
COOK COUNTY
DEPARTMENT OF
PUBLIC HEALTH

• The Ten Essential Public Health Services

Keys to a
Healthy Community
1998 Annual Report



Cook County Bureau of Health Services



WHO WE ARE



The Cook County Department of Public Health (CCDPH) is the state certified public health agency for suburban Cook County exclusive of the cities of Evanston, Skokie and Oak Park, and Stickney Township where state certified public health departments are operated by the local unit of government. CCDPH serves the people of its jurisdiction from four district offices, as well as many community mobile sites. CCDPH is one of six institutions that make up the Cook County Bureau of Health Services. As the third largest public health system in the country, the Bureau provides a broad range of services from prevention and primary care to emergency, inpatient and long-term care.

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Mission Statement:

*To protect and promote health,
and to prevent illness,
disability and
premature death among all
residents of suburban
Cook County.*



FROM OUR LEADERS



As the public health department of the Cook County Bureau of Health Services, the Cook County Department of Public Health plays a major role in providing public health services to the residents of suburban Cook County. We remain steadfast in our mission to deliver support, education and disease prevention programs to keep our communities healthy and safe.

Public Health professionals frequently refer to the ten "essential public health services" when describing how to best meet the health needs of the community. This "Top 10" list, developed in 1994 by a consortium of state and national public health organizations, grew out of a need to better communicate the scope and importance of public health policy to the general public and legislators.

On the following pages of our Bureau's Cook County Department of Public Health 1998 Annual Report, you will discover how these ten essential services have been developed and implemented to ensure a healthier community. These services are "key" to improving and protecting the health of over two million residents.

Our sincere appreciation to the Cook County Department of Public Health staff and community partners for their dedication to meeting the needs of those we serve. We have accomplished much this year and look forward to future success as we continue our work together.

*John H. Stroger, Jr., President
Cook County Board of Commissioners*



*Ruth M. Rothstein, Chief
Cook County Bureau of Health Services*



*Karen L. Scott, MD, MPH, Director
Cook County Department of Public Health*





1. MONITOR STATUS TO IDENTIFY COMMUNITY HEALTH PROBLEMS

Identifying health threats in the community begins with collecting and analyzing information.

Improving a community's health begins with having the resources to collect and analyze data. To assure this, CCDPH established an **Epidemiology and Data Development Unit** in 1998. The unit is responsible for examining trends in health events such as births, deaths and illnesses as well as utilization of agency services. In preparation for the department's state recertification process, a **Community Health Report Card** has been developed. Using the *Report Card*, residents of suburban Cook County get a quick overview of the health of their community and can easier identify which health conditions are occurring at above or below desirable levels.



Community Health Report Card	
births ✓	deaths ✓
illness ✓	poverty ✓

Joseph's Story...

*Of the over 400 suburban children reported to CCDPH in 1998 with lead poisoning, most were poor, minority or living in older housing. When Joseph came in for his pre-school Head Start physical examination, a blood lead test was done. Joseph's blood lead level was elevated above the acceptable range and he was diagnosed with lead poisoning. The doctor explained to the family the causes, treatment and prevention of further exposure. As part of Joseph's recovery, the family received assistance from their health department. A computer program called **STELLAR** (Systematic Tracking of Elevated Lead Levels and Remediation) kept track of the details of Joseph's treatment, tests and referrals to other needed services.*





2. DIAGNOSE AND INVESTIGATE HEALTH PROBLEMS



Identifying and analyzing disease outbreaks and patterns of illness and injury is second nature to our experienced public health staff.

The **Communicable Disease Control Unit** at CCDPH, along with the **Environmental Health Unit**, coordinated the investigation of the largest Enterotoxigenic E. coli outbreak to date in the United States. The outbreak sickened over 5,000 people during the late spring of 1998. Assisted by state and federal disease specialists, CCDPH staff from every service unit sprang into action to locate the source of the outbreak and document the cases of illness. Working countless extra hours, dedicated Communicable Disease Control staff conducted thorough interviews in an effort to ascertain the cause of the illness. Environmental inspectors investigated every possible source, including food and water samples, kitchen equipment and food handlers. Each aspect of food preparation was thoroughly evaluated for possible contamination. Through the quick and responsive effort of CCDPH staff, the outbreak was contained and additional cases of illness were prevented.



George Papadopoulos, Program Manager, Environmental Health Services, conducts a restaurant kitchen inspection. A foodborne illness outbreak in the spring of 1998 sickened thousands and created a greater awareness of food safety concerns.



Using an XRF machine, Lead Inspector Cheryl Walls assesses the lead level in paint chips.

*A public health nurse visited Joseph's family to answer any questions about lead poisoning and explain the role of the health department in monitoring Joseph's lead levels. Also, a state licensed lead inspector/risk assessor came to Joseph's home to inspect for lead sources and hazards that might have caused his illness. She examined the painted surfaces of the window sills for chipped paint and looked for teeth marks on painted surfaces as signs of lead paint ingestion. An **XRF** (X-ray fluorescent analyzer) measured lead levels of ceramic pottery, paint chips and writing utensils like crayons and pencils that might have been put in the mouth.*





3. INFORM, EDUCATE AND EMPOWER PEOPLE

Promoting healthy behavior requires working with businesses, schools, churches and community organizations, as well as the media to "get the message out."

In order to effectively serve the residents of suburban Cook County, CCDPH provides a media-friendly environment which offers essential information to the community. A full-time **Communications Director** works with staff to promote health programs, CCDPH initiatives and urgent health alerts. Through phones, faxes, timely stories, press releases and feature articles, CCDPH keeps the "door open" to the media and community.

Be Proud! Be Responsible! is one of the nationally recognized "Programs that Work", designed to assist teens in reducing their risk for HIV/AIDS. CCDPH health educators teach five class sessions in a variety of settings, including high schools, behavioral health centers and community organizations. The interactive curriculum uses games, videos, role-plays and discussions to engage and empower students to protect themselves against HIV. In 1998, CCDPH health educators reached over 1,800 teens with the program. Be Proud! Be Responsible! is one of the most frequently requested programs offered through the **Community/School Health Education Service Unit**.



Students are instructed on reducing their risk of HIV infection by CCDPH health educators.

Joseph's family, like many people, was unaware of the health threat that lead poses to the environment and it's potential effects on children. Even a small amount of lead in a child's body may cause lower IQ, poor reading ability and slowed physical growth. Children can be poisoned by swallowing food, water, soil, dust, or paint chips that contain lead, or by breathing air that contains lead dust or fumes. Homes built before 1978 should be checked for chipping and peeling paint and paint dust around window sills, doorways and woodwork. Indoor clean-up should be done frequently with water, a phosphate cleaning product and disposable paper towels to control the dust. Areas outside the home should also be checked for paint chips.



4. MOBILIZE COMMUNITY PARTNERSHIPS TO IDENTIFY AND SOLVE PROBLEMS

Bringing together local resources to examine and address health challenges assures healthy communities.

In early 1998, the Bellwood Mayor's Task Force along with CCDPH health educators introduced a health promotion model to the community. **CHAN**, the **Community Health Advisor Network**, recruited neighborhood volunteers who were interested in improving and promoting the health status of the community. These "natural helpers" received 30 hours of training in



Community Health Awareness Network graduates in Bellwood provide health and safety information to family, friends and residents.

leadership skills as well as instruction on prevention of alcohol and drug abuse, domestic violence and sexually transmitted diseases. Graduates of the program, called lay health advisors, are uniquely qualified to connect family, friends and neighbors with relevant health information and services.

CCDPH partners with parents and schools to keep our children's smiles healthy. Good dental health is important for overall good health, but accessing dental health care for low-income individuals can be difficult. Seventy percent of the children seen by the **Dental Health Service Unit** had no previous dental care. To address this problem, CCDPH dental professionals travel with portable equipment to schools in our communities to provide preventive dental care, including sealants. A dental sealant is a plastic coating painted onto the chewing surfaces to prevent decay. In 1998, 2,789 children received 14,395 sealants.



The Dental Health Service Unit keeps these children smiling.

*Lead poisoning is as much a housing issue as a medical issue. The partnership grant program, **Get the Lead Out** has improved the chances of safely stabilizing lead in older homes. HUD (Housing and Urban Development), CEDA (Community Economic Development Association) and other agencies work together to make homes lead-stable in the 12 suburban Cook County communities at greatest risk. The CCDPH lead inspector makes all the environmental lead inspections for this partnership. In 1998, twenty-six homes once lead hazardous, are now lead-stable because of the efforts of this program.*



5.

DEVELOP POLICIES AND PLANS



Protecting and promoting community health includes working with government and community leaders to initiate policies and plan programs.

Throughout 1998, CCDPH continued to seek ways to promote health and prevent premature death through the enactment of local and state regulations. Under the guidance of the **Director of Policy Development**, CCDPH staff played a lead role in local efforts to adopt bike helmet safety regulations for children, model tobacco control laws to prevent illegal sales to minors and clean indoor air ordinances to protect employees and patrons from the well known health hazards related to secondhand tobacco smoke.



CCDPH, along with other community representatives, health professionals and elected officials strongly opposed legislation that would have weakened exemptions to the current school immunization requirements. These requirements have been successful in effectively eliminating life-threatening diseases like polio, measles and diphtheria in our children and communities.



Immunizations protect residents against life-threatening diseases.

CCDPH is charged with tracking and monitoring all children in its jurisdiction with lead poisoning. Policies and programs are in place to follow Joseph through the screening, diagnosis, treatment and hazard reduction process. The amount of lead in Joseph's blood was in the moderate range. His next test showed similar results. An environmental investigation was scheduled of Joseph's home to identify the source of the lead. A public health nurse monitored Joseph until his blood lead level was reduced to within acceptable limits.



6.

ENFORCE AND REGULATE



Ensuring that the protections of the law are followed, CCDPH takes decisive action when violations occur.

Reducing youth access to tobacco is a commitment CCDPH has made to the residents of suburban Cook County. By preventing the initiation of cigarette smoking by youth, CCDPH hopes to reduce the leading preventable cause of death. On January 1, 1998, the **Cook County Youth Tobacco Control Ordinance** became effective, regulating tobacco sales in the unincorporated region of the county. CCDPH was given the responsibility for the administration and enforcement of the law, which contains some of the most severe penalties in the country for merchants who sell tobacco to minors. Compliance inspections were conducted by teenage volunteers who attempted to purchase cigarettes from retail vendors. In 1998, CCDPH issued nine 'notices of violation' and suspended one license in unincorporated Cook County. This ordinance was recognized by the American Lung Association, the American Heart Association, the American Cancer Society and the Illinois Coalition Against Tobacco as a model local tobacco control effort.



Teen volunteers helped CCDPH make compliance checks on tobacco merchants in unincorporated Cook County.



Environmental Health Inspector Kamala Nagaraj checks the quality of the water at a suburban high school swimming pool.

Ensuring the safety of the public is the priority of **Environmental Health Services**. With involvement in over a dozen program areas, the Environmental Health Service Unit regulates, and in conjunction with the state's attorney's office, enforces county and state ordinances and laws. A typical day for an environmental health practitioner might include a licensure inspection at one of approximately 800 public swimming pools, a visit to a restaurant involved in an alleged foodborne illness, an evaluation of a private well and sewage disposal system or a compliance check at a tanning parlor. Before licensure decisions are made, or permits are issued, all facilities must meet health and safety standards.

The Childhood Lead Poisoning Prevention Act and the Childhood Lead Poisoning Prevention Code of Illinois requires CCDPH to inspect and identify the source of lead and enforce the law for children up to age six and pregnant women. The results of the lead inspection at Joseph's home identified a moderate risk of lead paint contamination. A certified letter containing the results of the inspection was sent to Joseph's family and a copy to his doctor. Joseph's family was required to sign and return a maintenance plan within two weeks to CCDPH outlining the methods to control lead dust in their household. Non-compliance will be referred to the state's attorney for enforcement.



7.

LINK PEOPLE TO NEEDED SERVICES

CCDPH fills gaps in health care—both preventive and curative—and along with other Bureau affiliates, serves as a safety net to the health care system, enabling residents to access the care they need.

An estimated 350,000 people in suburban Cook County are without insurance coverage for basic health care. CCDPH advocates for partnerships between community health providers and county services. This effort makes health care more accessible and affordable for the uninsured and underinsured. **Vista**, a partnership between CCDPH and Northwest Community Hospital, offers prenatal and delivery services to women in the northern suburbs. CCDPH provides women a family case manager and the services of **WIC** (Women, Infants and Children), furnishing them with food coupons and nutrition information.

Accessibility and convenience was the motivation behind a new venture in the western suburbs between CCDPH and the Ambulatory and Community Health Network of Cook County. Serving clients out of the Maywood office, a **primary care clinic** operates twice weekly, combining primary care and preventive services. Clients who need follow-up treatment are referred to Cook County Hospital outpatient clinics.

Taking health services out to the community, the **Wellness on Wheels** (WOW) van, a 38-foot mobile health clinic, offers clinic services at more than 60 suburban sites. The WOW van, operated in partnership with suburban community agencies, offers physical examinations and routine screening tests such as cholesterol, Pap smears and prostate specific antigen, which can detect prostate cancer. To ensure that the client sees a physician for diagnosis and treatment, a public health nurse follows up on any abnormal health indicators.



Our mobile health clinic, the Wellness on Wheels (WOW) van takes health services out to the community.

Joseph's parents learned how to reduce the negative effect of lead by following several important steps. A child with lead poisoning needs:

- A "medical home" where medications and a doctor's care are provided.*
- Nutritious foods high in iron and calcium. A referral is made to the Women, Infant, and Children (WIC) program where nutrition education and food coupons are available.*
- Mental health services if the child exhibits **pica** behavior by consuming non-food objects.*
- Developmental screening services provided through school districts or 0-3 Special Education Programs.*
- A clean household free of loose paint chips and excessive lead dust.*
- A nurse case manager who will assist in making referrals to needed services and educating families about "**Getting the Lead Out.**"*





8. ASSURE A COMPETENT PUBLIC HEALTHCARE WORKFORCE

Leadership training and continuing education in emerging public health practices is a critical component of providing the public with quality health services.

Here, CCDPH staff share their experiences:

I embarked on my year with the Leadership Institute hoping to rekindle a passion and sense of purpose for the future of public health. I came away with the reaffirmation of my belief that people who work in this field are caring, committed individuals who collectively can and do have a tremendous impact." *Karen Lewandowski, RN, MS, CCDPH Deputy Director, and 1998 Illinois Public Health Leadership Institute participant.*

Brainstorming with other public health professionals fostered an incredible amount of energy which stimulated the flow of new ideas for better community health programs." *Elaine Ricketts, MPH, CHES, Director, Community/School Health Education; participant in the 1998 Leadership Institute.*

How we approach public health and how we plan our programs is based on the changing needs of the public. In light of this, continuing education is not only necessary, but mandatory." *Mark Matuck, Program Manager, Communicable Disease Control Service Unit; candidate for MPH in 1999.*

Udated information is crucial when we consider the many specialized areas that Environmental Health encompasses. It is important that we keep apprised of new procedures to ensure the safety of the public." *Kamala Nagaraj, LEPH, 1998 conference attendee on water well inspections, presented by the Illinois Department of Public Health and the Illinois Association of Groundwater Professionals; and attendee at the President's Food Safety Council presented by the U.S. Environmental Protection Agency.*

Training courses taught at EPA (Environmental Protection Agency) approved facilities are mandatory requirements for CCDPH lead program staff. In order to maintain licensure, lead inspectors and risk assessors must take refresher training classes and be re-examined every three years.





9. EVALUATE EFFECTIVENESS, ACCESSIBILITY & QUALITY

Evaluating our effectiveness helps to determine future health services for our communities.

Evaluation is a tool that helps assess program progress and effectiveness. In 1998, an evaluation of client and service data from the Preventive Dental Health Sealant Program of 1997 was conducted. Among the findings were that the timing of sealant application in the second and sixth grade was appropriate and effective at protecting children's teeth prior to onset of substantial decay. The data also revealed that sealants placed on teeth stayed in place at a high rate-above 90%, attesting to the quality of our dental services.



Making sure that residents are properly immunized against vaccine preventable diseases is an integral part of maintaining a healthy community. That's why measuring the **effectiveness** of our immunization programs is so important. During the year we assess immunization rates at not only all CCDPH clinics, but at 185 community clinics, local health department programs and at private providers. Doctors, hospitals, day care centers, schools and nursing homes are required to report any individual diagnosed with a vaccine preventable disease. This information is essential for developing systems to improve immunization rates.



CCDPH staff member Dr. Remedios Natividad administers a vaccination at one of our flu and pneumococcal clinics.

The Illinois Department of Public Health evaluates required monthly reports from the CCDPH Lead Program. Joseph's family was diligent in the follow up necessary to contain the lead source in their home and, as a result, Joseph's home passed reinspection. Joseph's blood level will need to be checked every three months until it reaches acceptable limits.



10. RESEARCH FOR NEW INSIGHTS AND INNOVATIVE SOLUTIONS

Finding efficient new ways of serving the health needs of the residents of suburban Cook County and responding to emerging health challenges entails timely analysis, research and reviewing successful models from around the globe.

CCDPH received recognition in 1998:

The National Association of Counties recognized CCDPH's innovation for the **RATT** (Reducing Access to Tobacco by Teens) Program. Also in 1998, the RATT Program received further recognition when it was published in the **Journal of Community Health**. The article, 'Accessibility of Cigarettes to Minors in Suburban Cook County, Illinois,' was authored by CCDPH staff, Sean McDermott, Director, Policy Development, Karen L. Scott, MD, MPH, Director, and Mary Pat Frintner, MSPH.

The Illinois Department of Human Services presented CCDPH with an award for '**Achievement in Breast-feeding Promotion**' for the WIC (Women, Infants and Children) Program. The WIC Program is a support service for low income families that assists in obtaining nutritious foods for pregnant and breast feeding women and children under five.

And...

In 1998, CCDPH began new research on 278 birth and death certificates to evaluate the link between low birth weight and infant mortality. Information from this study will be used to plan prevention programs.



Today...

Joseph is well and living a healthy life, due to the collaborative efforts of the partners to identify and remedy his illness. Although there has been much improvement in finding and treating children with high lead levels, the process to screen and provide medical treatment to children like Joseph must be vigilant. Lead-based paint remains the major source of high-dose lead poisoning. Additional resources for abatement need to be developed to continue to prevent illness and improve the health of all residents in suburban Cook County.



1998 OPERATING BUDGET

Cook County Appropriation	\$13,726,550
Other Funding Sources* (by program)	
Basic Health	1,433,498
Breast & Cervical Cancer Detection	305,000
Childhood Lead Poisoning Prevention	200,000
Comprehensive School Health Education	30,000
Day Care/Nursing Consultants	9,500
Dental Sealants	56,200
Environmental Protection Programs	
Food Inspection/Intergovernmental Agreement	90,000
Tanning Facilities Inspections	19,000
Potable Water Supply	45,300
Genetics	59,800
Health Promotion	268,700
Healthworks	502,000
HIV/AIDS	
Case Investigation	58,559
Counseling & Testing	263,200
Prevention Education	164,400
Region 8 Lead Agency	724,247
Ryan White Care Services	480,111
Infant Immunization Initiative	220,000
Maternal/Child Health	
Family Case Management	3,634,800
Family Planning	432,100
Morton Health Center	80,000
Outreach and Education	300,000
Perinatal Hepatitis Program	15,000
Primary Care	275,000
Problem Pregnancy	12,700
Service Fees	763,500
Refugee	
Health Services	67,000
Screening Exams	102,600
Sexually Transmitted Diseases	199,140
State Computer Information Link	87
Suburban Cook County Tuberculosis Sanitarium	19,800
Teen Pregnancy Prevention	
Delay of Adolescent Subsequent Pregnancy	148,700
Teen Parent Initiative	152,673
Vaccines Provided by Federal/State Sources	682,900
Vision and Hearing Screening	50,000
WIC/Nutrition	2,326,600
Total Other Funding	14,192,115
Total CCDPH Budget	27,918,665

*includes grants, contracts, and service fees





STATISTICS

COMMUNITY HEALTH SERVICES

Health Education Services

Group Attendance	5,604
HIV/STD Outreach	8,085

Dental Sealant Program

Sealants Placed	14,395
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Lead Poisoning

Reported Cases & Investigations	211
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HIV Case Management

Average Monthly Caseload	215
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STD Case Management

Average Monthly Caseload	40
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Breast & Cervical Cancer Prevention

Participants	406
Mammograms	379
Cervical Cancer Screenings	277

Vision & Hearing Program

School/Pre-School Vision Test	25,314
School/Pre-School Hearing Test	27,242

Case Management

Average Monthly Caseload	10,557
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Teen Parenting Program

Average Monthly Caseload	490
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Day Care Services

Nursing Consultations	589
Inspections	136

Vital Statistics

Certificates Filed	
Births	22,351
Deaths	14,145



STATISTICS

SELECTED REPORTABLE COMMUNICABLE DISEASES

AIDS	158
Chlamydia	2,643
E. coli 0157:H7	21
Foodborne Illness Complaints	320
Giardia	200
Gonorrhea	1,562
Hepatitis A	126
Hepatitis B	
Acute	53
Carriers	298
Measles	0
Meningitis/Bacteremia	
H. Influenza	13
Meningococcal	18
Pertussis	8
Salmonella	352
Syphilis	
Early	39
Congenital	7

CLIENT VISITS BY CLINIC TYPE

Adult Health	1,764
Ambulatory Care Clinic	630
HIV Anonymous Testing	2,039
Dental	8,286
Family Planning	12,274
Immunization	21,194
Flu	4,290
Pneumococcal	876
Prenatal	10,212
Primary Care	1,590
Refugee	630
School Based	1,598
Sexually Transmitted Diseases (STD)	4,809
Well Child Care	2,121
Women, Infants and Children (WIC)	114,693





STATISTICS

ENVIRONMENTAL HEALTH SERVICES

Day Care Facilities	
Inspections Performed	221
Food Service Establishment/Retail Food Stores	
Unincorporated Areas	
Licenses Issued	264
Inspections Performed	711
Plans Reviewed	11
Intergovernmental Agreements	
Communities Served	30
Food Facilities	1,001
Inspections Performed	2,836
Plans Reviewed	29
Mobile Home Parks	
Licenses Issued	36
Inspections Performed	45
Nuisance Complaints	
Complaints Received	104
Inspections and Enforcement Actions	295
Septic Tank Cleaners	
Permits Issued	55
Truck Inspections Performed	65
Private Sewage Disposal System	
Plans Processed	176
Lot Surveys Performed	132
Installation Inspections Performed	112
Wells/Septic System Evaluations	
Evaluations Performed	54
Inspections Performed	52
New Wells	
Permits Issued	187
Inspections Performed	186
Existing Non-Community Wells	
Surveys Performed	298
Abandoned Wells	
Wells Sealed	258
Water Supplies	
Water Sample Collected	
Non-Community	799
Private	22
Analysis Opinions Rendered	1,208
Swimming Pools and Spas	
Private Pools/Spa Plans Approved	27
Inspections Performed (Public Schools)	1,287
Tanning Facilities	
Inspections Performed	191
Lead Abatement	
Inspections Performed	197
Compliance Letters Initiated	65
Enforcement Action	3



CCDPH 1998 Employees of the Year were honored for their dedication and hard work. Clockwise from left: George Papadopoulos, Environmental Health; Marcia Fahrenwald, Communicable Disease Control; Dr. Karen Scott, Director; Mary Ann Hanley, Public Health Nurse, Southwest District; Elaine Bennett, Communicable Disease Control; Jan Borden, Integrated Health Support Services.



CCDPH staff members Valerie Webb, Steve Sewerny and Phyllis West took a moment out of their community meeting to pose for a picture.



CCDPH Communicable Disease Control staff take a breath of fresh air.



CCDPH Service Unit Directors clockwise from top left: Sandra Martell, Integrated Health Support Services; Thomas Varchmin, Environmental Health Services; Dr. Stephanie Whitfield Smith, Communicable Disease Control; Elaine Ricketts, Community/School Health Education; Dr. Sharon Perlman, Dental Health Services; Jo Rose, Family Health Care Services.





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The Cook County Department of
Public Health 1998 Annual Report was
prepared by the Office of Communications.
Kitty Loewy, Editor





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