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February 4, 2021

Ruthie Weatherly
Board President, City of Milwaukee Board of Health
1673 N Astor St.
Milwaukee, WI 53202

Dear Board President Weatherly:

I am writing in response to the DHS 140 Review conducted of the City of Milwaukee Health Department (MHD) conducted on December 10 and 19, 2019. The DHS 140 Review program ensures local health departments meet minimum requirements set out in statute and rule and is a quality improvement identification process. The MHD was reviewed as a Level III health department, the highest level in statute. This letter 1) contains the review teams findings (at the end of this document) from the review that took place in December, 2019; 2) acknowledges that a very long time has elapsed since that review, and that we are all still focused on responding to the pandemic facing our communities and state; and 3) proposes a path forward.

As mentioned, this letter is coming to you more than a year following our review. While we believe the findings were accurate at the time of the review, we recognize that it is possible that changes during the intervening period will provide for improved findings. The pandemic, which was the reason our work on DHS 140 reviews was suspended in 2020, still continues and will require our full attention well into this year. In recognition of these circumstances, we are offering to consider new information regarding the issues identified. We also intend to work with you to assure all issues are addressed, while also offering an extended period, as detailed on page two, for you to respond to the issues raised.

I want to acknowledge the work of the MHD Health Department. The Department of Health Services' (DHS) Division of Public Health (DPH) review team identified a set of strengths the MHD can take pride in and look to build on as a health department. A list of those identified strengths is attached. I am acutely aware of the stress of operating a health department and the demands on public health directors and professionals that have increased exponentially during this global pandemic. I applaud the dedicated efforts of MHD leadership and MHD staff to keep the City of Milwaukee healthy and safe during the COVID-19 pandemic.

At the time of the review, there were fundamental areas of concern that prevent me from recertifying the MHD as a Level III health department at this time. The fundamental areas of concern are as follows:

1. Strategic planning as required by [Wis. Stat. § 140.04\(1\)\(h\)2. & \(4\)](#); [Wis. Stat. § 140.05\(1\)\(e\)](#); and [Wis. Stat. § 140.06\(7\)](#)
2. The Community Health Assessment and Community Health Improvement Plan process as required by [Wis. Stat. §§ 251.05\(3\)\(a\) & \(c\)](#); and [Wis. Admin. Code §§ DHS 140.04\(1\)\(g\)3-5.](#)
3. The Board of Health as required by [Wis. Stat. § 251.04](#)

Additionally, DPH and the MHD have had conversations and correspondence regarding other programmatic deficiencies and missed contractual obligations by the MHD. While this letter states three fundamental areas of concern, these other conversations and correspondence contributed to the overall finding of the MHD's performance.

As a result of these concerns as Interim Wisconsin State Health Officer I am delaying issuing a certificate of designation to the MHD in lieu of the following:

1. The MHD will develop a one-year action plan including corrective actions to address the areas of concern.
2. The MHD will submit the plan to staff at the DPH within 60 days of this notification. If you will be unable to provide the plan within the 60-day period due to COVID-19 response challenges, please contact us to discuss an alternative timeframe that works better for you but also keeps this moving forward.
3. The MHD will provide regular updates, at least monthly, to DPH staff on progress pertaining to the action plan.
4. DPH will create a "MHD Liaison Team" with knowledge and expertise in all the areas of concern facing the MHD which will review the action plan and the regular updates and provide feedback to the MHD.

If there are areas where new information and documentation can confirm that deficiencies no longer exist you can provide them to the Department at any time and we will review. If those issues have been satisfactorily addressed, the action plan will no longer need to cover those areas.

Once the action plan has addressed the fundamental areas of concern, or the one-year action plan has expired, the liaison team will provide a level recommendation to me as Interim State Health Officer. Assuming all fundamental areas of concern have been addressed satisfactorily, I will recertify the MHD as a Level III local health department. If not, I will certify the MHD at the level indicated by Wisconsin Statute and rule for which the MHD meets the requirements.

A detailed accounting of the areas of concern and how those concerns could potentially be mitigated is attached.

The Division of Public Health is fully committed to working with you to resolve the areas of concern. Thank you for your attention to this important matter. We are happy to schedule a meeting at your request to review the findings and next steps.

Sincerely,

A handwritten signature in cursive script that reads "Julie Willems Van Dijk".

Julie Willems Van Dijk
Interim State Health Officer

c: Marlaina Jackson, Interim Commissioner of Health
Lilliann Paine, Chief of Staff
Dawn Mumaw, Director, Southeastern Region
att: Foundational Areas of Concern of the Milwaukee Health Department
Identified Strengths of the Milwaukee Health Department

Foundational Areas of Concern

A set of fundamental areas presented themselves as areas of concern for the DPH review team during the review:

1. Strategic planning – Requirement under [Wis. Stat. § 140.04\(1\)\(h\)2.](#) & [\(4\)](#); [Wis. Stat. § 140.05\(1\)\(e\)](#); and [Wis. Stat. § 140.06\(7\)](#)
2. The Community Health Assessment and Community Health Improvement Plan process – Requirement under [Wis. Stat. §§ 251.05\(3\)\(a\)](#) & [\(c\)](#); and [Wis. Admin. Code §§ DHS 140.04\(1\)\(g\)3-5.](#)
3. The Board of Health – Requirement under [Wis. Stat. § 251.04](#)

Additionally, DPH and the MHD have had conversations and correspondence regarding other programmatic deficiencies and missed contractual obligations by the MHD. These other conversations and correspondence contributed to the overall finding of the MHD's performance.

Strategic Planning

[Requirement under [Wis. Stat. § 140.04\(1\)\(h\)2.](#) & [\(4\)](#); [Wis. Stat. § 140.05\(1\)\(e\)](#); and [Wis. Stat. § 140.06\(7\)](#)]

Concerns Identified

The MHD shared with the review team a draft department strategic plan for 2018-2022. The draft strategic plan had functionally and effectively not started as of December 2019. Multiple sections of the draft strategic plan contained placeholders for adding planning information later despite the planning timeline – the process for drafting the strategic plan – identified as between July 2017 and November 2018. The strategic plan was still in draft form two years through date of implementation.

When discussing implementation of the strategic plan, the MHD did not demonstrate operationalization of the plan. Instead, MHD leadership discussed the vision for what the plan would be. The MHD did not have a response when asked how the MHD would measure the implementation or success of the strategic plan nor how MHD leadership would use any measurement system to inform strategic plan implementation or MHD operational decisions. The strategic plan as shared is not a viable strategic plan to guide the department.

All three classification levels for local health departments require increasing levels of strategic planning and measurement to assess the impact and effectiveness of the department's work.

How might those concerns be mitigated?

The MHD needs to create a strategic plan reflective of the current state of department operations and identify attainable goals for the health department. The MHD must engage the public it serves in the planning process and must determine and track performance measures that may be evaluated and used to inform decision making at the MHD. Crucially, the department must implement a strategic plan.

DPH should receive regular check-ins on progress in developing and implementing a strategic plan. Associated milestones to track and assess progress must be established.

The Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) Process

[Requirement under [Wis. Stat. §§ 251.05\(3\)\(a\) and \(c\)](#); [Wis. Admin. Code §§ DHS 140.04\(1\)\(g\)3-5](#).]

Concerns Identified

The MHD conducted a CHA in 2015-2016 and created a CHIP to span 2017-2022. During the review, the MHD stated the CHIP failed to launch, receiving no organizational support from the MHD until Commissioner Kowalik's administration took over the department. The CHIP was also not utilized or aligned with community partners, preventing the community from identifying with or taking ownership of the CHIP in absence of MHD leadership. A staff member, Daryl Davidson, was assigned to "relaunch" the current CHIP for the remaining timeframe until the next CHA and CHIP are completed. The MHD relaunch of the 2017-2022 CHIP is staffed by one person after years of neglect by the previous MHD administration. This staffing level appears inadequate to the level of effort needed to implement this core public health document.

Development and implementation of a CHA and CHIP are requirements of all local health departments in statute and rule.

How might those concerns be mitigated?

The MHD relaunch of the 2017-2022 CHIP needs to reverse the years of neglect by the previous MHD administration. Current MHD leadership needs to: (1) articulate how the MHD is reengaging and aligning the current 2017-2022 CHIP with partners; (2) provide adequate resource support to ensure a viable CHIP implementation given the size and complexity of the MHD, the MHD's partners, and the jurisdiction the MHD serves; and (3) create a plan to monitor and measure implementation of the current 2017-2022 CHIP.

For the next CHA and CHIP the MHD needs to create a plan for how these core public health documents will be implemented. Implementation must involve partnership engagement and mapping, efforts to create community ownership, and sustainable resource support.

The Board of Health

[Requirement under [Wis. Stat. § 251.04](#)]

Concerns Identified

Until 2019 the City of Milwaukee did not have a Board of Health. The Board of Health is still very new; the day of the site visit the Board was meeting in session for only the second or third time. The diverse membership, public health credentials and expertise, and early work of the Board as of the site visit all appeared promising, however, the Board of Health did not have a long enough track record to ascertain if they meet the requirements set out in statute.

How might those concerns be mitigated?

Clarity needs to be provided on the Board of Health's role in relation to the MHD Commissioner, Public Safety and Health Committee, and the Common Council. Clarity also needs to be provided on how the Board, as an advisory committee, meets statutory requirements, particularly [Wis. Stat. § 251.04\(6\)](#). Given the Board's new nature, the structure of these interactions has not been sussed out at the time of the site visit.

The Board needs to determine what they hope to accomplish as both a Board of Health and in relation to the MHD. The Board must create plans for how those hopes will be accomplished. The Board should be involved in the operations of the MHD by advising on the CHA and CHIP. In an early example of advocacy, the Board formed a lead safe advisory committee; further examples of public advocacy should be provided.

Identified Strengths

The DPH review team identified a set of strengths the MHD can look to and build on as they improve the work of the health department.

Food Safety

The MHD runs a solid and innovative food safety and inspection program. The health department identified food safety violations rising, so the department applied and received grant funds to improve the program. The MHD implemented food safety letter grades which food establishments are required to visibly post. The visual communication provided greater information to consumers and spurred establishments to improve their safety standards. Since implementing the letter grades the MHD has reported food safety violations dropping.

Public Health Lab

The MHD Public Health Lab is known as one of the highest performing local health department labs in the country. The HIV and sexually transmitted disease testing is some of the best in the country. The lab provides a boost to other MHD programs, as the efficiency of having a lab in house avoids navigating confidentiality issues with an external organization and allows follow-up on water testing, infectious disease cases, etc. to occur immediately.

Programs Engage the Community

While the MHD needs to engage the community more in the implementation of its CHIP priorities, individual programs within the MHD are embedded in the communities they serve. The home visitation program is responding to community needs and expanding their services to include mental health supports. Understanding the importance of fathers to family health, the MHD has a father focused Direct Assistance to Dads (DAD) Project to connect fathers to home visitation services. The MHD also supports programs that have their impetus in community requests, such as Blanket of Love and MHD nurses in city schools.

Understanding of Health Equity

The MHD has a better understanding of what is required to achieve health equity than almost any other health department in the state. The MHD focuses a lot on health equity and once a problem is identified, potential solutions are attempted. Recent examples include: the creation of a doula hotline to improve infant mortality in the city, and providing greater health literacy and interpretation services to the Hmong community upon the identification of lack of community information and understanding of cancer.

Vision

The MHD is a health department in transition. A restructure of the whole department is in progress, and the MHD leadership team articulated at the review a vision for the MHD's future success. Many aspects of that vision had yet to implement at the time of the review, however, the new department organizational structure sets the stage for a better functioning department in the future.