



Jefferson County Board of Health Agenda

1541 Annex Road, Jefferson, WI 53549

920-674-7275

October 20, 2021

1:00 p.m.

Jefferson County Courthouse Room 205

Zoom Meeting

<https://us06web.zoom.us/j/84309987986?pwd=NEZ3bC9MM0IUMUQxNUxGbUJmTjRVQT09>

Meeting ID: 843 0998 7986 Passcode: 034378

One tap mobile +13126266799,,84309987986# US (Chicago)



Board Members

Kirk Lund, Chair; Dick Schultz, Vice-Chair; Maria Dabel, Secretary; Samantha LaMuro, R.T.; Don Williams, MD

1. Call to Order
2. Roll Call (establish a quorum)
3. Certification of Compliance with the Open Meetings Law
4. Approval of the Agenda
5. Approval of Board of Health Minutes for July 21, 2021 Meeting
6. Communications
7. Public Comment (Members of the Public who wish to address the Board on specific agenda items must register their request at this time)
8. Review of Health Department Financial Report
9. Health Department Strategic Plan Discussion
10. Update on COVID-19 Pandemic
11. Discussion of the Public Health Program
 - a. Review of Statistics
 - b. Review of Communicable Disease Cases Reported
 - c. Staffing Update Health Department
 - i. New position – Licensed Practical Nurse
 - ii. Upcoming Retirements
12. Operational Update of the Environmental Health Program
 - a. Discussion of Concentrated Animal Feeding Operations (CAFOs)
13. Discussion of the Public Health Preparedness Program
14. Future Agenda Items
15. Adjourn

Next Scheduled Meetings: Wednesday – January 19, 2022

A Quorum of any Jefferson County Committee, Board, Commission or other body, including the Jefferson County Board of Supervisors, may be present at this meeting.

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 Health Department

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



Jefferson County Board of Health Minutes July 21, 2021 Zoom meeting or Room 205 at Jefferson County Courthouse

Board Members

Kirk Lund, Chair; Dick Schultz, Vice-Chair; Maria Dabel, Secretary; Samantha LaMuro, R.T.; Don Williams, M.D.

1. **Call to Order:** Meeting was called to order by Lund at 1:00 p.m.
2. **Roll Call (establish a quorum):**
Board of Health Members Present: Kirk Lund, Chair (via Zoom); Dick Schultz, Vice-Chair; Maria Dabel, Secretary; Sam LaMuro; Dr. Donald Williams. Quorum established per Scott.
Others Present: Gail Scott, Director; Elizabeth Chilsen, Public Health Program Manager; Sandee Schunk, Recorder; Samroz Jakvani, Epidemiologist (via Zoom); Kaylie Mason, Environmental Health Specialist (via Zoom); Michele Schmidt, Administrative Assistant II (via Zoom); Ben Wehmeier, County Administrator; Blair Ward, Corporation Counsel; Supervisor Anita Martin. Guests: Carrie Kendrick, Fort Atkinson; Lynn Kramer, Sullivan; Virginia Kubicek, Jefferson; Jan Johnstone, Jefferson; Stacy Raemisch, Lake Mills.
3. **Certification of Compliance with the Open Meetings Law:** Wehmeier certified compliance with the Open Meetings Law.
4. **Approval of the Agenda:** No changes to the agenda requested.
5. **Approval of Board of Health Minutes for April 21, 2021 Meeting:** *Motion by Schultz/Dabel to approve the Board of Health meeting minutes from April 21, 2021 as printed. Motion passed 5 – 0.*
6. **Communications:** None
7. **Public Comment:** 2 guests provided comments on agenda item #10 "Update on COVID-19 Pandemic".
8. **Review of Health Department Financial Report:** Schunk reviewed the May 2021 Statement of Revenue & Expense Report included in the meeting packet.
 - a. **Discussion and Possible Action on Public Health Fees:** A handout was provided. Scott requested that 2021 Public Health Fees not be raised in 2022. *Motion by Schultz/Dabel to keep administrative fees for TB Skin Tests and vaccinations at the current level. Motion passed 5 – 0.*
9. **Health Department Strategic Plan Discussion:** Scott reported the Health Department is conducting a strategic plan to look at how the department will look post-pandemic and update the Mission, Vision and Values with stakeholder input. LaMuro offered to send a copy of the Fort HealthCare Strategic Plan for a reference tool.
10. **Update on COVID-19 Pandemic**
 - a. **Statistics:** Jakvani reported on the current COVID-19 data and trends and updated the board on COVID-19 vaccines.
 - b. **Discussion and Possible Action on COVID-19 Special Projects Funding for Wisconsin Association of Local Health Department and Boards (WALHDAB):** Handout included in the meeting packet. WALHDAB members were asked to contribute voluntarily to the Special Projects Fund. *Motion by Williams/LaMuro to support and contribute \$900.00 to WALHDAB as one time funding for 2021. Motion passed 5 – 0.*
 - c. **Staffing:** Chilsen reported that during the COVID pandemic the department had 52 employees with 27 devoted solely to COVID. The additional staff has now been scaled back to 9 focused on COVID.
 - d. **Disease Investigation and Contact Tracing:** Chilsen reported that the staff is continuing emergency response, ICS structure, follow-up on hospitalizations, follow-up with schools, daycares and businesses for COVID-19 disease investigations and contact tracing.
 - e. **Vaccine Distribution:** Chilsen reported that we are shifting goals within the department and re-structuring. Focused on mobilizing clinics, ICS teams, working on outreach to faith-based facilities and businesses. We are no longer providing mass clinics unless requested and there will not be door-to-door visits to offer COVID vaccinations.
 - f. **Testing Plans:** Chilsen updated the board on testing plans and types of tests used.
 - g. **After Action Report/Improvement Plan for Testing and Vaccine Task Force:** Jakvani reviewed the handout included in the meeting packet.

11. Discussion of the Public Health Program

- a. **Review of Statistics:** Chilsen reviewed the handout included in the meeting packet and stated there was not a lot to report due to the focus being on COVID-19. With the restructuring of the Health Department, any recommendations are welcome for data points to gather for the Board of Health.
- b. **Review of Communicable Disease Cases Reported:** Chilsen reviewed the handout included in the meeting packet for dates 01/01/2021 – 06/30/2021. There were 1,515 confirmed COVID cases during this timeframe.
- c. **Staffing Update Health Department**
 - i. **New Positions – Epidemiologist and Drug Free Coalition Assistant:** Scott reported that the Epidemiologist position is being put into the 2022 County budget. It is being decided if this position will remain contracted or become a County employee. The Drug Free Coalition Assistant is currently approved as a Limited Term Employee (LTE) to assist the RN that coordinates the Drug Free Communities Grant. The newly created job description is included in the meeting packet. Chilsen reported if the COVID-19 cases continue to increase additional staff will be brought back on to assist with contact tracing, etc.
 - ii. **Expanding Mental Health Nursing Hours:** Chilsen explained that a Public Health RN currently works with the Human Services CSP and CCS programs providing Plans of Care for mental health lab tests, education and doctor ordered mental health injections. Human Services has requested additional RN hours which is being considered while balancing the needs for staffing at the Health Department.

Scott also reported that the Jefferson County WIC program was awarded a grant to look at a platform called “ONE” (Online Nutrition Education) for the tele-health project as a pilot site to engage with WIC clients. Few projects were awarded this grant. It is unknown at this time how much the funding will be. A budget amendment may be needed. WIC caseloads are down nationally due to increased FoodShare allotments during the pandemic, transportation barriers, etc.

12. Operational Update of the Environmental Health Program

- a. **Discussion and Possible Action on Proposed Department of Agriculture, Trade and Consumer Protection (DATCP) Agent Facility Fees:** Mason explained that the WI Department of Agriculture changed the food codes and names in October 2020 into 2 new categories: “Retail Food Establishment” and “Retail Food Establishment Serving Pre-packaged Meals”. Handout included in the meeting packet. *Motion LaMuro/Williams to accept the new fee structure, new names and categories based on previous food code and recommend forwarding this to the Jefferson County Board. Motion passed 5 – 0.*
- b. **Manganese in Water Discussion:** Martin had requested that Manganese in drinking water be looked into. Jakvani reviewed an additional handout provided: “Manganese Risk Report” and reported that the Manganese levels are not currently a concern in Jefferson County as it does not exceed the United States Environmental Protection Agency (EPA) health advisory for lifetime exposure to Manganese.

13. Discussion of the Public Health Preparedness Program

- a. **New Public Health Emergency Preparedness Grant (Budget Period 3):** Scott reviewed the handout included in the meeting packet. The grant period July 1, 2021 – June 30, 2022 was awarded in the amount of \$55,701.00. This grant is used to prepare for Public Health disasters such as floods and tornadoes, ICS staff trainings, recovery from COVID19, etc.
- b. **Vaccine Clinic After Action Report/Improvement Plan:** Scott reported that the staff and volunteers that worked at the mass COVID vaccine clinics at the Jefferson County Fair Park, Johnson Creek Outlet Mall, and in the community did a great job with many compliments received for the coordinated response and training provided. Board members complimented Scott and the entire Health Department staff with a great deal of gratitude for their hard work and long hours during the pandemic.

14. Future Agenda Items: No items requested at this time.

15. Adjourn: *Motion by Schultz/Dabel to adjourn meeting at 2:22 p.m. Motion passed 5 – 0.*

Next Scheduled Meeting: October 20, 2021.

Minutes prepared by: Sandee Schunk, Accountant II, Jefferson County Health Department and reviewed by Gail Scott, Director/Health Officer.

Tony Evers
Governor



DIVISION OF PUBLIC HEALTH

SOUTHERN REGIONAL OFFICE
1 WEST WILSON STREET ROOM 250
MADISON WI 53703-3445

Karen E. Timberlake
Secretary

**State of Wisconsin
Department of Health Services**

Fax: 608-267-2832
TTY: 711 or 800-947-3529

October 19, 2021

Mr. Kirk Lund, Chair
Jefferson County Board of Health
409 Fremont St
Lake Mills, WI 53551

Dear Mr. Lund,

The Division of Public Health has learned that Gail Scott will be retiring from the position of health officer for your health department. I write to offer the support and assistance of the Southern Regional Office as your agency works to fill this important position. Please send me the name, qualifications, and contact information of the individual who will serve as your agency's interim health officer, so I can work with him or her during this transitional period.

Maintaining classification as a Level II local health department under Wis. Stat. § 251.05, requires hiring a candidate who satisfies the requirements for a Level II local health officer set out in Wis. Stat. § 251.06(1)(b) and (d):

- (b) A local health officer of a Level II local health department shall have at least 3 years of experience in a full-time position with a public health agency, including responsibility for a communicable disease prevention and control program, preferably in a supervisory or other administrative position, and at least one of the following:
 - 1. A bachelor's degree from a nursing program accredited by the national professional nursing education accrediting organization or from a nursing program accredited by the board of nursing, either of which shall include preparation in public health nursing.
 - 2. A bachelor's degree in public health, environmental health, the physical or biological sciences or a similar field.
- (d) Notwithstanding pars. (a) to (c), relevant education, training, instruction, or other experience that an applicant obtained in connection with military service, as defined in s. [111.32 \(12g\)](#), counts toward satisfying the requirements for education, training, instruction, or other experience to qualify as a public health officer if the applicant demonstrates to the satisfaction of the department that the education, training, instruction, or other experience that the applicant obtained in connection with his or her military service is substantially equivalent to the education, training, instruction, or other experience that is required to qualify as a public health officer.

I strongly encourage you to hire a health officer who meets the educational requirements for a Level II local health department while considering the demographics of the jurisdiction and using recruitment and hiring processes that reach qualified candidates from varied backgrounds. The Southern Regional Office is available to assist you during the hiring process. When you have narrowed your pool of candidates, you may wish to submit their qualifications to me for a preliminary review. Once you have selected someone for the position, you must submit the individual's qualifications to me for the Division of Public Health formal review prior to completing the hiring and appointment process.

Mr. Kirk Lund
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October 19, 2021

There could be implications to the Level II designation, as well as the funding to your health department if an interim or new health officer is selected that does not meet qualifications as specified in statute.

If you have any questions during the application review or interview process, please feel free to contact me at (608) 266-2757 or Christina.BeachBaumgartner@dhs.wisconsin.gov. As the regional director for the Division of Public Health Southern Region, one of my responsibilities is to support your efforts and advise you on the public health issues you may encounter or questions you may have while filling this vacancy.

Sincerely,

Christina Beach-Baumgartner

Christina Beach-Baumgartner
Regional Director
Southern Region
Office of Policy and Practice Alignment
Division of Public Health
Department of Health Services

C: Benjamin Wehmeier, Jefferson County Administrator
Gail Scott, Jefferson County Health Officer
Paula Tran, State Health Officer, Division Administrator
Jen Rombalski, Office of Policy and Practice Alignment Director

Jefferson County Health Department - Statement of Revenues & Expenditures:

01/01/2021 - 08/31/2021	YTD Actual	Prorated Budget	Annual Budget	YTD Budget Variance
REVENUE:				
Total WIC	\$ 230,867.02	\$ 225,988.32	\$ 337,296.00	\$ 4,878.70
Public Health Fee for Service	\$ 27,653.97	\$ 88,524.42	\$ 132,126.00	\$ (60,870.45)
Public Health Grant Income	\$ 892,856.39	\$ 151,690.01	\$ 226,403.00	\$ 741,166.38
Total Public Health	\$ 920,510.36	\$ 240,214.43	\$ 358,529.00	\$ 680,295.93
Total Income	\$ 1,151,377.38	\$ 466,202.75	\$ 695,825.00	\$ 685,174.63
EXPENSE:				
WIC 4201 - 420109	\$ 213,192.56	\$ 205,667.89	\$ 306,967.00	\$ 7,524.67
WIC Fit Family 4202	\$ 8,843.04	\$ 12,031.86	\$ 17,958.00	\$ (3,188.82)
WIC Peer Counselor 4203-420309	\$ 8,831.42	\$ 8,288.57	\$ 12,371.00	\$ 542.85
Total WIC	\$ 230,867.02	\$ 225,988.32	\$ 337,296.00	\$ 4,878.70
Public Health = Tax Levy Supported Expenses	\$ 450,735.32	\$ -	\$ -	\$ 450,735.32
Public Health Grants	\$ 921,050.48	\$ 111,155.68	\$ 165,904.00	\$ 809,894.80
Public Health Fee-for-Service	\$ 21,922.23	\$ 36,249.01	\$ 54,103.00	\$ (14,326.78)
Total Public Health	\$ 1,393,708.03	\$ 147,404.69	\$ 220,007.00	\$ 1,246,303.34
Total Expense	\$ 1,624,575.05	\$ 373,393.01	\$ 557,303.00	\$ 1,251,182.04
2021 SUMMARY				
Total 2020 Income YTD:	\$ 1,151,377.38	\$ 466,202.75	\$ 695,825.00	\$ 685,174.63
2021 County Tax Levy Applied - ORG 4115:	\$ 582,564.67	\$ 582,564.67	\$ 873,847.00	\$ -
Total 2021 Revenue:	\$ 1,733,942.05	\$ 1,048,767.42	\$ 1,569,672.00	\$ 685,174.63
Total 2021 Expense:	\$ 1,624,575.05	\$ 373,393.01	\$ 557,303.00	\$ 1,251,182.04
2021 Annual Activity (Revenue vs. Expenses) as of 08/31/2021	\$ 109,367.00		\$ 1,012,369.00	

**Local Health Department Funding Allocations
Presented to Health Officers by Julie Willems Van Dijk,
Department of Health Services Deputy Secretary
August 13, 2021**

ELC COVID-19 Grant

\$250,000 base + population

10/01/2020-10/31/2022

Jefferson County: \$605,200

Use: Epidemiology, lab capacity, testing, contact tracing (no longer have to report these activities separately)

No longer can be used for immunization activities as of 08/01/2021

DHS expects most funding will be used by the end of 2021

ELC COVID-19 Grant (Contact Tracing)

\$50,000 base + population

10/01/2020-10/31/2022

Jefferson County: \$371,400

Use: Contact tracing

DHS expects most funding will be used by the end of 2021

New Funding Announced 08/13/2021

ARPA Grant

\$250,000 + base population

03/03/2021-12/31/2024

Jefferson County: \$655,000

Use: COVID-19 mitigation, immunization activities, build infrastructure/staff focused on COVID-19, activities associated with recovery assessing how COVID-19 has affected your community, look at services that have been delayed (other immunizations, CD and STI follow-up), technology updates, writing a recovery plan, with emphasis on disparities and infrastructure

Also suggested to look at County ARPA funding

Immunization/Vaccine Grant

\$25,000 + base funding

07/01/2021-06/30/2024

Jefferson County: \$112,900

Use: increase vaccination efforts

Also suggested to look to FEMA funding for mass clinics (first time we were told this)

PHEP Workforce Grant

07/01/2021-06/30/2023

\$50,000 + base population

Jefferson County: \$117,000

Use: Expand and sustain Public Health workforce, can be used to sustain existing staff

COVID-19 Health Disparities Grant

Use to reduce disparities

RFA will be released in September

Will be a competitive grant process

Total Jefferson County Health Department Funding

\$1,861,500

Total New Funding

\$884,900

Vaccine Usage Report

Vaccination Period: 01/01/2021 to 10/18/2021

Provider Organization Name: Jefferson County Health Department

Group Name	Trade Name	Funding	<1	1	2	3-5	6	7-10	11-12	13-18	19-24	25-44	45-64	65+	Totals
COVID-19	Janssen COVID-19 Vaccine	PRIVATE	0	0	0	0	0	0	0	1	3	10	1	1	16
COVID-19	Janssen COVID-19 Vaccine	PUBLIC	0	0	0	0	0	0	0	27	126	772	1193	168	2286
COVID-19	Moderna COVID-19 Vaccine	PUBLIC	0	0	0	0	0	0	0	115	712	2400	3331	2806	9364
COVID-19	Pfizer COVID-19 Vaccine	PRIVATE	0	0	0	0	0	0	1	12	16	136	168	65	398
COVID-19	Pfizer COVID-19 Vaccine	PUBLIC	0	0	0	0	0	0	127	790	174	825	960	2141	5017
DTP/aP - HepB - Polio	Pediarix	PUBLIC	4	1	1	1	0	0	0	0	0	0	0	0	7
DTP/aP - Polio	KINRIX	PUBLIC	0	0	0	6	1	0	0	0	0	0	0	0	7
HepA	Havrix-Adult	PUBLIC	0	0	0	0	0	0	0	0	0	0	0	1	1
HepA	Havrix-Peds 2 Dose	PUBLIC	0	0	0	7	1	1	0	1	0	0	0	0	10
HepB	Engerix-B Adult	PUBLIC	0	0	0	0	0	0	0	0	0	1	0	0	1
HepB	Engerix-B Peds	PUBLIC	0	0	0	0	0	0	2	1	0	0	0	0	3
Hib	PedvaxHIB	PUBLIC	4	2	1	4	0	0	0	0	0	0	0	0	11
HPV	Gardasil 9	PUBLIC	0	0	0	0	0	1	3	6	0	1	0	0	11
Influenza	FluLaval Quad, P-Free	PRIVATE	0	0	0	0	0	0	0	2	9	84	97	15	207
Influenza	FluLaval Quad, P-Free	PUBLIC	0	1	0	1	0	0	0	4	0	0	0	0	6
Influenza	FluLaval Quadrivalent	PRIVATE	0	0	0	0	0	0	0	1	2	2	1	0	6
Meningo	Menveo	PUBLIC	0	0	0	0	0	0	5	7	0	0	0	0	12
Meningo B	Bexsero	PUBLIC	0	0	0	0	0	0	0	1	0	0	0	0	1
MMR	MMR II	PUBLIC	0	1	1	8	0	1	1	1	2	2	1	0	18
Pertussis/Tdap - Td	Boostrix	PUBLIC	0	0	0	0	0	2	9	2	3	4	5	9	34
Pneumococcal	Prevnar 13	PUBLIC	5	2	1	0	0	0	0	0	0	0	0	0	8
Polio	IPOL	PUBLIC	0	0	0	5	0	1	2	2	0	0	0	0	10
Rotavirus	ROTARIX	PUBLIC	4	0	0	0	0	0	0	0	0	0	0	0	4
Td	Td	PUBLIC	0	0	0	0	0	0	0	0	0	0	0	1	1
Varicella	Varivax	PUBLIC	0	1	1	12	1	2	2	4	2	2	0	0	27
Totals:			17	8	5	44	3	8	152	977	1049	4239	5757	5207	17466
Client Counts:			3	2	1	11	1	3	78	550	638	2587	3529	2714	10117

Vaccine Usage Report

Vaccination Period: 07/01/2021 to 10/18/2021

Provider Organization Name: Jefferson County Health Department

Group Name	Trade Name	Funding	<1	1	2	3-5	6	7-10	11-12	13-18	19-24	25-44	45-64	65+	Totals
COVID-19	Janssen COVID-19 Vaccine	PRIVATE	0	0	0	0	0	0	0	1	3	10	1	1	16
COVID-19	Janssen COVID-19 Vaccine	PUBLIC	0	0	0	0	0	0	0	2	6	24	6	7	45
COVID-19	Pfizer COVID-19 Vaccine	PRIVATE	0	0	0	0	0	0	1	2	0	2	0	2	7
COVID-19	Pfizer COVID-19 Vaccine	PUBLIC	0	0	0	0	0	0	2	16	19	6	10	6	59
DTP/aP - HepB - Polio	Pediarix	PUBLIC	4	1	1	1	0	0	0	0	0	0	0	0	7
DTP/aP - Polio	KINRIX	PUBLIC	0	0	0	3	1	0	0	0	0	0	0	0	4
HepA	Havrix-Peds 2 Dose	PUBLIC	0	0	0	1	1	1	0	1	0	0	0	0	4
HepB	Engerix-B Peds	PUBLIC	0	0	0	0	0	0	2	1	0	0	0	0	3
Hib	PedvaxHIB	PUBLIC	4	1	1	0	0	0	0	0	0	0	0	0	6
HPV	Gardasil 9	PUBLIC	0	0	0	0	0	1	2	4	0	0	0	0	7
Influenza	FluLaval Quad, P-Free	PRIVATE	0	0	0	0	0	0	0	2	9	84	97	15	207
Influenza	FluLaval Quad, P-Free	PUBLIC	0	0	0	0	0	0	0	4	0	0	0	0	4
Meningo	Menveo	PUBLIC	0	0	0	0	0	0	4	6	0	0	0	0	10
MMR	MMR II	PUBLIC	0	0	1	7	0	1	1	1	0	0	0	0	11
Pertussis/Tdap - Td	Boostrix	PUBLIC	0	0	0	0	0	2	7	2	1	1	3	6	22
Pneumococcal	Prevnar 13	PUBLIC	5	1	1	0	0	0	0	0	0	0	0	0	7
Polio	IPOL	PUBLIC	0	0	0	4	0	1	2	2	0	0	0	0	9
Rotavirus	ROTARIX	PUBLIC	4	0	0	0	0	0	0	0	0	0	0	0	4
Td	Td	PUBLIC	0	0	0	0	0	0	0	0	0	0	0	1	1
Varicella	Varivax	PUBLIC	0	0	1	10	1	2	2	4	1	2	0	0	23
Totals:			17	3	5	26	3	8	23	48	39	129	117	38	456
Client Counts:			3	1	1	9	1	3	10	28	37	127	115	37	372

Jefferson County Communicable Disease Report

Disease	Confirmed Cases (01/01/2021 - 10/15/2021)
Enteric/Gastrointestinal	
Campylobacteriosis	12
Cryptosporidiosis	7
Cyclosporiasis	0
E. Coli, Pathogenic Shiga Toxin (STEC) = 4 Enteropathogenic (EPEC) =4 Enterotoxigenic (ETEC) = 2	10
Giardiasis	1
Listeriosis	0
Salmonellosis	6
Shigellosis	0
Yersiniosis	0
Invasive Bacteria	
Invasive Strep A (1) & B (5)	6
Mycotic (fungal)	
Coccidioidomycosis	0
Respiratory	
SARS-CoV-2 (COVID-19)	2,876
Influenza	0
Influenza Hospitalizations	0
Legionellosis	2
Tuberculosis, Latent Infection (LBTI)	4
Sexually Transmitted	
Chlamydia Trachomatis	132
Gonorrhea	27
Vaccine Preventable	
Haemophilus Influenzae, Invasive Disease	2
Hepatitis B, Acute	0
Hepatitis B, Chronic	0
Mumps	0
Pertussis	0
Strep Pneumonia	3
Varicella (Chickenpox)	1
Vectorborne	

Lyme Disease (B. Burgdorferi:8) (B. Mayonii: 0)	8
Arboviral Illness, West Nile Virus	0
Zoonotic	
Q Fever	0
Other	
Carbon Monoxide Poisoning	3
Hepatitis C, Acute	0
Hepatitis C, Chronic	10
Methicillin Resistant Staph Aureus (MRSA)	0
Mycobacterial Disease	4
Norovirus Infection	0

WISCONSIN WPDES PERMITTED CONCENTRATED ANIMAL FEEDING OPERATIONS



- CAFO's
- ▲ Jennie O Turkey

A total of 319 WPDES permits for Concentrated Animal Feeding Operations (CAFOs) are in effect in Wisconsin as of January 2021. Jennie-O Turkey Stores are permitted jointly under a single WPDES permit. All other CAFOs are permitted individually.

WISCONSIN DEPARTMENT
OF NATURAL RESOURCES



Office of Business
Support & External
Services

January 2021

The data shown on this map have been obtained from various sources, and are of varying age, reliability and resolution. This map is not intended to be used for navigation, nor is this map an authoritative source of information about legal land ownership or public access. Users of this map should confirm the ownership of land through other means in order to avoid trespassing. No warranty, expressed or implied, is made regarding accuracy, applicability for a particular use, completeness, or legality of the information depicted on this map.

Here are a few questions for you to answer. Do not spend too much time on your answers, just answer the best you can. P.S. You are not getting graded, so no worries if you do not know the answers to any of these questions. I am hoping by the time this interactive session is over, you come away with a new awareness.



1. What is a CAFO?
2. How many CAFOs are in Wisconsin?
3. What is your definition of a lagoon?
4. One cow equals how many humans in potential to poop?
5. What is an animal unit?
6. How many dairy farms went out of business in 2018?
7. What is a high capacity well?
8. How much milk was dumped in 2018 globally?
9. Are there any health risks associated with CAFOs?
10. How does a CAFO effect you, personally?

ANSWER KEY:

- 1. What is a CAFO?** Concentrated Animal Feeding Operation, over 1000 animal units confined more than 45 days during the year.
- 2. How many CAFOs are in Wisconsin?** There are 308 permits for CAFOS in Wisconsin. More than 60 of these CAFOs are operating without a current permit.
- 3. What is your definition of a lagoon?** I think of a lagoon as a shallow body of water around which there are various wildlife habitats and vegetation. This lagoon, however, is a manmade outdoor earthen basin filled with animal waste. This storage facility is legally allowed to leak 500 gallons per acre per day. Manure lagoons often take up several acres, and some facilities have more than one lagoon.
- 4. One cow equals how many humans in potential to poop?** 18 people. This is calculated by the potential to pollute based on bio-chemical oxygen demand.
- 5. What is an animal unit?** Animal units are based on weight and type of cow. To get the number of animal units for adult dairy cows, multiply the actual number of cows by 1.4.
- 6. How many dairy farms went out of business last year?** Wisconsin DATCP, the Department of Agriculture, Trade and Consumer Protection, says Wisconsin lost 638 dairy farms in 2018 alone.
- 7. What is a high capacity well?** A well that has the capacity to withdraw more than 100,000 gallons of water per day is a high capacity well. Many CAFOs have several high capacity wells. These wells can negatively impact the water table. Areas with a number of high capacity wells are more prone to problems with arsenic in the drinking water.
- 8. How much milk was dumped in 2018 globally?** The Guardian stated 128 tons of milk were dumped globally in 2018. Since the 1970s, several sources report that milk consumption has declined, as more people go to plant-sourced products...almond milk, for example.
- 9. Are there any health risks associated with CAFOs?** The National Board of Health studied CAFOs and cited concerns with the hydrogen sulfide in the air; methane gas; particulate matter; and microbes found in the air, water, and on the land due to CAFOs. The antibiotics in the feed given to the animals makes their way to our water sources. There are pathogens in the manure that are not only airborne, but also applied to fields. Yes, there are health risks.
- 10. How does a CAFO effect you, personally?** Think about the air you breathe; where the source is from which you get your water; the recreational opportunities you pursue (fishing?); the food you eat; the roads you travel on. No matter where we live in Wisconsin, CAFOs effect each of us in some way.



SRAP
Socially Responsible
Agricultural Project



Factory Farms Harm Our Communities

Factory farms, officially called Concentrated Animal Feeding Operations (CAFOs), can make significant short-term profits because they externalize their production costs onto neighboring communities. Local residents end up paying for damaged roads due to heavy CAFO semi-truck traffic, manure spill clean-ups, decreased land fertility, fish kills, and increased healthcare costs.



On environmentally sustainable family farms, animal waste is used to improve soil fertility and add essential nutrients. CAFOs, however, attempt to dispose of vast quantities of animal waste on limited amounts of farmland. This over-application of waste pollutes our water, soil, and air.

CAFOs generate massive amounts of waste. According to the U.S. Department of Agriculture, CAFOs produce 500 million tons of manure annually. This staggering number is three times the amount of sewage produced by humans in the U.S. But unlike cities, CAFOs do not treat the sewage they produce. Instead, they dump animal feces, urine, and antibiotic-laden waste into gigantic open-air lagoons until they can spread it onto neighboring fields.



While festering in these lagoons, liquefied animal waste often leaches into the groundwater, contaminating neighboring wells and rendering water unsafe for humans and farm animals. When CAFOs spread their waste onto fields, that waste frequently runs off into waterways. The resulting overload of nutrients causes rapid algae growth, which depletes the water of oxygen and kills large numbers of fish and other aquatic life. Waste runoff also transports dangerous fecal bacteria, such as *E. coli*, into waterways and wells. For example, a heavy rain caused manure to infiltrate a municipal well in [Walkerton](#) (Ontario, Canada) in May 2000. Even though the water was being chlorinated, the amount of *E. coli* overwhelmed the treatment system. Seven people died, and more than 2,300 people became ill due to drinking tap water. In addition to contaminating water, CAFO waste pollutes the air. Liquefied animal waste emits 160 known toxic gases, including hydrogen sulfide, a deadly gas with the characteristic stench of rotten eggs. Small droplets of waste also become airborne, carrying a plethora of microorganisms and pathogens into surrounding communities. For example, the [Excel](#)

Dairy CAFO in Minnesota emitted so much hydrogen sulfide that the Minnesota Department of Health recommended neighbors evacuate the area. After years of violations, the Minnesota Pollution Control Agency closed the CAFO in 2009, but the lagoons full of manure remained.

Decomposing CAFO waste releases greenhouse gases too, including methane and nitrous oxide, which contribute to climate change.

Worldwide, agricultural emissions comprise nearly 20% of all greenhouse gas emissions generated by human activities.

2018 News from SRAP

FACT SHEET

AIR POLLUTION FROM FACTORY FARMS

- Most meat, milk, and eggs produced in the United States come from animals raised in industrial factory farms – facilities that confine hundreds, thousands, or even millions of animals.
- EPA estimates that there are approximately 20,000 of these facilities throughout the country, and many are geographically clustered in certain regions and communities.ⁱ
- Factory farms (also called concentrated animal feeding operations or CAFOs) produce more than 300 million tons of manure every year, which is more than three times the amount of waste produced by humans.ⁱⁱ The waste is often stored in enormous sewage pits or “lagoons” before being spread, effectively untreated, on crop land.
- Factory farms emit a large number of air pollutants, including hydrogen sulfide (which causes extreme odors for downwind residents, and contributes to acid rain and regional haze), ammonia (which causes respiratory problems in farmers and neighbors), particulate matter (which can trigger asthma and heart attacks), volatile organic compounds (which can cause headaches, nausea, and increased risk of cancer), and greenhouse gases (which cause a warming of the climate often referred to as climate change). These dangerous air emissions emanate from various areas on the facility, with some of the greatest releases coming from the animal confinement areas and waste impoundments.
- Factory farm emissions of two greenhouse gases – methane and nitrous oxide – are a significant driver of climate change. Nitrous oxide has more than 300 times the global warming potential of carbon dioxide, and methane has more than 20 times the potential. In 2006, factory farms in the U.S. were responsible for emitting almost nine million tons of methane, or almost 185 million tons of carbon dioxide equivalent, according to EPA.ⁱⁱⁱ
- Ammonia and nitrogen oxide gases from factory farms contribute to water pollution and “dead zones” in estuaries and lakes. Nitrogen from these gases binds to rain drops, where, upon precipitation, it is washed into waterways and feeds the growth of algae blooms, which die and rot, sucking oxygen out of the water.
- In addition to causing health and quality of life problems, air pollution from factory farms also drive down the real estate values of nearby residents. University of Missouri researchers found that every factory farm in that state depresses surrounding property values by \$2.68 million.^{iv}
- Despite clear scientific evidence that industrial animal operations contribute significantly to nationwide air pollution that negatively affects human health and welfare, EPA currently does not require factory farms to meet any testing, performance, or emission standards under the Clean Air Act, which was enacted nearly 45 years ago. However, as the petitions make clear, the Clean Air Act has two at least programs that EPA could use to regulate factory farm air pollution.

ⁱ EPA, NPDES CAFO Reporting Rule, 76 Fed. Reg. 65431, 65445 (Oct. 21, 2011).

ⁱⁱ Pew Commission on Industrial Farm Animal Production. “Putting meat on the table: industrial farm animal production in America.” April 2008 at 23.

ⁱⁱⁱ EPA, Overview of Greenhouse Gases, <http://epa.gov/climatechange/ghgemissions/gases/ch4.html>.

^{iv} Mubarak, H., T.G. Johnson, and K.K. Miller. 1999. *The impacts of animal feeding operations on rural land values*. Report R-99-02. College of Agriculture, Food and Natural Resources, University of Missouri–Columbia.

Unpaved Roads & Dust

A MESSAGE FROM THE SPOKANE REGIONAL CLEAN AIR AGENCY

BACKGROUND

Why the concern over dust? The Spokane Regional Clean Air Agency (Spokane Clean Air) responds to many citizen complaints regarding dust. During the dry summer months, dust can especially be an air quality concern and a public nuisance. If left uncontrolled, dust can be public health hazard.

Is dust a health concern?

Yes. When inhaled, fine dust particles travel deep into the lungs, increasing breathing problems, damaging lung tissue, and aggravating existing health problems. Those at highest risk to experience health impacts are those with respiratory conditions, the elderly and the young. Children are at risk because their lungs are still developing.

Where does all the dust come from?

In the Spokane area, most of the dust pollution comes from a combination of activities, including:

- Driving on paved roads before winter traction sand is cleaned up
- Driving on unpaved roads and parking lots
- Dirt and mud tracked onto clean roadways (from dirt roads, construction sites, dirt alleys, etc)
- Construction and demolition activities
- Dirt, gravel and other types of storage piles
- Handling and transfer of materials
- Agricultural/farming activities

What can be done to reduce dust?

- Avoid travel on unpaved roads whenever feasible. Use an alternate route to reach your destination.
- If you have to drive on an unpaved road, keep your speed down. Driving slowly on an unpaved road will dramatically reduce the amount of dust emissions.
- Hire a private contractor, who is approved by the city or county, to apply a dust suppressant to your road (often referred to as road "oiling" although it isn't oil that is applied.)
- Establish a local or road improvement district with your neighbors, to help fund part of the paving project. For more information, contact:

City of Spokane: 625-6300,
www.MySpokaneCity.org

Spokane County: 477-3600,
www.SpokaneCounty.org
- Keep your vehicle in the driving lane and off the shoulder of the road where dirt and debris accumulate.
- Don't use a leaf blower to clean dirt/debris from sidewalks, parking lots, or driveways. Blowing this into the air doesn't solve the problem, it just moves it around. Use a broom and dustpan instead!
- When hauling debris, keep the load covered at all times.