

McHENRY COUNTY BOARD OF HEALTH MEETING

Minutes of April 26, 2010

Vice President Linda Brogan called the McHenry County Board of Health meeting to order at the McHenry County Department of Health, Woodstock office, at approximately 7:00 p.m. Board members present: Ms. Linda Brogan, Dr. Richard Gorski (by telephone), Mr. Dallas Larson, Ms. Eleanor Jackson, Ms. Lyn Orphal, Dr. Thomas Skiba, and Mr. Edward Varga. Board members absent: Mr. Andy Andresky. Staff members present: Mr. Patrick McNulty, Mr. Joe Gugle, Ms. Patricia Nomm, Ms. Fran Stanwood, and Ms. Karen Mueller.

PUBLIC PARTICIPATION

None

MINUTES

Dr. Skiba **moved** to approve the minutes of the March 22, 2010 meeting, **second** by Ms. Orphal. Following a brief discussion to include revisions as stated by Mr. Larson, Dr. Skiba **moved** to include the revisions to the minutes as stated by Mr. Larson to his original motion, **second** by Ms. Orphal. The motion passed unanimously.

CONSENT AGENDA

Mr. Varga **moved** to approve the Consent Agenda, **second** by Dr. Gorski. Following a brief discussion the motion passed unanimously with a roll call vote.

CONTRACTS AND AGREEMENTS-New

Dr. Skiba **moved** to approve the Westmoreland Obstetrics and Gynecologic Association provider agreement, **second** by Ms. Orphal. Following a discussion, the motion passed unanimously with a roll call vote.

PROGRAM HIGHLIGHT

MAPP

Mobilizing for Action through Planning and Partnership

Presented By

Joseph Gugle, Manager – Planning, Personnel and Administration

Mr. McNulty introduced Mr. Gugle to discuss the MAPP process. Since 2006, the Department has been using the MAPP process for its 5-year planning cycle. Mr. McNulty stated that Joe and Debra Quackenbush have been very involved with this process for the Department and have expended a great deal of effort to ensure sustainability. Moving from the planning process to implementation is the most difficult phase and they have done a great job in keeping it going and attracting interest from the community. Mr. McNulty feels that it has paid off well in dividends in many other areas from our association with the variety of community groups that are involved.

Joe indicated that opportunities for community collaborations have increased because of the MAPP process. The Public Health system in McHenry County is very fortunate in that agencies do communicate rather well. The MAPP process has been instrumental in opening doors not only with MAPP organization members but in the Department's day-to-day initiatives – finding the right contacts to accomplish tasks on a timely basis.

Mobilization for Action Through Planning & Partnership (known as MAPP) is a process developed by the National Association of City and County Health Organizations (NACCHO) and the Centers for Disease Control and Prevention (CDC) in the early 1990's. CDC uses this process to assess, identify and implement solutions to identify health related issues. MAPP is a community-driven process. It examines health-related issues broadly through four assessment tools. These tools are: (a) the

Community Health Status Assessment consisting of demographic data, chronic disease data, mortality and morbidity data; (b) the Local Public Health System Assessment which is used to survey the community (e.g. business, the medical community, churches) to assess whether the ten essential services for Public Health are being met within the community. This would identify existing strengths and gaps that are present; (c) the Community Themes and Strength Assessment along with the (d) Forces of Change Assessment were done collectively. Brain storming sessions were conducted to look at the positive aspects of living in McHenry County as well as forces of change that could alter a community (e.g. politics, the economy, etc.). With those assessments, the Department was able to identify priority issues that it would focus on over the next 5 years. The MAPP process meets the Department's State recertification requirements – Illinois Project for Local Assessment of Needs (IPLAN). MAPP was adopted by the Board of Health on May 21, 2007.

In 2006, ten organizations met to discuss a joint community needs assessment to maximize existing resources. In January 2006, the partners met with Health Systems Research (Rockford) to begin a Healthy Community Study. The study was broken down into four assessment tools starting with a Community Analysis based on the compilation of zip code data.

A household survey was designed and mailed to 6000 McHenry County homes (with a 13% return rate). The survey centered primarily on health and human service needs for which residents felt were important; not important or were lacking. Key Informant Interviews were conducted of 43 business leaders within the County which were done by Leadership Greater McHenry County. Focus Groups targeted those underserved/underrepresented residents such as at-risk youth, disabled, elderly, etc.

In September of 2006, the findings were published and presented at a community forum at McHenry County College. The results indicated there were barriers in our health care system. The impact of growth and development was a concern for those living in McHenry County as well as a lack of awareness of information and referral sources. Secondary priorities were cardiovascular disease and activities for youth. Findings from the study were used to begin the MAPP process.

In January, 2007, a strategic planning session was held to narrow down the focus and a plan was made to address the priority issues – access to health care, lack of information and referral and cardiovascular disease. The MAPP partners were divided into workgroups to design goals and tactics to address the issues. In 2008, the action cycle began; 2009 was the 2nd year. Goals for 2010 were recently developed. At the end of each year, tactics are assessed and evaluated to effectively design the next year's goals.

MAPP partners have changed throughout the years due to staffing and funding. At the current time, there are approximately 35 individuals from 18 different agencies actively engaged in the process. A Core Team of 5 agencies drives the MAPP process core. These agencies are part of the group that funded the original Healthy Communities Study. Meetings are held quarterly or more often based upon the needs of the group to keep the process moving. There are also workgroups. Throughout the years, the work groups have also been subdivided into sub-workgroups to help meet the needs of the process. A great deal of work has been accomplished and several issues have been addressed. An annual meeting is held where Chairs provide workgroup progress reports to keep other members informed. This year's meeting was a full half day in February and was sponsored by Centegra Health System.

Over the last three years, the Access to Care-Medical workgroup (chaired by the Family Health Partnership Clinic) has accomplished many things. The focus of the group is to improve services for the uninsured/underinsured. The Clinic is the County's resource for medical care for this particular population. In 2008, the Clinic developed an infrastructure to increase follow up clinical care. It

developed a campaign to expand medical volunteers such as doctors, nurse practitioners and Clinic nurses. It wrote and received a grant to open a part-time satellite clinic.

In 2009, the Clinic continued to increase the number of recruited volunteers by creating a video that was used within County medical groups; it was able to add 10 additional physicians and nurses. The Clinic used grant funding to open a part-time site (2 half-days per week) in McHenry at Centegra's Northern Illinois Medical Center. After accomplishing last year's goals, the Clinic will continue to actively recruit volunteers with an emphasis on expanding recruitment of specialized physicians, nurses, medical interpreters and other volunteers. It is also interested in exploring alternatives to pharmaceutical assistance programs and to explore ongoing funding sources for the part-time McHenry clinic site.

The second subgroup is Access to Care-Dental and, much like the medical group, this group's focus is the uninsured /underinsured of McHenry County. The McHenry County Cooperative Dental Clinic is the County's resource for dental care. This group's Year 1 goals and accomplishments were to develop a campaign to increase funding and expand dental staff and volunteers at the Cooperative Dental Clinic. This was done through additional grants. The Clinic was able to move from a three-day operation to five days which also allowed for additional staff (including a full time and part time dentist). They also developed a plan to partner with the UIC Dental School to provide students with practical experience.

In Year 2, the Clinic explored additional grant opportunities for operational needs. New funding provided an improved phone system, computer network and bilingual receptionist. It also developed an educational campaign on the importance of dental hygiene in children, with one specific target group being the Latino population. It is called the Bright Smile from Birth Campaign. Funding received was used to promote and educate McHenry County health & human service organizations.

In Year 3, the Clinic is working on educating McHenry County pediatricians about the Bright Smile from Birth campaign. The goal is to help ensure low income children and children without dental homes get referrals to a proper dental home and those who are in dental home to ensure that their treatment plans are complete. The Clinic is also exploring funding for additional dentists to provide evening clinics due to high appointment cancellation rate; several factors involved such as transportation and parents do not want to pull children out of school.

The next subgroup is Access to Care-Mental Health, Early Childhood. Its focus is to increase awareness of early mental health screenings. First year goals were to develop brochures for physician waiting rooms that could encourage parents, the medical community, school and health & human service organizations to ensure early screenings of social, emotional and developmental concerns for young children; 4-C added information to their parent newsletter for early screening.

Year 2 goals were to develop educational materials and work with schools and the medical community to increase awareness of resources for social, emotional and developmental screenings. The goal this year is to expand and work with adolescents. It is looking to enhance its website which is managed by the Mental Health Board; add an early childhood link to resource list; continue to promote and increase awareness of mental health screenings

The second mental health group is Access to Care- Mental Health Seniors. It is very active group in our community. Its focus is to provide outreach and resources to our senior population. First year goals and accomplishments were to develop a campaign to provide educational programs on the availability and importance of mental health screenings to County residents aged 55+. This is called "Think Well, Feel Well" (TWWF) campaign. The program was piloted in Year 2 and has found great success. At the end of the year, it had hosted 3 events which were well attended.

This project will continue in 2010 with the intent of reaching 500 seniors this year. It is a very energetic and determined group who plan to reach this goal by promoting this at all the community health fairs along with the other groups within the MAPP system. A train-the-trainer program will also begin in 2010 to meet these goals.

The next subgroup is Information and Referral which is Chaired by the County's Crisis Line. The Crisis line for McHenry County is the resource for information and referral. This group's focus is to increase awareness for the crisis line's dedication as a referral organization. Its intent is to keep the database current and to move into a more recognizable state-wide system. First year goals and accomplishments were to update information and encourage interagency links to the crisis line. Second was to explore Network of Care and 2-1-1 compatible sites. Lastly, to develop language barrier solutions for I & R/crisis website and to support crisis services in a 2-1-1 application for a pilot site.

The 2nd year's goals were to centralize and update information and referral located on crisis services website; to market the crisis line number and website (future 2-1-1) to community to increase visibility and to collaborate with CMAP for future 2-1-1 re-application; 2-1-1 moved out of DHS and into its own governing body; collaborates with CMAP as 2-1-1 Illinois. These goals have carried over to this year's goals.

The next subgroup was divided into two groups. First is the Cardiovascular (Adults) whose focus is education and prevention. Year 1 goals and accomplishments were to increase the workgroup partnerships to include community and civic organizations. It inventoried the County of ongoing cardiovascular screenings taking place within the community. This rolled into Year 2 goals were it gathered detailed information and identified gaps on cardiovascular events and needs in McHenry County.

This group also developed a "know your heart age" campaign and subsequently designed a "Heart Age" tool. The campaign is based upon the Framingham Heart Study risk assessment and its tool is used to measure what your actual heart age would be based on factors such as BMI, blood pressure, age and some risk factors (e.g. being a smoker). For 2010, the goals are to continue to implement the "Know Your Heart Age" campaign, to train Medical Reserve Corps (MRC) nurses to administer the "Heart Age" tool at events throughout McHenry County and to add cholesterol to the Heart Age tool.

The final group is Cardiovascular Disease (Youth) which was developed at the end of last year to focus on the at-risk youths in the County. It met to brainstorm ideas and to promote the Coordinated School Health Program (CATCH) County wide. Second, its intent was to target groups that have a stake in youth cardiovascular health and to research more funding opportunities. This group will utilize social media and will likely design its campaign accordingly as a way to reach the younger population.

Finally, Round 2 of the Healthy Community Study is underway. The partners designed a household survey which was mailed in May to 8000 randomly selected homes (1 in 13 County residences). The survey was somewhat redesigned from the 2006 survey to incorporate a broader range of topics. Surveys should begin arriving in mailboxes around mid-May so if you are selected, please complete it and return.

Ms. Brogan asked how this survey will be promoted. Joe indicated a poster was created and will be distributed. Newspapers, radio and social media are also being utilized. He stated the goal was a 20% return rate. Dr. Skiba asked from where the demographic data is drawn. Joe commented that the vast majority of it is Census Bureau data, IDPH and from other national sources. Health Systems Research is the lead on compiling all the research.

Ms. Brogan asked if this group can respond quickly if changes take place in the community. Joe indicated that the Department is bound by the 3 priorities identified through the Healthy Community Study and used in IPLAN. We can add on other priorities, but there is a minimum of three over a five year period. Dr. Skiba asked if the strategic planning is a three or five year plan; Joe stated it is a 5-year plan. Dr. Skiba asked if the group is continuously reevaluating and Joe answered in the affirmative. Joe is confident of the sustainability of this group to continue beyond the 5 year timeframe.

OLD BUSINESS

Fran discussed H1N1. She said the Department is continuing to reevaluate and assess the situation. The focal point is on what worked well and what could be improved if this situation were to occur again. Things are going well. We are internally lead by Debra Quackenbush who is a member of the H1N1 Steering Committee for the Northern Illinois Public Health Consortium (NIPHC) who is doing an assessment to review the process, meeting once a week for four weeks. There were many people who were still hesitant to get the H1N1 vaccine for a number of different reasons. Fran said there is still a lot of education that needs to be done.

The Department began vaccinating in October and efforts are continuing today. Annex A is open five days a week Monday through Friday; Annex B is open five days a week as is the Crystal Lake location. There are not a great many vaccinations being done. Ms. Brogan asked if the percentage of people who got H1N1 was about the same as people who got the regular flu shot; Fran indicated it was about the same (about 33 to 35 percent). Ms. Brogan asked if we were successful in getting kids to return for the second shot. Fran stated that overall it was very successful and we are seeing a lot of that now. She said the Department will continue to administer the vaccine until the supply is depleted. There is a fair amount of vaccine still available. Ms. Brogan asked if this will be included in the seasonal flu shot next year; Fran said yes.

Fran indicated tracking is still being accomplished daily from locations within the County. Everyone within McHenry County reports to the Department which is then transmitted to the State Health Department. Mr. Larson asked how many doses we spoiled and had to be destroyed. Fran said that vaccine is not spoiled but aged out. There is nothing wrong with the vaccine; it just can't be used any longer because of the age. We have had maybe 5000-7000 doses throughout the course of the campaign. Mr. Larson asked if we track this to which Fran replied absolutely. Mr. McNulty indicated that tracking is done regularly with all the vaccines we handle and reported back. Dr. Skiba asked what percentage of the vaccine is disposed; Fran said probably 14 percent. Fran said we will continue to until that last date we have which is into next year. There is one person responsible for tracking the Department's vaccine. Ms. Brogan said it is typical of season vaccine also; Fran said it is typical of all vaccine. If you look at a prescription you get, it have a date on it that you should dispose of it. It is the same with over the counter medications. Dr. Skiba said too bad it could not be shared with a needier County. Mr. McNulty said there is so much vaccine out there now that no one is in need. In fact no new vaccine has been shipped in months. Fran said everyone needs to be vaccinated regardless of age.

NEW BUSINESS

Ms. Orphal **moved** to approve the FY10 Health Department Budget Amendments for IDPH IBCCP \$154,000, IDHS WIC \$10,000 and \$5,000, and IDPH West Nile \$38,689.72, **second** by Dr. Skiba. Following a brief discussion, the motion passed unanimously with a roll call vote.

BOARD ISSUES

Mr. Larson felt that it is his responsibility as the Chairman of the Finance Committee to be the one to brief the Board regarding any amendments to the Health Department Budget. Mr. Larson requested that Mr. McNulty contact him prior to Board meetings if there will be budget amendments on the agenda so

that he can be advised on the reasons for the amendments. The Board felt that if Mr. Larson wanted to take on this responsibility that there was no reason why this procedure would not work.

INFORMATION AND COMMUNICATIONS

Ms. Brogan reviewed the information in this section. Mr. McNulty reminded the Board of Health members about the upcoming public health breakfast on Friday April 30th from 8:30am to 10:00am. He announced that Mr. Varga and Dr. Gorski would be honored for their ten years of dedicated service to the Board. Ms. Nomm discussed the upcoming electronic waste collection event that the Health Department, SIMS Recycling Solutions and Lou Marchi Recycling Institute at McHenry County College are holding as a joint community event.

OTHER BUSINESS

Mr. McNulty reminded everyone of the importance of filing their Statement of Economic Interest form. The deadline for filing is May 1st.

EXECUTIVE SESSION

None

APPENDIX

None

ADJOURNMENT

Ms. Orphal **moved** to adjourn the meeting at approximately 7:55.p.m. **second** by Dr. Skiba. The motion passed unanimously.

Respectfully submitted by,

Dr. Thomas Skiba
McHenry County Board of Health Secretary