



Cook County Department of Public Health

Report to the Cook County Board in their capacity as the Cook County Board of Health

First Quarter 2022

Review of Core Public Health Functions & Effects of COVID-19 Pandemic – Part 2

February 2022

Presenters:

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Environmental Health Unit



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Environmental Health Unit Core Programs

- Food Safety
- Nuisances
- Pest Control
- Tick Bite Prevention
- Fight the Bite Cook County: West Nile Virus and Mosquito Abatement
- Swimming Pools and Spas
- Tanning, Body Art & Piercing
- Water and Sewage
- Lead Risk Assessment and Mitigation



Food Program-COVID Impact

- Changed our focus of inspections to preventing the spread of COVID
- Focused on the critical items of food safety
- Management developed handouts for the inspectors and shared with the towns
- Inspectors reviewed the above handouts with food establishments and gave guidance
- Addressed COVID complaints in food establishments/food manufacturing plants
- Conducted inspections of food manufacturing plants with COVID positive cases
- Guidance to food establishments/food manufacturing plants on how to handle COVID positive employees and environmental procedures
- Have resumed regular inspections and continue to investigate violations of CCDPH Orders



Swimming Facilities-COVID Impact

- Most swimming pools were closed/ceased operation during 2020
- Focused on COVID-related complaints at fitness centers/pools
- Review of residential swimming pool plans increased during COVID;
 - PLAN REVIEWS for 2019 - **22**
 - PLAN REVIEWS for 2020 - **45**
 - PLAN REVIEWS for 2021 - **46**
 - Homeowners were home more often, and construction increased
- Understanding/Disseminating Information from CDC, IDPH, DCEO to Pool Operators to provide instructions for cleaning/sanitizing and stepping up sanitation procedures between guests use
- Increased guidance to Inspectors' inquiries about closing pools when staff or patrons became ill, and isolation was necessary
- Many pools were found operating despite a closure mandated by the Governor, attempted enforcement by inspectors to shut down facilities and notify the State





EHS – COVID Impact On Private Water & Sewage

Program – Activity

Program Impact

Plan reviews and permitting for private sewage disposal (septic), wells, and property renovation proposals



Two-week minimum wait time to start review

Septic, well & Legionella complaint inspections and investigations



Unimpacted

Safe drinking water & non-community public water systems



Delays in following up on IDPH requests, facility compliance notices and reporting.

Septage Hauler Permitting



Inspections unfinished for 2021 cycle



Lead Poisoning Prevention & Healthy Homes – 3 units; 1 goal: eliminating lead exposure in SCC

Nursing



Public Health Nurse case management
Home visits
Developmental assessment
Nutritional assessment
Family education
Patient Advocacy
Social Service and medical referral

Environmental



Home risk assessments
Mitigation notices
Enforcement
CCDPH-funded abatement program
Family education
Assistance with correction of lead paint hazards

Prevention Services



Policy, systems & environmental change
HUD-funded remediation program
Community and provider education
Technical assistance

Education, outreach, and community engagement



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Lead Poisoning Prevention & Healthy Homes

Policy, systems & environmental change

- Early Intervention- lead exposure now criteria for automatic eligibility
- Lead Ordinance for suburban Cook County

HUD-funded remediation program

- First funding cycle = approx. 90 units remediated
- Application submitted for second round of funding

Community and provider education

- Website resources, in-office education, video tutorials

Technical assistance and data

- Community lead action plans; consolidated plan assistance; grant support

Radon testing program and energy efficiency referrals



Lead Fact Sheet

What is Lead?
Lead is a poisonous metal that our bodies can't use. It was used in paint before it was banned in the United States in 1978. Homes built before 1978 contain lead-based paint. Children under the age of 6 are at greatest risk for lead poisoning.
Lead is mostly found in:

- Dust that is created when home surfaces are scraped, sanded or rubbed together. Paint chips and dust that contain lead can gather on surfaces and objects that people touch or children put in their mouths.
- Ethnic home (folk) remedies like azarcon and pay-loo-ah; and cosmetics, such as kohl, kajal and surma.
- Imported candies and spices.

Children under 6 are at greatest risk for lead poisoning.

How does a child become lead poisoned?
Children become lead poisoned by:

- Eating lead paint chips and soil.
- Chewing on toys or furniture covered in lead paint.
- Eating food prepared in imported pottery.
- Breathing in lead-contaminated dust.

How can I find out if my child is lead poisoned?
The only way to know if your child is lead poisoned is by getting a blood test. Signs of lead poisoning are hard to see, but lead is harmful and can cause:

- Lowered IQ and learning problems.
- Trouble concentrating and behavioral problems.
- Anemia (a disease caused by low iron levels), which can result in tiredness, shortness of breath, and difficulty paying attention.

For more information:
www.cookcountypublichealth.org

Lead Program-COVID Impact

- As of July 2020, the Lead Risk Assessors (LRA) returned to providing lead hazard assessments of homes of lead exposed/poisoned children and pregnant women.
- CCDPH's lead-in-paint hazard reduction work with our contracted Lead Abatement Contractors have resumed on homes that are income-qualified for a CCDPH Local Grant or a HUD Grant.
- LRAs continue to consult with parents and guardians of elevated blood lead (EBL) children and pregnant women
 - provide educational materials
 - complete paperwork
 - consult and advise property owners
 - work with contracted Lead Abatement Contractors on grant-approved homes,
 - conduct follow-up inspections and conduct clearance inspections



CCDPH Worker Protection Program – COVID-19

Education

- Educating employers and workers of their rights, responsibilities, and best practices for reducing transmission of COVID-19 to promote healthy and safe workplaces.

Reporting

- Assuring workers have a safe, confidential way of reporting violations to identify noncompliant employers. Confidential and secure.

Compliance

- Supporting employers and workers to comply with recommendations and requirements to reduce COVID-19 transmission.



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Workplace Violations

- CCDPH Environmental Health Services Unit responds to reports of violations
- Extensive relationships with municipalities, retail food establishments & other sites
 - License and inspect all retail food facilities in unincorporated Cook County
 - Intergovernmental Agreements with 29 suburban municipalities to inspect their retail food facilities
 - Responsible for inspecting other workplaces and facilities such as swimming pools, tattoo parlors, tanning salons and other venues
- Expertise and experience with investigating complaints including outbreaks of foodborne illnesses and “nuisance” complaints and providing technical assistance and enforcement

Orders Enforcement

- Prioritized COVID-related complaints (Masking; Vaccination and Testing requirements)
- Referred to local municipality or handled directly by CCDPH staff
- Most complaints resolved by providing guidance and/or informing of current Mitigation Order
- Further administrative action taken on a case-by-case basis
- COVID mitigation violations received and responded to for the months of November 2021 and December 2021: **58**
- COVID mitigation violations received and responded to since newest Order Jan 3: **32**



Communicable Diseases Prevention and Control



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The CD Control and Prevention Unit is comprised of Six programs + One (Contact Tracing Initiative):

1. General Communicable Diseases (e.g., gastro-intestinal illnesses, rabies)
2. Vaccine-Preventable Diseases (e.g., measles, mumps, pertussis)
3. Sexual Transmitted Infections (STI)/HIV Surveillance and Prevention (e.g., chlamydia, gonorrhea, syphilis, HIV)
4. Tuberculosis Surveillance and Prevention
5. Infection Prevention (e.g., carbapenem-resistant Enterobacteriaceae [CRE], healthcare-associated infections)
6. Enhanced Surveillance (e.g., syndromic surveillance)
7. Contact Tracing Initiative (CTI) (COVID-19 case investigation & contact tracing)

From the Beginning of the Pandemic

- Second known case in the USA in suburban Cook County – Jan 2020, extensive hospital-based investigation
- Spread into community, CD Unit leveraged existing staff; n=25
- First group of tracers brought on in November 2020
 - Usual non-COVID case load: 5,000 investigations
 - COVID-19: Until tracers brought on investigated 76K cases= ~15x higher volume than usual
 - To date: **428K+ cases in suburban Cook County investigated**
- Most CD line staff rotated off CTI investigation duties March 1, 2021
- Majority of CTI staff onboarded by this time
- Senior CD staff continue work on facility-specific outbreaks and assist with school guidance

Communicable Diseases-COVID Impact

Case investigation on non-COVID-19 continued, but...

- Lockdown to present → STI Fieldwork done from desks
- STIs, Tuberculosis, others reduced: pandemic-related delays in health-care seeking, diagnoses
- Long-term care facilities not focused on other chronic infections and C. auris—all COVID-19
- There are likely to be “rebounds” in case loads across all 6 programs as pandemic winds down

Communicable Diseases-COVID Impact (cont.)

- Prevention initiatives begun in 2019 still on hold; planned collaborations still on hold. Hope to re-boot STI initiatives
- Regular surveillance reports production was off cycle – working to catch up; still missing final data files from IDPH for STIs for 2020+2021
- Human Resources pushed through several positions for CD in 2020+2021, but not complete; still trying to post and fill positions, some as far back as 2018



Contact Tracing Changes for 2022

- Illinois Department of Public Health has centralized case investigation and contact tracing as of mid-January 2022
- With limited exceptions, all cases go to IDPH Surge Center
- All cases receive automated SMS from IDPH; cases can opt into investigation and cases advised to self-notify contacts
- CCDPH continues to investigate congregate settings, clusters, school issues
- CTI staff continue to support community engagement activities
- Changes to CTI staffing were planned in advance of CTI changes by IDPH and are moving forward by HR/Labor/AFSCME
- **This change will be the beginning of CD Unit returning to (new) normal operations toward the end of 2022**



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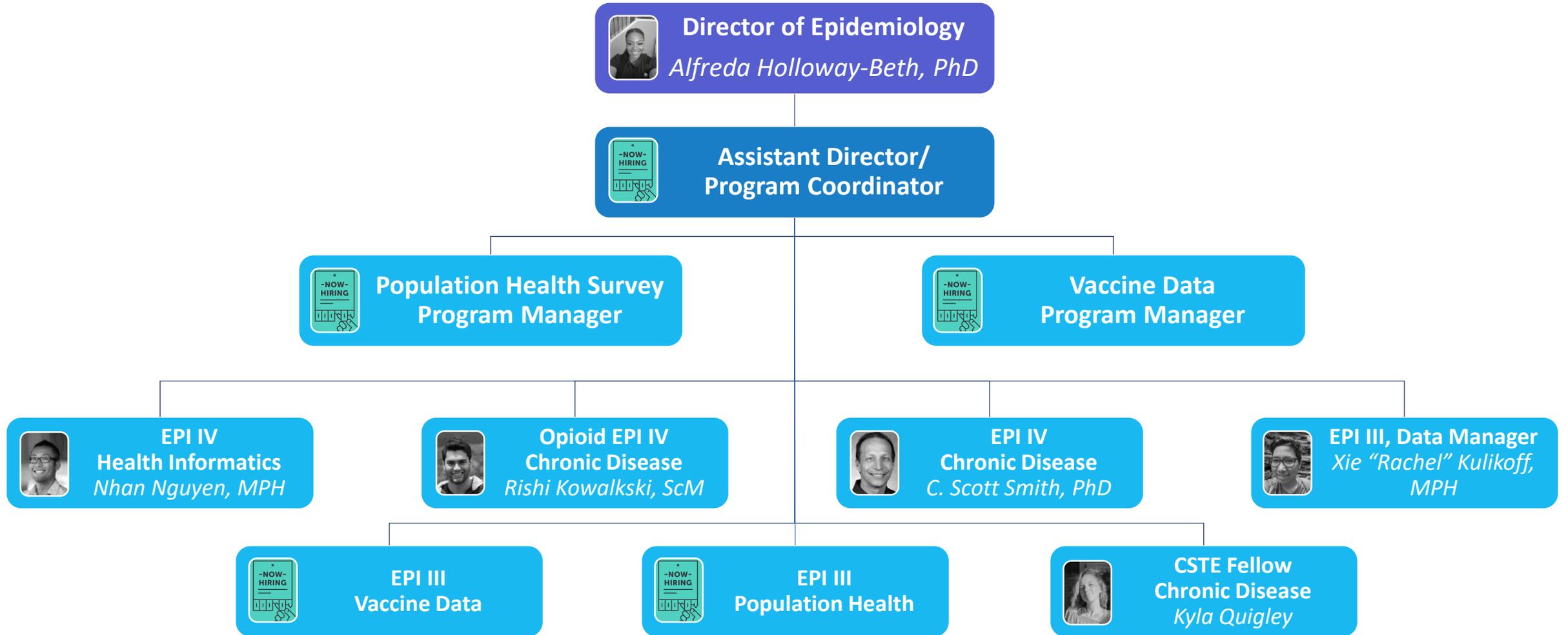
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Epidemiology



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The Epidemiology Unit | Organizational Chart



The Epidemiology Unit | Principal Functions

- ***Compiles and evaluates secondary data*** such as population, housing, vital statistics, hospitalization, risk factor and other relevant public health-related data;
- ***Designs and implements primary data collection instruments*** such as health surveys to gather timely information on behavioral health risk and disease prevalence among youths and adults;
- ***Analyzes data to identify geographic patterns, health inequities, disparities in public health outcomes and care provision*** within and across the CCDPH jurisdiction;
- ***Develops and maintains datasets, reports, interactive dashboards and other information*** for the purpose of sharing and communicating needed public health information; and
- ***Continually seeks opportunities to learn, innovate and grow*** by collaborating with other Cook County, CCDPH units and staff as well as external community-based organizations and research institutions to carry out high-impact projects.



The Epidemiology Unit | COVID-19

Data Collection and Evaluation

Estimated counts of population subgroups in CCDPH jurisdiction for phased rollout of COVID-19 vaccine.

Developed a system for processing and harmonizing COVID-19 vaccination data by CCDPH provider across data sources.

Updated CDC's Social Vulnerability Index using latest data to help identify CCDPH communities at risk of experiencing COVID-19 burden.

Using a series of indicators, identified 32 communities in CCDPH's jurisdiction to prioritize COVID-19 vaccination outreach efforts.

Data Analysis and Communication

Developed internal dashboard for exploring COVID-19 vaccine inventory and allocation by provider and CCDPH community.

Designed COVID-19 vaccine management dashboard for identifying the inventory and geographic distribution of vaccines by provider.

Designed and maintained dashboard to inform and summarize CCDPH's COVID-19 mobile, hyper-local vaccine strategy.

Developed reports concerning the: (1) potential impact of seasonal populations on COVID-19 vaccination strategy; and (2) vaccine equity.

