



The McLean County Board of Health
Wednesday, September 11, 2019, 5:30 p.m.
200 W. Front Street, Room 324, Bloomington, Illinois.

Minutes

1. **Call to Order** 5:40

2. **Roll Call**

Members Present: Ms. Judy Buchanan, Ms. Carla Pohl, Ms. Cory Tello, Ms. Hannah Eisner, Dr. Richard Ginnetti, Mr. Robert Kohlhase, Ms. Rose Stadel, Dr. Scott Hume, Ms. Sonja Reece, Ms. Susan Schafer

Members Absent: Dr. Alan Ginzburg

Guests: Mr. Dan Deneen, Ms. Laurie Wollrab, Ms. Adena Meyers, Ph.D.

Staff Present: Ms. Tammy Brooks, Ms. Kim Anderson, Mr. Tom Anderson, Ms. Cathy Dreyer, Ms. Amy Brooke, Ms. Amy Hancock, Mr. Trevor Sierra, Mr. Dion McNeal

Judy Buchanan (JB) asked Richard Ginnetti (RG) to introduce himself. Dr. Ginnetti is the newest Board of Health member. He is a longtime community member. He works for OSF in family medicine.

3. **Public Participation:** None

4. **Presentation agenda item moved to later in the meeting.**

5. **Approve Minutes:** August 14, 2019

Motion by Reece/Kohlhase to approve the August 14, 2019 minutes as presented.
Motion carried.

6. **Consent Agenda**

A. Bills to be Paid

| | | August 2019 |
|----------------|------|-------------|
| Dental Sealant | 0102 | \$18,702.71 |

| | | |
|---------------------------|------|--------------|
| WIC | 0103 | \$1,758.07 |
| Preventive Health Program | 0105 | \$142.30 |
| Family Case Management | 0106 | \$4,537.67 |
| AIDS/COMM Disease Control | 0107 | 2,559.82 |
| Health Department | 0112 | \$154,699.09 |
| Total | | \$182,399.66 |

Motion by Tello/Hume to approve the bills to be paid as presented.
Motion carried.

7. Committee Reports

A. Ad Hoc Funding Committee

Nothing to be presented.

B. Behavioral Health Coordinating Council

Sonja Reece (SR) stated that the next BHCC meeting is on Friday.

C. Mental Health Advisory Board

Cory Tello (CT) reported that the MHAB last met on August 23, 2019. There were reports from Ms. Trisha Malott and Ms. Amy Hancock.

CT reported that there was some discussion about the Embedded Schools Project and sustainability.

CT shared that they reviewed the application process for 553 funding. On Oct. 2nd, different groups will be meeting to review the applications.

CT reminded members about the Behavioral Health Forum to be held October 17 from 8-4.

D. County Board

Susan Schafer (SS) reported that there were no action items at the Health Committee meeting. She reported that Ms. Tammy Brooks gave a good update on all of the items the Health Department is working on. The next Health Committee meeting is on Sept. 30th. The County Board will receive the full budget on Sept. 17th. The Health Department's budget meeting will be on either Sept 30 or Nov. 4

8. Health Department Administrator's Report

Tammy Brooks (TB) directed members to her memo in the packet along with the

Division Directors' reports, Behavioral Health Program Activity Summary, Behavioral Health Program Agency Reports, and the Embedded School Pilot Program Summary. A copy of the strategic plan was available if anyone wanted it.

TB noted that as an example of the HD's work on better business practices, a flu clinic schedule was included.

TB stated that Facilities is preparing the ground on the south side of the building for the sod.

SS shared that the elevator contract was approved at County Board Property and Executive committees. It will go to the full Board on Tuesday. She anticipates that work on the new elevators will begin relatively quickly.

TB introduced Dion McNeal, Communication Specialist. She asked him to speak on the Vaping plan.

Dion McNeal (DM) shared the first step in the plan is talking with local high schools and universities regarding those who report vaping. They are working on developing a plan to address those concerns. In Illinois there have been 42 reported cases of pulmonary respiratory illness related to vaping/e-cigarettes. The age range for those cases is 17-39.

DM has spoken with Kari Jones, Health Promotions Manager and she is putting together presentations about vaping. She is attempting to set up prevention/intervention programs at Bloomington Junior High School.

DM will be meeting with WGLT tomorrow to discuss what the County is doing to address the vaping issue. A media release will also go out along with Facebook and Twitter posts.

Sonia Reece (SR) asked that anyone on social media share the posts so that a wider audience is reached.

RG suggested that the County look at the Wisconsin experience with vaping.

TB shared that the Health Promotion Supervisor is looking at our websites to make sure that our information is accurate.

The floor was opened for members to ask questions of Division Managers.

JB asked Mr. Anderson if it is too early to predict if we have enough resources to meet the needs of the new FDA requirements.

Tom Anderson (TA) shared that they have been tracking the length of inspections

and are seeing a difference of 6-18 minutes per inspection. Lake County is being used as the pilot site by the Department of Health. They are seeing the same results. At the end of the year, he will present the totals and assess the cumulative result of 6-18 minutes per inspection over a year's time.

CT asked how owners and operators are feeling about the new system.

TA shared that they haven't received much feedback on that. The ones experiencing more issues are those establishments involved with special processes (fermentation, smoking, reduced oxygen packaging).

SS shared that a constituent asked her about the inability to prepare food at the Farmer's Market.

TA stated that full meals cannot be prepared and served out of a tent because it is not a controlled environment. It is a state regulation. Temporary or mobile food permits could be issued for food trucks. Farmer's markets are not considered temporary food vendors. That is state and federal code.

4. Presentation by Adena Meyers, PhD inserted here.

A. Program Evaluation – Embedded School and Community Based Pilot Project (ESC)

Adena Meyers (AM) presented the following information. Summary report is contained in the packet section for this agenda: [September 11, 2019](#).

ESC is an on-going three-year program that began in 2017. It has grown from serving 116 clients in two districts to serving more than 300 children in eleven school and four districts in 2019.

The evaluation was retrospective and limited in time and scope to 2.25 years. Applications, quarterly and annual reports, financial documents and other applicable documents were reviewed. AM also examined data in the Electronic Reporting System, school data, and spoke with community stakeholders, including administrators at one of the agencies.

Objectives:

To what extent is the ESC pilot project increasing access to care?

Schools and students increased use of the embedded counselor over the life of the project. A total of 365 unduplicated clients were seen. Typically, use of the embedded counselor increased in the second year that the counselor was present in the school.

The three top diagnoses included depression (23.3%), adjustment disorders (22.2%), and ADHD (18.1%).

The project has helped clients overcome financial, cultural, psychological, geographical/logistical barriers to care. It serves students and families in a variety of settings.

To what extent is the ESC pilot project helping to improve children's functioning?

AM was limited in being able to answer this as the project lacked a comparison group.

However, Agency 2 did report function scores as measured by the Ohio Scales Assessment. In Year one, 64% of clients improved or maintained their level of functioning as assessed by the Ohio Scales. In year two, 77.8% improved or maintained their level of functioning.

Agency 2 reported that dropping out and lack of follow through were more common in the first year than the second year. However, this is difficult to assess as only two schools had the program for more than a year.

To what extent is the ESC pilot project contributing to coordination between behavioral health providers and schools?

Schools reported initial growing pains that improved with communication and coordination over time.

Four areas of success were noted:

- School staff facilitated service delivery by acting as liaisons and making referrals.
- ESC counselors supported and consulted with school professionals and were able to free them up to work with children with IEPs.
- The ESC counselors were able to respond to crises as they arose.
- ESC counselors served students that did not qualify for services through a traditional IEP.

To what extent is the ESC pilot project identifying appropriate assessments and service delivery options.

Clients in the program received a wide range of services: individual, family, community support, crisis intervention, case management, and consultation with other professionals. Most services were coded as individual therapy.

To what extent has the ESC pilot succeeded in developing an electronic

outcome reporting system?

The original intent was to develop an electronic outcome reporting system that would allow online referrals and reduce duplication of data entry. The electronic referral system was not realized. However, it has resulted in a database that is able to manage records of each billable service unit provided by ESC counselors. It includes the following information: demographics, insurance coverage, diagnosis, school, grade, discharge reason, referral source, primary reason for referral, primary care physician, service type, location of service, clinician, and functioning.

AM noted that it is helpful to have all this information in one place. AM suggested that it needs to be determined:

- How they want to use the system
- How to support agencies in recording all the data deemed important
- Consider additional fields

These would require planning and additional resources.

To what extent has the ESC pilot project demonstrated cost effectiveness?

Funding of the project increased from year one to two when additional program sites were added but decreased significantly in year three while the number of schools again increased. Agencies have been able to sustain and increase services. A detailed account of billing is beyond the scope of this report. Agencies appear to be sustaining services through insurance and Medicaid billing.

Recommendations:

- Continue funding these services and work to expand the services
- Ask schools to partner with schools in applying for future funding so that the role of each school and its staff can be addressed before beginning
- Collaborate with all the participating entities in developing the electronic data system.
- Encourage provider consistency at the schools as possible and have that person there multiple days a week.
- Provider consistency – person there multiple days a week
- Allocate a percentage of funding to the evaluation process.
- Collect school outcome data on all students receiving services.
- Identify a comparison group.
- Work with agencies to select outcome measures that their clinicians are comfortable using.

RG asked the number of kids that were receiving services as part of the project and elsewhere.

AM stated that she didn't have a specific number on that.

RG noted that High Deductible Plans are impacting people's decisions in terms of receiving needed services.

JB asked AM to talk about billing through Medicaid.

AM noted that both agencies serve schools under other umbrellas as well as ESC. Ideally, there would be an accounting of the amount of money received through this setting in comparison to other settings. Is cost a factor in a family's decision to seek services?

Laurie Wollrab (LW) asked about why students dropped out.

AM acknowledged that there is always a certain amount of dropping out in dealing with mental health. It is difficult to talk about some things. She noted that the dropout rate declined in the second year. She said that this might be due to comfort with the counselor and receiving mental health services.

CT complimented the work that AM did. She noted that this helps to provide a blue print for when new schools implement the program.

AM noted that school personnel sited the need for having someone at agencies they could talk to. Getting those meetings set up at an ongoing time was helpful.

AM shared that she did receive data from the schools that she analyzed. It would be nice if the data points could communicate with each other.

Scott Hume (SH) asked for clarification about counseling and Individualized Education Plans (IEP).

AM and CT clarified that an IEP is set up to meet a student's needs when it is impacting their functioning in school. The services must be provided by a specifically credentialed provider. An IEP will state that a student literally must be seen a specific number of minutes a month. Not every student qualifies for an IEP. ESC counselors saw students not seen by other school professionals.:

Hannah Eisner (HE) noted that ESC had a positive impact. Is it sustainable? Did the schools feel it was worth doing?

AM noted that both Administrators expressed anxiety that finances will go away. The barriers to taking the program on varied by district (money, qualified people/social workers). The program was valued and viewed as important.

AM noted that one day a week in a school was not viewed as adequate. Benefits were seen when an ESC was seen at the school more frequently and became part of the school.

CT noted that the MHAB has discussed the importance of assisting districts in figuring out other funding streams. Each district has a different challenge.

Robert Kohlhasse (RK) complimented the report. He acknowledged that we don't know the full cost of the program. The money the being provided is meant to be seed money.

JB: We didn't build in an evaluation at the time. She has done a very good job of pulling together what is out there.

8. Presentation concluded. Resumed Administrator's Report

Amy Hancock (AH) reported that Trevor Sierra (TS) suggested that the selection committees voted on at the last BOH meeting would need to follow open meetings act and include minutes and agendas. Also, the BOH bylaws do not permit participation by phone. One member may not be able to participate because of this. They may need rearrange the committees

TS explained his rationale. Because each selection committee was voted on it became a new public body. Each one has three members. A quorum would be two.

Discussion centered around the logistics of reforming the committees, complying with Open Meetings Act, guidelines of closed sessions and phone attendance, and possible revision of bylaws.

BOH concluded that they need a legal recommendation that considers the already published RFP process and guidelines.

JB asked that TS draw up a proposal, investigate the best way to meet the current deadlines and comply with bylaws, FOIA, and Open Meetings Act.

9. Items for Action:

A. Approve HIV Prevention Grant for FY'20

Motion by Tello/Gennetti for approval of the HIV Prevention Grant for FY'20.
Motion carried.

B. Authorize Board President to sign FY'20 Comprehensive Health Protection Grant renewal and contracts as approved by legal department.

Motion by Schafer/Stadel to authorize the Board President to sign the FY'20 Comprehensive Health Protection Grant renewal contacts as approved by the legal department.
Motion carried.

10. Other

JB congratulated Sonja Reece on formation of an LLC and her move to doing private consulting work.

11. Adjournment

Motion by Reece/Stadel to adjourn.

Motion carried.

Adjourned at 7:03 PM.