



# ILLINOIS ASSOCIATION OF BOARDS OF HEALTH



## The Bugle Call

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MARCH 2009

*Fifty-third Edition*

## ILLINOIS PUBLIC HEALTH ASSOCIATION'S 68<sup>th</sup> ANNUAL MEETING

### *Public Health in Peril:*

#### *The Call to Action*



IPHA will meet at the Indian Lakes Resort in Bloomington, April 28-30.

Joining as sponsors are the Northern Illinois Public Health Consortium and the Illinois Association of Public Health Administrators.

IPHA's President Richard H. Sewell, MPH, said, "This year's theme will emphasize the value of public health advocacy in strengthening the public health infrastructure."

The program content will focus on the intersection of citizen advocacy with organizational advocacy as a method to redefine broad support for the public health infrastructure.

Over the past several years, important public health programs have been significantly under funded—underscoring the need to develop a new collaborative effort with our partners in public health.

Our goal is to develop a coordinated advocacy effort to inform the Illinois legislature about the success of adequately funded public health programs in an effort to restore and increase funding in this critical area.

### **Agenda**

#### **Preconferences Tuesday April 28**

- Behavioral Health
- Nursing Summit
- Youth Violence Prevention
- Elder Abuse and Neglect
- Environmental Health

#### **Wednesday, April 29**

- Yoga
- Poster Presentations
- Exhibits
- Opening Plenary
- Concurrent Sessions
- President's Reception

### **Thursday, April 30**

- Section Meetings
- Business Meeting and Awards Breakfast
- Closing Plenary

For more information and registration forms visit [www.ipha.com](http://www.ipha.com) or telephone IPHA at 217-522-5687

### **ILLINOIS ASSOCIATION OF BOARDS OF HEALTH**

#### **Officers 2008-2009**

**President:** Margaret Leonard,  
*Macon County*

**President Elect:** Inara McGroarty,  
*Winnebago County*

**Past President:** Jan Allen,  
*St. Clair County*

**Secretary:** Annie P. Clark,  
*St. Clair County*

**Treasurer:** Kent Scheibel,  
*Madison County*

### **ACCREDITATION FOR HEALTH DEPARTMENTS**

For some time there has been an interest in the idea that health departments might go through a process that would award them a status of accreditation. If such a process existed, it could assure the public that a health department had standing as well-qualified to provide excellent public health services.

In August 2005 a workgroup consisting of public health experts was formed to explore the feasibility of local public health department accreditation.

## President's Message....

### Greetings from the President!

We begin a new year with a new national Administration, and, as always, health care remains in the spotlight. Hopefully, in the coming years we can continue to improve and advance all aspects of health care and many thanks to all who work tirelessly toward this end.

There are always many conferences and work shops to attend. The following two are aimed at the health crisis: IPHA 68<sup>th</sup> Annual Meeting-PUBLIC HEALTH IN PERIL: THE CALL TO ACTION to be held April 28-30, 2009, at the Indian Lakes Resort and Conference Center in Bloomingdale, Illinois; NALBOH 17<sup>th</sup> Annual Conference-IMPROVING PUBLIC HEALTH THROUGH LEADERSHIP AND KNOWLEDGE to be held in Philadelphia, PA, July 1-3, 2009.

Our spring meeting will be held at 7:00 a.m. on Wednesday April 29, at the IPHA Annual Meeting in Bloomingdale.

I would like to congratulate Jan Allen on her election to the NALBOH Board of Directors. Jan is the new West Great Lakes Director.

Have a good year!

*Margaret Leonard*

### Accreditation continued from page 1

One of the first steps was to obtain feedback from the public health community. Because there was a high level of interest, the Public Health Accreditation Board (PHAB) was formed in May 2007.

Some of the benefits of accreditation are thought to be:

- Promoting high performance and continuous quality improvement;
- Recognizing high performers that meet nationally accepted standards of quality;
- Clarifying the public's expectations of state, tribal, territorial, and local health departments;
- Increasing visibility and public awareness of governmental public health.

### THE PUBLIC HEALTH PERFORMANCE STANDARDS PROGRAM

The (NPHSP) is a self-assessment tool designed to measure infrastructure and capacity of public health systems. It also provides benefits such as:



- Developing a benchmark for public health practice improvement;
- Gathering scientific, systematic data about the public health system;
- Providing information for policy development;
- Assisting public health systems to develop performance improvement plans that address deficiencies revealed through the assessment process.

To learn more about this process visit the Centers for Disease Control and Prevention (CDC) website ([www.cdc.gov](http://www.cdc.gov)) or the National Association of Local Boards of Health, website ([www.nalboh.org](http://www.nalboh.org)).


(Based on an article in the NALBOH News Brief, 3<sup>rd</sup> Quarter, 2008, Volume 15, Issue 3)

- Assisting public health systems to develop performance improvement plans that address deficiencies revealed through the assessment process.



**Please note that all letters, problems, and articles you wish to appear in the June issue should be sent to Carolyn Chapman at 5 North 75<sup>th</sup> St., Belleville, IL 62223 by May 11, 2009.**



# ILLINOIS ASSOCIATION OF BOARDS OF HEALTH POSITION PAPER

## The Public Health Practitioner Certification Board

### Introduction

The Public Health Practitioner Certification Board, Inc. (PHPCB) is committed to building a workforce recognized for its high standards by offering competency-based certification to public health practitioners. The competencies are consistent with the national competency formulations supported by the Centers for Disease Control and Prevention. Illinois has the only competency-based certification program of its kind in the nation.

### Brief Background

The origin of this program goes back to the late 1980's with the emerging interest in issues related to performance standards and competency of the public health workforce. During this time the boards of health identified the need for some type of certification process for public health administrators.

This was incorporated into recommendations included in the 1990 Illinois Public Health Improvement Plan. A study group representing statewide organizations that included the Illinois Association of Boards of Health (IALBOH); the Illinois Association of Public Health Administrators (IAPHA); the Illinois Department of Public Health (IDPH); and the University of Illinois at Chicago's School of Public Health collaborated in an effort that ultimately resulted in the development of a credentialing program.

The independent credentialing body, made up of representative from IALBOH, Illinois Public Health Association (IPHA), and IAPHA designed a review process that applies competency standards to an individual's demonstrated practice as well as their education and training activities. The program targets public health managers and administrators in all settings.

The PHPCB began accepting applications for certification of public health administrators from Illinois in 2000. Since then, individuals from other states (FL, IA, IN, MD, MA, MN, MO, NH, and OH) have also submitted applications.

In 2003, IDPH began implementing capacity building activities related to emergency preparedness and response, and the PHPCB was asked to develop a program to certify emergency response coordinators. As a result, PHPCB expanded its mission to consider further development of competency-based certification for other occupational categories among public health practitioners.

In a 2006 survey, certified individuals noted that they applied for the credential because they were committed to lifetime learning, valued the credential that demonstrated their competencies in public health, and appreciated receiving credit for their continuing education.

### Statement of the Illinois Association of (Local)

### Boards of Health

On October 7, 2008, IALBOH unanimously agreed to endorse the PHPCB's efforts to establish and maintain high public health standards. IALBOH recognizes the value of certification standards in their tasks of hiring public health directors and administrators, as well as in hiring other public health practitioners.

IALBOH is committed to building a workforce that is recognized both statewide and nationally for competency-based preparation, and therefore goes on record to strongly support the PHPCB program.



## **RURAL ILLINOIS HEALTH DEPARTMENTS ON BRINK OF CLOSING**

The Southern Seven Health Department serves seven counties in rural southern Illinois. This single department that serves a population scattered over many miles needs to deal with many challenges. One such challenge is the difficulty of providing public health to a widespread area in a region that has many economic problems. Just the distances that must be covered by poor people without adequate transportation or else by a staff without much in the way of resources can be overwhelming.

During the past year those challenges have increased due to the gridlock between the governor and the legislature. Another issue is the difficult financial situation of the state—a budget that has been out of balance and a treasury that is deeply in debt.

Nancy Holt, Administrator of the Southern Seven Health Department, said, “Although when the crisis was at its worst back in November, and it looked like we actually might have to shut down four of the seven clinic sites, we did receive funds at the last minute and were able to keep all sites open and operating.”

The situation was still desperate. Holt continued, “Since that time, we have had to lay off 26 staff (out of 60) for a period of six to eight weeks. Staff has, for the most part, been very understanding, and at this point we have only lost one staff person. During the layoff periods, we still operated each site and offered services on a scheduled basis. Staff traveled between sites to ensure that all services were offered at all sites at some point during the month. Women, Infant and Children (WIC) staff were not on layoff, and WIC was offered on our regular schedule.”

Concerns for the future remain. Holt continued, “Our health department is very rural, and has a very low tax base. We only receive five percent of our funding from real estate taxes with the rest coming from state grants (92 per cent) and fees (three percent).

“Since we are a stand alone consolidated health department, we pay our own bills and do not rely on the counties to cover any of our expenses. Most of the counties in our health district are struggling with their own budgets and could not lend us any money, anyway.”

Addressing the problems of state funding, Holt pointed out, “When the state stops paying its bills, we have no revenue to cover our expenses, especially when considering that many of our grants are reimbursement grants where you spend the money up front and then bill the state. With little in reserves and no way to borrow money except through anticipation warrants (which, of course, is limited to 85 percent of the amount of real estate taxes you receive) we have few options available to us except to lay off staff when our money stops flowing.”

She observed, “I don’t see any short term or long term viable solution to our budget problems here in Illinois. This makes it very frustrating as an Administrator to plan except week-by-week and month-by-month. I never know what my cash flow will be thirty days from now.”

Such rural health departments as Southern Seven have suffered more than many others, although all face difficulties due to the severe economic downturn of the nation’s economy.

In November last year such health departments found it necessary to plan to stop providing services as their funding began to give out.

There is hope that the planned federal economic stimulus program may happen in time to help rural health departments continue to offer the basic core services of public health.

### **WHITESIDE COUNTY HEALTH DEPARTMENT’S NEW HEALTH CENTER**

Like many other areas, Whiteside County has suffered from the loss of well-paying jobs. The unemployment rate in Whiteside County in June 2008 was 7.4 percent compared to the rate of 5.7 percent in June 2007, according to the Illinois Department of Employment Security. The county also has many low-income families, as well as those who are uninsured. Even those who are insured have such high deductibles (\$5,000) that it’s almost like having no insurance.

These problems led the county’s health department to apply to be a Federally Qualified Health Center (FQHC).

Whiteside County’s experience of having a dental and acute medical care clinic for a number of years helped in the process needed to meet the rigorous federal standards for quality care. As well, the cost to provide such care, was necessary for reimbursement under Medicaid and Medicare law.

“Since the Whiteside County Community Health Clinic opened May 1, 2006, there have been 46,500 total visits that included medical, dental and behavioral health services,” said Beth Fiorini, Executive Director. “More than 18,000 people have benefited from one or more of these programs. Of these patients, 50 percent are on Medicaid, 5 percent are on Medicare, and 34 percent have no insurance or third-party payer of any kind.”

The construction of a medical addition began in April 2008, and the new addition opened for service in October.

There are four Illinois Community Health Centers that follow the model by residing within county public health departments. They are Cass County, Lake County, Whiteside County and Will County. The advantages of co-location of public health and health center services are: 1) primary care and public health preventive services in one location with easy access for patients in need of both; 2) reduced program cost; and 3) maximum efficiency. The two programs have complementary roles.

It was of great help that all players cooperated. It was also an advantage that the plan received outstanding support from area legislators.

Whiteside County Health Department has existed for more than forty years.

*(Excerpted from an article by Spencer Schein, Health Educator at the Whiteside Department in the Fall 2008 IPHA Viewpoint.)*

## SEEKING SOLUTIONS TO GROWING STD RATES:

### *Addressing the High Incidence of Sexually Transmitted Diseases in St. Clair County- Chlamydia and Gonorrhea*

by Brenda Rhodes, R.N., B.S.N. Director of Infectious Disease Prevention Services,  
St. Clair County Health Department

In April, 2008, Kevin Hutchison, Executive Director of the St. Clair County Health Department, issued an invitation to community partners to attend an STD Forum on May 13<sup>th</sup>. The goal was to solicit help in determining strategies to address the growing problem of yearly increases of sexually transmitted diseases among 15 to 29 year olds in the county. Multiple community disciplines were well-represented at the Forum.

Attendees were divided into small groups that gave possible suggestions to address the issues. Based on these suggestions, several recommendations were developed. Community-based programs and presentations targeted specifically to our 15 to 29 year olds, as well as their parents and educational and medical professionals, are needed.

The health department felt that an important problem was the lack of access to care, especially to young males. In our county there were limited resources for treatment, screening and diagnosing sexually transmitted diseases. The disparity has been readily identified. Of interest was the fact that rates of Chlamydia and gonorrhea infections are three and a half times higher for females than rates for males.

In response, the St. Clair County Health Department, in collaboration with the Illinois Department of Public Health's STD Section, joined in partnership with Southern Illinois Healthcare Foundation to establish a medical home for adolescents and young people. This program provides services that are easily accessible.

Clinical services and medical treatment began during 2008 at a storefront in a commercial part of Belleville, the county seat. Although startup numbers have been small as anticipated, visits continue to increase each quarter. Service hours are Monday through Friday, 8:30 AM to 5:00 PM. Clients are seen within twenty-four to forty-eight hours after placing a request for services at a local telephone number. Medical service appointments can be made at the same site:

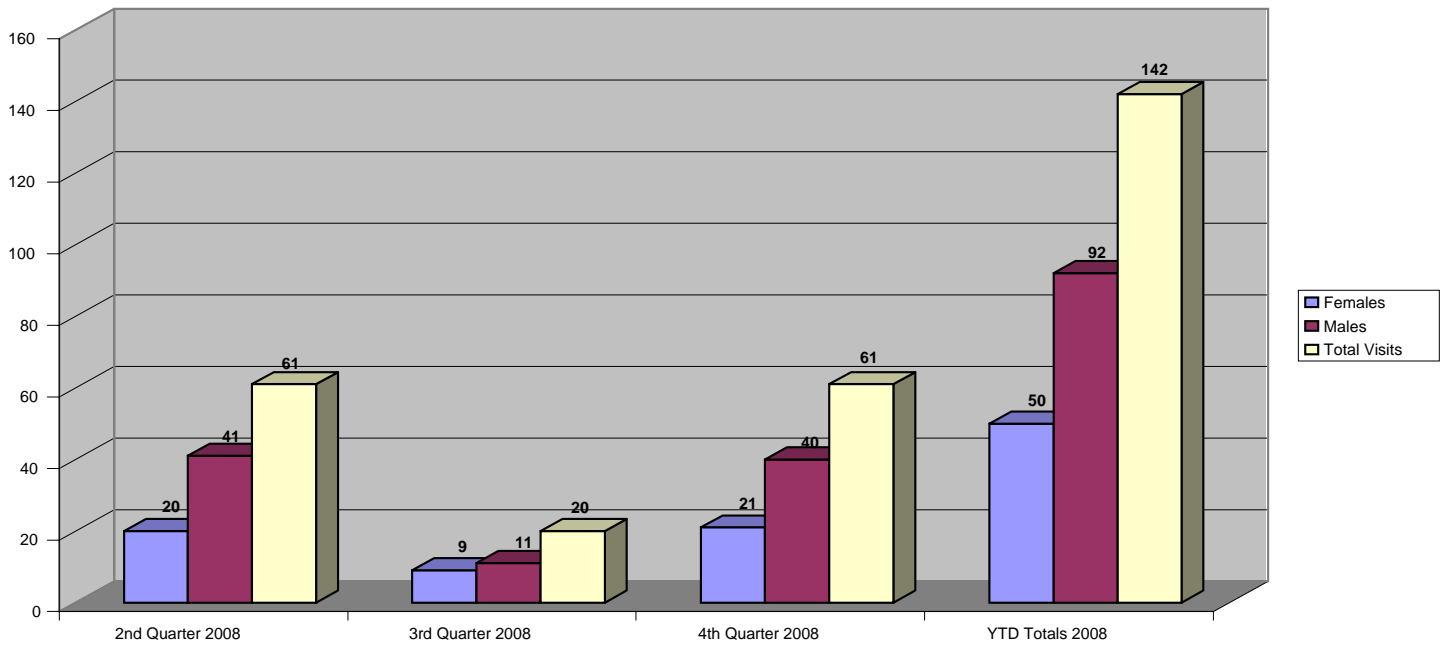
Southern Illinois Healthcare Foundation  
180 South 3<sup>rd</sup> St. Belleville Il. 62220  
phone number 618-222-4701.

The number of males seeking care is twice the number of females thus far. This data helps to substantiate the assessment regarding the lack of service access for males, as well as the low rates of males identified and assessed for Chlamydia.

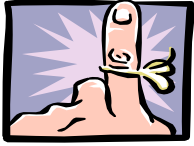
This collaborative effort continues to grow and helps the department meet two of our major goals-access to care for an impoverished population group, and fees adjusted to those who can afford to pay, as well as those who cannot.

The East Side Health Department, also located in this county, serves four townships that include East St. Louis. East Side has a long-standing STD program. The two departments cooperate in numerous ways.

Sexually Transmitted Diseases Clinic Visits by Quarter: Southern Illinois STD Clinic  
180 South 3<sup>rd</sup> St. Belleville Illinois - Services began in Second Quarter 2008



## Dates to Remember:



March 17-20, 2009

23<sup>rd</sup> Annual Genetics Conference  
Illinois Department of Public Health's Genetics Program  
Theme: "A Family Affair"  
Oak Brook Hills Marriott Resort in Oak Brook  
[www.ipha.com](http://www.ipha.com)

April 21, 22, & 23, 2009

*Memories of the Past-Visions of the Future*  
Illinois Rural Health Association Annual Conference,  
Keller Convention Center-Hilton Garden Inn,  
Effingham, IL  
Information: IRHA, 310 E. Adams, Springfield, IL 62701  
Phone: 866-921-4742; Fax: 217-522-2729  
[www.ilruralhealth.org](http://www.ilruralhealth.org)

April 28-30, 2009

68<sup>th</sup> Illinois Public Health Association Annual Meeting  
Indian Lakes Resort, Bloomingdale  
Theme: *Public Health in Peril: Call to Action*  
For more information: [www.ipha.org](http://www.ipha.org)

June 8-18, 2009

Immunization Preparedness Summit, Springfield

July 1-3, 2009

2009 NALBOH Conference, Philadelphia, PA  
Information: NALBOH 1840 East Gypsy Lane Road,  
Bowling Green, OH 43402: [Nalboh@nalboh.org](mailto:Nalboh@nalboh.org)

July 14-16, 2009

Annual Public Emergency Preparedness  
Summit, Oakbrook

September 23-25, 2009

18<sup>th</sup> Annual HIV/STD Conference, Springfield

November 7-11, 2009

137<sup>th</sup> APHA Annual Meeting, Philadelphia

(This article was inadvertently left out of the December Bugle Call.)

### ILLINOIS ASSOCIATION OF LOCAL BOARDS OF HEALTH MEETING

Members of IALBOH met in Bloomington at the McLean County Health Department on October 7, 2008.

The organization is fortunate that McLean County Health Department continues to host its fall meetings.

Three new members attended. They were Laura Duer, Jo Davies County Board of Health; Carolyn Elliot, Chair, Champaign/Urbana Board of Health; and Carrie Storrs, former member of Champaign/Urbana Board of Health, now with IDPH.

President Margaret Leonard called the meeting to order and asked those present to introduce themselves.

The agenda was updated and approved.

The minutes of the meeting on April 8, 2008, were approved.

Kent Scheibel gave the Treasurer's Report.

Margaret Leonard gave the President's Report.

President-Elect Inara McGroarty noted that she has attended meetings with President Leonard and is learning the history of the organization.

Past President Jan Allen gave highlights of the recent meeting of the National Association of Local Boards of Health. She noted that an accurate history of IALBOH's long life is needed. She asked that anyone with information help by letting us know about it.

Annie P. Clark gave the report of NALBOH's West Great Lakes Region. She noted that Jan Allen will take her place as West Great Lakes Regional Director in 2009.

*Bugle Call* Editor, Carolyn Chapman, reminded members that the newsletter is available on the website of the Illinois Public Health Association. There was a discussion of a few snags in the Bugle Call's distribution and of the reimbursement process to St. Clair County Health Department for producing the newsletter.

Kay Banta and Jan Allen described the structure and duties of the Public Health Certification Board. There was discussion suggesting that IALBOH become the driving force to push for certification.

Marcia Custer reported on the Ad Hoc Committee to survey State Associations of Boards of Health to learn which associations had strategic plans. Five state associations responded. They were Idaho, Nebraska, North Carolina, Utah, and Wisconsin.

Those members attending reported on recent news from their health boards. New member Laura Duer explained

Continued on page 7

that her department serves Galena and Apple Canyon Lake.

Carrie Storrs, who received the IALBOH scholarship to attend the Public Health Institute's 16<sup>th</sup> Leadership training, reported on her experience and thanked IALBOH for the opportunity to attend.

The next meeting was announced to take place at the April IPHA Annual Meeting.

**MENTAL ILLNESS IN YOUNG AMERICAN ADULTS**

Almost one in five young American adults has a personality disorder that interferes with everyday life, and even more abuse alcohol or drugs, researchers reported Monday in the Archives of General Psychiatry.

*(From a small item in the Tuesday, December 2, 2008 St. Louis Post-Dispatch, page A2)*

# HOW CHILDREN UNDERSTAND LOVE

Rebecca – age 8

“When my grandma got arthritis, she couldn't bend over to paint her toenails anymore. So my grandpa does it for her all the time, even when his hands got arthritis, too. That's love.”

Terry – age 4

“Love is what makes you smile when you're tired.”

Nikka – age 6

“If you want to learn to love better, you should start with a friend that you hate.”

Karen - age 7

“When you love somebody, your eyelashes go up and down, and little stars come out of you.”

Emily – age 8

“Love is when you kiss all the time. Then when you get tired of kissing you still want to be together, and you talk more. My Mommy and Daddy are like that. They look gross when they kiss.”

**Billy – age 4 “When someone loves you, the way they say your name is different. You just know that your name is safe in their mouth.”**

**Karl – age 5 “Love is when a girl puts on perfume, and a boy puts on shaving cologne, and they go out and smell each other.”**

**Chrissy – age 6 “Love is when you go out to eat and give somebody most of your French fries without making them give you any of theirs.”**

**Danny – age 7 “Love is when my mommy makes coffee for my daddy, and she takes a sip before giving it to him, to make sure the taste is OK.”**

**Bobby – age 7 “Love is what's in the room with you at Christmas if you stop opening presents and listen.”**

**A four-year-old child whose neighbor was an elderly gentleman who had recently lost his wife climbed onto his lap and just sat there. Later, his mother asked what he had said. “Nothing. I just helped him cry.”**

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ST. CLAIR COUNTY HEALTH DEPT.  
19 PUBLIC SQUARE SUITE 150  
BELLEVILLE, IL 62220

RETURN SERVICE REQUEST