Joint Committee Meeting
Jefferson County Board of Health
Executive Committee

AGENDA
Zoom Meeting or in person in Room 205 – Jefferson County Courthouse

Join Zoom Meeting
https://zoom.us/j/97636168682
+13126266799 US Meeting ID: 976 3616 8682#

Board of Health Members
Don Williams, MD, Chair; Kirk Lund; Dick Schultz, Secretary; Maria Dabel; Samantha LaMuro, R.T.
Executive Committee Members
Amy Rinard, Chair; Jim Braughler, Vice Chair; Conor Nelan, Secretary; Steve Nass; Michael Wineke

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. Election of Board of Health Officers
   a. Chair
   b. Vice-Chair
   c. Secretary
6. Approval of Board of Health Minutes for January 15, 2019 Meeting
7. Approval of Executive Committee minutes for May 27, 2020 Meeting
8. Communications
9. Public Comment (Members of the Public who wish to address the Board on specific agenda items must register their request at this time)
10. Update on COVID-19 Outbreak
11. Discussion and Possible Action on a Communicable Disease Ordinance
   a. Discussion and Possible Action on the PHEP COVID-19 Grant
   b. Discussion and Possible Action on the Cares Act Funding
      i. $30,000 Planning Grant
      ii. Contact Tracing Funding
      iii. Testing Coordination Funding
13. Discussion of the Public Health Program
   a. Review of Statistics
   b. Review of Communicable Disease Cases Reported
   c. Staffing Update Health Department and Jail
14. Operational Update of the Environmental Health Program
15. Discussion of the Public Health Preparedness Program
17. Future Agenda Items
18. Adjourn

Next Scheduled Meetings: Wednesday –July 15, October 21, 2020

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.
Call to Order: Don Williams, MD, Chair, called the meeting to order at 1:02 p.m.

Roll Call (establish a quorum): Quorum established by Gail Scott, Director.

Certification of Compliance with the Open Meetings Law: Gail Scott, Director, certified compliance.

Board Members Present: Don Williams, MD, Chair, Maria Dabel, Samantha LaMuro

Board Members Absent: Conor Nelan, Vice-Chair, Dick Schultz, Secretary

Staff Present: Gail Scott, Director, Elizabeth Chilsen, Public Health Program Manager, Tyler Kubicek, Environmental Health Specialist, Sandee Schunk, Accountant II, Recorder

Approval of the Agenda: A motion was made by LaMuro/Dabel to approve the agenda. Motion passed 3-0.

Approval of Board of Health Minutes for October 16, 2019 Meeting: A motion was made by LaMuro/Dabel to approve the October 16, 2019 meeting minutes. The motion passed 3-0.

Communications: None.

Public Comment: None.

Review of Health Department Financial Report:

a. Review and Discussion of Income Statement: Sandee Schunk, Accountant II, reviewed the November 30, 2019 Statement of Revenue & Expenses included in the meeting packet. The report shows an estimated deficit of ($61,011.03). The 2019 budgeted reserve funding available in the amount of $158,723 will be used to offset a year-end deficit.

b. Discussion and Possible Action on Drug Free Communities Support Grant Funding: Gail Scott, Director, reported that on January 14, 2020, the Jefferson County Board approved the Health Department to be fiscal agent for the Jefferson County Drug Free Coalition for the administration of this Federal grant in the amount of $125,000, with an additional $125,000 matching requirement. The Resolution (included in the meeting packet) accepts the grant and amends the Health Department 2020 budget effective January 1, 2020 with an estimated net savings of $85,227 in levy funding due to billable salary and fringe benefits for Emi Reiner, Public Health RN. The grant may be renewable up to 10 years.

c. Discussion and Possible Action on WIC Infrastructure Grant: Gail Scott, Director, reported that on January 14, 2020, the Jefferson County Board approved the WIC Infrastructure Grant in the amount of $48,120 and amended the 2020 budget. The Resolution, included in the meeting packet, reports the State Department of Health Services WIC Program audit results found the current WIC reception area to be deficient in maintaining the required WIC participant confidentiality and awarded the grant for an approved WIC reception area remodel.

d. Discussion and Possible Action on Consolidated Contracts: Gail Scott, Director, reviewed the 2020 Department of Health Services Consolidated Grant contracts: Immunizations, Maternal & Child Health, Childhood Lead and WIC.

e. Update and Possible Action on 2020 Budget: Gail Scott, Director, reported that besides the 2 budget amendments listed above, an increase in Health Department nursing service hours was requested for 2 Jefferson County Human Services programs: Community Support Program (CSP) = $5,075 and Comprehensive Community Services Program (CCS) = $20,300 resulting in 2020 budget amendments submitted and approved by Ben Wehmeier, County Administrator.

A motion was made by Dabel/LaMuro to approve the financial report. The motion passed 3-0.

Operational Update of the Environmental Health Program:

a. Discussion and Possible Action on Updated Jefferson County Environmental Sanitation Ordinance: Gail Scott, Director, reviewed the ordinance included in the meeting packet which shows language correction, updated DATCP (Department of Agriculture, Trade and Consumer Protection) statutes and rules. Tyler Kubicek, Environmental Specialist, explained that the updated ordinance mirrors the City of Watertown ordinance.

A motion was made by Dabel/LaMuro to accept the updated Jefferson County Environmental Sanitation Ordinance. The motion passed 3-0.
b. Discussion and Possible Action on Jefferson County Environmental Health and Agent Consortium Memorandum of Understanding: Gail Scott, Director, reviewed the information included in the meeting packet. This Memorandum of Understanding was reviewed and approved by Blair Ward, Corporation Counsel. The Environmental Health personnel are employees of City of Watertown Health Department. A motion was made by LaMuro/Dabel to accept the Memorandum of Understanding as written. The motion passed 3-0.

c. Discussion and Possible Action on Updated 2020 Fees: Gail Scott, Director, reviewed the 2020 Fees listed in the meeting packet. Tyler Kubicek, Environmental Health Specialist, explained that license fees increased 2.5% with an adjustment of re-inspection fees to have step increments. Adjustment of pool fees to match up with state licensing requirements. Tiered pre-inspection fees for changes of owners vs. new buildings/change of use. A 10% fee is given to DATCP as an administrative charge for oversight and consultation. Upon approval, fees would take effect April 1, 2020 to align with annual license renewals. A motion was made by Dabel/LaMuro to approve the 2020 fee schedule, after the Assistant Corporation Counsel has their question answered, and pass it on to the Finance Committee and Jefferson County Board for approval. The motion passed 3-0. (Note: After the meeting G. Scott communicated with the Assistant Corporation Counsel who stated she did not have a question about the fees.)

Discussion of Public Health Preparedness Program

a. Recent Exercises and Meetings: Gail Scott, Director, reported on the following activities: Democratic National Convention planning, SCWIHERC membership meeting, Edgewood Student education, Local Emergency Planning Committee meeting, Family Assistance Center Exercise, Pet Sheltering exercise, Alden Estates Closed Points of Dispensing meeting, Active Shooter Training for staff.

Discussion of Public Health Program

a. Review of Statistics: Elizabeth Chilsen, Public Health Program Manager, reviewed the report included in the meeting packet. Effective January 1, 2020, different data points will be used to capture statistics. 2019 showed increases in car safety seat inspections & jail immunizations, decrease in fluoride varnishes, and increase in mental health CSP nursing visits.

b. Review of Communicable Disease Cases Reported: Elizabeth Chilsen, Public Health Program Manager, reported that Category I Communicable Diseases such as Pertussis, Measles, Mumps, Meningitis, Hepatitis A, Hib and Polio are called to Gail Scott, Director, by the medical provider and staff follow-up on these cases immediately. Communicable Disease follow-up takes a lot of nursing time to include reported cases, probable cases, suspect cases or not a case. The Health Department gets $5,500 in grant funding per year from the State which only makes a small dent in the staff payroll expense involved.

c. Update on Drug Free Communities Grant: Previously discussed in agenda item 8b.

d. Update on creation of Rock River Community Clinic through Combining Rock River Free Clinic, Watertown Area Cares Clinic, Community Dental Clinic and Rainbow Hospice Palliative Care Program: Gail Scott, Director, reported that these charitable clinics are being combined with a future goal to become a Federally Qualified Health Center (FQHC) under a merger agreement. Eventually a clinic will be opened in Whitewater which is a medically underserved area. There is a new Board of Directors, the assets and bank accounts are being combined, payroll and billing will be centralized, Medicaid reimbursement and grant eligibility will increase, an electronic medical record system is being supported by Fort HealthCare.

e. Staffing Update Health Department and Jail: Gail Scott, Director, reported that Bonnie Peot, Rock River Free Clinic LPN, has recently retired. Jail staffing issue is still in process. Due to liability insurance concerns the County wants the jail to contract out for nursing and mental health staff.

Discussion of Health Department Monthly Report: Gail Scott, Director reviewed the information included in the meeting packet.

Future Agenda Items: Please email Gail Scott, Director, with any requested agenda items for the next meeting.

Adjourn: A motion was made by LaMuro/Dabel to adjourn the meeting at 2:15 p.m. The motion passed 3-0.

Next Scheduled Meetings: Wednesday – April 15, July 15, October 21, 2020 at 1:00 p.m.

Minutes recorded and prepared by: Sandee Schunk, Accountant II, Jefferson County Health Department and reviewed by Gail Scott, Director/Health Officer
ORDINANCE NO. 2020-____

Powers and Duties of County Health Officer

16.01 PURPOSE. This ordinance is enacted is to promote and protect the public health, safety, and general welfare.

16.02 JURISDICTION. This ordinance applies in all cities, villages, and towns, provided, however, that any section of the ordinance that has a counterpart in an ordinance of a city, village or town shall not be enforced by the County in said city, village or town, or in a city, village or town with a local health department.

16.03 AUTHORITY. This Ordinance is adopted pursuant to the authority granted in Chapter 252 of the Wisconsin Statutes.

16.04 DEFINITIONS. As used in this Ordinance:

1. Public Building means any structure, including exterior parts of such building, such as a porch, exterior platform, or steps providing means of ingress or egress, used in whole or in part as a place of resort, assemblage, lodging, trade, traffic, occupancy, or use by the public including the land upon which the public building is located. Public Building as defined above also includes structures and land where members of the public pay a fee to gain entry or where there is a license required to conduct business with members of the public.

2. Place of Employment means every place, whether indoors or outdoors or underground, and the premises appurtenant thereto, where either temporarily or permanently any industry, trade, or business is carried on, or where any process or operation, directly or indirectly related to any industry, trade, or business, is carried on, and where any person is, directly or indirectly, employed by another or self-employed.

3. Communicable Disease means a disease or condition listed in Appendix A Chapter DHS 145 of the Wisconsin Administrative Code, any previously unknown novel contagion or novel subtypes of any disease designated as notifiable at the national level.

4. Outbreak means an unusual aggregation of health events that are grouped together in a short time period and limited geographic area. Epidemic means an increase in the number of cases of a disease above what is normally expected in the population in the area. Pandemic means an epidemic that has spread over several countries or continents.

5. Unless specifically defined in this ordinance, definitions as set forth in Wis. Stat. Chapter 252 and Wis. Admin. Code Chapter DHS 145, as amended and/or renumbered from time to time, are hereby adopted and incorporated by reference as if fully set forth in this section.

16.05 The Jefferson County Health Officer is the appointed department head, or in the absence of an appointed department head, the acting department head, of the Jefferson County Health Department.

16.06 The Jefferson County Health Officer, upon the appearance of any communicable disease in his or her territory, shall immediately investigate. The Jefferson County Health Officer shall promptly take all measures necessary to prevent, suppress and control communicable diseases. The County Health Officer may inspect schools, places of employment, and other public buildings within his or her jurisdiction as needed to determine whether the buildings are kept in a sanitary condition.

16.07 The Jefferson County Health Officer may establish systems of disease surveillance and inspection to ascertain the presence of any communicable disease within Jefferson County.
County Health Officer may, with a special inspection warrant issued under s. 66.0119, enter any private property, building, place of employment, vessel or conveyance not open to the public to inspect the same, to issue orders, and/or to remove therefrom any person affected by a communicable disease if necessary to promote the safety and welfare of the public.

16.08 The County Health Officer may issue orders for guarding against the introduction of any communicable disease into Jefferson County, for the control and suppression of communicable diseases, for the quarantine and disinfection of persons, localities and things infected or suspected of being infected by a communicable disease and for the sanitary care of schools, places of employment, public buildings, and other places.

16.09 Any rule or order may be made applicable to the whole or any specified part of Jefferson County or to any vessel or other conveyance. Orders that are issued under the authority herein supersede conflicting or less stringent regulations, orders or ordinances.

16.10 The County Health Officer may close schools and forbid public gatherings in schools, churches, places of employment, public buildings, private property, and other places to control outbreaks, epidemics and pandemics.

16.11 The County Health Officer may authorize and implement all emergency measures necessary to control communicable diseases and do what is reasonable and necessary for the prevention and suppression of disease including, but not limited to, prohibiting public and private gatherings when deemed necessary to control outbreaks, epidemics or pandemics.

16.12 Any Order issued by the Jefferson County Health Officer may be appealed to the Jefferson County Board of Health within 30 days of issuance which may rescind, amend, or continue such Order by majority vote of the members present.

16.13 Any person who willfully violates or obstructs the execution of an Order of the Health Officer under this Ordinance and relating to the public health, shall be imprisoned for not more than 30 days or be subject to a fine or forfeiture of not more than $500, or both, or injunctive relief. Each calendar day, or part thereof, during which a violation exists or continues to exist shall be considered a separate violation. The violator shall be liable for costs of prosecution under this Ordinance.

1. The Corporation Counsel shall be responsible for all cases where an injunction to correct and/or abate a violation or forfeiture is being sought.

2. The District Attorney shall be responsible for all cases where imprisonment or a fine is being sought.

16.14 Severability. Should any portion of this ordinance be declared unconstitutional or invalid by a court of competent jurisdiction, the remainder of this ordinance shall not be affected.

16.15 Effective Date. This ordinance shall take effect on the day following the date of publication as required by law.

Ayes:_____  Noes:_____  Abstain:_____  Absent:_____  Vacant:_____

Referred By:
County Board of Health and Executive Committee 06-09-20

REVIEWED: County Administrator_____ Corporation Counsel_____ Finance Director_____
## 2020 FORMULA ALLOCATION

**PROGRAM: Testing Coordination Allocation**

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<th>Amt for State Pop</th>
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### Menominee County (merged into Shawano-Menominee County)

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- 3/12. Shawano serves as fiscal agent.

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### 2020 CARES Testing Coordination Local Allocations

- Total Funding Allocation: $10,000,000
- Total Funding (less Base Amount) Allocation: $7,090,000

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**Note:** The data includes various allocations for different counties and municipalities, with some entries indicating merged or fiscal agent counties. The allocations range from $0 to $98,400 per entry.
### 2020 Formula Allocation

**Program:** Testing Coordination Allocation

**Total Funding Allocation:** $10,000,000

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Shawano County (merged into Shawano-Menominee 3/12. Shawano serves as fiscal agent).

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<td>$30,000</td>
<td>21,594</td>
<td>$26,300</td>
<td>$56,300</td>
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</tr>
<tr>
<td>Walworth County</td>
<td>$30,000</td>
<td>102,714</td>
<td>$125,100</td>
<td>$155,100</td>
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<tr>
<td>Washington County (merged with Ozaukee County 7/1/16)</td>
<td>$0</td>
<td>134,113</td>
<td>$163,300</td>
<td>$163,300</td>
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Winnebago County (Neenah & Oshkosh merged 7/12).

<table>
<thead>
<tr>
<th>County</th>
<th>Area</th>
<th>State Population</th>
<th>Contract Population</th>
<th>Base Amount</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Winnebago County</td>
<td>$30,000</td>
<td>152,864</td>
<td>$186,100</td>
<td>$216,100</td>
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</tr>
</tbody>
</table>

Menasha (merged with Winnebago 7/12. End base allocation with CY16 contract.)

<table>
<thead>
<tr>
<th>County</th>
<th>Area</th>
<th>State Population</th>
<th>Contract Population</th>
<th>Base Amount</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Menasha</td>
<td>$0</td>
<td>17,556</td>
<td>$21,400</td>
<td>$51,400</td>
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Oshkosh (merged with Winnebago 7/12. End base allocation with CY16 contract.)

<table>
<thead>
<tr>
<th>County</th>
<th>Area</th>
<th>State Population</th>
<th>Contract Population</th>
<th>Base Amount</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oshkosh</td>
<td>$0</td>
<td>0</td>
<td>$0</td>
<td>$0</td>
<td></td>
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</tbody>
</table>

Tribal Health Departments

<table>
<thead>
<tr>
<th>Tribe</th>
<th>Area</th>
<th>State Population</th>
<th>Contract Population</th>
<th>Base Amount</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad River Band of Lake Superior Chippewa Indians</td>
<td>$30,000</td>
<td>6,945</td>
<td>$8,500</td>
<td>$38,500</td>
<td></td>
</tr>
<tr>
<td>Lac Courte Oreilles Band of Lake Superior Chippewa Indians</td>
<td>$30,000</td>
<td>7,275</td>
<td>$8,900</td>
<td>$38,900</td>
<td></td>
</tr>
<tr>
<td>Lac du Flambeau Band of Lake Superior Chippewa Indians</td>
<td>$30,000</td>
<td>3,415</td>
<td>$4,200</td>
<td>$34,200</td>
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</tr>
<tr>
<td>Red Cliff Band of Lake Superior Chippewa Indians</td>
<td>$30,000</td>
<td>5,312</td>
<td>$6,500</td>
<td>$36,500</td>
<td></td>
</tr>
<tr>
<td>Sokaogon Chippewa Community</td>
<td>$30,000</td>
<td>1,377</td>
<td>$1,700</td>
<td>$31,700</td>
<td></td>
</tr>
<tr>
<td>St. Croix Chippewa Community</td>
<td>$30,000</td>
<td>1,054</td>
<td>$1,300</td>
<td>$31,300</td>
<td></td>
</tr>
<tr>
<td>Forest County Potawatomi Community</td>
<td>$30,000</td>
<td>1,400</td>
<td>$1,700</td>
<td>$31,700</td>
<td></td>
</tr>
<tr>
<td>Stockbridge-Munsee Band of Mohican Indians</td>
<td>$30,000</td>
<td>1,565</td>
<td>$1,900</td>
<td>$31,900</td>
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<tr>
<td>Menominee Indian Tribe of Wisconsin</td>
<td>$30,000</td>
<td>6,270</td>
<td>$10,600</td>
<td>$40,600</td>
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</tr>
<tr>
<td>Oneida Nation of Wisconsin</td>
<td>$30,000</td>
<td>16,567</td>
<td>$20,200</td>
<td>$50,200</td>
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<tr>
<td>Ho-Chunk Nation</td>
<td>$30,000</td>
<td>6,563</td>
<td>$8,000</td>
<td>$38,000</td>
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</tr>
</tbody>
</table>

**Total Tribal Health Department Allocation:** $2,910,000

**Total Funding (less Base Amount) Allocation:** $7,090,000

**Total Funding Allocation:** $10,000,000
All questions below pertain to interactions the case-patient had with potential contacts in a community, non-healthcare setting during their **Infectious Period**. This is the timeframe during which the case-patient is considered most infectious.

- **The infectious period for SYMPTOMATIC case-patients** starts two days before the case-patient first had any symptoms, including even mild symptoms (e.g. headache, sore throat, runny nose, fatigue) and ends the date the case-patient meets the criteria to end isolation (10 days since onset AND 3 days well).
- **The infectious period for ASYMPTOMATIC case-patients** starts 10 days prior to specimen collection date and ends 10 days after specimen collection date.

---

**CDC Close Contact Definition:**

Data are limited to define close contact and prolonged exposure. Factors to consider include proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g., coughing likely increases exposure risk) and whether the individual was wearing a mask (which can efficiently block respiratory secretions from contaminating others and the environment). Recommendations vary on the length of time of exposure but 15 min of close exposure can be used as an operational definition. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.

*The use of a mask or cloth face covering by an infectious individual in a community, non-healthcare setting most likely reduces the risk of transmission of COVID-19, but it is unknown to what degree. In a community setting, risk assessment and quarantine guidance for a contact is not affected by the case-patient wearing a mask or cloth face covering. Only the use of all recommended PPE in a healthcare setting is sufficient to eliminate the need for quarantine of a close contact of an infectious individual.*
<table>
<thead>
<tr>
<th>Agency #</th>
<th>County</th>
<th>Region</th>
<th>Agency</th>
<th>Population</th>
<th>% of State</th>
<th>Test/Week</th>
<th>Disease Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>28</td>
<td>JEFFERSON</td>
<td>S</td>
<td>Jefferson County</td>
<td>68,718</td>
<td>0.011802</td>
<td>1,003</td>
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<tr>
<td>Disease Interviews</td>
<td>Contact Interv</td>
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<td></td>
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<td></td>
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<td></td>
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</tr>
<tr>
<td>Estimated DI Hours</td>
<td>Estimated Contacts</td>
<td>Estimated Hours to Contact</td>
<td>Estimated FTE</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Estimated DI FTE</td>
<td>Weekly Cost</td>
<td>32 Weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>120</td>
<td>3</td>
<td>$3,370.54</td>
<td>$107,857.45</td>
<td>401</td>
<td>201</td>
<td>5</td>
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<tr>
<td>Views</td>
<td>Monitoring Interviews</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>----------------------------</td>
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</tr>
<tr>
<td><strong>Weekly Cost</strong></td>
<td><strong>Estimated Calls Per week</strong></td>
<td><strong>Estimated Hours to Contact</strong></td>
<td><strong>Estimated FTE</strong></td>
<td><strong>Weekly Cost</strong></td>
<td><strong>32 Weeks</strong></td>
<td><strong>Total FTE</strong></td>
<td></td>
</tr>
<tr>
<td>$5,617.58</td>
<td>337</td>
<td>337</td>
<td>8.4</td>
<td>$9,437.53</td>
<td>$302,000.86</td>
<td>16.45</td>
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</tr>
<tr>
<td>Total</td>
<td></td>
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</tr>
<tr>
<td>Weekly Cost</td>
<td>6 Month Cost</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>$ 18,425.65</td>
<td>$ 589,620.73</td>
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</tr>
</tbody>
</table>
Jefferson County EOC

Brief Update

06-01-2020
Situation Update

Percent of people tested for COVID-19 who had positive results, by day (last 14 days)

- **State (DHS)**
  - 250,103 Negative
  - 18,403 Positives
  - 592 Deaths
  - 2,583 Hospitalizations (14%)

- **Jefferson**
  - 92 cases (excludes Watertown)

- **Watertown**
  - 39 cases

- **Other Public Health Comments**
Jefferson County Data From WEDSS**

Data by Category

**Jefferson County**
- Total Case Investigations – 3,022
- Confirmed – 92
- Probable - 33
- Suspect – 125
- Not a Case – 2,772
- Open Contact Investigations – 32
- Outbreak Investigations – 8 (state list 4)
- Hospitalizations – 17%
- Recover Resolved – 51
- Deaths – 3

**Watertown**
- Total Case Investigations – 1,047
- Confirmed - 39
- Probable – 5
- Suspect – 23
- Not a Case – 932
- Open Contact Investigations - 42
- Hospitalizations – 9%
- Recover Resolved – 27

Data Defined

**Confirmed:** Any case that has a confirmatory laboratory result of the virus causing COVID-19 infection (SARS-CoV-2) irrespective of clinical signs or symptoms

**Probable:**
- An illness with clinically compatible symptoms of COVID-19 infection where laboratory testing for the virus causing COVID-19 infection (SARS-CoV-2) is inconclusive according to the test results reported by the laboratory.
  - OR
  - An illness with clinically compatible symptoms of COVID-19 infection, with no other known etiology for the clinical illness, for whom COVID-19 laboratory testing has not been done, AND who is epi-linked to a confirmed case. Epi-linked is defined as close contact with a confirmed COVID-19 case or a member of a cluster of illnesses where at least one confirmed case has been diagnosed, in the 14 days before onset of symptoms.

**Suspect:**
- An illness with clinically compatible symptoms of COVID-19 infection, for whom laboratory confirmation is pending, and who has no known epi-link to a confirmed COVID-19 case.
- Any case of COVID-19 infection reported to public health that does not meet a confirmed or probable case definition, and does not have a negative laboratory result for COVID-19.
- An illness with clinically compatible symptoms of COVID-19 infection for whom COVID-19 laboratory testing has not been done, AND who is epi-linked to a probable case.

**Not a Case:** Any illness reported that has a negative laboratory result for COVID-19.

**Recover Resolved:** A person has been released from self-isolation and is no longer exhibiting symptoms. (The requirements on this per the state DHS and CDC is a patient has been at least 7 days since they became symptomatic and that there has been 3 days with no symptoms)
Testing Data/ Testing Task Force Update

**State**
- 29 May
  - Total – 13,602
    - Positive – 733
    - Negative – 12,869
  - Lab Capacity – 14,753
- 30 May
  - Total – 9,843
    - Positive – 523
    - Negative – 9,320
  - Lab Capacity – 14,753
- 31 May
  - Total – 7,368
    - Positive – 173
    - Negative – 7,195
  - Lab Capacity – 14,753

**Jefferson**
- 29 May
  - Total – 166
    - Positive – 5
    - Negative – 161
- 30 May
  - Total – 219
    - Positive – 3
    - Negative – 216
- 31 May
  - Total – 48
    - Positive – 2
    - Negative – 46

- Revised Testing Goals
  - Jefferson County – 1003 weekly/144 per day
  - Watertown – 348 weekly/ 50 per day

* Note state report 56 labs performing; 31 labs being on boarded for future testing

* based on 2:00 p.m. update
* includes Watertown
Healthcare/Medical Facility Updates

• Fort Healthcare
• Watertown Regional
• Aurora
• Oconomowoc
EMS Medical Directors

• Dr. Robinson
• Dr. George
• Dr. Rodriguez
• Dr. Cady
• Dr. McNeal
County Staff

• Emergency Management
• Medical Examiner
• Highway/Public Works
• Human Services
EMS/Fire Updates

• EMS
  • Chief Biefeld

• Fire
  • Chief Wegner
Law Enforcement

• Sheriff
  • Sheriff/ Chief Deputy
  • County Dispatch
• Municipal Law Enforcement Representative
  • Chief Pileggi
• DNR
Action Items

• Next meeting –
• Other items for discussion
• Needed Agenda/Action Items
  • EOC Survey
    • Meeting times
    • Focus items
<table>
<thead>
<tr>
<th></th>
<th>YTD Actual</th>
<th>Prorated Budget</th>
<th>Annual Budget</th>
<th>YTD Budget Variance</th>
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</thead>
<tbody>
<tr>
<td><strong>REVENUE:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total WIC</td>
<td>$ 144,142.01</td>
<td>$ 127,526.85</td>
<td>$ 386,445.00</td>
<td>$ 16,615.16</td>
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<tr>
<td>Public Health Fee for Service</td>
<td>$ 28,723.04</td>
<td>$ 57,689.28</td>
<td>$ 174,816.00</td>
<td>($26,966.24)</td>
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<tr>
<td>Public Health Grant Income</td>
<td>$ 113,703.60</td>
<td>$ 74,493.54</td>
<td>$ 225,738.00</td>
<td>$ 39,210.06</td>
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<tr>
<td><strong>Total Public Health</strong></td>
<td>$ 142,426.64</td>
<td>$ 132,182.82</td>
<td>$ 400,554.00</td>
<td>$ 10,243.82</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td>$ 286,568.65</td>
<td>$ 259,709.67</td>
<td>$ 786,999.00</td>
<td>$ 26,656.98</td>
</tr>
</tbody>
</table>

| **EXPENSE:**         |            |                 |               |                     |
| WIC 4201 - 420109   | $ 134,449.18 | $ 116,648.07    | $ 353,479.00  | $ 17,801.11         |
| WIC Fit Family 4202 | $ 3,329.93   | $ 5,878.95      | $ 17,815.00   | ($2,549.02)         |
| WIC Peer Counselor 4203-420309 | $ 4,587.21 | $ 4,021.38    | $ 12,186.00   | $ 565.83             |
| **Total WIC**        | $ 142,366.32 | $ 126,548.40    | $ 383,480.00  | $ 15,817.92         |
| Public Health = Tax Levy Supported Expenses | $ 256,168.79 | -              | $ 256,168.79  |                     |
| Public Health Grants | $ 124,405.89 | $ 52,771.62    | $ 159,914.00  | $ 71,634.27         |
| Public Health Fee-for-Service | $ 18,064.43 | $ 32,032.44    | $ 97,068.00   | ($13,968.01)        |
| **Total Public Health** | $ 398,639.11 | $ 84,804.06    | $ 256,982.00  | $ 313,835.05        |
| **Total Expense**    | $ 541,005.43 | $ 211,352.46    | $ 640,462.00  | $ 329,652.97        |

**2020 SUMMARY**

|                      |            |                 |               |                     |
| Total 2020 Income YTD: | $ 286,568.65 | $ 259,709.67    | $ 786,999.00  | $ 26,858.98         |
| 2020 County Tax Levy Applied - ORG 4115: | $ 285,842.00 | $ 285,842.00 | $ 657,526.00 | -                   |
| **Total 2020 Revenue:** | $ 572,410.65 | $ 545,551.67 | $ 1,644,525.00 | $ 26,858.94 |

|                      |            |                 |               |                     |
| **Total 2020 Expense:** | $ 541,005.43 | $ 211,352.46 | $ 640,462.00 | $ 329,652.97 |
| **2020 Annual Activity (Revenue vs. Expenses):** | $ 31,405.22 | $ 1,004,063.00 | $ 28,124.91 | $ 85,227.00 |

|                      |            |                 |               |                     |
| **2020 Budgeted Reserve Funds Applied to Deficit:** | $ 28,124.91 | $ 85,227.00 | $ 28,124.91 | |

2020 "estimated" balance* as of 04/30/2020 $ 31,405.22