

Ordinance No. 87-18  
HEALTH IN ALL POLICIES

NOW, THEREFORE, BE IT ORDAINED that, the Polk County Board of Supervisors enacts the following:

1. Title: This ordinance may be cited as the Health in All Policies.
2. Findings:
  - a. Health starts where we live, learn, work and play, and everyday decisions within the Polk County can promote greater health and equity.
  - b. All Polk County residents should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their job, neighborhood of residence, level of education, immigration status, sexual orientation, ethnic background or religion.
  - c. Good health enhances quality of life, improves workforce productivity, increases the capacity for learning, strengthens families and communities, supports environmental sustainability and helps reduce overall economic and social insecurity.
  - d. In Polk County, those at greatest risk for poor health outcomes are low- income residents, who have a shorter life expectancy than other ~~city~~ <sup>county</sup> residents.
  - e. Polk County residents are primarily affected by heart disease, cancer and stroke.
  - f. Recognizing the presence of critical health disparities in the community and the opportunity to intervene on health outcomes, Polk County has developed and defined public health broadly in the County Comprehensive Plan.
  - g. Health in All Policies is fundamentally about creating systems-level change both within County departments and in the community.
  - h. In developing strategies to address health disparities, it is important to recognize that at its heart, promoting equity is not just about providing more services.
  - i. It is also about how services are developed, prioritized and delivered.
  - j. The Health in All Policies strategy guides Polk County on how to address the social determinants of health, or the root causes of current health disparities in the development, prioritization and delivery of these services and policies.

### 3. Purpose:

- a. The goal of HiAP is to address inequities at the systems, policy and structural levels to eliminate the resulting health disparities.
- b. At the root of HiAP is an approach to improving health of all people by incorporating health considerations into collaborative decision-making across sectors, agencies, and departments. HiAP brings County departments and community groups together to identify ways in which all policies can take health outcomes into consideration. The HiAP process places health at the center of all work, and through discussion and compromise, gains stakeholder buy-in from all agencies, groups, and departments.
- c. Health in All Policies works to create a new policy and organizing framework within county government and beyond in the community. It emphasizes the consequences of public policies, plans, and programs on health determinants, and aims to improve health outcomes at all levels of government within the County and those agencies responsible for serving Polk County residents.
- d. Stakeholder engagement is essential for ensuring that Health in All Policies is responsive to community needs. Community-based knowledge provides important information about opportunities and barriers for health and insight into the ways in which policies may impede or promote health

### 4. Definitions:

- a. **Health** is not simply the absence of disease, but the state of complete physical, mental, cultural and social well-being. HiAP is based on the premise that good health is fundamental for a strong economy and vibrant society, and that health outcomes are largely dependent on the social determinants of health, which in turn are shaped by decisions made within the health sector and internally and externally outside of the health sector.
- b. **Health equity** refers to efforts to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives, while respecting differences that include but are not limited to culture, language, race, gender, sexuality, economic status, citizenship, ability, age and religion.
  - i. Health equity entails focused societal efforts to address avoidable inequalities by equalizing the conditions for health for all groups, especially for those who have experienced socioeconomic disadvantage or historical injustices.

- ii. These communities include, but are not limited to women, people of color, low-income individuals and families, individuals who have been incarcerated, individuals with disabilities, individuals with mental health conditions, youth and young adults, seniors, immigrants and refugees, individuals who are limited-English proficient (LEP), and lesbian, gay, bisexual, transgender, questioning, intersex and asexual (LGBTQIA) communities, or combinations of these populations.
- c. **Health disparities** are differences of presence of disease, health outcomes, or access to care among distinct segments of the populations, including differences that occur by race or ethnicity, gender identity, sexual orientation, education or income, immigration status, age, disability or functional impairment, or geographic location, or the combination of any of these factors.
  - d. **Health inequities** are health disparities resulting from factors that are systemic and avoidable and, therefore, considered unjust or unfair. Determinants of health equity include the social, economic, geographic, political, institutional and physical environmental conditions that lead to the creation of a fair and just society.
  - e. **Social determinants of health** refer to everything outside of direct health care services, such as the condition in the environment in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks. The social determinants of health include, but are not limited to:
    - i. The availability of resources to meet our daily needs (e.g., safe housing, access to healthy and affordable food).
    - ii. Access to educational, economic, and job opportunities that lead to sustainable employment.
    - iii. Neighborhood safety and communities free of crime, violence, and social disorder (e.g., presence of trash and other forms of blight); and
    - iv. Accessible built environments that promote health and safety, including improved pedestrian, bicycle, and automobile safety, parks and green space, and healthy school siting.
    - v. Social norms and attitudes (e.g., discrimination and racism), socioeconomic conditions (e.g., concentrated poverty and the chronically stressful conditions that accompany it).

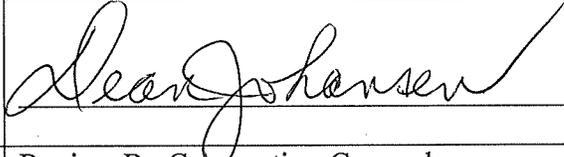
5. Implementation:

Polk County Governmental Departments/Divisions, Governing Committees, and County Board Shall:

- a. Utilize health equity practices to County actions and endeavor to integrate these practices into the county's strategic, operational and business plans; management and reporting systems for accountability and performance; and budgets in order to eliminate inequities and create opportunities for all people and neighborhoods;
  - b. Use the Health in All Policies Checklist and other tools as a guide for implementing Health in All Policies in the County. These resources will outline the vision, mission and goals, and identify a timeline as well as process to reach these goals. These tools will be housed within the Polk County Health Department and made available upon request.
  - c. Polk County Health Department will design and publish an annual report on the status of health and health equity in Polk County and progress of HiAP implementation for the County Board, County staff, community organizations, residents, businesses, and other governmental agencies within the county.
    - a. Implementation will be measured based on health and health equity indicators selected by the Health and Human Services Board.
    - b. In addition to reporting on indicators, the Annual Report will include any updates to the HiAP strategy document.
  - d. Utilizing the annual Community Health Assessment/Community Health Improvement Plan (CHA/CHIP) cycle, Polk County Health Department will develop and implement an ongoing community engagement plan to work directly with stakeholders throughout the process of the HiAP strategy development and implementation to ensure that perspectives are consistently understood, considered, and reflected in decisions.
  - e. The goal is to partner with stakeholders in each aspect of decision making in order to develop and implement collaborative solutions.
6. Severability: If any section, subsection, subdivision, paragraph, sentence, clause or phrase of this ordinance is for any reason held to be unconstitutional or invalid, such a decision shall not affect the validity of the remaining portions of this ordinance. The County Board hereby declares that it would have passed each section, subsection, subdivision, paragraph, sentence, clause or phrase of this ordinance irrespective of the unconstitutionality or invalidity of any section, subsection, subdivision, paragraph, sentence, clause or phrase.

7. Effective Date: This Ordinance becomes effective 30 days after passage and publication.

Polk County Board of Supervisors  
Ordinance No. 87-18  
Health in All Policies

Funding Source/ Funding Amount:	Not Applicable
Date Reviewed as to Appropriations:	Not Applicable
Committee Recommendation as To Appropriation:	Not Applicable
Effective Date:	Upon Passage and Publication
Dated Submitted To County Board	First Reading: December 18, 2018 Second Reading:
Submitted and Sponsored By	
Review By County Administrator: <input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended <input type="checkbox"/> Reviewed Only	Review By Corporation Counsel: <input type="checkbox"/> Approved as to Form <input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended <input type="checkbox"/> Reviewed Only
_____ Jeffrey B. Fuge, Interim County Administrator	_____ Malia T. Malone, Corporation Counsel

County Board Action

At its regular business meeting on the \_\_\_th day of December, 2018 the Polk County Board of Supervisors considered and acted on the above ordinance, Ordinance No. 87-18: Health in All Policies Ordinance, as follows:

- Enacted by simple majority of the board of supervisors by a vote of \_\_\_\_\_ in favor and \_\_\_\_\_ against.
- Enacted by unanimous vote.
- Defeated by a vote of \_\_\_\_\_ in favor and \_\_\_\_\_ against.
- Defeated by voice vote.
- Action Deferred by Procedural Action, as follows: \_\_\_\_\_

SIGNED BY:

\_\_\_\_\_  
Dean Johansen, County Board Chairperson

Attest: \_\_\_\_\_  
Sharon E. Jorgenson, County Clerk

See Attached - Not sent to  
County Board

Certification of Publication

Ordinance No. 87-18: Health in All Policies Ordinance, was published pursuant to Wisconsin Statutes § 59.14(1) in the Inter-County Leader on the \_\_\_\_\_ day of \_\_\_\_\_, 2018.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Sharon E. Jorgenson, County Clerk

**NOTE REGARDING ORDINANCE 87-18:**

**Ordinance No. 87-18 was introduced to Committee only on 12-11-18 and was not sent to County Board for consideration. Committee recommended against sending to County Board for adoption instead recommending Community Services Division internally implement and develop the initiative of Health in all Policies in its decisions and development of policies.**

Segment of Minutes from 12/11/18 Health & Human Services Board:

Brian Kaczmarek updated the board on the Health in all Policies (HIAP) process. He presented a decision chart to the board explaining how this can be used when making decisions on policies. Community Services sought recommendations and advice from the board on the Health In All Policies Initiative.

**Motion** (Alleva/Lagus) to forward the Ordinance on Health in All Policies to the County Board.

Discussion ensued. **Motion** (Alleva/Lagus) to amend the motion to read:

Recommend the Community Services Division develop and implement the initiative of Health in All Policies in its decisions and development of policies and not send it to the County Board at this time."

Chair Bonneprise called for a vote on the amendment. **Motion** on amendment passed on voice vote.

Chair Bonneprise called for a vote on the motion as amended. **Motion passed on voice vote.**

*Sharon Jorgenson*  
*County Clerk*



**MINUTES**

**Health and Human Services Board**

Government Center, Conf. Room A&B

Balsam Lake, WI 54810, Tuesday, December 11, 2018

**Members present**

Attendee Name	Title	Status
John Bonneprise	Chair	Present
Joe Demulling	Vice Chair	Present
Jim Edgell	Supervisor	Present
Michael Larsen	Supervisor	Present
Mike Prichard	Supervisor	Present
William Alleva	Citizen	Present
Pete Raye	Citizen	Present
Sabrina Meddaugh	Citizen	Absent
Dr. Arne Lagus	Citizen	Present

Also present: Marilyn Blake, Deputy County Clerk; Lisa Ross, Support Staff, Community Services; Tonya Eichelt, Interim Community Services Director; Chad Knutson, Interim DCF Director; Brian Kaczmariski, Public Health Director; Megan Challoner, Elementary Principal, Frederic School District; Jeff Fuge, Interim County Administrator; Member of the Press

Chairman Bonneprise called the Health and Human Services Board meeting to order at 9:00 a.m.

Chair called for a motion to approve the agenda. **Motion** (Demulling/Larsen) to approve the agenda. **Motion** carried on a unanimous voice vote.

**Approval of Minutes-** Chair Bonneprise called for a motion to approve the minutes of the November 6, 2018 minutes. **Motion** (Prichard/Alleva) to approve the November 6, 2018 minutes. **Motion carried** by unanimous voice vote.

**Public Comment:** None

**Reports and Presentations**

Tonya gave a brief update on the status of the CJCC new organizational process. They have met to go over the new committee structure and will elect officers next month. Interim Administrator Fuge further explained that there will be two positions under the CJCC program. One will be a case manager and it is hoped that will be filled by the end of the year. The other is a Coordinator position which is under development at this time.

Tonya and Interim Administrator Fuge also reported on filling the VSO position and hope to have that appointment made at the County Board meeting on Tuesday, December 11, 2018. It is hoped to have the new VSO on board by 1/2/2019. Rick Gates is taking off the rest of the month of December.

Tonya and Interim Administrator Fuge also updated the status of the Community Service Department Head position. That application date is closed but the time frame for interviewing and a hire date is not yet known.

A presentation was given by Megan Challoner, Frederic Elementary Principal, on the importance and challenges of getting physical education in the 21<sup>st</sup> Century for youth. She is encouraging all types of programs that deal with children and families to find ways to create opportunities for physical activities. It is especially important to get parents to spend time with their children doing these activities. She responded to several questions from the board. The comments from the board were very positive regarding this presentation.

Brian Kaczmariski updated the board on the Health in all Policies (HIAP) process. He presented a decision chart to the board explaining how this can be used when making decisions on policies. Community Services sought recommendations and advice from the board on the Health In All Policies Initiative.

**Motion** (Alleva/Lagus) to forward the Ordinance on Health in All Policies to the County Board.

Discussion ensued. **Motion** (Alleva/Lagus) to amend the motion to read:

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Chair Bonneprise called for a vote on the amendment. **Motion** on amendment passed on voice vote.

Chair Bonneprise called for a vote on the motion as amended. **Motion passed on voice vote.**

The 2019 Draft Work Plan was reviewed. Tonya said they will make revisions and then will bring it back to the HHS Board next month for revision and/or approval. The Program Review for January will be Policy 10-HHS Board Section. Updates on the success/progress within the Community Services Division on the Health In All Policies will be added to the work plan. Interim Administrator Fuge reminded the board that the public hearing on the Community Services budget needs to be held in August 2019.

Tonya distributed an article on lack of senior housing which was printed in the Minneapolis Star-Tribune on December 9, 2018. This was provided by Supervisor Prichard. The Work Plan will include a discussion of this topic in March 2019.

Next meeting will be Tuesday, January 8, 2019 at 9:00 am.

Chairman Bonneprise called for a motion to adjourn. **Motion** (Raye/Alleva) to adjourn. **Motion** passed on a unanimous voice vote. Meeting adjourned at 11:45 a.m.