
CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center
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Urbana, IL 61802

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Champaign County Board of Health

Tuesday, July 27, 2010

7:00 p.m.

Lyle Shields Meeting Room

Brookens Administrative Center, 1776 E. Washington

Urbana, Illinois

The Board of Health will convene the regular meeting directly following adjournment of the study session.

AGENDA

<u>ITEM</u>		<u>PAGE NO.</u>
A.	Call to Order	
B.	Roll Call	
C.	Approval of Agenda/Addenda	
D.	Approval of Minutes	
	1. June 29, 2010 – Regular Meeting	*1-9
	2. June 29, 2010 – Study Session	*10-14
E.	Public Participation on Agenda Items Only	
F.	Correspondence and Communications	
G.	Crisis Nursery Beyond Blue Program Fourth Quarter Report	*15-17
H.	Smile Healthy	
	1. Monthly Report – June 2010	*18-20
I.	CUPHD	
	1. Approval of CUPHD Invoice – June 2010	*21
	2. Administrator’s Report – July 2010	*22-29
	3. CUPHD Monthly Division Reports – June 2010	
	Reports Can Be Viewed At: http://www.c-uphd.org/monthly-reports.html	
	a. Administrative Training	

- b. Environmental Health
- c. Human Resources
- d. Infectious Disease
- e. Wellness & Health Promotion (Includes Dental Services)

4. Consideration & Approval of I-Plan Project

J. FY2011 Budget Preparation

K. Other Business

- 1. Approval of Resolution Recognizing the Exemplary Service of Champaign County Board of Health Member Julian Rappaport *30

L. Public Participation on Non-Agenda Items Only

M. Adjournment

1 **CHAMPAIGN COUNTY BOARD OF HEALTH**

2
3 **Monthly Meeting**
4 **Tuesday, June 29, 2010**

5
6 **Call to Order**

7
8 The Board of Health (BOH) held its monthly meeting on June 29, 2010 in the Lyle
9 Shields Meeting Room at the Brookens Administrative Center, 1776 East Washington, Urbana.
10 The meeting was called to order at 5:37 p.m. by Board Secretary Cherryl Ramirez, acting as
11 President in the absence of Bobbi Scholze.

12
13 **Roll Call**

14
15 Board members present at the time of roll call were Brenda Anderson, Stan James, John
16 Peterson, Cherryl Ramirez, and Betty Segal. Mark Huls arrived later in the meeting. The staff
17 member present was Kat Bork (Board of Health Administrative Assistant).

18
19 The absent Board members were Prashanth Gowda, Julian Rappaport, and Bobbi
20 Scholze.

21
22 Also present were Deb Busey (County Administrator), Lynn Canfield (Associate
23 Director of Developmental Disabilities), Carol Elliott (CUPHD Board Chair), Deb Fruitt
24 (CUPHD Wellness & Health Promotion Director), Nancy Greenwalt (Smile Healthy Executive
25 Director), Brent Maue (Village of Savoy Public Works Director), Jim Roberts (CUPHD
26 Environmental Health Director), and Andrea Wallace (CUPHD Finance Director).

27
28 **Approval of Agenda/Addendum**

29
30 **MOTION** by James to approve the agenda; seconded by Segal.

31
32 Ramirez asked to address the Culex WNV Program in Savoy item directly after
33 correspondence and communications. This request was met with no objection from the Board.

34
35 **Motion carried as amended with unanimous support.**

36
37 **Approval of Minutes**

38
39 **MOTION** by Peterson to approve the May 25, 2010 minutes; seconded by James.

40
41 Ramirez requested changes to the minutes on lines 88, 181, and 228.

42
43 **Motion carried as amended with unanimous support.**

47 **Public Participation on Agenda Items Only**

48
49 There was no public participation over the agenda items.

50
51 **Correspondence and Communications**

52
53 Ramirez listed the communications included in the agenda packet: Illinois Public Health
54 Emergency Preparedness Summit Local Leadership Award for Julie Pryde, NACCHO
55 Recognition for Promising Practice, and Certificate of Appreciation for Participation in the
56 H1N1 Sentinel Network.

57
58 **Smile Healthy**

59
60 Greenwalt brought an article depicting Smile Healthy's ongoing efforts to promote good
61 dental care for youth. They are making use of pop culture references, such as vampires, for
62 publicity.

63
64 **MOTION** by Segal to receive and place on file the Smile Healthy monthly report for
65 May 2010; seconded by Huls. **Motion carried with unanimous support.**

66
67 **CUPHD**

68 **Approval of CUPHD Invoice – May 2010**

69
70 **MOTION** by James to approve payment of the CUPHD May 2010 invoice; seconded by
71 Peterson. **Motion carried with unanimous support.**

72
73 **Administrator's Report**

74
75 Hard copies of the Administrator's report were distributed. The BOH members
76 confirmed they had received it via email.

77
78 **CUPHD Monthly Division Reports – May 2010**

79
80 The monthly division reports for Administrative Training, Environmental Health, Human
81 Resources, Infectious Disease, Maternal & Child Health, and Wellness & Health Promotion were
82 posted on CUPHD's website at <http://www.c-uphd.org/monthly-reports.html>.

83
84 In response to Ramirez's inquiry about the CATCH proposal, Fruitt explained there has
85 been no response, but they continue to be hopeful. Ramirez asked if CUPHD had received any
86 service requests from Vermilion County. Roberts said he had one request for well water testing,
87 but the person left after hearing the price. Wallace remarked CUPHD was asked by the State to
88 do the Health Works Program. Pryde was insisting on the State supplying upfront payment
89 before performing any services because CUPHD has not been paid by the State on their grants.
90 She noted the Infectious Diseases Division (STD and TB services) is seeing more clients coming
91 from Vermilion County.

92 **MOTION** by James to receive and place on file the Administrator's report and division
93 monthly reports; seconded by Segal. **Motion carried with unanimous support.**

94
95 Approval of Public Health Emergency Preparedness Grant Amendment

96
97 Roberts stated the BOH has received a Public Health Emergency Preparedness Grant in
98 the last few years. Wallace said it appears the State has renewed the contract so public health
99 departments could continue services, but the State has not set the grant's dollar amount yet. The
100 current grant ends July 31st and the new grant would begin August 1st. She thinks the State is
101 trying to continue services without an interruption. The current grant amount was \$76,278.
102 Roberts said the State was anticipating an increase in the local match amount of 10%. Peterson
103 asked if that amount was in the budget. Busey said they are primarily discussing the next budget
104 year. She did not think the BOH paid a match amount for the current grant. Wallace thought the
105 current grant required a 5% match, but she did not think it was included in the contract that was
106 submitted to the BOH. Busey asked if Julie Pryde had a plan for covering the match amount.
107 Wallace explained CUPHD has done an annual flu clinic in the fall and other exercises
108 throughout the year, such as a dispensing drill. The revenue generated from those exercises is
109 used as match dollars towards this grant. It has been sufficient to cover the 5% match. Wallace
110 did not consider the 10% match to be an issue. The issue she needs to work out is that the BOH
111 has not been paying for its costs of the flu clinics. She indicated Julie Pryde thought the
112 County's property tax revenue should be utilized to cover the match amount instead of funding
113 other programs. Roberts stated CUPHD would like to practice mass pill dispensing and flu
114 clinics at other sites. One site is in Tolono and the other is in Rantoul. CUPHD has never
115 conducted a flu clinic away from its main office and would like to try.

116
117 Peterson asked if Wallace was able to explain the budgetary impact of this grant
118 amendment on the BOH. Wallace suggested the 10% match be paid with County tax dollars.
119 Peterson said that would come out of the BOH's fund balance because it was not a budgeted
120 expense in this fiscal year and Wallace confirmed he was correct. Busey asked if the match
121 would require a budget amendment or if it could be accommodated through the CUPHD budget
122 already established for this fiscal year. Wallace noted Pryde had some ideas to avoid adjusting
123 the budget for the current fiscal year.

124
125 **MOTION** by James to approval the application for and, if awarded, acceptance of the
126 Public Health Emergency Preparedness Grant Amendment; seconded by Segal. **Motion carried**
127 **with unanimous support.**

128
129 Approval of Culex WNV Program in Savoy

130
131 Ramirez stated the request from CUPHD was for the BOH to endorse and support the
132 intergovernmental agreement for the Culex WNV Program in Savoy. Roberts explained that for
133 the past 18 years the Cities of Champaign & Urbana, the University of Illinois, Illinois Natural
134 History Survey, and later the Village of Savoy entered into an agreement to provide some
135 mosquito surveillance, research, and abatement. The university terminated the agreement in
136 March 2010. The Public Works Directors of Champaign, Urbana, and Savoy contacted CUPHD
137 about providing similar services. Brent Maue, Director of Public Works for the Village of

138 Savoy, was present. Roberts wanted the BOH's endorsement for the intergovernmental
139 agreement because Savoy is located in the County's jurisdiction. The BOH is not being asked to
140 approve the agreement. Maue confirmed the program has provided a great service to Savoy and
141 offered to answer any questions.
142

143 James asked if the program would be funded by grant money. Roberts explained
144 Champaign, Urbana, and Savoy contribute monies to the program. The BOH receives a West
145 Nile Virus Grant that includes surveillance and other activities. One of the surveillance sites will
146 be in Savoy and there will be three other sites in the county. James questioned whether the
147 County Board of Health should be a party to the agreement instead of just endorsing it because
148 the County's West Nile Virus Grant money is being used. The intergovernmental agreement
149 language did not reflect that the County's money is paying for the program. Roberts offered to
150 separate the grant money from the cities' and village's contributions. James wanted verbiage in
151 the documentation presented to the BOH that gave a breakdown about what the County's
152 expense could be. Roberts said the West Nile Virus Grant has about \$8,000 to serve the entire
153 county. James asked how much of that amount would be spent on helping Savoy with
154 surveillance. He did not want to see the full \$8,000 spent on Savoy in case it is needed
155 elsewhere in the county. Roberts said he has always spread out the grant money in different
156 jurisdictions without any comment regarding where the money goes. James wanted to be sure
157 the BOH would be able to help other communities in the county if the need arises. Roberts said
158 the surveillance contributions free up grant money for other things.
159

160 Huls entered the meeting at 5:46 p.m.
161

162 Busey thought the BOH's grant was separate from this program, which is paid for with
163 the \$57,000 generated by the intergovernmental agreement. She suggested the program might
164 enhance the West Nile Virus Grant since the Village of Savoy is paying for the extra service it
165 receives. Roberts said the grant does not provide for the abatement done through the program.
166

167 Segal asked if the testing of up to 5 birds meant 5 birds from the entire county. Roberts
168 said there was some overlap with the West Nile Virus Grant, because he pays for the bird testing
169 with West Nile Grant funds. Segal heard on the radio that robins can carry the West Nile Virus
170 without killing them. Roberts verified that robins were one of the species submitted to the lab.
171

172 **MOTION** by James to endorse and support the Culex WNV Program Intergovernmental
173 Agreement; seconded by Segal. **Motion carried with unanimous consent.**
174

175 I-Plan Budget Request
176

177 Wallace stated CUPHD is working on the I-Plan at this time and wanted to get a budget
178 amendment from the BOH in place before the full process commences in July. Public health
179 departments are required to complete an I-Plan every 5 years. CUPHD made a mistaken on the
180 plan's deadline and are requesting to include the expense in the current fiscal year's budget. The
181 I-Plan is due in December and CUPHD is supposed to proceed as though it will meet that
182 deadline. The first meeting with community partners will be in July and August. Surveys have
183 been distributed to Champaign County residents. Wallace provided a more detailed budget, the

184 majority of which is personnel related. This year, CUPHD is using interns to help. The majority
185 of the expenses are estimated to be incurred by November. She submitted the expense portion
186 attributable to FY2010. The total project cost is estimated at \$37,836. The BOH's portion was
187 calculated with the most recent EAV. This amounts to just over 42% and Wallace attributed
188 \$13,928 to the BOH in FY2010. She would rather bill the BOH as costs are incurred instead of
189 billing it evenly throughout the year because CUPHD does not know what the true costs will be.
190

191 James asked Wallace to explain EAV and Wallace answered it was the equalized
192 assessed value of property. James thought the population that CUPHD's serves would require
193 more legwork and study than the rural areas. Wallace said the answer was yes and no. CUPHD
194 has to obtain a representative sample of the entire county. The surveys were available on the
195 Internet and most respondents were upper middle class with high levels of education, but public
196 health also has poverty level clientele. CUPHD will go into the county with surveys to obtain a
197 representative sample. James understood Wallace's intent, but thought there was a fairer
198 formula in assigning the plan's costs. The BOH is being asked to pay almost half of the cost
199 when he does not believe the BOH's costs should be that high when the I-Plan will
200 representatively benefit more of the inner city folks. Segal recommended allocating the costs
201 according to population, not tax value. Much of the rural area's property value is in farmland,
202 not residential property. Wallace explained CUPHD originally wanted to split the I-Plan costs
203 50-50 because both public health departments must complete an I-Plan. CUPHD combined the
204 plans to gain some cost efficiencies. Busey described the reasoning that led to splitting the cost
205 according to EAV. The population is higher in Champaign-Urbana, but outreach requires more
206 travel in the county.
207

208 Peterson knew the I-Plan was a required activity, but he had yet to see any bang for the
209 buck from an I-Plan. He wanted the BOH's portion of the expense to be taken from the next
210 fiscal year because the plan is due on December 31st and the expenditure was not budgeted in
211 FY2010. The State of Illinois is \$13.4 billion in the red and should stop requiring such activities
212 from budget strapped public health departments, although it is the basis for obtaining the Local
213 Health Protection Grant. Peterson felt the I-Plan expenditure should be coming from the Local
214 Health Protection Grant money, not property tax revenue. Wallace said the Local Health
215 Protection Grant was not designed to support all the core services and the requirements. The
216 grant was set up to help cover the core services' costs. The underlying support is property taxes.
217 This issue for Peterson is the expenditure would require a budget amendment if included this
218 year and will spend the fund balance, which is being attacked every few months. Peterson
219 reiterated his desire to have the expenditure paid from the FY2011 budget. He did not think it
220 was unreasonable when boards of health over Central Illinois are cutting services due to deficits.
221 James expressed that Peterson's request mirrors the State's approach and asked what would
222 happen if the cost was deferred. Wallace stated CUPHD would subsidize the cost until the BOH
223 pays. James spoke about how most bills are submitted after the work is complete and entities
224 have 30-60 days to pay the bills. He was concerned with having short notice for expenses that
225 would require budget amendments. He understood the BOH should pay, but wanted it deferred
226 and worked into the next budget. Wallace said the CUPHD Board has a study session scheduled
227 for the next day and they could discuss negotiating the expense then. James said the BOH wants
228 to work with the CUPHD Board, but they want to be fair. Segal reiterated that population was a
229 fairer basis to divide the expense and wanted to know what the cost difference would be if it was

230 assessed by population. She wanted to defer any decision until the full BOH was present. Busey
231 suggested it might be more practical to defer the decision for a month because it could be some
232 time before every Board member is in attendance at a meeting.
233

234 Anderson asked for clarification about the \$13,928 figure being billed in installments of
235 42.23% as presented by Wallace. She wanted to understand what the BOH was being asked to
236 approve: either the \$13,928 or 42.23% of the total incurred costs. Wallace confirmed the request
237 is to approve the \$13,928 amount with the understanding that it is an estimated cost and CUPHD
238 would bill the BOH 42.23% of the actual costs each month. James asked if Wallace was saying
239 the costs could exceed \$13,928. Peterson confirmed that was what Wallace was saying. Wallace
240 said the I-Plan cost \$80,000 when it was done 5 years ago. No interns or volunteers were
241 utilized with the last I-Plan. She hopes the costs will not be as high through the use of volunteers
242 and interns. James asked if they got \$80,000 worth of information from the study. Huls
243 seconded James's question and inquired what the ramifications were of not completing an I-Plan.
244 Wallace said she did not know. Huls asked what was being done by the other counties who
245 cannot afford this expense. Wallace stated an I-Plan has to be submitted for a public health
246 department to be certified. Roberts added that being certified allows a department to apply for
247 grants through the State of Illinois. The State gives preference to certified health departments
248 versus those that are not certified when awarding grants. Huls asked if this was an exercise the
249 BOH had to endure even though the plan does not give them any useful information. Peterson
250 said the I-Plan is an expensive report that sits on the shelf, but it has to be done. Elliott
251 remarked that Julie Pryde feels differently than Peterson about the importance of the I-Plan.
252

253 Busey asked if the budgeted amount for personnel would be entirely used for interns
254 hired specifically for this project. Wallace said the personnel costs are for CUPHD staff such as
255 the Epidemiologist, the Administrator, and the IT personnel. None of the personnel costs pay for
256 interns. Busey asked for confirmation that CUPHD was not adding to its personnel costs and
257 Wallace confirmed she was correct. Busey then asked if the BOH would pay for fewer
258 personnel in other areas of the established FY2010 budget because personnel will be spending
259 time on the I-Plan instead of performing regular activities. The personnel are fully funded in the
260 FY2010 CUPHD contract budget, so a budget amendment might not be needed for the full
261 amount because CUPHD will not bill the BOH for personnel time in other areas. Wallace said
262 some staff would be pulled off of grants to work on the I-Plan. The I-Plan will take staff away
263 from the required services, so someone else will have to step up and do the required tasks. Staff
264 would have to work additional hours to complete the I-Plan. Busey thought the employees were
265 salaried and asked if they would be paid extra. Wallace said some of the staff were salaried and
266 others were not. Busey asked if some of the personnel expense was in overtime costs. Wallace
267 stated some staff will spend more time in the county because of the I-Plan whereas CUPHD is
268 currently covering the cost of their time. Busey thought the same thing would be true for the
269 staff time dedicated to CUPHD. Staff will also be spending a lot of time within Champaign-
270 Urbana on I-Plan related tasks. The personnel costs are already paid; staff is being asked to do a
271 different task and maybe work a little harder to get the I-Plan done. Busey questioned if that
272 really equated to new personnel costs of \$30,836. Wallace said she understood Busey's question
273 and explained a lot of expense will shift to the BOH because staff being paid for by a grant will
274 be shifted to working on the I-Plan. Busey asked if CUPHD was intending not fully utilize

275 grants the BOH currently receives in order to complete the I-Plan. Wallace said they might, it
276 will depend on the time that is required to get the I-Plan done.

277
278 Segal asked about getting a deadline extension for the I-Plan, since CUPHD received an
279 extension last time. Elliott thought the extension request was rejected. Wallace said the
280 directive was to proceed forward with the deadline unless something unforeseen comes at the
281 final hour that prevents completion.

282
283 **MOTION** by Segal to defer a decision on the I-Plan funding to the July meeting;
284 seconded by James. **Motion carried with unanimous support.**

285
286 Elliott stated the CUPHD Board was holding a study session at 9:30 a.m. tomorrow.
287 Anyone who was free could attend and she would raise the BOH's issues. James did not want
288 the CUPHD Board to think the BOH was trying to twist their arm because of State mandates. He
289 wanted to negotiate more about the I-Plan because there is always room to discuss matters.

290
291 Anderson asked why the current CUPHD Board minutes were not available online.
292 Wallace thought the minutes through March 2010 were posted on the website.

293
294 **FY2011 Budget Preparation**
295 **Budget Presentation at County Board Legislative Budget Hearings**

296
297 It was announced the BOH's budget presentation to the County Board at the annual
298 Legislative Budget Hearings on September 14, 2010 at 5:30 p.m.

299
300 **CUPHD Funding Request**

301
302 No funding request was provided from CUPHD. Busey indicated the BOH should talk
303 about how to proceed with receiving and evaluating FY2011 budget requests. She inquired if the
304 BOH wanted to have all the budget request information available for preliminary consideration
305 at the July meeting. An extra meeting may be needed in August before final approval is given at
306 the regular August meeting. There was also some discussion about holding a joint study session
307 with the CUPHD Board to discuss dental services offered throughout Champaign County.
308 Dental services are offered by different providers throughout the county. Wallace said the
309 CUPHD Board could discuss a joint study session on dental services at its meeting tomorrow.
310 Ramirez noted the BOH decided to address the budget as a whole Board, not as a subcommittee,
311 at its last meeting.

312
313 James supported having an extra meeting on the budget. The BOH will need to have
314 information from CUPHD about the costs of the I-Plan, a higher local match amount on grants,
315 and all the CUPHD contract costs for FY2011. The BOH will have to review the CUPHD
316 budget request and then determine what is left over for other programs. It is important to have
317 everyone on the same page.

318

319 Ramirez shared that she and Scholze met with Pryde and Busey to review the draft
320 agenda last week. Both Scholze and Pryde were interested in specifically discussing dental
321 programs because it is a complex issue. They wanted to have all the dental programs providing
322 services in Champaign County come in and make presentations to both boards. Busey thought
323 that was a topic for a study session on county-wide dental services. Someone will have to
324 coordinate with the dental service providers to arrange for them to make presentations and be
325 available on a particular date where both boards can attend. A study session on county-wide
326 dental services could occur before the regular July BOH meeting. Then the BOH could consider
327 FY2011 budget materials at the July meeting. The BOH would also have to determine if an extra
328 meeting is needed to evaluate the budget.

329
330 James envisioned the BOH's budget process like the United Way with agencies
331 submitting proposals. Submission of a proposal does not guarantee funding because the BOH
332 has limited funds. This would enable the BOH to consider all proposals during the budget
333 process at once. He asked if the county-wide dental program would be provided through
334 CUPHD. Busey explained there are 3 providers of dental services: Smile Healthy, CUPHD, and
335 Frances Nelson. James said those 3 agencies should coordinate to get the best bang for their
336 buck and then come to the BOH with a request. He wanted to have the final figures presented at
337 one meeting. Another meeting could be scheduled in August if one is needed after the final
338 figures are presented.

339
340 Ramirez thought the idea was to discuss coordination of dental programs throughout the
341 whole county, not to have the BOH fund an extra program and Busey concurred based on the
342 conversation at the agenda preparation meeting. The available dates for a study session would be
343 worked out via email.

344
345 The BOH agreed to start the budget at the July meeting and move on from there.

346
347 Ramirez referenced the Mental Health Board's letter about the Beyond Blue Program.
348 The Mental Health Board's fiscal year begins on July 1st but the BOH is unable to make funding
349 decisions this early in the process. The letter assumes the program's continuation and counts on
350 the BOH funding the same share it has in past years. Ramirez questioned how the Mental Health
351 Board could continue the Beyond Blue Program when the BOH has not given any indication of
352 its intentions regarding funding. She did not want to leave the Mental Health Board or the Crisis
353 Nursery hanging without some indication. Segal thought the BOH intended to fund the program
354 for 2 years, which has occurred. She did not think the funds are available to continue the Beyond
355 Blue funding from the BOH. James insisted that any budget proposal will have to be geared for
356 the BOH's fiscal year, not someone else's fiscal year. Peterson and James concurred the BOH
357 was not able to commit to funding the Beyond Blue Program and asked Canfield to relay this
358 information to the Mental Health Board. Canfield said she would inform Mark Driscoll.

359
360 Smile Healthy Funding Request

361
362 The Smile Healthy FY2011 funding request was included in the agenda packet.

363
364

365 Mental Health Board Funding Request for Crisis Nursery's Beyond Blue Program

366
367 The Mental Health Board FY2011 funding request for the Crisis Nursery's Beyond Blue
368 Program was included in the agenda packet.

369
370 **Other Business**

371
372 Ramirez recommended the BOH prepare a resolution in appreciation of Julian
373 Rappaport's service as a Board member. Bork will prepare a resolution that will be presented at
374 the next meeting. Someone will be needed to fill Rappaport's place on the BOH and Ramirez
375 encouraged members reach out to potential applicants with public health backgrounds.

376
377 **Public Participation on Non-Agenda Items Only**

378
379 There was no public participation on non-agenda items.

380
381 **Adjournment**

382
383 The meeting was adjourned at 6:47 p.m.

384
385 Respectfully submitted,

386
387 Kat Bork
388 Board of Health Administrative Assistant

389
390 *Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.*

1 **CHAMPAIGN COUNTY BOARD OF HEALTH**

2
3 **Study Session**
4 **Tuesday, June 29, 2010**

5
6 **Call to Order**

7
8 The Board of Health (BOH) held a study session on June 29, 2010 in the Lyle Shields
9 Meeting Room at the Brookens Administrative Center, 1776 East Washington, Urbana. The
10 study session was called to order at 6:53 p.m. by Board Secretary Cherryl Ramirez, acting as
11 President in the absence of President Bobbi Scholze.

12
13 **Roll Call**

14
15 Board members present at the time of roll call were Brenda Anderson, Mark Huls, Stan
16 James, John Peterson, Cherryl Ramirez, and Betty Segal. The staff member present was Kat
17 Bork (Board of Health Administrative Assistant).

18
19 The absent Board members were Prashanth Gowda, Julian Rappaport, and Bobbi
20 Scholze.

21
22 Also present were Deb Busey (County Administrator), Lynn Canfield (Associate
23 Director of Developmental Disabilities), Carol Elliott (CUPHD Board Chair), Deb Fruitt
24 (CUPHD Wellness & Health Promotion Director), Jim Roberts (CUPHD Environmental Health
25 Director), and Andrea Wallace (CUPHD Finance Director).

26
27 **Approval of Agenda/Addendum**

28
29 **MOTION** by Peterson to approve the agenda; seconded by Anderson. **Motion carried**
30 **with unanimous support.**

31
32 **Discussion of Reformation for the Future: Champaign County Board of Health Consulting**
33 **Report**

34
35 Ramirez stated the intent of the study session was to review Bob Keller's
36 recommendations one by one, weighing the pros and cons of each to enable fuller discussion.

37
38 James inquired if the BOH ever received clarification on whether the report was just from
39 Keller or in association with the Illinois Public Health Association (IPHA). Ramirez believed it
40 was resolved that this is Keller's report as an independent consultant. The IPHA logo was
41 removed from the final report. The agreement with Keller was made through IPHA. The
42 association invoiced the BOH and Keller is paid by IPHA. James originally thought the report
43 would be though IPHA and Keller was preparing the report based on information and studies
44 through IPHA. He did not think the Board did due justice with the money spent on the report
45 because no RFP was issued. He felt the rules were circumvented to get what the BOH wanted
46 instead of doing it the way it should have been done. Elliott thought IPHA was going to refund

47 any money to the BOH that had been paid and not charge them for the report based on the fact
48 that IPHA did not review it. Ramirez stated IPHA did not refund the BOH's money. She noted
49 Keller is well credentialed to prepare such a report and was a former President of IPHA and a
50 member of the IPHA Executive Council. Keller is a contractor who works though IPHA and
51 was the individual conducting the interviews and putting together the report. Busey thought it
52 was made fairly clear to the BOH that Bob Keller was being hired as a consultant with
53 arrangements being made through IPHA. There is no legal or other requirement that consulting
54 services like this be bid. A board is allowed to hire a consultant. Even if there was a
55 requirement, the amount of the contract falls well below the required level that would ever
56 trigger the need to issue RFPs. For example, the requirement for issuing RFPs or bids is \$30,000
57 and this contract amounted to \$7,500. James understood Busey's statements, but regardless he
58 questioned the way this contract could be viewed by an outsider. He thought the BOH had not
59 entering into a contract with a specific person and the issue was misrepresented. He wanted to
60 say on the record that he in no way condoned the way it was done because he was under a
61 different impression when he voted to approve the contract.
62

63 Ramirez led the BOH through the report's recommendations and encouraged the Board
64 members to voice their opinions on each.
65

66 **Short-Term Recommendation #1 – Revise the current restructure of the Board of Health**
67 **agenda**
68

69 James believed items needed to be listed on the agenda with wording such as “review,
70 discussion, or approval.” The BOH discussed the recommendation about having a consent
71 agenda and the fact the BOH's business is dealt with in a structure that has no use for a consent
72 agenda. Busey supported continuing to list items on the agenda by presenter. This structure
73 results in all CUPHD or Smile Healthy items being grouped together so each organization can
74 efficiently address its items. BOH discussed the agenda format and not changing it except for
75 adding words like “discussion” or “approval” to identify action items and clarify what action is
76 being requested of the Board.
77

78 **Short-Term Recommendation #2 – Adopt formal quarterly program and fiscal reports**
79

80 Peterson liked the idea of more structured, regular reporting. Ramirez saw the
81 recommendation as a way to be more steam-lined and consistent.
82

83 **Short-Term Recommendation #3 – A formal performance evaluation process should to be**
84 **established whereby the Champaign County Board of Health as a collective body evaluates**
85 **the administrator.**
86

87 James believed if you have a good staff then you do not need to breathe down their necks.
88 He liked the way BOH members gave comments to the CUPHD Board about the Administrator
89 with the most recent evaluation. He spoke about the County Board's evaluation process for
90 appointed officials and the Administrator's responsibilities. Peterson felt tension results from the
91 mixed model wherein the BOH is contracting with CUPHD for services and picking an
92 Administrator. As standalone board, the members would have much more input into the

93 evaluation of the Administrator because of the position's critical nature. He did not have a
94 strong sense that the BOH could do much under the current contract. James suggested
95 negotiating into the next contract that a BOH member will be part of the Administrator
96 evaluation committee to give the BOH more input into the process. Ramirez was not
97 comfortable with process as it stands and thought the BOH should work together with the
98 CUPHD Board on evaluating the Administrator.
99

100 **Short-Term Recommendation #4 – Explore the feasibility of establishing semi-annual joint**
101 **study session meetings between the Champaign County Board of Health and the**
102 **Champaign Urbana Public Health District Board of Health to discuss countywide public**
103 **health priorities and issues and how the two organizations can better work in concert with**
104 **one another.**
105

106 Ramirez thought holding joint study sessions would be a great step and the boards could
107 start with a study session about dental services. James agreed wholeheartedly it would be helpful
108 to have the boards meet together so the CUPHD Board could address issues occurring out in the
109 county.
110

111 **Mid-Term Recommendation #1 – Begin the negotiation process for the next contract period**
112 **- beginning December 1, 2013 - no later than July 1, 2012 or 18 months before the contract**
113 **expiration.**
114

115 James thought the negotiations would be a part of the joint study sessions. He felt the
116 contract negotiations should happen with the full BOH present and not at a subcommittee level.
117 Ramirez agreed that commencing negotiations earlier would better establish a consensus on
118 priorities.
119

120 **Mid-Term Recommendation #2 – Establish an *ad hoc* executive advisory body comprised of**
121 **representatives of both boards.**
122

123 James did not favor this recommendation because it would in effect create another
124 subcommittee. The BOH and CUPHD Board are relatively small and he would rather have all
125 members meet together. The BOH members can individually visit the CUPHD facility to learn
126 about its operation.
127

128 **Mid-Term Recommendation #3 – Begin exploring one of the alternative options for service**
129 **delivery. It is the consultant's view that both a countywide local health department and**
130 **multiple county health departments are potential long-term options.**
131

132 James said he was dead set against pursuing a standalone county health department
133 separate from CUPHD unless someone can demonstrate that rural residents will approve a tax
134 increase to adequately fund the operation. He felt starting up another agency with all the
135 inherent problems involved is a waste. Ramirez added that this was her least favorite of the
136 recommendations and she did not support it.
137

138 **Long-Term Recommendation #1 – It is recommended that the Champaign County**
139 **community pursue study of establishing a countywide local health department.**
140

141 Peterson remarked the idea of a countywide health department has been raised in the past
142 as desirable, but viewed its establishment as being fraught with difficulty. He felt the BOH
143 should take a strong look at this option at some point with the understanding that it would likely
144 be difficult to achieve with the differing tax rates between the county and city residents. He
145 suggested looking into this recommendation within a year or so to answer some of the legal
146 questions. It might be politically possible to approve a countywide health department because
147 city residents outnumber the rural residents. James envisioned sitting down and selling a plan to
148 have a building in a rural area where people could get help without traveling to the cities. He felt
149 the big fear of mayors was that the money paid by rural residents would stay within Champaign-
150 Urbana because a bigger population resides in the urban area. He could see people supporting a
151 countywide health department within 10 years, but a plan must be developed first and brought to
152 people. He felt joining the two boards together and dividing resources based on population
153 would be a better run because the BOH is currently only approving things already done by
154 CUPHD.
155

156 Busey stated there are examples of city-county mergers and a lot of the logistics are
157 worked out between the two impacted governing bodies. Having two different property tax rates
158 would mean a different level of service depending on residency. She confirmed it is a decade in
159 the making to enact this kind of change. Having a joint meeting of both boards is the right way
160 to move forward. It is worth keeping this on the table and talking with the CUPHD Board if it
161 would produce a better overall countywide solution.
162

163 James said a wildcard Democrat in Champaign-Urbana could raise the idea and move it
164 along until the city residents approve it with the county residents having little say in the matter.
165 He wanted to include local officials in the affected communities at the table.
166

167 Segal said many of the BOH's problems and its relationships with CUPHD personnel
168 have been a matter of money. The BOH really needs more money to get more things done.
169

170 Ramirez was in favor of this long-term recommendation to reduce two redundant
171 government bodies. The BOH is not able to serve a policy function according to the statute for a
172 county board of health in the current contractual arrangement. It would take the two boards
173 working together and political will from the voters.
174

175 **Public Participation**
176

177 Elliott stated the report from Bob Keller did not include any input from CUPHD staff, the
178 CUPHD Board, or Julie Pryde. Pryde provided some direction to where reports could be found
179 to Keller, but Elliott did not believe any CUPHD Board members or staff spoke to Keller. Pryde
180 has written a response to some of the report's recommendations and Elliott wanted to let her
181 respond to each one at a time. She stated CUPHD is the health district of two townships, not the
182 cities. CUPHD's attorney advised Elliott that one of the public health districts would have to be
183 dissolved, not merged, because CUPHD was created under the statutes for special districts.

184 Peterson asked if Elliott would be willing to sit down and hash out these issues within a
185 year and Elliott answered she definitively would be willing to discuss issues. James asked to
186 receive the CUPHD legal opinion Elliott described in writing.

187

188 **Adjournment**

189

190 The study session was adjourned at 7:36 p.m.

191

192 Respectfully submitted,

193

194 Kat Bork

195 Board of Health Administrative Assistant

196

197 *Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.*

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Grant Funded Program - Quarterly Program Activity/Consumer Service Report: **Fourth Quarter**

Agency: Crisis Nursery

Program: Beyond Blue - Rural

Report Period: April 1 – June 30
DUE July 15

Service Categories	Community Service Events (CSE)	Service/Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)		Treatment Plan Clients (TPC)		Other	
			Continuing	New	Continuing	New	Continuing	New
Annual Target	104	644 includes screening, home visits, telephone contacts, & referral contacts	74 includes babies, other family members, and mothers screened but not in program.		23 mothers assessed as eligible		2655 hours of Crisis Care & Respite Care provided by CN	
Quarterly Data	47	156	2	0	1	1		638

Comments: The new treatment plan client is pregnant this explains why there are no new non-treatment plan clients.

Challenges:

- Getting new clients was more challenging this quarter. We received many referrals from Public Health however getting these clients on board with the program has been tough. Many new mothers often feel shame and embarrassment when motherhood is not exactly the idyllic picture that they have in their minds and so they appear reluctant sometimes to get involved with the Crisis Nursery Beyond Blue program because that might reinforce that they are not living up to “societal expectations of the joys of motherhood”.
- Staying in contact with clients is often challenging as many of these families are below the poverty level and frequently lose phone service and often are very transient.
- Transportation to groups continues to be difficult especially in the Rantoul area.

Successes:

- 3 Mothers successfully transitioned out of Beyond Blue this quarter as their babies turned one. It was bittersweet because these mom’s are attached to support group and the feedback they receive from other mother’s in the group.
- There was a period of transition where Tolono playgroup ended and we started another outreach playgroup at Developmental Services Center. Through the Tolono outreach group, 5 rural Beyond Blue mothers were identified. Many other Beyond Blue families attended that group as well and developed supportive relationships with other mom’s in southern rural Champaign County. The playgroup at DSC will run through the summer.
- Home visiting is still very strong once the family specialist builds a relationship and gains the trust of the families. Families really enjoy and appreciate having a family specialist come to them to provide support in their homes.

Testimony:

This testimony is about a Beyond Blue mother that Crisis Nursery began working with last fall who was identified through the Tolono outreach group. This is a mom of two small children who were 6 months and 20 months when they entered the program. The 20 month old was diagnosed with sensory processing disorder, which has been challenging for the family. Through continued outreach during playgroup, the family was provided with: referrals, education on the child's sensory issues, support and validation to the mom while dealing with her depression and anxiety, and a fun weekly free event where they were able to socialize with other families in their community. Finally enough trust was gained with the mother to set up a weekly respite at the Nursery for the children one morning a week. Mom recently reported that she lets out a huge breath of relief every time she drops the kids off for the 3 hour respite. When dealing with two small children 24/7, especially one that has sensory processing issues, the stress is enormous. To be able to get the weekly grocery shopping done makes a huge difference. This family lives in a rural area and is pretty isolated. Mom does not work, is home all the time and is in an "expected role of stay at home mother." The father farms and is working the majority of the day and has very little interaction with the children. Recently, this mom confided that she is concerned that she is in a controlling relationship and asked for help. Crisis Nursery provided her some referrals for individual therapy as well as number for domestic violence help and support. As the family specialist, I am thankful that Crisis Nursery was able to reach out to this mother and that the Nursery will continue to support this family.

~ J. Sampson, family specialist

Service Category Definitions For Quarterly Reports

Note that the First Quarter Report is different from the subsequent 3 quarters. The first quarter report allows the funded program to report Continuing TPC and NTPC open at the beginning of the contract year i.e. July 1.

Annual Target – Number of CSE, SC TPC or NTPC projected in Utilization Section II of Program Plan.

Community Service Events--Number of contacts (meetings) to promote the program including public presentations (including mass media shows and articles), consultations with community groups and/or caregivers, school class presentations, and small group workshops. The focus of a CSE is on activities to promote the program or educate a targeted audience about the program. Units of measurement are the following: Public presentations; school class presentations; small group workshop sessions to promote healthy life styles; meetings between agencies to plan community service events; interviews with reporters or the articles, programs or shows that result (do not count number of people, stations, or newspapers to which items are distributed); distribution of public service announcements, newsletters, and pamphlets. Note that attending or participating in a regularly scheduled meeting where you do not give a presentation on your program or is not related to planning an event related to the program is not a CSE.

Service Contacts/Screening Contacts--Number of phone and face-to-face contacts with consumers who may or may not have open cases in this program - includes information and referral contacts, or initial screenings/assessments or crisis services. This may also include contacts for non-case specific consultations. To be counted, the contact requires engagement; it is not an unanswered telephone call/correspondence. Screening contacts wherein an initial assessment is done is the preferred usage of this category.

Treatment Plan Clients--Service recipients with case records and treatment (or service) plans. Each client should be counted only once each year - either as a continuing client or as a new case. Continuing Treatment Plan clients are those whose case was opened in the previous agency operating year who continue to receive services during the first quarter of the current year. New Treatment Plan clients are those whose cases were opened during the quarter being reported.

Non-Treatment Plan Clients--Service recipients with case records but no treatment (or service) plans, to which substantial services are provided. Operational definitions are negotiated with each program, based on the nature of its services. Examples may include: recipients of material assistance, cases in which considerable outreach is done but where the client never commits to treatment/service, cases closed before a treatment/service plan was written because the client did not want further service and cases in which a client is seen as a service to another agency, but does not receive program services beyond assessment, (e.g. a court-requested evaluation). Continuing and New NTPC clients are reported using the same formula as in TPC above without consideration of an existing treatment/ service plan.

Other - Applicants may use one indicator of their own invention such as contact hours, discharges, intakes etc. Contact Board staff for further information. "Other" will have been explained with a footnote at the bottom of the relevant Part II Program Plan form.



Champaign County Board of Health Monthly Report for June 2010, FY10

Total Number of Patients Seen From All Programs this month: **163**

Total Number of Unique Patients In BOH Fiscal Year 2010: **1385**

Total Number of Participating Providers this month: **10**

Breakdown of current month patients for all programs by town.

- o Champaign: **30**
- o Fisher: **4**
- o Gifford: **2**
- o Homer: **1**
- o Mahomet: **12**
- o Rantoul: **56**
- o Savoy: **6**
- o Sidney: **3**
- o St. Joe: **4**
- o Thomasboro: **2**
- o Tolono: **5**
- o Urbana: **15**
- o Other: **23**

Mobile Clinic Events

June 7, 2010-Monday – Lincoln’s Challenge Academy, Champaign

June 10-13, 2010-Thursday-Sunday – Mission of Mercy in Bloomington, IL

June 17, 2010-Thursday – Christian Health Center, Champaign

June 17, 2010-Thursday – Historic First Street Farmers Market, Champaign

June 18, 2010-Friday – Frances Nelson Health Center

June 28, 2010-Monday – Savoy Head Start

Education and Outreach

6/08/10 Crisis Nursery, Champaign - A staff hygienist provided educational program, materials and dental supplies to **8 children and 10 adults.**

6/10/10 Champaign Park District - A staff hygienist together with a U of I pre-dental students provided educational program, materials and dental supplies to **90 children 8 adults**

6/14/10 6/10/10 Champaign Park District - A staff hygienist provided educational program, materials and dental supplies to **110 children and 8 adults**

SmileHealthy – formerly Central Illinois Dental Education and Services (CIDES)
Head Start Dental Clinic . Mobile Dental Clinics . Child Dental Access Program . Dental Health Education
PO Box 154, Champaign, IL 61824-0154 – phone 217.359.7404 – fax: 217.352-9745
www.smilehealthy.org

6/16/10 Legacy Circle Foundation Presentation, Champaign Country Club, Champaign – Director made a presentation on providing dental care to adults through mobile clinics at Frances Nelson Health Center to **70 adults**.

6/17/10 Farmers Market, Urbana - A staff hygienist together with a U of I Extension member and pre-dental students provided educational materials to **20 adults**

6/23/10 Salt and Light, Champaign - A staff hygienist together with a U of I Extension member provided educational material and dental supplies to **20 children and 200 adults**

6/24/10 Farmers Market, Urbana - A staff hygienist provided educational materials and dental supplies to **30 adults**

SmileHealthy
Champaign County Board of Health
Fiscal Year 2010 Report

	Dec 09	Jan 10	Feb 10*	March 10	April 10	May 10	June 10	July 10	Aug 10	Sep 10	Oct 10	Nov 10	Total
Bondville													0
Broadlands			1										1
Champaign	38	48	125	48	79	82	30						450
Fisher	4			1	3	1	4						13
Foosland	1												1
Gifford	2	1				1	2						6
Homer	1	1	14	2	3	2	1						24
Ivesdale		1											1
Ludlow	1				1	2							4
Mahomet	1	12	2	5	18	17	12						67
Ogden	2	1				2							5
Penfield			2										2
Pesotum	2	2				1							5
Philo	3												3
Rantoul	53	18	57	37	75	73	56						369
Royal	1												1
Sadorus	2			1	1	4							8
Savoy	3	3	10	5	7	6	6						40
Seymour	1	1	1	2		3							8
Sidney	3	1	2	2	3	6	3						20
St. Joseph	3		7		2	54	4						70
Thomasboro	42				1	1	2						46
Tolono	5	4	12	10	11	5	5						52
Urbana	18	18	29	19	16	48	15						163
Other	1		38	102	83		23						247
Total	187	111	300	234	303	308	163	0	0	0	0	0	

Total Unique Patients in FY 187 277 557 760 1015 1264 1385

Education Contacts 6 249 1051 876 989 579 574 4324

Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

*Feb will include patients from Give Kids A Smile with C-UPHD IDDS.

Invoice Number:	1007
Date of Invoice:	July 22, 2010
Billing Period:	June-10

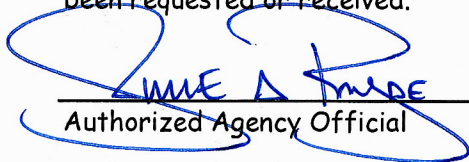
To:
 Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

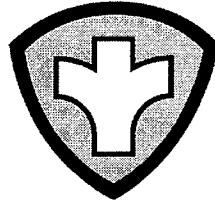
533.07 Professional Services - Infectious Disease Prevention & Mgmt	\$	9,471.25
533.07 Professional Services - Vital Statistics	\$	235.58
533.07 Professional Services - Environmental Health	\$	25,821.83
533.07 Professional Services - Administration	\$	12,318.59
533.07 Professional Services - PHEP Grant	\$	11,082.47
533.07 Professional Services - TFC Grant	\$	1,989.80
533.07 Professional Services - West Nile Virus Grant	\$	5,581.79
533.07 Professional Services - Non-Community Water - CU Surveys	\$	175.00
533.07 Professional Services - PHER Phase 1 & 2 Grant	\$	1,986.20
533.07 Professional Services - PHER Phase 3 Grant	\$	184.61
533.07 Professional Services - County Well Water Testing	\$	153.68
Total Amount Due to CUPHD per Contract	\$	<u>69,000.80</u>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official



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**Public Health Administrator's Report
to the
Champaign County Board of Health
July 2010**

Monthly Division Reports for *Infectious Disease, Environmental Health, Wellness and Health Promotion, and Maternal and Child Health* are available on our website at: <http://www.c-uphd.org/division-reports.html>

H1N1 UPDATE:

CUPHD continues to provide H1N1 vaccinations. No report, of H1N1 illness in our County. Activity remains low across the US. Numerous cases and deaths reported in India.

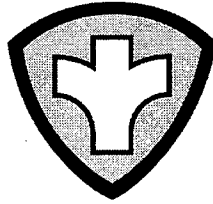
IPLAN MEETING #1: July 28, 2010. 8:30-3:30. Champaign Public Library.

Emergency Preparedness:

There will be a two-part web-based and tabletop exercise scheduled in Champaign-Urbana in August, 2010. This exercise is being sponsored by the Centers for Disease Control and Prevention (CDC) Division of Healthcare Quality Promotion (DHQP) and facilitated by the Oak Ridge Institute for Science and Education (ORISE).

The Web-based exercise will use Microsoft SharePoint as an interactive tool. It will cover approximately a two-week period in which agencies will read an initial scenario and subsequent situation reports and respond to online injects presented to a sector. Injects will be submitted to a sector every other day during this two-week period. The purpose of this first part is to evaluate the model of care that was developed by Champaign-Urbana sectors in a 2008 CDC-DHQP-sponsored workshop in Indianapolis. This part of the exercise will be web-based so that agencies can participate from their desk at work.

The second part of the exercise will be an all-day, in-person tabletop exercise. It will take place at the Hawthorne Suites in Champaign, Illinois on August 25, 2010. This facilitated exercise will evaluate the implementation of a sector's essential healthcare services priorities as defined in the Champaign-Urbana Public Health District COOP Plan, Pandemic Influenza Essential Services Planning Guide.



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Rantoul Migrant Population:

CUPHD participated in an event for persons who moved here to work in the fields. CUPHD provided H1N1 vaccinations, prevention education on food borne illness, referrals, infectious disease prevention education, HIV counseling and testing. CUPHD received \$5,000 from the Office of Minority Health at IDPH to assist with this population. We will also be providing on-site immunizations and additional educational service in August.

West Nile Virus:

Modeling has shown that we are in for the worst WNV season since 2005, the worst on record. See the attached for charts. <http://maximus.cvm.uiuc.edu/mirmodel>
CUPHD is responding with the Mosquito Biker program in Champaign, Urbana, & Savoy. See attached recent article in the *Daily Illini*.
<http://www.dailyillini.com/news/champaign-urbana/2010/07/19/student-bikers-protect-c-u-from-west-nile>

Grants & Contracts:

CUPHD & IDPH	Summer Food Program Sites-Inspections	\$900.	Environmental Health
CUPHD & IDPH	Amendment #1: Increasing the Ryan White Title II Grant amount by \$106,339.	\$935,268	Infectious Disease
CUPHD and IL Action for Children	SPROUT Model 1 grant	Services (not funding)	Maternal and Child Health

Educational Websites:

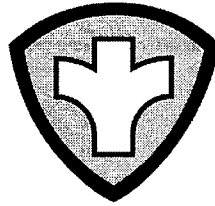
CUPHD: www.c-uphd.org

Vital Stats: <http://www.idph.state.il.us/health/statshome.htm>

IL Public Health Association: <http://www.ipha.com/>

Natl. Assoc. of Boards of Health: <http://www.nalboh.org/>

Illinois Public Health Laws:
<http://www.idph.state.il.us/rulesregs/rulesindexhome.htm>



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Legislative Action: <http://capwiz.com/naccho>

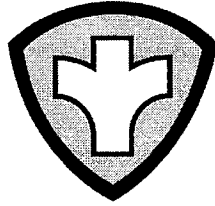
Social Marketing: Become a fan of “Champaign County Prepares” “C-U Fit Families”, and “Les Wheezin” on *Facebook*.

Contact Information:

Julie A. Pryde, MSW, LSW, CPHA * Public Health Administrator

Champaign-Urbana Public Health District, 201 W. Kenyon Rd, Champaign, IL 61821

Office: 531-5369 Cell & Text: 202-0657 Secure fax: 531-5381 jpryde@c-uphd.org



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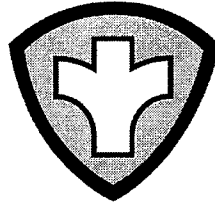
WNV - What do we expect this year?

West Nile Virus (WNV) was first observed in the Chicago, Illinois, region in 2001, and there has been evidence of mosquito infection in each of the following years. Here we ask the question:

What is our best estimate of mosquito infection for this week and the next two weeks?

The current week (29) is from 17 July 2010 to 23 July 2010. Weather data is updated through 16 July 2010. Last update is: 7/19/2010

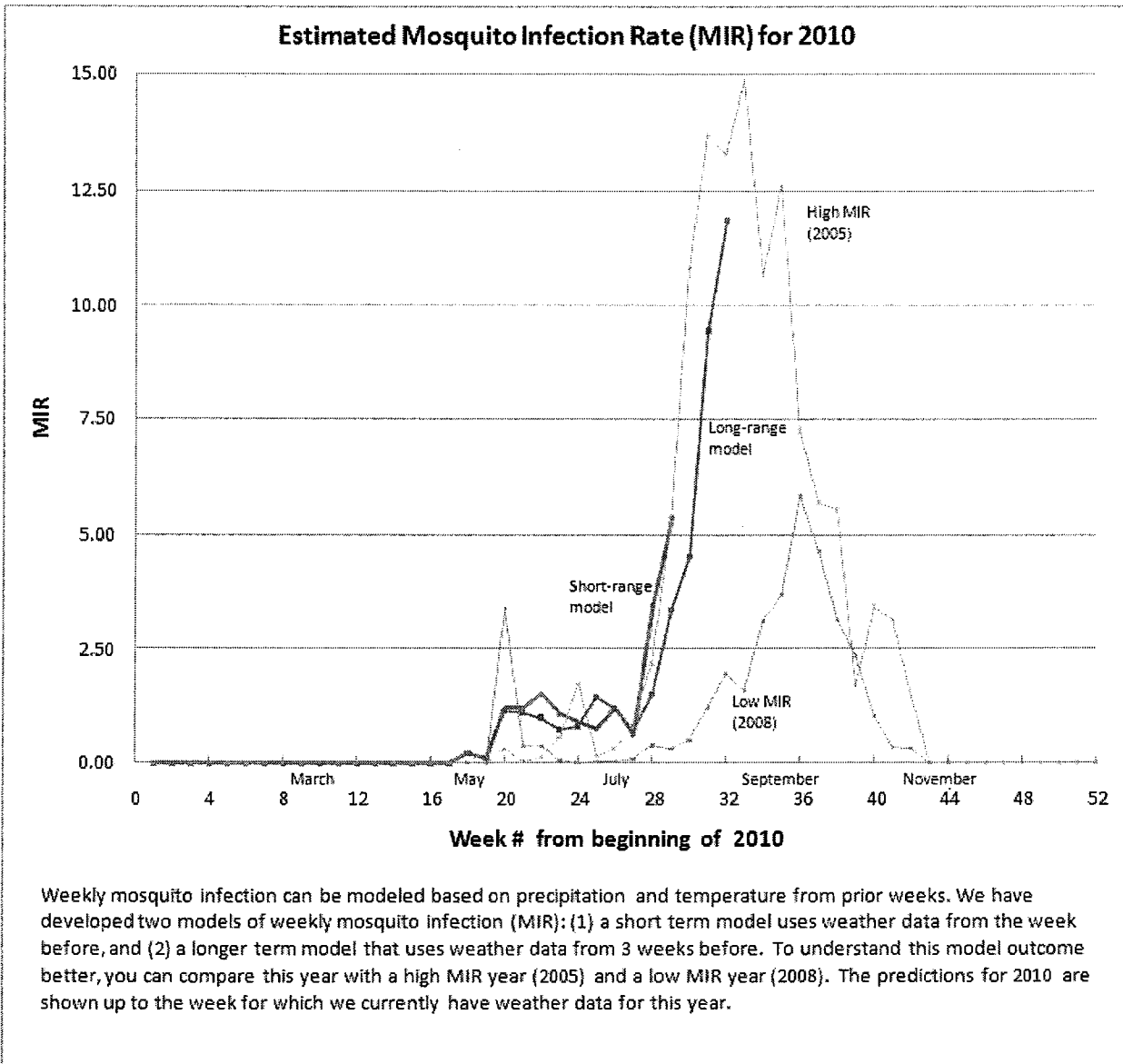
We estimate mosquito infection with statistical models that use rainfall and temperature in northeastern Illinois. Based on our work, we have considered why some years have higher infection rates than others. Also, we can estimate future infection rates based on weather data from past weeks. Click on the graphs to learn more.

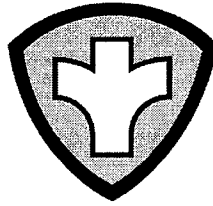


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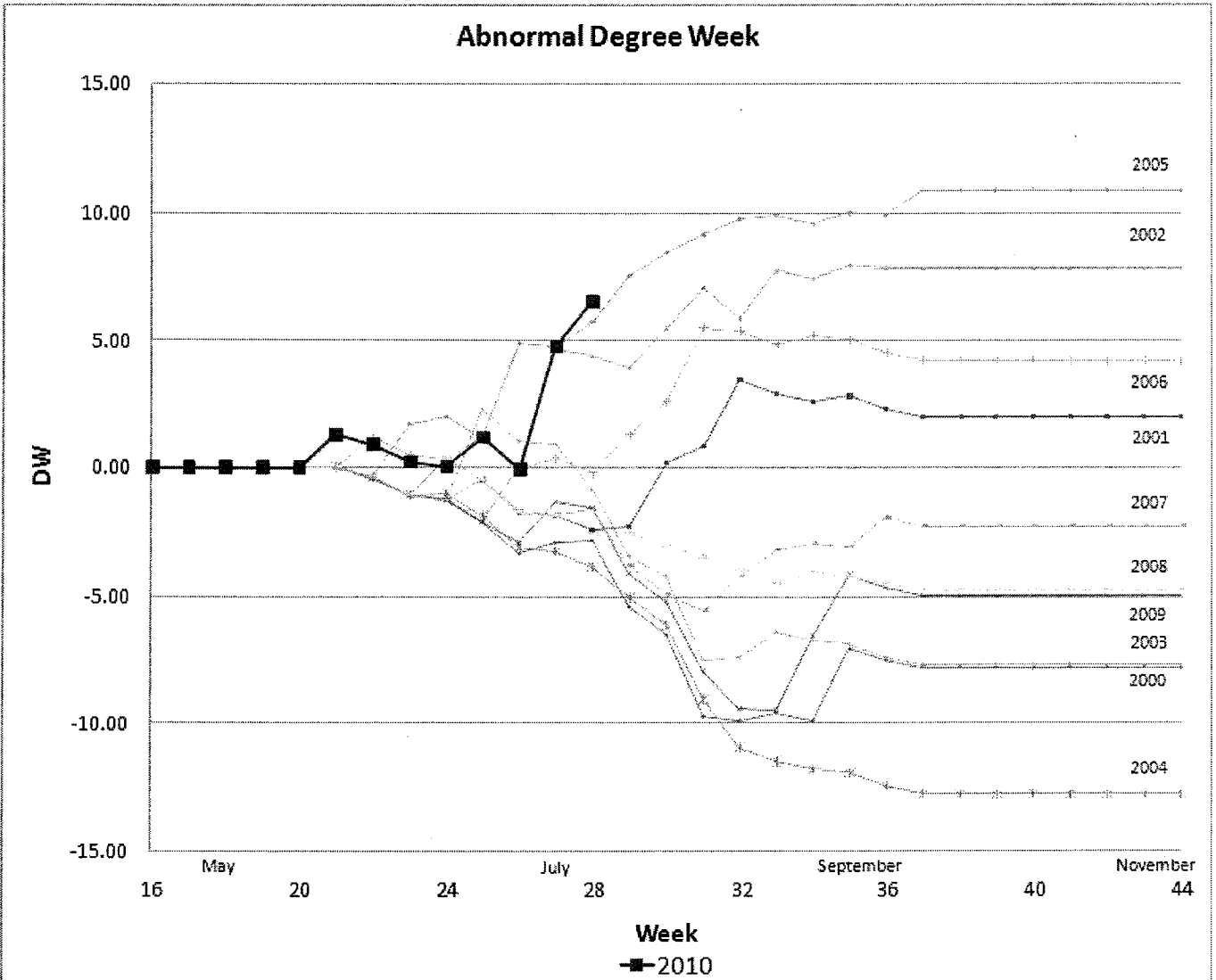




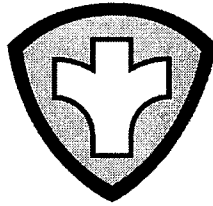
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Degree-Week (DW) is a measure of weekly cumulative temperature greater than 22 C (71.6 F) starting with week 1 for the current year. In Figure 1 temperature is the driving factor. A line above the middle of the graph indicates a warmer year - more mosquito infection is likely, while a line below the middle of the graph indicates lower temperature - less mosquito infection is likely.



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Student bikers protect C-U from West Nile

Reema Amin News Writer

Posted: July 19th, 2010 - 7:18 PM

Updated: July 20th, 2010 - 12:01 PM



Kathleen Doran, a recent graduate, drops mosquito

larvicide into a street sewer in Champaign on Tuesday.

Ned Mulka The Daily Illini

While two University students bike their way through the area, West Nile Virus slips further and further away from Champaign County.

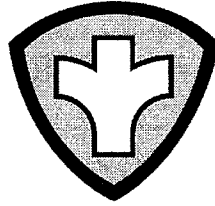
As mosquito abatement bikers for the Champaign-Urbana Public Health District (CUPHD), Kathleen Doran, recent graduate of ACES and Claire Keating, a senior in Fine and Applied Arts and Illini Media employee, travel around Champaign County to spread mosquito larvicide to help prevent the coming of West Nile Virus, a disease of the brain transmitted through infected mosquitoes. The CUPHD hired the two students as part of the district's special program to reduce Culex mosquitos, the insects that cause the disease, said Jim Roberts, director of environmental health for the CUPHD.

In order to begin work, Doran said her and Keating had to obtain a pesticide license to certify they knew how to properly spread the mosquito larvicide. Although there are other methods to kill West Nile-causing insects, such as using gas, Keating said she thinks using the liquids is the best way to go about the process.

"It doesn't affect people at all. It's going directly to the source," Keating said.

"I think it's green," Doran added, referring to the environmental effects of the larvicide.

Keating said both bikers travel around Urbana, Champaign and Savoy and inject the larvicide into places that catch stagnant water, such as street sewers. These "catchbasins" are the main breeding areas for Culex mosquitoes, as they are attracted to stagnant water. Because these catchbasins exist everywhere, she said her and Doran need to stop at almost every street corner in Champaign County to apply larvicide to something.



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Melaney Arnold, spokesperson for the Illinois Department of Public Health (IDPH), said the IDPH encourages cities to utilize larvicide for mosquito prevention. She said biking is a smart way to go about the process.

"Maybe they can get closer to some of the pools than they would in a car," Arnold said.

Although the job may seem tedious and possibly even grueling during the recent high temperatures, both students enjoy what they do, and would not mind doing it for another summer.

"It's nice to be outside everyday," Keating said. "We see a lot that you normally wouldn't see every day as a student."

While the health district has done surveillance for West Nile in the past, this is the first year the CUPHD has hired abatement bikers, Roberts said. The job was previously done by the Natural History Survey on campus until 2009, when the CUPHD took over.

Since both students are seasonal employees, the abatement process will continue on for the rest of the summer and end before the fall begins.

Keating said the city's effort is one of the few in the state: Champaign County is one of the only counties in Illinois to adopt the biking method as a way to prevent the spread of the virus.

Both students, decked out in bright yellow T-shirts, said people notice they are unique bikers and stop them to ask about their job. Keating said many times, residents will approach students and ask about prevention methods.

"People here are really curious," Keating said.

While area residents continue to be curious, Keating said people do not take the virus as seriously as they should.

"I feel like people kind of forget about the West Nile Virus, but it's still an issue," Keating said.

**RESOLUTION RECOGNIZING THE EXEMPLARY SERVICE OF CHAMPAIGN
COUNTY BOARD OF HEALTH MEMBER JULIAN RAPPAPORT**

WHEREAS, Julian Rappaport served as a member of the Champaign County Board of Health from May 20, 2005 to June 30, 2010; and

WHEREAS, Julian Rappaport diligently served as the President of the Board of Health from July 10, 2007 to May 25, 2010, a time-consuming and demanding position; and

WHEREAS, as Board President Julian Rappaport shepherded the Board of Health through challenging times of budget preparation, changes in administration, and programmatic changes; and

WHEREAS, Julian Rappaport was vital in promoting joint collaboration between the Board of Health and the Champaign County Mental Health Board to fund the Beyond Blue Program through Crisis Nursery to extend services to assist mothers suffering from perinatal depression, their children, families, and the community; and

WHEREAS, the Champaign County Board of Health seeks to publically recognize the dedicated leadership in public health provided by Julian Rappaport to the citizens of Champaign County;

NOW, THEREFORE, BE IT RESOLVED that the Champaign County Board of Health hereby recognizes the exemplary service of Julian Rappaport; and

BE IT FURTHER RESOLVED that a copy of this Resolution be presented to Julian Rappaport in recognition of his years of service to the citizens of Champaign County.

PRESENTED, ADOPTED, APPROVED, AND RECORDED this 27th day of July, A.D. 2010.

Bobbi Scholze, President

Cherryl Ramirez, Secretary

John Peterson, Treasurer