



ANNUAL REPORT 2015

TAZEWELL COUNTY HEALTH
DEPARTMENT

TABLE OF CONTENTS

▶ Mission, Vision & Values	3
▶ TCHD Board of Health	4
▶ Administrator's Words	5
▶ Accreditation	6
▶ State & National Boards	7
▶ Priorities and Strategic Plan Goals	8
▶ Margaret Burt Public Health Partnership Award	9
▶ Financial Report/Business Division	10
▶ Birth to Five Division	11
▶ Clinical Division/Communicable Disease	12
▶ Community Division	13
▶ Environmental Health Division	14
▶ Office of Planning	15
▶ School Division	16

MISSION, VISION & VALUES

MISSION

To promote and protect the public's health and well-being.

VISION

The Tazewell County Health Department will be a state leader and partner, serving the community through innovative public health practices to meet the current and future needs of the individual and of the environment, with the ultimate goal of inspiring and attaining overall wellness.

VALUES

The Tazewell County Health Department is dedicated to our community through...

Service: Understanding and meeting public health needs with creativity and commitment.

Quality: Continuously seeking to enhance and provide services at the highest possible level.

Accountability: Ensuring responsible use of resources to benefit the community.

Integrity: Being ethical and reliable.

Collaboration: Communicating and working together for the overall good of the public.

Innovation: Being a leader in anticipating and addressing public health needs.

Respect: Relating to all people with understanding, compassion and dignity.



TCHD Board Of Health

Gary Burton, *President*

Mike Godar, *Vice President*

Debra Stark, Ph.D, RN, *Secretary*

Amy Christenson, M.D.

Steven Dickey, D.D.S.

Peggy Flannigan, PhD, RN,

Carroll Imig

Rich Karneboge

Tricia Larson

Christina Nulty, M.D.

Sabrina Stone, D.V.M.

The Tazewell County Health Department Board of Health Members are appointed by the Chairman of the Tazewell County Board. Eleven members comprise the Board of Health due to the merging with the TB Board several years ago. Members serve 3 year terms voluntarily.

Board of Health meetings are held on the fourth Monday of each month at 6:30 pm in the Board Room of the Tazewell County Health Department.



Words From The Administrator and Board of Health President

It is with pleasure we share the Tazewell County Health Department's 2015 Annual Report with our community. It was an amazing year filled with many accomplishments that support our mission to provide high quality public health services to the residents of Tazewell County.

The Tazewell County Health Department (TCHD) is pleased to provide you with a summary of the many activities we perform on a daily basis to honor our commitment to a safe, healthy, and vibrant community. Our programs seek to increase healthy births, promote healthy lifestyles, prevent the spread of infectious diseases, protect our environment, and prepare for emergencies. We are a performance and results-based organization. Quality assurance, quality improvement and increasing efficiency through performance management all play large roles in our culture at TCHD.

This year has not been without challenges; our staff has worked tirelessly to meet their programmatic needs in this trying financial year. We are in unprecedented times, as 2015 is the first time in history that the State of Illinois is 5 months into a fiscal year with no state budget and has shown no forward progress in achieving one. We have had to restructure programming in our School and Birth to 5 divisions, including staff reductions.

The Board of Health and Administration continues to monitor the situation but through sound financial planning, reserve dollars have not been used and we finished the 2015 fiscal year in positive financial condition.

The Board of Health is proud of the accomplishments of 2015, but we are not the only ones who recognized the Health Department's commitment to quality. The Public Health Accreditation Board awarded Accredited Status to the Health Department on November 13th, 2015. This designation adds our organization to an elite cohort of public health departments in the nation. At this time, there are less than 100 in over 3000 public health agencies in the United States that have achieved the National Public Health Accreditation milestone.

We look forward to the next year as we face the continuing financial uncertainty of the State of Illinois, yet work to continue the high standards of public health services for our Tazewell County citizens.

All the best,

Amy Fox
Administrator

Gary Burton
Board of Health President

TCHD was created by referendum in 1970, with the first office opening on December 1, 1970 in Pekin, Illinois. The first administrator, Gordon Poquette, was hired on April 1, 1971.

Accreditation for TCHD

After several years of working to achieve accreditation, TCHD received confirmation of accreditation on November 13, 2015.

The strengths listed in the accreditation report include:

- ▶ TCHD demonstrated a proactive regulatory engagement process for Environmental Health, Body Art, Landfills and septic tanks.
- ▶ The Tazewell County Public Health Foundation allows leveraging of funding, linkage to partners, and responsiveness to the CHIP, TCHD and community for additional funds.
- ▶ Community Engagement was demonstrated with an initiative for a proactive Youth Board and an engaged governing Board of Health which demonstrated a vision for excellence.
- ▶ TCHD has developed a culture of QI with meaningful staff engagement projects and multiple methodologies for Strategic Plan linkages.

Opportunities for Improvement include:

- ▶ Enhance coalition based efforts to address access to health care in all parts of the county and develop partnership strengths to address issues.
- ▶ Review local events/efforts that are Public Health interventions and are evidence based through research, best practices and replicate in other TCHD projects.
- ▶ Integrate strategic plan process to new efforts in the performance management system.

The Tazewell County Health Department demonstrates an “AAA” approach to public health practice, with an:

Attitude- toward excellence which is obvious across domains and is shown through determination to work together toward Quality Improvement.

Ability- their expertise and ability are sought by many within the community.

Action- the Tazewell County Health Department is definitely a department of action.



Community Health Improvement Priorities

- ▶ Infant Mortality
- ▶ Lung Cancer
- ▶ Mental Health & Substance Abuse
- ▶ Obesity
- ▶ Public Health System Stability

Strategic Plan Goals

- ▶ Maximize resources for support of Tazewell County Public Health System in fulfilling our mission.
- ▶ Improve communication, enhance partnerships and expand public health awareness.
- ▶ Support, enhance and retain a well-trained competent workforce.
- ▶ Provide, maintain and develop quality public health services.

Essential Public Health Services

- ▶ Monitor health status
- ▶ Diagnose and investigate health problems and health hazards
- ▶ Inform, educate and empower people about health issues
- ▶ Mobilize community partnerships to identify and solve health problems
- ▶ Develop policies and plans that support individual and community health
- ▶ Enforce laws and regulations that protect health and ensure safety
- ▶ Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- ▶ Assure a competent public health and personal health care workforce
- ▶ Evaluate the effectiveness, accessibility and quality of personal and population-based health services
- ▶ Conduct research for new insights and innovative solutions to health problems



Roadside Safety Check – Drug Free Communities funding to increase visibility of law enforcement officers. Collaboration with Tazewell County Sheriff's Office.

TCHD Staff Serve on State & National Boards

▶ **Amy Fox , Administrator**

- President- Illinois Association of Public Health Administrators. IAPHA is an Association of Local Health Departments representing 97 of the 102 counties in Illinois. The Association has existed for over 35 years and works to promote and protect the services that are critical to the health and safety of Illinois communities.
- Illinois Department of Public Health Executive Liaison Committee- Quarterly meetings with the IDPH Director and associated organizations to discuss the status of public health in the state

▶ **Karla Burress, Administration**

- PHAB QI Leaders Academy--The goal of the QI Leaders Academy is to develop QI leaders with the knowledge and skills to help build high performing cultures of quality and to incorporate the sustainability of those efforts through the accreditation process.

▶ **Beth Beachy, Birth to Five**

- National WIC Association-Midwest Representative for the Local Agency Section. The National WIC Association (NWA) is the non-profit education arm and advocacy voice of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), the over 8 million mothers and young children served by WIC and the 12,000 service provider Agencies who are the front lines of WIC's public health nutrition services for the nation's nutritionally at-risk mothers and young children.

▶ **Sarah Fenton, Clinic Services**

- Region 2 Director & Chair for Bylaws Committee for Illinois Public Health Nurse Administrators(IPHNA). The purpose of IPHNA is to promote quality public health nursing services in the State of Illinois through communication and information exchanges; participation in planning and decision making for public health services; educational activities; and advocating for public health nursing in Illinois.

▶ **Julie St. Clair, Clinic Services**

- Secretary, Illinois Council on Tuberculosis (ICOT). The purpose of ICOT is to advance the elimination of tuberculosis

▶ **Evelyn Neavear, Environmental Health**

- Chair -Central Region Groundwater Protection Committee. The mission is to advocate groundwater protection practices and procedures to municipal, county, state, and other local unit of government throughout the Central Planning Region.
- Central Chapter Director and General Environmental Health Technical Chair of the Illinois Environmental Health Association (IEHA) is a state-wide, not-for-profit organization to promote the highest degree of skill, efficiency and professional competence among sanitarians and others practicing in the various environmental health disciplines through the mutual exchange of knowledge and experience

▶ **Karen Irons, Environmental Health**

- Food Safety Technical Chair, Illinois Environmental Health Association (IEHA)

▶ **Stacie Ealey, School**

- President- Elect - Illinois AfterSchool Network (IAN) . IAN provides support to the afterschool and youth development field through professional development, leadership and networking opportunities. IAN is the only membership organization in the state connecting afterschool and youth development professionals and is the state affiliate to the National AfterSchool Association (NAA).

Margaret Burt Public Health Partnership Award

- ▶ Mike Harris, Tazewell County Board. Mr. Harris worked to gain support for the funding to cap and close the Pekin Landfill. His hard work protects the groundwater and citizens in Tazewell County.
- ▶ gitm Foundation. Kim Keenan and Denise Urycki founded the gitm Foundation to address the issue of obesity in the Tri-County area. The Fresh Food Hub will provide locally grown fresh produce to those living in food deserts.
- ▶ Kate Legge, Tazewell County Assistant State's Attorney. Ms. Legge has been the driving force behind the DUI No Refusal Policy and impaired driving trainings for law enforcement officers. She also assists with data – Every 3 days a DUI crash occurs in Tazewell County.
- ▶ Megan Lock, Illinois Cancer Care. Ms. Lock is a patient advocate and was instrumental in assisting a client of the Breast & Cervical Cancer program with extremely expensive chemotherapy medication. She is a champion for women's health in Tazewell County.



Left to right: Mike Harris, Denise Urycki, Kim Keenan, and Kate Legge. Not pictured: Megan Lock.

Margaret Burt was a resident of Washington, Illinois. She was an original member of the Tazewell County Board of Health starting in December 1970, and became President in 1973. She was extremely active, not only in Tazewell County regarding public health, but throughout the state.

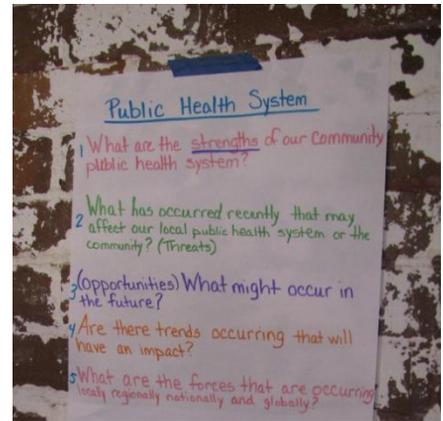
In 1971, she joined the Illinois Association of Boards of Health and the Illinois Public Health Association. She assisted both organizations in many capacities including serving on the Executive Council. She was very active in lobbying for public health issues and with the Illinois Department of Public Health Task Force looking into qualifications for public health employees.

Margaret received several awards for her dedication to ensure the public's health. She was a champion of public health, not only in Tazewell County, but throughout the state of Illinois.

Margaret Burt passed away in February of 2002. The Public Health Partnership Award was renamed in her honor.

Financial Report

REVENUES:	
Grants	
IL Dept. of Public Health	\$645,862.55
SWP Fund	\$28,042.56
IL Board of Education	\$7,401.01
IL Healthcare and Family Services	\$676,920.76
IL Dept. of Human Services	\$1,260,841.40
IL Environmental Protection Agency	\$65,985.11
Medicare	\$250.00
Other sources	\$538,819.66
IL Emergency Management Agency	\$7,931.68
US Dept. of Health & Human Services	\$102,055.78
Susan G. Komen Foundation	\$71,727.00
Total Grants	\$3,405,837.51
Taxes	
General Property	\$850,247.22
Personal Property Replacement	\$198,734.66
Total Taxes	\$1,048,981.88
Fee for Service	\$1,108,589.20
Miscellaneous	\$20,544.15
Total REVENUES:	\$5,583,952.74
EXPENSES:	
Personnel	\$3,667,841.58
Insurance	\$459,513.87
Supplies	\$296,710.65
Contractual	\$777,105.08
Mileage	\$67,715.66
Utilities & Maintenance	\$103,593.61
Equipment	\$44,732.03
Other	\$35,305.62
Total EXPENSES:	\$5,452,518.10
Net Income (Loss):	\$131,434.64



Forces of Change Assessment to determine the strengths and opportunities for the Local Public Health System.

Business Operations Division

The Business Operations Division has started a two year study relating to customer satisfaction of our services- both internally and externally. The goal is to reach and maintain an 80% customer satisfaction internally and a 90% customer satisfaction rating externally. Two different groups of staff have developed survey tools. The first group is assessing the employees of TCHD to determine the effectiveness in the areas of administrative functions, technology, and maintenance of the facilities. The second group is assessing the public on providing information through our face-to-face interactions, phone interactions and our website information. Data will be gathered twice in 2016 and again in 2017 in order to have baseline figures. Comments and scores in the surveys will provide information and suggestions for program improvements and strategy development. The overall goal is to continue to increase the customer satisfaction scores.

Birth to Five Division

	2013	2014	2015
Parents as Students	30	28	28
Prenatal Enrollments	595	551	453
WIC active caseload	1932	1,829	1,478
WIC Certifications	2526	2,508	2,303
Perinatal Referrals (APORS)	113	125	83
Car Seat Safety Checks	252	288	283
Car Seats Distributed	168	151	180
Home Visits Completed	1925	1,844	1,746
Prenatal Classes Attended			362
WIC Internet Classes			959
WIC Self Study Classes			1,410
North Pekin Satellite Appointments			414
Family Case Mgmt Caseload			899



WIC Farmer's Market was a successful event on August 5, 2015.

Birth Rates

	2013	2014	2015
Total Births (provisional)	1,592	1,539	1,449
Births to Teen Mothers	34	33	

Source: Illinois Department of Public Health

Participant Centered Services

The Birth to Five staff worked during FY15 to create a plan to implement Participant Centered Services (PCS) across all Birth to Five programs. The team was tasked with creating a plan including training, maintenance and evaluation components. Practicing the usual way of client education based on logics and sharing knowledge was not leading to the behavior changes we were expecting.

PCS is a framework for the way of doing business at WIC, for providing WIC services and placing the participant at the center of each interaction. WIC staff listens and supports participants at all levels of WIC service delivery – local, state, regional and federal. PCS shifts the focus from our agenda, as health professionals, to better serve the needs of our clients.

The team chose to use the Washington State model which incorporates the OARS visual. OARS stands for O-Open Ended Questions, A-Affirmation, R-Reflection, S-Summary. A poster was created with a picture of an oar with the acronym spelled out that will be placed in each clinic room and work area as a visual reminder for staff to incorporate these concepts.

Another model used is the Touching Hearts, Touching Minds model, which focuses on the client and what the triggers are that cause them to take action and make changes. "We all have Heart Buttons. And commercial advertisers "hit" them every day to entice us to buy their products and services. Although we are all unique individuals, our primary heart buttons can be identified—and triggered—to motivate us to take action."

Logic and facts alone will not drive behavior change, but rather our emotions will push us to change. WIC is excited to move forward with these models to interact with our clients in a way that will help connect us better to and build a rapport with our clients, while ultimately leading to long term positive nutrition and health changes.

OARS

Open Ended Questions

Affirmation

Reflection

Summary



Clinic Division

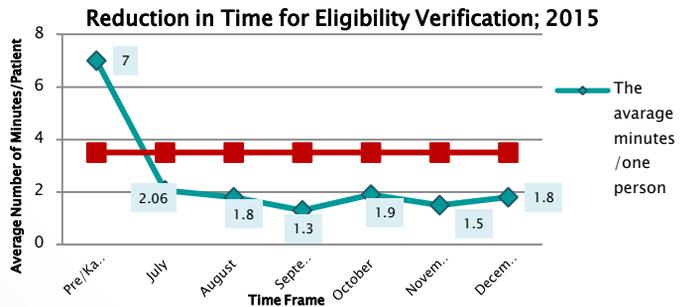
	2013	2014	2015
Hearing Screenings	2,879	1,577	624
Vision Screenings	2,496	1,496	495
H&V referrals	201	85	91
Immunizations	3,689	3,263	3461
STD Clinic Clients	174	112	114
Flu Immunizations	574	675	786
Pneumonia Immunizations	7	12	69
Blood Lead Tests	476	613	367
New Cases	4	10	16
Dental Patients	6,197	7,549	8793
Dental Patient Visits	7,477	5,515	5293
Dental Services	16,356	15,558	15,495
TB Skin Tests	788	750	692
TB Clients Served	807	762	702
Bright Smiles from Birth	965	703	567
Pregnancy Tests	184	127	101

Communicable Diseases

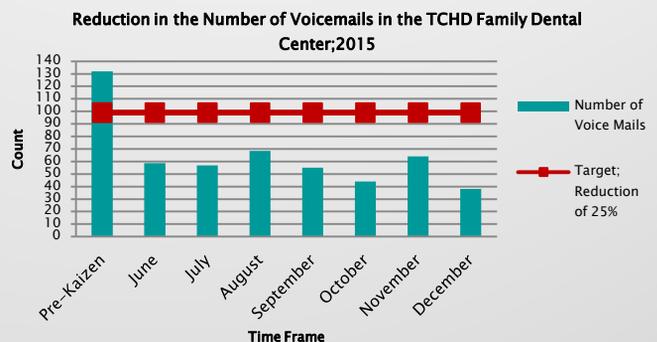
	2013	2014	2015
AIDS	0	4	0
Central Nervous System infections	0	0	0
Chlamydia	343	337	352
Cryptosporidiosis	4	0	5
Dengue Fever	0	0	0
E. Coli (STEC, 0157:H7)			5
Erlichiosis	0	1	0
Gonorrhea	43	38	37
Group A Strep Invasive	6	4	5
Hepatitis A	3	1	1
Hepatitis B	10	4	7
Hepatitis C	28	80	66
Histoplasmosis	3	2	11
ICU flu			11
Legionella	1	2	3
Listeria	0	0	0
Lyme	6	4	4
Mumps	1	0	3
Outbreak	2 noro	3 noro	13
Pertussis	3	9	9
Q Fever	0	0	0
Rabies-Human Exposure	17	15	25
Rocky Mountain Spotted Fever	1	1	4
Salmonellosis	22	7	15
Shigella	5	2	1
Syphilis	3	8	8
Tuberculosis	1	1	0
West Nile Virus	1	0	0
Yersiniosis	0	1	1
Not a case investigations			247

Dental Kaizen Project

Before implementing the Kaizen project, the average minutes spent in the process of verifying the eligibility of each patient was 7 minutes. After Kaizen the time dramatically decreased to an average of 2.06 minutes / patient, a total reduction of 70%. During the month of December, the time slightly increased to an average of 1.8 minutes per patient, compared to 1.5/patient in November and it continues to be below our reduction target goal.



After implementing the Dental Kaizen, more time can be spent answering the phone rather than patients leaving a voicemail. After implementing the Kaizen project, the average number of voicemails decreased radically by 55.3%. The average number of hang-ups, also, decreased by 37.4%. The numbers continued to decrease during the month of July. In August, the average number of voicemails and hang-ups increased slightly, but continues to be below our target goal of 25% reduction. As of December, the average number of voicemails decreased by 40.6%. The average number of hang-ups, also, decreased by 47.4%, when compared to the previous month, and both numbers continue to be below the reduction target goal of 25%.



Community Division

	2013	2014	2015
Break the Habit - Tobacco	342	159	397
Illinois Breast & Cervical Cancer	382	228	198
Komen/Other	178	103	139
Breast Cancer Diagnosed	8	4	2
Cervical Cancer Diagnosed	1	0	0
Tazewell County Youth Board	60	75	55
Tazewell Teen Initiative	65	70	93



Wear Red for Women's Heart Health on February 5, 2015.

Tazewell Teen Initiative Town Hall Meeting

The Tazewell Teen Initiative sponsors a town hall meeting each year to educate parents and students and prevent underage drug use. Town Hall Meetings are funded by the Drug Free Communities Grant of the Community Division.

Dee-Mack High School held a Town Hall meeting on September 9, 2015. Parents, students and faculty members came together to listen to Chris Schaffner, of the Human Service Center, discuss e-cigarettes and current trends surrounding their use.

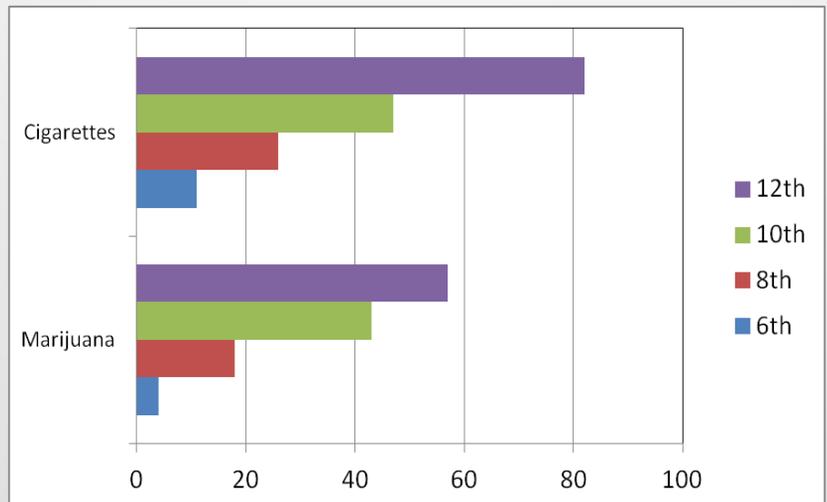
Mr. Schaffner clarified what electronic nicotine delivery systems (ENDS) are, health dangers associated and marketing ploys designed to entice young users.

According to a study by the National Institute of Health, students who have used electronic cigarettes by 9th grade are more likely than others to start smoking traditional cigarettes within the next year.

In the 2014 Illinois Youth Survey, over 86% of Tazewell County 12th graders surveyed did not use cigarettes in the last year.

Prevention is working!

Percentage of students who said it would be easy to access cigarettes and marijuana



Environmental Health Division

	2013	2014	2015
Routine Food Inspections	1,492	1,463	1,560
Foodborne Investigations	57	20	62
Food Est. Employee Training	842	507	1,170
Potable Water Inspections	57	41	41
Water samples Tested	354	680	344
Wastewater/sewage Inspections	71	116	79
Loan Inspections	319	198	151
Nuisance Investigations	146	179	171
Solid Waste Inspections	73	58	30
Pool/Beach Inspections	178	204	177
Landfill Inspections	41	37	50



Students observing a beehive at Environmental Education Day.

Tazewell County Pekin Landfill Project



Protecting the environment from the rapid seepage was the goal. Tazewell County has taken steps to contain issues at the Pekin Landfill.

On August 25, 2014, UCM construction company began the process to cap the Pekin Landfill. During the first 7 weeks, work was sporadic and delayed due to rain.

When the weather allowed, progress was made:

- UCM finished placing 100 % of the protective soil in the areas used for haul roads by November 2014.
- The vents for the gas system were completed .
- The west borrow area was finished and replaced the top soil.
- The crossing area on Towerline Road was cleaned up.



The cap will reduce the quantity of leachate penetrating due to the new clay barrier. Leachate will continue to be generated, but smaller amounts. The new protective cap and vegetation will also help absorb and transpire moisture. The waste will continue to be degraded due to the existing leachate in the landfill and the new percolation entering into the waste from precipitation through the cap. Over time, leachate levels should be reduced.

Top: Roadwork improvements for work crews.

Bottom: Brush and trees were cleared for landfill capping.

UCM completed work in 2015. Tazewell County has properly capped the Pekin Landfill!

Office of Planning

Volunteer Management for Public Health Emergencies

Since the tornado of 2013, the City Ready Initiative (CRI) health departments, Marshall, Peoria, Stark, Tazewell and Woodford, have been working on a Volunteer Reception Center (VRC) plan.

In January 2014, the CRI conducted a table top exercise dealing with the volunteer concept and determined from our improvement plan that a regional VRC would support local health departments during an emergency.

Since that time, the CRI has created a memorandum of understanding with Illinois Central College to host a VRC. ICC hosted AmeriCorps, who handled volunteer management during the tornado response before being taken over by Bethany Community Church. ICC is committed to offering support during a public health emergency.

The VRC can be used for spontaneous volunteers and to bank volunteers during an extended event (e.g. mass vaccination campaign). Volunteers will be shared among all of the CRI health departments as they are needed during an emergency response.

All of the CRI can utilize the VRC at one time (mass vaccination across counties) or it may be activated to support one CRI health department that is dealing with a public health emergency. As an example, if TCHD had to mass vaccinate due to a Hepatitis A outbreak from a licensed food facility, the VRC would be activated. The other CRI health departments would receive, stage and deploy volunteers to sites to provide Hepatitis countermeasures.

The VRC exercise as part of a 3 day full scale exercise on October 1, 2015. The exercise simulated receiving requested volunteers from health departments outside of the CRI region, staging, training and preparing for deployment and demobilization. It is important that health department employees be aware they may be tasked to fill a role at the VRC during a response. Business Operations, Community and Planning Divisions participated in this exercise. Hopefully, an opportunity in the future to expand this to a TCHD exercise on volunteer management will arise.



*Left: Volunteers receive training in VRC exercise.
Right: Wrap-up meeting for exercise staff.*

School Division

	2013	2014	2015
<i>21st Century Schools</i>			
Number of Schools	23	25	25
Total Enrollment	1,239	1,136	1,463
Average Daily Attendance	417	424	379
Teen Pregnancy Prevention	1,812	1,610	1,316
Hygiene/Maturation	480	996	230
Exercise/Nutrition	353	909	462
Mental Health			50
Misc. Health Education	678	653	230
Olweus Bullying Prevention		750	762
<i>Mental Health Educator Trainings</i>			
Olweus Bullying Prevention			59
SOS: Signs of Suicide			293

Olweus Bullying Prevention was a collaborative grant with Pekin District 108 to decrease bullying incidents in junior highs. Signs of Suicide is training for school personnel to identify behaviors of youth contemplating suicide.

School Division Summer Camps “CATCH” Healthy Habits

CATCH (Coordinated Approach to Child Health) is an 8 week, evidence-based, coordinated school health program designed to promote physical activity, and healthy food choices. CATCH Kids Club (CKC) is the after-school, summer camp version of the program. The CKC curriculum incorporated teaching sessions that include stories, games, songs, handouts, nutritional facts, healthy snack recipes, and home letters to families. CKC also included fun activities to keep kids moving.

For the fourth year, health educators provided CKC programming to TCHD 21st Century Summer Camp sites at Wilson School in Pekin and Georgetowne School in North Pekin. CKC classroom lessons teach children that there are no “good,” or “bad” foods but there are foods that are healthier options. The children also learn the importance of eating a variety of fruits, and vegetables, limiting sugary beverages, limiting screen time and the benefits to physical activity. CKC physical activities are planned so each camper moves during the entire time. There are no “winners,” “losers,” or “outs,” everyone works together as a team to have fun, and move their bodies!

Children are given incentives such as water bottles and jump ropes to continue the CKC healthy habits. Additionally, each camp has CKC equipment so that camp staff can utilize it each day when planning required physical activity. Families are encouraged to lead a healthy lifestyle through take home letters describing CKC, as well as recipes, and a list of Farmer Markets in Tazewell and Peoria Counties. The CKC program reached approximately 90 children each week.

