

## **Macon County Board of Health Meeting**

**Macon County Health Department  
MCHD Main Conference Room  
1221 E. Condit Street, Decatur IL 62521  
September 15, 2020 at 5:30pm**

Candace Clevenger, Board of Health President, called the meeting to order at 5:33pm.

### **Roll Call**

Candace Clevenger, President – present/on call  
Vivian Goodman, Vice President – present/on call  
Paige Toth, Secretary – present/on call  
Mary Jane Linton, Treasurer – present/on call  
Jan Hack – present/on call  
Dr. Bret Jerger – present/on call  
Dr. Venkat Minnaganti - absent  
Dr. Janet Patterson – present/on call  
Phil Tibbs – present/on call  
Laura Zimmerman - present/on call

### **Health Department Staff in Attendance**

Brandi Binkley, MPA, SHRM-CP, CPHA Public Health Administrator  
Bethany Stapel, MPH, CPHA, Assistant Public Health Administrator  
Sheree Zalanka, Chief Financial Officer  
Evan Trimby, Information Technology Specialist  
Sandy DeDios, Administrative Assistant II

### **Virtual/Microsoft Teams Attendance**

Carol Carlton, RN, BSN, Director of Clinical Nursing Services  
Becky Edwards, Director of Starting Point  
Marisa Hosier, Director of Health Promotion and Public Relations  
Karen Shiflett, RN, BSN, Director of WIC/FCM  
Kathy Wade, REHS, RS, LEHP, Director of Environmental Health and Emergency Preparedness  
Brian Wood, Assistant Director of Environmental Health and Emergency Preparedness

### **Public in Attendance**

None

### **Approval of Agenda Topics**

Candace asked Brandi to introduce new board member, Sue Krows. Brandi welcomed Sue to the board and thanked her for volunteering to be a part of the Board of Health.

Brandi requested to add Popeye's discussion to old business. Dr. Bret Jerger moved to accept the amended agenda, seconded by Laura Zimmerman. Roll call. Motion carried.

### **Public Comment**

There were no public in attendance, and no citizen remarks were received via email prior to the deadline and even prior to this meeting time.

### **Approval of Previous Meeting Minutes**

Mary Jane Linton moved to accept the Minutes for August 18, 2020, seconded by Jan Hack. Roll call. Motion carried.

### **Communications**

#### ***Board Education***

Brandi provided a COVID-19 update. She stated that the Health Department is doing everything possible response-wise with contact tracing. We have been grateful to have found some very great candidates that we have been able to bring on board to assist with those efforts. We have grown our trained staff in all our divisions and now have a very large team that can and has jumped in to assist with contact calls. We are thankful for all of them and especially the nursing team who have been working every single day of the week. We're all very excited to have more people on the team.

We have done some of the restructuring that we discussed with you regarding our Administration and Nursing Divisions. Some of those positions have started or will be starting next week. We still have a lot of job openings we need to fill, so if you can help spread the word and refer anyone to our website under the career tab.

We also continue to provide the essential services needed for our clients and community. Our curbside signs and service have made it easier for us to serve our clients and patients.

Brandi concludes the update with expressing her gratitude for the health department team.

### **Presentation and Acceptance of Financial Report**

Sheree Zalanka, CFO, presented the financial report through the end of August, we are 75% into the fiscal year. Accounts Receivable is \$710,684.71 and Deferred Revenue is \$653,358.49. Ending fund balance is \$4,995,781.34. Total Revenue is \$4,612,555.59 which is 55.2% of budgeted revenue for the year. Total Expenditures are \$4,390,191.73 which is 53.0% of budgeted expenditures.

Candace asked Sheree is the revenue and expenditures so low this far into the fiscal year due to COVID money not being spent. Sheree replies, yes. Candace asked, will that roll over to the next year if you don't spend it all? Sheree replies, yes and will require a resolution to move it. Sheree stated that the COVID grant goes through the end of May 2021.

Laura Zimmerman moved to accept the Financial Report, seconded by Vivian Goodman. Roll call. Motion carried.

### **Review of Department Expenditures**

Mary Jane Linton moved to pay the bills, seconded by Janet Patterson. Roll call. Motion carried.

## **Grant Applications and Review**

None

## **Department and Division Reports**

Included in packets.

Brandi announced that Carol Carlton, Director of Clinical Nursing Services, will be retiring on December 4, 2020. Brandi expressed that she has been phenomenal in her role as the Director as well as other roles that she has filled during her many years of service to the Health Department and the community.

Candace also acknowledges Carol and thanks for her service and help over the years. Carol responds with thanking Candace and says that she will be sad when it comes time to leave. She addresses the board and thanks them for supporting her over the years.

Mary Jane wishes Carol congratulations and thanks her for all she has done.

## **Employee Recognition**

Candace Clevenger acknowledged all employees on the monthly certificate and thanked them for their years of service and hard work.

## **Old Business**

### ***Board of Health Member Update***

Brandi welcomed Sue Krows to the board. We are very excited to have Sue join us.

Brandi also stated that some member terms will be ending next May and asked that those members start thinking about if you are interested in remaining on the board or have someone in mind that you would like to recommend. Further discussion to be held in the upcoming meetings.

### ***Discussion on Popeye's***

Brandi mentioned that they have been receiving communication from the owners and management of Popeye's. They have interest in applying for a new license. We were advised to forward any requests to legal, so they were referred to the State's Attorney's office. We received some information back from the State's Attorney stating that there is nothing in the ordinance that specifically speaks to if a permit is revoked if they can apply for a new one.

So, this means that the board would have to decide. We cannot vote on this tonight, since it was not on the agenda. If you want to have a discussion on this now, then we can hold a vote at the meeting next month.

Brandi asked Kathy to speak further and she mentioned that one of the things that her and Brandi discussed was the letter that was previously sent out to Popeye's, stating that if any of these scenarios happened again, their permit would be revoked. When that happened that was when we held a hearing with the board. We can do something like that again or can put together an action plan. Kathy said if that's something you would like me to do, I can have something ready for next month's meeting. Kathy also said that the biggest concern I have is that this is the first time we have had this happen in Macon County, so whatever we decide to do, will set the path for the future. She also suggesting including in the corrective action plan, that if it doesn't work out then that would be final, and no further chances would be extended.

Mary Jane expressed her concerns and stated that when someone repeatedly is non-compliant, that is problematic. If we do decide to allow them a permit again, then the action plan should be

very stringent and if they strike out again, that's it. How many people will get sick over giving them another chance?

Kathy responds that she is pro-business as well as pro-community health and this is a very fine line that can go either way.

Laura asks that since this is the first time for Macon County, what have the other health departments handled this type of situation? I share the same concerns as Mary Jane.

Dr. Jerger says his biggest concern is what is the precedent from the other area health departments? I don't think we need to be trailblazers on that one.

Kathy stated that she will put a corrective action plan together for the board to review. She will reach out to area Environmental Health Directors to get their input on they have handled this situation.

Brandi added that the State's Attorney's office did send some information on how the City and Liquor Commission does it. She will include this along with the action plan.

Phil Tibbs asked if Popeye's submitted a proposal on what they would do or guarantee?

Kathy replied no. Their email indicated they are wanting to re-brand Popeye's.

### **New Business**

#### ***Discussion Regarding Kentucky Fried Chicken Closure and Next Steps***

Brandi said they have some information to share regarding the closure and asked Kathy to speak on that. Kathy presented a PowerPoint to the board to offer a timeline of events leading up to the closure of Kentucky Fried Chicken.

- 2/1/2019 - Opening inspection for Change of Ownership. Violations found and noted return for reinspection on 2/4/2019 and again in 30 days.
- 2/5/2019 - Reinspection and violation not corrected.
- 2/6/2019 - Reinspection. Violation corrected.
- 3/4/2019 - 30-day reinspection.
  - None of the previous items were corrected
  - Permit suspended at this time
  - Received letter/CAP from Mr. Salvador Elias (Director) stating everything will be corrected by the end of business 3/4/2019.
- 3/5/2019 - Reinspection for reopening. All violations were not corrected, and facility remained closed.
- 3/6/2019 - Reinspection for reopening. Violations corrected and facility reopened.
- 6/10/2019 - Routine inspection.
- 10/16/2019 - Routine inspection and complaint investigation of raw chicken being served. Complaint was founded.
- 3/2/2020 - Routine inspection.
- 3/17/2020 - Complaint investigation of bird nest on top of canopy covering the drive-up window causing buildup of feces on the ledge of drive up window. Complaint founded.
- 3/31/2020 - Complaint investigation for the same as 3/17/2020. Complaint founded.
- 4/7/2020 - Complaint investigation. Drive up window filthy with bird feces. Complaint founded. Manager fixed the problem same day.
- 6/24/2020 - Routine and complaint inspection. Complaint founded and facility closed.
  - Severe infestation of flies
  - Cross contamination
  - Standing water in three-compartment sink
  - Missing floor tiles and excessive grease.
- 6/24/2020 - Received letter and corrective action plan (CAP) from District Manager, John Harris. He showed receipts for violation repairs and requested a reinspection 6/26/2020.

- 6/26/2020 - Reinspection for reopening. All violations not corrected. Facility remained closed.
- 6/29/2020 - Reinspection for reopening. Facility allowed to reopen.
  - Floor tiles still not repaired and was given 30 days to have repaired.
- 7/24/2020 - Follow up inspection for floor tiles. Still not repaired. Given 7 days to repair.
- 7/31/2020 - Inspection for floor tiles. Found floor tiles repaired.
- 8/24/2020 - Complaint investigation for the following.
  - Garbage overflowing in dumpster
  - Large fly presence at dumpster
 Stated will return in 30 days for reinspection.
- 9/10/2020 - Complaint investigation and follow up inspection for garbage. Complaint about chicken was unfounded, but garbage was still overflowing at dumpster and inside the facility. Allowing for large presence of flies and fly larvae. Drains were clogged. Unable to use hand sink due to backup. Unable to use mop sink due to backup. Facility closed due to imminent health hazard.

Kathy wanted the board to be aware of the two closures of within a 12-month period in the event a hearing is requested.

### ***Discussion Regarding COVID-19 Enforcement***

Brandi advised that throughout the pandemic we have been working closely with local law enforcement, States' Attorney's office, IDPH, and Illinois State Police. There is only so much we can do, and we have done our due diligence to follow the three-step process we have in place. Kathy has been managing this process when complaints are received. First, we place an educational call. Second complaint, we make a visit and provide education. Third complaint, if it is a business in which we have jurisdiction over, they may be served a cease and desist order because they are not being compliant. If it is a business in which we do not have jurisdiction, we would still apply the first two steps of our process.

With the Administrative rule on the enforcement of masks, it does give more power to local boards of health, health departments, etc. We had been asked by the City of Decatur, when they adopted their ordinance, to assist with their complaints. We informed them that we were consulting with legal and would get back to them. Legal advised that it is a policy decision for the Administrator then to discuss with the Board of Health to determine how we would like to proceed with these violations and how we would like to address them.

Kathy has drawn up a draft for a mask ordinance similar to other health departments and legal is reviewing should we decide we want to pursue mask ordinance. We also have a position posted for a part-time enforcement support person. Kathy and her team have been handling all the complaints up to this point and the number of complaints has been significant.

Brandi invites the board to discuss their opinions on this matter.

Mary Jane asked if the tanning salons were under the mask ordinance? Kathy responded with yes, those facilities are required to wear a mask. Mary Jane adds that gas stations are huge violators of the mask ordinance.

Brandi responds that we follow up on all complaints and provide the education. If we were to adopt our own mask ordinance, then we would have jurisdiction over all businesses and be able to enforce and issue fines.

Candace asked, is the health department the only government body that could do the ordinance for this? Brandi replied that we are not the only ones that could do this. The city made an ordinance and that was when they asked us to partner with them with the enforcement of the ordinance.

Phil Tibbs is in favor of sticking with the businesses that have permits with the health department. Kathy replied that they address all business that a complaint is received on with the educational phone call. If a second complaint is received on a business that does not have a permit, then those are forwarding to the city to follow up on. About 90% of the complaints are for businesses that do have a food permit.

Dr. Bret Jerger voiced his opinion, stating that he is struggling over the decision to have the health department become the enforcer of a mask ordinance. He understands both sides because there are people that feel that wearing a mask is not a law.

Kathy added that of all the businesses they have had to make a visit to, their focus is on the employees of the business not so much the customer. When asked how they are handling a customer without a mask, we were told that Corporate has told them that they are not the police. They do their part with posting signs on the doors.

Dr. Bret Jerger also added that originally it was stressed that you remain at least six feet apart or wear a mask. Now it's all about wearing the mask period. This is where I feel there is a gray area on this.

Laura Zimmerman asked if the initial educational phone call has been effective or how often do you have to address a second complaint. How important is it to increase the enforcement of a mask ordinance? Kathy responded with I don't know, because I have yet to receive a third complaint on any facility.

Brandi appreciates everyone for their opinions and questions. She added that I think I have a feel for how you want to move forward on this.

### ***Approval of FY 2021 Paygrade Scale***

Brandi shared a copy of the FY21 paygrade scale which reflects the base pay for each level of positions and requirements for the positions for both full time and part time. This is a 2% increase from last year. Brandi asks for approval from the board.

Mary Jane Linton moved to approve the new paygrade scale, seconded by Paige Toth. Roll call. Motion carried.

### ***Approval of Macon County Board Resolution Approving Acceptance of Donations of Goods and Materials and the Free Distribution of the Same by the Health Department***

Whereas from time to time, the Macon County Health Department receives donations of goods and materials (e.g., formula, child/adult diapers, medical equipment, etc.); and when such a donation is received by the Health Department, it is intended by the donor that such items(s) be distributed to a client or patient of the Health Department free-of-charge.

Paige Toth moved to accept resolution for donation of goods, seconded by Vivian Goodman. Roll call. Motion carried.

### ***Discussion Regarding Healthworks Illinois Lead Agency and Case Management Programs***

Brandi explained there are two Healthworks programs. The Healthworks Lead Agency is housed in the Clinical Nursing division which is funded by DCFS and Healthworks Case Management program is in the WIC/FCM division funded by DHS. The State was planning to discontinue funding the Health Department for these programs and transition to a managed care group called YouthCare. YouthCare has reached out to the Health Department to ask to contract with them so we can continue to provide these programs for high risk children.

We have reviewing these programs to determine if we could continue with them due to the fact they have been under funded. So, before we decided to contract with YouthCare, we asked if they would be consider increasing the grant amount so that we could hire the adequate amount of staff to cover the increase in case load every year. YouthCare agreed to increase the amount of \$134,205.00 to \$152,849.00, which will cover our expenses to hire adequate staffing. We will continue to offer this program if the board approves the contract with YouthCare on the Lead Agency side. We have been up front with YouthCare that this is a program we have been evaluating and whether it is appropriate for the Health Department to continue. However, because YouthCare does not have a backup plan for these children at this time, we feel that we should contract with them at least through the end of this current year. We will continue to evaluate and see if things improve with the increase of funding.

As for the Case Management side of this program, we do not have a final contract from them for you to review. We were able to get a grant amount which was about \$143,000.00 short of what our expenses would be. This is true for other Health Departments as well. At that dollar level, we would not be able to continue the Case Management side of the program. We informed YouthCare on this and that was a statewide communication they received from other Health Departments. We have not received a final number from YouthCare as they are looking at our case load and determining if they can increase our amount.

Mary Jane asked if the other component of this program with DCFS is for child abuse. Brandi explained these are kids that have been placed in foster care. The Lead Agency side contacts the foster family within a certain amount of days after being placed to make sure medical appointments are being made. Then the Case Management side has a Case Manager that will follow up with the family. Mary Jane states, so you are healthcare then managing the child's healthcare. The case manager ensures that the foster family is getting the child to their initial medical appointment that must be done within a certain amount of days of placement. The Case Manager is a nurse, so she is reviewing the records from the Case Management side.

***Approval of Master Services Agreement for Healthworks Illinois Lead Agency with Meridian Health Plan of Illinois, Inc. d/b/a YouthCare***

Mary Jane moved to accept the contract with YouthCare, seconded by Janet Patterson. Roll call. Motion carried.

***Approval of Macon County Board Resolution Approving Increase in Appropriations in the FY20 Health Fund Budget for COVID-19 Crisis Grant***

Whereas the Health Department has received notification of the COVID-19 Crisis Grant with the Illinois Department of Public Health; and provision for this grant was not included in the FY20 budget; and unforeseen circumstances have arisen which give rise to an emergency situation in that valuable services will be compromised, and grant funding lost without the amending of the Health Fund budget; and the purpose of the grant is to assist with activities associated with the COVID-19 pandemic; and funding may be used to build capacity for incident management which includes coordination with public and private partners to address incident command structure needs and payment of overtime for necessary employee shifts; and allowable costs must be on or after January 20, 2020, and no later than March 15, 2021; and allowable costs include overtime for individuals directly associated with the COVID-19 Crisis, public health expenses related to surveillance, epidemiology, laboratory, capacity, infection control, mitigation, communication and other preparedness and response activities associated with COVID-19.

The total amount is \$72,319.00. The grant began March 16, 2020 and ends March 15, 2021.

Candace asked is this the portion that represents this year. Sheree stated this is not the contact tracing grant, this is a different one. We have three grants associated with COVID-19.

Laura Zimmerman moved to approve the resolution, seconded by Janet Patterson. Roll call. Motion carried.

***Approval of Macon County Board Resolution Approving Increase in Appropriations in the FY20 Health Fund Budget for Local CURE Program***

Whereas the Health Department has received notification of the Local Coronavirus Urgent Remediation Emergency Support (Local CURE) Program funded from the CARES Act and through Illinois Department of Commerce and Economic Opportunity; and provision for this program was not included in the FY20 budget; and unforeseen circumstances have arisen which give rise to an emergency situation in that valuable services will be compromised, and funding lost without the amending of the Health Fund budget; and the Local CURE program is a reimbursement program available and allotment B is for Certified Local Public Health

Departments; and reimbursement requests may be submitted for necessary expenditures incurred due to the public health emergency with respect to COVID-19; and costs must not be accounted for in an already approved budget and costs must be incurred between March 1 and December 30, 2020; and the five categories of eligible incurred expenses include: 1) Medial expenses – establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, testing and emergency medical response, 2) Public health expenses – communication and enforcement by local government of public health orders related to COVID-19, 3) Payroll expenses – for those employees whose services were substantially dedicated to mitigating or responding to COVID-19, 4) Expenses for actions taken to facilitate with compliance with COVID-19 related public health measures, and 5) Any other COVID-19 related expenses reasonably necessary to the function of government, or approved by DCEO that satisfy the Local CURE Program eligibility criteria, and the Macon County Health Department must document how expenses are related to COVID-19 and submit for reimbursement.

Total amount requested is \$251,469.00. Sheree stated she has put this in the FY21 budget.

Candace asked if we have all the extra expenses for which we will spend the money on. Sheree responded that most of it will be for staffing needs, and there were some items that did not qualify for the contact tracing grant that we included in this.

Phil Tibbs moved to approve the resolution, seconded by Paige Toth. Roll call. Motion carried.

#### ***FY 2019 Audit***

Sheree shared the results of the FY19 county-wide audit for the Health Department. The audit was conducted for the period of December 1, 2018 – November 30, 2019. The net change in the fund balance was a positive balance of \$233,951.00 bringing the fund balance as of November 30, 2019 of \$4,323,000.00.

The management letter noted a finding from DHS review that the Health Department management should require that all direct wages be documented with a time and effort reporting. Direct payroll allocations should be according to these reports and not based on approved budget or time studies. We checked into a tracking system with our current time clock system and would require significant training with staff and work arounds in the system. Luckily, we were presented with the next item on the agenda from the County Auditor's office.

#### ***Discussion Regarding Auditor's Office New Accounting System Upgrade***

Sheree advised that the Auditor's office was informed that the current accounting software provider would not be providing support for the payroll application after July 2021. So, the recommendation was to outsource payroll. Carol Reed, County Auditor, estimated that this would cost approximately \$40-50,000.00. They began researching other software in which Sheree was able to sit in on some of the virtual demonstrations. The County Board recently approved going with the new software. It is called MIP Fund Accounting. This new software will be on the Cloud and will allow any user to access any time. Unlike the current software that only allows one user from the Health Department to access at a time. This new software will also include a program called Employee Web Services which will be our solution to the audit finding. Employees will be allowed to track time spent on any grant program. So, this will give us accurate reporting for staff on various grants. Sheree has submitted a draft policy regarding the audit finding and the draft was approved. The auditors asked for an update once we got the new software up and running. The goal for going live with the new software is December 1, 2020. This will be for everything except payroll, and payroll will possibly begin January 1, 2021.



### ***Approval of the FY 2021 Proposed Budget***

Sheree and Brandi presented a summary of the proposed budget for FY21. The Finance Committee met prior to the board meeting to review and discuss the proposed budget.

This budget ended up with a total revenue of \$7,530,996.00, total expense \$7,466,305.00, with an ending balance of \$64,691.00. This is comparable to FY20. Overhead expenditures for this budget represent a 16% indirect cost compared to 17% last year.

**Staffing** – This budget includes an increase in payroll to be given through performance evaluations which will be completed in the fall. In 2014, a survey of comparable health departments revealed that MCHD salaries were up to 25% lower than positions at the other health departments. Using these results, the MCHD implemented a plan to increase salaries to be as comparable as possible. In 2018, members of the EEHW encouraged our Department to attempt to continue to address this issue to ensure our salaries were appropriate, comparable, and competitive. The MCHD made significant adjustments to current employees' salaries and base pay levels for incoming employees. At this time, we feel as if our salaries are more comparable, but still somewhat lower than comparable health departments. In comparison to other sectors, MCHD salaries for some are still significantly lower and this causes issues recruiting and maintaining staff. This is especially true when it comes to nurses, which are critical to the effective functioning of a health department. Registered Nurse positions are very difficult to fill due to not only the national nursing shortage, but also the fact that our nurses are paid significantly lower than RNs at other types of local healthcare facilities. In addition, we have several pending retirements and must plan for adequately filling these positions.

Another consideration for this and upcoming years is the need to address the increase in minimum wage. We are currently compliant but are aware that increasing the pay for our positions earning just above minimum wage will result in pay compression for higher paid positions. We continue to research and plan for adjustments in our paygrade scale, including base pay for incoming employees and salaries for current employees.

We are also actively prioritizing succession planning by cross-training additional staff in preparation for emergencies, retirements, and transitions of current staff. It is imperative that we had adequate numbers of trained staff in order to sustain services at all times, especially during a time of pandemic. We are working to restructure some parts of the organization as appropriate and as need arises/continues. There has been a need to grow our Administration team with an Accounting Assistant and our Information Technology with an IT Support Specialist Assistant. At this time, we have one person in the building for each function and not only is the workload far beyond realistic for one person, but also it is not a sustainable plan to have only one person in these functions. We do have other staff cross-trained to assist with accounting and a contractor on call to assist with IT in the case of an emergency. However, we need a permanent solution to these obstacles. Our solution is to add a staff member in each of these areas. We have also restructured our Clinical Nursing Division with the addition of a Clinic Coordinator. This is currently a temporary position to determine the success of this change and could potentially be made permanent if needed and determined to be the most effective structure. It is also a priority of our organization to address and prioritize health equity, inclusion, and diversity. As part of the COVID-19 Contact Tracing Grant, we are adding a Health Equity, Diversity, and Inclusion Coordinator for building-wide efforts. Following the conclusion of this grant, we will maintain this position and continue to support the prioritization of these efforts in local public health.

**Grants** – For State Fiscal year 2021 we were fortunate to receive level funding for most of our grants.

In FY20 we brought back the car seat program; we have dollars set aside in a restricted fund balance from previous fiscal years to purchase car seats. Parents/guardians in need of a car seat are asked to give a \$20 donation. We also received a grant from IDOT. We currently have 9

trained car seat technicians. Unfortunately, due to the COVID-19 pandemic, we have had to put the car seat program on hold. Grant funding was used to purchase car seats and we hope to get back to holding car seat check events as soon as possible.

For SFY21, we received an increase in funding of \$26,640 for Family Case Management and an increase of \$12,960 for our High-Risk Infant Follow-Up/Healthworks Illinois grants. Assigned caseloads for these programs remained the same.

For SFY21, the Breastfeeding Peer Counselor grant received an increase of \$16,000. This is due to an overall increase of Federal funding for the program. The WIC program received a caseload decrease from \$2,083 to \$2,052 resulting in a \$3,431 decrease in funding.

There were two significant changes presented to us in during SFY21 in our Healthworks Illinois Programs. We currently hold a Healthworks Illinois Lead Agency and Healthworks Illinois Case Management Program. During FY20, the state implemented the transition from state funding (DHS and DCFS) to a managed care through YouthCare. In order to continue to provide these services, YouthCare has presented an option to us to contract with them for both programs. We are currently in this review/contract approval process. The children served by both programs are high-risk, as they are in the DCFS foster care system, so it is critical we continue to provide services or ensure another entity is available to do so to ensure there is no gap. The Lead Agency side of this program has historically been underfunded and the caseload has far exceeded the required amount per the contract. Because of this discrepancy and historically inadequate funding to fully support the staffing needs of the program, we requested an increase in funding if we do contract with YouthCare. They agreed to increase the grant award from \$134,205 to \$152,849. This increase would provide the funding necessary to finally hire an adequate number of staff to serve the high and growing caseload numbers.

As a local health department, we are emergency responders and regularly plan and train for natural and manmade disasters. One of these types of disasters could include a pandemic. While we regularly train and plan for this, the magnitude of the COVID-19 global pandemic has been extraordinary. Local health departments are regularly underfunded and struggle with maintaining and recruiting staff. The MCHD team was monitoring the global situation associated with the novel coronavirus long before a case was confirmed in Illinois and subsequently, Macon County. Our team was as prepared as possible to respond and was continuing (as we always have) to partner with community agencies and stakeholders. COVID-19 response continued as we started to have local cases confirmed. However, for some time there was no additional funding presented to our organization. Our current staff members stepped up to cover all duties and needs, putting in countless hours to ensure the fight against COVID-19 was as comprehensive as possible. Eventually, we were made aware of a COVID Crisis Grant for \$72,319 and the local CURE reimbursement program with funding up to \$251,469 and a COVID Contact Tracing Grant for \$2,861,712. It was critical to receive these dollars in order to grow our capacity to continue to adequately respond to COVID-19. These dollars have allowed us to hire additional staff we absolutely had to have in order to address all cases and contacts in Macon County. This funding has also assisted with ensuring we have gained access to the technology necessary for current and newly hired staff. The obstacles that exist despite this funding include, but are not limited to: the funding is temporary and following the pandemic, our organization will remain underfunded and possibly understaffed; the grant dollars are extremely restrictive regarding for what they can be used, so some needs remain; and it is still difficult to fill all staff positions due to the issues such as a nursing shortage, lower level salaries for professional positions, and the temporary nature of these COVID-19 related positions. Therefore, we remain understaffed and constantly seeking employees to assist with our response efforts.

**Information Technology Upgrades** – In FY20, we successfully migrated all accounts to Office 365. When the COVID-19 stay at home orders were issued, a large majority of MCHD employees were able to seamlessly transfer to a work from home environment. This allowed us to continue to serve and provide critical services to our clients. When presenting this project during last year’s budget process, it was predicted that 365 could be beneficial during an emergency event. Microsoft Office 365 has proven to be the asset our team predicted it could be during this global emergency we are currently experiencing.

With Office 365, all MCHD employees have access to files anywhere internet is available. Mobile work and collaboration are much simpler. Instant messaging, sharing documents with team members, video chats, and an internal social network are just the start of the new features available. This also means that all information is being stored in the cloud. This allows for minimum down time, in the case of a catastrophic even at MCHD.

In addition to improving efficiency and productivity, Office 365 has provided stability during this pandemic for not only our internal employees, but also for our community partners and members of the public. Our staff use 365 for regular functions, but we have also leveraged this technology to hold virtual meetings with stakeholders throughout COVID-19. Microsoft 365 has also provided us a platform to use to safely and effectively hold Board of Health Meetings that have been live streamed for the public.

A computer refresh began in FY19 and carried into FY20. New computers were purchased for all employees. The computers replaced ranged from 5 to 8 years in age. Industry standard refresh cycle is 3 to 5 years. We will now develop a plan to space out computer purchases.

Plans for FY21 include the following:

**ManageEngine Desktop Central** – Provides remote monitoring, management, and control. Remote monitoring and management allow for centralized installation and uninstallation of software. It also allows monitoring and control of installed software. Remote control allows for remote troubleshooting and support. These services are essential for our current distributed work environment. IT can assist a staff member without having to be in the same room or coming into contact with their equipment.

**ManageEngine ServiceDesk Plus** – Provides online helpdesk, asset management, and purchase management. Allows for tracking assets from pre-purchase all the way to decommissioning.

**Redundant Internet Connection** – MCHD is seeing an increase in the use of cloud services such as Microsoft 365 and business critical State of Illinois applications moving to web-based services. Because of this move to internet-based communications, redundant internet is essential. Additionally, all of our COVID-19 Contact Tracing and Case Investigation is done via web-based services. With only a single internet connection from a single provider, we have a single point of failure. A service provider outage can bring all services to a halt. Having a second connection through a second provider give us the resiliency needed to continue operation during this critical time.

## **Health Fund Balance**

The health fund balance was at \$4.9 million as of August 31, 2020.

The FY21 budget show MCHD averaging \$622,192 in expenses per month. This indicates that an appropriate working operational fund balance should average between \$1.8 and \$2.5 million annually. Fluctuation naturally occurs due to property tax payment schedule.

The current global pandemic has been a prime example of why it is crucial for us to maintain a healthy fund balance. In previous years, we have stated that a balance is necessary for possible situations such as a TB outbreak. We have mentioned that there is no separate TB fund for an outbreak situation, as that fund was combined with our overall Health Fund. Local health departments are regularly underfunded across the board. Because of this and unexpected events that can occur, we need to maintain our healthy fund balance to ensure the sustainability of our organization and its functions. The pandemic has clearly exhibited the importance of having adequate, funded, trained, knowledgeable, and experienced public health in a community. While we have now received some grant funding to address COVID-19, that funding came months into the pandemic and is only to be used for very specific needs. That has left and continues to leave our organization at risk. This health fund balance provides the security and sustainability needed.

A plan for some of these dollars in FY20 was to implement electronic health records. A significant amount of research was done on this project prior to the local COVID-19 response. Unfortunately, we will not be able to implement the EHR during FY21 because of COVID and the statewide implementation of a brand-new web-based contact tracing program. We also had plans to implement a digital system in our Environmental Health Division to increase efficiency and speed of production. A significant amount of research also went into this project before the local COVID-19 response. While these two projects have not yet been fully implemented, they are still incredibly important and must be completed as soon as possible. These projects are still a priority for our team and Board of Health, and we hope to continue implementation as soon as possible once the COVID-19 response is not as burdensome.

Another major project discussed in our FY20 plans was the expansion of the Dental Clinic. Funds were received to expand the clinic and serve additional clients. This project was underway before the local COVID-19 response began. Because of the high-risk nature of transmission in a dental setting, we have had to make major adjustments to our clinic and processes. We have not been able to move forward with the expansion project during COVID-19. At this time, we still have been able to maintain the grant dollars received to assist with this and have applied for additional funding. However, this project will be on hold until at least FY21.

Our leadership Team is actively searching for ways to recruit and maintain the strongest team possible. With minimum wage increasing and higher salaries at other places of employment, it becomes increasingly difficult to fill open positions. As pay levels compress, we are investigating ways to address this and ensure that we can obtain the staff needed for positions, especially those with higher level minimum qualifications required. The staffing changes thoroughly detailed in the staffing section will be implemented and maintained with use of health fund dollars. We feel this is an appropriate, effective, responsible way to utilize these dollars to achieve long-term sustainability and success for the organization and entire community. It is also a priority of ours to continue to prioritize the increased awareness of our programs and services.

Phil Tibbs moved to approve the FY21 proposed budget, seconded by Vivian Goodman. Roll call. Motion carried.

**Closed Session**

No closed session. Will review next meeting.

**Adjournment**

Laura Zimmerman moved to adjourn, seconded by Mary Jane Linton. Roll call. Motion carried. Meeting adjourned at 7:12p.m.

Respectfully submitted,

Sandy DeDios  
Administrative Assistant II

President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Date: \_\_\_\_\_