

**GREEN COUNTY BOARD OF HEALTH MEETING NOTICE**  
**Green County Public Health**  
**N3152 Hwy 81**  
**Monroe, WI 53566**

**COMMITTEE:** Green County Board of Health

**DATE:** June 10, 2026

**TIME:** 3:15 PM

**LOCATION:** Government Services Building –1<sup>st</sup> Floor Public Health Conference Rm #112, N3152 Hwy 81, Monroe, WI 53566

**AGENDA**

1. Call to Order
2. Introductions
3. Approval of Agenda- Action
4. Approval of the May 7, 2026, Minutes- Action
5. Public Comment- (time limit not to exceed three minutes per person or thirty minutes total)
6. Board of Health Orientation Presentation -Information/Discussion
7. Review and Update Board of Health Membership, Meetings, and Orientation Policy and Procedure-Information/Discussion/Action
8. Report by Health Officer - Information/Discussion/Action
  - May Program Statistics and Activities
  - Grant Funding Update
  - 2025 State WI Community Health Assessment
9. Resolution to Support Sustainable State Funding for Local Public Health Departments-Information/Discussion/Action
10. Review and Approval of the Bills as Submitted- Action
11. Business by board members. May only be discussed; any item requiring action will be added to a future agenda
12. Next Meeting Date: July 8, 2026
13. Adjourn-Action

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters, or other auxiliary aids. For additional information or to request the service, contact 608-328-9390

## GREEN COUNTY BOARD OF HEALTH MEETING MINUTES

**DATE:** 5-7-26

**TIME:** 5:00 pm

**LOCATION:** Public Health Conference Room, Government Services Building, Monroe, WI 53566

**The meeting was called** to order by Director RoAnn Warden. Introductions given by those present. Harvey Kubly, Amy Jo Walter, Dr. Julio Rodriguez, Barbara Duerst, Nicole Wilcox, and Dr. Kelsey Schmidt (virtually)  
Staff: RoAnn Warden and Corporation Counsel Brian Bucholtz.

**Election of Chair and Vice Chair** - H. Kubly was nominated by Dr. J. Rodriguez as Chair of the Board of Health; the nomination was accepted. Moved to approve H. Kubly for chairperson by Dr. J. Rodriguez and seconded by Dr. K. Schmidt, motion carried.

A. Walter nominated self as Vice Chair of the Board of Health; the nomination was accepted with no other nominations. Moved to approve A. Walter as Vice Chair of the Board of Health by Dr. J. Rodriguez and seconded by H. Kubly, motion carried.

**Moved to approve** the May 7, 2026, agenda by Dr. K. Schmidt, and seconded by A. Walter. Motion Carried.

**Moved to approve** the April 8, 2026, minutes by Dr. J. Rodriguez, and seconded by Dr. K. Schmidt. Motion Carried.

**Public Comment:** Co. Board Supervisor L. Kranig expressed a desire for the Board of Health to adopt an ordinance that will meet the needs of the county.

The proposed Human Health Hazard ordinance was presented by the Director and the Corporation Counsel, with background for the ordinance. **Moved to approve** the Proposed Human Health Hazard Ordinance as presented by Dr. J. Rodriguez and seconded by B. Duerst. Motion Carried.

**Health Officer's Report:** RoAnn Warden

- April program statistics, activities, and Communicable Disease report were reviewed. Handouts.
- The department's Emergency Call Tree was updated with the current board members' contact information.

**Moved to approve the Health Officer's report** by Dr. J. Rodriguez and seconded by N. Wilcox. Motion Carried.

**Discussion held about the Board of Health's regular meeting time.** Members agreed to keep meeting time at 3:15 pm on the second Wednesday of each month.

**Business by Board Members:** Chair H. Kubly shared copies of an obituary for someone who lived a "full" life with a supportive family that cared for them in their own home, even though at the time it would have been considered "normal" to live in an institution.

**A motion to adjourn** was made by Dr. J. Rodriguez and seconded by N. Wilcox. Motion Carried.

Next Meeting: June 10, 2026

# **Board of Health Membership, Meetings, and Orientation**

**Green County Public Health Department**

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## **PURPOSE:**

To define the membership of the board of health.

To establish the place, time, frequency, and safety considerations of meetings.

To outline the orientation of new board members.

## **POLICY STATEMENT:**

The Green County Board of Health is an official policy-making board of the Green County Board of Supervisors. The Committee of Committees selects the board members and is appointed by the Chair of the Green County Board of Supervisors. The term is for two (2) years.

This Board shall consist of 7 members: 4 will be county board members, and 3 will be persons who are not elected officials or employees of the County and who reside in Green County and have a demonstrated interest or competence in the field of public health or community health. In appointing members who are not elected officials or employees, a good-faith effort shall be made to appoint a registered nurse and a physician. This board shall have all the duties and authority granted under Ch. 251, Wis. Stats., and shall have general supervision over the Green County Public Health Department.

## **PUBLIC HEALTH ESSENTIAL SERVICE:**

- Mobilize community partnerships to identify and solve health problems
- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety

## **AUTHORITY**

WI Statute 251.04

## **SCOPE**

This policy applies to:

- The Chairperson and all appointed Board of Health members, including County Board Supervisors and citizen members
- Director/Health Officer in their administrative and leadership roles

## **PROCEDURE:**

1. The board meets monthly in the Government Services Building, Public Health Conference Room #112, Monroe, WI. Pleasant View Annex located at N3152 Hwy 81, Monroe, WI. The meetings are held at 3:15 p.m. on the 2nd Wednesday of each month, unless the Chair specifies otherwise.
2. Each newly appointed Board of Health member will be asked if they have a food allergy, and if a severe airborne allergy is shared, no food will be present during meetings, and the meeting room will remain free of food for the entire day. This measure is being implemented to accommodate individuals with severe food allergies and promote a safe environment for all participants.
3. The Chairperson and Director/Health Officer will determine an agenda for each meeting.
4. The Director/Health Officer will conduct an orientation for all newly appointed board members. This process will utilize comprehensive resources and training materials from the Wisconsin Department of Health Services - Division of Public Health, the Wisconsin Association of Local Health Departments and Boards (WALHDAB), and the National Association of Local Boards of Health (NALBOH).

Orientation topics will include:

- An introduction to public health
  - The functions of the Board of Health and its members.
  - A department budget overview
  - An introduction to programs and services and WI public health law.
  - Annual Report
  - Strategic Plan
  - Community Health Assessment
  - Community Health Improvement Plan
  - About Green County Public Health Factsheet
  - Roles and Responsibilities of a Health Officer and Board of Health Members
5. The Director/Health Officer will send an email invitation to Board of Health members to sign up for the WALHDAB account in order to receive direct communications.
  6. The Director/Health Officer will offer board of health members a tour of the department and an invitation to attend a Public Health Department clinic or event.

## **RESOURCES**

National Association of Local Boards of Health (NALBOH)

This is a resource for orientation and board education/learning.

Green County Public Health - Reports and Press Releases Webpage

This resource links our Annual Report, Strategic Plan, Community Health Assessment, and Community Health Improvement Plan.

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Wisconsin Association of Local Health Departments and Boards (WALHDAB) - Board of Health Tools

This resource is designed for onboarding new board members.

Wisconsin Department of Health Services - Information for Local Boards of Health

This comprehensive website serves as a resource for board members, providing orientation materials and information on statutory requirements within the Wisconsin public health system.

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**REVISION HISTORY**

Effective Date: 05/08/2013

Review/Revise Date: 07/18/2019, 3/8/2023, 4/19/2024, 1/15/25, 6/10/2026

Authorized and Approved by Green County Health Director/Officer

## May Board of Health Activity Report

| Communicable Disease Control  | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|-------------------------------|---------------------------|--------------------|----------------------|
| <b>IMMUNIZATIONS</b>          |                           |                    |                      |
| DTaP                          | 0                         | 0                  | 1                    |
| MMR                           | 1                         | 3                  | 6                    |
| Polio                         | 1                         | 2                  | 7                    |
| Hepatitis A - Children        | 4                         | 10                 | 3                    |
| Hepatitis B - Children        | 2                         | 4                  | 8                    |
| Meningo                       | 0                         | 1                  | 0                    |
| Varicella                     | 4                         | 8                  | 2                    |
| Prevnar 20                    | 1                         | 3                  | 0                    |
| Pediarix                      | 1                         | 5                  | 0                    |
| HPV                           | 0                         | 0                  | 0                    |
| Rotavirus                     | 0                         | 0                  | 0                    |
| Hib                           | 1                         | 2                  | 0                    |
| Influenza - Children          | 0                         | 5                  | 0                    |
| Influenza - Adult             | 0                         | 7                  | 0                    |
| Tdap - Adult & Children       | 0                         | 7                  | 5                    |
| Shingles                      | 0                         | 8                  | 0                    |
| COVID-19 Adult                | 0                         | 0                  | 0                    |
| COVID-19 Child                | 0                         | 0                  | 0                    |
| Hepatitis A - Adult           | 0                         | 0                  | 0                    |
| Hepatitis B - Adult           | 0                         | 6                  | 1                    |
| Twinrix (Hep A & B)           | 0                         | 0                  | -                    |
| RSV - Children                | 0                         | 0                  | 0                    |
| <b>Total Immunizations</b>    | <b>15</b>                 | <b>71</b>          | <b>33</b>            |
| Immunization Reminder Letters | 70                        | 326                | 56                   |
| <b>TB</b>                     |                           |                    |                      |
| New TB Clients                | 0                         | 0                  | 0                    |
| Total Clients                 | 1                         | 1                  | 0                    |
| TB Face to Face Visits        | 8                         | 89                 | 0                    |
| TB Skin Tests                 | 7                         | 22                 | 3                    |
| <b>RABIES PREVENTION</b>      |                           |                    |                      |
| Animal Bite Follow-ups        | 14                        | 44                 | 12                   |
| Animals Tested for Rabies     | 1                         | 4                  | 1                    |

| Maternal Child Family Health            | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|-----------------------------------------|---------------------------|--------------------|----------------------|
| <b>WOMEN, INFANTS &amp; CHILDREN</b>    |                           |                    |                      |
| Total Clinics                           | 6                         | 31                 | 6                    |
| Total WIC Participating                 | 425                       | ##                 | 396                  |
| Breastfeeding Peer Contacts             | ##                        | 133                | 15                   |
| Certified Lactation Counseling Contacts | 4                         | 27                 | 2                    |
| <b>FFHV</b>                             |                           |                    |                      |
| New PNCC Admits - FFHV                  | 0                         | 3                  | 0                    |
| New Admits FFHV - Not pregnant          | 1                         | 1                  | 0                    |
| Total Clients                           | 21                        | 24                 | 21                   |
| Face to Face Visits                     | 22                        | 99                 | 20                   |
| Receiving PNCC and on FFHV              | 3                         | 10                 | 1                    |
| <b>PRENATAL CARE COORDINATION</b>       |                           |                    |                      |
| New Admits                              | 0                         | 1                  | 0                    |
| Total Clients                           | 1                         | 1                  | 1                    |
| Face to Face Visits                     | 2                         | 6                  | 0                    |

| Environmental Health                     | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|------------------------------------------|---------------------------|--------------------|----------------------|
| <b>PRIVATE WELL WATER TESTING</b>        |                           |                    |                      |
| GCPH Lab Kits Distributed                | 7                         | 26                 | -                    |
| Other Lab Kits Distributed               | 0                         | 26                 | 9                    |
| <b>WELL WATER RESULTS</b>                |                           |                    |                      |
| Positive Results for Bacteria            | 0                         | 1                  | 2                    |
| Nitrates (>10 MCL)                       | 1                         | 4                  | 0                    |
| Positive Results for Ecoli Bacteria      | 0                         | 0                  | 0                    |
| <b>HEALTH HAZARD REPORTS</b>             |                           |                    |                      |
| Health Hazard Reports                    | 3                         | 7                  | 0                    |
| <b>RADON</b>                             |                           |                    |                      |
| Kits Distributed                         | 3                         | 42                 | 4                    |
| Low Risk < 4 pCi/L                       | ##                        | 6                  | 2                    |
| Moderate Risk 4 - 8 pCi/L                | ##                        | 5                  | 2                    |
| High Risk > 8 pCi/L                      | ##                        | 8                  | 0                    |
| <b>TRANSIENT NON-COMMUNITY WELLS</b>     |                           |                    |                      |
| TN Well Sites Inspected & Sampled        | 8                         | 12                 | 1                    |
| Positive for Coliform Bacteria           | 0                         | 0                  | 0                    |
| Positive for Fecal Coliform Bacteria     | 0                         | 0                  | 0                    |
| Nitrates (>10 MCL)                       | 0                         | 0                  | 0                    |
| <b>LEAD POISONING PREVENTION</b>         |                           |                    |                      |
| WIC Blood Lead Tests (cap)               | 3                         | 29                 | 9                    |
| Blood Lead Levels between 3.5-9 (venous) | 1                         | 3                  | 1                    |
| Blood Lead Levels 10 or greater (venous) | 1                         | 1                  | 0                    |
| Lead Risk Assessments                    | 0                         | 0                  | 0                    |

| Chronic Disease and Injury Prevention | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|---------------------------------------|---------------------------|--------------------|----------------------|
| <b>BLOOD PRESSURE</b>                 |                           |                    |                      |
| Blood Pressure Screenings             | 0                         | 6                  | 0                    |
| BP Monitoring Kit Check-Out           | 0                         | 4                  | 0                    |
| <b>CAR SEATS</b>                      |                           |                    |                      |
| Car Seats Distributed                 | 7                         | 20                 | 8                    |
| Car Seat Checks                       | 10                        | 32                 | 9                    |
| <b>SHARPS CONTAINER INITIATIVE</b>    |                           |                    |                      |
| Containers Distributed                | 10                        | 90                 | 33                   |
| Containers Collected                  | 14                        | 117                | 20                   |
| <b>FATALITY REVIEW TEAM</b>           |                           |                    |                      |
| Cases Reviewed                        | 1                         | 3                  | 2                    |

| Access to Care                             | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|--------------------------------------------|---------------------------|--------------------|----------------------|
| Bridging Brighter Smiles Clinics           | 1                         | 2                  | 0                    |
| Bridging Brighter Smiles Participants Seen | 4                         | 8                  | 0                    |

| Education and Outreach  | # Monthly Count (Current) | Year to Date Count | # 2025 Monthly Count |
|-------------------------|---------------------------|--------------------|----------------------|
| Education Presentations | 3                         | 9                  | 2                    |
| Students/Job Shadowing  | 0                         | 2                  | 0                    |
| Contacts with Media     | 1                         | 11                 | 4                    |
| Community Events        | 4                         | 10                 | 1                    |
| Birth Letters           | 22                        | 147                | 29                   |

## Confirmed Communicable Disease Report

| Communicable Disease                                            | January | February | March | April | May | 2026 Total |
|-----------------------------------------------------------------|---------|----------|-------|-------|-----|------------|
| ANAPLASMOSIS, A. phagocytophilum                                | 0       | 0        | 0     | 0     | 0   | 0          |
| ARBOVIRAL ILLNESS, WEST NILE VIRUS, NEUROINVASIVE               | 0       | 0        | 0     | 0     | 0   | 0          |
| CAMPYLOBACTERIOSIS                                              | 0       | 0        | 0     | 1     | 3   | 4          |
| CARBAPENEMASE PRODUCING ORGANISM (CPO)                          | 0       | 0        | 0     | 0     | 0   | 0          |
| CARBON MONOXIDE POISONING                                       | 1       | 0        | 0     | 0     | 1   | 2          |
| CHLAMYDIA TRACHOMATIS INFECTION                                 | 4       | 6        | 5     | 9     | 4   | 28         |
| CORONAVIRUS, NOVEL 2019 (COVID-19) - ASSOCIATED HOSPITALIZATION | 1       | 8        | 4     | 0     | 2   | 15         |
| CRYPTOSPORIDIOSIS                                               | 0       | 0        | 0     | 0     | 0   | 0          |
| CYCLOSPORIASIS                                                  | 0       | 0        | 0     | 0     | 0   | 0          |
| E-COLI, ENTEROINVASIVE (EIEC) / SHIGELLOSIS                     | 0       | 0        | 0     | 0     | 0   | 0          |
| E-COLI, ENTEROTOXIGENIC (ETEC)                                  | 0       | 0        | 0     | 0     | 0   | 0          |
| E-COLI, SHIGA TOXIN-PRODUCING (STEC)                            | 0       | 0        | 0     | 0     | 0   | 0          |
| EHRlichiosis, E. chaffeensis                                    | 0       | 0        | 0     | 0     | 0   | 0          |
| EHRlichiosis, E. ewingii                                        | 0       | 0        | 0     | 0     | 0   | 0          |
| GIARDIASIS                                                      | 0       | 0        | 0     | 0     | 0   | 0          |
| GONORRHEA                                                       | 2       | 0        | 1     | 1     | 0   | 4          |
| HAEMOPHILUS INFLUENZAE, INVASIVE DISEASE                        | 0       | 0        | 0     | 0     | 0   | 0          |
| HEPATITIS A                                                     | 0       | 0        | 0     | 0     | 0   | 0          |
| HEPATITIS B, CHRONIC                                            | 1       | 0        | 0     | 0     | 0   | 1          |
| HEPATITIS C, ACUTE                                              | 0       | 0        | 0     | 0     | 0   | 0          |
| HEPATITIS C, CHRONIC                                            | 0       | 0        | 0     | 0     | 0   | 0          |
| HEPATITIS C, PERINATAL                                          | 0       | 0        | 0     | 0     | 0   | 0          |
| HISTOPLASMOSIS                                                  | 0       | 0        | 0     | 0     | 0   | 0          |
| INFLUENZA-ASSOCIATED HOSPITALIZATION                            | 10      | 6        | 3     | 0     | 0   | 19         |
| LEGIONELLOSIS                                                   | 0       | 0        | 0     | 1     | 0   | 1          |
| LYME DISEASE, ERYTHEMA MIGRANS (EM) RASH                        | 0       | 0        | 1     | 0     | 0   | 1          |
| PELVIC INFLAMMATORY DISEASE                                     | 0       | 1        | 0     | 0     | 0   | 1          |
| PERTUSSIS (WHOOPING COUGH)                                      | 0       | 0        | 1     | 0     | 0   | 1          |
| Q FEVER, ACUTE                                                  | 0       | 0        | 0     | 0     | 0   | 0          |
| RESPIRATORY SYNCYTIAL VIRUS (RSV) - ASSOCIATED HOSPITALIZATION  | 1       | 3        | 7     | 5     | 0   | 16         |
| SALMONELLOSIS                                                   | 0       | 0        | 1     | 1     | 0   | 2          |
| SHIGELLOSIS                                                     | 0       | 0        | 0     | 0     | 0   | 0          |
| STREPTOCOCCAL DISEASE, INVASIVE, GROUP A                        | 1       | 0        | 0     | 1     | 0   | 2          |
| STREPTOCOCCAL DISEASE, INVASIVE, GROUP B                        | 0       | 1        | 0     | 2     | 1   | 4          |
| STREPTOCOCCUS PNEUMONIAE, INVASIVE DISEASE                      | 0       | 0        | 0     | 0     | 1   | 1          |
| SYPHILIS                                                        | 0       | 0        | 0     | 0     | 0   | 0          |
| TOXOPLASMOSIS                                                   | 0       | 0        | 0     | 0     | 1   | 1          |
| TUBERCULOSIS - Active                                           | 0       | 0        | 0     | 0     | 0   | 0          |
| TUBERCULOSIS - BCG                                              | 0       | 0        | 0     | 0     | 0   | 0          |
| TUBERCULOSIS, LATENT INFECTION (LTBI)                           | 0       | 0        | 0     | 2     | 0   | 2          |
| VANCOMYCIN-RESISTANT ENTEROCOCCI (VRE)                          | 0       | 0        | 0     | 0     | 0   | 0          |
| VARICELLA (CHICKENPOX)                                          | 0       | 0        | 0     | 1     | 0   | 1          |
| VIBRIOSIS, NON CHOLERA                                          | 0       | 0        | 0     | 0     | 0   | 0          |
| YERSINIOSIS                                                     | 0       | 0        | 0     | 0     | 0   | 0          |
| Outbreak Tracking                                               | January | February | March | April | May | 2026 Total |
| Gastrointestinal (GI) Outbreaks                                 | 2       | 1        | 0     | 0     | 0   | 3          |
| Respiratory Outbreaks                                           | 5       | 0        | 0     | 0     | 0   | 5          |
| Other Outbreaks-                                                | 0       | 1        | 0     | 0     | 0   | 1          |
| Foodborne or Waterborne Illness Complaints                      | January | February | March | April | May | 2026 Total |
| Reported Foodborne or Waterborne Illness Complaints             | 0       | 1        | 1     | 0     | 0   | 2          |

## **A RESOLUTION TO SUPPORT SUSTAINABLE STATE FUNDING FOR LOCAL PUBLIC HEALTH DEPARTMENTS**

**WHEREAS**, in Wisconsin, local health departments (LHDs) are legally required to provide a core set of public health services under Wisconsin Statutes Chapter 251 and Wisconsin Administrative Code Chapter DHS 140; and

**WHEREAS**, responsibilities of LHDs have expanded significantly in recent years due to emerging public health threats, workforce shortages, and increasing community health needs; and

**WHEREAS**, local health departments rely heavily on a combination of limited state aids, categorical grants, and local property tax levy to fund these mandated services; and

**WHEREAS**, current state funding mechanisms for public health are largely outdated, not indexed to inflation, and do not reflect the true cost of delivering foundational public health services; and

**WHEREAS**, Wisconsin currently ranks 49<sup>th</sup> lowest in state dollars dedicated to public health per person ([https://www.americashealthrankings.org/explore/measures/PH\\_funding](https://www.americashealthrankings.org/explore/measures/PH_funding)); and

**WHEREAS**, Public health initiatives consistently deliver high returns on investment (ROI), with recent data showing a median ROI of 14.3 to 1, often saving \$14 in medical and societal costs for every \$1 spent (<https://www.pew.org/en/research-and-analysis/articles/2025/07/08/public-health-initiatives-deliver-big-returns-on-investment>); and

**WHEREAS**, reliance on short-term, restricted, or competitive grant funding creates instability and limits long-term planning; and

**WHEREAS**, counties bear a disproportionate share of the financial burden for providing foundational public health services, placing additional pressure on local property taxpayers; and

**WHEREAS**, a strong and adequately funded public health system is essential to protect the health, safety, and economic stability of Wisconsin residents and communities;

**NOW, THEREFORE, BE IT RESOLVED** that the Wood County Board of Supervisors supports continuing to build and retain public health infrastructure through increased and flexible funding; and

**BE IT FURTHER RESOLVED** that such a funding model should:

- Provide increased General Purpose Revenue (GPR) support for local health departments
- Include automatic inflationary adjustments
- Allow for flexible use of funds to meet local needs

- Reduce reliance on short-term, restricted, and/or competitive grants

**BE IT FURTHER RESOLVED** that the State of Wisconsin recognizes public health as a core governmental function and prioritizes sustained investment to ensure consistent service delivery across all jurisdictions; and

**BE IT FURTHER RESOLVED** that Wood County requests that the Wisconsin Counties Association advocates for policies that reduce the reliance on local property tax levy to fund foundational public health services; and

**BE IT FURTHER RESOLVED** that a copy of this resolution be forwarded to the Governor of Wisconsin, members of the Wisconsin State Legislature, the Wisconsin Department of Health Services, and all Wisconsin counties.