

WASHBURN COUNTY HEALTH DEPARTMENT

2020 Annual Report



CONTACT US

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https://www.co.washburn.wi.us/departments/health-human-services/public-health

Hours: Monday-Friday 8:00am-12:00pm 1:00pm-4:30pm

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ABOUT US

The Washburn County Health Department has served the community for 84 years beginning in 1936.

2020 Changes

2020 revolved around COVID-19. Responding to the pandemic took most of our time and resources. It also drastically altered the way we offered services and connected with partners. Zoom meetings and teleconferencing replaced face-to-face encounters as mandatory state conferences went virtual and grant funded activities redirected towards protecting our population from COVID-19.

We put to use all of the emergency preparedness planning that we have been doing for the last 15 years; from activating Incident Command to assure that an action plan was made and the right people were briefed, to activating our Continuity of Operation Plan to identify and prioritize our programs and services.

The pandemic equipment we had purchased during H1N1 in 2009 was put to good use, including distributing N-95 masks to our hospitals and nursing homes in the early stages of the pandemic, when masks were in short supply.

In the middle of our pandemic response, we also somehow found the time to pack up the Health Department and move to our new offices in Shell Lake. We can be found on the second floor of the new government center in Shell Lake. We look forward to when we can once again see our clients face-to-face.

WHO WE ARE

STAFF

Jim LeDuc, MSW, APSW
Director, Health and Human Services
Cheri Nickell, RN, BSN
Supervisor/Health Officer
Julie Erickson, RDN, CD
WIC Director/WIC Nutritionist
Cassidy Watson, MPH
Public Health Specialist
Tim Nickell, RN, BSN
Public Health Nurse
Joan Romanowski
Account Clerk II
Tim Reeber, RN, BSN
LTE Public Health Nurse

VOLUNTARY ADVISORS

Beverly Bohac, MD
Public Health Medical Advisor
Jeffrey Dunham, MD
Jail Medical Advisor
Allen Pederson, DVM
Veterinary Advisor



COALITION MEMBERSHIPS

The Washburn County Health Department is a member of the following coalitions:

- Child Death Review Team (CDR)
- Children's Coordinated Services Team (CCST)
- Continuum of Care (COC)
- Local Emergency Planning Committee (LEPC)
- Multidisciplinary Team (Includes Drug Endangered Children)
- Northwest WI Healthcare Emergency Readiness Coalition (NWWI HERC)
- Washburn County Community Alliance for Prevention
- Mental Health Task Force of Washburn County
- WI Association of Local Health Departments & Boards (WALHDAB)
- Western WI Public Health Readiness Consortium (WWPHRC)
- WI Family Planning Reproductive Health Association (WFPRHA)

SERVICES

COMMUNITY HEALTH IMPROVEMENT PLAN

Local health departments are required under Wisconsin Statute 251 to regularly undergo the "Community Health Improvement Process," or the process of conducting a Community Health Assessment followed by developing and implementing a Community Health Improvement Plan. A Community Health Improvement Plan is a long-term, systematic effort to address problems based on the results of community health assessment activities and the community health improvement process.

In 2019, utilizing the Community Health Assessment conducted by Spooner Health to inform the Steering Committee's decision, the Washburn County Community Health Improvement Plan was amended to run from 2016-2021 and target only three health priorities: 1) Alcohol, Tobacco, and Other Drug Abuse, 2) Mental Health, 3) Access to Healthcare. The next Community Health Assessment will be conducted in 2021.

The 2015 Community Health Assessment and 2016-2021 Community Health Improvement Plan can be viewed at http://www.co.washburn.wi.us/departments/health-human-services/public-health.

Participating Organizations

- Washburn County Health Department
- Washburn County Human Services Department
- Washburn County Board of Supervisors
- Spooner Health
- NorthLakes Community Clinic
- Washburn County Sheriff's Office

- ♦ Lakeland Family Resource Center
- Red Cross Pharmacy
- ♦ Essentia Health
- ♦ Indianhead Medical Center
- ♦ UW Extension



1) Alcohol, Tobacco, and Other Drug Abuse (ATODA)



2) Mental Health



3) Access to Care

WIC (WOMEN, INFANTS, AND CHILDREN)

The WIC Program is a Supplemental Nutrition Program for Women, Infants and Children. WIC helps income eligible pregnant, breastfeeding and postpartum women, infants, and children up to age 5 years who have a health risk due to inadequate nutrition.

The program improves pregnancy outcomes, reduces infant mortality and provides infants and children with a healthy start in life by improving poor or inadequate diets. In 2020, 404 participants received nutrition education and food benefits. WIC food benefits support our local businesses. In 2020, redeemed food benefits generated \$118,191.21 in revenue at grocery stores throughout Washburn County.



Farmers Market Nutrition Program (FMNP)

Through the WIC FMNP, participants are provided food benefits to be redeemed at local farmers markets. The WIC FMNP benefits both WIC participants and local farmers. In 2020, WIC FMNP redeemed benefits totaled \$1,788.

COVID-19

WIC moved to only virtual appointments on March 23, 2020. We adapted quickly by setting up the VPN to have access to network files and to be able to use the phone system via the Internet. The State WIC Office contracted with a company to assure that we could securely obtain proofs of income, residence and identification. Waivers have been in place since March of 2020 to allow WIC to operate the program with just one person assessing the proofs and issuing WIC benefits. Required data including proof of pregnancy, heights and weights and anemia screenings have also been waived for the duration of the pandemic.

Participation is down 8% from 2019 to 2020, likely related to the challenges of no in-person visits. There may have been confusion about whether WIC could be available if physical contact was not allowed.

Dollars spent in Washburn Co grocery stores was down 13% from 2019 to 2020. We did lose one retailer (The Lakes Community Co-op in Stone Lake) at the end of 2020, but that store was doing very little WIC business prior to that time. Confusion about how to safely shop and the frequency of participants relying on other family members to shop were likely causes for reduced spending (family members would shop but would forget about using WIC).

Use of Farmers' Market benefits was also down 13% from 2019 to 2020, despite increased issuance. Families reported that there were fewer Farmers' Markets available and that they were afraid of having direct contact with vendors and other shoppers. A few families reported that they never received their Farmer's Market checks (all were mailed) or that they misplaced them.

WIC experienced a disappointing drop in overall participation related to the pandemic, but good communication using phone calls and texts prevented the numbers from being any worse.

COMMUNICABLE DISEASE CONTROL AND PREVENTION

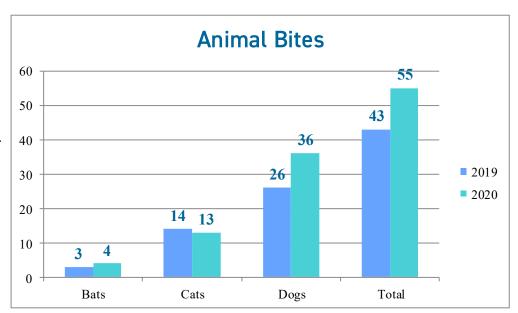
Wisconsin Statute 252 requires that local hospitals and clinics report communicable diseases to Local Health Departments for investigation and surveillance. Preventing the spread of disease remains a public health priority. In 2020 the Washburn County Health Department conducted 267 Non-COVID communicable disease investigations, confirming 142 cases.

Tick-borne diseases, including Lyme, Ehrlichiosis, and Babesiosis, accounted for almost half of the reported diseases.

RABIES CONTROL

State Statute 254 requires that the Health Department investigate all animal bites/exposures involving humans. Rabies is almost always fatal, unless post-exposure prophylaxis (treatment) is given.

Public Health Nurses provide education regarding the need for human medical evaluation. They also order and enforce animal quarantine or rabies testing. All domestic animals. including dogs, cats, and ferrets, must be quarantined for 10 days following a bite or other exposure to a human. If an animal has a current rabies vaccine, they may be allowed to be quarantine at home. Unvaccinated animals must be quarantined at the Washburn County Area Humane Society at the owner's expense.



Wild animals involved in a bite to either humans or pets are humanely euthanized and tested for rabies. In 2020, 55 animal bites/exposures were reported and investigated. 1 bat tested positive for rabies.

ENVIRONMENTAL HEALTH

Under Wisconsin Statute 254, the Health Department is responsible for investigation and abatement of immediate Human Health Hazards to the public.

Washburn County Health Department conducted <u>2</u> immediate Human Health Hazard investigations in 2020. Both involved blue-green algae blooms. Information about blue-green algae blooms can be found at https://www.dhs.wisconsin.gov/water/bg-algae/index.htm

CHILDHOOD LEAD MONITORING

The Washburn County Health Department provides Childhood Lead Screening Surveillance and Lead Abatement under Wisconsin State Statute 254. There is no safe level of lead in the human body. Even very low levels of lead can cause permanent brain damage and negatively affect health throughout life. The Centers for Disease Control defines lead poisoning as a blood lead level of 5 mcg or greater.

There was 1 child with elevated blood lead levels in Washburn County in 2020.

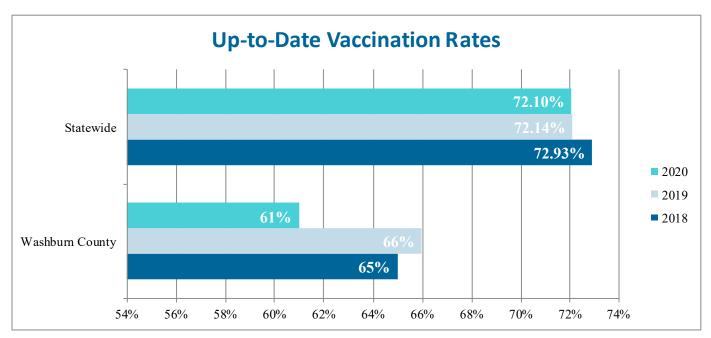
IMMUNIZATIONS

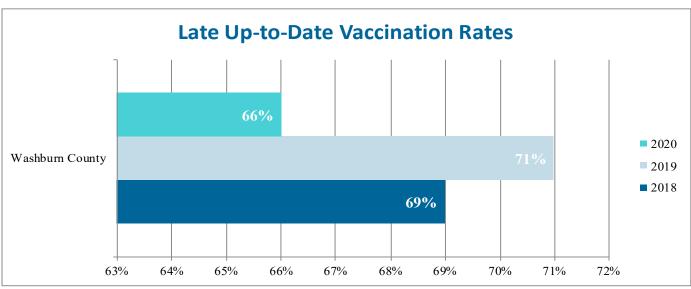
Under Wisconsin Statute Chapter 252 and in conjunction with the Vaccine for Children Program and the Wisconsin Immunization Program, The Health Department offers recommended childhood vaccines to children 0-18 years who meet program guidelines.

In addition, a limited selection of vaccines are available to adults with no vaccine insurance coverage.

As part of our chronic and communicable disease surveillance duties, we monitor the immunization records and send vaccine due letters quarterly to the parents of all Washburn County children under the age of three. In 2020, 990 total letters were sent to parents.

In 2020, <u>61%</u> of all Washburn County 2 years olds were up-to-date, with <u>66%</u> considered late up-to-date (completed by age 3), a 5% decrease from 2019. Nationally, on-time vaccination rates have declined as parents have delayed seeking care due to the COVID-19 pandemic. The state average is <u>72.1%</u> up-to-date. Washburn County's up-to-date rate is <u>11.1% below</u> the state rate and well below the <u>75%-95% required rate</u> for herd immunity (depending on disease and vaccine), which is of concern as it means Washburn County is at risk for a vaccine-preventable disease outbreak, such as measles.

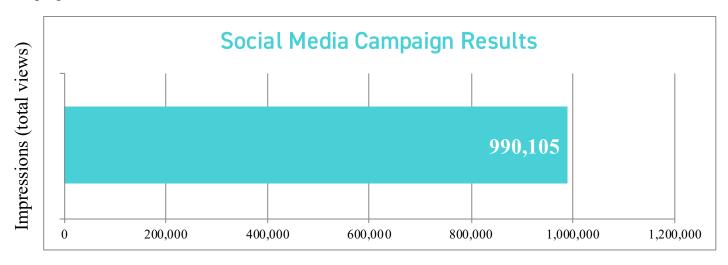




ADDRESSING THE OPIOID EPIDEMIC

The Health Department continued activities related to the Overdose Data to Action (Opioid Awareness) grant through the Wisconsin Department of Health Services, Opioid Harm Prevention Program (OHPP). The grant was initially set to expire August 31, 2020. However, after discussion between the state, local grantees, and federal funders, it was decided to extend the current grant award through August 2021. Activities completed under this grant were temporarily halted in August in order to redirect staff time to COVID-19.

Between January and July 2020, social media advertising campaigns were conducted on Facebook and Instagram. Campaigns directed individuals to FDA resources for patient-provider conversations and to information from the National Institute on Drug Abuse on opiate use and COVID-19. The total views for the 8 campaigns is shown below.



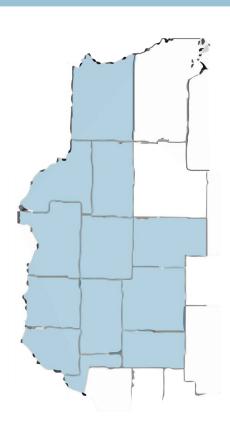
PUBLIC HEALTH EMERGENCY PREPAREDNESS

Washburn County Health Department engages in a continuous planning process with community partners in preparation to respond to public health emergencies, from large scale disease outbreaks to acts of bioterrorism to ice storms.

The Health Department is a member of the Western Wisconsin Public Health Readiness Consortia (WWPHRC), a multi-county coalition that supports public health emergency preparedness. The WWPHRC has managed to remain a model and resource for member agencies, Wisconsin, and the country in the area of exceptional public health preparedness planning, training, exercising, and response since 2003.

Currently, the WWPHRC has thirteen local public health agencies and two tribal public health agencies as members, working hand in hand with the Northwest Wisconsin Healthcare Emergency Readiness Coalition and the multiple sectors it represents. This seamless approach provides a foundation for alignment of planning, efficiency of resources, removal of redundancy, and exceptional information sharing before, during, and after exercises and real events.

The WWPHRC was instrumental in allowing the western region to have a uniform response to COVID. The Consortia provided a forum for addressing the unique needs of the Northwestern Counties, as well as providing communication tools for use with our partners and the public.



COVID-19-2020 REVIEW

SIGNIFICANT DATES

December 31, 2019

Wuhan Municipal Health Commission (China) reports a cluster of cases of pneumonia in Wuhan.

February 5, 2020

Wisconsin Department of Health Services confirms the first case of the novel coronavirus in Wisconsin in an individual with a history of travel to Beijing, China.

March 17, 2020

Washburn County Board Chairman, Thomas Mackie, issues an emergency declaration in regards to the COVID-19 Pandemic.

September 10, 2020

The Washburn County Health Department confirms the first fatality of a Washburn County resident due to COVID-19.

December 11, 2020

The US Food and Drug Administration issues the first Emergency Use Authorization for a vaccine for COVID-19.

January 21, 2020

The United States confirms its first case of the novel coronavirus in Washington State in a man who had traveled from the Wuhan area.

March 10, 2020

The Washburn County Health Department and the Shell Lake School District announce that Shell Lake students had a low-risk exposure to COVID-19 at the Destination Imagination competition in Osceola, WI – the first identified potential exposure in Washburn County.

April 13, 2020

The Washburn County Health Department confirms the first case of COVID-19 in a Washburn County resident.

September 25, 2020

The Washburn County Health Department confirms the 100th RNA-test confirmed case of COVID-19 in Washburn County residents.

December 28, 2020

The Washburn County Health Department confirms the 1000th RNA-test confirmed case of COVID-19 in Washburn County residents.

1104

Confirmed and Probable Cases in Washburn County Residents

Close Contacts Monitored by the Washburn County
Health Department

1062

35

News Releases and Advisories Published by the Washburn County Health Department

Unique Facebook Posts Providing COVID-19 Information

197

PARTNERS IN THE COMMUNITY

Starting in March 2020, the Washburn County Health Department started with working with state, regional, and local partners to combat the spread of COVID-19. We have provided guidance on preventing spread, testing, quarantine/isolation, best practices for employers and schools, vaccination, Personal Protective Equipment and cloth face coverings, travel, and many other questions that have been directed to the Health Department. Some of the partners we worked with in 2020 include:

- Emergency Management
- ♦ Local Media
- Faith Organizations
- Northlakes Community Clinic Minong
- Spooner Health
- Indianhead Medical Center
- ♦ Essentia Health Spooner Clinic
- Red Cross & Shell Lake Pharmacy
- Washburn County School Districts
- ♦ Community First Washburn County
- Washburn County COC
- Law Enforcement
- ♦ Fire & EMS
- Municipal Governments
- Washburn County Coroner

- ◆ Skilled Nursing Facilities/Assisted Living Facilities
- Shell Lake, Spooner, Birchwood, and Northwood School Districts
- Washburn County Unit on Aging
- ♦ Lakeland Family Resource Center
- Washburn County Tourism
- Washburn County Economic Development Corporation
- Spooner Business Improvement District
- Spooner Memorial Library
- ♦ Embrace
- ♦ Indianhead Community Action Agency
- Numerous Washburn County businesses

DATA KEY

Total Confirmed Cases: cases of COVID-19 ever confirmed by positive molecular tests in Washburn County residents.

Confirmed Deaths: confirmed cases of COVID-19 (positive molecular test) that result in the patient's death. *Included in "Total Confirmed Cases" count.*

Total Probable Cases: close contacts of lab confirmed cases who have developed symptoms but have not been tested OR an individual with a positive non-confirmatory test result (i.e. positive antigen test).

Probable Deaths: probable cases of COVID-19 that result in the patient's death and meet one of the following criteria: 1) tested positive by antigen test method, 2) COVID-19 or SARS-CoV-2 listed on the death certificate, or 3) had symptoms of COVID-19 and known exposure to COVID-1, as defined under "probable" above. *Included in "Total Probable Cases" count.*

Recovered: cases who have met the criteria for release from isolation and are no longer infectious (10 days since symptom onset + 24 hours after symptom improvement OR 10 days since positive test in asymptomatic individuals). *Included in "Total" counts for confirmed or probable.*

Active: cases of COVID-19 who are still in isolation during their infectious period and/or have not met the "24 hours after symptom improvement" criteria. *Included in "Total" counts for confirmed or probable*.

Negative Cases: number of people with negative diagnostic test results.

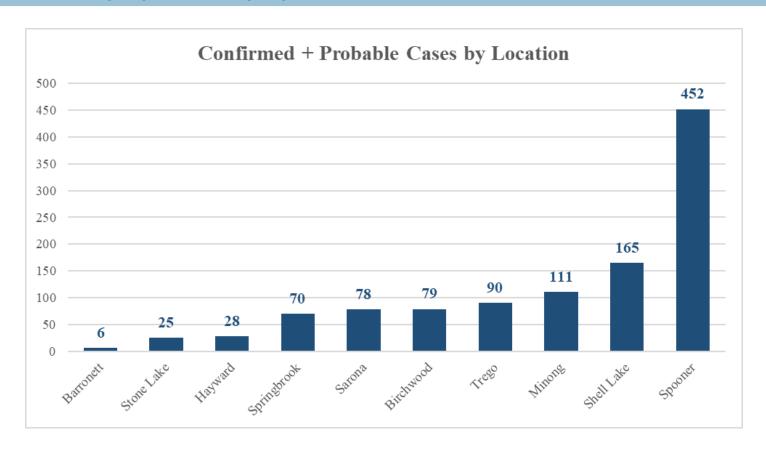
Ever Hospitalized: individuals hospitalized specifically for COVID-19 treatment who were inpatient for 24 hours or greater. *Not publicly reported.

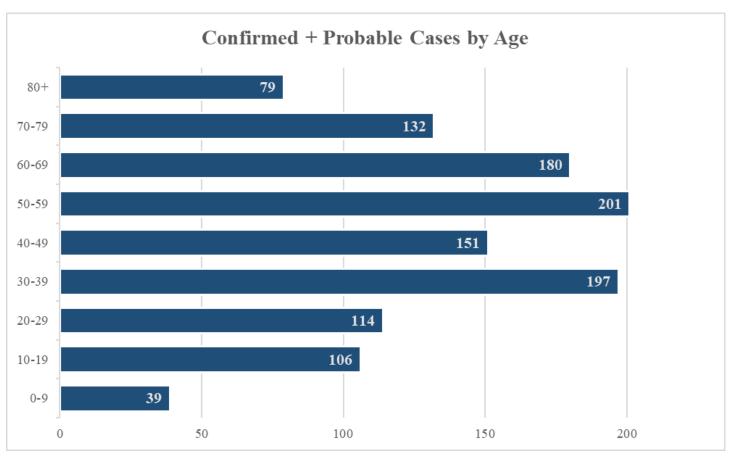
WI DHS COVID-19 Activity Level: DHS data metric determined using the burden (case rate per 100,000 people) and trajectory (case change) calculated from the previous 2 weeks of data. This number is updated Wednesdays. More information can be found at https://www.dhs.wisconsin.gov/covid-19local.htm

**Cases are classified using the national case definition established by CDC and the CSTE. More information can be found at the end of this document in the "For Your Awareness: Frequently Asked Questions" section.

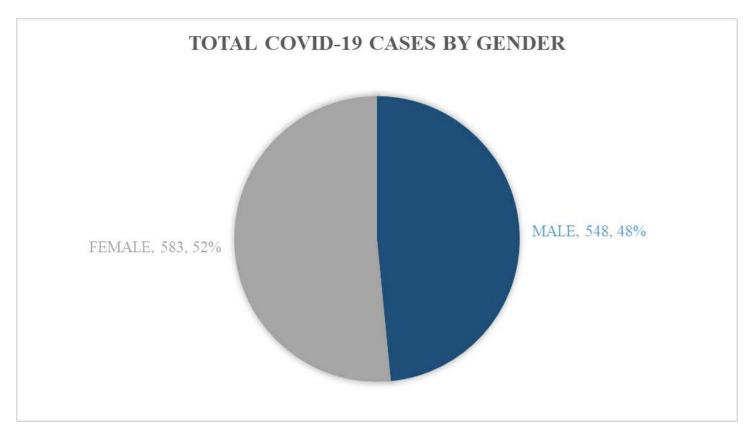
Most recent daily and weekly data updates can be found on the Washburn County Coronavirus Outbreak page: https://www.co.washburn.wi.us/news/public-health/Coronavirus-Outbreak

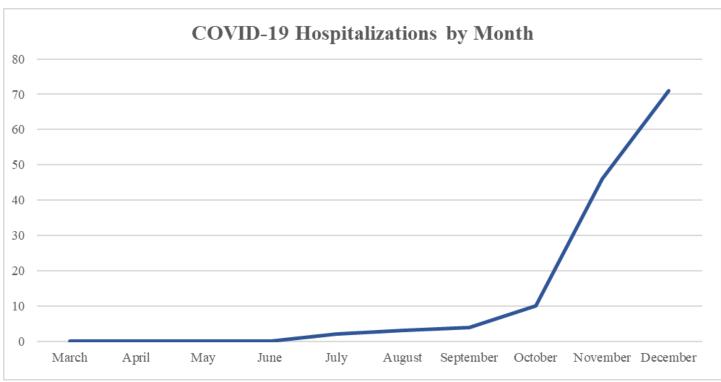
DATA 01/01/2020—12/31/2020





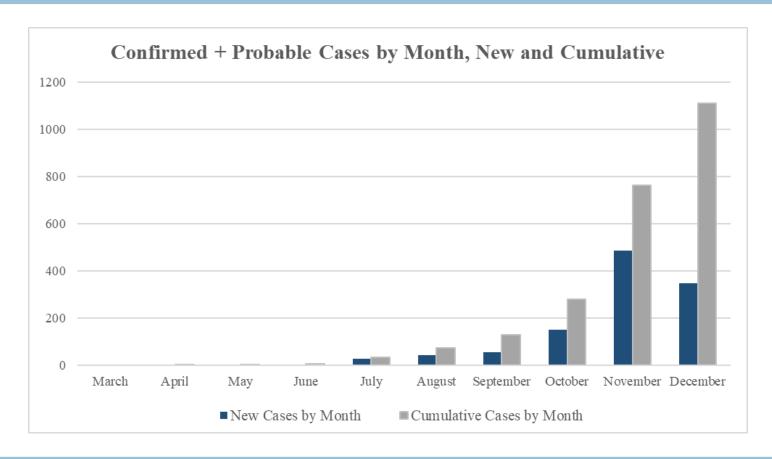
DATA 01/01/2020—12/31/2020





EVER HOSPITALIZED: 75
DIED, COVID-19 CONFIRMED AND PROBABLE: 17

DATA 01/01/2020—12/31/2020



CONTACT TRACING

Health departments are responsible for leading case investigations, contact tracing, and outbreak investigations. Case investigation is the identification and investigation of individuals with confirmed and probable diagnoses of a reportable communicable disease, such as COVID-19. **Contact tracing** follows case investigation and is a process to identify, monitor, and support individuals who may have been exposed to a person with a communicable disease, such as COVID-19. This includes working with patients and contacts on isolation (separation of people infected with the virus from people who are not infected) and quarantine (separation of people who might have been exposed to COVID-19 from others).

The Washburn County Health Department began contact tracing efforts in March 2020.

In November 2020, contact tracing efforts were scaled back in response to the overwhelming surge in positive test results requiring case investigations. Cases were provided with instructions to notify their close contacts of exposure and inform them of quarantine guidance. Cases were provided with contact information of the case investigator to provide to close contacts who had questions or concerns. Contacts working or living in a skilled nursing home/assisted living facility or those who work at or attend school were identified by cases during the case investigation. These contacts were prioritized in order to prevent the spread of COVID in high-risk settings.

VACCINE

On December 11, 2020, the US Food and Drug Administration issued the first Emergency Use Authorization (EUA) for a COVID-19 vaccine. Shortly thereafter, a second vaccine also receive an EUA. Given the limited amounts of vaccine available, the CDC's Advisory Committee on Immunization Practices (ACIP) recommended that vaccine be administered in Tiers, with the first Tier(1a) being Health Care Workers.

In anticipation of this, the CDC had developed an application process for Vaccine Providers. The Health Department and Washburn County Medical Providers submitted the necessary paperwork, but there was a delay in approval as there was a backlog of applications that needed to be reviewed. Once approval was received, there were additional steps that needed to be taken, including trainings on specific storage and handling of the Pfizer vaccine.

Initially, DHS only released vaccine to Hospitals, as there was concern over two reported severe allergic reactions in England. Spooner Health did receive enough vaccine to vaccinate their staff, with additional doses that they offered to unaffiliated health care workers, such as EMS, Dentists, and Pharmacists. Public Health took on the role of scheduling those vaccines, and 60 unaffiliated health care workers were able to get vaccinated by 12/23/2020. Indianhead Medical Center received extra vaccine as well and took on vaccinating additional unaffiliated health care workers.

Nursing Home and Assisted Living vaccination through a federal contract with CVS and Walgreens began at the end of December 2020.

FOR YOUR AWARENESS: FREQUENTLY ASKED QUESTIONS, COVID-19

Why might Washburn County Health Department guidance be different than CDC guidance?

The Washburn County Health Department is obligated by Wisconsin Law to follow Wisconsin Department of Health Services (DHS) policies in place regarding COVID-19 and other communicable diseases

What is the difference between a Confirmed case and a Probable case?

Cases are classified using the <u>national case definition</u> established by CDC and the CSTE (Council of State and Territorial Epidemiologists).

Confirmed: individuals who have a positive **molecular** test result detecting the SARS-CoV-2 virus (see testing information on next page), with or without the presence of symptoms.

Probable: individuals with a positive non-confirmatory test (**antigen**, see testing information on next page) OR close contacts of lab confirmed cases who have developed symptoms but have not been tested

What are the different types of tests and how long does it take to get results?

There are two types of tests used to diagnose COVID-19: **Molecular (confirmatory)** and **Antigen (non-confirmatory)**

- ⇒ Molecular tests are the most accurate type of test used to diagnose active COVID-19 infection by detecting the virus's genetic material. These tests are often referred to as PCR or NAAT tests and use nasopharyngeal, nasal, or throat swabs in the majority of tests, with some tests using salvia. Samples must be analyzed in a reference lab. Molecular tests can take anywhere from a day (in some locations) to a week (depending on the capacity of the reference lab) to return results. Positive results from molecular tests result in "confirmed" case status.
- ⇒ Antigen tests detect specific proteins from the virus and are less accurate than molecular tests. Positive results are usually highly accurate, particularly in symptomatic individuals, but providers may order a confirmatory molecular test in situations where a symptomatic individual tests negative OR where an asymptomatic individual tests positive, depending on the circumstances leading to testing. Antigen tests can return results in as fast as 15-30 minutes using nasal or nasopharyngeal swabs, depending on the specific test used. Positive results from antigen tests result in "probable" case status.

Antibody tests may show if you have been infected by COVID-19 in the past. These tests are run using blood samples and have varying degrees of accuracy. Antibody tests cannot be used to diagnose COVID-19. Researchers do not know how long antibodies stay in the body following infection by the SARS-CoV-2 virus and do not know if antibodies give you protective immunity against the virus. Individuals who have had a previous COVID-19 infection are advised to continue taking protective measures, such as physical distancing, mask wearing, and hand hygiene.

More information about COVID-19 tests can be found in this FDA fact sheet or this DHS publication

How are COVID-19 deaths reported?

Cases are classified using the <u>national case definition</u> established by CDC and the CSTE (Council of State and Territorial Epidemiologists).

COVID-19 Deaths: deaths among confirmed cases of COVID-19 that meet the vital records criteria set forth by the CDC and Council of State and Territorial Epidemiologists (CSTE) case definition. Those are deaths that have a death certificate that lists COVID-19 disease or SARS-CoV-2 as an underlying cause of death or a significant condition contributing to death.

Probable Deaths: deaths among probable cases of COVID-19 that meet at least one of the following criteria:

- test positive using an antigen test method
- have symptoms of COVID-19 AND known exposure to COVID-19, meeting the national case definition of a probable case (linked above)
- COVID-19 or SARS-CoV-2 is listed on the death certificate

Deaths among people with COVID-19 that were the result of non-COVID reasons (e.g., accident, overdose, etc.) are not included as a COVID-19 death or a Probable death.