

DeKalb County Health Department



Jane E. Lux, RN, MPH
Public Health Administrator
May 18, 2016

Thank you DeKalb County Board!

50 years of Public Health

The DeKalb County Health Department
was established by Resolution
February 9, 1966

- I. Public Health Tax Levy
- II. DeKalb County Health Department
- III. What is at Stake?
- IV. Financial Projection

I. Public Health Tax Levy

The DeKalb County Board of Health
recommends that the DeKalb County Board
place the question of a Public Health tax levy on
the ballot for November 2016

Why now?

The tax levy to retire the Health Facility Building bonds is set to expire during the 2016 fiscal year

The tax levy would continue,
but would pay for *services*

Therefore, the levy could be continued at the same level to keep the Health Department sustainable

The Health Department would continue
levy of \$650,000

- \$22.88 for a \$200,000 home

II. DeKalb County Health Department

What is Public Health?



- Reduce health disparities
- Address social determinants
- Improve health of the entire population

When Are You Most Likely To
Notice Public Health In Action?

When a Public Health Emergency Affects the Community

- Disease Outbreak
 - Foodborne, waterborne, people-to-people and vector-borne
- Natural Disasters and Severe Weather
- Bioterrorism
- Radiation and Chemical Emergencies



18,200

Programs at DeKalb County Health Department

- Maternal and Child Health
- Communicable Disease Control and Prevention & Immunizations
- Environmental Health
- Registrar for Vital Records
- Health Care Enrollment
- Animal Control
- Solid Waste
- Health Promotion
- Emergency Preparedness & Response
- Community Health Needs Assessment and Plan

Maternal and Child Health

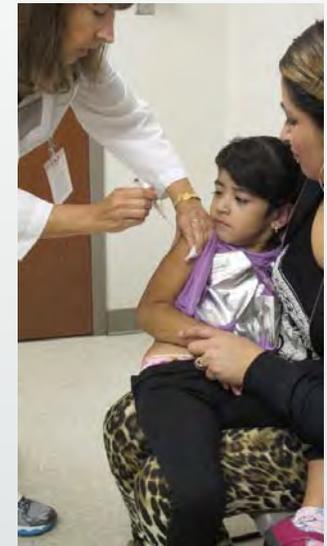
Reduces infant deaths and disease

Promotes child health

- Nutrition education and supplemental foods
- Promotion of growth and development
- Promotion and support of breastfeeding
- Health and developmental assessment
- Home visits to at-risk families
- Healthcare and social services facilitation
- Social support and advocacy
- Education and medical services to support optimal reproductive health and birth outcomes

Childhood Immunization Program

- Helps children stay healthy by protection from vaccine-preventable diseases
- Vaccines for Children (VFC) Program for uninsured and underinsured children and those enrolled in Medicaid



Vision and Hearing Screening Program

Screening of children to identify and refer those who are in need of intervention



Communicable Disease Control and Prevention

Investigations to prevent and control the spread of diseases

- Pertussis
- Mumps
- Influenza
- Ebola virus
- Zika virus



Tuberculosis Program

Medical services to identify, diagnose and treat individuals who have or were exposed to tuberculosis (TB)

HIV Case Management Program

Services to link individuals with healthcare and other resources and prevent transmission

Immunization and International Travel Consults

Examples of Adult Vaccines Administered

• Hep-A	• Typhoid
• MMR	• Yellow Fever
• Hep-B	• Influenza
• HPV	• Polio



Health Promotion Programs

Reality Illinois

- Prevent tobacco use among youth
- Empower young people to work with local governing bodies to adopt tobacco-free policies



Illinois Tobacco Free Communities (ITFC)

- Reduce tobacco use and exposure
- Media outreach to promote Illinois Quitline
- Policies to promote smoke-free places



Emergency Preparedness and Response

Improve county emergency response capacity

- Testing of emergency medication dispensing and other plans
- Coordinate emergency planning with countywide partners



Environmental Health and Health Protection

- Food Establishment Inspections
- Well and Septic Inspections
- Tanning and Body Art Inspections



Environmental Health and Health Protection

- Animal Control Program for stray dog and rabies control
- Solid Waste and Recycling Program to divert materials from the landfill to reduce environmental impacts



Healthcare Enrollment Assistance

Provides assistance with enrollment in Health Insurance

- Reduce the cost of healthcare
- Improve the quality of healthcare
- Improve the health of the population



III. What is at Stake?

DeKalb County Low Birthweight

- Low birthweight is a leading cause of infant death and disability
- Low birthweight, often caused by pre-term birth, can lead to
 - Lifetime health complications
 - Growth, learning and behavioral problems
 - Developmental delays
 - Intellectual disabilities
 - Loss of potential productivity
 - Medical, educational and social costs



- Low birthweight higher than both Illinois and USA for the first time
 - 2009: 6.4%
 - 2012: 8.8%
highest in at least 30 years

- Racial and ethnic disparities
 - The proportion of black and Hispanic low birth weight births tripled from 2009 to 2012

DeKalb County, Illinois, and U.S. Low Birth Weight Infants				
Year	DeKalb County Number	DeKalb County Percent	Illinois Percent	U.S. Percent
2012	105	8.8%	8.2%	8.0%
2009	84	6.4%	8.4%	8.2%

Source: Illinois Department of Public Health;
National Center for Health Statistics

*Low birthweight: weight less than 5lbs.8oz. (2500 grams)

DeKalb County, Illinois and U.S. Poverty

All Persons			
Year	DeKalb County	Illinois	U.S.
2008-2010	16.3%	13.8%	14.4%
2011-2013	20.1%	14.8%	15.9%

Children 0-17			
Year	DeKalb County	Illinois	U.S.
2008-2010	14.8%	19.4%	20.1%
2011-2013	23.7%	21.0%	22.4%

Source: U.S. Census Bureau: American Community Survey (ACS)

Concentrated Disadvantage

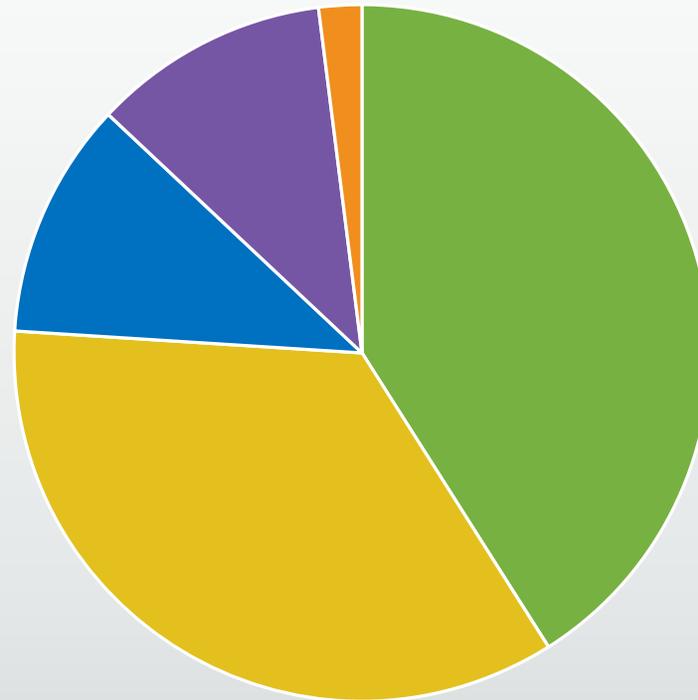
- Concentrated disadvantage is associated with a wide array of poor health outcomes including low birthweight and infant death rate
- Several measures of community economic viability and strength were combined to create the concentrated disadvantage indicator
- DeKalb County level of disadvantage, compared to the state average, was Medium-high

Maternal and Child Health is a priority in DeKalb County

- DeKalb County IPLAN (March 2013)
 - Maternal and Child Health is one of the top 4 priorities
- Community Health Needs Assessment Update by KishHealth System (2015)
 - Maternal and Child Health is one of the top 3 priorities

IV. Financial Projection

Revenue 2015



■ Grants 41% ■ Fees 34% ■ County GF 12% ■ Property Taxes 11% ■ Non-Operating 1%

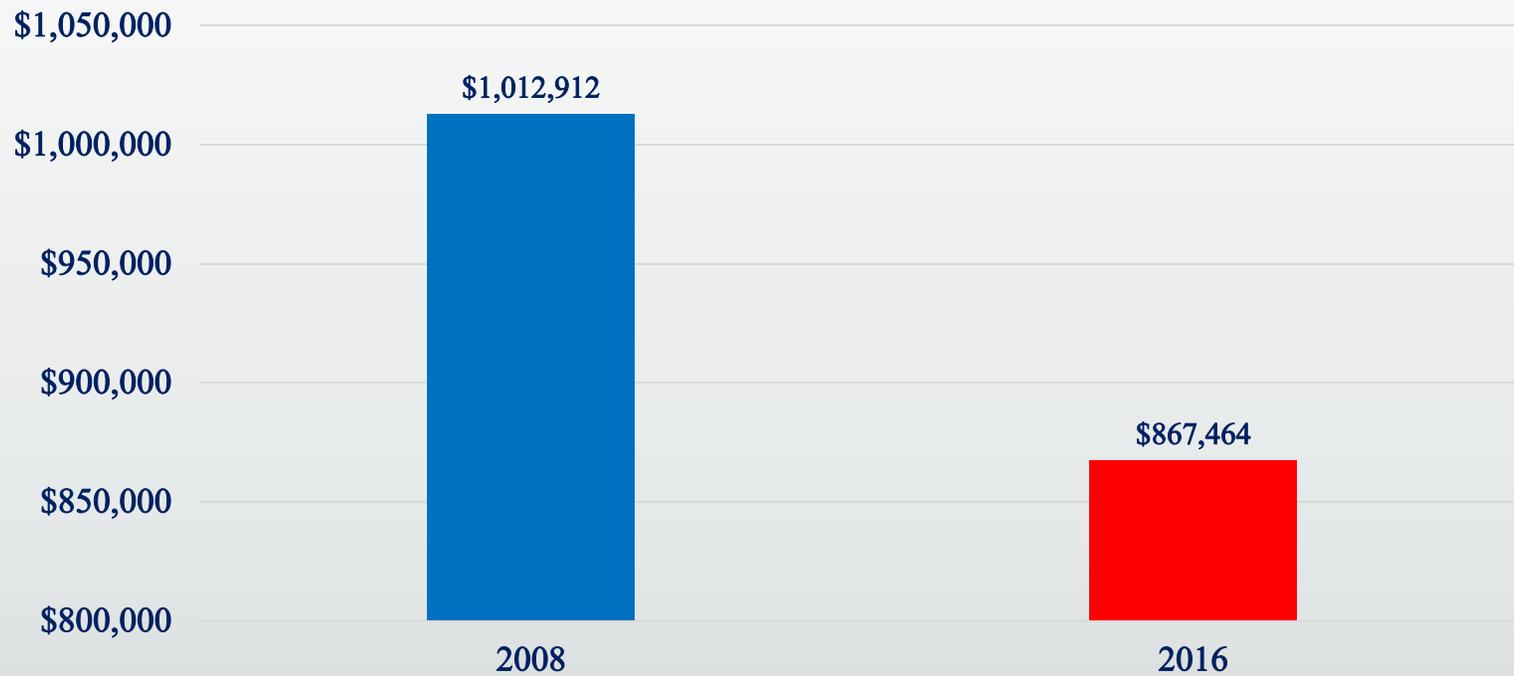
Major Source of Revenue 2008-2016



18 percent reduction

Maternal & Child Health Grants

2008-2016



14 percent reduction

We have undertaken steps to sustain the Health Department

- Reduction in workforce through layoff and attrition with reduction and elimination of services
- Restructure and consolidation of staffing
- Non-personnel cost containment measures
- New revenue sources

Workforce Reduction

2010 to Present

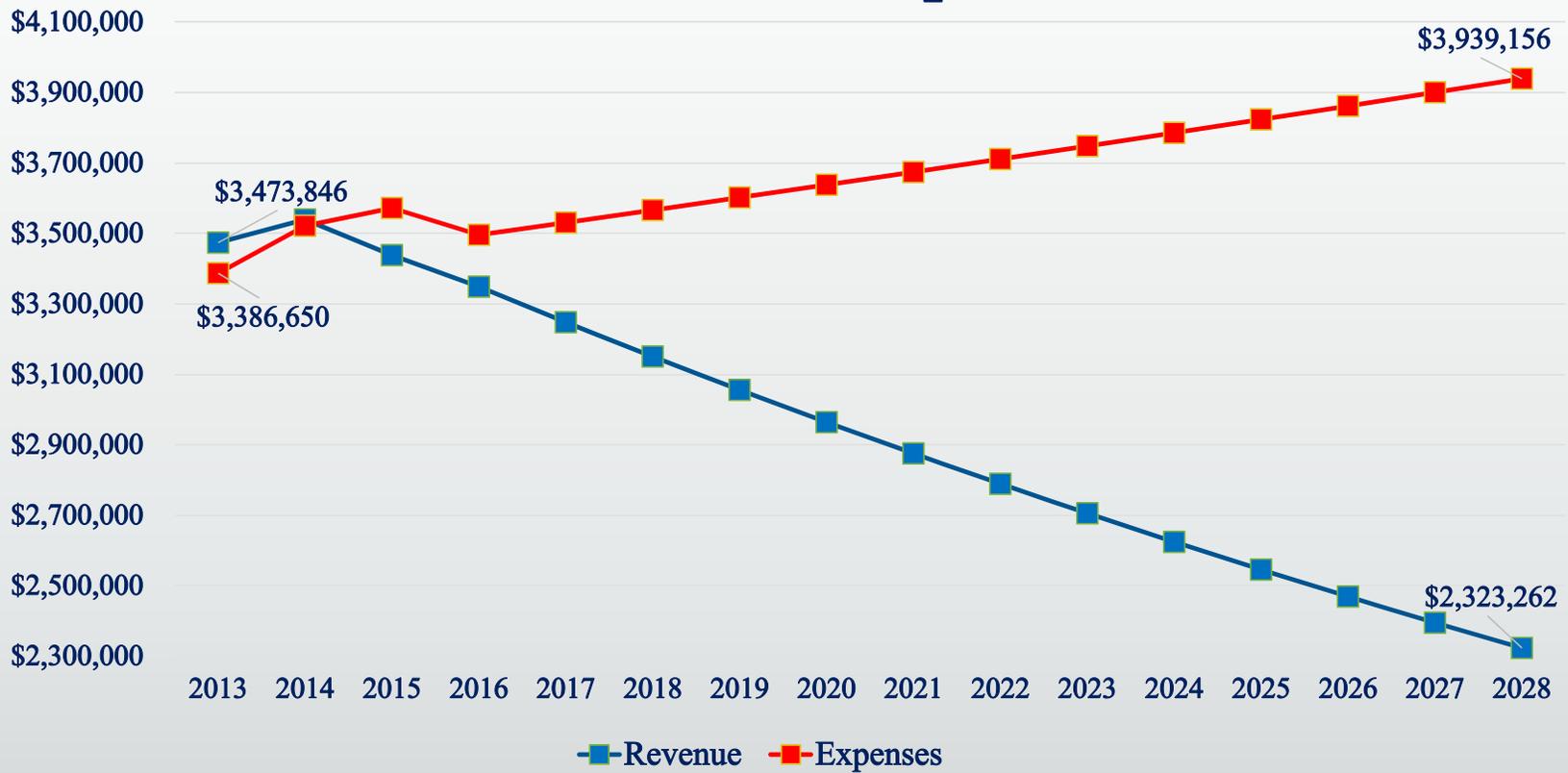
- Of total Health Department Staff
 - 40 Fewer people (34 FTEs)
 - 46 percent reduction (people and FTEs)

- Of total Public Health Staff
 - 15 fewer people (12 FTEs)
 - 24 percent reduction (people and FTEs)

* FTEs – Full-time Equivalents

Financial Projection

Revenue & Expenses



Financial Projection

	Last Year of Positive Ending Unreserved Fund Balance	Fund Balance Runs Out
Without Referendum	2018	2021
With Referendum	2025	2027

Sustain the DeKalb County Health Department

- Expertise in Public Health and Prevention
- Decades of Experience
- Trusted Community Provider
- Mission and Commitment to Improve Population Health
- Historic Partnership: Public Health and Medicaid as Public Investments
- Medical Neighborhood
- Return on Investment (ROI)

Jane E. Lux

jlux@dekalbcounty.org

815.748.2422