



BOARD OF HEALTH

FEBRUARY 19, 2026

AGENDA

- Meeting called to order, roll call
- Approval of the November 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
- Programming Updates
- Other Updates
- Academic Updates

FUNDING UPDATES AND PLANNING



FUNDING UPDATES

- Q4 financial review 2/18, ended 2025 year in the black!
- 2026 is looking bright!
- Received \$5750 from the River Hills Foundation for tech
- Currently applying for Advancing Healthier Wisconsin Grant
 - Becky will serve as admin coordinator for the project and it will cover part of LaTasha's salary

Providing funding and resources to researchers, organizations, and communities devoted to improving the health of the people of Wisconsin.



Public & Community Health
Improvement



Health Workforce Education &
Development



Health-Focused Research

COMMUNICABLE DISEASE UPDATES



MEASLES UPDATES

Contact Tracing

- Our RNs were involved in contact tracing related to the MKE Airport exposure on 1/29

Targeted Outreach

- We continue to share messaging about measles on our socials with the goal of increasing awareness about symptoms, prevention, travel precautions, and vaccine reminders
- We continue to receive phone calls from residents or former residents inquiring about their immunization status and booster recommendations
- Sent a Spring Break Travel Advisory letter to be co-signed by Becky & Dr. Jay and widely distributed to all public and private schools in the North Shore

Preparedness

- Plan for internal tabletop exercise with NSHD team to improve response readiness
- DHS is hosting a virtual measles tabletop discussion on 3/19/2026

CHIP UPDATES



NORTH SHORE THRIVE 2025-2031 CHIP UPDATE



NORTH SHORE THRIVE 2025-2031 CHIP UPDATE

- 2022 CHA
- 2024 Community Conversations
- Action Team Meetings
- Board of Health
- Residents
- Subject Matter Experts
- Staff



MENTAL HEALTH & SOCIAL ISOLATION

Mental health focuses on emotional, psychological, and social well-being, affecting how people think, feel, and interact with others.

Goal	Objective	Strategy	
Promote mental wellness through healthy living and community engagement.	Increase community participation in wellness activities and public health education by offering inclusive, locally rooted events and resources throughout 2026.	1.1	Intergenerational Connection Series: Create opportunities for meaningful connection across age groups through shared activities, guided dialogue, and mutual learning.
		1.2	Pop-Up Connection Labs: Deploy temporary, interactive wellness stations at community events and public spaces that encourage reflection, conversation, and resource discovery related to mental health and connection.
Increase public awareness of mental health resources.	Enhance public understanding and visibility of mental health resources across the North Shore community by implementing consistent outreach, education, and data-informed collaboration throughout 2026.	2.1	Resource in Every Pocket: Invite 10+ partner organizations to pledge that every staff person who regularly interacts with the public has one mental health resource saved in their phone or at their desk
		2.2	Crowdsourced Community Wellness Calendar: Develop and maintain a shared regional wellness calendar that highlights community-led activities, positioning NSHD as a connector and amplifier rather than a sole event host.
Increase awareness of mental health resources and opportunities for social connection across the North Shore.	Expand reach and engagement with mental health information by strengthening use of NSHD's trusted communication channels in 2026.	C1	Ask the North Shore: Interactive Story Campaign that features short, anonymized "real questions" submitted by residents about stress, loneliness, caregiving, you mental health, etc paired with simple, local resource answers.
		C2	Primary, Trusted Source: Position the NSHD e-newsletter and email listserv as the primary, trusted source for local mental health resources, events, and support—promoted consistently through community events, partner communications, mailed materials, and digital outreach.

NORTH SHORE THRIVE 2025-2031 CHIP UPDATE

- Surveys
- AI data analysis
 - Detailed models, scripts & focus
 - Hidden insights
 - Multiple systems



Healthy living includes practices that lower illness risk, such as preventing infectious diseases, managing chronic conditions, and encouraging physical activity, nutrition, and wellness.

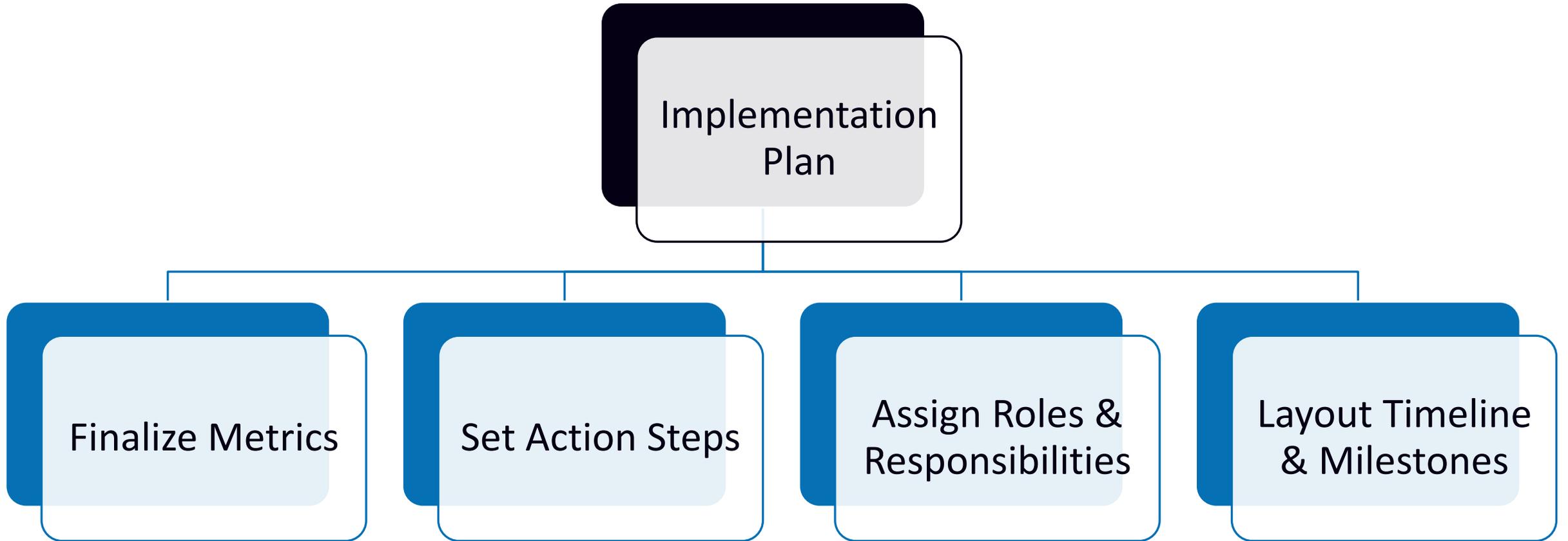
Goal	Objective	Strategy	
Support mental wellness through healthy living.	Integrate mental wellness messages and activities into all North Shore healthy living programs in 2026.	1.1	North Shore Walks: Promote self-guided walking routes with printed or online maps that highlight safe, accessible paths (indoors and outdoors) in at least 30% of the North Shore municipalities.
		1.2	Everyday Wellness Signal Project: Work with community spaces (parks, trails, libraries, rec centers) to install subtle, unexpected mental wellness cues—signage, decals, or prompts—that connect healthy living with emotional well-being.
Improve access to healthy foods and nutrition education.	Increase awareness and use of healthy food resources and nutrition education in 2026.	2.1	Community-Curated Food Resource Map: Develop a living, community-curated map of food resources (pantries, markets, meal sites, classes), with residents and partners contributing updates and insights.
		2.2	Unexpected Nutrition Education Pop-Ups: Deliver ultra-short, practical nutrition education in unexpected places—libraries, food pantries, apartment buildings, community events—focused on real-life constraints and choices.
Increase awareness of healthy living resources and opportunities to live healthier across the North Shore.	Increase engagement with healthy living information by delivering consistent, practical messaging through preferred community communication channels in 2026.	C1	Healthy Living Messages: Integrate healthy living messages (nutrition, movement, stress, prevention) into all NSHD communications using clear, real-life framing, and consistently direct residents to the e-newsletter as the central hub for healthy living updates and opportunities.
		C2	Stories from Around the Block: Gather resident stories from different municipalities and blocks, about one small healthy living change (incorporating 2 5-minute walks when 10 minutes is too much, stretching for a minute) or information about different health concerns (BE FAST – stroke or hands only compression) and include a simple heat map graphic.

NORTH SHORE THRIVE 2025-2031 CHIP UPDATE

- Considerations: What *is* possible?
 - Capacity
 - Scope
 - Resources
 - Efforts x Impact/Outcomes
 - Staffing
 - Statutory requirements
 - Current work

ENVIRONMENTAL HEALTH		
Environmental health examines how the environment—air, water, land, and living conditions—impacts health and works to reduce harmful exposures.		
Goal	Objective	Strategy
Reduce exposure to environmental hazards in homes and neighborhoods.	Decrease community exposure to hazards by providing education and promoting mitigation resources in 2026.	1.1 Environmental Health Action Toolkits: Create clear, non-technical action toolkits for residents, landlords, and community leaders that outline exactly how to test, mitigate, and access assistance—designed for peer-to-peer sharing.
		1.2 Community Environmental Health Champions: Recruit and train trusted non-EH community members (realtors, landlords, home inspectors, contractors, parent leads, librarians) to serve as informal environmental health champions who normalize testing and mitigation.
Promote sustainable practices and reduce pollution.	Increase adoption of green initiatives through outreach in 2026.	2.1 Green Champions: Highlight local “green champions” and projects (community gardens, clean-ups, “No Mow May” through short spotlights.
		2.2 North Shore Sustainability Baseline and Pulse: Establish a shared, cross-community baseline for recycling, composting, pesticide use, and related nuisance complaints using existing municipal, hauler, and complaint data—then conduct one or two brief “pulse checks” in 2026 to track change.
Strengthen public understanding of environmental health risks and solutions.	Increase community knowledge of environmental hazards and resources through clear, timely, and focused communication in 2026.	C1 Environmental Health Across the Community: Pair NSHD environmental messages with a short quote from a local municipal leader or DPW leader plus a resident, to show shared responsibility and community action.
		C2 30-Seconds: Create a short series of 30-second check prompts (e.g., “Look at your basement floor”, “check one window frame”) shared as images, short videos, or reels tied to seasons.

NORTH SHORE THRIVE 2025-2031 CHIP UPDATE



NORTH SHORE THRIVE 2025-2031 CHIP UPDATE



PUBLIC HEALTH COMMUNICATION & COMMUNITY ENGAGEMENT

This involves sharing important health information and building partnerships with communities to promote well-being and improve access to resources.



MENTAL HEALTH & SOCIAL ISOLATION

Mental health focuses on emotional, psychological, and social well-being, affecting how people think, feel, and interact with others.



HEALTHY LIVING

(Chronic Disease, Communicable Disease & Healthy Aging)

Healthy living includes practices that lower illness risk, such as preventing infectious diseases, managing chronic conditions, and encouraging physical activity, nutrition, and wellness.



ENVIRONMENTAL HEALTH

Environmental health examines how the environment—air, water, land, and living conditions—impacts health and works to reduce harmful exposures.

Shared ownership

Alignment of cycles

Living process

Forward-thinking

Innovative ideas

Changing needs

Community

COMMUNITY OUTREACH & EVENTS

Winter Events: Continuing Community Connection

- Glendale-River Hills School District Showcase and Community Resource Fair
- Brown Deer Winter Market
- Brown Deer Schools: Parent Education on Harm Reduction & Identification of Vaping
- Ask a Nurse/Blood pressure clinics

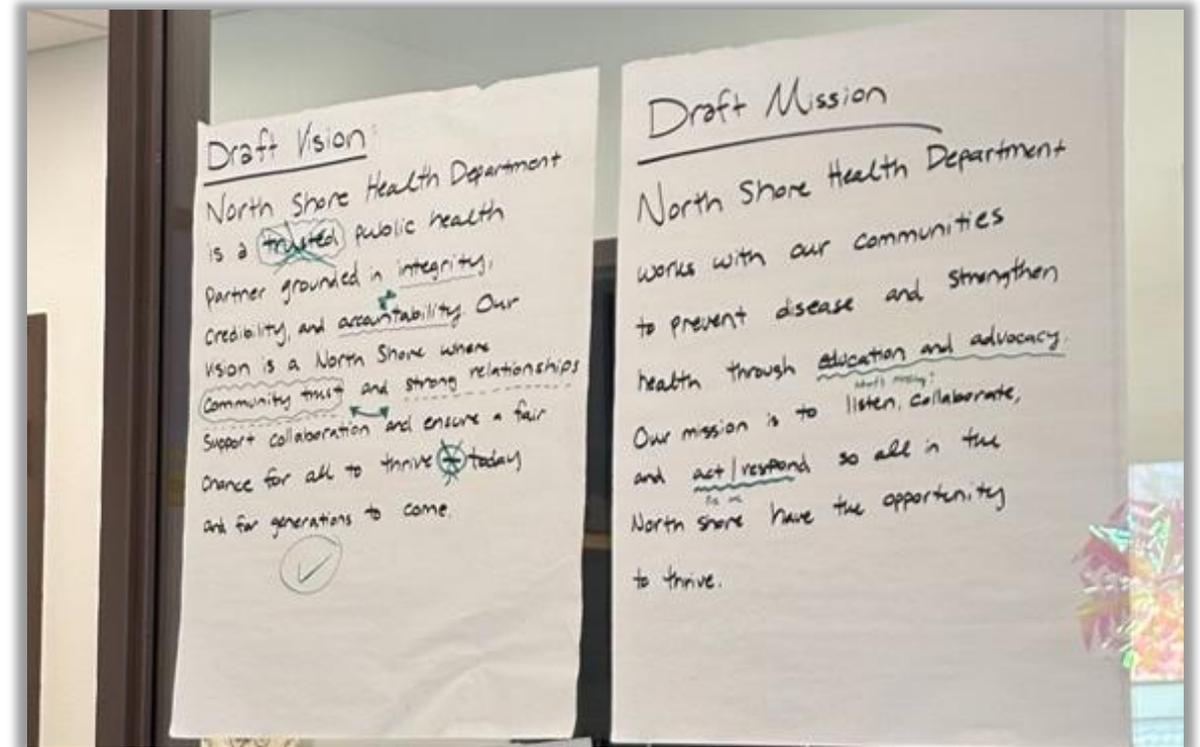
Spring Events:

- PI Day Winter Market at Library/ Brown Deer Winter Farmers Market
- UWM Career Night
- May Mental Health Event
- Spring MCH Parent Social Groups



STRATEGIC UPDATES

- 2026-2031 Strategic Plan
 - Mission, Vision, Values
 - Team goals and objectives
- 2025 Annual Report
 - What we do
 - Why it matters
 - Impacts
 - Highlights:
 - By the numbers
 - The people we serve (stories)
 - Alignment to the CHIP



2025 RETREAT!

- Breakfast together
- Community wish flags
- Photo ops
- Lunch together
- Gift exchange
- Strategic planning with Wisconsin DPH



NEW MISSION STATEMENT

North Shore Health Department works with our communities to prevent disease and strengthen health through education and advocacy. We listen, collaborate, and act so all in the North Shore have the opportunity to thrive.

NEW VISION STATEMENT

North Shore Health Department is a public health partner grounded in integrity, credibility, and accountability. Our vision is a North Shore where strong relationships and community trust support collaboration and ensure a fair chance for all to thrive, today and for generations to come.

UPDATED VALUES

Accountability & Trust – We act with integrity, transparency, and responsibility to our communities.

Education & Empowerment – We share knowledge that builds understanding, confidence, and informed choice.

Prevention & Wellness – We prevent harm and support conditions that allow health to flourish.

Collaboration & Engagement – We work with communities, partners, and systems to drive action.

COMMUNITY WISH FLAGS



CASE MANAGEMENT UPDATES



CASE MANAGEMENT UPDATES

Performance Measure	2025 Annual Total
Total NSFR Referrals	147
EMS Providers Trained	62
Completed Home Visits	297
Fall Follow-Ups (letter, phone, consult)	2,033
Overdose Follow-Ups	27
Community Agency Site Visits	96
Human Health Hazard Cases Responded To	4
Total Falls Responded to by NSFR	<u>1,236</u> (+9.3% from 2024)
Fall-Related Deaths (North Shore Residents)	27
Non-Fatal Overdose Follow-Ups (72-hour contact)	17
Ageing Summit Attendance	63 residents

Quarter	2024 Institutional Falls	2025 Institutional Falls	% Change
Q1	83	92	+10.8%
Q3	90	62	-31.1%
Q4	97	69	-28.9%
Subtotal (Q1,3,4)	270	223	-17.4%

MUNICIPALITY	2025 AGE-ADJUSTED FALL RATE TREND	INTERPRETATION
Glendale	+8.5%	Remains one of the highest-risk areas (>60 falls / 1,000 older residents)
Brown Deer	+0.7%	Essentially stable but still high burden (>60 / 1,000)
Fox Point	-33%	Significant improvement in older adult fall rate
River Hills	~+67%	Rate spike driven by very small 65+ population (small absolute increase)
Shorewood	+22%	Meaningful increase — deserves closer review
Whitefish Bay	Not flagged in rate analysis	Moderate change
Bayside	Not flagged in rate analysis	Moderate change

Important Context:

Overall age-adjusted burden increased only +3%, compared to +9.3% raw increase.

North Shore population is 17% older than Milwaukee County, which materially influences raw counts.

This tells a very different story than totals alone.

ENVIRONMENTAL HEALTH UPDATES



EH END OF YEAR NUMBERS

- Conducted 534 inspections
- 136 Reinspections
- 51 Pre-inspections
- 9 Complaints
- 49 Animal Bite Follow-ups



PROGRAM EVALUATION & FEE INCREASE

- Standardization maintenance exercises went well.
- No general recommendations noted.
- “We are pleased to note that this evaluation reveals that the North Shore Retail Food and Recreational Business Agent Program is in compliance with applicable state statutes, codes, regulations and departmental policy.”
- The NSEHC is planning for a 15% fee increase as recommended by the municipalities. This will also include an adjustment of some fees to align with new state codes and other jurisdictions.

NEW BUSINESSES

- Nino's Southern Sides
- Country Inn and Suites
- Argo
- Target/Starbucks
- Starbucks
- Lebnani House
- White Oaks Pool
- La Cocina
- Dunkin
- Auntie Anne's
- Nona
- St. Augustine Prep
- 7 Brew
- Royan Nepal
- Old Form

COURTYARD

- Closed on March 6th, 2024
- Facility continued to use the pool after closure and was placarded on September 20th, 2024.
- Pool remained closed until building was sold and pool repaired.
- Pool reopened as Country Inn and Suites on December 22nd, 2025.



PROGRAMMING UPDATES



OPIOID EDUCATION & NALOXONE DISTRIBUTION (OEND)

- OEND 2025
 - Trained almost 700 people – 63% increase
 - Distributed over 3000 doses – 105% increase
- OEND 2026:
 - Comparing Jan – Feb 2025 to 2026
 - 83% increase in people trained
 - 360% in naloxone distributed
- Rogers Behavioral Health
- Strattec



**LIFE-SAVING
RESCUE KIT** 

FREE NALOXONE

**AVAILABLE HERE:
OVERDOSE EMERGENCY KIT CONTAINING
NALOXONE OPIATE REVERSAL MEDICINE**

NORTH SHORE CARES

VFC COMPLIANCE VISIT

Site visit January 29, 2026

- Conducted by Monica Thakur, Wisconsin Immunization Program Representative for the Southeast Region

Items Reviewed

- Program eligibility & documentation
- Billing practices
- Vaccine dose documentation
- Record retention & review
- Vaccine Management Plan
- Storage & handling
- Temperature monitoring & documentation
- Emergency transport
- Inventory

Results

- No compliance issues were identified!

NEW EHR: NIGHTINGALE NOTES

- Currently in the build-out & testing phase so we are still learning a lot!
- RNs meet with developer at least 2x per month to learn the system & build out services
- More user-friendly, accessible, and adaptive than the previous system

The screenshot displays the Nightingale Notes EHR interface. At the top, the header includes the logo "Nightingale Notes™ by CHAMP Software" and navigation links: "+ EASY ADD", "CLIENTS", "ACTIVITIES", "SCHEDULING", and a user profile for "JAIMIE VOSS NORTH SHORE HEALTH DEPT ...". Below the header, a dark bar contains the text "[DO NOT DELETE] RESOURCES, TRAINING".

The main content area features a tabbed interface with "Client Details" selected. Below the tabs are navigation options: "Back To List", "Copy", "Copy (No Custom)", and "Save". A secondary set of tabs includes "Name and Address", "Providers/Programs", "Demographics", "Health History", "Contacts", "Allergies", "Medications", "Subscribers", "Authorizations", "Claim Data", "Emergency Prep", "Discharge", "Goals & Objectives", "General Notes", "Files", and "Training Videos".

The "Client Details" form includes fields for "Client number (leave blank to auto-assign)*" (value: DO NOT DELETE), "Opened on" (01/21/2026), "Case status" (Open), "Office", "Gender", "Gender notes", and "Born on" (mm/dd/yyyy).

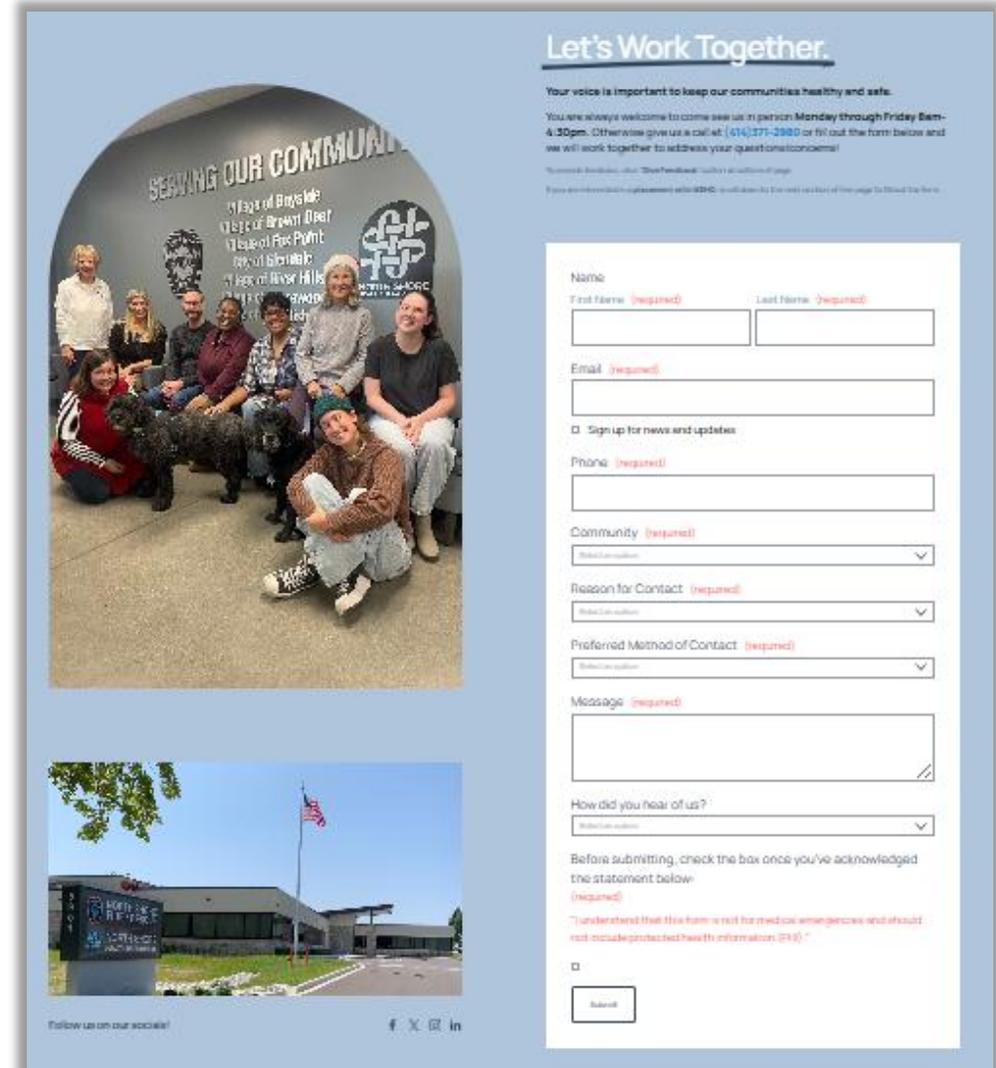
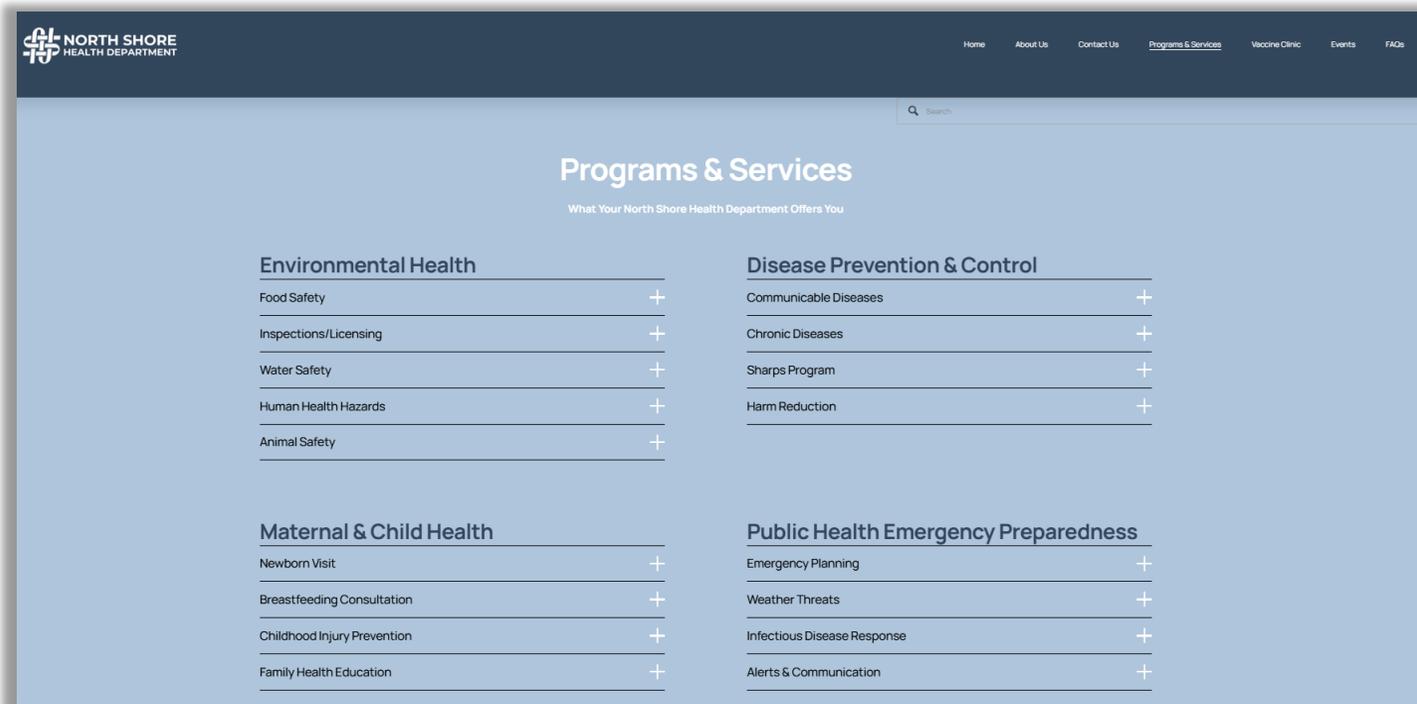
A "Client Search" overlay is positioned in the foreground, featuring search criteria: "Last name", "First name", "Client" (radio buttons for Number and ID), "Date of birth" (mm/dd/yyyy), "Phone number", "Address", and "Zip Code". It also includes "Case status" (Any), "Assigned to" (Anyone), "Has activities on" (mm/dd/yyyy), and "Sort By" (Asc/Desc) with a "Client Name" dropdown. The overlay includes "Reset filters", "Clear list and reset filters", and a "Search" button.

OTHER UPDATES

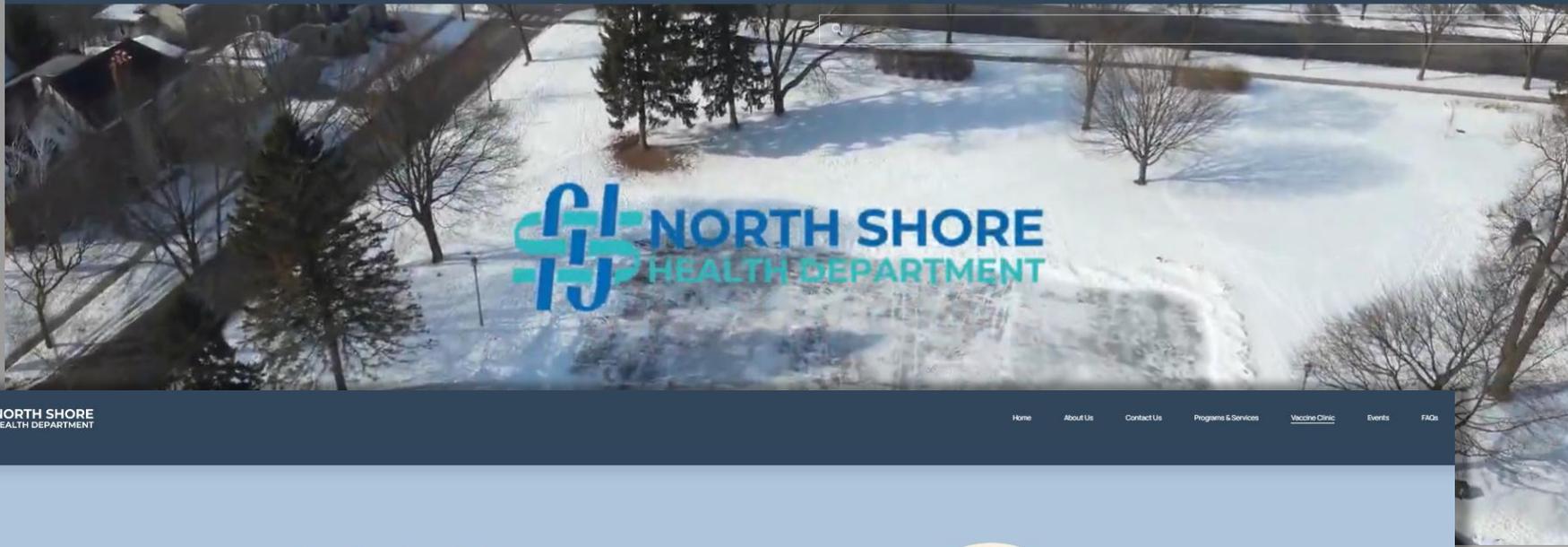


NEW WEBSITE COMING SOON!

Our new Public Health Specialist, Sam Bricco, has been working on a new website for the health department! Our current website is from 2013 and in need of an update. We are hoping to have the new website up in the near future!



Here is a sneak peak of a few pages. Sam's priority of the new website is to make it more user friendly, less cluttered, and give the users a good sense of what NSHD does!



Sam is collaborating with police in the North Shore to get some drone footage from every village to put on our home screen to show all the municipalities we serve. We also want to connect a face to names of the staff at NSHD to gain recognition and connect more with our communities.

Our Vaccine Clinic

The North Shore Health Department Clinic has 3 nurses; Ashley, Jaimie, and Karini. The North Shore Health Department is a Vaccines for Children (VFC) and Adults (VFA) provider, which means that our routine vaccines are reserved for the following populations:

Children through 18 years of age (under 19) who meet one of the following:

- (1) American Indian/Alaska Native
- (2) Medicaid-enrolled/eligible
- (3) Uninsured

Adults who are uninsured or whose insurance does not cover vaccines (underinsured).

Additionally, seasonal flu vaccines are available to the public every fall at one of our community flu clinics.

We carry various vaccines in our clinic. **Please call us to see what we currently have in stock (414) 371-2980**

Clinic Hours:

1st Monday & 2nd Wednesday from 9-11:30am

3rd Monday and 4th Wednesday from 1-3:30pm

Appointments are required, no walk-ins.

We encourage all that are seeking a vaccine to call NSHD and ask to speak with a nurse to get more information and schedule an appointment at (414) 371-2980

We also have a **Vaccine Appointment Request Form**. You're welcome to fill out the form if you are seeking a vaccine. Once submitted, a NSHD nurse will call you as soon as they can to ask some screening questions and schedule your appointment. Access that request form below.

Appointments are made by availability of nurses and needs of patient.

[Access Vaccine Appointment Request Form](#)



Other Health Resources



WORKFORCE DEVELOPMENT

- 2026 Academy of Science National Conference (Tanya)
- 2026 Syndromic Surveillance Symposium (Tanya)
- Lead Risk Assessor Re-cert (Becky)
- Lead Risk Assessor (Brook)
- WALHDAB Operations Conference (Sam)
- 2026 WI STI Summit (Jaimie)

PS-BRI HAD HER BABY!

Bri and Kyle welcomed a baby girl, Alanna, on 10/31/25



ACADEMICS



ACADEMICS & STUDENTS

- New Intern: Olivia (Liv) White
- Spring 2026 UWM Nursing Clinical
- Spring 2026 Alverno Nursing Tour
- Interviewing for summer placements
 - General internships
 - Field placements
 - Career exploration/mentoring
- Justice De Los Santos: Field Placement and Thesis





How can AI-driven standardization improve the efficiency and accuracy of community health assessments and planning?

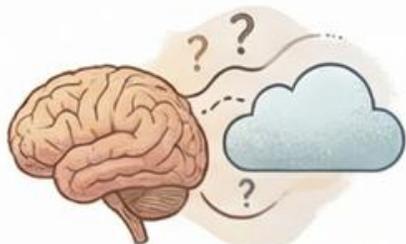
by Justice De Los Santos
On-site Preceptor: Tanya Bohacheff

AI-Driven Standardization: The Future of Community Health Assessments

The Risks of Manual Assessment

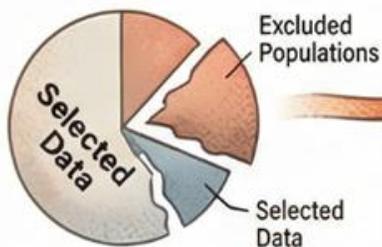
Subjectivity and Human Bias

Manual analysis is prone to individual interpretation and preconceived notions that undermine data.



Critical Data Validity Threats

Manual processes risk "Selection Bias," often accidentally excluding populations with lower socio-economic standing.



Resource Intensity

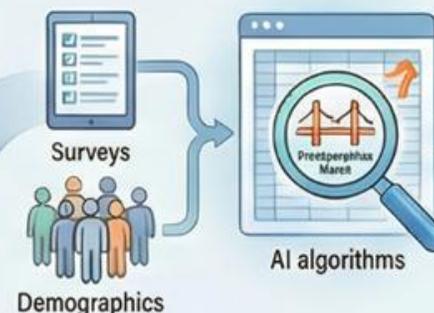
Slow, manual data handling creates high costs and delays actionable health insights.



The 4-Step AI-Driven Framework

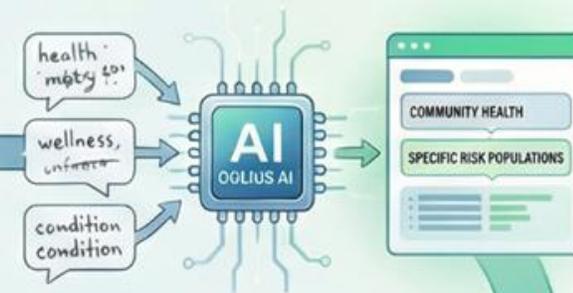
Step 1: Data Collection & Gap Analysis

Gather existing surveys and demographics; use AI to identify hidden gaps like transportation needs.



Step 2: AI Standardization

Use Julius AI to detect themes and replace inconsistent phrasing with standardized language.



AI Standardization in Action: Question Transformation

Original 2017 CHA Question	AI-Standardized Question
• How would you rate the overall health of residents?	• How do you define 'community health' in your own words?
• Are there groups whose health may not be as good?	• Are there specific populations whose health may be at greater risk?
• What else is needed to improve health?	• What resources or changes would most improve health in the community?



Step 3 & 4: Integration & Iteration

Apply qualitative coding to insights and establish a continuous quality review feedback loop.

Step 1 in Action: AI Analysis Reveals Hidden Demographic Gaps

Primed the AI: Used Julius AI with the initial prompt: “develop a set of goals and objectives to find the gaps in demographics.”
Loaded the Data: Uploaded population and demographic data for the North Shore community from the NSHD Annual Report 2022.
Generated Analysis: Julius AI used Python to conduct a gap analysis.

Key Findings: Julius AI identified six critical gaps:



Household composition



Age distribution considerations



Community engagement levels



Historic data collection response rates among communities



Economic status



Transportation and commuting times

Step 2 in Action: Identifying Inconsistencies in Historical Data

The Prompt: We tasked Julius AI with analyzing 2017 (N=21) and 2022 (N=34) CHA transcripts with the prompt: "Identify inconsistencies, opportunities for standardization of questions, and any recurring biases."

Key Inconsistencies Found by AI:

HEALTH

WELL-BEING

COMMUNITY



Varied Phrasing

The same core question (e.g., rating community health) was phrased in multiple, inconsistent ways.



Inconsistent Depth

Follow-up questions varied in phrasing and were sometimes omitted entirely.



Bias Towards Visible Groups

A tendency to focus on traditionally "at-risk" groups, potentially overlooking less visible populations.



Subjective Language

Questions assumed a shared understanding of terms like "health," leading to subjective interpretations.

Steps 3 & 4: Ensuring Integration and Continuous Iteration

Step 3: Data Integration and Analysis

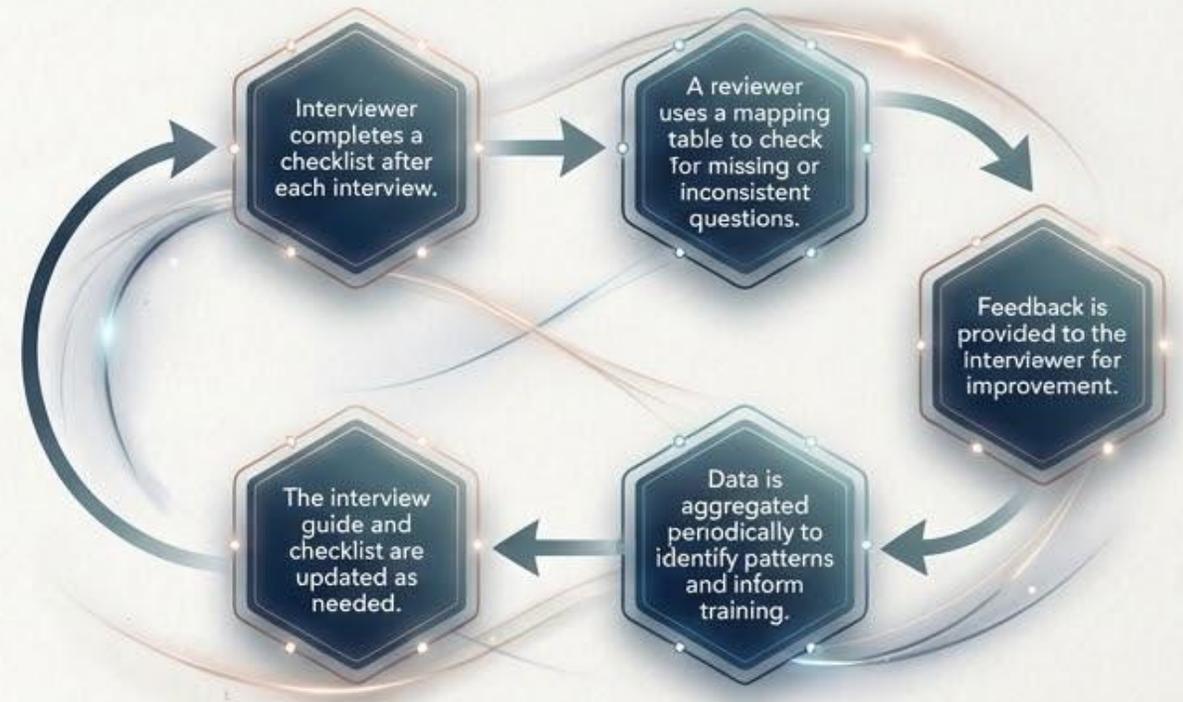
- Standardized data is integrated into NSHD's framework.
- Qualitative coding is applied to transform standardized data into actionable insights.



Step 4: Feedback and Iteration

To ensure long-term sustainability, we established a system for continuous quality improvement.

The Quality Review Process for Key Informant Interviews:



The Result: Transforming the 2017 CHA Interview Instrument



CHA 2017 Key Informant Interview Questions (Original)

On a scale of 1 to 10, 1=very poor and 10=excellent, how would you rate the overall health of residents in the North Shore?

How does this compare to previous years?

Are there people, groups of people, or communities of people in the North Shore whose health may not be as good as others?

What barriers or challenges exist to improving the health of residents in the North Shore?

What strengths or assets exist that support health in the North Shore?

In your opinion, what are the most critical health issues impacting people/residents in the North Shore?

In your opinion, what else is needed to improve health in the North Shore?

Is there anyone else you think I should talk with?



CHA 2017 Key Informant Interview Questions (AI Standardization)

To start, how do you define "community health" in your own words?

On a scale from 0 (poorest) to 10 (optimal), how would you rate the overall health of the North Shore community?

What factors influenced your rating?

Have you noticed any changes in the community's health over the past few years? If so, what are they?

Are there specific groups or populations in the community whose health you feel may be at greater risk or disadvantage?

What do you see as the main strengths or assets in the community that support health?

What do you see as the most significant challenges or barriers to health in the community?

In your view, are there any issues related to income, race, ethnicity, or other social factors that affect health in the North Shore?

What resources or changes do you think would most improve health in the community?

Is there anything else you'd like to share about health in the North Shore that we haven't discussed?

AI-Driven Standardization

Key Improvements Highlighted:

-  Adds a definition question upfront.
-  Standardizes the rating scale.
-  Ensures consistent follow-ups.

General NS Health Qs

1. Looking back to before the COVID-19 pandemic (so 2019, early 2020), on a scale of 1 to 10, 1=very poor and 10= excellent, how would you rate the overall health of residents in the North Shore?

Probe: What factors do you think contribute most to this rating?

2. Now thinking about the present day, on a scale of 1 to 10, 1=very poor and 10=excellent, how would you rate the overall health of residents in the North Shore?

Probe: What factors do you think contribute most to this rating?

3. Prior to 2020, you stated that the health of the NS was a _____ and now, in 2022, you stated that the health of the NS is a _____. Can you elaborate briefly on why you believe the health of the NS got better/worse/stayed the same?

Probe: What factors do you think contributed to this change?

Probe: How do you think COVID-19 has impacted the health and wellbeing of the North Shore Residents?

4. In your opinion, what is the most critical health issue impacting the North Shore community?

Probe: What needs to be done to address this issue?

Probe: Who best suited to address this issue?

Probe: Is there a second most critical health issue that comes to mind?

5. Are there people, groups of people, or communities in the North Shore whose health may not be as good as others?

a. Probe: Who?

b. Probe: Why do you think that is?

Weaknesses, Strengths, and the Future

6. What barriers or challenges exist to improving the health of residents in the North Shore?

a. Probe: Are there barriers that impact individuals/families more than others?

7. What strengths or assets exist that support health in the North Shore?

8. Thinking about the future, if you could do one thing to improve the health of the North Shore, what would it be?

Concluding Qs

9. Is there any way that the North Shore Health Department could assist you or your organization?

a. Probe: Are there any projects that you are working on in your community or in your practice that the NSHD could potentially assist you with (i.e., providing social media coverage, resources, etc.)?

10. Who else should we interview as a key informant for this project?

Introduction & Consent

"Thank you for agreeing to participate. The purpose of this interview is to learn about your perspectives on health in the North Shore community. Your responses are confidential and voluntary. You may skip any question or stop at any time. Do you have any questions before we begin?"

Background & Connection

1. How are you connected to the North Shore community?
2. Which communities within the North Shore do you interact with most?
3. What is your current role or position?
4. How long have you been connected to the North Shore?

Community Health Perceptions

1. Thinking back to before the COVID-19 pandemic (2019/early 2020), on a scale from 1 (very poor) to 10 (excellent), how would you describe the overall health of residents in the North Shore?
2. What factors influenced your rating?
3. Now, using the same scale, how would you describe the overall health of residents today?"
4. What factors influence your current rating?

Impact of COVID-19

1. In what ways, if any, do you think the COVID-19 pandemic has affected health and well-being in the North Shore community?
2. Are there particular groups or issues that have been affected differently?

Health Issues & Solutions.

1. What do you think are the most important health issues facing the North Shore community at this time?
2. What actions or changes do you think could help address these issues?
3. Who or what organizations do you think could play a role in addressing these issues?

Equity & Barriers

1. Are there groups in the North Shore whose health may differ from others? If so, who?
2. What factors or barriers might contribute to differences in health among groups?
3. What resources or strengths exist in the community to support health for all residents?

Community Strengths & Opportunities

1. What do you see as the strengths of the North Shore community in supporting health and well-being?
2. If you could make one change to improve health in the North Shore, what would it be?

Collaboration & Recommendations

1. What opportunities do you see for collaboration among organizations or community members to improve health?
2. Is there anyone else you recommend we speak with for this project?

Closing

"Thank you for your time and insights. Is there anything else you would like to share?"

The Path Forward: A New Standard for Public Health Strategy



Short-Term Benefits

- Increased confidence for interviewers.
- Reduced analytic turnaround time.

Medium-Term Benefits & Long-Term Impact



Enhance trend analysis across CHA cycles.



More engaged community partners due to a clearer, more respectful process.



More targeted and effective NSHD programs.



A culture of continuous quality improvement embed in the CHA process.



Better alignment with state (Wisconsin SHIP) and regional (Healthy MKE) plans, reducing data collection fatigue in the community.

Navigating the Ethical Landscape of Trustworthy AI

The Core Challenge: Widespread AI adoption is outpacing **governance** and best practices. Achieving **trustworthiness** is the **critical challenge**.



Key Risks Identified in Literature



- **Lack of Oversight:** No clear roadmap for assessing clinically focused LLMs.



- **Performance Monitoring:** A concerning lack of validated methods for monitoring LLM accuracy over time.



- **Bias and Equity:** AI models risk creating less accurate predictions for minority groups or exacerbating existing disparities.



Opportunities for Mitigation (Guleria et al., 2024)



- **Explainable AI (XAI):** Crucial for improving adoption, addressing liability, and assessing models for bias.

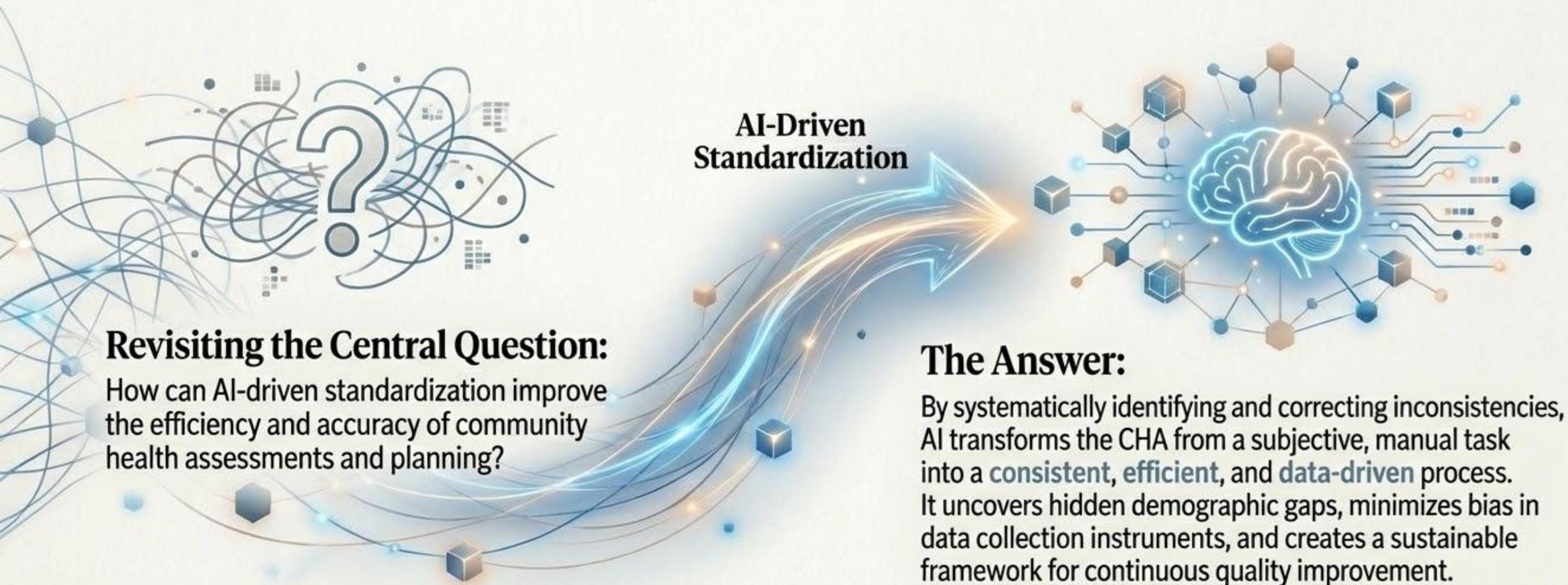


- **Federal Regulation:** Supported by 72% of health system leaders to establish quality and safety standards.



- **Information Fusion:** Combining multiple data sources to mitigate bias and produce more reliable decisions.

Conclusion: Reevaluating the CHA Process to a Replicable Model



Revisiting the Central Question:

How can AI-driven standardization improve the efficiency and accuracy of community health assessments and planning?

The Answer:

By systematically identifying and correcting inconsistencies, AI transforms the CHA from a subjective, manual task into a **consistent, efficient, and data-driven** process. It uncovers hidden demographic gaps, minimizes bias in data collection instruments, and creates a sustainable framework for continuous quality improvement.



The Transformation:

This project provides a clear model for leveraging AI to enhance the validity of public health data, enabling NSHD and other organizations to develop more **equitable** and impactful interventions for the communities they serve.



Thank You

For your attention and engagement.

Deeper Analysis Reveals Critical Threats to Data Validity

Finding from Literature Review: Standardizing public health practice is challenging, and two major risks threaten the validity of survey data.

Risk 1: Insufficient Effort Responding (IER)



Unmotivated participants can introduce substantial error variance, negating the usefulness of the data collected (Lu et al., 2019).

Risk 2: Selection Bias



Screening techniques used to filter out IER participants often disproportionately exclude individuals with lower socio-economic standing (SES). This risks excluding the very populations that targeted public health interventions are designed to reach, creating a critical selection bias (Lu et al., 2019).