

AGENDA - REVISED

WILL COUNTY BOARD OF HEALTH MEETING

Will County Health Department

via TELECONFERENCE – TEAMS APP

1-708-566-6764 Phone / Conference ID 849 098 782#

APRIL 21, 2021 – 3:00PM

IN ACCORDANCE WITH PUBLIC ACT 101-640, EFFECTIVE JUNE 12, 2020 AND THE GUBERNATORIAL DISASTER PROCLAMATION ISSUED BY GOVERNOR PRITZKER ON NOVEMBER 13, 2020, THIS MEETING WILL BE HELD VIA VIDEOCONFERENCE/TELEPHONICALLY THROUGH THE MICROSOFT TEAMS EVENTS PLATFORM. WILL COUNTY BOARD OF HEALTH MEMBERS WILL BE ATTENDING THE MEETING REMOTELY AND THE GENERAL PUBLIC IS STRONGLY ENCOURAGED TO DO THE SAME. PLEASE GO TO WWW.WILLCOUNTYHEALTH.ORG – NEWS AND EVENTS FOR A LINK TO ATTEND THE MEETING VIA MICROSOFT TEAMS.

MISSION STATEMENT: To prevent disease and promote a healthier environment for all residents, business operators and visitors. Our agency of professionally trained staff work cohesively to assure public health and safety measures are maintained through services and programs the department provides based on the needs of the community.

VISION STATEMENT: Deliver sustainable programs and policies in response to the public health needs of the community.

CORE VALUES: Respect, Integrity, Professionalism, Quality, and Dedication.

- I. Call to Order/Roll Call.....3:00p.m.
- II. Pledge of Allegiance to the Flag
- III. President’s Comments
- IV. Executive Director’s Comments
- V. Public Comment for Agenda Items Only – **Discussion**
- VI. Approval of Minutes / COVID-19 Response Committee Minutes
March 10, 2021 COVID-19 Response Committee – **Information**
March 17, 2021 Regular Session – **Motion**
March 24, 2021 COVID-19 Response Committee – **Information**
- VII. Treasurer’s Report & Department Financial Reports
March 31, 2021 – **Motion**
- VIII. Reports from Divisions
Division Statistical Reports – **Discussion**
- IX. Old Business
COVID-19 Response (CJ) – **Update**
- X. New Business
 - a. *Resolution #21-15 Purchase of Nitrile Exam Gloves for Use in The Mass Vaccination Initiative (ADM) – **Motion**
 - b. Resolution #21-17 Purchase of Promotional Items for Vaccination Clinic (ADM) – **Motion**
 - c. Resolution #21-18 Purchase of Uniforms for Vaccination Clinic (ADM) – **Motion**
 - d. Resolution #21-19 Payment of Communication Activities for The Fource for Community Vaccination Clinics & COVID-19 Pandemic Response (ADM) – **Motion**
 - e. *Resolution #21-20 Purchase of Narcan (ADM) – **Motion**
 - f. Resolution #21-21 2021 Fees for Medical, Hospital, & BH (CHC) – **Motion**
 - g. *Resolution #21-22 ByLaws Suggested Changes (CHC) – **Motion**
 - h. Governing Council Approval to Not Apply for United Way Funding 2021 (CHC) – **Information**
 - i. Media Plan – COVID-19 Response (ADM) – **Discussion**

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- XI. Executive Session re: Employment/ Legal Matters – **Motion & Roll Call**
- XII. Board Approval of Personnel Status Report – **Motion**
- XIII. Board Members' Concerns and Comments – **Discussion**
- XIV. Public General Comments and Concerns – **Discussion**
- XV. Adjournment – **Motion**

**WILL COUNTY HEALTH DEPARTMENT
THE BOARD OF HEALTH
COVID-19 RESPONSE COMMITTEE
BOH MEETING MINUTES
MARCH 10, 2021**

IN ACCORDANCE WITH EXECUTIVE ORDER 2020-07 ISSUED BY GOVERNOR PRITZKER, THIS MEETING IS HELD VIRTUALLY VIA MICROSOFT TEAMS APP. WILL COUNTY BOARD OF HEALTH MEMBERS WILL BE ATTENDING THE MEETING REMOTELY AND THE GENERAL PUBLIC IS STRONGLY ENCOURAGED TO DO THE SAME.

The Board of Health COVID-19 Response Committee held via virtual conference call was called to order at 3:05 p.m., Mr. Zelko, President presiding.

ROLL CALL/ QUORUM PRESENT

MEMBERS PRESENT

James Zelko, President
Billie Terrell, PhD., Vice President
Teena Mackey
Nanci Reiland
Margaret Tyson

MEMBERS ABSENT – NONE

OTHERS PRESENT

Cindy Jackson, Vaccine Director, FHS
Nicole Garrett, Program Manager, FHS
Alpesh Patel, Communicable Disease Program Coordinator, FHS
Pamela Mowers, Resident
Jose Vera, SSIP
Tanner Simeon-Cox, SSIP

PLEDGE OF ALLEGIANCE

PRESIDENT'S COMMENTS

- ↓ Mr. Zelko welcomed everyone to the meeting.
- ↓ Mr. Zelko thanked Mr. Patel for putting together the statistics and data regarding COVID-19 confirmed cases and deaths by demographics in Will County as of March 4, 2021. Mr. Zelko also discussed the vaccine allotment received from the State of Illinois and MVP Clinic openings. Discussions ensued amongst the Board, Mr. Patel & Ms. Jackson.

EXECUTIVE DIRECTOR'S COMMENTS – NONE

PUBLIC COMMENTS FOR AGENDA ITEMS ONLY

Ms. Mowers suggested the data in WC regarding immunizations in the education workforce factors could be greater due to the rate of women vaccinated than the men.

During the public comments portion of the meeting, various questions regarding the following topics below were discussed.

- ↓ Vaccination Percentage / Data in Will County.
- ↓ Vaccine appointment issues / Vaccination Partners.
- ↓ The Ovation Center Opening.
- ↓ COVID Equity Plan / Interpreter for the Board meetings.
- ↓ Why a communication firm was not set in place a year ago?

- ↓ When will – Will County enter into Phase 1b+?
- ↓ Information regarding planned vaccinations in Wilmington at the St. Rose School site.
- ↓ Vaccination online registration tool.

Ms. Jackson and Ms. Olenek responded and fielded the questions. Most of the questions were submitted via the chat room which will be included as attachment with the minutes.

APPROVAL OF BOARD OF HEALTH MINUTES

Moved to approve the February 24, 2021 Regular Session minutes as presented.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Ms. Reiland
SECONDER:	Ms. Tyson
AYES:	Mr. Zelko, Dr. Terrell, Ms. Mackey, Ms. Reiland, Ms. Tyson

OLD BUSINESS

COVID-19 RESPONSE (CINDY JACKSON)

Ms. Jackson presented a Power Point slideshow outlining vaccination updates as of March 10th. The slideshow included: vaccines administered, demographic breakdown, vaccine supply, PR Team updates, and vaccination clinic locations. Ms. Jackson will ask the PR Team to include the PowerPoint Slide show updates on the website.

Discussions ensued regarding inconsistent messaging between IDPH & Will County, methods of contacting residents for offsite vaccination sites, scheduling timeframes for vaccination sites, call center call volumes, and frequency of meetings with first responders.

NEW BUSINESS

LETTERS TO LEGISLATORS (ED)

Ms. Olenek discussed the letter to legislators included in the packet that requested their assistance in acquiring additional COVID-19 vaccine for the State of Illinois – County of Will. Brief discussions ensued.

- ↓ Mr. Zelko inquired if we have received the Johnson and Johnson vaccine. Ms. Olenek replied, ‘Not at this time. Illinois is scheduled to receive approximately 83,000 doses. Will County is not on the list to receive the 1st round of vaccines.’

COVID-19 EQUITY (ED)

Ms. Olenek discussed the memorandum included in the packet that was sent to herself, Mr. Zelko, and various County Board members. The correspondence was sent on behalf of the Justice and Racial Equity for Will County Coalition along with other community groups, in regard to the WCHD equitable vaccine distribution. Ms. Olenek briefly discussed the follow-up letter sent back to Mr. Vera regarding the multiple programs and services we provide that are considered “equity based.” The community groups represented in the memo spoke at the March 9th Joint committee meeting of the Diversity and Inclusion Committee and the Public Health and Safety Committee. As a result of the conversations, the County Board Committee voted to advance the recommendation to hire an Equity Manager under the County Executive’s direction to address issues throughout the County and various County departments.

- ↓ Ms. Tyson added she thought everyone was well represented and agreed Ms. Jackson needs additional staff to help assist with equity issues.

Ms. Olenek mentioned we do have many clinics set up to target the senior, Hispanic, and black and brown communities through April 15th; will add additional clinics when the need arises. Ms. Olenek discussed the various clinics and dates upcoming. Brief discussion ensued.

MAPP COLLABORATIVE – COVID-19 EQUITY PLAN

Ms. Garrett presented documents from the MAPP Collaborative regarding the establishment of a community-based initiative. The COVID-19 Health Equity and Access Response Team (HEART) will be a sub-committee of MAPP. COVID-19 HEART was formed to help diminish health disparities observed by disproportionately impacted communities of Will County in order to increase health and improve health outcomes of all residents.

EXECUTIVE SESSION RE: EMPLOYMENT / LEGAL MATTERS - NONE

BOARD MEMBERS' COMMENTS/CONCERNS – NONE

Mr. Vera, SSIP addressed the following issues:

- o Concerns regarding the lack of vaccine PODS and noted the communities that are more desolate continue to be hard to reach. He would like to see more PODS set-up closer to those areas. Mr. Vera suggested utilizing community health navigators.
 - o Addressed the issue of only having five bilingual respondents due to a Spring survey of 1700 participants conducted by MAPP.
 - o Language barrier issues.
- Mr. Zelko asked Mr. Vera to put together a proposal on how to get into the community, communication, and how to have the navigators go into the communities for the vaccine clinics. Brief discussions ensued.

PUBLIC CONCERNS AND COMMENTS – NONE

Questions were submitted via the chat room which will be included as attachment with the minutes. Ms. Olenek and Ms. Garrett fielded those questions.

Mr. Simeon-Cox, SSIP inquired if the MAPP COVID-19 HEART initiative will have sufficient funding for efficacy purposes? Ms. Garrett noted, proposals for mini grants, along with contractual agreements with community-based organizations for delivering various services will be taken into consideration. Mr. Zelko suggested putting together some deliverables and bring to the Board of Health meeting next week.

ADJOURNMENT

At 5:05p.m. a motion was made to adjourn the meeting.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Reiland
AYES:	Mr. Zelko, Dr. Terrell, Ms. Mackey, Ms. Reiland, Ms. Tyson

By: _____
James Zelko, President
Will County Board of Health

By: _____
Stephanie Baskin, Executive Assistant
Will County Health Department

**WILL COUNTY HEALTH DEPARTMENT
BOH REGULAR MEETING MINUTES
MARCH 17, 2021**

IN ACCORDANCE WITH EXECUTIVE ORDER 2020-07 ISSUED BY GOVERNOR PRITZKER, THIS MEETING IS HELD VIRTUALLY VIA MICROSOFT TEAMS APP. WILL COUNTY BOARD OF HEALTH MEMBERS WILL BE ATTENDING THE MEETING REMOTELY AND THE GENERAL PUBLIC IS STRONGLY ENCOURAGED TO DO THE SAME.

The monthly meeting of the Board of Health held via virtual conference call was called to order at 3:01 p.m., Mr. Zelko, President presiding.

ROLL CALL/ QUORUM PRESENT

MEMBERS PRESENT

James Zelko, President
Billie Terrell, PhD., Vice President
John Cicero, Secretary
Donald Gould
Paul Hertzmann
Gary Lipinski, M.D.
Ms. Mackey
George Pitsilos, M.D. (arrived at 3:15pm)
Dr. Ramos
Nanci Reiland
Scott Soderquist, D.D.S.
Margaret Tyson

MEMBERS ABSENT

OTHERS PRESENT


Dan McGrath, Assistant State's Attorney
Marie Lindsay, Governing Council, Chair
Tanner Simeon-Cox, SSIP, Staff

PLEDGE OF ALLEGIANCE

PRESIDENT'S COMMENTS

Mr. Zelko welcomed everyone to the meeting and thanked everyone for their participation.

EXECUTIVE DIRECTOR'S COMMENTS

Ms. Olenek wished everyone a Happy St. Patrick's day. 

Ms. Olenek shared and read a card mailed from a resident sending positive feedback regarding the vaccination clinic.

PUBLIC COMMENTS FOR AGENDA ITEMS ONLY

Ms. Olenek responded and fielded questions submitted via the chat room which will be included as attachment with the minutes.

APPROVAL OF BOARD OF HEALTH MINUTES

Moved to approve the February 10, 2021 COVID-19 Response Committee (Special Meeting) minutes as presented.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Tyson
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Gould, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Dr. Ramos, Ms. Reiland, Ms. Tyson

Moved to approve the February 17, 2021 Regular Session minutes as presented.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Mr. Cicero
SECONDER:	Dr. Terrell
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Gould, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Dr. Ramos, Ms. Reiland, Ms. Tyson

TREASURER’S REPORT AND DEPARTMENT FINANCIAL REPORTS

Ms. Bilotta provided a detailed explanation of the financial reports including revenue, expenditure, and cash reports dating from November 2020 to February 2021.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Mr. Hertzmann
SECONDER:	Dr. Lipinski
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Gould, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Dr. Ramos, Ms. Reiland, Ms. Tyson

REPORTS FROM DIVISIONS

Reports were provided in the packet by the Chief Executive Officer, Chief Medical Officer, Division Directors, and Media Services Manager.

Administrative Services (Presented Monthly Reports for the month of March)

- Report of activities were provided in the packet for the Board’s review.
- Ms. Bilotta briefly reiterated on the building updates included in the packet.
- ✚ Ms. Bilotta responded and fielded questions submitted via the chat room which will be included as attachment with the minutes.

Behavioral Health Programs (Presented Monthly Reports for the month of March)

- Report of activities were provided in the packet for the Board’s review.
- Dr. Troiani reported regarding Tele-Therapy, HB3498 is being presented to legislation. This legislation will make reimbursement through private insurance as well as Medicaid permanent.
- Dr. Troiani mentioned as of March 17th, BH has collected \$253,179.46 in deposits.
- Dr. Troiani noted as of March 1st BH staff is operating at 50% capacity onsite; Psychological on-site services for children have begun.
- Dr. Troiani stated BH is considering re-naming one of the group rooms after David Partida in memoriam for his service and dedication.

Ms. Jackson responded, and fielded questions submitted via the chat room which will be included as attachment with the minutes.

Chief Executive Officer – CHC (Presented Monthly Reports for the month of March)

Report of activities were provided in the packet for the Board’s review.

Chief Medical Officer – CHC (Presented Monthly Reports for the month of March)

Report of activities were provided in the packet for the Board’s review.

Environmental Health and Lab (Presented Monthly Reports for the month of March)

- Report of activities were provided in the packet for the Board’s review.
- Mr. Casey reported on the following topics:
 - West Nile Virus and Swimming and Bathing Beach program interviews with student interns has begun.
 - Larvicide deliveries are expected the week of April 5th.
 - Recruitment is underway for a Sampler.
 - Proposed changes to HB3509 that might affect food trucks is going to the General Assembly. This legislation change will create the Food Truck Freedom Act.
 - Contacted by Levy Catering food control at Joliet Speedway and NHR drag strip were released from contract; they do not have any scheduled dates as of today.

Family Health Services – (Presented Monthly Reports for the month of March)

- Reports of activities were provided in the packet for the Board’s review.
- Ms. VanderBoegh reported starting Thursday, March 25th, HIV testing will be available by appointment on-site.

Emergency Preparedness and Response (EP&R) (Presented Monthly Reports for the month of March)

Due to the vaccination roll-out, Ms. Weber was not able to provide a written report. Ms. Weber reported EP&R has no updates at this time.

Media Services (Presented Monthly Reports for the month of March)

- Mr. Brandy updated the Board on past/upcoming events scheduled.
- Mr. Brandy shared Ms. Olenek appeared on WJOL this morning reporting on vaccine updates.

OLD BUSINESS

COVID-19 RESPONSE (ED)

Ms. Jackson presented a Power Point slideshow regarding Covid-19 Vaccination Updates as of March 17th. The PP slideshow included: vaccines administered / total completed doses, vaccination clinic schedules/locations/partner clinics, vaccine inventory, and call center updates. Ms. Jackson noted the PR Team will begin taking over the website today.

Discussions ensued regarding additional scheduling and notifications about Wilmington’s residents, residents asking to re-register at other partnering sites due to appointments at the HD being too far out, and volunteering for the Wilmington location.

Ms. Olenek provided a brief follow-up from the March 10th meeting regarding the letter sent to Illinois Legislators – (Will County districts) outlining the need for steady ample supply of vaccines; Ms. Olenek requested any assistance they can provide including a timeline for the Johnson and Johnson supply.

Ms. Olenek provided an update regarding the meeting with Community Based Organizations about the rollout of the vaccines in an equitable manner affecting the Latin X and black and brown communities. The data provided at the previous March 10th meeting was reviewed and discussed in greater detail (i.e. targeting more specific populations, males, and geographical regions).

Ms. Olenek noted the Executive Committee of the County Board decided to re-allocate part of the \$3,000,000.00 funds to hire an Equity Coordinator under the Health Department’s guidance. Ms. Olenek is drafting the job description and will bring back to the Board and COVID-19 Committee for approval. Brief discussions ensued regarding the position of the Equity Coordinator and the potential hiring of additional translators.

Ms. Olenek mentioned we are moving forward with the community-based initiative COVID-19 HEART (Health Equity and Access Response Team) through our MAPP Collaborative. This sub-committee formed will help diminish health disparities observed by disproportionately impacted communities of Will County in order to increase health and improve health outcomes of all residents.

Mr. Vera, SSIP noted he is happy the discussions have started taking place for the Equity Coordinator. Mr. Vera also inquired if the proposal sent to Ms. Olenek and Ms. Tyson regarding navigators in the communities for the vaccine clinics will be discussed at this meeting? Mr. Zelko mentioned this discussion was not on the agenda this meeting; suggested to provide the copy of the proposal to the total COVID Committee. Discussions will ensue at the March 24th meeting.

SUBSTANCE USE TREATMENT PROGRAM / DASA LICENSE (BH)

Dr. Troiani mentioned in his Division report, majority of the updated details were included. Dr. Troiani mentioned meetings continue with Grundy County Health Department. Brief discussion ensued.

NEW BUSINESS

**RESOLUTION #21-16 APPROPRIATION OF FUNDS-COVID-19 MASS VACCINATION GRANT
ADDITIONAL FUNDS (ADM)**

WCHD obtained an IDPH COVID-19 Mass Vaccination Grant to help prevent transmission of COVID-19 through mass vaccination efforts and to help defray costs associated with the administration of the COVID-19 vaccine as well as relieve some of the financial burdens associated with responding to the COVID-19 pandemic. The Award of \$1,750,000 was increased to \$1,790,000 provided that the HD agrees to utilize EMTrack as the platform for COVID-19 vaccine administration. The Board of Health approves the additional appropriation of funds to the FY2021 Will County Health Department budget.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Lipinski
SECONDER:	Dr. Terrell
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Ms. Reiland, Ms. Tyson

RESOLUTION OF RECOGNITION (ED)

Ms. Olenek briefly read from the Joliet Board of School Inspectors the *Resolution Recognizing and Thanking the COVID-19 Vaccine Task Force, for Providing COVID-19 Vaccinations to Employees of the Joliet Public Schools District 86* displayed via the Teams screen.

VACATION TIME LOSS (ED)

The management team has lost vacation time since the inception of the pandemic. Ms. Olenek discussed the memorandum included in the packet regarding lost vacation time allotments and cost of hours. Included in the memo was the number of employees and total hours lost. Ms. Bergin was able to identify two funding sources; Mass Vaccination Plan IDPH and the Contact Training IDPH grant.

A motion was made to approve the grant funding to cover the buyout for the lost vacation time allotments / cost of hours for the duration of the pandemic. Mr. Cicero amended his motion to include an additional year pending the availability of funds. Mr. Zelko indicated the Board would revisit this in one year.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Mr. Cicero
SECONDER:	Dr. Terrell
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Dr. Ramos, Ms. Reiland, Ms. Tyson

Ms. Mackey suggested adding additional staff to identify the need to help alleviate staff from fatigue. The Board agreed. Mr. Hertzmann also encouraged staff take time off for wellness purposes.

BOARD OF HEALTH CENTRALIZED EMAIL

Ms. Olenek proposed the process for public health access to the Board members via email. Instructions and the process was included in the packets. Ms. Olenek will work with Mr. Melei and Mr. Brandy for the website addition.

EXECUTIVE SESSION RE: PERSONNEL / LEGAL MATTERS – NONE

APPROVAL OF PERSONNEL STATUS REPORT FOR THE WILL COUNTY HEALTH DEPARTMENT

A motion was made to approve all personnel changes for the Will County Health Department for the month of March.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Mackey
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Hertzmann, Dr. Lipinski, Dr. Ramos, Ms. Mackey, Ms. Reiland, Ms. Tyson

BOARD MEMBERS' COMMENTS/CONCERNS

Dr. Terrell thanked Ms. Jackson for all her hard work and efforts and congratulated everyone for the portal upgrade.

Ms. Olenek added the Communications Firm will be updating the newsletter going forward. The newsletter replaces Ms. Olenek's updates that were provided on a weekly basis.

PUBLIC CONCERNS AND COMMENTS

Ms. Jackson responded, and fielded questions submitted via the chat room which will be included as attachment with the minutes.

Ms. Tyson asked the name of the Tele-Health bill? Dr. Troiani replied, "HB3498 Tele-Health Services." As of yesterday, it is in the house and assigned for HealthCare Availability and Accessibility Community.

Dr. Lipinski noted great work on the COVID program.

ADJOURNMENT

At 5:17p.m. a motion was made to adjourn the meeting.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Mr. Cicero
AYES:	Mr. Zelko, Dr. Terrell, Mr. Cicero, Mr. Hertzmann, Dr. Lipinski, Ms. Mackey, Ms. Reiland, Dr. Ramos, Ms. Tyson

By: _____
John Cicero, Secretary
Will County Board of Health

By: _____
Stephanie Baskin, Executive Assistant
Will County Health Department

**WILL COUNTY HEALTH DEPARTMENT
THE BOARD OF HEALTH
COVID-19 RESPONSE COMMITTEE
BOH MEETING MINUTES
MARCH 24, 2021**

IN ACCORDANCE WITH EXECUTIVE ORDER 2020-07 ISSUED BY GOVERNOR PRITZKER, THIS MEETING IS HELD VIRTUALLY VIA MICROSOFT TEAMS APP. WILL COUNTY BOARD OF HEALTH MEMBERS WILL BE ATTENDING THE MEETING REMOTELY AND THE GENERAL PUBLIC IS STRONGLY ENCOURAGED TO DO THE SAME.

The Board of Health COVID-19 Response Committee held via virtual conference call was called to order at 3:00 p.m., Mr. Zelko, President presiding.

ROLL CALL/ QUORUM PRESENT

MEMBERS PRESENT

James Zelko, President
Billie Terrell, PhD., Vice President
Nanci Reiland
Margaret Tyson

MEMBERS ABSENT

Teena Mackey

OTHERS PRESENT

Susan Olenek, Executive Director
Stephanie Baskin, Executive Assistant
Cindy Jackson, Vaccine Director, FHS
Katie Weber, Program Coordinator, EP&R
Elizabeth Cervantes, SSIP
Lourdes Camacho, Resident
Gabriela Reyes, Accounts Payable Specialist, Translator
Jose Vera, SSIP
Venita Voss, SSIP

PLEDGE OF ALLEGIANCE

PRESIDENT'S COMMENTS

Mr. Zelko welcomed everyone to the meeting and thanked everyone for contributing their time.

EXECUTIVE DIRECTOR'S COMMENTS

Ms. Olenek mentioned, Saturday, March 20th, Illinois Department of Public Health (IDPH) released the most recent updated version (Version 7.0) of the Mass Vaccination plan. Phase 1c is eliminated – going directly into Phase 2.

PUBLIC COMMENTS FOR AGENDA ITEMS ONLY

Ms. Camacho was inquiring if a translator from the HD was able to translate her comments during the meeting. Ms. Olenek noted during the course of the meeting, she will try to get an interpreter to assist with translations.

APPROVAL OF BOARD OF HEALTH MINUTES

Moved to approve the March 10, 2021 Regular Session minutes as presented.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Tyson
AYES:	Mr. Zelko, Dr. Terrell, Ms. Reiland, Ms. Tyson

OLD BUSINESS

COVID-19 RESPONSE (CINDY JACKSON)

Ms. Jackson presented a Power Point (PP) slideshow regarding Covid-19 Vaccination Updates as of March 24th. The PP slideshow included: vaccines administered / total completed doses, vaccination clinic schedules/locations/partner clinics, vaccine inventory, and call center updates. Ms. Jackson noted the PR Team will begin taking over the website today.

Dr. Lipinski inquired if we are using providers to administer the vaccinations at the sites? Ms. Jackson replied, “we are using volunteers, nursing students; also seeking volunteers if interested.” Other discussions ensued regarding vaccination email messaging and registration updates.

Ms. Jackson mentioned Joliet has been selected for placement of Mobile Vaccination Units; currently working with the State regarding details and implementations.

Ms. Olenek met with the National Guard, IEMA, FEMA, IDPH, and WCEMA, at two additional sites in Will County (Romeville & Joliet). The Joliet site is being considered because of accessibility determinations. Ms. Olenek mentioned the importance of having the National Guard at the sites is they help bring consistent vaccine allocations.

- ↓ Mr. Zelko mentioned he is very impressed with the quality and quantity of the utilization of the PR firm. Mr. Zelko inquired if we are receiving the Johnson and Johnson vaccine? Ms. Olenek replied, “We have received a shipment, it was allocated for the Stateville NRC.” Brief discussions ensued.
- ↓ Mr. Zelko inquired if EMA continues to incorporate the phone system which targeted communities providing information in both English / Spanish (i.e. need for vaccine or vaccine locations)? Ms. Olenek replied, “Yes. Information continues to be disseminated through the reverse 9-1-1 system.” Ms. Jackson will look into the protocols and will bring the follow-up response back to the meeting in April.

Ms. Weber reported the WCHD has been utilizing the County issued GIS technology program (Owned by ESRI) since December for the survey to register. ESRI issues a monthly newsletter reporting on the different ways the software is utilized. ESRI released a Press Release regarding the partnership with Will County which was picked up by the media. Ms. Weber interviewed with USA Today, The Washington Post, & CNBC regarding the significance technology has played during the pandemic. The television interview will air March 25th 6pm est. on the Shepard Smith Show.

Ms. Tyson inquired if the publications will be added to the website? Ms. Tyson would like to share the information with various committees. Ms. Weber replied, “She will share the publication information with Ms. Olenek and Ms. Jackson and try to send links out for access.”

Ms. Weber provided a brief update regarding setting up vaccine clinics with the 55 and older communities.

NEW BUSINESS

RESOLUTION #21-17 PURCHASE OF PROMOTIONAL ITEMS FOR VACCINATION CLINIC (ADM)

WCHD is currently responding directly to the COVID-19 global pandemic. The WCHD’S communication firm (The Fource) has recommended the purchase of promotional items for the community vaccination clinics. The Board of Health approves the expenditure for clinic promotional items from The Fource in the amount of \$13,800.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Reiland
AYES:	Mr. Zelko, Dr. Terrell, Ms. Reiland, Ms. Tyson

RESOLUTION #21-18 PURCHASE OF UNIFORMS FOR VACCINATION CLINIC (ADM)

WCHD is currently responding directly to the COVID-19 global pandemic. The WCHD’S communication firm (The Fource) has recommended the purchase of uniforms for the community vaccination clinics. The Board of Health approves the expenditure for clinic uniforms from Atomic Air Jumps Inc. in the amount of \$14,062.

RESULT: APPROVED [UNANIMOUS]
MOVER: Dr. Terrell
SECONDER: Ms. Reiland
AYES: Mr. Zelko, Dr. Terrell, Ms. Reiland, Ms. Tyson

NEW VACCINE CLINIC SITE COORDINATOR (ED)

Ms. Olenek presented the job description and job functions for the Vaccine Site Coordinator position. Brief discussions ensued regarding the position details. The Board of Health approves the hiring of the Vaccine Site Coordinator as needed, bringing the hire to the full Board for final approval when appropriate.

RESULT: APPROVED [UNANIMOUS]
MOVER: Dr. Terrell
SECONDER: Ms. Reiland
AYES: Mr. Zelko, Dr. Terrell, Ms. Reiland, Ms. Tyson

NEW COVID VACCINE EQUITY COORDINATOR (ED)

Ms. Olenek discussed the job description and job functions of the COVID Vaccine Equity Coordinator / Manager. The Executive Committee of the County Board approved to move this position to the Board of Health to consider hiring for this position. This position will report to the Executive Director. The Board of Health approves to move forward bringing the Vaccine Equity Coordinator / Manager position to the full Board for final approval.

RESULT: APPROVED [UNANIMOUS]
MOVER: Ms. Tyson
SECONDER: Dr, Terrell
AYES: Mr. Zelko, Dr. Terrell, Ms. Tyson

COVID-19 JUSTICE & EQUITY COMMUNITY OUTREACH PROPOSAL (ED)

Ms. Olenek indicated at prior committee meetings, discussions regarding this position and criteria were being proposed by the several community-based organizations. Ms. Olenek discussed the COVID-19 Justice & Equity Community Outreach Proposal included in the packet. Discussions ensued regarding the content of the position and who this position would report to?

- Ms. Cervantes brought up several issues to be discussed:
- o The best way to advance equity and resource to utilize?
 - o How to catch up with discrepancies in the Black & Brown & Latin X hardest hit communities?
 - o The funding amount is not sufficient
 - o The messaging from a reputable source, instead of call centers
 - o Expansion of the CBO; not just inclusive to the one’s listed in the packet

Mr. Zelko agreed with all the valid points Ms. Cervantes indicated. Mr. Zelko noted, this would be the responsibility of the Vaccine Equity Coordinator / Manager. Mr. Zelko also suggested receiving County input regarding equitable funding. Mr. Vera thanked Ms. Olenek for sharing the hiring process of the Vaccine Equity Coordinator / Manager.

Ms. Camacho inquired if she and some members of the community can attend the meetings on a regular basis and if it’s possible to make the meetings bilingual? Ms. Olenek stated translating the meeting would be complicated. Ms. Olenek noted, other ethnicities may also be attendance of the meetings (Polish, Arabic, etc--) which would make it difficult to translate those languages in real time. Ms. Olenek will look into translation options. We will also speak with the I.T.T. team to see if there is a feature on the Teams site for translation during meetings.

Ms. Camacho inquired when we will receive the Johnson & Johnson vaccine? Ms. Olenek noted she does not have a date when we will receive the vaccine for the public.

Ms. Camacho inquired if she has questions during non-meeting dates, is there someone she can contact? Ms. Olenek advised she can call the contact center, which is staffed with Spanish-speaking staff. The website can also be translated into Spanish as well.

Ms. Voss echoed the previous sentiments of Ms. Camacho and Mr. Vera regarding recruitment and the importance of the Vaccine Equity Coordinator / Manager position. Ms. Voss noted education and outreach is a vital portion of the position.

Ms. Tyson inquired when we will move to 1c? Ms. Olenek replied, "There is no 1c. IDPH went from 1b to 1b+ to 2." We are currently moving to 1b+." Ms. Olenek does not have a timetable for 2 currently. Once 1b+ is available, we will offer the vaccinations to the entire population.

EXECUTIVE SESSION RE: EMPLOYMENT / LEGAL MATTERS - NONE

BOARD MEMBERS' COMMENTS/CONCERNS – NONE

PUBLIC CONCERNS AND COMMENTS – NONE

ADJOURNMENT

At 5:05p.m. a motion was made to adjourn the meeting.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dr. Terrell
SECONDER:	Ms. Tyson
AYES:	Mr. Zelko, Dr. Terrell, Ms. Reiland, Ms. Tyson

By: _____
James Zelko, President
Will County Board of Health

By: _____
Stephanie Baskin, Executive Assistant
Will County Health Department

Will County Health Department

FY 2021

Balance Sheet

Four Months Ending March 2021

	<u>Beg Bal</u> <u>12/1/2020</u>	<u>End Bal</u> <u>3/31/2021</u>	<u>Change</u>
Assets			
Cash and Cash Equivalents	5,040,148.35	4,846,277.21	(193,871.14)
Investments	4,230,000.00	4,230,000.00	-
Receivables	4,358,870.29	302,032.10	(4,056,838.19)
Total Assets	<u>13,629,018.64</u>	<u>9,378,309.31</u>	<u>(4,250,709.33)</u>
Liabilities			
Payables	499,859.93	157,537.38	(342,322.55)
Due To	1,179.54	500,000.00	498,820.46
Unearned revenue	24,919.56	2,398,473.64	2,373,554.08
Equity			
Fund Balance	13,103,059.61	6,322,298.29	(6,780,761.32)
Total Liabilities & Equity	<u>13,629,018.64</u>	<u>9,378,309.31</u>	<u>(4,250,709.33)</u>

Will County Health Department

FY 2021

Change in Cash

Four Months Ending March 2021

	Dec 2020-Jan 2021	Feb 2021	Mar 2021	Total
Cash and Cash Equivalents				
Beginning Balance	5,040,148.35	2,782,337.89	1,747,165.91	5,040,148.35
Deposits	2,325,808.67	1,539,628.57	6,231,404.43	10,096,841.67
Loan from Corporate	-	-	500,000.00	500,000.00
AP Payments	(1,804,296.78)	(1,168,403.11)	(2,251,868.61)	(5,224,568.50)
Payroll	(2,779,322.35)	(1,406,397.44)	(1,379,244.98)	(5,564,964.77)
Prior Period Due To	-	-	(1,179.54)	(1,179.54)
Ending Balance	<u>2,782,337.89</u>	<u>1,747,165.91</u>	<u>4,846,277.21</u>	<u>4,846,277.21</u>
Investments				
Beginning Balance	4,230,000.00	4,230,000.00	4,230,000.00	4,230,000.00
Additions to Investments*	-	-	-	-
Maturities*	-	-	-	-
Ending Balance	<u>4,230,000.00</u>	<u>4,230,000.00</u>	<u>4,230,000.00</u>	<u>4,230,000.00</u>
Total Cash and Investments	<u><u>7,012,337.89</u></u>	<u><u>5,977,165.91</u></u>	<u><u>9,076,277.21</u></u>	<u><u>9,076,277.21</u></u>

* Investments will be update retrospectively in the coming months.

Note: Prior Period Due To includes FY20 Interdepartmental Transfers includes copy charges and postage.

Will County Health Department

FY 2021

Budget Comparison - Revenue Four Months Ending March 2021

Revenue	<u>Adopted Budget</u>	<u>Revised Budget</u>	<u>Revenue</u>	<u>Target - 33.3%</u> <u>Percent Realized</u>
Property Taxes	10,015,000.00	10,015,000.00	-	-
Intergovernmental Grants & Contracts				
Administration	1,157,113.00	2,907,113.00	-	-
Emergency Preparedness and Response	392,571.00	392,571.00	31,066.25	7.91%
Environmental Health	148,540.00	148,540.00	39,953.14	26.90%
Behavioral Health	740,492.00	740,492.00	-	-
Family Health Services	4,468,485.00	6,241,395.00	490,066.72	10.97%
Community Health Center	3,444,417.00	3,533,600.00	210,163.37	6.10%
	<u>10,351,618.00</u>	<u>13,963,711.00</u>	<u>771,249.48</u>	<u>7.45%</u>
Licenses, Permits & Charges for Services				
Administration	229,350.00	229,350.00	82,224.85	35.85%
Environmental Health	1,833,250.00	1,833,250.00	1,358,721.66	74.12%
Behavioral Health	3,009,154.00	3,009,154.00	480,185.24	15.96%
Family Health Services	407,300.00	407,300.00	24,666.08	6.06%
Community Health Center	5,399,900.00	5,399,900.00	803,582.08	14.88%
	<u>10,878,954.00</u>	<u>10,878,954.00</u>	<u>2,749,379.91</u>	<u>25.27%</u>
Fines and Forfeitures	500.00	500.00	-	-
Miscellaneous Revenues				
CHC Rental Income	8,400.00	8,400.00	2,800.00	33.33%
Donations/Fundraiser	500.00	500.00	-	-
Expense Recovery	-	-	4,769.10	-
CHC Other: MCO Capitation, Performance, EHR	171,500.00	171,500.00	138,250.91	80.61%
Anticipated New Revenues	6,000,000.00	2,387,907.00	-	-
Funds On Hand	1,125,902.00	1,125,902.00	-	-
	<u>7,306,302.00</u>	<u>3,694,209.00</u>	<u>145,820.01</u>	<u>2.00%</u>
Transfers In	628,759.00	628,759.00	-	-
Total Revenue	<u>39,181,133.00</u>	<u>39,181,133.00</u>	<u>3,666,449.40</u>	<u>9.36%</u>

Will County Health Department

FY 2021

Budget Comparison - Expenditures Four Months Ending March 2021

	<u>Adopted Budget</u>	<u>Revised Budget</u>	<u>Expenditures</u>	<u>Encumbrances</u>	<u>Remaining Budget</u>	<u>Target - 33.3%</u> <u>Percent Used</u>
Expenditures						
Personnel - Salaries						
Administration	1,675,084.00	2,237,284.00	489,475.86	-	1,747,808.14	21.88%
Emergency Preparedness and Response	257,490.00	293,840.00	91,194.39	-	202,645.61	31.04%
Environmental Health	1,601,520.00	1,601,520.00	434,480.01	-	1,167,039.99	27.13%
Behavioral Health	3,431,778.00	3,431,778.00	963,650.20	-	2,468,127.80	28.08%
Family Health Services	4,760,972.00	4,380,670.75	1,423,387.68	-	2,957,283.07	32.49%
Community Health Center	7,419,579.00	7,449,079.00	2,162,776.63	-	5,286,302.37	29.03%
Total Personnel - Salaries	<u>19,146,423.00</u>	<u>19,394,171.75</u>	<u>5,564,964.77</u>	-	<u>13,829,206.98</u>	28.69%
Personnel - Benefits						
Administration	725,005.00	997,574.00	210,558.95	-	787,015.05	21.11%
Emergency Preparedness and Response	119,121.00	121,902.00	37,611.33	-	84,290.67	30.85%
Environmental Health	862,556.00	862,556.00	239,076.52	-	623,479.48	27.72%
Behavioral Health	1,642,564.00	1,642,564.00	427,712.91	-	1,214,851.09	26.04%
Family Health Services	2,235,443.00	2,235,443.00	672,838.92	-	1,562,604.08	30.10%
Community Health Center	3,306,339.00	3,318,435.00	900,404.76	-	2,418,030.24	27.13%
Total Personnel - Benefits	<u>8,891,028.00</u>	<u>9,178,474.00</u>	<u>2,488,203.39</u>	-	<u>6,690,270.61</u>	27.11%
Commodities						
Administration	181,100.00	398,800.20	55,879.67	-	342,920.53	14.01%
Emergency Preparedness and Response	3,565.00	5,798.00	2,584.35	-	3,213.65	44.57%
Environmental Health	180,700.00	180,700.00	138.58	71,984.00	108,577.42	0.08%
Behavioral Health	21,950.00	21,950.00	-	-	21,950.00	0.00%
Family Health Services	193,236.00	194,053.23	19,278.24	-	174,774.99	9.93%
Community Health Center	1,117,496.00	1,168,623.00	207,204.11	-	961,418.89	17.73%
Total Commodities	<u>1,698,047.00</u>	<u>1,969,924.43</u>	<u>285,084.95</u>	<u>71,984.00</u>	<u>1,612,855.48</u>	14.47%
Contractual Services						
Administration	787,323.00	1,955,451.15	204,110.94	-	1,751,340.21	10.44%
Emergency Preparedness and Response	22,320.00	20,522.00	787.16	-	19,734.84	3.84%
Environmental Health	208,050.00	186,411.40	30,464.19	-	155,947.21	16.34%
Behavioral Health	880,510.00	880,510.00	137,485.88	-	743,024.12	15.61%
Family Health Services	136,384.00	2,278,778.02	1,539,373.54	-	739,404.48	67.55%
Community Health Center	1,355,048.00	1,351,344.65	180,935.90	-	1,170,408.75	13.39%
Total Contractual Services	<u>3,389,635.00</u>	<u>6,673,017.22</u>	<u>2,093,157.61</u>	-	<u>4,579,859.61</u>	31.37%
Capital Outlay						
Administration	40,000.00	40,000.00	-	-	40,000.00	-
Environmental Health	-	21,638.60	-	-	21,638.60	-
Community Health Center	16,000.00	16,000.00	15,800.00	-	200.00	98.75%
Total Capital Outlay	<u>56,000.00</u>	<u>77,638.60</u>	<u>15,800.00</u>	-	<u>61,838.60</u>	20.35%
Other Expenditures - Anticipated New						
Administration	6,000,000.00	2,387,907.00	-	-	2,387,907.00	-
Total Expenditures	<u>39,181,133.00</u>	<u>39,681,133.00</u>	<u>10,447,210.72</u>	<u>71,984.00</u>	<u>29,161,938.28</u>	<u>26.33%</u>

Administration

1. Administration conducted a site visit at the 501 Ella building with Will County Maintenance staff – Tyler Bargas on Saturday, March 27th to test the fire alarm and paging system. The site visit was to determine if the fire alarm / emergency alert system can be adequately heard throughout the building. Several areas of concern were noted and were then passed along to Leopardo during the “warranty” walk through mentioned below.
2. Administration continues to work with the Leopardo and the County regarding the new building and campus issues. Our “warranty” walk through was conducted on March 30, 2021. Several minor items along with one significant item were noted and still need to be resolved. A detailed list was put together and provided to Leopardo and the County to ensure the items are documented and completed in a timely manner. The significant item is in regard to not being able to adequately hear the fire alarm / emergency alert system in all areas of the 501 Ella building. Leopardo will be discussing our current fire alarm / emergency alert system with Kluber and the County to develop a plan for correction.
3. The City of Joliet conducted their final inspection on April 6, 2021. No issues of concern were noted, and the City issued the official Certificate of Occupancy for the new 501 Ella building dated April 6, 2021.
4. The wayfinding signs were installed on March 30, 2021 (see photos below). The WCHD is still working with the County to have the cross walks painted / striped and permanent “no parking” signs installed along with front driveway.



Finance - BOH Report – provided by Denise Bergin, Director Finance & Grant Management

In addition to agency deposits, monthly and quarterly grant expenditure reporting:

1. State Fiscal Year 2022 grant applications are now being posted by the state. These will be completed as issued. We are still waiting on one SFY2021 IDPH grant contract for the Adolescent Health Grant.
2. We have worked through the majority of issues related to the depositing of grant checks through the D365 Project Management module and anticipate all remaining issues to be resolved in April. We continue working with the county on financial reporting capabilities.
3. The IDPH Local Health Protection grant award was increased by \$54,200 and direct funding of \$335,000 was added for SFY2021, bringing the LHP award to \$880,613. Grant term remains July 1, 2020 through June 30, 2021. This increase will support existing personnel expenses not covered by the original award.



Additionally, any late Contact Tracing expenses that come in for the closed CARES funding period, 6/1/20 through 12/30/20, will be covered under this funding.

4. We are compiling the Schedule of Expenses for Federal Awards as required by the Will County Finance Department for the annual Single Audit performed by Baker Tilly.
5. We are reviewing SFY2021 grant budget performance and completing budget revisions as necessary to ensure grant funds are fully expended by June 30, 2021.

ITT- BOH Report – provided by Anthony Melei, Director ITT

COVID-19 Vaccination Scheduling and PODs

Juvare EMTRACK

Juvare EMTRACK is being utilized for 42 Point of Dispensing (POD) events, of various sizes. EMTRACK enables patients to schedule appointments and documents the patients receiving vaccine at the clinic. The vaccine information from the clinic is uploaded to the Illinois Immunization Registry (I-CARE).

On March 23, 2021 Juvare EMTRACK had a network crash that affected our local health department and others. The Will County Health Department internal clinic had to move to manual paper processes to administer vaccines. Juvare reported that they were having issues with their hosting provider. The system was restored later in the day.

Board of Health Email

An email address (boh@willcountyhealth.org) was created for the public to contact the Board of Health. The address is posted on the website, on the Board of Health webpage ([Board of Health | Will County Health Department](#)) <https://willcountyhealth.org/board-of-health> (see below).

Will County Board of Health Meetings

Will County Board of Health meetings occur on the Third Wednesday of each month, in the Will County Health Department Community Room, at 501 Ella Avenue, Joliet, IL 60433.

(At this time, meetings are virtual)

[Board of Health Meeting 2021](#)
[Board of Health Meeting 2020](#)
[Board of Health Meeting 2019](#)
[Board of Health Meeting 2018](#)
[Board of Health Meeting 2017](#)

If you have questions please contact us at boh@willcountyhealth.org

Website Updates

The Fource Group and Moatzart Design

Due to increased traffic on our website WCHD needed to upgrade our website plan to accommodate more visitors. The social media activities and imported statistics in real-time are adding more traffic to our website. Therefore, we added more resources to our servers.

In addition, we are in the process of cleaning up the website to improve performance. We found a couple plug-ins that are not very stable. A plug-in is a third-party application used to add features to a website. One of the unstable plug-ins identified was Simple Job Board. Simple Job Board uses a lot of resources. This plug-in adds the features for job postings and job applications on the website. However, we have outgrown this feature. Stacey Knack and I are reviewing a job service to manage the job posting and the application process. The website would link to a customized Will County Health Department page that the job posting

service would host. Human Resources would manage the job application process from job posting, application, review and final status through this service.

I met with Program Managers from each Division, to discuss the Request for Appointment button on the website. Initially, this was used for new patients to request a medical or dental appointment at the CHC. However, website visitors were using the form to contact the other Divisions. We are in the process of designing this form to accommodate the other Division programs.

NextGen System Upgrade

Prior to the actual upgrade in the production system, the NextGen system must be upgraded in the development environment. Once the development system is upgraded, the Community Health Center staff are required to test and document test operational scenarios to make sure that system is functioning properly for operations. Once the testing is complete, CHC staff sign off on the tests in their area (Practice Management, Billing, Electronic Health Records, and Dental Health Records) documenting that the tests passed. If a test does not pass, Michael Cirullo, Electronic Health Record Project Manager and OSIS Online, determines why the test did not pass, and implements a resolution. After all tests have passed, the NextGen upgrade is scheduled and implemented in the production system. The same tests that were performed in development are then performed in production, to verify the same results.

Therefore, on March 19, 2021, the Community Health Center in conjunction with OSIS Online and NextGen began the process of upgrading NextGen to version 6.2921 UD4. The upgrade process took the entire weekend starting on Friday evening to back up the system, begin upgrade, to Sunday (March 21st), when the system was tested for clinic operations on Monday. The upgrade was successful.

Super User Program

The CHC in conjunction with OSIS is implementing a Super User program, which is required for the operation of Nextgen Electronic Health Records. NextGen and all other Electronic Health Record systems change rapidly, due to government regulations and technology improvements. Super Users need to keep up with these changes with regular training and webinars. Super Users and Provider Champions are the first line of support for end-users.

The Super User Program has the following components:

- High skill-level end users from all departments that use NextGen.
 - Reception
 - Medical Assistants/Intake Staff
 - Dental Assistants
 - Ophthalmological Technicians
 - Appointment Scheduling/Call Center Staff
 - Care Managers
 - Nurse Midwives
 - Lab Technicians
 - Clinical Educators
 - Case Management
 - Referral Coordinators
 - Medical Records
 - Coding and Billing staff
 - IT Support
- Provider Champions--One provider from each specialty



Will County
Health Department &
Community Health Center

- Assist with communication and implementation of changes in the system.
- Triage, address and communicate issues within their respective department/location.
 - Open tickets as needed, when instructed.
- Conduct employee workflow skill level assessments routinely.
- Assist in training new users.
- Provide testing, training, and support during upgrades

Joseph E. Troiani, Ph.D., CADC
Director of Behavioral Health Programs
April 2021

1. For the month of March 2021, deposits came in at \$365,517. By way of contrast, the prior year's March saw the following indicated dollar amounts:
 - 2020 - \$175,239
 - 2019 - \$160,465.49
 2. As of the 10th of April 2021, a total of \$26,255.67 has been deposited month-to-date.
 3. It is with pride that I report that Dr. Scott DuBois was offered and has accepted the position of the Coordinator for the Problem-Solving Court Program for the Will County State's Attorney's Office. He will be replacing Julie McCabe who will be retiring from that position. Dr. DuBois will be in good company because the entire clinical staff of five professionals at the courthouse has either trained and/or worked for the Division of Behavioral Health at the Health Department. In his position he will oversee the Drug Court Program, Veterans Court Program, Mental Health Court, and the Adult Re-deploy Illinois Program.
- Dr. DuBois has been with the health department for the past 17 years, starting off as a clinical psychology doctoral intern as well as completing his post-doctoral internship. After being hired on as a Mental Health Counselor II he moved up the ranks to first a Program Manager and next Program Coordinator position. In his current position he has co-chaired the Adult LAN (Local Area Network) monthly meetings and was the Behavioral Health Action Team Co-Chair for the Will County MAPP (Mobilizing through Action, Planning, and Partnership). His leaving will leave a big hole on the management team.
4. AETNA Better Health has not only recognized the Behavioral Health Division but has financially awarded it for *"the powerful interventions you have put in place to increase member engagement and innovate to care for our most vulnerable members"*. As a result of the clinical services that we provide, *"Aetna Better Health is happy to announce that we are extending the MCR Partnership through 2021 and providing a new Grant of \$20,000 to continue participating in the pilot."*

Behavioral Health Services has been acknowledged by Dr Constance Williams the DMH Chicago area Executive Director and Linnie Tignes, the DMH Area Liaison, for our community response and extended outreach to our patients during the COVID-19 Pandemic. At the beginning of the pandemic the health department developed a guidance on how to reach out to our patients to assist them during the crisis. When received by DMH it was distributed throughout the state and Mental Health America distributed it nationwide. The Adult LAN has helped under our leadership to coordinate and share resources and information for both Will and Grundy Counties.

5. The Governors Executive Order 2021-06 Telehealth Executive Order has been extended now through May 1, 2021. The proposed legislation to make the utilization and Medicaid re-imbursement for tele-behavioral health law in Illinois has been moving ahead in the legislative process.

6. On Monday - March 8th Dr. Joe Troiani was interviewed on WJOL-AM radio. The focus of the interview was regarding the psychological consequences of the COVID-19 Pandemic. A special focus was the impact of the year long restriction on children and adolescents as well as on the elderly.
7. On Tuesday – March 16th Dr. Joe Troiani was interviewed by Carol Sharwark of the South Town Economist. The interview was regarding the psychological impact of the COVID-19 Pandemic. The article is expected to appear in the near future.
8. Progress report on the development of the Substance Treatment Options Program (STOP):
 - We have been meeting with Laura Garcia, MAAPS, LPC, NBCC, CADC, Deputy Director, Bureau of Licensure, Compliance, and Monitoring for Substance Use Prevention and Recovery (SUPR). She has been providing consultation and assistance with the development of our application package.
 - There have been meetings with the agencies of the Adult Local Area Network (LAN) for the purpose of developing linkage agreements which are a required of the SUPR application.
 - Continued weekly planning with Dr. Burk.
 - We continue to research evidence-based practices and models of care along with the current best-practices for the assessment of substance use. This is a SUPR requirement.



Mary Maragos
CEO, Community Health Center
April 2021

The 2020 Uniform Data System (UDS) Report was revised and re-submitted to HRSA. See attached report comparing some of our 2020 data to previous years. Our unduplicated **patient numbers were actually increased by 3842, an increase of 33.4%**! Previous reports used to calculate patient numbers and visits did not capture many of the telehealth/ virtual visits. This was questioned by HRSA and we were allowed extra time to correct the reports. The **number of patient encounters went up by 5666, or 14.2%**! HRSA previously set our patient target for 2020 at 15,100. This means that for the first time in many years, we actually **exceeded our patient target!** In the past several years we were penalized and given less funding from HRSA due because we fell short of our patient target number.

IDPH Oral Health Promotion Program – The Governing Council gave its approval to submit an application to the IL Dept. of Public Health for an Oral Health Promotion grant, formerly referred to as the “Dental Sealant Grant.” Our program objectives are tied to Healthy People 2030 and IDPH Division of Oral Health Objectives. They are: 1) Increase the number of children and families who are educated on self-care, obtaining access to professional care; 2) Increase the number of low-income children who have a preventive dental visit; 3) Increase the number of children and women during pregnancy who are connected to a dental home. We are told our application was pre-approved for the following amounts: 2/1/21-9/30/21 \$22,500; 10/1/21-9/30/22 \$28,450. We plan to use money to fund a part time 0.5 FTE dental hygienist who is or will become a Certified Public Dental Hygienist, allowing for more independent practice. He/she will provide the oral health education and oral healthcare services to patients on the mobile unit in Will and Grundy counties. Other items to be funded are mileage costs and a monthly subscription to ADA oral health education, to be streamed to our 5 dental operator TV's.

United Way of Will County Application – With 2 weeks' notice, we were asked to reapply for United Way funding. The Will County Community Health Center's mobile dental services were funded by the United Way from July 2012 through June 2020, starting with \$14,000 annually and declining to \$5000 in the last year. Funding supported mobile dental services to uninsured at area shelters, nursing homes, and other community sites. In return for funding, data was collected monthly and semi-annual reports were required. Our Administration was expected to complete a detailed application, attend monthly and annual meetings, perform an annual presentation or host a site visit for program review, and conduct fundraising efforts throughout the year. Other FY21 grant funding pertaining to dental services includes: 1) IL Children's Healthcare Foundation (\$50,000), 2) IDPH Oral Health Planning Grant (\$8000), and 3) IDPH Oral Health Promotion Grant (\$22,500). The GC gave its approval to not apply for United Way funding for this fiscal year.

COVID vaccinations at the WCCHC – We expect to receive COVID-19 vaccinations directly from HRSA starting the week of April 12. We have established 3 vaccination clinics at our Joliet location on Tuesdays, Wednesdays, and Fridays. Since patients are scheduled for an office visit, vital signs are taken, medical problems and medications are documented, and a plan for further medical care is established. We can accommodate 40-50 patients per day. We plan to add one day (Wednesdays) in Monee starting on April 14. On other days of the week clinic patients will be offered the vaccine during their regular visits.

New patients are accepted. We are doing outreach to specific populations (such as seniors, diabetics, those with HIV, people living in Eastern Will County) to schedule appointments personally. HRSA's goal in providing us with vaccinations is to increase access to the vaccine for minorities and persons of color. So far 51% of our vaccinations have been given to persons of Hispanic/Latino ethnicity. 23% of the vaccinations were given to racial minorities (Native Americans, Asians, Blacks/African Americans.)

COVID VACCINATIONS

	1st Dose	Hispanic	Native American	Asian	Black/AA	Caucasian	2nd Dose
3/3/2021	20	9	0	2	4	14	
3/10/2021	43	26	0	0	10	16	
3/17/2021	43	20	2	0	12	29	
3/24/2021	53	27	1	0	5	47	
3/30/2021	40	18	2	1	7	31	
3/31/2021							20
4/1/2021	10	7	0	0	2	8	
TOTALS	209	107	5	3	40	145	20

2021 Medical, Hospital, and BH Fees – The Governing Council gave its approval of our Medical, BH, and Hospital fees for 2021, based on the CMS Usual and Customary for this geographic area, at the 75th percentile. At a previous site visit, HRSA recommended that we use this as guide for setting our fees. Note the proposed 2021 fees are in light blue; some have decreased slightly since last year and most have slightly increased.

New CHC Administrators! – We are very pleased to present our new Director of Nursing Renee Foster-McFarland. She has many years' experience as a Director of Nursing/ Nursing Supervisor and as a Quality/Risk Management program manager, including years of experience with FQHCs. She started work on March 22. Welcome Renee! On April 26 our new Quality/Risk Management Coordinator will begin. He is Philip Jass, a former Director of the Grundy County Health Department and seasoned project/business/safety manager and grant writer for 2 other Illinois FQHCs.

COVID-19 Update:

Numbers of Cases (raw numbers)

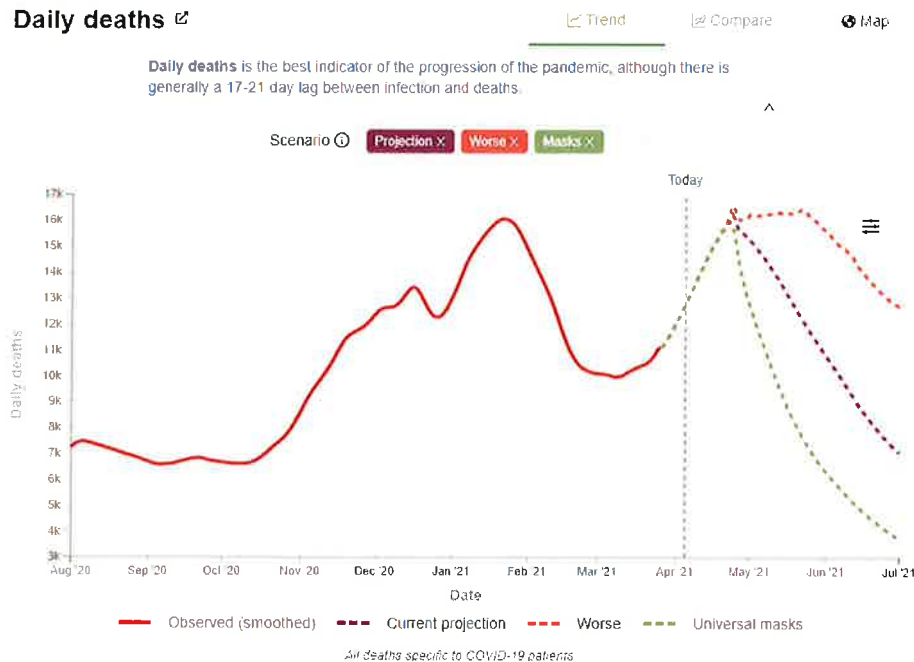
	<u>Cases</u>	<u>Recovered</u>	<u>Deaths</u>
World	~132.3 million	~106.5 million	~2.87 million
United States	~31.5 million	~24.0 million	568 K
Illinois	~ 1.26 million	~ 1.67 million	~ 24 K

~ worldometer.info (as of 4/5/2021)

Monthly Death Projections - Global (through JULY 2021):

Noted is a **continued rise in projected deaths** through **April 2021** with a **downward trend** in **May, June, and July**

Daily deaths [↗](#)



~ healthdata.org (as of 4/1/2021)

Summary:

- In the U.S. daily cases are increasing, and daily deaths have remained largely constant
- In some states, most notably Michigan, a large **surge** is underway. Reasons...
 - relaxation of social distancing mandates
 - steady increases in mobility and travel
 - increase in the spread of the COVID B.1.1.7 variant virus
- Daily deaths could increase until mid-May should the aforementioned activities continue across the U.S.
- The experience in Europe should serve as a warning of the risks implied by the COVID B.1.1.7 variant
- Three factors may explain why increases in **U.S. cases have been less dramatic than in Europe** thus far...
 - later spread of B.1.1.7 after the peak of seasonality
 - higher vaccination rates
 - higher mask use
- The differences in U.S. cases and European case highlights how **relatively small changes in behavior** can have a profound impact on death rates.
- Although there are declining COVID case projections for the summer, a continued rise in cases depend dramatically on behavior in terms of vaccine confidence, continued mass vaccination, mask wearing, and avoidance of situations that pose a high-risk for transmission.
- In the U.S. 70.2% of people say they would accept or would probably accept a vaccine for COVID-19
- Vaccine confidence is down by 1.5 percentage points from last week, continuing a decline in vaccine confidence that began two weeks ago.
- It is expected that 186 million will be vaccinated by July 1st, which is down slightly from estimates one week ago

- By July 1, it is projected in the U.S. that 50,800 lives will be saved by the vaccine rollout

COVID-19 Question Follow-Up from March:

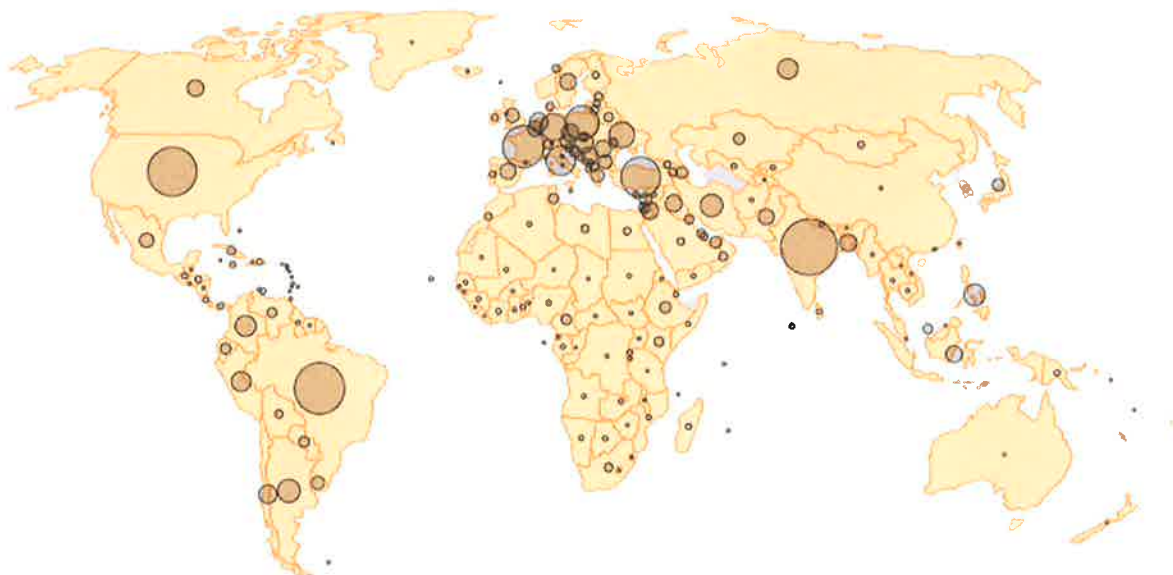
The board asked the question: ***"Why is the death rate from COVID higher in men"?***

The reasons are:

- Females have an XX chromosome, males have an XY chromosome. The X chromosome has more "microRNAs" on them and micro RNA has a role in immune mediation.
- Males have more of the enzyme called "ACE2" than do females. This enzyme enables the COVID virus to infect healthy cells more readily
- Older males have a higher incidence of heart disease, which places them at higher risk for weakened immune systems
- Males comprise a higher portion of first responders, thus have higher numbers of interactions with the population at large
- Males engage in less social distancing than females
- Males tend to take the entire pandemic less seriously, in general

Reference – *Frontiers of Public Health* (April 2020)

World Map of COVID-19



COUNTRY	CASES	DEATHS			
World	131,331,058	2,853,170	Russia	4,529,576	98,713
United States	30,706,126	555,001	United Kingdom	4,359,388	126,836
Brazil	12,984,956	331,433	Italy	3,668,264	111,030
India	12,589,067	165,101	Turkey	3,487,050	32,263
France	4,788,117	96,046	Spain	3,300,965	75,698

Staffing Update:

We have hired a **Director of Nursing (DON)** as of three weeks ago. She comes with a wealth of experience in management and quality.

We have also had a candidate accept the offer for our **Quality Assurance Coordinator**. This person will start later this month.

The following positions remain vacant in the health center:

- Family Medicine Physician
- Mental Health Advanced Practice Registered Nurse (part-time)
- Psychiatry Physician (telehealth, part-time)
- Behavioral Health Registered Nurse (2)
- Certified Medical Assistant (5)
- Social Worker
- Medical Secretary (2)
- Medical Records clerk
- Health Care Liaison
- Patient Registration Clerk

Staffing Support Plan:

The CMO has taken over the management of the Medical Records department. Upon review of their resources, the Director of Operations and CMO developed a training and work schedule for current staff seeking overtime. This schedule will begin on Tuesday, March 6th. It is replete with twelve of our current staff members whom desire overtime, thus will provide the remaining medical records staff support.

Our Clinical Staff members (Certified Nursing Assistants, LPNs, RNs) are in need of additional support given the paucity of staff in general. Of note, this paucity is related to the shortage of available staff due to the pandemic and the healthcare industry's increased need for support staff, and the highly competitive private sector salaries. Our DON is working towards arranging relationships with temporary staffing agencies that can provide two types of staffing support, those that can work on a "same day notice" basis, and those that can work for longer periods of time. She will do this while concurrently interviewing for permanent staff.

Thomas Casey
Director, Environmental Health
April 21, 2021

FOOD

1. Sanitarian staff have been busy conducting routine food inspections. We are still experiencing some facilities including schools remaining closed due to the pandemic. We are also reaching out to our seasonal facilities with mixed results to whether or not they will operate in 2021.

EH LAB / WATER PROGRAM / SEWAGE/ OTHERS

1. EH has processed 70 COVID complaints thus far in 2021. We have totaled 631 COVID related complaints since the start of the pandemic.
2. On April 8, 2021, EH has received our larvicide shipment. Staff from EH and municipalities are taking the virtual one-hour larvicide training for the upcoming season. West Nile program staff members are processing the larvicide requests from municipalities and will be setting up appointments so they can pick up their supply allotments at all three EH office locations.
3. EH continues to search for summer interns to run the West Nile and swimming programs. As of today, we have one confirmed, another solid candidate awaiting approval and searching for one more to get to our goal of three interns to run those programs.
4. From March 9-11, 2021, the EH lab staff had a virtual NELAC Institute Chemistry Lab Certification conducted by the IEPA. The process went very well with only minor deviations resulting from upgrades in new standards. Our lab staff is working on updating their guidelines to the new standards.
5. The EH laboratory has analyzed a total of 1,872 samples during the month of March compared to 4,009 one year ago. We expect our numbers to increase with a full staff of samplers and the normal summer water well and bathing beach sampling. Management recently interviewed an internal candidate to fill the vacant sampler position. We are waiting on administration approval to make a formal offer to our candidate.
6. EH had sold 35 radon test kits thus far this year. Our 2021 sales in kits is now at \$280.00 which is one off last year's pace.
7. As of April 12, 2021, EH has collected \$29,897.50 of the \$32,930.00 in swimming pool fees and all of the bathing beach fees at \$2,000.00 which is after the credits from 2020. It appears that most of our swimming facilities plan to operate in 2021.
8. EH has processed \$477,190.00 of the \$554,540.00 total invoiced for the 2021 Permit to Discharge fees. The second round of invoices were stamped "Past Due." There remains 453 invoices outstanding totaling \$77,010.00 still due compared to \$132,260.00 outstanding at this point last year.
9. EH processed \$6,925.00 in past due permit to discharge fees from previous years this past month.

HIV/STD PREVENTION AND SURVEILLANCE

In March, 10 HIV tests were done through PrEP and CHC and 5 at an event at Riverwalk Homes. We are working with Riverwalk Homes to sign an MOA and do a monthly testing event there. Starting April 5, we are bringing clients into our new lab for HIV testing by appointment. This information has been posted on our social media sites.

Our PrEP program had a successful site visit in March. We also saw 2 new PrEP patients, had 11 PrEP follow-up visits, and saw 14 patients in the Care Clinic for bloodwork, referrals to Infectious Disease and STD treatment and screenings.

Staff continue to do monthly condom drop offs to the sites that are still open.

LEAD POISONING PREVENTION PROGRAM

The Lead Poisoning Prevention Program continues through the pandemic. Our trained lead inspection staff went to 1 clearance visit and one re-inspection with state inspectors. The case management nurses closed 11 cases in March. We currently have 4 open capillary cases and 28 open confirmed cases for a total case load of 32. The childhood lead program offered a training targeting Early Intervention (EI) referral. One of the reasons to refer a child for EI is a medically diagnosed physical or mental condition that typically results in a high probability of developmental delay (e.g. Down Syndrome, Cerebral Palsy). As of July 2020, this will include "exposure to a toxic substance," such as a confirmed blood lead level $\geq 5\mu\text{g/dL}$.

WOMEN, INFANTS, CHILDREN SUPPLEMENTAL NUTRITION PROGRAM (WIC)

WIC caseload has exceeded the program goal of reaching 96% of assigned caseload. For March, WIC reached 102% of caseload. This means that 7,751 clients received services in March. Last July 2020 our WIC caseload was at 74% with 5614 clients receiving services. Congratulations to WIC staff and Managers! Clients now are able to complete education and issuance of benefits remotely and appointments are faster now that we have an extended waiver to in person visits thus eliminating the requirement to do measurements on clients every 6 months.

COVID-19 CONTACT TRACING GRANT

Contact Tracing

Currently we have 65 full and part time agency Contact Tracers (CT) working for WCHD and are decreasing as the positive case numbers go down. We will also be decreasing the number of Contact Tracer Managers accordingly. Contact Tracing continues Monday – Saturday.

Care Resource Coordination Program

The Illinois Public Health Association (IPHA) has teamed up with Salesforce to look at issues related to resource coordination across the state and especially in counties that did not hire a COVID Resource Coordinator and have few resources. Through Salesforce, our Contact Tracing Managers are investigating this new program which could result in resource coordination becoming more centralized regionally.

MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIPS (MAPP)

MAPP activities are continuing through the pandemic and teams are meeting virtually.

Access to Food and Nutrition Team

We are applying for Will County Development Block Grant (CBDG) funds to develop *FOOD FOR ALL, For A Healthier Community* Project and campaign. MAPP is working with Will County Regional Sustainability Network (WCRSN), Will County Farm Bureau, WeWILL Grow, Will County Land Use, National Hook Up of Black Women, YMCA, and many others to establish a collaborative Food Hub within local food desert sectors to expand community gardening, improving access to nutritious food, expand partnerships for sustainable local food networks, increase literacy and decrease limited food access rates among will county residents.

Behavioral Health and Substance Use Team

We are promoting the “WeWill Work Healthy Will County Worksite Mental Health Toolkit”, partnering with Will County Workforce to distribute the toolkit to over 3,000 organizations within Will County in an effort to increase policy and support related to Mental Health in the “institution” (Home, Workplace, School, Etc.) “because wellness doesn’t begin at 5pm”.

Stabilizing the Built Environment Team

We held MAPP Vaccination Clinics in downtown Joliet for the unsheltered and sheltered homeless. United Way and MAPP provided emergency supply backpacks and \$20 food gift cards for all those that were vaccinated. We are planning future clinics for this population near Jefferson and Larkin in Joliet.

Health Equity Access Response Team

The Team is discussing equity strategies related to holding MAPP Vaccination Clinics for socially vulnerable residents of 60433, 60435, 60436, 60432, improving access to culturally and linguistically appropriate communications, health equity surveillance and reporting, and increased and improved collaborations.



BINAX NOW UPDATES

The BinaxNOW Program provides, at no cost, rapid COVID-19 tests to enrolled community organizations. To become eligible, an organization must fulfill the following IDPH requirements.

- Obtain a Clinical Laboratory Improvement Amendments (CLIA) license or waiver (cost approximately \$180.)
- Sign an agreement (MOA) with the health department
- Enroll in and collect data using the IDPH's Red Cap System
- Assure a licensed healthcare provider is appropriately trained to administer the test
- Provide personal protective equipment (PPE) and appropriate disposal of medical waste

These steps limit the types and numbers of organizations that enroll.

Some of the many organizations that have been contacted and provided information regarding the BinaxNOW tests are listed below.

- Acupuncturists
- Assisted living facilities
- Businesses
- Chamber of Commerce members
- Child care facilities
- Chiropractors
- Colleges and universities
- Congregate living sites
- Critical infrastructures
- Dentists and dental clinics
- Detention sites
- Dialysis and renal care centers
- Essential service providers
- Federally Qualified Health Center
- First Responder Agencies
- Health care providers
- Health care clinics
- Home health agencies
- Hospice facilities
- Hospitals
- Infrastructure workers
- In-home nursing services
- Manufacturers
- Medical transports
- Nursing homes
- Physical therapists
- Private ambulance services
- Public and non-public schools (K-12)
- Public and non-public high schools
- Senior independent housing
- Senior gathering sites
- Sports facilities
- Trade schools
- Treatment centers
- Vulnerable population service providers
- Wellness centers
- Worksites

As other groups that may benefit from the rapid tests are identified, contact information is collected and materials provided.

Press releases, social media, direct emails, web information and other means are used to inform the community of the availability of BinaxNOW tests.

To date, 44 organizations have been provided more than 13,200 tests.

MEDIA UPDATE

- CNBC segment was bumped and awaiting confirmation on the new dates for airing.

USA Today article was published on Wednesday, April 7th. The article can only be accessed through a paid subscription (<https://www.usatoday.com/in-depth/news/health/2021/04/07/local-health-officials-covid-vaccine-rollout-information-technology/6989750002/>) and USA Today should be sending a PDF copy for our posting. A copy and pasted version is below.

‘We’re Apollo 13-ing this vaccine rollout’

Despite years of budget cuts, minuscule staff and constantly escalating demands, health officials pulled off the COVID-19 vaccine rollout.

Aleszu Bajak and Elizabeth Weise, USA TODAY

Published 6:00 AM EDT Apr. 7, 2021

In Will County, Illinois, just outside Chicago, health officials knew a deluge was coming once the first COVID-19 vaccine was authorized. They started working 12-hour days and weekends.

"I was getting the kids to bed and jumping back on the computer till 9 or 10," said Katie Weber, the county health department's emergency response coordinator.

Weber had three enormous tasks ahead of her. She and her team had to make sure health care providers in the county were correctly linked to the state's vaccine ordering system, figure out who was eligible to get vaccine first and where they were, and coordinate every one of her county's health care workers, law enforcement officers and teachers into vaccination clinics. And she had to deal with dozens of companies clamoring to get their employees vaccinated.

"When you're a local health department in the midst of a pandemic and have been going for eight, nine months, and you're told you're going to have the vaccine next month ... that's a huge task," she said.

Like many other health officials faced with the daunting duty of vaccinating their corner of America, Weber had to piece together an information technology system in the face of unstable vaccine supply and strained staff and resources, with little time to plan, after waiting on state and federal health authorities for answers about vaccine supply and guidelines.

Though the federal government spent millions on vaccine scheduling and supply management programs, it was of little use to local officials, who scrambled to come up with systems on their own.

"I feel like we're Apollo 13-ing this vaccine rollout," said Becky Colwell-Ongena, the county's geographical information system manager, who developed maps and tools to help Weber pinpoint priority populations and identify prospective vaccination sites. "I got a plastic bag and some tweezers, and I gotta moonshot home."

Far from the fancy databases big companies might use, Webster and her team of a dozen county employees relied on Excel spreadsheets and an email program that balked every time she tried to send more than 500 messages at a time.

Rebecca Coyle, executive director of the American Immunization Registry Association

I hate to be callous about it, but we're sort of seeing you get what you pay for. If you don't have a funded public health infrastructure, you're going to see these kinds of problems.

"I hate to be callous about it, but we're sort of seeing you get what you pay for," said Rebecca Coyle, executive director of the American Immunization Registry Association. "If you don't have a funded public health infrastructure, you're going to see these kinds of problems."

What is remarkable about the rollout of COVID-19 vaccine to the entire nation, said those who work in the field, is not the problems that occurred but that it worked at all given the chronic lack of funding.

"If you go to any health department, you could be stepping back technologically five or 10 years, from the version of the software that's used to the machines they work on," said Tiffany Tate, executive director of the nonprofit Maryland Partnership for Prevention. "Everything is old and outdated."

Homegrown IT solutions

In Washoe County, Nevada, officials said they were short-staffed and hampered by communication delays from the state. They cobbled together data and logistics solutions to get vaccines into arms.

"The state of Nevada kind of dragged their feet on a lot of these things. We struggled for a long time with spreadsheets," said Gary Zaepfel, a systems developer coordinating the information technology projects for the county's COVID-19 vaccination rollout.

Zaepfel and his team came up with solutions to connect appointments, employers and providers with the county's health district. They use the software system Accela for appointments and custom-built software that lets companies apply as essential businesses and receive prioritization. Those companies are then approved by the health district.

A certified medical assistant prepares doses of the Pfizer COVID-19 vaccine at a vaccination center at the University of Nevada, Las Vegas on Jan. 22, 2021. JOHN LOCHER, AP

In Alaska, the Anchorage city government built web applications to lower the barrier to finding vaccine appointments. Many of the state's larger vaccination sites used PrepMod, a vaccination management system that ties into state immunization registries and allows the public to book appointments, and the city fielded a flood of calls from disappointed residents.

"In January, we started getting complaints from senior citizens that they couldn't find an available vaccine appointment," said Ben Matheson, a data analyst on the city's innovation team. As is common elsewhere, appointments were posted across pharmacy, hospital, government and supermarket websites. Even for the tech-savvy, jumping between many websites to find an appointment was an uphill battle.

Matheson built a [simple website](#) that pulled together vaccine appointment information from several sources and updates dozens of times a day. What was a weekend proof-of-concept project has become a "power tool" for the city's COVID-19 call center, he said. He built another [bare-bones website](#) that finds available coronavirus testing appointments across the city.

"That was a blessing for us that we could make a dead simple website that works on phones and gets you to what you want," Matheson said. "We should be doing everything we can to get people a vaccine appointment."

From her desk, Jenne McKibben revamped organizational charts, reviewed COVID-19 vaccine provider lists and verified immunization information system data in the Oregon system. McKibben directs the

‘Mired in the process’

Not every city and health office has the tech savvy or resources to build software and IT solutions to lower the barrier to getting vaccines. Though every state has a license for mapping software from Esri – which rolled out several tools such as data dashboards and survey forms to assist health officials in the vaccine rollout – not every health department or municipal government has the staff to employ that technology or tailor it for local needs.

“My general frustrations are that we’re underfunded in public health but we’re asking people to know a lot and do a lot,” said Este Geraghty, chief medical officer at Esri and a former official at California’s Department of Public Health. “It’s a lot harder than it looks to put these things into motion.”

Geraghty ran into these issues firsthand when building product demos for Georgia and Alabama to help them identify at-risk populations and move around vaccine inventory. When the Centers for Disease Control and Prevention released its [vaccination playbook](#) in October, the vaccination phases and process looked fairly straightforward, she said. “But then we tried to operationalize it as we built the demos, and we said, ‘Oh, no, it’s not.’”

States were left to figure out their own systems without much centralized help.

“Certainly it would have been helpful to have had more federal guidance,” Geraghty said. “Having every state have to figure it out on their own was really a disservice. It’s how people got mired in the process.”

Este Geraghty, chief medical officer at Esri

Certainly it would have been helpful to have had more federal guidance. Having every state have to figure it out on their own was really a disservice. It’s how people got mired in the process.

Federal funding unclear

The federal government promised to do more to fund public health in the wake of the pandemic. The American Rescue Plan dedicates billions of dollars – mostly to the Department of Health and Human Services and CDC – to support COVID-19 mitigation and vaccination activities and other public health programs. Some of that money is supposed to go to states.

It's not clear whether that funding will trickle down to county and local health departments, of which there are nearly 3,000, says Lori Tremmel Freeman, CEO of the National Association of County and City Health Officials.

"We have no idea how much money is going to reach locals even out of the American Rescue Plan," she said. "It's going to states and the five largest cities. There's no language that mandates that money gets to the local health departments or the communities at all. Even the supplemental funds Congress has approved in the last year have not in all cases reached the ground level where the fight occurs to mitigate this disease."

Local public health departments are seeing their budgets contract. Those departments have lost 20% of their staff in the past decade, said Freeman, citing a survey the NACCHO routinely runs.

"Our health officials take full responsibility and accountability for their communities," she said. "So it's really a terrible message we're sending when we don't give them the tools they need to take care of them."

Learning lessons

COVID-19 vaccination efforts were going to be a huge logistical challenge in any case, but they hit a decentralized, chronically underfunded public health system that struggled to keep up.

"It really is amazing, given where we were, that the rollout has gone so smoothly," said Maryland Partnership for Prevention's Tate, who developed the vaccine management system PrepMod.

The system is used in at least some counties in almost every state by more than 55,000 people in public health departments, clinics and medical offices.

Its introduction wasn't without its stumbles. Most officials using PrepMod signed contracts that allotted them a certain number of simultaneous users. That worked fine when people were signing up for flu shots but went out the window after COVID-19.

"Take California," Tate said. "They were supposed to have up to 6,000 users in the system at any one time, and now they're at 20,000. They're adding about 1,000 a week." On the back end, that meant adding cloud computing space to handle the ballooning numbers and staff on the help desk.

PrepMod runs the Massachusetts state system, which slowed to a crawl last month when 9.4 million people tried to sign up in a five-hour period, Tate said.

"It's like someone announced that Beyoncé, Bruce Springsteen, Taylor Swift, Justin Bieber and Tim McGraw were all coming together to do one concert together," she said. "It was unprecedented demand."

Many states used PrepMod instead of the original federal scheduling program, VAMS, or Vaccine Administration Management System. It was supposed to be a free vaccine scheduling, inventory and reporting program, for which the CDC paid the consulting firm Deloitte \$44 million.

VAMS suffered from multiple problems, including randomly canceling appointments.

"That was the system everybody hated," said Cimarron Buser, president and CEO of the Appointment Scheduling & Booking Industry Association. "The people who built the software never thought about what happened when there wasn't enough vaccine."

Tiberius, another national supply chain management system released by the federal government to aid in the COVID-19 vaccine rollout, largely failed to live up to its promise. Many states found Tiberius too complicated or irrelevant, a USA TODAY investigation found, relying instead on their own data and systems. Few counties have access to Tiberius.

Coyle, of the American Immunization Registry Association, said that "once the dust has settled," the country must take stock of the rollout – and learn from it.

"What we really need is a weeklong hash-out, a chance to sit down and debrief with everyone to figure out exactly what happened," Coyle said. "Nobody has the time to do that right now. But this, too, shall pass. Eventually, we'll pause when this is over and capture what worked and what didn't."

Steve Brandy
Manager, Media Services
April, 2021

One of the most satisfying parts of my job over the past month has been working with The Fource Group on a daily basis, as we pursue our mutual goal of educating the public on what has been happening at the Will County Health Department during the pandemic, and what we hope will happen in the future.

After their initial appearance on March 23rd taking staff pictures for the We Will Win campaign, I was able to contribute some additional pictures at their request by spending some time each morning at the exit from the WCHD vaccination clinic. After getting their approval, I would take a couple pictures of Will County residents who had just received their shots holding either the circular or rectangular WE WILL WIN sign. This added to the variety of people we have been able to place on Facebook as our “victors.”

The week of April 5th was quite an experience. First, it was National Public Health Week, and we followed the APHA’s theme of Building Bridges to Better Health by talking about what we’ve been able to learn and accomplish as a health department during the current pandemic. Following APHA daily themes, small segments on various topics were recorded by WCHD personnel and placed on the website and social media. They included Nicole Garrett on Health Equity, Pat Krause on Strengthening Communities and Families, Dr. Troiani on Uplifting Mental Health Wellness, and Tom Casey on Environmental Health’s role during the pandemic.

Another major moment came during the week of April 5th when the daily COVID-19 case numbers statewide began to show a consistent rise of about 3,500 per day, finishing the week Friday the 9th with an increase of over 4,000 cases statewide. At the same time, WCHD Contact Tracers had discovered that about 20 new cases in Will County could be traced to a wedding party attended by over 120 people, which included stops at locations in DuPage and Cook Counties. Alpesh Patel asked me to produce a press release about the need to continue to observe caution, and to follow common advice concerning mask wearing, social distancing, and avoiding crowded situations where social distancing is extremely difficult.

Shortly after the that press release was sent, I received a phone call from NBC 5 in Chicago wanting me to elaborate.

This is the link: <https://www.nbcchicago.com/news/coronavirus/were-getting-cocky-will-county-officials-issue-warning-amid-covid-outbreak-tied-to-wedding/2480963/>

I was also interviewed by ABC 7 Chicago during the 4 PM hour on Monday, April 12th about the first day of open vaccination appointments in Illinois. I strongly emphasized how the National Guard site at the old TOYS R US building would be going to 2,050 appointments per day starting Tuesday, April 13th.

As of this writing, the Channel 7 interview was scheduled for 6 PM and 10 PM Monday night the 12th.



Will County Health Department follows CDC and FDA Guidelines to Pause Use of Johnson & Johnson (Janssen) Vaccine

All Will County community vaccination clinics have and continue to use Pfizer and Moderna Vaccines

April 13, 2021 – The Will County Health Department announced today they would follow federal and state health agencies recommendation to immediately pause the use of the Johnson & Johnson (Janssen) single dose coronavirus vaccine.

“Will County is following the U.S. Centers for Disease Control and Prevention (CDC) and the U.S. Food and Drug Administration (FDA) and the Illinois Department of Public Health’s (IDPH) recommendation to stop distributing the Johnson & Johnson (Janssen) vaccine,” said Sue Olenek, Executive Director of the Will County Health Department.

99.5% of the 351,992 vaccines that have been distributed by the Will County Health Department have been the Pfizer and Moderna vaccines. The Johnson & Johnson “Janssen” vaccine accounts for less than 1 percent.

“All of the Will County Health Department’s community vaccination clinics have and will continue to use Pfizer and Moderna vaccines,” said Olenek. “The Johnson & Johnson “Janssen” vaccine was used on a limited basis over the past two weeks and not distributed at our community vaccination clinics.”

To date, the Health Department has not received any news of recipients having adverse effects from the Johnson & Johnson (Janssen) vaccine in Will County.

“If anyone has concerns about the Johnson & Johnson (Janssen) vaccine, they should contact their primary care provider directly,” Olenek said.

The limited number of people who received the Johnson & Johnson (Janssen) vaccine will receive communication from the Will County Health Department informing them of the CDC’s recommendation and directing them to follow CDC guidelines to contact their primary care physician with concerns.

The County Health Department continues to vaccinate nearly 7,000 individuals per day with the Pfizer and Moderna vaccines at their five community vaccination clinics located in Joliet,

Wilmington and Monee. Residents can find and schedule a vaccination online at willcountyhealth.org.

To read the CDC and FDA recommendation [click here](#). To read the IDPH statement [click here](#). For questions about the Johnson & Johnson "Janssen" vaccine product call 1-800-565-4008.



For Immediate Release

April 7, 2021

News media calls to Steve Brandy: Media Services Manager at (815) 727-5088

Agency Website: www.willcountyhealth.org

Twitter: WillCoHealth

Facebook: <https://www.facebook.com/WilCountyHealthDepartment/>

Warm Weather is Here, and Extreme Caution is Still Needed when it Comes to Avoiding COVID-19

JOLIET, IL – The Will County Health Department (WCHD) is reminding everyone that although we are into warmer weather and the time of year everyone wants to have “spring and summer fun,” vigilance must be practiced as the battle continues against the Coronavirus Pandemic.

Although over 100,000 people in Will County are now fully vaccinated against COVID-19, the virus is very much alive and can still be transmitted.

WCHD contact tracers have recently come across information about a series of major wedding events. Investigations showed that these events took place between March 10th and 13th, indoors, with approximately 120 people in attendance, with limited regard for masking and social distancing. Thus far there have been over 20 confirmed and probable COVID-19 cases among those who had attended these events. Investigations also showed that the events included a

host site in Will County, a banquet facility in DuPage County, and a place of worship in Cook County.

“As the weather gets nicer it is important not to let our guard down,” said WCHD Epidemiologist Alpesh Patel. “Although we are seeing more people vaccinated, we are also seeing an increase in COVID related hospitalizations, and have started to see the presence of variant strains in our communities.”

Patel recommends that anyone who has been in contact with anyone who attended the aforementioned wedding events should continue to self-monitor for symptoms for 14 days, and get tested for COVID-19 if they become symptomatic. Symptoms include, but are not limited to, shortness of breath, cough, sore throat, fever or chills, and loss of sense of taste or smell.

It is also important to note that while the daily number of new COVID-19 cases in Illinois was as low as 782 on March 15th, we have since seen new case numbers of 3,526 on April 1st, and 3,790 on April 7th.

“We understand how difficult it has been to put off large gatherings, but at this time we know that these gatherings can still turn into super spreader events with devastating outcomes,” Patel continued. “If we can all just hold on a little longer, we will be able to get to the other side of this pandemic.”

For more information on COVID-19, please go to the WCHD website at <https://willcountyhealth.org/covid-19/>.



**Will County
Health Department &
Community Health Center**

For Immediate Release

March 29, 2021

News media calls to Steve Brandy: Media Services Manager at (815) 727-5088

Agency Website: www.willcountyhealth.org

Twitter: WillCoHealth

Facebook: <https://www.facebook.com/WilCountyHealthDepartment/>

Will County Health Department Holds Special Needs Vaccine Clinic

JOLIET, IL - Will County Health Department held a Special Needs Vaccine Clinic on Saturday, March 27th at the St. Charles Center at Lewis University, where 600 special needs individuals 16 and older and their caregivers received their vaccine in a caring and nurturing environment built specifically for them.

The clinic was coordinated by Katie Weber, an Emergency Planning and Response Coordinator with the Will County Health Department. Katie is also an "Angel Mom" who has a child with Angelman Syndrome. She worked with area parent groups of special needs children and adults to create a vaccine clinic that would be fully accessible for wheelchairs, sensory friendly, and was conducive to allow caregivers to be with the individual with special needs as they received their vaccine.

It also featured a separate room for people with auditory sensory issues to allow for a quiet space to get vaccine - plus there was a drive-up for individuals with heavy mobility issues.

This special clinic was also planned with the help of Lewis University students who are studying Occupational and Speech Therapy. They created special signage with graphics to help explain the process to the individuals receiving the vaccine in order to communicate what was happening.



Volunteers from the Lockport Township Fire Department were part of the team assisting with Saturday's Special Needs COVID-19 Vaccination Clinic

The Will County Health Department wishes to thank the following individuals who contributed to this clinic:

- Nanci Reiland, Will County Health Board Member
- Chicago Angel Mamas
- Steve Buresh's Cheesecake Store and Sandwich Shop, who donated boxed lunches to volunteers
- Lewis University
- Lockport Township Fire Department
- All the volunteers who donated their time and talents.

Other special needs clinics are in the planning stages. For more information contact the Will County Health Department COVID-19 hotline at 815-740-8977; or go to willcountyhealth.org.

**WILL COUNTY HEALTH DEPARTMENT
BOARD OF HEALTH REPORT
04/21/2021
March 2021
Stats**

Behavioral Health Statistics for 3/1/2021 - 3/31/2021		Month of March 2021	CFY 2021	CFY 2020
Child and Adolescent (C&A) Mental Health Programs				
	C&A Psychiatric Services	276	914	964
	C&A Orientation Services	31	113	88
	School Counseling Services	0	0	106
	C&A Counseling Services			
	N/A	N/A	N/A	1,123
	N/A	N/A	N/A	290
	443	1,756	121	N/A
	N/A	N/A	N/A	N/A
Screening Assessment and Support Services/Mobile Crisis Response				
*Effective October 1st the SASS Program has been renamed to Mobile Crisis Response and now includes individuals of all ages				
	Mobile Crisis Response Screenings	196	676	976
	Mobile Crisis Response Counseling Services	693	2,220	1,393
	FSP Counseling Services	45	178	160
Adult Mental Health Programs				
	Adult Psychiatric Services			
	Terminated Program 7/2016		Terminated Program 7/2016	Terminated Program 7/2016
	Adult Orientation Services	23	70	82
	Adult Counseling Services			
	N/A	N/A	N/A	792
	N/A	N/A	N/A	197
	N/A	N/A	N/A	59
	478	1,700	99	
	PAS Services	13	82	133

APRIL 2021-DIVISIONAL STATISTICS REPORT

APRIL 2021-DIVISIONAL STATISTICS REPORT				
	ENVIRONMENTAL HEALTH	Mar-21	FY21 YTD	FY20 YTD
	Food Program Activities	762	2640	2233
	Water Program Activities	139	521	513
	Sewage Program Activities	73	248	226
	Other Program Activities (beaches, tanning facilities, etc.)	769	2660	4447
	Aerobic Treatment Plant Samples	377	1268	2607
	Number of Service Requests	36	85	100
	Number of Complaints	51	222	165
	Number of Well Permits	9	22	22
	Number of Septic Permits	18	44	35
	Number of Lab Samples Analyzed by EH Lab	1872	6700	11751
	OFFICE OF VITAL RECORDS	Mar-21	FY21YTD	FY20YTD
	Births Recorded	405	1426	1487
	Deaths Recorded	361	1794	1563

WILL COUNTY BOARD OF HEALTH
RESOLUTION #21-15

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
WILL COUNTY, ILLINOIS

RESOLUTION FOR APPROVAL FOR THE PURCHASE OF NITRILE EXAM
GLOVES FOR USE IN THE MASS VACCINATION INITIATIVE- \$17,936

WHEREAS, the Will County Health Department (WCHD) is currently responding directly to the COVID-19 global pandemic; and

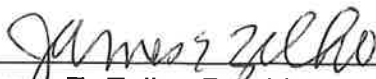
WHEREAS, this direct response includes, in part, facilitating the administration of COVID-19 vaccine to residents in Will County; and

WHEREAS, the WCHD is in need of medical supplies in the form of Personal Protective Equipment (PPE) for safe and compliant administration of vaccine; and

WHEREAS, funding for this expenditure was budgeted for in the IDPH Vaccination Grant.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the expenditure for Nitrile exam gloves from Impact in the amount of \$17,936. (see attached quote).

DATED THIS 24th day of February 2021.



James E. Zelko, President
Will County Board of Health



SALES QUOTE

Sales Quote No: QT20496

Date: 2/23/21

Account No: WA2973

Focus. Innovate. Grow.

Bill To: Will County Health Department
 Attn: Anthony Melei - It Coordinator
 501 Ella Ave
 Joliet, IL 60435

Ship To: Will County Health Department
 Attn: Katie Weber
 501 Ella Ave
 Joliet, IL 60435

Sales Person	P.O. Number	Ship Method	Payment Terms	Quote Expires On
Diane Smith	Katie	OUR TRUCK - IL	NET 30 Days	3/25/21

Notes

Item No	Description	Quantity	UM	Price	Disc	Amount
Description Line	Nitrile Exam Gloves, Powder Free, Latex Free, 3+ Mil 100/box MEDIUM	300.00	EA	\$23.50	0.00	\$7,050.00
Description Line	Nitrile Exam Gloves, Powder Free, Latex Free, 3+ Mil 100/box LARGE	300.00	EA	\$20.62	0.00	\$6,186.00
Description Line	Nitrile Exam Gloves, Powder Free, Latex Free, 3+ Mil 100/box X-LARGE	200.00	EA	\$23.50	0.00	\$4,700.00

Please remit payment to:
 Impact Networking, LLC
 75 Remittance Drive Suite 1076
 Chicago, IL 60675-1076
 1 (847) 232-8828

<https://impactmybiz.com/payments>

To receive invoices electronically please email greeninvoices@impactnetworking.com.

Subtotal	\$17,936.00
Discount	\$0.00
Freight	\$0.00
Sales Tax	\$0.00
Sales Order Total	\$17,936.00



Will County
Health Department &
Community Health Center

WILL COUNTY BOARD OF HEALTH
RESOLUTION #21-17

**RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
COVID-19 RESPONSE COMMITTEE
WILL COUNTY, ILLINOIS**

**RESOLUTION FOR APPROVAL FOR THE PURCHASE OF PROMOTIONAL ITEMS
FOR THE COMMUNITY VACCINATION CLINICS - \$13,800**

WHEREAS, the Will County Health Department (WCHD) is currently responding directly to the COVID-19 global pandemic; and

WHEREAS, this direct response includes, in part, facilitating the administration of COVID-19 vaccine to residents in Will County; and

WHEREAS, the WCHD'S communication firm (The Fource) has recommended the purchase of promotional items for the community vaccination clinics; and

WHEREAS, funding for this expenditure was budgeted for in the County Mass Vaccination Loan.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the expenditure for clinic promotional items from The Fource in the amount of \$13,800. (see attached estimate).

DATED THIS 24th day of March 2021.

A handwritten signature in cursive script, reading "James E. Zelko", is written over a horizontal line.

James E. Zelko, President

Will County Board of Health, COVID-19 Response Committee

ADDRESS

MITCH SCHABEN
WILL COUNTY EXECUTIVE
OFFICE
302 N CHICAGO STREET
JOLIET, IL 60432

DATE
03.17.2021

TOTAL
\$13,800.00

ACTIVITY

PROMOTIONAL

CUSTOM VACCINE SLEEVE |

Flat size: 6.3"w x 5.625"h

Folded size: 3.125"w x 4.125"h

Fold type: sleeve mailer

Stock: 100# cover, coated matte, white

4cp/none

Coating: uv matte, one side

Die cut/ fold glue

QTY

RATE

AMOUNT

30,000

0.46

13,800.00

Production time: 7 to 10 business days after proof approval

TOTAL

\$13,800.00

THANK YOU.

Accepted By

Accepted Date



Will County
Health Department &
Community Health Center

WILL COUNTY BOARD OF HEALTH
RESOLUTION #21-18

RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
COVID-19 RESPONSE COMMITTEE
WILL COUNTY, ILLINOIS

RESOLUTION FOR APPROVAL FOR THE PURCHASE OF UNIFORMS FOR THE
COMMUNITY VACCINATION CLINICS - \$14,062

WHEREAS, the Will County Health Department (WCHD) is currently responding directly to the COVID-19 global pandemic; and

WHEREAS, this direct response includes, in part, facilitating the administration of COVID-19 vaccine to residents in Will County; and

WHEREAS, the WCHD'S communication firm (The Fource) has recommended the purchase of uniforms for the community vaccination clinics; and

WHEREAS, funding for this expenditure was budgeted for in the County Mass Vaccination Loan.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the expenditure for clinic uniforms from Atomic Air Jumps Inc. in the amount of \$14,062. (see attached estimate).

DATED THIS 24th day of March 2021.

A handwritten signature in cursive script, reading "James E. Zelko", is written over a horizontal line.

James E. Zelko, President

Will County Board of Health, COVID-19 Response Committee

Atomic Air Jumps INC
Distinct Visual Solutions DVS

28 W Crowley Ave
 Joliet, IL 60432 US
 +1 6307796328
 DistinctVisualSolutions@gmail.com
 DistinctVisualSolutions.com



INVOICE

BILL TO
 Linda Cueva
 Will County Health Department
 501 Ella Ave.
 Joliet, IL 60433 USA

SHIP TO
 Linda Cueva
 Will County Health Department
 501 Ella Ave.
 Joliet, IL 60433 USA

INVOICE 1048
DATE 03/14/2021
TERMS Due on receipt
DUE DATE 03/14/2021

DATE	SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
03/14/2021	Sales	Next Level 6210 CVC Royal Blue shirt. Will County T-shirt 2 color front 8 color back S-250 M-385 L-500 XL-350	1,485	9.35	13,884.75T
03/14/2021	Sales	Next Level 6210 CVC Royal Blue shirt. Will County T-shirt 2 color front 8 color back 2x-8	8	11.35	90.80T
03/14/2021	Sales	Next Level 6210 CVC Royal Blue shirt. Will County T-shirt 2 color front 8 color back 3x-7	7	12.35	86.45T

Please make a 20% deposit so we can begin order. Thanks

SUBTOTAL	14,062.00
TAX	0.00
TOTAL	14,062.00
BALANCE DUE	\$14,062.00



**WILL COUNTY BOARD OF HEALTH
RESOLUTION #21-19**

**RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
WILL COUNTY, ILLINOIS**

**RESOLUTION FOR APPROVAL FOR PAYMENT OF COMMUNICATION
ACTIVITIES FOR THE FOURCE FOR THE COMMUNITY VACCINATION CLINICS
AND THE COVID-19 PANDEMIC RESPONSE- NOT TO EXCEED \$19,920**

WHEREAS, the Will County Health Department (WCHD) is currently responding directly to the COVID-19 global pandemic; and

WHEREAS, this direct response includes, in part, facilitating the administration of COVID-19 vaccine to residents in Will County; and

WHEREAS, the Business Associate Agreement for the WCHD's Communication firm hired through a County RFQ (The Fource) includes email enhancements and marketing activities along with database management from March 2021 to September 2021 for the community vaccination clinics and the COVID-19 pandemic response; and

WHEREAS, funding for this expenditure was budgeted for in the County Mass Vaccination Loan.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the expenditure for communication / marketing activities from The Fource in the amount not to exceed of \$19,920. (see attached invoice).

DATED THIS 21st day of April 2021.

James E. Zelko, President
Will County Board of Health



**Resolution of the Will County Board of Health
Will County, Illinois**

APPROVAL FOR THE PURCHASE OF NARCAN NOT TO EXCEED \$15,000

WHEREAS, the Will County Office of Substance Use Initiatives distributes Narcan (a nasal spray form of the opioid overdose reversal medicine Naloxone) and offers training on how to administer it to first responders, social service workers, local organizations, and interested members of the community; and

WHEREAS, the Will County Health Department is working with the Will County Office of Substance Use Initiatives to expand its harm reduction efforts by purchasing additional Narcan for the County which will be provided to participants after completing the training program; and

WHEREAS, the purchase of additional doses of Narcan will allow the Will County Office of Substance Use Initiatives to continue providing training sessions to groups and organizations in Will County.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the payment not to exceed \$15,000 to ADAPT Pharma, Inc. (see attached proposed invoice).

DATED this 21ST day of April 2021.

James E. Zelko, President
Will County Board of Health

Home / NARCAN (Naloxone HCl) NASAL Spray 4mg



NARCAN[®] (Naloxone HCl) NASAL Spray 4mg

[Send](#) [Print](#)

\$ 75.00 per carton (2-devices per carton)

Min Order Qty: 1 case (12 cartons)

In Stock

Case Qty Carton Qty Total **\$ 14,400.00**

CHECKOUT

About the product

- NARCAN(R) Nasal Spray may be ordered by the case, each case contains 12 cartons.
- One carton contains two, 4mg doses
- Carton Dimensions 2.5" length x 3" width x 3.75" height
- NDC: 69547-353-02

Visit narcan.com for additional resources.



**RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
WILL COUNTY, ILLINOIS**

**APPROVAL TO INCREASE THE MEDICAL, BEHAVIORAL HEALTH, FAMILY PLANNING,
HOSPITAL EVALUATION CHARGES AND COORDINATING SLIDING FEE SCALE FOR SERVICES
AND PROCEDURES – CHC**

WHEREAS, the CHC provides medical, behavioral health, family planning, and hospital evaluation services, and procedures; and

WHEREAS, in keeping with the changes to these usual and customary fees, as well as the sliding fee scales for purposes of billing maximization; and

WHEREAS, the CHC Governing Council approved the fees and sliding fee scale changes at the April 7, 2021 meeting.

WHEREAS, BE IT RESOLVED the Board of Health increases for the CHC medical, behavioral health, family planning, and hospital evaluation charges as attached.

DATED THIS 21st day of April 2021.

James E. Zelko, President
Will County Board of Health

Will County Community Health Center
Medical Chargemaster & Sliding Fee Scale

Will County Community Health Center
Income as a percent of poverty level

Proposed 2021 Fees

2020 Fees as Approved

% of Full Fee:

Code	Description	2020 Fees as Approved	Proposed 2021 Fees	Nominal fee	25%	50%	75%	O DISCOUNT
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Evaluation & Management

99202	OFFICE/OUTPATIENT VISIT, NEW	\$ 173.00	\$ 184.00	\$ 25.00	\$ 46.00	\$ 92.00	\$ 138.00	\$ 184.00
99203	OFFICE/OUTPATIENT VISIT, NEW	\$ 257.00	\$ 268.00	\$ 25.00	\$ 67.00	\$ 134.00	\$ 201.00	\$ 268.00
99204	OFFICE/OUTPATIENT VISIT, NEW	\$ 390.00	\$ 407.00	\$ 25.00	\$ 101.75	\$ 203.50	\$ 305.25	\$ 407.00
99205	OFFICE/OUTPATIENT VISIT, NEW	\$ 506.00	\$ 525.00	\$ 25.00	\$ 131.25	\$ 262.50	\$ 393.75	\$ 525.00
99212	OFFICE VISIT, ESTABLISHED	\$ 104.00	\$ 109.00	\$ 25.00	\$ 27.25	\$ 54.50	\$ 81.75	\$ 109.00
99213	OFFICE VISIT, ESTABLISHED	\$ 164.00	\$ 175.00	\$ 25.00	\$ 43.75	\$ 87.50	\$ 131.25	\$ 175.00
99214	OFFICE/OUTPATIENT VISIT, EST	\$ 247.00	\$ 259.00	\$ 25.00	\$ 64.75	\$ 129.50	\$ 194.25	\$ 259.00
99215	OFFICE/OUTPATIENT VISIT, EST	\$ 347.00	\$ 363.00	\$ 25.00	\$ 90.75	\$ 181.50	\$ 272.25	\$ 363.00
99381	PREV VISIT, NEW, INFANT	\$ 233.00	\$ 233.00	\$ 25.00	\$ 58.25	\$ 116.50	\$ 174.75	\$ 233.00
99382	PREV VISIT, NEW, AGE 1-4	\$ 243.00	\$ 252.00	\$ 25.00	\$ 63.00	\$ 126.00	\$ 189.00	\$ 252.00
99383	PREV VISIT, NEW, AGE 5-11	\$ 249.00	\$ 255.00	\$ 25.00	\$ 63.75	\$ 127.50	\$ 191.25	\$ 255.00
99384	PREV VISIT, NEW, AGE 12-17	\$ 274.00	\$ 281.00	\$ 25.00	\$ 70.25	\$ 140.50	\$ 210.75	\$ 281.00
99385	PREV VISIT, NEW, AGE 18-39	\$ 315.00	\$ 321.00	\$ 25.00	\$ 80.25	\$ 160.50	\$ 240.75	\$ 321.00
99386	PREV VISIT, NEW, AGE 40-64	\$ 346.00	\$ 360.00	\$ 25.00	\$ 90.00	\$ 180.00	\$ 270.00	\$ 360.00
99387	PREV VISIT, NEW, 65 & OVER	\$ 357.00	\$ 366.00	\$ 25.00	\$ 91.50	\$ 183.00	\$ 274.50	\$ 366.00
99391	PREV VISIT, EST, INFANT	\$ 201.00	\$ 212.00	\$ 25.00	\$ 53.00	\$ 106.00	\$ 159.00	\$ 212.00
99392	PREV VISIT, EST, AGE 1-4	\$ 217.00	\$ 226.00	\$ 25.00	\$ 56.50	\$ 113.00	\$ 169.50	\$ 226.00
99393	PREV VISIT, EST, AGE 5-11	\$ 216.00	\$ 225.00	\$ 25.00	\$ 56.25	\$ 112.50	\$ 168.75	\$ 225.00
99394	PREV VISIT, EST, AGE 12-17	\$ 237.00	\$ 249.00	\$ 25.00	\$ 62.25	\$ 124.50	\$ 186.75	\$ 249.00
99395	PREV VISIT, EST, AGE 18-39	\$ 265.00	\$ 279.00	\$ 25.00	\$ 69.75	\$ 139.50	\$ 209.25	\$ 279.00
99396	PREV VISIT, EST, AGE 40-64	\$ 288.00	\$ 301.00	\$ 25.00	\$ 75.25	\$ 150.50	\$ 225.75	\$ 301.00
99397	PREV VISIT, EST, AGE 65 & OVER	\$ 305.00	\$ 315.00	\$ 25.00	\$ 78.75	\$ 157.50	\$ 236.25	\$ 315.00

Telehealth Services

90832	TELEHEALTH PSYCHOTHERAPY, 0-30MIN	\$ 133.00	\$ 130.00	\$ 25.00	\$ 32.50	\$ 65.00	\$ 97.50	\$ 130.00
90837	TELEHEALTH PSYCHOTHERAPY, 31-60MIN	\$ 200.00	\$ 202.00	\$ 25.00	\$ 50.50	\$ 101.00	\$ 151.50	\$ 202.00
99421	TELEPHONE EVALUATION 5-10MINS	\$ 104.00	\$ 62.00	\$ 25.00	\$ 15.50	\$ 31.00	\$ 46.50	\$ 62.00
99422	TELEPHONE EVALUATION 11-20MINS	\$ 134.00	\$ 87.00	\$ 25.00	\$ 21.75	\$ 43.50	\$ 65.25	\$ 87.00
99423	TELEPHONE EVALUATION 21-30MINS	\$ 164.00	\$ 136.00	\$ 25.00	\$ 34.00	\$ 68.00	\$ 102.00	\$ 136.00
99441	ONLINE DIGITAL EVALUATION 5-10 MIN	\$ 104.00	\$ 85.00	\$ 25.00	\$ 21.25	\$ 42.50	\$ 63.75	\$ 85.00
99442	ONLINE DIGITAL EVALUATION 11-20 MIN	\$ 134.00	\$ 136.00	\$ 25.00	\$ 34.00	\$ 68.00	\$ 102.00	\$ 136.00
99443	ONLINE DIGITAL EVALUATION 21-30 MIN	\$ 164.00	\$ 194.00	\$ 25.00	\$ 48.50	\$ 97.00	\$ 145.50	\$ 194.00

Surgery/Procedures

10060	DRAINAGE OF SKIN ABSCESS	\$ 328.00	\$ 346.00	\$ 25.00	\$ 86.50	\$ 173.00	\$ 259.50	\$ 346.00
11004	DEBRIDEMENT OF SKIN, TISSUE - EXT GENITALIA	\$ 2,125.00	\$ 2,139.00	\$ 25.00	\$ 534.75	\$ 1,069.50	\$ 1,604.25	\$ 2,139.00

Will County Community Health Center
 Medical Chargemaster & Sliding Fee Scale

Code	Description	Proposed 2021 Fees	2020 Fees as Approved	Income as a percent of poverty level					
				A	B	C	D	E	
				<100%	100-133%	134-185%	186-200%	>200%	
				% of Full Fee:					
				Nominal fee	25%	50%	75%	N	O DISCOUNT
57456	ENDOCERVICAL CURETTAGE W/SCOPE	\$ 473.00	\$ 469.00	\$ 25.00	\$ 118.25	\$ 236.50	\$ 354.75	\$	473.00
57500	BIOPSY OF CERVIX	\$ 449.00	\$ 432.00	\$ 25.00	\$ 112.25	\$ 224.50	\$ 336.75	\$	449.00
57510	CAUTERY OF CERVIX ELECTRO OR THERMAL	\$ 476.00		\$ 25.00	\$ 119.00	\$ 238.00	\$ 357.00	\$	476.00

**Will County Community Health Center
Medical Chargemaster & Sliding Fee Scale**

Code	Description	Proposed 2021 Fees		2020 Fees as Approved		Income as a percent of poverty level					
							A	B	C	D	E
							< 100%	100-133%	134 -185%	186-200%	>200%
						% of Full Fee:					
		Nominal fee	25%	50%	75%	O DISCOUNT					
57522	CONIZATION OF CERVIX	\$ 1,145.00	\$ 286.25	\$ 572.50	\$ 858.75	\$ 25.00	\$ 286.25	\$ 572.50	\$ 858.75	\$ 1,145.00	
57720	PLASTIC REPAIR OF UTERINE CERVIX	\$ 1,199.00	\$ 299.75	\$ 599.50	\$ 899.25	\$ 100.00	\$ 299.75	\$ 599.50	\$ 899.25	\$ 1,199.00	
58100	BIOPSY UTERUS LINING	\$ 383.00	\$ 95.75	\$ 191.50	\$ 287.25	\$ 25.00	\$ 95.75	\$ 191.50	\$ 287.25	\$ 383.00	
58120	DILATION AND CURETTAGE	\$ 1,094.00	\$ 273.50	\$ 547.00	\$ 820.50	\$ 100.00	\$ 273.50	\$ 547.00	\$ 820.50	\$ 1,094.00	
58150	TOTAL HYSTERECTOMY	\$ 3,968.00	\$ 992.00	\$ 1,984.00	\$ 2,976.00	\$ 200.00	\$ 992.00	\$ 1,984.00	\$ 2,976.00	\$ 3,968.00	
58180	PARTIAL HYSTERECTOMY	\$ 4,018.00	\$ 1,004.50	\$ 2,009.00	\$ 3,013.50	\$ 200.00	\$ 1,004.50	\$ 2,009.00	\$ 3,013.50	\$ 4,018.00	
58300	INSERT INTRAUTERINE DEVICE	\$ 311.00	\$ 77.75	\$ 155.50	\$ 233.25	\$ 25.00	\$ 77.75	\$ 155.50	\$ 233.25	\$ 311.00	
58301	REMOVE INTRAUTERINE DEVICE	\$ 316.00	\$ 79.00	\$ 158.00	\$ 237.00	\$ 25.00	\$ 79.00	\$ 158.00	\$ 237.00	\$ 316.00	
58542	Laparoscopy with Surgical removal Of Tubes & Ovary	\$ 3,314.00	\$ 828.50	\$ 1,657.00	\$ 2,485.50	\$ 300.00	\$ 828.50	\$ 1,657.00	\$ 2,485.50	\$ 3,314.00	
58558	HYSTEROSCOPY, BIOPSY	\$ 2,633.00	\$ 658.25	\$ 1,316.50	\$ 1,974.75	\$ 200.00	\$ 658.25	\$ 1,316.50	\$ 1,974.75	\$ 2,633.00	
58571	LAPAROSCOPY, Total Hyst w/tubes&Ovaries, <250gm	\$ 3,719.00	\$ 929.75	\$ 1,859.50	\$ 2,789.25	\$ 300.00	\$ 929.75	\$ 1,859.50	\$ 2,789.25	\$ 3,719.00	
58573	LAPAROSCOPY, Total Hyst w/tubes&ovaries >250gm	\$ 4,825.00	\$ 1,206.25	\$ 2,412.50	\$ 3,618.75	\$ 400.00	\$ 1,206.25	\$ 2,412.50	\$ 3,618.75	\$ 4,825.00	
58600	DIVISION OF FALLOPIAN TUBE	\$ 1,580.00	\$ 395.00	\$ 790.00	\$ 1,185.00	\$ 100.00	\$ 395.00	\$ 790.00	\$ 1,185.00	\$ 1,580.00	
58611	STERILIZATION WITH CESAREAN	\$ 431.00	\$ 107.75	\$ 215.50	\$ 323.25	\$ 25.00	\$ 107.75	\$ 215.50	\$ 323.25	\$ 431.00	
58670	LAPAROSCOPY, TUBAL CAUTERY	\$ 1,698.00	\$ 424.50	\$ 849.00	\$ 1,273.50	\$ 100.00	\$ 424.50	\$ 849.00	\$ 1,273.50	\$ 1,698.00	
58671	LAPAROSCOPY, TUBAL BLOCK	\$ 1,627.00	\$ 406.75	\$ 813.50	\$ 1,220.25	\$ 100.00	\$ 406.75	\$ 813.50	\$ 1,220.25	\$ 1,627.00	
58720	REMOVAL OF OVARY(TUBE(S)	\$ 3,140.00	\$ 785.00	\$ 1,570.00	\$ 2,355.00	\$ 200.00	\$ 785.00	\$ 1,570.00	\$ 2,355.00	\$ 3,140.00	
58925	REMOVAL OF OVARIAN CYST(S)	\$ 3,113.00	\$ 778.25	\$ 1,556.50	\$ 2,334.75	\$ 200.00	\$ 778.25	\$ 1,556.50	\$ 2,334.75	\$ 3,113.00	
58940	REMOVAL OF OVARY(S)	\$ 2,355.00	\$ 588.75	\$ 1,177.50	\$ 1,766.25	\$ 200.00	\$ 588.75	\$ 1,177.50	\$ 1,766.25	\$ 2,355.00	
59120	TREAT ECTOPIC PREGNANCY	\$ 3,157.00	\$ 789.25	\$ 1,578.50	\$ 2,367.75	\$ 200.00	\$ 789.25	\$ 1,578.50	\$ 2,367.75	\$ 3,157.00	
59150	TREAT ECTOPIC PREGNANCY	\$ 2,928.00	\$ 732.00	\$ 1,464.00	\$ 2,196.00	\$ 200.00	\$ 732.00	\$ 1,464.00	\$ 2,196.00	\$ 2,928.00	
59151	TREAT ECTOPIC PREGNANCY	\$ 3,081.00	\$ 770.25	\$ 1,540.50	\$ 2,310.75	\$ 200.00	\$ 770.25	\$ 1,540.50	\$ 2,310.75	\$ 3,081.00	
59160	D & C AFTER DELIVERY	\$ 855.00	\$ 213.75	\$ 427.50	\$ 641.25	\$ 25.00	\$ 213.75	\$ 427.50	\$ 641.25	\$ 855.00	
59400	DELIVERY, VAGINAL	\$ 6,420.00	\$ 1,605.00	\$ 3,210.00	\$ 4,815.00	\$ 200.00	\$ 1,605.00	\$ 3,210.00	\$ 4,815.00	\$ 6,420.00	
59414	DELIVERY OF PLACENTA	\$ 398.00	\$ 99.50	\$ 199.00	\$ 298.50	\$ 25.00	\$ 99.50	\$ 199.00	\$ 298.50	\$ 398.00	
59430	CARE AFTER DELIVERY	\$ 507.00	\$ 126.75	\$ 253.50	\$ 380.25	\$ 25.00	\$ 126.75	\$ 253.50	\$ 380.25	\$ 507.00	
59510	DELIVERY, CESAREAN	\$ 7,111.00	\$ 1,777.75	\$ 3,555.50	\$ 5,333.25	\$ 200.00	\$ 1,777.75	\$ 3,555.50	\$ 5,333.25	\$ 7,111.00	
59612	DELIVERY VBAC ONLY	\$ 3,765.00	\$ 941.25	\$ 1,882.50	\$ 2,823.75	\$ 200.00	\$ 941.25	\$ 1,882.50	\$ 2,823.75	\$ 3,765.00	
59820	SURGICAL CARE OF MISCARRIAGE	\$ 1,448.00	\$ 362.00	\$ 724.00	\$ 1,086.00	\$ 100.00	\$ 362.00	\$ 724.00	\$ 1,086.00	\$ 1,448.00	
59821	TREATMENT OF MISCARRIAGE	\$ 1,568.00	\$ 392.00	\$ 784.00	\$ 1,176.00	\$ 100.00	\$ 392.00	\$ 784.00	\$ 1,176.00	\$ 1,568.00	
59870	EVACUATE MOLE OF UTERUS	\$ 1,738.00	\$ 434.50	\$ 869.00	\$ 1,303.50	\$ 25.00	\$ 434.50	\$ 869.00	\$ 1,303.50	\$ 1,738.00	
59514	DELIVERY OF 2ND TWIN (cesarean)	\$ 3,664.00	\$ 916.00	\$ 1,832.00	\$ 2,748.00	\$ 100.00	\$ 916.00	\$ 1,832.00	\$ 2,748.00	\$ 3,664.00	
59409	DELIVERY OF 2ND TWIN (vaginal)	\$ 3,296.00	\$ 824.00	\$ 1,648.00	\$ 2,472.00	\$ 100.00	\$ 824.00	\$ 1,648.00	\$ 2,472.00	\$ 3,296.00	
69210	REMOVE IMPACTED EAR WAX	\$ 145.00	\$ 36.25	\$ 72.50	\$ 108.75	\$ 10.00	\$ 36.25	\$ 72.50	\$ 108.75	\$ 145.00	
93000	ELECTROCARDIOGRAM	\$ 87.00	\$ 21.75	\$ 43.50	\$ 65.25	\$ 10.00	\$ 21.75	\$ 43.50	\$ 65.25	\$ 87.00	
94760	MEASURE BLOOD OXYGEN LEVEL	\$ 22.00	\$ 5.50	\$ 11.00	\$ 16.50	\$ 1.00	\$ 5.50	\$ 11.00	\$ 16.50	\$ 22.00	
99217	OBSERVATION CARE DISCHARGE	\$ 251.00	\$ 62.75	\$ 125.50	\$ 188.25	\$ 25.00	\$ 62.75	\$ 125.50	\$ 188.25	\$ 251.00	

Will County Community Health Center
 Medical Chargemaster & Sliding Fee Scale

Code	Description	Proposed 2021 Fees	2020 Fees as Approved	Income as a percent of poverty level					
				A	B	C	D	E	
				< 100%	100-133%	134-185%	186-200%	>200%	
				% of Full Fee:					
				Nominal fee	25%	50%	75%	O DISCOUNT ^N	
99218	OBSERVATION CARE, LOW	\$ 323.00	\$ 284.00	\$ 25.00	\$ 80.75	\$ 161.50	\$ 242.25	\$	323.00
99219	OBSERVATION CARE, MOD	\$ 407.00	\$ 380.00	\$ 50.00	\$ 101.75	\$ 203.50	\$ 305.25	\$	407.00
99220	OBSERVATION CARE, HIGH	\$ 639.00	\$ 603.00	\$ 100.00	\$ 159.75	\$ 319.50	\$ 479.25	\$	639.00
99221	INITIAL HOSPITAL CARE, LOW	\$ 332.00	\$ 318.00	\$ 25.00	\$ 83.00	\$ 166.00	\$ 249.00	\$	332.00
99222	INITIAL HOSPITAL CARE, MOD	\$ 393.00	\$ 375.00	\$ 50.00	\$ 98.25	\$ 196.50	\$ 294.75	\$	393.00

Will County Community Health Center Medical Chargemaster & Sliding Fee Scale		Proposed 2021 Fees	2020 Fees as Approved	Income as a percent of poverty level				
				A	B	C	D	E
				<100%	100-133%	134-185%	186-200%	>200%
Code	Description	Nominal fee	25%	50%	75%	N O DISCOUNT		
99223	INITIAL HOSPITAL CARE, HIGH	\$ 100.00	\$ 147.25	\$ 294.50	\$ 441.75	\$ 589.00		
99231	SUBSEQUENT HOSPITAL CARE, BRIEF	\$ 25.00	\$ 30.75	\$ 61.50	\$ 92.25	\$ 123.00		
99232	SUBSEQUENT HOSPITAL CARE, MOD	\$ 25.00	\$ 52.25	\$ 104.50	\$ 156.75	\$ 209.00		
99233	SUBSEQUENT HOSPITAL CARE, EXT	\$ 50.00	\$ 85.00	\$ 170.00	\$ 255.00	\$ 340.00		
99234	OBSERV/HOSP SAME DATE	\$ 25.00	\$ 101.25	\$ 202.50	\$ 303.75	\$ 405.00		
99235	OBSERV/HOSP SAME DATE	\$ 25.00	\$ 137.25	\$ 274.50	\$ 411.75	\$ 549.00		
99236	OBSERV/HOSP SAME DATE	\$ 25.00	\$ 211.75	\$ 423.50	\$ 635.25	\$ 847.00		
99238	HOSPITAL DISCHARGE DAY	\$ 25.00	\$ 60.00	\$ 120.00	\$ 180.00	\$ 240.00		
99239	HOSPITAL DISCHARGE DAY > 30 MIN	\$ 25.00	\$ 70.00	\$ 140.00	\$ 210.00	\$ 280.00		
99241	OFFICE CONSULTATION	\$ 25.00	\$ 45.00	\$ 90.00	\$ 135.00	\$ 180.00		
99242	OFFICE CONSULTATION - 30 MINUTES	\$ 25.00	\$ 71.00	\$ 142.00	\$ 213.00	\$ 284.00		
99243	OFFICE CONSULTATION - 40 MINUTES	\$ 25.00	\$ 92.00	\$ 184.00	\$ 276.00	\$ 368.00		
99251	INITIAL INPATIENT CONSULT - 20 MIN	\$ 25.00	\$ 51.25	\$ 102.50	\$ 153.75	\$ 205.00		
99252	INITIAL INPATIENT CONSULT - 40 MIN	\$ 25.00	\$ 65.50	\$ 131.00	\$ 196.50	\$ 262.00		
99253	INITIAL INPATIENT CONSULT - 55 MIN	\$ 25.00	\$ 91.75	\$ 183.50	\$ 275.25	\$ 367.00		
99254	INITIAL INPATIENT CONSULT - 80 MIN	\$ 25.00	\$ 117.75	\$ 235.50	\$ 353.25	\$ 471.00		
99255	INITIAL INPATIENT CONSULT - 110 MIN	\$ 25.00	\$ 154.00	\$ 308.00	\$ 462.00	\$ 616.00		
99460	INITIAL CARE, NORMAL NEWBORN - BIRTHING CENTER	\$ 25.00	\$ 92.25	\$ 184.50	\$ 276.75	\$ 369.00		
99461	INITIAL CARE, NORMAL NEWBORN - OTHER	\$ 25.00	\$ 41.00	\$ 82.00	\$ 123.00	\$ 164.00		
99462	SUBSEQUENT NEWBORN CARE	\$ 25.00	\$ 47.25	\$ 94.50	\$ 141.75	\$ 189.00		
99463	NEWBORN SAME DAY ADMIT/DISCHARGE	\$ 25.00	\$ 91.25	\$ 182.50	\$ 273.75	\$ 365.00		
Laboratory								
36415	ROUTINE VENIPUNCTURE	\$ 1.00	\$ 5.50	\$ 11.00	\$ 16.50	\$ 22.00		
81002	URINALYSIS NONAUTO W/O SCOPE	\$ 1.00	\$ 4.25	\$ 8.50	\$ 12.75	\$ 17.00		
81003	URINALYSIS, AUTO, W/O SCOPE	\$ 1.00	\$ 4.75	\$ 9.50	\$ 14.25	\$ 19.00		
81025	URINE PREGNANCY TEST	\$ 2.00	\$ 6.50	\$ 13.00	\$ 19.50	\$ 26.00		
82270	TEST FOR BLOOD, FECES	\$ 1.00	\$ 4.50	\$ 9.00	\$ 13.50	\$ 18.00		
82962	REAGENT STRIP/BLOOD GLUCOSE	\$ 1.00	\$ 4.00	\$ 8.00	\$ 12.00	\$ 16.00		
86308	MONO SCREEN	\$ 1.00	\$ 8.00	\$ 16.00	\$ 24.00	\$ 32.00		
87210	SMEAR, WET MOUNT, SALINE/INK	\$ 1.00	\$ 6.50	\$ 13.00	\$ 19.50	\$ 26.00		
87880	RAPID STREP	\$ 2.00	\$ 12.00	\$ 24.00	\$ 36.00	\$ 48.00		
85018	HEMOGLOBIN - FINGERSTICK	\$ 1.00	\$ 4.25	\$ 8.50	\$ 12.75	\$ 17.00		
G2023	Specimen Collection, SARS/ COVID-19, any specimen source	\$0.00	\$ 1.00	\$ 2.00	\$ 3.00	\$ 23.46		
Behavioral Health								
90791	PSYCH DIAGNOSTIC EVALUATION	\$ 25.00	\$ 66.08	\$ 132.15	\$ 198.23	\$ 264.30		
90792	PSYCH DIAG EVAL & MEDICAL SRVS	\$ 25.00	\$ 97.00	\$ 194.00	\$ 291.00	\$ 388.00		
90832	PSYCH, 30 MIN PT	\$ 25.00	\$ 32.50	\$ 65.00	\$ 97.50	\$ 130.00		
90833	PSYCH, 30 MIN/EVAL & MNGMT SRVS	\$ 25.00	\$ 36.75	\$ 73.50	\$ 110.25	\$ 147.00		

Will County Community Health Center
 Medical Chargemaster & Sliding Fee Scale

Code	Description	Proposed 2021 Fees	2020 Fees as Approved	Income as a percent of poverty level					O DISCOUNT
				A	B	C	D	E	
				< 100%	100-133%	134-185%	186-200%	>200%	
				% of Full Fee:					
				Nominal fee	25%	50%	75%		
90834	PSYCH, 45 MIN PT	\$ 181.00	\$ 179.00	\$ 25.00	\$ 45.25	\$ 90.50	\$ 135.75	\$ 181.00	
90836	PSYCH, 45 MIN PT & EVAL	\$ 205.00	\$ 200.00	\$ 25.00	\$ 51.25	\$ 102.50	\$ 153.75	\$ 205.00	
90837	PSYCH, 60 MIN PT	\$ 202.00	\$ 200.00	\$ 25.00	\$ 50.50	\$ 101.00	\$ 151.50	\$ 202.00	
90838	PSYCH, 60 MIN/EVAL & MNGMT SRVS	\$ 258.00	\$ 257.00	\$ 25.00	\$ 64.50	\$ 129.00	\$ 193.50	\$ 258.00	
90839	PSYCH FOR CRISIS, FIRST 60 MIN	\$ 259.00	\$ 266.00	\$ 25.00	\$ 64.75	\$ 129.50	\$ 194.25	\$ 259.00	
90840	PSYCH FOR CRISIS, ADDITIONAL 30 MIN	\$ 129.00	\$ 132.00	\$ 25.00	\$ 32.25	\$ 64.50	\$ 96.75	\$ 129.00	
90845	PSYCHOANALYSIS	\$ 246.00	\$ 261.00	\$ 25.00	\$ 61.50	\$ 123.00	\$ 184.50	\$ 246.00	
90846	FAMILY PSYCH w/o PT 50 MIN	\$ 199.00	\$ 193.00	\$ 25.00	\$ 49.75	\$ 99.50	\$ 149.25	\$ 199.00	
90847	FAMILY PSYCH with PT 50 MIN	\$ 211.00	\$ 208.00	\$ 25.00	\$ 52.75	\$ 105.50	\$ 158.25	\$ 211.00	
90849	MULTI-FAMILY GROUP PSYCH	\$ 175.00	\$ 145.00	\$ 25.00	\$ 43.75	\$ 87.50	\$ 131.25	\$ 175.00	
90853	GROUP PSYCH	\$ 78.00	\$ 105.00	\$ 25.00	\$ 19.50	\$ 39.00	\$ 58.50	\$ 78.00	
90863	Pharmacologic Mngmt (prescrip/med review)	\$ 126.00	\$ 135.00	\$ 25.00	\$ 31.50	\$ 63.00	\$ 94.50	\$ 126.00	
90875	PSYCH with BIOFEEDBACK 30 MIN	\$ 187.00	\$ 169.00	\$ 25.00	\$ 46.75	\$ 93.50	\$ 140.25	\$ 187.00	
90876	PSYCH With BIOFEEDBACK 45 MIN	\$ 203.00	\$ 182.00	\$ 25.00	\$ 50.75	\$ 101.50	\$ 152.25	\$ 203.00	
90880	HYPNOTHERAPY	\$ 238.00	\$ 236.00	\$ 25.00	\$ 59.50	\$ 119.00	\$ 178.50	\$ 238.00	
90889	REPORT PREP/INSURANCE, AGENCIES	\$ 53.00	\$ 134.00	\$ 25.00	\$ 13.25	\$ 26.50	\$ 39.75	\$ 53.00	
Vaccines									
90471	Vaccine Administration Fee (all except COVID and Influenza)	\$ 8.00	\$ 6.40	\$ 0.00	\$ 2.00	\$ 4.00	\$ 6.00	\$ 8.00	
0001A	Pfizer COVID-19- Administration of First Dose	\$ 40.00	\$ 17.00	\$ 2.00	\$ 10.00	\$ 20.00	\$ 30.00	\$ 40.00	
0002A	Pfizer COVID-19- Administration of Second Dose	\$ 40.00	\$ 29.00	\$ 2.00	\$ 10.00	\$ 20.00	\$ 30.00	\$ 40.00	
0011A	Moderna COVID-19 - Administration of First Dose	\$ 40.00	\$ 17.00	\$ 2.00	\$ 10.00	\$ 20.00	\$ 30.00	\$ 40.00	
0012A	Moderna COVID-19 -Administration of Second Dose	\$ 40.00	\$ 29.00	\$ 2.00	\$ 10.00	\$ 20.00	\$ 30.00	\$ 40.00	
0031A	Johnson&Johnson COVID-19 - Administration of Single Dose	\$ 40.00		\$ 2.00	\$ 10.00	\$ 20.00	\$ 30.00	\$ 40.00	
90633	Hepatitis A (Pediatric/ adolescent)	\$ 84.00	\$ 81.00	\$ 15.00	\$ 21.00	\$ 42.00	\$ 63.00	\$ 84.00	
90744	Hepatitis B (pediatric)	\$ 74.00	\$ 55.00	\$ 10.00	\$ 18.50	\$ 37.00	\$ 55.50	\$ 74.00	
90746	Hepatitis B (adult)	\$ 111.00	\$ 55.00	\$ 10.00	\$ 27.75	\$ 55.50	\$ 83.25	\$ 111.00	
90647	HIB	\$ 66.00	\$ 63.00	\$ 10.00	\$ 16.50	\$ 33.00	\$ 49.50	\$ 66.00	
90658	Influenza vaccine (incl. admin. fee)	\$ 41.00	\$ 25.00	\$ 5.00	\$ 10.25	\$ 20.50	\$ 30.75	\$ 41.00	
90649	HPV (Gardasil)	\$ 302.00	\$ 288.00	\$ 30.00	\$ 75.50	\$ 151.00	\$ 226.50	\$ 302.00	
90696	DTAP-IPV	\$ 124.00	\$ 117.00	\$ 20.00	\$ 31.00	\$ 62.00	\$ 93.00	\$ 124.00	
90698	DTAP-HIB-IPV	\$ 187.00	\$ 176.00	\$ 25.00	\$ 46.75	\$ 93.50	\$ 140.25	\$ 187.00	
90700	DTAP for < 7 yrs	\$ 67.00	\$ 67.00	\$ 10.00	\$ 16.75	\$ 33.50	\$ 50.25	\$ 67.00	
90707	MMR	\$ 134.00	\$ 125.00	\$ 20.00	\$ 33.50	\$ 67.00	\$ 100.50	\$ 134.00	
90713	Polio IM	\$ 74.00	\$ 71.00	\$ 10.00	\$ 18.50	\$ 37.00	\$ 55.50	\$ 74.00	
90715	TDAP for > 7 yrs	\$ 97.00	\$ 95.00	\$ 15.00	\$ 24.25	\$ 48.50	\$ 72.75	\$ 97.00	

Will County Community Health Center
Medical Chargemaster & Sliding Fee Scale

Code	Description	Proposed 2021 Fees	2020 Fees as Approved	Income as a percent of poverty level					
				A	B	C	D	E	
				< 100%	100-133%	134-185%	186-200%	>200%	
				% of Full Fee:					
				Nominal fee	25%	50%	75%	N	O DISCOUNT
90716	Varicella (Chickenpox)	\$ 223.00	\$ 204.00	\$ 25.00	\$ 55.75	\$ 111.50	\$ 167.25	\$ 223.00	
90734	Meningococcal	\$ 234.00	\$ 222.00	\$ 25.00	\$ 58.50	\$ 117.00	\$ 175.50	\$ 234.00	
90670	Pneum (Pneumococcal)	\$ 345.00	\$ 325.00	\$ 30.00	\$ 86.25	\$ 172.50	\$ 258.75	\$ 345.00	
90710	Proquad (MMR, Varicella)	\$ 366.00	\$ 330.00	\$ 30.00	\$ 91.50	\$ 183.00	\$ 274.50	\$ 366.00	
90715	Boostrix (TDAP, 7+ yrs)	\$ 97.00	\$ 95.00	\$ 15.00	\$ 24.25	\$ 48.50	\$ 72.75	\$ 97.00	
OPTOMETRY									
92002	Intermediate Opth Service, New Pt	\$ 188.00	\$ 173.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 188.00	
92004	Comprehensive Opth Service, Est Pt	\$ 286.00	\$ 273.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 286.00	
92012	Intermediate Opth Service, New Pt	\$ 180.00	\$ 172.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 180.00	
92014	Comprehensive Opth Service, Est Pt	\$ 242.00	\$ 234.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 242.00	
92015	Refraction	\$ 56.00	\$ 58.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 56.00	
92250	Fundus Photography-both eyes	\$ 165.00	\$ 171.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 165.00	
92285	External Ocular Photography/External Slit Lamp Photos	\$ 94.00	\$ 101.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 94.00	
92081	Visual Field, Limited	\$ 81.00	\$ 92.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 81.00	
92082	Visual Field, Intermediate	\$ 121.00	\$ 132.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 121.00	
92083	Visual Field, Extensive	\$ 179.00	\$ 188.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 179.00	
65205	Foreign Body Removal, Conj Superficial	\$ 198.00	\$ 212.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 198.00	
65210	Foreign Body Removal, Conj Embedded	\$ 219.00	\$ 226.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 219.00	
65435	Foreign Body Removal, Cornea-per eye	\$ 258.00	\$ 264.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 258.00	
67820	Removal Corneal Epithelium	\$ 254.00	\$ 243.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 254.00	
67820	Epilation Eyelash(es) w/forceps-per eyelid	\$ 165.00	\$ 168.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 165.00	
68761	Close Punctum w/plug; per site	\$ 343.00	\$ 371.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 343.00	
68801	Dilation of Punctum; irrigation & dilation	\$ 277.00	\$ 317.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 277.00	
68840	Probing Lacrimal Canaliculi	\$ 428.00	\$ 431.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 428.00	
92021	Gonioscopy-separate procedure	\$ 83.00	\$ 87.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 83.00	
92283	Color Vision Exam, extended	\$ 107.00	\$ 108.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 107.00	
92060	Sensorimotor Exam	\$ 153.00	\$ 158.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 153.00	
92065	Orthoptic Training	\$ 110.00	\$ 117.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 110.00	
96110	VIP Exam	\$ 46.00	\$ 47.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 46.00	
92311	Aphakia-One Eye	\$ 207.00	\$ 194.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 207.00	
92312	Aphakia-Both Eyes	\$ 189.00	\$ 190.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 189.00	
923100	Orthokeratology New Fit	\$ 164.00	\$ 156.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 164.00	
KN	Fitting of CL to treat Surface Disease	\$ 120.00	\$ 118.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 120.00	



**Will County Board of Health
Resolution #21-22**

**RESOLUTION OF THE WILL COUNTY BOARD OF HEALTH
WILL COUNTY, ILLINOIS**

**APPROVAL OF THE COMMUNITY HEALTH CENTER
AMENDED GOVERNING COUNCIL BY-LAWS**

WHEREAS, as provided for in the By-Laws of the Will County Community Health Center Governing Council, any amendments made to the By-Laws shall have the approval of the Will County Board of Health, and

WHEREAS, recent amendments to the Governing Council By-Laws were made at the regularly scheduled monthly meeting of the Governing Council on April 7, 2021.

NOW, THEREFORE, BE IT RESOLVED the Board of Health approves the Will County Community Health Center Governing Council By-Laws as amended and attached.

DATED THIS 21st day of April 2021.

James E. Zelko, President
Will County Board of Health

**BYLAWS
WILL COUNTY COMMUNITY HEALTH CENTER
GOVERNING COUNCIL**

ARTICLE I – NAME

The name of this body shall be the Will County Community Health Center Governing Council.

ARTICLE II – PURPOSE

The mission of the Will County Community Health Center (“Center”) is to improve the health of the residents of Will County by providing access to quality integrated medical, behavioral health, and dental care through community collaboration, service and education.

ARTICLE III – OBJECTIVES

The objectives of the Center shall be:

1. To provide quality primary health and supportive services to all residents of primarily Will County but also surrounding counties, especially the medically underserved, uninsured and underinsured.
2. To increase the accessibility of primary and preventive health services to low-income, medically underserved, uninsured and underinsured, including limited-English-population minority groups.
3. To integrate primary health services with other community health resources.
4. To engage with health care providers, health insurers and local businesses to coordinate care and market services appropriate to our purpose as described in Article II.

Commented [MM1]: Last year the GC and HRSA approved a change to add Grundy Counties to our scope

ARTICLE IV – AUTHORITY

The Center is a private not for profit entity incorporated under the laws of the State of Illinois. The Governing Council of the Center has entered into a written Cooperative Operational Agreement with the Will County Board of Health to jointly accomplish the objectives stated above. The Will County Board of Health derives its authority to operate under 55 ILCS 5/5-25001, *et seq.*

Adopted by the Community Health Center Governing Council, March 1, 2006; Approved by the Will County Board of Health, March 15, 2006
Adopted by the Community Health Center Governing Council, April 4, 2012; Approved by the Will County Board of Health, April 18, 2012
Adopted by the Community Health Center Governing Council, May 2, 2012; Approved by the Will County Board of Health, May 16, 2012
Adopted by the Community Health Center Governing Council, June 6, 2012; Approved by the Will County Board of Health, June 20, 2012
Adopted by the Community Health Center Governing Council, May 1, 2013; Approved by the Will County Board of Health, May 15, 2013
Adopted by the Community Health Center Governing Council, May 6, 2015; Approved by the Will County Board of Health, May 20, 2015
Adopted by the Community Health Center Governing Council, August 5, 2015; Approved by the Will County Board of Health, August 19, 2015
Adopted by the Community Health Center Governing Council, May 4, 2016; Approved by the Will County Board of Health, June 15, 2016
Adopted by the Community Health Center Governing Council, July 5, 2017; Approved by the Will County Board of Health, August 16, 2017
Adopted by the Community Health Center Governing Council, July 5, 2018; Approved by the Will County Board of Health, August 15, 2018
Adopted by the Community Health Center Governing Council, January 9, 2019; Approved by the Will County Board of Health, February 29, 2019
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ARTICLE V – SIZE AND COMPOSITION

A. SIZE

The Council shall consist of between 9 and 15 voting members. Its members can be increased at the discretion of the Council.

B. COMPOSITION

1. A majority of the Council members shall be individuals who are ~~or will be~~ served by the Center and who, as a group, represent the populations served in terms of demographic factors, such as race, ethnicity, and gender. Patient board members must be a current registered patients of the health center and must have accessed the health center in the past 24 months to receive at least one or more in-scope service(s) that generated a health center visit.
2. No more than one-half of the remaining ~~non-patient~~ members of the Council may be individuals who derive more than 10 percent of their annual income from the health care industry (provide medical services, manufacture medical equipment, and/or develop pharmaceuticals). Income percentage shall be verified with a signed attestation by the non-patient board member who derives income from the health care industry.
3. The Will County Executive, with approval of the Will County Board, may appoint up to one-quarter of the members.
4. The remaining Council members shall be representatives of the community, in which the catchment area is located and shall be selected for their expertise in community affairs, local government, finance and banking, legal affairs, trade unions, and other commercial and industrial concerns, or social service agencies within the community.
5. A Governing Council member may not be an employee of the Center, or spouse or child, parent, brother or sister by blood or marriage of such an employee.
6. The Chief Executive Officer (CEO) of the Center gives logistical, managerial and administrative assistance to the Council.
7. The CEO may be a non-voting, ex-officio member of the Council.

Commented [MM2]: Just a point of clarification

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ARTICLE VI – MEMBERSHIP & TERMS OF OFFICE

A. **MEMBERSHIP ELIGIBILITY**

The Council shall select Council members throughout the year, whenever a vacancy occurs, and shall solicit nominations from the community serviced by the Center, community organizations, and health organizations. Such members shall be selected from a slate of one or more nominees, as long as it conforms to HRSA regulations and requirements.

B. **VACANCIES**

Any vacancies occurring in the Council shall be filled by appointment of the Council which shall use its best efforts to maintain the Council’s composition of patient members and members-at-large. An appointment shall be made by an affirmative vote of the majority of members present and entitled to vote. Any Council member appointed to fill a vacancy shall be appointed for the unexpired term of his/her predecessor in office.

C. **REMOVAL**

Any member of the Council may be removed from the Council if, within any twelve-month period, they have accumulated six unexcused absences. The Chair shall notify the member in writing by mail or by email after five unexcused absences in any twelve-month period. An unexcused absence shall be defined as any meeting where notice of absence was not delivered to the Chair or designee prior to the scheduled start of the meeting. After such notice, if a sixth unexcused absence occurs, a vote shall be taken at the next meeting regarding removal. A majority vote of those present and voting shall cause that member to be removed.

D. **TERMS OF OFFICE**

Members shall be appointed for terms of two years, with half of the members beginning terms on even years, and the others beginning on odd years. Reappointments shall be reviewed annually, beginning one month prior to the annual meeting.

ARTICLE VII – MEETING AND VOTING

A. **REGULAR AND SPECIAL MEETINGS**

Regular meetings of the Council shall be held monthly at a time and place to be decided by the Council in accord with the Illinois Open Meetings Act. Special meetings may be

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called by the Chair or the Chief Executive Officer of the Center or requested by two (2) members of the Governing Council and posted ~~filed~~ by the Executive Assistant to the CEO in accord with the Illinois Open Meetings Act.

In order to hold a special meeting, advance notice of such meeting shall be given to each member of the Governing Council forty-eight (48) hours before the time of the meeting, stating the time, place and the business to be transacted and no other business shall be considered at a special meeting.

B. ANNUAL MEETING

The regular meeting on the first Wednesday in April shall be known as the annual meeting, and shall be for the purpose of electing officers, reappointment of Council members, reviewing Council self-assessment report, receiving reports of officers and committees, and for any other business that may arise. The Council shall determine whether the meeting will be for the Council only or if the management staff is to be included.

Not less than fifty (50) days prior to each Annual Meeting, the Governance Committee shall meet to develop a slate of officers and members for the year. Nominations for membership and officers may be submitted by any Council member to the Governance Committee at any time prior to this meeting.

The Governance Committee, acting by unanimous vote, shall nominate a number of nominees for Council members equal to the number of current vacancies or vacancies which will occur at the Annual meeting. The Governance Committee shall take into account the requirements concerning the composition of the Governing Council as in Article V of these Bylaws.

Not less than thirty (30) days before each Annual Meeting, the Governance Committee shall submit to the Secretary its nominations for members and officers, and the Secretary shall immediately inform the Governing Council members of these nominations.

C. NOTICE

Notice of special meetings of the Council shall be given by written notice delivered personally, mailed or via email to each Council member at his/her designated address at least forty-eight (48) hours prior to said meeting.

D. QUORUM

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A majority of the Council members shall constitute a quorum for the transaction of business at any Council meeting. If less than a majority of the Council members are present at the meeting, a majority of the Council members present may adjourn the meeting. If a majority of the Council are not present, Council shall conduct a discussion meeting of which minutes will be prepared and placed on file.

E. RECORDING OF MINUTES AND STORAGE

Minutes shall be taken at all Governing Council and committee meetings. Minutes shall be kept in both written and audio recording form and shall be taken in accordance with the Illinois Open Meetings Act.

All minutes shall be approved at the following regular meeting. Once approved, minutes shall be open for public inspection within 10 days. Additionally, minutes shall be posted on the Internet for public viewing.

Written minutes shall be kept at the main office of the Community Health Center. Audio recordings shall be stored electronically and backed up as frequently as other electronic files held by the Community Health Center. No minutes shall be disposed of until proper authorization is granted pursuant to applicable law.

F. VOTING

All motions before the Governing Council shall be decided by a majority vote of the Council members present, however, no meeting shall be counted as official unless a quorum of the members is present. Proxy voting shall not be permitted.

ARTICLE VIII – ELECTRONIC MEETING ATTENDANCE

All Governing Council meetings shall comply with the Illinois Open Meetings Act, as amended from time to time. With regard to electronic attendance at Governing Council meetings, such electronic attendance shall be allowed only as permitted by Section 7 of the Illinois Open Meetings Act, or as otherwise permitted by amendment to the Illinois Open Meetings Act.

ARTICLE IX – OFFICERS

A. OFFICERS

The officers of the Council shall be the Chair, Vice-Chair, Secretary and Treasurer

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B. ELECTION AND TERMS OF OFFICE

The officers shall be elected by the Council during the April meeting and shall take office at the first Council meeting following election. Term of office shall be for one year. Each officer shall hold office until his/her successor ~~has~~ shall have been duly elected or appointed by terms set forth in item D below or until said officer shall resign or shall have been removed in the manner hereinafter provided.

C. REMOVAL

Any officer elected by the Council may be removed by the Council with two-third majority vote then present and voting.

D. VACANCY

A vacancy in the offices of Vice-Chair, Secretary and/or Treasurer of the Council, occurring within the first 9 months of the term, because of resignation, removal or other reason, may be filled for the unexpired portion of the term by a vote of the majority of a quorum at a regularly scheduled meeting of the Council. A vacancy in the offices of Vice-Chair, Secretary and/or Treasurer of the Council, occurring within the last 3 months of the term, because of resignation, removal or other reason, may be filled for the unexpired portion of the term by appointment of the Chair. A vacancy in the office of Chair may be filled for the unexpired portion of the term by a vote of the majority of a quorum at a regularly scheduled meeting of the Council.

E. CHAIR

The Chair shall be elected from a majority of the quorum of the Council at a regularly scheduled meeting and shall (1) preside at all meetings of the Council; (2) regularly confer with the Executive Staff of the Community Health Center and monitor the implementation of policies and procedures adopted by the Council; ~~and (3) review and execute all funding grant applications upon final approval of the Governing Council.~~ The Chair or other designated officer may sign any document or instrument requiring the signature of an officer of the Governing Council which is necessary and incident to the purposes of the Governing Council, except where the signing of such document or instrument is expressly delegated to some other officer or official by the Cooperative Agreement between the Will County Health Department and the Will County Community Health Center Governing Council or as otherwise required by law. In addition, the Chair shall have the usual powers, duties and authority commonly vested in the office of Chair and shall perform other duties as may be authorized by the Council.

Commented [MM3]: The chair does not do this currently.

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F. VICE-CHAIR

The Vice-Chair shall assist the Chair in the discharge of his/her duties as the Chair may direct and shall perform such other duties as from time to time may be assigned to him/her by the Chair or by the Council. In the absence of the Chair or in the event of his/her inability or refusal to act, the Vice-Chair shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair.

G. SECRETARY

The Secretary shall be responsible for:

- 1) the final approval of the minutes of the meetings of the Council as prepared by the Executive Assistant to the CEO;
- 2) systematic tracking and filing of Governing Council reports;
- 3) see that all notices are duly given in accordance with the provisions of these bylaws or as required by law;
- 4) be responsible for the maintenance of a register of the contact information of each member which shall be furnished to the secretary by such member;
- 5) list of all committees with meeting schedule and
- 6) perform all duties incident to the office of Secretary and such other duties as from time to time may be assigned to him/her by the Chair of the Council.

In the absence of the Chair and the Vice-Chair or in the event of his/her/their inability or refusal to act, the Secretary shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair. The Chief Executive Officer shall provide administrative assistance necessary in fulfilling these duties. In the absence of the Secretary, a Secretary pro tem shall be appointed by the Chair person.

H. TREASURER

The Treasurer will serve as the Finance Committee Chairman and shall work with the Will County Board of Health and the Will County Health Department and Community Health Center staff to ensure that the affairs of the Will County Community Health Center are carried out in a proper fiduciary manner. The Treasurer shall perform all the duties incident to the office of Treasurer and such other duties as from time to time may be assigned to him/her by the Chair or by the Council. In the absence of the Chair, the Vice-Chair and the Secretary or in the event of his/her/their inability or refusal to act, the Treasurer shall perform the duties of the Chair and when so acting, shall have all the powers of and be subject to all the restrictions upon the Chair.

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I. NOMINATION OF OFFICERS

Nomination of officers for the coming year shall be submitted upon the Chair calling for nominations from the floor during the March meeting.

ARTICLE X – COMMITTEES

The Chairperson shall appoint committee members and designate a Chair of said committee, with Council approval. The Chair, with the consent of the Council, may appoint members to these committees or ask for voluntary participation; non-Council members, who may be Center employees, may serve on committees to assist the Council in carrying out its charge. The Chair and all members of each committee shall hold office for one (1) year or until their successors are appointed and approved. The Chair of each committee shall have the power to fill any vacancies that occur on the committee for the remainder of the year, with approval of the Council. All committees of the Council shall meet at such time and place as designated by the Chair of the committee and as often as necessary to accomplish their duties, provided a public notice is given at least 48 hours prior to the meeting. All meetings will be documented with minutes. The Council may appoint an advisory committee and members from a professional or community groups as deemed necessary to enhance committee effectiveness.

The following will be considered standing committees: Executive/Personnel; Finance; Governance and Quality Improvement.

A. Executive/Personnel Committee

Overall Roles and Responsibilities

The Executive Committee provides a mechanism for Governing Council leaders to engage, within the limits set by Council policy and the bylaws, in decision making, oversight, and communication on important organizational matters.

Responsibilities

The Executive Committee’s specific responsibilities include:

- Overseeing the selection of the Chief Executive Officer (CEO) as defined in the Cooperative Agreement.
- Approving the position description of the CEO.

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- Recommending a CEO evaluation process to the Governing Council, including annual goals for the CEO and an annual CEO performance evaluation. Governing Council members, along with the Executive Director of the Will County Health Department (WCHD), shall be involved in the review of the CEO, ~~as well as the Executive Director of the Will County Health Department (WCHD)~~. The WCHD Executive Performance Appraisal form will be utilized.
- Conducting the CEO evaluation process, consistent with Governing Council-approved policy, and in a manner that promotes trust and candid communication between the Council and CEO, ensures that the CEO understands the Council's expectations, and provides constructive feedback to the CEO on his or her performance.
- Directing the CEO to prepare and annually update a CEO/management succession and management development plan to be reviewed with the committee.
- Reporting to the Governing Council in sufficient detail to assure the board that its responsibilities for executive evaluation are being fulfilled.
- Approving the dismissal of the CEO as defined in the Cooperative Agreement.
- Serving as a sounding board for management on emerging issues, problems, and initiatives.

Commented [MM4]: Or

Commented [MM5]: Original language was misleading and sounded like the GC participated in the review of the Executive Director of the WCHD

Meetings

The committee shall meet at least once a year and additionally as needed at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The Executive Committee is composed of the board Chair, Vice Chair, Secretary, and Treasurer, CEO, and the chairs of the Council's committees on finance, governance, and quality.

The CEO shall be excused for matters relating to the CEO evaluation.

B. Governance Committee

Overall Roles and Responsibilities

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The Governance Committee provides for the Council's effectiveness and continuing development.

Responsibilities

The specific responsibilities of the Governance Committee include:

- Recommending to the Council policies and processes designed to provide for effective and efficient governance, including but not limited to policies for:
 - Evaluation of the Council and the chairperson.
 - Election and reelection of Council members.
 - Council member orientation and education.
 - Succession planning for the Council chair and other Council leaders.
- Reviewing and recommending a position description detailing responsibilities of and expectations for Council members and the Council chairperson.
- Recommending nominees for election and reelection to the Council. To facilitate this responsibility, the committee will:
 - Develop and recommend to the Council a statement of the competencies and personal attributes currently needed on the Council, to be used as a guideline for recruitment and election of Council members.
 - Conduct a “gap analysis” to identify succession planning/recruitment needs.
 - Develop and regularly update a list of potential Council members regardless of whether a current vacancy exists.
 - Oversee a process for vetting the capability fitness of prospective nominees.
 - Develop and oversee a plan for enhancing Council diversity.
 - Evaluate the performance of individual Council members eligible for reelection.
- Conducting a succession planning process for the Chairperson and other Council leaders. Nominating officers for election by the full board.

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- Reviewing the corporate bylaws annually and recommending any needed changes to the full board.
- Advising management on plans for Council education, including new member orientation, ongoing education of present members, and an annual board retreat (if necessary).
- Overseeing the board’s self-assessment and improvement process every year.

Meetings

The Governance Committee meets at least two times a year or when necessary at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The committee shall include at a minimum three members of the Council and the CEO.

C. Finance Committee

Overall Roles and Responsibilities

The committee is responsible for recommending financial policies, goals, and budgets that support the mission, values, and strategic goals of the organization. The committee also reviews the organization’s financial performance against its goals and proposes major transactions and programs to the Council. In addition, the committee reviews the annual/oversees audit, ensuring any follow-up actions are taken, and reviews and corporate compliance activities.

Commented [MM6]: Language added per HRSA compliance manual.

Responsibilities

The finance committee’s specific responsibilities include:

- Recommending policies that maintain and improve the financial health and integrity of the organization.
- Reviewing and recommending a long-range financial plan for the organization.
- Reviewing and recommending an annual operating budget and annual capital

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budget consistent with the financial plan and financial policies.

- Reviewing and recommending capital expenditures and unbudgeted operating expenditures.
- Reviewing the financial aspects of major proposed transactions, new programs and services, as well as proposals to discontinue programs or services, and making action recommendations to the Council.
- Monitoring the financial performance of the organization as a whole and its line items against approved budgets, long-term trends, and industry benchmarks.
- Requiring and monitoring corrective actions to bring the organization into compliance with its budget and other financial targets.
- Monitoring grant budgets and expenditures and require corrective actions to bring organization into compliance.
- *Audit responsibilities include:* Recommending policies and processes to the Council related to:
 - The organization's financial statements and other financial information provided to governmental bodies, financial institutions, and the public.
 - The organization's systems of internal controls for finance, accounting, legal compliance and ethics, according to policies that management and the Council have established.
 - The organization's auditing, accounting, financial reporting, and compliance processes.
 - Discussing the results of the annual audit and closely reviewing any significant changes to the financial statements or changes in accounting principles and disclosure practices.
 - Reviewing the external auditor's annual management letter regarding internal control weaknesses, recommendations for improvements, and management's corrective action plans. Monitoring management's implementation of corrective action plans.
- Reviewing, with the organization's counsel, any legal matter that could

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have a significant impact on the organization's financial statements.

- Reporting to the Council at least annually and providing the Council with the annual external audit report.

Corporate Compliance specific responsibilities include:

- Overseeing the corporate compliance program, including policies and practices designed to ensure the organization's compliance with all applicable legal, regulatory, and ethical requirements.
- Recommending approval of the annual corporate compliance plan and reviewing processes and procedures for reporting concerns by employees, physicians, vendors, and others.
- Recommending organizational integrity guidelines and a Code of Conduct.
- Reviewing and reassessing the guidelines and Code of Conduct at least annually.
- Reviewing resources for corporate compliance with the corporate compliance officer and CEO to ensure that sufficient resources are provided.
- Reviewing and evaluating findings and recommendations from completed compliance activities and audits, including management responses and action plans.
- Reporting to the Council at least annually on the corporate compliance program.

Meetings

The committee meets quarterly and when necessary at the call of the committee chairperson. Meeting dates and times should be specified a year in advance.

Members

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The committee consists of a minimum of three Council members, one which is the Treasurer and shall serve as the Chairperson; the remaining two with backgrounds in finance, accounting, business, investment management, executive leadership, and business ownership; the CEO, Chief Medical Officer, Chief Dental Officer, Director of Operations, Corporate Compliance Officer, and Billing Supervisor.

D. Quality Improvement Committee

Overall Roles and Responsibilities

The Quality Committee assists the Governing Council in overseeing and ensuring the quality of clinical care, patient safety, and customer service provided throughout the organization.

The committee also assists the Council in maintaining a constructive relationship with the medical staff and approving and overseeing medical policies and professional staff appointments, reappointments, and clinical privileges.

Responsibilities

The responsibilities of the Quality Committee include:

- Reviewing and recommending a multi-year Strategic Quality Plan with long term and annual improvement targets.
- Reviewing and recommending quality/safety-related policies and standards.
- Reviewing and recommending risk management related policies and standards.
- Approving and monitoring a dashboard of key performance indicators compared to organizational goals and industry benchmarks. Report in summary fashion to the full Council.
- Reviewing sentinel events and root cause analyses; if appropriate, recommend corrective action.
- Monitoring summary reports of hospital and medical staff quality and patient safety activities.
- Reviewing management's corrective plans with regard to negative variances and serious errors.

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- Overseeing compliance with quality- and safety-related accreditation standards.
- Making recommendations to the board on all matters related to the quality of care, patient safety, customer service, and organizational culture.
- Reviewing and making recommendations to the board for approval of medically-related policies developed by the committee or by a medical staff committee.

Medically related policy matters may include criteria for medical staff membership and privileges, exclusive contracting for professional medical services, on call coverage, board certification, investment in ventures that compete with the Community Health Center, and matters related to professional conduct.

- Overseeing the effectiveness of the medical staff credentialing process.
- Reviewing and acting on medical staff recommendations to apply for medical staff appointments, reappointments, and clinical privileges.
- Making a recommendation to Governing Council to approve appointments, reappointments, and clinical privileges that fully meet the Center and hospital's criteria, with no issues or major questions.
- Making recommendations to the Council with regard to all other credentialing applications.
- Returning a recommendation to the medical staff for further documentation or reconsideration in accordance with policies.
- Reviewing medical staff recommendations and recommending to the Council disciplinary or corrective actions involving medical staff members, as provided in the policies.
- Overseeing and supporting education and development for providers.
- Monitoring physician perceptions and satisfaction and overseeing provider relations activities.
- Serving as a forum for education and discussion of health center/hospital-medical staff relationships and concerns.

Meetings

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The committee meets, at a minimum, quarterly or when necessary at the call of the committee chair. Meeting dates and times should be specified a year in advance.

Members

The committee consists of three Council members; Chief Executive Officer, Chief Medical Officer, Chief Dental Officer, Director of Operations, Quality/Risk Management Program Coordinator, and, optionally, other management team members.

E. Additional Committees

The Council may establish whatever additional committees it deems necessary to carry out the purpose and objectives of the Center or to deliberate on the business and responsibilities of the Council.

1. Any member may suggest the creation of a committee or task force when it appears necessary and such committee or task force may be established upon majority approval of the board.
2. Standing committees shall be defined as on-going committees and task forces shall be defined as time-limited committees with designated purposes.

ARTICLE XI – RESPONSIBILITIES OF THE GOVERNING COUNCIL

A. PERSONNEL POLICIES AND PROCEDURES

The Governing Council provides leadership and guidance in support of the health center’s mission. However, day-to-day direction and management responsibility for the health center must rest with staff under the direction of the Chief Executive Officer (CEO), in alignment with the Will County Health Department’s personnel policies and procedures as established by the Board of Health.

B. SELECTION OF CHIEF EXECUTIVE OFFICER

In conformance with Health Department Personnel Policies, the Council shall approve the selection and dismissal of the Chief Executive Officer of the Health Center.

C. DISMISSAL AND DISCIPLINE OF CHIEF EXECUTIVE OFFICER

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In the event that either the Will County Health Department Board of Health or the Governing Council receives information that could result in the discipline and/or dismissal of the CEO, the Coordinating Committee (with representatives of both Boards) shall be called to review and, if necessary and appropriate, investigate or cause to be investigated any allegations of misfeasance, impropriety, incompetence, criminality, or other misconduct that might warrant discipline or dismissal. The Coordinating Committee shall turn their findings and recommendation over to the Executive Director of the Will County Health Department. The Executive Director shall bring the information forward to the Governing Council with a recommendation on appropriate disciplinary action if necessary. The Governing Council shall consider the matter and either accept or reject the Executive Director's recommendation or return it for further findings. However, any credible evidence of criminal behavior shall be turned over to the Will County State's Attorney.

The CEO shall be subject to discipline for any action which is incompatible with his/her duties as described by the bylaws or cause damage or violates any duties or responsibilities to the Community Health Center, Will County Health Department, or the County of Will including those obligations and prohibitions found in the Employee Handbook & Work Rules Manual and all other rules developed by the Health Department and County of Will.

D. EVALUATE CENTER PROJECT ACTIVITIES

The Council shall evaluate service utilization patterns, productivity (efficiency and effectiveness), patient satisfaction, and achievement of project objectives, and shall develop a process for hearing and resolving patient grievances.

E. COMPLIANCE WITH LAWS

The Council shall assure that the Center is operated in compliance with applicable Federal, State and local laws and regulations.

F. HEALTH CARE POLICIES

The Council shall at a minimum approve policies which include scope and availability of services, service site locations and hours of services, and quality of care audit procedures.

The Council shall adopt, evaluate at least once every three years, and as needed, approve updates to policies in the following areas: Sliding Fee Discount Program, Quality Improvement/ Assurance, and Billing and Collections. (Policies related to billing and collections that require board approval include those that address the waiving or reducing

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of amounts owed by patients due to inability to pay, and if applicable those that limit or deny services due to refusal to pay.)

The co-applicant Board of Health shall have the authority for adopting policies for financial management practices and a system to ensure accountability for center resources, including periodically reviewing the financial status of the health center and the results of the annual audit to ensure appropriate follow-up actions are taken.

As described in the Co-Applicant Agreement, the Board of Health shall establish and maintain general personnel policies for the health center, including those addressing selection and dismissal procedures, salary and benefit scales, employee grievance procedures, and equal opportunity practices.

G. APPROVAL OF APPLICATIONS, BUDGET, AND OTHER ITEMS

In addition to the duties listed herein, the Governing Council shall be responsible for considering the following items:

- Applications for Health Center Program projects, including decisions to subaward or contract for a substantial portion of the services;
- Grants and grant designations and applications;
- All health center services the location of services, and hours of operation at health center sites.
- The annual budget and audit for the Health Center. (The Board of Health shall ensure appropriate follow-up actions are taken);
- Adoption of policies for eligibility for services including criteria for partial payment schedules;
- Approval of all Health Center agreements and contracts.

H. LONG-TERM AND STRATEGIC PLANNING

The Governing Council shall be responsible for the long term and strategic planning of the Community Health Center. As such, the Governing Council shall set bench marks and specific goals, including those proscribed by law and regulations, for the Community Health Center. These goals shall be updated as needed to reflect the current situation of the Community Health Center. The long-range planning shall include but not be limited to identifying health center priorities and adopting a three-year plan for financial management and capital expenditures.

Additionally, the Governing Council shall be responsible for monitoring the Community Health Center's progress in meeting its annual and long-term goals.

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ARTICLE XII – AMENDMENTS/REVISIONS

These Bylaws may be amended or revised at a regular meeting of the Council by a two-thirds vote. Amendments or revisions to these Bylaws shall have the approval of the Will County Board of Health.

ARTICLE XIII – AUTHORITY

The Parliamentary Authority of the Council shall be the current edition of Robert's Rules of Order, Newly Revised.

ARTICLE XIV – CONFLICT OF INTEREST

Conflict of interest or the appearance of conflict of interest by Council members, employees, consultants and those who provide services or furnish goods to the Center is prohibited. No Council member may be an employee of the Center or spouse or child, parent, brother or sister by blood or marriage of such an employee. The Chief Executive Officer may be a non-voting, ex-officio member of the Council, and as such shall be bound by this article.

- A. Conflict of Interest: A conflict of interest shall be considered to arise when any matter under consideration by the Governing Council involves the potential for a significant or material benefit; or a compensation arrangement exists to a Council Member or any member of his or her immediate family to any business, financial, or professional organization of which the Council Member or any member of his or her immediate family is an officer, director, member, owner, or employee. No member of the Council shall use his or her position to influence any decision or action in any matter in which he or she has any economic interest distinguishable from that of the public generally.
- B. Gifts: No member of the Council shall accept any gift based upon any understanding, either explicit or implicit, that a judgment or decision will be influenced.
- C. Advice or Assistance: No member of the Council shall solicit or accept any gift in return for advice or assistance on any matter concerning the operation or business of the Center.
- D. Use of County Owned Property: No member of the Council shall engage in or permit unauthorized use of County owned property.

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- E. Use or Disclosure of Confidential Information: No member of the Council shall disclose confidential information or use confidential information gained in the course of his or her position for financial gain.
- F. Interest in Center Business: Council members will refrain from recommending products or services supplied by any vendor which is owned or operated by a family member, or in which they have an economic interest. Should such vendors be considered by the Council, members should disclose any familial or economic interest, and refrain from voting on related subjects.
- G. Nepotism: No member of the Council shall hire or advocate for hire in any county agency, any person who is a relative as defined as spouse, partner, parent, child, brother, sister, aunt uncle, niece, nephew, grandparent, grandchild, solely because of that relationship.
- H. Compensation: Members shall serve without compensation, except that expenses actually incurred by reason of participation in Governing Council activities, e.g. travel expenses, meals, and incidentals as outlined in the Will County Business/Travel Reimbursement Regulations and within limits of available funds.

The Health Center will not compensate members of the Governing Council for services rendered in the ordinary course of service as members of the Governing Council.

- I. Resolution of alleged conflicts of interest: Whenever any matter comes before the Governing Council which any Council member recognizes may give rise to a conflict of interest, the Governing Council shall not approve any action or transaction bearing upon the conflict unless the following are observed:
 - a. The affected Council Member shall have a duty to disclose or other member shall make known the conflict. Should the matter be brought to a vote of the Members, the affected Member shall not cast a vote;
 - b. The Governing Council shall not go forward with a transaction or arrangement, in which an affected Council member acknowledges that a conflict of interest exists, or other Members determine that a conflict of interest exists, unless it is determined that no other alternative transaction or arrangement is available and not going forward with the transaction or arrangement would impede the Center's ability to carry out its mission.
 - c. If the Governing Council determines that the Member has in fact failed to disclose an actual or possible conflict of interest, it may take disciplinary and corrective action, up to and including termination of Governing Council membership.

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ARTICLE XV—DISSOLUTION

If at some point it is determined that the purposes of the Will County Community Health Center are no longer needed, are not being provided for, or for any other reason the entity may be voluntarily dissolved.

- A. Voluntary dissolution may not occur until:
 - a. All debts of the Will County Community Health Center have been paid; and
 - b. Written notice has been delivered to all members, indicating that a vote will be taken on the matter. Said notice must be delivered no less than 3 business days before the taking of any vote.
- B. Upon the satisfaction of the conditions found in subsection A., a vote may be taken on the subject of voluntary dissolution. Upon an affirmative vote of the majority of all members, the Will County Community Health Center will enter the process of dissolution.
- C. If a vote for dissolution passes, the Will County Community Health Center shall cause the distribution of all assets of the corporation as provided in 805 ILCS 105/112.16, or any successor statute.
- D. Plan of Distribution: Upon completing the requisite distributions as found in 805 ILCS 105/112.16, a plan of distribution shall be adopted to distribute the remaining assets of the corporation, if any exist. Such plan shall be adopted by a vote of the majority of all members. Such plan shall provide that distribution shall only be to a registered 501(c)(3) under the Internal Revenue Code, whose primary function is the provision of medical services, or another unit of State, federal, or local government.
- E. Articles of Dissolution: Upon completion of the foregoing, the Secretary shall cause the Articles of Dissolution to be filed with the Secretary of State, in the same manner as other filings are made pursuant to applicable law. The Articles shall contain all information required by State law and shall be signed by all necessary parties. Additionally, the Secretary shall cause all other documents regarding dissolution and transfer of assets required by State or federal law to be filed.

Adopted by the Community Health Center Governing Council, March 1, 2006; Approved by the Will County Board of Health, March 15, 2006
Adopted by the Community Health Center Governing Council, April 4, 2012; Approved by the Will County Board of Health, April 18, 2012
Adopted by the Community Health Center Governing Council, May 2, 2012; Approved by the Will County Board of Health, May 16, 2012
Adopted by the Community Health Center Governing Council, June 6, 2012; Approved by the Will County Board of Health, June 20, 2012
Adopted by the Community Health Center Governing Council, May 1, 2013; Approved by the Will County Board of Health, May 15, 2013
Adopted by the Community Health Center Governing Council, May 6, 2015; Approved by the Will County Board of Health, May 20, 2015
Adopted by the Community Health Center Governing Council, August 5, 2015; Approved by the Will County Board of Health, August 19, 2015
Adopted by the Community Health Center Governing Council, May 4, 2016; Approved by the Will County Board of Health, June 15, 2016
Adopted by the Community Health Center Governing Council, July 5, 2017; Approved by the Will County Board of Health, August 16, 2017
Adopted by the Community Health Center Governing Council July 5, 2018; Approved by the Will County Board of Health, August 15, 2018
Adopted by the Community Health Center Governing Council January 9, 2019; Approved by the Will County Board of Health, February 29, 2019
Adopted by the Community Health Center Governing Council October 2, 2019; Approved by the Will County Board of Health, October 16, 2019
Adopted by the Community Health Center Governing Council January 6, 2021; Approved by the Will County Board of Health, January 20, 2021

ADOPTED:

Ms. Marie Lindsey, Governing Council Chairperson
Will County Community Health Center

Ms. Cynthia Brassea, Governing Council Vice-Chairperson
Will County Community Health Center

Date

ATTEST:

Ms. Deborah Komacker, Governing Council Secretary
Will County Community Health Center

Date

James Zelko
Board of Health Chairperson

Date

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WILL COUNTY VACCINE MEDIA PLAN

FOURCE

3.28.2021

OVERVIEW

MESSAGE

- Register/Schedule Vaccine
- Vaccines are Safe
- Vaccines Save Lives

LENGTH

- Launch April 1, 2021
- End July 31, 2021

MARKET

- Will County
 - Gen Pop (18+)
 - Audience #1 – 55+
 - Audience #2 – 35-54
 - Audience #3 – 18-34
 - African American Zip Codes
 - Audience #1 – 55+
 - Audience #2 – 35-54
 - Audience #3 – 18-34
 - Latinx Zip Codes
 - Audience #1 – 55+
 - Audience #2 – 35-54
 - Audience #3 – 18-34
 - Rural Zip Codes
 - Audience #1 – 55+
 - Audience #2 – 35-54
 - Audience #3 – 18-34

MEDIUM

- Digital Display
 - Websites
 - Mobile Apps
- Social Media (Facebook/Instagram)
 - Image, Video & Carousel
 - Video
- Rich Media
 - YouTube
 - Connected TV
- Spot Cable
 - Comcast
- Direct
 - 55+ (African Americans, Latinx, Rural)
- Radio
- Local Print

WILL COUNTY I VACCINE CAMPAIGNS

3.24.21

CAMPAIGNS:

BELIEVE IN THE VACCINE

GEN POP 65+

AFRICAN AMERICAN 65+

LATINX 65+

RURAL (MONEE & WILMINGTON) 65+

BELIEVE IN THE VACCINE

GEN POP 18 - 54

AFRICAN AMERICAN 18 - 54

LATINX 18 - 54

RURAL (MONEE & WILMINGTON) 18 - 54

SCHEDULE NOW (When move to next phase)

GEN POP 18+

AFRICAN AMERICAN 18+

LATINX 18+

RURAL (MONEE & WILMINGTON) +

MOBILE CLINICS (WHEN ANNOUNCED)

Location A

Location B

Location C

JULY

JUNE

MAY

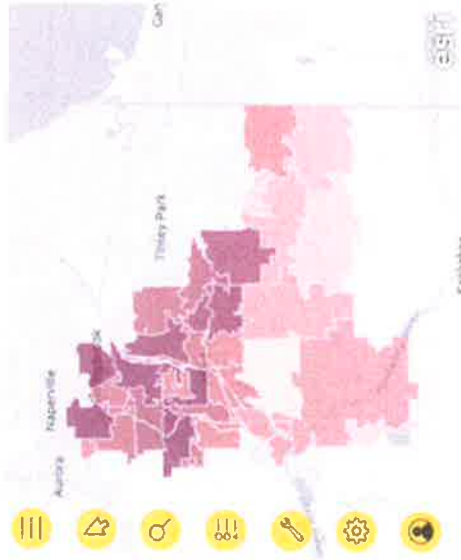
APRIL

THE MEDIA PLAN – SOCIAL | DISPLAY

OVERALL

22,950,000 TOTAL IMPRESSIONS
 \$355,180 TOTAL COST

ZIPCode and Population



Display

IMPRESSIONS

6.75M

CTR

.15 %

CPC

\$3.12

SPEND

\$84,374



MOBILE APPS

IMPRESSIONS

9M

CTR

1.6%

CPC

\$3.12

SPEND

\$89,118



Facebook

IMPRESSIONS

4.5M

CTR

.7 %

CPC

\$3.12

SPEND

\$105,000



Instagram

IMPRESSIONS

2.7KM

CTR

.15 %

CPC

\$6.5

SPEND

\$76,688

THE MEDIA PLAN – RICH MEDIA

IMPRESSIONS	CTR	SPEND
9.6M	.15 %	\$72,788
	CPC	
	\$3.12	

IMPRESSIONS	CTR	SPEND
1.1M	1.6%	\$61,000
	CPC	
	\$3.12	



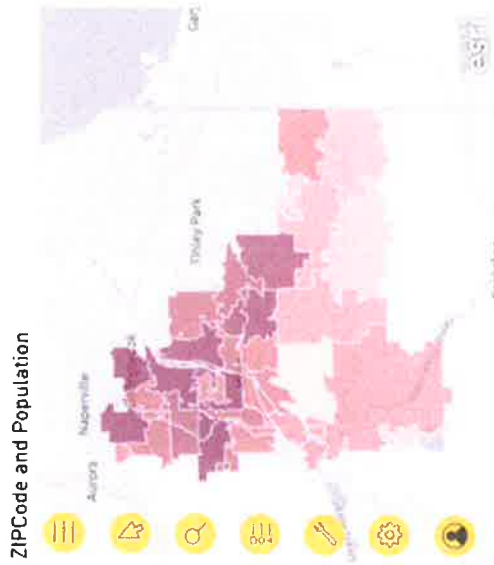
YouTube



CONNECTED TV

OVERALL

10,700,000 TOTAL IMPRESSIONS
 \$133,788 TOTAL COST



THE MEDIA PLAN – SPOT CABLE



NETWORKS

LIFESTYLE:



NEWS:



REACH W 25-54: 91.9% A 25-64: 94.4%	FREQUENCY W 25-54: 9.3 A 25-64: 9.6	TOTAL SPEND \$89,500
ZONES COMCAST	FLIGHT APR/MAY/JUN/JULY 2021	
Will County		

THE MEDIA PLAN – Local Print

Will County Gazette

SPEND

\$40,000

STRATEGY

Flighting papers to have presence and conserve costs. 1/2 Page and Front Page Super

The HERALD-NEWS

FREE PRESS NEWSPAPERS

THE MEDIA PLAN – Local Radio

SPEND

\$32,000

STRATEGY

Flight around News Programming Morning Drive and Afternoon Drive



THE MEDIA PLAN – DIRECT MAIL

SPEND

\$118,000

STRATEGY

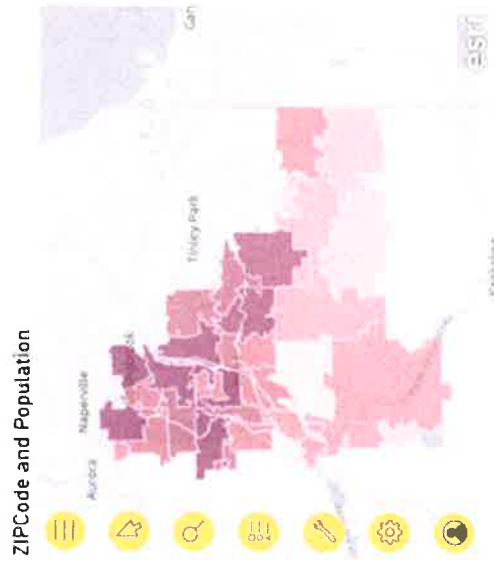
Target 55+ individuals
African American Zip Codes
Latinx Zip Codes
Gen Pop Zip Codes

REACH

85,500 Households

FREQUENCY

2 Times
• April 2021
• May 2021



WILL COUNTY VACCINE MEDIA	APRIL	MAY	JUNE	JULY	TOTAL
3.24.21					
MEDIA:					
ONLINE DIGITAL DISPLAY	\$ 25,312.00	\$ 25,312.00	\$ 25,312.00	\$ 8,438.00	\$ 84,374.00
ONLINE DIGITAL MOBILE	\$ 24,786.00	\$ 24,786.00	\$ 24,786.00	\$ 14,760.00	\$ 89,118.00
SOCIAL ADVERTISING FACEBOOK	\$ 30,000.00	\$ 30,000.00	\$ 30,000.00	\$ 15,000.00	\$ 105,000.00
SOCIAL ADVERTISING INSTAGRAM	\$ 22,750.00	\$ 22,750.00	\$ 22,750.00	\$ 8,438.00	\$ 76,688.00
RICH MEDIA YOUTUBE	\$ 21,450.00	\$ 21,450.00	\$ 21,450.00	\$ 8,438.00	\$ 72,788.00
RICH MEDIA CONNECTED TV	\$ 17,500.00	\$ 17,500.00	\$ 17,500.00	\$ 8,500.00	\$ 61,000.00
SPOT CABLE	\$ 25,000.00	\$ 25,000.00	\$ 25,000.00	\$ 14,500.00	\$ 89,500.00
RADIO	\$ 8,000.00	\$ 8,000.00	\$ 8,000.00	\$ 8,000.00	\$ 32,000.00
DIRECT MAIL	\$ 59,000.00	\$ 59,000.00	\$ -	\$ -	\$ 118,000.00
LOCAL PRINT	\$ 10,000.00	\$ 10,000.00	\$ 10,000.00	\$ 10,000.00	\$ 40,000.00
TOTAL	\$243,798.00	\$243,798.00	\$184,798.00	\$96,074.00	\$768,468.00

EMPLOYEES

	<u>DATE</u>
<u>NEW</u>	
Alyssa Densberger FHS Nutrition Specialist	March 22, 2021
Crystal Panepinto ADM Mass Vaccination Assistant	March 22, 2021
Hannel Lewis CHC Certified Medical Assistant	April 5, 2021
Michelle Budzinski CHC Health Care Liaison	April 19, 2021
*Diana Khattab, RN CHC-BH Staff Nurse III	April 19, 2021
Philip Jass CHC Quality Improvement, Risk Mgmt. Coordinator	April 26, 2021
<u>CHANGE(S)</u>	
Tracy Vera, MD CHC OB/Gyn	August 31, 2020 (contract was never signed)
<u>PROMOTION(s)</u>	
Daniel Hamilton FHS Community Health Educator II (from CHE I)	March 15, 2021
Stacey Morris Jones FHS Outreach Specialist II (from Medical Secretary)	April 5, 2021
Ann Conrad CHC EHR Trainer Supervisor (from Patient Registration Supervisor)	April 19, 2021
<u>RENEWAL(s)</u>	
Balin Durr, MD CHC Psychiatrist	July 31, 2021 – March 21, 2024

RESIGNATION(s)

Gian Villagomez
CHC
COVID Tester
March 12, 2021

Jessica Hale
CHC
COVID Tester
April 5, 2021

RETIREMENT(s)

Toni Martynus
BH
Reimbursement Specialist
April 2, 2021

TEMPORARY

James Smith
ADM
Vaccination Site Coordinator
March 22, 2021

Mary Spata
ADM
Vaccination Site Coordinator
March 30, 2021

*Taylor Hogg
EH
Summer Intern
May 17, 2021

TERMINATION(s)

Amber Patrick
CHC
Certified Medical Assistant
April 5, 2021

*Cynthia Griggs
EH
File Clerk (Temp.)
April 13, 2021

DRAFT

Approved:

James E. Zelko, President, Board of Health

Date

Recommended:

Susan Olenek, Executive Director, WCHD

Date