



CHAC Meeting
Berwyn Public Library,
2701 S. Harlem Ave, Berwyn, IL

Committee Members Present: Yvette Alexander-Maxie (American Red Cross); Susan Brady (Community Member- North); Mike Charley (Oak Park Health Dept); Lena Hatchett (Loyola University); Diane Logsdon (Logsdon Consultation Services); Jessica Madrigal (Community Member); Terry Mason (CCDPH); James McCalister (Village of Arlington Heights); Rebecca Medina (West 40 Intermediate Service Center); Dolores Nobles-Knight (Community Member); Brielle Osting (EverThrive IL); Mary Passaglia (Northwest Municipal Conference/Health Directors); Evonda Thomas-Smith (Evanston Health and Human Services Department); Griselle Torres (UIC-SPH); Steve Weiler (Forest Park Police Department)

Committee Members Absent: Catherine Counard (Village of Skokie); Nancy Dawkins (Grand Prairie Services); Christopher Grunow (Stickney Public Health District); Amanda Kelley (American Heart Association); Mark Klaisner (West 40 ISC); Wendell Mosby (Prairie State Community College); Maria Oquendo-Scharneck (AgeOptions); Ranjana Paintal (Asian Health Coalition); Heidy Persaud (CMAP); Betsy Rogers for Armando Smith (Housing Forward); Kathy Sanabria (IL Chapter American Academy of Pediatrics); Itedal Shalabi (Arab American Family Services); Ronald Sherman (Community Member - West); Apostle Carl White (Southland Ministerial Health Network)

CCDPH Staff Present: Demian Christiansen, LaToya DuBose, Deanna Durica, Mabel Frias, Kiran Joshi, Rachel Rubin, Steven Seweryn, Valerie Webb

AGENDA

I. Call to Order/Introductions

Dr. Terry Mason, CHAC Co-Chair, called the meeting to order at 10:10 and asked for introductions of participants.

II. Public Comment

There was no public comment provided.

III. Items for Discussion

A. Gun Violence in Suburban Cook County/Chicago – Panel Discussion and Q&A

A panel of three presenters spoke on current firearm/ gun violence in Cook County and the impact on public health

- Dr. Maryann Mason, IL Violent Death Registry, Lurie Children's Hospital, spoke on data from the Illinois Violent Death Reporting System: Firearm Deaths in Cook County, Illinois, 2005, 2010, 2015, including:
 - Chicago firearm deaths are increasing while suburban deaths remained stable.



- Chicago deaths are primarily from homicide while in suburban Cook County (SCC) deaths are from suicide and homicide.
- Deaths are similar in Chicago/SCC by gender (~90% male).
- By age, deaths in SCC trend older (75+/55-64y), likely related to suicide. Deaths in Chicago trend younger (20-24y).
- By race/ethnicity, deaths are primarily in Black and Hispanic populations in Chicago. In SCC, deaths from suicide are highest in Whites.
- Dr. Steven Seweryn, Cook County Department of Public Health, presented on firearm injury and emergency department admissions data as gathered through CCDPH's ESSENCE program, the only IL syndromic surveillance system. He presented data and trends on emergency room (ED) admissions for gunshot/firearms from ESSENCE, identified temporal trends in firearm ED data and examined demographic and place distribution of cases, including:
 - Firearm injury – primarily in males, 20-29 yrs.
 - In SCC, communities/ZIP Codes with the most injury/ED admissions are in the west/south suburbs.
 - Chicago/SCC ratio of firearm admission = 5.7:1.
 - Increasing trend of ED firearm admissions since 2014.
 - 2016 midyear data:
 - Chicago resident admissions at 70% of 2015.
 - SCC resident admissions at 61% of 2015.
- Dr. Kimberly Joseph, Trauma physician at Stroger Hospital, reflected on her experience this year in three parts: deaths; survivor trends and emotional impact of violence on the victim and their support system.
 - There has been a 30% increase in firearm injuries this year at Stroger's Trauma unit and will probably reach 1000 victims of which the majority will survive.
 - Trauma care has improved and surviving with crippling injuries is more common; medical conditions are often complicated and long term, requiring follow up and additional surgeries. Often, the pain for survivors is severe and chronic and some pain meds aren't available leading to patients self-medicating with street drugs.
 - Emotional and psychological impact of a firearm injury often affects both survivors and their families. Support systems and programs are critical.
 - Healing Hurt People Chicago is one program that supports adolescents who have experienced violence and injury and provides a wrap-around system of support, and the work of Chicagoan Carl Bell focuses on building resiliency, providing wrap around services, getting children back in school.

Following the presentations, a discussion included the following points:

- Dr. Maryann Mason stated that there are statutory limitations on physicians in most states to ask about the presence of guns in a home. In IL, physicians can ask about firearms. These restriction should be lifted.
- Schools (school nurses) should be involved when there is a transition of a child back to school. Exposure to violence affects behavior and physical health into adulthood.
 - Lurie Children's Hospital provides training and support to school social workers and school nurses on building childhood resilience and addressing bullying.



- Dr. Terry Mason asked participants to consider the question of “why” violence is occurring.
 - Media and violence: example of Chief Keef (Keith Cozart), young popular hip hop artist from Chicago writes songs and produces videos about violence/drugs funded and promoted by record companies.
 - Attitudes on race: Black or White: Kids on Race (CNN) reported on bias toward lighter skin; Black girls picked White dolls because Black dolls are “bad.”
- Dr. Terry Mason requested that we look more closely at reasons/causes for higher rates of SCC suicides especially older White males in N suburbs.

B. Zika Virus - Presentation and discussion

Mabel Frias, Cook County Department of Public Health, updated CHAC members on the Zika virus. A summary of key points follows:

- Zika symptoms are similar to those of many other diseases including dengue and chikungunya and may have occurred prior to May 2015 when first identified in Brazil.
- The mosquito that carries Zika cannot survive the IL winters. The mosquito is found in warmer states and countries.
- Risk factors:
 - Anyone who lives in or travels to an area where Zika virus is found and has not already been infected with Zika virus can get it from mosquito bites.
 - Zika can be passed through sex from a person who has Zika to his or her partners.
 - All age groups affected.
 - Adults more likely to present for medical care.
 - No severe disease, hospitalizations, or deaths.
- Prevention is key, as there is no vaccine or medication to prevent infection or disease.
 - Several vaccine candidates; phase I trials to begin shortly.
 - Primary prevention measure is to reduce mosquito exposure.
 - Pregnant women should consider postponing travel to areas with ongoing Zika virus outbreaks.
 - Protect infected people from mosquito exposure during first week of illness to prevent further transmission.
 - Personal preparedness measures include:
 - Wear long sleeves and long pants.
 - Use insect repellent with DEET, picaridin, IR3535, oil of lemon eucalyptus, or p- Menthane-3,8-diol.
 - Get rid of standing water around your home.
 - Make sure doors and windows have tightly fitting screens and repair any tears.
 - Keep weeds and grass cut short and keep gutters clean and free of debris.
- CCDPH’s/public health department’s role:
 - Communicating to the public and health care providers.
 - Providing guidance around and facilitating testing, in coordination with IDPH, CDC.
 - Monitoring cases, if present.
 - Facilitating collection and transmission of data to the US Zika Pregnancy Registry.
 - Communicating with area mosquito abatement districts regarding mosquito surveillance and control.



IV. Approval of Minutes – July 11, 2016

Minutes were reviewed by members and a motion to approve the July minutes was introduced by James McCalister, seconded by Steve Weiler, and approved by the members with no abstentions.

V. CCDPH Updates

A. COO Report – Dr. Terry Mason reported on the following:

1. Operations update – budget, hiring -
 - An update of CCDPH Hiring Report was distributed that continues to show 44 open positions.
 - Impact 2020: CCHHS Strategic Plan is completed and CCDPH is involved in several aspects (Lead poisoning prevention, chronic disease prevention, epidemiology) of the long and short term objectives to improve health outcomes. The document is available at:
http://www.cookcountyhhs.org/wp-content/uploads/2011/12/CCHHS_Strategic_Plan_071516.pdf
2. Food Summit recap: The Summit was held on September 30 and October 1st with national speakers, break out groups, and networking opportunities advocating for the right nutrition to build and sustain healthier communities.
3. WePLAN and Health Impact Collaborative of Cook County update: The WePLAN2020 completed report will be presented at end of October to CCHHS Board for approval and in December to Board of Health/Cook County Commissioners.

VI. New Business

A. Meeting dates for 2017 were presented:

Monday, January 9; Monday, April 10; Monday, July 10; Monday, October 2

B. Diane Logsdon distributed a fact sheet on the Emergency Preparedness Rule for Medicare and Medicaid Providers with a discussion following. CMS providers and suppliers need to file an Emergency Operations Plan by November 15, 2017 to be accredited. Many providers are not resourced at this time to complete what is required.

VII. Adjourn

A. Meeting was adjourned at noon by motion from Evonda Thomas-Smith and seconded by Griselle Torres; all voted in favor.