

**MONTGOMERY COUNTY HEALTH DEPARTMENT**

**COUNTY BOARD REPORT**

**June 2015**

## FY15

## SCREENING PROGRAM

**WOMEN'S HEALTH ILLINOIS BREAST & CERVICAL CANCER**

### CASE COORDINATION UNIT

## ELDER ABUSE

## EMERGENCY PREPAREDNESS

[illegible]

# **NURSING FY15**

| <b>FAMILY CASE MANAGEMENT</b> | JUL | AUG | SEP | OCT | NOV | DEC | JAN | FEB | MAR | APR | MAY | JUN | FY15<br>TOTAL |
|-------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---------------|
| <b>NURSING VISITS:</b>        |     |     |     |     |     |     |     |     |     |     |     |     |               |
| CLIENTS SEEN                  | 351 | 376 | 321 | 225 | 223 | 217 | 219 | 231 | 234 | 235 | 223 | 214 | 3069          |
| HOME VISITS                   | 7   | 11  | 3   | 4   | 3   | 4   | 13  | 10  | 7   | 12  | 6   | 4   | 84            |
| PREGNANT WOMEN                | 83  | 65  | 69  | 63  | 64  | 59  | 62  | 70  | 80  | 86  | 89  | 87  | 877           |
| INFANTS                       | 137 | 141 | 126 | 136 | 132 | 124 | 125 | 128 | 123 | 115 | 106 | 94  | 1487          |
| OLDER CHILD                   | 35  | 24  | 29  | 26  | 27  | 35  | 32  | 33  | 31  | 34  | 28  | 33  | 367           |
| GENETIC SCREENINGS / FHH      | 13  | 7   | 13  | 13  | 9   | 14  | 18  | 14  | 14  | 16  | 9   | 20  | 160           |
| PREGNANCY TESTS               | 3   | 4   | 1   | 3   | 1   | 2   | 5   | 3   | 0   | 2   | 2   | 3   | 29            |

## **WIC**

|                                |     |     |     |     |     |     |     |     |     |     |     |     |      |
|--------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|
| CLIENTS SEEN                   | 264 | 373 | 315 | 481 | 301 | 337 | 301 | 253 | 315 | 272 | 258 | 330 | 3800 |
| CHILDREN                       | 338 | 340 | 338 | 352 | 342 | 340 | 358 | 335 | 335 | 296 | 306 | 307 | 3987 |
| INFANTS                        | 174 | 167 | 165 | 163 | 156 | 151 | 148 | 147 | 160 | 158 | 154 | 156 | 1899 |
| WOMEN POSTPARTUM               | 35  | 31  | 37  | 37  | 40  | 42  | 40  | 39  | 34  | 37  | 35  | 38  | 445  |
| WOMEN PREGNANT                 | 80  | 80  | 76  | 82  | 71  | 70  | 81  | 90  | 88  | 92  | 87  | 93  | 990  |
| WOMEN LACTATING                | 26  | 27  | 28  | 25  | 30  | 29  | 31  | 26  | 28  | 26  | 22  | 23  | 321  |
| NUTRITION CLASSES - ATTENDANCE | 117 | 76  | 95  | 109 | 78  | 93  | 10  | 62  | 87  | 76  | 84  | 85  | 972  |
| PROJECTED CASELOAD             | 861 | 861 | 861 | 861 | 861 | 861 | 861 | 861 | 861 | 861 | 861 | 861 |      |
| CASELOAD - BEG OF MONTH        | 656 | 653 | 645 | 644 | 659 | 639 | 632 | 658 | 637 | 645 | 609 | 604 |      |
| UNDUPLICATED CLIENTS ADDED     | 76  | 85  | 74  | 102 | 33  | 71  | 86  | 39  | 78  | 47  | 75  | 86  | 852  |
| CLIENTS TERMINATED             | 79  | 93  | 75  | 87  | 53  | 78  | 60  | 60  | 70  | 83  | 80  | 73  | 891  |
| CASELOAD - END OF MONTH        | 653 | 645 | 644 | 659 | 639 | 632 | 658 | 637 | 645 | 609 | 604 | 617 |      |

## **IMMUNIZATIONS**

|                           |     |     |     |      |     |     |     |     |     |     |     |     |      |
|---------------------------|-----|-----|-----|------|-----|-----|-----|-----|-----|-----|-----|-----|------|
| TOTAL IMMUNIZATIONS GIVEN | 320 | 670 | 439 | 1606 | 451 | 373 | 254 | 152 | 228 | 180 | 188 | 310 | 5171 |
|---------------------------|-----|-----|-----|------|-----|-----|-----|-----|-----|-----|-----|-----|------|

## **VISION & HEARING SCREENING PROGRAM**

|                                      |   |   |   |     |     |   |   |   |   |    |    |   |     |
|--------------------------------------|---|---|---|-----|-----|---|---|---|---|----|----|---|-----|
| HEARING TEST - # OF TEST & REFERRALS | 0 | 0 | 0 | 232 | 143 | 0 | 0 | 0 | 0 | 18 | 0  | 0 | 393 |
| VISION TEST - # OF TEST & REFERRALS  | 0 | 0 | 0 | 127 | 96  | 0 | 0 | 0 | 0 | 19 | 84 | 0 | 326 |

## **SCHOOL PROGRAMS**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|
| # - PROGRAMS | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| # - STUDENTS | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

## **SUBSTANCE ABUSE PREVENTION**

|                    |    |    |    |    |    |    |    |    |    |    |    |   |     |
|--------------------|----|----|----|----|----|----|----|----|----|----|----|---|-----|
| PROGRAMS PRESENTED | 0  | 0  | 22 | 32 | 26 | 13 | 21 | 10 | 0  | 11 | 8  | 0 | 143 |
| # REACHED          | 0  | 0  | 80 | 79 | 79 | 48 | 76 | 76 | 76 | 55 | 35 | 0 | 604 |
| CONTACTS           | 10 | 30 | 45 | 36 | 30 | 14 | 30 | 9  | 0  | 0  | 0  | 0 | 204 |

## MENTAL HEALTH FY15

|                                 |     |     |     |     |     |     |     |     |     |     |     |     | FY 15 | FY 14   |
|---------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|---------|
| OUTPATIENT MENTAL HEALTH        | JUL | AUG | SEP | OCT | NOV | DEC | JAN | FEB | MAR | APR | MAY | JUN | TOTAL | YTD TOT |
| CASELOAD                        | 234 | 207 | 207 | 194 | 190 | 180 | 169 | 171 | 142 | 152 | 151 | 120 |       |         |
| OPENINGS                        | 16  | 13  | 16  | 23  | 21  | 16  | 13  | 22  | 16  | 13  | 15  | 11  | 195   | 70      |
| CLOSINGS                        | 43  | 13  | 29  | 27  | 31  | 27  | 11  | 51  | 6   | 14  | 46  | 24  | 322   | 197     |
| REFERALLS - INPATIENT TREATMENT | 3   | 0   | 2   | 0   | 1   | 0   | 2   | 0   | 1   | 1   | 0   | 0   | 10    | 2       |

### PSYCHO-SOCIAL REHAB

|                      |   |   |   |   |   |   |   |    |    |    |    |    |   |    |
|----------------------|---|---|---|---|---|---|---|----|----|----|----|----|---|----|
| CASELOAD             | 9 | 9 | 7 | 7 | 7 | 7 | 9 | 10 | 11 | 11 | 11 | 11 |   |    |
| CLIENTS ADDED        | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 1  | 1  | 0  | 0  | 0  | 4 | 2  |
| CLIENTS TERMINATED   | 1 | 0 | 2 | 0 | 0 | 0 | 0 | 0  | 0  | 0  | 0  | 0  | 3 | 1  |
| INCREASE IN SERVICES | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0  | 0  | 0  | 0  | 1 | 0  |
| CS CONTACTS          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0  | 0  | 0  | 0  | 0 | 13 |
| REFERRALS            | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0  | 0  | 0  | 0  | 0 | 4  |

### ALCOHOL AND SUBSTANCE ABUSE

|   |    |    |    |    |    |    |     |     |     |     |     |     |     |    |
|---|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|-----|----|
| CASELOAD  | 67 | 69 | 70 | 77 | 84 | 92 | 101 | 102 | 109 | 104 | 110 | 115 |     |    |
| OPENINGS  | 4  | 12 | 13 | 12 | 13 | 14 | 9   | 11  | 19  | 12  | 7   | 11  | 137 | 34 |
| CLOSINGS  | 2  | 13 | 6  | 5  | 5  | 5  | 8   | 4   | 24  | 6   | 2   | 21  | 101 | 26 |
| COURT-APPOINTED                                   | 15 | 17 | 8  | 8  | 8  | 10 | 8   | 8   | 11  | 9   | 9   | 9   | 120 | 39 |
| NEW SELF-REFERRALS                                | 1  | 1  | 1  | 5  | 5  | 3  | 5   | 5   | 9   | 3   | 1   | 1   | 40  | 6  |
| REFERRALS FOR INPATIENT/<br>RESIDENTIAL TREATMENT | 6  | 5  | 5  | 4  | 4  | 4  | 5   | 5   | 7   | 7   | 4   | 5   | 61  | 15 |
| DUI EVALUATIONS/RE-EVALUATIONS                    | 12 | 6  | 7  | 5  | 1  | 5  | 6   | 4   | 8   | 11  | 6   | 10  | 81  | 27 |
| DUI CLASS - ATTENDANCE                            | 3  | 1  | 0  | 8  | 0  | 0  | 3   | 0   | 7   | 0   | 6   | 0   | 28  | 7  |

### HELPLINE

|                |    |    |    |    |    |    |    |    |    |    |    |    |     |    |
|----------------|----|----|----|----|----|----|----|----|----|----|----|----|-----|----|
| CALLS RECEIVED | 51 | 31 | 58 | 34 | 32 | 39 | 46 | 48 | 65 | 42 | 45 | 55 | 546 | 15 |
| FACE-TO-FACE   | 2  | 3  | 5  | 1  | 1  | 5  | 0  | 3  | 1  | 0  | 2  | 1  | 24  | 4  |

## FOOD SANITATION PROGRAM

## TANNING / BODY ART FACILITY INSPECTION PROGRAM

# ENVIRONMENTAL HEALTH FY15

## PRIVATE SEWAGE DISPOSAL

|                                      | JUL | AUG | SEP | OCT | NOV | DEC | JAN | FEB | MAR | APR | MAY | JUN | FY 15<br>YTD TOT | FY 14<br>YTD TOT |
|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|------------------|------------------|
| PERMITS:                             |     |     |     |     |     |     |     |     |     |     |     |     |                  |                  |
| REQUESTS RECEIVED                    | 6   | 3   | 3   | 1   | 1   | 3   | 4   | 0   | 1   | 0   | 2   | 2   | 26               | 12               |
| ON-SITE PRECONSTRUCTION EVALUATIONS  | 6   | 3   | 3   | 1   | 1   | 2   | 3   | 0   | 1   | 1   | 1   | 2   | 24               | 12               |
| APPLICATIONS APPROVED/PERMITS ISSUED | 7   | 3   | 1   | 1   | 1   | 3   | 4   | 0   | 1   | 1   | 3   | 2   | 27               | 11               |
| FINAL INSPECTIONS                    | 4   | 4   | 4   | 1   | 2   | 2   | 5   | 8   | 1   | 2   | 1   | 2   | 36               | 12               |
| CONSULTATION/COUNSELING              | 26  | 25  | 24  | 19  | 17  | 17  | 26  | 0   | 21  | 18  | 22  | 20  | 235              | 62               |
| EDUCATION/MEDIA CONTACTS             | 7   | 3   | 3   | 1   | 1   | 3   | 4   | 0   | 1   | 1   | 1   | 2   | 27               | 11               |
| BUILDING PERMITS ISSUED              | 16  | 20  | 13  | 6   | 5   | 12  | 5   | 4   | 17  | 19  | 15  | 5   | 137              | 52               |
| SUBDIVISIONS REVIEWED                | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 1   | 1   | 0   | 0   | 2                | 2                |

## POTABLE WATER SUPPLIES

|  |    |    |    |    |    |    |    |   |    |   |    |   |     |    |
|--|----|----|----|----|----|----|----|---|----|---|----|---|-----|----|
| NEW WATER WELL PERMITS ISSUED                    | 0  | 1  | 0  | 0  | 0  | 0  | 0  | 2 | 0  | 2 | 0  | 0 | 5   | 5  |
| NEW WELLS DRILLED                                | 1  | 0  | 0  | 0  | 1  | 0  | 0  | 1 | 1  | 0 | 1  | 0 | 5   | 2  |
| NEW WELLS INSPECTED                              | 1  | 0  | 0  | 0  | 1  | 0  | 0  | 0 | 1  | 0 | 1  | 0 | 4   | 2  |
| # OF WELLS SEALED                                | 0  | 0  | 0  | 1  | 0  | 0  | 0  | 0 | 0  | 2 | 2  | 0 | 5   | 0  |
| PRIVATE WATER WELLS INSPECTED/COLLECTED          | 1  | 0  | 0  | 1  | 1  | 0  | 0  | 0 | 0  | 1 | 0  | 0 | 4   | 0  |
| PUBLIC WATER SAMPLES COLLECTED                   | 0  | 0  | 0  | 1  | 0  | 0  | 0  | 0 | 0  | 0 | 0  | 0 | 1   | 0  |
| PRIVATE WATER SAMPLES COLLECTED - EXISTING       | 1  | 4  | 3  | 0  | 0  | 2  | 3  | 0 | 4  | 0 | 1  | 1 | 19  | 4  |
| PRIVATE WATER SAMPLES COLLECTED - NEW            | 0  | 1  | 0  | 0  | 0  | 0  | 0  | 3 | 0  | 0 | 0  | 0 | 4   | 0  |
| WATER TEST KITS PREPARED                         | 22 | 40 | 0  | 0  | 5  | 0  | 0  | 0 | 30 | 0 | 0  | 0 | 97  | 28 |
| PUBLIC NON-COMMUNITY<br>WATER SUPPLIES INSPECTED | 0  | 1  | 0  | 1  | 0  | 4  | 0  | 0 | 0  | 0 | 0  | 0 | 6   | 5  |
| PUBLIC NON-COMMUNITY<br>WATER SAMPLES COLLECTED  | 0  | 1  | 4  | 1  | 1  | 4  | 0  | 0 | 0  | 1 | 1  | 0 | 13  | 19 |
| WATER SUPPLY ACTION                              | 0  | 0  | 6  | 1  | 1  | 2  | 0  | 2 | 8  | 2 | 0  | 0 | 22  | 15 |
| # OF CONSULTATIONS, CALLS, WALK-INS              | 13 | 28 | 21 | 16 | 16 | 12 | 21 | 8 | 24 | 8 | 13 | 8 | 188 | 45 |
| EDUCATION/MEDIA CONTACTS                         | 0  | 1  | 0  | 1  | 0  | 0  | 0  | 0 | 0  | 2 | 0  | 0 | 4   | 5  |

## NUISANCES

|                                |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| COMPLAINTS:                    |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
| RECEIVED                       | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 1 | 3  | 2  |
| DOCUMENTED OR FOLLOW-UP ACTION | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 1 | 3  | 2  |
| ACTION TAKEN:                  |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
| INVESTIGATED                   | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 2  | 0  |
| ABATED                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0  |
| REFERRED TO OTHER AGENCY       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1  | 2  |
| NO FURTHER ACTION              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1  | 0  |
| LETTER OR PHONE CALL           | 5 | 0 | 4 | 5 | 2 | 2 | 3 | 1 | 2 | 2 | 0 | 7 | 33 | 17 |

|   |    |    |    |    |    |    |    |    |    |    |    |    |     |    |
|---|----|----|----|----|----|----|----|----|----|----|----|----|-----|----|
| PROGRAM BASED ENV. HLTH ADMIN DUTIES:           |    |    |    |    |    |    |    |    |    |    |    |    |     |    |
| # Hrs. COMMUNICABLE DISEASE                     | 21 | 18 | 18 | 21 | 5  | 3  | 3  | 2  | 5  | 5  | 21 | 33 | 155 | 98 |
| # OF MEETINGS, CONF, TRAINING, PREP PLAN        | 5  | 0  | 25 | 5  | 31 | 2  | 0  | 28 | 12 | 1  | 17 | 3  | 129 | 45 |
| # OF CORRESPONDENCE CALLS/LETTERS               | 19 | 37 | 21 | 0  | 4  | 22 | 11 | 11 | 18 | 16 | 17 | 29 | 205 | 83 |
| # EDUCATIONAL/OUTREACH ACTIVITIES / DEMOS       | 2  | 1  | 1  | 1  | 1  | 0  | 1  | 0  | 0  | 0  | 0  | 1  | 8   | 5  |
| # REG. COMPLIANCE ACT. (Permit Renewal Packets) | 1  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 1   | 2  |
| # AGENCY REPORTS                                | 6  | 1  | 1  | 5  | 3  | 1  | 5  | 1  | 1  | 8  | 1  | 1  | 34  | 8  |
| # Hrs. MISC ADMIN ACTIVITIES                    | 12 | 9  | 6  | 22 | 17 | 20 | 20 | 15 | 8  | 10 | 11 | 21 | 171 | 22 |

# COUNTY FY '15

|  | December     | January      | February     | March        | April        | May          | June         | July   | August | September | October | November | Yearly Totals  |
|--|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------|--------|-----------|---------|----------|----------------|
| <b>Actual Beginning Balance</b>              | \$424,187.50 | \$622,203.40 | \$674,605.67 | \$582,723.50 | \$554,950.03 | \$605,506.87 | \$549,439.57 |        |        |           |         |          |                |
| <b>Beginning NB Balance</b>                  | \$418,265.00 | \$616,280.90 | \$668,683.17 | \$576,801.00 | \$549,027.53 | \$599,584.37 | \$543,517.07 |        |        |           |         |          |                |
| <b>Income</b>                                |              |              |              |              |              |              |              |        |        |           |         |          |                |
| Local & PPR Taxes                            | \$1,256.51   | \$4,188.28   | \$0.00       | \$1,195.64   | \$7,317.56   | \$3,904.60   | \$74,370.50  |        |        |           |         |          | \$92,233.09    |
| Grants                                       | \$206,062.05 | \$81,256.40  | \$29,973.31  | \$100,043.70 | \$217,376.98 | \$104,727.43 | \$121,732.46 |        |        |           |         |          | \$861,172.33   |
| Fees   | \$63,223.78  | \$123,099.86 | \$36,851.34  | \$63,618.30  | \$136,123.58 | \$42,713.80  | \$89,905.73  |        |        |           |         |          | \$555,536.39   |
| Interest - Checking Acct                     | \$181.84     | \$180.83     | \$175.85     | \$183.34     | \$162.46     | \$171.85     | \$197.61     |        |        |           |         |          | \$1,253.78     |
| Transfer In                                  | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          | \$0.00         |
| Other  | \$61,774.18  | \$10,246.70  | \$6,525.30   | \$7,209.75   | \$7,397.50   | \$6,001.05   | \$7,991.96   |        |        |           |         |          | \$107,146.44   |
| Total  | \$332,498.36 | \$218,972.07 | \$73,525.80  | \$172,250.73 | \$368,378.08 | \$157,518.73 | \$294,198.26 | \$0.00 | \$0.00 | \$0.00    | \$0.00  | \$0.00   | \$1,617,342.03 |
| <b>Expenditures</b>                          |              |              |              |              |              |              |              |        |        |           |         |          |                |
| Health Department Bills                      | \$27,213.73  | \$58,716.86  | \$56,077.47  | \$90,117.75  | \$208,735.95 | \$52,417.54  | \$172,445.58 |        |        |           |         |          | \$665,724.88   |
| Purchase of CD's                             | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          | \$0.00         |
| Payroll                                      | \$107,268.73 | \$107,852.94 | \$109,330.50 | \$109,906.45 | \$109,085.29 | \$161,168.49 | \$108,060.97 |        |        |           |         |          | \$812,673.37   |
| Total  | \$134,482.46 | \$166,569.80 | \$165,407.97 | \$200,024.20 | \$317,821.24 | \$213,586.03 | \$280,506.55 | \$0.00 | \$0.00 | \$0.00    | \$0.00  | \$0.00   | \$1,478,398.25 |
| <b>Ending NB Balance</b>                     | \$616,280.90 | \$668,683.17 | \$576,801.00 | \$549,027.53 | \$599,584.37 | \$543,517.07 | \$557,208.78 |        |        |           |         |          |                |
| <b>Investments - Building\Hlth Ins. Fund</b> |              |              |              |              |              |              |              |        |        |           |         |          |                |
| CD's (Beg. Bal.)                             | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          |                |
| CD Interest                                  | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          |                |
| New CD's - transfer from NB ckg.             | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          |                |
| Cash In CD - deposit to NB ckg.              | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       |        |        |           |         |          |                |
| Ending Balance                               | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00 | \$0.00 | \$0.00    | \$0.00  | \$0.00   |                |
| <b>Working Cash Balance</b>                  | \$622,203.40 | \$674,605.67 | \$582,723.50 | \$554,950.03 | \$605,506.87 | \$549,439.57 | \$563,131.28 |        |        |           |         |          |                |
| <b>Actual Ending Balance</b>                 | \$622,203.40 | \$674,605.67 | \$582,723.50 | \$554,950.03 | \$605,506.87 | \$549,439.57 | \$563,131.28 |        |        |           |         |          |                |