



Report to the Board of Health on July 2024 Activities

PURPOSE

Each month the Winnebago County Health Department (WCHD) Leadership Team provides this summary report to the Board of Health on WCHD programs and services. The report is organized into the 10 Domains that follow the 10 essential public health services with health equity as the center as identified by the Public Health National Center for Innovations and the Centers for Disease Control and Prevention.

LEADERSHIP TEAM

Winnebago County Health Department Leadership Team

- Dr. Sandra Martell, RN, DNP – Public Health Administrator
- Michael Jarvis, MPH – Director of Public Health Policy
- Cheryl Floyd, MEd – Director, Center for Health Promotion and Wellness
- Cynthia Hall, MPH – Director, Strategic Initiatives
- Todd Kisner, MPH – Director, Center for Health Protection
- Tiffany Levine, MSN, RN - Director, Center for Personal Health Services
- James Keeler CPA, MBA – Director, Finance
- Patrick Ngum, MPH – Director, Data and Quality
- Rebecca Lyons, MPH – Director, Public Health Preparedness
- Todd Marshall, BS, LEHP – Director, Center for Environmental Health Improvement
- Katherine O'Toole, MPH, CPH – Director, Communications

The 10 Essentials of Public Health Services

To protect and promote the health of all people in all communities

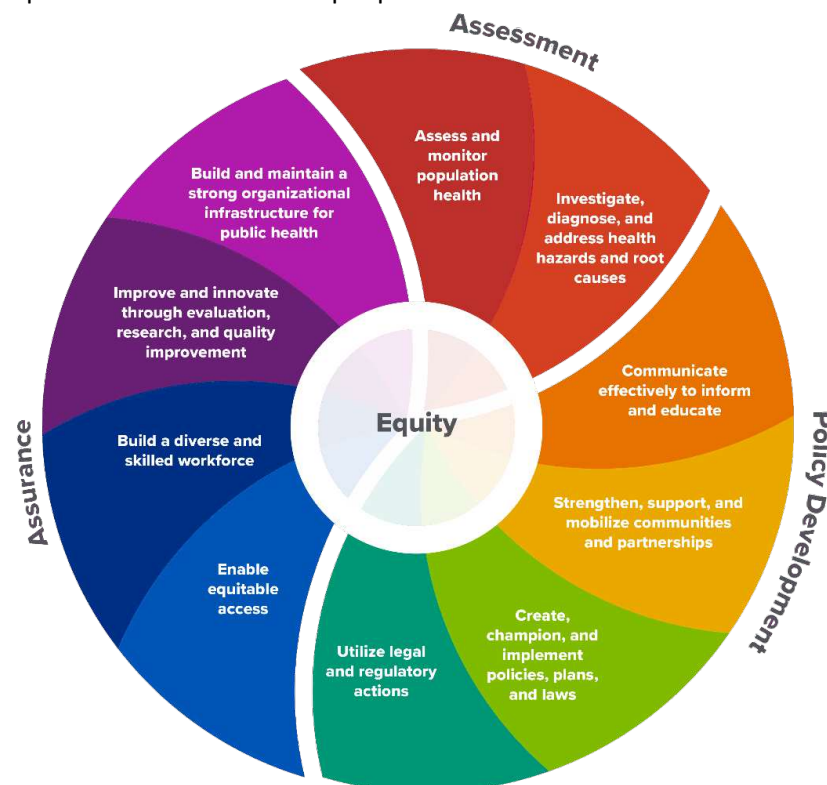


Image courtesy of the Centers For Disease Control and Prevention, available online 02/11/2022 at:

<https://www.cdc.gov/publichealthgateway/images/publichealthservices/10-essential-public-health-services.jpg?noicon>



Assessment

1. Monitor Health

Assess and monitor population health status, factors that influence health, and community needs and assets.

Communicable Diseases & Conditions In Winnebago County

EMERGING DISEASE

As of July 31, 2024, there are currently no cases of Highly Pathogenic Avian Influenza A (H5N1) virus (cattle nor human) in Winnebago County. There have been thirteen (13) positive H5N1 human cases, none in Illinois. Four (4) of these cases were associated with exposure to sick dairy cows and nine were associated with exposure to avian influenza A (H5N1) virus-infected poultry. Based on the information available at this time, this infection does not change the CDC's current H5N1 bird flu human health risk assessment for the U.S. general public, which the agency considers to be low.

The USDA is reported one hundred and eighty-nine (189) dairy cow herds in 13 U.S. states have confirmed cases of avian influenza A (H5N1) virus infections, with the number continuing to grow. For more information on dairy farms with H5N1 cases identified in cattle, go to: <https://www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza/hpai-detections/livestock>



Environmental Health

WCHD's Environmental Health Improvement Center permits all public swimming pools and beaches in Winnebago County overseeing approximately one hundred (100) public pools and six (6) beaches. As part of beach inspection protocol, the beach operator must submit a shallow and deep-water sample every two weeks for analysis to determine the presence level of E. Coli in the water within the boundaries of the beach.

In July, Winnebago County experienced an unprecedented amount of frequent heavy rain which presented several challenges that beaches in maintaining good water quality standards. Beaches in Winnebago County were experiencing high levels of E. Coli in the water due to runoff from the surrounding beach surface. Once unacceptable levels were identified, WCHD required these beaches to be closed and required another round of samples be taken immediately. This typically resulted in the beach being closed for at least one day due to the turnaround time to receive satisfactory results from the second round of samples. In all cases, that second round of samples were within the acceptable limits. To avoid any future heavy rain events causing their closure, WCHD suggested beach operators install a natural barrier to absorb any surface water from entering into the body of water.



Assessment

2. Diagnose & Investigate

*Investigate, diagnose, and address health problems
and hazards affecting the population.*

Communicable Diseases & Conditions

On July 15, the Illinois Department of Public Health (IDPH) rolled out their new disease reporting system, Illinois Disease Surveillance System (IDSS). This is the first release of the program that includes sexually transmitted infections (STIs) and tuberculosis. The second phase will come in late Fall for all other communicable diseases.

Opioid Overdose

The WINNIE Harm Reduction Program provided outreach at the Winnebago County Courthouse three half-days each week in July. In addition to the Courthouse, the staff provided training and outreach at the Carpenter's Union, Remedies, and UWHealth Emergency Medical Services (EMS).

Environmental Health

WCHD's Center for Environmental Health Improvement's Neighborhood Code Enforcement (NCE) staff were intensely involved with residents that were impacted by the extreme flooding that occurred over a weekend in the middle of July. The majority of calls and website submittals during that time was residents that were impacted with water intrusion into their basements. The most severe were located in urban parts of the City which contained older housing stock and served as a high rental district. These old houses have limestone basement walls that are not water tight. The initial concern was for the safety of residents and alerting them to be aware of possible electrical issues when entering the basement. WCHD staff assisted rental occupants by ensuring effective communication with the owner of the house. WCHD strongly recommended that the owners hire a professional to do the cleanup. WCHD made frequent visits to these impacted houses for communication and oversight of the cleanup. General information was provided on what could be salvaged and what needed to be discarded as some areas experienced sewage backups. Once the water was removed, WCHD continued to stress the importance of removing all moisture. For the long-term solution, WCHD requested the owner repair all gaps and cracks, and reinstall waterproof barriers where needed. Lastly, WCHD suggested all affected parties to use dehumidifiers, keep windows open for air circulation, apply any possible drainage improvements, maintain clean gutters, and store items off the floor in the future.

Following the heavy rains and urban flash flooding events, WCHD increased educational outreach regarding the difference between the floodwater mosquitoes and the mosquitoes that carry West Nile virus (WNV). WCHD educated residents that WNV-carrying mosquitoes prefer stagnant water in man-made containers and advised residents to empty these containers weekly.



3. Communicate

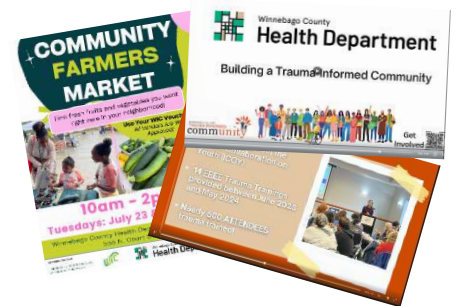
Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.

Digital Media Initiatives

In July, WCHD digital messaging focused on prevention of foodborne illnesses from summer cook outs, vector borne illness from mosquitoes and ticks, and severe health outcomes from heat and drowning. Additionally, WCHD posted the FY2025 budget on its website and shared information on a proposal opportunity for the Mental and Behavioral Health Advisory Committee. WCHD promoted the WIC Community Farmers Market by developing and distributing handouts and posting on the website. WCHD also created a short video explaining the impact of trauma trainings hosted by WCHD toward building a trauma informed community.

In response to severe weather in the area, which brought flooding and damaging winds, WCHD communicated health and safety messages to residents including staying out of flood water, waiting to pump water out from a basement to prevent structural damage, testing wells before use, and safe clean-up of moisture to prevent mold. Additionally, WCHD developed bilingual handouts, in English and Spanish, to assist food establishments in floodwater clean-up procedures.

WCHD also developed a bilingual handout to promote routine grease trap maintenance to food establishments.



4. Mobilize Community & Partnerships

Strengthen, support, and mobilize communities and partnerships to improve health.

Youth Leadership Council

WCHD is actively recruiting youth for the Youth Leadership Council 2024-2025 (YLC). To encourage nominations, emails were sent to community partners who work with youth. In addition, WCHD attended Bookerfest 2024, an event that drew approximately three hundred and seventy-five (375) people. At this event, WCHD was able to secure three (3) nominations for students to join the YLC.

**Maternal, Infant, and Child Health Team**

The Maternal, Infant, and Child Health Team (MICHT) continued to prepare for the Respectful Care Event. The Health Promotion and Wellness Director will work with WIC and iGrow staff to develop a method for presenting the safe and respectful care handouts to program participants.

Opioid Response

The Winnebago County Opioid Response Team met in July to review current opioid data. It was reported that residential bed continued to be in high demand in Winnebago County.

Trauma Informed Community

The Violence Reduction Workgroup continued to meet monthly. With funding from the Winnebago County Community Mental Health Board (WCCMHB), the following trainings will be presented this year:



- Trauma Informed Conflict Resolution in Teams (virtual) - 8/15 - 1 - 3 pm
- Suicide Prevention (virtual) - 9/26 - 1 - 3 pm
- Trauma & LGBTQ+ Identity (virtual) - 10/28 - 10 am - 12 pm
- Trauma Informed Supervision for Supervisors (virtual) - 1/30 - 12 - 2 pm
- Trauma Informed De-Escalation (in-person) - 5/15 - 10 am - 12 pm

Information on all upcoming trainings can be found on the WCHD website [Trauma Trainings page: publichealth.wincoll.gov/freetraumatrainings](https://publichealth.wincoll.gov/freetraumatrainings)

Additionally, WCHD recently purchased several trauma informed films to help engage the public and use as educational tools about different types of trauma. WCHD will work with partners to present these films to the community.

Connecting Families To Services

WCHD continued work with Alignment Rockford on the Universal Newborn Support Systems workgroup regarding models and funding to support universal home visiting to families in Winnebago County. The workgroup has reviewed models currently being implemented in Chicago, Kane, and Stephenson Counties in Illinois. Models include Nurse-Family Partnership, Family Connects, Family Bridge, First 5 LA (Los Angeles County, CA) Welcome Baby Framework, and Baby Talk. The vision is to maintain coordination through the MIECHV (iGrow) program.

WCHD has been approached to expand its participation in the Integrated Referral and Intake System (IRIS) for clinic referrals including WIC and Family Planning. WCHD is considering transitioning from Visit Tracker, currently used by MIECHV, to IRIS to support local referrals and coordination.



5. Policies and Plans

Create, champion, and implement policies, plans, and laws that impact health.

Strategic Initiatives

The workgroups met in July with the following updates:

- **Assessors** reviewed data concerning violence reduction in Winnebago County and compared the local homicide rate with statewide numbers and other counties in Illinois. They also discussed the need for further analysis to understand the data assess whether goals were met, and determine alignment with the State and National trends.
- **Assurance** continued attending each of the strategic workgroups and health priority groups to ensure they remain on track with their goals and objectives. They're also ensuring that grant deliverables align with the three health priorities.
- **Collaborators** continued to update, enhance, and categorize their current list of community partners. They shared invitations for Trauma Trainings and are providing additional IPLAN outreach.
- **Organizers** continued their discussion on Implicit Bias for key messages and continue to search for more background information on how Implicit Bias is defined and can be corrected. They are preparing to present on Implicit Bias at an All Staff presentation on August 29, 2024.
- **Policy Makers** discussed etiquette and expectations for staff on zoom meetings. They continue to review the Maternity Leave Policy and potential changes. They began developing policy on communications with diverse populations.
- **Reporters** used data provided from the Assessors to work on showcasing dashboards on WCHD websites for all three health priorities. They continued communication efforts on the three health priorities and they are working to finish webpages on the dashboards for health priorities. They are working to develop a messaging plan and draft messages for Collaborators to maintain contact with IPLAN partners that participated in the November workshop and/or responded to survey to maintain communications regarding forms of power and addressing health equity to help maintain/build relationships.
- **Reaccreditation** continued their efforts in assigning top three powers to organizations who participated in the community partners assessment. They also worked to make needed changes for reaccreditation submission.
- **Workforce Development** reviewed the Orientation Program Policy and provided feedback to ensure that the policy appropriately reflects our current New Employee Orientation. The HIPAA Policy was updated and will be used in future presentations.



Public Health Preparedness

On July 11, WCHD hosted an After-Action Review meeting for the June 2024 Luther Center Response and Recovery Operation with community partners from the City of Rockford (Including the Rockford Fire Department, Health and Human Services, and Housing Code Enforcement), Winnebago County ESDA, Red Cross, Rockford Mass Transit District (RMTD), and the Luther Center Property Management. Information from this meeting will be compiled into an After-Action Report and Improvement Plan to assist the community in future response and recovery efforts.

The Center for Public Health Emergency Preparedness assisted in logistics and planning for WCHD's Community Farmers Market which was held at the health department on July 23 for the WIC participants in the farmers market voucher program.

Policy Updates

During the month of July, the following policies were reviewed and approved by the Board of Health:

- 050-0605-24: Orientation Program Policy
- 1133-0510-24: Information Security
- 1100-0407-15: Communication Services for Non-English-Speaking Clients
- 1101-0421-15: Communication Services for Hearing/Vision impaired Clients

Record Retention

No records were destroyed during the month of July.

Reaccreditation Updates

On July 29, WCHD submitted the revised documentation needed for review by the Public Health Accreditation Board (PHAB). The reviewer will provide feedback in approximately sixty day with next steps, which may include a potential site visit by the PHAB team as a part of the Reaccreditation process.

IPLAN Updates

In July 2024, WCHD continued its collaboration with community partners in implementing IPLAN 2025 (Illinois Plan for Local Assessment of Needs) and advanced to the third phase guided by the MAPP 2.0 (Mobilization for Action through Planning and Partnership) framework. A preliminary review of the Community Health Assessment (CHA) data has been conducted, highlighting priority concerns within the community.

To ensure that the IPLAN 2025 aligns with the needs of the community, WCHD is planning a prioritization exercise. This exercise will involve both local residents and partner organizations and will be pivotal in identifying key health issues that will be addressed in the next IPLAN cycle.

The prioritization process will kick off internally during the WCHD All Staff meeting on August 29, 2024. At this meeting, staff members will review CHA data and prioritize the most pressing health concerns for the community. This internal step is essential for setting the groundwork for broader community involvement, ensuring that IPLAN 2025 targets the most significant health challenges identified.

Policy
Development

6. Laws & Regulations

Utilize legal and regulatory actions designed to improve and protect the public's health.

The Local Health Protection grant funding (\$5 million) was not restored to its previous level. To strategize regarding other potential funding sources, the Northern Illinois Public Health Consortium (NIPHC), including WCHD, meet on July 19.

In July, WCHD completed the first of three inspections of all High-Risk food establishments and ensured that all were current in paying their annual food permit fee this year. Next, WCHD's Food Program will work to complete inspections for all the Medium Risk facilities, along with the second round of inspections for High-Risk establishment. The Food Program is on target to complete all inspections for the IDPH Local Health Protection Grant deliverables.

The standardization process of inspection continued with in-house quizzes, having our food coordinator shadowing inspectors, and periodically having two inspectors conduct simultaneous inspections at the same facility to compare their findings.



Assurance

7. Equitable Access

Assure an effective system that enables equitable access to the individual services and care needed to be healthy.

Health Education Services

WCHD's WIC program started the Farmers Market Voucher program on July 10. The Program received nine hundred (900) booklets with a value of \$30 each for a total of \$27,000. In an effort to make fresh produce more accessible to our WIC participants to redeem, WCHD hosted a Community Farmers Market at the health department. During the farmers market that was hosted at WCHD, a total of 248 booklets were handed out which equals \$7,440. Within twenty-five (25) days all 900 booklets were handed out, which equals \$27,000. The WIC staff will continue to communicate with clients to encourage use of the booklets and improve the redemption rate. The season ends mid-October.

In July, igrow staff attended the Community Farmers Market held at WCHD and enrolled seventeen (17) families into the igrow program. WCHD enrolled families at the Midway and Edgebrook Farmers Market events as well. WCHD's igrow program is working with partners to discuss collaboration regarding car seat education.





WCHD's Substance Use Prevention Program worked with two schools currently being served by the program (RESA Middle School and Flinn Middle School) to request a change in the grant communications campaign from marijuana to vaping due to the many vape devices staff have found at these schools. This change was approved. The Communications Campaigns for 2024-25 will be at Harlem Middle School for underage drinking, and, RESA Middle School and Flinn Middle School for vaping.

Personal Health Services

In July, WCHD's Better Births Outcomes (BBO) Program reached 87% of caseload goal which is a comparable increase to the 72% of caseload goal from the month prior. To provide services for the increased caseload, the nurse from the High-Risk Infant Follow-Up program is assisting the BBO nurse.

The Illinois Breast and Cervical Cancer Program continued to work to streamline the application process for clients and increase caseload. Program staff met with the Illinois Department of Public Health Program Directors to discuss potentially helpful improvements to the application process including PDF fillable applications or application available for submission through the on IDPH website.

Health Equity Initiatives

In July, WCHD submitted the final report for the Partnering 4 Vaccine Equity grant.

Health equity initiatives started as part of the PAVE (Partnering for Vaccine Equity) grant, continued in July. WCHD conducted outreach at Crusader Clinic's Community health fair at 1200 W. State Street on July 13 and at Bookerfest 2024 at the African American Resources Center at Booker (Booker Washington Community Center) on July 20. These efforts continued to engage community members to participate in the Strong Neighborhoods efforts by collecting email addresses to receive health updates from WCHD. When participants provide their email address for the Strong Neighborhoods email updates, they received a Save-A-Lot shopping bag and a chip clip with contact information for WCHD.



Assurance

8. Diverse & Skilled Workforce

Build and support a diverse and skilled public health workforce.

WCHD is currently recruiting for the following positions:

- Clerk II / WIC Program
- Case Manager / Drug Overdose Prevention Specialist
- Case Manager Disease Investigator
- Public Health Nurse I – Temporary Part-Time



In July, both Clerk II positions for the Center for Personal Health Services were filled. This Center continues to recruit for a part time temporary nurse for approximately 20 hours per week.



With an additional Breastfeeding Peer Counselors completing the 5-day Certified Lactation Specialist Course (CLS), WCHD's capacity has expanded to seven (7) CLS/CLCs (Certified Lactation Counselors) and two (2) IBCLCs (Internationally Board-Certified Lactation Consultant).

The Center for Environmental Health Improvement submitted an agreement to the Board of Health for the approval of a student intern to conduct Summer Foods Inspections, swimming pools, and some vector surveillance activities. The Center for Environmental Health Improvement also began interviewing for the front counter clerk position which oversees all operations at the front counter, all general office duties, and maintain office supplies.

Capacity and Cost Assessment (CCA)

Work continued on the Capacity and Cost Assessment (CCA). The timeline for completion has been extended to August 15, 2024.

Training

In July, some WCHD staff had the opportunity to participate in various trainings including:

- Communicable Disease staff from the Center for Health Protection attended trainings on the new Illinois Disease Surveillance System (IDSS) prior to the release on July 15.
- Some staff participated in an ICS 400 class
- Clinic and nursing staff completed Contraceptive Methods and Guidelines for Their Use from the Reproduction Health National Training Center (RHNTC).

Staff from WCHD's Environmental Health Improvement Center are preparing to host and attend the Region 1's Food Conference being presented by the Illinois Department of Public Health on September 5. The focus of this conference is to educate staff on the changes to the newly adopted 2022 FDA Food Code.

*Assurance*

9. Improve & Innovate

Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.

Quality Improvement Initiatives

In July 2024, WCHD continued to advance its Quality Improvement (QI) Plan goals and objectives as well as center level/program level QI initiatives. Efforts to diversify QI teams showed progress, with 75% of teams now including members from outside their center or program, moving towards the 80% target. Implementation of QI projects through the PDSA cycle is ongoing, with 30% of projects having made changes to improve the current process. The Orientation Program Policy was presented to WCHD leadership at the Leadership and Supervisor meeting, with plans to incorporate the required QI trainings to be completed within ninety (90) days of onboarding. These activities reflect WCHD's commitment to fostering a culture of continuous quality improvement and enhanced public health outcomes.



WCHD is dedicated to advancing QI initiatives using the Plan-Do-Study-Act (PDSA) methodology. This structured approach was applied across multiple levels, including staff, program, and department, with over fourteen active QI initiatives at various phases of the PDSA cycle.

Table 1. Update QI PLAN Goals and objectives

LEADERSHIP AND SYSTEMS THINKING		Comments July 2025
Goal 1: Advance a culture of continuous quality improvement within Winnebago County		
Objective 1.1	Review the Quality Improvement Plan including Quality Improvement Tools with Leadership and Supervisors by January 2024.	Completed
Objective 1.2	Develop a quality improvement initiative aligned with the Strategic plan for each Center by January 2024.	Completed
Objective 1.3	Present the quality improvement initiatives to be recommended by the Quality Committee and adopted by Board of Health by February 2024.	Completed
Objective 1.3	Ensure diversity of perspectives within Quality Improvement Teams by including at least one member outside of the center/program (80% target by February 2024).	75% of QI groups have a disruptor (EHI QI team now has disruptors for their QI project)
Objective 1.4	Present an overview of their quality improvement initiative at the Annual All Staff by December 2024.	Scheduled for December 2025
QUALITY IMPROVEMENT INITIATIVES		
Goal 2: Improve the quality of Winnebago County Health Department interventions and		
Objective 2.1	Identify the process flow for each quality improvement initiative targeted for improvement by April 2024.	80% of QI initiatives have identified or drafted a process flow.
Objective 2.2	Utilize least one Quality Improvement tool to identify changes to current processes for each quality improvement initiative by May 2024.	Roughly 30% of QI teams have utilized at least one QI tool to identify changes to current QI initiatives.
Objective 2.3	Implement at least one change to improve the current process for each quality improvement initiative through the PDSA cycle by June 2024.	30% of QI initiatives have implemented a change
Objective 2.4	Analyze the impact of the change to determine the ACT (adopt, adapt, abandon) of PDSA cycle and implement by August 2024.	10% of QI initiatives have analyzed the impact of change to determine the determine the next phase of their QI project which involves adopting, adapting or abandoning the implemented change.
WORKFORCE DEVELOPMENT		
Goal 3: Enhance workforce competency in Quality Improvement		
Objective 3.1	Required Quality Improvement trainings will be completed by 100% of new employees within 90 days of onboarding.	After incorporating QI trainings into the Orientation Program Policy, WCHD leadership is working on integrating QI trainings into the New Employee orientation presented to WCHD's new employees.
Objective 3.2	Review and revise the Workforce Development Plan to ensure accessibility and relevance to web-based training by March 2024.	WCHD's Workforce Development Team will be incorporating updated trainings and links to the Tier training calendar located in WCHD's performance management system, CEMP.
COMMUNICATION		
Goal 4: Ensure transparent communication and reporting of quality improvement efforts to		
Objective 4.1	Report monthly on quality improvement initiatives related to the PDSA cycle to the Director of Data and Quality by March 2024.	Ongoing
Objective 4.2	Present update on the quality improvement initiative to the Board of Health Quality Committee at least once during the calendar year by December 2024.	Ongoing
Objective 4.3	Provide an annual report via Storyboard for each quality improvement initiative by December 2024.	Scheduled for December 2025
Objective 4.4	Post storyboards for quality improvement initiatives on the Winnebago County Health Department website by January 2025.	Scheduled for January 2026



Assurance

10. Organizational Infrastructure

Build and maintain a strong organizational infrastructure for public health.

Governmental Organizations

The Public Health Administrator and the Chairman of the Winnebago County Board continued their routine updates with a focus on environmental health concerns including the Winnebago Landfill and the Winnebago County Groundwater Ordinance. The Chairman was briefed on the establishment of an Opioid Fatality Review Team to conduct more intensive review of opioid overdose fatalities at the individual level, including interview with Next of Kin (NOK) to identify potential system changes to intervene to prevent fatalities. The Winnebago County Coroner Jennifer Muraski and City of Rockford Fire Chief Michele Pankow have been working with Dr. Martell to establish this process. As the Public Health Administrator, Dr. Martell also participates on the Domestic Violence Fatality Review Team (DVFRT) convened by the City of Rockford.

Advocacy continued through the Northern Illinois Public Health Consortium to restore the statewide \$5 million dollar budget cut to the Local Health Protection Grant for FY2025. Dr. Martell reached out to Senators Syverson, Stadelman, and Chesney and Representatives Cabello, Sosnowski, Vella, and West to allocate \$5 million dollars of the undesignated \$30 million dollars (\$15 million from Senate; \$15 million from House) that was included in the Illinois Department of Public Health budget.

Non-Governmental Organizations

The Request for Proposal (RFP) for the consultant to review best practices addressing the Coordinating Entity/Group was posted on July 10, 2024 through the Community Foundation of Northern Illinois, Mental Health Board, and Winnebago County Health Department websites. Additional outreach to potential respondents was sent through the Association of Community and Mental Health Authorities in Illinois (ACMHAI), and National Alliance on Mental Illness (NAMI). The Advisory Committee is currently scheduled to meet with Mary Ann Abate and Dr. Bill Gorski of the Winnebago County Community Mental Health Board (WCCMHB) to develop the scoring rubric and vet the consultant candidates.



Data Appendix

1. Monitor Health

Communicable Disease

Disease	July 2024	July 2023	2024 Year Total	Calendar Year 2023	Calendar Year 2022
Anaplasma phagocytophilum (formerly HGA)	1	0	4	1	0
Botulism Infant	0	0	0	0	1
Campylobacteriosis	4	3	39	54	29
Candida auris, clinical	0	0	2	0	0
Candida auris, screening	0	0	0	1	0
Carbapenemase Producing Organism - Clinical	1	1	4	3	0
Carbapenem Resistant Organism	1	0	2	5	8
CE - Jamestown Canton Neuroinvasive Disease	0	0	1	0	0
Chlamydia	107	160	1021	1874	1832
Cryptosporidiosis	1	1	5	9	5
Cyclosporiasis	2	1	2	2	1
Dengue	0	1	0	1	0
Ehrlichia chaffeensis (formerly HME)	0	0	1	0	1
Ehrlichia muris euclairensis infection	0	0	1	0	0
Gonorrhea	35	17	254	417	704
Haemophilus Influenzae Invasive Disease	0	0	4	8	5
Hemolytic Uremic Syndrome (HUS) Post Diarrheal	0	0	0	2	0
Hepatitis A	0	0	2	8	6
Hepatitis B Chronic	1	4	16	29	29
Hepatitis C Virus Acute Infection	0	0	5	3	3
Hepatitis C Virus Chronic Infection	19	3	60	100	92
Hepatitis C Virus Perinatal	0	0	0	0	1
Hepatitis Delta	0	0	0	1	0
Histoplasmosis	0	0	3	2	5
HIV	0	1	6	26	26
Influenza with ICU Hospitalization	2	0	22	18	44
Legionellosis - Legionnaires Disease	1	2	8	13	13
Listeria Invasive Disease	0	0	1	0	1
Lyme Disease	10	9	31	44	33



Malaria	0	0	0	1	1
Meningococcal (Neisseria Meningitidis) Invasive Disease	0	0	1	0	0
Monkeypox	0	0	0	0	5
Mumps	0	0	0	2	1
Pediatric Influenza Death	0	0	0	0	1
Pertussis	3	0	6	11	2
Rabies, Potential Human Exposure	6	6	34	70	38
Salmonellosis	3	4	23	41	43
SARS-CoV-2 Infection (COVID-19)	0	303	578	8345	32372
SARS-CoV-2 Infection (COVID-19) with ICU Hospitalization	3	0	3	0	0
Shiga toxin-producing E. coli (STEC)- O157:H7	0	0	0	2	0
Shiga toxin-producing E. coli (STEC)- Shiga toxin positive, non-O157 serotype	0	0	0	3	5
Shiga toxin-producing E. coli (STEC)- Shiga toxin pos, not cultured or serotyped	2	1	9	18	12
Shigellosis	2	1	7	9	16
Spotted Fever Rickettsioses	0	0	3	0	2
Streptococcal Disease Invasive Group A	0	1	14	25	25
Streptococcal Disease Invasive Group A with Necrotizing Fasciitis	0	0	0	2	3
Streptococcal Toxic Shock Syndrome	0	0	0	1	2
Streptococcal Toxic Shock Syndrome with Necrotizing Fasciitis	0	0	0	0	1
Streptococcus Pneumoniae - Non Drug Resistant Invasive Disease (< 5 years)	0	0	0	1	0
Syphilis	5	8	69	108	99
Tuberculosis	1	0	2	4	8
Varicella (Chickenpox)	0	0	3	7	8
Vibriosis	0	0	0	5	1
West Nile Virus Neuroinvasive Disease	0	0	0	2	0

Environmental Health

Radon

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Radon Screenings	4	0	6	2
Average (pCi/L)	5.3	-	4.5	4.0
Max (pCi/L)	9.1	-	9.1	6.2
Radon Test Kits Purchased	11	0	30	9
Average (pCi/L)	Invalid	invalid	6.3	5.4
Max (pCi/L)	n/a	invalid	15.2	15.8
Phone Calls	0	1	7	5
Units Reported Mitigated	0	0	0	0

Non-Community Water Wells

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Non-Community Water Sampled	10	8	77	27
Non-Community Samples Positive	0	0	0	0

2. Diagnose and InvestigateEnvironmental Health

Creating a Lead Safe Rockford

	Goal	Actual	Percent
Units Enrolled	200	53	27%
Inspections	160	62	39%
Mitigated Units	140	22	16%

Testing Lead in Water

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Samples Taken & Analyzed	4	1	6	14
Number Exceeding IEPA Lead Level	0	0	0	0
Average Lead Content	1.3	1	0.9	1
Maximum Lead Content	1.8	1	1.8	1



Food Complaints

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Foodborne Illness Complaints	5	2	18	26
Foodborne Illness Investigations	5	2	18	2631
Non-Foodborne Illness Complaints	31	24	141	149

Housing Complaints

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Housing Complaints	74	72	352	446
Nuisance Complaints	18	20	142	174
Survey Complaints	0	3	120	104
Received Complaints	97	94	592	753
Re-Check on Complaints	229	322	1822	1791

Wells & Septic

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Well Complaints	4	1	19	13
Septic Complaints	4	19	50	45

Food Inspection Performance Indicator Risk Factors

Risk	Violation														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Total	38	40	31	0	29	7	0	13	4	132	0	0	19	0	22
High	14	16	12	0	4	7	0	11	4	79	0	0	11	0	17
Medium	22	23	16	0	11	0	0	2	0	24	0	0	0	0	3
Low	2	1	3	0	14	0	0	0	0	29	0	0	8	0	2

Risk	Violation													
	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Total	64	0	1	2	5	13	54	54	3	5	0	0	11	0
High	44	0	1	0	4	8	41	45	3	5	0	0	5	0
Medium	9	0	0	2	1	4	8	9	0	0	0	0	0	0
Low	11	0	0	0	0	1	5	0	0	0	0	0	6	0

**3. Communicate**

Digital Media

TOP 3 Viewed Webpages For July 2024		TOP 3 Social Media Post For July 2024
# 1	Birth and Death Certificates (1,149 views)	Flood Response - Safety, July 14, 2024 (6051 reach, 39 Interactions)
# 2	Get a Permit or License (682 views)	Flood Response-Clean-up, July 14, 2024 (5,768 reach, 18 Interactions)
# 3	Schedule A Clinic Appointment (319 views)	Signs of Heat Illness, July 15, 2024 (1,294 reach, 6 Interactions)

# Forms Received Through Website For July 2024	
<i>Public Health Concerns</i>	29
Request for Involvement	5
Submit Question To WCHD	31

4. Mobilize Community & Partnerships

Youth Prevention Education (YPE)

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
School	0	0	RESA/Flinn/Johnson	RESA
Students	0	0	170/140/128	156
Curriculum(s)	0	0	Too Good for Drugs	Too Good for Drugs

Youth Leadership Council

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Youth Served	0	0	26	36
Schools Represented	0	0	8	7

Illinois Youth Survey (IYS)

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Schools Registered for the Illinois Youth Survey	0	0	22	23
Schools That Completed the IYS	0	0	17	0

**5. Policies and Plans**

MRC Volunteers

New MRC Volunteers July 2024	Total New MRC Volunteers for July 1, 2023-July 30, 2024
0	17

6. Laws & Regulations

EH Code Enforcement

	July 2024	July Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Foods	609	310	3449	2880
Wells	8	13	52	46
Septic	6	10	38	33
Loan inspection	20	9	89	103

	Administrative Hearing July 2024	In-House Hearing July 2024	Calendar Year To Date 2024 Administrative	Calendar Year To Date 2024 In House	Administrative Hearings Calendar Year 2023	In House 2023
Housing	13	24	108	158	94	144
Foods	0	0	0	9	0	4
Wells/Septic	0	0	0	0	2	0

Illinois Tobacco Free Communities: Smoke Free Illinois Act Compliance Checks

	Random Checks	Targeted Checks	July Totals	Calendar Year
Number of new compliance checks	28	2	30	297
Number of rechecks (businesses may be rechecked more than once)	20	1	21	157
Number of businesses found to comply during new checks	11	1	12	168
Number of businesses in compliance during rechecks	18	0	18	130
Number of violations observed during compliance checks (businesses may have more than one violation)	20	3	23	172



Tobacco Enforcement Program: Compliance Checks

	Benchmark	Round 1 December 23	Round 1 cont'd January 24	Round 2 Feb 24	Round 2 Cont'd March 24	Round 2 Cont'd May 24	Round 3 May 24	Round 3 Cont'd June 24
Checks Completed	158	79	70	48	33	68	82	70
Sales to Youth	0	4	4	10	0	10	3	13
Communities Involved	5	4	1	2	2	1	4	1

7. Equitable Access

Dental

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Kits Sent	18	13	170	153
Families Recruited	11	13	111	168
Families Who Access a Dental Provider or Home	0	0	17	13

igrow

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
# CIAT Completed (Coordinated Intake Assessment Tool)	63	20	335	292
MIECHV Home Visiting Programs Referrals	38	17	195	244
Non MIECHV Home Visiting Agencies Referrals	22	9	97	78
Other (client declined, ineligible, referred to community partner, etc.)				

Family Planning

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Number of Clients Seen	111	118	737	1151
New Clients	51	62	299	567
Continuing Clients	60	49	438	584
Pregnancy Tests	43	3	171	96



Family Planning Quality Measures

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Initial Visits	12	11	89	156
Charts Reviewed	39	24	176	191
ACES Screenings	37	24	166	186
Pre/Interconception Education Documented	37	18	172	173
ACES Compliance	95%	100%	97%	81% avg
PRE/Interconception Compliance	95%	75%	98%	68% avg

Illinois Breast and Cervical Cancer Prevention/ WISEWOMAN Services

Service	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Clinical Breast Exam	29	11	111	225
Mammograms	15	25	95	177
Pap Smear	8	0	32	37

Integrated Clinic

Service	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Clinic Visits	93	62	536	660
Nurse Visits	222	217	1395	2545
Total Visits	315	279	1931	3206



Refugee Health

Nationality	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Afghanistan		7	18	13
Burma		4	1	18
Burundi				
Central Africa Rep.			7	1
Congo	4	11	109	178
Cuba				9
Eritrea				
Ethiopia				
Guatemala			4	5
Haiti	6	3	11	16
Iran				
Iraq	11	5	11	11
Ivory Coast				
Malaysia				
Pakistan		5		5
Rwanda				
Sudan				
Syria		9		
Tanzania				
Thailand				
Ukraine	1		1	16
Venezuela			5	15
Vietnam				1
Total	22	44	167	318

Harm Reduction Program

Harm Reduction Services	July 2024	July 2023	Calendar Year To Date 2024	Calendar Year 2023
Harm Reduction Kits Distributed (Drug testing strips)	28	1	183	31
Naloxone Kits Distributed	245	423	3494	5711
People Trained (DOPP)	80	159	725	3211
Reversal Forms Received (DOPP)	0	1	1	8
Community Sites for Rapid Naloxone Deployment (DOPP)	14	11	120	104



PrEP Access

# Prescribed PrEP at WCHD in 2024	Attended 1st PrEP Apt with Community Provider	Didn't Attend 1st PrEP Apt/Unable to Reach	Taking PrEP 6 Months Post WCHD Visit	Taking PrEP 9 Months Post WCHD Visit
8	2	6	0	0

Ryan White

Ryan White Services	# of Individuals Served in Reporting Month	2024 Year to Date Total Served
Case management	38	331
Oral Health Care	1	10
Outpatient Medical Care	1	13
Housing Services	8	55
Emergency Financial Assistance (Utilities)	0	0
Medical Transportation	0	1

Tuberculosis Activities

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
New Clients	13	6	66	180
Returning Clients	27	22	119	261
Total Encounters	40	28	185	409
Physician Contact	14	12	91	141
Medication (direct observation therapy visit)	57	20	441	758
Diagnostic Testing (x-rays, CT scans, etc.)	10	2	104	103
Screening – TB Skin Test, Quantiferon Test	2	7	211	350
Screening – Positive TB Skin Test/T-Spot	1	0	13	22
Total Active Cases in Winnebago County	4	1	22	41

Women, Infants, and Children Program

Caseload (goal is 90%)

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Caseload Goal	6961	6693	6961	6693
Current Caseload	5476	5386	5430	5367
Percent of Caseload Goal Achieved	79%	80%	78%	80%



WIC Caseload Population

% of WIC Population July 2024	
American Indian or Alaskan Native	0.6%
Asian	4.2%
Black or African American	41%
Native Hawaii or Other Pacific Islander	7.2%
Hispanic or Latino	34%
Multi-Racial	12%
White	65%

WIC Breastfeeding Rates (exclusivity goal is 15%)

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Percent of Infants Exclusively Breastfeeding	11.3%	11.3%	11.5%	11.6%
Percent of Infants Partially Breastfeeding	27.4%	26.3%	27.0%	27.3%
Percent of Total Infants Breastfeeding	38.7%	37.7%	38.6%	38.9%

WIC Medicaid Enrollment Numbers

Medicaid Enrollment Numbers	July 2024
Number of WIC clients checked for Active Medicaid	493
Number of clients who needed to enroll/reactive	6

HRIF/APORS

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Caseload	96	105	98 avg	107 avg
Referrals Received	55	44	362	887

Better Birth Outcomes

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Caseload	52	60	47	61
Percent of Caseload Goal Achieved (Caseload max 60)	87%	100%	79%	101%



Healthworks

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Caseload in Winnebago County (under 6 years)	168	180	171 avg	226 avg
Caseload in Winnebago County (6 - 21 years)	506	554	476 avg	582 avg
Caseload in Border Counties (Under 6 years)	197	233	207 avg	229
New Cases to DCFS Custody (0-21 years)	30	51	222	403
Case Closure - Winnebago County (0-21 years)	5	12	111	250

Lead Poisoning Prevention

	July 2024	July Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Total Cases	135	88	113 avg	94 avg
New Cases	16	11	88	112
Contact Made	321	197	2022	2796
Home Visits	8	14	63	114

8. Diverse & Skilled Workforce

WCHD Workforce

	Total Employees	Full-Time Employees	Part-Time Employees	Seasonal /Employees	Temporary	New Hires	Separated Employees
July 2024	102	98	2	0	2	4	1

9. Improve & Innovate**10. Organizational Infrastructure**