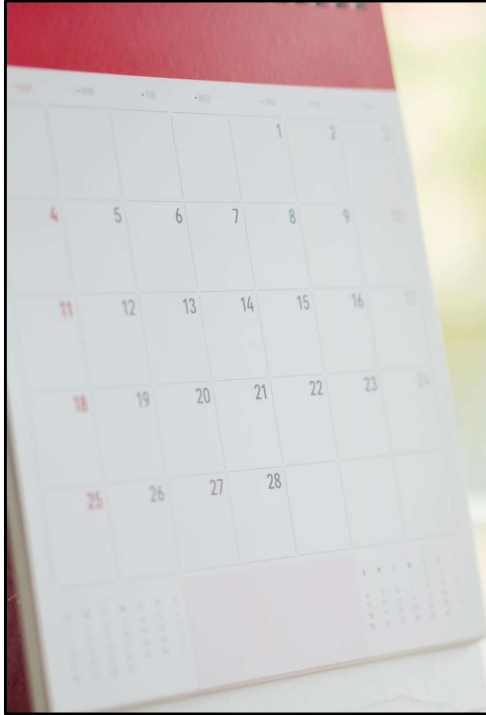


NORTH SHORE
HEALTH DEPARTMENT

**BOARD OF
HEALTH**
MAY 22, 2025



AGENDA

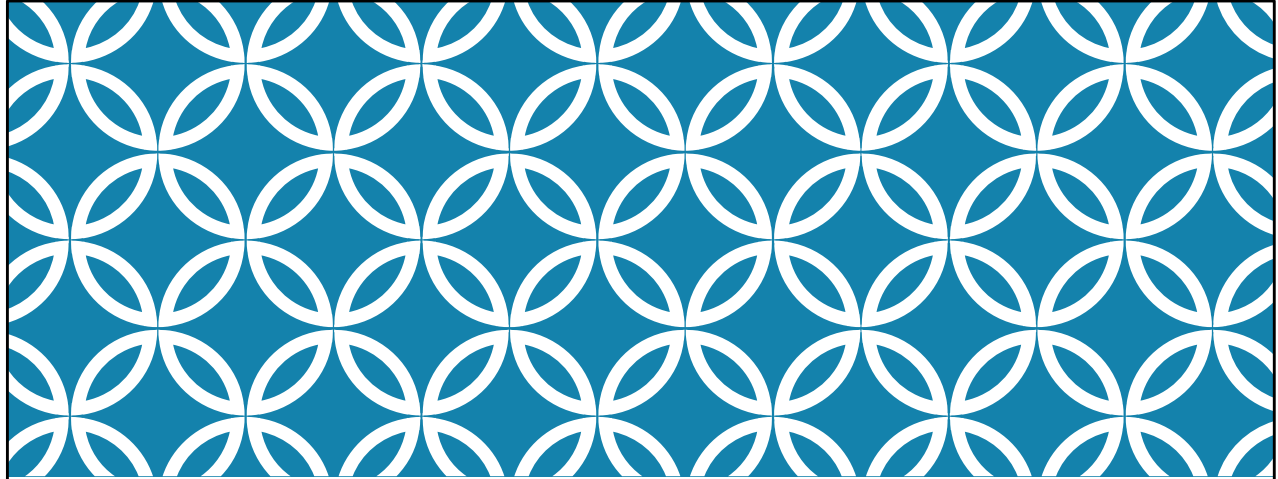
- Meeting called to order, roll call
- Approval of the February 2025 Minutes
- Health Department Administrative Updates
 - Funding Updates and Planning
 - Communicable Disease Updates
 - Community Health Improvement Planning Updates
 - Community Case Manager Updates
 - Environmental Health Updates
 - Other Items

Roll call

Motion to approve the 11/2024 minutes?

Any corrections or discussion?

All in favor?



FUNDING UPDATES AND PLANNING

WHAT'S GOING ON?

COVID dollars were termed early

- Ended 3/24 instead of 6/30
- Salary was reallocated back to allowable efforts to ensure full utilization of the grant
- We have been fully reimbursed for what remained on our contract (~\$47,000)

Immunization consolidated contract

- Long-time formula funded
- PY changed to federal fiscal year. (July-June)
- Current contract being termed in June 2025, new contract being issued, with a 50% reduction (I believe this will be about a \$4500 impact)
- Scary because immunization is required by Wisconsin Statutes § 252.04(1) and § 251.05(3)(c)

WHAT KEEPS BECKY UP AT NIGHT?

Potential for another ~\$190k of
cuts (17% of our funding)



Federal Funds Information for States
444 North Capitol Street, NW
Suite 642
Washington, DC 20001
www.ffis.org

Budget Brief 25-06, April 18, 2025

First Look: Leaked Budget Document Previews Potential Cuts to HHS Grants

By FFIS staff; contact: Trinity Tomick • 202-624-8577 • ttomick@ffis.org

Summary

A "budget passback" document, dated April 10, 2025, recently made its way into the public sphere. It appears to represent the Office of Management and Budget's (OMB's) funding recommendations for the reorganized Department of Health and Human Services (HHS) as part of the fiscal year (FY) 2026 president's budget submission. It focuses primarily on discretionary funding. HHS features prominently in the state-federal fiscal relationship, accounting for a large share of grants and funding.

		\$ in thousands				Change,	
FY 2025		FY 2025		FY 2026		FY 2025 to FY 2026	
Office/Account	Program	Enacted	Proposed	Enacted	Proposed	Enacted	Proposed
CDC	Childhood Lead Poisoning	\$51,000	\$0				-100%
CDC	Diabetes Prevention Grants	\$156,129	\$0				-100%
CDC	Emerging Infectious Diseases	\$213,997	\$255,897				20%
CDC	Ending HIV/AIDS Initiative	\$220,000	\$0				-100%
CDC	Epidemiology and Lab Capacity	\$40,000	\$0				-100%
CDC	Heart Disease and Stroke Prevention	\$155,105	\$0				-100%
CDC	Infectious Diseases and the Opioid Epidemic	\$23,000	N/A				N/A
CDC	Opioid Overdose Prevention and Surveillance	\$505,579	\$475,579				-6%
CDC	Preventive Health and Health Services Block Grant	\$160,000	\$0				-100%
CDC	Public Health Emergency Preparedness Cooperative Agreement	\$735,000					-100%
CDC	Public Health Infrastructure and Capacity	\$350,000	\$260,000				-26%
CDC	Sexually Transmitted Infections	\$174,310	N/A				N/A
CDC	Surveillance for Emerging Threats to Mothers and Babies	\$23,000	\$10,000				-57%
CDC	Tobacco	\$246,500	\$0				-100%
CDC	Tuberculosis	\$137,034	N/A				N/A
HRSA	Family Planning	\$286,479	\$0				-100%
HRSA	Maternal and Child Health Block Grant	\$813,700	\$813,700				0%
HRSA	Ryan White - Ending HIV/AIDS Initiative	\$165,000	\$0				-100%
HRSA	Universal Newborn Hearing Screening	\$18,818	\$0				-100%
SAMHSA	Building Communities of Recovery	\$17,000	\$0				-100%
SAMHSA	Certified Community Behavioral Health Clinics	\$385,000	\$0				-100%
SAMHSA	Comprehensive Opioid Recovery	\$6,000	\$0				-100%
SAMHSA	Emergency Department Alternatives to Opioids	\$8,000	\$0				-100%
SAMHSA	First Responder Training	\$57,000	\$0				-100%
SAMHSA	Grants to Prevent Prescription Drug/Opioid Related Deaths	\$16,000	\$0				-100%
SAMHSA	Improving Access to Overdose Treatment	\$1,500	\$0				-100%
SAMHSA	Infant and Early Childhood Mental Health	\$15,000	\$0				-100%
SAMHSA	Medication-Assisted Treatment (MAT) for Prescription Drug and	\$111,000	\$0				-100%
SAMHSA	Mental Health Awareness Training	\$57,963	\$0				-100%
SAMHSA	Mental Health Block Grant	\$1,070,071	\$1,007,571				-6%
SAMHSA	Mental Health Crisis Response Grants	\$20,000	\$0				-100%
SAMHSA	National Child Traumatic Stress Initiative	\$108,887	\$98,887				-9%
SAMHSA	Strategic Prevention Framework Rx	\$10,000	\$0				-100%
SAMHSA	Substance Use Prevention, Treatment, and Prevention Recovery	\$2,008,079	\$2,008,079				0%
SAMHSA	Suicide Lifeline/988 Program	\$519,618	\$519,618				0%

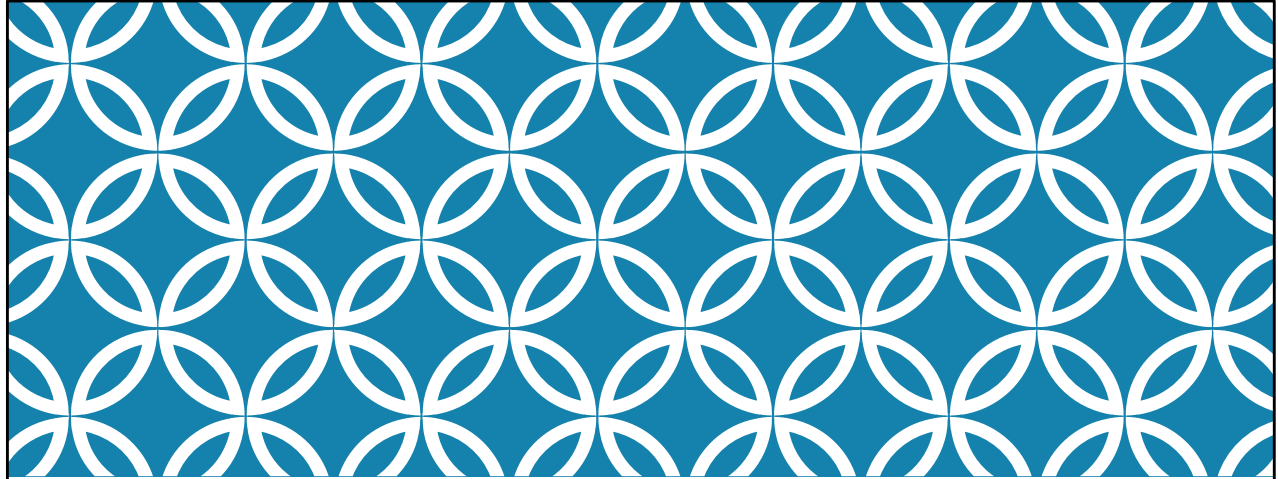
WHAT IS BECKY DOING?



- Contacting my elected officials
- Looking for supplemental funding
- In process of creating the North Shore Health Department Foundation, a 501c3 to widen our ability to apply for grants
- PHN Supervisor is leaving (moving to NC) in August, and I will not likely replace that position 1:1
- Hiring a more junior person will be most cost effective, also will take some time into filling the position
- Spending is always very reigned in at NSHD, but even more so now, while also embracing the concept of "a spent grant dollar is a safe one"
- Exploring reimbursement for billable services (lactation, SBIRT screening, lead prevention services, etc)







WHAT CAN YOU DO?

- Champion Public Health as Essential Infrastructure
- Call and write your representatives!
- Build strong relationships with elected officials and talk to them about NSHD and the critical work of public health
- Complete surveys through our allied partners like NACCHO and APHA
- Connect public health to broader community goals
- Remember NSHD when you are talking with your professional networks
- Inform Becky of funding opportunities when you hear about them



COMMUNICABLE DISEASE UPDATES




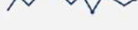






Vaccine Preventable Diseases

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
Haemophilus Influenzae, Invasive Disease*		2	6	0	2	0
Measles		0	0	0	0	0
Meningococcal Disease (N. meningitidis)*		1	0	0	0	1
Mumps		0	0	0	0	0
Pertussis (Whooping Cough)*		30	3	13	11	6
Rubella		0	0	0	0	0

MILWAUKEE COUNTY COMMUNICABLE DISEASE REPORT THROUGH MARCH 2025

Everyone interested in getting Milwaukee County CD report.

Sexually Transmitted Infections and Blood Borne Pathogens

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
Chlamydia		2368	2581	843	707	818.0
%GC Resistant to Cefixime ^{††}		0	0	0	0	0.0
%GC Resistant to Ceftriaxone		0	0	0	0	0.0
%GC Resistant to Ciprofloxacin		21	23	22.9	17.2	22.6
Gonorrhea		920	1133	351	271	298.0
Hepatitis B, Acute		1	1	0	0	1.0
Hepatitis B, Chronic		20	22	8	5	7.0
Hepatitis C, Acute		1	2	1	0	0.0
Hepatitis C, Confirmed Chronic		36	44	16	10	10.0
HIV, New Diagnosis		24	119	14	8	2.0

^{††}% GC tested that were resistant or intermediate in resistance to Cefixime. GC = gonorrhea. *Includes both confirmed and probable cases

Gastrointestinal Infections

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
Campylobacteriosis		40	32	9	18	13
Cryptosporidiosis*		5	9	4	1	0
E. coli, Shiga Toxin-Producing (STEC)		1	4	1	0	0
Giardiasis*		8	13	4	3	1
Hepatitis A		0	1	0	0	0
Listeriosis		2	1	1	1	0
Salmonellosis*		21	30	6	7	8
Shigellosis*		6	10	2	4	0
Vibriosis, Non-Cholera*		1	3	0	0	1
Yersiniosis		2	2	2	0	0



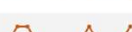
*Includes both confirmed and probable cases

Respiratory Illnesses

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
COVID-19 Associated Hospitalizations ^{^ ^*}		306	224	158	92	56
COVID-19 Pediatric Mortality ^{^ ^}		0	0	0	0	0
Histoplasmosis		2	0	1	0	1
Influenza-Associated Hospitalizations [*]		1111	472	440	524	147
Influenza-Associated Pediatric Mortality		0	0	0	0	0
RSV Associated Hospitalizations ^{^ ^*}		315	201	173	91	51
RSV Pediatric Mortality ^{^ ^}		0	1	0	0	0
Streptococcal Disease, Invasive, Group A		30	20	9	10	11
Streptococcal Disease, Invasive, Group B		32	19	11	10	11
Streptococcus Pneumoniae, Invasive Disease [*]		60	31	18	25	17
Tuberculosis		9	20	1	4	4







^{*}Includes both confirmed and probable cases

Vector Borne Illnesses

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
Arboviral Illness, Other ^{^*}		0	1	0	0	0
Arboviral Illness, West Nile [*]		0	0	0	0	0
Babesiosis [*]		1	1	0	0	1
Ehrlichiosis/Anaplasmosis [*]		0	0	0	0	0
Lyme Disease ^{*+}		23	33	7	11	5
Malaria		1	1	0	0	1

[^]Arbovirus Illness, Other includes California serogroup, Chikungunya, Dengue, Eastern Equine Encephalitis, Powassan, St. Louis Encephalitis, Western Equine Encephalitis, and Zika Virus ^{*}Includes both confirmed and probable cases. ⁺Includes both confirmed and probable cases

Other Diseases

Disease	Mar 2024-Mar 2025 Trend	Jan-Mar 2025	Jan-Mar 2024	Jan	Feb	Mar
Blastomycosis		1	9	1	0	0
Blue-Green Algae/Cyanotoxin Poisoning		0	0	0	0	0
Kawasaki Disease*		6	1	1	2	3
Legionellosis		12	0	7	2	3
Meningitis, Bacterial other		2	0	0	2	0
Orthopoxvirus, Mpox*		0	1	0	0	0

*Includes both confirmed and probable cases



NSHD MEASLES PREPAREDNESS UPDATE

- **Recent Activities & Planning Efforts**

- **Tabletop Exercise (5/1/25):**

- Facilitated by Bri with full team participation, the session identified strengths, gaps, and action items to improve response readiness.

- **Community Vaccine Access Planning:**

- Reached out to **Kroger Pharmacy** to assess supply and availability for a potential community MMR vaccine clinic—they are on board if needed.
 - **Ordered additional MMR vaccine** from the State:
 - Only allowed 10 doses/LHD due to statewide restrictions on distribution in preparation for a possible Wisconsin measles outbreak.

- **Measles Trainings for Health Officer and PHNs**

MORE ON MEASLES

○ Targeted Outreach

- **NSHD Pediatric Offices:**

- Faxed DHS measles guidance and a prevention letter – 5/1

- **School Letters:**

- Spring Break Travel Advisory – 3/14
- General Measles Awareness – 4/29

○ Long-term Care Outreach

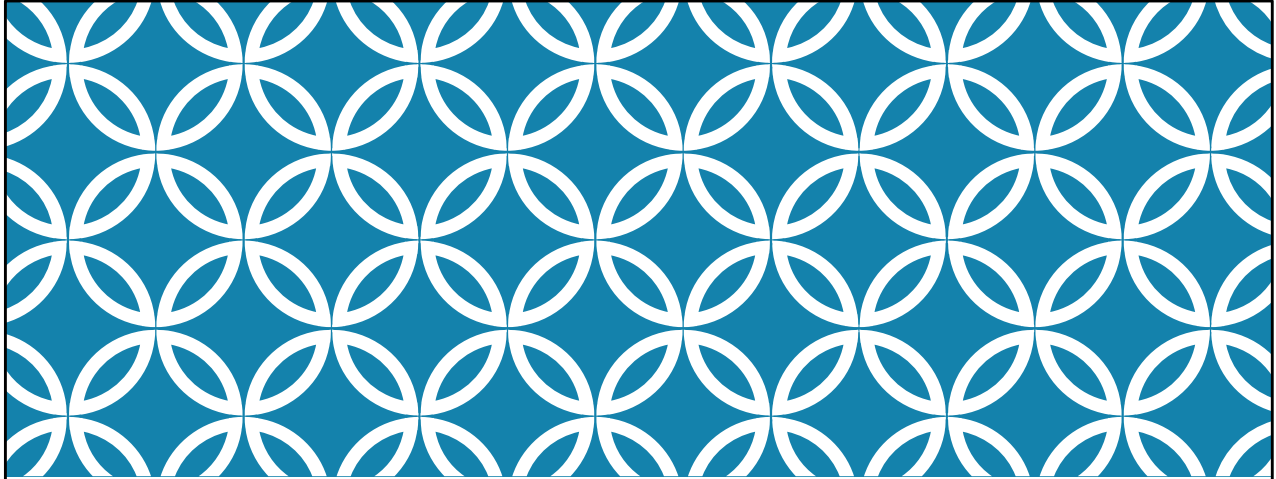
- Currently developing a communication and prevention plan for LTC facilities.

○ Ongoing Communication

- Social media outreach and messaging on measles symptoms, prevention, and vaccine reminders continues

○ Any Additional Thoughts?





CHIP UPDATES

CHIP UPDATE

- ACTION TEAMS
 - Kicked off the Mental Health Group
 - Two meetings
 - What we've done in the past
 - Others are doing
 - Concrete ideas or goals
- COMMUNICATION AND COMMUNITY ENGAGEMENT
 - Newsletter revamp
 - NextDoor
 - Strategic event participation
- LIVING PROCESS

The infographic is a 2x2 grid of colored squares with icons and text. The top-left square is purple with a white head icon containing gears, labeled '#1 Mental Health'. The top-right square is red with a white apple icon, labeled '#2 Healthy Living'. The bottom-left square is green with a white leaves icon, labeled '#3 Environmental Health'. The bottom-right square is blue with a white group of people icon, labeled '#4 Communication & Community Engagement'. To the right of the grid is a vertical light blue bar. Below the grid is a photo of a meeting room with people seated around a table, and a large blue square to its left.

Slide and notes updated 5/20/25
(TB)

- ACTION TEAMS
 - Kicked off the Mental Health Group (Bri, Jaimie, Ashley and Heather have all been assisting

with this process)

- Two meetings so far. We've talked about what we've done in the past, what others have done and identifying concrete ideas or goals

•COMMUNICATION AND COMMUNITY ENGAGEMENT

- Been testing the e-newsletter over the past few months to see what works better for community engagement – recently updated the format. Residents have had positive things to say about the changes.
- Using NextDoor for Public Agencies to help spread news about our events and other

important alerts (no alerts yet, but could)

- To be strategic, when coordinating community events, Tanya is looking at ways we can cross-collaborate on existing events as well as promote upcoming events. We want to reach our residents and be impactful doing so, while building relationships with others.
- LIVING PROCESS: this is an ongoing processes that we plan to roll out in steps to keep momentum going but also ensure accountability to the changing

landscape of public health and
our resident needs

RECENT COMMUNITY OUTREACH & EVENTS



Nurses Day at the Capitol 2025



NPHW:
Kinship Urban Farms



Careers in Public Health
with UWM College of Public Health



UWM Public Health
Career Night



Nurses Day at the Capitol 2025



NPHW: UWM College of Public
Health BSPH at NSHD



Brown Deer Elementary STEAM Day:
The Wonderful World of Germs



Parent Prevention Day:
Hidden in Plain Sight – I SPY

Tanya and Heather updated 5/20 and 5/21

•Nurses Day at the Capitol; Feb 2025

- WPHA PHN Section funded vendor table cost
- 18 PHNs attended (Ashley & Heather organized PHN presence via the statewide PHN Advocacy Workgroup)
- PHNs represented 4 of the 5 WI regions (Southeastern, Southern, Western, Northern)
- 9 agencies (LTHDs, DHS, UW-Milwaukee) represented
- Engaged with 18 different legislators and/or staffers
- Gave out 500+ swag items (pins, stickers, pens, etc)
- Over 1,100 nurses & student-nurses attended event

•NPHW:

- Kinship Urban Farms: the idea to participate in this event was partially inspired by feedback from our CHIP Mental Health group.
- UWM College of Public Health NSHD Field Trip:
 - PH600 is the classroom component of the integrative experience (field placement), taken in the final semester

- Students visited NSHD as part of a field trip – this is the first time the class has gone to an offsite location.
 - Students found the visit valuable for understanding public health in practice
 - It gave insight into both career paths and what day-to-day public health work looks like
- Career Events
 - Careers in Public Health with UWM College of Public Health
 - Tanya partnered with Julia (UWM PH PH600 instructor & community outreach manager) to speak with 6th & 7th grade students about public health.
 - The students met with three different professions that day—public health, police, and nurses—allowing Tanya to highlight how public health connects with those fields.
 - When asked to identify public health in action, students came up with more examples than Tanya or Julia had on their list– these students know what public health.
 - Students commonly described public health as “helping the public or whole community with health needs,” mentioning examples like vaccines and school lunches.
 - Brown Deer Elementary STEAM Day: The wonderful world of germs
 - Ashley and Heather got the opportunity to speak with Kindergartners about germs
 - UWM Public Health Career Night
 - Bri and Jaimie spoke with students about careers and roles in public health
 - Discussed opportunities available through NSHD
 - Several students expressed interest in internships and took information on how to apply
 - Avery assisted with the session, providing a meaningful connection as a current Junior who knows many of the students
 - Parent Prevention Day: Hidden in Plain Sight – I SPY
 - NSHD hosted Parent Prevention Day: Hidden in Plain Sight – I SPY, an event led by The House of Kings and Priests
 - Featured a replica teen bedroom designed to help parents identify signs of hidden substance use
 - Aimed at raising awareness and supporting early intervention and prevention – focused on opening up lines of communication with teens
 - Attendees explored the room and then joined a panel discussion which included

retired police officers, mental health providers, and other experts

- Several partner organizations we collaborate with through OD-PHAST and Rise Drug Free MKE were on site tabling
- The event provided a great opportunity to strengthen relationships with these groups
- Panelists and agency staff had meaningful conversations about how to adapt programming to better reach youth, especially through social media
- Tanya and LaTasha connected with Community Medical Services (CMS) and Rise Drug Free MKE
- Discussed strategies for engaging North Shore parents, including setting up at parent-teacher conferences or hosting mobile events at farmers markets

•Not pictured: Brown Deer Farmers Market Winter Pop-Up

UPCOMING COMMUNITY OUTREACH & EVENTS

- Goat Yoga!
- North Shore Community Kids Safety Event
 - Our first summer community event in Glendale, featuring NSFR, Glendale Police, and other partners, will offer free bike helmets (while supplies last).
- Car Seat Safety Event
 - Offering free car seats with car seat installations (registration required), courtesy of a donation through Safe Kids WI.



Tanya and Heather updated 5/20 and 5/21

- Goat Yoga! On May 31 with Brown Deer Farmers Market and Park & Rec
- North Shore Community Kids Safety Event

UPCOMING COMMUNITY OUTREACH & EVENTS

- Community Wide
 - Farmers Markets
 - Bike Rodeos
 - Community Concerts
- Fall Events: New Opportunities to Promote
- Flu Clinic (6 total clinics)
 - 3 community clinics (Shorewood, Glendale, Brown Deer)
 - 3 school-based clinics (Nicolet HS, Brown Deer MS/HS, USM)

Tanya & Heather updated some information 5/21

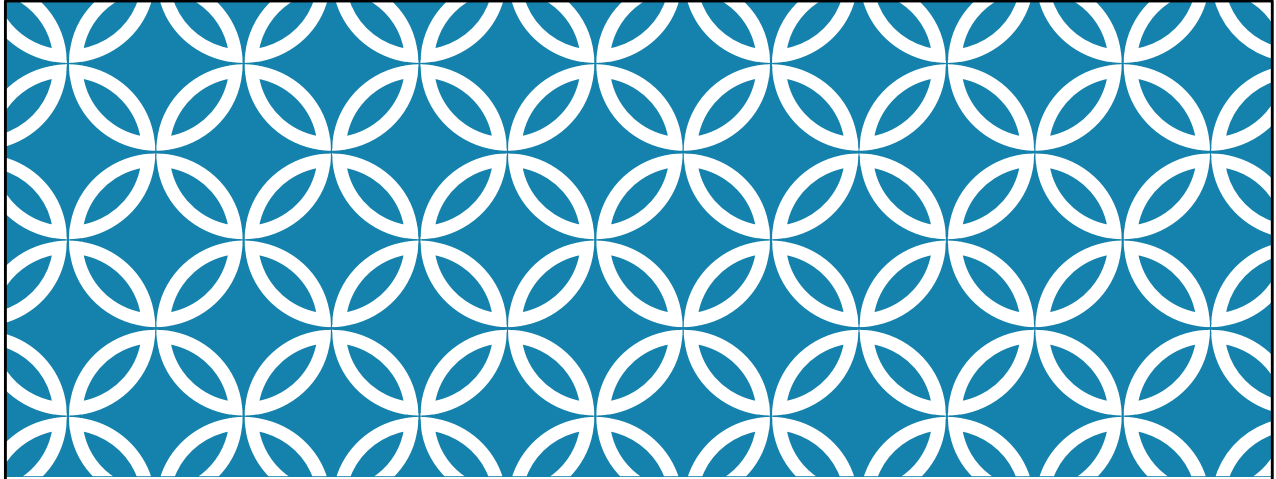
- Community Wide: in process of scheduling these events for the summer and fall
 - Farmers Markets
 - Bike Rodeos
 - Community Concerts (Vibes and Live at the Oasis – new this year for

us!)

- Fall Events:
 - New opportunities to promote events by attending farmers markets or other events into the fall.
 - Allows us to spread out events for staff availability.
 - Gives us additional opportunities engaging with the community, in person
 - Provides new opportunities to promote events like the fall flu clinics.
- Flu Clinic (6 total clinics)
 - 3 community clinics (Shorewood,

Glendale, Brown Deer)

- 3 school-based clinics (Nicolet HS, Brown Deer MS/HS, USM)



CASE MANAGEMENT UPDATES

CASE MANAGER HIGHLIGHTS

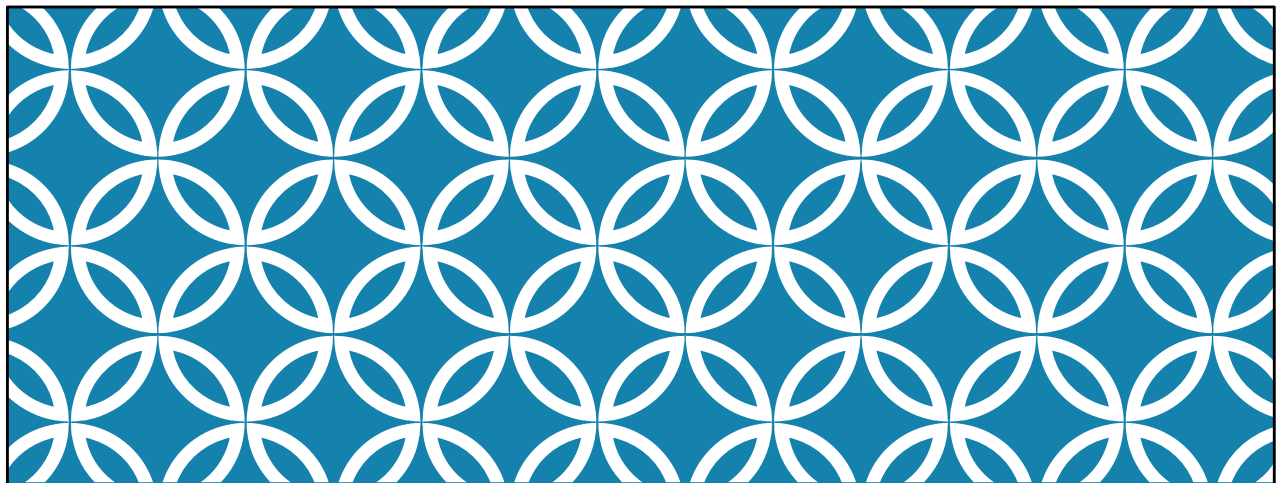
- Door hangers have been created to leave at missed home visits
- Coordinated a fall prevention resource fair
- Created a charting form and tracking document (continually refining)
- Contacted 654 NS residents, took 42 referrals from NSFR and conducted 17 ride alongs with NSFR
- Contacted 654 NS residents, took 42 referrals from NSFR and conducted 17 ride alongs with NSFR
- Created harm reduction kits to provide to individuals with recent OD and their loved ones with resources
- Followed up with 100% of the individuals who had a non-fatal OD

Focus in on the families and their stories. Get specifics on access to care. Use emotion. Gain photos, quotes, and stories of victims.

2024	Falls	# at Institution	2025	Falls	# at Institution	Percent Change	Percent change at Inst.
Jan	97	35	Jan	107	35	+10.3	0
Feb	83	22	Feb	91	26	+9.6	+18.2
March	90	26	March	99	31	+10	+19.2
Total	270	83		297	92	+10	+10.8

2022 fall-related deaths 551 total deaths	2023 fall-related deaths 496 total deaths	2024 fall-related deaths 518 total deaths	2025 fall-related deaths 138 deaths to date
Q1: 7	Q1: 3	Q1: 8	Q1: 9
Q2: 6	Q2: 3	Q2: 5	
Q3: 4	Q3: 5	Q3: 4	
Q4: 6	Q4: 9	Q4: 10	
Total: 23 (4.2% of all deaths)	Total: 20 (4% of all deaths)	Total: 27 (5.2% of all deaths)	6.5% of all deaths

	Jan	Feb	March
Total Referrals from NSFR	8	6	10
EMS Providers Trained	0	0	0
Completed Home Visits	10	17	12
Follow ups on falls (letter, phone call, case consult)	233	190	241
Overdose follow ups	2	1	1
Community Agency Site Visits	3	3	2



ENVIRONMETAL HEALTH UPDATES

WATER SAFETY AT HOTEL AND MOTEL POOLS

- From 2016-2024 there have been 77 drownings and near-drownings
- 88% happened in a hotel or motel non-lifeguarded pool and children under 12
- 44% happened in Milwaukee County
- 50% happened in a group setting like a birthday party
- 49% due to 'adult lost contact' which was the leading cause for children under 12



ADULT LOST CONTACT

The supervising adult:

- Looked away or got distracted
- Using a cell phone
- Too much noise or loud music
- Adult left the pool area without children
- Adults previous experience with pools did not train them to see danger
- Substance use

TIPS ON PREVENTION

Alternate activities

Educate supervising adult on
pool depth and rescue
equipment

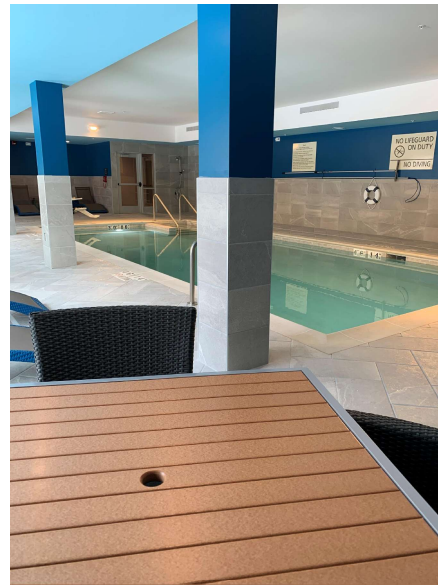
Safety walk-through

Personal floatation devices

Proper adult supervision

1:4 Children 6 and under

1:10 Children 7 and up





FIRST ANNUAL ANIMAL BITE WORKSHOP

- Gave a presentation to a police representative for each community
- Talked about why animal bite follow up is important to prevent rabies transmission
- Approximately 98.6% of rabies-positive animals are bats
- Discussed our process and how to streamline it with the Police Departments
- The group gave feedback on how to make the process easier on officers

NSEHC UPDATES



Hosted the USDA at our Southeast Regional Meeting – Meat labels, approved source

September 2nd we are invited to present on food safety for seniors the YMCA

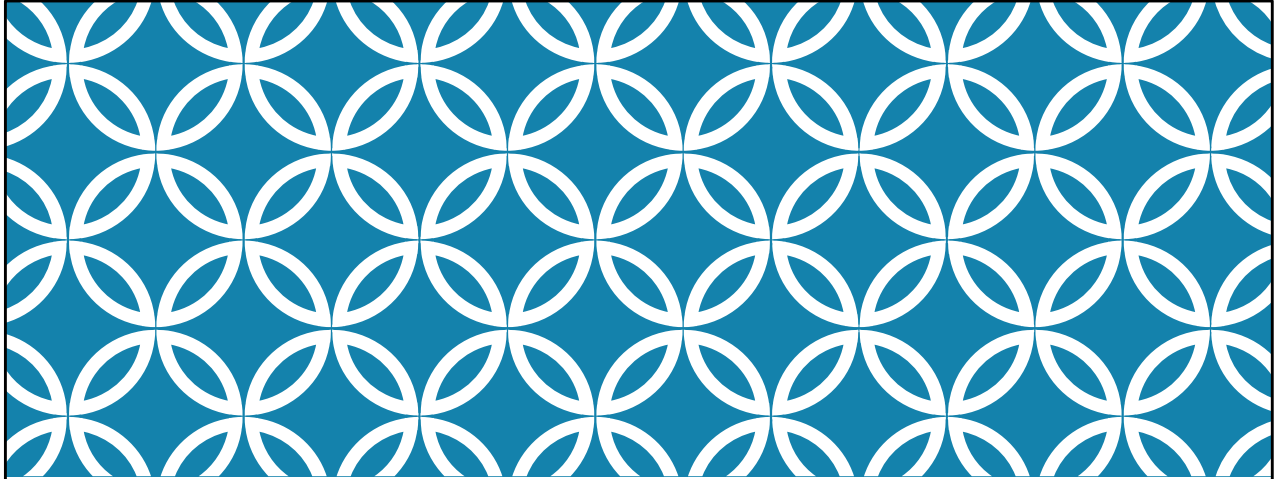
Max is interviewing for an EH position in Kenosha

Ramping up pool inspection and beach testing for the summer

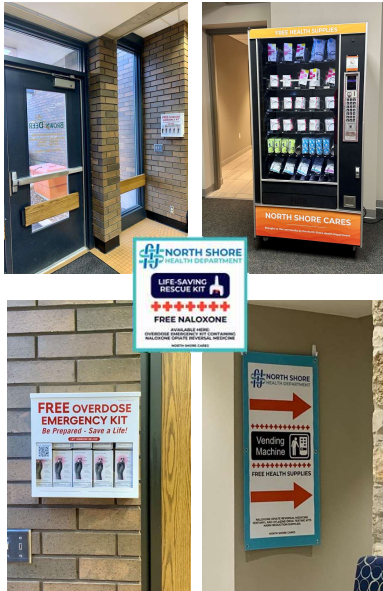
All license renewals are due by June 30th

180 total inspections completed since our last meeting

Revising forms and updating policies and procedures



OTHER UPDATES



SUBSTANCE USE PREVENTION & HARM REDUCTION

- Brown Deer Naloxone Box Installed
- Signs and Banners
- Opioid Education and Naloxone Distribution
 - 56.95% increase in distribution when comparing Jan – May 2024 to Jan – May 2025
 - 6.82% increase in trained people when comparing Jan – May 2024 to Jan – May 2025

Slide and notes updated 5/20/25 (TB)

We installed a naloxone box in Brown Deer Village Hall, where the vending machine used to be located. We have had a good response rate with folks accessing naloxone.

The box pictured is affordable and less cumbersome as a vending machine so there are more possibilities of installing throughout the North Shore.

We are in process of hanging banners/signs and window clings at both locations to help residents know its available and where to find it.

We continue to provide Opioid Education and Naloxone Distribution.

- 56.95% increase in distribution when comparing Jan – May 2024 to Jan – May 2025
- 6.82% increase in trained people when comparing Jan – May 2024 to Jan – May 2025. We recently trained Shorewood School District.

Slide 32

AK0

[@Becky Rowland] SBS and Parent Social Group slides and notes completed.
Ashley Kay, 2024-11-18T20:31:21.020



PARENT SOCIAL GROUP (PSG)

○ Purpose:

- Create a welcoming space for caregivers to connect, support mental wellness, and reduce postpartum isolation.

○ What's Offered

- Social time & peer connection
- Public health info & Q&A with NSHD staff
- Activities for children

○ Where Have We Been:

- North Shore libraries

○ Wrapping Up for Summer:

- PSG sessions will pause for the summer starting in June and resume in Fall 2025
- We will be ending the season with a collaborative session at North Shore Wellness Collective in WFB on 6/12.

- Last year, we launched the Parent Social Groups program to provide new parents with a safe, supportive space to connect and promote mental wellness during the postpartum period.
- This year, we're excited to expand the program to include all caregivers—whether they are parents, grandparents, aunts, uncles, legal guardians, or non-birthing partners.
- These gatherings are met to be a safe and relaxing opportunity for caregivers to socialize, share stories, and get answers to their public health questions. We also provided resources on mental health and wellness, and staff will be available for Q&A.
- We're offering entertainment for children to ensure families can participate and feel comfortable.
- Our events are hosted at libraries in North Shore, Shorewood, and Whitefish Bay, with Whitefish Bay seeing the best turnout so far. Average turn-out per group is 2-3 families. So far, we held 5 groups and plan to do two more in December and continue the groups next year.
- We are looking forward to reconnecting with families and expanding this initiative to build community support among caregivers.
- Question is Brown Deer has had any babies that died.

INTERNS & STUDENTS

• Naomi Olatunji BSN, RN, MPH Capstone Project

• **Purpose:** Investigate childhood vaccine decline in the North Shore community through analysis of local trends and exemption rates, identifying parental decision-making factors, and recommending evidence-based interventions.

• **Methods:** Mixed-methods design

- Quantitative: local, state & federal immunization data
- Qualitative: Six interviews with parents/providers

• **Themes Identified:**

- Vaccine safety concerns
- Institutional distrust
- Ideological beliefs
- Peer influence
- Policy confusion



• **Discussion:**

- High education & income ≠ high vaccine compliance
- Vaccine hesitancy is driven by emotion, not lack of information
- Trust, not access, is the central issue

• **Recommendations:**

- Use trusted local settings (schools, libraries)
- Ensure empathetic communication training for providers

Heather added 5/20/25

Purpose:

- To investigate childhood vaccine decline in the North Shore community through analysis of local trends and exemption rates
- Identify parental decision-making factors
- Recommend evidence-based interventions aimed at increasing vaccine compliance

Methods:

- Mixed methods approach
- Quantitative component was a secondary data analysis using local (NSHD provided) imms reports, state imms data (WIR) and federal imms data (CDC)
 - Percentage of Fully Vaccinated 24mo Children was 78% in 2018 and fell to 75% in 2022
 - Percentage of Fully Vaccinated 6yo Children was 74% in 2018 and has remained stable at 75% in 2022
 - Percentage of K-12 Children who met vaccine compliance in the 2014-2015 school year was 92.5% which fell to 89.2% during the 2023-2024 school year
 - *might be good time to remind that we need 95% herd immunity to protect against measles transmission, as well as inform about the four schools in our

jurisdiction that have really low rates*

- Qualitative component was an analysis of six publicly-available interviews (mix of pediatricians, school staff, PH professionals and parents of school-aged children)

Thematic Analysis:

- Vaccine safety concerns (related to pharmaceutical industry motives)
- Institutional distrust (related to historical medical mistreatment)
- Ideological beliefs (related to religious and non-religious/lifestyle)
- Peer influence (related to misinformation on social media like alarming anecdotes frequently shared)
- Policy Confusion (related to changing school mandates, unclear communication from health authorities, differing exemption policies between schools, etc) *could be a good time to share our experience with this in the fall with BD and why we did a last-minute grassroots type clinic at the school to reduce as many barriers as possible*

Discussion:

- High education & income ≠ high vaccine compliance
- Vaccine hesitancy is driven by emotion, not lack of information
- Trust, not access, is the central issue

Recommendations:

- Use trusted local settings (this year we are increasing flu clinics from three to six; half of the clinics will be at schools and half will be in trusted settings including our site and two libraries)
- Ensure empathetic communication (In 2024, NSHD staff received training in trauma-informed care & in 2025, NSHD staff received training in mental health first aid – both trainings emphasized the importance of using empathetic communication and motivational interviewing techniques)
- Other: Implement community-informed health education campaigns that directly address misinformation in collaboration with trusted sites (schools, libraries, etc). Goal would be for residents to see the same evidence-based information shared by different credible sources around the community. Naomi shared a real-world example of this – the Community Health Club in south Texas community found that participants were more than twice as likely to receive a COVID-19 vaccine than the control group when they were presented with vaccine information (including scientific facts AND emotional stories) at a credible community site as well as the opportunity to be vaccinated there.

Limitations:

- Relied on incomplete and/or unvalidated immunization data
- Unable to control for confounding variables
- Relied on publicly available interviews which may or may not be reflective of North Shore residents
- Future research could explore more direct community input through next CHA or focus groups in partnership with schools/libraries or also longitudinal data tracking

INTERNS & STUDENTS

Max Sharkey: OEND Outreach Hot Spots and Targeted Outreach

- NSF/R EMS Call Data
 - Identified hot spots (areas of increased activity)
 - Data will assist in targeted OEND outreach activities



- Hands-On Experience at NSHD
 - Classroom theory → Real world application
 - Assisted with OFR case review
 - Found out he enjoys EH work

Address Type	Count of Calls
House	182
APT	98
Mental Health Clinic	43
Street	27
Medical Facility	26
Public Building	25
Hotel	24
SNF	23
Police Department	21
Grocery Store	8
Roadways	7
Gas Station	5
Restaurant	5
Assisted Living Facility	4
Pharmacy	3
Fire Department	3
School	1
Grand Total	505

Slide and notes updated 5/20/25 (TB)

Max Sharkey

- UWM BSPH Integrative Experience
- Graduated this past weekend!

OEND Outreach - Hot Spots and Targeted Outreach

- Project used NSF/R EMS call history data from Sept 7, 2020 – Jan 24, 2025 to identify hot spots (areas of increased activity) in the North Shore, including address type.
- 55% of opioid overdose related calls were located at private residences
- With the data we have, and the analysis he did, it will assist NSHD in targeted OEND outreach activities, not just by geography but also by the address type.

Hands-On Experience at NSHD

- Job shadowed and interviewed staff to learn more about their roles
- Assisted with case review research for the May 2025 Overdose Fatality Review
- Found he likes EH! He has a job interview this week with another LHD in the area

for an EH position.

INTERNS & STUDENTS

Alex Einweck: Strategies to Reduce Fatal Overdoses in Trade-Working Populations

- Increased substance fatalities among trade-working residents
- Multiple reasons for use
- Targeted communications
 - Website
www.workhardworksafe.carrd.co
 - QR codes
 - Other sources like Unions



Slide and notes updated 5/20/25 (TB)

Alex Einweck

- UWM BSPH Integrative Experience
- Graduated this past weekend!

Strategies to Reduce Fatal Overdoses in Trade-Working Populations

- Increased substance fatalities among trade-working residents in the North Shore lead the OFR team to ask what could be done to intervene or prevent these fatalities?
- Lit-reviews and interviews with people with lived experiences, found multiple reasons for use: intentional and unintentional

• **Intentionally** combining an opioid with a stimulant

- Feeling the stimulant enhances the effects or duration of opioids
(Friedman et. al., 2023)

- Belief this may decrease risk of fatal OD, need to re-dose (*Friedman et. al., 2023*)
- Self-treating with or extended use of opioids after a workplace injury (*Hasgul et. al., 2025*)
- Utilizing stimulants to combat drowsiness (*Hasgul et. al., 2025*)
- To cope with physical and psychological effects of stressors
- Need for targeted communication on how to reduce harm such as a
 - Website
 - QR codes
 - Other sources like unions

INTERNS & STUDENTS

Avery: Public Health Intern

- UWM BSPH Student (Junior)
- 2025-2026 Froedtert Memorial Hospital Scholarship Recipient
- Region V Public Health Training Center – Student Placement Stipend
 - Project: Environmental Health Surveillance (Ticks and Mosquitos)
 - Working in partnership with DHS
 - Previous partnership in 2023



Slide and notes updated 5/20/25 (TB)

Congratulations to the Zilber College of Public Health students who have received Froedtert Memorial Hospital Scholarships. More than 30 renewable scholarships are available annually for new freshmen, transfer, continuing, certificate, master's, and clinical doctorate students pursuing health-related fields.

The Froedtert Memorial Hospital Scholarship average award per recipient will be \$5000 per year. The award includes renewable 4-year awards to incoming freshmen, renewable 2-year awards to continuing and transfer students, and several awards for graduate degree students.

Awards for incoming new freshmen are structured to increase in value each year to provide incentives to achieve academically.

•Region V Public Health Training

Center – Student Placement Stipend

- Project: Environmental Health Surveillance (Ticks and Mosquitos). Must be 100 hours for undergraduate students. Will happen over the summer into early fall.
- Working in partnership with DHS to increase surveillance efforts in the community, including the North Shore.
- More often than not, DHS conducts this work but always welcomes LHD support and involvement.
- Last partnered in 2023 and since then, DHS hasn't had other LHD's working with them.

The Region V Public Health Training Center (RVPHTC) supports projects between students, faculty, and community partners that seek to improve public health in medically underserved communities. Thank you for your interest in the awards for student placement experiences being offered by the RVPHTC. Funds for these awards have been made available by a grant from the Health Resources and Services Administration (HRSA).

WORKFORCE DEVELOPMENT

- Opioid, Stimulant and Trauma Summit (Becky and Tanya)
- TB Nurse CM training (Becky)
- WPHA Conference (Becky)
- Measles Trainings! (PHNs and Becky)
- ICS 300 and Functional Assessment Service Team (FAST) Training (Bri)
- FDA Plan Review (Brad)
- TB Nursing Symposium and TB Summit (Ashley)
- Black Maternal Health Symposium (Ashley and Bri)
- Youth Canvas: Youth Mental Health Conference (Becky)

WORKFORCE DEVELOPMENT

- Certified Lactation Consultant Course (Bri and Ashley)
- Policy and Advocacy Training (Team)
- ND@C (PHNs)
- WI Substance Use Prevention Skills Training (LaTasha)
- Continued ESSENCE Trainings (Tanya and Bri)
- National Overdose Fatality Review: Turning the Tide (Tanya)
- Council of State and Tribal Epidemiologists (CSTE) 2025 Conference (Tanya and Bri)
- Academy of Sciences Wisconsin State Chapter Charter Committee (Tanya)
- Region V Public Health Leadership Institute 24-25 Cohort (Heather)