



The McLean County Board of Health
Wednesday, May 13, 2020, 5:30 p.m.
200 W. Front Street, Room 324, Bloomington, Illinois.

MINUTES

1. Call to Order

2. Roll Call

Present: Alan Ginzburg, Carla Pohl, Cory Tello, Hannah Eisner, Robert Khohlhase, Scott Hume, Sonja Reece, Susan Schafer

Staff: Jessica McKnight, Cathy Coverston Anderson, Kim Anderson, Tom Anderson, Tammy Brooks, Amy Brooke, Amy Hancock

3. Public Participation

NOTE CHANGE: To promote health and safety, we encourage the public to follow the Gubernatorial 'shelter in place' Executive Order. Therefore, in addition to standard (in-person) public comments at the McLean County Board of Health meetings, we will accept public comment via email as an option for this meeting.

Individuals or groups can email statements to the Administrative Support Specialist at health@mcleancountyil.gov by Tuesday May 12, 2020 at 5:30 pm.

Statements received by the deadline will be read aloud as part of the record, pursuant to the time parameters in McLean County Board of Health Bylaws (individuals, three minutes; groups, five minutes). The entirety of the statement will be placed in the official minutes, even if the statement reads longer than the time limit allows.

We take very seriously the Centers for Disease Control and Prevention (CDC) recommendations to socially distance and the Governor's Executive Order 202010, wherein no more than ten people can convene in one place. We encourage you to submit your public comment via email.

If you choose to provide comment in person, requests must be received by McLean County Health Department by Monday, May 11, 2020 at 5:30 pm to health@mcleancountyil.gov. Upon submission, you will receive written instructions regarding how to enter the Government Center (which is now closed to the public). McLean County Board of Health rules allow for a total maximum of 15 minutes allotted during each meeting. Public comment and the emailed comments will proceed in the order in which they are received.

Finally, the public will be able to view the McLean County Board Meeting, live, on Facebook and YouTube. Links can be found at <https://www.mcleancountyil.gov/>

4. Approve Minutes: April 8, 2020

Motion by Reece/Tello to approve the April 8, 2020 minutes as presented.
Motion carried.

5. Consent Agenda

A. Bills to be Paid

		April 2020
Dental Sealant	0102	\$15,389.28
WIC	0103	\$1,036.73
Preventive Health Program	0105	\$0.00
Family Case Management	0106	\$8,397.23
AIDS/COMM Disease Control	0107	\$1,393.35
Health Department	0112	\$42,909.84
Total		\$69,126.43

Motion by Kohlhasse/Reece to approve consent agenda.
Motion carried.

6. Committee Reports

A. Behavioral Health Coordinating Council (BHCC)

Sonja Reece (SR) reported that the Behavioral Health Coordinating Council has not met since the last Board of Health Meeting. Their next meeting is in June.

B. Mental Health Advisory Board (MHAB)

Cory Tello reported that the MHAB was scheduled to meet on April 24. Technological logistics and costs prevented them from meeting. Members were contacted individually regarding the request for proposal submissions for Chestnut Health Systems/Normal Community High School and the Center for Human Services/Bloomington High School Embedded School Project (ESP) proposals. They are planning to have their next meeting remotely.

C. County Board

Susan Schafer (SS) reported that the Behavioral Health position was approved by the Health Committee and by the Finance Committee.

D. Behavioral Health Policy and Funding Committee (BHPF)

Hannah Eisner reported that the BHPF met via ZOOM on the May 14, 2020. They made recommendations for the ESP that begins August 1, 2020. The group also worked on identifying

funding priorities and looked at the psychiatric service grants.

Trisha Malott reported on the FUSE and Triage initiatives.

The next meeting will be combined with the MHAB and will meet remotely.
Meeting was interrupted by audio difficulties.

The meeting was stopped so that the system could reboot. The public was alerted to these difficulties on Facebook and YouTube.

Meeting resumed at 5:45. Carla Pohl (CP) recapped the first part of the meeting.

7. Health Department Administrator's Report

Jessica McKnight (JM) reported that the County has had 127 confirmed cases of COVID-19. She asked if there were any questions about the packet.

Robert Kohlhase (RK) complimented the written report. He stated that he appreciated the HIPAA discussion at the last meeting as was reflected in the minutes.

RK asked about investigation of complaints and enforcement. Is enforcement the role of the Health Department?

RK expressed concern that the Office of Attorney General was asking Health Departments to assist in compliance investigations. Is that our role? What does that mean?

Tom Anderson (TA) stated there was a question from local health departments across the state regarding these investigations. Originally there were four agencies listed as enforcement in the Executive Order: Department of Public Health; State Police; Illinois Department of Financial and Professional Regulation; and the Illinois Gaming Commission. The Department of Public Health was initially the sole enforcer, but they communicated to the State that they did not have the resources to be the sole enforcer. Contractually, they were able to delegate that role to local health departments. This is the reason they feel that local health departments have the authority act on the Executive Order.

RK asked how frequently our Health Department has gone out to investigate. He noted that there were 60 complaints/concerns listed in the report. Did we go out on all of those?

TA stated that most complaints have come about restaurants. TA stated that education is always the first approach. Initially, a complaint is received. A sanitarian discusses with a food establishment how they are operating and educates if there are issues. Generally, they get good cooperation at this level. One owner/operator requested a visit after initially responding to the concern. The owner/operator wanted more suggestions.

TA shared that they have, in the past, had some businesses say, "What are you going to do?" If they don't want to abide by the instructions, a letter is sent and copied to the Office of Attorney General (OAG). At that point, Environmental Health lets the OAG handle it.

SS asked if there is the possibility of accounting for each ethnicity that is tested.

JM shared that we are getting a mix of regular and antibody testing. She will check into the feasibility of presenting that information and of presenting ethnicity data.

HE voiced a concern that the Health Department is not doing routine inspections right now. She raised the concern because people are operating in various manners (curbside). Are there provisions for staff in restaurants wearing masks, gloves, etc.? She does not want our staff to be put at risk but also doesn't want restaurants operating without oversight. She also asked what the expenditures related to COVID-19 have been.

JM stated that fiscally, the end of the first quarter looked good. We will know more later.

TA shared that we are looking at indicators of entering the third phase of the Restore Illinois Plan. They are not only concerned about staff safety but also about public safety. Staff could unknowingly carry the virus in.

TA stated that COVID-19 cannot be transmitted through food or food packaging. Daily operations in the establishments protect them from passing it on through a food source. The Executive Order only requires masks if social distancing cannot be maintained. If someone in the establishment became ill, they would go through a sanitation process.

As they begin to do more routine inspections, they will try to schedule inspections when establishments are not as busy. This will allow the owners/operators to concentrate on their operations. This will probably start happening during phase 3. If they wait until phase 4, owner/operators might be overwhelmed even with introducing a limited occupancy.

Members discussed contact tracing. The Health Department has been able to keep up with contact tracing in a timely fashion. There are six staff who had been doing contact tracing before COVID-19. Six additional staff have been identified to begin training. Additionally, IDPH is working on a program that would make additional tracers available on a regional level.

SR raised the issue of meat processing. She mentioned concerns with the meat processing plant in Champaign.

TA shared that the processing plant in Champaign is large. McLean County has three small processors that have been continuing to operate with the needed protection.

8. Informational Items

A. Cares Act Provider Relief Funds –

The Health Department received an automatic deposit. It was then discovered that it was not intended for our operations and was returned.

B. Peoria Heart of Illinois Proposal (HOI)

Members discussed the Peoria Heart of Illinois proposal. Peoria Health Department Administrator, Monica Henderson, drafted a proposal that breaks the Restore Illinois north central region into subregions. JM has a call with the other Health Department administrators tomorrow. The main questions for our department concerns data collection and enforcement.

In the Restore Illinois Plan, the data is compiled at a state level. In HOI, compiling data would fall to local health departments.

Both plans call for the ability to do contact tracing. HOI states that a Community Based Testing Site would be within so many miles.

Member discussed that dividing into subregions would cut Rockford out of the equation. However, if Rockford were to be deluged, our hospital capacity could be impacted. This would impact our hospital metrics. However, this could happen from any other area as well.

HE asked if the Board of Health was being asked to decide.

JM stated that the decision would be the County as a whole. The County would be one of the entities submitting HOI to IDPH and the governor. Is the Board of Health okay with HOI being submitted up the chain?

SS shared that it was discussed at the Executive Committee. She advised them that she wanted the BOH to weigh in on it. SS raised concerns about the ability to contact trace in a surge and the amount of authority being placed on the Health Department. Does the Health Department have the authority to determine if businesses need to be changed or closed? Do we have the capacity to take that on?

JM shared that we are already following up on complaints regarding businesses. If we cannot get voluntary compliance, it is sent to the State's Attorney and the Office of Attorney General.

Members discussed the local testing site being moved. This is another major concern.

HE raised a concern about things being run differently from county to county. She suggested that uniformity would be better.

The Health Department has been in contact with County Administration. SS shared that the County Chair wants to see a consensus reached. He is planning to contact all members to see how they feel about HOI.

The Mayor of Peoria said that even if the governor didn't approve, Peoria would be moving forward with HOI. If we are part of this group, what are the legal and liability issues? What is the impact to funding?

CT asked who will put forth those questions? How will we make sure the right questions are asked and answered?

JM stated that her questions are public health related. County Board questions are about the county at a larger level. What happens if the governor says no and they move forward? What happens to the rest of the region?

Members agreed that it is important for the Board of Health to weigh in. The Board of Health sets public health policy.

SR agreed that the Board of Health charge is to look at health issues. We are not oblivious to families, jobs etc. Our unique role is to deal with health and the implications surrounding health.

Jessica Woods (JW) was asked if there were legal questions that needed to be asked.

JW said that it is a tricky situation. No one can say what the repercussions of going rogue would be. The legal need for enforcement adds another layer of liability. She would need to investigate it more.

Members discussed the importance of knowing what others think but agreed that it was more important to know what they, as the Board of Health, think.

Members recognized that it is a strange time. Everyone is tired of being cooped up. Businesses are suffering. However, this needs logical and thoughtful analysis.

What happens if the Board of Health says no and the City of Bloomington says yes? What are the legalities?

SS stated that it is unknown if it would be an item on the County Board agenda next week. She stated that Mayor Renner has said that they will go with Peoria. If town and city decide for HOI, but we don't believe in the plan, where does that leave us.

Discussion moved to testing. Sentinel sites throughout the US collect data for the CDC. The CDC has started collecting data on COVID like illnesses without people being tested.

Allan Ginzburg (AG) shared that every positive test is reported to the Health Department. He shared that he has begun ordering some antibody testing and it is being done to some degree at both hospitals.

AG stated that every inpatient at Advocate will be tested for COVID-19. Advocate sends these tests to a lab in Chicago and have they results in 24 hours. Advocate is still determining who will get the rapid test.

AG has a pulmonary office. One procedure involves blowing into a machine as hard and fast as you can. That will open back up. However, anyone having that test will have a COVID-19 test beforehand.

We are not at a point where everyone can get tested no matter what. There is a need to know prevalence of asymptomatic carriers. Any decision made will be made on less than ideal data.

AG stated that he is a proponent of slow and careful. Each move needs to be assessed for a couple of weeks.

SR shared two questions. First, why do these 14 counties want to pull away from the rest of the group? Is it because the statistics in the north are more dire? Second, is the way we would measure different than the way we would measure if we were part of the larger group? What is the difference between the metrics?

JM stated that most of the metrics are similar but there are some that are different. Also, the amount of time spent in the phases differs. Some items are in one plan and not the other. Are the plans different or is it simply geography?

RK proposed that the conversation be closed. It would be helpful to do a side by side comparison of the plans.

Members discussed the need for another meeting if the Board of Health is going to contribute.

JM stated that some are going their own way but the only approved plan by the State or IDPH is Restore Illinois.

Members decided to have an additional meeting and ask that the County Board not to act until the Board of Health has had the opportunity to weigh in. JM will prepare a document comparing the different plans.

9. Action Items

A. Approval of [Contract for COVID-19 Crisis Response](#)

Motion by Ginzburg/Reece to approve the Contract for COVID-19 Crisis Response.
Motion carried.

B. Approval of Interagency Agreement for Genetics Program

Motion by Kohlhase/Schafer to approve the Interagency Agreement for the Genetics Program.
Motion carried.

C. Approval of Contracts for Dr. Sydlowski and Dental Hygienists

Motion by Hume/Tello to approve the contracts for Dr. Sydlowski and Dental Hygienists.
Motion carried.

D. Approval of \$20,000 for the Center for Human Services and Bloomington High School Embedded School Project.

Motion by Schafer/Reece for approval of \$20,000 for the Center for Human Services and the Bloomington Embedded School Project.

HE shared that both sets of applicants were capable. However, the decision to recommend this

projected was since Normal Community High School already has an embedded counselor. Bloomington was perceived to have a higher need.

10. Adjournment

Motion by Schafer/Reece to adjourn.

Motion carried.