

MINUTES OF BOARD OF HEALTH MEETING
March 5, 2014

Meeting was called to order by Chair Kraft at 6:03 p.m.

Board of Health Members Present: Chair Kraft, Supervisor Peer, Supervisor Bostwick (left at 7:00 p.m.), Supervisor Rundle, Dr. Peterson, and Ms. Wade.

Board of Health Members Absent: Dr. Konkol, Dr. Winter, and Mr. Gresens.

Staff Members Present: Karen Cain – Health Officer; Timothy Banwell – Environmental Health Director; Janet Zoellner – Public Health Nursing Director; Sancee Siebold – Nursing Supervisor South Office; Deborah Erickson – Nursing Supervisor North Office; and Geri Waugh – Account Clerk.

Others Present: None at this time.

Adopt Agenda

Supervisor Bostwick made a motion to adopt the agenda. Ms. Wade seconded the motion. MOTION APPROVED.

Approval of Minutes 2/5/14

Chair Kraft stated she has a correction for the 2/5/14 minutes. On page 3, first paragraph, the word ‘and’ needs to be inserted in the third line of the paragraph. The correction should read, ‘Last week, there was a community meeting and it was found that the citizens in the community *and* the Health Department have had meetings with shared similar redevelopment ideas with the business community of downtown Janesville’.

Supervisor Peer made a motion to approve the minutes of the 2/5/14 Board of Health meeting as amended. Ms. Wade seconded the motion. MOTION APPROVED.

Citizen Participation

None at this time.

Unfinished Business

None at this time.

New Business

Administrative Division

Approval of Bills/Transfer of Funds

Supervisor Bostwick made a motion to approve the bills for the month of February, 2014 in the amount of \$26,333.53; bills for the Fetal Infant Mortality Grant in the amount of \$30.20; and bills for the Community

Transformation Grant in the amount of \$1,146.29. Supervisor Peer seconded the motion. MOTION APPROVED.

There is no transfer of funds this month.

Health Department Report

Rabies Vaccine Clinic: Ms. Cain stated there will be another low-cost rabies vaccine clinic held at the Rock County Fairgrounds on Saturday, April 26th. She will advise the Board members when more information is available.

Community Transformation Grant: Ms. Cain stated there had been a possibility this grant would be extended for another year; however, the health department received word last week the funding will not be extended. Therefore, the grant will end on 9/30/14. The department is looking at other funding sources for this program.

Preparedness Exercise: Ms. Cain reported the health department will be conducting a preparedness exercise on Thursday, March 20th. It will be a foodborne illness outbreak. The exercise is a requirement of the Preparedness Grant. Ms. Cain stated she will report on the exercise at the April Board of Health meeting.

Food Program Audit: Ms. Cain stated the State Division of Health completed an audit of the health department's Food & Public Lodging Program. State staff met with the health department's Environmental Health staff to review their audit report. The State staff were very complimentary of the health department staff's professionalism in performing their inspection and enforcement duties.

WDNR Audit: Ms. Cain reported WDNR completed an audit of the health department's Transient Non-Community Well Program. These are wells located at rural churches, restaurants, campgrounds, etc. that the health department tests annually as part of the program. WDNR staff were also very complimentary of the health department's work in this program.

Orfordville Water Sample: Ms. Cain and Mr. Banwell reported on a recent water sample from a well in Orfordville brought in by a citizen. The water sample had a petroleum odor. This household has a family member who is seriously ill, and they cannot afford costly water tests. Rick Wietersen did some research and found there had been 2 oil spills in the area near this well. A public water main break had flushed out the bedrock, and there are possibly 2 wells affected by the oil spills. WDNR will be conducting water tests in the area. Rick Wietersen was able to have fee-exempt water tests done by the State Laboratory of Hygiene for this family's well.

Ms. Cain thanked the Board of Health members for the plant they sent in memory of Ms. Cain's sister who had recently passed away.

Resolution: Accepting the Wisconsin Division of Public Health Farm Safety Project Grant and Amending the 2014 Rock County Health Department Budget

NOW, THEREFORE BE IT RESOLVED, that the Rock County Board of Supervisors duly assembled on this _____ day of _____, 2014 does hereby authorize the Rock County Health Department to accept this grant from the Wisconsin Division of Public Health in the amount of \$8,750, and temporarily increase the

0.8 FTE Health Educator position to 1.0 FTE, and amend the 2014 Rock County Health Department Budget as follows:

<u>Account/Description</u>	<u>Budget</u>	<u>Increase</u>	<u>Amended</u>
<u>Source of Funds</u>	<u>1/1/14</u>	<u>(Decrease)</u>	<u>Budget</u>
31-3019-0000-42100			
Federal Aid – Farm Safety Grant	-0-	\$8,750	\$8,750
<u>Use of Funds</u>			
31-3019-0000-63110			
Administrative Expense	-0-	\$8,750	\$8,750

Dr. Peterson made a motion to approve the resolution. Supervisor Rundle seconded the motion. MOTION APPROVED.

Public Health Nursing

Tuberculosis in Rock County (update)

Ms. Zoellner did a powerpoint presentation for the Board on Tuberculosis, as follows:

What is Tuberculosis (TB)?

- Tuberculosis (TB) is an infectious disease caused by a bacterium called *Mycobacterium tuberculosis*.
- TB primarily affects the lungs, but can also affect organs in the central nervous system, lymphatic system, and circulatory system, among others.
- TB is generally classified as being either latent or active.

What Causes TB?

- Tuberculosis is spread from person to person through airborne particles. Inhaling infected particles does not necessarily mean that a person becomes infected.

Three Things May Happen After Exposure:

1. The bacterium is destroyed because the body has a strong immune system.
2. The bacterium enters the body and remains as latent TB infection. The patient has no symptoms and cannot transmit it to other people.
3. The patient becomes ill with TB. If infection is in the lungs, they may infect others by coughing.

How Has TB Treatment Changed?

- Before TB antibiotics, many patients were sent to sanatoriums.
- Patients followed a regimen of bed rest, open air, and sunshine.
- TB patients who could not afford sanatoriums often died at home.
- Effective antibiotics were developed in the early 1940's.

TB Prevention & Control Efforts

- TB cases have steadily declined since 1993.

<u>Rock County Active TB Cases</u>										
<u>2003</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
2	4	2	1	1	1	2	0	1	0	2

<u>Investigated Reports</u>						
<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
46	36	39	42	60	70	42

If We Can Treat It, Why Worry?

- Latent TB infection is silent. 5-10% of those infected and untreated will progress to active disease at some point.
- Once active and infectious, the mean time to diagnosis is 25 days.
- Treatment is expensive and involves directly observing the client take their medications.
- Multi-drug resistant TB complicates treatment success. Treatment lasts 2 years or longer, with daily injections for the first 6 months. Treatment success is only 53%.

Treatment Costs

- Active TB cases that are *not* drug resistant take four drugs daily for six months to a year, for a total cost per case of about \$1,800. To ensure compliance and reduce the changes of drug resistance, Directly Observed Therapy (DOT) is required.
- MDR-TB requires five or six drugs daily for two years or more, given by DOT. The average treatment can cost up to \$300,000 per patient.

Sheboygan County, Wisconsin Outbreak 2013:

Index Case History:

- Client immigrated in 1994 with positive TB test.
- Took 6 months of INH medication. Treatment was not continuous due to several pregnancies.
- Moved around several states, visited her country of origin several times in 20 years.
- First saw a physician for cough in October, 2012.
- Saw 8 physicians for cough between 10/12 and 4/13. (4 ED visits, diagnosed with asthma by a pulmonologist in 2/13).
- TB was diagnosed in 4/13 after seeking treatment for depression and chest x-ray was ordered.
- October 17, 2013 – Index case released from isolation following 27 weeks spent in hospital, a long-term care facility and rental property. Able to reunite with children.
- Treatment to continue to 2015.

Screening for TB (Sheboygan County Outbreak):

<u>Site</u>	<u>Population</u>	<u>Contacts Identified</u>	<u>Contacts Tested</u>	<u>1st Round Positive Test for Infection</u>	<u>2nd Round Positive Test for Infection</u>
2 hospitals	Staff	158	119	4	2
Nursing Home	Staff	32	30	0	N/A
2 Clinics	Staff	51	43	1	0
2 Factories	Same Shift	83	72	0	0
5 Grades in 3 Schools	Classmates	204	196/103	1	0
Close Friends	-	10	10/9	1	1
Family & Extended Family	-	71	71	23	4

Cost Estimates:

- Fearing there might be 15 active cases and 200 LTBI cases of highly drug-resistant TB, the Division of Public Health projected it would cost the county and state \$17 million to bring the outbreak under control.
- Thankfully the number of drug-resistant cases was not as high as estimated. In June the legislature approved \$5 million dollars.
- Total active cases: 11

What Costs Did Government Bear?

- TB testing and retesting for >600 contacts.
- Medication for affected cases.
- Nurses directly observing therapy (DOT) for 11 active cases.
- Limited Term Employee nurses.
- Housing for the index case while isolated for active disease, car for family.
- Communication and oversight.
- Activation of Emergency Operations Center.
- Report writing and financial reporting.

TB Lessons from Sheboygan County:

- Primary prevention is difficult.
- Preventing secondary cases uses local public health resources, quickly exceeding capacity.
- Detect and treat early (*Always Think TB*)
- Isolate and treat suspect/active cases and *report to local public health*.
- Be ready and train often with public health staff.
- Educate clients with latent TB regarding future risk of infection.
- Frequently public health hears ‘Just tell them they can’t go out into the public’ as a solution to infectious illness.
- Problems with this:
 1. Our culture no longer accepts this as a solution (except for ‘everyone else’)

2. There is no enforcement capability at the local health department.
3. Law enforcement jurisdictions are unclear.
4. The county may then be responsible for their room & board as long as they ordered the isolation.

Environmental Health

Wisconsin Onsite Wastewater Recycling Association Request to Waive Sanitary Permit Fee

Mr. Banwell reported the Wisconsin Onsite Wastewater Recycling Association (WOWRA) is installing a septic system for:

Charlene Brace
4920 E. Rotamer Rd.
Janesville, WI 53546

This is the second year that WOWRA is donating the labor and material to install a new septic system for a resident that is struggling financially. Ms. Brace is a senior citizen living on her own with some assistance from her daughter. The current septic system has been failing for a couple of years and she has nursed it along as much as possible, but now system replacement is the only option. Installation of a new septic system will allow her to remain in her home.

Fanning Excavating is representing WOWRA in Rock County, and is requesting waiver of the sanitary permit fee. Rock County's sanitary permit fee for a conventional septic system is \$435. However, \$100 of that fee is reimbursable to the State. Rock County Health Department staff recommends that the Board of Health waive the \$335 portion of the sanitary permit fee, with the State's portion of the fee to be paid by WOWRA.

Supervisor Rundle made a motion to approve waiving the health department's portion of the sanitary permit fee. Supervisor Peer seconded the motion. MOTION APPROVED.

Communications and Announcements

Supervisor Peer asked if a Beloit College student could attend a future Board of Health meeting as part of a class requirement. Ms. Cain stated yes, these are open meetings so anyone is welcome to attend.

Ms. Cain reported there was a recent newspaper article showing Supervisor Rundle at the ice caves at Lake Superior.

Adjournment

Dr. Peterson made a motion to adjourn the meeting. Ms. Wade seconded the motion. MOTION APPROVED. Meeting adjourned at 7:03 p.m.

Respectfully submitted,

Geri Waugh, Recorder

Not Official Until Approved by the Board of Health