



CITY OF MILWAUKEE
HEALTH DEPARTMENT

2019 REPORT TO THE COMMUNITY

Prepared by
Dr. Jeanette Kowalik, PhD, MPH, MCHES
Commissioner of Health

APRIL 6, 2020



February 24, 2020

City of Milwaukee Board of Health

Dear Community,

In 2019, the City of Milwaukee re-established its Board of Health. This nine-member governing board is responsible for assuring city residents that the City of Milwaukee Health Department (MHD) is fulfilling the responsibilities mandated by the state, advising the department on priorities, taking public stances on public health policy issues, and being champions for public health in Milwaukee. These positions were appointed by Mayor Tom Barrett after an application and interview process and each member was confirmed by the Common Council.

As you may know, the MHD has faced many challenges over the years. There were significant concerns about the way childhood lead poisoning cases were handled under the previous leadership. The department is diligently working to improve their response once a case of lead poisoning has been identified and resolve subsequent ongoing investigations from multiple state agencies. The Board of Health is working closely with Commissioner Kowalik as she strives to refine the department's organizational structure and enhance various processes to increase efficiency. These changes are necessary to improve the function and ability within the department to protect and promote residents' health.

The Board of Health will establish committees or working groups as needed. This first of these is a lead advisory committee. The Lead-Safe Advisory Committee is responsible for monitoring city-wide lead poisoning data and follow up, advocating for city environmental policies that substantially reduce the risk of lead exposure, and developing a long-term plan to eliminate lead poisoning. The committee will be made up of people living and working in areas of our community most affected by lead poisoning, as it is imperative that the voices of who are most impacted are brought together to tackle this issue facing our city.

As a board, we believe, in order to achieve success in health equity we must come together to address social determinants of health and mitigate the impacts that racism plays in public health. This board will continue to support efforts that work to eliminate gaps of services in public health that disproportionately affect communities of color.



We are also very concerned about the negative ramifications of the growing political rhetoric directed at our immigrant and refugee communities to the point where people are becoming afraid to seek out medical care. We support the Health Department's decision to not support or assist the Department of Homeland Security Immigration and Customs Enforcement (ICE) division in situations where cooperation may jeopardize an individual or family's stability and safety.

We are encouraged by the strides of improvement made by the health department and look forward to being deeply engaged with our community in a long, winding journey to allot the ability for all Milwaukee residents to live their best lives.

Please visit our website at www.milwaukee.gov/boardofhealth more information and ways to get more involved.

We look forward to the work that lay ahead, and to a healthier Milwaukee.

Yours in Health,

Lyn Ranta, MD, President

Caroline Gomez-Tom, Vice President

Ruthie Weatherly

Bria Grant

Alderwoman Chantia Lewis

Julia Means

LaNelle Ramey

Ericka Sinclair

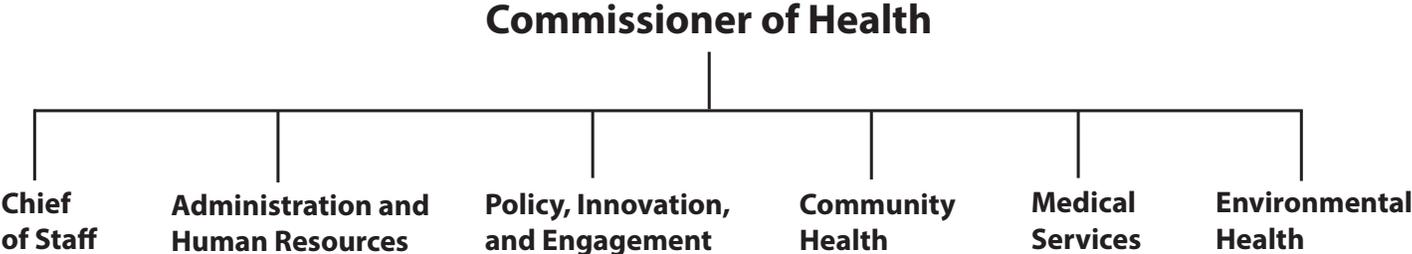
Wujie Zhang, PhD

2019 was a year of change for the City of Milwaukee Health Department (MHD).

Our department reorganization began in December 2018. The majority of the changes were instituted in the 3rd quarter of 2019. Mainly, the department shifted from three divisions to five branches containing 11 divisions. Four of the branches are now managed by Deputy Commissioners, which serve not only as cornerstones of the foundation of the new MHD but they are primed to serve in an “on call rotation” capacity to the Commissioner of Health.

This change was in response to the lack of legal coverage and support for the Commissioner, which was realized through leadership changes in 2018.

The MHD is aiming to eliminate gaps, which can compromise MHD’s ability to meet its obligations to provide essential public health services per [state of Wisconsin and federal laws and regulations](#).



2019 REPORT TO THE COMMUNITY

The leadership team embarked on a rebranding initiative. This was necessary to symbolize the department's desire to move beyond the challenges of the past. The new logo and brand was the result of a community informed process that used social media to vote for the top brand. The brand served to represent the updated mission and vision of the department.



The most significant change of 2019 was the establishment of the [City of Milwaukee Board of Health \(BoH\)](#). This nine-member body was the result of a community call for volunteers, assessment of applications by the requirements of the [newly developed ordinance](#), interviews, nominations, appointment by Mayor Tom Barrett, and confirmation by the 15-member Common Council. The BoH began to meet in the fall of 2019. Since this point in time, the BoH has demonstrated tireless commitment to the City of Milwaukee, guiding the MHD in advancing beyond the challenges of the past, and evoking new hope and restored confidence in the department.

At year-end, the Commissioner of Health requested feedback from MHD staff and management about last year's performance. There is still a great deal of work that needs to take place; many strengths were noted as well as opportunities for improvement. *See next page.*

All in all, I am thankful for the dedicated and passionate staff of the MHD. We are evaluating and continuing to prioritize areas of need while maintaining operations, fighting influenza and COVID-19, and preparing for the DNC. Public health is 24/7, 365 days a week. MHD will continue to look for ways to be more efficient, innovative, and support a culture of health in and outside of our department. Thank you for the opportunity to serve our community.

A handwritten signature in black ink, appearing to read "Jeanette Kowalik".

Dr. Jeanette Kowalik, PhD, MPH, MCHES
Commissioner of Health

Summary of Strengths

- 18th Annual Back to School Health Fair- 3,800 served thanks to public-private partnerships and fundraising efforts
- Renewed commitment to partnerships and Community Health Improvement Plan- MKE Elevate, Milwaukee area STI Strategic Plan, Democratic National Convention (DNC) preparation and convening public health partners
- Health promotion campaigns for the Office of Violence Prevention and substance use prevention (e.g. K2, opioids)
- Increased in-house expertise while leveraging local partnerships to increase reach
- New and renewed grant funding (e.g. Lead HUD, BUILD Health Challenge, NACCHO), lead program finally out of high-risk status with HUD
- Exceeded program goals and objectives (e.g. WIC, Community Healthcare Access Program, MBCAPP- Well Woman)
- Innovative policy, system, and environmental interventions:
 - o *Restaurant Food Grading*
 - o *Birth Outcomes Made Better (BOMB)*
 - o *Doula Program*
 - o *414 Life Violence Interrupter Program*
 - o *Declared Racism as a Public Health Crisis at the City level*
 - o *Government Alliance on Race and Equity Staff Committee*
 - o *COH Issued Vaping Advisory- 1st in nation to do so (August 2019)*
 - o *MORI- Implementing Overdose Prevention Strategies via partnerships (e.g. Milwaukee Fire Department, Milwaukee County Behavioral Health Division)*
 - o *Acquired new technology to enhance MHD operations (e.g. DocuSign and Quick Base to manage Lead program performance)*

Summary of Weaknesses

- Human Resources/personnel related- time to fill vacancies, turnover, retention, diversity at professional and leadership levels, pay below market for some vital positions, local talent pool- need for more formally- trained public health professionals, inconsistent professional development opportunities for all, variety of management challenges, and lingering personnel issues
- Perception of MHD in the media and community- need to change the narrative and promote the good work via staff that are dedicated to serving the community
- Lack of an Electronic Health Record system to increase efficiency, cost savings, management of care, expand family planning services, and collect data for performance improvement across all three clinics
- Need for program autonomy while complying with program requirements
- Audit overkill- lead program has had five since COH began in fall 2018. Two are still ongoing (e.g. State DOJ Criminal investigation)
- Lack of performance management system to help MHD tell our story and advocate for additional funding
- Impact of national anti-immigrant sentiment on local communities- decreased service utilization due to fear which negatively impacts birth outcomes

Activities seen as both Strengths and Weaknesses

Cost saving measures: loss of Zilber School of Public Health office space~reassigned MHD maintenance staff and clinic housekeeping to Department of Public Works~ consolidated teams to increase cohesion (e.g. Lead, Consumer Environmental Health)

Communications: internally and externally~improved from past, but still inconsistent due to gaps in staffing

Policies and procedures: MHD has been lacking in this area~updates of existing policies and procedures was and still is needed



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