# Vermilion County Health Department



1994 28th Annual Report

#### MISSION STATEMENT

The primary mission of the Vermilion County Health Department is the improvement of the quality of life through disease prevention, health protection and health promotion programs designed to provide a healthier life and environment for all of the citizens of Vermilion County, Illinois.

The focus of our efforts to achieve our public health mission will be directed towards comprehensive community needs assessment, strategic policy development based on the assessment of community needs, and assuring the provision of preventive health services which are not reasonably obtainable through private or other public sector agencies. The development and provision of public health services will be directed towards priorities, as follows:

- Address disease prevention or the treatment of disease
   Promote health
   Improve the quality of life

#### CURRENT BOARD OF HEALTH MEMBERS

| Kay Banta, R.N President Danville, Illinois            |
|--|
| Rosemary Hall Secretary Danville, Illinois             |
| E. G. Andracki, M.D                                    |
| Hugh Henderson, D.D.S                                  |
| Palmalea Taylor, R.N                                   |
| Reverend James Calvert                                 |
| Ivadale Foster   |
| Edward Warren, M.D                                     |
| E. Ruth Martin   |
| Judy Benjamin  |
| Jane Coony, DDS  |
|  |
| Vermilion County Board, Health and Education Committee |
| Ivadale Foster   |
| Maurice Arbuckle                                       |
| Todd Lee   |
| Walter Lumsargis                                       |
| Richard Chenev   |



# Vermilion County Health Department

STEPHEN LAKER, M.S. Public Health Administrator

COUNTY SERVICES BUILDING Tilton-Cattin Road R. R. 1, Box 12 B Danville, Illinois 61832 Phone 217-431-2662

February 28, 1995

Dear Citizens of Vermilion County:

The Vermilion County Board of Health and the employees of the Vermilion County Health Department are very proud of the public services we were able to provide during our twenty-eighth year of service. We again welcome this opportunity to summarize our service activities and report our fiscal status because accountability is necessary to sustain support for public services.

We are collectively committed to the provision of vital services to promote and protect the public health of the citizens of Vermilion County, Illinois. We firmly believe that the services provided by the staff of the Vermilion County Health Department have a very positive impact on the quality of life in our county.

The achievements and service activities described in this report were made possible by the dedicated work of the members of the Board of Health and our staff as well as the active support and cooperation of the County Board, the medical community, other public agencies, community service organizations, and social service agencies.

The completion of the Vermilion County Community Health Plan was our most significant achievement during 1994. It provides a comprehensive strategic plan to guide the Vermilion County Health Department in an intensive community based effort to improve the health status and quality of life for the residents of Vermilion County, Illinois. The Board of Health will use the plan to guide staff development, allocate resources and collaborate with other agencies to achieve the objectives stated in the plan. The last four pages of this report contain the executive summary of our community health plan as a special supplement to this report.

Thank you for the opportunity to serve you.

Sincerely.

Stephen Laker, M.S., R.S. Public Health Administrator

#### Vermilion County Health Department Staff

| Stephen  |        |      |     |
|----------|--------|------|-----|
| Barbara  | Thorns | brou | ıgh |
| Lynn Gal | loway, | RN   |     |
| Kolby Ri | aale,  | BS,  | RS  |

Public Health Administrator Administrative Assistant III Director of Community Health Services Director of Environmental Health

#### Personal Services

| Kay Chacon, RN   | Nurse Coordinator TB/CD/IMM            |
|--|--|
| Sharon Brown RN  | Nurse Coordinator Home Health Services |
| Nancy Strawser, RNC  | Nurse Coordinator FP/STD/AIDS          |
| Shirley Hicks, BS  | MCH Administrator MCH                  |
| Ronnie King RN   | . Nurse Coordinator                    |
| Charlotto Stoht DN   | Com. Hith. Prog. Coord                 |
| Violeio Ellia OCNP   | . Nurse Practitioner                   |
| Dango Ault BCN DN  | Staff Nurse                            |
| Dianno Birky BC  | Nutritionist                           |
| Norlotta Brylocki RN   | Case Manage/RN                         |
| Frada Rurko CNA  | Home Health Aide Home Nursing Services |
| 1 G DN   | Caco Manager/PM                        |
| Martha Cooper-Apata, RS .  | Case Manager                           |
| Torrag DoBoor PN BS  | Nurse Health Educator                  |
| desilia Denhant DM   | DCES/ Case Manager                     |
| Carol Donney PN  | Staff Nurse Jall Nursing               |
| Mildred Due  | Community Hith Ed. Aide                |
| themes Files DM  | Cage Manager/RN PT                     |
| Cala Pottova BC  | Aggociate Nutritionist WIC             |
| Claric Cilbort BSN PN  | Case Manager/RN HMHK                   |
| Anita Hurliman RN. PHN   | . Public Health Nurse PT               |
| Tuginda Buffman  | Vision & Hearing Tech Vision & Hearing |
| The contract of the contract o | Chaff Nurgo WIC                        |
| Torry Jackson BA RN  | Associate Health Educator              |
| Donna Jones PN PHN   | . Public Health Nurse                  |
| Uolon Kaufmann DN  | Staff Nurse PT WIC/CHD                 |
| Tuanno Koog PN PHN   | Public Health Nurse Home Health/CCU    |
| Tica Tancactor PN  | Case Manager/RN HMHK                   |
| Charrill Martin DN   | Staff Nurse PT Chronic Disease         |
| Tinda Mular PN PHN   | Public Health Nurse                    |
| Carol Newman RN PHN  | . Public Health Nurse PT IMM           |
| Candra Drice LPN   | Associate Case Manager HMHK            |
| Vonda Pruitt RN  | Staff Nurse FP/STD                     |
| Suo Ramert RN  | Staff Nurse                            |
| Charchiolde BCN DN   | Case Manager/RN HMHK                   |
| Charrie Shoomaker PN   | Staff Nurse WIC                        |
| Character DN   | Cago Managor/RN                        |
| Charul Sprague RS  | . Associate Nutritionist WIC           |
| Marilyn Stutsman, RN   | Staff Nurse PT                         |
| Chammi Unlincor DN   | Cage Manager/RN                        |
| Kayann Wagner, RN, PHN   | . Public Health Nurse                  |
| Kathleen Waite, RN   | Staff Nurse PT WIC                     |
| Pamala Warner RN   | Case Manager/RN                        |
| Judith Winkler, RN. PHN .  | . Public Health Nurse FP/Home Nursing  |
|  |  |

#### ENVIRONMENTAL HEALTH

#### 1993-1994

#### PROGRAM SYNOPSIS, HIGHLIGHTS AND SERVICE STATISTICS

During 1994 the Illinois Department of Public Health approved our Community Health Plan and certified that we had successfully completed the required Illinois Project for the Local Assessment of Needs (IPLAN). We were certified as a local health department for a five year period which ends on November 9, 1999 unless it is renewed through our continuing compliance with applicable regulations.

#### Administrative and Organizational Support

The administrative division is responsible and accountable for the overall operation and management of the Vermilion County Health Department and all of its programs and services. The responsibilities of the administrative division include budget preparation, fiscal management, grant applications, program priorities, policies and procedures as well as supervising all personnel, program activities and record maintenance.

#### Vital Records

As the Local Registrar, the Vermilion County Health Department must oversee the activities of several deputy registrars. Vermilion County Health Department is also authorized to provide certified copies of birth and death certificates which are recorded and filed at the Vermilion County Health Department.

The Vermilion County Health Department only has birth and death certificates which were recorded and filed after June 1, 1983. Certified copies for all birth and death certificates which were recorded prior to June 1, 1983 may be obtained from the County Clerk's office at the Vermilion County Courthouse Annex.

The current fee for obtaining certified copies from the Vermilion County Health Department is listed below:

\*\*Record search and first or initial certified copy: \$7.00 All subsequent certified copies (per request): \$2.00

All service statistics reported are for a calendar year - January through December unless otherwise noted.

\*\*Fee authorized by the Illinois Department of Public Health to the Local Registrar for each birth and death certificate that is filed in Vermilion County, Illinois.

#### Vital Records Service Statistics

|   | 1992   | <u>1993</u> | <u>1994</u>    |
|---|--|-------------|----------------|
| Death certificates recorded and filed:    | $   \begin{array}{r}     1149 \\     7767 \\     1227 \\     \hline     34 \\     \hline     10177   \end{array} $ | 1180        | 1139           |
| Certified copies provided upon request:   |  | 8210        | 8062           |
| Birth certificates recorded and filed:    |  | 1207        | 1182           |
| Certified copies provided upon request:   |  | <u>35</u>   | 60             |
| TOTAL                                     |  | 10632       | 10443          |
|   | 1992   | 1993        | 1994           |
| Total fees generated for certified copies | \$21804  | \$21501     | \$22094        |
| Filing fees authorized by IDPH @ \$1 each | <u>\$ 2376</u>   | \$ 2377     | \$ <u>2319</u> |
| TOTAL FEES:                               | \$24180  | \$23878     | \$24413        |

#### Home Health Services (December 1, 1993-November 30, 1994)

The home health service program provides skilled nursing care and home health aide services to home-bound patients in their residences throughout Vermilion County, Illinois. Effective June 1, 1984 a full charge fee schedule was initiated. The current maximum fee per visit was established in April 1994.

Skilled Nursing Home Health Aide \$77.00/visit \$23.00/visit

The fee and/or charge per patient visit is determined by reviewing income information provided by the private pay patient on a required fee determination form which is utilized to document whether or not they are indigent.

All third party payers such as Medicare, Medicaid, non-indigent persons and private insurance companies are billed at the maximum rate per visit on the full charge schedule. The maximum rate per visit is based on the actual cost per home health service/visit as determined by our required annual Medicare Cost Report.

Uncollected private pay patient fees and non-billed charges to persons documented to be indigent are charged to and offset by a \$22,000 grant from the Danville Area United Way.

#### Skilled Nursing Service Statistics

|   | <u>1992</u> | <u>1993</u> | 1994 |
|---|-------------|-------------|------|
| Medicare Plan A IDPA/Medicaid Patient pay and indigent Home Health Aide Supervisory One time visits TOTAL | 708         | 745         | 1051 |
|   | 27          | 19          | 18   |
|   | 778         | 774         | 592  |
|   | 75          | 61          | 60   |
|   | 35          | 8           | 10   |
|   | 1623        | 1607        | 1731 |
| Home Health Aide Service Statistics   |             |             |      |
| Medicare Plan A Patient pay and Indigent IDPA TOTAL   | 1992        | 1993        | 1994 |
|   | 419         | 369         | 689  |
|   | 488         | 431         | 266  |
|   | 0           | 0           | 0    |
|   | 907         | 800         | 955  |

#### Case Coordination Unit for the Title XX Community Care Services

During May of 1983, the Vermilion County Health Department was officially designated by the East Central Illinois Area on Aging as the Case Coordination Unit for Community Care clients and service vendors in Vermilion County. The service program was initiated on July 15, 1983. The case coordination services are funded by supplemental funding awards and agreements with the ECIAAA, the Illinois Department on Aging, and the Illinois Department of Public Aid for services provided by the Vermilion County Health Department Case Coordination Unit service staff.

The services provided by the Case Coordination Unit under supplemental funding agreements include initial assessments to determine client needs and eligibility, required or requested periodic reassessments, and nursing home prescreenings.

CCU Service Statistics - October 1 to September 30 (grant fiscal year)

|  | <u> 1992</u> | 1993       | 1994       |
|--|--------------|------------|------------|
| Client Assessments   | 111          | 113        | 90         |
| Client Reassessments   | 234          | 267        | 245        |
| Prescreenings for Medicaid Reimbursed Nursing Home Placement (CCU and hospitals) | 148          | <u>158</u> | <u>135</u> |
| TOTAL  | 493          | <u>530</u> | 470        |

#### Chronic Disease/Elderly Health Care

Our Elderly Health Care program currently consists of a part-time nurse (1200 hours per year) who provides, free of charge, multi-phase medical screening, information and referral to persons over the age of 60 at 25 sites located throughout Vermilion County. Some of the sites are senior adult meal sites, while other sites are village senior citizen centers for senior citizen housing developments. The same nurse provides outreach services to assess the health needs of isolated elderly persons in Vermilion County and provides follow-up hypertension assessment in the patient's own home.

The chronic disease clinic provides multi-phase disease screening and education regarding chronic disease (free of charge to the citizens of Vermilion County regardless of their age.) The chronic disease clinic started providing services in February 1981 and is scheduled from 1-3 p.m. on the fourth Monday of every month. In 1986 the United States Post Office (Danville branch) requested the Vermilion County Health Department's assistance in the completion of yearly employee physicals. The employees must complete a physical and have their blood pressure checked by a registered nurse before being issued a new driver's license to operate the postal vehicles.

Effective October 1, 1992 we initiated additional chronic disease screening evaluation and follow-up services funded by an \$8800 Cardiovascular Disease Prevention grant. The additional funds enable us to increase the number of part time hours of employment to 200 hours for the staff nurse who provides these services. We established 3 additional screening clinics each month. These services are provided only with a prior appointment.

| Chronic Disease Program Service Statistics   | 1992      | 1993     | 1994        |
|--|-----------|----------|-------------|
| Total persons screened and counseled at the<br>Public Safety Building<br>Total persons screened and counseled at the                           | 103       | 0        |             |
| Hoopeston Methodist Church<br>Total visits and persons screened/counseled  | 380       | 368      | 360         |
| at the Danville Post Office (visits/persons screened)  | (10) 49   | (7) 28   | (12) 76     |
|  | 1992      | 1993     | <u>1994</u> |
| Green Thumb Physical Exams   |           | 2        | 1           |
| - makal bodg factor marcht doroopings at the   |           |          |             |
| Total DCFS foster parent screenings at the Vermilion County Health Department  | 36        | 23       | 3           |
| Vermilion County Health Department Total persons screened and counseled at the VCHD monthly clinic Total persons screened and counseled at the | 36<br>119 | 23<br>86 | 3<br>106    |

#### Elderly Health Care Service Statistics

| Total persons screened (not unduplicated) | 3720 | 4047 | 3558 |
|---|------|------|------|
| Outreach visits                           | 0    | 12   | 0    |
| тотат.                                    | 3720 | 4059 | 3558 |

#### Jail Health Service Program

At the request of the Public Safety Committee of the Vermilion County Board, the Vermilion County Health Department researched and planned the development of a jail health nursing program as a component of a complete medical service program during the months of March through May 1982. The program is now a well established continuing service program.

The jail health service program was planned and developed with the complete cooperation and assistance of the Vermilion County Sheriff's Department and correctional staff of the Public Safety Building.

The Vermilion County Health Department actually started to deliver nursing services as a component of a well organized, scheduled and staffed jail health services program during June 1982. The jail health services program is designed to provide basic health screening, physical assessment, medication administration and record maintenance services as required by the Illinois Department of Corrections. The jail health services program was approved and recognized as being in compliance with the Illinois Department of Correction Standards for Local Correctional Facilities during their annual inspections over the last twelve years including 1993. Due to the increased demand for Jail Health Services effective December 1, 1993, the staffing for this program was increased to 35 hours per week.

The Vermilion County Health Department provides scheduled nursing services including initial physical examinations, sick call, medication set-up and record maintenance at the Public Safety Building seven hours daily, Monday through Friday.

In addition to the nursing services listed, the Vermilion County Sheriff's Department has a contractual agreement with a local physician to provide supervisory, consultative and medical services to the Public Safety Building inmates

#### Jail Health Service Statistics

|   | VCHD   | RN                                     |                                       |
|---|--|--|---------------------------------------|
|   | <u>1992</u>  | <u> 1993</u>                           | <u> 1994</u>                          |
| Scheduled inmate sick call<br>Inmate physicals<br>TB tests<br>Medicine setups     | 728<br>82<br>73<br>21701   | 1351<br>141<br>115<br>22874            | 1687<br>119<br>39<br>34987            |
| Referrals   | <u>1992</u>  | 1993                                   | 1994                                  |
| Mental Health TB STD Dental Prenatal Aids Testing/Counseling TOTAL ALL ACTIVITIES | $   \begin{array}{r}     12 \\     0 \\     8 \\     17 \\     3 \\     \hline     22625   \end{array} $ | 24<br>0<br>27<br>35<br>3<br>0<br>24560 | 1<br>0<br>31<br>44<br>9<br>9<br>35072 |

#### MEDICAL DOCTOR

| Scheduled inmate sick call | 356 | 356 | 325 |
|----------------------------|-----|-----|-----|
| Inmate physicals           | 0   | 0   | 0   |
| TOTAL UNITS OF SERVICE     | 356 | 356 | 325 |
| Total visits to jail       | 49  | 49  | 49  |

#### Maternal Health and Family Planning

The primary objective of this program is to assure women of childbearing age the optimum chance for wanted pregnancies and the successful outcome of pregnancies and adequate preparation for the motherhood role. Currently, medical examinations, pregnancy testing, contraceptive supplies and educational services are offered to all citizens on the basis of voluntary participation.

Our family planning services are subsidized by several combined grant sources including an Infant Mortality Reduction Initiative (FWF) grant to provide additional staff. Eligibility for subsidized services is determined on the basis of family income reported by family planning clients. The Vermilion County Health Department has a discounted fee schedule based on our costs for providing specific services and supplies. Clients are required to pay a share of the costs of providing the services and/or supplies they receive for each visit. The grant funds subsidize these services by providing a fee-for-service reimbursement provision of services to eligible clients scaled on the individual or family income criteria as related to the federal poverty quidelines.

| Family Planning Service Statistics     |      |      |      |
|--|------|------|------|
|  | 1992 | 1993 | 1994 |
| Initial clinic visits                  | 756  | 582  | 476  |
| Annual physicals                       | 1706 | 1630 | 1582 |
| Medical revisits                       | 810  | 994  | 2296 |
| Contraceptive supply visits            | 3852 | 5111 | 2360 |
| Education & counseling (during clinic) | 998  | 873  | 1033 |
| TOTAL SERVICES PROVIDED                | 8122 | 9190 | 7747 |
| Total unduplicated persons served      | 2462 | 2212 | 2058 |

#### Community Health Education

The primary goal of our community health education program is to prevent adolescent health problems including pregnancies and sexually transmitted diseases. Adolescent health education presentations are conducted for a wide range of topics including drug and alcohol abuse, smokeless tobacco and steroid use risks as well as human sexuality and family living.

#### Community Health Education Service Statistics

| <u>.</u>  | 1992 | <u>1993</u> | 1994 |
|---|------|-------------|------|
| Education Outreach (School & Community Classes) | 449  | 165         | 215  |
| Persons in Attendance                           | 9918 | 4490        | 4438 |

#### Outreach Counseling Project

In May 1986 the Vermilion County Health Department utilized funds provided through the Infant Mortality Reduction Initiative (FWF) Community Network Services grant to employ a social worker to initiate this project. We now utilize a public health nurse to provide early intervention activities through outreach counseling.

The priority target groups for the project are adolescents in Vermilion County schools, minority groups and high risk pregnant women not in school.

#### Outreach Counseling Service Statistics

|                                       | 1992 | <u>1993</u> | <u>1994</u> |
|---------------------------------------|------|-------------|-------------|
| Pregnancy testing                     | 1213 | 1140        | 1059        |
| Short term counseling sessions        | 1213 | 1140        | 1059        |
| In-depth counseling sessions          | 13   | 18          | 9           |
| Referrals to prenatal project and FWF | 432  | 413         | 385         |
| Problem pregnancy referrals           | 51   | 49          | 60          |
| Referrals to private physicians       | 619  | 606         | 553         |
| Referrals to family planning clinic   | 187  | 175         | 147         |
| Referrals to prenatal clinics         | 221  | 116         | 0           |
| Referrals to WIC                      | 441  | 465         | 418         |
| Routine visits to schools             | 4    | 0           | 0           |
| TOTAL SERVICES                        | 4394 | 4122        | 3690        |

#### Healthy Moms/ Healthy Kids Program

HM/HK is an intensive Maternal Child Health case management program which provides health care linkage and support services to pregnant women, their infants and children up to three years of age who are either eligible for a Medicaid medical card or whose income is below 185% of the federal poverty level. This new program was phased in state wide during 1993 with grant funding authorized by the General Assembly for a joint initiative through both the Illinois Department of Public Health and the Department of Public Aid. It provides intensive case management services in an effort to provide appropriate and timely preventive health services.

HM/HK is an expansion of the former "Families with a Future" which was initiated in 1987 by the state of Illinois to reduce infant mortality. The goal was to reduce the infant deaths to 9.0 per 1,000 live births in Illinois by the year 1990. The revised goal is for 7.0 deaths per 1,000 live births by the year 2000. Vermilion County was originally selected for a FWF site because of its high infant mortality rate.

The HM/HK program continues with the goal of reducing infant mortality by educating mothers-to-be about early and comprehensive prenatal care, proper nutrition and family planning. Case managers are assigned to pregnant women and low-income families with children up to three years of age. The case manager helps the family select a doctor, make appointments, arrange for transportation and follows up with them.

Vermilion County Health Department is responsible for networking, coordination and case management that brings a comprehensive approach to the delivery of services to the high risk population in the county.

HM/HK support services include the following funded agencies:

Catholic Social Services: Counseling, maternity home placement, support and education for women age 20 and above.

Center for Children's Services: Counseling, support and education for teens up to age 20.

Hoopeston Multi-Agency: Outreach and transportation of HM/HK clients in northern Vermilion County.

Laura Lee Fellowship House: A prevention program for teens called (Positive Alternative Lifestyle). (Pal) Teen group meetings focus on topics which educate both male and female teenagers so that they will have the tools to maintain healthy, positive, and productive lifestyles.

Children's Home and Aid Society of Illinois: Initiated in 1988 to provide day care to qualified infants in licensed day care homes. This program is funded by DCFS and is under the supervision of the Vermilion County Health Department.

#### Maternal/Child Health Services

| HM/HK Services Statistics:   | <u>1992</u>   | <u>1993</u> | <u>1994</u>                |
|--|---|-------------|----------------------------|
| Family units receiving case management services as of 12/31  |   | 1651        | 2214                       |
| Infants delivered to program participants  | 299   | 261         | 821                        |
| Healthy Start Applications* Lead agency referrals High-risk infant follow along referrals APORS referrals (Adverse Pregnancy Outcome) Specialized Care for Children guidance** Sudden Infant Death Intervention and counseling Creasy Preterm Labor Prevention Class Attendance Lamaze Class - Number of persons completing class Transportation units provided Prescription drugs provided Food and clothing units provided Infants receiving daycare Visits to hospitalized clients after delivery Case management face-to-face contacts | 401<br>3282<br>89<br>89<br>24<br>18<br>110<br>194<br>3525<br>14<br>123<br>48<br>541<br>4278 | 3122<br>8   | 68<br>25<br>7<br>66<br>125 |
| Cabo management 1100 11 1100 1000  | 10726   | 6766        | 10168                      |
| Total Services   | 12736   | 6766        | 10100                      |

\*In March 1990 the Illinois Department of Public Aid initiated the Medicaid Presumptive eligibility (Healthy Start) program at the Vermilion County Health Department. During the 45 day period following application, all services provided to qualified prenatal clients are funded by medicaid reimbursement.

| Analysis of Healthy Start Applicants:                         | <u>1992</u>           | <u>1993</u>           | 1994                  |
|---|-----------------------|-----------------------|-----------------------|
| Client Age:     14 and under     15 - 19     20 - 29     30 + | 1<br>166<br>207<br>27 | 1<br>112<br>168<br>24 | 8<br>178<br>198<br>39 |
| Client Race:<br>White<br>Black<br>Other                       | 323<br>51<br>27       | 251<br>40<br>14       | 355<br>41<br>27       |

Trimester at initial visit:

| First  | 261 | 242 | 303 |
|--------|-----|-----|-----|
| Second | 98  | 47  | 90  |
| Third  | 42  | 16  | 30  |

\*\*Division of Specialized care for Children is the former Crippled Children Agency.

\*\*\*The Case Management information System (CMIS) is under revision. Some previously available data cannot yet be retrieved.

Transportation: provided for clients to services that will promote the HM/HK goals. Transportation contracts are with Yellow, Superior, and Faith Cab Companies. Other transportation provided by the program is via Danville Mass Transit, Center for Children's Services, and Catholic Social Services.

\*Home Visitation: Case Managers visit HM/HK clients and infants to identify medical and social needs. Referrals and number of case management contacts are based on identified needs.

Enhanced Case Management Services are provided to chemically dependent pregnant women and/or women with children under three years of age. The services at this site, along with four other sites in Illinois, are totally funded by the Federal Office of Substance Abuse Prevention. Funding is funneled through the Illinois Department of Public Health. The program is managed locally by the Vermilion County Health Department HM/HK program. Prior to March 1991 outreach services were provided through a sub-contract with an outside agency.

The Community Outreach Counselor plans and completes case finding activities and provides supportive service to active clients.

As of December 31, 1994, 38 clients were receiving enhanced case management services; 6 of those were receiving treatment services.

#### Enhanced Case Management Service Statistics

|                                | 1992        | 1993 | 1994 |
|--------------------------------|-------------|------|------|
| Unduplicated caseload/clients  | <u>. 77</u> | 65   | 49   |
| Intake/assessments             | 77          | 84   | 61   |
| Follow-up actions with clients |             |      |      |
| (including home visits)        | 772         | 593  | 630  |
|                                |             |      |      |
| Follow-up with providers       | 293         | 701  | 513  |
| Referrals received             | 53          | 52   | 57   |
| Outreach                       | 169         | 193  | 107  |
| Staffings                      | 103         | 137  | 166  |
| Total Services                 | 1544        | 1825 | 1583 |

#### (WIC) Women, Infants and Children

The clinic is located at 101 West North Street (third floor-Danville Township Building).

The WIC program provides specific nutritious supplemental foods for pregnant/breastfeeding women, infants and children up to five years of age. Each WIC participant's eligibility is determined by income and medical/nutritional risk identified through screenings during clinic appointments. Program policies require each participant to attend at least one nutrition education class during each six month certification period. Mothers of infants certified to the first birthday are required to attend two

nutrition education classes as well as to bring the infant to the clinic for follow-up medical/nutritional assessments. The supplemental foods are prescribed for each client based on specific risks found through clinic screenings. Infant foods provided are: iron-fortified infant formula, infant cereal and infant juice. Supplemental foods provided for women and children may include milk, cheese, juice, eggs, cereal, peanut butter and/or dried peas and beans. Effective December 1, 1993, mothers that are exclusively breast feeding their infants may also receive tuna and carrots in addition to the foods listed above.

Caseload expansion efforts became effective February 1994 to increase participation from 2,341 to 2,801 by June 1994. This 20% growth allowed an additional 460 participants to receive program benefits. Caseload was assigned for the remainder of the calendar year at 2,801 participants per month.

Approximately ten percent (10%) of the WIC caseload is seen at the Hoopeston clinic two days each week. The Hoopeston WIC office is open on Tuesdays and Wednesdays.

The WIC program is funded by the United States Department of Agriculture and administered through the Illinois Department of Public Health.

#### Racial/Ethnic Participation in WIC as of August 1994

| White                  | 71.2% |
|------------------------|-------|
| Black                  | 22.4% |
| Hispanic               | 5.8%  |
| Asian/Pacific Islander | 0.3%  |
| Other                  | 0.3%  |

# WIC STATISTICS January 1994 - December 1994

| Month  | Preg<br>Women | Breastfeeding Post Partum Women | Infants         | Children | Food Pkgs.<br>Delivered | Secondary<br>Nutrit.<br>Education<br>Counseling |
|--------|---------------|---------------------------------|-----------------|----------|-------------------------|---|
|        |               |                                 |                 |          |                         | 455   |
| Jan 94 | 343           | 123                             | 665             | 1240     | 2371                    | 466   |
| Feb    | 355           | 141                             | 670             | 1265     | 2431                    | 426   |
| March  | 368           | 200.                            | 699             | 1383     | 2650                    | 532   |
| April  | 370           | 227                             | 679             | 1411     | 2687                    | 505   |
| May    | 365           | 271                             | 675             | 1426     | 2737                    | 484   |
| June   | 377           | 297                             | 678             | 1445     | 2797                    | 613   |
| July   | 379           | 303                             | 676             | 1453     | 2811                    | 475   |
| Aug    | 377           | 302                             | 680             | 1431     | 2790                    | 521   |
| Sept   | 377           | 296                             | 669             | 1402     | 2744                    | 473   |
| Oct    | 361           | 282                             | 653             | 1403     | 2699                    | 487   |
| Nov    | 351           | 288                             | 642             | 1373     | 2654                    | 489   |
| Dec    | 325           | 298                             | 651             | 1317     | 2591                    | 552   |
| Totals | 4348          | 3028                            | <del>8037</del> | 16549    | 31962                   | <del>6023</del>                                 |

#### Fiscal Impact

Average food package cost: \$45.50 per month per participant. Estimated food dollars spent in Vermilion County annually: \$1,453,000 (based on food packages distributed).

#### Service Statistics

|  | <u>1992</u>           | 1993           | 1994           |
|--|-----------------------|----------------|----------------|
| Certification:     Medical assessments:     Nutritional assessments: | 4348<br>4348          | 4663<br>4663   | 5181<br>5181   |
| Subsequent counseling/<br>follow-up assessments                      | 5204                  | 5333           | 6023           |
| Total food package vouchers TOTAL UNITS OF SERVICE                   | $\frac{28173}{42073}$ | 29011<br>43670 | 31902<br>48287 |

#### \*Childhood Lead Poisoning Prevention/Screening Services

In December of 1993 the Vermilion County Health Department initiated the Childhood Lead Poisoning Prevention Program in Vermilion County.

The risk assessment for lead poisoning and lead screenings (when indicated and consented for) are delivered in the WIC program. Children who are participants of the WIC program and are age 6 months to 5 years are eligible for lead screening.

All children who reside in Vermilion County and are identified with an elevated blood level receive follow-up services by the Vermilion County Health Department. Elevated blood levels and the appropriate follow-up is determined by the Illinois Department of Public Health, in accordance with the Lead Poisoning Prevention Act.

| Screening/MCH Staff Follow-up Statistics           | 1994 |
|--|------|
| Children screened at WIC                           | 180  |
| Elevated Levels requiring follow-up                | 36   |
| Environmental Inspection and follow-up by Staff RN | 8    |
| Total services                                     | 224  |

\*See the Environmental Health Program service statistics for additional information regarding lead contamination statement inspections, investigations and enhancement sections.

#### Vision and Hearing Screening Program - Optional Program/Approved

The objective of our vision and hearing screening program is to obtain the early identification of vision and hearing impairments in preschool and school age populations. We also provide assistance to those school districts which do not provide vision and hearing screening services. We assume responsibility for all required referrals and follow-ups at 22 preschools, 4 Vermilion Area Special Education sites, 18 C.A.R.E preschools and 13 public and parochial school sites.

Vision and Hearing Screening Service Statistics - IL. Dept. of Public Health Annual Report Year ending June 30th 1994.

|                                       | 1992 | 1993 | 1994 |
|---------------------------------------|------|------|------|
| Hearing screening tests               | 4653 | 4499 | 4984 |
| Rescreenings                          | 231  | 233  | 201  |
| Threshold tests/known case monitoring | 55   | 61   | 67   |
| Referrals to medical doctors          |      |      |      |
| or audiologist/referral count         | 44   | 50   | 54   |
| Referral percentage                   | 1.0% | 1.1% | 1.1% |
| Vision Screening Tests                | 4655 | 4240 | 4466 |

|                        | 1992 | 1993        | 1994  |
|------------------------|------|-------------|-------|
| Rescreening            | 360  | 328         | 285   |
| Total Referrals        | 136  | 135         | 127   |
| Referral percentage    | 2.8% | 3.2%        | 2.8%  |
| Total Units of Service | 9924 | <u>9546</u> | 10094 |

#### Sexually Transmitted Disease Clinic

The objective of the Vermilion County Health Department's Sexually Transmitted Disease program is to maintain an effective clinical program and achieve a reduction in the incidence of sexually transmitted diseases. The Vermilion County Health Department's sexually transmitted disease program consists of a free, confidential walk-in clinic held twice a week which provides medical screening, laboratory testing, medical treatment and follow-up for persons with venereal diseases and their sexual contacts.

#### STD Clinic Service Statistics

| Calendar Years:   | <u>1992</u>              | <u>1993</u>               | 1994                      |
|---|--------------------------|---------------------------|---------------------------|
| STD clinic patients screened* FP patients screened Persons treated for STD by VCHD Total Services | 387<br>192<br>158<br>737 | 598<br>265<br>353<br>1216 | 623<br>169<br>472<br>1264 |
| Positive cases of gonorrhea<br>Chlamydia cases<br>Syphilis  | 114<br>183               | 146<br>146<br>3           | 149<br>155<br>4           |

\*In 1992 our scheduled clinics were reduced to half of the 1991 total because we did not have either an MD or a nurse practitioner available to staff the Tuesday clinics.

All reported cases of STD require investigation to verify contact notification and treatment of cases and contacts.

#### STD/HIV Integration

In June of 1990 free, confidential testing for HIV became another service administered in the STD clinic. The purpose of the service is to access clients who have not received HIV prevention/risk reduction counseling. Identifying and addressing identified risk behavior enhances prevention aspects in STD clinics.

#### STD/HIV Integration Statistics

|                                     | <u> 1992</u> | <u>1993</u> | <u>1994</u> |
|-------------------------------------|--------------|-------------|-------------|
| Risk Assessment Questionnaire (RAQ) |              |             |             |
| administered                        | 311          | 512         | 564         |
| HIV testing administered            | 108          | 154         | 246         |
| Identified HIV infections           | 0            | 0           | 1           |
| Total Services                      | 419          | 666         | 811         |

#### Communicable Disease Control and Immunization Program

The goal of this program is to control communicable diseases preventable by immunization and other available public health techniques. This control program involves surveillance over the incidence of communicable disease and the implementation of all practical, safe and effective methods of disease prevention, whether applicable to the source environment or host.

#### Communicable Disease Control Service Statistics Reported/Confirmed

| Animal bites reported to VCHD by                                   | 1992 | 1993        | 1994 |
|--|------|-------------|------|
| Vermilion Co. Dept. of Animal Regulation                           | 44   | 50          | 56   |
| *Rabies prophylaxis  | 1992 | <u>1993</u> | 1994 |
| Persons receiving treatment  | 16   | 1           | 1    |
| Total animal bites reported to the Department of Animal Regulation | 398  | 385         | 381  |

<sup>\*</sup>Eleven of the persons who received rabies prophylaxis treatment in 1992 were students exposed to rabid bats at the Mary Miller Jr. High School in Georgetown in late August.

#### Reported

|                                      | <u>1992</u> | 1993 | 1994        |
|--------------------------------------|-------------|------|-------------|
| *Amebiasis                           | 0           | 1    | 0           |
| **Campylobactor                      | 7           | _    | 1           |
| Chickenpox                           | 411         | 146  | 229         |
| Giardiasis*                          | 15          | 21   | 29          |
| Hepatitis                            |             | •    |             |
| Type A**                             | 4           | 3    | 2<br>9      |
| Type B                               | 5           | 5    |             |
| Unknown & Non-A/Non-B                | 4           | 16   | 9           |
| No. Hepatitis case contacts to cases | _           | _    | •           |
| who received GG                      | 6           | 7    | ō           |
| Histoplasmosis                       | 1           | 2    | 5           |
| Lyme Disease                         | 1           | 0    | 0           |
| Measles                              | Ō           | 0    | 0           |
| Ruled out                            | 0           | 0    | 0           |
| Meningitis-Bacterial                 | Ō           | 0    | 2           |
| Meningitis-Viral                     | 3           | 0    | 2<br>1<br>2 |
| Mumps                                | 3           | 4    |             |
| **Salmonella                         | 17***       | 6    | 12          |
| Scarlet Fever                        | 8           | 7    | 7           |
| **Shigella                           | 2           | 12   | 3           |
| Pertussis (Whooping Cough)           | 0           | 0    | 0           |
| Food Borne Illness Outbreaks         | 1           | 0    | 2 .         |
| Reported food borne or water         |             |      |             |
| borne illness (Persons ill)          | 45          | 46   | 155****     |

<sup>\*\*</sup>Diseases which are commonly food or water borne through fecal/oral route of infection.

<sup>\*\*\*</sup>Includes Clostridium Perfringens outbreak as well as persons infected at a restaurant in Indiana.

\*\*\*\*Eight of the 17 salmonella cases reported in 1992 were identified as food handlers at a Danville restaurant during an intensive investigation of food borne illness outbreak which started in the fall of 1991. During the outbreak investigation, the Illinois Department of Public Health conducted a case control study which identified a potential common source food service establishment involved in the outbreak. The association was confirmed through an employee stool collection program at 2 Danville restaurants during the subsequent intensive investigation which required over 400 hours of staff time to identify infected food handlers and implement appropriate outbreak control procedures. Both the Danville Health and Sanitation Department and the Illinois Department of Public Health provided vital services and cooperation to us during this outbreak.

\*\*\*\*\*Includes Schwan's Ice Cream and an apparent viral food borne illness outbreak associated with a Danville restaurant in December of 1994.

#### Communicable Disease Control Summary

| Total illness reported to VCHD and forwarded to the Illinois Department of Public Health | 1992          | <u>1993</u> | <u>1994</u> |
|--|---------------|-------------|-------------|
|  | 491           | 279         | 416         |
| Total investigation/case<br>documentation<br>Total                                       | · 551<br>1042 | 303<br>582  | 416<br>832  |

#### Immunizations

The Vermilion County Health Department's immunization program consists of regularly scheduled clinics designed primarily to provide required childhood immunizations on a large scale to preschool and school age children in Vermilion County.

The Vermilion County Health Department provides immunizations during 25 clinics scheduled throughout the calendar year at the Vermilion County Health Department offices. A copy of the annual immunization clinic schedule is available upon request.

Effective December 1, 1991, a fee of \$5.00 per immunization was charged to cover local costs for administering the immunization. Persons who report that they are unable to pay are still eligible to receive the required immunization. Effective January 1, 1995 the fee was raised to \$6.00 per immunization.

Doses of Vaccine Used By The Vermilion County Health Department

|   | <u>1992</u>                               | <u>1993</u>                              | <u>1994</u>                              |
|---|---|--|--|
| *DPT (diptheria, pertussis & tetanus) TD (tetanus, diptheria) Polio MMR (measles, mumps, rubella) Measles Influenza | 1708<br>736<br>1483<br>2682<br>38<br>4951 | 1667<br>904<br>1443<br>6247<br>0<br>5695 | 1292<br>945<br>1308<br>1078<br>0<br>4813 |
| HBV(Hepatitis B Vaccine) Infants Adults HIB (Hemophilus Influenza B Vaccine) Act HIB Totals                         | 381<br>365<br>1068<br>13412               | 422<br>1699<br>963<br>19040              | 624<br>217<br>715<br>156<br>11148        |

\*Subsequent to the April 1995 floods 223 doses of TD (tetanus, diptheria) vaccine were given free of charge to flood victims and workers.
\*\*In June 1994 ActHIB (combined DPT and HIB) became available to be used on newborn infants and eliminate the need for one injection by combining two vaccines.

# Special Influenza Immunization Program (October each year)

|  | 1992    | 1993    | <u>1994</u> |
|--|---------|---------|-------------|
| *Persons immunized in Vermilion Co.                | 4951    | 5695    | 4813        |
| Total amount received                              | \$24118 |         | \$39289     |
| Total doses given to Medicare eligible persons     |         | 3727    | 3050        |
| Amount Due from Medicare(\$7.73 per dose)          |         | \$28810 | \$23638     |
| Total doses given to Non-Medicare eligible persons |         | 1968    | 1763        |
| Amount collected from Non-Medicare vaccinations    |         | \$14428 | \$16315     |

During 1993 Medicare initiated Influenza immunization reimbursement for Medicare eligible persons at a rate of \$7.73 per person. We then had to establish the same fee for all other payers and eliminate donations.

\*Please note that this total was included in the vaccine usage table on the preceding page.

#### Tuberculosis Dispensary

Effective December 1, 1985, the Vermilion County Board of Health and the TB Care and Treatment Boards were merged by a resolution of the County Board. This action also transferred the TB tax levy to fund public health services. The TB Dispensary was absorbed into the Vermilion County Health Department as another clinical service program.

#### TB Clinic Service Statistics - Calendar Year

|  | <u> 1992</u> | <u> 1993</u> | <u>1994</u> |
|--|--------------|--------------|-------------|
| Mantoux Tests Given: In Clinic Migrants Totals | 626          | 803          | 855         |
|  | 75           | <u>85</u>    | 127         |
|  | 701          | 888          | 982         |
| PPD and Monovac Materials Dispensed:           | 2650         | 1750         | 2400        |
| Nursing Homes/Adult Day Care/MD & PSB/Jail,etc | 100          | 100          | 100         |
| Migrant Clinic                                 | 2750         | 1850         | 2500        |

| Antibiotic Therapy                 | 1992 | 1993 | <u>1994</u> |
|------------------------------------|------|------|-------------|
| Prophylactic                       | 21   | 17   | 32          |
| Active cases                       | 1    | 5    | 2           |
| Pending                            | 0    | 0    | 0           |
| Home visits to administer TB       |      | _    | _           |
| Antibiotic                         | 56   | 54   | 54          |
| TB physical examinations           | 45   | 42   | 35          |
| Total X-rays taken and read        |      |      |             |
| at Danville Polyclinic by contract | 36   | 40   | 35          |
| Patient lab specimens collected    | 25   | 30   | 67          |
| Total All Services:                | 2893 | 2942 | 3707        |

Effective December 1, 1988, TB chest x-rays authorized by our personnel were performed outside our clinic by an approved medical facility under a contractual services agreement because we removed our x-ray machine.

During 1990 we initiated the provision of clinical services by contracting for a private physician to see clients in his office, and we terminated our monthly clinics at the Vermilion County Health Department.

#### AIDS/HIV

In January of 1986 the Vermilion County Health Department initiated an alternative test site program to provide anonymous HIV screening and counseling for persons identified at high risk for potential exposure to Human Immunodeficiency Virus, the causative agent for Acquired Immune Deficiency Syndrome (AIDS).

Through 1994, forty-seven (47) cases of AIDS have been reported and attributed to Vermilion County residents. One case which was earlier attributed to Vermilion County during 1988 was deleted and attributed to another Illinois county. Effective January 1988, HIV seropositivity was reportable but not by identifiable information. Through 1994, seventy-four (74) cases of HIV seropositivity have been reported to the Vermilion County Health Department.

#### Anonymous HIV Testing and Counseling Statistics

|   | 1992                            | 1993                  | 1994                  |
|---|---------------------------------|-----------------------|-----------------------|
| Persons tested Pre-test counseling Post-test counseling Totals                                      | 160<br>167<br><u>146</u><br>465 | 69<br>74<br>47<br>190 | 82<br>82<br>61<br>225 |
| HIV testing results Negative Positive   | 159<br>1                        | 69<br>0               | 82<br>0               |
| AIDS/HIV community education presentation<br>Number of presentations                                | 232                             | 109                   | 85                    |
| Total persons in attendance (units of service)  | 6030                            | 3245                  | 2152                  |
| Total new cases reported and attributed to<br>Vermilion County residents                            | 8                               | .0                    | 3                     |
| Total HIV positive tests identified and reported by medical persons other than VCHD testing program | 14                              | o                     | 12                    |

\*Total of all cases reported since statutes and regulations requiring reporting became effective.

AIDS case investigations 6 0 0

Total HIV services 6501 3441 2392

|                          | 1992 | <u>1993</u> | <u>1994</u> | Cumulative Total |
|--------------------------|------|-------------|-------------|------------------|
| *HIV Infections Reported | 15   | 7           | 13          | 74               |
| *AIDS Cases Reported     | 8    | 6           | 3           | 47               |

\*Total of all cases reported since statutes and regulations requiring reporting became effective.

#### Environmental Health Division

Environmental health is one of the major components of public health. The environmental health program deals with all of the factors in man's physical environment which may have a detrimental effect upon him. The primary goal of the Vermilion County Health Department's environmental health program is to protect and improve the quality of life for the residents of Vermilion County.

The Illinois Department of Public Health Standards for Local Health Departments in Illinois requires three basic environmental health programs. These programs are:

- 1. Food Sanitation
- 2. Potable Water Supplies
- 3. Private Sewage Disposal

The Vermilion County Health Department provides approved programs in all three program areas, and six other recommended programs: Vector prevention/pest control, housing, solid waste, nuisance control, lead poisoning prevention and tanning facilities regulation.

#### Food Sanitation

The primary objective of the food sanitation program is the protection of the consumer by assuring that food and food products provided by food service establishments and retail food stores are protected against contamination by infectious agents or adulteration by toxic material.

The Vermilion County Health Department's Ordinance Governing Food Service Sanitation requires the issuance of permits to operate and carry out inspections of food service establishments, retail food stores and temporary food service establishments. This ordinance currently covers all areas of Vermilion County except the area within the corporate limits of the City of Danville. The Vermilion County Health Department and the City of Danville did, on March 14, 1991 enter into an intergovernmental agreement. The agreement stipulates that the Vermilion County Health Department staff will assist in training the city's food service and sanitation inspectors. The agreement also allows food service sanitation inspectors to assist each other as needed in case of large special festivals or emergencies such as food borne illness outbreaks.

#### Types and Number of Food Service Establishment Permits Issued:

| Catering services Institutions Taverns without food services Restaurants & taverns with food services Retail food stores and delicatessens Schools Mobile Units Temporary food service establishments Totals | 1992 | 1993        | 1994        |
|--|------|-------------|-------------|
|  | 0    | 1           | 2           |
|  | 0    | 5           | 6           |
|  | 33   | 38          | 33          |
|  | 123  | 116         | 112         |
|  | 61   | 62          | 66          |
|  | 29   | 29          | 32          |
|  | 15   | 14          | 13          |
|  | 265  | 274         | 265         |
|  | 526  | 539         | 529         |
| Food Service Sanitation Activities   |      |             |             |
|  | 1992 | <u>1993</u> | <u>1994</u> |
| Field investigations Compliance inspections Samples collected Food service permits issued Adulterated food and food borne  | 91   | 52          | 48          |
|  | 926  | 965         | 831         |
|  | 103  | 1           | 40          |
|  | 526  | 539         | 529         |
| illness complaints Office, field, & telephone conferences Official correspondence  | 43   | 28          | 238         |
|  | 3637 | 3812        | 4445        |
|  | 918  | 991         | 1531        |

#### Potable Water Supplies

Totals

The object of this program is to eliminate disease transmission and chemical poisons or adulterants through the provision of a safe, potable and adequate supply of water for drinking, culinary and sanitary purposes for every individual in Vermilion County.

6288

The Vermilion County Health Department is achieving this objective in part by enforcing the Ordinance Governing Potable Water Wells and Water Supplies in Vermilion County. The ordinance and an agreement with the Illinois Department of Public Health empowers the Vermilion County Health Department to issue permits for the installation of all new water wells, inspect the installation of the wells and pumps to ensure they meet code requirements, inspect and collect water samples from non-community water supplies, and ensure that all abandoned wells are properly sealed.

The environmental health staff also collects samples and inspects private water supplies on request of Vermilion County residents. The water samples are sent to the Illinois Department of Public Health laboratory in Springfield, Illinois for analysis. The sanitarian interprets the analysis of the water sample and reports the condition of the water in the sample to the owner of the water supply. If the water in the sample is found to be unacceptable for human consumption, the sanitarian will recommend appropriate corrective action. Of the water supply samples collected in Vermilion County in 1994, 46% were found to be unacceptable for human consumption.

| Potable Water Supply Activities        |      |                  |      |
|--|------|------------------|------|
|  | 1992 | 1993             | 1994 |
| Private water samples submitted        |      | <u></u>          |      |
| for analysis                           | 783  | 775              | 635  |
| Office, field, & telephone conferences | 3338 | 3170             | 3715 |
| Well inspections                       | 545  | 386              | 537  |
| Official correspondence                | 1153 | 1260             | 1443 |
| Well construction permits issued       | 92   | 97               | 116  |
| Abandoned wells: Certified as sealed   | 52   | 72               | 40   |
| TOTALS                                 | 5963 | 5 <del>760</del> | 6486 |

#### Private Sewage Disposal Activities

The objective of this program is to prevent the transmission of disease organism from the improper or inadequate treatment of sewage by providing that all sewage is discharged to a properly designed, constructed and operated sewage disposal system. This objective is being achieved by enforcing the Vermilion County Health Department's Ordinance Governing Private Sewage Disposal. The ordinance authorizes the environmental health staff to order corrections on inadequately treated sewage discharges, issue construction permits for private sewage disposal system, design and size private sewage disposal systems, inspect systems prior to being back-filled to ensure they are constructed properly, and issue licenses to all private sewage disposal contractors and septic tank pumpers.

#### Private Sewage Disposal Activities

|   | 1992 | 1993 | 1994 |
|---|------|------|------|
| Construction permits issued                 | 238  | 245  | 276  |
| Contractor's licenses issued                | 39   | 41   | 44   |
| Onsite compliance & enforcement inspections | 1611 | 1458 | 1560 |
| Office, field & telephone conferences       | 6364 | 6555 | 6451 |
| Official correspondence                     | 570  | 607  | 888  |
| TOTALS                                      | 8822 | 8906 | 9219 |

#### Vector Prevention and Pest Control

The goal of this program is to prevent and control the transmission of disease, the adulteration of food products, infestation of structures and other problems associated with insect and rodent infestations. The environmental health staff investigates complaints of insect and rodent infestation and orders corrections or recommends corrective measures in situations which may adversely affect public health.

#### Vector Prevention and Pest Control Activities

| Field investigations   | <u>1992</u><br>6     | $\frac{1993}{16}$     | 199 <u>4</u><br>9 |
|--|----------------------|-----------------------|-------------------|
| Office, field, and telephone conferences<br>and consultations<br>Official Correspondence<br>Totals | 83<br><u>7</u><br>95 | $106$ $\frac{5}{127}$ | 66<br>9<br>84     |

#### Housing Program

The goal of this program is to eliminate safety hazards and transmission of disease through the control of abondoned and structurally damaged buildings. The Vermilion County Health Department does not have a housing ordinance at this time, but the environmental health staff enforces sections of the Vermilion County Ordinance Governing Solid Waste Disposal that deals with fire

damaged or abandoned structures. The environmental health staff also conducts home loan inspections on request from mortgage companies, state and federal agencies, realtors and individuals buying or selling a home. The home loan inspections are conducted on properties that are in the process of changing ownership and consists of an inspection of the water supply and sewage disposal system that services the property. The sanitarian conducting the inspection determines if the water supply is safe and if the sewage disposal system is adequate and functioning properly. Effective January 1, 1993, the Illinois Department of Public Health discontinued the service of analyzing water samples collected during home loan inspections. A water testing fee of \$25 per test was established to cover the cost of having the samples analyzed by a private laboratory.

#### Housing Program Activities

|                               | 1992 | 1993 | 1994 |
|-------------------------------|------|------|------|
| Home loan inspections         | 286  | 250  | 236  |
| Field investigations          | 68   | 51   | 63   |
| Office, field & telephone     |      |      |      |
| conferences and consultations | 547  | 504  | 586  |
| Official correspondence       | 99   | 74   | 121  |
| Totals                        | 1000 | 879  | 1006 |

#### Solid Waste

The object of this program is to eliminate the transmission of disease organisms which can result from the improper or inadequate handling and disposal of garbage and other solid wastes. This objective is being achieved by the enforcement of the Vermilion County Health Department's Ordinance Governing Solid Waste Disposal. On June 1, 1993, the Vermilion County Health Department entered into an agreement with the Illinois Environmental Protection Agency to have The Vermilion County Health Department environmental health staff conduct inspections of licensed sanitary landfills. This agreement also requires The Vermilion County Health Department staff to investigate all complaints dealing with illegal landfills, illegal dumping, and other violations of the Illinois Environmental Protection Act dealing with The Solid Waste Management Plan for Vermilion County was solid waste. finalized and approved in 1994. The Solid Waste Management Plan gives Vermilion County a countywide cohesive plan to recycle 25% of the solid waste generated in Vermilion County by 2000. The plan will be implemented by a recycling coordinator who will be hired in 1995.

#### Solid Waste Activities

|                               | 1992            | 1993 | 1994 |
|-------------------------------|-----------------|------|------|
| Licenses issued               | 144             | 142  | 181  |
| Field investigations          | 619             | 459  | 629  |
| Office, field & telephone     |                 |      |      |
| conferences and consultations | 1806            | 1416 | 2032 |
| Official correspondence       | 336             | 345  | _683 |
| Totals                        | <del>2905</del> | 2362 | 3525 |

#### Nuisance Control

The goal of this program is to eliminate the transmission of disease and preserve the safety, comfort and enjoyment of life through the control of public health nuisance conditions. The objectives of this program are being achieved by the enforcement of the Vermilion County Health Department's Ordinance Governing Solid Waste Disposal and applicable state statutes. We are currently involved in the process of drafting a separate nuisance control ordinance for County Board consideration in 1995.

# Nuisance Control Activities 1992 1993 1994 Field investigations 66 129 18 Office, field & telephone 346 535 139 Official correspondence 14 78 9 TOTALS 426 742 166

Note: The number of nuisance control activities was reduced in 1994 as the result of placing the tanning facilities regulations activities into its own program.

#### Lead Poisoning Prevention

In June of 1993, the Vermilion County Health Department entered into an agreement with the Illinois Department of Public Health allowing the Vermilion County Health Department staff to conduct investigations and enforce the Lead Poisoning Prevention Act. The home, work area and general environment of individuals who are reported to have a high blood lead level are investigated. The environmental factors that contribute to the elevated blood lead level are located and ordered to be removed or contained. The Environmental Health staff works closely with staff from WIC and Healthy Moms/Healthy Kids in this program.

100/

#### Lead Poisoning Prevention Activities

|   | 1224 |
|---|------|
| Field Investigations                    | 53   |
|   | 11   |
| Number of sites investigated            | ·    |
| Samples collected                       | 42   |
|   | 330  |
| Office, field and telephone conferences |      |
| Official correspondence                 | 192  |
|   | 636  |
| Total                                   | 636  |

#### Tanning Facilities Regulation

On April 14, 1993, the Vermilion County Health Department entered into an agreement with the Illinois Department of Public Health to have the Vermilion County Health Department staff conduct inspections and enforce the Tanning Facilities Permit Act and the Tanning Facilities Code. The inspector investigates establishments that offer tanning devices to the public to assure that they are in compliance with the Code and the Act. In 1994 there were 36 establishments in Vermilion County that had tanning devices. On June 2, 1993, the Vermilion County Health Department entered into an agreement with the Illinois Department of Public Health to conduct the tanning establishment inspections in Edgar County and Coles County.

#### Tanning Facilities Activities

|   | 1994           |
|---|----------------|
| Field investigations                    | 100            |
| Office, field and telephone conferences | 374            |
| Official correspondence                 | 78             |
| Total                                   | <del>552</del> |

#### General Environmental Health

The primary focus of this category is hazardous waste disposal problems and hazardous or toxic waste accidents. These activities require working closely with the Illinois Environmental Protection Agency and the Emergency Services and Disaster Agency.

#### General Environmental Health Activities

|                               | 1992 | 1993              | 1994 |
|-------------------------------|------|-------------------|------|
| Field investigations          | 57   | 49                | 32   |
| Office, field, and telephone  |      |                   |      |
| conferences and consultations | 986  | 1344              | 1276 |
| Official correspondence       | 68   | 181               | 32   |
| TOTALS                        | 1111 | $\overline{1574}$ | 1340 |

#### Health Promotion and Health Education

The Vermilion County Health Department now employs a health educator who works in all program areas. We also must rely on the professional employees who staff specific program areas and the administrative staff of the agency to perform public health promotion and education activities. The staff of the Vermilion County Health Department provides public health education and promotional presentations throughout Vermilion County upon request.

#### 1994 General Health Promotion and Community Education Activities\*

| Program                  | Staff                                  | Type of<br>Presentation   | Number of<br>Presentations | Persons<br>Attending |
|--------------------------|--|---------------------------|----------------------------|----------------------|
| VCHD Overview            | Administrator and<br>Supervising Nurse | All Programs/<br>Services | 4                          | 70                   |
| Communicable<br>Diseases | RN Coordinator                         | General                   | 6                          | 99                   |
| Environmental<br>Health  | Director & Staff                       | All Programs/<br>Services | 5                          | 240                  |
| Totals                   |  |                           | 15                         | 240<br>409           |

<sup>\*</sup>Community education activities reported within preceding specific program service statistics are not duplicated on this table.

#### SUMMARY OF 28th ANNUAL REPORT

The total number reported above is actually incomplete because it does not include some activities such as office consultations for information and referral and field conferences which are provided in conjunction with all of our service programs. It also does not include many administrative and organizational support activities which are not documented as separate service activities.

PLEASE NOTE THAT THE 1994 ACTIVITIES AND SERVICES TOTAL OF 190,286 REPRESENTS AN INCREASE OF 30,466 REPORTED UNITS OF SERVICE OR 19.1% OVER THE 159,820 UNITS OF SERVICE REPORTED FOR 1993.

Approximately 36,000 client visits were made to either the Vermilion County Health Department offices located in the County Services Building, the satellite clinic at 101 W. North Street, Danville, Illinois or the Hoopeston satellite clinic located at 841 East Orange Street to receive clinical or educational services. This total does not include some service traffic because we do not have an effective method of recording this traffic and many clients bring other persons with them. This approximate total does not include service traffic related to the distribution of WIC food instruments, vital records and public information and referral traffic.

......

| Estimated total client visits for clinical or educational services | 36000 |
|--|-------|
| Estimated average number of client visits per month to receive     |       |
| clinical or educational services                                   | 3000  |
| Estimated average number of visits per month for other reasons     | 1500  |
| Estimated total monthly service traffic (at all 3 office sites)    | 4500  |

#### 1994

#### Vermilion County Community Health Plan

#### **Executive Summary**

The purpose of the Vermilion county Community Health Plan was to conduct a systematic strategic planning process utilizing a comprehensive communitybased, public health needs assessment. We initiated this planning effort to achieve compliance with Illinois Department of Public Health rules, Title 77: Part 600, Certified Local Health Department Code, Section 600.400: Public Health Practice Standards. Our Community Health Committee did the health needs assessment, utilizing the IPLAN Data System and their collective perceptions to identify and prioritize health problems which should be the focus of intensive community-wide efforts to improve the health status of Vermilion County, Illinois. The Vermilion County Board of Health is committed to using this strategic plan as a tool to guide staff resource development and allocation, as well as a guideline for developing community-wide collaborative efforts to achieve its objectives.

The Vermilion County Community Health Plan was prepared by the Community Health Committee which was composed of one member of the Board of Health, employees of the Vermilion County Health Department and twelve other persons representing various community organizations, agencies or constituencies. The members of the Community health Committee received the numerous documents to provide a foundation for future deliberations and required planning activities, as follows:

- The IPLAN Data System Summary Report for Vermilion county The Vermilion County IPLAN Indicator Assessment Worksheet
- The IPLAN Summary Sheet for Vermilion County
- Definitions from the IPLAN manual for a health problem, risk factor, direct contributing factor and indirect contributing factor.

Even though the IPLAN data was only available for one year, 1990, the CHC recognized the significance of many IPLAN indicators as either primary indicators or as being indicative of direct or indirect contributing factors in Vermilion County. The IPLAN indicators with the most direct relationship to the three community health problems selected as the highest priority are listed below:

#### Data Group: Chronic Diseases (rates per 100,000)

|  | Vermilion   | Illinois                | U.S. | Year 2000 |
|--|---|-------------------------|------|-----------|
| Premature (<                             | Coronary Heart Disease<br>65) 63.2 (47 events)<br>Illinois 1:1.35   | Mortality Rates<br>46.9 | N/A  | N/A       |
| Data Group: Indicator: Total Risk Ratios | Infectious Diseases ( Reported Incidence of 361.4(319 cases) Illinois 1:2.77 U.S. 1:1.20 Year 2000 1:1.61 | Gonorrhea               | 300  | 225       |

| M&F Age 15-19<br>Risk Ratios   | 2062.9(128<br>Illinois<br>U.S.<br>Year 2000 | 1:3.11<br>1:1.84 | 662.3  | 1123 | 750 |
|--------------------------------|---|------------------|--------|------|-----|
| Women Age 15-44<br>Risk Ratios | 983.5(181<br>Illinois<br>U.S.<br>Year 2000  | 1:3.79<br>1:1.96 | 259.6  | 501  | 290 |
| Indicator: Repo                | rt Inciden                                  | ce of Chla       | amydia |      |     |
| Total<br>Risk Ratios           | 225.5(199<br>Illinois<br>U.S.<br>Year 2000  | 1:2.09<br>1:1.05 | 108.0  | 215  | 170 |

#### Data Group: Maternal and Child indicators

Indicator: Founded Child Abuse Cases (rate per 1,000)
Children (0-17) 17.7(406 cases) 12.7 N/A N/A
Risk Ratio Illinois 1:1.39

Each of the indicators listed immediately above was perceived and accepted by the CHC as a primary indicator of a significant community health problem. All of them exceeded the standard North Carolina Rule risk ratio of 1:1.2 when compared to the Illinois rates.

After all of the data was reviewed and discussed during five meetings, the Community Health Committee selected Coronary Heart Disease, Sexually Transmitted Diseases, and Child Abuse as the three highest priority community health problems. The priority statement, outcome objective(s), and impact objective (s) for each of our three highest priority community health problems are listed below:

## (1) Priority Statement REDUCE THE RATE OF PREMATURE DEATH (<65 YEARS) FROM CORONARY HEART DISEASE.

Outcome Objective
REDUCE THE RATE OF PREMATURE DEATH DUE TO CORONARY HEART DISEASE TO NO MORE
THAN 60.1% PER 100,000 BY 1999. (BASELINE: 63.1% VERMILION COUNTY, 1990)

Impact Objectives
Reduce cigarette smoking to a prevalence of no more than 20% among people age
20 and older by 1999. (Baseline: 25.4% Vermilion county 1990)

Reduce the initiation of smoking to no more than 15% by age 20 by 1999. (Baseline: 42.2 lifetime; 33.1 past year; 25.3 past month through 12th grade, Illinois 1993).

Increase to at least 50% the proportion of people whose blood pressure is under control by 1999. (Baseline: 11% controlled among population age 18-74 in (1976-1980). Elimated 24% among young people age 18 and older (1982-1984).

Increase to at least 90% by 1999 the proportion of people with high blood pressure who are taking action to control their blood pressure. (Baseline: 79% are aware of hypertension; Age 18 and older who are taking action to control blood pressure (1988).

Increase to at least 50% the proportion of adults with high blood cholesterol who are aware of their condition and are taking action to reduce their blood cholesterol to recommended level by 1999. (Baseline:30% 1987 (Healthy People 2000)).

#### (2) Priority Statement

REDUCE THE INCIDENCE OF SEXUALLY TRANSMITTED DISEASES

#### Outcome Objective

REDUCE THE INCIDENT OF CHLAMYDIA TO NO MORE THAN 168.83 PER 100,000 BY 1999. (BASELINE: 225.1 TOTAL; 848.9 BLACK; 165.7 WHITE, VERMILION COUNTY, 1990)

#### Impact Objectives

Reduce the proportion of adolescents who engage in sexual intercourse to no more than 15% by age 15 and no more than 40% by age 17 by 1999. (Baseline: 27% of girls and 33% of boys by age 15; 50% of girls and 66% of boys by age 17, 1988.

Increase to at least 40% the proportion of sexually active unmarried people who used a condom during their last act of sexual intercourse by 1999. (Baseline: 19% of sexually active unmarried women age 15-44 reported that their partners used condoms at last sexual intercourse (1988).

#### Outcome Objective

(2) REDUCE THE INCIDENCE OF GONORRHEA TO NO MORE THAN 271.05 PER 100,000. (BASELINE: 361.4 TOTAL; 2062.9 ADOLESCENTS; 3091.3 BLACK; 94.1 WHITE; 983.5 WOMEN, AGE 15.44, VERMILION COUNTY, 1990).

#### Impact Objectives

Reduce the proportion of adolescents who engage in sexual intercourse to no more than 15% by age 15 and no more than 40% by age 17 by 1999. (Baseline: 27% of girls and 33% of boys by age 15; 50% of girls and 66% of boys by age 17 (1988).

Increase to at least 40% the proportion of sexually active unmarried people who used a condom at last sexual intercourse by 1999. (Baseline: 19% of sexually active unmarried women age 15-44 reported that their partners used condoms at last sexual intercourse (1988).

#### (3) Priority Statement

Reduce the Excessive Incidence of Child Abuse (Physical, Emotional, Sexual, and Neglect)

#### Outcome Objective

REDUCE THE INCIDENCE OF MALTREATMENT OF CHILDREN YOUNGER THAN 18 TO LESS THAN 17.7 PER 100,000 BY 1999. (BASELINE: 17.7 VERMILION COUNTY; 12.7 STATE).

#### Impact Objectives

Reduce hospitalizations for Alcohol Dependence Syndrome to less than 374.5 in people age 15-44 and to less than 154.8 in people ages 45-64 by 1999. (Baseline: 416.1 age 15-44 (1990); 160.9 age 45-64 (1990).

Increase the proportion of people age 14 and older who recognize the stages of child development and what constitutes child abuse by 1999.

Reduce the high school dropout rate to at least 4.96 by 1999. (Baseline: 5.838 1992-1993 Vermilion County).

The Vermilion County Board of Health approved the Community Health Plan on June 21, 1994 and it was subsequently submitted to the Illinois Department of Public Health for certification review and comments. This plan will be utilized by both the Board of Health and the staff of the Vermilion County Health Department to guide staff resource development and allocation, as well as, a guideline for developing community-wide collaborative efforts to achieve its objectives.

### VERMILION COUNTY HEALTH DEPARTMENT FINANCIAL STATEMENT December 1, 1993 - November 30, 1994

| BEGINNING BALANCE:   |   | \$ 179,015                |
|--|---|---------------------------|
| RECEIPTS:  |   |                           |
| Illinois Department of Public Health:    Aids/Education Counseling    Local Health Protection Grant    Cardiovascular Grant    Combined Family Planning    Health Moms/ Healthy Kids    Immunization Initiative    Childhood Lead Poisoning    Public Health Information Network    Preventive Health Services    Tanning    Title XX/Health Support    Vision and Hearing Grant    Private Water Wells    Women, Infants, and Children  East Central Illinois Area on Aging    Department of Children and Family Services    Illinois Department on Aging    Solid Waste Management Grant    Title XIX Fee for Service/Medicaid    VNA-United Way    Public Safety Building Commission Jail Nursing    Tax Levy    Interest    Fees | \$ 12,362<br>161,367<br>6,540<br>141,272<br>706,412<br>740<br>4,614<br>228<br>7,036<br>4,200<br>1,440<br>4,904<br>1,470<br>297,815<br>1,424<br>86,351<br>62,925<br>9,120<br>27,384<br>22,000<br>21,400<br>136,989<br>3,159<br>278,875 |                           |
| TOTAL RECEIPTS 12/1/93-11/30/94 TOTAL RECEIPTS PLUS BEGINNING BALANCE  |   | \$2,000,027<br>2,179,042  |
| EXPENDITURES: Salaries Supplies Travel Communications Postage Contractual Rent Maintenance/Repair Equipment  | \$1,346,897<br>127,502<br>64,524<br>14,694<br>10,353<br>344,280<br>53,456<br>4,924<br>25,667  |                           |
| TOTAL EXPENDITURES:<br>BALANCE NOVEMBER 30, 1994   |   | \$1,992,297<br>\$ 186,745 |

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