
CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center
1776 E. Washington
Urbana, IL 61802

Phone: (217) 384-3776
Fax: (217) 384-3896

Champaign County Board of Health

Tuesday, June 26, 2007

6:00 p.m.

Meeting Room 2

Brookens Administrative Center

1776 E. Washington

Urbana, Illinois

AGENDA

- A. Call to Order & Roll Call
- B. Public Participation
 - 1. Introduction and welcome to CUPHD Board Member Pius Weibel
- C. Election of Officers
- D. Approval of Minutes of Regular Board Meeting: April 24, 2007, May 22, 2007 and Study Session June 12, 2007 (all attached to agenda)
- E. Monthly Reports (May 2007)
 - 1. CIDES (attached to agenda)
- F. Correspondence and Communications
 - 1. Illinois Bioterrorism Summit 2007 (flyer attached to agenda)
 - 2. June 2007 Newsletter from Illinois Association of Boards of Health (attached to agenda)
 - 3. Vacancy on Board of Health to fill the position of Kim Winston
- G. Treasurer's Report
 - 1. Report from Champaign County Administrator Deb Busey
 - 2. Approval of Invoices submitted by CUPHD for 4/07 and 5/07 (attached to agenda)
- H. Report from Interim CUPHD Administrator
- I. Old Business
 - 1. Report from Budget Committee meeting June 12, 2007

2. Discussion regarding FY08 Budget
 3. Report from Contract Committee meeting June 18, 2007
 - a. MOTION that the County Board of Health, as part of its budget process, propose to the CUPHD Board an annual payment equivalent to 10% of the Executive Director's salary, commencing in FY08, in return for the services contracted in Paragraphs 3 and 4 of the present Agreement.
 - b. MOTION that the County Board of Health request that the CUPHD Board allow participation by the Board of Health in the search for the Executive Director of CUPHD, and whatever input is appropriate as to the hiring of a new Director for the Environmental Health Division of CUPHD.
 4. Report from Ordinance Review Committee meeting June 19, 2007
 - a. Recommended MOTION that the County Board of Health appoint a second member to this Committee to replace the position presently held by Kim Winston, or in the alternative, abolish the committee and appoint a Board member to work with the State's Attorney's Office on the revision of the Public Health Ordinance
 5. Presentation from Darlene Kloepfel (RPC) regarding Home Nursing Proposal (attached to agenda)
 6. Presentation from Deb Busey regarding staff support (attached to agenda)
 7. Discussion and recommendations concerning potential cooperative efforts with the Champaign County Mental Health Board
- J. New Business
1. Agenda for July 10, 2007 Study Session if needed
- K. Other Business
- L. Adjournment

The mission of the Champaign County Public Health Department is to promote health, prevent disease and lessen the impact of illness through the effective use of community resources.

CHAMPAIGN COUNTY BOARD OF HEALTH

Monthly Meeting
Tuesday, April 24, 2007

Call to Order & Roll Call

The Champaign County Board of Health held its monthly meeting on April 24, 2007 in Meeting Room 2 at Brookens Administrative Center, 1776 East Washington, Urbana. The meeting was called to order at 6:03 p.m. by Susan Maurer. Upon roll call, the following board members were found to be present: Maurer, Rappaport, James, O'Rourke and Storrs. The following members were absent: Peterson, Winston, Kassem, and Gauda. Others present: Susan McGrath, Deb Busey, Nancy Greenwalt, Shelley Scott

Public Participation

There was no public participation.

Approval of Minutes of February 20, 2007 and March 27, 2007.

MOTION by James to approve the minutes of February 20, 2007 and March 27, 2007; seconded by Rappaport. **Motion carried.**

Monthly Reports (February & March 2007)

1. CIDES

Nancy Greenwalt explained they have presented a new format for the February and March reports, basically summarizing the information. She asked the committee to let her know if they want anything more than this. She explained that they will have an open house, on May 22, 2007, to allow people to see the new office and meet the staff.

Mr. Rappaport stated, by looking at the report, he couldn't figure out if the total number of children served in February included some repeat patients and asked if there is a way to show how many different children have been seen; how many total new children. Ms. Greenwalt stated that should be easy to provide.

Correspondence & Communications

Ms. McGrath stated there is nothing to report.

Treasurer's Report

1. Report from Champaign County Administrator Deb Busey

Ms. Busey explained that the report that is before the committee is the same as it has been; the revenues will come in as projected and the expenditures will go out as projected. She pointed out that with the professional services contract, as of March 31st, there hasn't been any expenditure there and explained that the Auditor is holding the first two payments, that have been approved because they are requiring the Board to approve a motion that those billings be paid based on 1/12th the annual contract. That motion is on the agenda tonight, the bills have been submitted at 1/12th and as soon as the motion is approved she believes those payments will be paid.

2. Approval of Invoices submitted by CUPHD for 2/07 and 3/07.

Mr. James stated the bills don't make much sense to him and they don't tell him how many clients are served. Ms. Storrs stated some of the nursing money doesn't cover just the visits but the entire nursing program and asked if the County Board might take issue that the money isn't used strictly for home nursing.

Ms. McGrath stated the grant that was given by the County Board was for the home health program, period, so there is that restriction. There was a different explanation of what that line item was for at another meeting when they were told that number 30, nursing, was for the home health program so if there are other programs using that, we will need a clarification because the county money is just for home health.

Ms. Scott stated she is not representing CUPHD this evening however she will answer any questions to the best of her knowledge. Mr. James stated if he had a bill like this in front of him he would ask exactly what he is paying for and he doesn't have that information even though it has been requested more than once. Ms. Storrs stated, since the home health visits are budgeted separately for us is, it might be possible to get something itemized for those services.

MOTION by James to approve the CUPHD invoices for 2/07 and 3/07; seconded by Rappaport.

Mr. O'Rourke stated he will not vote for approval of these bills because he doesn't feel he should have to go to the web and try and find this information, he wants hard copies. He cannot approve something based on the information they are given, he doesn't believe there is anything wrong with the bills, he just doesn't have enough information to make an informed decision.

Motion carried with O'Rourke voting no.

Mr. Rappaport stated he is interested in asking that in the future, they be provided with a person who appears, when the invoices are presented and who is able to answer questions about them. They are looking for communication and he would like to have some official record of the problem, what the board has asked for and what they haven't received. Ms. Busey stated they may be looking for a monthly report similar to CIDES, in addition to the invoices. Ms. Storrs stated for the most part the monthly reports are on the web and because there are people who don't like to view them online, they can be pulled off the web and given out with the agenda. Ms. Busey stated they can pull them off the web and include them with monthly reports on the agenda.

3. Required by Champaign County Auditor: Motion to approve payment of CUPHD invoices on monthly basis equivalent to 1/12th of annual payment due to CUPHD.

MOTION by Storrs to approve the payment of CUPHD invoices on a monthly basis equivalent to 1/12th of the annual payment due to CUPHD; seconded by James.
Motion carried.

Report from CUPHD Administrator

Ms. Scott reported that the CUPHD Administrator is on vacation.

Old Business

1. Discussion and recommendations concerning potential cooperative efforts with the Champaign County Mental Health Board

Ms. McGrath explained Mr. Tracy was informed of the Board's action, deciding that two members will serve on a joint committee between the Mental Health Board and the Board of Health, they haven't taken action yet to select their members but they are in the process. She is setting up a meeting with Darlene Kloepel and Peter Tracy to follow up on some information and that will touch on the question about some cooperative efforts we might make with the Mental Health Board.

Mr. Rappaport stated there was a meeting with himself, Peter Tracy and Tom Moore with Claudia Lenhoff, because she had a student she had asked to research what kinds of programs for these services exist. She gave a report and some model examples and it does appear there are many places that are doing very efficient services for elderly people and they are being run in ways similar to what we are thinking of doing. There is a lot of indication there that what we have talked about is quite feasible, and Mr. Tracy was going to carry the information back to his board. When asked about a written report from the meeting, Mr. Rappaport stated there is a summary report that he could get a copy of.

Report from contract committee meeting April 16, 2007

Mr. O'Rourke stated the committee met and they are following up on the motion to investigate alternatives for service delivery for our Board of Health programs in the County. They had a productive meeting, raised a couple questions about our legal status and if we could apply for grants. He has been collecting information and it appears they are a legal entity and can apply for grants. They have identified people in IDPH and are including organizations and agencies within and outside Champaign County, following up with them including the legal and programmatic sides of issues; he and Susan are working on that. The question of an Administrator has come up and legally we have to have one and it is interesting that we don't. There are very minimal qualifications for being an administrator and they are also following up on that. The next meeting is scheduled for the 7th at 4:00 p.m. and they will have more of a report after that. Mr. O'Rourke stated he would ask our legal council to again contact Mr. Grosser to respond to the question that was posed in January and re-iterated in March.

Ms. Storrs stated she believes Mr. Grosser made his interpretation clear we just need the attorney's to resolve the two different legal interpretations.

Ms. McGrath stated they had given Mr. Grosser some questions he was going to respond to after he expressed his opinion. Mr. O'Rourke stated he asked if the Administrator came to the meetings because they feel its part of their contractual obligation with us or do they come because they feel like it; Mr. Grosser has not responded to that question.

Continuing discussion and recommendation as to County Home Health Program

Mr. Rappaport stated there are some options we know exist and Mr. Tracy will be pursuing things with his board. In the interest of pursuing viable options, they believe there may be some that involve the Mental Health Board and RPC.

Ms. Storrs stated if they move toward one of the models we need to decide what the CUPHD is hoping to move toward and figure out if it is possible to move in the same direction, together.

New Business

Agenda for May 15, 2007 Study Session

Ms. McGrath stated the calendar of meetings adopted, allow for a study session each month, if needed. She stated they may want to wait until June because that will be the beginning of their budget preparation and they may have more information on a variety of issues by then.

Submission of Statements of Economic Interest for all Board members

No action taken.

Set meeting for Ordinance Review Committee to make recommendations to Board of Health and County Board as to potential changes in present County Health Ordinance

Ms. McGrath stated she will set a date for this meeting and the biggest things they need to review are the enforcement issues. When reading the budget from last year it became clear that some of the costs in the Environmental Health Division are high because of enforcement issues on license holders in food establishments who are not following the rules or people who are not following the rules on having septic and well water inspections. Currently, they don't have a mechanism in the ordinance to charge people with the enforcement aspect of all those case, therefore we are not covering our costs there and that's a huge oversight that we can correct. Other than that, they need to look at changes in the statute to make sure we are up to date.

Other Business

There was no other business

Adjournment

MOTION to adjourn by James; seconded by Rappaport. **Motion carried.**

The meeting was adjourned at 6:58 p.m.

CHAMPAIGN COUNTY BOARD OF HEALTH

Monthly Meeting
Tuesday, May 22, 2007

Call to Order & Roll Call

The Champaign County Board of Health held its monthly meeting on May 22, 2007 in Meeting Room 2 at Brookens Administrative Center, 1776 East Washington, Urbana. The meeting was called to order at 6:36 p.m. by Susan Maurer. Upon roll call, the following board members were found to be present: Storrs, James, Gouda, Peterson, Maurer, and Rappaport. The following members were absent: Kassem, Winston and O'Rourke. Others present: Susan McGrath.

Ms. Winston arrived after the roll call had been taken.

New member Dr. Prashanth Gowda introduced himself explaining he is the Internists at Francis Nelson.

Public Participation

There was no public participation.

Monthly Reports (April 2007)

1. **CIDES**

The monthly report was handed out to the members. **MOTION** by James to receive and place on file the CIDES monthly report for April 2007; seconded by Maurer. **Motion carried.**

Ms. Storrs stated it helped to receive the information regarding the number of children and treatments, which they asked for at the last meeting.

Ms. Winston asked if CIDES is seeing adult patients yet. Ms. Pryde stated that with Champaign County Health Care Consumers and Public Health together, they have started seeing adults. She explained if they come in through Health Care Consumers they have to have Medicaid and have to be in C-U, if they come in through the HIV Care Consortium they can come from an 11 county service area. Right now there are three referring agencies, they have two dentists working full time seeing adults two half days a week and they are booked out through August.

Jill Myer, Program Coordinator for CIDES, passed out information on the Combined Charities program. Ms. Greenwalt, who is part time with CIDES, is also part time with Combined Charities and they are requesting a letter, from the board, that states basically that the board would sponsor CIDES as their charity of choice. There isn't any cost to the board, the administrative fees are minimal and it will get the CIDES name out there and will allow them to be included in the book which will enable employees to designate CIDES as their contribution.

The goal is for this to take place during the 07/08 campaign; it is not anything they have to give money to, just a letter saying they support it.

MOTION by James to send a letter of support for CIDES to be included in the combined charities, after review by our legal council; seconded by Peterson. **Motion carried.**

Ms. Storrs stated Ms. Greenwalt also wanted the committee to review the new brochure and if they have any issues give her a call at the office.

Correspondence & Communications

There was nothing to report.

Treasurer's Report

1. Report from Champaign County Administrator Deb Busey

There was no report from Ms. Busey because she has been in negotiations.

Approval of invoice submitted by CUPHD for 4/07

Ms. McGrath stated we have not received an invoice for April.

Discussion regarding Board of Health Budget for FY08

Mr. Peterson stated he talked with Julie Pryde about the budget process and it may go more smoothly this year. He would like to schedule a budget subcommittee meeting with Ms. Pryde and the Auditing staff near the end of June and he is looking at having three meetings to finish up the process. He asked Ms. Pryde to have her auditing staff look at our core programs in terms of what they would require in the contract, at this point we will continue to put our budget together on our side, rather than requesting CUPHD do it.

The committee discussed the date this information will be presented to the County Board.

MOTION by Storrs to move the August monthly meeting to August 21, 2007 at 6:00 p.m. to accommodate the budget preparation to the County Board; seconded by Rappaport. **Motion carried.**

Report from Interim CUPHD Administrator

Julie Pryde, Interim CUPHD Administrator, stated she doesn't know how long she will be in this position and she doesn't know what is going to happen. The moral of the staff is very good but the leadership team is the most nervous right now. Nothing is being put on hold, the new building is rapidly moving along and of the 99,000 square feet, only 40,000 is occupied by CUPHD; they have greatly expanded their space and it will still leave a lot of space to rent out. She provided the committee with the numbers and information on the home health nursing program, explaining that the numbers are sad and when all the dead clients were removed from the case load there were 73, with only 14 in the County. After the nurse manager reviewed those 73 cases and took out the ones she felt we shouldn't be seeing at all, she came up with 33 cases we should be seeing, 9 of which are in the County.

Ms. Winston stated there is a need for nursing in this County, yet we don't have an admission or discharge criteria. Ms. Pryde stated there is going to be more information provided to patients, they will be holding seminars and demonstrations. Also looking at helping family members learn how to take care of their loved ones.

Ms. Pryde stated there is no reason their new mobile cannot go out, and she is planning on getting the board a real description of what core services they are providing. Mr. Rappaport stated the key for them is to get as many services as efficiently as possible so people don't have to come to Champaign-Urbana to get Health care, Ms. Pryde stated that shouldn't be an issue.

Dr. Peterson stated he and Ms. Winston had volunteered to do school physicals last year and weren't called, Ms. Pryde stated that is just one example of how things were done and, at least temporarily, things are different. Mr. Rappaport stated it would be nice if our budget wasn't just an exercise in accounting but in those numbers to the actual services so they really need a dialogue going on. Ms. Pryde stated for the last year and a half she hasn't seen a budget, she would really like for the board to find out about the programs and see what they like and don't like.

Old Business

Discussion & Recommendations concerning potential cooperative efforts with the Champaign County Mental Health Board

Mr. Rappaport stated he and Ms. McGrath met with Peter Tracy and Darlene Kloepfel from RPC, trying to see where we could combine with them. They discussed the philosophy they are after with the home health care and they proposed to Ms. Kloepfel that the RPC may be a good place to provide us with the kind of home visits we want and development of a network of people who could train, using real community people and developing what people need. They suggested she come back with a proposal of what they could offer talking about spending \$60,000. Mr. Tracy stated if they were to develop that, and we were interested, that could be a program where they could apply to MHB for additional support.

Ms. McGrath stated Ms. Kloepfel will be bringing a sample model with her to the June 26th Board meeting with the idea in mind that this would be something to start in the next fiscal year. She informed the board that RPC already has a senior services staff in place and they will bring the experience of training volunteers with them.

Mr. Rappaport stated we can pick and chose which programs we want to support because in the past we have been just turning it over to someone else. Mr. James stated they should say up front that we want the information and want the reports, and if we don't get them we will pull our money.

Report from Contract Committee Meeting May 7, 2007

Mr. Peterson stated he met with Ms. Pryde today and he informed her of the RPC proposal and suggested that is probably where the board is going to go. He asked her to put together a real budget request on their part, in terms of what they will need of our money. They talked about the problem we have had with not having anyone identifying themselves as our Executive Director; we need one and thought the contract we had with CUPHD provided us with one. They discussed identifying a portion of our budget that will be specifically for services rendered by our Executive Director.

Mr. Rappaport stated he talked to Mr. Weibel and he was very receptive about all of our ideas and suggested he also speak with Carol Elliot, which he will be doing.

Mr. Peterson stated they took a look at the legal basis for the grants that are given to public health and discussed with those agencies what our standing would be if we were to apply for these grants. The county trumps the city in a lot of these discussions and they were giving some thought to applying for these and C-U would then come to us for their piece of the pie. He doesn't feel we should go in that direction now that the changes have taken place in the CUPHD.

Mr. Rappaport stated they should make it clear to the CUPHD board that they should be represented in the search for a new administrator, if it goes in that direction; to make sure it is a person who is concerned with the county and interested in helping us. Mr. James asked what type of director we need to oversee us. Mr. Peterson stated a physician is more than accurate, but the person could have a Masters Degree. Ms. McGrath stated the county's ordinance specifies exactly what the administrator is supposed to do and what their qualifications are supposed to be. The notion that it doesn't provide for that isn't true, the person can be, but doesn't have to be a licensed Physician, if not; they have to be a master level administrator. Mr. James stated CUPHD is going through changes but our history with them speaks for itself. Ms. McGrath stated there is another alternative there as well; the Mental Health Board is contracting with someone to provide administrator services for them who is also a licensed public health administrator so we do have another option for that service, if we are looking for cooperative efforts with the mental health board. Ms. McGrath stated they have the legal authority to contract for any service they want to provide.

Continuing discussion and recommendations as to County Home Health Program

Addressed above.

Report from Ordinance Review Committee meeting May 21, 2007

Ms. McGrath stated there are some changes that may come before the board in July. In theory, we are supposed to review the ordinance every year and make recommendations about changes we think appropriate, that hasn't happened since the ordinance was adopted. There are some major things we need to look at because of changes in state law.

New Business

Agenda for June 12, 2007 Study Session if needed

There will be a study session on June 12, 2007 at 6:00 p.m. The committee discussed asking Ms. Pryde to attend.

Other Business

Mr. Rappaport stated they should consider, in their budget, a line item for their own staff person. When asked how much they are paying currently, Ms. McGrath stated we are paying nothing because the County has not billed us. Ms. McGrath stated they have money in their budget for this right now and if they agree, they find out who they can contract with to provide that service. Mr. Rappaport stated he is thinking about someone who might be a staff member who will do more than minutes but they need their minutes shortly after a meeting so they have time to digest them. Ms. McGrath stated that staff member could come from the administrative services department if we paid them to do it but we need to bring back a proposal.

Ms. Maurer stated she believes that when they contract with someone else for an administrator, that person should have a hook with public health. Should be someone who can be proactive for them.

Adjournment

Ms. Winston declared the meeting adjourned.

CHAMPAIGN COUNTY BOARD OF HEALTH

Study Session

Tuesday, June 12, 2007

Call to Order & Roll Call

The Champaign County Board of Health held a study session on June 12, 2007 in Meeting Room 2 at the Brookens Administrative Center, 1776 East Washington, Urbana. The meeting was called to order at 6:10 p.m. by Susan Maurer, acting as Chair in the absence of Kim Winston. Upon roll call, the following board members were found to be present: Susan Maurer, John Peterson, and Julian Rappaport. McGrath indicated Stan James had called to say he had a conflicting meeting tonight and Dr. Prashanth Gowda had indicated at the last Board meeting he had to work tonight. Others present were Kat Bork (Administrative Services Department) and Susan McGrath (State's Attorney's Office).

Discussion Concerning the Investigation of Alternatives for Service Delivery of Board of Health Programs by Community Organizations and Agencies Within and Outside Champaign County, Including Other County Health Departments

McGrath provided budget materials for the Board members, as well as a list of discussion items from the Budget and Contract Committees that were pertinent to this discussion. Maurer began the discussion by describing the Budget Committee meeting held earlier today where Julie Pryde of CUPHD suggested using the mobile unit to visit certain areas at certain times that the Board of Health would designate. CUPHD would provide everything and the Board of Health would be charged an hourly rate and a mileage rate, instead of being charged by the service. The committee discussed having someone come in and talk about where the mobile unit ought to be and what kind of services should be offered. Pryde assured Maurer good statistics would be kept so the services could be tweaked as needed. Maurer stated the statistics would be important to adjust what services and where they are being offered to meet the public's needs over the course of a year. Maurer felt Pryde was very receptive. Peterson stated Pryde is a highly energetic and creative individual. The Board discussed the possible future of the CUPHD Administrator position and the importance of a positive relationship between the Administrator and the Board of Health. Rappaport indicated two members of the CUPHD Board are open to having someone from the Board of Health involved in a search for a new CUPHD Administrator, should such a search occur, to raise certain issues specific to the County Board of Health. Rappaport encouraged the Board to be active in the search if the CUPHD Board is agreeable. Rappaport asked if a contract for mobile services would be dependent on who holds the CUPHD Administrator position. Maurer did not think the contract would be dependent on who fills the position if the Board of Health has a contract for a certain number of service hours. Rappaport inquired about building in flexibility to such a contract, so services and times can be adjusted because the Board cannot accurately predict what might be needed a year in advance. For example, a smaller community such as Ludlow might need more service time. Maurer stated the amount of services could change over time as more people become aware of the mobile unit and the services it provides. The committee discussed the mobile unit and need for flexibility.

McGrath stated that Maurer and Peterson were very clear in the earlier meeting about how the County Board of Health felt they had been burned in promises made of service delivery prior to today and their expectations should the Board continue to contract with CUPHD for services. McGrath said the Board of Health should be careful in crafting the contract so it is not dependent on the person in the Administrator position. Peterson said the Board's goals and benchmarks should be made clear so the contract can be terminated if those goals are not met.

Rappaport asked if the Board of Health's money for a contract with CUPHD would be simply divided into 12 payments. Peterson said they are considering having a funded line item for the Executive Director position. Rappaport concurred with that approach. At the morning meeting, Pryde told Peterson and Maurer that the Board's major expenses are environmental services. They asked her to put together a cost breakdown for environmental services. Peterson noted that HIV, hepatitis, and other sexually transmitted diseases will be done because they are state funded. Pryde told Peterson and Maurer about how the grants are for the county and CUPHD does not separate out whether the grants are providing services for county or Champaign-Urbana residents. Peterson made the point that the Board of Health wants to maintain its presence in Rantoul and would like information on the costs of providing these services. He noted CUPHD's bookkeeper has put together quite a bit of information for the CUPHD Board. The first step in understanding CUPHD's total budget is understanding their district budget. The Board of Health represents approximately 10% of that activity. The Board of Health would like information about the actual cost of providing environmental services, so they can be sure they are recouping the costs. Maurer felt the major issue of environmental services is the enforcement inspections and making sure businesses are charged when the health department has to perform additional inspections due to noncompliance. Peterson asked if the ordinance had to be changed to charge for the additional enforcement inspections. McGrath explained it would require changing the ordinance and the Ordinance Committee is working on revising the ordinance, which will require approval by the County Board. Maurer asked about an effective date for the ordinance. McGrath recommended the new ordinance take effect on December 1st with the new fiscal year. The Ordinance Committee will make recommendations to the Board of Health, the Board of Health will submit the revised ordinance to the Justice & Social Services Committee, and then to the full County Board. Rappaport asked if an ordinance revision would be a controversial issue at the County Board level. McGrath thought it would be matter-of-fact because the Board is only changing the ordinance in ways to update it and allow the County to recoup costs. She noted the Animal Control Ordinance, Nuisance Ordinance, and the Zoning Ordinance all contain language regarding enforcement costs to violators. Carrie Storrs and Kim Winston are the Ordinance Committee. McGrath anticipated the ordinance would be submitted to the County Board in September. Since the ordinance has not been updated since it was passed in 1989, the revisions are taking some time. McGrath, Storrs, and Winston are going through the ordinance to reflect the statutory changes, particularly regarding bioterrorism, core programs, and enforcement. The Ordinance Committee is meeting in June to discuss it. The Board agreed it needs to look at re-inspections of restaurants, wells, and sewers. The Board does perform some enforcement proceedings. McGrath was recently involved in an enforcement proceeding about a septic system in Sadorus. The homeowners had to be taken to court and removed from their house because they did not repair their septic system. A non-functioning septic system is a health hazard. The Board of Health does not have the ability to impose a fine, but they can remove someone from their home.

McGrath informed the committee this morning that a proposal from the Regional Planning Commission (RPC) for senior services is anticipated in June. This proposal will be evaluated for inclusion in the FY2008 Board of Health budget. McGrath will email the proposal to the Board if she receives it from Darlene Kloeppel prior to the meeting. Maurer asked about possible collaborative efforts with the Mental Health Board. Rappaport confirmed there have been meetings with Peter Tracy. Tracy indicated the Board of Health and Mental Health Board need a concrete, cooperative project to get started. If the Board moves forward with a proposal from RPC, they could then apply to the Mental Health Board for program funding. Rappaport noted the Mental Health Board does not provide services, they fund services. Tracy did not make any promises, but felt the Board of Health would have a good chance of developing a priority for the Mental Health Board. Maurer asked for a concrete example of a possible project. McGrath gave the example of working with RPC on a project for seniors. The Mental Health Board is on a different fiscal year than the Board of Health, which could be beneficial. Because the Mental Health Board will consider grant proposals in April 2008 for funding starting in July 2008, the Board would have the opportunity to start the RPC project and then submit a grant application to the Mental Health Board. McGrath noted the Mental Health Board does not offer a lot of services in the county and they would like to offer more services. Rappaport said Darlene Kloeppel implied she could assign Victoria Christensen to develop the project with an infrastructure of volunteers and referrals to make services available through a network that does not cost as much as professional services. Christensen comes highly recommended. If such a project is up and running, the Board could apply for funding from the Mental Health Board so both entities would be expanding their resources. McGrath stated Tracy is aware of the lack of mental health services available to county residents in general. Tracy wants to come up with a project in conjunction with the Board of Health to facilitate mental health services for county residents sometime in the future. Many people in the county are isolated from services that would be helpful to them. Tracy is looking for ways to expand dollars out to county residents. The Board agreed a project for seniors with RPC would be a good starting place and would address the home health visiting issue. The Board discussed that it would take some time to build up the number of people being served, but felt they could do better than serving only 9 people for \$125,000.

Maurer asked where the Board stands in looking at other county health departments. Peterson said this was put on hold after recent events. McGrath stated Tom O'Rourke had raised this issue in part because Gary Bird has left CUPHD. The interim person is Jim Roberts. It is unknown who might replace Bird permanently. The Board of Health would like to be involved in the search for a replacement because the Board is affected by the position and puts a lot of money into it. Depending on the outcome of the search, the Board of Health might want to look elsewhere for contracting environmental services. Rappaport asked about the administration of the environmental health program. Peterson said a major issue with the latest administration was cost. In the past, the Board was told it was paying 2/3 of the costs and could make up difference with a fee increase. Then the recent administration told the Board of Health the costs were significantly higher. Maurer added that Pryde assured the Budget Committee that the prices would be very different with the new budget. The Board discussed the financial and service aspects of the environmental health program. McGrath stated a good candidate for the position would be someone who has operated a county program before. County programs are very different from city programs because a county program includes septic and well water programs,

which cities are not allowed to have. Enforcement is a big part of the food side of environmental health. There should be an educational component to go with enforcement. Regular reporting to the Board is essential in this area so the Board knows what it is getting. The Board discussed the position vacancies at CUPHD and agreed they would prefer to have input in the search.

Rappaport would like for the Board to have regular informational exchanges with CUPHD on an informal basis. The Board discussed making efforts to improve communication with the CUPHD Board. Rappaport suggested holding Board of Health/CUPHD joint meetings in the future and having the two Chairs communicate in advance to address the order of the meeting. The Board conferred about having a member attend the CUPHD Board meetings on a regular basis. Maurer was willing to try to attend CUPHD Board meetings.

Discussion Concerning FY2008 Budget

Deb Busey would bring a proposal for secretarial support to the June meeting so the Board can build it into the budget.

Maurer stated she would like to communicate to CUPHD what the Board wants in administrative services and then ask CUPHD what those services would cost. Rappaport supported that idea of the Board paying a portion of the Administrator's salary. He would like to be able to engage the Administrator in a constructive way around public health issues for the county. He would rather have it understood to be this approach instead of the Administrator doing A, B, and C. He feels the Board of Health has lacked thoughtful communications about plans and decisions with the Administrator. McGrath said the contract outlines exactly what the Administrator is supposed to do and it includes all the issues Rappaport raised on reporting to the Board and making recommendations on services. The Board has not been getting this. Rappaport suggested if the Board has a good relationship with the Administrator then the specific requirements do not have to be spelled out. The Board discussed that services are difficult to quantify. McGrath stated the Budget Committee mentioned to Pryde that there are other options for administrative services if the Board of Health has to go that route. A major decision for the CUPHD Board is what is appropriate for their Administrator to do for the Board of Health. The Board discussed how to initiate communication with the CUPHD Board and decided to start with contacting Pius Weibel because he is the County Board Chair and the County's representative on the CUPHD Board. Peterson said there have been discussions about funding an Executive Director position exclusive to the Board of Health, but this paints the Board's activity with the CUPHD as simply contracting with the district for services and otherwise being headed in a different direction. The CUPHD receives a great deal of funding for county-wide issues. Maurer noted this makes listing what the Board wants the Administrator to do problematic because many issues could be considered county issues. Peterson stated the Board of Health is a \$900,000 contract or 10% of CUPHD's total budget. Rappaport recommended coming to an understanding that the Board of Health is charged with providing good health services for the county and they need CUPHD's help to provide this. The Board discussed having an informal conversation between the County Board Chair and the Budget Committee to get his advice on how to approach the CUPHD Board. The Board agreed to include in its budget a line item for the Administrator's salary. Peterson stated the responsibility

for generating the Board of Health's budget is no longer in CUPHD's hands. The Board will request that Weibel attend the Board of Health meeting on June 26th.

The Board discussed the open member position and the difficulty in finding members who are both medical professionals and willing to regularly attend the meetings.

McGrath said there is money in the budget for a grant writing position. This is a potential area of collaboration with the Mental Health Board. McGrath will speak with Peter Tracy tomorrow about the Mental Health Board making a proposal to the Board of Health.

The Board thanked McGrath for compiling the list of discussion topics to give the meeting direction.

Adjournment

Maurer declared the meeting adjourned at 7:21 p.m.

Respectfully submitted,

Kat Bork
Administrative Secretary

**CHAMPAIGN COUNTY BOARD OF HEALTH STUDY SESSION
IDEAS TO DISCUSS FROM BUDGET AND CONTRACT COMMITTEES
COMPILED 6/12/07**

What services should the Board think about offering county residents outside of the core services?

- CUPHD has proposed using the large mobile unit to provide services to County residents at areas designated by the Board, to be charged on a per hour and mileage basis
- Board will be getting a proposal from RPC at its regular meeting in June regarding senior services
- Board is considering potential collaborative efforts with Mental Health Board for county residents

From what agency or agencies should the Board think about obtaining these identified services?

- CUPHD
- RPC
- Mental Health Board
- Other County Health Departments:

What staffing will the Board need and/or what can the Board afford to spend to carry out its identified program?

- Board will be getting a proposal from Deb Busey regarding secretarial support at its June meeting
- CUPHD has asked Board to identify what it wants in administrative services and what it is willing to pay for that service
- Board has funded a grant writing position; should that be done collaboratively with another county department or agency?

What funds will the Board have to carry out its identified programs?

- Base grant from State
- Property taxes
- Grants from state for bioterrorism,
- Mobile home taxes
- Fees for food protection permits, private sewage permits, public water grant from EPA, tobacco free grant, county grant, investment earnings, fees for other services offered by county board of health
- Other grants?

How should Board approach CUPHD?

- Attend meetings?
- Ask to participate in search for replacements for Executive Director and Environmental Health Director?
- Request mutual liaison?



Central Illinois Dental Education and Services

Child Dental Access Program – School Clinics – Head Start Dental Clinic
(217) 359-7404 fax (217) 352-9745 “Attn: CIDES”
PO Box 154, Champaign, IL 61824-0154

Champaign County Board of Health Report

May 2007 Child Dental Access Program

Individual Clinic Services

Total Children Served in Private Clinic Setting: **59**

Total number of different children in grant year: not available yet

Total Treatments Provided in Private Clinic Setting: **199**

Total Private Dentists Providing Care in Clinic Setting: **6**

Children seen were from (# of children, # of treatments)

Fisher – **1, 3**

Ludlow – **2, 6**

Penfield – **2, 6**

Rantoul – **40, 148**

Rural Urbana – **7, 20**

Rural Champaign – **3, 6**

Thomasboro – **1, 1**

Tolono – **3, 9**

Group Services

St. Joseph Grade School, May 11

Total Children Served in School Clinic Setting: **76**

Total Treatments Provided in School Clinic Setting: **308**

Children seen were from (# of children, # of treatments)

St. Joseph – **76, 308**

Outreach Educational Events & News

Central Illinois Dental Education and Services held an open house for people to see our new office and meet the new staff on Tuesday, May 22nd.

Jill scheduled for the medical segment on WCIA Morning Show July 18th.

Spanish speaking day for the Child Dental Access Program will be August 17th at Dr. Schutt's office in Rantoul.

HALO Project Activity Fair with Provena will be August 25th.

Total number of children seen from all programs in May: **135**

Total number of treatments from all programs in May: **507**

Total number of care inquiries* to the program for May: **116**

*This may include people not eligible for the Child Dental Access Program, but looking for care.



Legal Summit

July 16-17, 2007

ROLES, RESOURCES & RESPONSE in the Heartland

**Illinois Bioterrorism
Summit 2007**

July 17-19, 2007

Oak Brook Hills Marriott Resort • Oak Brook, Illinois



Rod R. Blagojevich, Governor
Eric E. Whitaker, MD, MPH, Director
Illinois Department of Public Health

ROLES RESOURCES & RESPONSE in the Heartland

PLANNING COMMITTEE

Marilyn Thomas
Legal Summit Chair

Ronald H. Brown

Elizabeth Paton

Kate Pawlik

Vicky Ritz

Krissy Roseberry

OBJECTIVE

This summit is designed to address current public health legal issues through plenary and concurrent sessions by state and national speakers.

TARGET AUDIENCE

Registration for the legal summit on Monday, July 16, 2007, is limited specifically to attorneys who advise local health departments. The legal summit session on Tuesday, July 17, 2007, is open only to attorneys, local public health administrators and emergency response coordinators. There is no registration fee to attend. The conference reserves the right to limit attendance for each jurisdiction to one health administrator and one emergency response staff.

CONTINUING LEGAL EDUCATION CREDITS

Continuing Legal Education (CLE) credits have been applied for. CLE registration forms will be available at the summit. Certificates will be mailed after the summit.

SUMMIT INVITATION



Greetings!

I would like to personally invite you to the first Illinois Legal Summit on Public Health Emergency Law, sponsored by the Illinois Department of Public Health (IDPH). Preventing and controlling the spread of disease involves not only public health professionals, but also legal professionals. As our communities are engaged in pandemic influenza planning and developing social distancing measures, significant legal issues will need to be addressed. Are you prepared to meet these legal challenges to counsel your clients effectively?

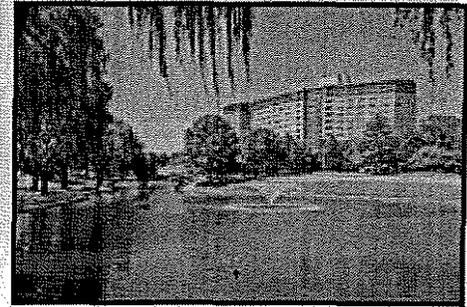
The annual Illinois Bioterrorism Summit will feature for the first time a legal training. Due to the importance of public health response, the state has worked hard to offer this summit program at no cost. The legal summit offers valuable Continuing Legal Education (CLE) credits at no cost to the attorney (excluding travel expenses), and provides an excellent educational opportunity. The goal of the legal summit is to provide you with the resources to successfully counsel your client. The meeting will comprise two days, July 16 and July 17, 2007. The first day, July 16, is specifically reserved for state's attorneys and counsel to local health departments in Illinois in order to meet IDPH goals to provide hands-on training for Illinois front-line attorneys responding to public health emergencies. The first day will provide a general overview of federal and Illinois public health law. These areas include statutes and regulations related to general public health authorities, and understanding the process when a public health emergency/declaration of disaster is declared. Due to the important relationship between the health department and its state's attorneys, and in order to facilitate that relationship, we have invited health department administrators to attend with their state's attorneys on the legal summit on day two. The topics for the second day will specifically address issues related to volunteers, liability, and an in-depth discussion of the isolation and quarantine rules.

I know that you will find these topics timely and informative. Please make every effort to register early to join us at this ground-breaking conference. I look forward to seeing you!

Marilyn Thomas
Chief Counsel
Illinois Department of Public Health

HOTEL ARRANGEMENTS

Oak Brook Hills Marriott Resort
3500 Midwest Road, Oak Brook, IL, 60523
Phone: 630-850-5555
Fax: 630-850-5567
Website: <http://marriott.com>



Overnight hotel room accommodations are the responsibility of the registrant. A special summit rate of \$127 per night for single/double occupancy is available at the Oak Brook Hills Marriott Resort. Resort room rates are subject to applicable state and local taxes. To make your hotel room reservation, please call Marriott reservations at 800-228-9290 or 630-850-5555 and specify that you are with the "2007 Bioterrorism Summit." **Hotel registration deadline is June 27!**

DIRECTIONS

Oak Brook Hills Marriott Resort is located 25 minutes from O'Hare International Airport, Downtown Chicago and Midway Airport, and a short distance from the Metra commuter train in Westmont and the Northwestern commuter train in Elmhurst.

From The North:

Take I-294 (Tri State Tollway) South to I-88 West. Exit at Route 83 South, approximately one mile to 31st Street (Oak Brook Road). Turn right on 31st Street, approximately one mile to Midwest Road. Turn left on Midwest Road. Take Midwest Road to the next light, 35th Street. Oak Brook Hills is on the left.

From The South:

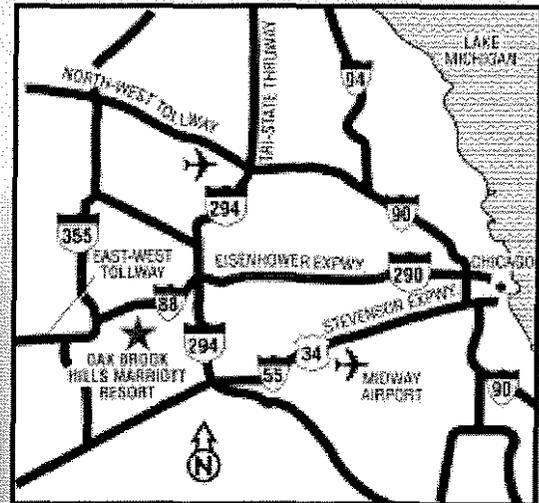
Take I-294 (Tri State Tollway) North to I-88 West. Exit Route 83 South, approximately one mile to 31st Street (Oak Brook Road). Turn right on 31st Street, approximately one mile to Midwest Road. Turn left on Midwest Road. Take Midwest Road to the next light, 35th Street. Oak Brook Hills is on the left.

From The East:

Take I-290 (Eisenhower Expressway) West to I-88 West. Exit at Route 83 South, approximately one mile to 31st Street (Oak Brook Road). Turn right on 31st Street, approximately one mile to Midwest Road. Take Midwest Road to the next light, 35th Street. Oak Brook Hills is on the left.

From The West:

Take I-88 (E-W Tollway) East and exit at Midwest Road. Turn left on Midwest Road approximately one mile. Oak Brook Hills is on the left.



Monday, July 16, 2007

7:30 a.m. – 9 a.m.
CONTINENTAL BREAKFAST

8 a.m. – 4 p.m.
REGISTRATION

9 a.m. – 10:15 a.m.
PLENARY SESSION

9 a.m. – 9:15 a.m.
**GENERAL WELCOME and
INTRODUCTIONS**

- George Rudis, MA, CPHA, Assistant Deputy Director, Division of Vital Records, and Local Health Liaison, Illinois Department of Public Health

Rudis works with county boards, boards of health, and the 95 certified local health departments on issues related to public health, ensuring clear communication between the entities and the state health department. He serves in a leadership role for the agency, providing guidance and assistance as well as a point of contact and customer relations between the local health departments and the Illinois Department of Public Health.

**The Context: Laying the Groundwork for
Legal Preparedness in Illinois**

- Marilyn Thomas, JD, Chief Counsel, Illinois Department of Public Health

Illinois is moving forward with critical advances in addressing public health emergencies. All communities are currently working toward preparedness efforts and including important pandemic flu planning and response. What is the role of the state's attorney and the attorney for the health department? What are the relevant laws and rules that apply? What issues do we need to be prepared for? What are the legal issues related to government response and accountability, due process, and health information privacy? How do we balance the government's responsibility to investigate outbreaks and to issue orders for isolation and quarantine, with the need to protect individual and community interests? This session provides a global overview of the issues related to legal preparedness in Illinois.

KEYNOTE
**Pandemic and All-Hazards Preparedness
Act**

- Brian Kamoie, JD, MPH, Deputy Assistant Secretary, Director, Office of Policy, Strategic Planning and Communications, Office of the Assistant Secretary for Preparedness and Response, U.S. Department of Health and Human Services

In December 2006, Congress passed the Pandemic and All-Hazards Preparedness Act (Act) which requires the U.S. Department of Health and Human Services (HHS) to develop a strategic plan to improve the development of medical countermeasures for national security threats. This session will provide an overview of the act as well as the Office of the Assistant Secretary for Preparedness and Response (ASPR) created by the act. Implementation of the act, the development of national public health and medical preparedness policies and the impact the act will have on future national and state activities also will be discussed.

10:15 a.m. – 10:30 a.m.
BREAK

10:30 a.m. – 11:30 a.m.
**Federal Quarantine Laws and Other Public
Health Authorities: What States May
Expect from the Federal Government in a
Public Health Emergency**

- Barbara Altman, JD, U.S. Department of Health and Human Services, Region V

The session will provide an overview of the statutory and regulatory authorities available to the Secretary of Health and Human Services to respond to a public health emergency. The participants will be able to understand the tools available to HHS to respond to a public health emergency and recognize the respective roles of the federal government and state and local government in response to a public health emergency.

Monday, July 16, 2007

11:30 a.m. – Noon

A Physician' Perspective on Public Health Emergencies

- Craig Conover, MD, Illinois Department of Public Health

A global pandemic influenza outbreak represents a major threat to the public health system. New influenza virus types are likely to emerge. The public health medical community anticipates encountering several challenges, including the identification of the threat as well as the implementation of treatment and control measures. This session will explore the medical aspects of a public health emergency.

Noon – 1:15 p.m.

LUNCHEON and KEYNOTE SPEAKER

- Kevin Lust, Lust Development Group

This motivating and informative session will focus on the importance of team building and provide insight on techniques and ideas to improve our unified response to public health emergencies.

1:15 p.m. – 2 p.m.

Illinois Public Health Emergency Powers

- Marilyn Thomas, JD, Chief Legal Counsel, Illinois Department of Public Health
- Elizabeth Paton, JD, Assistant Chief Counsel, Illinois Department of Public Health

When public health organizations spring into action in response to an emergency situation, they do so within a legal framework that defines their roles and responsibilities, the interventions they can employ, and their consideration of civil liberties and other fundamental legal principles. This body of law has evolved in Illinois to become one of the most comprehensive in the country. This session will provide an overview of the Illinois statutory and regulatory framework and the tools available to respond to a public health emergency.

2 p.m. – 3:15 p.m.

Importance of Community Legal Preparedness Planning

- Montrece Ransom, JD, Senior Public Health Analyst, U.S. Centers for Disease Control and Prevention Public Health Law Program

Before a disaster strikes, legal counsel should be prepared for the role they may be asked to play. Achieving comprehensive preparedness hinges on achieving legal preparedness. This session will explore the importance of examining legal issues, building relationships in the community, and developing community-wide policies, plans and procedures prior to an actual event.

3:15 p.m. – 3:30 p.m.

BREAK

3:30 p.m. – 4:30 p.m.

Lessons Learned from Toronto's SARS Outbreak

- Jane Speakman, JD, Solicitor, City of Toronto, Ontario, Canada

In 2003, Toronto, Ontario, Canada, was faced with a local crisis – an outbreak of the severe acute respiratory syndrome (SARS) virus. This incident taught city officials what they were and were not ready for and pointed to the gaps in their plans and capabilities. This session will highlight some of the lessons learned by the public health community as a result of that outbreak and will show participants that a public health emergency gives no warning and presents numerous legal as well as medical obstacles and hurdles that need to be cleared in an effort to abate the emergency.

4:30 p.m. – 4:45 p.m.

CLOSING REMARKS

5 p.m. – 6:30 p.m.

RECEPTION

Tuesday, July 17, 2007

7:30 a.m. – 9 a.m.
CONTINENTAL BREAKFAST

8 a.m. – 9 a.m.
REGISTRATION

8:30 a.m. – 10 a.m.
LEGAL PLENARY SESSION

Local and State Interactions and Communication

- Marilyn Thomas, JD, Chief Legal Counsel, Illinois Department of Public Health
- William Roberts, JD, Assistant State's Attorney, DuPage County State's Attorney's Office
- Cynthia Noa, MS, RN, Chief, Division of Infectious Diseases, Illinois Department of Public Health
- Bill Keller, Director, Champaign County Emergency Management Agency

What is the role of the Office of the State's Attorney and how will they communicate effectively with state partners and county/community partners during emergencies? What is the role of the health department attorney and how will they be involved in the communications? This session brings together a panel of representatives from IDPH and local jurisdictions to tackle this issue and highlight how local health departments and the state can work together to benefit their communities and the various communication channels used.

10 a.m. – 10:15 a.m.
BREAK

10:15 a.m. – 11:45 a.m.
LEGAL CONCURRENT SESSIONS

Volunteers and Liability from a Community Perspective

- Kate Pawlik, JD, Associate Chief Counsel, Illinois Department of Public Health
- David Massa, JD, Gallop, Johnson, & Neuman
- Michele Niermann, JD, Assistant State's Attorney, Kane County State's Attorney's Office
- John Dwyer, BS, Emergency Response Planner, Champaign County Public Health Department

All communities responding to an emergency will rely on and require volunteers. However, a series of legal and regulatory questions affect their use and participation. How do you track volunteers? How will you check and track credentials? What protections from liability will be in place for the health department?

What immunity provisions apply and how does a declaration of disaster from the Governor affect liability? This session will examine some of those legal issues and concerns from a community perspective.

Legal Issues Related to SNS – Are You Ready for Mass Dispensing?

- Elizabeth Paton, JD, Assistant Chief Counsel, Illinois Department of Public Health
- Daniel Kelber, JD, Legal Counsel, Illinois Department of Financial and Professional Regulation
- Amy Stewart, BS, MPH, Strategic National Stockpile Director, Illinois Department of Public Health
- Chris Shields, BS, EMT-P, Emergency Preparedness and Response Manager, Village of Oak Park

This session will offer an overview of legal issues that might arise when the Strategic National Stockpile (SNS) is utilized. This session will highlight the partnerships among state and local agencies. Panelists will discuss how the various state agencies and local entities are preparing for dispensing and utilizing the Strategic National Stockpile. Legal issues related to dispensing within your county will be discussed along with practical considerations.

11:45 a.m. – 1 p.m.
BREAK and LUNCH (box lunch provided)

1 p.m. – 4 p.m.
Legal Nuts and Bolts of Isolation and Quarantine

- Marilyn Thomas, JD, Chief Legal Counsel, Illinois Department of Public Health
- Elizabeth Paton, JD, Assistant Chief Counsel, Illinois Department of Public Health
- Kate Pawlik, JD, Associate Chief Counsel, Illinois Department of Public Health
- Kate Kelly-Shannon, Acting Chief, Communicable Disease Control Section, Illinois Department of Public Health
- Wendi W. Wright, JD, Chicago Department of Public Health

This session will prepare participants to respond to infectious disease emergencies by understanding, implementing and enforcing isolation and quarantine measures. This session will discuss a Legionnaire's disease outbreak and challenges with investigations, new regulations and model legal documents.

4:30 p.m. – 6 p.m.
RECEPTION

Legal Summit • July 16-17, 2007

REGISTRATION FORM

- SPACE IS LIMITED . . . REGISTER EARLY
- NO ON-SITE REGISTRATION
- THERE IS NO REGISTRATION FEE TO ATTEND
- OVERNIGHT HOTEL ROOM ACCOMMODATIONS ARE THE RESPONSIBILITY OF THE REGISTRANT
- HOTEL REGISTRATION DEADLINE IS JUNE 27
- SUMMIT REGISTRATION DEADLINE IS JULY 2

Please type or print clearly. Name and organization, as printed, will appear on summit name badge.

Monday, July 16th, is open to attorneys only. Tuesday, July 17th, is open to attorneys, health administrators and emergency response staff. (Due to limited space, the conference suggests that local jurisdictions send one (1) representative each from local health and emergency response staff to the Tuesday sessions. The conference reserves the right to limit participation in the Tuesday sessions should space become an issue.)

Name _____

Attorney Health Administrator (Tues., July 17 only) Emergency Responder (Tues., July 17 only)

ARDC # (required for CLE purposes) _____

Title _____

Organization/Agency _____

Address _____

City/State/ZIP _____

E-mail Address _____

Telephone _____ FAX _____

ATTENDANCE

- I plan to attend the legal summit on July 16 and July 17
- I plan to attend the legal summit on July 16 only
- I plan to attend the legal summit on July 17 only

(Note: To attend the Illinois Bioterrorism Summit, July 17-19, 2007, please register separately at www.ipha.com.)

I plan to attend the following receptions:

- Monday, July 16
- Tuesday, July 17

SPECIAL NEEDS

Vegetarian Meals Interpreter Other _____

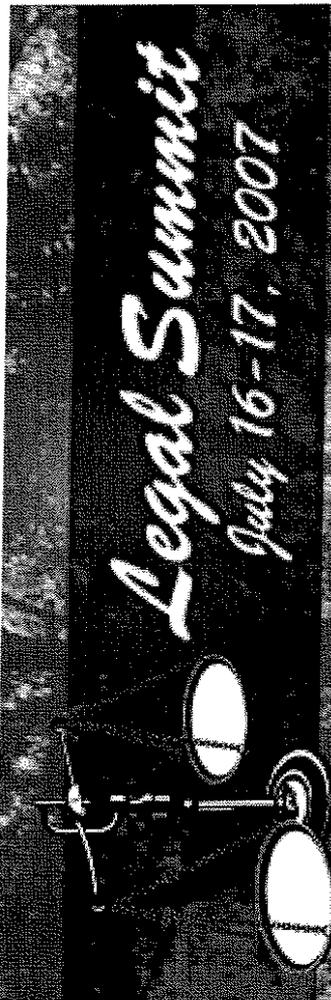
It is the desire of the conference planning committee to make your participation in this event as rewarding as possible. To assist us in this endeavor, please advise us of any disabilities that require special accommodations, including the provision of auxiliary aids and services.

Register on-line:
<http://www.idph.state.il.us/training.htm>

Register by FAX:
217-557-7843

Register by mail:
Illinois Department of Public Health, Attn: Legal Summit, 828 S. Second St., Springfield, IL 62704

Questions?
Call 217-782-2043



Legal Summit
July 16-17, 2007

ROLES RESOURCES & RESPONSE in the Heartland

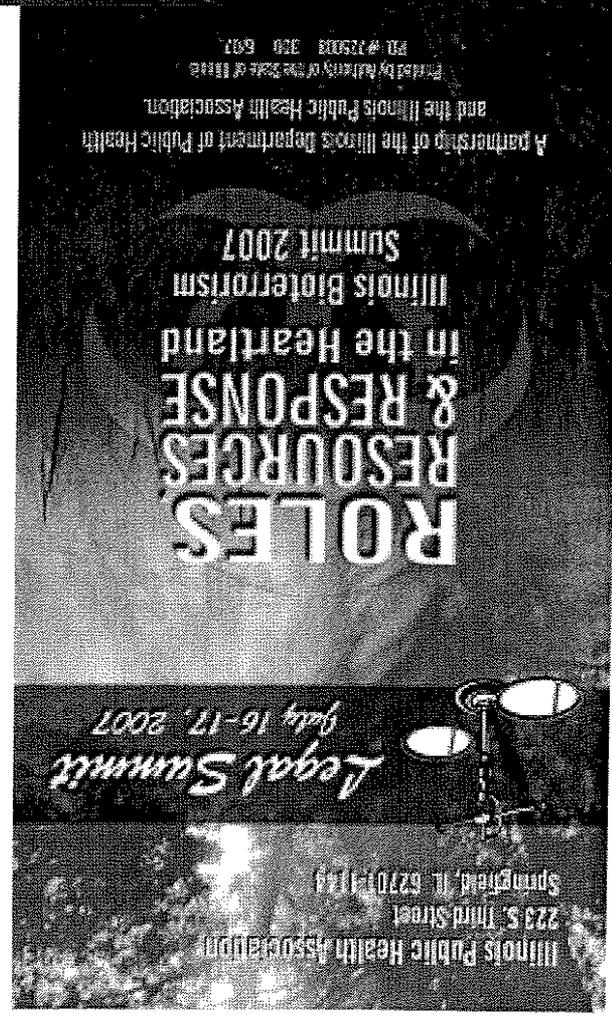
Illinois Bioterrorism
Summit 2007
July 17-19, 2007

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Eric E. Whitaker, MD, MPH, Director
Illinois Department of Public Health



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Legal Summit
July 16-17, 2007

ROLES RESOURCES & RESPONSE in the Heartland Illinois Bioterrorism Summit 2007

A partnership of the Illinois Department of Public Health
and the Illinois Public Health Association.

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Illinois Public Health Association
223 S. Third Street
Springfield, IL 62701-1144



ILLINOIS ASSOCIATION OF BOARDS OF HEALTH



The Bugle Call

June 2007

CAROLYN CHAPMAN, *Editor*

LORRAINE DOHM, *Layout & Design*

Forty-sixth Edition

IPHA 66th Annual Meeting Held in Springfield on Route 66

The Illinois Public Health Association met at the Crowne Plaza Hotel in Springfield April 10 to April 12. Using the theme of 66th on Route 66, the meeting went "Cruisin' to a Healthy Illinois."

The conference was in partnership with the Illinois Department of Public Health, Office of Health Promotion.

The goals of the conference were (1) to build relationships on local and state-wide levels that strengthen the competency of the Illinois public health and human service workforce to address systemic issues and key public health objectives; and (2) to advance continuing education and fellowship needs of IPHA membership and other public health professionals by providing a forum where relevant and timely ideas could be presented and discussed in pursuit of public health knowledge, skills and performance enhancement.

See IPHA
Page 3

Boards of Health Association Meets in Springfield at IPHA Conference

The Fall Meeting of IABH assembled during the period assigned for section meetings at the 66th annual meeting of the Illinois Public Health Association held at the Crowne Plaza Hotel in Springfield.

President Jan Allen, called the meeting to order at 8:30 AM. After the October 10th minutes were approved along with the meeting agenda, President Allen introduced guest speaker, Juliana P. Smith, Director of State/Government Relations, American Dietetic Association. Attending with Ms Smith were her associates Golda Ewalt, Toby Smith, Constance Bussaud and Cheryl R. Galligos, who informed IABH members about the Dietetic Association's suggestions of what local boards of health can do to promote healthy diets as measures to combat obesity and diabetes.

Ms Smith suggested that boards of health might benefit from having dietitians as mandated health board members.

IABH members exchanged discussion with the dietitians about the ideas presented.

Following the guest presentation, President Allen welcomed two new IABH members from Madison County, Dorothy Droste and David Ayers.

President Allen, President-Elect Margaret Leonard, and Immediate Past President Kay Banta described IABH business they had processed since the last meeting.

By vote of the members present dues were increased beginning in 2008 to \$100.

Our association will co-sponsor a panel of Local Medical Reserve Corps leaders at the next Bio-terrorism Conference in July. We also co-sponsored the Illinois Public Health Institute Conference in May.

As a result of the annual election, the slate presented by the Nominating Committee was chosen by acclamation.

Secretary: (replacing the secretary, who resigned) Annie P. Clark; Dr. Louis Rowitz and Arthur Grist for re-election to the Executive Council. ☉



*President's
Message*

The Illinois Association of Boards of Health (IABH) needs your ideas, your experience, and your talents to make our organization even better. We are working on ways to include ALL Board of Health Members, and we are looking at alternative ways to meet together that are meaningful and time efficient.

Boards of Health seem to draw members who are already contributing citizens in their communities, often holding several volunteer positions besides their day jobs. With this in mind, we need to think smarter re: how we can spend time together, to network and share pertinent information that will assist us in our responsibilities and policy decisions.

The health of our communities is dependent on careful policy setting, with vital programs and services appropriate to the populations we serve. This is best accomplished by our local Boards of health. What we do matters!

Recently I visited the Clinton County Board of Health located in Carlyle, IL. There I met Mike McMillan— Administrator, and many of the Board of Health Members, each of whom was very involved in their community. An issue that surfaced among the Board members was to find the right referral for certain types of clients. With Mike's input and other members' ideas, a course of action was outlined before the meeting began. Rural areas have many constraints in meeting health needs, with great distances between resources and extreme funding issues. Innovations are needed daily.

Mark your calendars for our next face to face meeting on October 9, 2007, at McLean County Health Department in Bloomington at 10:00 a.m. You will be welcome. ☺

Jan Allen

ST. CLAIR COUNTY HEALTH DEPARTMENT WINS BEST PRACTICE TRAINING COMPETITION

The University of Illinois at Chicago School of Public Health competitively selected two local health departments, one in Illinois and one in Indiana, for special training opportunities under Project Best Practice: Building Public Health System Infrastructure Through Training. The Illinois Department of Public Health (IDPH) and Mid America Public Health Training Center (MAPHTC) staff participated in the selection process.

Interviews of competing agencies were conducted by staff of the Mid America Public Health Training Center (MAPHTC) to supplement the evaluation process.

To be eligible to apply local health departments were required to be designated as a HRSA Health Profession Shortage Area or Underserved Population; to demonstrate evidence of collaborative relationships between the local health agency and community organizations with a public health mission; and after a year agree to mentor a neighboring county through the best practice process.

The agencies chosen agreed to use the MAPP instrument for a community health assessment. The agency staff then would complete periodic learning assessments using an online learning management system. Furthermore, the agency would assist the MAPHTC staff in designing appropriate training programs and support the development of community collaboration across the local public health system.

For its part MAPHTC agreed to provide four onsite trainings to the local health department staff and community partners; provide a Train-the-Trainer workshop to sustain organizational development in local health jurisdictions; help the agency find sustainable funding for workforce development; and facilitate the MAPP planning process.

In Indiana, the local health department chosen was the Hendricks County Health Department, just west of Indianapolis. The Illinois county that will begin Project Best Practice next fall/winter is Peoria. ☺

ASSOCIATION OFFICERS

President: Dr. Jan Allen, *St. Clair County*
President-Elect: Margaret Leonard, *Macon County*
Secretary: Judy McDonald, *Will County*
Treasurer: Kent Scheibel, *Madison County*

LaughParade by Bunny Hoest & John Reiner



"It's usually not a good idea to think outside the box on your tax return."

Pre-conference Activities

Poster Session Showcase

On Wednesday, April 11th, the poster program provided opportunities for presenters to share findings of research/empirical studies on prevention practice models, community demonstration projects or social marketing applications that addressed the conference theme: Health Promotion and Chronic Disease Prevention.



Two Summits on Tuesday, April 10th

1. Public Health Nurse Summit

The goal of this summit was to bring together Illinois nurses from education and all practice settings who focus on the health of populations, using the theme "A Public Health Nurse by any other Name... a summit on evidence-based practice for all population-based nurses."

2. Making Illinois Safer: Injury Prevention Training

Because injuries are the leading cause of death for people aged 1 to 44, the training aimed to help participants learn how to find injury-related data, advocate for local injury prevention efforts and evaluate the success of local injury prevention programs.

Exhibits were available all day from 8 a.m. to 5 p.m.

Concurrent Sessions

For those not attending one of the summits, concurrent sessions presented programs on asthma, stroke prevention and obesity, from 9 a.m. to 10:30 a.m. on April 10th

Other sessions from 10:45 a.m. to 12:15 p.m. addressed tobacco cessation, achieving better pregnancy outcomes, and genomics/genetics in everyday practice.

After a boxed lunch, sessions in the afternoon addressed men's health issues, asthma management, and cardiometabolic syndrome, reducing intentional injuries among middle school children, reducing accidental falls, and how physical activity can reduce arthritis-related disability.

Sections Mixer

After this heavy diet, the sections mixer from 5 to 7 p.m. offered a welcome opportunity to relax and network.

Wednesday, April 11th

A continental breakfast opened the day on Wednesday followed by an opportunity to take a tour of a KidneyMobil on the hotel parking lot.

Best Practice Roundtable Discussions keyed to poster sessions from 8:30 a.m. to 10 a.m. ended with a break to visit the many interesting exhibits.

Opening Plenary Session

At 10:30 a.m. Executive Director, James R. Nelson and IPHA President, Nancy Bluhm, welcomed attendees to a program in which a number of State officials discussed the Challenge of Chronic Disease in Illinois.

Awards Luncheon

The Keynote Speaker at the Awards Luncheon was James S. Hirsch, a former reporter for the *New York Times* and *The Wall Street Journal*, now an author and principal at Close Concerns, a diabetes consulting and publishing

company, who gave an inspiring and helpful program on living with diabetes.

Following, the address awards were presented to outstanding people in the field of public health. Former President, Kay Banta of the Illinois Association of Boards of Health received the Everett I. Hageman Volunteerism Award.

Honorary Emeritus Awards went to Gordon Poquette, Executive Director of the Tazewell County Health Department, and Doris M. Lomax of the Human Resources Development Institute, Inc.

Supersessions

A group of supersessions presented from 3 p.m. to 5 p.m. included such topics as nutrition, physical activity and obesity; successful approaches to writing an IPLAN; Illinois healthcare at the forefront discussions of new initiatives presented by Governor Blagojevich over the last two years; and diabetes management.

President's Reception

The reception beginning at 5:30 p.m. featured a performance by the Quincy High School Jazz Band and Choir. During the entertainment, attendees could take advantage of various tables that presented a selection of refreshments.

The highlight of the evening was a talent show that spotlighted the range of public health members' abilities. Following the performances, voting provided the audience with an opportunity to choose the best among many.

Throughout the evening door prizes were presented to lucky attendees.

The evening ended with a DJ who invited members to sing Karaoke and dance.



Thursday, April 12

IPHA sections met for breakfast from 8 to 9 a.m.

The annual business meeting of IPHA began at 9 a.m., during which a number of resolutions were adopted.

Closing Plenary Session

Carol Adams, PhD, Secretary, Illinois Department of Human Services, addressed health disparities in Illinois and ways to overcome them.

Deborah Klein Walker, EdD, President of the American Public Health Association, detailed the subjects that carry forth the interests of APHA.

The featured speaker of the closing session was Anthony B. Iton, MD, JD, MPH, Director and Health Officer, Alameda County, California, described how census figures in his county point up the issue of health disparities. His research showed that poor health services and health problems walked hand in hand with pockets of poverty, while quality services and better health were available to areas of wealth.

Dr. Iton made the point that disparities were based on degrees of wealth in his county. He challenged the audience to examine the situation in each local area to see if the same situation might prove true throughout the nation.

The closing session ended a full range of issues and information for IPHA members to take home with them, as each person addresses the needs and hopes of people where they live. ☺

IABH Past President Chosen for Hageman Volunteerism Award



Kay Banta, Illinois Association of Boards of Health Immediate Past President, was chosen to receive the Everett J. Hageman Volunteerism Award at the Illinois Public Health Association Meeting in Springfield on April 11, 2007. ☺

Let's Do Health Care A New, Better Way

A case of the forest and the trees — the forest being the quagmire existing in our nation's dysfunctional health care system, and the trees being the special-interest groups blocking feasible solutions.

The imperative is to look beyond the deluge of media hyperbole condemning Gov. Rod Blagojevich's plan. Fellow Americans, begin thinking out of the box. Failure to find solutions now will lead to ever spiraling costs as exemplified by the 87 percent increase in health insurance costs between 2000 and 2006.

We are already spending more than 16 percent of our gross domestic product (GDP) for health care, nearly double that of most developed nations, and for all that, are experiencing poorer health outcomes. For example, our infant mortality rate is higher than Cuba's; a United Nations study had ranked the United States 20th of 21 wealthy nations in terms of children's overall health and welfare (Post-Dispatch Feb. 15) and longevity lower than approximately 25 other nations.

Without solutions, the percent of GDP going to health care will continue to escalate, leaving a smaller and smaller share of the economic pie for the multitude of other needed goods and services.

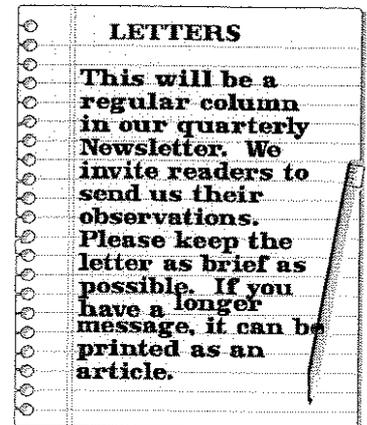
The definition of insanity I heard at a recent meeting is doing the same thing and expecting different outcomes. That would be us.

Let's look at some key issues.

- First, there are important philosophical differences in pursuing solutions between those believing health care is a basic human right and those who say the Declaration of Independence never intended health care in the promise of "life, liberty, and the pursuit of happiness." Guess what? Everyone suffers without universal health coverage because when the have-nots finally enter the health care system as a last resort, it's frequently through use of ultra-expensive emergency rooms and intensive care units. The cost of have-not care is then shifted to both public and private payers, including employers, and is estimated to be a hidden burden for insured families of about \$1,000 yearly.
- Corporations naturally give knee-jerk responses to anything smelling like an added liability, usually without stopping to consider secondary benefits such as an eventual decrease in their health insurance costs, decreased sick leave, and increased employee satisfaction leading to declining expenses related to employee turnover.
- In Ohio where the gross receipts tax is used, CEOs acknowledging the need for maintaining and improving the state infrastructure took a lead role in crafting a plan they perceived to be fair. The Blagojevich plan is far from finalized; why can't employers be part of the solution? While there may be more start-up costs, significant decreases will follow when employees receive timely preventive and health maintenance care.
- And then there's the insurance industry's cut for administering health insurance programs. The overhead for administering Medicare is estimated to run about 5 percent while private insurance costs are nearly triple that (Matthews, Council for Affordable Health Insurance 2006). Canada's health system runs less than 2 percent. Most U.S. seniors are more than satisfied with their health coverage, and extension of this option across the lifespan is being considered for adoption by several states, which like Illinois are seeking solutions to health care access.

Moral: Time is running out. Be proactive, look beyond the trees, look outside the box.

Marcia Custer, Edwardsville (Marcia Custer, is not only a member of IABH's Executive Council and a member of the Madison County Board of Health Advisory Committee, she is a faculty member emeritus of the Southern Illinois University Edwardsville School of Nursing. This appeared as a Guest View in the Belleville News-Democrat, May 4, 2007.) ☺



ILLINOIS LEGISLATURE CONSIDERS GOVERNOR'S HEALTH PLAN

Governor Rod Blagojevich's health plan called "Illinois Covered" has been debated in both houses of the Illinois legislature. The comprehensive plan to give affordable and quality health coverage to all Illinois families, is described as a solution to the serious problem of 1.4 million uninsured people in Illinois.

Although Congress has not been able to agree on such a measure, a number of states are studying or working toward such plans. Other states discussing such plans include Pennsylvania and California. Massachusetts has already adopted its form of health insurance coverage.

The cost of healthcare is rising dramatically nationwide, leaving more and more people uninsured, and forcing businesses to drop or significantly cut back coverage. As a result of faster-than-inflation rate increases, the number of uninsured nationally has increased by 6 million since 2000. As more people become uninsured, the cost of providing health services to them puts significant pressure on families, the healthcare system and the nation's economy.

These points have been made in the Governor's arguments for his new program:

1. Lack of insurance is the sixth leading cause of death in the U.S.
2. Medical-related bankruptcies have jumped 2,200 percent since 1981. The middle class accounts for 90 percent of these cases. And in many cases, the families who suffered bankruptcies had health insurance. They just couldn't keep up with the rising costs.
3. A FamiliesUSA study found that the health insurance premiums for families here in Illinois increased by \$1,059 due to costs incurred by the uninsured. As health insurance premiums increase and employers cut back on coverage, employers who continue offering benefits pay more.
4. The Human Resources Policy Association estimates the annual cost of reduced productivity due to uninsured workers in the nation's top 200 largest companies is between \$87 billion and \$126 billion.

Businesses are significantly impacted by skyrocketing costs. Over the past five years, health insurance premiums for businesses have increased nearly five times faster than inflation and four times faster than wage growth. While surveys show that employees consider health insurance to be the most important benefit and a leading reason to stay with an employer, the cost of health insurance premiums for employers increased nearly 87 percent between 2000 and 2006.

"Illinois Covered" includes a range of options—from access to new affordable insurance products, to rebates on private insurance for those who currently have health insurance, to direct state assistance—to make sure every Illinoisan has access to health coverage.

While programs like Medicaid and FamilyCare provide coverage to many low-income adults, there are 320,000 poor adults in Illinois who do not have access to coverage because they do not have children, or their children are grown and no longer dependant on them. Through Illinois Covered Assist, these adults will be able to get health coverage.

There are a number of other measures included in the plan that address a range of problems faced by families and small businesses.

According to an editorial on Saturday, May 5, 2007, in the *St. Louis Post-Dispatch*, that urged adoption of the plan, "Some Illinois business groups have objected to Mr. Blagojevich's proposal because it primarily would be paid for by a gross receipts tax that is expected to raise \$6 billion a year, which would be split between education and health care. Depending on the type of business, the tax would be either 0.5 percent or 1.8 percent of all transactions."

The new tax would apply to businesses with annual sales of \$2 million or more. The corporate income tax would be phased out under the plan to make the tax system more equitable.

The *Post-Dispatch* editorial pointed out that Washington and Hawaii have gross receipts taxes. Ohio recently enacted one, largely at the urging of Ohio businesses.

The Illinois Chamber of Commerce was joined recently by the Illinois State Medical Society in opposition to the plan. The Medical Society said it still supported the idea of universal health care, just not the governor's plan.

On May 10th the Illinois General Assembly held a nonbinding vote that indicated strong opposition to the gross receipts tax that the Governor has proposed to pay for schools and health care.

This is how the issue stands as the *Bugle Call* goes to press. ☉

1.4 million
uninsured
people in
Illinois

A Leadership Training Opportunity for Board of Health Members

The Mid-America Regional Public Health Leadership Institute (MARPHLI) is in its 16th year. This valuable training is held over the period of one year to assist public Health Boards and staff, holding leadership positions at all levels of public health, to develop greater effectiveness.

Applicants accepted will be given the title of "Fellow." After completion of the course, Fellows are often invited to be Mentors. Fellows and Mentors who have attended in the past speak highly of this experience.

Fellows can look forward to an initial Kick-Off conference at Pheasant Run Resort in St. Charles, IL in October, 2007. The date will be announced soon. Two follow-up sessions will be held at six and twelve month points of the year and some homework is expected relevant to your public health roles.

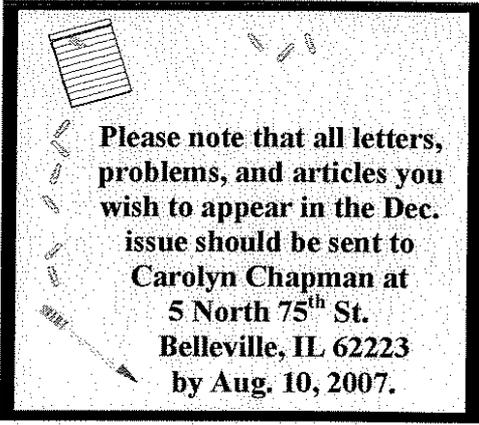
A special offer is available to Board of Health members this year. Director of MARPHLI, Dr. Lou Rowitz, (also an Executive Council member of IABH and Board member of the Evanston Health Department) invites Board members to apply for the Leadership Training at a discounted cost of \$1,000 for the whole year (*versus \$1,500*).

Application forms are available via the website, www.uic.edu/sph/marphli, and are due on August 31, 2007. The other contact numbers of MARPHLI are through Geoffrey Downie, Project Coordinator at (312) 413-1088 and FAX (312) 996-5768.

An applicant can be self-chosen or nominated by a colleague with a letter of nomination. Not all criteria outlined for staff are relevant to Board members. We recognize that education is more than the degree that one earns in a particular program. With leadership history, all applications are welcomed.

Another great opportunity for applicants is from IABH, offering 2 MARPHLI Scholarships to Board of Health members for \$1,000 each. Those wishing to apply for a MARPHLI Scholarship will have their applications reviewed by the Scholarship Committee of IABH, and forwarded to the Institute in a timely manner. There may be opportunities for additional scholarships through other organizations.

To apply for an IABH Scholarship, kindly send your application to Jan Allen via Fax: (618) 277-1535; E-mail: JanAllen703@aol.com or home address: 123 Lake Hickory Circle, Belleville, IL 62223. ☎



Please note that all letters, problems, and articles you wish to appear in the Dec. issue should be sent to Carolyn Chapman at 5 North 75th St. Belleville, IL 62223 by Aug. 10, 2007.

Wisdom Through the Ages

.....via the Internet

I learned that I like my teacher
because she cries when we sing
"Silent Night." *Age 5*

I learned that my dog doesn't want
to eat my broccoli either *Age 7*

I learned that when I wave to people
in the country, they stop what they're
doing and wave back *Age 9*

I learned that just as soon as I get my
room the way I like it, Mom makes me
clean it up again *Age 12*

I learned that if you want to cheer
yourself up, you should try cheering
somebody else up *Age 14*

I learned that although it's hard to
admit it, I'm secretly glad my parents
are strict with me *Age 15*

I learned that silent company is often
more healing than words of advice
Age 24

I learned that brushing my child's
hair is one of life's greatest pleasures
Age 26

I learned that wherever I go, the world's
worse drivers have followed me there
Age 29

I learned that if someone says something
unkind about me, I must live so that no
one will believe it *Age 30*

I learned there are people who love you
dearly, but don't know how to show it
Age 42

I learned you can make someone's day
by simply sending them a little note
Age 44

I learned that the greater the sense of
guilt, the greater need to blame others
Age 46

I learned that children and grandparents
are allies *Age 47*

I learned that singing "Amazing Grace"
can lift my spirits for hours *Age 49*

I learned that if you want to do
something positive for your children, try
working on your marriage *Age 61*

ST. CLAIR COUNTY HEALTH DEPT.
19 PUBLIC SQUARE SUITE 150
BELLEVILLE, IL 62220

RETURN SERVICE REQUEST

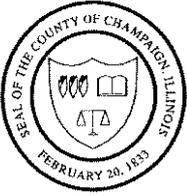
COUNTY BOARD OF HEALTH - FY2007 BUDGET PROJECTION REPORT

SIGNIFICANT REVENUE LINE ITEMS/CATEGORIES	FY2006 YTD 5/31/2006	FY2006 ACTUAL 11/30/2006	YTD as % of ACTUAL	FY2007 BUDGET 12/1/2006	FY2007 YTD 5/31/2007	Projected % to be Received	Projected \$\$ to be Received	\$ Difference to Original Budget
Property Taxes - County Board of Health	\$67,297	\$298,109		\$318,446	\$50,136	97.78%	\$311,369	-\$7,077
Property Taxes - CUPHD	\$97,890	\$432,626		\$463,208	\$72,927	101.55%	\$470,376	\$7,168
Food Protection Permits	\$47,835	\$124,760	38.34%	\$112,000	\$23,310	100.00%	\$112,000	\$0
Private Sewage Permits	\$11,000	\$39,700	27.71%	\$43,000	\$9,650	80.99%	\$34,828	-\$8,172
Well Water Permits	\$4,200	\$15,000	28.00%	\$19,500	\$3,200	76.92%	\$15,000	-\$4,500
HHS/CDC Invedstigation Technical Assistance	\$28,424	\$100,645	28.24%	\$67,951	\$21,215	110.55%	\$75,118	\$7,167
EPA Public Water System Supervision	\$0	\$0	0.00%	\$1,550	\$850	0.00%	\$850	-\$700
IDPH Health Protection Grant	\$56,527	\$126,512	44.68%	\$125,336	\$55,418	100.00%	\$125,336	\$0
IDPH Vector Control	\$1,000	\$1,000	100.00%	\$0	\$8,538	0.00%	\$8,538	\$8,538
IDPH Tobacco Free Community	\$1,568	\$24,475	6.41%	\$26,116	\$1,542	100.00%	\$26,116	\$0
IDPH Bioterror/Health Alert	\$0	\$0	0.00%	\$25,000	\$0	100.00%	\$25,000	\$0
Clinic Nursing	\$0	\$0	0.00%	\$0	\$0	0.00%	\$0	\$0
Investment Interest	\$10,137	\$23,077	43.93%	\$28,500	\$11,702	93.47%	\$26,640	-\$1,860
Miscellaneous Revenue	\$0	\$0	0.00%	\$0	\$25	100.00%	\$25	\$25
From General Corporate Fund	\$0	\$145,500	0.00%	\$145,500	\$0	100.00%	\$145,500	\$0
TOTALS	\$325,878	\$1,331,403		\$1,376,107	\$258,511	100.04%	\$1,376,695	\$588
Total w/out CUPHD Property Tax Revenue	\$227,988	\$898,777		\$912,899	\$185,584		\$906,319	-\$6,580

SIGNIFICANT EXPENDITURE LINE ITEMS/CATEGORIES	FY2006 YTD 5/31/2006	FY2006 ACTUAL 11/30/2006	YTD as % of ACTUAL	FY2007 BUDGET 12/1/2006	FY2007 YTD 5/31/2007	Projected % to be Spent	Projected \$\$ to be Spent	\$ Difference to Original Budget
Supplies	\$0	\$370	0.00%	\$0	\$0	100.00%	\$0	\$0
Professional Services Contract	\$234,676	\$659,044	35.61%	\$768,660	\$224,145	100.00%	\$768,660	\$0
Automobile Maintenance	\$0	\$55	0.00%	\$1,369	\$1,333	100.00%	\$1,369	\$0
Other Services by Contract	\$0	\$0	0.00%	\$10,000	\$75	100.00%	\$10,000	\$0
CUPHD Property Tax Distribution	\$303	\$434,594		\$463,208	\$134	101.55%	\$470,376	\$7,168
Home Nursing	\$27,893	\$79,904		\$40,500	\$19,718	100.00%	\$40,500	\$0
Child Dental Access	\$61,348	\$105,168		\$105,000	\$61,348	100.00%	\$105,000	\$0
TOTALS	\$324,221	\$1,279,135		\$1,388,737	\$306,752	100.52%	\$1,395,905	\$7,168
Total w/out CUPHD Property Tax Payment	\$323,917	\$844,541		\$925,529	\$306,618		\$925,529	

COUNTY BOARD OF HEALTH - FY2007 BUDGET PROJECTION REPORT

FUND BALANCE 11/30/06 (<i>unaudited</i>)	\$542,992	
BEGINNING FUND BALANCE % OF BUDGET	39.10%	
	<i>Budgeted</i>	<i>Projected</i>
ADD FY2007 REVENUE	\$1,376,107	\$1,376,695
LESS FY2007 EXPENDITURE	\$1,388,737	\$1,395,905
Revenue to Expenditure Difference	-\$12,630	-\$19,210
FUND BALANCE PROJECTION - 11/30/07	\$530,362	\$523,782
% of FY2007 Budget	38.19%	37.52%



CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 EAST WASHINGTON
URBANA, IL 61802
(217) 384-3776
(217) 384-3765 – PHYSICAL PLANT
(217) 384-3896 – FAX
(217) 384-3864 – TDD
Website: www.co.champaign.il.us

ADMINISTRATIVE SUPPORT
DATA PROCESSING
MICROGRAPHICS
PURCHASING
PHYSICAL PLANT
SALARY ADMINISTRATION

MEMORANDUM

TO: Pius Weibel, Chair of the County Board,
Brendan McGinty, Chair of the Finance Committee
Kim Winston, Chair – County Board of Health

FROM: Deb Busey, County Administrator of Finance & HR Management *Deb*

DATE: June 4, 2006

RE: DISTRIBUTION OF PUBIC HEALTH LEVY for FY2007

As you are all aware, the Public Health Levy collected by the County each year is to be distributed to two entities – the C-U Public Health District and the County Board of Health. The determination of the amount of the levy to be received by each entity is dependent on the split of the EAV between the incorporated areas of the Cities of Champaign and Urbana, and the EAV of all areas outside Champaign-Urbana.

At the time the County prepared the FY2007 budget, it was anticipated that the total levy would be \$781,654 and that the split of the EAV for the property taxes collected for 2006 would be 59.26% within the Champaign-Urbana Public Health District and 40.74% in the areas of the County outside of the CUPHD. The County's budget for Public Health was projected according to that breakdown. It has now been confirmed by the County Clerk, that the certified levy is \$781,745.30 and that the actual distribution of the EAV for the 2006 property taxes (collected in 2007) is 60.17% within the Champaign-Urbana Public Health District and 39.83% in the areas of the County outside the CUPHD.

This change in the breakdown will create a change in revenue distribution in FY2007 in the County Board of Health budget. The revenue from the property tax collected on behalf of C-U Public Health District will be increased from \$463,208 to \$470,376.15. The revenue from the property tax collected on behalf of the County Board of Health will be decreased from \$318,446 to \$311,369.15.

	FY2007 Original Budget	Adjusted Certified Extension	<i>Difference</i>
Total Levy	\$781,694.00	\$781,745.30	\$51.30
County Board of Health	\$318,446.00	\$311,369.15	-\$7,076.85
CUPHD	\$463,208.00	\$470,376.15	\$7,168.15

These changes do not require any change to the FY2007 County Board of Health Budget, unless the Board of Health requests additional changes based on this information. I am writing simply to inform all interested parties of the status of the distribution of the Public Health Levy that will be made over the next several months.

If you have any questions or concerns regarding this matter, please feel free to contact me. Thank you for your consideration.

xc: Dan Welch, Treasurer
Tony Fabri, Auditor
Carol Wadleigh, Chief Deputy Auditor

Invoice Number:	0705
Date of Invoice:	May 31, 2007
Billing Period:	April-07

To:
Champaign County Public Health Department
Att'n: Evelyn Boatz
1776 East Washington Street
Urbana, Illinois 61801

For the Following Expenses:

533.07 Professional Services	\$	50,192.81
533.07 Professional Services - Bio-T Grant		3,578.00
533.07 Professional Services - Pan Flu Grant		0.00
533.07 Professional Services - TFC Grant		1,312.90
534.79 Home Nursing		4,929.46
		<hr/>
Total Amount Due to CUPHD per Contract	\$	<u>60,013.17</u>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.


Teresa Stearn, Dir. of Finance, 4-1-06
Authorized Agency Official Interim

Champaign-Urbana Public Health District

**County Contract Billing
April 30, 2007**

10 - Chronic Disease

Billing: 4,043.80
A1: 3,378.59
A2: 487.44
A4: 177.77

20 - Infectious Disease

Billing: 4,779.76
A1: 4,280.89
A2: 378.34
A4: 120.53

30-Nursing

Billing: 4,929.46
A1: 4,227.34
A2: 554.86
A4: 147.26

40 - Family Health

Billing: 2,025.13
A1: 1,786.11
A2: 168.68
A4: 70.34

70 - Env. Health

Billing: 26,402.82
A1: 18,754.65
A2: 2,471.97
A4: 5,176.20

90 - Administration

Billing: 12,941.30
A1: 12,671.28
A2: 199.82
A4: 70.20

1215 - Bio-Terrorism Grant

Apr 07 Billing
Billing: 3,578.00
A1: 3,115.68
A2: 354.05
A4: 108.27

1245-Pan Flu Grant

Apr 07 Billing
Billing: -
A1: -
A2: -
A4: -

1420-TFC Grant

Apr 07 Billing
Billing: 1,312.90
A1: 1,136.87
A2: 138.24
A4: 37.79

Total Professional Services	55,122.27
Total County Grants	4,890.90
TOTAL AMOUNT DUE	60,013.17

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Page 1 of 1

FEIN: 37-6006911

Grant Number: 77181009

Agency Name: Champaign County Public Health Department

Program: Public Health Preparedness and

Date Submitted: 5/31/2007

Emergency Response for Bioterrorism

Billing Period: 04/01/07-04/30/07

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
Salary & Wages				
Dwyer, John - 42% of 100%	Emergency Response Planner	April-07	1,027.44	
Vaid, Awais - 42% of 50%	Epidemiologist	April-07	770.73	
Thompson, Rachael - 42% of 50%	CD Investigator	April-07	580.37	
Total for Salary & Wages			2,378.54	
Fringe Benefits				
FICA/Medicare	Fringe Benefit	April-07	181.96	
IMRF	Fringe Benefit	April-07	172.09	
Unemployment Tax	Fringe Benefit	April-07	69.93	
Workers' Compensation	Fringe Benefit	April-07	38.34	
Health Insurance	Fringe Benefit	April-07	280.77	
Life Insurance	Fringe Benefit	April-07	2.91	
Total Fringe Benefits			746.00	
Supplies				
Total Supplies			0.00	
Travel (In-State)				
John Dwyer	Mileage	April-07	11.64	
Rachella Thompson	Mileage	April-07	102.82	
Rachella Thompson	Per Diem	April-07	19.00	
Total Travel (In-State)			133.46	
Contractual Costs				
Motorola	Radio use fee	April-07	320.00	
Total Contractual Costs			320.00	
Grand Total (Page Total)			3,578.00	

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchases

Authorized Agency Official

Debra Sturm, Dir. of Finance
Date 5/30/07
John Kim

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
REIMBURSEMENT CERTIFICATION FORM

FEIN: 37-6006910
Agency Name: Champaign County Public Health Department
Date Submitted: May 25, 2007

Contract #: 73281009
Program: Tobacco Free Communities
Billing Period: April-07

NAME/VENDOR	TITLE/PURPOSE	PERIOD/DATE INCURRED	AMOUNT CLAIMED FROM IDPH
PERSONAL SERVICES			
Nikki Hillier	Health Educator	April-07	656.32
Jennifer Jackson	Health Educator	April-07	266.65
Total Personal Services			922.97
FRINGE BENEFITS			
FICA	FICA	April-07	70.61
IMRF	IMRF	April-07	67.63
Health Insurance	Health Insurance	April-07	159.58
Life Insurance	Life Insurance	April-07	1.00
Workmen's Compensation	Workmen's Compensation	April-07	4.33
Illinois Unemployment Compensation	Illinois Unemployment Comp.	April-07	33.46
Total Fringe Benefits			336.61
Total Personal Services & Fringe Benefits			1,259.58
CONTRACTUAL SERVICES			
Canon Financial Services, Inc.	Printing	April-07	22.38
R. K. Dixon Co.	Printing	April-07	17.25
Total Contractual Services			39.63
SUPPLIES			
Rogards	Office Supplies	April-07	13.69
Total Supplies			13.69
Billing Total			1,312.90

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Debrae Dumm
Authorized Agency Official *Interim* 5/30/07

Invoice Number:	0706
Date of Invoice:	June 19, 2007
Billing Period:	May-07

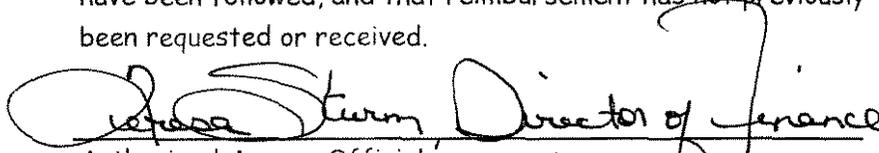
To:
Champaign County Public Health Department
Att'n: Evelyn Boatz
1776 East Washington Street
Urbana, Illinois 61801

For the Following Expenses:

533.07 Professional Services	\$	50,192.81
533.07 Professional Services - Bio-T Grant		4,016.31
533.07 Professional Services - Pan Flu Grant		0.00
533.07 Professional Services - TFC Grant		2,877.46
534.79 Home Nursing		4,929.46
		<hr/>
Total Amount Due to CUPHD per Contract	\$	<u>62,016.04</u>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.


Authorized Agency Official, Director of Finance
Denise Sturm

Champaign-Urbana Public Health District

**County Contract Billing
May 31, 2007**

10 - Chronic Disease

Billing: 4,043.80
A1: 3,378.59
A2: 487.44
A4: 177.77

20 - Infectious Disease

Billing: 4,779.76
A1: 4,280.89
A2: 378.34
A4: 120.53

30-Nursing

Billing: 4,929.46
A1: 4,227.34
A2: 554.86
A4: 147.26

40 - Family Health

Billing: 2,025.13
A1: 1,786.11
A2: 168.68
A4: 70.34

70 - Env. Health

Billing: 26,402.82
A1: 18,754.65
A2: 2,471.97
A4: 5,176.20

90 - Administration

Billing: 12,941.30
A1: 12,671.28
A2: 199.82
A4: 70.20

1215 - Bio-Terrorism Grant

May 07 Billing
Billing: 4,016.31
A1: 3,562.19
A2: 364.39
A4: 89.73

1245-Pan Flu Grant

May 07 Billing
Billing: -
A1: -
A2: -
A4: -

1420-TFC Grant

May 07 Billing
Billing: 2,877.46
A1: 2,672.70
A2: 178.66
A4: 26.10

Total Professional Services	55,122.27
Total County Grants	6,893.77
TOTAL AMOUNT DUE	62,016.04

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Page 1 of 1

FEIN: 37-6006911
Agency Name: Champaign County Public Health Department
Date Submitted: 6/21/2007

Grant Number: 77181009
Program: Public Health Preparedness and
Emergency Response for Bioterrorism
Billing Period: 05/01/07-05/31/07

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
Salary & Wages				
Dwyer, John - 42% of 100%	Emergency Response Planner	May-07	1,102.13	
Vaid, Awais - 42% of 50%	Epidemiologist	May-07	783.24	
Thompson, Rachael - 42% of 50%	CD Investigator	May-07	589.79	
Total for Salary & Wages			2,475.16	
Fringe Benefits				
FICA/Medicare	Fringe Benefit	May-07	189.35	
IMRF	Fringe Benefit	May-07	175.04	
Unemployment Tax	Fringe Benefit	May-07	48.96	
Workers' Compensation	Fringe Benefit	May-07	40.77	
Health Insurance	Fringe Benefit	May-07	637.35	
Life Insurance	Fringe Benefit	May-07	2.91	
Total Fringe Benefits			1,094.38	
Supplies				
Total Supplies			0.00	
Travel (In-State)				
John Dwyer	Mileage	May-07	256.32	
Rachella Thompson	Mileage	May-07	16.98	
Garry Bird	Mileage	May-07	33.47	
Immun & Comm Disease Conference	Conference Registration	May-07	60.00	
Total Travel (In-State)			366.77	
Contractual Costs				
Motorola	Radio use fee	May-07	80.00	
Total Contractual Costs			80.00	
Grand Total (Page Total)			4,016.31	

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchase

Authorized Agency Official *Debra Stuenkel* *Director of Finance* *6-19-07*
Interim Date

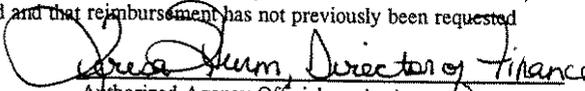
ILLINOIS DEPARTMENT OF PUBLIC HEALTH
REIMBURSEMENT CERTIFICATION FORM

FEIN: 37-6006910
Agency Name: Champaign County Public Health Department
Date Submitted: June 20, 2007

Contract #: 73281009
Program: Tobacco Free
Communities
Billing Period: May-07

NAME/VENDOR	TITLE/PURPOSE	PERIOD/DATE INCURRED	AMOUNT CLAIMED FROM IDPH
PERSONAL SERVICES			
Nikki Hillier	Health Educator	May-07	666.98
Jennifer Jackson	Health Educator	May-07	270.98
Kari Schweighart	Health Educator	May-07	243.11
Total Personal Services			1,181.07
FRINGE BENEFITS			
FICA	FICA	May-07	90.35
IMRF	IMRF	May-07	88.31
Health Insurance	Health Insurance	May-07	212.77
Life Insurance	Life Insurance	May-07	1.31
Workmen's Compensation	Workmen's Compensation	May-07	5.54
Illinois Unemployment Compensation	Illinois Unemployment Comp.	May-07	20.56
Total Fringe Benefits			418.84
Total Personal Services & Fringe Benefits			1,599.91
CONTRACTUAL SERVICES			
Carole Chapmen	TNT Stipend	May-07	50.00
Linda Meachum	TNT Stipend	May-07	50.00
Mrs. Porter	TNT Stipend	May-07	50.00
Mrs. Vermillion	TNT Stipend	May-07	50.00
Terry Grodsky	TNT Stipend	May-07	200.00
Joan Jordan	TNT Stipend	May-07	50.00
USPS/Pitney Bowes	Postage & Delivery	May-07	2.44
Pitney Bowes	Postage & Delivery	May-07	0.18
Nikki Hillier	Postage & Delivery	May-07	6.26
Dean's Superior Blueprint, Inc	Printing	May-07	135.00
R. K. Dixon Co.	Photocopying	May-07	2.29
Canon Financial Services, Inc.	Photocopying	May-07	3.36
IL Maternal & Child Health Coalition	Training	May-07	80.00
Total Contractual Services			679.53
SUPPLIES			
Nikki Hillier	Office Supplies	May-07	33.73
Total Supplies			33.73
TRAVEL			
Brandon Meline	Lodging	May-07	129.00
Nikki Hillier	Meal	May-07	3.15
Jennifer Jackson	Mileage	May-07	305.07
Nikki Hillier	Mileage	May-07	67.90
Kari Schweighart	Mileage	May-07	59.17
Total Travel			564.29
Billing Total			2,877.46

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.


 Bruce Sum, Director of Finance
 Authorized Agency Official
 Interim.

Model for Alternative Public Health Services for Senior Wellness

This model for a senior wellness program would provide quality assessment, information, intervention and linkage of health-related services to county residents served by the county's public health department. CCRPC proposes to add an additional staff person to our existing Senior Services team to focus on positive outcomes for consumers served by the public health department. The model will combine existing community resources, a new volunteer and paid network of assessment and support staff and a planning/management component to form a comprehensive system of care to maintain safety and independence of seniors in their homes.

* These activities have an existing structure in place through CCRPC-Senior Services. Items not starred do not have an existing structure in place at CCRPC, however some elements are available either through CCRPC or other community agencies that can be leveraged to meet program goals.

* Analysis of senior population characteristics/define target sub-population(s)

Number/location of seniors

Demographics (age, race, gender, lives alone, language, ethnicity, health status, income/assets, etc.)

Data collected/analyzed by CCRPC staff (I will bring additional information on this to meeting)

Target populations/desired outcomes defined by board (i.e., number/type of consumers served, consumer outcomes, program outcomes)

* Assessment/Intervention (township supervisors, parish nurses, etc.; coordinated by CCRPC case managers)

Consumer Engagement (mobilize resources/strengths; identify gaps/needs)

Family Engagement (mobilize resources/strengths; identify gaps/needs)

Community Engagement (inventory community resources; facilitate information & referral; advocate; gaps/needs)

Individual assessments done on as-referred basis by CCRPC

Referral to case manager (CMU, MHC, PC, FS, etc.) or case management by CCRPC

Resources identified in *Senior Guide*/I&R materials updated by CCRPC

Assistance w/obtaining public benefits by CCRPC

* Feedback/Evaluation

Follow-up call/visit by CCRPC

Stakeholder satisfaction surveys

Best practices (effectiveness; efficiency)

Annual review of assessment summary information regarding identified resources/gaps by board

Annual review/analysis of satisfaction surveys from consumers, families, referral agencies by board

Annual cost/benefit analysis by board

Annual search for best practices by board

CCRPC Proposal

New Service Development

Volunteer/neighborhood mobilization (Neighborhood Watch, Friends of Senior Services, C-U Volunteer, Empty Tomb, CC Health Care Consumers, etc.)

System/agency building (CCRPC, CCMHB, UW, etc.)

Leverage public health funding (CCMHB, ECIAAA, Frances Nelson, etc.)

New funding/grantwriting (CCRPC, etc.)

An estimated budget of \$50,000 will cover staff time for 1 FTE, fringe benefits, mileage reimbursement, and supplies for planning and start-up of the model proposed, using a combination of paid and volunteer resources to extend a net of services that will cover the department's service area and link with CUPHD as needed. CCRPC will contribute in-kind management and office support. Evaluation at 6 months and one year will guide continuing progress toward goals established by the board.

Potential issues:

Key emphasis on best access to/use of existing resources to obtain maximum benefits for consumers

Ongoing challenges with recruiting, training, supervising, retaining volunteers

Defining the roles for volunteers/paid personnel

Outlining the county's public health department's role to provide direct services to meet identified needs

Need to establish limits on caseloads/caps per consumer

Confidentiality of consumer issues

Liability issues



CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 EAST WASHINGTON
URBANA, IL 61802
(217) 384-3776
(217) 384-3765 – PHYSICAL PLANT
(217) 384-3896 – FAX
(217) 384-3864 – TDD
Website: www.co.champaign.il.us

ADMINISTRATIVE SUPPORT
DATA PROCESSING
MICROGRAPHICS
PURCHASING
PHYSICAL PLANT
SALARY ADMINISTRATION

MEMORANDUM

TO: COUNTY BOARD OF HEALTH

FROM: Deb Busey, County Administrator of Finance & HR Management *Deb*

DATE: June 19, 2007

RE: Clerical Services for County Board of Health

In you FY2007 budget, you appropriated \$10,000 for clerical services, and we agreed those services would be provided by Champaign County Administrative Services staff. At this time, we are experiencing some difficulty in providing the best level of support to you as a Board. To that end, I propose that we document exactly what the Board of Health needs in terms of clerical support, and agree as to the best method for delivering that to you.

Attached to this Memorandum is a document I have prepared to outline the scope of work for your secretary, as I understand it. Please feel free to add to or change this scope of work document to meet your needs. Also attached is a proposed schedule, which provides a time frame for the clerical support services you require. Again, this is simply a recommendation based upon observation of your structure and needs and can certainly be amended or adjusted by you. I am requesting your approval of a proposed schedule to enhance our ability to find a secretary who can be available to you for all of your required meetings.

I initially thought Administrative Services would be able to absorb the work for your clerical services, and simply bill the Board of Health budget for those services. However, at this time, it appears our secretaries have too many demands from the required support to the County Board and its committees to continue providing clerical support to the Board of Health as well. I would like to propose that the Board of Health actually hire a secretary to serve as your employee to provide clerical support services to you. At this time, it appears this would be a job that would encompass approximately 30-40 hours per month, if you concur with the scope of work and tentative monthly schedule as attached to this Memo.

Using the annual \$10,000 figure you have budgeted this year as a target for budgeting for this service, I would like to request this appropriation be moved to a personnel line item, and that you advertise for a

part-time secretary for the Board of Health. I will be happy to assist you in the advertising and hiring process, if that would be of benefit to you.

REQUESTED ACTION:

The County Board of Health moves:

A County Board Transfer moving \$10,000 from Line Item 533.52 – Other Services by Contract to Line Item 511.04 – Part Time Employees, and any related fringe benefit lines be approved;

Scope of Work for Board of Health Secretary is approved as the guideline for hiring and selecting a part-time secretary;

The proposed monthly calendar, setting up guidelines for a regular schedule for the County Board of Health meetings is approved;

Request the County Administrator of Finance and HR Management work with the President of the County Board of Health to hire a secretary for the County Board of Health.

Thank you for your consideration of this recommendation. I will be at your meeting on June 26th, and will be happy to further discuss this issue with you at that time.

Encl.

Scope of Work for Board of Health Secretary

Regular Monthly Board Meeting -

1. Meeting with Board President, week before regular monthly meeting, to review and confirm agenda – estimated time 0.5 hours
2. Prepare, copy, post to the web, and mail agenda – estimated time 2 hours
3. Attend Board of Health Meeting – 2 hours (average)
4. Prepare documents for mailing, as requested by Board of Health – 2 hours
5. Meet with Board President, within 2 days after Board Meeting, to review and execute communications, documents for signature, etc. – 0.5 hours
6. Prepare minutes from Board of Health Meeting – 2 hours
7. Prepare monthly calendar, reserve appropriate meetings rooms, and post minutes and calendar to the web site – 0.5 hours

Board Study Sessions and Committee Sessions –

Anticipated to be similar as for Board of Health Meetings as indicated above.
Based on estimates – one regular monthly meeting, one committee meeting, and one Board Study Session would result in approximately 30 hours/month.

ADDITIONAL ASSUMPTIONS

Board of Health Meeting – 4th Tuesday following the 1st Monday – 6pm

Board of Health Study Sessions – 2nd Tuesday following the 1st Monday – 6pm

Board of Health Committee Meetings – 2nd and 3rd Thursdays following 1st Monday –
5pm or 6pm

If there is no need for a study session, the study session date could be used for a committee meeting instead.

Proposed Monthly Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6	7 5pm-Pres/Sec Review for Study Session and/or Committee Agendas	8	9	10	11
12	13	14 6pm – BOH Study Session	15	16 5 or 6pm – BOH Committee Meetings	17	18 Weekend – Study Session or Committee Minutes preparation
19	20	21 5pm-Pres/Sec Review for Agenda Prep	22	23 5 or 6pm – BOH Committee Meetings	24	25
26	27	28 6pm-BOH Reg Monthly Meeting	29	30 5pm-Pres/Sec Meeting for BOH Action Items/ Communications	31	Weekend – BOH Reg Meeting Minutes Preparation