



Tom Barrett
Mayor

Bevan K. Baker, CHÉ
Commissioner of Health

Health Department Administration



Frank P. Zeidler Municipal Building, 841 North Broadway, 3rd Floor, Milwaukee, WI 53202-3653 phone (414) 286-3521 fax (414) 286-5990
web site: www.milwaukee.gov

November 1, 2004

Members of Finance and Personnel Committee
Common Council-City Clerk
City Hall, Room 205

Dear Aldermen:

Per the Budget Hearing on October 15th for the Milwaukee Health Department (MHD), the following provides a rank listing of personnel that were proposed for elimination. The last page contains a chart with each position ranked in order and its associated eliminated cost of each position.

1. Two PHN NWHC

Rationale: Generalist PHNs can have a direct impact on reducing infant mortality. In addition, generalists can be used to respond to many events in the community related to public health such as response to an outbreak or need for a mass vaccination clinic.

2. PHN-STD

Rationale: STD/HIV program remains a MHD public health priority as reflected in the 2005 budget and strategic action plan. This position directly impacts target outcomes reducing STD/HIV incidence rates within the community through clinic screening, testing, treatment and counseling of walk-in clients at the Keenan Central Health Clinic. This clinic currently experiences over 8000 client visits each year and remains a focal point of intervention in the community for underserved populations in need of medical counseling and therapy. (Note: Direct patient contact value of approximately 1500 additional clients per year).

3. PHN- School

Rationale: Adolescent School Health is a top priority of both the Commissioner and Mayor. Most of our 2004/2005 outcomes for this program also are directly related to Infant Mortality (Health Access, Pregnancy prevention, pre-natal care, high risk sexual behavior, counseling, education etc.)

4. Food Inspector 1

Rationale: This position is responsible for conducting food establishment inspections in the area of food safety; fire safety; security related issues; enforcement; assisting with foodborne illness outbreak investigations; and responding to aldermanic and citizen complaints. A routine annual inspection is required for each food establishment to comply with agents contracts with the state.

5. Environmental & Disease Cont. Specialist

Rationale: This position is part of a six unit on-call “team” within DCP that responds 24/7 to all designated public health emergencies including Level A Milwaukee Fire Department HazMat Team on a regional basis (eight county area). This position represents the “core” field response to WMD incidents within the MHD including but not limited to suspected biological, chemical and radiological terrorism events (powder in letters, unknown packages, etc.) along with other community first responders from law enforcement agencies and emergency management. This position also is assigned a wide range of responsibilities associated with emerging infectious and environmental related diseases (project management and field response) such as SARS, WNV, monkeypox, rabies control, extreme weather events and communicable disease outbreaks (foodborne, vector borne and waterborne).

6. Health Access Assistant (MA)

Rationale: Health care access, health insurance and other health benefits are key components to reducing infant mortality. Late or no access to prenatal care is a major risk factor for infant mortality that can be improved with access to care and insurance to pay for the care. Health care access is the MHD, main outcome, as reflected in our mission statement. It also is a key to reducing infant mortality. The Health Access Assistant is a critical team member in reaching the youth who are pregnant, or soon will be to pre-natal care or primary care, and getting them enrolled in the system.

7. Accounting Assistant I

Rationale: The MHD has relied more on grant funding and increased its proportion of funding allocations to 65 percent. The volume and complexity of the support functions associated with payroll administration, implementation of personnel policies, billing, grant expenditures, grant reporting, purchasing compliance, contract compliance, and budget monitoring have impacted Administration’s ability to meet existing service levels. With this additional position the Administrative Outcomes in both Business Operations and Human Resources can be more proactive rather than reactive. This position is needed in order to provide the minimum level of support services required to support an increasingly grant funded organization.

8. Lab Operations Manger

Rationale: Under the direction of the Laboratory Director, this lab manager is responsible for independently managing all laboratory administrative and business functions (working with billing agent, vendors, waterborne pathogens testing contracts, maintenance contracts, infrastructure maintenance, laboratory support functions) including but not limited to coordination and implementation of laboratory services and policies; quality control and quality assurance (e.g. CLIA compliance); compliance with state and federal standards (regs: food, water, clinical, bioterrorism preparedness, e.g. Select Agent Program, other environmental) and assist with relevant inspection preparations; safety and security; customer service liaison; assist in preparing and monitoring budgets and grants, over-site of website. The efficiencies realized by having this individual would ensure rapid response to urgent laboratory demands. This position would impact 6 lab outcomes. (STD, CD, Food, Water Pathogens, Water Quality, Environmental)

9. Office Assistant II (NWHC)

Rationale: This position works as part of a team to provide support to the overall operations of the health center staff and managers, including processing of work, answering phones, acting as receptionist, doing data entry into SPHERE.

10. Virologist II

Rationale: The virologist will support development of emerging and re-emerging pathogens with molecular testing including norovirus, influenza surveillance, West Nile Virus. Support STD testing for gonorrhea and chlamydia. This person will help meet the lab's outcome in Emergency Preparedness, Sexually Transmitted Diseases, Communicable Diseases.

11. Public Health Nurse-Staff Development

Rationale: This position provides support to health center managers who are orienting new PHNs, and plan in services for nursing staff. This position assists with the orientation of three nursing student clinical rotations every semester. This position also acts as chairperson to the nursing continuous quality improvement committee which develops and assures standards of nursing practice, nursing documentation systems and nursing policies and procedures.

12. Environmental Health Supervisor (Food Inspector)

Rationale: This position manages a work station with staff responsible for food inspections, certification of weighing and measuring devices, tattoo & piercing establishments, fire safety, convenience store security, and sales ordinance regulation. The position provides oversight in staff training; assistance with conflict resolution; enforcement issues; license suspensions; represents the division before the U & L Committee on matters related to health regulated businesses; and DNS and the City Attorney on citations.

13. Public Health Nurse (Immunization)

Rationale: This position will be funded through the Immunizations in Action Program (IAP) as part of State of Wisconsin Division of Public Health Consolidated Contract in 2005. The position will be critical to the MHD in enhancing community and healthcare provider awareness around childhood and adult immunizations. The position has a direct impact on target outcomes of increasing age appropriate immunization rates in both children and adults through strategies including but not limited to public outreach, marketing and media campaign coordination and coordination of mass immunization clinics or other appropriate immunization direct service venues.

14. Office Asst. III (Graphics)

Rationale: This position assists the Health Communications Officer with administrative duties and with copy preparation for publications and media releases pertinent to the entire Health Department; interact with professional staff in forms development; assist in production of nursing forms and handles the nursing forms process; assist with print orders and payments; work under general direction of the Graphics Designer, with direct supervision provided by the Health Communications Officer.

15. Lead (Program) Risk Assessor

Rationale: Each Lead Risk Assessor can produce an additional 250 lead safe housing units annually toward the MHD's goal of eradicating childhood lead poisoning by 2010. Each lead inspector assumes multiple functions: (1) Lead investigations and assurance of lead hazard control in response to a child with an elevated blood lead level; (2) risk assessment and facilitation of lead hazard control in high risk housing BEFORE a child is poisoned (i.e; primary prevention) and (3) monitoring of federally funded housing rehabilitation jobs to assure lead safety per federal regulations. The Division of HEH also is broadening its focus in healthy homes to include hazards that result in unintentional injury and those environmental triggers that exacerbate childhood asthma. Retention of this position will continue to leverage non-tax levy funding for safer housing, healthier families and stronger communities.

16. Chemist II (Potential Layoff)

Rationale: This position provides additional capacity for environmental, blood and food (new) lead-testing; support for the allergen testing and asbestos testing program. (potentially chemical terrorism issues if needed). This position supports the Lab outcome in Environmental Testing.

17. Public Health Educator II (Healthy Behaviors)

Rationale: This is a position that is used to teach student ambassadors to be health outreach workers. It also is used to create community awareness for various health initiatives. It is currently defunded from Making Connections Milwaukee.

Additional Staffing Needs

1. Asthma Project Coordinator

Rationale: To assure care coordination (medical management, in-home education and case management, social work interventions and follow-up services) to children with persistent asthma. Referrals from Hospital Emergency Departments and In-Patient Departments, along with primary care clinics in high risk areas will be received by the MHD Asthma Care Coordinator. Based on the insurance coverage, families will be referred to private sector (Medicaid reimbursed) home health agencies, the MHD or the MCOW for in-home services. MHD and MCOW provide services to un- or underinsured families.

Both private and public sector case management services are standardized and evaluated to increase family quality of life, decrease asthma symptom days, decrease lost work and school time and ultimately to decrease asthma ED and Hospitalization visits per HP 2010 goals. Asthma, like other programs in HEH Division, is almost totally grant funded. A small amount of O&M funding is needed to leverage more grant funding.

Asthma has been identified as a serious health issue contributing to health disparities in Milwaukee. During 1999-2000, Wisconsin African Americans had an asthma hospitalization rate over 6 times higher than whites and 4.5 times higher than the rate of asthma in the overall Wisconsin population. African American children are even more disproportionately affected. Asthma contributes significantly to school absenteeism in Milwaukee. In a 2002 survey, conducted by Fight Asthma Milwaukee in WIC clinics, 29 percent of respondents reported that their child had missed childcare or school in the past 2 months due to asthma, and 64 percent had visited an ER due to asthma in the past 12 months. This is the ONLY asthma position at the MHD.

2. FIMR Project Coordinator

Rationale: This position is critical to the reduction of infant mortality. Through medical abstractions, FIMR provides the important information on the causes of infant mortality for all Milwaukee zip codes for each year. Through an analysis of this data, recommendations are made to the community on how to prevent future deaths in infants. This position also is instrumental in educating the professional and lay community on strategies to prevent infant mortality.

Data from the review process has been extremely effective in mobilizing the community to address infant mortality. The growing list of key decision makers that participate in the death review is impressive and has been an excellent vehicle for institutional change, especially in clinical care arena. This position has worked with community partners to organize a high-level hospital system group that is making important inroads into causes of infant death. The hospital level data that is confidentially provided to hospital Vice President's has moved them to action. In addition to the data component of this grant; this position has conducted much community outreach, and has worked effectively with CBO's. Virtually all of the Infant Mortality ad campaign activities and fundraising have been organized by this position.

This includes everything from photo shoots, message development, and soliciting community input. Loss of this position involves much more than infant death data. Although it can't be a deciding factor, this individual gives more than 100% to infant mortality reduction efforts, and this includes a lot of personal time.

3. Bilingual translator/health care worker (Public Health Services Assistant)

Rationale: The increased multi-ethnic population in the City has resulted in linguistic challenges when serving these populations. The lack of translators has compromised our ability to serve this population in an efficient manner. The Bilingual translator will assist MHD to improve health access and health status, the use of a bilingual interpreter is essential. It also is required by law.

4. Management Accountant Senior

Rationale:

As the Health department has relied more on grant funding and increased its proportion of funding allocations to 65 percent. The volume and complexity of the support functions associated with grant expenditures, grant reporting, purchasing compliance, contract compliance, and budget monitoring have strained the Administration's ability to meet existing service levels. The absence of this position has resulted in a lower level of support services by Administration in meeting key outcomes of MHD which affect responding to supply orders, timely contract processing, payroll processing, timely grant reporting, and other grant compliance issues. Creating this senior position in Administration would free up Program Managers to concentrate on program issues and allow the Management Accountant Senior to provide consistent and compliant support services in the areas of budget reporting and compliance.

5. North & Southside community organizer(s) & supervisor

Rationale: To assure neighborhood-based solutions and strategies to communities most heavily impacted by infant mortality. Community organizers identify residents with a self-interest in being a part of the solution. Residents form grassroots coalitions that strategize to solve the infant mortality problem. Resident/community leadership development, community education and outreach all combine to impact behavior and systems change. Community organizing assures the community voice is heard, and involved in short and long-term solutions. Having this position is essential for solutions that are community driven.

6. Health Project Assistant

Rationale: This position would be used to manage contracts with two community based organizations located in neighborhoods where the highest infant mortality rates occur. The purpose would be to build capacity within the community to deal with infant mortality. This position would build on the successful use of this model in home environmental health. (this would be the supervisor to the above position.)

7. Medical Assistance Health Access

Rationale: The MA outreach contacts 3,000 individuals a year with 1500 eligible for Title 19. We are currently under serving this population that has no health care. This position would assist in reaching 400 more families in the community that are currently not being served. Access to health care is dependent upon coverage.

8. Community Outreach Worker or Public Health Services Assistant

Need approximately 20 workers

Rationale: Community outreach staff living in the neighborhoods with the highest infant mortality rate would be hired, trained and managed by PHNs. The outreach workers are to increase awareness of the racial disparities in infant mortality in their community. Models of this nature have been successful in other cities that have reduced infant mortality rates. The outreach workers would focus on community capacity building around reducing infant mortality. This model also would provide economic development in these poverty stricken neighborhoods through the hiring and training of staff. This effort should be considered for Community Block Grant funding.

9. A Nurse in every Milwaukee Public School: This initiative would cost MHD an estimated 10.5 Million dollars. This number is the result of looking at the cost of \$54,400, for an FTE Nurse with fringe benefits and 192 schools needing nurses. A nurse in every school is directly linked to many of the MHD outcomes, including infant mortality, pregnancy prevention, high risk sexual behavior and depression screening.

Thank you for giving me the opportunity to provide this list to you in the event that funding could be restored for these purpose in 2005.

Respectfully submitted,



Bevan K. Baker, CHE
Commissioner of Health

c: DOA-Budget Office
City Clerk-LRB-Fiscal Section

Budget Priority List

Job Titles	Salaries
PHN NWHC (2)	110,000
PHN-STD	60,037
PHN-School	54,400
Food Inspector	45,861
Environmental & Disease Cont. Specialist	60,478
Health Access Assistant (MA)	40,800
Accounting Assistant I	32,615
Lab Operations Manager	77,892
Office Assistant II (NWHC)	42,650
Virologist II	65,303
Public Health Nurse-Staff Development	55,000
Environmental Health Supervisor (Food Inspector)	87,720
Public Health Nurse (Immunization)	60,037
Office Assistant II (Graphics)	29,768
Lead (Program) Risk Assessor	39,013
Chemist II (Potential Layoff)	65,303
Public Health Educator II (Healthy Behaviors)	56,032
Subtotal	\$ 982,909

Wish List Items

Asthma Project Coordinator	41,850
FIMR Project Coordinator	42,600
Bilingual translator/health care worker (Public Health Services Assistant)	40,305
Management Account Senior	55,562
North & South side community organizer(s) & supervisors	
2-Contracts to CBO (50K each)	100,000
1-Health Project Coordinator	55,562
Health Project Assistant	47,240
Medical Assistance Health Access	38,553
Community Outreach Worker or Public Health Services Assistant	40,305
Nurse in every school-(192 @ 54,400)	10,500,000
Subtotal	10,961,977
Grand Total	\$ 11,944,886