

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular meeting of the Brown County Human Services Committee was held on Wednesday, March 28, 2018 in Room 200 of the Northern Building, 305 E. Walnut Street, Green Bay, WI.

Present: Chair Hoyer, Supervisor De Wane, Supervisor Schadewald, Supervisor Brusky, Supervisor Linssen
Also Present: CTC Hospital & Nursing Home Administrator Luke Schubert, Public Health Officer Anna Destree, Finance Manager Eric Johnson, ADRC Director Devon Christianson, and other interested parties

I. Call Meeting to Order.

The meeting was called to order by Chair Hoyer at 6:00 p.m.

II. Approve/Modify Agenda.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to approve. Vote taken.
MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of February 28, 2018.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to approve. Vote taken.
MOTION CARRIED UNANIMOUSLY

Comments from the Public: None.

Report from Human Services Chair, Erik Hoyer:

Chair Hoyer noted that the other four Human Services members were unopposed as he was opposed in the upcoming election so whether they chose to go different ways next term or whether they were all working together, this had been a fantastic group, a great opportunity and it had been humbling to be able to do this. You learned a lot on any committee but you learn a lot when you are the chair.

1. Review Minutes of:

a. Aging & Disability Resource Center (December 14, 2017 & January 25, 2018).

Motion made by Supervisor De Wane, seconded by Supervisor Brusky to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

b. Aging & Disability Resource Center Nominating & Human Resources (September 13, 2017).

Motion made by Supervisor De Wane, seconded by Supervisor Linssen to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Communications

2. Communication from Supervisor Schadewald re: I request the Human Services Committee and the Administration Committee to examine proposals to find ways to attract and keep the local resident in psychiatry to stay and work in Brown County.

Schadewald asked that they hold this for the next Human Services Committee but noted this was an ongoing thing where he felt they want to find ways to attract and keep local residents.

Hoyer stated from his own experience in the medical world, the residency location, if they enjoyed their job they definitely want to stay in the community and it was a great opportunity for them and for the county.

Brusky stated this first year of the residency program for the accepted, they had 1,000 applicants for it and they said they got the best. Two of the graduates were two of the four that will be in the second year.

Linssen had spoken with them in the past and they made a conscious effort to recruit people who were willing to practice psychiatry in NE Wisconsin. They had made that a stated goal and understood there was a need for it. Brusky added that if someone wanted to practice in a rural area, they had a better chance of being accepted.

CTC Hospital & Nursing Home Administrator Luke Schubert offered to provide some background on what they were doing with the Medical College of Wisconsin. Schadewald suggested holding off until the next committee meets as there may be new members.

**Motion made by Supervisor De Wane, seconded by Supervisor Linssen to hold for a month. Vote taken.
MOTION CARRIED UNANIMOUSLY**

Wind Turbine Update

3. Receive new information – Standing Item.

Barbara Vanden Boogart – Vice-President of Brown County Citizens for Responsible Wind Energy
Vanden Boogart presented and submitted a study done in Mainz, Germany (attached) and informed that five Cardiothoracic Physicians did a study on live human heart tissue and exposed it to infrasound and found the contractility of the tissue itself was 20% less than what it normally would be without being exposed to the infrasound. After reading the study, which Dr. Tibbets submitted to the Board of Health, she had a number of questions and contacted him about it. She encouraged committee members to speak with him as well should they question any she was saying concerning that conversations. He said it was a totally valid study done and they were reputable physicians who were in a cardiothoracic center and would likely not risk their reputation on something frivolous. This was a really significant finding that they had and they were working on the paper and publishing it and getting it peer reviewed so it will be up and coming in the next several months.

Other

4. Formally Identify Members of the Mental Health Ad Hoc Committee. *Motion at February meeting: To direct staff to provide direction as to what powers a Committee Chair has to appoint members to an ad hoc Committee and to define who the members of the Mental Health Ad Hoc Committee should be.*

Schadewald informed he checked the county code, 2.05 Committees of the County Board - (8) Standing Committees may establish subcommittees composed entirely of their own membership or may call upon the assistance of non-supervisors in examining particular issues. Appointment to subcommittees and the selection of nonsupervisory advisors shall be at the discretion of the committee chair; (9) Subcommittees established under (8) above shall have no official standing and shall report only to the standing committee which established it, unless the standing committee provides otherwise.

Hoyer informed that Pritzl put together a list; they can come back to this next month.

Motion made by Supervisor De Wane, seconded by Supervisor Brusky to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Human Services Department

5. Executive Director's Report.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

6. Financial Report for Community Treatment Center and Community Services.

Finance Manager Eric Johnson informed that for the CTC they had identified and were looking into significant overtime in the first two months of the year and a large variance from budget in personnel cost. Overtime was significantly down in March. They will continue to look at the procedures for authorizing overtime and keeping a close eye on labor costs.

In response to questions from Supervisor Linssen, Johnson reported that the Child Protection area of Community Services had significant overtime compared with the budget. There had been a variance last year but it was deemed due to a number of open positions. They were also looking into the procedures for authorizing overtime; it was the largest area with overtime in Community Services. The level was still about the same in 2018 so they will continue to monitor and report at future meetings.

Overall personnel costs were at the budgeted level for the first two months of the year, it appeared as the overtime was being used to cover for open positions. Schadewald felt they had to question if they had a number of open positions in those places, were they not actively recruiting, were they having unusual turnover and why. Secondly, for example, they found employees gaming the system so they started keeping track of who was getting overtime on Friday and Saturday and not coming in on Monday for the straight shift. He wanted them to open their eyes to the idea of asking questions because they've found things and correcting it. Hoyer remembered going through a similar thing four years ago at the CTC.

Johnson informed they had closed the 2017 books for Community Services; they projected a deficit of over \$1.5 million dollars at one point in the year but because of significant favorable WIMCR and CCS program settlements from prior years, the deficit ended at \$341,000.

Brusky questioned if there was a certain census where it was optimal to be running in the black? Johnson stated in terms of all of the units, the higher census the better. If they ran a significantly higher census it would reduce the amount of levy that was necessary to support the facility. It would be difficult with all the high indigent population and Medicaid population it served to ever run truly in the black without any levy support. Their goal was to meet budget with the current designated levy support. Nicolet was running much better in general, with 16-beds, he wasn't sure much more than the 11.5-12 census on average was realistic. With Bay Haven they continued to look for ways to fill 15-beds. The more the better in terms of financial results. When census got above a certain threshold they had to call another CNA in. For the CBRF, they can bill for every CNA hour that's used on the unit. They had a discussion recently, calling another CNA should be driven completely by the needs of the clients and when it made sense operationally. Because they do get reimbursed they can bill for every CNA hour that was spent on that unit, for the majority of clients who were funded by the crisis intervention. Schadewald stated if they could control the number of patients per day they could efficiently manage their money but it was out of their control.

Motion made by Supervisor De Wane, seconded by Supervisor Schadewald to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

7. Statistical Reports.

- a. **Monthly CTC Data.**
 - i. **Bay Haven Crisis Diversion.**
 - ii. **Nicolet Psychiatric Hospital.**
- b. **Child Protection – Child Abuse/Neglect Report.**
- c. **Monthly Contract Update.**

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to suspend the rules to take Items 7a, 7ai, 7aii, 7b & 7c together. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to receive and place on file Items 7a, 7ai, 7aii, 7b & 7c. Vote taken. MOTION CARRIED UNANIMOUSLY

8. Request for New Non-Continuous and Contract Providers and New Provider Contract.

Motion made by Supervisor Linssen, seconded by Supervisor De Wane to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

Other

9. Audit of bills.

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to acknowledge receipt of the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

10. Such other Matters as Authorized by Law.

Schadewald thanked everyone for the two years of great committee work. He appreciated everyone's effort, wisdom and hard work that they brought forward.

11. Adjourn.

Motion made by Supervisor Schadewald, seconded by Supervisor Brusky to adjourn at 6:19 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Administrative Coordinator/Transcriptionist



Wind power - Jammers for the heart: Mainz researchers investigate the consequences of infrasound

By Michael Bermeitinger. 05/03/2018 allgemeine-zeitung.de

[Mainz researchers investigate the consequences of infrasound]

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MAINZ - The wind energy euphoria is still continuing in politics and industry, but local residents find this energy generation highly controversial. Landscaping is one aspect, but also the harmfulness of inaudible infrasound. And here there is more and more support from research. For example, a working group of the Department of Cardiothoracic and Vascular Surgery of Unimedicine caused a sensation at the congress of the professional society with their research on the impairment of the heart muscle by infrasound. We spoke with the initiator of the work, HTG Director Professor Christian-Friedrich Vahl.

WORKING GROUP INFRASCHALL

Department of Cardiothoracic and Vascular Surgery (HTG) of the University Medical Center
Mainz

Dr. Rayan Chaban

Dr. Ahmed Chazy

Hazem El Beyrouti

Dr. Katja Buschmann

Dr. Lena Brendel

Prof. Christian-Friedrich Vahl

Professor Vahl, how did you come up to this topic?

A friend of mine, the artist Cyrus Overbeck, had a house in Ostfriesland near a large wind farm. And he increasingly complained of difficulty concentrating and sleeping - symptoms that are described all over the world in the vicinity of wind turbines.

And the connection between sound and heart disease?

The impact of audible sound is indeed being researched by the working group around Professor Münzel in an exemplary way. I myself examined the effects of high-frequency vibrations on the development of muscle strength in physiology Hamburg. The assumption that even inaudible sound, ie infrasound, has effects on vessels is not new either.

What kind are these effects?

When the aortic valve, which regulates the flow of blood from the heart to the body, is calcified and constricted, the bloodstream and thus the flow noise changes. For example, it is being discussed whether this altered sound is involved in the formation of dangerous sagging after constrictions.

What is infrasound and how does it work?

The audible sound ranges from 20 to 20,000 Hertz, below 20 Hz it is no longer audible, but it is physically perceptible at high sound pressure - possibly with corresponding consequences. Wind turbines convert 40 percent into energy and 60 percent into infrasound.

But there is noise protection ...

Infrasound has a long range and is not dampened by windows or masonry. It would take 30 meters

high and eight meters thick walls to protect against the usual infrasonic frequencies. And with ever-increasing wind turbines of up to 200 meters and rising power, naturally, the infrasound load will be higher.

What question did you ask yourself about infrasound?

We simply wanted to know qualitatively whether the direct application of infrasound to the heart muscle tissue has an effect on the development of strength.

And how was that measured?

To test whether infrasound has a direct effect on power development, we've connected a speaker to a heart muscle piece. The loudspeaker is a special industrial vibrator that transmits the smallest monophasic vibrations in the infrasound range to the specimen. But also the preparation itself was prepared.

In what way?

We have used an established but complicated technique to eliminate all membrane-bound processes and measure them only on the isolated contractile apparatus. This ensures the contraction of the heart muscle.

How big can you imagine the preparation?

It is about three millimeters long, 0.2 millimeters wide and is fixed between speaker and force gauge. The preparation was activated, then the loudspeaker was switched on.

And what effect did the infrasound have?

At the given time it is safe to say that infrasound under the conditions of measurement reduces the force developed by isolated heart muscle, under certain conditions up to 20 percent is lost. The fundamental question of whether the infrasound can affect the heart muscle is answered.

What's next?

The next step, of course, are measurements on the living specimen.

What conclusion do you draw from the previous results?

We are at the very beginning, but we can imagine that long-term impact of infrasound causes health problems. The silent noise of infrasound acts like a jammer for the heart.

URL to article: <https://www.wind-watch.org/news/2018/03/05/windkraft-storsender-furs-herz-mainzer-scherscher-untersuchen-folgen-des-infraschalls/>

URLs in this post:

[1] Click here for automated computer translation: <https://translate.google.com/translate?u=https%3A%2F%2Fwww.wind-watch.org%2Fnews%2F2018%2F03%2F05%2Fwindkraft-storsender-furs-herz-mainzer-researcher-examine-follow-the-infrasound%2Fprint/&tl=en&sl=de>