



SPECIAL CALLED TAZEWELL COUNTY BOARD MEETING

James Carius Community Room
Saturday, June 04, 2022 – 8:30 a.m.

David Zimmerman - Chairman of the Board
Michael Harris - Vice Chairman of the Board

- A. Roll Call
- B. Invocation and Pledge of Allegiance
- C. Communications from members of the public and county employees
- D. Communications from elected and appointed county officials
- E. Discussion: plans for the downtown campus and ARPA priorities
- F. Recess to June 29, 2022



May 31, 2022

Chairman Zimmerman-

The Board of Health has been monitoring the ARPA Committee and Property Committee discussions. Our Board is pleased that the Health Department services and contributions are being recognized and considered for prioritization of the ARPA funds.

Recently, we have been considering our new Community Health Assessment data. This data calls to light several points of importance to consider. The loss of the Dental program has come forward as a gap in access to services. This point is of significance and was pulled out of the Tri-County Assessment as a key concern. Another point identified is the need for continuing support of nutrition in our community. Tazewell Counties rate of overweight/obesity is 64.8%. Fruit and vegetable consumption is at a low mark of 60% eating only 1-2 servings of the recommended 5 per day. Our WIC program is a key support of young families and an evidence-based program teaching young families proper nutrition and providing supports. Both concerns, dental and WIC would be more accessible to the community in Pekin. The Tremont campus creates a barrier to serving those most in need because of the cost for, time and distance to travel to the facility

In looking at the areas of poverty in our community, Pekin area would be a better fit for accessibility. The addition of bus services would help clients from East Peoria and all along Route 29 to access our programs. Currently, there is no bus service to Tremont. In fact, with fewer taxi companies we find ride share drivers agreeing to bring clients to the health department, but they leave and may not return for pick up. This leaves families waiting for someone who can pick them up or arranging for another driver.

Our experience with COVID and the use of a facility in Pekin provided the community tremendous access to our services. There were many comments about glad that you are "in town".

To give a look at numbers of clients we are anticipating serving- TCHD Dental was providing over 14,000 services to 5216 patients per year on average prior to the pandemic.

WIC has an active caseload with benefits of 905 with a potential of at least 385 additional clients that could be receiving benefits. Clinic Services provided an average of 7,615 services to our community looking at the past three year and subtracting COVID immunizations.

The Board of Health is willing to discuss with the County Board our readiness, service potential and vision of services at any time. Please feel free to reach out to me by email or my cell 309-635-5621

Thank you for your consideration.

Sincerely

Bobbi Mullis, President

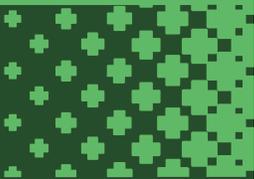


Proposal for ARPA
Tazewell County Health Department



Original 5/25/21
Modified 6/6/21

Update
5/31/22





USES OF ARPA FUNDING

Recipients may use Coronavirus State and Local Fiscal Recovery Funds to:

Support public health expenditures, by funding COVID-19 mitigation efforts, medical expenses, behavioral healthcare, and certain public health and safety staff.

Address negative economic impacts caused by the public health emergency, including economic harms to workers, households, small businesses, impacted industries, and the public sector.

Replace lost public sector revenue, using this funding to provide government services to the extent of the reduction in revenue experienced due to the pandemic

Provide premium pay for essential workers, offering additional support to those who have borne and will bear the greatest health risks because of their service in critical infrastructure sectors; and,

Invest in water, sewer, and broadband infrastructure, making necessary investments to improve access to clean drinking water, support vital wastewater and stormwater infrastructure, and to expand access to broadband internet.

Reference: <https://home.treasury.gov/system/files/136/SLFRP-Fact-Sheet-FINAL1-508A.pdf>

Request for Assistance

Tazewell County Health Department is providing this document as a request for dollars to assist with public health needs as a result of COVID and needs that have been identified through community health assessment, strategic planning, and national research into COVID recovery, which have been impacted by COVID.

Part 1 Service Improvement – This section outlines a request for assistance to reinstate dental services and move current WIC and clinic services into the population center of the county to better serve our citizens.

Part 2 Community Health Improvement –This section outlines specific needs identified to assist our citizens with health issues of concern as identified in our Community Health Assessment and Strategic Plan.

Each part has a specific ask identified that will help us to impact change.



1. Service Improvement

- **Dental Services-** Dental Services for those who are uninsured or who use a state sponsored insurance is very difficult to obtain. The pandemic hit at a time in the Tazewell County Health Departments Dental program history where service provision being uncertain, and the historic financial loss of the dental division combined and led to the decision to close the dental center in May of 2020. Since the time of the closure, several agencies and boards have reached back to TCHD to reconsider the closure because of lack of available care. The Board of Health has discussed and would like to see the service reopened. A permanent location that has less overhead is the only potential solution to financial concerns that would make bringing the dental center back feasible.

On our recent, fall of 2021 Community Health Status Assessment, Dental Services in Tazewell County was identified as now as a service gap. We believe this is from the loss of the TCHD Dental Center in 2020.

The reopening of TCHD Dental Center could not occur in the current clinic space in the Tremont Campus Buildings.

TCHD Dental was providing over 14,000 services to 5216 patients per year on average prior to the pandemic. These patients are not able to access traditional dentists as most will not accept public insurance or payment plans.

- **Need to bring services closer to the target population/ center-** A building that is more accessible and closer to the population center is needed. The current TCHD location in Tremont is not ideal for anyone with gaps in transportation and limits their ability to seek services for themselves and their families.

A building in the population center that meets the space requirements and is accessible to public transportation would make clinical services more accessible to the community than is possible at our Tremont location.

WIC has an active caseload with benefits for 905 families with a potential of at least 385 additional clients that could be receiving benefits.

Clinic Services provided an average of 7,615 services to our community looking at the past three year and subtracting COVID immunizations.

A location in the population center would enable both WIC and Clinic Services to expand for our vulnerable populations and be more accessible for many families to access immunizations and nutrition support.

Dental services could be co-located out of this address with Clinic Services and WIC.



Asking for:

Purchase of space in Pekin that would house Clinic services, WIC, and Dental programs

Remodel of the property to be up to current codes and service needs

Located close to a bus stop

Adequate parking for a surge in services

Unknown Cost at this time.

Directors of Birth to 5 and Clinic Services provide their top reasons for these services to move to Pekin:

WIC (Women, Infants, and Children) services:

Transportation. In the last WIC participant survey for Tazewell County, 23% of the clients surveyed indicated that transportation is a barrier to keeping appointments. Currently there is no public transportation available to TCHD. Being within the city of Pekin with the availability of public transportation could reduce this barrier to services.

Birth Outcomes. TCHD was awarded the Better Birth Outcomes (BBO) grant due to a high number of poor birth outcomes in the cities of Pekin and Washington. Being in proximity to these pregnant women to provide services will increase their access to our services, providing education and resources to help insure a positive birth outcome. The following information is from an article in the Journal of the American Medical Association (JAMA) titled Association of Special Supplemental Nutrition Program for Women, Infants and Children (WIC) with Preterm Birth and Infant Mortality:

Three central findings emerged from this national cohort study of prenatal WIC participation. First, the proportion of low-income expectant mothers (i.e., covered by Medicaid) who also received WIC benefits decreased substantially over time. Second, receipt of WIC benefits during pregnancy was associated with reduced odds of preterm birth and infant mortality. Third, the magnitude of these associations was approximately equal among low-income non-Hispanic black, Hispanic, and non-Hispanic white women.

These findings are consistent with those of a large body of research that found participation in the WIC program was associated with improved birth outcomes.^{5,25-28} This study adds to the existing literature by providing a contemporary estimate of the associations between WIC and preterm birth and between WIC and infant mortality.

Participation in WIC may lower the likelihood of preterm birth and reduce gestational age-specific infant mortality through several possible biological mechanisms. First, the food supplementation enabled by WIC participation is associated with higher overall and protein-specific caloric intake, both of which are associated with improved fetal growth and increased birth weight.^{29,30} Second, WIC participation during pregnancy is associated with increased vitamin D intake, which may lower the risk of pregnancy-induced hypertension and preeclampsia (a major cause of fetal mortality).^{28,31} Similarly, WIC participation during pregnancy is associated with greater maternal iron intake, which may increase birth weight for gestational age.^{29,32} Third, the WIC program encourages breastfeeding by providing



guidance, counseling, and breast pumps.³³ Breastfeeding is associated with reduced risk of post neonatal death (death between 28 days and 1 year after birth).³⁴

This study reaches substantively different conclusions from those of several studies that found no or little association between WIC benefits and key birth outcomes. For example, Foster et al¹³ assessed the association between WIC participation and 6 birth outcomes (e.g., preterm birth) and found no significant implications of the WIC program. However, assessment of WIC participation was based on maternal recall; for some participants, pregnancy occurred years or decades before they were surveyed. The present study was based on maternal recall of WIC participation at the time of delivery and was likely subject to less recall bias. Joyce et al¹² noted that gestational age bias could have led to overestimated associations between WIC and birth outcomes. We accounted for gestational age bias and found reduced odds of infant mortality within each gestational age category.

Population. Currently, we have 553 active participants in the WIC program that reside in the 61554-zip code. We know that WIC currently has approximately a 55% coverage rate in Illinois, leaving many eligible families underserved. By reducing the transportation barrier to receive our services, along with increasing our visibility in the community, we hope to increase that coverage rate, resulting in healthier children and families, better birth outcomes and increasing food security.

Dental Services:

Access to dental care for Tazewell and Woodford County residents remains very difficult, and our pediatric population is especially impacted by the lack of providers that accept Medicaid insurance. In the school year 2021-2022, an independent in-school dental care provider assessed the oral health of 1,213 students in Tazewell County. A total of 38% (465) of the children assessed were found to have Oral Health Assessment (OHA) ratings of 2 or 3. A rating of 2 indicates the presence of decayed teeth that need either fillings or crowns. A rating of 3 indicates advanced dental disease including signs or symptoms of pain, infection, exposed nerves, or swollen/bleeding gums.

A focused report showing the OHA ratings of the children in Pekin School District 108 (Kindergarten through 8th grade) shows a total of 42% of children with an OHA rating of 2 or 3.

The in-school provider has historically been able to provide some basic services (fluoride treatment, dental sealants) during the assessment process; however, due to an elimination of grant funding for services, only exams will be provided in the next school year.

Clinic:

TCHD's Clinic Services are preventive care and early detection services. We provide cancer screenings, well-baby checks, vaccinations, bloodwork, TB testing and treatment, physical exams, STI testing and treatment, and women's health exams. These services prevent the onset of illness, as well as provide early detection of conditions.

The location of the Tremont clinic remains a barrier for many in the county. A downtown Pekin clinic location would enable TCHD to see community members who



rely on public transportation, as well as those in the nearby area who typically do not have access to preventive care services due to a lack of insurance, transportation, or essential resources. Relocation would allow us to not only provide current preventive care and early detection services to a vulnerable population, but to expand services as additional needs are recognized.

Dental and Clinic:

Better access to both Clinic and Dental services through relocation to the downtown Pekin area would potentially offset some of the burden of unnecessary Emergency Room visits, especially for STIs and dental emergencies. The location would also enable TCHD to provide STI testing and treatment to those previously served at the Pekin Planned Parenthood location (now closed).

Appendix A: Map of WIC eligible population. The area in pink depicts where the highest number of WIC eligible participants live. Pekin is the highest with 553 eligible. Public bus transportation would be an option for many that live within this densely populated area.

Appendix B: Families with income under \$50K per year could be eligible for WIC services depending on their household size. These graphs show that there could be a large number of families that are not currently being served by WIC that would be eligible.



2. Community Health Improvement

- **Mental Health-** This area will be one that needs additional support and work following the pandemic and is currently one of our community health priorities. Suicide, Poor Mental Health Days and Days of Frequent Mental Distress are Higher in Tazewell County in all areas than our state averages. The effects of the past year will likely increase these percentages in the wrong direction in even greater rates. Mental Health was chosen on 5.24.22 at the number one health need in the Tri County Community Health Needs Assessment

Asking for:

A planner/ health educator who could build opportunities for collaboration and alignment of work in our county among organizations and citizens. \$80,000/ per year for 4 years. Includes- Salary, benefits, and outreach dollars.

- **Surveillance-** An additional Data Analyst on staff who could work on surveillance projects, data management and reporting. As we have learned with COVID numbers and the ability to accurately calculate, display and explain in a timely fashion is critical in navigating an outbreak. Ongoing monitoring of emerging health issues and local data reporting have become expected of Local Health Departments

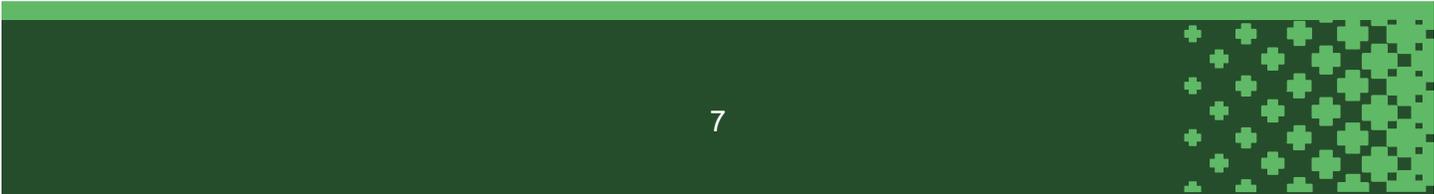
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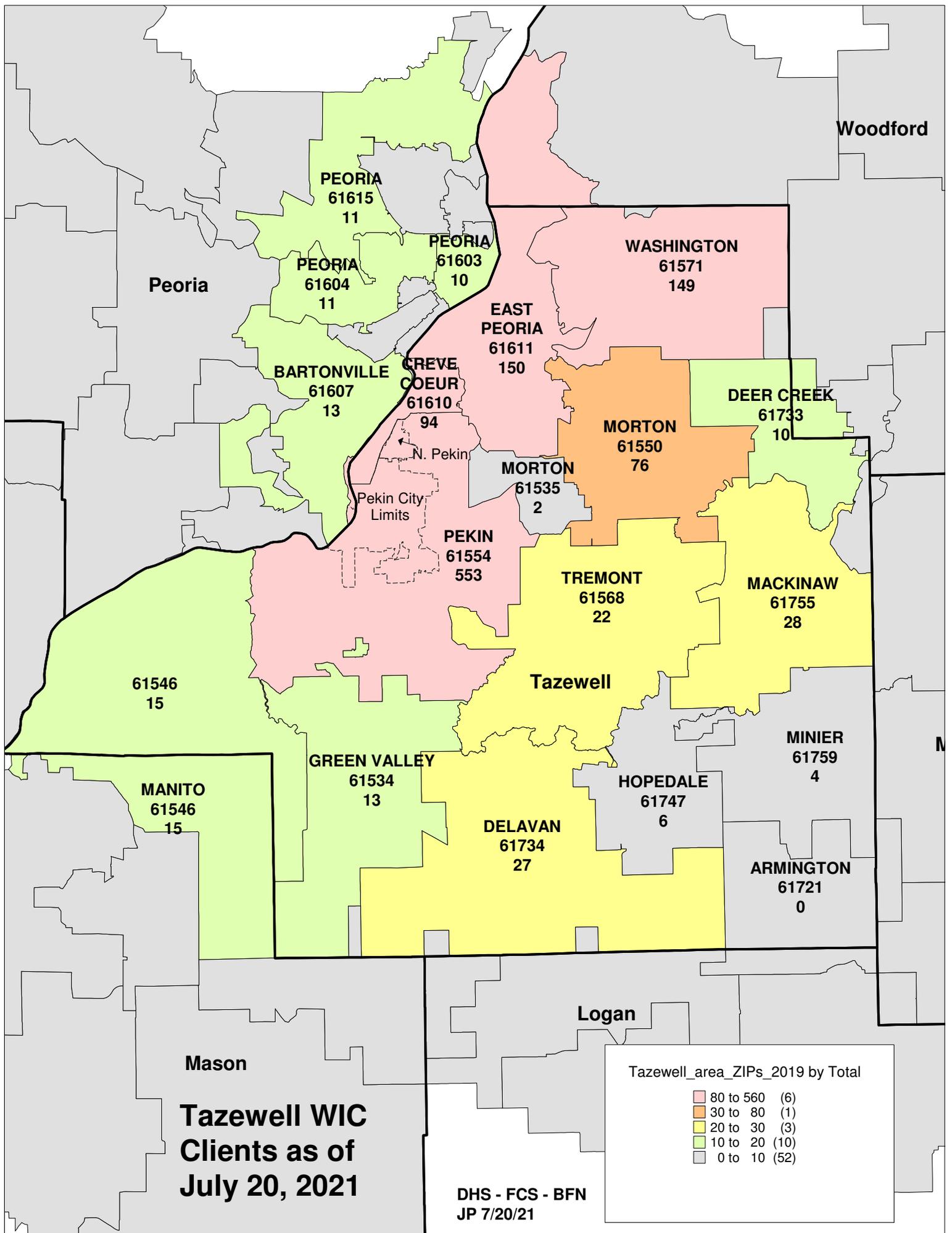
A Data Analyst with a background in data management, surveying, database, web content development and training. This position would be able to establish processes and protocols for ongoing data management, screening, surveying, and surveillance. Would work with Epidemiologist as a team. \$74,000 for 4 years. Includes Salary, benefits, and software costs.

- **Food Insecurity-** Food has been one of the most requested resources during the COVID event of families in distress. Tazewell County Health Department has been partnering to provide mobile pop-up pantries that can help to distribute food all around the county. Pop-up events occurred in Creve Coeur, Washington, Minier, Delavan and Pekin. The ability to get the food delivered from one the food banks cause an additional stress to their operations. Additionally, we have worked to build a Good Food Recovery program where local food drives and donor garden partners collect fresh produce for Food Pantries. Last year over 22,000 lbs. of produce was moved. This year's goal is 30,000 lbs. TCHD has been the mechanism for this delivery. Appendix C highlights this need.

Asking for:

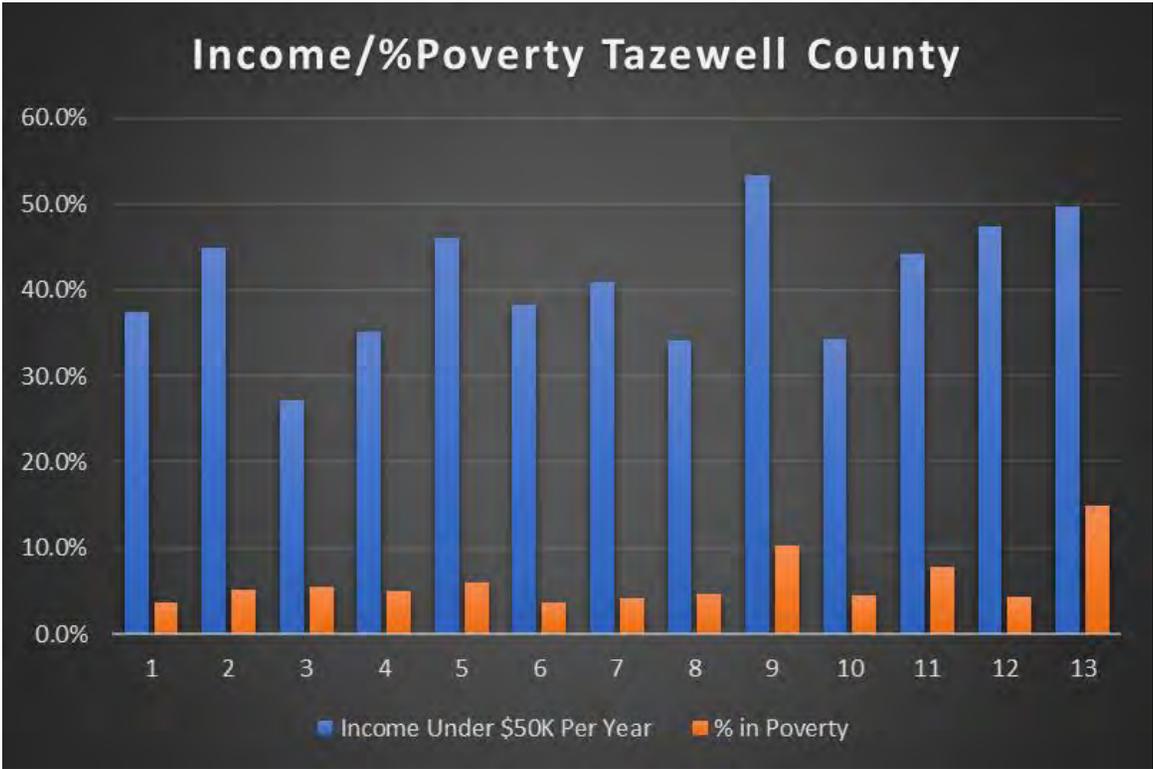
Dollars for a refrigerated van than can keep dairy, lean meat, and produce cold for transport and distribution. Cost estimate for a refrigerated van is \$35,000.





Area	Graph #	Zip Code	Income Under \$50K Per Year	% in Poverty
Green Valley	1	61534	37.4%	3.6%
Delavan	2	61734	44.9%	5.2%
Groveland	3	61535	27.2%	5.5%
Tremont	4	61568	35.10%	4.9%
Armington	5	61721	46.1%	6.0%
Washington	6	61571	38.3%	3.6%
Hopedale	7	61747	41.0%	4.1%
Morton	8	61550	34.2%	4.6%
Creve Coeur	9	61610	53.3%	10.3%
Mackinaw	10	61755	34.3%	4.4%
East Peoria	11	61611	44.3%	7.9%
Minier	12	61759	47.4%	4.3%
Pekin	13	61554	49.7%	14.9%

Income Under \$50K per year is included as depending on household size, they could be eligible for WIC services.



Data for % in Poverty for 61611, 61610, 61550, 61571, 61554
<https://www.census.gov>

Data for % in Poverty for ALL OTHER zip codes
<https://www.unitedstateszipcodes.org/>

Used the # for household income <\$25,000/population * 100 = % in poverty

2020 Food distribution:

