

DEKALB COUNTY BOARD OF HEALTH MEETING
MEETING MINUTES
DATE: January 23, 2024

BOARD OF HEALTH MEMBERS PRESENT

Derryl Block, RN, PhD
Kellen Bosma, DMD
Lorraine Daly, Secretary
Carlos Dominguez, DVM
Karen Federici
Kimberly Heinisch
Mark Mattson, Vice President
Jill Olson
Michael Thornton, MD
Anita Zurbrugg, President

BOARD OF HEALTH MEMBERS ABSENT

Rukisha Crawford

STAFF MEMBERS PRESENT

Lisa Gonzalez, MPH, *Public Health Administrator*
Melissa Edwards, MPH, *Director of Health Promotion and Emergency Preparedness*
Greg Maurice, LEHP, *Director of Health Protection*
Adriana Milan, MPA, *Director of Administrative Services*
Erin Frye, MPH, *Administrative Support and Marketing Manager*

CALL TO ORDER

The DeKalb County Board of Health meeting of January 23rd, 2024 was called to order at 6:00pm by Ms. Zurbrugg, President.

AGENDA

On a motion by Ms. Olson, seconded by Dr. Federici, the Board of Health Meeting Agenda of January 23, 2024 was approved. Motion carried.

INTRODUCTION OF NEW BOARD OF HEALTH MEMBERS

APPROVAL OF MINUTES

Full Board

On a motion by Mr. Mattson seconded by Dr. Block, the Board of Health Meeting Minutes for November 28, 2023 were approved. Motion carried.

COMMITTEE REPORTS

PERSONS TO BE HEARD FROM THE FLOOR

None.

PRESENTATION

1. Illinois Project for Local Assessment of Need (IPLAN)

Mrs. Gonzalez shared the Illinois Department of Public Health (IDPH) requires a Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) be completed every five years for certified local public health departments. She explained the completion of a CHNA and CHIP fulfill the requirements of the Illinois Joint Committee on Rules for certification for local public health departments by the IDPH.

Mrs. Gonzalez stated the Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning model adapted from the National Association of County and City Health Officials' Assessment Protocol for Excellence in Public Health (APEXPH). Mrs. Gonzalez explained the IPLAN was designed to identify community health problems and propose solutions through a comprehensive and ongoing planning process and it is unique in that the community directs the decision-making under the guidance and leadership of the local health department (LHD). She stated the IPLAN process results in a five-year community health plan, created at the local level, that addresses a minimum of three health priorities, with time-referenced and measurable outcome and impact objectives with appropriate intervention strategies.

Mrs. Gonzalez shared Northwestern Medicine Kishwaukee and Valley West hospitals' Community Benefit requirement addresses health services in our communities, responds to community needs with programs that increase access to health care and improves the health of our communities, complies with State and Federal requirements and serves as a strategic vision and plan for the hospitals programs and services.

Mrs. Gonzalez explained a CHNA is required by provisions of the Patient Protection and Affordable Care Act for the hospitals and by the Illinois Administrative Code Section 600.400 for DeKalb County Health Department to maintain local health department certification.

Mrs. Gonzalez stated Legacy KishHealth System partnered with DeKalb County Health Department in 2012 to conduct the Community Health Needs Assessment and Northwestern Medicine Kishwaukee and Valley West Hospitals completed CHNAs again in 2015. She shared a joint CHNA process was completed in August of 2018 and the most recent joint process began in late 2023 with completion of the CHNA process anticipated by mid-July of 2024.

Mrs. Gonzalez reviewed the 2017-2022 IPLAN Priorities for DeKalb County which included adolescent health, behavioral health, and maternal and child health.

Mrs. Gonzalez shared the Assessment Protocol for Excellence in Public Health (APEX-PH) model components include an Organizational Capacity Assessment, the Community Process and Completing the Cycle. She explained the Community Process is the collection and analysis of community health status and opinion data and development of an action plan with goals and

objectives. She shared Completing the Cycle is the development of an implementation plan and evaluation plan. She explained the benefits of APEXPH include an increased understanding of the community's actual and perceived health problems, strengthened relationships with community partners and community recognition of the role of LHD's in public health.

Mrs. Gonzalez shared the components of the IPLAN which includes (1) an Organizational Capacity Assessment, (2) a Community Health Needs Assessment (CHNA) and (3) a Community Health Improvement Plan (CHIP).

Mrs. Gonzalez explained the Organizational Capacity Assessment consists of a self-assessment or internal review of the LHD's capacity to provide public health functions and assists the LHD in creating an organizational plan for improvement. She shared acceptable alternatives to the self-assessment includes an organizational strategic plan, NACCHO's Operational Definition of Functional Health Department or the CDC's National Public Health Performance Standards program assessment. She shared a copy of the Organizational Capacity Assessment, in whichever format is chosen, must be kept on file for review by the Regional Health Officer.

Mrs. Gonzalez stated the CHNA begins with an analysis of data to identify community health problems for the total population and substantial minority populations. Mrs. Gonzalez stated the required data categories are (1) demographic and socioeconomic characteristics, (2) general health and access to care, (3) maternal and child health, (4) infectious disease, (5) chronic disease, (6) environment/occupation/injury control and (7) sentinel events. She shared the next step of the CHNA is the establishment of a process for community involvement and participation, using a modified version of APEXPH, Part II, as a guide. She explained the final portion of the CHNA is the identification of priority health problems from the findings.

Mrs. Gonzalez explained the CHIP is a report containing an analysis of risk factors, contributing factors and community resources available to address the identified health problems and establishment of measurable health objectives and intervention strategies to correct the problems. She shared adoption of the CHIP by the local Board of Health is an IPLAN requirement.

Mrs. Gonzalez provided an overview of the 2022-2027 IPLAN activities to date. She shared the CHNA/IPLAN planning group has been convening since August 2023 to establish the timeline for CHNA/IPLAN completion, approve the community survey questionnaire and strategy for distribution and determine comprehensive list of key stakeholders to participate in the CEC, focus groups and individual key informant interviews. She shared the CHNA survey questionnaire was released publicly beginning October 2nd, 2023 and will remain open through January 2024.

Mrs. Gonzalez provided an overview of next steps in the IPLAN process. She shared in January and February 2024 community focus groups will take place with key stakeholders across four subject areas including (1) Maternal and Child Health, (2) Adolescent Health, (3) Adult and Senior Health and (4) Behavioral Health and Substance Abuse. She stated key informant interviews will also take place in this time period to gather additional information about community strengths, health needs, underlying root causes of health needs, COVID-19 impacts, solutions to identified health needs and communication strategies.

Mrs. Gonzalez explained the Community Engagement Council (CEC) will meet in March for an overview of the CEC and the CHNA process and delve into emerging data findings from the community survey, focus groups and key informant interviews. She shared the CEC will meet again in April to continue data discussion and participate in a prioritization process to narrow down the top two-to-three priority health needs. Finally, Mrs. Gonzalez informed the Board of Health that the IPLAN must be reviewed and approved by the Board of Health and submitted to the IDPH no later than July 17, 2024.

Dr. Block asked how the CHNA survey had been disseminated to the public. Mrs. Gonzalez explained that Northwestern Medicine procured email distribution lists of individuals in the Kishwaukee and Valley West service areas to distribute the survey to. She shared the Health Department promoted the survey on-site, via online, bus and movie theatre ads, through local Chambers of Commerce, and through the Health Department's e-newsletter.

COMBINED REPORT

Mrs. Gonzalez offered to answer or clarify any questions regarding the combined report included in the Board of Health packets. No questions were posed.

FINANCIAL DATA

On a motion by Dr. Thornton, seconded by Ms. Daly, the Financial Statements for the months of November and December 2023 were approved. Motion carried.

On a motion by Dr. Federici, seconded by Ms. Daly, the Claims for the months of December 2023 and January 2024 were approved. Motion carried.

OLD BUSINESS

NEW BUSINESS

1. Appointment of Standing Committees for 2024

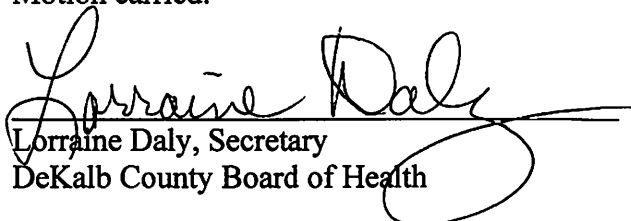
Mrs. Gonzalez shared the 2023 standing committee appointment for Board of Health members for the executive, finance, nominating, and personnel committees.

EXECUTIVE SESSION

CORRESPONDENCE AND NEWS

ADJOURNMENT

On a motion by Ms. Olson, seconded by Dr. Bosma, the Board of Health adjourned at 6:35pm. Motion carried.


Lorraine Daly, Secretary
DeKalb County Board of Health