



# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
[www.appleton.org](http://www.appleton.org)

## Meeting Agenda - Final-revised Board of Health

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Wednesday, January 9, 2019

7:00 AM

Council Chambers, 6th Floor

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1. Call meeting to order
2. Roll call of membership
3. Approval of minutes from previous meeting  
[19-0054](#) November 2018 BOH Minutes  
**Attachments:** [November 2018 BOH Minutes.pdf](#)
4. **Public Hearings/Appearances**
5. **Action Items**  
[19-0053](#) AT&T Noise Variance Request  
**Attachments:** [AT&T Noise Variance Request.pdf](#)
6. **Information Items**  
[19-0004](#) October 2018 Monthly Report  
**Attachments:** [October 2018 Monthly Report.pdf](#)  
[19-0005](#) November 2018 Monthly Report  
**Attachments:** [November 2018 Monthly Report.pdf](#)  
[19-0003](#) 2018 Environmental and Weights & Measures Survey Results  
**Attachments:** [2018 Environmental Survey Results.pdf](#)  
[2018 Weights and Measures Survey Results.pdf](#)  
[19-0015](#) Update on School-Age Active TB  
[19-0001](#) Resolution #14-R-18: E-Cigarettes  
**Attachments:** [Resolution #14-R-18 E-Cigarettes.pdf](#)  
[Surgeon General's Advisory on E-cigarette Use Among Youth.pdf](#)

[19-0002](#) 2019 Community Health Needs Assessment Update

7. Adjournment

*Notice is hereby given that a quorum of the Common Council may be present during this meeting, although no Council action will be taken.*

*Reasonable Accommodations for Persons with Disabilities will be made upon Request and if Feasible.*



# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Minutes Board of Health

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Wednesday, November 14, 2018

7:00 AM

Council Chambers, 6th Floor

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1. Call meeting to order

2. Roll call of membership

**Present:** 4 - Nelson, Vogel, Mielke and Spears

**Excused:** 2 - Hanna and Baker

3. Approval of minutes from previous meeting

[18-1661](#)

October 2018 Minutes

**Attachments:** [October 2018 Minutes.pdf](#)

**A motion was made by Sally Mielke, seconded by Cathy Spears, to approve the October BOH minutes. Motion carried by the following vote:**

**Aye:** 4 - Nelson, Vogel, Mielke and Spears

**Excused:** 2 - Hanna and Baker

4. **Public Hearings/Appearances**

5. **Action Items**

[18-1418](#)

Resolution #12-R-18 Medical Marijuana

**Attachments:** [REVISED Resolution #12-R-18 Medical Marijuana.pdf](#)

[#12-R-18 Medical Marijuana.pdf](#)

[NASEM Report - Health Effects of Cannabis and Cannabinoids - SUMMARY.pdf](#)

[WPHA Resolution-Access to Therapeutic Marijuana-Cannabis.pdf](#)

*A motion to amend the resolution was made by Dr. Nelson, seconded by Cathy Spears, to revise the first paragraph to read "control epileptic seizures and other health conditions as identified by the attached study titled 'The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research', published by the National Academy of Sciences". Motion carried 4-0. A second motion was made by Cathy Spears, seconded by Dr. Nelson, to amend the resolution to also change wording in third paragraph to "held" instead of "have" and add "in each community, residents voted in support". Motion carried 4-0. A third motion was made by Dr. Nelson, seconded by Cathy Spears, to amend the resolution to add*

*that the Board of Health stands in support of recommending removal of marijuana from Schedule I Classification (Federal law) so it can be used in research to look at potential uses in medical care. Motion carried 4-0. A motion was made by Dr. Nelson, seconded by Cathy Spears, to approve Resolution, as amended.*

**Recommended for approval as amended:**

**Aye:** 4 - Nelson, Vogel, Mielke and Spears

**Excused:** 2 - Hanna and Baker

## 6. Information Items

[18-1662](#)

Third Quarter 2018 Report

**Attachments:** [Third Quarter 2018 Executive Summary.pdf](#)  
[Third Quarter 2018 Report.pdf](#)

**This Report Action Item was presented**

[18-1663](#)

Third Quarter 2018 Budget Performance Review

**Attachments:** [Performance Review-Third Quarter 2018.pdf](#)  
[Summary Budget Review-Third Quarter 2018.pdf](#)

**This Report Action Item was presented**

[18-1664](#)

Octoberfest 2018 Inspection Summary

**Attachments:** [Octoberfest 2018 Summary.pdf](#)

**This Report Action Item was presented**

[18-1665](#)

Noise Variance Requests

**Attachments:** [Noise Variance Requests 11.14.18.pdf](#)

**This Report Action Item was presented**

[18-0162](#)

Other Business

[18-1662](#)

Third Quarter 2018 Report

**Attachments:** [Third Quarter 2018 Executive Summary.pdf](#)  
[Third Quarter 2018 Report.pdf](#)

**This Report Action Item was presented**

## 7. Adjournment

**A motion was made by Sally Mielke, seconded by Cathy Spears, to adjourn the**

**meeting. Motion carried by the following vote:**

**Aye:** 4 - Nelson, Vogel, Mielke and Spears

**Excused:** 2 - Hanna and Baker

**Melissa L. Suttner**

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**From:** Kurt Eggebrecht  
**Sent:** Thursday, January 03, 2019 3:34 PM  
**To:** KASSAB, JOSEPH; Chad Weyenberg  
**Cc:** Chad Weyenberg; Melissa L. Suttner  
**Subject:** RE: AT&T Noise Variance

Joe,

Thanks for your email. I will place this on the next Board of Health agenda to be held Wednesday January 9<sup>th</sup> at 7 am. We meet in room 6A of the City Center located at 100 N. Appleton Street. Although it is not a requirement to attend it is always helpful should the board members have questions regarding the project and source of noise. In addition to the generators do you anticipate that this work will include trucks backing up with safety noise alerts?

Thanks,  
Kurt

Kurt Eggebrecht  
Health Officer  
Appleton Health Department  
920-832-6429  
[www.appleton.org](http://www.appleton.org)

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**From:** KASSAB, JOSEPH [mailto:[jk572k@att.com](mailto:jk572k@att.com)]  
**Sent:** Thursday, January 03, 2019 3:08 PM  
**To:** Chad Weyenberg <[Chad.Weyenberg@Appleton.org](mailto:Chad.Weyenberg@Appleton.org)>  
**Cc:** Kurt Eggebrecht <[kurt.eggebrecht@appleton.org](mailto:kurt.eggebrecht@appleton.org)>  
**Subject:** RE: AT&T Noise Variance

Attached is AT&T's official request for a noise ordinance variance.

We are basically looking to run two portable generators for about three weeks at night to complete our work so that the Rocky Bleier project can begin on schedule.

Let me know if you have any questions.

**Joe Kassab**  
Manager OSP Planning and Engineering Design  
AT&T Technology Operations, C&E Legal Mandate - Wisconsin

**AT&T**  
205 S Jefferson St Green Bay, WI 54301  
o 920.433.4200 | m 920.202.4002 | [jk572k@att.com](mailto:jk572k@att.com)

MOBILIZING YOUR WORLD

**AT&T Engineering  
Joseph Kassab  
205 South Jefferson Street  
Green Bay, WI 54301  
TEL (920) 433-4200**

January 3, 2019

Health Officer  
City of Appleton Health Department  
100 N. Appleton Street  
Appleton, WI 54911

RE: Request for Noise Variance  
AT&T Project A015ZEZ Rocky Bleier Run Relocation

Dear Mr. Eggebrecht:

This letter is to request a noise variance for an upcoming AT&T project in the City of Appleton. The project will consist of installing three manholes, underground conduit, and underground copper cables, and take place at three locations on the following streets:

Oneida St and Appleton St under the Oneida Bridge and in Appleton St

Construction for this project is underway. The placement contractor has been given a completion date of 1/18/19.

The work we are looking to perform will occur in the manholes at night. This will involve the running of two portable generators outside of the manholes. This needs to occur so that fresh air is pumped into the manholes and they don't fill with toxic gas. The generators are required for the safety of our workers.

The work that occurs in the manholes will be splicing work joining our new cables to existing and will create no noise. This work needs to be completed round the clock to not negatively impact the City of Appleton project upcoming on Rocky Bleier.

Let me know if you have any additional questions.

Thank you and please do not hesitate to call me at 920.832.5915 if you have any questions.

Sincerely,

Joseph Kassab  
AT&T Engineer

c: Project File



**I. Preventing Disease**

<b>Immunization Clinics</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
Persons Immunized	21	86	109
Immunizations administered	38	207	294

<b>Communicable Disease Cases</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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**Gastroenteric**

<a href="#">Campylobacter</a>	1	16	16
<a href="#">Cyclosporiasis</a>	0	6	0
<a href="#">Giardiasis</a>	1	5	10
<a href="#">Salmonellosis</a>	0	13	10
<a href="#">Amebiasis</a>	0	0	0
<a href="#">Balantidium Coli</a>	0	0	0
<a href="#">Hook Worm</a>	0	0	0
<a href="#">Vibriosis</a>	0	2	0
<a href="#">Shigellosis</a>	0	2	2
<a href="#">Yersinia</a>	0	1	1
<a href="#">Strongyloides</a>	0	0	0
<a href="#">Cryptosporidiosis</a>	2	7	8
<a href="#">E. Coli</a>	4	53	17
<a href="#">Listeriosis</a>	0	0	0

<b>Other Communicable Diseases</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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<a href="#">Haemophilis Influenza</a>	0	0	1
<a href="#">Blastomycosis</a>	0	0	1
<a href="#">Hepatitis A</a>	0	0	0
<a href="#">Hepatitis B</a>	0	4	5
<a href="#">Hepatitis C</a>	2	43	41
<a href="#">Streptococcus pneumoniae</a>	0	3	4
<a href="#">Leprosy</a>	0	0	0
<a href="#">Lead Toxicity</a>	0	0	0
<a href="#">Legionellosis</a>	0	1	1
<a href="#">Lyme Disease</a>	0	15	13
<a href="#">Ehrlichiosis / Anaplasmosis</a>	0	2	6
<a href="#">Malaria</a>	0	0	1
<a href="#">Denque Fever</a>	0	0	0
<a href="#">TB, Latent Infection</a>	4	13	0
<a href="#">Neisseria Meningitidis, Invasive Disease</a>	0	1	0
<a href="#">Bacterial Meningitis</a>	0	1	0
<a href="#">Viral Meningitis</a>	0	0	0
<a href="#">Invasive Group A Strep</a>	0	1	1
<a href="#">Rheumatic Fever</a>	0	0	0
<a href="#">Tetanus</a>	0	0	0
<a href="#">Toxic Shock</a>	0	0	0
<a href="#">Typhoid</a>	0	0	0
<a href="#">TB: Mycobacterium</a>	0	0	1
<a href="#">TB: Atypical</a>	1	13	12
<a href="#">Viral Encephalitis</a>	0	0	0
<a href="#">Cat Scratch Disease (Bartonella species)</a>	0	0	0
<a href="#">Streptococcus group B invasive disease</a>	4	7	2
<a href="#">Vibrio Cholera</a>	0	0	0



<a href="#">West Nile Virus</a>	0	0	0
<a href="#">Kawasaki</a>	0	2	0
<a href="#">Novel Influenza</a>	0	0	0
Hospitalized Influenza	1	58	30
<a href="#">Babesiosis</a>	0	2	0
<a href="#">Histoplasmosis</a>	1	1	1
<a href="#">VISA</a>	0	0	2
<a href="#">Rocky Mountain Spotted Fever</a>	0	0	0
<a href="#">Jamestown Canyon</a>	0	0	1
<a href="#">Burkholderia Pseudomallei</a>	0	0	1
<a href="#">Invasive Strep, Other</a>	0	9	2
<a href="#">Toxoplasmosis</a>	0	0	0

<b>Vaccine Preventable</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
<a href="#">Measles</a>	0	0	0
<a href="#">Mumps</a>	0	0	0
<a href="#">Pertussis</a>	0	8	6
<a href="#">Rubella</a>	0	0	0
<a href="#">Varicella</a>	2	5	4

<b>Sexually Transmitted Disease</b>	<b>Current Month</b>		<b>Year to Date</b>		<b>Last Year to Date</b>	
	<b>All Ages</b>	<b>≤18</b>	<b>All Ages</b>	<b>≤18</b>	<b>All Ages</b>	<b>≤18</b>
<a href="#">Chlamydia</a>	27	3	292	34	279	24
<a href="#">Gonorrhea</a>	3	0	42	4	45	1
Partner/Referral Program (Contacts)	0	0	1	0	6	0
<a href="#">HIV</a>	0	0	1	0	6	0
Other STD	0	0	0	0	0	0
<a href="#">Syphilis</a>	1	0	5	0	9	0

<b>Licensed Establishments</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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PE & D, Retail Food, Hotel/Motel, Bed & Breakfast, Manufactured Home  
Community, Vending Machines, Swimming Pools, Tattoo & Body Piercing, Rec/Ed

Plan Reviews	0	4	0
Preinspections	2	37	36
Inspections	27	468	472
Reinspections	1	101	96
Complaints	4	29	20
Complaint Follow-ups	2	4	6
Consultations	28	426	513

<b>Food Borne/Water Borne</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
Number of Outbreaks	0	0	0
Number of Interviews	1	2	3
Number of symptomatic	1	2	2

<b>Laboratory/Field Tests</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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#### **Swimming Pool Water Samples**

Total number of pools sampled	20	189	204
Total number of pools resampled	0	5	1
Total positive HPC	0	0	1
Total positive coliform	0	5	0

## **II. Protecting the Environment**

<b>Environmental Investigations</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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Community water supplies, private water supplies, surface water pollution, standing water nuisance, animal nuisances, rabies control, insect control, rodent control, hazardous substance control, indoor/outdoor air pollution, noise, radiation, garbage/rubbish, private residence/housing, other business (non-licensed)

Complaints	4	9	23
Complaint Follow-ups	3	11	45

Consultations	24	192	198
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### III. Promoting Health

Community Health Visits	Current Month	Year to Date	Last Year to Date
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Includes contact to elderly and adult clients, parents, and children for purposes of assessment, teaching, referrals, and case management

Patient Home/Telephone Visits	104	781	1165
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### IV. Protecting the Consumer

Consumer Complaints	Current Month	Year to Date	Last Year to Date
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Weights and Measures, Product Labeling, and Trade Practices

Total number of consumer complaints	5	34	33
Total number found in violation	1	7	5

Type of Establishments Inspected	Current Month	Year to Date	Last Year to Date
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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, and garden centers, industrial manufacturing plants, concrete and asphalt plants

Total number inspected	23	546	569
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Equipment and Devices Examined	Inspected			Number Not in Compliance		
	Current Month	Year to Date	Last Year to Date	Current Month	Year to Date	Last Year to Date
Scales and balances	63	535	532	0	3	15
Measures (includes gas pumps and fuel oil truck meters)	44	1,005	1,115	3	35	31
Weights	0	12	29	0	0	0
Total	107	1,552	1,676	3	38	46

Commodity Report	Current Month	Year to Date	Last Year to Date
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Total units of product investigated	624	125,805	81,405
Random sample size	174	19,134	12,574
Total products/units found short weight	55	1,267	452
Total products/units found mislabeled	56	694	919

Price Scanning Inspections	Current Month	Year to Date	Last Year to Date
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Number of inspections	2	118	104
Number of items scanned	50	3,952	3,526
Pricing errors found	0	123	91



**I. Preventing Disease**

<b>Immunization Clinics</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
Persons Immunized	20	106	137
Immunizations administered	40	247	372

<b>Communicable Disease Cases</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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**Gastroenteric**

<a href="#">Campylobacter</a>	3	19	18
<a href="#">Cyclosporiasis</a>	0	6	1
<a href="#">Giardiasis</a>	0	5	12
<a href="#">Salmonellosis</a>	3	16	11
<a href="#">Amebiasis</a>	0	0	0
<a href="#">Balantidium Coli</a>	0	0	0
<a href="#">Hook Worm</a>	0	0	0
<a href="#">Vibriosis</a>	0	2	0
<a href="#">Shigellosis</a>	1	3	2
<a href="#">Yersinia</a>	0	1	2
<a href="#">Strongyloides</a>	0	0	0
<a href="#">Cryptosporidiosis</a>	2	9	8
<a href="#">E. Coli</a>	4	57	17
<a href="#">Listeriosis</a>	0	0	3

<b>Other Communicable Diseases</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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<a href="#">Haemophilis Influenza</a>	0	0	1
<a href="#">Blastomycosis</a>	0	0	1
<a href="#">Hepatitis A</a>	0	0	0
<a href="#">Hepatitis B</a>	0	4	5
<a href="#">Hepatitis C</a>	2	45	44
<a href="#">Streptococcus pneumoniae</a>	0	3	5
<a href="#">Acute Flaccid Myelitis</a>	1	1	0
<a href="#">Carbon Monoxide Poisoning</a>	1	2	0
<a href="#">Leprosy</a>	0	0	0
<a href="#">Lead Toxicity</a>	0	0	0
<a href="#">Legionellosis</a>	0	1	1
<a href="#">Lyme Disease</a>	0	15	13
<a href="#">Ehrlichiosis / Anaplasmosis</a>	0	2	6
<a href="#">Malaria</a>	0	0	1
<a href="#">Denque Fever</a>	0	0	0
<a href="#">TB, Latent Infection</a>	3	16	0
<a href="#">Neisseria Meningitidis, Invasive Disease</a>	0	1	0
<a href="#">Bacterial Meningitis</a>	0	1	0
<a href="#">Viral Meningitis</a>	0	0	0
<a href="#">Invasive Group A Strep</a>	0	1	1
<a href="#">Rheumatic Fever</a>	0	0	0
<a href="#">Tetanus</a>	0	0	0
<a href="#">Toxic Shock</a>	0	0	0
<a href="#">Typhoid</a>	0	0	0
<a href="#">TB: Mycobacterium</a>	0	0	1
<a href="#">TB: Atypical</a>	0	13	12
<a href="#">Viral Encephalitis</a>	0	0	0
<a href="#">Cat Scratch Disease (Bartonella species)</a>	0	0	0
<a href="#">Streptococcus group B invasive disease</a>	0	7	3

<a href="#">Vibrio Cholera</a>	0	0	0
<a href="#">West Nile Virus</a>	0	0	0
<a href="#">Kawasaki</a>	0	2	0
<a href="#">Novel Influenza</a>	0	0	0
Hospitalized Influenza	0	58	31
<a href="#">Babesiosis</a>	0	2	0
<a href="#">Histoplasmosis</a>	0	1	1
<a href="#">VISA</a>	0	0	2
<a href="#">Rocky Mountain Spotted Fever</a>	0	0	0
<a href="#">Jamestown Canyon</a>	0	0	1
<a href="#">Burkholderia Pseudomallei</a>	0	0	1
<a href="#">Invasive Strep, Other</a>	0	9	2
<a href="#">Toxoplasmosis</a>	0	0	0

<b>Vaccine Preventable</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
<a href="#">Measles</a>	0	0	0
<a href="#">Mumps</a>	0	0	0
<a href="#">Pertussis</a>	0	8	9
<a href="#">Rubella</a>	0	0	0
<a href="#">Varicella</a>	0	5	7

<b>Sexually Transmitted Disease</b>	<b>Current Month</b>		<b>Year to Date</b>		<b>Last Year to Date</b>	
	<b>All Ages</b>	<b>≤18</b>	<b>All Ages</b>	<b>≤18</b>	<b>All Ages</b>	<b>≤18</b>
<a href="#">Chlamydia</a>	26	5	318	39	307	26
<a href="#">Gonorrhea</a>	4	0	46	4	51	1
Partner/Referral Program (Contacts)	0	0	1	0	6	0
<a href="#">HIV</a>	1	0	2	0	7	0
Other STD	0	0	0	0	0	0
<a href="#">Syphilis</a>	1	0	6	0	9	0

<b>Licensed Establishments</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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**PE & D, Retail Food, Hotel/Motel, Bed & Breakfast, Manufactured Home  
Community, Vending Machines, Swimming Pools, Tattoo & Body Piercing, Rec/Ed**

Plan Reviews	0	4	0
Preinspections	2	39	39
Inspections	16	484	496
Reinspections	2	103	97
Complaints	2	31	22
Complaint Follow-ups	1	5	6
Consultations	19	445	547

<b>Food Borne/Water Borne</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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Number of Outbreaks	0	0	0
Number of Interviews	0	2	3
Number of symptomatic	0	2	2

<b>Laboratory/Field Tests</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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**Swimming Pool Water Samples**

Total number of pools sampled	20	209	224
Total number of pools resampled	1	6	3
Total positive HPC	0	0	1
Total positive coliform	1	6	2

***II. Protecting the Environment***

<b>Environmental Investigations</b>	<b>Current Month</b>	<b>Year to Date</b>	<b>Last Year to Date</b>
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**Community water supplies, private water supplies, surface water pollution, standing water nuisance, animal nuisances, rabies control, insect control, rodent control, hazardous substance control, indoor/outdoor air pollution, noise, radiation, garbage/rubbish, private residence/housing, other business (non-licensed)**

Complaints	2	11	28
Complaint Follow-ups	3	14	47
Consultations	10	202	211

### III. Promoting Health

Community Health Visits	Current Month	Year to Date	Last Year to Date
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Includes contact to elderly and adult clients, parents, and children for purposes of assessment, teaching, referrals, and case management

Patient Home/Telephone Visits	72	853	1291
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### IV. Protecting the Consumer

Consumer Complaints	Current Month	Year to Date	Last Year to Date
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Weights and Measures, Product Labeling, and Trade Practices

Total number of consumer complaints	4	38	36
Total number found in violation	1	8	5

Type of Establishments Inspected	Current Month	Year to Date	Last Year to Date
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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, and garden centers, industrial manufacturing plants, concrete and asphalt plants

Total number inspected	30	576	567
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Equipment and Devices Examined	Inspected			Number Not in Compliance		
	Current Month	Year to Date	Last Year to Date	Current Month	Year to Date	Last Year to Date
Scales and balances	28	563	587	0	3	16
Measures (includes gas pumps and fuel oil truck meters)	0	1,005	1,122	0	35	31
Weights	0	12	62	0	0	0
Total	28	1,580	1,771	0	38	47

Commodity Report	Current Month	Year to Date	Last Year to Date
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Total units of product investigated	2,863	128,668	91,771
Random sample size	890	20,024	14,443
Total products/units found short weight	0	1,267	601
Total products/units found mislabeled	0	694	1,219

Price Scanning Inspections	Current Month	Year to Date	Last Year to Date
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Number of inspections	10	128	116
Number of items scanned	300	4,252	3,876
Pricing errors found	3	126	95

## ENVIRONMENTAL SURVEY 2018

Total # surveys sent out	160	Completed surveys returned	28
surveys returned as undeliverable	3	Percent returned	17.83%
Surveys (assumed) received by operators	157		

SURVEY QUESTION	Very Satisfied	Satisfied	Somewhat Dissatisfied	Dissatisfied	totals	% Satisfied
How satisfied are you that the inspector identified him/herself and the purpose of their visit?	22	6			28	100.00%
Was courteous and professional?	23	5			28	100.00%
Went over the inspection report thoroughly?	23	5			28	100.00%
Gave recommendations for correction of violations/errors?	22	6			28	100.00%
How satisfied are you that the inspection process used methods that fairly evaluated your business?	17	11			28	100.00%
How satisfied are you that the Environmental Health Inspection Program ensures good sanitation and food handling practices?	20	8			28	100.00%
How satisfied are you that we are inspecting often enough to ensure good sanitation and food handling practices?	20	7	1		28	96.43%
<b>RESPONSE TOTALS</b>	<b>147</b>	<b>48</b>	<b>1</b>	<b>0</b>	<b>196</b>	<b>99.49%</b>

### ENTER WRITTEN COMMENTS BELOW (comments are typed exactly as written)

#### 5. In your opinion, what, if anything, can be done to improve the inspection process to better ensure good sanitation and food handling practices?

Don't change the process...at least for swimming pools
The inspector was thorough and informative.
Nothing
Michelle is thorough, helpful and fair.
No, she did everything she was supposed to do.
N/A
N/A, Michelle is excellent at what she does. She is very thorough and willing to go above and beyond to help solve any issues.
It's kinda scary to think some places can get away with poor practices for an entire year.



My first one, will know more when the next one takes place
You did a good job.
Did a great job nothing needed for change
<b>6. If you rated any of the above items as “somewhat dissatisfied” or “dissatisfied” please use the space below to briefly explain the reasons for your dissatisfaction.</b>
N/A
N/A
You did a good job on all section.
<b>7. What additional suggestions, if any, do you have for improving the quality of this inspection program or our services to your business?</b>
None, inspectors do a great job!
N/A
None, the program is good.
It seems when there's not a major violation or really anything wrong, little unimportant things are pointed out just to "find something".
Nothing, all good!
As a business owner that has been around almost 40 years, we feel that issues keep coming up that are out of our control due to building code changes. We follow all health code requirements but feel there isn't anything to do with some issues.
Nothing needed great job.
<b>Other comments</b>
I appreciate all the support from everyone that works there.
What happened to the USA Not happy with Republicans

**WEIGHTS & MEASURES SURVEY 2018**

Total # surveys sent out	85	Completed surveys returned	16
unopened surveys returned as undeliverable		Percent returned	18.82%
Surveys (assumed) received by operators	85		

<b>SURVEY QUESTION</b>	Very Satisfied	Satisfied	Very Dissatisfied	Dissatisfied	Does Not Apply	<b>totals</b>	<b>% satisfied</b>
How satisfied are you that the inspector identified him/herself and the purpose of their visit?	12	3				15	100.00%
Was courteous and professional?	12	3				15	100.00%
Went over the inspection report thoroughly?	12	3				15	100.00%
Gave recommendations for correction of violations/errors?	11	4				15	100.00%
How satisfied are you that the inspection process used methods that fairly evaluated your business?	10	5		1		16	93.75%
How satisfied are you that the inspection process fairly and accurately assesses the following for your business? Scales, pumps, meters and/or measures	12	3				15	100.00%
Price scanning and/or price control systems?	9	4			2	15	100.00%
Weighing and measuring of bulk products & packaged goods?	8	6			1	15	100.00%
Product labeling, signage and method of sale compliance?	10	4			1	15	100.00%
How satisfied are you that the W & M program ensures fairness between the business and the consumer?	9	5		1	1	16	93.33%
How satisfied are you that we are inspecting often enough to ensure fairness between the business and the consumer?	9	6		1		16	93.75%
<b>TOTALS</b>	<b>114</b>	<b>46</b>	<b>0</b>	<b>3</b>	<b>5</b>	<b>168</b>	<b>98.16%</b>

**ENTER WRITTEN COMMENTS BELOW (comments are typed exactly as written)**

<b>5. In your opinion, What, if anything, can be done to improve the inspection process to better ensure fairness between the business and the consumer?</b>
Always had good experience with the inspectors.
None
N/A

The City of Appleton needs to get out of the business of meter proves for fuel trucks. There are independent private businesses in the business of proving meters. The problem comes when a meter is out of tolerance--the City will no longer make adjustments like was done in the past when Jim Richter did the proving. There is a lot of wasted time setting up a second appointment for a meter that failed its initial test to be retested after a minor adjustment. Why does the City of Appleton feel they need to do their own testing when the State of Wisconsin already has requirements in place? When private businesses that are in the business of meter proves tests meters, adjustments can be made on the spot, bringing the meter(s) into compliance with only one appointment. The city needs to shut down this program.

Nothing. Everything was good during inspection.

**6. If you rated any of the above items as somewhat dissatisfied or dissatisfied, please use the space below to briefly explain the reasons for your dissatisfaction.**

Keep up the good work!

N/A

**7. What additional suggestions, if any, do you have for improving the quality of this program or our services to your business?**

N/A

Make an appointment/scheduled date. We have more than 1 facility and if there is an appointment made at 1 facility the second one does not get notified. The inspector just shows up.

No suggestions as everything was done nicely & effectively

**Other comments**

Keep up the great work!

Thought he was great!

Keep up the good work!

The team is helpful when any concerns arise. Really appreciate that.

**Resolution # 14-R-18**  
**E-Cigarettes**

Submitted by:

Alderperson Cathy Spears – District 12

Referred To: Board of Health

Whereas, e-cigarettes are known by many different names. They are sometimes called “e-cigs”, “e-hookahs”, “mods”, “vape pens”, “vapes”, “tank systems”, and “electronic nicotine delivery systems”; and

Whereas, some e-cigarettes are made to look like regular cigarettes, cigars, or pipes. Some resemble pens, USB sticks, and other everyday items; and

Whereas, e-cigarettes produce an aerosol by heating a liquid that usually contains nicotine – the addictive drug in regular cigarettes, cigars, and other tobacco products, - flavorings, and other chemicals that help to make the aerosol. Users inhale this aerosol into their lungs. Bystanders can also breathe in this aerosol when the user exhales into the air; and

Whereas, e-cigarettes can be used to deliver marijuana and other drugs; and

Whereas, the CDC Report on e-cigarettes and electronic nicotine delivery systems reports that vaping clouds contain high levels of two chemicals known to cause permanent and sometimes fatal lung disease: diacetyl and its chemical cousin, 2,3-pentanedione; and

Whereas, e-cigarettes aerosol ingredients include: nicotine, ultrafine particles, flavorings such as diacetyl; a chemical linked to lung disease, volatile organic compounds such as benzene; which is found in car exhaust and heavy metals such as nickel tin and lead; and

Whereas, diacetyl destroys the lungs’ tiniest airways, leading toe scar tissue buildup which blocks airflow. Its damage is irreversible; and

Whereas, Appleton has a smoke free workplace ordinance that was enacted to protect workers and the public from secondhand smoke;

Now, Therefore Be it Resolved, that the definition of smoke free workplaces be modified to include the prohibition of electronic smoking devices.

# Surgeon General's Advisory on E-cigarette Use Among Youth

*I, Surgeon General of the United States Public Health Service, VADM Jerome Adams, am emphasizing the importance of protecting our children from a lifetime of nicotine addiction and associated health risks by immediately addressing the epidemic of youth e-cigarette use. The recent surge in e-cigarette use among youth, which has been fueled by new types of e-cigarettes that have recently entered the market, is a cause for great concern. **We must take action now to protect the health of our nation's young people.***

**KNOW THE RISKS. TAKE ACTION. PROTECT OUR KIDS.**

## The E-cigarette Epidemic Among Youth

Considerable progress has been made in reducing cigarette smoking among our nation's youth.<sup>1</sup> However, the tobacco product landscape continues to evolve to include a variety of tobacco products, including smoked, smokeless, and electronic products, such as e-cigarettes.<sup>2</sup> E-cigarettes are designed to deliver nicotine, flavorings, and other additives to the user via an inhaled aerosol.<sup>2</sup>

E-cigarettes entered the U.S. marketplace around 2007, and since 2014, they have been the most commonly used tobacco product among U.S. youth.<sup>2</sup> E-cigarette use among U.S. middle and high school students increased 900% during 2011-2015, before declining for the first time during 2015-2017.<sup>3</sup> However, current e-cigarette use increased 78% among high school students during the past year, from 11.7% in 2017 to 20.8% in 2018.<sup>4</sup> In 2018, more than 3.6 million U.S. youth, including 1 in 5 high school students and 1 in 20 middle school students, currently use e-cigarettes.<sup>4</sup>

E-cigarette aerosol is not harmless.<sup>2</sup> Most e-cigarettes contain nicotine – the addictive drug in regular cigarettes, cigars, and other tobacco products.<sup>2</sup> Nicotine exposure during adolescence can harm the developing brain – which continues to develop until about age 25.<sup>2</sup> Nicotine exposure during adolescence can impact learning, memory, and attention.<sup>1,2</sup> Using nicotine in adolescence can also increase risk for future addiction to other drugs.<sup>1,2</sup> In addition to nicotine, the aerosol that users inhale and exhale from e-cigarettes can potentially expose both themselves and bystanders to other harmful substances, including heavy metals, volatile organic compounds, and ultrafine particles that can be inhaled deeply into the lungs.<sup>2</sup>

Many e-cigarettes also come in kid-friendly flavors. In addition to making e-cigarettes more appealing to young people,<sup>5</sup> some of the chemicals used to make certain flavors may also have health risks.<sup>2</sup> E-cigarettes can also be used to deliver other drugs, including marijuana.<sup>2</sup> In 2016, one-third of U.S. middle and high school students who ever used e-cigarettes had used marijuana in e-cigarettes.<sup>6</sup>

For adults, e-cigarettes may have the potential to reduce risk for current smokers if they completely transition from cigarettes to e-cigarettes; however, a majority of adults who use e-cigarettes also smoke cigarettes.<sup>7</sup> For youth, the use of multiple tobacco products puts youth at even greater risk for addiction and tobacco-related harms.<sup>1,2</sup> Moreover, a 2018 National Academy of Sciences, Engineering, and Medicine report concluded that there was moderate evidence that e-cigarette use increases the frequency and intensity of cigarette smoking in the future.<sup>7</sup> But any e-cigarette use among young people is unsafe, even if they do not progress to future cigarette smoking.<sup>2</sup>

## E-cigarettes Come in Many Shapes and Sizes

E-cigarettes are a rapidly changing product class, and are known by many different names, including "e-cigs," "e-hookahs," "mods," and "vape pens."<sup>2</sup> Recently, a new type of e-cigarette has become increasingly popular among our nation's youth due to its minimal exhaled aerosol, reduced odor, and small size, making it easy to conceal.<sup>8</sup> Many of these new e-cigarettes look like a USB flash drive, among other shapes. One of the most commonly sold

USB flash drive shaped e-cigarettes is JUUL, which experienced a 600% surge in sales during 2016-2017, giving it the greatest market share of any e-cigarette in the U.S. by the end of 2017.<sup>9</sup> Other companies are now also starting to sell e-cigarettes that look like USB flash drives.

All JUUL e-cigarettes have a high level of nicotine. A typical JUUL cartridge, or “pod,” contains about as much nicotine as a pack of 20 regular cigarettes.<sup>10</sup> These products also use nicotine salts, which allow particularly high levels of nicotine to be inhaled more easily and with less irritation than the free-base nicotine that has traditionally been used in tobacco products, including e-cigarettes. This is of particular concern for young people, because it could make it easier for them to initiate the use of nicotine through these products and also could make it easier to progress to regular e-cigarette use and nicotine dependence. However, despite these risks, approximately two-thirds of JUUL users aged 15-24 do not know that JUUL always contains nicotine.<sup>11</sup>

## You Can Take Action

We must take aggressive steps to protect our children from these highly potent products that risk exposing a new generation of young people to nicotine.<sup>2,7</sup> The bad news is that e-cigarette use has become an epidemic among our nation’s young people. However, the good news is that we know what works to effectively protect our kids from all forms of tobacco product use, including e-cigarettes.<sup>1,2,12</sup> We must now apply these strategies to e-cigarettes, including USB flash drive shaped products such as JUUL. To achieve success, we must work together, aligning and coordinating efforts across both old and new partners at the national, state, and local levels. Everyone can play an important role in protecting our nation’s young people from the risks of e-cigarettes.

## Information for Parents

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use for young people at <https://e-cigarettes.surgeongeneral.gov/>.
- Set a good example by being tobacco-free. If you use tobacco products, it’s never too late to quit. Talk to a healthcare professional about quitting all forms of tobacco product use. For free help, visit [smokefree.gov](http://smokefree.gov) or call 1-800-QUIT-NOW.
- Adopt tobacco-free rules, including e-cigarettes, in your home and vehicle.
- Talk to your child or teen about why e-cigarettes are harmful for them. It’s never too late.
- Get the Surgeon General’s tip sheet for parents, [Talk With Your Teen About E-cigarettes](https://e-cigarettes.surgeongeneral.gov/), at <https://e-cigarettes.surgeongeneral.gov/>. Start the conversation early with children about why e-cigarettes, including JUUL, are harmful for them.
- Let your child know that you want them to stay away from all tobacco products, including e-cigarettes, because they are not safe for them. Seek help and get involved.
  - Set up an appointment with your child’s health care provider so that they can hear from a medical professional about the health risks of tobacco products, including e-cigarettes.
  - Speak with your child’s teacher and school administrator about enforcement of tobacco-free school policies and tobacco prevention curriculum.
  - Encourage your child to learn the facts and get tips for quitting tobacco products at [Teen.smokefree.gov](http://Teen.smokefree.gov).

## Information for Teachers

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use, including JUUL, for young people at <https://e-cigarettes.surgeongeneral.gov/>.
- Develop, implement, and enforce tobacco-free school policies and prevention programs that are free from tobacco industry influence, and that address all types of tobacco products, including e-cigarettes.

- Engage your students in discussions about the dangers of e-cigarette use. To help you, the Food and Drug Administration (FDA), and Scholastic, developed free resources for teachers. These materials can be found at [www.scholastic.com/youthvapingrisks](http://www.scholastic.com/youthvapingrisks).

## Information for Health Professionals

- **You have an important role to play in addressing this public health epidemic.**
- Learn about the different shapes and types of e-cigarettes and the risks of all forms of e-cigarette use, including JUUL, for young people at <https://e-cigarettes.surgeongeneral.gov/>.
- Ask about e-cigarettes, including small, discreet devices such as JUUL, when screening patients for the use of any tobacco products.
- Educate patients about the risks of all forms of tobacco product use, including e-cigarettes, for young people.
- Encourage patients to quit. For free help, patients can visit [smokefree.gov](http://smokefree.gov) or call [1-800-QUIT-NOW](tel:1-800-QUIT-NOW).

## Information for States, Communities, Tribes, and Territories

- **You have an important role to play in addressing this public health epidemic.**
- Implement evidence-based population-level strategies to reduce e-cigarette use among young people, such as including e-cigarettes in smoke-free indoor air policies, restricting young peoples' access to e-cigarettes in retail settings, licensing retailers, implementing price policies, and developing educational initiatives targeting young people.
- Implement strategies to curb e-cigarette advertising and marketing that are appealing to young people.
- Implement strategies to reduce access to flavored tobacco products by young people.

KNOW THE RISKS. TAKE ACTION. PROTECT OUR KIDS.

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