Kankakee County Health Department Regular Meeting March 11, 2021

Members Present: Mr. Rodney Gustafson, Mr. Antonio Carrico

Dr. Abraham Kurien, Mrs. Neelie Panozzo

Mr. Jim Johanek, Dr. Simon Wu, Dr. Syreeta Jones

Members Absent: Dr. Jeffrey Long, Dr. Olatunji Akintilo

Staff Present: Mr. John Bevis, Ms. Nicole Finnegan

Staff Absent: Mrs. Amy LaFine, Mr. Keith Wojnowski, Mrs. Erin Weakley

Others Present: Mr. Larry Kirkstra, County Board Member

The meeting was called to order by Dr. Wu at 5:03 P.M.

APPROVAL OF AGENDA

A motion to approve the March 11th, 2021 agenda was made by Mrs. Panozzo, seconded by Mr. Johanek, the motion passed unanimously.

PUBLIC COMMENT

None

APPROVAL OF MINUTES

A motion was made by Dr. Kurien to accept the February 11, 2021 Board of Health minutes, seconded by Mrs. Panozzo, the motion passed unanimously.

EMPLOYEE INFORMATION

Mr. Bevis announced that we have a new board member, Mr. Antonio Carrico. We would like to welcome him to the Kankakee County Board of Health and are excited to have him onboard.

Mr. Bevis also announced that we recently hired two new Health Educators to our Administration Department, Shelby Shivers and Julie Larsen. Julie was previously a Sanitarian and moved into the Health Educator position. With that being said, we now must fill Julie's Sanitarian position that we are actively interviewing for. We also hired a new Client Service Representative, Angelica Avalos, and currently have one contractual front door screener position open.

DIVISION REPORTS

Client Services

We are continuing to serve clients through our curbside pickup for WIC appointments. We are also still actively catching up on children's immunizations. We have also kept one day a week for STD clinic, so we are still able to continue to serve those needs in our county.

Environmental Health

Mr. Bevis indicated that guidance currently states that you can have up to 50 people or capacity for indoor dining and complaints have significantly decreased.

Administrator's Report

Mr. Bevis explained that we are continuing to actively vaccinate in our conference room, which has been going very well giving 350 vaccines per clinic. We have plans to expand and vaccinate 400-500 per day in the weeks ahead. With the addition of the clinic rooms and help from Amita nurses, we would like to get 500-800 vaccinated per clinic going forward. We are also partnering with Riverside so that they can host clinics at their site of up to 1500 doses per day.

Last month, our vaccine supply was very limited. We are being told that Johnson and Johnson will become available in April and that should help with increasing our supply. Our schools have been completed and our current vaccination rate in Kankakee County was at 2.6% last month and is now at 9.5% this week. We have a total of 25,446 people vaccinated, with 10,401 of those fully vaccinated. The state average is currently at 9% so we feel confident about our progress thus far. To date, we are at 12,273 COVID-19 cases, 177 deaths, and 3.6% positivity rate in our region, and 2.8% positivity rate in our county.

One important thing we wanted to share was that originally, we were told by IDPH that all vaccine would filter in from the State and would come directly to the Health Department. This was the reason we created the initial registration survey so that we could get prepared to administer the vaccine once it became available. Unbeknownst to us, the Federal program started supplying many local pharmacies with vaccine as well, which created some confusion amongst county residents. We did our best to send our registered list to our partner pharmacies, Jewel and Meijer, as well as host in house clinics at the Health Department. We also started to try and communicate with the community that we are not the only one who has vaccine, and their best option is to sign up for as many options as possible and once they are called by any of the participating locations currently vaccinating to go and get their vaccine. We did not intend to create confusion and tried our best to clarify what the situation was so that everyone could actively sign up and make the best effort in getting their vaccine appointment. There is a new website we were recently informed about called vaccinefinder.org and it is supposed to help pull up participating vaccination locations in your designated area. Along with continuing to vaccinate as many residents as possible, our goal is also to focus on the underserved populations who do not necessarily have access to the vaccine by educating them on the benefits and importance of vaccinating and making it possible for them to get vaccinated.

Financial Status

Mr. Bevis updated the Board on December 2020, January 2021, and February 2021 financials. For December 2020, we should be at 8.3% of the year. Revenues for the month were low, as most grant payments were moved back into November for FY20 except for the Local Health Protection grant, which is for December 2020 – June 2021. The property tax revenue line item is showing a negative because we were notified that the Treasurer's office still owes the Health Department a little over \$34,000 for the FY20 property taxes. We just received that check yesterday (3/10/21), so that will show on March's financials. Food licenses began trickling in during December for 2021. For the year, we are showing just \$139,962.60, or 3.14% of revenue, and again, just as a reminder, this is normal to see due to the shifting of the funds received in December for services performed November 2020 and prior, those funds were put back into November 2020. On the expense side for December, for personnel, it was a higher month due to 3 pay dates. Professional Development is showing higher for the month due to the renewal of several annual dues to organizations for 2021. For the year, we are at 7.39% for expenses, which is below the target of 8.3%, which still shows us as negative overall due to the low revenues for the month. For our cash on hand: we have \$1,019,694.73 in the IPTIP account, \$1,014,605.68 in the money market account, \$883,380.36 in the checking account, and there are \$57,345.49 in outstanding checks. Total Cash on Hand is \$2,860,335.28 for December 2020.

For January 2021, we should be at 16.6% of the year. Grant revenue for the month is showing zero as all payments received were moved back into FY2020 as it was in December as well. The negative \$167,556.59 you are seeing for the Covid Contact Tracing is the remainder of unspent funds we had as of 12/31/2020 from the original \$715,428 that they had sent us as an upfront payment. We are awaiting an answer from the Auditor on whether that should come back out of FY2020 instead of hitting FY2021. Most of the food licenses were received in January, along with some of the other annual fees such as Septic Installers, Solid Waste Haulers, and other EH annual fees. We also received the annual rent from 911 in January. For the year, we are showing just \$160,921.63, or 3.62% of revenue through January, and again, just as a reminder, this is normal to see due to the shifting of the funds received for services performed November 2020 and prior, those funds were put back into November 2020 and that payment back to the State for the unspent Contact Tracing funds. On the expense side for January, personnel was slightly higher than originally budgeted; again, carryover from December having 3 pay periods, and also due to our SUTA (unemployment) taxes being higher than budgeted. Bank charges were high for the month due to so many environmental health fees being paid for with credit cards. For the year, we are at 12.63% for expenses, which is still below the target of 16.6%, which still shows us as negative overall due to the low revenues for the month. For our cash on hand: we have \$1,019,768.67 in the IPTIP account, \$1,014,631.53 in the money market account, \$958,625.65 in the checking account, and there are \$48,196.94 in outstanding checks. Total Cash on Hand is \$2,944,828.91 for January 2021.

For February 2021, we should be at 25% of the year. Grant revenue has started to roll in for services performed in December 2020 and more recent. The remainder of the annual food licenses were received in February, along with quite a bit of Clinical Service dollars. For the year, we are showing just \$346,249.41, or 7.78% of revenue through February. On the expense side for February, personnel is slightly higher than originally budgeted but is catching up to where we should be. Bank charges were high for the month again due to so many environmental

health fees being paid for with credit cards. We also had to refill the postage machine, which is only done once or twice a year, so that line item jumped in February. For the year, we are at 17.85% for expenses, which is still below the target of 25%, but overall, we still are negative due to the low revenues thus far. For our cash on hand: we have \$1,019,828.59 in the IPTIP account, \$1,014,654.88 in the money market account, \$747,503.02 in the checking account, and there are \$50,702.95 in outstanding checks. Total Cash on Hand is \$2,731,283.54 for February 2021. Mr. Johanek made a motion to approve December 2020, January 2021, and February 2021 financials, seconded by Mr. Gustafson the motion passed unanimously.

OLD BUSINESS

Mr. Bevis announced that the Vaccination Grant has just been approved today, March 11th, 2021.

New Business

Mr. Bevis explained that we would like to make an amendment to our current Overtime Policy for salaried employees. The amendment will include the addition of the Mass Vaccination grant to allow for overtime, as well as the extension date of 12/31/21 for the current Contact Tracing grant. Mr. Gustafson made a motion to approve the amendment to the overtime policy for salaried employees to include the Mass Vaccination grant, as well as extend the Contacting Tracing grant overtime policy for both grants until 12/31/21. Mrs. Neelie Panozzo seconded the motion and it passed unanimously.

Mr. Bevis then announced that we also applied for the Women's Health Mini grant, this is a four-month grant, and it is expected that once they revise and reevaluate the current grant needs in relation to COVID that it will be sent out again. We have had this grant in the past and anticipate that it will stick around, however we feel that there are probably essential changes that need to be made.

Mr. Bevis also brought up our current public comment procedure, as well as our phone call meeting process in relation to the updated guidelines. He expressed that we are at a point in which we can go back to our normal meeting and public comment procedures with the Board's consent. The Board unanimously agreed that they would prefer to start meeting in person and continuing onsite meetings, with the intent that if someone cannot be present and would like to call in that we can accommodate that. Everyone agreed that meetings onsite will continue, phone meetings by request will also be accommodated, along with allowing the public onsite if we follow current capacity room guidelines.

EXECUTIVE SESSION

None

ADJOURNMENT

There being no further business before the Board, Mrs., Neelie Panozzo moved to adjourn, the motion was seconded by Mr. Johanek and passed unanimously.

Minutes respectfully submitted by,

Dr. Abraham Kurien, Secretary Minutes reviewed by, Mr. John J. Bevis, MPH, Public Health Administrator Minutes prepared by, Ms. Nicole Finnegan, Administrative Coordinator