent
MD	828	74.13%
DO	231	20.68%
CNM	34	3.04%
Licensed Midwife	20	1.79%
Other Midwife	3	0.27%
Total	1,117	100.00%

Births to women with one or more medical risk factors by Sex

Medical Risk Factors by Sex	Male	Female
Total Birth Count	579	538
Pre-Pregnancy Diabetes	7	3
Gestational Diabetes	27	29
Pre-Pregnancy Hypertension	4	10
Gestational Hypertension	19	24
Eclampsia	1	1
Previous Preterm Birth	35	36
Other Previous Poor Pregnancy Outcome	28	25
Pregnancy resulted from infertility treatment	4	11
Fertility enhancing drugs, artificial insemination, or intrauterine insemination	4	3
Assisted reproduction technology	2	8
Mother had previous C-section	87	84
Unknown if mother presented any of the medical risk factors listed	0	0
None - mother did not present any of the listed medical risk factors	411	363

Births by Birthweight	Birth Count	Percent
<1000 grams	8	0.72%
1000-1499 grams	3	0.27%
1500-2499 grams	59	5.28%
2500-3999 grams	961	86.03%
4000+ grams	85	7.61%
Unknown	1	0.09%
Total	1,117	100.00%

Low Birthweight	Birth Count	Percent
<2500 grams	70	6.27%
2500+ grams	1,046	93.64%
Unknown	1	0.09%
Total	1,117	100.00%

Mother smoked during	Birth Count	Percent
No	1,072	95.97%
Yes	42	3.76%
Unknown	3	0.27%
Total	1,117	100.00%

Method of Delivery	Birth Count	Percent
VBAC	26	2.33%
Vaginal Spontaneous	692	61.95%
Vaginal Forceps	1	0.09%
Vaginal Vacuum	38	3.40%
Primary C-Section	215	19.25%
Repeat C-Section	144	12.89%
Unknown	1	0.09%
Total	1,117	100.00%

Prematurity	Birth Count	Percent
Term/Postterm (37-47 weeks)	1,020	91.32%
Preterm (17-36 weeks)	94	8.42%
Unknown	1	0.27%
Total	1,117	100.00%

Gestation Age	Birth Count	Percent
17-31 weeks	13	1.16%
32-35 weeks	36	3.22%
36 weeks	45	4.03%
37-38 weeks	329	29.45%
39-41 weeks	687	61.50%
42-47 weeks	4	0.36%
Unknown	3	0.27%
Total	1,117	100.00%

Infant Transferred to NICU or other hospital	Birth Count	Percent
No	1,056	94.54%
Yes	60	5.37%
Unknown	1	0.09%
Total	1,117	100.00%

Abnormal Conditions of Newborn by Sex	Male	Female	Total
Total Birth Count	579	538	1117
Assisted ventilation immediately following	42	40	82
Assisted ventilation for more than 6 hours	2	8	10
NICU admission	53	50	103
Surfactant Replacement Therapy	1	1	3
Antibiotics Received for Suspected Neonatal	3	4	7
Seizure or Serious Neurologic Dysfunction	0	1	1
Significant Birth Injury	0	0	0
Unknown if any of the listed abnormal conditions was present	5	1	6
None of the listed abnormal conditions was	497	472	969

Birth with Reported Congenital Anomalies by Sex	Male	Female	Total
Total Birth Count	579	538	1117
Anencephaly	0	0	0
Meningomyelocele/Spina Bifida	1	0	1
Cyanotic Congenital Heart Disease	0	0	0
Congenital Diaphragmatic Hernia	0	0	0
Omphalocele	0	0	0
Gastroschisis	0	0	0
Limb Reduction Defect	0	0	0
Cleft Lip With or Without Cleft Palate	0	0	0
Cleft Palate Alone	0	0	0
Down syndrome	2	1	3
Karyotype Confirmed Down syndrome	1	0	1
Karyotype Pending for Down syndrome	0	1	1
Suspected Chromosomal Disorder	2	0	2
Karyotype Confirmed for Suspected Chromosomal Disorder	1	0	1
Karyotype Pending for Suspected Chromosomal Disorder	1	0	1
Hypospadias	1	0	1

Unknown if any of the listed congenital anomalies was present	8	8	16
None of the listed congenital anomalies present	565	529	1,094

APPENDIX B: TOTAL DEATHS, ALL CAUSES

	Cause of Death Category	Number of
1	Diseases of the Heart	169
2	Malignant Neoplasms	154
3	All Other (all other codes)	153
4	Alzheimer Disease	40
5	Accidents (Unintentional Injuries)	37
6	Cerebrovascular Diseases	31
7	Chronic Lower Respiratory Diseases	28
8	Diabetes Mellitus	18
9	Parkinson Disease	16
10	Intentional Self-Harm (Suicide)	16
11	Chronic Liver Disease and Cirrhosis	14
12	COVID-19	13
13	Nutritional Deficiencies	10
14	Aortic Aneurysm and Dissection	7
15	Nephritis, Nephrotic Syndrome and Nephrosis	7
16	Influenza and Pneumonia	6
17	Septicemia	6
18	Pneumonitis due to Solids and Liquids	5
19	Hypertension	5
20	Congenital Malformations	3
21	Certain Conditions Originating in the Perinatal Period	3
22	Anemias	3
23	Benign Neoplasms	3
24	Pregnancy, Childbirth and the Puerperium	2
25	Human Immunodeficiency Virus (HIV) Disease	1
26	Atherosclerosis	1
27	Assault (Homicide)	1
28	Peptic Ulcer	1
29	Enterocolitis due to Clostridium Difficile	1
30	Hernia	1
	Total Deaths, All Causes	755

APPENDIX C: FINANCIAL DATA

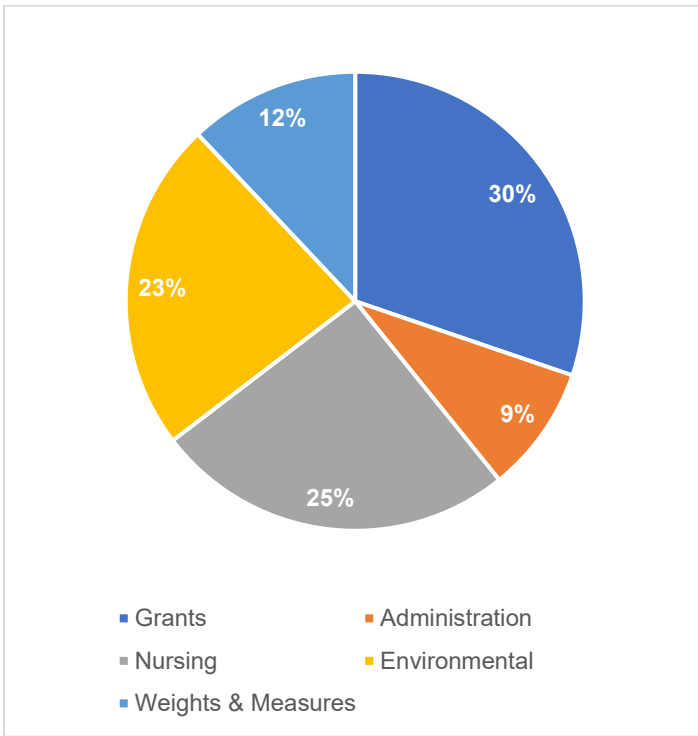


Figure 33: 2023 Budget by Division

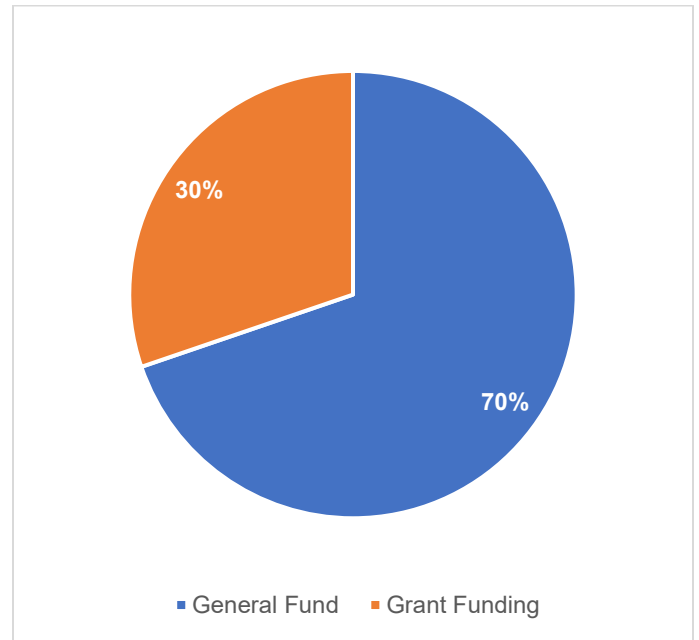


Figure 34: 2023 Budget allocation by funding source

Account	2022 Budget	2023 Budget
Public Health Administration	\$185,233	\$163,943
Public Health Nursing	\$527,824	\$465,067
Public Health Environmental	\$332,902	\$427,178
Public Health Weights & Measures	\$216,583	\$219,930
MCH Grant	\$29,940	\$28,812
Prevention Grant	\$7,900	\$6,627
Lead Grant	\$9,879	\$10,649
Immunization Grant	\$31,151	\$24,098
COVID-19 Grants	\$89,226	\$456,698
Communicable Disease Funds	2022 combined with Prevention Grant	\$5,700
Public Health Preparedness Grant	\$71,243	\$20,465
Total Budget Allocation	\$1,741,222	\$1,829,167
Revenue	\$333,588	\$498,457
Total Levy Impact	\$1,168,295	\$777,661

APPENDIX D: PROGRAM REPORT DATA

COMMUNICABLE DISEASE CONTROL

Immunization Clinics	2020	2021	2022	2023
Persons Immunized	58	23,007	2,398	238
Immunizations administered	125	37,985	2,571	330
Vaccine Type/Number of Doses	2020	2021	2022	2023
Covid-19	0	37,845	350	53
DtaP (Diphtheria, Tetanus, Acellular Pertussis)	0	0	1	3
Dtap/IPV	1	0	1	2
Dtap/IPV/Hep B	0	1	5	2
Flu (Influenza)	10	76	243	165
Hep B	2	1	14	18
Hep A	4	4	15	12
Hep A/Hep B	0	0	0	0
HIB (Haemophilus Influenzae b)	0	1	5	2
HPV (Human Papillomavirus)	4	9	11	16
IPV (Inactivated Polio Vaccine)	1	3	10	5
MCV4 (Meningococcal)	4	11	10	5
MenB	0	5	5	3
MMR (Measles, Mumps, Rubella)	5	3	14	8
MPOX	0	1	6	3
Pneumococcal	0	1	6	3
Rotavirus	0	0	4	0
Td (Tetanus diphtheria)	4	2	7	8
Tdap	5	23	11	8
VZV (Varicella)	6	6	19	10
Total	46	37,992	737	326

Communicable Disease Cases (Gastroenteric)	2020	2021	2022	2023
Campylobacter	16	17	17	9
Cryptosporidiosis	9	10	10	2
Cyclosporiasis	6	7	6	1
E. Coli (STEC)	7	20	17	5
E. Coli (Other)	10	39	40	30
Giardiasis	12	12	10	2
Hemolytic Uremic Syndrome	0	0	0	0
Listeriosis	0	0	0	0
Salmonellosis	19	18	2	10
Shigellosis	4	3	3	2
Vibriosis	2	0	0	1
Yersinia	0	1	1	7
Total	85	127	106	69

Communicable Diseases (Other)	2020	2021	2022	2023
Acute Flaccid Myelitis	0	0	0	0
Babesiosis	2	0	1	0
Bacterial Meningitis	0	0	0	2
Blastomycosis	2	0	1	0
Burkholderia Pseudomallei	0	0	0	0
Carbon Monoxide Poisoning	8	5	1	6
Dengue Fever	0	0	0	0
Ehrlichiosis / Anaplasmosis	4	2	2	4
Haemophilis Influenza	1	0	0	2
Hep A	2	0	1	0
Hep B	0	5	6	5
Hep C	40	24	12	20
Histoplamosis	0	1	1	0
Hospitalized Influenza	39	0	7	19
Hospitalized COVID-19 (reportable as of Q4 2023)				20
Hospitalized RSV (reportable as of Q4 2023)				10
Invasive Group A Strep	2	1	2	7

Invasive Strep, Other	1	0	2	1
Jamestown Canyon	0	0	0	0
Kawasaki	0	0	0	2
Legionellosis	0	2	1	0
Leprosy	0	0	0	0
Lyme Disease	14	12	6	12
Malaria	0	0	0	1
Neisseria Meningitidis, Invasive Disease	0	0	0	0
Novel Influenza	0	0	0	0
Rocky Mountain Spotted Fever	0	1	0	0
Streptococcus group B invasive disease	12	14	6	5
Streptococcus pneumoniae	4	3	2	2
TB, Latent Infection	19	13	30	30
non-TB Mycobacterium	12	10	8	12
TB: Mycobacterium	3	3	2	0
Viral Meningitis	0	0	0	0
VISA	0	0	0	0
West Nile Virus	0	0	0	0
Other	40	1	5	15
Total	205	97	96	175

CHRONIC DISEASE & INJURY PREVENTION

Vaccine Preventable	2020	2021	2022	2023
COVID-19	6,770*	8,487	NA**	NA**
Measles	0	0	0	0
Mumps	0	0	0	0
Pertussis	0	2	2	0
Rubella	0	0	0	0
Varicella	1	2	2	1
Total	6,771	8,491	4	1

Sexually Transmitted Disease	2020	2021	2022	2023
Chlamydia	165	321	287	252
Gonorrhea	48	92	55	64
Syphilis	6	18	18	20
HIV	4	4	7	7
HIV Linkage to Care				5
Other STD	0	0	0	0
Partner/Referral Program (Contacts)	2	1	6	0
Total	225	436	373	348

Sexually Transmitted Disease≤18	2020	2021	2022	2023
Chlamydia	9	11	36	46
Gonorrhea	2	1	6	4
Syphilis	9	1	1	0
HIV	0	0	0	0
HIV Linkage to Care				0
Other STD	0	0	0	0
Partner/Referral Program (Contacts)	0	0	0	0
Total	20	13	43	50

Lead - Elevations	2020	2021	2022	2023
Initial Venous lead levels >19 ug/dl	1	0	1	0
Repeat Venous lead levels >19 ug/dl	0	0	1	0
Initial Venous lead levels 10 - 19 ug/dl	1	2	1	0
Repeat Venous lead levels 10 - 19 ug/dl	1	2	2	6
Capillary lead levels >10 ug/dl	10	2	1	0
Capillary lead levels 5 - 9 ug/dl (3.5-9 in 2023)	8	17	17	40
Venous lead levels 5 - 9 ug/dl (3.5-9 in 2023)	14	10	17	14
Home Inspections	2	3	2	0

Education	11	3	16	4
Formal Enforcement Action	1	1	1	0

MATERNAL, CHILD, & FAMILY HEALTH

Community Health Visits: Includes Admissions and Revisits

Includes contact to elderly and adult clients, parents, and children for purposes of assessment, teaching, referrals and case management

Community Health Visits	2020	2021	2022	2023
MCH	51	93	136	162
Adult	274	55	242	144
Elderly	0	149	119	7
Total	325	297	514	313

ACCESS TO & LINKAGE WITH CLINICAL CARE

Planned Parenthood Contract	2020	2021	2022	2023
Individuals served	36	51	20	21
Number of tests	67	148	59	64
Individuals treated	15	15	6	3

ENVIRONMENTAL HEALTH

Licensed Establishments: Preinspections	2020	2021	2022	2023
Retail Food Establishments	44	36	51	51
Lodging Facilities	0	0	46	15
Manufactured Home Communities	0	0	0	0
Swimming Pools/Recreational Water Facilities	1	1	1	0
Tattoo and Body Piercing	2	7	8	8
Rec/Ed Camp	0	0	0	0
Pigeon Permit	0	0	0	1
Apiary	2	2	1	0

Chicken Keeping	14	11	13	17
Total	49	57	120	92

Licensed Establishments: Inspections	2020	2021	2022	2023
Retail Food Establishments	221	333	190	501
Lodging Facilities	4	5	11	81
Manufactured Home Communities	1	1	1	0
Swimming Pools/Recreational Water Facilities	17	17	21	30
Tattoo and Body Piercing	6	8	2	22
Rec/Ed Camp	0	0	0	2
Pigeon Permit	0	0	0	0
Apiary	0	1	0	0
Chicken Keeping	0	1	0	0
Total	249	366	225	636

Licensed Establishments: Reinspections	2020	2021	2022	2023
Retail Food Establishments	34	35	34	90
Lodging Facilities	0	0	8	1
Manufactured Home Communities	0	0	0	0
Swimming Pools/Recreational Water Facilities	2	1	1	1
Tattoo and Body Piercing	0	1	1	4
Rec/Ed Camp	0	0	0	0
Pigeon Permit	0	0	0	0
Apiary	0	0	0	0
Chicken Keeping	0	0	0	0
Total	36	37	44	96

Food Borne-Water Borne Disease	2020	2021	2022	2023
Number of Outbreaks	0	0	0	0
Number of Interviews	0	0	0	0

Number symptomatic	0	0	0	0
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Swimming Pool Water Samples	2020	2021	2022	2023
Total number of pools sampled	138	269	214	245
Total positive HPC	1	1	3	0
Total positive coliform	0	4	5	1

Rabies Specimens (Types of Animal Shipped)	2020	2021	2022	2023
Dog	0	0	0	0
Cat	2	1	0	0
Bat	7	3	2	3
Raccoon	0	0	3	0
Ferret	0	0	0	0
Skunk	0	0	0	0
Other	0	0	0	0
Total shipped	9	4	5	3
Total positive results	0	0	0	0

Environmental Investigations: Complaints	2020	2021	2022	2023
School/Day Care	0	0	0	0
Surface water pollution	0	0	0	0
Animal nuisances	2	2	1	0
Rabies control	0	0	0	0
Insect control	6	2	0	7
Rodent control	0	0	2	3
Hazardous substance control	0	0	0	0
Air pollution - Indoor	0	3	0	1
Air pollution - Outdoor	0	0	2	0
Noise	6	0	4	3
Radiation	0	0	0	0
Garbage/rubbish nuisance	1	2	0	1
Private residence/housing	6	2	4	2
Lead	0	1	0	2

Other Programs (e.g., communicable disease)	1	0	0	0
Other Business (e.g., general sanitation)	7	5	8	7
Mold	8	5	8	7
Totals	37	22	29	33

CONSUMER PROTECTION

Type of Establishments Inspected: Food and convenience stores, restaurants, bakery and candy stores, dairy plants and stores, drug stores, hardware stores, variety stores, gas stations, salvage and recyclers, pet shops, garden centers, industrial manufacturing.

Complaints: Number Received	2020	2021	2022	2023
Totals	15	29	41	57

Complaints w/ Violations Found	2020	2021	2022	2023
Totals	6	7	16	20

Type of Establishments Inspected	2020	2021	2022	2023
Total number inspected	618	724	730	503
Equipment and Device Examined	2020	2021	2022	2023
Scales and Balances	499	561	642	585
Measures (Includes gas pumps & fuel oil truck meters)	946	824	1,123	999
Weights	32	7	10	0
Total	1,477	1,392	1,775	1,584

Not in Compliance	2020	2021	2022	2023
Scales and Balances	6	16	21	18
Measures (Includes gas pumps & fuel oil truck meters)	58	54	31	45
Weights	0	0	0	0
Total	64	70	52	63

Commodity Report	2020	2021	2022	2023
Total units of product investigated	64,854	157,599	70,159	71,991
Random sample size	10,948	22,882	13,347	15,091
Total products/units found short weight	440	2,092	749	1,194
Total products/units found mislabeled	215	1,326	972	1,481
Price Scanning Inspections	2020	2021	2022	2023
Number of Inspection	111	129	121	128
Number of items scanned	3,552	4,232	3,893	4,694
Pricing errors found	74	121	97	108

END OF REPORT