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Department of Health Services

**2016 DPH Consolidated Contract Addendum**

This contract addendum is specific to Sheboygan County Human Services Division of Public Health whose principal business address is 1011 North Eighth Street, Sheboygan, WI 53081-4043. The contact for the GRANTEE’S Contract Administrator is:

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**Section 6.D Funding Controls**

Funding controls are summarized below. The [2016 Consolidated Contract Overview](#) contains current funding controls for all Profile IDs that are part of the consolidated contract.

Payments through June 30, 2016 are limited to 6/12<sup>th</sup> of the contract with the balance paid after July 1, 2016 based on reported costs up to the contract level. This applies only to the following Profile IDs:

Profile IDs Subject to 6/12 <sup>th</sup> Funding Controls			
Profile ID	Name	Profile ID	Name
103010	Regional Radon Information Centers	157720	Childhood Lead
151734	Oral Health Supplement	159320	MCH
151735	Oral Health Mouth Rinse	159321	Reproductive Health
152002	Reproductive Health SLOH	159327	Family Planning
152020	Family Health-Women's	181005	TPCP-WIS-WINS

Payments through September 30, 2016 are limited to 9/12<sup>th</sup> of the contract with the balance paid after October 1, 2016 based on reported costs up to the contract level. This applies only to Profile ID 154710.

**Section 34.A Special Provisions**

**1. Contract Period**

The [2016 Consolidated Contract Overview](#) contains current funding periods for all Profile IDs that are part of the consolidated contract.

## **2. Final Report Dates**

The due date of the final fiscal report for the following Profile IDs shall be sixty (60) days after the Grant Agreement Period ending date.

- 157720 (Childhood Lead Consolidated)
- 155020 (Immunization Consolidated)
- 159320 (Maternal Child Health Consolidated)

Expenses incurred during the Grant Agreement period on these profiles, but reported later than sixty (60) days after the period ending date, will not be recognized, allowed or reimbursed under the terms of this Grant Agreement.

The [2016 Consolidated Contract Overview](#) contains final report due dates for all Profile IDs that are part of the 2016 Consolidated Contract.

## **Contract Agreement Addendum: Exhibit I**

### **Program Quality Criteria**

Generally high program quality criteria for the delivery of quality and cost-effective administration of health care programs have been, and will continue to be, required in each public health program to be operated under the terms of this contract.

This Exhibit contains only applicable quality criteria for this contract.

## Contract Agreement Addendum: Exhibit I

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

### **Program: Immunization** Program Quality Criteria

- 1) Assessment and surveillance of public health to identify community needs and to support systematic, competent program planning and sound policy development with activities focused at both the individual and community levels.
  - A) a. Contractees must assure reported vaccine preventable diseases (VPD) are investigated and controlled as detailed in the most current edition Wisconsin Disease Surveillance Manual (EPINET) and/or written disease-specific guidance from DPH (e.g. Pertussis Guidelines). Local Health Departments (LHDs) should maintain regular contact with local required reporters of VPDs to encourage and assure prompt reporting. Contractees should solicit the help of the Wisconsin Immunization Program when needed to help assure that an adequate system is in place to report and investigate VPD.
  - B) b. Contractees must annually formally evaluate immunization delivery and the use of vaccine preventable disease surveillance systems and improve the use of those systems in their jurisdictions where needed (e.g., the Wisconsin Electronic Disease Surveillance System (WEDSS)).
  - C) c. Contractees must work in collaboration with the Wisconsin Immunization Program to increase the use of existing electronic data collection systems for vaccine record keeping and vaccine preventable disease data systems
- 2) Delivery of public health services to citizens by qualified health professionals in a manner that is family centered, culturally competent, and consistent with the best practices; and delivery of public health programs for communities for the improvement of health status.
  - A) Contractees must assure the delivery of immunization services in a safe, effective and efficient manner as detailed in the Wisconsin Immunization Program Policies and Procedures Manual and in section 252, HFS 145, Wis. Admin. Code. Contractees must assure the immunization of children is consistent with Healthy People 2020 goals.
- 3) Record keeping for individual focused services that assures documentation and tracking of client health care needs, response to known health care problems on a timely basis, and confidentiality of client information.
  - A) Contractees must use the Wisconsin Immunization Registry (WIR) or an electronic immunization population-based data system that links with the WIR. The data system must have a tracking and recall function to identify children whose immunization records are behind schedule according to the ACIP recommendations. Tracking and recall shall be conducted at least every other month as required by the Wisconsin "Policies and Procedures Manual for Immunization Programs".
  - B) Contractees immunization practice must assure the immunization of children, and share children's immunization records with parents or guardians, schools and day care centers and other healthcare providers as provided by the Wisconsin School Immunization Law HFS 144 (section 252).
- 4) Information, education, and outreach programs intended to address known health risks in the general and certain target populations to encourage appropriate decision making by those at risk and to affect policy and environmental changes at the community level.
  - A) a. Contractees must engage in community partnerships to identify and address the needs of high-risk populations, reduce racial and ethnic health disparities, and to educate families and the community on the importance of immunizations.

## Contract Agreement Addendum: Exhibit I

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

- b. Contractees should engage in improving health literacy for the public and for the healthcare personnel working with immunizations to better understand, evaluate, and communicate immunization information.
- 5) Coordination with related programs to assure that identified public health needs are addressed in a comprehensive, cost-effective manner across programs and throughout the community.
- A) Contractees must coordinate public and private immunization services with local child healthcare (service) providers: e.g., WIC projects, Medical Assistance programs, and other local public health programs to assess the immunization status of, refer, and provide immunization services to under-immunized children.
- 6) A referral network sufficient to assure the accessibility and timely provision of services to address identified public health care needs.
- A) Contractees must develop relationships among public and private healthcare providers to facilitate access by children and families to immunization services. Contractees should work with these providers to assure that current immunization guidelines are followed.
- B) The LHD should promote the medical home concept by referring vaccine recipients to their medical home provider for subsequent immunizations and coordinate with this medical provider to assure adherence to the recommended immunization schedule.
- C) LHDs should promote the exchange and sharing of immunization data using immunization registries.
- D) The LHD will assure adequate surveillance, prompt reporting and epidemiologic follow-up of vaccine preventable diseases. When prompt reporting of a vaccine preventable disease does not occur, the LPHD will formally address the issue with the reporting agency to assure that reports are made according to the latest EPINet Manual.
- 7) Provision of guidance to staff through program and policy manuals and other means sufficient to assure quality health care and cost-effective program administration.
- A) Contractees will ensure program staff is competent in current immunization program policy and processes, including that provided through the Centers for Disease Control and Prevention (CDC) distance learning course and CDC updates.
- B) The LHD will follow the Wisconsin "Policies and Procedures Manual for Immunizations" developed and distributed by the Wisconsin Immunization Program, unless otherwise agreed upon; as well as Immunization Policy Memos periodically issued from the Wisconsin Immunization Program. The LHD must have written policies on the proper handling and storage of state-supplied vaccine as required by the Vaccines for Children (VFC) Program. These policies must be reviewed with all immunization program related staff on at least an annual basis.
- 8) Financial management practices sufficient to assure accurate eligibility determination, appropriate use of state and federal funds, prompt and accurate billing and payment for services provided and purchased, accurate expenditure reporting, and, when required, pursuit of third-party insurance and Medical Assistance Program coverage of services provided.
- A) Billing for payment of childhood immunization services is not required under this section.
- B) LHDs must assure that parents of children who are on Medical Assistance will not be charged a vaccine administration fee or be requested to make a donation for vaccine or vaccine related services.

## Contract Agreement Addendum: Exhibit I

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

Administration fees cannot be mandatory and clients must be informed that failure to pay the administration fee or make a donation does not preclude them from receiving state-supplied vaccine. This information must be added to immunization advertising materials used by the LHD for state supplied vaccines. The message must be given to the client in a way and in a language the client understands.

- C) Grantees must screen for insurance eligibility in accordance with current DPH guidelines for state supplied vaccines.
- 9) Data collection, analysis, and reporting to assure program outcome goals are met or to identify program management problems that need to be addressed.
- A) Contractees must collect and analyze agency and available private provider immunization data for children 12-35 months of age, school immunization law reports and other available population-based information needed to identify strengths and weaknesses in local delivery systems and plan improvements. Only children who have moved out of the agency's jurisdiction may be removed from the cohort for analysis.
  - B) LHDs will utilize the WIR for immunization level data analysis.
  - C) LHDs and Tribes will assure staff competence with the WIR system. LHD and Tribal health staff must attend at least one Regional WIR User Group Meetings or Wisconsin VFC Workshops where WIR is included in the agenda. Attendance at these meetings is necessary for staff to maintain a thorough working knowledge of the functionality of the WIR.

## Contract Agreement Addendum: Exhibit I

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

### Program: Radon Outreach Program Quality Criteria

- 1) Assessment and surveillance of public health to identify community needs and to support systematic, competent program planning and sound policy development with activities focused at both the individual and community levels.
  - A) Contractee must assess surveillance data (including their own data) for prevalence of homes with elevated indoor radon exposures in their regions. The Division of Public Health (DPH) radon zip-code map and database are at [www.lowradon.org](http://www.lowradon.org).
- 2) Delivery of public health services to citizens by qualified health professionals in a manner that is family centered, culturally competent, and consistent with the best practices; and delivery of public health programs for communities for the improvement of health status.
  - A) Cultural competence and other qualifications of persons delivering radon services must be the same as those of employees of local health agencies, such as environmental sanitarians and public health nurses.  
  
Cultural competence and other qualifications of persons delivering radon services must be the same as those of employees of local health agencies, such as environmental sanitarians and public health nurses.
- 3) Record keeping for individual focused services that assures documentation and tracking of client health care needs, response to known health care problems on a timely basis, and confidentiality of client information.
  - A) Contractee must maintain a database of measurements carried out by the public with agency assistance and, to the extent possible, follow cases of elevated exposures to promote appropriate interventions and outcomes. However, the ability to follow-up may be limited in some instances, since indoor radon is not regulated in Wisconsin and because detectors and mitigation services are available from the private sector.
- 4) Information, education, and outreach programs intended to address known health risks in the general and certain target populations to encourage appropriate decision making by those at risk and to affect policy and environmental changes at the community level.
  - A) Contractee must serve as a resource for information in their region, and provide referrals when requested for technical information they can't provide. This enables residents to understand the lung cancer risk from radon, test their homes for radon, interpret test results and follow-up testing, and obtain effective radon mitigation

## Contract Agreement Addendum: Exhibit I

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

services where appropriate.

- 5) Coordination with related programs to assure that identified public health needs are addressed in a comprehensive, cost-effective manner across programs and throughout the community.
  - A) Contractee must coordinate outreach with other public health programs in their agency, adjusting services so as to fit into appropriate priorities among groups with other health needs.
  - B) Contractee must participate in radon outreach training by their regional Radon Information Center, and coordinate outreach for the Radon Action Month media blitz in January with them.
- 6) A referral network sufficient to assure the accessibility and timely provision of services to address identified public health care needs.
  - A) Contractee must use the referral network consisting of their Regional Radon Information Center, nationally certified radon mitigation contractors, and web sites for fast access to DPH and EPA radon information and literature. The DPH Web site is [www.lowradon.org](http://www.lowradon.org).
- 7) Provision of guidance to staff through program and policy manuals and other means sufficient to assure quality health care and cost-effective program administration.
  - A) Contractee must provide guidance on radon testing and mitigation following US EPA policies as recommended in EPA's booklets: Citizen's Guide to Radon, Consumer's Guide to Radon Reduction, and Home Buyers and Seller's Guide to Radon, which are readable and downloadable through the US EPA radon web site and the DPH radon web site.
  - B) Contractee must meet criteria of cost-effective program administration in state and local statutes, ordinances and administrative rules.
- 8) Financial management practices sufficient to assure accurate eligibility determination, appropriate use of state and federal funds, prompt and accurate billing and payment for services provided and purchased, accurate expenditure reporting, and, when required, pursuit of third-party insurance and Medical Assistance Program coverage of services provided.
  - A) Considerations of eligibility determination, pursuit of third-party insurance and Medical Assistance coverage do not apply to radon outreach funded by DPH.
- 9) Data collection, analysis, and reporting to assure program outcome goals are met or to identify program management problems that need to be addressed.
  - A) Contractee must review results of radon measurements they have facilitated. To the extent funded and practicable, Contractee must follow cases where elevated screening tests are reported, to ensure appropriate follow-up testing is done, and to ensure that every opportunity for radon mitigation by sub-slab

## **Contract Agreement Addendum: Exhibit I**

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

depressurization is given. However, because indoor radon is not regulated in Wisconsin and because detectors and mitigation services are available from the private sector, the ability to follow-up may be limited in some instances.

B) Contractee's report to the radon program in DPH must be sent by email, so it can be included in the DPH report to US EPA, which requires electronic reporting.

## **Contract Agreement Addendum: Exhibit II**

### **Program Objectives**

(A) Contract Funds, Program/Objective Values, and Other Contract Details

(B) Objective Details

## Contract Agreement Addendum: Exhibit II(A)

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

<b>Contract Source of Funds</b>		
<b>Source</b>	<b>Program</b>	<b>Amount</b>
Sheboygan County	Childhood Lead - Consolidated	\$16,826
Sheboygan County	Immunization - Consolidated IAP	\$26,459
Sheboygan County	Maternal Child Health - Consolidated	\$45,263
Sheboygan County	Radon Outreach	\$3,500
Sheboygan County	WIC USDA	\$452,724
<b>Contract Amount</b>		<b>\$544,772</b>

<b>Contract Match Requirements</b>	
<b>Program</b>	<b>Amount</b>
Childhood Lead - Con	\$0
Immunization	\$0
MCH	\$33,947
Radon Outreach	\$0
WIC	\$0

<b>Program Sub-Contracts</b>		
<b>Program</b>	<b>Sub-Contractee</b>	<b>Sub-Contract Amount</b>
Childhood Lead - Con	None Reported	\$0
Immunization	None Reported	\$0
MCH	None Reported	\$0
Radon Outreach	None Reported	\$0
WIC	None Reported	\$0

## Contract Agreement Addendum: Exhibit II(A)

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

### Childhood Lead - Con

**Program Total Value \$16,826**

- |   |   |         |
|---|---|---------|
| 1 | Template Objective 1 - Blood Lead Testing   | \$9,000 |
|   | <p>By December 31, 2016, 500 children at risk for lead poisoning who reside in Sheboygan County Health and Human Services, Division of Public Health will receive an age-appropriate blood lead test.</p>   |         |
| 2 | Template Objective 3 - Environmental Lead Hazard Investigations   | \$7,826 |
|   | <p>By December 31, 2016, 10 environmental lead hazard investigations will be completed on the primary residences and pertinent secondary properties of children with venous blood lead levels greater than or equal to 10 micrograms per deciliter who reside in Sheboygan County Health and Human Services, Division of Public Health.</p> |         |

### Immunization

**Program Total Value \$26,459**

- |   |   |          |
|---|---|----------|
| 1 | Template Objective 2 - LHD  | \$26,459 |
|   | <p>By December 31, 2016, 82% children residing in Sheboygan County Health and Human Services, Division of Public Health jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccination by their second birthday</p> |          |

### MCH

**Program Total Value \$45,263**

- |   |  |          |
|---|--|----------|
| 1 | Template Objective 8 - Keeping Kids Alive  | \$45,263 |
|   | <p>By December 31, 2016, the Keeping Kids Alive Initiative for CDR will be implemented by the agency in collaboration with community partners.</p> |          |

### Radon Outreach

**Program Total Value \$3,500**

- |   |  |         |
|---|--|---------|
| 1 | Objective #1: Testing and Tracking   | \$2,225 |
|   | <p>By December 31st, 2016, at least 100 persons in the jurisdiction of Sheboygan County Division of Public Health will have completed radon tests in their homes as a result of agency outreach and facilitation of the availability of the detectors.</p>   |         |
| 2 | Objective #2: Training   | \$1,000 |
|   | <p>By December 31st, 2016, at least one Division of Public Health staff member will have completed the Radon Measurement Course and Examination. In addition, Sheboygan County staff will participate in radon training meetings put on by the Fond Du Lac Radon Information Center (RIC).</p>   |         |
| 3 | Objective #3: Outreach Activities and Public Education   | \$275   |
|   | <p>Public educational materials on radon will be made available and distributed to community partners, published in social media resources, and made available through the county website. Sheboygan County will also partner with the Radon Information Center by conducting local outreach for the Radon Action Month media blitz, including presenting to at least two local realtor groups. Consultation to Sheboygan County residents for levels above EPA recommended standards will also be made available.</p> |         |

### WIC

**Program Total Value \$452,724**

- |   |  |           |
|---|--|-----------|
| 1 | Template Objective 1   | \$452,724 |
|   | <p>During the contract budget period of January 1, 2016 through December 31, 2016, the Sheboygan County WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load.</p> |           |

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<b>Total of Contract Objective Values</b>	\$0
<b>Total of Contract Statement Of Work Values</b>	\$544,772

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Childhood Lead Consolidated

**Objective #:** 1 of 2

**Objective Value:** \$9,000

### Objective: Primary Details

**Objective Statement**

Template Objective 1 - Blood Lead Testing

By December 31, 2016, 500 children at risk for lead poisoning who reside in Sheboygan County Health and Human Services, Division of Public Health will receive an age-appropriate blood lead test.

**Deliverable Due Date:** 01/31/2017

**Contract Deliverable (Evidence)**

A report to document the number of unduplicated children at risk for lead poisoning residing in Sheboygan County Health and Human Services, Division of Public Health who received a blood lead test at the appropriate ages: age 1 and age 2, or, if no prior test was done at age 1 or 2, between the ages 3 to 5.

**Programs Providing Funds for this Objective**

Childhood Lead Consolidated: \$9,000

**Agency Funds for this Objective:**

**Data Source for Measurement**

An agency-generated report; or a SPHERE Individual/Household Report, including information from the Lead-testing screen.

**Baseline for Measurement**

**Context**

Acceptable value for this objective is up to \$18 per blood lead test. Children at highest risk for lead poisoning are those eligible or enrolled in the Medicaid or WIC Program, those living or spending time in pre-1950 housing or pre-1978 housing that is undergoing renovation, or those with a sibling with lead poisoning. Age appropriate blood lead tests are done at around 12 months and around 24 months, or at least once between the ages of 3 to 5 years if the child has no previous test documented. Local health departments should seek third party reimbursement for testing Medicaid-enrolled children by billing Medicaid fee-for-service or the appropriate managed care organization. See new reference: CDC Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP) ; Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention; ([http://www.cdc.gov/nceh/lead/ACCLPP/Final\\_Document\\_030712.pdf](http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf), CDC, January 4, 2012) and the WCLPPP Handbook for Local Health Departments (<https://www.dhs.wisconsin.gov/publications/p00660.pdf>, rev. 2014).

**Context Continued**

**Input Activities**

### Objective: Risk Profile

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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**Corresponding Percentage Recoupment**

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**Corresponding Potential Recoupment Amounts**

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**Definition of Percent Accomplished**

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**Conditions of Eligibility for an Incentive**

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## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Childhood Lead Consolidated

**Objective #:** 2 of 2

**Objective Value:** \$7,826

### Objective: Primary Details

**Objective Statement**

Template Objective 3 - Environmental Lead Hazard Investigations

By December 31, 2016, 10 environmental lead hazard investigations will be completed on the primary residences and pertinent secondary properties of children with venous blood lead levels greater than or equal to 10 micrograms per deciliter who reside in Sheboygan County Health and Human Services, Division of Public Health.

**Deliverable Due Date:** 01/31/2017

**Contract Deliverable (Evidence)**

A report to document: 1) the number of children with a blood lead level greater than or equal to 10 micrograms per deciliter; and 2) the number of associated environmental lead hazard investigations that were completed.

**Programs Providing Funds for this Objective**

Childhood Lead Consolidated: \$7,826

**Agency Funds for this Objective:**

**Data Source for Measurement**

An agency-generated report.

**Baseline for Measurement**

**Context**

Acceptable value for this objective is up to \$800 per environmental lead hazard investigation. The most important factor in managing childhood lead poisoning is reducing the child's exposure to lead. CDC recommends that environmental investigations be conducted in housing where a child with a venous blood lead level greater than or equal to 5 micrograms per deciliter lives, where the child spends a significant amount of time, secondary residences, and other areas where the child (or other children) may be exposed to lead hazards (e.g., in buildings with more than one housing unit, conduct inspection not only in the elevated blood lead child's residence, but also in adjacent units where children could be at risk). When notified that a child has a blood lead level greater than or equal to 10 micrograms per deciliter, the public health agency will conduct an environmental lead hazard investigation. This environmental lead hazard investigation includes a risk assessment of the property, issuance of work orders to address the identified lead hazards, and a clearance report indicating that the hazards have been controlled. The intent is to provide early environmental intervention in response to a lead poisoned child to prevent more severe lead poisoning. The environmental lead hazard investigation can include a child's primary residence and pertinent secondary properties. The procedure for the investigation is outlined in Chapter 7 of the WCLPPP Handbook for Local Health Departments (<https://www.dhs.wisconsin.gov/publications/p00660.pdf>, rev. 2014), and is conducted at lower blood lead levels than required by state statute (Wis Stat 254). Also see *Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention*, (CDC Advisory Committee on Childhood Lead Poisoning Prevention, January 4, 2012, ([http://www.cdc.gov/nceh/lead/ACCLPP/Final\\_Document\\_030712.pdf](http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf)).

**Context Continued**

**Input Activities**

### Objective: Risk Profile

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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**Corresponding Percentage Recoupment**

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**Corresponding Potential Recoupment Amounts**

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**Definition of Percent Accomplished**

**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Childhood Lead Consolidated

**Objective #:** 2 of 2

**Objective Value:** \$7,826

**Conditions of Eligibility for an Incentive**

## Contract Agreement Addendum: Exhibit II(B)

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

Program: Immunization

Objective #: 1 of 1

Objective Value: \$26,459

### Objective: Primary Details

#### Objective Statement

Template Objective 2 - LHD

By December 31, 2016, 82% children residing in Sheboygan County Health and Human Services, Division of Public Health jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccination by their second birthday

**Deliverable Due Date:** 01/31/2017

#### Contract Deliverable (Evidence)

A Wisconsin Immunization Registry (WIR) generated population based standard benchmark report documenting the number of children in Sheboygan County Health and Human Services, Division of Public Health jurisdiction who turned 24 months of age in 2016 contract year. Reports should be run with a 45 day buffer to ensure that all updated data has been received by the WIR. If the objective is not met, include a report of the accountability targets and the progress achieved including the activities and interventions conducted; include any barriers that may have been identified.

For your information the cohort of children for this objective is: Date of Birth 01/01/2014- 12/31/2014

Criteria for the 2016 End of the Year Report:

The date of birth for End of Year Benchmark: 01/01/2014 - 12/31/2014 Evaluation date: 01/01/2017

Run date: 02/15/2017

#### Programs Providing Funds for this Objective

Immunization: \$26,459

#### Agency Funds for this Objective:

#### Data Source for Measurement

Wisconsin Immunization Registry Records.

#### Baseline for Measurement

The 2014 end of year population based standard benchmark report will be used to determine the baseline for the 2016 population based objective.

For the baseline the following parameters will be used to run the benchmark report: Birthdate Range: 01/01/2012 thru 12/31/2012

Evaluation Date: 01/01/2015

Run Date: After: 02/15/2015

WIR Benchmark report results:

Birth date between 01/01/2012 and 12/31/2012

Evaluation date: 01/01/2015

Benchmark age @ 24 months

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563  
**Program:** Immunization

**Agency:** Sheboygan County Human Services, Division of Public Health  
**Objective #:** 1 of 1

**Contract Year:** 2016  
**Objective Value:** \$26,459

Total clients: 1357; 1074 clients (79%) met all benchmark criteria, 283 clients did not

Add 3%. 2016 deliverable 82%

### Context

Children will be assessed using the standard benchmark report for having 4 DTaP, 3 Polio, 1 MMR, 3 Hib 3 Hepatitis B, 1 varicella and 4 Pneumococcal Conjugate (PCV) vaccination by 24 months of age. Progress towards reaching 90% will be measured using a WIR Benchmark report. Only children who have moved out of the agency's jurisdiction may be removed from the cohort for analysis. Unless you can prove that a child has moved out of your jurisdiction, you cannot remove them from your cohort.

Guidelines for determining increase needed for progress towards 2016 goals: 2013 Calendar Year Baseline Required Increase:

50-59% - 5% Above Baseline;

60-69% - 4% Above Baseline;

70-79% - 3% Above Baseline;

80-85% - 2% Above Baseline;

86-89% - 1% Above Baseline;

> 90 - Maintain.

Agencies should consult with their Regional Immunization Program Advisor for assistance in determining activities and interventions that will help them achieve the required increase for their population assessment.

### Context Continued

### Input Activities

The Wisconsin Immunization Program recommends the following activities to help ensure success of this objective:

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563  
**Program:** Immunization

**Agency:** Sheboygan County Human Services, Division of Public Health  
**Objective #:** 1 of 1

**Contract Year:** 2016  
**Objective Value:** \$26,459

- Contacting parents of infants without immunization histories
  
- Tracking
  
- Coordination of immunization services with other LHD programs
  
- Sharing information with area physicians
  
- Requesting that information is entered into the WIR.
  
- Reminder/recall

The Wisconsin Immunization Program requires a minimum of 3 attempts to personally contact a responsible party. Only children who have moved out of the agency's jurisdiction may be removed from the cohort for analysis. Unless

you can prove that a child has moved out of your jurisdiction you cannot remove them from your cohort.

Reminder/recall activity is not listed in a particular order and we suggest you use the method that is the most successful for your community:

- Letter
  
- Phone call
  
- Home visit
  
- Email
  
- Text message

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563  
**Program:** Immunization

**Agency:** Sheboygan County Human Services, Division of Public Health  
**Objective #:** 1 of 1

**Contract Year:** 2016  
**Objective Value:** \$26,459

interventions/activities that LHD's may want to consider in order to achieve this objective.

### Objective: Risk Profile

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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**Corresponding Percentage Recoupment**

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**Corresponding Potential Recoupment Amounts**

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**Definition of Percent Accomplished**

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**Conditions of Eligibility for an Incentive**

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## Contract Agreement Addendum: Exhibit II(B)

Contract #: 30563

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2016

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$45,263

### Objective: Primary Details

#### Objective Statement

Template Objective 8 - Keeping Kids Alive

By December 31, 2016, the Keeping Kids Alive Initiative for CDR will be implemented by the agency in collaboration with community partners.

**Deliverable Due Date:** 01/31/2017

#### Contract Deliverable (Evidence)

1. Documentation of utilization of the KKA model in WI, including data entry

2. A completed KKA Assessment Tool Report or Planning and Implementation Report;

Reporting forms are available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

3. Documentation of agency participation in the MCH/KKA annual summit.

#### Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$45,263

#### Agency Funds for this Objective:

#### Data Source for Measurement

1. Reporting forms related to Keeping Kids Alive (available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>)

2. MCH and KKA Summit attendee list

#### Baseline for Measurement

Baseline information as identified in the 2016 Keeping Kids Alive Supplement to GAC Objective.

#### Context

Local Health Departments may choose this objective to:

1. Initiate a new Child Death Review (CDR) and/or Fetal Infant Mortality Review Team in their community where one previously did not exist

(taking into consideration fetal deaths along with infant and child deaths)

2. Assess the fidelity of an existing CDR Team to the Keeping Kids Alive in Wisconsin

Model

3. Assess the ability of the community, with an existing CDR Team, to review fetal deaths

4. Implement and evaluate a plan to address issues brought forth from one of the above assessments

Communities choosing this objective are expected to follow the Keeping Kids Alive model. It is anticipated that most communities can develop and implement a new CDR/FIMR team following this model within two years. Additional time may be negotiated as deemed appropriate. Other MCH objectives will be utilized to assess the community's current prevention efforts and move review recommendations to action.

Primary Activities: Local public health departments will complete the following activities. Moving to other objectives for prevention activities may be undertaken at any time, as the community sees fit.

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Maternal and Child Health Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$45,263

### Context Continued

#### Input Activities

1. Implement and evaluate the selected strategy with activity details in the 2016 Keeping Kids Alive supplement to GAC Objectives.

Strategy 1: Initiate a new team.

ζ Work with staff at the Wisconsin Children’s Health Alliance to receive training on the development and implementation of a death review team and use of the data collection system.

ζ Identify and recruit appropriate partners to form a death review team.

ζ Implement death reviews in accordance with the Keeping Kids Alive in Wisconsin model, including entering all deaths into the data collection system.

ζ Select other objectives to support review recommendations moving to action within your community.

Strategy 2: Improve a current team.

ζ Utilize the standardized tool created by the Alliance to complete an assessment of the current review teams’ fidelity to the Keeping Kids Alive Model and ability to incorporate fetal death reviews into the current structure.

ζ Implement and evaluate strategies to improve the death review team according to needs identified in the assessment.

ζ Select other objectives to support review recommendations moving to action within your community.

2. Utilize the Keeping Kids Alive in Wisconsin model including entering data into the data collection system.

3. Engage in activities with community partners to accomplish assessment and/or planning and implementation, as identified in the 2016 Keeping Kids Alive Supplement to GAC Objective.

4. Request technical assistance from Children’s Health Alliance of Wisconsin and/or MCH contract administrator as needed.

5. Attend the 2016 MCH and KKA Summits.

#### Objective: Risk Profile

##### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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##### Corresponding Percentage Recoupment

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##### Corresponding Potential Recoupment Amounts

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##### Definition of Percent Accomplished

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**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Maternal and Child Health Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$45,263

**Conditions of Eligibility for an Incentive**

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## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Radon Outreach

**Objective #:** 1 of 3

**Objective Value:** \$2,225

### Objective: Primary Details

#### Objective Statement

Objective #1: Testing and Tracking

By December 31st, 2016, at least 100 persons in the jurisdiction of Sheboygan County Division of Public Health will have completed radon tests in their homes as a result of agency outreach and facilitation of the availability of the detectors.

**Deliverable Due Date:** 01/31/2017

#### Contract Deliverable (Evidence)

Cost

∫ Purchased test kits (75 short term kits, 25 long term kits)      \$1,325.00

∫ Test kit tracking (estimated 1 hour per week of support staff time)      \$900.00

#### Programs Providing Funds for this Objective

Radon Outreach: \$2,225

#### Agency Funds for this Objective:

#### Data Source for Measurement

#### Baseline for Measurement

#### Context

#### Context Continued

#### Input Activities

### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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#### Corresponding Percentage Recoupment

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#### Corresponding Potential Recoupment Amounts

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#### Definition of Percent Accomplished

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#### Conditions of Eligibility for an Incentive

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## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563  
**Program:** Radon Outreach

**Agency:** Sheboygan County Human Services, Division of Public Health  
**Objective #:** 2 of 3

**Contract Year:** 2016  
**Objective Value:** \$1,000

### Objective: Primary Details

#### Objective Statement

Objective #2: Training

By December 31st, 2016, at least one Division of Public Health staff member will have completed the Radon Measurement Course and Examination. In addition, Sheboygan County staff will participate in radon training meetings put on by the Fond Du Lac Radon Information Center (RIC).

**Deliverable Due Date:** 01/31/2017

#### Contract Deliverable (Evidence)

Cost

ζ Radon Measurement Course	\$450.00
ζ Radon Measurement Examination	\$175.00
ζ 3 nights lodging	\$240.00
ζ Transportation	\$53.00
ζ Meals	\$82.00

#### Programs Providing Funds for this Objective

Radon Outreach: \$1,000

#### Agency Funds for this Objective:

#### Data Source for Measurement

#### Baseline for Measurement

#### Context

#### Context Continued

#### Input Activities

### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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#### Corresponding Percentage Recoupment

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#### Corresponding Potential Recoupment Amounts

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#### Definition of Percent Accomplished

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#### Conditions of Eligibility for an Incentive

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## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563  
**Program:** Radon Outreach

**Agency:** Sheboygan County Human Services, Division of Public Health  
**Objective #:** 3 of 3

**Contract Year:** 2016  
**Objective Value:** \$275

### Objective: Primary Details

#### Objective Statement

Objective #3: Outreach Activities and Public Education

Public educational materials on radon will be made available and distributed to community partners, published in social media resources, and made available through the county website. Sheboygan County will also partner with the Radon Information Center by conducting local outreach for the Radon Action Month media blitz, including presenting to at least two local realtor groups. Consultation to Sheboygan County residents for levels above EPA recommended standards will also be made available.

**Deliverable Due Date:** 01/31/2017

#### Contract Deliverable (Evidence)

Cost

ζ Materials                \$150.00

ζ Labor                    \$125.00

#### Programs Providing Funds for this Objective

Radon Outreach: \$275

#### Agency Funds for this Objective:

#### Data Source for Measurement

#### Baseline for Measurement

#### Context

#### Context Continued

#### Input Activities

### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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#### Corresponding Percentage Recoupment

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#### Corresponding Potential Recoupment Amounts

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#### Definition of Percent Accomplished

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#### Conditions of Eligibility for an Incentive

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## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Women Infants Children Supplemental Nutrition

**Objective #:** 1 of 1

**Objective Value:** \$452,724

### Objective: Primary Details

#### Objective Statement

Template Objective 1

During the contract budget period of January 1, 2016 through December 31, 2016, the Sheboygan County WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load.

**Deliverable Due Date:** 12/31/2016

#### Contract Deliverable (Evidence)

The State WIC Office will be responsible for providing this deliverable. Monthly participation counts and participation trends will be monitored by the State WIC Office; the contracted caseload may be adjusted as needed.

Programs Providing Funds for this Objective

Women, Infants, and Children (WIC) Supplemental Nutrition:

Agency Funds for this Objective:

Data Source for Measurement

WIC Participation Reports. Baseline for Measurement:

Current caseload is 1943 participants.

#### Programs Providing Funds for this Objective

Women Infants Children Supplemental Nutrition: \$452,724

#### Agency Funds for this Objective:

#### Data Source for Measurement

#### Baseline for Measurement

#### Context

WIC participation means the number of "total participating" on the monthly participation report maintained and monitored by the State WIC Program Office. It is defined as the number of WIC participants, who receive WIC food instruments for one calendar month,

including the number of exclusively breastfed infants.

#### Context Continued

#### Input Activities

Policies and procedures as outlined in the Wisconsin WIC Operations Manual.

### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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#### Corresponding Percentage Recoupment

**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 30563

**Agency:** Sheboygan County Human Services, Division of Public Health

**Contract Year:** 2016

**Program:** Women Infants Children Supplemental  
Nutrition

**Objective #:** 1 of 1

**Objective Value:** \$452,724

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**Corresponding Potential Recoupment Amounts**

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**Definition of Percent Accomplished**

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**Conditions of Eligibility for an Incentive**

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