

**COUNTY OF KENDALL, ILLINOIS**  
**Health & Environment Committee**  
**County Office Building**  
**County Board Room 210**

**Monday, August 19, 2019 – 8:30a.m.**  
**MEETING AGENDA**

- 1. Call to Order**
- 2. Roll Call:** Judy Gilmour (Chair), Robyn Vickers (Vice Chair), Elizabeth Flowers, Scott Gengler, Tony Giles
- 3. Approval of Agenda**
- 4. Approval of Minutes from July 15 2019**
- 5. Status Reports**
  - Board of Health
  - Health Department
  - Soil & Water
  - Water Related Groups
  - Other Reports
- 6. Old Business**
- 7. New Business**
  - *Review of Energy Efficiency Ideas for County Departments*
- 8. Chairman's Report**
- 9. Public Comment**
- 10. Questions from the Media**
- 11. Action Items for the County Board**
- 12. Executive Session**
- 13. Adjournment**

**COUNTY OF KENDALL, ILLINOIS**  
**Health & Environment Committee**  
**Monday, July 15, 2019**  
**Meeting Minutes**

**CALL TO ORDER**

The meeting was called to order by Chair Judy Gilmour at 8:35a.m.

**ROLL CALL**

Attendee	Status	Arrived	Left Meeting
Judy Gilmour	Here		
Robyn Vickers	Here		
Elizabeth Flowers	Absent		
Scott Gengler	Here		
Tony Giles	Absent		

**OTHERS PRESENT:** Meagan Briganti, GIS Coordinator, Steve Curatti, Kendall County Health Department, Ashley Hunt, Assistant Director of Environmental Health

**APPROVAL OF AGENDA** – Member Vickers made a motion to approve the agenda, second by Member Gengler. **With three members present in agreement, the motion carried.**

**APPROVAL OF MEETING MINUTES** – Member Vickers made a motion to approve the meeting minutes from June 17, 2019, second by Member Gengler. **With three members present voting aye, the motion carried.**

**STATUS REPORTS**

- **Board of Health** – Member Giles was absent, however Steve Curatti noted the next meeting would be on July 16<sup>th</sup>, tomorrow evening.
- **Health Department** – Steve Curatti introduced Assistant Environmental Health Director Ashley Hunt who reviewed food safety regulations. Ms. Hunt noted that the Department is not only involved with restaurants but with temporary permits for festivals and special events. Sanitarians are also involved during the construction process for restaurants.

Mr. Curatti updated the committee on several other projects. The Department is working with a few School Districts to do on site vaccination clinics. There is also a fresh produce voucher project. Finally, there is a deer tick, lyme disease program that the Department is very proud of as it's only 1 of 9 programs nationwide among Health Departments.

- **Kendall County Soil and Water District** – Chair Gilmour reported that staff is at training and conferences. They will have a booth at the Kendall County Fair.
- **Water Related Groups** – No Report
- **708 Mental Health Board** – No Report

**OLD BUSINESS** – None

**NEW BUSINESS** – None

- *Energy Efficiency Ideas for County Departments* – Chair Gilmour lead the discussion sustainable efforts the County could pursue. There are many ideas listed in the packet and the County is doing some of them. Consultation is needed with Facilities Management. Member Vickers noted that this discussion began with the amount of water bottles being used by the County Board. The idea is to get reusable water bottles or stainless steel mugs and get a water cooler. Member Gengler noted this is something he has seen done before. Chair Gilmour reviewed the list and noted some things the County is already doing. The consensus was to further review the list, check with Facilities Management and return next month with proposals for items to implement.

**CHAIRMAN'S REPORT** – Chair Gilmour noted that the Solid Waste Committee will be meeting August 27<sup>th</sup>. Once the Solid Waste Plan is complete it will go to the Board of Health, the State and the County Board for approval.

**PUBLIC COMMENT** – None

**ITEMS FOR COMMITTEE OF THE WHOLE** – None

**COUNTY BOARD ACTION ITEMS** – None

**EXECUTIVE SESSION** – Not Needed

**ADJOURNMENT** – Member Vickers made a motion to adjourn the meeting, second by Member Gengler. **With three members present voting aye, the meeting was adjourned at 9:33a.m.**

Respectfully Submitted,  
Mera Johnson  
Risk Management & Compliance Coordinator

# **Kendall County Health Department Making a Difference**

## **Providing Vaccine Access to Prevent Diseases**

**Presented by: Terri Olson RN BSN**

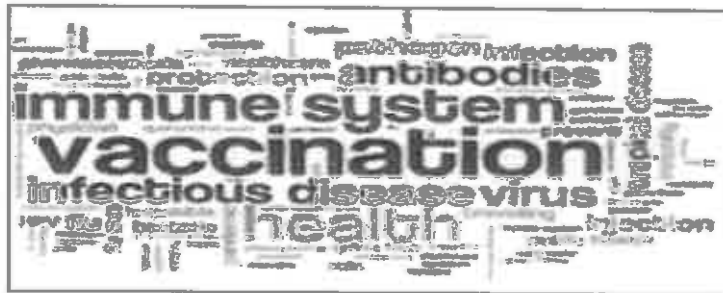
**Director of Community Health Services**

**Date:8/19/19**

# Global Facts

## Vaccine Hesitancy

- Vaccine hesitancy was named a top 10 global health threat by the World Health Organization this year. By this April, measles cases had risen 300%. In its decision to call vaccine hesitancy a global health threat, the WHO attributed the virus's rise, in part, to people declining or delaying vaccines despite their availability.

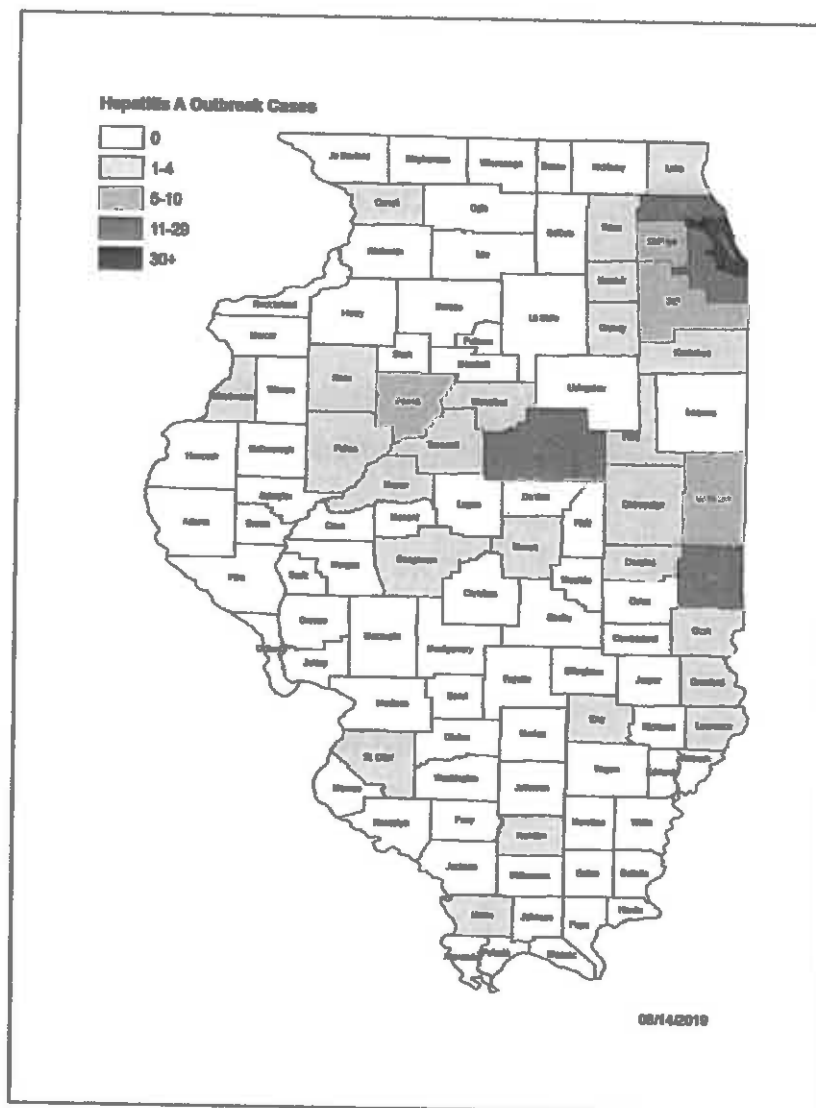


## Measles Outbreak

- **Measles Cases in 2019.** From January 1 to August 8, 2019, 1,182, individual cases of measles have been confirmed in 30 states. This is an increase of 10 cases from the previous week. This is the greatest number of cases reported in the U.S. since 1992 and since measles was declared eliminated in 2000. Measles can cause serious complications.

## Hepatitis A Outbreak in Illinois : 2018-to date

The Illinois Department of Public Health (IDPH) declared a statewide community outbreak in December 2018 after observing an increase in person-to-person transmitted Hepatitis A cases. As of August 14, 2019, IDPH is reporting a Hepatitis A outbreak comprised of 150 confirmed cases that are not associated with international travel and are not foodborne related. Several of these cases are among individuals at high risk for infection--including men who have sex with men (MSM), persons experiencing homelessness, persons who use drugs and/or persons who are currently or were recently incarcerated. The statewide community outbreak is spread through person-to-person contact.





## Influenza

Influenza (flu) is a contagious respiratory illness caused by influenza virus. It can cause mild to severe illness. Serious outcomes of flu infection can result in hospitalization or death. Some people, such as older people, young children, and people with certain health conditions, are at high risk of serious flu complications. There are two main types of influenza (flu) virus: Types A and B. The influenza A and B viruses that routinely spread in people (human influenza viruses) are responsible for seasonal flu epidemics each year. The best way to prevent flu is by getting vaccinated each year.

In 2017-2018 was a high severity flu season with record breaking levels of influenza-like illness and hospitalization rates. CDC reported 176 flu-related deaths in children through June 30th. This set the record for the highest number of flu-related deaths in children reported during a single flu season. Approximately 80% of these deaths occurred in children who had not received a flu vaccination during that season.

## **Kendall County Community Health Services....**

**Making a difference through community collaborations.**

**February 2019- to date:**

### **Hepatitis A:Section 317 program- (Federal funded )**

Provided 42 injections thus far for high risk individuals such as the incarcerated, clients with drug issues and staff who work within the high risk area's. CHS plans to continue to reach out to Pads and Physicians who may treat high risk individuals without insurance.

### **Vaccines for Children Offsite clinics: Section 317- (Federal funded)**

(A child is eligible for the VFC Program if he or she is younger than 19 years of age and is one of the following: Medicaid-eligible , Uninsured, Underinsured, American Indian or Alaska Native)- Title 19.

Provided 28 vaccines , 24 School Physicals and scheduled over 80 back to school shots during the 3 day collaboration with three High Schools in Kendall County (Oswego, Oswego East and Plano High School to provide direct access to vaccines. We also scheduled 20 extra Back To School clinics from April to October 2019. In addition, we have applied for the CHIP program(Title 21 children) through the state.

**Assisted with collaboration efforts to assist Private Pay clients through Pharmacies within the county and school district.**

**Media outreach: WSPY, The Reporter, Facebook, and Twitter. In addition, our own web page and quarterly news letter.**

Section 317 of the Public Health Service Act authorizes the federal purchase of vaccines to vaccinate children, adolescents, and adults. Over its 50 year history, Section 317-purchased vaccine has been directed towards meeting the needs of priority populations; most recently this has included underinsured children not eligible for VFC, and uninsured adults.

Section 317 discretionary funding also supports immunization program operations at the local, state, and national levels







**Immunization**

*Saves Lives*

## Vaccines for Children

The Vaccines For Children (VFC) program is a federally funded program that provides vaccines at no cost to children who might not otherwise be vaccinated because of inability to pay. CDC buys vaccines at a discount and distributes them to grantees—i.e., state health departments and certain local and territorial public health agencies—which in turn distribute them at no charge to those private physicians' offices and public health clinics registered as VFC providers. Children who are eligible\* for VFC vaccines are entitled to receive those vaccines recommended by the Advisory Committee on Immunization Practices (ACIP)

The VFC program was created by the Omnibus Budget Reconciliation Act of 1993 and is required to be a new entitlement of each state's Medicaid plan under section 1928 of the Social Security Act. The program was officially implemented in October 1994 and serves eligible children in all U.S. states, as well as the Commonwealth of Puerto Rico, the U.S. Virgin Islands, American Samoa, Guam, and the Commonwealth of the Northern Mariana Islands.



**A child is eligible for the VFC Program if he or she is younger than 19 years of age and is one of the following:**

- **Medicaid-eligible**
- **Uninsured**
- **Underinsured American Indian or Alaska Native**

**Children whose health insurance covers the cost of vaccinations are not eligible for VFC vaccines, even when a claim for the cost of the vaccine and its administration would be denied for payment by the insurance carrier because the plan's deductible had not been met.**

## Important State of Illinois Health Requirements for the 2019-2020 School Year

Physical examination and immunizations requirements MUST be on file prior to the first day of attendance

### Requirements by Grade Level:

#### **Preschool Students:**

- Physical Exam (Parents please complete the Health History portion, sign and date)
- Complete updated Immunization Record signed and stamped by a doctor

#### **Kindergarten Students (K)**

- Physical Exam (Parents please complete the Health History portion, sign and date)
- Complete Updated Immunization Record signed or stamped by a doctor
- Dental Exam on Illinois Form dated between November, 2018 - May 15, 2020
- Eye Exam on Illinois Form completed by October 15 of the current school year

#### **Second Grade Students (2<sup>nd</sup>)**

- Dental Exam on Illinois Form dated between November, 2018 - May 15, 2020

#### **Sixth Grade Students (6<sup>th</sup>)**

- Physical Exam (Sports Physical not acceptable) (Parents please complete the Health History portion, sign and date)
- Complete Updated Immunization Record signed and stamped by a doctor
- Dental Exam on Illinois Form dated between November, 2018 - May 15, 2020

#### **Ninth Grade Students (9<sup>th</sup>)**

- Physical Exam (Sports Physical not acceptable) (Parents please complete the Health History portion, sign and date)
- Complete updated Immunization Record signed and stamped by a doctor
- Dental Exam on Illinois Form dated between November, 2018 - May 15, 2020

#### **Twelfth Grade Students (12<sup>th</sup>)**

- Complete Immunization Record signed and stamped by a doctor, *showing* two doses of the Meningococcal vaccine with the 1st dose being on or after the 11th birthday & second dose on or after the 16th birthday UNLESS the first dose was administered after the age 16 years then one dose is required.

**Religious/Medical Exemptions:** If your child does not receive immunizations for religious reasons, a parent and health care provider must complete the "Illinois Certificate of Religious Exemption to Required Immunizations and/or Examinations" form prior to the first day of school. This form may not be used for personal or philosophical reasons. Illinois does not allow for such exemptions.

**Sports Physicals:** If your child will be trying out for any sport (including Intramural), they must have a sports physical on file prior to the season's first practice. Incoming 6<sup>th</sup> and 9<sup>th</sup> grade may use a school physical in lieu of a sports physical, however a sports physical CAN NOT be accepted as proof of a physical examination for mandated physicals. Sports physicals are valid for 395 calendar days from the date the physical was issued.

<b>New Students</b>	<b>Medical Authorization Form</b>
<ul style="list-style-type: none"><li>•Physical Exam on Illinois Form</li><li>•Complete/Current Immunization Record stamped and signed care provider</li><li>•Dental Exam on Illinois Form completed by May 15 of current year</li><li>•Eye Exam on Illinois Form within 12 months of the first day of school</li></ul>	<p>If your child needs to take medication during school, a new medication authorization form is needed each school year. No medications will be given to students without proper authorization from a health care provider, this includes over-the-counter medications and cough drops. If your child uses an inhaler for Asthma or an Epi-Pen for allergies contact the school health staff.</p>

<b>Pneumococcal Conjugate Vaccine (PCV 13)</b>	Refer to ACIP PCV series schedule for children 24-59 months. Children without series must have one dose after 24 months of age.	Not required after 5 <sup>th</sup> birthday (60 months of age).		Refer to ACIP PCV series schedule. No proof of Immunity allowed.
<b>Hepatitis B</b>	Three doses for all children.  Third dose must have been administered on or after 6 months of age (168 days).	No Requirements.	For students entering grades 6 thru 12: Three doses of hepatitis B vaccine administered at recommended intervals OR Two doses Adult Recombivax-HB vaccine for ages 11-15.	Minimum intervals between doses: First and second-at least 4 weeks (28 days), second and third-at least 2 months (56 days), first and third-at least 4 months (112 days) OR Adult Recombivax-HB two doses separated by 4 months (112 days). Must start and finish series between 11 – 15 years of age.
<b>Varicella (progressive requirement)</b>	One dose on or after 1st birthday.	Two doses of varicella; The first dose must have been on or after the 1 <sup>st</sup> birthday and the 2nd dose no less than 4 weeks (28) days later.	One dose of varicella on or after the 1st birthday for students entering grade 5.  Two doses of varicella for students entering grades 2, 3, 4, 6, 7, 8, 9, 10, 11 & 12.	Minimum Intervals for administration: The first dose must have been received on after the 1st birthday and the second dose no less than 4 weeks (28 days) later. Statement from physician or healthcare provider verifying disease history OR laboratory evidence of varicella immunity.
<b>Meningococcal Conjugate Vaccine (progressive requirement)</b>	No Requirements.	No Requirements.	Applies to students entering 6 <sup>th</sup> , 7 <sup>th</sup> , 8 <sup>th</sup> AND 9 <sup>th</sup> grades: one dose of meningococcal conjugate vaccine.  12 <sup>th</sup> grade entry: two doses of meningococcal conjugate vaccine.	Minimum Intervals for administration: For 6 <sup>th</sup> grade entry: the first dose received <u>on or after the 11th birthday</u> . For 12 <sup>th</sup> grade entry: second dose <u>on or after the 16th birthday</u> and an interval of at least eight weeks after the first dose. Only one dose is required if the first dose was received at 16 years of age or older. No proof of immunity allowed.

**Notes:**

Students attending ungraded school programs must comply in accordance with grade equivalent.

Within the Advisory Committee on Immunization Practices (ACIP) recommendations, vaccine doses given up to four days before minimum interval or age can be counted as valid. However, this does not apply to intervals between live vaccines. Live vaccines shall not be given fewer than 28 days after receipt of a prior live vaccine.

**Sources:**

Title 77, Part 665 Child and Student Health Examination and Immunization Code

Liang, J. L., Tiwari, T., Moro, P., Messonnier, N. E., Reingold, A., Sawyer, M., & Clark, T. A. (2018). Prevention of Pertussis, Tetanus, and Diphtheria with Vaccines in the United States: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR Recommendations and Reports*, 67(2), 1.

Centers for Disease Control and Prevention. Recommended immunization schedule for children and adolescents aged 18 years or younger, United States, 2018.



**Minimum Immunization Requirements Entering a Child Care Facility or School in Illinois, Fall 2018**

Vaccine Requirement	Child Care Facility, Preschool, Early Childhood, Pre-Kindergarten Programs	Kindergarten through 12 <sup>th</sup> Grade		Minimum Intervals Allowed Between Doses and Other Options for Proof of Immunity
		First Entry Into School (Kindergarten or 1 <sup>st</sup> Grade)	Other Grades	
Diphtheria, Pertussis, Tetanus (DTP/DTaP/ or Tdap, Td)	Three doses of DTP or DTaP by 1 year of age. One additional booster dose by 2nd birthday.	Four or more doses of DTP/DTaP with the last dose qualifying as a booster and received on or after the 4th birthday.	Three or more doses of DTP/DTaP or Td; with the last dose qualifying as a booster if received on or after the 4th birthday.  For students entering 6th thru 12th grades: In addition, one dose of Tdap.	Minimum interval between series doses: 4 weeks (28 days). Between series and booster: 6 months. No proof of immunity allowed.
Polio	Two doses by 1 year of age. One additional dose by 2nd birthday.	Four doses of the same type of polio vaccine with the last dose qualifying as a booster and received on or after the 4th birthday. <i>(progressive requirement)</i>  A fourth dose is not necessary if the third dose was administered at age 4 years or older at least 6 months after the previous dose.	Three or more doses of polio with the last dose qualifying as a booster and received on or after the 4th birthday. If the series is given in any combination of polio vaccine types, four or more doses are required with the last being a booster on or after the 4th birthday.	Minimum interval between series doses: 4 weeks (28 days). Booster doses: One after the 4 <sup>th</sup> birthday For kindergarten entry: Booster dose 6 months from previous dose and 4 <sup>th</sup> birthday. No proof of immunity allowed.
Measles	One dose on or after the 1st birthday.	Two doses of measles vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of measles immunity or certified physician verification of measles disease by date of illness. Cases diagnosed after 7/1/2002 must include lab evidence of infection.
Rubella	One dose on or after the 1st birthday.	Two doses of rubella vaccine, the first dose must have been received on or after the 1st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of rubella immunity. History of disease is not acceptable proof of immunity to rubella.
Mumps	One dose on or after the 1st birthday	Two doses of mumps vaccine, the 1st dose must have been received on or after the first birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of mumps immunity or certified physician verification of mumps disease by date of illness.
Haemophilus influenzae type b (Hib)	Refer to ACIP Hib series schedule for children 24-59 months. Children without series must have one dose after 15 months. of age.	Not required after the 5th birthday (60 months of age).		Refer to ACIP Hib series schedule. No proof of immunity allowed.