



CITY OF MILWAUKEE
HEALTH DEPARTMENT

2025 ANNUAL REPORT
DATA SUPPLEMENT



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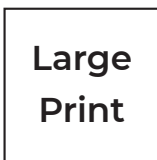
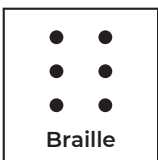


Table of Contents

COMMISSIONER'S OFFICE

- Finance 5
- Staffing 7
- Vital Records 7
- Workforce Development 7
- MHD Strategic Plan 8

FAMILY AND COMMUNITY HEALTH (FCH)

- Birth Outcomes Made Better (BOMB) Doula 9
- Community Healthcare Access Program (CHAP) 9
- Direct Assistance to Dads (DAD) Project and Empowering Families of Milwaukee (EFM) 10
- Newborn Screenings for Congenital Disorders and Hearing Loss 12
- Safe Sleep and Strong Baby Programs 13
- Women Infants and Children Nutrition (WIC) 13

ENVIRONMENTAL HEALTH

- Consumer Environmental Health (CEH) 14
- Emergency Preparedness Environmental Health (EPEH) 17
- Home Environmental Health (HEH) 19

CLINICAL SERVICES

- Communicable Disease (CD) 21
- Milwaukee Breast and Cervical Cancer Awareness Program (MBCCAP) 22
- Sexual and Reproductive Health (SRH) 23
- Milwaukee Health Department Laboratory (MHDL) 24

POLICY, INNOVATION, AND EQUITY (PIE)

- Fetal Infant Mortality Review (FIMR) 27

2025 ANNUAL REPORT

About this Data Supplement

The Annual Report is a comprehensive overview of the City of Milwaukee Health Department (MHD) and includes information for each branch and program.

MHD has implemented a new format that includes a condensed main report highlighting Key Performance Indicators (KPIs), with a separate data supplement that includes detailed data tables for each program. **The main 2025 Annual Report can be found online at:**

milwaukee.gov/AnnualReports

Note*

Gaps within this data supplement are the result of several factors, including department-wide KPI restructuring and COVID-19 related program disruptions.



COMMISSIONER'S OFFICE

Finance					
City of Milwaukee Health Department Expenditures by Funding Source *					
Funding Source	2021	2022	2023	2024	2025
O&M	\$16,884,600	\$12,291,820	\$18,244,554	\$18,437,326	\$19,011,368
Grant	\$33,725,720	\$31,222,619	\$24,130,331	\$22,393,012	\$21,197,519
Reimbursable	\$265	\$270	\$0	\$0	0
Capital	\$624,314	\$680,102	\$37,722	\$36,003	\$650,282
Total Expenses	\$51,234,899	\$44,194,812	\$42,412,607	\$40,866,341	\$40,859,171

* Financial data is preliminary and subject to change.

2025 Total Expenses by Branch	
Branch	2025 Total Expenses
Commissioner's Office	\$3,293,573
Family and Community Health	\$7,722,226
Environmental Health	\$15,621,578
Clinical Services	\$9,863,083
Policy, Innovation, and Equity	\$4,358,711
TOTAL	\$40,859,171

O&M and Grant Expenses by Department

Department	2025 O&M Expenses	2025 Grant Expenses
Community Healthcare Access Program (CHAP)	\$408,672	\$343,906
Direct Assistance for Dads (DAD Project)	\$15,206	\$285
Empowering Families of Milwaukee (EFM)	\$1,592,363	\$1,462,767
Strong Baby and Safe Sleep	\$467,490	\$273,255
Birth Outcomes Made Better (BOMB) Doula	\$438,160	\$635,654
Newborn Screening	\$34,375	\$285,399
Women, Infants, and Children (WIC)	\$2,431	\$1,884,782
Neighborhood Nursing	\$48,228	\$27,473
Consumer Environmental Health (CEH)	\$3,670,895	\$0
Home Environmental Health (HEH)	\$2,872,666	\$8,950,684
Emergency Preparedness Environmental Health (EPEH)	\$425,070	\$808,132
Communicable Disease (CD)	\$2,180,099	\$532,643
Sexual and Reproductive Health (SRH)	\$1,887,049	\$470,921
Milwaukee Breast and Cervical Cancer Awareness Program (MBCCAP)	\$5,601	\$276,801
MHD Laboratory Services	\$3,069,873	\$1,428,564
Policy, Innovation, and Equity (PIE)	\$1,463,690	\$1,969,042
Vital Records	\$386,216	\$1,230
Fetal Infant Mortality Review (FIMR)	\$0	\$0
COVID-19 Response	\$31,701	\$1,070,262
Substance Misuse / Opioid Settlement	\$11,584	\$1,426,005
TOTAL	\$19,011,368	\$21,847,802

Staffing					
City of Milwaukee Health Department Personnel					
	2021	2022	2023	2024	2025
O&M FTE	162.12	190.8	141.14	142.53	158.41
Non-O&M FTE	441.85	109.2	92.99	88.77	77.79
Total FTE	603.97	300	234.13	231.30	236.20

City of Milwaukee Health Department Total FTE* by Branch	
Branch	2025 FTE
Commissioner's Office	59
Family and Community Health	71
Environmental Health	63
Clinical Services	24
Policy, Innovation, and Equity	19

* FTE = Full Time Equivalent employee (40 hours / week).

Vital Records					
Performance Measure	2021	2022	2023	2024	2025
Total gross income, cash receipts, and billing	\$594,254	\$465,347	\$471,015	\$444,290	\$534,173
Births registered	8,241	10,262	11,757	11,680	15,281
Deaths registered	5,075	6,643	5,532	5,025	5,109
Total birth certificates issued	23,627	15,959	18,221	17,855	23,929
Total death certificates issued	49,194	46,447	35,792	33,253	33,836

Workforce Development					
Performance Measure	2021	2022	2023	2024	2025
Number of student and fellow placements at MHD	*	23	36	42	15
Number of active Academic Affiliation Agreements	21	29	29	32	15

Other Metrics - Human Resources					
Performance Measure	2021	2022	2023	2024	2025
Open records requests	127	66	90	160	193

MHD Strategic Plan

1

Anti-Racism Competency Development

Ensure all MHD staff understand why MHD will become an anti-racist organization, how the department will cultivate anti-racist practices and competencies, and what is expected of all staff members to support this work.

Strategy	Progress
1.4: Provide ongoing and perpetual organizational space, time, resources, and structure to examine and discuss issues of racial justice within and outside the department.	Select staff complete Train the Trainer for Trauma-Informed Care to expand upon last year's staffwide TIC training.

2

Re-Center Culture

Support MHD's transition to a Public Health 3.0 model by clarifying our cultural norms and aspirations reinforcing this culture through daily work.

Strategy	Progress
2.3: Develop or adopt an anti-racist culture shaping framework to guide ongoing culture work across the department.	MHD Handbook published.

3

Financial Alignment and Sustainability

Outline strategies and actions to ensure that funding pursued and accepted by MHD aligns with our goals and available resources.

Strategy	Progress
3.5: Enhance community-based program funding and improve efficiency of re-granting process	Finance developing "micro" agreements for lower capacity organizations.

4

Program Evaluation and Improvement

Direct MHD's evaluation and improvement work to understand the impact of its programs, guide resources, and improve public transparency.

Strategy	Progress
4.2: Establish workgroup to review and endorse key performance indicators for internal tracking and external reporting.	KPI Dashboards created and published on MHD Connect.

5

Electronic Health Record Optimization

Optimize MHD's electronic health record system to ensure the department has meaningful data to understand current performance, inform equity analysis, and effectively transition to a Public Health 3.0 model.

Strategy	Progress
5.2: Coordinate and implement full integration with allowable MHD programs, including the Lab Information Management System and program access to billing modules, in accordance with equity-based guidelines	New Electronic Health Record system (EHR), powered by OCHIN Epic, went live this year with no major complications.

6

MHD Staff Recovery

Support staff in personal and team recovery and develop personal, interpersonal, and organizational practices for stress management.

Strategy	Progress
6.2: Engage MHD staff to understand sources of turnover & absenteeism and develop strategies to mitigate select stressors	MHD's Employee Engagement Committee was reestablished.

7

Workforce Development

Invest in staff by establishing a department-wide workforce development strategy, focusing on equitable recruitment, retention, compensation, promotion, and skill development.

Strategy	Progress
7.1: Create, maintain, and implement a comprehensive values-based workforce development plan for MHD with prioritization on culture assessment, training, and recruiting for PH 3.0 competencies.	First draft of the Workforce Development Plan completed, with the intention of it being a living, iterative document.

8

Public Health 3.0 Strategy

Examine the implications of Public Health 3.0 transition on roles, partnerships, funding, data collection, communications, and other MHD functions.

Strategy	Progress
8.6: Build organizational understanding of how power is distributed within and across MHD, and how department decisions are made.	Policy Pitch debuted with 2 cycles completed and available on MHD Connect.

FAMILY AND COMMUNITY HEALTH (FCH)

Birth Outcomes Made Better (BOMB) Doula					
Performance Measure	2021	2022	2023	2024	2025
Number of new families enrolled	79	91	161	126	55
Number of babies born among families enrolled	74	73	117	112	74
Presence of Doulas during labor/delivery (percentage)	68%	81%	72%	57%	74%
% of Black/African American identified families enrolled	N/A	70%	69%	54%	64%
% of infant deaths among enrolled families (not including terminations/stillbirths)	1 (1.3%)	0%	0%	4 (3.6%)	0%

Community Healthcare Access Program (CHAP)					
Performance Measure	2021	2022	2023	2024	2025
Number of individuals completing applications for BadgerCare Plus (new)	99	161	179	459 *	389
Number of individuals completing applications for BadgerCare Plus (renewals)	25	39	526 *	505	435
Number of Childless Adults applications (new)	25	26	49	36	10
Number of Childless Adults applications (renewals)	9	9	10	6	1
Number of Marketplace or Health Benefit Navigations	7	20	18	5	9

* About 2.5 times the amount of new applications from 2023.

* 2020-2022 CHAP was significantly impacted with the automatic renewals of benefits nationwide. In 2023 there is a significant increase due to the unwinding of BC+ which started in June 2023.

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Performance Measure	2021	2022	2023	2024	2025
Number of Express Enrollments Applications (new and renewals)	0	0	3	4	0
Number of Non-qualified Immigrant Pregnant Women *	22	68	68	81	68
Number of FoodShare applications (new)	204	497 *	508	592	450
Number of FoodShare applications (renewals)	196	565 *	524	436	265
Number of community outreach events focused on Medicaid enrollment in which CHAP staff participate	5	9	2	6	9
# of technical assists completed by staff Goal - 375 per quarter *	1,308	2,043	3,364	3,929	2,760

* This service enrolls undocumented mothers in insurance coverage that lasts through delivery.

* Foodshare applications / renewals significantly increased from 2021-22. CHAP's services played a major role in supporting food insecurity issues during the pandemic.

* Includes family, new / renewals, and document verification (sending IDs, check stubs, updated job info, etc.) Goal changes yearly depending on goals of the grant.

Direct Assistance to Dads (DAD Project) Birth Outcomes					
Performance Measure	2021	2022	2023	2024	2025
Number of babies born (singletons + multiples)	4	6	6	9	7
Singletons	4	6	6	9	7
Multiples	0	0	0	0	0
Number of singleton babies born at less than 37 weeks gestation (premature)	0 *	0 *	0 *	1	1 baby with unknown weeks gestation
Number of singleton babies born weighing less than 2500 grams (low birthweight)	1 *	0 *	1	0	2
Number of infant deaths among families enrolled (babies born alive who die before age 1)	0%	0%	0%	0%	0%
Number of stillbirths among families enrolled <i>(babies who die before taking their first breath, are without a heartbeat at birth, and weigh at least 350 grams and/or are more than 20 wks gestation)</i>	0	0	0	0	0

* One or more unknown values.

Empowering Families of Milwaukee (EFM) Birth Outcomes					
Performance Measure	2021	2022	2023	2024	2025
Number of babies born (singletons + multiples)	39	56	80	17	60
Singletons	39	56	74	17	60
Multiples	0	0	6	0	0
Number of singleton babies born at less than 37 weeks gestation (premature)	1	3	6	0	7
Number of singleton babies born weighing less than 2500 grams (low birthweight)	2	4	7	1	10
Number of infant deaths among families enrolled <i>(babies born alive who die before age 1)</i>	0%	1 (1.8%)	2 (2.5%)	0	0
Number of stillbirths among families enrolled <i>(babies who die before taking their first breath, are without a heartbeat at birth, and weigh at least 350 grams and/or are more than 20 wks gestation)</i>	0	0	0	0	0

Overall EFM / DAD Program Outcomes					
Performance Measure	2021	2022	2023	2024	2025
Number of families served	158	181	215 *	210 *	214
Number of completed HVs	1,889	1,855	2,188	2,452	1,913
Number of families who successfully completed the program	15	48	26	43	45
% of infants (among birthing parents that enrolled prenatally) who were breastfed any amount at 6 months of age	31%	25%	43%	35%	38%
% of caregivers screened for depression within 3 months of delivery (or 3 months of enrollment is not enrolled prenatally)	69%	66%	81%	72%	85%
% of caregivers with a positive screen for depression who accepted a referral and received services	25%	20%	50%	25%	25%
% of children who received their last well-child check up	86%	81%	77%	79%	81%

* In 2023, we served 215 families (110 new, 105 continuing). In 2024, we served 210 families, with fewer new enrollments (62) but more continuing families (148), showing stronger retention.

Of the 62 new families in 2024, 58% enrolled post natally, leading to fewer babies born into the program. This shift is largely due to EFM waitlist delays—by the time families were assigned a home visitor, they had already delivered.

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Performance Measure	2021	2022	2023	2024	2025
% of children with a family member who read, told stories and/or sang songs with their child every day	72%	74%	71%	77%	82%
% of children with a timely screen for developmental delays using a validated tool	82%	74%	73%	81%	84%
% of children with a positive screen for developmental delays whose parents accepted a referral and received service in a timely manner	76%	74%	40%	35%	50%
% of caregivers screened for interpersonal violence within 6 months of enrollment	93%	87%	89%	91%	85%
% of caregivers with continuous health insurance coverage for at least 6 consecutive months	93%	94%	96%	88%	93%
% of families that report an increase in their parenting skills and knowledge of their child's development since being in the program	N/A *	94%	97%	98% and 88% *	97% and 95%*
% of families that report an increase in ability to manage their child's behaviors using age-appropriate discipline strategies since enrollment	N/A *	92%	89%	85%	92%
% of families that report an increase in their ability to take care of the health needs of their family since being in the program	N/A *	87%	92%	90%	97%

* These were separated into 2 metrics in 2024.

* Not measured before 2022.

Newborn Hearing Screening Outcomes					
Performance Measure	2021	2022	2023	2024	2025
Number of referrals received	922	850	674	743	824
Average number of monthly cases managed by Regional Outreach Nurse Specialist (RONS)	305	338	287	280	303
Number of babies who received screening by RONS	6	5	14	20	71
Number of babies referred by RONS to Audiology	0	1	4	6	6
Number of newborns identified with hearing loss referred to early intervention	41	28	43	37	2

Newborn Blood Screening Outcomes

Performance Measure	2021	2022	2023	2024	2025
Total number of referrals <i>(Includes newborn blood screening and whole blood referrals received from screening lab and community)</i>	140	106	67	27 *	27 *
Average number of monthly referrals case managed	12	9	13	2	2
Babies screened by MHD	76	50	37	22	14
Babies re-screened (birth hospital)	13	4	2	1	0
Babies re-screened (lab)	10	9	4	3	0
Infants identified and case managed with sickling disorder through NBS	11	11	8	0	0
Babies with sickle cell seen in clinic by 4 months of age	11	11	13	3	0
Infants case managed for CF	1	0	0	0	0
Babies referred and case managed for CF (that needed case management)	0	0	0	0	0
Outreach events, conferences, and health fairs attended	5	4	4	5	8

* Referrals decreased due to the state lab case-managing the results. We only received referrals when the state lab couldn't get in contact with the patients.

Safe Sleep and Strong Baby programs

Performance Measure	2021	2022	2023	2024	2025
Number of clients served by Safe Sleep Program	221	163	378	493	620
Number of cribs distributed through classes and home visiting	401	306	335	208	127 *

* May have some missing data due to OCHIN EPIC Electronic Health Record transition period.

Women Infants and Children Nutrition (WIC)

Performance Measure	2021	2022	2023	2024	2024
Annual number of WIC Participants	11,809	12,090	15,052	15,639	15,639
% of all infants who breastfed	54%	64%	59%	60%	59%
Infants breastfed through 3 months of age	414 (18%)	706 (28%)	744 (29%)	724 (29%)	458 (27%) *
Infants breastfed through 6 months of age	264 (12%)	451 (18%)	504 (20%)	490 (20%)	221 (20%) *
% of postpartum participants on WIC during pregnancy	71%	71%	70%	68%	71%
Nutrition education rate <i>(Participants who met policy contact requirement)</i>	67%	67%	60%	63%	71%
Average Monthly Enrollment	7,933	8,013	9,417	9,991	9,779
Average Monthly Participation	7,273	7,442	8,689	9,388	9,290

* Composite report was edited in 2024 to more accurately record BF %.

Final report numbers are obtained after all infants born in the indicated year have turned one year old.

2025 numbers are not complete. 2020-2024 numbers are updated.

ENVIRONMENTAL HEALTH

Consumer Environmental Health (CEH)					
Performance Measure	2021	2022	2023	2024	2025
Number of prelicensing inspections	747	761	850	860	839
Number of 30 day inspections completed	463	589	587	600	548
Number of routine food inspections completed	1,652	2,261	2,603	2,914	2,814

5 CDC Risk Factors Percentage Breakdown - Routine Food Inspections					
Cross Contamination	N/A	18.3%	19.1%	19.15%	16%
Improper Holding	N/A	22%	24.8%	25.83%	28%
Inadequate Cooking	N/A	21.2%	25.8%	25.49%	26%
Personal Hygiene	N/A	12%	6.8%	8.34%	8%
Unsafe Source	N/A	26.5%	23.5%	21.19%	22%
Total number of food inspections (prelicensing, routine, reinspections etc.)	6,391	8,476	9,692	10,638	10,133
% of routine food inspections (non-mobile or temporary) with a priority violation	39%	42%	47%	45%	41%

5 CDC Risk Factors Percentage Breakdown - Temporary Event Inspections					
Cross Contamination	N/A	12.3%	3.9%	7.48%	4%
Improper Holding	N/A	51.2%	65.7%	61.68%	63%
Inadequate Cooking	N/A	2.5%	7.2%	9.81%	11%
Personal Hygiene	N/A	21.2%	2.2%	1.87%	6%
Unsafe Source	N/A	12.8%	21%	19.16%	16%
Number of temporary events visited for initial inspections of vendors	N/A	94	95	96	133
Total temporary event inspections completed	316	429	384	427	522
% of temporary food inspections with a priority violation	29%	29%	31%	35%	35%

5 CDC Risk Factors Percentage Breakdown - Mobile Food Establishments					
Performance Measure	2021	2022	2023	2024	2025
Cross Contamination	N/A	14%	10.6%	10.84%	13%
Improper Holding	N/A	41.8%	48.2%	42.17%	50%
Inadequate Cooking	N/A	7.6%	10.1%	9.89%	13%
Personal Hygiene	N/A	5%	5%	13.73%	4%
Unsafe Source	N/A	31.6%	26.1%	23.37%	20%
Number of mobile preinspections	157	179	207	345	309
Number of routine mobile food inspections completed	110	180	327	371	454
Total number of mobile food inspections (prelicensing, routine, reinspections etc.)	709	920	1,214	1,469	1,771
% of mobile routine inspections with a priority violation	13%	19%	30%	34	31

Number of tattoo and body art preinspections	27	24	15	18	18
Number of tattoo and body art routine inspections	37	49	60	59	75
Total number of tattoo & body art inspections (prelicensing, routine, reinspections, etc.)	60	256	258	354	344
Number of Devices Inspected/Inspections Performed	1,123	836	1,166	1,114	1145
Number of W&M complaints	28	28	21	72	86
Number of outreach trainings conducted	N/A	151	189	136	250
Number of facilities were an interpreter was utilized	-	-	-	-	104 *
Number of food complaints	641	648	590	631	661
Number of body art complaints	0	1	8	5	14
QA average rating	N/A	94.70%	99.26%	99%	99%

** New data point added: important to demonstrate we offer this service where needed on inspections to ensure equity in inspection process.*

Cases Reported							
Cases reported	2021	2022	2023	2024	2025	Three Year Average	Estimated Number of Cases Per Case Reported *
Campylobacter	67	64	97	64	79	80	30
E. coli 0157	12	22	17	15	7	13	26
Listeria	0	0	3	4	2	3	2
Salmonella	69	76	59	71	80	70	29
Vibrio	2	1	3	9	1	4	142
Yersinia	2	4	11	3	7	7	123

* City of Milwaukee enteric disease cases from Wisconsin Electronic Disease Surveillance System on January 6, 2020. Data is provisional and subject to change.

Incidence Rate per 100,000								
Cases reported	2021	2022	2023	2024	2025	Three Year Average	Healthy People 2030 Target	Healthy People 2030 Status
Campylobacter	11.6	10.7	16.3	10.8	13.3	13.5	10.9	not met
E. coli 0157	2.1	3.7	2.9	2.5	1.2	2.2	3.7	met
Listeria	0.0	0.0	0.5	0.7	0.3	0.5	0.22	not met
Salmonella	12.0	12.8	9.9	11.9	13.4	11.7	10.6	not met
Vibrio	0.3	0.17	0.5	1.5	0.2	0.7	N/A *	N/A *
Yersinia	0.3	0.7	1.8	0.5	1.2	1.2	N/A *	N/A *

* Vibrio and Yersinia were not included as targets for Healthy People 2030.

Emergency Preparedness Environmental Health (EPEH)*					
Performance Measure	2021	2022	2023	2024	2025
Policies and TGDs updated	*	*	*	1 <i>(training policy)</i>	9
2025-2026 Policy/TGD Goals	*	*	*	15	7
Public Health Urgent Responses <i>(multi-day, large-scale)</i>	*	*	*	7	3*

* Gaps are the result of restructuring nearly all EPEH program KPIs

- Extreme cold sheltering
- Emergency blood lead level clinics
- Flood response

Emergency Preparedness					
Average % of staff responses to exercised emergency notification messaging	85%	90%	89%	77%	59%
Number of emergency preparedness exercises conducted	Active Response	Active Response	4	7	11
Number of days responding to Extreme Weather Events	*	5	*	7	6
Mutual Agreements published with CAO approval	*	*	*	2	1
AARs / Hotwashes published	*	*	*	6	8
Job Action Sheets published	*	*	*	12	18
Checklists created <i>(DO, CAT, EOC, Mass Care)</i>	*	*	*	4	1
POD Site Surveys conducted	*	*	*	24	24
Open POD Site Operational Plans created	*	*	*	6/15	1
Closed POD Site Agreements	*	*	*	8	9
WEAVR Volunteer Engagement	*	*	*	10%	4%

Environmental Health *					
Performance Measure	2021	2022	2023	2024	2025
Number of beach water samples collected for pathogenic testing	139	137	131	179	131
Total hours dedicated to beach water sampling	*	*	*	127.6 hrs	144 hrs
Number of water quality or swim safety advisories for City of Milwaukee beaches	102	102	72	120	75
Number of beach closures - dangerous waves or currents	*	*	*	20	23
Number of swim advisories (yellow) - elevated bacteria	*	31	22	14	6
Number of swim advisories (yellow) - rainfall	*	*	*	17	7
Turnaround time for beach alerts (1 hour goal)	*	*	*	41 min. average	36 min. average
Shelters that had extensive HVAC system or other indoor air quality improvements completed under federal disparities grant	*	*	*	3	3 *
Number of possible Carbon Monoxide exposure incidents investigated	*	*	94	103	178
Number of rabies exposure investigations	*	*	94	117	80
Number of Safety Drills and Safety Trainings conducted	*	*	10	4	4
Number of Safety Committee meetings	17	10	8	2	20
% of employees that are respirator fit tested	52%	60%	80%	51 (100%)	N/A *
Number of facility hazardous chemical storage plans reviewed as part of the Local Emergency Planning Committee (LEPC)	64	50	48	68	45
Number of needle/ infectious waste removals completed	60	45	30	18	43
Consultation with Health Centers/Annual Infectious Waste Reports submitted to DNR	3	3	3	3	4
Indoor Air Quality Consultations and Investigations	*	*	*	*	124
Possible Legionella Outbreak Investigations	*	*	*	*	4

* Gaps are the result of restructuring nearly all EPEH program KPIs

* Names of the 3 shelters:

- Community Advocates Women's Center
- Walker's Point Youth & Family Center
- Salvation Army

* Lack of technical support for fit test machine, fit testing was deferred until new machines could be obtained - comprehensive department-wide testing resumed in February 2026.

Home Environmental Health (HEH)

Performance Measure	2021	2022	2023	2024	2025
Lead Hazard Reduction					
Number of lead inspections completed	121	163	271	344	324
Number of risk assessments completed	130	159	247	246	278
Number of permits issued	279	379	390	315	354
Number of MHD final clearances	155	144	189	183	243
Number of families provided relocation service	62	50	53	79	56
Number of units with orders issued	165	188	271	383	221*

* In 2025, HEH moved to a "one-order" process. Previously, one unit could result in Interior and/or Exterior Health Orders. The new process allows HEH to enforce one Health Order that covers all violations related to an ENF case.

Healthy Homes					
Number of Healthy Homes assessments completed	83	52	40	94	62

Lead Surveillance and Responses					
Number of EBL outreach letters sent	2,064	2,538	5,293	5,100	3,975
Number of new children referred for nurse case management	87	109	204	153	106 *
Number of children requiring chelation	16	6	16	6	12
Number of chelation events	23	9	24	9	15
Number of nurse cases closed	101	69	170	111	90
Number of nurse case management outreach interventions	7,978	6,015	8,738	8,766	7,912
Number of initial developmental screenings completed	74	83	106	60	70

* In September 2024, interventions below 15 moved to a voluntary process where PHNs offer a home visit and education to all EBL families. 57 additional children received a nurse home visit as part of this outreach effort.

Division Metrics *					
Total combined revenue generated from lead billing	\$90,900	\$59,050	\$125,475	\$168,525	\$36,075
Revenue generated from environmental investigation	\$81,975	\$56,625	\$85,100	\$134,700	\$4,500
Revenue generated from lead abatement licenses	N/A	N/A	\$29,025	\$25,950	\$46,074
Revenue generated from case management billing	\$8,925	\$2,425	\$5,050	\$7,875	\$0
Total amount assessed from reinspection fees	N/A	N/A	\$11,100	\$71,850	\$64,800
Number of outreach events attended	12	11	15	31	53

* 2022 data onward presents actual revenue. Previous years may present billing claims.

Performance Measure	2021	2022	2023	2024	2025
Lead Epidemiology					
Number of reported blood lead tests	23,591	24,775	27,944	29,609	31,169
Total Number of children tested	19,990	20,792	22,169	23,165	25,197
Number of reported blood lead tests for children under 72 months	22,676	23,662	26,340	27,697	27,690
Total number of children under 72 months tested	19,179	19,807	20,833	21,566	22,139
Number of children under 72 months – 3.5-4.9 µg/dL	904	979	1,272 *	1,120 *	781 *
Number of children under 72 months – 5-9.9 µg/dL	720	770	964	943	699
Number of children under 72 months – 10-14.9 µg/dL	170	154	173	171	165
Number of children under 72 months – 15-19.9 µg/dL	59	57	60	83	66
Number of children under 72 months – 20-39.9 µg/dL	69	61	76	88	63
Number of children under 72 months – Greater than 40 µg/dL	22	11	24	15	23
Percent of children under 72 months – Greater than 3.5 µg/dL	10.1%	10.3%	12.3%	11.2%	8.1%
Percent of children under 72 months – Greater than 5 µg/dL	5.4%	5.3%	6.2%	6.0%	4.6%
Percent of children under 72 months – Greater than 10 µg/dL	1.7%	1.4%	1.6%	1.7%	1.4%
Percent of children 12 to 35 months of age with at least 1 reported blood lead test	57.1%	64.9%	69.1%	73.4%	73.9%

* In late 2021, the CDC lowered their BLRV from 5 µg/dL to 3.5 µg/dL.

CLINICAL SERVICES

Communicable Disease (CD)					
Performance Measure	2021	2022	2023	2024	2025
Number of reportable cases assigned to CD PHNs	447	750	1,463	1,189	1,149
Number of reportable cases followed-up by CD Program	447	750	1,463	1,189	1,149

Immunizations					
Number of clients immunized	119,753	23,652	3,578	4,106	2,096
Total number of immunizations provided	219,291	33,856	7,225	10,602	6,423
Number of offsite immunization clinics	0	13	39	58	11
School / childcare education sessions provided	0	3	3	3	3
Number of 2-year-old reminder/recall letters mailed	0	4,021	1,768	3,294	3,331
% of 2-year-olds in the City of Milwaukee who are up to date on their immunizations by 24 months of age	57%	57%	58%	61%	61%
% of children in compliance with school required immunizations	83%	92%	79%	85%	86%

Flu Vaccination Rates by Age					
Performance Measure	2020-21	2021-22	2022-23	2023-24	2024-25
6 months -17 years	37%	29%	24%	21%	22%
18 - 65+ years	63%	56%	39%	41%	50%

Tuberculosis					
Performance Measure	2021	2022	2023	2024	2025
Number of chest x-rays performed at KHC	171	127	123	224	210
Number of TB clinic visits	266	240	197	460	267
Number of Directly Observed Therapy home visits	1,023	901	1,201	1,287	1,442
Number of tuberculosis cases in the City of Milwaukee	11	12	12	20	18
Number of clients provided TB case management	11	12	12	20	18

Milwaukee Breast and Cervical Cancer Awareness Program (MBCCAP)*					
Performance Measure	2021	2022	2023	2024	2025
Screening Objective (unduplicated)	900	950	1,400	950	900
Total number of breast cancer screenings	838	985	1,146	1,539	857
Total number of cervical cancer screenings	89	130	77	88	3
Community events	0	5	7	4	3
Number of diagnostic services provided	N/A	728	401	422	268
Number of clients enrolled in Medicaid by MBCCAP	N/A	30	7	16	2

* MBCCAP transitioned to a care coordinator role in February 2024, with a focus on connecting clients to services provided by our community partners.

Sexual and Reproductive Health (SRH)					
Performance Measure	2021	2022	2023	2024	2025
Number of KHC clinic visits (duplicated patients)	5,390	6,241	6,734	9,216	5,941
Number of persons tested for STIs (unduplicated as of 2022)	5,350	3,256	4,597	4,318	4,000
Number of HIV tests	3,370	3,431	3,051	3,591	1,979
Number of persons provided emergency contraception	278	375	603	858	470
Number of STI/HIV cases assigned to MHD staff for case management	1,036	1,556	1,466	1,960	1,877
New HIV infections identified in the City of Milwaukee	100	113	90	107	85
Cases of gonorrhea in the City of Milwaukee	5,072	4,907	3,985	4,021	3,238
Cases of primary and secondary syphilis in the City of Milwaukee	445	437	294	224	109
Cases of chlamydia in the City of Milwaukee	9,623	9,215	9,127	8,842	8,357
% of HIV cases linked to care within 1 month of diagnosis in the City of Milwaukee	74%	78%	84%	92%	78%

Incidence rate per 100,000					
Cases reported	2021	2022	2023	2024	2025
Gonorrhea	890.9	828.0	695.6	716.3	574.6
Chlamydia	1690.2	1554.9	1599.4	1575	1483.1
Primary and Secondary syphilis	78.2	73.7	51.28	39.9	19.34
HIV	17.6	19.1	15.8	19.1	15.1

Milwaukee Health Department Laboratory (MHDL)

Performance Measure	2023	2024	2025
Tests Performed: Communicable Diseases			
Respiratory pathogens	297	476	599
Gastrointestinal pathogens	126	55	20
Syphilis	8,054	8,814	7,230
Chlamydia	12,583	15,286	13,040
Gonorrhea	14,879	17,434	13,492
Mycoplasma	1,346	950	540
Trichomonas	5,975	7,538	5,825
HIV	4,084	5,219	3,733
Hepatitis C	N/A	1,716	1,721
Herpes	395	323	572
Other (Clinical/Reference)	245	678	552

Tests Performed: Environmental Health			
Lead in dust wipes, paint, soil	11,291	10,546	11,649
Lead in Water	793	663	750
Summerfest Water (Potable)	526	234	52
Beach Water (Recreational)	135	171	138
Water Treatment Plant (raw and finished water- Potable; Cryptosporidium, Giardia and culturable viruses)	78	20	0
SARS-CoV-2 (Air sampling)	44	129	0
Other (Environmental/ Reference)	3	372	276

Performance Measure	2023	2024	2025
Other Performance Measures			
Number of LRN Activities: Bio-threat Detection <i>(included proficiency testing)</i>	31	5	2
Number of active grants	7	8	6

Outcome Measures			
Number of certifications maintained *	7	7	7
Number of successful regulatory inspections	2	5	4

Customer and Community Impact Measures			
Clients/partners served	49	42	31
Monthly e-reports to clinical partners & stakeholders (12 per calendar year) on laboratory surveillance	100%	100%	100%
# of interns and fellows hosted	7	7	5

* MHDL maintains 7 certifications:

- Clinical Laboratory Improvement Amendment (CLIA) certificate of compliance (ZMB, KHC and SSHC locations)

- Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) – Milk, Food and Water Lab certification

- Wisconsin Department of Natural Resources (DNR) – Lead in Water certification

- American Industrial Hygiene Association Laboratory Accreditation Programs (AIHA-LAP, LLC) – Environmental Lead certification

- CDC Environmental Legionella Isolation Techniques Evaluation (ELITE)

POLICY, INNOVATION, AND EQUITY (PIE)

Performance Measure	2021	2022	2023	2024	2025
Records Requests					
Number of data requests (internal and external)		324	33	14	*

* Data for 2025 is unavailable due to a workflow change affecting tracking. Reporting will resume in 2026.

Substance Misuse Initiatives					
Number of Narcan kits distributed	582	1,546	2,772	2,502	5,969
Number of Fentanyl test Strips distributed	1,500	10,954	24,593	5,845	6,142

Communication and Community Engagement					
Number of MHD website unique visits	401,049	373,901	126,874	227,508	218,782
Number of press releases	N/A	75	20	23	20
Number of graphics requests	N/A	N/A	200 +	275	308

Social Media metrics Breakdown By Platform					
Facebook					
Engagement	N/A	8,111	1,500	2,348	6,119
Total people reached	N/A	1,185,641	784,000	687,897	N/A
Instagram					
Engagement	N/A	10,544	3,800	4,020	4,335
Total people reached	N/A	84,484	127,000	140,723	108,961

Engagement: the cumulative number of reactions, comments and shares on social media posts.

Reach: the number of unique people who see our content (Facebook no longer tracks reach).

Fetal Infant Mortality Review (FIMR)

Performance Measure	2021	2022	2023	2024	2025
Number of infant deaths	72	69	74	*	*
Infant mortality rate per 1,000 live births	8.8	8.77	9.38	*	*
Number of stillbirths *	48	46	55	*	*
Number of reviews completed	6	5	6	6	6
% maternal interviews completed	0	0	0	0	0*
Number of partners actively engaged	46	46	55	65	69
% of cases analyzed	45%	45%	40% with continuing analysis	0% with continuing analysis	0% with continuing analysis

* For fetal and infant outcomes, values are shown only for years with fully reconciled data. Values for 2024 and 2025 are preliminary and thus excluded.

* Stillbirth defined as babies who die before taking their first breath, are without a heartbeat at birth, and weigh at least 350 grams and / or are more than 20 weeks gestation.

* Interviews were suspended during the pandemic and FIMR has not had capacity to restart.

Infant Mortality Rate by Race and Ethnicity (Mortality per 1,000 births) *

Year	Overall Rate	NH Black *	NH White *	Hispanic/Latinx	NH Asian *
2015 - 2017	10.5	15.5	5.1	5.8	6.8
2016 - 2018	10.9	15.9	5.9	6.4	5.8
2017 - 2019	10.6	15.0	5.0	7.1	5.6
2018 - 2020	10.2	14.1	5.5	6.8	3.2
2019 - 2021	9.3	13.3	4.0	6.1	3.5
2020 - 2022	9.5	13.1	5.0	6.5	4.9
2021 - 2023	8.8	12.9	4.9	5.0	5.5

* Data shows 3-year average infant mortality rates through 2023, the most up-to-date reconciled data available at time of publication.

* NH = Non-Hispanic.