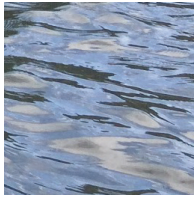
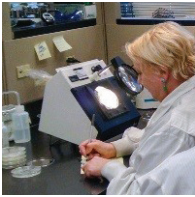




2016

City of Milwaukee Health Department

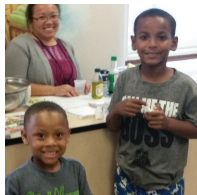
Annual Report to the Mayor & Common Council



Think Health
CITY OF MILWAUKEE
HEALTH DEPARTMENT



Act Now!



This report was prepared by the City of Milwaukee Health Department in accordance with Ch. 59 of the City of Milwaukee Code of Ordinances.

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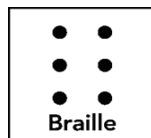
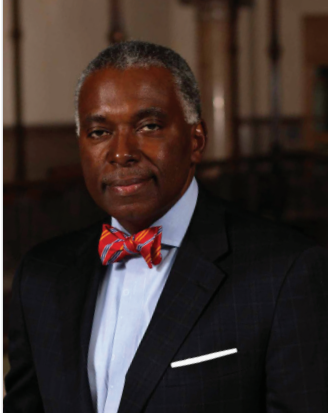


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From the Commissioner of Health



Dear Friends,

On behalf of the City of Milwaukee Health Department (MHD), I am pleased to present the City of Milwaukee Health Department 2016 Annual Report.

This comprehensive accounting of Department activities serves as a report to the Mayor and the Public Safety and Health Committee of the Milwaukee Common Council, highlighting the work of the programs and initiatives under the administration of the MHD.

It is the mission of the MHD to improve and protect the health of those who live, work, and play in our city. The breadth of this work is wide, encompassing direct services, evidence-based programs, partnerships, and policy development.

The quantitative and qualitative data provided in this report serve as an indication of the impact of MHD services and programs, as well as the population health outcomes they seek to influence. However, the data and measures compiled here only tell part of the story. Behind these numbers are real individuals – the stories of Milwaukee residents whose health and well-being have been supported through the work of 241 dedicated employees.

While this report highlights the programs and services within the MHD, public health is a shared responsibility. Improving and sustaining the health of our community will not happen overnight, nor will it happen through the work of a single institution alone. It is true everywhere and is no less true in Milwaukee: To effectively address public health issues, we must work together.

The public health system in which the MHD operates is vast. It includes all entities that contribute to the health and well-being of our residents – health care, human services, public safety, education, youth development, recreation, arts, economic development, philanthropy, and more. The work of partners is just as essential and critical to the health of Milwaukee's population as is the strength of its local health department.

In continuing the work to impact Milwaukee's most pressing health issues while safeguarding the health and wellbeing of residents from illness, disease, and emerging public health threats, the MHD remains committed to leadership, partnership, and innovation. It is at the intersection of these areas where we can collectively create the greatest impact and continue to build a healthier Milwaukee.

In good health,

A handwritten signature in black ink, appearing to read "Bevan K. Baker". The signature is fluid and cursive, written over a white background.

Bevan K. Baker, FACHE
Commissioner of Health

Executive Summary

Since 1867, the City of Milwaukee Health Department (MHD) has served the residents of the city of Milwaukee, seeking to improve and protect the health of all who live, work, and play within the city. Nearly 150 years later, the MHD remains steadfast in this mission. As the largest local health department in the state of Wisconsin, it now serves nearly 600,000 citizens through direct services, evidence-based programs, partnerships, and policy development.

The MHD's work centers around the foundational activities of public health – those actions that local health departments are required to perform, such as communicable disease control, environmental public health inspections, and community health assessment and planning.

Alongside these efforts, the MHD works to identify and address health outcomes that disproportionately burden Milwaukee residents. These select issues are those known to have a large-scale impact on health, where there is substantial data to support needed work, where there may be inadequate community resources to address the issue, and where there are known to be effective governmental public health strategies to mitigate the issue. Locally, the issues that rise to significance include healthy birth outcomes, teen pregnancy prevention, childhood lead poisoning prevention, and violence prevention.

Across these foundational activities and strategic issues, the primary goal of MHD activities are to:

1. Control and prevent disease
2. Promote health and wellbeing across the lifespan
3. Assure of safe and healthy living environments
4. Support public health planning and policy development

The 2016 Annual Report serves to provide comprehensive metrics for both the population health outcomes that the MHD strives to impact through its work, as well as a report on the operations and measures of the programs and services under the direction of the MHD.

Although any measurable change in Milwaukee's population health outcomes requires an analysis of what the many partners across the community are doing to impact and improve health, the performance of the MHD remains an essential backbone to the health of all Milwaukee residents.

2016 EXPENDITURES

\$24.5 million

43%

Grant Expenditures

55%

City Operations &
Maintenance Expenditures

2016 WORKFORCE

241

Full-Time Employees

42%

Employed Through
Grant Funding

57.5%

Employed Through
City Funding

Executive Summary

In carrying out its work to improve and protect the health of Milwaukee residents, the City of Milwaukee Health Department's direct services, evidence-based programs, partnerships, and policy development activities are guided by four primary goals.

GOAL: Control & Prevent Disease

Communicable diseases such as foodborne and waterborne illness, vaccine-preventable diseases, sexually transmitted infections, and more can result in illness, increased health care costs, workplace and school absenteeism, and death. The MHD works to prevent as well as promptly identify and prevent the spread of disease to others. Key 2016 department outcomes include:

7, 143

Inspections of food establishments, mobile vendors, and temporary events

90.8%

Compliance rate with Wisconsin immunization law, a record high

14,679

Communicable disease specimens processed by the MHD Laboratory

91.7%

Individuals seeking STD services who are provided same-day services at the STD/HIV Clinic

GOAL: Promote Health and Wellbeing Across the Lifespan

Good health and wellbeing are impacted throughout the entire lifespan, from before a child is born through adulthood. To support healthy families, the MHD operates services and programs to assist in accessing health care and social services, support healthy birth outcomes and child development, and support wellbeing of all ages. Key 2016 department outcomes include:

5,915

Face-to-face home visits to Milwaukee families to support healthy birth outcomes, child development, and family economic self-sufficiency

85,375

Visits to the MHD Women, Infant, and Children (WIC) Nutrition Program through a monthly case-load of 7,483 participants

809

Families received safe sleep education and a safe sleep environment for their infant

3,793

Individuals received assistance completing full applications for health care coverage through BadgerCare Plus

GOAL: Assure Safe and Healthy Living Environments

Health is shaped and influenced by the environments in which we live. Physical hazards that exist in our environments, such as old housing with lead hazards, or issues such as neighborhood or household violence all impact health outcomes. Key 2016 department outcomes include:

335

Housing units made lead-paint safe through the Childhood Lead Poisoning Prevention Program

60

Agencies and organizations engaged in the City Commission on Domestic Violence and Sexual Assault

223

Referrals received to the City-County Trauma Response Initiative

12

Ambassadors trained to interrupt violence in two Milwaukee neighborhoods

GOAL: Conduct Public Health Planning and Policy Development

Through community health assessment, planning, and policy development, the MHD seeks to improve and enhance both the Department and community's ability to advance a culture of health. Key 2016 department outcomes include:

2

Citywide planning processes launched: The MKE Elevate Community Health Improvement Plan and Violence Prevention Plan

3,000

Milwaukee residents who responded to a citywide survey to select priority issues for the MKE Elevate Community Health Improvement Plan

1,000

Individuals and organizations who have participated in the Violence Prevention planning process and activities

3

Internal MHD Committees developed to guide workforce development, quality improvement, and performance management

About the City of Milwaukee Health Department

The City of Milwaukee Health Department (MHD) is the largest local health department in the state of Wisconsin, serving a population of nearly 600,000 residents while working to protect the health of all who live, work, and play in the city.

MISSION

The mission of the City of Milwaukee Health Department is to improve and protect the health of individuals, families, and the community.

VISION

The vision of the City of Milwaukee Health Department is that the city of Milwaukee becomes the healthiest city in the nation through bold leadership, effective partnerships, and innovation in thinking and practice.

VALUES

Excellence: Our activities will be primarily evidence-based and will be delivered with the highest quality.








Equity: Our activities will address root causes of poor health outcomes and health disparities.

Integrity: We will be honest, respectful, and ethical in all of our activities and interactions.

Impact: We will measure our success by achieving significant, sustainable improvements in health outcomes for all.

STRUCTURE

The City of Milwaukee Health Department carries out its mission through the provision of direct services, evidence-based programs, partnership development, and policy development implemented through seven divisions and offices, under the direction of the Commissioner of Health. The divisions and offices of the City of Milwaukee Health Department are:

-  Division of Consumer Environmental Health
-  Division of Disease Control & Environmental Health
-  Division of Family & Community Health
-  Office of Violence Prevention
-  Public Health Laboratory
-  Office of Public Health Planning & Policy
-  Administration

Additionally, medical consultation, guidance, and support is provided to the MHD through a partnership with the University of Wisconsin School of Medicine and Public Health.

Expenses & Workforce

EXPENSES

The operations of the City of Milwaukee Health Department (MHD) are funded through City Operations and Maintenance (O&M), grants, capital, and to a lesser extent, reimbursable funds. Between 2012 and 2016 the MHD's overall operational budget decreased by 5.6%. This was the result of an 18.7% increase in tax levy funding and a 23.6% decrease in grant funding over the five-year period.

	2012	2013	2014	2015	2016
Total Expenses	\$25,958,075	\$24,139,867	\$22,583,072	\$23,053,081	\$24,508,713
O&M	\$11,599,166	\$12,531,707	\$12,269,405	\$12,606,226	\$13,524,425
Grant	\$13,778,832	\$11,046,889	\$10,160,753	\$9,778,593	\$10,531,949
Reimbursable	\$21,895	\$37,562	\$44,937	\$45,950	\$65,631
Capital	\$153,826	\$523,709	\$107,977	\$622,312	\$386,708

Division	Amount	Percentage
Administration	\$2,595,346	1%
Consumer Environmental Health	\$2,218,384	9%
Disease Control & Environmental Health	\$6,372,078	26%
Family & Community Health	\$9,868,553	40%
Office of Violence Prevention	\$985,947	4%
Public Health Laboratory	\$2,141,952	9%
Public Health Planning & Policy	\$326,453	11%
Total	\$24,508,713	

WORKFORCE

Between 2012 and 2016 MHD saw a reduction in 16.5 FTE, a 6.8% reduction over the five-year period. Over the last 20 years, the MHD saw a reduction of 161.2 FTE, a 60% reduction over the time period.

	2012	2013	2014	2015	2016
Total Positions:	258.31	242.67	240.75	240.24	241.83
O&M FTE:	144.21	141.94	139.30	139.79	139.18
Non-O&M FTE:	114.10	100.73	101.45	100.45	102.65

Division	FTE	Percentage
Administration	20.55 FTE	2%
Consumer Environmental Health	24.70 FTE	10%
Disease Control & Environmental Health	65.68 FTE	27%
Family & Community Health	102.79 FTE	42%
Office of Violence Prevention	6.00 FTE	2%
Public Health Laboratory	20.11 FTE	8%
Public Health Planning & Policy	2.00 FTE	1%
Total	241.83	



Population Outcome Measures

To understand and report Milwaukee's health needs, the City of Milwaukee Health Department (MHD) gathers, analyzes, and summarizes data on the health status and conditions that impact the health and well-being of city residents. Through direct services, evidence-based programs, partnerships and policy development, the MHD looks at select population outcome measures to better understand need and its impact on these issues.

What is Population Health?

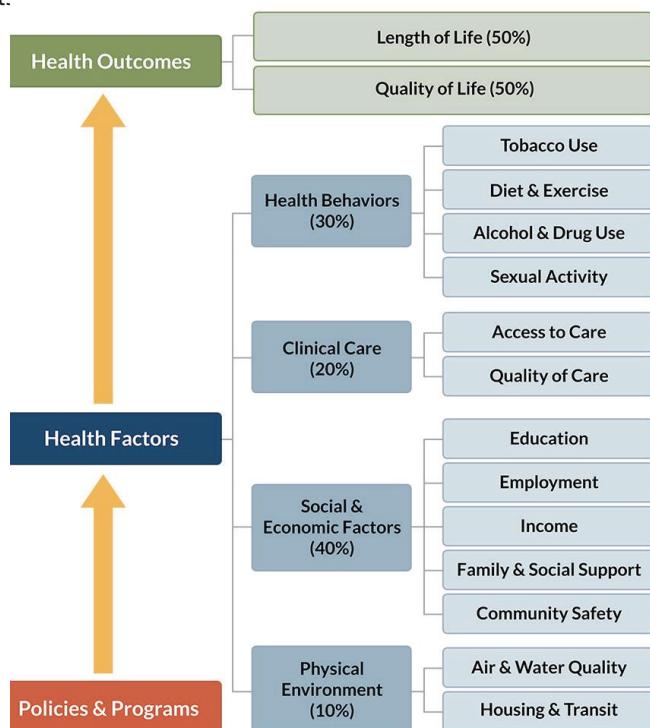
Public health is defined by the Institute of Medicine as "what we do collectively, as a society, to assure the conditions in which people can be healthy." Population health is defined as "the health outcomes of a group of individuals, including the distribution of such outcomes within the group" (Kindig and Stoddart, 2003). While groups can be described as specific populations characterized by race or gender, for example, this term can also refer to populations bound by geographic location, such as cities, aldermanic districts, and neighborhoods.

These concepts allow us to use longitudinal data to systematically assess outcomes across different populations and understand how different exposures, risk factors, and determinants of health potentially interact to impact health outcomes. Even further, embedded in population health is a consideration of resource availability and its impact on health outcomes. The County Health Rankings model, for example, is based off a population health approach that demonstrates that many factors impact the health of communities.

The breadth of the City of Milwaukee Health Department's (MHD) work is wide. The types of programs offered range from home visitation and care coordination to laboratory testing to policy development and many others. The quantitative and qualitative data provided in this report provide an indication of how the actions of the MHD have impacted population health outcomes. However, it is critical to note that there are many initiatives, agencies, and organizations in the city of Milwaukee working toward many of the same population health outcomes. Any measurable change in population health outcomes also requires an understanding of what the many actors in the city are doing as well. The City of Milwaukee Health Department is one champion in the city working toward improving population health for all residents by addressing many of these physical and social determinants of health.

ABOUT THIS SECTION

Using primary and secondary data published in the MHD's 2015-2016 Community Health Assessment, this section describes health outcomes in which the MHD invests expertise and resources and is trying to improve. We present the significance of each health outcome, key population measures used to analyze trends, and a list of MHD programs that contribute to improvement:



County Health Rankings model © 2016 UWPHI

About the Data

Throughout this section, data are presented that represent specific health determinants and health outcomes indicators. Data have been collected from primary and secondary sources and, where possible, compared to state and national data. To help with that comparison, and where possible, each measure is given a “status” indicator and a “trend” indicator.

The Centers for Disease Control and Prevention’s (CDC) Healthy People 2020 set selected health benchmarks for all communities to achieve by the year 2020. These health benchmarks are labeled “HP2020.” Where possible, Milwaukee data has been compared with the HP2020 goals. A green checkmark (✓) “status” is shown if the data meets or exceeds the HP2020 benchmark. Conversely, if Milwaukee falls below the HP2020 goal, a red X (✗) is shown under “status.”

If no HP2020 goal exists for a health indicator, Milwaukee was compared with national data. If national data was not available, Milwaukee data was compared to state data. If no information was available under HP2020, national, state, or community data, “NA” is displayed for “not available.” For each indicator, data for the State and U.S. are listed for the year closest to the most recent city- or county-level data presented.

Trends are evaluated from the most recent 2-3 measurements (the most recent 3 are used if available). If the most recent measurements show mainly improvement in the indicator, a green plus sign (+) is shown under “trend.” Conversely, if the most recent measurements show movement away from the desired outcome a red minus sign (-) is presented. A gray double arrow (↔) is displayed under “trend” if the recent measurements do not show consistent or notable movement in a single direction.

Access to Care

Access to health care includes medical, dental and mental health care and impacts overall physical, social and mental health status. The prevention of disease and disability, as well as the detection and early treatment of conditions, improve quality of life, prevent death, and increase life expectancy.

Population health measures

Percent of Adults (18+) not Currently Covered by Health Insurance, City of Milwaukee									
2003	2006	2009	2012	2015	WI	US	HP2020	Status	Trend
11%	13%	15%	17%	6%	12%	17%	0%	✗	↔
<i>Data Source: Milwaukee City Community Health Survey Report, 2015</i>									
Percent of Adults (18+) not Currently Covered by Health Insurance Anytime in Past 12 Months, City of Milwaukee								Status	Trend
2009	2012	2015	WI	US	HP2020	Status	Trend		
26%	22%	14%	NA	NA	0%	✗	+		
<i>Data Source: Milwaukee City Community Health Survey Report, 2015</i>									
Percent of Households with One or More Members not Covered by Health Insurance Anytime in the Past 12 Months, City of Milwaukee									
2003	2006	2009	2012	2015	WI	US	HP2020	Status	Trend
27%	30%	30%	25%	16%	NA	NA	0%	✗	+
<i>Data Source: Milwaukee City Community Health Survey Report, 2015</i>									
Percent of Population Uninsured all Year Over Past Year, City of Milwaukee									Trend
2005	2006	2007	2008	2009	2010	2011	2012	Trend	
10%	7%	8%	8%	13%	11%	15%	10%	+	
<i>Data Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates</i>									
Percent of Children without Health Insurance, City of Milwaukee									
2012	2013	2014	2015	WI	US	HP2020	Status	Trend	
5.7%	5.5%	4.7%	4.0%	4.6%	7.1%	0%	✗	+	
<i>Data Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates</i>									

Access to Care

Percent of Population Reporting Someone in Household had not Taken Prescribed Medication due to Cost (Past 12 Months), City Of Milwaukee

2012	2015	WI	US	HP2020	Status	Trend
15%	12%	NA	NA	2.8%	✗	+

Data Source: Milwaukee City Community Health Survey Report, 2015

Percent of Adults with Unmet Care (Past 12 Months), City of Milwaukee

	2012	2015	WI	US	HP2020	Status	Trend
Medical Care	13%	14%	10.6%	13%	4.2%	✗	↔
Dental Care	21%	21%	NA	NA	5%	✗	↔
Mental Health Care	6%	5%	NA	NA	NA	NA	↔

Data Source: Milwaukee City Community Health Survey Report, 2015

Percent of Children with Unmet Care (Past 12 Months), City of Milwaukee

	2012	2015	WI	US	HP2020	Status	Trend
Medical Care	3%	3%	NA	NA	4.2%	✓	↔
Dental Care	10%	11%	NA	NA	5%	✗	↔
Mental Health Care	2%	1%	NA	NA	NA	NA	↔

Data Source: Milwaukee City Community Health Survey Report, 2015

Ratio of Population to Health Care Providers in Population, Milwaukee County

	2014	2015	2016	2017	WI	Status	Trend
Primary Care	1,340:1	1,336:1	1,350:1	1,370:1	1,240:1	✗	↔
Dentists	1,526:1	1,455:1	1,400:1	1,380:1	1,560:1	✓	+
Mental Health	734:1	430:1	401:1	410:1	600:1	✓	+

Data Source: Milwaukee City Community Health Survey Report, 2015

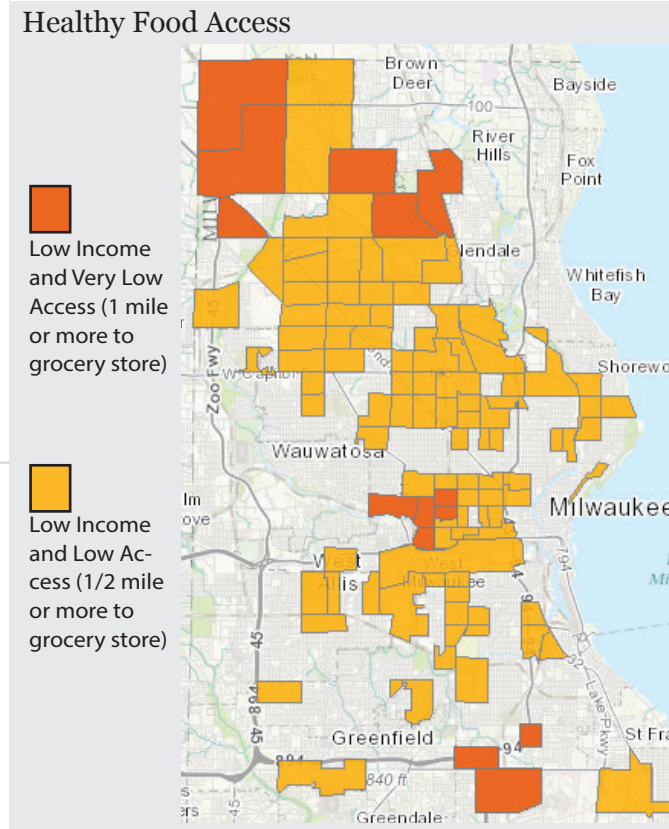
Department Programs Contributing to Outcome Status

1. Communicable Disease Program
2. Community Healthcare Access Program
3. Cribs for Kids Program
4. Direct Assistance for Dads Project
5. Empowering Families of Milwaukee
6. Immunization Program
7. Men's Health Program
8. Milwaukee Breast and Cervical Cancer Awareness Program
9. Newborn Screening
10. Nurse-Family Partnership Program
11. Parents Nurturing and Caring for their Children
12. Public Health Planning and Policy
13. Sexually Transmitted Disease Program
14. Tuberculosis Control Clinic
15. Women, Infants, and Children Nutrition Program

Built Environment

The built environment includes human-made resources and infrastructure such as buildings, roads, parks, restaurants and grocery stores. It can support or constrain healthy behaviors through issues like neighborhood walkability and access to healthy foods. Physical hazards can also exist in the built environment, ranging from old housing with lead hazards or fire-prone electrical wiring, to brownfields and industrial pollution. Hazards that exist from the built environment can be reduced through engineering, regulation, safe work practices and other methods.

Population health measures



Prevalence of Elevated Blood Lead Levels (Lead Poisoning) Among Children Age 6 and Under (10 ug/dL)

2003	2006	2009	2012	2014	WI	US	Status	Trend
11.3%	6.5%	4.4%	3.4%	2.7%	0.77%	0.53%	✗	+

Data Source: City of Milwaukee Home Environmental Health, Childhood Lead Poisoning Prevention Program

Prevalence of Elevated Blood Lead Levels (Lead Poisoning) Among Children Age 6 and Under (5 ug/dL)

2003	2006	2009	2012	2014	WI	US	Status	Trend
37.9%	28.7%	22.1%	13.8%	11.0%	4.5%	2.5%	✗	+

Data Source: City of Milwaukee Home Environmental Health, Childhood Lead Poisoning Prevention Program

Department Programs Contributing to Outcome Status

1. Beach Monitoring Program
2. Climate Change and Health
3. Consumer Environmental Health Division
4. Emergency Preparedness Program
5. Home Environmental Health Program
6. Lead in Drinking Water Program
7. Mosquito Surveillance and Control Program
8. Public Health Laboratory
9. Public Health Planning and Policy
10. Women, Infants, and Children Nutrition Program

Communicable Disease

Communicable diseases such as foodborne and waterborne illness, vaccine-preventable diseases, sexually transmitted infections, and more (including some respiratory and gastrointestinal illnesses) result in illness, increased health care costs, absenteeism, and death. Prompt identification of illness and disease can prevent the spread of disease to others and reduce loss of time at work or school due to illness.

Population health measures

Percent of Adults 65 Years and Older that Received Annual Influenza (“Flu”) Shot, City of Milwaukee

2012-13	2014-15	WI	US	HP2020	Status	Trend
33.2%	33.6%	56.7%	65%	70%	✘	↔

Data Source: Wisconsin Immunization Registry

Percent of Children Less than 18 Years of Age that Received Annual Influenza (“Flu”) Shot, City of Milwaukee

2012-13	2014-15	WI	US	HP2020	Status	Trend
21.7%	31.1%	56.8%	58.9%	70%	✘	+

Data Source: Wisconsin Immunization Registry

Percent of Children Ages 24 Months who Completed Primary Recommended Vaccination Series (4:3:1:3:3:1:4 series), City of Milwaukee

2012	2014	WI	US	HP2020	Status	Trend
58.0%	63.6%	73.1%	70.4%	80%	✘	+

Data Source: Wisconsin Immunization Registry

Percent of Adolescents 13 to 18 Years Immunized with 1 or More Doses of the Tdap Vaccine* City of Milwaukee

2012	2014	WI	US	HP2020	Status	Trend
67.0%	71.6%	78.8%	86%	80%	✘	+

Data Source: Wisconsin Immunization Registry

*Vaccine protects against tetanus, diphtheria, and pertussis

Communicable Disease

Percent of Adolescents (Age 13 to 18) who Received 3 or more Doses of Human Papillomavirus (HPV) Vaccine, City of Milwaukee

2012	2014	WI	US	HP2020	Status	Trend
15.4%	23.6%	23.0%	NA	80%	✗	+

Data Source: Wisconsin Immunization Registry

Pertussis, Confirmed and Probable Per 100,000 Population, City of Milwaukee

2012	2014	WI	US	Status	Trend
57.9	16.34	25.1	10.4	✗	+

Data Source: Wisconsin Electronic Disease Surveillance System

Hepatitis C, Chronic Per 100,000 Population, City of Milwaukee

2012	2014	WI	US	Status	Trend
59.51	75.04	55.3	NA	✗	-

Data Source: Wisconsin Electronic Disease Surveillance System

Shigellosis Per 100,000 Population, City of Milwaukee

2009	2012	2014	WI	US	Status	Trend
22.86	1.01	30.76	5.64	5.81	✗	↔

Data Source: Wisconsin Electronic Disease Surveillance System

Salmonella Per 100,000 Population, City of Milwaukee

2009	2012	2014	WI	US	HP2020	Status	Trend
11.60	14.63	12.78	8.66	15.45	11.4	✗	↔

Data Source: Wisconsin Electronic Disease Surveillance System

Campylobacter Per 100,000 Population, City of Milwaukee

2009	2012	2014	WI	US	HP2020	Status	Trend
7.9	9.25	10.76	24.3	13.45	8.5	✗	-

Data Source: Wisconsin Electronic Disease Surveillance System

Department Programs Contributing to Outcome Status

1. Communicable Disease Program
2. Consumer Environmental Health Division
3. Emergency Preparedness Program
4. Immunization Program
5. Public Health Laboratory
6. Public Health Planning and Policy
7. Sexually Transmitted Disease Program
8. Tuberculosis Control Clinic

Mortality

Premature death can provide a unique and comprehensive look at overall health status. To understand mortality in a community, analyzing leading causes of death as well as years of potential life lost is essential. Key population health measures include years of potential life lost, overall mortality rates, and infant mortality rates.

Population health measures

Years of Potential Life Lost, Rate per 100,000 Population, Milwaukee County

2009-11	2010-12	2011-13	WI	US	Status	Trend
7,939.7	7,818.2	7,945.4	5,952.5	6,605.3	✗	↔

Data Source: Health Indicators Warehouse

Life Expectancy at Birth (Years), City of Milwaukee

2011	2012	2013	2014	WI	US	HP2020	Status	Trend
76.0	75.8	76.2	76.9	80.3	78.8	NA	✗	+

Data Source: City of Milwaukee Health Department, Vital Statistics, Death Records

Age-adjusted Mortality Rate per 100,000 Population, City of Milwaukee

2006	2009	2012	2014	WI	US	Status	Trend
975.0	850.4	904.5	823.6	719.9	732.8	✗	↔

Data Source: City of Milwaukee Health Department, Vital Statistics, Death Records

Infant Mortality Rate per 1,000 Live Births, City of Milwaukee

2003-05	2006-08	2009-11	2012-14	WI	US	HP 2020	Status	Trend
11.6	10.9	10.1	9.9	5.7	6.0	6.0	✗	+

Data Source: City of Milwaukee Health Department, Vital Statistics, Death Records

Department Programs Contributing to Outcome Status

- Community Healthcare Access Program
- Consumer Environmental Health Division
- Climate Change and Health
- Communicable Disease Program
- Cribs for Kids Program
- Direct Assistance for Dads Project
- Emergency Preparedness Program
- Empowering Families of Milwaukee
- Fetal Infant Mortality Review
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- Vital Records
- Women, Infants, and Children Nutrition Program

Physical Activity & Nutrition

Regular physical activity and a healthy diet reduce the risk of chronic diseases, illness and injury. In children, proper nutrition and physical activity are key to healthy growth and development. Key population health measures include weight, physical activity, and a healthy diet.

Population health measures

Percent of Overweight Adults, City of Milwaukee

2003	2006	2009	2012	2015	WI	US	HP2020	Status	Trend
62%	65%	67%	66%	74%	67%	64%	66.1%	✗	—

Data Source: Wisconsin Behavioral Risk Factor Survey

Percent of Overweight High School Students, City of Milwaukee

2003	2005	2007	2009	2011	2013	WI	US	Status	Trend
19%	18%	19%	17%	18%	15%	13%	17%	✗	↔

Data Source: Youth Risk Behavior Surveillances System

Percent of Adults Reporting Recommended Moderate or Vigorous Activity, City of Milwaukee

2006	2009	2012	2015	WI	US	HP2020	Status	Trend
43%	40%	46%	48%	53%	51%	47.9%	✓	+

Data Source: Wisconsin Behavioral Risk Factor Survey

Percent of Adults Reporting No Leisure Time Physical Activity, City of Milwaukee

2003	2006	2009	2012	WI	US	HP2020	Status	Trend
23.9%	23.3%	27.5%	23%	34.7%	29.6%	32.6%	✗	↔

Data Source: Milwaukee City Community Health Survey Report, 2015

Percent of Students Who Were Not Physically Active at Least 60 Minutes Per Day On 5 Or More Days, City of Milwaukee

2009	2011	2013	2015	WI	US	HP2020	Status	Trend
70.6%	69.4%	69.8%	-	50.5%	52.7%	NA	✗	↔

Data Source: Youth Risk Behavior Surveillances System

Physical Activity & Nutrition

Percent of Adults Reporting Two or More Servings of Fruit Daily, City of Milwaukee

2003	2006	2009	2012	2015	WI	US	Status	Trend
63%	58%	56%	61%	59%	34.9%	32.5%	✓	↔

Data Source: Milwaukee City Community Health Survey Report, 2015

Percent of Adults Reporting Three or More Servings of Vegetables Daily, City of Milwaukee

2003	2006	2009	2012	2015	WI	US	Status	Trend
29%	22%	20%	25%	26%	23.2%	26.3%	✗	+

Data Source: Milwaukee City Community Health Survey Report, 2015

Percent of Infants in WIC Breastfed Exclusively Through 3 Months, Milwaukee County

2009	2012	2015	WI	US	HP2020	Status	Trend
12.7%	14.4%	NA	21.6%	NA	46.2%	✗	NA

Data Source: Wisconsin WIC Program, Breastfeeding Incidence and Duration Report, 2009 & 2012

Percent of City of Milwaukee Children 5 to 17 Years of Age Eating:

	2012	2015	Trend
Two or More Servings of Fruit	75%	82%	+
Three or More Servings of Vegetables	31%	30%	↔

Data Source: Milwaukee City Community Health Survey Report, 2015

Department Programs Contributing to Outcome Status

1. Consumer Environmental Health Division
2. Community Healthcare Access Program
3. Direct Assistance for Dads Project
4. Empowering Families of Milwaukee
5. Men's Health Program
6. Milwaukee Breast and Cervical Cancer Awareness Program
7. Newborn Screening
8. Nurse-Family Partnership Program
9. Parents Nurturing and Caring for their Children
10. Public Health Planning and Policy
11. Women, Infants, and Children Nutrition Program

Reproductive & Sexual Health

Per the Centers for Disease Control and Prevention, reproductive health “begins before conception with proper nutrition and a healthy lifestyle and continues with appropriate prenatal care and the prevention and treatment of complications when possible. The ideal result is a full-term pregnancy without unnecessary interventions ... a healthy infant, and a healthy postpartum period...” Factors affecting sexual health include violence or coercion, early sexual debut, and lack of safe sex practices to prevent sexually transmitted diseases. Key population health measures include teen birth rates, prenatal care, sexually transmitted infections, and HIV diagnoses.

Population health measures

Birth Rate per 1,000 Females age 15-17, City of Milwaukee

2006	2009	2012	2014	WI	US	HP2020	Status	Trend
52.0	41.3	25.9	23.7	7.7	10.9	NA	✗	+

Data Source: City of Milwaukee Health Department, Vital Statistics, Birth Records

Birth Rate per 1,000 Females age 18-19, City of Milwaukee

2006	2009	2012	2014	WI	US	HP2020	Status	Trend
120.8	88.7	71.7	64.5	34.0	43.8	NA	✗	+

Data Source: City of Milwaukee Health Department, Vital Statistics, Birth Records

Percent of High School Students who Have Ever had Sexual Intercourse, City of Milwaukee

2003	2005	2007	2009	2011	2013	WI	US	Status	Trend
60%	59%	59%	63%	60%	52%	35%	47%	✗	+

Data Source: Youth Risk Behavior Surveillances System

Percentage of High School Students who did not use a Condom During Last Sexual Intercourse (Among Students Who Were Currently Sexually Active), City of Milwaukee

2003	2005	2007	2009	2011	2013	WI	US	Status	Trend
30%	32%	39%	34%	35%	39%	38%	41%	✓	-

Data Source: Youth Risk Behavior Surveillances System

Percent of Women Receiving Late or No Prenatal Care, City of Milwaukee

2003	2006	2009	2012	2014	WI	US	Status	Trend
4.7%	4.8%	4.2%	5.1%	6.7%	4.3%	6%	✗	-

Data Source: City of Milwaukee Health Department, Vital Statistics, Birth Records

Reproductive & Sexual Health

Percent of Births < 37 Weeks Gestation, City of Milwaukee

2006	2009	2012	2014	WI	US	HP 2020	Status	Trend
10.9%	10.7%	10.5%	10.9%	9.1%	9.6%	11.4%	✓	↔

Data Source: City of Milwaukee Health Department, Vital Statistics, Birth Records

Low Birth Weight (percent of babies born <2500 grams), City of Milwaukee

2003	2006	2009	2012	2014	WI	US	HP2020	Status	Trend
9.8%	10%	10.8%	9.7%	10.9%	7.3%	8.0%	7.8%	✗	↔

Data Source: City of Milwaukee Health Department, Vital Statistics, Birth Records

Chlamydia Cases per 100,000 Population, City of Milwaukee

2006	2009	2012	2014	WI	US	Status	Trend
1,618.6	1,550.2	1,543.6	1,405.1	406	456.1	✗	+

Data Source: Wisconsin Electronic Disease Surveillance System

Gonorrhea Cases per 100,000 Population, City of Milwaukee

2006	2009	2012	2014	WI	US	HP2020	Status	Trend
816.4	565.0	502.7	391.2	72	110.7	NA	✗	+

Data Source: Wisconsin Electronic Disease Surveillance System

Primary and Secondary Syphilis Cases per 100,000 Population, City of Milwaukee

2006	2009	2012	2014	WI	US	HP2020	Status	Trend
5.7	3.9	5.5	7.6	1.4	6.3	NA	✗	-

Data Source: Wisconsin Electronic Disease Surveillance System

New HIV Diagnoses per 100,000 Population, City of Milwaukee

2006	2009	2012	2014	WI	US	HP2020	Status	Trend
18.7	22.2	17.1	20.0	3.9	13.8	NA	✗	↔

Data Source: Wisconsin Electronic Disease Surveillance System

Department Programs Contributing to Outcome Status

1. Community Healthcare Access Program
2. Communicable Disease Program
3. Direct Assistance for Dads Project
4. Emergency Preparedness Program
5. Empowering Families of Milwaukee
6. Immunization Program
7. Men's Health Center
8. Newborn Screening
9. Nurse-Family Partnership Program
10. Public Health Planning and Policy
11. Parents Nurturing and Caring for their Children
12. Plain Talk
13. Sexually Transmitted Disease Program
14. Tuberculosis Control Clinic
15. Vital Records
16. Women, Infants, and Children Nutrition Program

Violence & Community Safety

Violence and community safety affect both physical health and psychological well-being. Direct and indirect health impacts of intentional or unintentional injuries include poor mental health, poor physical health, premature death, high medical costs and decreased productivity. Additionally, exposure to crime and violence increases stress and anxiety, which are linked to many chronic health issues as well as higher rates of preterm births and low birthweight babies. Adverse childhood experiences (ACEs) are also associated with increased lifetime risk of chronic medical and mental health problems. ACEs include: Emotional Abuse or Neglect, Physical Abuse or Neglect, Sexual Abuse, Mother Treated Violently, Household Substance Abuse, Household Mental Illness, Parental Separation or Divorce and Incarcerated Household Members. Key population health measures include community violence and youth and children experiencing violence.

Population health measures

Number of Assault Offenses per 100,000 Residents, City of Milwaukee

2011	2012	2013	2014	2015	WI	US	HP2020	Status	Trend
1,320	1,620	1,610	1,550	1,400	290	1,650	1,920	✓	+

Data Source: Milwaukee Police Department

Number of Homicides per 100,000 Residents, City of Milwaukee

2011	2012	2013	2014	2015	WI	US	HP2020	Status	Trend
14	15	17	14	24	2.9	5.1	5.5	✗	↔

Data Source: Milwaukee Police Department

Number of Robberies per 100,000 Residents, City of Milwaukee

2010	2011	2012	2013	2014	2015	WI	US	Status	Trend
501	525	530	562	605	512	88	250	✗	↔

Data Source: Milwaukee Police Department

Number of Sexual Offenses per 100,000 Residents, City of Milwaukee

2010	2011	2012	2013	2014	2015	WI	US	Status	Trend
121	128	124	115	117	97	29	110	✓	↔

Data Source: Milwaukee Police Department

Violence & Community Safety

Maltreatment Substantiation Rate, Milwaukee County

2010	2011	2012	2013	2014	WI	HP2020	Status	Trend
9%	10%	9%	10%	8%	12.4%	8.5%	✓	↔

Data Source: Wisconsin Department of Children and Families

Percent of High School Students Who Have Been Bullied on School Property During the Past 12 Months, City of Milwaukee

2009	2011	2013	WI	US	HP2020	Status	Trend
12.6%	12.2%	14.0%	22.7%	19.6%	17.9%	✓	↔

Data Source: Youth Risk Behavior Surveillances System

Percent of High School Students Who Experienced Physical Dating Violence in the Past Year, City of Milwaukee

2013	WI	US	HP2020	Status	Trend
16.8%	8.5%	10.3%	NA	✗	NA

Data Source: Youth Risk Behavior Surveillances System

Percent of Children 8 to 17 Afraid for their Personal Safety in the Past Year, City of Milwaukee

2003	2006	2009	2012	2015	Trend
7%	13%	10%	8%	8%	+

Data Source: Milwaukee City Community Health Survey Report, 2015

Department Programs Contributing to Outcome Status

- Consumer Environmental Health Division
- Direct Assistance for Dads Project
- Emergency Preparedness Program
- Empowering Families of Milwaukee
- Fetal Infant Mortality Review
- Men's Health Program
- Newborn Screening
- Nurse-Family Partnership Program
- Office of Violence Prevention
- Plain Talk Program
- Parents Nurturing and Caring for their Children
- Public Health Planning and Policy
- Sexually Transmitted Disease Program
- Strong Baby Sanctuary Initiative
- Vital Records
- Women, Infants, and Children Nutrition Program



Program Operations

The City of Milwaukee Health Department (MHD) carries out its mission through the provision of direct services, evidence-based programs, partnership development, and policy development. The programs and initiatives under the direction of the MHD drive, support, and contribute to citywide efforts to positively impact health outcomes in the city.

About This Section

The following section highlights and provides details of each division or office of the City of Milwaukee Health Department and the direct services, programs, or initiatives administered through each. For each division or office, the following information is provided:

- A description of what the program or office is and does
- Individual program operations, including 2016 expenses and staffing
- A list of 2016 active grants with funder, grant period, and amount awarded over the grant period
- A table of performance measures with data from 2012-2016, where applicable

The following symbols may also be found, where applicable:



A summary list of existing partnerships and collaborations



A summary of 2017 goals



An indication of report(s) or publication(s) provided in this report's appendix

Programs are organized under the division/office in which they operate under:



Consumer and Environmental Health



Disease Control and Environmental Health



Family and Community Health



Office of Violence Prevention

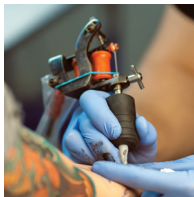


Public Health Laboratory



Public Health Planning and Policy

The Division of Administration, which includes medical and academic affairs, provides oversight, assistance, and communications functions for each of the above divisions, and therefore does not report outcome measures or receive grant funding and is not included in this section of the report.



Division of Consumer Environmental Health

The Division of Consumer Environmental Health (CEH) protects the health, safety, and consumer rights of those who live, work, or visit in Milwaukee. By conducting inspections of food service establishments and events, tattoo and body art facilities, and establishments that sell items by weight, the Division promotes safe practices, prevents the potential spread of disease, and assures that consumers receive the amount of goods they pay for.

Inspection & Consumer Protection Programs

The City of Milwaukee Health Department (MHD) works to promote safe food preparation and service, safe tattooing and body art practices, and protect consumers from fraudulent practices in commercial transactions involving determinations of quantity through its Food Inspection, Tattoo and Body Art Inspection, and Weights & Measures programs.

Each year, the Food Inspection Program conducts annual and periodic inspections of the nearly 3,000 food service establishments along with more than 1,000 mobile vendors and temporary events such as neighborhood and citywide festivals. Along with regulating establishments, specialists train food service managers on safety and sanitation, investigate complaints and illnesses associated with establishments, review plans and conduct pre-occupancy inspections of new or remodeled establishments, provide food safety consultations, and develop and implement policies to support food safety.

In 2016, the program continued regular and required inspections and services while joining the City Development Center, reviewing approximately 200 plans for establishments regulated by the MHD, assisting walk-in customers, and coordinating with other City departments to support food establishment operators in the city.

Along with the prevention of foodborne illness, inspectors work to decrease the risk of blood-borne diseases such as Hepatitis B, Hepatitis C, or HIV from tattoo or body art practices by conducting inspections to assure that tattoo, permanent makeup, and/or body piercings are done in a sanitary and sterile manner. The MHD's Weights & Measures Program also works to protect Milwaukee consumers' pocketbooks by monitoring retail businesses to assure that devices such as scales and scanners are accurately determining the price of goods sold by weight.

PROGRAM OPERATIONS	
Division	Consumer Environmental Health
Established	Food inspections began in 1890, Consumer Environmental Health formed in 2012 (previously under Disease Control and Environmental Health Division)
2016 Expenses	\$2,218,384
<i>O&M Expenses</i>	\$2,067,961
<i>Grant Expenses</i>	\$150,423
2016 Staffing	27.0 FTE
<i>O&M FTE</i>	26.5 FTE
<i>Grant FTE</i>	0.5 FTE
<i>Students</i>	1

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Food Inspection Grant	Food and Drug Administration	7/1/15 - 6/30/16	\$70,000
Food Inspection Grant	Food and Drug Administration	7/1/16 - 6/30/17	\$70,000
Food Inspection Grant - Advancing Implementation and Refinement	Food and Drug Administration	7/1/15 - 6/30/16	\$70,000
Food Inspection Grant - Advancing Implementation and Refinement	Food and Drug Administration	7/1/16 - 6/30/17	\$70,000

Inspection & Consumer Protection Programs

PERFORMANCE MEASURES					
Measure	2012	2013	2014	2015	2016
Food Inspection					
Routine inspections	4,836	6,475	6,294	6,770	5,963
Percent of Routine Inspections with one or more critical violation	36%	24%	26%	25%	31%
Complaints	427	585	815	1,013	598
Enteric Illness cases reported in Milwaukee	145	140	158	138	141
Revenue generated (food only)	\$2,227,283	\$2,315,852	\$2,390,020	\$2,508,788	\$2,499,221
Food Surveillance & Investigation					
Enteric Illness cases reported in Milwaukee	145	140	158	138	141
Food Sampling					
Number of samples tested	N/A	480	459	613	337
Violation rate	N/A	25%	23%	14%	25%
Temporary Events					
Number of Inspection	N/A	N/A	N/A	N/A	717
Number of Priority Violations	N/A	N/A	N/A	N/A	277
Mobile Restaurants					
Number of Mobile inspections	615	640	537	658	463
Percent of Occurrences with a Priority Violation	12%	10%	13%	15%	17%
Food Safety Education & Outreach					
Operator Training Sessions Performed	NA	59	167	207	189
Number of Food Handlers Trained	NA	191	1,484	1,362	1,235
Tattoo & Body Art					
Number of tattoo/body art inspections	128	99	101	113	104
Number of Violations	287	216	193	281	129
Revenue generated (tattoo & body art licenses)	NA	NA	NA	NA	\$11,031
Weights & Measures					
Number of devices tested	4,327	5,250	7,263	7,780	8,259
Revenue generated	N/A	N/A	N/A	N/A	\$403,271



PARTNERSHIPS

- Food Safety Advisory Committee
- The City of Milwaukee Food Council
- Milwaukee Area Technical College
- Southeast Wisconsin Food Safety Task Force
- City of Milwaukee Pivot Meetings

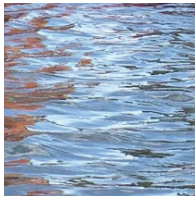
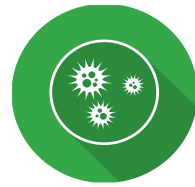
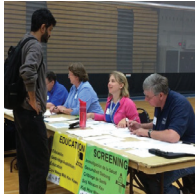


2017 ACTION PLAN

- Continue work toward launch of citywide food grading system
- Assess consumer food safety knowledge and interventions
- Complete a baseline FDA Risk Factor study and continue work toward meeting remaining FDA standards
- Increase staff with National Conference of Weights and Measures certifications



Additional report(s) or publication(s) found in appendix



Division of Disease Control & Environmental Health

The Division of Disease Control and Environmental Health (DCEH) has a long been a leader in the detection and response to infectious disease outbreaks and other public health emergencies that threaten the safety and health of Milwaukee residents. DCEH includes programs that address environmental health concerns, support the prevention and control of communicable disease, and coordinate the preparation for public health emergencies.

Beach Monitoring Program

To assure that Milwaukee beachgoers have safe, healthy summer fun at the beach, the City of Milwaukee Health Department (MHD) Beach Monitoring Program operates from Memorial Day through Labor Day to collect water samples at each of the city's three public beaches and issue daily water quality notifications to the public.

Through a continued partnership with the University of Wisconsin-Milwaukee Zilber School of Public Health (ZSPH), water samples are collected and analyzed at both UWM and City of Milwaukee Health Department laboratories. Analysis determines the levels of E. coli, a micro-organism, present in the water. While E. coli is normally found in bodies of water, elevated levels can raise health concerns.

Combining test results with a model that looks at a variety of beach conditions such as water temperature, wind direction, wave height, and more allows MHD staff to predict the E.coli value and issue public notifications daily online and at each beach.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	2008
2016 Expenses	\$83,446
<i>O&M Expenses</i>	\$73,462
<i>Grant Expenses</i>	\$9,984
2016 Staffing	0.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	0.0 FTE
<i>Students</i>	5 ZSPH MPH students

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Beach Monitoring	Wisconsin Department of Natural Resources	5/15/16 - 9/30/16	\$10,000
Beach Monitoring*	City of Milwaukee	5/16/16 - 12/31/16	\$70,453
<i>*Common Council allocated specific funding of the MHD's budget</i>			

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of water samples collected	NA	244	450	245	229
Number of days beaches were closed	NA	9	14	24	12
NA=Not Available					

PARTNERSHIPS



- University of Wisconsin-Milwaukee Zilber School of Public Health
- Milwaukee County Parks
- City of Milwaukee Health Department Public Health Laboratory

2017 ACTION PLAN



- Collaborate with ZSPH to collect beach water samples and deploy buoys transmitting real-time water conditions at additional beaches
- Enhance predictive modeling capabilities

Climate Change and Health

Climate change is, and will continue, affecting public health. To enhance regional awareness of climate change mitigation, adaptation, and resilience activities, the City of Milwaukee Health Department Climate Change and Health project has partnered with Reflo—Sustainable Water Solutions, a non-profit organization located in Milwaukee. Together, the MHD and Reflo are working to support climate change adaptation and promote community health and health equity by sustainably improving food security, decreasing storm-water runoff, and decreasing carbon emissions associated with transportation of food, water treatment and transmission.

Through a collaborative project, Reflo has partnered with Alice’s Garden and Guest House of Milwaukee to provide rainwater harvesting structures at each location. The goal is simple: To use rainwater to provide a sustainable water source for Milwaukee’s community gardens and reduce dependence on City water. This simple step can help reduce the likelihood of local flooding, basement backups, and combined sewer overflows which are all potential consequences of more frequent and intense storms associated with climate change. The lessons learned at these locations will help create a resource guide for the replication of these efforts.

As part of the project, the MHD plans to host six educational sessions to engage and educate the public about climate change, water, and health.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	2016
2016 Expenses	\$10,135
<i>O&M Expenses</i>	\$0.00
<i>Grant Expenses</i>	\$10,135
2016 Staffing	0.02 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	0.02 FTE
<i>Students</i>	1 student

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Climate and Health Learning Collaborative	Public Health Institute, Center for Climate Change and Health	1/1/16 - 6/30/17	\$30,000

PERFORMANCE MEASURES

Measure	2012	2013	2014	2015	2016
Educational sessions completed by MHD	NA	NA	NA	NA	4
NA=Not Available					



Partnerships:
Reflo - Sustainable Water Solutions



2017 Plan
Host two additional education sessions around climate change and health, while supporting continued work by partner organization.

Communicable Disease Program

Since its inception, the City of Milwaukee Health Department (MHD) has been a leader in the detection and response to communicable disease outbreaks. The reporting, surveillance, and control of reportable communicable disease is a core public health function and is mandated by Wisconsin State Statute and Wisconsin Administrative Code. Communicable diseases requiring follow-up include vaccine-preventable diseases such as mumps and pertussis, vector-borne diseases such as Zika and Lyme disease, gastrointestinal diseases such as Shigella and salmonella, and emerging diseases such as Ebola and monkeypox.

Communicable Disease (CD) program staff investigate reports of communicable diseases and outbreaks, conduct contact investigations, monitor communicable disease trends, provide educational interventions, and supply prophylactic medications to uninsured citizens. In addition, the program staff serve as a resource for other local health departments, health care providers, schools, child care facilities, and the citizens of the southeast region of Wisconsin.

The City of Milwaukee receives grant funds to support the Milwaukee County Communicable Disease Surveillance Network (SurvNet) activities. SurvNet centralizes communicable disease surveillance, provides epidemiology capacity to identify trends and address shared concerns with the 13 local health departments in Milwaukee County. SurvNet serves Milwaukee County and other areas of southeastern Wisconsin by disseminating information on emerging health threats, outbreaks, and public health alerts to public health and health care partners.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	1867
2016 Expenses	\$519,439
<i>O&M Expenses</i>	\$450,841
<i>Grant Expenses</i>	\$68,598
2016 Staffing	7.0 FTE
<i>O&M FTE</i>	5.4 FTE
<i>Grant FTE</i>	1.7 FTE
<i>Students</i>	4

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Survnet Affordable Care Act	State of Wisconsin, Department of Health Services	8/1/15 - 7/31/16	\$48,569
Survnet Affordable Care Act	State of Wisconsin, Department of Health Services	8/1/16 - 7/31/17	\$45,000
Perinatal Hepatitis B Fee for Service Grant	State of Wisconsin, Department of Health Services	1/1/16 - 12/31/16	\$20,800

In Action: Ebola Response

In 2016, the MHD CD Program worked closely with federal and state partners to monitor travelers who arrived in Milwaukee from Ebola-endemic countries. During monitoring, two travelers developed symptoms and needed to be evaluated. The CD Program implemented the MHD Ebola Response Plan, working with health care partners to coordinate care at a local hospital. Both travelers were diagnosed with influenza and recovered completely. The events, however, allowed the CD Program to test its emergency response plan with partners.

Communicable Disease Program



PARTNERSHIPS

- Local health departments
- Wisconsin Department of Health Services
- Centers for Disease Control & Prevention (CDC)
- Area clinics, hospitals, providers
- Milwaukee Public Schools and private schools
- Local universities and colleges
- Child care facilities
- Milwaukee Fire Department
- Southeast Wisconsin Healthcare Emergency Readiness Coalition (HERC)
- Law enforcement & emergency management
- Advisory Committee on Immunization Practices (ACIP)



2017 ACTION PLAN

- Investigate and respond to reports of communicable diseases and outbreaks, monitor communicable disease trends
- Disseminate information on health threats/issues, outbreaks, and public health advisories or alerts to public health and health care partners
- Provide monthly reports on communicable disease cases identified in Milwaukee County



Additional report(s) or publication(s) found in appendix

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Prepared and distributed monthly (12 per calendar year) surveillance reports for Milwaukee County	Completed	Completed	Completed	Completed	Completed
Prepared and distributed annual surveillance report for Milwaukee County	Completed	Completed	Completed	Completed	In Process
Prepared and distributed annual surveillance reports for all 13 Local Health Department jurisdictions in Milwaukee County	Completed	Completed	Completed	Completed	In Process
Number of disease case reports from providers and labs processed for Milwaukee County	17,750	17,170	16,531	17,496	19,106
Number of electronic lab reports attached or imported for Southeastern Wisconsin	23,295	26,720	26,287	30,818	34,998
Number of respiratory illness reports prepared and distributed for Milwaukee County during flu season	22 (2012-13)	27 (2013-14)	31 (2014-15)	16 (2015-16)	13 (YTD) (2016-17)
Number of confirmed cases of communicable disease reported to the City of Milwaukee	13,782	13,125	12,622	13,742	Not yet available
Number of gastrointestinal outbreaks in long-term care facilities	21	15	19	18	14
Number of respiratory outbreaks in long-term care facilities	NA	3	8	10	10
Number of non-long term care facility outbreaks investigated	4	5	4	2	6
Number of special messages/alerts distributed through SurvNet to enhance awareness and/or provide guidance to partners in Southeastern Wisconsin	6	12	15	16	16
Percent of children born to hepatitis B positive mothers who received three doses of hepatitis B vaccine by their 1st birthday	97%	98%	85%	87%	Not yet available

Emergency Preparedness Program

The City of Milwaukee Health Department (MHD) works ahead of emergencies in order to assure effective coordination when faced with a public health incident or threat such as bioterrorism, environmental hazards, and communicable disease outbreaks.

Each year the Emergency Preparedness (EP) Program leads, supports, and participates in multiple exercises to test, evaluate, and refine public health response. Plans have been developed to prepare for, identify, prevent, respond to, and recover from public health emergencies. The EP Program also serves as the Chair for the Milwaukee BioWatch Advisory Committee (MBAC), part of the national Biowatch program to support detection of potential bioterrorism. The Program also leads the planning and organizing of the citywide Back-to-School Health Fairs, using the event as a functional exercise for emergency planning.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	2004
2016 Expenses	\$710,934
<i>O&M Expenses</i>	\$123,786
<i>Grant Expenses</i>	\$587,148
2016 Staffing	4.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	4.0 FTE
<i>Students</i>	3

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Public Health Preparedness	Wisconsin Department of Health Services	7/1/15 - 6/30/16	\$332,828
Public Health Preparedness	Wisconsin Department of Health Services	7/1/16 - 6/30/17	\$310,779
City Readiness Initiative	Wisconsin Department of Health Services	7/1/15 - 6/30/16	\$185,220
City Readiness Initiative	Wisconsin Department of Health Services	7/1/16 - 6/30/17	\$163,235
Public Health Emergency Preparedness, Ebola	Wisconsin Department of Health Services	4/1/15 - 9/30/16	\$111,181
Flu on Call	Centers for Disease Control and Prevention, NACCHO	10/20/15 - 6/30/16	\$45,000
Flu on Call	Centers for Disease Control and Prevention, ASTHO	12/1/15 - 6/30/16	\$43,252

In Action: Flu on Call - A National Pilot Project

During the 2015-2016 Influenza Season, the MHD was one of two locations nationwide selected to partner with the U.S. Centers for Disease Control and Prevention (CDC) to launch a toll-free helpline to provide information and free medical advice to callers about flu. The program was a pilot to test a national network of call centers that could be used during a severe influenza pandemic, and provided the CDC with real-world test case for national emergency response.

Emergency Preparedness Program

PERFORMANCE MEASURES					
	2012-13	2013-14	2014-15	2015-16	2016-17
Public Health Preparedness					
Participate in regional health care coalition	Completed	Completed	Completed	Completed	Completed
Update Point of Dispensing list	Completed	Completed	Completed	Completed	Completed
Participate in required exercises	Completed	Completed	Completed	Completed	Completed
Develop AAR/IP for all functional exercises	Completed	Completed	Completed	Completed	Completed
Update Emergency Operations Plan as needed	Completed	Completed	Completed	Completed	Completed
City Readiness Initiative					
Submitted Annual Operational Readiness Review (ORR) Jurisdictional Data Sheet	Completed	Completed	Completed	Completed	Completed
Participated in regional exercise	NA	NA	Completed	Completed	Completed
Conducted three of the five Division of Strategic National Stockpile (DSNS) drills	Completed	Completed	Completed	Completed	Completed
Ebola Supplemental					
Developed protocols for Ebola response	NA	NA	NA	Completed	NA
Participated in multiagency exercise	NA	NA	NA	Completed	NA
Flu on Call					
Establish steering committee and formalize agreements with the Poison Center and 211	NA	NA	NA	Completed	NA
Develop and execute communications plan for Flu on Call® pilot	NA	NA	NA	Completed	NA
Test Flu on Call® Hotline	NA	NA	NA	Completed	NA
Back-to-School Health Fairs					
Immunizations given	NA	NA	1,128	914	1,079
Number of attendees	NA	NA	3,735	3,030	3,072
Number of children lead tested	NA	NA	231	225	234
Number of exhibitors	NA	NA	101	109	146
Other services health checks, vision, dental	NA	NA	727	908	610
NA=Not Available					



PARTNERS

- Office of Emergency Management
- Wisconsin Division of Public Health
- Department of Homeland Security
- Southeast Wisconsin Healthcare Emergency Readiness Coalition
- Southeastern WI Threat Analysis Center
- Southeast Wisconsin Homeland Security Partnership
- Local health departments and organizations
- Business Resilience Group
- Area hospitals, health care providers
- Fire and Police departments
- University Wisconsin- Milwaukee Zilber School of Public Health



2017 ACTION PLAN

- Participate in State and Regional exercises/drills
- Participate in the regional health care coalition to further preparedness efforts

Home Environmental Health

The City of Milwaukee Health Department (MHD) has a long been a leader in the development and implementation of standards and programs to reduce and prevent childhood lead poisoning, protecting children and providing better housing conditions in over 17,000 housing units in Milwaukee since its inception. The reporting, surveillance, and control lead poisoning and lead hazards are a core public health function and are mandated by Wisconsin State Statute and Wisconsin Administrative Code.

In the city of Milwaukee, lead-based paint hazards remain the most common source of childhood lead poisoning, while other important sources of lead include drinking water and soil. The Home Environmental Health Childhood Lead Poisoning Prevention Program (CLPPP) has a comprehensive and coordinated approach, focusing programmatic efforts around primary prevention, secondary interventions, and compliance assurance for ongoing residential rehabilitation programs. Through these programs, the CLPPP works to help property owners proactively remove lead hazards, respond to cases of lead poisoning by providing case management and hazard control, and also supervises programs under Section 102/1013 (HUD's Lead-Safe Housing Rule).

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	1997
2016 Expenses	\$2,821,527
<i>O&M Expenses</i>	\$145,088
<i>Grant Expenses</i>	\$2,676,439
2016 Staffing	24.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	24.0 FTE
<i>Students</i>	1 student

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Lead Hazard Reduction Demonstration Grant	U.S. Department of Housing and Urban Development	12/1/14- 11/30/17	\$3,900,000
Lead Hazard Reduction Demonstration Grant	U.S. Department of Housing and Urban Development	9/1/16- 8/31/19	\$3,400,000
Lead Detection Grant	State of Wisconsin	1/1/16- 12/31/16	\$251,134
Lead Abatement	City of Milwaukee Community Development Grants Administration	1/1/16- 12/31/16	\$755,000
Lead Prevention	City of Milwaukee Community Development Grants Administration	1/1/16- 12/31/16	\$603,000

Home Environmental Health

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of Housing Units Made Lead Safe	901	478	449	401	335
Number of Children Tested for Lead Poisoning	29,681	27,752	26,099	24,616	Not yet available
Number of Children Lead Poisoned at $\geq 5\mu\text{g}/\text{dL}$	4,101	3,566	2,872	2,840	Not yet available
Number of property owners and contractors receiving paid training on the EPA Renovation, Repair and Painting (RRP) law	77	39	31	28	48

In Action: Childhood Lead Poisoning Prevention

A poisoned child is a fearful concept for a family, and for the property owner of the home with a lead hazard, it can be financially devastating. Through the work of the MHD Childhood Lead Poisoning Prevention Program, childhood lead poisoning rates have declined dramatically in Milwaukee. At a level of 10 micrograms per deciliter, rates have plummeted 90% since 1997, and at a lower level of exposure of 5 micrograms per deciliter, rates have declined 69% since 2003.

While the program has completed the first 26 months of a \$3.9 million grant to continue to abating homes of lead hazards in high-risk areas, the program continues to seek sustained funding. In June 2016, the program was awarded a \$3.4 million dollar grant to continue work in high-risk areas, and expand to three additional zip codes not covered on the previous grant. Through this funding, the program will be able to assist more property owners in addressing lead hazards before a child may be exposed.

PARTNERSHIPS



- Department of City Development
- Department of Neighborhood Services
- Department of Administration

2017 ACTION PLAN

- Create 350 additional lead-safe housing units in 2017
- Support homeowners of properties with lead-poisoned children to create a safe environment and improve housing conditions through grant funding and investment from property owners
- Train and certify 35 new lead abatement workers, offering property owners Lead-Safe worker training to promote safe work on suspected lead hazards



Additional report(s) or publication(s) found in appendix

Immunization Program

One of the most important tools to protect our community from disease remains immunizations. Sustaining high childhood immunization rates in the city, along with reducing disparities within racial groups, remain primary objectives of the City of Milwaukee Health Department (MHD) Immunization Program. Improving immunization rates helps suppress outbreaks of various vaccine preventable diseases. While the Immunization Program continues to receive funding for childhood vaccinations, recent grant funding has been targeted to increasing HPV and influenza immunization rates in adolescents and adults.

The MHD not only provides immunizations during weekly walk-in clinics at its three health center locations it partners with community agencies to provide clinics throughout the city. In addition, the Program partners with the Communicable Disease and Preparedness Programs to respond to communicable disease outbreaks while also conducting educational symposiums and events directed toward schools, day cares, and clinicians to increase compliance with Wisconsin immunization law and coordinate delivery of immunizations in the community.

As a partner in the Immunize Milwaukee! Coalition, the Program provides education for area providers at an annual symposium and continues to develop partnerships to coordinate the delivery of immunizations in the community. Through this work, compliance with Wisconsin immunization law has reached its highest rate.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	1868 MHD established a system for delivery of vaccinations
2016 Expenses	\$419,362
<i>O&M Expenses</i>	\$26,646
<i>Grant Expenses</i>	\$392,716
2016 Staffing	4.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	4.0 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Immunization Action Plan	State of Wisconsin	1/1/16- 12/31/16	\$261,978
Adult Immunization	State of Wisconsin	5/1/16- 6/30/17	\$56,833
Increasing HPV Vaccination Coverage Among Adolescents, Immunize Milwaukee! Coalition	Wisconsin Department of Health Services	11/1/15- 10/31/16	\$10,000
Increasing Adult Immunization Rates, Immunize Milwaukee! Coalition	State of Wisconsin	7/1/16- 6/30/17	\$8,000

In Action: Mumps Outbreak Prevention

In the spring of 2016, the MHD investigated several confirmed cases of mumps in a cohort of adults. A case contact investigation revealed that several of the cases were employed at local Milwaukee restaurants. To prevent the potential spread of illness, the Immunization Program nurses worked closely with the establishments to provide "on-site" immunization clinics at their facilities to vaccinate those who needed the Mumps, Measles, and Rubella (MMR) vaccine. The program vaccinated 24 individuals to prevent the further spread of mumps in the community.

Immunization Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Immunization Action Plan					
School immunization law compliance rate	88%	88%	89%	90%	90.8%
School immunization law compliance rate goal	88%	88%	89%	90%	91%
Number of offsite immunization opportunities and clinics held after 6 pm or on Saturdays to increase access for children of working parents	28	21	26	24	34
Number of private schools referred to District Attorney due to failure to submit the required School Report to Local Health Departments	NA	5	4	0	0
Number of school site visits conducted	34	24	19	27	23
Number of vaccines administered	18,776	16,417	10,912	10,558	8,359
Number of clients immunized	6,507	6,247	4,397	3,937	3,151
Hold two immunization requirement educational meetings; one with schools and one with child care providers	Completed	Completed	Completed	Completed	Completed
Percent of children residing in City of Milwaukee who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccinations by their second birthday	56%	61%	62%	63%	66%
Goal for percentage of children residing in City of Milwaukee who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccinations by their second birthday	54%	56%	58%	64%	66%



PARTNERSHIPS

- Milwaukee Public Schools and Private Schools
- Local universities and colleges
- Area child care facilities
- Milwaukee County District Attorney's office
- Local Health Departments
- Wisconsin Department of Health Services
- US Centers for Disease Control and Prevention
- Immunize Milwaukee! Coalition
- Private health care providers
- Advisory Committee on Immunization Practices (ACIP)

Immunization Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of 2-year old reminder/recall mailings and reminder phone calls	4,727 mailings and 3,164 phone calls	4,340 mailings and 3,058 phone calls	3,690 mailings and 2,358 phone calls	3,437 mailings and 2,163 phone calls	3,094 mailings and 1,930 phone calls
Hold immunization symposium to increase provider knowledge	Completed	Completed	Completed	Completed	Completed
Number of site visits to child care providers to provide education around Advisory Committee on Immunization Practices recommended vaccinations	29	29	23	17	16
Number of community health education/health fair events	30	28	25	21	11
Partner with two WIC sites to increase childhood immunizations with their clients	Completed	Completed	Completed	Completed	Completed
Adult Immunization					
By June 30, 2017, 25% adults (19-26 years) residing in the City of Milwaukee will have completed three-dose HPV vaccine series	NA	NA	NA	17%	19% (Preliminary)
Complete 4 reminder letter mailings for city clients who have not received ACIP recommended doses of HPV vaccine	NA	NA	NA	NA	In Process
Partner with Immunize Milwaukee! Coalition and meet with at least two local universities/colleges to engage providers in recommending HPV vaccination for adults age 19-26	NA	NA	NA	NA	In Process
By June 30, 2017, 27% adults 19 years or older residing in the city will have received a dose of 2016-2017 seasonal influenza vaccine	NA	NA	NA	19%	20% (Preliminary)
Hold at least two education/listening sessions to engage the community on the importance of influenza vaccination for adults, dispel myths, and provide resources for participants to get influenza vaccination	NA	NA	NA	NA	Completed in 2017



2017 ACTION PLAN

- Work with Milwaukee Public Schools and Private schools in the City of Milwaukee to increase the City immunization compliance rate by 2% from 90 to 92%
- 66% children residing in the City of Milwaukee jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate Vaccination (PCV) by their second birthday

Immunization Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Partner with the Immunize Milwaukee! Coalition to provide an update on influenza immunizations and recommend use of the Wisconsin Immunization Registry to area providers for influenza vaccination via email and at the 2016 Fall Immunization Symposium	NA	NA	NA	NA	Completed
Maintain up to date information on HealthMap Vaccine Finder for influenza vaccine and clinics in the City of Milwaukee throughout the 2016-17 influenza season	NA	NA	NA	NA	Completed
Increasing HPV Vaccination Coverage Among Adolescents, Immunize Milwaukee! Coalition					
Exhibit at the 46th Medical College of Wisconsin Annual Winter Refresher Course for Family Physicians to provide information regarding HPV vaccination recommendations	NA	NA	NA	NA	Completed
Messages about HPV vaccination and the importance of getting vaccinated were posted and boosted on the Immunize Milwaukee! Coalition's Facebook page	NA	NA	NA	NA	10 messages posted
Purchase advertisements at Milwaukee-area movie theaters to show HPV vaccine promotional videos from the CDC	NA	NA	NA	NA	Completed
Increasing Adult Immunization Rates, Immunize Milwaukee! Coalition (IM!)					
Exhibit at 47th MCW Annual Winter Refresher Course for Family Physicians to provide area family physicians information about adult vaccination	NA	NA	NA	NA	Completed in 2017
Physician member of IM! will host 6 lunch and learn sessions at area clinics to promote adult vaccination and using standing orders to offer adult vaccines	NA	NA	NA	NA	4 Completed in 2017, 2 scheduled



Additional report(s) or publication(s) found in appendix

Lead & Drinking Water Program

Years ago, lead was used in paints, plumbing, and other products. While the most common source of lead in Milwaukee is from paint in buildings built before 1978, lead may also enter the water as a result of the wearing away of materials containing lead in service lines or internal plumbing. When water stands for several hours in fixtures or pipes that contain lead, the lead may leach into the water. With approximately 70,000 properties in Milwaukee with lead service lines (the pipes that connect the houses to the water main), MHD has coordinated a response to this public health concern by conducting public outreach and filtration device distribution.

In coordination with Milwaukee Water Works, the City of Milwaukee Health Department (MHD) provides information to the public regarding lead in drinking water and coordinates with community organizations to provide drinking water filters to low-income vulnerable populations (children under 6, pregnant women, breastfeeding women, and women planning to become pregnant).

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	2015
2016 Expenses	\$7,103
<i>O&M Expenses</i>	\$7,103
<i>Grant Expenses</i>	\$0.00
2016 Staffing	1.0 FTE
<i>O&M FTE</i>	1.0 FTE*
<i>Grant FTE</i>	0.0
<i>Students</i>	1
<i>*New position filled near the end of 2016</i>	

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of filtration devices distributed	NA	NA	NA	NA	1,700
Number of lead in water community outreach events MHD attended	NA	NA	NA	NA	11



PARTNERSHIPS

- Milwaukee Water Works
- Social Development Commission
- Sixteenth Street Community Health Centers



2017 ACTION PLAN

- Coordinate Filter distribution through targeted community partner agencies and programs to reach most vulnerable populations
- Recruiting childcare facilities for full service line replacement program
- Continue to provide education at community events and presentation
- Continue to answer resident calls about drinking water safety

West Nile Virus: Mosquito Surveillance and Control

West Nile Virus (WNV) is a mosquito-borne virus that can cause a range of illnesses. Most people infected (about 80%) have no symptoms. Others, however, experience flu-like symptoms with a possible rash and swollen glands. Less than 1% of cases include more serious neurological symptoms, and about 5% of cases are fatal.

The City of Milwaukee Health Department's (MHD) WNV Surveillance and Control Program consists of public education and outreach, surveillance (monitoring human, wild bird, mosquito, and other animals for viral activity), and mosquito control through the targeted placement of larvicide in city catch basins.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	2002
2016 Expenses	\$25,890
<i>O&M Expenses</i>	\$25,890
<i>Grant Expenses</i>	\$0.00
2016 Staffing	0.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	0.0 FTE

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of mosquitoes collected	NA	4343	1312	2243	588
Number of larviciding doses delivered	NA	8440	5521	5382	5089
# of pools positive for West Nile Virus	NA	18	1	10	12
NA=Not Available					



PARTNERSHIPS

- University of Wisconsin-Madison Department of Entomology
- Wisconsin Department of Health Services



2017 ACTION PLAN

- Conduct public education and outreach and continue surveillance (human, wild bird, mosquito, and other animals) activities

Sexually Transmitted Disease Program

The Sexually Transmitted Disease (STD) Program provides confidential testing and follow-up services to uninsured and underinsured residents of Milwaukee and the surrounding communities. Services are provided at the City of Milwaukee Health Department Keenan Health Center STD/HIV Clinic to anyone who is at least 12 years of age, at no cost to the client. The STD/HIV Program Disease Intervention Specialists (DIS) also perform epidemiological investigations, provide partner services and follow-up for clients known or suspected of having Syphilis, HIV, Gonorrhea (GC) and Chlamydia (CT) in the city, and also conduct follow-up for HIV cases in Milwaukee County and syphilis cases across six-county area of southeastern Wisconsin.

STDs are diseases that can cause temporary discomfort and inconvenience but also impair fertility, result in long-term morbidity, and shorten life. Untreated STDs also facilitate HIV transmission. In addition to the physical and psychological consequences, STDs pose an economic burden as well.

PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	Venereal Disease Clinic Opened in 1920, renamed Social Hygiene clinic in 1977, and renamed "STD Clinic" in 1989
2016 Expenses	\$1,463,192
<i>O&M Expenses</i>	\$865,566
<i>Grant Expenses</i>	\$597,626
2016 Staffing	22.0 FTE
<i>O&M FTE</i>	12.0 FTE
<i>Grant FTE</i>	10.0 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Dual Protection Partnership Initiative	Wisconsin Division of Public Health, Family Planning Program	1/1/16- 12/31/16	\$186,000
HIV Prevention	Wisconsin Department of Health Services	1/1/16- 12/31/16	\$197,000
STD Infertility Prevention	Wisconsin Department of Health Services	1/1/16- 12/31/16	\$340,000

In Action: Disease Intervention Specialists at Work

The work of a Disease Intervention Specialist (DIS) worker may not be known to many in the community, but is an essential tool in the public health world for preventing the spread of sexually transmitted infections. In following up on cases of STIs, DIS workers encounter and offer support to individuals in need of more than just treatment for an infection. In 2016, an MHD DIS worker supported a 20-year-old pregnant client in not only accessing appropriate follow-up for a suspected case of syphilis, but realized the woman was in critical need of prenatal care and connected the client to the MHD's home visiting programs for support. In another case, a DIS worker visited a client in jail to conduct an interview to obtain possible partners in need of treatment. However, the client's mental health first needed attention. By providing safe, confidential, and supportive counseling, the DIS worker was able to support the client and obtain the information needed to get the client's partners in for testing. One-by-one, DIS workers make connections that matter.

Sexually Transmitted Disease Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Chlamydia rates per 100,000 (City of Milwaukee)	1,542	1,489	1,402	1,485	NA
Gonorrhea rates per 100,000 (City of Milwaukee)	502	487	390	576	NA
Syphilis rates per 100,000 (City of Milwaukee)	6.4	7.7	5.2	3.9	NA
HIV rates per 100,000 (City of Milwaukee)	17.6	19.0	20.1	18.7	18.0
New HIV Diagnosis in City of Milwaukee	102	110	117	108	104
Number of STD tests performed at STD clinic	33,221	32,968	33,569	36,305	37,016
Percent of individuals seeking STD services provided same day services at STD clinic	91%	94.8%	93.9%	92.8%	91.7%
Number of Syphilis contacts for primary and secondary cases interviewed	51	60	57	48	54
Percent of syphilis cases interviewed of the total number of syphilis cases assigned	98.1%	93.8%	95%	84.2%	96.4%
Percent of HIV cases received partner referral services of cases assigned to DIS	NA	NA	88%	84%	88%
Percent of HIV linked to care of total number of cases assigned to DIS	NA	NA	63%	71%	84%

PARTNERSHIPS

- U.S. Centers for Disease Control and Prevention
- Wisconsin Department of Health Services STD and HIV Programs
- AIDS Resource Center of Wisconsin
- Diverse and Resilient
- Planned Parenthood of WI
- Outreach Health Services
- Linkage to Care Specialist
- Family Planning Health Services
- Dual Protection Partnership Initiative
- Brady Street East STD Clinic
- Holton Street Clinic
- UMOs
- 16th Street Community Clinic
- The Medical College of Wisconsin
- Milwaukee Health Services
- Greater Milwaukee Center
- Outreach Community Health Center
- Aurora UW Medical Group
- Black Health Coalition of Wisconsin



2017 ACTION PLAN

- Develop 5- year strategic plan to combat gonorrhea and chlamydia in Milwaukee
- Continue to foster mutually beneficial strategic relationships
- Continue to engage and educate the community by performing outreach and screening events
- Continue to provide partner services and epidemiological follow-up
- Continue to provide STD walk-in clinic services
- Continue Strengthening U.S. Response to Antibiotic Resistant Gonorrhea (SURRG) grant work
- Continue to participate in the DIS Evaluation Project



Tuberculosis Control Clinic

The City of Milwaukee Health Department (MHD) has the primary responsibility for preventing and controlling Tuberculosis (TB) in the city. The Tuberculosis Control Clinic (TBCC) controls TB using evidence-based interventions to assure that all persons suspected of having TB are identified, evaluated, and treated, and that appropriate course of action is taken to mitigate the spread. Every TB case is a potential outbreak, and the program must be prepared to promptly identify and treat persons who have active TB disease, as well as identify and treat close contacts who may have become infected with TB. Anyone can get TB, however TB disproportionately affects minorities, foreign-born, and those with low socioeconomic status.



PARTNERSHIPS

- Wisconsin Department of Health Services, Division of Public Health, TB Program
- Mayo Clinic Center for Tuberculosis
- Dr. James Sanders, MHD TBCC Medical Consultant
- University of Wisconsin School of Medicine and Public Health, Department of Radiology
- Skywalk Pharmacy

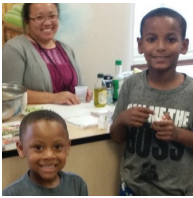
PROGRAM OPERATIONS	
Division	Disease Control and Environmental Health
Established	1912
2016 Expenses	\$406,205
<i>O&M Expenses</i>	\$406,205
<i>Grant Expenses</i>	\$0.00
2016 Staffing	4.5 FTE
<i>O&M FTE</i>	4.5 FTE
<i>Grant FTE</i>	0.0 FTE



2017 ACTION PLAN

- Continue to Provide early and accurate detection, diagnosis, and reporting of TB cases
- Identify contacts of patients with infectious TB and treatment of those at risk
- Identify high-risk settings for transmission and support effective infection control
- Provide nurse consultation to health care professionals, providers and public health workers
- Provide mentorship/training to health care professionals to increase TB awareness and decrease misdiagnosis/improper treatment
- Ensure access to TB testing and treatment of LTBI
- Ensure screening of high-risk groups
- Maintain legal authority to issue Commissioner's orders to TB patients

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of X-rays read (includes outside)	4,092	4166	1997	560	406
Number of X-rays performed at TBCC	1,107	1,545	1,044	375	578
Number of Milwaukee City cases registered	25	7	10	15	9
Number of Milwaukee County cases registered, excludes City	6	3	5	6	7
Number of Clinic Visits	2,910	2,569	1,923	532	635
Number of DOT Home Visits (Including Suspects)	NA	NA	NA	NA	1,849
Number of Class B Immigrants in Clinic	NA	NA	NA	30	38
Presentations on TB	17	24	30	3	0
TB Student Learners	NA	NA	NA	14	25
Class B Immigrant/Refugee Coordinator Follow-up	NA	NA	NA	NA	97
Number of Refugees Screened*	620	695	571	NA	NA
*Refugee Health Screening Contract ended in October of 2014 NA=Not Available					



Division of Family & Community Health

The Family and Community Health (FCH) Division promotes the health and well-being of individuals and families throughout the life cycle with a strong focus on promoting healthy pregnancies, birth outcomes, and child development, along with supporting the sexual and reproductive health of men, women, teens, and young adults. Supported by epidemiological data and research, FCH facilitates access to health care and other community services and resources; offers direct services such as home visits to at-risk families, cancer screenings, and nutrition support, and collaborates with community partners to decrease the racial and ethnic disparities that impact health.

Community Healthcare Access Program

The City of Milwaukee Health Department Community Healthcare Access Program (CHAP) assists individuals and families in accessing the health care coverage they need. CHAP helps residents determine eligibility for private insurance under the Affordable Care Act and BadgerCare (Medicaid), as well as assist in accessing Family Planning Waiver, Senior Care, Title 19, and Express Enrollment for pregnant women and children. CHAP can also facilitate enrollment or provide referrals for enrollment in FoodShare, Elderly Blind and Disabled, Women, Infants and Children (WIC), energy assistance, tax preparation, dental services and free and sliding-fee clinics.

While CHAP serves the entire city of Milwaukee, there is a particular focus on residents in ZIP codes where infant mortality rates are high. CHAP staff provide services at community organizations, and are also open to the community on weekdays at the Southside Health Center and Keenan Health Center.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	1999
2016 Expenses	\$666,481
<i>O&M Expenses</i>	\$297,487
<i>Grant Expenses</i>	\$368,994
2016 Staffing	11.0 FTE
<i>O&M FTE</i>	4.75 FTE
<i>Grant FTE</i>	6.25 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Medical Assistance Outreach-Forward Health	State of Wisconsin, Department of Health Services, Division of Health Care Access and Accountability	1/1/16- 12/31/16	\$345,457.19

In Action: **White House Healthy Communities Challenge**

In November 2015, as the open enrollment period for the Health Insurance Marketplace began, President Obama issued a challenge to 20 communities, including Milwaukee. Mayor Tom Barrett accepted the challenge to compete to see which community could improve their enrollment rate during the 2015-2016 period. Through the coordinated efforts of the Milwaukee Enrollment Network, the MHD CHAP program supported work citywide to reach targeted populations in accessing health care coverage that would meet their individual or family needs. As a result of this incredible effort, Milwaukee was proclaimed the winner, enrolling approximately 38,000 new enrollees into the Marketplace. To congratulate the city, President Obama visited in March 2016.



Community Healthcare Access Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Number of express enrollments in BadgerCare Plus - Children	277	200	58	55	46
Number of express enrollments in BadgerCare Plus - Pregnant Women	154	141	79	37	35
Number of individuals who complete full applications for BadgerCare Plus	4,881	5,063	5,032	3,735	3,793
Number of full applications for BadgerCare Plus (new applications only)	3,534	3,104	3,699	2,283	2,631
Number of Non-Qualified Immigrant Pregnant Women enrolled in BadgerCare Plus	182	128	116	112	92
Number of requests for trouble shooting/technical assistance	2,220	2,907	2,323	3,223	3,554
Number of FoodShare Applications and Six Month Renewals	1,157	2,418	1,868	1,520	1,480
Number of new Community Based Organization (CBO) partnerships	10	2	4	8	5
Number of clients enrolled in Family Planning Only Services/ Temporary Employment	297	197	212	114	404
Number of childless adults enrolled in BadgerCare Plus	86	133	227	300	518

PARTNERSHIPS

- Planned Parenthood of Wisconsin
- Meta House
- Black Health Coalition
- Central City Churches
- Milwaukee Islamic Da'Wa Center
- Divine Word
- Project Concern
- SDC Richards
- Northcott Neighborhood Center
- Heart Love Place
- City on a Hill
- Job Corps
- Milwaukee Rescue Mission
- Community Resource Referral Center (CRRC)
- Milwaukee Area Technical College
- Milwaukee Public Schools
- UW Milwaukee
- Women's Care Center
- House of Corrections
- Silver Spring Church Of God



2017 ACTION PLAN

- Complete 4,000 BadgerCare Plus online applications
- Complete 1,500 online renewals and change reports
- Provide 4,000 technical assistances
- Establish at least five new community partnerships



Additional report(s) or publication(s) found in appendix

Cribs for Kids Program

The City of Milwaukee Health Department (MHD) became an official Cribs for Kids program site in 2009. The program provides families in need of a crib education on how to create a safe sleeping environment for their babies along with a free Graco Pack 'n Play (PnP) portable crib. Families are also provided with crib sheets and a sleep sack and are taught how to properly secure the sheets to reduce sleeping hazards.

The Cribs for Kids program receives referrals from a number of MHD programs and community partners to identify families in need of a safe place for their baby to sleep. Additionally, the program provides trainings and presentations for various agencies on infant mortality and safe sleep practices. As a result, these agencies can provide safe sleep education to the families they serve.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2009
2016 Expenses	\$81,123
<i>O&M Expenses</i>	\$49,000
<i>Grant Expenses</i>	\$32,123
2016 Staffing	0.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	0.0 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Safe Sleep/Infant Mortality Donation Initiative Account**	City of Milwaukee	1/1/16/- 12/31/16	\$47,000
<i>**Common Council allocated funding specific to initiative</i>			

PERFORMANCE MEASURES					
Measure	2012	2013	2014	2015	2016
Number of families receiving PnPs	825	837	863	806	809
Number of PnPs purchased from MHD by other agencies to distribute	439	100	175	10	1
Number of infant mortality/safe sleep community trainings/presentations provided by staff	27	4	NA	84	58
NA=Not Available					



PARTNERSHIPS

- Milwaukee Police Department
- Strong Baby Sanctuary Initiative
- Department of Children and Families
- Community agencies serving families



2017 Plans

- Continue to accept referrals, provide education and safe sleep environments
- Train, provide presentations, and recruit additional community

Direct Assistance for Dads Project

The Direct Assistance for Dads (DAD) Project is a long-term home visiting program that engages fathers in intensive, evidence-based home visiting services. The program works to strengthen fathers' involvement in their child(s) and partners' lives, by providing services intended to improve parenting skills, increase awareness of child development, and improve relationships with their partner and children.

DAD Project home visitors partner with fathers to complete individualized, strengths-based care plans, and track progress towards participant-driven goals. Case management services provided include mental health screenings; referrals for mental health consultation, education, employment, financial and legal services; and facilitating access to health services. Home visitors also provide fatherhood coaching and support fathers in co-parenting with the child's mother. The DAD Project adheres to the Parents as Teachers (PAT) evidence-based home visiting model and utilizes the PAT child development and parenting curriculum. In addition, the program employs the 24/7 Dad curriculum, a comprehensive fatherhood curriculum developed by the National Fatherhood Initiative.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2013
2016 Expenses	\$217,969
<i>O&M Expenses</i>	\$5,741
<i>Grant Expenses</i>	\$211,955
2016 Staffing	5.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	5.0 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Direct Assistance for Dads (DAD)	Wisconsin Partnership Program	7/1/13- 4/30/2017	\$354,450
Family Foundations*	State of Wisconsin, Department of Children & Families	10/1/15- 9/30/16	\$1,589,598
Family Foundations*	State of Wisconsin, Department of Children & Families	10/1/16- 9/30/17	\$1,181,026
Healthy Birth Outcomes	United Way of Greater Milwaukee and Waukesha County	7/1/16- 6/30/17	\$35,000
<i>*Grant supports more than one MHD program or initiative</i>			



PARTNERSHIPS

- Aurora Family Services
- Ragir Interpretation
- Center for Urban Population Health
- Aurora Sinai Women's Health Center
- Froedtert
- Probation and parole providers
- Lisbon Avenue Health Center
- MLK Clinic/WIC
- Safe Babies Healthy Families program
- Wraparound program
- St. Joseph Hospital Women's Outpatient Center
- Milwaukee Public Schools

PERFORMANCE MEASURES					
Measure	2012	2013	2014	2015	2016
Home Visits					
Successful face-to-face visits by DAD Project staff	NA	NA	374	764	468
Clients who received visit from Mental Health Consult	NA	NA	0	6	0
NA=Not Available					

Direct Assistance for Dads Project

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Clients					
New clients enrolled	NA	NA	34	38	18
New clients enrolled pre-natally	NA	NA	12	13	4
Clients enrolled in 1st trimester	NA	NA	1	0	1
Clients enrolled in 2nd trimester	NA	NA	2	8	2
Clients enrolled in 3rd trimester	NA	NA	7	5	1
Total clients served this year in DAD Project	NA	NA	33	61	56
Families who left through attrition (did not complete full program)	NA	NA	10	19	20
Families who left program due to program completion and/or goals met.	NA	NA	NA	5	11
Births					
Singletons born	NA	NA	0	9	9
Multiples born	NA	NA	0	0	0
Babies who were born < 37 weeks (singleton only)	NA	NA	0	1	0
Babies who were born <32 weeks (severely premature - singleton only)	NA	NA	0	0	0
Babies who were born < or = to 2500 grams (singleton only)	NA	NA	0	1	0
Babies who were born < 1500 grams (VLBW- singleton only)	NA	NA	0	0	0
Screenings and Services					
Fathers who received Mental Health screening (EPDS and PSS)	NA	NA	44	70	49
Child ASQ screenings completed	NA	NA	2	9	13
Father group meetings held	NA	NA	0	1	2
Referrals					
New referrals received by DAD Project	NA	NA	67	105	57
Community resource referrals given by DAD Project staff to clients	NA	NA	27	124	39
NA = Not Available					



2017 ACTION PLAN

- Increase the caseload of all home visitors to 12-15 families annually and the program serving at least 50 clients
- Implement the essential requirements for the Parents as Teachers evidence-based home visiting model
- Collect data toward program benchmarks set by the Family Foundations Home Visiting grant
- Complete the evaluation report covering the first three years of service



Additional report(s) or publication(s) found in appendix

Empowering Families of Milwaukee

Since 2006, Empowering Families of Milwaukee (EFM) has been one of the City of Milwaukee Health Department's (MHD) premiere home visitation programs. The EFM program is a voluntary, home-based prevention strategy that targets pregnant women and families with young children living in Milwaukee. Public health nurses and public health social workers provide health teaching, education, and support to families in Milwaukee's highest risk neighborhoods beginning prenatally until the child is 3 years old.

EFM's promotes healthy pregnancies, improves birth outcomes, enhances family functioning, supports child health, safety and development, and prevents child abuse and neglect. Since its inception, EMF has provided more than 45,000 home visits to more than 980 families, welcoming more than 800 babies. Of these, 92% have been born full-term and 91% were at healthy birth weights. After the birth of a child, EFM works to promote healthy growth and development and support families in meeting self-identified goals.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2006
2016 Expenses	\$1,730,405
<i>O&M Expenses</i>	\$484,551
<i>Grant Expenses</i>	\$1,245,854
2016 Revenue	\$24,208 (Medicaid)
2016 Staffing	24.8 FTE
<i>O&M FTE</i>	14.8 FTE
<i>Grant FTE</i>	10.0 FTE
<i>Students</i>	6

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Family Foundations*	State of Wisconsin, Department of Children & Families	10/1/15- 9/30/16	\$1,589,598
Family Foundations*	State of Wisconsin, Department of Children & Families	10/1/16- 9/30/17	\$1,181,026
*Grant supports more than one MHD program or initiative			



PARTNERSHIPS

- Acelero Head Start
- Aurora Family Services
- Best Baby Zone
- Bureau of Milwaukee Child Welfare & Community Partners
- Children's Community Health Plan
- Children's Outing Association
- Children's Service Society
- Lindsay Heights Neighborhood Health Alliance
- META House
- Molina Healthcare
- Next Door Foundation
- Planned Parenthood of Wisconsin
- Sojourner Family Peace Center
- St. Elizabeth Ann Seton Dental Clinic
- St. Vincent De Paul Society
- The Parenting Network
- United Healthcare
- WIC Nutrition Programs

Empowering Families of Milwaukee

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Home Visits					
Successful face-to-face visits made by EFM Project staff	5,475	3,710	4,047	3,620	3,743
Unsuccessful (no response) home visits attempted	905	737	596	350	363
Clients					
New referrals received by EFM Project	220	145	179	150	68
New clients enrolled	108	57	68	74	45
New clients enrolled pre-natally	101	52	66	69	42
Clients enrolled in 1st trimester	10	11	13	6	1
Clients enrolled in 2nd trimester	54	20	24	22	20
Clients enrolled in 3rd trimester	37	21	29	41	21
Families currently enrolled in EFM Project	299	267	206	192	159
Families who left through attrition (did not complete full program)	45	76	52	41	34
Families who left program due to program completion and/or goals met	44	53	36	37	22
Births					
Singletons born	114	69	55	75	55
Multiples born	7	3	3	2	1
Babies who were born < 37 weeks (singleton only)	11	5	7	5	1
Babies who were born <32 weeks (severely premature - singleton only)	0	1	1	1	0
Babies who were born < or = to 2500 grams (singleton only)	16	6	5	5	3
Babies who were born < 1500 grams (Very Low and Extremely Low Birth-weights- singleton only)	0	0	0	1	0
Screenings and Services					
Child (0-12 months) ASQ screenings completed	113	85	49	65	50
Edinburgh Postnatal Depression Scales conducted	163	140	142	141	105
% Received Referral if Indicated	65%	62%	54%	52%	73%
% Initiate Breastfeeding	72%	67%	75%	85%	85%



2017 ACTION PLAN

- Increase capacity within the program
- Increase community collaborations
- Meet MIECHV Performance and Systems Outcome Measures



Additional report(s) or publication(s) found in appendix

Fetal Infant Mortality Review

The Fetal Infant Mortality Review (FIMR) is a process that reviews the circumstances of an infant's life and death to find out what could have been done to prevent the death, promote prevention strategies and goals for community action, and reduce the racial disparity in infant deaths. The guidelines and prevention strategies issued by the FIMR Case Review Team are meant to help keep Milwaukee's infants healthy, safe, and alive. FIMR is made possible through the cooperation of Milwaukee area hospitals, health care providers, social service providers and community agencies through a Memorandum of Understanding with the State of Wisconsin.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	1993
2016 Expenses	\$167,601
<i>O&M Expenses</i>	\$167,601
<i>Grant Expenses</i>	\$0.00
2016 Staffing	2.0 FTE
<i>O&M FTE</i>	2.0 FTE
<i>Grant FTE</i>	0.0 FTE



Additional report(s) or publication(s) found in appendix

PERFORMANCE MEASURES					
Measure	2012	2013	2014	2015	2016
Number of infant deaths	95	116	84	95	88*
Infant Mortality Rate	9.5	11.6	8.4	9.7	9.1*
Number of stillbirths	76	56	58	72	53*
Black / White disparity ratio – infant deaths	2.5	3.1	3.6	3.2	1.9*
Black / White disparity ratio - stillbirths	4.9	3.3	11.3	3.9	1.5*
Black / Hispanic disparity ratio -infant deaths	4.1	4.1	2.9	2.5	5.5*
Black / Hispanic disparity ratio -stillbirths	3.6	7.8	9.3	3.9	1*
* Preliminary data					



2017 ACTION PLANS

- Publish 2012-2015 FIMR Status Report
- Conduct ongoing abstraction and narratives on all Milwaukee infant deaths and stillbirths
- Increase number of maternal interviews done by public health nurses
- Continue multidisciplinary case reviews
- Continue collaboration with the Zilber School of Public Health



PARTNERSHIPS

- Aurora Healthcare
- Black Health Coalition of WI
- Children's Health Alliance
- Center for Urban Population Health
- Children's Community Health Plan (CCHP)
- Children's Hospital of Wisconsin
- Columbia-St. Mary's Hospital, Milwaukee and Ozaukee
- Community Memorial Hospital, Menomonee Falls
- Department of Health Services, State of Wisconsin
- Froedtert and the Medical College of Wisconsin
- Independent Care Health Plan (I-Care)
- Milwaukee Health Services
- Milwaukee County Medical Examiner
- Milwaukee County Health Departments (including Cudahy, Franklin, Greendale, Greenfield, Hales Corners, North Shore, Oak Creek, St. Francis, South Milwaukee)
- Pro-Care Medical Group
- Progressive Community Health Centers
- Sixteenth Street Community Health Centers
- Sojourner Family Peace Center of Milwaukee
- The United Way of Greater Milwaukee and Waukesha County
- United Healthcare/Optum Healthcare
- University of Wisconsin – Milwaukee
- Waukesha Memorial Hospital
- Wheaton Franciscan Healthcare
- Wisconsin Associate for Perinatal Care
- Zilber School of Public Health

Men's Health Program

The City of Milwaukee Health Department's (MHD) Men's Health Program offers preventive health education, noninvasive health screenings, and medical or social service referrals to Milwaukee males age 14 and over at the MHD's three health center locations. The program focuses on prevention education related to hypertension and stroke, blood pressure screenings and follow-up enrollments with partner agencies; child development screening training for providers; colorectal cancer curriculum development and training for peer educators; reproductive health education and enrollment into Family Planning Only Services; smoking cessation education; health engagement information and practices for fathers; retinopathy screening, education, and referral; breastfeeding support information for new and expectant fathers; behavior health screenings with referrals for mental health and substance abuse; and community health outreach to low-income and uninsured males.

The program is the lead agency for the citywide Men's Health Referral Network and program representatives chair committees with the Black Male Achievement Advisory Committee, Milwaukee Fatherhood Initiative, and My Brother's Keeper Initiative.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2010
2016 Expenses	\$277,859
<i>O&M Expenses</i>	\$207,020
<i>Grant Expenses</i>	\$70,839
2016 Staffing	4.0 FTE
<i>O&M FTE</i>	3.0 FTE
<i>Grant FTE</i>	1.0 FTE
<i>Students</i>	6

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Maternal Child Health Grant*	State of Wisconsin	1/1/16- 12/31/16	\$553,855
Colorectal Cancer Education for African American Men	Medical College of Wisconsin	1/1/2017-7/1/2018	\$50,000
Smoke Free Homes for Healthy Babies	State of Wisconsin	7/1/2016- 7/1/2017	\$10,000
*Grant supports more than one MHD program or initiative			

PARTNERSHIPS

- American Heart Association
- American Cancer Society
- American Lung Association
- Diverse and Resilient
- Children's Hospital Systems
- Helen Bader School of Social Welfare
- The Parenting Network
- UMOs
- Wisconsin Tobacco Prevention Networks
- Mental Health America
- Wisconsin Donor Network
- Milwaukee Rescue Mission
- ResCare
- YWCA
- Froedtert Health and the Medical College of Wisconsin
- UWM School of Informatics
- Marquette University
- MATC
- Wisconsin Lutheran School of Nursing
- Black Health Coalition
- My Father's House Inc.
- Milwaukee Health Services
- Big Brothers Big Sisters
- Community Advocates
- Urban Underground
- Running Rebels
- Ascension Health
- Next Door Foundation
- Social Development Commission
- Milwaukee Fatherhood Initiative
- Milwaukee Public Schools
- African American Breastfeeding Network
- Milwaukee Black Child Development Institute
- Milwaukee Men's Health Referral Network
- St. Ann's
- YMCA of Metro Milwaukee
- Milwaukee LIHF



Men's Health Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Participants					
Number of males who utilized Men's Health Centers	456	512	570	601	231
Number of clients who have children 5 years and younger	NA	113	201	349	82
Number of Family Planning Waivers Enrollments	68	32	41	104	35
Assessments & Screenings					
Complete risk assessments	392	328	412	434	214
Depression screenings done for adolescent males	5	14	8	5	3
Blood pressure screenings	NA	NA	NA	87	112
Service providers who commit to using valid screening tools	6	20	25	25	12
Referrals					
Males who received referrals to partner agencies	353	298	368	434	124
Referrals based on blood pressure screenings	NA	NA	NA	23	24
Education & Events					
Number of meetings or events	51	60	63	68	32
Participants in Men's Health Education Sessions	405	719	788	917	340
Infant Mortality Classes taught to fatherhood programs	2	15	16	19	9
Child development trainings/ meetings	10	17	18	18	5
Participants in Child Development Education Sessions	31	67	72	86	43
NA=Not Available					

2017 ACTION PLAN

- Design and deliver male center education curriculum for colorectal cancer prevention
- Reduce risk factors for heart disease in Milwaukee youth, teen males, and beyond
- Increase the amount of men's health information provided to individuals, agencies, and the public
- Increase cultural and language competence in service delivery and in referrals to men's health services
- Develop community integration and acceptance of a male standard of health via an increase in education and training among community and providers



**Additional report(s)
or publication(s)
found in appendix**

Milwaukee Breast and Cervical Cancer Awareness Program

The City of Milwaukee Health Department Milwaukee Breast and Cervical Cancer Awareness Program (MBCCAP) is the local coordinator/provider for the Wisconsin Well Woman Program (WWWP), which provide breast and cervical cancer screenings to eligible women, as well as the WISEWOMAN program, which provides cardiovascular risk reduction screenings to women.

Targeting Milwaukee women ages 35 to 64 who meet income guidelines, the program assists women in accessing breast and cervical cancer screenings either at the city's Southside Health Center or at local partner providers. In 2016, the program's objective to provide 750 screenings was exceeded by providing a total of 1,399 screenings. Additionally, case management services were provided to 750 women enrolled at area hospitals for diagnostic services. MBCCAP enrolled 61 women into Well Woman Medicaid for treatment. A total of 2,200 women were enrolled into the program for the city.



PARTNERSHIPS

- Milwaukee Consortium for Hmong Health (MCHH)
- Milwaukee Health Services, Inc.
- Family Planning Health Services, Inc.
- Muslim Community Health Center (MCHC)
- Sixteenth Street Community Health Center
- Outreach Health Center
- Progressive Health Center
- Area free clinics
- Susan G. Komen
- Ascension Columbia St. Mary's
- Nurses Affecting a Change
- University of Wisconsin Community Nursing Centers



2017 ACTION PLAN

- Provide 900 breast and cervical cancer screenings and 230 WISEWOMAN screenings
- Increase awareness of programs and services through marketing, attendance at a minimum of 20 community events, and partnerships
- Add additional screening opportunities with community partners

PROGRAM OPERATIONS

Division	Family and Community Health
Established	1990 (Breast Cancer); 1994 became a Well Woman provider and added cervical cancer screening; 2009 – WISEWOMAN added
2016 Expenses	\$888,906
<i>O&M Expenses</i>	\$973
<i>Grant Expenses</i>	\$887,933
2016 Staffing	6.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	6.0 FTE
<i>Students</i>	7

GRANTS

2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Breast Cancer	Greater Milwaukee Foundation	1/1/13- 12/31/18	\$104,778.89
Wisconsin Well Women – 4 sub grants	Wisconsin Department of Health Services	7/1/16- 6/30/17	\$840,200

PERFORMANCE MEASURES

Measure	2012	2013	2014	2015	2016
State appointed objective	1,116	1,060	1,060	750	750
Unduplicated Milwaukee residents ages 35-64 years screened for breast and cervical cancer	1,689	1,587	1,043	789	796
Breast screenings – in-house	963	1,053	640	507	521
Breast screenings – provider	498	351	276	165	258
TOTAL number of breast cancer screenings	1,461	1,404	916	672	779
Cervical screenings - in-house	570	614	298	69	173
Cervical screenings – provider	129	35	38	1	2
TOTAL number of cervical cancer screenings	699	649	336	70	175
Case management encounters	7,828	15,936	11,648	4,918	6,721
WISEWOMAN clients enrolled	405	302	0	17	166
Community events	18	16	25	24	29

Newborn Screening

The Newborn Screening programs identify conditions in newborns that can affect their health and development, conducting screenings for hearing loss as well as blood screening for 44 different genetic, endocrine, and metabolic disorders. Working to reach out to families with newborns who were born in the home, left the hospital without a screening, need follow-up screenings, or who do not follow-up with a primary care physician, the programs work to conduct new or confirmatory testing, provide case management services, and make referrals to appropriate early intervention and medical programs.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	Newborn Screening Program- 1993; Newborn Hearing Program-2010
2016 Expenses	\$232,030
<i>O&M Expenses</i>	\$15,099
<i>Grant Expenses</i>	\$216,931
2016 Staffing	2.4 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	2.4 FTE
<i>Students</i>	6 nursing students, 1 medical student each month, and 4 resident students

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Congenital Disorders*	Wisconsin Department of Health Services	7/1/15- 6/30/16	\$142,026
Congenital Disorders*	Wisconsin Department of Health Services	7/1/16- 6/30/17	\$142,026
Newborn Hearing Screening Grant	Wisconsin Department of Health Services	4/1/16- 3/30/17	\$59,333

*Grant supports more than one MHD program or initiative

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Newborn Hearing Screenings					
Number of referrals	63	86	128	70	117
Number of screenings attempted	272	367	548	524	68*
Babies actually screened	39	62	68	34	49
Babies referred on screening	6	7	8	11	7
Babies with confirmed hearing loss	3	2	4	3	5
Newborn Screenings					
Number of referrals	47	98	90	65	68
Number of infants identified with sickling disorder	22	20	27	19	19
Number of infants identified with cystic fibrosis	3	4	4	4	2

* Changed to average number of babies case managed/month



PARTNERSHIPS

- Wisconsin State Lab of Hygiene
- Children's Hospital of Wisconsin
- Wisconsin Sound Beginnings
- Birth to Three



2017 ACTION PLAN

- Meet grant objectives of the grants will continue to be met.
- Conduct program evaluation and identify quality improvement projects
- Improve self-care to reduce stress and compassion fatigue within jobs

Nurse Family Partnership Program

Nurse-Family Partnership (NFP) helps transform the lives of vulnerable first-time moms and their babies. Through ongoing home visits from registered nurses, low-income, first-time moms that live in the city of Milwaukee receive the care and support they need to have a healthy pregnancy, provide responsible and competent care for their children, and become more economically self-sufficient. From pregnancy until the child turns 2 years old, NFP Nurse Home Visitors form a trusting relationship with the first-time moms, working to improve pregnancy outcomes, improve child health and development, and improve economic self-sufficiency of families.

The Nurse-Family Partnership model is based on rigorous evidence of effectiveness from randomized, controlled trials. As an evidence-based community health program, Nurse-Family Partnership's outcomes include long-term family improvements toward breaking the cycle of poverty, building stronger communities, and leaving a positive impact on this and future generations.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2007
2016 Expenses	\$720,411
<i>O&M Expenses</i>	\$304,086
<i>Grant Expenses</i>	\$416,325
2016 Staffing	9.0 FTE
<i>O&M FTE</i>	3.0 FTE
<i>Grant FTE</i>	6.0 FTE
<i>Students</i>	9

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Congenital Disorders*	Wisconsin Department of Health Services	7/1/15- 6/30/16	\$142,026
Congenital Disorders*	Wisconsin Department of Health Services	7/1/16- 6/30/17	\$142,026
Maternal Child Health Grant*	State of Wisconsin	1/1/16- 12/31/16	\$553,855

*Grant supports more than one MHD program or initiative

PARTNERSHIPS

- Aurora Family Services
- Ragir Interpretation
- Aurora Sinai Women's Health Center
- Froedtert
- City of Milwaukee Health Department programs
- Juvenile probation providers
- Lisbon Avenue Health Center
- Managed Health Services
- MLK Clinic/WIC
- Local obstetric care providers
- Safe Babies Healthy Families program
- Shafi Medical Center
- St. Vincent de Paul Society
- Seeds of Health WIC
- Sixteenth Street Community Health Center WIC
- Wraparound program
- Waukesha Health Department
- West Allis Health Department
- St. Joseph Hospital Women's Outpatient Center
- Wee Care WIC



Nurse Family Partnership

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Home Visits					
Successful face-to-face visits completed by NFP staff	1,298	1,812	1,624	1,135	1,005
Unsuccessful (no response) home visits attempted	359	369	266	110	366
# of new referrals received by NFP	133	185	164	133	96
Clients					
New clients enrolled in current month	66	94	61	58	26
New clients enrolled in first trimester	35	50	28	17	1
Percent of clients enrolled that month who enrolled in first trimester	53%	53%	46%	29%	4%
Number of new clients enrolled in second trimester	33	44	33	41	24
Percent of clients enrolled that month who enrolled in second trimester	50%	47%	54%	67%	92%
Number of families previously closed who reactivate or transfer	4	5	5	3	3
Number of families who left through attrition (in current month)	78	47	94	45	32
Number of families who left through completion	5	14	11	20	5
Number of families currently enrolled (cumulative)	70	100	69	59	56
Babies					
Number born (includes first and second babies)-singleton	44	65	61	37	33
Number born in current month (includes first and second babies)-multiples	0	4	4	2	0
Number born < 37 weeks (singleton only)	2	8	7	6	2
Number of babies born < 32 weeks (very premature) (singleton only)	0	2	0	0	0
Number born < 2500 grams (singleton only)	6	10	9	3	2
Number born < 1500 grams (singleton only)	0	2	0	0	0
Clients initiate breast-feeding (cumulative since inception)	69.6%	68.8%	71%	71%	71%

Nurse Family Partnership Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Screening and Services					
Child ASQ Screens first birthday	Data not available	Data not available	45	45	52
Edinburgh Postnatal Depression Scale Screens	102	161	149	95	82
Mental Health Consult Visits	Data not available	Data not available	5	27	2
Billing					
Amount billed for PNCC/CCC Services	\$54,140.92	\$56,056.48	\$27,976.92	\$31,690.41	\$36,771.39

In Action: Helping New Families With New Beginnings

Each client has her own needs, challenges, and successes. For one MHD Home Visitor, a client's perseverance in 2016 stood out. The client was living with family, in debt and without health insurance, had lost her job and quit school. Once she enrolled in the program, the client and her home visitor got right to work, accessing health insurance, finding the right doctor for her, and meeting the client's health goals. But along the way, the client received help finding employment opportunities, building a personal budget and paying down her debts. Soon, the client met her goal of stable housing by moving into her own apartment, maintaining employment for over a year, and putting payment plans in place for other debt. Now, she and her partner are saving for their next goal: a home of their own!

2017 ACTION PLAN

- Increase staffing and retention
- Increase caseloads by setting caseload goals and improving client retention and engagement
- Finalize partnership with Columbia College of Nursing



Plain Talk/Prep Talk for Youth Program

Plain Talk is a community-based initiative designed to assist parents and other influential adults in developing the skills to communicate effectively with youth and children about abstinence, healthy relationships, and sexuality.

Prep Talk for Youth provides teen pregnancy prevention education and skills training and is also a link for youth to services available through Wisconsin Family Planning Only Services Program. The program also works with the Milwaukee Public Schools National Academy Foundation Program to promote career opportunities in public health and positive youth development. Upon completion of the training, youth may become “Ambassadors” for Prep Talk for Youth, working in the community as volunteers conducting outreach and education at health fairs and other venues.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	Plain Talk est. 2006, Prep Talk for Youth est. 2010
2016 Expenses	\$89,203
<i>O&M Expenses</i>	\$49,987
<i>Grant Expenses</i>	\$39,216
2016 Staffing	1.0 FTE
<i>O&M FTE</i>	0.5 FTE
<i>Grant FTE</i>	0.5 FTE

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Plain Talk- Prep for Youth	Medical College of Wisconsin	10/1/15- 9/30/16	\$47,000



PARTNERSHIPS

- Over the past five years, Plain Talk has maintained relationships with between 15 and 30 agencies and institutions to provide cutting edge and evidenced-based programs and services to Milwaukee families



2017 ACTION PLAN

- Adapt program based on current funding
- Focus on collaboration with partners
- Include positive youth development to fight unintended, non-marital pregnancies and STIs
- Further develop opportunities for teen and young adult volunteers, interns to experience urban public health work

Plain Talk/Prep Talk for Youth

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Family Planning Only Services (FPOS)					
Number of FPOS Brochures distributed to youth by youth	919	448	355	326	611
Number of FPOS Brochure distributed to MPS High School Students	20,000	20,000	20,000	20,000	7,000
Number of 414ALL Condom Kits	NA	NA	NA	NA	200
Households Reached					
Number of Plain Talk Events	82	101	57	63	8/9/16
Number of Community Events	749	148	115	MATC	34 providers reached
Number of Social Media connections	NA	NA	NA	NA	119
MPS letter to Parents receiving Human growth and Development offering Plain Talk	Unknown	Unknown	Unknown	Unknown	Unknown
Reproductive Health Education					
Number of youth engaged	188	67	69	79	129
Number of volunteers and unpaid interns	20	4	6	27	16
Number of Hours of Volunteer Service	1,219	333	230	214	374
Number of Community Adults and Parents engaged	89	8	11	2	0
Number of Interns/ Providers receiving advanced training	18	3	2	5	6
Number of instances for consultation or training for providers	69	1	1	2	1
Number of Youth offered Follow-up survey	NA	NA	NA	NA	203
Community Partnerships					
Number of Community Partnerships	30	24	17	30	23
NA = Not Available					

Parents Nurturing and Caring for Their Children

The City of Milwaukee Health Department (MHD) Parents Nurturing and Caring for their Children (PNCC) program is a home visiting program aimed at helping pregnant women and their families access medical, social, educational and other services to promote a healthy pregnancy. PNCC services are voluntary during pregnancy and for the first 60 days following delivery. Services include outreach, assessment, care plan development, ongoing care coordination and health education and nutritional counseling.

The PNCC program also serves as the primary resource for health information and service referrals for the thousands of community residents, hospitals and clinics, social workers, physicians, schools, community organizations, and others who call the MHD's general intake line each year.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	PNCC-2009
2016 Expenses	\$275,492
<i>O&M Expenses</i>	\$275,492
<i>Grant Expenses</i>	\$0.00
2016 Staffing	4.0 FTE
<i>O&M FTE</i>	4.0 FTE
<i>Grant FTE</i>	0.0 FTE
<i>Students</i>	6 nursing students, 1 medical student each month, and 4 resident students

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Home Visits					
Successful face-to-face visits	512	469	402	442	699
Clients					
New clients enrolled	48	31	55	19	58
Enrolled in 1st trimester	15	3	6	1	1
Enrolled in 2nd trimester	21	11	21	9	16
Enrolled in 3rd trimester	12	17	28	9	41
Program completed	35	30	21	21	33
Births					
Singletons born	49	40	35	34	49
Multiples born	4	2	0	0	0
Babies born < 37 weeks (singleton only)	2	2	1	1	3
Babies born < 32 weeks (singleton only)	0	0	1	0	0
Babies born < or = to 2500 grams (singleton only)	1	5	1	1	4
Babies born < 1500 grams (singleton only)	0	0	1	0	0
Women who initiate breastfeeding (rate in %)	40 (82%)	25 (63%)	27 (77%)	26 (76%)	39 (80%)
Referrals					
New referrals received	110	62	99	49	106
Information Calls					
Number of calls	3,654	3,643	3,204	2,550	2,548



PARTNERSHIPS

- Aurora Family Services
- Randomized Control Trial (RCT) for the Healthy Families Study
- Ragir Interpretation
- Aurora Sinai Women's Health Center
- Froedtert
- City of Milwaukee Health Department programs
- Juvenile probation providers
- Lisbon Avenue Health Center
- Managed Health Services
- MLK Clinic/WIC
- Local obstetric care providers
- Safe Babies Healthy Families program
- Shafi Medical Center
- St. Vincent de Paul Society
- Seeds of Health WIC
- 16th Street Community Health Center WIC
- Wraparound program
- Waukesha Health Department
- West Allis Health Department
- St. Joseph Hospital Women's Outpatient Center
- Wee Care WIC



2017 ACTION PLAN

- Conduct program evaluation and identify quality improvement projects
- Improve employee self-care to reduce stress and compassion fatigue within their jobs

Strong Baby Sanctuary Initiative

The Strong Baby Sanctuary Initiative is a partnership between the City of Milwaukee Health Department, Ascension-Columbia St. Mary's Urban Church Wellness Program, the March of Dimes, and the Lifecourse Initiative for Healthy Families (LIHF) at United Way of Greater Milwaukee & Waukesha County.

The initiative assists churches and faith communities in becoming safe places for pregnant women, new mothers, fathers, and families to get health-related support and information. Churches who become Strong Baby administer short assessments on families and provide families with referrals to community resources to meet their individual needs. By connecting families to these programs, the initiative strives to reduce stress, support wellness, and reduce the number of babies who are born premature or low birthweight, or who sleep in unsafe sleeping environments. Currently, there are 23 churches who are members of the Strong Baby Sanctuary initiative.

In 2016, the Strong Baby Sanctuary Initiative began offering all members the opportunity for their church to become a Blanket of Love program, a prenatal and parenting education program for women, their spouse or friend, and family members. Pregnant women receive childbirth education to help them understand prenatal care, labor and delivery processes, and strategies for improved health of the mother and for the baby. Additionally, the program supports parents in understanding their new babies, by providing education and information on developmental stages, nutrition tips, infant care techniques and to address any concerns young parents might have. Currently, there are 12 Strong Baby Sanctuary churches who are also Blanket of Love programs, with more expected to join throughout the year. Each Blanket of Love church will be assigned an MHD Public Health Nurse (PHN) consultant to assist them in providing education and support to families.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	2015
2016 Expenses	\$0.00
<i>O&M Expenses</i>	\$0.00
<i>Grant Expenses</i>	\$0.00
2016 Staffing	0.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	0.0 FTE



PARTNERSHIPS

- Ascension Columbia St. Mary's Urban Church Wellness Initiative
- March of Dimes
- Milwaukee Lifecourse Initiative for Healthy Families
- University of Wisconsin – Milwaukee Maternal and Child Health Pipeline Training Program



2017 ACTION PLAN

- Support training of new churches on how to conduct a needs assessment and refer families to needed resources in the community
- Assign MHD Public Health Nurses (PHNs) to each Blanket of Love church and conduct training on educational group facilitation
- Facilitate monthly educational groups with families.
- Recruit additional churches to join the Blanket of Love program

Vital Records

Vital records are records of life events kept under governmental authority, including birth and death certificates. In Wisconsin, each county seat is authorized as an agent of the State of Wisconsin Vital Records unit. In Milwaukee, there is an additional site housed in the City of Milwaukee Health Department. Vital Records operations are governed by Chapter 69 of Wisconsin State Statute.

The MHD Vital Records houses birth records dating back to 1893 and deaths back to 1869, providing both certified and uncertified copies of birth and death certificates while adhering to appropriate regulations and charging fees for services. On average, the office takes 550 phone calls each month from customers.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	1893
2016 Expenses	\$98,330
<i>O&M Expenses</i>	\$98,330
<i>Grant Expenses</i>	\$0.00
2016 Staffing	3.0 FTE
<i>O&M FTE</i>	3.0 FTE
<i>Grant FTE</i>	0.0 FTE

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Income					
Total gross income, cash receipts and billing	\$284,527	\$324,926	\$314,813	\$325,172	\$337,948
Certification and Filing Activities					
Births Registered	9,932	10,052	9,980	9,832	9,700
Deaths Registered	4,075	4,194	4,120	4,279	4,310
Customer Service Activities					
Birth certificates cash sales	7,096	8,710	9,170	9,970	11,222
Death certificates cash sales	5,857	6,014	3,952	3,457	3,417
Death certificates via billing to funeral directors	27,430	29,740	20,116	30,181	29,527
Total birth and death records sold	40,383	44,464	43,238	43,608	44,166
Other Activities					
FBI investigations	6	4	18	11	5
Burial letters	13	9	22	21	17
Department of Neighborhood Services	54	56	27	52	NA
Verifications for military	3	5	5	3	8
NA = Not Available					



PARTNERSHIPS

- Area funeral homes



2017 ACTION PLAN

- Expand availability through new statewide availability of all birth and death records in Wisconsin

Women, Infants, and Children Nutrition Program

The City of Milwaukee Health Department (MHD) Women, Infants, and Children (WIC) program promotes and maintains the health and well-being of nutritionally at-risk pregnant, breast-feeding, and postpartum women, infants, and children up to age 5. The four main goals of the program are to provide nutrition education, breastfeeding education & support, supplemental nutritious foods, and community referrals to clients.

In addition to prescribing specifically tailored monthly food packages to participants, an added seasonal benefit is the Farmer's Market Nutrition Program (FMNP), which provides \$20 in vouchers to spend at local farmer's markets. The MHD WIC Program also seeks to coordinate additional services that parallel other public health priorities, such as educating families on healthy birth spacing and providing blood lead testing to children.

The MHD WIC program aims to serve at least 97% of its monthly contracted caseload of approximately 7,483 participants. Geographically, the MHD WIC program operates at all three health department locations targeting participants in the central, northwest, and southern urban areas of Milwaukee.

PROGRAM OPERATIONS	
Division	Family and Community Health
Established	1981
2016 Expenses	\$1,533,726
<i>O&M Expenses</i>	\$3,228
<i>Grant Expenses</i>	\$1,530,498
2016 Staffing	23.0 FTE
<i>O&M FTE</i>	0.0 FTE
<i>Grant FTE</i>	23.0 FTE
<i>Students</i>	3 longer term students (6-12 weeks) plus 10+ nursing & medical students for half-day terms

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
WIC Operations	State of Wisconsin, USDA	1/1/16- 12/31/16	\$1,526,321
WIC Farmers Market	State of Wisconsin, USDA	1/1/16- 12/31/16	\$6,237
WIC Special Project (Creative Marketing promotion)	State of Wisconsin, USDA	1/1/16- 12/31/16	\$28,000
WIC-FIT Families Grant	State of Wisconsin, SNAP-Ed	10/1/15- 9/30/16	\$28,249
WIC-FIT Families Grant	State of Wisconsin, SNAP-Ed	10/1/16- 9/30/17	\$28,814

In Action: Understanding Client Needs Across Cultures

Within the past few years, Milwaukee has seen an increase in the number of refugees emigrating from southeastern Asia. Many of these families speak languages like Karen, Burmese, or Rohingya, and arrive with low levels of literacy, which can limit access to care, services, and benefits. The MHD WIC program has adopted motivational interviewing techniques and is training staff on these specific cultures in order to be a safe, trusted first point of care for these families.

Women, Infants, and Children Nutrition Program

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
# Participants served in WIC/ Duplicated	94,747	92,549	90,528	89,093	85,375
# of Infants served in WIC/ Duplicated	22,567	22,702	22,722	41,180	23,121
# formula fed infants in WIC/ Duplicated	19,346	19,319	19,593	20,691	20,403
#BF Infants in WIC/ Duplicated	3,237	3,287	3,135	2,920	2,624
# of Pregnant women in WIC/ Duplicated	8,726	8,804	8,362	7,716	7,100
# of Pregnant women in WIC who smoke, unduplicated	206	208	155	159	146
# of Infants exposed to second hand smoke, unduplicated	131	220	93	120	89
# of 3 and 4 year olds in WIC/duplicated	23,230	21,912	34,482	No longer focus of State/not tracking	No longer focus of State/ not tracking
Breastfeeding Incidence =% of breastfeeding infants served of moms on WIC prenatally unduplicated	65.78%	64.48%	64.28%	62.53%	59.0%
Breastfeeding duration at 3 months =% of Ever BF Infants at 3 months(available quarterly) unduplicated	48.70%	47.40%	49.08%	58.55%	54.63%
Breastfeeding duration at 6 months =% of Ever BF Infants at 6 months unduplicated	Did not track at this time	35%	34.3%	31.53%	46.3%
Breastfeeding duration at 6 months =% of Ever BF African American Infants at 6 months unduplicated	Did not track at this time	10.2%	11.4%	10.68%	14.18%
Early Intervention Developmental Profile Screening	1,863	2,026	1,767	2,081	2,179
# of Fit Families served in WIC, unduplicated (may include duplicates)	Data not available	184	191	115	123

BF=Breastfed



PARTNERSHIPS

- Fondy Farmer's Market
- Mount Mary University
- MATC
- Pete's Fruit Market
- UW Population Health Institute
- Wisconsin AHEC



2017 ACTION PLAN

- Further collaboration with the Home Visiting Programs to implement mom and baby support groups
- Conduct focus groups for Karen-speaking (Burmese) refugees to improve culturally relevant services
- Provide staff training to more effectively assess and provide referrals for women with drug use, abuse, and/or smoking cessation
- Expand outreach activities to improve participation rates
- Educate families on lead poisoning prevention



Additional report(s) or publication(s) found in appendix



The Office of Violence Prevention

The core mission of the Office of Violence Prevention is to reduce violence in the city of Milwaukee and provide strategic direction and oversight for community efforts to reduce the risk of violence by linking strategies, establishing and furthering partnerships, and supporting initiatives and outreach efforts.

Violence Prevention Oversight & Initiatives

Community-wide prevention is the most effective, long-term solution to violence, and the City of Milwaukee Health Department (MHD) Office of Violence Prevention (OVP) engages a wide range of partners to facilitate a multidisciplinary, population-level approach to influence the social, behavioral, and environmental factors that contribute to violence.

OVP brings together agencies, experts, and community resources on efforts that reduce domestic and intimate partner violence, sexual assault, child abuse, human trafficking, community violence, gun violence, interpersonal violence, intentional injury, homicide, and children as witnesses to violence. Current initiatives include:

Trauma Response Initiative: The Trauma Response Initiative identifies youth who may have witnessed or experienced a potentially traumatic event such as a serious accident, shooting, or domestic violence. The goal is to provide immediate support and counseling to children and youth exposed to violence in order to break the cycle that violence produces.

Neighborhood-Based Violence Interruption: The Safe Zones Initiative in the Garden Homes and Franklin Heights neighborhoods July-December involves training ambassadors in conflict prevention, intervention and de-escalation and executes their efforts in targeted hot-spots in each neighborhood.

Commission on Domestic Violence and Sexual Assault: Created by the City of Milwaukee Common Council in 1979, the Commission on Domestic Violence and Sexual Assault is a multi-disciplinary team of community and agency leaders committed to increasing safety for victims and survivors of domestic violence and sexual assault and to hold perpetrators accountable.

Gun Safety: In an effort to address accidental shootings among children and illegal fire arm purchases, a guide was produced to promote safe storage of firearms. The guide also aims to educate the community on state laws governing legal fire arm purchase and use.

RECAST Milwaukee: RECAST Milwaukee, funded through the Substance Abuse and Mental Health Services Administration, will assist high-risk youth and families and promote resilience and equity through the implementation of evidence-based violence prevention and community youth engagement programs.

Homicide and Non-Fatal Injury Reviews: Since 2005, the Homicide Review Commission has produced an annual report on homicides and non-fatal shootings in Milwaukee and criminal justice and community reviews of critical incidents resulting in recommendations for violence prevention. The Office of Violence Prevention will continue a public health analysis of homicides, shootings, and aggravated assaults in Milwaukee.

Youth Violence and Operating Without Owners Consent Reduction: With continued troubling rate of armed robbery and operating without owners consent offenses, the Office of Violence Prevention convenes partners across the prevention, intervention, and enforcement spectrum to identify and advance strategies to deter first time and repeat offenses among juveniles.

Comprehensive Violence Prevention Plan: The goal of the planning process is to develop an action plan to reduce incidence of interpersonal and structural violence through the development, implementation, evaluation, and sustainability of strategies that promote community safety and resilience. The planning process will result in a vision for violence prevention and community safety for Milwaukee, an action plan that draws on community assets and best practices, and increased readiness for collaborative action by multiple sectors.

Violence Prevention Oversight & Initiatives

PROGRAM OPERATIONS	
Division	Administration
Established	2008
2016 Expenses	\$985,947
<i>O&M Expenses</i>	\$570,252
<i>Grant Expenses</i>	\$415,695
2016 Staffing	6.0 FTE
<i>O&M FTE</i>	4.3 FTE
<i>Grant FTE</i>	1.7 FTE
<i>Students</i>	1

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Community Safety Data Hub Grant	Greater Milwaukee Foundation	1/1/14- 12/31/14 and 12/31/15- 7/30/16	\$125,000
Community Safety Repository	Wi Partnership Program	7/1/13- 6/30/16	\$400,000
Homicide Review	U.S. Department of Justice, Office of Community Oriented Policing Services	9/1/13- 2/28/17	\$241,027
Justice for Families	U.S. Department of Justice, Office on Violence Against Women	10/1/16- 9/30/19	\$600,000
RECAST Milwaukee Project	Substance Abuse and Mental Health Services Administration	9/30/16- 9/27/17	\$1,000,000
Safe Havens Supervised Visitation and Exchange Program	U.S. Department of Justice, Office on Violence Against Women	10/1/12- 1/31/17	\$399,995
Safe Zone Initiative	Milwaukee County, Department of Health and Human Services	8/1/16- 7/31/17	\$37,500
Tides Foundation Grant	Center for Youth Engagement	10/1/16- 8/31/17	\$180,000
Victims and Suspects of Fire-arm Violence	Joyce Foundation	9/1/14- 12/31/16	\$190,000

Violence Prevention Oversight & Initiatives



PARTNERSHIPS

- Office of Mayor Tom Barrett
- Milwaukee Common Council
- Milwaukee County
- Pathfinders of Greater Milwaukee
- Bader Philanthropies
- Running Rebels
- Employ Milwaukee
- Milwaukee Public Schools
- Healthier Wisconsin Endowment
- Medical College of Wisconsin
- Milwaukee Police Department
- Greater Milwaukee Foundation
- Sojourner Family Peace Center
- Southside Organizing Committee
- Spanish Center of Milwaukee
- MICAH
- NAACP Milwaukee
- Safe and Sound
- United Neighborhood Centers of Milwaukee
- Local Initiatives Support Corporation
- Milwaukee Health Care Partnership
- Greater Milwaukee Committee
- Children's Hospital of Wisconsin
- United Way of Greater Milwaukee and Waukesha County
- Wraparound Milwaukee's Mobile Urgent Treatment Team
- Uniting Garden Homes
- Milwaukee County District Attorney's Office
- Wisconsin Department of Corrections
- Wisconsin State Legislature
- The Judiciary System
- Bureau of Milwaukee Child Welfare
- Domestic violence service providers
- Sexual assault service providers
- Faith community
- Precious Lives
- University of Wisconsin-Milwaukee
- Community Advocates Public Policy Institute
- I Will Not Die Young
- The Parenting Network
- My Sister's KeepHer

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Community-wide Violence Prevention Plan					
# of individuals and organizations who participated in action planning activities	NA	NA	NA	NA	1,000+
# of steering committee meetings	NA	NA	NA	NA	1
# of community engagement events	NA	NA	NA	NA	3
Plan released	NA	NA	NA	NA	In Progress
Trauma Response Initiative					
# of referrals received	NA	NA	NA	NA	223
# of families engaged	NA	NA	NA	NA	179
Neighborhood-Based Violence Interruption					
# of neighborhoods participating in violence interruption	NA	NA	NA	NA	2
# of ambassadors trained to interrupt violence	NA	NA	NA	NA	12
Commission on Domestic Violence and Sexual Assault					
# of agencies and organizations engaged	57	58	56	59	60
# of regularly scheduled Commission meetings	12	12	12	12	12
Completed training for current officers/recruits of MPD	Yes	Yes	Yes	Yes	Yes
Conducted policy review to improve response to victims	Yes	Yes	Yes	Yes	Yes
Monitored and promoted legislation	Yes	Yes	Yes	Yes	Yes
# of community engagement efforts/events	26	21	23	24	25
Safe Exchange					
Presence and operation of a safe exchange	NA	NA	Yes	Yes	Yes
# of families served	NA	NA	19	59	53
# of times supervised exchange services provided	NA	NA	28	260	713
# of times one-to-one supervision services provided	NA	NA	68	404	524
Gun Safety					
Gun Safety guide developed to promote safe storage of firearms	NA	NA	NA	NA	Completed

Violence Prevention Oversight & Initiatives



2017 ACTION PLAN

- Develop and launch the community-wide violence prevention plan
- Develop and convene a formal commission for implementation and ongoing engagement of partners
- Identify priority neighborhoods and targeted, evidence-based strategies for violence prevention
- Continue to build and nurture research and evaluation capacity
- Expand the Trauma Response Initiative to include other emergency services and community referrals
- Expand neighborhood-based violence interruption
- Coordinate and execute the initial phases of the RECAST grant, including a needs assessment and support for adolescents, adjudicated youth, and families
- Continue and bolster public education campaigns



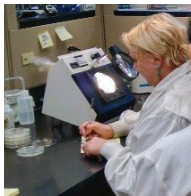
Additional report(s) or publication(s) found in appendix

PERFORMANCE MEASURES

	2012	2013	2014	2015	2016
Incident Reviews					
Homicide and Nonfatal Shooting Annual report published	Completed	Completed	Completed	Completed	In Progress
# of homicide reviews conducted	12	12	12	12	11
# of nonfatal shootings reviews conducted	38	38	38	38	12
# of community service provider reviews conducted	5	4	10	9	9
# of domestic violence reviews conducted	10	12	12	12	12
# of juvenile justice reviews conducted	NA	NA	NA	11	NA
# of pilot youth reviews conducted	NA	NA	NA	3	0
Youth Violence and Operating Without Owners Consent Reduction					
# of youth initially engaged	NA	NA	NA	NA	20
# of active youth participants	NA	NA	NA	NA	16
# of youth who have not reoffended	NA	NA	NA	NA	13
Completed training for current officers/recruits of MPD	Yes	Yes	Yes	Yes	Yes
NA=Not Available					

In Action: Building Relationships with Those Most At-Risk

While the OVP most often works to provide strategic direction and oversight for citywide violence prevention efforts, the newly expanded OVP team dedicates time to mentor and build relationships with youth and partners. In 2016, OVP worked with the Milwaukee Police Department Office of Community Outreach and Education (OCOE) to pilot intervention strategies to deter first-time and repeat offenses among juveniles. Working with 16 youth to-date, including one of the more prolific offenders throughout the city. He had been going to school sparingly, and lacked drive and determination. After building a relationship with the young man and his family, he has not begun attending school regularly. Challenges remain, but he sees the right track and is doing his best to stay on it.



City of Milwaukee Health Department Public Health Laboratory

Real time data analysis is critical for immediate response to disease detection in the community. As one of the oldest public health laboratories in the United States, the City of Milwaukee Health Department Public Health Laboratory has unique experience responding to disease outbreaks and public health emergencies. Over 80,000 specimens per year are processed with over 500,000 results available to a variety of users and agencies. In addition to providing diagnostic and surveillance capabilities for communicable and emerging infectious disease, the lab also supports emergency bioterrorism preparedness and response, environmental health, and water and food safety efforts.

Laboratory Oversight and Initiatives

The City of Milwaukee Health Department Public Health Laboratory (MHDL) boasts a record of providing innovative and quality services to Department programs and Milwaukee residents.

Familiarity with local health problems, strong ties and proximity to community clinicians, public health professionals, private/clinical labs, and academic and research institutes allows a greater degree of vigilance in which to detect and prevent emerging health problems. MHD's state-of-the-art laboratory meets state and federal regulatory standards for quality, safety and security. The laboratory provides strategic leadership in analytical services, research, outreach, and policy issues supporting the MHD program areas of: communicable diseases, foodborne diseases, consumer environmental health, sexually transmitted infections, emergency preparedness, and water quality.

With the largest public health Sexually Transmitted Disease (STD) clinic and laboratory setting in the state of Wisconsin, MHDL provides routine testing services for STDs including Syphilis, HIV, Chlamydia and Gonorrhea for more than 5,000 patient visits annually. Other communicable disease responses include routine surveillance and outbreaks investigations on vaccine-preventable diseases, respiratory diseases, gastrointestinal diseases, and other emerging diseases.

As an academic health department, the laboratory is guided by the core functions of a modern public health laboratory: disease prevention, control and surveillance; environmental health and protection; food safety; integrating/ interpreting lab data; reference/specialized testing; laboratory improvement, regulation and policy development; emergency response and applied research. MHDL involvement at the national and local level has fostered training opportunities for students from local schools and colleges to be the future workforce, and maintains latest developments in quality improvement initiatives, and strong ties with community and academic partners.

MHDL maintains a robust electronic Laboratory Information System (LIS), and disseminates information on laboratory surveillance, emerging public health threats, and outbreaks to systems partners of southeastern Wisconsin including local hospitals, public health agencies, academic institutions and first responders.

PROGRAM OPERATIONS	
Division	Public Health Laboratory
Established	1872
2016 Expenses	\$2,141,952
<i>O&M Expenses</i>	\$1,777,346
<i>Grant Expenses</i>	\$364,606
2016 Staffing	23.0 FTE
<i>O&M FTE</i>	18.0 FTE
<i>Grant FTE</i>	5.0 FTE
<i>Students</i>	4 students

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Epidemiology and Lab Capacity	Wisconsin Department of Health Services	8/1/16- 7/31/17	\$474,519
Growing Healthy Soil for Healthy Communities	Wisconsin Partnership Program	1/1/16- 12/31/16	\$1,000

Laboratory Oversight & Initiatives

Along with the below measures, the MHDL annual reviews a quality assurance plan, that look at multiple quality indicators. Examples of those includes:

1. Frequency of analysis: Daily, weekly or monthly analysis (based on natures of specimens, routine reference testing or outbreak responses)
2. Turn-around time (TAT): Average TAT for analysis of clinical and/or environmental specimens varies between 24 hrs. - 72 hrs.
3. Tracking test performances: Data are frequently analyzed for trend analysis and tracking any nonconforming events.

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
Communicable Diseases					
Communicable Disease Specimens	12,248	12,604	13,578	13,354	14,679
Respiratory Specimens	221	181	98	140	197
Gastrointestinal Specimens	238	288	229	250	278
Sexually Transmitted Diseases specimens (STD)	18,909	19,651	21,656	22,372	21,978
Lead					
Samples Analyzed for Blood Lead Poisoning	566	152	139	96	68
Samples Analyzed for Environmental Lead	18,470	10,769	11,681	8,663	8,488
Water Quality					
Number of samples analyzed for water quality surveillance including beach monitoring	601	568	516	534	545
Number of samples analyzed for E. coli	471	414	428	506	451
Number of samples analyzed for cryptosporidium/viruses/giardia	36	36	36	36	36
Communications					
"e"lab reports sent to all clinical partners and stakeholders (12 per calendar year) on laboratory surveillance	Completed	Completed	Completed	Completed	Completed



PARTNERSHIPS

- UW- Milwaukee
- UW- Madison Extension
- Milwaukee School of Engineering
- Concordia University
- Medical College of Wisconsin
- Children's Hospital of WI
- Blood Center of WI
- The Centers for Disease Control and Prevention (Influenza, Bio-threat response, foodborne outbreaks investigations)
- Environment Protection Agency
- Department of Natural Resources
- Milwaukee County Medical Examiners
- Sixteenth Street Community Health Center
- Walnut Way,
- Wisconsin Division of Public Health
- International Institute of Wisconsin

2017 ACTION PLAN



- Launch Growing Healthy Soils public soil testing
- Build workforce development capacity through hosting of student laboratory tour and mentorship activities
- Engage with citizens through interactive displays at Department and community events
- Continue advocacy and client/partnership awareness on available MHDL services and potential supports to communities need
- Explore future partnership grants and expand on revenues to the City/MHD from laboratory support services
- Explore local, state and national partnership opportunities



Additional report(s) or publication(s) found in appendix



The Office of Public Health Planning & Policy

The mission of the Office of Public Health Planning and Policy is to lead and coordinate departmental capabilities for community health assessment, community health improvement, informed policy analysis, and comprehensive strategic planning in order to enable the department and empower the community to advance a culture of health.

Policy Oversight & Initiatives

Public Health Planning and Policy is responsible for guiding and coordinating the planning activities of City of Milwaukee Health Department, its divisions and programs and advocating for policy, systems and environmental changes that support a healthy community and a culture of health.

The Policy & Planning team does this by:

- Utilizing data from the Community Health Assessment (CHA) in order to collaborate with the community to develop a Community Health Improvement Plan (CHIP).
- Developing processes to help create and implement the department’s strategic plan.
- Developing and implementing methods to track progress regarding CHIP initiatives and Strategic Plan goals and objectives.
- Identifying and organizing community collaborations to improve efficiency and effectiveness of public health efforts.
- Advocacy for changes to improve health and promote health equity
- Policy improvements may include “a law, regulation, procedure, administrative action, incentive, or voluntary practice of governments and other institutions.”
- Systems improvements may include a “change that impacts all elements, including social norms of an organization, institution, or system.”
- Environmental improvements may include changes to the physical, social, or economic environment.
- Providing resources and support to assist department leadership in decision making including the auditing and evaluation of MHD programs and services.
- Providing tools and resources to help community residents improve their health, including coordinating efforts to begin to address the social determinants of health.
- Leading the department’s quality improvement, performance management and workforce development efforts.
- Performing health impact assessments and health equity assessments.
- Creating and maintain strategic partnerships with academic institutions to foster workforce development and public health research.
- Leading the department’s efforts to obtain national public health accreditation.



PARTNERSHIPS

- Milwaukee Health Care Partnership
- University of Wisconsin – Milwaukee Joseph J. Zilber School of Public Health
- Marquette University Department of Biomedical Sciences

PROGRAM OPERATIONS	
Division	Administration
Established	2008
2016 Expenses	\$326,453
<i>O&M Expenses</i>	\$255,570
<i>Grant Expenses</i>	\$70,883
2016 Staffing	2.0 FTE
<i>O&M FTE</i>	2.0 FTE
<i>Grant FTE</i>	0.0 FTE
<i>Students</i>	7 + 1 Management Trainee

GRANTS			
2016 Active Grants	Funder	Grant Period	Amount Over Grant Period
Preventive Health Grant	Wisconsin Department of Health Services	10/1/14- 8/31/16	\$54,461
Preventive Health Grant	Wisconsin Department of Health Services	10/1/16- 9/30/17	\$57,940



Additional report(s) or publication(s) found in appendix

Policy Oversight & Initiatives

PERFORMANCE MEASURES					
	2012	2013	2014	2015	2016
% of department activities covered by written policy procedure updated within the required timeframe for PHAB	NA	NA	NA	NA	5%
A community health assessment completed within last 5 years	No	No	No	No	Yes
A community health improvement plan completed within the last five years	No	No	No	No	No
A quality improvement plan reviewed/completed within the last five years	No	No	No	No	No
A performance management plan completed within the last five years	No	No	No	No	No
A departmental strategic plan completed within the last five years	No	Yes	Yes	Yes	Yes



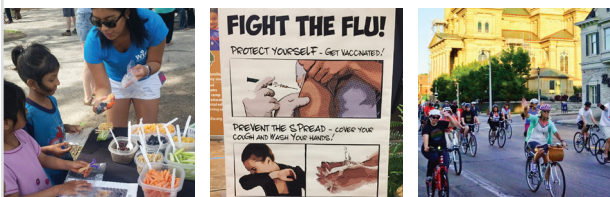
2017 ACTION PLAN

Work for the Office of Public Health Planning and Policy in 2017 will focus on preparing for application for accreditation. To achieve that goal the following milestones will be completed in 2017:

- Publication of the Community Health Improvement Plan.
- Update MHD’s Strategic Plan
- Development of new and update of existing Department Policies and Procedures
- Final Preparation of Accreditation Documentation
- Convening of Key Committees: Workforce Development Committee, Quality Improvement Committee, Data/Performance Management Committee

In Action: MKE Elevate - A Community Health Improvement Plan

During the summer of 2016, the MHD launched MKE Elevate, an effort to develop the city’s first ever community-driven Community Health Improvement Plan. After releasing the 2015-2016 Community Health Assessment, which was a detailed report on the health of Milwaukee residents, the MHD asked residents of Milwaukee to weigh in on what their most pressing health needs were. Through a community-wide survey, which resulted in more than 3,000 responses, and a photo campaign with more than 1,000 submissions, priority areas for collective action were identified. Information from the survey and the photo campaign along with data collected from the Community Health Assessment (CHA) was presented to community members at a series of meetings in 2017 to begin the process of developing the Community Health Improvement Plan. Once completed, the plan and subsequent committee work will help align health improvement efforts towards achievement of common goals and objectives.



Acknowledgements

Completion of this report would not have been possible without the contributions and considerable time devoted by the division and office directors, program managers, and program staff of the City of Milwaukee Health Department.

City of Milwaukee Health Department 2016 Annual Report
Team Members: Michael Stevenson, Salma Abadin, Angie Hagy,
Sarah DeRoo, Erica LeCounte, David Piedt, Marisa Stanley, City
of Milwaukee Health Department Data Committee