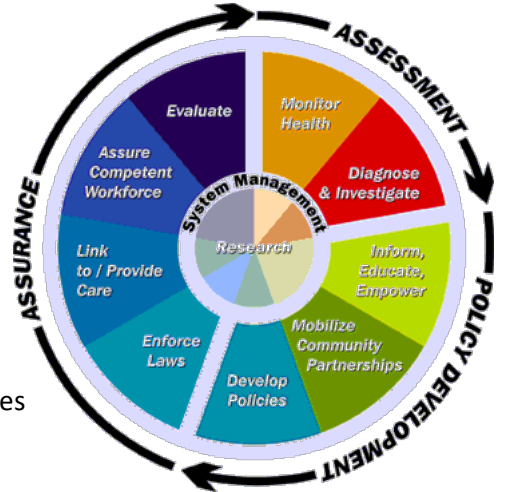


Report to the Board of Health – September 2017

Winnebago County Health Department Leadership Team

- Cheryl Floyd, MSEd – Center Director, Health Promotion and Wellness
- Cynthia Hall, MPH – Director, Strategic Initiatives
- Melinda Idell, RN, MSN – Center Director, Personal Health Services
- Theresa James, CHEC III – Center Director, Public Health Preparedness
- Todd Kisner, MPH – Center Director, Health Protection
- Patrick Madigan, BA – Finance Director
- Todd Marshall, BS, LEHP – Center Director, Environmental Health Improvement



• **Domain I – Monitor Health**

Environmental Health Improvement (EHI) continues to monitor for critical violations for all EHI programs to identify areas where more education is needed for food operators, contractors, landlords, and the general public.

Indoor Air Monitoring Month of September 2017

		Month September 2017	Fiscal Year to Date 2017	Month September 2016	Fiscal Year to Date 2016
Air Quality CO ₂ (PPM)	Inspections Performed	8	52	1	39
	Average	773	790	1254	904
	Max	1298	2826	2195	2363
Temperature (F)	Average	74.8	72.6	76.3	72.3
	Max	84.2	84.2	78.8	83.7
Humidity (%RH)	Average	51.8	45.6	65.2	44.9
	Max	73.1	75.7	67.6	79.7
CO (PPM)	Average	0.4	0.6	0.4	0.6
	Max	1	6.8	0.8	3.3

Homes with at least one reading CO	4	17	1	21
Exceeding guideline:	0	0	0	0
Homes with at least one reading CO ₂ :	3	12	1	15
Exceeding guideline CO ₂ :	0	0	0	0

Table 1.0

Radon

Winnebago County Health Department (WCHD) did purchase and receive another 100 radon test kits to be sold to the public. With the upcoming winter months, WCHD staff are beginning to increase outreach for radon services. This includes the creation of coupons for these kits to try to increase awareness of their availability.

	Month September 2017	County Fiscal Year to Date 2017	Month September 2016	County Fiscal Year to Date 2016
Radon Screenings	3	51	3	51
Average (pCi/L)	6.6	6.8	3.3	5.4
Max (pCi/L)	11.9	41.1	6.1	32.8
Radon Test Kits Purchased	3	81		N/A
Average (pCi/L)	3.3	6.8		N/A
Max (pCi/L)	4.8	54.4		N/A
Phone Calls	8	94	2	99
Units Reported as mitigated	0	10	0	5

Table 1.1

The IYS (Illinois Youth Survey)

A meeting was held with RPS 205 to discuss the IYS Survey. The attendees were Dr. Martell, Cynthia Hall, Cheryl Floyd, and Dr. Monson, Director of Strategic Initiatives for RPS 2015. The Prevention Specialist continues to discuss registration procedures and time frame for registration for all other school districts in Winnebago County that have agreed to include the survey in their list of assessments for 2017-2018. Roscoe Middle School has requested to be included. Currently 11 schools within Winnebago County have stated they will be offering the IYS this school year.

- **Domain 2 – Diagnose and Investigate**

Creating Lead Safe Rockford (CLSR) 2016

The Lead Rehabilitation Specialist position has been filled. Program staff is still awaiting HUD approval of the Healthy Homes work plan, but are continuing to perform inspections for that supplement. The CLSR program remains above all benchmarks to date. Program staff participated in the OSF Safety Safari, one of the most attended outreach opportunities for the program.

CLSR (Creating a Lead Safe Rockford) 2016 Objectives

	Goal	Actual	Percent
Units Enrolled	175	89	51%
Inspections	165	74	45%
Mitigated Units	150	43	29%

Table 2.0

Testing Lead in Water

	Month September	FY 2017
Samples Taken & Analyzed:	10	103
Number Exceeding EPA/IL lead hazard level	0	0
Average Lead Content	2.7	2.5 ppb
Maximum Lead Content	9 ppb	10 ppb

Table 2.1

The upper limit for lead in drinking water is 15.0 ppb (parts per billion). The Environmental Health Improvement (EHI) Laboratory has been performing lead testing for water samples taken as part of Winnebago County Health Department (WCHD) loan inspections from private wells

WCHD continues to wait for a response from the Illinois EPA Certification Board regarding certification of the testing methodology for lead in water. During this waiting time, the EHI lab is conducting a cost analysis review of the procedure.

Food Complaints

	Month September	FY 2017	FY 2016
# of Foodborne Illness Complaints	1	21	38
# of Foodborne Illness Investigations	1	21	38
# of Non-foodborne Illness Complaints	10	174	156

Table 2.2

Housing Complaints

	Month September	County FY 2017 YTD	County FY 2016
# of Housing Complaints	64	797	787
# of Nuisance Complaints	36	376	322
# of Survey Complaints	22	243	400
# of Received Complaints	137	1524	1487
# of Re-check on Complaints	403	4627	4321

Table 2.3

Well & Septic Complaints

	Original Complaints	Recheck Complaints	FY17 Original Complaints	FY17 Recheck Complaints	FY16 Original Complaints	FY16 Recheck Complaints
Wells	6	0	21	16	24	31
Septic	3	1	31	20	28	23

Table 2.4

Communicable Diseases Reported in Winnebago County

Vaccine Preventable Diseases (Reporting timeframe)	September 2017 Confirmed Cases	2017 YTD Investigated & Determined "Not a Case"	2017 YTD Confirmed Cases *	2016 Year Total Confirmed Cases **	2015 Year Total Confirmed Cases
Chickenpox (Varicella) (24h)	0	11	1	0	2
Diphtheria (immediate)	0	0	0	0	0
Haemophilus influenzae, invasive (24h)	1	1	8	8	5
Hepatitis A (24h)	0	1	1	2	0
Hepatitis B-Acute Infection (7d)	0	1	1	2	1
Hepatitis B-Chronic (7d)	0	3	4	21	2
Hepatitis C-Acute (7d)	0	0	1	0	1
Hepatitis C-Chronic (7d)	0	32	79	149	239
Hepatitis D (7d)	0	0	0	0	1
Influenza deaths in < 18 yrs old (7d)	0	0	0	0	0
Influenza A, variant (immediate)	0	0	0	0	0
Influenza, ICU admissions (24h)	0	16	15	5	6
Measles (rubeola) (24h)	0	0	0	0	0
Mumps (24h)	0	0	1	0	0
Neisseria meningitidis, invasive (24h)	0	0	0	1	0
Pertussis (whooping cough) (24h)	1	1	8	7	9
Polomyelitis (immediate)	0	0	0	0	0
Rubella (24h)	0	0	0	0	0
Streptococcus pneumoniae, invasive disease, in those < 5 yrs old (7d)	0	0	1	0	3
Tetanus (7d)	0	0	0	0	0

Sexually Transmitted Infections	September 2017 Confirmed Cases	2017 YTD Investigated & Determined "Not a Case"	2017 YTD Confirmed Cases *	2016 Year Total Confirmed Cases **	2015 Year Total Confirmed Cases
AIDS (7d)	0	0	2	6	11
Chancroid (7d)	0	0	0	0	0
Chlamydia (7d)	188	42	1448	1870	1777
Gonorrhea (7d)	66	10	446	711	563
HIV infection (7d)	0	0	22	19	18
Syphilis (7d)	0	0	12	27	21
Other Communicable Diseases	September 2017 Confirmed Cases	2017 YTD Investigated & Determined "Not a Case"	2017 YTD Confirmed Cases *	2016 Year Total Confirmed Cases **	2015 Year Total Confirmed Cases
Anaplasmosis (7d)	0	0	0	0	0
Any suspected bioterrorist threat (immediate)	0	0	0	0	0
Any unusual case or cluster of cases that may indicate a public health hazard (immediate)	0	0	0	0	0
Anthrax (immediate)	0	0	0	0	0
Arboviruses (7d)	0	0	0	0	0
Babesiosis (7d)	0	0	0	0	0
Botulism, foodborne (immediate)	0	0	0	0	0
Botulism, infant, wound, other (24h)	0	0	0	0	0
Brucellosis (24h unless bioterrorism suspected, then immediate)	0	0	0	0	0
Campylobacteriosis (Became Reportable in 2016)	1	31	24	39	n/a
Chikungunya Non-neuroinvasive Disease (7d)	0	0	0	1	0
Cholera (24h)	0	0	0	0	0
Creutzfeldt-Jakob Disease (7d)	0	0	0	0	0
Cryptosporidiosis (7d)	0	3	6	27	5
Cyclosporiasis (7d)	1	0	3	0	0
Dengue (7d)	0	0	0	0	0
Drug-resistant organism, extensively (7d)	0	0	0	0	0
Ehrlichiosis (7d)	0	0	0	0	0

Other Communicable Diseases (continued)	September 2017 Confirmed Cases	2017 YTD Investigated & Determined "Not a Case"	2017 YTD Confirmed Cases *	2016 Year Total Confirmed Cases **	2015 Year Total Confirmed Cases
Enteric E. coli infections (STEC,O157:H7, ETEC, EPEC, EIEC) (24h)	4	22	6	8	7
Foodborne or waterborne outbreaks (24h)	0	0	0	0	0
Hantavirus pulmonary syndrome (24h)	0	0	0	0	0
Hemolytic uremic syndrome, post diarrheal (24h)	0	0	0	0	0
Histoplasmosis (7day)	0	4	0	0	0
Legionellosis (7d)	0	0	6	4	8
Leprosy (7d)	0	0	0	0	0
Leptospirosis (7d)	0	0	0	0	0
Listeriosis (7d)	0	0	0	2	0
Lyme disease (7d)	0	49	3	8	7
Malaria (7d)	0	0	0	1	1
Ophthalmia neonatorum (gonococcal) (7d)	0	0	0	0	0
Outbreaks of public health significance (24h)	0	0	0	0	0
Plague (immediate)	0	0	0	0	0
Psittacosis (7d)	0	0	0	0	0
Q fever (24h unless bioterrorism suspected then immediate)	0	1	0	0	0
Rabies, potential human exposure (24h)	10	0	14	8	16
Reye syndrome (7d)	0	0	0	0	0
Salmonellosis, other than typhoid (7d)	6	3	29	44	57
Severe Acute Respiratory Syndrome (SARS) (immediate)	0	0	0	0	0
Shigellosis (7d)	0	1	2	118	116
Smallpox (immediate)	0	0	0	0	0
Smallpox vaccination, complications of (24h)	0	0	0	0	0
Spotted fever rickettsioses (7d)	0	1	0	0	0

Other Communicable Diseases (continued)	September 2017 Confirmed Cases	2017 YTD Investigated & Determined "Not a Case"	2017 YTD Confirmed Cases *	2016 Year Total Confirmed Cases **	2015 Year Total Confirmed Cases
S. aureus, Methicillin resistant (MRSA) clusters (two or more lab confirmed cases) in a community setting (24h)	0	0	0	0	0
S. aureus, Methicillin resistant (MRSA) in infants <61 days (24h)	0	0	5	4	9
S. aureus infections with intermediate or high level resistance to vancomycin (24h)	0	0	0	0	0
Streptococcal infections, Group A, invasive including STSS and necrotizing fasciitis (24h)	0	3	8	9	11
S. pneumoniae - non-drug resistant invasive disease (<5yrs)	0	0	1	0	0
Toxic shock syndrome due to S. aureus (7d)	0	0	0	1	0
Trichinosis (7d)	0	0	0	0	0
Tuberculosis (7d)	0	0	0	1	0
Tularemia (24h unless bioterrorism suspected then immediate)	0	0	0	0	0
Typhoid fever (24h)	0	0	0	0	0
Typhus (24h)	0	0	0	0	0
Vibriosis (non cholera) (7d)	0	0	1	1	2
Yersiniosis (7d)	0	1	0	0	0
West Nile Fever (7d)	0	2	0	0	0
Zika Virus	0	17	0	1	n/a

Table 2.5

* The above table represents the diseases reported this month and year to date in comparison to the previous two year totals. The 2017 data presented is provisional.

** "Investigated & Determined Not a Case" Column indicates an investigation was completed on a "probable" case of the disease noted. As the final diagnosis was not the specified disease, then the investigation work falls in this reporting category.

Communicable Disease Activities

Vaccine Preventable Diseases:

The Health Department conducts site visits to assess the healthcare provider's immunization related practices, identify compliance with Vaccines for Children (VFC) program requirements and provide

healthcare information and resources to improve immunization services and increase pediatric vaccination coverage levels. In conjunction with these visits and other educational programming, WCHD also promotes enrollment in the VFC and I-CARE registry programs.

VFC Compliance Audits		
	September 2017	2017 YTD Total
# Compliance Audits Completed	0	7
# Enrollment Visits Conducted	0	1
# Education Visits	0	0
# Any Other Contacts	0	0
# Providers Visited to Retrieve Vaccine	0	1

Table 2.6

Zika Virus Disease:

The Communicable Disease (CD) Team continues to provide the opportunity for Zika testing to an individual who meets the CDC eligibility criteria for testing in conjunction with the Illinois Department of Public Health (IDPH). Health care providers in conjunction with the Health Department should initiate a request for Zika virus testing when the following criteria below is met:

Criteria 1:

- Travel history to one of the countries or territories with ongoing Zika virus transmission, Caribbean Islands and Other countries, **OR**
- Sexual contact with a person who traveled to an area of known Zika virus transmission; **AND**
- One or more of the following symptoms: fever, rash, joint pain, arthralgia, conjunctivitis, Guillain-Barré Syndrome (with no known etiology)

OR

Criteria 2:

- Pregnant woman, asymptomatic or symptomatic, who traveled to an area of known Zika virus transmission.

In addition, the CD Team is conducting surveillance activities with private laboratories who are performing Zika testing for individuals who have not sought IDPH testing opportunities.

Zika Testing in Winnebago County			
	September 2017	2017 YTD Total	YR 2016 Total
# of Zika Tests Performed	0	17	29
# of Negative Test Results	0	12	25
# of Positive Test Results	0	0	1
# of Tests Pending for Results	0	2	0
# of Authorized Zika Tests Not Complete by Patient	0	3	3
# of Zika Tests Authorized by WCHD	0	10	

Table 2.7

West Nile/Mosquito Surveillance and Control

Surveillance of mosquitos and birds for West Nile Virus has completed as of the end of September. Program staff have collected all surveillance traps for inventory. Two crows collected by the WCHD tested positive for WNV and confirmed by IDPH. WCHD is reviewing statistics in preparation for the annual report, which will be presented to the State in November.

- **Domain 3 – Inform, Educate, and Empower**

“Protecting Your Sexual Health” Presentations in the Community

The Communicable Disease Team developed and took on the road their new sexual health presentation *Protecting Your Sexual Health* to local agencies/educational institutions to provide education on sexually transmitted infections (STI). The presentation includes the signs/symptoms of an STI, the importance of seeking treatment and ways to prevent getting an infection. In addition, participants learned about the Ryan White Program for persons living with HIV and the services available to them. Each participant receives an informational pamphlet on STI facts to take with them for reference in the future. The presentations occurred on:

- September 19, 2017 – Virginia Lee and Charaine Boyd provided two presentations to a total of fifty-six (56) young adults (ages 15-20) at the Rosecrance Griffin Williamson Campus, an adolescent substance abuse treatment facility.
- September 20, 2017 – Gerrica Sallis-Smith and Trish Paesani provided a presentation to twenty-five (25) students (ages 18-23) at Rockford University as part of their health education class.
- September 21, 2017 – Tracy Box and Sarah Larson provided two presentations to a total of fifty-one (51) students (ages 18-23) at Rockford University as part of their health education class.

Neighborhood Property Standards Update

Winnebago County Health Department (WCHD) has posted the opening for the Neighborhood Code Enforcement position and received several qualified candidates who will be interviewed in October. Having been down one inspector for nine months, the Neighborhood Code Enforcement program prioritized responding to complaints and enforcing violations. Unfortunately, with only two inspectors, response times on average were delayed, and survey inspections and community outreach efforts were significantly lower. Once fully staffed, the program will be able to resume previous years' activities.



Prairie Road Pump Neighborhood Association

WCHD formulated and published a request for bids for mapping out proposed shared well locations. Bids will be due October 6, and will be presented to County Administration and the Prairie Road Pump Neighborhood Association for further discussion. This mapping will show the feasibility and potential design for an actual shared well system that could be in compliance with all setback requirements as an alternative to replacing the existent community water system.

Food Code Education Sessions

The WCHD food staff is planning to improve their notifications on the WCHD website by posting on a "Food Establishment" page instead of the main page. This will provide better customer service by offering clients access to referral links to other agencies such as BusinessFirst and other governmental entities who are also involved in food establishment businesses. In addition, staff will be implementing a checklist that clients can refer to indicating the required documentation needed for a "Plan Review" submittal.

Tobacco Free Communities

Quitline Referral Partners:

The Tobacco Control Specialist has been working with healthcare partners and other employers in the county to arrange a date and time to meet and discuss how they can become a Quitline Referral Partner. Oak Street Health of Rockford is in the process of registration to become a Quitline Partner.



Social Norms Marketing Campaign:

The Tobacco Control Specialist and Substance Abuse Prevention Specialist have been planning and organizing the details for the Social Norms Marketing Campaign and Communication Campaign. Combining efforts under both grants (Tobacco Free Communities and the Substance Abuse Prevention Specialists) will allow for efficient use of time within the school and provide important messages that will be used by both grants to decrease youth substance abuse.

Media Campaign:

The Tobacco Control Specialist will be using feedback from United Way and the City of Rockford Human Services Division, about media outlets available for the target audience and the high-risk population, focusing on Maternal and Child Health. The Tobacco Control Specialist is currently waiting on IDPH grant agreement completion to approve the continued marketing with Rockford Mass Transit (RMT) for the bus wrap. Contacts have been made to Power 106.3 Radio, Comcast Cable, and Cherryvale mall for advertising prices. The final media outlets will be chosen and proposals will be drawn by the end of October for overall approval.

Smoke Free Housing:

The Tobacco Control Specialist requested survey results compiled by the Winnebago County Housing Authority and Valley View Apartments. Valley View Apartments will be implementing their new smoke free policy in November of 2017. The Tobacco Control Specialist provided a Smoke Free Multiunit Housing Toolkit to assist Valley View Apartments with their process. The Tobacco Control Specialist presented information on the benefits of quitting smoking and the benefits of smoke free multiunit housing to 16 residents. Illinois Quitline information was made available to residents who smoke and want to quit.

Community Outreach:

The Tobacco Control Prevention Specialist attended the annual "Children's Health and Safety Safari", presented by OSF Healthcare Saint Anthony Medical Center. Information on clinical services,

programs, and health were distributed to parents and caregivers. The children that visited the table participated in “What’s your Phone Number?” activity.

Electronic and Social Media Stats for August 2017



WCHD Website Page	9.7K Pages Views	3.5K Sessions	2.8K Users
Facebook	146 Avg. Weekly Reach	209 Weekly Engagements	715 Total Likes
Twitter	4,853 Tweet Impressions	0 New Likes 112 Total Likes	798 Followers
Intranet Page	1 Page Views	1 Sessions	1 Users

Table 3.0

• **Domain 4 – Mobilize Community Partnerships**

The Mental Health Advisory Committee has recently focused on its future as a Committee appointed by the Winnebago County Chair and is discussing options to best achieve its goals. Based on their decision, Winnebago County Health Department will work through the change process to ensure that there is a community advisory group to address the priority of Mental/Behavioral Health for Winnebago County.

Substance Abuse Prevention Coalition: (WCSAPC)

The Alcohol, Tobacco, and Other Drug (ATOD) Prevention Specialist held a meeting at the end of September with Winnebago County Coroner Bill Hintz attending as a new member. All members are in the process of signing new member agreements for the 2017/2018 year. The ATOD Prevention Specialist is working with members to rebrand the coalition and create new infographics to be provided to school and community leaders. The coalition members will be attending the Red Ribbon Fair at Boylan High School on Saturday October 7th, 2017. The coalition is currently working on a strategic plan for the future of the coalition.



Drug Overdose Prevention Program (DOPP) Community Partnerships

Interviews continue for the part-time DOPP Prevention Specialist. The specialist will be assisting Hope Over Addiction with promoting community Naloxone trainings, and distributing NARCAN kits to those who have participated in trainings. HOPE OVER ADDICTION has signed the contract for WCHD and will serve as the main training and distribution organization for Winnebago County community members only. Community Awareness campaigns will also be developed along with recruitment for the DOPP Partnership Coalition by the DOPP Prevention Specialist. The first order for NARCAN Nasal Spray has been placed.

Chairman and Mayor's Youth Advisory Council

The ATOD Prevention Specialist is working with the Chairman and his staff and the Mayor's staff to get the council ready for November, 2017. Last minute details are being discussed and all letters, permission slips and agendas are being formatted to create uniformity in the organization. Recruitment and selection of members for the council will begin in October once all the details have been finalized and approved letters for recommended members will be sent to county High School Principals and other community organizations who may be involved with high school youth.



Drug Take Back through Keeping Northern Illinois Beautiful

The ATOD Prevention Specialist attended and helped with the local Drug Take Back Program that was put on all over the county on September 16th, 2017. The Prevention Specialist represented the Winnebago County Substance Abuse Prevention Coalition and the Health Department and greeted participants as they drove up to deliver their unused medication.

- **Domain 5 – Policies and Plans**

As part of the Wellness Focused Winnebago County Violence Reduction Action Plan – an ad hoc workgroup working with students from Rockford University and members of the larger Violence Reduction Workgroup have been charged with working to develop a public awareness campaign around the concept of *Trauma* and its impact on the community around the issues of violence, mental/behavioral health, and maternal and child health. *Trauma Informed Care* recognizes strengths and builds resiliency in the community exposed to trauma. For more information on *Trauma and Trauma Informed Care*, go to

https://www.samhsa.gov/samhsaNewsLetter/Volume_22_Number_2/trauma_tip/index.html.

Chairman Haney and Mayor McNamara have expressed their support for this initiative and have agreed to participate in the Violence Reduction Workgroup.

Public Health Preparedness Plans

Health Department Representation for Illinois:

Last March, Theresa James was asked to serve on the IEMA External Advisory Committee representing the Health Departments of the State for the Annual IEMA Conference. On September 5th, Theresa traveled to Springfield for the annual conference. Thirty breakout sessions were included this year including a number of them relating to public health including the Integration of Public Health and Emergency Management.



Emergency Management and Long Term Care Facilities:

Over the last few years, Centers for Medicare and Medicaid (CMS) has been informing long-term care facilities (LTC) of the changes forthcoming regarding Emergency Management planning. This past year CMS has involved a number of other emergency management agencies to become

involved such as IDPH, Hospitals, IEMA and local public health departments. The goal has been to try to guide the LTC facilities as to how their plans should look and how the plan should complement the other plans throughout their communities to make sure all agencies are on the same page.

On September 12th at the Winnebago County Health Department, a six-member team from the LTC homes in Rockford (the Alden Network) asked to meet with Winnebago County Public Health, and the City of Rockford EMA to review what should be in their plans and how they can work together with our agencies to ensure they receive the proper training and guidance. Guidance was provided as to where to locate information to review and what we felt they needed to focus on including evacuation and Strategic National Stockpile (SNS). A follow-up meeting is scheduled to review the progress on their plans.

Building Transition Update:

During the month of September many meetings took place regarding the transition of Division to Court Street.

On September 15th, Theresa James met with building facilities to complete a walkthrough of where all staff will be placed and to see what structure or facility adjustments needed to occur. Shawn Franks from facilities provided a work order number that will be tied to all building transition requests for facilities. It was decided that all facility request be funneled through Theresa to ensure an orderly process. The decision was also made to utilize the Sheriff's Department Trustee Program as much as possible for the move. Officer Kirby and the trustees began work on September 21st and are an incredible asset to the transition.

On September 25th, members of the IT department and Ken Stafford from Facility Keys, came through at different times and did walkthroughs with Theresa as to what our IT needs will be and how the doors are currently keyed.

WCHD will be adding Wi-Fi units in some areas, (utilizing ones from Division) and running new cabling into the area that administration will occupy. Theresa will also be moving the Mitel Phones and computers for staff then creating a spreadsheet of jack numbers for IT to activate or deactivate.

Ken Stafford from facilities walked through the building with Theresa and will begin updating lock cylinders throughout the building starting with the new administration area.

November 30th Exercise:



On September 19th planning meetings resumed with the students of UIC College of Pharmacy and College of Medicine for the Full Scale SNS Exercise at Rock Valley College. Several additional meetings are planned as well as meeting with all of our staff by individual centers before November.

Emergency Operations:

On Friday September 1st, Incident Command was called to discuss the building transition and potentially moving the date up due to mechanical failures at the Division location. The air conditioning for the division location has failed and that location is cooling with temporary A/c units. The concern is being able to control the temperature of the lab. The temporary units were put into place and the temperature of the building was monitored throughout the weekend with call in meeting on Labor day to discuss the plan if the A/c units did not adequately control the temperature. The temperature maintained throughout the weekend.

With the onset of this new situation at Division, the push to move staff to the Court Street location has been fast-tracked to be completed by Spring of 2018. We continue to monitor the temperature daily.

Byron Nuclear Exercise Participation:

On September 26th, Theresa James and Todd Marshall participated in the bi-annual Exelon Drill at the Winnebago County Emergency Operations Center. This is an exercise that is graded by FEMA and results are published to the public at a later date. This exercise was a simulated release in a south easterly direction. The exercise event played out for six hours and multiple agencies were involved such as RPS 205, Public Works, County Board Chairman, Sheriff’s Department, Public Health and IEMA. Todd represented the health department and provided information on the special needs populations in the affected areas and had to explain the planning of how to get the information to those people and how to evacuate them if needed. He was also given additional injects that he had to work through. Theresa is the Dosimetry Control Officer for the County and provided education and guidance to the personnel that were directed to go out into the field.



- **Domain 6 – Enforce Laws**

EHI Code Enforcement Stats

	September 2017 Inspections	FY 2017 Inspections	FY September 2016 Inspections
Foods	300-	3425	3691
Wells	7	64	118
Septic	10	92	114
Loan Inspection	56	703	615

Table 6.0



	Administrative Hearings September	In-House Hearings September	Administrative Hearings (FY17)	In-House Hearing (FY2017)	FY 2016 Administrative Hearings	FY 2016 In-House Hearings
Housing	40	18	188	276	96	241
Foods	0	2	0	11	0	25
Well/Septic	0	0	0	5	4	16

Table 6.1

Report of food facility in-house hearings

1. Lung Fung
226 7th St.
Date: 9-12-2017
Violation: Food temperature control, insect infestation, handwashing, blocked hand sinks, sewer back up, chemical storage/labeling
2. Oriental Buffet
1229 Sandy Hollow Rd.
Date: 9-26-2017
Violation: Discussed rodent control, food temperature control and hand washing

Illinois Tobacco Free Communities/Smoke-Free Illinois Act (SFIA)

A total of 47 compliance checks were completed for the month of September which included 46 random checks and 1 internal referral from Health Promotion and Wellness. There were no complaints received for the month of September. The targeted internal referral was conducted and corrective action was taken during the inspection, resulting in full compliance. Random compliance checks, efforts were focused on community education and informative sessions with business owners.

The Tobacco Control Specialist met with the Village of Cherry Valley to provide information packets to business owners and signage. The non-compliant business owner, who has now received 2 fines for the total of \$750, has not yet paid the fines. All documentation has been sent to the State's Attorney Office and is in the process of certification and collection. The Tobacco Control Specialist is waiting for feedback and suggestions for the revised SFIA policy and procedure.



Smoke Free Illinois Compliance Enforcement: September	External Referrals	Internal Referrals	Targeted Checks	Citation Issued	Hearing
Non Food Establishments	0	31	0	0	0
Alcohol Establishments	0	3	0	0	0
Food Establishments	0	12	1	0	0
Total	0	46	1	0	0

• **Domain 7 – Link to/Provide Care**

iGrow



iGrow - Coordinated Intake for Home Visiting	September 2017	August 2017	June 2017	Total for Period
# CIAT Completed (Coordinated Intake Assessment Tool)	70	36	15	290
# Referred to Partner Home Visiting Programs	12	13	4	136
# Referred to Outside Home Visiting Agencies	0	0	0	8
# Currently Receiving Home Visiting Services	0	0	0	0

Table 7.0

** Coordinated Intake Worker resigned 5/26/17

Family Planning	September 2017	2017 YTD
Number of clients seen	167	1349
New Clients	30	218
Continuing Clients	137	1132
Pregnancy Tests	61	612

Table 7.1



Family Planning visit numbers remained stable again this month. The Integrated Clinic Supervisor is developing changes within the scheduling process, with the Advanced Practice Provider, that will expedite the process for initial visits, that will result in more efficient throughput of clients,

and more control over procedure visits, such as initiation of IUDs and Nexplanon.

Dental Sealant Grant

A Performance Management Plan has been developed to address IDPH recommendations for updating WCHD program materials and protocols. The plan will also address the potential for adding more dental providers to the grant to provide access to dental health for children and families. Currently 2 of the 3 dental providers have decided not to participate in the Dental Sealant grant due to the unavailability of staff to complete the required paperwork. The Health Promotion Supervisor will be working with IDPH to determine what can be done to streamline the process and encourage participation by dental providers.

Month	# Dental Sealants Provided with Dental Sealant Grant 2016	# Dental Sealants Provided with Dental Sealant Grant 2017	# Students Served with Dental Sealant Grant 2016	# Students Served with Dental Sealant Grant 2017
January	374	194	80	54
February	208	16	178	53
March	270	197	75	47
April	375	122	66	36
May	12	102	66	36
June	12	102	3	35
July	N/A	N/A	N/A	N/A
August	N/A	N/A	N/A	N/A
September		65		6
Total	1251	798	468	267

Table 7.2

Illinois Breast and Cervical Cancer Program (IBCCP)



Clients Served by Age	Under 35	35-39	40-49	Over 50
New Clients	0	0	2	3
FY To Date New Clients	2	2	14	6
Total Enrollment	2	3	16	8
FY Total Enrollment	13	19	92	36

Table 7.3

Services Provided	Under 35	35-39	40-49	Over 50
Clinical Breast Exam	0	0	4	5
FY Clinical Breast Exam	3	3	36	23
Mammograms	0	0	5	7
FY Mammograms	0	0	15	26
Pap Smear	0	1	1	0
FY Pap Smear	0	3	4	5

Table 7.4

FY Expected Caseload	Actual	%
550	160	29%

Table 7.5

While the search for a permanent full time IBCCP Case Manager continues, the former employee has been working 4-8 hours per week, on the weekends, to keep the program running and on time. Joy Green, one of the Integrated Clinic RNs has also been assisting her. Nursing positions are being revised to attempt to reach a larger group of potential hires, for all of the open nursing positions (IBCCP, Clinic RN and APN).

Integrated Clinic

WCHD Clinic Visit Type by Month							
2017							
Visit Type	April	May	June	July	August	September	Total
Clinic Visit	225	208	207	166	163	158	1127
Nurse Visit	322	482	309	283	400	302	2098
TB/Refugee	18	0	20	17	2	15	72
Total	610	565	536	466	565	475	3217

Table 7.6

	Clinician Visit 2017	Clinician Visit 2016	Nurse Visit 2017	Nurse Visit 2016
July	166	226	283	257
August	163	308	400	353
September	158	183	302	321
YTD Total	487	717	985	931

Refugee Health

Nationality	September		2017		2016
	Male	Female	Month	YTD	Total
Afghanistan				5	10
Belarus	2	1	3	3	0
Burma				12	41
Burundi				8	12
Central Afr. Rep.					16
Congo	7	2	9	29	29
Cuba					79
Eritrea				7	11
Ethiopia				1	14
Iran					1
Iraq				2	11
Ivory Coast					23
Russia	1	1	2	2	0
Rwanda					3
Sudan					0
Syria				24	12

Thailand					88
Ukraine					1
Vietnam				3	5
Totals:	10	4	14	96	356

Tuberculosis Activities

Three (3) clients remain on daily observed medication therapy (DOT). The contracted APN from UIC, Patricia Nordman, has been training with Dr. Zimmerman, and is scheduled for The TB 101 seminar on November 1 and 2, at Sangamon County Health Department. Ms. Nordman is also continuing to train as Primary Provider for the Refugee Program.

Clients Seen	September	Count YTD
New Clients	17	206
Returning Clients	4	54
Total Encounters	35	305
Physician Contact	7	94
Medication (Direct Observation Therapy Visit)	45	197
Diagnostic Testing		
X-rays, CT Scans, etc.	22	104
Screenings		
TB Skin Test, T-Spot Test	13	145
Positive TB Skin Test/T-Spot	0	16
Total Active Cases in Winnebago County (YTD)	1	4
Total Active Cases being Medically Managed Outside of Winnebago County (YTD)	0	0



Table 7.9

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

WIC	September 2017	August 2017	July 2017	June 2017	May 2017	April 2017	Avg per Month
FY 18 Caseload							
Goal = 6814	5224	5234	5352	5692	6061	5884	5575
Caseload							
Achieved Goal = 90%	77%	77%	79%	75%	80%	77%	76%

Table 7.10

WIC's new FY 18 Caseload requirement of 6814 began in July. The FY 17 Caseload was 7618.

- **Domain 8 – Assure Competent Workforce**

September 2017


Total Employees	Full Time Employees	Part-Time Employees	Part-Time and Seasonal Employees	Employees Utilizing FMLA	New Hires	Separated Employees
78	77	1	0	5	2	0

Table 8.0

Surveillance Based Services Training

Sarah Larson, Virginia Lee and Robin Long of the Communicable Disease Team, participated in the Surveillance Based Services (SBS) Training in Peoria (September 26, 2017). This training provides the techniques and skills to bridges the gap between HIV Prevention and Care services. SBS goals:

- Seeks out those who are newly diagnosed or those who have fallen out of care
- Links individuals to services (not just medical care)
- Reduces the rate of HIV transmission
- Improves the Quality of Life for People Living with HIV

Illinois Public Health Association 76th Annual Meeting


Todd Kisner attended the IPHA Annual Meeting in Springfield (September 19-21, 2017). This year's theme is "Public Health, Stronger Together". The annual meeting provided the stage for public health professionals to network and learn best practices to take back to their respective agencies. The conference featured 4 tracks with 12 Concurrent Sessions, 7 Pre-conference Workshops, 11 Skills Building Sessions, 2 Plenary Sessions, the annual Business Meeting, Section Meetings, and a premiere exhibit hall and poster presentations. Topics for the sessions ranged from partnerships in action, social determinants of health, addressing behavioral health needs and building climate change resilient communities.

Epidemiology 101 Class with Dr. Mark Dworkin

The Communicable Disease and Environmental Health Improvement Teams participated in final two classes with Dr. Mark Dworkin on September 7 & 27, 2017. Staff were presented with a review of the course work completed over the year: identifying the symptoms and ultimately the disease, identifying roles and responsibilities, outbreak procedures, along with media messages. The Staff found the classes to be beneficial along with the opportunity to interact with individuals who would be part of an outbreak investigation and understand the functions of each Department. WCHD staff would like to thank Dr. Dworkin for all his time and knowledge he shared with the Teams.

• **Domain 9 – Quality Improvement**

PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



The Quality Improvement Team of the Winnebago County Health Department has been developing the charters for each of the FY2018 Initiatives approved by the Board of Health in August 2018. In addition, Center Directors and Supervisors are incorporating corrective action plans identified through external program reviews conducted by Illinois Department of Human Services and Illinois Department of Public Health into their respective Performance Management Goals for FY2018.

Documents in support of PHAB (Public Health Accreditation Board) Accreditation were reviewed by Cynthia Hall, Director of Strategic Initiatives, and uploaded by Dr. Martell on September 5, 2017. The

next step is review by the PHAB Accreditation Board. Significant progress has been made by the entire agency in meeting national public health standards.

• **Domain 10- Evidenced Based Practice**

Substance Abuse Youth Prevention Education (YPE)

The ATOD Prevention Specialist is currently working with Barbour and RESA schools in Rockford to deliver the All Stars program. October 16th, Kennedy Middle School will provide All Stars to a selected group in the 7th grade class with a roster of 10-15 students that have been identified as at risk by the counselor’s needs assessment. Below is a chart of the current population of students engaged in All Stars not including Kennedy:



School	Grade	Number of students	Days of the Week
Barbour 2 Way Language Immersion	6 th Grade	73	Monday, Tuesday, Wednesday 1 st hour
Barbour 2 Way Language Immersion	7 th Grade	68	Monday, Tuesday, Wednesday, 2 nd hour
RESA	7 th Grade (half of the class)	157	Thursdays

Eisenhower Middle School has expressed an interest in providing All Stars in their school next semester, and Harlem Middle School would like to begin a selected group for Spring, 2018.

APORS

APORS - High Risk Infant Follow-up	September 2017	August 2017	July 2017	June 2017	May 2017	April 2017	Avg per Month
Caseload	112	114	112	105	83	124	108
Referrals Received	22	25	35	14	17	24	23
Referrals Refused	13	12	16	8	7	7	10
Home Visiting Completed	46	46	45	57	44	65	51
Office Visits Completed	4	4	3	5	10	11	6

Table 10.0

The caseload for Adverse Pregnancy Outcome Reporting System (APORS) remains stable. After discussion with Dr. Martell, activity is being targeted at decreasing the percentage of referrals that are refusing services, and initiating outreach activities with the three hospital's Labor and Delivery staff, to assure that all possible referrals are being made.



Better Birth Outcomes – High Risk Prenatal Case Management

Better Birth Outcomes	September 2017	August 2017	July 2017	June 2017	May 2017	April 2017	Avg per Month
Caseload	20	20	32	33	48	46	41
% of Target							
Caseload n= 90	22%	22%	36%	36%	53%	51%	45%

Table 10.1

Review of statistics shows that no current progress is being made on increasing the targeted caseload. Plans include orientation meetings with potential internal referrals sources, such as the Integrated Clinic, WIC and Communicable Disease, all of which see female clients who are pregnant. Schedules are also being determined to meet with Primary Care Providers, who may not clearly understand how the BBO program can supplement their care.

HealthWorks Caseload

Winnebago County Health Department (WCHD) oversees medical case management for Department of Children and Family (DCFS) for northern Illinois and provides medical case management to children who reside in Winnebago County.

September 2017	
Current Caseload Winnebago County	282
Current Caseload Border Counties	191
New Cases to DCFS Custody	35
Case Closure Winnebago County	25

Table 10.2

- **Domain 11 – Administration and Management**



Dr. Martell and Todd Marshall participated in the review of the 2018 Annual Action Plan for Housing, Business, and Community Development for the City of Rockford. As social determinants of health, these areas have a direct impact on the health of Winnebago County. It was an opportunity to learn strategies that are planned for the upcoming fiscal year around blight property reduction for the City of Rockford as well as identify potential opportunities for replicating similar strategies for other areas in Winnebago County.

Dr. Martell has been working with Dr. Inis Bardella the University of Illinois College of Medicine to identify a replacement for Dr. Leslie Dean as the Civil Surgeon responsible overseeing Refugee Screening and completion of required documentation.

The Winnebago County Health Department has been approached by the Illinois Liquor Commission to conduct inspections in Winnebago County. This is an opportunity to coordinate public health inspection activities around food sanitation and safety and tobacco free communities. This also provides an opportunity to address permit issues and concerns.

Dr. Martell and P. Madigan, Director of Finance have continued their monthly meeting with the Chief Financial Officer of Winnebago County after the Board Meeting to review financial packet documents and discuss concerns proactively.

- **Domain 12 – Governance**



Monthly standing meetings with the Chairman and Mayor provide an opportunity to share communication on public health issues that impact the health of the community. Discussions have focused on Trauma and Trauma Informed Care, blighted property reduction initiatives, budget, and food code concerns.

*Respectfully submitted on behalf of the Leadership Team and Health Department staff by,
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Public Health Administrator*