



# Jefferson County Health Department

1541 Annex Road ♦ Jefferson, WI 53549 ♦ 920-674-7275 (Phone) ♦ 920-674-7477 (FAX)

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## Agenda

Jefferson County Board of Health  
1541 Annex Road, Jefferson, WI 53549  
Health Department Conference Room  
March 18, 2015  
**1 p.m.**

### Board Members

Dick Schultz, Chair; Ed Morse, Vice-Chair; Marie Wiesmann, RN, BSN, Secretary; John McKenzie; Don Williams, MD

1. Call to order
2. Roll Call/Establishment of a Quorum
3. Certification of Compliance with the Open Meetings Law
4. Review of the Agenda
5. Public Comment (Members of the Public who wish to address the Board on specific agenda items must register their request at this time)
6. Approval of January 21, 2015 Meeting Minutes
7. Communications
8. Board Organization including Number of Meetings and Membership
9. Financial Report
  - a. Income Statement
  - b. End of Year Financial Status
  - c. Vehicle Usage Report
10. Operational Update of the Environmental Health Program
11. Public Health Preparedness
12. Public Health Program and Review of Statistics
  - a. Communicable Disease Cases Reported
  - b. E-Cigarette Inclusion in County Smoke Free Air Policy
  - c. Discussion About Powdered Alcohol
  - d. Update on 2014 QI Projects
13. Personal Care Program and Review of Statistics
  - a. 2015 PCW Program Transition
14. Director's Report
  - a. Monthly Report to Administration/County Board
15. Status of Rock River Free Clinic and Community Dental Clinic
16. Next Meeting Date/Time/Agenda Items: 2015 Meetings: January 21, March 18, May 20, July 15, September 16, November 18
17. Adjourn

The Board may discuss and/or take action on any item specifically listed on the agenda.

*Individuals requiring special accommodations for attendance at the meeting should contact the County Administrator at 920-674-7101 24 hours prior to the meeting so appropriate arrangements can be made.*

**Jefferson County Board of Health  
Meeting Minutes – January 21, 2015  
Jefferson County Health Department – Conference Room  
1541 Annex Road, Jefferson, WI. 53549**

**Call to Order:** D. Schultz, Chair, called the meeting to order at 1:00 p.m.

**Roll Call/Establishment of a Quorum**

Quorum established.

**Board Members Present:** Dick Schultz, Chair; Ed Morse, Vice-Chair; Marie Wiesmann, RN, BSN, Secretary; John McKenzie

**Board Member Absent:** Don Williams, M.D. was excused prior to the meeting.

**Staff Present:** Gail Scott, Director; Diane Nelson, Public Health Program Manager; Ted Tuchalski, Environmental Health Specialist; Sandee Schunk, Clerical/Recorder

**Guests Present:** Benjamin Wehmeier, County Administrator

**Certification of Compliance with the Open Meetings Law:** The meeting was properly noticed.

**Review of the Agenda:** No changes to the agenda.

**Public Comment:** None

**Approval of November 19, 2014 Meeting Minutes:**

J. McKenzie questioned the phasing out of the Personal Care Program and the impact on the clients that currently receive in-home services. G. Scott explained that the clients would be transitioned to the staffing agencies that will work under contract with Care WI. and other payers. St. Coletta will need to find another billing service or become a Medicaid provider.

*Motion made by J. McKenzie to approve the minutes as written; second by E. Morse; motion carried.*

**Communications**

**a. Letter to the Editor from Board Chair**

Handout of letter written by Dick Schultz to the Daily County Union reviewed.

**b. Letter from President Obama**

Two handouts reviewed in packet regarding thanks for assisting citizens in obtaining ACA insurance.

**c. Late Entry – Bureau of Transportation Letter**

G. Scott reported that a letter granting \$ 4,000 for the car seat safety program was received in today's mail.

**Board Organization including Number of Meetings and Membership**

G. Scott reviewed that in 2014 Board of Health meetings were held every other month and currently has five active Board members. By State Statute – the Board of Health must meet at least quarterly for a total of four times per year.

B. Wehmeier reported that the size and meeting frequency of this Board is appropriate and if a meeting is not needed, it should be canceled in advance.

## **Financial Report**

- a. Income Statement:** G. Scott reviewed the November "Statement of Revenue and Expenditures" in the packet. As of November 30, 2014 the department was showing an estimated deficit of (\$ 58,271.33). However, in December, Wisconsin Medicaid Cost Reporting (WIMCR) paid a net sum of \$ 90,468 to the Personal Care Program and \$ 3,076 to the Public Health Prenatal Care Program. These payments are final settlements for 2013 Medicaid billing. The Personal Care Program will now show a surplus at the end of 2014 instead of the predicted deficit due to the WIMCR settlement payment.
- b. Vehicle Usage Report:** G. Scott reviewed the handout in the packet and reported that that both vehicles are being used by staff resulting in reduced mileage reimbursement expenses.

## **Operational Update of the Environmental Health Program**

T. Tuchalski, Environmental Specialist, reported that in the near future the DNR will be conducting a "well program" review and observing the procedure of obtaining well water samples.

T. Tuchalski reported they have been following two cases of high blood lead levels – one in Fort Atkinson and one in Watertown. The houses are inspected for peeling lead paint; occupations of caregivers are questioned; indoors of daycares are checked for possible problems; State protocol is followed by the Environmental Health Specialists and the Public Health Nurses.

T. Tuchalski reported that they have completed a few more pre-inspections of new businesses.

G. Scott reported on a hotel in Fort Atkinson that is allowing people to live there for weekly rent of \$150. The City of Fort Atkinson Building Inspector, Fire Inspector and Jefferson County Corporate Counsel are involved in this issue. The Building Inspector had allowed the two top floors to have an "occupancy permit" but the Health Department has not licensed the facility as a hotel. If an order to "cease and desist" is issued, the families would have to move out on a short notice. It is being decided if a 30 day order should be issued to have the problems repaired and brought up to fire code. In September, the building had occupants that complained of bed bugs. The owner is from out of town and bought the building after the 2008 flood to renovate it and sell it. M. Weismann suggested that the 30 day written notice be issued and request to see a business plan as to when the remodeling should be completed. G. Scott will be meeting this Friday at the hotel with the Fort Atkinson Fire Inspector, Building Inspector and Jeff Larkin. T. Tuchalski reported that the "pre-inspection fee" has been paid by the hotel. G. Scott reported that a health license will not be issued if any code violations are flagged at the next inspection.

## **Public Health Preparedness**

G. Scott reported that education on Ebola continues. An agreement will be put in place in case someone lives in Jefferson County but works in Madison - who is responsible for monitoring the patient? Fort HealthCare has agreed to treat a patient until Ebola has been ruled out or ruled in and there are plans locally and statewide on who would transport the patient. Treatment hospitals include U.W. Madison; American Family Children's Hospital Madison; Froedert Hospital Milwaukee; Children's Hospital Milwaukee.

G. Scott reported that \$ 1,000 will be awarded to the Jefferson County Health Department for working on a Mass Care plan. The formal plan will be for nursing homes or assisted living centers or for care of large numbers of people in case an emergency Public Health situation arises.

## Public Health Program and Review of Statistics

- a. **Communicable Disease Cases Reported:** D. Nelson reviewed the handouts in the meeting packet and reported that there are whooping cough cases reported in Walworth County. She also reported that Palmyra School District has 3 times as many immunization waivers signed by parents than in the whole county. D. Schultz commented that the Health Department needs to be involved with the Heroin Task Force to discuss the health effects Heroin use has on people. A Heroin Summit is scheduled at Fort Atkinson High School next week. G. Scott reported that she has been invited to attend the Summit but is not a scheduled speaker. D. Nelson reported that State statutes require follow-up on any blood lead result greater than 10. Any amount of lead in the 5 – 9 range is a “red flag” and Public Health wants to look for the source to stop exposure and provide education to the family. Public Health RNs and Environmental Health Specialists will offer to make a home visit. It has been determined that increased lead levels can cause Attention Deficit Disorder in children and impact the jail population in later years. Approximately 20 cases need follow-up now. Letters are being sent to physicians and clinics regarding the Health Department’s willingness to follow up on any blood lead levels between 5 and 9.
- b. **HPV Grant – Amy Fairfield:** G. Scott reported that an application was submitted to obtain funding in the amount of \$ 7,000 to encourage the administration of HPV (Human Papilloma Virus) vaccine to teenagers and young adults. HPV causes cervical and throat cancers. Both males and females can obtain the vaccine in a series of 3 doses. Countywide only 18% of clients have completed all 3 doses of the vaccine. Three hundred postcards have been sent out to parents that need to bring in their child to complete the series. The vaccine is to be given before sexual activity begins which makes it controversial for many parents. Once HPV is contracted the vaccine will not help. Amy Fairfield is the lead nurse on this project and plans to promote the vaccine through education, advertising, holding forums for parents and medical providers.
- c. **Consolidated Contracts Review and Approval:** G. Scott reviewed the handout of the 2015 Consolidated Contracts totaling \$ 381,639.  
*Motion by M. Wiesmann to accept the consolidated contracts for 2015; second by J. McKenzie; motion carried.* G. Scott reported that the Wisconsin Well Woman Program (WWWP) is to transition to a new model by June 30, 2015. The Health Department will only receive 6 months of grant money in 2015 for this contract. The new model will decrease drastically the coordinators and medical providers statewide that have participated in this breast and cervical screening program for 21 years. The State is having problems with medical providers not signing on to continue under the new model. M. Wiesmann reported that Fort HealthCare has decided to pull their “intent to apply” as they are not willing to “play the game” of the State not providing enough information regarding the upcoming changes. The Center for Women’s Health in Watertown has also decided not to apply to continue as a medical provider.

## Personal Care Program and Review of Statistics

- a. **2015 PCW Program Transition – Michele Schmidt:** G. Scott reviewed the handout of program statistics in the meeting packet.  
M. Schmidt reported that Medicaid clients are being moved to other agencies as it is harder to find coverage for them. There are 3 more Medicaid clients to move yet.  
M. Schmidt reported that the plan is to move 10 – 15 Care WI clients per week starting in February once the contracts are in place between the 2 staffing agencies and Care WI. The transition will be complete by mid to

late March. All other clients including Elderly Services and Private Pay will be transitioned by the end of March. All clients will receive a letter explaining that the Personal Care Program will no longer be “coordinated” by the Jefferson County Health Department.

#### **Director’s Report**

- a. **Monthly Report to Administration/County Board:** G. Scott reviewed the reports in the meeting packet. G. Scott reported that the Randy Schopen Foundation donated \$ 1,000 to the Cribs for Kids project. A photo and press release have been sent to the local newspaper. D. Nelson reported that the Cambridge School District wants the car safety seat program to become an annual event at their school with the Public Health Nurses and Student Nurses.

**Status of Rock River Free Clinic and Community Dental Clinic:** G. Scott reported that the Rock River Free Clinic Board is scheduled to meet later today. B. Wehmeier will speak at the Board meeting about a contract regarding Jefferson County funding for the clinic; Jill Johnson will speak about how the impact of Affordable Care Act insurance is affecting the Free Clinic. There is discussion that the Rock River Free Clinic may hire an Executive Director.

G. Scott reported that the Community Dental Clinic received a \$ 90,000 grant from the State of WI. Fort Hospital Foundation will help the clinic with ideas to make it financially sustainable such as support from companies or living trusts. The clinic is well staffed by paid and volunteer dentists and staff.

**Next Meeting Date/Time/Agenda Items: 2015 Meetings: January 21, March 18, May 20, July 15, September 16, November 18**

Next meeting will be on Wednesday, March 18, 2015 at 1:00 p.m.

Requests for the meeting: Discuss powdered alcohol that legislators are opposing; have the E-Cigarette resolution to review and discuss; report on the status of the QI plan for the Health Department.

**Adjourn:** *M. Wiesmann motioned to adjourn at 2:02 p.m.; second by E. Morse; motion carried.*

Respectfully submitted;  
Sandee Schunk - Recorder

Jefferson County Health Department - Statement of Revenues & Expenditures				
01/01/2015 - 01/31/2015	YTD Actual	Prorated Budget	Annual Budget	YTD Variance
<b>REVENUE:</b>				
Personal Care Medical Assistance	28,340.58	7,988.04	88,756.00	20,352.54
Personal Care Private Pay	1,248.50	1,584.27	17,603.00	-335.77
Personal Care - Care WI Private Pay	30,648.82	8,372.97	93,033.00	22,275.85
Personal Care Human Services	6,997.00	1,460.97	16,233.00	5,536.03
Personal Care Other Revenue	0.00	0.90	10.00	-0.90
Personal Care Prior Year Revenue	0.00	0.00	0.00	0.00
Personal Care WIMCR Funding	0.00	4,500.00	50,000.00	-4,500.00
<b>Total Personal Care</b>	<b>67,234.90</b>	<b>23,907.15</b>	<b>265,635.00</b>	<b>43,327.75</b>
<b>Total WIC</b>	<b>28,871.79</b>	<b>32,278.23</b>	<b>358,647.00</b>	<b>-3,406.44</b>
Public Health Fee for Service	5,705.62	12,783.51	142,039.00	-7,077.89
Public Health Grant Income	10,684.41	10,056.78	111,742.00	627.63
<b>Total Public Health</b>	<b>16,390.03</b>	<b>22,840.29</b>	<b>253,781.00</b>	<b>-6,450.26</b>
<b>Total Income</b>	<b>112,496.72</b>	<b>79,025.67</b>	<b>878,063.00</b>	<b>33,471.05</b>
<b>EXPENSE:</b>				
Personal Care Salary & Benefits	9,516.95	2,396.52	26,628.00	7,120.43
Personal Care Contracted Services	62,162.12	17,670.06	196,334.00	44,492.06
Personal Care Operating Expense	930.43	4,846.95	53,855.00	-3,916.52
<b>Total Personal Care</b>	<b>72,609.50</b>	<b>24,913.53</b>	<b>276,817.00</b>	<b>47,695.97</b>
WIC Salary & Benefits	25,794.16	26,925.30	299,170.00	-1,131.14
WIC Contracted Services	448.70	1,007.37	11,193.00	-558.67
WIC Operating Expense	2,628.93	4,345.56	48,284.00	-1,716.63
<b>Total WIC</b>	<b>28,871.79</b>	<b>32,278.23</b>	<b>358,647.00</b>	<b>-3,406.44</b>
Public Health Salary & Benefits	85,485.32	88,061.31	978,459.00	-2,575.99
Public Health Contractual	2,224.75	4,351.50	48,350.00	-2,126.75
Public Health Operating Expense	7,889.16	20,271.24	225,236.00	-12,382.08
Capital Equipment	0.00	0.00	0.00	0.00
<b>Total Public Health</b>	<b>95,599.23</b>	<b>112,684.05</b>	<b>1,252,045.00</b>	<b>-17,084.82</b>
<b>Total Expense</b>	<b>197,080.52</b>	<b>169,875.81</b>	<b>1,887,509.00</b>	<b>27,204.71</b>

SUMMARY				
Total Income	112,496.72	79,025.67	878,063.00	33,471.05
County Funding Tax Levy & Conting. Transfer	78,770.07	78,770.07	875,223.00	
2014 Restricted Carryover Funds to 2015	1,306.00		27,477.00	
2014 Capital Improvement Carryover to 2015				
Total Revenue	192,572.79	157,795.74	20,000.00	34,777.05
Total Expenditures	197,080.52	169,875.81	1,800,763.00	27,204.71
Net Surplus (Deficit)	-4,507.73		1,887,509.00	7,572.34

Prior Year Carryover Funds:	27,477.00
BU 4635 - PH Preparedness = \$5,531	
BU 4406.646 WIC Fit Families = \$3,950	
BU 4501 - Cribs = \$1,025	
BU 4632 - PH Preparedness = \$13,665.00	
BU 4639 - Immuniz. Coalition HPV = \$2,000	
BU 4301 - PCW Alzh. JCHS pre-pay = \$1,306	\$ 1,306.00
= Total Carryover Applied:	\$ 1,306.00

2014 End of Year Summary: Revenue/Expenses/Carryover Updated 02/13/2015 - S. Schunk (per Finance Dept. Rev/Exp. Summary Report: 02/12/15)			
Tax Levy Supported Business Units	Revenue 2014	Expense 2014	Total 2014
Public Health (4501)	\$ 75,204.76	\$ 901,946.45	\$ (826,741.69)
TB Dispensary (4502)	\$ 184.10	\$ 43.44	\$ 140.66
Head Start Nursing (4503)	\$ 2,691.13	\$ 2,690.62	\$ 0.51
MCH Consolidated Contract (4507)	\$ 24,697.00	\$ 67,458.06	\$ (42,761.06)
Lead Consolidated Contract (4514)	\$ 6,621.00	\$ 9,727.79	\$ (3,106.79)
Immunization Consolidated Contract (4515)	\$ 14,764.00	\$ 22,888.85	\$ (8,124.85)
WWWP Consolidated Contract (4519)	\$ 21,958.00	\$ 29,267.98	\$ (7,309.98)
Environmental Health (4521)	\$ -	\$ 35,000.00	\$ (35,000.00)
Mental Health (4524)	\$ 13,749.62	\$ 13,750.85	\$ (1.23)
Free Clinic Services (4528)	\$ 36,739.56	\$ 36,739.18	\$ 0.38
Public Health Preparedness Grant (4632)	\$ 57,538.00	\$ 57,536.43	\$ 1.57
Public Health Preparedness (4635)	\$ -	\$ 664.02	\$ (664.02)
Public Health Infrastructure/QI Improvement (4633)	\$ 10,735.00	\$ 10,743.51	\$ (8.51)
Immunization Coalition HPV (4639)	\$ 2,000.00	\$ -	\$ 2,000.00
Sub-total Public Health Programs:	\$ 266,882.17	\$ 1,188,457.18	\$ (921,575.01)
2014 Tax Levy	\$ 887,279.00		\$ 887,279.00
Total 2014 Public Health w/Tax Levy Funding:	\$ 1,154,161.17	\$ 1,188,457.18	\$ (34,296.01)
Storage			
Non-Tax Levy Supported Business Units:			
Personal Care - PCW (4301)	\$ 956,722.60	\$ 890,012.01	\$ 66,710.59
WIC Grant (4406)	\$ 329,569.00	\$ 329,491.86	\$ 77.14
WIC Fit Family Grant (4406.646)	\$ 16,602.00	\$ 16,402.00	\$ 200.00 c/o
WIC PEER Counselors Grant (4456)	\$ 12,447.00	\$ 12,448.14	\$ (1.14)
Sub-total Non-Tax Levy Supported Business Units:	\$ 1,315,340.60	\$ 1,248,354.01	\$ 66,986.59
Total 2014 Annual Activity (Revenue vs. Expenses): Matches Finance Dept. Summary	\$ 2,469,501.77	\$ 2,436,811.19	\$ 32,690.58
Surplus			
"Restricted" Carryover balances from 2013 into 2014:			
Public Health (4501) Restricted Donations - car seats 2013	\$ 284.00		
Public Health Preparedness Grant (4632) Carryover annual pre-pay 2013	\$ 13,665.00		
Public Health Preparedness (4635) Carryover 2013	\$ 6,195.30		
WIC Fit Family Grant (4406.646) Carryover annual pre-pay 2013	\$ 3,749.00		
Total "Restricted" Carryover balances from 2013 into 2014:	\$ 23,893.30		
2013 Carryover for purchase of a vehicle in 2014:	\$ 30,000.00		
2013 Carryover to reduce tax levy:	\$ 44,660.00		
Total "Restricted" Carryover from 2013 into 2014:	\$ 98,553.30	**To be applied from 2013 end of year to 2014	



"Restricted" Carryover balances from 2014 to 2015:	Carried to 2015:
Public Health (4501) Restricted Donations - cribs 2014	\$ 1,025.00
Public Health Preparedness Grant (4632) Carryover annual pre-pay 2014	\$ 13,665.00
WIC Fit Family Grant (4406.646) Carryover annual pre-pay 2014	\$ 3,950.00
Immunization Coalition HPV (4639) Revenue received in 2014 carry to 2015	\$ 2,000.00
Personal Care (4301) Alzheimer's Family Care (Human Services) pre-pay client 2015	\$ 1,306.00
Public Health Preparedness (4635) carryover from 2013 not used in 2014	\$ 5,531.00
Total "Restricted" Carryover from 2014 to 2015:	\$ 27,477.00
*** Non-Lapsing Form = Carryover into 2015	

2014 Summary of Revenue/Expenses/Carryovers:	Summary:
Total 2014 Annual Activity (Revenue vs Expenses):	\$ 32,690.58
Total from 2013 to 2014 to be applied:	\$ 98,553.30
Minus Total "restricted" carryover to 2015	\$ (27,477.00)
End of year 2014 net operational surplus:	\$ 103,766.88
Surplus matches Finance Summary Report	
**To be applied from 2013 end of year to 2014	
***Non-Lapsing Form = Carryover into 2015	

Year	Public Hlth. 4501 Mileage Pd	Public Hlth. 4501 Fuel Cost	Pers. Care 4301 Mileage Pd	Pers. Care 4301 Fuel Cost	WIC 4406 & Peer 4456 Mileage Pd	WIC 4406 & Peer 4456 Fuel Cost	Total Annual Mileage Pd	Total Annual Fuel Cost	Total Annual Travel Exp.	Routine Maint. 535352	Non- Routine Repairs	Total Annual Costs	Total Mileage Logged	Mileage Expense "Saved"	Rate per mile
2008	\$ 14,442.00	\$ -	\$ 11,660.00	\$ -	\$ 2,593.00	\$ -	\$ 28,695.00	\$ -	\$ 28,695.00	\$ -	\$ -	\$ 28,695.00	n/a	n/a	
2009	\$ 10,557.00	\$ -	\$ 15,599.00	\$ -	\$ 1,178.00	\$ -	\$ 27,334.00	\$ -	\$ 27,334.00	\$ -	\$ -	\$ 27,334.00	n/a	n/a	
2010	\$ 7,065.20	\$ 287.57	\$ 923.50	\$ 61.19	\$ 368.00	\$ 602.60	\$ 8,356.70	\$ 951.36	\$ 9,308.06	\$ -	\$ -	\$ 9,308.06	n/a	n/a	
2008: County vehicles not used/Personal Care = large volume visits															
2009: County vehicles not used/Personal Care nurses contracted w/Care WI = large volume visits															
2010: County vehicles utilized more often when available/Personal Care downsized with Family Care implementation															
VAN		2/15/2011	\$22,105.00												
2011	\$ 5,953.46	\$ 874.65	\$ 329.60	\$ 502.74	\$ 30.93	\$ 609.63	\$ 6,313.99	\$ 1,987.02	\$ 8,301.01	\$ 86.59	\$ -	\$ 8,387.60	9,478	\$ 5,260.29	0.555
2012	\$ 6,558.26	\$ 507.54	\$ 280.34	\$ 530.04	\$ 474.46	\$ 729.30	\$ 7,313.06	\$ 1,766.88	\$ 9,079.94	\$ 133.52	\$ 889.50	\$ 10,102.96	10,437	\$ 5,792.54	0.555
*2013	\$ 6,533.38	\$ 516.95	\$ 422.31	\$ 246.27	\$ 51.42	\$ 499.84	\$ 7,007.11	\$ 1,263.06	\$ 8,270.17	\$ 138.38	\$ -	\$ 8,408.55	8,447	\$ 4,772.56	0.565
**2014	\$ 5,233.14	\$ 616.62	\$ 309.81	\$ 156.96	\$ 335.44	\$ 522.60	\$ 5,878.39	\$ 1,296.18	\$ 7,174.57	\$ 305.23	\$ 495.28	\$ 7,975.08	6,506	\$ 3,643.36	0.560
***2015	\$ 181.17	\$ 24.38	\$ 5.18	\$ -	\$ 17.25	\$ 86.78	\$ 203.60	\$ 111.16	\$ 314.76	\$ -	\$ -	\$ 314.76	574	\$ 330.05	0.575
JEEP													35,442	\$ 19,798.79	
2014	Purchased: 05/14/2014		\$27,290.00												
2015													4497	\$ 2,518.32	0.56
													810	\$ 465.75	0.575
Totals:	\$ 24,459.41	\$ 2,540.14	\$ 1,347.24	\$ 1,436.01	\$ 909.50	\$ 2,448.15	\$ 26,716.15	\$ 6,424.30	\$ 33,140.45	\$ 663.72	\$ 1,384.78	\$ 35,188.95	40,749	\$ 22,782.86	

\*2013 expenses = as of 12/31/2013 (paid @ \$0.565/mile)

\*\*2014 expenses = as of 11/30/2014 (paid @ \$0.56/mile)

\*\*\*2015 expenses = as of 02/28/2015 (paid @ \$0.575/mile)

# Public Health Program Statistics 2015

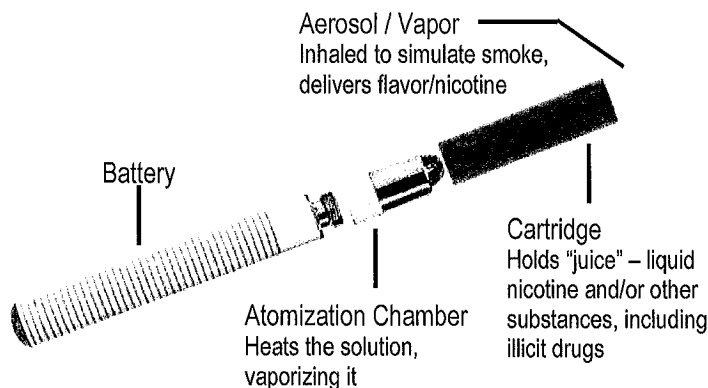
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# E-CIGARETTES A Growing Concern

July, 2014 | [www.tobwis.org](http://www.tobwis.org)

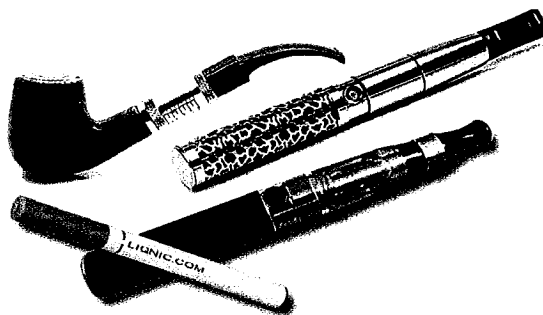
## WHAT ARE E-CIGARETTES?

An electronic cigarette is an oral device that can be used to simulate smoking and that produces an aerosol of nicotine and/or other chemicals.



## THEY TAKE MANY FORMS

E-cigarettes are also known as e-hookahs, hookah pens, vape pens, vaporizers, e-cigars, and e-pipes.



## WHY YOU SHOULD BE CONCERNED

### We've worked hard for clean air

- E-cigarettes produce more than just water vapor. The aerosol can contain nicotine, ultrafine particles, heavy metals, and toxic cancer-causing chemicals.<sup>1</sup>
- Wisconsin communities have come to expect clean indoor air; e-cigarette use threatens this standard and makes enforcement confusing.

### They're not regulated and haven't been proven safe

- There are no regulations on the manufacture or sale of the 450+ brands of e-cigarettes to protect consumers.
- Contents vary widely and don't always match the ingredients or amounts listed on labels.<sup>2</sup>
- The number of poison control calls linked to the "juice" used in e-cigarettes is on pace to double in 2014.<sup>3</sup>

### They aren't approved to help smokers quit

- Not one of these products has been approved by the FDA as a cessation device.
- E-cigarette users often continue to smoke regular cigarettes as well as use e-cigarettes.<sup>4</sup>

### They appeal to youth

- E-cigarettes are gaining popularity among youth.<sup>5</sup>
- Candy-like flavoring like grape and gummy bear target youth tastes.
- Marketing efforts dress-up e-cigarettes as safe and cutting edge.

**The use of e-cigarettes has more than doubled among youth.<sup>5</sup>**



<sup>1</sup> Americans for Non-Smokers Rights. Electronic (e-) Cigarettes and Secondhand Aerosol Fact Sheet.

<sup>2</sup> E-Cigarettes: Questions and Answers [consumer update]. (September, 2010). U.S. Food and Drug Administration. Retrieved from: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm225210.htm>

<sup>3</sup> Richtel, Matt. "Selling a Poison by the Barrel: Liquid Nicotine for E-Cigarettes." The New York Times, March 23, 2014.

<sup>4</sup> Dutra LM, Glantz SA. Electronic Cigarettes and Conventional Cigarette Use Among US Adolescents: A Cross-sectional Study. JAMA Pediatr. 2014 Mar 6.

<sup>5</sup> Notes from the Field: Electronic Cigarette Use Among Middle and High School Students - United States, 2011-2012. (September 6, 2013). U.S. Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report.

**ORDINANCE NO. 2014-\_\_\_\_\_**

**Amending Smoke Free Air Act to include prohibiting the use of e-cigarettes  
and electronic delivery devices**

Executive Summary

The Jefferson County Board of Health proposes to amend the Jefferson County Smoke Free Air Act, Ordinance No. 2003-06, to include the use of e-cigarettes and electronic delivery devices.

Unregulated high-tech smoking devices, commonly referred to as electronic cigarettes, or “e-cigarettes,” closely resemble and purposefully mimic the act of smoking by having users inhale vaporized liquid nicotine created by heat through an electronic ignition system. After testing a number of e-cigarettes from two leading manufacturers, the Food and Drug Administration (FDA) determined that various samples tested contained not only nicotine, but also detectable levels of known carcinogens and toxic chemicals, including tobacco-specific nitrosamines and diethylene glycol, a toxic chemical used in antifreeze. The FDA’s testing also suggested that “quality control processes used to manufacture these products are inconsistent or nonexistent.” (“Summary of results: laboratory analysis of electronic cigarettes conducted by FDA,” Food and Drug Administration (FDA), July 22, 2009; <http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm173146.htm> Accessed on: October 22, 2009.)

According to a more recent study, electronic cigarette emissions are made up of a high concentration of ultrafine particles, and the particle concentration is higher than in conventional tobacco cigarette smoke. (Fuoco, F.C.; Buonanno, G.; Stabile, L.; Vigo, P., "Influential parameters on particle concentration and size distribution in the mainstream of e-cigarettes," Environmental Pollution 184: 523-529, January 2014.)

Electronic cigarettes produce an aerosol or vapor of undetermined and potentially harmful substances, which may appear similar to the smoke emitted by traditional tobacco products. Their use in workplaces and public places where smoking of traditional tobacco products is prohibited creates concern and confusion and leads to difficulties in enforcing the smoking prohibitions. Smoke-filled workplaces result in higher worker absenteeism due to respiratory disease, lower productivity, higher cleaning and maintenance costs, increased health insurance rates, and increased liability claims for diseases related to exposure to secondhand smoke.

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THE COUNTY BOARD OF SUPERVISORS OF JEFFERSON COUNTY DOES  
HEREBY ORDAIN AS FOLLOWS:

Section 1. Section 3 of the Jefferson County Smoke Free Air Act is amended as follows:

3. DEFINITION.

(a) ~~“Smoking” means burning or holding, or inhaling or exhaling smoke from, any of the following items containing tobacco:~~

- ~~1. A lighted cigar.~~
  - ~~2. A lighted cigarette.~~
  - ~~3. A lighted pipe,~~
  - ~~4. Any other lighted smoking equipment.~~
- ~~[am. 06-08-10, Ord. 2010-10]~~

(a) “Smoking” shall mean inhaling, exhaling, burning or carrying any lighted or heated cigar, cigarette, pipe, or any other lighted or heated tobacco or plant product intended for inhalation, including hookahs and marijuana, whether natural or synthetic, in any manner or in any form. “Smoking” shall include the use of an electronic delivery device which creates an aerosol or vapor, in any manner or in any form, or the use of any oral smoking device for the purpose of circumventing the prohibition of smoking.

(b) “E-Cigarette or Electronic Delivery Device” shall mean any product containing or delivering nicotine or any other substance intended for human consumption that may be used by a person to simulate smoking through inhalation of vapor or aerosol from the product. “Electronic Delivery Device” shall include any such device, whether manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, e-hookah, or vape pen, or under any other product name or descriptor.

Section 2. This ordinance shall be effective after passage and publication as provided by law.

Ayes \_\_\_\_\_ Noes \_\_\_\_\_ Abstain \_\_\_\_\_ Absent \_\_\_\_\_ Vacant \_\_\_\_\_

Requested by  
Board of Health

04-21-15

Gail Scott & J. Blair Ward: 03-13-15

APPROVED: Administrator \_\_\_\_\_; Corp. Counsel \_\_\_\_\_; Finance Director \_\_\_\_\_

Article Link: [http://www.webmd.com/mental-health/addiction/news/20150313/powdered-alcohol-faq?ecd=wnl\\_day\\_031615&ctr=wnl-day-031615\\_nsl-lid-stry&mb=awDdcxCGCLWjhEwbyqu8heHnVev1imbCJ8HKCb5oC1k%3d](http://www.webmd.com/mental-health/addiction/news/20150313/powdered-alcohol-faq?ecd=wnl_day_031615&ctr=wnl-day-031615_nsl-lid-stry&mb=awDdcxCGCLWjhEwbyqu8heHnVev1imbCJ8HKCb5oC1k%3d)

## Substance Abuse and Addiction Health Center

Listen 

# Palcohol: Risky for Teens and People in Recovery?

By Kathleen Doheny

WebMD Health News

Reviewed by Arefa Cassoobhoy, MD, MPH

March 13, 2015 -- The powdered alcohol product known as Palcohol may be available on store shelves this summer. Some health officials are concerned it will only worsen underage drinking.

Federal regulators with the Alcohol and Tobacco Tax and Trade Bureau approved the new product this week. Five states have banned sales of powdered alcohol, and 28 states have proposed laws this year to ban or regulate it.

In the U.S., about 5,000 people under age 21 die each year due to alcohol-related accidents, homicides, suicides, and injuries, according to the National Institutes of Health.

Mark Phillips, the creator of Palcohol, doesn't see what the fuss over his product is about. He calls efforts to outlaw it the work of those who want a "nanny state."

## What Is Palcohol?

It's a powdered, freeze-dried version of common drinks. It includes rum, vodka, a Cosmopolitan, and a "powderita," Phillips' version of a margarita.

Each pouch-like package weighs about an ounce. Along with the powdered alcohol, it also includes natural flavorings and the sweetener sucralose. You add water or a mixer to the package and shake it to create an average-sized mixed drink. By itself, the powder has about 80 calories a package. One packet equals one shot of alcohol, according to Palcohol's web site.

The Alcohol and Tobacco Tax and Trade Bureau, a division of the U.S. Treasury Department, worked with the FDA to approve the product, says Tom Hogue, a spokesman for the bureau. The bureau reviews the formulation and labeling of distilled spirits products. The FDA reviews the non-alcoholic ingredients.

The FDA doesn't have concerns about those ingredients at this time, says Theresa Eisenman, a spokeswoman for the agency.

Hogue says that states "have very broad authority to regulate the sale of alcohol within their borders."

## Concerns

Powdered alcohol will trigger abuse by young people, says Scott Krakower, DO, assistant unit chief of psychiatry at Zucker Hillside Hospital, Glen Oaks, N.Y. "I think it's going to appeal to adolescents and will potentially be harmful," he says.

The easy-to-carry product may also tempt people in recovery from alcoholism, he says, since the package seems simple to conceal. He fears some people will try to snort it, which he views as especially dangerous due to choking hazards. Some may combine powdered alcohol with other drugs, such as heroin, he says.

## Concerns continued...

"We worry the sale of powdered alcohol will lead to increased alcohol and drug abuse, with serious implications and health consequences for the country's youth," says Harris Stratyner, PhD, vice president of Caron Treatment Centers in New York.

Another expert says it's simply too soon to know whether powdered alcohol will worsen the underage drinking problem. "We don't have any good science on this [one way or the other]," says Brandon Korman, PsyD, chief of neuropsychology at Miami Children's Hospital.

On Thursday, Sen. Charles Schumer (D-New York) proposed federal legislation to stop the production and sale of the product, calling it "Kool-Aid for underage drinking."

## Palcohol Creator: Concerns Unfounded

Snorting the powder won't be appealing, Phillips says on his product's web site. "It really burns. Imagine sniffing liquid vodka."

The package is 4 inches by 6 inches, so it's harder to conceal than some bottled alcohol, he says. Spiking a drink, another expressed concern, would take much longer with a powder than a liquid, he says.

Phillips expects the product to be available where liquor is sold and online, too. It will be more expensive than liquid alcohol, he says, but he didn't offer more details.

## Top Picks

Commonly Abused Prescription Drugs

Quitting Smoking: 14 Tips for the First Hard Days

Feeling the Ups and Downs of Bipolar Disorder?

Science or Science Fiction? 5 Medical Breakthroughs Happening Now

Brain Foods for Better Focus

Can You Get Hep C From Sex?

SOURCES:



## 2015 Personal Care Program Statistics

[illegible]



## JEFFERSON COUNTY HEALTH DEPARTMENT

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[www.jeffersoncountywi.gov](http://www.jeffersoncountywi.gov)

### January 2015 Monthly Report

Program/Area	Event/Attended or Activity
Budget	Sandee Schunk has been busy closing out 2014 budget with final billing & processing December expenses. She will bill CARS for December expenses with "final" reports to be submitted to the State when Finance closes 2014. Preparing for carryover report and plans for 2015.
Childhood Lead Poisoning Prevention	Kathy Cheek and Diane Nelson continue to work on Childhood Lead Policy changes. Letters went out to providers in January regarding the expansion of the program.
Coalition Meetings	Gail Scott attended the CHIP (Community Health Improvement Plan) meeting with Dodge County & City of Watertown to finalize the 2015 CHIP.
Communicable Disease Control	<p>Katrina Waldron and Serena Jahnke Berg are providing Directly Observed Therapy (DOT) and case management services to a client with previously active tuberculosis.</p> <p>January 13<sup>th</sup> Mass Clinic follow-up for completion of immunization series started in October at Mass Clinic exercises (Katrina Waldron and Serena Jahnke).</p> <p>Ebola information distributed to area providers, Fort HealthCare, EMS, Emergency Management, Law Enforcement, Fire and schools.</p> <p>Staff viewed the Ebola &amp; Influenza Webcasts held by the State Department of Health Services.</p> <p>74 immunizations were given to 34 clients.</p> <p>Six immunizations were provided to four Jail inmates.</p> <p>Follow-up on 25 confirmed communicable disease cases.</p> <p>Work has begun on the HPV grant including coordination with other Immunization Coalition members and public education via the Health Department Facebook site.</p> <p>Staff alerted to the national Measles outbreak. Information distributed to clinics, hospital and schools.</p> <p>Tamiflu was distributed to Long Term Care Facilities experiencing outbreaks of Influenza.</p>
Director/Health Officer	Gail Scott worked on updating policies and procedures; attended Rock River Free Clinic Board meeting; attended the Community Dental Clinic Board meeting, developed and completed the Community Dental Clinic Annual Report, attended Department Head meeting; Board of Health meeting; PHN Staff meeting presentation for annual HIPAA update for all staff; CHIP teleconference with Dodge/Watertown Health Departments and State Regional Office Director; met with Master's in Nursing Student. Gail Scott and Diane Nelson met with Terri Palm to discuss recruitment plans in anticipation of upcoming PHN retirements.
Environmental Health	Gail Scott and Jeff Larkin, EH Specialist, met with Fort Atkinson Fire Department and the Fort Atkinson Building Inspector regarding a facility operating without a license and with numerous code issues. Gail Scott provided information to and received consultation from the Jefferson County Corporation Counsel.
Jail Nursing	<p>Jail nurse Diane Lenz received an award at the Sheriff and Chief's Award Banquet.</p> <p>Diane Nelson participated in the Reducing Recidivism Coalition meeting.</p>
Kids Safety Project Injury Prevention Program	<p>The Car Seat Technicians installed nine car safety seats in January with all parents exhibiting understanding of how to properly install the seats.</p> <p>Gail Scott, Diane Nelson &amp; Serena Jahnke facilitated the quarterly Child Death Review Team meeting; new Jefferson County Medical Examiner in attendance as well as 17 other attendees; four deaths reviewed.</p> <p>The Health Dept. car seat technicians, Mary Stearns, Serena Jahnke, Vicki Gallardo and Marsha Hake as well as Gail Scott and Diane Nelson attended the 6<sup>th</sup> month follow-up meeting with other Jefferson County car seat techs and law enforcement.</p>
Personal Care Program	Michele Schmidt and Gail Scott met with Care Wisconsin, Inc. to plan for transition of the program.

Program Area	Event Attended or Activity
Public Health Preparedness Program	Gail Scott reviewed grant objectives and PHEP activities to date. Gail Scott communicated with Donna Haugom on next steps to develop a Mass Care Plan. Gail Scott met with Kraig Biefeld, Watertown Fire Department, regarding Fit Testing for all county EMTs.
Public Health Program Manager	Diane Nelson participated in the Citizen's Review Panel meeting in conjunction with Child Protective Services. Diane Nelson interviewed a potential new interpreter. Diane Nelson met with community volunteer who would like to take on the chair of the Jefferson County Breast Feeding Coalition.
Student Clinical	Diane Nelson attended a School of Nursing Preceptor dinner meeting in Madison with regard to the UW Madison students we host for clinical. Two UW Madison Nursing Students started their Public Health Clinical
WIC Team	A dietetics student, Monica Weis from Mount Mary University, complete her Community Nutrition Practicum with Jefferson County WIC during the month of January. She was a wonderful student who helped the WIC Project in many ways. Good Luck Monica! Marsha Hake and Mary Wollet participated in the WIC Breastfeeding Coordinator webinar on January 22. Mary Wollet participated in the WIC Statewide Webinar on January 28, and the WIC Southern Regional Directors meeting in Madison on January 30.
Wisconsin Well Woman Program Sandee Schunk	Worked on WWWP re-enrollment notices and inactivating WWWP records that have obtained BadgerCare or Affordable Care Act insurance or have failed to respond to 2 re-call reminders. Communicating with other WWWP coordinators in Southern Region regarding upcoming changes to the WWWP. Communications with Fort HealthCare about being a provider. Compiled a summary report of WWWP "2014 statistics" for management.

### **Focus for February 2015**

- ❖ Updating policies and procedures
- ❖ Further development of the QI Plan, working on QI projects
- ❖ Further development of the Community Health Improvement Plan (CHIP)
- ❖ Completing end of year financials
- ❖ Monitoring the national Measles outbreak
- ❖ Preparing for staff retirements
- ❖ Working with EM and Emergency Responders on disease prevention during response
- ❖ Working with EM on Mass Care Plan



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### February 2015 Monthly Report

Program Area	Event Attended or Activity
Coalition Meetings	Gail Scott attended the CHIP (Community Health Improvement Plan) meeting with Dodge County & City of Watertown to finalize the 2015 CHIP.
Communicable Disease Control	Serena Jahnke RN and Katrina Waldron RN-Case Managers for client with diagnosis of active TB were able to successfully assist the client in completing six months of TB treatment/therapy. This was a complicated case that involved many medical community partners. Jefferson County Health Department and Fort HealthCare Infection Control and Dr. Williams collaborated in writing an article to educate the public about the MMR vaccine and measles outbreak. Gail Scott was interviewed on WFAW radio and did an on-camera interview with Watertown Cable TV. The article was published in the print media. 98 immunizations were given to 47 clients. Follow-up on 20 confirmed communicable disease cases.
Director/Health Officer	Gail Scott worked on updating policies and procedures, including the AED Maintenance Policy/Procedure; attended Department Head meeting; developed a draft resolution for updating the County Smoke Free Air Act; CHIP teleconference with Dodge/Watertown Health Departments and State Regional Office Director; participated in the Public Health Preparedness Webcast; attended the WALHDAB/PHEP meeting; attended the DJHCP Board meeting; EMS Chief's meeting to discuss infection control and N-95 testing; reviewed & updated the draft CHIP document; State Health Officer and Ebola webcasts; meeting to complete the Mass Clinic AAR/IP; attended the LEPC & Jefferson County Interagency Council meetings; mentoring two BSN students
Environmental Health	Gail Scott and Jeff Larkin, EH Specialist, continue to work with Fort Fire and Building Inspector on a property in Fort Atkinson that opened without a license; Cease and Desist Order issued. Gail Scott provided information to and received consultation from the Jefferson County Corporation Counsel regarding this property.
Kids Safety Project Injury Prevention Program	Diane Nelson RN and Serena Jahnke RN completed the Community Logic Model for Wisconsin Healthiest Families and Keeping Kids Alive Initiative. The Car Seat Technicians installed six car safety seats in February with all parents exhibiting understanding of how to properly install the seats.
Prenatal Care Coordination	Serena Jahnke RN, Jackie Behm RN and Diane Nelson RN participated in quarterly Southern Region PNCC meeting Review and upgrade of PNCC electric documentation to comply with possible audits and include data for 2 goals to achieve in this program in 2015. (Amy Fairfield, Jackie Behm, Serena Jahnke, Diane Nelson)
Personal Care Program	Michele Schmidt has been working with Care Wisconsin, Inc., staffing agencies, clients and other support personnel in transitioning clients whose services were coordinated by JCHD.
Public Health Preparedness Program	Preparing to develop a plan for Mass Care. Continue to listen to bi-weekly PHEP webcasts. Review of mid-year progress with State.
Public Health Program Manager	Monthly Jail Nursing meeting. Short fit testing presentation to EMS Chiefs to assure their employees are protected against communicable disease. New interpreter hired and orientated. Attended Jefferson County Interagency Council meeting. Worked on MCH Contract deliverables. Attended the Reducing Recidivism meeting. Reviewed and updated the progress with the Jail Medical Strategic Plan with Kathy Eisenmann.

<b>Student Clinical</b>	Gail Scott is mentoring 2 BSN students; Amy Fairfield is mentoring 2 UW-Madison BSN students.
<b>WIC Team</b>	<p>First meeting of HD Wellness Committee. We developed JCHD Wellness Policy, based on the Fit Families Wellness Policy. We are conducting an environmental assessment. Developed a tentative schedule of promotions. Next meeting March 10.</p> <p>Marsha Hake and Vicki Gallardo participated in car seat check in Janesville.</p> <p>WIC Vendor Monitoring Teleconference—Mary Wollet</p> <p>WIC Statewide Teleconference—Mary Wollet</p> <p>WIC Nutritionists Teleconference—Mary Wollet</p> <p>During the month—all WIC staff must complete online ROSIE Security training modules.</p>

### **Focus for March 2015**

- ❖ Developing Health Department Annual Report
- ❖ Updating policies and procedures
- ❖ Further development of the QI Plan, working on QI projects
- ❖ Further development of the Community Health Improvement Plan (CHIP)
- ❖ Identifying category 2 or 3 for EMS Ebola response.
- ❖ Preparing for staff retirements
- ❖ Working with EM on Mass Care Plan
- ❖ Update on new vaccine schedule and new meningococcal vaccine
- ❖ Working with Head Start on Health Advisory Committee and health status of children