

Cook County Department of Public Health: Second Quarter Report to the Cook County Board in their capacity as the Board of Health of Cook County

June 5, 2018





CCDPH Nursing and Integrated Health Support Services (IHSS)





Integrated Health Support Services (IHSS) Department Goal

- To inform, educate and empower people about their health care and concerns
- To refer those without a primary physician, to a primary medical home
- Provide additional referral resources and support for the infant and family





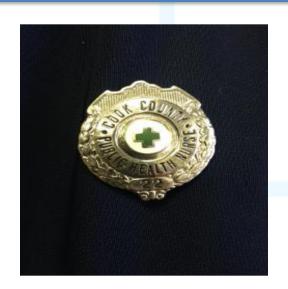






IHSS Programs









IHSS Department's 5 programs

- High Risk Infant (HRIF)Adverse Pregnancy Outcomes Reporting System (APORS)
- Genetic (New Born Hearing Screening, Hepatitis B)
- Breast & Cervical Cancer Program (BCCP)
- Vision and Hearing Screening
- Tuberculosis (TB)







High Risk Infant (HRIF) Adverse Pregnancy Outcomes Reporting System (APORS)







APORS: A state funded infant follow-up program

Purpose: to minimize disability in high risk infants by identifying as early as possible conditions requiring further evaluation, diagnosis, and treatment and by assuring an environment that will promote optimal growth and development.

How:

- APORS collects information on Illinois infants born with birth defects or other abnormal conditions.
- APORS Birth Defects Registry looks for health problems among all babies in Illinois.



Why is APORS Important?

- Impact of birth defects in the state.
- Birth defects increasing/decreasing over time.
- Investigate cause/risk factors
- Education and Prevention
- Planning and evaluation
- Referral
- Public Health Policy/policymakers .



Eligibility

- Cook County resident
- No income eligibility
- Birth defect/congenital anomaly

APORS Criteria:

- Born at less than 31 weeks gestational age
- Infant was part of a triplet, or higher birth
- Positive drug toxicity diagnosis, signs/symptoms, or mother admits to drug use during pregnancy
- Diagnosed with a congenital anomaly; a serious birth defect
- See Attachments



- 1 in 23 babies born daily in Illinois has a major birth defect
- 3 per day will die before their first birthday



Leading Causes of Infant Mortality

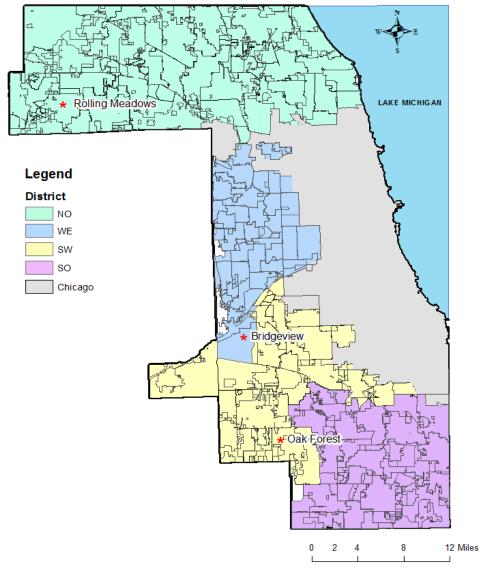
Infant deaths and mortality rates for the top 4 leading causes of death for African Americans, 2014. (Rates per 100,000 live births)										
Cause of Death (By rank)	# African American Deaths	African American Death Rate	#Non- Hispanic White Deaths	Non- Hispanic White Death Rate	African American/ Non- Hispanic White Ratio					
(1) Low-Birthweight	1,611	251.5	2,342	77.6	3.2					
(2) Congenital malformations	931	145.3	3,556	117.8	1.2					
(3) Maternal Complications	566	88.4	912	30.2	2.9					
(4) Sudden infant death syndrome (SIDS)	474	74.0	997	33.0	2.2					

Leading Causes of Infant Mortality

Source: CDC, 2016. Deaths: Final Data for 2014. Table 21...

https://www.cdc.gov/nchs/data/nvsr/nvsr65/nvsr65_04.pdf. [PDF | 5.42 MB]

Cook County Department of Public Health APORS Coverage





Birth 2016: Infant Mortality According to Mother's District of Residence and Race/Ethnicity

Birth 2016: Section 6, Infant Mortality, Table 1.2, Infant Mortality According to Mother's District of Residence and Race/Ethnicity

Race/Ethnicity of Mother	Suburban Cook County		CCDPH Jurisdiction		North		West		Southwest			South						
	Total	#	Rate	Total	#	Rate	Total	#	Rate	Total	#	Rate	Total	#	Rate	Total	#	Rate
Hispanic	7,399	57	7.7	6,974	55	7.9	2,156	17	-	3,072	28	9.1	850	*	-	896	6	6.7
NH White	12,308	65	5.3	11,031	58	5.3	5,443	32	5.9	1,892	7	-	2,625	15	-	1,071	*	-
NH Black	4,938	68	13.8	4,582	67	14.6	333	9	-	734	15	-	503	*	-	3,012	41	13.6
Asian/PI	3,071	11	-	2,695	9	-	2,275	7	-	183	0	-	158	0	0.0	79	*	-
Total	28,497	201	7.1	25,957	189	7.3	10,514	65	6.2	6,056	50	8.3	4,243	21	4.9	5,144	53	10.3

^{*} Counts suppressed for events between 1 and 4

Source: Illinois Department of Public Health (IDPH) Birth File, 2016

Infant mortality rate: number of deaths of infants less than one year old per 1,000 live births.



⁻ Rates not calculated for events less than 20

What is the Process?

Hospitals complete an APORS Infant Discharge Record (IDR)

Illinois Department of Public Health (IDPH)

Local Health Departments



APORS STAFF

- Twenty-four (23) Public Health Nurse 1
- Three (3) Supervisors
- Seven (7) support staff
- 4 District Areas
 North District/Rolling Meadow
 West/Bridgeview
 Southwest District/Bridgeview
 South District/Oak Forest



APORS CASELOAD/REFERRALS

FY16

Referrals: 2,172

85% Activated in 14 days

Total Avg. Monthly Caseload for 4 districts: 1,472

FY17

Referrals: 2,112

80% Activated in 14 days

Total Avg. Monthly Caseload for 4 districts: 1,336

FY 18 – to date

Referrals: 493

81% Activated in 14 days

Total Avg. Monthly Caseload for 4 districts: 1,189



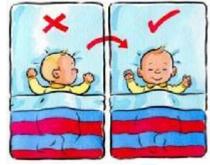
Public Health Role in APORS

- Bridge the gap between the hospital and home
- Home visits at 2,4,6,12,18, & 24 months
- Monitor and reinforce immunizations
- Communicate with Primary Care Providers
- Refer clients to Stroger and County Care
- Conduct assessment/screenings (Physical, Developmental, Perinatal Depression and Sleeping Arrangements)



Public Health Role in APORS

Safe Sleep for Your Baby



- Sudden Infant Death Syndrome (SIDS)
 When a baby 12 months or younger dies during sleep with no warning signs or a clear reason.
- Provide bereavement support



Other Public Health Role in APORS

- Educate

 Infant care
 Nutrition
 Refer to Women Infant and Children (WIC)
- Referrals for evaluation and treatment Early Intervention (EI) Illinois Division of Specialized Care for Children (DSCC)
- Mentor Student Nurses & Preventive Medicine Residents



Other Public Health Role in APORS

Collaboration

- Communicable Disease Department, support response;
 Measles outbreak
 Ebola Virus
 Influenza Virus H1N1
- Environmental Health Services (EHS) –Lead Program;
 Joint visits with the Lead inspectors
 Lead level monitoring.
- Emergency Preparedness and Response Unit (EPRU)
 Annual EPRU drills (flu clinic)



Future Directions

- Forge new strategic partnerships
- Expand leadership development opportunities
- Expand the evidence base for public health nursing practice





