CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center 1776 E. Washington Urbana, IL 61802 Phone: (217) 384-3772 Fax: (217) 384-3896

Champaign County Board of Health Special Meeting

Tuesday, May 12, 2009 6:00 p.m. Jennifer K. Putman Meeting Room Brookens Administrative Center, 1776 E. Washington Urbana, Illinois

AGENDA

ITEM		PAGE NO.
A .	Call to Order	<u></u>
В.	Roll Call	
C.	Approval of Agenda/Addendum	
D.	Public Participation	
Е.	Senior Wellness Program Contract Renewal for FY2009	1-7
F.	CUPHD Invoice for February 2009	8 .
G.	Election of Officers	
н.	Other Business	

I. Adjournment

The Board of Health will convene a study session directly following adjournment of the special meeting.

RENEWAL OF CONTRACT FOR SENIOR WELLNESS PROGRAM

WHEREAS, the Champaign County Health Department, through its duly authorized agent, the Champaign County Board of Health, hereinafter known as the "Board", and the Champaign County Regional Planning Commission, hereinafter known as "Commission", entered into a Contract for Senior Wellness Program dated October 26, 2007, a copy of which is attached to this Renewal of Contract for Senior Wellness Program and marked as "Exhibit A"; and

WHEREAS, the Champaign County Board has approved its budget for the County's Fiscal Year from December 1, 2008 to November 30, 2009 in which it has included a grant for the cost of the renewal of the Contract for Senior Wellness Program between the Board and the Commission in the amount of \$50,000; and

WHEREAS, the Board believes it is in the best interest of residents served by the Champaign County Health Department that the Contract for Senior Wellness Program should be renewed for the period December 1, 2008 to November 30, 2009, with all of the terms and conditions previously contained in the Contract for Senior Wellness Program attached to this Renewal of Contract for Senior Wellness Program and marked as "Exhibit A, with the following exception:

1. The amount to be paid by Board to Commission for the services outlined in the Contract for Senior Wellness Program shall be paid as follows: (a) December 1, 2008, \$12,500; (b) March 1, 2009, \$12,500; (c) June 1, 2009, \$12,500; (d) September 1, 2009, \$12,500.

WHEREAS, the Board and the Commission agree that the annual contract cost for the renewal of the Contract for Senior Wellness shall be the sum of \$50,000;

The Champaign County Board of Health and Champaign County Regional Planning Commission enter into this Renewal of Contract for Senior Wellness Program for the period December 1, 2008 to November 30, 2009 in the amount of \$50,000, and with the said Renewal to be pursuant to the remaining terms and conditions outlined in this Renewal of Contract for Senior Wellness Program and the attached "Exhibit A", on this _____ day of _____, 2009.

BY:_

JULIAN RAPPAPORT Chair Champaign County Board of Health GERALD SCHWEIGHART Chair Champaign County Regional Planning Commission

ATTEST:

BY:

ATTEST:

Secretary Champaign County Board of Health PRISCILLA LINDSTROM Secretary Champaign County Regional Planning Commission

Prepared by:

Susan W. McGrath Senior Assistant State's Attorney Office of the Champaign County State's Attorney 1776 E. Washington Urbana, IL 61802 217/384-3832

CONTRACT FOR SENIOR WELLNESS PROGRAM

THIS AGREEMENT is entered into this <u>26</u> day of <u>October</u>, 2007 by and between the Champaign County Board of Public Health, hereinafter called the Board of Health, and the Champaign County Regional Planning Commission, hereinafter called the Commission.

WITNESSETH

WHEREAS, the Board of Health desires to engage the Commission to provide a senior wellness program which would provide quality assessment, information, intervention and linkage of health-related services to county residents served by the County's Public Health Department; and

WHEREAS, the Commission has proposed a service model which will combine existing community resources, a new volunteer and paid network of assessment and support staff and a planning/management component to form a comprehensive system of care to maintain safety and independence of seniors in their homes;

NOW THEREFORE the parties do mutually agree as follows:

1. <u>Contract with the Commission:</u> The Board of Health hereby agrees to enter into a contract with the Commission, and the Commission agrees to perform the services set forth in this Contract.

2. <u>Personnel and Compensation</u>: The Commission agrees that it will secure at its own expense all personnel required in performing the services under this contract. The Board of Health Department shall pay to the Commission the sum of \$50,000, with the said sum to be paid as follows during the term of this Contract:

December 1, 2007	\$12,500.00
February 1, 2007	\$12,500.00
May 1, 2007	\$12,500.00
August 1, 2007	\$12,500.00

The Commission is an independent Contractor, and the Board of Health shall not withhold taxes, Social Security payments, or unemployment payments from any sum paid to the Commission under this Contract.

4. <u>Scope of Services:</u> The parties agree that the Scope of Services to be performed by the Commission pursuant to this Contract are contained in Exhibit A attached to this Contract.

5. <u>Changes:</u> The Board of Health may, from time to time, request changes in the scope of



the services of the Commission to be performed hereunder. Such changes, including any increase or decrease in the amount of the Commission compensation, which are mutually agreed upon by and between the Board and the Commission, shall be incorporated through written amendments to this Contract.

6. <u>Contract Term</u>: This contract shall commence December 1, 2007 and shall continue through and including November 30, 2008.

7. <u>Professional Certifications.</u> The Commission shall be responsible for obtaining, maintaining and monitoring all professional certifications necessary for its employees to perform this Contract, and ensuring volunteers providing services through this Agreement have the necessary professional certifications for the services to be provided, whether the said certifications are required by statute, or by any funding source. The failure of the Commission to perform this responsibility shall be considered a material breach in the performance of this Contract, and the Board of Health shall be entitled to immediately terminate this Contract because of the said breach.

8. <u>Risk of Harm.</u> The Commission and the Board of Health agree that in the event the Commission, its agents, or its assigns cause any risk of imminent serious bodily harm to any recipient of services under this Agreement, whether by act or omission, this shall be considered to be a breach of the Contract, and the Department shall be entitled to immediately terminate this Contract because of the said breach.

9. <u>Specific Performance</u>. The Commission and the Board of Health agree that in the event either party shall fail to fulfill any of their respective obligations pursuant to this Contract, the other party may bring an action to enforce specific performance of all obligations, which said remedy, however, shall not exclude the availability of any other remedy the law permits.

10. **Breach of Contract.** The Commission and the Board of Health agree that if either party shall fail to fulfill any of their respective obligations pursuant to this Contract, the other party shall provide ten (10) days written notice of the said breach to the other party. If the breach is not remedied within ten (10) days after the notice is received by the breaching party, then the non-breaching party may declare the Contract terminated. Upon Contract termination, the Commission shall cease delivering services as outlined in the Agreement, with the exception that the Commission must provide appropriate referrals to the clients receiving services at the time of Contract termination, and the Board of Health shall cease all future payments to the Commission as outlined in the Contract, with neither party waiving any other remedy the law permits.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be executed by its officers as of the date first written above.

BY: JULIAN RAPPAHORT

Chair Champaign County Board of Health

ATTEST:

SUSAN MAURER Secretary Champaign County Board of Health

BY: DICK HELTON

Chair Champaign County Regional Planning Commission

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PRISCILLA LÍNDSTROM Secretary Champaign County Regional Planning Commission

. . . CCRPC Proposal

EXHIBIT A

Model for Alternative Public Health Services for Senior Wellness

This model for a Senior Wellness Program would provide quality assessment, information, intervention and linkage of health-related services to county residents served by the county's public health department. CCRPC proposes to add an additional staff person to our existing Senior Services team to focus on positive outcomes for consumers served by the Champaign County Public Health Department. The model will combine existing community resources, a new volunteer and paid network of assessment and support staff and a planning/management component to form a comprehensive system of care to maintain safety and independence of seniors in their homes.

* These activities have an existing structure in place through CCRPC-Senior Services. Items not starred do not have an existing structure in place at CCRPC; however, some elements are available either through CCRPC or other community agencies that can be leveraged to meet program goals.

* Analysis of senior population characteristics/define target sub-population(s) Number/location of seniors

Demographics (age, race, gender, lives alone, language, ethnicity, health status, income/assets, etc.)

Data collected/analyzed by CCRPC staff

Target populations/desired outcomes defined by board (i.e., number/type of consumers served, consumer outcomes, program outcomes)

 * Assessment/Intervention (township supervisors, parish nurses, etc.; coordinated by CCRPC case managers) Consumer Engagement (mobilize resources/strengths; identify gaps/needs) Family Engagement (mobilize resources/strengths; identify gaps/needs) Community Engagement (inventory community resources; facilitate information & referral; advocate; gaps/needs)

Individual assessments done on as-referred basis by CCRPC Referral to case manager (CMU, MHC, PC, FS, etc.) or case management by CCRPC Resources identified in *Senior Guide*/I&R materials updated by CCRPC Assistance w/obtaining public benefits by CCRPC

* Feedback/Evaluation

Follow-up call/visit by CCRPC Stakeholder satisfaction surveys Best practices (effectiveness; efficiency)

Annual review of assessment summary information regarding identified resources/gaps by Board of Health Annual review/analysis of satisfaction surveys from consumers, families, referral agencies by Board of Health Annual cost/benefit ańalysis by Board of Health

Annual search for best practices by Board of Health

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CCRPC Proposal

New Service Development

Volunteer/neighborhood mobilization (Neighborhood Watch, Friends of Senior Services, C-U Volunteer, empty tomb, CC Health Care Consumers, etc.) Friends System/agency building (CCRPC, CCMHB, UW, etc.) Leverage public health funding (CCMHB, ECIAAA, Frances Nelson, etc.) New funding/grantwriting (CCRPC, etc.)

An estimated budget of \$50,000 will cover staff time for 1 FTE, fringe benefits, mileage reimbursement, and supplies for planning and start-up of the model proposed, using a combination of paid and volunteer resources to extend a net of services that will cover the department's service area and link with CUPHD as needed. The Board of Health's goal is ultimately to have this staff person spend 30% of his or her time in the field. CCRPC will contribute in-kind management and office support. Evaluation at 3 months, 6 months, 9 months, and one year will guide continuing progress toward this and other goals established by the Board of Health.

Potential issues:

Key emphasis on best access to/use of existing resources to obtain maximum benefits for consumers Ongoing challenges with recruiting, training, supervising, retaining volunteers Defining the roles for volunteers/paid personnel

Outlining the county's public health department's role to provide direct services to meet identified needs Need to establish limits on caseloads/caps per consumer

Confidentiality of consumer issues

Liability issues

Invoice Number:	0903
Date of Invoice: Billing Period:	March 30, 2009
Billing Period:	February-09

To:

Champaign County Public Health Department Att'n.: Evelyn Boatz 1776 East Washington Street Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - Infectious Disease Prevention & Mgmt	\$ 6,436.00
533.07 Professional Services - Maternal Child Health Mgmt	\$ 3,127.58
533.07 Professional Services - IBCCP & Clinical Services	\$ 2,053.58
533.07 Professional Services - Environmental Health	\$ 26,635.58
533.07 Professional Services - Administration	\$ 7,303.58
533.07 Professional Services - Bio-T Grant	\$ 4,914.06
533.07 Professional Services - TFC Grant	\$ 2,062.50
533.07 Professional Services - West Nile Virus Grant	\$ 886.96
533.07 Professional Services - Non-Community Water - CU Surveys	\$ -
Total Amount Due to CUPHD per Contract	\$ 53,419.84

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.

Tupe MEL Authorized Agency Official