

**Report to the Board of Health on June 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
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- Patrick Ngum, MPH – Director, Data and Quality
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- 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

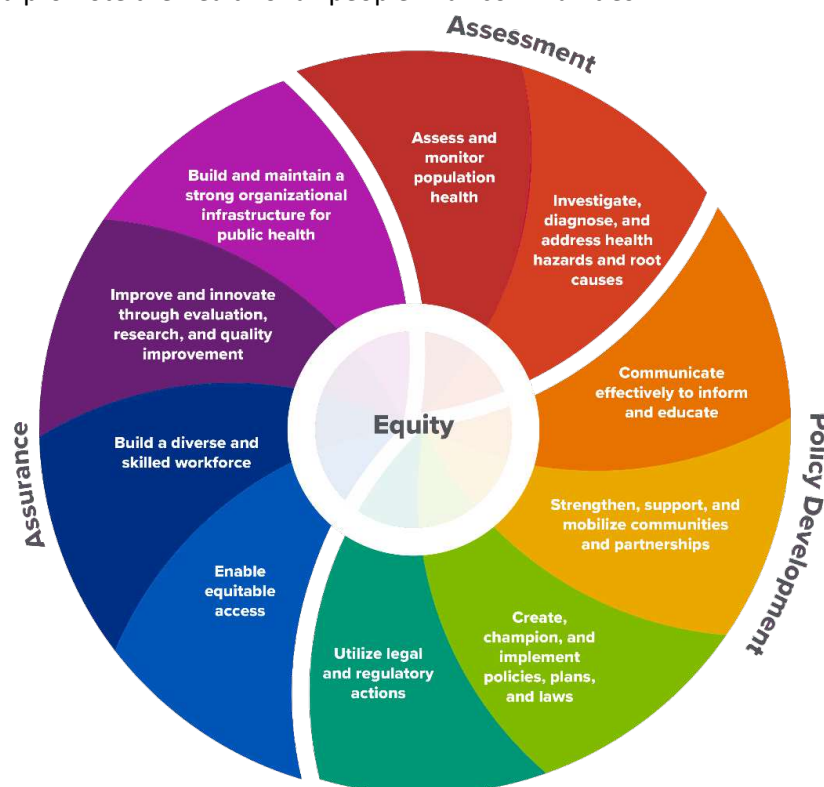


Image courtesy of the Centers For Disease Control and Prevention, available online 02/11/2022 at:

<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

There are currently no cases of Highly Pathogenic Avian Influenza A (H5N1) virus (cattle nor human) in Winnebago County as of June 30, 2024. There have been four positive H5N1 human cases in dairy farm workers in the United States, none in Illinois. 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.

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

Rain in Winnebago County through June has lowered the production of the Culex mosquito, the mosquito responsible for transmitting West Nile virus. The continuous rains provided a natural disruption of the Culex breeding life cycle by "washing" out areas which are normally stable. If the weather remains hot, but also dry, WCHD expects to see an increase presence of Culex mosquitoes.



Assessment

# 2. Diagnose & Investigate

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

## Communicable Diseases & Conditions

On June 13, 2024 the Illinois Department of Public Health and WCHD visited the long-term care facility to complete a plan for monitoring over the next four months for any new additional cases of Strep A in the facility. Four (4) cases of Strep A had been identified in residents/staff within thirty (30) days at the long-term care facility in May. WCHD investigated this Strep A outbreak which included testing sixty-four staff (64) who worked May 1 thru May 15 for Strep A. An additional two (2) positive cases were identified from this staff testing. This Strep A outbreak ended on June 30, 2024, after two incubation periods with no new infections.

### Opioid Overdose

WCHD engaged individuals through the Harm Reduction Program at the Clinic and the courthouse providing fifty-five (55) harm reduction kits and seventy-eight (78) naloxone packages in June.

### Environmental Health

In June, WCHD began providing educational packets based on the Environmental Protection Agency's (EPA) Septic Smart program to homeowners with new or repaired septic systems, as well as including them in all loan inspection reports for realty transactions.

In addition, WCHD staff continued to learn about new state-approved septic system technology in the sewage disposal industry. These new types of technology enable septic installation construction that address previous challenges. The approval of submitted applications and inspection of these types of installations now allows for septage discharge as an environmentally safe practice in areas with soil limitation, such as shallow seasonal wetness and bedrock, which was previously not feasible.

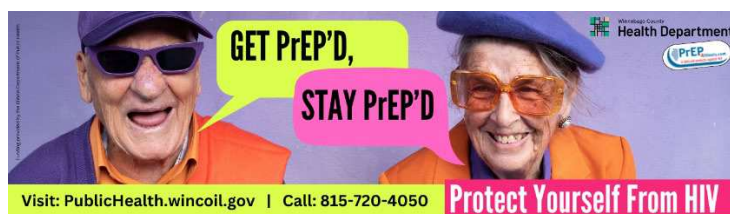


## 3. Communicate

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

### Digital Media Initiatives

In June, WCHD launched an updated campaign to encourage the use of PrEP (pre-exposure prophylaxis) to help protect from HIV and get to zero. Residents in need of PrEP can get started at the WCHD. This campaign included local billboards, website content, and social media posts encouraging residents to **Get PrEP'd, Stay PrEP'd**. The campaign looked to destigmatize discussions about PrEP and generate interest in the campaign, prompting viewers to seek more information on PrEP.



WCHD also launched on an advertising campaign to encourage HIV testing. The initial campaign ran on a digital platform where individuals meet dates, promoting the importance of knowing your HIV status before the summer. Handouts were also distributed at the June 1 Pride Fest to promote HIV testing. This campaign led to a substantial increase in visits to WCHD's "Getting Testing and Treatment for HIV and STIs/STDs" web page for the first half of June (1,502 views) as compared





Winnebago County

# Health Department

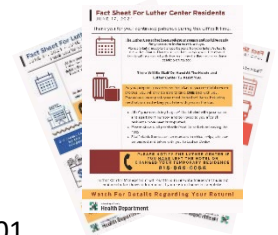
## Report to the Board of Health June 2024 Activities

to the first half of May (63 views). With this success, WCHD expanded the campaign to promote HIV testing for World HIV Testing Day June 27.

In coordination with WCHD's Incident Command, WCHD developed communication materials for residents affected by the Luther Center Fire and for the recovery response. These communications materials included flyers and website posts.

WCHD initiated email messages on health topics through Qualtrics to residents in the 61101 and 61102 zip codes who received the invitation and opted in to the messaging. These email messages, called Strong Neighborhood Health Messages, are part of the Partnering for Vaccine Equity (PAVE) grant to help address vaccine hesitancy to reduce health disparities. With email being identified as the preferred way to receive information from WCHD by residents in the identified area, WCHD is established a direct email communication channel to this specific population to help build trust and overcome barriers to vaccination and other health equity concerns. The Strong Neighborhood Health Messages began in June with emails being sent out on June 13, 21, and 28. These emails continued to promote vaccination safety and effectiveness while also spotlighting other health matters affecting the identified population such as swimming safety, medication safety, and heart health.

In June, WCHD continued promoting messaging on digital media about swimming safety, food safety, and ways to *Beat The Heat*. WCHD also continued promoting healthy homes, heart health, family planning, and gun locks. In coordination with the Maternal, Infant, and Child Health Team (MIGHT), WCHD posted messages on the CDC's Hear Her campaign, *Urgent Maternal Warning Signs*, and *Safe And Respectful Care*. In response to the opioid crisis, WCHD continued to issue messages on *Get Trained*, *Get Naloxone*, *988*, and *Building a Path to Recovery*.



Policy  
Development

## 4. Mobilize Community & Partnerships

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

### Youth Leadership Council

WCHD developed a plan for recruitment plan for the Chairman and Mayor's Youth Leadership Council (YLC) 2024-25 to increase the number of applications and nominations. WCHD identified local community events that will be attended by youth and adults to promote the YLC. The online application and nomination letters went live on the WCHD/YLC website at the end of May 2024.

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

The Maternal, Infant, and Child Health Team (MIGHT) workgroups continued to meet and plan initiatives to further promote the respectful care rights while engaging more community partners in organizing a respectful care event.

**Opioid Response**

The Winnebago County Opioid Response Team did not meet in June.

WCHD continued to address the opioid overdose crisis through its Harm Reduction Program, conducting outreach at the Winnebago County Courthouse, three half days a week. WCHD's Drug Overdose Prevention Program (DOPP) provided a resource table of harm reduction supplies and education at the Remedies' clinic site on June 14 and 28. The DOPP Program also participated in the Drug Overdose Awareness Walk on June 8, providing naloxone awareness and training, naloxone kits, gun locks, and Detera drug deactivation pouches.

**Sexual Health Outreach and Partnerships**

WCHD held HIV testing events at the Liam Foundation as part of National HIV Testing Day on June 27. WCHD attended the Pride Fest on June 1, offering harm reduction services to the attendees and encouraging HIV testing.



**Tobacco Free Communities**

WCHD's Tobacco Free Communities Program (TFC) facilitated a coalition meeting during the month of June. Coalition members discussed plans for a resource event in collaboration with the Salvation Army's Koats4Kids distribution event in the fall. WCHD promoted the Illinois Tobacco Quitline at the Muslim Association of Greater Rockford's Health Fair. The TFC continued to do random and targeted Smoke Free Illinois Act (SFIA) checks. The Tobacco Enforcement Program (TEP) conducted the third, and final, round of tobacco checks for this fiscal year in Rockford and will be working on the contracts with law enforcement for FY25 in July.

**Trauma Informed Community**

On June 25, the Illinois Coalition on Youth (ICOY), led a conference at Midway Village on various aspects of trauma and their impact on the community. The conference topics include historical trauma and empowering youth. There were close to fifty (50) attendees.



Training dates are being solidified for next fiscal year. The Violence Reduction Workgroup and its subcommittees are working to enhance those trauma informed efforts in the community through additional training, public awareness (including a film series), and proclamations.

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





### Bridges To Prosperity

The Director of Public Health Policy is co-chairing the [Bridges to Prosperity](#) Healthy Environment and Access to Good Healthcare Workgroup with Shelton Kay from the Rockford Regional Health Council. The purpose is to *boost upward mobility from poverty and reduce racial inequities in our community*. The [Upward Mobility Framework](#) proposes five (5) pillars that support mobility from poverty: Opportunity-Rich & Inclusive Neighborhoods; High Quality Education; Rewarding Work, Healthy Environment and Access to Good Health Care; and Responsive & Just Governance. Within the Health Environment, focus areas include access to health services; neonatal health; environmental quality; and safety from trauma. The work of this newly formed Workgroup will align with the current efforts of WCHD including the Maternal, Infant, and Child Health Team and the Violence Reduction Workgroup/Trauma-Informed Community. At a meeting on June 20, the Healthcare Working Group solicited feedback from local healthcare stakeholders regarding which health-related metric the group would like to focus on during the upcoming year. The group is leaning towards “Access to Health Services” at the conclusion of the meeting, but an additional meeting is slated for the coming months to confirm that choice with other health-related stakeholders in the community.

### Environmental Health

WCHD collaborated with IDPH and the Department of Child and Family Services (DCFS) regarding the authority for inspections of group homes. To formalize the processes and standards for health inspections, WCHD developed an inspection form using the Winnebago County Property Maintenance Code to determine what needed to be applied to these group home inspections. WCHD identified what parts of the inspections for the group homes was under the authority of WCHD and recommended other agencies that may have the authority to inspect other elements, such as the Fire Department. The first inspection was conducted using this newly developed form, which may become standard protocol for other group homes in the State.



## 5. Policies and Plans

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

### Strategic Initiatives

The workgroups met in June with the following updates:

- **Assessors** reviewed data regarding violence in Winnebago County and are working to identify the best charts and graphs to use when presenting that report to the community. They will be working with the Reports on the final materials.
- **Assurance** attend each of the strategic workgroups and health priority groups to ensure the groups are on track with their goals and objectives. Assurance is also reviewing evaluation components of grant deliverables.



- **Collaborators** shared invitations for trauma trainings and provided additional IPLAN outreach as they continued to update, enhance, and categorize their current list of community partners.
- **Organizers** finalized communications regarding implicit bias for key messages as they prepare to present an Implicit Bias training at All-Staff on August 29, 2024.
- **Policy Makers** reviewed the draft New Employee Orientation Program policy to ensure clarity and accuracy. They discussed the integration of AFLAC materials as they can impact employee benefits during time away from work.
- **Reporters** used data provided from assessors to work on dashboards for the violence prevention health priority. In addition, messages are being developed to provide to Collaborators to maintain contact and continue to build relationships with IPLAN partners that participated in November workshop and/or responded to the survey.
- **Reaccreditation** reviewed documents to be resubmitted for reaccreditation prior to the July deadline.
- **Workforce Development** received an update regarding the Orientation Program Policy for review and feedback. The team gave feedback to reflect current policies and procedures. The HIPAA Policy was updated and will be used in future presentations.

### Public Health Preparedness

WCHD activated incident command for a Recovery Response following a fire at the Luther Center on June 8. The Luther Center houses an IDPH licensed assistive living center as well as Section 8 and HUD subsidized units. *Rebecca Lyons, Director – Public Health Emergency Preparedness* led Incident Command for the Health Department to assist in the recovery phase of the Luther Center Fire in which approximately two hundred (200) residents including those with access and functional needs, caregivers, and family pets were displaced. WCHD's MRC Volunteers assisted the residents in completing documentation for replacement of SNAP benefits and addressing other health care needs. The goal was to return the residents as quickly as possible when it was safe to return.

WCHD collaborated with the City of Rockford and Winnebago County on the recovery. The condemnation was lifted by the City of Rockford Code Enforcement Department on June 11. WCHD coordinated transportation of residents back to the Luther Center with assistance from RMTD and the Salvation Army. WCHD provided education to residents to ensure their health and safety upon return.

WCHD demobilized from the Luther Center Fire Recovery Response at 15:00 on June 11. An after-action review meeting is scheduled with partners for the week of July 8

WCHD MRC volunteers were activated for the Luther Center Recovery Response. A total of fourteen (14) volunteers volunteered a combined fifty-nine and a half (59.5) hours with the response.

On Wednesday June 26<sup>th</sup>, the Salvation Army Warehouse received one hundred and twenty (120) Controlled Air Purifying Respirators (CAPRs) into WCHD preparedness inventory.

### Policy Updates

During the month of June, no policies were reviewed or approved by the Board of Health.



### Record Retention

During the month of June, two hundred and twenty-five (225) cu. ft. of Woman, Infants, and Children (WIC) records were destroyed after the ten (10) day waiting period post approval from the Local Records Commission.

### Reaccreditation Updates

WCHD continued to work to finalize responses to the Public Health Accreditation Board comments from review of WCHD's accreditation application. The responses are due July 26.

### IPLAN Updates

In June WCHD, in collaboration with the University of Illinois College of Medicine at Rockford (Division of Health Research and Evaluation), Community Residents, and various partner organizations/agencies, continued to advance the IPLAN 2025 initiative through several key activities:

- **Data Book Review:** The IPLAN 2025 Internal Steering Committee (ISC) and UIC team continued reviewing quantitative data from the Community Status Assessment. This analysis is crucial for setting strategic priorities for IPLAN 2025.
- **Community Context Assessment:** the UIC team continued to review feedback from the Community Context Assessment to align IPLAN 2025 goals with community needs and experiences. This step is essential for ensuring that the IPLAN 2025 addresses the diverse needs of all community members.
- **Focus Groups:** The insights gathered from focus group discussions are being transcribed and analyzed, providing an understanding of the unique challenges faced by these groups. Integrating these findings into IPLAN 2025 is crucial to developing a plan that reflects the needs of all Winnebago County residents.

These activities continued to shape the strategic direction of IPLAN 2025, ensuring it is data-driven, community-informed, and focused on the critical areas impacting public health in Winnebago County. The ongoing work highlights the department's commitment to developing a comprehensive health improvement plan that addresses both current and emerging health challenges in Winnebago County.



## 6. Laws & Regulations

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

The Local Health Protection grant monies (\$5 million) were not restored to their previous level. To strategize regarding other potential funding sources, the Northern Illinois Public Health Consortium (NIPHC), including WCHD, meet on June 21.

WCHD reviewed the newly adopted 2022 FDA Food Code and worked to summarize critical changes that impact local food establishments and consumers.





In June, WCHD notified high risk food establishments that have not paid for their annual permit that establishments need to apply and pay for their permits by July 15 or close. WCHD will notify the public of the closure of the establishments that do not renew by July 15.



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 attended the Healthy Moms Expo sponsored by Mercyhealth and made recertification appointments for clients onsite.

The WIC staff is preparing for Farmers Market season. WCHD's WIC Program received nine hundred (900) booklets with a value of \$30 each for a total of \$27,000. Distribution of these booklets can start on July 10. Last year the WIC Program received eight hundred and fifty (850) booklets, but because of last year's success rate, they received an increase of fifty (50) more booklets this year.

WCHD's Substance Use Prevention program started planning for next year by attending a meeting on June 18 that covered topics including: National Prevention Week, Communication Campaigns, Youth Prevention Education, and the Youth Leadership Council.

### **Personal Health Services**

The lead nurse case manager continued attending the monthly Environmental Health Lead Program meeting with the Assistant State's Attorney to provide feedback/insight into open lead cases with the courts. The lead program collaborated with multiple primary care offices to ensure timely follow-up testing and continuity of care. The lead nurse, High-Risk Infants nurse, and the Better Birth Outcomes nurse participated in the Healthy Moms Expo hosted by Mercyhealth on June 20 and provided educational material to the housing authority event, Building Strong Communities.

### **COVID-19 Vaccination Health Equity Initiatives**

In June, WCHD submitted the final report for the Public Health Navigator.

As part of the PAVE (Partnering for Vaccine Equity), WCHD conducted outreach at the Save-A-Lot foods on June 20, 21, 25, and 27, collecting email addresses from many neighborhood shoppers as they entered the facility. An incentive of a Save-A-Lot reusable shopping bag as well as a chip clip was given to the shoppers in return and a handout was provided with information on vaccines and aimed at addressing vaccine hesitancy. Approximately two-hundred and twenty (220) emails were collected and emails were sent out following the outreach. WCHD collaborated with the Discovery Center to do outreach at Washington Park Community Center on June 25 and 27. Discovery Center staff facilitated science experiments on the effects of vaccination for adults and youth, and gave away free passes to their facility to those participants. WCHD talked with participants about vaccines and collected emails.



Approximately forty-seven (47) people were served during this outreach. Those who provided their email addresses received personalized email invitations from WCHD staff to enroll to receive Strong Neighborhood Health Messages. WCHD sent three Strong Neighborhood Health Messages to residents who live in the identified health equity area zip codes and enrolled to receive these emails.



Assurance

## 8. Diverse & Skilled Workforce

*Build and support a diverse and skilled public health workforce.*

Positions WCHD is currently recruiting for include:

- Staff Accountant
- Clerk II / WIC Program
- Case Manager / Ryan White - Bilingual
- Investigator – Temp/Part Time
- Accounting Clerk
- Clerk II Personal Health Services
- Public Health Nurse I – Temporary Part-Time



The Breastfeeding Coordinator passed the IBCLC (International Board-Certified Lactation Consultant) exam expanding WCHD capacity of IBCLCs staff to two: the WIC Supervisor and the Breastfeeding Coordinator.

### **Capacity and Cost Assessment (CCA)**

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

### **Training**

Some WCHD staff had the opportunity to participate in trainings including:

- Clinic staff participated in Pregnancy Testing and Counseling eLearning through RHNTC.
- Some Personal Health Services Staff completed Shipping 6.2 infectious substances and Biological Specimens and Sample Collection and Submission through IDPH and completed throat culture training to perform Strep tests.
- Some clinic staff completed Implicit Bias: Using Brain Science to Understand, Recognize, and Counter It and TB & Drug Interactions
- The High-Risk Infant Follow-Up Program nurse participated in a training module on Contraceptive Methods and Guidelines for Use Online.
- Tobacco Free Community Program Staff attended a “High in Plain Sight” training through Prevention First which covered current youth vaping trends.



Assurance

## 9. Improve & Innovate

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

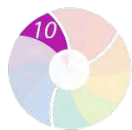
### **Quality Improvement Initiatives**

In June 2024, WCHD continued to advance the Quality Improvement (QI) PLAN Goals and objectives as well as center level/program level QI initiatives. Efforts to diversify QI teams saw progress, with 70% of teams now including members from outside their center or program, moving towards the 80% target. The process flow identification has been drafted or completed for 80% of QI initiatives, ensuring a structured roadmap for improvements. Implementation of QI projects through the Plan-Do-Study-Act (PDSA) cycle is ongoing, with 30% of projects having made changes to improve the current process. The Orientation Program Policy was updated to include mandatory trainings for all new employees, with plans to incorporate the required QI trainings to be completed within ninety (90) days of onboarding. The policy now includes links to web-based training resources, ensuring ongoing relevance and accessibility. These activities reflect WCHD's commitment to fostering a culture of continuous quality improvement and enhancing public health outcomes.

WCHD is dedicated to advancing Quality Improvement (QI) initiatives using the Plan-Do-Study-Act (PDSA) methodology. This structured approach involves 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**

<b>LEADERSHIP AND SYSTEMS THINKING</b>		<b>Update June-2024</b>	<b>Comments June 2024</b>
<b>Goal 1: Advance a culture of continuous quality improvement within Winnebago County</b>			
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).	Ongoing	70% of QI groups have a disruptor
Objective 1.4	Present an overview of their quality improvement initiative at the Annual All Staff by December 2024.	Not started	Scheduled for December 2024
<b>QUALITY IMPROVEMENT INITIATIVES</b>			
<b>Goal 2: Improve the quality of Winnebago County Health Department interventions and</b>			
Objective 2.1	Identify the process flow for each quality improvement initiative targeted for improvement by April 2024.	Ongoing	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.	Ongoing	
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.	ongoing	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.	Not started	
<b>WORKFORCE DEVELOPMENT</b>			
<b>Goal 3: Enhance workforce competency in Quality Improvement</b>			
Objective 3.1	Required Quality Improvement trainings will be completed by 100% of new employees within 90 days of onboarding.	Ongoing	The Orientation Program Policy has been reviewed to include QI trainings for new employees
Objective 3.2	Review and revise the Workforce Development Plan to ensure accessibility and relevance to web-based training by March 2024.	Ongoing	Orientation Program Policy includes link to ongoing review of web-based trainings.
<b>COMMUNICATION</b>			
<b>Goal 4: Ensure transparent communication and reporting of quality improvement efforts to</b>			
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	Scheduled for December 2024
Objective 4.3	Provide an annual report via Storyboard for each quality improvement initiative by December 2024.	Not started	Scheduled for December 2024
Objective 4.4	Post storyboards for quality improvement initiatives on the Winnebago County Health Department website by January 2025.	Not started	Scheduled for January 2025

*Assurance*

## 10. Organizational Infrastructure

*Build and maintain a strong organizational infrastructure for public health.*

### **Governmental Organizations**

The Public Health Administrator updated the Chairman of the Winnebago County Board on a regular basis with focus on the water security plan for Winnebago County, ongoing planning efforts to support local dairy farms to reduce the risk of H5N1 in their herds, application for local Opioid Settlement Funds to expand harm reduction, and response to Luther Center Fire. The Chairman was informed that several



Winnebago County ordinances will need to be opened to consider updates and revisions including Chapter 50 – Health and Sanitation/Article III Food Establishments to reflect the 2022 FDA Food Code; Article IX/Rooming Houses to include group homes licensed through DCFS, DHS, etc.; and Chapter 18 /Article IX – Property Maintenance Code to reflect the most current 2024 International Property Maintenance Code. The plan will to be meet with the Board of Health Policy Committee beginning in Fall 2024 with follow-up meetings with the Operations Committee of the Winnebago County Board.

### **Non-Governmental Organizations**

The Advisory Committee for Mental and Behavioral Health was awarded funding to support a consultant to review best practices to address the Coordinating Entity/Group and Access issues of the Community Support System (CSS) Framework. The Request for Proposal has been developed with support from the Winnebago County States Attorney and will be posted for application through the Community Foundation of Northern Illinois. The projected timeline for deliverables is December 31, 2024.

Dr. Martell, Public Health Administrator and Patrick Ngum, Director of Data and Quality are participating on the Community Health Needs Assessment for OSF-St. Anthony which kicked off on June 6, 2024.

*Community Support System Framework*







# Data Appendix

## 1. Monitor Health

### Communicable Disease

Disease	June 2024	June 2023	2024 Year Total	Calendar Year 2023	Calendar Year 2022
Anaplasma phagocytophilum (formerly HGA)	0	0	4	1	0
Botulism Infant	0	0	0	0	1
Campylobacteriosis	5	7	33	54	29
Candida auris, clinical	0	0	2	0	0
Candida auris, screening	0	0	0	1	0
Carbapenemase Producing Organism - Clinical	0	0	3	3	0
Carbapenem Resistant Organism	0	0	1	5	8
CE - Jamestown Canton Neuroinvasive Disease	0	0	1	0	0
Chlamydia	129	167	914	1874	1832
Cryptosporidiosis	1	0	4	9	5
Cyclosporiasis	0	1	0	2	1
Dengue	0	0	0	1	0
Ehrlichia chaffeensis (formerly HME)	0	0	1	0	1
Ehrlichia muris euclairensis infection	0	0	1	0	0
Gonorrhea	40	27	219	417	704
Haemophilus Influenzae Invasive Disease	0	0	3	8	5
Hemolytic Uremic Syndrome (HUS) Post Diarrheal	0	0	0	2	0
Hepatitis A	0	4	2	8	6
Hepatitis B Chronic	0	3	13	29	29
Hepatitis C Virus Acute Infection	0	0	4	3	3
Hepatitis C Virus Chronic Infection	8	9	43	100	92
Hepatitis C Virus Perinatal	0	0	0	0	1
Hepatitis Delta	0	1	0	1	0
Histoplasmosis	0	0	1	2	5
HIV	1	1	6	26	26
Influenza with ICU Hospitalization	0	0	20	18	44
Legionellosis - Legionnaires Disease	1	1	7	13	13
Listeria Invasive Disease	0	0	1	0	1
Lyme Disease	7	9	19	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	1	1	3	11	2
Rabies, Potential Human Exposure	5	4	28	70	38
Salmonellosis	5	3	19	41	43
SARS-CoV-2 Infection (COVID-19)	0	184	577	8345	32372
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	1	0	3	5
Shiga toxin-producing E. coli (STEC)- Shiga toxin pos, not cultured or serotyped	3	4	7	18	12
Shigellosis	2	0	5	9	16
Spotted Fever Rickettsioses	1	0	2	0	2
Streptococcal Disease Invasive Group A	0	6	14	25	25
Streptococcal Disease Invasive Group A with Necrotizing Fasciitis	0	1	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	12	8	64	108	99
Tuberculosis	0	0	1	4	8
Varicella (Chickenpox)	0	2	3	7	8
Vibriosis	0	0	0	5	1
West Nile Virus Neuroinvasive Disease	0	0	0	2	0

Environmental Health

## Radon

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
<b>Radon Screenings</b>	0	0	2	2
Average (pCi/L)	-	-	3.0	4.0
Max (pCi/L)	-	-	3.7	6.2
<b>Radon Test Kits Purchased</b>	0	1	19	9
Average (pCi/L)	-	0.6	6.3	5.4
Max (pCi/L)	-	0.6	15.2	15.8
<b>Phone Calls</b>	1	1	7	4
<b>Units Reported Mitigated</b>	0	0	0	0

## Non-Community Water Wells

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
<b>Non-Community Water Sampled</b>	8	0	67	19
<b>Non-Community Samples Positive</b>	0	0	0	0

**2. Diagnose and Investigate**Environmental Health

## Creating a Lead Safe Rockford

	Goal	Actual	Percent
<b>Units Enrolled</b>	200	47	23%
<b>Inspections</b>	160	38	24%
<b>Mitigated Units</b>	140	17	12%

## Testing Lead in Water

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
<b>Samples Taken &amp; Analyzed</b>	1	1	2	13
<b>Number Exceeding IEPA Lead Level</b>	0	0	0	0
<b>Average Lead Content</b>	0.2	1	0.5	1
<b>Maximum Lead Content</b>	0.2	1	0	1



## Food Complaints

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Foodborne Illness Complaints	1	4	13	24
Foodborne Illness Investigations	1	4	13	24
Non-Foodborne Illness Complaints	19	12	110	125

## Housing Complaints

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Housing Complaints	49	89	278	374
Nuisance Complaints	21	34	124	154
Survey Complaints	6	10	120	101
Received Complaints	73	131	495	659
Re-Check on Complaints	193	341	1593	1469

## Wells &amp; Septic

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
Well Complaints	6	3	15	12
Septic Complaints	8	8	46	26

## Food Inspection Performance Indicator Risk Factors

Risk	Violation														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Total	31	30	21	0	14	4	0	8	2	109	1	0	17	0	28
High	21	20	12	0	7	4	0	8	2	80	0	0	16	0	26
Medium	10	11	7	0	3	0	0	0	0	19	0	0	0	0	1
Low	0	0	2	0	4	0	0	0	0	10	1	0	1	0	1

Risk	Violation													
	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Total	48	0	0	1	4	15	64	52	3	7	0	0	6	0
High	44	0	0	0	4	10	58	49	2	7	0	0	6	0
Medium	4	0	0	1	0	5	6	3	1	0	0	0	0	0
Low	0	0	0	0	0	0	0	0	0	0	0	0	0	0

**3. Communicate**

## Digital Media

TOP 3 Viewed Webpages For June 2024		TOP 3 Social Media Post For June 2024
# 1	Getting Testing and Treatment for HIV and STIs/STDs [1,598]	What Are PFAs 06/05/2024 (433 Reach; 449 impressions)
# 2	Birth & Death Certificates [938]	Water Safety/Drowning 06/21/2024 (414 Reach, 418 impressions)
# 3	Get a Permit or License [867]	Moving Matters/Active People, Healthy Nation (408 Reach, 414 Impressions, 1 Interactions)

# Forms Received Through Website For June 2023	
<i>Public Health Concerns</i>	32
Request for Involvement	1
Submit Question To WCHD	28

**4. Mobilize Community & Partnerships**

## Youth Prevention Education (YPE)

	June 2024	June 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

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



**Drug Overdose Prevention Program**

	June 2024	June 2023	Calendar Year To Date 2024	Calendar Year 2023
<b>People Trained</b>	149	301	441	3,380
<b>Kits Distributed</b>	677	693	2,290	5,061
<b>Reversal Forms Received</b>	0	0	1	40
<b>Community Sites for Rapid Naloxone Deployment</b>	14	15	9	99

**Drug Takeback**

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Products</b>	n/a	n/a	n/a	n/a
<b>Drop Off Locations Made Available</b>	n/a	n/a	n/a	1 (Facebook Post)

**Illinois Youth Survey (IYS)**

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Schools Registered for the Illinois Youth Survey</b>	0	0	22	23
<b>Schools That Completed the IYS</b>	0	0	17	0

**5. Policies and Plans****MRC Volunteers**

<b>New MRC Volunteers June 2024</b>	<b>Total New MRC Volunteers for July 1, 2023-June 30, 2024</b>
1	17

**6. Laws & Regulations****EH Code Enforcement**

	June 2024	June Last Year (2023)	Calendar YTD 2024	Calendar YTD 2023
<b>Foods</b>	418	395	2840	2500
<b>Wells</b>	6	6	44	33
<b>Septic</b>	11	8	32	23
<b>Loan inspection</b>	16	13	69	94



	Administrative Hearing June 2024	In-House Hearing June 2024	Calendar Year To Date 2024 Administrative	Calendar Year To Date 2024 In House	Administrative Hearings Calendar Year 2023	In House 2023
Housing	27	19	95	134	83	116
Foods	0	2	0	9	0	3
Wells/Septic	0	0	0	0	2	0

## Illinois Tobacco Free Communities: Smoke Free Illinois Act Compliance Checks

	Random Checks	Targeted Checks	June Totals	Calendar Year
Number of new compliance checks	64	0	64	267
Number of rechecks (businesses may be rechecked more than once)	20	2	22	136
Number of businesses found to comply during new checks	40	N/A	40	156
Number of businesses in compliance during rechecks	19	2	21	112
Number of violations observed during compliance checks (businesses may have more than one violation)	26	0	26	149

## 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

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Kits Sent	31	3	152	153
Families Recruited	17	10	100	168
Families Who Access a Dental Provider or Home	3	0	17	13



igrow

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
# CIAT Completed (Coordinated Intake Assessment Tool)	27	23	272	296
MIECHV Home Visiting Programs Referrals	24	19	157	244
Non MIECHV Home Visiting Agencies Referrals	9	6	758	78
Other (client declined, ineligible, referred to community partner, etc.)	4	NA	20	NA

## Family Planning

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Number of Clients Seen	77	115	626	1151
New Clients	33	65	248	567
Continuing Clients	44	50	378	584
Pregnancy Tests	32	9	171	96

## Family Planning Quality Measures

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Initial Visits	16	9	77	156
Charts Reviewed	29	8	137	191
ACES Screenings	26	8	133	186
Pre/Interconception Education Documented	29	8	135	173
ACES Compliance	89%	100%	97%	81% avg
PRE/Interconception Compliance	100%	100%	98%	68% avg

## Illinois Breast and Cervical Cancer Prevention/ WISEWOMAN Services

Service	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Clinical Breast Exam	16	27	82	225
Mammograms	13	20	81	177
Pap Smear	5	2	24	37



## Integrated Clinic

Service	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Clinic Visits	73	57	443	660
Nurse Visits	155	109	1173	2545
Total Visits	228	166	1616	3206

## Refugee Health

Nationality	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
Afghanistan		5	18	13
Burma			1	18
Burundi				
Central Africa Rep.			7	1
Congo	5		105	178
Cuba				9
Eritrea				
Ethiopia				
Guatemala	4		4	5
Haiti			5	16
Iran				
Iraq				11
Ivory Coast				
Malaysia				
Pakistan				5
Rwanda				
Sudan				
Syria				
Tanzania				
Thailand				
Ukraine				16
Venezuela			5	15
Vietnam				1
Total	9	5	145	318

**Harm Reduction Program**

Harm Reduction Services	# Supplies Distributed this Month	Total Supplies Distributed in 2024	Total Persons Engaged in 2024
Harm Reduction Kit	55	163	182
Naloxone	78	228	182

**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	1	3	0	0

**Ryan White**

Ryan White Services	# of Individuals Served in Reporting Month	2024 Year to Date Total Served
Case management	30	293
Oral Health Care	1	8
Outpatient Medical Care	6	9
Housing Services	8	47
Emergency Financial Assistance (Utilities)	0	0
Medical Transportation	0	1

**Tuberculosis Activities**

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>New Clients</b>	6	8	53	180
<b>Returning Clients</b>	19	19	92	261
<b>Total Encounters</b>	25	27	145	409
<b>Physician Contact</b>	11	10	77	141
<b>Medication (direct observation therapy visit)</b>	56	57	384	758
<b>Diagnostic Testing (x-rays, CT scans, etc.)</b>	16	2	94	103
<b>Screening – TB Skin Test, Quantiferon Test</b>	8	6	209	350
<b>Screening – Positive TB Skin Test/T-Spot</b>	2	5	12	22
<b>Total Active Cases in Winnebago County</b>	4	4	22	41





## Women, Infants, and Children Program

Caseload (goal is 90%)

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Caseload Goal</b>	6961	6693	6961	6693
<b>Current Caseload</b>	5576	5360	5424	5367
<b>Percent of Caseload Goal Achieved</b>	80%	80%	78%	80%

## WIC Caseload Population

	% of WIC Population June 2024
<b>American Indian or Alaskan Native</b>	0.6%
<b>Asian</b>	4.3%
<b>Black or African American</b>	40.5%
<b>Native Hawaii or Other Pacific Islander</b>	6.4%
<b>Hispanic or Latino</b>	34%
<b>Multi-Racial</b>	11.5%
<b>White</b>	66%

## WIC Breastfeeding Rates (exclusivity goal is 15%)

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Percent of Infants Exclusively Breastfeeding</b>	11.5%	11.1%	11.5%	11.6%
<b>Percent of Infants Partially Breastfeeding</b>	28.1%	27.3%	27.0%	27.3%
<b>Percent of Total Infants Breastfeeding</b>	39.5%	38.5%	38.6%	38.9%

## HRIF/APORS

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Caseload</b>	103	108	98 avg	107 avg
<b>Referrals Received</b>	36	58	307	887



## Better Birth Outcomes

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Caseload</b>	43	60	47	61
<b>Percent of Caseload Goal Achieved</b> (Caseload max 60)	72%	100%	78%	101%

## Healthworks

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Caseload in Winnebago County (under 6 years)</b>	167	180	171	226 avg
<b>Caseload in Winnebago County (6 - 21 years)</b>	520	554	471	582 avg
<b>Caseload in Border Counties (Under 6 years)</b>	190	236	208	229
<b>New Cases to DCFS Custody (0-21 years)</b>	29	14	192	403
<b>Case Closure - Winnebago County (0-21 years)</b>	27	12	106	250

## Lead Poisoning Prevention

	June 2024	June Last Year (2023)	Calendar Year To Date 2024	Calendar Year 2023
<b>Total Cases</b>	122	81	110 avg	94 avg
<b>New Cases</b>	12	16	72	112
<b>Contact Made</b>	268	190	1071	2796
<b>Home Visits</b>	12	5	63	114

## 8. Diverse &amp; Skilled Workforce

## WCHD Workforce

	Total Employees	Full-Time Employees	Part-Time Employees	Seasonal /Employees	Temporary	New Hires	Separated Employees
<b>June 2024</b>	99	94	5	0	4	4	2

## 9. Improve &amp; Innovate

## 10. Organizational Infrastructure