
CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center
1776 E. Washington
Urbana, IL 61802

Phone: (217) 384-3772
Fax: (217) 384-3896

Champaign County Board of Health

Tuesday, March 25, 2008

6:00 p.m.

Brookens Administrative Center, 1776 E. Washington
Meeting Room 2
Urbana, Illinois

AGENDA

<u>ITEM</u>		<u>PAGE NO.</u>
A.	Call to Order	
B.	Roll Call	
C.	Approval of Agenda/Addendum	
D.	Approval of Minutes	
	1. February 26, 2008 Regular Meeting	1-8
E.	Public Participation on Agenda Items Only	
F.	Monthly Reports	
	1. CUPHD Monthly Reports	
	2. CIDES Monthly Report – February 2008	
	3. CIDES Financial Statements for 2007	
G.	Correspondence and Communications	
H.	Treasurer's Report	
	1. Invoice Submitted by CUPHD for January 2008	9-16
	2. Budget Amendment for IDPH General Revenue Grant – <i>Provided for Information Only</i>	17-18
I.	Regional Planning Commission First Quarter Report for Senior Services	19-33
J.	Mental Health Board Joint Funding Proposals	
K.	Issues Regarding CUPHD	
	1. Report from Acting CUPHD Administrator	

L. Other Business

1. Proposals for Consideration in Spending IDPH Grant Funds
 - a. Champaign County Fire Chiefs Association 34-35
 - b. CIDES 36-37
2. Status Report as to Ongoing Items to be Addressed at Future Board of Health Meetings

M. Public Participation on Non-Agenda Items Only

N. Adjournment

1 CHAMPAIGN COUNTY BOARD OF HEALTH

2
3 Monthly Meeting

4 Tuesday, February 26, 2008, 6:00 p.m.

5
6 Call to Order & Roll Call

7
8 The Board of Health held its monthly meeting on February 26, 2008 in Meeting Room 2
9 at the Brookens Administrative Center, 1776 East Washington, Urbana. The session was called
10 to order at 6:07 p.m. by Julian Rappaport. Prashanth Gowda, Stan James, Thomas O'Rourke,
11 John Peterson, Julian Rappaport, and Betty Segal were present at the time of roll call. The staff
12 members present were Kat Bork (Board of Health Secretary) and Susan McGrath (Senior
13 Assistant State's Attorney). Others present were Nancy Greenwalt (CIDES Executive Director),
14 Brandon Meline (CUPHD Director of Maternal and Child Health), Jim Roberts (CUPHD
15 Director of Environmental Health), C. Pius Weibel (County Board Chair), and various members
16 of the public. Nezar Kassem and Susan Maurer had previously informed the Secretary that they
17 would not attend the meeting. Carrie Storrs phoned before the meeting to explain she was
18 unable to make it due to drifting snow blocking the country roads.
19

20 Approval of Agenda/Addendum

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22 MOTION by James to approve the agenda and addendum; seconded by Gowda. Motion
23 carried.

24
25 Approval of Minutes

26
27 MOTION by Peterson to approve the October 16, 2007 study session minutes,
28 November 27, 2007 regular meeting minutes, and January 15, 2008 study session minutes;
29 seconded by James.
30

31 James requested the word "easier" be corrected to "easy" in line 250 of the November
32 minutes. Rappaport thought the names in line 180 of the January minutes should read "Peterson"
33 then "Moore". Bork explained the name "Peterson" should be changed to "Tracy" because Peter
34 Tracy was answering Thom Moore's question at the meeting. The Board concurred these
35 changes would be incorporated into the minutes.
36

37 Motion carried as amended.

38
39 Public Participation on Agenda Items Only

40
41 There was no public participation.
42

43 Monthly Reports

44
45 MOTION by James to receive and place on file the CUPHD monthly reports for
46 November 2007, December 2007, and January 2008; seconded by Peterson.
47

48 It was noted that the CUPHD monthly reports are now available on the CUPHD website.
49 Rappaport asked about the statistics for the mobile unit in January because they did not add up.
50 Meline and Roberts could not answer but would hopefully clarify this in the future. Meline
51 hypothesized the numbers might reflect contact the mobile unit had with clients though no
52 services were provided. James added that Julie Pryde mentioned that type of situation when the
53 Board toured the mobile unit. The CUPHD staff records all contact whether or not services are
54 provided. Rappaport requested the report include more narrative with the numbers to be able to
55 more fully understand the report. Meline offered to pass the request to Deb Pruitt, who is in
56 charge of that division.

57

58 **Motion carried.**

59

60 **MOTION** by James to receive and place on file the CIDES monthly report for November
61 2007, December 2007, and January 2008; seconded by Segal. **Motion carried.**

62

63 **Correspondence and Communications**

64

65 Rappaport said Julie Pryde sent an email to clear up some misinformation provided by
66 Claudia Lenhoff at the October 17, 2007 Board of Health study session concerning the CUPHD
67 dental program. Pryde had requested her email be placed on file.

68

69 **MOTION** by James to include Julie Pryde's January 22, 2008 email in the official
70 record; seconded by Peterson. **Motion carried.**

71

72 **Treasurer's Report**

73 **Invoice submitted by CUPHD for December 2007**

74

75 Peterson stated this invoice starts the fiscal year and appears to be on target with respect
76 to the other budget documents and receipts. There is no community health service line item any
77 longer. The January 2008 invoice has not been received as of this meeting. Peterson said he
78 learned tonight that the CUPHD Finance Director resigned and asked when this occurred.
79 Meline and Roberts said the Finance Director resigned at the end of January to enter the MBA
80 program at the University of Illinois. Meline added that the CUPHD Administrator's Report
81 from Pryde included the information about the new Finance Director being hired.

82

83 **MOTION** by Peterson to approve the CUPHD invoice for December 2007; seconded by
84 O'Rourke. **Motion carried.**

85

86 Peterson asked if the Board was required to have the huge number of water
87 reimbursement pages and state forms. Bork explained she spoke to CUPHD about the invoice
88 and learned their intent was to provide the Board of Health with all the information in an effort to
89 keep the Board fully informed. The Board had requested more detailed information in the
90 invoice. If the Board does not wish to receive certain attachments, CUPHD was willing to forgo
91 them. McGrath said the contract does state that CUPHD is required to present an invoice and the
92 Board will pay the contract in twelve equal installments. The first two pages, consisting of the
93 date of the invoice, the billing period, and the contract billing should be sufficient for the

94 invoice. Rappaport suggested that Peterson, as the Board of Health Treasurer, communicate
95 what he wants to the CUPHD Finance Department and the Board would agree to rely on
96 Peterson's eagle eye. Peterson said he would rely on Deb Busey. The Board agreed. Peterson
97 said he would speak to CUPHD about the invoice.
98

99 **Issues Regarding CUPHD**

100 **Report from Acting CUPHD Administrator**

101
102 The report from the Acting Administrator was brought and distributed by Weibel as Julie
103 Pryde was out of town for a conference. CUPHD was represented by Meline and Roberts.
104 Rappaport asked if either had any comments. Meline said the report included updates and notice
105 of the hiring of a new Director of Finance, Andrea Wallace, who will start work in early March.
106 CUPHD's Neil Street facility was sold in February for \$750,000. Weibel indicated the facility
107 will be used for more than an antique store. James inquired about the appraised value of the
108 building. Weibel guessed the Neil Street building had been appraised at \$900,000, but it needed
109 a new roof. Meline noted that Pryde's report includes information about her meetings with the
110 City of Champaign, Tom Berns, and the Champaign-Urbana Mass Transit District on getting bus
111 service to the Kenyon Road facility. The short-term goal of installing a sidewalk, crosswalk
112 light, and bus shelters will require investment on all the involved entities. Roberts pointed out
113 the new initiative on the front page of the report about a partnership with Winston-Salem to take
114 part in a pilot Workshop on Community Partnerships for Pandemic Influenza Planning. Weibel
115 asked if a representative from the Board of Health should attend that workshop. Roberts said if
116 there was any interest, they could represent local government. Both Weibel and McGrath would
117 be in attendance. Roberts thought there might be room in the CUPHD transportation for one
118 more person for the two days in Indianapolis.
119

120 Gowda asked if it has been determined how much will be requested in the grant. Roberts
121 said this grant was offered to CUPHD to make an application; they have no idea on the available
122 amount at this time. The idea is to find where there are gaps and use the money to fill the gaps.
123 Gowda asked if they are coordinating with local hospitals. Roberts said both hospitals, the
124 University of Illinois, local emergency services, and fire departments are involved. Rappaport
125 asked if Gowda would like to go to Indianapolis. Gowda said he would have to check his
126 schedule.
127

128 James asked about Tom Berns providing engineering service on the CUPHD project to
129 get ready for bus service at Kenyon Road when he was recently appointed to the Champaign-
130 Urbana Mass Transit District Board. McGrath explained, as was discussed at the County Board
131 meeting, the rules would allow Berns to serve on the board but abstain from voting on issues
132 where his firm had provided professional services. O'Rourke stated that he appreciated Pryde's
133 report and urged her to continue doing what she is doing. He expressed that she is doing an
134 excellent job, an opinion shared by the Board. Rappaport added that Pryde's habit of including
135 the Board of Health on her emails about public health issues is good because it provides pertinent
136 information and the non-pertinent emails can be easily deleted.
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140 Proposal to Enhance Comprehensive Sexuality Education

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The materials for the proposal had been previously emailed to the Board. Rappaport stated the proposal offered one way to use some of the IDPH grant money. The proposal was to assist in preventing the spread of sexually transmitted diseases and teenage pregnancy by providing funding to purchase the Family Life and Sexual Health curriculum and the Our Whole Lives Curriculum for schools.

MOTION by James to approve the use of \$15,000 of the one-time IDPH Grant to fund proposal to enhance comprehensive sexuality education; seconded by Gowda.

James noted a lot of schools have lost their sexuality education funding. This proposal would truly be a one-time use of the grant money. James felt the proposal could help schools do some good for students, based on what he has read. Pryde's recommendation was enthusiastic and James was all for it because education is a good tool for public health. He added the time to spend this grant money is running short and a decision needs to be reached. Rappaport said the request is for \$15,000, so there is still grant money left over to use on another initiatives.

Segal stated that she had problems with the proposal. She spoke with Pryde, who told her the materials would be given to teachers. Segal thought the teachers would pick and choose the materials being used and not receive any training. She said sexuality education is a touchy subject and the schools might not want this backdoor approach. James claimed that when he spoke to Pryde, she informed him the schools' funding for this education had been cut so the teachers were very much in need of materials to use in class. He compared it to how the schools used to provide training to the trades fields, but that has been greatly reduced and the negative consequences are being felt. He supported funding the proposal. Segal wanted concrete data on what the results would be. Rappaport said the proposal states the curriculum has been widely used by schools districts throughout the United States and Canada and scored the highest on an in-depth look at curricula by the Illinois Campaign for Responsible Sex Education. Segal said she could not find anything like that on the Internet. She is in favor of comprehensive sex education in Illinois, but does not think the Board of Health should be doing it.

Rappaport said it is important to have a curriculum that is coherent and organized with trained teachers for the students. The first criterion is to show this has a significant group effect. Rappaport stated the Board has to confront the real world as a public health entity to maximize the possibility for the public to benefit. If the same standards for proof as are used in a research journal are applied to the Board's decisions, they would never pass anything. This proposal has a better chance at positively affecting kids than the school being without a curriculum. Segal agreed something is better than nothing, but wondered if this Board is the one to do it. She noted the health teachers are not the people in charge even if they receive the curriculum material. O'Rourke said it would go through the school boards. It is not a guaranteed success but a way to help the teachers. James said the money will be dispersed to every school in the County so at least the educational tools can be there. Rappaport noted the proposal's budget includes \$2,400 for training the teachers.

185 The Board discussed when the IDPH money must be spent. James offered to speak with
186 John Jay, a County Board member and local Fire Chief, about putting forth a request for
187 defibrillator equipment to the Board. The Board voiced its support of that approach. McGrath
188 said that Pryde had previously suggested using the IDPH money to purchase equipment dictated
189 by the outcome of the bioterrorism workshop or updating the County vehicle used by CUPHD.
190 Rappaport asked why the Board of Health pays CUPHD for mileage when the Board owns a
191 vehicle used by CUPHD. McGrath said the vehicle is just used by the Environmental Health
192 Division and the mileage costs might be for other purposes. Rappaport was concerned the Board
193 of Health was paying for mileage on a vehicle it owned, essentially renting its own vehicle.
194 Rappaport expressed he was hesitant in putting the money into a vehicle, but he was not opposed
195 to it if it seems like a good thing. Peterson said there may be some public buildings that could
196 use defibrillators. James said he was thinking about the smaller rural police or fire departments
197 that do not have the funds to buy equipment that could be used. Segal asked what a portable
198 defibrillator cost. Peterson said the cost was about \$3,500.

199

200 **Motion carried.**

201

202 Meline indicated there is a possibility the IDPH grant would become an annual grant
203 because it is currently in the General Assembly budget.

204

205 Recommendations Regarding One-Time Revenue from IDPH

206

207 Discussion over this issue is documented above.

208

209 **Other Business**

210 Report from Board Study Session January 15, 2008

211

212 Rappaport stated the report on the January 15, 2008 study session is documented in the
213 very complete minutes provided in the agenda packet.

214

215 Illinois Public Health Association Annual Conference on April 8-10, 2008 in Springfield

216

217 McGrath was unable to provide the Board with anymore information on the Illinois
218 Public Health Association Annual Conference other than what is on the association's website,
219 which was included in the agenda packet. No one from the Board of Health has ever attended
220 this conference. Last year's attendance fee was \$150 for association members, which would
221 apply to the Board. The other costs associated with the conference are a hotel for two nights and
222 mileage. O'Rourke said he has attended this conference many times. He stated it is worthwhile
223 for a Board members to attend because it gives one the opportunity to talk to other public health
224 administrators and board members. One can learn what innovative things other communities are
225 trying. Weibel announced members of CUPHD would be attending the conference and a Board
226 of Health member could get a ride with them to save mileage money. McGrath said the Board
227 would have to make a motion to allocate money for this purpose. The Board discussed how
228 much to allocate for the conference. O'Rourke asked that any members who do attend the
229 conference to report back to the Board on what they learned. James suggested the next budget
230 contain a line item for conferences and training. McGrath said there is line item in the current

231 budget for that purpose, but it was spent to send Carrie Storrs to the Bioterrorism Summit. The
232 money is available in the budget, but the line item itself has been expended.

233
234 **MOTION** by O'Rourke to authorize a total expenditure of \$1,200 for up to two Board
235 members to attend the Illinois Public Health Association Annual Conference; seconded by
236 James.

237 James asked about allowing a per diem for food. McGrath said this is modeled on the
238 County's Travel Policy which allows for such a per diem. McGrath said the Board is leaving
239 this up to the County Administrator of Finance to decide what budget line to take the money
240 from.

241
242 Peterson suggested a friendly amendment raising the allocated amount to \$1,500.
243 O'Rourke and James agreed to consider it a friendly amendment.

244
245 **Motion carried with a friendly amendment to increase the total amount to \$1,500.**

246
247 Placement of Public Participation on Future Regular Meeting Agendas

248
249 James liked the way the two public participation sessions were laid out on this agenda. It
250 was exactly as he had envisioned it when he made the request. Rappaport asked if the Board
251 should take a vote of the issue. McGrath said they should.

252
253 **MOTION** by James to change the agenda to include two public participation sessions as
254 presented; seconded Gowda.

255
256 Rappaport asked if any of the public present had any thoughts or feelings about this issue.
257 No member of the public did. Weibel about McGrath about the standard for public participation.
258 McGrath said the Illinois Open Meetings Act has no case law or statutory provision about where
259 public participation will be located on an agenda except for stating that it is not required on a
260 study session agenda. The Board can set rules on how the agenda is structured. The Board can
261 place restrictions on the amount of time the public can speak. Weibel said the County Board sets
262 public participation at the County Board meetings at five minutes per participant. McGrath
263 noted the County Board also has a rule that total public participation is limited to one hour.
264 Peterson asked if the Board has codified its rules. McGrath said the Board has not other than its
265 bylaws, which has a few rules about structure. Peterson requested the Board of Health be
266 presented with the County Board's codified rules at the next meeting.

267
268 James said he envisioned this change as not being a big deal because there is normally
269 not a lot of public present at the meetings. This was a way to be flexible and to move the agenda
270 along, which other Board members supported. McGrath noted there are ways to suspend
271 Robert's Rules of Order, which supposedly governs the Board of Health and the County Board.

272
273 **Motion carried.**

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277 Status Report as to Ongoing Items to be Addressed by the Board of Health in Future Meetings

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The Board discussed a list of ongoing issues that were not ready to be agenda items at this time. Rappaport asked if anyone knew what the Human Services Council is. Both Peterson and McGrath did. Rappaport asked if it is something the Board would want to be involved in. McGrath explained the council is the broad definition of human services, not just healthcare. The council used to meet quarterly and has no membership per se. Peterson said it is an opportunity for people in community services organizations to talk amongst themselves and on collaborative issues. James said if the council has something they feel would fit with the Board of Health; they should send someone to the Board. The council would touch on a number of issues that the Board of Health has no control over. Peterson said the new relationship with the Mental Health Board covers a broader area of issues than before. Rappaport asked about the status of the possible fine against the Champaign County Nursing Home. Weibel and McGrath confirmed this issue is ongoing, but not ready to be discussed yet. Rappaport noted the Senior Services Contract with the Regional Planning Commission calls for quarterly reports. He asked if the Board needed to remind RPC about this report. McGrath spoke to Darlene Kloeppel yesterday and Kloeppel inquired if the Board wants the quarterly report on their March agenda. Bork would confirm to Kloeppel that the report should go to the Board in March.

Rappaport had a discussion with Carol Elliott about the Board's suggested revisions to the CUPHD contract. Rappaport gave Elliott all the suggested revisions and informed her that Pryde had seen the revisions and given feedback that was incorporated into the document. Elliott told Rappaport that she would bring the contract revisions to the CUPHD Board for discussion. Rappaport suggested to Elliott that the two boards could hold a joint study session so they could converse about the contract. The current contract expires at the end of November and the Board would like to get moving on the next contract along. Rappaport asked Weibel if there was a way to arrange such a study session. Weibel said he was not able to attend the last CUPHD Board meeting and suggesting contacting Elliott. Peterson encouraged the notion of the contract being worked on because the expiration date will come up quickly. Weibel suggested McGrath speak with the CUPHD attorney. McGrath agreed to contact Fred Grosser, the CUPHD attorney, because her last conversation with him indicated that Grosser had reviewed the Board's changes and found most of them to be acceptable. Rappaport spoke about the two boards having a conversation about the contract that is not entirely based on legal issues, so the Board of Health could communicate their intentions without finalizing it into a contract. O'Rourke recommended McGrath speak to Grosser about the legal issues and Rappaport speak to Elliott about the joint study session. The Board encouraged the idea of a study session in April or May.

Rappaport asked McGrath about the status of her investigation of the financial and legal issues involved in a possible merger between CUPHD and the Board of Health. McGrath has spoken with the Chair of the County Board's Policy, Personnel, & Appointments Committee about placing this item on the April agenda. She has had discussions with the entities in Springfield that have undergone a merger. She is trying to set up a meeting with the Director of the merged department. Rappaport asked McGrath to keep the Board informed about how things are looking and the issues that arise.

322 Rappaport noted that at the January study session the Board agreed to the method of
323 having the Mental Health Board proceed through its normal application process. Peter Tracy
324 would be looking for proposals that might be relevant for funding from the joint Board of
325 Health/Mental Health Board money. Tracy has prepared an RFP asking for something more
326 specific, if it is needed. A memo from Tracy was distributed that listed the four applications
327 Tracy thought could be considered for joint funding. Peterson wanted to see the actual
328 applications in PDF format and asked that these be emailed to the Board.
329

330 **Public Participation on Non-Agenda Items Only**

331

332 Weibel asked about the number of young people in the audience. One young person
333 explained they are from a local school and are observing the meeting as part of a public health
334 course.
335

335

336 **Adjournment**

337

338 The meeting was adjourned at 7:38 p.m.
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339

340 Respectfully submitted,

341

342 Kat Bork

343 Board of Health Secretary

344

345

Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.

Invoice Number:	0802
Date of Invoice:	February 29, 2008
Billing Period:	January-08

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	\$	39,832.02
533.07 Professional Services - Bio-T Grant	\$	5,040.79
533.07 Professional Services - TFC Grant	\$	2,059.64
533.07 Professional Services - West Nile Virus Grant	\$	-
533.07 Professional Services - Non-Community Water - CU Surveys	\$	-
Total Amount Due to CUPHD per Contract	\$	<u>46,932.45</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

Champaign-Urbana Public Health District

**County Contract Billing
January 31, 2008**

30 - Mobile Services

Billing: 6,436.00
A1: 6,436.00
A2: -
A4: -

30 - IBCCP

Billing: 747.34
A1: 709.25
A2: 30.58
A4: 7.51

40 - Family Health

Billing: 2,749.84
A1: 2,422.75
A2: 254.79
A4: 72.30

70 - Env. Health

Billing: 22,836.92
A1: 19944.18
A2: 2,443.11
A4: 449.63

90 - Administration

Billing: 7,061.92
A1: 6,318.01
A2: 680.45
A4: 63.46

1215 - Bio-Terrorism Grant

January 2008
Billing: 5,040.79
A1: 4,523.17
A2: 379.32
A4: 138.30

1420 - TFC Grant

January 2008
Billing: 2,059.64
A1: 1,828.92
A2: 179.56
A4: 51.16

7330 - West Nile Virus

Billing: -
A1: -
A2: -
A4: -

7415 - Non-Community Water Grant

Billing: -
A1: -
A2: -
A4: -

Total Professional Services	39,832.02
Total County Grants	7,100.43
TOTAL AMOUNT DUE	46,932.45

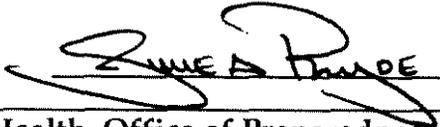
**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 : 37-6006910
 Submitted: 2/26/2008
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 87181009
 Program Name: BT Grants
 Billing Period: Jan-08
 Preparer's Email: ethomas@cuphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
total Salaries and Wages			\$2,549.42	
total Fringe Benefits			\$1,195.79	
total Contractual			\$1,139.87	
total Travel			\$66.78	
total Commodities			\$8.93	
total Printing			\$0.00	
total Equipment			\$0.00	
total Telecommunications			\$80.00	
Grand Total (Page Total)			\$5,040.79	
Contribution to total		Adjusted total		

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 purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 02/26/08

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

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

Applicant Name: Champaign County Public Health Department
 ID: 37-6006910
 Submitted: 2/26/2008

Grant Number: 87181009
 Program Name: BT Grants
 Billing Period: Jan-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
Salaries and Wages				
Dwyer	Emergency Response Planner	1/1/08-1/31/08	\$1,135.19	
Chris Vaid	Epidemiologist	1/1/08-1/31/08	\$806.74	
Michelle Thompson	CD Investigator	1/1/08-1/31/08	\$607.49	
Total Salaries and Wages			\$2,549.42	

12

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

Agency Name: Champaign County Public Health Department
 Phone: 37-6006910
 Submitted: 2/26/2008

Grant Number: 87181009
 Program Name: BT Grants
 Billing Period: Jan-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
Fringe Benefits				
Retirement	IMRF	1/1/08-1/31/08	\$184.29	
Health Security	FICA/Medicare	1/1/08-1/31/08	\$195.03	
Life Insurance	Health, Life, Worker's Comp & Unemployment	1/1/08-1/31/08	\$816.47	
Total Fringe Benefits			\$1,195.79	
Contractual				
Illinois GIS Association	GIS Data	1/1/08-1/31/08	\$12.60	
University of Illinois	GIS Mapping Service	1/1/08-1/31/08	\$1,050.00	
Healthworks	N-95 screening, exams & tests	1/1/08-1/31/08	\$72.45	
Mon Financial Services, Inc.	Copying	1/1/08-1/31/08	\$1.40	
Dixon	Copying	1/1/08-1/31/08	\$0.78	
3/Pitney Bowes	Postage	1/1/08-1/31/08	\$2.64	
Total Contractual			\$1,139.87	

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

Agency Name: Champaign County Public Health Department
 Phone: 37-6006910
 Submitted: 2/26/2008

Grant Number: 87181009
 Program Name: BT Grants
 Billing Period: Jan-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
el				
Roberts	Local & Area Meetings	1/1/08-1/31/08	\$10.10	
Dwyer	Local & Area Meetings	1/1/08-1/31/08	\$56.68	
total Travel			\$66.78	
commodities				
ards	Office Supplies	1/1/08-1/31/08	\$8.93	
total Commodities			\$8.93	
ing				
total Printing			\$0.00	

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

Applicant Name: Champaign County Public Health Department
 ID: 37-6006910
 Submitted: 2/26/2008

Grant Number: 87181009
 Program Name: BT Grants
 Billing Period: Jan-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
Equipment				
total Equipment			\$0.00	
Telecommunications				
M Motorola	Starcom Radio Fees	1/1/08-1/31/08	\$80.00	
total Telecommunications			\$80.00	

15

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Local Contact Person: Esther Thomas
 Telephone Number: 217-531-4262
 Email Address: ethomas@cuphd.org
 Date Submitted: 02/26/08

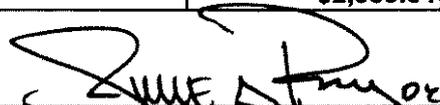
In the box below, please enter reimbursement amounts submitted for your FY08 grant.

Agency Name: Champaign County Public Health Department	\$2,285.91	July	\$2,011.26	October	\$2,059.64	January	\$0.00	April
EIN #: 37-6006910	\$1,610.79	August	\$2,550.33	November	\$0.00	February	\$0.00	May
	\$1,784.25	September	\$1,727.68	December	\$0.00	March	\$0.00	June
					\$14,029.86 YTD			

Contract #: 83281009
Program Name: IL Tobacco Free Communities
Billing Period: January-08

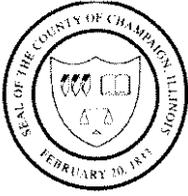
Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Center from IDPH	Comments (Specify)
Personal Services				
Nikki Hillier	Health Educator II	1/1/08-1/31/08	\$472.70	
Jennifer Jackson	Health Educator	1/1/08-1/31/08	\$372.90	
Kari Schweighart	Health Educator	1/1/08-1/31/08	\$344.59	
Expenses				
FICA	FICA	1/1/08-1/31/08	\$91.05	
IMRF	IMRF	1/1/08-1/31/08	\$88.51	
Health Insurance	Health Insurance	1/1/08-1/31/08	\$232.65	
Life Insurance	Life Insurance	1/1/08-1/31/08	\$1.38	
Unemployment	Unemployment	1/1/08-1/31/08	\$45.23	
Worker's Comp.	Worker's Comp.	1/1/08-1/31/08	\$5.93	
Travel				
Jennifer Jackson	Mileage	1/1/08-1/31/08	\$38.38	
Kari Schweighart	Mileage	1/1/08-1/31/08	\$164.63	
Kevin Meier	Mileage	1/1/08-1/31/08	\$11.62	
Contractual				
Canon Financial Services, Inc.	Printing	1/1/08-1/31/08	\$29.05	
R.K. Dixon Co.	Printing	1/1/08-1/31/08	\$15.95	
USPS/Pitney Bowes	Postage	1/1/08-1/31/08	\$52.96	
Supplies				
Kari Schweighart	Nicotine Patches	1/1/08-1/31/08	\$87.36	
Kari Schweighart	Program Materials	1/1/08-1/31/08	\$4.75	
Equipment				
Grand Total			\$2,059.64	

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official

2/28/08
 Date

16



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

DATE: February 27, 2008

RE: BUDGET AMENDMENT for IDPH GENERAL REVENUE GRANT

Please find attached to this Memorandum a copy of Budget Amendment No. 08-00033, reflecting the receipt of the Illinois Department of Public Health General Revenue Grant in FY2008. Per your action on February 26, 2008, \$15,000 of the expenditure appropriation corresponding to this revenue has been added to the Professional Services line item for payment to CUPHD to enhance comprehensive sexuality education. Until you make a determination of how to spend the balance of \$37,631, those funds have been placed in the line item for Contributions and Grants for Capital Improvements. We will be able to transfer from this line item to any other line item (except a personnel line item) from which you may want to appropriate these funds for expenditure, without requiring an additional budget amendment or transfer that requires 2/3 approval by the Champaign County Board.

The attached amendment will be presented to the County Board Finance Committee on March 13th for approval, and is expected to be forwarded to the County Board for approval on March 27th.

Please feel free to contact me if you have questions or concerns with regard to this matter.

attachment

FUND 089 COUNTY PUBLIC HEALTH FUND DEPARTMENT 049 BOARD OF HEALTH

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
089-049-533.07 PROFESSIONAL SERVICES	595,447	595,447	610,447	15,000
089-049-533.88 CONTRIB & GRANTS -CAP IMP	0	0	37,631	37,631
TOTALS	595,447	595,447	648,078	52,631

INCREASED REVENUE BUDGET:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
089-049-334.42 IL DP PUB HLTH-GEN RV GRT	0	0	52,631	52,631
TOTALS	0	0	52,631	52,631

EXPLANATION: RECEIPT OF IDPH GENERAL REVENUE GRANT IN THE AMOUNT OF \$52,631 WHICH WAS NOT ANTICIPATED IN THE FY2008 BUDGET, AND CORRESPONDING EXPENDITURE INCREASES TO ENABLE THE BOARD OF HEALTH TO APPROPRIATE THE GRANT FUNDS IN FY2008.

DATE SUBMITTED:

2/27/2008

AUTHORIZED SIGNATURE

** PLEASE SIGN IN BLUE INK **

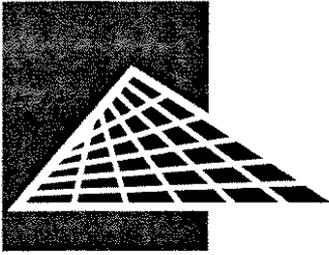
Donna L. Bury

APPROVED BY PARENT COMMITTEE:

DATE:

APPROVED BY BUDGET & FINANCE COMMITTEE:

DATE:



CHAMPAIGN COUNTY
Regional Planning Commission

Social Services Division

Case Management

- Community Gardens
- Court Diversion Services
- Family & Community Development
- Financial Literacy
- Individual Development Accounts
- Norman Housing Advocacy
- School-to-Work Transition Skills
- Tax Aide

Community Services

- CSBG Scholarships
- Emergency Rent Assistance
- Information and Referral
- LIHEAP (384-1226)
- Shelter Plus Care
- Senior Home Repair
- Weatherization

Independent Service

Coordination for DD

- All Kids Agent
- Bogard Monitoring
- Pre-admission Screening (PAS)
- PUNS
- Individual Service and Support Advocacy (ISSA)
- Service Coordination (SC)

Senior Services

- Elder Care
- Information, Referral and Advocacy
- Pharmaceutical Benefit Assistance
- Rural Rider

See our website at:

www.ccrc.org

MEMORANDUM

Date: March 13, 2008

To: Champaign County Board of Health
From: Darlene Kloepfel, Social Service Director

Re: First Quarter Report for Senior Services

Attached is a copy of our proposed work plan for the year and a summary of our first quarter activities. In addition, we have attached a template which we are beginning to use for contact information of "gatekeepers" through which materials can be distributed or referrals made from each local community; a list of unmet needs that have been collected from recent clients; and questions from the "Maturing of Illinois" survey tool being promoted by the East Central Illinois Area Agency on Aging to gather statewide data on senior needs, services and perceptions.

I will be attending the board meeting in case there are any questions or the board wants to give further direction about our activities.

We look forward to continuing our partnership with the Board for these essential services in our county.

EXHIBIT A

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 Champaign County 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

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 of Health

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

Annual cost/benefit analysis by Board of Health

Annual search for best practices by Board of Health

CCRPC Proposal

New Service Development

Volunteer/neighborhood mobilization (Neighborhood Watch, Friends of Senior Services, C-U Volunteer, empty tomb, CC Health Care Consumers, etc.) *Faith*
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. The Board of Health's goal is ultimately to have this staff person spend 30% of his or her time in the field. CCRPC will contribute in-kind management and office support. Evaluation at 3 months, 6 months, 9 months, and one year will guide continuing progress toward this and other goals established by the Board of Health.

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 Regional Planning Commission – Senior Services
Champaign County Public Health Wellness Grant Report
12/1/07 – 2/29/08**

Senior Services plans to identify a finite number of rural communities to identify key stakeholders in that community. These stakeholders will provide to Senior Services information about the strengths and needs of that community. A key component will be to inform these stakeholders or gatekeepers of identifiable changes in activities, behaviors, habits and conversations of elderly community members for seniors and referral process for services. Inadequate recognition and assessment of medical and mental health problems has implication on healthcare and social services in the community. These gatekeepers will be familiar with their local resources; educational meetings facilitated by Senior Services who will train and inform them of key identifiers of isolated or impaired seniors who would benefit from referral, assessment and linkage to geriatric practitioners in Champaign County.

Analysis/Assessment

- Identify rural Champaign County communities to pilot grant
- Identify community stakeholder and gatekeepers

Assessment

- Query stakeholders/gatekeepers using Maturing of Illinois tool (which could include local resources and needs in that community)
- Offer outreach educational programs in the community
- Accompany CUPHD Mobile Unit in select rural communities to identify needs and offer resources including, but not limited to 1:1 assessment and referrals to appropriate programs

Feedback/Evaluation

- Follow up with feedback from the Maturing of IL study in their community via community meetings
- Informational stakeholder/gatekeeper training in their community
- Advocacy services to referred seniors to assure service provision provided or unmet needs documented

New Service Development

- Resource guide individualized to that community
- Feedback provided to County Health Board and other funders of geriatric programs

Activities provided 12/1/07 – 2/29/08

- 12/07 – 2/08 Collection of unmet needs in Champaign County
- 2/07 Champaign County rural communities identified to pilot program
- 2/07 Community stakeholders/gatekeeper template created
- 2/07 Template provided to Executive Board of Senior Services of Champaign County Advisory Board to assist with identification of stakeholders/gatekeeper and to assist with Maturing of Illinois questionnaire in their community
- 2/07 Senior Service staff accompany CUPHD mobile unit as resource in select communities to address and assist CUPHD staff with distribution of information and resources for senior needs (Seymour, Ludlow, Rantoul, Tolono)
- Identification of specific community stakeholder/gatekeeper to complete template continues

Attachments:

- Community Gatekeeper/Stakeholder template
- Unmet Needs List
- Maturing of Illinois Question Tool

Champaign County Public Health Wellness Community Gatekeeper/Stakeholder template

<u>Contact</u>	<u>Name</u>	<u>Contact Information</u>	<u>Notes</u>
Township Supervisor			
Librarian			
Parish Nurse			
Post Office			
Fire Dept.			
Advisory Bd. Member			
Pharmacist/MD			
Mason/ Community Org.			
Other:			

Unmet and emerging needs as identified by senior service providers in Champaign County:

- Dentures and Dental Services
- Hearing Aids, glasses
- Medication Management/monitoring
- Home repairs/rehabilitation especially in mobile homes
- Chronic Disease Mgmt. (non Medicare) ie. diabetic, cardiac, pulmonary
- Ramps post discharge from hospital/nursing home
- Utility payments
- Payment for Emergency Response telephone system, need for land line, installation and monthly fee
- Money Management for those who do not qualify for AARP program and not enough assets for bank trust officer
- Homemaker services for those not eligible for services funded through Older American Act (over assets) and unable to private pay, especially weekend and overnight coverage
- Yard work (snow removal, grass mowing, tree trimming, tree removal)
- Roof repair, gutter cleaning
- Moving and packing from homestead to new abode
- Wheelchair transport for chronic medical services
- Rent assistance
- Geriatric case management and geriatric counseling

**The Maturing of Illinois: Getting Communities on Track for An Aging
Population
Livable Communities for All Ages Survey**

Date(s): _____ **Interviewer(s):** _____

Duration of Interview(s): _____ **Community:** _____

Persons/Positions Interviewed: _____

Materials Reviewed: _____

Housing

Available Housing

1. Which of the following types of housing are available within your community?

Single-family homes?

___ Yes ___ No

Multifamily homes? (e.g. townhouses)

___ Yes ___ No

Accessory dwelling units? (e.g., coach homes, "granny" houses)

___ Yes ___ No

Assisted living facilities?

___ Yes ___ No

Continuing care retirement communities? (e.g., residential communities that provide a continuum of care for residents as their needs change)

___ Yes ___ No

Nursing Homes?

___ Yes ___ No

Supportive living facilities?

___ Yes ___ No

Housing for grandparents raising grandchildren?

___ Yes ___ No

Other, please list: _____

2. Is affordable housing available in each of these housing types?

Single-family homes?

Yes No

Multifamily homes?

Yes No

Accessory dwelling units?

Yes No

Assisted living facilities?

Yes No

Continuing care retirement communities?

Yes No

Nursing homes?

Yes No

Supportive Living Facilities?

Yes No

Housing for grandparents raising grandchildren?

Yes No

Other, please list:

3. Does your community encourage or require visitability standards for new housing units?

Yes No

4. Are there multifamily housing units that are accessible to people with varying or changing physical abilities?

Yes No

5. Are there any special housing complexes or apartment buildings especially designed for older people in your community?

Yes No

6. Are you aware of individuals who are unable to find appropriate housing within your community? For example, do affordable, accessible multifamily housing or assisted living facilities have long waiting lists?

Yes No

7. What type of housing needs to be developed to meet the future needs of seniors in your community? (check all that apply)

- Single-family Senior living center
- Multi-family Mobile/Modular Homes
- Assisted living facilities
- Assisted living facilities with dementia care
- Nursing homes with add-on Apartments
- Nursing homes with dementia care
- Supportive living facilities
- Shared living facilities
- Other, please list: _____

7a. Is anything happening now to assure the availability of these housing needs in the future?

Property Tax Relief

1. Does your community offer any property tax reduction programs for older homeowners?

Yes No

NOTES:

Home Repair and Modification

1. Do lending agencies in your community offer reverse mortgages to homeowners over age 62?
 Yes No
2. Does your community offer a financial assistance program for home modifications?
 Yes No
3. Does your community offer financial assistance for maintenance and repairs?
 Yes No
4. Does your community have a program that helps older persons evaluate the need for home repair, modification, weatherization, etc?
 Yes No

Affordability

1. Would most seniors in your community say their housing expenses are manageable?
 Yes No
2. Does cost limit the housing options of seniors in your community?
 Yes No
3. Are seniors in your community who might need services aware of assistance programs for utilities or other expenses related to housing?
 Yes No

NOTES:

Transportation

Availability of Public Transportation

1. Is your community served by a regularly scheduled bus or other public transportation service that picks up passengers at established stops?
 Yes No
2. Does your community have a dial-a-ride service?
 Yes No
3. Is taxi service available in the community?
 Yes No
4. Do local organization (such a senior centers, churches, or other groups) offer van service to meal sites, doctor's appointments, or special recreational excursions?
 Yes No
5. Is there an organized volunteer driver program in your community?
 Yes No

Drivability

1. Does your community have street signs with letters large enough to be seen at a distance?
 Yes No
2. Are street signs readable at right?
 Yes No
3. Are there streetlamps at regular intervals?
 Yes No
4. Do your streets have turning arrows at intersections and dedicated left-turn lanes?
 Yes No
5. Do the dedicated left-turn lanes start at the middle of the block?
 Yes No

6. Are the lane markings clear?

Yes No

7. Do parking lots have clear travel patterns?

Yes No

10. Do parking lots have an ample number of parking places that are easy to use?

Yes No

11. Are there well-marked parking spaces for individuals with disabilities?

Yes No

NOTES:

Health and Human Services

1. Do members of your community have access to an information hotline that provides information on services for older adults?
 Yes No

2. Do the members of your community have directory of services for older persons?
 Yes No

3. Do members of your community have access to a meals-on-wheels (also known as home delivered meals) programs?
 Yes No

4. Do members of your community have access to congregate meals (e.g., low cost meals provided at a central location, such as a senior center or restaurant)?
 Yes No

5. Are specialized support groups for older, residents and their caregivers available to your community? (e.g., bereavement, stress management, etc.)
 Yes No

6. Are there easily accessible opportunities for informal social interaction that would appeal to older residents (e.g., cafes, bookstores) in your community?
 Yes No

7. Is there a hotline or other communication system available for your community to help potential volunteers learn about opportunities to volunteer?
 Yes No

8. Are there any senior centers, or community focal points (e.g., a neighborhood facility or organization that provides services for seniors) for seniors living in your community?
 Yes No

If yes, please list: _____

Health Services

1. Are there any health clinics or hospital outpatient services that meet the needs of older residents in your community?

___ Yes ___ No

2. Does your community have an on-going workgroup that meets to encourage the coordination/collaboration of health and human service providers?

___ Yes ___ No

If yes, please describe:

How often do they meet?

3. Is access to health care an issue for those in your community with limited incomes?

___ Yes ___ No

4. Are home health care services (e.g., health services available through an organization to persons in their homes) available in the community?

___ Yes ___ No

5. Are mental health services available to older adults in the community?

___ Yes ___ No

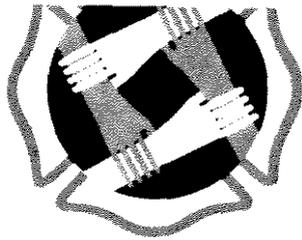
6. Are there adult day services (e.g., programs in the community with activities and health related rehabilitation services to those who are disable and need a protective environment) and other programs designed especially to respond to the needs of those with dementia or Alzheimer's disease?

___ Yes ___ No

If yes, please describe: _____

14. Does your community offer programs for preventative health care? (e.g., flu shots, support groups, nutrition classes, etc.)

NOTES:



**FIRE CHIEFS
ASSOCIATION**

DEDICATED TO QUALITY EMERGENCY SERVICES FOR CHAMPAIGN COUNTY

Steve Rittenhouse- President
 Steve Thuney - Vice-President
 Jim Randol- Sec. / Treasurer

Champaign County Board of Health:

Champaign County Fire Chiefs were asked if there was a need for defibrillators and or CO gas detectors to promote and protect the health and safety of residents in their response area.

Please find listed the Fire Departments that could use the equipment.

Bement Fire Protection District		CO detector
Cornbelt Fire Protection District		CO detector
Gifford Fire Protection District	Defibrillator	CO detector
Ivesdale Fire Protection District	Defibrillator	CO detector
Longview Fire Protection District		CO detector
Mid -Piatt Fire Protection District	Defibrillator	CO detector
Ogden Fire Protection District	Defibrillator	CO detector
Pesotum Fire Protection District	Defibrillator	CO detector
Philo Fire Protection District	Defibrillator	CO detector
Paxton Fire Protection District		CO detector
Rantoul Fire Department	Defibrillator	CO detector
Royal Fire Protection District	Defibrillator	CO detector
Sangamon Valley Fire Protection District		
Fisher department	Defibrillator	CO detector
Dewey "	Defibrillator	CO detector
Foosland "	Defibrillator	CO detector
Savoy Fire Department		CO detector
Seymour Fire Department	Defibrillator	CO detector
St Joseph Fire protection District	Defibrillator	CO detector
Thomasboro Fire protection District		CO detector
Tolono Fire Protection District	Defibrillator	CO detector
Urbana Fire Department		CO detector

Estimated cost for this program		
Defibrillators	\$1350.00 each (14)	\$18,900.00
Co detectors	\$375.00 each (21)	<u>\$ 7,875.00</u>

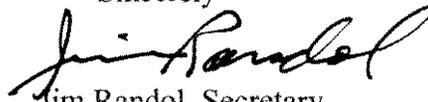
Total Estimated Cost \$26,775.00

You can see by the above list there is a concern for the health and safety of residents in our fire service areas. Most on the list are small volunteer fire departments with very limited funds. There are 34 fire departments in Champaign County Fire Chiefs Association, 21 have indicated a need for this equipment. Any assistance from the Champaign County Board of Health would be greatly appreciated. If there are any questions or more information needed please let me know.

Thank you for your consideration of this request.

The Champaign County Fire Chiefs Association will do what ever is necessary to facilitate this request.

Sincerely

A handwritten signature in black ink that reads "Jim Randol". The signature is fluid and cursive, with the first name "Jim" being more prominent than the last name "Randol".

Jim Randol, Secretary

Champaign County Fire Chiefs Association

Contact Person

Chief Jay

586-3380

Cell 841-1014

cbfpd00@mchsi.com

Corumbelt Fire Protection District

P.O. Box 5000 Mahomet, IL 61853



Central Illinois Dental Education and Services

Head Start Dental Clinic - Dental Health Education
Child Dental Access Program - Mobile School Clinics

217-359-7404, fax 217-352-9745, PO Box 154, Champaign, IL 61824-0154

www.cides.org

Champaign County Board of Health
1776 Washington
Urbana, IL 61802
March 14, 2008

Dear Board Members,

We are about to take our show on the road throughout the county and would like to provide the same level of mobility for restorative care as well. So I am writing to request \$12,025 from the one time IDPH revenue to purchase mobile restorative equipment.

We have 20 days of mobile school screenings scheduled from March 1 – May 31. All but two of those days we will be seeing county kids. The other two days we will be at Lincoln's Challenge Academy.

The Child Dental Access Program is serving county children as promised, providing dental homes for the children whose families do make that commitment. This year we have been able to complete treatment for more children needing specialty care and oral surgery. However, through our mobile clinics and our experience with Head Start in Savoy we are learning about the number of children whose families are not following up with needed treatments.

We have recently hired an outstanding dentist with a strong commitment to public health dentistry. He is interested in exactly this kind of work. We have also heard of growing interest from area dentists in volunteering outside of their practice. These include dentists who currently participate in the Child Dental Access Program and those who do not.

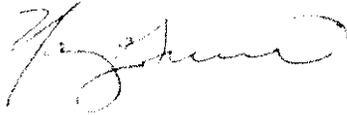
I understand that this request may fall outside the guidelines the board has established for this one time revenue. However, several community members have strongly encouraged us to apply anyway including the United Way and people who work in public health. The mobile equipment would be highly consistent with the mission of public health and the goals of the board of health. The potential community impact with this equipment is dramatic. Not only would this equipment help to serve children from any of the schools we provide mobile clinic services, but the equipment may also help us serve adults needing care.

Life expectancy for this equipment is 5-8 years. We have similar equipment for our mobile school screenings. We are on our third year with this equipment and have only needed minor maintenance.

Restorative work does take time and often several appointments. Each staffed chair can treat eight patients a day. This equipment would help us add a couple of days a month, potentially more in the future. This would help us provide nearly 200 more appointments in a year or 1000 in the first five years of the equipment. Each day we set up a dentist and equipment to provide restorative treatments, we could also set up a hygienist with chair and equipment to provide recalls. Hygiene work on a child takes less than half the time of a restorative appointment. So the number of additional appointments we could provide could be triple that—600 in a year or 3000 in the next five years.

Thank you for your time and consideration. Should you have any questions, don't hesitate to contact me (359-7404, 390-5365 or nhgreenw@prairienet.org).

Sincerely,



Nancy Greenwalt
Executive Director

	Mobile Equipment Budget	Board of Health Request
Portable Unit – for handpieces, suction, rinse	\$5,000	\$5,000
Portable Autoclave/Statim	\$5,000	\$5,000
Light	\$975	\$975
Handpieces	\$1,050	\$1,050
Dentists Portable Stool*	\$500	
Assistant Portable Stool*	\$850	
Patient Chair*	\$2,000	
Travel Cart/Dollie*	\$200	
Total	\$15,575	\$12,025

*Items will be supported by other donations including funds recently committed by Parkland College Dental Hygiene Program.

**We will move our Head Start Clinic x-ray equipment to these clinics and do restorative work that may not require an x-ray until we can secure funding for a truly mobile digital x-ray system. Prices for this are up to \$25,000.