



## Report to the Board of Health on April 2025 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
- Cheryl Floyd, MEd – Director, Center for Health Promotion and Wellness
- Cynthia Hall, MPH – Director, Strategic Initiatives
- James Keeler CPA, MBA – Director, Finance
- Katherine O'Toole, MPH, CPH – Director, Communications
- Michael Jarvis, MPH – Director of Public Health Policy
- Patrick Ngum, MPH – Director, Data and Quality
- Rebecca Lyons, MPH – Director, Public Health Preparedness
- Tiffany Levine, MSN, RN - Director, Center for Personal Health Services
- Todd Kisner, MPH – Director, Center for Health Protection
- Todd Marshall, BS, LEHP – Director, Center for Environmental Health Improvement

#### The 10 Essentials of Public Health Services

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

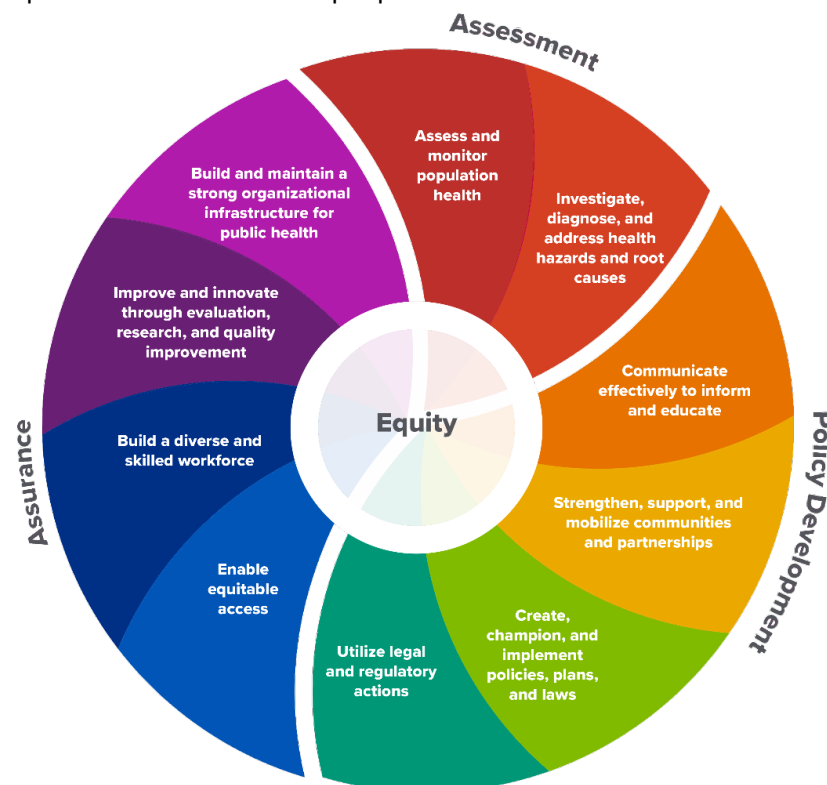


Image courtesy of the Centers For Disease Control and Prevention, available online 02/11/2022 at:

<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**

As of May 8, 2025, there are no cases of measles in Winnebago County. There are 1,001 cases of measles in the U.S., 93% (928) of which are associated with the multistate outbreak. The Winnebago County Health Department (WCHD) continued active surveillance for symptoms of the disease through Essence, the syndromic surveillance system through emergency departments. WCHD remained responsive to healthcare provider calls suspecting measles infection.

As of May 7, there are no reported cases of Highly Pathogenic Avian Influenza A (H5N1) identified in cattle or humans in Winnebago County. There continued to be 70 reported [human cases of H5N1](#), while the number of dairy herds impacted rose to 1,053 confirmed cases in 17 states.

WCHD's Respiratory Surveillance Report for the Centers for Disease Control and Prevention (CDC) Week 17 (ending Saturday, April 26, 2025) can be found on the WCHD website at:

<https://publichealth.wincoil.gov/data-and-reports/data-and-charts/>.

## **Environmental Health**

WCHD is preparing for vector-borne disease surveillance which includes tick drags and mosquito collection and prevention. To remove breeding area for mosquitoes, WCHD continued to prepare for the Free Tire Drop-Off event, to be held on May 10. WCHD utilized Qualtrics for registrations, with approximately 100 registrations accepted. Additionally, WCHD hosted a one-hour larvicide training for WCHD code enforcement staff, as well as for code enforcement and public works staff from other municipalities. This training will allow participants to apply mosquito larvicide products in areas of standing water to reduce the number of mosquitoes in the environment in Winnebago County. In April, WCHD published a Vector Surveillance Report to summarize the findings from the 2024 vector surveillance activities. This report can be found on the WCHD website at:

<https://publichealth.wincoil.gov/data-and-reports/data-and-charts/>





## Assessment

## 2. Diagnose & Investigate

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

### Environmental Health

In April, WCHD's Center for Environmental Health Improvement (EHI) responded to a residential liquid propane spill and conducted an assessment. WCHD's assessment looked at the potential impact of nearby water sources. Two (2) certified nitrate water samples were taken over the course of two (2) weeks. Preliminary results suggest the water at the residence may have been influenced by the incident. The owner of the property was instructed on next steps and how to continue taking samples.

### Communicable Disease

WCHD's Center for Health Protection in conjunction with staff from the Center for Personal Health Services completed the first round of testing for contacts with an exposure to an active case of Tuberculosis (TB). Of the 35 individuals tested, two (2) positive results were identified and are working with WCHD.

In response to an outbreak of *Carbapenem-resistant Enterobacterales (CRE)*, WCHD's Center for Health Protection assisted a long-term care facility (LTCF) with reaching out to the power of attorneys/residents in getting their consent to participate in a CRE screening. The CRE screening is part of a point prevalence survey (PPS) that the Illinois Department of Public Health (IDPH) requested of the facility. WCHD and the LTCF encouraged residents to participate in the screening so the facility can take the actions needed to prevent additional illness and promote the health and safety of residents. WCHD was able to reach 48% percent of the POA/residents. The Center for Personal Health Services trained the LTCF nurses on how to administer the screening. Twenty-five (25) residents were screened and all results were negative.



## Policy Development

## 3. Communicate

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

To celebrate 30 years of *National Public Health Week*, WCHD in collaboration with our Northern Illinois Public Health Consortium (NIPHC) partners, participated in a social media messaging campaign "It Starts Here" series from April 7–13. Each day, WCHD highlighted a different public health focus: Disease Surveillance, Food Safety, Water Protection, Information Sharing, Violence Prevention, Protecting Maternal & Child Health, and Improving Mental &





Behavioral Health. These topics were chosen to help highlight the three health priorities and the variety of services WCHD has a role in to protect the health of the community.

WCHD also recognized *National Volunteer Week* (April 20-26), with a series of posts to thank Medical Reserve Corps (MRC) volunteers for their service and dedication while also encouraging others to volunteer. Other promotions on the social media included the upcoming trauma trainings. Additionally, through the website, WCHD promoted the Free Tire Drop-Off event and posted a promotion on the permits and licensure page for the Center for Environmental Health Improvement's (EHI) customer service survey to help collect feedback.



The *Winning Start Winnebago* campaign continued through partner and internal meetings, messaging refinement, and early asset creation. These efforts supported a soft rollout at the *Week of the Young Child* event and set the stage for the program's official launch on May 12 in collaboration with IDPH and Alignment Rockford.

In April, WCHD developed the communications strategy around mental health in the community by focusing on encouraging everyone to take ten minutes each day for their mental wellbeing and to use CredibleMind with trusted mental health resources to take ten. *Take Ten 815* with *CredibleMind* initiative progressed with the creation and distribution of initial marketing materials. Partner email outreach began in April, and the team began designing promotional items for an upcoming May line dancing event that will promote *Take Ten 815* in communities most impacted by social determinates of health.

**Policy Development****4. Mobilize Community & Partnerships**

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

**Youth Leadership Council**

The Youth Leadership Council (YLC) held three meetings in April. On April 1, the students brainstormed ideas for *National Prevention Week*. The general consensus was to utilize social media and create a video to support mental health self-care. On April 15, WCHD's communications staff recorded short videos of the students promoting the *Take Ten 815* message with self-care ideas. The self-care ideas, backed by CredibleMind, included: talking with friends, reading a good book, practicing yoga, playing with your dog, and taking deep breaths. On April 29 the YLC held the final meeting of the 2024-25 school year and wrapped up by hosting an ice cream social, inviting prospective peers to enjoy treats provided



by an ice cream truck. WCHD staff gathered information from prospective members to share the 2025-26 application with them to register for the YLC that begins in the fall. YLC students reflected on their favorite moments of being a part of the council.

### **Maternal, Infant, and Child Health**

In April, the Maternal, Infant, and Child Team (MICT) met and WCHD provided an update on *Winning Start Winnebago* and the development of the Universal Newborn Support System using the “Family Connects Model”. WCHD staff continued to participate in the Family Connects International Academy Training, which is a two (2) month orientation program for agencies planning to launch the model in their community. Agreements with the healthcare systems were in the process of being secured which will enable them to make referrals to *Winning Start Winnebago*.

As part of *Winning Start Winnebago*, WCHD is building the Doula Development Program by drafting the application process and the scholarship requirements, including a commitment to ensure the candidates continue working in the community. Once complete, WCHD will announce the open applications to identify potential candidates. The grant covers five doula scholarships.

### **Opioid Response**

WCHD’s WINNIE Harm Reduction Program continued to provide outreach at the Winnebago County Courthouse three half-days each week throughout the month. In addition, the team provided naloxone training at 12 community partner locations.

### **Trauma Informed Community**

The Illinois Collaboration On Youth (ICOY) finalized plans for the May 15 conference on Trauma-Informed De-escalation, supported by funding from the Winnebago County Community Mental Health Board.

More information about the training can be viewed on the WCHD website here:

<https://publichealth.wincoil.gov/freetraumatrainings/>



The Community Health Improvement Coordinator presented the new Trauma-Informed Proclamation to the Violence Reduction Workgroup (VRW), ensuring clarity on its clauses. WCHD shared a list of previously signed organizations in need of reconnection for renewed commitments and the need to outreach for new partnerships.

WCHD received a two-year extension on the WCCMHB grant which supports the Trauma-Informed Community Coordinator as well as trauma trainings provided by ICOY. The Violence Reduction Workgroup is reviewing feedback from past trainings to determine what topics to cover in the next year.

A Trauma 101 Training, with 30 registered attendees, was held on April 29 in a hybrid format with some attendees at WCHD and others on Zoom. Lori Poppen and Becky Gielow from the VRW Training Group



were the presenters. WCHD's Community Health Improvement Coordinator is being trained to provide Trauma 101 presentations in the future.

Additionally, the VRW reviewed the IPLAN 2025 violence reduction goals, emphasizing their alignment with the workgroup's mission.

#### **Tobacco Free Communities**

WCHD's Tobacco Free Communities (TFC) staff continued to facilitate the CATCH My Breath e-cigarette prevention program at Rosecrance Griffin Williamson Campus. TFC staff continued to do random and targeted Smoke Free Illinois Act (SFIA) checks and follow-ups, this month the checks occurred in Rockford, Loves Park, and Roscoe. The Tobacco Enforcement Program held a training for new Youth Agents on April 15. Tobacco compliance checks were conducted in Rockford and TEP staff was scheduling the four remaining law enforcement agencies for May.

#### **Food Safety Partnerships**

WCHD partnered with the Rockford Park District (RPD) to ensure all food vendors that plan to participate in RPD summer events are educated on the permit application, equipment requirements, and expected responsibilities needed for participation. WCHD's Environmental Health Improvement staff provided a food code and special event training on April 17 to potential event organizers and food vendors.



## 5. Policies and Plans

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

#### **Strategic Initiatives**

WCHD's strategic workgroups completed a Strategic Refresh on April 10, 2025 which highlighted key accomplishments such as reaccreditation, workforce development enhancements, trauma-informed policies, and expanding community partnerships. Many groups stressed the importance of updating WCHD's mission and vision statements to better address changing community needs, alongside refining or redefining organizational values. Several teams also suggested revising the strategic plan objectives to reflect evolving priorities, while staying aligned with WCHD's mission, vision, and values.

Strategic Workgroups met in April and the progress is summarized below:

**Assessors:** reviewed the strategic plan and upcoming IPLAN reports, addressing maternal and child health, violence reduction, and mental and behavioral health. They discussed data collection challenges, survey participation, inconsistencies, and alternative data sources.





**Assurance:** divided into two groups to review grants (WIC and Substance Use Prevention) and complete the Grant Deliverable Alignment Review Tool, ensuring alignment across the three health priorities.

**Organizers:** evaluated multiple QI tools and their optimal use and examined presentation models to use to enhance staff understanding of data interpretation in QI projects.

**Collaborators:** reviewed their current partner list to ensure that each agency/organization was categorized according to the Jelly Bean Diagram. They sent messages promoting a mental health first aid training and the trauma training. They will continue to add layers of categorization to the list to allow for more refined communications from WCHD.

**Policy Makers:** explored issues in which public policy and/or advocacy is needed including mental health initiatives, community partnerships for syringe collection, and strategies to support violence reduction and firearm safety.

**Reaccreditation:** reviewed the roles of all centers and departments, their impact on county residents, how their services interconnect, and eligibility criteria, as part of their mapping process to improve the functionality of the KMS with the overall goal to have users be able to get to the documents they need in four clicks or less.

**Reporters:** conducted a comprehensive review of social media messaging on three health priorities, refining four messages to align with the updated IPLAN by assessing objectives, emphasizing community impact, and ensuring coherence, before collaboratively evaluating priority webpages for necessary updates.

**Workforce Development:** updated the Workforce Development Plan and reviewed the process for uploading meeting minutes in KMS.

### Public Health Preparedness

WCHD's Center for Public Health Emergency Preparedness (PHEP) participated in Northwest Illinois Preparedness and Response Coalition (NIPARC) Natural Disaster (Tornado) Medical Response and Surge Exercise (MRSE) on April 10. Additionally, the PHEP Center Director observed the 2025 Rockford International Airport Drill on April 25.



## 6. Laws & Regulations

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

The Refugee Resettlement Program continued to be on hold for new clients.

WCHD continued to partner with NIPHC to monitor bills being filed in both the Illinois House and Illinois Senate that could have impacts on public health authority, funding, conflicts with existing operations,



etc. WCHD monitored the Meat and Poultry Inspection Act (HB2196), which may have some implications on public health regulations. WCHD and NIPHC are working to share concerns regarding the health and safety impacts of this proposed legislation to elected officials.

Leadership reviewed and made no substantive changes to the following policies:

- 005-0601-22: Equal Employment Opportunity-Recruitment Policy
- 004-0531-22: Americans with Disabilities Act Compliance Policy

*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**

In April, WIC staff participated in outreach activities and worked to schedule appointments while at these activities. WIC staff collaborated with partners to establish consistent outreach locations. WCHD plans to provide outreach on the second Tuesday of each month at the Salvation Army's food pantry. WIC met with City of Rockford's Head Start to strengthen their relationship through a memorandum of understanding (MOU). Head Start staff will present at the next WIC monthly meeting and WIC may attend monthly family events that Head Start hosts. This collaboration is part of the Nutrition Education Plan (NEP). The NEP is a federal requirement that establishes nutrition priorities, including breastfeeding promotion and support, and focuses activities to improve participant health and nutrition outcomes.

The Substance Use Prevention Program continued providing communications materials on preventing Underage Drinking to Harlem Middle School and providing vaping awareness materials at RESA Middle School and Flinn Middle School. The Youth Prevention Education (YPE) program, Too Good for Drugs, resumed at RESA Middle School on April 1 and is scheduled to resume at Johnson Elementary on May 1.

During the April 16 igrow partner meeting, WCHD's Coordinated Intake Staff was commended by the partners for keeping their programs at their caseload capacity.

WCHD's staff attended a parent voice session at Easterseals, which provided an opportunity to meet with parents and gain insight on their experiences with home visiting.

WCHD participated in the Week of the Young Child event on April 12 at Harlem High School promoting the Winning Start Winnebago initiative and engaging families on home visiting and other resources.



### **Access To Services**

Having a bilingual case manager has facilitated growth in the Better Birth Outcomes program, with ten (10) additional enrollments this month of pregnant woman that speak Spanish. The Illinois Breast and





Cervical Cancer / WISEWOMAN program continued to work with healthcare partners to increase enrollment and increase teaching sessions.

To improve access to mental health resources, WCHD launched CredibleMind. This free, self-care website includes self-assessments and tools to improve mental wellbeing. With over 200 topics to explore, there is something for everyone. WCHD started encouraging everyone to take ten (10) minutes each day for their mental wellbeing and began providing CredibleMind to help residents with trusted mental health resources. In April, over 200 users visited the [taken815.crediblemind.com](https://taken815.crediblemind.com) website.

To further this initiative in the community, the Communities of Concern Workgroup continued planning a community program, “Get Your Health in Line” event scheduled for May 28 from 5:30pm – 8:30pm at the Collective Event Space. The event will include line-dancing, a special guest speaker on mental health, and a presentation on the CredibleMind website. Dr. Kevin Thomas is the confirmed guest speaker.

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## 8. Diverse & Skilled Workforce

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

WCHD is currently recruiting for the following positions:

- Public Health Educator
- Public Health Nurse



Additionally, the Center for Environmental Health Improvement is interviewing candidates for a Part Time Summer Help position. This position will assist with conducting inspections for weekend events. This will ensure time for the full time WCHD food staff to conduct Winnebago County’s annual food permitted establishment inspections. Annual permitted food establishments are the priority due to the large populations served.

### **Training**

In April, some WCHD staff had the opportunity to participate in additional trainings:

- Three WIC nutritionists attended a webinar, “WIC’s Cost Savings Benefits - A Look At The Research,” hosted by the National WIC Association (NWA) on April 10. The webinar discussed the findings from a study in Texas that examined the cost saving benefits of WIC.
- The WIC Supervisor and two WIC Nutritionists attended a webinar, “Black Maternal Health: Strategies For Saving Lives,” hosted by the Illinois Department of Human Services on April 17. The speaker talked about disparities in healthcare and how African American women are statistically not given the same care as other minority groups.
- Four WIC Staff attended the annual WIC Conference held from April 21 to 23 in Springfield. There were three different tracks where staff were placed: WIC Supervisor, Nutritionists (CPA’s), and Intake (Frontline). The WIC Supervisor track had presentations on leadership, anthropometric data, and outreach. The Nutritionists track had presentations on food allergies,



risk factors, and substance use. The Intakes track had presentations on the interactive food guide, the food packages, and being the first face of the WIC program.

- The PHEP Director attended the 2025 NACCHO Preparedness Summit in San Antonio, Texas from April 29 to May 2.
- The WCHD Communications Staff attended a training on communications guidance for Family Connects International, an integral component of *Winning Start Winnebago*.
- A WCHD nurse attended the “Respectful Care Breakfast” hosted by UW Health on April 1. She also participated in webinars for “Understanding Perspectives of Maternal and Infant Immunizations”, Family Connects International Academy, and the LULAC Mexican Consulate.
- A WCHD nurse participated in Family Connects International Academy and attended a webinar, “Preventing and Responding to Intimate Partner Violence in Reproductive Health Settings.”
- The WIC Supervisor attended a webinar hosted by the National WIC Association (NWA) called “WIC Farmers Market Nutrition Program (FMNP) Landscape Scan Report Findings” on April 3. The NWA explained the findings related to increasing access to healthy food through farmers market grants. The survey was administered to WIC state agencies in Spring of 2024 and in-depth interviews with WIC participants and farmers market staff were conducted in Fall of 2024. The results indicated new electronic vouchers did not discourage farmers from wanting to be on the FMNP.
- WCHD’s igrow staff attended the Coordinated Intake Learning Community Meeting in Chicago. The meeting focused on self-care. The Learning Community led an interactive presentation that provided tools and resources to navigate stress and practice self-care measures.



Assurance

## 9. Improve & Innovate

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

### Quality Improvement Initiatives

In April, staff were invited to participate as volunteers in WCHD’s 2025 Quality Improvement (QI) initiatives during WCHD’s All Staff meeting. Over 50% of WCHD staff volunteered to participate in a QI initiative helping to ensure a diversity of perspectives within QI project teams. QI Plan highlights are provided in Tables 1 and 2 below.

**Table 1.1: Leadership and Systems Thinking Table 1.1: Leadership and Systems Thinking**

<b>Goal 1: Advance a culture of continuous quality improvement within Winnebago County Health Department</b>		<b>Updates April 2025</b>
Objective 1.1	Review the Quality Improvement Plan 2025 goals and objectives with Leadership and Supervisors by February 2025.	<b>Completed</b>
Objective 1.2	Ensure Center level quality improvement initiatives are aligned with the Strategic Plan by January 2025.	<b>Completed</b>
Objective 1.3	Present the 2025 Quality Improvement Plan to be recommended by the Quality Committee and adopted by Board of Health by February 2025.	<b>Completed</b>
Objective 1.4	Ensure diversity of perspectives within Quality Improvement Teams by including at least one member outside of the center/program for all QI projects by March 2025.	<b>Completed</b>
Objective 1.5	Present an overview of quality improvement initiatives at the Annual All Staff by December 2025.	Planned for December 2025
Objective 1.6	QI Team Leads will ensure that the performance management system (KMS) is updated with their QI initiatives including charters, process flow, QI tools, and initiative updates by March 2025.	Ongoing

**Table 1.2: Quality Improvement Initiatives**

<b>Goal 2: Improve the quality of Winnebago County Health Department interventions</b>		<b>Updates April 2025</b>
Objective 2.1	Utilize at least one quality improvement tool to identify changes needed to improve the current processes for each quality improvement initiative by May 2025.	All QI projects have used QI tools to identify changes needed to improve the current process of quality improvement.
Objective 2.2	Implement at least one change to improve the current process for each quality improvement initiative through the PDSA cycle by June 2025.	Approximately 65% of Quality Improvement (QI) initiatives have implemented at least one change to enhance current initiatives. Plans have been made for implementing the remaining changes in other projects.
Objective 2.3	Analyze the impact of change for all QI initiatives to determine the ACT (adopt, adapt, abandon) of PDSA cycle and implement by October 2025.	Approximately 15% of QI initiatives have analyzed the impact of change to determine the next phase of their QI project which involves adopting, adapting or abandoning the implemented change.

**Table 1.3: Workforce Development**

<b>Goal 3: Enhance workforce competency in Quality Improvement</b>		<b>Updates April 2025</b>
Objective 3.1	Required Quality Improvement trainings will be completed by 100% of new employees within 90 days of onboarding.	ongoing
Objective 3.2	Fifty percent (50%) of staff will be engaged in one or more of the 2025 QI initiatives adopted as part of the Quality Improvement Plan by February 2025.	<b>Completed</b>

**Table 1.4: Communication**

<b>Goal 4: Ensure transparent communication and reporting of quality improvement efforts to stakeholders.</b>		<b>Updates April 2025</b>
Objective 4.1	WCHD Directors (QI Team Leads) will report monthly on quality improvement initiatives and the status of their projects in relation to the PDSA cycle to the Director of Data and Quality during the calendar year 2025.	ongoing
Objective 4.2	WCHD Directors (QI Team Leads) will present updates on the quality improvement initiative to the Board of Health Quality Committee at least once during the calendar year by December 2025.	ongoing
Objective 4.3	WCHD Directors (QI Team Leads) will provide an annual report via Storyboard for each quality improvement initiative by December 2025.	Planned for December 2025
Objective 4.4	QI Team Leads will present monthly updates on their QI projects during leadership QI meetings using WCHD's performance management system (KMS) to improve cross-team collaboration by June 2025.	Planned for June 2025
Objective 4.5	2025 QI Storyboards will be posted Winnebago County Health Department website by January 2026.	Planned for January 2026

**Table 2.0. 2025 Center/Program Level QI Initiatives**

<b>Project</b>	<b>Center</b>	<b>Project Phase April 2025</b>
By December 31, 2025, WCHD will respond to an identified foodborne illness or suspected outbreak within 48 hours of notice with an assessment/mitigation plan and a reopen strategy for the food establishment (if closed) to return to normal operations.	Health Protection/Environmental Health	Plan
By December 31, 2025, increase the percentage of Winnebago County MRC Volunteers participating in one or more volunteer opportunities annually from 44% (14 to a minimum of 66% (21).	Public Health Emergency Preparedness	Plan
Identify and initiate a process for automating the review and delegation of public health concerns, service requests, and questions from website to address 50% of the messages by December 31, 2025 and implement a tracking system for follow-up communications with a minimum of 50 follow-ups tracked by December 31, 2025.	Communications	Do
Identify communication channels WCHD can utilize to connect with the 12 identified hard to reach populations, develop a procedure for building bi-directional communications, and establish the communication channel by providing culturally relevant public health messaging to address a health priority and or disparity for 25% (3/12) of the identified groups by December 31, 2025.	Communications	Do
By December 31st, 2025, reduce the number of business days to respond to data requests by 30% dependent on system.	Data and Quality	Do
By December 31, 2025 increase response to EHI customer service surveys from 2% to 10%.	Environmental Health	Do
By December 31, 2025, develop and implement an expense classification training program that effectively equips program managers to identify and accurately classify reimbursable and non-reimbursable expenses and increase grant fund utilization from 90.4% in FY2024 to at least 92.5% of the total contract or award amount in FY2025.	Finance	Do
By December 31st 2025, The OHPP (Oral Health Prevention Program) will increase the number of referred pregnant and parenting families who schedule a dentist appointment from 3% to 10%	Health Promotion and Wellness	Do
By Dec 31st 2025, WIC caseload rates will increase to 85% of the assigned caseload of 6,760 or 5746 clients.	Health Promotion and Wellness	Do





Project	Center	Project Phase April 2025
By January 31, 2025, all Directors will collaborate and develop goals and objectives for each Strategic Workgroup. By March 30, 2025, each Strategic Workgroup will have developed a minimum of three (3) SMART goals and objectives with at least one goal including cross-collaboration with other strategic workgroup. All goals and objectives will be documented in WCHD's Performance Management System (PMS), KMS. By December 31, 2025, each Strategic Workgroup can demonstrate collaborating to achieve goals and objectives through monthly postings of their minutes in KMS which will be tracked by the Director of Strategic Initiatives.	Strategic Initiatives	Do
IBCCP will attain 80% of caseload goal by serving 380 participants by June 30, 2025. IBCCP will have a stretch goal of 475 participants enrolled and receiving services by December 31st, 2025.	Personal Health Services	Study
By December 31, 2025, increase documentation reviews for destruction and/or archiving by 20%.	Public Health Policy	Act/Adapt

*Assurance*

## 10. Organizational Infrastructure

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

### **Governmental Organizations**

The Winnebago County Board Chairman Chiarelli was provided updates on the potential impacts of federal funding cuts to public health, revisions to the Food Code based on the updated FDA, the final report on the mitigation of asbestos at the Illinois Cabinet Company, Department of Army activities in residences in the former Camp Grant footprint, and the follow-up point prevalence survey (PPS) at River Bluff Nursing Home being conducted in collaboration with the WCHD Health Protection staff.

In preparation for the legislative panel, the Chairman was provided talking points on the intersection of county-led initiatives on social determinants of health. Examples included Neighborhood and Built Environment with focus on increasing public safety, reducing blight, transportation for rural community areas, reducing exposure to lead, Healthy Homes; Education Access and Quality focused on ROE4 with administrative resources and county-wide initiatives; and Social and Community Context addressed by host fee funding to support social and community-based initiatives that build community connectedness.



Dr. Martell has been working with Winnebago County Administration on proposals for the Winnebago County Wellness Center.

Todd Marshall, Director of Environmental Health and Dr. Martell will be working with the Chairman and elected officials from communities identified in the Water Security Assessment to begin discussion around planning to address their water system issues.

Work continued on the Public Health Workforce Transformation. Dr. Martell is participating on the IPLAN team to transform and innovate the process of community health assessment and community health improvement.

The Form Request for Recertification as a local health department was signed by the Board of Health President Dr. Williams and submitted to the Illinois Department of Public Health on April 18, 2025.

### **Informational Updates**

As a member of the Illinois Perinatal Quality Collaborative Community Advisory Board, Dr. Martell advocated for coordination with local health departments on their “mini” grants to hospitals and examples of letters of support and/or commitment that could be used to support grant applications. Many of the “mini” grants focus on connecting in-patients to community resources including WIC and MIECHV. With a focus on mental health, it was an opportunity to share the CredibleMind application and the Take Ten 815 campaign to support self-care.

Work continues with Alignment Rockford in the development of the Community Advisory Board (CAB) to support the Universal Newborn Support System (UNSS) Family Connects International initiative as part of *Winning Start Winnebago*. An official launch is being planned through the Center for Communications/PIO for May 12, 2025.

The Final Report from the USEPA for the Illinois Cabinet Company was released on April 30, 2025. Throughout the project the representative from the USEPA Region V office has kept the team informed. There were no significant air quality issues/exceedances identified throughout the project.

Michael Jarvis attended a legislative summit hosted by the Rockford Regional Health Council on April 16. Local elected leaders were present and answered questions regarding the health of the community and the efforts made by their respective governmental bodies at addressing the steps being taken to address poor health outcomes and other healthcare concerns.

### **Non-Governmental Organizations**

Dr. Martell shared the experiences of the Winnebago County Health Department in using Qualtrics surveys to support the MAPP 2.0 process with the San Francisco Department of Public Health as well as the development of the tools that were used to prioritize health issues and strategies.



# Data Appendix

## 1. Monitor Health

### Communicable Disease

Disease	April 2025	April 2024	2025 Year Total	Calendar Year 2024	Calendar Year 2023
Acute Flaccid Myelitis	1	0	1	0	0
Anaplasma phagocytophilum (formerly HGA)	0	0	0	6	1
Brucellosis	0	0	0	0	0
Botulism Infant	0	0	0	0	0
Campylobacteriosis	2	7	14	83	54
Candida auris, clinical	0	1	0	4	0
Candida auris, screening	0	0	1	0	1
Carbapenemase Producing Organism - Clinical	1	0	3	6	3
Carbapenem Resistant Organism	2	0	9	15	5
CE - Jamestown Canton Neuroinvasive Disease	0	0	0	1	0
Chlamydia	108	142	424	1566	1874
Cryptosporidiosis	0	1	3	11	9
Cyclosporiasis	0	0	0	2	2
Dengue	0	0	1	0	1
Ehrlichia chaffeensis (formerly HME)	0	0	0	2	0
Ehrlichia muris eauclairensis infection	0	0	0	1	0
Gonorrhea	31	22	133	467	417
Haemophilus Influenzae Invasive Disease	3	0	7	6	8
Hemolytic Uremic Syndrome (HUS) Post Diarrheal	0	0	0	0	2
Hepatitis A	1	0	3	3	8
Hepatitis B Acute	0		1	1	
Hepatitis B Chronic	3	1	21	28	29
Hepatitis C Virus Acute Infection	0	1	0	4	3
Hepatitis C Virus Chronic Infection	14	8	51	113	100
Hepatitis C Virus Perinatal	0	0	1	0	0
Hepatitis Delta	0	0	0	0	1
Histoplasmosis	0	1	1	5	2
HIV	0	0	6	22	26
Influenza with ICU Hospitalization	1	5	75	28	18



Legionellosis - Legionnaires Disease	0	0	4	16	13
Listeria Invasive Disease	1	0	2	1	0
Lyme Disease	1	2	3	41	44
Malaria	1	0	1	5	1
Meningococcal (Neisseria Meningitidis) Invasive Disease	0	1	0	1	0
Monkeypox	0	0	0	0	0
Mumps	0	0	0	2	2
Pediatric Influenza Death	0	0	0	0	0
Pertussis	2	1	7	30	11
Rabies, Potential Human Exposure	2	0	9	67	70
Respiratory Syncytial Virus (RSV) with ICU Hospitalization	2	0	17	7	
Salmonellosis	4	2	8	50	41
SARS-CoV-2 Infection (COVID-19)	0	136	0	1665	8345
SARS-CoV-2 Infection (COVID-19) with ICU Hospitalization	2	0	28	31	0
Shiga toxin-producing E. coli (STEC)- O157:H7	0	0	0	1	2
Shiga toxin-producing E. coli (STEC)- Shiga toxin positive, non-O157 serotype	0	0	1	2	3
Shiga toxin-producing E. coli (STEC)- Shiga toxin pos, not cultured or serotyped	0	0	3	12	18
Shigellosis	2	1	3	9	9
Spotted Fever Rickettsioses	0	0	0	5	0
Streptococcal Disease Invasive Group A	1	1	4	18	25
Streptococcal Disease Invasive Group A with Necrotizing Fasciitis	0	0	0	0	2
Streptococcal Toxic Shock Syndrome	0	0	0	0	1
Streptococcal Toxic Shock Syndrome with Necrotizing Fasciitis	0	0	0	1	0
Streptococcus Pneumoniae - Non Drug Resistant Invasive Disease (< 5 years)	0	0	1	0	1
Syphilis	2	16	9	97	108
Tuberculosis	0	0	0	2	4
Tularemia	0	0	1	0	0
Varicella (Chickenpox)	0	0	1	7	7
Vibriosis	0	1	0	4	5
West Nile Virus Neuroinvasive Disease	0	0	0	2	2
West Nile Virus Non-Neuroinvasive Disease	0	0	0	2	0

Environmental Health

**Radon**

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
<b>Radon Screenings</b>	0	0	0	2
Average (pCi/L)	-	-	-	3
Max (pCi/L)	-	-	-	3.7
<b>Radon Test Kits Purchased</b>	0	6	11	17
Average (pCi/L)	0.8	-	1.9	6.3
Max (pCi/L)	0.8	-	4.6	15.2
<b>Phone Calls</b>	0	1	0	6
<b>Units Reported Mitigated</b>	0	0	0	0

**Non-Community Water Wells**

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
<b>Non-Community Water Sampled</b>	4	8	18	44
<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	83	42%
<b>Inspections</b>	160	99	62%
<b>Mitigated Units</b>	140	60	43%

**Testing Lead in Water**

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
<b>Samples Taken &amp; Analyzed</b>	2	1	7	1
<b>Number Exceeding IEPA Lead Level</b>	0	0	0	0
<b>Average Lead Content</b>	0.8	0.9	1.7	0.9
<b>Maximum Lead Content</b>	0.8	0.9	8.3	0.9

**Food Complaints**



	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
Foodborne Illness Complaints	5	1	16	13
Foodborne Illness Investigations	5	1	16	13
Non-Foodborne Illness Complaints	22	15	74	70

## Housing Complaints

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
Housing Complaints	46	58	174	197
Nuisance Complaints	21	20	97	86
Survey Complaints	15	4	92	86
Received Complaints	83	83	343	418
Re-Check on Complaints	349	384	1382	795

## Wells &amp; Septic

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
Well Complaints	13	4	26	6
Septic Complaints	6	12	39	30

## Food Inspection Performance Indicator Risk Factors

Risk	Violation														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Total	35 7.69%	32 7.03%	25 5.49%	0 0%	21 4.62%	3 0.6%	0 0%	18 3.9%	1 0.2%	138 30.3%	2 0.4%	0 0%	13 2.8%	0 0%	11 2.4%
High	6	5	3	0	0	2	0	9	1	37	2	0	2	0	4
Medium	29	26	21	0	13	1	0	8	0	83	0	0	9	0	6
Low	0	1	1	0	8	0	0	1	0	18	0	0	2	0	1

Risk	Violation													
	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Total	44	0	0	3	2	8	41	35	2	1	0	0	20	0
	9.6%	0%	0%	0.6%	0.4%	1.7%	9.0%	7.6%	0.4%	0.2%	0%	0%	4.4%	0%
High	16	0	0	1	2	1	15	19	0	1	0	0	6	0
Medium	28	0	0	2	0	7	23	16	1	0	0	0	6	0
Low	0	0	0	0	0	0	3	0	1	0	0	0	8	0

## 3. Communicate





## Digital Media

TOP 3 Viewed Webpages For April 2025		TOP 3 Social Media Post For April 2025	
# 1	Birth And Death Certificates 1,465 views	Prepare Now: Tornado Watch 04/01/2025; 2.2K Reach	
# 2	Get a Permit or License 749 views	Urgent Maternal Warning Signs 04/14/2025; 1.2K Reach	
# 3	Free Tire Drop-Off 396 views	Protect Against Measles 04/24/2025; 687 Reach	

	# Forms Received Through Website For April 2025	# Forms Received Through Website For April 2024	Forms YTD 2025
<b>Public Health Concerns</b>	26	31	73
<b>Request for Involvement</b>	2	2	13
<b>Submit Question To WCHD</b>	14	34	96

## 4. Mobilize Community &amp; Partnerships

## Youth Prevention Education (YPE)

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
<b>School</b>	RESA	RESA/Flinn	RESA/Johnson	RESA/Flinn/Johnson
<b>Students</b>	173	170/140	175/0	320/140/128 = 438
<b>Curriculum(s)</b>	Too Good for Drugs	Too Good for Drugs	Too Good for Drugs	RESA/Flinn/Johnson

## Youth Leadership Council

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
<b>Youth Served</b>	23	16	23	49
<b>Schools Represented</b>	10	7	10	10

## Illinois Youth Survey (IYS)



	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Schools Registered for the Illinois Youth Survey	0 (Off year)	23	0 (Off year)	22
Schools That Completed the IYS	0 (Off Year)	0	0 (Off year)	17

**5. Policies and Plans**

## MRC Volunteers

New MRC Volunteers April 2025	Total New MRC Volunteers for July 1, 2024-June 30, 2025
2	9

**6. Laws & Regulations**

## EH Code Enforcement

	April 2025	April Last Year (2024)	Calendar YTD 2025	Calendar YTD 2024
Foods	540	469	2004	1641
Wells	10	10	38	28
Septic	5	4	11	14
Loan inspection	8	16	36	43

	Administrative Hearing April 2025	In-House Hearing April 2025	Calendar Year To Date 2025 Administrative	Calendar Year To Date 2025 In House	Administrative Hearings Calendar Year 2024	In House 2024
Housing	33	11	52	68	53	84
Foods	0	2	0	5	0	3
Wells/Septic	1	0	2	1	0	0



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

	Random Checks	Targeted Checks	April Totals	Calendar Year
Number of new compliance checks	9	1	10	94
Number of rechecks (businesses may be rechecked more than once)	18	1	19	106
Number of businesses found to be in compliance during new checks	4	1	5	42
Number of businesses in compliance during rechecks	13	1	14	70
Number of violations observed during compliance checks (businesses may have more than one violation)	10	0	10	72

## Tobacco Enforcement Program: Compliance Checks

	Benchmark	Round 1 Dec 2024	Round 1 Cont'd Jan 2025	Round 2 March 2025	Round 3 April 2025	Round 3 May 2025
Checks Completed	158	64	91	159	75	TBD
Sales to Youth	0	3	8	10	1	TBD
Communities Involved	5	3	2	5	1	4

**7. Equitable Access**

## Dental

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Kits Sent	23	14	160	420
Families Recruited	14	9	98	230
Families Who Access a Dental Provider or Home	0	0	23	30

## Igrow

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
# CIAT Completed (Coordinated Intake Assessment Tool)	30	40	180	185
MIECHV Home Visiting Programs Referrals	17	21	125	117
Non MIECHV Home Visiting Agencies Referrals	13	19	60	68



## Family Planning

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Number of Clients Seen	103	104	385	1196
New Clients	52	45	181	496
Continuing Clients	51	59	204	700
Pregnancy Tests	37	25	148	397

## Family Planning Quality Measures

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Initial Visits	18	12	38	155
Charts Reviewed	24	20	94	300
ACES Screenings	22	20	90	289
Pre/Interconception Education Documented	24	20	90	283
ACES Compliance	92%	100%	96%	98%
PRE/Interconception Compliance	100%	100%	100%	95%

## Illinois Breast and Cervical Cancer Prevention/ WISEWOMAN Services

Service	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Clinical Breast Exam	22	18	54	221
Mammograms	18	13	56	182
Pap Smear	3	6	11	42

## WISEWOMAN Services

Service	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
WISEWOMAN census	3	-	11	7
WISEWOMAN sessions completed	3	-	34	7



## Integrated Clinic

Service	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Clinic Visits	22	18	54	221
Nurse Visits	18	13	56	182
Total Visits	3	6	11	42

## Refugee Health

Nationality	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Afghanistan		5	6	26
Burma			4	12
Burundi				
Central Africa Rep.				7
Congo		15	23	186
Cuba			1	6
Eritrea				
Ethiopia				
Guatemala				4
Haiti		1	1	17
Iran				
Iraq				16
Ivory Coast				
Malaysia				
Pakistan				
Rwanda			2	
Sudan				
Syria			7	16
Tanzania				
Thailand				
Ukraine				1
Venezuela			4	12
Vietnam				
Total		21	48	303

**Harm Reduction Program**

<b>Harm Reduction Services</b>	<b>April 2025</b>	<b>April 2024</b>	<b>Calendar Year To Date 2025</b>	<b>Calendar Year 2024</b>
Harm Reduction Kits Distributed (Drug testing strips)	109	11	249	374
Naloxone Kits Distributed	792	593	2153	5834
People Trained (DOPP)	408	44	978	1412
Reversal Forms Received (DOPP)	0	0	3	4
Community Sites for Rapid Naloxone Deployment/Trainings (DOPP)	41	16	126	314

**PrEP Access**

<b># Prescribed PrEP at WCHD in 2025</b>	<b>Attended 1<sup>st</sup> PrEP Apt with Community Provider</b>	<b>Didn't Attend 1<sup>st</sup> PrEP Apt/Unable to Reach</b>	<b>Taking PrEP 6 Months Post WCHD Visit</b>	<b>Taking PrEP 9 Months Post WCHD Visit</b>
4	2	2	0	0

**Ryan White**

<b>Ryan White Services</b>	<b># of Individuals Served in Reporting Month</b>	<b>2025 Year to Date Total Served</b>
Case management	59	238
Oral Health Care	0	3
Outpatient Medical Care	1	3
Housing Services	8	32
Emergency Financial Assistance (Utilities)	0	0
Medical Transportation	0	1





## Tuberculosis Activities

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
New Clients	11	10	36	100
Returning Clients	19	19	65	203
Total Encounters	30	29	101	303
Physician Contact	17	16	46	147
Medication (direct observation therapy visit)	129	84	436	693
Diagnostic Testing (x-rays, CT scans, etc.)	15	14	57	163
Screening – TB Skin Test, Quantiferon Test	41	22	86	301
Screening – Positive TB Skin Test/T-Spot	2	2	5	21
Total Active Cases in Winnebago County	12	4	37	45

## Women, Infants, and Children Program

## Caseload (goal is 90%)

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Caseload Goal	6760	6961	6760	6961
Current Caseload	5229	5544	5316	5463
Percent of Caseload Goal Achieved	77%	79%	79%	79%

## WIC Caseload Population

	% of WIC Population April 2025
American Indian or Alaskan Native	0.5%
Asian	4.0%
Black or African American	41%
Native Hawaii or Other Pacific Islander	0.3%
Hispanic or Latino	36.3%
Multi-Racial	10.7%
White	66%



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

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Percent of Infants Exclusively Breastfeeding	14.3%	11.0%	13.0%	11.5%
Percent of Infants Partially Breastfeeding	26.9%	27.0%	27.7%	27.0%
Percent of Total Infants Breastfeeding	41.2%	38.0%	40.6%	38.6%

## WIC Medicaid Enrollment Numbers

Medicaid Enrollment Numbers	April 2025
Number of WIC clients checked for Active Medicaid	551
Number of clients who needed to enroll/reactivate	2

## HRIF/APORS

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Caseload	94	100	91 avg	101
Referrals Received	84	73	212	553

## Better Birth Outcomes

	April 2024	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Caseload	45	50 avg	37 avg	49 avg
Percent of Caseload Goal Achieved (Caseload max 60)	75%	83% avg	62% avg	81% avg

## Healthworks

	April 2025	April Last Year (2024)	Calendar Year To Date 2025	Calendar Year 2024
Caseload in Winnebago County (under 6 years)	179	167	169 avg	169
Caseload in Winnebago County (6 - 21 years)	495	513	497 avg	489
Caseload in Border Counties (Under 6 years)	196	201	193 avg	199
New Cases to DCFS Custody (0-21 years)	35	36	141	379
Case Closure - Winnebago County (0-21 years)	13	15	68	335

**Lead Poisoning Prevention**

	<b>April 2025</b>	<b>April Last Year (2024)</b>	<b>Calendar Year To Date 2025</b>	<b>Calendar Year 2024</b>
<b>Total Caseload</b>	205	109	190 avg	136
<b>New Cases</b>	20	17	56	158
<b>Contact Made</b>	458	257	1329	3436
<b>Home Visits</b>	12	7	54	151

**Medication Takeback**

	<b>April 2025</b>	<b>April Last Year (2024)</b>	<b>Calendar Year To Date 2025</b>	<b>Calendar Year 2024</b>
<b>Envelopes Issued</b>	0	-	6	-

**8. Diverse & Skilled Workforce****WCHD Workforce**

	<b>Total Employees</b>	<b>Full-Time Employees</b>	<b>Part-Time Employees</b>	<b>Seasonal /Employees</b>	<b>Temporary</b>	<b>New Hires</b>	<b>Separated Employees</b>
<b>April 2025</b>	102	101	1	0	0	1*	0

\*Internal transfer of one employee from Part-Time to Full-Time.

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